

Date of Notification (1)							Operator (2		V EII				
	08 / 12			67 V	vnippan	y inves	tors, LLC	1					
Agencies Notified	Type Notification				Address		117	1.0	2012	//			
⊠ EPA	☑ Initial				loomfie		nue 📗	MAR 12	2012	11		87	
DEP DCA (NJAC 5:16)	Amended Amendment #				tate, Zip C				1	200			
DHSS	☐ Emergency (in			Mou	ıntain La	ikes, N	J 07046	Land	101801 6	Š.			
☐ DCA	justification)	_		Name	of Contact	t	1	1111	Telephone Num	ber	1		
(NJAC 5:23-8)	Cancellation			Ros	s Chomi	ik	A contract	***	<u>į</u>				
				FAC	ILITY IN	IFORM	ATION				e.		
Name of Facility Where A	batement is Taking	g Place (	3)					Type of Facility (4	1)				
67 Whippany Road								☐ School (K-12)					
Street Address								Subchapter 8			inac		
67 Whippany Road								Other (i.e., pri homes, etc.)	vate & commerc	iai buliu	irigs,		
City (5)								Square Feet	# of Floors	Blo	lg. Ag	je	
Whippany								180,000	3		50 ye	ars	
County (6)				Coun	ty Code (7	)(STATE	USE ONLY)	Current Use (Price	or if being demoli	shed)			
Morris						ARCHITECTURE IN CONTROL		Vacant	19				
Name of Monitoring Firm	Hired by Building (	Owner (8	3)	ASCM I	No.	Name	of Abateme	ent Contractor (9)					
Health & Safety Ser			'	0011	7	Sur	perior Aba	atement Inc.					
Street Address						Street	Address			-			
318 12th Street						2 H	enderson	Drive, Ste A					
City, State, Zip Code						City, S	State, Zip Co	ode					
Hammonton, NJ 08	3037					We	st Caldwe	ell, NJ 07006					
Project Manager for Moni			Tele	ephone I	No.	Telepl	hone No.		License No.	Mineral Elic			
Jim Proctor			6	09-704-	-8850	(97	3) 808-161	16	00411				
Start Date (10)	Schee	duled Co	mple	etion Dat	te (11)	Name	of OSHA N	Monitor					
03 / 20 /	1 2000000000000000000000000000000000000	05 /				Sup	perior Aba	atement, Inc.					
Occupancy Status During							Address						
☐ Facility Closed/Vacate				ment		- Salania		Drive, Ste A					
☐ Abatement Performed	Outside of Norma	l Facility	Hou	rs - Des	cribe		State, Zip C						
Time of Abatement: _	AMP	M/	_PM		AM			ell, NJ 07006					
Scope of Work (Check al	I that apply)					-							
		П ре-		llon			⊠ Full Con             □ Mini-End             □             □ Mini-End             □ Mini-End	tainment with Neg	ative Pressure				
<ul><li>≥3 sf or ≥3 lf</li><li>&gt;160 sf or ≥260 lf</li></ul>		☐ Rei					☐ Gloveba	a Procedure					
<u>⊠ ≥100 3i di ≥200 ii</u>		4 <del>1</del> 455000		energe:			☐ Non-Exe	empted (*) and Nor	n-Friable Proced				
			Loca							Ab	atem	ent Ty	уре
Location			lorma d Sol	ely by	A = b =		Description of		Amount	₽ Z	20	щ	щ
Asbestos-Containing TO BE ABA		Mai	nten	ance/	(i.e., the	estos Co ermal sv	stems insul	aterial (ACM) ation, surfacing,	(Specify	Removal	Repair	cap	clos
IN Facili		Cust	odial (12	Staff?	,,		VAT, or	Aso	SF or LF)	<u>a</u>	"	Encapsulate	Enclosure
(13)		Yes	No		1	othe	r miscellane	eous)				ate	
					F:	6			16,000 SF			П	
3 <sup>rd</sup> Fl. Behind Concre					Firepro	oning			10,000 31				
and Air	Shafts Ceilings												
												П	
Name of Registered Was	ste Hauler		71115	NJDEP		117,17,17	Yards of	Name of Regis		***		-	
Gary W. Gray Truc				Hauler II 09369		Waste 100		G.R.O.W.S	North Landfi	11			
City, State				09303			sal Date	City, State					
Delaware, NJ						100 March 200 C	1/2012	Morrisville	, PA				
Completed By (Print or T	vpe) Tit	le .					Signature	11.11		Date			-
Nick Petrovski	7000E-001E	Preside	nt				1/1	A Allaha	uni	3-	R.	-1>	,
NICK FELIOVSKI		roside					IMV.	11000	oun	->	0		

003504 D&S Proj. #: MS 12-96

	State o	f NJ	
Notification	of Asbe	stos Aba	atement
(Pursuant to	NJAC 8	8:60 and	12:120)

								2 may 2 may 2	E M	E 1 G	i P	7-51	3	9		
Date of Notification	n (1)		Name of	Building Ow	ner	Operator (2)			5 W	L U U	/ 店					
0 3 /0 7			ENGL	EWOOD (	CLI	FFS SCHOO	DL DI	STRICT				A CONTRACTOR OF THE PARTY OF TH	7.	V		
Agencies Notified	Type Notification	on	Street Ad	dress	_				MA	R 1 2 20	112					
☐ EPA	Initial Amended		143 C	HARLOTT	re.	PLACE		1 LX	W1731	1 1 2- 21	IL .	nummer!				
☐ DEP	The state of the s			e, Zip Code		LITCE		1 1		****			7	_		
<b>⊠</b> DOL	Amendment #:			10 Ta	OT.	IEEC MI			ACLE	Tos combo	La					
	Emergency (including			EWOOD	CL	IFFS, NJ				Telepho	no Nun	nher	-			
□ DOH	justification)		Name of (	Jontact						releptio		libei	2			
□ DCA	Cancellation		MIKE	KRISHE	R				-wasanin	_ (			fy'			_
				FA	CIL	ITY INFORMA	TION					-35n		(2) E1-4(2)		
Name of facility w	here abatement is	taking	place (3)						Ty	pe of Facility						
										Scho	ool (K -	12)				
<b>ENGLEWOOI</b>	CLIFFS SCH	OOLI	DISTRICT	1					_	⊠ Subo	hapter	8 (Other	tha	n K-	12)	
Street Address									71			te/Comm	erc	ial		
											s./Home		_	DIA	~ A c	
143 CHARLO	TTE PLACE						LINOSOF/A		-   S	iquare Feet	# of F	-loors		DIG	g. Ag	ic.
City (5)		C	ounty (6)					nty Code (7)	-				-1-			
		_	NED CONT				(Stat	e use only)		Current Use (	Prior if	being de	mol	ishe	1)	
ENGLEWOO		10000	BERGEN		_		-	Name of At at-	<u> </u>	tractor (0)						
Name of Monitorii						ASCM No.		Name of Abateme								
WESTCHEST	ER ENVIRON	MENT	AL LLC		1	00127		D & S RESTO	DRATI	ON, INC.					127	
Street Address		VIE = 17=14						Street Address								
307 NORTH V	WALNUT STRI	EET						20 California	Ave.					4,0-47		
City, State, Zip Co								City, State, Zip Co	de						//	
	TER, PA 1938	0						Paterson, NJ	07503	3						
Project Manager fo				Phone Nun	nbe	r	-11	Telephone Numb			Lice	ense Nun	nbe	r		
C 10 A → Barrier Co. C C C C C C C C C C C C C C C C C C								973-345-80				0015	9			
MATTHEW A	BRAHAM			610-431-				Name of OSHA N	Nonitor							
Start Date (10)		Sc	hed. Comp	letion Date (	11)			D & S Resto	ration,	Inc.						
04/05/12		04	/12/12				- 11	Street Address								
Occupancy Status	During Abatemer			)				20 California	Aveni	ie .						
the same of the sa	ed/vacated during						-	City, State, Zip Co	177,000,000,000,000,000,000		_		_		_	
Abatement p	performed outside	of norn	nal facility h	nours-			- 11	only, orato, Esp or								
Describe:					_		-11	Paterson, NJ	07503	3						
	ribe: NORMAL H						- 11									
	check all that apply	/)								Containment	t w/nega	ative pres	ssui	ie		
> 3  sf or $> 3$	lf 🛛	Renov	ation							vebag proced	dure					
≥160 sf or ≥	260 If	Demol	ition							n-Exempted (		Non-friab	le p	roce	dure	
1		Is loca	ation norma	ally used sole	ely							R	T	R	Е	E
Location of asbestos-co	ontaining	by ma	intenance/			Description	on of a	sbestos-containing	9	Amount		e m	1	e p	n C	n
material (ad	cm) to be	staff(	12)		-	material (				(Specify	SF or	0		a	a	C
abated in fa	icility (13)	Yes	No	N/A					*	Lrj		v e		į	p	-
		_			-	CARDET CAR	DET DA	CVING VAT MASTI	_		-	Ĭ	h		П	
BOARD OFFICE, CO		-			4	CARLET, CAR	II DA	CKING VAT MASTI				N X	-	$\overline{\Box}$	H	市
RECEPTION AREA,					4								-	닉	Η	片
BUSINESS AL													-	4		井
CONFERENCE	E ROOM		X				"			TOTAL 1,158	SQ FT		4	-	ᆜ	부
	2/11						THE STATE OF			-		_			П	
Registered Waste			JDEP Hau	ler ID#		bic Yards of V	Vaste	Name of Registe	ered La	ndfill	) FOO!	UDDU				
D & S RESTO	RATION, INC.		13506		_	O CU YDS		TULLYTOW	N, RE	SOURCE I	KECO'	VEKY			_	
City, State			32.00	Disposa				City, State	DI D							
PATERSON,				04/09	/12	-		TULLYTOV	VN, PA	1	T-		_			
Completed by (Pri		Title				Signature						ate				
BOGDAN JO			SIDENT		_						03	3/07/12	_	_	_	
ASB-41		* Do no	t use this fo	orm for asbe	sto	s licensure ex	empted	d activities.								

# 31108

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

Date of Notification (1)							vner/Operator (2) OD Associates, LL	.c	UE	m		2711
03/09/2012 Agencies Notified		Notification	Type		Street Add	dress	1 - \ \		77	HIIII	1	
Agencies Notified		Notification	Type			Route 1 N	orth MAR	122	010	HH		
()EPA		( X )Initial N				e, Zip Code	9	1 c Z	UIZ	100		
( ) DOL			d Notification		North Bru		, i		1			
(x ) DOH		( ) Cancell	ea		Name of 0		ASICOLO	Phone		. 1		
() DCA					Nimish P	atei				- ,		
				FACILITY IN	FORMATIC	N		******		الــــا		
Name of Facility Where A	Abatement is Ta	aking Place (	3)		Type of F	acility (4)		The day	de un i		1	
North Brunswick TOD A	Associates, L	LC			() Schoo	I (K-12)	U IC 40\			9.1		
Buildings 4,5,6,7,11 and	d 42 (One Stru	cture)			() Subcha	apter 8 (otr	ner than K-12) te & commercial bld	ae hom	nes etc			
Street Address					(A) Outlet	(i.e. piiva	le & commercial bio	gs., non	163, 010.			
2300 US Route 1					Sq. Feet	150,000 S	F No. of Floors	: 2				
City (5)	County (6)		County Co	de (7)	1							
North Brunswick	Middlesex		(State Use			78 yrs			DI.I (-		. 055	Dist.
			1		Current U	se (prior if	being demolished)	Vacant	Blag. (p	rior us	e Omice	Blag.)
		0 (0)	ASCM No.				Name of Co	ntractor	(9)	-		
Name of Monitoring Firm Health & Safety Service		. Owner (8)	00117				Superior Al					
nealth & Salety Service	:5, IIIC.		00111									
Street Address		with every		1,59	Street Ad	dress	Victoria de					
318 12th Street					2 Hender	son Drive	, Ste A					
					011 01 1	7: 0 1:						125771-001
City, State, Zip Code						e, Zip Code dwell, NJ						
Hammonton, NJ 08037					vvest Cal	uwell, NJ	07000					
Project Manager for Mon	itoring Firm	Telephone	Number		Telephon	e Number		Licens	e Numbe	er		
Jim Proctor	illoring Firm	609-704-88			(973) 808			00411				
Jiii i roctor			70.700									
Scheduled Start Date (10	0)		Completion D	Date (11)		OSHA Mor						
3/19/2012		4/13/2012				Abateme	nt, Inc.		<u> </u>			-
Occupancy Status Durin ( ) Facility Closed/Vacate	ed During Entir	e Period of A	batement		Street Ad 2 Hender	aress rson Drive	, Ste. A					
( ) Abatement Performed (X) Other – Describe: Va	Outside of No	mai Facility	nours –		City Stat	e, Zip Cod	Α					
(A) Other - Describe. V	acant blug.					dwell, NJ						1
Source of Work (Check a	all that apply)											
(X) Demolition () R	enovation			0.05 10.5	00015401	4) / \ N.A:	inor Proj. (<25 SF o	- <10 LE	ACM)			
(X ) Large Proj. (>160 SF (X ) Full Containment w	F or >260 LF A	CM) ( ) SM F	roj. (>25<16	USF OF > 1U <	200 LF ACIV	ire ( ) No	n-friable Procedure	for Asbe	stos Ro	of Rem	oval.	
Location of Asbestos-Co	ith Negative Pr	essure (A	ally I lead	Description of	ACM (i.e. t	hermal A	Amount (Specify SF	or LF)	Abater	nent Ty	pe	
Material (ACM) in Facility	v (13) Sol	ely by Maint.	Custodial	systems insula	ation, surface	cing,						
Material (Hem) in Fasing		ff? (12)		VAT, or other	miscell.)				Rem.	Rep.	Encap I	Enclose
	N/		NO				2015	-		ixep.	T	Lilciose
Bldg. 6 – Boiler Room	X		-	Thermal Syst		tion	60 LF 4,200 SF	garage and	X		_	
Bldg. 4, 7, 42 – 1 <sup>st</sup> & 2 <sup>nc</sup>	Floors X			VAT and Mas		ulation	180 EA	•	X			
Bldg. 4 & 5 – 1 <sup>st</sup> Floor	X		-	Fiber Materia	A Robind R	lua	4,000 SF	- Merce	X			
Bldg. 11 & 42 - Exterior	г Х			Window Barr		ide	4,000 01					
				WINGOW Dan								
Name of Reg. Waste Ha	uler	NJDEP Wa	ste Hauler II	) #	Cubic Ya	rds of Was	ste		of Reg.			
Service Transport Gro		SW2117			160			Miner	va Lan	dfill		1
City, State						Disp. Date 4/13/2011		9000 %	Ainerva I	hens		
New Castle, DE						4/13/2011		13.03.573.57	sburgh (		38	
		Titlo			Signature	Δ	1 11	Date	sourgii (	,11 1100		
Completed by (Print or T	ype)	Title   President			Signatur	71	1111	03/09/	2012			
Nick Petrovski		Fresident				Hil	116					
				7	1	nous	wono					
							C:\WOR	D\MYDC	CSVASB	ESTOS	9/18/	00

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

					Tales CDuil	Idina Our	ner/Operator (2)	AEGETW	眉	IP	7	1 15
Date of Notification (1)							114			-11		
3/9/2012					BASSETT		ATES			11 1	11	
Agencies Notified	Type Notifica	ation			Street Addre	SS CERTIFIE	ANDRUUE OND	FLR, KAP217 2 201	2	$\mathbb{I} U$		
□ EPA	Initial	200			382 SPRING	GFTELD	AVENUE, 2ND	FLR, KW 217 - 201	<u></u>	1	+	
☐ DEP	Amend				City, State, Z					Ì	1	
□ DOL	Emerge		cluding	l	SUMMIT,			Arrest of the second	Teler	hone	Numi	ber
□ DOH	justifica				Name of Cor		Not received	Lichasko .	10.0		1	7
DCA	☐ Cancel	lation			DAVE D'A			<del></del>	<u>.                                    </u>	-	1	
					ACILITY IN	FORMA	TION	Type of Facility (4)			1	
Name of Facility Where A	batement is T	aking P	lace (3	)				School (K-12)				
OFFICE BUILDING								Subchapter 8 (Othe	or that	K-12	2)	
Street Address								Other (i.e., private &				ldinas'
30 MAPLE STREET											Bldg.	
City (5)								Square Feet	# 01 1	10013	Diag.	. r igo
SUMMIT								Current Use (Prior if bei	na do	molie	hed)	
County					County Code	(7) (STA	ATE USE ONLY)	Current Use (Prior ii bei	ng de	HOIIS	icu)	
MERCER								1 (0)				
Name of Monitoring Firm	Hired by Build	ing Owr	ner (8)		ASCM No.		of Abatement Cont					
AMERITECH SERVIC						CREA	M RIDGE ENVI	RONMENTAL INC.				
Street Address		-cardinal David			00%	Street A						
78 E. ATLANTIC WAY	,						CK FOREST R	OAD				
City, State, Zip Code				City, Sta	ate, Zip Code							
LAVALLETTE, NJ 08'	735				one - was even come		LTON, NJ 0869	1	r			
Project Manager for Monit		Telep	hone N	lo.	18	Telepho	one No.		SEASON SAN	ise No	0.	
ROD MORRIS		732-6	64-778	88		609-890	0-7110		0067	6		
Start Date (10)		Sched	duled C	complet	ion Date (11)	Name o	of OSHA Monitor					
3/12/2012		3/12/2	2012			N/A	77,000					
Occupancy Status During	Abatement (C	Check o	nly one	<del>)</del>		Street A	Address					
☐ Facility Closed/Vaca	ted During En	tire Peri	od of A	Abateme	ent			The state of the s				
x Abatement performed of						City, Sta	ate, Zip Code					
5:00 pm start time												
Scope of Work (Check all	that apply)							☐ Full Containment w	ith Ne	egative	e Pres	ssure
≥ 3 sf or ≥ 3 lf					Renova	ition		☐ Mini-Enclosure				
					Demolit	tion		Glovebag Procedur			0 N	
134 _ 100 01 1								Non-Exempted (*)				
		T Is	Locat	ion					Abat	emen	t Type	•
	Ctaining	No	rmally	Used	Descriptio	n of Asbe	stos Containing	A LOSSIFICE OF	71		E	m
Location of Asbestos- Material (ACM) TO BE			Solely			CM) (i.e.	thermal systems	Amount (Specify SF or LF)	l en	Re	cap	1 2
Facility (13)		Maint	enance	e/Custo	insulation	, suпасіпі miscellan	g, VAT, or other	Li )	Remova	Repair	Encapsulate	Enclosure
r domity (10)		Yes	Staff?	N/A	1	mscenan	leous)		<u>m</u>		ate	(i)
THE CONTRACTOR		+	110	1	PIPE INSU	LATION	1	102 LINEAR FT.	X			
BASEMENT		+	-	+	THROUGH			700 SQ. FT.	X			
VAT		+	-	+	Timocon							
		+		-							1	
(2) (1) (1) (1)	- Harden				NJDEP Waste		Cubic Yards of	Name of Registered La	ndfill	-		
Name of Registered Wast	e Hauler				Hauler ID No.		Waste					
LUCAS DEMOLITION					22384		6 YD	GROWS				
					22001	- //	Disposal Date	City, State				
City, State							3/14/2012	MORRISVILLE, PA				
HIGHTSTOWN, NJ		Title				Signatu	n 27-Mar,	00	Date			
Completed By		Title	TIN TIT	IOD			vid f	Dondeen	3/9/2			
DAVID D'ANDREA		PRES	SIDEN	(1		1/4/	VUL T				04741432	
ASB-41							V					

<sup>\*</sup> Do not use this form for asbestos licensure exempted activities

CRE CK#7693

### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 12:120) CHECK #21708

ate of Notification (1) 03/08/20	12		N	lame of Build	ing Owner EALTH S	Operator (2)					11
	Type Notificat	ion	S	treet Addres	s		MAR 12	2012	ŊĹ.		
gencies Notified	Initial		7	50 BRUNS	WICK AV	ENUE	NOPALL 1 ***		-	- 1	7:
EPA DER		d Amendment #_		ity, State, Zi					1	k.	
DEP DEP		ncy (including	I	RENTON,	NJ 08638			Teleph	one N	lumbe	r
DOL DOL	justificati		7/4	lame of Cont				10.00	7177		
DOH DOH	Cancella		P	AUL BOUL	LTER	(au -	1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1	-			-
□ DCA			FA	CILITY INF	ORMATI	ON	=	<del></del>	1		-
lame of Facility Where	Abatement is Ta	king Place (3)				Harris 1.75 °	Type of Facility (4)				
lame of Facility vitters	CVCTEMS/ROI	T.ER #1					School (K-12) Subchapter 8 (Oth	or than	K-12)		
APITAL HEALTH	SISTEMBRO	DERC	7.5				Other (i.e., private	9 comm	nercia	l build	ina
Street Address	· · · · · · · · · · · · · · · · · · ·							# of FI	corre	Plda 4	lne
50 BRUNSWICK A	VENUE						Square Feet	# OT FI	OUIS	olug. r	ıyo
City (5)							and the second s	1		1\	
TRENTON, NJ 086	38		To	County Code	(7) (STAT	E USE ONLY)	Current Use (Prior if be	ing den	IOUSI	ea)	
County			1	Journey -							_
MERCER		O (D)		ASCM No.	Name of A	Abatement Contr	actor (9)				
Name of Monitoring Fi	rm Hired by Buildi	ng Owner (8)	ľ	AGOIN NO.	CREAM	RIDGE ENVI	RONMENTAL INC.				_
MECS					Street Ad						
Street Address						K FOREST R	DAD				
P.O. BOX 341						e, Zip Code			575011120		
City, State, Zip Code						FON, NJ 08691					
CROSSWICKS, NJ	08515				Telephon			Licens	se No		
Project Manager for M	lonitoring Firm	Telephone No.						00676	5		
BILL WEISBGARE		609-298-4070			609-890-	OSHA Monitor				W. 1	
Start Date (10)		Scheduled Cor	npletio	on Date (11)		OSHA MOMO				. Water	
03/09/20	12	03/10	201	12	MECS	13			- TOTAL	77.	
Status Du	ring Abatement (C	check only one)			Street Ad						
- Facility Closed N	acated During En	tire Period of Au	ateme	nt	P.O. BO						
Abatement Perfo	med Outside of I	Normal Facility H	ours			te, Zip Code	515				
EVENING WORK					CROSS	WICKS, NJ 08	*XFull Containment	with Ne	gative	Press	sure
Scope of Work (Chec	k all that apply)						☐ Mini-Enclosure				
Scope of Work (Cree	it an enac -pp 37			☐ Renova			Glovebag Proced	ure			
≥ 3 sf or ≥ 3 lf	n IF			☐ Demoli	tion		Non-Exempted (*)	& Non-	Friab	le Pro	ced
≥ 160 sf or ≥ 260	וו ע						Noti-Exempled (	Ahate	ment	Туре	
		Is Locatio	n					Abate	1	Encapsulate	
			sed	Description	n of Asbes	tos Containing	Amount (Specify SF of	r Z	-70	nca	Enclosure
		Normally U		Makerial (C	(CIVI) (I.e. ti	hermal systems	LF)	1 8	epe	psi	SO
Location of Asbe	stos-Containing	Solely by	,		aurfacina	VAI or ome		<	=	aj	Te
Material (ACM) TO	BE ABATED IN	Solely by Maintenance/	/ Custo		, surfacing	, VAT, or other		<u>m</u>		0	
Location of Asbe Material (ACM) <u>TC</u> Facility	BE ABATED IN	Solely by Maintenance/	/ Custo 12)		, surfacing miscellane	, VAI, or other eous)		_	-		_
Material (ACM) TC Facility	) BE ABATED IN (13)	Solely by Maintenance/	/ Custo	insulation	, surfacing miscellane	eous)	600 sf	X		-	
Material (ACM) TO	) BE ABATED IN (13)	Solely by Maintenance/	/ Custo 12)		, surfacing miscellane	eous)	600 sf	_			
Material (ACM) TC Facility	) BE ABATED IN (13)	Solely by Maintenance/	/ Custo 12)	insulation	, surfacing miscellane	eous)	600 sf	_			
Material (ACM) TC Facility	) BE ABATED IN (13)	Solely by Maintenance/	/ Custo 12)	insulation	, surfacing miscellane	eous)		X			
Material (ACM) TO Facility  I 2nd F10	0 BE ABATED III (13) Or	Solely by Maintenance/	/ Custo 12)	insulation Floor	, surfacing miscellane Tile	eous)	600 sf	X			
Material (ACM) TO Facility  I 2nd F10	0 BE ABATED III (13) Or	Solely by Maintenance/	/ Custo 12)	insulation	surfacing miscellane Tile	Cubic Yards of	Name of Registered L	X			
Material (ACM) TO Facility  I 2nd F10  Name of Registered	or  Waste Hauler	Solely by Maintenance/	/ Custo 12)	Floor NJDEP Wast	surfacing miscellane Tile	SOUS)  SOUSE	Name of Registered L	X			
Material (ACM) TO Facility  I 2nd F10	or  Waste Hauler	Solely by Maintenance/	/ Custo 12)	Floor	surfacing miscellane Tile	Cubic Yards of Waste 5 Y D S	Name of Registered L GROWS City, State	X andfill			
Material (ACM) TO Facility  I 2nd F10  Name of Registered  LUCAS DISPOSA	or  Waste Hauler	Solely by Maintenance/	/ Custo 12)	Floor NJDEP Wast	surfacing miscellane Tile	Cubic Yards of Waste 5 Y D S	Name of Registered L GROWS City, State	X andfill			
Material (ACM) TO Facility  I 2nd F10  Name of Registered  LUCAS DISPOSAL  City, State	OR  Waste Hauler L SYSTEMS	Solely by Maintenance/dial Staff? Yes No	/ Custo 12)	Floor NJDEP Wast	n surfacing miscellane	Cubic Yards of Waste 5YDS  Disposal Date .03/12/72	Name of Registered L	X andfill		/12	
Material (ACM) TO Facility  I 2nd F10  Name of Registered  LUCAS DISPOSA	OR  Waste Hauler L SYSTEMS	Solely by Maintenance/	Custo 12) N/A	Floor NJDEP Wast	n surfacing miscellane	Cubic Yards of Waste 5 Y D S	Name of Registered L GROWS City, State	X andfill		/12	

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

Name of Building Owner / Operator (2) Date of Notification (1) VERIZON COMMUNICATIONS 3/8/2012 Street Address Type Notification Agencies Notified 15 EAST MONTGOMERY PLACE **EPA** MAR 1 2 2012 City, State & Zip Code Initial DEP PITTSBURGH, PA 15212 Amended X DOL Telephone Number Name of Contact Emergency DOH ASSLETOS EN ALEX BAYLOR Cancellation DCA **FACILITY INFORMATION** Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Hammonton Central Office - VERIZON Subchapter 8 (Other than K-12) Street Address Other (i.e. private & commercial buildings, homes, etc.) 213 South 3rd Street Bldg. Age Square Feet # of Floors County Code (7) County (6) City (5) Current Use (Prior if being demolished) **Atlantic** Hammonton Verizon communication center Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. BRISTOL ENVIRONMENTAL INC USA Environmental Street Address Street Address 1123 BEAVER STREET 8436 Enterprise Ave City, State & Zip Code City, State & Zip Code BRISTOL, PA 19007 Philadelphia pa 19153 License Number Telephone Number Telephone Number Project Manager for Monitoring Firm 00509 215-788-6040 267-784-8651 Mark Jenkins Name of OSHA Monitor Scheduled Completion Date (11) Scheduled Start Date (10) BRISTOL ENVIRONMENTAL INC 3/30/12 3/26/12 Street Address Occupancy Status During Abatement (Check only one) 1123 BEAVER STREET Facility Closed/Vacated During Entire Period of Abatement City, State & Zip Code Abatement Performed Outside of Normal Hours - 7am to 3pm BRISTOL, PA 19007 Describe: 7:00 AM - 1:00 PM Facility Occupied During Abatement Scope of Work (Check all that apply) Full Containment with Negative Pressure Mini-Enclosure Renovation ≥3 sf or ≥3 lf Glove Bag Procedures Demolition ≥160 sf ≥260 lf Non-Exempted and Non-Friable Procedure Abatement Type Amount Description of Is Location Location of (Specify Asbestos-Containing Normally Used Asbestos-Containing Encapsulate SF or LF) Material (ACM) Enclsoure Solely by Material (ACM) Remova Repair (i.e., thermal systems Maintenance or TO BE ABATED insulation, surfacing, VAT Custodial Staff? in Facility or other miscellaneous) (12)(13)N/A Yes No 770 SF Floor tile and mastic X Basement Mech Rm and Boiler Room Name of Registered Landfill NJDEP Waste Cubic Yards Name of Registered Waste Hauler of Waste Hauler ID No. MINERVA LANDFILL 8 20990 SERVICE TRANSPORT GROUP, INC. City, State Disposal Date City, State WAYNESBURG, OH 3/30/2012 NEW CASTLE, DE 19720 Date Signature Title Completed By (Print or Type) atrick I De Caro/gl 3/8/2012 Estimator Patrick T. DeCaro

063516

D&S Proj. #: MS 12-102

		-0/6						[[]	S I W	E I	7 ,				
Date of Notification	n (1)	Nar	me of Buildir	ng Owner	Operator (2)		二前列基	100	SIV		and the		70.00		
10 13 1/10 19	1/11/2	T	HE ESTA	TE OF M	ARIE RIC	HIE					1				
Agencies Notified	Type Notification		et Address					MAR	1 2 2012		-				
☐ EPA	Initial Amended	3	82 VAN I	YKE A	VENUE					- Faces	8				
☐ DEP	Amendment #:	1.00	, State, Zip				1 1	ASRESTI	S CONTROL &	1					
DOL	Emergency	-   1	HALEDON	N, NJ			W *******		TESHIC			-			_
<b>⋈</b> DOH	(including		ne of Conta					44	Telephone	e Number	#EGADITA			0)	
☐ DCA	justification)		ALISA KO	DLENUT					ethilest i		10 m 10 m				e e
	Cancellation		12.011		ITY INFORM	ATION									2
			n (2)	TAOIL				Тур	e of Facility (	4)					
Name of facility v	where abatement is	taking piac	e (3)							I (K - 12)		2000	830340		
THE ESTATI	E OF MARIE RIC	CHIE							Table 1	apter 8 (Ot Private/Co			12)		
Street Address									Other (	Homes, et	c.	Jiai			_
382 VAN DY	KE AVENUE							Sq	uare Feet	# of Floor:	3	Ble	dg. A	ge	
City (5)		Count	y (6)				ty Code (7)	_		to if hair		liobe	) d)		_
			2110			(State	e use only)	C	urrent Use (P	rior it being	g demo	nsne	(0)		
HALEDON			SAIC	———	ASCM No.	$_{\rm TT}$	Name of Abateme	nt Contr	actor (9)						-
Name of Monitor	ring Firm Hired by Bl	lag. Owner	(0)		AGGIVI NO.		D & S RESTO								
						-	Street Address								_
Street Address							20 California	Ave.							
City, State, Zip C	ode						City, State, Zip Co	de							
Oity, Otato, E.P.							Paterson, NJ			License	Mumb	0.5			=
Project Manager	for Monitoring Firm		Pho	ne Numbe	er		Telephone Number 973-345-80			A THE RESIDENCE OF THE PARTY OF	0159	eı			
							Name of OSHA M			<u></u>			_		=
Start Date (10)		Sched.	Completion	n Date (11	)		D & S Restor		Inc.						
03/20/12		03/29	/12				Street Address								596
	us During Abatemen						20 California	Avenu	е						=
☐ Facility clo	sed/vacated during	entire perio	d of abaten	nent.			City, State, Zip Co	ode	Ti Ti						
Abatemen	t performed outside	of normal f	acility hours	;- 			D	07502							
Other-Des	scribe: NORMAL H	OURS					Paterson, NJ		Containment	/pogative	nrece	ure	=		
Scope of Work	(check all that apply	<i>i</i> )						_	-enclosure	Willegasive	piese	uic			
$\ge 3 \text{ sf or } > 3 $	<u>3</u> If ⊠	Renovatio	n					Glov	ebag proced	ure				226	
≥160 sf or	r ≥260 lf	Demolition						☐ Nor	-Exempted (	*) and Non	-friable	Pro	E	1000	_
Location	of	Is location	n normally u enance/cust	ised solely					Amount		e	e	n	l n	
asbestos-	-containing (acm) to be	staff(12)	enance/cust	odiai		tion of a I (ACM)	sbestos-containin	g	(Specify		o	a	a	I C	
materiai ( abated in	facility (13)	Yes	No	N/A	1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				LF)		v e	l i	р	-	Į.
				1	PIPE INS	ULAT	ION		110 L FT						]
BASEMENT					1			almost the					ΠĒ	]   L	<u>_</u>
				-									I	]   _	1
		-			1							上	ᆜ上	<u> </u>	<u> </u>
-					1										1
Registered Was	ste Hauler		EP Hauler I	- · · ·	Cubic Yards o	f Waste	Name of Regist	ered La	ndfill	RECOVE	RY				
D & S REST	ORATION, INC.		506	Disposal	2 YDS	-	City, State	VIN, KI	DOURCE!						
City, State	NI 07502			03/21/			TULLYTO	WN, P	Α						
Completed by (	(Print or Type)	Title			Signature		1			Date	0/12				
BOGDAN J		PRESII	DENT							03/0	3/12				_
		* Do not us	ee this form	for asbes	tos licensure	exempte	ed activities.								

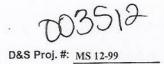
003510

D&S Proj. #: MS 12-97

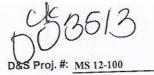
							NECET	11/2 5	· long-transport		, i	a company
Date of Notification (1)	Na	me of Build	ding Owne	r/Operator (	(2)			世追	ln			
0  3  / 0  8  / 1  2		INA HO						1	111	11		
Agencies Notified Type Notificati	on Stre	eet Addres	SS			14 6	MAR 12	2012	111	1	-	
_		39 WILLO	The state of the s	EET		4		1	The state of	1		
DEP Amendment #:	Cit	y, State, Zi	ip Code				ASSES TO THE					
☑ DOL ☐ Emergency	(	GLEN RI	DGE, N.	Ī		The state of the state of	The state of the s	11. 8	A CALCULATION			
DOH (including	Nar	me of Cont	tact				Telephon	e Number		,		
justification)		TINA HO	N					" Uld. A.s. "		į		
Cancellation		TINA IR							7.,	126		
			FACI	LITY INFOR	RMATION		T=					
Name of facility where abatement is	taking plac	e (3)					Type of Facility (	4) I (K - 12)				
TINA HON								apter 8 (Othe	or the	n K.	12)	
								Private/Com			12)	
Street Address							Bldgs.	Homes, etc.				
39 WILLOW STREET			1,000				Square Feet	# of Floors		Blo	dg. Ag	е
City (5)	Count	y (6)			5.400 (5.400)	ty Code (7)			_L			
					(State	e use only)	Current Use (P	rior if being o	demo	lishe	:d)	
GLEN RIDGE	ESS					Name of Abatemen	ot Contractor (9)					_
Name of Monitoring Firm Hired by	3ldg. Owner	(8)		ASCM No								
						D & S RESTOR	RATION, INC.			_		
Street Address						Street Address						
						20 California				_		
City, State, Zip Code						City, State, Zip Cod						
						Paterson, NJ (		License N	umb			
Project Manager for Monitoring Firm	1	Ph	one Numb	er		Telephone Number 973-345-802		001		51		
						Name of OSHA Mo				_		
Start Date (10)	Sched.	. Completic	on Date (1	1)		D & S Restora						
03/23/12	03/30	/12			- 11	Street Address	ition, me.					
Occupancy Status During Abateme						20 California A	Venue					
Facility closed/vacated during			ment.			City, State, Zip Cod			_	_		
Abatement performed outside	of normal f	acility hour	rs-									
Describe:NORMAL.I	HOURS					Paterson, NJ (	07503			Original Institute		
Scope of Work (check all that app							Full Containment	w/negative p	ressi	ıre		
		n					Mini-enclosure					
						₽	Glovebag procedu				. stores	
≥160 sf or ≥260 lf	Demolition		1 1 1				Non-Exempted (*	and Non-tri	able R T	Proce R	E	
Location of		n normally enance/cus				-ttt-ining	Amount		е	е	n	E n
asbestos-containing material (acm) to be	staff(12)				ial (ACM)	sbestos-containing	(Specify	SF or	m o	p a	c a	C
abated in facility (13)	Yes	No	N/A	A.G. PAGE	**************************************		LF)		٧	i	p	L
			7	DIDE IN	SULATI	ON	80 L FT		e X	П		
BASEMENT		LX	4	THEIN	SOLATI		00211			Ħ	片	H
			#-	<del></del>					H	一	片	〒
			-	-					H	금	片	Ħ
			4	<del> </del>					뉘	금	片	H
		<u> </u>	10# 1	Cubic Yards	of Maste	Name of Register	ed Landfill			ш	ГП	1"
Registered Waste Hauler D & S RESTORATION, INC		EP Hauler 506		Jubic Yards 1 YD	UI VVASIE	TULLYTOWN	N, RESOURCE R	ECOVERY	Z.			
			Disposal			City, State						
City, State PATERSON, NJ 07503			03/26/			TULLYTOW	N, PA					
Completed by (Print or Type)	Title			Signatur	e			Date				
BOGDAN JOLDZIC	PRESID							03/08/1	2			
ASB-41	* Do not us	e this form	for asbes	tos licensure	e exempte	d activities.						

CK03514

Das Froj	. #- WIS 12-101	_					MAE	P F			į.			
Date of Notification	$\frac{9}{1}/\frac{1}{1}$	KA	e of Building (							in the second se				
Agencies Notified	Type Notificatio Initial Amended		et Address WILLIAM	S STR	EET			An i	Z 2012					
☐ DEP	Amendment #:_	City,	State, Zip Co	de			A. I	ES S	COUNTY INC.					
□ DOL	Emergency		OSELLE PA	ARK, N	۷J				Telephone	Number	1		-111	
☑ DOH	(including justification)	Nam	e of Contact						Telephoni	- Italiibei	4			
☐ DCA	Cancellation	K	ATHY BRO	GOSG	OWSKI								-	
				FACILI	TY INFORMA	ATION								
Name of facility	where abatement is	taking place	(3)					Ту	pe of Facility (	4) I (K - 12)				
	GOWGOWSKI								Subch	apter 8 (Ot Private/Co			2)	
Street Address								IL	Bldgs./	Homes, et	c.			
42 WILLIAN	M STREET							S	quare Feet	# of Floors	5	Ria	g. Ag	3
City (5)		County					Code (7) use only)	-	Current Use (P	rior if being	demo	lished	)	_
ROSELLE I	PARK	UNIC		-	ASCM No.	IIN	ame of Abateme	ent Con	tractor (9)					
Name of Monito	oring Firm Hired by E	slag. Owner	(0)		ASCIVI NO.		D & S RESTO							
							treet Address						- 3	
Street Address							20 California							
City, State, Zip C	Code					Ci	ty, State, Zip Co							
,							Paterson, NJ		3	License	Numbe	er e	-	
Project Manage	r for Monitoring Firm		Phone	Numbe	r		elephone Number 973-345-80			A CONTRACTOR OF THE PROPERTY O	0159			
							lame of OSHA N							
Start Date (10	)	Sched.	Completion D	ate (11)	V.		D & S Resto	ration,	Inc.					
03/23/12		03/30/				5	Street Address	C.						
Occupancy Stat	tus During Abateme	nt (Check on	ly one)				20 California city, State, Zip Co		ue	<b>_</b>		-		_
Abatemer	osed/vacated during nt performed outside	of normal fa	d of abatement acility hours-	l.		_	Paterson, N.		3					
Other-De	escribe: NORMAL I					_ 11	raterson, 14.	104000000	I Containment	w/negative	press	ure		
Scope of Work	k (check all that app >3 If		1					Mir Glo	ni-enclosure ovebag proced	ure			001#10101046	
≥160 sf c	or ≥260 lf	Demolition						∐ No	n-Exempted (*	) and Non-	R	R	E	
	of s-containing (acm) to be	Is location by mainte staff(12)	normally use nance/custodi	d solely al			bestos-containin	g	Amount (Specify LF)	SF or	e m o	e p a	n c a	E n c L
	n facility (13)	Yes	No	N/A		ACC					e e	<u>'</u>	р	<u> </u>
BASEMEN	Γ		X		BASEME	NT			91 L FT				片	쓔
									-	_	쓔	H	H	븀
				_							計			盲
5	este Hauler	INID	EP Hauler ID#	T	Dubic Yards o	f Waste	Name of Regis	tered L	andfill	DECOME.	D37			
Registered Wa	TORATION, INC		506		1 YD			WN, R	ESOURCE I	CECOVE.	KY			
City, State				sposal [ 03/24/1			City, State TULLYTO	WN, P	PA.					
	N, NJ 07503	Title	L		Signature		L			Date	/// 2			
BOGDAN	(Print or Type) JOLDZIC	PRESID	ENT			ava	1 activities			03/09	9/12	_	_	
ASD 41		* Do not us	e this form for	asbest	tos licensure	exempted	activities.							



Date of Notification	n (1)	Nar	ne of Buildi	ng Owner	/Operator (2)								
10 13 1/10 18			IARILYN	BECKE	R								
Agencies Notified EPA		11000	eet Address		) AVENUE		MAR 12	2012   3/1					
☐ DEP	Amended		, State, Zip		AVENUE					_			
□ DOL	Amendment #:												
	Emergency (including		IO-HO-K					Telephone I	Number	-		-	
□ DOH	justification)	Nan	ne of Conta	ici		204.7		11 mar 11 11 11 11 11 11 11 11 11 11 11 11 11					
☐ DCA	☐ Cancellation		MARILY	N BECK	ER							-	
				FACIL	ITY INFORM	ATION		Type of Facility (4)			-		
Name of facility w	vhere abatement is	taking place	e (3)				*	School (					
RESIDENTIA	L BUILDING,	MARILYN	BECKE	R				Subchap	ter 8 (Othe			2)	
Street Address								Other (Pr Bldgs./Ho	rivate/Com omes, etc.	merc	lai		
730 HOLLYV	WOOD AVENU	E						Square Feet #	of Floors		Bldg	g. Ag	Э
City (5)		County	/ (6)				y Code (7) use only)	Current Use (Prio	or if heing (		lished	1)	_
HO-HO-KUS	3	BER	GEN						i ii being e			,	
	ing Firm Hired by I	Bldg. Owner	(8)		ASCM No.		lame of Abatement	Contractor (9)					
							D & S RESTOR	ATION, INC.					
Street Address						-	treet Address						
Succernations							20 California A	ve.					
City, State, Zip Co	ode		-0.5			c	ity, State, Zip Code						
O.I.J., O.I.I.I., — P							Paterson, NJ 0	7503					
Project Manager	for Monitoring Firm	1	Pho	ne Numb	er	T	elephone Number		License N		er		
1 Tojoot Manago.							973-345-8020	)	001	59			
		ICahad	Completion	Date (11	1	<u> </u>	Name of OSHA Mor						
Start Date (10)		Scried.	Completion	i Date (i i	,		D & S Restorat	tion, Inc.		_		_	
03/19/12		03/28					Street Address						
	s During Abateme						20 California A						
Abatement	sed/vacated during performed outside	entire perio of normal fa	d of abaten acility hours	nent. 5-			City, State, Zip Code	е					
Describe:	cribe: _NORMAL I	IOURS				_	Paterson, NJ 0	7503		_			
	check all that app							Full Containment w/	negative p	ressu	ıre		
>3 sf or >3			0					Mini-enclosure					
							¥	Glovebag procedure Non-Exempted (*) a	end Non fri	ahla	nroce	dure	
≥160 sf or	≥260 lf	Demolition						Non-Exempled ( ) a	IIId Non-III	R	R	E	923
Location o	ıf	Is location	normally unance/cust	ised solely odial				Amount		е	е	n	E n
asbestos-		staff(12)	nance/ode	ouidi		ition of as I (ACM)	bestos-containing	(Specify SI	For	m o	p a	c a	c
material (a	facility (13)	Yes	No	N/A	materia	ii (AONI)		LF)		٧	i	p	L
		163	INO	14/74				00 I FT		e M	<u>-</u>	П	
BASEMENT			X		PIPE INS	ULATIO	ON	90 L FT			<u> </u>	井	+-
										ᆜ	ᆜ	부	뷰
					1					$\sqcup$	$\underline{L}$	Ц	닏
					1								
		-			1								
Registered Wast	e Hauler	INIDE	EP Hauler I	D# 1 (	Cubic Yards o	f Waste	Name of Register	ed Landfill			17	c.:=056 <u>1</u> 4	
D & S RESTO	ORATION, INC		606		1 YD		The second secon	N, RESOURCE RE	COVER	Y			
City, State		I		Disposal I			City, State						
PATERSON	, NJ 07503			03/20/	12		TULLYTOW	N, PA	T=				
Completed by (F		Title			Signature				Date	2			
BOGDAN JO		PRESID							03/08/1	2		_	
ASB-41		* Do not us	e this form	for asbes	tos licensure	exempted	l activities.						



			11.11 - Our	or/On	porator (2)			71 12	112 15 1	W G	No.	7	re-coeding	
Date of Notification	n (1)		Building Own						VS (to ()	<u> </u>				_
Agencies Notified	Type Notification	Street Add		, VV IC.										
EPA	Initial		ALDWICE	ζAV	ENUE				MAR 12	2012	11-11	_		=_
☐ DEP	Amended Amendment #:		, Zip Code		- W N			1	Francisco de la Seguina de La Carta de La		and a second	14		
DOL.	Emergency	-   WALI	OWICK, N	J				A.	86281: (3 CQ)	Mumbar	1			_
☑ DOH	(including	Name of C					***	er e	Telephone	Number		á		
□ DCA	justification)  Cancellation	EILE	EN STAN	EWI	CZ		<b>%</b>				.9954	1		_
	Cancellation		FA	CILIT	Y INFORMA	TION								_
55 1114	where abatement is ta	aking place (3)						Тур	e of Facility (4	1)   (K - 12)				
Name of facility	where abatement is to	annig piese (-7								apter 8 (Ot	her than	K-12	)	
EILEEN STA	NIEWICZ							- 1	Other (	Private/Co	mmercia		Ŝ.	
Street Address									Bldgs./	Homes, et	c.		Age	
138 WALDV	VICK AVENUE							= Sq	uare Feet	# of Floors	5	Bldg.	Aye	
City (5)		County (6)					Code (7) se only)		urrent Use (P	rior if being	demolis	shed)		_
		DEDCEN				•								_
WALDWIC	K	BERGEN		TA	SCM No.	Na	me of Abatem	nent Conti	ractor (9)					
Name of Monito	oring Firm Hired by Blo	ug. Owner (5)					& S REST	ORATIO	ON, INC.					
				_L=			reet Address							
Street Address							20 Californi	a Ave.				-		_
						- Cit	y, State, Zip C	ode					,	
City, State, Zip C	Jode						Paterson, N	IJ 07503			<del></del>	_		
	r for Monitoring Firm		Phone Nu	mber		Te	elephone Num				Numbe 0159			
Project Manage	I for Workoning I in.						973-345-8			٦	0137	-		
		Sched. Com	pletion Date	(11)		N	ame of OSHA D & S Rest		Inc					
Start Date (10	))						treet Address	oration,	nic.			-		
03/20/12		03/30/12				-  "	20 Californ	ia Avent	1e					
Occupancy Sta	tus During Abatemen	t (Check only on	e) shatament				ity, State, Zip						10.00	
Facility cl	osed/vacated during on the performed outside	of normal facility	hours-				.,,, .							
							Paterson, 1	NJ 0750	3					
Other-De	escribe: NORMAL H	CORS							Containment	t w/negativ	e pressu	ire		
	k (check all that apply								ni-enclosure	d				
$\ge 3$ sf or		Renovation						Glo No	vebag proced n-Exempted (	(*) and Nor	n-friable	proce	dure	
≥160 sf	or ≥260 lf	Demolition	U and a	ololy				-تناب			R	R	E	E
Location	n of	Is location nor by maintenance	e/custodial	olery	Descrint	ion of as	bestos-contair	ning	Amoun (Specif		m	р	n c	n c
asbesto	s-containing (acm) to be	staff(12)			material	(ACM)			LF)	y 31 01	0	a i	a p	L
abated i	in facility (13)	Yes	No N	I/A							е	-		-
				-1	PIPE INS	ULATIO	ON		65 L FT			님	님	붜
BASEMEN	T			=							ᆜᆜ	님	부	片
				-							ᆜᆜ	닏	님	井
				-							니브	片	片	牉
						100						Ш		
5 11 100	acto Hauler	INJDEP	lauler ID#		ubic Yards o	f Waste	Name of Reg	gistered L	andfill ESOURCE	RECOV	ERY			
Registered W D & S RES	TORATION, INC			_	YD		City, State	JWN, K	LSOURCE	10001				
City, State				osal D /21/1			TULLYT	OWN, F	PA					
PATERSO	ON, NJ 07503	<del></del>		. 21/1	Signature					Date				
Completed by	y (Print or Type)	Title PRESIDEN	T							03/	08/12			
ROGDAN	JOLDZIC	* Do not use th	is form for a	sbest	os licensure	exempted	d activities.							

### State of New Jersey 1108-4353 NOTIFICATION OF ASBESTOS ABATEMENT Check #3905 (Pursuant to N.J.A.C. 8:60 and 12:120)

1108-4353

Agencies Notified  EPA  DEP  Initial  DOL  Amended #  DOL  DEM   Emergency   Dok  DOH   Emergency   Dok  Doctor   Doctor	Date of Notification	(1) 3/7/12							Owner / Operat	or (2)		VE				
DEP   Solitation   Cancellation			ation		Stree	et A	ddres	ss	11	1	MP 12	2012			1 200	
Name of Facility Where Abatement is Taking Place (3) New Lisbon Developmental Center- Dogwood  Street Address 4 Read Rd.    Subchapter 8 (Other than K-12)	☐ DEP ☐ DOL ☐ DOH	☐ Ame	nded # rgency		City, <b>Tre</b> r Nam	Sta <b>ito</b> e of	nte & . n, N. f Con	Zip 0 J 086 tact	ode		elatos con	ROLE TO	elepho	one N	lumb	er
Name of Facility Where Abatement is Taking Place (3) New Lisbon Developmental Center- Dogwood  Street Address 4 Read Rd.    Subchapter 8 (Other than K-12)								courages.	ORMATION		7 3 7 7 44 34 34			N		
Square Feet	New Lisbon Dev				3)	· ·		1141	Type of Fac	(K-12)	ther than K-	-12)		.0		
City (5) New Lisbon    County (6)   Burlington   County Code (7)   Current Use (Prior if being demolished)	4 Read Rd.														etc.)	
Developmental Center	The second secon		Section of the section	Co	unty	Co	de (7	)					idg. Ag			
Environmental Connection, Inc.    AbateTech, Inc.   Street Address   Street Address   Street Address   Street Address   Street Address   PO Box 25	ITOW EISBOIT		Burmigton							70	1700	liorica)				
Street Address   Street Address   PO Box 25				er (8)		1	ASCN	/I No.	Name of Aba	atement C		9)				
Lumberton, NJ 0808	Street Address 120 N. Warren St	reet							Street Addre	ess			61			
Project Manager for Monitoring Firm   G09-392-4200   G09-265-2107   G09-292-   G09-265-2107   G09-265-2107   G09-292-   G09-265-2107   G09		enton, NJ 08608														
Signature    Steel Analytical   Street Address   Street	Project Manager for	roject Manager for Monitoring Firm rian Holbig						r	Telephone N	Number	740	License N		29		
Facility Closed/Vacated During Entire Period of Abatement   Abatement Performed Outside of Normal Hours – Describe:   Facility Occupied During Abatement   Scope of Work (Check all that apply)   Full Containment with Negative Pressure   F	Scheduled Start Da	rian Holbig cheduled Start Date (10) Scheduled C									or					
Describle:	Facility Clos	ed/Vacated	During Entire Pe	eriod	of Ab		ment		108 Haddo	n Ave.						
Second to the procedure   Second to the p									The state of the s							
Asbestos-Containing Material (ACM) Solely by Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous)  Mechanical Room  Mechanical Room  Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous)  Mastic Debris Clean Up  Mastic Debr	≥3 sf or ≥3 l	f	oply)		3/1/1/20	STATE OF THE PARTY.				☐ M	ini-Enclosu love Bag P	re rocedures				
Material (ACM) TO BE ABATED in Facility (13)  Yes No N/A  Mechanical Room  Mechanical Room  Mechanical Room  Mechanical Room  Mastic Debris Clean Up	The state of the s		_										Aba	atem	ent T	уре
Mechanical Room    Mastic Debris Clean Up   80 SF	Mat TO E	erial (ACM) BE ABATED Tacility		S Main Cust	olely tenar odial (12)	by nce Sta	or ff?	i	Material (A (i.e., thermal s nsulation, surfa	CM) systems cing, VAT			Removal	Repair	Encapsulate	Enclosure
Name of Registered Waste Hauler  NJDEP Waste Hauler ID No. 18750  TRRF Landfill  Disposal Date City, State  Lumberton, NJ  Completed By (Print or Type)  Title  Disposal Date Signature  Date	Mechanical Roor	n						N	astic Debris	Clean U	р	80 SF				
AbateTech, Inc.  AbateTech, Inc.  City, State Lumberton, NJ  Completed By (Print or Type)  Hauler ID No. 18750  Disposal Date 3/9/12  City, State Tullytown, PA  Date						Ţ				7						
AbateTech, Inc.  AbateTech, Inc.  City, State Lumberton, NJ  Completed By (Print or Type)  Hauler ID No. 18750  Disposal Date 3/9/12  City, State Tullytown, PA  Date				H	H	1 L	+						出	H	H	H
AbateTech, Inc.  AbateTech, Inc.  City, State Lumberton, NJ  Completed By (Print or Type)  Hauler ID No. 18750  Disposal Date 3/9/12  City, State Tullytown, PA  Date														H	H	H
AbateTech, Inc.  AbateTech, Inc.  City, State Lumberton, NJ  Completed By (Print or Type)  Hauler ID No. 18750  Disposal Date 3/9/12  City, State Tullytown, PA  Date										7.						
City, State Lumberton, NJ  Completed By (Print or Type)  Disposal Date 3/9/12  City, State Tullytown, PA  Date								No.	of Waste		170	d Landfill				
Completed By (Print or Type) Title Signature Date	City, State		· · · · · · · · · · · · · · · · · · ·						Disposal Date	City, Sta	ate				1000000	
Opportunity 1 AAAA IMITI	Completed By (Print	or Type)			0.000	3.555.00	. Cor			†	wn, PA			12		

1108-4353 Check #3859

Date of Notification (1)	12	N	ame	of Bu	Iding (	of Treasury	tor (2		l V E I				
	Notification	S	treet	Addre	ess	treet Fl. 9		uun 1	2 2012				
□ DEP □	Initial				Zip C			MAR 1	2 2012	1			
☑ DOL	Amended #	0.00			J 086		j		1	-			
☑ DOH ☑	Emergency	N	ame	of Co	ntact		Č.	ASSESTES C	atinul &	elephor	ne Nu	ımbe	er
□ DCA □	Cancellation		avid	Lap	idus			LICEK	11111				
			FAC	CILIT	Y INF	ORMATION			J = 500 M 1004				
Name of Facility Where Ab	patement is Taking Pla	ace (3)				Type of Fac							
New Lisbon Developm			3			School	- Control of the Cont						
Street Address								8 (Other than		800			
13 Read Rd.						Name of Street or other or oth			nercial building			(C.)	
		1-				Square Fee	et	# of Floor	s BI	dg. Age	2		
City (5)	County (6)	Cou	inty C	ode (	7)		(D.:	if hairan dan	liabad\				
New Lisbon	Burlington							or if being der	nonsneu)				
		(0)		Lance		Developn		ent Contracto	)r (0)				
Name of Monitoring Firm F Environmental Connec		er (8)		ASC	M No.	AbateTec			) (9)				
Street Address			9.15		25/20	Street Add							
120 N. Warren Street						PO Box 2							
City, State & Zip Code						City, State							
Trenton, NJ 08608	·	Telepi		Niumi	or	Telephone			License Nu	ımber	_		
Project Manager for Monito		тетері <b>609-3</b>			er	609-265-2		Jei	Licerise ive	0052	9		
Brian Holbig Scheduled Start Date (10)						Name of O		Monitor					1118.00
3/8/12	Scheduled Son	3/9/		(11)		EMSL An							
Occupancy Status During	Abatement (Check on	ly one	)	tomo	nt	Street Add	ress						
	cated During Entire Penned Outside of Norma			ateme	111	108 Hadd City, State							
Describe:	ned Outside of Norma	1100	15 -			Westmon							
Facility Occupied [	During Abatement					W Countries	11, 110	00.00					
Scope of Work (Check all			_										
Coops of From Corners and									ainment with Ne	egative	Pres	sure	ß
≥3 sf or ≥3 lf		$\boxtimes$		ovatio				Mini-Encl					
≥160 sf ≥260 lf			Den	nolitio	n				g Procedures	F.:-61-	D	الم م	
									npted and Non- Amount				
Location		ls L Norm	ocati			Descript Asbestos-C	tion of Contain		(Specify	Aba	itemi	3111 1	Abe
Asbestos-Con Material (A			olely b			Material			SF or LF)	_		Щ	_ m
TO BE ABA		Maint				(i.e., therma	al syste	ems		Rem	Re	cap	nclo
in Facili		Custo		Staff?		nsulation, sur				Remova	Repair	Encapsula	Enclosure
(13)	A	Yes	(12) No	N/A	1	or other misc	cellane	eous)		<u> </u>		ate	O,
			INO	IVA	-	lastic Debri	ic Clo	an IIn	80 SF		П	П	П
Mechanical Room			H	H	1	lastic Debri	S CIE	ап ор	00 31	18	H	片	H
		井	H	H						H	H	Ħ	H
		H	井	H	-	Was a second				ᅥ片	H	Ħ	愩
		H	+	片	-	****	959705			市	n	Ħ	I
		H	+	H	-					一百	Ī	Ī	
Name of Registered Wast	e Hauler	ш	- NJ	DEP	Waste	Cubic Yards	N	ame of Regis	tered Landfill				-
	o i iddioi				D No.	of Waste		RRF Landfi	11				
AbateTech, Inc.				107	-	Disposal Dat		ity, State		-		W-8-1	
City, State Lumberton, NJ						3/9/12		ullytown, P.	A		(1)		
Completed By (Print or Ty	pe)		Tit		- 25	Signature	0			Date	40		
Gwen Trumbetti		N	Op	ps. C	oord.	\n				3/7/	12		

### State of New Jersey

1108-4353

NOTIFICATION OF ASBESTOS ABATEMENT Check #3904 (Pursuant to N.J.A.C. 8:60 and 12:120)

Date of Notification (1) Name of Building Owner / Operator (2) 3/7/12 NJ Department of Treasury Type Notification Street Address Agencies Notified 33 West State Street Fl. 9 **EPA** DEP Initial City, State & Zip Code M DOL Amended # Trenton, NJ 08625 Name of Contact Telephone Number DOH M Emergency Cancellation DCA David Lapidus **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) New Lisbon Developmental Center-Locust Subchapter 8 (Other than K-12) Street Address Other (i.e. private & commercial buildings, homes, etc.) 10 Read Rd. Square Feet # of Floors Bldg. Age County (6) County Code (7) City (5) Current Use (Prior if being demolished) Burlington New Lisbon Developmental Center ASCM No. Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) Environmental Connection, Inc. AbateTech, Inc. Street Address Street Address PO Box 25 120 N. Warren Street City, State & Zip Code City, State & Zip Code Lumberton, NJ 08048 Trenton, NJ 08608 Telephone Number License Number Project Manager for Monitoring Firm Telephone Number 00529 609-265-2107 **Brian Holbig** 609-392-4200 Scheduled Completion Date (11) Name of OSHA Monitor Scheduled Start Date (10) EMSL Analytical 3/9/12 3/8/12 Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 108 Haddon Ave. Abatement Performed Outside of Normal Hours -City, State & Zip Code Describe: Westmont, NJ 08108 Facility Occupied During Abatement Scope of Work (Check all that apply) Full Containment with Negative Pressure Mini-Enclosure Renovation ≥3 sf or ≥3 lf Demolition Glove Bag Procedures ≥160 sf ≥260 lf Non-Exempted and Non-Friable Procedure Abatement Type Amount Is Location Description of Location of Normally Used Asbestos-Containing (Specify Asbestos-Containing SF or LF) Solely by Material (ACM) Encapsulate Material (ACM) Remova Repair Maintenance or (i.e., thermal systems TO BE ABATED insulation, surfacing, VAT Custodial Staff? in Facility or other miscellaneous) (12)(13)N/A Yes No Mastic Debris Clean Up 80 SF Mechanical Room Name of Registered Landfill NJDEP Waste Cubic Yards Name of Registered Waste Hauler Hauler ID No. of Waste TRRF Landfill 18750 AbateTech, Inc. Disposal Date City, State City, State 3/9/12 Tullytown, PA Lumberton, NJ Date Completed By (Print or Type) Title Signature Opps. Coord. 3/7/12 Gwen Trumbetti

## No work

# State of New Jersey 1202-444 NOTIFICATION OF ASBESTOS ABATEMENT Check #3 (Pursuant to N.J.A.C. 8:60 and 12:120)

1202-4448 Check #3857

BOO										7.1	The same				
Date of Notification	(1) 3/9/12							wner / Operator	(2)	IWE	M				
Agencies Notified	Type Notific	ation				Addr		HEX!		U 1/1 1/2					
⊠ EPA						k A				A				•	
☐ DEP	☐ Initia						Zip C		4R 1	2 2012					
⊠ DOL		nded #2	_				NJ 08	590			i IT	elepho	ne N	umbe	ar a
□ DOH     □ DCA		rgency cellation					ontact 'nande	7 486	entes i	PAROL &		sieprio	HE IV	ullibe	-
□ DCA	L Can	cellation		100000		100702			11000						_
			. ,,		AC	ILIT	Y INF	Type of Facilit	h. (4)						_
Name of Facility W	here Abatem	ent is Taking P	lace (3	3)				School (K	ty (4) (-12)						
Reynolds MS Street Address				-	3.1182.77					Other than K-					
2145 Yardville-H	amilton Sq	uare Road								te & commer		s, hom	es, e	tc.)	
2140 (uluviiio )								Square Feet		# of Floors	BI	dg. Ag	е		Mines III
City (5)		County (6)	Co	unt	у С	ode	(7)								
Hamilton Twp.		Mercer						Current Use (	Prior if	being demol	lished)				
					LC III			School							
Name of Monitoring		by Building Own	ner (8)			10/1/02/2003	CM No.	Name of Abat		Contractor (	9)				
Pars Environme	ntal		-			001	31	AbateTech, Street Addres					-	_	-
Street Address 6 A South Gold I	Drivo							PO Box 25	5						
City, State & Zip Co			-21-	-			W/21	City, State & Z	Zip Co	de					
Robbinsville, NJ								Lumberton,		8048					
Project Manager fo	r Monitoring I	Firm	Telep				ber	Telephone Nu			License Nu	mber 0052	10		
Roberto Feliz			609-				,	609-265-210		itor		0052	29		
Scheduled Start Da 3/5/12		Scheduled Cor	3/16			(11	)	Name of OSH EMSL Analy		iitoi					
Occupancy Status	During Abate	ment (Check's	nly-on	e)				Street Addres							
Facility Clo	sed/Vacated	During Entire F	eriod	of A		teme	ent	108 Haddon							
	Performed C	outside of Norm	al Ho	urs				City, State & Z							
Describe:								Westmont,	NJ U8	108					
Scope of Work (Ch	cupied During		-		-	-									
Scope of Work (Cit	eck all triat a	ppiy)	2							Full Contains		egative	Pres	ssure	Ĺ
≥3 sf or ≥3	lf		$\boxtimes$			ovati				Mini-Enclosu					
≥160 sf ≥26	60 If				)em	olitic	n			Glove Bag P Non-Exempt		Eriobl	o Dro	codu	ıro
						567	T	Description		Non-Exempt	Amount		atem		
	ocation of tos-Containin	na	Non		catio			Description Asbestos-Con			(Specify	7,0			JPC
	terial (ACM)	ig.			ly b			Material (A	CM)		SF or LF)	70		E	ш
	BE ABATED		Mair					(i.e., thermal sy	ystems	S		Remova	Repair	caps	ıclo
	in Facility (13)		Cust	oai: (1		taπ?		nsulation, surfactor or other miscella				oval	a:	Encapsulate	Enclosure
	(13)		Yes		lo	N/A								(Đ	
Freezer			П	D	al	П		Mastic (Hole I	Drillin	g)	>1 SF				
1100201		_		Ī	Ī										
				E											Щ
												ᆜᆜ	닏	닏	H
	25.000000											ᆜᆜ	H	님	H
				LĻ				10 th Wards	Mana	a of Domintor	od Londfill			Ш	
Name of Registere	d Waste Hau	ıler					vvaste D No.	Cubic Yards of Waste	Ivame	e of Register	eu Lanuilli				
AbateTech, Inc.					iia	187		1	TRR	F Landfill					
City, State Lumberton, NJ								Disposal Date 3/16/12		State /town, PA					
Completed By (Prin	ot or Type)				Title	9		Signature)	1			Date			
Gwen Trumbetti	it of Type)						Coord.	ma	1		17.002	3/9/		a surue-	

Nower

Date of Notification						_	Owner / Operato	r (2)					
A i N . Hifi d	3/6/12				eton		ersity					-	
Agencies Notified EPA	Type Notific	ation			t Addre		acaton Univer	city E A Ma	cMillan Bldg	ř			
□ DEP	☐ Initia	L			State 8			Sity L.A. Isla	Civilian Diag				
□ DOL	_	nded #3			eton,								
☑ DOH	1000	rgency			of Co		••••	ter 8 (Other than K-12)  ter 8 (Other than K-12)  private & commercial buildings, homes, etc.)  # of Floors Bldg. Age  Prior if being demolished)  tement Contractor (9)  Inc.  Inc.					
☐ DCA		ellation	E	Robe	ert Or	tego,	P.E.			1	an.		
				FA	CILIT	Y INF	ORMATION						
Name of Facility Wh	nere Abateme	ent is Taking P	lace (3				Type of Facili	ity (4)			3.72		
Princeton Univer				0			School (	K-12)					
Street Address				Alace Solo									
Washington Roa	d					27						etc.)	
Princeton Univer	sity Main C		1				Square Feet	# of FI	oors	Bldg. A	ge		
City (5)		County (6)	Co	unty (	Code (	7)							
Princeton		Mercer						(Prior if being	demolished)				
					1		University		. (0)				
Name of Monitoring ATC Associates,		y Building Owr	ner (8)		ASC	M No.	AbateTech,		actor (9)				
Street Address	inc.				-		Street Address						
Bromley Corpora	te Center 3	3 Terri Lane.	Suite	12			PO Box 25	33					
City, State & Zip Co							City, State &	Zip Code					
Burlington, NJ 08							Lumberton	, NJ 08048					
Project Manager for	Monitoring F	irm			Numb	er	Telephone N		License				
Mike Keehn			609-				609-265-210			005	29		
Scheduled Start Date 1/16/12	The state of the s	Scheduled Cor	npletic		te (11)		EMSL Analy				04200		
Occupancy Status D						202	Street Addres						
		During Entire P			ateme	nt	108 Haddor						
The state of the s	Performed O	utside of Norm	al Hou	urs			City, State &						
Describe:	i.al Dunian	A b = 4 = us = us 4					Westmont,	NJ 08108					
	upied During				_		- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1						
Scope of Work (Che	ok all lilal al	opiy)						☐ Full Co	ontainment with	n Negativ	e Pre	ssure	•
≥3 sf or ≥3 li	f		$\boxtimes$	Ren	ovatio	n				-			
≥160 sf ≥26	O If			Der	nolition	า							-1
_					DESCRIPTION OF THE PROPERTY OF			K-M					
	cation of			Locat			Description				atem	ent T	ype
	os-Containin erial (ACM)	g		nally l olely l			Asbestos-Con Material (A					ш	
	BE ABATED				ce or		(i.e., thermal s		0. 0. 2.	′   a	'   <sub>Z</sub>	nca	=nc
	n Facility		Custo	odial S	Staff?		insulation, surfac	cing, VAT		2	pai	nsd	losu
	(13)		Vaa	(12)	N/A		or other miscell	aneous)		- <u>a</u>	٠   ٦	ate	9
101 1 0 41174	(04 - 1 - 4) 4St	41 4th =1	Yes	No	INA	,	Mindow Coulk	Cloring	10615				
Work Area #NF1 Work Area #NF2	(Stair 1) 1	tnru 4 Fi.	H		H		Vindow Caulk		-			H	H
Work Area #NF3	(Stair 2) 4	FI.	H	X	H		Vindow Caulk		-	-	HH	H	H
Stairwell #2 and		11.	H	X	H		loor tile & Ma					Ħ	Ħ
Otali Well #2 and !	10		H	Ħ	H	-							
			H	Ħ	I								
Name of Registered	Waste Haul	er		NJ	DEP V	Vaste	Cubic Yards	Name of Re	gistered Landf	ill	1.0		
				Ha	uler ID		of Waste		.eu	Telephone Number    Duildings, homes, etc.)   Bldg. Age     ed)   buildings, homes, etc.)   Bldg. Age     ed)   cense Number     00529     on the content of			
AbateTech, Inc.					1875	0	8		atili				
City, State							Disposal Date 3/16/12		ΡΔ				
Lumberton, NJ	or Tunc		-	Tit	lo.			I unytown,		Date	1		
Completed By (Print Gwen Trumbetti	or rype)				ie ps. C	oord.	Signature	AT					
O. Com Trainbott							4/1	W		0,0			

#### NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7)

Date of Notification	on (1)		Name	of Bui	ildin	Owner/Operator							1,0
3/7/12			Ray	mond	Fo.	lkmar		1	50	ITY			
Agencies Notified	Type Notificati	on	Stre	et Addr	cess								
[ ]EPA	[X]Initial		145	Tus	can	Rd.					:		
[ ]DEP	Notificat	ion	City	, State	e, Zi	Code	- AAA	1 1 2 20	2	_			
[X]DOL	[]Amended					NJ, 07040			*		1		
[X]DOH	Notificat	lon	Name	of Cor	tact		Telepho	ne Number			-		
[ ]DCA	[ ]EMERGENCY					Lkman	1 3 3				-		
[ ]Dai	[ ]Cancellati	on					-		11/100,00	-	1	ì	
						INFORMATION						3.5	
Name of Facility W		Taki	ng P	lace (3	)		Type of Facil	Lity (4)					
Raymond Folk	man						[ ]School		41		v 10		
Street Address								oter 8 (Otl					
145 Tuscan Rd				*			cial h	ouildings,	homes	, е	tc.)		
	To .		765		la.		Square Feet	# of Fl	oors			Age	
City (5)	Co	unty Ess			1	unty Code (7)	2400	2		1	75		
Maplewood		ESS	EX				Current Use		being	dem	olis	hed	)
Name of Monitoring	Firm hired by Bu	ildin	G   A	SCM No.		Name of Abate	Residence					_	
Owner (8)	riim nired by bu	TTOTH					ANAGEMENT	577 1276 E					
N/A			0	7	-	Street Addres		,					
Street Address							stopher St						
	- 2-						<del>_</del>	•			12 110		
City, State, Zip Co	ode					City, State,	r, NJ 070	42					
		lm - 1	1 1-	>71					Licer		Manh		
Project Manager for	r Monitoring Firm	N/	2000	ne Numb	ber	(973) 744			00			er	
					,,,,				00		_		
Scheduled Start Dat 3/16/12	NY 250	7/12		n Date	(11)	Name of OSHA	Monitor						
	Year Mont		Day	Year	2	N/A							
Occupancy Status Du						Street Address	s				-		
of Abateme	osed/Vacated Duri nt	ing En	icire	Period									
	erformed Outside			Facili	ty	City, State,	Zip Code						
	cribe: «OffHours I cribe: «Other Occi			cript»									
Scope of Work (Chec													
			1/2				Containment wi	th Negativ	ve Pre	ssu	re		
[X]≥3 sf or	r <u>&gt;</u> 3 lf or >260 lf	1150		novation molition		75 JF	Enclosure bag Procedure						
1 15200 00		•	• • • • • • • • • • • • • • • • • • •				riable Procedu	re					
Locatio	on of	L	Is ocat:			Descriptio	n of		1	Abat	teme	nt I	Ype
Asbestos-Co		N	Used			Asbestos-Conf		Amoun	t	RE	R	NC	N
Material			Sole:			Material (		(Speci:	-	M	E P	A	L
TO BE A		t	enan	ce/		i.e., thermal (i.e., surfa		SF or		O V	A	P	os
(13			ustod aff		-	or other miscel		,		A	R	U	UR
		Yes	No									-	E
Basement				X	Pip	e Insulation	on	45 lf	2	2			
Name of Registered				Waste ID No.	1000	bic Yards	Name of Regi		ndfill				
AZTECH MANAC	SEMENT, INC.		704		01	Waste 0.75	G.R.O.W.	S.					
City, State						sposal Date	City, State				_		
Montclair, No	J 07042					3/19/11	Morrisvi	lle, PA	1 19	06	7		
Completed By (Print	or Type) Title			-		Signature	<del>/</del> , _/		Dat	te			
Constantine \		side	nt			1/ - 5	7 1	. 1/11		7/1	2		
						1 10	Marche	nilla	1				

Date of Notification (1)	2-0-17	1	N	_	ing Owner/Operato		i		H	it	5	$\neg$
	2-0-10	<u> </u>		to	rtunat	to Kit	orto			1	ì	
Agency Notified	Type Notification	100 Aug	9	treet Address	253	goute o	306 2	012	IJ	And a		
D EPA D DEP	Anitial Amended		C	ity, State, Zip	Code	1. 1. Man				1		$\dashv$
DOL	Amendment #	dina		D-27/ 444	Hills	borough	NJ	088	341	1	ë k	
<b>⊠</b> DOH	<ul> <li>Emergency (inclujustification)</li> </ul>	ung		lame of Conta	act		Telephone I	Number			8	$\dashv$
DCA	☐ Cancellation			Fortu	nato Rit	onto.						1
				FACILITY IN	FORMATION				20%			
Name of Facility Where A	batement is Taking P	lace (3)			``	Type of Facility	(4)	-	- 552	-		$\dashv$
Sincle Co.	nily Dwe	Wir	(	Vacan	t )	☐ School (K-12	)\					
Street Address	14.1	-		·		☐ Subchapter 8	Other than h	K-12)				
253	Route 2	06				homes, etc.)		ercial build	ings.			
City (5)	170					Square Feet	# of Floors	Blde	g. Age	•	-	$\dashv$
Hills	bonough	LN	` (	YYBBC			Z		70		_ '	
County (6)	3,		C		7) (STATE USE	Current Use (Pr	nor if being de	molished)		-		$\neg$
Some	aset		0	NLY)		Sinsle	fami	14				
Name of Monitoring Firm	Hired by Building Own	ner A	SCMN	lo. /	Name of Abatem	nent Contractor (9	9)	7				
(8) FPC Tec	hnologies		1	J/A	I FPO	Tech	rologie	S. T	~~			
Street Address	7.2				Street Address		7			•		-
P.O. Box	337		2			P.O. Box	337					
City State 7in Code					City, State, Zip (	Code	Y-	`				
New Egyl	) IN +(	1823	33		Neu	Equpt	NJ	083	33	3		
Project Manager for Moni	toring Firm ·	Tele	ephone		l elephone No.	31.	License No.					
Steve Sche	enker	609	1758	3-3365	609-758			0039	14			
Start Date (10)	Scheduled C	March Committee		(11)	Name of OSHA		,			dis-entre		
3-19-12		3-12			EPC	Techn	ologies	I. In	1			
Occupancy Status During	Abatement (Check or	nly one)			Street Address							
Facility Closed/Vacated	During Entire Period	of Abater	ment	74	P.C	Box 3	33 t					_
Abatement Performed	Outside of Normal Fac	cility Hour	s ·		City, State, Zip C		NIT	OGE	- 7 "	,		
Other - Describe:					\ \\seco.	Egypt	NJ	083	) ) ]	)		
Scope of Work (Check all	tnat apply)				☐ Full (	Containment with	Negative Pres	ssure			60	
3 sf or ≥3 lf	₩			Renovation Demolition		Enclosure						
☐ ≥ 160 sf or ≥ 260 lf			(2)	Demonio		ebag Procedure Exempted (*) and	Non-Friable	Procedure				
	•	Ist	ocation						$\overline{}$	bate		nt
		No	rmally				28		-	Ту	ре	
Location Asbestos-Containing			Solely I		Description of stos Containing Ma		Amou	ınt			m	
TO BE ABA			stodial		., thermal systems	insulation,	(Spec	ify	Rer	교	nca	Enc
IN Facil	ity `		taff?		surfacing, VAT other miscellane		SF or	LF)	Removal	Repair	Encapsulate	Enclosure
(13)			(12)		outer mooding to	,,,,,			18		ate	ē
		Yes	No I	WA								
Basement		K		Pi	pe Insu	lation	100	)	X			
<del></del>									T			
Name of Registered Waste	Hauler	A PRODUCTION		te Hauler	Cubic Yards of	Name of Regist	tered Landfill		-1-1			$\exists$
		ID No	17	2000	Waste	Waste	Mona	gpm-	+			
EPC Tech	10107162		1/	000	4			Jemo	1,			
City, State					Disposal Date	City, State	- 11	PA	!			
NE NJ					3-23-12	Monnis	ville					
Completed by	Title Doo	side	1+		Signature C	501	4.	Date 2	. 0	_ 1	2	
Steve Schen	~ ~				يبري	ve sche	<i></i>	7.	. 8	- 1	_	
ASB-41	* Do not	use this	torm fo	r asbestos lic	ensure exempted a	activities.						

снеск # /835/

Date of Notification (1) 03-06-12					Building C							Th	7	, 1	
Agencies Notified  EPA  DEP	Type Notification  Initial				dress lerne Av e, Zip Coo	Vacamena	11	٨	IAR 1	2	2012			;	
DEP DOL	Amended Amendment				vater, N		7	4				and the			
X DOH X DCA	Emergency (i justification)  Cancellation	including		Name of o			7 700	The state of the s		Tele	phone Nun	ber			
	ot to Tables	Diago (2)		FACIL	ITY INFO	RMATIO		Type of Fa	cility (4)	5/2	" - In this		8	-	
Name of Facility Where A		) Place (3)						Scho	ol (K-12) hapter 8	(Othe	r than K-12	)	ings,	home	es,
113 Greenbrook Ro	oad 							etc.) Square Fe			Floors		dg. A		
City (5) Middlesex				2	1 (7)			N/A		N/A		N.	/A		
County (6) Middlesex				•	SE ONLY)		-	N/A				eu)			
Name of Monitoring Firm N/A	Hired by Building (	Owner (8)		ASCM N/A	No.			f Abateme cle Envii							
Street Address N/A							Street A 200 B	oddress road Str	eet						
City, State, Zip Code N/A								ate, Zip Co adt, NJ							
Project Manager for Mor N/A	nitoring Firm			Telephon N/A	e No.		Telepho 201-9	one No. 39-6565			License N 00756	0.			
Start Date (10) 03-16-12		Schedule 04-30-1		npletion D	Date (11)			of OSHA M Air Inc.	lonitor						
Occupancy Status Durin							Street A	Address Jacksor	n Aveni	ue					
Facility Closed/Vac Abatement Perform Other – Describe:	ned Outside of Norm	Period of A nal Facility	baten Hours	nent S			City, St	ate, Zip Co Island C	ode		01				
Scope of Work (Check A							Lung	isianu C	ity, 141	111	01		-		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	и тпас Арріу)	-	enova				×	Mini-En Gloveba	iclosure ag Proce	dure	Negative F			e	
		le le	Locat	ion				INOTELX	empted	( ) and	, Hom I man		Abate	emen	t
Locatio	n of	1	lorma	lly			cription					-	1 9	ре	
Asbestos-Containing TO BE AB In Fact (13)	g Material (ACM) BATED lity	Ma Cust	d Sole intena codial ( (12)	nce/ Staff?		thermal surfac				(S	mount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
Futor	ior	Yes	NO	X		Trans	site Pip	oina		9	0LF	x			
Exter	ior			_		Trans.	51to 1 1p	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1						
				NJDEP W	lasto	Cubic	Varde	Ni-	ame of P	egiste	red Landfill				
Name of Registered Wa ATC, Inc. / TriState		1)	ŀ	Hauler ID 4310		of Was		VI 0000			rprises				O.
City, State Shirley, NY / Bronx,	NY					Dispos	al Date		ty, State /aynesl		OH 446	38			
Completed by Richard Doran		Title Proje	ct M	anager		S	ignature	w	Doz	u	Da	ite 3-06-	12		

Date of Notification (	(1) March 7, 2012			of Building of America	Owner / Operator	(2)		The same of the sa			
Agencies Notified	Type Notification		1	Address		MAR	1 2 2012				
□EPA □DEP ☑DOL	☑ Initial		City, S	tate & Zip C	)	NCHIS"	as coastot a	A STATE OF THE PROPERTY OF THE			
<b>⊠</b> рон	Amended Amendment	#		City, NJ	07304	The second secon	ICE Mand				
□DCA	Cancellation		Name Dino I	of Contact Vappi		and the second s	Tele	ephon	e Nur	nber	
			FA	CILITY IN	FORMATION						
Name of Facility Wh Bank of America	ere Abatement is Takin	g Place (3)			Type of Fac	(K-12)					
Street Address						apter 8 (Other than	n K-12) ommercial buildings	hom	0 0	~ \	
2400 John F. Kenn	edy Boulevard				Square Feet			. Age	ie, ei	U.)	
City (5) Jersey City		****			8,00	The state of the s	2		148		
County (6)		County Code	e (7)								
	Firm Hired by Building (			ASCM No	Synatech, I		or (9)				
Street Address One Mall Drive, Sui	ite 404				Street Addre 829 Radio F						
City, State & Zip Coo	de				City, State 8	Zip Code	10				
Cherry Hill, NJ 080 Project Manager for		Te	lephone l	Number	Telephone N	larbor, NJ 08087 Number	License Numb	er			
Howard Zenobi		85	6-482-13	11	609-296-691	16		0081	7		
Scheduled Start Dat March 17,		led Completi Marc	on Date ( h 18, 201		Name of OS Synatech, I						
Occupancy Status D Facility Clos	Ouring Abatement (Checked) sed/Vacated During Ent	k only one) ire Period of	Abateme		Street Addre 829 Radio F	ess					
Other – Des			3		City, State &	Zip Code Iarbor, NJ 08087					
Scope of Work (Che	cupied During Abatemer	ıı								_	
≥3 sf or ≥ 50 li ≥160 sf or ≥2	f	=	Renovation Demolition			Mini-Enclosure Glovebag Proce	nt with Negative Presso edure (*) and Non-Friable Pro		·e		
	cation of aining Material (ACM)	Is Locati	on Norma y Mainter	ally Used	Descrip Asbestos-0	tion of	Amount (Specify		ateme	ent T	уре
<u>TO B</u>	E ABATED	Custo	dial Staff	? (12)	Material	(ACM)	SE OF LE)	_			
IN	I Facility (13)	Yes	No	N/A	(i.e., therma insulation, su or other mis	rfacing, VAT		Removal	Repair	Encapsulate	Enclosure
Teller Area / Viewin	ig Booth	+		х	Floor Tile a	and Mastic	1,500 SF	X	_	$\neg$	
Name of Registered	Waste Hauler	NJDEP V Hauler ID	No.	13.55	ds of Waste	Name of Regis					
Synatech, Inc. City, State		27	429	5 Disposal [	Date	Grows Landfil City, State					-
Little Egg Harbor, N Completed By	J 08087			March 19 Signature		Morrisville, PA	Date			-	
Diane Aloia		ıtive Admini	strator	1)10.	ie allora	,	March 7, 2012				



Date of Notification (1 3/7/12					Building ( orn /Re:		Operator (2 ce	2)		~			1000		
Agencies Notified	Type Notification		1	treet Ad 107 Lip	dress pencot	Av		MA	R 1	2 2012	2		A STANFAS		
EPA DEP DOL	Initial Amended Amendment				e, Zip Co n NJ 08		1	1							
DOH DCA	justification) Cancellation	2		lame of o	Contact		1,	· · · · · · · · · · · · · · · · · · ·	Те	lephone.	Numb	er	_ <del>_</del>	1000	
				FACIL	ITY INFO	RMAT							ONTER.		70000
Name of Facility When Mike Horn /Resid		g Place (3)						Type of Facility	(4)						
								School (K	-12) or 8 (Oth	er than	K-12\				
Street Address 107 Lippencot Av	,							Other (i.e.				build	ings,	home	s,
								etc.) Square Feet	# /	of Floors		TRI	dg. A	ge.	
City (5) Riverton NJ 0807	7							1000+	2			35	5+		
County (6) Burlington				County C	ode (7) SE ONLY)			Current Use (P	rior if be	ing dem	olishe	d)			
Name of Monitoring F N/A	irm Hired by Building	Owner (8)		ASCM	No.		1	f Abatement Co co Inc	ontracto	r (9)					
Street Address							Street A	ddress							
								ox 329							
City, State, Zip Code			illedesses.					ate, Zip Code Berlin NJ 08	091						
Project Manager for N	Nonitoring Firm		T	elephon	e No.		Telepho 856-7	one No. 53-9800		Licens 0072	se No. 27				
Start Date (10) 3/20/12		Scheduled 3/27/12	Com	pletion D	ate (11)			f OSHA Monito	r						
Occupancy Status Du	uring Abatement (Che	ck Only One	)		-		Street A							77.5	800
Facility Closed/\	/acated During Entire	Period of Al	atem	ent				ox 329							
Abatement Perfo	ormed Outside of Non	mal Facility I	Hours					ate, Zip Code Berlin NJ 08	8091						
Scope of Work (Chec	k All That Apply)						[max]								
≥3 sf or ≥3 lf ≥160 sf or ≥260	If	-	enovat emoliti				×	Full Contain Mini-Enclose Glovebag Pr	ire ocedure	,				•	
				Т	1			Non-Exemp	eu () a	nu non-	riiabie		Marine Park	ement	<u> </u>
			ocation or mall			_							Ty	ре	
Asbestos-Contain	ation of hing Material (ACM) ABATED	Used Mair	Solel	y by ice/		tos Cor		or aterial (ACM) insulation,		Amount (Specify		Re	R	Encapsulate	En
In F	acility 13)	Cusic	dial S (12)	laii?			acing, VAT miscellane		8	SF or LF)	)	Remova	Repair	nsq	Enclosure
^	10)	Yes	No	N/A		00.0.		,				<u>a</u>	ľ	ate	ře
Base	ement			х		Duc	t Insulat	ion		60 LF		x			
						21500-2			-						_
									-		_		-		-
Name of Registered	Waste Hauler		N.	JDEP W	aste	Cubic	c Yards	Name	of Regis	tered La	ndfill				L
United Container			(A) 12312	auler ID 2459	No.	of Wa	aste		o.W.S					14	
City, State Elm NJ 08091					2	Dispo 3/27	osal Date 7/12	City, Si Morris		A 190	67	went.			
Completed by Anthony T Perna		Title Presio	lent				Signature				Date 3/7	e /12	1202-000		
Antilony I Fema		1 10310	20.11				1	$\sim$		0					

## 2449

Date of Notification (1)					Owner/Op adquarte		(2)			le [et	# H		E -		1
Agencies Notified Type Notification			Street Ad One Pe		za East			10 11	MA	R 12	2 201	2	11		-
EPA Initial Amended Amendment	#			e, Zip Co					ALT.				1		1
□ Emergency (     □ justification)     □ DCA    □ Cancellation	including	- //	Name of	Contact Samaro	00				Tele	ephone I	Vumber	_	- V.		
			FACIL	ITY INFO	RMATIO	N					-4.4/46	-			
Name of Facility Where Abatement is Takin NJ Transit Hoboken Hill Yard Street Address	g Place (3)							of Facility ( School (K-1 Subchapter	2)	er than K	(-12)		7	ี ระบน	. 42°
Marin Boulevard and 18th Street								other (i.e. p				ildi	ngs,	home	es,
City (5) Hobeken NJ 07030								e Feet	# of N/A	Floors		Blo N/	ig. A	ge	
County (6) Hudson			County C	ode (7) SE ONLY)		_	Currer	nt Use (Prid	or if bei	ng demo	lished)				
Name of Monitoring Firm Hired by Building ( TTI Environmental	Owner (8)		ASCM 0003	No.			of Abat aco In	ement Con	tractor	(9)					
Street Address 1253 North Church Street							Addres Box 32								
City, State, Zip Code Moorestown NJ 08057				188			tate, Zi t Berlii	p Code n NJ 080	91			ilite.			
Project Manager for Monitoring Firm Jim Guilardi		- 2	Telephon	e No. 0-8800			none No 753-98			License 00727					
Start Date (10) 3/20/12	Scheduled	d Com	pletion D	ate (11)			of OSH aco In	A Monitor							
Occupancy Status During Abatement (Chec		)					Addres								
Facility Closed/Vacated During Entire Abatement Performed Outside of Norm Other – Describe: Night Work 10 PM to	nal Facility I	oatem Hours	ent			City, S	tate, Zi		Ω1						
Scope of Work (Check All That Apply)						1162	t Delli	11 143 000	181	-					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enovat emoliti	850000			×	Min Glo	Containme i-Enclosure vebag Prod i-Exempted	e cedure					9	
	lel	ocatio	nn I						()			- 77-2	bate	ment	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used	ormall Solel ntenar	y y by. ice/		Descritos Conta thermal s surfaci other mi	system ing, VA	Material s insula NT, or		(5	mount Specify or LF)	Kemovai		Ty Repair	Encapsulate	Enclosure
Along The Tracks /out side	163	140	x		Pipe i	insula	ation		ε	0 LF	x	+			
Name of Registered Waste Hauler		N	JDEP W	aste	Cubic Y	/ards		Name of	Registe	ered Lan	dfill				
Pernaco Inc		Н	auler ID 1787		of Wast			G.R.O.	anne San						
City, State West Berlin NJ	-				Disposa 3/21/1			City, Stat Morrisv		A 1906	7				
Completed by Anthony T Perna	Title Presid	dent			Si	gnature	e				Date 3/7/12	2			



Date of Notification (1) 3/7/12				lame of E Mike Alu	Building Owne	r/Operator	(2)			15		or contract of the contract of		
Agencies Notified	Type Notification		1 20	Street Add 1906 At	dress lantic Av		ij Lij	MAR	12	2012	1 100			
EPA DEP DOL	Amended Amendment				e, Zip Code Haven NJ C	8008	L	Fail:		.16	ange d	ings, I dg. Aç 5+	7	
DOH DCA	justification) Cancellation	including	0.00	Name of 0 Sue	Contact		T- 0	4.1	Tele	ephone Nu	mber	J	- Andrews co	
Name of Facility Where Mike Alue	e Abatement is Takin	g Place (3)		FACILI	TY INFORMA	ATION	☐ Sc	Facility (4	2)			H		
Street Address 1906 Atlantic Av							o et	ther (i.e. p	rivate 8	er than K-1 & commerc	ial build		75-72-	s,
City (5) Beach Haven NJ (	08008						Square 1000-	-	2	Floors	3	ldg. A 5+	ge	
County (6) Ocean				County Co STATE US	ode (7) SE ONLY)					ng demolis	shed)			
Name of Monitoring Fir N/A	m Hired by Building	Owner (8)		ASCM	No.	5000000000000	of Abate aco Inc	ement Con	tractor	(9)				
Street Address							Address Box 32							
City, State, Zip Code			<del>0</del>				State, Zip t Berlin	Code NJ 080	91					
Project Manager for Mo	onitoring Firm		1	Telephon	e No.	( C.	hone No 753-98			License 00727	No.			
Start Date (10) 3/17/12	· · · · · · · · · · · · · · · · · · ·	Scheduled 3/22/12	Com	pletion D	ate (11)		of OSH	A Monitor						
Occupancy Status Dur	- Trial (1)						Address Box 32							
Facility Closed/Va Abatement Perfor Other – Describe:	acated During Entire rmed Outside of Norn	nal Facility I	Hours	ent			State, Zip st Berlin	Code NJ 080	91					
Scope of Work (Check	: All That Apply)											ings, I dg. Accepted a control of the control of th		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	f	0.000	enova emolit				Mini	-Enclosure	e cedure	h Negative			re	
		ls l	ocati	on.				-LXCIIIpto	<u> </u>	10 11011 1 110		Abat	emen	t
Locati Asbestos-Containi <u>TO BE A</u> In Fa (1)	ng Material (ACM) ABATED Icility	Used	ntena	ly by	(i.e. there	Descriptio Containing mal systen urfacing, Vaner miscella	Material ns insula AT, or	(ACM) tion,	(	Amount Specify F or LF)	Removal		Encapsulate	Enclosure
exterior	r siding			х	6	exterior si	iding		25	500 SF	х			
											-	-		
										-	+	-		
Name of Registered W			F	IJDEP W lauler ID	No. of	ubic Yards Waste		Name of G.R.O.		tered Land	fill		l.	
United Containers			2	2459	4 D	isposal Dat	e	City, Sta			-			
City, State Elm NJ 08091				OHE STATE		22/12				A 19067			2	
Completed by Anthony T Perna		Title Presid	dent			Signatu	re		-		Date 3/7/12			

-1 6 6			Name of B	ulding Owner/Operato	2 (2)		i ! !i!!
te of Notification (1)	17/12			SULT TE		MICTING	
encies Nouned	Type Notification		Street Add	ress		MAR 1.2	2012
₽A corp	☑ Jortial .			55 NT.	50	(NICA: 1 - 42	LUIL
	Amended	1	City, State,	Zip C∞e	/	16230	
50r	Amendment #_	ludina	$\mathcal{G}$	.Zip C∞e -NEEN 1=15	-LD, N, ), C	78 6 70	
DOH	Emergency (inc	100112	Name of C	Contact		Telephone Mumber	·
DQA -	Cancellation		Bn	UCE BREU	110	1	
	<u> </u>			YINFORMATION			:
		Di (1)	FACEDI	1 11 11 11 11 11 11 11 11 11 11 11 11 1	Type of Facility (	4)	
me of Facility Where	Abatement is Taking	Place (3)			☐ School (K-12)	)	Ť
	DENCE				- Curchaniar 8	(Other than K-12)	buildinos .
ee: Address	CENTRAL	1. = -		1000	promes' ere')	- Committee of the Comm	
2937	Course	ALC			Square Fool	# of Floors	B1dg A \$€ 40 T
7.15) - 1	on CITY				1000		
OCEN	oncii		I COLON C	code (7) (STATE	Current Use (Pri	or I being demolish	160)
-31, (6)	1.0		USE ON	LY)		CANT	
CARE	MAY		ASCM No.		ement Contractor (9)		
THE OF MONITORING FIR	m Hired by Building C	)wner	MOM INU.	KLG.	mc0 1/0		
^	1/1			Sveel Addre	S. SPRU	E AVE.	25.00
ee: Acoress	7			The second secon	Contract to the last of the la		
				City. State, Zi	PCOO SHA	DE NJC	805
, State Zp C∞e	TO - 2 A A A A A A A A A A A A A A A A A A		200000000000000000000000000000000000000				
	- Em	T. Ye	ephone No.	Telephone, N	779-047	A STATE OF THE PARTY OF THE PAR	14
creci Manager lox M	lowloand rimi	· ·		836.	1 19 20 12		
				Linea of OS			
	Scha	duled Comp	lelion Date	(11)   49180102	HA MONTON	4 M	
137 Date (10)		duled Comp	letion Date	JOS	ENKHLEI		
2/10/	12 3	1261	12	JOS Sueel Addr	E PKALET		
3/19/	/Z 3	xx only one	12	JOS Sueel Addri	S, SPRUC	E1 UE.	
3/19/	ynng Abatement (Che	ck only one eriod of Aba	12 lement	JOS Sueel Addri	S, SPRUC	E1 UE.	08052
3/19/ coupancy Status Du Facility Closed/Va Abatement Perform	/Z 3	ck only one eriod of Aba	12 lement	JOS Sueel Addri	S, Spiruc	E1 UE.	08052
3/19/ coupancy Status Do Facking Closed/Va chatement Perform Coupancy Describe	ving Abatement (Che cated During Entre Po med Outside of Norma	ck only one eriod of Aba	12 lement		S SPILUC S SPILUC S SHAT	εΛυΞ. ρε,Ν.Σ.	08052
. 3/19/ coupancy Status Do Fackiny Closed/Va chalement Perform Double - Describe	ving Abatement (Che cated During Entre Po med Outside of Norma	26) ock only one eriod of Aba al Facility Ho	lement	Sueel Addri 369 Cry. State,	EPKHLETS  SISSING CODE  SID CODE  III Containment with the Englosure	EAUE, DE, N. J.	
Score of Work (Cher	yng Abatement (Che caled During Entire Pimed Outside of Normal Ck all that apply)	xk only one eriod of Aba al Facility Ho	Itement burs	Sueel Addri 369 Cry. State,	EPKHLETS  SISSING CODE  SID CODE  III Containment with the Englosure	EAUE, DE, N. J.	
3/19/ coupancy Status Do Facking Closed/Va chatement Perform Coupancy Describe	yng Abatement (Che caled During Entire Pimed Outside of Normal Ck all that apply)	Renov	lement burs	Sueel Addri 369 Cry. State,	SISPICULE	EAUE, DE, N. J.	
Scope of Work (Cher	yng Abatement (Che caled During Entire Pimed Outside of Normal Ck all that apply)	Renov	lement burs	Sueel Addri	EPKHLETS  SISS  SIS  SISS  SIS	EAUE,  Non-Friable Proces	ADa:errer
Cracking Closed/Vallace Describer De	ung Abatement (Che cated During Entre Primed Outside of Normal Chall that apply)	Renov	tement ours	Sueel Addri 369 City, State,	EPKHLCI  SISS  SISPICUC  SIDPCODE  III Containment with the Enclosure  overbag Procedure  The Exempled (1) and  toon of the Malerial (ACM)	EAUE,  DE, N.J.  Non-Friable Proces	ADatemen   Free
2 / 19 / Coupancy Status Du Facking Closed/Vall Apatement Perform Duner - Describe - Scroe of Work (Chemotors 150 st or 2260 ft	yng Abalement (Che caled During Entre Primed Outside of Normalick all that apply)	Renov  Oemai  Used S  Mainte	ration ation ation plety by nance/	Sueet Addri	EPKHLC IN SESSION OF THE SESSION OF THE SHAD OF THE SESSION OF THE	EAUE,  Non-Friable Proces	ADatement free
2 3 / 19 / Coupancy Status Du Fackly Closed/Va Status Du Perdori Duner - Describe - Coner - Describe - Descr	yng Abatement (Che cated During Entire Primed Outside of Normalick all that apply)  It ion of the primed (ACM) abateD	Renov	//Z  ) tement burs  valion tion alion alion alion odial	Sueet Addri	EPKHLCI  SES  SISPICUC  SIDPCODE  III Containment with home Enclosure  overbag Procedure	Non-Friable Process	Dure Apa:errer
- 3/19/ coupancy Status Du Facility Closed/Va Abatement Perfort Coner - Describe Cone - Describe Co	yng Abatement (Che cated During Entire Primed Outside of Normal Ck all that apply)  It ion of the primed (ACM) ABATED Souny	Renov  Oemol  Used Sk  Maintel  Cust	ration ation ation ation ation olely by nance/ odial iff?	Sueet Addri	EPKHLCI  SES  SISPICUC  SIDPCODE  III Containment with home Enclosure  overbag Procedure	Non-Friable Process	ADatement free
- 3/19/ coupancy Status Du Facility Closed/Va Abatement Perfort Coupancy Coner Coupancy Status Du Abatement Perfort Coupancy Coner Coupancy Status Du Coupancy Status	yng Abatement (Che cated During Entire Primed Outside of Normalick all that apply)  It ion of the primed (ACM) abateD	Renov  Communication  Is Loc Norm Used Sc Maintel Cust Sta (1	ration ation ation ation ation olely by nance/ odial iff?	Sueet Addri	EPKHLCI  SES  SISPICUC  SIDPCODE  III Containment with home Enclosure  overbag Procedure	Non-Friable Process  Amount (Specify SF or LF)	Removal
- 3/19/ coupancy Status Du Facility Closed/Va Abatement Perfort Coupancy Coner Coupancy Status Du Abatement Perfort Coupancy Coner Coupancy Status Du Coupancy Status	yng Abatement (Che cated During Entire Primed Outside of Normal Ck all that apply)  It ion of the primed (ACM) ABATED acuty	Renov Cemal Used State Cust State (1	tement purs  ration  ation  at	Substitution of the control of the c	EPKHLCI  SISS  SISS  SIPPLUC  IN Containment with No. Enclosure  overbag Procedure  overb	Non-Friable Process	Removal
Coupancy Status Du Facility Closed/Va Abatement Perform Coupancy Status Du Facility Closed/Va Abatement Perform Coupancy Status Du Facility Closed/Va Abatement Perform Coupancy Status Du Facility Closed Coupancy Status Du Facility Closed/Va Facility Clo	ung Abatement (Che cated During Entre Primed Outside of Normal Ck all that apply)  It tion of the grant that apply (ACM)  ABATED acting 13)	Renov  Communication  Is Loc Norm Used Sc Maintel Cust Sta (1	tement purs  ration  ation  at	Sueet Addri	EPKHLCI  SISS  SISS  SIPPLUC  IN Containment with No. Enclosure  overbag Procedure  overb	Non-Friable Process  Amount (Specify SF or LF)	Removal
2 3 / 19 / Coupany Status Du Facility Closed Va Abatement Perform Duner - Describe - Coupany 150 St or 2300 III - 150 St or 2360 III -	yng Abatement (Che cated During Entire Primed Outside of Normal Ck all that apply)  It ion of the primed (ACM) ABATED acuty	Renov  Communication  Is Loc Norm Used Sc Maintel Cust Sta (1	tement purs  ration  ation  at	Substitution of the control of the c	EPKHLCI  SISS  SISS  SIPPLUC  IN Containment with No. Enclosure  overbag Procedure  overb	Non-Friable Process  Amount (Specify SF or LF)	Removal
Coupancy Status Du Facility Closed/Va Abatement Perform Coupancy Status Du Facility Closed/Va Abatement Perform Coupancy Status Du Facility Closed/Va Abatement Perform Coupancy Status Du Facility Closed Coupancy Status Du Facility Closed/Va Facility Clo	ung Abatement (Che cated During Entre Primed Outside of Normal Ck all that apply)  It tion of the grant that apply (ACM)  ABATED acting 13)	Renov  Communication  Is Loc Norm Used Sc Maintel Cust Sta (1	tement purs  ration  ation  at	Substitution of the control of the c	EPKHLCI  BISS  SISPICUC  BIO Code  II Containment with Manager  Preciosure  Overbag Procedure  The Exempled (1) and  The Material (ACM)  The Mater	Regadive Pressure  Non-Friable Process  Amount (Specify SF or LF)	A alerte English Removal
2 3 / 19 / Coupancy Status Du Facility Closed Vallement Perform Duner - Describe - Constant Status Du 260 III - 250	ung Abatement (Che cated During Entre Primed Outside of Normal Ck all that apply)  It tion of the grant that apply (ACM)  ABATED acting 13)	Renov  Communication  Is Loc Norm Used Sc Maintel Cust Sta (1	ration sition salin policy by nance/ odial siti?	Substitution of the residence of the res	EPKHLCI  SISS  SISPICUC  TO CODE  TO CO	Regadve Pressure  Non-Friable Proces  Amount (Specify SF & LF)	Herricon X
2 3 / 19 / Company Status Du Facking Closed Vallement Perform Double - Describe - Descri	ung Abatement (Che cated During Entre Pimed Outside of Normal Ck all that apply)  It tion of the part of Marchael (ACM)  ABATED Source  13)	Renov  Communication  Is Loc Norm Used Sc Maintel Cust Sta (1	ration ation	Subel Addri 3 6 9 City, State, MA  City,	EPKHLCI  SISS  SISPICUC  TO CODE  TO CO	Regadve Pressure  Non-Friable Proces  Amount (Specify SF & LF)	Herricon X
2 3 / 19 / Scopancy Status Du Facking Closed Vallement Perform Double - Describe - Scope of Work (Cherry 150 stor 260 th	ung Abatement (Che cated During Entre Primed Outside of Normal Ck all that apply)  It tion of the primed (ACM) ABATED Source (13)  If a Masse Hauler	Renov  Communication  Is Loc Norm Used Sc Maintel Cust Sta (1	ration ation ation odial it? 2) No N/A	Descrip Asbesios Containing (i.e., thermal system other myso)  Waste Cubic Yalon One.  Other waste	EPKMLC IN  SISS  S	Registered Landill	Herricon X
2 3 / 19 / Coupancy Status Du Facking Closed Val Abatement Perform Duner - Describe Coupancy Status Du Facking Closed Val Abatement Perform Duner - Describe Coupancy Status Du Facking Closed Local Aspessos - Contain TO BE IN F	ung Abatement (Che cated During Entre Pimed Outside of Normal Ck all that apply)  It tion of the part of Marchael (ACM)  ABATED Source  13)	Renove Cust Sta	lement purs  ration  ation  ation  ation  odial  if?  2)  No N/A	Suber Addring S 9  City, State, MA  City	EPKHLCI  SISS  SISPICUC  TO CODE  TO CO	Registered Landfill M, C, M	Herrews X
Aspesios Contain  TO BE  Name of Registere  Local  Aspesiors Contain  TO BE  Local  Aspesiors Contain  TO BE  Local  Loca	yng Abatement (Che cated During Entre Pimed Outside of Normal Ck all that apply)  It is not a spoly in the property of the pro	Renove Cust Sta	lement purs  ration  ation  ation  ation  odial  if?  2)  No N/A	Suber Addring Suber Addring Suber Addring Suber Addring Suber Addring Suber Su	EPKHLCI  SISS  SISPICUC  TO Code  TO Co	Registered Landfill M, C, M.  Tie  ODS/NE	Herrond X
Scopancy Status Do Facking Closed/Val Abatement Perform Doner - Describe Scope of Work (Cher 150 st or 2260 ii Locat Aspestos Contain TO BE IN F. It	yng Abatement (Che cated During Entre Pimed Outside of Normal Ck all that apply)  It is not a spoly in the property of the pro	Renov Cemai Stack (1)  Yes   2 / 2 6	lement purs  ration  ation  ation  ation  odial  if?  2)  No N/A	Suber Addring Suber Addring Suber Addring Suber Addring Suber Addring Suber Su	EPKHLCI  SISS  SISPICUC  TO Code  To Co	Registered Landfill M, C, M.  Tie  ODS/NE	Herricon X
Aspesios Contain  TO BE  Name of Registere  Local  Aspesiors Contain  TO BE  Local  Aspesiors Contain  TO BE  Local  Loca	yng Abatement (Che cated During Entre Pimed Outside of Normal Ck all that apply)  It is not a spoly in the property of the pro	Renove Common Used St. Maintel Cust Sta	lement purs  ration  ation  ation  ation  odial  if?  2)  No N/A	Descrip Asbestos Containir (i.e., thormal sys surfacing other mysc  Waste OND. OSPOSA	EPKHLCI  SISS  SISPICUC  TO Code  TO Co	Registered Landfill M, C, M.  Tie  ODS/NE	Herrond X

1 45	VAC.		787 S	بيطا أو داد		rax;	中間 海绵黄	mar Participant	D ZU	erial Control	11. Z3	Pill I	2001/0	影像
HEAT WA	WER PE QU	NET THORE	2012	of ASSE to MINC O					oh			4	1	
3-6				TOA			7)	- KID	pt. 01	Healt	h & S	entor	Servi	es
onds Nother	Type Notherson			TRA			<u> </u>		2	(Sig	nature)			
PA '			CON SE	in, Zip Cod	[O .		C 51		/	- Can		me:	4	P
DOL	Assemblant	li chulling		Contract	ERI	000	NJ	707 S		ribes		Ja 1		
DOM	D Constitution		FT	RAFT			· - !			MA	7	1		1
	Abeliant to Tube	/ Pinco (2)	FAG				Type of Facility	. /			<u>.</u>	4	2012	
F. TR4F			<del></del>		-	$\dashv$	CI Sebeni () Ci Substitus SC COhor (in		I IC-	2)	0.0			
- AD	paucic 5				<u> </u>		Spins Red	# of Ha			Inicia			
EAST RU	THERTOR	<u>0</u> .		;			1900	2			50	1/4	3	
BERGEN		¥ 6.	(Strike		-		Residen	vče _	I	neay			- 1	
inte of Madionia Pi	on Hilland by Hallading C	)-E(4)	ASC	Hile.		1	Renov				-			passacrasses.
Post Address			4		-	Street	LEURINE .					F		
ly, Sinte, Zip Code		· ·		<del></del> :	·	C104, St	South Ap Carb	`			<u>.</u>	+	1	
ojos likumas ir ti	pining Rep		Telupho	as Na.	-	Totach	kensaci	Ut	N COURS	760	)1,	+	-	
Total (10) .		Name of		Dayla (71)		Name o	329-744	r ·	003			1		
3-7-12	to Abeliane (Cher	3-8-	12			Oneg	a Buvii	onment	41 ;	Sez	VE	des	4	
Finding Chambridge Attenues Purch	AND SON	in the of Alaska I Fair My House	emet .			280	Huyler	St.	4			_	4	
CREST - Deputies type of White (Check	the late of the second			., .	-		h Hacke	nsack	N:	I.	07	6		
estar Estar		Remail	Con			. 0	Pull Complete		P		irel.	-	-	
			,				Glovebay Pr	in Conduct nd (7), and illus	-		-			68
I man fine		is Local	lam lor								ALL			
Anharita Castalain 10-55-46	infatheded (ACDA)	Used Sale	in toy	Adam	Con		- (ecro	Amoun		7		5		
In Rus (18)	•	Controlle S (12)		die an		VAT.	OF	(Spard SF or L	F)	Remova	Repart	-	THEORY	
ASEM ENT		April 19.	-	CT31								\$	d	
TO THE PARTY	· ·	7 .	K.	1 Hearin	MC.	JUSU	4100	28	LIE .	X	1 1		#	
							<u> </u>							
in of Highbook Vis	the Heater	N	DEP Via		otto 1		Name of	Flaggerand L		: <u>-</u>		Ш	H	
	SE SERVICE	S Z	259	2		D	ilESI	LAND	FIL				اب	
then the my	d	<u>.</u>	-	2		Data -12	Clp, 55	LEHER		19.	12	OVE		
, 800m	ARK N=		-		1 27									
OCHELLER	MRK N	Estina:	tor		3	27.01	han .		/ Date	-10		1	$\prod_{i}$	
1. State	PARK. N=		tor		1	2.7.01	han		/ Date	Le	-	2		

# Nowack

Date of Notification (1)		Na	me of B	uilding Owner/O	perator (	2)			-00.8836 W		. 1			
02/13/2012		В	onton	Board of Ed	ucation	V E	(1) E	1 10/	5				_	
Agencies Notified Type Notification	Initial  Amended  Amendment #1			Street Address 434 Lathrop Ave.										
DEP Amended Amendment #				, Zip Code , NJ 07005			MAR 1	2 20	23					
× DOH	cluding		me of C	ontact sternakis				Teleph	none Nun	nber	•			
			FACILI	TY INFORMATI	ON			3113		1				
Name of Facility Where Abatement is Taking John Hill School Street Address	Place (3)					× So	f Facility (4) chool (K-12 ubchapter 8 ther (i.e. pri	) (Other	than K-12 ommerci	2) al buildi	ngs, l	nome	s,	
435 Lathrop Ave. City (5)						Square 45,02		# of F	loors		ig. A	ge		
Boonton, NJ 07005 County (6)			ounty Co	ode (7) SE ONLY)		CHOICE TO A THE	t Use (Prior	1.3	demolisi	hed)				
Morris			ASCM		Name		ement Cont	ractor (9	)					
Name of Monitoring Firm Hired by Building O EnviroVision Consultants, Inc.		00079 SMA				AC Corp.								
Street Address 20-21 Wagaraw Road-Bldg. 34A		27 E				et Address East 33rd Street								
City, State, Zip Code Fair Lawn, NJ 07410				State, Zip Code erson, NJ 07514						11.				
Project Manager for Monitoring Firm Guillermo M. Morales		1000	elephon 173-636	e No. 6-9145	Telephone No. 973-345-4055 License No. 01110								200-1-0	
Start Date (10) 02/23/2012	Comp	oletion D	ate (11)		Name of OSHA Monitor EMSL Analytical, Inc.									
Occupancy Status During Abatement (Check	Only One	:)				Addres		·-						
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe: SEE THE ATTACHE	eriod of Al	oateme		R	City, S	State, Zi	LTON AV p Code WAY NJ (							
Scope of Work (Check All That Apply)		184 (30)												
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf	-	enovat emoliti			<u> </u>	Min K Glo	I Containme ni-Enclosure ovebag Prod n-Exempted	e cedure				re		
			- 1			Non-Exemple		a ( ) and ( to).		Abatement				
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Location	1616	D	Description of					Туре				
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)		d Solel ntenan odial S (12)	y by nce/	Asbestos Co (i.e. therm surf	estos Containing Material (ACM) e. thermal systems insulation, surfacing, VAT, or other miscellaneous)			Amount (Specify SF or LF)		Removal	Repair	Encapsulate	Enclosure	
	Yes	No	N/A							-	-	1,4	1	
Boiler Mortar			X		oiler Ro	2000)1000				X		X	V	
Pipe & Elbow insulation			X		A TOTAL CONTRACTOR					. X		X	X	
Floor Tile Mastic			X	Hallwans   X				X	+					
Ceiling Plaster			X	Boiler Room X				_	X					
Name of Registered Waste Hauler SMAC CORP.		H	IJDEP V lauler ID 8590	No. of V	oic Yards Vaste Yards		Grows			mil				
City, State 27 East 33rd Street, Paterson, NJ	07514			5355000	posal Dat 05/201		City, Sta Morris							
Completed by Borce Gjorsoski	Title President				Signatu	Some Garages				Date 3/02/12				

te of Notification (1)  02 / 13 / 12		Nan	ne of Bu oontor	n Board	ner/Operator (2) of Education	EGE						
encies Notified Type Notification		4		hernAve		MAR 1	2 2012					
DEP Amended				Zip Code		(217						
DOA (NJAC 5:16) Amendment #		The second		n, NJ 07	005		TT-1hans Number		-	_	_	
DCA justification)	<b>G</b>		me of C		1	1 24 1	Telephone Number	38				
(NJAC 5:23-8) Cancellation		J	lohn K	asternal	kis		Consideration of the Constitution of the Const	- ii		-	811 3 1	
		F	FACILI	TY INFO	RMATION		- 90	r, 121.19			_	
ame of Facility Where Abatement is Takin	g Place (3)					Type of Facility	(4)					
John Hill School			School (K-1	2) 8 (Other than K-12)								
treet Address				*		Other (i.e.,	private & commercial b	uildings				
435 Lathron Ave.				weeken a seed		homes, etc.	.)	Bldg. A				
City (5)				Square Feet	# of Floors	1922						
Boonton, NJ 07005						45,028	3				-	
County (6) Morris			STATE USE ONLY) Current Use (Prior if being demolished) School									
Name of Monitoring Firm Hired by Building	Owner (8)	AS	CM No.	. 1	Name of Abatem		9)					
Environmental Remediation & Ma	anagemen		SMAC Corp.									
Street Address	15	Street Address	ID									
49 Prestile Pl.		27 EAST 33 <sup>F</sup>				_						
City, State, Zip Code					City, State, Zip C							
Trenton, NJ 08691			rathern est age		PATERSON NJ 07514							
Project Manager for Monitoring Firm		Telephone No. License No. 01110										
Gary Ceuerence			-259-8		973-345-405	The second second second second second	01110				_	
Start Date (10) Sci	neduled Con	1	EMSL ANALYTICAL, INC									
Occupancy Status During Abatement (Ch	neck only on	e)			Street Address	A STATE OF THE STA						
Escility Closed/Vacated During Entire	Period of At		1056 SHELTON AVE									
Abatement Performed Outside of Nor Time of Abatement:AM	mal Facility	Hours	s - Desci	ribe .M	City, State, Zip PISCATAW	Code AY NJ 08854					_	
Scope of Work (Check all that apply)  □ ≥3 sf or ≥3 lf	⊠ Ren	ovatio	on	**************************************	Mini-E	nclosure	Negative Pressure	0				
≥160 sf or ≥260 lf					⊠ Non-E	xempted (*) and	Non-Friable Procedur	Abat	eme	nt Ty	vr	
	N	_ocat orma	lly	T.	Description	n of		-			Т	
Location of Asbestos-Containing Material (ACM		ely by	Asbe	estos Containing ermal systems in	Material (ACM)	Amount (Specify	Removal	Repair	Encapsulate			
TO BE ABATED	BE ABATED Custodial Staff?				VAT, c	or	SF or LF)	val val	"	sula	1	
IN Facility (13)		(12)			other miscell	aneous)				ate	1	
(10)		No					100SF				+	
Boiler Mortar			×	Boiler		1,500LF				+		
Pipe & Elbow insulation				Hallwa		3,000SF				+		
Floor Tile Mastic					nd, 3rd Floor		2,000SF				-	
Ceiling Plaster						Alama et	Registered Landfill					
Name of Registered Waste Hauler			NJDEP Hauler	ID No.	Cubic Yards Waste	Grows	s Landfill				_	
SMAC Corp			1859	0	30 Yards Disposal Date		te					
City, State 27 E 33rd Street, Paterson, NJ	- 07514				08/24/201	2 Morris	sville, PA	Date 1			_	
Completed By (Print or Type) Borce Gjorsoski		Signatu	ope G	near	2 / 1 ±	3/1	12					

ASB-41 JUL 01

<sup>\*</sup> Do not use this form for asbestos licensure exempted activities.