Date of Notification (1)				Name of	Building (Owner/Operato	or (2)	-151	- E	n n	7 12	Post		12	
	ch 12, 2012		(The state of the s	c / Johnson	& Joh	nson	6 IS	U V	店	1	11		
Agencies Notified	Type Notification			Street Ad			. 41						and the	3	
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DEP	Amended	 .3	10	City, Stat					A 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	20	12	Arg Tr	1	1	
DOL.	Amendment a		— F	Raritan,	0.001100.000.000.000.000	69			1 + 7		No se la sel				00 80
□ DOH	justification)			Name of			- 1	AUME	Tele	phone	numbe	_	Mark Asses		
DCA	Cancellation		F	Project N		Marketon Company of the Company of t			4			P.C.			-
Name of Facility Where	Abatement is Taking	Place (3)	FACIL	ITY INFO	DRMATION	Туре	of Facility (4	1)	180 00		9.2	-	÷	-
Ortho Diagnostic / Jo	70AY 90BT W 70BT		,					School (K-12					٠	11.	
Street Address	Jillison & Johns						⊣ ⊓ :	Subchapter	8 (Othe						
1000 / 1001 Pouto 2	02							Other (i.e. p	rivate 8	comme	ercial b	uild	ings,	home	s,
1000 / 1001 Route 2 City (5)	02						-	etc.) re Feet	# of	Floors		ВІ	dg. A	ge	
Raritan, NJ										3			_		
County (6)				County C			Curre	ent Use (Prio	r if bei	ng demo	olished)				
Somerset				(STATE U	SE ONLY)					Facility	У				
Name of Monitoring Firm	Hired by Building C	Owner (8)		ASCM	No.	Nam	e of Aba	tement Con	tractor	(9)					
Bulava Environmenta	al, Inc.							Group, LI	LC.						
Street Address						0.000.000	et Addre								
12 Kilmer Drive		00000						HWY N,	STE 2	209		6-33			
City, State, Zip Code						1	State, Z								
Hillsborough, NJ 088	344-3830					The second secon	The second second	NJ 08034	1			_			
Project Manager for Mor	nitoring Firm			Telephon		5550000	phone N			Licens					
Edward J. Bulava				908-874			759 -	- 121		00781					
Start Date (10)		Schedule		mpletion [HA Monitor							
2/2/12				12/31/1	2			Group, L	LC.						
Occupancy Status Durin	g Abatement (Checl	k Only Or	ie)			0.70000000	et Addre		CTE (200					
Facility Closed/Vac	ated During Entire F	Period of	Abate	ment		-		HWY N,	SIE	209		_	-		
Other - Describe:	ed Outside of Norm	al Facility	Hour	S			State, Z								
	(II That Apply)				-	Che	rry mili,	NJ 08034	+			-			
Scope of Work (Check A	di That Apply)	Ń.					X -	II Containme		Negati	uo Dros	cur	0		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	Renova Demol					ni-Enclosure		Negati	ve ries	Sui	е		
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			Loca											/pe	
Locatio			Norma	ely by		Descripti					-			1	1
Asbestos-Containing		1000000	intena			tos Containing thermal syste				mount Specify		ZJ	_	Enc	m
TO BE AB		Cus		Staff?	(1.6.	surfacing, \	VAT, or		-	or LF)		Remova	Repair	aps	Enclosure
(13)			(12)			other miscel	laneous)					ova	air	Encapsulate	иге
		Yes	No	N/A								70.0		Ф	
OCD Boile	r Room	X				pipe	9			45 l/f		X	10/50		
OCD Bolle	i Nooni					Tan				50 s/f		X	-		
	acomont				fitting				51	5	X				
F Building B		\rightarrow	-	-					- 1		<	$\langle \rangle$	-		
Tenant H				NI DED 14	lasta	Vat/Ma		Name of	_	50 s/f	ndfill	1			1
Name of Registered Wa	ste Hauler			NJ DEP W Hauler ID		of Waste	•	Ivanie 01	regist	,, ou Lai					
Freehold Cartage				222		6		BFI Impe	erial L	andfill					
City, State						Disposal Da	ate	City, Stat	е	100					
Freehold, NJ						12/31		Imperial,	, PA 1	5126	,				
Completed by		Title				Signat	We /	17/_	-27		Date				
Michael Cooper		Presid	dent				سر خرا	1			3/12/	12			

Location of		Location Normall	ly	Description of				emen ype	t
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	ed Solel intenar todial S (12)	nce/	Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A	*				(D)	
Tenant House		X		pipe insulation	33 lf	X			
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Date of Notification (1))			Name of I	Building	Owner/Opera	ator (2)	In Et		1 5	Ir	1		
Feb	ruary 21, 2012		(Ortho Dia	agnost	ic / Johnso	n & J	ohnson		125	11			
Agencies Notified	Type Notification			Street Ad										
⊠ EDA	Initial		-	1000 / 10	001 Ro	ute 202, P	О Во	x 300 MA	R 13 20	112	les	7/1		
EPA DEP	Amended			City, State			1	4 1			P-2W	- 1		
DOL	Amendment		F	Raritan,	NJ 088	369						2		
M DOLL	Emergency (justification)	including	F	Name of	-		72	9(31)	Telephone	Number		1		
DOH DCA	Cancellation		ı	Project N	/lanage	er		1	Table In Jews				74	
						ORMATION			The second transfer to the second	e stanfold our				
Name of Facility When	re Abatement is Taking	Place (3)				-Ty	ype of Facility (4)			7.43	11,84	
Ortho Diagnostic / Street Address	Johnson & Johns	on					-E		?) 8 (Other than rivate & comm		uildi	inas.	home	s.
1000 / 1001 Route	202					. 10	\boxtimes	etc.)						
City (5)							S	quare Feet	# of Floors		Blo	dg. A	ge	
Raritan, NJ									3					
County (6)				County C			С	urrent Use (Prio	r if being dem	olished)	77			
Somerset				(STATE U	SE ONLY	"			Facilit	y				
Name of Monitoring F	irm Hired by Building (Owner (8)		ASCM	No.	Na	ame of	Abatement Cont	ractor (9)					
Bulava Environme		100				Th	е МА	CK Group, Ll	.C.					
Street Address	mai, mo.						reet Ad							
						150	nn Kir	ngs HWY N,	STF 209					
12 Kilmer Drive			-					e, Zip Code	012200					
City, State, Zip Code	2244 2222					0.000		till, NJ 08034						
Hillsborough, NJ 0				Telephon	o No		elephon		200	se No.	1923			3553
Project Manager for M	lonitoring Firm								0078					
Edward J. Bulava		- · · · ·		908-874				9 - 5000 OSHA Monitor	0070	-			-	-
Start Date (10)	40	Schedule		mpletion E			7678778761	CK Group, LI	C					
2/2/		l. Only Or		12/31/1			reet Ad				-			
Abatement Perfo	acated During Entire I	Period of	Abate	ment rs		15	00 Kir	ngs HWY N, e, Zip Code	STE 209		-		_	
Other - Describe):					— Ch	erry F	Hill, NJ 08034	1					
Scope of Work (Check	k All That Apply)													
≥3 sf or ≥3 lf ≥160 sf or ≥260	lf	School and S	Renov Demol				XXX	Full Containme Mini-Enclosure Glovebag Prod Non-Exempted	edure					
		T											emen	t
			Loca Norma			7220774074					_	T	/pe	
Asbestos-Contain TO BE	tion of ing Material (ACM) ABATED acility 13)	Use Ma Cus	ed Sol inten- todial (12)	ely by ance/ Staff?		estos Contain e. thermal sys surfacing other miso	stems in g, VAT,	terial (ACM) nsulation, or	Amount (Specify SF or LF)		Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A	-				45 l/f		/			
	iler Room	$\langle \rangle$					pe			-+	\rightarrow	-		
-	."_				Ta	ank		350 s/f	-	\rangle		-		
F Building	Basement	$\perp X$				fitti	ngs		51	_ 2	X		-	-
						1 3 - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					_			
Name of Registered	Waste Hauler			NJ DEP W		Cubic Ya	rds	Name of	Registered La	ndfill				
Freehold Cartage				Hauler ID 222		of Waste	.5	BFI Impe	erial Landfil	l				
City, State						Disposal		City, Stat						
Freehold, NJ							31/12	Imperial.	PA 15126					
Completed by		Title	_				ature	The second secon	0	Date	-	-		
Michael Cooper		Presid	dent				1/2-	19/1-		2/21/	12			
IVIICHAEL COODE		1 10010	JIII								1000			

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

Date of Notification (1)			Name of	Building	Owner/	Operator	(2)	3 B F	EIV	E	Pine.	7	11.00	
Feb	ruary 10, 2012		C			c/Jo	hnson 8	& John	nson		15	.11			
Agencies Notified	Type Notification			Street Ad								111			
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DEP	Amended	1	100	City, Stat				U	1.1	1 1 0 201	L	hanes	1		
X DOL	Amendment Emergency		— F	Raritan,		69			1			-			
□ DOH	justification)			Name of	Contact				5,000	Telephone	Numb	er	.		
DCA	Cancellation	2	F	Project N	Manage	r		1., ,,,,,				-			
N		- DI (0)		FACIL	ITY INFO	DRMAT	ION	Tuna	of Facility (4		24.0			- 1	
Name of Facility Whe								_							
Ortho Diagnostic /	Johnson & Johns	son							School (K-12) 3 (Other than k	(12)				
Street Address										ivate & comme		build	ings,	home	es,
1000 / 1001 Route	202								etc.)						
City (5)								Squar	re Feet	# of Floors		B	dg. A	ge	
Raritan, NJ		2- 2-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1								3					
County (6)				County C				Curre	ent Use (Prior	if being demo	olished	1)			
Somerset				(STATE U	SE ONLI)					Facility	y		00000		
Name of Monitoring F	irm Hired by Building	Owner (8)		ASCM	No.		Name	of Aba	tement Cont	ractor (9)			3.0		
Bulava Environme	ntal, Inc.				4.2		The M	ACK	Group, LL	.C.					
Street Address							Street	Addres	ss						
12 Kilmer Drive							1500 k	Kings	HWY N, S	STE 209					
City, State, Zip Code							City, S	tate, Z	ip Code				-		
Hillsborough, NJ 0	8844-3830						Cherry	Hill,	NJ 08034						
Project Manager for M				Telephon	ne No.		Teleph			Licens	e No.				
Edward J. Bulava			c	08-874	-6207		(973)	759 -	5000	00781					
Start Date (10)		Schedule		SALES SERVICES SERVICES			,	-	HA Monitor						-
2/2/	12			12/31/1:			The M	ACK	Group, LL	C.					
Occupancy Status Du		k Only One	-	12/01/11			Street					-		-	
123							1500 k	(inas	HWY N, S	STF 209					
Abatement Perfo	/acated During Entire ormed Outside of Norn	Period of A nal Facility	bater Hours	nent S					ip Code	J.L. 200					
Other - Describe			1207.11.01.01				J		NJ 08034						
Scope of Work (Check	k All That Annly)						Officity	, i iii,	140 0000-			-3055		-	
	K All (Hat Apply)	☑ -					E	XI	II Cambaiama	at with Nagatio	io Dro	00116	^		
≥3 sf or ≥3 lf ≥160 sf or ≥260 l	If	gentered	enova emoli				É		ni-Enclosure	nt with Negativ	ve Pre	SSUI	е		
<u> </u>							2	X Glo	vebag Proce						
								No	n-Exempted (*) and Non-Fria	able Pr				
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Local	tion of	1 1000	orma	30.00			escription				-				Т
	ing Material (ACM)	20070	ntena	ely by nce/			ntaining M al systems			Amount (Specify		т.	2000	m	m
	ABATED acility	Custo		Staff?	(i.e.		acing, VA		alloll,	SF or LF)		err	Re	cap	Clo
	13)		(12)			other	miscellar	neous)				Remova	Repair	Encapsulate	Enclosure
				T								=		te	to
		Yes	No	N/A						45.17		V			
OCD Boi	iler Room	1					pipe			45 l/f		\Rightarrow			
-	_"-						Tank			350 s/f	,	\times			
Name of Registered V	Naste Hauler			J DEP W	laste.	Cubi	c Yards	-	Name of F	tegistered Lan	dfill		-		
rame of Negistered V	radio Haulei		1,550	lauler ID		of W				3.2.2.00.2011					
Freehold Cartage				222	53		TBD		BFI Impe	rial Landfill					
City, State						Disp	osal Date		City, State						
Freehold, NJ						10 10	12/31/12	2	Imperial,	PA 15126					
Completed by		Title					Signature	//	171	0	Date	ecott.		T)	
Michael Cooper		Preside	ent			r.	- 10 m	-1-			2/10/	12			
							5111513355					-	100		-

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

Date of Notification (1)	e of Notification (1) February 01, 2012				Building (Owner/Operato	or (2)	111	1160	12 11	117	57	1
						c / Johnson	a & Jo	hnson			10		
Agencies Notified	Type Notification			Street Ad		4- 000 DC	. D.	300	☐ MAR	13 2	010	11	
EPA EPA	Initial		-			ute 202, PC) BOX	300	1 00711	132	012_	- II E	4
DEP	Amended	4			te, Zip Co			ŀ	Ĺ			į	The straight
DOL	Amendment #		-		NJ 088	69			Telephone	Number	1 2		- 1
DOH	justification)			Name of					Telephone	Number	-		The state of the s
DCA	Cancellation		F		Manage						. 1	The state of the state of	exten)
N	Manager Lie Teller	DI (2)		FACIL	LITY INFO	ORMATION	Tvr	pe of Facility (4	,			7	
Name of Facility When			,				1 1 1						
Ortho Diagnostic /	Johnson & Johnson	on					\dashv \vdash	School (K-12	t) 3 (Other than I	K-12\			
Street Address									ivate & comm	.53	dings,	home	es,
1000 / 1001 Route	202							etc.)					
City (5)							Sq	uare Feet	# of Floors	E	Bldg. A	\ge	
Raritan, NJ									3				
County (6)				County C			Cu	rrent Use (Prio	r if being demo	olished)			
Somerset				(STATE U	ISE ONLY)				Facility	у			
Name of Monitoring Fi	irm Hired by Building C	wner (8)		ASCM	No.	Nam	ne of A	batement Cont	ractor (9)				
Bulava Environmer						The	MAC	K Group, LL	.C.				
Street Address						and the second s	et Add	The second secon					
12 Kilmer Drive						1500) Kind	gs HWY N, S	STE 209				
City, State, Zip Code		-						, Zip Code				o de la composição	
AND THE PROPERTY OF THE PROPER	0044 0000							ill, NJ 08034					
Hillsborough, NJ 0				Telephor	no No		phone		Licens	se No	-	-	
Project Manager for M	ionitoring Firm		1.			7.55.400.70			00781				
Edward J. Bulava				08-874				SHA Monitor	00761	4-14-14-14			
Start Date (10)		Schedule	ed Cor			1 (4.58)			0				
2/2/			7.0	2/10/12	2			K Group, LL	<u>.</u> C.		-		
Occupancy Status Du	ring Abatement (Checl	k Only On	e)				et Add		OTE 000				
Facility Closed/V	acated During Entire F	Period of A	Abater	ment		The second secon		gs HWY N,	STE 209				
	rmed Outside of Norm	al Facility	Hour	S				, Zip Code					
Other - Describe						— Che	rry H	ill, NJ 08034					
Scope of Work (Check	k All That Apply)												
≥3 sf or ≥3 lf		X F	Renova	ation			\boxtimes	Full Containme	nt with Negati	ve Pressu	re		
≥160 sf or ≥260 l	f		Demoli	tion			N 2	Mini-Enclosure					
							M	Glovebag Proc Non-Exempted	edure (*) and Non-Fri	able Proce	dure		
								TOTI Exemples	() and			emen	t
			Locat								Т	уре	
Locat	tion of		Norma d Sole			Descript		mint (ACM)	Amount		T	leanay.	
	ing Material (ACM) ABATED		intena			stos Containing thermal system			(Specify	Z)		Encapsulate	m
	acility	Cus		Staff?	(1.0	surfacing,	VAT, c	or	SF or LF)	Remova	Repair	aps	Enclosure
	13)		(12)			other misce	llaneou	ıs)		ova	a E	ula	Sure
			€ 1000×	A1/A						=		ē	
		Yes	No	N/A					45.116		1		
OCD Boi	ler Room	X				pipe	e		45 l/f	$- \bigcirc$			-
	"_	X				Tan	nk		350 s/f	_ X			
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Englishmen teachers and an analysis of the same			27	NJ DEP V						166			
Name of Registered V	Name of Registered Waste Hauler					Cubic Yard	S	Name of F	Registered Lar	ndfill			
F 1.110	Turnel of Contago					of Waste		BEI Impo	rial Landfill				
Freehold Cartage				222	.33	Disposal Da		City, State			_		-
City, State													
Freehold, NJ				3	2/10/		imperial,	PA 15126	Data				
Completed by		Title	AT 100			Signat	ture	19/-	2	Date			
Michael Cooper		Presid	dent	E 12			- A			2/1/12			

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

CHICK # P100

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

GAC Project # 060-11

Client Project #												
Date of Notification (1) March	2, 2012				Name of Building Owne RUTGERS, THE S	r/Opera	tor (2) UNIV	ERSI	TY OF	NJ		Marie Comment
Agencies Notified EPA		Notification ⊠Initial N □Amende	otificati	2002200 DV	Street Address ENVIRONMENTAL 27 ROAD 1, BLDG						M	
☑DCA . ☑ DOL		■ Emerge justification		cluding	City, State, Zip Code PISCATAWAY, NJ	0885	4 1/	۸D	1 2 00	110		
☑ DEP- No Longer REQUIF ☑ DOH	RED	□Cancell			Name of Contact MICHAEL SMITH,	į ·	T IV		hone Nu		le mental	
E DON		-			HEALTH & SAFET		1,	13.100	CONTRO	L 6x	<u> </u>	
and the second				FACILITY INF	CONTRACTOR			1101	HOURS.	594-7W		
Name of Facility Where Abater TILLET HALL, BLDG#		ing Place (3)			Type of Facility (4) ☐ School (K-12) ☑ Subchapter 8 (other the	an K 13)\			***************************************	ACT THE CHICKEN	The state of
Street Address LIVINGSTON CAMPU	s	10			Other (i.e. private & co	ommerci	al buildin				ears	e sed
City (5) PISCATAWAY	County (6)	LESEX	County ((State U	Code (7) ise Only)	Current Use (prior if bei	ng dem	olished):	ACA	DEMIC			
Name of Monitoring Firm Hired ATC ASSOCIATES	l by Bldg. C	Owner (8)	ASCM N 0098	No.	Name of Contractor (9) GREENWOOD ABA	TEME	ENT CC	NSU	LTANT	S. INC).	
Chroat Addross					Street Address					_,		
3 TERRI LANE					268 MAIN STREET							
City, State, Zip Code BURLINGTON, NJ	08016			City State, ZipCode BUTLER, NJ 07405	5							
Project Manager for Monitoring		Telephone N	lumber		Telephone Number			Licens	e Numbe	er		
BRIAN KEARNY		609-386-	8800		973-492-0477			0084	.0			
Scheduled Start Date (10) 03/23/12		Scheduled 0 04/30/12	Completion	n Date (11)	Name of OSHA Monitor 1 ENVIROVISION, IN	IC.			,			
Occupancy Status During At					Street Address	V DO 4						
■ Abatement Performed Out	itside of No	ormal Facility	Hours -		20-21 WARGARAV	V RUA	U					
Describe: 3PM FRI TO MO ACCESS AS NECESSARY)	ON 5 AM	DAILY AS	SCHEDU	JLED (24HR	City, State, Zip Code							
SUB8 OCCUPPIED					FAIRLAWN, NJ							
Scope of Work (Check all that	apply)				Σ	S Full	Containr	nent w	ith Nega	tive Pre	ssure	
□≥ 3 sf or ≥ 3 lf 区 ≥ 160 sf or				☑ Renovation ☑ Demolition		Glov	Enclosur ebag Pr	ocedu				
	446						Exempte	- 1 /				ıre
Location of Asbestos-Containi Material (ACM) in Facility (13)	Sole Staff	ocation Normally by Maint./Co	ustodial	Description of As (ACM) (i.e. them VAT, or other mis	bestos Containing Material nal systems insulation, surfa cell.)	acing,	Amount (Specify or LF)	The second second second		Repair		Enclose
1 st & 2 nd Floors	YES	S NO	NA	TSI (pipe ins	ulation)		150 S	F	X	T	T	Г
1 st Floor, 5 Cooler Units		X		Cork Mastic			3000		X	+		
2 nd Floor Linoleum		<u> </u> <u> </u>	-		oor Covering		3600		X	1	-	_
		NJDEP Was	to Haulas			80 (of Regis	tered La	ndfill	L
Name of Reg. Waste Hauler See Hauler Below #1 &		Cubic Yards of Waste:	(000000000	*****	G.R.	o.w.s.	North	Landf	ill			
Hauler #1) Greenwood Abate NJDEP # 12561 Hauler #2) Newark Carting, NJ DEP # 4509	NJ 07405			osal Dat 0/2012			City, Sta 100 New Rd. Mor 19067 215-736	Ford N				
Completed by (Print or Type) RAYMOND C. PEDAL	.INO	Title SENIOR P MANAGER		et .	Signature /C	1	Ze.	<u>Date</u>	March	2, 201	2	
				11					1			

Date of Notification (1) 3/8/2012)				Building (Owner/Or	perator	(2)				J E			
Agencies Notified	Type Notification		1 7	Street Ad 923 DE	dress	AVE.				MAR	132	012			
DEP DOL	X Initial Amended Amendment				e, Zip Co RY HILI	ode _, NJ 08	8034			68.41 17.00					j :
DOH DCA	Emergency justification) Cancellation		1 353	Name of JOE LE							hone N		•	J	366 - 8 :00
Name of Facility When	re Abatement is Takir	ng Place (3)		FACIL	JTY INFO	ORMATIC	NC	Туре	of Facility (4)				(185) (1	4.
RESIDENTIAL Street Address				electric control of				Π	School (K-1 Subchapter Other (i.e. p	8 (Other			dings,	home	≥ S,
923 DELAND AV City (5) CHERRY HILL	E.							E (etc.) re Feet	# of F		E	ildg. A		
County (6) CAMDEN				County C	ode (7))		Curre	nt Use (Pric	or if being	demoli				
Name of Monitoring Fi		Owner (8)		ASCM	No.			of Aba	tement Cor	ntractor (9		SERVI	CES	INC.	
Street Address 1634 S DELAWA				1	·		Street	Addres							
City, State, Zip Code PAULSBORO NJ									ip Code HILL, NJ	08062			Per According		
Project Manager for M ED KEEGAN	lonitoring Firm			Telephor 856-42	ne No. 3-5711		Teleph 610-				icense)1145	No.			
Start Date (10) 3/9/2012		Scheduled 3/11/20		pletion [Date (11)		Name EMS		-IA Monitor						
Occupancy Status Du	ring Abatement (Che acated During Entire			ent			Street 200 l		ss 30 NORT	ТН					
Abatement Perfo	rmed Outside of None: RESIDENTIAL HOL	mal Facility	Hours			_			ip Code NSON, N	J 08077	7				
Scope of Work (Check	k All That Apply)				4.7			_							
≥3 sf or ≥3 lf ≥160 sf or ≥260 l	f	-	enovat emoliti				×	Min	Il Containm ni-Enclosure ovebag Pro	e cedure				_	
		1 101	Locatio	00			عا	_l No	n-Exempte	d (*) and	Non-⊢n	able Pro	Abate	emen	t
Asbestos-Containi TO BE A In Fa	tion of ing Material (ACM) ABATED acility 3)	Used Mair	ormall I Solel ntenar odial S (12)	y ly by nce/		stos Conta thermal surfac		Aateria s insula T, or	ation,	(Sp	ount ecify or LF)	Remova	Repair	e Encapsulate	Enclosure
		Yes	No	N/A						444	. 05		_	e e	-
	TILITY ROOM			Х		SHEET					SF	X	-	_	
LAUNDRY/U	TILITY ROOM			X		FLOOI	RTILE	= - NF	•	60	SF	X			
NETS						of Was			ALLIE	Registere			L LAI	NDF	
City, State HAZLETON, PA	HAZLETON, PA					3/12/2	/	/	City, Stat	IAL, PA	14	Dete			
Completed by RON SWANSON		Title PROJ	IECT	MANA	AGER	V S	Signatur	a a	22	aus		Date 3/8/20	12		
		PROJ	IECT	MANA	AGER	-	* Do n	ot use	this form fo					activ	itie

Date of Notification (1)		(1°			ng Owner/Operato	ř (2)	meyAR 13	7012	,		100
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[] DCA	[] Cancellatio	n		M	ATT						7
	4	and the second second			FORMATION			groupper atma	roman-see	e prosessions	
Name of Facility Where	Abatement is Te	king Place (3)	- I a in the contract of the second	entral and thousand a feet \$100		Type of Facili					
FORKARBU	707			- 14- A 154 PA - 4 SET 1 - FE	i de la managa de la composição de la co	School (K	·12) er 8 (Other than K-1	2)			
Street Address	5-					Other (i.e.,	, private & commerc	ial buil	dings		
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City (5) RUMLON	/						1	1	75		
County (6)		Carrent Service Control Contro	l Cou	inty Code	(7) (\$TATE	Current Use (Prior if being demol	shed)			n Martin
Monmou	.75			∶ÓNLY)			House			**- 1:04:0	
Name of Monitoring Firm		g Owner	ASCM	l No.	Name of Abater	nent Contractor	(9)		nacy of the	11.554.855	
(8)	•				Ack	INSULA	TIN CU	7.	NI	(
Street Address	world the first content of the second species and		Le market (Transmission		Street Address			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
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City, State, Zip Code	reactified decided by high typical problems of the people of	Constitution of the section of the s	tore watermanny	S-Wyserian RT College (2016)	City, State, Zip C	Code	r				
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Project Manager for Moi	itoring Pi rm	Te	lephone	No	Telephone No.	11700	License No. ここのなん	c,			
a year of the state of the stat	·			ernante aument	Name of OSHA					1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
	1 50	neduled Comp 2 - 277	ieuon Da	ate (11)	Name of OSTA	MOHION	N CO TA	L			
3-79-72 Occupancy Status Durin		3-24-			Street Address	VXVIX	F S.U. E.P.Y.				; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;
Facility Closed/Vacate					and the second second second	JTROXE /	2 <i>i</i>)				
Abatement Performed				87	Ch. Clata Zin C	exeter	THE COMPANY OF THE PARK OF THE				
[] Other - Describe:	Jan-	7 p.n	174 1174 9771 771 3		ColTI	Necle	<u>NS 02</u>	22)		
Scope of Work (Check a	II that apply)	والمراجد والمحمد المتمار في المحمد	ed standard	- 24 - 6 5 70 16 76 3 - 16 1						Mean	
[]≽3 st or ≥3 lf		[] Benova	dion		[_] Full Cor [_] Mini-End		egative Pressure				
160 st or ≥260 tt		Demoliti			Gloveha	ag Procedure					
	· · · · · · · · · · · · · · · · · · ·				j Mon-Ex	empted (*) and N	lon-Friable Procedu T		 Vbalei	ment	
		ls Locat Normal						1	Typ		
Location of		Used Sole	ly by	2015	Description of			-			
Asbestos-Containing M TO BE ABAT		Maintena Custodi			os Containing Mat thermal systems i		Amount (Specify	20	701	8	100
IN Facility	icks.	Staff?		(min)	surfacing, VAT,	or	SF or LF)	Removal	Repair	808	Enclosure
(13)		(12)	.,		other miscellaned	uis)		ñi.	14.	Encapsuleta	6
		Yes No	N/A								
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Name of Registered Wast	c Hauler	L 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	TIDELA	Vaste 1	Cubic Yards	I Name of Reg	jistered Landfill	J J	!	a in it	
		250 (000)	lauter ID	STATE OF THE STATE	of Waste	GRI	WS.				
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Cours NEU	(N) 7	カラつ	22	_	3-24-12	Till	WIDINN	P	A		
Completed By	17.0	. U./.			Signature()	Little Ville	Date		- 77		
JAHL GIAL	L.	15.75 X	(y) 6)	N.	1 Tracks	67 a CA	3-1	12			
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CK# 1400

State of New Jersey MOTIFICATION OF ASDESTOS ADATEMENT (Pursuant to MIAC 8:60 and 12:120) Name of Building Owner/Operator (2) Date of Modification (1) Type Notification Agencies Notified Initial) Amended City, State, Zip Amondment # [] Emergency (including Telephone Number justification) Name of Contact [] Cancellation FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) 1 School (K-12) Subchapter 8 (Other than K-12) Other (i.e., private & commercial buildings, homes, etc.) fildg. Age # of Floors Square Feet Current Use (Prior if being demolished) County Code (7) (STATE APARIMENT USE ONLY) Name of Abatement Contractor (9) ASCM No. Name of Monitoring Firm Hired by Building Owner ACK INSULATI Street Address Street Address 95 MENIROSE City, State, Zip Code COLTS NECLS, NS City, State, Zip Code 0772.6 License No. Telephone No. Telephone No. Project Manager for Monitoring Pirm 731 214 / 75 Name of OSHA Monitor 0000 Scheduled Completion Date (11) 3-24-72 Start Date (10) ALC INSULATION CO Street Address Occupancy Status During Abatement (Check only one) 95 MONTROVE RD [] Facility Closed/Vacated During Entire Period of Abatement City, State, Zip Code [] Abatement Performed Outside of Normal Facility Hours 7 Am - 7.0.m Scope of Work (Check all that apply) | Full Containment with Negative Pressure | Mint-Enclosure Renovation 7 3 st or ≥3 ff Glovebag Procedure Demolition Mon-Exempted (*) and Non-Friable Procedure ≥160 st or ≥260 R Abatement ts Location Type Normally Used Solely by Description of Location of Amount Asbestos Containing Material (ACM) Maintenance/ Asbestos-Containing Material (ACM) (Specify (i.e., thermal systems insulation, Custodial TO BE ABATED SF or LF) surfacing, VAT, or Stail? IN Facility other miscellaneous) (12)N/A No Yes SomonI Name of Registered Landfill NJDEP Waste Cubic Yards Name of Registered Waste Hauler of Waste Hauter ID No. . ACE INSULATION CO Disposal Date City, State NECK NI OTH CULL Completed By Smell ASD-41

Date of Notification (1) 03/08/12 Ck: 1910 \$200			Name	of Build	ing Owne	er/Operato					2	
Agencies Notified Type Not	ification		Stree	t Addres		ewood	MA	(R 1 3 201 2		<u> </u>		
EPA X Initia	l nded			Valley					Ì			
☑ DOL ☐ Ame	ndment #			State, Zip		Jersey 0	7040	raida collabol	× 2,3			
■ DOH Eme	rgency (includ	ing		of Conta		- Cracy o	7 0 4 0	14(14/15)				
	ellation		11	Malava				Telephone	Numb	er	-	,
Name of Facility Where Abatement	a Talda - Di	70.	FA	CILITY	NFORMA	TION					9	
Maplewood Memorial Library	s raking Piac	e (3)					Type of Facilit	ty (4)				100000
Street Address							School (I	<-12)				
51 Baker Street							Subchap Other (i.e	ter 8 (Other than e. private & comm	K-12) percial b	nuildin	ae h	ome
City (5)						-	etc.)					
Maplewood, New Jersey 070	40						Square Feet 12,900	# of Floors		Bldg 55-	g. Age	
County (6)			County	Code (7	')			Prior if being dem	olished	100000000000000000000000000000000000000		
Essex			(STATE	USE ON	LY)		Library	Tion in being dem	onsiled,)		
Name of Monitoring Firm Hired by Br Matrix New World Engineerin	uilding Owner g, Inc.	(8)	ASC	M No.		Name Lilich	of Abatement C Corporation	ontractor (9)	e he soon			
Street Address				-			Address			-		
22 Columbia Tpk							AcBride Aver	nue				
City, State, Zip Code Florham Park, New Jersey 07	'022						ate, Zip Code		-			
Project Manager for Monitoring Firm	932					Wood	lland Park, N	lew Jersey 07	424			
Gavin Gilmore			Telepho 973-2	one No. 40-180	0		one No. 25-8400	Licens 01104				
Start Date (10) 03/23/12	Sched 03/26	uled Co	mpletion	Date (11)	Name o	of OSHA Monito	r				
Occupancy Status During Abatement	2,047,55	(EV. 900-70)					nvironmenta	al Labs				
Facility Closed/Vacated During B Abatement Performed Outside o Other – Describe: 5PM Start	ntire Period o	f Ahata	ment			Street A	iddress Route 22 We	est				
		ty Hou	rs				ate, Zip Code , New Jersey	v 07083				
Scope of Work (Check All That Apply)						·		, , , , , , , , , , , , , , , , , , , ,	-	9.05	-0	
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		Renov Demoli				×	Mini-Enclosur Glovebag Pro	cedure				
		s Locat	ion				Non-Exempte	d (*) and Non-Fri	able Pr			
Location of		Norma	lly		Day	nariatian -					temer ype	it
Asbestos-Containing Material (ACI TO BE ABATED	M	ed Sole aintena	nce/	Asbes	stos Cont	scription o aining Ma	terial (ACM)	Amount		T	1	T
In Facility	Cus	stodial S	Staff?	(i.e	thermal	systems in	nsulation,	(Specify	Re	, D	enca	Enclosure
(13)		(12)				niscellane		SF or LF)	Remova	Repair	Encapsulate	Sor
Posses de la	Yes	No	N/A					-	<u>n</u>		late	JE JE
Basement Level Ladies Roo		X			Ceilir	ng Plaste	er	62 SF	X		1	-
Basement Level Ladies Roo		X			Wal	I Plaster		260 SF	X	-	-	-
Basement Level Lad es Roo	m	X			Pipe	Insulatio	in ·	16 LF	X	-	-	
Basement Level Lad es Rooi	m	X		P		ng Insul			-	-		-
ame of Registered Waste Hauler		N	JDEP Wa	ste	Cubic \			4 units Registered Landfi	X		L	
ich Corporation		H	auler ID N 1724	lo.	of Was			Registered Landfi V.S Landfill	H			
ty, State oodland Park, New Jersey 074	124				Disposa 03/27/		City, State			-		-
ompleted by	Title					nature_	IVIOTTISVII	le, Pennsylva	District Co.			
itiana Kalenikova		Presid	lent				un les	ah o	ate 3/08/1	2		H-Seese

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

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

Date of Notification (1) 03 / 09 /	12				g Owner/Operator ($\mathbf{n} \cup \{ \cap \{ \} \}$			Property of the Party of the Pa		
Agencies Notified Type Notifica	tion	******	Street	Address		11 11 11 11	(R 1 3 2012		11		
☐ EPA ☐ Initial			Hig	h & Lehi	gh Streets				1		
☑ DOLWD☑ Amended☑ DHSSAmendme				State, Zip 0			ESTO CONTROL &		1		-
☑ DCA ☐ Emergend					ew Jersey 08812		L'ANDREAGH.		أسب	1	
(NJAC 5:23-8) justificatio			100000000000000000000000000000000000000	of Contac ce Olivo			Talant		27	- 1 de - 1	
		-	1		FORMATION						
Name of Facility Where Abatement is Ta	aking Place	(3)		J. L. I I I		Type of Facility	(4)				
Dunellen High School						School (K-12	2)	۵)			
Street Address							8 (Other than K-1 rivate and comme		iildino	IS.	
411 First Street						homes, etc.					
City (5)						Square Feet	# of Floors	9.00	dg. A	ge	
Dunellen, New Jersey 08812						10,000	2		55+		
County (6)			Cour	nty Code (7	7)(STATE USE ONLY)		rior if being demol	lished)			
Middlesex						School					
Name of Monitoring Firm Hired by Build	ling Owner	(8)	ASCM	No.	Name of Abateme						
AHERA Conbsultants Inc					Lilich Corpor	ration				100000-00	
Street Address					Street Address	•					
PO Box 385					606 McBride						
City, State, Zip Code					City, State, Zip Co		07404				
Oceanville, New Jersey 08231-0	0385					ark, New Jerse					
Project Manager for Monitoring Firm		CAN SOLD	ephone		Telephone No. 973-225-8400		License No. 01104				
Domenic D'Errico			09-652		Name of OSHA M		01104				
Start Date (10) S	cheduled 0		etion Da		J&S Environ	Wi Take					
Occupancy Status During Abatement (C					Street Address						
☐ Facility Closed/Vacated During Entir			ement		2333 Route 2	2 West					
☐ Abatement Performed Outside of No.				scribe	City, State, Zip Co	AND THE RESERVED					1000
Time of Abatement:AM	PM/	_PN	l	AM	Union, New J						
Scope of Work (Check all that apply)			***		· M Full Com	tainment with Ne	native Dragouse				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 		enova emolit			☐ Mini-End ☐ Gloveba	closure g Procedure	on-Friable Proced	lure			
		s Loca		1				Ab	atem	ent T	уре
Location of Asbestos-Containing Material (ACM <u>TO BE ABATED</u> IN Facility (13)	l) Us Ma	ainten	lely by ance/ I Staff?	Asbe (i.e	Description of estos Containing Ma e., thermal systems surfacing, VAT other miscellane	iterial (ACM) insulation, , or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
(10)	Yes	No	N/A							· O	
Kitchen				Pipe In	sulation		30 LF				
3rd Floor Office				Pipe In	sulation		5 LF	\boxtimes			
		lп							П		
Name of Registered Waste Hauler			NJDEP	Waste	Cubic Yards of	Name of Regi	stered Landfill				1
Lilich Corporation			Hauler I 1872	D No.	Waste 5	G.R.O.W.S					
City, State			10/2		Disposal Date	City, State					
Woodland Park, New Jersey					03/13/12	Morrisville	e, Pennsylvania	a			
Completed By (Print or Type)	Title	9			Signature_	1/	0 . 1.0	Date			
Tatiana Kalenikova	Vice P	resid	lent		Tal	innela	Culn	3/9	/1	2	

CK# 1917

Date of Notification (1)	80 88		Name	of Building	g Owner/Operator (2	2)	TO IS I JU	Lo j	A Paris		
	12		Dur	nellen Bo	oard of Education	11 1					ŀ
Agencies Notified Type Notifica	tion		Street	Address			JAR 1 3 2012)	1	1	
☐ EPA ☐ Initial			Hig	h & Lehi	gh Streets		2016	7.4	Tetal.		
☑ DOLWD ☐ Amended			City, S	tate, Zip (Code	locar-					
□ DHSS Amendme			Dur	nellen, N	ew Jersey 08812	6.		à			
DCA Emergence Image: Emergence		ng	Name	of Contac	t	San and a salt control	Telephone Numb	ber	Walter to the P	1	
Cancellati			Vin	ce Olivo						S)	
			FAC	CILITY IN	IFORMATION		700			W4 - W7 -	
Name of Facility Where Abatement is T	aking Pla	ce (3)				Type of Facility					
John P Faber School						School (K-12	2) 8 (Other than K-12	١			
Street Address				ACTUAL DE			rivate and commer		ilding	s,	
High and Lehigh Streets						homes, etc.)					
City (5)						Square Feet	# of Floors	Blo	lg. Ag	je	
Dunellen, New Jersey 08812						10,000	2		55+		
County (6)			Cour	ty Code (7)(STATE USE ONLY)	Current Use (Pr	ior if being demolis	shed)			
Middlesex						School					
Name of Monitoring Firm Hired by Build	lina Owne	r (8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
AHERA Conbsultants Inc	3	. ,			Lilich Corpor						
Street Address	A-12-174//X2-18				Street Address						
PO Box 385					606 McBride	Avenue					
					City, State, Zip Co						
City, State, Zip Code	1205					ırk, New Jerse	v 07424				
Oceanville, New Jersey 08231-		Tol	onhono	No	Telephone No.	in, now ourse	License No.				
Project Manager for Monitoring Firm			ephone		973-225-8400		01104				
Domenic D'Errico			09-652				01104				
Start Date (10) Start Date (10	cheduled 04		etion Da 2 /		J&S Environ						
		4			Street Address				2,111.1		
Occupancy Status During Abatement (oment		2333 Route 2	2 Weet					
 ☐ Facility Closed/Vacated During Entire ☐ Abatement Performed Outside of No. 				cribe							-
Time of Abatement:AM	PM/	PN	1	AM	City, State, Zip Co						
Scope of Work (Check all that apply)						-					
NAME OF THE PROPERTY OF THE PR	_		42000			tainment with Ne	gative Pressure				
⊠ ≥3 sf or ≥3 lf		Renova Demolit			☐ Mini-End	g Procedure					
☐ ≥160 sf or ≥260 lf	u	Demon	1011				on-Friable Procedu	ire			
		Is Loca	ation					Ab	ateme	ent Ty	уре
Location of		Norm			Description of			R	æ	ш	m
Asbestos-Containing Material (ACM		Ised So Mainten			estos Containing Ma		Amount (Specify	Removal	Repair	Encapsulate	Enclosure
TO BE ABATED IN Facility			I Staff?	(1.6	e., thermal systems surfacing, VAT		SF or LF)	ova	=	nsd	Sur
(13)		(12	2)		other miscellane					ate	æ
	Ye	s No	N/A							1.57%	
Pipe Tunnel				Fitting	s under 0 & M		4 (ea)	Ø			
		10	1					10			
Name of Registered Waste Hauler		ᆜᆛ	NJDEP	Waste	Cubic Yards of	Name of Regi	stered Landfill			-	
Lilich Corporation			Hauler I	D No.	Waste	G.R.O.W.					
City, State			1872	4	1/2 Disposal Date	City, State		Statistics.			
Woodland Park, New Jersey					03/13/2012	(1907) 571 - 161 11 - 161 11 11 11 11 11 11 11 11 11 11 11 11	e, Pennsylvania				
Completed By (Print or Type)	Title	- 2			Signature	1	_ ID	ate /	1		
Tatiana Kalenikova		Presid	lent			un Cal	ala	3/0	1/1	v	

Date of Notification (1) 03/09/12 Ck:1913 \$200					owner/Operato erties Realt				V I		11	
Agencies Notified Type Notification EPA Initial			Street Ad 140 Litt		oad, Suite 1	01		MAR 13 2	012	1		
DEP Amended Amendment			City, State Parsipp		de ew Jersey 0	7504	J- 1			1		
□ Emergency justification) □ DCA □ Cancellation			Name of G			~		Telephone Nu	mber	!		ę.
			FACIL	ITY INFO	RMATION	T	-65114-74		(=) ((0.00))	-	- Nation	y · y
Name of Facility Where Abatement is Takin Factory/Warehouse Street Address	g Place (3)					B	e of Facility (4) School (K-12 Subchapter 8) 3 (Other than K-1	2)		1120/29	
508 Jefferson Street						×	Other (i.e. pri etc.)	ivate & commerc	ial build	ings,	nome	S,
City (5) Carlstadt, New Jersey 07072						30,	are Feet 000	# of Floors 2	5	ldg. A 5+	ge	
County (6) Bergen			County C (STATE U	ode (7) SE ONLY)			rent Use (Prior ctory/Wareh	r if being demolis nouse	hed)			
Name of Monitoring Firm Hired by Building	Owner (8)		ASCM	No.			atement Control	ractor (9)	100000			
Street Address						t Addr McB	ess ride Avenue	9				
City, State, Zip Code							Zip Code d Park, Nev	w Jersey 0742	24			
Project Manager for Monitoring Firm			Telephon	e No.	Telep	hone -225-	No.	License 1 01104				
Start Date (10) 03/19/12	Schedule 03/21/1		npletion D	ate (11)			SHA Monitor ironmental	Labs LLC				
Occupancy Status During Abatement (Chec			1		7	t Addr	ess ute 22 Wes	t				
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe: 9AM					City,	State,	Zip Code ew Jersey					
Scope of Work (Check All That Apply)						011, 14	- Jersey	07000	No. 10.000			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Transmitt.	enova				× N	fini-Enclosure Slovebag Proc				•	
	T					<u> </u>	IOII-Exempled	() and Non-i no	1		ement	t
		Locat Iorma			Description	on of				T	ре	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mai Cust	d Sole intena odial (12)	nce/ Staff?	Asbesi (i.e.	tos Containing thermal syster surfacing, V other miscell	Mater ms inso /AT, or	ulation,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
Parament	Yes	No	N/A		Pipe Insu	lation		70 LF	X	-	\vdash	-
Basement	X		-	١٨	ater Tank I			60 SF	X	1	-	-
Basement				Pipe Insu			70 LF	x	-	<u> </u>	+	
1st floor	-	Х			- Pipe Irisu	lation		70 21	+	+-		-
Name of Registered Waste Hauler Lilich Corporation		H	JDEP Ware ID 8724	CARROLL NO.	Cubic Yards of Waste 3		The second second	Registered Landf W.S Landfill	ill		14	
City, State Woodland Park, New Jersey 07424	1				Disposal Da 03/26/12	te	City, State Morrisvi	ille, Pennsylva	ania			
Completed by Tatiana Kalenikova	Title Vice	Pres	ident		Signatu	ire Ca	mille		Date 03/09/	12		

Date of Notification (1) 3/09/12 Ck: 1912 \$200				Building		perator	(2)		MAR	1 3	201	?		The same of the sa
Agencies Notified Type Notification EPA Initial	n ,			nnell Str				. Luc	ASSECTA	50	0.01	the season to be de-		S STANGENCE AND A SECOND
DEP Amended Amendment				te, Zip Co ington,		ersey (8822	W-44	1/01	931	1			Ĵ
□ DOH)		Thoma	Contact as L. Bre					Telenhone	e Nur	mber		***	en e
Name of Facility Where Abatement is Tak Residence	ing Place (3)		FACI	LITY INFO	ORMATI	ON	Type of Fa	cility (4)						
Street Address 50 Bonnell Street							Subch Subch		Other than			dings,	home	9 8,
City (5) Flemmington, New Jersey 08822					-1.00		Square Fe 10,000	et	# of Floor	S		ldg. A 5+	ge	
County (6) Hunterdon			County (Code (7) USE ONLY			Current Us Home	e (Prior	f being der	nolish	ned)			
Name of Monitoring Firm Hired by Building	Owner (8)		ASCM	l No.			of Abateme Corporat		actor (9)		722		***************************************	
Street Address			1				Address Acbride A	venue						
City, State, Zip Code							tate, Zip Co dland Par		Jersey 0	742	4			
Project Manager for Monitoring Firm		T	Telephor	ne No.			one No. 225-8400		Licer 0110		0.	*********		
Start Date (10) 03/19/12	Scheduled 03/20/12		pletion (Date (11)			of OSHA Mo Environm		abs LLC	Ī				
Occupancy Status During Abatement (Che	eck Only One)	- Former				Address Route 22	Mest						
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe: 7AM						City, S	ate, Zip Co	de	7083					
Scope of Work (Check All That Apply)	30-05									, and				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	EVERDOUS .	novat moliti				×	Mini-End Gloveba	closure g Proced	with Nega				Α.	
	ls L	ocatio	on			Eige	INOIPEXO	inpied () and Non-	Tilab	1	Abate	ement	
Location of Asbestos-Containing Material (ACM)		rmall	y	Ashas		scription	of aterial (ACN	A)	Amount		-	1 1	pe _	
TO BE ABATED In Facility (13)	Main Custoo		107000000		thermal surfac		insulation, T, or	VI)	(Specify SF or LF		Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A								-		Ф	
Basement		X				TSI			100 LF		X			
					A									
Name of Registered Waste Hauler			JDEP W		Cubic		Nar	ne of Re	gistered La	ndfill	٠			-
Lilich Corporation		10,000	auler ID 3724	No.	of Was	ste	G.I	R.O.W.	S Landfi	II				
City, State Woodland Park, New Jersey 0742	4				0316/		Mo	, State orrisville	e, Penns	ylvar	nia		*	
Completed by Tatiana Kalenikova	Title Vice P	resid	dent		S	ignature V L	an Co	da	hu	Da 03	te 3/09/1	2		

Cneck # 1321							- B B		177	بلا.	-11	13	1
Date of Notification (1)			Name	e of Buildi	ing Owner/Operato	r (2)				7/1		1
03/09/2012				Dona	ld Hoyl	e		MAD 10			111	11	No.
Agency Notified	Type Notification			Stree	t Address	5	J U	MAII 13	2012		La	7	1
D EDA	⊠ Initial			502 F	Haddon .	Avenue	1						-14
□ EPA □ DEP	□ Amended			City,	State, Zip	Code		4		West and			1
⊠ DOL	Amendment #			Colli	noswoo	d, NJ 08108	1	ActibleS Com	NUL 3				-
B con	☐ Emergency (inclu	ıding			e of Conta		<u> </u>	Telephone Nur	mber				-
☑ DOH ☐ DCA	justification) □ Cancellation				ld Hoyl					*			
							· Go.			_			-
Name of Facility 100s	Abetement in Takina I	N=== (0)		FAC	JILIT IN	FORMATION	Time of Faci	16.73					
	ere Abatement is Taking F	Place (3)					Type of Faci	lity (4)					
Private home							☐ School (K						
Street Address								er 8 (Other than K-1 ; . private & commerci	Market Day of the Control of the Con				
502 Haddon Avenu	ue						homes, e		ai bullu	ings,			
City (5)							Square Feet		Bld	g. Ag	е		- 0
Collingswood, NJ	08108						i	i					
County (6)	00100			Coun	tv Code (7) (STATE USE	Current Use	(Prior if being demo	lished)				5762
				ONLY		,,		, Janig dollio	.5.,50)				
Camden			ASCI	of No		Name of Abater	ment Contracts	r (0)					_
Name of Monitoring F	irm Hired by Building Ow	ner(8)	ASCI	VI INO.			nent Contracto	(9)					
Street Add						Gr Tech LLC		· .					
Street Address						Street Address						TOTAL S	
						576 Valley Ro	and the same of th		-				
City, State, Zip Code						City, State. Zip	Code						
						Wayne, NJ 07	470						
Project Manager for N	Monitoring Firm	Te	elepho	ne No.		Telephone No.		License No.					
2						973-638-1777		01127					
Start Date (10)	Scheduled	Complet	ion D	ate (11)		Name of OSHA	Monitor						
03/18/2012	03/19/201	2				Envirovision (Consultants,	ínc					
Occupancy Status Du	ring Abatement (Check of	only one)				Street Address			-				36
□ Facility Closed/Vac	ated During Entire Period	d of Aba	temen	t		20-21 Wagara	w Road, Bld	g .# 34A					
☐ Abatement Perform	ned Outside of Normal Fa			•		City, State, Zip (Code						
☐ Other - Describe:						Fair Lawn, NJ	07410						
Scope of Work (Check	(all that apply)												
≥ 3 sf or >3 lf				⊠ Res	novation		Containment w Enclosure	ith Negative Pressur	е				
☐ ≥160 sf or >260 lf					molition	IXI	ebag Procedur	e					
						□ Non-	Exempted (*) a	nd Non-Friable Proc	edure			-00	
		1.0	Local							A	bate		nt
Loca	ation of	1000	Norma d Sole	00.00		Description	of				1 9	pe	Т
Asbestos-Contain	ning Material (ACM)		intena		Asbe	stos Containing Ma		Amount				m	
	ABATED	C	ustod	ial	(i.e	., thermal systems		(Specify		Re	Z	Encapsulate	Enclosure
	acility 13)		Staff?	,		surfacing, VAT other miscellane		SF or LF)		Remova	Repair	psu	Soli
,	200.00		(12)			other misochane	.003)			val	#	late	лe
		Yes	No	N/A	1								
Basement				x	Pipe in	sulation		75 LF		x	\neg		-
			SEA MINE		F	X.		, 0, 21		1	-	_	
					-					\vdash	-	_	er :
		+		-	ļ					-			_
Name of Posistered 14	Insta Haulas	1	DED :	1/-								+1	
Name of Registered W	i namei		DEP V No.	Vaste F	auler	Cubic Yards of Waste	Name of Reg	stered Landfill					
Gr Tech LLC	-0.4	1				,,,,,,,							
City, State		1003	3785			Disposal Date	T.R.R.F. In	С					
85.60						Dispusai Date	City, State	D.4					11
Wayne, NJ 07470 Completed by	Title					0:	Tullytown,			F).			
						Signature	- /		Date				
N.Jevtic	Owner					//ew	· Nes	0	3/09/2	2012			
ASB-41	* Do no	ot use thi	is forn	for as	pestos lic	ensure exempted a	ctivities.					_	

7662

Date of Notification (1) 03-09-12				Building art Supe			(2)	174	7	1.7	1			
Agencies Notified Type Notifica	ition		Street Ad 4900 L	ddress JS High	way 9	170		- M/A	R 13	2012			1	
X EPA X Initial Amenda Amenda	ment #		City, Sta Howell	te, Zip Co NJ.	de			ASSECTION !	TUS CON ICENSII (FOL 8		- 3	A STANCES	
□ DOH justifica □ DCA □ Cancell				Contact Sterwart				-	elephone	Mark Co. Brown	er			9
Name of Facility Where Abatement is 1	aking Place (3)		FACII	LITY INFO	ORMATIC	N	Type of Facili	ty (4)					-	J.
Walmart Super Center Street Address							School (I		her than h	(-12)				
4900 US Highway 9							Other (i.e etc.)		& comme					es,
City (5) howell							Square Feet	#	of Floors		1000	ldg. A 2yrs	.ge	
County (6) Monmouth	- 200317-1500-1000EF		County C	Code (7) ISE ONLY		H	Current Use (Prior if be	eing demo	olished)			
Name of Monitoring Firm Hired by Build	ding Owner (8)		ASCM	l No.			of Abatement (or (9)					
Street Address							Address 12th st.							
City, State, Zip Code	11.	HINTEN				City, S	tate, Zip Code	0007	4 (4)				1	
Project Manager for Monitoring Firm		1	Telephor	ne No.		Teleph	monton nj 0 ione No.	8037	Licens					
Start Date (10)	Scheduled	Com	nletion [Date (11)			of OSHA Monit	or	00839	9				
03-19-12	03-23-12	2	picaoira	Jule (71)		West	Chester E		ental					
Occupancy Status During Abatement (Address V Walnut St.							
Facility Closed/Vacated During Er Abatement Performed Outside of Other – Describe: out side			ent			1-10-00-00 mm (0)	tate, Zip Code t Chester PA							
Scope of Work (Check All That Apply)			40.	-		1103	t Onester i A	`	-					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	APPROPRIES.	novat moliti				×	Full Contain Mini-Enclos Glovebag F Non-Exemp	ure Procedure	9				2	
	ls L	ocatio	on				Non-Exem) a	na Non-i	Table I	-	Abate	ment	t
Location of Asbestos-Containing Material (ACN	Used		y by	Ashes		cription	of Naterial (ACM)		Amount			Ту		
TO BE ABATED In Facility (13)	Custo	tenan dial S (12)	22.000		thermal s	systems ing, VA	s insulation, T, or		(Specify SF or LF)		Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A							Щ			(D)	
Roof					FI	ashing	3	+ -	200·LF	-	-			
Name of Registered Waste Hauler		N.	JDEP W	aste	Cubic `	Yards	Name	of Regis	tered Lan	dfill				
Site contractors Inc.		10,750,755	auler ID	No.	of Was	te	Grow	s Land	lfill					
City, State Hammonton NJ					Dispos	al Date		tate town pa	a					
Completed by Thomas Rock	Title Supen	visor			Si	gnature	ι,Λ	1		Date 03-0	9-2	012		

No Orack

****Only End Date has Changed!

Date of Notification (1) 3-9-2012					Building C n Prope	Owner/Opera rties	ator (2)				The second secon	The state of	
Agencies Notified EPA	Type Notification		100	Street Ad 160 C	ddress Iubhouse	e Road			MAR 1	3 2012	l karpa	2/	- ddy	
DEP X DOL	Amendment Emergency		- L	King o		de a, PA 194	06		1101			ALL WAY WOOD WINDS	1 1 1	
DOH DCA	justification) Cancellation			Name of David	Contact				Tel	ephone Num	ber	named.	- Carriero	
			,	FACI	LITY INFO	RMATION		T (F)	. 70		14.4.7	-5/10/5	section .	
Name of Facility Where Apartment Building		g Place (3))					Type of Facil						
Street Address	3							School (Subchai		er than K-12)			1
76 Market Street								Other (i.		& commercia		ings,	home	s,
City (5)				102.00				etc.) Square Feet	# 01	f Floors	BI	dg. A	ge	
Perth Amboy								2500	10			0+		
County (6) Middlesex					Code (7) ISE ONLY)			Current Use Apartmen		ng demolish	ed)			
Name of Monitoring Firm	n Hired by Building	Owner (8)		ASCN	No.	Na	ame o	of Abatement		(9)				
n/a				n/a		Ja	ada	r Contractii	ng, LLC					
Street Address n/a						1000		Address roy Lane						
City, State, Zip Code					*=======			ate, Zip Code						
n/a					uni-market mails at			oln Park, N.	J 07035					
Project Manager for Mo n/a	nitoring Firm			Telepho	ne No.			one No. 706-7950		License No 01088).			
Start Date (10)				pletion	Date (11)			of OSHA Mon						
3-5-2012		3-14-2						r Contracti	ng, LLC					
Occupancy Status Durin	ng Abatement (Chec	ck Only On	e)					Address roy Lane						
Abatement Perform	cated During Entire ned Outside of Norr							ate, Zip Code	<u> </u>					
X Other – Describe:	9am - 5pm					— L	inco	oln Park, N	J 07035					
Scope of Work (Check	All That Apply)	[2] a] = 04-	:	n Negative P	rocciii	-		
≥3 sf or ≥3 lf x ≥160 sf or ≥260 lf		-	enova emoliti				×	Mini-Enclo Glovebag	sure Procedure					
		1					L	Non-Exem	ipted (*) an	d Non-Friab	le Pro		e ement	
			Locati Iormali										ре	
Location Asbestos-Containing		Use	d Sole	y by	Asbes	Descrip tos Containir		of laterial (ACM)		Amount			ū	
TO BE A	BATED		intenar odial S		(i.e.	thermal syst				Specify F or LF)	Remova	Repair	псар	nclo
(13			(12)			other misc					loval	pair	Encapsulate	Enclosure
		Yes	No	N/A									e e	
Basen	nent			1		Asbestos	s Ell	oows	150	Elbows	/			
Basen	nent			/	Asl	pestos Pip	oe Ir	nsulation	2	40 LF	1			
	27 24				## I									
Name of Registered Wa			10000	JDEP W auler ID		Cubic Yard of Waste	ds			ered Landfill				
Jadar Contracting,	LLC		0.555	03313		TBD	76.1		R.O.W.S.	Landfill				
City, State	7005	101				Disposal D	Date	4	State	PA 19067				
Lincoln Park, NJ 07	7035	Title				Signa	ature		Tisville, I	Da	te			
Lillie Lazarevich	- 2		etary					Luzare	5		9-20	12		
						10000		7						

V.						(0.11)	0 10 11 11	11 kg 8.0 k		111		outer (e.	-
Date of Notification (1) 03 /	02 /	12			in the want to account	Constitution of the Consti	Owner/Operator (2 University Medi	cal Center		Taring the second			
Agencies Notified EPA	Type Notificat ⊠ Initial	ion				Address Prospect	Avenue	MAH	1 3 2012	2			
☑ DOLWD ☑ DHSS	Amended Amendmen	nt #1-3/	8/12	2		itate, Zip C			601.001.8				
□ DCA	☐ Emergency			T. 1	Hac	kensack	, NJ 07601	Commercial	MM.6		į.		
(NJAC 5:23-8)	justification		•		Name	of Contac	t		Telephone Numb	er	ģ		
	☐ Cancellation	on			Fac	ilities De	pt		i		- G		
					FAC	CILITY IN	FORMATION				By Barko		
Name of Facility Where	Abatement is Ta	aking Pla	ace ((3)				Type of Facility					
Pascack Valley Ho	spital							School (K-12					
Street Address								Other (i.e., p	8 (Other than K-12) rivate and commen	cial bu	ildina	s.	
250 Old Hook Roa	d						and the second s	homes, etc.)			_		
City (5)		115000				5-1-1-25-117/		Square Feet	# of Floors	Blo	dg. Ag	ge .	
Westwood								100,000	3	4	10+		
County (6)					Coun	ty Code (7)(STATE USE ONLY)	Current Use (Pr Hospital	ior if being demolis	hed)			
Bergen	. 18 4 L. D. 34	0	a= /0	× T	ASCM	No	Name of Abateme						
Name of Monitoring Firm		ing Own	ei (c	"	ASCIVI	NO.	Performance and Control of Contro	VIRONMENTA					
Pennoni Associate	es inc.						Street Address	VIICONNILIVIA	L, IIIO.				
Street Address							1123 BEAVE	STREET					
515 Grove Street			_				City, State, Zip Co	The Ball Comment				_	
City, State, Zip Code	1100025						BRISTOL, PA						
Haddon Heights, I Project Manager for Mo			-	Tolo	phone	No	Telephone No.	1 10001	License No.				
and the state of t	mitoring Firm				56-547		215-788-6040		00509				
Alan Lloyd Start Date (10)	Te.	chedule	d Co	V-18			Name of OSHA M			-			
"ON / HOL					3_ /			VIRONMENTA	L, INC.				
Occupancy Status Durin	ng Abatement (C	heck on	ıly or	ne)		1	Street Address						
☐ Facility Closed/Vaca	ted During Entire	e Period	of A	bate	ment		1123 BEAVE	R STREET					
Abatement Performe						scribe	City, State, Zip Co BRISTOL, PA						
Scope of Work (Check	all that apply)		-	-	**			tainment with Ne	native Pressure				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			Rer	novat noliti	ion on		☐ Mini-End	losure g Procedure	on-Friable Procedu	re			
				Loca						Ab	atem	ent T	уре
Locatio Asbestos-Containin TO BE AE IN Fac (13	g Material (ACM) <u>BATED</u> cility	'	Used Mai	ntena	ely by ance/ Staff?		Description of estos Containing Ma e., thermal systems surfacing, VAT other miscellane	iterial (ACM) insulation, , or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
(15)	•	Y	es	No	N/A								
Throughout				\boxtimes		VAT			45,945 SF				
Throughout]	\boxtimes		Mastic			45,945 SF				
] [
Name of Registered Wa	aste Hauler				NJDEP '	Waste	Cubic Yards of	Name of Regi	stered Landfill		-		
SERVICE TRANSI		, INC.		ŀ	Hauler I		Waste 350 Cu Yd	MINERVA	LANDFILL				
City, State	40720					3+313	Disposal Date 4/13/12	City, State	BURG, OH 44688	3			
NEW CASTLE, DE	The state of the s						35.3850.350.					-	
Completed By (Print or Gino Pizzigoni	Type)	Title Esti	mat	or			Signature H	igzigene	1 2	3/8	1/10	2	
J							Mine 1:	1117010	175	/	, ,		-

ASB-41 MAY 11 GI 12036

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

Buck

State of New Jersey - Notification of Asbestos Abatement

(Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

FM	EIWF	3 (5 E								-	ient Project #
= 11111					Name of Building Ow			128		000000 200	ate of Notification (1)
11111					RUTGERS, THE				h 9, 20	Marc	
s					Street Address ENVIRONMENT 27 ROAD 1, BLD		Type Notificated Notif		l l		gencies Notified BEPA
Tree 7	S CONTROL &	1 1 1	54		City, State, Zip Code PISCATAWAY, I	ncluding	jency (ir cation)				DCA DOL
ertura y	ne Number	Telephone			Name of Contact GREG LUPINSK HEALTH & SAFI		lled	Cance	D	QUIREL	☑ DEP- No Longer REQ ☑ DOH
					NFORMATION	FACILITY IN	-				
			.0)		Type of Facility (4) School (K-12)		# 8320				ame of Facility Where Aba OUGLASS STUDE
ears	es, etc.) Age: 80+ ye a		cial buildir	& commerc	Subchapter 8 (other Signature 8) Sq. Feet: N/A					PUS	treet Address OOUGLASS CAMPU
					Current Use (prior if b	Code (7) Ise Only)		SEX	ounty (6) MIDDL		ity (5) IEW BRUNSWICK
).	ANTS. INC.	NSULTA	ENT CO		Name of Contractor (9) GREENWOOD A		ASCM 0098	er (8)	Bldg. Ow		ame of Monitoring Firm Hi
					Street Address 268 MAIN STREE	7.7					TERRI LANE
				05	City State, ZipCode BUTLER, NJ 074			-	016	1.1 08	ity, State, Zip Code
	Number	License Nu			Telephone Number		AND THE RESERVE OF THE PARTY OF	elephone 609-386	rm :		roject Manager for Monitor
		00840		vr.	973-492-0477 Name of OSHA Monito	Doto (11)	Completie	abadulad		.,	1 - 1 1 1 01 - 1 D-1 - (10)
				- X	ENVIROVISION,	1 Date (11)		3/12/12		<u>n</u>	cheduled Start Date (10) 3/09/12
			.D	W ROA	Street Address 20-21 WARGARA		batemen	eriod of A	ng Entire	ed Durin	Ccupancy Status During Facility Closed/Vacated Abatement Performed (
					FAIRLAWN, NJ	VI					escribe ⊠ Other – Describe: Shi
	Negative Press	n ant with N	Contains	☐ Full					ply)	I that app	cope of Work (Check all th
	Non-Friable Pro	ure ocedure	ni-Enclos ebag Pro	☑ Mir					60		$\boxtimes \ge 3 \text{ sf or } \ge 160 \text{ sf or } \ge 16$
-	batement Type emove Repair En	SF	Amount (Specify or LF)		Asbestos Containing Materi rmal systems insulation, suniscell.)		ustodial		Solely Staff?		ocation of Asbestos-Conta laterial (ACM) in Facility (1
	3	X	15 SF		IG MATERIAL	SURFACING		X	1		Room 302
24611	Deniet 11	Negro				10.4	<u> </u>				
	W.S. North La		Y	e: 5 C1	Cubic Yards of Waste	<u>ID#</u>		ee Belov	100	A ANTONIO DE LA COLLEGIA DEL COLLEGIA DE LA COLLEGIA DEL COLLEGIA DE LA COLLEGIA	lame of Reg. Waste Haule See Hauler Below #1
Ford Mill risville, Pa	City, State 100 New F Rd. Morris 19067 215-736-17	<u>e</u>	osal Date 2/12			J 07405				2561 ting, Inc.,	Iauler #1) Greenwood Ab NJDEP # 1256 Iauler #2) Newark Cartin NJ DEP # 450
2	arch 9, 2012	Date Mar	2	16 ft.	Signature	T -	ROJEC			ype) DALIN	Completed by (Print or Type RAYMOND C. PEDA
Stat New Morr 7	Registered W.S. Nor City. 100 M Rd. M 1906 215-7	Name of Reg. G.R.O.W	or LF) 15 SF Y	e: 5 C)	Cubic Yards of Waste	SURFACING ID# IJ 07405	NA	NO N	Staff? YES ont Consultation, Newark	uler 1 & 2 Abatements 1561 ting, Inc., 1509	lame of Reg. Waste Haule See Hauler Below #1 Jauler #1) Greenwood Ab. NJDEP # 1256 Jauler #2) Newark Carting NJ DEP # 450 Completed by (Print or Type

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

GAC Project # 060-12 Client Project #						1	MEGELVED
Date of Notification (1)					Name of Building Owner/Op	erator (2)	
Februar	ry 27, 2	012			RUTGERS, THE STA		
Agencies Notified EPA		Notification Initial Amend	Notifica		Street Address ENVIRONMENTAL HE 27 ROAD 1, BLDG 40		& SAFETY DEPT. 2012
DCA DOL		□ Emerg		including	City, State, Zip Code PISCATAWAY, NJ 08	i i	ASETSIUS CONTROL &
☑ DEP- No Longer REQUIR ☑ DOH	ED	□ Cance			Name of Contact GREG LUPINSKI, ENV	wa * w	Telephone Number
				EACH ITY IN	HEALTH & SAFETY FORMATION	100	
Name of Facility Where Abatem	ont in Tak	ing Place (2)		FACILITYIN	Type of Facility (4)		
DOUGLASS STUDENT)	School (K-12) Subchapter 8 (other than h	C-12\	
Street Address DOUGLASS CAMPUS					☑ Other (i.e. private & comm	ercial build	dings, homes, etc.) 3 Bldg. Age: 80+ years
City (5) NEW BRUNSWICK	County (6)	LESEX		y Code (7) Use Only)	Current Use (prior if being de		
Name of Monitoring Firm Hired	by Bldg. C	wner (8)	ASCM	No.	Name of Contractor (9)		
ATC ASSOCIATES Street Address			009	3	GREENWOOD ABATEI	MENT C	ONSULTANTS, INC.
3 TERRI LANE					268 MAIN STREET		
City, State, Zip Code BURLINGTON, NJ (8016				City State, ZipCode BUTLER, NJ 07405		
Project Manager for Monitoring BRIAN KEARNY	Firm	Telephone 609-386	AND COMPANION OF CHILD		Telephone Number		License Number
Scheduled Start Date (10)		Scheduled	Completic	on Date (11)	973-492-0477 Name of OSHA Monitor		00840
03/09/12		03/12/12		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ENVIROVISION, INC.		
Occupancy Status During Aba	atement (0	Check only o	one)		Street Address		
☐ Facility Closed/Vacated Du☐ Abatement Performed Outs Describe				nt	20-21 WARGARAW RO	AD	
☑Other – Describe: Shift F	lours: 5	5:00 PM -	5:00 A	M	FAIRLAWN, NJ		
Scope of Work (Check all that a	pply)					7-17-12	
\ge 3 sf or \ge 3 lf \ge 160 sf or \ge	260			☑Renovation ☐ Demolition	I I I I I I I I I I I I I I I I I I I	Mini-Enclo	rocedure
Location of Asbestos-Containing Material (ACM) in Facility (13)	Solel	cation Norma y by Maint./C ? (12) NO			bestos Containing Material mal systems insulation, surfacing,	Amour (Speci or LF)	fy SF
Room 302	120	X		SURFACING	MATERIAL	15 SI	= 🗵
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Name of Reg. Waste Hauler		NJDEP Wa	I ste Haule	I r ID#	Cubic Yards of Waste: 5 0	CY	Name of Registered Landfill
See Hauler Below #1 & 2		See Belov			Ouble Furds of Waste.		G.R.O.W.S. North Landfill
Hauler #1) Greenwood Abaten NJDEP # 12561 Hauler #2) Newark Carting, In NJ DEP # 4509				NJ 07405		sposal Da 12/12	City. State 100 New Ford Mill Rd. Morrisville, Pa 19067 215-736-1700
Completed by (Print or Type) RAYMOND C. PEDALII	NO S	itle SENIOR P IANAGEI		ст	Signature	1	Pebruary 27, 2012

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) HONEYWELL CORP. Date of Notification (1) Street Address /12 3 101 COLUMBIA ROAD Agencies Notified Type Notification City, State, Zip Code Initial Notification EPA MORRISTOWN, NEW JERSEY 07962 Amended Notification #2 DEP Cancellation DOL Name of Contact Telephone Number DOH On Hold **EMERGENCY NOTIFICATION** SUSAN STUCKER DCA FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) HONEYWELL Subchapter 8 (Other than K-12) Other (ie. private & commcl. bldgs., homes, etc.) # of Floors Bldg. Age Square Feet Street Address 360,000 101 COLUMBIA ROAD, BUILDING AB PENTHOUSE C Current Use (Prior if being demolished) County Code (7) City (5) County (6) COMMERCIAL OFFICE MORRIS (STATE USE ONLY) MORRISTOWN Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. PAR ENVIRONMENTAL CORPORATION 17 CTSI Street Address Street Address 313 SPOOK ROCK ROAD 622 GEORGES ROAD City, State, Zip Code City, State, Zip Code SUFFERN, NEW YORK 10901 NORTH BRUNSWICK, NEW JERSEY 08902 License Number Telephone Number Telephone Number Project Manager for Monitoring Firm 460 845-369-7500 732-729-1000 FRANK SELAMIE Name of OSHA Monitor Sched. Completion Date (11) Expected State Date (10) QUALITY ENVIRONMENTAL 07/ 3/ 12 2/ Year Day Year Month Street Address Occupancy Status During Abatement (Check only one) 1376 ROUTE 9 W Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe: City, State, Zip Code MON. -SUN. 7AM-3:30 PM Other - Describe: WAPPINGERS FALLS, NY 12590 Full Containment with Negative Pressure Scope of Work (Check all that apply) Mini-Enclo:, Renovation Demolition Glovebag Procedure >3SF OR LF Non-Friable Procedure >160 SF OR Description of Asbestos-Abatement Type Location of Is Location Amount ENCLOSURE Containing Material (ACM) REPAIR ENCAPSULE normally used REMOVAL Asbestos-containing (Specify (ie. Thermal systems Material (ACM) solely by SF or LF) Maint/Custodial insulation, surfacing, VAT, TO BE ABATED or other miscellaneous) Staff (12) in Facility (13) Yes No N/A 10 LF X PIPE INSULATION AB BUILDING , PENTHOUSE C Cubic Yards of Waste Name of Registered Landfill Name of Registered Waste Hauler NJDEP Waste CUMBERLAND COUNTY LANDFILL Hauler ID No. EXPRESS WASTE LLC 804 City, State Disposal Date City, State NEWBORG NEWARK, NEW JERSEY Date Completed by (Print or Type) Signature

DIRECTOR OF OPERATIONS

BENJAMIN SANCHEZ

Date of Notification (1) State Address 15	· · ·			NOTIFI (Pur	suant to	OF ASBESTOS / NJAC 8:60-7 and	12:120-7)	17.36 p. 40.054 444		4		*******	
Street Address Page			- 1000-100				ner/Operator (2)				A	1=1	
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City, State, Zip Code NORTH BRUNSWICK, NEW JERSEY 08902 SUFFERN, NEW YORK 10901 Telephone Number 732-729-1000 Telephone Number 732-729-1000 Sched. Completion Date (11) Sched. Completion Date (11) Occupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement X Abatement Performed Outside of Normal Facility Hours - Describe: Other - Describe: MON SUN. 7AM-3.30 PM Scope of Work (Check all that apply) Demolition X - 335 CR LF - 100 SF OR Location of Asbestos-containing Material (ACM) TO BE ABATED In Facility (13) TO BE ABATED In Facility (13) AB BUILDING, PENTHOUSE C Name of Registered Waste Haulier NUDEP Waste Hauler ID No. NUDEP Waste Cliv, State, Zip Code WAPPINGERS FALLS, NY 12590 City, State, Zip Code WAPPINGERS FALLS, NY 12590 C													
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State of New Jersey

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Date of Notification (1)		(,	Name of Building	Owner/Operator	(2)	(g) [-	<u>ii \</u>		
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Abatement Performed COther - Describe: Cope of Work (Check all that apply Demolition X > 3SF OR LF > 160 SF OR Location of Asbestos-containing Material (ACM) TO BE ABATED in Facility (13) B BUILDING , PENTHOUSE C	Outside of Norma MONSUN. 7AI y) X Renc Is nor Mair S Yes X NJD6	al Facility Ho M-3:30 PM Evation Location mally used solely by nt/Custodial staff (12) No N/A	X Full Co Mini-Er X Gloveb Non-Fr Description of Containing Mat (ie. Thermal insulation, surf or other misc	City, State, Z ntainment with Neclos, ag Procedure Asbestos- erial (ACM) systems acing, VAT, ellaneous)	Amou (Spec SF or	nt ify WC/LF)	REPAIR	Abatem	nent Type
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