Ch1158	N		Sta ICATION ursuant t	OF ASE		ABATEN) E G			V11:	58
Date of Notification (1)			Name of	Building	Owner/C	Operator (2)		1 1445	4	7 6	047	
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Agencies Notified Type Notific			Street Ad		-			The same of the sa					
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EPA Initial Amend	ed		City, Stat	C. (2) C. (2) C. (3) C. (4) C.	ode				LI	CEN	SIN	3	
	ment #1	_	Plainsbo	ro NJ	08536								
DOH Emerge	ency (including	F	Name of					Tele	ephoneNum	ber			
DCA Cancel		F	Project I	Manage	er			1 30300					
			-		ORMATI	ION			-		_		
Name of Facility Where Abatement is	Taking Place (3))					Type of Facility (4)					
Jacobus facility							School (K-12	2)					
Street Address		11000-000					Subchapter						
31 Shalks Crossing							Other (i.e. pr etc.)	rivate 8	& commercia	build	lings,	home	es,
City (5)							Square Feet	# of	Floors	В	ldg. A	ge	
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Middlesex			(STATÉ U	SE ONLY	ν		•		uildings	000-80			
Name of Monitoring Firm Hired by Bui	Iding Owner (8)		ASCM	No.		Name	of Abatement Cont						-
AET, Inc.	3 - 1 - 1 - 1						ACK Group, LL		3 (5)				
Street Address						_	Address						
907 Doolittle Drive							ings HWY N,	STE	na				
City, State, Zip Code			-	_		-	ate, Zip Code	J I L. 2	200				
Bridgewater, NJ 08807							Hill, NJ 08034						
Project Manager for Monitoring Firm			Telephon	e No		-	one No.		License No	í.		-0/00-	-
		,	ME STACES CONTRACT			130000000000000000000000000000000000000			00781	*			
Eric Houseknecht Start Date (10)	Schodule		908) 21 mpletion E				759 - 5000 of OSHA Monitor		00761				
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11/7/16 Occupancy Status During Abatement	(Chook Only On	-01	11/7/17				ACK Group, LL Address	٠.				- 24	
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Facility Closed/Vacated During E Abatement Performed Outside of							ings HWY N, Sate, Zip Code	51E 2	209				
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Location of	Llaa	Norma	lly ely by			escription							
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TO BE ABATED In Facility	Cust		Staff?	(1.6		cing, VA			or LF)	Remova	Repair	Encapsulate	Enclosure
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Freehold Carting			1593	39	100000000000000000000000000000000000000	5.5	Cumberla	and C	o./ BFI / C	RO	WS	TR	RF
City, State					Dispo	sal Date	City, State						
Freehold, NJ						11/7/17	Newburg	/ Imp	erial / Mo	rrisv	ille,	PA	
Completed by	Title					Signature			Dat				

President

3/8/17

Michael Cooper

Date of Notification (1)			T	Name of	Building C	Owner/Op	perator	(2)				MAR	1	2 1	017	1 1
Octob	er 21, 2016		1	Turkey I	sland C	orporat	ion				Ľ,	MAR	1	0 2	UII	
Agencies Notified	Type Notification			Street Ac	dress											1
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DEP	Amended			City, Stat	te, Zip Co	de						LI	CEN	SIN	3	
DOL	Amendment		— F	Plainsbo	oro NJ 0	8536										
□ DOH	Emergency (including		Name of	Contact					Tele	phone	eNumb	er			
DCA	Cancellation		F	Proiect I	Manage	r										
			- 1		ITY INFO		N									
Name of Facility Where	Abatement is Takin	g Place (3)	Ų.					Type	of Facility (4)							
facility								П	School (K-12)							
Street Address									Subchapter 8				100			
31 Shalks Crossing									Other (i.e. privetc.)	vate &	comn	nercial	build	ings,	home	s,
City (5)									re Feet	# of	Floors	3	BI	dg. A	ge	
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County (6)			-	County C	`ode (7)				ent Use (Prior	if heir	0.107 (0.000)		d)	- 1		1000
TO SHARE THE STATE OF THE STATE					SE ONLY)			June	030 (1 1101		atomore,		-/			
Middlesex	Licod by Dullate	Owner (0)		ASCM	No		Nome	of Ah-	tement Contra		uildi	ily				
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AET, Inc.									Group, LLO	Ú						
Street Address								Addre			0202					
907 Doolittle Drive		raine i management							HWY N, S	TE 2	.09					
City, State, Zip Code							City, S	State, Z	ip Code							
Bridgewater, NJ 088	07					(Cherr	y Hill,	NJ 08034							
Project Manager for Mon	itoring Firm			Telephor	ne No.		Telepi	hone N	0.		Licer	ise No.				
Eric Houseknecht			(908) 21	8-1108	((973)	759 -	5000	(0078	1				
Start Date (10)		Schedule	d Cor	mpletion [Date (11)		Name	of OSI	HA Monitor							
11/7/16	3			11/7/17	7	-	The N	MACK	Group, LLO	C.						
Occupancy Status Durin	g Abatement (Chec	k Only On	e)					Addre								
Facility Closed/Vac	ated During Entire	Period of A	hater	ment			1500	Kinas	HWY N, S	TE 2	09					
Abatement Perform									ip Code			-0-15390				
Other - Describe:						_	Cherr	v Hill	NJ 08034							
Scope of Work (Check A	II That Apply)					1	011011	<i>j</i> ,	110 00001							
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≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		garmend.	enova						II Containmen ni-Enclosure	it With	Nega	live Pri	essur	е		
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TO BE AB				Staff?	(i.e.	thermal	system cing, VA		ation,	7.50	pecify or LF	9	Rer	Z.	ıcar	ncl
In Facil		000000	(12)			other m				31	OI LI	,	Remova	Repair	Encapsulate	Enclosure
(17)				1	9								a	=	ate	ē
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Michael Cooper		Presid	lent				Jones.	-/-				10/2	21/16	3		

Char	T(p) NC	Sta TIFICATION (Pursuant
Date of Notification (1 3-7-2017)	Name of Gardne
Agencies Notified EPA	Type Notification	Street Ar 4161 E
DEP X DOL	Amended Amendment #	City, Sta Tampa
DOH DCA	Emergency (including justification) Cancellation	Name of Gerald

ate of New Jersey I OF ASBESTOS ABATEMENT to NJAC 8:60 and 12:120)

9		- (1	almost a constant	L LO NJAC									2017	
Date of Notification (1) 3-7-2017				of Building ner Gibs		Operator	r (2)		mal hes	MAI	1 1	Ů i	2017	
ĭ EPA	Notification		4161	Address East 7th ate, Zip C		ıe			A	SBES1	TOS ICEI	CON	NTRO	OL 8
X DOL A	mended mendment # mergency (includin		Tamp	a, FL 3	3605									
Ŭ DOH ju	stification) ancellation	9		of Contact d Eglen					Telenh	none Nur	nber			
			FAC	ILITY INF	ORMAT	ION			Ι					
Name of Facility Where Abateme Commercial	ent is Taking Place	(3)					Тур	of Facility (4 School (K-12	500					
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City (5) Kearny, NJ							700000000000000000000000000000000000000	are Feet 00+	# of Flo	oors		31dg. /	Age	
County (6) Hudson				Code (7) USE ONL	0		Curr	ent Use (Prior	if being	demolish	- 100			
Name of Monitoring Firm Hired by	y Building Owner (8)	ASC	M No.				atement Control						
Street Address			1			Street	Addre							
City, State, Zip Code						City, S	tate, 2	ip Code ty, NJ 0730						
Project Manager for Monitoring Fi	irm	Т	Telepho	ne No.		Teleph				cense N	0.			
Start Date (10)	Cabada	1240		D.). (44)		201-3			01	1174				
3-17-2017	3-19-2	017	npiedon	Date (11)				HA Monitor above						
Occupancy Status During Abatem	nent (Check Only O	ne)				Street	Addre	SS						
Facility Closed/Vacated Duri Abatement Performed Outsid Other – Describe:	ng Entire Period of de of Normal Facilit	Abaten y Hours	nent s		_	City, S	tate, Z	ip Code						
Scope of Work (Check All That Ap	oply)	1101010								241714				
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf	Renova Demolit				×	Mi	Il Containmen ni-Enclosure ovebag Proce n-Exempted (dure				e		
	Is	Locati	ion									Abate	ement	
Location of		Normal ed Sole	100 mm mm m			scription						1)	pe	
Asbestos-Containing Material TO BE ABATED In Facility (13)	(ACIVI) Ma	todial (12)	nce/				insula T, or		Amou (Spec SF or	ify	Removal	Repair	Encapsulate	Enclosure
T .	Yes	No	N/A				20011						e	250
Tank		X			Tank	insula	tion		2000	SF	х			
Name of Registered Waste Hauler			IDED W	laata	I C. I.:.									
Green Environmental Service		Н	JDEP W auler ID 034889	No.	Oubic of Was			Name of Re	LINE OF THE PARTY		1			
City, State Jersey City, NJ					Dispos 3-9-20	al Date		City, State Morrisville	e, PA					
Completed by Liliana Serrano	Title Office	e Mar	nager		S	gnature		De 11 11	0,00) Dat	e '-201	17	1-1-11111	

Print Form

THILL FORTH



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Date of Notification (1) MARCH 8, 2017		100000000000000000000000000000000000000			Building R FOXX				LLC	900	L	OTO	2.00	N 17	001
Agencies Notified	Type Notification			Street Ad	ddress MBOY A	AVENU	JE, STE	E. 10	1		ASBE	LICE	ENS	NG	HUL
EPA DEP DOL	Initial Amended Amendment		C	City, Sta	te, Zip Co DN, NJ (de	**************************************	ACC (180790)							
DOH DCA	☐ Emergency justification) ☐ Cancellation				Contact IRKOW	SKI				Tel	enhone Nur	mher			
N	A	DI (0)		FACI	LITY INFO	ORMATI	ON	-	, F. 111. /	-					
Name of Facility Where FORMER RESIDE		ig Place (3)							of Facility (
Street Address								2	School (K-1 Subchapter Other (i.e. p etc.)	8 (Oth			dings,	home	95,
City (5) EDISON									re Feet	# 01	f Floors		ldg. A		
County (6) MIDDLESEX					Code (7) JSE ONLY				ent Use (Prid SIDENCE		ng demolish	ned)			
Name of Monitoring Firm N/A	n Hired by Building	Owner (8)		ASCM	No.				tement Con Touch As			ent C	Corp.	, Inc	
Street Address							Street 17 T		ss oson Stree	et					
City, State, Zip Code							City, S Wes	tate, Z t Lon	ip Code g Branch,	NJ 0	7764				
Project Manager for Mor N/A	nitoring Firm		T	elephor	ne No.		Teleph 732.	one N 222.8			License N 00040	0.			
Start Date (10) MARCH 20, 2017		Scheduled MARCH			Date (11)		Name N/A	of OSI	HA Monitor						
Occupancy Status Durin	g Abatement (Che	ck Only One)					Street	Addres	ss		-				
☐ Facility Closed/Vac☐ Abatement Perform ☐ Other – Describe:	ned Outside of Norr			ent			City, S	tate, Z	ip Code						
Scope of Work (Check A	All That Apply)						l		***************************************						
□ ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			novati nolitic				5	Mir	ll Containme ni-Enclosure ovebag Prod	2	n Negative F	Pressu	re		
									n-Exempted		d Non-Friab	le Pro			
			catio	320									Abate Ty	emeni pe	
Location Asbestos-Containing <u>TO BE AB</u> In Faci (13)	Material (ACM) <u>ATED</u> lity	Used S Mainte Custod	Solely enand	y by ce/		tos Cont thermal surfa	scription taining N systems cing, VA niscellar	laterial s insula T, or		(5	mount Specify For LF)	Remova	Repair	Encapsulate	Enclosure
		Yes 1	No	N/A										te	0
BASEM	ENT			X		TSION	N FURI	VACE		9	SF	X			
Name of Registered Was	ste Hauler		NJ	IDEP W	aste	Cubic	Yards		Name of	Registe	ered Landfill				
Finishing Touch Ask	estos Abateme	ent Corp., I		uler ID 2058	No.	of Wa			FAIRLE	ESS L	ANDFILL				
City, State WEST LONG BRAN	NCH, NJ					Dispo: 3/21/	sal Date /17		City, State MORR		LE, PA				
Completed by JOSEPH P. MILLEF	3	Title PRESI	DEN	ΝT		8	Signafure ////	ul p	Mi			ite /8/17			
ASB-41 (R-06-08)		Alleria de la Calabara de la Calabar				université és	* Do no	t use t	this form for	asbest	tos licensur	e exen	npted	activi	ties.

01	L 15 L	03	N	7077	CATION	ate of New Jerse OF ASBESTOS to NJAC 8:60 an	ABATE				E G MAF		3 21	U 1	For
Date of N 3/8/17	Notification (1)	3				Building Owner/G S CONSTRUC		(2)		<u>1</u> 1	i			×14	
Agencies	s Notified	Type Notification			Street A	ddress NE CT	E . 148	T person			ASBEST LI	OS C CEN:			L &
DEI X DO	P	Amended Amendment				te, Zip Code VOOD, NJ 08	701		<u> </u>						
× DO	200	Emergency (i justification) Cancellation	including			Contact GROSS				Tale	nhone N.				
					FACI	LITY INFORMAT	ION								
Name of		Abatement is Taking AKEWOOD	Place (3)				Тур	of Facility (4 School (K-12						
Street Ad	ddress							×	Subchapter of Other (i.e. pretc.)	8 (Othe	er than K-12 k commerci	2) al build	lings,	home	s,
City (5) LAKEV	WOOD			-				Squ	are Feet	# of	Floors	BI	ldg. A	ge	
County (10			Code (7) USE ONLY)		Curr	ent Use (Prio ne	r if bei	ng demolish	ned)			
Name of	Monitoring Firm	Hired by Building C	Owner (8)		ASCN	1 No.			atement Con				la cons		
Street Ad	ddress						Street 6 W		DOVE CC	URT					
City, Sta	te, Zip Code								Zip Code OOD, NJ 08	3701					
Project N	Manager for Mo:	itoring Firm			Telepho	ne No.	3	hone -668-	No. 9078		License N 1200	0.			
Start Date 3/18/1			Schedule 3/20/1		npletion	Date (11)	1.10.875.070		SHA Monitor D PROFE	SSIO	NALS				
Occupar	ncy Status Durin	g Abatement (Check	k Only Or	ne)				t Addr							
	8	ated During Entire P			nent		6 W	HITE	DOVE CC	URT					
Aba	atement Perform ner – Describe:	ed Outside of Norm	al Facility	Hours	3				Zip Code OOD, NJ 08	3701					
Scope o	f Work (Check A	III That Apply)													
	sf or ≥3 If 60 sf or ≥260 If			Renova Demolit			and the second con-	× N	ull Containme lini-Enclosure lovebag Proc on-Exempted	edure	3.			e	
	920 #			Locat		31130							Abate	ement rpe	
Asbe	Location estos-Containing <u>TO BE AB</u> In Faci (13)	Material (ACM) ATED lity	Use Ma	ed Sole intena todial (12)	ely by nce/	Asbestos Cor (i.e. therma surfa		Materi ns inst AT, or	ılation,	(5	mount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
	INTER	IOB	Yes	No	N/A		PIPINO				10LF	x		(D	

Title

OWNER

3/20/17

Signature

Date

3/8/17

NEWARK, NJ

JOSEPH PERLSTEIN

Completed by

Ch 2103L	Married States	N		ATION	ate of New OF ASBE to NJAC 8	STOS	ABATE				E	SE		V [
Date of Notification (1)	3/7/1-)		Me	Building C	wner/0	perator	(2) Oy			L MA	AR 1	3 2	017	
Agencies Notified	Type Notification		8	Street A	ddraee					İ	ASBES	TOO	2011	TOO	- 0
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X DOL	Amendment #		_	[Tel	M	Cit	y	1/0	C	18 00	6			
□ DOH	Emergency (in justification)	rciuaing	11 12		Contact			0	1	Tele	phone Nu	mber			
DCA	Cancellation			Eric Pl	lackis LITY INFO	DRAATI	ON							-	
Name of Facility Where A	Abatement is Taking	Place (3)	FACI	LITIMFO	RIVIATI	OIV	Туре	of Facility (4)					
Street Address 1		, ,		P.				3	School (K-1 Subchapter Other (i.e. p etc.)	8 (Othe	r than K-1 commerc	ial build			s,
City (5) (CO	n City		142					22	re Feet UU		Floors		dg. A		
County (6)	May				Code (7) USE ONLY)			Curre	nt Use (Prid	or if bein	ig demolis	shed)			
Name of Monitoring Firm	Hired by Building O	wner (8)		ASCN	I No.		1		tement Cor stries Inc		(9)				
Street Address							242371000011	Addre: Box							
City, State, Zip Code							24 CH 3 CH 20		ip Code v Jersey	08723					
Project Manager for Mon	litoring Firm			Telepho	ne No.			none N)899-			License N 01196	No.			
Start Date (10)		Schedule	d Com	pletion	Date (11)		Name	of OSI	HA Monitor						
Occupancy Status During	g Abatement (Check	Only On	ie)				Street	Addre	ss						
Facility Closed/Vac Abatement Perform Other – Describe:	ated During Entire P led Outside of Norma	eriod of A al Facility	Abatem Hours	ent			City, S	State, Z	ip Code					grand of page	
Scope of Work (Check A	II That Apply)							/							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Management .	Renova Demoliti					Mi	Il Containm ni-Enclosure ovebag Pro- on-Exempte	e cedure				e	
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												-			
	ata Hauta		1 1	JDEP V	Vacto	Cubio	Yards		Name of	Registe	red Landf	ill			
Name of Registered War Brick Industries Inc.			Н	auler ID		of Wa		7	GROW			potic.			
			2	1602	2.	Disno	sal Date)	City, Sta						
City, State Brick, New Jersey						211	6/17		PA					9	
Completed by		Title	11000			1	Signatur	e/7	1///		0	ate </td <td>8</td> <td>7/1-</td> <td>7</td>	8	7/1-	7
Eric Plackis		Pres	ident					14				1	0 /	11	(

CLDLOSI			ICATIO	State of Ne N OF ASE It to NJAC	BESTOS	ABATE		•			E C	E		/ E
Date of Notification (1) 3 6/17			Name	of Building	Owner/0	Operator	(2) NO		The second secon		MAR	1 3	50	17
Agencies Notified EPA DEP DOL Initial Amended Amendment Emergency (City, St	Address tate Zip C	MUK ebo	bia m (T.	UIN	Pibe	2, AS	152	CENS	ONTI	30L 8
DOH justification) Cancellation			Eric F	Plackis					1 16	еппопе	Numbe	1		
Name of Facility Where Abatement is Taking Street Address	Place (3)	FAC	CILITY INF	ORMAT	ION	R	of Facility School (Kondon) Subchapte Other (i.e.	-12) er 8 (Oth			uildina	s hom	nes
City (5) DEA 10115	U)	7	1.				न्या	etc.) are Feet		f Floors		Bldg.		.001
County (6)				Code (7)	2		Curre	ent Use (P	rior if bei	ng dem	olished)		6	
Name of Monitoring Firm Hired Building C	wner (8)		M No.	-			atement Co ustries In		(9)				
Street Address						Street P.O.	Addre	ss	C.					
City, State, Zip Code						City, St	tate, Z	ip Code w Jersey	08723					
Project Manager for Monitoring Firm			Telepho	one No.		Teleph	one N		00,20	Licens				
Start Date (10) 3 20 1	Schedul P		pletion	Date (11)				HA Monito	-				Historia de la composição	
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire Po	270	12.00	iont.			Street A	Addre	SS						
Abatement Performed Outside of Normal Other – Describe:	al Facility	Hours	le i i		_	City, St	ate, Z	ip Code						
Scope of Work (Check All That Apply)	_			*>		~	_							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit					Mir	ll Containm ni-Enclosur ovebag Pro n-Exempte	re cedure				ıre.	
20 75 0		Locati		SK SK								Aba	temen ype	t
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	ed Solel intenar todial S (12)	y by ice/		tos Conta thermal surfac	scription of aining Ma systems bing, VAT niscellane	aterial insula , or		(S SF	mount pecify or LF)	Removal	T	Encapsulate	Enclosure
	Yes	No	N/A	Pipe	insu!	phon	ell	(WGO	60	(quasi	(ty) 8		ate	O O
				osta	Stos	100	His	18	580	DSF	X			
				0100	10074	1000	1	18	TOIL	<u>) St</u>	4		-	
				01/2/	405 11	(NI)	111	Slaze	3110	55	X	+	-	
Name of Registered Waste Hauler Brick Industries Inc.		Ha	JDEP Wauler ID	/aste	Cubic \ of Was	Control of the contro) Ir (Wame of GROW		red Land	dfill			
City, State Brick, New Jersey		2	602		Dispos	al Date	7	City, Stat						
Completed by Eric Plackis	Title Presi	dent			11	gnature	4	200	7		Date	2//	11-	7

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				1.	uisuu	111 10 140	AC 0.00 and 5.1	10)			004	-	
Date of Notification (1)	6004				Nam	e of Buildi	ng Owner/Operator	(2)	IL MAR	1-3	201	1	land.
	/	17	_		Th	e Think	Tank		1 3	13	90	/	and the same
Agencies Notified ⊠ EPA	Type Notifi	cation	2			et Address			ASBESTO	S CC		OL	<u>&</u>
☑ DOLWD	☐ Amende	ed.					Mountain Road	L.	LIC	ENOI	NG		
☑ DOH	Amendr				14	State, Zip							
☐ DCA	☐ Emerge	ncy (inc	cludin	g g	Ne	w City, N	NY 10956						
(NJAC 5:23-8)	justifica				Nam	e of Conta	ct		Telephone Nur	nber			
	☐ Cancella	ation			Sir	ndi Land	man		Ī				
					FΑ	CILITY	NFORMATION		•				
Name of Facility Where	Abatement is	Taking	Place	e (3)				Type of Facility ((4)				
Residence								School (K-12					
Street Address								Other (i.e., pr	(Other than K-1 ivate and comme	2) ercial b	uildin	gs,	
City (5)	A	7-1-1/						Square Feet	# of Floors	В	ldg. A	ae	
Avon								1100 sf	1		65	J	
County (6)					Cou	nty Code (7)(STATE USE ONLY)	Current Use (Pri	or if being demol	ished)			
Monmouth								Residence					
Name of Monitoring Firm	Hired by Bui	lding O	wner	(8)	ASCM	No.	Name of Abatem	ent Contractor (9)					
N/A							Guardian Co	ntracting, Inc.					
Street Address							Street Address					2.7	
							1889 Route 9	9, Unit 61					
City, State, Zip Code		15-30					City, State, Zip C	ode					
							Toms River,	New Jersey 087	755				
Project Manager for Mon	itoring Firm			Tele	ephone	No.	Telephone No.		License No.				
							732-349-9932	2	00624				
Start Date (10)						ate (11)	Name of OSHA N	Monitor					2
03 /17 /		03	3_ /	_ 20)/	/1	E.M.S.L. Ana	lytical					
Occupancy Status During							Street Address					-	
☐ Facility Closed/Vacate	ed During Ent	ire Peri	od of	Abate	ment		1056 Stelton						
☐ Abatement Performed Time of Abatement:	Outside of N	lormal F	acility	y Hou	rs - Des	scribe	City, State, Zip Co	ode					
						Alvi	Piscataway,	New Jersey 088	54				
Scope of Work (Check all	that apply)						П						
≥3 sf or ≥3 lf	Re	novat	ion		☐ Full Con	tainment with Nega	ative Pressure						
≥160 sf or ≥260 lf				moliti			☐ Gloveba	g Procedure					
			1-	1		1	⊠ Non-Exe	mpted (*) and Non	-Friable Procedu	ıre			
Location	of			Loca: Iorma			Description of			Ab	atem	ent T	уре
Asbestos-Containing I	57 Miles - Arabana and Arabana	A)			ely by	Asbe	stos Containing Ma	iterial (ACM)	Amount	Re	Repair	En	E
TO BE ABA				intena	nce/ Staff?		e., thermal systems	insulation,	(Specify	Removal	oair	caps	Enclosure
IN Facilit (13)	У		Ousi	(12)	Otan:		surfacing, VAT other miscellane		SF or LF)	<u>a</u>		Encapsulate	ure
* *		.25	Yes	No	N/A		other misochane	ous)				te	
exterior		1		\boxtimes		asbest	os siding		1100 sf				
										$\forall \Box$	П	П	П
		- 1		_							Ш	Ш	Ш
		[
Name of Registered Wast				1000	JDEP \ auler I[Cubic Yards of	Name of Registe	ered Landfill			- 10	
Guardian Contractir	ig, Inc.			17	20223		Waste 3	T.R.R.F.					
City, State							Disposal Date	City, State					
Toms River, New Je							3/21/17	Tullytown, F	Pennsylvania				
Completed By (Print or Ty	pe)	Title					Signature	// /) Da	ate /	1		1-11-11-1
Nicholas Fernicola		Pro	ject	Mana	ager			1.1		3/-	1/1	-	

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1 1 51 2/2	ASBESTOS CONTRO	AS	BEST	OS (CON	TRO	

Date of Notification (1)			X-2511C		Name	of Buildin	ια Ον	vner/Operator (2)			WAR	1	3 2	017	- 11
	7	17			1000	ndi Kuch		men operator (-/	bed	lesi —	7 ,	2	9.	Z	
Agencies Notified T	ype Notific					Address	A A COMPANIA			-	ACDI	210		7)	VI O
	ype Notilic ∛Initial	ation				иминее					ASBE			SIN		La
	Amended	d			City	State, Zip	Codo	ŧ		-						-
□ DOH	Amendm	ent #				dison, N										
] Emergen		ding	38		of Contac		340		Tol	ephone N	lumbor				
(NJAC 5:23-8)	justificati Cancella					ndi Kuch				161	ephone N	umber	27			
	_ carrocita							DIATION		_						- 11071
Name of Equility Where Abo	tomont is 7	Takina Di	/	2)	FA	CILITY IN	NFOI	RMATION	T	. / 4\				-		
Name of Facility Where Aba Residence	iternent is	aking Pi	ace (3)					Type of Facilit School (K-							
Street Address									Subchapte		ner than K	(-12)				
Street Address									Other (i.e., homes, etc	private			l bu	ilding	S,	
City (5)					77.12				Square Feet	#	of Floors		Blo	lg. A	ge	
Madison									1200 sf		1		6	35		
County (6)					Cour	nty Code (7	7)(STA	ATE USE ONLY)	Current Use (F	Prior if	being dem	nolishe	d)			
Morris									Residence	•						
Name of Monitoring Firm Hi	red by Build	ding Own	er (8)	ASCM	No.	Na	me of Abateme	ent Contractor (9)						
Guardian Contracting	ı, Inc.						(Guardian Co	ntracting, Inc							
Street Address							Str	eet Address								
1889 Rte. 9, Unit 61							1	1889 Route 9	, Unit 61							
City, State, Zip Code							Cit	y, State, Zip Co	ode							
Toms River, New Jers	sey 08755						1	Toms River, I	New Jersey 0	8755						
Project Manager for Monitor	ing Firm			Tele	phone	No.	Tel	lephone No.		Li	cense No					
Nicholas Fernicola			3			-9932	7	732-349-9932			00624					
Start Date (10)		Schedule					Na	me of OSHA M	lonitor							
03/20/	17	03	- / -	21	_ / -	17	E	.M.S.L. Ana	ytical							
Occupancy Status During A			Name of the second				Str	eet Address								
☐ Facility Closed/Vacated I							1	056 Stelton								
Abatement Performed On Time of Abatement:							Cit	y, State, Zip Co	ode							
Scope of Work (Check all th				I IVI-			F	Piscataway, I	New Jersey 0	8854						
	at apply)	1505						☐ Full Cont	ainment with No	egative	Pressure					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	ovatio				☐ Mini-Enc	72 m										
			Dem	Ontio	"				mpted (*) and N	Ion-Fria	able Proce	edure				
				ocat						T			Aba	atem	ent Ty	/ре
Location of	L			rmal Sole	lly ly by		S4	Description o					R	_Z	ш	ш
Asbestos-Containing Ma TO BE ABATE		,	Main	tena	nce/			Containing Ma ermal systems			Amount (Specify		Removal	Repair	ncap	ıclo
IN Facility				dial 9 (12)	Staff?		5	surfacing, VAT,	or		SF or LF)		val	7	Encapsulate	Enclosure
(13)		V		No.	N/A	1	ot	her miscellane	ous)						ate	
basement				X		achaet	ne n	ipe insulatio	n	1	75 If	-	\boxtimes			
Succincit						aspest	03 P	ipe ilisulatio			7511	-				
										-		- 1	=	_		믬
			1 1							-		- 1	_	Ц	Ш	Ш
] [
Name of Registered Waste I				1,000	JDEP \ auler II		Cul	bic Yards of	Name of Reg	istered	Landfill					
Guardian Contracting	, Inc.				20223		vva 3		T.R.R.F.							
City, State							Dis	posal Date	City, State							
Toms River, New Jers	ey						0	3/22/17	Tullytowr	ı, Pen	nsylvani	ia				
Completed By (Print or Type)	Title					<	Signature	/	1		Date	j	1		
Nicholas Fernicola		Proje	ect N	lana	ager				TH	1		3	17	11	7	

		NOT		OITA	N OF AS	New Jersey BBESTOS ABAT AC 8:60 and 5:1				<u>V</u>			
Date of Notification (1)				Name	e of Buildir	ng Owner/Operator ((2)	HI MAR	.1	CUIL		4000	
03 /0	7 /	17		107501		e & Recycling		3	3	91	/		
Agencies Notified Ty	pe Notificatio	n		Stree	t Address			ASBESTOS		VTR()L &	-	
	Initial			PO	D Box 18	8	_	LIGE	NSIN	11 <i>3</i>			
] Amended			City	State, Zip	Code							
□ DOH	Amendment		-			e, NJ 07762							
DCA (NJAC 5:23-8)] Emergency (justification)		g		e of Contac			T-1	f				
	Cancellation			100000000000000000000000000000000000000	chard Hy	75		Telephone Num	ber				
						NFORMATION		1—					
Name of Facility Where Aba	tement is Taki	ing Place	e (3)				Type of Facility	(4)		_	-		
Residence							School (K-1)						
Street Address							☐ Subchapter	8 (Other than K-12					
							Other (i.e., p	rivate and comme	rcial b	uildin	gs,		
City (5)							Square Feet	# of Floors	В	ldg. A	ge		
Spring Lake							2000 sf	2	65				
County (6)				Cou	nty Code (7)(STATE USE ONLY)	Current Use (Pr	ior if being demoli	shed)			10.75 c	
Monmouth							Residence	1220					
Name of Monitoring Firm Hir	ed by Building	Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9))					
Guardian Contracting,	Inc.				Guardian Contracting, Inc.								
Street Address						Street Address							
1889 Rte. 9, Unit 61					1889 Route 9, Unit 61								
City, State, Zip Code				70,510		City, State, Zip Co	Š						
Toms River, New Jers	ev 08755				Toms River, New Jersey 08755								
Project Manager for Monitori			Tol	onhono									
Nicholas Fernicola	ig i iiii		- 200	Alamana ara				License No.					
Start Date (10)	10.1			32-349		732-349-9932		00624					
		eduled C			3 B	Name of OSHA M	In all the second						
	7 -	03 /	100	0_/	17_	E.M.S.L. Ana	lytical						
Occupancy Status During Ab						Street Address							
☐ Facility Closed/Vacated D☐ Abatement Performed Ou					71-	1056 Stelton							
Time of Abatement:		ai Facilii. PM/	y Hot PM		AM	City, State, Zip Co							
Scope of Work (Check all tha					,	Piscataway, N	New Jersey 08	854					
Scope of Work (Check all tha	гарріу)					☐ Full Cont	ainment with Neg	rative Proceure					
≥3 sf or ≥3 lf			nova			☐ Mini-Enc	losure	gative Fressure					
☐ ≥160 sf or ≥260 lf		□ De	moliti	on		⊠ Glovebag	Procedure						
		Is	Loca	ition		□ Non-Exe	npted (*) and No	n-Friable Procedu	T von	atem	ant T	une	
Location of			Norma			Description o	f			1			
Asbestos-Containing Mate TO BE ABATED			inten	ely by		stos Containing Ma		Amount	Removal	Repair	inc	Enclosure	
IN Facility	2			Staff?	(1.6	e., thermal systems i surfacing, VAT,		(Specify SF or LF)	SVOI	= = =	sde	uso	
(13)			(12)			other miscellane		Gr Of Er)	-		Encapsulate	re	
ot .		Yes	No	N/A							Ø		
1 st floor					asbesto	os pipe insulatio	n	168 If					
basement					duct wi	rap		1 sf	\boxtimes				
Name of Registered Waste H	auler		1	NJDEP V	Vaste	Cubic Yards of	Name of Regis	tered Landfill					
Guardian Contracting,	Inc.		ŀ	dauler II 20223		Waste 3	T.R.R.F.	er om til ott for en fille Statistic					
City, State				20220	,	Disposal Date	City, State						
Toms River, New Jerse	У					03/21/17		Pennsylvania					
Completed By (Print or Type)	Tit	le				Signature	1	, Da	te /				

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

Project Manager

DECEIVE	1
MAR 1 3 2017 1 3 3 3 9 5 1 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	
ASBESTOS CONTROL & LICENSING	

Date of Notification (1)				Name	e of Buildir	na O	wner/Operator	(2)	1	II MA	R 1	3	201	7	4	
03/08/	17						uduit Int'l Inc		П	H: MA	31	3	9	_	Secretary and	
Agencies Notified Type Notifi	ication				t Address					100000	71	\subseteq	1)		
⊠ EPA	Cation				Main Str					ASBEST	ICEN	CO	NTR	OL	3.	
☑ DOLWD ☐ Amende	ed								_		ICEN	1011	VG.			
□ DOH Amenda	ment #_			1 1 1 1 1	State, Zip											
☐ DCA ☐ Emerge		cludin	g	-	otswood		J 08884									
(NJAC 5:23-8) justifica				12/21 1	e of Contac				T	elephone N	lumbe	Γ				
Cancell	ation			На	I Bernste	ein			0							
				FA	CILITY II	NFO	RMATION									
Name of Facility Where Abatement is		Place	e (3)					Type of Facility	(4)					9-11-11-11	5	
Schweitzer-Mauduit-Power H	ouse							School (K-1								
Street Address								☐ Subchapter ☐ Other (i.e., p	8 (C	Other than K	(-12)	al bi	محالمان			
85 Main Street								homes, etc.		ite and com	mercia	שו טנ	muniç	15,		
City (5)								Square Feet		# of Floors		BI	dg. A	ge	-	
Spotswood								20,000 sf		2			80			
County (6)				Cou	nty Code (7)(ST	ATE USE ONLY)	Current Use (P	rior i	if being dem	nolishe	ed)	50.50			
Middlesex						•	se			-/						
Name of Monitoring Firm Hired by Bu	ilding O	wner	(8)	ASCM	No.	Na	ame of Abateme	ent Contractor (9)			-					
Guardian Contracting, Inc.	2000			Guardian Contracting, Inc.												
Street Address						-	reet Address	g,o.						-		
1889 Rte. 9, Unit 61				1889 Route 9, Unit 61												
	City, State, Zip Code							City, State, Zip Code								
Toms River, New Jersey 0875					1 00	.J. 1	New Jersey 08	755	=							
Project Manager for Monitoring Firm		Tele	phone	No		elephone No.	ivew Jersey uc	-								
Nicholas Fernicola		1000000000	•14/18/00/00/00/00/00/00/00/00/00/00/00/00/00	-9932		732-349-9932			License No.							
	Schedi	uled C			ite (11)	-	ame of OSHA M			00624						
03 / 20 / 17					17	1000000										
				_ ′ -	17	-	E.M.S.L. Anal	iyticai								
Occupancy Status During Abatement							reet Address									
☐ Facility Closed/Vacated During Ent☐ Abatement Performed Outside of N	lormal	TOO OT	Abate	ment	a eile a		1056 Stelton									
Time of Abatement:AM	PM	raciii 1/	y nour PM-	s - Des	AM	1	ty, State, Zip Co									
		***	: ***			F	Piscataway, N	New Jersey 08	854							
Scope of Work (Check all that apply)								-1								
≥3 sf or ≥3 lf	Ŷ	⊠ Re	novati	on			☐ Full Cont	ainment with Neg	gativ	e Pressure						
≥160 sf or ≥260 lf		☐ De	molitic	n			☐ Glovebag	Procedure								
						Take 1	☐ Non-Exer	mpted (*) and No	n-F	riable Proce	edure					
Location of			Locat Norma				22	2				Aba	ateme	ent T	уре	
Asbestos-Containing Material (ACI	VI)		d Sole		Ashe	stas	Description of Containing Mat			Amount		Re	Re	E	m	
TO BE ABATED	5.5%		intena todial 3				ermal systems i			(Specify		Remova	Repair	cap	clos	
IN Facility (13)		Cus	(12)	otan?			surfacing, VAT,			SF or LF)		val		Encapsulate	Enclosure	
(10)	İ	Yes	No	N/A		Ol	ther miscellaned	ous)						ate	175	
Boiler #5		П	П		asbesto	os n	ipe fittings		_	30 sf				П		
Boiler #5							ipe insulation	n		20 If	_					
			4020010	р	.pe modiation			2011			긤					
Name of Registered Waste Hauler				JDEP V	Masts	Cul	hio Varda af	Name - 5D- :	1	41 160	1	Ш	Ш	Ш	Ш	
Guardian Contracting, Inc.					No.	100000	bic Yards of aste	Name of Regis	tere	a Landfill						
City, State						5	j	T.R.R.F.								
						100	posal Date	City, State								
Toms River, New Jersey			0	3/23/17	Tullytown,	Per	nnsylvani	а								
Completed By (Print or Type)			-	Signature			//	Date	-/							
Nicholas Fernicola	Mana	iger				1	1		-	3/	8/	17				

													P	int
MO 242433704	120		ICATIO	tate of Nev N OF ASBI t to NJAC	ESTOS A	BATE				E	C		V	E
Date of Notification (1)			Name o	of Building (Owner/O	perator	(2)			M	AR 1	3	2017	
03/07/2017			Pass	aic Coun	ty Wea	theriz	ation	DEPT						
Agencies Notified Type Notificati	on			Address						ASBES	STOS	COL	VITRI	71
X EPA X Initial X DEP Amended X DOL Amendm				Riverview							LICE			J
X DEP Amended X DOL Amendm	00 00			ate, Zip Co va,NJ,07						2000-00 to 100-00				
Emergen	cy (including	g -		of Contact	J12				Talas	hone M	mak au			
DOH justification DCA Cancellat				Stone					I LAIAN	inana ki	Imnar			
			2 20 20 20	ILITY INFO	ORMATIC)N			-					
Name of Facility Where Abatement is Ta	king Place	(3)					Туре	of Facility (4)					
PRIVATE HOUSE								School (K-12						
Street Address							×	Subchapter 8 Other (i.e. pr etc.)				ldings	, hom	es,
City (5) PASSAIC							Squa N/A	re Feet	# of F N/A	loors		Bldg. /	Age	
County (6) PASSAIC				Code (7) USE ONLY)		_		ent Use (Prior VATE HOI		demoli	shed)	4.50		
Name of Monitoring Firm Hired by Buildir N/A	ng Owner (8)	ASCI	M No.				atement Contra ATEMENT	5.0)				
Street Address						Street 89 F		ss KLIN STRE	EET					
City, State, Zip Code								ip Code DN,NJ,075	24					
roject Manager for Monitoring Firm			Telepho	ne No.		Teleph 973-			1.00	icense 1274	No.			
Start Date (10) 03/18/2017	03/19/	/2017	mpletion	Date (11)				HA Monitor ATEMENT	LLC					
Occupancy Status During Abatement (Ch	eck Only O	ne)				Street					Vallet e-			
Facility Closed/Vacated During Entir Abatement Performed Outside of No Other – Describe: OCCUPIED	e Period of ormal Facilit	Abaten y Hours	nent s		+	City, S	tate, Z	KLIN STRE						
cope of Work (Check All That Apply)						PAI	EKS	ON,NJ,075	24					117.20
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	principal (Control of Control of	Renova Demolit				×	Mir Glo	Il Containmer ni-Enclosure ovebag Proce n-Exempted (dure				·a	
	l Is	s Locati	ion					ZXOTTPTOG) and i	1011 1 110	1	100000	emen	
Location of		Normal	lly		Desc	ription	of					Ту	/ре	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	ed Sole aintena stodial S (12)	nce/	(i.e. t	os Conta thermal s surfaci other mi	ystems ng, VA	insula T, or	(ACM) ation,	Amo (Spe SF or	cify	Remova	Repair	Encapsulate	Enclosure
DAOCH CO.	Yes	No	N/A								_		ate	e
BASEMENT	X			Р	IPE IN	SULA	TION		10	0	X			
ame of Registered Waste Hauler		100000	JDEP W		Cubic Y			Name of Re	egistered	d Landfil				
RY STATE TRANSFER/YIMY B	ROTHER		lauler ID 9551		of Waste	9		MINERV						
ity, State				Disposa	Date		City, State							
199 RANDALL AVE BRONX NY					TBD			900 MINI	MINERYA RD WAYNESBURG OH					
ompleted by ICTOR ESPIRITU	Title	LIECT	MANI	CEP	Sig	nature	6	10/1/		100	ate	2047		

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

		(Pursu			7 and 12:120-7)		par second reliable			-	-
Date of Notificatio	n (1)	1	Joseph		Owner/Operator	(2)	IM E	C	E	7	W [8
3/7/2017					USCIA					U	U 15
Agencies Notified	Type Notificat	ion	Street Address	SS							
[]EPA	[X] Initial							MAR	1.	1 21)17
[]DEP	Notifica	tion	City, State,	Zip	Code						
[X]DOL	[]Amended Notifica	tion	Morrist	own	,NJ,07963		L	FOT	20.0	1011	
[X]DOH	ROCIFICA	01011	Name of Conta	act		Telepho	ne Number		JS L		TROL
[]DCA	[]EMERGENCY		Joseph :	Sci	oscia					ALL A	
	[]Cancellat:	ion									
			55.000000000000000000000000000000000000	ITY I	NFORMATION						
Name of Facility Wh		s Taki	ng Place (3)			Type of Facil	ity (4)				
Joseph Scioso	cia					[]School					
Street Address							ter 8 (Other i.e., private				26
							homes, etc.)				
						Square Feet	# of Floors	B1	dg.	Age	
City (5)		ounty		100000000000000000000000000000000000000	nty Code (7)	1875	2	- 1	65		
Morristown	M	lorri	.s	(ST	ATE USE ONLY)	Current Use	Prior if bein	g der	nolis	hed)	
								12			
Name of Monitoring	Firm hired by B	uildin	g ASCM No.		Garden and Constitution and	ment Contracto					
Owner (8) N/A					AZTECH M	IANAGEMENT	, Inc.				
Street Address					Street Address						
					86 Chris	topher St					
City, State, Zip Co	de				City, State,	Zip Code					-
					Montclai	r, NJ 070	42				
Project Manager for	Monitoring Fir	m Te	lephone Numbe	r	Telephone Numb	ber	Lic	ense	Numb	er	
		N	/A		(973) 744	-8800	0	037	1		
Scheduled Start Dat	e (10) Sched	. Comp.	letion Date (11)	Name of OSHA 1	Monitor					
04 01 2	2017 04	1 (03 2017		N/A						
	Year Mon		Day Year								
Occupancy Status Du [X]Facility Clo	ring Abatement osed/Vacated Dur				Street Address	S					
of Abatemer	nt										
	erformed Outside cribe:«OffHours			7	City, State, 2	Zip Code					
	cribe: «Other Occ		-								
Scope of Work (Chec	k all that apply	y)			11						
[V]\2 -6	1.6		V1D		17 870	Containment wi	th Negative P	ressi	ire		
[X]>3 sf or []>160 sf			X]Renovation]Demolition		17	Enclosure -bag Procedure	1				
1 3 -						riable Procedu					
Locatio	n of	I	Is ocation		Descriptio	on of		Aba	teme	nt I	ype E
Asbestos-Co			Vormally Used		Asbestos-Con		Amount	R	R	N	N
Material	(ACM)	D 35	Solely aintenance/		Material ((ACM)	(Specify	E	E P A	CA	L C
TO BE AN		C	ustodial	in	(i.e., thermal sulation, surfa		SF or LF)	O	A	PS	o s U
(13)		Yes	aff (12)		or other misce:			A	R	U	UR
							10		-		E
Basement			X D	uct	Insulati	on	18 Sq.Ft.	X			
				200							
Name of Registered	CONTRACTOR CONTRACTOR		JDEP Waste	279	bic Yards		stered Landfi		a 1979		
AZTECH MANAG	EMENT, INC		auler ID No. 7040	of	Waste 1.0	Minerva	Enterpri	se	INC	3	
City, State				Dis	sposal Date	City, State	7				
Montclair, NJ	07042			0	4/04/2017	Waynesb	urg, Ohio	44	688	3	
) /	1/				
Completed By (Print	870000		ande		Si/gnature	1		ate	2017		
Constantine V	ivian Pre	eside	:11 C		1	in Xal / Call	1111	3/7/:	COT/		

NOTIFICATION OF ASBESTOS ABATEMENT

		1202000	HIC CO NOMO	0.00-	7 and 12:120-7		Market State				San Transit
Date of Notification 3/8/2017	n (1)		Name of Bui Wilming	lding ton S	Owner/Operator avings Fund	(2) Society, F	SB, DBA	E.	E E	a Tr	Wst
Agencies Notified	Type Notifica	tion	Street Addr		shington S	Street	Fro	14.4	n 4	2 1	017
[]EPA	Notifica	tion						M A	П	3 2	UI/
[]DEP	[]Amended		City, State								
[X]DOL	Notifica	tion	Newalk	, 140	, 07102		À	SBES	TOS	CON	TRC
[X]DOH	[]EMERGENCY	1.0	Name of Con		202	Telepho	one Number		ICEN	ISIN	<u> </u>
[]DCA	STO PARAMETER ACCURATION		Nichol	as V	erdi						
	[]Cancellat	ion	. E3.03	TT TMV	TATEODAN STON						-
Name of Facility Wh	ere Abatement i	s Takir	5,000,000		INFORMATION	Type of Faci	lity (4)			- : 111100	-
Residence			-5 ,-,	•							
Stroot Addross						[X]Other	pter 8 (Oth (i.e., priv	rate &			1
						Square Feet	# of Flo		D1 d~	7 ~~	
City (5)	k	county ((6)	Cou	inty Code (7)	square reec	# OL FIC	JOIS	biag.	Age	
Clifton	I	Essex		(SI	'ATE USE ONLY)	Current Use	(Prior if h	eing d	lemol:	ished	.)
Name of Monitoring Owner (8)	Firm hired by E	Building	ASCM No.		Name of Abate				19		
N/A					AZTECH M	ANAGEMEN'I	f, Inc.				
Street Address			-		Street Addres	topher St	Ξ.				
City, State, Zip Co	de				City, State, Montclai	Zip Code r, NJ 070	042				
Project Manager for	Monitoring Fir	m Tel	ephone Numb	ner	Telephone Num			Licens	e Niii	Ther	
		N/	The second contract contraction		(973) 744			003		C.L	
Scheduled Start Dat			etion Date		Name of OSHA I	Monitor					
	017 03		3 20		N/A						
Occupancy Status Du [X]Facility Clo	sed/Vacated Du	(Check			Street Address	3					
	erformed Outside cribe: «OffHours	Descri	pt»	ty	City, State,	Zip Code					
[]other - Desc			Descript»								
Scope of Work (Chec [X]>3 sf or []>160 sf	≥3 lf	[3	[]Renovation]Demolition		[X]Mini- [X]Glove	Containment was	e	e Pres	sure		
		T	Is	1	[]NOII-E	riable Proced	dre	A	batem	ent :	Type
Location			ocation ormally		Descriptio		120000000000000000000000000000000000000	Γ.	2	E	E
Asbestos-Co Material	4. P. (1984) 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		Used Solely		Asbestos-Con Material (Amount (Specif	1 1	7 1	C	C
TO BE AR		By Ma	intenance/		(i.e., thermal		SF or	- 1	0 5	A P	D D
In Faci. (13)	-		aff (12) No N/A		sulation, surfa or other miscel		LF)	1	I	S II	U R E
Basement			X	Pipe	Insulati	on	95 LF	X		1	1
Basement			X	Boil	er Insula	tion	30 Sq.1	Ft. X			
Name of Registered	Waste Hauler EMENT, INC	На	DEP Waste uler ID No. 7040	1	bic Yards Waste 1.5	Name of Reg	istered Lan		IN	IC	1
AZIECH MANAG			. 0 . 0	Dis	sposal Date	City, State					
City, State Montclair, NJ	07042			6	3/24/14	Waynesh	ourg, Oh	nio 4	468	8	

3-13-17	NOTIFICAT	State of New Jer TON OF ASBESTO ant to NJAC 8:60	SABATEMENT	IVE	iec	499	12
Date of Notification (1) Agencies Notified Type Notification	-17 Nam	ne of Building Owne	III III MARIL	3 2017 IL	pa		
	ent #	State, Zip Code	tillside	NJ	07	7200	
DOH justification Cancellati	on	ACILITY INFORMA	Stin Spa TION Type of Faci	Jelenhone	Mrmhe	er' :	
Street Address The Fam	rily Dwe	elling	School Subcha	, , ,	K-12) ercial b	uildings, I	nomes,
County (6) Hillside	Count	7205 by Code (7)	Square Feet	# of Floors	lichod	Bldg. Ag	e Z
Name of Monitoring Firm Hired by Building	F-2.00000000	E USE ONLY)	Name of Abatement	Contractor (9)	_	. 9	
Street Address RO. Box 3 City, State, Zip Code	37		Street Address City, State, Zip Code	x 337	918	3 4	inc
Project Manage: for Monit ril gr-Firm		5555 one Nc. 758-3365	New Eq.	License	No.	201	33
Start Date (10) 3-13-17 Occupancy Status During Abatement (Chec	Scheduled Completion 3 - 1.7	Date (11) 5-17	Name of OSHA Monito	chnologie	s I	nc	-
Facility Closed/Vacated During Entire Abatement Performed Outside of Nom Other – Describe:	Period of Abatement nal Facility Hours		P.O. Bor City, State, Zip Code New Egypt		na.	533	
Scope of Work (Check All That Apply) ≥3 sf or ≥3 if ≥160 sf or ≥260 if	Renovation Demolition		(,	nent with Negative			
Location of	is Location Normally Used Solely by	Des	□ Non-Exempte	ed (*) and Non-Fria	1	cedure Abateme Type	nt
Asbestos-Containing Material (ACM) TO BE ABATED In Facility 113)	Maintenance/ Custodial Staff? (12)	(i.e. thermal s	sining Material (ACM) systems insulation, ing, VAT, or iscellaneous)	Amount (Specify SF or LF)	Remova	Encapsulate	Enclosure
Basement	Yes No N/A:	PipeI	insulation"	25 LF	Х	ite	e .
	-						
Rame of Registered Waste Hauler EPC Technologies City, State	NJDEP Wa Hauler ID 1	No. of Waste	Wast	Registered Landfill		of !	PiA
	Title President	3-		isville F	A te 3-	0-1	7

3-13-17

		-	, un		0.00	1 12 12 1	IAR-13	2017		GP		
Date of Notification (1)	3-2-	17	Na	me of Buil	ding Owner	Operator (2	Jus	tin S	Dal	1		
Agencies Notified	ype Notification		St	reet Addres	SS .					•		M
DEP C	Initial Amended Amendment Emergency (ty, State, Zi		tillsi	de	NJ	-07	20	5	
DOH DCA E	justification) Cancellation		Na	FACILITY	INFORMAT	Stin	Spal	<u>!</u>		2.000		
Name of Eacility Where About Street Address	fament is Taking	Place (3)	Du	je Hi	ng.		Subchapi	_	n K-12) mercial bu	ilding	s, hon	nes,
City (5) Hills	ide	N	J	072	.05	Sc	quare Feet	# of Floor	rs	Bldg.	Age 0 7	-
County (6)				unty Code ATE USE O				rior if being de	molished)			
Name of Monitoring Firm Hi	red by Building C	wner (8)		ASCM No.	A	Name of A	Abatement C	ontractor (9)	logie	5	Ir	36
Street Address	ox 33	37				Street Add	ress BOX	337	J			- 10
City, State, Zip Code	rat.	N2	0	85.	33	City, State	, Zip Code	IN FA	50	8	53	3
Project Manage: for Moether Start Date (10)	nen Ken	Scheduled	60	phone No. 19758 tion Date (*	3-3365		No. 33 SHA Monito	65 (tse No.	39	4	
3-1	5-17		3-1	3-1	7	E	PC Tec	hnologi	ies I	nc		
Occupancy Status During At Facility Closed/Vacated Abatement Performed (Offier – Describe:	During Entire Pe	riod of Ab	atement			Street Add	, Zip Code	337				
Scope of Work (Check All Th	at Apply)					TACO	Egypt	NU	08.	کے	3	-
≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf	× *		novation molition			Z (Mini-Enclosus Glovebag Pro				æ	
			ocation mally							Abate	ement /pe	
Location of Asbestos-Containing Mate TO BE ABATEI In Facility (13)		Used S Mainte Custod	Solely by enance/ lial Staff? 12)	ASO	estos Cont e. thermal surfac	scription of aining Mater systems insi sing, VAT, or iiscellaneous	ulation,	Amount (Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure
Basement		Yes 1	No Ņ	(A:	'n T	ne la	1. "	25 LI	FV		te	
Dajerierr				Fi	per	Mula:	K0/	a) =1	X			\neg
	ologies		Hauler	Waste ID No.	Cubic Y of Was	te /	Wast	Registered Lar		- 0 (e P	A
City, State New Eqv	ot A	15			Disposi	1 Y-17	City, Stat	isville	PA			
Completed by Schenk	o:A	Title Poec		+	Si	gnature	2500	1	Date 3	-2.	-17	-

	N	OTIFIC	ATIC ursu	N OF ant to	NJAC 8	STOS ABATE 3:60 and 5:16)		ECEI	W [7	Transfer of the latest of the
ate of Notification (1)						wner/Operator (2)		MAP 13	2024	į.	ע	
03 /	09 / 17		A	VH De	molitio	n			211		+		
	Type Notification		Str	eet Addi	ress				SBESTOS CO	NTRO	L&		
gencies Notified	Initial		7	4 Spin	naker (Court		-	LICENSI				1
DOLWD	Amended		Cit	y, State,	Zip Cod	le							
DOH	Amendment #				e, NJ 08				I Lana Number				+
1 DCA	Emergency (incl	luding	Na	me of C	ontact			T	elephone Number				
(NJAC 5:23-8)	justification) Cancellation			Tony									+
	L Caricellation			EACILI	TY INFO	ORMATION							4
	t Tables	Diago (3)		TAGILI			Type of F	acility (4)					
ame of Facility Where F	Abatement is Taking	Place (3)					☐ Scho	ol (K-12)	Other than K-12)				
Residence							☐ Subc	hapter 8 (Other than K-12) ate and commercia	al buildin	igs,		
treet Address							home	es, etc.)					
							Square		# of Floors	Bldg.	Age		
City (5)							2500	77	2	80			
Long Branch					0 1 (7)	OTATE LISE ONLY		Use (Prior	if being demolished	ed)			
County (6)				County (Code (/)(STATE USE ONLY)		dence					
Monmouth						Name of Abaten	1000						
Name of Monitoring Firm	n Hired by Building (Owner (8)	A	SCM No									
N/A	4328					Guardian C	ontractii	ig, inc.					
Street Address						Street Address							
Street Address						1889 Route		П					_
at In Tip Code					HIERON, T.	City, State, Zip	Code	007					
City, State, Zip Code						Toms River	, New Je	rsey 087	55				-
	aitesing Eirm		Telep	hone No	٥.	Telephone No.			License No.				
Project Manager for Mo	onitoring Filli	1	10.56			732-349-99	32		00624				_
	Coho	duled Cor	mnlet	on Date	(11)	Name of OSHA	Monitor						
Start Date (10)		03 /	29	1	17	E.M.S.L. A	nalytical						_
03 / 22						Street Address							
Occupancy Status Dur	ing Abatement (Che	ck only or	1e)	aant		1056 Stelto							_
01 10/00	ated During Entire P	eriog of A	Date	neni s = Desc	ribe	City, State, Zip		\$7.					
☐ Abatement Perform	ned Outside of Norm t:AM	al Facility	PM-	A	M	Piscatawa	v. New J	ersey 08	854				
Scope of Work (Check		□ Rer	novati	on		☐ Full C	Containme Enclosure	nt with Neg	gative Pressure	ire.			
≥160 sf or ≥260 lf		M Del	HOHUC			Non-	Exempted	(*) and No	on-Friable Procedu	Ahr	ateme	ent T	av
			Loca			100 mg				7.7		1-15000	
Locat	tion of		Norma			Descripti pestos Containing	on of Material ((ACM)	Amount	Removal	Repair	Encapsulate	
Asbestos-Contain	ing Material (ACM)		inten	ely by ance/	ASD (i	e thermal syste	ems insula	tion,	(Specify	SVO	air	psu	
TO BE	<u>ABATED</u>	Cus	todial	Staff?	,	surfacing.	VAT, or		SF or LF)	-		late	
	acility 13)		(12	1 000	4	other misce	laneous)						
,		Yes	No	N/A					400 sf	\boxtimes			
ovtorior			\boxtimes		asbes	stos roofing ta	r		40001				+
exterior			\boxtimes									닏	+
4			-		-								
											П		I
									Literard Locatill			_	1
	Mosto Hauler			NJDEP		Cubic Yards	25.26.5) () (c.25.55)		gistered Landfill				
Name of Registered				Hauler	ID No.	Waste 5		T.R.R.F.					
Guardian Cont	racting, inc.			2022	.3	Disposal Da	te Ci	ty, State	D3/74				
City, State	2					3/30/17		Tullytow	n, Pennsylvani	a		-	
Toms River, Ne						Signat	are	/	/ 1	Date	1	1	
Completed By (Prin	t or Type)	Title				Signat	10.	-1	11	31	9	11	
Nicholas Ferni		Proje	ct Ma	anager			V /	1_		-1		-	

41939	NOTIF		ON OF AS	ew Jersey BESTOS ABAT IC 8:60 and 5:10	1.5 -	EASE	=	7	T	I F
Date of Notification (1)				g Owner/Operator (111	3			1	
03/06/	17	Α	Ifred Sanz	ari Construction		MAR 1	3 21	017		
Agencies Notified Type Notifica	ition	Stre	eet Address		l de					
☑ EPA ☐ Initial		1	Court Hou	ise Plaza	1	ASBESTOS (CON	TRO	1 8	
☑ DOLWD☑ Amended☑ DOHAmendment		City	, State, Zip (Code		LICEN				
□ DCA □ Emergence	_	Н	lackensack	k, NJ 07601	h-service.					
(NJAC 5:23-8) justification		Nar	ne of Contac	t		Telephone Numb	er	1 - 62		
☐ Cancellat	ion	G	len Poppe							
		F	ACILITY IN	IFORMATION		<u> </u>			_	
Name of Facility Where Abatement is T	aking Place (3)			Type of Facility	(4)				
Commercial					School (K-12					
Street Address						8 (Other than K-12)	ial hu	ildina	C	
1 Essex Street						Other (i.e., private and commercial buildings, homes, etc.)				
City (5)					Square Feet	# of Floors	Blo	dg. Ag	je	
Hackensack										
County (6)		Co	ounty Code (7)(STATE USE ONLY)	Current Use (Pr	ior if being demolish	ned)			
Bergen										
Name of Monitoring Firm Hired by Build	ling Owner (8) ASC	M No.	Name of Abateme	ent Contractor (9)					
Bio Terra Solutions				ALL PRO MA	NAGEMENT L	LC				
Street Address		1		Street Address						
P.O. Box 1224				27 Outwater	Lane					
City, State, Zip Code				City, State, Zip Co	ode					
Union, NJ				Garfield, NJ	07026					
Project Manager for Monitoring Firm		Telephor	ne No.	Telephone No.		License No.		_		
Rick Eustaquio		973-4	94-3762	973-928-4888		1188				
Start Date (10)	cheduled Cor	mpletion I	Date (11)	Name of OSHA M	lonitor					
02 /28 /17	04 / _	28		ALL PRO MA	NAGEMENT L	LC				
Occupancy Status During Abatement (C	Check only on	e)		Street Address						
□ Facility Closed/Vacated During Entire	e Period of Al	batement	8	27 Outwater	Lane					
Abatement Performed Outside of No				City, State, Zip Co	ode					
Time of Abatement:AM	PM/	PM	AM	Garfield, NJ	07026					
Scope of Work (Check all that apply)										
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf	☐ Rend ☑ Dem			☐ Mini-End ☐ Gloveba	g Procedure	gative Pressure on-Friable Procedure	e			
	10.5(5)(5)	ocation					Ab	ateme	ent Ty	уре
Location of Asbestos-Containing Material (ACM TO BE ABATED IN Facility (13)) Used Main Custo	Solely by tenance/ dial Staff (12)	(i.e	Description of stos Containing Ma s., thermal systems surfacing, VAT other miscellane	iterial (ACM) insulation, , or	Amount (Specify SF or LF)	ecify no ai cap			

2nd Floor \boxtimes 2,000 SF Joint Compound Cubic Yards of Name of Registered Waste Hauler NJDEP Waste Name of Registered Landfill Hauler ID No. Waste ATC Minerva Enterprises SW-24310 As Needed City, State Disposal Date City, State Shirley, NY TBD

N/A

 \boxtimes

 \boxtimes

 \boxtimes

Completed By (Print or Type) Allen Monchik

Title Project Manager

No

Yes

Built up roofing

Flashing

VAT/Mastic

 \boxtimes

X

 \boxtimes

7,000 SF

500 SF

7,000 SF

Roof

Roof

2nd Floor

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8-60-7 AND 12:120-7) CONTINUATION SHEET



	_			SHEFT						. 1
				1 Essext Street		Abateme	nt Type		ASBES	TOS CONTROL &
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Faculty (13)	No Main	ial Staf	Used by ce/Cust if (12)	Description of Asbestos-Containing Material (ACM) (i.e. thermal systems, insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	R e m o v a I	R e p a i	E n c a p s u l	E n c l o s u r	LICENSING
	Yes	No	N/A							
1st Floor- Office Area (Under carpet)			X	VAT/Mastic	3,000 SF	x				
1st Floor- Utility Room			Х	VAT/Mastic	100 SF	Х				
1st Floor- Office Area (No access under ceramic tiles) 1st Floor- Throughout (In			х	VAT/Mastic	1,000 SF	Х				
ceiling void)			Х	Pipe insulation elbows	100-200 LF	Х				
Basement Boiler Room			Х	Pipe insulation elbows	50 LF	Х				
Basement- Storage Area (In ceiling void)			x	Pipe insulation elbows	50 LF	х				
Basement- Office Areas	-	-	X	Pipe insulation elbows	100 LF	X			-	
Basement- Office Areas (Exposed and below carpet)				VAT/Mastic	2,000 SF	X				

			\sim \sim		
Completed by: (Print or type) Allen Monchik	Title:	Project Manager	Signature:	ate://	7

			NOT	(Pursuant to NJAC 8:60 and 5:16)											
Date of Notification (1) 02 /	14 /	17					· 8	ner/Operator	7 7		MAR	1.3	20	17	
Agencies Notified EPA DOLWD	Type Notific	ed			10	t Address Court Hou State, Zip		Plaza		AS AS	SBEST		ONT	ROL	8
☑ DOH ☐ DCA (NJAC 5:23-8)	Amendm Emerger justificat Cancella	ncy (inc	cluding	g	Name	of Contac	ct	07601		Teleph	one Num		niva	*******	
	☐ Cancella	ation				n Poppe									
Name of Facility Where A Commercial Street Address 1 Essex Street	Abatement is	Taking	Place	(3)	FA	CILITY IN	NFOF	RMATION	Type of Facility School (K-1) Subchapter Other (i.e., phomes, etc.	2) 8 (Other t private and			uilding	js,	
City (5) Hackensack									Square Feet	# of F	loors	В	dg. A	ge	
County (6) Bergen									Current Use (Pi		g demolis	shed)			
Name of Monitoring Firm Bio Terra Solutions		lding O	wner	(8)	ASCM	No.			ent Contractor (9)						
Street Address								eet Address	NAGEMENT L	.LC					
P.O. Box 1224								7 Outwater	Lane						
City, State, Zip Code Union, NJ					1	, State, Zip C									
Project Manager for Mon	toring Firm				phone			ephone No.			se No.				
Rick Eustaquio Start Date (10)		Cabadi	م اد دا		73-494		100	73-928-4888		118	8				
02 /28 /	17	04	1_ /	_ 28	tion Da		the workers	ne of OSHA M LL PRO MA	NAGEMENT L	LC					
Occupancy Status During Facility Closed/Vacate Abatement Performed Time of Abatement:	d During Enti Outside of N	ire Peri ormal F	od of	Abate y Houi	rs - Describe City State Zin Code										
Scope of Work (Check all	that apply)								tainment with Neg	gative Pre	ssure	72			
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf				novati molitic	T				losure g Procedure mpted (*) and No	n-Friable	Procedu	re			
Location	of			Locat Norma				D	,			Ab	ateme	ent Ty	уре
Asbestos-Containing I TO BE ABA IN Facilit (13)	Material (ACM TED	1)	Use Ma Cust	d Sole intena todial (12)	ely by nce/ Staff?	(i.e. thermal systems insulation (Specify					Repair	Encapsulate	Enclosure		
Roof Yes N					N/A	Built up	2 500	fina		7.00	0 SF			0	
Roof						Flashin		iiig			SF				
2 nd Floor						VAT/Ma		,						믬	
3 rd Floor						Joint C	80-5100	ound			0 SF 0 SF				
Name of Registered Was	te Hauler				JDEP V		_	ic Yards of	Name of Regis				ш	Ш	Ш
ATC City, State				Н	auler II SW-2										
Shirley, NY								BD	Waynesbu	ourg, OH					
Completed By (Print or Ty Allen Monchik	rpe)	Title Pro	oject	Man	ager			Signature			Da	te \	19	-//	2

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8-60-7 AND 12:120-7) CONTINUATION

MAR 1 3 2017

ASBESTOS CONTROL & LICENSING

				SHEET					A
	_			1 Essext Street		Abateme	nt Type	l	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Faculty (13)	No Main	s Locat rmally Solely itenani ial Staf	Used by ce/Cust	Description of Asbestos-Containing Material (ACM) (i.e. thermal systems, insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	R e m o v a I	R e p a i	E n c a p s u l	E n c l o s u r e
	Yes	No	N/A	1					
1st Floor- Office Area									
(Under carpet)			Х	VAT/Mastic	3,000 SF	Х			
1st Floor- Utility Room			Х	VAT/Mastic	100 SF	Х			
1st Floor- Office Area (No									
access under ceramic tiles)			Х	VAT/Mastic	1,000 SF	Χ.			
1st Floor- Throughout (In									
ceiling void)			Х	Pipe insulation elbows	100-200 LF	Х			
Basement Boiler Room			Х	Pipe insulation elbows	1,000 SF	Х			
Basement- Storage Area (In									
ceiling void)			Х	Pipe insulation elbows	50 LF				
Basement- Office Areas			Х	Pipe insulation elbows	100 LF	Х			
Basement- Office Areas									
(Exposed and below									
carpet)			Х	VAT/Mastic	2,000 SF	Х			
		Ш							

Completed by: (Print or type) Allen Monchik	Title:	Project Manager	Signature:	- Date	14/
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Ch 13915		NOTIF		ION (OF ASB	w Jersey SESTOS ABAT C 8:60 and 5:16	# F	DEGE		\mathbb{V}	E	
Data of Notification (1)			1	Jame o	f Building	Owner/Operator (2	2)	MAR 1	3 6	2017	2	1
	9 /	17		Brixr		owner operator (1 1 1 11 11		-017	Contract of the Contract of th	-
Agencies Notified	Type Notificatio	n	5	Street A	ddress		The second secon	ASBESTOS	CON	VTRO	OL 8	
⊠ EPA				1 Fay	ette St.		1	LICE				
□ DOLWD			(City, Sta	ate, Zip C	ode						
		-		Cons	shohock	en, PA 19428						
			1	Name o	f Contact			Telephone Numbe	r	minutes:		
(110/10 0.20 0)				Rona	ald Ding	er						
				FAC	ILITY IN	FORMATION						
Name of Facility Where A	Abatement is Tak	ing Place	(3)				Type of Facility ((4)				
	te of Notification (1) 3 / 9 / 17 encies Notified EPA DOLWD DHSS DCA (NJAC 5:23-8) me of Facility Where Abatement is Taking for Middletown Shopping Center reet Address 1417 Route 35 ty (5) Middletown, NJ Dunty (6) Monmouth Ame of Monitoring Firm Hired by Building Ov Accredited Environmental Technolo reet Address 28 N. Pennell Rd. ty, State, Zip Code Media, PA 19063 oject Manager for Monitoring Firm Eric Sutherland art Date (10) 3 / 23 / 17 3 ccupancy Status During Abatement (Check Facility Closed/Vacated During Entire Peri Abatement Performed Outside of Normal F Time of Abatement: 7AMPM/3:30 cope of Work (Check all that apply) 1 ≥3 sf or ≥3 lf 2 ≥160 sf or ≥260 lf Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility						School (K-12					
	te of Notification (1) 3						Subchapter 8	(Other than K-12) ivate and commerci	al bui	Idinas		
	te of Notification (1) 3						homes, etc.)	ivate and commerci	ai bui	idiliga	3,	
							Square Feet	# of Floors	Bldg. Age			
1000							3000	1	3	5+		
	duletown, No											
	te of Notification (1) 3				50 800		Vacant					
	pate of Notification (1) 3 / 9 / 17 Gencies Notified EPA DOLWD Amended Amendment #0 Emergency (including justification) Cancellation Cancellation Cancellation Cancellati				lo.	Name of Abateme	ent Contractor (9)		-02:5			
			NA	tems								
Street Address					Street Address							
A 4000 A 100 A	Accredited Environmental Technolog Street Address 28 N. Pennell Rd. City, State, Zip Code Media, PA 19063 Project Manager for Monitoring Firm Eric Sutherland Start Date (10) 3 / 23 / 17 Schedule 3 Coccupancy Status During Abatement (Check o					550 East Uni	on St.					
City, State, Zip Code						City, State, Zip C	ode	2.011				
						West Cheste	r, PA 19382					
I		Telep	hone N	lo.	Telephone No.		License No.					
Eric Sutherland			61	0-891-	0114	610-701-9000)	00508				
Start Date (10)	Scl	heduled Co	ompleti	ion Date	e (11)	Name of OSHA N	Monitor					
3 /23 /	3/	24	_ / _	17	AET							
Occupancy Status During	g Abatement (Ch	neck only o	ne)			Street Address						
				nent		28 N. Pennel	Road					
☐ Abatement Performed	d Outside of Norr	mal Facility	/ Hours	- Desc	cribe	City, State, Zip C	ode					
Time of Abatement: 7	ZAMPM/	3:30PM	A	.M		Media, PA 19	9063					
Scope of Work (Check a	Il that apply)											
N 0 1 . 0 11		□ n•	novatio			☐ Full Cor ☐ Mini-En	tainment with Neg	gative Pressure				
			molitio			☐ Gloveba	ag Procedure					
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			Normal d Sole		Acho	Description stos Containing M		Amount	Removal	Re	En	En
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IN Facil		Cus	todial S (12)	staff?		surfacing, VAT		SF or LF)	<u>a</u>		Encapsulate	ure
(13)		Yes	No	N/A		other miscellan	eous)				é	
F. 4 - 1 - 140 - 1 - 10				_	Caulk			115 LF		П		
Exterior Windows/Do	oors			\boxtimes	Caulk			110 11	67			

Completed By (Print or Type)
Mark Griffin

ASB-41

MAY 11

City, State

Phila., PA

Name of Registered Waste Hauler

Richard Burns & Co

Cubic Yards of

Signature

Waste

30 Disposal Date

TBD

Name of Registered Landfill

Birdsboro, PA

City, State

Western Berks Community Landfill

Date

NJDEP Waste

Hauler ID No.

19955

Estimator

Title

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

Ch251	2)	ì	NOTII		TION		BES"	ersey TOS ABAT 60 and 5:16	1.4	DECE		<u> </u>		
Date of Notification (1)	00				Name	of Building	Own	ner/Operator (2	2)	MAR 1	3 20	117		11
03/	10 /	17						Company		I WAIT	2 20) [la la	
Agencies Notified	Type Notifica	tion			Street	Address				ACDECTOR (2011	FDO	-	
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□ DOLWD				-		tate, Zip C	o Grandon .			EIOLIV	JII4C			
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☐ DCA	☐ Emergend		luding		7.710.00	of Contact		0 07047		Telephone Numb	er			
(NJAC 5:23-8)	justificatio				Telester					Telephone Numb	21			
	☐ Cancellati	on			Hin	a Olsson				-				
					FAC	ILITY IN	FOR	MATION						
Name of Facility Where A	Abatement is Ta	aking	Place	(3)					Type of Facility					
Former General Ele	ectric Facility	/							School (K-1	12) · 8 (Other than K-12)				
Street Address										private and commerc		ilding	S,	
6001 Tonelle Avenu	ıe								homes, etc		×			
City (5)	4077								Square Feet	# of Floors	Blo	dg. Ag	je	
North Bergen									127,000	2	6	51		
County (6)					Coun	ty Code (7)	(STA	TE USE ONLY)	Current Use (F	Prior if being demolish	ned)			
Hudson								,54.4	Vacant					
Name of Monitoring Firm	Hired by Build	ina O	wner (8	3)	ASCM	No.	Nan	ne of Abateme	ent Contractor (9	9)				
Health and Safety S					0011	7		uperior Aba						
Street Address		7.34.0						eet Address			-			
PO Box 365								Henderson	Drive					
								, State, Zip Co						
City, State, Zip Code									II, NJ 07006					
Berlin, NJ 08009	itarina Firm		31	Tolo	phone l	No		ephone No.	, 140 07 000	License No.	-			
Project Manager for Mon	itoring Firm			100000000000000000000000000000000000000	6-452			973) 808-161	6	00411				
Jim Proctor			1. 10	-		all received the control of the cont	,	ne of OSHA M		00411				
Start Date (10) 3 / 20 /	200000000000000000000000000000000000000			- 3	tion Da			uperior Aba						
								eet Address						_
Occupancy Status During					m ont		2 Henderson Drive							
□ Facility Closed/Vacate □ Abatement Performed						cribe	- 450		(C-10) [1-5-10:10 A					
Time of Abatement: _								, State, Zip Co						
							V	vest Caldwe	II, NJ 07006					
Scope of Work (Check al	I that apply)							M Full Con	tainment with N	egative Pressure				
☐ >3 sf or >3 lf			⊠ Rei	novati	on			☑ Mini-End		ogaaro i roosaro				
≥160 sf or ≥260 lf			☐ De	molitio	n				g Procedure	lan Eriable Broodur				
			1.0	1		T		∐ Non-Exe	empted (*) and N	Non-Friable Procedur				unicaria.
				Locat Jorma				Description of	, f		Ab	ateme	Ve and	1 2 2
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IN Facili	ity		Cusi	(12)	Staff?			surfacing, VAT her miscellane		SF or LF)	<u>a</u>		Encapsulate	ure
(13)			Yes	No	N/A	1	Ott	ner miscenarie	ous)				te	
Manufacting Area						Wood E	Block	k Floor and	Mastic	55,000 SF	\boxtimes			
Boiler Room						TSI Pip	e Ins	sulation		130 LF				
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Service Transport Group, Inc							Wa 8	oo 00	Minerva	Landfill				
City, State			FEN 7 11					posal Date	City, State					
New Castle, DE							4	/21/17	Waynest	nesburgh, OH				
Completed By (Print or Type) Title							Signature	Date						
Mary Petrovski	e e contra	Pi	reside	ent				Mmu	Petro	eesh 3	110	11	7	

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14/						
17						- 1
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Date of Notification (1)			Na	me of B	uilding Ow	ner/Operator (2))						
	/17		(Genera	l Electric	Company			ASBEST			301	E.
Agencies Notified Typ	e Notification		Str	eet Add	ress			-	LI	CENS:	NG.	-	
	nitial		1	6001 T	onelle Av	enue							
	Amended		Cit	tv. State	, Zip Code								
☑ DHSS	Amendment#				Bergen, N								
	Emergency (inclu	ding	1	ame of C				T	elephone Numbe	r			7
(110/10/0.200)	justification) Cancellation		1.50	Tiina C									
	Cancellation					DALATION							7
				FACIL	ITY INFO	RMATION	Type	of Facility (4)					\dashv
Name of Facility Where Abate		lace (3)						chool (K-12)					
Former General Electri	c Facility					-	ПS	ubchanter 8 (Other than K-12)				
Street Address							⊠ C	ther (i.e., priva	ate and commerci	al buildir	ngs,		
6001 Tonelle Avenue							110	omes, etc.)	# . CFI	Dida	۸۵۵		\dashv
City (5)									# of Floors	Bldg.	Age		
North Bergen								7,000	2	61			_
County (6)			T	County	Code (7)(S7	TATE USE ONLY)	Curr	ent Use (Prior	if being demolish	ied)			
Hudson							V	acant					
Name of Monitoring Firm Him	ad by Building Ov	vner (8)	TAS	SCM No	. N	ame of Abatem	ent C	ontractor (9)					
		alici (o)		00117		Superior Aba							
Health and Safety Ser	vices, inc.	-		00111	-	treet Address							
Street Address					١	2 Hendersor	Driv	/e					
PO Box 365						City, State, Zip C							\neg
City, State, Zip Code					10	West Caldw		107006					
Berlin, NJ 08009							en, N	3 07 000	License No.			_	\dashv
Project Manager for Monitor	ing Firm			hone No		elephone No.			00411				
Jim Proctor				3-452-1		(973) 808-16			00411		- 7 - 5 - 1 -		\dashv
Start Date (10)		uled Con			1.,	Name of OSHA							
3 / 13 / _	17 4	/ _	14	_ / _	17	Superior Ab	atem	nent inc					_
Occupancy Status During A		only on	e)		15	Street Address							
☐ Facility Closed/Vacated	During Entire Per	iod of Al	baten	nent		2 Henderso	n Dri	ve					
Absternant Performed O	utside of Normal	Facility I	Hours	s - Desc	ribe i	City, State, Zip	Code						
Time of Abatement:	AMPN	Λ/	PM-	A	M	West Caldw		NJ 07006					
Scope of Work (Check all the	nat apply)					Full Co	ontain	ment with Neg	ative Pressure				
≥3 sf or ≥3 lf	F.	⊠ Ren				Mini-E	nclos	ure					
⊠ ≥160 sf or ≥260 lf		☐ Den	nolitio	n		☐ Non-E	xemp	ted (*) and No	n-Friable Procedu	ıre			
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	27		orma			Description	n of			70	70	m	匝
Location o Asbestos-Containing M	t Isterial (ACM)			ely by	Asbes	tos Containing	Mater	ial (ACM)	Amount (Specify	Remova	Repair	Encapsulate	Enclosure
TO BE ABAT	ED			nce/ Staff?	(i.e.	, thermal system surfacing, V	ns ins	ulation,	SF or LF)	oval	=	nsc	sur
IN Facility	′	Cust	(12)			other miscella	neou	s)				ate	(b
(13)		Yes	No	N/A							_	_	-
				×	Wood B	lock Floor ar	nd Ma	astic	55,000 SF				
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Boiler Room				\boxtimes	TSI Pipe	e Insulation					1		
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Name of Registered Wast	te Hauler		1	NJDEP Hauler I		Cubic Yards of Waste	"	Minerva I					
Service Transport C				SW2		800							
				- T T T IS		Disposal Date	9	City, State	2 1 2222				
City, State New Castle, DE						4/11/17		Waynesb	urgh, OH				
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Completed By (Print or Ty	ype)	nue Presid	ent			Um		Potal		31	13	//	7
Mary Petrovski						1766	jung	1-02		1	/	/	
ASB-41		* Do no	t use	this for	m for asbes	stos licensure ex	xempt	ed activities.					
MAY 11													

MAY 11

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٧٢ 		MAR	1	9	2017	

Date of Notification (1) Name of Registered Visite Processor (2) Agencies Notification (1) Street Address Street Ad			(Pu	rsuant to	o NJAC 8:60 a	nd 12:120	1)	bed	LI MAR	1 0	20	1 1	-
Abbetton-Gordaning Material (ACM) Signature Solutions Sulfice Solutions Soluti	Date of Notification (1)		1	Name of	Building Owner	/Operator	(2)		1			- State of the sta	
Agendes Notified PA				Wes	stern Enviro	nmenta	al Solutio	ns, LLC	ASBESTO	SC	TNC	ROL	. &
Part Part		n	5						LIC	ENS	ING		
DEP Amended Amended Jersey City, NJ Sold College State, 20 Gode Jersey City, NJ Sold College State Sta				253	35 JFK Blvd	١.,		1					
DOL	tened and		(City, State	e, Zip Code								
DOH	DOL Amendme			Jer	sey City, N	J							
DCA Cancellation FACILITY INFORMATION	[] Emergence		1	Name of	Contact			17	Telephone Num	her	15-56		
Street Address Stre	DCA Cancellati			Fra	ank Degraz	io					×25114100		
Alaris Healthcare at Newport Street Address 198 Stevens Rd., 298 Square Feet 40,000				FACIL	ITY INFORMA	TION							
Steel Address 198 Stevens Rd., (City (5) Jersey City County (5) Hudson Name of Monitoring Firm Hired by Building Owner (8) Enviro-Pro UnLTD Corp. Streat Address 2721 Kings Higway #8L City, State, Zip Code Brooklyn, NY 11229 Freyer Address 370 W. Pleasantview Ave., Suite 2-329 City, State, Zip Code Hackensack, NJ 07601 Fability Close/Overated During Entire Period of Abstement Abatement Performed Outside of Normal Fability Hours Location of Asbetson-Containing Material (ACM) TO Repair (13) Name of Registered Waste Hauler Sunn Enterprise Group, LLC Street Address 370 W. Pleasantview Ave., Suite 2-329 City, State, Zip Code Hackensack, NJ 07601 Fability Closed/Vecated During Entire Period of Abstement Abatement Performed Outside of Normal Fability Hours Location of Asbetson-Containing Material (ACM) TO REABATED In Facility (13) Name of Registered Waste Hauler Sunn Enterprise Group, LLC Street Address 370 W. Pleasantview Ave., Suite 2-329 City, State, Zip Code Hackensack, NJ 07601 Renovation Part Containing Material (ACM) (Location of Normally Hours Abbettos-Containing Material (ACM) TO REABATED In Facility (13) Name of Registered Waste Hauler Sunn Enterprise Group, LLC Non-Exempted (1) and Non-Frieble Procedure Non-Exempted (2) and Non-Frieble Procedure Non-Exempted (2) and Non-Frieble Procedure Non-Exempted (3) and Non-Frieb	Name of Facility Where Abatement is Tak	ing Place (3)			4.		Type of F	acility (4)					
Steel Address 198 Stevens Rd., (City (5) Jersey City County (5) Hudson Name of Monitoring Firm Hired by Building Owner (8) Enviro-Pro UnLTD Corp. Streat Address 2721 Kings Higway #8L City, State, Zip Code Brooklyn, NY 11229 Freyer Address 370 W. Pleasantview Ave., Suite 2-329 City, State, Zip Code Hackensack, NJ 07601 Fability Close/Overated During Entire Period of Abstement Abatement Performed Outside of Normal Fability Hours Location of Asbetson-Containing Material (ACM) TO Repair (13) Name of Registered Waste Hauler Sunn Enterprise Group, LLC Street Address 370 W. Pleasantview Ave., Suite 2-329 City, State, Zip Code Hackensack, NJ 07601 Fability Closed/Vecated During Entire Period of Abstement Abatement Performed Outside of Normal Fability Hours Location of Asbetson-Containing Material (ACM) TO REABATED In Facility (13) Name of Registered Waste Hauler Sunn Enterprise Group, LLC Street Address 370 W. Pleasantview Ave., Suite 2-329 City, State, Zip Code Hackensack, NJ 07601 Renovation Part Containing Material (ACM) (Location of Normally Hours Abbettos-Containing Material (ACM) TO REABATED In Facility (13) Name of Registered Waste Hauler Sunn Enterprise Group, LLC Non-Exempted (1) and Non-Frieble Procedure Non-Exempted (2) and Non-Frieble Procedure Non-Exempted (2) and Non-Frieble Procedure Non-Exempted (3) and Non-Frieb	Alaris Healthcare at Newport									S			
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Square Feet 40,000 4 of Floors 10 of Floors	198 Stevens Rd.,							a (i.e. pirva	te a commercia				T. 1
Jersey City County (6) Hudson Name of Monitoring Firm Hired by Building Owner (8) Enviro - Pro UnLTD Corp. Streat Address 2721 Kings Higway #6L Streat Address 2721 Kings Higway #6L City, State, 2p Code Brooklyn, NY 11229 Froject Manager for Monitoring Firm Yevgeniy Golubchik Telephone No. Yevgeniy Golubchik Tale 801-2231 Facility Closed/Vacated During Entire Period of Absterment Check Only One) Facility Closed/Vacated During Entire Period of Absterment Absterment Performed Ovidate of Normal Facility Hours Absestos-Containing Material (ACM) To B - 18-ATED In Facility (13) Telephone No. Telephone No. Telephone No. Telephone No. Telephone No. Telephone No. Telephone No. Telephone No. Telephone No. Telephone No. Discovery Status Buring Abatement (Check Only One) Streat Address 370 W. Pleasantview Ave., Suite 2-329 Streat Address 373 W. Pleasantview Ave., Suite 2-329 Streat Address 373 W. Pleasantview Ave., Suite 2-329 Streat Address 370 W. Pleasantview Ave., Suite 2-329 Streat Address 370 W. Pleasantview Ave., Suite 2-329 Telephone No. Telephone No. Telephone No. Telephone No. Streat Address 370 W. Pleasantview Ave., Suite 2-329 Streat Address 370 W. Pleasantview Ave., Suite 2-329 Streat Address 370 W. Pleasantview Ave., Suite 2-329 City, State, Zip Code Hackensack, NJ 07601 Streat Address 370 W. Pleasantview Ave., Suite 2-329 City, State, Zip Code Hackensack, NJ 07601 Full Containment with Negative Pressure Interprise Group, LLC Abbestos Containing Material (ACM) Amount Type Absetsos Containing Material (ACM) To B - 18-ATED Telephone No. To B - 18-ATED Telephone No. Telephone										BI		ge	
Courly (9) Hudson Name of Monitoring Firm Hired by Building Owner (8) Enviro-Pro UnLTD Corp. Street Address 2721 Kings Higway #8L City, State, Zip Code Brooklyn, NY 11229 Project Manager for Monitoring Firm Yevgeniy Golubchik Start Date (10) 3/20/17 Scheduled Completion Date (11) 3/20/17 Cocupancy Status During Abatement (Check Only One) Fallity Closed/Vacated During Entire Period of Abatement Abatement Performed Ottalde of Normali Facility Hours Abatement Performed Ottalde of Normal Facility Hours Scope of Work (Check All That Apply) 2 35 for 23 if 2 160 sf or ≥260 if Stock In Facility (13) Scheduled Completion Scheduled Completion Scheduled Completion Scheduled Completion Telephone No. 718-801-2231 973-928-6900 71229 Street Address 370 W. Pleasantview Ave., Suite 2-329 City, State, Zip Code Hackensack, NJ 07601 Street Address 370 W. Pleasantview Ave., Suite 2-329 City, State, Zip Code Hackensack, NJ 07601 Street Address 370 W. Pleasantview Ave., Suite 2-329 City, State, Zip Code Hackensack, NJ 07601 Street Address 370 W. Pleasantview Ave., Suite 2-329 City, State, Zip Code Hackensack, NJ 07601 Street Address 370 W. Pleasantview Ave., Suite 2-329 City, State, Zip Code Hackensack, NJ 07601 Street Address 370 W. Pleasantview Ave., Suite 2-329 City, State, Zip Code Hackensack, NJ 07601 Street Address 370 W. Pleasantview Ave., Suite 2-329 City, State, Zip Code Hackensack, NJ 07601 Facility (In Containment with Negative Pressure Mini-Enclosure (In Charles) Minimal Research Procedure Non-Exempted (1) and Non-Friable Procedure Non-Exempted (2) and Non-Friable Procedur	1										70		
Name of Monitoring Firm Hired by Building Owner (8) Enviro-Pro UnLTD Corp. Street Address 2721 Kings Higway #8L Street Address 370 W. Pleasantview Ave., Suite 2-329 City, State, Zip Code Brooklyn, NY 11229 Project Manager for Monitoring Firm Yevgenity Golubchik Talephone No. Telephone No. Telephone No. Tocupancy Status During Abatement (Check Only One) Asbetment Performed Outside of Normal Facility Hours Other - Describe 100 Abatement Performed Outside of Normal Facility Hours Other - Describe 100 To Be ABATED In Peally (13) Yes No N/A Name of Registered Waste Hauler Sunn Enterprise Group, LLC Start Date Outside Staff (12) Abeten Start Date (10) Abeten Start Date (10) Scope of Work (Check All That Apply) Abstence Containing Material (ACM) In Be ABATED In Peally (13) Name of Registered Waste Hauler Sunn Enterprise Group, LLC Start Date Outside of Normal Facility (12) Yes No N/A NAME Of Osh Amount (Specify and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Abstence Containing Material (ACM) (Specify on Specify One) Abstence Containing Material (ACM) (Specify on Specify One) Abstence Containing Material (ACM) (Specify One) Absten											40-		
Sunn Enterprise Group, LLC			(STATE U	SE ONLY)		Assist	ed Livin	g & Rinab	Cen	ter		
Street Address 370 W. Pleasantview Ave., Suite 2-329 City, State, Zip Code Brooklyn, NY 11229 Project Manager for Monitoring Firm Yevgeniy Golubchik Stant Date (10) 3/20/17 Cocupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other - Describe: Room Vacated City, State, Zip Code Hackensack, NJ 07601 Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Store 18	Name of Monitoring Firm Hired by Buildin	g Owner (8)		ASCM	No.	20.000000000000000000000000000000000000					52.0		
Street Address 2721 Kings Higway #6L City, State, Zip Code Brooklyn, NY 11229 Project Manager for Monitoring Firm Yevgeniy Golubchik Talephone No. Telephone No. O1229 Start Date (10) 3/20/17 Scheduled Completion Date (11) 3/20/17 Scheduled Completion Date (11) 3/20/17 Sunn Enterprise Group, LLC Street Address 370 W. Pleasantview Ave., Suite 2-329 City, State, Zip Code Hackensack, NJ 07601 Street Address 370 W. Pleasantview Ave., Suite 2-329 City, State, Zip Code Hackensack, NJ 07601 Street Address 370 W. Pleasantview Ave., Suite 2-329 City, State, Zip Code Hackensack, NJ 07601 Street Address 370 W. Pleasantview Ave., Suite 2-329 City, State, Zip Code Hackensack, NJ 07601 Street Address 370 W. Pleasantview Ave., Suite 2-329 City, State, Zip Code Hackensack, NJ 07601 Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-E						Su	ınn Ente	erprise (Group, LLC)			
City, State, Zip Code Brooklyn, NY 11229 Project Manager for Monitoring Firm Yevgeniy Gollubchik Telephone No. 718-801-2231 73-928-6900 71229 Start Date (10) 3/20/17 Scheduled Completion Date (11) 3/20/17 Cocupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other – Describe: Room Vacated Scope of Work (Check All That Apply) Scope of Work (Check All That Apply) Asbestos-Containing Material (ACM) 10 BE ABATED In Facility (13) 1st Floor - Therapy Room Normally Yes No N/A 1st Floor - Therapy Room Normally Name of Registered Waste Hauler Sunn Enterprise Group, LLC Normally Vaste No N/A Number Veygeniy Group Acceptate City, State, Zip Code Hackensack, NJ 07601 Full Containment with Negative Pressure Mini-Endosure Glovebag Procedure Norn-Exempted (*) and Non-Friable Proced				1									
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Yevgeniy Golubchik 718-801-2231 973-928-6900 01229			1	Telephor	ne No.	Telep	hone No.			0.			
Street Address Str			7	718-80	01-2231	97	3-928-6	900	01229				
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Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other – Describe: Room Vacated Scope of Work (Check All That Apply) ≥ 3 sf or ≥3 if ≥ 160 sf or ≥260 if Demolition			3/27	7/17		Su	ınn Ente	rprise Gr	oup, LLC	See House		-1547414	
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Abatement Performed Outside of Normal Facility Hours Other – Describe: Room Vacated Scope of Work (Check All That Apply) 23 sf or 23 lf 2160 sf or 2260 lf Location of Asbestos-Containing Material (ACM) In Facility (13) In Facility (13) Yes No N/A 1st Floor - Therapy Room Name of Registered Waste Hauler Sunn Enterprise Group, LLC City, State Hackensack, NJ 07601 Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-	Anna Carlos II II II II II II II II II II II II II			ent					ew Ave., St	ite 2	-329)	
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23 sf or ≥3 lf	Other – Describe: Room Vacat	ed				Ha	ckensac	k, NJ 07	7601				
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Supplied (*) and Non-Friable Procedure		De	molit	ion					IFA				
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1st Floor - Therapy Room X VAT 2,500 SF X Name of Registered Waste Hauler Sunn Enterprise Group, LLC City, State Hackensack, NJ 07601 Completed by NJ VAT VAT 2,500 SF X VAT Little NJDEP Waste Hauler ID No. NJ-952 TBD Disposal Date TBD Date 3/9/17		Used	Sole	ly by	Asbestos Co	ontaining	Material (A	CM)				匝	m
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7 ///// // 0/01/11													
	Bogdan Markovski	D	ir. o	of Oper	rations		100	/XX		0,0,1	•		

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Date of Notification (1)				Name	of Buildin	g Owner/Operator	28. 50						
3/	10/17						Sastokas		i iv	AD	13	20	17
Agencies Notified	Type Notification	on		Street	Address								
DEP	Initial Amended		+	City, S	tate, Zip C	Code			ASBE				
⊠ DOL	Amendmen Emergency		.				nasquan NJ	0873.6_		LIC	ENS	ING	
⊠ DOH	justification Cancellation	٦)	t	Name	of Contac			Telepho	ne Numb	er			
DCA .	L Caricellation					like Sastokas						_	
			(0)	FAC	ILITY INF	ORMATION	T (T : 11/4	. (4)					_
Name of Facility Where		king Place esidentia					Type of Facility School (K-1						
Street Address	ICC	Sidelitie	t1			*	☐ Subchapter	8 (Other t	han K-12)			
							Other (i.e., phomes, etc.)		ommercia	i build	ings,		
City (5)							Square Feet	# of F	loors	Blo	dg. A		
	Freeho	old, NJ (772				1400	- I -	2 a damalia		85	+/-	
County (6)	nmouth				only)	7) (STATE	Current Use (P	rior it bein	g demolis	nea)			
Name of Monitoring Firm	n Hired by Buildin	ng Owner	_	ASCM	No.	CONTRACTOR DATE OF THE PROPERTY OF THE PROPERT	nent Contractor (120			
(8)	MECS		_				ens Environ	mental	Service	s, In	c.		_
Street Address	DO Doy 2	2.4.1				Street Address	PO I	3ox 322)				
City, State, Zip Code	PO Box 3	541				City, State, Zip C		JOA J22			_		-
	rosswick, N.	J 08515					Allentow	n, NJ 0	8501				_
Project Manager for Mo				phone		Telephone No.		Licen	se N o.	0.400	ş		
	eisgarber		***************************************		8-4070		59-9688		0	0493	,		_
Start Date (10)	Sc	heduled C	omple /24/		te (11)	Name of OSHA		IECS					
3/20/17 Occupancy Status Durit	ng Abatement (C			1 /		Street Address							_
▼ Facility Closed/Vaca	ted During Entire	Period of	Abate			2012		30x 341					
☐ Abatement Performe ☐ Other - Describe:	ed Outside of Nor	mal Facilit	y Hou	rs		City, State, Zip Code Crosswicks, NJ 08515							
Scope of Work (Check	all that apply)												_
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			novati molitic			☐ Mini-En	ntainment with Ne closure ag Procedure empted (*) and N			e			
			ocatio							100	bate		
Location	of		smally Solel			Description o	f				Тур	e	
Asbestos-Containing	Material (ACM)	1 000000	tenan istodia		Asbes	tos Containing Ma thermal systems	terial (ACM)	Amo (Spe		ਸ		En	Ш
TO BE ABA		5	Staff?		(1.6.,	surfacing, VAT	, or	SF or		Remova	Repair	caps	Enclosure
(13)		-	(12)			other miscellane	ous)			val	air	Encapsulate	sure
		Yes	No	N/A									
Basem		Th	ermal Pipe In	sulation	130) lf	×						
		_											
		_											
Name of Registered Wa	sete Hauler	_	IN	JJDEP V		Cubic Yards	Name of Reg	istered La	ındfill				
Stevens Environ		ces, Inc		Hauler ID		of Waste 2 CU			ss Land	lfill			
City, State				102	<i>y bu</i>	Disposal Date	City, State		• • • • •	D .			
Allentown, NJ						3/24/17	10/	Morr	isville, I Date	PΑ	_	5-11	_
Completed By Mahlon E. St	nager	Signature	1/		Date	3/10)/17						
			5,00	- 1.141		- ///	- 1/						

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Date of Notification (1) 03 /	10 / 1	17		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ne of Buildi erizon	ng Owner/Operator	(2)	LL MAR	1.3	3 20)17	20 - 20 - 20 - 20 - 20 - 20 - 20 - 20 -
Agencies Notified	Type Notificatio	n		Stre	et Address							
⊠ EPA					90 Highv			ASBESTO				_&
⊠ DOLWD	Amended				State, Zip			LIC	EN	SING	ì	
□ DHSS	Amendment Emergency (-			nswick, NJ 08852	,					
(NJAC 5:23-8)	justification)	ıncıuaii	ıg	-	e of Conta	CONTRACTOR CONTRACTOR		Telephone Num	bar			
	☐ Cancellation			Al	ex Baylo	r		relephone Nun	ber			
				FA	CILITY	NFORMATION		1				
Name of Facility Where A	Abatement is Taki	ng Plac	e (3)			THE ORIGINATION	Type of Facility					
Verizon		(T)					School (K-12					
Street Address							☐ Subchapter 8	Other than K-12)			
3090 Highway 27							Other (i.e., p homes, etc.)	rivate and comme	rcial b	ouildir	igs,	
City (5)							Square Feet	# of Floors	1	Olala:	^	
South Brunswick, N	IJ						10,000	3		3ldg. / 50	Age	
County (6)				Cou	nty Code (7)(STATE USE ONLY)	1.00	or if being demolis	, hod)	2000		
Middlesex					,	A	ouncil ose (i ii	or it being derrious	mea)			
Name of Monitoring Firm	Hired by Building	Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)		11: - 2 h			
USA Environmental	Managaemen	Inc.				JVN Restora	0.5 (0.5)					
Street Address					72.7	Street Address						
8436 Enterprise Ave	enue					47 Foster Ro	ad					
City, State, Zip Code						City, State, Zip Co	ode					
Philadelphia, PA 19						Staten Island						
Project Manager for Monit	oring Firm		Tel	ephone	No.	Telephone No.		License No.				
Mark Jenkins			2	15-365	5-5810	718-605-6256		00774				
Start Date (10)	Sche	duled C	omple	etion Da	ite (11)	Name of OSHA M	lonitor	00.11				
03/22/	17	12 /	_ 3	1_ /	17	Testor Tech						
Occupancy Status During	Abatement (Chec	k only	one)			Street Address						0.00
☐ Facility Closed/Vacated	During Entire Pe	eriod of	Abate	ment		10 59 Jackson	n Avenue					
Abatement Performed	Outside of Norma	I Facilit	y Hou	rs - Des	cribe	City, State, Zip Co						
Time of Abatement:	P	M/ <u>5:00</u>	PM- <u>1</u>	:30 _{AM}		LIC NY 11101						
Scope of Work (Check all t	that apply)										-	
≥3 sf or ≥3 lf≥160 sf or ≥260 lf		⊠ Re	novat molitic			☐ Mini-Encl	Procedure	ative Pressure	a.			
			Locat						1 1000	atem	ent T	vne
Location o Asbestos-Containing M			Vorma d Sole		Acha	Description of		20 00		_	1	
TO BE ABAT	ED	Ma	intena	nce/		stos Containing Mat ., thermal systems in		Amount (Specify	Removal	Repair	Encapsulate	Enclosure
IN Facility (13)		Cus	odial (12)	Staff?	\$50.50	surfacing, VAT,	or	SF or LF)	ova	=	psu	Insc
(15)		Yes	No	N/A		other miscellaned	ous)				late	e.
Basement A/C Equipm	ent Room	\boxtimes			Floor Ti	le and Mastic		400SF				
						io aria mastro		4003F				
		_							Ш	Ш		
Nome of Devistor 1387												
Name of Registered Waste Newark Carting	Hauler		10000	JDEP V auler ID	V63110 955	Cubic Yards of Waste	Name of Registe					
			1''	NJ-56	33.500.000	10	G.R.O.W.S.,).W.S., Inc.				
City, State						Disposal Date	City, State					
Hackettstown, NJ						03/30/17 Morrisyille,PA						
Completed By (Print or Type	e) Title	8				10:	1 1					

Ralph Barnhardt

Project Manager

MO#2410	168641	NOT	IFICATIO	N OF ASB	ESTOS	ABATE	MENT 0)	•		EC			7 E	
Date of Notification (1) March 6, 2017			Name Erick	of Building (son Livir	Owner/C	Operator	r (2)			ÑΑΙ	R 1 :	3 20	17	
✓ EPA □	Notification Initial Amended		761 I	Address Maiden C tate, Zip Co	ode				berl basis	ASBEST	OS C		ROL	8
DOL DOL	Amendment # 2 Emergency (includin justification)	g	Cato Name	nsville, North	1D 212				Tal	anhone N	NEW PROPERTY AND A STATE OF	L (W. (MATTER) L STANSON		
	Cancellation			o Stanko			Mana	ger						
Name of Facility Where Abater Lantern Hill Phase III	nent is Taking Place	(3)	FAC	CILITY INFO	ORMATI	ON	Туре	of Facility						
Street Address 603 Mountain Ave							1	School (K Subchapt Other (i.e etc.)	er 8 (Oth	er than K & comme	-12) rcial bu	ildings	, horr	nes,
City (5) New Providence								re Feet	# 0	f Floors		Bldg.	Age	
County (6) Union				Code (7) USE ONLY)			Curre	ent Use (P	rior if bei	ng demol	ished)			
Name of Monitoring Firm Hired	by Building Owner (8	3)	ASCI	M No.		Name BL C	of Aba	tement Cacting In	ontractor C	(9)				
Street Address						Street 5 Ma		ss rite Lan	e					
City, State, Zip Code								ip Code NJ 0708	2					
Project Manager for Monitoring	Firm		Telepho	one No.		Teleph 973-	one N			License 01265				
Start Date (10) February 24, 2017	Schedu 3/20/2	led Co	mpletion	Date (11)				HA Monito						
Occupancy Status During Abate		28				Street /		ss rite Lane						
Facility Closed/Vacated Du Abatement Performed Outs Other – Describe:	ring Entire Period of side of Normal Facilit	Abate y Hou	ment rs			City, St	tate, Zi	p Code NJ 0708						
Scope of Work (Check All That /	Apply)					10440	200, 1	10 07 00						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renov Demol				\ \rightarrow\ \ri	Min Glo	Containn i-Enclosu vebag Pro i-Exempte	re ocedure					
Location of		Loca Norma			5				/ / / /	11011 1 110		Abate	ement pe	t
Asbestos-Containing Materia TO BE ABATED In Facility (13)	Ma Ma	ed Sole intena todial (12)	ance/ Staff?	(i.e. t	os Conta hermal s	ystems ng, VAT	aterial insula , or	(ACM) tion,	(S	nount pecify or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A								<u>m</u>	'	ate	Ге
Boiler		X			Boiler	Pack	ing		approx	k. 25 SF	X			
Name of Registered Waste Haule	er	N	JDEP W	aste	Cubic Y	ards		Name of	Register	ed Landfi	II			
Weigle Trucking Co.		F	fauler ID		of Waste 300			Minerv	a Land					
City, State Linden, PA				Disposa	I Date		City, Stat Minerv							
Completed by Vlarko Stankovic	Title Proje	ect M	anager		Sig	nature	20				ate 3/6/20	17		

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