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Street Address								Addre	ess gren Aven	ue					
ity, State, Zip Code									Zip Code NJ 07512						
Project Manager for Mor	nitoring Firm		Telepho	ne No.		Teleph 973-	none N		Lice 013	ense No.					
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* Do Vuse this form for asbestos licensure exempted activities.

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City, State, Eg Cade	-		*****	Branco personación	im constitution between	185 V	meland Avi	1 .							
Project Manager for Monkering Firm	****************	Mark of Market and Street	\$ 17 mg t 17 km mar m	ŕ		Midian	le. Up Cade d Park, NJ		250000000000000000000000000000000000000)		
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Start Date (19) 3/66/17 Occupant Office (20) Ind Abstract (Occupant)	2	140	Inplatio	h Uale (1	Year or and the second second	Omega		ental Sérvices			g	******************	7		
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Scope of Work (Sheek All This Zerzy)	П	Near	About	r	er meneralise d			man or only be into particular or on the contract of	4	1 1 1 S	es a sarry				
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are of Registured Works Hatter	***************************************	-17	JOSEP W	matp.	Cube Y	a (the	Name at	Haptaland Land							
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57-41 (K-06-40)		المنفائد القرائدية	grad was asset	waters to the access of the control /del>	. and security 1. and 40. M. I	一.	Vocal	40	3/0	40	ind-un - un	-			

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

	E	G			\mathbb{V}	E	In
IIX					Ch	# 8	468
ШЦ	ì	/AR	1	3	2017		IIU,

				(Pur	suant	to NJA	AC 8:60-7 and 12	2:120-7)		-	以下					h#	-1	R
Date of Notification (1)							perator (2)			111	11				- West Problems			1
Carlo	3/8/17			Resid	1000	al Re	hab			14	L	MΑ	R 1	1 3	201	7		IJ
Agencies Notified	Type of Notifica	ation St	reet A	Address							1						1	
[] EPA	[X] Initial										AS	BES	TOS	00	NITO	01	٦	
[] DEP	Notificatio	n Ci	ty St	ate, Zip	Code	2				-	/10		JCE	NSI	NG	UL	α	_
[X] DOL	[] Amended						7006								100	-		-
[X] DOH	Notificatio	n l				140 0	77000											
[] DCA				f Conta					ΙT	eleph	one l	Numbe	er .					
() = 0	[] Cancellation	on C	arl Z	Zimme	erma	ann												
					FAC	CILITY	INFORMATION						-				AVATE L	
Name of Facility When	e Abatement is T	aking Plac	ce (3)	-	= -0%			Type	of Facility	(4)						_		
Residence		5071.0	(87.5%)					1 11	School Subcha	(K-12	2)	hor the	on K	12)				
Street Address								- [x]	Other ((I.e. p	rivate	and c	omn	iercia	al build	lings	; ,	
									homes	s, etc.)							
									e Feet	#	of F	loors		В	ldg. A	ge		
City (5)		County (y Code (7)	1500	/5 :	2			11 1		95			
West Caldwell		Essex				(STAT	E USE ONLY)	reside	nt Use (Pri	ior if b	eing	demo	lished	(د				
Name of Monitoring Fire	rm Hired by Build	ing Owner	Γ Α	SCM N	lo.		Name of Abater		ARCHIOCHE TO A CONTRACT OF THE PARTY OF THE	1								
N/A			(000			79	Jupiter	Enviror	nme	ntal	Ser	vice	s, I	nc.			
Street Address							Street Address	15.2 27									77.	
									nangebr	idge	Rd	l., St	uite	100				
City, State, Zip Code							City, State, Zip				7050							
Project Manager for Mo	onitorina Circo	Talas	h	Monada		- -	T 1 1 M		Brook, N	10 0	058	3						
Project Manager for Mi	omtoring Film	relep	попе	Numbe	1		Telephone Num		75-8700)			Lice	nse r	Vumb	er 108	52	
Scheduled Start Date ((10) Sche	ed. Comple	etion I	Date (1	1)	+ $+$	Name of OSHA		3-0700	,						000	JZ	
3/18/17	Section 1		5/17		• /				vironme	enta	l La	bora	torie	es.	LLC			
Occupancy Status Dur	ing Abatement (C	heck only	one)			T	Street Address										55.00	
[x] Facility Close	d/Vacated During	Entire Pe	eriod o	of Abate	ment			2333 R	oute 22	2W								
[] Abatement Per Descr	rformed Outside ribe:	or Normal	raciii	ty nour	5 –		City, State, Zip (Code										
[] Other - Descr	ibe: partially vaca	ant						Union,	NJ 070	083								
Scope of Work (Check	all that apply)															V()		
[] Domolition					-							nt with	n Neg	jative	Pres	sure		
[] Demolition [] ≥3 sf or ≥3 lf				[]	Ren	novatio	n			– End		re cedure						
[x] ≥160 sf or ≥26	60 If								[0.01 ft.); CO.01		1000000	Proce						
		Is	Locati	ion								T			A	bate	mer	nt
Location	of		nally l					ription of						0.000000		уре	_	_
Asbestos – Co		100000000000000000000000000000000000000	olely t enanc	e/Cus			Asbestos Mater	– Contaii ial (ACM)					Amo (Spe		R			
Material (A		20 70 70 70	l Staff				(i.e., ther	mal syste	ems				SF or		N			C
TO BE ABA							insulation, s								C	A		1
(13)	ity	Yes	No	N/A			or other m	iiscellane	ous)						V	R	PS	O S
1 No (3) F				i i i i i i i i i i i i i i i i i i i		28/28/12/14			100100						L	1.	U	
Ground floor			X			or tile						- 1000000	SF		X			
Basement	Whatsa III a sa		Х		-	e insu	lation					7850457	LF		X			
Exterior			X		sidii	ıng						90	0 SF		×			
Name of Registered Wa	acta Haular	NIE	VED V	Vaste	<u> </u>	Cubia	Vanda	I Manager	(D '- ((t		C11						
Jupiter Environm		100000	iler ID			Of Wa	: Yards aste		e of Regist Ince Lai			TIII						
capitor Environm	Cittal Oct Viol	04	1782				7	Allia	ilice Lai	Haili	1							
City, State							sal Date	City,										
Pine Brook, NJ		_				3/28		Tay	lor, PA									
Completed By (Print or	Type)	Title	3000 DEC		<u> </u>		Signature		/				Da		_			
Pane Repic		Gene	eral I	Mana	ger		Mi	(3/	8/1	1			
ASB-41 JUN 95							1			_								-

Check#2733		NC	TIFI	CATI	ON OF A	New Jersey SBESTOS	ABA	TEMENT	ME	C		1 1	7
			(Pursu	ant to NJ	JAC 8:60 ar	nd 5:1	16)					
Date of Notification (1)	0.0			Na	me of Buildi	ing Owner/Ope	erator	(2)		/ A D	10	20	17
	08 /			Too	l Wasserm	ian				MAR	1 3	20	1/
Agencies Notified EPA	Type Notificat	tion			eet Address								
	✓ Initial ✓ Amended								ASBE	STO	SCC	ITM	RO
☑ DHSS	Amendme	nt#		City	, State, Zip	Code	A-11-11		- 1	LICE	1/1/51	NG	
DCA (NIAC 5-33 8)	☐ Emergenc	y (includi	ng	Nut	ley, NJ 07	110							
(NJAC 5:23-8)	justification Cancellation				me of Conta				Telephone Nu	ımber			-
		211			Wasserm								
Name of Facility Where Ab	atamont T			F	ACILITY	NFORMATI	ON				-		
	atement is Ta	king Pla	ce (3)					Type of Facility	5 30050				
Private house Street Address								School (K-1	12)				
Oll Cot / Iddites								Other (i.e.,	8 (Other than K-1 private and comm	2) percial I	buildir	200	
City (5)								homes, etc	.)	Croiai I	Julian	iys,	
Nutley, NJ 07110				- 0				Square Feet	# of Floors	1	Bldg.	Age	
County (6)				Co	unty Code (2)	(OTATE LIGHT							
Essex				000	unty Gode (7)	(STATE USE C	JNLY)	Current Use (P	rior if being demo	lished)			
Name of Monitoring Firm H	ired by Buildir	g Owner	(8)	ASC	4 No	Nome of the	/	10				0	
I.	(5)		(-)	AGGI	VI NO.			ent Contractor (9	9)				
Street Address						Gr Tech Ll Street Addr							
						1000000		202					
City, State, Zip Code						576 Valley City, State,	Zin Cr	283					
						Wayne, NJ							
Project Manager for Monito	ring Firm		Tel	ephone	e No.	Telephone I		U	License No.				_
						973-638-17			01127				
Start Date (10)	Sch				ate (11)	Name of OS		onitor	01127		-		
	_	03	/ _2	<u>1</u> /	17	Envirovisio	on Co	nsultants,Inc					
Occupancy Status During A	batement (Ch	eck only	one)			Street Addre	ess	,,,,,					-
▼ Facility Closed/Vacated Abatement Performed O	During Entire utside of Norm	Period of	Abate	ement	11	20-21 Wag	araw	Road, Bldg .#	35E				
Time of Abatement:	AM	PM/_	PM,	is - De	SCRIDE AM	City, State, 2	Zip Co	de					_
cope of Work (Check all th						Fair Lawn,							
	ar apply)					H Cle	ean up	and decontamin ainment with Neg	nation with negative	e pres	sure		
>3 sf or >3 If ≥ 160 sf or >260 If			enovat emoliti			☐ Min	ii-Encl	osure					
			amonth	on		Glo Nor	vebag	Procedure	Tent with Negativ n-Friable Procedu	e Press	sure		
			s Loca		T	bend 110	- EXGI	inpied () and ito	III-I Hable Proced	-	1		
Location of Asbestos-Containing Mat	erial (ACM)		Norma ed Sole			Descrip	tion of				atem	T	T
TO BE ABATE	D	Ma	intena	ince/	Asbes	stos Containin , thermal syst	g Mate	erial (ACM)	Amount	Remova	Repair	Encapsulate	
IN Facility (13)		Cus	todial (12)	Staff?	(,,,,,	surfacing,	VAT.	or	(Specify SIF or LF)	SVOL	air	apsu	
(1.5)		Voc	T	NI/A	1	other misce	llaneo	us)	Vol. 20 (20 (20 (20 (20 (20 (20 (20	1 20		late	
sement		Yes	No	N/A	D		-						
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ime of Registered Waste H	lauler		NJE	-	Hauler ID No.	Cubic Yards of	Waste	Name of Regist	tered Landfill		Ш	Ц	L
Tech LLC			0	03378	- 1	TBD		Linear Search of	o o canum				
y. State				20010		Disposal Date	е	T.R.R.F. Inc City, State					_
yne, NJ 07470						TBD							
ompleted By (Print or Type)	Tit	le				Signatur	e /	Tullytown, PA	De	ate			
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-41	- 0	1.01					-//`	veria	03/	/08/17			

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M		MAR	1	3	2017		

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Date of Notification (1)					100	Owner/Operator Jersey Dept.	(2) of Corrections	Job #170	2-5121	_CI	heck	#900	12		
Agencies Notified EPA	Type Notif	fication				eet Address				ASB	LICI	EM	SING	HOL	_ &
☑ DOLWD	☐ Amend					, State, Zip	_	ido							
☐ DHSS	Amend	_				renton, N									
DCA (NJAC 5:23-8)	☐ Emerge justifica		luding	J		ne of Conta	_	0025		T=					
(NJAC 5.23-0)	Cancell				0.000	ob VanTa	11000	-11		Telephone	Numbe	Γ			
	L Cancell	allon													
					F.	ACILITY I	NF	ORMATION							
Name of Facility Where A									Type of Facility	(4)					
Mountainview Yout	h Correcti	onal Fa	acility	/					School (K-1						
Street Address 31 Petticoat Lane									Subchapter Other (i.e.,	8 (Other than private and co	r K-12) mmercia	al bu	ilding	S,	
Column to the Co									homes, etc.						
City (5) Annandale, NJ 0880	01								Square Feet	# of Floor	S	Ble	dg. Ag	je	
County (6)					Cor	untv Code (7)/S	TATE USE ONLY)	Current Use (P	rior if heing de	moliehe	4)			_
Hunterdon						.,	110	JUL OILLI)	Correctiona		JIIIOII SI IE	(L)			
Name of Monitoring Firm	Hired by Buil	Idina Ov	vner (8	3)	ASCN	/ No	N	lame of Abatem	ent Contractor (9			_		- Contract	_
Environmental Con		0.77	(.,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			AbateTech, I	100	,					
Street Address	,	-					-	treet Address							
120 North Warren Si	treet						1 = 3		DO D 05						
City, State, Zip Code		_						30 Maple Ave							
Trenton, NJ 08608							1 .	ity, State, Zip Co							
Project Manager for Monito	oring Eirm			Tal		N		Lumberton, N	IJ 08048						
Rollie Jones	oning Film				ephone			elephone No.		License N	0.				
Start Date (10)	1	0-1-1-1				2-4200	_	609-265-2107		00529					
3 /27 / _		Schedule 3				ate (11) 17	100000	ame of OSHA M EMSL Analyti							
Occupancy Status During /	Abatement (Check o	nly on	e)				reet Address							
☐ Facility Closed/Vacated	During Entir	re Perio	d of Al	oate	ment			200 Route 13	North						
Abatement Performed C	Dutside of No	ormal Fa	cility I	Hour	s - Des	scribe		ty, State, Zip Co							
Time of Abatement:	AM	PM/_		PM-		_AM		Cinnaminson							
Scope of Work (Check all the	hat apply)						_				883				
≥3 sf or ≥3 If ≥160 sf or ≥260 If		_	Rend Dem		7.00			Mini-Encl Glovebag	ainment with Neg psure () vol (Procedure ppted (*) and Nor	4 cut					
				ocati								Aba	temer	nt Typ	e
Location of		.	No Used	rmal				Description of							_
Asbestos-Containing Ma TO BE ABATE)	Maint			Asbes	tos	Containing Matermal systems in	erial (ACM)	Amount			Repair	Encapsula	5
IN Facility			Custo		Staff?	(1.6.	, 1110	surfacing, VAT,	or	(Specify SF or LF) Va		=	DSI DSI	2
(13)				12)	T	-	ot	ther miscellaneo	us)	1000 1000 0000	1	-	1	Encansulate	i
		Y	es	No	N/A								1	"	
ottage #8				<u> </u>		Pipe Ins	ula	tion		70 LF		3			J
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ame of Registered Waste I	Hauler			755755	DEP V			oic Yards of	Name of Regist	ered Landfill					
AbateTech, Inc.					uler ID	- CONTRACTOR	Wa		G.R.O.W.S.						
ty, State				1	18750		_	2 posal Date	City, State						-
Lumberton, NJ						1		/30/17	Tullytown, I	PA					
ompleted By (Print or Type)	Title					-	Signature	•	- A + CTC-1	Date	ă.			_
Gwendolyn Trumbetti			ation	s C	oordi	nator			1		3	100	11	2	
2 44		55 65		5500.50				WN	NI			100	. [[7	

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	WAR	1	3	2017		

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Date of Notification (1)	3 / 9 / 17						Owner/Operator		- /] [M	An	ા ડ ^!	20	1/
							idlesex right	vays & Bridge	S/JO				-	-	-
	Γype Notifica: ⊠ InitiaI	tion		in Scientific Sci	et Address				1	I	ASBE				
	Amended				O Box 73				1.			LIU	ENS	iNG	
⊠ DHSS	Amendme	nt#			, State, Zip										
□ DCA [☐ Emergenc	y (includ	ing	_	orth Brun		ick, NJ								
(NJAC 5:23-8)	justification	n)		Nan	ne of Conta	ct			Tel	epho	ne Num	ber			
	Cancellation	on		A	dministra	tio	n		60						
				F	ACILITY I	NF	ORMATION								
Name of Facility Where Aba	atement is Ta	king Pla	ce (3)					Type of Facility	/ (4)						
Middlesex County - N	ICAT Build	ing						School (K-1	2)						
Street Address								Subchapter							
97 Apple Orchard Lar	ne							Other (i.e., homes, etc	private)	and	comme	rcial	buildir	igs,	
City (5)								Square Feet		of Flo	ors	F	Bldg. /	Ane	
North Brunswick, NJ										01110	0.0	Ι,	Jiug. /	igo	
County (6)				Cou	inty Code (7)(S	TATE USE ONLY)	Current Use (P	rior if b	eing	demolis	shed)			
Middlesex								Office Buil	ding						
Name of Monitoring Firm Hir		ng Owner	r (8)	ASCN	l No.	N	ame of Abateme	ent Contractor (9)						
Matrix New World Eng	gineering						AbateTech, I	nc.							
Street Address						S	treet Address								
26 Columbia Turnpike	É						30 Maple Ave	e. PO Box 25							
City, State, Zip Code						С	ity, State, Zip Co	ode							
Florham Park, NJ 0793	32						Lumberton, N	J 08048							
Project Manager for Monitori	ng Firm		Tel	ephone	No.	Te	elephone No.		Lic	ense	No.			-	
Gavin Gilmore			9	73-585	5-9040	1	609-265-2107			0052	9				
Start Date (10)	Sch	neduled (Comple	etion Da	ate (11)	Na	ame of OSHA M	lonitor							
3 / 20 / 1	17	3	/ _3	1_ /	17		EMSL Analyti	ical							
Occupancy Status During Ab	atement (Che	eck only	one)			St	reet Address					gg-c			
☐ Facility Closed/Vacated D				ment		355507	200 Route 130	0 North							
☐ Abatement Performed Out	tside of Norm	nal Facili	ty Hou	rs - Des	scribe		ty, State, Zip Co								
Time of Abatement:	AM	PM/	PM		AM	1	Cinnaminson								
Scope of Work (Check all tha	t apply)						Omnaminson	, 143 00077							
		W-25-11					☐ Full Conta	ainment with Neg	gative I	Press	ure				
≥3 sf or ≥3 lf ≥160 sf or >260 lf			enovat				Mini-Encl								
≥160 sf or ≥260 lf			emolitic	חכ			☐ Glovebag ⊠ Non-Exer	Procedure npted (*) and No	n-Frial	ole Pr	ocedur	А			
		Is	Locat	tion					************			1	atem	ent T	vne
Location of			Norma				Description of					1000		1	, ,
Asbestos-Containing Mate			ed Sole iintena				Containing Mat			Amou		em	Repair	inca	ncl
IN Facility	<u>/</u>		todial		(I.e.		ermal systems ir surfacing, VAT,			Speci F or L		Remova	air.	sde	Enclosure
(13)			(12)	_			her miscellaneo		Ü	. 0	/	-		Encapsulate	re
		Yes	No	N/A				**************************************						CD	
Main Conf Rm, Superinte	in Conf Rm, Superintendent Off						ling Glue/Ma	stic	1,	120	SF				
Exterior							or Caulk		1,	500	LF		П	П	П
Mechanical Room, Hall, F	ile &		П		Floor tile	e &	Mastic			52 S					
Citchen Closet Janitor Closet			П	П	Linoleur					36 SI					
lame of Registered Waste Ha	uler		_ N	JDEP V			oic Yards of	Name of Regis				KA			
AbateTech, Inc.			10000	auler ID	No.	Wa	ste	G.R.O.W.S.			**				
City, State	V			18750			5 posal Date	City, State							
Lumberton, NJ							/31/17	Tullytown,	PA						
Completed By (Print or Type)	Tit	le					Signature	, , , , ,	Y-11/2-1		Dat	0			
Gwendolyn Trumbetti		Operati	ons C	Coordi	nator		Oignature)	11 A			Dat	2/6	1/1	17	
	,	- porati	J113 C	Joiul	iator		UV	1/001			1)	111	1	

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3	Date of Notification (1)					1					D 4	Α.	2017	,
Agencies Notified	1,000	9	/ 1	7					3 50	703-5124 Check	#an·		2017	1
SPA	Agencies Notified	Type Not	tification						7 005 #17					_
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Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement:AMPM/5PM-1:30AM City, State, Zip Code Cinnaminson, NJ 08077 Abatement with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement T.														
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ASB-41 MAY 11

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

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Fig. (A) (2)				1		_		(0)	ILL MA	H 1	3 /	UI1	
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Agencies Notified Type	Notification	n		Stree	et Address				1	ICEN	200	A STATE OF THE STA	
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Name of Facility Where Abaten	nent is Taki	ng Plac	e (3)					Type of Facility ((4)				
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Street Address									3 (Other than K-1) ivate and comme		uildin	ne	
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City (5)								Square Feet	# of Floors	В	ldg. A	ge	
New Brunswick													
County (6)				Cou	nty Code (7)(ST	ATE USE ONLY)	Current Use (Pri	or if being demoli	ished)			
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Name of Monitoring Firm Hired	by Building	Owner	(8)	ASCM	No.	Na	ame of Abateme	ent Contractor (9)					
Omega Environmental						1	AbateTech, I	nc.					
Street Address						Sti	reet Address						
280 Huylar Street						;	30 Maple Ave	. PO Box 25					
City, State, Zip Code						Cit	ty, State, Zip Co	ode					
South Hackensack, NJ 07	7606						Lumberton, N						
Project Manager for Monitoring I		-110.51	Tele	phone	No		lephone No.		License No.				
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Time of Abatement.	1411	141/			ZIVI	(Cinnaminson	, NJ 08077				BLU-LI LA	
Scope of Work (Check all that ap	ply)						T= "0 .						
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□ ≥160 sf or ≥260 lf			molitic				☑ Glovebag						
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AbateTech, Inc.	729		1 1555	auler ID 18750	No.	Wa	ste	G.R.O.W.S.					
City, State						Dis	posal Date	City, State					
Lumberton, NJ						2	/23/17	Tullytown, I	PA				
Completed By (Print or Type)	Title	9					Signature	1	Da	ate ,	-	,	
Gwendolyn Trumbetti	0	perati	ons C	oordi	nator		(MA	1/8		21	12	117	1

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Date of Notification (1)	Nam	e of Buildir	ng Ov	wner/Operator (2)										
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					FA	CILITY	NFO	RMATION					71140		
Name of Facility Where A	batement is	Taking	Place	e (3)					Type of Facility	(4)					
Resorts Hotel & Cas	sino- Ocea	n Tov	ver						School (K-12						
Street Address									Subchapter 8						
1133 Boardwalk									Other (i.e., p homes, etc.)		and comm	iercial b	ouildin	gs,	
City (5)			_						Square Feet		of Floors		Bldg. A	00	
Atlantic City									Oquare i eet	" '	31 1 10013	'	nug. r	ige	
County (6)					Cou	ntu Cada /	7\/CT	ATE USE ONLY)	Course at Us a /Da		ata a dans	Park and			
Atlantic					Cot	nty Code (/	1)(31)	ATE USE UNLY)	Current Use (Pr		eing aemo	iisnea)			
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Name of Monitoring Firm I		aing C	wner	(8)	ASCN	No.			ent Contractor (9)						
Health & Safety Serv	vices						1	AbateTech, Ir	1C.						
Street Address							Sti	reet Address							
PO Box 365							;	30 Maple Ave	. PO Box 25						
City, State, Zip Code							Cit	y, State, Zip Co	ode						
Berlin, NJ 08009	rlin, NJ 08009								IJ 08048						
Project Manager for Monit	oring Firm			Tele	ephone	No.	Те	lephone No.		Lic	cense No.				
James Proctor				8	56-452	2-1311	6	09-265-2107			00529				
Start Date (10)		Sched	uled C	omple	etion Da	ate (11)	Na	me of OSHA M	onitor						
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Scope of Work (Check all t	that apply)							□ Full Cont	ainment with Nee	otivo	Drogouro				
≥3 sf or ≥3 lf			⊠ Re	novat	ion			☐ Mini-Encl	ainment with Neg osure	ative	Pressure				
≥160 sf or ≥260 If			☐ De	molitic	on			☐ Glovebag	Procedure						
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ond E1	/00.00		Yes	No	N/A										
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AbateTech, Inc.					lauler II	O No.	Wa	ste	G.R.O.W.S.						
City, State		- 10-17	7		18750)	Dia.								
Lumberton, NJ							1000	posal Date	City, State	D.4					
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Gwendolyn Trumbett	i	Ob	erati	ons (Coord	inator			UNINI				27	11	71

Date of Notification (1)		102-0			ng Owner/Operator		Distriction Co.		пг	77 1	jar.
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Agencies Notified Type Notified	cation		Stre	et Address			11=4				-
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ARPOLICE AND A PROPERTY OF THE	nent #6	7		Accessed to the control of the contr	y, NJ 08401-7329)					
DCA Emerger (NJAC 5:23-8) Justificat		aing		e of Conta			Telenhanara	00 /	V 7 1.	7770	18
Cancella	and the same of th		K	athy Char	nberlin				TI TO	4	
,				ACILITY II	NFORMATION						
Name of Facility Where Abatement is		, ,)			Type of Facility	(4)				
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Street Address							8 (Other than K-12 private and commer		مناماني		
1133 Boardwalk						homes, etc.		Clair D	uliain	gs,	
City (5)						Square Feet	# of Floors	В	ldg. A	ae	
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County (6)			Cou	inty Code (7)(STATE USE ONLY)	Current Use (P	rior if being demolis	hed)			
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Name of Monitoring Firm Hired by Buil	ding Own	er (8)	ASCN	1 No.	Name of Abateme	ent Contractor (9)				
Health & Safety Services	J				AbateTech, In		,				
Street Address					Street Address						
PO Box 365					30 Maple Ave	PO Box 25					
City, State, Zip Code					City, State, Zip Co					-	
Berlin, NJ 08009					Lumberton, N						
Project Manager for Monitoring Firm		T ₄	elephone	No	Telephone No.	13 00048	License No.				
James Proctor			856-45		609-265-2107		00529				
	Scheduled				Name of OSHA M		00529				
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Occupancy Status During Abatement (Telephone (1)	SEATHIRE BEEF	WHITH DESCRIPTION								
☐ Facility Closed/Vacated During Enti					Street Address	O Ni a sella					
☐ Abatement Performed Outside of No				scribe	200 Route 130						
Time of Abatement:AM					City, State, Zip Co						
Scope of Work (Check all that apply)					Cinnaminson	, NJ 08077					
					☐ Full Conta	ainment with Ne	gative Pressure				
≥3 sf or ≥3 lf≥160 sf or >260 lf	-	Renova			☐ Mini-Encl	osure					
△ ≥160 St or ≥260 If	Ш	Demoli	tion		☐ Glovebag		n-Friable Procedur	0			
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Location of		Norm	nally		Description of				1	ent T	
Asbestos-Containing Material (ACM	1		olely by nance/	Asbe	stos Containing Mat	erial (ACM)	Amount	Ren	Repair	Enc	Enc
TO BE ABATED IN Facility	500		al Staff?	(i.e	., thermal systems in surfacing, VAT,		(Specify SF or LF)	Removal	ar.	aps	Enclosure
(13)		(12	2)	_	other miscellaned		SF OI LF)	<u>m</u>		Encapsulate	Ire
Cth Fl 57 D- 41 (00 05	Ye	s No	o N/A			\$1 				Ф	
6th Floor- 57 Bathrooms (30 SF p	per _			Mastic	Associated with	ceramic tile	1,710 SF total				
7 th Floor- Room 726		\boxtimes		Mastic	Associated with	ceramic tile	30 SF				
7 th Floor- Room 727				Mastic	Associated with	ceramic tile	30 SF				
								П	П	П	П
Name of Registered Waste Hauler			NJDEP	Waste	Cubic Yards of	Name of Regis	tered Landfill				
AbateTech, Inc.			Hauler I		Waste	G.R.O.W.S					
City, State			1875)	40 Disposal Date	City, State			_		
Lumberton, NJ					3/31/17	Tullytown,	PA				
Completed By (Print or Type)	Title				Signature	. any town,		^			
Gwendolyn Trumbetti		tione	Coord	inator	Signature	mat	Dat	1/	171	17	
ASB-41	Spere					1111	1	1/2	-11	1 /	

ASB-41 MAY 11

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

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) MAR 1 3 2017 2 27 17 PSE&G / Job #1607-5043 Check #8456 Agencies Notified Type Notification Street Address ASBESTOS CONTROL & ☐ Initial 4000 Hadley Road LICENSING **⊠** DOLWD City, State, Zip Code Amendment #4 □ DHSS South Plainfield, NJ ☐ Emergency (including □ DCA Name of Contact (NJAC 5:23-8) justification) Telephone Number □ Cancellation Greg Marone **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) PSE&G-Roseland School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, 13 Eisenhower Parkway homes, etc.) City (5) Square Feet # of Floors Bldg. Age Roseland, NJ 07068 County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Essex Substation Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Health and Safety Services AbateTech, Inc. Street Address Street Address PO BOX 365 30 Maple Ave. PO Box 25 City, State, Zip Code City, State, Zip Code Berlin, NJ 08009 Lumberton, NJ 08048 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Jim Proctor 856-452-1311 609-265-2107 00529 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 8 / 15 / 16 3 / 31 / 17 **EMSL Analytical** Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 200 Route 130 North ☐ Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: ____ AM- PM/ PM- AM Cinnaminson, NJ 08077 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure ≥3 sf or ≥3 lf ✓ Mini-Enclosure✓ Glovebag Procedure □ Renovation ≥ 160 sf or > 260 lf ☐ Demolition ☐ Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Repair Remova Encapsulate Enclosure Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED (i.e., thermal systems insulation, (Specify Custodial Staff? IN Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A Transfomer Repair Room \boxtimes Pipe Insulation 200 LF X П П П Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. Waste Waste Management G.R.O.W.S. Landfill 18750 12 City, State Disposal Date City, State Camden, NJ 3/31/17 Tullytown, PA Completed By (Print or Type) Title Signature Date Gwendolyn Trumbetti **Operations Coordinator**

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) Federal Aviation Administration/ Job #1606-5020 Check #8608 Pg. 1 of 2 2 27 1 17 Agencies Notified Type Notification **⊠** EPA ☐ Initial **FAA Technical Center** ASBESTOS CONTROL & **⊠** DOLWD City, State, Zip Code **⊠** DHSS Amendment #6 Atlantic City International Airport, NJ 08405 ☐ DCA ☐ Emergency (including Name of Contact (NJAC 5:23-8) justification) Telephone Number ☐ Cancellation Peter FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) William J. Hughes Tech Center School (K-12) ☐ Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, Hangar B301 homes, etc.) City (5) Square Feet # of Floors Bldg. Age Atlantic City County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Atlantic **Technical Center** Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) TTI Environmental AbateTech, Inc. Street Address Street Address 1253 North CHurch Street 30 Maple Ave. PO Box 25 City, State, Zip Code City, State, Zip Code Moorestown, NJ 08057 Lumberton, NJ 08048 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Jim Guilardi 609-314-1683 609-265-2107 00529 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 8 / 29 / 16 3 / 31 / 17 **EMSL** Analytical Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 200 Route 130 North Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: ____AM-___PM/ Cinnaminson, NJ 08077 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure ☐ >3 sf or >3 lf □ Renovation ☐ Mini-Enclosure ≥ 160 sf or ≥ 260 lf ☐ Demolition Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Repair Removal Enclosure Encapsulate Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED (i.e., thermal systems insulation, (Specify Custodial Staff? IN Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A Exterior \boxtimes Roof Flashing 410 SF \boxtimes Exterior X Roof Mastic 115 SF \boxtimes Interior M Floor tile & Mastic X П 20 SF Exterior \boxtimes Roof Mastic 50 SF \boxtimes Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. Waste AbateTech, Inc. Atlantic Count Utilities Authority 18750 16

Completed By (Print or Type)
Gwendolyn Trumbetti

Title

Operations Coordinator

Lumberton, NJ

Disposal Date

3/31/17

Signature

City, State

Egg Harbor Township, NJ 08234

City, State

Date of Notification (1)				Na	me of Build	ing Owner/Operator	(2)					
	17				Federal A	viation Administr	ration / Job	#1606-5020 Ch	ck#	// Гг	- 2	of 2
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					ACILITY	NFORMATION		LICEN	SING			
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William J. Hughes Tech Cent	er						School (K	-12)				
Street Address							Subchapte	er 8 (Other than K-12 , private and comme	2) vroial b	uildin	7.0	
Hangar B301							homes, et		iciai b	ulluling	JS,	
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County (6)				Co	ounty Code	(7)(STATE USE ONLY)	Current Use (Prior if being demoli	shed)			-
Atlantic							Technical		36			
Name of Monitoring Firm Hired by Bu	ilding C)wner	(8)	ASC	M No.	Name of Abateme						
TTI Environmental						AbateTech, I		(-)				
Street Address						Street Address						
1253 North CHurch Street						30 Maple Ave	. PO Box 25					
City, State, Zip Code						City, State, Zip Co						
Moorestown, NJ 08057						Lumberton, N						
Project Manager for Monitoring Firm			Te	lephor	ie No.	Telephone No.	10 00040	License No.				
Jim Guilardi			1		14-1683	609-265-2107		00529				
Start Date (10)	Schedi	uled C			Date (11)	Name of OSHA M		00323				
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≥3 sf or ≥3 lf		⊠ Rei	nova	tion		☐ Mini-Encl		egative Pressure				
≥160 sf or ≥260 lf		☐ Der	molit	tion		Glovebag						
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6 Locations			\boxtimes		Roof F	lashing		4 SF (24 SF				
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Name of Registered Waste Hauler				NJDEF	Waste	Cubic Yards of	Name of Red	istered Landfill				_
AbateTech, Inc.			1		ID No.	Waste	1	Count Utilities Au	thorit	v		
City, State				1875	U	16 Disposal Date	City, State				710 C	
Lumberton, NJ						3/31/17		or Township, NJ	0823	4		
Completed By (Print or Type)	Title					Signature		Da		-		
Gwendolyn Trumbetti	Op	eratio	ons	Coor	dinator	ch	MT		2/2	171	17	
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	Date of Notification (1)			1	Name o	f Building	Owner/Operator (2	2)	MAR 13	201	17	11	IJ
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	□ DCA	☐ Emergency (inc		L			NJ 07070						
	(NJAC 5:23-8)	justification)		1		f Contact			Telephone Number				
L		☐ Cancellation				ny Simor			*				_
					FAC	ILITY INI	FORMATION						
Γ	Name of Facility Where A	Abatement is Taking	Place	(3)				Type of Facility (
L	Residential							☐ School (K-12) ☐ Subchapter 8	(Other than K-12)				
	Street Address								ivate and commercia	al buil	ldings	S,	
-	City (5)					*		Square Feet	# of Floors	Bld	g. Ag	е	
	Rutherford												
r	County (6)				Count	y Code (7)	(STATE USE ONLY)	Current Use (Pri	or if being demolishe	ed)			
	Bergen												
r	Name of Monitoring Firm	Hired by Building O	wner (8	B) A	SCM N	lo.	Name of Abateme	ent Contractor (9)	4 50				
	Bio Terra Solutions	3					ALL PRO MA	NAGEMENT LI	LC				
	Street Address		051-2-				Street Address						
	P.O. Box 1224						27 Outwater						
	City, State, Zip Code						City, State, Zip C						
	Union, NJ	,		T-1		la.	Garfield, NJ	07026	License No.				_
	Project Manager for Mon	litoring Firm			hone N 3-494-		Telephone No. 973-928-4888	2	1188				
-	Rick Eustaquio	Sched	ulad Co	100000	A Name of		Name of OSHA N		1100			-	_
	Start Date (10) 03 /18 /			20	/			NAGEMENT L	LC				
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	☐ Abatement Performed					ribe	City, State, Zip C					_	
	Time of Abatement:		Λ/			MA	Garfield, NJ						
ł	Scope of Work (Check a	II that apply)											
			⊠ Da	novatio			☐ Full Con	tainment with Neg	gative Pressure				
	≥3 sf or ≥3 lf≥160 sf or ≥260 lf			molitio			☐ Gloveba	g Procedure					
							☑ Non-Exe	empted (*) and No	n-Friable Procedure				
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	IN Faci (13)	iity		(12)			surfacing, VAT other miscellane		GI OILF)	3		Encapsulate	re
	, ,		Yes	No	N/A			**					
	Exterior				\boxtimes	Transit	e Siding		2,500 SF				

ATC City, State Shirley, NY

Completed By (Print or Type)

Allen Monchik

Name of Registered Waste Hauler

NJDEP Waste Hauler ID No. SW-24310

Project Manager

Cubic Yards of Waste

\$ignature

Name of Registered Landfill Minerva Enterprises

As Needed Disposal Date City, State TBD

Waynesburg, OH

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	09 /	17			Bor	ough of	Audubon Park		In Figure	1	0 6	UII	1	4
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Time of Abatement:	AM-	PN				AM	City, State, Zip Co							
							Garfield, NJ	07026						
Scope of Work (Check at	i triat apply)						☐ Full Con	tainment with Nega	ative Pressure					
≥3 sf or ≥3 lf							☐ Mini-End	closure	ative i ressure					
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				100			Cubic Yards of	Name of Regist	ered Landfill					1
Century Waste LLC	<i>-</i>			1	32797		Waste As Needed	IESI Bethle	hem Landfill					
City, State							Disposal Date	City, State					3.	1
Elizabeth, NJ							TBD	Bethlehem,	PA					-
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Allen Monchik		Pi	oject	Mar	nager		11 41	Na 'V		21	91	17	1	1

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Amendment #	- 1	City, State,	Zip Code									
□ DOL □ Emergency	-		ord, nj 070	070								
DOH (including justification)	11	Name of Co					Telephor	ne Number				
DCA Cancellation	- 11	JOHN (CANNIL	LON			1					
			FAC	CILITY INFORM	MOITAN							
Name of facility where abatement	s taking p	lace (3)					Type of Facility	(4)		_		
	SP	(0)						K - 12)				
JOHN CANNILLON Street Address								apter 8 (O			(-12)	
Street Address								(Private/Co /Homes, e		rcial		
							Square Feet	# of Floor		В	ldg. A	ge
City (5)	Cou	inty (6)				inty Code (7)					7/8577	
rutherford	BE	RGEN			(518	ite use only)	Current Use (P	rior if being	g dem	olish	ed)	
Name of Monitoring Firm Hired by				ASCM No.	-	Name of Abatement	Contractor (9)			-		
						D & S RESTORA	ATION, INC.					
Street Address						Street Address						
						20 California Av	/e.					
City, State, Zip Code						City, State, Zip Code						
Project Manager for Monitoring Firm		I pi	none Numl	her	_	Paterson, NJ 07 Telephone Number	503	License	Numh	er		
reject manager for morntering rann		1.	ione ivaini	061		973-345-8020		1	1169			
Start Date (10)	Schee	d. Completi	on Date (1	1)	_	Name of OSHA Moni	tor					
03/16/17	03/3	56	15.			D & S Restoration	on, Inc.					
Occupancy Status During Abatemer						20 California Av	anua					
Facility closed/vacated during Abatement performed outside	entire per	iod of abate				City, State, Zip Code	enue					
Describe: NORMAL H	OURS				_	Paterson, NJ 07	503					
Scope of Work (check all that apply □ >3 sf or >3 lf □ ≥160 sf or ≥260 lf	Renovatio						Full Containment v Mini-enclosure Glovebag procedu Non-Exempted (*)	re			edure	
Location of		n normally enance/cus		У					R	R	E	E
asbestos-containing material (acm) to be	staff(12)	eriarice/cus	itoulai	Descripti material		sbestos-containing	Amount (Specify S	SF or	m	р	n c	n
abated in facility (13)	Yes	No	N/A	Illatellal	(ACIVI)		LF)		0 V	a i	a	L
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BASEMENT BOILER AND LAUNDRY RM				1			120110			H	H	計
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					110							
Registered Waste Hauler D & S RESTORATION, INC.		EP Hauler 506	ID#	Cubic Yards of	Waste	Name of Registered TULLYTOWN,		ECOVER	Y			
City, State PATERSON, NJ 07503			Disposal Dis	Date		City, State TULLYTOWN,	EDWAY DOCUMENT HER HAND TO SELECT	The state of the s				
Completed by (Print or Type)	Title			Signature		I TODDITOWN,	***	Date				
Rosalie Aguirre	Secretar	у						03/06/	2017			

D&S Proj. #: 17-69

State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60 and 12:120)

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	MAR	1	3	2017		

								MAR 1	3 2	U1/	1	1
Date of Notification (1)	Nan	ne of Building	Ow	ner/Operator (2	()							1
0 3 / 0 6 / 1 7	be	cky morano)				ASB	ESTOS	CON	TRO)L &	
Agencies Notified Type Notification	on Stre	et Address						LICE	43114	9		
DEP Amended												
Amendment #:	City	State, Zip Co	ode									
DOL Emergency	sı	ımmit, nj	790)1								
DOH (including		e of Contact					Telephor	ne Numbe	r			
justification)		ecky moran	0									
Cancellation									-			
Name of facility where abatement is	falian alasa		FAC	ILITY INFORM	IATIO	V	T= 75 30	(4)				
	taking place	(3)					Type of Facility School	(4) ol (K - 12))			
becky morano							Subch	apter 8 (0	Other t	han k	(-12)	
Street Address							○ Other	(Private/C	omme			
							Square Feet	/Homes, e		В	ldg. A	Age
City (5)	County	6)			Cou	inty Code (7)		011100				.5-
##S		2			(Sta	ite use only)	Current Use (P	rior if beir	ng den	nolish	ed)	
summit Name of Monitoring Firm Hired by BI	UNIO				L.,							
Name of Monitoring Firm Hired by Bi	ag. Owner (8	5)		ASCM No.		Name of Abatement						
Street Address						D & S RESTOR	ATION, INC.					
Street Address						Street Address						
City, State, Zip Code						20 California A	ve.			-15-15-1		
ony, ontro, hip oods						S 5- 6	502					
Project Manager for Monitoring Firm		Phone N	lumb	er	-	Paterson, NJ 07 Telephone Number	503	License	Numb	or		
y voje estilating et in inclining t in in		I none iv	IUITIL	CI		973-345-8020		1	1169	е		
Start Date (10)	I Cahad Ca	mpletion Dat	n /1:	1		Name of OSHA Mon	itor		1107	_		
55-200 Hotel - 100 (100 ft 100 ft)			e (1	1)		D & S Restorati	on, Inc.					
03/16/17	03/31/17					Street Address						
Occupancy Status During Abatement						20 California Av	enue	-				
Facility closed/vacated during en Abatement performed outside of						City, State, Zip Code						
Describe:					_							
Other-Describe: NORMAL HO	URS		_		-	Paterson, NJ 07						
Scope of Work (check all that apply) 3 sf or >3 If	. 726						Full Containment w	/negative	press	ure		
	Renovation						Mini-enclosure Glovebag procedu	re.				
	emolition						Non-Exempted (*)		friable	proc	edure)
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	staff(12)	ce/custodiai				sbestos-containing	Amount (Specify S	E or	m	e p	n	n
abated in facility (13)	Yes	No N	/A	material (A	ACIVI)		LF)	1 01	0 V	a	а	C
DAGENERUM			Control	DIDE DIGI		011/			e	r	р	_
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Registered Waste Hauler	NJDEP H	lauler ID#	IC	bic Yards of W	Vaste	Name of Registered	L andfill			ப	Ш	
D & S RESTORATION, INC.	13506		300	yds.		TULLYTOWN,		COVER	Y			
City, State		Dispos				City, State						_
PATERSON, NJ 07503		03/1	7/1			TULLYTOWN,	PA					
Completed by (Print or Type)	itle			Signature				Date		1000		



State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60 and 12:120)

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		MAR	1	3	2017		
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Date of Notification	1 (1)	П	lame of E	Building Own	er/Operator (2))		A	SBESTO			TOL	&
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Agencies Notified	Type Notificat	ion L	treet Add		II (EGG I III (11201							
☐ EPA ☐ DEP	Amended		61 COC	KE AVEN	NUE								
	Amendment #:	0	ity, State	, Zip Code									
□ DOL			CARTI	ERET, NJ	07008								
□ DOH	(including justification)	N	ame of Co	ontact				Telepho	ne Numbe	r	Total Selection		
☐ DCA	Cancellation		JOAN	N CRISCI						0.2			
				FACI	LITY INFORM	ATION							
Name of facility wh	nere abatement i	s taking pla	ice (3)					Type of Facility					
BOROUGH OF	E CADTEDET							1 =	ool (K - 12)		00 K	12\	
Street Address	CARTERET							St	hapter 8 (0 r (Private/0			12)	
								Bldgs	./Homes, e	etc.		I = A	
61 COOKE AV	VENUE & WA			ENUE				Square Feet	# of Floo	rs	Bio	ig. Ag	ge
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CARTERET		MII	DDLESE	EX		(0.0.	,	Cullent Ose (I HOI II DOII	ig doin	0110170	/	
Name of Monitorin	g Firm Hired by I			T	ASCM No.	П	Name of Abatement	Contractor (9)					
							D & S RESTOR	ATION, INC.					
Street Address	-			1			Street Address						
0010							20 California A	ve.				I-VIII.	
City, State, Zip Cod	е						City, State, Zip Code						
			T-			_	Paterson, NJ 07	503	License	Mumb	or	_	
Project Manager for	r Monitoring Firm			hone Numb	er		Telephone Number 973-345-8020		(CO) (CO) (CO))1169	CI		
							Name of OSHA Mon	itor					
Start Date (10)		Sched	. Comple	tion Date (11)		D & S Restorati	on, Inc.					
03/07/17		10/31					Street Address						
Occupancy Status I			. 31				20 California Av	renue				_	
	d/vacated during erformed outside						City, State, Zip Code						
Describe: Other-Descri							Paterson, NJ 07	503					
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Scope of Work (ch		Se a						Mini-enclosure	willegative	s press	uic		
		Renovatio					<u>⊠</u>	Glovebag proced					
≥160 sf or ≥2	260 If 🔀	Demolition		y used solely	,		<u> </u>	Non-Exempted (*) and Non	-friable	proc R	Eaure	1
Location of asbestos-cor	ntaining	by mainte			1	on of a	sbestos-containing	Amount		e m	е	n	E n
material (acn	n) to be	staff(12)			material		SDCStOS CONTAINING	(Specify LF)	SF or	0	p a	c a	С
abated in fac	ality (13)	Yes	No	N/A				Li		v e	i r	р	-
COOKE AVE. SEE	ATTACHED		X		VARIOUS	ACM	MATERIALS	SEE ATTA	ACHED				
WASHINGTON AVE.	SEE ATTACHED		X		VARIOUS	ACM	MATERIALS	SEE ATT.	ACHED				
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										10		旦	岸
						Mest	IN IS. III	I I and Fill			Ш	Ш	
Registered Waste F D & S RESTOR		NJDI 135	EP Haule 506	1 1011	ubic Yards of V 50 YDS	vvaste	Name of Registered TULLYTOWN,		RECOVE	RY			
City, State	,			Disposal D			City, State					-	
PATERSON, N	IJ 07503			VARIO	US DATES		TULLYTOWN	, PA					
Completed by (Prin		Title			Signature				Date	/2017			
BOGDAN JOL		PRESID		m for acheet	os licensure ex	remnte	d activities		03/03	/2017			
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### State of NJ Notification of Asbestos Abatement

2017-29 (Pursuant to NJAC 8:60-7 and 12:120-7) B & G proj. #: Check # 8280 Date of Notification (1) Name of Building Owner/Operator (2) 10 13 1/11 10 1/11 16 1 Atlantic Health System Agencies Notified Type Notification Street Address ☐ EPA 100 Madison Avenue Initial DEP City, State, Zip Code X DOL Amendment Morristown, NJ 07960 ACRECTOS CONTROL & Telephone Number CENSING X DOH Name of Contact Cancellation ☐ DCA Peter Palmer **FACILITY INFORMATION** Name of facility where abatement is taking place (3) Type of Facility (4) School (K - 12) Morristown Medical Center, Simon Building (NON Sub 8) Subchapter 8 (Other than K-12) Street Address Other (Private/Commercial Bldgs./Homes, etc. 100 Madison Avenue Square Feet | # of Floors Bldg. Age County (6) City (5) County Code (7) (State use only) Current Use (Prior if being demolished) Morristown Morris Hospital (non sub 8) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Abatement Contractor (9) T&M Associates 0145 B & G Restoration, Inc. Street Address Street Address 105 Ryerson Road 11 Tindall Road City, State, Zip Code City, State, Zip Code Middletown, NJ 07748 Lincoln Park, NJ 07035 Project Manager for Monitoring Firm Phone Number Telephone Number License Number (973)696-6869 00378 Kevin Burns 732-676-4000 Name of OSHA Monitor Scheduled Start Date (10) Sched. Completion Date (11) B & G Restoration, Inc. 03/20/2017 6/30/2017 Street Address Occupancy Status During Abatement (Check only one) 105 Ryerson Road Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: LincolnPark, NJ 07035 Other-Describe: work shift 3:30pm - 12:00am Scope of Work (check all that apply) Demolition |X | Renovation Full Containment w/negative pressure ★ Glovebag procedure  $\times$  >3 sf or >3 If ≥160 sf or ≥260 lf X Mini-enclosure Non-friable procedure Is location normally used solely Location of E by maintenance/custodial е n asbestos-containing Amount Description of asbestos-containing n staff(12) m p C material to be (Specify SF or material (ACM) 0 C a abated in facility (13) a LF) Yes No N/A L p Simon #1 Admin Bathrooom pipe insulation from pipe chase 62 If X Boiler room X ceiling plaster 4 sf

Cubic Yards of Waste

3/20/17 - 06/30/17

Signature

Disposal Date

Name of Registered Landfill

Tullytown, PA

City, State

Ciordana Luna

Tullytown Resource & Recovery Center

03/10/2017

NJDEP Hauler ID#

19563

Secretary/Treasurer

Registered Waste Hauler

Lincoln Park, NJ

Gordana Luna

City, State

B & G Restoration, Inc.

Completed by (Print or Type)

### State of NJ Notification of Asbestos Abatement

B & G proj. #: 2017-31

(Pursuant to NJAC 8:60-7 and 12:120-7) Check # 8283

Date of Notification (1)				er/Operator (2)					EC	E		$\mathbb{V}$	
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Agencies Notified Type Notificat  EPA  Initial	S S	treet Addres	S						MA	R 1	3 1	2017	
□ DEP □	10	ity, State, Zi	p Code										
▼ DOL	ment	Montclai	r, NJ 07	042					ASBES				OL &
X DOH		ame of Cont	act				Te	elephon	e Number	101-1	VU11	10	
☐ DCA ☐ Cancell	ation	Asa Mira	aglia				\						
			FACI	LITY INFORM	ATION								
Name of facility where abatement	s taking pla	ace (3)					Type of F	School	(4) ol (K - 12)				
Asa Miraglia								Subch	apter 8 (O	ther th	an K-	12)	
Street Address							X	Other	(Private/Co	mme			
							Square		/Homes, et # of Floor		Blo	lg. Ag	ge
City (5)	Cour	nty (6)			Cou	nty Code (7)							
Montclair, NJ 07042	Ess	sex			(Sta	te use only)	Current reside	(12	rior if being	g dem	olishe	d)	
Name of Monitoring Firm Hired by	Bldg. Owne	er (8)	T	ASCM No.		Name of Abatement (	Contractor	(9)					
				n/a		B & G Restorati	on, Inc.						
Street Address						Street Address 105 Ryerson R	oad						
					_	City, State, Zip Code	-			***************************************			
City, State, Zip Code						Lincoln Park, I	NJ 07035	5					
Project Manager for Monitoring Firm	1	Pho	ne Numb	er		Telephone Number (973)696-6869	9		License 00	Numb 378	er		
Scheduled Start Date (10)	IScher	I. Completio	n Date (11	1)	_	Name of OSHA Moni							
			i Date (1	' /		B & G Restorati	ion, Inc.						
03/22/2017		23/2017			_	Street Address 105 Ryerson Ro	nad						
Occupancy Status During Abateme  Facility closed/vacated during			nent			City, State, Zip Code					_		
Abatement performed outside	of normal	facility hours	S-			City, State, Zip Code							
Describe:						Lincoln Park, N	J 07035						
Scope of Work (check all that appl	y)												
☐ Demolition 🔀	Renovation	on			□ F	full Containment w/neg	gative pres	sure	✓ Glovet	ag pr	ocedu	ire	
▼ >3 sf or >3 lf	≥160 sf or	≥260 If			X	Mini-enclosure			☐ Non-fr	iable	ргосе	dure	
Location of		n normally u		/					17	R	R	E n	E
asbestos-containing	staff(12)	enance/cust	odiai	Descripti material		sbestos-containing		nount pecify :	SF or	m o	p	С	n
material to be abated in facility (13)	Yes	No	N/A	material	(ACIVI)		ĹF	)		v e	i	a p	L
basement main room, wine			X	pipe insul	ation		122	2 If		X			
cellar, coal room, electric													
room													H
										L		닏	14
					(A/t-	This of Decistered	Londfill			Ш		Ш	
Registered Waste Hauler B & G Restoration, Inc.		EP Hauler II 19563		ubic Yards of	vvaste	Tullytown	Resourc	e & R	ecovery	Cen	ter		
City, State Lincoln Park, NJ			Disposal Disposal Disposal Disposal Disposal Disposal Disposal Disposal Disposal Disposal Disposal Disposal Di Disposal Disposal	Date 23/2017		City, State Tullytown,	PA						
Completed by (Print or Type) Gordana Luna	Title Secreta	ary/Treasu	rer	Signature		Gordana Luna			Date 03/10	0/201	17		

### NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 3 10 1 17 Agencies Notified Type Notification Street Address ☐ EPA ☑ Initial ☑ DOLWD ☐ Amended City, S Amendment #_ ASBESTOS CONTROL & M DOH LICENSING □ DCA ☐ Emergency (including (NJAC 5:23-8) iustification) Name of Contact Telephone Number ☐ Cancellation FACILITY INFORMATION-Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) ESIDENCE School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e., private and commercial buildings. homes, etc.) City (5) Square Feet # of Floors Bldg. Age 1950 + 10 County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) ETID EWINL Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) A.MAC Contracting Inc. Street Address Street Address 185 Vreeland Ave City, State, Zip Code City, State, Zip Code Midland Park, NJ 07432 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 201-262-5841 00156 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 4 / 03 / 17 1 20 / 17 Omega Environmental Services Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 280 Huyler St Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: ____AM-_ PM/ Hackensack, NJ 07606 Scope of Work (Check all that apply) Full Containment with Negative Pressure ≥3 sf or ≥3 If Mini-Enclosure Renovation ☐ ≥160 sf or >260 lf Demolition Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Used Solely by Asbestos-Containing Material (ACM) Repair Removal Enclosure Asbestos Containing Material (ACM) Amount Maintenance/ ncapsulate TO BE ABATED (i.e., thermal systems insulation, (Specify Custodial Staff? IN Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A BUSEMENT 17 1250 Lanos 1 1516 П П Name of Registered Waste Hauler **NJDEP** Waste Cubic Yards of Name of Registered Landfill Hauler ID No. Newark Carting Waste IESI PA Bethlahem Landfill Corp 04509 City, State Disposal Date City, State Newark, NJ 4/3/1700 Bethlahem, PA Completed By (Print or Type) Title Signature Joseph Vocaturo Vice President

* Do not use this form for asbestos licensure exempted activities

**JAN 13** 

State of New Jersey

Date of Notification (1)	2 prints		Nar	ne of Build	ding Owner/Operator	(2)					
3 / 10 /	17			E	FIN REF	(					
Agencies Notified Type Notificat	ion		Stre	et Addres	0 9 0 0						
☐ EPA ☐ Initial					1						
☑ DOLWD ☐ Amended			City	, State, Zi	o Code						
□ DOH Amendmer	nt #	_	long			. =					
□ DCA □ Emergency		ng	ļ	V	U EST FIELD	,ん.)・	07091				
(NJAC 5:23-8) justification			Nan	ne of Cont	act		Telephone Nu	mber			
☐ Cancellatio	n ———			ER		*****					House
Name of Facility Where Abatement is Ta	leine Din	- /2)		ACILITY	INFORMATION						
	King Plai	æ (3)				Type of Facilit					
CESIDENCE						School (K-	12) r 8 (Other than K-1	21			
Street Address						Other (i.e.,	private and comm	رع ercial <u>}</u>	ouildir	gs.	
City (5)					***************************************	homes, etc					
						Square Feet	# of Floors	E	Bldg. /	- 12	
County (6)			10			2750	7			50	
County (6) UNION			Col	unity Gode	(7)(STATE USE ONLY)		rior if being demo	ished)			
UNION							DONTAL.				
Name of Monitoring Firm Hired by Buildin	g Owner	(8)	ASC	A No.	Name of Abatem	The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s	9)			eti ila	
			-		A.MAC Cont	racting Inc.					
Street Address					Street Address						***************************************
					185 Vreeland	f Ave					
City, State, Zip Code		***************************************	HEREN LIVER LANGUAGE	PAGE PROGRAMMENT	City, State, Zip C	ode					Marie III
					Midland Park	, NJ 07432					
Project Manager for Monitoring Firm		Te	lephone	No.	Telephone No.		License No.				
		Î			201-262-5841		00156				
Start Date (10) Sch	eduled (	Compl	letion D	ate (11)	Name of OSHA M	Ionitor					
3/25/17	4	1 8	25 /	17		onmental Ser	vices				
Occupancy Status During Abatement (Che					Street Address						
☑ Facility Closed/Vacated During Entire	Period of	Ahat	amont								
☐ Abatement Performed Outside of Norm	al Facili	hy Hoi	irs - De	scríbe	280 Huyler St						
Time of Abatement:AM	PM/	PN	1	AM	City, State, Zip Co						
Scope of Work (Check all that apply)					Hackensack,	NJ 07605				materia marco de	
					☐ Full Cont	ainment with Ne	native Pressure				
1. /3 sf or ≥3 lf	-	enova			☐ Mini-Enc	losure	gative i leasure				
☑ ≥160 sf or ≥260 if	∐ De	emolit	ion		Glovebag						
	l le	Loca	dian	ī	LJ Mou-Exe	mpted (*) and No	n-Friable Procedu	re			
Location of		Norma						Ab	atem	ent T	ype
Asbestos-Containing Material (ACM)	Use	ed Sol	lely by	Ash	Description of estos Containing Mai		Amount	R	Re	Ū,	面
TO BE ABATED			ance/	(i.	e., thermal systems i	nsulation.	(Specify	Remova	Repair	Cal	iclo
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Name of Registered Waste Hauler			UDEP 1		Cubic Yards of	Name of Regis	tered Landfill				
Newark Carting		-	lauler II		Waste 2		thlahem Landfi	I Cor	D		
City, State			04509		Disposal Date	City, State					
Newark, NJ					3/25/12		PA				
Completed By (Print or Type)   Titl	le .				5/23/17   Signature	_ wouldnoin					
1	/ice Pro	eside	int		Signature	1/ 9	Da	3/	1		
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ELM			FICATIO	ON OF ASE	BESTO	SABATE			ck # 27	23	E ((	0 [		7	// [	
Date of Notification (1) 3-6-2017				of Building										3 (		
Agencies Notified Type Notifica	tion		Street	Address Ramapo			5100y		l bed	lon-L	MA	R	1 3	20	17	
DEP X Amende Amendr	ment #2			state, Zip C wah, NJ (		)				ASI	BES'	TOS	CO NS	NT NG	ROL	
□ DOH     □ justificat     □ Cancella		ng	110000000000000000000000000000000000000	of Contact Mayer-C					Tele	ohone		the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract of the Contract o				
Name of Facility Where Abatement is T	aking Place	(3)	FAC	CILITY INF	ORMA	TION	Type o	f Facility	(4)							
Elm Building College Park Apar	rtments	(0)						thool (K-	A170574							
Street Address 505 Ramapo Valley Road							St.	ibchapte her (i.e.	er 8 (Other private &	than I	K-12) ercial	build	ings	hom	ies,	
City (5) Mahwah							Square 7,050		# of F	loors		BI 47	dg. A	\ge	4.00	
County (6) Bergen			County (STATE	Code (7) USE ONLY	)		Current	Use (Pr je Apai	ior if being rtments	g demo	olished	i)				
Name of Monitoring Firm Hired by Build USA Environmental Manageme	ing Owner (ant, Inc	8)	ASC 001	M No. 12			of Abate Group, I		ntractor (9	9)						
Street Address 344 West State Street			4			100	Address Hambu	g Turn	pike							
City, State, Zip Code Trenton, New Jersey 08618							tate, Zip ningda		07403							
Project Manager for Monitoring Firm William Weisgarber, Jr.			Telephone No.         Telephone No.         License No.           609.656.8101         201-710-9725         01084								0.					
Start Date (10) 1-23-2017	3-25-2	iled Coi 2017	mpletion	npletion Date (11)  Name of OSHA Monitor GL Group, Inc							50					
Occupancy Status During Abatement (C	heck Only C	ne)	Street Address											-	-	
Facility Closed/Vacated During Ent Abatement Performed Outside of N Other – Describe:	re Period of ormal Facilit	Abater ty Hour	nent s				lambur ate, Zip (		pike							
Scope of Work (Check All That Apply)	ti.				_	Bloor	mingdal	e, NJ (	07403							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Check All That Apply)					×	Mini-E Glove	ull Containment with Negative Pressure ini-Enclosure lovebag Procedure on-Exempted (*) and Non-Friable Procedure								
		s Locat							1		T		bate	ment		
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	Normal ed Sole aintenal stodial S (12)	ly by nce/	Asbest (i.e.	os Con thermal surfa	scription of taining Ma systems cing, VAT miscellane	aterial (A insulation , or	CM) n,	Amo (Spe SF or	cify		Remova	Typ	<u>Encapsulate</u>	Enclosure	
An order costs A II	Yes	No	N/A											te	(D	
Apartments A-H Apartments A-H		X				Joint C		nd	28,62		X	-				
Apartments A-H		X				oist Adh			15,50		X					
Apartments A-m		X		Kes	illent i	Floor Co	overing	S	3,802	SF	X	_				
Name of Registered Waste Hauler		N	JDEP W	'aste	Cubic	Yards	I NI	ame of 5	Registered	Land	SII.					
GL Group, Inc		Н	auler ID 033034	No.	of Was		1000	linerva	970	Land						
City, State Bloomingdale, NJ						al Date		ty, State	burg, O	——						
Completed by Elena Solakov	Title Presi	dent				ignature		en Star		1	Date 3-6-2	017				
							_		-							

GL16-004 Palm

Print Form	1
check 72722 C E V E D  sey  MAR 1 3 2017	
ASBESTOS CONTROL & LICENSING	/
Telephone Number	
Type of Facility (4)  School (K-12) Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, etc.)	
Square Feet # of Floors Bldg. Age 7,050 2 47	
Current Use (Prior if being demolished) College Apartments	
Abatement Contractor (9) oup, Inc	
ddress amburg Turnpike	
te, Zip Code ingdale, NJ 07403	

p-0.0				8					111	11-	(b) [	⊃ U	U	ᆫ
Date of Notification (1) 1-6-2017						ng Owner/ llege of			E -	Ñ.				
Agencies Notified	Type Notificatio	n			Address	. \ / !!	Б.		tree.	LI W	AR 1	1-3	2017	i
X EPA	Initial				200000000000000000000000000000000000000	Valley	Road							
DEP DOL	Amended Amendmen				ate, Zip ( vah, NJ	07430				ASBE	STOS	COI	VTR	OL
<b>▼</b> DOH	Emergency justification	1)	g		of Contac				Te	elephone I		_		-
▼ DCA	Cancellation	n			Mayer-						(e) = (e)			
Name of Facility Where			(3)	FAC	ILITY IN	FORMAT	ION	Type of Facilit	y (4)					
Palm Building Col	lege Park Apart	ments						School (F	(-12)					
Street Address 505 Ramapo Valle	v Road							Subchapt Other (i.e.	er 8 (Otl	her than K & comme	(-12) ercial bu	ildina	s hon	nes
City (5)	zy rtoau							etc.) Square Feet		of Floors				
Mahwah								7,050	2	DIFIOUIS	1.5	Bldg. 47	Age	
County (6)					Code (7)			Current Use (F			lished)			
Bergen Name of Monitoring Fire	m Hired by Building	Owner /	5)		M No.		Nave	College Apa						
USA Environmenta			)	0011				of Abatement C Froup, Inc	ontracto	г (9)				
Street Address							Street	Address						
344 West State St	reet						1	Hamburg Tur	npike					
City, State, Zip Code Trenton, New Jers	ey 08618							tate, Zip Code mingdale, NJ	07403	3				
Project Manager for Mo William Weisgarbe				Telepho 609.6	ne No. 56.8101	1		one No. 710-9725		License 01084				
Start Date (10)				mpletion	Date (11	)		of OSHA Monito	r					
1-23-2017	as Abstament (Che	3-25-2						roup, Inc						
Occupancy Status Durin  Facility Closed/Vac				mont				Address Hamburg Tur	npike					
Abatement Perform Other – Describe:	ned Outside of Non	mal Facilit	y Hour	S			City, St	ate, Zip Code			77.75			
Scope of Work (Check A							Bloor	ningdale, NJ	07403					
≥3 sf or ≥3 lf	чи тпас Арріу)	×	Renova	otion			X	Full Occupation	20	. r	_			
× ≥160 sf or ≥260 lf		-	Demoli					Full Containr Mini-Enclosu	re	n Negative	Pressu	ıre		
								Glovebag Pro Non-Exempto	ocedure ed (*) an	d Non-Fri	able Pro	ocedu	re	
		10 02.5	s Locat									Abat	emen	nt
Location Asbestos-Containing			Norma ed Sole		۸۰۱۰	Des	scription	of		12		T	/pe	Т
TO BE AB	ATED	Ma	aintena todial	ince/	Asbes (i.e	thermal	systems	aterial (ACM) insulation,	1 563	mount Specify	R	77	Enc	<u></u>
In Faci (13)	5,00 <b>6</b> ,00	000	(12)	otan:			cing, VAT		SF	or LF)	Remova	Repair	Encapsulate	Liiciosuie
		Yes	No	N/A				***************************************			/al	=	ilate	0
Apartmen	ts A-H		X		Dryw	vall and	Joint C	Compound	28.	628 SF	X			-
Apartmen	ts A-H		X			Stud/Jo	100000000000000000000000000000000000000			500 LF	X			
Apartmen	to A LI		X		Re	silient F	loor Co	overings		02 SF	X			-
Apartmen	IS A-II								Docist					
				LIDED W	aste	Cubic \	Yarde	Nome		rod I and	311			
Name of Registered Was			H	IJDEP W lauler ID 033034	No.	of Was		Minerv		red Landf	ill			
Name of Registered Was GL Group, Inc City, State			H	lauler ID	No.	of Was TBD	te	Minerv City, Sta	a te		111			
Name of Registered Was GL Group, Inc City, State Bloomingdale, NJ Completed by		Title	H	lauler ID	No.	of Was TBD Disposa TBD	te	Minerv	a te sburg,	ОН	oate			