CHECK # 991

Date of Notification	3-9-12				lam	e o	f Bu	uilding	Owner / Op	perat		E	W G	1	4.5		
Agencies Notified		eation						ress	ion Corp.	111	JI B W		V 15	All			
☐ EPA	Type Nounc	alion						ess ors W	lav	11	7)		H		(A)		
☐ DEP		ıl						& Zip (Ш	U MA	R 142	012	 			-
□ DOL	☐ Ame	nded						NJ 08				. 1 7 L	الم الم	and I	er.		
□ DOH		rgency		7333				ontact		1	i			Telepl	none	Num	ber
☐ DCA	☐ Cano	cellation		C	-	21-11-11-11		eman		1		stos comin	il is				
Name of Facility 1871	Ab	1 : T 1 : F		(0)		CI	LIT	Y INF	ORMATIC			61-6 (* 0#11)	- Mariatria de la companya del companya del companya de la company		1	1,025	
Name of Facility Will NJTA Bridge Cro		ent is Taking F	race	(3))				Type of	Faci	ility (4) (K-12)	Proceedings of the Proceedings of the Contraction o	or Some Say	794 ; .	Total Pro-		
Street Address	sallig		-	_			_				pter 8 (Oth	or than K	12)	and the state of the state of	j.		
23029 Columbus	Road										.e. private			nas ho	mae	etc)	
									Square			of Floors	olal ballal	Bldg. A		-	- 355
City (5)		County (6)		Cou	inty	Co	de	(7)		NA		NA		NA	90		
Columbus		Burlington								110000000	(Prior if be		ished)				
	0								Bridge		•						
Name of Monitoring	Firm Hired b	y Building Ow	ner (8)		F	450	CM No			atement Co						
Street Address				-	1 112				Street A		ic Abaten	nent, LLC					
Oli cot / lauross	State & Zip Code								PO Bo								
City, State & Zip Co	de									10 U.S. 14 U.S. 17	Zip Code						
	State & Zip Code It Manager for Monitoring Firm Iuled Start Date (10) Scheduled Control In Scheduled Control Scheduled Control Scheduled Control Scheduled Control Scheduled Control Abatement Performed Outside of Nor										, NJ 0800	3		resident (SCO)			
Project Manager for	ct Manager for Monitoring Firm duled Start Date (10) Scheduled Co						uml	ber	Telepho				License				
Scheduled Start Dat	ct Manager for Monitoring Firm duled Start Date (10) Scheduled C 12 Dancy Status During Abatement (Check Facility Closed/Vacated During Entire							1	609-56		HA Monito	-	<u> </u>	011	14		
3-19-12	.6 (10)	ocheduled Co		30-		ile ((11,	,	EMSL								
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									107 Ha		Control of the Contro						
	duled Start Date (10) 12 Dancy Status During Abatement (Check Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Describe: Facility Occupied During Abatement						m to	o 3pm	The state of the s		Zip Code						
	inied During	Abatement							vvestm	ont,	NJ 0810	8					
	ancy Status During Abatement (Check Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Describe:									-			_				
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≥3 sf or ≥3 lf					Rer	nov	atic	on				ni-Enclosur					
≥160 sf ≥260) If		\boxtimes		Der	nol	itio	n			-	ve Bag Pr					
												n-Exempte					
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	erial (ACM)	9	1	Sol	lely b	by			Materi				Specify F or LF)	_		Щ	m
	E ABATED		2630		enan dial S		20,000	, A	(i.e., therr					Remova	Repair	Encapsulate	Enclsoure
in	Facility (13)				(12)	500000		i	nsulation, s or other mi					lova	pair	sula	Sour
	(13)		Yes		No	N	/A		or other mi	SCEII	aneous			=		ate	e)
NJTA Bridge						D		Conc	luit transi	te pi	ipe	1500	I.f.		\Box	\Box	П
				Ц		L											
						L			0 1: 1/		1						
Name of Registered	Waste Haule	er							Cubic Yard of Waste	S	Name of	Registered	Landfill				
Freehold Cartage					110	uic	1 12	7 140.	OI VVasic		G.R.O.W	/.S.					
City, State			- 20		1		-		Disposal D	ate	City, State						
Freehold, NJ									4-3-12		Morrisvi						
Completed By (Print	or Type)				Titl	e			Signature	-		,		Date			-
Theodore S. Budz					10000000	en.	Mo		-igilatai c					3-9-1	2		
							(

Date of Notification (1)	7 12 .	~		Name o	of Buildir	g Owner/Operator	(2)			111	111	-	7
	3-12-1	<u>L</u>			F	-J Be	alty. L	44日11	2012				1
Agency Notified	Type Notification	- 4,4	1.6		Address				20:2	Promote	1	4	
□ EPA	™initial					1 Route				w 15		3	
O DEP	Amended Amendment #			City, St	ate, Zip	code code	Al	T 0-	7727		1		1
DOL	□ Emergency (inclu	ding	-		ran	mingalal	The second secon		121		1		4
⊅ DOH	justification)	_						l elephone N	umber			J.	
DCA	☐ Cancellation			Jar		ten Ili	105	1			dista		
				FACI	JTY INF	ORMATION						107	
Name of Facility Where	Abatement is Taking P	lace (3)					Type of Facility	(4)					j
Globa	Printin	5 6	190	ا ۵٬۱۸	men	, -	☐ School (K-12						
Street Address		J	U	v			Subchapter 8 Other (i.e. pr	3 (Other than K	-12) ercial building	ns.			
1315 R	oute 34	Sou	th				homes, etc.))		g•,			
City (5)							Square Feet	# of Floors	Bldg.				
Farmin	gdale 1	VJ	(777	77			1	5	0	-t -	• *****	
County (6)	J			County	Code (7) (STATE USE	Current Use (P	rior if being der	molished)	10-200 F			200
Monno	ath			ONLY)									
Name of Monitoring Firm	Hired by Building Ow	ner /	ASCM	No.			nent Contractor (
	thoologies			NA		I EPO	Tech	nologie	5, Ir	1			
Street Address	7.55					Street Address		J					
P.O. Box	337						P.O. Be	x 337		200000		220-2	
						City, State, Zip (Code						
New Egy	PT NJ	280	33			Nea	Egypt	N.J	082	33			
Draiget Manager for Mor	ntonna Film	1 16	iehiloi	ne No.		Francisco Company							
Steve Sch	enkere	60	9 75	58-3	365	609-758			0039	Y			
Start Date (10)	Scheduled	Completi		te (11)		Name of OSHA	000000000000000000000000000000000000000						
3-22-12	3-3	1-1	2			EPC	- Techn	ologies	In.	_			_
Occupancy Status Durin	g Abatement (Check o	nly one)				Street Address		V					
*Facility Closed/Vacate	ed During Entire Period	of Abate	ement			P.C	Code	33 t					_
☐ Abatement Performed	Outside of Normal Fa	cility Hou	urs			City, State, Zip C	Code	NIT	OUE	2 :	,		
☐ Other ~ Describe:						New	Egypt	142	085	$\mathcal{S}_{\mathcal{S}}$)		_
Scope of Work (Check a	il that apply)					D Full	Containment with	Negative Pres	ssure				
□ ≥ 3 sf or ≥ 3 lf				Reno		☐ Mini-	Enclosure						
>2 ≥ 160 sf or ≥ 260 lf				☐ Dem	olition		ebag Procedure Exempted (*) an	d Non-Friable	Procedure				
		Т.				4 11011	Exempled () di		10000010	A	bate	emei	nt
	1 0	1	Locati Iormal	35						-	Ту	ре	_
Location			d Sole		2	Description	of	Amo	unt			m	
Asbestos-Containin	g Material (ACM)	1	ntenar	90000000		stos Containing M		(Spec		Re	R	nca	Enclosure
TO BE A		10	ustodi Staff?	25111	(1.0	surfacing, VA7	Γ, or	SFor		Removal	Repair	psu	SOS
(13	77.10		(12)			other miscellan	eous)			la la	7	ncapsulate	all
		Yes	No	N/A									
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Warehouse		1	X	-	rip	e Insula	tien	300		1	+		_
		1		<u> </u>	-					-	-	-	
										+-	-	-	-
								1611		ل	<u></u>	L	L
Name of Registered Was	ste Hauler			Vaste H	auler	Cubic Yards of Waste	A STATE OF THE PARTY OF THE PAR	stered Landfill		,			
EPC Tech		ID I	NO. 1	700	20	12	Waste	- Monk	gemen	+			
CPC recit	indio Jie 3			100	<i></i>	Disposal Date	City, State						-
City, State						4. 2-12	Monni	will.	PA				
NE NJ							THOWA	Julie	Date		3 (2005)		-
Steve Schen	Va. Title Pos	esid	11	<u></u>		Signature S	ere) Sch	e he	3	1.3	-	i D	San San
Steve Schen					netos li-	ensure exempled	activities			. 0	`		-
ASR-41	* Do no	I use the	is form	I TOT ast	Jesius III	censure exempted	delitiles.						

pa0 14.367318 0

State of NJ Notification of Asbestos Abatement

(Pursuant to NJAC 8:60-7 and 12:120-7) Paragon Job#

	ident		2.3	7	-12		03/12/2	2012			
Completed by (Print or Type) Title	L		Signature		Tunytown, PA		Date				
City. State Circton, NJ 07014		sposal D FBD	ate		City, State Tullytown, PA						
Paragon Contracting, Inc.	22161	3	0 cyds		Tullytown/GROWS						
Registered Waste Hauler	NJDEP Hauler ID#	10	ubic Yards of V	Vaste	Name of Registered Lar	ndfill		Ш		Ш	
											12
Library			Windows			214 EA		M			
material to be abated in facility (13)	(12) es No	N/A	material (sbestos-containing	(Specify S LF)	SF or	m o v e	p a i r	c a p	c L
	cation normally use					Amount		R	R e	E n	E
	sf or ≥260 lf				0.7 (1.10)	Non-Exem					edure
F ⁻⁵	ovation			Пь	ull Containment w/negati	ve pressure	Gloveb	ag pr	nced	ıre	
Other-Describe: Facility Occupied Score of Work (check all that apply)	During Exterior Aba	tement		<u>- 1</u>	Clifton, NJ 07014						
Abatement performed outside of no	rmal facility hours-			_							
Facility closed/vacated during entire		ent.			590 River Rd. City, State, Zip Code						
03 +4/2012 (Characteristics) (Occurrancy Status During Abatement (Characteristics) (06/30/2012 eck only one)			_	Street Address						
Collection of the Architecture of the Collection		Date (1	1)		Paragon Contracting	g, Inc.					
Jay Murray Scheriuled Start Date (10)	856- Sched. Completion	-616-95	1.77.00		Name of OSHA Monitor		1 007.10				
Project Manager for Monitoring Firm		e Numb			Telephone Number (973) 614-1600		License 00748	Numl	per		
Pennsauken, NJ 08109					Clifton, NJ 07014		T:				
City. State, Zip Code					City, State, Zip Code						
5434 King Ave. Suite 101					590 River Rd.						
Environmental Design, Inc. Street Address			93	=	Paragon Contracting Street Address	z, mc.			-		
	Owner (6)		95								
Fiorham Park Name of Monitoring Firm Hired by Bldg.	Morris		ASCM No.		Name of Abatement Cor	Library		-			-
	7000			430000000000000000000000000000000000000	te use only)	Current Use (P	rior if being	g den	nolish	ed)	
City (5)	County (6)			Cou			03	S	50/		ge
145 Park Ave.							/Homes, et # of Floor		B	dg. A	nge.
Street Address						CONTROL DE LA CO	apter 8 (O (Private/Co			-12)	
FDU - Madison Campus Library a	aka Orangerie I	ibrary				=	ol (K - 12)	4 h a a 4	h = = 10	10	
Name of facility where abatement is taki	ng place (3)				Т	ype of Facility					
		FAC	ILITY INFORM	ATION				_			
DCA Cancellation	Dick Frick			21K=255K050	100 N 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		منسست				
DOH Emergency (inclu justification)	Name of Conta	Total discountries			William Control to Graphy and	Telephor	ne Number				
Mendment # 01	Hackensac		7601		Folia I	EXCING					
DEP Amendment	10 Woodbr		ve.		1	: 1:015-164 &	1	****			
EPA Initial	Street Address	Ways 60			MAIL WAIL	1 4 ZUIZ					
Agencies Notified Type Notification			n University	(FDU		1 2019					
Date of Notification (1)	Name of Build	ing Own	er/Operator (2))							

State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7)

Paragon Job#

		I I Ma	mo of Build	na Owne	r/Operator (2	2)			1-3				
Date of Notification	(1)												
0 2 / 2 9 Agencies Notified	Type Notificatio				University	(FDU)	, , , ,				-	-	_
EPA EPA	Type Notification		eet Address			4 4							
☑ DEP	Initial	11 -	0 Woodbi		e		<u> </u>	9019	+				
	Amendm		y, State, Zip	Code		100							
⊠ por	Amendment# ~		Hackensac		601		A service of the serv	LTelephor	ne Number		-		
□ DOH	Emergency (i justification)	Nar	ne of Conta	ict		- Brea		Telephor	le Mulliper				
□ DCA	Cancellat	tion	Dick Frick	(Liver		100					
				FACII	ITY INFOR	MATION	N 31 - 34						
Name of facility wi	here abatement is	taking place	e (3)					Type of Facility	(4) ol (K - 12)				
50.00									napter 8 (Ot	harth	an K 1	2)	
	Campus Librai	ry a.k.a. ()rangerie	Library					(Private/Co			<u>~)</u>	
Street Address								Bldgs	/Homes, et	S			
145 Park Ave.								Square Feet	# of Floors			g. Ag	е
City (5)		Count	y (6)			1	ty Code (7)	25,000 sf	03		50/9	_	
, ,,						(State	use only)	Current Use (F	Prior if being	dem	olished	i)	
Florham Park		Mon						Library					
Name of Monitorin	ng Firm Hired by B	Ildg. Owner	(8)		ASCM No.		Name of Abatement						
Environmental	Design, Inc.		Wayne Trailing		95		Paragon Contrac	ting, Inc.					
Street Address							Street Address						
5434 King Ave	e. Suite 101						590 River Rd.						
City, State, Zip Coo							City, State, Zip Code						
Pennsauken, N	IJ 08109						Clifton, NJ 070	14	License	Alumb	or		
Project Manager fo	or Monitoring Firm		Pho	ne Numb	er		Telephone Number		00748	Numb	eı		
Jay Murray			856	5-616-95	16		(973) 614-1600 Name of OSHA Mon		00740				
Scheduled Start D	ate (10)	Sched.	Completion	Date (1)		Paragon Contrac						
		03/30	/2012				Street Address	oting, me.					
03 14/2012 Occupancy Status	During Abatemen						590 River Rd.						
	ed/vacated during			nent.		1	City, State, Zip Code						
Abatement p	performed outside	of normal f	acility hours	5-									
Other-Desci	ribe: Facility Occ	upied During	Abatement			_	Clifton, NJ 070	14					
	check all that apply										150		
Demolition	\boxtimes	Renovatio	n			⊠ F	ull Containment w/ne		Glove				
>3 sf or >3	ıf 🔯	≥160 sf or 3	>260 If				lini-enclosure	☐ Non-Exe	empted (")	Non-f	riable	proce	dure
			normally u	sed solel	y					R	R	E n	E
Location of asbestos-co			nance/cust	odial	Descri	iption of as	sbestos-containing	Amount (Specify		m	p	C	n
material to I	be .	staff(12)		1	materi	al (ACM)	15	LF)	31 01	0	a	a	L
abated in fa	icility (13)	Yes	No	N/A						е	1	р	
0 17 0	ist Banding Room		T X	 	Spray Fi	reproofir	ıg	6,810 SF			Ш	\sqsubseteq	빝
Orangerie Library Qui			T X		Pipe Inst			380 LF		X			빝
Changene Canary On	or remains resom											Ц	닏
		F		ESCUTE OF STREET	1				2000				14
					1								
Registered Waste	Hauler	NJDE	P Hauler II		ubic Yards	of Waste	Name of Registere	d Landfill		-	ACCOUNT OF SEC		
Paragon Contra	acting, Inc.	221	61		60 cyds		Tullytown/GRO	JWS				-	
City. State				Disposal	Date		City, State						
Clifton, NJ 07				TBD	Signature	_	Tulkytown, PA		Date	_			
Completed by (Pr		Title			Signature	1	L		02/29	/2012			
Goran Lazevs	KI	Presiden	1		-1				1				

MR-53-, A.S. RD: 27 BHYLL-	TIFICATIO (Pursua	n of A n to NJ	New Jersey SBESTOS ABAT AC 8:50 and 12:1	11-11-5		7.0	11/4	Files
Date of Notification (1) 3-10-12				1117011	Constant of			
Agency Notified Depa D		larma est Co	ZID Code ·	Type of Facility (4	Telephono Number			0.3
Name of Facility Where Abatement is Taking Platfows E Street Address / DIS HAINSPOR	100 (T) FM,	laune	el Rd	U School (K-12) U Subchapter 8 (U Other (Le. privalents) Square Fest 27/07	Other than K-12) the & commercial build of Floors Bid	g. Age	72	
County (6) Applies port		ONLY)	de (7) (STATE USE	Commit Usa (Pris	r if being demoleched)	<u>.</u>		-
Name of Monitoring Firm Hired by Bulking Com (6) Street Address	er Asolit	No.	Añu i J Strost Address	12 Bushi	ten Ave		. ·	
- Start User (10) - 17 3-	Telepho Completion Da 30 -12	te (11) :	Felephone No.	24 0971 A Monitor 51	OFOTS License No. O1070 TME.			
Occupancy Status During Abstoment (Chack of Pacifity Closed/Vacated During Entire Period Absternant Performed Outside of Normal F	miy che) .	, :	City, State, Z	• •				
☐ Other — Describe: Scope of Work (Check all that spply) ☐ ≥ 3 of or ≥ 3 if ☐ ≥ 160 of or ≥ 280 if	-	13 Roman	.rPi M	of Containment with the Enclosure through Procedure ton-Exempted (7) and	Negative Presaura	Te At	eton Typ	nent
Location of Asbasios-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Loc Norm Used So Maintal Cost Sta (1)	elly dely by encel dial	Descript Asbestos Containin (i.e., thermal systematically, other misce	g Material (VCNV) oms insulation.	Amount (Specify SF or LF)	Removal	Repair .	Enclosure
Kitchen	Yes N	NIA (Floor T	16	220 g			1
Name of Registered Waste Hauler T Robinson Wast City, State Bellmawn		P Wasta H		WH	stored Landilli of Pa y town Pa	3-10-	<u> —</u>	<u></u>

* Do not use this form for appestos ficensure examined activities.

MO# 1980782644	14	(P	urs	uant	to NJA	C 8:60 an	d 12:	:120)	R B II WI	EL		1	164
Date of Notification (1)			Nam	e of Build	ing Owner/C	Operato	or (2)			-1-	-	
03/09/2012				Kare	n McGu	auer							
Agency Notified	Type Notification		SEAT		et Addres			M	AH 1 4 2012		111	_	
□ EPA				12 St	ussex A	venue			LUIZ	****	. 2		
☐ DEP	☐ Amended			City,	State, Zip	Code		Estate of		1	į		_
⊠ DOL	Amendment #	dudina		Chatl	ham, NJ	07928			~ 12	The second second	2000		
⊠ DOH	justification)	adding		Nam	e of Cont	act		Little english again	Telephone Nur	mber			
□ DCA	☐ Cancellation	WEST 1		Kare	n McGu	auer	6						
				FA	CILITY IN	FORMATIO	N						202 (20)
Name of Facility Whe	ere Abatement is Taking	Place (3)					0100	Type of Facil	ity (4)				-
Private home								☐ School (K-	1 2)				
Street Address								☐ Subchapte	r 8 (Other than K-1 2	2)			
12 Sussex Avenue									private & commercia	al buildir	ngs,		
City (5)							_	homes, et Square Feet		Biag.	Ane		-
Chatham, NJ 0792	8									J.og.	9 .		
County (6)				Coun	ty Code (7) (STATE U	JSE	Current Use (Prior if being demot	(ished)		-	_
Momia				ONLY					boing defilor	.oneu)			
Morris	les Ulas II D		SCN	I No.	_	Name of	Abater	ment Contractor	(9)			_	
Name of Monitoring F	irm Hired by Building O	wner(8)						mont oontadolor	(0)				
Street Address						Gr Tech Street Ad							
						576 Vall		1 #292					
City, State, Zip Code		-				City, Stat		SECURIORISMO.			·		-
						Wayne,							
Project Manager for N	Monitoring Firm	Tele	epho	ne No.	-388	Telephon		470	License No.				-
	100					973-638-			01127				
Start Date (10)	Scheduled	d Completio	n Da	te (11))	Name of			01127		-		-
03/20/2012	03/21/20	12				Envirovi	sion (Consultants,II	nc.				
Occupancy Status Du	ring Abatement (Check					Street Ad		onsultants, ii	10				
■ Facility Closed/Vac	ated During Entire Peri	ad of Abata	mon			20-21 W	agara	w Road, Bldg	# 34A				
☐ Abatement Perform	ned Outside of Normal F	acility Hour	s			City, State			5 11 5 11 1		200126		
Other - Describe:						Fair Law	n, NJ	07410					
Scope of Work (Check	(all that apply)												
				⊠ Rer	novation		Full (Containment wit Enclosure	h Negative Pressure	э			
☐ ≥160 sf or >260 lf				☐ Der	molition	H	Glove	ebag Procedure					
			_				Non-	Exempted (*) ar	nd Non-Friable Proc	edure	A L		
		100	ocati							177	Ab	ate: Typ	
	ation of	Used		250		Descr	iption (of				Ť	T
	ning Material (ACM) ABATED	Main		STEEL STEEL		stos Contain ., thermal sy		aterial (ACM)	Amount		71	Ī	n s
	acility	1	stodi taff?		(1.6	surfacin			(Specify SF or LF)		em	D	2
(13)		(12)			other mis	cellane	eous)	i seconomico.		Removal	Renair	ncansiliat
		Yes	22								=	, [5
Basement		No	N/A	Dust in				20.00		-	+	_	
Dascincii			X	Duct II	sulation	32		20 SF	2	X	+	-	
			1000									-	1
												1	
Name of Designation	foots the t				1								
Name of Registered W	aste nauter	ID No		/aste F	lauler	Cubic Yard Waste	ds of	Name of Reg	stered Landfill				all.
Gr Tech LLC						714016		TDDD					
City, State		0033	/83			Disposal D	ate	T.R.R.F. Inc				_	_
Vayne, NJ 07470						posui D	-		14				
Completed by	Title					Signature	1	Tullytown, F		Date		_	
I.Jevtic	Owner					S.g.rature	1/2 /	2 /			112		
ASB-41		ot use this	form	for as	bestos lic	ensure exem	inted a	ectivities	0.	3/09/20	112		

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

Date of Notification		0 .	Na	me o	f Bu	ildin	g Owne	r/Operato	or (2)	a E T W	7 6	35504	57	. 17
0 3 1/10							itute of	Technolo	ogy		/ IS	1	111	
Agencies Notified	Type Notifi	cation	SE	reet	BBA .	ress			HEW					
(X) DEP	[X][nitia Notifi	l cation	32 C1	23 D	r. Ma	artin L	uther h	King, Jr. B	oulevard M	AB. 1_4_20	12	i i		_
(X) DOL	[]Amende		llN	ewar	rk N	J 071	02					and the same of	and the same	
(X) DOH	Notifi		11			ntact			Tele	phone Numbe	r		1	-
DX1DCA	[]Cancel	lation	11	iobo	al Th				the vanishment	Thursdan Wa		storic Policials		4
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Name of Facility W	here Abateme	nt is Ta	king				NFORM	ATION	Type of Facili	ty (4)			- soften	est.
New Jersey Institute	of Technolog	gy - Cent	ral K	ing E	Build	ing			[X]School []Subche []Other cial \(\) Square Feet	pter 8 (Oth	rate	CO1	nmer.	
345-361 Dr. Martin L	uther King Jr	. Bouleva	ard							# of Floors	BI	100		
City (5)		County				Cou	inty Co	ode (7) SE ONLY)	50,000 Current Use (1	Prior if he	ng d	45 emol		<u>a</u>
Newark, NJ 07102		Essex				(3)	MIE U	SE UNLI)	School	1202 22 50.		00		-,
Name of Monitoring Owner (8)	Firm Hired			ASC	M No	o.	Name	of Abate	ment Contractor	(9)				
Health & Safety Sen	vices, Inc .			000	0117			Strong B	uilders, Inc.					
318 12th Street	ode						180 City	Sargeant State.	Avenue Zip Code					
Hammonton, NJ 080	Firm [Teler	none	e Nur	mber	Clifto	on, NJ 070	013-1935	Lice	nse N	umbe	r		
Jim Proctor			309-7	704-8	3850)		614-0377		0080	7			
0 3 / 1 2 / Month / Day / Occupancy Status D									uilders, Inc.					
Occupancy Status D	uring Abatem	ment (Che	eck c	only	one)	11	et Addres						
of Abatement []Abatement Fer Hours - Descr	formed Outsi						City	Sargeant . State.	Avenue Zip Code			-		
[]Other - Descr							Clift	on, NJ 07	013					
Scope of Work (Che []Demolit []>3 sf o [X]>160 sf	ion	apply)	įΧ	Rene	ovat	ion		[]Min: []Glov	l Containment w i-Enclosure vebag Procedure -Friable Proced		e Pre	essu	e	•
			Γ.	Is		T					Aba	eme	it Ty	/pe
Asbestos- Materia TO BE in Fac	cion of Containing 11 (ACM) ABATED 111ty		No:	rmal Used Olel Mai nanc stod	ly y n- e/ ial	i	Asbe Ma (i.e., nsulat	escriptic stos-Con terial (thermal ion. sur other mis	taining ACM)	Amount (Specify SF or LF)	R E M O V A L	REPAIR	NCAPSUL	N CI. OSURE
Rooftop Bathrooms			162	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	14/1		ter Wa	lls & Ceili	ngs	700 SF	IX			
Rooftop Bathrooms				父	+	-	Insula			80 LF	X			
													_	_
Name of Registered	Waste Haul	er			Was r ID	ite No.	Cubic of Wa	Yards aste	Name of Regis	tered Landi	di		l	
Four Strong Builder	rs, Inc.		1	2609	9		30		G.R.O.W.S., I	nc.			020 PAN IN I	ac mys
City. State							Dispo	osal Date	City. State	15				
Clifton, NJ	,						TBD		Tullytown, PA					
Completed By (Prin	nt or Type)	Title					-	Signatur	e	-> T	מ	ate		
Nick Zivkovic		Preside	nt					illen	6 Zieck	ec,	3	/8/1	2	

IVIO# 1980/826455		٧.				o.00 a.						1	S
Date of Notification (1)				Nam	e of Build	ing Owner/	Operato	or (2)				-	
03/09/2012				Larry	Lerner			M M	AR 1 4 20	12	U		
Agency Notified	Type Notification				et Address			1	111 14 70	14			
□ EPA	⊠ Initial			176 (Grove Te	errace				1			
□ DEP	☐ Amended				State, Zip			1 AS.	ous us Cowlede	Á		1	
⊠ DOL	Amendment #					J 07039			TICENSING	-			
⊠ DOH	☐ Emergency (inclu	ding		COLUMN TAXABLE	e of Conta	AND DESCRIPTION OF THE PARTY OF		facility ones of	Telephone N	umber	A ACT CONTRACTOR		â
□ DCA	justification) □ Cancellation										TOTAL COLUMN		Ĭ,
	_ Canconation				Lerner				-		197,979	ar, .	<i>I</i>
Name of Facility 185				FAC	JILITY IN	FORMATIC)N						
Name of Facility Where	Abatement is Taking F	lace (3)						Type of Facili	ty (4)				
Private home					SEFERICWO-			☐ School (K-	2)				
Street Address									r 8 (Other than K-				
176 Grove Terrace								homes, etc	private & commer	cial build	dings,		
City (5)	***************************************							Square Feet	THE PARTY OF THE P	Bld	lg Age	-	999
Livingston, NJ 0703	n										3 . 3		
County (6)	7			Coup	tu Codo /	7) (STATE	UCE	Current Use /	D. C. St. St. St.	il	No. To a law or		_
				ONLY		(STATE	USE	Current ose (Prior if being dem	olisnea)			
Essex													
Name of Monitoring Firm	Hired by Building Ow	ner(8)	ASCN	l No.		Name of	Abater	ment Contractor	(9)				
						Gr Tech	LLC						
Street Address						Street A	ddress				Sub-10		
						576 Val	lev Ro	1 #283					
City, State, Zip Code						City, Sta					-	_	
						Wayne,							
Project Manager for Mor	nitoring Firm	Tel	epho	ne No.		Telephor		470	License No.			-	
						973-638		,					
Start Date (10)	Scheduled	Completic	n Da	to (11)		Name of			01127				
03/19/2012			,,, Ou	(()		\$40000 DE 1930							
Occupancy Status Durin	03/20/2012					Street Ac		Consultants, In	nc				
								D 1 D11					
☑ Facility Closed/Vacate	ed During Entire Period	of Abate	ment					w Road, Bldg	g .# 34A				
☐ Abatement Performed ☐ Other - Describe:	Outside of Normal Fac	cility Hou	rs			City, Star	4125.000						
						Fair Lav	vn, NJ	07410					
Scope of Work (Check a	I that apply)						Full	Containment wit	h Negative Press	ure			
≥ 3 sf or >3 lf					novation			-Enclosure	ii wegalive i ress	ui e			
≥160 sf or >260 If				☐ Der	nolition	P		ebag Procedure					
							1 NOII-	-Exempted (*) ar	nd Non-Friable Pr	ocedure	TΔb	ater	ment
		100	ocati		1			20			1.00	Тур	
Location		Used	ormal Sole			Desc	ription	of					
Asbestos-Containin			tenar					aterial (ACM)	Amoun		-	Ē	n n
TO BE AS		14230	stodi		(i.e.	thermal s, . surfacir		insulation.	(Specify		Remova	Renair	ncansulat
(13)	*		Staff? (12)			other mis		12000000	SF or LF)	No n	200	6 6
			(,-,					4			<u>a</u> :	, g	1
		Yes	No	N/A									
Basement				X	Pipe in	sulation			140 LF		x		
												+	
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Jame of Registered Wes	to Haules	L	ED 14			~		T				L	
Name of Registered Was	ie naulef	ID N		laste H	auier	Cubic Yar Waste	as of	Name of Reg	stered Landfill				
ir Tech LLC						,,,,,,,,							
Dity, State		0033	/85			Disposal I	Tate	T.R.R.F. Inc		-			
						Dispusal I	Jaie	City, State					
Vayne, NJ 07470	TAL					0:	-1	Tullytown, F	'A				
Completed by	Title					Signature	4%	.l- 11		Date			
.Jevtic	Owner						1100	Vic V	mad	03/09/	2012		

State of New Jersey APPROVED! TOM VOORHEES, NOTPOL NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to N.J.A.C. 8:60 and 12:120) Ck# 224/

Date of Notification	(1) 3/8/12							wner / Operator	(2)		WE		. ;		
Agencies Notified EPA DEP DOL DOH	Type Notifica		14 Ci	ty, S rent	Protestate on,	dress ospec e & Zi NJ (Conta	р Со)863	de		MAR 1.4	2012	elephon	e Nu	mbe	er
DCA		ellation	1 1000					ollins	Copies	ETT SON	TALLY III				
With the second				FAC	CIL	ITY II	NFC	RMATION	Pariso (1) - 1 mg (2) (2) and				40 W		
Name of Facility W Stokes Elementa		ent is Taking Pla	ace (3)					Type of Facilit School (K	<-12) N	NON SUB-CH		a a sortic	5		
Street Address										Other than K- ite & commerc		ıs home	s et	c.)	
915 Parkside Av	е							Square Feet		# of Floors		ldg. Age		/	
City (5)		County (6)	Cou	nty C	Code	e (7)	-	70,000		3		(+06		
Trenton		Mercer				** **		Current Úse (being demol	ished)				
Name of Monitoring		y Building Own	er (8)		A	SCM	No.	Name of Abat Bristol Envi			9)				
Street Address							0,70,200	Street Addres 1123 Beave		ot					
120 North Warre City, State & Zip Co Trenton, NJ 080	ode						37773	City, State & Z	Zip Co	de		· · · · · · · · · · · · · · · · · · ·			
Project Manager fo			Teleph					Telephone Nu	umber		License N	umber			
Rick Beach	-1- (10)	Scheduled Com	609-3		_			(215)788-60 Name of OSH		nitor	00509				-
Scheduled Start Da 3/8/12		Scrieduled Con	3/9/1		(11)		Bristol Envi							
Occupancy Status Facility Clo	During Abater sed/Vacated	ment (Check on During Entire Pe	nly one) eriod o) f Aba	aten	nent	1511-2311	Street Addres 1123 Beave		et					
Describe:	5:00 PM to		al Hou	rs – 7	7an	n to 3	pm	City, State & Z Bristol, PA	The state of the s						
Scope of Work (Ch	cupied During			-		****									_
Scope of Work (Cr	icon all triat of	SP197	200.00							Full Contains		egative	Pres	sure	
≥3 sf or ≥3			\boxtimes			ation				Mini-Enclosu Glove Bag P					
≥160 sf ≥2	60 If			Den	noli	tion				Non-Exempt		-Friable	Prod	edu	re
1	ocation of		Is L	ocati	ion			Description	n of		Amount	Aba			
Asber Ma TO	stos-Containin aterial (ACM) BE ABATED	g	Norm So Mainte	lely b enan	ce o	or	ir	Asbestos-Con Material (A (i.e., thermal synsulation, surface	CM) ystems	s	(Specify SF or LF)	Remova	Repair	Encapsulate	Encisoure
	in Facility (13)			(12) No	N/			or other miscella				val	#	ulate	ure
RM B-5			\Box		T	1		VAT & Ma	stic		25 SF				
RM B-5				X	E			Pipe Insula	ation		5 LF				
												ᆜᅛᅴ	밁	님	H
												᠆ᡰᡰ	H	井	H
												ᅢ	H	片	H
Name of Registere	me of Registered Waste Hauler						lo.	Cubic Yards of Waste		e of Registere					
Bristol Environ	mental Inc			20	990	0		1 Cu Yd		OWS Landfi	1				
City, State Bristol, PA								Disposal Date 3/9/12		State risville, PA		TE			
Completed By (Pri				75503474	oje	ct ager		Signature Lino P	izza	zoni		3/8/1	2		

REMEMBER - MAIL IN HARD CORMication of Asbestos Absterment (Pursuantito NJAC 8:60-7 and 12:120-7) 2012-61 hmergesy B & G proj. #: Non Sub 8 Name of Building Owner/Operator (2) Date of Notification (1) Clara Maass Medical Center 10 3 1/1 12 1/11 2 Type Notification Agencies Notified Street Address T EPA 1 Clara Maass Drive Initial AVER APPROVED TIDEP City. State. Zip Code MAR 1 4 2012 Amendment DÓT DÓT Belleville, NJ 07109-Telephone Number Name of Contact DOH X ☐ Cancollation Rachel Byrnes ☐ DCA FACILITY INFORMATION Type of Facility (4) School (K - 12) Name of facility where abatement is taking place (3) Subchapter 8 (Other than K-12) (lara Maass Medical Center (Non Sub 8) Other (Private/Commercial Bidge./Hornes, etc. Street Address Square Feet | # of Floors Bldg Age 1 Clara Mansa Drive County Code (7) County (6) Current Use (Prior if being demolished) City (5) (State use only) hospital non Sub 8 Belleville, NJ 07109 Essex Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Bldg Downer (6) ASCM No. B & G Restoration, Inc. Street Address Street Address 105 Ryerson Road City, State, Zip Code City, State, Zip Codo Lincoln Park, NJ 07035 Licenze Number clephone Number Phone Number Project Manager for Monitoring Firm 0378 973-696-6869 Name of OSHA Monitor School Completion Date (11) Scheduled Start Date (10) B & G Restoration, Inc. Street Address 3/14/2012 3/13/2012 105 Ryerson Road Occupancy Status During Abatement (Check only one) City, State, Zip Code Facility closed/vacated during entire period of abatement. Abatement performed outside of normal facility hours-Lincoln Park, NJ 07035 Describe: Other-Describe: Scope of Work (check all that apply) Glovebag procedure Full Containment winegative pressure ☑ Kenovation Demolition Non-friable procedure Mini-enclosure 160 sf or =260 if 3 sf or ≥3 lf
 2 sf or ≥3 lf E is location normally used solely 4 8 n Amount Location of by maintenance/custodial m Description of asbestos-containing p (Specify SF or LF) G gniniatroo catagodes 0 staff(12) 2 3 material (ACM) muterial to be abated in facility (13) N/A Yes Mo M 8 lf pipe insulation Plumber's Mechanical Room Name of Registered Landill Cubic Yards of Wests NUDEP Hauler IDS Tullytown Resource & Recovery Center Registered Wasto Haular 1/2 yard 19563 B&G Restoration, Inc. City. State Disposal Date City State Tullytown, PA 3/14/2012 Lincoln Park, NJ 07035 Date Signature Completed by (Print or Type) 3/12/2012 Title Treasurer Gordana Luna

P990229609

State of NJ

P.1/1

B& G proj. # 2012 61 Emergency

State of NJ Notification of Asbestos Abatement

(Pursuant to NJAC 8:60-7 and 12:120-7) Check # 5124 Non Sub 8

Date of Notification (1)	Name o	f Building Own	ner/Operator (2)			APPROVED		7	
0 3 1/1 2 / 1 2	Clara	Maass Medi		5 (5 E A V/	IS No Depth o	Health & Seni		ces	
Agencies Notified Type Notifical EPA Initial	110000	ddress ra Maass Dr	ive	# 	3/18	(signature)	3:04	TA	9_
☐ 0EP	11	ste, Zip Code	140	MAH 1 4 2012	I lead of	Time;			_
DOL Amend	mont	ville, NJ 07	109	LVIL		No. 1	-	_	
DOH	1	Contact	4	A THE STREET STREET	Telephone	Number			
☐ DCA ☐ Cancal	Raci	nel Byrnes		LOUIS .		(*		_	_
		FAC	CILITY INFORM	IATION	teres yes				
Name of facility where abatement	is taking place (3)		\		Type of Facility (4) I (K - 12)			
Clara Maass Medical Center	(Non Sub 8)				Subcha	apter 8 (Other t	han K-1	2)	
Street Address		*			Other (Private/Comme Homes, etc.	rcial		
1 Clara Mazss Drive				- Paul		al of Floors	Bids	g. Age	9
City (5)	County (6)			County Code (7)		· The sine does	- Attebase	•	
Belleville, NJ 07109	Essex			(State use only)	Current Use (Pr hospital non S	ub 8)OID(INC	<i>N</i>)	
Name of Monitoring Firm Hired by			ASCM No.	Name of Abatem	ent Contractor (9)			17/11/2	
				B & G Restor	ration, Inc.				
n/2 Street Address				Street Address					
2088(Unit tab				105 Ryerson	Road				
City, State, Zip Code	-			City, State, Zip Co					
Oky, Olato, 25 Ove				Lincoln Park	NJ 07035				
Project Manager for Monitoring Fin	m	Phone Num	ber	Telephone Numb		License Num	ber		
				973-696-686	The state of the s	0378			_
Scheduled Start Date (10)	ISched, Con	pletion Date (11)	Name of OSHA					
			03.59 .	B & G Resto	ration, Inc.				
3/13/2012	3/14/2012				Dand				
Occupancy Status During Abatem				105 Ryerson City, State, Zip C					-
☐ Facility closed/vecated during ☐ Abetement performed outside Describe:	g entire period of le of normal facility	hours-							
Other-Describe:				Lincoln Parl	ζ NJ 07035				
Scope of Work (check all that app	oly)								
☐ Demosition	Renovation				u/negative pressure	Glovebag p			
	≥160 st or ≥250			Mini-enclosure		I R	R	E	_
Location of	is location non				Amount	e	0	n	5
asbestos-containing material to be	staff(12)	—	Descrip	tion of asbestos-containir I (ACM)	(Specify S	SF or 0	Pa	ė a	c
absted in facility (13)	Yes !	N/A	0.0000000000000000000000000000000000000		LF)	v		р	L
Plumber's Mechanical Room		X	pipe insul	ation	8 lf	区	口		旦
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							出	ᆜ	L
							1	ᆜ	닏
							Ш	Ш	Ш
Registered Waste Hauler	NJDEP H	auler ID#	Cubic Yards o		tered Landfill Lesource & Recovery	Center			
B & G Restoration, Inc.	19563	Disposa	1/2 yard	City, State	resource of Verrokei)				-
City. State Lincoln Park, NJ 07035		3/14/			PA				
	Title		Signature	Tullytown, Gordana Le		Date			
Completed by (Print or Type)	Treasurer			Gordana Lu	no	3/12/2012			

State of NJ Notification of Asbestos Abatement

B & G proj. #: 2012-61 Emergency

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

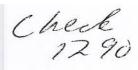
					Non	Sub	8	<u>C</u>	heck	# 5124				-
Date of Notification	1 (1)	IIN	ame of B	uildina Own	er/Operator (2)		RECE		I					
10 3 / 1 2	1/11 2			aass Medi					-					
Agencies Notified	Type Notification		reet Add		cai Cellici	-		6 0010		1				
☐ EPA	✓ Initial		1 Clara	Maass Dri	VA		MAR 1	4 ZUIZ]	and the same of th				
☐ DEP	Z Initial	C		Zip Code	· VC		4			i				
☑ DOL	☐ Amendm	A 0.00 (0.00)		lle, NJ 071	100		4 12		70	į.				
DOH		l N	ame of Co	The second name of the second	107			Tel	ephon	e Number				
_	☐ Cancella	tion	D 1 1				entities of the entity	order for the last of the last						
☐ DCA			Rachel	Byrnes							_			
				FAC	ILITY INFORM	NOLTA								
Name of facility w	here abatement is	taking pla	ice (3)					Type of Fa		(4) ol (K - 12)				
ol M M		Van Cul	0)							apter 8 (C	thar th	an K	12)	
	ledical Center (1	Non Sub	3)			_==				(Private/C			12)	
Street Address										/Homes, e				
1 Clara Maass	Drive							Square F	eet	# of Floor	s	Ble	dg. A	ge
City (5)		Cour	nty (6)			100000000000000000000000000000000000000	nty Code (7)						IV	
		-				(Sta	te use only)	hospital		rior if bein	g dem	olishe	ed)	
Belleville, NJ Name of Monitorin		Ess Elda Own			ASCM No.	-	Name of Abatemen		and the same of th	340 0				
Name of Monitorin	ng Firm Hired by t	siag. Owne	n (o)		ASCIVI NO.				- 4					
n/a						-	B & G Restorat Street Address	ion, mc.	-				-	
Street Address							105 Ryerson Ro	nad						
City, State, Zip Coo	40					_	City, State, Zip Code	The second secon			-,,			
City, State, Zip Cot	ue						Lincoln Park, 1							
Project Manager fo	or Monitorina Firm			Phone Num	ber	_	Telephone Number		-	License	Numb	er		
r roject Manager ic	, wontening i						973-696-6869			0378				
Scheduled Start Da	ata (10)	Ischer	Comple	etion Date (1	(1)	_	Name of OSHA Mo	nitor						
Scheduled Start Da	ate (10)	Scried	i. Comple	tion Date (B & G Restorat	tion, Inc.						
3/13/2012			/2012			_	Street Address							
Occupancy Status							105 Ryerson R							
Facility close	ed/vacated during performed outside	of normal	od of aba	itement. ours-			City, State, Zip Cod	е						
Describe:		Ornoma	- Comey Tre				Lincoln Park, 1	NI 07035						
Other-Descr							Lincoln Fark, I	43 07033	==					_
Scope of Work (c						П.				M 01				
Demolition	\boxtimes	Renovation	nc			200	Full Containment w/n	egative press	ure	Glove				
\times >3 sf or >3 l	f 🔲	≥160 sf or				M	Mini-enclosure			☐ Non-i	riable i	DIOCE	_	_
Location of			n normal	ly used sole				۸	ount		e	e	E n	E
asbestos-co material to b		staff(12)	silalice/C	ustodiai	 Descripti material 		asbestos-containing		ount ecify	SF or	m	p	С	n
abated in fa		Yes	No	N/A	material	(ACIVI)		LF)		v	i	a p	L
					1			8 lf			e	ń	П	\vdash
Plumber's Mech	nanical Room				pipe insula	ttion		0 11		-	+#	님	片	片
						-					++	금	片	片
			-		-	-		_			計	H	H	計
				4							H	H	片	〒
Registered Waste	Houler	TALIF	EP Haule	or ID#	Cubic Yards of	Waste	Name of Registere	ed Landfill			-1	<u> </u>	<u> Г</u>	1_
B & G Restorat			563	, ID#	1/2 yard		Tullytown Res		over	y Center				
City, State		!_		Disposal	Date		City, State					100		
Lincoln Park, 1	NJ 07035			3/14/2			Tullytown, PA							
Completed by (Pri		Title			Signature		Gordana Luna	1 1		Date 3/12/2	2012			
Gordana Luna		Treasur	er				francisco servicos			1 3/12/2	LUIZ			

Check 1290

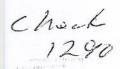
					(5)	1.15			(10 117	1 97 6	J Person	7	118	
Date of Notification			1.				Owner / Operator	(2)	State Ext	1 1/ 11-	1_			
	3/8/2012				Math						-111		7	
Agencies Notified EPA	Type Notificat	ion	5	Spinr	Addre naker	Conc	Iominiums Uni	it 525N - 3	500 Board	dwalk2				
☐ DEP	☐ Initial				State &							i i		
□ DOL	Amend				sle Ci]	1 tower	AND A SECTION		<u>)</u>	-	le	
□ DOH	Emerg				of Co				LICENS	10	lepho	ne iv	ımn	ş r
☐ DCA	☐ Cance	llation		Jack	Math	er		1- N- 1- PAR - 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1					7.	ŧ
				FAG	CILIT	Y INF	ORMATION				397		¥	
Name of Facility W	here Abatemer	nt is Taking P	lace (3	3)			Type of Facilit							
Spinnaker Cond	ominium						School (K							
Street Address								ter 8 (Other						
Unit 525N							Other (i.e						tc.)	
							Square Feet	# of F	loors	Bld	g. Age			
City (5)		County (6)	Co	unty (Code (7)	1000		1			50		
Sea Isle City		Cape May					Current Use (Prior if being	demolishe	ed)				
							Residence							
Name of Monitoring	g Firm Hired by	Building Owr	ner (8)		ASC	M No.	Name of Abat ALPHA ENV							
Street Address							Street Addres 2129 Rt 33	S						
City, State & Zip Co	ode						City, State & 2	Zip Code			_	iles elles	100	All Society
City, State & Zip Ci	oue						Hamilton, N							
Project Manager fo	r Monitoring Fi	rm	Telep	hone	Numb	er	Telephone Nu 215-295-100		Lic	cense Nur	nber 0109	1		3772
Scheduled Start Da 3/19/20	1000 CO	cheduled Cor /31/2012	mpletio	on Da	te (11)		Name of OSH EMSL Analy							NO. OF THE PARTY O
Occupancy Status	During Abatem	ent (Check o	nly one	e)		*	Street Addres	10						
	sed/Vacated D						107 Haddon							
Abatement	Performed Ou	tside of Norm	al Ho	urs –	7am to	3pm	City, State & 2							
Describe:							Westmont,	NJ 08108						
Increased .	cupied During A											-		
Scope of Work (Ch	neck all that app	oly)						⊠ Full C	ontainmen	nt with Ned	ative	Pres	sure	
☐ ≥3 sf or ≥3	If			Rer	novatio	n		Karal I	Enclosure					
	54.4.0		H		nolitio				Bag Proce	edures				
≥160 sf ≥26	50 II			DOI	riolitio.	•			Exempted a		Friable	Dro	codu	ıro
			· ·		•		Description	Comment of the Commen		nount		teme		
	ocation of			Locat	lon Used		Asbestos-Conf		20202	pecify	700	icine	,116 1	ype
	stos-Containing iterial (ACM)			olely			Material (AC			or LF)			Щ	_
	BE ABATED				ice or		(i.e., thermal sy				Remova	Re	Encapsulate	l in
	in Facility		Cust	odial	Staff?		insulation, surfac				Nou	Repair	nsc	Encisoure
	(13)			(12)	,		or other miscella	aneous)			<u>a</u>		late	Ē
Control (Mallion Allerance)	,		Yes	No	N/A						5.4			
Throughout							Spray-On Co	eiling	900sf			П	Ц	
Name of Registere	d Waste Haule	r		200000	DEP \		Cubic Yards of Waste	Name of R	_	_andfill				
ALPHA ENVIRO	NMENTAL			00	3333	0	1	Grows La	ındfill					
City, State							Disposal Date	City, State						
Hamilton, NJ								Morrisvill	le, PA					
Completed By (Prin	nt or Type)	-		Tit	le		Signature				Date			7
Rod Richardson				P			Rod Richardson				3/8/2	201	2	
	MAS.				37.76									

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Date of Notification	1.4.46.00						wner / Operator	(2)	an an at the same to a sur-		G li	1		
	3/8/2012					Carthy						1 1 1		
Agencies Notified	Type Notifica	ation	5	reet /	Addres	Sonda Conda	ominiums Unit	417N - 35	00 Board	walk		1 1 1		
⊠ EPA	Initia					Zip Co			MAN	4 2012		1		
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		rgency	N	ame (of Con	tact				Tel	ephon	e Nu	mbe	r
☑ DOH □ DCA		ellation	1966			Carthy	,		Filter					
П рох		, on a troit					RMATION	They wanted the				Marie William	_	-
	Alt	antia Takina D	laga (2)		ILIIY	INFC	Type of Facility	(4)					_	\neg
Name of Facility W	nere Abatem	ent is Taking P	lace (3)	Š			School (K-							
Spinnaker Cond	ominium					_		er 8 (Other th	han K-12)					
Street Address							Other (i.e.	private & co	ommercial	buildings,	home	s, et	c.)	
Unit 417N							Square Feet	# of FI			g. Age			
		County (6)	ICOU	nty C	ode (7	7)	1000		1			50		
City (5)			1000	iiiy O	oue (i	,	Current Use (F	Prior if being	demolishe	ed)		-		
Sea Isle City		Cape May					Residence							
		D 11 11 O	(0)		IASCI	M No.	Name of Abate	ement Contr	actor (9)					
Name of Monitoring	g Firm Hired I	by Building Owl	ner (8)		ASCI	W NO.	ALPHA ENV							
0/ 10/11				-			Street Address			210.75		1		
Street Address							2129 Rt 33							
City State & Zin C	, State & Zip Code						City, State & Z	ip Code						
City, State & Zip C							Hamilton, N.							
Project Manager fo						er	Telephone Nu		Lie	cense Nur				
1 Toject Manager Te	oject Manager for Monitoring Firm						215-295-100				0109	1		
Scheduled Start Da	ate (10)	Scheduled Co	mpletio	n Dat	e (11)		Name of OSH							
3/19/20		3/31/2012					EMSL Analy				-			
Occupancy Status	During Abate	ement (Check o	nly one	e)			Street Address							
Facility Clo	sed/Vacated	During Entire I	eriod (of Aba	atemer	nt	107 Haddon					-		
Abatement	t Performed C	Outside of Norm	nal Hou	ırs – 7	7am to	3pm	City, State & Z							
Describe:							Westmont, I	NJ 08108						
	cupied During			10000										-
Scope of Work (CI	heck all that a	apply)						⊠ Full C	ontainmer	nt with Ne	ative	Pres	sure	
	construction of the second		<u> </u>	D	novatio				Enclosure					
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	Location of			Locat			Description Asbestos-Cont			pecify	Abe	item	,,,,,	ypc
	stos-Containi			nally l olely l			Material (AC			or LF)	_		Щ	т
	aterial (ACM)			tenan			(i.e., thermal sy		20000	E MEDICAL CONTRACTOR	Ren	Re	icar	ncl
10	BE ABATED in Facility	<u>.</u>			Staff?	i	insulation, surfac	ing, VAT			Remova	Repair	Encapsulate	Enclsoure
	(13)			(12)			or other miscella	aneous)			<u>a</u>	,	ate	6
			Yes	No	N/A						K.7			
Throughout				\boxtimes			Spray-On Co	eiling	900sf			ш	Ш	Ш
	Illoughout													
					10501	N	Cubic Yards	Name of R	enistered	andfill		_	-	
Name of Register	ame of Registered Waste Hauler				ODEP \ Suler [Waste	of Waste	Name of IX	egistered	Larrann				
	SAUSSESSE			1000	3333	Salar and the salar	1	Grows La	andfill					
ALPHA ENVIRO	INNIENTAL			00			Disposal Date	City, State						
City, State														
Hamilton, NJ								Morrisvil	le, PA		In .	_		
Committee of the commit	ompleted By (Print or Type)				tle		Signature	- XIII - CANADA - CA			Date	004	•	
Rod Richardso				P	M		Rod Richardson				3/8/	201	2	



Date of Notification	(1)	AND STREET OF STREET	1	Vame	of Buil	lding (Owner / Operator	(2)			*China			
	3/8/2012			The Control of the Control	cia Hir				4 1		71			
Agencies Notified	Type Notific	cation			Addre			4 00001 2	EOO Boo	and wells				
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Ø DOH		ergency			of Cor		3	1		Te	lepho	ne N	umbe	er
DCA	The state of the s	cellation	1.		cia Hir		j	ASBES	100 1011	1	•			
				EAG	CILITY	/ INIE	ORMATION	-	1077 011 0		-	1		-
Name of Facility W	here Ahatem	ent is Taking P	lace (3		UILI I	HAL	Type of Facilit	ty (4)	as the discount		manufact.		7 T T T T T	
Spinnaker Cond		ioni io raming r	.000 (0	,			School (K							
Street Address								ter 8 (Other						
Unit 820N								. private & c					tc.)	
	4						Square Feet	# of F	Floors	Blo	lg. Age			
City (5)		County (6)	Co	unty (Code (7	7)	1000		1		1500000	50		_
Sea Isle City		Cape May					Current Use (I	Prior if being	g demolis	shed)				
			(2)		Lance		Residence		to (O	`		-		
Name of Monitoring	Firm Hired	by Building Ow	ner (8)		ASC	M No.	Name of Abat ALPHA ENV)				1
Street Address						-	Street Addres		IIAL		-		8011001	
Street Address							2129 Rt 33							
City, State & Zip Co	State & Zip Code						City, State & Z							
							Hamilton, N				-,			
Project Manager for	r Monitoring	Firm	Telep	hone	Numb	er	Telephone Nu 215-295-100			License Nu	mber 0109	1		
0.1.1.1.01.4.0	1- (40)	Cabadulad Ca	malatic	n Do	to (11)		Name of OSH				0103	<u>. </u>	-	
Scheduled Start Da 3/19/201		Scheduled Co. 3/31/2012	mpieud	ша	le (11)		EMSL Analy							
Abatement Describe:	sed/Vacated Performed 0	During Entire F Outside of Norm	Period	of Aba			Street Addres 107 Haddon City, State & Z Westmont,	Avenue Zip Code						
Scope of Work (Ch		g Abatement				-			-					
Scope of Work (Cit	eck all that a	ippiy)								ent with Ne	gative	Pres	sure	
≥3 sf or ≥3	lf		\boxtimes	Rer	novatio	n			Enclosur					
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								☐ Non-		d and Non-				
	ocation of			Locat			Description			Amount	Aba	atem	ent T	ype
	tos-Containi	ng		nally l olely l			Asbestos-Cont Material (AC			(Specify SF or LF)			т	_
	terial (ACM) BE ABATED				ice or		(i.e., thermal sy		1 ~	,, 0, 2, ,	Rer	R	Encapsulate	Enclsoure
	n Facility		Cust	odial :	Staff?		insulation, surfac	ing, VAT			Remova	Repair	nsd	nos
	(13)			(12)	1		or other miscella	aneous)			<u>a</u>	_	late	ē
			Yes	No	N/A		0 0 0	- 111	000-					П
Throughout				\boxtimes			Spray-On Co	eiling	900s	ST .		Ш	ш	ш
Name of Registere	d Waste Hau	ıler	J	NJ	DEP V	Vaste	Cubic Yards	Name of R	Registere	d Landfill	-			
Traine or regiotore	a Tracto Tias			83383	auler ID		of Waste							
ALPHA ENVIRO	NMENTAL			00	33330)	1	Grows La						
City, State							Disposal Date	City, State						
Hamilton, NJ								Morrisvil	le, PA					
	completed By (Print or Type)				le		Signature				Date	5 10		
Rod Richardson				P			Rod Richardson				3/8/	201	2	
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Date of Notification	(1)		N	lame	of Build	ding C	wner / Operator	(2)			∇			
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Agencies Notified	Type Notific	ation	S	treet	Addres	SS			00 0	decelle.				
							ominiums Uni	t 618N - 35	on Roar	oan -				\dashv
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□ DOL		ended			le Cit			- 1		Tol	ephon	o Ni	mhe	-
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	<u> </u>			FAC	ILITY	INFO	ORMATION	The state of the s		era akang dalah peranggan dalah		į		
Name of Facility W	here Ahatem	ent is Taking P	lace (3				Type of Facility	y (4)	the executation to the			. 4		
Spinnaker Cond			,	•			School (K	-12)			2017			
Street Address	0111111111111						Subchapte	er 8 (Other th	han K-12)				- 1
Unit 618N							Other (i.e.	private & co	ommercia	al buildings	home	es, et	c.)	
Offic 6 1014							Square Feet	# of FI	loors	Bld	g. Age			
City (5)		County (6)	Cou	inty C	ode (7)	1000		1			50		
		Cape May			0.0000000000000000000000000000000000000		Current Use (F	Prior if being	demolish	ned)	ACCORD 10 10 10 10 10 10 10 10 10 10 10 10 10			
Sea Isle City		Cape may					Residence							
Name of Monitoring	Firm Hirod	by Building Ow	ner (8)	-	ASCI	VI No.		ement Contra	actor (9)					
Name of Monitoring	g Fillii Hileu	by Building Ow	ner (o)		1,000	. 110.	ALPHA ENV							
Street Address							Street Address							
Street Address							2129 Rt 33							
City State & Zin Co	State & Zip Code						City, State & Z	ip Code						
City, Glate a Zip of							Hamilton, N	J						
Project Manager fo	ject Manager for Monitoring Firm				Numbe	er	Telephone Nu	mber	L	icense Nur		_		
1 Tojout Managor To	ject Manager for Monitoring Firm						215-295-100				0109	1		
Scheduled Start Da	ate (10)	Scheduled Co	mpletic	n Dat	e (11)		Name of OSH							
3/19/20		3/31/2012	•				EMSL Analy	rtical						
Occupancy Status	During Abate	ement (Check o	only one	e)			Street Address	s						
Facility Clo	sed/Vacated	During Entire I	Period	of Aba	atemen	it	107 Haddon						100	
Abatement	Performed 0	Outside of Norm	nal Ho	urs – T	7am to	3pm	City, State & Z	Zip Code						
Describe:							Westmont, I	NJ 08108						
☐ Facility Oc	cupied During	g Abatement												
Scope of Work (Ch												Dece		
										ent with Ne	galive	Pies	Sure	
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	ocation of		Is	Locati	ion		Description	of		mount	Aba	atem	ent T	ype
	stos-Containi	ing	Norr	nally l	Jsed		Asbestos-Conf			Specify				
	aterial (ACM)			olely I			Material (AC		Si	F or LF)	Z,	т.	nc	Ē
	BE ABATED	<u>)</u>			ce or		(i.e., thermal sy insulation, surfact				Remova	Repair	Encapsulate	Enclsoure
	in Facility		Cust	odiai 3 (12)	Staff?		or other miscella	aneous)			val	<u>≅</u> .	ua) ure
	(13)		Yes	No	N/A		or other miscent	ancouo,					e	
							Spray-On Co	oiling	900sf			П	П	П
Throughout							Spray-On Co	eming	0000.		23			
				TAL	IDEP V	Vacto	Cubic Yards	Name of Re	egistered	Landfill				
Name of Registere	me of Registered Waste Hauler				uler IC		of Waste	Name of the	ogiotor ou	20				
AL DUA ENVIDO	PHA ENVIRONMENTAL			100000	33330		1	Grows La	andfill					
				00		-	Disposal Date	City, State					1.5	
City, State	City, State						Disposai Date	July, State						
Hamilton N.I	Hamilton, NJ							Morrisvill	le, PA					
	ompleted By (Print or Type)			Tit	le	-	Signature			4	Date		4.1	
Rod Richardson				P			Rod Richardson				3/8/	201	2	
Nou Monardson														
														1770

Check 1790

Date of Notification	(1)		1	Vame	of Buil	ding (Owner / Operator	(2)		Total Control			
	3/8/2012	(4)					ducts	i i i i isa is	. 1 7 15	11 111			
Agencies Notified	Type Notific	ation	133		Addre								
							t Street	MAR	1 8 2012	11 11 11			
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		ended			nce, N		518	-		Telepho	ne Ni	ımhe	or .
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				FAC	CILITY	INF	ORMATION		711 - 401 - 400 -		1		
Name of Facility W	here Abatem	ent is Taking P	lace (3	5)			Type of Facilit				- 1		
Griffen Pipe Pro	ducts		i Divisioni i di i				School (K						
Street Address								er 8 (Other than					
1100 West Front	t Street						Name of the last o	. private & comr				tc.)	
							Square Feet	# of Floor	rs E	Bldg. Age			
City (5)		County (6)	Co	unty (Code (7	7)	200000		2		+08		
Florence		Burlington					Current Use (I	Prior if being der	molished)				
							Commercial						
Name of Monitoring	g Firm Hired	by Building Own	ner (8)	- 2012	ASC	M No.		ement Contracto					
							ALPHA ENV	IRONMENTAL	L				
Street Address							Street Addres	S					
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City, State & Zip Co	ode						City, State & Z						
			-				Hamilton, N		License N	lumbor			
Project Manager for	or Monitoring	Firm	Telep	hone	Numb	er	Telephone Nu		License i	0109	1		
				_			215-295-100			0100			
Scheduled Start Da		Scheduled Cor	npletic	on Dat	te (11)		Name of OSH						
3/19/20		5/19/2012				-	EMSL Analy			LIV.			
Occupancy Status	During Abate	ement (Check o	nly one	9)			Street Addres						
		During Entire F					107 Haddon				-	-	
	Performed C	Outside of Norm	al Ho	urs –	/am to	3pm	City, State & Z						
Describe:							Westmont,	NJ 08108	*				
		Abatement											
Scope of Work (Ch	neck all that a	ipply)							ainment with N	Jegative	Pres	sure	
	ı£			Por	novatio	n		Mini-Encl		3			
			\mathbb{H}		nolition			Glove Ba	g Procedures				
≥160 sf ≥20	6U II			Dei	Holltion	•			npted and No	a Eriable	Dro	codu	ro
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A CONTRACTOR OF THE CONTRACTOR	ocation of			Locat			Description Asbestos-Conf		(Specify	Abo	atem	SIIL I	ypc
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1000000	BE ABATED				ice or		(i.e., thermal sy			Remova	Re	Encapsulate	Enclsoure
	in Facility		Custo	odial 3	Staff?	i	insulation, surfac			VOL.	Repair	usc	sou
	(13)			(12)			or other miscella	aneous)		<u> 8</u>		ate	G.
			Yes	No	N/A								
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Name of Registere	ed Waste Hau	ıler			DEP V		Cubic Yards	Name of Regis	tered Landill				
				14.5633	uler ID	NO.	of Waste	Grows Land	Fill				
	ervice Transport			20	990		100		1111				
City, State	ty, State						Disposal Date	City, State					
Now Costle DE	ew Castle, DE						various	Morrisville, F	PA				
	w Castle, DE ppleted By (Print or Type)			Tit	10	-	Signature	,,		Date			
Rod Richardsor				PI			Rod Richardson			3/8/	201	2	
Nou Richardson					WI		Market Marchine the State			3, 3,		700	
													-

1314

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

Date of Notification (1) 03/06/2012					Building Owr Gandara	ner/Operato	or (2)			19-1/	15			
Agencies Notified	Type Notification			Street Ad 27 Wes	dress st First Stre	eet		MA	AR 1	4 2012			- 1	
EPA DEP DOL	Amended Amendment				e, Zip Code ie, New Je	ersey 070	002	I. Asi	8108	wind s		energy to the second	1	
DOH DCA	Emergency (justification) Cancellation	including		Name of O	Contact Gandara		WW 42,023	Personal Services	Tele	phone Nur	nber			
				FACIL	ITY INFORM	MATION	TELL	of Facility (4					-1	
Name of Facility Where Residential	e Abatement is Taking	g Place (3)						School (K-12						
Street Address								Subchapter 8	(Othe			inas	homo	
27 West First Stre	eet						e e	Other (i.e. pr etc.)						5,
City (5)							Squar 8,000	e Feet	# of	Floors	8 B	dg. A	ge	
Bayonne County (6)			T	County C	ode (7)			nt Use (Prio		ng demolis		_		
Hudson					SE ONLY) _		700000000000000000000000000000000000000	dential						
Name of Monitoring Fi	rm Hired by Building	Owner (8)		ASCM	No.	111111111111111111111111111111111111111		ement Contacting, LL		(9)				
TBD Street Address							et Addres							
Street Address								y Road, S	Suite I	<				
City, State, Zip Code							State, Zi lyne, Ne	p Code ew Jersey	0747	70				
Project Manager for M	onitoring Firm			Telephon	ne No.	100000000000000000000000000000000000000	phone No (3) 928-			License N 00874	10.			
Start Date (10) 03/07/2012		Scheduled 03/14/20		npletion [Date (11)			A Monitor acting, LL	С					
Occupancy Status Du	ring Abatement (Ched	k Only One)				et Addres							
Facility Closed/V	acated During Entire	Period of Ab	atem	nent				y Road, S	Suite	K				- 185
Abatement Perfo Other – Describe	rmed Outside of Norr entire floor vacant w	nal Facility I here abaten	nent is	s taking p	lace		, State, Z ayne, N	ew Jerse	074	70				
Scope of Work (Check	(All That Apply)						E21							
≥3 sf or ≥3 lf × ≥160 sf or ≥260 l	f		nova molit				Mir Glo	ll Containme ni-Enclosure ovebag Proc	edure				0	
		_	-			220000000000000000000000000000000000000	LI NO	n-Exempted	() an	U NOII-FIId	DIEFIC		emen	i
	U		.ocati ormal			Descript	ion of					Т	/pe	т—
Asbestos-Containi TO BE A In Fa	tion of ing Material (ACM) ABATED acility 3)	Custo	itena	nce/	(i.e. th	containing ermal system surfacing, other misce	g Materia ems insula VAT, or	ation,	(5	mount Specify or LF)	Remova	Repair	Encapsulate	Enclosure
(,	0)	Yes	No	N/A	7. 11-11								ate	Œ.
Base	ement	x			- 1100000000000000000000000000000000000	Boiler Ins				20 SF	х			
Base			AC	M Debri	s on floo	or	5	0 SF	х					
						O. h!- \/- \		Nome of	Doniet	ered Landi	ill			
Name of Registered V Service Transport			H	NJDEP W Hauler ID	No.	Cubic Yard of Waste 5	5		3.75	erprises,				
City, State	*			0990		Disposal D	ate	City, Stat		. Ohio				
New Castle, Delay	ware	Title				Signa	ture	,,	9	- [Date	-		
Predrag Sarcev		Vice F	res	ident		7		2		~ (03/06/	2012	2	

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

Print Form REMEMBER - MAIL IN HARD COPY STATE OF NOW JORGOY ABBATEMENT (Pursuant to NJAC 8:80 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) 03/06/2012 Diane Gandara Agencies Notified Type Notification Smeet Address 2012 27 West First Street EPA Indial City State Zip Corin 131-12 Amendad X DOL Amendment # Bayonne, New Jersey 07003 Emergency (including Name of Contact X DOH justification) Diane Gendara DCA Cancollation FACILITY INFORMATION Name of Facility Where Abatement Is Taking Place (3) Type of Facility (4 Residential School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e private & commercial buildings homes, 27 West First Street clc) City (5) Square Fact # of Floors Blog Age 8,000 80 Вауоппе Current Use (Prior II being during) shed County (8) County Code (7) Residential Hudson Name of Abotement Contractor (9) Name of Montaining From Hised by Building Owner (8) ASCM NO TBD Sky Contracting, LLC Street Address Street Address 1385 Valley Road, Suite K City State, Zip Code City State /10 Code Wayne, New Jersey 07470 Telechono No License No Project Manager for Monitoring Firm I elephone No 00874 (973) 928-5040 Sian Date (10) Schoduled Completion Data (11) Name of USHA Monitor Sky Contracting, LLC 03/07/2012 03/14/2012 Street Address Organization During Abalement (Check Orly One) 1385 Valley Road, Suite K Facility Closed/Vacated During Entire Period of Abatement Abatament Performed Outside of Normal Facility Hours Other - Describe Indirection vacant where observed is City State Zip Code Wayne, New Jersey 07470 Scope of Work (Check All That Apply) Full Containment with Negative Pressure *3 sf or >3 If Renovation Mini Enclosure Demolition ≥160 st or ≥260 If Glovebag Procedure Non-Exempted (*) and Non Enable Procedure Abatement is Location 1 ype Normally Deverlption of Location of there Solely by Amount Ashestos Containing Material (ACM) Asbestos-Containing Material (ACM) Maintenanco/ Specify Retrail Repar TO BE ABATEU (i a thermal systems insulation Custodial Staff? SF or LF surfacing. VAI or In Feoility (12)other miscollarwous? :13) Yes No NIA 220 SF x Baller Insulation Basement × 50 SF x ACM Debris on floor Basoment × Name of Registered Landfill Cubic Yarde N.IDEP Waste Name of Registered Waste Hauler Houler ID No of Waste Minerva Enterprises, LLC Service Transport Group Inc. 20990 City State Distribut Dale Chy. State Waynesburg Ohlo TBD New Castle, Delaware Date Signature Tite Completed by 03/08/2012 Vice President Predrag Sarcev * No not use this form for asbuotop ticensure exampled activities A38 41 IR-06-08

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City, State

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Disposal Date

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Cay, State

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Completed by

J. Majorano

Rochelle Park,

N.J.07662

* Do not use this form for assessor less

Title.

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

GAC Project # 060-12

Client Project #					· 1/-		n.a	-	-
Date of Notification (1) March 12,	2012			Name of Building Owner/Ope RUTGERS, THE STA	erator (2) TE UNIV	ERSITY (OF NJ		
Agencies Notified EPA DCA	☐ Amer	Notifica ided Not		Street Address ENVIRONMENTAL HE 27 ROAD 1, BLDG 400 City, State, Zip Code	ALTH &			s	Tall Tall The cores manufacture.
☒ DOL	iustif	ication)	morading	PISCATAWAY, NJ 088	354	terran	The same of the sa	<u>.</u>	100
☑ DEP- No Longer REQUIRED ☑ DOH	□ Cano			Name of Contact MICHAEL SMITH, ENV HEALTH & SAFETY	1 commence	Telephone		minute dans	Active Comment
			FACILITY II	NFORMATION					
Name of Facility Where Abatement ACKERSON HALL, BLDC		3)		Type of Facility (4) School (K-12) Subchapter 8 (other than k	(-12)	a			
Street Address NEWARK CAMPUS				M Other (i.e. private & comme	ercial buildir	ngs, homes, Bldg. Ag		ears	
	SEX		y Code (7) Use Only)	Current Use (prior if being de	emolished):	ACADEM	IC		
Name of Monitoring Firm Hired by E	Bldg. Owner (8)	ASCM 0098	771	Name of Contractor (9)					
Street Address				GREENWOOD ABATEM	VIENT CC	NSULIA	NIS, INC	<i>.</i>	-
3 TERRI LANE				268 MAIN STREET					
City, State, Zip Code BURLINGTON, NJ 080	16			City State, ZipCode BUTLER, NJ 07405					
Project Manager for Monitoring Firm BRIAN KEARNY	<u>Telephone</u> 609-38			Telephone Number		License Nur	nber		
Scheduled Start Date (10) 03/22/12	Scheduled 03/23/1	777	on Date (11)	973-492-0477 Name of OSHA Monitor ENVIROVISION, INC.		00840			
Occupancy Status During Abater Facility Closed/Vacated During	nent (Check only Entire Period of	one) Abatemer	nt	Street Address 20-21 WARGARAW RO	AD			39.83	
□ Abatement Performed Outside Describe □ Other – Describe: 6PM - 5 A		y Hours -		City, State, Zip Code	AD				
				FAIRLAWN, NJ					
Scope of Work (Check all that apply	ΧŢ				Containme	ent with Neg	ative Pres	sure	
$\boxtimes \ge 3 \text{ sf or } \ge 3 \text{ lf}$ $\square \ge 160 \text{ sf or } \ge 260$	lf		☑ Renovatio	☐ Glo	lini-Enclosu vebag Prod on-Exempt		on-Friable	Proced	lure
Location of Asbestos-Containing Material (ACM) in Facility (13)	Is Location Norm Solely by Maint./ Staff? (12) YES NO			sbestos Containing Material rmal systems insulation, surfacing, iscell.)	Amount (Specify or LF)	SF	ement Type ove Repair	70	nclose
Room 004D	X		VAT		140 SI				
					+	-	-	+	
Name of Reg. Waste Hauler See Hauler Below #1 & 2	NJDEP W See Belo	aste Haule	r ID#	Cubic Yards of Waste: 15	CY	Name of Re G.R.O.W.			II
Hauler #1) Greenwood Abatement NJDEP # 12561 Hauler #2) Newark Carting, Inc., NJ DEP # 4509			NJ 07405		sposal Date 3/23/2012		City, Stat 100 New Rd. Morr 19067 215-736-	Ford M risville, l	
Completed by (Print or Type) RAYMOND C. PEDALING	SENIOR MANAGE		СТ	Signature	2	<u>Date</u> M	arch 12	, 2012	

Date of Notification (1) 3/9/12						Owner/Oper vid" Tsui 8		2)	1 21		PO-CE K		11.	N
Agencies Notified	Type Notification		100	Street Ad PO Bo				MAR I	4 201	2				
DEP DOL	Initial Amended Amendment				te, Zip Co eld, NJ			-	TOUTAU	. :	1			
DOH DCA	Emergency justification) Cancellation		100	Name of Davis	Contact Tsui	-			Tele	phone I	Number	Alcena		
Name of Facility When Apartment building Street Address 120 Jackson Street	g	g Place (3)		FACIL	LITY INFO	DRMATION		Type of Facility School (K-Subchapte Other (i.e. etc.)	12) r 8 (Othe	er than k	(-12) ercial bu	lding	ıs, ho	omes,
City (5) Hoboken							1	Square Feet 3,500	# of 5	Floors		Bldg 50	Age	
County (6) Hudson				County C	Code (7) ISE ONLY)	Z E	-	Current Use (Pr	ior if bei	ng demo	olished)			
Name of Monitoring Fin	rm Hired by Building	Owner (8)		ASCM	No.	Α	ABS E	f Abatement Co Environmenta Address			LC			
			14			4	EG	ate Drive, PC	Box 4	183				
City, State, Zip Code	, State, Zip Code lect Manager for Monitoring Firm							ate, Zip Code vood NJ 074	18					
Project Manager for Mo					ne No.	10.00		one No. 83-8500		License 703	e No.	X.=.*=		
Start Date (10) 3/20/12	(C.C. (C.C.)				Date (11)	Na	ame o	f OSHA Monitor						
Occupancy Status Dur	ing Abatement (Ched	k Only One	e)		rs seemen	St	treet A	Address						
Facility Closed/Va Abatement Perfor Other – Describe:	acated During Entire rmed Outside of Norn	Period of A nal Facility	batem Hours	ent		Ci	ity, Sta	ate, Zip Code						
Scope of Work (Check	All That Apply)													
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		***********	enova emoliti				×	Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	e cedure				ure	
	Mollocal Production of the State	le	ocati	on								1/2/01	atem	
Locati Asbestos-Containir <u>TO BE A</u> In Fa	ng Material (ACM) BATED cility	N Used Mair Custo	ormall Solel ntenar odial S (12)	y ly by nce/ staff?		Descriptos Containi thermal sys surfacing other misc	ing Ma stems g, VAT	aterial (ACM) insulation, , or	(8	mount pecify or LF)	Removal	Kepan	Type	T
baser	ment	Yes	No	N/A X		pipe ins	sulati	ion	1	3 LF	x	+	+	
	Charles and the second		as-moss-	×			r tile			0 SF	x	t	+	+
living room kitchen				x		floor	10.115/09000		15	0 SF	x	T	+	
RIGHEN												1		
Name of Registered Waste Hauler Newark Carting				JDEP Wauler ID I		Cubic Yar of Waste 10	rds	Name of Cumbe				ill		
City, State Newark NJ						Disposal I	Date	City, Sta Newbu		\				
Completed by Andrew Scott Higg	ins	Title Presid	lent				ature		<u></u>		Date 3/9/12			
, trial ow ocott ringg		. 10010	~		500000		()							

Date of Notification (1) 3/9/12				Name o Harry	f Building C Hahn)wner/	Operator	(2)			qCK	- //5/	(1)	2		
Agencies Notified	Type Notification			Street A	ddress ngle Stre	et	, 22		MAR	14	2012	1 200			123	
DEP DOL	Amended Amendment				ate, Zip Cod wood NJ		31	1			ini k					
DOH DCA	Emergency (justification) Cancellation	including		Name of Harry	f Contact Hahn			of the live of	274.00		ephone	Numb	er			
Name of Facility Where	Ahatement is Takin	n Place (3		FACI	LITY INFO	RMAT	ION	Type	of Facility (4)			- 200	or 20	j .	
ivaline of Facility vinere	Abatement is Takin	g riace (5	,				L - Part	_	School (K-1							
Street Address 350 Engle Street									Subchapter Other (i.e. petc.)	8 (Oth			ouild	lings,	hom	es,
City (5) Englewood									re Feet	# 0	f Floors		В	ldg. A	ge	
County (6) Bergen					Code (7) USE ONLY)			Curre	nt Use (Pri	or if bei	ng dem	olished)			
Name of Monitoring Firm Hillmann Environm		Owner (8)		ASCN	1 No.				tement Cor			LLC		-		
Street Address 1600 Route 22 E							Street 4		s Prive, PO	Box 4	483					
City, State, Zip Code Union NJ 07083	4						City, S	tate, Zi	p Code NJ 0741							
Project Manager for Mor Mike Nehlsen	nitoring Firm		1.0	Telephor	ne No.	> γ^	Teleph 973-5	one No).		Licens	se No.	2000		22-27	
Start Date (10) 3/18/12		Schedule 3/26/12	d Con			<u>II</u>	Name	of OSH	IA Monitor					-		
Occupancy Status Durin	g Abatement (Chec	k Only On	∋)				Street	Addres	s							
	ated During Entire F led Outside of Norm						City, St	tate, Zi	p Code			W-11-11-11-11-11-11-11-11-11-11-11-11-11			-	
Scope of Work (Check A	II That Apply)															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	enova emolit	(A)			×	Min Glo	Containme i-Enclosure vebag Prod i-Exempted	edure					a	
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Location			ormal I Sole				scription		(4.014)			-	1	Ту	pe	
Asbestos-Containing <u>TO BE AB</u> In Facil (13)	ATED	Mair Custo	ntenar odial S (12)	nce/	(i.e. th	nermal surfa	aining M systems cing, VAT niscelland	insula r, or		(S	mount pecify or LF)		Removal	Repair	Encapsulate	Enclosure
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Newark Carting			356.5	auler ID 1 509		of Was 10	ste		Cumber	land (County	y Land	dfill			
City, State Newark NJ			1 1	Dispos TBD	al Date		City, State Newbur									
Completed by Andrew Scott Higgin	s	ent			S	ignature	1			-	Date 3/9/1	2				

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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 17:174)

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encies Notified	Type Nouhcaton			granout	FEMOLITI	ON MAH	1 1 2012
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XX	Cancellation			Hancrov	<u>-</u>		
		- 1	BILL	Manares			
1-	· .·		FACILITY	INFORMATION			
" e of Facility Where	Abatement is Taking	Place (3)			Type of Facility (4	0	
1.651	DENCE.				School (K-12)		
	· · ·				Subchapter 8	(Other than K-17)	
Address	1. 1.	· 1.	<u>.</u> .	*		isia e commercial	l pulaings
5.42	W. Brow	N 4.0	٥,		homes, etc.)		
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3/26/12				Sueel Addres	\$		
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NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)

te of Notification (1) 3/07/2012			Ne	w Jerse	ing Owner/C y Turnpike	Author	rity	to the second second						1
encies Notified	Type Notification		58	et Addres 1 Main S	Street		111 1	MAR_1	4 2	012	1			+
EPA DEP	Initial Amended Amendment #		City	, State, Zi oodbridg	p Code ge, NJ 070	95	į		T-1	hone Numbe	r 1			-
DOH	Emergency (inclining justification) Cancellation	uding	Nar	me of Con chard J.	^{tact} Raczynsk	i L	Market Market - 1	Life	Telep	onorie rumbo	. 4	, _		4
DOH DCA	Cancellation		_	FACILITY	INFORMAT	ION	Type of F	acility (4)						7
Prospect Plains		lace (3)				Maria de	Scho	ool (K-12 chapter 8 er (i.e. pri) (Othor	r than K-12) commercial l	ouilding	s, ho	mes,	
269 Prospect Pla	ains Road						Square F		# of	Floors		Age Yea	rs	
city (5) Cranbury								Ico (Prin	1000	ng demolished	1)			
County (6)			Co	ounty Cod TATE USE	e (7) ONLY)		Forme	r feed a	nd ag	riculture o	ffice		_	
Middlesex Name of Monitoring	Firm Hired by Building Ov	vner (8)		ASCM No 00127).	Name Mat	e of Abaten tiola Ser	nent Con vices, L	LC	(9)				
West Chester E	nvironmental					Stree	t Address 2 B Lucc	n Road	i					
307 North Waln						City.	State, Zip ppack, P	Code						
City, State, Zip Cod West Chester, I	PA 19380		TT	elephone	No.	Tele	phone No.			License No				
Project Manager for Matt Abraham			1	310.431	.7545).539.563 ne of OSHA			01077				
Start Date (10) 03/26/2012		Scheduled 04/30/20	Com 12	pletion Da	ite (11)	Ma	ttiola Sei	rvices,	LLC					_
Occupancy Status	During Abatement (Check	Only One)			208	et Address 82 B Luc	on Roa	d					
Andrew Committee of the	d/Vacated During Entire F erformed Outside of Norm	period of At	atem	ent		City	, State, Zip tippack, F	Code PA 194	74					
	neck All That Apply)	Re × De	enova	ition tion		-	× Min	i-Enclosu	re	th Negative F e and Non-Friat	ole Proc	edure	ment	
		1 10	Locat	ion								Ту		
Asbestos-Cor TO	ocation of ntaining Material (ACM) BE ABATED In Facility (13)	Use Ma	lorma d Sole intena	illy ely by ance/ Staff?	(i.e. the	rmal syst	otion of ng Material tems insula , VAT, or ellaneous)	guon,		Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Lildoadic
		Yes	No			Flue p	acking			8SF	Х			
Baseme	ent - Middle Area			X		1. N 1. M. O.	ashing	<u>-</u>		4SF	х			
	mney Stacks			X			roofing		1	150SF	Х			1
Ac	dition Roof		-											
Name of Register	ered Waste Hauler			NJDEP V Hauler ID SW 209	No.	Cubic Ya of Waste		IESI	Bethl	istered Land ehem Land	dfill			
2.1		+ N.I				Disposal	Date	City, 3	State 5 App	lebutter Ro		ethle	hem	, F
100 Valleybro	ook Avenue, Lynhurs	litte				Sig	nature Broles	M	asi	ser	Date 03/07	/201	2	
Caroline M. I	Harper	Pro	ject	Manage		100	VIII-CIII			T He		176		

F- 11 3							į	-		Triver	Fire owners		1	
Date of Notification (1) 3/7/2012					Building (erator	(2)		划層	In	7		
Agencies Notified EPA DEP DOL	Type Notification Initial Amended Amendmen			City, Stat	ddress NGS HI te, Zip Co KSBOR(de	1	MAF	14	2012				
≥ DOH DCA	Emergency justification Cancellation)	- 1		Contact CANNO	N		FIGURE 1	Tel	ephone N	umber			
				FACIL	LITY INFO	ORMATIO	N		The same		The same of			
Name of Facility Where A COMMERCIAL Street Address	Abatement is Takii	ng Place (3)					Type of Facilit		er than K-	12)			
300 KINGS HIGHW	ΆΥ								e. private 8			lings,	home	es,
City (5) CLARKSBORO								Square Feet 2500	2	Floors	6 6	ldg. A O	ge	
County (6) GLOUCESTER				County C	Code (7) ISE ONLY))	_	Current Use (STORE FR		ng demolis	shed)			
Name of Monitoring Firm CONNELL GREEN		Owner (8)		ASCM	No.			of Abatement (ERVI	CES	INC	
Street Address 904 KINGS ARMS [***************************************							Address CLEMS RUN	1		1			
City, State, Zip Code DOWNINGTOWN, F	PA 19335							tate, Zip Code LICA HILL, I	VJ 0806	2	107-20-20-20-20-20-20-20-20-20-20-20-20-20-			
Project Manager for Moni RICK PELLISSIER			- 1	Telephor	ne No. 32-9363		Telept	none No. 304-4676		License 01145	No.			
Start Date (10) 3/16/2012		Schedule 3/20/20		pletion [Date (11)		Name EMS	of OSHA Monit	or					
Occupancy Status During	Abatement (Che							Address						C11
X Facility Closed/Vaca								RT. 130 NO	RTH					
Abatement Performe Other – Describe:	ed Outside of Non	nal Facility	Hours			_		tate, Zip Code NAMINSON,	NJ 080	77				
Scope of Work (Check All	That Apply)													
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		- American Control of the Control of	tenova emolit	20.20.00			×	Full Contain Mini-Enclos Glovebag F Non-Exemp	ure Procedure				e	
		le	Locati	on			100	1 Holl Exemp	7,00		T	Abate	emen	t
Location Asbestos-Containing I TO BE ABA In Facilit (13)	Material (ACM) TED	Use Mai	lormal d Sole intenar odial S (12)	ly ly by nce/	Asbesi (i.e.	tos Conta	ystem ng, VA	flaterial (ACM) s insulation, T, or	(5	mount Specify F or LF)	Removal	Repair	e Encapsulate	Enclosure
		Yes	No	N/A									æ	
FIRST FL	OOR			X			OR T			2 SF	Х			
FIRST FL	OOR			X		TRANSI				0 SF	X	_		_
FIRST FL				X		DUCT IN				3 LF	X	_		
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Name of Registered Was NETS	te Hauler		1	JDEP W auler ID		of Wast	e	ALLI	of Registe		ni		-1:24(1)	
City, State HAZLETON, PA						Disposa 3/21/2			itate RIAL, F					
Completed by RONALD SWANSOI	N	Title PRO	JECT	MANA	GER	Sig	gnature	1111	ruis	4	Date 3/7/201	12		ess aces
ASB-41 (R-06-08)							Do no	ot use this form	for asbes	tos licensu	ıre exer	npted	activi	ties.

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Check # 1319 Date of Notification (1) Name of Building Owner/Operator (2) 03/07/2012 Hodges Claire Agency Notified Type Notification Street Address 18 S. Talmadge Street **EPA** M Initial City, State, Zip Code ☐ DEP ☐ Amended M DOL Amendment # New Brunswick, NJ 08901 ☐ Emergency (including Name of Contact Telephone Number **⊠** DOH justification) ☐ Cancellation □ DCA Hodges Claire **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Private home ☐ School (K-1 2) ☐ Subchapter 8 (Other than K-1 2) Street Address ■ Other (i.e. private & commercial buildings, 18 S. Talmadge Street homes, etc.) City (5) Square Feet # of Floors Bldg. Age New Brunswick, NJ 08901 County (6) County Code (7) (STATE USE Current Use (Prior if being demolished) ONLY) Middlesex Name of Abatement Contractor (9) ASCM No. Name of Monitoring Firm Hired by Building Owner(8) Gr Tech LLC Street Address Street Address 576 Valley Rd #283 City, State, Zip Code City, State. Zip Code Wayne, NJ 07470 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 973-638-1777 01127 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 03/17/2012 03/18/2012 Envirovision Consultants, Inc Occupancy Status During Abatement (Check only one) Street Address 20-21 Wagaraw Road, Bldg .# 34A ☑ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: Fair Lawn, NJ 07410 Scope of Work (Check all that apply) Full Containment with Negative Pressure Renovation Mini-Enclosure □ ≥160 sf or >260 lf ☐ Demolition Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Туре Normally Location of Description of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ Encapsulate Removal TO BE ABATED (i.e., thermal systems insulation. (Specify Repair Custodial IN Facility surfacing, VAT, or SF or LF) Staff? (13)other miscellaneous) (12)Yes No N/A Basement 40 LF Pipe insulation X X Name of Registered Waste Hauler NJDEP Waste Hauler Cubic Yards of Name of Reg stered Landfill ID No Waste Gr Tech LLC T.R.R.F. Inc 0033785 City, State Disposal Date City, State Wayne, NJ 07470 Tullytown, PA

Signature

Date

03/07/2012

Completed by

N. Jevtic

ASB-41

Title

Owner

STEVENS	EMIRON	newpl
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GHECK:	# 04 100	

Date of Notification (1) 2/10/12	AF STANFILK		Name	of Buildin	g Owner/Operator Ne	(2) exus Propertie	es Inc.	U 107		7//	-	
Agencies Notified	Type Notification			Street	Address	1	Brunswick C	MAR 14	201	2	Lowran	JI	
EPA DEP DOL	Amended Amendment	# <u>2</u>	-	City, S	State, Zip C		renceville, N.	J 08648 03 00	TROL	3	i	Total and a second	
DOH DCA	☐ Emergency (i justification) ☐ Cancellation	nciuain	,	Name	of Contac	t arles Bancrof	t L	-Telephone Nun	ber	*******	- Paris	J	
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Name of Facility When	re Abatement is Takir	ng Place	(3)	3.400			Type of Facility	(4)			CHOIL		
Street Address	Commerc	cial B	uildi	ng				2) 8 (Other than K-1 rivate & commerc		dinas			
	980 Hoc	per A	venu	ie			homes, etc.)					
City (5)	Ton	ıs Riv	er		1500		Square Feet 10,000	# of Floors	_ B	ldg. A	ige 50		
County (6)	Ocean			Cour	nty Code (1 ONLY)	7) (STATE		ior if being demo mmercial bu					
Name of Monitoring Fi		Owner		ASCM	No.	TO SERVICE THE SAME SERVICE OF THE SERVICE ASSESSMENT	nent Contractor (9			Mello-		11///	
(8)	MECS					Stev	ens Environi	nental Service	es, Ir	1C.			
Street Address	PO Box 34	-1				Street Address PO Box 322							
City, State, Zip Code						City, State, Zip Code							
	Crosswicks, NJ	0851	5			Allentown, NJ 08501						_	
Project Manager for N			1000	phone	Marie Company of the Company	Telephone No. License No. 00493							
	Weisgarber JR.		-		8-4070	(609) 259-9688 00493 Name of OSHA Monitor						_	
Start Date (10)		eduled C			te (11)	Name of OSHA		ECS					
2/27/12			3/16/	12		Street Address	1V1	LC3					
Occupancy Status Du Facility Closed/Vac	uring Abatement (Che	eck only	one)	ment		Sileet Address	PO E	341 Sox 341					
☐ Abatement Perform ☐ Other - Describe:	ned Outside of Norm	al Facili	ty Hou	City, State, Zip Code Crosswicks, NJ 08515									
Scope of Work (Chec								,					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enovat emolitic			 ✓ Full Containment with Negative Pressure ✓ Mini-Enclosure ✓ Glovebag Procedure ✓ Non-Exempted (*) and Non-Friable Procedure 					lure		
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Location			d Solel ntenan		Ashan	Description of tos Containing Mar		Amount				_	
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IN Fac	cility		Staff? (12)			surfacing, VAT, other miscellaned		SF or LF)	Remova	a:	Encapsulate	000	
(13)	Yes	No	N/A		Other miscellanes	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				ılate	α	
boiler	room			×		pipe fitting	gs	80	×				
boiler		-		x		boiler breech		40 SF	×				
HVAC		×		pipe fitting	gs	25	×						
basement						floor tile		740 SF	×				
Name of Registered Waste Hauler					Vaste	Cubic Yards	Name of Regi	stered Landfill					
Stevens Environmental Services Inc.				lauler ID 182) No. 292	of Waste 4 CU		T.R.R.F. I	nc.				
City, State	Allentown,					Disposal Date 3/16/12	City, State	Tullytown,	PA				
Completed By	Anemown,		-			Signatura	1 V/	Date					
Mahlon E. S	609/10		rojec	t Man	ager	_ ////	1		3/8	/12			
Triumon D. C						-111	7			-	1000	-	

ASB-41 MAR 00 * Do not use this form for asbestos licensule exempted activities.

Date of Notification (1) 2/10/12			Name of Building Owner/Operator (2) Nexus Properties Inc.											
Agencies Notified	Type Notifica	ation		Stre	et Address		Brunswick (Circle D 1 4	0010	1	The second of				
EPA DEP DOL	Amended Amendme	ent #1_	_	City,	State, Zip	Code	renceville, N	(4) 411 1 4 5	<u> </u>		la tra				
DOH DCA	☐ Emergend justificati	on)	ig	Nam	e of Conta			Telephone Nu	imber.	Ġ.	in the second	i			
				FA	CILITY IN	FORMATION		The state of the s	-5, F2(a) -51 -54	Januar (fil	d chipmo	aw.ct			
Name of Facility When	e Abatement is T	aking Plac	xe (3)				Type of Facilit	y (4)	7	-(4)	11 To 18 To 1	neround			
		ercial E		ng			School (K-		40)						
Street Address	980 H	Iooper A	\ven	ıe			Subchapter 8 (Other than K-12) Other (i.e., private & commercial buildings, homes, etc.)								
City (5)							Square Feet	# of Floors	0 0						
	T	oms Riv	ver				_								
County (6)	Ocean				inty Code (E ONLY)	7) (STATE		Prior if being demo ommercial bu							
Name of Monitoring Fi		ing Owner		ASCN	1 No.		ment Contractor (
(8)	MECS						Stevens Environmental Services, Inc.								
Street Address	PO Box	341				Street Address	PO	Box 322							
City, State, Zip Code	10 000	J+1				City, State, Zip 0		DOX 322				_			
City, State, Zip code	Crosswicks, 1	NJ 0851	5.			ony, onaro, a.p.	Allentown, NJ 08501								
Project Manager for M			- 11 (A)	phone	No.	Telephone No. License No.									
	Weisgarber Л	R	(60	9) 29	98-4070	(609) 2:	59-9688		0049	3					
Start Date (10)	S	cheduled (ate (11)	Name of OSHA		m.cc							
2/27/12			3/16/	12			N	IECS .							
Occupancy Status Du						Street Address	PO I	30x 341							
☐ Facility Closed/Vac ☐ Abatement Perform						City, State, Zip C		30X 341							
Other - Describe:			., , , , ,			Oity, State, Zip C		ks, NJ 08515							
Scope of Work (Check ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	(all that apply)		enovat emolitio			☐ Mini-End Gloveba	ntainment with Ne closure ag Procedure empted (*) and No		lure						
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TO BE AB. IN Faci. (13)	ATED ity	C	ustodia Staff? (12)			thermal systems i surfacing, VAT, other miscellaneo	nsulation, or	(Specify SF or LF)	Removal	Repair	Encapsulate	1			
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boiler r	oom			×		pipe fitting		80	×						
boiler 1	room	_		×		boiler breech	ing	40 SF	×						
HVAC I	Room	_		×		pipe fitting	(S	25	×						
Name of Registered W	aste Hauler			JDEP \		Cubic Yards	Name of Regis	stered Landfill	1						
Stevens Enviror	mental Serv	ices Inc	. Н	auler ID 182	No. 292	of Waste 2 CU		T.R.R.F. I	nc.						
City, State	Allentown	-	= -	102		Disposal Date 3/16/12	City, State	Tullytown,							
Completed By		Title				Signature	12-//	Date	IA		-				
Mahlon E. St			oject	Man	ager	1/1/	X		2/29	/12					
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ASB-41 MAR 00

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

Services Inc CHeck #44616

ate of Notification (1)			Na	ame of B	uilding C	wner/Operator (xus Properties	Inc. W	2	11	_	
2	./10/12		-	reet Add	iress		111 111			40.00		
gencies Notified	Type Notification		31	IEEL AGO	11000	1	Brunswick Cit	Gle 1 4 2012	ise	#	==	4
EPA DEP	Initial Amended Amendment #		Ci	ty, State	, Zip Coo	le Lawi	renceville, NJ	08648	- Annual			
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DOH DCA	Cancellation				Char	les Bancroft	** ***********************************	<u> </u>	Contract Con	HOLES A	2	7.
				FACILI	TY INFO	RMATION		* matrice de la constantion de			+-	-
1 10 100	e Abatement is Taking	Place (3)					Type of Facility (5,2	
ame of Facility vvner	Commerci	al Buil	ding				School (K-12)	(Other than K-1/1				
treet Address			-				Other (i.e., pr	ivate & commercial	bullaing	J S,		
lieer Address	980 Hoop	er Ave	nue				homes, etc.) Square Feet	# of Floors	Bldg.			
ity (5)							10 000	2		50		_
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County (6)				USE ON	JLY)		COI	mmercial build	nng	==		=
	Ocean Ocean)wner	- L	SCM No	T	Name of Abater	ment Contractor (9))	s Inc			
	irm Hired by Building C MECS	7,11101					vens Environn	nental Service	, 1110	_		=
(8)	MECS					Street Address	DO F	322 Sox 322		NAMES OF		
Street Address	PO Box 34	1					Code		All room			-
City, State, Zip Code						City, State, Zip	Allentow	n, NJ 08501				_
	Crosswicks, NJ	08515			==	Telephone No.		License No.				
Project Manager for	Monitoring Firm		Telep	hone No 9) 298-	4070	(609) 2	259-9688	0	0493			=
Willoiam	Weisgarher JR.					Name of OSHA	A Monitor					
Start Date (10)		duled Co	/2/13		(,,,	verse and a second	N	IECS		_	==	=
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Other - Describe	: 8AM - 4;30PN	1										
Scope of Work (Ch	eck all that apply)					Full C	Containment with N	egative Pressure				
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	Facility (13)		(12)			other miscella	ineous)				ate	1
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Completed By		Title		ct Mai		Signay	"		. 2/1	U/ I	4	-

Date of Notification (1	2/10/12			Name	of Buildin	g Owner/Operator	r (2) exus Propertie	es Inc.	1 W	B	1	6
Agencies Notified	Type Notification			Street	t Address		Brunswick C	MAR 1	1 201	2		
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	All de la Table	a Diago	. (2)	FAC	CILITY INF	ORMATION	Type of Facility	(4)			-	
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	980 Hoo	per A	venu	ie			homes, etc.	rivate & commer) # of Floors	1000		ev.	
City (5)	Tom	ıs Riv	er				Square Feet 10,000	2	_ _	ldg. A	0 50	_
County (6)	Ocean			Cour	nty Code (ONLY)	7) (STATE		ior if being demo mmercial bu		<u></u>		
Name of Monitoring Fi		Owner		ASCM	No.		ment Contractor (9					
(8)	MECS						vens Environi	nental Servi	ces, II	1C.		
Street Address	PO Box 34	1				Street Address	PO E	30x 322				
City, State, Zip Code	Conservator NI	0051	5			City, State, Zip C		n NI 08501	3,0040			
	Crosswicks, NJ	0831.			No	Allentown, NJ 08501 Telephone No. License No.						_
	nager for Monitoring Firm Telephone No. illoiam Weisgarber JR. (609) 298-4070						59-9688	License No.	0049	3	- 1/2	
Start Date (10)		duled C				Name of OSHA	Monitor					
2/27/12			3/16/	12			M	ECS			e Line	
Occupancy Status Du						Street Address	PO F	341 Box 341				
☐ Facility Closed/Vac ☐ Abatement Perform ☑ Other - Describe:	ned Outside of Norma	al Facili	ty Hou	rs		City, State, Zip C	Code	cs, NJ 08515				
Scope of Work (Check ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		⋉ Re	enovat	ion on		☐ Mini-En	ntainment with Neclosure ag Procedure empted (*) and No	gative Pressure				
			Locatio						P	bate: Typ		
Asbestos-Containing TO BE AB IN Faci	Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) Used Solely Maintenanc Custodial Staff? (12) Yes No					Description of tos Containing Ma thermal systems surfacing, VAT other miscellane	terial (ACM) insulation, , or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
hoiler	room			X		pipe fitting	gs	80	×			
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HVAC				×		pipe fitting	gs	25	×			
basen				×		floor tile		740 SF	×			
Name of Registered V				JDEP V		Cubic Yards	Name of Regis	stered Landfill				
Stevens Enviro	nmental Service	es Inc	+	lauler ID 182		of Waste 4 CU		T.R.R.F. I	nc.			
City, State	Allentown, l					Disposal Date 3/16/12	City, State	Tullytown,	PA			
Completed By	Title					Signature	1 V/	Date				
Mahlon E. S	tevens	Pr	ojec	Man Man	ager	_ ///	1	_	3/8	/12		_

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

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			Name of Building Owner/Operator (2) Nexus Properties Inc.								-
Type Notification	1		Stre	et Address		Brunswick (Circle n 1 4	2012			
Amended Amendment		-	City,	State, Zip	Code	100	[97 64 F] B 64	-2011/2			A market sandame
justification) Cancellation	riciaali	ig	Nam	and the second of the second	ct		Marine Street and the Street S	mber_	(x	45	B
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						Subchapter	r 8 (Other than K-		ildina		
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Tom	s Riv	<i>j</i> er				Square Feet # of Floors			0,000		
	15 1(1)	-			7) (STATE	Current Use (F			-		
	Owner	T	ASCN	1 No.	Name of Abater					(V)	
MECS					Ster	vens Environ	mental Servi	ces, I	nc.		
DO D 34					Street Address	DO 1	D 222				
PO Box 34	1		-		City State Zin (BOX 322		-		_
rosswicks, NJ	0851	5.			City, State, Zip C		n. NJ 08501				
			ephone	No.	200						
		10 30 372			(609) 2:	(609) 259-9688 00493					
Sche	duled (Comple	etion D	ate (11)	Name of OSHA					-	
			12			M	IECS .				
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ed Outside of Norma	al Facili				City, State, Zip C	Code					
all that apply)					☐ Mini-End Gloveba	ntainment with Ne closure ag Procedure	gative Pressure				
***	N	omally	,					1	7507		t .
Material (ACM) TED	Mai C	ntenan ustodia	ce/		os Containing Mat thermal systems in surfacing, VAT,	erial (ACM) nsulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulat	Enclosure
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.oom			×		pipe fitting	(S	25	×			_
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mental Service	s Inc.	_ H			of Waste		T.R.R.F. I	nc.			
Allentown. N	JJ				Disposal Date 3/16/12	City, State	Tullytown.	PA			
		oiect	Mar	nager	Signature		Date		/12		
	Initial Amended Amendments Emergency (injustification) Cancellation Abatement is Takin Commerce 980 Hoce Tom Ocean In Hired by Building MECS PO Box 34 Crosswicks, NJ Initial Commerce 980 Hoce Tom Ocean In Hired by Building MECS PO Box 34 Crosswicks, NJ Initial Initial Commerce Allentown, N Title Title Allentown, N Title	Type Notification Initial Amended Amendment # 1 Emergency (includir justification) Cancellation Cancellation Abatement is Taking Place Commercial Emergency (includir justification) Cancellation Abatement is Taking Place Commercial Emergency (includir justification) Abatemen	Type Notification Initial	Type Notification Stre Initial Mamended Amendment # 1 Emergency (including justification) Name Name	Type Notification Initial	Type Notification Initial Initia	Nexus Propert Nexus Proper	Display Disp	Nexus Properties Inc. Nexus Properties Inc. Nexus Properties	Nexus Properties Inc. Nexu	Type Notification

ASB-41 MAR 00

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

Services Inc Check #04676

ate of Notification (1)	2/10/12		Name of Building Owner/Operator (2) Nexus Properties Inc.										
gencies Notified	Type Notification		S	treet A	ddress	1 1	Brunswick Cir	Gle 1 / Jan		1			
EPA DEP	Initial Amended Amendment #		- C	ity, Sta	te, Zip Co	de I awi	enceville, NJ	14 4 2012 08648	1				
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(F - 11t - 10th o	re Abatement is Taking	Place (3)				Type of Facility (100	ni.		
	Commercia	l Buil	ding	<u> </u>			School (K-12) Subchapter 8	(Other than K-12) vate & commercial	l building	gs,			
Street Address	980 Ноор	er Ave	nue				homes, etc.) Square Feet	# of Floors	Bldg	. Age			
City (5)	Toms	River					10,000	2	hed)	50		=	
County (6)		10,102		Count USE (y Code (7) ONLY)		COI	or if being demolish mmercial build	ding			_	
	Ocean Firm Hired by Building O	wner	- -	SCM N	Vo.	Name of Abater	nent Contractor (9) vens Environn	antal Service	s. Inc				
Name of Monitoring (8)	MECS		_ _					Helital Scrvice	-			=	
Street Address						Street Address	PO B	Sox 322				_	
	PO Box 341		_		==	City, State, Zip	Code	NII 09501					
City, State, Zip Code	Crosswicks, NJ (8515					Allentow	n, NJ 08501				=	
Project Manager for		T		ohone I		Telephone No.	59-9688	0	0493			_	
Willoiam	Weisgarber JK.]			8-4070	Name of OSHA	Monitor						
Start Date (10)	Scheo	luled Co	mpiet /2/1		le (11)	, adding a	M	ECS				_	
2/27/1	During Abatement (Che	ck only o	one)			Street Address	PO F	3ox 341					
	restand During Entire Pe	HOU OI F	Juaco	ment		City, State, Zip		JONE					
Abatement Perfo	ormed Outside of Norma e: 8AM - 4;30PM	i i domey	Hour	rs			Crosswic	ks, NJ 08515				=	
Scope of Work (Ch	eck all that apply)					☐ Mini-F	containment with Ne Enclosure	egative Pressure					
≥3 sf or ≥3 lf) If	X Re De	novat molitic	on			ebag Procedure Exempted (*) and N	on-Friable Procedu	ure			_	
≥160 sf or ≥260	, "	I le l	ocati	on	Γ	1110			A	bater Typ	nent e		
Asbestos-Conta TO BE IN	ation of ining Material (ACM) : ABATED Facility (13)	Used Mair Cu	Sole Sole ntenar ustodi Staff? (12)	y ly by nce/ al	Asbe (i.e	Description stos Containing M ., thermal system surfacing, V/ other miscella	Material (ACM) as insulation, AT, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate		
		Yes	No	N/A		. ~		80	×	-			
boil	er room			×	-	pipe fitt boiler bree		40 SF	×				
	ler room			×	-	pipe fitt		25	×			L	
HVA	C Room			×		pipe iiii						L	
			1	NJDEF	Waste	Cubic Yards	Name of Re	gistered Landfill					
Name of Register	ed Waste Hauler vironmental Servic	es Inc		Hauler	ID No. 8292	of Waste	e / City/State/	T.R.R.F.	Inc.			=	
City, State					7=2	Disposal Date 3/2/12	111/11/	Tullytown	n, PA	_	_	=	
	Allentown,	itle			===	Signatur		Date	2/1	0/1	2		
Completed By Mahlon	E. Stevens	F	roje	ct M	anager	_/	-					355	

Ox 22741

ETS JOB # 3787/12			AMENDM	ENI#
Date of Notification (1) 03/09/2012	Name of Building O Bed, Bath and Be		The state of the s	
Agencies Notified Type Notification	Street Address 650 Liberty Aven	ue MAR 14	2012	İ
DEP Initial Notification DOL Amended Notification	City, State & Zip Co Union, NJ 07083	1	in A.	536
DOH Cancellation	Name of Contact	+ 1 + 1 + 1 + 1 + 1 + 1 + 1 + 1 + 1 + 1		elephone Number
☐ DCA	Mr. John Purcell	100	and the second second	
	FACILITY INFO	ORMATION	- And	. 154
Name of Facility Where Abatement is Taking P	lace (3)	Type of Facility (4) School (K-12)		
Bed, Bath and Beyond Property		Subchapter 8 (Other th	nan K-12)	
Street Address		Other (i.e., private & co		gs, homes, etc.
650 Liberty Avenue		Square Feet # of Flo		ldg. Age
City (5) County (6)	County Code (7)	200,000	1	50+
Union Union		Current Use (Prior if being	demolished)	
		Commmercial Office		
Name of Monitoring Firm Hired by Building Own	ner (8) ASCM No. 00098	Name of Abatement Contra ETS Contracting, Inc.	actor (9)	
Street Address	102.4.5	Street Address		
1090 King Georges Post Road, Suite 70	6	160 Clay Street		
City, State & Zip Code		City, State & Zip Code Brooklyn, NY 11222		
Edison, NJ 08837	Telephone Number	Telephone Number	License N	umber
Project Manager for Monitoring Firm Pat Sisk	(732) 771-0051	718-706-6300		00511
	mpletion Date (11)	Name of OSHA Monitor		
03/26/12	12/31/12	Environmental Tactics	, Inc.	
Occupancy Status During Abatement (Check of Facility Closed/Vacated During Entire F	only one) Period of Abatement	Street Address 64 Broad Street		
Abatement Performed Outside of Norm		City, State & Zip Code		
Describe:	stade Morking Hours	Matawan, NJ 0774		
Other - Describe: Work Area Vac from 7:00am -	ated: - Working Hours 3:30pm			
Scope of Work (Check all that apply)	4in m	Full Containme	nt with Negative P	Pressure
☐ Demolition ☐ Renova	tion	Mini-Enclosure	ne man rioganio i	
∠ Large Project☐ Quantity is ≥ 3 SF or ≥ 3 LF ACM		Glovebag Proce	edure	
Quantity is ≥ 160 SF or ≥ 260 LF ACM		Other: Non F	riable Electric	Cable
Location of	Is Location	Description of	Amount	Abatement Type
Asbestos-Containing	Normally Used	Asbestos-Containing	(Specify Square Feet or	(Specify: Removal, Repair,
Material (ACM)	Solely by Maintenance or	Material (ACM) (i.e., thermal systems	Linear Feet)	Encapsulation or
TO BE ABATED in Facility		nsulation, surfacing, VAT		Enclosure)
(13)	(12)	or other miscellaneous)		
1 st Floor	No	VAT	100,000 SF	Removal
2 nd Floor	No	VAT	60,000 SF	Removal
11001				
Name of Registered Waste Hauler	NJDEP Waste Hauler ID	Cu. Yds. of Waste	Name of Regist Minerva Ente	
Tri State Transfer	19551	Disposal Date	City, State	. p.1.000, 11101
City, State Bronx, NY		ТВР	Waynesburg,	ОН
Completed By (Print or Type) Title	ECT EXECUTIVE	Signature		Date 03/09/12
INOT JOHNSON		MAN /		

UK5597

STATE OF NEW JERSEY NOTIFICATION OF ASBESTOS ABATEMENT (PURSUANT TO NIAC 8:60-7 AND 12:120-7

(PURSUANT TO NJAC 8:60-7 AND 12:120-7
ANNUAL NOTIFICATION

Date of Notification (200					Building Owner / Op	erator (2)	SIV	16 11	7/18		
$\frac{03}{}$	/				Elysa & Alan Todd Street Address							
Agencies Notified	Type of No	ntificati	on		25 Wood		MAR	1	11.6			
✓ EPA	√ V	Initial	OII			te, Zip Code	11/4/-	14 20	12	-/-		
☑ DEP		Amend	led			NJ 07670			- 1			
☑ DOH			lment i		Name of	Contact	ASBESTO.	Telepho	ne Numb	er		
☑ DEP ☑ DOH ☑ DOL ☐ DCA				// justification	Chris Lon	nbardo	Mercoro.	III. Etilo steine				
DCA		Cance	liation	-	ACILITY IS	FORMATION		Accessor				
					ACILITI	NFORWATION		4 1444 50 146	1-14 July 201			
Name of Facility Whe	re Abatem	ent is T	aking	Place (3)		Type of Facility (4)		and the second	A			
Private Residence												
						School (I		41	0)			
Street Address							ter 8 (Other ., private &					
25 Woodhill Road						The second second	omes, etc.)	0				
City (5)	County (6)			County Code	(7)	Square Feet	# Of Floor	'S	Building	g Age		
Tenafly	Bergen					3,500		2				
Tondity						Current Use (Prior i	being dem	olished)	60+	,		
Name of Monitoring F	irm Hirad	by Blde	n Own	or (8)	IASCM NO	Private Residence Name of Abatement	Contractor	(0)				
			y. Own	ei (0)	ASOM NO			(3)				
Consulting Services of	America (C	CSA)	va temponia-s-			Slavco Construction I	nc.					
Street Address						Street Address						
26 Lorenzo Court						164 Getty Avenue						
City, State, Zip Code Matawan, NJ 07747						City, State, Zip Code						
Project Mngr. For Mo	nitorina Fi	rm		Telephone Nu	mber							
Michael Chain	illioning i i			732-921-9223		Clifton, NJ 07011						
Sheduled Start Date (10)	Sched.	Comp	letetion Date (1	11)	Telephone Number		License	Number			
03 / 19	/_12_	_0	3	/ <u>31</u> /	12	973-478-4848		00724				
Occupancy Status Du	ring Abote	mont /	Chook	Only 1)	ENG-AU - FIRST	Name of OSHA Mon	itor					
				tire Period of		Slavco Construction I						
Abatement			•			Street Address						
		d Outsi	de of N	lormanl Facility	,	164 Getty Avenue				53.8		
Hours - De												
Other - Des	scribe:	8:00 an	n to 4:3	0pm		City, State, Zip Code Clifton, NJ 07011						
Scope of Work (Chec	k All That	Annly)				Cinton, No orott						
Coope of Work (once		. PP.37										
✓ Demolition]	Renovation		Full Containment wi	th Negative	Pressure	э			
☐ ≥3sf or ≥3lf						Mini - Enclosure						
✓ ≥160 sf or	260 IT					Glovebag Procedure Non-Exempted (*) ar		ble Proce	dure			
Location of		I:			Descript			Abateme	nt Type			
Asbestos Contai			ition	As	bestos - C			R	D	E N	E N	
Material (ACN TO BE ABATE	A STATE OF THE STA		nally ed		Material e., therma		Amount (Specify	M	R	C	C	
in Facility	<u>.</u>	727	ely			facing, VAT,	SF or LF)	Ö	P	A	Ľ	
(13)		by N				ellaneous)	/	V	A	P	0	
	- 1	tena						Α	1	S	S	
			odial					L	R	U	U R	
		Staff	ON/A							-	<u> </u>	
Garage Roof				Roofing Shingle	es		900 SF	7				
Basement				Floor Tile			1100 SF	V		V		
			-									
		Land Day				10.						
Name of Registered V	Vaste Haul	er		NJDEP Waste	Cubic Yards	Name of Registered	Landfill					
Slavco Construction Inc	3.			S18508	of Waste	G.R.O.W.S Landill					ann an	
City, State					Disposal	City. State		De Likana ser				
L - 7					Date	Morrisville, PA						
Clifton, NJ					TBD					To :		
Completed by (Print o	r Type)			Title		Signature				Date		
Vivian Jurcevic				Administrative a	Assistant	1/lin	200	kuci	un	March	7, 2012	
ASB-41					THE PERSON NAMED IN	1,000	1	/		A		

MO 19832967382

State of New Jersey NOTHICATION OF ASBESTOS ABATEMENT

MAR 1 4 2012

SEE ATTACHE!	OPEN FIL	ING	(Pu			8:60 and 12:120					-	
Date of Notfleation (1)				Name	a of Buildin	ATEL-	WCENT	TECHNOCI	JG-1	ES		
Agencies Notified	Type Notification	n		Street	600	MOUNTA	N AVE	The state of the s				1.
Ø PA □ Dep	Amended Amendment	- }		Chy,				07974	1			
₩ DOL	☐ Emergency	includin	19		of Coma	icay HIC	<u> </u>	Nimit	er_	=		=
⊠ DCV	justification) Cancellation	,		N-amx	ARR	Y FEDER	cico	à				
			لسا			ORMATION						
Name of Facility Where	a Abatement is Tak	ng Plac	e (3)				Type of Facility					
	er- week	T 7	€C1	(MOL)	og (es	INC	School (K-1	8 (Othor than K-12	?)			
Street Address	(au to the	A	<u>ب</u>				homes, atc.	onvato & commorci	al bullo	ngs.		
	10UNT ANU	CC 10 CC (7)			2- /		Square Feet	# of Floors		dg A		
MURRA	y Hill,	N:	1_	07	174	C-700, V.C	30000	rior if being demails	-	=	_	=
County (6)				Lou	inty Code (ONLY)	7) (STATE	OFF					
U IV (m Hired by Building	Owner	— T	ASCM	No.	Name of Abatem	nent Contractor (S					
(8) HULMAN	U ENVIRAN	MEUT	AL				PRO. IN	C.				_
Street Address						Street Address	KARKU!	S AJE .				
	Cours 22					O' Ciala Zia C	`odo					-
City, State, Zip Code	NJ.	0	78	03		WOOD	BRIDGE	License No.		==		_
Project Manager for Me	ontoring Firm				1800	7.52-726	.3111	0061	5			_
MIKE N Stan Date (10)	Sch	eduled C				Name of OSHA	Monitor	11102145	h-k-			
3-15-	12			12		HILLE Street Address	MAN CA	JUIRONHEL	11K	=		=
Occupancy Status Dur	ing Abatement (Ch	ock only	(ane)	ment		1600	POUTE 2	2 EAST				
Facility Closed/Vaca	ated During Entire P	enou on al Facili	ly Hou	18		C. Clara Vin C	~de	Partition law and the state of	>	3501		
Other - Describe.	04 (7010-00					UNIO	<u> </u>	0780	<u>></u>	_		_
Scope of Work (Check	all that apply)					⊠ Full Cor	ntainment with No	gativo Pressuro				
≥3 sf or ≥3 lf		X R	anovat	ion		Mint-End	closure oa Proceduro			•		
≥160 sf or ≥260 If			emalitic	arı		Non-Ex	empted (*) and No	on-Friable Procedu		bates	ment	-
			Location							Тут		
Location	n of	Usod	d Sole	y by	Astros	Description of tos Containing Mar	f terial (ACM)	Amount			ш	
Asbestos-Containing	Material (ACM)	C	ustodi	a!	(i.c.	thomal systems in	insulation,	(Specify SF or UF)	Removal	Repair	ğ.	Circoso
IN Facili	ity		Staff? (12)			other miscellane	ous)		le le	air	ncapsulate	3
(13)		Yes	No	N/A							e	L
Bldg. 1, R	m C502	+	×		VA	T		200 SF.	×	_		_
									+-	-	-	
									+	-		-
			L.	UDEP '	Wastn	Cubic Yards	Namo of Rcg	Istarod Landtill	سل	_		
Name of Registered W		1-16	1 6	touler II	O No.	of Waste		WS.INC.				
NEWARK	CARTING.	100		450	27		City, State		1			
City, State NEWARK	· NJ.					3.17.12	MORE T. Tol	SVIUE: 1	74	-		-
Completed By	118	PRES				Signature	J. T. Tol	Pol 3.	13.	12		_
DAVID T.	OLCHIN _	1 10.00	3 4			-1-000						_

- FOR 2012 -OPEN FILING

NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 12:120)

Date of Notffication /1	00 11		Name of Building Owner/Operator (2) ALCATEL-LUCENT TECHNOLOGIES									
	1-28-11.		Street Address									
Agencies Notified	Type Notific	ation			ALL ALE	-				1		
图 BPA	Initial Amende	4		O MOUNT	AND AVE	and the second second second	10		4	=		
☐ 08P	Amendr	ent#	City, State,		NJ	07974	14	I was a	1			
1		icy (including		RAY HILL				1.	=			
図 DOH 図 DCA	justificat		Name of Co			Telephone Nu	mber		- 1	- (
1200				LY FEDERIC	0							
		•	FACILITY	INFORMATION	Total #2,527 when the bear							
Name of Facility Where	Abatement is '	Faking Place (3)			Type of Facil	ity (4)			-			
ALCATEZ	- LUCEN:	TECH.	INC.	-	School (K							
Street Address						er 8 (Other than K-						
600 Mou	JASTAINS	ALT.			homes, or	, privato & commo	rdal bi	ulkan	ga.			
City (5)	MATERIA	7,00			Square Feet	# of Floors	of Floors Bldg					
MURRAY	4111	N.T. O	7974		300,000	5		65	-			
County (6)	7,00	700-0	T Course Cou	e (7) (STATE		Prior if being demo	Nisner			==		
			USE ONLY)	OFFI		48-0116-0	-,				
UNION		7-3-7	155111	I Name of Aboles	ment Consactor		_		=			
Name of Monitoring Firm			ASCM No.		PRO, 11							
(B) HILLMAN	ENVIRON	MENTAL			ICO, II	· · · · · ·		_				
Street Address	99			Street Address	VARI	IC AIR						
1600 Ra	DIE LL	erst_				US AVE	· -					
City State Zip Code				City. State, Zip C	Code	- A/T/	770	0-	_	200 - 1000		
UNION.					SICIOGE	E, NJ C	10	73				
Project Manager for Moi			ephone No.	Telephone No.	17111	License No.	11					
MIKE NE	ELSON .	1908	-688-780	732-720	6-5/11	00	0/	2				
Start Date (10)	Se	cheduled Comple	ation Date (11)	Name of OSHA	Monitor							
OPEN		OPEN		HILLMA	N ENVIRO	MANTAL						
Occupancy Status Durin	ng Abatement (C			Street Address					,			
Facility Closed/Vacak			ment	1600 R	T. 22 EA.	ST						
Abelement Performed	d Outside of No	mai Facility Hou	rs .	City, State, Zip C	ode			1227				
Other - Describe:				UNIO	N, NJ	07803						
Scope of Work (Check a	il that apply)			<u> </u>								
		[C] D		1 Full Con ☐ Mini-End		ogativo Pressuro						
]≥3 9f or ≥3 lf ≥160 sf or ≥260 lf		Removati Demotitio		Gloveba	g Procedure							
75,000 \$1.01 5500 11				Non-Exe	empted (") and N	on-Friable Procedu	TO OT			٠		
		Is Location					1	Abatta				
		Viced Soleh	0.000	Description of				1 1/1)E	,		
Location of Asbestos-Containing M		Maintenan	ce/ Asb	stos Containing Mate	erial (ACM)	Amount			m	_		
TO BE ABATT	ED	Custodia Staff?	(i,t	untacing, VAT,		(Specify SF or LF)	Removal	2	Encapquiate	Enclosus		
(N Facility (13)		(12)		other miscellaneo		Seu a)	1 8	Repair	100	380		
(15)							<u> </u>	1	118	5		
		TES NO	N/A					\Box				
		+	-				T	П		П		
		+					1	\vdash		\sqcap		
			-				1	\vdash	-	\vdash		
		-1	500 141-	T Cubic Yards	Namo of Regi	stored Leochill	لــــــــــــــــــــــــــــــــــــــ	لـــا	لــــا	\dashv		
lame of Registered West			DEP Wasto ruler ID No.	of Waste								
NEWARK	CARTING	- INC. 3	1509_			S. INC-						
ity, State				Disposal Date	City, State		PA	100000				
NEWARK !	NJ	Land Harman			MORRIS	1000						
ampleted By	Ti	le		Signature	0 0	/ Date	28-	. 41				
DAVID T. TO		PRES.		Vavia	RT. Tolo	m 12-	40.	- 44				

Jan Jan

	1	C	1 1	
CHECK #:	1	8	10)
J. ILOI (-	128	-	

Date of Notification (1)			Name of Building Owner/Operator (2)												
3 (2.1.2 Agencies Notified Type Notification			1	1.	Much	110	rtox13		1	11/2/ 11/1	11_		\dashv		
Agencies Notified	S	treet Add		den.	Avenue	MAF	1 4 2012								
□ EPA □ DEP	☐ Initial ☐ Amended		C	PEROLUSION NO TO	Zip Code					TENGER!	9 7	1			
⊠ DOL	Amendment Emergency (i			\sqrt{N}	WICK U	21	NJ 107	461-		<u>.</u> i	!		\Box		
⊠ DOH	N	lame of C					Telephone Numb	per	٠						
□ DCA	justification) □ Cancellation			را	MINI								\dashv		
Name of Facility Where	Abatement is Taking	Place (3)		FACILI	TY INFOR	RIVIATION	Type of	Facility (4)					\neg		
HAV total		1 1000 (0)					□ Sc	hool (K-12))						
Street Address	A.						T Sul	hchanter 8	(Other than K-12) vate & commercial	huildir	nas h	omes			
510 Ed	ien Aleni	j-C					et	c.)							
City (5)								Square Feet # of Floors Bldg. Age							
Whickof	<u>t </u>							()()	if being demolishe		58	<i>!</i>			
County (6)				County Co		2007-1-120000011-2	Curren		ndevihat.	u)					
Name of Monitoring Firm	Wilding C	Jumar (8)	1	ASCM	No	$\neg \neg$	Name of Abate								
Name of Wonttoning Firm	n miled by building c	Wilei (0)		Accivi	110.		A. MAC Cont								
Street Address							Street Address								
							105 Lowell Ro	oad							
City, State, Zip Code							City, State, Zip Glen Rock, N	v, State, Zip Code en Rock, NJ 07452							
Project Manager for Mo	nitoring Firm		T	Telephone No.			Telephone No. License No.								
•				2			201-262-5841 00156								
Start Date (10)		pletion D			Name of OSH Omega Env	ne of OSHA Monitor mega Environmental Services Inc.									
				L- 1.			Street Addres					************			
Occupancy Status Dur Kill Facility Closed/Vac	cated During Entire	Period of Ab	ateme	ent			280 Huyer S	treet			e commence		-		
☐ Abatement Perform	ned Outside of Norn	nal Facility H	ours					y, State, Zip Code ackensack, NJ 07606							
☐ Other - Describe:															
Scope of Work (Check	All That Apply)	1 _						Containmer	nt with Negative Pr	essure					
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	f		novati nolitio				☐ Mini-	Enclosure ebag Proce	edure						
							□ Non-			+					
			Locati	0.000.000						Abatement Type					
Locati				Solely by Asbestos C			scription of	LACEAN	Amount		TTI				
Asbestos-Containin	ng Material (ACM) ABATED	Maii	ntenar				systems insula	tion,	(Specify	8	7	Encapsulate	Enc		
In Fa	acility	Custo	odial 5 (12)	Statt?		surfac	cing, VAT, or niscellaneous)	-	SF or LF)	Remova	Repair	psul	Enclo sure		
(1	3)	Yes	A.L.	T NI/A		Outor II	noonamer,			1 5		ale	4		
		Yes	No	N/A					110.15	X	+-	\vdash	-		
Dasir	nent			X	j	DIPT	11150100	17077	110 LF	1	+-	-	+-		
										+	-	-	+-		
										+	-	-	+		
J. Charles									Daniele - d I - dell						
Name of Registered W	/aste Hauler			JDEP W lauler ID		Oubic of Was	eto		Registered Landfill						
Rovic Transport			1000	20785			:47		Bethlehem Landfill	Corp.					
City, State, Zip Code Riverdale, NJ 07457				1	sal Date		te, Zip Code em, PA 18015								
					- Carrie and As		ignature _n	1//	D	ate					
Completed by R. McDonald						/	KIMI	Y and y		う	12	12			

Data of Natification (1)				Name of	Puilding O	wpor/Opo	rator (2)	ME	6	E A W	7 12	T	7	, j)		
Date of Notification (1) 3-5-2012				Bergen County Tech and Special Services												
Agencies Notified Type Notification X EPA Initial				Street Address 35 Piermont Road MAR 1 4 2012												
EPA DEP DOL	Amended Amendment		City, State, Zip Code Rockleigh, NJ 07647													
	Emergency justification)			Name of	Contact		elephone Number									
X DOH X DCA	Cancellation			cavetto			- Lander of the same of the sa									
Name of Facility Where A Bergen County Spe Street Address)	FACIL	LITY INFO	RMATION	Type	of Facility (4 School (K-12 Subchapter 8 Other (i.e. pr	2) 3 (Othe			lings.	home	es.		
35 Piermont Road								etc.) re Feet		Floors						
City (5) Rockleigh, NJ 0764	7				***		7500)		50+						
County (6) Bergen				County C (STATE U	Code (7) ISE ONLY)			ent Use (Prio			hed)					
Name of Monitoring Firm TTI Environmental,		Owner (8)						me of Abatement Contractor (9) _ Group Inc								
Street Address 1253 North Church	St							et Address O Hamburg Tpke								
City, State, Zip Code Moorestown, NJ 08	507	2.						State, Zip Code omingdale, NJ 07403								
Project Manager for Monitoring Firm Mike Stocku				The state of the s			elephone N 201-710-9		License I	ense No. 084						
Start Date (10) 3/13/2012	d Con					ne of OSHA Monitor _ Group Inc										
Occupancy Status During		Street Address														
Facility Closed/Vac	ated During Entire	Period of A	Abatem	ent		140 Hamburg Tpke										
Abatement Perform Other – Describe:	ed Outside of Norr	mal Facility	Hours			ip Code dale, NJ 0	Code le, NJ 07403									
Scope of Work (Check A	II That Apply)						1000000			17-11-11						
≥3 sf or ≥3 lf x ≥160 sf or ≥260 lf	tion ion		Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure													
	Locati	<u></u>				II EXOMPLES	- 1.1011 1.113	Abateme								
Location	n of	1	Vormal	ly		Descri	Description of				Туре					
Asbestos-Containing TO BE AB In Faci	intena odial 8 (12)	olely by nance/ al Staff? Asbestos Co (i.e. therm			ontaining Material (ACM nal systems insulation, rfacing, VAT, or er miscellaneous)				Removal	Repair	Encapsulate	Enclosure				
		Yes	No	N/A		Cailing	Diagtor		6.	15 SE	x		-			
Long Classroom		-	X				Plaster			615 SF		-				
Long Classroom		-	X		0		/all Plaster oor Tile/ Mastic		800 SF 40 SF		X	-				
					9x						X	-				
Men's Res	X	UDERW	anto T		Plaster	Name of F		53 SF								
Name of Registered Waste Hauler GL Group Inc					DEP Waste Cubic Yards of Waste 3034 30			ds Name of Registered Landfill Cumberland, Landfill								
City, State Bloomingdale, NJ		30004		Disposal 3-29-20		City, State			-							
Completed by				Signature Man Addition				Doto								
Michael B Solakov						Free	or form			,, 0, 20						

200	Pac	je 1	of	
	100000000000000000000000000000000000000			

			(Pu	irsuant to	o NJAC 8:	60 and	12:120)			9-	Check	415	23					
Date of Notification (1) 3/7/2012				Name of Building Owner/Operator (2) East Orange Board Of Education															
Agencies Notified	otified Type Notification			Street Address 715 Park Ave MAR 1 4 2012															
EPA DEP DOL	Amended Amendment		City, State, Zip Code East Orange, NJ 07017-1026																
X DOH X DCA	Emergency (including justification) DCA Emergency (including justification) Cancellation						Name of Contact Dario Lambkin							Telephone Number					
				FACIL	ITY INFOR	RMATIC	NC												
Name of Facility Where Ecole Troussaint L	Abatement is Taking Louventure School	Place (3)						☐ s	of Facility (chool (K-1	2)	er than K-1		usk sa						
Street Address 330 Central Ave	Annual Control of the					Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, etc.)													
City (5) East Orange		w//v 117=110						60,00				Bldg. Age 100+							
County (6) Essex				County C (STATE U	code (7) ISE ONLY)				t Use (Prid		.22	ihed)							
Name of Monitoring Fir Whitman	m Hired by Building C	owner (8)						me of Abatement Contractor (9) L Group, Inc											
Street Address 116 Tices Lane, U	nit B-1							eet Address 0 Hamburg Tpke											
City, State, Zip Code East Brunswick, N	J 08816						r, State, Zip Code comingdale, NJ 07403												
Project Manager for Mo Kevin Lovely						phone No. License No. 01084													
Start Date (10) 03/30/2012	d Com	ompromon Date (11)				me of OSHA Monitor L Group, Inc													
Occupancy Status Dur				Street Address 140 Hamburg Tpke															
Facility Closed/Va Abatement Perfor Other – Describe:	Hours	ement urs City, State, Zip Code																	
Scope of Work (Check ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enova emolit				×	Min Glo	Containm i-Enclosure vebag Prod i-Exempte	e cedure	1-72		cedur						
			Locati	cation				-1-0				Abatement Type							
Locati Asbestos-Containir <u>TO BE A</u> In Fa (1:	d Sole intenar todial S (12)	Solely by enance/ (i.e. therm sur 12) othe			escription of ntaining Material (ACM) al systems insulation, acing, VAT, or miscellaneous)			Amount (Specify SF or LF)		Removal	Repair	Encapsulate	Enclosure						
Auditorium	2rd Floor	Yes	No X	N/A		Ceili	ng Pla	ster		1.7	20 SF	X							
Auditorium 3rd Floor Auditorium 3rd Floor					-		III Plas				00 SF	X							
				JJDEP W	losts	Cubic	Vardo		Name of	Registe	red Landf	ill	<u></u>						
Name of Registered Waste Hauler GL Group, Inc				lauler ID 033034	No. of Waste			Name of Registered Landfill Cumberland Landfill			"								
City, State Bloomingdale, NJ				Disposal Date City, State TBD Newburg, Pa							20016	10000							
Completed by Title President						S	Signatur	Date 3/7/2012											