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

B & G proj. #: 2012-59

Check # 5127

Date of Notification	1 (1)	I I Name	of Building Own	er/Operator (2)	0	F 6			12			
0 3 /1 3	1/12	11	olyn & John K				e IVe	m				
Agencies Notified	Type Notificat		Address	-				11 111				
☐ EPA	✓ Initial	176	North Maple	Avenue		∭ MAR	1 5 2012		1			
∐ DEP		City, S	State, Zip Code					1	-			
DOL	Amend	ment Bas	sking Ridge, N	J 07920				1				nounced.
☑ DOH	_		of Contact			State Mit allows a straightenant and the state of the sta	Telepho	ne Numbe	r			
☐ DCA	Cancella		rolyn & John k	Coch		on the processor			5			
	******		FAC	ILITY INFORMA	ATION		1 1272					
Name of facility wh	nere abatement i	is taking place (3	3)				Type of Facility			3 7 7 E		
Carolyn & John	Koch							ol (K - 12) hapter 8 (C		nan K	-12)	
Street Address							Other	(Private/C	omme		,	
176 North Map	le Δvenue						Bldgs Square Feet	./Homes, e		RI	dg. A	ne
City (5)	TO TEVENUE	County (6)		Cou	nty Code (7)	Square reer	# 01 1 1001	13		ug. / t	gc
Basking Ridge	NI 07920	Somerse				e use only)	Current Use (F	Prior if bein	g dem	olish	ed)	
Name of Monitorin				ASCM No.	П	Name of Abatement C				-	into estato	
n/a						B & G Restoration	. Inc.					
Street Address					-	Street Address						
						105 Ryerson Road						
City, State, Zip Cod	e					City, State, Zip Code						
						Lincoln Park, NJ	07035					
Project Manager for	Monitoring Firm	1	Phone Numb	er		Telephone Number		License	Numb	er		
					_	973-696-6869 Name of OSHA Monito		0378		_		
Scheduled Start Da	te (10)	Sched. Cor	npletion Date (11	1)		B & G Restoration						
3/23/2012		3/23/2012	2			Street Address	, 1110.	***		_		
Occupancy Status I	Ouring Abatemer	nt (Check only o	ne)			105 Ryerson Road						
Facility closed Abatement per Describe:	I/vacated during erformed outside					City, State, Zip Code						
Other-Describ	oe:				-11	Lincoln Park, NJ	07035					
Scope of Work (ch	eck all that apply	/)										
□ Demolition		Renovation			F	ull Containment w/nega	tive pressure	Glovel	oag pr	ocedi	ıre	
\boxtimes >3 sf or >3 If		≥160 sf or ≥260	lf		× N	ini-enclosure	· **	Non-fr	iable p	огосе	dure	
Location of			mally used solely				1		R	R	Е	Е
asbestos-con		by maintenand staff(12)	e/custodial			bestos-containing	Amount	SE 05	e m	e p	n c	n
material to be abated in faci			No N/A	material (A	ACM)		(Specify LF)	SF 01	0 V	а	а	C L
		100	NA NA						е	r	р	
basement main ro	THE RESERVE OF THE PARTY OF THE			pipe insulati			125 lf		M	Ц		
basement tool roo	om			pipe insulati	ion		15 lf		N N	Ц	브	부
									님	브	븐	님
									!!!	片	부	牌
Registered Waste H	auler	NJDEP Ha	uler ID# 1 C	ubic Yards of W	Vaste	Name of Registered L	andfill		Ш	Ш	Ц	Щ
B & G Restoration		19563		1/2 yards		Tullytown Resource		Center				
City, State	2712/2021		Disposal D			City, State			- 1			
Lincoln Park, N.			3/26/20			Tullytown, PA						
Completed by (Print Gordana Luna	or Type)	Title Treasurer		Signature	(Gordana Luna		Date 3/13/2	012			
Joi Gallia Dalla								3/13/2	-12	-		

Date of Notification (1) 3/13/2012				Name of P.S.E.	f Building	Owner/C	perator	(2) 5 5 5	11 1		A STATE OF THE PARTY OF THE PAR			
Agencies Notified	Type Notification			Street A	ddress			11 11	1 5 20	212				
EPA DEP DOL DOL	X Initial Amended Amendmen Emergency justification)	(including	-	City, Sta SOUT	HADLEY ate, Zip Co "H PLAIN f Contact EN THC	ode NFIELD	<u>دا</u> ا	7080	1 5 20	L Craff D	ımber			
X DCA	Cancellation	1		STATE OF SERVICE OF SE	LITY INFO	3214181111111111111111111111111111111111	ON					è		
Name of Facility Where P.S.E. & G	Abatement is Takir	ng Place (3)					Type of Facility (2)					5,
Street Address 751 CLIFF ROAD								Subchapter Other (i.e. p etc.)	rivate &	commerc	cial bui			es,
City (5) SEWAREN								Square Feet N/A	# of N/A	Floors		3ldg. N/A	Age	
County (6) MIDDLESEX				County (Code (7) USE ONLY	<i></i>		Current Use (Pric SWITCH STA		g demolis	shed)		7	
Name of Monitoring Firm ENVIRONMENTAL		Owner (8)		ASCM 0045				of Abatement Con			A			
Street Address 64 BROAD ST.								Address VHITEHEAD A	AVE					8
City, State, Zip Code MATAWAN, NJ 07	747							ate, Zip Code ΓΗ RIVER, NJ	08882	2				
Project Manager for Mor	nitoring Firm	4		Telephor 732-29	ne No. 90-2217		Telepho 732-4	one No. 32-8350		License I 01111	No.			
Start Date (10) 3/27/2012		Schedule 4/3/201		npletion [Date (11)			of OSHA Monitor UE SYSTEMS	S OF A	MERIC	:A		**********	
Occupancy Status Durin								Address VHITEHEAD A	VF.					
Facility Closed/Vac Abatement Perform Other – Describe:	ned Outside of Norr	nal Facility					City, St	ate, Zip Code TH RIVER, NJ		2				
Scope of Work (Check A	All That Apply)						300	111111111111111111111111111111111111111		-				
≥3 sf or ≥3 lf x ≥160 sf or ≥260 lf			lenova emolit				×	Full Containme Mini-Enclosure Glovebag Prod Non-Exempted	edure				re	40
		100000	Locati	88888897 U								Aba	ement	t ·
Location Asbestos-Containing TO BE AB In Faci (13)	g Material (ACM) BATED ility	Used Mai	d Sole intenai odial S (12)	ely by nce/ Staff?		tos Conta thermal surfac		aterial (ACM) insulation, r, or	(S	nount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
VACATE	D LOT	1	X		TI	RANSI	TE CO	NDUIT	80	0 LF	x		\vdash	
			20											
						1,0								
Name of Registered Was	ste Hauler		N	JDEP Wa	aste	Cubic \	rards	Name of F	Register	ed Landfil	1			
WASTE MANAGEM				lauler ID I 125	No.	of Was 150	te	GROWS	NOR		7			
City, State ELIZABETH, NJ						Disposa 4/3/20		City, State MORRIS		E, PA				
Completed by CAROL RAIMO		Title OFFIC	CE M	IGR.		Sig	gnatare	e Ra	·	-	ate 13/20)12		

1203-4453 Check #3907

Date of Notification	Company of the Compan						Owner / Operat			E	M	9 6	
Agencies Notified	ancies Notified EPA						Omison nos	pital			7 11	1	_
					et Add Rob		od Johnson	Place	MAR 1 6: 20	10		mpart. b.	
☐ DEP		al		-		& Zip C			-1-/17 -1-0 -20	IZ :	and the		
⊠ DOL		ended #		The state of the s			, NJ 08901			1		-	
□ DOH	☐ Eme	rgency				ontact	,	7		Telepho	ne N	Jumi	er
				Kev	in Mo	Terna	n	The latest sections.	1771	10100110	110		1
					CILI	TY INF	ORMATION		I strained	71.7			-
				3)			Type of Fac	ility (4)			4.5	- 300 -	
Robert Wood Jo	hnson Hos	pital-Reside	ntial				School	(K-12)					
Street Address							Subcha	pter 8 (Other t	han K-12)				
6 Prospect Ave.									ommercial buildin	gs, hom	ies,	etc.)	
							Square Feet			Bldg. Ag			
City (5)		County (6)	Co	untv	Code	(7)				33			
						(.)	Current Use	(Prior if being	domolished)		Table 1		10. 75%
INGM DIGIISMICK		Mindiesex					Residentia		demonstred)				
Name of Manitorina	Eirm Hirod I	L Puilding Our	or (9)		IAC	CM No.							
		by Building Owi	iei (o)		AS	CIVI INO.	AbateTech	atement Contra	actor (9)				
Street Address		2010-00-00-00-00-00-00-00-00-00-00-00-00-					Street Addre						
280 Huylar Stree	t						PO Box 25						
City, State & Zip Co							City, State &						
		06						n, NJ 08048					
Project Manager for			UCC0000000000		e Num		Telephone N	Number	License N				
	. ((0)	0 1 1 1 1 0			8400		609-265-21			0052	29		
		Scheduled Cor	3/30		ate (11	1)	Name of OS EMSL Ana						
Occupancy Status I	During Abate	ment (Check or	nly on	e)			Street Addre						
Facility Clos	sed/Vacated	During Entire P	eriod	of Ab	atem	ent	108 Haddo	n Ave.					
Abatement	Performed O	utside of Norma	al Ho	urs			City, State &	Zip Code					
Describe:							Westmont,	NJ 08108					
Facility Occ	upied During	Abatement						•					
Scope of Work (Che	eck all that a	pply)											
									ontainment with N	egative	Pres	sure	9
			\bowtie		novati				nclosure				
≥160 sf ≥26	O If			De	molitio	on .		Glove I	Bag Procedures				
								Non-Ex	kempted and Nor	-Friable	Pro	cedu	ire
	ocation of			Loca			Descriptio		Amount	Aba	ateme	ent T	уре
	os-Containir	ig			Used		Asbestos-Cor		(Specify				
	erial (ACM)			olely			Material (A		SF or LF)	D D		En	m m
	BE ABATED Facility				nce or Staff?		i.e., thermal s) nsulation, surfa			l e	Repair	àp	JC C
"	(13)		Cust	(12)			or other miscel			Removal	air	Encapsulate	Enclosure
	()		Yes	No	N/A					-		te	Ф
Basement			П			-	Duct Insul	ation	100 SF		П		
2 nd Floor Kitchen	Ex.		H	H		1	Linoleum Fl		700 SF		H	H	H
			H	H							붜	井	片
Exterior Roof			H		+#	-	Built Up Ro	oring	1,500 SF		뮈	井	H
			-	님	井井					니님	님	\square	\Box
				H	HH		- V-AAn			- $ $ $+$ $ $	님	님	Ш
15 11	101-1-11-1		Ш	4		101	0.11.1/	lu (5					Ш
Name of Registered	Waste Haul	er		1 (3)(3)(3)			Cubic Yards	Name of Reg	gistered Landfill				
AboteTech Inc				Ha	auler I		of Waste	TDDEL	I STILL				1
AbateTech, Inc.					187		12	TRRF Land	11111				
City, State Lumberton, NJ							Disposal Date 3/30/12	City, State Tullytown,	PA				,
Completed By (Print	or Type)			Tit	tle		Signature	1 -		Date	-		-
Gwen Trumbetti	7,7					oord.	(mr	J			3/13/	12	

10/1799

Date of Notification (1) 2/29/12			T	Name of David	f Building Lewis	Owner/0	Operator	(2)		1	1 8	-15				
Agencies Notified	Type Notification		1	Street A	ddress milton R	nad			MAF	7 1	5 201	12	1	//	1	
EPA DEP DOL DOH	Initial Amended Amendment Emergency justification)	(including	-	City, Sta Glen F Name of	ite, Zip Co Ridge, N f Contact	de	28		Estate Section 1997	Tel	enhone	å. Numba	-	The section of the se		
DCA DCA	Cancellation			David			<u> </u>		110000	1				~~	1	
Name of Facility Where House	Abatement is Takir	ng Place (3)		FACI	LITY INFO	DRWAII	ON		of Facility (4 School (K-12	•						
Street Address 12 Hamilton Road			2					×	Subchapter 8 Other (i.e. precto.)	(Oth ivate	er than h & comme	K-12) ercial bu	uildir	igs,	home	es,
City (5) Glen Ridge								Squa N/A	re Feet	# o	f Floors		Bld N/A	g. A	ge	
County (6) Essex				County (Code (7) USE ONLY		_	Curre	ent Use (Prior se	if bei	ng demo	olished)				
Name of Monitoring Fire N/A	m Hired by Building	Owner (8)		ASCM	No.				tement Cont ement, Inc		(9)					
Street Address							1 . N. T. O. T	Addre	ss gren Aven	ue					68	
City, State, Zip Code				-					ip Code IJ 07512							
Project Manager for Mo	onitoring Firm		T	Telephor	ne No.		Teleph 973-	none N 345-8			License #0067					
Start Date (10) 3/13/12		Scheduled 3/14/12	Con	npletion (Date (11)				HA Monitor ement, Inc			-				
Occupancy Status Duri	ng Abatement (Che	ck Only One)				Street		770				-			
Facility Closed/Val Abatement Perform Other – Describe:	cated During Entire med Outside of Norr Occupied	Period of Ab nal Facility H	atem	ent			City, S	state, Z	gren Avenu ip Code IJ 07512	ne 						
Scope of Work (Check	All That Apply)				24111125524					-		-	_	-		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		- Annual -	nova moliti	E0071070			×	Mir	Il Containmer ni-Enclosure ovebag Proce n-Exempted	dure				dure		
			ocati							7			888		ment	
Location Asbestos-Containing TO BE AS In Fac (13)	g Material (ACM) BATED cility	Used Main Custo	tenar	lý by nce/		tos Cont thermal surfa		Materia s insula T, or	ation,	(5	mount Specify or LF)	Kemoval		T	Encapsulate	Enclosure
basen	nent		X			pipe	insula	tion		4	5 LF	Х	1	1		
Name of Registered Wa	aste Hauler] N	JDEP W	/aste	Cubic	Yarde		Name of R	egiste	red I and	1011				
D&S Abatement, In			Н	auler ID 20996	39-95	of Was			Waste m							
City, State Totowa, NJ			1				sal Date	~~)	City, State Tullytown	n, PA						
Completed by Deanna Brkusanin		Title Project	t ma	nager		S	ignature	1 11	NO A: Wew			Date 2/29/1	2			

Date of Notification (1 2/29/12)				of Building		Operator	r (2)				1) F/-3			
Agencies Notified	Type Notification	n			lacuzio		-					/ E	10	1	
EPA DEP	× Initial				man Av	enue								W. E.Drophille	
DEP X DOL	Amended Amendmer				ate, Zip C , NJ 088			-91	MA	RT	5 20	012	Ú	2	
DOH DCA	Emergency justification Cancellatio)			of Contact lacuzio				Atte	Teler	hone	Number		The state of the s	
Name of Facility When	a Abatament in Taki	na Dlace (2		FAC	ILITY INF	ORMAT	ION	T =		-	111		****		
House	e Abatement is Taki	ng Place (3)					_	Facility (4)		****	Maria Inglia	et es	Author	
Street Address 322 Herbert Stree	et							Su Su	hool (K-12 bchapter 8 her (i.e. pri	(Other	than l	K-12) ercial bu	ldings	, hom	ies,
City (5) Perth Amboy								Square N/A	-	# of F N/A	loors		Bldg.	Age	
County (6) Middlesex	*/				Code (7) USE ONLY)		Current House	Use (Prior	if being	demo	olished)			
Name of Monitoring Fi	rm Hired by Building	Owner (8)		ASCN	/l No.				ment Contr nent, Inc		9)				
Street Address			7					Address	en Avenu	ıe					
City, State, Zip Code							City, S	State, Zip	Code						
Project Manager for Me	onitoring Firm	-		Telepho	ne No.		Teleph	none No. 345-868		10.00	icens				
Start Date (10) 3/13/12		Schedule		mpletion	Date (11)		Name	of OSHA	1772						
Occupancy Status Duri	ing Abatement (Che			-				Address	TOTTE, THO						
Facility Closed/Va	cated During Entire	Period of A	bater	nent			11 R	osengre	en Avenu	16					
Other – Describe:	WHEN THE PROPERTY OF THE PARTY	mal Facility	Hour	S		_	4,553	tate, Zip (wa, NJ					3000		
Scope of Work (Check	All That Apply)	-			1000 T 1000			_			-		-		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enova				×	Mini-E Glove	ontainmen Inclosure bag Proce Exempted (dure					
		ls I	ocat	ion				I NOTI-E	xempled () and i	NOII-FI	nable Pro		emen	t
Location			ormal	lly		Des	scription	of				-	Ty	/pe	
Asbestos-Containin <u>TO BE Al</u> In Fac (13	BATED cility	Mair Custo	ntena dial S (12)	nce/ Staff?		thermal surface					ount ecify r LF)	Removal	Repair	Encapsulate	Enclosure
basen	nont.	Yes	No	N/A											
basen	lent		X			pipe	insulat	tion		99	LF	X			
							3.5								
Name of Registered Wa	aste Hauler		IN	JDEP W	aste	Cubic `	Yards	TN	lame of Re	nistere	d Land	1611			L
D&S Abatement, In			Н	auler ID I 20996		of Was			Vaste ma						
City, State Totowa, NJ			ly-			Dispos TBD	al Date		ity, State ullytown	, PA	W.				
Completed by Deanna Brkusanin		Title Projec	t ma	ınager		Si	gnature	1	211	une		Date 2/29/12	2		

Date of Notification (1) 2/29/12		1	Name of Estate	of Building of Sott	Owner/O	perator	(2)	10 10		17	5		1		
Agencies Notified Type Notifi	cation		Street A	Address	Road	į	JU	MAR	152	012		Ш,			
DEP Amen	dment #	_		ate, Zip Co am Park,		32	L.	ASBESTOS	GOSTRA	;		محجوب • دونا	The commence of the se		
DOH justific	gency (including cation) cation			f Contact ie & Ste		,s			Teleni	hone	Nun	nber			
Name of Facility Where Abatement is	Taking Place (3)		FAC	ILITY INF	ORMATIC	N	Туре о	f Facility (4)			- 454			
House Street Address		- INVEST						chool (K-12 ubchapter 8		than l	K-12	١			
11 Colgate Road							× O	ther (i.e. pri					dings	, hom	ies,
City (5) Maplewood							Square N/A	Feet	# of FI N/A	loors			Bldg. A	Age	
County (6) Essex				Code (7) USE ONLY)		Curren	t Use (Prior	if being	dem	olish	ed)	<u> </u>		
Name of Monitoring Firm Hired by Bu N/A	ilding Owner (8)		ASCN	/ No.				ment Conti)					
Street Address						Street	Address		-				,		
City, State, Zip Code						City, S	tate, Zip								
Project Manager for Monitoring Firm	T	Telepho	ne No.		Teleph	one No. 345-86		-11	icens).				
Start Date (10) 3/13/12	Scheduled 3/15/12	Corr	pletion I	Date (11)				Monitor ment, Inc							
Occupancy Status During Abatement	(Check Only One))				Street	Address				DE 150				
Facility Closed/Vacated During E Abatement Performed Outside o Other – Describe: Occupied	Intire Period of Ab f Normal Facility F	atem lours	ent	-	_	City, S	tate, Zip	en AVen Code 07512	ue ———					-	
Scope of Work (Check All That Apply)		-				1010		07012		-					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		novat				×	Mini- Glove	Containmer Enclosure ebag Proce	dure						
	Is L	ocatio	on				1 NOII-	Exempted () and N	On-F	nabi		Abate		t
Location of	No	rmall	y	20000000		ription							Ту	ре	
Asbestos-Containing Material (AC TO BE ABATED In Facility (13)	Maint Custoo	enan	ice/		tos Contai thermal s surfacir other mis	ystems	insulation		Amo (Spe SF or	cify		Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A									_		ate	(D)
basement		X			pipe ir	rsulat	ion		71 L	_F		х			
basement		X			lino	leum			525	SF	3,0	X	- CT		
kitchen	kitchen								100	SF		Х			
Name of Registered Waste Hauler	ne of Registered Waste Hauler					ards		Name of Re	egistered	Land	dfill				
D&S Abatement, Inc.	S Abatement, Inc.							Waste M				PA			
City, State Totowa, NJ					Disposal TBD	Date		City, State Tullytown	ı, PA						
Completed by Deanna Brkusanin	Title Project	Mai	nager		Sig	pature /	Min	I llie	1/1		Date 2/2	9/12			



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Date of Notification (1) 03 /	12 /	12		The second second		g Owner/Operator (ent of Transport		CEIV	E	7		
Agencies Notified	Type Notifica	ation		Contractor	Address xcutive	Plaza	M/	AR 1 5 2012				
☑ DEP	Amended			City. S	State, Zip	Code	1 10 400	11 1 3 2012	- /-	-1		
☐ DCA (NJAC 5:16) ☐ DHSS	Amendme					NJ 08002				1		
DCA	☐ Emergend		9		of Contac		124	Telephone Num	ber			
(NJAC 5:23-8)	☐ Cancellat			Lea	Voltura		-			ر ر		
				EAG	CII ITV II	NFORMATION		1.5	Brace.	5		
Name of Facility Where	Abatament is T	akina Dlace	(3)	FA	SILIT II	ALOKIALION 4	Type of Facility	(4)				
Toll Booths	Abatement is 1	aking Flace	(3)									
Street Address			-				School (K-12) 3 (Other than K-12)			
Exit 7A								rivate & commerci		lings		
City (5)							Square Feet	# of Floors	BI	dg. A	ge	
Robinsville Towns	hip, 08501						7,000	1		20+		
County (6)				Cour	nty Code (7)(STATE USE ONLY)	Current Use (Pri	or if being demolis	shed)			
Mercer							Toll Booths	for the NJ Turi	npike			
Name of Monitoring Firn	n Hired by Build	ling Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)				etak at some	
USA Environmenta	al					Diamond Hui	ntbach Constru	ection Corpora	tion			
Street Address						Street Address						
344 West State Str	eet					500 East Luz	erne Street					
City, State, Zip Code			12.50			City, State, Zip Co	ode					
Trenton, NJ 08618						Philadelphia,	PA 19124					
Project Manager for Mor	nitoring Firm		Te	lephone	No.	Telephone No.		License No.				
William Weisgarbe	er		(609-656	-8101	215-739-8166		00646				
Start Date (10)		Scheduled C			97. 195	Name of OSHA M	lonitor					
03 /26 /	12	04 /	_3	30 /	12_	SAME AS AB	OVE					
Occupancy Status Durin	g Abatement (0	Check only	one)	Www.men-		Street Address						
□ Facility Closed/Vacat												
Abatement Performe Time of Abatement:			у Но	urs - Des	cribe	City, State, Zip Co	ode					
Scope of Work (Check a	all that apply)					1 Full Cont	tainment with Neg	ative Pressure				
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		⊠ Re □ De				☐ Mini-Enc ☐ Glovebag			re			
		ls	Loc	ation						atem	ent T	vpe
Location		Her	Norm	ally lely by		Description o			77		m	
Asbestos-Containing TO BE AB		7-310000		ance/		estos Containing Ma ermal systems insula		Amount (Specify	Remova	Repair	inci	Enclosure
IN Faci		Cus		I Staff?	(1.0., 111	VAT, or		SF or LF)	lova	a-	sde	uso
(13)		Yes	(12 No	1		other miscellane	ous)		=		Encapsulate	re
Toll Booth Exterior I	Roof				Black I	Rolled Roofing M	lambrane	7,000 SF	\boxtimes			
Toll Booth Exterior I	Roof				Silver I	Rolled Roofing 2	nd layer	7,000 SF				
Toll Booth Exterior I	Roof				Black I	Roof Flashing		450 LF				
Toll Booth Exterior I	Roof				Silver	Coating Perimeter	er Sealant	430 LF	\boxtimes			
Name of Registered Wa	ste Hauler			NJDEP		Cubic Yards of	Name of Regist	tered Landfill	· V			
Freehold Cartage,	Inc.			Hauler II	D No. 541261	Waste 40 cv	GROWS La	ndfill North				
City, State				ואטטט	J4 [20]	Disposal Date	City, State					
Freehold, NJ 0772	8					05/30/12	Morrisville,	PA				
Completed By (Print or 1		Title				Signature	0		ite			
Charles F. Imbimb		Projec	t Ma	nager		· Um	10		33/	12	/1	2

Fax:

Mar 12 2012 01:43pm P001/001

S. Pint	Form
APPROVED VADeph of Health & Senior Services	مسحافاته
(signature)	

1		41	- UI 3UI	Hist to t	DAC 8:80 8	,,		- Salation	(signature)	7.70	_		
Date of Notification (1)	\$200		Nam	e of Bu	iding Owner lealth Syst	Operator (2)	Date: 23	JAJA Time	197			
Agencies Notified T	ype Notification		Stre 100	et Addre	son Aven	ue			1761				_
EPA DEP DOL	Amendment #_	Indina	Mo	rristov	Zip Code vn, New J	ersey 079	62	MAR 1	5 2010 Yelenhine Numb	er			4
₩ DOH DCA	justification)	roding.	Mic		DiGangi		<u>L</u> .						4
			I	ACILIT	Y INFORMA	MOITA	Type of	Facility (4)					
Name of Facility Where Ab Morristown Medical C Street Address	enter	lace (3)					Sch	1001 (K-12)	(Other than K-12) vate & commercial	hiddin	ns ho	mes	
100 Madison Avenue							Square	.)	# of Floors		, Age		_
Chy (5) Marristown, New Jers	ey 07962						20,000)	2 if being demolishe	55+		_	_
County (8) Morris			Co	unty Co ATE US	de (/) E ONLY)		Medic	al Center					_
Name of Monitoring Firm H Birdsall Services Gro	ired by Building Ov	mer (8)	1	ascm n	10.	Lilici	Carpo		actor (9)				
Street Address 65 Jackson Drive						606	,	e Avenue					
City, State, Zip Code Cranford, New Jerse	07016					City.	State, Zip odland F	Code Park, Nev	v Jersey 0742	1			
Project Manager for Monit				iephone	No. 7-8900		hone No. -225-84		License No 01104).			
Mike Kruppa Start Date (10)		Scheduled	Comp			Name J&S	of OSH	A Monitor nmental	Labs LLC				
03/13/12 Occupancy Status During	1	03/14/12 Only One)	11-11-12			Stree	t Address						
FT Frellity Closed 1202	ited During Entire Po	ariod of Ab	ateme	nt		City,	State, Zig						
Scope of Work (Check A) 23 sf or 23 if 2160 sf or 2260 if			novati molitic		* •		Min	i-Enclosure	ent with Negative f cedure d (*) and Non-Fria			÷	
		1					Event INO	1 2.3	3.7		Abate	ment	i
			ocatio								Ту	pe	
Location Asbestos-Containing TO BE AB In Fact (13)	Naterial (ACM)	Used Main Custo	Solely Solely Internant Indial S (12)	y by ce/ taff?	(i.e. th	Description Containing ermal system surfacing, other misce	Material ms insula VAT, or	(ACM)	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
Autopsy	Room	Yes	No	N/A		TS	ı		47 LF	X			
Autopsy	1.00///									+	-		
				-	-					+		-	
Name of Registered Wa	este Hauler		1 1	JDEP V lauler ID 8724	No.	Cubic Yard of Waste 2	3		Registered Landi .W.S Landfill	GU -			
City, State Woodland Park, Ne	ow Jersey 07424		<u></u>		-	Disposal D 03/16/12		City, Sta Morris	ville, Pennsylv	ania			#16755
Completed by Tatiana Kalenikova		Title Vice	Presi	ident		Signa	ture Tu	enk	11 11 1	Date 03/12/	12		

Date of Notification (1) 3/13/12				Name o	of Building	Owner/G	Operator	r (2)	EGE	11 \	7 度	In	7			
Agencies Notified	Type Notification		+	Street A	Address		llr	11-		U i	1 15		School Sens			
EPA DEP DOL	Initial Amended Amendment Emergency		- [City, Sta Manal	nnie Dr ate, Zip C hawkin	ode NJ 080	50	12.7	WAR 1		012		Table No.			
DOH DCA	justification) Cancellation			Jeff	f Contact		, [200	ASBESTOS C LICEN-	Tele	enhone	Alumba	-			
Name of Facility Where Jeff Debastos / Re		g Place (3)		FAC	LITY INF	ORMAT		Тур	e of Facility (4		6.4	***		11/1-11		
Street Address 32 Ronnie Dr.						-		×	School (K-12 Subchapter 8 Other (i.e. pri etc.)	(Othe			uild	lings,	hom	es,
City (5) Manahawkin NJ 08	3050		3	-				Squ 100	are Feet	# of	Floors			dg. <i>A</i> 5+	\ge	
County (6) Ocean					Code (7) USE ONLY	n		0.000	rent Use (Prior sidence	r if bei	ng demo	olished).			
Name of Monitoring Firm	m Hired by Building (Owner (8)		ASCN	I No.		Name Pern		oatement Conti	ractor	(9)		5.5.77.			
Street Address							Street PO E						44,770			
City, State, Zip Code	2		S-100						Zip Code rlin NJ 0809)1			_		= 10.2223	
Project Manager for Mo	nitoring Firm			Telepho	ne No.		Teleph 856-		No. •9800		Licens			¥6		
Start Date (10) 3/22/12		Scheduled 3/27/12	Con	pletion	Date (11)		Name Pern		SHA Monitor Inc							
Occupancy Status Durin							Street PO E									
Facility Closed/Vac Abatement Perform Other – Describe:	cated During Entire F ned Outside of Norm	eriod of Ab	atem lours	ent			City, S	state,	Zip Code rlin NJ 0809	14				/===		
Scope of Work (Check /	All That Apply)						vves	гъе	nin NJ 0809	71	+	7 7 7 7 7 7	_			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Barrier and American	nova				×	- N	ull Containmer lini-Enclosure lovebag Proce lon-Exempted	edure					e	
			ocatio					=	on-Exempled	() and	2 11011-1	Table 1		Abate	ement pe	1
Locatio Asbestos-Containing <u>TO BE AB</u> In Faci (13)	g Material (ACM) I <u>ATED</u> Ility	Used Maint Custoo	enar	y by nce/		tos Cont thermal surfac		Materi s insu T, or		(S	mount pecify or LF)	1 Controver	Domousi	Repair	Encapsulate	Enclosure
Exterior	Siding			х		Exte	rior Sid	ding		128	30 SF	×	1			
Name of Registered Wa	ste Hauler			JDEP W		Cubic			Name of Re	egister	red Land	dfill				
United Containers				auler ID 2459	No.	of Was	ite		G.R.O.W	I.S						
City, State Elm NJ						Dispos 3/27/1	al Date		City, State Morrisvill	e PA	19067	7	1	-3		
Completed by Anthony T Perna		Title Preside	ent			s	ignature					Date 3/13/	12			

Date of Notification (1) 3/13/12				f Building & Paul		Operator	(2) Residence						
Agencies Notified Type Notificatio	n		Street A			11	MAR	152	012	أرارا			1111
EPA Initial Amended Amendmen				ite, Zip Co gat Ligh		3006	ASBIST	S Catan.	J. A	_1	To the same of the		
□ Emergency justification □ DCA □ Cancellation	1)		Name of Laurer	Contact			Necessary and the second	Teler		lumher	1		
			FACI	LITY INF	ORMATI	ON						- See In es	
Name of Facility Where Abatement is Tak Laren & Paul McGeouge / Reside Street Address	ing Place (3) ence						Type of Facility (School (K-1	2)		40)			
2203 Central Av							Subchapter Other (i.e. petc.)	rivate &	comme	rcial bui			es,
City (5) Barnegat Light NJ 08006			·				Square Feet 1000	# of F		:	Bldg.	Age	
County (6) Ocean				Code (7) JSE ONLY	? <u> </u>	_	Current Use (Pri- Residence			ished)			
Name of Monitoring Firm Hired by Building N/A	Owner (8)		ASCM	l No.			of Abatement Cor aco Inc	tractor (9	9)				
Street Address						1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	Address ox 329		T				
City, State, Zip Code				10			tate, Zip Code Berlin NJ 080	91					
Project Manager for Monitoring Firm		T	Telephor	ne No.			one No. 753-9800		License				
Start Date (10) 3/26/12	Scheduled 3/26/12	Com	pletion [Date (11)		The property of the second	of OSHA Monitor aco Inc						
Occupancy Status During Abatement (Che	eck Only One)				Street	Address						Make the
Facility Closed/Vacated During Entire Abatement Performed Outside of No Other – Describe:						City, St	ox 329 ate, Zip Code Berlin NJ 080	91			******		
Scope of Work (Check All That Apply)	405000000		1000				20						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	process .	novat			*	×	Full Containme Mini-Enclosure Glovebag Prod Non-Exempted	edure				re	
		ocatio			A	hite second					Abat	emen ype	t
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Main Custo	tenan dial S (12)	y by ice/ itaff?		tos Cont thermal surfac		aterial (ACM) insulation, Γ, or	(Spi	ount ecify er LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A						a a p			Ф	
Front Porch ceiling			х		Trans	site Par	nels	200	SF	x			
Name of Registered Waste Hauler	-11	1,353,135	JDEP W		Cubic		Name of F	Registere	d Landi	fill		-	
United Containers		10000 VIII	auler ID I 2459	No.	of Was		G.R.O.\					70,000	
City, State Elm NJ		¥			Dispos 3/27/1	al Date	City, State Morrisvi		19067				
Completed by Anthony T Perna	Title Presid	ent			S	ignature	٠			Date 3/13/1:	2		

REMEMBER - MAIL IN HARD COPYSTATE OF NEW JETTLEY ABATEMENT (FUITABLE IN NIAC 3:80 and 12:120) र्म व्यक्तक १० Name of Building Owner/Operator (2) Beacon Redevlopment LLC Date of Notification (1) 03/12/12 type Natification Struct Address Agencies Natified 2012 4 Beecon Way, Suite 16 Initial City, State, Zip Codo DEP Amended DOL Amendment # Jersey City, NJ 07304 区 Emergency (including Name of Contact DOH iustification) Michael DeBlasio DCA Carcollation PACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) Orphoum Building D School (K-12) Subchapter 8 (Other than K-12) Stroot Address Office (i.e. private & communcial buildings, homes, 7 4 Beacon Way otc.) Square Fool # of Floors Blog Ago City (5) 50+ Jersey City 200,000 20 County Code (7) Current Use (Prior if being demofished) County (6) Hudson County ASCM No. Name of Moratoring Firm Hirad by Building Owner (8) Name of Abatement Contractor (9) Environmental Health Investigations, Inc. 00104 Pyramid Contracting Corp. Street Address Stroot Address 655 West Shore Trail 163 Sargeant Avenue City, State, Zip Gode City, Stato, Zb Codo Clifton, NJ 07013 Sparia, NJ 0787 I Telephone No. License No. Project Manager for Monitoring Firm Tolophone No. 973-689-6281 01099 Mr. William S. Korbel 973-729-5649 Name of OSHA Monitor Start Date (10) Scheduled Completion Date (11) J&S Environmental Laboratorios LLC 03/13/12 09/07/12 Street Address Occupancy Status During Abatement (Check Only One) 2333 Route 22 West Facility Closed/Vacated During Entire Period of Absternent Absternent Performed Outside of Normal Facility Hours City, State, Zio Code Other - Describe: Union, NJ 07081 Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf XX Full Containment with Negative Pressure Renovetion ≥ >180 af or >280 M Mini-Enclosure Domolition Glovebag Procedure Non-Exempled (*) and Non-Friable Protesture Abatament a Location TYPE Normally Location of Description of Used Solely by Asbestes Containing Material (ACM)
(i.e. thornel systems insulation, Asbestos-Containing Motorial (ACM) Amount Maintenance/ acapsulate TO DE AUATED (Specify Endosure RELEVAN Repair Cuctodial Staff? surfacing, VAT, or SF or LF) in Facility (12) other miscellansous) (13)Yes NUA Na Through-out Building Pipe Insulation 82 LF X X Through-out Building × Pipe Insulation Debris 41 SF X 2nd Floor x Transite Table Top 15 SaFt X Namo of Registered Waste Hauter NJDEP Wasto Cubic Yards Name of Registered Landfill Hauter ID No. of Wacto Pyramid Contracting Corp. G.R.O.W.S., Inc. 32613 City, State Disposal Date City, State Clifton, New Jersey Morrisylle, Pennsylvania Completed by Date Title Dimo Golcev Genoral Manger 03/12/12 ASS-41 (H-06-08) Do not use this f n for asbostos lloensure exempted activities.

2.000.00	te of Notification (1) 3/12/12						Owner/O				to fee cap was a source	1784 - F. W. S. Service of Street, of				
_	encies Notified	Type Notification			Street A 4 Bea		y, Suite	16	J W	MAR	15	2012	Homes Homes	1		
×	EPA DEP DOL	Initial Amended Amendmen		_	City, Sta	ate, Zip C				ASBL.T	(6 (7)	71018				
×	DOH DCA	Emergency justification) Cancellation	· · · · · · · · · · · · · · · · · · ·	F		f Contact el DeBl		100	W. Andrews	interior or a	Те	lephone N	umber	18.17	1:	
					FACI	LITY INF	ORMATIC	ON						•	-	
Oı	me of Facility Where rpheum-Building eet Address		ng Place (3)						of Facility School (K-	12)					
	Beacon Way								×	Subchapte Other (i.e. etc.)				ldings	, hom	nes,
	y (5) ersey City									re Feet	# o	f Floors		3ldg.	Age	
Co	unty (6)					Code (7)	•			nt Use (Pr						-
	udson County me of Monitoring Firm	Hired by Building	Owner (8)		ASCN	USE ONLY	" 	Name	of Aha	tement Co	ntractor	(0)				
Er	vironmental Hea				0010					ontractir						
100000	eet Address 55 West Shore Tra	ail							Addres Sarge	ss ant Aver	nue					
	y, State, Zip Code parta, NJ 07871									ip Code 07013					- 31	
Pro	oject Manager for Mor r. William S. Kerb				Telephor	ne No. 29-5649	,	Teleph		o.		License 01099	No.			
Sta	rt Date (10) 8/13/12	<u>.</u>	Schedule 09/07/			Date (11)		Name	of OSH	A Monitor						
	cupancy Status Durin	a Abstament (Char		Table 1				Street		onmenta	Labo	ratories	LLC			
×	Facility Closed/Vac		72		ment					e 22 We	st					
B	Abatement Perform Other – Describe:	ed Outside of Nom	nal Facility	/ Hour	s	4-5-	_			p Code 07081						
Sco	pe of Work (Check A	II That Apply)									2000.21501			100		
×	≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		and the same of th	Renova Demoli				×	Min Glo	Containm i-Enclosure vebag Pro i-Exempte	e cedure					
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	Location	of	7.50	Norma			Desc	cription	of						ре	
	Asbestos-Containing TO BE AB In Facil (13)	Material (ACM) ATED	Ma	d Sole intena todial (12)	nce/ Staff?		stos Conta . thermal s	ining M systems ng, VA	laterial s insula T, or		(8	mount specify or LF)	Removal	Repair	Encapsulate	Enclosure
	Through and	D. Hallan	Yes	No	N/A		D: 1					0.1.5			G)	
	Through-out			×		P	Pipe I			ie		2 LF 1 SF	x			\vdash
	2nd Flo		-				Transite				-	SqFt	X			Н
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	ne of Registered Was			100000	JDEP W		Cubic Y of Wast					red Landfi	11			
	amid Contracting	Corp.		10/200	2613	IVO.	3			G.R.O.\		nc.				
	, State ton, New Jersey						Disposa	I Date	1	City, State Morrisv		epnsyl#a	nia			
	npleted by		Title	98.2%			Sig	nature	11	11	. /		ate	77167		
Dim	no Golcev		Gene	ral M	langer			1	W	N C		/ 0	3/12/1	2		
ASB	-41 (R-06-08)						•	Go not	t use th	is form/for	asbesto	os licensur	e exem	pted	activit	ties.



Date of Notification (1) 03/12/12 Ck:1920 \$200				Building of NJ De				nmental F	Protect	ion —	Ė			,
Agencies Notified Type Notification		1,525	Street Ad 275 Fr	ddress eehold-	Englis	htown F	Road	N M	AR 1	5 20	12		-	
EPA X Initial Amended Amendment	#		City, Sta	te, Zip Co ntown, N	de			i 141 Wi	/NIL 1	3 20	16	Last I	Constitution of the	
□ Emergency (including	1	Name of	Contact	************		L	fs.	Telep	hone Nu	imber	_	j	į,
			FACI	LITY INFO	DRMATI	ON	i-e	STATE NAME AND DESCRIPTIONS				AL AL		ţ3
Name of Facility Where Abatement is Takin Hackettstown Fish Hatchery Hatch								of Facility (4) School (K-12)		x 30 x			
Street Address 22 Reese Avenue							X	Subchapter 8 Other (i.e. pri etc.)				dings	, home	es,
City (5) Hackettstown, New Jersey 07840		27/4533					Squar 30,00	e Feet 00	# of F	loors	100	3ldg. /	\ge	
County (6) Warren				Code (7) USE ONLY)			Currer Hatc	nt Use (Prior hery	if being	demolis	shed)	200000000000000000000000000000000000000		
Name of Monitoring Firm Hired by Building O The Whitman Companies	Owner (8)		ASCM	No.				ement Contr oration	ractor (9))				
Street Address 116 Tices Lane Unit B-1	y		l			Street Address 606 McBride Avenue								
City, State, Zip Code East Brunswick, New Jersey 08816	3					City, St		p Code Park, Nev	v Jerse	ev 074:	24			
Project Manager for Monitoring Firm Kevin Lovely		100.00	elephor	ne No.		Telepho 973-2	ne No).	1	icense i				
Start Date (10)	Scheduled 03/26/12	Com				Name o	f OSH	A Monitor	abs					
Occupancy Status During Abatement (Chec						Street A						200 - 1	-	
Facility Closed/Vacated During Entire F			ont					e 22 West						
Abatement Performed Outside of Norm Other – Describe: 8AM Start	al Facility F	lours				City, St	5/27/250	p Code w Jersey (7083					
Scope of Work (Check All That Apply)			0.000			pont								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		novat molitic		*			Min Glo	Containmer i-Enclosure vebag Proce i-Exempted	dure				re	
	1-1						1101	LAOIIIPIOG	70114	10111111	1	1990 (25)	emen	t
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Main Custo	tenan	y y by ce/		tos Cont thermal surfac	scription taining Ma systems cing, VAT niscelland	aterial insula , or		(Sp	ount ecify or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A										e	
Roof -			X	Var	ious R	oofing I	Mater	rials	100	SF	X	-	-	-
	X-200					16200000								
		1			L 0. 13	· ·		No. of D	- 1-1					
Name of Registered Waste Hauler Lilich Corporation		Ha	IDEP W auler ID 724		facto			ne of Registered Landfill R.O.W.S Landfill						
City, State Woodland Park, New Jersey 07424				Dispos 03/27	sal Date 7/12		City, State Morrisvil		nnsylva	ania		77		
Completed by Tatiana Kalenikova	resid	lent		S	Signature	ia	when	21		ate 3/12/	12			

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Date of Notification (1)				A Desire Control of the		Owner/Operator (2	2)		17	臣	In	M
3 1	7 120				12 m	Pont			-	****	III	1
Agencies Notified - Agencies Notified -	Type Notification Initial				Address	Cheesegi	raka (MAR 15 2	012	11		
DOLWD	Amended		-		tate, Zip C	ode ode	1 - 101			1		*
☑ DHSS ☐ DCA	Amendment #	cludina			Pan	lin '	M20	8859				4660
(NJAC 5:23-8)	justification)			Name	of Contact	0	-3- W-May	Telephone Numb	er			ĺ
	Cancellation			K	when	d Doro	u				110	-
			71	FAC	ILITY IN	FORMATION				****		1
Name of Facility Where	Abatement is Taking	Place	(3)	1 1	,		Type of Facility					
Duront	- 1e	Ho	1	50	4.		School (K-1:	2) 8 (Other than K-12)				
Street Address	heinegla	te	. ,	Lo	ad		Other (i.e., phomes, etc.	private and commerc	ial bu	ilding	s,	
City (5) Pourlin							Square Feet 20,00 U	# of Floors	1.0	dg. Ag		0
County (6)				Coun	ty Code (7)	(STATE USE ONLY)		rior if being demolish				
Midele	Sen					0 1 1	Moun	ufachuri	ف)		
Name of Monitoring Firm	Hired by Building C	wner (8)	ASCM	No.	Name of Abateme				- 43		
Criterian 1	Laborate	nè				USA En	wironm	ental Mar	nt	11	7(1	
Street Address			25		-	Street Address		Α .				
3370 KO	gren Bri	We.	7.4	r(-	J	8436 8	nterpn	ife Ave				
City, State, Zip Code	0.0	10	n 2			City, State, Zip Co	ode '	19163				
Bendale n Project Manager for Mon	n PA	19		ohone l	No.	Telephone No.		1915 3 License No.	-		نسند	
Mile Pan	ntoring Film		1		1300	215 36 5	<810	1000	_			
Start Date (10)	Sched					Name of OSHA M		0015	0	21//20		-
03/21/			AND DESIGNATION OF THE PARTY OF			IKA 6		mental Mo	nt.	· 1	n (1
Occupancy Status Durin						Street Address	MUCHONN	Territo 1. ()	111	1	110	
Facility Closed/Vacat		and the same	man illinois	nent		8436	Enterp	rise due				
Abatement Performed						City, State, Zip Co	ode `					
Time of Abatement:	AIVIFI	VI/	_FIVI-		-/IVI	Phil	a ·	PA 1915	3			
Scope of Work (Check a	II that apply)					☐ Full Cont	tainment with Ne	native Pressure				
<u>≥</u> 3 sf or ≥3 lf			novati			☐ Mini-Enc	losure	gutto i resoure				
☐ ≥160 sf or ≥260 lf		☐ De	molitio	n			g Procedure moted (*) and No	on-Friable Procedure	9			
		Is	Locat	ion	T				_	atem	ent T	vpe
Location	n of		Normal			Description o			-	_		T
Asbestos-Containing TO BE AB		# UNIX 1889	intena			stos Containing Ma ., thermal systems		, Amount (Specify	Remova	Repair	ıcap	Enclosure
IN Faci	lity	Cus	todial (12)	Staff?	(,,,	surfacing, VAT	, or	SF or LF)	val	7	Encapsulate	sure
(13)		Yes	No	N/A		other miscellane	ous)				ře –	
Tellon Bly-	othice		®		P./20	Indulati	am_	12 LF	M			
9 3	11				,							
				П					П	П	П	П
Name of Registered Wa	ste Hauler			JDEP \	Vaste	Cubic Yards of	Name of Regi	 stered Landfill	1-			
	10 No.		Н	auler II	No.	Waste 1/2	100 .	sura				
USA Env. Ma	JINA - HILL			326	(0	Disposal Date	City, State					-
Prula Pf	19153					3/24/2012		onbuda C	HC			
Completed By (Print or 7	1	•				Signature	10	Dat	Section 1	-	0.50	
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WILL JULY	MUV I	900	10	11 10	ruge		Think	2	11		* 1	

City, Stat Mapley Name of William	ademy Stre te, Zip Code vood, New			-	MAR	15	2012		115	
City, Stat Mapley Name of William	te, Zip Code wood, New	City, State, Zip Code Maplewood, New Jersey 07040								
William	Contact	scroey or	7040	L	Part Carlotte	4)01.1. 15.11.0	101 <u>8</u>	THE PERMIT		
FACII	n Kyle			Jan	Talanhona Niii	mher				
	LITY INFORM	ATION	Tuna	f English (4)						
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		Stree	t Addres	S						
rs		City,	State, Zi	Code						
30PW		Unio	on, Nev	v Jersey (07083					
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			Min Glo	i-Enclosure vebag Proce	edure			0		
	Ι		Nor	i-Exempled	() and Non-Fria	DIE 1 10	Treat est		ı	
		Description			Ty	ре				
lely by lance/ I Staff?	(i.e. the	Containing rmal systen urfacing, V	Material ns insula AT, or		Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure	
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	F	Pipe Insul	lation		20 LF	X				
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sident		Signatu	- Car	notes!	aken!		12			
	County ((STATE II) ASCN Telephone 609-65 Completion ation control of the cont	County Code (7) (STATE USE ONLY) ASCM No. Telephone No. 609-652-1833 Completion Date (11) Perment ITS (30PM) vation Solition ation Itality (all Staff? (b) N/A NJDEP Waste Hauler ID No. 18724 D O O O O O O O O O O O O O O O O O O	County Code (7) (STATE USE ONLY) ASCM No. Name Lilici Street 606 City, 3 Wood Telephone No. 609-652-1833 Parpletion Date (11) Name J&S Street 233: City, Unic	Type o Square 20,00 County Code (7) (STATE USE ONLY) ASCM No. Name of Abate Lilich Corpo Street Address 606 McBrid City, State, Zig Woodland Telephone No. 609-652-1833 Ompletion Date (11) Name of OSH. J&S Enviro Street Address 2333 Route City, State, Zig Union, New Vation Street Address 2333 Route City, State, Zig Vooland City, State, Zig Voolan	Type of Facility (4) School (K-12) Subchapter 8 Other (i.e. private) Square Feet 20,000 County Code (7) Current Use (Prior School ASCM No.	FACILITY INFORMATION Type of Facility (4) School (K-12) Subchapter 8 (Other than K-1 Other (i.e. private & commercially subchapter 8) County Code (7) (STATE USE ONLY) ASCM No. Name of Abatement Contractor (9) Lilich Corporation Street Address 606 McBride Avenue City, State, Zip Code Woodland Park, New Jersey 0742 Telephone No. 609-652-1833 Street Address 2333 Route 22 West City, State, Zip Code Union, New Jersey 07083 Telephone No. 609-652-1833 Telephone No. 609	FACILITY INFORMATION Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) Other (i.e. private & commercial build etc.) Square Feet 20,000 2 2 55 County Code (7) (STATE USE ONLY) ASCM No. Name of Abatement Contractor (9) Lilich Corporation Street Address 606 McBride Avenue City, State, Zip Code Woodland Park, New Jersey 07424 Telephone No. 609-652-1833 973-225-8400 01104 Telephone Date (11) Name of OSHA Monitor J&S Environmental Labs LLC Street Address 2333 Route 22 West City, State, Zip Code Union, New Jersey 07083 Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Exempted (*) and Non-Exe	FACILITY INFORMATION Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, etc.) Square Feet 20,000 2 55+ County Code (7) (STATE USE ONLY) ASCM No. Name of Abatement Contractor (9) Lilich Corporation Street Address 606 McBride Avenue City, State, Zip Code Woodland Park, New Jersey 07424 Telephone No. 609-652-1833 Telephone No. 973-225-8400 Interest Address 2333 Route 22 West City, State, Zip Code Union, New Jersey 07083 Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) a	Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, home etc.) Square Feet # of Floors Bidg. Age 55+	

No mech

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Date of Notification (1) 3/12/2012			Name of P.S.E.	f Building C & G	Owner/O	perator	(2)	<u> </u>	n N		A CONTRACTOR OF THE PARTY OF TH		
Agencies Notified Type Notifica	tion		Street A	ddress HADLEY	ROAD)		MAR 1	5 2012	L			
EPA Initial DEP X Amende Amendr			City, Sta	ite, Zip Coo H PLAIN	de IFIELD	, NJ 0	7080	ASB: 5105 (neseni e		and the second		
Emerge justificat DCA Cancella			Name of	f Contact S TROYA				115 -				Schools	
Name of Facility Where Abatement is T	aking Place (3	3)	FACI	LITY INFO	RMATIC	ON	Type of Fac	ility (4)				p.f	
P.S.E.&G Street Address						-		(K-12) apter 8 (Oth	er than K	-12)			
344 NORFOLK STREET					24		Other (etc.)	i.e. private	& comme	rcial build			es,
City (5) NEWARK							Square Fee 24,000		f Floors 3	8	ldg. A 9 YF		
County (6) ESSEX				Code (7) USE ONLY)			Current Use SUB STA		ing demol	ished)	92	٠	
Name of Monitoring Firm Hired by Build ENVIRONMENTAL TACTICS	ding Owner (8)		ASCN 0045	Serve Market			of Abatemen QUE SYST		5.70.000	CA			
Street Address 64 BROAD STREET				*	Street Address 396 WHITEHEAD AVE.								
City, State, Zip Code MATAWAN, NJ 07747						State, Zip Cod	382						
Project Manager for Monitoring Firm TOM GEIGER	Project Manager for Monitoring Firm						hone No. 432-8350	License 01111					
Start Date (10) 3/6/2012	Schedule 3/12/20		npletion	Date (11)			of OSHA Mo		AMERI	CA			
Occupancy Status During Abatement (Service Date of the Control of the C					Address	AD AVE					
Facility Closed/Vacated During Er Abatement Performed Outside of Other – Describe:	ntire Period of Normal Facility	Abater y Hour	nent s			City, S	WHITEHE State, Zip Cod JTH RIVER	e	22				
Scope of Work (Check All That Apply)						300	JIT KIVEN	, 143 000	52			_	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	Renova Demoli				2	Mini-Encl	ainment wit osure Procedure mpted (*) ar			10	re	
	5600	s Locat										emen /pe	t
Location of Asbestos-Containing Material (ACM <u>TO BE ABATED</u> In Facility (13)	n) Use Ma	Norma ed Sole aintena stodial (12)	ely by ince/ Staff?	Descripti Asbestos Containing (i.e. thermal syste surfacing, other miscel			Material (ACM as insulation, AT, or	(Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A	0001		DINIC	NO DANIEL		60 LF		-		-
1st FLOOR		X	-	SUCK	2000 - 20-20 CO	ING	S & PANEL		00 LF	x	\vdash	-	+-
MAIN FLOOR	X		Т			ANELS		80 SF	×	-		-	
2nd FLOOR		^						+-		+	10	-	-
Name of Registered Waste Hauler WASTE MANAGEMENT		F	J NJDEP W Hauler ID 1125		Cubic of Was 40	ste	GR	ne of Regist		l I	1		1
City, State ELIZABETH, NJ				Dispos 3/12/2	al Date 2012		State RRISVIL						
Completed by CAROL RAIMO	ICE N	/IGR.		S	ignatur	al K	remi	9	Date 7	12/	20	12	

Date of Notification (1) 3/12/2012			Name of	f Building & G	Owner/0	Operator	(2)	<u>15 U</u>	V E,				
Agencies Notified Type Notifica	ation		Street A 4000 h	ddress	Y ROAI	D	MAR	15	2012				
EPA Initial DEP X Amenda DOL Amenda	ed ment #_1			te, Zip Co		D, NJ 0	7080	ris con	700 6			i	
□ Emerge justifica □ Cancell				f Contact S TROY	A				phone Nu	umber	-	· ·	
Name of Facility Where Abatement is	Taking Place (2	2)	FACI	LITY INF	ORMATI	ION	Type of Facility (4)				8	
P.S.E.&G	aking Flace (S	·)					School (K-1	2)	or than K	12\			
Street Address 344 NORFOLK STREET							Other (i.e. p			cial buil			es,
City (5) NEWARK							Square Feet 24,000	0.0000000000000000000000000000000000000	Floors 3		Bldg. A B9 YF		
County (6) ESSEX			County (Code (7) USE ONLY)		Current Use (Prior SUB STATIO		ng demolis	shed)			5.515
Name of Monitoring Firm Hired by Buill ENVIRONMENTAL TACTICS	ding Owner (8)		ASCN 0045				of Abatement Con QUE SYSTEMS			CA C			
Street Address 64 BROAD STREET	4 BROAD STREET						Street Address 396 WHITEHEAD AVE.						
City, State, Zip Code MATAWAN, NJ 07747						City, State, Zip Code SOUTH RIVER, NJ 08882							
Project Manager for Monitoring Firm TOM GEIGER		Telepho 732-29	ne No. 90-2217		Teleph	one No. 432-8350		License 01111	No.				
Start Date (10) 3/6/2012	Schedule 3/12/20		mpletion	Date (11)			of OSHA Monitor	S OF A	AMERIC	A			
Occupancy Status During Abatement (To the second second			-			Address			397381	-		
Facility Closed/Vacated During Er Abatement Performed Outside of	ntire Period of A Normal Facility	Abater / Hour	ment s			City, S	WHITEHEAD A tate, Zip Code						
Other – Describe:						SOU	TH RIVER, NJ	0888	2				
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renovation Demolition				×	Full Containme Mini-Enclosure Glovebag Prod Non-Exempted	e cedure				·A	
	Is	Loca	tion				1 Non-Exempled	1 () and	ritori-i rie	IDIO I TO	Abat	emen	t
Location of	Hee	Norma	•	26 37		scription		741				/pe	1
Asbestos-Containing Material (ACM TO BE ABATED In Facility (13)	Ma Cus	intena todial (12)	ance/ Staff?	(i.e. thermal system			s insulation, T, or	(S	nount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A	0001		FRINIO	O DANIELO	- 0	015		-	-	
1st FLOOR		X	1	SOCI			& PANELS		0 LF 00 SF	X			-
MAIN FLOOR	X		_		LING T			0 SF	X				
2nd FLOOR	X			IRANS	OHE PA	AINELS	20	0 55	x				
Name of Registered Waste Hauler WASTE MANAGEMENT	1	J NJDEP W Hauler ID 1125		of Wa 40		Name of GROW	S NOF		ill	L	<u> </u>	<u> </u>	
City, State ELIZABETH, NJ				3/12/	sal Date 2012	City, State MORRI	SVILL						
Completed by CAROL RAIMO	CEN	MGR.		5	Signature	al Lac	a M A	0	ata /	12/	20	12	

Check # 8133

MINOCI												_
Date of Notification (1)	<u>ا</u>			Twi	g Owner/Operato	1 0	rstru	ction	M	4		
Agency Notified Type Notification			Street	Address	4 1 4.	arier	1.1			1	1	
□ EPA WINUAL		ı F	City. S	state, Zip		AICIEIC	Way	2012	111	-		also
DDEP Amended Amendment #			Ony, C	idio, Esp		Ridge "	WI ?	876	50			
· California	ang	F	Name	of Contac		609	Telephone	e Number	1	1	+	-
DOH justification) □ DCA □ Cancellation			Pas	+ Mod	- ller 4	92-1102						
					ORMATION	•	LIGHT COLUMN	-	ARRIVE TO ST	-		-
Name of Facility Where Abatement is Taking P	lace (3)				1.7.78	Type of Facility	y (4)		ALC: U	0	-	
	hon		Die	عد الن	26	☐ School (K-1	2)					
Charat Addroga					7	☐ Subchapter	8 (Other than					
19 East	34+	h <	5+n	eet		bother (i.e. p homes, etc		Walled Control of the Control				
City (5)			6	10		Square Feet	# of Floor	s Bi	dg. Age			
Long Beach 1	wp	.,	[7.7	08008		12		60	+	-	
County (6)	,		County ONLY)		(STATE USE	Current Use (F		demolished	1)			- 1
Ocean						Shore	- Hou	ese				
Name of Monitoring Firm Hired by Building Own	ner /	ASCM	No.		Name of Abaten			_				
(8) EPC Technologies		<u> </u>	MA		Street Address	: Tech	votodi	es, _	Lnc		_	
Street Address						D 0 2	. 227	Ł				
P.O. Box 337 City, State, Zip Code		·			City State Zip (P.O. Be		-			_	-
New Egypt NJ C	185	33			Nece	Faunt	NJ	80'	5.33	3		
Project Manager for Monitoring Firm	Te	lephor	e No.		Nec. Telephone No.	-34b.	License N					
Steve Schenker	60	9 75	T8 -3	365	609-758	-3365		003	94			
Start Date (10) Scheduled C	ompleti	on Dat	e (11)		Name of OSHA	Monitor	,					
3-13-12		-19	_		EPC Street Address	- Techr	ologie	s, I	nc			
Occupancy Status During Abatement (Check or	ily one)				Street Address		777					
Facility Closed/Vacated During Entire Period	of Abate	ement			P.C. City, State, Zip C). Bex	<u> 33 f.</u>					
☐ Abatement Performed Outside of Normal Fac ☐ Other – Describe:	ility Hou	ırs				Egypt	NJ	08	533	3_		
Scope of Work (Check all that apply)					□ Full (Containment with	n Negative Pr	ressure	0.		35	
□ ≥ 3 sf or ≥ 3 lf			ALC: NO.	ovation	☐ Mini-	Enclosure		1				
2 160 sf or ≥ 260 lf			Dem	юниоін		ebag Procedure Exempted (*) an		e Procedu	re		Station	
	ls l	Locatio	on						A	bate Ty		nt
	1	ormali	Marian S		Description	of				<u>''</u>	-	
Location of Asbestos-Containing Material (ACM)	19190E019	d Solel ntenan			tos Containing Ma	aterial (ACM)		ount	70		En	ш
TO BE ABATED		ustodia	al '	(i.e.	thermal systems surfacing, VAT			ecify or LF)	Removal	Repair	Encapsulate	Enclosure
IN Facility (13)		Staff? (12)			other miscellane				ova	串	ulat	sure
	Yes	No	N/A								8	
O I I Malla			አ	C'ic	ling Shir	noles	1600/18	10 SF	×			
exterior Walls	-		^	- CIL	<u> </u>	3.5	1000110	<u> </u>				
								-				
					7 7 3	2						
Name of Registered Waste Hauler			aste H	auler	Cubic Yards of	Name of Reg						
EPC Technologies	IDN	Vo. /	700	00	Waste O	A CONTRACTOR OF THE PARTY OF TH	Mon	agemo	ent			
City, State					Disposal Date 3-14-12	Monni	sville	P	4			×
Completed by .Title	1	1			Signature _ 1	750		Dat	e			
Steve Schenker MRE	side	111			hetamese expansed	activities	ure	الك	上长	9	6	_
			tor ach	netne line	nettre evemnied	ALTIVITIES						

Note: 30 SF was left Behind the Chimney and Front Porch, we are go Back when the Demolish Contractor Removes the Porch and Chimne

No west

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:16)

□ EPA □ Ini □ DOLWD □ An □ DHSS □ An □ DCA □ En (NJAC 5:23-8) jus	Notification itial mended mendment #1 mergency (inc stification) mcellation	-3/9/1:		Ruto Street	gers Uni Address	g Owner/Operator (: versity		IR 15 2012	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
☐ EPA ☐ Ini ☐ DOLWD ☐ An ☐ DHSS ☐ An ☐ DCA ☐ En ☐ (NJAC 5:23-8) ☐ jus	tial nended nendment #1 nergency (indication)						1 201 201 701	in 13 Cult	Į.	7		
DHSS An □ DCA (NJAC 5:23-8) □ En jus	nendment #1 nergency (ind stification)		#27 Road 1 Bldg 4086 City, State, Zip Code Piscataway, NJ 08854 #27 Road 1 Bldg 4086 ASSESTES CONTROL & LICENSING									
DCA DEN	nergency (industriction)			City, S	tate, Zip C	Code	(ASE)	SIGS CONTROL &				177
(NJAC 5:23-8) jus	stification)		<u> </u>				. 1000	LICENSING	-	- Constant		
Note that the second se		cidality		Name	of Contac	t		Telephone Numb	per		A1	
				Mike	e Smith	, a						
				FAC	ILITY IN	IFORMATION						
Name of Facility Where Abatem	ent is Taking	Place	(3)			-	Type of Facility (4)				
Camden Science Building		, ,	,				School (K-12					
Street Address	3.00-						Subchapter 8	(Other than K-12))	4.0	200	
315 Penn Street							homes, etc.)	ivate and commer	ciai bu	ilaing	s,	
City (5)			-				Square Feet	# of Floors	Blo	dg. Ag	ge	_
Camden							46000	4	(+06		
County (6)				Coun	ty Code (7)(STATE USE ONLY)	Current Use (Pri	or if being demolis	hed)			
Camden				- Allendaria	V	•	University					
Name of Monitoring Firm Hired	y Buildina C	Owner (8	3)	ASCM I	No.	Name of Abateme					-	
ATC	, 3	``	'	0009	8	The second secon	VIRONMENTAL	_, INC.				
Street Address		V.				Street Address						-
3 Terri Lane						1123 BEAVE	R STREET					
City, State, Zip Code						City, State, Zip Co	ode		- William			
Burlington Township, NJ	08016					BRISTOL, PA						
Project Manager for Monitoring			Tel	ephone I	No.	Telephone No.		License No.	7200		7 (50)	
Brian Kearney			6	09-386-	-8800	215-788-6040		00509				
	Sched	luled Co	mple	tion Dat	te (11)	Name of OSHA M	lonitor					
Start Date (10)	10572500000			1		BRISTOL EN	VIRONMENTAL	., INC.				
Occupancy Status During Abate	ment (Chec					Street Address						
☐ Facility Closed/Vacated Duri				ment		1123 BEAVE	R STREET					
Abatement Performed Outside	de of Normal	Facility	Hou	rs - Des	cribe	City, State, Zip Co						
Time of Abatement:	MP	M/ <u>3:00</u>	PM- <u>5</u>	:00AM		BRISTOL, PA						
Scope of Work (Check all that a	pply)	- 10	800			L						-
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		⊠ Re □ De				☐ Mini-End ☐ Gloveba	g Procedure	ative Pressure n-Friable Procedu	re			
		Is	Loca	tion						atem	ent T	vpe
Location of Asbestos-Containing Materia TO BE ABATED IN Facility (13)	al (ACM)	Use Ma	nten	ely by ance/ Staff?		Description of estos Containing Ma e., thermal systems surfacing, VAT other miscellane	insulation, , or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A								
Room 308	72		\boxtimes		Floor t	ile		900 SF				
	7	П					10					
			$\overline{\Box}$						In	П	П	П
				_					1]_[-
										Ш	Ш	Ш
Name of Registered Waste Hau SERVICE TRANSPORT O		c.	123	NJDEP \ Hauler II 2099 0	O No.	Cubic Yards of Waste 2 Cu Yds	Name of Regis				200	
City, State NEW CASTLE, DE 19720				20000		Disposal Date 3/16/12	City, State WAYNESB	URG, OH 44688	3			
Completed By (Print or Type) Gino Pizzigoni	Title	e Genera	l Ma	nager		Signature	Perguson	Da	3/°	9/1	2	

ASB-41 MAY 11 GI 1205 D

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

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

Date of Notification (1)				Name	of Buildin	g Owner/Operator	(2)		E	F	9	8. A
3/	2 / 12	2		Ru	tgers Un	iversity		(G) (E) U U		A STATE OF	The same of	
Agencies Notified EPA	Type Notification Initial				t Address 7 Road 1	Bldg 4086	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	MAR 1 5 20	12			2
DOLWD 5942	Amended				State, Zip (1	-	-
☑ DHSS 5435	Amendment #					NJ 08854	-	RESTOS GONERO	1 0	-		
☐ DCA (NJAC 5:23-8)	☐ Emergency (in justification)	iciuain	3		of Contac		- As	Telephone Nu			-	-
(140/10/03/20-0)	☐ Cancellation				ce Smith	•	L. properties	Tolephone Nu		>	/	\$
						FORMATION	226	<u>i</u>			-	
Name of Facility Where	Abatement is Takin	o Place	(3)		OILII I II	- CICINATION	Type of Facility	(4)				
Camden Science E							School (K-12					
Street Address							Subchapter 8	Other than K-1				
315 Penn Street							Other (i.e., p		ercial bi	uilding	gs,	
				-			homes, etc.)		- 15	J_ A		
City (5)							Square Feet 46000	# of Floors		ldg. A	ge	
County (6)				Com	nty Codo (7)(STATE USE ONLY)	Current Use (Pri			60+		
Camden				Cour	nty Code (/)(STATE USE UNLT)	University	or it being demo	iisnea)			
Name of Monitoring Firm	Hirad by Ruilding	Dumor	(Q) T	ASCM	No	Name of Abateme						
ATC	rilled by Building	OWITE	(6)	0009								
				000	70		VIRONMENTAL	L, INC.				
Street Address						Street Address	DOTOCCE					
3 Terri Lane						1123 BEAVE						
City, State, Zip Code	- 11100040					City, State, Zip Co						
Burlington Townsh			1= :			BRISTOL, PA	19007	_,				
Project Manager for Mon	itoring Firm			phone		Telephone No.		License No.				
Brian Kearney				9-386		215-788-6040		00509				
Start Date (10)3 /12 /	Wideline Programme				ite (11) 12_	Name of OSHA M BRISTOL EN	ionitor VIRONMENTAL	., INC.	,			
Occupancy Status During	Abatement (Chec	k only	one)			Street Address						-
☐ Facility Closed/Vacate				ment		1123 BEAVE	R STREET					
					cribe	City, State, Zip Co	ode		William Inc			
Time of Abatement: _	AM- P	M/ <u>3:00</u>	PM-5	MA00:		BRISTOL, PA						
Scope of Work (Check al		-	-			W						
		⊠ De	novati	on.			ainment with Neg	ative Pressure				
☐ >3 sf or ≥3 lf			novati			☐ Mini-Enc	losure	ative Pressure				
						☐ Mini-Enc ☐ Glovebag			ure			Ta Lawrence
☐ >3 sf or ≥3 lf		☐ De	Locat	ion		☐ Mini-Enc ☐ Glovebag ☑ Non-Exe	losure g Procedure mpted (*) and Nor			ateme	ent T	уре
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location	I that apply)	☐ De	Locat Norma	ion lly		☐ Mini-Enc ☐ Glovebag ☑ Non-Exe	losure g Procedure mpted (*) and Nor	n-Friable Proced	Ab	_		-
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location Asbestos-Containing	I that apply) of Material (ACM)	Is Use	Locat Norma ed Sole intena	ion illy ely by nce/		☐ Mini-Enc ☐ Glovebas ☑ Non-Exel Description o stos Containing Ma	losure g Procedure mpted (*) and Nor f terial (ACM)	n-Friable Proced Amount	Ab	_		-
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location Asbestos-Containing TO BE ABA	of Material (ACM)	Is Use	Locat Norma d Sole intena todial	ion illy ely by nce/		☐ Mini-Enc ☐ Glovebag ☑ Non-Exer Description o stos Containing Ma ., thermal systems i surfacing, VAT,	losure g Procedure mpted (*) and Nor f terial (ACM) nsulation, or	n-Friable Proced		ateme		-
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location Asbestos-Containing TO BE ABA	of Material (ACM)	Is Use Ma Cus	Locat Norma ed Sole intena todial	ion illy ely by nce/ Staff?		☐ Mini-Enc ☐ Glovebas ☑ Non-Exer Description o stos Containing Ma ., thermal systems i	losure g Procedure mpted (*) and Nor f terial (ACM) nsulation, or	Amount (Specify	Ab	_	ent Encapsulate	<u> </u>
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location Asbestos-Containing TO BE ABA IN Facili (13)	of Material (ACM)	Is Is Use Ma Cus	Locat Norma d Sole intena todial (12)	ion lly ely by nce/ Staff?	(i.e	Description o stos Containing Ma , thermal systems i surfacing, VAT, other miscellane	losure g Procedure mpted (*) and Nor f terial (ACM) nsulation, or	Amount (Specify SF or LF)	A Removal	Repair		Enclosure
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location Asbestos-Containing TO BE ABA	of Material (ACM)	Is Is Use Ma Cus	Locat Norma ed Sole intena todial (12)	ion lly ely by nce/ Staff?		Description o stos Containing Ma , thermal systems i surfacing, VAT, other miscellane	losure g Procedure mpted (*) and Nor f terial (ACM) nsulation, or	Amount (Specify	A Removal	Repair		Enclosure
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location Asbestos-Containing TO BE ABA IN Facili (13)	of Material (ACM)	Is Is Use Ma Cus	Locat Norma d Sole intena todial (12)	ion lly ely by nce/ Staff?	(i.e	Description o stos Containing Ma , thermal systems i surfacing, VAT, other miscellane	losure g Procedure mpted (*) and Nor f terial (ACM) nsulation, or	Amount (Specify SF or LF)	A Removal	Repair		Enclosure
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location Asbestos-Containing TO BE ABA IN Facili (13)	of Material (ACM)	Is Is Use Ma Cus	Locat Norma ed Sole intena todial (12)	ion lly ely by nce/ Staff?	(i.e	Description o stos Containing Ma , thermal systems i surfacing, VAT, other miscellane	losure g Procedure mpted (*) and Nor f terial (ACM) nsulation, or	Amount (Specify SF or LF)	A Removal	Repair		Enclosure
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location Asbestos-Containing TO BE ABA IN Facili (13)	of Material (ACM)	Is Is I Use Ma Cus Yes	Locat Norma d Sole intena todial (12) No	ion illy ely by nce/ Staff?	(i.e	Description o stos Containing Ma , thermal systems i surfacing, VAT, other miscellane	losure g Procedure mpted (*) and Nor f terial (ACM) nsulation, or	Amount (Specify SF or LF)	A Removal	Repair		Enclosure
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location Asbestos-Containing TO BE ABA IN Facili (13) Room 308	of Material (ACM)	Is Is I Use Ma Cus	Locate Norma ed Sole intena todial (12)	ion lly ely by nce/ Staff?	Floor til	☐ Mini-Enc ☐ Glovebag ☑ Non-Exer Description of stos Containing Mathematics auritation, VAT, other miscellanes	losure g Procedure mpted (*) and Nor f terial (ACM) nsulation, or ous)	Amount (Specify SF or LF)	Ab Removal	Repair		Enclosure
□ ≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf Location Asbestos-Containing TO BE ABA IN Facili (13) Room 308	of Material (ACM) TED ty	Iss	Locate Norma ed Sole intena todial (12) No	ion illy ely by nce/ Staff?	Floor til	Description o stos Containing Ma , thermal systems i surfacing, VAT, other miscellane	losure g Procedure mpted (*) and Nor f terial (ACM) insulation, or ous)	Amount (Specify SF or LF) 900 SF	A Removal	Repair		Enclosure
□ ≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf Location Asbestos-Containing TO BE ABA IN Facili (13) Room 308 Name of Registered Was SERVICE TRANSPO	of Material (ACM) TED ty	Iss	Locate Norma ed Sole intena todial (12) No	ion lly ely by nce/ Staff?	Floor til	Description o stos Containing Man, thermal systems i surfacing, VAT, other miscellaned le Cubic Yards of Waste 2 Cu Yds	Name of Regist	Amount (Specify SF or LF) 900 SF	A Removal	Repair		Enclosure
□ ≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf Location Asbestos-Containing TO BE ABA IN Facili (13) Room 308 Name of Registered Was SERVICE TRANSPO	of Material (ACM) TED ty te Hauler ORT GROUP, INC	Iss	Locate Norma ed Sole intena todial (12) No	ion Ily ily by nce/ Staff? .N/A	Floor til	☐ Mini-Enc ☐ Glovebag ☑ Non-Exer Description of stos Containing Mathematics and surfacing, VAT, other miscellanes Cubic Yards of Waste	Name of Regist MINERVA L City, State	Amount (Specify SF or LF) 900 SF	Removal	Repair		Enclosure
□ ≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf □ Location Asbestos-Containing □ BE ABA □ IN Facili (13) □ Room 308 □ Name of Registered Was SERVICE TRANSPO □ City, State NEW CASTLE, DE 1	of Material (ACM) I that apply) of Material (ACM) ITED ty te Hauler ORT GROUP, INC.	De Is Is I Use Ma Cus Yes	Locate Norma ed Sole intena todial (12) No	ion Ily ily by nce/ Staff? .N/A	Floor til	☐ Mini-Enc ☐ Glovebas ☑ Non-Exel Description o stos Containing Ma ., thermal systems i surfacing, VAT, other miscellaned Cubic Yards of Waste 2 Cu Yds Disposal Date 3/16/12	Name of Regist MINERVA L City, State	Amount (Specify SF or LF) 900 SF ered Landfill ANDFILL JRG, OH 4468	Ab Removal	Repair	Encapsulate	Enclosure
□ ≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf Location Asbestos-Containing TO BE ABA IN Facili (13) Room 308 Name of Registered Was SERVICE TRANSPO	of Material (ACM) TED ty te Hauler ORT GROUP, INC. 9720	De Is Is I Use Ma Cus Yes	Locat Norma de Sole intena todial (12) No	ion lly ely by nce/ Staff? .N/A .N/A .D JDEP V auler III 20990	Floor til	Description o stos Containing Man, thermal systems i surfacing, VAT, other miscellane. Cubic Yards of Waste 2 Cu Yds Disposal Date	Name of Regist MINERVA L City, State	Amount (Specify SF or LF) 900 SF ered Landfill ANDFILL JRG, OH 4468	Removal	Repair	Encapsulate	Enclosure

Nomeck

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

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

Date of Notification (1)	12. /	12		N			Owner/Operator (n)		The section of the se				
Agencies Notified	Type Notificat	tion		1		Address h & Lehig	gh Streets	LI MAII 1	5 2012	7	1			
☑ DOLWD				С	ity, S	tate, Zip C	ode	ASPISAR	CONTRACTOR OF THE PARTY OF THE	1	1			
☑ DHSS	Amendme		_		Dun	ellen, Ne	w Jersey 08812	11000	13 A. C.	ć †				
☑ DCA (NJAC 5:23-8)	☐ Emergence justificatio		ıg	N	ame	of Contact			Telephone Numb	er				
(16/10 0.20 0)	☐ Cancellation				Vind	ce Olivo	** 2.50%							
		5 2050.00	7		FAC	CILITY IN	FORMATION							
Name of Facility Where	Abatement is Ta	aking Plac	e (3)					Type of Facility	(4)					
Dunellen High Sch		-						School (K-12						
Street Address									3 (Other than K-12)		ildina			
411 First Street							J.	homes, etc.)	CONTRACT OF THE PARTY OF THE PA			1 10		
City (5)								Square Feet	# of Floors		dg. A	ge		
Dunellen, New Jers	sey 08812							10,000	2		55+			
County (6)				1	Coun	ty Code (7)(STATE USE ONLY)	The state of the s	ior if being demolis	hed)				
Middlesex								School						
Name of Monitoring Firm	n Hired by Build	ing Owne	r (8)	AS	CM	No.	Name of Abateme							
AHERA Conbsulta					Lilich Corpor									
Street Address			CO.		Street Address									
PO Box 385							606 McBride							
City, State, Zip Code							City, State, Zip Co							
Oceanville, New Je	ersey 08231-0	385					Woodland Pa	Woodland Park, New Jersey 07424						
Project Manager for Mor	nitoring Firm		Te	eleph	one l	No.	Telephone No. License No.							
Domenic D'Errico						-1833	973-225-8400 01104							
Start Date (10)		cheduled					Name of OSHA N							
04 /09 /	12	04	/	12	. / _	12_	J&S Environ	nental						
Occupancy Status Durin	g Abatement (C	heck only	one)				Street Address							
□ Facility Closed/Vacat							2333 Route 2	2 West						
Abatement Performer	d Outside of No AM	rmal Faci PM/	lity Ho	ours - M	Des	cribe AM	City, State, Zip Co Union, New J		2000 NO. 100 N					
Scope of Work (Check a	Ill that apply)	18			-									
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renov Demol				☐ Mini-End ☐ Gloveba	g Procedure	gative Pressure n-Friable Procedu	re				
			Is Loc							Ab	atem	ent T	уре	
Locatior Asbestos-Containing <u>TO BE AB.</u> IN Faci	Material (ACM ATED	' N	Norr sed S lainte stodi	olely nanc	by æ/		Description of stos Containing Ma ., thermal systems surfacing, VAT	terial (ACM) insulation,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure	
(13)			(1	2)			other miscellane		/	-		late	G,	
** **		Ye			N/A				00.1.5	57				
Kitchen						Pipe Ins	sulation		30 LF					
3rd Floor Office						Pipe Ins	sulation		5 LF					
Name of Registered Wa	ste Hauler			NJE	DEP I	Waste	Cubic Yards of	Name of Regis	stered Landfill					
Lilich Corporation				100	iler II 8724	D No.	Waste 5	G.R.O.W.S						
City, State					0124	•	Disposal Date	City, State						
Woodland Park, New Jersey							03/13/12	Morrisville	, Pennsylvania					
Completed By (Print or Type) Title							Signature	1	Da Da	ite	/	,		
Tatiana Kalenikova Vice Pres					t		Mua	un Kale	len.	3/1	2/	/2		

Date of Notification (1) 03 / 09 /	12		1		ng Owner/Operator (The second contract	7 <u> </u>		1		
Agencies Notified		,,,,,,	100000000000000000000000000000000000000	Address	igh Streets	M.	AR 1 5 2012	1	4		
⊠ DOLWD ☐ Amended				State, Zip				1	7		
		N.			lew Jersey 08812	2	DESTES CONTROL &		į		
☑ DCA		3	L	of Contac			Telephone Num	ber		-	
☐ Cancellat	2.500.000		Vin	ce Olivo		ngs.			-	i	
			FAG	CILITY II	NFORMATION						70
Name of Facility Where Abatement is T	aking Place	(3)				Type of Facility	0.500.5				
Dunellen High School						School (K-12	2)				
Street Address						Other (i.e., p	8 (Other than K-12 rivate and comme	() rcial bu	ıildine	19	
411 First Street						homes, etc.)		10101.00		,,,	
City (5)						Square Feet	# of Floors	BI	dg. A	ge	
Dunellen, New Jersey 08812						10,000	2	1	55+		
County (6)			Cour	ity Code (7)(STATE USE ONLY)	Current Use (Pr	ior if being demoli	shed)			
Middlesex						School					
Name of Monitoring Firm Hired by Build	ding Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)		(- (
AHERA Conbsultants Inc					Lilich Corpor	ation					
Street Address					Street Address						
PO Box 385					606 McBride	Avenue					
City, State, Zip Code					City, State, Zip Co	ode					
Oceanville, New Jersey 08231-	0385					rk, New Jerse	v 07424				
Project Manager for Monitoring Firm		Te	lephone	No.	Telephone No.		License No.				
Domenic D'Errico		1	09-652	-1833	973-225-8400		01104				
Start Date (10)	Scheduled C	ompl	etion Da	te (11)	Name of OSHA M	lonitor					
04 /09 /12			2 /	The Wilder	J&S Environ	mental					
Occupancy Status During Abatement (Street Address						
☐ Facility Closed/Vacated During Entir			ement		2333 Route 2	2 West					
☐ Abatement Performed Outside of No	ormal Facilit	y Ho	ırs - Des	cribe	City, State, Zip Co						
Time of Abatement:AM	PM/	_PN	1	AM	Union, New J						
Scope of Work (Check all that apply)											
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 	⊠ Re □ De				☐ Mini-Enc	g Procedure	gative Pressure on-Friable Procedu	re			
		Loc						Ab	atem	ent T	уре
Location of		Norm	ally lely by	l	Description o			R	R	m	m
Asbestos-Containing Material (ACM TO BE ABATED			ance/	ASD	estos Containing Ma e., thermal systems	terial (ACM)	Amount (Specify	Remova	Repair	22	nck
IN Facility	Cus		Staff?	,	surfacing, VAT	or	SF or LF)	oval	=	Encapsulate	Enclosure
(13)	Yes	(12 No		1	other miscellane	ous)				late	e e
Kitchen		×		Pipe In	sulation		30 LF		Ē		
3rd Floor Office					sulation		5 LF				
	ᅥᡖ			1 100 111			<u> </u>			_	
								+-			
Name of Registered Waste Hauler			NJDEP \	Masta	Cubic Yards of	Nome of Death	stored Leaden	10	<u> </u>	Ш	
Lilich Corporation			Hauler II		Waste	Name of Regis					
City, State	-		18724	1	5		•				
					Disposal Date	City, State					
Woodland Park, New Jersey	1				03/13/12	Morrisville	, Pennsylvania				0.
Completed By (Print or Type)	Title	<i>F</i> _j			Signature	. ///		ate /		/	
Tatiana Kalenikova	Vice P	esic	ent	-	Tafice	untler	elle.	3/9	//	ے	

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

MAY 11