Fax:

Mar 15 2012 10:04am PUU1/UU1

State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:80 and 12:120)

Date of Notification (1)		Name o		Owner/Operator (2	6:60 and 12:120)	NAMED	APPRO Libi Health 1			ervic	es
10 13 1/11 15 1/11	otification		N TENN		MARKE.	117 2	signati	ue)			-1
DEP Amendr	ided :	116 L		AVENUE	MAR 20	N-9409-1-110-1-110-1-110-1-110-1-110-1-110-1-110-1-110-1-110-1-110-1-110-1-110-1-110-1-110-1-110-1-110-1-110-1					,
DOH (Inclu	ding	1	OMFIEL	D, NJ 07003	L him -						100000
I I DCA (-	ellation		en teni	NESEN	Parties of the second	Telep	horie Numb	er			
Name of facility where abate	:	 _	F	ACILITY INFORM	ATION						
HELEN TENNESEN	ment is raking	place (3)				Type of Facil	ity (4) hool (K - 12	`			
Street Address						☐ Sui	ochapter 8 (6 er (Private/C)the	r than	ı K-1	2)
116 LINDEN AVENUE City (5)						Square Feet	gs./Homes, a	etc.			
	Co	unty (6)			County Code (7)					Blag	- 0.
BLOOMFIBLD Name of Monitoring Firm Hire	ES ES	SEX			(State use only)	Current Use	(Prior if being	ıg de	molis	hed))
*	a by 1918 Own	ir (8)	Melecan	ASCM No.	Name of Abatemen		· · · · · · · · · · · · · · · · · · ·				-
Stroot Address			,	1	D & S RESTOR	ATION, INC.					
City, State, Zip Code					20 California A City, State, Zip Code						
Project Manager for Monitoring		The same of the sa	No.		Paterson, NJ 07						102
guitomioni ioi iognici	run ,	P	hone Nun	ber	1 elephone Number 973-345-8020		License				
Start Dete (10)	Sched	. Complet	ion Date (11)	Name of OSHA Mon		00)159		_	_
03/19/12 Decupancy Status During Abate	03/24	0412			D & S Restorati	on, Inc.					
Facility closed/vacated dui Abatement performed outs Describe; Other-Describe: NORMA	ring entire parte side of normal		ernent. rs-		20 California Av City, State, Zip Code	enue			— n		
Scope of Work (check all that a					Paterson, NJ 07:	503					
≥ 2 of or >2 if	Renovation Demolition					uil Conteinment	ii E				
Location of sobostos-containing	is location by mainton	nomally : nance/cust	ised solei) Iodial	1		Von-Exempted (*)	and Non-In	alds R	Proce	±dur.	T
material (acm) to be abated in facility (13)	Staff(12) Yes	No	N/A	Description of material (AC	of asbestos-containing M)	Amount (Specify S LF)	For	e mov	e p a	n c a	
ASEMENT ASEMENT		X		PIPE INSULA	TION	7LPT		9	-	p	Τ,
TODAWS I		X		BOILER INSU	LATION	30 SQ FT	1	XI XI	쒸	片	부
								忙	片	片	15
				***************************************						丁	忙
gistered Waste Hauler & S RESTOKATION, INC	NJDEF 1350	Heuler ID		ubic Yerda of Wasi	e Name of Registered Li	andfill					
y, State	1330	-	isposal Do	YD	TULLYTOWN, R	ESOURCE RE	COVERV	-			
ATERSON, NJ 07503			03/20/12		City, State		- V · DICI	-	-	_	
mpleted by (Print or Type)	Title	,		Signature	TULLYTOWN, P.	A					
OGDAN JOLDZIC	PRESIDE						Date	e=107			
	no not use t	his form to	r asbestos	licensure exempte	ed activities.		03/15/12	-		de ma	

D&S Proj. #: MS 12-106

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

							-				44		
Date of Notification (1)			Name of E	Building Owr	ner/Operator (2))		1,5 1/2 1/1.7	15 1	17			
0 3 /1 5 /			HELEN	TENNES	EN								
Agencies Notified	Type Notificat Initial	ion	Street Add	ress			1.11			111			
□ DEP □	Amended	- 11	116 LIN	NDEN AV	ENUE		1:5 1.	MAR 2 0 2012		İ			
_ A	mendment #:	[7	City, State	Zip Code					1	4			
⊠ DOL ⊠	Emergency		BLOO	MFIELD,	NJ 07003		i h	in the second se		de l'ale			
□ DOH □	(including justification)	IT	lame of C		W-11 - 12 - 12 - 12 - 12 - 12 - 12 - 12		THE RESIDENCE OF THE PARTY OF T	Telephor	e Numb	per		-	
☐ DCA ☐	Cancellation	- 11	HELEI	N TENNE	SEN		\$1. 10°40.	* A No. 100	-				
				FAC	ILITY INFORM	ATION	١		- n				
Name of facility where	abatement i	s taking pl	ace (3)					Type of Facility (4)				
HELEN TENNES								School	(K - 1) apter 8		baa l	(10)	
Street Address								Other (Private/	/Comm			
116 LINDEN AV	ENUE								Homes,		ГВ	ldg. A	\ae
City (5)		Cou	nty (6)			Cou	inty Code (7)	oquare i cot	<i>"</i> 01 1 10	7013		lug. 7	ige
DI COMERTE D		FG	CEX				ite use only)	Current Use (Pi	rior if be	ing den	nolish	ed)	
BLOOMFIELD Name of Monitoring Fi	irm Hired by F	1000000	SEX		ASCM No.	_	Name of Abatement	Contractor (0)					
Traine of Monitoring 11	iiiii iiiied by t	Jidg. Own	51 (0)		ASCIVINO.			85.00					
Street Address						_	D & S RESTOR Street Address	ATION, INC.					
Sileet Address							The second section of the second section of the second section	222					
City, State, Zip Code				-		_	20 California A City, State, Zip Code						
ony, onato, zip oode													
Project Manager for Mo	nitorina Firm		Ip	hone Numb	or	_	Paterson, NJ 07 Telephone Number	/503	11:				
r roject Manager for Me	onitoning i iiiii			none Numb	lei		973-345-8020			e Numl 00159			
Start Date (10)		Cahar	Complet	ion Date (11		_	Name of OSHA Mon		-	00137		-	
\$ 150 		Scried	i. Complet	ion Date (1)	1)		D & S Restorati	ion, Inc.					
03/19/12		03/3	N. C. C.				Street Address						
Occupancy Status Duri	NAMES OF STREET OF STREET STREET	STIP CONTRACTOR OF THE	-0.11				20 California Av	venue					
Facility closed/va Abatement perfor							City, State, Zip Code						
Describe:			racinty riot	113-		_							
Other-Describe:						-	Paterson, NJ 07	7503					
Scope of Work (check	all that apply	·)		77				Full Containment w	/negativ	e press	ure		
\boxtimes >3 sf or >3 If	\boxtimes	Renovation	n					Mini-enclosure					
≥160 sf or ≥260 lf	f 🗌	Demolition	1				×	Glovebag procedur Non-Exempted (*)		-friable	proc	edure	
Location of				used solely						R	R	Е	
asbestos-contain material (acm) to		by mainte staff(12)	enance/cus	stodial			sbestos-containing	Amount		e m	e p	n	E n
abated in facility		Yes	No	N/A	material (A	ACM)		(Specify S	- or	0	a	c a	C
	7 - 38 	162	No	N/A				,		v e	ľ	р	-
BASEMENT			$\square X$		PIPE INSUI	LATI	ON	7 L FT		\boxtimes			
BASEMENT	(AR.S) = -10		LX		BOILER IN	SUL	ATION	30 SQ FT					
Registered Waste Haule D & S RESTORATI		NJDE 135	P Hauler 06	000.000	ubic Yards of W YD	/aste	Name of Registered TULLYTOWN,		COVE	RY			
City, State		—-L		Disposal D			City, State	LUDO O ROLL RE	CO 1 151		-	-	
PATERSON, NJ 0	7503			03/20/12		3.63	TULLYTOWN,	PA					
Completed by (Print or T		Title			Signature				Date				_
BOGDAN JOLDZI		PRESID							03/15	/12			
ASB-41	*	Do not use	e this form	for asbesto	s licensure exe	mpted	activities.						

m0,8774698567 Paragon Job#

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

							I F	C E I	WE				
Date of Notification (1)		Name of Bu	ilding Own	er/Operator (2))			W Is I	WIL		1	-	
10 13 1/11 6 1/11 12 1		Union Co	unty Imp	provement Au	ithorit	ty							
Agencies Notified Type Notificat	ion	Street Addre	SS	THE RESERVE				MAR 2 0 2	012	D)		-	-
N Initial		10 Elizab	ethtown	Plaza 6th Flo	oor		W 161	111/111 - 0 2	-012				
DEP Amend	ment (City, State, 2					L				_	-	
		Elizabetl	n, NJ 072	07			A	SELSTOS CONTR	101 de				
		lame of Cor			-		-	Telepho	ne Numb	er	-		
justification)		Miles IZ											
Cancelli	ation	Mike Kr	upa										
			FAC	ILITY INFORM	ATION	1							
Name of facility where abatement i	s taking pla	ace (3)		Santonie - n		2011212		Type of Facility					
D idential Duilding								=	ool (K - 1	100			
Residential Building									hapter 8			(-12)	
Street Address									(Private		ercial		
15 Lyon PL								Square Feet	# of Flo		В	ldg. A	qe
City (5)	Cou	nty (6)			Cou	nty Code (7	7)	1,200 sf	02		90		
					(Sta	te use only		Current Use (Prior if be	ing der	nolish	ed)	
Elizabeth, NJ 07207	Un							Vacant			0.000		
Name of Monitoring Firm Hired by	Bldg. Own	er (8)		ASCM No.		Name of A	batement C	ontractor (9)		-			
Birdsall Services Group						Paragon	Contraction	ng, Inc.					
Street Address						Street Add	ress						
65 Jackson Dr.						590 Riv	er Rd.						
City State, Zip Code						City, State,	Zip Code			-			
Cranford, NJ 07016						Clifton	, NJ 07014						
Project Manager for Monitoring Firm	1	Ph	one Numb	er -		Telephone			Licens	e Num	per		
Mike Krupa		90	8-497-89	000		(973) 6	514-1600		0074	8			
Scheduled Start Date (10)	TScheo	d. Completic			-	Name of C	SHA Monito	r					
				- /			n Contracti	ng, Inc.					
04 02/2012		0/2012				Street Add	ress				T.Avious		
Occupancy Status During Abatemer	- The same of the	1000				590 Riv							
Facility closed/vacated during Abatement performed outside						City, State,	Zip Code						
Describe:	- Or Horrinar	racinty flour	<u> </u>										
Other-Describe:					-	Clifton	, NJ 07014						
Scope of Work (check all that apply	()			Water De-	0.000								
□ Demolition □	Renovation	n			F	ull Containr	ment w/nega	tive pressure	Glov	ebag pi	oced	ıre	
☐ > <u>3</u> sf or > <u>3</u> If	≥160 sf or	≥260 If				/lini-enclosu	re	Non-Exe	mpted (") Non-f	riable	proce	edure
Location of		n normally u		/		1		T		TR	R	E	T_
asbestos-containing	by mainte staff(12)	enance/cust	odial	Description	on of a	sbestos-cor	ntaining	Amount		e m	e	n	E n
material to be abated in facility (13)			T	material ((Specify LF)	SF or	0	a	c a	С
abated in facility (15)	Yes	No	N/A					(LF)		v e	i	р	L
Basement		X		VAT/Masti	с			400 SF	1	Ĭ	П	П	П
Basement		X		Damproofin				300 SF			T	H	一
Anie		X		Felt Paper				3 SF				H	H
1st Floor Exterior		X		Windows				5 EA			7	\exists	H
											7	\exists	1
Registered Waste Hauler	NJDI	EP Hauler II	D# C	ubic Yards of V	Vaste	Name of F	Registered La	andfill			Ц_	Ш	
Paragon Contracting, Inc.	221			0 cyds			wn/GROW						
City. State		I	Disposal D	ate		City, Stat							
Clifton, NJ 07014			TBD			Tullyto	wn, PA						
Completed by (Print or Type)	Title			Signature		1			Date				
Goran Lazevski	Presiden	t							03/16	/2012			

MO 187746 98567 Paragon Job#

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

		LNIO	mo of Duildi	na Owner	/Operator (2)		-Hr) 15 (1)	1 I W 1	3 151				
Date of Notification (1)		100000000000000000000000000000000000000			ovement Au		IN-	The first fi	-11))				
Agencies Notified Type Notif		-	et Address		overnent Au	unority		- 0					
⊠ EPA ⊠ Init	ial		*		loza 6th Ele	oor	L MA	R 2 0 2012					
M DEP	endment	-	, State, Zip		laza 6th Flo	001							
DOL Amendmen	Machine A. S.				20		ASEL	STOS CONTROL &	4				
	ncy (includ	100	Elizabeth,		7	-			ne Number				_
DOH Limerge justificat		Nan	ne of Conta	ict				Тенерно	ile Isumber				
	cellation	1	Mike Krup	oa				<u></u>					
				FACIL	ITY INFORM	ATION							
Name of facility where abatem	ent is taking	plac	e (3)					Type of Facility	(4) ol (K - 12)				
										thar th	on K	12)	
Abandoned Building								North Control	hapter 8 (O (Private/Co			12)	
Street Address									./Homes, e		Ciui		
10 Cherry St.								Square Feet	# of Floor	s	Blo	lg. Ag	е
City (5)	To	county	y (6)			Coun	ty Code (7)	4,000 sf	03		60		
Only (O)						(State	e use only)	Current Use (F	Prior if bein	g dem	olishe	d)	
Elizabeth, NJ 07207	THE RESERVE THE PARTY OF THE PA	Unio				<u></u>		Vacant					
Name of Monitoring Firm Hired	d by Bldg. O	wner	(8)		ASCM No.		Name of Abatement						
Birdsall Services Group							Paragon Contrac	ting, Inc.					
Street Address	- Contract						Street Address						
65 Jackson Dr.							590 River Rd.						
City, State, Zip Code							City, State, Zip Code						
Cranford, NJ 07016				annia di santa			Clifton, NJ 070	14					
Project Manager for Monitoring	Firm		Pho	ne Numbe	er		Telephone Number		License		er		
Miladiana			908	3-497-89	00		(973) 614-1600		00748				
Mike Krupa Scheduled Start Date (10)	TSc	ched.	Completion				Name of OSHA Mor						
				,			Paragon Contra	cting, Inc.					
04/02/2012			/2012			_	Street Address						
Occupancy Status During Abat							590 River Rd.						
Facility closed/vacated d Abatement performed out	uring entire itside of nor	perio mal fa	d of abaten acility hours	nent. 5-			City, State, Zip Code	•					
Describe:						_	Clifton, NJ 070	14					
Scope of Work (check all that	annly)												
Demolition	☐ Reno	vatio	2			ПЕ	ull Containment w/ne	egative pressure	Glove	bag pr	ocedi	ıre	
The state of the s							fini-enclosure		empted (")	Non-f	riable	proce	dure
>3 sf or >3 lf	≥160 €	7			т —		IIII-Circiodaro	<u> </u>		TR	R	E	
Location of			normally u			. 727		Amount		е	е	n	E n
asbestos-containing material to be	staff(101101011	Descrip		sbestos-containing	(Specify		m	p a	c a	c
abated in facility (13)	Ye	s	No	N/A	materia	(/ (0111)		LF)		v	i	p	L
					1			7,250 SF		e	L	П	
1st. 2nd & 3rd Floors			$\perp X$		VAT	D 6	0 El-1-	5,500 SF			H	H	H
Root			$\bot X$				ng & Flashing			H	片	片	
Garages			$\bot X$		Roof Flas	hing		600 SF		-	片	H	
										ᆛ	닏	片	H
									·			Ш	Ш
Registered Waste Hauler Paragon Contracting, Inc.		NJDE 221	P Hauler II 61		cubic Yards of 90 cyds	f Waste	Name of Registere Tullytown/GRO						
City. State		Western Co		Disposal [Date		City, State						
Clifton, NJ 07014				TBD			Tullytown, PA		1				
Completed by (Print or Type)	Title				Signature	N	11-		Date	/2012			
Goran Lazevski President									03/16	/2012			



NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:120)

			Name of Buildin GRAND PROSI	g Owner/Operator (2) PECT CENTER					
3/2012				1767			-	133	
Notification	n Type		Street Address PO BOX 979	H LL M	AR 20	2012)		1
() Amend Amend () Emerg	led Notification dment # ency (includin	g justification)	Name of Contact	OD, NJ 08701	-I Al- Numb	er		Section	9
		FACILITY IN	FORMATION				-(84)	and the second	
t is Taking Place	(3)		() School (K-1)	2) 8 (other than K-12)	s., homes,	etc.			
(6)	County Co	ode (7)	Sq. Feet	15000 # of	Floors	_2			
	(State Use	e Only)	Current Use (pr	rior if being demolished)_	VACA	NT_			
	ASCM No	<u>).</u>	Name of Contra Alliance Enviro	actor (9) onmental Systems					
- No.			Street Address						
			West Chester,	PA 19382	Lienner	lumba	-		
			Telephone Nur 610-701-9000	mber	00508	lumbe	<u>I</u>		
		Date (11)	Name of OSHA RT ENVIRONM	A Monitor MENTAL					
a Entire Period o	f Abatement	1	Street Address 510 HERON D	PRIVE SUITE 306					
			City, State, Zip BRIDGEPORT	<u>Code</u> г, NJ 08014					
only)									
IEACM) () SM	I Proj. (>25<16	60 SF or >10 <2) Minor Proj. (<25 SF o	<10 LF AC	CM)			
s Location Norm	ally Used	Description of	FACM (i.e.	Amount (Specify SF or	LF) A	Abater	nent Ty	pe	_
Solely by Maint./6	Gustodiai	surfacing, VA	T, or other		F	Rem.	Rep.	Encap	Enclose
YES NO	AN C	miscell.)							
	X					X		-	-
					1				
							1 1511		
	Waste Hauler	ID #\	Cubic Yards o	of Waste			Lanoilli		
1/235			Approx. 100	Dian Data	BFI Imp		City Sta	ate	
						- 1			
			- Y =	TBD	Date		mperia	II, PA	
Title			Signature			10			
Estimat			1///	- Contract of the Contract of	3/13/201	14			
	(X) Initial () Ameno Ameno () Emerg () Cance In is Taking Place In is Taking Place () Cance () Can	Notification Type	Notification Type	Notification Type (X) Initial Notification () Amended Notification Amendment # () Emergency (including justification) () Cancellation () Cancellati	Notification Type (X) Initial Notification () Amended Notification () Amended Notification () Emergency (including justification) () Cancellation () Emergency (including justification) () Cancellation () Cancel	Notification Type	Street Address MAR 2 0 2012	Notification Type	Notification Type

Mail to: NJDEP-DSHW-BRRTP

401 E. State St., PO 414 Trenton, NJ 08625-0414 Telephone 609-984-6620

C:\WORD\MYDOCS\ASBESTOS

9/18/00

SCRUCES INC

Date of Notification (1	3/16/12			Name	e of Buildin	ig Owner/Operato	r (2) Ronald Co	X	U V		1		
Agencies Notified	Type Notification	1		Stree	t Address		610 Clark A	ve. MAR 2 (20	12		IJ	
EPA DEP DOL	Amended Amendment		_	City,	State, Zip (Code Uni	ion Beach, NJ				- Care -	2 47000	
DOH DCA	justification) Cancellation	inologous,		Name	e of Contac	t Ronald Cox	L sample.	Telephone Num	nber				
				FA	CILITY INF	ORMATION	18.1.					r ottorforde	
Name of Facility When		ng Place sidenc					Type of Facility School (K-1)	2)	2)				
Street Address	610 C	lark A	ve.				Subchapter 8 (Other than K-12) Other (i.e., private & commercial buildings, homes, etc.)						
City (5)	Unic	n Bea	ch				Square Feet # of Floors Bldg. Age						
County (6)	onmouth				nty Code (7) (STATE	Current Use (Pr	rior if being demol residence	ished)				
Name of Monitoring Fig (8)	m Hired by Building MECS	Owner		ASCM	No.	I I CONTRACTO DECEMBER DE CONTRACTO DE LA CONTRACTOR DEL CONTRACTOR DE LA CONTRACTOR DE LA CONTRACTOR DEL CONTRACTOR DEL CONTRACTOR DE LA CONTRACTOR DE LA CONTRACTOR DEL CONTRACTOR DEL CONTRACTOR DE LA CONTRACTOR DE LA CONTRACTOR DEL CONTRACTOR D	nent Contractor (9 vens Environr	*** = c (e)(e)(e)	es, I	nc.			
Street Address	PO Box 34	.1				Street Address	PO E	Box 322				-2005	
City, State, Zip Code	Crosswicks, NJ		5			City, State, Zip (n, NJ 08501		T			
Project Manager for M		0051.	TIN-SHIPPY	phone	No.	Telephone No.		License No.					
	Veisgarber Jr.		0.000		8-4070	(609) 2.	59-9688		0049	3			
Start Date (10)		duled C			ate (11)	Name of OSHA		ECS	-				
3/27/12 Occupancy Status Du	ing Abatement (Che		0/28/ one)	12		Street Address						_	
☐ Facility Closed/Vac	ated During Entire P	eriod of	Abate		71			341			100		
☐ Abatement Perform Other - Describe:			y Hou	rs		City, State, Zip C		cs, NJ 08515					
Scope of Work (Check ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	all that apply)		novati molitic			☐ Mini-En Gloveb	ntainment with Neg closure ag Procedure tempted (*) and No		ıre				
			ocatio					1	Abate Typ				
Location Asbestos-Containing TO BE AB IN Facil (13)	Material (ACM) ATED	Mair Cu	Solely ntenan ustodia Staff? (12)	ce/		Description o tos Containing Ma thermal systems surfacing, VAT other miscellane	terial (ACM) insulation, , or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure	
		Yes	No	N/A					1			_	
basem	ent			×	sies	pipe insulat	ion	90 LF	×			_	
Name of Registered W	aste Hauler			JDEP V		Cubic Yards	Name of Regis	tered Landfill					
Stevens Environmental Services, Inc.				auler ID 182	No. 292	of Waste	-	R.R.F., Inc. L	andf	ill			
City, State Allentown, NJ				-		Disposal Date 3/28/12 A	City, Stafe	Tullytown,	PA				
Completed By Mahlon E. Stevens Project					ager	Signature		Date	3/16	5/12			

B

om	-112/1
CHECK #:	17001
CHLOR #.	1001

Date of Notification (1)	7 11 10			Name o	of Buildin	g Owner/	Operator	(2)			F Charles	- H		w.j		
	316.12		-		STORY	06	Edv	(catal) [出傷に	ENLIV	7 E	To a	Mr.	1		
Agencies Notified	Type Notification	n			Address							7//	1			
□ EPA □ DEP	☐ Initial			-	1 20	UVIE	550	reedt III								
⊠ DOL	☐ Amended Amendme	nt#			ate, Zip C		S		MAR	2 0 20	12		/ /			
E POU	☐ Emergency	(including		Name	of Contac		24-1	14710		06 T						
☑ DOH □ DCA	justification Cancellation					0.0		- 1	SBIST	elephone N	umber	1	-			
	- Caricellatio	11		FAC	ILITY INI	OI W	antris	avio	LH							
Name of Facility Where A	batement is Takir	ng Place (3)		FAC	ILIT IN	-ORMAI	ION	Type of Facility	(4)	at the state	-U-19-107-19-1	Provide a second	-	100		
REGICTION	hal							☐ School (K-					ye			
Street Address								□ Subchapter	8 (Oth	er than K-1	2)					
54 K4N	SINGHEIT	Av(i)	Ur.					Other (i.e. i.e. i	orivate a	& commerc	ial buil	dings	, hom	es,		
City (5)	~ J							etc.) Square Feet	Τ#,	of Floors		Bldg.	Λσο.			
CHISCH	(HU							/ 50C	"	2	and a second		λge I () ι	Ave		
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Project Manager for Monito	oring Firm						Gierr	NOCK, NJ 07452		-						
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Project Manager for	Monitoring Firm			Telepho	one No.		phone No. 1-262-584		License No. 00156				
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City, State, Zip Co Riverdale, NJ 074						1	249	Bethlehe	e, Zip Code em, PA 18015	ata .			
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Street Address 67 Martin Road									Other (i.e etc.)	e. priva	ate & c	omme	ercial				3,
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County (6) Essex				County Co	ode (7) E ONLY)	_	Current Use (Prior if being demolished) Public School										
Name of Monitoring Firm	m Hired by Building O ental	wner (8)		ASCM 1			Name of Abatement Contractor (9) Savic Construction Corp										
Street Address PO Box 316							Street A		ess e 46 Su	ite 1	5				20.20		
City, State, Zip Code									Zip Code NJ 0751								
Project Manager for Monitoring Firm				elephone			Telephone No.						e No 4				
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03/09/2012		03/10/20					Street		nstructi	OII C	огр		-		-		-
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MAY 11

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

Name of Building Owner/Operator (2) Date of Notification (1) Meridian Teterboro 12 3 19 Type Notification Street Address Agencies Notified MAR 2 0 2012 485 Industrial Avenue ✓ Initial ☐ Amended **⊠** DOLWD City, State, Zip Code Amendment #_ **⊠** DHSS Teterboro, NJ 07608 ☐ Emergency (including **⊠** DCA Telephone Number Name of Contact justification) (NJAC 5:23-8) ☐ Cancellation Karol Kulesza **FACILITY INFORMATION** Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12)
Subchanter Meridian Teterboro Subchapter 8 (Other than K-12) Other (i.e., private and commercial buildings, Street Address homes, etc.) 125 Industrial Avenue Square Feet # of Floors Bldg. Age City (5) 56 25.640 Teterboro, NJ 07608 Current Use (Prior if being demolished) County Code (7)(STATE USE ONLY) County (6) Hangar/Office Bergen Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. 00126 JVN Restoration Inc GZA Geo Environmental Inc. Street Address Street Address 47 Foster Road 55 Lane Drive Suite 407 City, State, Zip Code City, State, Zip Code Staten Island, NY 10309 Fairfield, NJ 07004 License No. Telephone No. Telephone No. Project Manager for Monitoring Firm 00774 718-605-6256 973-774-3300 Benjamin Sallemi Name of OSHA Monitor Scheduled Completion Date (11) Start Date (10) 4 / 16 / 12 **Testor Tech** 4 / 02 / 12 Street Address Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement 10-59 Jackson Avenue ☐ Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: ____AM-___PM/___PM-___AM L.I.C NY 11101 Scope of Work (Check all that apply) □ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure □ Renovation □ Demolition Non-Exempted (*) and Non-Friable Procedure Abatement Type Is Location Normally Description of Encapsulate Enclosure Location of Remova Used Solely by Asbestos Containing Material (ACM) Amount Asbestos-Containing Material (ACM) Maintenance/ (i.e., thermal systems insulation, (Specify TO BE ABATED Custodial Staff? SF or LF) surfacing, VAT, or **IN Facility** (12)other miscellaneous) (13)Yes No N/A 200 LF Ø \boxtimes Pipe Insulation П Boiler Room 224 SF M \boxtimes П Roofing Canopy Roof П П Name of Registered Landfill NJDEP Waste Cubic Yards of Name of Registered Waste Hauler Hauler ID No. Waste Minerva Enterprises Inc Express Waste Services LLC 10 NJ-804 Disposal Date City, State City, State Waynesburg, OH 4/16/12 Newark, NJ Date Signature Completed By (Print or Type) Title Senior Project Manager John Tardy ASB-41

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

Check # 1328				Name o	of Building	Owner/Operator	(2)	場長工物	写	1	7	-	
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Street Address						Street Address	1.42.02						
				576 Valley Rd									
City, State, Zip Code						City, State. Zip							
				Wayne, NJ 07	470	License No.			_		90		
Project Manager for Monitoring Firm Teleph						Telephone No.		Despetation or general terms which					
			973-638-1777 Name of OSHA		01127			- 55	-	_			
Start Date (10)	Scheduled												
03/26/2012	03/27/201					Envirovision (Consultants, I	nc		-	_		_
Occupancy Status D	ouring Abatement (Check	only one)					p 1 D14	. # 24 4					
☑ Facility Closed/Va	acated During Entire Perio	d of Abate	ment			20-21 Wagara		g .# 34A				-	-
☐ Abatement Perfor ☐ Other - Describe:	med Outside of Normal Fa	ecility Hou	rs			City, State, Zip of Fair Lawn, NJ							
Scope of Work (Che	ck all that apply)					☐ E.III	Containment wi	th Negative Pressur	re				
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City, State		1003.	2102			Disposal Date	City, State						-
Wayne, NJ 07470)					1	Tullytown,	PA					
Completed by	Title					Signature	1	/	Date				-
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Newark, NJ 07102		Essex							School				•				
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Owner (8)	Ina			000	002		Four	r Strong Bi	uilders, Inc.								
TTI Environmental, Street Address	Inc.			[00	003		Stre	et Addres	ss								
1253 North Church	Street						180	Sargeant .	t Avenue								
City, State, Zip							City	. State.	Zip Code								
Moorestown, NJ 08	8057						Clift	on, NJ 070	7013-1935								
Project Manager for Monitoring Firm Telephone					e Nu	mber	Tele	phone Num	ber	Lice	nse h	lumbe	r				
Jim Guillardi 856-840								614-0377		0080	07						
Scheduled Start Date (10) Sched.Completion Date							Name of OSKA Monitor										
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Gym	•					Pipe	Insula	ition		20 LF	X	_					
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Four Strong Builde	ers Inc			2609					G.R.O.W.S., I	nc.							
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Nick Ziykovic		Procide	nt				1	(dlas	w 3	ent	2	/13/	2				
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	J =		F/	CILITY INF	ORMAT	ION									
Name of Facility Where ATCT Morristown Street Address	Abatement is Taking Municipal Airport	Place (3)					Type	School (K-12 Subchapter	2) 8 (Other th	an K-12)			L		
4 Airport Road							Other (i.e. private & commercial etc.) Square Feet # of Floors					buildings, homes,			
City (5) Morristown, NJ			10.	+ O-4- CD			600	Brown and a second	5	lomolisher		50			
County (6) Morris County			(STA	ity Code (7) TE USE ONL	Y,		Current Use (Prior if being demolish								
Name of Monitoring Fit Mc Cabe Environi	m Hired by Building C mental Services	wner (8)		CM No. 1118		First	Name of Abatement Contractor (9) First Phase Group Inc.								
Street Address 464 Valley Brook	Ave						Street Address 567 52nd Street Suite # 16								
City, State, Zip Code Lyndhurst NJ 070					City, State, Zip Code West New York NJ 07093										
Project Manager for M John Chiquiello		phone No. -438-483	9		Telephone No. License 201-758-7158 001144										
Start Date (10)	St. 75	Scheduled 6/30/201	것들은 것이를 하루시시하다	ion Date (11)		me of OSHA Monitor & S Environmental Laboratories LLC								
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													•		
Name of Registered VI DJM	faste Hauler			P Waste r ID No. 45	Cubi of W	c Yards aste			Registered rland Co		ndfil	l			
City, State 109-113 Jacobus	Ave Keamy NJ				Dispo	osal Date	8	City, State 142 Val	e ughn Rd	Shipper	nsbu	ırg F	'A		
Completed by Title Project				ger		Signatur	m	Treu	lr.	Date 10/		011			

430
(ant)

Date of Notification (1) 2/16/2012		Name of Building Owner/Operator (2) Stickley Furniture Co. E.C.A. Paramus LLC													
Agencies Notified Typ	e Notification	Street A	Address Ox 480/ One												
× DEP × DOL	Initial Amended Amendment #_ Emergency (including			ate, Zip Code us, NY 1310)4	MAH 2 U 2012									
DOH DCA	justification) Cancellation		Name of Bill Le	f Contact eier	(1 8 7)	Telephone Number									
Name of Facility Where Abate	mont is Taking Diago //	2)	FAC	ILITY INFORM	ATION	Les manuelles de la company	No. and Complete Contract of Complete Contract		-		1				
Private Property	ment is raking Place (.	3)				Type of Facility	500886501	ryu = Pett .	Cirk Hillings in	Angelon of the					
Street Address 55 West Route 4					Serge	School (K Subchapt Other (i.e etc.)	(-12) er 8 (Other t . private & c	than K-	12)			nes,			
City (5) Paramus					Square Feet 14000	# of FI	# of Floors			Age					
County (6) Bergen	,			Code (7) USE ONLY)		Current Use (F	Prior if being	demolis	shed)	T					
Name of Monitoring Firm Hired	by Building Owner (8)		ASCN	/ No.		e of Abatement Contractor (9) t Phase Group Inc									
Street Address			1			et Address 52nd Suite#16									
City, State, Zip Code						State, Zip Code St New York, NJ 07093									
Project Manager for Monitoring		Telepho	ne No.	Teleph	one No. 758-7158	Li	cense 1								
Start Date (10) 2/28/2012						of OSHA Monito Environmen	ır	31144		+		-			
Occupancy Status During Abar		E-110700				Address									
Facility Closed/Vacated D	ouring Entire Period of A	Abater	nent			Route 22 W	est								
Abatement Performed Ou Other – Describe: 8 hours	Hour	s			tate, Zip Code n NJ 07083				Ī		-2				
Scope of Work (Check All That ≥3 sf or ≥3 If ≥160 sf or ≥260 If						Full Containr Mini-Enclosu Glovebag Pro Non-Exempto	re ocedure	· ·			re				
		Locat Iorma	3500					•		Abatement Type					
Location of Asbestos-Containing Mater	ial (ACM) Use	d Sole	ly by		Description ontaining M	of aterial (ACM)	Amou	ınt		T .		Г			
TO BE ABATED In Facility (13)	Cust	odial (12)	Staff?	(i.e. therr su	nal systems rfacing, VA er miscellan	insulation, Γ, or	(Spec	Amount (Specify SF or LF)		Repair	Encapsulate	Enclosure			
Main floor	Yes	No	N/A X	Floo	r Tile & m	nactio	1200	20	-		0				
				1100	i ille a li	lastic	1200	JU	x						
Name of Registered Waste Hau Asbestos Transportation (Н	JDEP Wa auler ID I 1310		oic Yards Vaste	Name of Registered Landfill Minerva Enterprises									
City, State Shirley, NJ 11967				Dis	posal Date	City, Sta	•		8						
Completed by	Title				Signature			Da		-					
Edwin Precilla	ct Ma	nager		Eols	Date 2/16/2012										

Check # 1441

Date of Notification (1)				Name of Building Owner/Operator (2)									7	1							
3/14/2012					Prope	rty	1	E		\mathbb{W}	E	m	1 4								
Agencies Notified EPA	Type Notification	*	4.53	Street A 298 Te	ddress erminal	Ave	IIK'			******		The second	1	-	9	***					
DEP DOL	Amended Amendment #			City, Sta Clark I	ite, Zip Co NJ	ode		M	AR 20	201	2	w									
□ DOH	Emergency (in justification)	ncluding	1.3	Name of Contact					TOTAL CONTRACTOR	Tele	ephone	Num	ber								
DCA	Cancellation				Matare	915	É	AS)	358108 CO	JE				_							
Name of Facility Where A	hatement is Taking	Place (3)		FACI	LITY INFO	ORMAT	ION	Type	of Facility (4	Company of the last			j	2							
Private Property	ibatomont io Taking	1 1200 (0)						-	School (K-12	- to a strain	ay dipaterios			4							
Street Address	**************************************								Subchapter 8	(Oth											
298 Terminal Ave									Other (i.e. pr tc.)	ivate 8	k comm	nercial	buil	dings	hom	es,					
City (5) Clark NJ									e Feet 0	# of Floors			Bldg. Age +50								
County (6) Union				County Code (7) (STATE USE ONLY)					Current Use (Prior if being demolished)												
Name of Monitoring Firm N/A	Hired by Building O	wner (8)							e of Abatement Contractor (9) t Phase Group Inc												
Street Address						State of the	Street			-		****									
N/A				0					52nd st Suite #16												
City, State, Zip Code N/A		ACA 11 DV VIDEO 2-11							State, Zip Code st New York, NJ 07093												
Project Manager for Monitoring Firm N/A			11000	The contract of the contract o				Telephone No. License No. 201-758-7158													
Start Date (10) Scheduled C 3/26/2012 4/12/2012				pletion [Date (11)			5/00/2009/10	A Monitor Inmental	Corp		-									
Occupancy Status During	Abatement (Check	Only One)				Street	Addres	s												
Facility Closed/Vaca									22 Wes	t											
Abatement Performe X Other – Describe: 8		al Facility F	lours			-	City, St Unior		07083												
Scope of Work (Check Al	That Apply)	- Control	Ť				-														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-		ovation olition					Containment -Enclosure vebag Proce	edure	-										
		T	•••	2000		-		Non	-Exempted	ed (*) and Non-Friable				Abatement Abatement							
Location	of		rmall	ation ally				scription of						Туре							
Asbestos-Containing TO BE ABA In Facilit (13)	Material (ACM) TED	Used Main Custo	tenar	ice/		tos Con therma surfa	taining Mal systems scing, VAT	cription of ining Material (ACM) ystems insulation, ng, VAT, or scellaneous)			Amount (Specify SF or LF)		Remova	Repair	Encapsulate	Enclosure					
		Yes	No	N/A									<u>a</u>	-	late	l e					
main floor	T 300			x	, f	loor til	le and n	nastic		27	80Sf		x								
main floor	T300			х	С	ove m	olding r	nastic	;	35	50LF	- 1	x								
main floor	T298			х		f	loor tile	0		202	20 SF		x								
Main floor T 292 and 285						F	loor tile			57	7 SF	- 3	X								
Name of Registered Wast	te Hauler		100000000000000000000000000000000000000	JDEP W			Yards		Name of R	ame of Registered Landfill				l-							
Freehold Cartage Inc			1,032,03810	JD0541	No. 126164	of Wa			G.R.O.W	/.s. N	orth L	.andf	ill								
City, State Freehold, NJ						Dispo	sal Date		City, State Morrisvill	le, PA											
Completed by Edwin Precilla		Title Project	Ma	nager			Signature	e	1 de	Le.		Date 3/14		12							