State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) MERCK SHARP & DOHME CORP. Date of Notification (1) Street Address 17 126 E. LINCOLN AVENUE, P.O. BOX 2000, RM28-414 MAR 201 Type Notification Agencies Notified City, State, Zip Code Initial Notification **EPA** RAHWAY, NEW JERSEY 07065 Amended Notification ASBESTOS CONTROL & DEP Cancellation DOL LICENSING Telephone Number Name of Contact On Hold DOH EMERGENCY NOTIFICATION Sandra M. Schenk DCA **FACILITY INFORMATION** Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Subchapter 8 (Other than K-12) MERCK SHARP & DOHME CORPORATION Other (ie. private & commcl. bldgs., homes, etc.) # of Floors Bldg. Age Square Feet Street Address 65 40,000 126 EAST LINCOLN AVENUE - BUILDING 80N Current Use (Prior if being demolished) County Code (7) County (6) City (5) VACANT (STATE USE ONLY) UNION RAHWAY Name of Abatement Contractor (9) ASCM No. Name of Monitoring Firm Hired by Building Owner (8) PAR ENVIRONMENTAL CORPORATION 104 ENVIRONMETAL HEALTH INVESTIGATIONS, INC. Street Address Street Address 313 SPOOK ROCK ROAD 655 WEST SHORE TRAIL City, State, Zip Code City, State, Zip Code SUFFERN, NEW YORK 10901 SPARTA, NEW JERSEY 07871 License Number Telephone Number Telephone Number Project Manager for Monitoring Firm 1101 845-369-7500 973-729-5649 WILLIAM S. KERBEL, CIH Name of OSHA Monitor Sched. Completion Date (11) Expected State Date (10) AMERISCI LABORATORIES INC #11480 /17 30 /17 3 / Year Day Month Day Year Month Street Address Occupancy Status During Abatement (Check only one) 117 EAST 30TH STREET Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe: City, State, Zip Code MONDAY - FRIDAY 7 AM- 3:30 PM Other - Describe: NEW YORK, NEW YORK 10016 Full Containment with Negative Pressure Scope of Work (Check all that apply) Mini Enclo, Renovation Demolition Glovebag Procedure >3SF OR LF Non-Friable Procedure 260 LF >160 SF OR Abatement Type Description of Asbestos-Is Location Location of ENCAPSULE **ENCLOSURE** Amount Containing Material (ACM) normally used REMOVAI REPAIR Asbestos-containing (Specify (ie. Thermal systems solely by Material (ACM) SF or LF) insulation, surfacing, VAT, Maint/Custodial TO BE ABATED or other miscellaneous) Staff (12) in Facility (13) Yes No N/A X 50 SQ. FT. VAT & MASTIC X 1st FLOOR ROOM B-51 Name of Registered Landfill Cubic Yards of Waste NJDEP Waste Name of Registered Waste Hauler LYCOMING COUNTY RESOURCE MANAGEMENT SE 1 Hauler ID No. FREEHOLD CARTAGE, INC. 447 ALEXANDER DRIVE/ROUTE 15 15939 825 HIGHWAY 33 Disposal Date City, State City, State MONTGOMERY, PA 17752 2/1-10/30/17 FREEHOLD, NEW JERSEY Signature Completed by (Print or Type))perations

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Date of Notification (1) 3/16/17		Name of Building Owner/Operator (2) Moshe Finkel						(2)	i jed						
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Completed by JOSEPH PERLSTEIN	Title OWNER			Signature				Date							

State of New Jersey NOTIFICATION OF ASSESTOS ABATEMENT

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	All Comments	-						the state of the s	*			arrest sales
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Name of Registered Waste Haufer	on-base attinuations on		UDEP W lauler ID		ubic Yards Waste			Registered La	ndfill			19
Ace Insulation Co., Inc.		-	2086	Control Control	(Landfill				
City, State				1 36	sposal Date	9	City, Sta	275				
Colts Neck, New Jersey Completed by	1	1/3/10 Signatur	e e		111	Date :	\					
Bree McGuire	Title Seci	retary	Treast	irer		1	M		3	100	7	
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

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ate of Notification (1) MARCH 18, 2017)		Na A	me of Buil	ding Owne	er/Operator PRESCH	(2) IOOL	Per al	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		UII		F
	pe Notification		Str 1	reet Addre 235-37 I	ss MONRO	E AVENU	ΙE		ASBESTOS LICE	CON NSING		L &	
EPA DEP			Cit	ty, State, Z	Zip Code PARK,	NJ 07712							
DOL DOH	Amendment # Emergency (incli justification)	uding	Na	ame of Co				1	Telenhone Numb	er			
DCA C	Cancellation				Y INFORM		- (5						-
ame of Facility Where Aba A LITTLE CLASS PR	atement is Taking Pl ESCHOOL	ace (3)					□ Sch	acility (4) ool (K-12) chapter 8 (6	Other than K-12)				
treet Address 1235-37 MONROE A	VENUE						Other etc.	er (i.e. priva)	# of Floors	Dullaling	s, no		
City (5) ASBURY PARK							39 02	SF	l f being demolish		10	YRS.	,
County (6) MONMOUTH			C	County Coo	de (7) E ONLY) _		PRES	CHOOL	ator (O)				
Name of Monitoring Firm H	Hired by Building Ow	ner (8)		ASCM N	lo.	Fin	ishing To	nent Contra uch Asbe	estos Abatem	ent Co	rp., 1	nc.	
Street Address	Every to					17		on Street					
City, State, Zip Code	4			20		City, We	State, Zip est Long	Code Branch, N	NJ 07764				
Project Manager for Monit				Telephone	No.	73	phone No. 2.222.83		License N 00040	0.			
N/A Start Date (10)		Scheduled	Con	npletion Da	ate (11)	N/							_
Occupancy Status During	Abatement (Check	Only One)	1			Stre	et Address						
Facility Closed/Vaca Abatement Performe Other – Describe:	ited During Entire Pe ed Outside of Norma	eriod of Ab al Facility H	den	nent s		City	, State, Zip	Code					
Scope of Work (Check A ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	ll That Apply)		nova	ation ition			□ Mini	-Enclosure	adure			.	
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			_oca			Descrip	tion of				Ту	pe	
Location Asbestos-Containing TO BE AB In Faci (13)	Material (ACM) ATED lity	Used	Sol	ely by ance/ Staff?	Asbest (i.e.	os Containir thermal syst surfacing other misc	ng Material tems insula . VAT, or	(ACM)	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Eliciosnie
(10)		Yes	No	N/A		TO! F!	DOW		10LF	×	-		-
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Name of Registered Williams	aste Hauler bestos Abateme	ent Corp.	., 1	NJDEP V Hauler II 12058		of Waste	3,7	FAIRL	ESS LANDFI	LL			
City, State WEST LONG BRA						Disposal	Date	City, Sta MORF	te RISVILLE, PA	Date			
Completed by	5000 (T. 15 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Title	Title PRESIDENT				Signature 3/18/17						

State of New Jersey

NOTI	FICATIO	State of New ON OF ASBE Int to NJAC 8	STOS AB	ATEMENT 2:120)	Common and a second and a secon	1) 15 15 16		W		
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Date of Notification (1) March 20, 2017 Agencies Notified Type Notification	Street	0 44		4		4116	7			
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DEP	City, 3	State, Zip Co	NORR	istow	n T	VJ 07	/	2		
Emergency (including justification)		of Contact	Sch	, ae,0e)	Telephone Number	er '	- 6		
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Name of Facility Where Abatement is Taking Place (3)	1.				Facility (4)	-				
Morristown + Erie Ro		vay		. T SI	thchapter 8	(Other than K-12) rate & commercial t	ouildin	gs, ho	omes,	.
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County (6)	Coun	nty Code (7) TE USE ONLY		Сигтеп	t Use (Prior	if being demolished	i)			
Morristown	The state of	SCM No.		Name of Abate	ement Contr	actor (9)		-		
Name of Monitoring Firm Hired by Building Owner (8)		NA		EPC	. Tec	hoolegi	es	1	100	6
Street Address			1	Street Address	Box	337				
City, State, Zip Code	A	063	2	City State, ZIP	Code	. 117	ns	15	37	3
New Equat, NO	Telev	phone No.	9	Telephone No	E JY	License No.		A	1	
Project Manager for Monit ril go irm	60	9758-	3365	09 758	-336	5 OC	0	7	1_	
Start Date (10)		ion Date (11)		Name of OSH		mologies	In	iC_		
3-30-17 4- Occupancy Status During Abatement (Check Only One)	_			Street Addres	s					
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Abatement Performed Outside of Normal Facility H						NJO	85	3	3	
Scope of Work (Check All That Apply)				- FII	I Containma	nt with Negative Pr	essun	e		
Z STOP ZO II	novation molition			☐ Min	ni-Enclosure	edure				
□ ≥160 st 0. ≥200 ft				□ Noi	n-Exempted	(*) and Non-Friable	e Proc	edure Abate	ment	-
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TO BE ABATED Custo	dial Staff (12)	f? (L	surfac	ing, VAT, or niscellaneous)		SF or LF)	Remova	Repair	Encapsulate	Enclosure
(13)		N/A	outern	iiscellarieous)			a		ate	θ.
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Under Rail Car	_	~ []	he 1	113001-01	10					
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			1 2 11	V 1	Name of	Registered Landfill				<u></u>
Name of Registered Waste Haufer		EP Waste ller ID No.	of Wa	Yards ste		te Manage		t	e f	PA
EPC Technologies	1	7000	Dispo	sal Date	City, Sta	te				
EPC Technologies City. State New Egypt Title	Χ,		4-	3-17	Mori		PA ate_			, -7
Completed by Schenker Pre	side	1		Signature	Sch	ch	3	-2	0-	17
Store Mennen The	2100	1 /								

Ch 2045.	NOTIFICATION OF	of New Jersey F ASBESTOS A NJAC 8:60 and	ABATE) E C	E	V	E	-10
Date of Notification (1)	Da	uilding Owner/C	Operator	(2)	And the second s	MAR	2 2	201	7	
Agencies Notified EPA DEP DOL DOL DOH DOA Type Notification Initial Amended Amendment # Emergency (including justification) Cancellation	City, State, Name of Co	Zip Code	DU	NJ	07	ASBESTO 8F2 LIC Telephone Nu	<u>ENS</u>		OL	<u> </u> &
Name of Facility Where Abatement is Taking Place (Y INFORMATI	ON	Type of F	acility (4)					
Street Address. 7 (2) (2)	^			☐ Subo		Other than K-1 te & commerc		dings,	home	es,
City (5) Washington				Square Fe	eet i	# of Floors	В	ldg. A		
County (6) WM1(P)	County Cod (STATE USE				se (Prior if	being demolis	hed)	-10		
Name of Monitoring Firm Hired by Building Owner (8) ASCM N	0.		of Abateme	ent Contractes Inc.	tor (9)				
Street Address				Address Box 915						
City. State, Zip Code				tate, Zip Co	ode ersey 087	23				
Project Manager for Monitoring Firm	Telephone I	No.	Teleph	one No. 899-749		License N	10.			
Start Date (10) Schedur Occupancy Status During Abatement (Check Only O	11011	e (11)		of OSHA M	Ionitor					
Facility Closed/Vacated During Entire Period of Abatement Performed Outside of Normal Facility Other – Describe:	Abatement	To constitute the second		ate, Zip Co	ode					
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf	Renovation Demolition			Mini-En Gloveba	closure ag Procedu	vith Negative I re and Non-Frial				
	S Location Normally	Doo	scription	of.				Abate Ty	100000000000000000000000000000000000000	
Asbestos-Containing Material (ACM) TO BE ABATED Material (ACM)	ed Solely by sintenance/ todial Staff? (12)	Asbestos Conta (i.e. thermal surface	aining M	aterial (AC insulation, Γ, or		Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
103	0	Sbesto:	5 Co	ontain	ine 6	00SF	X			
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Name of Registered Waste Hauler Brick Industries Inc.	NJDEP Waste Hauler ID No. 21602				me of Regi ROWS Ir	stered Landfil IC.				
City, State Brick, New Jersey		Dispos	al Date	Cit P	y, State A					
Completed by Title	ident	Si	gnature	Eite	9	Da	**************************************	1/1-	7	

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Date of Notification (1) 03/17/2017				Building					1000	MAI	1 2	2 2	01/	11
Agencies Notified Type Notification			Street A	ddress le Point	on Hu	ıdson				ASBEST	OS C	ON.	TRO	L &
X EPA X Initial Amended Amendmen	t #			te, Zip Co en, NJ (Li	OEN	SHYC	3	
▼ Emergency □ DOH justification □ DCA Cancellation			Name of	Contact Fernance					Tel	enhone Nu	mber			
			FACII	LITY INFO	ORMATI	ION				-				
Name of Facility Where Abatement is Takin Burchard Building Street Address	ng Place (3)						×	of Facility (School (K-1 Subchanter	2)	er than K-1	2)			
524 River Street							Ħ	Other (i.e. petc.)	orivate (& commerc	ial buile			es,
City (5) Hoboken							Squa N/A	re Feet	# o	f Floors A	V.5334	ildg. A I/A	ge	
County (6) Hudson			County C	Code (7) JSE ONLY)		Sch		or if bei	ng demolis	hed)			
Name of Monitoring Firm Hired by Building TBD	Owner (8)		ASCM	l No.				tement Cor ement, In		(9)				
Street Address							Addre	ss gren Avei	 nue					
City, State, Zip Code						City, S	State, Z	ip Code J 07512						
Project Manager for Monitoring Firm			Telephor	ne No.		Teleph	none N 345-8	o.		License N	lo.			
Start Date (10)	Scheduled		npletion [Date (11)		Name	of OSI	HA Monitor	1000	01011				
03/21/2017	03/22/20						Addres	ement, In	C.			- 12		
Occupancy Status During Abatement (Che Facility Closed/Vacated During Entire Abatement Performed Outside of Norr	Period of Ab	atem				11 R	osenç	gren Aver	nue					
Other – Describe: Occupied	narr donney r	Tourc			_			J 07512						
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	CONTRACTOR .	nova molit		201.00		×	Mir Glo	ni-Enclosure vebag Pro	e cedure	i Negative F			e	
Location of	200000	ocati rmal	200		De	scription	of						ement pe	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)		tenar dial S (12)	nce/ Staff?		tos Cont thermal surfa	taining N	Material s insula T, or		(5	mount Specify or LF)	Removal	Repair	Encapsulate	Enclosure
Penthouse Utility Room	Yes	No X	N/A	Pipe	Insula	ition (w	vrap 8	cut)	3	0 LF	X			
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Name of Registered Waste Hauler D&S Abatement, Inc.		Н	JDEP Wauler ID 1 0996		of Was					red Landfill gement o				
City, State Totowa, NJ					Dispos	sal Date	l.	City, Stat Tullytov		4				
Completed by Oliver Heaedis	Title Project	t Ma	nager		S	Signature	PA			Da	ate 3/17/2	017		

Print Form State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2) Richard Franko 03/17/2017 ASBESTOS CONTROL & Street Address Type Notification LICENSING Agencies Notified Initial **EPA** City, State, Zip Code Amended × DEP Westfield, NJ 07090 Amendment # × DOL Telephone Number Emergency (including Name of Contact iustification) DOH Richard Franko Cancellation DCA FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) House Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, Street Address etc.) Bldg. Age # of Floors Square Feet N/A N/A City (5) N/A Westfield Current Use (Prior if being demolished) County Code (7) County (6) (STATE USE ONLY) House Union Name of Abatement Contractor (9) ASCM No. Name of Monitoring Firm Hired by Building Owner (8) D&S Abatement, Inc Street Address 11 Rosengren Avenue Street Address City, State, Zip Code City, State, Zip Code Totowa, NJ 07512 License No. Telephone No. Telephone No. Project Manager for Monitoring Firm 01311 973-345-8685 Name of OSHA Monitor Scheduled Completion Date (11) Start Date (10) D&S Abatement, Inc. 03/28/2016 03/27/2017 Street Address Occupancy Status During Abatement (Check Only One) 11 Rosengren Avenue Facility Closed/Vacated During Entire Period of Abatement City, State, Zip Code Abatement Performed Outside of Normal Facility Hours Totowa, NJ 07512 Other - Describe: Occupied × Scope of Work (Check All That Apply) Full Containment with Negative Pressure Renovation Mini-Enclosure ≥3 sf or ≥3 lf Demolition Glovebag Procedure ≥160 sf or ≥260 lf Non-Exempted (*) and Non-Friable Procedure Abatement Type Is Location Normally Description of Amount Asbestos Containing Material (ACM) Location of Used Solely by Asbestos-Containing Material (ACM) Remova (Specify Maintenance/ (i.e. thermal systems insulation, Repair TO BE ABATED SF or LF) Custodial Staff? surfacing, VAT, or In Facility (12)other miscellaneous) (13)N/A No Yes 120 SF X Vermiculite X Attic Name of Registered Landfill Cubic Yards NJDEP Waste

of Waste

Disposal Date

TBD

TBD

Hauler ID No.

20996

Project Manager

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

City, State Tullytown, PA

Waste Management of PA

Date

Oliver Hegedis

City, State

Totowa, NJ

Completed by

Name of Registered Waste Hauler

D&S Abatement, Inc.

		NOTIF:	ICATIO	N OF AS	SBEST	OS ABATEMENT and 12:120-7	1		ME	G [5				
ate of Notification	n (1)	(Pursual	Tame of	Build	ing C	wner/Operator	2 (2	2)						- Special	
3/17/2017				oara					M. M.	IAR	2 2	20)17	i	
Agencies Notified	Type Notifica	ation	Street	Addres	s										
[]EPA	[X]Initial								ASBE	STO	20	ONI	BO	1 &	
[]DEP	Notific	ation	City, S	State,	Zip C	lode			1	LICE					
[X]DOL	[]Amended Notific	ation	Mor	risto	own,	NJ,07960									
[X]DOH		I F	Name of	E Conta	ct			Telephone	Number						
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	[]Cancella	tion		D. G.T. 7	-mir Ti	ATTO DAY OF TON	-								
Name of Facility Wh	ara Abatamant	is Takin	σ Plac		LTX TI	NFORMATION	TT	ype of Facili	Lity (4)						
Barbara Dunga		IS TURNING	9 1140					[]School ((K-12) er 8 (Other	r tha	in K	-12)			
Street Address								<pre>[X]Other (i buildings,</pre>			CON	mer	cial		
							S	quare Feet	# of Floo:	rs	Bld	g. A	ge		
City (5)		County (6)			nty Code (7)		2073	2			65			
Morristown	Essex			(ST	ATE USE ONLY)	Cı	urrent Use (F	Prior if be	ing d	lemo	lish	ied)			
Name of Monitoring Owner (8) N/A	/A					Name of Abate AZTECH N		nt Contractor							
Street Address					Street Addres		opher St.								
City, State, Zip Co					City, State, Montcla		p Code , NJ 0704	12							
Project Manager for	Monitoring F:	irm Tel		Numbe:	r	Telephone Num			L	icen:			er		
Scheduled Start Dat	e (10) Sche	ed. Compl		Date (11)	Name of OSHA	Mo	nitor							
03 27 2	2017	03 2		2017 Year		N/A									
Occupancy Status Du [X]Facility Cl	ring Abatement osed/Vacated D	t (Check	only o	one) eriod		Street Addres	ss								
of Abatement P []Abatement P Hours - Des []other - Des	erformed Outsi cribe:«OffHour	s Descri	pt»		7	City, State,	, Zip Code								
Scope of Work (Chec [X]>3 sf or []>160 sf		[2	K]Reno	vation lition		[X]Mini [X]Glov	-En	ontainment wi aclosure bag Procedure able Procedu		Pre	ssu	re			
		300	Is							1	Abat	eme	-	уре	
Location Asbestos-Co Material TO BE A In Faci	By Ma	Location Normally Used Solely Maintenance/ Custodial Staff (12) in			Descripti Asbestos-Con Material (i.e., therma sulation, surs or other misce	nta (AC al s fac	ining CM) systems ing, VAT,	Amount (Specify SF or LF)	7	R E M O V A L	R E P A I R	EZCAPSDH ·	ENCHONDRE		
Basement			X	Duc	t Insulat	tion 24 Sq.Ft			t 2	ζ					
Name of Registered AZTECH MANA		JC Ha	DEP Wa	ID No.		oic Yards Waste 1.0		Name of Regi Minerva				INC	2		
City, State Montclair, No	J 07042					sposal Date)3/29/201	7	City, State Waynesb	urg, Oh	io	44	688	3		
Completed By (Prinding Dimitri G. To	tle dminis	trat	cor		Signatur	:e	46//	7	Da 3/		201	7			

State of New Jersey

CHECK # 13001



DN F	HOLD	NOTIF (F	ICATI Pursua	ON OF	f New Jersey ASBESTOS / JAC 8:60 and	12:120)				2 20 2 1 2 20	7 E	3	
ate of Notification (1)			Nam	e of Buil penste	ding Owner/O in Propertie	perator (es	(2)		WAIL		1.2	1	
1/2/17 & 3/17/17 gencies Notified	Type Notification			et Addre	_{ss} Main Stree	t			ASBESTOS (CONT	ROL	. &	
EPA DEP	Initial Amended		City,	State, 2	Zip Code			<u> </u>					
DOL	Amendment #_ Emergency (inc	cluding		ie Falls	s, NJ 0742	7		1 -	Telephone Numb	er			
DOH	justification) Cancellation		Wil	I Cum	mings						-	-	
DCA			F	ACILIT	Y INFORMAT	ION	Type of F	acility (4)				-	
20-21 Wagaraw R							Scho	ool (K-12) chapter 8 (er (i.e. priva	Other than K-12) ate & commercial	building	gs, ho	mes,	
Buildings 30 & 32	20-21 Wagaraw I	Road					Square F		# of Floors	Bldg	j. Age		
City (5)							2400		2	65			
Fair Lawn			Cou	unty Coo	ie (7)		Current U	Jse (Prior it	f being demolishe	ed)			
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Bergen	rm Hired by Building O	wner (8)	1	ASCM N	lo.	Name	of Abatem	nent Contra Imental S	Services, LLC				
tame or Mormoning .						The Contractor	t Address	IIIIeiitai e	001110001				
Street Address						PO	Box 483	, 4 E Gat	e Drive				
77. 0 4						City,	State, Zip (Code					
City, State, Zip Code							nwood, N	4J 0741	License N	0.		-	
Project Manager for N	Ionitoring Firm		Те	lephone	No.		phone No. 3-764-22	76	703				
		Scheduled	Comp	letion Da	ate (11)	10.000	e of OSHA						
Start Date (10) 3/14/17		4/30/17	Ourie										-
Occupancy Status Du	iring Abatement (Chec	k Only One)			Stre	et Address						
	/acated During Entire Formed Outside of Norm	Period of Ab	ateme	nt		City	, State, Zip	Code					
Scope of Work (Chec ≥3 sf or ≥3 lf ≥160 sf or ≥260		X Re □ De	enovati emolitic	on on			Mini	-Enclosure	nt with Negative edure (*) and Non-Fria	ble Prod	cedur Abate	e ement pe	
			Locatio ormally			Descrip	tion of				1 7	pc	
Asbestos-Contai TO BE In	ation of ning Material (ACM) EABATED Facility (13)	Used	d Solely ntenan odial S (12)	y by ice/ taff?	(i.e. the	Containir rmal syst urfacing.	ng Material rems insula VAT, or ellaneous)	(ACM) tion,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	
		Yes	No	N/A		sine inc	ulation		190 LF	x			
exterior between	en Bldgs 30 & 32			X	F	ipe ins	uialiOII						
Name of Registere			1	JDEP V Hauler ID	No.	Cubic Yar	rds	1	Registered Land rn Berks Land	.9			
Freehold Cartag	ge		1	5939		TBD Disposal	Date	City, Sta					
City, State Freehold, NJ						rBD	nature		oro, PA	Date			
Completed by A. Scott Higgin	S	Title Pres	sident	t			- A	//		3/2/1	7 & 3	3/17/	1

'h 2127	NC	(Pur	suant to	NJAC 8:6	30 and 12:1	20)	• •	The state of the s		MAR	2 0	201	7	
Date of Notification (1) 3/16/17		N	ame of B	uilding Ov Orange/N	vner/Operat Maplewoo	tor (2) d Bo	ard o	of Educati	on	1117.111				
Agencies Notified Type Notification		S	treet Add						AS	BESTC LIC	1 CC 181	NTF NG	ROL (Ž.
EPA Initial DEP Amended Amendment #	i	C	ity, State	, Zip Code)			December 1						
Emergency (in justification)	ncluding	N	lame of C William	Contact					Telepl	hone Nun	ber			
DCA Cancellation Name of Facility Where Abatement is Taking	Place (3)			TY INFOR	RMATION	T ₁	/pe of	Facility (4)						
South Orange/Maplewood BOE Ad	ministra	tion E	Building			×	l Sc	hool (K-12)	(Other	than K-12)			
Street Address 525 Academy St.							Ot etc	her (i.e. priv	/ate & c	commercia	al build			5,
City (5) Maplewood							quare		# of F			dg. Ag	je	
County (6) Essex			County Co	ode (7) SE ONLY)		С	urrent	Use (Prior	if being	g demolish	ied)			
Name of Monitoring Firm Hired by Building C AHERA Consultations Inc.	Owner (8)		ASCM 0057	No.				ment Contri Construction						
Street Address PO Box 385					1	eet Ad		West Suit	te 14					
City, State, Zip Code Oceanville, NJ 08231					100000	• • • • • • • • • • • • • • • • • • • •	STREET, STREET	Code 07512						
Project Manager for Monitoring Firm Eric Clarkson			Felephon			lephon			100	License N 01155	0,			
Start Date (10) 04/07/17	Schedule		pletion D	ate (11)				A Monitor Insultants	Inc.					
Occupancy Status During Abatement (Chec	k Only On	e)				reet Ad								
Facility Closed/Vacated During Entire R Abatement Performed Outside of Norm Other – Describe:	Period of A nal Facility	Abatem Hours	ent		Cit	ty, Sta	te, Zip	Code , NJ 0823	1					
Scope of Work (Check All That Apply) ≥3 sf or ≥3 if ≥160 sf or ≥260 if	-	Renova Demolit				×	Mini- Glov	Containmer -Enclosure rebag Proce -Exempted	edure				е	
	1	Locati										Abate	ement pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	Normal ed Sole intenal todial S (12)	ly by nce/	Asbest (i.e.	Descrip os Containii thermal sys surfacing other misc	ng Ma tems i , VAT,	terial insulat or	(ACM)	(Sp	nount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
Boiler Room	X	140	19/35		Boiler In	sulat	tion		40	SF	Х		Х	
Name of Registered Waste Hauler			NJDEP W Hauler ID		Cubic Yar of Waste	rds		Name of F						
Academy Construction Inc. City, State		C	34422		3 Disposal	Date		City, State)					
Totowa, NJ Completed by	Title				TBD Sign	atyre	1	Tullytov	vn, PA	1	ate	11617.544		
John Geleski	PM					Sil		Deles	1_	()3/16/	17		

N/ Print Form

Date of Notification (1) 3/16/2017				f Building Construc			r (2)			 !	IAR	2.2	2 (17	
Agencies Notified Type Notification		1000	Street A	ddress ummit A	venue					ASBES	STC	SC	ONT	ROL	
EPA Initial Amended Amendment				ate, Zip Co nit, NJ 0							LIC	ENS	divo		
Emergency (DOH DCA Emergency (justification) Cancellation	including		Name of	f Contact					Tel	ephone	Num	ber			
			FACI	LITY INFO	DRMAT	ION			_						
Name of Facility Where Abatement is Taking Residential	Place (3)		TAGI	LITT HAT	ZINIA I		Тур	e of Facility (
Street Address							×	Subchapter Other (i.e. p etc.)	8 (Oth	er than k comm	K-12) iercia) I build	dings,	home	es,
City (5) Chatham								are Feet 80 SF		Floors 2 Firs		1000	ldg. A Built		9
County (6) Morris				Code (7) USE ONLY				rent Use (Pri sidential	or if bei	ng dem	olishe	ed)			
Name of Monitoring Firm Hired by Building C	wner (8)		ASCN	1 No.		And a second by a common		oatement Cor Contracting							
Street Address						Street 32 W		ess v Way							
City, State, Zip Code								Zip Code d Park, No	0742	24		odin 7 o			
Project Manager for Monitoring Firm		T	elephor	ne No.		Teleph 973-3		No. 9176		Licens 0123			17		
Start Date (10) 3/27/2017	Scheduled 3/29/201	Million market	oletion [Date (11)				SHA Monitor ion Consu	Itants,	Inc.					
Occupancy Status During Abatement (Check	Only One)					Street	Addr	ess							
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other – Describe:	eriod of Aba	ateme	ent			City, S	tate,	agaraw Ro Zip Code n, NJ 074		35 E	=				
						raii i	Lavv	11, 145 074	10						
Scope of Work (Check All That Apply) ≥3 sf or ≥3 If ≥160 sf or ≥260 If	-	iovati nolitio				×	N G	ull Containme lini-Enclosure lovebag Proc on-Exempted	edure					a	
		03				-		OII EXCITIPIO	7 4.10		1		Abate	- C C 16 - 3	
	1000000	catio											Ту		
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used S Mainte Custod	enand	by ce/		os Cont thermal surfa	scription taining M systems cing, VA niscellan	Materi s insu T, or		(S	nount pecify or LF)		Removal	Repair	Encapsulate	Enclosure
	Yes 1	Vo	N/A											Ф	
Basement			X		Pipe	Insula	tion		31	0 L.F	-	X			
		1	DEC 111		Cubic	Vorda		Name of	Dagieto	red Lan	dfill				
Name of Registered Waste Hauler Unicorn Contracting Corp.		На	DEP Willer ID 1 035844	No.	Cubic of Was			Fairless			ann				
City, State Woodland Park, New Jersey					Dispos	sal Date		City, State Morrisy		Ą					
Completed by Dimo Golcev	Title Genera	l Ma	nager		S	ignature	7	1/1			Date	6/20	17		

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	MAR	-2	2	2017		
AS	BEST	OS C	ON	VTRO	8 i(

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ate of Notification (1) 3–17–17			1000	me of Buil PMG,	lding Owner/O Inc.	perator (2)		To the second	L MAR	C 2	201		
gencies Notified	Type Notification		Stre	eet Addres	SS				ASBESTO	SCO	JTD	71 5	
MACINA	T laws		3	Ches	stnut Ri	dg Roa	ad		LICI	ENSIA	G	JL C	X
EPA DEP	☐ Initial ☑ Amended	2	Cit	y, State, Z	Zip Code								-
DOL	Amendment #_	2	M	iontva	ale, NJ	07645	5						_
POLI	☐ Emergency (including justification)	luding	Na	me of Cor	ntact				Telephone Numbe	ľ			
DOH DCA	☐ Cancellation											N-10-171	_
			1	FACILIT	Y INFORMA	TION	Type of Fac	silin: (1)			110000		-
lame of Facility Where Al		ce (3)											
75 Chestnut F	Ridge Road						□ Subcl	ol (K-12) nanter 8 (C	Other than K-12)				
treet Address							∑ Other	(i.e. priva	ate & commercial b	uildings.	home	s, etc.)
75 Chestnut I	Ridge Road						Square Fee	t	# of Floors	Bldg	Age		
City (5)							35,00		3	Commercial	yrs		
Montvale			10		1. (7)				being demolished)		2	-	
County (6)				ounty Cod TATE USE			vacan						
Bergen		(0)	1	ASCM N	io	Name	of Abatemer		tor (9)				
Name of Monitoring Firm	Hired by Building Ov	mer (8)		ASCIVIN	NO.	Ply	nouth E	nviro	onmental Co	o.,In	C.		
Whitestone As	ssociates, .	_110 •					Address						
Street Address	~i						Haws A	venue	9				
1500 Manor D	rive					City.	State, Zip Co	de					
City, State, Zip Code Chalfont, PA	18914						ristowr		19401				
			T	elephone	No.	Telep	hone No.		License No				
Project Manager for Moni	toring rum ++				12-2700	610	-239-99	920	00398				
		Scheduled C	omple	etion Date	:(11)	Name	of OSHA N	1onitor					
Start Date (10) 2–25–17		3-31-			10: 10	Ply	ymouth	Envir	conmental (٥.,I	nc.		
Occupancy Status During	Abatement (Check O	nly One)				Street	t Address						
			nant			923	3 Haws	Avenu	ie				
□ Abatement Perform	ated During Entire Per ed Outside of Normal	Facility Hour	S			City,	State, Zip C	ode					
☐ Other – Describe:						No	rristov	m, PA	19401				
	st met on America												
Scope of Work (Check A	II I nat Apply)			on			₩ Full C	ontainme	nt with Negative Pro				
Scope of Work (Check A	II I nat Apply)	X Re	novati	QH:						essure			
Scope of Work (Check A ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	ii i nat Appiy)	(1997) AMASS	novati moliti				☐ Mini-I	Enclosure bag Proce	dure				_
≥3 sf or ≥3 lf	н тлас Арріу)	(1997) AMASS					☐ Mini-I	Enclosure bag Proce					
≥3 sf or ≥3 lf	ii i nat Appiy)	□ De	moliti	on			☐ Mini-I	Enclosure bag Proce	dure		Abate		
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 		□ De		on		Descripti	☐ Mini-☐ Glove ☑ Non-Ⅰ	Enclosure bag Proce	dure				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Locat	ion of	□ De	ocation Solel	on on ly y by	Asbestos	Descripti Containing	☐ Mini- ☐ Glove ☒ Non-I	Enclosure bag Proce Exempted CM)	dure (*) and Non-Friable Amount	e Procedu	Abate Ty	pe	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Locat Asbestos-Containing TO BE A	ion of ng Material (ACM) BATED	Is I Ve Used Mai	ocatio	on on y by nce/	Asbestos (i.e. thermal	Containing systems in	☐ Mini-☐ Glove ☑ Non-☐ on of Material (Ausulation, sur	Enclosure bag Proce Exempted CM)	dure (*) and Non-Friable	e Procedu	Abate Ty	pe	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Locat Asbestos-Containin TO BE A In Fa	ion of ng Material (ACM) BATED cility	Is I No Used	ocationall Solel	on on y by nce/	(i.e. thermal	Containing	☐ Mini-I ☐ Glove ☒ Non-I on of Material (A isulation, sur	Enclosure bag Proce Exempted CM)	dure (*) and Non-Friable Amount (Specify		Abate	pe	
\geq 3 sf or \geq 3 lf \geq 160 sf or \geq 260 lf Locat Asbestos-Containing TO BE A In Fa	ion of ng Material (ACM) BATED	Is I No Used Mail Custo	ocationmall Solel ntenar odial S	on on y y by nce/ Staf?	(i.e. thermal	Containing systems in VAT,	☐ Mini-I ☐ Glove ☒ Non-I on of Material (A isulation, sur	Enclosure bag Proce Exempted CM)	dure (*) and Non-Friable Amount (Specify	e Procedu	Abate Ty		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Locat Asbestos-Containin TO BE A In Fa (1	ion of ng Material (ACM) BATED cility	Is I No Used	ocationmalli Solel ntenarodial S	on on y by nce/	(i.e. thermal	Containing systems in VAT, ther misce	☐ Mini-☐ Glove ☑ Non-f ☐ on of ☐ Material (A issulation, sur or llaneous)	Enclosure bag Proce Exempted CM)	dure (*) and Non-Friable Amount (Specify SF or LF)	e Procedu	Abate Ty	pe	Linearonne
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≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Locat Asbestos-Containin TO BE A In Fa (1	ion of ng Material (ACM) IBATED cility 3)	Is I No Used Mai Custo	ocationmalli Solel ntenarodial S	on on y y by nce/ Staf?	VAT & N	Containing systems in VAT. ther misce	□ Mini- □ Glove ⊠ Non-I on of Material (A issulation, sur or Illaneous)	Enclosure bag Procedure Exempted CM) facing.	Amount (Specify SF or LF) 750 SF 2,040 SF	Removal X	Abate Ty	pe	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Locat Asbestos-Containin TO BE A In Fa (1)	ion of ng Material (ACM) IBATED cility 3)	Is I No Used Mail Custo	nocation or mall Solel ntenarodial S (12)	on on y y by nce/ Staf?	(i.e. thermal	Containing systems in VAT. ther misce	□ Mini- □ Glove ⊠ Non-I on of Material (A issulation, sur or Illaneous)	Enclosure bag Procedure Exempted CM) facing.	Amount (Specify SF or LF)	Removal	Abate Ty	pe	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Locat Asbestos-Containing TO BE A In Fa (1) 1st floor Basement & F Roof	ion of ng Material (ACM) (BATED cility 3)	Is I No Used Mai Custo	cocation constitution of the constitution of t	on on y y by nce/ staft?	VAT & N ceramic	Containing systems in VAT. ther misce	□ Mini- □ Glove ⊠ Non-I on of Material (A isulation, sur or Illaneous)	Enclosure bag Proce Exempted CM) facing.	Amount (Specify SF or LF) 750 SF 2,040 SF	Removal X	Abate Ty	pe	
Deat State	ion of ng Material (ACM) BATED cility 3) Pirst Floor aste Hauler	Is I No Used Mai Custo	cocation and the cocati	on on y y y y by nce/ staff? N/A	VAT & N ceramic roof f.	Containing systems in VAT, ther misce Mastic tile Lashin Cubic Yard of Waste	□ Mini- □ Glove ⊠ Non-I on of Material (A isulation, sur or Illaneous)	Enclosure bag Proce Exempted CM) facing.	Amount (Specify SF or LF) 750 SF 2,040 SF 180 SF	Removal X X	Abate Ty	pe	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Locat Asbestos-Containing TO BE A In Fa (1) 1st floor Basement & F Roof	ion of ng Material (ACM) BATED cility 3) Pirst Floor aste Hauler	Is I No Used Mai Custo	cocation and the cocati	on on y y y by nce/ staff? N/A	VAT & No.	Containing systems in VAT, ther misce Mastic tile Lashin Cubic Yard of Waste 5	□ Mini- □ Glove ⊠ Non-I on of Material (A isulation, sur or Illaneous)	Enclosure bag Processempted CM) facing. tic Name of	Amount (Specify SF or LF) 750 SF 2,040 SF 180 SF Registered Landfill	Removal X X	Abate Ty	pe	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Locat Asbestos-Containing TO BE A In FA (1) 1st floor Basement & F Roof Name of Registered Wa Newark Cart City, State	ion of ng Material (ACM) BATED cility 3) Pirst Floor	Is I No Used Mai Custo	cocation and the cocati	on on y y y y by nce/ staff? N/A	VAT & N ceramic roof f:	Containing systems in VAT, ther miscel Mastic tile Lashin Cubic Yard of Waste Disposal D	□ Mini- □ Glove 図 Non-I on of Material (A issulation, sur or Illaneous) e & mas ag	Enclosure bag Proce Exempted CM) facing. Tic	Amount (Specify SF or LF) 750 SF 2,040 SF 180 SF Registered Landfillerva Landfilte	Removal X X X	Abate Ty	pe	
D ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Locat Asbestos-Containin TO BE A In Fa (1) 1st floor Basement & F Roof Name of Registered Wa Newark Cart City, State Newark, NJ	ion of ng Material (ACM) BATED cility 3) Pirst Floor	Is I No Used Mai Custo Yes X	cocation and the cocati	on on y y y y by nce/ staff? N/A	VAT & N ceramic roof f:	Containing systems in VAT, ther miscel Mastic tile Lashin Cubic Yard of Waste 5	on of Material (A isulation, sur or Illaneous)	Enclosure bag Proce Exempted CM) facing. Tic	Amount (Specify SF or LF) 750 SF 2,040 SF 180 SF Registered Landfill	Removal X X X	Abate Ty	pe	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Locat Asbestos-Containing TO BE A In FA (1) 1st floor Basement & F Roof Name of Registered Wa Newark Cart City, State	ion of ig Material (ACM) BATED cility 3) Pirst Floor uste Hauler	Is I No Used Mai Custo Yes X	molitic	on on y y y y by nce/ staff? N/A	VAT & N ceramic roof f:	Containing systems in VAT, ther miscel Mastic tile Lashin Cubic Yard of Waste 5 Disposal D 3-31-1	on of Material (A isulation, sur or Illaneous)	Enclosure bag Proce Exempted CM) facing. Tic	Amount (Specify SF or LF) 750 SF 2,040 SF 180 SF Registered Landfillerva Landfilte	Removal X X X X Sill	Abate Ty Repair	pe Encapsulate	

NOCK Check#2736		NO			State of I ON OF As	SBEST	OS ABA	TEMENT	DE G	E		// [TIJ J
Date of Notification (1) 03 /	17	17			ne of Buildi		Operator ((2)	THE MAR	22	20	17	
Agencies Notified ☐ EPA ☑ DOLWD ☑ DHSS	Type Notification Initial Amended Amendment			Stre	eet Address				ASBESTO LIC	OS CO DENS	ONT ING	ROL	. &
DCA (NJAC 5:23-8)	Emergency justification) Cancellation	(includir	ng	Nan	Orange, 1	ct	1		Telephone Nu	mber			550
					ACILITY I		ATION					-	
Name of Facility Where A	Abatement is Tak	ing Plac	e (3)			··· Ortini	111011	Type of Facili	tv (4)				
Private house Street Address								School (K-	12) r 8 (Other than K-1 private and comm	2) ercial b	uildir	gs,	
City (5)								Square Feet	# of Floors	E	Bldg. /	Age	
East Orange, NJ 07017				-									
County (6)				Cou	unty Code (7)	(STATE U	SE ONLY)	Current Use (Prior if being demol	ished)			
Name of Monitoring Firm	Hired by Building	Owner	(8)	ASCN	A Ma	1			August 1				
	and by bonding	Owner	(0)	ASCI	NO.	23		ent Contractor (9)				
Street Address						Gr Tec	h LLC Address						
								202					
City, State, Zip Code			-				Iley Rd # ate, Zip Co						
3						1	NJ 0747						
Project Manager for Monit	oring Firm		Tel	ephone	e No.	Telepho	ne No.	0	License No.				
Start Date (10)		eduled (ate (11)		f OSHA M		01127				
Occupancy Status During						Street A		nsultants,Inc					
□ Facility Closed/Vacated □ Abatement Performed	d During Entire P	eriod of	Abate	ement		20-21 V	Vagaraw	Road, Bldg .#	35E				
Time of Abatement:		ai Facilii PM/	y Hou PM_	rs - De -	Scribe AM	City, Sta	ate, Zip Co	ode					
Scope of Work (Check all	that apply)					Fair Lav	wn, NJ 07						
>3 sf or >3 If > 160 sf or >260 If	mat apply)	□ De	enovati	on		×	Full Conta Mini-Encl Glovebag	ainment with Ne osure Procedure	ination with negative egative Pressure Tent with Negative on-Friable Procedu	e Press			
Location of	of		s Locat Norma			_				Ab	atem	ent T	ype
Asbestos-Containing M <u>TO BE ABAT</u> IN Facility (13)	aterial (ACM) ED	Use Ma Cus	ed Sole intena todial (12)	ely by ince/ Staff?	(i.e	stos Conta ., thermal surfac	scription of aining Mate systems in sing, VAT, niscellaneo	erial (ACM) nsulation, or	Amount (Specify SIF or LF)	Removal	Repair	Encapsulate	Enclosure
Danner		Yes	No	N/A								C)	
Basement				X	Pipe inst	ılation			60 LF				
										П	П	П	П
													1
		In	П	П									
Name of Registered Waste	Hauler	1	NJE	100000	e Hauler ID No.	Cubic Yarr	ds of Maeto	Name of Regi	atornal Landin		Ш		Ц
Gr Tech LLC				03378				i i					
City, State			0	1033/6	33	TBD Disposal		T.R.R.F. Inc					
Wayne, NJ 07470								City, State					
Completed By (Print or Typ	e) Titl	е				TBD	iatu4	Tullytown, P					
	FP 100 000	200				1 0101	COLLEGE.		I Da	to.			

Owner

Date

03/17/17

Signature Hewic Wenad

N.Jevtic

			(1	Pursua	nt to NJA	AC 8:60 and 5:10	6)					1000
Date of Notification (1) 03 /	17 /	17		400000	e of Buildin	ng Owner/Operator (2)	54 12	2			
Agencies Notified	Type Notifica	ation		Stree	t Address			A house recent reserves			-	
⊠ EPA				20	1 Highwa	v 34					HOL	. &
□ DOLWD	☐ Amended			7	State, Zip			LII.	ZEINO	11:113		
□ DOH	Amendm	S. C.	-			NJ 07722						
☐ DCA (NJAC 5:23-8)	☐ Emergen justification		ng	-	e of Contac			Telephone Num	her			
(140/10/3.20-0)	☐ Cancellat			100.000.000	nish Har	70T-1		Telephone real	ibei			
						NFORMATION	<u> </u>					
Name of Facility Where A	batement is T	Taking Plac	e (3)	17	CILITTI	VIORWATION	ASBESTOS CONTROL & LICENSING					
Naval Weapons Sta												
Street Address							☐ Subchapter	8 (Other than K-12				
201 Highway 34									rcial bu	uilding	js,	
City (5)								<u> </u>	R	da A	ne .	
Colts Neck								The State of the S			ge	
County (6)				Соц	ntv Code (7)(STATE USE ONLY)					-10-	-11-05
Monmouth					,,	· Norme due die in		nor in boiling donnois	onea)			
Name of Monitoring Firm	Hired by Build	dina Owner	(8)	ASCN	l No.	Name of Abateme)				
Environmental Tact		3	(-)									
Street Address				1		Street Address					111501	
64 Broad Street							, Unit 61					
City, State, Zip Code						City, State, Zip Co	<u> </u>					
Matawan, NJ 07747						Toms River, I	New Jersey 08	3755				
Project Manager for Monit	toring Firm		Te	elephone	No.	Telephone No.		License No.				
Tom Geiger				732-29	0-2217	732-349-9932		00624				
Start Date (10)	S	Scheduled (Comp	letion Da	ate (11)	Name of OSHA M	lonitor		11			
04 /03 /	17	04		21_ /	17	E.M.S.L. Anal	lytical					
Occupancy Status During	Abatement (0	Check only	one)			Street Address						
□ Facility Closed/Vacate						1056 Stelton						
Abatement Performed			200			City, State, Zip Co	ode				i sancar	====
Time of Abatement:	AM	PM/	—P	VI	_AM	Piscataway, N	New Jersey 08	854				
Scope of Work (Check all	that apply)							120				
≥3 sf or ≥3 lf		⊠R	enov	ation				gative Pressure				
≥160 sf or ≥260 lf			emol	ition		Gloveba Gloveba	g Procedure	=				
			-1	ation.	1		mpted (*) and No	n-Friable Procedu				
Location	nf.		Nom	ation nally		Description	£		Ab	1	ent T	-
Asbestos-Containing N		L 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ed S	olely by	Asbe	stos Containing Ma	terial (ACM)	Amount	Rer	Rep	Enc	Enc
TO BE ABA		1000		nance/	(i.e				nov	air	aps	losu
IN Facility (13)	у		(1)			other miscellane		SF or LF)	<u> </u>		ulat	Jre.
		Yes	N	o N/A			,				O	
1 st floor hallway					asbesto	os pipe insulatio	n	210 If				
attic					pipe pe	enetration		5 sf	×	П	П	П
exterior-main entranc	e				roof			400 sf				
					1001			400 31				
Name of Registered Wast	e Hauler			NJDEP	Maste	Cubic Yards of	Name of Boat	stered Landfill			Ш	Ш
Guardian Contractin				Hauler I	D No.	Waste	The second second second second second	Stored Landilli				
City, State				2022	3	10 Disposal Date	100-00-00-00-00-00-00-00-00-00-00-00-00-					
Toms River, New Je	rsev					4/24/17		Penneylyania				
Completed By (Print or Ty		Title	V-1-1				Lunytown		ote !	1		
Nicholas Fernicola	pe)	Projec	+ Ma	nager		Signature	_/		ate	_ /		

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SK.	4	WAR	55	2017	

		Name of	Building Owner 101	perator (2)		1					-
Date of Notification (1)		Mane	HARRY			ASE	BESTOS			OL	8
Agencies Notified Type Notification		Street Ad			L.		LIUE	NOI	VG.		
DEP Initial DEP Amended Amendment # DEP Emergency (in	cluding	Name of	Contact		. NJ. 0	74(C) one Number	г			
DOH Justification) DCA Cancellation			COLBRAN								-
Name of Facility Where Abatement is Taking Pla	ace:(3)	FACII	JEY INFORMAT	TON	Type of Facility (4))					
MK. COLBRA			# of		School (K-12 Subchapter 8 Other (i.e. pri	(Other that	n K-12)	ildings	hom	es. etc	c.)
J2000 / Max. 000						# of Flo			g. Ag		_
City (5) RIDGE WOOD	>				Square Feet Z 800	2	-		19		
County (6) RENCEEN		County C	loce (7): ISE ONLY)		Current'Use (Prior	if being de ≡S≀05	molished) NGE				
Name of Monitoring Firm Hired by Building Ov	vner (8)	ASCN	1 No.	Name	of Abatement Contra						
Marine of Informorning Little and Departing O.	,-,				st Removal In	nc					-
Street Address					Address						
				45	0 South River tate, Zip Code	r Street					-
City, State, Zip Code					kensack, NJ	07601					
Project Manager for Monitoring Firm		Telepho	ne No.	Teleph	one No. 201-329-7444	L	icense No. 003	88			
Start Date (10)	Scheduled Co	moletion D	ate (11)		of OSHA Monitor						
3/28/17		3/25	3/17		nega Environ	mental					
Occupancy Status During Atasement (Check Or	nly One)				Address 30 Huyler Str	set					
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Nicole Intriago				82-6500				-6500		01290				
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City (5) West Orange, New Jersey 07052							uare Feet ,000	# of Floors		Bldg. 55+	Age	
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Name of Monitoring Firm Hired by Building AHERA Consulting	Owner (8	3)	ASC	M No.			batement Co orporation	entractor (9)				
Street Address PO Box 385					U STATE	t Add McE	ress Bride Aven	ue				
City, State, Zip Code Oceanville, New Jesey 08231-03	35						Zip Code nd Park, N	ew Jersey 074	124			
Project Manager for Monitoring Firm John Smoyer				one No. 52-1833		hone -225-	No. -8400	License 01104				
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Dirt Crawl	X				SI (Wrap &			10 LF		Х		
Boiler Storage Room	X				DoorInsul(V			3 LF		X		
Classrooms/Hallways/Office	-	X			&Holes(Cau	See The See See	,	1200 LF		X		
Principal's Office ame of Registered Waste Hauler		X	IDED !		oveDropC	eiling	2.50	50SF	X			
ich Corporation		Н	JDEP W auler ID 7824		Cubic Yards of Waste			Registered Landfi S Landfill	II			
ity, State ′oodland Park, New Jersey				Disposal Date 2/30/2016		City, State	e île, Pennsylva	nia				
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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) Thomas Thrower 17 17 ASBESTOS CONTROL & Street Address Type Notification Agencies Notified **LICENSING ⊠** EPA City, State, Zip Code ☐ Amended ☑ DOLWD Pemberton, NJ 08068 Amendment #_ Telephone Number **⊠** DOH ☐ Emergency (including Name of Contact Bill White - COIT Cleaning & Restoration ☐ DCA iustification) (NJAC 5:23-8) ☐ Cancellation FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Subchapter 8 (Other than K-12) Other (i.e., private and commercial buildings, Thrower Residence homes, etc.) Street Address # of Floors Bldg. Age Square Feet 80 3 2,000 City (5) Current Use (Prior if being demolished) County Code (7)(STATE USE ONLY) Pemberton Residence County (6) Name of Abatement Contractor (9) Burlington Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Shade Environmental, LLC Mgmt. & Environmental Consulting Services Street Address 623 Cutler Avenue Street Address City, State, Zip Code PO Box 341 Maple Shade, NJ 08052 City, State, Zip Code License No. Chesterfield, NJ 08515 Telephone No. Telephone No. Project Manager for Monitoring Firm 00842 856-755-0099 609-298-4070 Name of OSHA Monitor Bill Weisgarber Scheduled Completion Date (11) EMSL Analytical, Inc. Start Date (10) 04 / 07 / 17 04 / 03 / 17 Street Address Occupancy Status During Abatement (Check only one) 200 Route 130 North ☐ Facility Closed/Vacated During Entire Period of Abatement City, State, Zip Code ☐ Abatement Performed Outside of Normal Facility Hours - Describe Cinnaminson, NJ 08077 Time of Abatement: ____AM-___PM/__ □ Full Containment with Negative Pressure Scope of Work (Check all that apply) ☐ Mini-Enclosure □ Renovation Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure $\boxtimes \ge 3$ sf or ≥ 3 If □ Demolition ≥ 160 sf or ≥260 lf Abatement Type Encapsulate Is Location Removal Description of Amount Normally Asbestos Containing Material (ACM) Location of Used Solely by (Specify (i.e., thermal systems insulation, Asbestos-Containing Material (ACM) Maintenance/ SF or LF) surfacing, VAT, or Custodial Staff? TO BE ABATED other miscellaneous) IN Facility (12)(13)N/A No X Yes 740 SF Floor Tile \boxtimes 1.100 SF Lower Level Drywall Compound X Lower Level Name of Registered Landfill Cubic Yards of Cumberland County Landfill N.IDEP Waste Name of Registered Waste Hauler Waste Hauler ID No. 5 15939

Freehold Cartage City, State Freehold, NJ

Disposal Date

City, State Newburg, PA

4/7/2017 Signature

Date

Completed By (Print or Type)

Christina Lynch

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reet Address	J		*		12	Other (etc.)	i.e. private &	commercial	building	js, ho	mes,			
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ounty (6)	110	Co	unty Coo	de (7) E ONLY)			idenc		/					
(amolen	or (9)		ASCM N	ż	Name	of Abatemen	t Contractor	(9)						
ame of Monitoring Firm Hired by Building Own Quality Environmental Concepts, Inc.	er (o)		NA		Quality Environmental Concepts, Inc.									
Street Address						Street Address 1053 North Tuckahoe Road								
053 North Tuckahoe Road	City State 7in Code													
City, State, Zip Code Williamstown, New Jersey 08094						Williamstown, New Jersey 08094 License No.								
Project Manager for Monitoring Firm	Te	elephone 56-629	No. 1-1166	Telephone No. License No. 01086										
Edward J. Knorr	heduled		letion Da		Nan	ne of OSHA Mo	onitor	oncents I	nc					
07-27-2017	-28	3-20	317	Quality Environmental Concepts, Inc. Street Address										
Occupancy Status During Abatement (Check C	nly One)			10:	et Address 53 North Tu	ickahoe R	oad						
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	and the state of t			vario	US	locatio	NS	istered Land	lfill		, ,	1_		
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Quality Environmental Concepts			9710		3	1_	City, State	iste (orn	Pie	. L	_		
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Williamstown, New Jersey	Title				Sign	nature	NV	11101	Date 03-	16.	20	1		
Completed by Edward J. Knorr	Vice	Pres	sident		100	Swan	7 Jun	200	00	12		-		

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

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Date of Notification (1) 3/15/2017			Resid	of Building lence		14 4	WAL		LU		-					
Agencies Notified Type Notification I linitial Amended DOL Amendment	City, St	Street Address ASBESTOS C LICENS City, State, Zip Code Summit, NJ 07901														
■ Emergency justification) ■ DCA Cancellation		3	Name o	of Contact nica Verl			Telephone Number									
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Residence	g Place (3)						pe of Facilit	5 866							
Street Address							×	Subchap	ter 8 (Oth	er than K- & commer		ldings	, hom	es,		
City (5) Summit, NJ 07901							Square Feet # of Floors 1700 2				Bldg. Age 87					
County (6) Union			Code (7) USE ONLY	n	_	Current Use (Prior if being demolished)										
Name of Monitoring Firm Hired by Building A. Seine Lighthouse Solutions	The state of the s					Name of Abatement Contractor (9) Brinks Tank Services										
Street Address PO Box 354		Street Address 1256 Liberty Avenu						Je								
City, State, Zip Code South Orange, NJ 07079								City, State, Zip Code Hillside, NJ 07205								
Project Manager for Monitoring Firm Sarah Calandra	- 336 200 0 ° 18 10 0	Telephone No. Telephone No. 844-462-7465						License No. 01316								
Start Date (10) 3/17/2017	Date (11)		Name of OSHA Monitor A. Seine Lighthouse Solutions													
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≥3 sf or ≥3 lf Renovation ≥160 sf or ≥260 lf Demolition								Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure								
Location of	Locat Norma	lly		Des	scription of taining Material (ACM) systems insulation, cing, VAT, or miscellaneous)			d () and Non-rhad		able Pro	Abatement Type					
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	intena todial (12)	ince/		thermal s				(5	Amount (Specify SF or LF)		Repair	Encapsulate	Enclosure			
	Yes	No	N/A									,	ate	Ге		
Basement	X	Pi				Pipe			20lf	X						
Name of Registered Waste Hauler Newark Carting		F	JDEP W lauler ID 4509		Cubic Y of Wast				1007000	red Landf						
City, State East Orange			Disposal Date City, State 3/31/2017 Penn Argyle, PA													
Completed by Alison Lamers	Signature															

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NOCK			NOT	Pureus	on of a on to NJ	New Jen 8BESTO AC 8:90 a	TARATI	emer 10)	 -	DOL	顺	DAY	AR 1	22	20			
Date of Notification (1) 3/15/2017	of Build	ng Owne	n'Operato	r (2)		MAT	11 L		7	L L	120							
Agencies Notified			-	-	- McA	134	BES	STOS	SCC	NTI								
EPA EPA E DOL	Code						_	LICE	NSI	NG								
	Amendma Emergenc	nt #_	lna .	Sum	mit, NJ	07901			VV.	Alven	APFi	(UV						
☐ DCA	Justification Cannellation	n)		Name	of Conta	et erklin			.,	, T	laska- a		-					
Nems of Facility Where A	batement is Tak	ino Pisor	(3)		CILITY		NON					-						
Residence Street Address				Pa40					e of Fee	5.50								
						· · · · · · · · · · · · · · · · · · ·		N N	Subchal Other (I.	NOT B 1810	a comme	·12)	alld he	≥ An	TT B-II			
Cily (5) Summit, NJ 07901								SQL	enc.)		I Floors			Age	111446,			
County (6) Union			_	Count	Code (7	1		1700 2 87 Currant Use (Prior if being demolished)										
Name of Monitoring Firm	fred by Mulidina	Outer (2)	STATE	USE ON	(Y)	_					snea)						
A. Seine Lighthouse	Solutions	· ·	a)	ASQ	M No.		Name Brink	of Absterned Contractor (9) ks Tenk Services										
PO Box 354								Simul Address 1256 Liberty Avenue										
City. State, Zip Code South Orange, NJ 07	078			_			CILY, S	iele.	Zio Code				-					
Project Managar for Monitoring Firm								Hiliside, NJ 07205 Telaphone No. License No.										
Start Date (10)							844-462-7485 01316											
Start Date (10) 3/17/2017 Schaduled Completion Date (11) 3/24/2017 Occupancy Status During Absternant (Check Only One)								Name of OSHA Monitor A. Seine Lighthouse Solutions										
Facility Closed/Vacate	d Dutten Entire						Street /	Addie	55									
Facility Closed/Vecsled During Entire Period of Absternent Absternent Performed Outside of Normal Facility Hours Other - Describe:							PO Box 354 Člay, State, Zip Code											
sope of Work (Check All T	hel Apply)						South	Ora	inge, N	J 07079								
130 sfor 230 if			Renova				×	Gl	ni-Enciosi Svebao Pi	me rocedure	Negaliwa							
		1	Locati	làn				No	n-Example	ted (°) and	Non-Frigi	de Pro		re Sman				
Location of Asbestos-Containing Ma	lahai (ACM)	Lle	Nomal ed Sole	h by	Description								Тура					
In Facility (13)	D	Cui	Inlena: Indial 8 (12)	Raff?	(î.e	. thermal Surfac	systems ing, VAT	insula or	(ACM)	(B)	nount peolfy Or LF)	Remova	Repair	Encepsulate	Enclosure			
Besement		Yes	No	N/A			Din					_		ate	ri i			
		+	^	-			Pipe			1:	20If	X						
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ems of Registered Waste H	auler		1 1:	Dest									H	\vdash				
wark Carting	v		H	DEPW Juler ID 509		Cubic Y					d Landill							
y, Stab st Orange				208		Disposa	il Data	-	City, Sta		ment L	engril	1	Name and Address of the Owner, where the Owner, which is the Ow				
mpleted by		Title				3/31/2	017			rgyle, F	A							
Ison Larners Office Manager							nalura	7			200	la 15/20	49					
8-41 (R-08-08)			-				5	-			Q/	14144	1/					