'h 3818		Ν	IOTIF		ATION		BE	Jersey STOS ABA <sup>1</sup> 3:60 and 5:1		DE C	) E			
Date of Notification (1)					Name	of Buildin	ng Ov	wner/Operator	2)					
3/	21 /	17			Cit	y of Plea	san	tville		MA MA	AR 2	7 20	17	:
Agencies Notified	Type Notific	cation			Street	Address				ted tool				Ì
⊠ EPA						N. First S	Stre	et		ASBES	TOSC	CINO	BOL	_ <u>L</u>
□ DOLWD	☐ Amende	d			5.50	State, Zip		17.17		ASDES	LICEN	SING	IIOL	
□ DOH	Amendm		_		1.500			IJ 08232						
DCA	☐ Emerger		uding			of Contac		.0 00202		Telephone N	lumber			
(NJAC 5:23-8)	justificati							y - Garden S	ate GC	relephone iv	dilibei			
	carroona				D110-000								-	
Name of Facility Where	Abatamant is	Takina	Dlaga /	21	FA	CILITY	NFU	RMATION	Type of Fac	ilib. (4)				
Vacant Residence	Abatement is	raking r	lace (	3)					School (F					
										ter 8 (Other than K	(-12)			
Street Address									Other (i.e	e., private and com		ouildir	gs,	
28 West Adams Av	enue								homes, e			21.1		
City (5)									Square Feet		1	Bldg. /	\ge	
Pleasantville					1 2				3,000	2		80		
County (6)					Cour	ity Code (	7)(ST	ATE USE ONLY)		(Prior if being dem	nolished)			
Atlantic										Residence				
Name of Monitoring Firm	Hired by Buil	ding Ow	mer (8)	)	ASCM	No.		ame of Abatem						
N/A								Shade Envir	onmental, L	LC				
Street Address							St	reet Address						
							(	623 Cutler A	venue					
City, State, Zip Code							Ci	ty, State, Zip C	ode					
							1	Maple Shade	, NJ 08052					
Project Manager for Mon	itoring Firm			Tele	phone	No.	Te	lephone No.		License No				
							1	856-755-0099	1	00842				
Start Date (10) 04 / 03 /		Schedul 04			tion Da			ame of OSHA N EMSL Analyt						
Occupancy Status During	Abatement (	Check o	nly on	e)				reet Address						
□ Facility Closed/Vacate					ment		1	200 Route 13	0 North					
☐ Abatement Performed						cribe		ty, State, Zip C						-
Time of Abatement: _	AM	PM/		PM-		AM	14	Cinnaminsor						
Scope of Work (Check al	I that apply)								,					
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>	r diat apply)	-	Rend Dem					☐ Mini-End	losure g Procedure	Negative Pressure				
				ocat							A	baten	nent T	уре
Location			No Used	rma			ŭ.	Description			Z	R	Щ	四
Asbestos-Containing TO BE ABA		л)	Main					Containing Ma ermal systems		Amount (Specify	Kemoval	Repair	Encapsulate	Enclosure
IN Facili	A STATE OF THE PARTY OF THE PAR	1.3	Custo		Staff?	(1.0		surfacing, VAT		SF or LF)	\ \lambda	.   -	Insc	sure
(13)		-	V20 1	(12)	12/02/2	-	0	ther miscellane	ous)				ate	LD
			Yes	No	N/A									
Exterior		[		$\boxtimes$		Siding				2,368 SF				
		[												
			7								Г		$t_{\Box}$	
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		L		Ξ.			16		TN: ==	111111111111111111111111111111111111111		١Ц		Ш
Name of Registered Was Garden State Dredg		cavatir	ng	155	JDEP V auler ID 34498	No.	Wa	bic Yards of aste 20	The second control of	egistered Landfill County Utilitie	s Autho	ority		
City, State							-	sposal Date	City, State	(V-				
Clermont, NJ							4	1/7/2017	Egg Ha	rbor Township,	NJ			
Completed By (Print or Ty	/pe)	Title						Signature			Date			
Christina Lynch	en M	Vic	e Pres	side	nt of C	Operatio	ns	Mont	A la		3/2	11-	7	

CH 3817		NOT		ATION	OF AS	ew Jersey BESTOS ABAT AC 8:60 and 5:1						
Date of Notification (1)	21 /	17				g Owner/Operator ( santville	2)	MAR 2	7 20	17		7
Agencies Notified  EPA	Type Notificatio	on			Address N. First S	Street		ASBESTOS (		ROL	. &	
☑ DOLWD ☑ DOH ☐ DCA	Amended Amendmen			Ple		e, NJ 08232	#					
(NJAC 5:23-8)	justification  Cancellation			(Sa. 5)	of Contact Heming	t way - Garden St	tate GC	Telephone Num	iber			
				FAG	CILITY IN	FORMATION	3					
Name of Facility Where	Abatement is Tal	king Place	e (3)				Type of Facility	(4)				
Vacant Residence		Ü					School (K-12	2)				
Street Address								8 (Other than K-12 rivate and comme		ildina	70	
811 Church Street	t						homes, etc.		i Giai Di	munig	<i>j</i> 5,	
City (5)							Square Feet	# of Floors	BI	dg. A	ge	
Pleasantville							2,000	2		80		
County (6)				Cour	nty Code (7	)(STATE USE ONLY)		ior if being demoli	shed)			
Atlantic							Vacant Res					
Name of Monitoring Fire	m Hired by Buildin	g Owner	(8)	ASCM	No.	Name of Abatem						
N/A							onmental, LLC					
Street Address						Street Address						
						623 Cutler A						
City, State, Zip Code						City, State, Zip C Maple Shade						
Project Manager for Mo	nitoring Firm		Tel	ephone	No.	Telephone No. 856-755-0099	79.	License No.				
Start Date (10)	Sch	neduled C	Comple	etion Da	te (11)	Name of OSHA N	Monitor				-	
04 /03	N 2000	04/				EMSL Analyt	ical, Inc.					
Occupancy Status Durin		-				Street Address				50-000		
☐ Facility Closed/Vaca						200 Route 13						
☐ Abatement Performe Time of Abatement:						City, State, Zip C						
Scope of Work (Check a						Cinnaminsor	1, NJ U8U77					
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>	ап тист арруу		enovat emoliti			☐ Mini-End ☐ Gloveba	g Procedure	gative Pressure n-Friable Procedu	ıre			
		100	Loca						Ab	atem	ent T	уре
Locatio Asbestos-Containing TO BE AE IN Fac (13)	g Material (ACM) ATED ility	Use Ma Cus	todial (12)	ely by ance/ Staff?		Description of estos Containing Ma e., thermal systems surfacing, VAT other miscellane	aterial (ACM) insulation, , or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A	C: -!:			300 SF		$\vdash$		
Exterior					Siding		Western	300 SF				_
			Ш		-				$\perp$ $\sqcup$	Ш	Ш	Ш
							V.					
Name of Registered Wa		vating	1.0	NJDEP N Hauler II 34498	O No.	Cubic Yards of Waste 1	Name of Regis	stered Landfill ounty Utilities A	Author	rity		
City, State Clermont, NJ						Disposal Date 4/7/2017	City, State Egg Harbo	or Township, N	j			

Clermont, NJ

Christina Lynch

Completed By (Print or Type)

Title

Vice President of Operations

Signature

Date

3/21/17

'h 3819		NOTIF	FICA (Pu	TIOI	O V	e of New F ASBE to NJAC	Jersey STOS ABATI 8:60 and 5:16	EM	ENT	DEG	) E		$\mathbb{V}$		
Date of Notification (1)	21 / 1	17				Building C	)wner/Operator (2 ntville	2)		LL MA	R 2	7	201	7	1
Agencies Notified	Type Notificatio			Stree	et Ad	ddress				ASBEST				ROL	&
⊠ EPA	☐ Initial			0.000		First Stre				L	ICE	VSI	NG		-
□ DOLWD	Amended Amendment	. 4		22		te, Zip Coo									
⊠ DOH	Emergency			32. 3			NJ 08232				100000				
DCA (NJAC 5:23-8)	justification)	)				Contact lemingwa	ay - Garden St	ate		Telephone Num	ber				
						5000	ORMATION								
	At the second to Tale	ina Placa	/2\	- ' '	TOIL	LI 1 1141	07(11), (1.10.1	Tvi	pe of Facility (4	)					
Name of Facility Where	Abatement is Tak	ang Flace	(5)					П	School (K-12)						
Vacant Residence								П	Subchapter 8 (	Other than K-12	2)				
Street Address										vate and comme	ercial	Dullo	iings.		
219 E. Greenfield A	Avenue								homes, etc.)	# of Floors		Rida	. Age	2	-
City (5)									uare Feet						
Pleasantville									2,000	2		80	,		
County (6)				Co	unty	Code (7)(5	STATE USE ONLY)	Cu	rrent Use (Prio	r if being demol	ished	)			
								1	Vacant Resid	lence					
Atlantic	tri II. Bullio	- Oumar /	0)	ASCI	A No	0	Name of Abateme	ent (	Contractor (9)						
Name of Monitoring Firm	n Hirea by Bullain	ig Owner (	0)	ASO	VIIV	0.	Shade Enviro								
N/A								OIIII	nontai, EEO						
Street Address							Street Address								
							623 Cutler A	ven	ue						_
City, State, Zip Code							City, State, Zip C Maple Shade								
			Tol	ephor	o N	0	Telephone No.			License No.					
Project Manager for Mo	nitoring Firm		1 61	epiloi	CIV	0.	856-755-0099	9		00842					
						(44)	Name of OSHA		itor						
Start Date (10) 04 / 03		heduled C					EMSL Analy								
Occupancy Status Durin	ng Abatement (Ch	neck only	one)				Street Address								
☐ Facility Closed/Vaca	ted During Entire	Period of	Abat	ement			200 Route 13	30 N	North						
☐ Abatement Performe	ed Outside of Nor	mal Facilit	у Но	urs - D	esci	ribe	City, State, Zip C	Code	1						
Time of Abatement:	AM	_PM/	PN	Λ	A	M	Cinnaminso								
Scope of Work (Check	all that apply)	Пк	enova	ation			☐ Mini-En	clos	nment with Neg ure	ative Pressure					
≥ 160 sf or ≥260 lf		⊠ D∈	emoli	tion			Gloveba	ag P	rocedure	n-Friable Proced	dure				
							⊠ Non-Ex	emp	oted ( ) and No	1-1 Hable 1 10000	1010	۸ha	ateme	nt Tu	me
		1		ation							-		_		
Locatio		Lie	Norm	nally olely b	v	A - L	Description stos Containing M		ial (ACM)	Amount		Removal	Repair	Encapsulate	Enclosure
Asbestos-Containin	g Material (ACM)	N 87000		nance	7.1	Asbes	, thermal systems	s ins	sulation,	(Specify		vou	air	aps	los
TO BE A		Cus	stodia	al Staff	?	(1.0.	surfacing, VA	T, o	r	SF or LF)		a		sula	ure
(13			(1:	2)			other miscellan	neou	s)					te	
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Exterior			$\boxtimes$			Siding				300 SF	-				
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							NAME OF THE PARTY						Ш	Ш	$\sqcup$
Name of Registered W	aste Hauler			NJDE	EP V	Vaste	Cubic Yards of		Name of Regis						
Garden State Dre		avating				No.	Waste		Atlantic Co	ounty Utilities	s Aut	thor	ity		
Garden State Dre	uging and Exc	avating		34	498	3	1 Disposal Date		City, State						
City, State										or Township,	N.I				
Clermont, NJ							4/7/2017		Еду пагос	, Township,					
Completed By (Print or	Type)	Title					Signature	_			Date		772		
Christina Lynch	<del></del>	Vice F	resi	dent	of C	Operation	ns ( )/n S	A	00 1	5	3/	2	17	-	

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Date of Notification (1) 3/22/17					of Building Nicolesco		Operator	(2)			MAF	2 7	2	017	- I
Agencies Notified	Type Notification			Street A	Address					i					1
EPA	× Initial									Ā	SBEST	08.0	ON	TROI	-1
DEP	Amended		1	City, Sta	ate, Zip Co	ode			-			CENS			\^
X DOL	Amendmen			Ruthe	erford N.	J 0707	0		-					-	
X DOH	Emergency justification		1	Name o	of Contact					Te	lephone N	lumbe			
DCA	Cancellation			Ted						2.0					
				FAC	ILITY INF	ORMAT	ION			-	_				
Name of Facility Where	Abatement is Takir	ng Place (	3)					Тур	e of Facility	(4)					
house								П	School (K-	-12)					
Street Address					hillor and can been			×	Subchapte Other (i.e.	er 8 (Oth			uilding	gs, hon	nes,
City (5)								C	etc.) ıare Feet	14.	f Floors		Dida	A ===	
City (5) Rutherford								21		2	1 10015		67	. Age	
s=				Country	Code (7)				<u> </u>		for descri	l'ala all	01		
County (6) Bergen					Code (7) USE ONLY	)		Cur	rent Use (Pr	rior if be	ing aemoi	iisnea)			
Name of Monitoring Firm	Hirad by Building	Owner /8	,	TASCA	M No.		Nomo	of Al	patement Co	ntrooto	- (0)				
rvame of workoning i in	i i irea by ballaling	Owner (o	)	ASCI	VI INO.				vironment			C			
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Oit 01-1- 7:- 0-1-									483, 4 E (	Jale L	nive				
City, State, Zip Code									Zip Code	440					
5 :									d, NJ 07	418					
Project Manager for Mon	itoring Firm			Telepho	ne No.		Telepi				License	No.			
0									-2276		703				
Start Date (10) 4/12/17				mpletion	Date (11)		Name	of OS	SHA Monitor	r					
		5/3/17											2		
Occupancy Status During	g Abatement (Che	ck Only O	ne)				Street	Addr	ess						
× Facility Closed/Vaca							011 0		7: 0 !						
Abatement Perform Other – Describe:	ed Outside of Norr	nai Facilit	y Hour	S			City, S	state,	Zip Code						
Scope of Work (Check A	II That Apply)														
	" That Apply)	IVI.	<b></b>	0020000			Г	٦ _							
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		and the same of th	Renova Demoli				F		ull Containn Iini-Enclosu		n Negative	e Press	ure		
=100 51 61 =200 11			Demon	tion			×		lovebag Pro						
					Г				on-Exempte		d Non-Fri	able Pi	oced	ure	
		816	s Locat	(1) (a) (a) (a)										atemer	nt
Location	of	3055	Norma			De	scription	of						Туре	
Asbestos-Containing			ed Sole aintena						al (ACM)	0.39	mount			m	m
TO BE ABA			todial	Staff?	(i.e.	thermal	system cing, VA				Specify or LF)	l den	T G	, Ica	ncl
(13)	7		(12)				niscellar			0.	OI LI )	Remova	Kepair	Encapsulate	Enclosure
		Yes	No	N/A								<u>a</u>	1	ate	Ге
baseme	ent			X		pipe	insula	tion		5	0 LF	×	+	+	+
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·															
Name of Registered Was	te Hauler		0.0	JDEP W		Cubic			Name of	Registe	ered Land	fill			1000
Freehold Cartage			111 (2)	lauler ID 5939	No.	of Was	ste		Weste	rn Ber	ks Land	fill			
City, State				J333			and Dest		10 00 000						
Freehold, NJ						TBD	sal Date		City, Sta Birdsb		Les				
		Tist.	5601515			1.0000000			Dirusb	UIU PA				-1.04	
Completed by A. Scott Higgins		Title	ident			S	ignature		1 /			Date 3/22/-	17		

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Date of Notification (1) 3/22/17				Building ( Pernovsk	Owner/Opera Ky	tor (2)		Control of the contro	MAR	2	7 2	017	PLY-14 - 140-27
Agencies Notified Type Notifi	cation		Street A	ddress									
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DEP Amen	ded		City, Sta	te, Zip Co	de				LIC	EN	SIN	3	
DOL Amen	dment #	_	Nutley	, NJ 07	110								
	gency (including		Name of	Contact				Telephone	Numh	ner			
	cation) ellation		Leon					1					
			FACI	LITY INFO	RMATION			-	-				
Name of Facility Where Abatement is	Taking Place (	3)				Тур	e of Facility (4	1)					
house							School (K-12	21					
Street Address						×	Subchapter	8 (Other than rivate & comm	K-12) nercial	build	dinas.	home	es.
							etc.)				٠,		
City (5)						1 22	are Feet	# of Floors			ldg. A	ge	
Nutley						200		2			2		
County (6) Essex				Code (7) JSE ONLY)		Curi	ent Use (Prio	r if being dem	olishe	d)			
Name of Monitoring Firm Hired by Bu	ildina Owner (8)		ASCN	1 No.	Nar	ne of Ah	atement Con	tractor (9)					-
o		ru/						Services, I	LLC				
Street Address			1			et Addr							-
Street Address					3,000		183, 4 E G	ate Drive					
0'1 01-1- 7'- 0-1-								ate brive		-			
City, State, Zip Code					2.000		Zip Code d, NJ 074	10					
Project Manager for Monitoring Firm			Telephor	ne No.		ephone I			se No.				
						3-764-		703					
Start Date (10) 4/1/17	4/30/1		npletion (	Date (11)	Nan	ne of OS	SHA Monitor						
Occupancy Status During Abatement	(Check Only O	ne)			Stre	et Addr	ess					-	
Facility Closed/Vacated During I	120		ont										
Abatement Performed Outside of Other – Describe: basement					City	, State,	Zip Code						
Scope of Work (Check All That Apply	)												
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf	-	Renova Demolit				× M	ini-Enclosure lovebag Proc	edure					
						LI N	on-Exempted	(*) and Non-F	riable				
	4	Locati										ement pe	
Location of	He	Normal ed Sole			Descript				+		1 9	PC	
Asbestos-Containing Material (AC	.10/1.1	intenar			os Containin			Amount	1	71		m	m
TO BE ABATED In Facility	Cus	todial S	Staff?	(i.e.	thermal syste surfacing,		iauori,	(Specify SF or LF)		Remova	Repair	Encapsulate	Enclosure
(13)		(12)			other miscel		)	Settlements - 1995 at the South and		ova	oair	sula	)Sur
	Yes	No	N/A							=		ate	(Đ
basement		х		pipe insu	ulation		30 LF		×				
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Name of Registered Waste Hauler		IN	JDEP W	aste	Cubic Yard	S	Name of F	Registered Lar	ndfill			-	
Freehold Cartage		Н	auler ID 5939	20,400	of Waste TBD			n Berks Lar					
City, State					Disposal Da	ate	City, State	9					
Freehold, NJ					TBD		Birdsbo						
Completed by	Title				Signat	ure	1		Date			-	
A. Scott Higgins	0.000	ident				A-1-1-100V	1/~		100000000000000000000000000000000000000	2/17	7		

Print Form

Park I	Productions.
Print	Form

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Date of Notification (1) 3/22/17					of Building & Mrs. La		Operator	(2)	111	M	AR	2 7	20	17	
Agencies Notified T	ype Notification			Street	Address				1			-		V-10-10	+
EPA DEP DOL	Amended Amendment	#		100000000000000000000000000000000000000	State, Zip C		0			ASBES			ONT		. &
× DOH DCA	Emergency justification) Cancellation		3		of Contact Latsko				Τz	alanhon	× NI	na la na			
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Name of Facility Where Aba	atement is Takin	g Place (	3)					Type of Facilit	y (4)						
Street Address								School (K Subchapt Other (i.e	er 8 (Oth	her than & comn	K-12 nerci	2) al bui	ldings	, hom	ies,
City (5) Plainfield								Square Feet 2200	2	of Floors	3	1	Bldg. 66	Age	
County (6) Union				County (STATE	Code (7)	)		Current Use (F	rior if be	eing dem	nolish	ned)			
Name of Monitoring Firm Hir	red by Building	Owner (8	)	ASC	M No.			of Abatement C Environmen			LLC				-
Street Address							Street	Address Box 483, 4 E							
City, State, Zip Code							City, S	tate, Zip Code wood, NJ 07		71110					-
Project Manager for Monitori	ing Firm			Telepho	one No.		Teleph	one No. 764-2276	710	Licens	se N	o.			
Start Date (10) 4/17/17		Schedul		mpletion	Date (11)			of OSHA Monito	r	103					
Occupancy Status During Ab	natement (Chec	Table State Co.					Ctorest	A 1.1						0.	
Facility Closed/Vacated Abatement Performed C Other – Describe: base	During Entire F Outside of Norm	eriod of	Abater	ment s				Address ate, Zip Code						16 0	
Scope of Work (Check All Th	nat Apply)														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demolii				×	Full Containr Mini-Enclosu Glovebag Pro Non-Exempto	re ocedure					9	
		Is	Locati	ion					1	- 1 - 0 - 1	11001		7	ement	t
Location of		1	Vormal	lly		Des	scription (	of					Ту	ре	
Asbestos-Containing Mat TO BE ABATE! In Facility (13)	erial (ACM) <u>D</u>	Ma Cust	d Sole intena odial S (12)	nce/ Staff?	Asbes (i.e.	tos Cont thermal surfac	aining Ma	aterial (ACM) insulation, , or	(5	mount Specify or LF)		Removal	Repair	Encapsulate	Enclosure
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basement				X		pipe	insulati	on	9	0 LF		х			
Name of Registered Waste Ha	auler		N	JDEP W	/aste	Cubic `	Varde	Nome	Dociet-	roo! -	Jen				
Freehold Cartage			Н	auler ID 5939		of Was		Name of Weste	2						
City, State Freehold, NJ		7				Dispos TBD	al Date	City, Sta		4					
Completed by A. Scott Higgins		Title Presid	dent			Si	gnature	1	~		Date	2/17			
		1								-		- 1			

#### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1 Name of Building Owner/Operator (2) 03/22/17 Agencies Notified Shailesh Mittal Check No. 4610 \$200 Type Notification Street Address ASBESTOS CONTROL & EPA Initial LICENSING DEP City, State, Zip Code Amended DOL Amendment #\_ Hamilton, New Jersey 08610 Emergency (including DOH Name of Contact justification) Telephone Number DCA Cancellation Shailesh Mittal FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Residence School (K-12) Street Address Subchapter 8 (Other than K-12) × Other (i.e. private & commercial buildings, homes, etc.) City (5) Square Feet # of Floors Bldg. Age Hamilton, New Jersey 08610 1200 1 50 County (6) County Code (7) Current Use (Prior if being demolished) Mercer (STATE USE ONLY) Residence Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Lilich Corporation Street Address Street Address 606 McBride Avenue City, State, Zip Code City, State, Zip Code Woodland Park, New Jersey 07424 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 973-225-8400 01104 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 03/24/2017 03/25/2017 Iris Environmental Laboratories, LLC Occupancy Status During Abatement (Check Only One) Street Address Facility Closed/Vacated During Entire Period of Abatement 2333 Route 22 West Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: Union, New Jersey 07083 Scope of Work (Check All That Apply) ≥3 sf or ≥3 If Renovation Full Containment with Negative Pressure ≥160 sf or ≥260 If × Demolition Mini-Enclosure Glovebag Procedure Non-Exempted (\*) and Non-Friable Procedure Is Location Abatement Normally Location of Type Description of Asbestos-Containing Material (ACM) Used Solely by Asbestos Containing Material (ACM) Maintenance/ TO BE ABATED Amount (i.e. thermal systems insulation, Encapsulate Custodial Staff? (Specify In Facility Removal Repair surfacing, VAT, or SF or LF) (12)(13) other miscellaneous) Yes No N/A Basement X TSI 200 LF X lame of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill ilich Corporation Hauler ID No. of Waste **GROWS** Landfill 18724 ity, State Disposal Date City, State loodland Park, New Jersey

03/25/2017

\$ignature

Title

President.

Morrisville, PA

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

Date

 $\sim 03/22/17$ 

SB-41 (R-06-08)

ompleted by

driana Olejarova

#### Print Form State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1 Name of Building Owner/Operator (2) 03/13/2017 Shailesh Mittal Check No. 4610 \$200 Agencies Notified Type Notification Street Addres EPA Initial ASBESTOS CONTROL & DEP Amended City, State, Zip Code LICENSING X DOL Amendment #\_ Hamilton, New Jersey 08610 Emergency (including DOH Name of Contact justification) Telephone Number DCA Cancellation Shailesh Mittal FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Residence School (K-12) Street Address Subchapter 8 (Other than K-12) × Other (i.e. private & commercial buildings, homes, City (5) Square Feet # of Floors Bldg. Age Hamilton, New Jersey 08610 1200 50 County (6) County Code (7) Current Use (Prior if being demolished) Mercer (STATE USE ONLY) Residence Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Lilich Corporation Street Address Street Address 606 McBride Avenue City, State, Zip Code City, State, Zip Code Woodland Park, New Jersey 07424 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 973-225-8400 01104 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 03/24/2017 03/25/2017 Iris Environmental Laboratories, LLC Occupancy Status During Abatement (Check Only One) Street Address Facility Closed/Vacated During Entire Period of Abatement 2333 Route 22 West Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: Union, New Jersey 07083 Scope of Work (Check All That Apply) ≥3 sf or ≥3 If Renovation × Full Containment with Negative Pressure ≥160 sf or ≥260 If Demolition Mini-Enclosure Glovebag Procedure Non-Exempted (\*) and Non-Friable Procedure Is Location Abatement Normally Location of Туре Description of Asbestos-Containing Material (ACM) Used Solely by Asbestos Containing Material (ACM) TO BE ABATED Maintenance/ Amount (i.e. thermal systems insulation, Encapsulate Custodial Staff? (Specify In Facility Enclosure Remova Repair surfacing, VAT, or (12)(13)SF or LF) other miscellaneous) Yes No N/A Basement X TSI 200 LF

Vame of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. .ilich Corporation of Waste 18724 2 GROWS Landfill City, State Disposal Date Voodland Park, New Jersey City, State 03/25/2017 Morrisville, PA Completed by \$ignature Title idriana Olejarova Date President. 201-

\SB-41 (R-06-08)

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

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Ch 909				CATION	ate of Nev I OF ASB to NJAC	ESTOS	ABATE		IT .		E	G	E		<u>W</u>		
Date of Notification (1) 03-21-17					f Building onstruct			(2)	CALININ N-1-actor		1	MAF	1 2	7 2	2017	22-0	븨
Agencies Notified	Type Notification			Street A	ddress rmon St						ASB	EST	OS (	CON	ITRO	L &	
EPA DEP DOL	Initial Amended Amendment	ı#			ate, Zip Cork, NJ 07							LI	<u>GEN</u>	SIN	<u> </u>		
Contract of the Contract of th	Emergency	(including	_		f Contact	7 100					Tole	phone	Mum	har			
DOH DCA	justification) Cancellation			Nelson	n Espino												
Name of Facility Where	Abatement is Takir	ng Place (3	3)	FACI	LITY INFO	ORMAI	ON	Ту	pe of Facili	ty (4)							
Private Home									School (								
Street Address								×	Subchap Other (i.e etc.)						dings,	home	es,
City (5) Roselle								Sq	uare Feet		# of	Floors	3	В	ldg. A	ge	
County (6) Union					Code (7) USE ONLY,	)		Cu	rrent Use (	Prior if	bein	g dem	nolishe	ed)			
Name of Monitoring Firm N/A	Hired by Building	Owner (8)		ASCN	A No.		10		batement (		100	9)					
Street Address							Street 522		317.T								
City, State, Zip Code							City, S	State	, Zip Code ity NJ 07	087							
Project Manager for Mon	itoring Firm			Telepho	ne No.		Teleph	none				Licen		),			
Start Date (10)		Schedule	ed Cor	mpletion l	Date (11)				SHA Monit	tor							
03-31-17		04-04-							ontracting	LLC	;						
Occupancy Status During Facility Closed/Vaca		-					Street 522										
Facility Closed/Vaca Abatement Performe Other – Describe: _									, Zip Code ity NJ 07	087							
Scope of Work (Check Al	I That Apply)		-				01110	-	nty 140 07								-
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demoli						Full Contair Mini-Enclos Glovebag P Non-Exemp	ure Procedi	ure						
		ls	Locat	ion				- '	VOII-EXCITE	T	anu	14011-1	Habit		Abate	ment	
Location			Norma d Sole				scription				23				Ту	pe	
Asbestos-Containing TO BE ABA In Facili (13)	ATED	Ma	intena todial (12)	nce/ Staff?		thermal surfa		s ins	г		(Sp	ount ecify or LF)		Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A												ite	е
Roof			Х				Roof				2,25	O SF	=	X			
2nd Flo	or		X			Joint	Compo	oun	d	-	300	) SF		X			
								-,	MELTON III	+							
Name of Registered Was Delfa Contracting LL			- M C	NJDEP W Hauler ID 35240	No.	of Was	Yards ste 15		Name Tullyt					COVE	ery F	acilit	ty
City, State Jnion City, NJ				33241		1	sal Date	) ASA	City, S	tate	- 50.00						
Completed by		Title					ignature	2	A				Date				
Jaime Delgado		Proj.	Mana	ager.			0.3	11	Y_				03-	21-1	7		

Print Form

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Date of Notification (1)			Nan	ne of Buildi	na C	Owner/Operator	(2)	1111	MAR 2	7	<del>2017</del>	
	17	-	1	eton Hall				3-5129 Che	ck #908	3		
Agencies Notified Type Notifi	cation		Stre	et Address	8			ASB	ESTOS			OL &
☑ EPA ☑ Initial			40	00 South	Ora	nge Ave.			LICE	NSIN	<u>IG</u>	
☑ DOLWD ☐ Amende			City	State, Zip	Cod	le		-1 /4- 1				
☑ DHSS Amendr				outh Orai								
□ DCA □ Emerge justifica		ding		ne of Conta	-			Telephone I	Number	-		
Cancell	5/2					eulebroeke		973-761				
				ACII ITV I	NEC	RMATION		0.0.0.				_
Name of Facility Where Abatement is	Taking Di	200 (3)		ACILITY	NFC	RWATION	Type of Facility	(4)				
Seton Hall- Reagan Recreatio							School (K-1	. ,				
Street Address	ii Cente	b					☐ Subchapter		K-12)			
400 South Orange Ave.							Other (i.e., phomes, etc.	private and con		ouildin	gs,	
City (5)							Square Feet	# of Floors	E	Bldg. A	ge	
South Orange												
County (6)			Cou	inty Code (	7)(S7	ATE USE ONLY)	Current Use (Pr	rior if being der	nolished)			
Essex							College					
Name of Monitoring Firm Hired by Buil	lding Own	er (8)	ASCN	1 No.	Na	ame of Abateme	ent Contractor (9)	)				
Omega Environmental						AbateTech, I	nc.					
Street Address					_	reet Address						-
280 Huyler Street						30 Maple Ave	. PO Box 25					
City, State, Zip Code			(2-k			ty, State, Zip Co						$\neg$
South Hackensack, NJ 07606						Lumberton, N	IJ 08048					
Project Manager for Monitoring Firm		Te	lephone	No.	1.	lephone No.		License No	).			$\overline{}$
Geiser Fajardo		2	201-489	-8700		609-265-2107		00529				
Start Date (10)	Scheduled	Comp	letion Da	ate (11)	Na	me of OSHA M	onitor					_
_4 / _13 / _17	4	/ _1	4_/	17	E	EMSL Analyti	cal					
Occupancy Status During Abatement (	Check on	y one)			Str	eet Address						
Facility Closed/Vacated During Enti					2	200 Route 130	) North					
Abatement Performed Outside of No.			urs - Des	scribe	Cit	y, State, Zip Co	de					
Time of Abatement: 7AM-3:30PM/	2PM-1:30	AW			(	Cinnaminson	, NJ 08077					
Scope of Work (Check all that apply)			- 1			□ Full Conta	ainment with Neg	ative Pressure				
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>		Renova				☐ Mini-Encl	osure	,				
△ ≥160 St Or ≥260 If	Ш	Demolit	ion				Procedure npted (*) and No	n-Friable Proce	edure			
		Is Loca	ation	T			inpited ( ) direction			atem	ant Ti	vne l
Location of		Norm				Description of				_		
Asbestos-Containing Material (ACM		sed So //ainten				Containing Mat		Amount	Removal	Repair	inca	Enclosure
TO BE ABATED IN Facility		ustodial		(i.e		ermal systems in surfacing, VAT,		(Specify SF or LF)	340	air	sde	uso
(13)		(12	)			her miscellaned		01 01 121 )	=		Encapsulate	Te
	Ye	s No	N/A								9	
Main Floor Recreation Center				Pipe Ins	sula	tion		75 LF				
*												
			$I_{\Pi}$						$\neg$	П	П	П
Name of Registered Waste Hauler			VJDEP V	Vaste Vaste	Cut	oic Yards of	Name of Regist	tered Landfill		1-		-
AbateTech, Inc.		1113	dauler II	No.	Wa	ste	G.R.O.W.S.					
City, State			18750	1		2 posal Date	City, State					
Lumberton, NJ						/14/17	Tullytown,	PA				
Completed By (Print or Type)	Title	-					· anjioini,		Data :		4	
Gwendolyn Trumbetti		tione	Coord	inator		Signature	u d		Date	)4	10	7
ondorym manibetti	Opera	LIUIIS	COOIG	iiatoi		1 1	M		2/0	XTI	1 /	

CVLMOQ	NOTIFICATIO	State of New Jers	SABATE	MEN'	г	Manus appropriate	ME	C	L	Pr	rint Fo
Date of Notification (1) 03/22/2017	Name	of Building Owner and Brook BOE			•		IN T		2 -	7 20	017
Agencies Notified Type Notification  EPA Initial	Street	Address West Union Av	enue			1	ASBI				
X DEP Amended Amendment # Emergency (included)	Boun	tate, Zip Code d Brook, NJ 0	8805					LIC	CENS		
X DOH justification)     ☐ Cancellation	Mr. E	of Contact rnie Turner CILITY INFORMA	TION				lephone Nur 32-356-25				
Name of Facility Where Abatement is Taking Pla Smalley Elementary School Street Address 162 Cherry Street	ace (3)	JETT IN OKWA	TION '	Type ×		12) er 8 (Oth	ner than K-12 & commerci		ldings	hom	ies,
City (5) Bound Brook				Squa 40K	are Feet	# 0	of Floors		Bldg. A	\ge	
County (6) Somerset	(STATE	Code (7) USE ONLY)		Curr	ent Use (Pi	ior if be	ing demolish	ned)			
Name of Monitoring Firm Hired by Building Owne RK Occupational Inc	er (8) ASC 0096	M No. O			alement Co		r (9)				
Street Address 401 St. James Avenue		5 0 - A house	Street 208 F		ess et Avenue	)			-		
City, State, Zip Code Philipsburg NJ 08865			City, S	tate, 2	Zip Code 1 07011						
Project Manager for Monitoring Firm Jonathan Gilbert	Telepho 908-4	one No. 54-6316	Teleph 973-2				License No	0.			
04/10/2017 04/	eduled Completion /13/2017	Date (11)			HA Monitor		1 22.2				
Occupancy Status During Abatement (Check On  X Facility Closed/Vacated During Entire Period Abatement Performed Outside of Normal Facother – Describe:	d of Abatement		Street /		ss Tip Code						
Scope of Work (Check All That Apply)	Renovation Demolition		×	Min	ni-Enclosur ovebag Pro	e cedure	n Negative P				
Location of Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12)	Asbestos Con (i.e. therma surfa		of aterial insula	I (ACM)	A (S	mount Specify or LF)		Abate Ty Repair	ment	Enclosure

					w ,								L	Pr	int F
Ch4710	)		NOTIF (F	CATIO	tate of Ne N OF ASE to NJAC	BESTOS	ABATE	MENT 0)		Interest of the second	DE	C	E	7	$\mathbb{V}$
Date of Notification (1) 03/22/2017					of Building emy of t					1		MAR	2	7 2	017
Agencies Notified Typ	e Notification			Street A			, 5				<u> </u>				
DEP DOL	Initial Amended Amendment				ate, Zip C rest, NJ		,		1300		ASB	EST LI	OS C CEN		
X DOH X DCA	Emergency justification) Cancellation	:			f Contact je Ballar		9				lephone Nu 01-768-78				
				FAC	LITY INF	ORMAT	ION							-	
Name of Facility Where Abate Academy of the Holy A	ement is Takin naels	g Place (	3)					Туре	of Facility	(4)					
Street Address 315 Hillside Avenue								R		r 8 (Oth	er than K-1 & commerci		dings	hom	es,
City (5) Demerest									re Feet	# 0	f Floors	E	Bldg. A	\ge	
County (6) Bergen				County (STATE	Code (7) USE ONLY	) -		Curre		ior if be	ing demolis	hed)			
Name of Monitoring Firm Hire WCD Group LLC	d by Building	Owner (8)		ASCN 0014					atement Co		(9)				
Street Address 23 Route 22, Suite B26							Street	Addre							
City, State, Zip Code Pennington, NJ 08534						City, S	state, Z	ip Code 07011					<del>0.65-41</del> 1		
Project Manager for Monitorin Mike Garambone	g Firm			Telepho 609-73	ne No. 30-0007	6	Teleph		0.		License N	lo.			
Start Date (10) 04/03/2017		Schedule 04/28/2	ed Cor	mpletion	Date (11)				HA Monitor						
Occupancy Status During Aba	atement (Chec	k Only Or	ne)				Street				-				
Facility Closed/Vacated I Abatement Performed O Other – Describe: Occup	utside of Norm	Period of /	Abaten Hours	nent s			City, S	tate, Z	ip Code						
Scope of Work (Check All Tha	t Apply)														
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf			Renova Demoli				×	Mir Glo	ni-Enclosur ovebag Pro	e cedure	n Negative F			0	
Location of	7	1	Locat	lly		De	scription						Abate	-	
Asbestos-Containing Mate TO BE ABATED In Facility (13)	d Sole intena todial ( (12)	nce/		tos Cont thermal surfa	aining M systems cing, VA niscellan	laterial s insula T, or		(8	mount Specify or LF)	Remova	Repair	Encapsulate	Enclosure		
		No	N/A								-		ate	e	
Basement, 1st & 2	2nd fl		Х		Pip	e fitting	gs- "wra	ap &	cut"	1	50 LF	х			
Exterior				Х			ow gla:			126	windows	х			
1st fl			X			wa	II mast	ic		7	5 SF	x			
Name of Registered Waste Ha	nuler			IJDEP W lauler ID		Cubic of Was			100 000000	The state of the s	ered Landfill				
City, State Newark NJ			0:	5409		Dispos	al Date		City, Stat	е	al Landfill				

Completed by

Voytek Roszkowski

Title

President

Date

03/22/2017

Pen Argyl, PA

Signature

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### State of New Jersey

MIMU				N OF ASE t to NJAC				CONTRACTOR SECURITION	D)					A Carte Consumer
Date of Notification (1) 3/24/17				of Building een Fitz			(2)	rest variable		MAR	27	201	7	
Agencies Notified  Type Notification  Initial Amended				Address ate, Zip Co	ode			-	A	SBEST(	OS CC DENSI		OL	Š.
DOL Amendment Emergency		_	Old Ta	appan, N		75		1000	240 10					10.89
DOH justification)  DCA Cancellation		,		of Contact een Fitzp	atrick					ephone N 1-259-9				
Name of Facility Where Abatement is Takin	a Diago /	2)		ILITY INF		ION					7			
Residential Home	g Place (	3)					-	of Facility ( chool (K-1						
Street Address							S X	ubchapter ther (i.e. p	8 (Oth			ldings	home	es,
City (5) Old Tappan							Square 4000	Feet	# o	Floors		3ldg. <i>F</i> 30+/-	\ge	
County (6) Bergen				Code (7) USE ONLY	)			t Use (Prid Iential H		ng demoli	shed)	3		
Name of Monitoring Firm Hired by Building ( Project Manager	Owner (8	)	ASCI	M No.			of Abate	ement Cor Abateme	tractor	(9)				_
Street Address						Street	Address							
City, State, Zip Code				->		City, S	tate, Zip	Code						
Project Manager for Monitoring Firm		Т	Telepho	ne No.		Teleph	one No.		7663	License	No.			
Start Date (10)			mpletion	Date (11)			600-31 of OSH	84 A Monitor		01305				
4/3/17 Occupancy Status During Abatement (Chec	4/4/17					Stroot	Address						11111	
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe: 8 A.M to 4 P.M	Period of	Abater	nent s				tate, Zip	nie						
Scope of Work (Check All That Apply)														
≥3 sf or ≥3 lf ≥ 160 sf or ≥260 lf	-	Renova Demoli		·		×	Mini- Glov	Containme Enclosure ebag Proc Exempted	edure				e	
		Locat										Abate		
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	Normal ed Sole aintena todial (12)	ely by nce/	Asbes (i.e.	tos Cont thermal surfa	scription taining M systems cing, VA niscellan	laterial ( insulati T, or	ACM) on,	(S	mount pecify or L.F)	Remova	Repair	Encapsulate	Enclosure
Password	Yes	No	N/A							*			ਰ	
Basement		X				VAT			32	5 SF	x			
Name of Registered Waste Hauler Newark Carting		H	IJDEP W lauler ID 4509		Cubic of Was 3 CU			Name of F IESI Lar	1000	red Landf	11			
City, State Newark, NJ						sal Date		City, State Bethleh		Α				
Completed by Richard Cristofol	Title Presi	ident			S	ignature		#	,. >—	0	ate /24/1	7		

# C/L8297

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

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Chec	ck #	<b>629</b>	7 2	7	2017	400000000000000000000000000000000000000	

								r Clieck	#HOZU	L 1	LU		- Learning
Date of Notification	(1)	1	I Name o	f Buildina Ow	ner/Operator (	2)			Allow professore filther				
0 13 1/12 14	1/11/7	- 1		Cromeberge				AS	BESTO	SCC	TMC	ROL	. &
Agencies Notified	Type Notifica	tion	Street A						1.10	FNS	NG		
☐ EPA	X Initial							9.9		69			
☐ DEP			City, Sta	te, Zip Code									
X DOL	Amend	lment			ts, NJ 0792	2							
X DOH			Name of	Contact				Telepho	ne Numbe	r			
☐ DCA	Cancel	lation	Edw	ard Delia				908-7	23-1613	3			
				FAC	CILITY INFORI	MATIC	N N						
Name of facility who	ere abatement	is taking	place (3)					Type of Facility	(4)				
Jim Cromeber	ger	878	5) (2) (N)						ol (K - 12				
Street Address									napter 8 (0			(-12)	
Street Address									(Private/C /Homes, c		siciai		
		7.0	1 (0)			T -		Square Feet	# of Floo	rs	В	ldg. A	Age
City (5)		00	ounty (6)			22730	ounty Code (7) tate use only)	Current Use (F	rior if hair	ng den		ed)	
Berkeley Heig	ghts		Jnion			,,,	allo dos siny)	residential	Tioi ii beli	ig uen	1011511	eu)	
Name of Monitoring	Firm Hired by	Bldg. Ov	vner (8)		ASCM No.	-)	Name of Abatement C	Contractor (9)					
					n/a		B & G Restoration	on, Inc.					
Street Address							Street Address 105 Ryerson Ro	oad					
City, State, Zip Code	2						City, State, Zip Code			3			-
•							Lincoln Park, N	J 07035					
Project Manager for	Monitoring Firm	n		Phone Numl	ber		Telephone Number (973)696-6869	)	License		oer		
							Name of OSHA Monit			)378			
Scheduled Start Date	e (10)	Sch	ed. Comp	letion Date (1	1)		B & G Restoration						
04/03/2017			1/04/201				Street Address						
Occupancy Status D							105 Ryerson Ro	ad					
Facility closed	/vacated during rformed outside						City, State, Zip Code						
Describe:							Lincoln Park, N.	07035					
Other-Describ						_							1
Demolition	TX	Renova	tion			П	Full Containment w/nega	ative pressure	Glove	haa ni	ncedi	Iro	
>3 sf or >3 lf			or >260 lf			X	Mini-enclosure	01000019 07115	Non-f	n one			
		_		illy used solel	vl			<del>                                      </del>		R	R	E	1_
Location of asbestos-cont	aining	by mair	ntenance/			ion of	asbestos-containing	Amount		e m	e p	n	E n
material to be abated in facili		staff(12		Τ	material			(Specify S	SF or	0	a	a	C
	, ()	Yes	No							v e	I r	р	
basement				X	thin duct	(wrap	& cut)	50 sf		X			10
basement crawl	space			×	thin duct	wrap	& cut)	100 sf		X		닏	뷰
			-		1		resinx.	_		ዙ	屵	믐	#
			+		1					#	H	H	ዙ
Registered Waste Ha	auler	I NJ	DEP Haul	er ID#   C	Ubic Yards of	Waste	Name of Registered L	andfill		.] 니		ш.	1
B & G Restoration	on, Inc.		19563		2		Tullytown F	Resource & Re	ecovery	Cent	er		
City, State Lincoln Park, N	 J			Disposal D	Date 04/2017		City, State Tullytown, P	'A					
Completed by (Print		Title			Signature		·I		Date		-	1	
Gordana Luna	A Frank		ary/Trea	asurer			Gordana Luna		03/24	4/201	7		

O&S Proj. #: 17-80

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

(n),	E	G	E		$\mathbb{V}$	<u>E</u>	$\prod$
	-	MAR	2	7	2017		

8									MAR 2	12	U1/	bec	1
Date of Notification (1)		Name of E	Building Ow	ner/Operator (2)	)					-		i	-
0 3 /12 0 /1 7		janet me	enally					ASBI	ESTOS	CON	TRO	L&	- Control
Agencies Notified Type Notific	ation	Street Add	ress						HOE	HH			
DEP Amended													
Amendment	#:	City, State	Zip Code										
☑ DOL ☐ Emergenc	v — II	scotch	plains, nj	07076									
DOH (including	- 11	Name of Co		0,0,0	-		-	Telepho	ne Numbe	er	-	Y	
DCA justification	. 11	ianet m	onally					0.0000000000000000000000000000000000000					
Cancellatio	on []	janet m	Charry					908-43	51-5381				
			FAC	CILITY INFORM	ATIC	N							
Name of facility where abatement	is taking p	place (3)					T	Type of Facility					
janet menally							$\mathbf{I}$	=	ol (K - 12				
Street Address							- 1		napter 8 (			500	
								Other Bldgs.	(Private/0/Homes,	comme etc.	ercial		
011 (5)							-1 [	Square Feet	# of Floo		В	ldg. A	ge
City (5)	Col	unty (6)				unty Code (7)	7 L						
scotch plains	111	NION			(St	ate use only)		Current Use (F	rior if beir	ng den	nolish	ed)	
Name of Monitoring Firm Hired by				ASCM No.	-	Name of Abatem	ent Co	entractor (9)					
		**************************************			- 1								
Street Address					-	D & S RESTO	JKA	ION, INC.					
						20 California	Ave						
City, State, Zip Code					-	City, State, Zip Co				-			
					- 1	Paterson, NJ		3					
Project Manager for Monitoring Firm	n	PI	none Numb	er	_	Telephone Number			License	Numb	er	-	
						973-345-80	20		0	1169			
Start Date (10)	Sche	d. Completi	on Date (1	1)	-	Name of OSHA M							
04/03/17	04/2	4/17				D & S Restor	ration	, Inc.					
Occupancy Status During Abateme			Martin Age - America		-	Street Address							
Facility closed/vacated during	entire per	iod of abate	ment.			20 California City, State, Zip Co		ue					
Abatement performed outside Describe:	of normal	facility hou	rs-			Oity, State, Zip Co	ue						
Other-Describe: NORMAL F	IOURS				-	Paterson, NJ	0750	3					
Scope of Work (check all that appl	y)					Г		Containment w	/negative	press	uro		
≥3 sf or ≥3 lf	Renovation	on				Ī		ii-enclosure	megative	piess	uie		
☐ ≥160 sf or ≥260 lf	Demolitio	n				Ī		vebag procedur					
Location of	Is locatio	n normally	used solely		_		No	n-Exempted (*)	and Non-	friable	proc		
asbestos-containing		enance/cust		1	n of a	sbestos-containing		Amount		e	e	E n	E
material (acm) to be abated in facility (13)		Г	T	material (A		sbestos-containing		(Specify S	F or	m o	p a	c a	n c
	Yes	No	N/A					LF)		V	i	p	L
BASEMENT		X		PIPE INSUL	ATI	ON		162 l ft		e	$\Box$	П	
BASEMENT CRAWL SPACE		X		PIPE INSUL	ATI	ON		18 l ft	-	Ø	ī	Ħ	一
Registered Waste Hauler D & S RESTORATION, INC.	NJDI 135	EP Hauler II		bic Yards of Wa	aste	Name of Register							
City, State			Disposal Da	yds.		TULLYTOWN	N, RE	SOURCE RE	COVER	Y			
PATERSON, NJ 07503		ľ	04/04/17			City, State TULLYTOW	N DA						
Completed by (Print or Type)	Title			Signature		TOLLITOW	1, 1 A		Date				—
BOGDAN JOLDZIC	PRESID	ENT							03/20/	2017			
ASB-41 *	Do not use	e this form f	or ashesto	s licensure exen	nnter	activities			L		_		



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

	E	C	E		$\mathbb{V}$	
		MAR	2	7	2017	

								1111	MAR 2	7	2017	į	1
Date of Notification (1)		Name of E	Building Owr	ner/Operator (2)	)							1	
0 3 /1 7 /1 7		murat a	ktar					ASE	SESTOS	COI	VTR	S JC	
Agencies Notified Type Notifica	ation 3	Street Add	iress						LICE	VOII	G_		
DEP Amended								10- assess					
Amendment #	:	City, State	, Zip Code										
DOL Emergency		edgew	ater, nj 07	020									
DOH (including justification	,	lame of C	ontact					Telephor	ne Number				
DCA Cancellation	. 11	murat	aktar					201-92	5-3979				
			FAC	ILITY INFORM	ATIO	N							
Name of facility where abatement	is taking pl	ace (3)					Ту	pe of Facility					
murat aktar								=	ol (K - 12) apter 8 (C	ther t	oon K	12\	
Street Address							1		(Private/C			-12)	
+ 60 and 27 4 (\$2400 (\$2000) \$2.0 (\$2000 (\$440) ) (\$2								Bldgs	Homes, e	tc.			
07-75	1.0	-1. (0)					_   S	quare Feet	# of Floor	s	BI	dg. A	ge
City (5)	Cou	nty (6)				unty Code (7) ate use only)	-		-116 h -1		-1:-1-	- 41	
edgewater	BE	RGEN			(01	ate use only)		Current Use (P	rior it bein	g dem	IOIISN	ea)	
Name of Monitoring Firm Hired by	Bldg. Own	er (8)		ASCM No.		Name of Abateme	nt Con	tractor (9)					
808 <b>-</b>						D & S RESTO	RATI	ON, INC.					
Street Address						Street Address							
						20 California	-				no real	13000	
City, State, Zip Code						City, State, Zip Co	de						
5	-				_	Paterson, NJ							
Project Manager for Monitoring Fire	n	F	Phone Numb	per		Telephone Number 973-345-802			License	Numb 1169	er		
						Name of OSHA M			1	1109			
Start Date (10)	Sched	d. Comple	tion Date (1	1)		D & S Restor		Inc.					
03/22/17	04/1:					Street Address							
Occupancy Status During Abateme						20 California	Avenu	e					
Facility closed/vacated during Abatement performed outside						City, State, Zip Co	de						
Describe:					_	Dataman MI	07502						
Other-Describe: NORMAL						Paterson, NJ							
Scope of Work (check all that app						Į.	==	Containment v enclosure	v/negative	press	ure		
								ebag procedu	re				
≥160 sf or ≥260 lf	Demolition						Non-	-Exempted (*)	and Non-				
Location of asbestos-containing		n normall enance/cu	y used solely istodial					Amount		R	R	E n	E
material (acm) to be	staff(12)			Description material (		asbestos-containing		(Specify S	SF or	m o	р	С	n
abated in facility (13)	Yes	No	N/A	- material (	,	<i>c.</i>		LF)		V	i	a p	L
BASEMENT		X	-	PIPE INSU	LAT	ION		570 l ft		e	r	П	$\vdash$
										盲		Ħ	一
				]		All activities are recommended							
Registered Waste Hauler	NJD	EP Haule		ubic Yards of V	Vaste				2001122	37			
D & S RESTORATION, INC. City, State		506	Disposal D	3 yds		TULLYTOW City, State	N, KES	SOURCE RE	ECOVER	Y			
PATERSON, NJ 07503			03/23/1			TULLYTOW	N. PA						
Completed by (Print or Type)	Title		-1	Signature			.,		Date		-		
DOCDAN IOI DZIO	DDECID	ידוגייו		1					02/17	MANT	-		

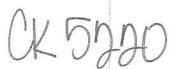
r 20 2017 03:47PM	NJ Asb	estos	Control	609,633,0	0664		page 1					100000000	V	
83/28/2817 8	19: 39AM	9733	3458060			D&	S RESTORATIO	1		) <u>E</u>	G,	I.	2/	W
ĐẠS Proj. #: _17-	84	-	e esso p	Not (Pur	fication of As	e of l sbes C 8:	NJ tos Abatement 60 and 12:120	)		9L -		DAY		2017
Date of Notification (1)		T	Name of	Building Ch	vner/Operator (	2)			-	ASBE			NOS	
Agencies Netified   Typ	S Notificat		murata	ukter							オ	7	2110	<u>~</u>
EPA Ini		lion	Street Add	frees			-				1	/	+	-
- 1 mm	nandes	- 11							MAN	ERAP	المالية	01.11		-
(30) (30)	ndment st		City, State	, Zip Code			AND REAL PROPERTY.				-			+
DXI DOH I (in	nergency religing	116	edgew	ater, nj 0	7020									
DOM:	tification)	- 11						of the second second	Tataph	ons Numb	er			
	andellation		murat	aktar				-	201-9	25-3979				
Name of to all the				FA	CILITY INFORM	AATIO	N	433-35				- Salaran	bearing to the	Annual Control of the least of
Name of facility where ab	atement is	a baking p	iece (3)					T	Typs of Facilit	y (4)		-	-	
murat aktar							9		1 Marie S	bol (K - 12				
Street Address				Aller					DO Othe	chapter 8 ( If (Private/ s./Homes,	Comr	than nertia	K-12) I	)
City (5)	STATE OF THE PARTY	Cou	inty (6)	-01490105	aresis—type				Square Feet	of Flo	cia	T	idg.	Age
edgewater		BR	RGEN				unty Code (7) ate use only)		Current Use (	Prior if bel	ng de	molla	hed)	I Que
Name of Monitoring Firm	fired by B	idg. Own	er (8)	C Market Services	ASCM No.	$\vdash$	Name of Abaten	neht C	ontractor (9)			Section 1	W	
Street Address		State and the state of			-		D& S REST	ORA	TION, INC.					
							Street Address					discussion.		
ity, State, Zip Code	İ	-				Bearing .	20 Californi City, State, Zip C	a A V		CONT. Management			4000	
roject Manager for Monko							Paterson, N.		03					
And weded to would	ing Firm		P	hone Numb	per		Salephone Numb	er		License	Nun	ber	- Constitution	A SECTION AND ADDRESS.
Start Date (10)	+	ISchae	Camping	en Date (1			973-345-80 Name of OBHA I				1169	)	Security of	-
03/22/17				en nemali	1)		D& S Resto							
Scupency Status During A	patement	(Chack o	oly one)				Street Address			The state of the last	LOGIC TH		SACCOLUMN .	
Facility closed/vegated	d'durina e	nilos caric	nd of shake	enient.			20 California City, State, Zip Co		nue		- 60 50		Market	ALIE NAME
Abatement performed Describe:			iacility hou	Tile .			CANAN TARREC'S STATE OF	996						
Other-Describe: NOF						-	Paterson, NI	075	03					
>3 sfor >3 if	Manual	denovatio			79				Il Containment	W/repative	bras	BUTE		
2160 sfor ≥280 lf		emolition							ini-enologure ovebeg procedu	ırm				
Location of	10	s location	normally	used solely				N	on-Exempted (*	and Non-	friable	proc	adure	B
asbestos-conteining	b	by mainte: sinff(12)	nance/cus	todial	1	n of a	sheatos-containing		Amount		R	R	E	E
material (scm) to be shated in facility (13)	1	Yea	M a	T	A) lairetam	(OM)	o⇒ aema_AduMtiuju[		(Specify )	P or	m	p	0	n
		100	No	N/A					ĹF)		N.	ī	9	L
ASEMENT			X		PIPE INSUL	ATI	ON		570 I ft		X	Ó		10
						-	SHIP I WAS ARREST TO VALUE							
			(CA 11 A 10 A 20)							· 		H		旧
					And the second of the second o	NIA-KONA			-	University one	1	1	1	1
	73.00	NJDE 1350	P Hauler II		ble Yards of W	zate	Name of Register	ed La	nafill		Ц.		لبا	
& S RESTORATION	1.795		14	8	yds	and the latest	TULLYTOW	N, RI	ESOURCE RI	COVER	Y			
& S RESTORATION,				Disposal Dr	sto			The state of the s			THE PERSON NAMED IN	ADDRESS OF THE PARTY.		
& S RESTORATION, y, State ATERSON, NJ 07503				03/23/17			City, State	N. P.	A					
& S RESTORATION, y, State ATERSON, NJ 0750; replated by (Print or Type) OGDAN JOLDZIC	) Ti	itle RESIDE						N, P.	A	Date	10			

CK7013

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

m.	E C	E 1	VE	In
	MAR	272	N17	$\mathbb{I}$

								1111	MAR	27	2017	,	IUI
Date of Notification (1)		Name of E	Building Ow	ner/Operator (2	2)					_ /	4011	i	
0 3 /2 1 /1 7		jim wei	21					ASE	ESTOS	001	a Proper comp.		1
Agencies Notified Type Notific	cation	Street Add						100	LICE	NSIN	G	1) 8	-
_												-	
Amendment		City, State	, Zip Code								_		
DOL Emergend		new m	lford, nj	07646									
DOH (including		Name of C		,,,,,	-			Telephor	ne Numbe	er			
DCA justificatio		iim wa	ial					1					
Cancellat	ion	jim we						/5/-28	6-0024	_			_
Name of facility of the state o			FAC	ILITY INFORM	MATIO	N							
Name of facility where abatemen	nt is taking	place (3)					7	ype of Facility	(4) of (K - 12)	)			
jim weigl								=	apter 8 (0		han k	(-12)	
Street Address							7		(Private/C			. 12/	
									/Homes, e		Гр	ldg. A	~~
City (5)	Co	ounty (6)			Co	unty Code (7)	-	Square Feet	# of Floo	irs	"	iug. A	ige
		37. W. T.				ate use only)	-	Current Use (P	rior if beir	ng den	l	ed)	
new milford		ASSAIC			L.	6	11.						
Name of Monitoring Firm Hired b	y Bldg. Ov	vner (8)		ASCM No.		Name of Abaten	nent Co	ntractor (9)					
Street Address						D & S REST	ORAT	ION, INC.					
Street Address						Street Address	0.720						
City, State, Zip Code						20 Californi		The second second second second				- NO.	
ony, otato, zip oode						City, State, Zip C							
Project Manager for Monitoring Fir	rm	Ιp	hone Numb	er	-	Paterson, N		<u> </u>	License	Numh	oer.		
,			none manne	01		973-345-80			1	1169	<i>)</i>		
Start Date (10)	ISch	ed. Complet	on Date (1	1)	_	Name of OSHA							
82 EEO			on Date (1	'')		D & S Resto	ration,	Inc.					
03/31/17		14/17			-	Street Address							
Occupancy Status During Abatem  Facility closed/vacated durin		AND THE RESERVE OF THE PARTY OF	omont			20 California		ие					
Abatement performed outsid	de of norma	al facility hou	rs-			City, State, Zip C	ode						
Describe: NORMAL	HOURS				_	Paterson, N.	J 07503	3					
Scope of Work (check all that app	oly)						☐ Full	Containment w	/negative	press	ure		
$\boxtimes$ >3 sf or >3 if	Renova	tion						i-enclosure	3				
☐ ≥160 sf or ≥260 lf	Demoliti	ion						vebag procedur n-Exempted (*)		e:			
Location of	Is locat	ion normally	used solely	1				i-Exempled ( )	and Non-	R	R	E	
asbestos-containing	by mair staff(12	ntenance/cus	todial	Description	on of a	sbestos-containin	а	Amount		e m	е	n	l E
material (acm) to be abated in facility (13)	1		Т	material (	ACM)			(Specify S LF)	F or	0	a	c a	С
	Yes	No	N/A					_,,		v e	i	р	-
BASEMENT				PIPE INSU	LAT	ION		160 L FT		X			
					-								
		1											
Registered Waste Hauler		JED III-	D# 1.0	ubio Veste eff	Va = t	Tu := :		1511					
D & S RESTORATION, INC	. NJ	DEP Hauler 3506	100	ubic Yards of V yds.	vaste	Name of Registe TULLYTOW			COVER	Y			
City, State			Disposal D			City, State	. 1, 11	JOINEL KL	COTEN				
PATERSON, NJ 07503			04/03/1	7		TULLYTOV	VN, PA						
Completed by (Print or Type)	Title	D.D		Signature					Date				
BOGDAN JOLDZIC  ASB-41	* Do not		for achaeta	s licensure exe	mnte	d potivities			03/21/	17			
NOD-4	DO HOLL	INTO CITE OF THE	IVI GOUESIC	D HUCHSHIE HYP		u achvines							



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KI	-					Print	Form
A Company	1	MAD	2	7	2017		U

Date of Notification (1	)				f Building		Operator	(2)	and the state of t		ASBEST	OS C	TNC	ROL	80
Agencies Notified	Type Notification			Street A	te Palm	olive					LI	CENS	ING	72	
□ EPA					iver Roa	ad						50	E   E	= 1	
DEP	Amended	1			ite, Zip Co										
X DOL	Amendment Emergency		-		away, N	IJ									
Ĭ DOH DCA	justification) Cancellation				Contact Russell					92222	ephone Nu 2-878-79				
П	Carcellation	'			LITY INF		ON	-		13	2-070-73				
Name of Facility When		g Place (3	3)	1 70	EII I MI	ORMATI		Туре	of Facility (4	)					
Colgate Palmolive	e R&D								School (K-12						
Street Address 909 River Road								×	Subchapter 8 Other (i.e. pri etc.)				dings,	home	es.
City (5) Piscataway	1.								re Feet ,000	3	Floors	100	ldg. A 0	ge	
County (6) Middlesex					Code (7) USE ONLY	)	_		ent Use (Prior nmercial	if bei	ng demolis	hed)			
Name of Monitoring Fi Accredited Enviro				ASCA	1 No		100000000000000000000000000000000000000		atement Contr	actor	(9)				
Street Address 28 Pennell Road							Street		ess Lincoln Hi	ahwa	av Suite	500			$\neg$
City, State, Zip Code Media, PA							City, S	tate, 2	Zip Code 19341	9,,,,,	2), 00110				$\neg$
Project Manager for M	onitoring Firm			Telepho	ne No		Teleph	55			License I	Vo.			
Eric Houseknecht				610-89	91-0114		484-	872-8	3884		01161				
Start Date (10) 3/23/17		3/24/17	7	mpletion	Date (11)		Name EMS		HA Monitor						
Occupancy Status Dur	į.			William			Street		ss = 130						
Abatement Perfor	med Outside of Norn Work in a segregate	nal Facility	Abater Hour	ment s			City, S	tate, Z	Zip Code				****		
Scope of Work (Check							Cinn	amın	son, NJ						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		200000	Is Location Normally Used Solely by Maintenance/ Asbesto				×	Mi	III Containmer ni-Enclosure ovebag Proce on-Exempted	dure				e	
		Is	Locat	ion						1			Abate	ement	
Locati	on of	N	lorma	lly			scription					-	Ty	ре	-
Asbestos-Containing TO BE A						tos Cont					mount Specify	D		En	<u>m</u>
In Fa	cility	Cust	odial ( (12)	Staff?	(1.0.	surfac	cing, VA	T, or			or L.F)	Remova	Repair	caps	Enclosure
(13	3)	Yes	No	N/A		other n	niscellan	eous)				val	ar.	Encapsulate	ure
EG	03			X	F	loor til	e and	mast	ic	14	14 SF	Х			
EG	02			X	F	loor til	e and	mast	ic	24	14 SF	Х			
closet adjacent f	o nurses office			X	F	loor t	ile and	l ma	shc	5	U SF	X			
												1_			
Name of Registered W Freehold Cartage,			H	JDEP W lauler ID JD054		of Was			Name of R Veolia E				ill		
City. State Freehold, NJ						Dispos	al Date		City, State Kersey,	PA					
Completed by Jack Bally		Title Sr. Pr	ojec	t Mana	ger	S	ignature	100	Balo.	, /	30 3	ate  24	17		
ASB-41 (R-06-08)	*					(	7	1	this form for a	sbes	tos licensu	re exer	npted	activi	ties.

Ch134			ICATIO	N OF ASB	ESTOS	ABATE		Т	General description of the second	Dr	5	C	<u> </u>		7 [
Date of Notification (1) 03/23/2017			Name of Hugo	of Building Neu Re	Owner/ealty M	Operator anager	(2) ment	t LLC	and the state of t		M	AR	2 7	201	7
Agencies Notified Type Notification				Address hn Mille	r Way				Contract to Act of	AS	BES	STO	3.00	MITE	ROL
EPA Initial Amended Amendment	ŧ			ate, Zip Co ny, NJ 07									NSI		1011
DOH Emergency (i justification)  DCA Cancellation	ncluding			of Contact O Stanko	vic, Pı	roject N	/lana	nger		ephone 73-570					
			FAC	ILITY INFO	ORMAT	ION									
Name of Facility Where Abatement is Taking Kearny Point Industrial Park Street Address	Place (	3)					Туре	e of Facility School (K- Subchapte	12)	ar than 1	V 10	·			
78 John Miller Way, Building 1							V	Other (i.e. etc.)	private	& cornm	ercia	l buik			es,
City (5) Kearny								are Feet ,000	# 0	f Floors			ldg. A	Age	
County (6) Hudson			County (STATE	Code (7) USE ONLY			Curr Un	rent Use (Pr loccupied	ior if bei	ng demo	olishe	ed)			
Name of Monitoring Firm Hired by Building C	wner (8	)	ASCI	И No.				atement Co ark Indust		(9)					
Street Address						Street 109		ess tage Lane	)						
City, State, Zip Code				New Communication				Zip Code J, NJ 074	19						
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph 973-		No. 2645		Licens 0133					
Start Date (10) 03/28/2017	Schedul 5/22/2	ed Con	npletion	Date (11)				SHA Monitor ark Indust			. 23				
Occupancy Status During Abatement (Check						Street 109		ess tage Lane	<u> </u>						
Facility Closed/Vacated During Entire Ponds Abatement Performed Outside of Normal Other – Describe:	eriod of all Facility	Abatem y Hours	ent			City, S	tate, 2	Zip Code							
Scope of Work (Check All That Apply)		Renovation Demolition				1.00.1							-		_
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Facility Hours  Renovation				~	Mi	ull Containm ini-Enclosur lovebag Pro on-Exempte	e cedure	· · · · · · · · · · · · · · · · · · ·				e	
		Locati										- 1		ement pe	:
Location of Asbestos-Containing Material (ACM)  TO BE ABATED In Facility  (13)	Use Ma	Normall ed Solei intenar todial S (12)	y by nce/	Asbest (i.e.	os Cont thermal surfa	scription taining M systems cing, VA niscellan	lateria insul T, or	lation,	(8	mount specify or LF)		Removal	Repair	Encapsulate	Enclosure
and half	Yes	No	N/A						3					Ġ.	
east half- west mezzanine		3 2000				1' Floor	STORE THE	\$		00 SF		Х			
roof & south loading dock OH	H X					f flashir			<u></u>	00 SF		X			
upper roof & loading dock OH		X			built-	up roo	fing		72,0	000 SF		Х			
Name of Registered Waste Hauler		1 2.	IDEE	lanks .	0.11	V- 1		1.51			1500				
Weigle Trucking Co.			JDEP W auler ID	7797	of Was 1,500	ste		Name of Minerv			dtill				
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		(Pursu	ant to	N.J.	A.C. 8	:60 ai	10 12.120)		ACRECTO	200	TTD	OL 8	2
	•		Non	an of	Building	n Own	er / Operator (2)		LICI	ENSIN	IG		
Date of Notification (	Notified Type Notification Amended Freehold, Name of City, State Freehold, Name of City, State Freehold, Name of City State Place (3)  Apple Ridge Golf Course dress to Crescent Avenue    County (6)						о о <sub>г</sub>	Ī	E.I.O.		-		-
									1000	+ +			
	Type Notifica	tion	100	Will	low Br	ook F	Road, Suite 200	)					-
			City	Stat	te & Zip	Code							
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□ DOH													
☐ DCA	☐ Canc	ellation	Da	VIQ F	UILZ	IFOR	MATION						_
	Cancellation   David Fulf					VFOR	Type of Facility (4	1)					
Name of Facility Wh	here Abateme	ent is Taking Plac	ce (3)				School (K-12	2)					
Former Apple Ri	Crescent Avenue    County (6)   Bergen						=	Other than	K-12)				
Street Address						1	Other (i.e. ni	ivate & comn	nercial buildings, h	nomes,	etc.	)	
aco East Cresce	nt Avenue					H	Square Feet	# of Floor	s Bldg.	Age			
209 Last Olesco							Square reet	# Ot 1 1001		858			
011 /5\		County (6)	Coun	ty Co	de (7)	1		ist sine dos	malished)				
City (5)						Î	Current Use (Pri	or it being der	Houstied)				
Mahwah		Deigen	-			1	Golf Course C	omplex (CI	osea)	-	-		-
		Duilding Owns	or (8)		ASCM	No.	Name of Abatem	ent Contracto	or (9)	ting	110		
Name of Monitoring	g Firm Hired b	by Building Owne	51 (0)	1			Enterprise Ne	twork Reso	lutions Contrac	cung,	LLC	-	$\dashv$
							Street Address						
Street Address							874 Piney Hol	low Road, F	P. O. Box 70		-		$\dashv$
				70.00			City State & Zip	Code					
City, State & Zip C	ode						Winslow, New	Jersey 080	)95	1			-
1000000			Tolenh	one l	Number		Telephone Num	ber	License Num				ı, İ
Project Manager for	or Monitoring	Firm	Leichi	01101			609-567-0600			01263		_	_
	uled Start Date (10) Scheduled Completion Date 6-15-17				2 (11)		Name of OSHA	Monitor					
Scheduled Start D	3-23-17  ancy Status During Abatement (Check only one)  5 Status During Abatement (Check only one)  6-15-17				5 (11)		EMSL Analyti	cal					-
3-23-1	17						Street Address						
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☐ Facility O	Describe: Facility Occupied During Abatement of Work (Check all that apply)								*				
Scope of Work (C	Facility Occupied During Abatement e of Work (Check all that apply)						Г	7 Full Cor	tainment with Neg	gative l	Press	sure	
Осоро стата	of Work (Check all that apply)			Ī	Mini-En	closure							
x ≥3 sf or ≥	3 If							Glove B	ag Procedures				
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	(13)		Yes	No	N/A				9000 Cm E4	M		П	T
		Lin Doof			X		Roof Shing		8000 Sq. Ft.		H	H	十
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Blda #1 (	Club Hse Lo	wer Level	1	-	X		Roofing & Felt F	lashing	500 Sq. Ft.		닏	님	+
Blda #2	1 Bay Gara	age Roof	11	-	X		12" Floor TI	les	140 Sq. Ft.		Щ	1	1-
Blda #3	Guard Shac	k Interior	1				Edge Flash		200 Sq Ft.	X		Ш	11
Bldg #	4 Pool Hou	se Roof		-	X		Floor Coat		8500 sq ft	X			
Dida #A Da	ool House T	ennis Court			X			Name of Re	gistered Landfill				
Nome of Pogiet	ered Waste H	lauler		N	JDEP \	Waste	Cubic Yards of Waste	Tanis or ite	<b>3</b> - • • • • • • • • • • • • • • • • • •				
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Berlin, NJ				17	Title		Signature	1 1	man of the same	Date		0 4=	,
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Theodore S.	Budzynski			100	vice Preside	ont	1	-					
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Name of Facility WI	here Abateme	ent is Taking Pla	ce (3)				Type of Facility School (K-1	(4) 12)					
Former Apple Ri	dge Golf Co	ourse					Subchanter	8 (Other than	K-12)				- 1
Street Address	County (6) Bergen  Firm Hired by Building Owner (8)  AS  AS  AS  AS  AS  AS  AS  AS  AS  A		Ì	Other (i.e.	private & comm	nercial building	s, home	s, etc	.)				
269 East Cresce	nt Avenue				'G		Square Feet	# of Floors	s Bl	dg. Age			
City (5)		County (6)	Cou	nty Co	ode (7)			· ith in a dea	naliabod)				
Mahwah		Bergen					Current Use (Pr	nor it being den	nolisileu)				
	Emergency Cancellation  Fity Where Abatement is Taking Place (3)  Ile Ridge Golf Course  Sescent Avenue    County (6)   Bergen			-	Golf Course	Complex (Cit	seu)				$\neg$		
Name of Monitoring	Firm Hired b	y Building Owne	er (8)		ASCM	No.	Name of Abater Enterprise No	ment Contracto	utions Conti	racting	. LLC	;	
l l							Street Address	etwork Resor	duons cont	aoang			
Street Address							874 Piney Ho	llow Road, P	O. Box 70				
							City, State & Zi	n Code					
City, State & Zip C	ode						Winslow, Ne	w Jersey 080	95				_
	8.8 - 18 - 18 - 18 - 1	Tirm	Teleni	hone	Numbe	r	Telephone Nun		License N		_		
Project Manager to	or Monitoring	F11111	ГСЮР		* * <del>*</del> * * * * * * * * * * * * * * * *		609-567-0600			0126	3		_
Ontroducted Stort D	ata (10)	Scheduled Corr	pletio	n Dat	e (11)		Name of OSHA				30		
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Describe:							Cimamison	ii, iteli ooloo	,				
Facility Oc	cupied During	g Abatement		-					10 to 1000 1000				
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v >3 ef or >3	3 If			Ren	novation	1		Mini-Enc     Glove Ba					1
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Asbe	estos-Contain	ing					Material (AC		SF or LF)	70	1	Encapsu	파
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10	in Facility	2	Cust		Staff?	iı	nsulation, surfaci	ing, VAT		oval	air	sulate	oure
			Yes		N/A		or other miscella	ineous)		1 -		e	
	1000000		-	270000	V		Green Linole	eum	150 Sq. Ft.				
Bldg #5 Hse	by Club Hse	Bedroom 1	뷰	-	X		Black Pipe W		8 Ln. Ft.				
Bldg #5 Hse	by Club Hs	e Basement	11	-	X	Υ.	ellow Linoleum (L		175 Sq. Ft.				
Bldg #8 V	Vhite House	Kitchen	ͰͰ	-	X	-	Edge Flashi		150 Sq. Ft.				
Bldg #12 Gre	en House (	Garage Roof	부	-	1^								
			井井										
	1141 - 1 - 11-	lor		IN	JDEP V	Naste	Cubic Yards	Name of Reg	istered Landfill				
Name of Registe	red waste na	iulei		Н	auler II		of Waste	Salem Cour	oty Landfill				
Bull Waste & F	Recycling, la	nc.		2	1435		Disposal Date	City, State	ity Landini		*		
City, State							6-29-17	Alloway To	wnship, NJ				
Berlin, NJ		<u> </u>			"11 -			1.112.1131.10		Date			
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Theodore S. B	Budzynski				reside	ent	1 1 0						
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Date of Notification (	03/17/17			Brow	nmill, L	ng Owner/Ope LC	erator (2)		MAR	2 7	2017	
Agencies Notified	Notification				Address Cedar	Bridge Ave	nue - Sui	te 1	IN ALL	- 1	2017	
(X) EPA ( ) DEP (X) DOL	( X ) Initial I ( ) Amende Amendr	ed	ion	City, S	State, Zip			l be	SBESTO LIC	S CO ENSI		JL 8
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					ITY INFO	RMATION						8
Name of Facility Who Browertown Shoppin		t is Taki	ing Place	(3)			Type of F	1500000				
Street Address 2695 County Road 5	516						() Subch (X) Othe	napter 8 (other er (i.e. private 8 es, etc.			iilding	ıs,
City (5) Old Bridge Township	)						Square F		Floors	Bldg	. Age	
County (6) Middlesex County				County USE C		) (STATE	Current U	Jse (Prior if bei	ng demo	lished)		
Name of Monitoring	Firm Hired by	Bldg. O	wner	ASCM	No.	Name of 0	Contractor (	9)				
(8) EMWA						CID CONS	STRUCTIO	N SERVICES,	LLC			
Street Address 100 Misty Lane				*		Street Add						
City, State, Zip Code Parsippany, NJ 0705							, Zip Code					
Project Manager for Kevin S		m Te	elephone			Telephone	Number		License 01191		er	
Scheduled Start Date		S		(1) 923-71 Comple	tion Date	(973)685-	9791 DSHA Moni	tor	0.101			
		1	1)	1/30/201		Testor Te						
						Street Add	dress					
Occupancy Status During Abatement (Check only one (X) Facility Closed/Vacated During Entire Period of Al ( ) Abatement Performed Outside of Normal Facility I ( ) Other – Describe:					ent	City, State	kson Avenu , Zip Code nd City, NY					
Source of Work (Che ( ) $\geq$ 3 sf or $\geq$ 3 lf (X) $\geq$ 160 sf or $\geq$ 260	51 3	(X	() Renova ) Demolit			( ) Mir ( ) Gio	ni-Enclosure ove bag Pro				re	
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		Yes	No	N/A				200.05			O	
Rear-Room #2				X	VAT & I	Viastic		200 SF	×	+		
Name of Reg. Waste Cid Construction Ser		NJD # 32	EP Wast 2905	e Haulei	r ID Cu	ibic Yards of NBD	vvasic	ame of Reg. La				
City, State Garfield, NJ					Di:	sposal Date	Ci	ty, State elville, NY				
Completed by Roque G Schipilliti	Title Project N	Manage	r		Signat	ure Bress	Alcher	Selva	Date	03/17/	17	

Ck # 3181

Date of Notification (1)					Name	of Buildin	a Ow	ner/Operato	r (	2)	0,0				
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Agencies Notified			_				-					EC	E	1	$\mathbb{V}\parallel$
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☑ DOLWD		d				State, Zip (	-	58	e, I	Lower Level		1110	0 -		
☑ DHSS	Amendm	ent #2	2-3/20	117							II L	MAR	2	1 2	017
DCA	☐ Emergen		cluding			tsburgh, e of Contac		15212			Telephone Nu	mah a r			
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Name of Monitoring Firm			)wner (	8)	ASCM	No.	1			nt Contractor (9)					
USA Environmenta	i wanageme	ent					-		N.	/IRONMENTAL	, INC.				
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	toring Firm						- Carren	ephone No.	40		License No.				-
Mark Jenkins		S - 1 1	1.10					15-788-604			00509				
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≥160 sf or ≥260 lf										Procedure					
2007								☐ Non-E	xer	npted (*) and Non-	-Friable Proce	dure			
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(10)			Yes	No	1 10000000		Oti	ner miscenar	100	,43)				te	
Boiler room						Floor ti	le ar	nd mastic			50 SF				
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<sup>\*</sup> Do not use this form for asbestos licensure exempted activities.

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City, State, Zip Code					City, State, Zip C						
Philadelphia, PA 19153					BRISTOL, PA	19007					
Project Manager for Monitoring Firm		Te	elephor	ne No.	Telephone No.		License No.				
Mark Jenkins			215-3	65-5810	215-788-6040	)	00509				
Start Date (10)	Scheduled	Comp	letion i	Date (11)	Name of OSHA M	Nonitor					
3 / 13 / 17	3	1_	17_ /	17_	BRISTOL EN	VIRONMENTAL	, INC.				
Occupancy Status During Abatement (	Check on	v one)	-		Street Address						
☐ Facility Closed/Vacated During Enti			ement		1123 BEAVE	R STREET					
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scope of vvork (Check all that apply)						ainment with Nega	tive Pressure				
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:120) Name of Building Owner / Operator (2) MAR 27 New Jersey Institute of Technology ate of Notification (1) 03-21-2017 University Heights-323 Dr. Martin Luther King Jr. Blvd Jencies Notified

EPA
DEP
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DCA Type Hutification ASBESTOS CONTROL & LICENSING City, State & Zip Code Telephone Number Newark, NJ 07102-1982 Initial Amended Name of Contact Emergency Joseph F. Tartaglia Cancellation FACILITY INFORMATION Type of Facility (4) lame of Facility Where Abatement is Taking Place (3) School (K-12) New Jersey Institute of Technology-Faculty Hall Building 32 Ci N Z ON NON PAN 0 S

of Facility Where Abatement is Taking F	acc (o)			School (K-12)	ou - than K	12)				1	
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EPA Type Natification	Birest Address	Use of Technology	LICEN:	710 mm /					
EPA  DEP  DOL  DOH  DOA  Emergency	University Mainta	. 022							
M DOL Amended	City, State & Zip	Code Code	a Jr. Blvd						
DEP Initial Amended Emergency Cancellation	Newark, NJ 0740	2 4800	WAIVER APP	BOYER					
and all (a)	Joseph F. Terlani	ia		'ROYED_					
Name of Facility Where Absternent is Taldring May Jersey Institute of Technology Faculty			Telephone	umber					
New Jersey Institute of Technology-Faculty Street Address	g Place (3)	ORMATION							
University Heights	nall Sulding	Type of Facility (4)  School (K-12)							
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City (5) Newark, NJ 07102 County (B)		Square Feet   2 cm	r than K-12) commercial buildings, homes, a Floors	1					
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Name of Monitoring Firm Hired by Building Comega Environmental			is basement 45						
Omega Environmenta:	Wher (8) ASCM No.	Alema of Alectanology	3 30110161160}						
Street Address 280 Huyler Street		Name of Abatement Con Resource Management (	ractor (9)						
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Project Manager for Monitoring Firm Alax Pallets	Talombana	Trenton, N. 19910							
Schoolulad Ch	Telephone Number 201-489-8700	I BISDAORD Marmhan	II appear M						
	Omninian D.	1009-974-427D							
GCGUGRAM GFOLING D.	U.3-11-21197	Name of OSHA Monitor J&S Environmental Lebon Street Address	91108						
a Abelement Poder	Period of Abatement		mas, Inc.						
	Houre:	2393 Route 22 West City, State & Zip Code							
Scope of Work (Check all that apply)		Union, NJ 07083							
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)								EG	E							
Date of Notification (1) 3/21/17					uilding Ow erricksor						MAR	2 7	20	17	Constitution of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of th	
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DCA	Cancellation				TY INFOR	MATION	V		entrant and a pro-				-			
Name of Facility Where	Abatement is Takin	g Place (3)		I AUILI	TT IIII OIL		· T	Туре	of Facility (4	-)						
Chris Derrickson I									School (K-12							
Street Address									Subchapter S Other (i.e. pr	8 (Othe rivate 8	r than K-12 commercia	) ıl buildi	ngs, h	nomes	s,	
						2007 1000		△ (	etc.)							
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Ocean City NJ			10	accepta Co	ada /7\				nt Use (Prio		no demolish					
County (6)				ounty Co	ode (/) SE ONLY) .		0.0	Hou		i ii beli	ig demons.	00)				
Cape May  Name of Monitoring Firm	m Hirad by Building	Owner (8)	$\dashv$	ASCM	No.	1			tement Con	tractor	(9)					
N/A	If I lifed by building	Owner (o)		, 100	227	- 1	Perna									
Street Address						5	Street A	Addres	S							
Street Address							PO Box 329									
City, State, Zip Code						- 1	City, State, Zip Code West Berlin NJ 08091									
Project Manager for Monitoring Firm Telephone No.							Telephone No. License No.									
Project Manager for Monitoring Firm				The part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the part of the pa			856-753-9800 00727									
Start Date (10) Scheduled C				oletion D	ate (11)	1	Name of OSHA Monitor									
3/30/17		4/5/17					Same								$\dashv$	
Occupancy Status Duri							Street A	Addre	SS	ş.						
Facility Closed/Va Abatement Perfor Other – Describe:	cated During Entire med Outside of Non	Period of Ab mal Facility I	ateme lours	ent		_	City, St	tate, Z	ip Code							
Scope of Work (Check	All That Apply)					-										
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Demolition Mini-Enclo							ni-Enclosur	nment with Negative Pressure sure Procedure pted (*) and Non-Friable Procedure				e		
									Abatement							
Is				on		Desi	cription	of					Ту	ре		
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)		Used Soleiy by Maintenance/ Custodial Staff? (12)			Asbesto (i.e. t	Asbestos Containing Material (ACN (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)			lation,	Arnount (Specify SF or LF)		Removal	Repair	Encapsulate	Enclosure	
	Yes	No	N/A										0			
exterior siding				х		exterior s				2400 SF		х				
Name of Registered Waste Hauler United Roll Off			Н	NJDEP Waste Hauler ID No.  22459  Cubic Ya of Waste						f Registered Landfill ).W.S.						
City, State				00		de affe	al Date	9	City, Sta							
Elm NJ						4//5/1	17		Morris	sville F	PA 19067					
Completed by		Title				S	ignatur	e	5,00 <u>0</u> ,000			ate	7			
Anthony T Perna President						1						3/21/17				

Print Form

### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

		N			OF ASBES to NJAC 8:				Clas	1	16	7	15	-		
Date of Notification (1)		Name of Building Owner/Operator (2)														
3/21/17		John DiRezze														
Agencies Notified T	Street Address															
□ EPA 🔯	Initial							1 f A	по	7 0	247					
DEP I	Amended			City, Sta	141	WA	17 6	7-21	111							
X DOL	Amendment		_	Rocka	way NJ (	07866										
X DOH	] Emergency ( justification)	including		Name of	f Contact					Telephone Sumbertos CONTROL						
DOH DCA	Cancellation			John DiRezze SING												
				FACI	LITY INFOR	RMATION							TEX.102.1012.20	C. AD C WAR		
Name of Facility Where Aba	atement is Taking	Place (3	)					Type of	Facility (4)							
house									hool (K-12)							
Street Address				17.3 days 20.30						Other than K		ildina	n home	20		
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City (5)								Square		# of Floors		Bldg.	Age			
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County (6)				County Code (7) Current Use (Prior if being						f being demo	lished)					
Essex				(STATE L	USE ONLY)		-									
Name of Monitoring Firm Hi	red by Building (	Owner (8)		ASCN	I No.	N	ame	of Abater	ment Contra	actor (9)						
						A	ABS Environmental Services, LLC									
Street Address				Street Address												
				PO Box 483, 4 E G						Sate Drive						
City, State, Zip Code				City, State, Zip Code												
* * * * * * * * * * * * * * * * * * * *									NJ 07418	3						
Project Manager for Monitor	rina Firm			Telepho	ne No.	Company of the National Company	Telephone No.			License No.						
Troject Manager for Monitoring Firm							973-764-2276			703						
Start Date (10) Scheduled				noletion I	Date (11)	N	Name of OSHA Monitor									
3/30/17	7															
Occupancy Status During A	batement (Chec	k Only Or	e)			St	treet	Address				-		107 4		
Facility Closed/Vacate     Abatement Performed																
Other - Describe:						_	,									
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≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		ovation Full Containment with Negative Pressure Mini-Enclosure  Glovebag Procedure														
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Location of Used S						100	escription of			0.000		T	Ť			
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boiler room				X	pipe		e insulation			22 LF	×		-			
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Freehold Cartage			1	5939	0.00693537	TBD	Meetern			n Berks Landfill						
City, State						Disposal										
Freehold, NJ						TBD			Birdsbord	PA						
Completed by		Title				Sign	nature	1			Date					
A. Scott Higgins		Pres	President					3/21/17								