H1472523310				tate/of New N OF ASBE to NJAC 8	STOS	ABATE			100 mm		C		Pr	rint
Date of Notification (1) 02/23/2019				of Building O Hauck)wner/C	perator	(2)		Til.		AR	4	2019	3
Agencies Notified Type Notification X				Address ate, Zip Cod wood, NJ		0				ASB	ESTOS	CO	V 700 100	, (
	(including		Name o	f Contact Hauck	0743				Tel	enhone N	umher			
Name of Facility Where Abatement is Taki	ing Place (3)	FACI	ILITY INFO	RMATI	ON	Typo	of Facility (4)					
House Street Address								School (K-1 Subchapter Other (i.e. petc.)	2) 8 (Oth	er than K- & comme	·12) ·cial buil	dings	, hom	es,
City (5) Ridgewood							Squar N/A	e Feet	# o N//	f Floors A		Bldg. /	Age	
County (6) Bergen				Code (7) USE ONLY)		_	Curre	nt Use (Pri	or if bei	ng demol	ished)			
Name of Monitoring Firm Hired by Building N/A	Owner (8)		ASCN	/I No.				ement Cor ement, In		(9)				
Street Address						Street /		s ren Aver	nue					
City, State, Zip Code						City, St Totov		p Code J 07512						
Project Manager for Monitoring Firm			Telephor	ne No.		Telepho 973-3				License 01311	No.			
Start Date (10) 03/05/2019	Schedul 03/06/2		npletion (Date (11)				A Monitor ement, In	C.					
Occupancy Status During Abatement (Che Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe: Occupied	Period of	Abaten	nent S		_	City, St	oseng ate, Zi	ren Aver	nue					
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	arrenness.	Renova Demolit				×	Min Glo	Containme i-Enclosure vebag Prod -Exempted	edure	-			Φ.	
Location of	1000	Locati	3009000		D		200.00				1010110	Abate	ement pe	t
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	d Sole intenar todial S (12)	nce/		s Conta nermal s surfac	cription aining Ma systems ling, VAT iiscelland	aterial insula r, or		(8	mount Specify or LF)	Remova	Repair	Encapsulate	Enclosure
Basement	Yes	No X	N/A		Dino	Insulat	ion		11	30 LF			ate	.e
Basement					ripe	IIISulat	.1011		13	DU LF	X			
Name of Registered Waste Hauler D&S Abatement, Inc.		Н	JDEP Wauler ID	No.	Cubic \ of Wast			Name of F			ill	<u> </u>		
City, State Fotowa, NJ					Disposa TBD	al Date		City, State Morrisvi		Α				
Completed by Oliver Hegedis	Title Proje	ct Ma	nager		Sign	gnature	1	A			ate	2019		



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Date of Notification (1)	9 .		Iva			VAZQ		同图	GE		\sqrt{I}	
Agency Notified	Type Notification		Str		ddress			- WITT	-		***************************************	-
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EPA	☐ Initial ☐ Amended		City	y, Sta	te, Zip C	ode ·		100	AR -	4 20	119	
DEP DOL	Amendment #				1,4	BURN.	NJ	Proc. Speed				
	☐ Emergency (includi	ng	Na		f Contact			Telephone Numb	per		may	-
DOH DCA	justification) □ Cancellation	34	de	RC	ARY 1	MUYAL		1	و وال الموجو	क्टाः .		
5011						RMATION	-		-		-	
Name of Facility Where A	Abatement is Taking Pk	rice (3)			•		Type of Facility	(4)				
MR. 50	SE VAZQ	いきフ	9				School (K-12	A				
	DE ONE G			-1-	4		☐ Subchapter 8	(Other than K-12)				
Street Address				-		*		ivate & commercial	building	s,		
					d	<i>,,</i> ,, ,	homes, etc.) Square Feet	# of Floors	Bldg. A	Age	2000	-
City (5)						ur į	7.7	1	15	1 45		
Mile	LBURN				- 50		2200.			-10	9	_
County (6)						(STATE USE	Current Use (P	rior if being demolis	3 (ed)			
ESS	ε γ · · ·		Or	NLY)	•	+						
Name of Monitoring Firm	Hired by Building Own	er AS	SCM No	0.		Name of Abaten	nent Contractor (S	9)				
(8)						Best Re	moval In	С				_
Street Address						Street Address						
			5			450 Sou	th River	St				
City, State, Zip Code						City, State, Zip	Code					
ony, oute, are con-						Hackens	ack, N.J	. 07601				
Project Manager for Mor	altoring Firm	Tele	phone	No.		Telephone No.		License No.				
Project manager for mor						201-329	-7444 -	00388				
Start Date (10)	Scheduled C	Completion	n Date	(11)		Name of OSHA	Monitor					
3/7/19	3/12	10		(/		Omega	Environm	ental				
Occupancy Status Durin						Street Address						
7			- 50 	7.1		280 H	uyler St					
☐ Facility Closed/Vacate	ed During Entire Period	of Abaten	nent			City, State, Zip		1.		pi .		_
Abatement Performed Other – Describe:	3:00 AMTO TE	OD M	5	-				,N.J. 07	606			
Scope of Work (Check a				-				•				
	in that tapping		-	6	ovation		Containment with -Enclosure	Negative Pressur	е			
D ≥ 3 sf or ≥ 3 lf D2 ≥ 160 sf or ≥ 260 lf			-		nolition	Æ Glov	rebag Procedure		.55			
12 2 160 St 01 2 200 H			10000			□ Non	-Exempted (*) an	d Non-Friable Proc	edure	Abat	ame	-
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	ests of		mally		:	Description	of					
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TO BE A	BATED	Çu	stodia!		(i.e	., thermal system surfacing, VA		(Specify SF or LF)		en le	Bota	
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24001 h	EDMOOKS			V	KLA	STER MA	TENIAL	1084	SF	12	+	_
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		1										
Name of Registered Wa	aste Hauler	NJD	DEP W	aste l	Hauler	Cubic Yards of	Name of Reg	istered Landfill	1953 E			
Best Remo		IDN	ło.			Waste	Minerv	a Enterpr	ises	, I	LC	3
DOUG ROM			171	.09		12e7.	2			450		2
City, State						Disposal Date	City, State	30				
	ck , N.J. 0	7601				3/13/19	/ Wayne	sburg, Oh	446	880		_
Completed by	Title					Signature /	1		Date	1		
J.Maiorano	Est	timat	or			IVM	مرعمص	2	4	25/	J	
J.Malorano				for a	chacter li	censure exempte	-			1	.:	•

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

2019-35 (Pursuant to NJAC 8:60-7 and 12:120-7) B & G proj. #: Date of Notification (1) Name of Building Owner/Operator (2) -4201910 12 1/11 14 1/11 19 1 Dara Winston Agencies Notified Type Notification Street Address ☐ EPA ASBESTOS CON X Initial ☐ DEP City, State, Zip Code Amendment X DOL East Brunswick, NJ 08816 Telephone Number Name of Contact X DOH Cancellation Dara Winston ☐ DCA **FACILITY INFORMATION** Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) Dara Winston Subchapter 8 (Other than K-12) Other (Private/Commercial Street Address Bldgs./Homes, etc. Bldg. Age Square Feet # of Floors County (6) County Code (7) City (5) (State use only) Current Use (Prior if being demolished) East Brunswick, NJ 08816 Middlesex residential Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. B & G Restoration, Inc. Street Address Street Address 105 Ryerson Road City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035 Telephone Number License Number Project Manager for Monitoring Firm Phone Number (973)696-6869 00378 Name of OSHA Monitor Sched. Completion Date (11) Scheduled Start Date (10) B & G Restoration, Inc. 02/27/2019 02/25/2019 Street Address 105 Ryerson Road Occupancy Status During Abatement (Check only one) Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: LincolnPark, NJ 07035 Other-Describe: Scope of Work (check all that apply) wrap & cut Demolition Full Containment w/negative pressure ▼ Renovation Non-friable procedure ✗ Mini-enclosure \times >3 sf or >3 if ≥160 sf or ≥260 lf Is location normally used solely E Location of e e n by maintenance/custodial Amount asbestos-containing Description of asbestos-containing m p staff(12) C (Specify SF or material to be material (ACM) 0 2 abated in facility (13) Yes No N/A V p X 44 LF family room, laundry room transite pipe bathroom & office Registered Waste Hauler Cubic Yards of Waste Name of Registered Landfill NJDEP Hauler ID# B & G Restoration, Inc. 19563 Grand Central Landfill Disposal Date City, State City, State Lincoln Park, NJ 02/27/2019 Pen Argyl, PA Signature Completed by (Print or Type) Title Gordana Luna 02/14/2019 Gordana Luna Secretary/Treasurer

no cy			NOT		ATIO	State of N N OF AS nt to NJ	BES	STO	SABAT	TEMENT 6)) <u>E</u> (G E		\mathbb{V}	E	n
Date of Notification (1)		1/1 755	000000		Name	e of Buildir	ng Ov	vner/C	perator (2)	1	1				-	
02 /	25 /	19				wnship o						l M	AR ·	- 4	2019		
Agencies Notified	Type Notific	ation			Stree	t Address						-				-	-
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□ DOLWD						State, Zip						MODE	Litt				
□ DOH	Amendm		7.		1 22.0	ptford, N				-	and allows	******	ATTACA METATOR	CARDO AND SAN THE		the state of making	-
☐ DCA (NJAC 5:23-8)	☐ Emerger justificati		cluding	g		of Contac					TTe	elephone	Numb	oor			_
(140/10/3.25-0)	☐ Cancella					nald Ban						856-686					
	1			-	FΔ	CILITY II	JEOI	BMV.	TION								ECST!
Name of Facility Where A	Abatement is	Taking	Place	(3)		OILITT II	11 01	T TIME	11014	Type of Facility	(4)					2-167	
Deptford Municipal		•								School (K-1							
Street Address									-	☐ Subchapter	8 (0						
1011 Cooper Street	t									Other (i.e., phomes, etc.		e and co	mmer	cial bu	ilding	s,	
City (5)										Square Feet	#	of Floor	S	Blo	dg. A	ge	
Deptford										50,000		2		1	96		
County (6)					Cou	nty Code (7)(STA	ATE US	E ONLY)	Current Use (P	rior if	being de	emolis	hed)			
Gloucester				-						Municipal I	Build	ding					
Name of Monitoring Firm					ASCM	No.				ent Contractor (9	,						
Management & Env	riro. Consul	ting S	Servi	ces			5	Shade	e Enviro	onmental, LLC	;						
Street Address									ddress								
PO Box 341									utler Av								
City, State, Zip Code	-4-						1 6	70 - see .	te, Zip Co								
Chesterfield, NJ 08		West St.		T= .						, NJ 08052				Landa S			
Project Manager for Moni Bill Weisgarber	itoring Firm				phone 09-29 8	No. 3-4070	1		ne No. 55-0099		L	icense N 00842	lo.				
Start Date (10)		Schedu	uled C	omple	tion Da	ite (11)	Nai	me of	OSHA M	lonitor							
03 /06 /	19	_ 03	3_/	08	3_ /	19	E	EMSL	Analyti	ical, Inc.							
Occupancy Status During	Abatement (Check	only o	one)			Stre	eet Ac	idress								
□ Facility Closed/Vacate							2	200 R	oute 13	0 North							
Abatement Performed							City	y, Stat	e, Zip Co	ode							
Time of Abatement: _	AIVI	PIV	<i>\\</i>	PIVI-		AM	C	inna	minson	, NJ 08077							
Scope of Work (Check all	that apply)																
			⊠ Re	novat	ion				Full Cont Mini-Encl	ainment with Ne	gativ	e Pressu	ге				
≥160 sf or ≥260 lf				molitic					Glovebag	Procedure							
			lo.	Loop	lion	T		\boxtimes	Non-Exer	mpted (*) and No	on-Fr	iable Pro	cedur	T		4.75	
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Asbestos-Containing I	Material (ACM	1)	Use	d Sole	ely by	Asbe	stos			terial (ACM)		Amoun	t	Rer	Repair	Enc	Enclosure
TO BE ABA IN Facilit					Staff?	(i.e			systems i	nsulation,		(Specify		Removal	air	aps	los
(13)	ıy	1		(12)					iscellane			SF or LF	-)	a		Encapsulate	īe
* 19			Yes	No	N/A					-xxxx						Œ.	
2 nd Floor Storage Roo	om					Floor T	ile a	nd M	astic			318 SF	•	\boxtimes			
Name of Registered Wast	te Hauler	-		1000	JDEP \	1 70 50 50 50 50 50	100000000000000000000000000000000000000		rds of	Name of Regis	stere	d Landfill		1			
Freehold Cartage				-	lauler II 15939		Wa:			Fairless L	andf	ill					
City, State							-	posal	Date	City, State							
Freehold, NJ							0	3/08/	2019	Morrisville	, PA						
Completed By (Print or Ty	rpe)	Title						Sign	ature				Dat	е			
Christina Lynch		Vio	ce Pr	eside	nt of (Operation	ns	C	mete	D/			2	125	10	7	

B & G proj. #: 2019-35

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

	40			AMENDED	extra	a footages ****	Check	k # 9164				_
Date of Notification (1)		Name of B	uilding Ow	ner/Operator (2	2)							
0 12 1/12 5 1/11 19		Dara W		,	,		[B]	EG		1 W		E
Agencies Notified Type Notific	ation	Street Addi	ress					5 6		U	ط	+H
LI EPA I Initia												
☐ DEP		City, State,	Zip Code					MAR	- 1	201	9	
X DOL X Amen	idment			k, NJ 08816								
X DOH	- 11	Name of Co	ntact				Telepho	ne Numbe	200	101:	0	de nea
☐ DCA ☐ Cance	ellation	Dara V	Vinston				11	Liu	ENSI			
			FAC	CILITY INFORM	MATIC	DN .			-		-	
Name of facility where abatemen	t is taking p	place (3)					Type of Facility	(4)				
Dara Winston								ol (K - 12)				
Street Address		-			_			napter 8 (C			-12)	
							X Other Bldgs.	(Private/C	omme tc.	ercial		
City (5)	I Cou	unty (6)					Square Feet	# of Floo	rs	BI	dg. A	ge
		500000			10/07/27	ounty Code (7) tate use only)						
East Brunswick, NJ 0881		iddlesex			(0.	allo use offiny)	Current Use (Presidential	rior if bein	g den	nolishe	∌d)	
Name of Monitoring Firm Hired by	Bldg. Owr	ner (8)		ASCM No.		Name of Abatement (
Street Address						B & G Restorati	on, Inc.					
Street Address						Street Address 105 Ryerson R	oad					
City, State, Zip Code					_	City, State, Zip Code	oau					
					-	Lincoln Park, N	NJ 07035					
Project Manager for Monitoring Fire	m	Ph	one Numb	per		Telephone Number		License	Numb	er		
						(973)696-6869		00	378			
Scheduled Start Date (10)	Sche	d. Completion	on Date (1	1)		Name of OSHA Monit						
02/25/2019		01/2019	*			B & G Restorati	on, inc.					
Occupancy Status During Abateme						105 Ryerson Ro	oad					
Facility closed/vacated during Abatement performed outside	g entire per	iod of abate	ment.			City, State, Zip Code					_	
Describe:	e or normal	facility nour	'S-		_							
Other-Describe:					-	LincolnPark, NJ	07035					
Scope of Work (check all that app				V	_	wrap & cut						
			W	不		Full Containment w/nega	ative pressure [Gloveb	ag pro	ocedu	re	
	≥160 sf or		1			Mini-enclosure		Non-fri	able p	roced	ure	
Location of asbestos-containing	by maint	n normally u enance/cust		1					R	R	E n	E
material to be	staff(12)			material (A	n of a ACM)	sbestos-containing	Amount (Specify S	For	m	р	C	n
abated in facility (13)	Yes	No	N/A				LF)	X	o v	a i	a p	Ĺ
amily room, laundry room			X	transite pip	е		70 LF ***	1	e X		П	
oathroom & office			×			11		1.5	H	計	H	一
amily room & office			X	VAT & mas	stic	X	280 SF **	**	X	計		
1.0						\ i.e		- (
Registered Waste Hauler	INUE	EP Hauler II	L 10	ubic Vorde of 14	loct-	IN. (5						
B & G Restoration, Inc.		19563)# CI	ubic Yards of W 6	aste	Name of Registered L Grand Central L	andfill andfill					
City, State Lincoln Park, NJ			Disposal D	ate 3/01/2019		City, State						
Completed by (Print or Type)	Title			Signature	_	Pen Argyl, PA		In:			Y	
Gordana Luna	10000	ry/Treasu	rer	Signaturo	(Gordana Luna		Date 02/25/	2019	9		
						2000				70		-

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Date of Notification (1)				T N	ame of	Building	Owner/	Operator (2	2)				204	n	
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				-	yle La treet A										\pm
Agencies Notified	Type Notificatio	111		5	lieet A	udiess					ASBESTO	s co	NT	. 6	
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☑ DHSS	Amendment	#				te, Zip Co									
□ DCA	☐ Emergency		ding			n, NJ 079	928				T 1				_
(NJAC 5:23-8)	justification)		- F	N	ame of	Contact					Telephone Numbe	1			
	Cancellation	1		K	yle La	nd					11.723				_
					FACI	LITY INF	ORM	ATION							
Name of Facility Where	Abatement is Tak	ing Pl	ace (3	3)					Ту	pe of Facility (4)				
										School (K-12)					
Private house Street Address										Subchapter 8	(Other than K-1 2) ivate and commerci	al buile	dinac		
Street Address									10	homes, etc.)		ar Duin	211190	,	
O:L- (E)									S	quare Feet	# of Floors	Bldg	g. Ag	е	
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Chatham, NJ 07928					Count	Code (7) (STATE	LISE ONLY)	10	urrent Use (Pri	or if being demolish	ed)	7/10		-
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Morris								C 01 1	L	0 1 1 (0)					
Name of Monitoring Fire	m Hired by Buildir	ng Ow	ner (8) A	SCM N	0.			ent	Contractor (9)					
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City, State, Zip Code							City, S	State, Zip C	ode	9					
							Wayn	e, NJ 074	70						
Project Manager for Mo	onitoring Firm			Telep	hone N	lo.	Telep	hone No.			License No.				
							973-6	38-1777			01127				
Start Date (10)	Sc	chedul	ed Co	mpleti	on Date	e (11)	Name	of OSHA	Mor	nitor				Southern	10110000
03 / 08	E212320						Carrie	aviaion C	one	sultants,Inc					
								t Address	0115	sunants, me			-		
Occupancy Status Duri					ent				. D	and Dida #	25E				
Abatement Perform	ed Outside of No	mai F	acility	Hours	- Desc	cribe		wagaraw State, Zip C		oad, Bldg .#	33E				
Time of Abatement:	AM-	PM/	uomity.	PM_	1	AM.	15								
					western vie		Fair L	awn, NJ			nation with negative	nress	ure		
Scope of Work (Check	all that apply)						-	Eull Co	up e ntai	inment with Ne	gative Pressure	pross	uio		
M >3 sf or >3 lf		Ď	Rei	novatio	n		12	7 Mini En	cla	eura		-	90022		
>3 sf or >3 lf > 160 sf or >260 lf		Ĺ		molitio			2	Gloveb	ag l	Procedure L	Tent with Negative on-Friable Procedur	Press	ure		
		-unnamp					<u> </u>	1 NON-EX	CIT	pieu () and re	The residence of the country of the	CONTRACTOR DESCRIPTION OF THE PERSON OF THE	o com	ent Ty	VDQ.
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Locati Asbestos-Containin				d Sole	*	Ashe		Description ontaining M		rial (ACM)	Amount	Remova	Repair	Encapsulate	Enclosure
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IN Fa			Cust	odial 3 (12)	stam?			rfacing, VA			SIF or LF)	12		ulat	re
(13	3)	+			T	1	Oltra	er miscellar	ieoi	us)			ĺ	e	
			Yes	No	N/A						20015	177			
Basement			Ш		\boxtimes	Pipe in:	sulatio	1			300 LF		Ш	Ш	브
Basement					\boxtimes	Water ta	ank ins	sulation			140 SF	\boxtimes			
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Name of Registered V	Vaste Hauler			NJE	EP Waste	e Hauler ID No	. Cubic	c Yards of Wa	aste	Name of Reg	istered Landfill				
Gr Tech LLC				1	003378	35	1	BD		T.R.R.F. Inc			90.50.50	1000	
City. State					. 555 11		-	sal Date		City, State					
							17	BD		Tullytown, l	PΑ				
Wayne, NJ 07470	-T	T:41-					-i /	Signature	71	Tanytown,		ate			
Completed By (Print o	r (ype)	Title						orginature)	10	Ac Wena	1		0		
N.Jevtic		Own	ier					//	100	50 00 100	- 02	/27/1	9		

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Date of Notification (1) 2/26/2019			Nam	e of Build	ling Owner Solution	Operato	r (2)		110			_	#
Agencies Notified Type Notification	n		Stree	et Addres	s			LL	MAR	- 4	201	9	11.
EPA Initial DEP	pi				George	Post R	oad	1000	7070	determine			1_
DOL Amendme	nt #1		Ford	State, Zip	Code 08863			ASBI	ESTO: LICI	S CO		. 0	
DOH Emergenc		ing		e of Conta				Tolonk	1	- L	h		
DCA Cancellation				Daniel				732-3	none N 306-4		r.		
Name of Facility Where Abatement is Tak	ing Place	a (3)	FA	CILITY	NFORMAT	TION							
LANXESS Solutions US Inc.		0 (0)					Type of Facilit						
Street Address 1020 Kings George Post Road							X Other (i.e	<-12) ter 8 (Other ti e. private & co	han K- ommer	12) cial bu	uilding	s, ho	mes,
City (5) Fords							etc.) Square Feet	# of Flo		T	Bldg.		
County (6) Middlesex			County (STATE	y Code (7 E USE ON	7) 'LY)		Current Use (F	Prior if being o	demolis	shed)			
Name of Monitoring Firm Hired by Building	Owner	(8)		CM No.		Name	boiler house of Abatement C	e piping, pr	roces	sing	plan	t & ta	anks
Emilcott Associates, Inc. Street Address						Stryk	er Demolition	ontractor (9) n & Enviror	nmen	tal S	ervic	es, l	LLC
190 Park Avenue						Street /	Address			-			
City, State, Zip Code							Old Eagle Sc ate, Zip Code	nooi Road	, SIE	910			
Morristown, NJ 07960 Project Manager for Monitoring Firm						Wayn	e, PA 19087	7					
David Tomsey				one No. 38-111	0	Telepho	one No. 81-7428		ense N	Vo.			
Start Date (10)	Schedi	uled C	ompletion		1000		f OSHA Monito		286			-	
2/18/2019	5/3/20	019					er Demolition		ment	al Se	ervic	es, L	LC
Occupancy Status During Abatement (Chec				0.000 - 1.00-0-1.100		Street A	ddress						
Abatement Performed Outside of Norm	Period of nal Facili	f Abate ty Hou	ement ırs		}		ld Eagle Sch ite, Zip Code	nool Road,	STE	910			
							e, PA 19087						
Scope of Work (Check All That Apply)	_								***************************************				
≥3 sf or ≥3 if ≥160 sf or ≥260 if	×	Renov Demo				×	Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	e ocedure					
	- 1	s Loca	0.00000					7 / 41.0 / 10.	THE	10110		emen	t
Location of Asbestos-Containing Material (ACM)	Us	Norma ed Sol	ely by	Asha	Des	cription o	f				Ту	ре	
TO BE ABATED In Facility (13)		aintena stodial (12)	Staff?	(i.e	thermal s: surfaci	ining Mai systems ir ing, VAT, iscellaned	or	Amoun (Specif SF or LF	у	Removal	Repair	Encapsulate	Enclosure
"0 =	Yes	No	N/A							/al	Ξ.	ilate	ure
#6 Fuel Line	-	X		ı	Pipe Insu	ulation (TSI)	197 LF	=	X			
Door Gasket on package boiler		X			Othe	er Misc.		19 LF	W.	Х			
Name of Registered Waste Hauler													
		1	IJDEP Wi lauler ID I	No.	Cubic Yaste			Registered La					
Horwith Trucks, Inc.		S	W-1998	3	35		Cumber	land Coun	ty La	ndfill			
						10		*****	STATE OF THE STATE				
City, State Northampton, PA					3/8/201		City, State					-	
Horwith Trucks, Inc. City, State Northampton, PA Completed by Mark Klotzbach	Title Vice I				3/8/201			e nsburg, PA	Date	2			

CK#1179	N	(Pu	rsuant to	te of New OF ASBES O NJAC 8:	60 and	2:120	j		D) _r	E C			\mathbb{V}	E	
Date of Notification (1) 02/26/2019			lame of l	Building O	wner/O	perator	(2)			3145	7	1	0040		
Agencies Notified Type Notification			Street Ad						11 (1)	MAt	1 -	- 4	2019		1.0/
								}		na componente contra	-valutura	madrio or tax	newson and the	Accounted to	
DEP Amended		0.00		e, Zip Cod					-	ASBES	TOS JOE	COI	11:	T. P.	
DOL Amendment #_ Emergency (inc	ludina		100000000000000000000000000000000000000	field, NJ	0700	3		la .		NO CHARGOLUS MALALA	n-mouse	Parader.			
DOH justification)		1	Name of Debbie						Tele	phone N	lumb	er			
DCA Cancellation				ITY INFO	RMATIO	ON									-
Name of Facility Where Abatement is Taking P	lace (3)		I AOIL		CHIP CT IS		Туре	e of Facility (4	1)						
Private home								School (K-1							
Street Address							×	Subchapter Other (i.e. p				buildi	ngs, l	nomes	3,
								etc.)							
City (5) Bloomfield							Squ	are Feet	# 01	Floors		BIG	lg. Ag	je	
County (6)			County C	ode (7)			Curr	ent Use (Pric	r if beir	na demol	ishe	d)			-
Essex				SE ONLY)								,			
Name of Monitoring Firm Hired by Building Ow	ner (8)		ASCM	No.		Name	of Ab	atement Con	tractor	(9)					
						Ren	nova	Safety LL	С						
Street Address						Street									
O'the Otate 7'm On the								/ Ave Zip Code							_
City, State, Zip Code						5933		zip Code 1, NJ 0750:	2						
Project Manager for Monitoring Firm			Telephon	ne No.		Telepl	400000	SECURIORS AND ASSESS		License	No.				-
,								-8711		01332	2				
			pletion D	Date (11)				SHA Monitor							
	03/12/2			1007			ne as								_
Occupancy Status During Abatement (Check C			May			Street	Adar	ess							
Facility Closed/Vacated During Entire Per Abatement Performed Outside of Normal Other – Describe: 8:00 am - 4:30 pm						City, S	State,	Zip Code							
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 lf	X R	enova	tion			1	F	ull Containm	ent with	Negativ	e Pr	essur	е		
≥160 sf or ≥260 lf		emolit	ion					fini-Enclosure Blovebag Prod							
								lon-Exempte		d Non-Fr	riable				
		Locati											Abate Ty	ment pe	
Location of Asbestos-Containing Material (ACM)		lormal d Sole		Achast		scription		ial (ACM)	Δ	mount					
TO BE ABATED		intenar			thermal	system	ns insi	ulation,	(5	Specify		Re	Ŗ	Encapsulate	Enc
In Facility (13)	Ouo	(12)	zan.			cing, V <i>I</i> niscella			SI	or LF)		Removal	Repair	psul	Enclosure
N-7/	Yes	No	N/A					,				al	7	ate	е
Attic	100	140	X		Ve	rmicu	lite		60	00 SF		x		х	
					17701755	0-1-0-010-1100	55,000,500								
Name of Registered Waste Hauler		I	JDEP W	/aste	Cubic	Yards		Name of	Registe	ered Lan	dfill				
Removal Safety LLC		H	lauler ID	No.	of Wa			Fairles	- 5						
City, State			03700	/	3 Dispo	sal Date	е.	City, Sta					17.5		
Paterson, NJ					TBD		5	Morris		PA					
Completed by	Title				5	Signatui	re	1/1	,		Dat	te			
Lasko Veskov	Pres	ident			4	(00)	صر	les la	~		02	2/26/	2019)	

405803	N	IOTIFI (P	CATION	of Ne OF ASB to NJAC	ESTOS	ABATE	MENT	Г	D	E C	E			ntF
Date of Notification (1) 2/28/2019			Name of	Building	Owner/0	Operator Travn		v2		— MAR	- /	20	9	
Agencies Notified Type Notification		-	Street A	ddress		Havii	ICKU	va		ASBEST	ros c	ON	-	1
EPA	#		City, Sta	te, Zip Co		nwood	, NJ	07023		L	ICENS	1		4
Emergency (DOH justification)	including		Name of	Contact Katerin	3135-03				Tele	ephone Nu	umber	1+1		
			FACII	LITY INFO	ORMATI	ION								
Name of Facility Where Abatement is Taking Residental	Place (3))					Туре	e of Facility (1000					
Street Address							×	School (K-1 Subchapter Other (i.e. petc.)	8 (Othe			dings,	home	es,
City (5) Fanwood, NJ 07023								are Feet 000	# of	Floors 2	E	81dg. <i>A</i> 85 +	-	
County (6) Union			County C	Code (7) JSE ONLY,)		Curr	rent Use (Pri	or if beir	ng demolis	shed)			
Name of Monitoring Firm Hired by Building C MECS	Owner (8)		ASCM	l No.				atement Cor Environme			, Inc.			
Street Address PO Box 341						Street PO E								
City, State, Zip Code Chesterfield, NJ 0	8515							Zip Code n, NJ 0850)1					
Project Manager for Monitoring Firm Bill Weisgarber			Telephor 609 29	ne No. 98-4070)	Teleph 609				License 00493	No.			
Start Date (10) 3/11/2019	Schedule		npletion [/15/201			Name MEC		SHA Monitor						
Occupancy Status During Abatement (Check	c Only One	e)				Street		T (7.75)						
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other – Describe: 8 am to 4 pm					_	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	tate, 2	341 Zip Code eld, NJ 08	3515					
Scope of Work (Check All That Apply) X ≥3 sf or ≥3 if ≥160 sf or ≥260 if		enova emolit				××	Ft M	ull Containm ini-Enclosure lovebag Pro on-Exempte	ent with				re .	
Location of	1100	Locati			De	scription	of						ement /pe	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mai	d Sole ntenar odial S (12)	nce/		tos Cont thermal surfa		Materia s insu T, or		(S	mount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
Pagament	Yes	No	N/A	TL	ormal	Dine I	anul -	tion	-	70 If			te	(D
Basement	-	X	-	ın	ermal	Pipe Ir	isula	шоп		2	X	-		
Basement		X				VAT			13	50 sf	X			
Name of Registered Waste Hauler Stevens Environmental Services			JDEP W lauler ID 18292	No.	of Wa	Yards ste 3		Name of Fairles		red Landf fill	fill			
City, State Allentown, NJ					Dispos	sal Date 5/2019		City, Stat		Α				
Completed by Mahlon E. Stevens	Title Projec	ct Ma	anager			Signature	1	7	/		Date 2/28	3/201	9	

	CKSOU	OPA		(P	ursuant	to NJAC	8:60 an	d 12:12	(0)		17 17	- P	F	1	W?		
1 5	te of Notification (1) 28-19					of Building		7.75	0.000	NT TRUS	aT .			U			
		Notification			Street A	Address EAST J	FFFFR	SON	STRE	FT		MAR	4	20)19	100	
×	DEP X	nitial Amended Amendment #	3		City, Sta	ate, Zip Co	ode		01112	10	loues,		, to 1				-
×	DOH DOH	Emergency (ir ustification)			Name o	of Contact		1002			50000000	ephone f			e filosocial Politicos e		
X	DCA L C	Cancellation			AND SECTION	VOODIE		ION			30	1-998-	8286	0			
	me of Facility Where Abatem LISBURG CIRCLE SH				FAC	ILITY INF	ORMATI	ION	_	of Facility (4							
	eet Address	10111110	JEIVIE	-11						School (K-1. Subchapter		ar than K	(_12)				
22	2 NJ RT 70								×	Other (i.e. petc.)				builo	lings,	home	es,
	y (5) HERRY HILL								Squar 20,0	re Feet 00	# of	Floors		1000	dg. A /-50	ge	
1	unty (6) AMDEN					Code (7) USE ONLY)		Curre	nt Use (Pric	or if bei	ng demo	lishe	d)			
400V/V/V	me of Monitoring Firm Hired bERTEX COMPANIES	by Building O	wner (8))	ASCN	M No.		1		tement Con		8 6	FR\	/ICF	S I	NC.	
	eet Address				ļ				Addres		VIVI LIV	II/IL O		101	-0, 1	-	_
70	00 TURNER INDUSTRI	AL WAY						225	1 FRA	LEY STR	EET						
	y, State, Zip Code STON, PA 19014							TO 2007 Sale	State, Zi LADEL	p Code _PHIA, PA	A 191	37					
100	ject Manager for Monitoring I	Firm			Telepho			Telepi	hone No).		License					
	ON HEIM rt Date (10)		Cabad. I	-4 0		87-0402			-533-5	CORNER		01166	3				
1000000	4-19	10 20	3-31-1		npietion	Date (11)		900000000000000000000000000000000000000		IA Monitor COMPAN	IES						
Oc	cupancy Status During Abate	ment (Check	Only O	ne)					Addres			ILOSAS TRANSPORT	months.				
×	Facility Closed/Vacated Du Abatement Performed Outs							10-40-000	20.8 20.000.000.000	IER INDU	JSTRI	AL WA	Υ				
	Other – Describe:		i raciii;	y Hours	•			0.000	State, Zi ON, F	PA 19014							
Sco	ppe of Work (Check All That A	Apply)						p==									
×	≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demoliti				2		Containme i-Enclosure		Negativ	e Pre	ssur	е		
_									Glo	vebag Proc	edure	d Non Er	iablo	Drog	odur		
			Is	Locati	on				_ NOI	1-Exempled	() and	11011-11	lable		Abate	ment	
	Location of			Normal	ly		Des	scription	n of				-		Ту	ре	
	Asbestos-Containing Materia TO BE ABATED	al (ACM)	Ma	ed Sole intenar	nce/	Asbes (i.e.	tos Cont thermal	aining N	Material	(ACM)		mount specify		_Z	_	Enc	T.
	In Facility (13)		Cus	todial S (12)	Staff?		surfac	cing, VA	AT, or	-		or LF)		Remova	Repair	Encapsulate	Enclosure
	(10)		Yes	No	N/A		outer i	inscendi	neous)					/al	=	ılate	ure
3P/	CE 29(NEXT TO BUY!	BUY BAB			Х		N	IASTIC	0		3,0	000SF	2	Κ			
	me of Registered Waste Haul			0.00	JDEP Wauler ID		Cubic of Was			Name of F		red Land	llift				
	RVICE TRANSPORT O	SKOUP								MINER							
1 - 12 - 12	, State RDLEY, PA						Dispos	sal Date	6	City, State							
	mpleted by		Title				S	Signature	e	7	, 011		Date		32	200	
JE	NNIFER NIVEN		DIR.	OF C	PERA	TIONS	1	VA	_	2			2	2	7./	9	

B & G proj. #:



State of NJ Notification of Asbestos Abatement (Fursuant to NJAC 8:60-7 and 12:120-7) *** E M E R G E N C Y ***

Check #9165

B & G proj. #:	U	7 П		E 1V	IERO	LIVO		-	and the same of th		0 07		=	
Date of Notification (1)		Name or	f Building O	wner/Ope	erator (2)			1000	JE	CE		E		
0 2 / 2 6 / 1 9	1		ty of Mer			15							1111	
Agencies Notified Type No	tification	Street A		· ·					111	SAD -	4 2019	1	Ш	
T EPA	nitial	640	South Bro	oad Stre	eet			1 11		MAR -	4 201	-		
☐ DEP		City, St	ate, Zip Coo	ie				٠ _			monostrator			
DOL A	mendment	Tre	nton, NJ ()8650-0	068	The state of the s			Telephon	ESTOS I	CONT			, ,
DOH DOH		Name o	of Contact					L		9-6629	<u>managhan</u>			
	ancellation	Arth	nur R. Sy	pek, Jr.										-
L DOX		Ц		FACILITY	/ INFORMA	TION								-
		1000 /3		.,				Type	of Facility	(4) ol (K - 12)				
Name of facility where abate	ement is taki	ng place (3)) 							napter 8 (C		K-12)		
J&J Aviation Bldg. at	Trenton-N	lercer Al	гроп						Other	(Private/C	Commerci	al		
Street Address										# of Floo		Bldg.	Age	_
1 Pitcairn Avenue			-1.5					Squa	re Feet	# 01 1100				_
City (5)	T	County (6	3)			County C		Cur	rent Use (I	Prior if bei	ng demol	ished)		
EWING, NJ		Mercer						cor	nmercia					_
				IA	SCM No.	Nar	ne of Abatemen	t Contra	ctor (9)					
Name of Monitoring Firm H	fired by Bidg	. Owner (o	,	1	0030		& G Restorat	tion, Inc					_	
Environmental Con	nection, ii					1 1	eet Address							
Street Address 120 North Warren S	treet						05 Ryerson R				E		-/	
City, State, Zip Code						11	, State, Zip Coo		25					_
Trenton, NJ 08608						Tal	Lincoln Park, lephone Numbe	NJ 070.	33	Licen	se Numb	er		
Project Manager for Monito	oring Firm			Number			973-696-6869			037	8			_
Ryan Broadwater	- Inc.			392-420			ame of OSHA M							
Scheduled Start Date (10)			Completion I	Date (11)			B & G Restor	ation, Ir	ic.					
02/27/2019			4/2019				reet Address	Dood						
Occupancy Status During	Abatement (Check only	y one)				105 Ryerson							
Facility closed/vaca	tod during er	ntire period	of abatemie	ent.		110	ty, otato, E.P.	3.54%						
Abatement performing Describe:	ed outside of	i iloimaria	000				Lincoln Park	, NJ 070)35					
Other-Describe: Q	ccupied -	8am to 4	30011								rap & cı		_	
Scope of Work (check a		Renovation				☐ Ful	l Containment v	v/negativ	e pressure	and the same of	ovebag p			
Demolition		160 sf or ≥				☐ Mir	ni-enclosure			₩ N	on-friable	Proce	1	
> 3 sf or $> 3 $ If	≥ 🗠	le lecation	normally us	sed solely	/						е	e	E n	E n
Location of	1	by mainter	nance/custo	dial	Descr	iption of asl	bestos-containir	ng	Amou (Spe	unt cify SF or	m	p	c	С
asbestos-containir material to be		staff(12)			mater	ial (ACM)			ĹF)		v	i	p	L
abated in facility (13)	Yes	No	N/A					1.200 \$	SF	e	10		
Lobby Area				X	VAT				1,200 €	,				旦
LODDY 7 HOU					-								旧	부
					-							414	#	쓔
					1						_			
North Haul	er	INJD	EP Hauler I	D#	Cubic Yards	s of Waste	Name of Regis	stered I :	andfill Landf:	ill				
Registered Waste Haule B & G Restoration,	Inc.	19:	563		21.000		City State							
City, State				Disposal 03/04	1/2019		Morri	svil	Le, P.		- No. Version			
Lincoln Park, NJ 0		Title			Signatu	ıre	Gordana D	0			Date 02/26/2	019		
Completed by (Print or Gordana Luna	(ype)	Title Secreta	ry/Treasur	er	_		goraana L							
Outuana Luna		-												

24 Feb 2000 11:26PM NJ Asbet	stos Control	609,633,066	54		pag	e 1	Same or encountries and					
M & G proj. N: 2019-45		Notification Pursuant to	State of in of Asbes NJAC 8:8 M E R G	tos A	baten nd 12: C Y	nent 120-7)		GE	4 20	W 10		
Date of Notification (1)	Name of Bull	ding Owner/O	peretor (2)									701
1012/12/6//119	County of		*********					ESTOS	CONT	БĊЛ	ρ	\neg
Agencies Notified Type Notification	Street Address					1			JU	1	-	4
EPA Intent	640 Sou	th Broad St	raet				1 :		-			
DEP	City, State, 2	De la citation de la constitución de la constitució						-			T	
DOL Amendment	Trenton	NJ 98650-	-0068					Sec. 4		.7	-	ш,
D DOH	Name of Con	itact	Old State of Co.			i	Telephone		I UN	V 1	_	1
DCA Cancellation	Arthur F	R. Sypek, J	r.				609-90	-0023	وجاجا	المالية	7	_
		FACILIT	Y INFORMA	TION			8 9 7 22	y 3, =0 1 1 .v				
Name of facility where shatement is tal	ing place (3)			-		- 117	ype of Facility (4)				- 67
J&J Aviation Bidg, at Trenton-		ŧ						(K - 12) pter 8 (Off	er Phin	K-12)		20
	(0)01001 111						M Other ()	Private/Cor	nmarch	ıl		
Street Address							N.sgble -	annes, etc	ì	Bldg. /	Adie	_
1 Pitcalm Avenus				Calle	ty Cod	The second second	Sofrace Last	# 01 F10018				
City (5) EWING, NJ	County (6)			0.00170000000	# 786 g		Durrent Use (Pr	for If being	demoli	(berie		-1150
	Mercer			*** 			commercial			-		
Name of Montoring Firm Hired by Blo		1 .	ASCM No.	_ []		of Abstament Co						
Environmental Connection, I	nc.		00030	-11		G Restoration	, Inc.					-
Street Address		, ,				Ryerson Road						
120 North Warren Street				[City, St	ale, Zip Code		- Alle	Aller State of the			
Tranton, NJ 08608					Lin	coln Park, NJ	07035					
Project Manager for Monitoring Firm		Phone Numbe			100	one Number 3-696-6869		License 0378	MUMBE	r		
Ryan Broadwater		309-392-42			-	of OSHA Monito	N Comments					
Scheduled Start Date (10)	Sched. Comple				Ba	C Restoration						
02/27/2019	03/04/201		20		Street	Address						
Occupancy Status During Abelement	(Check only one)			and the same of th		Ryerson Ros	d				-	
Facility closed/vacated during a Abstement performed pulside of	ntire period of alb	eterment. Jours-		- 1	City, 8	tate, Zip Code						
Describe: Occupied -	Sam to di 30a	m			Li	acola Park, NJ	07035					
Scope of Work (check all that apply)	Balli (0 4.5b)								& cut			
	Renovation				Full Co	ntainment w/neg	ative pressure	Glove				
	160 st or >260 lf				Minl-er	closure		Non-	Hable p	roced	and the last	
Location of	is location norms	tly used solely			ŧ		Arriouni		a	8	E .	E
esbestos-containing	by maintenance/ staff(12)	CRSfc.6181	Descrip			pe-containing	(Specifi	SF or	0	9	0	g.
material to be abated in facility (13)	Yes No	N/A	III I I I I I I I I I I I I I I I I I	(110.0	v		LF)		٧	1 1	p	L
		N X	VAT _				1,200 SF		U			口
Lobby Area		· ^	1401						口口			早
					-				-#	H	4	片
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Regrested Waste Hauter	INJDEP Has	uler (Diff	Cubic Yards	o! Was	te Na	me of Registern Pairless	d Landill	1				
B & G Restoration, Inc.	19563	Dieposal		7	-	tv. State					-	
City, State Lincoln Park, NJ 07035		03/04	/2019		_1~	Morrisvi	lle, PA					_
Completed by (Print or Type)	Title		Signaturi		CO	salana Luna		Data 02/2	26/20	19		
Gordana Luna	Secretary/Tro	Sturer			200			02/		Control of the last		

2000 07:28PM NJ Asbestos Con	trol 60	9,633	3.0664			pa	ge	1 15	EC	E	V	7 [3 [
27/2018 10:34AM FAX	L	TIFICA	A A A	of New J F ABBEST NJAC 8:6	oreey IOS Al	ATEM	ENT		MAR	- 4	20	19 DA	ont	F
Date of Notification (1)				NJAC 8:6 uilding Ow	nat/Op		(2)		ASBEST	-	10	1.68	-	-
2/28/2019 Agencies Notified Type Notification	-	81	rest Add	1985		Cellife	- Y	Incorporate					A	1
X EPA Initial Amended Amendment #		CI	ly, State	, Zip Çode	Cinn	amina	son,	NJ 08077					7.	4
	luding	N		aterina '			1		Telephone	Number				
	de en (9)		PACILI	TY INFOR	MATIC	N	TVD	a of Facility (4)			_			_
Name of Facility Where Abatement is Taking F Residental Street Address	THE COLUMN (S)					-		School (K-12 Subchapter & Other (i.e. pr etc.)) COther Ihan	K-12) nerciel b	uldin:	gs, h	omes	ь,
Cinnaminson, NJ 0807	7						2	are Feet 2400	# of Floors		90) +/-		
County (6)			OUTRY CO	DOG (?)			Сш	rrent Usa (Prio	r if being den	nolished))			
Name of Monitoring Firm Hired by Building Ov MECS	virer (6)		ASCM	No.		Nama Stev	D! A	Environme	ractor (9) ntal Servic	es, inc				
Sirest Address PO Box 341						Street PO (Вох	322						
City, State, Zip Code Chesterfield, NJ 08	515					City, 8	State	, Zip Code n. NJ 0860						
Project Manager for Monitoring Firm Bill Weisgarber		7	elephon 609 29	e No. 8-4070			259	-9688	0049	186 No. 93				
3/4/2019	ecnedule	SV	pletion 0 9/2019			MEC	cs	SHA Monko!	**					
Occupancy Status During Abstement (Chock Facility Closed/Vacated During Entire Per Abstement Performed Outside of Normal Other - Describe; 8 am to 4 pm	ariod of A	batemu	enl				Box	T. T. W. C.	515					_
Scope of Work (Check All That Apply) 23 af or 23 if 21 at 50 at or 2280 if	X R	enovat emoliti	lon on					Full Containme Mini-Enclosure Glovebag Pro- Non-Exemple	edura				ı	
		Locati										Abate	meni	ı
Location of Asbettos-Cortaining Material (ACM) TO BE ABATED In Facility (13)	Ma Cua	d Solei Interest todial & (12)	ly by non/ Reff?	Asbest (i.e.	os Con thorms surfs	taining I eyster Icing, V miscell	Mate ms in	erisi (ACM) suletion. or	Amour (Specifi SF or L	h l	Removal	Respublic	Encapeulabe	
Altic	Yes	No	N/A		V	ermicu	ulite		1250	sf	x			1
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	+	-					_			100				1
Name of Registered Waste Hauter			JDEP V	No.	Of W			1	Registered	Latery Control				
Stavens Environmental Services City, State			18292	2		15 psal Da 9/201		City, Ste						-
Allentown, NJ Completed by	Title		anager		1 3/	Blanet	***		/	Def		/201	9	

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P	rint		OI	rm

Jh 25802	ı	VOTIFI P	CATION	of New DE ASB to NJAC	ESTOS	BATE	MENT))	Party of the Party),[G	E		7 [
Date of Notification (1) 2/28/2019			Name of	Building		perator Kenne		10.00		MAD	_ /	20	10	The dame.
Agencies Notified Type Notification			Street A	ddress					4	MAR	- 4	20	19	
		L							1	DECT	~ ~ ~	demorar		
DEP Amended DOL Amendment #	ŧ		City, Sta	te, Zip Co		namin	son, NJ 08	777	AS	BEST	US CO CENO		n istica	
Emergency (i		_	Name of	Contact					Telepho	one Nur	nber			
DCA Cancellation				Katerin	MAN DARGINIUS CON		a							
Name of Facility Where Abatement is Taking	Place (3	3)	FACI	LITY INFO	ORMATIC	NC	Type of Faci	lity (4)						
Residental	•						☐ School							
Street Address								pter 8 (C .e. priva				lings,	home	s,
City (5) Cinnaminson, NJ 080	77						Square Feet 2400	1	of Flo			ldg. A		
County (6) Union			County (Code (7) JSE ONLY)		Current Use	(Prior if	being d	lemolish	ned)			
Name of Monitoring Firm Hired by Building O	wner (8)		ASCM			Name	of Abatement	Contrac	tor (9)					
MECS							ens Enviror			vices,	Inc.			
Street Address PO Box 341							Address Box 322							
City, State, Zip Code Chesterfield, NJ 08	3515						tate, Zip Code town, NJ 0							
Project Manager for Monitoring Firm Bill Weisgarber			Telephor 609 29	ne No. 98-4070)		none No. 259-9688		1 639	cense N 1493	lo.			35 %
Start Date (10) 3/4/2019	Schedule		npletion (/9/2019	Date (11)		Name MEC	of OSHA Mor	itor						
Occupancy Status During Abatement (Check							Address Box 341							
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norma Other – Describe: 8 am to 4 pm					_	City, S	state, Zip Code sterfield, No							
Scope of Work (Check All That Apply)						Ones	sternera, rve	00010						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit				×	Full Conta Mini-Enclo Glovebag Non-Exen	sure Procedu	re	-			9	
	Is	Locati	on									Abate	ment	
Location of Asbestos-Containing Material (ACM)		Normal d Sole		Achoc		cription	of Material (ACM)		Amou	ınt	\vdash	Ту		
TO BE ABATED In Facility (13)		intenar todial S (12)			thermal surfac		s insulation, T, or		(Spec	cify	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A										te	
Attic		X			Vei	rmicul	ite		1250	sf	X			
Name of Registered Waste Hauler			JDEP W		Cubic		Nam	e of Reg	istered	Landfil				1 //-
Stevens Environmental Services		Н	lauler ID 18292		of Was	ite 15	Fair	less La	ndfill					
City, State Allentown, NJ						al Date /2019		State risville,	PA					
Completed by Mahlon E. Stevens	Title Proje	ect Ma	anager		S	ignature				Da	ate 2/28	/201	9	

Date of Notification (1)		NO	2.2	State of New ON OF ASBE IN 16 WAC B			ІТ		E C			V	Print
02/25/2019			Ash	of Building of ley and Cha	wne #Oper ato ad Waligors	or (2) ski		ШЦ	MAF	-	4 2	019	i
Agencies Notified Type Notification Type Notification Initial Amended Amendme	nt #		Street	Address State, Zip Code				A	SBEST	TOS (COM		ε
DOH Emergence justification Cancellation	n)	ng	19	of Contact d Waligorsk	i			Telep	hone N	umbei	r		
				CILITY INFOR				1					
Name of Facility Where Abatement is Tak Residence	ing Place	(3)				Тур	e of Facility	(4)			-		
Street Address City (5)						X	School (K-1 Subchapter Other (i.e. p etc.)	8 (Other	than K-1	l2) cial bu	ilding	s, hor	nes,
Haddon Twp						Squ	are Feet	# of F	loors	T	Bldg.	Age	
County (6)			County (STATE	Code (7)		Cun	rent Use (Prid	or if being	demolis	hed)			
Name of Monitoring Firm Hired by Building Indoor Environment Concepts Street Address	Owner (8	3)	ASC	M No.	Name ELC	of Ab	eatement Cor Environme	tractor (9))				
286 Sunset Road				no cale a na cita con al decid	Street 150		ess wood Dr				\$8=1000		
City, State, Zip Code Barrington, NJ 08007			**********		City, S	tate,	Zip Code		11111-1111-1111				
Project Manager for Monitoring Firm			Telenho	one No.	Was		ton Crossii						
Mike Menz			(609)	502-2213	#10 00000000000000000000000000000000000		7427	1	cense N 1225	10.			
Start Date (10) 3 2 20 19	3	2	mpletion 201	Date (11)	Name same		HA Monitor						
Occupancy Status During Abatement (Cher Facility Closed/Vacated During Entire Abatement Performed Outside of Norr	Period of	Ahata	ment rs	1	Street City, S		ess Zip Code						
Other – Describe: Scope of Work (Check All That Apply)													
≥3 sf or ≥3 If ≥160 sf or ≥260 If		Renov Demoli			×	Min	Il Containme ni-Enclosure ovebag Proce n-Exempted	edure					
Location of Asbestos-Containing Material (ACM)		S Locat Norma ed Sole	illy		Description	of		() and rec	Jiri Hab	FIC	Abate		1
TO BE ABATED In Facility (13)	19	intena todial (12)	Staff?	(i.e. ther	Containing Ma Thal systems urfacing, VAT ter miscelland	insula , or	(ACM)	Amou (Spec SF or I	ify	Remova	Repair	o19 s, home Age	Enclosure
D	Yes	No	N/A			-				a	=	late	ire
Basement crawl space			Х	Р	ipe insulati	on		30 L	F	Х			
	-												
6													
									311		1	1	
			IJDEP W		bic Yards		Name of Re	egistered l	_andfill				
Service Transport Group		Н	IJDEP W lauler ID W2117	No. of \	Waste		Name of Re						
Name of Registered Waste Hauler Service Transport Group City, State New Castle, DE		Н	lauler ID	No. of \	Waste BD posal Date			Enterpri	ses				

Date of Notification (1)			Name	of Building	Owner/	Operato	r (2)	(KL	ch	/(50	7		
2/27/19			NJR	Restoratio	n Pro,	Inc.	1 (2)							
Agencies Notified Type Notificat	ion			Address					1	G	P [1	1\//	C
EPA X Initial				3ox 2188								<u> </u>	V	旦
DEP Amende Amende				state, Zip Co		200000	-		13					-
Emerger	ent # cy (including			gston NJ	0703	9				ll M	AR ·	- /	2010	
DOH justificati	on)			of Contact				0	Te	ephone	Numbe	er	2013	1
DCA Cancella	tion		CONTRACTOR OF	Anderso					86	2-777	Markowski (markowski)	and the market state		
Name of Facility Where Abatement is Ta	king Place (3	3)	FAC	CILITY INFO	DRMAT	ION	T	- f F 200 - 70		ASBE	STOS			8
home	3 . 1200 /0	-,						of Facility (LIGE	KSIH		
Street Address								School (K-1: Subchapter		or than l	V 12\			
								Other (i.e. p.	rivate	& comm	ercial b	uilding	s, hon	nes,
City (5)							6	etc.) re Feet		Floors				
Livingston							1700		1	Floors		Bldg.	Age	
County (6)			County	Code (7)				nt Use (Prio		na dema	olished)	0.00	24.72.5	
Essex		İ	(STATE	USE ONLY)			hom		i ii bei	ng demi	Jilstieu)			
Name of Monitoring Firm Hired by Buildin	ng Owner (8)		ASC	M No.		Name	of Abat	ement Cont	tractor	(9)				
- Ch	11 27							onmental			LC.			
Street Address							Addres						-	
City State Zin Cod-						4 E C	Gate D	Drive, PO	Box 4	483				
City, State, Zip Code							tate, Zi							
Project Manager for Monitoring Firm							- J- A- N-	NJ 074	18					
1 19,000 Manager for Monitoring Firm			Telepho	one No.			one No			License	e No.			
Start Date (10)	Schodulo	d Co.		Date (11)		1 04/2000/00/00	764-22			703				
3/9/19	3/18/19)	npielion	Date (11)		Name o	of OSH	A Monitor						
Occupancy Status During Abatement (Ch						Street /	^ alal====							C2-7/10-
Facility Closed/Vacated During Entir			ont			Sueet	Address	5						
Abatement Performed Outside of No	rmal Facility	Hours	ient S		-	City, St	ate 7in	Code						
Other - Describe: basement					_	Oity, Ot	ato, zip	Code						
Scope of Work (Check All That Apply)										-				
≥3 sf or ≥3 lf	× Re	enova	tion				Eull	Containmon		NIE				
× ≥160 sf or ≥260 lf	☐ De	emolit	ion				Mini-	Containmer -Enclosure		negativ	e Press	ure		
						H	Glov	ebag Proce	dure	N = -		- 12		
	le l	ocati	on			-	INOI1-	Exempted () and	Non-Fr	able Pr	5-A-V-0-1707	re emen	
Location of	No	ormall	V		D								emen ype	
Asbestos-Containing Material (ACM)	Used	Sole	ly by	Asbesto	s Conta	cription on aining Ma	aterial (ACM)	An	nount				
TO BE ABATED In Facility	Custo		2/2/2011/10	(i.e. tl	nermal s	systems	insulati	on,	(Sp	ecify	Re	D D	Enc	En
(13)		(12)			other m	ing, VAT iscellane	, or eous)		SF	or LF)	Removal	Repair	apsı	Enclosure
	Yes	No	N/A				,				l a	=	Encapsulate	ure
basement		(0.0220					0.000							
2ddollion			Х		pipe i	nsulati	on		60	LF	Х			
											-			
Name of Registered Waste Hauler			DEP W	222277	Cubic Y			Name of Re	gister	ed Landi	fill			
Newark Carting			auler ID I 509	100	of Wast TBD	е	- 1	Grand Ce				ndfill		
City, State		04	505		I BD Disposa	I Dota			ziiu al	Jarine	иу са	nuilli		
Newark, NJ					Disposa TBD	ii Date		City, State Pen Argy	I D^					
Completed by	Title				ELECTRONIA STATE	nature		i eli Aigy	IPA		Data.			
A. Scott Higgins	Presid	ent			0.9		1	1,		9 8	Date 2/27/1	q		
					1			1		- 4	1121			

_ND CV+			FICATIO	State of No ON OF AS at to NJAC	BESTOS	ABATEM	ENT	E C MAR	E 1	<u>₩</u> 2019	<u></u> ()	
Date of Notification (1)			Name o	fBuilding	Owner/O	perator (2)			-		- "	1
February 27, 201	Charles and the second		Save	Ellis	s Isla	and, I	nc.	100000	0.001		****	1
Agencies Notified Type	Notification		Street A	CHESSE WAY				AODEOTO	0001			
□ EPA	Initial					206, S	uite 3E	CONTRACTOR OF THE STATE OF THE	******			
□ DEP ⊠ □ DOL	Amended Amendment # 1			ate, Zip Co			07000					
	Emergency (including		AUTO-CONTRACTOR OF THE PARTY OF	LE	lew Je	ersey	07822					
DOH DCA	justification) Cancellation		Name o	f Contact				Telephone Nu	mber			
- Deit B	Cancenation		EACI	LITY INF	CODMA	CTON						valit.
Name of Facility Where Abateme	nt is Taking Place (3)		FACI	LITTINE	URIVIA		Type of Facility (4)				
Recreation Shelt	er - Federal	Prop	perty				☐ School (K-1					
Street Address						-	☐ Subchapter	8 (Other than K-12)				
							Other (i.e. p	rivate & commercia	d buildir	igs, ho	mes,	etc.)
City (5) Statue of Liberty	National Mo	numer	ıt '		44.0		Square Feet 1312	# of Floors	E	S 5 5 5 7 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	77.7	
County (6)	The Decision of the State of th			USE ONLY)		_ [.	Current Use (Prio	r if being demolishe Use	ed)			97
Name of Monitoring Firm Hired b		Polma	x ASCN	A No.		Name of	Abatement Contr	actor (9)		75.		- 19
Sky Environmental	Line					Pol	nax Corpor	ration				
Street Address						Street Ad	ldress					
140 Boulevard		10-17					Koster St	reet	200			
City, State, Zip Code	070/6					100,000	te, Zip Code		Hall II.			17
Mountain Lakes No			m ! !				Lington N.		35.5	- 01		
Project Manager for Monitoring F			Telephor			Telephon		License N				
Leonid Shereshevs Start Date (10)		led Ce	973-5 pletion Da	88-48	21		309-1122	013	361			
to be determined	100 to 10		termi				OSHA Monitor					
Occupancy Status During Abatem	62 J. St. 98 100	- 40	CCIMI	illed		Street Ad	Idraes					
Facility Closed/Vacated Dur Abatement Performed Outsi Other – Describe: vacat	ing Entire Period of Al de of Normal Facility F	oatement Iours					te, Zip Code			<u> </u>		
Scope of Work (Check All That A	pply)		-		7				4		Te de	
□ ≥3 sfor≥3 lf □ ≥160 sfor≥260 lf	SI O	Renovat Demolit	0.000				Mini-Enclosure Glovebag Proce			ure		
		Is Locati	ion					7	1	77	ement	
Location of		Normal	ly		De	scription of				Ty	ре	
Asbestos-Containing Materia TO BE ABATED In Facility (13)	(ACIVI)	sed Solel Maintenau ustodial S (12)	nce/		stos Cont rmal syste	aining Mate	erial (ACM) ion, surfacing,	Amount (Specify SF or LF)	Removal	re Removal Removal Removal	Encapsulate	Enclosure
	Yes	No	N/A								te	6
roof			x	rooi	f fla	shing		450 sf	x			
exterior elevatio	n		x	wind	low ca	aulk		21 1f	x	7		
exterior walkway			x	Commission of the	Sec. 27 (1971)	plaste	r	745 sf	x	1		
A THE STATE OF THE		1			-0 1				A	17.05		
Name of Registered Waste Hauler	<u> </u>	H	JDEP Wa		Cubic of Was			Registered Landfill			iles :	
Century Waste			32797		20	15		Landfill	7 (911	
623 Dowd Ave, Eli	zaheth NT	of.			1 33	al Date	City, State			· F		- 2/1
Completed by	Zabeth NJ Title	-			tbd	ignature	Morri	sville PA	11			Aver

Signature

Haron Wollier

Kielczewski Slawomir

Title

President

Date February 27 , 2019

Ch 551	3	NC		(Pu	TION syan	t to NUA	C 8	OS ABAT 0 and 5:16	5)	D	EGE				
Date of Notification (1) 02 /	27 /	19				100	9	er/O perato r (2 ewater Parl	100		MAR -	4 20	19	A STATE OF THE STA	4
							Lug							1	
Agencies Notified EPA	Type Notifica ☑ Initial	tion				Address Delanco	Roa	d			ASBESTOS	CONT		P.	
□ DOLWD □	Amended			ŀ	City, S	tate, Zip C	ode			(VIII)		munta.			
Ø DOH	Amendme					2000,000,000,000,000		NJ 08010							
DCA (NJAC 5:23-8)	☐ Emergence justification		iing	-		of Contact					Telephone Num	ber			
(10/10 0.20 0)	☐ Cancellati				She	rri Howle	ett				609-877-20	50			
1					FAC	CILITY IN	FORI	MATION							
Name of Facility Where A	batement is T	aking Pla	ace (3)					Type of Fac	ility (4	1)				
Edgewater Park Pol	ice Departm	nent							School (200			
Street Address									Subchap	ter 8	(Other than K-1) vate and comme	2) ercial bu	ildina	9	
400 Delanco Road									homes,	etc.)	vate and comme	, olar be	mamig	J,	
City (5)									Square Fee	t	# of Floors	BI	dg. Ag	ge	
Edgewater Park									50,000		2		96		
County (6)					Coun	ty Code (7)(STAT	E USE ONLY)	Current Use	(Pric	or if being demol	ished)			
Burlington									Police S	tatio	n				
Name of Monitoring Firm	Hired by Build	ing Own	er (8) /	SCM	No.	Nam	e of Abateme	ent Contracto	r (9)					
Environmental Reso	olutions, Inc	.					Sł	nade Enviro	onmental, L	LC					
Street Address	22 - 244 - 122 - 224			- //			Stree	et Address							
815 East Gate Drive	, Suite 103						62	3 Cutler Av	/enue						
City, State, Zip Code							City,	State, Zip Co	ode						
Mount Laurel, NJ 08	3054						M	aple Shade	, NJ 08052						
Project Manager for Monit	toring Firm			Tele	ohone I	No.	Tele	phone No.			License No.				
Kasey McDonald					6-235		85	6-755-0099)		00842				
Start Date (10)	7700	chedule				and the second second	Nam	e of OSHA M	lonitor						
03 /08 /	19	03	_ / .	11	_ / _	19	E	VISL Analyt	ical, Inc.						
Occupancy Status During	Abatement (C	Check on	ly on	e)			Stree	et Address							
□ Facility Closed/Vacate							20	0 Route 13	0 North					2222	
Abatement Performed							City,	State, Zip Co	ode					2-01:25	
Time of Abatement:	AM	PM/		PIM-		AM	Ci	nnaminsor	ı, NJ 08077						
Scope of Work (Check all	that apply)							Π		N	ti - December				
		\boxtimes	Ren	ovatio	on			☐ Full Con		Nega	ative Pressure				
☐ ≥160 sf or ≥260 lf		_		nolitio				⊠ Gloveba	g Procedure	222	201 20 32 2				
			1-1		2.00	1		∐ Non-Exe	mpted (*) an	d Nor	-Friable Proced				
Location	of			ocati ormal				Description of	\f	- 1		-	atem		r
Asbestos-Containing I		1 -	Used	Sole	ly by			Containing Ma	iterial (ACM)		Amount	Removal	Repair	Encapsulate	Enclosure
TO BE ABA	TED			itenai	nce/ Staff?	(i.e		mal systems			(Specify SF or LF)	JOV	a:	aps	osu
IN Facilit (13)	ЗУ			(12)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			urfacing, VAT er miscellane			SF OI LF)	<u>m</u>		ulat	9
(10)		Y	es	No	N/A		7.710							Ф	
Bathroom Locker Ro	om & Hallwa	ay 🗆]	\boxtimes		Pipe Fit	ttings	3			6 LF				
Mechanical Room		×	1			Pipe Fit	ttings	;			10 LF			\boxtimes	
]												
						1.0				7					
Name of Registered Was	te Hauler				JDEP \		0.000000000	ic Yards of	Name of F	Regist	ered Landfill		1		
Freehold Cartage				Н	auler II 15939		Was	te	Fairles	s La	ndfill				
City, State								osal Date	City, State	•	17				
Freehold, NJ							03	3/11/2019	Morris	ville,	PA				
Completed By (Print or Ty	ype)	Title						Signature			1	Date			
Christina Lynch		Vice	Pre	side	nt of (Operatio	ns	(Mrts				2/2	7/1	9	

	1 0 0	and the same of th				1=	20/19	1	0/		Pr	iqt F
19/4			St	tate of New	Jersey	70	a Cl	lech.	186	23)
U 6-	7 11 [P	ursuant	to NJAC 8:	STOS ABATE	MEN 0)	A	10010	IDE	95	5	
Date of Notification (1)		T	Name o	of Building O	wner/Operato	r (2)		DE) pos
2/20/19					spitality, Ll			D) E	; E	<u>U</u>		
Agencies Notified Type Notific	ation		Street A		1		-	3				\parallel
EPA Initial DEP Amend				Route 9 N				III MA	R - 4	20	19	
	ea ment #			ate, Zip Cod Ibridge NJ			- 1	LI LI WIL				
Emerge	ency (including	-		of Contact				Telephone	Atumato are	ON /25 *		1
DOH justifica			Dave				1	732-306				
Name of Facility Where Abatement is	Taking Place (3	1)	FAC	ILITY INFOR	RMATION	Tun	o of Facility	(4)	President Communication			
business - hotel		,				Тур	e of Facility	*				
Street Address						H	School (K- Subchapter	8 (Other than	K-12)			
1002 Route 9 North						×	Other (i.e. petc.)	orivate & comm	ercial bu	ldings	, hom	es,
City (5) Woodbridge						Squ 500	are Feet	# of Floors		Bldg. /	Age	
County (6) Middlesex			County (STATE	Code (7) USE ONLY)		Curi		or if being dem				
Name of Monitoring Firm Hired by Buil	ding Owner (8)		ASCN	M No.		of Ab	atement Cor	ntractor (9) al Servcies, I	LC			
Street Address	,					Addr		., 00, 10,00, 1		-		
City, State, Zip Code							Drive, PC	Box 483				
Oity, State, Zip Code					1000000		Zip Code d, NJ 074	110			200	
Project Manager for Monitoring Firm		Τ.	Telepho	ne No.		hone I		Licens	e No			
					1 95		2276	703	oc 140.			
Start Date (10) 3/1/19	4/15/19	9	pletion	Date (11)	Name	of OS	SHA Monitor					
Occupancy Status During Abatement (Check Only On	e)			Street	Addre	ess					
Facility Closed/Vacated During Er Abatement Performed Outside of Other – Describe:	ntire Period of A Normal Facility	Abatem Hours	ent		City, S	State, i	Zip Code					
Scope of Work (Check All That Apply)												
≥3 sf or ≥3 lf	⊠ R	enovat	tion		[3	₹	II Containm	ant with Nonet	D			
× ≥160 sf or ≥260 lf	D	emoliti	on			М	ini-Enclosure		ve Press	ıre		
							lovebag Pro on-Exempte	cedure d (*) and Non-F	riable Pr	ocedu	re	
	3000	Location								Abat	emen	t
Location of Asbestos-Containing Material (ACN	11	lormall d Solel		A = h = - 1	Description	of			-	T	уре	
TO BE ABATED	' Mai	intenan odial S		(i.e. th	s Containing Nermal system	vateria s insu	al (ACM) lation,	Amount (Specify	R	_	Enc	m
In Facility (13)	Just	(12)	taii:		surfacing, VA other miscellar	T, or	,	SF or LF)	Remova	Repair	apsı	Enclosure
#.00e-#1	Yes	No	N/A	1	mioodilai	.0003	/		val	=	Encapsulate	ure
see attached		5.7.7	×		see attach	her		X.	24	-		
					JUJ GRADI				×			
										-		
11						-			-			
Name of Registered Waste Hauler			JDEP W		Cubic Yards		Name of	Registered Lan	dfill			
Newark Carting		Ha	auler ID 1509	No.	of Waste		0.000	Central Sani		ndfill		
City, State		02	1003		TBD Disposal Date		City, Stat		Lary La	i dilli		COLUMN TO
Newark, NJ				-	TBD		Pen Ar					
Completed by	Title				Signature	9	1		Date			
A. Scott Higgins	Presi	dent					11		2/20/4	0		

Check#3278		N	ΙΟΤΙ	FICA (Pu	TION	vor as	ew Perseval BESTOS ABA C 8:60 and 6	TEMENT	\Box	EGE		\mathbb{V}	E	n
Date of Notification (1)							g Owner/Operator (13					\mathbf{H}
02 /	26/	19					g e man e per aner (MAR -	- 4 %	0119	1	
Agencies Notified	Type Notifica				-	Ament Address			Seri buil	70711		-010		- inet
□ EPA					OHECK	Address					nace hardeness	nantra dina		
☑ DOLWD	Amended				City S	State, Zip (nde.			ASBESTOS	CON		. 't	
□ DHSS	Amendme								- Commission	THE PARTY OF THE P	w		6 600	er =
DCA (NJAC 5:23-8)	Emergence justification		uding		-	of Contac	, NJ 07407		ΙΤο	ephone Numb	ar			
(110) 10 0.20 0/	Cancellati								1 16	repriorie warm	C.			
				l		Ament	FORMATION							
Name of Facility Where	Abatement is T	aking P	Place	(3)	1 741	CIZIII II	FORMATION -	Type of Facilis	hv (21)				201	
Private house		aiting i	1000	(0)				School (K-						
Street Address			-					Subchapte	r 8 (Oth	ner than K-1 2)				
								Other (i.e. homes, et		e and commerc	cial bu	llding	S,	
City (5)			-	200				Square Feet		of Floors	TRIC	dg. A	10	-
Elmwood Park, NJ 074	407								1		5.0	-5' ' '	5	
County (6)			-		Coun	ty Code (7)	(STATE USE ONLY)	Current Use (Prior if	being demolis	hed)			
Bergen														l
Name of Monitoring Firm	Hired by Build	ling Ow	ner (8) [ASCM	No.	Name of Abatem	ent Contractor ((9)					\neg
							Gr Tech LLC							
Street Address							Street Address				-	-		
							576 Vailey Rd #	283						
City, State, Zip Code							City State, Zip C	ode						
							Wayne, NJ 074	70						
Project Manager for Mon	itoring Firm			Tele	phone	No.	Telephone No.		L	icense No.				
Start Date (40)				<u> </u>			973-638-1777		0	1127				
Start Date (10)	19	Schedul 03				te (11)	Name of OSHA N Envirovision Co							
Occupancy Status During							Street Address					-	-	\neg
Facility Closed/Vacat	ed During Entir	e Perio	d of	Abater	nent		20-21 Wagaraw	Road, Bldg.	# 35E					
Abatement Performed Time of Abatement:	Outside of No AM-	rmai Fa PM/	acility	Hour PM	s - Des	AM	City State, Zip C	ode						
							Fair Lawn, NJ 0	MAN THE STATE OF THE STATE OF THE	-					
Scope of Work (Check al	II that apply)							p and decontant tainment with N			press	ure		
>3 sf or >3 lf > 160 sf or >260 lf		∑		novati			Mini-End	closure			_			
☐ ≥ 100 St Of ≥250 If		1_] De	molitic	n		ΩG Gloveba	g Procedure (empted (*) and	Non-Eri	with Negative	Press	ure		
			İs	Locat	ion	T-1-1000	Parent Committee Committee Committee		1		-	atem	ant Ti	vne
Location				lorma d Sole			Description	of						
Asbestos-Containing TO BE AB) [u sole intena			istos Cuntaining Ma a., thermal systems			Amount .	Remova	Repair	Encapsulate	Enclosure
IN Facil	77.7		Cust	odial	Staff?	(1.1	surfacing VAT	, or		(Specify SIF or LF)	SVO	air	nsq	Sur
(13)		-		(12)	Т	4	other miscellane	eous)			=		late	Ф
			Yes	No	N/A				_		+-			
Basement				Ш	X	Pipe in	sulation		80 I	_F	X			
		E												
		ſ		П			**************************************				m	П	П	П
		- -	<u> </u>	П		 						2000		
Name of Registered Was	ste Hauler			N.If	100000	Hauler ID No	. Cubic Yards of Was	iel Name of Do	nistera	d Landfill			Ш	Ш
en en en en en en en en en en en en en e										a canuilli				
Gr Tech LLC City, State					03378	53	Disposal Data	T.R.R.F. Ir	1C					
							Discosal Date	City, State						
Wayne, NJ 07470 Completed By (Print or T	vne)	Title					TBD	Tullytown,	PA					_
)he!						Signature	Ac Wena	1	Da				
N.Jevtic		Owne	r				1 //40	urc Wena	at	02/	26/19)		



Ck#2016

Date of Notification (1)			Т	Name o	f Building Ow	mer/Oper	rator	(2)		P	(A)	F	7 1	ПЕ	
02/25/19		-101-10-10-10-10-10-10-10-10-10-10-10-10		Schus	ster Meat C	Corp				E	6	E	1		
Agencies Notified	Type Notification			Street A				_	13						
□ EPA	× Initial				Hunts Poin)p M	arket				,	-00	40	
DEP	Amended	n	-		ate, Zip Code				Li Li	N	AK	- 4	20	19	1
X DOL	Amendment Emergency		-		, NY 1047	4									
X DOH DCA	justification)				f Contact				Tek	ASBI	ST(OS CO	MC	accessoring	D.
D DCA	Cancellation			Zack	II ITW INITION	MATION				No.	9 5	EHS	11:		
Name of Facility Where Ab	patement is Takin	g Place (3	3)	FACI	ILITY INFORI	MAHON	1	Type of Facility	(4)						
Commercial Building								DINA	200						
Street Address	•							School (K-		er than	K-12	2)			
60 Industrial Rd								Other (i.e.	private 8	comi	nerci	al build	dings,	home	es,
City (5)				~~~			-	etc.) Square Feet	# of	Floor	s	В	ldg. A	ae	
Lodi								45,000	1	, .00.		1 3	60+	3-	
County (6)			Т	County	Code (7)		-	Current Use (Pri	or if bei	ng der	nolish	ned)			_
Bergen				(STATE	use only) _		-	Commercial					for D	emo	
Name of Monitoring Firm H	Hired by Building	Owner (8)		ASCN	/I No.	N	lame	of Abatement Co		-					
n/a				n/a		ŀ	Harr	nony Contract	ing Ind	;					
Street Address						St	treet	Address							
n/a						3	360	Palisade Ave							
City, State, Zip Code						4 7.00		tate, Zip Code							
n/a								ield, NJ 07026	3						
Project Manager for Monito	oring Firm			Telepho	пе No.	1 100		one No.			ise N	0.			
n/a				n/a			700	160.6026		012	55				
Start Date (10) 02/07/19		05/30/		npletion	Date (11)			of OSHA Monitor							
Occupancy Status During	Abatamant (Char		2477					nony Contract	ing inc						
								Palisade Ave							
Facility Closed/Vacate Abatement Performed	ed During Entire I d Outside of Norn	Period of A	Abatem	nent			0.70	tate, Zip Code							-
Other - Describe: So								ield, NJ 07026	3	1					
Scope of Work (Check All	That Apply)						-	,			-		-		-
23 sf or ≥3 lf			Renova	tion			×	Full Containm	ent with	Nega	tive F	ressu	re		
≥160 sf or ≥260 lf		THE REAL PROPERTY.	emolit				20	Mini-Enclosur	е						
								Glovebag Pro Non-Exempte		d Non-	Friab	le Pro	cedur	e	
		lo lo	Locati	00					- ()		11100	T		ement	
Location of	, f	1000	lormal			Descri	ntion	of					Ту	ре	
Asbestos-Containing M			d Sole		Asbestos			laterial (ACM)	A	mount				m	
TO BE ABAT In Facility		10	odial S			ermal sys surfacing		s insulation,		pecify or LF		Ren	Re	nca	Encl
(13)			(12)			ther misc			O,	O. L.	,	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A								=		ate	9
Office Are		+	1,4358	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	L	oint Co		aund .	101	200 5		-	-		
		-		X		oint Co				000 5		Κ.	-		
Office Are		-		X				and Mastic		00 S		×	_		
Office Are	ea			Х	Т	ransite	Pa	nels	9	0 SF		<			
Name of Desisters 134	Unule-		1	IDEE !	(==t= =	Nuble V			D'-						
Name of Registered Waste			100.8	JDEP W auler ID		Cubic Yar of Waste	ras	Name of	Alternate		ınafill				
Harmony Contracting	INC			33085		BD		GROW	/S Lar	dfill					
City, State					D	Disposal [Date								
Garfield, NJ					1	BD		Morris	ville, P	A					
Completed by		Title	399_111			Signa					Da				
E. Cirovic		Secr	etary			10	(er	or			02	2/25/	19		





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Date of Notification (1)	2/15/19	A CHIMINAL DA		Name 1 H2	of Building Owner	70perato 20x1E		EGEI	W	E	M
Agencies Notified	Type Notification			principal margine	Address	7000					HHI
G EFA	pd. Initial			City S	itate, Zip Code 📏	1		MAR - 4	2010		Щ
D DEP	☐ Amended Amendment #	ř			ESTFIELD		0.000		2019		/
	Emergency (in		j	Charles and American	of Contact	IV.	<u> </u>	As delephone Nu	inher.		12.11.2000
D DCA	justification) Cancellation			1/2	L GRO	UE		ASBESTAGO	HINGI	· £.	i
				ARTON PARTY AND ADDRESS OF THE PARTY AND ADDRE	CILITY INFORMA						
Name of Facility Where Ab	patement is Taking	Place (3)				Type of Facility	(4)			
Street Address						***********	School (K	-12) er 8 (Other than K-1	2)		
DE COLFIGUROSO					13-		Other (i.e.	private & commerci	al bui	lolings,	, home
City (5)	n				,	***************************************	Square Feet	# of Eloors	77	Bldg. A	\ge
NEW BRU	USWICK	()	510				2,500	1 2		.80	<u> </u>
County (6)	iddlesex	(County (STATE	Code (7) USE ONLY)		Current Use (P	rior if being demolish	ned)		
Name of Monitoring Firm H	The second secon	vner (8)	,l	ASC	M No.	Name	of Abatement Co		~~~~		-
_						No	WATEO	110C			
Street Address	<u> </u>					and particular and an extension	Address	1:57			
05- 05-4- 75- 00-4-				···	······································	140	- 156X X	11			
City, State, Zip Code						City, S	tate, Zip Code	S NO. (74	85	12
Project Manager for Monito	ring Firm			Telepho	one No.	-	one No.	License N	0.		
					1	1733	,以允xxx	560 00%	50	6	
Start Date (10)	ia s	cheduk	ed Cor	ripletion	Date (11)	1	of OSHA Monitor				
Occupancy Status During A	batement (Check C	Only On	el	120		disparation and the	NA LEOV	3			_
X Facility Closed/Vacate				nent	l	P.C). Box 8	14			
Abatement Performed	Outside of Normal	Facility	Hours	\$		1	ate, Zip Code		06	70-1	
☐ Other – Describe:				,		CIV) Bride	2 CO 3	150	100	
Scope of Work (Check All T	nat Apply)	× ~	a sa saka sa	AT		`	Com On Marinus	ent with Negative P	rocota	ra.	
23 sfor≥3 if □ ≥160 sfor≥260 if			enova emolit			Ö	Mini-Enclosur	9.	i e aoui	16.	
							Glovebag Pro Non-Exempte	cedure d (*) and Non-Friab	e Pro	cedure	9 .
		ls	Locati	on:						Abate	ment
Location of		N	ormal	y.		scription		į.		Typ	T
Asbestos-Gontaining Ma TO BE ABATE		Mai	d Sole ntenal	nce/	Asbestos Com (i.e. thermal	aining Ma	aterial (ACM)	Amount (Specify	ZV		Enc
In Facility	ald.	Custo	odial 9 (12)	staff?	surfac	oing, VAT	, or	SF or LF)	Removal	Repair	Encapsulate
(13)	F	Yes	No	N/A	Caler II	novonanc	1000)		20		ate
		103		1007							_
00004017				1	0.0-	N 51	T. and	486WE			十
BASEMENT				A	PIPE I	<u>UCOU</u>	ALION	4 CUHE	\triangle		-
				<u> </u>			<u></u>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			-
Name of Registered Waste I	-louter		[N	JDEP W	laste Cubic	Yards	Name of	Registered Landfill			
	34444		H	auter ID	No. of Was	ite:	6.0	2.0.00.5.			
NOVATEDO				185		al Datie	City, State		01	1	
OID BridER 1	80 CV	85)		137	1/1	9 / Home	sonle_	Tit	1:	
Completed by		Title /)	14		gnature	211/	Date		5	iCi
SARIOS HIME	IDH	1	ILL	Di DE	-101	(C)	C)474/V		7/1	1	
ASB-41 (R-06-08)						* Do not	use this form for	asbestos licensure	exem	pted a	ctivitie



Ck#2018

Date of Notification (1) 02/25/19		100000		uilding Ow er Meat (ner/Operator	(2)								
Agencies Notified Type Notific	ation		reet Add		nt Co-Op N					E (5 1	5		
	dment #	C	ity, State	, Zip Code NY 1047				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		M	A R	- 1	20	10
DOH justific			ame of C Zack	Contact				Telepho	1	Name and Address of	PROTECTION	- Cilmanosom		
			FACILI	TY INFOR	MATION	T ====	-£ F184 . (4)		A	SBE	STO	SCC)[
Name of Facility Where Abatement is Commercial Building Schedu Street Address	맛으로 이렇게 하는 아니는 맛이 되는 그리고 되고 하셨다.	ion				P	of Facility (4) School (K-12) Subchapter 8	(Other th	an K	-12)			·	-
60 Industrial Rd						X	Other (i.e. privetc.)	vate & cor	nme	rcial b	uildin	igs, h	omes	,
City (5) Lodi	, , , , , , , , , , , , , , , , , , ,						e Feet	# of Flo	ors		Bldg 50	g. Ag +	е	
County (6) Bergen			ounty Co	ode (7) SE ONLY)			nt Use (Prior nmercial B					r De	emo	
Name of Monitoring Firm Hired by Bu	ilding Owner (8)		ASCM n/a	No.			tement Contr Contractin							
Street Address						t Addres								
n/a							ade Ave							
City, State, Zip Code							ip Code							
n/a		1 =		N		hone N	NJ 07026	1116	once	e No.				_
Project Manager for Monitoring Firm n/a		1	elephon n/a		973	3460.6	026		125					
Start Date (10) 02/07/19	05/30/1	9	pletion D	ate (11)	Hai	rmony	A Monitor Contractin	g Inc						
Occupancy Status During Abatement	(Check Only One	e)				t Addre	ss ade Ave							
Facility Closed/Vacated During Abatement Performed Outside of Other – Describe: Scheduled for	of Normal Facility		ent		City,	State, Z	ip Code							\dashv
Disposed Co. Co. Co. Co. Co. Co. Co. Co. Co. Co.					- Ga	rtield,	NJ 07026		1					_
Scope of Work (Check All That Apply ≥3 sf or ≥3 If ≥160 sf or ≥260 If	☐ R	enovati emolitic				Mi Gl	Il Containmer ni-Enclosure ovebag Proce on-Exempted	edure					•	
	le.	Locatio	n									Abate	ment	
Location of	N	ormally Sole	y		Description	on of		•		-		Ty		-
Asbestos-Conteining Material (Al <u>TO BE ABATED</u> In Facility (13)	(Mai	ntenan odial S (12)	ice/		os Containing hermal syster surfacing, \ other miscell	ms insul /AT, or	ation,	Amo (Spe SF or	cify		Removal	Repair	Encapsulate	Enclosure
Exterior		10000	x	Gr	ey Windov	v Glazi	na	420	LF		<			
Exterior			x		irey Windo			135	LF	_	×.			
Exterior			х		Roof Fla	shing		15,25	0 81	F	ĸ			
Exterior			x		Roof Men	brane		34,20	0 8	F	<			
Name of Registered Waste Hauler		2.00	JDEP W		Cubic Yards		Name of F							
Harmony Contracting INc		8.3	auler ID 33085	No.	of Waste TBD		GROW		ill					
City, State Garfield, NJ	11				Disposal Da TBD		City, State Morrisv	e rille, PA						
Completed by E. Cirovic	Title Secr	etary			Signat	ure Nic	_			Date 02	e /25/	19		

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

Ck#2017

Date of Notification (1)	God la	A Bull		1					- 17	0	0	1	
02/25/19			Name	of Buildin	g Owner/	Operator	(2)	- 4				K.C.	
Agencies Notified Type Notifie	ation				sat Corp			The state of the s		-			
EPA X Initial	D-22 Hunts Point Co-Op Market D-22 Hunts Point Co-Op Market D-22 Hunts Point Co-Op Market				7 6								
DEP Amend	Initial Amended Amendment # Emergency (including justification) Cancellation												
DOL Amend	Type Notification												
DOH justific	Street Address D-22 Hunts Point Co-Op Market D D D D							19					
DCA Cance													
Name of Facility Where Abatement is	Taking Place (3)	FAC	ILITY IN	FORMAT	ION		1 0	SRE	STO	s co	71	
Commercial Building Schedul	ed for Demo	o) olitior	1					//	.05.5				
Street Address							School (K-12)				-	* 1
60 Industrial Rd							Other (i.e. pr	vate & com	n K-1	2) ial bu	ildina	s. hon	nes
City (5)							etc.)						
Lodi									rs	100	-	Age	
County (6)			County	Code (7)					malia		20+		
Bergen											for	٦٥m	0
	ding Owner (8))	ASCI	M No.		Name	of Abatement Cont	actor (9)	01100	uioc	101	20111	
n/a Street Address			n/a										
n/a						Street	Address		+				
City, State, Zip Code									1				
n/a													
Project Manager for Monitoring Firm			Telepho	no No									
n/a				ile No.					100	ο.			
Start Date (10)	Schedule	ed Co		Date (11)				012	55				
02/07/19	05/30/	19		, ,				n Inc					
									+				
Facility Closed/Vacated During Er Abatement Performed Outside of Other – Describe: Scheduled for D	itire Period of A	Abater	nent			360 F	Palisade Ave						
Other – Describe: Scheduled for D	Normal Facility	Houn	S		Ī						1012-001	-	
Scope of Work (Check All That Apply)						Garfi	eld, NJ 07026		ĺ				
≥3 sf or ≥3 if			114 mm			Second				area attace			
≥160 sf or ≥260 if						360	Full Containmen	with Negat	tive P	ressu	re		
						Z	Glovebag Proces	lure					
	T .					[X]	Non-Exempted () and Non-	Friabl	e Pro	cedur	е	
Location of													
Asbestos-Containing Material (ACM	Used	d Sole	ly by	Ashes	Des tos Conta	cription o	of	A			,,	PC	
	Custo	ntena: odial S	nce/ Staff?	(i.e.	thermal s	systems	insulation,		3.0	R	77	Enc	m
								SF or LF))	ome	₹ерг	sqs	Enclosure
	Yes	No	N/A				000)			val	Ŧ	ulati	sure
Warehouse		.,,										0	
	\rightarrow		1	Airce			& Elbows	38 LF		ĸ			
			X					100 SF		ĸ			
vvarenouse			X	Bla	ack Con	crete C	Coating	1,600 SF	=	ĸ			
Name of Registered Waste Hauler		12:	IDES										
		0.00					Name of Re	gistered Lar	ndfill				
		- 1				•	GROWS	Landfill					
City, State					Disposa	Date	City, State		1	-			
Garfield, NJ Completed by					TBD			, PA					
E. Cirovic	1	40	10	unic – 1000 minuitis					Date)			_
	Secre	tary				hos			02	25/1	9		

16 FOIR			NOT	TEIC	D)S	state of N	ew Jersey BESTOS ABAT	TEMENT	MEC	E		7 [5	
	1			(É	ursua	ALTO NIA	0 8:60 and 5:1	6)		7 15 1	J W		<u>'- </u>
Date of Notification (1)							g Owner/Operator (2)		n - 1	201	0	
/	26 /	19	_		Su	san John	son		LI LI MA	R - 4	201	9	
Agencies Notified	Type Notific	ation			Stree	t Address				00 to 00 miles	-	-	1
⊠ EPA ⊠ DOLWD		d							ASBES	TOS CC)N		2.
⊠ DOH	Amendm	73				State, Zip (Ĺ	Call Avenue and Avenue and	N. SCHOOL STATE	-	W50	E/D 52.
☐ DCA	☐ Emerger	ncy (ind	ludin	g g		ion, NJ 0							
(NJAC 5:23-8)	justificati Cancella				1 200	of Contac			Telephone N	umber			
					1	san John							
Name of Facility Where A	batement is	Taking	Place	(3)	FA	CILITY IN	IFORMATION	Type of Facility	(4)			_	
Johnson Residence		· uning	, 1000	, (0)				School (K-1)					
Street Address								Subchapter	8 (Other than K	-12)			
								homes, etc.	orivate and comi	mercial b	uildin	gs,	
City (5)								Square Feet	# of Floors	В	ldg. A	ge	
Union								3,598	2		83		
County (6)					Cour	nty Code (7)(STATE USE ONLY)	Current Use (Pr	rior if being dem	olished)			
Union								Residence					
Name of Monitoring Firm I					ASCM	No.	Name of Abateme	ent Contractor (9))				
Management & Envi	ro. Consul	Iting S	Servi	ces				onmental, LLC					
Street Address							Street Address						
PO Box 341							623 Cutler Av						
City, State, Zip Code	45						City, State, Zip Co						
Chesterfield, NJ 085	5555			T-1			Maple Shade	, NJ 08052	1				
Project Manager for Monit Bill Weisgarber	oring Firm				ephone 09-29 8		Telephone No.		License No.				
Start Date (10)		Schod	ulad C		etion Da		856-755-0099		00842				
03 / 07 /	54-00-05				1 /	OUD DOUGH CONTROL	Name of OSHA M EMSL Analyti	VE ANDREAS					
Occupancy Status During							Street Address						
☐ Facility Closed/Vacated					ment		200 Route 13	0 North					
☐ Abatement Performed	Outside of No	ormal l	acilit	y Hou		scribe	City, State, Zip Co						
Time of Abatement:	AM	PM	/	PM		AM	Cinnaminson						
Scope of Work (Check all	that apply)			leoneo e									
			✓ D ₀	novat	ion		☐ Full Cont ☐ Mini-Enc	ainment with Neg	gative Pressure				
≥160 sf or ≥260 lf				moliti			☐ Glovebag	Procedure					
		- '					Non-Exe Non-Exe	mpted (*) and No	n-Friable Proce	dure			
Location of	.¢			Loca Vorma			D			Al	atem	ent T	ype
Asbestos-Containing N		1)	Use	d Sol	ely by	Asbes	Description o stos Containing Ma		Amount	Re	Repair	Enc	En
TO BE ABAT				intena todial	ance/ Staff?		, thermal systems i	insulation,	(Specify	Removal	oair	aps	Enclosure
(13)				(12)			surfacing, VAT, other miscellane		SF or LF)	<u>n</u>		Encapsulate	лrе
			Yes	No	N/A							е	
Basement						Floor Ti	le and Mastic		483 SF				
Basement Laundry Ro	om			\boxtimes		Mastic			65 SF				
							2		<u> </u>				
Name of Registered Waste	Hauler			I	JDEP \	Waste	Cubic Yards of	Name of Regis	stered Landfill				
Freehold Cartage				F	lauler II 15939	Service (1935)	Waste 1	Fairless La	andfill				
City, State			17.10		. 5555		Disposal Date	City, State					
Freehold, NJ							03/11/2019	Morrisville	, PA				
Completed By (Print or Typ	oe)	Title					Signature			Date			
Christina Lynch		Vic	e Pr	eside	ent of (Operation	is ()	\		2/21	01	9	

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Date of Hallmann (1) 02/22/2019		-	the second second		ulding Owne				والديد مطلع	-90	PKC.	201	100
Aganose Neet at Type Ne			K	aren	entall cours	m-paras	GF (2)	Actional Property	-	A	- Testers	far in the	7
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300 00110			Ka	ren Bir	gert		1	· 5.	190horu	POLITY			
Name of Radity Where Absterned Residence	Taiding Pla	CS (3)		PACH	The: 1	NON	Type of Fe		-	_			
Street Address						B.		1 (K-12)					
							School Suber	11 (PC-12) 189657 8 (QU (1-6. private	er than	K-92)			
Edison NJ		_					Office (ercia i	Wide.	go, ha	ZTIGG.
County (8)							Square For	1 06	Plant		0	g. Age	_
Middlesex			Cou	Pil (Se)	10.		Current Une	(Pylor if in	ne dame	Batta			
Name of Manbating Firm Hand by Bu	ding Dime	(5)		SCA Ha.	,						P		
Street Address			1"	COM FIEL		Name Ninte	of Abelemen	t Domirector	(D)	-	Pale (Feb.)	-	
				-		LAICK I	Restoratio	nLLC					
Cay, State, Zip Cado	-						okside R	d					
Omito COD				15		City, St	ate, Zip Coci		-	-	-		
rojed Deneger for Manharing Firm			Teles	hone No		Rando	lph, NJ O	7869					
(10) dep (10)	Rehoi	the distance					3-2550		1358	No.			
2/22/2019			omplett R	on Delio (84)	Name o	COSHA MOR	Hov	71300	-	-		
Doniparay State During Abelement (hack Only	TOTAL STREET	-			RIS Street A	did						
Fuellity Classed/Vacation During Ex Abstracts Festivated Qualific of I	in Pariod s	ABS	ment			2333 R	it 22 West)					S. T. San
and the same of th	THE PERSON NAMED IN COLUMN 1	uh secr	and .		Ī	CITY BE	te, Zip Code		-	-	_	-	
CODE OF WAR (Chart All That Apply)			The same of			Jalon,	NJ 07083						
3180 m a 5380 li		Renov	Mich Mich				Full Contest Mini Englas Biovebag P	MINU					
Location of	1	s Lam	Blom				Nov-France	HELCT and I	ion-Fran	PR			
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in Pacific	Cm	प्रविद्या	State?	0,	A. MAMATICAL SP	PS SEARCH JA	and of confidence	Arriz (Spa	-ile	580		100	R
	-	(12)	7	4	CENST INTO	e, VAT, o Companies	10E)	SF or	LF)	BENDERMAN	Regain	Brospedde	Direction in
ler room area	Yes	Ma	AKA					l		E	副-	1	Ser.
	-	H		Boller	inculation	1		12 SF		-	_		_
	-							12 31		×	-	-	_
	-								-	-		_	
TID OF Registered Vilente House		J. BX	Page 1									4	_
Restoration LLC		1 M4		Mip.	Cubic Yar of Waste	de		Registered	and		_		-
Randolph, NJ		100	39782	5	TED		G.R.O.	W.S					
Segret ph					TBD	Meta	City, Bits						-
se Mrda	Presid				8 gra	Tue	Tullytoy	The same of the sa					
	Presid				116	80000	_ //	ad	02/2				7

Project #

ON OF ASBESTOS ABATEMENT
Int to NJAC 8:60 and 12:120)

Check # 4557

Date of Notification (1)			Name o	f Building	Owner/Ope	erator ((2)		Г	renon	P	<u></u>	P	П	7.7
02/22/2019			Karen								E	C	E	1	\mathbb{V}
Agencies Notified Type Notification			Street A	Address						IJ		-			
EPA Initial Amended Amendment Emergency			Edison		ode							MAR	- ,	4 2	019
DOH justification)				f Contact					I B	ephon	ie Nun	nher		TERROR TO	en en en en en en en en en en en en en e
DCA Cancellation	1			Bingert										11	-
Name of Equility Whore Abstement is Takin	a Place /	31	FAC	ILITY INFO	ORMATIO	N T	Type	of Facility (4	1		ethalmethal con	T :	and the same of		4.4
Name of Facility Where Abatement is Takir	ig Place (3)					entered.		(#2.7 (2.7)						
Residence								chool (K-12 ubchapter		er tha	n K-12	2)			
Street Address								ther (i.e. p					dings,	home	s,
0:1-/5						-	Square	tc.)	1#6	f Floor		TR	ldg. A	ne en	
City (5) Edison NJ			2011-										iug. A	ge 	
County (6)				Code (7)	•		Currer	t Use (Prio	r if be	ing de	molish	red)			
Middlesex			(STATE	USE ONLY		-									
Name of Monitoring Firm Hired by Building	Owner (8)	ASCI	M No.	- 1	Name o	of Abate	ement Con	tracto	(9)					
					N	Nick F	Resto	ration LL	.C						
Street Address					1	Street /	Address	S							
					7	2 Bro	oksio	de Rd							
City, State, Zip Code					(City, St	ate, Zip	Code							
								NJ 0786	9						
Project Manager for Monitoring Firm			Telepho	ne No.		•	one No			(400.00	nse N	0.			
					-		3-25			013	58				
Start Date (10)	Schedu	led Cor	mpletion	Date (11)	1 1		of OSH	A Monitor							
02/22/2019	02/24/					RIS				0.00					
Occupancy Status During Abatement (Che	ck Only O	ne)			100		Address								
Facility Closed/Vacated During Entire								West							
Abatement Performed Outside of Norr Other – Describe: 3pm	mal Facilit	y Hour	S		1.		ate, Zip								
					_	Jnion	, NJ	07083							_
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demoli					Mini Glov	Containme -Enclosure vebag Proc -Exempted	edure	_				е	
		s Locat	tion										Abate	ment	
Location of		Norma	lly		Desc	ription	of						Ту	pe	_
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	M	ed Sole aintena stodial (12)	nce/ Staff?		tos Contai thermal sy surfacir other mis	ining M ystems ng, VA	aterial insulat T, or		(Amoun Specif F or LF	у	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A	-									_		
Boiler room area		X	-	Boiler i	insulatio	n			12 S	F		×	-		
	-	-	+	-				-				-			
	+	+	+									-	-		
Name of Registered Waste Hauler		1	NJDEP V	Vaste	Cubic Y	ards		Name of F	Regist	ered I	andfill	1			
Nick Restoration LLC		1	Hauler ID	No.	of Waste			G.R.O.V	100						
City, State Randolph, NJ		10	03378	2	Disposa TBD	al Date		City, State	9						
Completed by	Title	_				natúre		runytow	11, P	<u>a</u>	, Da	ate		_	
Nikica Mrda		ident				VII		1	ad	2,	6	122/2	019		



Date of Notification (1)				:60 and 12:			al	, . [.	200	0	- 0	
2/25/19			of Building O Houston	wner/Opera	tor (2	2)	IF	-) [E	1 [Π.//
Agencies Notified Type Notification	_		Address					7)_	EC	, L	,	\mathbb{W}
X EPA X Initial								-3				
DEP Amended		City, St	tate, Zip Cod	le			- 1		111	0		0046
X DOL Amendment #			Hills NJ				1	lane.	MA	К -	4	2019
Emergency (including justification)	9	Name o	of Contact				Telepi	hone N	Number			
DCA Cancellation		Jane	Houston				0.000			S	CON	entrones / * * * * * * * * * * * * * * * * * * *
New of F. W. Mr.		FAC	ILITY INFO	RMATION				To the same of	- 1		V. 11	
Name of Facility Where Abatement is Taking Place attic	(3)				1	Type of Facility (4)						
Street Address						School (K-12)						
Officer Address						Subchapter 8 Other (i.e. priv	(Other t	than K	-12)	Idinac	hom	200
City (5)						etc.)	vale & C	Omme	i Ciai Du	iuiiigs	, 110(1	165,
Short Hills					- 1	Square Feet	# of FI	oors	3.5	Bldg.	Age	
County (6)			2			2500	1			75		
Essex			Code (7) USE ONLY)		1 1	Current Use (Prior nome	if being	demol	ished)			
Name of Monitoring Firm Hired by Building Owner (8)	ASC	M No.			Abatement Contra						
				AB	SS E	nvironmental S	Servcie	es, Ll	_C			
Street Address				Stre	et Ad	ddress						
City City 7' O. I				4 E	E Ga	ate Drive, PO E	3ox 48	3				
City, State, Zip Code						e, Zip Code						
Project Manager for Monitoring Firm						ood, NJ 07418	3					
Froject Manager for Monitoring Firm		Telepho	ne No.		•	ie No.	- 1	cense	No.			
Start Date (10) Schedul			D		-	64-2276	7	03				
3/14/19 3/21/1		mpletion	Date (11)	Nam	ne of	OSHA Monitor						
Occupancy Status During Abatement (Check Only O				Ctro	at A a	dress						
Facility Closed/Vacated During Entire Period of Abatement Performed Outside of Normal Facilit Other – Describe: basement	Abaten	ment s				e, Zip Code						
Scope of Work (Check All That Apply)												
≥3 sf or ≥3 lf	Renova Demolit				×	Full Containment Mini-Enclosure Glovebag Proced Non-Exempted (*	lure					
Is	Locati	ion				Ton Exemples () and IV	011-1 116	DIE 110		emen	t
Location of	Normal	lly		Description	on of						/ре	20
TO BE ABATED Ma	intenar todial S (12)	nce/ Staff?	(i.e. the	s Containing ermal syster surfacing, V other miscella	Mate ms in AT,	erial (ACM) sulation, or	Amou (Spec SF or	cify	Removal	Repair	Encapsulate	Enclosure
	No	N/A		100	250.00						CD	
attic		X		vermicu	lite		250 \$	SF	х			
									-			
Name of Registered Waste Hauler	N	JDEP W	aste C	Cubic Yards		Name of Reg	aistered	Landf	ill			
Newark Carting	1000	auler ID 4509	No. o	of Waste		Grand Ce				ndfill		
City, State				Disposal Date	е	City, State						
Newark, NJ			T	BD		Pen Argyl	PA					
Completed by Title												

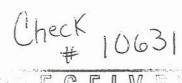


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Date of Notification (1) 2/25/19					of Building		25	r (2)		Ti	NE	C	B	11	W Is
Agencies Notified	Type Notification				nette Car	npbell								<u> </u>	
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DEP	Amended		Ì	3376	ate, Zip Co					6.	Ц	MAR	_	4 2	019_
X DOL	Amendment Emergency (_		ark. NJ C	7106									·->
DOH DCA	justification)	oraanig		200	of Contact					100	hone No	mber	OS,	100	
DCA	Cancellation			Antor	ILITY INFO	ODMAT	ION			- Marie	AND TO SECURE	SALES OF THE SALES		hade because	
Name of Facility Where A	Abatement is Taking	Place (3)	FAC	ILITINE	JRIVIAI	ION	Typ	e of Facility (4)					
home								П	School (K-12	· ?)					
Street Address								×	Subchapter 8 Other (i.e. pr etc.)	(Other			dings	, home	es,
City (5)						100		Squ	uare Feet	# of F	loors	E	Bldg. A	Age	
Newark								19		2			4		
County (6) Essex					Code (7) USE ONLY			1.00	rent Use (Prior me	r if being	demolis	hed)			
Name of Monitoring Firm	Hired by Building (Owner (8)	ASCI	M No.				oatement Cont vironmental	500					
Street Address							Street								
									483, 4 E Ga	ate Driv	/e				
City, State, Zip Code							2000		Zip Code						
Project Manager for Moni	toring Firm			Talaaba					od, NJ 0741						
				Telepho				764	-2276		icense N 703	No.			
Start Date (10) 3/1119		Schedul 3/22/1		mpletion	Date (11)		Name	of O	SHA Monitor						
Occupancy Status During	Abatement (Check	Only O	ne)				Street	Addr	ess						
Facility Closed/Vaca Abatement Performe Other – Describe: b	ed Outside of Norm	eriod of al Facility	Abaten y Hours	nent s		1.00	City, S	State,	Zip Code						
Scope of Work (Check Al	That Apply)														_
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		-	Renova Demoli				×	- M	ull Containmer lini-Enclosure lovebag Proce lon-Exempted	dure				e	
		100	Locat											ement	
Location Asbestos-Containing I TO BE ABA In Facilit (13)	Material (ACM) TED	Use Ma	Normal ed Sole aintena todial ((12)	ely by nce/		os Cont thermal surfa	scription taining M systems cing, VA niscellan	Materi s insu T, or		Amo (Spe SF o	ecify	Remova	Repair	e Encapsulate	Enclosure
		Yes	No	N/A	1							<u>a</u>		ate	Ге
baseme	nt			х		ceili	ng plas	ster		800	SF	×			
				-		X									
				-				_							
Name of Registered Wast	e Hauler		l N	JDEP W	/aste	Cubic	Yarde		Name of Re	agistors	ط ا ممادا				
Newark Carting	oministratoris.		Н	lauler ID 4509		of Was			Grand C				dfill		
City, State Newark NJ							sal Date		City, State Pen Argy	/Ι ΡΔ					
Completed by A. Scott Higgins		Title Pres	ident			1	ignature	1	1 CHAIG			ate /25/19)		

	-				State of	New Jer	sey			0 0	пп	7 -	
Check#3277		NO	TIFI	GATIC Purson	NOF A	SBEST AC 8:6	DS ABA	TEMENT	DE) E		∅ [
Date of Notification (1)			-	Nan	e of Buildi	nalawae	/Operator	(2)	13				
02 , 25	5 / 1	9					may ciato	(2)	III III MA	R - 4	20	10	Total I
				The second second	ard Furst				· · · · ·		20	10	1
	pe Notification Initial	n		Stre	et Address					- Andrews Carlotte	ACTIVITIES AND ACTIVI	770 Water St.	1
	Amended								ASBES	TOS C	NC.		۶
	Amendment	#		City	State, Zip	Code				-	Contrain.	- 1.	14
	Emergency (— na	Berk	eley Heig	ohts NI	07922						
	justification)	moragii	ng.	Nam	e of Conta	ct	01922		Telephone N	Lorente			
	Cancellation			2000					relephone i	vumber			
					ard Furst				•		_		
Name of Facility Whore Abote			121		CILITY	NFORM	ATION						
Name of Facility Where Abate	ement is Takii	ng Plac	æ (3)					Type of Facilit	ty (4)				
Private house								School (K-	12)				
Street Address	00/00	N. Carlotte				-		Subchapte	r 8 (Other than K	-1 2)			
								homes, etc	private and com	mercial b	uildir	ngs,	
City (5)			-					Square Feet			51.7		
Berkeley Heights, NJ 0792	2							Oquale FEET	# of Floors	1	3ldg.	Age	
County (6)				Tou	nty Codo /7	(STATE)	JSE ONLY)	-					
Union				000	nty code (/)	HOINIE (ISE UNLY)	Current Use (I	Prior if being dem	nolished)		27.41.2130	NEW GROOM
Name of Monitoring Firm Hire	d by Building	Ownor	701	1400				-					
	a by banding	OWNIEL	(0)	ASCN	No.			ent Contractor (9)				
Chroat O date						Gr Tec	th LLC						
Street Address						Street	Address				10/10/50	-	
						576 Va	alley Rd#	283					
City, State, Zip Code			-				tate, Zip Ci						
							, NJ 0747						
Project Manager for Monitoring	g Firm		Te	lephone	No.	Teleph			License No.				
						1			500000000000000000000000000000000000000				
Start Date (10)	Sche	duled (Compl	etion Da	te (11)	973-63	of OSHA M		01127			_	
)	03	/ 0	8 /	19								
Occupancy Status During Aba	tomant (Chan	1 1						nsultants,Inc					
Facility Closed/Vacated Du	ring Entire D	k only	one)			Street /	Address						
Abatement Performed Outs	ide of Norma	LEagui	Abate	emenţ	- 71	20-21 \	Wagaraw	Road, Bldg .#	35E				
Time of Abatement:	AM- p	M/	y not PM	irs - Des	SCRIDE	City, St	ate, Zip Co	ode			-		
					70M	Fair La	wn, NJ 07	7410					
Scope of Work (Check all that	apply)						Clean up	and decontam	nation with nega	tive pres	sure	-	
≥ 3 sf or > 3 If ≥ 160 sf or ≥ 260 If		₩ Re	enoval	ion		K	Full Cont	ainment with Ne	egative Pressure	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1			
≥ 160 sf or ≥260 If			emoliti			A	Mini-Encl	Service .	Tent with Negat	ive Pres	21150		
			2010-91	0000000		X	Non-Exer	inpted (*) and N	on-Friable Proce	dure	suic		
		4	s Loca						1		otom	ent T	
Location of Asbestos-Containing Materi	-1 / 0 0 0 0 1	1100	Norma	ally ely by		De	scription of	f			_	1	7
TO BE ABATED	ar (ACIVI)	Ma	intena	ery by ance/	Asbe	stos Cont	aining Mat	erial (ACM)	Amount	Removal	Repair	Enc	Enc
IN Facility				Staff?	(1.8	., thermal	systems in cing, VAT,	nsulation,	(Specify	mo	pai	ap	los
(13)			(12)			other n	niscellanec	ous)	SIF or LF)	val	7	Encapsulate	Enclosure
		Yes	No	N/A								6	
Garage		П	П	×	Dust in	.d.ed				E	-	_	
					Duct insi				60 SF	X	Ш	П	
amily room				\boxtimes	VAT flo	or tiles			300 SF	\boxtimes	П	П	П
		П			-1					_	Ш	Ш	Ш
Name of Registered Waste Hau	ilor												
	ner		NJ	JEP Waste	Hauler ID No.	Cubic Yar	ds of Waste	Name of Regis	stered Landfill				
r Tech LLC			(003378	5	TBE)	T.R.R.F. Inc					
City, State						Disposal	A STATE OF THE PARTY OF THE PAR	City, State					
/ayne, NJ 07470													
Completed By (Print or Type)	Title					TBD		Tullytown, P.					
20 St. 20 Totalista						Sig	nature/	_		Date			
.Jevtic	Owr	ner					Mente	c Wenad	lo	2/25/19			
							V		10				

							# 10 Table	Ch	eck	1/)6-	30	
CK10(030	PAI		CATIO	tate of Ne N OF ASB to NJAC	ESTOS	ABATEME	INT	EGF		3	No.	رد.	AR
Date of Notification (1)	18-19	1	Name o	R P	Owner/C	perator (2	lopme	- HMAR &	Roll	2019			
Agencies Notified Type Notific	ation		Street A	Address	77	7 5	10 p /c	1	+2	P		-	
☐ EPA ☐ Initial ☐ Amend	ed	7 E	City, Sta	ate, Zip Co	7 T	rak	10 6	St Ree t	* <u></u>		-		
DOL Amend	ment #			140	1	clai	iR, 1	13 0) 7(9.1	- '	2	
DOH justifica	ition)		Name o	of Contact	Mal	lace		Telephone 856	e Numb	er	- 4	77	,
Name of Facility Where Abatement is	Takina Blass (150176	ILITY INFO	ORMATI	ON			/ /				
Retail -			H)	Des	.mo		ype of Facility School (K-	3025					
Street Address	2 11/	,	N/1	\bigcirc	1 -	, [Subchapte	er 8 (Other than	K-12)	bilai	lines	.	200
City (5)	1 VVe	5+	Mai	n 01	t Ree	1 /	etc.)	private & comr					es,
Maple St	rade	W	T (280	57	_ °	quare reet	# of Floors	5	В	dg. A	ge) / -	_
County (6) BUPLING TO)			Code (7) USE ONLY)		Retail	ior if being den		d)			
Name of Monitoring Firm Hired by Buil	ding Owner (8)	e ,	ASC	A No.		Name of	Abatement Co	entractor (9)	001	6			
Street Address	337	753		4 - 8 - 4 - 1	6	Street Ad	dress	337	A	E 6	3 0		3
City, State, Zip Code	M		08	53		City, Stat	e, Zip Code	A & Al		1	26	2	7
Project Manager for Monitoring Firm	led.		Telepho	ne No.	7215	Telephon	e No.		se No.		0	u	3
Start Date (10)				Date (11)	دعرر		OSHA Monitor	95		-		- B	
Occupancy Status During Abatement (Check Only Or	3	0-	- 19		Street Ad		hnologi	ès_	I	nc		
Facility Closed/Vacated During Er	ntire Period of	Abatem	ent			P.(337					
Abatement Performed Outside of Other – Describe:	Normal Facility	/ Hours			Ì		e, Zip Code			<u></u>		_	
Scope of Work (Check All That Apply)						lucia	Egypt	_ \	0	85	33	3	
23 sf or ≥3 lf		Renovat						nent with Negat	tive Pre	ssur	е		
≥160 sf or ≥260 lf)ML I	Demoliti	on					cedure					
	le	Location					Non-Exempte	ed (*) and Non-	Friable		7.00	ment	
Location of		Normally ed Solel	y		Des	cription of			L		Ту	ре	
Asbestos-Containing Material (ACN TO BE ABATED	") Ma	intenan	ce/			aining Mate systems in	erial (ACM)	Amount (Specify		ק	_	Enc	Ē
In Facility (13)	Cus	todial S (12)	гат?	·	surfac	ing, VAT, i	or	SF or LF))	Remova	Repair	Encapsulate	Enclosure
*****	Yes	No	N/A							/al	-	late	ıre
Blds#1		X		9,0	FI	SOR 7	iles	2505	=)	ζ.			
Blog # 3 Bathreo	ons	X		9 89	Fle		iles	150 31		X			
Bldg #5 Conveyer	X			Comp	ound	TOU	i-	150 SF	<u> </u>	X			
Name of Registered Wests Usuas		1 11	IDED IA	1	10.61-3				,				
Name of Registered Waste Hauler	¥ . ~		IDEP W	No.	Oubic of Was			Registered La		9			۸.(
City, State	ies		1700	00	Dispos	al Date	City, Sta	te Mana	gen	ent	٠ د (t	V+
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Project Manager for Mon	ithrigg Firm	À		Telepho		-ء ند-	Telepho	467 0	License	No.	10	u	
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Occupancy Status During	g Abatement (Check	Only Or	ne)				Street A		7.0				
Facility Closed/Vac	ated During Entire Po	eriod of	Abatem	ent			P.	U. Box	337				-
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☐ Other – Describe:						_	Nei	u Egypt	NJ	083	53	3_	
Scope of Work (Check A	II That Apply)				***			- [,					
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City. State	J	10 - 1460 A		- , -		1.00	sal Date	City, Sta	ate				
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Date of Notification (1) 02 /	27 /	19					ng Owner/Operator (rothers Disposal		13	6/	4 0	ZUI: >	J
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N/A							Guardian Co	ntracting, Inc.		3			
Street Address							Street Address						
							1889 Route 9	, Unit 61					
City, State, Zip Code							City, State, Zip Co	ode					
							Toms River,	New Jersey 087	755				
Project Manager for Monit	toring Firm			Tele	phone	No.	Telephone No.		License No.				
							732-349-9932	!	00624				
Start Date (10)		Schedule					Name of OSHA N	lonitor					
02 /27 /	19	_02	_ /	27	/ .	19	E.M.S.L. Ana	lytical					
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Abatement Performed Time of Abatement:	Outside of N	omal Fa	cility	Hour	s - Des	scribe	City, State, Zip Co	ode	11			1.112	
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Scope of Work (Check all	that apply)								1000				
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* Do not use this form for achaetas licensura exampted activities

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State of New Jersey NOTIFICATION OF ASSESTOS ABATEMENT (Pursuant to NJAC \$150 and \$2:128)

CK#2020

Date of Notification (1) 02/27/19			1		uliding Ov a Gonza	mer/Opera	itor (2)				<u></u>	F	
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	Emergency (in justification)	<i>lic</i> tropung	N	ame of C	Contact				Tele	phone N	mber	1		
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Residential House						- Marie Sandard Company	-	School (K-1) Subchapter	2)	ur tinsam IK.	121			
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Street Address								Address	-					
n/a						-	-	Palisade Ave						
City, State, Zip Code								tata, Zip Code				eoon she		
n/a								eld, NJ 07026	<u> </u>					
Project Manager for Mo	milering Film			relephon n/a	e No.	1 1 7		one No. 180.6026		License 01255				
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^{*} Do not use this form for espectos licensure exempted activities.

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Federal Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7) Date of Notification Name of Building Owner/Operator 0 2 6 MAR 1 9 MACY'S CORPORATE SERVICES 2019 Agencies Notified Type of Notification Street Address USEPA Initial 7 WEST SEVENTH STREET DEP Notification X DCA/DOL Amended City, State, Zip Code X DOH Cancellation CINCINNATI, OHIO 45202 **EMERGENCY** Name of Contact Telephone Number Ralph Coppola 973-265-9763 FACILITY INFORMATION Name of Facility Where Abatement is Taking Place Type of Facility) School (K-12) MACY'S STORE - Menio Park Mail) Sub-Chapter 8 (Other than K-12) Street Address (X) Other (I.e. private & Commercial buildings, homes, etc.) 275 PARSAONAGE ROAD SF of Bldg. Age of Bldg. City County County Code 1 MILLION +SF 3 50+ State use Only Current Use (prior if being demolished) EDISON, NJ Name of Monitoring Firm Hired by Building Owner ASCM No. Name of Abatment Contractor PENNONI ASSOICATES ACM CONSULTING CORP. Street Address Street Address 24 COMMERCE ROAD 2150 STANLEY TERRACE City, State, Zip Code City, State, Zip Code NEWARK, NJ 07102 UNION, NJ 07083 Project Manager for Monitoring Firm Telephone No. Telephone Number License Number TO BE DETERMINED TO BE DETERMINED 908-687-1008 00575 Scheduled Start Date Name of OSHA Monitor Scheduled Completion Date 2019 11 2019 **EMSL ANALYTICAL** Month Day Year | Month Day Year Street Address Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement 307 WEST 38TH STREET X Abatement Outside Normal Facility Hours City, State, Zip Code X Describe: 9:30PM TO 7:00AM Other - Describe: NEW YORK, NY 10118 Scope of Work (Checl Only One) Abatement Method Demolition Full Containment with Negative Pressure >3sf or >3lf Mini-Enclosure ≥ 160sf or ≥ 260lf Glovebag Procedure Renovation Non-Friable Procedure Is Location Normally Describtion of Amount to be Abatement Type Location of ACM Facility Used by Custodial Staff ACM to be Removed Removed Yes NO N/A (Specify SF/LF) Rem. Rep. Enc. Encl. GROUND FLOOR CONSTRUCTION AREA FLOOR TILE 2000SF X Name of Registered Waste Hauler NJDEP Waste ID No. Cubic Yds waste Name of Registered Landfill TRI-STATE TRANSFER ASSOC., INC. SW1896 TBD MINERVA ENTERPRISES, INC City, State Disposal Date City, State of Registered Landfill BRONX, NY TBD WAYNESBURG, OHIO Completed By (Print or Type) Title Signature Date ANITA SMOLAR GENERAL MANAGER 2/26/2019

	F A		NOTE	FTCNOT	· ~~ .	2000				Che	CK #	16539
Date of Notification	(1)	旦旦步	- urou	ant to	NUAC 8	SBESTOS ABATEM :60-7 and 12:1	20 5	1 - 42		-		-
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ocieet Address							[]Su	ubchapter 8	(Othor	tha	n K-1	21
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City, State, Zip Code						OU CHEL	stopher	St.				
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Project Manager for Mon	itoring F:	rm	Teleph	none N	mber	Montcla	ır, NJ (07042				
		- 1	N/A	•	ALL STATES	Telephone Nu (973)74	mber 4-9000		Lice	ense	Numbe	er
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2mc - 5 n	Hauler	NJ	DEP W	aste	Cubi	c Yards	Namo of D					
ame of Registered Waste	Per	Ha	uler	ID No.	of W	aste 1.0	Name of Rec	State	ndfill			
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AZTECH MANAGEMEN		1	7040		Disp	osal Date	Ci tar			Name of the last		
AZTECH MANAGEMEN		11	7040			osal Date /04/19	City, State		47.			
ame of Registered Waste I AZTECH MANAGEMEN ity, State Ontclair, NJ 070	42		7040			Osal Date 5/04/19		NY, 10	474			
AZTECH MANAGEMEN	42	4							474 Date			

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State of New Jersey NOTIFICATION OF ASSESTOS ABATEMENT (Pursuant to NJAC 2:60 and 12:120)

Ck# 2019

Date of Notification (1)			Na	me of Bui	iding Owner Imple Bapi	Operator ((2) ch	,30023	r r. tr s s samerando	Contract of the		water*	10-12
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		_	-		Military Property Company		Square Fe	et # of	Floors	// / / / / / / / / / / / / / / / / / /	, Age		
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County (6)			10	STATE US	E OMLY)		Resider	rtial House					
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Street Address							Pallsade		10 10 10 10 10 10 10 10 10 10 10 10 10 1				_
n/a. City, State, Zip Gode						City.	State, Zip C	ade					
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Date of Notification (1) 02/26/2019			Name	of Buildin	g Owner/	Operator	r (2)			MAR	-	4 2	019	-11
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Name of Monitoring Firm Hired by Buildir Briggs Associates	g Owner (8	3)	ASC 000	M No. 4		Name D&S	of Abateme Abateme	nt Contract	tor (9)					
Street Address 3 Crosswicks Street						Street	Address osengren							
City, State, Zip Code Bordentown, NJ 08505						City, S	tate, Zip Co va, NJ 07	de						
Project Manager for Monitoring Firm Michael Hoodak			Telepho 609-2	one No. 98-552()	Teleph	one No. 345-8685		Lice 013	ense No).			
Start Date (10) 03/08/2019	03/11/	2019	mpletion	Date (11))		of OSHA Mo Abateme						5	
Occupancy Status During Abatement (Ch							Address	A. 10 m. 10						
Facility Closed/Vacated During Entire Abatement Performed Outside of No Other – Describe: Occupied	e Period of rmal Facilit	Abater ty Hour	ment 's			City, St	osengren ate, Zip Coo va, NJ 07	de						
Scope of Work (Check All That Apply)						10100	va, NJ 07	312			1			
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Location of Asbestos-Containing Material (ACM)	Usi	Norma ed Sole	ely by	Ashes		cription	of aterial (ACM	A)	Amoun	.		T y	/pe	
TO BE ABATED In Facility (13)		aintena stodial ((12)		(i.e	thermal surfac	systems sing, VAT iiscellane	insulation, , or	50	(Specify SF or LF	y	Remova	Repair	Encapsulate	Enclosure
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Name of Registered Waste Hauler D&S Abatement, Inc.		Н	JDEP W lauler ID		Cubic \ of Was			ne of Regist		andfill				
City, State		2	0996		TBD Disposa	al Date		rless Lan State	атш			2- 03-11		
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Date of Notification (1) 02/26/19	9			of Building		Operato	r (2)		MAR	4	2019		
Agencies Notified Type Notification				Address	A.,	C!4-	110	-					
EPA Initial Amended				nwood /		e, Suite	412					() () () () () () () () () ()	
DOL Amendment			East	Orange,	NJ 07	017			- 12 C		i de e	100	
Emergency (i justification)	ncluding	9		of Contac				Tel	ephone	Number			
DCA Cancellation				on Prop		7011		97	3-673-	3000 x	307		
Name of Facility Where Abatement is Taking	Place ((3)	FAC	ILITY INF	ORIVIA	ION	Type of Facility	/ (4)					
318 Pershing Avenue		2 60					School (K	(-12)					
Street Address 318 Pershing Avenue							Subchapt Other (i.e	er 8 (Oth	er than k	(-12) ercial bu	ildinas	hom	201
City (5)							etc.)						
Carteret							Square Feet	# 0	f Floors		Bldg.	Age	
County (6) Middlesex			County (STATE	Code (7) USE ONL	n		Current Use (F	rior if bei	ng demo	olished)			
Name of Monitoring Firm Hired by Building O	wner (8)	ASCI	M No.			of Abatement C LEAD PROF					7.7	
Street Address						100 No. 100 NO. 100 NO. 100 NO. 100 NO. 100 NO. 100 NO. 100 NO. 100 NO. 100 NO. 100 NO. 100 NO. 100 NO. 100 NO.	Address HITE DOVE (COURT					
City, State, Zip Code						City, S	tate, Zip Code EWOOD, NJ						
Project Manager for Monitoring Firm			Telepho	one No.		Teleph	ione No. 668-9078	00701	License	e No.			
	Schedul 03/12/		npletion	Date (11)		Name	of OSHA Monito						
Occupancy Status During Abatement (Check			-				Address	L00101	NALO				
Facility Closed/Vacated During Entire Pe	riod of	Abaten	nent			6 WH	HITE DOVE C	OURT					
Abatement Performed Outside of Norma Other – Describe:	I Facility	y Hours	5		_		tate, Zip Code EWOOD, NJ	08701					
Scope of Work (Check All That Apply)													
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	BOTTOM STORY	Renova Demolit				×	IVIII II LI ICIOSU	re ocedure	(50)			<u>a</u>	
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Location of Asbestos-Containing Material (ACM)		Normal d Sole		Ashaa	Des	scription	of				Ту	pe	
TO BE ABATED In Facility		intenar todial S (12)	200	(i.e.	thermal	systems cing, VA	aterial (ACM) insulation, Γ. or	(S	nount pecify or LF)	Ren	Re	Encap	Encl
(13)	No	N/A			niscellan				Removal	Repair	Encapsulate	Enclosure	
INTERIOR	,,,	1473		Р	IPING		8	0LF	x				
Name of Registered Waste Hauler		N.	JDEP W	aste	Cubic '	Yards	Name of	Register	ed Land	fill			
NEWARK CARTING			auler ID 1509	No.	of Was		IESI	. ogiotoi	- a Luniu				
City, State NEWARK, NJ					Dispos 03/12/	al Date /19	City, Sta BETHL		PA				
Completed by JOSEPH PERLSTEIN	ER			Si	gnature				Date 02/26/1	19			

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Date of Notification (1)			577					wner/Operator	(2)	E 103	16.			1
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Agencies Notified ☑ EPA	Type Notific	cation				eet Address 89 Mantol		ng Road				·		
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(NJAC 5:23-8)	justificat		icidalii	g		ne of Conta				Telephone I	Viimher		-	
	☐ Cancella	ation			J	im Matara	zzo			732-920-				
					F	ACILITY I	NFC	RMATION						
Name of Facility Where A	batement is	Takin	g Place	e (3)					Type of Facility (4)				
Residence									☐ School (K-12)				
Street Address								*	Subchapter 8	(Other than I	<-12)			
									Other (i.e., pr homes, etc.)	ivate and con	nmercial	buildin	gs,	
City (5)									Square Feet	# of Floors		Bldg. A	\ge	
Lavallette					orna na tagra t				1000 sf	1		65		
County (6)					Co	unty Code	(7) <i>(</i> S7	TATE USE ONLY)	Current Use (Prid	or if being der	nolished)	2-40-211-	
Ocean									Residence					
Name of Monitoring Firm I	Hired by Buil	lding ()wner	(8)	ASC	M No.	Na	ame of Abateme	ent Contractor (9)					
N/A								Guardian Co	ntracting, Inc.					
Street Address							St	reet Address						
0:4. 01.1. 7: 0.1								1889 Route 9), Unit 61					
City, State, Zip Code								ty, State, Zip Co						
Droinet Manager for Man 1				T	elephor				New Jersey 087	755				
Project Manager for Monit	roject Manager for Monitoring Firm							elephone No.		License No).			
Start Date (10)		Cahad			1-11			732-349-9932		00624				
03 / _08_ /						Date (11) 19	35.400	ame of OSHA M						
Occupancy Status During								E.M.S.L. Ana	lytical					
☐ Facility Closed/Vacated								reet Address						
☐ Abatement Performed (Outside of N	ormal	Facilit	v Ho	urs - D	escribe		1056 Stelton						
Time of Abatement:	AM	PN	A/	_PN	Λ- <u> </u>	_AM		ty, State, Zip Co						
Scope of Work (Check all t	that apply)							Piscataway, i	New Jersey 088	54				
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≥3 sf or ≥3 lf≥160 sf or ≥260 lf			☐ Re ☑ De						losure		8			
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Name of Registered Waste	Hauler					Waste	Cul	bic Yards of	Name of Registe	ered I andfill		1 1		
Guardian Contracting, Inc. Hauler II						ID No.	Wa	iste	T.R.R.F.	JOU LANGINI				
City, State						23	Dis	posal Date						
Toms River, New Jer	sey						1	13/11/19	City, State	Onnovil.				
Completed By (Print or Typ		Title						-50,000,000	Tullytown, F	ennsylvan		,		
Nicholas Fernicola	- /	194210009711	oiect	Mar	nager			Signature	- American	1	Date		1.	_
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Date of Notification (1)	-24-19		Name of Building Owner/Operator (2) HARBAUGH DEVELOPTRS								
Agencies Notified	Type Notification	n n	Stre	et Address	18 GLAS	SBORD	RD				
M DOL	Amended Amendment		City.	State, Zip			ATS NIT	0	80	9-)
Ø DOH	Emergency justification	j	Nam	e of Conta	ct		Telephone Numb			. (
DCA	Cancellation			SAV					_		=
Name of Facility Where	Abatement is Tak	ing Place (ACILITY IN	FORMATION	Type of Facility	· · (4)				-
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Street Address					.9		private & commercia		tings,		
City (5)	TONE -	LINDR	O.			Square Feet	# of Floors		dg. A		
County (6)		IAKD	Cou	inty Code (7) (STATE	Current Use (P	rior if being demolis	1			
Name of Monitoring Firm		Owner	- ASCN		Name of Abatem						=
(8)	NIA				KLET	MCO I	NC				_
Street Address					Street Address 369	S. Spr	EUCE AUE	-			
City, State, Zip Code					City, State, Zip C	ode			36	05	2
Project Manager for Mo	nitoring Firm		Telephone	No.	Telephone No. 856 71		License No.	1.3	7 (_
Start Date (10)	Sche	eduled Con	npletion D	ate (11)	Name of OSHA N		1 9				=
3-6-19		3-16	2-19			N/	4			_	=
Occupancy Status Durin	ng Abatement (Ch	eck only or leriod of Ab	ne). patement		Street Address		¥				
Abatement Performe	d Outside of Norm	al Facility h	lours		City, State, Zip Co	ode	1				
Other - Describe:						- 1			_		=
Scope of Work (Check	all that apply)				Full Con		egative Pressure				
≥3 sf or ≥3 lf 52≥160 sf or ≥260 lf		Demo	vation dition		☐ Gloveba	g Procedure	on-Friable Procedur	e			
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KLEMCO	INC		Hauler II	04	of Waste	<u></u>		. U	. V	<u>t_</u>	_
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Street Address							Subchapter	\$ (Other than K-1,	2)			
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Eagle Industrial Hygiono	Associat	tes, In	G,				onmental, LLC					
Street Address		-				Street Address	onments), LLC					
359 Dresher Road												
City, State, Zip Code						623 Cutier A						
Horsham, PA 19044						Cky, State, Zip C	17.	WW 80 10				
Project Manager for Monitoring	Disea.		1=			Maple Shade	, NJ 08052					
Larry Ragolberg	T. HIMAN		1000	ephone		Telephone No.		License No.				_
Start Date (10)	18-6-	4.4		15-76		856-755-0099	the state of the s	00842				
02 / 27 / 19				4_ /	Pla (11)	Name of OSHA N				186		
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cope of Work (Check all that ag	pp(y)								-	-		-
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Asbestos-Containing historia	(ACM)	Use	ed Sol	aly by	Asha	Description of stas Containing Mai	(9 -	_	-	_	-
TO BE ABATED	•	Me	inten	Incel Staff?	(i.e.	, thermal systems !	naulation	Amount	Removal	Repair	Encapsurate	1
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PARTIES THE LACE PROPERTY MANUAL PARTY AND PARTY OF TAXABLE PARTY.	п			LDEP V Izuler IC	Vasie	Cubic Yards of Wasta	Name of Regist	ered Landilli			-L-trum.	
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ame of Registered Waste Haute Freehold Cartage by, State						and and a second						
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Freehold Cartage	Tipo	T			peration	03/04/2012 Signeture	Morrisville,	PA De				_

Print Form

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Date of Notification (1) 02/25/2019				of Building n Occhio			r (2)				MA	R	4	2019	9
Agencies Notified Type Notification I Limit EPA DEP Amended Amendment			City, St	Address tate, Zip Co iew, NJ 0						fra.		- # · · · · · · · · · · · · · · · · · ·	- 10		
□ Emergency justification) □ DCA □ Cancellation	(including	g	Name o	of Contact					Tel	ephone	e Num	ber			
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Name of Facility Where Abatement is Takin House Street Address	g Place ((3)						of Facility (School (K-1	2)						
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Bergen Name of Monitoring Firm Hired by Building (D		(STATE	Code (7) USE ONLY)			Hous				olish	ed)			
N/A Street Address	Jwner (8)	ASCI	M No.		D&S	Abate	ement Con ement, In		(9)					
City, State, Zip Code						11 R		ren Aven	iue						
Project Manager for Monitoring Firm						Toto	wa, N.	p Code J 07512							
			Telepho			973-3	one No 345-86	685		Licens 0131		•			
03/07/2019								A Monitor ement, Inc	C .						
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire F			nont.				Addres: osena	s ren Aven	ue						
Abatement Performed Outside of Norm Other – Describe: Occupied	al Facility	y Hours	3	1 m 11 m 2 m	_	City, S	tate, Zip								
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	g-money.	Renova Demolit				×	Full Mini Glov	Containme -Enclosure rebag Proce -Exempted	edure					e	
Location of		Locati										8	Abate Ty	ment	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	ed Sole intenar todial S (12)	ly by nce/ Staff?	(i.e. t	os Conta hermal s	systems ing, VA	aterial (insulat T, or	(ACM) ion,	(S	nount pecify or LF)		Removal	Repair	Encapsulate	Enclosure
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Name of Registered Waste Hauler D&S Abatement, Inc.		H	JDEP W auler ID 1996	No.	Cubic Y of Wast TBD		- 1	Name of R Fairless			dfill				
City, State Totowa, NJ			Disposa TBD	I Date		City, State Morrisvill	le. PA					-			
Completed by Oliver Hegedis	Title Proje	ct Ma	nager			nature	70				Date 02/2		019	V. H	



Date of Notification 2/25/18 Name of Building Owner / Operator (2) Type Notification Hometown America Agencies Notified Street Address **EPA Emergency Notification** 272 Village Drive East DEP Initial Notification City, State & Zip Code X DOL Amended Notification Spotswood, NJ 08884 X DOH Cancellation Name of Contact Telephone Number DCA Regine Gary 732-251-5100 **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Vacant Home School (K-12) Street Address Subchapter 8 (Other than K-12) 129 Donald Court X Other (i.e., private & commercial buildings, homes, etc. Square Feet # of Floors Bldg. Age City (5) County (6) County Code (7) 1.000 60+ Spotswood Middlesex Current Use (Prior if being demolished) Residence Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Environmental Tactics, Inc. Global Abatement Services, LLC Street Address Street Address 64 Broad Street 443 Schoolhouse Road City, State & Zip Code City, State & Zip Code Matawan, NJ 07716 Monroe Township, NJ 08831 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number Tom Geiger 732-290-2217 732-605-9062 00714 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 3/5/19 3/6/19 Global Abatement Services, LLC Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 443 Schoolhouse Road Abatement Performed Outside of Normal Facility Hours -City, State & Zip Code Describe: Monroe Township, NJ 08831 Other - Describe: Scope of Work (Check all that apply) X Demolition Renovation Full Containment with Negative Pressure Large Project Mini-Enclosure Quantity is ≥ 3 SF or ≥ 3 LF ACM Glove-bag Procedure Quantity is ≥ 160 SF or ≥ 260 LF ACM X Other: Non-friable Location of Is Location Description of Amount Abatement Type Asbestos-Containing Normally Used Asbestos-Containing (Specify: Removal, (Specify Material (ACM) Solely by Material (ACM) Square Feet or Repair, TO BE ABATED Maintenance or Linear Feet) (i.e., thermal systems Encapsulation or in Facility Custodial Staff? insulation, surfacing, VAT Enclosure) (13)(12)or other miscellaneous) Roof N/A Flashing 4 SF Removal Name of Registered Waste Hauler NJDEP Waste Hauler ID# Cu. Yds. of Waste Name of Registered Landfill Freehold Carting 18693 GROWS City, State Disposal Date City, State Trenton, NJ 3/6/19 Morrisville, Pa Completed By (Print or Type) Title Signature Date Dominick Tringali President Dominick Tringali 2/22/19 ASB-41 JUN 95 G4667

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Date of Notification (1) 2-25-19				Name Berg	of Building Owner en County Tec	/Operato	r (2) Scho	ool	d 14,	MAR		1 20)19	
Agencies Notified	Type Notification	1			Address				i_					- 41
× EPA	× Initial			327 E	East Ridgewoo	od Ave.			2.4	1.			-	. *
EPA DEP DOL	Amended				tate, Zip Code						CONT.	-		
	Amendmen Emergency	(includin	ıa		mus NJ									
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DCA	Cancellation	1			nas Jodice				20	1-343-60	000			
Name of Facility Where	Ahatement is Takir	a Place	(2)	FAC	ILITY INFORMA	TION								
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City (5)							X	etc.)	iivale o	Commerci	iai bui	liulrigs	s, non	ies,
Paramus							Squ	are Feet	# of	Floors		Bldg.	Age	
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Name of Monitoring Firm TTI Environmental I	Hired by Building	Owner (8	3)	ASCI	M No.			atement Con erprises LL		(9)				
Street Address 1253 Church St						Street 28 L	Addre	ess						
City, State, Zip Code								Zip Code						
Moorestown NJ 080)57					Linco								
Project Manager for Moni	toring Firm			Telepho	one No	Teleph				1	1000			
Michael Stucku	_				108800	973-				License N 01129	0.			
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Facility Closed/Vaca	ted Durina Entire F	Period of	Ahater	ment				berland Av	e.					
Abatement Performe	ed Outside of Norm	al Facilit	y Hour	S				Zip Code						
Other – Describe: _		-	-			The state of the s		NJ 07502						
Scope of Work (Check All	That Apply)											-		
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Maintenance Barn/si	mall storage			Х	Ceil	ing plas	ter		25	SF				х
Maintenance Barn Ic	cksmith room			Х		na nlas	one of the same of			SE.				

NJDEP Waste Hauler ID No. 0034140 Name of Registered Waste Hauler Cubic Yards of Waste Name of Registered Landfill DYV Enterprises LLC TRRF waste Managment 10 cy City, State Disposal Date City, State Paterson NJ 07502 Tully Town PA 19007 Completed by Title Signature Date Dorian Carpio Project Manager 2-25-19

PAID

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

CK 4996

Agency Notified Type Notification DEPA DEPA DEPA DEPA DEPA DEPA DEPA DEP	Date of Notification (1)	1		T			g Owner/Operator						Vij
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Amendment # Demonstracy (Antucking places (S) HAWO (ACM) Name of Contact MS SHECHAW Tolephone Number MS Sheck (MC Shec		A CONTRACTOR OF THE PROPERTY O		H	City St	ate Zin (Code		NIM INIM	1.1	4.5		JI
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Name of Monitoring Firm Hitred by Building Owner (9) Best Removal Inc Street Address Street Address 450 South River St City, State, Zip Code City, State, Zip Code City, State, Zip Code Hackensack, N.J. 07601 Project Manager for Monitoring Firm Telephone No. 201-329-7444 00388 Start Date (10) 3 13 19 Scheduled Completion Date (11) Scheduled Completion Date (11) Scheduled Completion Date (11) Scheduled Completion Date (11) Street Address 10 10 10 10 10 10 10 10 10 10 10 10 10 1			00000000				(STATE USE	Current Use (P	rior if being demolished)				
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City, State, Zip Code Cay, State, Zip Code Hackensack, N.J. 07601	Street Address				2 .								
Hackensack, N.J. 07601 Project Manager for Monitoring Firm Telephone No. Telephone No. 201-329-7444 00388 Start Date (10) 3 13 19 Scheduled Completion Date (11) Scheduled Completion Date (11) Size Address Street Address Street Address Street Address 280 Huyler St City, State, Zip Code S. Hackensack, N.J. 07606 Scope of Work (Check all that apply) 23 sf or ≥ 3 ff D≥ 160 sf or ≥ 260 ff Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) To BE ABATED (12) Yes No NA PASSMED NAME of Registered Waste Hauler Best Removal Inc Normally Used Solely by Maintenance/ Custodial Street Address Custodial Street Address City, State 280 Huyler St City, State, Zip Code S. Hackensack, N.J. 07606 Description of Asbestose Containing Material (ACM) (i.e., thermal systems insulation, sustaining, VAT, or other miscellaneous) PASSMED Name of Registered Waste Hauler Best Removal Inc NJDEP Waste Hauler ID No. 17109 City, State Description of Asbestose Containing Material (ACM) (i.e., thermal systems insulation, sustaining, VAT, or other miscellaneous) Abatement Type Abbatement Type Abbatement Type Other miscellaneous) Abatement Type Abbatement Type Abbatement Type Other miscellaneous) Abatement Type Abbatement Type Signature Abatement Type Custodial Street Address City, State N.J. 07606 Abbatement Type Abbatement Type Abbatement Type Other miscellaneous) Abatement Type Other miscellaneous) Abatement Type Abbatement Type Other miscellaneous) Abatement Type Other miscellaneous) Abatement Type Other miscellaneous Other miscellaneous Abate									St				
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Occupancy Status During Abatement (Check only one) □ Facility Closed/Vacated During Entire Period of Abatement □ Abatement Performed Outside of Normal Facility Hours □ Offier - Describle: ② OP AT S : OP A	Start Data (10)	Sahadidad C		an Dai	h (44)				00300	-	-		_
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	J.Maiorano						1	سممدن	> 2/	4	19		_

2019-02-27 11:02

Shade Environmental 1 >> 609 633 0664

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State of New Jersoy NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 5:50 and 5:16)

MAR 4 2019

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Date of Notification (1)	3				Nama	of Bullding	Owner	Operator (2)				-	
02 /	27 /	19			Ben	hard Coh	lift.			OL - 10	DAY			
Agencies Notified	Type Notifical	tion			Street	Address		-	-		-	1		-
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⊠ DOTMD	☐ Amended				CIN S	late, Zip C	nda	COVID-000		·			+	
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The district					FAC	ILITY IN	FORM	MOITA	213430 (0.25)					
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Cohn Residence						100			School (K-12)	454			
Street Address					8,1				S Other (i.e., pr	vate and come	nerolal b	ulkana	8.	
									homes, etc.)				i.	- 1
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Camden									Residenco					
Name of Monitoring Firm	Hired by Build	ing Cr	whor (8)	ASCM	No.	Name	of Abateme	nt Contractor (9)	-		-		
Management & Env	riro. Consult	ing 5	ienvic	83	Š		Sha	de Enviro	nmental, LLC					-
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PO Box 341							623	Cutier Av	enue					
City, State, Zip Code							1	tate, Zip Co	OTHER DESIGNATION.	1-A-4-8984			NAME OF TAXABLE PARTY.	
Chesterfield, NJ 08	515								NJ 08052					
Project Manager for Mon	2000-000-000-	-		Tale	phone I	Ma		ena No.	110 04000	License No.			_	\dashv
Bill Weisgarber	morning			1	09-298			755-0099		00842				
Start Date (10)	(6	ahadi.	day of Pa	. 7	tion Da			of OSHA M		20000		-	_	\dashv
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			17			19		SL Analyti	eal, inc.	27]
Occupancy Status During	7		33.50	577				Address	+1-		- Can - Can			
☑ Fachity Closed Nostu								Route 13						
Abatement Performed Time of Abatement:								tate, Zip Co						
							Cin	reminson	, NJ 08077					
Scope of Work (Chack a	li that apply)	10 11.00						T Cult Anna	olemenek sulth blan	ather Change				
元 >3 af or >3 If		81	⊠ Re	nava)	lon			Mini-Enc	ainment with Neg losure	BING LIGSSRIE				1
⊠ ≥3 sf or ≥3 lf 図 ≥160 sf or ≥260 M .			⊠ Re □ De	molt	on.		Č	Glovaba	Procedure					
					-	,		Non-Exa	mpted (") and No	n-Friable Proce	dure			
				Loca			_				A	batom	ent T	ура
Location Aspeston-Containing		. 1			ely by	Asha		escription o	f terial (ACM)	Amount	20	2	033	m
TO BE AB	ATED	'			noo/		. them	al systema i	insulation,	(Specify	Remo		Encapa	€acica
IN Facil	lty	i	Cus	(12)	Stany			acing, VAT, miscellane		SF or LF)	1	1	elichus(LE S
(10)		Ì	Yes	No		1	Ottadit	Mod Bidings	ONE		1		8	
Family Room, Hall, S	thomas & Off	Dee		Z	0	Floor T	II.	(III		570 SF	Z	0	O	-
Cattley Noons, France	iniage or ou	100	THE RESIDENCE OF	-	-	FIUOF	iic .			0700F	-			<u>D</u>
4.														
				-	-		and delivery	America	***	-	_	-		
Name of Continued late.	eta lifal.s.	-				Marke	1 Action	Manda -2	Name of St. 1	Amana A Japa				ш
Name of Registered Was	zie iusniei.				1 ABOLY		Cubic	Yards of	Name of Regis					- 1
Freshold Cartage					15939		1		Fairloss L	angtill				
City, State				1,000			1000000	sal Date	City, State					
Freshold, NJ							03/6	14/2018	Morriaville	, PA				
Completed By (Print or T	(ype)	Title		•	Maria Carlo			gnature			Dale			
Christina Lynch		VI	ce Pr	esid	ent of	Operatio	sit i	Maria			2/2	71	9	
		1				-	_					Charles and Street	PRINCES.	-

CT NAL

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

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Date of Notification (1	1) ebruary 27, 2019			e of Build	ing Owner / Operate	or (2)						
Agencies Notified	Type Notification		Stree	t Address	3			是原	FI	W	1	
DEP					ge Avenue			1				
⊠рон ⊠рог	Initial Amended Amendment		1	State & Z land Parl	ip Code k, NJ 08904			MAH	Conf.	201	9	1 to 10
∐DCA	Cancellati		-	of Conta Ashman	act			200 200 200 200	elepho 07-624		100	er
			F.A	CILITY	INFORMATIO	N						
Name of Facility Whe Bank of America	re Abatement is Ta	king Place (3)			Type of Fa	acility (4) ool (K-12)						
Street Address						hapter 8 (Other	er than K-12)					
35 Woodbridge Aver	nue				Othe Square Fe	er (i.e., privat	e & comme				tc.)	
City (5)						000	1 100rs	B	dg. Age	70		
Highland Park					Current Us Bank	se (Prior if bei	ng demolishe	d)				
County (6) Middlesex		County Coo										
Name of Monitoring Fi Arcadis US, Inc.	irm Hired by Buildin	g Owner (8)		ASCM	No. Name of A Synatech,	batement Cor	ntractor (9)					
Street Address					Street Add	Iress			10000			
35 Columbia Road City, State & Zip Code					829 Radio	& Zip Code						
Branchburg, NJ 088	76					Harbor, NJ (08087					
Project Manager for M			elephone 08-526-10		Telephone 609-296-69	Number		License Nur	nber 0081	7		
Scheduled Start Date March 9, 20		duled Complet	tion Date (5.000.00	Name of O Synatech,	SHA Monitor						
Occupancy Status Dui	ring Abatement (Ch d/Vacated During E	eck only one)			Street Add 829 Radio	ress						
	erformed Outside o					& Zip Code				_		
Other - Desc	ribe: pied During Abatem	ent				Harbor, NJ 0	8087					
Scope of Work (Check												
	(an triat apply)				1		inment with N	legative Pres	sure			
≥3 sf or ≥ 50 lf			Renovati		Ī	Mini-Enclo		3				
≥160 sf or ≥260) If	Ц	Demolitio	n	[Glovebag						
Loca	ation of	In I neet	ion Norma	allu I laad			npted(*) and I	Von-Friable F				
Asbestos-Contair TO BE	ning Material (ACM) ABATED	Solely b	ion Norma by Mainter odial Staff	nance or	Asbestos-	iption of -Containing al (ACM)		ount (Specify SF or LF)		atem	ent T	Гуре
	Facility 13)					nal systems	- 1	50 ZE16			ш	
(13)					urfacing, VAT scellaneous)			Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A					oval	air	ulate	sure
SEE ATTACHED	LIST - Pg. 2 of 2											\vdash
									7			
Name of Registered W	aste Hauler	NJDEP I		Cubic	ards of Waste	Name of F	Registered La	andfill				
Synatech, Inc.		Hauler II	7429	80		Fairless H	Hills					
City, State				Dispos	al Date	City, State						
ittle Egg Harbor, NJ				April 3	0, 2019	Morrisvill	le, PA					
Completed By	Title			Signatu			Date					
Diane Aloia	Exe	cutive Admini	strator	1000	ne alora		Februa	ry 27, 2019				

Agencies Notified Type Notification Street Address	CK 7850 PAU		(Pursuar	nt to NJA	C 8:60 a	and 12:12	MENT 0)						W		
Agencies Notified Type Notification Street Address	Date of Notification (1) 02/27/19			Name 329 E	of Building	g Owne	r/Operator	r (2) /ners	LLC		1111			0045		
Diep Dock				Street	Address						MAI	Η	4	2019	9	
DOH	DEP Amended	м		City, S	tate, Zip C	Code				£				179	4	ŭ
DCA	Emergency	(including	g		5i					Tel	enhone			nij Name	B (252)	
Street Address Subchapier 8 (Other than K-12) Subchapier 8 (Other Labor 8 (Other 1	Jactinoation)			329 N	New Bru	nswic		e Ow	ners LL							
School (K-12) Subchapter 6 (Other than K-12) Subchapter 6 (Oth	Name of Facility Where Abatement is Takin	g Place	(3)	FAC	CILITY INF	ORMA	TION	Туре	of Facility	(4)						
Square Feet								П	School (K Subchapte Other (i.e.	-12) er 8 (Othe	er than & comm	K-12 nercia	?) al buil	dings	, hom	ies,
Union Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) AAA LEAD PROFESSIONALS Street Address Street Address G WHITE DOVE COURT City, State, Zip Code LAKEWOOD, NJ 08701 Project Manager for Monitoring Firm Telephone No. Telephone No. Telephone No. Telephone No. 732-668-9078 License No. 1200 Start Date (10) 03/10/19 Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other — Describe: Scope of Work (Check All That Appty) Start Date (10) 1								Squa		# of	Floors		E	Bldg. /	Age	
Street Address Street Address Street Address GWHITE DOVE COURT City, State, Zip Code City, State, Zip Code City, State, Zip Code City, State, Zip Code LAKEWOOD, NJ 08701 Telephone No. 732-668-9078 License No. 732-668-9078 1200 Start Date (10)						y)		Curre	ent Use (P	rior if beir	ng dem	olish	ed)			
Street Address Street Address Street Address 6 WHITE DOVE COURT	Name of Monitoring Firm Hired by Building	Owner (8)	ASCI	M No.		Name AAA	of Aba	atement Co	ontractor	(9)					
City, State, Zip Code City, State, Zip Code	Street Address						Street	Addre	SS		NALO	!				
Project Manager for Monitoring Firm	City, State, Zip Code						City, St	tate, Z	ip Code						-	
Start Date (10) 03/10/19 03/10/10/19 03/10/19 03/10/19 03/10/19 0	Project Manager for Monitoring Firm			Telepho	one No.					08701	Licens	se No	1			
O3/10/19 O3/13/19 Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other – Describe: Scope of Work (Check All That Apply) ≥ 3 sf or ≥3 if ≥ 160 sf or ≥260 if Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) INTERIOR INTERIOR PIPING PIPING PIPING PIPING PIPING PIPING Name of Registered Waste Hauler NEWARK CARTING Name of Registered Landfill IESI Disposal Date City, State Street Address 6 WHITE DOVE COURT City, State, Zip Code LAKEWOOD, NJ 08701 Street Address 6 WHITE DOVE COURT City, State, Zip Code LAKEWOOD, NJ 08701 Street Address 6 WHITE DOVE COURT City, State, Zip Code LAKEWOOD, NJ 08701 Street Address 6 WHITE DOVE COURT City, State, Zip Code LAKEWOOD, NJ 08701 Street Address 6 WHITE DOVE COURT City, State, VIII Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Asbestos Containing Material (ACM) (i.e. thermal systems insulation, Specify SF or LF) Renovation Vinin-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Asbestos Containing Material (ACM) (i.e. thermal systems insulation, Specify SF or LF) Renovation Type Abatement Type Abatement Type Abatement Type Asbestos Containing Material (ACM) (i.e. thermal systems insulation, Specify SF or LF) Renovation Type Abatement Type Abatement Type Asbestos Containing Material (ACM) (i.e. thermal systems insulation, Specify SF or LF) Renovation Type Abatement Type Abatement Type Abatement Type Asbestos Containing Material (ACM) (i.e. thermal systems insulation, Specify SF or LF) Renovation Type Abatement Type Abatement Type Asbestos Containing Material (ACM) (i.e. thermal systems insulation, Specify SF or LF) Renovation Type Abatement Type Abatement Type Asbestos Containing Material (ACM) (i.e. thermal systems insulation, Specify SF or LF) Renovation Type Asbestos Containing Material (ACM) (i.e.	Start Date (10)	Sabadul	lad Car	oon ledi o -	D-1- (44)		732-6	668-9	078				**			
Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other – Describe: Scope of Work (Check All That Apply) State	03/10/19	03/13/	19	ripietion	Date (11)						NALS					
Abatement Performed Outside of Normal Facility Hours City, State, Zip Code LAKEWOOD, NJ 08701 Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure	The state of the s									OURT						
Scope of Work (Check All That Apply) Sope of Work (Check All That Apply) Sope of Work (Check All That Apply) Sope of Work (Check All That Apply) Sope of Work (Check All That Apply) Sop	Abatement Performed Outside of Norm	al Facility	y Hours	nent s			City, St	ate, Z	ip Code							
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Secretion of Asbestos-Containing Material (ACM) Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A							×	Mir Glo	i-Enclosur vebag Pro	e cedure						
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Yes No N/A INTERIOR PIPING Name of Registered Waste Hauler NEWARK CARTING Asbestos Containing Material (ACM) Maintenance/ Custodial Staff? (12) Yes No N/A PIPING Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) For LF Page 1 Page 2 Page 2 Page 2 Page 3 Page 4 Page		Is	Locati	ion				INOI	1-Exempte	a (*) and	Non-F	riable				t
TO BE ABATED Custodial Staff? (12) Ves No N/A s No N/A Ves No No N/A Ves No No N/A Ves No No No No No No No N		Use	d Sole	ly by	Achae				(ACM)					Ту	ре	
Name of Registered Waste Hauler NEWARK CARTING City, State NINTERIOR PIPING 70LF x Name of Registered Landfill Hauler ID No. of Waste 5 Disposal Date City, State	TO BE ABATED In Facility	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	todial S	2430	(i.e.	therma surfa	I systems acing, VAT	insula , or	tion,	(Sp	ecify		Remova	Repair	Encapsula	Enclosur
Name of Registered Waste Hauler NEWARK CARTING NIDEP Waste Cubic Yards of Waste Hauler ID No. 04509 Output Disposal Date Disposal Date Output Disposal Date City, State	INTERIOR	Yes	No	N/A			DIDILIO								te	Ф
NEWARK CARTING City, State Disposal Date City, State Disposal Date City, State	INTERIOR					PIPING			70)LF		х				
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City, State Disposal Date City, State	20 PM 10 PM		H	auler ID		of Wa				Registere	ed Land	dfill			-	
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Completed by JOSEPH PERLSTEIN Title Signature Date 02/27/19		100000000000000000000000000000000000000	ER								T			9		

State of New Jersey

State of NJ

D&S Proj. #: 19-35	7	_j	PAI		(Pi	irsuant to NJ	AC	es 8:	tos Abatement 60 and 12:120	t)		56. 444		ŋ	V/		The state of the s
Date of Notification (1)	i.		Name	of Buildi	ng	Owner/Operator	(2)	_				M/	AR	4 21	179	- 11	31!
	I otification	_		hew dar	nto	n					1	_				1	
☐ EPA ☐ Initial		·	Street /	Address												77	
DEP Amend		- 1												4.1%	4		
DOL Amendm		_	City, St	ate, Zip (Cod	de		_		_							
DOH (include	ency		MA	PLEWO	00	D, NJ 07040											
justific			Name o	f Contac	t						ĪΤ	alanh	one Nu				
DCA Cance	llation		MA	PLEWC	00	D, NJ 07040					1.	Cicpin	one Mu	nber			
Name of facility with a second					F	ACILITY INFOR	MAT	ПО	N								
Name of facility where abaten	nent is ta	king	place (3)							\top	Type of F	acility	(4)				
MAPLEWOOD, NJ 0704	10												ol (K -	12)			
Street Address					_			_		_		Subc	hapter	B (Othe	er tha	n K-1	2)
												Other	(Privat	e/Com	merc	ial	50
City (5)											Square F		./Home		_	DIA	
0.07		Co	unty (6)				C	Cou	inty Code (7)	-	oqual C		# 01 F	10015		Blag	. Age
MAPLEWOOD		AC	sex				(5	Sta	te use only)		Current I	Jse (F	Prior if h	eina d	-l-	ichad	
Name of Monitoring Firm Hired	by Bldg.	Owi	ner (8)	-	_	ASCM No.		_						omig a	311101	isrieu,	1
			(-)			ASCIVI No.			Name of Abatem								
Street Address		_			_			41	D & S RESTO	ORA	TION, IN	C.					
								П	Street Address								
City, State, Zip Code								1	20 California								
								П	City, State, Zip Co								
Project Manager for Monitoring F	irm		T	Phone N	lum	ber	_	11	Paterson, NJ)3						
					1071000			П	Telephone Number 973-345-802				Licen	se Nun			
Start Date (10)	IS	Sched	d. Comple	tion Date	P [1	1)	_	lŀ	Name of OSHA M					0116	9		
03/04/19	- 1			tion batt	٠,	1)			D & S Restor								
Occupancy Status During Abater	ment (Ch	13/2	2/19		_			1	Street Address		, me.						
Facility closed/vacated duri	ina entire	neri	od of obe	to t					20 California	Aven	ue						
L / waternerit performed outs	ide of nor	mal	facility ho	tement. urs-				C	City, State, Zip Coo					_			
Describe: NORMAI					_		_										
Scope of Work (check all that ap		_			_		-		Paterson, NJ (0750.	3						
≥3 sf or >3 lf										Full	Containme	ent w/	negativ	e pres	sure		
☐ ≥160 sf or ≥260 lf									№	Min Min	i-enclosure	9					
	Demo	0.070.747							F	Glo	vebag prod	edure		020000			
Location of asbestos-containing	by ma	ation ainte	normally nance/cus	used so	lely	1				1 1401	n-Exempted	u () a	na Non	-friable	Pro	Edure	9
material (acm) to be	staff(12)		otodiai		Description	of a	asb	estos-containing		Amou	nt		е	e	n	E
abated in facility (13)	Yes		No	N/A	\	material (A	CM)		-		(Spec LF)		or	m o	p a	C	C
basement laundry room		-									LF)			V	i	a p	L
basement art room	-	-	X			sheetrock cei		,			50 sq ft			e	r		-
and the same of th	-	4	X			sheetrock ceil	ing				100 SQ F	T			一	片	ዙ
	-	4												H	H	H	片
	-	4												H		1	H
Registered Waste Hauler	INT	IDE	O Have											片	H	片	1
D & S RESTORATION, INC.	.	JDEF 350	P Hauler I	D#		bic Yards of Wa yds.	ste	N	ame of Registered	Land	dfill	_				Ш	
City, State				Disposal				1	TULLYTOWN,	RES	OURCE	REC	OVER	Y			
PATERSON, NJ 07503				03/05/					City, State	ъ.							
Completed by (Print or Type)	Title				T	Signature			TULLYTOWN,	PA							
BOGDAN JOLDZIC	PRES				_								Date	0			
ASB-41	* Do not	use t	this form f	or asbes	tos	licensure exemp	oted	ac	tivities.			1)2/22/	9	_		

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YIGHT DA	NO	TIFICA (Purs	TION O	F ASBEST NJAC 8:60	OS A and	12:120)	ENT		A 1					1 1 1 1 1
Date of Notification (1) 2/27/19	图 馬 左		me of B	uilding Owr chulte	ner/Op	perator (2)	1		MAK	4 2	019	1	47
Agencies Notified Type Notification		Str	eet Add	ress					-	4:	5			
EPA Initial Amended Amendment #_				, Zip Code ton Park,	NJ (07640				7£.¥	*			
Emergency (incl	uding		me of C						Tele	phone Nur	mber			
DCA Cancellation		K	athy S		AATI	ON		Siller Street						
Name of Facility Where Abatement is Taking P	ace (3)		FACILI	TY INFORI	MAII	UN	Type of	Facility (4)						
Residential Home	(-)						☐ Sc	nool (K-12))		25			
Street Address							Su X Ott	bchapter 8 ner (i.e. pri	(Othe vate &	r than K-1 commerc	2) ial buildi	ngs, h	omes	,
							Square	.)		Floors		ig. Ag		\dashv
City (5)							2300	reet	2	1 10010		5+/-		
Harrington Park County (6)		C	ounty C	ode (7)				Use (Prior		ng demolis	hed)			
Bergen		(S	TATE U	SE ONLY)		_		ential Ho		10)		41		-
Name of Monitoring Firm Hired by Building Ow	ner (8)		ASCM	No.				ment Cont Abateme		(9)				
Project Manager Street Address						Street	Address							
Street Address				10				and Ave						
City, State, Zip Code							tate, Zip	Code ok, NJ 0	7663					
Project Manager for Monitoring Firm	-	T	elephon	e No.		Teleph	none No.			License	No.			
Project Manager for Monitoring 1 mm			327 / 310			1	600-31			01305				
Start Date (10)	chedule	d Com	oletion D)ate (11)		Name	of OSHA	A Monitor						
2/28/19 Occupancy Status During Abatement (Check		9)				Street	Address	ř.						
			ent											
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Normal Other – Describe:	Facility	Hours			-	City, S	State, Zip	Code						
Scope of Work (Check All That Apply)							-				_			
≥3 sf or ≥3 lf x ≥160 sf or ≥260 lf	Section 2	enovat emoliti				Ė	Mini	Containme -Enclosure	9		Pressu	re		
	_				E	t	Non	ebag Prod Exempted	d (*) ar	d Non-Fri	able Pro			
	Is	Location	on										ement pe	
Location of	N	lormall d Solel	y		D	escriptio	n of	(1011)	,	Amount		T		
Asbestos-Containing Material (ACM) TO BE ABATED	Ma	intenar	ice/	Asbesto (i.e. t	os Cor herma	ntaining al systen	Materia <mark>l</mark> ns insula	tion,	(Specify	Ren	R	nca	Encl
In Facility	Cust	todial S (12)	staff?			acing, V			S	F or LF)	Removal	Repair	Encapsulate	Enclosure
(13)	Yes	No	N/A	-	ou.o.		,				=		ate	е
Kitchen	165	X	1975			VAT	i i		1	24 SF	×			
Laundry Room		X				VAT	3			89 SF	×			
Hallway		X				VAT	n e			47 SF	x			
		X	-			VAT			2	40 SF	×			
Family Room Name of Registered Waste Hauler		-	JDEP V	Vaste	10000	ic Yards	V)			tered Land		W		
All Stages Abatement		10000	lauler ID 03659	Section 1	2 y				-	ral Sani	tary La	ndfil		
City, State Saddle Brook, NJ					Disp TBI	oosal Da D	te	City, Sta Pen A	_{ite} rgyl, f	PA				
Completed by	Title					Signatu	ire//	1/1	/_		Date	10		
Richard Cristofol	Pres	sident				1	MA	1/-	_)	2/27/	19		

State of New Jersey

AIN CR		(Pursua	ant to NJ	AC	8:60 and 5:1	6)					
Date of Notification (1)	19		1 1 2 2 2 2			wner/Operator		M	AR	4 20)19	
Agencies Notified Type Notifi	cation			et Address			.,					1
⊠ EPA ☐ Initial	oation					Suite 400		lame.				
☑ DOLWD ☑ Amende	ed			State, Zip	- 123				19		- 55	
☑ DOHAmendr			-					10.00	70 of early.		PLS 2 7	
DCA Emerge (NJAC 5:23-8)		ling		oomfield e of Conta	-	07003		1				
(NJAC 5:23-8) justifica								Telephone N				
Cancen	ation			arren Spi	No.			908-670-	5711			
Name of Facility Williams Alexander				CILITY	NFO	RMATION						
Name of Facility Where Abatement is	Taking Pla	ace (3)					Type of Facility					
Commercial							School (K-1)	2)				
Street Address							☐ Subchapter ☐ Other (i.e., p	8 (Other than herivate and com	(-12)	huildin	ae	
1200 Randolph Road-Buildin	g 4						homes, etc.)	inicida	Juliuli	gs,	
City (5)							Square Feet	# of Floors		Bldg. A	\ge	
Plainfield	4											
County (6)			Cou	inty Code (7)(ST	ATE USE ONLY)	Current Use (Pr	ior if being den	nolished)			
Union												
Name of Monitoring Firm Hired by Bui	Iding Own	er (8)	ASCN	l No.	Na	me of Abatem	ent Contractor (9)					
Bio Terra Solutions						ALL PRO MA	NAGEMENT L	LC				
Street Address			- da		Str	reet Address						
P.O. Box 1224					1	27 Outwater	Lane					
City, State, Zip Code					Cit	y, State, Zip Co	ode					
Union, NJ					(Garfield, NJ	07026					
Project Manager for Monitoring Firm		Te	elephone	No.	_	lephone No.		License No	lis			
Rick Eustaquio	2		973-49	4-3762	9	73-928-4888		1188				
Start Date (10)	Scheduled	Comp	letion D	ate (11)	Na	me of OSHA M	lonitor	1.00				
//			30 /		1	ALL PRO MA	NAGEMENT L	l C				
Occupancy Status During Abatement				the second		eet Address		Text S				
☐ Facility Closed/Vacated During Ent					1	27 Outwater I	ano					
☐ Abatement Performed Outside of N	ormal Fac	ility Ho	urs - De	scribe		y, State, Zip Co						
Time of Abatement:AM	PM/	PI	M	_AM								
Scope of Work (Check all that apply)						Garfield, NJ	07026					
<u> </u>							ainment with Neg	ative Pressure				
≥3 sf or ≥3 lf≥160 sf or ≥260 lf		Renova					losure	auro i roccure	*			
□ ≥100 \$1 01 ≥200 II		Demoli	tion			☐ Glovebag	Procedure mpted (*) and No	n Frieble Deser				
		Is Loc	ation	Т		□ NOII-EXE	inpled () and No	n-Friable Proce				Grive-v
Location of		Norm				Description o	f			batem		ype
Asbestos-Containing Material (ACM			olely by nance/			Containing Ma	terial (ACM)	Amount	Remova	Repair	Encapsulate	Enc
TO BE ABATED IN Facility			I Staff?	(i.e		ermal systems i		(Specify	nov	air	aps	Enclosure
(13)	-	(12	2)	-		her miscellane		SF or LF)	8		ula	ure
	Ye	s No	N/A		Sav						e e	
TBD				TBD				TBD				
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			10000									
										П		
Name of Registered Waste Hauler			NJDEP	Waste	Cut	oic Yards of	Name of Regis	tered I andfill		1-		
Newark Carting			Hauler I	D No.	Wa	ste		tral Sanitary	Landfi	11		
City, State			0283		Die	s Needed posal Date		Carnary	_unun	•		
Newark, NJ						BD	City, State	DA				Ţ
Completed By (Print or Type)	Title				'		Pen Argyl,	ra				
Allen Monchik	Title	. 4 . 2				Signature			Date			
CD.44	Proje	ct Mai	nager			Allen	Monchik	2	2/27/	19		

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

Agencies Notified EPA		7.30
Agencies Notified EPA		7.30
EPA		
DOLWD Amended Amendment # ☐ DCA ☐ Emergency (including justification) ☐ Cancellation ☐ Cancella		- Cad
Amended Amendment # Emergency (including justification)	200 a	- 4
DCA	- 1-10 VIVIII	
Name of Contact Telephone Number 908-670-5711		355 565
Cancellation Warren Sprake 908-670-5711		
FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Commercial Street Address 1200 Randolph Road- Building 18 City (5) FACILITY INFORMATION Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) Other (i.e., private and commercial binomes, etc.) Square Feet # of Floors B		
Name of Facility Where Abatement is Taking Place (3) Commercial Street Address 1200 Randolph Road- Building 18 City (5) Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) Other (i.e., private and commercial binomes, etc.) Square Feet # of Floors B		
Commercial Street Address □ School (K-12) 1200 Randolph Road- Building 18 □ Subchapter 8 (Other than K-12) □ Other (i.e., private and commercial behomes, etc.) City (5) Square Feet # of Floors B		
Street Address 1200 Randolph Road- Building 18 City (5) Subchapter 8 (Other than K-12) Other (i.e., private and commercial binomes, etc.) Square Feet # of Floors B		
City (5) Square Feet # of Floors B		
City (5) Square Feet # of Floors B	uildings	i.
	Ildg. Age	
Plainfield	iug. Age	5
County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished)		
Union Union		
Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9)		
Bio Terra Solutions ALL PRO MANAGEMENT LLC		
Street Address Street Address		
P.O. Box 1224 27 Outwater Lane		
City, State, Zip Code City, State, Zip Code		
Union, NJ Garfield, NJ 07026		
Project Manager for Monitoring Firm Telephone No. Telephone No. License No.		
Rick Eustaquio 973-494-3762 973-928-4888 1188		
Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor		
/ / 04 / 30 / 19 ALL PRO MANAGEMENT LLC		
Occupancy Status During Abatement (Check only one) Street Address		
☐ Facility Closed/Vacated During Entire Period of Abatement 27 Outwater Lane		
Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code		
Time of Abatement:AMPM/PMAM Garfield, NJ 07026		
Scope of Work (Check all that apply)		
≥3 sf or ≥3 lf		
☐ ≥160 sf or ≥260 lf ☐ Demolition ☐ Glovebag Procedure		
□ Non-Exempted (*) and Non-Friable Procedure		
	oatemen	nt Type
Description of	Re	9 9
TO BE ABATED Maintenance/ (i.e., thermal systems insulation, (Specify)	Repair	Enclosure
IN Facility Custodial Staff? surfacing, VAT, or (13) SF or LF)		Enclosure Encapsulate
Yes No N/A		ate
TBD		
Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill		
Name of Registered Waste Hauler Newark Carting Name of Registered Landfill Newark Carting Name of Registered Landfill	i	
Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Name of Registered Landfill		
Name of Registered Waste Hauler Newark Carting NJDEP Waste Hauler ID No. Waste Grand Central Sanitary Landfill Other Class.	l	
Name of Registered Waste Hauler Newark Carting City, State Name of Registered Waste Hauler NJDEP Waste Hauler ID No. 0283 City, State Cubic Yards of Waste Waste As Needed Disposal Date City, State		

ASB-41 JAN 13

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

2/27/19

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	in.	1.9	1	11	100

Date of Notification (1)					Nam	e of Buildir	ng Ov	wner/Operator	(2)	-			1	11 1
02/	27 /	19			M	uhlenberg	g Ur	ban Renewa	I, LLC	MAR	Δ	2019	of the Parket	
Agencies Notified	Type Notific	ation			Stre	et Address			***	MAIL	4 1	WIS	- 1	200,200
⊠ EPA	☐ Initial			- (2	Broad Str	eet,	Suite 400					i ir	
☑ DOLWD						State, Zip		PRESENTATE PRESE	Nul Trimer	*			1.4	
□ DOH	Amendm		-	25		oomfield,						1		
(NJAC 5:23-8)	☐ Emerger justificat		ciuain	9		e of Contac				Telephone N				
	Cancella				W	arren Spr	ake			908-670-				
					FA	CILITY II	NFO	RMATION						
Name of Facility Where A	batement is	Taking	Place	(3)	- Committee				Type of Facility (4)				
Commercial									School (K-12))				
Street Address									Subchapter 8	(Other than K	(-12)			
1200 Randolph Roa	d- Building	17							Other (i.e., pr homes, etc.)	ivate and com	mercial b	uilding	JS,	
City (5)									Square Feet	# of Floors	TB	ldg. A	ae	
Plainfield													90	
County (6)		-			Cou	inty Code (7	7)(ST/	ATE USE ONLY)	Current Use (Prid	or if being den	nolished)		_	-
Union					100000000	,	**	,	Carrant GGG (i iii	or it being den	iolistica)			
Name of Monitoring Firm I	Hired by Buil	ding C	wner	(8)	ASCN	l No.	Na	me of Abateme	ent Contractor (9)					
Bio Terra Solutions				• •			2000		NAGEMENT LL	C				
Street Address				-			-	reet Address	OLINEITI EE					
P.O. Box 1224							5.30155	27 Outwater	l ane					
City, State, Zip Code								y, State, Zip Co						
Union, NJ								Garfield, NJ						
Project Manager for Monit	oring Firm			Те	lephone	No.	-	lephone No.	0.020	License No				
Rick Eustaquio				1		4-3762		73-928-4888	í	1188	•			
Start Date (10)		Sched	uled C			ate (11)	-	me of OSHA N		1100				
					80/				NAGEMENT LL	.c				
Occupancy Status During							Str	eet Address						
□ Facility Closed/Vacated	d During Enti	re Per	iod of	Abat	ement		2	7 Outwater	Lane					
Abatement Performed	Outside of N	ormal	Facility	у Но	urs - De	scribe	Cit	y, State, Zip Co	ode					
Time of Abatement:	AM	PN	Λ/	_PN	Λ	_AM		Sarfield, NJ						
Scope of Work (Check all	that apply)											111		
≥3 sf or >3 lf			□Re	nova	tion				ainment with Nega	ative Pressure				
☐ ≥160 sf or ≥260 lf			⊠ De					Glovebad	Procedure					
						_		☐ Non-Exe	mpted (*) and Non	-Friable Proce	edure		1100000	
Location o				Loca	ation						At	ateme	ent T	уре
Asbestos-Containing M		1)			lely by	Ashe	stos	Description o Containing Ma		Amount	R	Re	Щ	Щ
TO BE ABAT	ED `	×			ance/		., the	ermal systems i	insulation,	(Specify	Remova	Repair	ıcar	Clo
IN Facility (13)	1		Cusi	12) (12				surfacing, VAT,		SF or LF)	val	-	Encapsulate	Enclosure
(10)			Yes	No	100000		Ot	her miscellane	ous)				ate	"
TBD					\boxtimes	TBD				TBD				П
										2 211				
Name of Registered Waste	Hauler				NJDEP	Waste	Cut	oic Yards of	Name of Registe	arod Landfil			П	
Newark Carting					Hauler I	D No.	Wa	ste	Grand Cent		l andfil			
City, State		-			0283			s Needed posal Date	City, State	umury			0.11	_
Newark, NJ							11.010.00	BD	Pen Argyl, F	Δ				
Completed By (Print or Typ	ne)	Title							. on Algyi, i		D .:			
Allen Monchik	,	N. A. S. S.		Mar	nager			Signature	7.1 1.	,	Date			
, mon mononic		-	oject	ivial	lager			Allen	Monchik		2/27/	19		

Date of Notification (1)				Name	e of Buildin	a Ov	vner/Operator (2)	5.1				1
Pro-construction Construction for the Asset Assets	7/	19		The sections			ban Renewal		MAF	<i>A</i>	2019		
Agencies Notified Ty	ype Notification	on		Stree	t Address				falt rr	4	LUIJ		la met
] Initial			2 E	Broad Str	eet.	Suite 400		il .				
	Amended				State, Zip (_						-	_
DOH □ DCA □	Amendment	SERVER COMPANY		1	omfield,			i é					
(NJAC 5:23-8)] Emergency justification)	(incluaing]		of Contac	50000			Telephone N	lumbor			-
Control of the Contro] Cancellation				rren Spra				908-670-				
							RMATION		1 000 010	0111	-		
Name of Facility Where Aba	tement is Tak	ing Place	(3)		01.2.1.1.11	0	MATION	Type of Facility	(4)				
Commercial		•						School (K-1)					
Street Address								Subchapter	8 (Other than k	(-12)			
1200 Randolph Road-	Building 15	5						Other (i.e., p homes, etc.)	rivate and com	mercial	building	js,	
City (5)								Square Feet	# of Floors		Bldg. A	ge	
Plainfield								250					
County (6) Union				Cour	nty Code (7)(STA	ATE USE ONLY)	Current Use (Pr	ior if being den	nolished)		
Name of Monitoring Firm Hir	ed by Building	g Owner (8)	ASCM	No.	1		ent Contractor (9)					
Bio Terra Solutions						1	ALL PRO MA	NAGEMENT L	LC				
Street Address						Str	eet Address						
P.O. Box 1224					4	2	7 Outwater I	Lane					
City, State, Zip Code							y, State, Zip Co			,			
Union, NJ							Barfield, NJ	07026					
Project Manager for Monitori	ng Firm		2000	ephone		1000	ephone No.		License No				
Rick Eustaquio	10.			73-494			73-928-4888		1188				
Start Date (10)		eduled Co			700 g 1 6 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1000	me of OSHA M	onitor NAGEMENT L	LC			1150000	
Occupancy Status During Ab							eet Address						
☐ Facility Closed/Vacated ☐				ment		0.000000	7 Outwater L	200					
☐ Abatement Performed Out	tside of Norm	al Facility	Hou	rs - Des	cribe		, State, Zip Co						
Time of Abatement:	AM	PM/	_PM	_	AM		arfield, NJ(
Scope of Work (Check all that	at apply)												
≥3 sf or ≥3 If		☐ Rei	novat	ion				ainment with Neg	ative Pressure	J			
≥160 sf or ≥260 lf		☑ Der					☐ Glovebag	Procedure					
							☐ Non-Exer	mpted (*) and No	n-Friable Proc	edure			
Location of			Loca lorma				Description	•		Α	bateme	ent T	уре
Asbestos-Containing Mat				ely by	Asbes	stos	Description of Containing Mat		Amount	8	Re	四	回
TO BE ABATED IN Facility	2	100.000	ntena	ince/ Staff?	(i.e.		rmal systems i		(Specify	Remova	Repair	cap	clos
(13)			(12)	otuir.			surfacing, VAT, her miscellaned		SF or LF)	/ <u>a</u>		Encapsulate	Enclosure
		Yes	No	N/A			noi middellariet	Jus/				ite	
TBD					TBD				TBD				
											П	П	
			П	Ī									
Name of Registered Waste H	lauler			JDEP V	Vaste	Cuh	oic Yards of	Name of Regis	tered Landfill		, _	ш	
Newark Carting			9.1	lauler I		Was	ste		tral Sanitary	Landfi	ill		
City, State			0283			s Needed posal Date	City, State		-wiiwii				
Newark, NJ							BD	Pen Argyl,	ΡΔ				
Completed By (Print or Type)	Tie	tle	295 E			•	Signature	i sii Aigyi,		Dete			
Allen Monchik		Project	Man	ager				711 1.	/	Date			
VCD 44		. roject	···ciil	~9CI			Allen	Monchis	e	2/27	/19		

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D				-	41410000000000								
Date of Notification (1) 02 /	27 /	10					g Owner/Operator (MA	R 4	20.	ın	
	27 / _						Urban Renewal	, LLC	∌-∐ MA	11 4	201	3	
Agencies Notified EPA	Type Notifica	ition		1		Address			i i				i
⊠ DOLWD	☐ Initial ☐ Amended			L		Control of the Contro	et, Suite 400	- A					
⊠ DOH	Amendme			- 1		State, Zip C			4 - 5 - 4	4.6.1	- 4 P		
DCA	☐ Emergend	cy (includ	ing	L		- 50	NJ 07003		***************************************				
(NJAC 5:23-8)	justification			- 1		of Contac	7.		Telephone Nu				
	☐ Cancellati	ion			Wai	rren Spra	ike		908-670-5	711			
					FAC	CILITY IN	FORMATION						
Name of Facility Where A	batement is T	aking Pla	ice (3))				Type of Facility ((4)				
Commercial								School (K-12		72.22			
Street Address								Subchapter 8 Other (i.e., pr			uilding	2	
1200 Randolph Roa	d- Building	16						homes, etc.)	rate and comm	ioroiar b		٠,	
City (5)								Square Feet	# of Floors	В	ldg. Ag	ge	
Plainfield													
County (6)					Coun	ty Code (7)(STATE USE ONLY)	Current Use (Pri	or if being demo	olished)			
Union													
Name of Monitoring Firm	Hired by Build	ling Owne	er (8)	A	SCM	No.	Name of Abatem	ent Contractor (9)					
Bio Terra Solutions							ALL PRO MA	NAGEMENT LI	LC				
Street Address				-			Street Address						
P.O. Box 1224							27 Outwater	Lane					
City, State, Zip Code			11-11-11-1				City, State, Zip C	ode					
Union, NJ							Garfield, NJ	07026					
Project Manager for Monit	toring Firm		T	elep	hone	No.	Telephone No.		License No.				
Rick Eustaquio	50			973	3-494	-3762	973-928-4888	3	1188				15
Start Date (10)	S	Scheduled	d Com	pleti	on Da	te (11)	Name of OSHA N	Ionitor					
//							ALL PRO MA	NAGEMENT LI	LC				
Occupancy Status During							Street Address					_	
☐ Facility Closed/Vacate					ent		27 Outwater	l ane					
☐ Abatement Performed						cribe	City, State, Zip C						
Time of Abatement:	AM	PM/	F	PM		AM	Garfield, NJ						
Scope of Work (Check all	that apply)			_			Carnota, 110	0.020		-		-	
	triat apply)							tainment with Neg	ative Pressure				
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf			Reno				☐ Mini-End	closure g Procedure					1
☐ ≥100 St 01 ≥200 II			Demo	Muoi	1			empted (*) and No	n-Friable Proce	dure			
			Is Lo	catio	on		_	,			batem	ent T	vpe
Location				mall			Description of						1
Asbestos-Containing N TO BE ABA		V .	Jsed S Mainte				stos Containing Ma ., thermal systems		Amount	em	Repair	nca	nclo
IN Facilit		C	ustod		taff?	(1.6	surfacing, VAT		(Specify SF or LF)	Removal	=	Encapsulate	Enclosure
(13)				12)		-	other miscellane	eous)		-		late	G.
		Ye	es I	No	N/A					_	-		-
TBD					\boxtimes	TBD			TBD				
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	1												
Name of Registered Wast	te Hauler			03505		Waste	Cubic Yards of	Name of Regis			Oli Carrie		
Newark Carting				100/7616	auler II 0283	ט או כ.	Waste As Needed	Grand Cen	tral Sanitary	Landfi	П		
City, State							Disposal Date	City, State					
Newark, NJ							TBD	Pen Argyl,	PA				
Completed By (Print or Ty	/pe)	Title					Signature			Date			
Allen Monchik		Proje	ect M	lana	ger			Manshir	6.	2/27/	10		

ASB-41 JAN 13

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

Date of Notification (1)					Name	of Building	own	er/Operator (2)			972		
02/	27 / _	19	_		Muh	lenberg	Urba	an Renewal	, LLC	TI M	AR	4 2	019	
Agencies Notified	Type Notificat	tion			Street	Address								1
⊠ EPA	☐ Initial				2 Br	oad Stre	et. S	uite 400		ر المحمد ا		T- 10	tari i	1
□ DOLWD				ŀ	City. S	tate, Zip C	ode			And a second	3.5%	5 1 1 1 1 1		
□ DOH	Amendme					omfield,		7003			- 1.575.3655.4			
☐ DCA (NJAC 5:23-8)	☐ Emergenc justification		uding	ŀ	10 102000	of Contact	80,10,50,001(0)			Telephone Nu	ımher			-
(NOAC 3.23-6)	☐ Cancellation	(B)				ren Spra				908-670-5				
								MATION		000 070 0				
Name of Facility Where A	Abatement is Ta	akina P	Place (3)					Type of Facility	(4)				-
Commercial		9 .		-)					School (K-12	* *				
Street Address						-			Subchapter	8 (Other than K-				
1200 Randolph Roa	d Building	22							Other (i.e., p		mercial b	uildin	gs,	
	iu- Building	23							homes, etc.)		16	Ida A	20	_
City (5)									Square Feet	# of Floors		lldg. A	ige	
Plainfield					-									
County (6)					Coun	ty Code (7)(STA	TE USE ONLY)	Current Use (Pr	for if being dem	olished)			
Union														
Name of Monitoring Firm	, a	ing Ow	mer (8)	1	ASCM I	No.	11000		ent Contractor (9)					
Bio Terra Solutions	3						Α	LL PRO MA	NAGEMENT L	LC				
Street Address							Stre	et Address						
P.O. Box 1224							27	7 Outwater	Lane					
City, State, Zip Code							City	, State, Zip Co	ode					
Union, NJ							G	arfield, NJ	07026					
Project Manager for Mon	itoring Firm			Tele	phone I	No.	Tele	phone No.		License No.				
Rick Eustaquio				97	3-494	3762	97	73-928-4888	1	1188				
Start Date (10)	S	chedul	ed Cor	nplei	ion Dat	e (11)	Nan	ne of OSHA N	lonitor					
		04	_ /	30	_ /	19	A	LL PRO MA	NAGEMENT L	.LC				
Occupancy Status During	Abatement (C	heck o	only on	e)			Stre	et Address						
☐ Facility Closed/Vacate	139				nent		2007	7 Outwater	Lane					
☐ Abatement Performed						cribe		, State, Zip Co					115-65	-
Time of Abatement: _	AM	PM/		PM-		AM		arfield, NJ						
Scope of Work (Check al	I that apply)							woman water and a second	A1008V1100 85					\neg
☐ ≥3 sf or ≥3 lf		15	ZI Dan					☐ Full Con ☐ Mini-End	tainment with Ne	gative Pressure				
□ ≥3 \$1 61 ≥3 11 □ ≥160 sf or ≥260 lf			Ren Dem						g Procedure					
						No.			mpted (*) and No	on-Friable Proce	edure			
				.ocat							Д	baten	nent Ty	уре
Location Asbestos-Containing			Used	Sole		Acho	otos (Description of Containing Ma		Amount	7	R	Ē	m
TO BE ABA		'	Mair					rmal systems		(Specify	Kemova	Repair	cap	Clos
IN Facili	ity		Custo	dial ((12)	Staff?			urfacing, VAT		SF or LF)	Val	. ¬	Encapsulate	Enclosure
(13)			Yes	No	N/A		oth	ner miscellane	eous)				ate	
TBD					\boxtimes	TBD				TBD	×			
		1					G.							
			-									1	П	П
Name of Registered Was	to Hauler	- 1			JDEP \	Maste	Cub	ic Yards of	Name of Pegi	stered Landfill		1	1-	Щ
Newark Carting	ste i iaulei			523	auler II		Was		ned the annual religion of the	ntral Santiary	Landf	ill		
1000					0283			s Needed oosal Date	City, State			000		-
City, State							1000	BD		DΛ				
Newark, NJ							1		Pen Argyl	, FA				
Completed By (Print or T	ype)	Title						Signature		,	Date			
Allen Monchik		Pro	oject	Vlan	ager			Allen	Monchis	é	2/27	/19		

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CV 14 + PAI	D	(P	ursuant	to NJAC	8:60 an	d 12:12	0)					2.		
Date of Notification (1) 2/25/19			Name o	of Building TANTH	Owner/ONY C	Operator CHURC	r (2) CH				F	M.		. 12
Agencies Notified Type Notification				Address NORTH	2TH S	TREET	Γ	, i						
EPA Initial Amended Amendment				ate, Zip Co NEWA		J 0702	9		· · · · · · · · · · · · · · · · · · ·	MATT	Zİ.	2019		131
DOH justification) DCA Cancellation				of Contact IER DeS	SOUSA					lephone N 73-483-				*
			FAC	ILITY INF	ORMAT	ION	_			* * *	. m.,		7	
Name of Facility Where Abatement is Takin SAINT ANTHONY CHURCH	g Place (3)					Ту	pe of Facility (School (K-1						
Street Address 409-N. 2TH STREET								Subchapter Other (i.e. p etc.)	8 (Oth			ldings	, hom	es,
City (5) EAST NEWARK							Sq	uare Feet		f Floors SOSF.		Bldg. 50+	Age	
County (6) HUDSON				Code (7) USE ONLY)		Cu	rrent Use (Pri HURCH	or if be	ing demol	ished)			
Name of Monitoring Firm Hired by Building (Owner (8)	ASCI	M No.				batement Cor CORP.	ntractor	(9)				
Street Address						Street 339-		ress FAYETTE S	STRE	ET				
City, State, Zip Code							State	, Zip Code RK,NJ 0710	5					
Project Manager for Monitoring Firm		Telepho	ne No.		Teleph 973-		No. 1-0877		License 01240					
Start Date (10) 3/8/19							of O	SHA Monitor						
Occupancy Status During Abatement (Chec	k Only O	ne)				Street	Add	ress	and the second			- 11	-	
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe:	eriod of al Facilit	Abatem y Hours	ent			City, S	state,	Zip Code						
Scope of Work (Check All That Apply)							-774				11-11-11-11-11			-
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demoliti				~	- !	Full Containme Mini-Enclosure Glovebag Prod Non-Exempted	e cedure				re.	
	Is	s Locati	on					Voii Exciniple	2 () un	a reon in	abic i ii	Abat	emen	t
Location of		Normalled Sole				scription					-	T	уре	-
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	aintenar stodial S (12)	ice/	Asbes (i.e.	thermal surface	aining M systems cing, VA niscellar	s ins T, or	·	(8	mount Specify or LF)	Removal	Repair	Encapsulate	Enclosure
2.05.15.15	Yes	No	N/A										n	
BASEMENT		X			FLC	OR TI	LE		3	50SF.	X	-		
No. of Desire and Vision in the Control of the Cont														
Name of Registered Waste Hauler NEWARK CARTING INC.		Н	JDEP W auler ID 4509	150.5	Oubic of Was			Name of ISES B		ered Land EHEM L		L		
City, State PO BOX 5670, NEWARK, NJ 07108				Dispos	sal Date		City, State 2335-A		BUTTE	R RD	BET	HLE	HEI	
Completed by CARLOS GOMES	BOX 5670, NEWARK, NJ 07105							L	7		Date 2/25/1	9		

20 Feb 2000 12:18AM NJ Asbestos Control 609.633.0664

page 1

02/21/2019 12:37PM 2013297440

BEST REMOVAL INC

C1(4990 PAGE B2

PAID

State of New Jersey NOTIFICATION OF ASSESTOS ABATEMENT (Perseent to NJAC 5:55 and 12:120)

Date of Northcellon (1)	119		N	M .	S.	Orner/Operator	15468	درم	MAR)	4)	1/20)19
Agency Notified	Type Notification		81	rest Ad					1.1	1		_
D EPA	Jir Intitiat							- Limbs	/			
D DEP	2 Amanded	ž.	C	d'anti	p. 20 f	Sode .						
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D DCA	□ Canosistion				18	13A 600	CLA	•				
			P	ACILIT		MOTAMA	111					
Name of Feelby Vehicle			Total Comment		•		Type of Facility	(4)			_	_
Ms.	TERESA IS	4600	4	Δ.		#1 2/2 #1	D Bohosi (K-1)	94				
Street Address					1		Q supopopos	8 (Otherthan K-1	2) .			
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The same of the sa							2000.			74	<i>a</i> .	-
County (8)				auniy C NEVO	Gdo (7	GTATE LINE .	Current Use (rier # being deme	lished)			
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Name of Meastering Fire (0)	Head by Building Chit	ter AS		Q.,		A CONTRACTOR OF THE PARTY OF TH	netic Centrodor ((S)			30/6	
							moval In	c _				
Girest Address						Otens Address						
1						450 Sou	th River	St.				
City, State, Zip Code						Cay, State, Zip (•			
						Hackens	ack, N.J	. 07601				
Project Manager for Mor	Abeling Films	Telis	phone	No.		Tolophene No.		License No.				
						201-329		00388	-		and the same	
SIMP (NO)	Sotroduled C			(11)		Name of OSHA				- 7	•	
2/22/19 Oceaning Status Datin		23/19	<u>_</u> ,				Environm	ental			_	_
Obstitution during Only	B wassistatist traincit er	usy ons)		,		Street Address						
☐ Facility Glosed/Vacate	of Dysing Entire Period	of Abelen	PRINT			Z80 H	uyler St				_	
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23 stor 23 F U2 160 ef or 2 200 F				Name!			-Enclosure rebag Precedure					
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pest Remo	AGT TUC		171	09		2=73	Minerv	a Enterp	rise	3,	LL	Ç
City, State						Disposal Date	Gity, State					-
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	Tride	imat	~ ##			Signeture	Paionom		/ Dardin	./e	1	,9

OK 105	38 PA	NA REF TOT FO				STOS ABATEMENT -7 and 12:120-7		*** *** Antipotental processes	-			
Date of Notification	n (1)	(FULSU				Owner/Operator		EC	-15-1	1	1:-	
2/25/2019			Pa	tric	ia C	Carino						
Agencies Notified	Type Notifica	ation	Stree	et Addr	ess			MA	2 4	201	n.	1111
[]EPA	[X]Initial							NAI	1 4	201	Ú	1 4-5
[]DEP	Notific	ation	City,	State	, Zip	Code						
[X]DOL	[]Amended Notific	ation	No	rth E	Berg	en,NJ,0704	47	1.4				
[X] DOH			Name	of Con	tact		Teleph	one Number	* - ***	e Partie		
[]DCA	[]EMERGENC		Pa	trici	la C	arino	-					
	[]Cancella	tion										
Name of Facility Whe	are Abatement	ie Waki	na Di		LITY	INFORMATION	mrma of Boot	1 i to (4)				
Patricia Cari		IS TAKE	ng Pi	ice (3)			Type of Faci	(K-12)				
Street Address								epter 8 (Othe (i.e., priva				
30 - 10 10 10 10 10 10 10 10 10 10 10 10 10								buildings, h				
					-		Square Feet	# of Floo	rs B	Ldg.	Age	
City		Count	7			inty Code (7)						
North Bergen		Hudso	n				Current Use	(Prior if be	ing de	molis	shed)
Name of Monitoring E Owner (8)	Firm hired by	Buildin	g ASC	CM No.		Name of Abate		Second Section 1				
N/A						AZTECH M	IANAGEMEN	I, Inc.				
Street Address						Street Address 86 Chris	s topher S	t.				
City, State, Zip Cod	le					City, State, S Montclai	Zip Code	042				
Project Manager for	Monitoring Fi	rm Tel	Lephon	e Numbe	er	Telephone Numb	per	L	icense	Numh	per	
		N/	'A			(973) 744	-8800		0037	1		
Scheduled Start Date		d. Compl			(11)	Name of OSHA N	Monitor					
			.3 Day	19 Year		N/A						
Occupancy Status Dur	ing Abatement	(Check	only	one)		Street Address	5					
[X] Facility Close of Abatement		iring an	tire .	Period								
[]Abatement Per Hours - Descr []other - Descr	ribe:«OffHours	Descri	pt»		Ϋ́	City, State, 2	Zip Code					
Scope of Work (Check										-		
[X]>3 sf or []>160 sf o	≥3 lf	[2		ovation olition		[X]Mini-I [X]Glovel	Containment w Enclosure bag Procedure riable Proced		Press	ure		
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Location			ocation ormal:	Ly		Description		Amount	R	T.	E	E
Asbestos-Con Material			Used Solely			Asbestos-Cont Material ((Specify	E	R	CA	C
TO BE ABA			y Mair enance		J. Carlo	(i.e., thermal	W-75	SF or	0	PA	PS	OS
In Facil	ity	Cu	stodi aff (al		sulation, surfa or other miscel	N. C. C. C. C. C. C. C. C. C. C. C. C. C.	LF)	A	I R	Ū	Ŭ R
		Yes	No	N/A							-	E
Basement		-		X :	Pipe	Insulation	on	50 LF	X			_
									-			-
Name of Registered W	neto unular	677	DEP W	aste	Con	bic Yards	Name of Rec	istered Land	Fill			
AZTECH MANAGI		На		ID No.		Waste 1.0	Tri -					
City, State Montclair, NJ	07042					sposal Date 03/14/19	City, State Bronx,	NY, 1047	4			
Completed Der (Deint	or Type) Tit	10		<u> </u>		Signature		-77	Date			
Completed By (Print Constantine V:		_{re} eside	nt				+, +:	Miller.	2/25		9	

PAID

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

CK 4992

Date of Notification (1)	_			Name	of Buildin	ng Owner/Operator	(2)	11.11 15 17	O E	П	W	17	
2/25/1	9			M	15.	ng Owner/Operator	TH MOI	UTALYO	P. 180	ij	19	1	2
Agency Notified	Type Notification		1	Street	Address								
O EPA	☑ Initial		1	07.0	Made To	Codo		MA	R-	4 /	019)	
DEP DOL	Amended Amendment#				state, Zip		T 07	403					
	☐ Emergency (inclu	ding	1	Marro	of Conta	OTA. N	7.01	Telephone Numi	har		7 ,		-
JZ DOH	justification) Cancellation	14		LAGIIE.	OF COURS	PONTACY C		d telebroise sour		-	_		
	1					ORMATION	<u> </u>	1'		1120			
Name of Facility Where	Abatement is Taking F	Place (3)		FACI	ILITE INTE	ORMATION	Type of Facility	v (4)					
	ECIZABETH			THI	10		1						
Street Address	E C ZA GO IA	· · · · ·	0.0	THE	-		☐ School (K-1 ☐ Subchapter	2) 8 (Other than K-12)					
		**			4		El Other (i.e. p homes, etc	rivate & commercial	building	js,			
City (5) .						1.2	Square Feet	# of Floors	Bldg. /	_			
BOG	OTA						1800	. 2	19	5	0.		
County (6)			1) (STATE USE	Current Use (F	rior if being demolis	hed)				1
BER	SEN.			ONLY) .		72	ESIDENCE	1.5				
Name of Monitoring Firm	Hired by Building Ow	mer	ASCA	A No.		Name of Abaten							
(8)							moval In	ıc					_
Street Address				8 8		Street Address		0.0237.97					
City, State, Zip Code						450 Sou City, State, Zip C	th River	St				_	
City, State, Zip Code							ack, N.J	07601					
Project Manager for Mon	illoring Firm	ΤŦ	alanho	ne No.		Telephone No.	ack, N.J	License No.		-			_
. rojest manager for men		1.	cacpito	and two.		201-329	-7444 -	00388					
Start Date (10)	Scheduled	Comple	tion Da	ate (11)		Name of OSHA		1 3333		-	_		
3/11/19	3,	121	19			Omega 1	Environm	ental					
Occupancy Status Durin	g Abatement (Check o	nly one				Street Address							
☐ Facility Closed/Vacate	ed During Entire Period	d of Aba	temen	t			ıyler St						
☐ Abatement Performed ☐ Other – Describe: 응	Outside of Normal Fa	cility Ho	urs			City, State, Zip C		N I 07	606				
Scope of Work (Check a		. 55 (3. Hat	CKensack	,N.J. 07	500		7. ca.	_	1
Æ≥3sfor≥3lf	app.,,			D-000	ovation			Negative Pressure	i				
D ≥ 160 sf or ≥ 260 lf			•		nolition		Enclosure ebag Procedure		(5)				
								d Non-Friable Proce	dure				
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. Locatio			Norma ed Sok			Description	of				T	T	
Asbestos-Containin TO BE A		Ma	intena	ince/		stos Containing Ma		Amount (Specify		교	- 1	F F	7
IN Fac		1	Custoo Staff		ii.e	., thermal systems surfacing, VAT		SF or LF)		Removal	Repair	ang Clo	-
(13)	1.	(12)			other miscellane	eous)			VB	- 1	Encapsulate	
		Yes	No	N/A	1			<u>#</u>			•	•	
BASEMEN		+	+	1	THER	IAI SYSTEM I	USULATION)	40 LF	:	×	1	+	The state of the s
BASENCEN		+		V	-	UK SURFACIUS		35.51		ام	+	+	Service Services
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		1	1							1	1	+	or contract of
Name of Registered Was				Waste I	Hauler	Cubic Yards of	Name of Reg	istered Landfill					
Best Remo	val Inc	ID	No. 17	109		Waste 2/207	Minerv	a Enterpri	ises	,	ĹL	С	
City, State			316			Disposal Date	City, State					×.	3
Hackensac	k , N.J. 0	7601				3/12/19	1	sburg, Oh,	, 446	88			
Completed by	Title					Signature /			Date .		1	,	2000
J.Maiorano		tima				1/ -	sugaro's		2/2	5	17		- Co. 11.5
ASB-41	* Do n	of use t	his for	m for as	hostos li	censure exempted	activities			,			-

Project #			FICATIO	State of New N OF ASBE t to NJAC 8	STOS A		ENT	C	heck# 4	1555			
Date of Notification (1)			Name	of Building C	Owner/Op	erator (2)		E (1)	C	1	Mil	7
02/15/2019			A CONTRACTOR OF THE PARTY OF TH	Kandel			,			F	11	W	- 100
Agencies Notified Type Notific	ation			Address									
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DOL Amend	dment #			gfield, NJ									
DOH Emerg	ency (including	g		of Contact	0,001			Te	lephone N	umber		- 64	10.00
DCA Cance			David	Kandel									5. (5.8)
			FAC	ILITY INFO	RMATIO	N			=		-	40.45	
Name of Facility Where Abatement is	Taking Place	(3)			#7		ype of Facility	(4)					
Residence						I	School (K	-12)					
Street Address							Subchapt	er 8 (Oti	ner than K-	12)			
							Other (i.e. etc.)	private	& commer	cial bu	ildings	, hom	nes,
City (5)		9.5	Walte See			S	quare Feet	# 0	of Floors	Т	Bldg.	Age	_
Springfield, NJ 07081													
County (6)				Code (7)		C	urrent Use (P	rior if be	ing demoli	shed)			
Union			(STATE	USE ONLY)		-			SV. T 2				
Name of Monitoring Firm Hired by Bui	ding Owner (8	3)	ASC	M No.	1	Name of	Abatement Co	ontracto	r (9)				
					4		storation L						
Street Address						Street Ad							
					7	2 Broo	kside Rd						
City, State, Zip Code					1997		e, Zip Code		-				
					100		h, NJ 078	69					
Project Manager for Monitoring Firm		T	Telepho	one No.		elephon		00	License	No.	_		
					9	73933-	2550		01358				
Start Date (10)	Schedu	led Co	mpletion	Date (11)			OSHA Monito	г	0.000	15.			
02/18/2019	02/20/2				liF	RIS							
Occupancy Status During Abatement (S	Street Ad	dress				-		
Facility Closed/Vacated During E	ntire Period of	Abater	ment		2	333 Rt	22 West						
Abatement Performed Outside of	Normal Facility	y Hour	s		_		e, Zip Code	100000000000000000000000000000000000000					
Other – Describe:		_					NJ 07083						
Scope of Work (Check All That Apply)						,	10 07 000			_			
≥3 sf or ≥3 lf		Renova	ation				Full Containn	nont with	Mogativa	Droom			
≥160 sf or ≥260 lf	(Manager of the Control of the Contr	Demoli					Mini-Enclosu		rivegauve	riessi	iie		
						H	Glovebag Pro	cedure	:				
							Non-Exempte	ea (*) an	d Non-Fria	ble Pro			7
		s Locat Norma										emen /pe	ι
Location of Asbestos-Containing Material (ACN	(III) (45.0%)	ed Sole		Ashasta	Descri	iption of	-1-1 (A OLD)	١.			T	T	Т
TO BE ABATED	IVIa	intena todial			nermal sys		rial (ACM) sulation.		mount Specify	Z	_	E	m
In Facility (13)	Cus	(12)	Starr?		surfacing	g, VAT, c	r	SF	or LF)	Remova	Repair	Encapsulate	Enclosure
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	Yes	No	N/A									ē	
1st floor		×		duct ins	ulation			6 SF		×			
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			-						50m10 - 255-m	+	-	_	
Name of Registered Waste Hauler			JDEP W		Cubic Yar	rds	Name of	Registe	red Landfil	1			
Nick Restoration LLC		14. 729	lauler ID	1000	of Waste		G.R.O.	W.S					
City, State		10	033782		TBD Disposal I	Date	The second second						
Randolph, NJ					BD	Date	City, Star						
Completed by	Title					ature	Tullytov	vn, Pa		ata .			
Nikica Mrda	Presid	dent			Sigil	Mu	·M		1	ate	040		
	1 10010	COLIE					-	-	102	/15/2	019		

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	Manua					21-11-12			M	AH	- /	4
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刘≉		City,	Blate, Za	Code					1	-		
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ng Place	(3)	50	-LITY		nos	Type a	A Page	y (4)	attan		_	
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			100,		Nick R	estan	mani C etion i	ontractor (8)				
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Agencies Notified	Type Notification	1		Street /	Address									- 1	W. 4.115*
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Project Manager for Moni	toring Firm			Telepho	ne No.		Teleph 201 8	one N	lo.		License	No.			
Start Date (10) 02/22/2019		Schedule 02/23/2		npletion	Date (11)		- CONTRACTOR STATE OF THE STATE		HA Monitor JTIONS (G			
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* Do not use this form for asbestos licensure exempted activities.

NOTIFICATION OF ASBESTOS ABATEMENT Check#3276 (Pursuant to NJAC 8:60 and 5:16) Name of Building Owner/Operator (2) Date of Notification (1) MAR 2019 02 / 25 / Edwin Kong Type Notification Street Address Agencies Notified X EPA Initial **⊠** DOLWD ★ Amended City, State, Zip Code Amendment # 1 X DHSS Jersey City, NJ 07306 Emergency (including ☐ DCA Telephone Number Name of Contact justification) (NJAC 5:23-8) ☐ Cancellation Jose Tola FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Apartment building Subchapter 8 (Other than K-1 2) Street Address Other (i.e., private and commercial buildings. homes, etc.) # of Floors Bldg. Age Square Feet City (5) Jersey City, NJ 07306 County Code (7) (STATE USE ONLY) Current Use (Prior if being demolished) County (6) Hudson Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Gr Tech LLC Street Address Street Address 576 Valley Rd #283 City, State, Zip Code City, State, Zip Code Wayne, NJ 07470 License No. Telephone No. Project Manager for Monitoring Firm Telephone No. 01127 973-638-1777 Scheduled Completion Date (11) Name of OSHA Monitor Start Date (10) 02 / 27 / 19 03 / 11 / 19 Envirovision Consultants, Inc Street Address Occupancy Status During Abatement (Check only one) ☑ Facility Closed/Vacated During Entire Period of Abatement 20-21 Wagaraw Road, Bldg .# 35E Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: ____AM-__PM/_PM__AM Fair Lawn, NJ 07410 Clean up and decontamination with negative pressure Scope of Work (Check all that apply) Full Containment with Negative Pressure Renovation >3 sf or >3 lf > 160 sf or >260 lf Mini-Enclosure Glovebag Procedure Tent with Negative Pressure Demolition Non-Exempted (*) and Non-Friable Procedure Abatement Type Is Location Normally Description of Location of Repair Removal Encapsulate Used Solely by Asbestos Containing Material (ACM) Amount Asbestos-Containing Material (ACM) Maintenance/ (Specify TO BE ABATED (i.e., thermal systems insulation, Custodial Staff? surfacing, VAT, or SIF or LF) IN Facility (12)other miscellaneous) (13)No N/A Yes \boxtimes 800 SF Mastic removal Living room and two bedrooms NUDEP Waste Hauler ID No. | Cubic Yards of Waste | Name of Registered Landfill Name of Registered Waste Hauler 0033785 TBD T.R.R.F. Inc Gr Tech LLC Disposal Date City, State City, State Tullytown, PA TBD Wayne, NJ 07470 Date Completed By (Print or Type) Title Signature ente wenas 02/25/19 Owner N.Jevtic

State of New Jersey

CIL 4991

Date of Notification (1)				Mama	of Ruildin	g Owner/Operator	(2)	ENIC	T	11//	n de an	
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Project Manager for Mor	nitoring Firm	Te	lephor	ne No.		Telephone No.		License No.				
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Name of Facility Where Abatement is Takin	g Place	(3)					Type of Facil	ity (4)					
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Project Manager for Monitoring Firm			Telepho				one No. 373-9418		Licens 0130				
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