4		Notif	State ication of Asb	of NJ estos Abatement				
7 Paragon Job#		a/ • 00 = 0-0 ar (000 at (00	2 % (60-7 and 12 120-7	DOL -	10 DAY		7
Date of Notification (1)	1 1 1	of Building Ow dwalk Hail	nor/Opp 15/19/19/19/19/19	R-5 AM 2:68	MAR -		7	\vdash
Agoncles Notified Type Not		Address	ANAFA		MAD -	1 2013	+	
EPA Ini	tial 230	Boardwalk	10° 10° 14° 14°	ICENSING ICENSING		1/2	1/	
		tate. Zip Code	- Limit		WAIVER A	PPROVE	7	_
DOL Amendmés	Atla	intic City, NJ	08401		THE	TIMOVE		
DOH Emerge		of Contact			Telepho	ne Number	-77	
☐ DCA ☐ Car	cellátion Jan	et Mitrocsak			609-4	49-2268		
<u> </u>	11	FAC	ILITY INFORMA	TION			-	
Name of facility where abatem	ent is taking place (3))			Type of Facility	(4)		
n 1 w 11 w 12	.,,				Saho	of (K • 12)		
Boardwalk Upper West H	11/1					hapter & (Other		(2)
Direct wooless					Didgs Other	/Private/Comm /Homes etc.	ercipl	
2301 Bourdwalk				-	Square Feet	# of Floors	Bld	g Age
City (5)	County (e)		4	County Code (7)		2	70	
Arlantic City	Atlantic			(State use only)	Current Use (F Performance	rior if being der	nolishoo	1)
Name of Monitoring Firm Hired			ASCM No	Name of Abatemen		Conter		
CDI				Paragon Contra				
Street Address				Street Address	oring, site.			_
\$434 King Ave. Suite 101			- 4	590 River Rd.				
lity State ZIp Code				City, State, Zip Code	-		-	
Pennsauken, NJ 08109				Clifton, NJ 070	14			
roject Manager for Monitoring	Firm	Phone Num	per	Telephone Number		License Num	ber	-
Iay Murry		856-616-9		(973) 614-1600 Name of OSHA Mor		00748		
Scheduled Start Date (10)	Sched Com	olotion Date (1	1)	Paragon Contrac				
03 04/2013	03/07/2013	}		Street Address	, 1110 <u>.</u>			
Occupancy Status During Abble	ment (Check only on	9)		590 River Rd				
Facility closed/vacated during Ahatement performed outside.				City State, Ztp Code				
Other Describe Regulate	d arch Al the Upper We	st Hall of the fac	ility	Clifton, NJ 070	14			
Scape of Wark (check all that a	pp(y)				****			
Demolition	Renovation			Full Containment w/ne	gative pressure [Gloveneg pr	ouedure	
	7 160 sf or ≥260 ff			Mini-enclosure	☐ Non-Exem	pted (') Non-h	riable pr	ocedure
Location of	is location norm by maintenance		1			R		FE
asbentos-containing material to be	staff(12)		Description material (A)	of asbestes-centaining	Amount (Specify S	For m		n n
absted in facility (13)	Yes No	N/A	Illistendi (Ac	ANI)	LF)	, o	1 . 1	2 6
Apper West Hall		-			1 (00 00	0 1000		P
A CLASSITIAN	→		Oce Drop Ceiling	Collapse Debris Clean up	1.600 SF		╀┼┼	╡┼┤
								러블
		-					4-	+
							计片	##
egistered Woste Hauler Parrigon Contracting, Inc	NJDEP Hav 22161		ubic Yards of Wo 5	GROWS/Tullyto			<u>]-</u>	- 1 - 1
ity State		Disposal D	ate	City State		M 399		
Clifton, NJ empleted by (Print or Type)	Title	TBD	Signature	MOTTISVIUS, PA		T5-12-		
(in) an Lazevski	President		algitature ad	defini		Date 03/01/2013		
The second secon		-	1	4		V3/V1/2013		

Paragon Job#

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

								MAR					
Date of Notification			Name of I	Building Ov	vner/Operator (2	2)	J.;	170 A		37			-
Agencies Notified	Type Notific		Boardw	alk Hall	15		Ç	710 4	ر الأ				
EPA	Type Notific	ation	Street Add	iress ;			i i	1CF, 6.77	(%)				
Ø DEP	Initial		2301 B	oardwalk				18/1/2/	<u> کی</u>				
1		dment	City, State	, Zip Code				— ()	1/2				
	Amendment #		Atlanti	c City, N.	J 08401					63.76		8	
M DOH	Emergenc justification	y (includ	Name of C	ontact				Telepho	ne Numb	er			-
☐ DCA	Cance	20 10	Janet	Mitrocsak	(.0	149-2268				
)			FA	CILITY INFORM	MOITAN	i						
Name of facility wh	ere abatemen	t is taking p	place (3)				T	Type of Facility	(4)				
Boardwalk Upp	er West Hall							Scho	ol (K - 12	5			
Street Address									hapter 8 ((Private/) =
2301 Boardwall	k							Bldgs	./Homes,	etc.	ercia	.1	
City (5)		I Co	unty (6)			T Ca		Square Feet	# of Flo	ors	1	Bldg. /	Age
4 M2 , 9 0			, (-)				nty Code (7) te use only)	60,000	2		70	<u> 22. mas 11 mas 1</u>	
Atlantic City	34 U		lantic			(, , ,	is use siny)	Current Use (F Performance	Center	ng der	nolis	hed)	
Name of Monitoring	Firm Hired by	Bldg. Ow	ner (8)		ASCM No.	Π.	Name of Abatement	Contractor (9)	Center		_		
EDI						.	Paragon Contrac	ting, Inc.					
Street Address	87						Street Address						
5434 King Ave.							590 River Rd.						
City State, Zip Code				11/2			City, State, Zip Code						-
Project Manager for							Clifton, NJ 0701	4					
Project Manager for	ivionitoring Firr	n	P	hone Numi	ber		Telephone Number		License		ber		
Jay Murry				56-616-9			(973) 614-1600		00748	3			
Scheduled Start Date	e (10)	Sche	d. Complet	ion Date (1	1)		Name of OSHA Moni						
03/04/2013		03/0	7/2013			- 11	Paragon Contract Street Address	ing, Inc.					
Occupancy Status Di	uring Abateme	nt (Check	only one)			-	590 River Rd.						
Facility closed/	vacated during	entire per	riod of abat	ement.		11	City, State, Zip Code				_		
Abatement per Describe:	formed outside	e of norma	I facility hou	ırs-			ony, orato, zip oode						
Other-Describe	e: Regulated a	rea at the U	pper West H	all of the fac	cility	-11	Clifton, NJ 0701	4					
Scope of Work (che	ck all that appl	y)		<u> </u>								_	:
Demolition		Renovati	on			☐ Fu	II Containment w/neg	ative pressure. I	Glove				
\boxtimes >3 sf or >3 If		≥160 sf or	≥260 If			V (2001)	ni-enclosure	Non-Exem				120	oduso
Location of		Is location	n normally	used solely	νI				ipica ()	TR	D	_	
asbestos-conta	aining	by maint staff(12)	enance/cus	stodial	Descriptio	on of as	bestos-containing	Amount		е	e	E n	E
material to be abated in facilit	tv (13)	1	T	Т	material (A	ACM)	ocstos-containing	(Specify S	For	m	р	С	n
4 5 5	7 (2	Yes	No	N/A				LF)		v	i	a p	L
Upper West Hall					O&M Drop Ceili	ing Colla	ose Debris Clean up	1,600 SF		e	ń		\vdash
								1 0 are n n			Ħ	H	卅
					100	, P	The state of			H	H	H	H
										H	H	H	H
	Ť		2							H	H	H	H
Registered Waste Hat Paragon Contraction		NJD 221	EP Hauler I	1000	ubic Yards of W 5	Vaste	Name of Registered L GROWS/Tullytow						
City State				Disposal D		-	City, State	/11	Ψ,	-		-	
Clifton, NJ	*			TBD	-12	115	Morrisville, PA						
Completed by (Print o	r Type)	Title			Signature		7/ /		Date		-		
Goran Lazevski		Presiden	t		5.	1			03/01/2	2013			

Date of Notification (1) 0 12 / 2 8 / 1 3 Agencies Notified	ion Stree	. (Pursual ng Owner centre Code	nt to NJAC	R-5 AM 2: IUS CONTE	(-8 (-8	NJ con of He	PPROVED alth & Seni bignature)	5	vices	,	
DCA justification Cancellation	1 1 70	om Hook							_			mer.
*			FACIL	ITY INFORM	ATION						2	
Name of facility where abatement Residence Street Arkiness 125 3rd Avenue	is taiding place	(8)					Subci	of (K - 12) napter 8 (Ot (Private/Co Atomas, et	mmer o.	cial	12) g. Age	Van Intern
Chy (5)	County	(6)			County Code (7		2dnara Last	W CITTOON	-	-141	311134	
				H 84	(State use only)		Current Use (F	rior if being	dem	lishe	i)	-
Hawthorne Name of Monitoring Firm Hired by	Passia			ASCM No.			Contractor (9)	-	<u>.</u>			
Street Address City, State, Jip Code Project Manager for Monitoring Fire	m	Pho	ne Numb	er e	Street Add 20 Cali City, State, Paterso Telephone	fornia Av Zip Code on, NJ 07: Number		License		er		
					11	45-8020	***************************************	1 0	169	46		42
Start Date (10) 03/05/13 Occupancy Status During Abatem Facility closed/vacated durin Abatement performed outsk	03/22/1 ent (Check only ng entire period	one) of abaten	ent.)	D & S Street Add	fornia Av	on, Inc.		-	-		
Describe: NORMAL	HOURS				Paters	on, NJ 07	503	!			1	1
Scope of Work (check all that ap	ply):						Full Containment Mini-endosure Glovebag proced Non-Exempted (ure		•	nduro'	
Location of asbeston containing material (acm) to be abated in facility (13)	ts location of by maintens staff(12)	omially us nce/custo	ead solely odlal	1	on of asbestos-co (ACM)		Amount (Specify LF)	24	Remove	Repa.	Encap	En c L
Basement		X		PIPE INSU	JLATION & FI	TINGS	70 L FT		X			
Basement		X		Clean up o	f ACM Debris		900 SQFT		X			
basement crawl space.		X		Clean up o	FACM Debris		50 SQFT		×			П
			- 40									
N. J. Company						, ,				Ш		
Registered Waste Hauter D & S RESTORATION, INC	NJDEF 0. 1350	Hauler II.		ublic Yards of	Waste Name of	Registered	Landfill RESOURCE I	ECOVER	<u>Г</u>	Ш	Ц	1

Chy, State PATERSON, NJ 97503 City. State
TULLYTOWN, PA Disposal Dala

03/23/13 Completed by (Print or Type) BOGDAN JOLDZIC Title

PRESIDENT ASB-41 Do not use this form for asbestos licensure exempted activities, Date 02/28/13

D&S Proj. #: MS 13-28a

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

					20,	MAR -5 AM 2	. 6				
Date of Notification (1)	Name of Building	Owner/	Operator (2)			17AR -5	*4.				
0 2 / 2 8 / 1 3	Tom Hook	201 - 101 - 71			" in	CA AM 2					
Agencies Notified Type Notification	Street Address		(હૈ	Ling Com	6.8.				
DEP Amended	125 3rd Avenu	ue				- CENSTAIN	},	_			
Amendment #:	City, State, Zip Co	de				, , (G					
DOL Emergency	Hawthorne, N	IJ, 075	506			Telephone	Number		-		
DOH (including justification)	Name of Contact		-			relephone	Nullipei				
☐ DCA ☐ Cancellation	Tom Hook	. 9	11	2 11				_			
	6.10%	FACIL	ITY INFORMA	ATION		10					
Name of facility where abatement is	s taking place (3)					Type of Facility (4)	(K - 12)				
Residence					/	☐ Subchap	ter 8 (Other	tha	n K-1	2)	
Street Address						Other (P	rivate/Comm	nerc	ial		
							omes, etc.	7	Bld	g. Age	e
125 3rd Avenue	County (6)			County	y Code (7)	Square reet #	01110010				
City (5)	County (6)				use only)	Current Use (Price	or if being de	mo	ished	d)	
Hawthorne	Passiac				0 138	1 1 1 1 1	i o	Un			
Name of Monitoring Firm Hired by	Bldg. Owner (8)		ASCM No.	I	lame of Abatemer	it Contractor (9)					
				1 1	D & S RESTO	RATION, INC.		_			
Street Address					treet Address						
				_ -	20 California A			_			
City, State, Zip Code					Paterson, NJ						
· · · · · · · · · · · · · · · · · · ·	n Phone	Numbe	i or	- -	elephone Number		License Nu	mbe	r		
Project Manager for Monitoring Firm	1 Priorie	Numbe	31	- 11.	973-345-802		0116	59			
	Sched. Completion Da	ata (11)		_	Name of OSHA Mo						12
Start Date (10)	Sched. Completion Da	ate (11)	,	IL	D & S Restora	ation, Inc.		_			
03/05/13	03/22/13			-	Street Address						
Occupancy Status During Abateme Facility closed/vacated during					20 California Zity, State, Zip Coo			_	_		
Abatement performed outside	e of normal facility hours-				nty, State, Zip Oot						
Describe: NORMAL Other-Describe: NORMAL				-11	Paterson, NJ	07503					
Scope of Work (check all that app					T I	Full Containment w/	negative pre	essu	ıre		
>3 sf or >3 lf						Mini-enclosure					
≥160 sf or ≥260 lf	Demolition				-	Glovebag procedure Non-Exempted (*) a	e and Non-fria	ble	proce	edure	
	Is location normally used	solely	1					1	R	Е	E
Location of asbestos-containing	by maintenance/custodia staff(12)	al			bestos-containing	Amount (Specify S	For r	n	e p	n C	n
material (acm) to be abated in facility (13)		N/A	material	(ACM)		LF)	' ' '	- 1	a i	a p	Ľ
abated in lading (10)	Yes No .	INA		tillig at	STA TIME	G 701 FT	- E	_	-		h
Basement					ON & FITTING	S 70 L FT 900 SQFT		X	片	片	卄
Basement			Clean up o			50 SQFT		X	片	片	情
basement crawl space			Clean up o	I ACM	Deoris	30 5Q1 1	F	7	Ħ	Ħ	旨
- 4 1 1							-	Ī		百	
Registered Waste Hauler	NJDEP Hauler ID#	10	ubic Yards of	Waste	Name of Registe	red Landfill				111	
D & S RESTORATION, INC	13506		4CY		The state of the s	N, RESOURCE RE	COVERY		-	-	
City, State		posal D 3/23/1			City, State TULLYTOW	N PA					
PATERSON, NJ 07503		וונאונ	Signature		1 TODDITON	/-· ,	Date	i.			
Completed by (Print or Type) BOGDAN JOLDZIC	Title PRESIDENT						02/28/13	3			
ASB-41	* Do not use this form for	asbest	os licensure e	xempted	activities.						

D&S Proj. #: MS 13-72

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

O									4		10	fee.	
Date of Notification (1)	IIN	ame of Bui	Iding Own	er/Operator (2)				2013) & L	110		V235.		
0 3 /0 1 /1 3		RESIDEN	NTIAL B	UILDING					'AU 5	AM	2	5	
Agencies Notified Type Notificat		treet Addre		OLD III O				- 4500	$iT\gamma_{rr}$,	<u> </u>	िंही	
☐ EPA ☐ Initial ☐ Amended		224 Chris	stopher S	treet				& L	Iren	CON	Tan		
DEP Amendment #:		ity, State, Z						-	· Or E	HAI.	176	ί,	
□ DOL □ Emergency		MONTC	LAIR. N	J 07042			90						
DOH (including	N.	ame of Con				7		Telephone	Numbe	r	-	-	
justification) DCA Cancellation		JACK FI	INN										
Cancellation				ILITY INFORM	ATION	J		_1					
Name of facility where abatement	s taking pla	ice (3)				-	Тур	pe of Facility (4	1)				
The second secon		• • •		750				=	(K - 12)		76/0	20000	
RESIDENTIAL BUILDING Street Address							-		pter 8 (C Private/C			12)	
Street Address									Homes, e		Clai		
224 Christopher Street			Heavy Consultation	-			Sc	quare Feet	# of Floo	rs	Blo	dg. Ag	ge
City (5)	Cour	nty (6)			1115/25/5	inty Code (7)	-						
MONTCLAIR	ESS	SEX			(518	ate use only)	c	urrent Use (Pr	or if bein	g dem	olishe	d)	
Name of Monitoring Firm Hired by				ASCM No.	<u> </u>	Name of Abateme	ent Cont	ractor (9)					
	-	controls.				D & S RESTO	RATIO	ON, INC.					
Street Address				-	_	Street Address							
N. A.S						20 California	Ave.	W. San			20011845		
City, State, Zip Code						City, State, Zip Co	de						
e entre		*			14	Paterson, NJ	07503	48			1532		
Project Manager for Monitoring Firm	1	Ph	one Numb	per		Telephone Number			License		er		
						973-345-80				1169			
Start Date (10)	Sched	I. Completic	on Date (1	1)		Name of OSHA M D & S Restor		nc .					
03/12/13	03/26	5/13				Street Address	ation, i	uic.			-		
Occupancy Status During Abateme						20 California	Avenu	e					
Facility closed/vacated during	entire perio	od of abater				City, State, Zip Co							
Abatement performed outside Describe:		facility hour	s-										
Other-Describe: NORMAL I	IOURS				_	Paterson, NJ	07503						
Scope of Work (check all that appl	The second second				17			Containment w	/negative	press	ure	2000 III. 23	
\boxtimes >3 sf or >3 lf	Renovation	'n				[100000000000	enclosure					
≥160 sf or ≥260 lf	Demolition	1						ebag procedur -Exempted (*)		friable	proce	edure	
Location of		n normally u		у				-		R	R	E	Е
asbestos-containing	by mainte staff(12)	enance/cust	todial			asbestos-containing	1	Amount (Specify S	For	m	e p	n	n
material (acm) to be abated in facility (13)	Yes	No	N/A	material	(ACM)			LF)	. 0.	O V	a	a p	L
	103	140	1977					0.40 L P/P		e	-	P	
BASEMENT				PIPE INSU	JLAT	ION		242 L FT			屵	片	ዙ
			<u> </u>							井	片	믐	井
										井		片	片
				1			-			井		片	H
Registered Waste Hauler	INJO	EP Hauler I	D# 17	Subic Yards of	Waste	Name of Register	red Land	dfill		-111	ш		1
D & S RESTORATION, INC.	135	06		3 YDS		TULLYTOW	N, RES	OURCE RE	COVE	RY	5 1		
City, State		36	Disposal D		-	City, State		1					, ,
PATERSON, NJ 07503	Title		03/07/1	3 Signature	-	TULLYTOW	N, PA		I Data			_	
Completed by (Print or Type) BOGDAN JOLDZIC					Date 03/01	/13							
	empte	d activities.			1								
CARRY 11													

Ox 201111 D&S Proj. #: MS 13-71

	State of NJ	
Notification	of Asbestos A	batement
(Pursuant to	NJAC 8:60 ar	nd 12:120)

O			Notifica	ation of Asb	estos	Abatement							
D&S Proj. #: MS 13-71			(Pursua	nt to NJAC	8:60	and 12:120)	220		MAR -	ens en			
								20				· 4	
Date of Notification (1)	I Na	me of Build	ding Owne	r/Operator (2)					3MAR	~		- SEE	
10 13 1/10 11 1/11 13		MARTA P		. , ,						5 1	M :). a	
Agencies Notified Type Notifica	1.	eet Addres						P4	Salm		. <	. 1.8	}
☐ EPA ☐ Initial	((ſ		6	Line	100	N/:	20.	
DEP Amended	. I	y, State, Zi		EE I	-				1.05	43/	16	(1)	_
DOL Amendment #	·—										~*		
☐ Emergency (including		me of Cont		NJ 07055					e Number		_	•	
justification) Nar	me or Com	act			* '		relephon	s Number				4.1
☐ DCA ☐ Cancellatio	n .	ROSA EV	VANS						1				
			FACIL	ITY INFORM	ATION			30.52					
Name of facility where abatement	is taking plac	ce (3)	*****		1 2 2 2		Type of	Facility (4)				
2.2								Schoo	(K - 12)				
MARTA PATEGA									apter 8 (Ot			12)	
Street Address									Private/Co Homes, et		cial		
103 SPRING STREET							Square		# of Floors		Blo	ig. Ag	je
City (5)	Count	y (6)			Cour	ity Code (7)	lo E				3		
					(Stat	e use only)	Curre	nt Use (P	rior if being	dem	olishe	d)	
PASSAIC PARK		SAIC			L_,_							-	-
Name of Monitoring Firm Hired by	Bldg. Owner	(8)		ASCM No.		Name of Abatemen				10.			
						D & S RESTO	RATION,	INC.		11.132			
Street Address						Street Address							
sign of the second						20 California							
City, State, Zip Code						City, State, Zip Cod							
		To:				Paterson, NJ (Historia	Numb	or		
Project Manager for Monitoring Fire	m	Pho	one Numbe	er		Telephone Number 973-345-802							
						Name of OSHA Mo	3.72		1		_		
Start Date (10)	Sched.	Completio	n Date (11)		D & S Restora							
03/11/13	03/20	/13			- 11	Street Address	10 1						
Occupancy Status During Abatem	ent (Check or	nly one)				20 California A	Avenue						
Facility closed/vacated durin						City, State, Zip Coo		100					
Abatement performed outsic Describe:	le of normal fa	acility hours	S-			N 14							
Other-Describe: NORMAL	HOURS				=	Paterson, NJ	07503						
Scope of Work (check all that app	V2144					an Total	Full Cont	ainment v	v/negative	press	ure		-
≥3 sf or ≥3 lf	Renovation	n .				<u> </u>	Mini-encl						
≥160 sf or ≥260 lf	Demolition					₽			re and Non-f	riable	nroce	adura	
		normally u	sed solely	r	-			inpled ()	and Non-	R	R	E	
Location of asbestos-containing	by mainter	nance/cust		1	on of as	sbestos-containing		Amount		e m	e	n	E n
material (acm) to be	staff(12)			material		pooted containing		(Specify S LF)	SF or	0	p a	c a	C
abated in facility (13)	Yes	No	N/A					LF)		v e	i	р	-
BASEMENT		X		PIPE INSU	JLATI	ON	100	L FT		X			
						1							
The state of the s		7.4		Floore Its		100			No. 12				
			ir-	100 F - V									
Registered Waste Hauler D & S RESTORATION, INC		EP Hauler II		ubic Yards of YD	Waste	Name of Register TULLYTOWN	ed Landfill	JRCE RI	ECOVER	Y			
City, State	<u>. 133</u>		Disposal D			City, State	.,12500	TOD TO			-		
PATERSON, NJ 07503			03/12/1		TULLYTOWN, PA								
Completed by (Print or Type)	Signature				-	Date							
BOGDAN JOLDZIC	PRESIDI			3 4				6, 111	03/01/	13	. 8		
ASB-41	* Do not use	this form t	for asbesto	s licensure ex	empted	activities.							

Fax: Mar 1 Zu13 U3: U1PIII ruu1/UU1

* /\"	*		e of NJ				28
KNO			shestos Abatement	J	O Forthern man service		
) DAS Prol #: MS 13-73	(F	Pursuant to NJA	C 8:60 and 12:120)	St Later and	APPROVED	e Canada.	
0			RECEN	/ E to learn the land	Health & Senior	Setaice	32
Date of Notification (1)	Name of Building	Owner/Operator (A STATE OF THE PERSON NAMED IN	Targetter F	- (constant	-
10 13 1/10 11 1/11 13	EILEEN FAC	744	2013 MAD	Date: 3/	I Parime	210	
Agencies Notified Type Notification	Street Address		2013 MAR 15 A	11 2.08 7	1		
EPA Initial	41 CENTER	CTBEET					
DEP Amended	City, State, Zip (& LICENS	HIROL -			
DOL Amendment #:			a LIUENS	ING			
DOH (including	Nama of Control	LAKES, NJ 074	42	1 Telepho	ne Number		Name and Address of the Owner, where
[ustification)		95		1			
DCA Cancellation	EILEEN PA	CAS	<u> </u>	7.4		- remarkist	-
	, 1	FACILITY INFOR	MATION		1		
Name of facility where abatement is	falding place (3)	A ANDREWS		Type of Facility	(4)		* 2
	2		24.7	1	oi (K - 12)	A A	.20
EILBEN FACAS		28 - 37 - 17 - 17 - 17 - 17 - 17 - 17 - 17			hapter 8 (Other t		2)
Street Address	i				(Private/Commit /Homes, etc.	arcia!	1443
41 CENTER STREET				Square Feet	# of Floors	*Bld	g. Age
City (5)	County (6)		County Code (7)		1		
			(State use only)	Current Use (Prior If being der	nollshed	j)
POMPTON LAKES	PASSAIC					· '.	
Name of Worldoring Furn Hirod by E	Adg. Owner (B)	ASCM No.	Name of Abatema	nt Contractor (9)			
				RATION, INC.			
Street Address			Street Address				.70
			20 California	And the Control of th			
City, State, Zip Code	9.1	1 :	City, State, Zip Coo	ie ist		3	51. 5
		9	Paterson, NI	S. S. State Company of the Company o			
Project Manager for Monitoring Firm	Phon	Number:	Telephone Numbe		License Num 01169		** .*1
Yes		e who we make a second a secon	973-145-802	1 (1)	0110		
Start Date (10)	Sched: Completion	Date (11)	Name of OSHA M D & S Restor		19		
03/02/13	03/18/13		Street Address	attori, me.	The state of the s		
Occupancy Status During Absterner			20 California			Au,	
Facility closed/vaceted during		nt	City, State, Zip Co.				
Abatement performed outside	of normal facility hours-				**		
Describe:NORMAL1)	OURS r		Paterson, NJ	07503	A	55	9.0
Scope of Work (check all that apply				Full Containment	w/negative pres	sture	- 1 h
⊠ >3 sf or >3 lf ⊠	Renovation	100	Ī	Mini-enclosure			Ϊ.
≥160 ef or ≥260 ff	Demolition	8.	,	Glovebag proced			1.0
	la location normally use	orl colohel		Non-Exempted (?) and Non-mab	R	72 .
Location of asbestos-containing	by maintenance/custed	الما	iption of asbestos-containing	Amount		A	n E
material (som) to be	staff(12)	materi	al (ACM)	(Specif)	SF or 0	b	C C
abated in tublity (13)	Yes No	N/A		LF)	V	lī l	b r
DASEMENT	X	PIDE'N	SULATION	12.1.FT	e N		
DANGES LINE					F	ilai	FIF
The state of the s				1.1.		IF	
Washington and the same						ITT	
Registered Waste Hauler	NJDEP Hauler ID	Cubic Yards	of Waste Name of Register	red Landfill			
D&S RESTORATION, INC.	13506	1 YD	TULLYTOW	N, RESOURCE I	ECOVERY	-	
PATERSON, NJ. 07503		posal Date 03/04/13	City, State	DAT TO A			2
Completed by (Print or Turo)		Situature	TULLYTOW	N, FA	l Data		
LANGUEGOD BY OFTING OFTINAL	7144	A TANTAL PROPERTY.			LURIA		

Do nut use this form for asbestos licensure exempted activities

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

D&S Proj. #: MS 13-73			(Pursu	ant to NJAC	8:60	and 12:120)		20	7/2.				
						22011 CO	la.		MAD		1	1	4.
Date of Notification (1) 0 3 / 0 1 / 1 3	- 11	ame of Bui EILEEN 1	1078	er/Operator (2))			1900 1900	13 MAQ	5	// ~	~40	
Agencies Notified Type Notificati		reet Addre							100	gt i		Go	
EPA Initial Amended		41 CENT	ER STR	EET				ſ	CH	10/9	752	.0.	
Amendment #:	C	ity, State, Z	ip Code				*			.0.	10		
DOL Emergency		POMPTO	ON LAK	ES, NJ 0744	12								
DOH (including	Na	me of Con						Telephon	e Numbe	r			
justification) DCA Cancellation	- 11	EILEEN	FACAS						-	<u> </u>			5
			FAC	LITY INFORM	IATION								
Name of facility where abatement is	s taking pla	ce (3)					T	Type of Facility (4) I (K - 12)	N &		1	
EILEEN FACAS							-		apter 8 (0		han K	121	
Street Address								Other (Private/C	omme		-12)	
41 CENTER STREET							-11		Homes, e		В	dg. A	ge
City (5)	Coun	ty (6)	4 FO			ty Code (7)	= _		la E				
POMPTON LAKES	PAS	SAIC			(State	e use only)	1 [Current Use (Pr	rior if beir	ng dem	nolish	ed)	
Name of Monitoring Firm Hired by I		CONTRACTOR OF THE		ASCM No.	-	Name of Abaten	nent Co	ntractor (9)			-		
20 g	E4	100				D & S REST		J) 283					
Street Address						Street Address	Oldii	1011, 1110.					
				2		20 Californi	ia Ave.						
City, State, Zip Code				******		City, State, Zip C							
	î.			T.		Paterson, N	J 0750	3		ः			
Project Manager for Monitoring Firm	1	Ph	one Numb	er		Telephone Numb			License	Numl	oer		
						973-345-8	020			1169			
Start Date (10)	Sched	Completic	on Date (11)		Name of OSHA							
03/02/13	03/18	/13				D & S Resto	oration	, Inc.					
Occupancy Status During Abatemer						20 California	a Aven	110					
Facility closed/vacated during Abatement performed outside	entire perio	d of abater				City, State, Zip C		uc -					
Describe: NORMAL H	IOURS					Paterson, N	I 0750	3					
Scope of Work (check all that apply								Containment w	/necative	nress	ure		
≥3 sf or >3 lf	Renovatio	n	7				-	ni-enclosure	mogauve	prode	dic		
□ >160 sf or >260 lf	Demolition							vebag procedur					
			and andah		57.		∐ No	n-Exempted (*)	and Non-	friable	Proc	_	'
Location of	by mainte	normally unance/cust	ised solely todial	10 to				Amount		e	e	E n	E
asbestos-containing material (acm) to be	staff(12)	V 40 24 14 14 14 14 14 14 14 14 14 14 14 14 14		material (bestos-containin	ıg	(Specify S	F or	m o	p	C	C
abated in facility (13)	Yes	No	N/A		C 40 V V			LF)		V	ĭ	a p	L
BASEMENT	1	PIPE INSU	ILATIO	ON		12 L FT		e	Ó				
DI TODING!									The contract	10			
		14	27.00	F4.371									
			person ac	San Carlo	Viery) is				16.1				
Registered Waste Hauler		P Hauler I		ubic Yards of V	Waste	Name of Regist	ered La	ndfill	COVET	137	1 - 1	*	1.
D & S RESTORATION, INC.	135		Disposal D	YD	A STATE	City, State	vn, RE	SOURCE RE	CUVE	(Y	11,000		0.17
City, State PATERSON, NJ 07503			03/04/1	20 Table 1		TULLYTOV	WN, PA	12			W.	1	eign.
Completed by (Print or Type)	Signature				4 1	Date				15			
BOGDAN JOLDZIC		03/01/13											

CK 213

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

Date of Notification (1)			Name	of Buildin	ng Owner/Operator (2)			77	234			
3 / 4 /	13		Ма	verick M	lanagement Corp		2013 MAI)) ~	*4 \$	1			
Agencies Notified Type Notified	cation		1 1130000000000000000000000000000000000	t Address		8		-5	AM	2.	~ .		
☑ EPA☑ Initial☑ DEP☑ Amende	d (sylvania Ave		A 386.87	<i>-</i>		۲٠	68		
DCA (NJAC 5:16) Amendn		_		State, Zip		F-12	Z L /(001	UN	Por	٠,		
☐ DHSS ☐ Emergel	ncy (includin	g			NY 11207		-7(CHS	INC	110	11		
(NJAC 5:23-8)				of Contact ald Gold			Telephone Nur	nber	-	5			
			1										
Name of Facility Where Abatement is	Tables Diss	- (2)	FA	CILITY	NFORMATION	I = 2 =							
Former Woolworth Building	raking Place	e (3)				Type of Facility (502K						
Street Address						School (K-12) L(Other than K-1	2)					
117 E State Street						Other (i.e., pr	ivate & commerc	ial buil	dings				
City (5)					- 1	Square Feet	# of Floors	В	ldg. A	ge			
Trenton, NJ						48,000	3		100-	٠			
County (6) Trenton			Cou	nty Code (7)(STATE USE ONLY)	Current Use (Pri		ished)					
Name of Monitoring Firm Hired by Bui	Iding Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)	9)						
Ally Services Co	72	27 68	A 15		Marin No. (Sept.) (Appropriate	nvironmental S	ystems						
Street Address		(4);——);;			Street Address								
57 E Durham St					1121 N. Bethl	hlehem Pike - Suite 60							
City, State, Zip Code					City, State, Zip Co	City, State, Zip Code							
Phila PA 19119					Spring House, PA 19477								
Project Manager for Monitoring Firm		Tel	ephone	No.	Telephone No.	Telephone No. License No.							
Andy Miller		-	15 498		215-542-7000	215-542-7000 00847							
Start Date (10)03 /15 /13	Scheduled C	400	etion Da 7 /	100	Name of OSHA M	lonitor							
Occupancy Status During Abatement					Street Address								
☐ Facility Closed/Vacated During Ent			ement			ehem Pike - Sı	iite 60						
☐ Abatement Performed Outside of N	ormal Facilit	y Hou	rs - Des		City, State, Zip Co								
Time of Abatement:AM-3:0	0 FridayPi	M/ <u>8:0</u>	0 Sunc	<u>lay</u> PM-	Spring House								
Scope of Work (Check all that apply)										9 8	222		
≥3 sf or ≥3 lf≥160 sf or ≥260 lf		enovat emoliti			☐ Mini-Encl ☐ Glovebag	ainment with Neg losure g Procedure mpted (*) and Nor		iro.					
	ls	s Loca	tion			inpice () and ivor	- Hable Hocedt		atem	ent T	vne		
Location of	1 444	Norma		E .	Description of	f .		-	T		i -		
Asbestos-Containing Material (ACN TO BE ABATED		aintena	ely by ance/		estos Containing Mat		Amount	Removal	Repair	Enc	Enclosure		
IN Facility	Cus		Staff?	(i.e., the	ermal systems insula VAT, or	tion, surracing,	(Specify SF or LF)	10/2	a:	aps	losu		
(13)	Yes	(12) No	7		other miscellaned	ous)		=		Encapsulate	re		
lower level				Pipe In	sulation (wrap &	cut)	20 LF						
1st floor			\boxtimes	Air Duc	ct Jacket (full Co	ntainment)	280 SF						
					a								
U 42 - 274 .5					(2.1		777	П	П	П	Int		
Name of Registered Waste Hauler		1	NJDEP I		Cubic Yards of	Name of Regist	ered Landfill	+=					
Allied		ŀ	lauler II	No.	Waste 5	Conestoga							
City, State					Disposal Date	City, State			-	-			
Telford, PA					3/18/13	Morgantow	n, PA						
Completed By (Print or Type)	Title			4	Signature	1 1.3	, Da	ate		7.			
Patricia Visco	Office	Mana	ger		fatu	cia Visc	3	3-4	1/3	3			

) DES Proj. #: MS 12-70 State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60 and 12:120) APPROVE Health & Sanior Services Date of Nethication (1) Name of Building Owner/Operator (2) 10 13 1/10 11 1/11 13 STATCO WARRHOUSE CO. INC (Sig.:x(u: 0) Agencies Notified Type Notification Street Address AM 2: 1- pate: EPA Initial Amended 301 16TH STREET DEP Amendment #: City, State, Zip Code DOL NOL LUNIROI & LICENSING **Emergency** JERSEY CITY, NJ 07306 (Including DO DOH Name of Contact Telephone Numbe Justification) ☐ DCA JIMMY MARZANO Canceliation **FACILITY INFORMATION** Name of facility where abatement is taking place (3) Type of Facility (4) School (K - 12) STATCO WAREHOUSE CO. INC. . Subchapter 8 (Other than K-12) Street Address Oller (Private/Commercial Bldgs./Homes, etc. 301 16TH STREET Bldg. Age Square Feet 1 # of Floore City (5) County (6) County Code (7) (State use only) Current Use (Prior if being demalished) JERSEY CITY HUDSON Name of Montomy First Lifed by Bidg, Owner (8) ASCM No. Name of Abatement Contractor (9) D & S. RESTORATION, INC. Etreet Address Street Address 20 California Ave. City, State, Zip Code City, State, Zio Coda Paterson, NJ 07503 Project Manager for Monitoring Firm **Phone Number** relephone Number License Number 973-345-8020 01169 Name of OSHA Monitor Start Data (40) Schied Completion Date (11) D & S Restoration, Inc. 02/28/13 03/01/13 Street Address Occupancy Status During Abatement (Chack only one) : 1: 20 California Avenue Facility closed/vacated during entire period of abatement. Ry, State: Zip Codo Abelianish performed outside of normal facility hours-Describe: Other Describer THORNAL HOURS Paterson, NJ 07503 Scope of Work (theck all that apply) Full Containment winegative pressure **⊠** >3 af or >3 II Renovation Mini-andosura Glovebag procedure ☐ ≥160 sf or ≥260 ff ☐ Demolition Non-Exempted (*) and Non-friable procedure is location normally used solely Location of R by maintenance/custodial gninistroo-containing = . n Description of asbestos-containing Amount " material (acm) to be abated in facility (13) staff(12) m n P meterfal (ACM) (Specify SF or 0 C 0 NA a No V Þ WAREHOUSE Clean up of ACM Debrie (UNDER 12 FT PIPE) SLIT WAREHOUSE PIPE THING INSULATION IELBOW X

Cubic Yards of Waste

STATE

1/2 YD

Disposal Date

03/01/13

On not use this form for aspectos licensure exempted activities.

PAGE. 1

Date

03/01/13

TULLYTOWN, RESOURCE RECOVERY

Name of Registered Landfill

TULLYTOWN, PA

City State

COMMUNICATION No. 33

NJDEP Hauler Da

13506

PRESIDENT

Title

Caristered Weste Flauls

City, State

ASB-41

D&S RESTORATION, INC.

PATERSON, NJ: 07503

Completed by (Print or Type)

BOGDAN JOIDZIC

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

D&S Proj. #: MS 13-70

						20	13MAR -5	100				
Date of Notification (1)	Name of Bui	lding Owne	r/Operator (2)				JHAR	-	£37	*		
10 3 / 0 1 / 1 3		WAREH	OUSE CO. I	NC.		برر م	t- 0	AM a				
Agencies Notified Type Notification	Street Addre	SS				e.	7168 A	<. (8			
DEP Amended	301 16TI	H STREE	Γ				LICENSO!	4112			201	
Amendment #:	City, State, 2	Zip Code					- V/Fq	G'IV				
☑ DOL ☑ Emergency	JERSEY	CITY, N.	J 07306							MIRST DE		
DOH (including justification)	Name of Cor	ntact					Telephone	Number				
DCA Cancellation	JIMMY	MARZAI	NO				_					
		FACII	LITY INFORMA	ATION	T				:00=M04:		2500.00	15.1
Name of facility where abatement is	taking place (3)		F 22			Ту	pe of Facility (4	(K - 12)				
STATCO WAREHOUSE CO.	INC.						Η	pter 8 (O	ther th	nan K	-12)	
Street Address		1	M.				Other (I	Private/Co	omme			
301 16TH STREET					1	S		Homes, et # of Floor		BI	dg. A	ge
City (5)	County (6)		1		ty Code (7)		7 7 7 7					
JERSEY CITY	HUDSON		v a	(State	use only)	C	urrent Use (Pr	ior if being	g dem	olishe	ed)	
Name of Monitoring Firm Hired by B	_		ASCM No.	177	Name of Abateme	nt Conf	ractor (9)				-	
				- 11	D & S RESTO	RATI	ON, INC.					
Street Address				= 5	Street Address							
					20 California	Ave.			501	100		
City, State, Zip Code					ity, State, Zip Co	de						
	3		3		Paterson, NJ				1	8		
Project Manager for Monitoring Firm	Ph	one Number	er	_ 7	elephone Number		5"	License		er		
				11	973-345-80			0	1169			
Start Date (10)	Sched. Completi	on Date (11)		Name of OSHA M D & S Restor		Ina					
02/28/13	03/01/13			1	Street Address	ation,	ilic.					
Occupancy Status During Abatement					20 California	Avenu	e					
Facility closed/vacated during e	entire period of abate	ment.		16	City, State, Zip Co							
Abatement performed outside of Describe:	of normal facility hou	rs-										
Other-Describe: NORMAL HO	OURS			_	Paterson, NJ	07503	2-1-1	7		-		
Scope of Work (check all that apply						Full	Containment w	/negative	press	ure	V - V	
	Renovation						-enclosure					
≥160 sf or ≥260 lf	Demolition				0.11		ebag procedur -Exempted (*)		riable	nroce	edure	4
Location of	Is location normally	used solely					Exemples ()	and mon	R	R	E	1
asbestos-containing	by maintenance/cus staff(12)	todial	Description	on of as	bestos-containing		Amount	_	e m	е	n	E n
material (acm) to be abated in facility (13)		T	material ((ACM)			(Specify S LF)	r or	0	a	a	C
district in identity (10)	Yes No	N/A		- 1				197	e e	 -	р	
WAREHOUSE					(UNDER 12 FT PIPE)	<3 L FT					X
WAREHOUSE	ING IN	SULATION		1 ELBOW			M					
			3+4 Ch 8									14
			11.	¥7			Jen -				Ш	
Registered Waste Hauler D & S RESTORATION, INC.	NJDEP Hauler 13506		ubic Yards of V /2 YD	vaste	Name of Registe TULLYTOW	red Lan N, RES	atill SOURCE RE	COVER	Y		le i	
City, State		Disposal D	A STATE OF THE STA		City, State	1	2000	C LH E	*(=5 * (+	1		
PATERSON, NJ 07503		03/01/1			TULLYTOW	N, PA	- 10 m	15				
	Title PRESIDENT		Signature					Date 03/01/	13			
	Do not use this form	for asbesto	s licensure ex	empted	activities.			1				

Donet

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

Date of Notification (1)					Name	of Buildin	g Owner/Operator ((2)		bia	Land.		
Agencies Notified Type Notification Street Address Type Notification Type Notification Type Notification Street Address													
Agencies Notified	Type Notifica	ation			Street	Address		ē.		419 2	68		
☑ EPA	☐ Initial				330	7 Trindle	Rd.	20 - 3	GESTUS (
⊠ DOLWD				l	City, S	State, Zip (Code		& LICEN	SUNTY	(1)1		
☑ DHSS	Amendm	ACCOUNT OF THE PARTY OF THE PAR	J!		Car	mp Hill, F	PA 17011		TOLIT.	OING	O.L.		
DCA (NJAC 5:23-8)	☐ Emergen justification	on)	aing	-		of Contac			Telephone N	umber			
	☐ Cancellat				Rol	bert Mas	tandrea				i		
			192		FA	CILITY IN	FORMATION						
Name of Facility Where A	Abatement is 1	Taking Pl	ace (3	3)				Type of Facility			1/4		
Shore Mall								School (K-12		10)			
Street Address								☐ Subchapter 8 ☐ Other (i.e., p			uildin	as.	
6725 Black Horse P	Pike			22-50				homes, etc.)				J-,	
City (5)					5			Square Feet	# of Floors	E	ldg. A	ge	
Egg Harbor Townsl	hip							260,000	2		42		
County (6)	N - 10 - 10 - 10 - 10 - 10 - 10 - 10 - 1				Cour	nty Code (7	(STATE USE ONLY)	Current Use (Pr	ior if being dem	olished)			
Atlantic								Retail Store	s				
Name of Monitoring Firm	Hired by Build	ding Own	er (8)	7	ASCM	No.	Name of Abatem	ent Contractor (9)				-	
Connell-Green Con	sulting, Inc.				NA		Alliance Env	ironmental Sys	stems				
Street Address	-						Street Address						
904 Kings Arms Dri	ive						550 East Uni	on Street					
City, State, Zip Code				-			City, State, Zip C	ode	i te				
Downingtown, PA 19355 West Chester, PA 19382													
Project Manager for Moni	toring Firm		T	Tele	ohone	No.	Telephone No.		License No				
Richard Pellissier				48	4-432	-9363	610-701-9000)	00508				
Start Date (10)	. 8	Schedule	d Con	nplet	ion Da	te (11)	Name of OSHA N	Monitor			75		-
01 / _28_ /	13	5	_ / _	31	_ /	13	AET						
Occupancy Status During	Abatement (Check on	lv one	2)			Street Address					-	
☐ Facility Closed/Vacate					nent		28 N. Pennel	Road					
☐ Abatement Performed						cribe	City, State, Zip Co						
Time of Abatement: 7	AMPN	1/ <u>3:30</u> PN	Λ	A	M		Media, PA 19						
Scope of Work (Check all	that apply)												
☐ >3 sf or >3 lf		×	Reno	vatio	n			tainment with Neg losure	jative Pressure				
≥160 sf or ≥260 lf		-	Demo				☐ Gloveba	g Procedure	i jo e s				
								mpted (*) and No	n-Friable Proce	edure		2-12	
			Is Lo	cati mal		54				A	atem	ent T	ype
Location Asbestos-Containing N	TO BE SET HUMBERS STREET	, l	Jsed S			Ache	Description o stos Containing Ma		Amount	공	Re	四	m m
TO BE ABA			Maint				., thermal systems		(Specify	Removal	Repair	cap	Enclosure
IN Facilit	y	0	ustod	lial S 12)	staff?	50	surfacing, VAT		SF or LF)	<u>a</u>	13.5%	Encapsulate	ure
(13)		Ye		No	N/A		other miscellane	ous)				ite	
Throughout Building					\boxtimes	Floor T	ile		10,807 SF				
Throughout Building	4.]	\boxtimes	Floor M	astic	2200 11	11,684 SF				
Common Area]	\boxtimes	Texture	d Ceiling		500 SF	. 🛛			
Space #2]	\boxtimes	Vibration Cloth 12 LF							
Name of Registered Wast	e Hauler			1000	DEP V		Cubic Yards of	Name of Regis	tered Landfill				
N.E.T.S.				3.200	uler II		Waste 20	Allied BFI I	mperial				
City, State					18947		Disposal Date	City, State					
Hazelton, PA							TBD	Imperial, P.	Α				
Completed By (Print or Ty	pe)	Title			4		Signature /	1		Date			
Mark Griffin		Estin	nator			1	o.g.iataro /	h		5-	2	0	12
			.4.01		38.1		/	1			~	0-	17

ASB-41 MAY 11

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

of Notification (1)		2		Name	nifer-L	eChase	ner/Operator (2) Construction	n	4 5	2013 MAR 5	47 V (-23	\dashv	
02/	27 / 1:				Addres				1	·)	AM 2	: 6.	,	
cies Notified	Type Notification	n				de Driv	re			113 Silver		C.S	2	
PA	☐ Initial		1			ip Code				& LICENS	UNIN	O.	.	
OLWD	Amended Amendment	#001		City,	chaete	er, NY 1	4614		V. S	25/47	Mg"	UL		
HSS	☐ Emergency	(including	(e of Co		ī		Tel	ephone Number				
OCA NJAC 5:23-8)	justification)								I—-					1
NJAO 0.20 0/	☐ Cancellation	1			nry Fe		DMATION							1.
				FA	CILIT	Y INFO	RMATION	Type of	f Facility (4)					
ne of Facility Where ormer Springsid	Abatement is Take Elementary S	king Place School	(3)	1		-	9	☐ Sch ☐ Sub ☒ Oth	nool (K-12) ochapter 8 (O ner (i.e., privat	ther than K-12) te and commercia	building	ıs,		
eet Address								hor	mes, etc.)	# of Floors	Bldg. A			1
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me of Monitoring Fi	irm Hired by Buildi	ing Owne	r (8)	1	A	1	Alliance Env	ironm	ental Syste	ms				-
MDG Environme	ntal LLC			IN	<u> </u>		Street Address							
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roject Manager for I	Monitoring Firm		T		one No.	S	610-701-900	00		00508				_
Christopher Ma	ori				755-93									
I WEIGHT OF ING	v						THOO ALOCHA	Monito	r .					
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)

0	110	(Pur	suant to	NJAC 8:60	and 12:120))	Man	Eve					
Date of Notification (1)				Building Owne ter Road II		(2)	Man		/ED			80/11==	
Agencies Notified Type Notification	,		reet Add	iress vnship Line	Rd.		MAR -	AA	1 2: 68				
▼ EPA ▼ DEP ▼ DOL Initial Amended Amendment #		С	ity, State	e, Zip Code , PA 19067		- Sig	LICE	COA	TROI		1) 10	-	
Emergency (ir justification) DCA Emergency (ir justification) Cancellation	cluding	9.5	ame of Coseph				01. F	Tele	phone Numb	er		97 7	
DCA Cancellation				TY INFORM	ATION								
Name of Facility Where Abatement is Taking Former Lucent Facility	Place (3)						f Facility (4 chool (K-12	8 101					
Street Address						S	ubchapter 8	(Othe	er than K-12)	المالديا		ama	.
330 Carter Rd.						et	tc.)		commercial				5,
City (5) Hopewell						Square 600		1	Floors	80	dg. Aq)	je 	
County (6) Mercer	E		ounty Co	ode (7) SE ONLY)			nt Use (Prio nt/electric		ng demolishe om	d)			
Name of Monitoring Firm Hired by Building C	wner (8)		ASCM 00021				ement Con		⁽⁹⁾ ystems, In	c.			
Street Address 28 N. Pennell Rd.				a ^{ll}		t Address East U	s Inion St.						
City, State, Zip Code						State, Zip	code ster, PA 1	9382					
Media, PA 19063 Project Manager for Monitoring Firm			elephon	e No	100000000000000000000000000000000000000	hone No		-	License No	. 17			
Eric Houseknect		(908-29	6-1132	610-	-701-90	000	ě	00508				
Start Date (10) 3/14/13	Schedule 3/16/13		pletion D	oate (11)	AET		A Monitor	¥					3
Occupancy Status During Abatement (Check					1 7,0%	t Addres V Penr	s nell Rd.						
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe:	eriod of A al Facility	Hours	ent		City,	State, Zi							
Scope of Work (Check All That Apply)							100					×	155
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	enovat emoliti				Min Glo	i-Enclosure	e edure	n Negative Pr			e	
	1	Location		× ====		1101	LACINIPIE	. ()			Abate	ment	1
Location of	1	Normall	y		Description	on of					T y	pe	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma Cust	d Solel intenar todial S (12)	taff?	(i.e. the	Containing rmal syster surfacing, V her miscella	ns insula 'AT, or	(ACM)	(Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A X	NE mass	tic on fibe	aralass	ingul	1	20 SF	X	-		6 1 10
crawlspace			X	15.34.14	egory 2 N				25 SF	X			-
crawlspace				Oate	ogory 2 iv	u uobi					17.5		
		10			- V	e engli				1			is i
Name of Registered Waste Hauler Freehold Cartage		Н	JDEP W lauler ID 541261	No. o	ubic Yards f Waste		Name of Grows		ered Landfill fill				-2
City, State Freehold, NJ					isposal Dat /25/13	te n/	City, Stat		nip, PA	2			
Completed by Robert M. Casciato	Title Pres	ident			Signatu	yré///		1	Da 2/2	te 28/1:	3		κ.

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

CK 16le

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

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Date of Notification (1)	03/01/20	13				ng Owner/Operato		H %	PR	es of		
Agency Notified	Type Notification				1 Address		OKEN	. 97		ì	5	
MEPA DEP	initial Amended			City.	State Zip	Code		1/	10		1	7
₩ DOL	Amendment #	dina			AST 1	RUTHERFO	RD, NJ,	07073	2	G,		7.
☑ DOH ☑ DCA	justification) ☐ Cancellation	9			e of Contai	CITARITA	l	Telephone Number		To	4	0,
				FAC	ILITY INF	ORMATION						
Name of Facility Where)				Type of Facility					
Street Address	SEPH PAR	174					邁 School (K-1)	2) 8 (Other than K-12)				
20 H	PACKENSAC	K	RE	DAC)		homes, etc.					-
City (5) FAST	RUTHERFOR	W,	CV	, 0	707	3	Square Feet	# of Floors Blo	1g. Ag	•		
County (6)				Coun	ty Code (7) (STATE USE	Current Use (P	rior if being demolished		_		
BER (ONLY	()		5 CH					
Name of Monitoring Firm (8) DAI INCL	RONNENTAL		ASC	√ No			nent Contractor (,	2	0
Street Address	KUNNENTAL	Jery				Street Address		offolg flousid	111	471	030	عا
300 GRAM	ID AVENU	IE				109	5 PLAC	DERVILLE				
City, State, Zip Code ENG LEW			71			City State 7in C	`ode	NJ,078	37	/_		
Project Manager for Mon				ne No.		Telephone No.	HIED!	License No.	5	0		-
ANTHONY V.	ALENTINE						3486	0/154				
Start Date (10) 03 /15 /26	Scheduled 03/	Comple	tion Da	ate (11)) '	Name of OSHA	Monitor	1				
Occupandy Status During				15		Street Address	IKONNEN	TIL SERVICE	=>			
- 1 <u>-</u>					3		TRAND 1	W.,				
☐ Abatement Performed ☐ Other – Describe:				·		City State Zin C	oda	N.D, 070	531	;		
Scope of Work (Check all	that apply)					0.00		Negative Pressure				
☐ ≥ 3 sf or ≥ 3 lf 図 ≥ 160 sf or ≥ 260 lf					novation molition	☐ Mini- ☐ Glove	Enclosure ebag Procedure	Non-Friable Procedure				
•		Is	Locat	ion	1		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	110111110001110000010	F	Abate		nt
Location	n of		Norma ed Sole		-	Description of				Ty	pe	П
Asbestos-Containing TO BE AB		Ma	intena	nce/		tos Containing Ma , thermal systems		Amount (Specify	R	B	Enc	5
IN Faci		`	Staff			surfacing, VAT other miscellane	, or	SF or LF)	Remova	Repair	Encapsulate	Enclosure
		Yes	(12) No	I N/A					<u>a</u>		ate	9
2 ND FLOOR			V		VA-	T/MASTI	C	1,320 SF	V	\vdash		
IND FLOOR			V		CET	LING-TIES		1,320 SF	V			-
									1			
Name of Desistand Wast	o Haules	LNU	DED	Vaste F	laular	Cubic Yards of	Name of Regis	lered Landfill	\perp			4
ATC - 4114	e riadiei	ID	No.	39		Waste		VA ENTERPRY.	تخ ذ			
City, State		1	07	57		Disposal Date	City, State					\dashv
SHILL		7	1			03/19/13	WAYNE		4			
Completed by	Title	m	^		20	Signature /	1. 1/1	Date	4.1	. 1	3	
MENATA KOLOS		t use th		AGC of for as		ensure exempted a	activities.	out 1	1	- 1.	2	٠.

2013-44 B & G proj. #:

State of NJ

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

Check # 5790

										1			
Date of Notification]/[<u>1]3</u> [Building Own chardson	er/Operator (2))		5 AM 2:08					
Agencies Notified	Type Notificat	tion	treet Ado	ress			. #35t51U	S CUNTROL ENSING		t			
☐ EPA	Initial	- 11	94 Ha	wthorne A	venue		& LIU	ENSING					
☐ DEP	☐ Amend			, Zip Code nfield, NJ (07003						-		74
X DOH		N	ame of C	ontact				Telephone	e Numbe	r -			
☐ DCA	Cancell	ation	Bob F	Richardsor	1								
				FAC	ILITY INFORM	MOITA	٧				,,,,,,		
Name of facility wh	ere shatement	ie takina ni:	ace (3)					Type of Facility (4)	- 1		7	
TO THE PERSON AND A TO SERVICE OF THE PERSON AND TH		is taking pi	200 (0)					School	(K - 12))			
Bob Richards	on								apter 8 (12)	
Street Address									Private/0 Homes,		rciai		
94 Hawthorne	e Avenue							Square Feet	# of Floo	rs	В	ldg. A	ge
City (5)		Cou	nty (6)			55.00	inty Code (7)	Current Use (Pr	ine if bai		olich	od)	
Bloomfield		Es	sex			(Sta	ne use only)	residential	ior ii beii	ig den	Olish	euj	
Name of Monitorin	g Firm Hired by	Bldg. Own	er (8)		ASCM No.	-	Name of Abatement C						
	N/A					.	B & G Restoration	on, Inc.					
Street Address							Street Address 105 Ryerson Ro	oad					
City, State, Zip Cod	e						City, State, Zip Code Lincoln Park, N	IJ 07035					
Project Manager for	Monitoring Firm	n	T	Phone Numb	per		Telephone Number (973)696-6869		License 0	Numb 0378	er		
Scheduled Start Da	to (10)	ISched	Comple	etion Date (1	1)	-	Name of OSHA Monit						
03/12/2013	ie (10)		13/2013		.,		B & G Restoration	on, Inc.					
Occupancy Status I	Ouring Abatama					_	Street Address 105 Ryerson Ro	nad					
Facility closed		entire peri	od of aba	itement.			City, State, Zip Code						
Describe: Other-Describ	oe:					_	LincolnPark, NJ	07035					
Scope of Work (ch		y)											
☐ Demolition	X	Renovation	n				Full Containment w/nega	ative pressure	Glove	bag pr	oced	ure	
>3 sf or >3 lf		≥160 sf or	≥260 If			X	Mini-enclosure		Non-f	riable	огосе	dure	
Location of				y used solely	y			-11:		R	R	E	E
asbestos-con		by mainte staff(12)	enance/co	ustodial	1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		sbestos-containing	Amount (Specify S	F or	m	р	n	n
material to be abated in faci		Yes	No	N/A	material	(ACIVI)		LF)		o v e	a i r	a p	Ľ
main room				X	pipe insu	lation		17 lf		X		口	10
laundry room				×	pipe insu			20 lf		X		H	1
boiler room				X	pipe insu	lation		12 lf		X	님	ዙ	뉴
									-	H	H	H	1
Registered Waste H	auler	IN.ID	EP Haule	r ID# I C	ubic Yards of	Waste	Name of Registered I	andfill		-			1-
B & G Restorat	ion, Inc.		19563		1 yard		Tullytown F	Resource & Re	covery	Cent	er		
City, State Lincoln Park, N	IJ	-1/42	ir, for	Disposal Dis	ate 3/2013		City, State Tullytown, F	PA					
Completed by (Print Gordana Luna		Title Secreta	ry/Trea	surer	Signature		Gordana Luna		Date 03	/1/20	13		

State of NJ Notification of Asbestos Abatement

(Pursuant to NJAC 8:60-7 and 12:120-7) Check # 5791 2013-48 B & G proj. #: 2013 MAR -5 AM 2: 68 Name of Building Owner/Operator (2) Date of Notification (1) & LICENSING Ed Modrzewski 10 13 1/10 11 1/11 13 Type Notification Street Address Agencies Notified 132 Hawthorne Avenue ☐ EPA Initial City, State, Zip Code ☐ DEP Nutley, NJ 07110 Amendment Telephone Number X DOL Name of Contact DOH Cancellation Ed Modrzewski ☐ DCA FACILITY INFORMATION Type of Facility (4) School (K - 12) Name of facility where abatement is taking place (3) Subchapter 8 (Other than K-12) Other (Private/Commercial Ed Modrzewski Bldgs./Homes, etc. Bldg. Age # of Floors Street Address Square Feet 132 Hawthorne Avenue County Code (7) Current Use (Prior if being demolished) County (6) (State use only) City (5) residential Name of Abatement Contractor (9) Essex Nutley, NJ 07110 ASCM No. Name of Monitoring Firm Hired by Bldg. Owner (8) B & G Restoration, Inc. N/A Street Address 105 Ryerson Road Street Address City, State, Zip Code Lincoln Park, NJ 07035 City, State, Zip Code License Number Telephone Number 00378 Phone Number (973)696-6869 Project Manager for Monitoring Firm Name of OSHA Monitor B & G Restoration, Inc. Sched. Completion Date (11) Scheduled Start Date (10) Street Address 03/13/2013 105 Ryerson Road 03/13/2013 Occupancy Status During Abatement (Check only one) City, State, Zip Code Facility closed/vacated during entire period of abatement. Abatement performed outside of normal facility hours-LincolnPark, NJ 07035 Describe: Other-Describe: Full Containment w/negative pressure Scope of Work (check all that apply) Non-friable procedure ▼ Renovation Demolition Mini-enclosure E ≥160 sf or ≥260 lf E e >3 sf or >3 lf п Is location normally used solely n Amount m C Description of asbestos-containing by maintenance/custodial (Specify SF or 0 Location of a a asbestos-containing material (ACM) LF) D staff(12) material to be N/A No abated in facility (13) Yes X 1/2 If pipe insulation X 26 lf basement X pipe basement Name of Registered Landfill Tullytown Resource & Recovery Center Cubic Yards of Waste NJDEP Hauler ID# Registered Waste Hauler 1 yard 19563 B & G Restoration, Inc. City, State Disposal Date Tullytown, PA 03/14/2013 City, State Lincoln Park, NJ 03/1/2013 Gordana Luna Signature Completed by (Print or Type)

Secretary/Treasurer

Gordana Luna

State of NJ Notification of Asbestos Abatement

	0042.20		No (Purs	tification	of Asbes	tos Abatement 0-7 and 12:120-7)	VAR Check	# 5789		1	23	
B & G proj. #:	2013-39						W See All					•
Date of Notification (of Building		erator (2)	2013 MAR -5				· ·		-
Agencies Notified	Type Notification	Street	Address			& LICEN	UNTROL					
☐ EPA	X Initial		3 71st Str			€c. LIUEH:	SIME					-
☐ DEP	-	City, S	State, Zip Co	ode	7047							-
X DOL	☐ Amendment		orth Berge	The second second second	041		Telephor	ne Number				
DOH DCA	Cancellation		of Contact esar Robl									=
				FACILITY	Y INFORMA	TION	Type of Facility	(4)				
	nere abatement is tak	ing place ((3)				Scho	ol (K - 12)				
							☐ Subo	hapter 8 (Other	than	K-12)		
Cesar Robles	3							r (Private/Comn s./Homes, etc.				
Street Address							Square Feet	# of Floors	T	Bld g .	Age	
413 71st Stre	eet		(6)			County Code (7)	-			abod)		_
City (5)		County	(6)			(State use only)		(Prior if being de	emon	sileuj		
North Berge	en	Huds	on			I I I I I of Abate	residential ment Contractor (9)					_
Name of Monitor	ing Firm Hired by Bld	g. Owner (8)	A	SCM No.							
Marine of Missing	N/A					Street Address	toration, Inc.					
Street Address						105 Ryers	son Road				-	
					7 1911	City, State, Zip	Code					
City, State, Zip C	ode			4	i e a		Park, NJ 07035	License N	umbe	r		_
	for Monitoring Firm		Phor	ne Number		Telephone Nu (973)69	mber 6-6869	003				
Project Manager	IOI Montomia					Name of OSH	The same of the sa					
Scheduled Start	Date (10)	Sched.	Completion	Date (11)		B & G Re	storation, Inc.					
03/11/201		03/12	2/2013			Street Addres	S D-ad					
Chal	o During Abatement	(Check on	ly one)				son Road					
The second secon	o nominal designation	nnire nellu	u oi abaton	nent.		City, State, Zi	p Code					
Abatemen	it performed outside c	of normal fa	acility nours			LincolnP	ark, NJ 07035					_
Describe: Other-De	scribe:											1
Scope of Work	(check all that apply)					Full Containme	ent w/negative pressur	e 🗶 Gloveb				
☐ Demolitic		Renovatio				Mini-enclosure		☐ Non-fri				_
※ >3 sf or >	>3 If □ ≥	160 sf or	>260 If n normally u	read solely	1				e.	R	E i	E
Location	of	by mainte	n normally c enance/cust	odial	Descr	ption of asbestos-conta	aining Amo	unt cify SF or	m	p a	c	C
material	containing to be	staff(12)		$\overline{}$	mater	al (ACM)	ĹF)		v e	i	р	L.
abated in	n facility (13)	Yes	No	N/A			120	f	X			
	-, - u - 14 1 - 1			X	pipe in	sulation	120					
becoment	appearance of the Sun is	1-10			11							1
basement											Ц.	11
basement											님	旨

Name of Registered Landfill
Tullytown Resource & Recovery Center Cubic Yards of Waste NJDEP Hauler ID# 19563 Registered Waste Hauler B & G Restoration, Inc. 1 1/2 yds City, State Tullytown, PA Disposal Date 03/12/2013 City, State Lincoln Park, NJ Gordana Luna Signature 03/1/2013 Completed by (Print or Type) Gordana Luna Secretary/Treasurer

CK 2501

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

RECEIVED

Date of Notification (1) 2/28/2013		I	Name of 891 N	Building (Owner venu	r/Operator ((2) :/o Ind	dustry City	2A63	blates	35	*Events		
Agencies Notified Type Notification			Street Ad							1	rii	1-2:	ତିଥ	
X EPA X Initial			882 TI	nird Ave	nue	,		ś	108	ES [4]	12 838			
DEP Amended Amendment		_	and the same of th	te, Zip Co lyn, NY		32			Ğ	ESTA LICE	EKSIA	ITTA IG	OL	
Emergency (i justification) DCA Emergency (i justification) Cancellation	ncluding		Name of Dennis	Contact s Hovan	ec					ephone N				
				LITY INFO		TION						-		
Name of Facility Where Abatement is Taking Street Address 891 Newark Avenue	Place (3)						of Facility (4 School (K-12 Subchapter of Other (i.e. pr	2) 8 (Oth			dings	, hom	ies,
City (5)		100.22			4		e	etc.) re Feet	1 # 01	f Floors	- 1	3ldg.	۸۵۵	
Elizabeth							800,		4	1110015			ears	
County (6)		1	County C	Code (7)				nt Use (Prio	r if bei	ng demo			-	
Union			(STATÉ L	JSE ONLY)				ant for De		The state of the	76-10:00:00 :			
Name of Monitoring Firm Hired by Building C	wner (8)		ASCM	l No.				ement Cont		(9)				
Street Address					-	Street A	Addres	s .				-		
City, State, Zip Code			* s			1360 City, St		n Avenue	e, Un	it 365				
		9			Clifto	n, NJ	07012					site."		
Project Manager for Monitoring Firm			Telephor	ne No.		Telepho 973-4				License 01036				
Start Date (10) 3/13/2013	Schedule 4/13/20		mpletion [Date (11)		A STANTAGE STANTAGE		IA Monitor ntracting,	Inc.					
Occupancy Status During Abatement (Check	Only On	e)				Street A	Addres	s .						
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm						1360 City, St		on Avenue p Code	e, Un	it 365			- 10	
Other – Describe:					_	Clifto	n, NJ	J 07012						
Scope of Work (Check All That Apply)	, E			2		1 2 4		1		100				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		lenov emol				×	Min Glo	Containme i-Enclosure vebag Proc n-Exempted	edure				re	
	le	Loca	tion		8				.,			Name and Address of the	emen	t
Location of	l N	lorma	illy			Description	of					T	уре	_
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mai	intena	Staff?		therm sur	ontaining Manal systems facing, VAT r miscellane	insula Γ, or		(5	mount Specify or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A		Ti No.							_	6	
Front Bldg. East Elevation Facade		X		1 1 1-0	Tar \	Waterpro	ofing		20	00 SF	X			
Front Bldg. East Elev. Setback Roof		X			Roofi	ing Memb	orane	elation in the	18	30 SF	X			£
Front Bldg. East Elev. Canopy Roof		X	10.00	·	Roofi	ing Memb	orane	i, 3	54	10 SF	Х			
Rear Building Parapet Wall		X				Waterpro	ofing			80 SF	Х			
Name of Registered Waste Hauler			NJDEP W Hauler ID		* 190000000	ic Yards /aste		Name of F				1.0		
Atlantic Carting, LLC	Hauler ID No. of Waste NJ-641 40				IESI PA Bethlehem Landfill Corp.					- 1				
City, State Wayne, NJ				Disp	oosal Date D		City, State Bethleh		PA					
Completed by			F		Signature		1.000		39()	Date				
Sean Zoric	iden	t .			Lines				. Leg	2/28/2	013		- 19	

D&S Proj. #: MS 13-68

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

				2013 MAI) -			10	
Date of Notification (1)	Name	of Building Ow	ner/Operator (2	2)	7-5 AH 2:08			1 48	
10 2 / 2 8 / 1 3		GERS UNIV	ERSITY	- 45appe	., <. 08				
Agencies Notified Type Notification	Street /	Address		& / 11	CENSING ROL				· ·
_	27 R	OAD 1. BUI	LDING 4086	· //	-ENSING MUL				
DEP Amended	The state of the s	ate, Zip Code						_	
DOL Emergency	'		NJ 08854-80	136					
DOH (including	The state of the s	f Contact	113,00034-00	750	Telephor	ne Number		-	-
DCA justification)					Troippion	io riumbor			
☐ Cancellation	<u>MIC</u>	CHAEL SMIT	TH						
	-9		CILITY INFORM	MATION					30 E 2
Name of facility where abatement is	taking place (3)				Type of Facility	(4) ol (K - 12)			
CONKLIN HALL				Lower to the		apter 8 (Other	than I	(12)	
Street Address						(Private/Comm			
					Bldgs.	/Homes, etc.			
175 UNIVERSITY AVENUE City (5)	County (6)		1	1 0	Square Feet	# of Floors	B	ldg. A	Age
City (3)	County (o)			County Code (7) (State use only)	Current Use (P	rior if boing do	nolioh	od\	
NEWARK	ESSEX			And the second second	Current Ose (F	nor ir being der	HOHSI	ieu)	
Name of Monitoring Firm Hired by Bl	dg. Owner (8)		ASCM No.	Name of Abater	nent Contractor (9)				
CARDNO ATC			00098	D&SREST	ORATION, INC.				
Street Address				Street Address				1000	
3 TERRI LANE				20 Californ	ia Ave.				
City, State, Zip Code	ST			City, State, Zip C	Code		(f. x)		
BURLINGTON, NJ 08016			activity of	Paterson, N	J 07503			-	
Project Manager for Monitoring Firm		Phone Numb	er	Telephone Num		License Num	ber		
BRIAN KEARNEY		609-273-80	150	973-345-8	020	01169)		
Start Date (10)	ISched Comr	letion Date (1	AND THE CONTRACT OF THE PARTY O	Name of OSHA	Monitor	1			30 A T
		350		D & S Rest	oration, Inc.				
03/18/2013	03/25/2013			Street Address			15		
Occupancy Status During Abatement				20 Californi					
Facility closed/vacated during en				City, State, Zip C	Code		. 14		
Abatement performed outside of Describe: Occupied - 5:00pm to 5	:00am	nours-							
Other-Describe:				Paterson, N	J 07503				
Scope of Work (check all that apply)			Service Ores	taller on the latest	Full Containment w	/negative pres	sure		
☐ > <u>3</u> sf or > <u>3</u> lf R	enovation				Mini-enclosure				
≥160 sf or ≥260 if □ D	emolition				Glovebag procedu		nroc	odure	
Location of	s location norma	ally used solely	/			R	R	E	
asbestos-containing	y maintenance/		The second second	on of asbestos-containing	Amount	e	е	n	l E
material (acm) to be	taff(12)		material ((Specify S	For o	p	c	C
abated in facility (13)	Yes No	N/A			LF)	V	i	p	L
SECOND FLOOR LOBBY	X		Ceiling Ma	terial	900 SQFT	e 🗵	ff		П
erenege en			Townsteen and				市	Ħ	愩
						H	Ī	F	IT
V are a sum of the		7,000		Service Control		F	F	F	T
						H	H	H	市
Registered Waste Hauler	NJDEP Hau	er ID# C	ubic Yards of V	Vaste Name of Regist	ered Landfill			1-1	1
D & S RESTORATION, INC.	13506		YD		VN, RESOURCE RE	COVERY	Early C		. 5 . Vi
City, State		Disposal D		City, State					
PATERSON, NJ 07503		03/28/13		TULLYTO	WN, PA				
	tle		Signature		No. 10 10 10 10 10 10 10 10 10 10 10 10 10	Date			

EDS12-340 NO	(signature) of Health & S	mier serv	NOTIF	ICATIO	tate of New J N OF ASBES I to NJAC 8:6	TOS ABATE				age 1	-	2,	4	78
Date of Notification (0)		fie:			of Building Ow sck Valley F			ool Distr		- 1	1.00 ₀	The same	,	
Agencies Notified	Type Notification			Street /	Address ers Avenue			(9	1	· ·	5	 P.
EPA DEP DOL	Initial Amended Amendmen	t #		City, St	ate, Zip Code /ale, NJ 07(-			3			نئ
区 DOH	Emergency justification Cancellation	(including			of Contact	-				phone N	umber	C.	P	
				A STATE OF	ILITY INFOR	MATION					-			9 24
Name of Facility Where Pascack Valley Re Street Address 46 Akers Avenue				OE			Sci	Facility (4) hool (K-12 behapter 8 her (i.e. pri) 3 (Othe			dings	hom.	e s,
City (5) Montvale	70.00						Square 115000	Feet	# of	Floors	1	Bidg. A	/gs	
County (6) Bergen		7.00.	T		Code (7) USE ONLY)		Current	Use (Prior	if beir	g demoli	shed)			
Name of Monitoring Firm Health & Safety Se		Owner (8)		ASCI 0011	M No.		of Abater Group, Ir	nent Conti 1C	ractor	(9)				
Street Address 318 12th Street				1	***		Address Hambur	g Turnpi	ike				105	
City, State, Zip Code Hammonton, NJ 08	3037						state, Zip (mingdal	Code e, NJ 07	403		WAR TO VICTOR OF			
Project Manager for Mor James Proctor	nitoring Firm			Telepho 609-70	one No. 04-8850		none No. 710-972	25		License 01084	No.			
Start Date (10) 3/1/2013 after 3:00	PM	Schedul 3/4/20		npletion	Date (11)		of OSHA Group, Ir							
Occupancy Status Durin Facility Closed/Vac	E STATE SEE	\$7.V	(8)	nent			Address Hambur	g Turnpi	ike					
Abatement Perform Other - Describe:							state, Zip (minodal	code e, NJ 07	7403					
Scope of Work (Check A	All That Apply)		- 341 - 18						e e		-			_
≥3 sf or ≥3 if ≥160 sf or ≥260 if		DOM: Y	Renove Demoli			2	Mini-E Glove	ordainmer Inclosure bag Proce Exempted	dure				ė	
			Locat		120		1 12					Abate	emen pe	t
Location Asbestos-Containing TO BE AB In Faci (13)	Material (ACM) ATED lity	Use Ma	d Sole intena todial ((12)	ely by nce/ Staft?	(i.e. the	Description Containing Namel system aurfacing, VA her miscellar	Material (A s insulatio T, or		(S	nount pecify or LF)	Removal	Repair	Encapaviate	Enclosure
	-	Yes	No	N/A			11			01.65	-	_	do	
BÔE O	ffice		X	- 4	1	oipe insula	tion		- 2	OLF	X			
							V 1600							
Name of Registered War GL Group, Inc	ste Hauler		1	UDEP V lauler ID 033034	No. of	ubic Yards f Waste BD		lame of Re Cumberla	100			L II		
City, State Bloomingdale, NJ				100		isposal Date BD		ity, State Newburg	h, PA					
Completed by Elena Solakov		Title Presi	dent			Signature	Elem	Slotta	<i>j</i>		ate 2-27-	2013		

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

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0/3	, \
Page	Lof 1
check	4 1 456

Print Form

		(r	uiSuaiii	LU NUAC	0.00 anu 12.	120)		C	heck# 1	456		TA	
Date of Notification (1) 02-27-2013	-				Owner/Opera		School Dis	<	10.	1	· -		
Agencies Notified Type Notification EPA Initial			Street A 46 Ak	Address ers Ave	nue		300		10/4	3/0	· C	'n	
DEP Amended Amendment				ate, Zip C ale, NJ					(;	, 5	2		
	including	1	Name o	f Contact they				Tele	enhone Nu	mher			-
			FAC	ILITY INF	ORMATION								p—
Name of Facility Where Abatement is Taking Pascack Valley Regional High School			BOE				pe of Facility (School (K-1	2)		0)			
Street Address 46 Akers Avenue				1 4		×	Subchapter Other (i.e. p etc.)				dings	home	es,
City (5) Montvale	6		-		-		quare Feet 15000	# of 2	Floors	- 1	31dg. <i>F</i> 10+	\ge	
County (6) Bergen				Code (7) USE ONLY	0	Cı	urrent Use (Prid	or if beir	ng demolis	hed)		20 000	
Name of Monitoring Firm Hired by Building C Health & Safety Services Inc	Owner (8) .	ASCN 0011		100		Abatement Cor up, Inc	ntractor	(9)				
Street Address 318 12th Street					A1 1170500	et Ad 0 Ha	dress mburg Turn	pike					
City, State, Zip Code Hammonton, NJ 08037							e, Zip Code ngdale, NJ 0	7403	6 8				
Project Manager for Monitoring Firm James Proctor			Telepho 609-70	ne No. 04-8850		ephone 1-71	e No. 0-9725	- 1	License N 01084	lo.			
	Schedu 3/4/20		mpletion	Date (11)	4 55530		OSHA Monitor up, Inc						
Occupancy Status During Abatement (Check	Only O	ne)				et Ado	#4 # # T T T T T T T T T			-	i.		\$ 100
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other – Describe:					City	, State	mburg Turni e, Zip Code		3 10				
_					— Bio	omir	ngdale, NJ 0)/403					
Scope of Work (Check All That Apply) ≥3 sf or ≥3 if ≥160 sf or ≥260 if	×	Renova Demoli	ation tion			×	Full Containme Mini-Enclosure Glovebag Prod Non-Exempted	e cedure				e	
	1000	Locat Norma				12.7					Abate	ement pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	. Use Ma	ed Sole aintena stodial ((12)	ely by nce/		Description Description Stos Containing Stos Containing Stoses St	ms in:	sulation,	(S	nount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A		+						2 200	(D	
BOE Office		X			pipe insu	lation	1	2	0LF	X			
	-									-			
	-			April 10 may 10 m									-
Name of Registered Waste Hauler GL Group, Inc		F	JUDEP W lauler ID 033034	No.	Cubic Yards of Waste TBD	5	A 100 100 100 100 100 100 100 100 100 10		ed Landfill County L		ı		
City, State Bloomingdale, NJ			And San		Disposal Da TBD	te	City, State Newbur		\		- 1		
Completed by Elena Solakov	Title Pres	ident			Signatu	ure &	Sem Stolls	J	Da 02	ite 2-27-	2013		

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

Cl.#2410

Date of Notification (1)	13		Nam	e of Buildi	ng Owner/Operator University-Office	(2)		1100	工作		
Agencies Notified Type Notified ☐ EPA ☐ Initial			Stree	et Address				1111	2: (8	<u></u>
☑ DOLWD ☐ Amende	ed		- 6				JBESTUS	Part.	7 12 0		
☑ DHSS Amendn		_		State, Zip			& LICEN	SIM	IKU	l.	
☐ DCA ☐ Emerge	ncy (includir	ng			NJ 08544				3		
(NJAC 5:23-8) justificat			2000	e of Conta	27 14		Telephone Nu	mber	75		
☐ Cancella	ation		Ro	bert Orto	ega	38			l		
-			FA	CILITY	NFORMATION						
Name of Facility Where Abatement is	Taking Plac	e (3)			-	Type of Facility	(4)		-		
Princeton University- Jadwin	Hall					School (K-12)	Ja .			
Street Address		ac-osteli			11	Subchapter 8			020000		
Washington Rd						Other (i.e., pr homes, etc.)		ercial b	uildin	gs,	
City (5)			-			Square Feet	# of Floors	Te	Ildg. A	\00	
Princeton							# 011 10015		nug. /	nge	
County (6)			Cou	nty Code	(7)(STATE USE ONLY)	Current Llee /Dri	or if being dame				
MERCER			Cou	nty Code	(1)(STATE USE ONLT)	Current Use (Pri	or it being demo	iisnea)			
Name of Monitoring Firm Hired by Bui	Idina Owner	(0)	ASCM	I NI -	The same	1		2			-
ATC Associates Inc	iding Owner	(0)	ASCIVI	I NO.		ent Contractor (9)					
						IVIRONMENTAL	_, INC.				
Street Address	_				Street Address						
Bromley Corporate Center-Th	ree Terri L	ane			1123 BEAVE	R STREET					
City, State, Zip Code					City, State, Zip C	ode					
Burlington, NJ 08016					BRISTOL, PA	\ 19007					
Project Manager for Monitoring Firm		Tel	ephone	No.	Telephone No.		License No.				
Michael Keehn		6	09-386	6-8800	215-788-6040)	00509				
Start Date (10)	Scheduled (Compl	etion Da	ate (11)	Name of OSHA N	Monitor					_
3 / _11_ / _13_	_ 3	/ 1	2 /	13	BRISTOL EN	VIRONMENTAL	INC.				
Occupancy Status During Abatement (Check only	one)			Street Address		,				
☐ Facility Closed/Vacated During Ent			ement		1123 BEAVE	DOTDEET					
	ormal Facili	tv Hou	ırs - Des	scribe							
Time of Abatement: 7:00AM-3:30	PM/F	PM	AM	301150	City, State, Zip Co						
					BRISTOL, PA	19007					
Scope of Work (Check all that apply)					□ Eull Con	tainment with Neg	ativa Dasassas				
≥3 sf or ≥3 lf≥160 sf or ≥260 lf		enova emolit			☐ Mini-Enc						
	1	s Loca	tion		₽Z 14011-EXE	Impled () and Not	i-Friable Proced		1		
Location of		Norma	ally	-	Description o	of .			atem	1	ype
Asbestos-Containing Material (ACM			lely by	Asbe	estos Containing Ma	terial (ACM)	Amount	Removal	Repair	Encapsulate	Enclosure
TO BE ABATED IN Facility		ainten	Staff?	(i.e	e., thermal systems		(Specify	Nou.	air	äp	clos
(13)	0	(12			surfacing, VAT, other miscellane	or ous)	SF or LF)	<u>a</u>		sula	ure.
(,-)	Yes	No	N/A		other miscellane	ous)		-		ē	
Stair # 5 2 nd Floor Landing		\boxtimes		Montin			440.05	-	-	-	-
otali # 5 2 1 looi Laliuliig				Mastic		2.1	110 SF			Ш	Ц
4					No. of the last of				ш		ш
V. (8)											
Name of Registered Waste Hauler		0.0	VJDEP V		Cubic Yards of	Name of Registe					
BRISTOL ENVIRONMENTAL, II	VC.		18706		Waste	G.R.O.W.S.	NORTH LAND	FILL			
City, State	Marie Trans		.0700	Li Car	Disposal Date	City, State				-	
BRISTOL, PA 19007						The second secon	LE, PA 19067				
Completed By (Print or Type)	Title				Signature	1					
Brian Scafiro	Estima	tor		100	Signature	Scafire	, D	ate /2	8/1	3	
					Lucian	Lugica		1	,		