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

NON SUB-chapter 8  Check # 91bb											_
Date of Notification	1 (1)	I I Name	of Building Own	ner/Operator (2	)				17		. :
10 12 1/12 18	1/11 19 1	11		Community		ae		MA CONTRACTOR			116
Agencies Notified	Type Notificati		Address					AD - 0	110	111	111
☐ EPA ☐ DEP	X Initial	26 J	lournal Squa	are, 14th Flo	or		WI.	AR 5 2(	)19	1.5	
X DOL	Amendr		ate, Zip Code sey City, NJ	07306						e de Li	
X DOH			f Contact	200,000,000			Telephon	e Number			
DCA	☐ Cancella	Ilya Ilya	Ashmyan				(201)3	60-4099			
			FAC	CILITY INFORM	MOITA	1					
Name of facility wh	nere abatement is	s taking place (3)	)				Type of Facility (				
Hudson Coun	ty Community	/ College (NC	N Sub-chap	oter 8)				l (K - 12) apter 8 (Other	than k	(-12)	
Street Address 81 Sip Avenu	ie						Other (Bldgs./	(Private/Comm Homes, etc.	ercial		
City (5)		County (6)			Cor	inty Code (7)	Square Feet	# of Floors		ldg. Ag	Je.
Jersey City, I	NJ 07306	Hudson				ite use only)	Current Use (Privacant buildi		nolish	ed)	
Name of Monitorin	g Firm Hired by I	Bldg. Owner (8)		ASCM No.	-	Name of Abatement		ng			
AHERA Con		, ,		7.00		B & G Restorati					
Street Address P.O. Box 38	5					Street Address 105 Ryerson R	oad				
City, State, Zip Cod Oceanville, N	le				-	City, State, Zip Code					
						Lincoln Park, I	NJ 07035				
Project Manager for John Smoye			(609)652-			Telephone Number (973)696-686	9	License Num 00378			
Scheduled Start Da		ISchool Com	pletion Date (1		_	Name of OSHA Moni	tor				
03/14/2019	ite (10)	03/30/20	T. (33)	~		B & G Restorat	ion, Inc.				
Occupancy Status I	During Abataman				_	Street Address 105 Ryerson R	and				
	d/vacated during	najdon nardini				City, State, Zip Code	uau ———————				
Abatement pe	erformed outside					City, State, Zip Code					
Describe:	be: start 8:00	am (occupied	)		_	Lincoln Park, N	J 07035				
Scope of Work (ch										-1	
Demolition	X	Renovation			☐ F	Full Containment w/neg	gative pressure [	Glovebag p	roced	ure	
>3 sf or >3 lf	X	>160 sf or >260	If		X	Mini-enclosure	E.	Non-friable	proce	dure	
Location of		Is location norm	nally used sole	ly				R	R	E	T
asbestos-cor		by maintenance staff(12)	e/custodial	Descripti	on of a	sbestos-containing	Amount	e m	e p	n	E n
material to be abated in fac	70			material			(Specify S LF)	o o	a	a	c L
	(10)	Yes N	lo N/A				/	v e	l r	р	
basement entra	ance		X	pipe (wrap			20 lf	X			
roof			X	built up ro	ofing	& flashing	8,381 sf	X			
Registered Waste F B & G Restorat		NJDEP Ha 1956:		Cubic Yards of 100 cy	Waste	Name of Registered Grand Cer	Landfill htral Landfill				
City, State Lincoln Park, N			Disposal	-	/19	City, State Pen Argyl					
		Title		Signature		1	,	Date		X	
Completed by (Pring Gordana Luna	t of Type)	Title Secretary/Tre	easurer	o.g.iataio		Gordana Luna		02/28/20	19		

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

Check # 9167

Date of Notification (1)	Nam	e of Buildi	ng Owne	er/Operator (2)		· · · · · · · · · · · · · · · · · · ·		3 E	J W		100	. :	
0   2   /   2   8   /   1   9	Hu	udson Co	ounty C	Community (	Colleg	e						ij	
Agencies Notified Type Notification  EPA  Initial	11000	et Address 3 Journa		re, 14th Floo	or		iii M/	ıR	5 2019	ı	n d	1 !	_
□ DEP □ ···································	City,	State, Zip	Code					1 - 3 - 1		-,			
▼ DOL	ent Je	ersey Cit	y, NJ (	07306		W.				ers 28			
₩ DOH		e of Conta	ct				Tel	ephone	Number				
DCA Cancellati	on   II	ya Ashm	iyan				(2	201)36	0-4099				
			FACI	LITY INFORM	ATION								
Name of facility where abatement is	taking place	(3)	2				Type of Fa		) (K - 12)	7. Tarana			
Hudson County Community	College (S	Sub-chap	oter 8)						pter 8 (Ot	her th	an K-	12)	
Street Address							X	Other (P	rivate/Co	mme			
81 Sip Avenue							Square F		lomes, et of Floors		Blo	ig. A	ge
City (5)	County	(6)				nty Code (7)							
Jersey City, NJ 07306	Hudso	on			(Stat	e use only)	Current l			dem	olishe	d)	
Name of Monitoring Firm Hired by BI	dg. Owner (8	8)	T	ASCM No.	П	Name of Abatement	Contractor (	9)					
AHERA Consultants				0057		B & G Restorati	ion, Inc.						
Street Address						Street Address 105 Ryerson R	load				E15-330-03		
P.O. Box 385					_	City, State, Zip Code				_		-	
City, State, Zip Code Oceanville, NJ 08231						Lincoln Park, I	NJ 07035						
Project Manager for Monitoring Firm			e Numb			Telephone Number (973)696-686	a		License	Numb	er		
John Smoyer			)652-1		-	Name of OSHA Moni				3/0			
Scheduled Start Date (10)	500000000000000000000000000000000000000	ompletion	Date (11	1)		B & G Restorat							
03/14/2019	_	Street Address											
Occupancy Status During Abatement						105 Ryerson R	oad						
Facility closed/vacated during e Abatement performed outside of						City, State, Zip Code							
Describe: Start 8:00 a					-11	Lincoln Park, N	IJ 07035						
Scope of Work (check all that apply)												-	<u> </u>
☐ Demolition 🕱 F	Renovation	*			X F	ull Containment w/neg	gative press	ure [	Gloveb	ag pr	ocedu	re	
> <u>3</u> sf or > <u>3</u> lf	160 sf or <u>≥</u> 26	60 If			$\square$ M	lini-enclosure			] Non-fri	able p	oroce	dure	
	Is location no			1					4	R	R	E n	E
	by maintena staff(12)	ince/custoc		Description material (		sbestos-containing	100 50005	ount ecify SF	or =	m o	р	С	n
abated in facility (13)	Yes	No	N/A	material	AOIVI)		ĹF)			v e	a i r	a p	L
Vault room			X			outer layer	180	sf		X			
				& 8	assoc	cork on ceiling	_					닏	님
					_		_			片	片	븜	뷰
				1			_			片	片	片	ዙ
Registered Waste Hauler	INIDEP	Hauler ID	# 10	ubic Yards of	Waste	Name of Registered	Landfill				Ш	ш	J
B & G Restoration, Inc.		563		5 cy		Grand Ce		fill	- par manage				
City, State Lincoln Park, NJ		Di	sposal D 03/14	0ate 1/19 - 03/23/	/19	City, State Pen Argy	I, PA						
	Title Secretary/	Treasure	er	Signature	(	Gordana Luna			Date 02/28	3/201	9		

### State of New Jersey

NOCK	1		CATION	ate of New OF ASBE to NJAC 8	ESTOS A	ABATE		IT .		E C		W	77. 67. 53.	
Date of Notification (1) 02/19/2019				f Building ( squire G			(2)			MAR	5	2019	of day, the	
Agencies Notified Type Notification  EPA II Initial			Street A	<sup>ddress</sup> V Count	y Line	Road,	Su	ite #3	l.	• · · · · · · · · · · · · · · · · · · ·				
DEP Amended Amendment		_		ite, Zip Co on, NJ 08							i in just	1,000		2 10
□ Emergency justification)     □ DCA     □ Cancellation	· · · · · · · · · · · · · · · · · · ·			Contact Sabba	g					ephone Nun 2-719-868				
Name of Facility Where Abatement is Takin	g Place (3	3)	FACI	LITY INFO	RMATI	NC	Tvi	pe of Facility	(4)					
Street Address							×	School (K Subchapte Other (i.e. etc.)	-12) er 8 (Othe private 8	er than K-12 & commercia	al build	67622		is,
City (5) Atlantic City							0.00	uare Feet 941	9	Floors	11 200	ldg. A 010	ge	
County (6) Atlantic			County (	Code (7) USE ONLY)		_		rrent Use (P esidential	rior if bei	ng demolish	ed)	1		
Name of Monitoring Firm Hired by Building Crown Air Services LLC	Owner (8)		ASCM	l No.				batement C						
Street Address 478 Albany Street						Street 132 \		ress shington A	venue					
City, State, Zip Code Brooklyn, NY 11203	-				-	100000 minutes		, Zip Code n, NY 112	05					
Project Manager for Monitoring Firm			Telephor	ne No.		Teleph 7188				License N 01340	0.			
Start Date (10) 03/07/2019	Schedul		npletion I	Date (11)				SHA Monito		orp				
Occupancy Status During Abatement (Chec	k Only Or	ne)				Street								
Facility Closed/Vacated During Entire Abatement Performed Outside of Norm Other – Describe:						City, S	state	shington A , Zip Code n, NY 112			-			
Scope of Work (Check All That Apply)							-				10-271			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	Renova Demolit					-	Full Contain Mini-Enclosu Glovebag Pr Non-Exempt	ire ocedure				9	
	Is	Locati	ion									Abate	ment	Í
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	Normal ed Sole intena todial S (12)	lly ely by nce/		tos Cont thermal surfac		Mate s ins	r	(5	mount Specify F or LF)	Remova	Repair	e Encapsulate	Enclosure
	Yes	No	N/A										te	(D
Chiller Room	X				Fire	Proof	fing		15	00 Sqf	X			
Name of Registered Waste Hauler Newark Carting Inc		F	JDEP W lauler ID 506		Cubic of Was	ste	_	Tully-	town R	ered Landfill E Facility				
City, State Newark, NJ 07102					Dispos	sal Date		City, St	ale					
Completed by Mendy Gorodetsky	Title Offic	er			S	ignature	е	16	1	100000	ite 2/19/2	2019		
ASB-41 (R-06-08)						* Do n	ot us	se this form	or asbes	tos licensur	e exer	npted	activ	ities.

## State of NJ

Notification of Asbestos Abatement (Pursuant to NJAC 8:60 and 12:120) D&S Proj. #: 19-37 Name of Building Owner/Operator (2) Date of Notification (1) |0|2|/|2|7|/|1|9|hans and ann vicente Agencies Notified Type Notification Street Address ☐ EPA Initial Amended DEP City, State, Zip Code Amendment #: DOL M Emergency little falls, nj 07424 (including DOH Name of Contact Telephone Number justification) ☐ DCA hans and ann vicente Cancellation FACILITY INFORMATION Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) hans and ann vicente 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) **PASSAIC** little falls Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. D & S RESTORATION, INC. Street Address Street Address 20 California Ave. City, State, Zip Code City, State, Zip Code Paterson, NJ 07503 License Number Telephone Number Phone Number Project Manager for Monitoring Firm 01169 973-345-8020 Name of OSHA Monitor Sched. Completion Date (11) Start Date (10) D & S Restoration, Inc. Street Address 02/28/19 03/22/19 Occupancy Status During Abatement (Check only one) 20 California Avenue Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Other-Describe: NORMAL HOURS Paterson, NJ 07503 Full Containment w/negative pressure Scope of Work (check all that apply) Mini-enclosure  $\times$  >3 sf or >3 If Renovation Glovebag procedure ≥160 sf or ≥260 lf Demolition Non-Exempted (\*) and Non-friable procedure Is location normally used solely E Location of е e n by maintenance/custodial Amount n asbestos-containing Description of asbestos-containing m p C staff(12) (Specify SF or C material (acm) to be material (ACM) 0 a a LF) abated in facility (13) V Yes No N/A p 110 lft M PIPE INSULATION BASEMENT Name of Registered Landfill Cubic Yards of Waste Registered Waste Hauler NJDEP Hauler ID# TULLYTOWN, RESOURCE RECOVERY D & S RESTORATION, INC. 13506 2 yd Disposal Date City, State 03/01/19 TULLYTOWN, PA PATERSON, NJ 07503

Signature

Completed by (Print or Type)

**BOGDAN JOLDZIC** 

Title

**PRESIDENT** 

Date

02/27/19

### State of NJ Notification of Asbestos Abatement D&S Proj. #: 19-36 (Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2) Date of Notification (1) 10 12 1/12 16 1/11 19 chrisantus emernogu Type Notification Agencies Notified Street Address **EPA** Initial Amended DEP City, State, Zip Code Amendment #: DOL M Emergency union, nj 07083 (including DOH Name of Contact Telephone Number justification) DCA chrisantus emernogu Cancellation **FACILITY INFORMATION** Name of facility where abatement is taking place (3) Type of Facility (4) School (K - 12) chrisantus emernogu Subchapter 8 (Other than K-12) Street Address Other (Private/Commercial Bldgs./Homes, etc. Bldg. Age Square Feet # of Floors City (5) County (6) County Code (7) (State use only) Current Use (Prior if being demolished) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Abatement Contractor (9) D & S RESTORATION, INC. Street Address Street Address 20 California Ave. City, State, Zip Code City, State, Zip Code Paterson, NJ 07503 Project Manager for Monitoring Firm Phone Number Telephone Number License Number 973-345-8020 01169 Name of OSHA Monitor Start Date (10) Sched. Completion Date (11) D & S Restoration, Inc. 02/27/19 03/15/19 Street Address Occupancy Status During Abatement (Check only one) 20 California Avenue Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Other-Describe: NORMAL HOURS Paterson, NJ 07503 Scope of Work (check all that apply) Full Containment w/negative pressure > 3 sf or > 3 lf Mini-enclosure Renovation Glovebag procedure ≥160 sf or ≥260 lf Demolition Non-Exempted (\*) and Non-friable procedure Is location normally used solely Location of E by maintenance/custodial е e asbestos-containing Amount Description of asbestos-containing n staff(12) m p С material (acm) to be (Specify SF or material (ACM) C 0 a а abated in facility (13) LF) Yes No N/A v PIPE INSULATION basement 51 ft BASEMENT BOILER boiler insulation 30 sq ft X Registered Waste Hauler NJDEP Hauler ID# Cubic Yards of Waste Name of Registered Landfill D & S RESTORATION, INC. 13506 1 yd. TULLYTOWN, RESOURCE RECOVERY

Disposal Date

02/28/19

Signature

City, State

TULLYTOWN, PA

Date

City, State

PATERSON, NJ 07503

Title

DDECIDENT

Completed by (Print or Type)

ROGDAN IOI DZIC

Chart#13451



### PA State of New Jersey - Notification of Asbestos Abatement

(Pursuant to N.J.A.C. 8:60-7 and 12:120-7) GAC Project # 060-18 Date of Notification (1) Name of Building Owner/Operator (2) February 27, 2019 RUTGERS, THE STATE UNIVERSITY OF NJ Agencies Notified Notification Type Street Address ENVIRONMENTAL HEALTH & SAFETY DEPT. (REHS) ☑Initial Notification ☐ EPA □Amended Notification # 74 STREET 1603, BLDG 4116, LIVINGSTON CAMPUS ☐ DCA ■ Emergency (including City, State, Zip Code X DOL justification) PISCATAWAY, NJ 08854 X DEP- No Longer REQUIRED □Cancelled Name of Contact Telephone Number X DOH MICHAEL F. SMITH, ENV. 848-445-2550 **HEALTH & SAFETY** FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) NEWARK POWER PLANT, BLDG# 7261 School (K-12) Subchapter 8 (other than K-12) Street Address X Other (i.e. private & commercial buildings, homes, etc.) RBHS NEWARK CAMPUS Sq. Feet: N/A # of Floors: 2 Bldg. Age: 60+ years County (6) County Code (7) Current Use (prior if being demolished): ACADEMIC NEWARK (State Use Only) ESSEX Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Contractor (9) ATC 00098 GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address Street Address 3 TERRI LANE 511 MAIN STREET City, State, Zip Code City State, ZipCode BURLINGTON, NJ 08016 BUTLER, NJ 07405 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number BRIAN R. KEARNEY 609-386-8800 973-492-0477 00840 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 03/08/2019 03/11/19 ENVIROVISION, INC. Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 20-21 WARGARAW ROAD, BLDG# 35E ☐ Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code Describe: FAIRLAWN, NJ 07410 ☑ Other- Describe: Schedule: 5PM - 5AM (24 HOURS & WEEKENDS AS NEEDED) Scope of Work (Check all that apply) ☐Full Containment with Negative Pressure  $\boxtimes \ge 3 \text{ sf or } > 3 \text{ lf}$ **X**Renovation ☐ Mini-Enclosure  $\square \ge 160 \text{ sf or } \ge 260 \text{ lf}$ Demolition IX Glove bag Procedure / Wrap & Cut ■Non-Exempted (\*) and Non-Friable Procedure Location of Asbestos-Containing Is Location Normally Used Description of Asbestos Containing Material Amount Abatement Type Material (ACM) in Facility (13) Solely by Maint./Custodial (ACM) (i.e. thermal systems insulation, surfacing, (Specify SF Staff? (12) VAT, or other miscell.) Remove Repair Encap Enclose or LF) YES NO NA B2-MER X TSI 9 LF X Name of Reg. Waste Hauler NJDEP Waste Hauler ID # Name of Registered Landfill 5 CY Cubic Yards of Waste: See Hauler Below #1 & 2 See Below G.R.O.W.S. North Landfill Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 Disposal Date City, State NJDEP # 12561 100 New Ford Mill Hauler #2) Newark Carting, Inc., Newark, NJ 04509 Rd. Morrisville, Pa 03/11/2019 NJ DEP # 4509 19067 215-736-1700 Completed by (Print or Type)

Signature

Raymond C. Pedalino

Date

February 27, 2019

MANAGER

SENIOR PROJECT

RAYMOND C. PEDALINO

Chart#13452

### State of New Jersey - Notification of Asbestos Abatement

215-736-1700

(Pursuant to N.J.A.C. 8:60-7 and 12:120-7) GAC Project # 060-18 Date of Notification (1) Name of Building Owner/Operator (2) February 27, 2019 RUTGERS, THE STATE UNIVERSITY OF NJ Agencies Notified Notification Type ☑Initial Notification ENVIRONMENTAL HEALTH & SAFETY DEPT. (REHS) ☐ EPA □Amended Notification # 74 STREET 1603, BLDG 4116, LIVINGSTON CAMPUS DCA. ☐ Emergency (including City, State, Zip Code X DOL PISCATAWAY, NJ 08854 justification) DEP- No Longer REQUIRED □Cancelled Name of Contact Telephone Number X DOH MICHAEL F. SMITH, ENV. 848-445-2550 **HEALTH & SAFETY FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) SMITH HALL, BLDG# 7223 School (K-12) ☐Subchapter 8 (other than K-12) Street Address Other (i.e. private & commercial buildings, homes, etc.) **NEWARK CAMPUS** Sq. Feet: N/A # of Floors: 4 Bldg. Age: 60+ years City (5) County (6) County Code (7) Current Use (prior if being demolished): ACADEMIC NEWARK **ESSEX** (State Use Only) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Contractor (9) ATC 00098 GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address Street Address 3 TERRI LANE 511 MAIN STREET City, State, Zip Code City State, ZipCode BURLINGTON, NJ 08016 BUTLER, NJ 07405 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number BRIAN R. KEARNEY 609-386-8800 973-492-0477 00840 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 03/08/2019 03/11/19 ENVIROVISION, INC. Occupancy Status During Abatement (Check only one) Street Address ☐Facility Closed/Vacated During Entire Period of Abatement 20-21 WARGARAW ROAD, BLDG# 35E ■Abatement Performed Outside of Normal Facility Hours -Describe: City, State, Zip Code ☑ Other- Describe: Schedule: 5PM - 5AM (24 HOURS & FAIRLAWN, NJ 07410 WEEKENDS AS NEEDED) Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure × > 3 sf or >3 lf **X**Renovation ☐ Mini-Enclosure  $\square \ge 160 \text{ sf or } \ge 260 \text{ lf}$ ☐ Demolition Slove bag Procedure / Wrap & Cut ■Non-Exempted (\*) and Non-Friable Procedure Location of Asbestos-Containing Is Location Normally Used Description of Asbestos Containing Material Amount Abatement Type Material (ACM) in Facility (13) Solely by Maint./Custodial (ACM) (i.e. thermal systems insulation, surfacing, (Specify SF Staff? (12) VAT, or other miscell.) Remove Repair Encap Enclose or LF) NO NA 011-MER X TSI X 9 LF Name of Reg. Waste Hauler NJDEP Waste Hauler ID # Cubic Yards of Waste: 5 CY Name of Registered Landfill See Hauler Below #1 & 2 See Below G.R.O.W.S. North Landfill Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 Disposal Date City, State NJDEP # 12561 100 New Ford Mill Hauler #2) Newark Carting, Inc., Newark, NJ 04509 Rd. Morrisville, Pa 03/11/2019 NJ DEP # 4509 19067

RAYMOND C. PEDALINO SENIOR PROJECT Raymond C. Pedalino February 27, 2019 MANAGER

Signature

Completed by (Print or Type)

### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) 02/25/2019 Private House- Patrick Kenney Agencies Notified Type Notification Street Address EPA Initial X City, State, Zip Code DEP Amended × DOL Amendment # Far Hills, NJ 07931 Emergency (including Name of Contact Telephone Number DOH justification) DCA Cancellation Patric Kenney FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Private Residence School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, × etc.) City (5) Square Feet # of Floors Bldg. Age Far Hills 1780 2 50+ County (6) County Code (7) Current Use (Prior if being demolished) (STATE USE ONLY) Somerset Residence Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) N/A Nari Construction, LLC Street Address Street Address 63 Leather Stocking Path City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 862-264-9463 01306 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 03/09/2019 03/09/2019 Nari Construction, LLC Occupancy Status During Abatement (Check Only One) Street Address 63 Leather Stocking Path Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: Lincoln Park, Ni 07035 Scope of Work (Check All That Apply) ≥3 sf or ≥3 If Renovation Full Containment with Negative Pressure ≥160 sf or ≥260 If Demolition Mini-Enclosure Glovebag Procedure Non-Exempted (\*) and Non-Friable Procedure Abatement Is Location Туре Normally Location of Description of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ Encapsulate (i.e. thermal systems insulation, TO BE ABATED (Specify Remova Repair Custodial Staff? In Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A X 200 LF X Basement X

NJDEP Waste

Hauler ID No.

0037535

P. Manager

Cubic Yards

Disposal Date

Signature

of Waste

TBD

Date

02/25/2019

Name of Registered Landfill

G.R.O.W.S

Morrisville, PA

City, State

Completed by

Lincoln Park, NJ

Igor Jezdimirovic

City, State

Name of Registered Waste Hauler

Nari Construction, LLC

<sup>\*</sup> Do not use this form for asbestos licensure exempted activities.

B & G proj. #: 2019-32

### State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7) \*\*\* FM F R G F N C Y \*\*\*

Check # 9133

	W.			_		EIVIER	GEI	V C Y ***		Check ?	7 9 133				_	
Date of Notification	ALL ST. 100 P. C. C.	1	Name	e of Bui	lding Owr	ner/Operator (2	!)		67.	(3	0 P	П	n.7		14	
10 12 1/10 18	1/119					35		ion Board of Educ	ation	Œ	CE	ll l	$\mu$ ,	100	1	
Agencies Notified	Type Notificat	ion	Stree	t Addre	SS					56 S		-			17	
∐ EPA □ DEP	Initial		34	0 Cen	tral Ave	enue					MAR	5	2019			
M DOL	Amenda	ment	- 2.500 V		ip Code	- ALLOZOZA										
M DOH						e, NJ 07974				Primetic.		5/77		****		
	Cancell	ation		of Con					- 1-7	Telephone	Number		; 			
DCA			E	rick Ha	ammerd	lahi —————				908-46	4-7425					
					FAC	ILITY INFORM	OITAN	N								
Name of facility w	here abatement i	s taking	place (	(3)						Facility (4						
Morris - Union	n Jointure, De	evelopn	nenta	l Lear	ning Ce	nter ( NON	Sub	8)	X		(K - 12)	hor ti	on V	10\		
Street Address											pter 8 (Ot Private/Co			12)		
340 Central A	Avenue									Bldgs./h	lomes, et	c.		- 1		
City (5)		Co	ounty (	3)			Co	unty Code (7)	Square	reet   7	of Floors	5	ЫC	g. A	ge	
New Provide	ence	N	lorris					ate use only)	Curren	t Use (Pri	or if being	dem	olishe	d)		
Name of Monitorin						ASCM No.	Ι,	I Nome of Obstant	_	ol (non s	sub 8)			_		
ranie of Monton	ig i iiii i iiica by	Diag. Ov	11161 (0	,		n/a		Name of Abatement		(9)						
Street Address							-	B & G Restorat	ion, Inc.							
								105 Ryerson F	Road							
City, State, Zip Coo	ie						=	City, State, Zip Code			-			-		
								Lincoln Park,	NJ 0703	5		License Number				
Project Manager fo	r Monitoring Firm	1		Pho	one Numb	per	9			Numb 378	er					
Scheduled Start Da	ate (10)	ISch	ed Co	moletio	n Date (1	1)	itor			010		_				
02/08/2019	16 (10)		4/30/2	70	ii Date (I	1)		B & G Restorat	tion, Inc.	+11					2	
Occupancy Status	During Ahateme							Street Address 105 Ryerson R	ood.							
	d/vacated during				ment.			City, State, Zip Code								
Describe:	erformed outside			ity hour	s-											
Other-Descri	ibe: start work		m				-	Lincoln Park, N	J 07035	j						
Scope of Work (ch										-						
Demolition	X	Renova					_	Full Containment w/ne	gative pres		Gloveb					
>3 sf or >3 lf		≥160 sf					Ш	Mini-enclosure			Non-fri				-	
Location of asbestos-co	ntaining	by mai	ntenan	ce/cust	ised solel odial	1	ion of	asbestos-containing	Δ	mount		e e	R	E n	E	
material to b	e	staff(12	2)	.003	T	material			(5	Specify St	or or	m o	p a	c	n	
abated in facility (13) Yes No										F)		v e	i r	р	_	
Room 138						VAT & ma	astic		25	SF		X				
			╬			1			_			무		님	뷰	
			╬			1			-			H	+	片	H	
Registered Waste F B & G Restora		N.	DEP H	tauler II 63	D# C	Cubic Yards of 1	Waste Name of Registered Landfill Grand Central Landfill									
City, State Lincoln Park, NJ  Disposa 02/0						Date 9/19 - 04/30	City, State									
Completed by (Print or Type) Title						Signature		Girdana Luna			Date			Š		
Gordana Luna	d 	Secre	tary/	reasu	rer			Jordana Zuna			02/08	/201	9			

Feb 2000 11:41PM NJ A	sbestos (	Control 60	9,633,06	64		page 1	13	U E			
8 & @ proj. s: 2019-	32		Notil (Pursus	State Scation of Ast ant to NJAC 5 EM ER (	5:60	os Abatement -7 and 12:120-7)	1 1 3g	/AR ==	2019		1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1
Date of Natification (1)		1 810-1-20			and in contrast of					-	.,
10 12 1/10 18 1/11 19	. 1	Marms of 8	iuliding Ox	mer/Operator (2)	)	,		J II	15:3		7
		iviorns .	- Union L	lainture Com	mis	sion Board of Educa	ation				
Agencies Notified Type Not	nonion	Street Addi	P253	· ·						1	1
DEP Init	ial [	340 Ce	entral Av	enue				1. 14			
	1	City, State,			-		15	NEW	_	4	1
Dar Dar	endment	New P	rovidenc	e, NJ 07974				merumenta - ar-	41. 3 17.18		-
Z DOH	1	Name of Co		-,	_		L MARH	400 F.C.		17.1%	-
□ DCA □ Can	cellation						Telapho	na Number			4
		Erick F	dammer:	dahi			909	164-7425			
	-		FAI	CILITY INFORMA	ATIO	48	308-2	-04-1425		-	50
Name of facility where abstern	ont is taking	nines ett		THE DISTANT	7110	14					
Administration ( )		histor (2)					Type of Feoility	(4)	70 mm/s		-
Morris - Union Jointure,	Develop	mental Lea	rning Ce	enter ( NON S	Sub	8)	₹ Scho	ol (K - 12)			
Street Address							Subs	hapter 8 (Oth	ner than I	K-12)	
340 Central Avenue							☐ Other	(Private/Cor	nmercial		
City (5)							Squere Feet	Atomes, sto	Discourse		
	C	ounty (6)			Co	unity Code (7)	Edució Lást	# of Floors	6	ldg. Age	
New Providence	h	<i>f</i> lorris		1	(\$0	ata Lais only)	Current Use (F	Prior IF heims	damaliah	lkos	-
Name of Montesting Firm Pired	by Bldg Cu	ma. (6)		and the state of t			School (non	sub 8)	OCT IONS	lead)	
	a) 2148' CA	user fol		ASCM No.	T	Name of Abelement C	ontractor (8)		- interest		=
Steet Address	and the same of th			n/a		B& G Restoration	n inc				
26691 VEGLERS				The second second second		Street Address	AND ADDRESS.				=
						105 Ryerson Ro	ed				
City, State, Zip Code		The state of the s	Mini-the Assessment	Contraction - Contraction	oldend	City, State, Zip Code	-				
					-	Lincoln Park, N	1.07035				
Project Manager for Monitoring F	inn	Pr	one Numb	207	-	Talephone Number	0 01 033	-		-	
		ļ			- 1	(973)696-6889		Licanaa N	-		
Scheduled Start Date (10)	Sch	ed. Completio	on Date /1	~	_	Name of OSHA Monito	1	003	10		E
02/08/2019		V30/2019		17		B& G Restoration	n. Inc				
Danier State Date And					- 1	Street Address	The same of the sa				-
Occupancy Status During Abster	nent (Check	only one)	3 69			105 Ryerson Ro	ad	13 11.11.	****	٠,	
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Papel last			#-						1	1	
Other-Describe: Start Wo	The Part of the Pa	TI			-	Lincoln Park, NJ	07035	,	: 1		
Scope of Work (check all that as	Ply)						11 - 40		= =	- 4-	
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2 >3 st or >2 if	] ≥180 sf c	N >280 F				fini-encloşure		_ Glovenag			
Location of	la locati	on normally u	and enich		П.,	uni-encioșure		E den flad	ив руфсес	Britis	
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melecial to be abased in facility (13)	Stoff(12)	<del></del>	<del></del>	Description meterial (A)	CM.	spesies-containing	Amount	- 14	np	n n	
	Yes	No .	NA	Tributating (project	<b>₩</b> ,		(Specify S	F DF		8 5	
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		#		VAT & mast	ţţÇ		25 SF	1		Titl	-
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		4						T	TIT	FIF	
								—— <del> -</del>	<del>iiii</del>	1	
COUNTY COUNTY DESCRIPTION											
B & G Restoration, Inc.	NJE	19563	>=   CI	ADIC YERGS OF WE	978	Name of Registered La	กตริย				ı
City, Shifts		and the second	Disposel Da	ate .		Grand Centr	al Landfill				
Lincoln Park, NJ			02/09/	19 - 04/30/19	9	Otty, State Pen Argyle, F	24				•
Completed by (Print or Type) Gordana Luna	Title	_		Signature	_	A STATE OF THE PARTY OF THE PAR	7				
- Marine Parito	Decreta	ary/Treasur	rer		3	Gudora Sano		Date D2/08/20	519		
			Commence of the second		-				# 1 W		

State of NJ

B & G proj. #:



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

\*\*\* EXTRA footage/rooms \*\*\*

Check # 9170

Date of Notification (1)    0   2   /   2   8   /   1   9    Agencies Notified   Type Notification   Street Address   340 Central Avenue   MAR   5 2019      DEP	
□ PA □ Initial 340 Central Avenue MAR 5 2019  □ DEP □ Initial 340 Central Avenue MAR 5 2019  □ DCA □ Cancellation Central Avenue New Providence, NJ 07974  □ DCA □ Cancellation Erick Hammerdahl 908-464-7425  FACILITY INFORMATION  Name of facility where abatement is taking place (3) □ Type of Facility (4)  □ School (K-12)	
□ DEP □ Initial □ 340 Central Avenue □ MAN 5 2019 □ City, State, Zip Code New Providence, NJ 07974 □ Name of Contact □ Telephone Number □ DCA □ Cancellation □ Erick Hammerdahl □ 908-464-7425 □ FACILITY INFORMATION □ Type of Facility (4) □ School (K-12)	
City, State, Zip Code New Providence, NJ 07974  Name of Contact Erick Hammerdahl  FACILITY INFORMATION  Type of Facility (4) School (K-12)	
Name of Contact  Erick Hammerdahl  FACILITY INFORMATION  Telephone Number 908-464-7425  FACILITY INFORMATION  Type of Facility (4) School (K-12)	
DCA   Cancellation   Erick Hammerdahl   908-464-7425     FACILITY INFORMATION   Type of Facility (4)   School (K - 12)	
FACILITY INFORMATION  Name of facility where abatement is taking place (3)  Type of Facility (4)  School (K - 12)	
Name of facility where abatement is taking place (3)  Type of Facility (4)  School (K - 12)	
School (K-12)	
Morris - Union Jointure, Developmental Learning Center ( NON Sub 8 )	2)
Street Address Other (Private/Commercial	
340 Central Avenue Bldgs./Homes, etc. Square Feet   # of Floors   Bld	g. Age
City (5)         County (6)         County Code (7)	1 23-0
New Providence Morris (State use only) Current Use (Prior if being demolishe school (non sub 8)	1)
Name of Monitoring Firm Hired by Bldg. Owner (8)  ASCM No.   Name of Abatement Contractor (9)	
n/a B & G Restoration, Inc.	
Street Address Street Address 105 Ryerson Road	
City, State, Zip Code	
Lincoln Park, NJ 07035	
Project Manager for Monitoring Firm  Phone Number  Telephone Number  (973)696-6869  License Number  00378	
Scheduled Start Date (10)   Sched. Completion Date (11)   Name of OSHA Monitor	
02/08/2019 04/30/2019 B & G Restoration, Inc.   B & G Restoration, Inc.   Street Address	
Occupancy Status During Abatement (Check only one)  105 Ryerson Road	
Facility closed/vacated during entire period of abatement.  Abatement performed outside of normal facility hours-  City, State, Zip Code	
Describe: Start work 2:00 pm Lincoln Park, NJ 07035	
Scope of Work (check all that apply)	12.4
☐ Demolition ☐ Full Containment w/negative pressure ☐ Glovebag procedu	e
≥3 sf or >3 lf    ≥160 sf or ≥260 lf	
Location of Is location normally used solely by maintenance/custodial Description of ashestos-containing Amount	E n E
material to be staff(12) material (ACM) (Specify SF or o a	c n c
abated in facility (13)  Yes  No  N/A  LF)  v i e r	PL
Room 108 VAT & mastic / 16 sf	
Room 110	
Room 140 X VAT & mastic 16 SF X	님님
	岩놈
Registered Waste Hauler   NJDEP Hauler ID#   Cubic Yards of Waste   Name of Registered Landfill    B & G Restoration, Inc.   19563   5   Grand Central Landfill	
City, State Lincoln Park, NJ  Disposal Date 02/09/19 - 04/30/19  Pen Argyle, PA	
Completed by (Print or Type) Title Signature Gordana Luna Secretary/Treasurer Gordana Luna Date 02/28/2019	Si:

161340	PAU	NC	(Pur	ATION C suant to	F ASBES NJAC 8:6	TOS AE	(2:120	)			» E				
Date of Notification (1)			1000000	ame of B uther U	Building Ow	vner/Ope	erator	(2)		8.4.4	ים ב	2010			
02/27/2019 Agencies Notified Typ	e Notification			treet Add	State State State				3-1 4-1	MA	44 5	2019		THE PARTY	1
				10007100					Ì.				****		
H EPA DEP	Initial Amended				, Zip Code			_	3	1			- 21		
X DOL X	Amendment # Emergency (in		100		ORANG	GE NJ	0707	9	12 1	Tolor	base Non	mbor	1,0000		-
× DOH □	justification)	lolddirig		ame of C uther l						reiep	hone Nu	mber			
□ DCA □	Cancellation				TY INFOR	OITAMS	N								
Name of Facility Where Abate	ement is Taking	Place (3)		FACILI	I I INI OI	MINTO	1	Туре	of Facility (4	)					
Luther Uddin	:0000 : <del>5</del>								School (K-12		1 10 1	20			
Street Address									Subchapter 8 Other (i.e. pr	3 (Other ivate &	than K-1 commerc	2) ial buildi	ngs, h	nomes	š,
								ш,	etc.)						_
City (5)								Squa	re Feet	# of h	loors	BIG	dg. Ag	je	
SOUTH ORANGE				County Co	ode (7)			Curre	ent Use (Prio	r if being	g demolis	hed)			$\neg$
County (6) Essex County					SE ONLY)		_		**************************************		520				
Name of Monitoring Firm Hire	ed by Building C	wner (8)		ASCM	No.	T			atement Cont						
									perty Main	tenan	ce LLC				
Street Address								Addre	ess Riper Aver	NII A					
	State, Zip Code						_88888	M-3000	Zip Code	lue					-
City, State, Zip Code									J 07011						
Project Manager for Monitori	na Firm		Т	Telephon	e No.		Telepl	hone N	No.	T	License	No.			
1 Tojou managor ioi memor	oject Manager for Monitoring Firm  Sch Date (10)							89990			01336				
Start Date (10)		Schedule		pletion D	Date (11)		Name	of OS	SHA Monitor						
02/27/2019		03/10/2					Chroni	· Adds	200						$\dashv$
Occupancy Status During At							Street	Addre	ess						
Facility Closed/Vacated Abatement Performed Other – Describe:	I During Entire F Outside of Nom	Period of A nal Facility	batem Hours	ent		_	City, S	State, 2	Zip Code						
Scope of Work (Check All TI	hat Apply)														
≥3 sf or ≥3 lf x ≥160 sf or ≥260 lf			tenova emoliti					- M	ull Containme lini-Enclosure llovebag Prod lon-Exempted	edure				e	
		Т.							on Exempted	2 ( ) ( ) ( )			Abate	ement	¢ .
			Locati Normal			Des	scriptio	n of					Ty	pe	Γ
Location of Asbestos-Containing Ma		Use	d Sole	ly by	Asbest	tos Cont	aining	Materi	al (ACM)		mount	77		En	ш
TO BE ABATE	<u>ED</u>	1	todial S	12 D 17 0 0	(i.e.	thermal surfac	systen cing, V	ns inst AT, or	ulation,		pecify or LF)	Remova	Repair	Encapsulate	Enclosure
In Facility (13)			(12)			other n	niscella	aneous	5)			oval	air	sulat	sure
		Yes	No	N/A										Ф	
Exterior			Х			Tran	site S	Siding	1	11	25 SF	X			
		-													
Name of Registered Waste	Hauler		1	NJDEP V	Vaste		Yards		Name of	Registe	ered Land	ifill			
TBD			11 15.77	lauler ID BD	No.	of Wa					gement	t- Fairle	ess L	and	lff
City, State						Dispo	sal Da	ıe	City, Sta Morris		A 1906	7			
Completed by		Title				1 5	Signatu	ıre	7			Date			
Completed by Darko Raloski		100000000000000000000000000000000000000	ect M	anagei	r		1	11	/		and the state of t	02/07	201	9	

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

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Same	1.7	11-	100
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Date of Notification (1	l) 2/27/2019	9			of Building On Manor Association		erator (2	2)		MAR		2010	1			
Agencies Notified	Notification			Street	Address	Jidtoo				WAL		4013	1	in gran		
( ) EPA	(X) Initial No	tificatio	n	1945/19 1876/0870	rren St.				1			12	77			
() DEP	( ) Amende	d			tate, Zip Code , NJ 07110	е			2				100			
(X) DOL (X) DOH	Amendn () Emerger		udina		of Contact					T-I	Niconsk	or				
()DCA	justificat	ion)	ading		Manor Assoc	ciates				rei	. Numb	er				
	( ) Cancella	tion			ITY INFORMA											
Name of Facility Whe	re Abatement	is Takir	ng Place		II Y INFORINA	ATION	Type	of Facili	ty (4)							
Village Manor Associ							35.0	hool (K-								
Street Address 106 Warren Street Ga	arage # 11						( ) Su (X) Ot	bchapte	er 8 (othe private 8				dings	a.		
City (5) Nutley, NJ								e Feet		f Floo	ors	Bldg	Age			
County (6)				County	Code (7) (ST	ATE	Curre	nt Use (	Prior if be	eina c	demolis	hed)				
Essex				USE O						9						
Name of Monitoring F	irm Hired by E	Bldg. Ov	vner	ASCM	No.	Name	of Contr	ractor (9	))							
Street Address									SERVIC	CES,	LLC					
Street Address						120000000000000000000000000000000000000	Address		7 South - Suite #3							
City, State, Zip Code							ate, Zip		South - Suite #3							
							J 07644									
Project Manager for N	Monitoring Firm	n Tele	ephone N	Number			one Nu				ense N		r			
(8)						(973)6	85-9791			01191 "A"						
Scheduled Start Date		Sch			on Date (11)	Name	of OSH	A Monito	or							
3/09/201	19			4/09/201	9											
Occupancy Status Du	ıring Abateme	nt (Che	ck only c	one)		Street	Address	5								
( ) Facility Closed/Va	cated During	Entire P	eriod of	Abateme												
( ) Abatement Perfor ( ) Other – Describe:		of Norm	al Facility	y Hours												
Source of Work (Che		ly)				/ \ F				<i></i>	D	- 245				
(X) ≥ 3 sf or ≥ 3 lf		(	) Renova	ation			ni-Enclo		vith Nega	itive i	ressu	re				
( ) ≥ 160 sf or ≥ 260 l	f	(X)	Demolif	tion			ove bag		ure and Non	Eriol	olo Dro	codur	0			
						( ) 140	II-EXCIII	pied ( )	and Non	-i iia	55-0	teme	-3.00	pe		
Location of Asbestos-Containing			cation No ed Solely		Descript	ion of Ac	hactas				10000000					
(ACM)	iy ivialeriai	Ma	aintenan	ce/	Containing N	Material (	ACM) (i		Amount (Specify	32	Re	ן ע	Enca	En		
TO BE ABAT in Facility		Custo	dial Staf	f? (12)	thermal sy surfacing			,	SF or LF		Remova	Repair	apsu	Enclosure		
(13)		N/A		cellaneou					val	=:	Encapsulate	ure				
Garage		Yes	X		Pine	Insulation	on		30 LF		X					
-2.29					Pipe Insulation 30 LF X											
Name of Reg. Waste		NJD	EP Was	te Hauler	Hauler ID Cubic Yards of Waste Name of Reg. Landfill				1							
Cid Construction Ser			# 32	905	TBD 110 Sand Company Landfill											
City, State Garfield, NJ		Dispos	al Date TBD	12	City, S Melvill											
Completed by	Title				Signature	VC.				Dat	0.000		_			
Roque G Schipilliti	1	Project	Manager								2/27/2019					

### State of New Jersey

P	ADD		ICATIO	N OF ASE t to NJAC	BESTOS	ABATE		0	la	A 18	3(0	7		
Date of Notification (1)			Name o	of Building	Owner/	Operator	r (2)			2,00				
2/28/19			NJ At	paters					15	2 PD F	э п	D /7	71.	*
Agencies Notified Type Notifica	tion		Street A	Address						- 1.7		W	1.	11.
EPA X Initial			PO B	ox 643				1145	. 1					
DEP Amende				ate, Zip C				* 1 ]					İ	
DOL Amendr	nent # ncy (including	-	Middle	esex, N	J 0884	16				MAR	5	2019	1	1
■ DOH justificat			Name o	of Contact					Tel	lephone Nu	mber		- 1	faceure.
DCA Cancella	ation		Rapha	ael Rod	rigues				90	08-361-08	389	3 3		
N. C. T. L. L.			FAC	ILITY INF	ORMAT	ION			-1.	1.4		1 1	7.00	
Name of Facility Where Abatement is T home	aking Place (3)						Type	of Facility (4	4)		***	free er	*5 (8)	
								School (K-1	2)					
Street Address								Subchapter	8 (Oth	er than K-1	2)			W. 170
								Other (i.e. p	rivate	& commerc	iai bui	iaings	, nom	es,
City (5)								e Feet	# 0	f Floors		Bldg. A	Age	
West Long Branch							1400	1	2			70		
County (6)				Code (7)	250		Currer	nt Use (Prio	r if bei	ing demolis	hed)			
Monmouth			(STATE	USE ONLY	)		home			<del>.</del>				
Name of Monitoring Firm Hired by Build	ing Owner (8)		ASCN	И No.		Name	of Abat	ement Con	tractor	(9)				
								onmental			2			
Street Address							Addres							_
						4 E (	Gate D	rive, PO	Box	483				
City, State, Zip Code					1200		state, Zip	- 10						
								NJ 074	18					
Project Manager for Monitoring Firm		1	Telepho	ne No.			none No			License N	lo.			_
			35-030 <del>3</del> 00 00			100000000000000000000000000000000000000	764-22			703				
Start Date (10)	Scheduled	Com	Completion Date (11) Name of					A Monitor						
3/12/19	3/22/19													
Occupancy Status During Abatement (C	heck Only One	)	Street Address											_
Facility Closed/Vacated During Ent			(A) CONTRACTOR											
Abatement Performed Outside of N	lormal Facility F	lours	ours City, State, Zip Code											
X Other - Describe: basement			City, State, Zip Code											
Scope of Work (Check All That Apply)														_
≥3 sf or ≥3 lf	X Pa	novat	lon				]							
≥ 160 sf or ≥260 lf	Property Co.	moliti					Mini	Containme -Enclosure	nt with	Negative I	ressu	ire		
						×	Glov	ebag Proce	edure					
				l			J Non	-Exempted	(*) and	d Non-Friat	le Pro			
	5.505	ocatio	200										ement pe	1
Location of	Lland	rmall Solel				scription		Manager at Change				1 1	pe	Г
Asbestos-Containing Material (ACM TO BE ABATED	Maint					aining M systems				mount	-		Щ	m
In Facility	Custo		taff?	(1.6.		cing, VA		1011,		pecify or LF)	dem	Re	cap	nclo
(13)	1	12)			other n	niscellan	eous)				Remova	Repair	Encapsulate	Enclosure
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basement					nino	inculot	tion			0.1.5	+-	-		
basement	x pipe insulation 40 LF x													
											-	-		
Name of Registered Waste Hauler		N	JDEP W	aste	Cubic	Varde		Name of D	ogist-	rod Leadell	_			
Newark Carting		10000	auler ID		of Was			Name of R						
		04	509		TBD			Grand C	entra	al Sanitar	y Lai	ndfill		
City, State			111111111111111111111111111111111111111			al Date		City, State						
Newark, NJ					TBD		Pen Argyl PA							

Completed by

A. Scott Higgins

Title

President

Date

2/28/19

Signature

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CK 1981 PAU	J.	1101	(Pursua	ant to NJ	AC 8:60 a	S ABATI and 12:12	EMENT 20)	1) ( 1 = 1 = 1 = 1 = 1 = 1 = 1 = 1 = 1 = 1		ŋ		~3 <sub>1</sub>		
Date of Notification (1)			Name	e of Buildi	ng Owner	/Operato	or (2)		1115			- [		
2/28/19			Mai	rk Porce	Ili Priva	te Hom	16		MAR	5	2019		had f	
Agencies Notified Type Notificati	on		Stree	t Address			0.5	1	-			- 1	NOTE SEA	
EPA Initial												****		
DEP Amended Amended Amended				State, Zip				12 9	* 11		Sec. iii	-		
_ Fmergen	y (includi	ng		g Beach		J 0800	8							
DOH justification Cancellati	n)	J		of Conta	ct			T	elephone	Numbe	er			
- Caricellati	On		Mar											
Name of Facility Where Abatement is Tal	king Place	(3)	FA	CILITY IN	IFORMAT	TION	T							
Mark Porcelli Private Home		, ,					Type of Facili	7.00						
Street Address							School (I	K-12)	har then	IZ 40\				
							Other (i.e	e. private	& comm	K-12) ercial b	uildin	is ho	mes	
City (5)							etc.) Square Feet		Version		-			
Long Beach Twp NJ 08008							1000	2	of Floors			. Age		
County (6)			Count	y Code (7)	)				in a deser	-P-1 - P	35+			
Ocean			(STATE	E USE ONL	(Y)		house	-HOI II DE	Prior if being demolished)					
Name of Monitoring Firm Hired by Building	g Owner (	8)	ASC	CM No.		Name	of Abatement C	Contracto	r (9)					
N/A						Perr	aco Inc.		. (0)					
Street Address						Street	Address						-	
City State 7: 0	, State, Zip Code						30x 329							
City, State, Zip Code						City, S	tate, Zip Code							
Project Manager for Monitoring Firm						Wes	t Berlin NJ 0	8091						
r roject warrager for Monitoring Firm			Teleph	one No.			one No.		Licens	e No.			-	
Start Date (10)	Cobodi	1240	1.0	5		1000000	753-9800		0072	7				
3/11/19	3/15/		mpietion	Date (11)	)		of OSHA Monito	or		- 10-5				
Occupancy Status During Abatement (Che						Sam								
Facility Closed/Vacated During Entire						Street	Address							
Abatement Performed Outside of Nor	mal Facili	Abater ty Hour	nent s			City Ct	ata 7in Codo							
Other – Describe:		•				Oity, St	ate, Zip Code							
Scope of Work (Check All That Apply)														
≥3 sf or ≥3 lf		Renova	ation			П	Full Containment with Negative Pressure							
≥160 sf or ≥260 If	-	Demoli					Mini-Enclosu	nent with re	Negativ	e Press	ure			
(4)						X	Glovebag Pro	ocedure						
	1.	s Locat	ion			123	Non-Exempte	ed (*) and	Non-Fr	able Pr				
Location of		Normal	lly		D							emen ype	τ	
Asbestos-Containing Material (ACM)		ed Sole		Asbes	tos Conta	cription of	aterial (ACM)	Ar	nount		T	T	T	
TO BE ABATED In Facility		todial S		(i.e.	thermal s	systems	insulation,	(S	pecify	Re	70	Enc	m m	
(13)		(12)				ing, VAT iscellane		SF	or LF)	Remova	Repair	Encapsulate	Enclosure	
	Yes	No	N/A	1						l a	=	llate	ure	
Exterior Siding			V		Freter	. 0: 1:				-	1	-		
		Х		Exter	ior Sidi	ng	18	00 sf	Х					
	-													
					-				N					
										+	1			
Name of Registered Waste Hauler		1000000	JDEP W		Cubic Y		Name of	Register	ed Landf	ill	1		-	
United Roll Off	auler ID 2459	No.	of Wast	I really of registered Landilli										
City, State	-408		4 Disposa	I Data										
Elm NJ			3/15/1		City, Stat		10007							
Completed by			0:											
Anthony T Perna	1140						Signature Date							
		000000000000000000000000000000000000000	2/28/19											

State of New Jersey

## State of NJ

B & G proj. #:

2019-44

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

Check # 9172

Date of Notification	/11							27 (0)		177	 		
10   3   /   0   1		1.1	ame of Build Jennifer K		er/Operator (2)			EC		M			
Agencies Notified	Type Notificatio						<del></del>				111	117	
EPA		.   5	reet Addres	5	-85		3.1	MAR	5 20	019			
☐ DEP	X Initial		ity, State, Zi	n Code				- 100/ 100/113	J 44	710	_ h		
X DOL	Amendm		Maplewo		07040				ryma a		412,		
X DOH		N:	ame of Cont	act				Telephor	ne Number				
☐ DCA	Cancellat	ion	Jennifer	Keller									
				FACI	LITY INFORM	ATION							_
Name of facility wh	nere shatement is	faking nla	ce (3)	17.01				Type of Facility	(4)		bi		
		taking pie	00 (0)					School	ol (K - 12)		¥.5		
Jennifer Kelle									napter 8 (Of			12)	
Street Address									(Private/Co /Homes, et				
								Square Feet	# of Floors	S	Blo	lg. Ag	je
City (5)		Cour	ity (6)				ty Code (7) e use only)	Current Use (F	Prior if heing	ı dem	olishe	d)	
Maplewood,	NJ 07040	Ess	sex			(0.0	100 01,	residential	TION IN DOMES	, 40111	0110110	-,	
Name of Monitorin	ig Firm Hired by B	ldg. Owne	er (8)	T	ASCM No.		Name of Abatement C	ontractor (9)					
65.							B & G Restoration	on, Inc.					
Street Address							Street Address 105 Ryerson Ro	nad					
City, State, Zip Coo	lo.						City, State, Zip Code						
City, State, Zip Coc	16						Lincoln Park, N	J 07035					
Project Manager fo	r Monitoring Firm		Pho	ne Numb	er	—  -	Telephone Number	1	License		er		
							(973)696-6869		00	378			
Scheduled Start Da	ate (10)	Sched	. Completion	Date (11	1)		Name of OSHA Monitor B & G Restoration						
03/12/2019		03/	13/2019				Street Address						
Occupancy Status							105 Ryerson Ro	ad					
Facility close	d/vacated during erformed outside	entire peri	od of abaten	nent.		11	City, State, Zip Code		Mill - 12				
Describe:		or monnian				-	Lincoln Park, N.	07035					
Other-Descri Scope of Work (cl		)					rap & cut						-
Demolition		, Renovatio	on				ull Containment w/nega	ative pressure	<b>✗</b> Gloveb	oag pr	ocedu	ire	
>3 sf or >3 if	f 🗆	160 sf or	≥260 If			X M	lini-enclosure		☐ Non-fr	iable	oroce	dure	
Location of			n normally u		/			T	27	R	R	E	E
asbestos-co material to b		by maint staff(12)	enance/custo	odiai	Descript material		sbestos-containing	Amount (Specify	SF or	m	р	n	n
abated in fac		Yes	No	N/A	material	(ACIVI)		LF)		v v	i	a p	L
boiler room				X	pipe insul	ation		8 If		e X			to
crawl space				X	pipe insul			10 lf		X			
					]								
					Subic Yards of	Masta	Name of Registered	andfill			Ш	Ш	
Registered Waste B & G Restora			EP Hauler II 19563	J#   C	1	vvasic	Grand Central						
City, State Lincoln Park,	NJ		]	Disposal Disposal C	Date 3/13/2019		City, State Pen Argyl, PA						
Completed by (Pri		Title Secreta	ıry/Treasu	rer	Signature	(	Gordana Luna		Date 03/0	1/20	19		
			,						1				

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

5.00	3 (3)	-	Management of the last	The same
122	172	IL	1 11	DA.
11.		1700	' 11	1343
1		72.1	- 11	10

4-1940		見見是	Į,		to NJAC								-			1
Date of Notification (1) 2/28/19					f Building egaspi	Owner/0	Operator	r (2)			/AFI	E	201	Q	***************************************	
Agencies Notified	Type Notification			Street A	Address					i.			7.171	-	no-	55
ĭ EPA	Initial									france-						
DEP X DOL	Amended Amendment	#			ate, Zip Co son, NJ						fa.			٠.		
	× Emergency		_		f Contact	07030				Tal	onhono	Alcon	har	· ,	-	_
DOH DCA	justification) Cancellation				egaspi					Tel	ephone	Nun	iber			
					ILITY INFO	ORMAT	ION				_				-	
Name of Facility Where	Abatement is Takin	g Place (	3)					Туре	of Facility	(4)					41.5	
Residential Home									School (K-		100	3000				
Street Address								×	Subchapter Other (i.e. petc.)					lings,	home	es,
City (5)								B1576536. S	re Feet	1,1000	Floors		- 833	ldg. A	-	
Emerson								280		2			- 1	5 +/-		
County (6) Bergen					Code (7) USE ONLY	·			ent Use (Pri sidential H		ng dem	olish	ed)			
Name of Monitoring Firm	Hired by Building (	Owner (8)	)	ASC	Λ No.				tement Co		(9)					
Project Manager									Abatem	ent						
Street Address								Addre N. Mi	ss dland Av	e.						
City, State, Zip Code									ip Code							
Decided Manager for Man									ook, NJ (	17663						
Project Manager for Mon	itoring Firm			Telepho	ne No.		0.00.000.0015065	none N 600-3			Licens 0130		),			
Start Date (10) 3/1/19		Schedul 3/5/19		npletion	Date (11)		Name	of OSI	HA Monitor							
Occupancy Status During	Abatement (Chec	k Only O	ne)				Street	Addre	ss				- 111			
Facility Closed/Vaca Abatement Performe Other – Describe: 8	ed Outside of Norm	Period of a	Abaten y Hours	nent			City, S	state, Z	ip Code							
Scope of Work (Check Al	I That Apply)															
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		- Designation of the last of t	Renova Demolit				×	Mir	Il Containm ni-Enclosure ovebag Pro n-Exempte	e cedure					9	
		T .	Locati			7-2		1 140	II-LXeIIIpte	u ( ) ain	1 11011-1	Habi			ement	
Location	of	1	Locati Normal	ly		Do	scription	of						Ту	ре	
Asbestos-Containing TO BE ABA In Facilii (13)	Material (ACM) ATED	Ma Cus	ed Sole aintenar todial S (12)	nce/ Staff?		tos Cont thermal surfa	taining N systems cing, VA niscellar	Material s insula T, or		(8	mount specify or LF)		Removal	Repair	Encapsulate	Enclosure
**		Yes	No	N/A							-0.4					
Main Ar			Х	-			VAT				11 SF		×			
Bathroo		-	X				VAT				3 SF		×			
Hallwa		-	X	-			VAT				7 SF		X			
Bar Are			X				VAT				8 SF		X			
Name of Registered Was			100000	JDEP Wauler ID		Cubic of Was			Name of					1200		
All Stages Abatemer	nt		1	036592		2 yd			Grand		al San	itary	Lan	dfill		
City, State Saddle Brook, NJ						Dispos TBD	sal Date		City, Stat Pen Ar		4					
Completed by		Title				S	Signature	11	1_1	7		Dat				
Richard Cristofol		Pres	ident				1/2	17			-	2/2	28/19	)		

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

Detroit										#344 h				
Date of Notification (1)	07	40						vner/Operator	(2)					
	27 /	19	_		Ja	mie & Do	nna	Macciocca		MAF	7 5	201	9	
Agencies Notified	Type Notific	cation			Stree	t Address					325			
□ EPA										·	# 52			
□ DOLWD	☐ Amende	1000 to 1000 t			City,	State, Zip	Code	)					- 04	
□ DOH □ DCA	Amendn  Emerger		dudina	3	Wi	ldwood,	NJ 0	8260			÷ •	e.		
(NJAC 5:23-8)	justificat		iuainę	3		e of Contac				Telephone N	Jumber			
A stratue restricted additionable	☐ Cancella					mie Maco		ca		Tolophono I				
					EA	CILITYIA	IEO	RMATION						
Name of Facility Where A	hatement is	Taking	Place	(3)	ГА	CILITI	NFOI	RIVIATION	Tunn of Facility	(4)				
Residence	batement 13	raking	1 lace	(3)					Type of Facility					
Street Address									School (K-12		(-12)			
Otrect/Iddiess									Other (i.e., p	rivate and com	mercial	buildir	ngs,	
City (5)									homes, etc.)					
City (5) Wildwood									Square Feet	# of Floors		Bldg.	Age	
The state of the s									1,522	3		84		
County (6)					Cou	nty Code (7	7)(STA	ATE USE ONLY)	The second secon	rior if being dem	nolished	1)		
Cape May									Residence					
Name of Monitoring Firm		1.0	wner (	(8)	ASCM	No.	1		ent Contractor (9)	)				
Atlas Environmenta	Il Inspectio	ons					F	Frymar Cons	truction, Inc.					
Street Address							Str	eet Address				25		
P.O. Box 11645							F	P.O. Box 115	87					
City, State, Zip Code							Cit	y, State, Zip C	ode					
Philadelphia, PA 19	116						F	Philadelphia,	PA 19116					
Project Manager for Moni	toring Firm			Tel	ephone	No.	Tel	lephone No.		License No	,			
Jason				2	67-784	-4693	2	267-784-4694	ļ.	01276				
Start Date (10)	;	Schedu	iled C	ompl	etion Da	ite (11)	Nai	me of OSHA N	lonitor			12 W-1		
_2 / _28 /	19	2	/	_2	8_/	19								
Occupancy Status During	Abatement (	Check	only o	ne)			Stre	eet Address						
☐ Facility Closed/Vacate					ement									
☐ Abatement Performed	Outside of N	lormal F	acility	Hou	rs - Des	scribe	City	y, State, Zip Co	ode					
Time of Abatement:	AM	PM	/	_PM		AM	Oit,	y, Otato, Zip Ot	ode					
Scope of Work (Check all	that apply)						_							
	and apply)							□ Full Cont	tainment with Neg	ative Pressure	:			
≥3 sf or ≥3 If     ≥160 sf or ≥260 If			⊠ Re					☐ Mini-Enc	losure					
☐ <u>2100 31 01 2200 11</u>		ı	☐ De	moliti	on			☐ Gloveba	g Procedure mpted (*) and No	n-Friable Proce	adura			
			ls	Loca	tion			□ Non-Exc	inpled ( ) and No	II-I Hable Floce	T	۸ <b>۱</b>		F
Location			N	lorma	ally			Description o	f			Abaten		1
Asbestos-Containing N		/1)			ely by ance/			Containing Ma	terial (ACM)	Amount	1	Repair	inc	Enc
TO BE ABAT IN Facility			Cust	odial	Staff?	(i.e		ermal systems i surfacing, VAT,		(Specify		Repair	aps	Enclosure
(13)	,			(12)				her miscellane		SF or LF)	,	2	Encapsulate	Ire
			Yes	No	N/A								Ф	
3 <sup>rd</sup> floor bedroom			П			pipe wr	an ii	nsulation		50 LF				
			=	N		p.po	чь	. iouiuuoii		30 Li			닏	ᆜ
											Г		П	П
	200		П	П	П						- F	10	1	=
Name of Registered Waste	e Hauler				JDEP \	Nasta	Cul	oic Yards of	Nome of Deci	tored Law Inii	L	111		
Frymar Construction				1000	lauler I		Was		Name of Regis		:.			
City, State	.,				00367	68334	1			erks Commu	inity L	andfil	į.	
							N 500 8	posal Date	City, State	2000				
Philadelphia, PA							2/	/28/19	Birdsboro,	PA				
Completed By (Print or Ty	pe)	Title						Signature			Date	- 1		
Efraim Dua		VP						24	ain Deus		2	27	9	
SP 41		-							0		,	1.4	A 70	

PAID

# State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:120)

Chut 3527

Date of Notification (1)	19			ding O	wner / Opera	itor (2)	17	E C	) [S	n na	/r. ++  -+	
	otification		eet Addres	38					. 17	1 1/2	-	-
☐ EPA			Vest Sev		Street							
☐ DEP ☐ I	nitial		, State &				-	MA	D -	2010		
	Amended		ncinnati,		5202		4.1	MA	H 5	2019		الميدا محدد نه
	Emergency		ne of Con						Teleph			er
LI DOA	Cancellation	Tia	Wenrich	1					513-57	9-724	11	
Name of Facility Miles At		F	ACILITY	INFC	RMATION				5		+	
Name of Facility Where Aba Macys Store	tement is Taking F	Place (3)			Type of Fac							
Street Address					School		4h 4h 1	( 40)				
South Orange Ave. & W	alnut Ave.				☐ Subcrite	ie privat	ther than k	rcial buildi	nas hor	nac at	c )	
					Square Fee		of Floors		Bldg. Ag		0.)	
City (5)	County (6)	Count	y Code (7)	)	1				Diag. 7 is	,		
Livingston	Essex				Current Use	e (Prior if I	being demo	olished)				
					Retail			5)				
Name of Monitoring Firm Hir	ed by Building Ow	ner (8)	ASCN	۱No.	Name of Ab			(9)				
Pennoni Associates, Inc Street Address	•				Bristol En		ntal, Inc.					
24 Commerce Street, Su	ite 300				Street Addre		4					
City, State & Zip Code					City, State 8							
Newark, NJ 07102					Bristol, PA							
Project Manager for Monitori	ng Firm		ne Numbe	r	Telephone I			License	Number			-
Ralph Coppola Scheduled Start Date (10)	Cabadulad Ca	973-265			(215) 788-0			00509				
3/11/19	Scheduled Co	3/12/19			Name of OS Bristol En							
Occupancy Status During Ab	patement (Check o				Street Addre		ntai inc.				_	-
Facility Closed/Vaca	ted During Entire F	Period of A			1123 Beav		t					
Abatement Performe		al Hours	_		City, State 8						52/5	
Describe: 10:00PM					Bristol, PA							
Facility Occupied Du Scope of Work (Check all that			-									
ocope of work (Check all the	at apply)					ПЕ	ull Contain	ment with I	Voqativo	Droce	uro	
≥3 sf or ≥3 lf		⊠ R	enovation				lini-Enclosi		vegative	11633	uie	
≥160 sf ≥260 lf		☐ De	emolition				love Bag F					
						□ N	on-Exemp	ted and No	n-Friable			
Location of Asbestos-Conta		Is Loca Normally			Description			Amount	Aba	atemer	nt Ty	/ре
Material (ACI		Solely		ŝ	Asbestos-Co Material (A			(Specify SF or LF)			Ш	
TO BE ABATI	<u>ED</u>	Maintena	ance or		(i.e., thermal s	systems		01 01 11 )	Re	R	nca	Enc
in Facility (13)		Custodia (12			sulation, surfa				Remova	Repair	Encapsulate	Enclosure
(10)		Yes No		0	r other miscel	lianeous)			<u>a</u>		late	ē
Main Office Stockroom					Debris	S	_	20 SF			-	$\Box$
Mall Level Cosmetics Sto	ore Room			120012	Debris			5 SF		HH	╡	H
								0 01		HH	Ħ	H
									一百	Hi	Ħ	Ħ
Name of Posistered Westel	(avdas					-						
Name of Registered Waste F	lauler		IJDEP Wa lauler ID N		ubic Yards Waste	Name o	of Registere	ed Landfill				
Service Transport Inc.		1.	20990		1 cu yd	Minery	a Landfil	1				
City, State		1			isposal Date	City, Sta		-				-
New Castle, Delaware					3/12/19		sburg, O	Н				
Completed By (Print or Type)		100	itle	Si	gnature	^		·	Date			$\neg$
Gino Pizzigoni			roject		Vinn 1	Penja.	mai /	M	2/28	/19		
		IV.	lanager	1	JUIN 1	- Wh	10101	V				

Check#3280		NOTI		t19/ly	OF AS	BESTO	SABAT	EMENT	DE	<del>}</del> <u>E</u>		$\mathbb{W}_{-}$	
Date of Notification (1)				Name	of Buildin	g Owner/C	perator (	2)	Till MA	R -	5 2	019	-
	19			Sreedh	ar Venu						× 4	UIU	
	ype Notification	27-22-4-20-12-4		Street	Address				ACDEO	TOO (		ETT DAGGE	managed -
	☑ Initial ☐ Amended								ASBES	105	,UI		
⊠ DHSS	Amendment #		1	City, S	tate, Zip (	Code			E-Communication.	NI SERVICE SERVICE	tanker av		
□ DCA □	Emergency (inc	luding	Ŀ		City, NJ								
(NJAC 5:23-8)	justification)  Cancellation			.,	of Contac	t			Telephone Numb	)er			
					ar Venu				1				
Name of Equility Where Abr		Di	(0)	FAC	ILITY IN	IFORMA	TION	r=					
Name of Facility Where Aba	itement is Taking	Place	(3)					Type of Facility					
Private house Street Address								School (K-12	) (Other than K-1 2)	00			
Offeet Address								Other (i.e., p	rivate and commer	cial bu	lding:	5.	
City (5)								homes, etc.)	# of Floors	I DI	la Ac		
Jersey City, NJ 07306								Square Feet	# 01 F100FS	BIG	ig. Ag	ic	
County (6)				Count	y Code (7)	(STATE US	E ONLY)	Current Use (Pri	or if being demolis	hed)		-	-
Hudson					, 11			32.3.1. 000 (I II	somy demons				
Name of Monitoring Firm Hi	red by Building O	wner (	8) /	SCM N	Vo.	Name o	f Abatemo	ent Contractor (9)					-
						Gr Tech		1.7					
Street Address						Street A	ddress						$\neg$
						576 Val	ley Rd#	283					1
City, State, Zip Code						City, Sta	ite, Zip C	ode					
5				50000 e-r-11		white the desire the same of the	NJ 0747	70					
Project Manager for Monitor	ring Firm		Tele	phone I	No.	Telepho	ne No.		License No.				
Start Date (10)	16-5-1	1			77.45	973-638			01127				
	- maketon	3 /	12				f OSHA N ision Co	nsultants,Inc					
Occupancy Status During A			100000			Street A	ddress						
					crihe			Road, Bldg .#	35E				
Time of Abatement:	AMPN	Λ/ <u></u>	PM_	. 500	AM		ate. Zip Ci						
Scope of Work (Check all th	nat apply)					Fair Lav	vn, NJ 0	<del></del>	nation with negative	nress	ura	-	
						口	Full Con	tainment with Ne		produ	uio		
>3 sf or >3 If 2 160 sf or >260 If			novatio			kd.	Mini-End	dosure	Tent with Negative	Press	ure		
			montrio				Non-Exe	mpted (*) and No	n-Friable Procedu	re	1		
		1	Locat					THE PERSON NAMED OF THE PE		Ab	atem	ent T	уре
Location of Asbestos-Containing Ma			Normal d Sole		Ache		scription (	of iterial (ACM)	Amount	Re	Re	En	En
TO BE ABAT	Children and an article and an article at		intena todial :			e., therma	systems	insulation,	(Specify	Remova	Repair	caps	Enclosure
IN Facility (13)		Cus	(12)	Jian :			cing, VAT niscellane		SIF or LF)	\\\ \delta		Encapsulate	ure
,		Yes	No	N/A		J. 13. 1						0	
Basement		П	П	×	Pine in	sulation			50 LF	X	П	П	П
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						-							
Name of Registered Waste	Hauler		NJE	EP Waste	Hauler ID No	Cutio 13	rds is Was	tel Name of Regi	stered Landfill				
Gr Tech LLC			(	03378	35	1_73	0	T.R.R.F. Inc					
City, State						Disposa	al Date	City, State					
Wayne, NJ 07470						Til	D	Tullytown, P	A				
Completed By (Print or Typ	e) Title	9				Sig	gnature	1 1	( D.	ate			
N.Jevtic	0	ner					- //	leute Wena	07	/28/1	0		- 1

$\wedge$ . I			ings in the same of the same o	and I come	state of N		and I				7) [	<b>E</b> (	73 57	54	W	
1/2/1	)		NOT	FICATIO	N OF AS	BESTOS	ABATE	EMEN	Т		公(					- Anna Carrier
Date of Notification (1)	/ )		Peul		of Buildin	-	MANAGE -					M/	\R	- 5	201	g
2/22/19					dence	g Owner	Орегато	ir (2)								
Agencies Notified	Type Notification	1		Street	Address					_	A	SBE	STO:	3 CO	N,	/ 5
× EPA × DEP	Initial Amended			City S	tate, Zip 0	Podo.				l.	And the State of	nd week garage	name of the last			e
× DOL	Amendmen				llen, NJ											
DOH DCA	Emergency justification	)	g		of Contac	3				Те	lephone	e Nun	nber			
	Cancellation				ILITY IN		ION			_						
Name of Facility Where A	Abatement is Takii	ng Place	(3)				1011	Тур	e of Facility	(4)						
Street Address	- In-							H	School (K- Subchapte	12)	or than	V 12	١.			
								×	Other (i.e. etc.)	private	& comr	nercia	) Il buil	dings	hom	ies,
City (5) Dunellen								20123350	are Feet	C. S. S. C. L. C.	f Floors	\$	100	Bldg. A	Age	
County (6)				County	Code (7)			160	ou rent Use (Pri	2 or if he	ing den	nolieh	- 1	57		
Middlesex					USE ONL			Juli	ient ose (i n	or ii be	nig den	1011511	eu)			
Name of Monitoring Firm A. Seine Lighthouse	Hired by Building Solutions	Owner (8	3)	ASCI	M No.				atement Co		(9)					
Street Address							Street									
PO Box 354									erty Avenu	ie						
City, State, Zip Code South Orange, NJ 0	7079								Zip Code VJ 07205							
Project Manager for Mon Sarah Calandra	toring Firm			Telepho			Teleph				Licen					
Start Date (10)		Schedu	led Co		49-2666 Date (11)		844-		7465 SHA Monitor		0131	6				
3/5/19		3/20/1	9	mpicuori	Date (11)				Lighthous	e Solu	itions					
Occupancy Status During		25.0	30				Street PO B									
Facility Closed/Vaca     Abatement Performer	ited During Entire ad Outside of Norn	Period of nal Facilit	Abater y Hour	nent s					Zip Code							
Other – Describe: _						_	Sout	h Or	ange, NJ	07079						
Scope of Work (Check Al  x ≥3 sf or ≥3 lf	i i nat Apply)		Renova	ation				1 -								
≥160 sf or ≥260 lf			Demoli				×	Mi	ull Containme	<b>:</b>	Negati	ve Pr	essui	e		
					1				ovebag Prod on-Exempted		d Non-F	riable	Pro	cedur	Э	
F		1000	Locat Norma											Abate Ty		1
Location Asbestos-Containing	Material (ACM)	Use	ed Sole	ely by	Asbes	stos Cont	scription aining M	lateria	II (ACM)	Aı	mount	Ì				55.00
TO BE ABA In Facilit		2000000000	todial (12)		(i.e.		cing, VA	T, or			pecify or LF)		Remova	Repair	ncap	Enclosure
(13)		Yes		LNIA		other n	niscellan	eous)					oval	air	Encapsulate	sure
Baseme	ent	res	No X	N/A		Di	ıct wor	l.		40	50 LF		X		(D	
Baseme			X				B Wra			2000	CFT		Δ.			
								-			01 1	-				
												-				
Name of Registered Wast	e Hauler		3190	IJDEP W lauler ID		Cubic of Was			Name of F	Register	red Lan	dfill				
Newark Carting			100000	4509	140.	oi vvas	ole.		Waste N	/lanag	emen	t La	ndfil			
City, State East Orange, NJ						Dispos	al Date		City, State		DΛ					
Completed by		Title				S	ignature	0	Penn Ar	gyle,	PA T	Date				
Alison Lamers		Office	e Mar	nager		0	X 1711	(1)	MUDO		1					

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

Chrt 3526

Date of Notification (	1)			Name	e of Bu	ildina (	Owner / Opera	tor (2)			010	,		_		
	2/27/19			Tren	ton B	oard o	of Education	1		_				-		-
Agencies Notified	Type Notific	cation		Stree	t Addr	ess				117	7 [	G	E	11		
☐ DEP	N 1-10					pect S					リー			<u>u</u> ,		
□ DEP	⊠ Initia					& Zip C					7)	- Levin				111
☑ DOH		ended		Tren	ton, N	J 086	38			11	district of the second	MAR	- 5	20	19	
DCA DCA		ergency cellation		0.00	of Co					160		Te	lepho	one N	lumb	oer -
	□ Can	Cenation				losley				-	1	60 SEST	9-65			<u> </u>
Name of Facility Whe	are Abatom	ont in Taking	Diana	FA	CILIT	Y INFO	DRMATION				ASL		OB C			
Maintenance Build	dina	ient is Taking i	Place (	(3)			Type of Fac			-		STEP STORY	THE PERSON AND PERSON	anner.		200
Street Address	9						School		(O4141-	- 17	40)					
1490 Prospect Stre	eet						Other (	i e priv	Other th	an K-	12) sial buil	J:	h		-4- V	
							Other (i	t.e. pilv	# of Flo		ciai buli			_	etc.)	
City (5)		County (6)	Co	ounty (	Code (	7)	3000		# OI FIC	JOIS		Bia	g. Ag			
Trenton		Mercer			, ,	. ,	Current Use		if hoing	loneli	ohod)			60+		
							Maintenan			lionier	snea)					
Name of Monitoring F	irm Hired I	by Building Ow	ner (8	)	ASC	M No.	Name of Ab	atemen	t Contro	otor (C	1)		-			
Environmental Co	nnection			,			Bristol En	vironn	nental.	lnc	')					
Street Address	2						Street Addre		.orrical,							
120 North Warren							1123 Beav									
City, State & Zip Code Trenton, NJ 08010							City, State &	Zip Co	de							
Project Manager for M	Appitoring F	Tiren	T-1-	1			Bristol, PA									
Rollie Jones	ionitoring r	-11111		phone 392-4		er	Telephone N				License		nber	-		
Scheduled Start Date	(10)	Scheduled Co					(215) 788-6				00509					
2/28/19	(.0)	correduied Co	2/28		e (11)		Name of OS Bristol Env									
Occupancy Status Du	ring Abate	ment (Check o	nly on	e)			Street Addre		ientai n	IC.						_
Facility Closed	d/Vacated I	During Entire F	Period	of Aba	temen	ıt	1123 Beave		et							
Abatement Pe	rformed O	utside of Norm	al Ho	urs – 7	am to	3pm	City, State &	Zip Co	de							
Describe:		14/47 B (656)					Bristol, PA									
Scope of Work (Check	ed During	Abatement 9:0	OOAM-	5:30P	M											
coope of Work (Clieck	r all tilat ap	ppiy)							F. II O					12.25		
≥3 sf or ≥3 lf			$\bowtie$	Reno	ovation	1		H	Full Cor Mini-End	lanm	ent with	i Neg	ative	Pres	sure	
≥160 sf ≥260 lf	f		П		olition	î.			Glove B							
									Non-Exe				iahla	Prov	odu	-
	ation of			Locatio			Description	n of			mount			teme		
	-Containing al (ACM)	9		nally U			Asbestos-Con	taining	1	(	Specify	-	1			,,,,
	ABATED			olely by tenanc		7	Material (A i.e., thermal s	CM)		SI	F or LF)	)	70		ᄪ	ш
in F	acility			dial St		ins	sulation, surface	cina. V	AT				Remova	Repair	cap	ncks
(*	13)			(12)		O	r other miscell	aneous	)			- 1	oval	a-	Encapsulate	Enclsoure
Offi ID II			Yes	No	N/A										te	CD
Office/Bathroom				니			Pipe insula	ation			9 LF					
			H													
			H	H												
			H		H											
			H	H	H											
Name of Registered W	aste Haule	er	Ш	NID	FP W/	asto C	ubic Yards	None	of Deci		1 - 100					
					ler ID I		Waste	INdille	of Regis	stered	Landfill	l				
Bristol Environmen	tal Inc.			187	06		4 Cu yd	Fairle	ss Lan	dfill						
City, State Bristol, PA							sposal Date	City, S	tate	A STORE LEVEL						
Completed By (Print or	Tuno			T		0.000	1/19	Fairle	ss Hills	s, PA						
Gino Pizzigoni	rype)			Title Proj	004		gnature	)			$\sim$	1 52.50	ate	50Y651		
o i izzigoili				200	ect	1	Sino C	m	ann.	. /	M	2	27	19		
NT 100.42				itiali	agei	1	DUIN IS	18	July	1	1					

CHECK # 3107

Date of Notification (1) 2/20/2019			Name	of Buildin	ng Owner	r/Operato	or (2)				<u></u>	- (c	1 11/	7 [
Agencies Notified Type Notificatio				dential						<u>) [</u>	6	6	1 M	
X EPA Initial X DEP X Amended Amendmer Emergency	nt # 1	ng .	City, S Mont		ew Jers	sey, 07	042				MAR	<del>-</del> 5	201	9
DOH justification Cancellation	1)	ŭ	5.9370.55	of Contac heodor	ct e Chest	tnut			Telep	hópe	NEMPO	e cc	))	. 6
Name of Facility Where Abatement is Taki	na Place	(3)	FAC	CILITY IN	FORMAT	TION	T		-		-			7/1
Residential Street Address City (5)	ng riace	(5)					×	School (Kondamer School		than l	K-12) ercial b	uilding	s, hor	nes,
Montclair							Squa 567	are Feet 7	# of F	loors		Bldg.	Age	
County (6) Essex			County (STATE	Code (7)	y)		Curre	ent Use (Pr sidential	rior if being	demo	olished)			
Name of Monitoring Firm Hired by Building TBD	Owner (8	3)	ASC	M No.		Name Sky	of Aba		ontractor (9 LC	)				
Street Address						100000	Addre		, Suite K					
City, State, Zip Code						City, S	State, Z	ip Code	ey 07470				-	
Project Manager for Monitoring Firm			Telepho	one No.		Teleph	none N		L	icense				
Start Date (10) 1/21/2019	Schedu 4/20/2	led Co	mpletion	Date (11)	)	Name	of OSH	HA Monitor acting, L	r					
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire I Abatement Performed Outside of Norm	Period of	Ahater	ment			Street 1385	Addres	ss ey Road,						
Other – Describe:  Scope of Work (Check All That Apply)	iai Facilit	y Hour	S		_			ip Code ew Jerse	ey 07470					
≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf	_	Renova Demolit				×	Min Glo	ii-Enclosure vebag Pro					re	
Location of	1	Locati	ly		Des	scription			(7 0.10 11	011111	ubic i i	Abat	tement ype	t
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Ma Cus	ed Sole intenar todial S (12)	nce/ Staff?	Asbes (i.e.	tos Conta thermal surfac	aining M	aterial insulat	(ACM) tion,	Amou (Spec SF or	cify	Remova	Repair	Encapsulate	Enclosure
Throughout	Yes	No	N/A				2002						te	(b)
Attic		X			Clean up		assumesta.		5,600		x			
Second Floor		X		1599.00	aster W				1,526		x			
First Floor		X			aster W			0	5,720		x			
Name of Registered Waste Hauler		X N	JDEP Wa		Cubic Y		Jeiling	9	2,493		x			
Service Transport Group, Inc.		H	auler ID 1 1990		of Wast				Registered Enterpri					
City, State New Castle, Delaware					Disposa TBD	al Date		City, State Waynes	e sburg, Oh	nio				
Completed by	Title				1 1	gnature	4	750	- 9, 01	35.00				

0h 1020	N	OT F	CATION	ate of Ne OF ASE to NUAC	ESTOS	ABATE	MENT 0)		7)	E C	E		7 E	M
Date of Notification (1) 02-25-19		deso	Name of	f Building ella Der	Owner/0	Operator			1					
Agencies Notified Type Notif	ication	-	Street A	manage designation	HOIILIOI	1			4	MAR	- 5	201	9	
EPA Initia			40 Def	forest A	ve.			_					- Management	
DEP Amer	nded	Ī		te, Zip Co				and the same of th	A	SBESTO	S CC	1	F	-
- Emer	ndment # gency (including	-		lanover	NJ 07	936		Insun	-		managare (.)		-1	
DOH justifi	cation)			f Contact Caravell	a				2000	lephone N 73) 884				
Canc	eliation		Chinolinia.	LITY INF	577	ION			(9	73) 004	-4900			
Name of Facility Where Abatement i	s Taking Place (3)	1	17101		Ortimizer	1014	Туре	of Facility (4	4)					
Apartment Building								School (K-1						
Street Address 300 Riverview Dr.								Subchapter Other (i.e. p				uildin	as ho	mes
City (5)								etc.)						
Totowa							Squa	re Feet	# 0	f Floors		Blag	. Age	
County (6)		Т	County (	Code (7)			Curre	nt Use (Pric	r if be	ing demo	lished)			
Bergen			(STATE U	JSE ONLY	)									
Name of Monitoring Firm Hired by Bin N/A	uilding Owner (8)		ASCN	l No.				tement Con tracting L		(9)				
Street Address							Addres	500		MRV-				
City, State, Zip Code								ip Code NJ 0708	7					
Project Manager for Monitoring Firm			Telephor	ne No.		(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	none No 216-9			License				
Start Date (10) 02-26-19	Scheduled 03-01-1		npletion [	Date (11)		Name	of OSH	A Monitor tracting LI		0.200				
Occupancy Status During Abatemen	t (Check Only One	<del>)</del>					Addres							
Facility Closed/Vacated During	Entire Period of Al	baten	nent			522	7th St							
Abatement Performed Outside Other – Describe:						7.55 7.65 7.55		p Code NJ 0708	7					
Scope of Work (Check All That Apply	/)						,					_		-
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	enova					Mir Glo	Containme i-Enclosure vebag Proc n-Exempted	edure				lura	
	le l	ocati	on				1,10	LXCIIIpteu	( ) un	<u> </u>	T T		ateme	nt
Location of	No.	ormal	ly		De	scription	of						Туре	
Asbestos-Containing Material (A) TO BE ABATED	JVI)	l Sole ntenai			tos Cont					mount Specify	7	,	E E	ш
In Facility	Custo	dial 9 (12)	Staff?	(1.0.	surfa	cing, VA	T, or	tion,		or LF)	Kemova	- Kebali	caps	Enclosure
(13)		20 1050			other n	niscellar	leous)				laval	_   =	Encapsulate	sure
Entire Property	Yes	No X	N/A	Dem	olition	Ashes	tos D	ehris			X	-	(0	
				2011		710000		55110			12	+	-	
								-			-	+		-
											-	+	+	+
Name of Registered Waste Hauler		TN	JDEP W	aste	Cubic	Yards		Name of F	Registe	red Land	fill			1
Caravella Demolition Inc		1 300	auler ID	No.	of Was				SI	ou cand	****			
City, State E. Hanover, NJ 07936					Dispos 02-28	sal Date 3-19		City, State Bethlehe		A				
Completed by	Title	1			S	ignature	1	Ü_	- 10	1.00	Date	. 40		
Jaime Delgado	Proj. N	viana	iger.				116	-			02-25	-19		

CHECK# 3106

Date of Notification (1) 2/21/2019			Name	of Buildir	ng Owne	er/Operato	(2) Consulting	. I		5 (	D [5	: 11	7.7
Agencies Notified Type Notification	n		Street 2067	Address Broadv	vay, S		Consulting			E ((	2 E	3	V
X DEP X Amended Amendmen	(including	_ [	15 St		_ane -	Gardine	r, New York 1	2525		MA	R -	5	2019
DOH justification Cancellation	) n		Mr. K	of Contac eith Lib	olt			Telep (845	noné N ) 255-	3853	TOS	COI	1
Name of Facility Where Abatement is Taki Industrial Building Complex	ng Place (3)	)	FAC	ILITY IN	FORMA	TION	Type of Facility						
Street Address 1000 Main Street							School (K-Subchapte Other (i.e. etc.)	r 8 (Other	than K-	12) cial bu	ildings	s, hon	nes,
City (5) Clifton							Square Feet 120,000	# of F	loors	1.0	Bldg. 110	Age	
County (6) Passaic			County (STATE	Code (7) USE ONL	Y)		Current Use (Pr Commercial	or if being	demolis				
Name of Monitoring Firm Hired by Building TBD	Owner (8)		ASCI	M No.		Name Sky (	of Abatement Co Contracting, L	ntractor (9)					3000
Street Address						Street	Address Valley Road,						
City, State, Zip Code						City, S	ate, Zip Code ne, New Jerse		· V				
Project Manager for Monitoring Firm		1	Геlерho	ne No.		Teleph	one No. 928-5040	L	cense N	No.			
Start Date (10) 01/14/2019	Scheduled 10/30/20		pletion	Date (11)		Name o	of OSHA Monitor Contracting, LL						
Occupancy Status During Abatement (Chec			30 1. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			Street A	Address						
Facility Closed/Vacated During Entire I Abatement Performed Outside of Norm Other – Describe:	Period of Ab	ateme Hours	ent			City, St	Valley Road, ate, Zip Code e, New Jerse						
Scope of Work (Check All That Apply)  ≥3 sf or ≥3 lf	X Re												
≥160 sf or ≥260 lf	=	novati molitic				×	Full Containme Mini-Enclosure Glovebag Prod Non-Exempted	edure					
Location of	1.00	ocation rmally						( ) and ive	JII-FIIAL	DIE PIO	Abate	emeni pe	ţ
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Used Maint Custoo	Solely enanc	by ce/		tos Con therma surfa	I systems icing, VAT	iterial (ACM) insulation, , or	Amou (Spec SF or	ify	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A		other	miscellane	ous)			oval	air	sulate	sure
See attached													
Name of Registered Waste Hauler		INIE	DEP Wa	eto	Cubic	Vorde	I N						
Service Transport Group, Inc.			uler ID N		of Was		Name of R Minerva			LC			
City, State New Castle, Delaware		1.			Dispos	sal Date	City, State Waynesi	ourg, Oh	io			<u> </u>	
Completed by Predrag Sarcev	Title Vice Pro	eside	ent		S	ignature		J,	Dat	te 21/20	19		

Industrial Building Complex 1000 Main Avenue Clifton, New Jersey

n, New Jersey					) ECEI		E	111
Location of Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Use Ma	S Locati Normal ed Sole aintenar stodial S (12)	ly ly by nce/	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation surfacing, VAT, or other miscellaneous)	MAR - 5 Amount ASSECTIVE CO.	2019 Remova	Abate Ty Repair	e e Encapsulate
	Yes	No	N/A			a	=	ilate
Proma USA (2 <sup>nd</sup> Floor)		X		Air Cell Pipe Insulation	200 LF	Х		
NJ Transport (1st Floor)		X		Air Cell Pipe Insulation & associated fittings	250 LF	х		
Base of Façade (bldg. exterior)		Х		Waterproofing	6,500 SF	Х		
Roof		Х		Roofing Membrane & associated Flashing	40,000 SF	х		
Moving America		х		Magnesium Block Pipe Insulation & associated fittings	250 LF	x		
Moving America		×		Air Cell Pipe Insulation & associated fittings	750 LF	Х		
Main Office		х		12" Floor Tiles & associated Mastic	425 SF	x		
Main Office Bathroom		×		12" Blue Floor Tiles	75 SF	Х		
Boiler Room		Х		Air Cell Pipe Insulation & associated fittings	250 LF	х		
Boiler Room		Х		Fire Tube Gasket	120 SF	Х		-
Boiler Room		Х		ACM Floor Debris	400 SF	Х		
Boiler Room		х		Boiler Breeching	400 SF	х		
Boiler Room		x		Front Fire Door Insulation	120 SF	х	-	-

11/	2	ind
(Y)		(())

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

Date of Notification (1) 2/20/2019	Name of Building Owner/Operator (2) Claremont Construction Group, Inc.								4		V	E		
Agencies Notified Type Notification  X EPA Initial			49 R	Address oute 20		30x 80	8	111111111111111111111111111111111111111		MAF	} .	- 5	201	9
DEP Amended Amendment Emergency		_		tate, Zip ( lills, NJ				_	1	-	dwines			
DOH justification) DCA Cancellation		ASBESTOS ( Telephone Number ( 908) 658-3900					KSIM:							
Name of Facility Where Abatement is Takin Commercial Office Building	ig Place (3	3)	FAC	CILITY IN	FORMAT	TION	Type of Fac	lity (4)				111		
Street Address 395 Main Street		School (K-12 Subchapter Other (i.e. pi					12) r 8 (Other than K-12) private & commercial buildings, homes,							
City (5) Hackensack				- 1 2 -			Square Feet 0	# 0	of Floors	3	1 3	Bldg. Age 60		
County (6) Bergen		Code (7) USE ONL	n		Current Use Demolishe	(Prior if b	eing den	nolishe	d)					
Name of Monitoring Firm Hired by Building (TBD	Owner (8)		ASC	M No.			of Abatement Contracting							
Street Address						0.440.500.4000	Address Valley Roa	ıd. Suite						
City, State, Zip Code	City, State, Zip Code Wayne, New Jersey													
Project Manager for Monitoring Firm	Telephone No. Telephone			Teleph	one No. 928-5040									
Start Date (10) 3/1/2019	mpletion Date (11) Name of C				of OSHA Mon	OSHA Monitor intracting, LLC								
Occupancy Status During Abatement (Check		Street Address					N All							
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other – Describe:	eriod of A al Facility	baten Hours	city, State, Zip Code Wayne, New Jersey											
Scope of Work (Check All That Apply)						vvayı	ie, ivew jei	sey 074	+70					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	10000	enova emolit				Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure								
		_ocati					cription of ining Material (ACM) systems insulation,		Amount (Specify SF or LF)		Abatement			
Location of Asbestos-Containing Material (ACM)	Used	ormali Sole	Descripti								Туре			
TO BE ABATED In Facility (13)  Maintenar Custodial S (12)					thermal surface	systems cing, VAT					Removal	Repair	Encapsulate	Enclosure
Basement Walls - Exterior	Yes	No X	N/A	V	Vaterproofing/Mastic				18 SF		c		ro .	
Name of Registered Waste Hauler		l N.	JDEP W	aste	Cubic `	Yards	Name	of Registe	ared Lan	dfill				
Service Transport Group, Inc.		Ha	auler ID 1990		of Was			va Ente						
City, State New Castle, Delaware					Dispos TBD	al Date	City, S Wayr	tate esburg,	Ohio					
Completed by Predrag Sarcev	lent		Signature Date 2/20/2				C							

(K#5268



n	E	C	E	-	V	E	n
7			Start to Co				

							13					
Date of Notification (1)	1	of Building Owner		continues and		MAR	- 5	2010	)			
Agencies Notified Type Notification	FC	CAK KC	7655	20W54,	bal 🖳	W A 11		2015	,			
FI 154			Suee	Address			-			and the same of th		
X EPA Initial Amended				state, Zip Code			A	SBESTO	SCO	M.	٠ ٦	
X DOL Amendme				. /			L		-		ALVANIA .	
DOH Emergence	y (including	l		of Confact	cod,	12m	19-50	<i>// (</i>	<u> </u>	10	)	
☐ DCA ☐ Cancellati			1	Tronk			1.6	elephone I	vumbe			Hanna .
				CILITY INFORMA	TION		L_		-			
Name of Facility Where Abatement is Tak	2.					Type of Facili	ty (4)					
Street Address	1 Ch)1	de	nce			School (						
Onto Address						Subchar Other (i.	ter 8 (Oti	ner than K	-12)	~		
City (5)						Other (i.e etc.)	e. piivate	& comme	rcial eu	Haing	s, hon	nes,
Non formal						Square Feet	# c	f Floors		Bldg.	Age	
County (6)			0 .	0 . /=:		900		1	1	5.	34	₽C.C)
Ma Moscos		]		Code (7) USE ONLY)		Current Use (			ished)		1	The state of the s
Name of Monitoring Firm Hired by Building	Owner (8)	- 1	ASC	CM No.	1 Aformo	(P) C	190CR	4				
			1100	r40.	Aca	of Abatement ( Insulation C	Contracto o Loc	r (9)				
Street Address		P	<u> </u>		-	Address	U MIL.					
· ·					1	nauress Iontrose Rd						
City, State, Zip Code						late, Zip Code						
					Its Neck, New Jersey 07722							
Project Manager for Monitoring Firm		***************************************	Telephone No. Telep			phone No. License No.						
Start Date (10)				7322	941757		00029					
3 8-19					of OSHA Monite	or						
Occupancy Status During Abatement (Che	131	2/	19		1							
process.					Street	Address						
Facility Closed/Vacated During Entire Abatement Performed Outside of Non	Period of A nal Facility	baten Hours	nent :		City Ci							
X Other – Describe: <u>7am-7pm</u>					City, St	ate, Zip Code		,				
Scope of Work (Check All That Apply)	A											
≥3 sf or ≥3 II	VI R	enova	linn		0 0	F. 11 0						
. ≥160 sf or ≥260 lf		moliti			James] [max]	Full Contains Mini-Enclosu	nent with re	Negative	Pressu	re		
					×	Glovebag Pre	ocedure					
	Isl	_ocati	on	1	Louis	Non-Exempt	ed (*) and	Non-Fria	ble Pro	100 - Co. Co.	10-14-10-10	
Location of	) No	ormali	у	Do	cariation	ription of ning Material (ACM)				Abatement Type		
Asbestos-Containing Material (ACM)  TO BE ABATED		Solei itenan		Asbestos Cont	aining Ma			nount		The states	-	
In Facility	Custo	dial S	taff?	(i.e. thermal	systems ing, VAT	insulation,		pecify	70	72	ince	Enc
(13)		(12)		other m	iscellane	ous)	) Sr	or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	MA				4		<u>a</u>	-	lato	6
basement			N	Flor H					1.7			
	1 1		->>	->lov-1	1. 12.		400	<u> </u>	1 X			
	1											
Name of Registered Waste Hauler		أبب									and a second	
			DEP Wa uler ID I			Name of	Register	ed Landfill				
Ace Insulation Co., Inc.			860	) 11435	الت	1 (h	vin "	Š				4.518
City, State		•		Disposa	I Date	City, Stat						
Colts Neck, New Jersey				3/1	7/10	1 Eas		217				Section in Line of the last
Completed by Bree McGuire	Title		•		mature	T	1	Da	le;			-
	Secreta	dry 1	reasur	er	12	L /			112	7	G	3

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

CK# 930

Date of Notification (1)				Nan	ne of Ruilo	ling Owner/Operato	r (2)	(= /0 fi	= n	n/i	i e			
3 /	4 /	19				berfeldt	(2)		=	W				
Agencies Notified	Type Notifical	tion									111			
⊠ EPA	☐ Initial	шоп		Stre	et Addres	S	E. F.		г	2010				
□ DOLWD	☐ Amended			City	State 7:	· Code	1	MAR	5	2019	1 1-2			
⊠ DHSS	Amendme		_		State, Zip	J 07735					77 33			
DCA (NJAC 5:23-8)	☐ Emergenc justification	y (includi	ng	-	e of Cont			Tames (						
(10/10/0.20-0)	Cancellation			of the contract of	ndrew O			Teléphone Number						
Name of Facility Where	Abatamant in Ta	trian Dia	- (0)	FA	CILITY	INFORMATION		Name of the second second						
rame of Facility villere	Abatement is 1a	iking Plac	e (3)			Type of Facility (4)								
Street Address							School (K-12	2) 3 (Other than K-12	2)					
31.00171dd1033							Other (i.e., p	rivate and comme	z) ercial bu	uildinas				
City (5)		homes, etc.)			anumgo,									
Keyport, NJ 07735							Square Feet	# of Floors	BI	ldg. Age				
County (6)			1.			2,000	2		45					
Monmouth County				Cou	nty Code	(7)(STATE USE ONLY)	Current Use (Pri	or if being demoli	shed)					
Name of Monitoring Firm		_	(0)	1										
14ame of Monitoring Fifth	miled by Buildin	ig Owner	(8)	ASCN	l No.		nent Contractor (9)							
Street Address						JVN Restora	ation Inc							
0.000171001033						Street Address								
City, State, Zip Code						47 Foster Road								
on, onto, zip oode						City, State, Zip Code								
Project Manager for Moni	itorina Eirm		To	lanhana	NI-	Staten Island NY 10309								
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Project Manager for Monitoring Firm Telephone No.						Telephone No. License No. 718-605-6256 00774							
Start Date (10) Scheduled Completion Date (11)						718-605-6256 00774  Name of OSHA Monitor								
3 / 13 / 19 3 / 15 / 19						Testor Tech	Vionitor							
Occupancy Status During							10010							
☐ Facility Closed/Vacate	d During Entire	Period of	Abat	emont		Street Address								
□ Abatement Performed	Outside of Norm	nal Facilit	v Ho	irs - Des	scribe	10 59 Jackson Avenue								
Time of Abatement: 7:	:00 AM-7:00 PM	/I/F	·М	AM		City, State, Zip Code LIC NY 11101								
Scope of Work (Check all	that apply)					LIC NT 1110	1							
		100000000000000000000000000000000000000				☐ Full Con	tainment with Nega	ative Pressure						
<ul><li>≥3 sf or ≥3 lf</li><li>≥160 sf or ≥260 lf</li></ul>		⊠ Re □ De	nova	tion			closure	ativo i ressure						
			HOIL	1011		⊠ Gloveba □ Non-Exe	g Procedure empted (*) and Non	-Friable Procedu	ro					
			Loca			_	mptos ( ) and Hom	Triable Frocedu		atomoni.	T			
Location of			Norm	ally lely by		Description of				atement				
Asbestos-Containing N TO BE ABA	raterial (ACM)	Ma	inten	ance/	Asbe	estos Containing Ma e., thermal systems	iterial (ACM)	Amount	Rem	Repair	Enc			
IN Facility	У	Cus		Staff?	(1.0	surfacing, VAT	nsulation,	(Specify SF or LF)	Remova	air	Enclosure			
(13)		Yes	(12) No	7/2005	-	other miscellane	ous)	0. 0. 2. /		Repair	re			
Basement		1			Pine In	sulation		0.1.5	53		+			
				_	1 ipe iii	Sulation		8 LF						
									П	ПГ				
Name of Registered Waste Hauler NJDEP Waste						Cubic Yards of	Name of Registe	ered Landfill			7-			
Newark Carting			F	lauler IE NJ-56		Waste	IESI							
City, State				140-00	·	100 Disposal Date	City, State							
Newark, NJ						03/13 /19	Bethlehem,	PA						
Completed By (Print or Typ	oe) Ti	tle	74110 - 77			Signature,		Da	to 1	1				
Ruben Diaz		Project	Man	ager			4	Da	2/1	11/1				
SB-41						1			J.	1114				