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

Page 1 of 3

Check # 1467

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Date of Notification (1) 3-4-2013		P	lainfiel	d Public	Scho	ol	··// `~&	PA						_
Agencies Notified Type No		St 9	reet Add 20 Par	ress k Ave	t.	de L	7021	3 p ₁₄ 2:	်ဌ					
DOL Am	ended endment#1			, Zip Code d, NJ 07			CN3	WG RO	7.					
X DOH jus	ergency (including tification) ncellation	1000	ame of C						T-1-	-b Al				
			FACILI	TY INFOR	MATI	ON	Tuna of	Facility (4)						-
Name of Facility Where Abatemer Plainfield High School	t is Taking Place (3)						X So	hool (K-12) (Othe	r than K-1	2)			
Street Address 950 Park Avenue							Ot etc	her (i.e. pri	vate &	commerc	ial buildi	ngs,	nome	s,
City (5) Plainfield							Square 12500	Feet	# of 3	Floors	40 40	lg. A	je	
County (6)			ounty Co	ode (7) SE ONLY)			Current	t Use (Prior	r if beir	ng demolis	hed)		70	
Union Name of Monitoring Firm Hired by TTI Environmental Inc	Building Owner (8)		ASCM 00003				of Abate Group,	ment Cont	ractor	(9)				
Street Address 1253 North Church St							Address Hambu	irg Turnp	ike					
City, State, Zip Code						City, S	state, Zip	Code						
Moorestown, NJ 08057		Section 11 and 12				1	loomingdale, NJ 07403							
Project Manager for Monitoring F Mary Ellen Leotta		8		0-8800		(201	lephone No. 01)710-9725 The of OSHA Monitor License No. 01084							
Start Date (10) 3-4-2013	Schedule 8-4-201		pletion D	oate (11)		GLO	aroup,	Inc ,			<i>11</i> 12 12 12 12 12 12 12 12 12 12 12 12 12	_		
Occupancy Status During Abater	nent (Check Only On	e)					Address	s urg Turnp	nike					
Facility Closed/Vacated Dur Abatement Performed Outs	ing Entire Period of A ide of Normal Facility	batem Hours	ent			City, S	State, Zip	Code						×
Other – Describe:						Bloc	minga	ale, NJ 0	7403					
Scope of Work (Check All That A ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	× R	enovat emoliti					- Mini	Containme i-Enclosure vebag Prod i-Exempted	e edure				e	
							INOI	I-Exemples	4 (/ GI	471011711		Abat	emen	t
Location of Asbestos-Containing Materia TO BE ABATED In Facility (13)	I (ACM) Use Ma	Location Internal Social Socia	y ly by nce/	Asbest (i.e.	os Cor therma surfa	escriptio ntaining al systen acing, V miscella	Material ns insula AT, or	(ACM) tion,	. (Amount Specify F or LF)	Removal	Repair	e Encapsulate	Enclosure
	Yes	No X	INIA	Transit	n Tv	ne Tah	le/She	If Tops	2	50 SF	X			1
Phase I:Science Lab		X	-	and the state of t	1000		abinet			50 SF	Х			
Science Lab 250		X	-				e Sink			30 SF	x		1	1
Science Lab 250		X		1				If Tops		00 SF	x		-	\top
Room 252	lor.		JDEP V			ic Yards		Name of		ered Land	fill	1		
Name of Registered Waste Hau GL Group, Inc	ici	Hauler ID No. of Waste TBD				/aste)	Grows							
City, State Bloomingdale, NJ					Disp TBE			Morris		PA	Date			
Completed by Michael B Solakov	itle Signa					Signature 3-4-2013								

EDS12-336

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8-60-7 AND 12:120-7)

20/3/14/P Check # 1467 - 8 Pt.

CONTINUATION SHEET

Page 2 of 3

	T					Abatement Type							
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance /Custodial Staff (12) Yes No N/A			Description of Asbestos-Containing Material (ACM) (i.e. thermal systems, insulation, surfacing, VAT, or other miscellaneous)	Arnount (Specify SF or LF)	R E M O V A L	R E P A I R	ENCAPSUL	ENCLOSURE				
Phase I, Room 252	Yes	Yes No N/A		Transite Type Cabinet Tops	300 SF	X	<u> </u>	-					
	_	X		Transite Type Sinks	30 SF	X							
Room 252 Room 250 A		X		Transite Type Cabinet Tops	90 SF	X							
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		+	-			-	+	1	1				

Completed By: (Print or Type)	Title President	Signature Elem Stolla 3-4-2013
Elena Solakov		

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8-60-7 AND 12:120-7)

CONTINUATION SHEET

Page 3 of 3 Ch # 1467

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Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma //	ation No Used Solely b aintenar Custodi Staff (12	y nce al	Description of Asbestos-Containing Material (ACM) (i.e. thermal systems, insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	R E M O V A	R E P A	ENCAPSU.	e E NO L O S U R I
DILII D 054 052 0524	Yes	No	N/A		-	L	R	L	E
PH II, Rooms 251,253,253A	+	X	-	Transite Type Cabinet Tops	750 SF	X	1		
Room 251		\(\)	-	Transite Type Table Tops Black	750 SF	_	†		
Room 251	 -	X	_	Transite Type Panels	8 SF	_	+		
Room 251	-		_	Transite Type Cabinet Tops	425 SF		+		
Room 253	+	X		Transite Type Cabinet Tops Transite Type Panels	4 SF	X			
Room 253	+-	-		Transite Type Panels Transite Type Table Tops Black	750 SF	X	+		
Room 253	-	X	_		96 SF	X	+		
Room 253	-	Λ	_	Black Boards	90 31		+		
PH III, Rooms 266,266A,264	-	X		Disab Danada	120SF	X	+		
Room 266	-			Black Boards	300 SF	X	+		
Room 266	-	X		Transite Type Table Tops Black	-	_	+		
Room 266	-	X		Transite Type Panels	8 SF 750 SF	X	+		
Room 266		X		Transite Type Cabinet Tops		X	+		
Room 266 A	-	X		Transite Type Cabinet Tops	350 SF	X	+	-	
Room 264		X		Transite Type Cabinet Tops	300 SF		+	-	
Room 264		X		Transite Type Panels	4 SF	X	+	-	
Room 264		X		Transite Type Table Tops Black	400 SF	X	-	-	
Room 264		X		Transit Type Fume Hoods	32 SF	X	+		
Room 264	_	X		Black Boards	96 SF	X	+	_	
PH IV, Room 258,258A,256B						77	-	-	
Room 258		X		Black Boards	96 SF	X	-		
Room 258		X		Transite Type Table Tops Black	288 SF	X	-	_	
Room 258		X		Transite Type Panels	4 SF	X			
Room 258		X		Transite Type Cabinet Tops	408 SF	X			
Room 256 B		X		Black Boards	144 SF	X			
Room 256 B	1	X		Transite Type Panels	4 SF	X	-	_	
Room 256 B		X		Transite Type Cabinet Tops	50 SF	X			
PH V, Room 260,260A,262							-		
Room 262		X		Transite Type Fume Hoods	128LF	X	-	-	
Room 262		X		Transite Type Table Tops Black	288 SF	X			
Room 262	T	X		Transite Type Panels	88 SF	X	-		
Room 262		X		Transite Type Cabinet Tops	384 SF	X	-		
Room 262	1	X		Black Boards	192 SF	X			

Completed By: (Print or Type)	Title	Signature	Date
	President	Elem Solution	3/4/2013
Elena Solakov	1 Tesident		

EDS12-336

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

Page 1 of 2

Check # 1460

Date of Notification (1) 3-1-2013		Name of Building Owner/Operator (2) Plainfield Public School Street Address													
Agencies Notified Type Notificatio	n		Street A	ddress ark Ave			EZ	1000	₩.	îş					
DEP Amended Amendmen		_ [te, Zip Co eld, NJ ()		140/3	ig wol			11			
□ DOH □ DCA □ Emergency justification □ Cancellation			Name of Harold	Contact Gee			Telephone Number								
Name of Facility Where Abatement is Tak	ing Place (3)	FACI	LITY INFO	RMAT	TION	Type of Fac	cility (4)							
Plainfield High School						School (K-12) Subchapter 8 (Other than K-12)									
Street Address 950 Park Avenue			*! ***********************************				Other etc.)	& commercial buildings,				98,			
City (5) Plainfield				272. n			Square Feet # of Floors Bldg. Ag 125000 3 40+				ge				
County (6) Union			County (Code (7) USE ONLY)		Current Use (Prior if being demolished)									
Name of Monitoring Firm Hired by Buildin TTI Environmental Inc	g Owner (8)	= 20	ASCN 0000		1		of Abatemen roup, Inc	t Contracto	or (9)	01		y: 27			
Street Address 1253 North Church St						Street A	Address lamburg	Turnpike	3 3 30 <u>1</u>						
City, State, Zip Code Moorestown, NJ 08057			7.	= 1			City, State, Zip Code Bloomingdale, NJ 07403								
Project Manager for Monitoring Firm Mary Ellen Leotta			Telephor 856-84	ne No. 10-8800		Telepho (201)	one No. 710-9725		License 01084						
Start Date (10) 3-4-2013	Schedule 7-4-20		mpletion	Date (11)			of OSHA Mo roup, Inc	nitor							
Occupancy Status During Abatement (Ch	eck Only Or	ne)				Street A									
Facility Closed/Vacated During Entire	e Period of	Abater	ment				lamburg								
Abatement Performed Outside of No Other – Describe:	rmai Facility	Hour	S	19.5	_		ningdale,		3						
Scope of Work (Check All That Apply)	ground .														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Section 1	Renova Demoli				×	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure								
		Locat		10F W					-		0.04	Abate	ement pe	ŧ	
Location of		Norma		Anhan		escription	of aterial (ACM	.	Amount	H					
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Cus	intena todial (12)	Staff?		therm: surf		insulation, , or		(Specify SF or LF)		Removal	Repair	Encapsulate	Enclosure	
0.:10.00	Yes	No	N/A	Trongi	to Tu	oo Toblo	/Shelf To	20 5	250 SF	-	Σ.				
Science Lab 250 Science Lab 250		X					inet Tops		350 SF		ζ				
Science Lab 250		X			7	ite Type			30 SF	-	ζ				
		X				• • • • • • • • • • • • • • • • • • • •	/Shelf To		100 SF	-	ζ.				
Room 252 Name of Registered Waste Hauler			NJDEP W			c Yards		ne of Regis	STATE OF THE STATE	June 5				-	
GL Group, Inc		1	Hauler ID 033034	ID No. of Waste Grows											
City, State Bloomingdale, NJ	to exemp		Disposal Da TBD												
Completed by Michael B Solakov						Signature	MIN	111		Date 3-1-	20	2013			

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8-60-7 AND 12:120-7)

CONTINUATION SHEET

EDS12-336	4			State of New Jersey FICATION OF ASBESTOS ABATEM Suant to NJAC 8-60-7 AND 12:120 CONTINUATION SHEET)-7) Ch	eck # 1			20 _{13/11}	PA 2.6.
	T					<u> </u>	Abaten	nent Typ	e 700	્ર ''ટ્ર
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma Ma	cation N Used Solely b aintena (Custodi Staff (12	by ince	Description of Asbestos-Containing Material (ACM) (i.e. thermal systems, insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	R E M O V	R E P A	E N C A P S U	E N C L O S U R	AG POL
	Yes		N/A			î	R	L	E	
Room 252		X		Transite Type Cabinet Tops	300 SF	X				
Room 252 Room 250 A		X		Transite Type Sinks	30 SF	X				
Noon 2307		X		Transite Type Cabinet Tops	90 SF	X				
	3									

Completed By: (Print or Type)	Title		Date
Elena Solakov	President	Cleru Salla	3-1-2013

Nocheck

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

Agencies Notified Type Notification Street Address	Date of Notification (1)		-	Name	of Buildir	ng Owner/Operator (2)	20.	1 -			
		13						VUI3 MAR	* /		•	
		cation		Stree	t Address	The state of the s		e3	8 0.	en e	. Progget	
				650	1 Legac	y Drive		**************************************	M	2.		
	. BENERAL ENGINEERING TO BE A STATE OF THE S			City,	State, Zip	Code		- 1 (//)	F.,	~ (9	
Name of Facility Where Abatement is Taking Place (3)	-							EN	1947			
Cancellation			ng					Telephone Nun	her)	TOY		
Name of Facility Where Abatement is Taking Place (3) Wayne Town Center Street Address Steet Address Stock Address		100 mm		100000000000000000000000000000000000000				relephone Ivan	IDEK	**		
Name of Facility (Where Abstement is Taking Place (3) School (C4.2) Scho			1									
School (K-12)	Name of Facility Where Abatement is	Taking Place	ce (3)	IA	CILITI	NORMATION	Type of Facility	(4)				
Subchapter 8 (Obter than K-12)	323		- (-/									
County (6)	Street Address			-			☐ Subchapter	8 (Other than K-1)				
County (6)	260 Wayne Town Center								ercial bu	ilding	IS,	
County (6)									DI	da A	~~	
County (6) Passalc Name of Monitoring Firm Hired by Building Owner (8) Hillmann Consulting LLC Street Address 15treet Address 15treet Address 17 Foster Road City, State, Zip Code Union NJ 97083 Project Manager for Monitoring Firm Tom Rublino 17 In Rublino 18 Scheduled Completion Date (11) 2							97		1		ge	
Passaic Name of Monitoring Firm Hired by Building Owner (8) Name of Monitoring Firm Hored by Building Owner (8) Name of Monitoring Firm Consulting LLC Street Address 1600 Route 22 East 1600 Route 22 East 17 Foster Road City, State, Zip Code Union NJ 07083 Staten Island Project Manager for Monitoring Firm Telephone No. 17 Restoration Inc Street Address 47 Foster Road City, State, Zip Code Staten Island Project Manager for Monitoring Firm Telephone No. 17 Restoration No. 18 Project Manager for Monitoring Firm Telephone No. 2				Cour	ata Cada (TVOTATE LIGE ONLY				10		
Name of Monitoring Firm Hired by Building Owner (8) ASCM No. 62252 JN Restoration Inc Street Address 1600 Route 22 East 47 Foster Road City, State, Zip Code Union NJ 07083 Project Manager for Monitoring Firm Tom Rubino Start Date (10) 2 / 11 / 13 4 / 11 / 13 Ascentify Closed/Vacated During Entire Period of Abatement Type (11) Scheduled Completion Date (11) Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement Performed Outside Normally Used Solely by Maintenance/ Custodial Staff? Asbestos-Containing Material (ACM) I Description of Abbettern Performed Outside Staff? Asbestos-Containing Material (ACM) I Description of Abatement Type Maintenance/ Custodial Staff? Performed Outside Normally Used Solely by Maintenance/ Custodial Staff? Performed Outside Normally Used Solely by Maintenance/ Custodial Staff? Performed Outside Normally Used Solely by Maintenance/ Custodial Staff? Performed Outside Normally Used Solely by Maintenance/ Custodial Staff? Performed Outside Normally Used Solely by Maintenance/ Custodial Staff? Performed Outside Normally Used Solely by Maintenance/ Custodial Staff? Performed Outside Normally Used Solely by Maintenance/ Custodial Staff? Performed Outside Normally Used Solely by Maintenance/ Custodial Staff? Performed Outside Normally Used Solely by Maintenance/ (Ice, thermal systems insulation, Specify Solely Sol	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			Coul	ity Code (1)(STATE USE UNLY)	Current Use (P	rior it being demoi	isned)			
Hillmann Consulting LLC Street Address Street Address 14		ildina O	- (0)	ACCL		IN	10.					
Street Address 1600 Route 22 East 1600 Route 22 East 17 Foster Road 18 Foster Road 19 Foster Road 19 Foster Road 19 Foster Road 10 Foster Roa	F	liding Owne	(8)			the second secon)				
1600 Route 22 East				622	52		ion Inc	<u> </u>		0.		
City, State, Zip Code Union NJ 07083 Project Manager for Monitoring Firm Tom Rubino Start Date (10) 2	Comments and the second								- 6			
Union NJ 07083 Staten Island						And the second second second						
Project Manager for Monitoring Firm Telephone No. Tom Rubino Start Date (10) 2 / 11 / 13						City, State, Zip Co	ode	/!				
Tom Rubino						Staten Island						
Start Date (10) 2			Tel	ephone	No.	Telephone No.	12	License No.				3400
2			9	08-956	-1233	718-605-6256		00774				
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☑ Abatement Performed Outside of Normal Facility Hours - Describe ☐ Time of Abatement ☐ Scope of Work (Check all that apply) ☐ Sope of Work (Check all that apply) ☐ Part of Sope of Work (Check all that apply) ☐ Sope of Work (Check all that apply) ☐ Part of Sope of Work (Check all that apply) ☐ Part of Sope of Work (Check all that apply) ☐ Sop of		Scheduled	Comple	etion Da	ite (11)	Name of OSHA M	lonitor				-	
Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement:AMPM/10:00PM-6:00AMAM City, State, Zip Code LIC, NY 11101	_2_/_11_/_13_	_4_	/ _1	1 /	13_	Testor Tech						
Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement:AMPIM/10:00PM-5:00AMAM City, State, Zip Code LiC, NY 11101	Occupancy Status During Abatement	(Check only	one)			Street Address						-
Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement:AMPIM/10:00PM-5:00AMAM City, State, Zip Code LiC, NY 11101				ement		10 59 Jackso	n Avenue					
Scope of Work (Check all that apply)		Normal Facil	ity Hou	ırs - Des								
Scope of Work (Check all that apply) □ ≥3 sf or ≥3 lf □ Demolition □ Demolition □ Glovebag Procedure □ Non-Exempted (*) and Non-Friable Procedure □ Name of Registered (*) Asbestos Containing Material (ACM) □ Name of Registered Non-Exempted (*) and Non-Exempte	Time of Abatement:AM	PM/ <u>10</u> :	<u>00</u> PM	6:00A	<u>M</u> AM							
□ ≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf □ Demolition □ Demolition □ Demolition □ Demolition □ Stocation □ Mini-Enclosure □ Mini-Enclosure □ Mini-Enclosure □ Mini-Enclosure □ Mini-Enclosure □ Morebag Procedure □ Non-Exempted (*) and Non-Friable Procedure □ Non-Exempted (*) and Non-Friable Procedure □ Non-Exempted (*) and Non-Friable Procedure □ Stocation Normally □ Used Solely by Maintenance/ Custodial Staff? □ (12) □ Yes No N/A □ VAT/MASTIC □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Scope of Work (Check all that apply)					2.0, 111 1110						
⊇3 st or ≥3 if □ Renovation □ Mini-Enclosure □ Glovebag Procedure □ Non-Exempted (*) and Non-Friable Procedure □ Non-Exempted (*) and Non-Exempted (*) a						☐ Full Cont	ainment with Ne	gative Pressure				
Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) 2nd Level Home Street Dept. 2nd Level Marchese Dept. 1st Location Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A 2nd Level Marchese Dept. 1st Location Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A 2nd Level Home Street Dept. 2nd Level Marchese Dept. 3755						☐ Mini-Enc	losure	130				
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) 2nd Level Home Street Dept. 1st Level Marchese Dept. Name of Registered Waste Hauler Global Waste Industries, Inc. City, State Hackettstown NJ Completed By (Print or Type) John Tardy Selection Normally Used Solely by Maintenance/Custodial Staff? (12) Yes No N/A VAT/MASTIC Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Amount (Specify SF or LF) Abatement Type Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Amount (Specify SF or LF) Abatement Type Asbestos Containing Material (ACM) (Amount (Specify SF or LF) Abatement Type Asbestos Containing Material (ACM) (Amount (Specify SF or LF) Abatement Type Asbestos Containing Material (ACM) (Amount (Specify SF or LF) Abatement Type Asbestos Containing Material (ACM) (Amount (Specify SF or LF) Abatement Type Asbestos Containing Material (ACM) (Amount (Specify SF or LF) Abatement Type Asbestos Containing Material (ACM) (Amount (Specify SF or LF) Abatement Type Asbestos Containing Material (ACM) (Amount (Specify SF or LF) About Amount (Specify SF or LF) Abatement Type Asbestos Containing Material (ACM) (Amount (Specify SP or LF) Abatement Type Asbestos Containing Material (ACM) (Amount (Specify SP or LF) Abatement Type About Amount (Specify SP or LF) Abatement Type About Amount (Specify Specify Speci	≥ 100 St 01 ≥200 II	П	emoliti	on		☐ Glovebag	p Procedure moted (*) and No	on-Friable Procedu	ITE			
Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) 2nd Level Home Street Dept. 2nd Level Marchese Dept. 1st Level Marchese Dept. Name of Registered Waste Hauler Global Waste Industries, Inc. City, State Hackettstown NJ Completed By (Print or Type) John Tardy Sed Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos-Containing Material (ACM) (i.e			ls Loca	ition	Г		mprod () dilid tit	1		atom	ant T	·/no
City, State Hackettstown NJ Completed By (Print or Type) James of Registered Waste Hauler Hackettstown NJ Completed By (Print or Type) James Completed By (Print or Type) James Completed By (Print or Type) James Completed Manager Completed M	Location of	n				Description o	f	1 2		-		T =
City, State Hackettstown NJ Completed By (Print or Type) James of Registered Waste Hauler Hackettstown NJ Completed By (Print or Type) James Completed By (Print or Type) James Completed By (Print or Type) James Completed Manager Completed M									en	ép	ä	l in
Completed By (Print or Type)					(1.6				100	a-	aps	losi
2 nd Level Home Street Dept.			(12))	3.0			SF OF LF)	<u>m</u>		ula:	ē
1st Level Marchese Dept.		Yes	No	N/A							e	
1st Level Marchese Dept. VAT/MASTIC 850	2 nd Level Home Street Dept.				VAT/M	ASTIC		3755				
Name of Registered Waste Hauler Global Waste Industries, Inc. City, State Hackettstown NJ Completed By (Print or Type) John Tardy Senior Project Manager Cubic Yards of Waste Cubic Yards of Waste Hauler ID No. NJ-22147 Cobsequence Cubic Yards of Waste G.R.O.W.S., Inc. City, State 40 City, State Morrisville,PA Signature Signature Signature Date 3 1 3	1 st Level Marchese Dept.	П			VAT/M	ASTIC		850	_	П	П	
Name of Registered Waste Hauler Global Waste Industries, Inc. City, State Hackettstown NJ Completed By (Print or Type) John Tardy SB-41 NJDEP Waste Hauler ID No. NJ-22147 Cubic Yards of Waste G.R.O.W.S., Inc. Cubic Yards of Waste Hauler ID No. NJ-22147 City, State 4/11/13 Morrisville,PA Signature Senior Project Manager SB-41	•		-	-					_	1		블
Name of Registered Waste Hauler Global Waste Industries, Inc. City, State Hackettstown NJ Completed By (Print or Type) John Tardy SB-41 NJDEP Waste Hauler ID No. NJ-22147 NJDEP Waste Hauler ID No. NJ-22147 Cubic Yards of Waste G.R.O.W.S., Inc. City, State 40 City, State 4/11/13 Morrisville,PA Signature Signature Senior Project Manager				\perp					ᆚᆜ	Ш	Ц	Ш
Global Waste Industries, Inc. Hauler ID No. NJ-22147 City, State Hackettstown NJ Completed By (Print or Type) John Tardy Senior Project Manager Hauler ID No. NJ-22147 Disposal Date 4/11/13 Morrisville,PA Signature Signature Signature Signature Date 3 1 1 3							9 2					
City, State Hackettstown NJ Completed By (Print or Type) John Tardy Senior Project Manager NJ-22147 40 City, State A/11/13 Morrisville,PA Signature	Name of Registered Waste Hauler		- 2				Name of Regis	stered Landfill		-		
City, State Hackettstown NJ Completed By (Print or Type) John Tardy Senior Project Manager Disposal Date 4/11/13 Morrisville,PA Date 3 1 1 3	Global Waste Industries, Inc.					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	G.R.O.W.S	S., Inc.				
Hackettstown NJ Completed By (Print or Type) John Tardy Senior Project Manager Senior Project Manager	City, State			140-22	.14/		City. State					
Completed By (Print or Type) John Tardy Senior Project Manager Signature 3 1 3								ΡΔ	12	i		
John Tardy Senior Project Manager 3113		Titlo	-			0 /	1			-		
SB-41			. Dest	4 . 4 .		Signature		\ D	ate	1/1	7	*
		Senio	Proje	ect Mai	nager	LUC	aich		O	111	2	25
	ASB-41 MAY 11	* Do no	t use t	his form	for ashes	tos licensure exemp	ted activities		7		100	



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

Date of Notification (1)	13				ng Owner/Operator (Corporation Inc.						
Agencies Notified Type Notified ☐ Initial		.*	1	t Address 01 Legac	y Drive						- 10 - 11 ,
☑ DOLWD ☑ Amende		í	City,	State, Zip	Code			-	- Ta		
☑ DHSS Amendn		• 2001.00		ano, TX							
		ing		e of Contac			Telephone Numb	ner	-		_
☐ Cancella				y Thoma	13.40		Telephone reams	, , , , , , , , , , , , , , , , , , ,			
40_			FA	CILITY II	NFORMATION						
Name of Facility Where Abatement is	Taking Pla	ice (3)				Type of Facility	(4)		17	(1)	
Rockaway Town Square	76			1.00		School (K-12					9
Street Address	1 1					☐ Subchapter 8	3 (Other than K-12)) aialha	م مالدان		
305 Mount Hope Avenue					'S ' . '	homes, etc.)	rivate and commer	ciai bu	ıllalıng	js,	
City (5)						Square Feet	# of Floors	BI	dg. A	ne	
Rockaway NJ						150000	2		75	90	
County (6)			Cou	nty Codo (7)(STATE USE ONLY)		ior if being demolis	100			
Morris			Cou	nty Code (nea)			
Name of Monitoring Firm Hired by Bui	lding Own	er (8)	ASCM	No.	Name of Abateme	ent Contractor (9)	The state of		٠.	3	ese yaire
Hillmann Consulting LLC			622	52	JVN Restorat	tion Inc					
Street Address	, Are	51			Street Address				5, 8		
1600 Route 22 East		(n ,			47 Foster Ro	ad					
City, State, Zip Code				-	City, State, Zip Co	ode		-	-		
Union NJ 07083			8		Staten Island						
Project Manager for Monitoring Firm		Te	ephone	No	Telephone No.		License No.	-		-	_
Tom Rubino			08-956	*	718-605-6256		00774				
25 A. W. 2016 A. B. GORDON STOCKS	Scheduled					0	00774				- 1
2 / 12 / 13					Name of OSHA M	ionitor	1				¥.
			2_/		Testor Tech	- FI 14 - H	P DOT		393		
Occupancy Status During Abatement Facility Closed/Vacated During Ent	ire Period	of Abat			Street Address 10 59 Jackso	n Avenue		U= 1/4			
Abatement Performed Outside of N Time of Abatement:AM					City, State, Zip Co						
Scope of Work (Check all that apply)										-	
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf	_	Renova Demolit			☐ Mini-Enc	Procedure	pative Pressure n-Friable Procedur	' A	e TS enje		
	-	Is Loca	ation	T	Z redu Exc	Inpled () and No	TIT Habie I Toccau	_	atem	ont T	ima
Location of	1.5	Norm	ally		Description of	f		-	_		T
Asbestos-Containing Material (ACI		Ised So Mainten			estos Containing Ma	terial (ACM)	Amount	Remova	Repair	Encapsulate	Enclosure
TO BE ABATED IN Facility		ustodia		(i.e	e., thermal systems		(Specify	l S	air	aps	los
(13)		(12			surfacing, VAT other miscellane		SF or LF)	<u> =</u>		ula	ē
	Ye	s No	N/A			/				6	
1 ST Level Home Street Dept.				VAT/M.	ASTIC	L. A. Carre	13200SF				
2 nd Level Joe Fresh Dept				Glue D	ots		180SF	×			
					15						
				1				\vdash_{\Box}		П	П
Name of Registered Waste Hauler			NJDEP	Macto	Cubic Yards of	Name of Regis	torod Landell				
Global Waste Industries, Inc.				D No.	Waste 120	G.R.O.W.S		3		1.	
City, State			110-2	-17/	Disposal Date	City, State					
Newark NJ					4/12/13	Morrisville	.PA				
	Title		***	<u> </u>		h		1	-+		
Completed By (Print or Type) John Tardy	Title Senio	or Proj	ect Ma	nager	Signature	arch	Da	3	71	12)
ASB-41		7.77	hie form		1	JF (). (1	1		

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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

080					MOITA	OF ASE	ew Jersey BESTOS ABATEN 8:60 and 12:120		fre pro		* 44.				
Date of Notification (1) 03/05	5/2013					of Buildir	ng Owner/Operator	(2)	2013 MAR :- 8		1				
Agencies Notified	Type Notifica	ation				t Address Bloomfi	eld Avenue		SACTOR !	PH	2:	<u>်</u> ဝှ			
☐ DEP ☑ DOL	Amended		ng			State, Zip ona, NJ (To have the	& LICENS	IN I	RO				
DOH DCA	justificati Cancellat	ion)		- 1		of Conta			Telephone Num	aer ·					
		32			FAC	CILITY IN	FORMATION								
Name of Facility Wher Carpenter Shop (B Street Address 125 Fairview Aver	uilding # 21)	Taking Plac	ce (3	3)					12) r 8 (Other than K-1 2 private & commercia		dings	,			
City (5) Cedar Grove								Square Feet 5000	# of Floors	2 1	ldg. /	\ge			
County (6) Essex						nty Code ONLY)	(7) (STATE Current Use (Prior if being demolished) Carpenter Shop								
Name of Monitoring Fig. (8) J & S Environn	A DESCRIPTION OF THE PROPERTY		r	1360	SCM I/A	No.	Name of Abatement Contractor (9) DIA General Construction, Inc.								
Street Address				<u>ا</u>	-	412	Street Address	ss							
2333 Rt 22 West City, State, Zip Code	2-70-10-1						1360 Clifton, Avenue, PMB Suite 218 City, State, Zip Code								
Union, NJ 07083 Project Manager for M	anitasing Firm		_	Tolon	hone	No	Clitton, NJ C	Clifton, NJ 07012 Telephone No. License No.							
Sherry Gelsomino						0073	973-389-008	889-0089 00693							
Start Date (10)		Scheduled			on Da	te (11)	Name of OSHA N		n Inc			153			
03/18/2013 Occupancy Status Dur	ring Abatement (03/29/20 (Check onl	_				Street Address	Constructio	11, 1116.	10.00					
Facility Closed/Vac					nent			Avenue, PN	MB Suite 218						
Abatement Perform Other - Describe:			lity H	Hours		jit	City, State, Zip C								
Scope of Work (Check	all that apply)			ovatio moliti			Mini-End Goveba	closure ig Procedure	legative Pressure	dure					
			Norn	cation							Abate Ty	ment pe			
Locatio Asbestos-Containing <u>TO BE AB</u> IN Faci (13)	Material (ACM) <u>ATED</u> lity	Ma	inte Cust sta	iolely enanc todial aff? 2)			Description of tos Containing Mat , thermal systems in surfacing, VAT, other miscellaneo	erial (ACM) nsulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure		
First floor		Yes	+	No	N/A	Dino/Clb	ow Insulation (Wrap	& Cut)	546 LF	x	-	-			
Basement		-	+	-	X	-	ow Insulation (Wrap		380 LF	X		-			
Basement			+	_	X	The second second	" Floor tiles/Ma	CHICAGO CONTRACTOR CON	900 SF	X	-				
			+	T	ve i			- 1 - 1							
Name of Registered V Service Transport					DEP Vuler ID	Waste No.	Cubic Yards of Waste 40	Name of Reg Minerva I	gistered Landfill Landfill			25			
City, State New Castle, DE				1=	,	in a se	Disposal Date 03/29/2013	City, State Waynesou	arg, OH 44688						
Completed By Krutarth Jagad President						- ta	Signature		Date 03/05/	2013					
um in vagau	<u> </u>	11031001				and the target	<u> </u>	2/					-		

Ch# 1395

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

Date of Notification (Name of Building Owner / Operator (2)													
0	2/22/2013			Serv	/icema	aster	of Cherry Hill		& LICEN	Dair.			į,		
Agencies Notified T	ype Notific	ation	1	Stree	t Addr	ess			THENS	ING	UĮ.				
☐ DEP ☐ DOL	☐ Initia	l nded		100000000000000000000000000000000000000	State 8		Code	trans			4	-	2		
□ DOH □ DCA		rgency cellation		Nam	e of Co in Alle	ontact				Tel	lenho	one N	lumb	er	
					CILIT	Y INI	ORMATION				2000				
Name of Facility Whe Residence	ere Abatem	ent is Taking F	Place	(3)			Type of Faci	(K-12)		12	44				
Street Address				8 8 8	×			Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, h							
311 Rancocas Blv	a							uare Feet # of Floors Bldg. Age							
City (5)		County (6)	IC	ounty	Code ((7)		1500 # of Floors Bldg. Age							
MtLaurel		Burlington		Julity	oouc ((1)		(Prior if being	demolished)			30	-		
Mittaulei		Burnington					Residentia		demonstica		s e l'				
Name of Monitoring F	irm Hired b	by Building Ow	ner (8	3)	ASC	CM No	. Name of Aba	atement Contri ironmental S							
Street Address		24			Street Addre	SS									
City, State & Zip Cod	City, State & Zip Code						City, State & Hamilton, I	Zip Code							
Project Manager for M	Monitoring F	irm	Tele	phone	e Numb	per	Telephone Number License Number 01091								
Scheduled Start Date 2/26/2013		Scheduled Co 2/27/2013	mplet	ion Da	ate (11))	Name of OSI EMSL Anal				71		_5	78	
Occupancy Status Du	ring Abate				otomo	n.i	Street Addre	SS	1 10					77	
		utside of Norm					City, State &	AND AND PROPERTY OF THE PARTY O							
Describe:							Westmont,	STATE OF THE STATE							
Facility Occup															
Scope of Work (Chec	k all that a	oply)							ontainment w	rith Noo	otivo	Droc			
☐ ≥3 sf or ≥3 lf			\boxtimes	Re	novatio	on			nclosure	illi iveg	auve	1168	Suic		
≥160 sf ≥260	If		П		molitio			Glove	Bag Procedu	ıres					
	*		-					⊠ Non-E	xempted and	Non-F	riable	e Pro	cedu	ıre	
Loc	ation of		Is	Loca	tion		Description		Amou			ateme			
	s-Containin	g			Used		Asbestos-Con	ntaining	(Spec	ify	-			Ť.	
	rial (ACM)			Solely	by nce or		Material (A		SF or I	_F)	70	_	Encapsulate	m m	
	E ABATED Facility				Staff?		(i.e., thermal s insulation, surface				Removal	Repair	aps	Enclsoure	
	(13)		1 1 1	(12)		- 1	or other miscell				val	빰	ula	Dure	
		40.0	Yes		N/A		1000	4 - 1 3400		24 0 1	-	- 3	(D)		
First Floor						. 1	VAT		500sf						
Name of Registered \	Waste Haul	er			JDEP V auler ID		Cubic Yards Name of Registered Landfill of Waste								
ALPHA ENVIRON	MENTAL			00	003333	30	2	Grows Lar	ndfill				4.1	+ .	
City, State				D			Disposal Date	City, State			- K				
Trenton, NJ				2/		2/28/2013 Morrisville, PA									
Completed By (Print or Type)						Signature		4	T C	Date					
Rod Richardson				Pi	roject	_	Rod Richardson 2/22/2013								

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7)

Date of Notification (1)			(Pursi	uant	CO NOAC	3.00	and II. II.	214 17						
Agencies Notification (X) Initial (X) Init	Date of Notification	n (1)					Owner/Operator	(2)	CELLE	771				
Clay	3-5-2013			Mı	r. Kea	ar			1077					Mileson
Clay	Agencies Notified	Type Notifica	ation			되고 :		2013 MAI	7-8 PM	2.50	,			
[I DABE CLICK CLI	[]EPA	[X]Initial		16	6 Cros	s P	1.		- 111	c. 6.3	,			
Rabe Residence Number Record Re	[IDEP	Notific	ation	City	, State,	Zip	Code	45865	LISTORE	LOOL		- 100		
Name of Facility Where Abstement is Taking Place (3) FACILITY INFORMATION	December 2000	. H. P 12 - 12 P. N. G.		G.	len Ri	dge	,NJ,07028	& L	ICENSING	INUL				
County C	5 5 5	Notific	ation	Name	of Cont	act				3	- 3			1
Same as above PACILITY INFORMATION		[]EMERGENC	Y											
Name of Facility Where Abatement is Taking Place (3) Same as above Street Addres Street Addres Street Addres County (6) County (6) County Code (7) (STATE USE ONLY) Street Address City (5 County (6) County Code (7) (STATE USE ONLY) Courrent Use (Prior if being demolished) City (5 City, State, Zip Code Montclair, NJ 07042 Felephone Number N/A Cocupany Status During Abatement (Check only one) (X)Pacility Closed/Vacated During Intire Period of Abatement ()Abatement Ferformed Outside of Normal Facility Rours - Describe: Cofficous Descripts () () () () () () () () () () () () ()	[]DCA	[]Cancella	tion								-			
Same as above Street Addres Street Addres Street Addres Street Addres City (5 County (6) County (6) County Code (7) Syquare Feet 6 or Ploors Biggid, Age 1400 2 1925 City (5 County (6) County Code (7) Syquare Feet 6 or Ploors Biggid, Age 1400 2 1925 Current Use (Prior if being demolished) Name of Monitoring Firm hired by Building asCM No. Name of Abatement Contractor (9) AZTECH MANNAGEMENT, Inc. Street Address 86 Christopher St. City, State, Zip Code Montclair, NJ 07042 Feoject Manager for Monitoring Firm Telephone Number N/A Scheduled Start Date (10) 3-15-2013 3-15-2013 3-15-2013 3-15-2013 3-15-2013 Month Day Year Occupancy Status During Abatement (Check only one) (X)Pacific County Rative Period of Abatement Feriod of Abatement Feriod of Abatement Feriod Cutside of Normal Facility Rours - Describe: Offfloors Beacripts () other - Describe: Offfloors Beacripts Scope of Work (Check all that apply) (X)23 sf or 23 if (X)Renovation (100 monally Abateman Period of Abateman Period Cutside of Normal Facility (100 monally Normally Solely In Facility (100 monally Staff (12) monally Staff (12) monally Staff (12) monally Staff (13) Basement X PIPE INSULATION 110 LF X Name of Registered Waste Hauler Name of Registered Wast		1 Journey		Ц	FACII	ITY I	INFORMATION			378 V				
Street Addres Street Addres	Name of Facility Whe	ere Abatement	is Tak	ing P	lace (3)	-	- 1	Type of Facil	ity (4)				11/02/	
City (5 County (6) County (7) (STATE USE ONLY) Square Feet S of Floors Sldg Age 1400 2 1925								[]School	(K-12)					
cial buildings, homes, etc.) County (6)														
City (5 County (6) ESSEX County Code (7) 1400 2 1925 1925 1926	Street Addres													
Country (5) Country (6) ESSEX Country (Code (7) (STATE USE ONLY) Current Use (Prior if being demolished) Current Use (Prior if being demolished) Current Use (Prior if being demolished) Name of Monitoring Firm hired by Building ascM No. Name of Monitoring Firm hired by Building ascM No. Name of Monitoring Firm hired by Building ascM No. Name of Monitoring Firm hired by Building ascM No. Name of Monitoring Firm hired by Building ascM No. Name of Monitoring Firm hired by Building ascM No. Name of Monitoring Firm hired by Building ascM No. Street Address 86 Christopher St. City, State, Zip Code Monitoring No. Name of OSHA Monitor No. NAME of Moni														-
Name of Monitoring Firm hired by Building ASCM No. Name of Abatement Contractor (9) AZTECH MANAGEMENT, Inc. Name of Monitoring Firm hired by Building ASCM No. Name of Abatement Contractor (9) AZTECH MANAGEMENT, Inc. N/A Street Address 86 Christopher St. City, State, Zip Code Montclair, NJ 07042 Project Manager for Monitoring Firm Pelephone Number N/A (1973) 744-8800 No. Scheduled Start Date (10) Sched. Completion Date (11) 3-15-2013 3-18-2013 Month Day Year Month Day Year Month Day Year N/A Cocupancy Status During Abatement (Check only one) [X] Facility Closed/Vacated During Entire Period of Abatement Jahatement Performed Outside of Normal Facility Bours - Describe: Softher Occupancy Descripts John - Describe: Softher Occupancy Descripts [Jeull Containment with Negative Pressure N/A Normally Used Normally U	City (5		Couent	y (6)		Cou	nty Code (7)		The state of the s					
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AZTECH MANAGEMENT, Inc.	Name of Monitoring	Firm hired by	Buildi	ng A	SCM No.	_	Name of Abatem	ment Contracto	r (9)	11.7		-		
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City, State, Zip Code City, State, Zip Code			-				Street Address	3		1.401			- 0	100
City, State, Zip Code City, State, Zip Code Montclair, NJ 07042	Street Address						86 Chris	topher St						
Montclair, NJ 07042	City Chata Rim Co.	do								1 4				
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Scope of Work (Check all that apply) Scope of Work (Check all that apply) Location of Asbestos-Containing Material (ACM) (Specify Material (ACM)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			I/A			(973)744	-8800		003	37:	1		
Scope of Work (Check all that apply) Scope of Work (Check all that apply) Location of Asbestos-Containing Material (ACM) (Specify Material (ACM) (State)	Scheduled Start Date	e (10) Sche	ed. Com	pleti	on Date	(11)	Name of OSHA N	Monitor				+		
Occupancy Status During Abatement (Check only one) [X] Facility Closed/Vacated During Entire Period of Abatement [] Abatement Performed Outside of Normal Facility Hours - Describe: «OffHours Descript» Scope of Work (Check all that apply) [X] Saf or \$\geq 3\$ lf [X] Renovation [1] Stocation of Asbestos-Containing Material (ACM) Solely In Facility (13) TO BE ABATED tenance/ Custofial Staff (12) Yes No N/A Basement X PIPE INSULATION Name of Registered Waste Hauler AZTECH MANAGEMENT, INC. River Address Street Address City, State, Zip Code City, State City, State City, State		Fig. 16. Action of the Contraction of the Contracti					N/A							
[X]Facility Closed/Vacated During Entire Period of Abatement []Abatement Performed Outside of Normal Facility Hours - Descripts: «OffRours Descript» Scope of Work (Check all that apply) [X] Saf or >3 lf	Month Day Y										_		100	
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Scope of Work (Check all that apply) [X] So sf or >3 lf	[]Abatement Pe	erformed Outsi	de of N	Norma.	l Facilit	-Y	City, State, 2	Zip Code		- 1		- #		
[X] >3 sf or >3 lf [X] Renovation [I] >160 sf or >260 lf [I] Demolition [X] Glovebag Procedure [I] Non-Friable Procedure [Hours - Desc []other - Desc	cribe: «OffHour cribe: «Other C	s Desci	ript» cy Des	script»									
[X] >3 sf or >3 lf [X] Renovation [I] >160 sf or >260 lf [I] Demolition [X] Glovebag Procedure [I] Non-Friable Procedure [Scope of Work (Chec	k all that ap	ply)				1				7			
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Asbestos-Containing Material (ACM) Material (ACM) TO BE ABATED In Facility (13) Basement Normally Used Solely By Maintenance/ Custodial Staff (12) Yes No N/A PIPE INSULATION Name of Registered Waste Hauler AZTECH MANAGEMENT, INC. Normally Asbestos-Containing Material (ACM) (Specify M P A S C C Specify M P A S C C Specify M P A C C Specify M P A C C Specify M P A C C C Specify M P A C C C Spec	Tombio	n of					Descriptio	n of		F	ьа	ceme		YP
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TO BE ARATED In Facility (13) Staff (12) Yes No N/A Name of Registered Waste Hauler AZTECH MANAGEMENT, INC. Itenance/Custodial surfacing, VAT, or other miscellaneous) Name of Registered Waste Hauler AZTECH MANAGEMENT, INC. Itenance/Custodial insulation, surfacing, VAT, or other miscellaneous) Name of Registered Waste Hauler ID No. Itenance/Custodial insulation, surfacing, VAT, or other miscellaneous) Name of Registered Waste Hauler ID No. Itenance/Custodial insulation, surfacing, VAT, or other miscellaneous) Name of Registered Waste Hauler ID No. Itenance/Custodial insulation, surfacing, VAT, or other miscellaneous) Name of Registered Waste Hauler ID No. Itenance/Custodial insulation, surfacing, VAT, or other miscellaneous) Name of Registered Waste Hauler ID No. Itenance/Custodial insulation, surfacing, VAT, or other miscellaneous) A S A I U U I I I I U I I I I U I I I I I I				Sol	ely	. 12			The state of the s	У	M	E	A	C
Custodial Staff (12) or other miscellaneous) R				tena	nce/							A		S
Basement Yes No N/A						1n		200 DE	III.				U	UR
Name of Registered Waste Hauler AZTECH MANAGEMENT, INC. Name of Registered Waste Hauler ID No. 17040 Disposal Date City, State	(13)													E
AZTECH MANAGEMENT, INC. Hauler ID No. of Waste 1.5 G.R.O.W.S. City, State Disposal Date City, State	Basement				X	PI	PE INSULAT	ION	110 LE	7 2				
AZTECH MANAGEMENT, INC. Hauler ID No. of Waste 1.5 G.R.O.W.S. City, State Disposal Date City, State						Set								
AZTECH MANAGEMENT, INC. Hauler ID No. of Waste 1.5 G.R.O.W.S. City, State Disposal Date City, State											di.			
AZTECH MANAGEMENT, INC. Hauler ID No. of Waste 1.5 G.R.O.W.S. City, State Disposal Date City, State	Name of Registered	Waste Hauler		NJDEP	Waste	Cu	bic Yards	Name of Regi	stered Lan	dfill				1
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Montclair, NJ 07042 3-19-2013 Morrisville, PA 19067		3 - 3 - 1		1.00										55
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Completed By (Print or Type) Title Signature Date	Completed By (Print	or Type) Ti	tle		1.311.1		Signature		1	Dat	ce	4911	1 (14.4)	111
Constantine Vivian President / Jennicultur 3-5-2013			resid	lent			1 ten	Manlle,	Hirin	3-	5-2	013	20	1

State of New Jersey - Notification of Asbestos Abatement (Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

AC Project # 060-13 ate of Notification (1) March 4, 201	3			Name of Building Owner/Opera RUTGERS, THE STATE	UNIVER	SITY	F N	<u> </u>	* p ' s	,		
gencies Notified ☑ EPA ☑ DCA ☑ DOL	Notification Initial Amende	Notification d Notification ency (inc	ation	Street Address ENVIRONMENTAL HEA 27 ROAD 1, BLDG 4086 City, State, Zip Code PISCATAWAY, NJ 0885	, LIVING:	STON	ANI	PUS	- Co			
☑ DEP- No Longer REQUIRED ☑ DOH	justific Cance			Name of Contact MICHAEL SMITH, ENV. HEALTH & SAFETY	Te	elephone	Numb	er O				
	1		FACILITY IN	FORMATION								
lame of Facility Where Abatement is 1812 COOPER STREET	Taking Place (3)			Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (other than K	-12)							
Street Address CAMPUS				Other (i.e. private & commer Sq. Feet: N/A # of F	cial buildings loors: 3 E	s, homes, Bldg. Age	etc.) <u>e:</u> 10	00+ yea	ars			
City (5) County CAMDEN C	(6) AMDEN	County C (State Us		Current Use (prior if being den	nolished):	ACADEM	IIC	9 -				
Name of Monitoring Firm Hired by Bld	g. Owner (8)	ASCM N 0098	<u>o.</u>	Name of Contractor (9) GREENWOOD ABATEM	ENT CON	ISULTA	NTS	, INC.				
			Street Address				. C. W.		1			
Street Address 3 TERRI LANE	.l.		268 MAIN STREET									
City, State, Zip Code			City State, ZipCode BUTLER, NJ 07405									
BURLINGTON, NJ 08016 Project Manager for Monitoring Firm	Telephone	Number		Telephone Number License Number								
BRIAN KEARNY	609-386			973-492-0477 00840								
Scheduled Start Date (10)		Completion	Date (11)	Name of OSHA Monitor								
03/18/13	03/25/13	3		ENVIROVISION, INC.								
Occupancy Status During Abateme	ent (Check only	one)		Street Address				1				
☑ Facility Closed/Vacated During ☐ Abatement Performed Outside of	Entire Period of	Abatemen	t	20-21 WARGARAW RO	AD				-			
Describe Describe Shift Hour		- 5:00 PI	M)	FAIRLAWN, NJ	10.000 K							
Scope of Work (Check all that apply)		10.00			ull Containn		Nega	tive Pres	ssure			
\geq 3 sf or \geq 3 lf \geq 160 sf or \geq 260				- □ G	lini-Enclosu ovebag Pro n-Exempte	cedure	Non E	riable P	rocedu	re		
1 1 3 68 1 59				Asbestos Containing Material	Amount		atem	ent Type				
Location of Asbestos-Containing Material (ACM) in Facility (13)	Is Location Nom Solely by Maint. Staff? (12)	/Custodial	(ACM) (i.e. th	ermal systems insulation, surracing,	(Specify or LF)	SF Re	emove	Repair E	ncap E	nclo		
S TO THE RESERVE OF THE STATE O	YES NO	NA .	TRANSITI	40.05 🕅						LÜ		
Basement MER	X	TSI-pipe i		200					1.			
Basement MER	X	-	BOILER O	ASKETS & SEALS		SF 🗵		1	460			
Basement MER Name of Reg. Waste Hauler		/aste Haule		Cubic Yards of Waste: 20	CY	Name of G.R.O.V	N S	North I	<u>latiil</u> Landfi	11		
See Hauler Below #1 & 2	See Bel							City, Stat				
Hauler #1) Greenwood Abatement NJDEP # 12561 Hauler #2) Horizon Disposal Servi		Disposal Date 100 New Ford Mill Rd. Morrisville, Pa 19067 215-736-1700										
NJ DEP # 22612 Completed by (Print or Type) RAYMOND C. PEDALINO	Title SENIOR	CT	Raymand C. Pedalino March 04, 2013						2			

Nomek

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

Date of Notification (1) 03/04/2013		1.5			ner/Operator INSURANO	CE COMPA	MY OF	AMĚŔ	JOAS AP	^	(4)	<u></u>	
Agencies Notified Type Notification		Si	reet Add	iress OAD STRE	ET FIFTH	FLOOR		¥05	ა _{7/1} .	PH	۲: ن		
□ Initial □ DEP □ Amended Amendment	¥ 1	C	ity, State	, Zip Code	CRSEY 071	02		- 4	(ICENS)	777	· C	Ş	
☐ Emergency (justification)		N	ame of C				٢	Telep	ohone Numb	eń.	UĮ.		
□ Cancellation			FACILI	TY INFOR	MATION								_
Name of Facility Where Abatement is Taking FORMER MAVERICK BUILDING	Place (3)					C Subr	ool (K-12	2) 8 (Other	r than K-12)		8	10	
Street Address 697-705 BROAD STREET		•		+1		Othe etc.)	er (i.e. p	rivate &	commercial		ngs, h		i,
City (5) NEWARK				(4) (4)	+ 1	Square F 51,000		5			3 5		
County (6) ESSEX			County Co	ode (7) SE ONLY)		VACANT	(PRI	OR US	g demolishe E COMMER	CIAL)		g"
Name of Monitoring Firm Hired by Building ENVIRONMENTAL HEALTH INVESTIC	Owner (8)	INC.	ASCM 00104		Name PAL	of Abatem ENVIRON	ent Con MENTA	tractor ((9) VICES				
Street Address 655 WEST SHORE TRAIL					Street	Address 2 QUEEN	IS PLA	ZA SC	OUTH				
City, State, Zip Code SPARTA, NJ 07871					City, S LONG	State, Zip C	ode CITY	, NY	11101	- 5			
Project Manager for Monitoring Firm BILL KERBEL			elephon 973-72	e No. 29-5649		hone No. -349-090	0		License No 00853				
Start Date (10) POSTPONED	Schedule 06/06/2	d Com	pletion D	Date (11)		of OSHAI				Wife	(4)		
Occupancy Status During Abatement (Che						t Address KENNED	BLVI	,	-		1		
□ Facility Closed/Vacated During Entire □ Abatement Performed Outside of Non □ Other – Describe: BUILDING IS V	nal Facility	Hours		FOR	City, BAY	State, Zip C	Code 1 0700)2			***		
Scope of Work (Check All That Apply)		-											
□ ≥3 sf or ≥3 lf ፭ ≥160 sf or ≥260 lf	55.012 1.0243	enova emoliti				Mini-E	nclosur	e cedure	Negative Pr			2	
						☑ Non-E	xempte	ed (*) an	d Non-Friabl	PIO	Abate	ment	t-
Location of Asbestos-Containing Material (ACM)	Use	Locati lormal d Sole intenai	ly ly by	Asbesto	Descriptions Containing hermal system	Material (A	CM)		Amount Specify	R		pe En c	En
TO BE ABATED In Facility (13)		(12)		(1.6.1	surfacing, V other miscell	AT, or			ForLF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A	GDD AM	TACHED AC	M TARLE	FOR	SEE	ATTACHED	х			
SEE ATTACHED ACM TABLE FOR						M TABLE			TABLE	-			
DETAILS				DETAIL:	5				DETAILS		127		
	1 - 1 - 1		-		1			100					-
Name of Registered Waste Hauler		F	NJDEP V Hauler ID	No.	Cubic Yards of Waste	•			tered Landfill				i
ATC/TST City, State	10464		24310/	19551	Disposal Da 4/06/201	.3	City, St	ate	G, OH 446	• 000			2
SHIRLEY, NY 11967/BRONX, NY Completed by	Title	NTO	RATIVE	7	6/06/201 Signat	3/1			Da	ite	201	3	
ANN ALI	ADMI	NIST	KALLVE									Y de	

MO#20613910612

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

Date of Notification (1)				Nam	e of Buildir	ng Owner/Op	erator (2)	The Table	-			
03 / 05	/ 13	3					30 (313) X	0.05.0	TELL LED				
Agencies Notified Type	Notification				ne Bakur t Address	•		ZUI3 MAD		-		-	
☐ EPA 🛛 In	itial				e Road				-8 PM 2: 69				
	mended	en en		7	State, Zip	Code		M345371	7				1
	nendment # mergency (ir		_	0.000	nam, NJ 0			& Lin	ENSTAROL Telephone Numb				
(NJAC 5:23-8) ju	stification)	iciuaii	g		e of Contac				Telephone Numb	er	-	_	
	ancellation			Darle	ne Bakur				4				
						NFORMAT	ION			-			
Name of Facility Where Abatem	ent is Takin	a Plac	e (3)			THE OTTIMATE	-	Type of Facilit	v (4)	_			
Private house		•						School (K-					
Street Address								Subchapter	8 (Other than K-1 2)				
3 Lake Road								Other (i.e., homes, etc	private and commercial	cial b	uildin	gs,	
City (5)								Square Feet	# of Floors	Bldg. Age			
Chatham, NJ 07928								0 400.01.00.	1 01 1 10013		iug. /	-ye	
County (6)	-			Cour	nty Code (7)	(STATE USE	ONLY)	Current Use (F	Prior if being demolished)				
Morris									boiling defined to	ilea			
Name of Monitoring Firm Hired	by Building	Owner	(8)	ASCM	No.	Name of A	Abateme	ent Contractor (9	9)	_	-	-	
						Gr Tech I							
Street Address		100				Street Add				7.			
2 2				576 Valley Rd #283									14
City, State, Zip Code	State, Zip Code					City, State, Zip Code							
100 A 42			8		Wayne, N	J 0747	0						
Project Manager for Monitoring	Firm		Tel	ephone	No.	Telephone	No.		License No.				
	1971.1					973-638-1	777		01127				
Start Date (10)				etion Da		Name of C	SHA M	onitor	11-3-1				-
	_			5_/	13	Envirovisi	ion Cor	nsultants,Inc			3.5		
Occupancy Status During Abate						Street Add	ress	isartants, inc			-		-
Facility Closed/Vacated Durin	ng Entire Pe	riod of	Abate	ement		20-21 Was	garaw	Road, Bldg .#	344				
Abatement Performed Outsid	e of Normal M- P		y Hou	rs - Des	scribe	City, State	, Zip Co	de	J4A .				
		.vi/	' ''''		AM	Fair Lawn	, NJ 07	7410					
Scope of Work (Check all that ap	oply)			\$15,550	2	C	lean up	and decontami				-	
		⊠ Re	enovat	ion		H	ull Conta ini-Encl	ainment with Ne	gative Pressure				
≥ 160 sf or ≥260 lf			emoliti			∵ 🔀 G	lovebag	Procedure					
					1	N	on-Exen	npted (*) and No	on-Friable Procedure).	1		
Location of		2000	s Loca Norma				0.500-			Ab	atem	ent T	уре
Asbestos-Containing Material	(ACM)	Use	ed Sole	ely by	Asbe	Descri stos Contain	ption of	erial (ACM)	Amount	Z	Z,	Щ	Щ
TO BE ABATED IN Facility			intena todial	ince/ Staff?	(i.e	, thermal sy	stems in	sulation,	(Specify	Remova	Repair	cap	iclo
(13)	- 14		(12)	Otali:		surfacing other misc	g, VAT,	or ue)	SIF or LF)	val	=	Encapsulate	Enclosure
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Basement		П		×	Dine in-	1.4				120			
	-	7	-		Pipe ins	ulation			60 LF	X	Ш	Ш	Ш
		Ц_						7					
											П	П	
Name of Registered Waste Haule	er		NJI	EP Waste	Hauler ID No.	Cubic Yards	of Waste	Name of Regis	stered Landfill	Ц.	Ц.		Ш
Gr Tech LLC	0.4%			03378	MR 5 781	TBD		T.R.R.F. Inc	- Canalii				
City, State	e especial			100010		Disposal Da		City, State	1 1 1 1 1	aniano e		THE REAL PROPERTY.	
Vayne, NJ 07470					#1								
Completed By (Print or Type)	Title			-		TBD		Tullytown, P.				777.74	
Jevtic	- 1				-	Signat	I Se	- 6	Date			1.	
SB-41	Own	er		175	E-		C WY	- ven	03/0	5/20	13		-

State of New Jersey - Notification of Asbestos Abatement (Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

GAC Project # 060-13 Date of Notification (1) Name of Building Owner/Operator (2) March 4, 2013 RUTGERS, THE STATE UNIVERSITY OF NJ Agencies Notified Notification Type Street Address ☐ EPA ☑ Initial Notification ENVIRONMENTAL HEALTH & SAFETY DEPT. DCA ☐Amended Notification 27 ROAD 1, BLDG 4086, LIVINGSTON CAMPUS X DOL ■ Emergency (including City, State, Zip Code ☑ DEP- No Longer REQUIRED PISCATAWAY, NJ 08854 iustification) X DOH □ Cancelled Name of Contact Telephone Number MICHAEL SMITH, ENV. **HEALTH & SAFETY FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) 312 COOPER STREET School (K-12) ☐ Subchapter 8 (other than K-12) Street Address ☑ Other (i.e. private & commercial buildings, homes, etc.) NOT SUB 8 CAMDEN CAMPUS Sq. Feet: N/A # of Floors: 3 Bldg. Age: 100+ years City (5) County (6) County Code (7) CAMDEN (State Use Only) CAMDEN Current Use (prior if being demolished): ACADEMIC Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Contractor (9) ATC ASSOCIATES 0098 GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address Street Address 3 TERRI LANE **268 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 KEARNY** 609-386-8800 973-492-0477 00840 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 03/18/13 03/25/13 ENVIROVISION, INC. Occupancy Status During Abatement (Check only one) Street Address ☑Facility Closed/Vacated During Entire Period of Abatement 20-21 WARGARAW ROAD ☐ Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code Describe ☑Other – Describe: Shift Hours: 8:00 AM – 5:00 PM (24Hr access as needed) FAIRLAWN, NJ Scope of Work (Check all that apply) Full Containment with Negative Pressure ≥ 3 sf or ≥ 3 lf ▼ Renovation Mini-Enclosure ≥ 160 sf or ≥ 260 Demolition Glovebag Procedure 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) Remove Repair Encap Enclose VAT, or other miscell.) or LF) YES NO NA 2-4 & 2-5 X VAT 500 SF X Name of Reg. Waste Hauler NJDEP Waste Hauler ID # Name of Registered Landfill Cubic Yards of Waste: 10 CY 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 03/25/13 Hauler #2) Horizon Disposal Services, Inc., Trenton, NJ 08611 Rd. Morrisville, Pa NJ DEP# 22612 19067 215-736-1700 Completed by (Print or Type) Date RAYMOND C. PEDALINO SENIOR PROJECT Raymand C. Pedalino March 04, 2013 MANAGER

State of New Jersey - Notification of Asbestos Abatement (Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

GAC Project # 060-13 Date of Notification (1) Name of Building Owner/Operator (2) March 4, 2013 RUTGERS, THE STATE UNIVERSITY OF MA Agencies Notified Notification Type Street Address ☐ EPA ☑ Initial Notification ENVIRONMENTAL HEALTH & SAFETY DEPT DCA ☐ Amended Notification 27 ROAD 1, BLDG 4086, LIVINGSTON CAMPUS X DOL Emergency (including) City, State, Zip Code ■ DEP- No Longer REQUIRED PISCATAWAY, NJ 08854 iustification) X DOH Cancelled Name of Contact Telephone Number MICHAEL SMITH, ENV. **HEALTH & SAFETY FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) CAMDEN COGEN, BLDG# 7075 School (K-12) ☐ Subchapter 8 (other than K-12) Street Address ☑ Other (i.e. private & commercial buildings, homes, etc.) NOT SUB 8 CAMDEN CAMPUS # of Floors: 2 Bldg. Age: 80+ years City (5) County (6) County Code (7) (State Use Only) CAMDEN CAMDEN Current Use (prior if being demolished): ACADEMIC Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Contractor (9) ATC ASSOCIATES 0098 GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address Street Address 3 TERRI LANE **268 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 KEARNY** 609-386-8800 973-492-0477 00840 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 03/18/13 03/25/13 ENVIROVISION, INC. Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 20-21 WARGARAW ROAD XAbatement Performed Outside of Normal Facility Hours -City, State, Zip Code Describe ☑Other - Describe: Shift Hours: 3:00 PM - 5:00 AM FAIRLAWN, NJ Scope of Work (Check all that apply) ■ Full Containment with Negative Pressure ≥ 3 sf or ≥ 3 lf □ Renovation Mini-Enclosure **X** ≥ 160 sf or ≥ 260 Demolition Glovebag Procedure 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) Remove Repair Encap Enclose VAT, or other miscell.) or LF) YES NO NA ROOFTOP MER - Cooling X TRANSITE PANELS 1000 SF Tower Name of Reg. Waste Hauler NJDEP Waste Hauler ID # Name of Registered Landfill 20 CY Cubic Yards of Waste: See Hauler Below #1 & 2 G.R.O.W.S. North Landfill See Below Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 Disposal Date City, State NJDEP # 12561 100 New Ford Mill 03/25/13 Hauler #2) Horizon Disposal Services, Inc., Trenton, NJ 08611 Rd. Morrisville, Pa NJ DEP# 22612 19067 215-736-1700 Completed by (Print or Type) Signature Date RAYMOND C. PEDALINO SENIOR PROJECT March 04, 2013 Raymand C. Pedalino MANAGER

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

	16/13.				Owner/Obererox		MICTING			
Agencies Notified	Type Notification		Street		- 1	- PA	2:00 :		31 A 12	
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] œ	Amended Amended		City, Su	le. Zip C	∞•	es Canson	08230	•		
₹ ∞ .	Emergency (inc	gnibut				CD 9 10 3 10 10	Telephone Number		-	_
J 00H	justification) Cancellation			Contact			TOOL OF THE PARTY			
] 🗫	Cancellator		-		BREUN	10		-		-
			FACI	THE IME	ORMATION					
ame of Facility Where	Abatement is Taking	Place (3)				Type of Facility				
075	DENCE					School (K-12) (Other than K-12)			
						Other (I.e., pr	rvate & commercial t	grang	\$.	
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ounty (6) CAPE.				•	Name of Abales	meni Convador (9				
ame of Marilonna Firm	Hired by Building C	h-mer	ASCHI	0.	KLER	100 IN	CI			_
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			lephone h		Telephone No.		License no	44175		
raeci Manager for Mo	rolong Firm		nep bik i	~	856-7	79-047	2 0044			=
		uled Comy	Valino Dal	e (11)	Name of OSHA	Monitor				
Sian Date (10) 8 /1	Schec	sue conv	ACIDIT DE			21/1/20	4 M			
		125	1,7		J05E	MKME-				
13/18/1	3	125	113			PKALEN				
Siel & Divo	on Abalement (Che	ck only one) .							_
Occupancy Status Dun	ing Abatement (Che	ck only one	element		Sueel Address	SPILUC	E1 いき.			
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(CHECK #)

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State of New Jersey HOTIFICATION OF ASSESTOS ABATEMENT (PURSUANT to NIAC 8:60 and 12:13(1))

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



Date of Notification (1)				Nan	ne of Buildi	ing Owner/Operator	(2)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
03/	05 /	13			obert Gra	nnt						
Agencies Notified ☑ EPA ☑ DOLWD	Type Notific			-	et Address 08 Jeffer	son Street	2013 MAR -8	PM 2: 69				
☐ DHSS	Amende Amendm	nent #		City	State, Zip	Code oint, New Jersey	08069 LICENS	UNTROL				
(NJAC 5:23-8)	justificati		ing		e of Conta			Telephone Num	her .	-		
	☐ Cancella	tion		R	obert Gra	int .				_		
				F	ACILITY	NFORMATION						
Name of Facility Where	Abatement is	Taking Pla	ce (3				Type of Facility (4)	-	-	N	-
Residence							School (K-12)					
Street Address							☐ Subchapter 8	(Other than K-12)			
296 Shell Road							homes, etc.)	ivate and commer	rcial b	uildin	gs,	
City (5)			-				Square Feet	# of Floors	ТВ	ldg. A	\ae	
Carney's Point Tow	nship						1800 Sq Ft	3 Floors		-	year	rs
County (6) Salem				Co	unty Code	(7)(STATE USE ONLY)	Current Use (Prio	or if being demolis				
Name of Monitoring Firm	Hired by Ruil	dina Owne	r (9)	ASC	A No	Name of Abateme						
Here Tech, Inc	Tilled by Dull	ding Owne	1 (0)	ASCI	A NO.		ent Contractor (9) h Environmenta	d Camilana d d	_			
Street Address						Street Address	ii Environmenta	ii Services, LL	<u>د</u>			٠.
1879-I Old Cuthber	Road					14 Read Driv	•					
City, State, Zip Code						City, State, Zip Co						
Cherryhill						Sicklerville, I						
Project Manager for Mon	itoring Firm		Tī	elephon	e No.	Telephone No.	10 00001	License No.			1 13	
Subash Rashia, PH					9-5200	856-318-1341		01158				
Start Date (10)	[;	Scheduled	Com	pletion D	ate (11)	Name of OSHA M	Ionitor	1 01.00				
03/15/	_13_	_04	1_	05 /	13	Graham-Tech	n Environmenta	I Service, LLC				
Occupancy Status During	Abatement (Check onl	y one)		Street Address				- 3		
☐ Facility Closed/Vacate	S			Š.,		14 Read Driv	е					
Abatement Performed						City, State, Zip Co	ode				-	
Time of Abatement: 7	:00AM-7:00I	PM/	PM	AN	Λ	Sicklerville, N						
Scope of Work (Check al	that apply)								1	-	-	
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf			Renov	ation lition		☐ Mini-Enc ☑ Glovebag			re			
		.	Is Lo	cation	10000			2.1	-	atem	ent T	vne
Location	*			mally solely by		Description o				_	1	-
Asbestos-Containing TO BE ABA		(I) N	/lainte	enance/		estos Containing Ma e., thermal systems		Amount (Specify	Removal	Repair	Encapsulate	Enclosure
IN Facili		Ci		al Staff?		surfacing, VAT,	or	SF or LF)	oval	=	nsd	Sur
(13)		V-	1	2)	-	other miscellane	ous)		100		late	o.
Basement		Ye	s r	lo N/A		nsulation		200Lf Sq Ft			П	
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						7.044						
Name of Registered Wasi				NJDEP Hauler		Cubic Yards of Waste	Name of Registe					
Graham- Tech Envi	onmental S	berv, LLC	•	0034				orth Landfill &	Tully	towi	1	
City, State 14 Read Drive Sickl	erville NIC	18084				Disposal Date	City, State	atour Dd M-	nios etti	- D	21.	
					- 10		15/3 Broder	ntown Ad. Mor		e,PA	1	
Completed By (Print or Ty Vernice Graham	(pe)	Title Presid	dent			Signature	Moins	Dat	3	-5	-1	3

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 12:120)

Date of Notification (1)	**************************************	Name of Building			in IIC C	. 1	12	2 >	
March 5, 2013			Crest	Construction Grou		<u>L</u> 2	، که ا	23	
	ntion Notification nded Notification	Street Address	11 100000 000	I. Main Street, 1st I	Floor	2013 HAR	/ ³].		
[x] DOL Amer	ndment # gency (including	City, State, Zip Co		gat, NJ 08005	60 F.S	HR.	94. 1		
[x] DOH justif	ication) ellation	Name of Contact Ken S	uperak		Telephone Number	တ			
	FA	CILITY INFORM	IATION		一	N	*	:	
Name of Facility Where Abatement is Taking Residence	g Place (3)		11	Type of Facility (4)	School (k-12)	50			
Street Address 1919 East Bay Ter	rrace			[x]	Subchapter 8 (of Other (i.e., priva homes, etc.)			l build	dings,
City	County (6)	County Code (7) (STATE USE ONL	Y) .	Square feet 1000 sf	# of Floors	Bldg.	Age 60		
Long Beach Island	Ocean			Current Use (Prior i Reside	1 (1)	100			
Name of Monitoring Firm Hired by Building N/A	Owner (8)	ASCM No.	Name of	f Abatement Contracto		Inc.			
Street Address			Street A		Loute 9, Unit 61				
City, State, Zip Code			City, Sta	ate, Zip Code	River, New Jerse	ey 0875	55-127	1	
Project Manager for Monitoring Firm	Telephone Numbe	г	732-34	ne Number 19-9932	License N 00624	lumber			
Scheduled Start Date (10) 3/06/13	Scheduled Completed 3/08/13	etion Date (11)			L. Analytical				
	ed During Entire Period of A		Street A		telton Road				
Abatement Performed Other – Describe	Outside of Normal Facility	Hours	City, Sta	ate, Zip Code Piscata	way, New Jerse	y 0885	4		
Scope of Work (Check all that apply)	The Mark		[]	Full Containmen Mini-Enclosure	t with Negative Pre	ssure			
$\begin{bmatrix} & & \\ & & \end{bmatrix} > 3 \text{ sf or } \ge 3 \text{ lf}$ $\begin{bmatrix} & & \\ & & \end{bmatrix} \ge 160 \text{ sf or } \ge 260 \text{ lf}$	[] Renov		[x	Glovebag Proced Non-Exempted (lure *) and Non-Friable	Procedure	е		
						Abater	nent Ty	pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility (13)	Is Location Normally used Solely by Maintenance/Custodia Staff (12) YES NO N/A	As 1 (i.e ins	Description bestos-Co Material (A ,, thermal ulation, so VAT, her miscell	ntaining ACM) systems urfacing, or	Amount (Specify SF or LF)	M	E P A I R	E N C A P S U L E	E N C L O S U R E
Exterior	X	Asbestos sidii	ng		700 sf	X			
									- '
			1 1/2 1/22 20 1 1/22					14	
Name of Registered Waste Hauler Guardian Contracting, Inc.	NJDEP Waste Haule	er ID No. Cubic Y	ards of Was	ste Name of Regist	ered Landfill	<u> </u>			
City, State		osal Date	City, S		a				
Toms River, New Jersey Completed by (Print or Type) Nicholas Fernicola	Title Project Manager	Signature	This t	John Sylvall	1	Date 3/5/2	013		
Manager and the second	*Do not use this for	1 1 ((TIVI	unted activities					_

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 12:120)

Date of Notification (1)		Name of Build	ing Owner/Ope	rator (2) Construction Group,	LLC C	21	2 -	SU	
March 5, 2013		Street Address		Communication Group,	2	0) 0	X 7	\dashv
[] DEP [] Amend	on Notification led Notification lment #	City, State, Zip	401 N Code	. Main Street, 1st Flo	oor	10131	₹ - 1 [®]	1	-
[x] Emerge	ency (including	Name of Conta	-	gat, NJ 08005	lephone Number	3)		
[x] DOH justific	lation	Ke	n Superak		المنابع المنابع	17.	-	* .	
		ACILITY INFO	RMATION	Type of Facility (4)	3		3	- 1	- 1
Name of Facility Where Abatement is Taking Residence	Place (3)				School (k-12)	63	م م مع (12)	6	
Street Address 1915 East Bay Terr	ace			[x]	Subchapter 8 (oth Other (i.e., private homes, etc.)			l build	ings,
City	County (6)	County Code (Square feet	# of Floors	Bldg.	Age 60		
Long Beach Island	Ocean	(STATE USE C		1000 sf Current Use (Prior if Residence	ce				
Name of Monitoring Firm Hired by Building (N/A	Owner (8)	ASCM No.			(9) n Contracting,	Inc.			
Street Address			Street A		oute 9, Unit 61	100			- 11
City, State, Zip Code				ate, Zip Code Toms R	iver, New Jerse		55-12	71	
Project Manager for Monitoring Firm	Telephone Num		732-3	one Number 49-9932	License N 00624	umber			
Scheduled Start Date (10) 3/06/13	3/08/13	pletion Date (11)			. Analytical				
	only one) d During Entire Period o Outside of Normal Facili		City, Si	1056 Strate, Zip Code	elton Road way, New Jerse	ey 0885	54		
Scope of Work (Check all that apply) $[] >3 \text{ sf or } \ge 3 \text{ lf}$ $[x] \ge 160 \text{ sf or } \ge 260 \text{ lf}$		novation molition	[[[x	Full Containment Mini-Enclosure Glovebag Procedu Non-Exempted (*	ıre		re		
		1				Abate	ement'	Гуре	
Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility (13)	Is Location Normally used Solely by Maintenance/Custor Staff (12) YES NO N	dial	Descript Asbestos-Co Material ((i.e., thermal insulation, s VAT other misce	ontaining (ACM) Il systems surfacing, , or	Amount (Specify SF or LF)	R E M O V A L	R E P A I R	E N C A P S U L E	E N C L O S U R E
Exterior	X	Asbestos	siding		800 sf	X	1		
EXCUTO1							-177-1		1
		(4.4		You want to be a second of the	1 C. E	11111	1211 -	5 (1)	
				aste Name of Registe	ered Landfill				1
Name of Registered Waste Hauler Guardian Contracting, Inc.	NJDEP Waste H	23	bic Yards of W	T.R.R.F.	and Landini				
City, State Toms River, New Jersey		Disposal Date 3/11/13	City, Tull	State ytown,/Pennsylvani	ap	TRE			
Completed by (Print or Type) Nicholas Fernicola	Title Project Manager	Signature	ichol	rel		3/5/	: /2013	10 E	
	*Do not use this	form for asbestos	licensure ex	empted activities.	- 1				

eh# 1395

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

Date of Notification (1)				Name	e of Bu	ilding	Owner / Operate	or (2)	Ožava, in i	11 5:	GG)		
02/	22/2013			Serv	icema	ster	of Cherry Hill		LICENSIN	C/ 5-	447		1	
Agencies Notified Type EPA	pe Notification			Stree	t Addre	ess			CHSIN	G^{RU}	Į,			
DEP [Initial Amended	2		City,	State &	Zip (Code							Till Till
4.77	Emergen Cancellat			Name	e of Co in Alle	ntact		1.63		Tele	oho	ne N	lumb	er
				FA	CILIT	Y INF	FORMATION		The state of the s	1				
Name of Facility Where Residence Street Address	Abatement is	s Taking Pl	ace (3)			Type of Faci	(K-12)	V 40	V 10			10	
311 Rancocas Blvd			4					pter 8 (Other the e private & co	nan K-12) ommercial buildi	inas h	om	PS 6	etc)	
OTT Randodas Biva							Square Feet			Bldg.			,,	
City (5)	Cou	unty (6)	Co	unty	Code (7)	1500		1			50		
MtLaurel		rlington					Current Use	(Prior if being	demolished)				12.	
Name of Manitorina Eir	m Hirad by Du	ildina Oum	07 (9)		TACC	M No	Residentia				_			-
Name of Monitoring Fire	in mired by Bu	lilaing Own	er (o		ASC	IVI IVO		atement Contra ironmental S					30.0	
Street Address							Street Addre				7		L	
City, State & Zip Code			1/94	÷	Ψ		City, State & Hamilton, I	Zip Code						6
Project Manager for Mo	nitoring Firm	S. Tarri	Tele	ohone	Numb	er .	Telephone N 609-847-29	lumber	License		er 109	1		
Scheduled Start Date (* 2/26/2013		eduled Com	pleti	on Da	te (11)		Name of OSI EMSL Anal	HA Monitor				•	7.0	
Occupancy Status Duri Facility Closed/ Abatement Perl Describe: Facility Occupie	Vacated Durir formed Outsid	e of Norma	eriod	of Ab			Street Addre 107 Haddo City, State & Westmont,	n Ave. Zip Code						
Scope of Work (Check		tomone			7.									
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf ≥260 lf					novatio molition			Mini-Er Glove I	ontainment with nclosure Bag Procedures kempted and No	3				
	ion of			Locat			Description		Amount	1	Aba	teme	ent T	уре
Asbestos-(Materia TO BE A in Fa (1	I (ACM) ABATED icility		S Main	olely tenar	Used by nce or Staff?		Asbestos-Con Material (A (i.e., thermal s insulation, surfac or other miscell	CM) systems cing, VAT	(Specify SF or LF)		Remova	Repair	Encapsulate	Enclsoure
			Yes	No	N/A		or other midden	ancous)			-		ate	O.
First Floor				\boxtimes			VAT		500sf	1	A			
Name of Registered Wa	aste Hauler	Many in		0.000	IDEP W			Name of Reg	l gistered Landfill		-	2		
ALPHA ENVIRONME	NTAL	ender			auler ID 103333		of Waste	Grows Lan	dfill					
City, State		"xall" a			-		Disposal Date	City, State						
Trenton, NJ						1 13	2/28/2013	Morrisville	, PA			4.2		
Completed By (Print or	Type)			Tit	le	=,	Signature	7		Da	te	. 5		
Rod Richardson				Pr	oject		Rod Richa	rdson		2/	22	/201	13	

NOTIFICATION OF ASBESTOS ABATEMENT

						and 12:120-7)	(0)	71.777.57.00		4	-	
Date of Notification 3-5-2013	on (1)			Ked	_	Owner/Operator		A.C.F.V.E.				
Agencies Notified	Type Notifica	tion S	treet	Addre	ss		7013 MAI	0 Du -				
[]EPA	[X]Initial			Cros				R-8 PM 2				
[]DEP	Notifica []Amended	, c	-			Code , NJ, 07028	60155	IUS CONT ICENSING	ROL			
51/45/F-002/56/F-9	Notifica			f Cont			Telephor	ne Number		-		
[X]DOH	[]EMERGENCY			Ked	(2000) (1000) (1000) (1000) (1000)		L	- Homber				
	[]Cancellat	ion	-								+	-
					ITY 1	NFORMATION	Type of Facil	iter (A)			-	_
Name of Facility Wh		is Taking	1 PIAC	e (3)			1			596		
Same as above	a			+				(K-12) ter 8 (Othe (i.e., priva				
Street Addres								uildings, h				
				- 4			Square Feet	# of Floo		dg.		_
City (5		Couenty ((6)		Cou	nty Code (7)	1400	2		17.7	25	
crey (5	200 100	ESSEX		2 0 0		ATE USE ONLY)	Current Use (2 - V2	ing der)
Name of Monitoring Owner (8)	Firm hired by	Building	ASC	No.	1	Name of Abatem	ent Contracto					
N/A	Carrier Carrier							, 1110.				
Street Address						Street Address 86 Chris	topher St					*
City, State, Zip Co	ode				- 4	City, State, Z Montclai	ip Code r, NJ 070	42			100	
Project Manager for	r Monitoring Fi			Numbe	er	Telephone Numb	oer -		icense		ber	
		N/I	H.			(3/3)/44	-8800		003,			
Scheduled Start Date 3-15-201.		d. Comple 3-18-2			(11)	Name of OSHA M	Monitor					
			ay	Year		Street Address				-	-	_
Occupancy Status Do [X] Facility Cl of Abateme	osed/Vacated Du	Check o	ire P	eriod		Street Address						
[]Abatement P Hours - Des	Performed Outsid scribe: «OffHours scribe: «Other Oc	Descrip	t»		Y	City, State, Z	ip Code					
Scope of Work (Chec [X]>3 sf o []>160 sf		[x		vation lition		X]Mini-H [X]Glove	Containment wi		Press	ure		
			Is			[]NON-F1	riable Procedu	T	Aba	teme	ent 5	Ivo
Asbestos-C Material TO BE A	ontaining L (ACM) ABATED ility	S By te Cu:	Used Solely Main mance stodia	Y / al	in	Description Asbestos-Cont Material ((i.e., thermal sulation, surface)	aining ACM) systems acing, VAT,	Amount (Specify SF or LF)	O V A	R E P A I R	ENCAPSU	E N C L O S U
(13	,,	Yes	ff (1 No	N/A				2 155	L		L	R
Basement		-11		X ·	PI	PE INSULAT	ION	110 LF	X			
										1		1
Name of Registered AZTECH MANA		С на		ID No.	1000	bic Yards Waste 1.5	Name of Region G.R.O.W.		fill			
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			7040	- 11-	Di	sposal Date	City, State	- 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10		1	100	
City, State Montclair, N	J 07042					3-19-2013	Morrisvi	lle, PA	1906	57		
Completed By (Prin	4-000			10 Table		Signature		1	Date			
Constantine	vivian Pr	eside	116			1 cm	ganlly	Hirin				

State of New Jersey - Notification of Asbestos Abatement (Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

C Project # 060-13 ate of Notification (1)	2			Name of Building Owner/Oper RUTGERS, THE STAT	E UNIVE	RSIT	OF	IJ.	100		
March 4, 201 gencies Notified JEPA	Notification Initia	on Type I Notification ded Notification		Street Address ENVIRONMENTAL HE 27 ROAD 1, BLDG 408	ALTH &	SAFE	TY DE	PT.			
] DCA] DOL] DEP- No Longer REQUIRED	□ Eme	rgency (inc fication)		City, State, Zip Code PISCATAWAY, NJ 088	54		3	iber (00		
DOH	□ Cano	celled		Name of Contact MICHAEL SMITH, ENV		retepho	ne wan	Wei ()			
			FACILITY INF	HEALTH & SAFETY		-	10				
	Taking Place /	3)	FACILITY IN	Type of Facility (4)	1 1 1 1 1 1 1 1						
ame of Facility Where Abatement is 12 COOPER STREET	Taking Flace	<u> </u>		School (K-12)					th _{ia}		
				Subchapter 8 (other than	K-12)	asa bam	os etc.)				
AMDEN CAMPUS			n i	Other (i.e. private & comm	Floors: 3	Bldg.	Age: 1	100+ ye	ars		
ity (5) Count	y (6) CAMDEN	County C (State Us		Current Use (prior if being de	emolished)	: ACAD	EMIC				
lame of Monitoring Firm Hired by Blo	la. Owner (8)	ASCM N	lo.	Name of Contractor (9)	= 0.000						
ATC ASSOCIATES		0098		GREENWOOD ABATE	MENT CO	ONSUL	TANT	S, INC.		_	
The second second second second				Street Address							
TERRI LANE				268 MAIN STREET							
City, State, Zip Code BURLINGTON, NJ 08016				City State, ZipCode BUTLER, NJ 07405	The state of the s	License	o Numbe	· ·			
Project Manager for Monitoring Firm	Telepho	ne Number		Telephone Number License Number							
BRIAN KEARNY	609-3	86-8800		973-492-0477 00840							
Scheduled Start Date (10)	Schedul	ed Completion	Date (11)	Name of OSHA Monitor							
03/18/13	03/25			ENVIROVISION, INC.						_	
Occupancy Status During Abatem	ent (Check or	nly one)		Street Address							
X Facility Closed/Vacated During	Entire Period	of Abatemer	nt	20-21 WARGARAW R	OAD						
■Abatement Performed Outside	of Normal Fac	cility Hours -		City, State, Zip Code							
Describe Other – Describe: Shift Hou (24)	rs: 8:00 Al Hr access	VI − 5:00 P as needed	M I)	FAIRLAWN, NJ	10	12 (45					
Scope of Work (Check all that apply	Δ			X	Full Conta		vith Neg	ative Pre	ssure		
≥ 3 sf or ≥ 3 lf			⊠ Renovation	on 📮	Mini-Enclo						
≥ 160 sf or ≥ 260)		■ Demolition	on 🔲	Glovebag I Non-Exemp	oted (*) a	nd Non-	-Friable !	Procedur	е	
		1000	T. D. sintian of	Asbestos Containing Material	Amou	ınt	Abater	ment Type	2		
Location of Asbestos-Containing Material (ACM) in Facility (13)	Is Location N Solely by Ma Staff? (12)	int./Custodial	(ACM) (i.e. the	ermal systems insulation, surfacing	g, (Spec or LF	cify SF	Remove	e Repair	Encap Er	iclo	
	YES N	NA NA	TRANSITE		1	0 SF	X				
Basement MER	X X		TSI-pipe in		20	00 LF	X	14		-	
Basement MER	L2		BOIL FR G	ASKETS & SEALS		9 SF	X		1CII		
Basement MER		Waste Haule		Cubic Yards of Waste:	20 CY	Name	O M S	istered La	l andfil	1	
Name of Reg. Waste Hauler See Hauler Below #1 & 2		Below				1,1000,000	.0.44.0			7 1	
Hauler #1) Greenwood Abatemen	*8			1,000	Disposal [03/25/1]			Rd. Mo	<u>te</u> v Ford M risville, l		
Hauler #2) Horizon Disposal Serv NJ DEP # 22612	ices, Inc., Tre	nton, NJ 0861	1					19067 215-736	-1700		
Completed by (Print or Type)	Title			Signature		Date	March	04, 20	13	7	
RAYMOND C. PEDALING	The second secon	OR PROJE	СТ	Raymond C. Per	dalino		.viai oi	, , , ,		e e	