CK #25/00

Date of Notification (1)	-e			Name	e of Buildin	ng Owner/Operator		201	BMAR,	- 74	1		,
	3/8/13					T1	ap Rock Ind	ustries	TAR 1	4	O.s.		
Agencies Notified EPA DEP	Type Notific	ation		Stree	t Address		Box 419 Lau	127	Ma.	ý	17	2: 6	S_{-}
DEP	Amender Amendm		50	City,	State, Zip (Code		(-)	LICEN	. 7	777	7/5	
⊠ DOH	Emerger justificat		g	Name	e of Contac		ingston, NJ (one Numb	er er	<u>Q</u> _		_
DCA	Cancella				or cornac	Ray	2		ione rturne	01		de	
				FA	CILITY INF	FORMATION							
Name of Facility Where		Taking Plac Rock Inc	T 170 540	ec			Type of Facility						
Street Address		E. State					School (K-1 Subchapter Other (i.e., p	8 (Other orivate &			dings	,	
City (5)							Square Feet		loors	В	ldg. A		
County (6)	H	amilton,	NJ	I Cou	nty Code (7) (STATE	O Current Use (P	rior if beir	0 na demolis	hed)		50	_
	Mercer				ONLY)	i) (OIAIL	Ouncil Osc (i	noi ii beli	ig derrions	nou)			
Name of Monitoring Firm		ding Owner		ASCM	No.	1	nent Contractor (9	7.5	~				
(8) Street Address	MECS					Street Address	ens Environ	mental	Service	s, li	ıc.	_	
Street Address	PO Box	341				Street Address	PO I	3ox 32	2				
City, State, Zip Code		NII 0051	-			City, State, Zip C		NII (0.501				
Project Manager for Mo	rosswicks,	NJ 0851	The second	ephone	No	Telephone No.	Allentow		18501 ise No.				_
	Weisgarber	•	375,365		8-4070	(609) 25	59-9688	Licei		049	3		
Start Date (10)		Scheduled (ate (11)	Name of OSHA		TE CC				200	
3/25/13 Occupancy Status Duri	ng Abatement	-	4/12/	13		Street Address	· M	IECS				-	-
☐ Facility Closed/Vaca				ment		Officer Address	PO I	30x 34	1				
☐ Abatement Performe ☑ Other - Describe:			ty Hou	rs	4	City, State, Zip C	ode Crosswic	co NII	00515				
Scope of Work (Check		- Opin					Closswich	KS, INJ (00313		-		
≥3 sf or ≥3 lf ≤ ≥160 sf or ≥260 lf	,,,,		enovat emolitio			☐ Mini-End Gloveba	ntainment with Ne closure ag Procedure empted (*) and No			9			
			Location									ment	
Location		Used	d Sole	y by		Description of			1 (Тур		
Asbestos-Containing TO BE ABA	TED	C	ntenar			tos Containing Mat thermal systems i	nsulation,	Amo (Spe	cify	Ren	Repair	Enc	End
IN Facility (13)	у		Staff? (12)			surfacing, VAT, other miscellaned	or ous)	SF or	r LF)	Removal	읔	Encapsulate	Enclosure
		Yes	No	N/A								ate	w
Exterior 7	Γanks			×	The	rmal Tank He	ads (4)	400	sf	×			
Exteri	or					Thermal Pip	ing	120) lf	×			
Name of Registered Wa	ste Hauler			JDEP V	Maste I	Cubic Yards	Name of Regi	etered I a	ndfill				
					No. 292	of Waste 15 CU	Water Control of the State		, Inc. La	ndf	i11		
City, State					274	Disposal Date	City/State		, 1110. 110				-
Allentown, NJ						4/12/13/	$H = \frac{1}{2}$	Tully	town, F	A			
Completed By Mahlon E. Ste	Title Pr	oiec	t Man	ager	Signature			Date	3/8	/13		10	
							4						

Size of New Jersey NOTIFICATION OF ASSESTED ASSESSES (Fursuant to NJAC 8:50 and 12:120)

Date of Notification (1)			77	Name of Building Own	anu 12.1				. 2		į
Agencies Notified Time Notifie				- Sought Offil	C) Co	NNEC NNEC	2013 N	AR .			
EPA Minial		ı		Super Address	> W.	PLEAS	2013 H Дит Ди 07607	= -*	PH	2: 6	9
DOL Amenda Emerge justified	nent# Ney (inch lion)	uding	-L	THE OF COUNTY			67607	CENT.		· · · · · · · · · · · · · · · · · · ·	
E. GERES			_L	JOHN O'CO	MAELI		1 100	phone No	amer	0	7
Name of Facility Where Abatement is T	along Pl	ice (3)		FACILITY INFORMA	THOM	•					
Street Address 136 W. P.		m)T	1			III Subd	ol (K-12) frapter 8 (Office (i.e., private &	rhan 10-1	ą		
1 363	200030	701	TIVE			Square Fe		Toors	-		
County (5) BERGON			Con	uniy Code (7) ATE USE OKLY)		1,500	1	1	- 1	50	
Name of Monitoring Firm Hired by Buildin	g Cunes	(6)		ASCM No.	Name	of Abalemen	COMMON				
Street Address				•	Street A	ac Contrar Votress Owell Roa		-			
City, State, Zip Gode Project Memager for Maniforing Firm					City, St	ita, Zip Code Rock, N.J.	3				
•			Tele	phone No.	Telepho		111	cense No.		-	
Start Date (10) 3 15 13	1	111.	5/13	ion Dale (11)	Name of	OSHA Moni		0156			
Occupancy Status During Abatement (Che Fasility Closed/Vazaled During Fishe Abatement Performed Outside state		One)			Street Ad	tiress ryler Street		ices inc.	· ·		
Abatement Performed Cutside of Non Other - Describe: Scope of Work (Check All Hall Apply)	nai Facil	dy Hou	rs		City, State	e, Zip Code nsacik, NJ		-			-;-
2 3503F 2 38050280F		Renova Demoli		•		Full Contain Mini-Endose Glovebao Pr	meni with Neg re			-	
•		s Locali			<u> </u>		ed (*) and Non	-Friable P		re temen	
Location of Asinesios-Containing Material (ACM) TO BE ABATED	Use	Normal ad Sole intenar	ly by new	Asbestos Contain	iption of ing Mater	ial (ACIA)	Amouni	_	7000	ype I	
(13)	Yes	(12) No	N/A		SIERIS IDE	ulation,	(Specify SF or LF	Removal	Rapah	Encapalitate	Butabloug
Main Front			V	VATA	uo Ma	STIC.	1500 5	FV	F	-	
					·						
Name of Registered Waste Hauler Rovic Transport]	NJ	DEPW		İs	Name of	Registered Lar				
City, State		20	785	5			Bethlehen		Con	l.	
Riverdale, New Jersey 07457		- 8		Disposal D		City, State		ae			-
Joseph Accided to	T⊞- Ç.Q	1.0		5/16/ Sgnad	ome /		em, PA 180	Dags ,	,	-	- Annual Contraction
SB-41 (R-08-08)					· Voz	aline		3/05	/13		



20.	· · · · · · · · · · · · · · · · · · ·		
13/1/A	Check#	8110	
SER MI	'/ \	A ()	0

Date of Notification (1) 3/5//3	i i	7		Building Own		(2) 7AU	1000 - 10	7. ?	G _O		
Agencies Notified Type Notification EPA Initial		1	Street A	eddress 8 2 /			146	10		•	
DEP Amended Amendment		-1	City, St.	ete, Zip Code 1065F(EC	d K	5 07	675				
☑ DOH justification) ☐ DCA ☐ Cancellation	ucerorug	Ī	Mameo	fContact FLICK	en if hi	100 To	Telephone				
Name of Facility Where Abatement is Taking M.R. FLICKMAN Street Address	Place (S	3)	FAC	CITY BUFORM	ATION	Type of Facility (School (K-1: Subchapter Other (i.e. p	2) 8 (Other (han K-12	· ·			7
882 RAY AUE.				3		Square Feet	# of Floors		Hdg. /	/de	
Coursy (6) BERGEN		-	County (Code (7) USE ONLY)		4 0 700000	or if being demoksh	ed)	60		
Name of Monitoring Firm Hired by Building O	wner (8)		ASCA	I No.		of Abatement Con lac Contracting	fractor (9)			-	-
Street Address			<u> </u>			Address Lowell Road			~		
City, State, Zip Code			****			tate, Zip Code Rock, N.J. 07	452				
Project Manager for Monitoring Firm		1	Telepho	ne No.		ione No. 262-5841	Ucense No 00156),			
3/5/10		3/6	apletion I	Date (11)		of OSHA Menitor ega Environmen	ntal Services In	Ç.			
Occupancy Status During Absternant (Check Pacifity Closet/Vacated During Entire Pr			\eat	***************************************		Address Huyler Street					
Abelement Performed Outside of Normal Other - Describe:	I Facility	Hours				tale, Zip Code kensack, NJ 07	606	•			
Scope of Work (Check All That Apply) Sign 23 of or 23 if 2160 st or 2260 if		enova lemofi				Mini-Enclosure Giovebag Proc				9	
With the second state of t	1	Locati				THE CAPTIBLE	7 1000		Abati		t
Location of Asbestos-Contensing Metarial (ACM) TO BE ABATED In Facility (13)	Use Ma	d Sole intenat odial S (12)	ly by los/	Asbastos Co (i.e. them su		laterial (ACM) a insulation, T, or	Amount (Specify SF or LF)	Removal	Repeir	Entapsulate	Endosure
	Yes	No	N/A		7		27.5			5	Ľ
BASEMENT			X		[4]	Ph_	2615	×		-	
Name of Registered Waste Hauter			JDEP W		ic Yards	Name of R	legistered Landi			-	1
Rovic Transport			auler ID 0785		Vaste		. Bethlehem La	ndfil	Cor	p.	
City, State Riverdale, New Jersey 07457	2.5	S 11 1		Dieg	ocal Date	City, State Bethleh	em, PA 18015		,		
Completed by R. McDonald	Title Pres	ident	4.1	·	Signature	Mil	Det 3		1/1	}	

Opes Proj. #: MS 13-68

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

								91	16E 16E				
Date of Notification (1)			f Building Ow GERS UNIV	ner/Operator (2	2)	2013	MAR	11 PM 2.					
Agencies Notified Type Notified	cation	Street A		EKSITI		A STATE		177.2.	5				
☑ EPA ☑ Initial				T DDIG 400	_	# 13 m	5/	Do non.	*				
DEP Amended				LDING 4086)	VC.	1.11						
DOL Amendment			ite, Zip Code	E				11.11					
DOH Emergent		-		NJ 08854-80)36								
justification		Name of	Contact					Telephon	e Numbe	r			
DCA Cancellat	ion	MIC	HAEL SMI	TH									
			FAC	CILITY INFORM	/IATIO	N				2011			
Name of facility where abatement	nt is taking	place (3)					П	Type of Facility (4) I (K - 12)				
CONKLIN HALL									apter 8 (0		han k	(_12\	
Street Address							-11		Private/C			-12)	
								Bldgs./	Homes, e	etc.			
175 UNIVERSITY AVENU							<u>-</u> [Square Feet	# of Floo	rs	В	ldg. A	ge
City (5)	10	County (6)				unty Code (7) ate use only)					-		
NEWARK		ESSEX			(30	ate use only)	Ш	Current Use (Pr	rior if beir	ig den	nolish	ed)	
Name of Monitoring Firm Hired b				ASCM No.	'	Name of Abatem	ent C	ontractor (9)				_	
CARDNO ATC				00098	- 1	D & S RESTO	OR A	TION INC					
Street Address				00070	-	Street Address	Oldi	Hort, Irto:					
3 TERRI LANE					- 1	20 California	a Ave) .					
City, State, Zip Code				-	-	City, State, Zip Co				(Albert Lie			
BURLINGTON, NJ 08016						Paterson, NJ	075	03					
Project Manager for Monitoring Fi	rm		Phone Numb	per	_	Telephone Numb			License	Numb	er		
BRIAN KEARNEY			609-273-8	050		973-345-80	20			1169			
Start Date (10)	ISc	hed. Comp	letion Date (1		_	Name of OSHA	/lonito	or	S44 (2020)				
		(B)	1 3 (2 %	•		D & S Resto	ratio	n, Inc.					
03/18/2013		3/25/2013				Street Address							
Occupancy Status During Abatem Facility closed/vacated during			•			20 California		nue					
Abatement performed outside	de of norn	nal facility h	nours-			City, State, Zip Co	ode						
Abatement performed outside Describe: Occupied - 5:00pn	n to 5:00an	n		4		Dataman Mi	075	0.2					
Other-Describe:						Paterson, NJ							-
Scope of Work (check all that ap		00420000						ıll Containment w ini-enclosure	/negative	press	ure		
	=							lovebag procedur	e				
≥160 sf or ≥260 lf	Demol						□ N	on-Exempted (*)	and Non-	_	_	edure	-
Location of		ition norma intenance/	illy used sole!	у						e R	R	E n	E
asbestos-containing material (acm) to be	staff(1		oustoulai			asbestos-containing	9	Amount (Specify S	For	m	р	c	n
abated in facility (13)	Yes	No	N/A	material	(ACIVI)			LF)	J. (1278)	o v	l a	a	L
	_						v.	-		е	4	۲	-
SECOND FLOOR LOBBY	-			Ceiling Ma	iterial			900 SQFT		N N	부	屵	쀼
		4			<u>'</u>					#	屵	부	屵
	-	4=	_	-						井	片	ዙ	₩
	-	4		1						井	님	牌	#
Pagistarad Waste Haviles	151	IDEDI		Cubic Yards of	Masta	INome of Desirt	es el I	andfill			Ш	Ш	
Registered Waste Hauler D & S RESTORATION, INC		JDEP Haul 13506		ubic Yards of 1 4 YD	vvaste			andfill ESOURCE RE	COVER	RY			
City, State			Disposal D		The second secon	City, State	,						
PATERSON, NJ 07503			03/28/1		TULLYTOWN, PA								
Completed by (Print or Type)	Title			Signature	1.112-				Date				
BOGDAN JOLDZIC	PRES	IDENT							02/28/	13			

D&S Proj. #: MS 13-76

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

								The second			`		
Date of Notification (1)		Name of B	uilding Ov	vner/Operator (2))		201	3 MAR II PA		-			
10 3 / 0 5 / 1 3		BILL H	ASSAN					THOM II PA	12:00	9			
Agencies Notified Type Notifica	tion	Street Add	ess				100	175.00		_			
DEP Amended	- 11	45 8TH	AVENU	JE			į	LIGEN IN	In Up				
Amendment #		City, State,	Zip Code						0	>			
☐ ☐ Emergency		WEST	WOOD,	NJ					Y.	3		0)	
DOH (including justification)	. -	Name of Co	ontact					Telephon	e Numbe	er			
DCA Cancellation	1	BILLE	IASSAN							١ _			
			FA	CILITY INFORM	ATIO	N							
Name of facility where abatement	s taking p	lace (3)					T	Type of Facility (
BILL HASSAN						es			I (K - 12				
Street Address							=		apter 8 (0 (Private/0			(-12)	
45 8TH AVENUE								Bldgs./	Homes,	etc.			
City (5)	I Cou	ınty (6)			Co	unty Code (7)	=	Square Feet	# of Floo	ors	В	ldg. A	.ge
7 (-7		, (-)				ate use only)		Current Use (P	rior if hoi	na don		od)	-
WESTWOOD		ERGEN				enter ten enter enter tres enter tres enter tres enter e		Current Ose (F	noi ii beii	ig den	1011511	eu)	
Name of Monitoring Firm Hired by	Bldg. Own	ier (8)		ASCM No.		Name of Abatem	nent C	ontractor (9)					
						D & S REST	ORA	TION, INC.					
Street Address						Street Address				the line			
City State Tie Code						20 Californi		e.					
City, State, Zip Code						City, State, Zip Co							
Project Manager for Monitoring Firm		Tp	hone Num	abor .	_	Paterson, N.		503	11.7				V
. rejectimenager for mormoring i ini		1	none run	ibei		Telephone Numb 973-345-80			License	Numi 1169	oer		
Start Date (10)	ISche	d. Complet	on Data /	11)	_	Name of OSHA		or		1107			
M (M)		21	on Date (11)		D & S Resto	ratio	n, Inc.					
03/18/13 Occupancy Status During Abatement		8/13				Street Address							
Facility closed/vacated during		200000000000000000000000000000000000000	amont			20 California	octor unitaria	enue					
Abatement performed outside Describe:	of normal					City, State, Zip C	ode						
Other-Describe: NORMAL F					_	Paterson, N.	J 075	03					5500
Scope of Work (check all that appl	y)					!	F	ull Containment w	negative	press	ure		
$\boxtimes > \underline{3} \text{ sf or } > \underline{3} \text{ If}$	Renovati	on					_	lini-enclosure					
≥160 sf or ≥260 lf	Demolitio	n					N N	lovebag procedur lon-Exempted (*)	e and Non-	friable	proc	edure	
Location of		n normally enance/cus		ly		777		T		R	R	Е	Е
asbestos-containing material (acm) to be	staff(12)	enance/cus	stoulai			asbestos-containing	g	Amount (Specify S	E or	e m	e p	n	n
abated in facility (13)	Yes	No	N/A	material (/	ACM)			LF)	r or	0	a	а	C L
BASEMENT			1	T DIDE DIGIT	r A m	1031		1001 700		е	r	р	_
DASEMENT		X		PIPE INSU	LA I	ION	_	100 L FT				Ц	1
	-						井		닏	부			
				-						井	니	片	H
				-						+	H	屵	片
Registered Waste Hauler		EP Hauler	ID# (Cubic Yards of W	/aste	Name of Registe	red L	andfill			Ш	Ш	Щ.
D & S RESTORATION, INC.		506		1 YD		TULLYTOW		ESOURCE RE	COVER	Υ	3.7		
City, State PATERSON, NJ 07503			Disposal 03/19/			City, State							
Completed by (Print or Type) Title Signature						TULLYTOW	/N, P	'A	Dete				
BOGDAN JOLDZIC					Date 03/05/	13							
ASB-41 *	PRESID Do not us		for asbest	tos licensure exe	mpted	d activities.							

B & G proj. #: 2013-51

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

3	Check # 5810	
	CHeck # 50 IU	

Date of Notification	(1)	111	Name of Ru	ilding Own	er/Operator (25	010		***************************************		Contract of the Contract of th				
0 13 1/10 16	1/11/31	- 11	David S	uskauer	ion operator (2)	Ulj	MAR 11 PM 2: 6	()						
Agencies Notified	Type Notifica	Car IL	Street Addr			-		,						
☐ EPA	X Initial		3 Suns	et Terrac	е	300	STOS COMBO Turra State							
☐ DEP			City, State,					<u> </u>						
₩ DOL	Amend	ment	Maplev	vood, NJ	07040			Ø						
M DOH	☐ Cancel	2000	ame of Co	ntact				Telephon	e Number					
☐ DCA	☐ Cancer	ation	David :	Suskaue	r									
5.				FAC	ILITY INFORM	ATIO	N							
Name of facility who	ere abatement	is taking pl	ace (3)				1	Type of Facility (
David Suskaue	er								l (K - 12) apter 8 (Other	than K-12)				
Street Address		******						M Other ((Private/Comm					
3 Sunset Terra	ace						1 -		# of Floors	Bldg. Age				
City (5)	The second second	Cou	nty (6)			Cou	unty Code (7)	Oquale i eet	# 011 10013	Diag. Age				
Maplewood, N	NJ 07040	Es	sex			(Sta		Current Use (Pr	rior if being der	nolished)				
Name of Monitoring	Firm Hired by	Bldg. Own	er (8)		ASCM No.	-1	Name of Abatement Co		***************************************					
	N/A						B & G Restoration	n, Inc.						
Street Address							Street Address	. d						
City, State, Zip Code						_	105 Ryerson Roa City, State, Zip Code	au .						
City, State, Zip Code	**	*					Lincoln Park, NJ	07035						
Project Manager for	Monitoring Firm	1	Pi	none Numb	er	_	Telephone Number		License Num					
							(973)696-6869		00378					
Scheduled Start Date	e (10)	Sched	. Completi	on Date (1	1)		Name of OSHA Monitor B & G Restoration							
03/18/2013		03/	18/2013				Street Address	1, 1110.						
Occupancy Status D	uring Abateme	nt (Check o	only one)	************			105 Ryerson Roa	d						
Facility closed/	/vacated during						City, State, Zip Code							
Describe:		ornonnai	lacility flou	13-		_	LincolnPark, NJ 0	7035						
Other-Describe								NJ 07035						
Demolition	ck all that appl	Renovatio	n .			П	Full Containment w/negati	ve pressure T	Glovebag p	rocedure				
>3 sf or >3 lf		≥160 sf or					Mini-enclosure	70 p.0000.0 E	Non-friable					
			n normally	used solely	/				R	RF				
Location of asbestos-conta	aining	by mainte staff(12)	enance/cus	todial	Description	n of a	sbestos-containing	Amount	_ e m	e n E				
material to be abated in facili	ity (13)	Yes	No	N/A	material (/	ACM)		(Specify S	F or o	a a c				
			110					00160-	е	I P -				
storage area & b	oller room		-	X	pipe insula			28 lf & 7 li 30 lf	f X					
hallway	***************************************			X	pipe insula			9 If	X					
electric panel clo	set			X	pipe insula	_		6 If	X					
tv room				×	pipe insula	ation		6 If	X					
Registered Waste Ha	EP Hauler I 19563	D# C	ubic Yards of V	Vaste			noveni Carri	tor.						
B & G Restoration	on, mc.	_		Disposal D	1 yard	Tullytown Resource & Recovery City, State				<u>. </u>				
Lincoln Park, N.	J				19/2013				ν					
Completed by (Print of Gordana Luna	or Type)	Title	п/Тгоог	ıror	Signature				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	12				
Jordana Lund		Secreta	ry/Treasu	ai Ci		Gordana Luna 03/6/2013								

1302-4603

Date of Notification (1)		Name of	Building	Owner / Operat	or. (2)							
3/4/13		PSE&G	i	owner / operag	O'I FAAI	211 5						
Agencies Notified Type Notificat	ion	Street Ac	ddress			11 111 2	2:50		100.0		1711-111	
□ EPA □ Initial					1月FQ7	700	- 44					
		City, Stat			& 11	CENTAGE	itti					
□ DOH □ Emerg		Newark Name of				YEN. Hall	12.					
DCA Cance		Drew Si					31	Teleph	one	Num	ber	
	!·											
Name of Facility Where Abatemen	at is Taking Dlags /	FACIL	ITY INI	ORMATION						Trans.		
PSE&G Pennsauken Substati	ion	>)		Type of Faci								
Street Address	7.					Other than K-	12)					
7272 N. Crescent Blvd.				Other (i.	e. priva	te & commer	rial buildin	as hor	nes	etc)		
				Square Feet		# of Floors		Bldg. A		oto.j		
	County (6) Cou	unty Cod	le (7)						, ,			
Pennsauken	Camden			Current Use	(Prior if	being demol	ished)					
				Substation								
Name of Monitoring Firm Hired by	Building Owner (8)	A	SCM No			Contractor (9	3)					
M.E.C.S. Street Address				AbateTech		100						
1224 Hamilton Ave. PO Box 3	3004			Street Addre	SS							
City, State & Zip Code	3004			PO Box 25 City, State &	7in Cas	la .						
Trenton, NJ 08629				Lumberton								
Project Manager for Monitoring Firm	n Telep	hone Nu	mber	Telephone N		.040	License N	se Number				
William Weisgarber Jr.		15-1140		609-265-21				005				
Scheduled Start Date (10) Sc	heduled Completion		11)	Name of OSI		itor					****	
2/25/13 Occupancy Status During Abateme	3/29/	13		EMSL Anal								
Facility Closed/Vacated Du	int (Check only one iring Entire Period o	e) of Ahatem	nent	Street Addres								
Abatement Performed Outs	side of Normal Hou	irs	iiciit	108 Haddor City, State &		0						
Describe:				Westmont,								
Facility Occupied During At	patement			Trootinont,	140 00 1	.00						
Scope of Work (Check all that apply	y)				various con							
≥3 sf or ≥3 lf		_	22000			full Containm		egative	Pres	sure	9	
≥160 sf ≥260 lf	×	Renovat	\$100 miles (1947)			/lini-Enclosur						
2100 51 2200 11		Demoliti	ion			Blove Bag Pro			_			
Location of	Isl	ocation		Non-Exempted and Non-Friable Description of Amount Abar								
Asbestos-Containing		ally Used	d	Asbestos-Con			Amount Specify	ADa	atem	enti	ype	
Material (ACM) TO BE ABATED		lely by		Material (AC	CM)		F or LF)			щ	m	
in Facility		enance o	STOCK	(i.e., thermal synsulation, surface	ystems	-		em	Repair	cap	nclo	
(13)		(12)		or other miscella				Removal	bair	Encapsulate	Enclosure	
	Yes	No N/A	Α .					-		te	Ф	
Exterior				doned pipe enc astic covering (100 LF					
		$\Box\Box$) Dictain	doub covering (2 3000	Olis)		\vdash		П		
								ᅢ	H	Η	H	
4 1									H	H	Ħ	
										Ħ		
Namo of Posisters J.M												
Name of Registered Waste Hauler		NJDEP Hauler I		Cubic Yards	Name o	of Registered	Landfill					
Waste Management			25 No.	of Waste 3	GROW	/S North La	ndfill	2				
City, State					City, St	1-10-11	iiiuiiii					
Camden, NJ				3/5/14		ville, PA						
Completed By (Print or Type)		Title		Signature	A			Date			-	
Gwen Trumbetti		Office C			1/1			3/4/1	3			

State of New Jersey 1302-4609 NOTIFICATION OF ASBESTOS ABATEMENT Check #5006 (Pursuant to <u>N.J.A.C.</u> 8:60 and 12:120)

Date of Notification				N	ame	e of B	uilding	g Ov	vner / Operato	or (2)	Z0/3/	iár II p _M				
Agencies Notified	3/7/13			P	rine	cetor	1 Uni	vers	sity		et and a second	PH	2. ~			
EPA	Type Notifi	cation				t Add		inc	eton Univer	city E	A Maal	Millan Bldg.	- (.E.			
☐ DEP		al		C	ity,	State	& Zip	Coo	de	SILY L	A. Waci		101	8		
⊠ DOL		ended #			100000000000000000000000000000000000000		ı, NJ					111111111111111111111111111111111111111	4.77			
□ DOH □ DCA		ergency ncellation					ontact		_		12		Teleph	one l	Vuml	ber
M DCA	L Cal	cellation					rtego		200020				-			3.0
Name of Eacility Wh	acro Aboton	aantia Taliaa F	21	(0)	FA	CILIT	TY IN	FO	RMATION							
Name of Facility When Princeton Univer	sitv 87 Pr	nent is Taking F	mn	(3) uta	r Ri	ildir	na		Type of Facil							
Street Address	0.0, 0	oopoot ot. oo	mp	ato	יםי	anun	ig	-	The state of the s		Other tha	n K-12)				
87 Prospect Stre	et											mercial buildin	gs, hor	nes.	etc.)	
	72.7								Square Feet		# of Floo		3ldg. A	_		
City (5)		County (6)		Cou	nty (Code	(7)		30,000			4		50-	ŀ	
Princeton		Mercer							Current Use	(Prior i	f being de	emolished)				
Name of Monitoring	Eirm Hirod	by Duilding Ou		0)		TAG	0141	_	Building							
Pennoni Associa	tes. Inc.	by Building Ow	ner (0)			CM No 102		Name of Aba AbateTech		t Contract	tor (9)				
Street Address						100			Street Address							
515 Grove Street									PO Box 25							
City, State & Zip Coo Haddon Heights,									City, State &					1	302117-2	
Project Manager for		Firm	Tel	enh	one	Num	her		Lumberton Telephone N	-	8048	License N	li ina la a i			
Alan Lloyd							x287		609-265-210			License i	005			
Scheduled Start Dat		Scheduled Co				te (11)		Name of OSI	-IA Mor	nitor				_	
3/22/13 Occupancy Status D				0/1				_	EMSL Analy							
Facility Close	ed/Vacated	During Entire F	nıy o Perio	ne) d of	Aba	ateme	ent	- 1	Street Addres 108 Haddor	70.700 L			323			
		outside of Norm							City, State & 2				****		-	
Describe:									Westmont,							
Scope of Work (Che					ń				220							
Scope of Work (Cite	ck all that a	ppiy)								M	Full Cont	ainment with N	legative	Dro	ceura	
≥3 sf or ≥3 lf			\boxtimes	I	Ren	ovatio	on		Full Containment with Negative F Mini-Enclosure						SSUIT	5
≥160 sf ≥260) If			1	Den	nolitio	n		Glove Bag Procedures							
	antine of								Non-Exempted and Non-Friabl							
Asbesto	cation of os-Containir	na	12525		cati IIv I	on Jsed		Δ	Description of Amount Asbestos-Containing (Specify					atem	ent T	уре
Mate	erial (ACM)		,	Sole	ely b	y			Asbestos-Containing (Sp Material (ACM) SF				_		ш	_
	E ABATED Facility					ce or staff?			e., thermal syllation, surfac				Rem	Repair	Сар	inck
	(13)		Ous		2)	lan!			other miscella				Remova	pair	Encapsulate	Enclosure
			Yes	N	10	N/A					´		-		हि	0
Throughout Basem Rooms G03,G23,G23C,Sto]		\boxtimes	Sp		-Applied Fir			11,250 SF				
G23C,basement level stai & G38A	r landing, G22	A, G22 Corridors	П	L				FI	loor tile & N	lastic		3,210 SF				
Rooms G15,G18A,G	18B,G23A	& G23B		I		\boxtimes			Mastic			1,925 SF				
		님	<u> </u>	4	H				-			\Box				
	H	╁	+	H		9					ᆛH	H	H	H		
Name of Registered	Waste Haul	er		1	NJE	DEP V	Vaste	Cul	bic Yards	Name	of Regist	tered Landfill		Ш	Ш	Ш
AbateTech, Inc.							Waste 12		Landfil							
City, State Lumberton, NJ						Disposal Date City, State Tullytown, PA										
Completed By (Print of	Title Signatur				Sig		lully	JWII, PA	1	Date						
Gwen Trumbetti			Opps. Coord.							A			3/7/	13		

State of New Jersey 1111-4409 NOTIFICATION OF ASBESTOS ABATEMENT Check #5010 (Pursuant to N.J.A.C. 8:60 and 12:120)

Date of Notification				Nam	ne of I	Buildin	g Owner / Oper	rato	or (2)		00 ·	- 49-	_	1	*	
Aganaiaa Natified	3/7/13			NJ.	Turn	pike A	Authority- 6-9	W	idening Pro	gram C	ontrac	t 702	/ ^	Ý	× 1	
Agencies Notified EPA	Type Notific	ation		100000000000000000000000000000000000000		dress					닺	V ² 1	3	-	1	
☑ DEP		ıl				5050 e & Zip	Codo						5	3_	155"	
☑ DOL		nded #					NJ 07095					45		0		
☑ DOH	☐ Eme	rgency				Contac		_				Talank	1	10.27 N.L.	1	
☐ DCA		cellation			Cru		•				•	Teleph	one	Num	ber	
				F/	ACILI	ITY IN	FORMATION	J			1	8.50				
Name of Facility Wh	ere Abatem	ent is Taking Pl	ace (3)			Type of Fa	7.	lity (4)							
NJ Turnpike Inter	change 6-	9			_		School									
Street Address					5-5-5-5		☐ Subcl	hap	oter 8 (Other t	han K-12	2)					
Brick Yard Road	@ Turnpik	e Intersection	n				Other	(i.e	e. private & co	ommercia	al buildin	gs, ho	nes,	etc.)		
0: (5)		7					Square Fe					Bldg. A			-	
City (5)		County (6)	Co	unty	Code	e (7)										
Cranbury Twp.		Middlesex	11	01			Current Us	se ((Prior if being	demolis	ned)					
							Exterior									
Name of Monitoring McCabe Environn	Firm Hired b	y Building Own	er (8)		AS	SCM N		ba	tement Contra	actor (9)						
Street Address	ileiitai						AbateTec									
49 Orient Way							Street Add PO Box 2		SS							
City, State & Zip Cod	le						City, State		7in Cada	7/2						
Rutherford, NJ 07									NJ 08048							
Project Manager for I	Monitoring F	irm	Telep	hone	e Nun	nber	Telephone			1	icense N	lumber				
John Chiavello			201-	100000000000000000000000000000000000000			609-265-2				1001100 11	005				
Scheduled Start Date 3/18/13	(10)	Scheduled Com			ate (1	1)	Name of O									
Occupancy Status Di	rring Abater	nent (Check on	3/22				EMSL An			_						
Facility Close	d/Vacated [During Entire Pe	eriod o	of Ab	atem	ent	Street Add									
Abatement P	erformed Ou	utside of Norma	l Hou	ırs –			City, State					-	_		_	
Describe:							Westmon									
Facility Occup				17.00		48		, .								
Scope of Work (Chec	k all that ap	ply)		87							20 0 20 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0					
≥3 sf or ≥3 lf				D		12000				ntainme	nt with N	egative	Pre	ssure)	
≥160 sf ≥260	lf		Ħ		novati nolitio			ļ		nclosure	ure Procedures					
			Ш	Dei	HOIILIC	ווכ		ļ								
Loc	ation of		ls I	ocat	ion	1	Docorinti	Non-Exempted Description of A								
Asbesto	s-Containing	9	Norm				Asbestos-Co				nount pecify	Ab	atem	ent I	ype	
	ial (ACM)			lely			Material (or LF)			ш	_	
	ABATED acility		Maint				(i.e., thermal	sy	stems			Ren	R	าса	nc	
	(13)		Custo	(12)	otali?		insulation, surf	acı	ing, VA I	1		Remova	Repair	Encapsulate	Enclosure	
		,	Yes	No	N/A	1	or other misce	ula	ineous)			<u>ss</u>	-	ate	6	
Exterior					×		Transite C	on	nduit	60) LF		П		П	
Exterior					X		Drain 1	_		-	SF	D	H	H	H	
												T	Ħ	H	H	
												T	Ħ	Ħ	Ħ	
								- 20						Ħ	Ħ	
Name of Bosisters 4 V																
Name of Registered V	vaste Haule	r				Waste D No.	Cubic Yards of Waste		Name of Reg	istered L	andfill					
Freehold Cartage,	Inc.			l la	159		4		G.R.O.W.S	l andfill						
City, State					Disposal Date	_	City, State	-andill								
Freehold, NJ					3/22/13 Morrisville, PA											
Completed By (Print o						Signature Date										
Gwen Trumbett	i			Of	fice		3/7/13									
				Co	ord.		VXVV	XVV I								

0,		1	(Pursua	nt to NJAC	8:60 an	d 12:120)		(/ X		1		
Date of Notification (1)	1 2		Name	of Building	Owner/C		1 1 -	1	_	/		
Agencies Notified Type Notification		-		2M W.L Address	/ hity	t ta	ed Ban	K of V].	201		F 528
□ EPA □ Initial			7,	LF	Van	s To	evmin	al Rd	E .	1		
DEP Amended Amendmer				State, ZIP CI		1/ 1	07205	- 1	0	55		1
DOH Justification		ng		of Contact	- (1)	\	01005	Telephone Nu	ımbei	91,010	-	
□ DCA □ Cancellatio	n		1)(h		bty		_				/ C	
Name of Facility Where Abatement is Taki	ng Place	(3) A	JFA	CILITY INF	ORMAIT	The second secon	ype of Facility	(4)			_بر	
Street Address	rank	01	N						É		ુ	
31 Frans Term	: 1	0	1			12	Other (i.e.	er 8 (Other than K-1 private & commerc	(2) (ial bu	ilding	s, hor	nes
City (5)	INCL		ol r	***************************************		- S	etc.) quare Feet	# of Floors		Bldg.		
Fli [Sidle							185,000			80	OV	au
Union				Code (7) USE ONLY		_ c		rior if being demolis	hed)			
Name of Monitoring Firm Hired by Building	Owner (8	8)	ASC	M No	and the same of th	Name of	Abatement Co	ontractor (9)				************
Street Address						LESC		RUCES	IN	C.		
				18		Street Add	aress (YAV)	LE AVE				
City, State, Zip Code						City, State	, Zip Code	,	•			
Project Manager for Monitoring Firm			Telepho	one No		Telephone		ON. NJ.		10	57.	
1			теюрін	20 NO.	No.		406-73	241 O11	1607.	7		
Start Date (10) 02 / / 1/ / / / / / / / / / / / / / / / /		led Co	mpletion	Date (11)		Name of C	OSHA Monitor					-
Occupancy Status During Abatement (Chec	k Only O	ne)	1/_	15		LES Street Add	(A W I	NALODICA		-		
☐ Facility Closed/Vacated During Entire	Period of	Abater	ment	,				E AVE.			7	
Abatement Performed Outside of Norm Other – Describe:	nal Facilit	ty Hour	S		_							7
Scope of Work (Check All That Apply)						W/4	CC(N 6	ION NY	<u>. ن</u>	10	5/	V
D ≥3 sfor ≥3 lf D ≥160 sfor ≥260 lf		Renova				1	Full Containme	ent with Negative P	ressu	re		
2 - 100 31 01 - 200 11	ш ,	Demoli	uon				Mini-Enclosure Glovebag Prod	cedure				
-		s Locat	ion	CONTROL OF THE PROPERTY OF THE			Non-Exempted	d (*) and Non-Friab	le Pro		re ement	
Location of	-	Normal ed Sole	lly		Desc	ription of					/pe	
Asbestos-Containing Material (ACM) <u>TO BE ABATED</u>	Ma	aintena stodial S	nce/	Asbesto (i.e. t	os Contai	ning Mater ystems ins	ial (ACM) ulation.	Amount (Specify	70		Ē	E
In Facility (13)	Cus	(12)	stall?		surfacir	ng, VAT, or scellaneous		SF or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A						/al	=	ilate	ure
thrift store			X	asbe	olos o	eilino	insulation	50000	X			
)	to De ties		/-			
										1-1		
Name of Registered Waste Hauler			IDED						1	- 10		U.S.
la di C A.		H	JDEP W auler ID	No.	Cubic Ya of Waste			Registered Landfill				
City, State		(25 40		150 Disposal		City, State	2065.		************		
NEWARK NY				***************************************	0)/1	12/13		lonnis ville	D	A		
Completed by	Title		1920		1 6	+ 1	70		- 1	114		
ESLAW NALODILA		FA	DEN	-	Sign	nature	11/	Date	- /	,	1.	2

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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

* Cond date	EIS am	nenda	od		to NJAC				90.			77 50			
Date of Notification (1) 3/7/2013					f Building Ward (Operator	r (2)	2013 M	AR I	/ Ph Z				
Agencies Notified	Type Notification			Street A				-	£ 1,000	' 1	L PH Z		<u>- 111212-17</u>		
□ EPA	☐ Initial			406 S	anford A	Ave.			17.5						
DEP X DOL	Amended Amendment	. 44 4		The state of the s	ite, Zip Co				F- 4.	CEA	STAGA	01			
	Emergency	(including	_		rk, NJ 0	7103									
DOH DCA	justification) Cancellation			ivallie u	Contact					16	ephone No	mber			
				FACI	LITY INFO	ORMATI	ON								
Name of Facility Where Sarah Ward Corp.	Abatement is Takin	ig Place (3)					Ту	pe of Facility (4)					
Street Address								H	School (K-1 Subchapter		er than K-	12)			
406 Sanford Ave.								×	Other (i.e. p				ldings	, hom	ies,
City (5)								Sq	etc.) uare Feet	# o	f Floors	TI	3ldg.	Age	
Newark								20	000	2			50+		
County (6) Essex				County (Code (7) USE ONLY)		Cu	rrent Use (Prid	or if be	ng demolis	shed)			
Name of Monitoring Firm	Hired by Building	Owner (8))	ASCM	No.				batement Con						
n/a Street Address	ii - · · · · · · · · · · · · · · · · · ·	00.000.000.000.000.000		n/a		- CO - 14		200	Manageme	ent G	roup				
n/a							Street		Lane						
City, State, Zip Code							Same and the same		Zip Code						
n/a						4 85	Section Spanner		Park, NJ 07	7035					
Project Manager for Mor	itoring Firm			Telepho	ne No.	- 90	Telepl				License I	No.			- Sir-
n/a		Cabadul	10	n/a	D-1- (44)				5-7950		01193				
Start Date (10) 3-6-2013		3-19-2		mpletion i	Date (11)	i .	141199901110170		SHA Monitor Manageme	ent G	auo				
Occupancy Status Durin	g Abatement (Chec				-		Street		1	5.11. 0.		-			
Facility Closed/Vac							22 T	roy	Lane						
Abatement Perform Other – Describe:	ed Outside of Norn	nal Facility	/ Houn	S					Zip Code	7005					
Scope of Work (Check A	II That Apply)						Linc	oin	Park, NJ 07	/035					
≥3 sf or ≥3 lf	7,77	×	Renova	ation] ,	Full Containme	nt with	Negative	Pressi	re		
2160 sf or ≥260 lf		governoon	Demoli				×	의 1	Mini-Enclosure	with					
									Glovebag Proc Non-Exempted		d Non-Fria	ble Pro	cedu	re	
			Locat											emen	t
Location			Norma				scription					-	T	уре	Г
Asbestos-Containing TO BE AB	ATED	Ma	intena todial	nce/		tos Cont thermal			ial (ACM) ulation,		mount Specify	ي	77	Enc	m
In Facil (13)	ity	Cus	(12)				cing, VA niscellar			SF	or LF)	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A								a a	-	late	ıre .
Boiler R	oom			X		9>	k9 VA	T		8	0 SF	X			
						HAVE SHELD									
Name of Registered Was			2.5	JDEP W lauler ID		Cubic of Was					red Landfil	1			
Loznica Manageme	nt Corp		- 1	33137		TBD			GROW	S Lar	dfill				
City, State Lincoln Park, NJ 070	035	. *a				Dispos TBD	sal Date		City, State Morrisv		A 19067				
Completed by		Title		100		S	ignature	e,		4	D	ate			
E. Cirovic		Secr	etary	3			8.1	t	The state of the s		3	/7/20	13		

NOTIFICA (Purs

State of New Jersey ATION OF ASBESTOS ABATEMENT Suant to NJAC 8:60 and 12:120)	deak	11966
me of Building Owner/Operator (2)		. 9
011	(1104) = 1	

Date of Notification (1) 3/5/13		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	100		Building ((USA) Fu	ınd		013			
Agencies Notified	Type Notification			Street A		o, Flo	or 10,	Harbo	orside Fina	ancial Cer	nter	3	5		
DEP DOL	Initial Amended Amendment	t#	C	City, Sta	ite, Zip Co	de					G.		70		, , , , , , , , , , , , , , , , , , ,
DOH DCA	Emergency justification) Cancellation		- 1	Name of Dan D	f Contact ixon			0	. (Telenhon	e Nur	nber	٤.	5	
	l bood	V 1 10 10 1 10 10 10 10 10 10 10 10 10 10		FACI	LITY INFO	RMATI	ON							.50	
Name of Facility Where house	Abatement is Takir	ng Place (3)							of Facility (4 School (K-12			-	a marie		
Street Address 158 Weigands Lan	е							×	Subchapter & Other (i.e. pretc.)	(Other than			dings,	home	es,
City (5) Secaucus	AS ELECTION OF PRINCIPAL P								re Feet	# of Floor 2	S		ldg. A O	ge	
County (6) Hudson					Code (7) USE ONLY)			Curre	nt Use (Prior	r if being der	molish	ned)			
Name of Monitoring Firm	n Hired by Building	Owner (8)		ASCN	No.				tement Cont		LLC	;			
Street Address	7-2-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	. 0						Addres	ss Avenue, P	O Box 48	3				
City, State, Zip Code	(40.31)						City, S	State, Z	ip Code , NJ 0741						
Project Manager for Mor	nitoring Firm		T	elepho	ne No.		Teleph	none N 583-8	0.		nse N	0.	X-1		
Start Date (10) 3/18/13		Scheduled 4/18/13	Com	pletion I	Date (11)				HA Monitor						
Occupancy Status Durin	a Abatament (Cha	CONTRACTOR MADERATOR					Street	Addres	20			-	- 1		
X Facility Closed/Vac Abatement Perform Other – Describe:	ated During Entire	Period of Ab	ateme	ent					ip Code						
Scope of Work (Check A	II That Apply)									-					-
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	ттас Арріу)		novati				×	Mir Glo	I Containment Di-Enclosure Divebag Proces Di-Exempted	edure				9	
		T					L		II-LXeIIIpted	() and (40)	THE	1	Abate		
	TO THE PERSON NAMED IN COLUMN TWO IN COLUMN	*********	ocatio rmally			22000							Ту		
Location Asbestos-Containing <u>TO BE AB</u> In Facil (13)	Material (ACM) <u>ATED</u> lity	Used Maint Custoo	Solely enand	by ce/	Asbest (i.e.	tos Cont thermal surfac	scriptior aining N system cing, VA niscellar	Material s insula NT, or	(ACM) ation,	Amoun (Specify SF or LF	ý	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A										le e	
basem	ent		_	Х		fl	oor tile	9		800 SF		x		_	
														En	
Name of Registered Was Tri State Transfer	ste Hauler		На	DEP Worlder ID 325		of Was		140		Registered La Enterpris					
City, State Bronx NY			102				sal Date		City, State Waynes	burg OH				-	
Completed by Andrew Scott Higgin	s	Title Preside	ent				ignature	P)			Da 3/	te 5/13	55-50.5		
39			90075V		<u> </u>			10		ar service a	1				

STOS ABATEMENT	Flore course	
	Cleek 1196	万
	1 Milk 1116	1)

Date of Notification (1) 3/5/13				Name of May T	of Building Ferrone	Owner/O	perator	⁽²⁾ 20,	13 MAR 1		· Fox1				
Agencies Notified	Type Notification			Street A	Address	od Avenu	ie 	# 5.A	;:::::::::::::::::::::::::::::::::::::	PM 2	: 69				
DEP X DOL	Initial Amended Amendment		_	City, St	ate, Zip C son, NJ			€	E LICEA	SIMP	OL				
☑ DOH DCA	Emergency justification) Cancellation				of Contact Peters	PDR -	Agent		-	Telepho	ne Nu	mber			
Name of Facility Where	Abatement is Takin	g Place (3)	FAC	ILITY INF	ORMATIC	N	Type	of Facility (4	1					
house		J	•					[mmm]	School (K-12						
Street Address 96 Greenwood Ave	enue							×	Subchapter (Other (i.e. pretc.)				dings	, hom	ies,
City (5) Madison									e Feet	# of Floo	ors	2.0	3ldg 50	Age	
County (6) Morris					Code (7) USE ONLY	y)	_	Curre	nt Use (Prio	r if being de	emolisi	ned)			
Name of Monitoring Fire	m Hired by Building	Owner (8)		ASCN	И No.				ement Cont onmental		, LLC				
Street Address							Street A 4 E G		s Orive, PO	Box 483					
City, State, Zip Code							City, St Glenv		p Code NJ 0741	8					
Project Manager for Mo	nitoring Firm			Telepho	ne No.		Telepho 973-7			Lice 703	ense N	0.			
Start Date (10) 3/14/13		Schedule 3/21/13		npletion	Date (11)		Name o	f OSH	A Monitor						
Occupancy Status Durin	ng Abatement (Chec	k Only On	e)				Street A	Addres	S						() ()
Facility Closed/Vac Abatement Perform X Other – Describe:	cated During Entire F ned Outside of Norm	Period of A	baten Hours	nent			City, Sta	ate, Zip	o Code			(C) 150.754			
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Old Lab/Work are	a & laundry rm			X		flo	or tile			165 S	F	x			- 2 -
Name of Registered Was	ste Hauler		IN	JDEP W	aste	Cubic Y	ards		Name of Re	egistered L	andfill				
Tri State Transfer				auler ID I 2325	No.	of Waste 10	9		Minerva I	.					-
City, State Bronx NY						Disposa TBD	Date		City, State Waynesb	urg OH			E CONTRACT		
Completed by Andrew Scott Higgin	S	Title Presid	ent			Sig	nature	/	00		Dat 3/5	e 5/13			

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 6, 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 0 ☑ DEP- No Longer REQUIRED PISCATAWAY, NJ 08854 justification) X DOH Name of Contact □ Cancelled Telephone Number MICHAEL SMITH, ENV. **HEALTH & SAFETY** FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) COLLEGE AVENUE GYM, BLDG# 3097 School (K-12) ☐ Subchapter 8 (other than K-12) Street Address M Other (i.e. private & commercial buildings, homes, etc.) **COLLEGE AVENUE CAMPUS** Sq. Feet: N/A # of Floors: 3 Bldg. Age: 80+ years City (5) County (6) County Code (7) NEW BRUNSWICK **ESSEX** (State Use Only) 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 03/15/13 03/18/13 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: 5:00 PM - 5:00 AM FAIRLAWN, NJ Scope of Work (Check all that apply) □ Full Containment with Negative Pressure $\ge 3 \text{ sf or } \ge 3 \text{ lf}$ **X**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 Solely by Maint./Custodial Material (ACM) in Facility (13) (ACM) (i.e. thermal systems insulation, surfacing (Specify SF Staff? (12) VAT, or other miscell.) Remove Repair Encap Enclose or LF) NO YES NA Room 206 X VAT 240 SF Name of Reg. Waste Hauler NJDEP Waste Hauler ID # Name of Registered Landfill Cubic Yards of Waste: 5 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 03/18/13 Hauler #2) Horizon Disposal Services, Inc., Trenton, NJ 08611 Rd. Morrisville, Pa 19067 NJ DEP# 22612 215-736-1700 Completed by (Print or Type) Date RAYMOND C. PEDALINO Raymand C. Pedalino SENIOR PROJECT March 6, 2013 MANAGER

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3004	G Canoniani				TY INFORMATION		-	-	\$1 E.S		-
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-toject manager for m	ounding rum	le	sepnon	ie No.	201-329		00388				
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Date of Notification (1) 3/5/13		Na	ame o	Building Owner/Operato	or (2)	IERNO	70		, a ,	
Agency Notified Type Notification		St	rect A			· 'るな	- 19	2	١,	(1
U EPA U DEP U Amended Amendment # U Emergency (included)	ina		14)	EMALLIEN .		7087		्र े	ò	
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Name of Facility Where Abatement is Taking Pl M.C. SEU さんい Street Address	828				Type of Facility C School (K-12 Cubchapter) .	ıs.		
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Street Address				Show of these	.River St					
City, State, Zip Code				City, State, Zio	Code	J. 07601				
Project Manager for Monitoring Firm	Tele	ph and	Mc.	Totophose No.		License No. 00388				
Start Date (10) Schedules C	1 1	100		201-329 Martie of OSA	Montor					,
Occupancy Status During Abatement (Check or		13	3	Omega E	nvironmer	ital inc				
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Scope of Work (Check all that apply) □ ≥ 3 of or ≥ 250 if			Rom Dem	ation 2154	Contrinent will Find ours	Negative Pressure				7
		ocation				***			aten Type	97779
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City, State Sackensack, N.J.	0760	1	•••••	Elippeal Date	2 Vaynes	burg , Oh				
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MAY 11

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

Date of Notification (1)					Name	of Buildin	g Owner/Operat			2 2 2 4					
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Agencies Notified	Type Notifica	ation	-		Street	Address ark Aven	110	i en	3 MAR 11 F	M 2: 69					
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⊠ DHSS □ DCA	Amendme	****	ina			ew, NJ 0		5	" LICENST	IG HUL					
(NJAC 5:23-8)	justification	on)	ing			of Contac				Telephone Nu	mbe	Г			
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					FA	CILITY II	NFORMATION	Į							
Name of Facility Where	Abatement is T	Taking Pia	ace (3)				6	Type of Facility						
Private house									School (K-1:	2) 8 (Other than K-1	2)				
Street Address 375 Park Avenue									Other (i.e., phomes, etc.	rivate and comm	nercia	al bu	lding	S,	
City (5)								138000	Square Feet	# of Floors		Blo	lg. A	ge	
Fairview, NJ 07022 County (6)					Coun	ity Code (7)	(STATE USE ON	LY)	Current Use (F	rior if being demo	olishe	 ∋d)			
Bergen					100										
Name of Monitoring Fire	m Hired by Build	ding Own	er (8)	ASCM	No.	Name of Aba	teme	ent Contractor (9)	32				
Street Address						777-12-40	Gr Tech LLC Street Addres			- con viral schools avaitable states assessed				e di	
							576 Valley F	Rd #	283						
City, State, Zip Code			-		-		City, State, Z								
5							Wayne, NJ (70		<u> </u>				
Project Manager for Mo	nitoring Firm			Tel	ephone	No.	761 Telephone No. 973-638-177			License No. 01127					
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	ed Outside of No				rs - Des	scribe AM	20-21 Wagar City, State, Z		Road, Bldg .#	34A					
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Scope of Work (Check a 3 sf or >3 If 160 sf or 260 If	all that apply)	×	Ren	ovat	ion on		Full Mini-	Cont Encl	o and decontaming tainment with Ne losure g Procedure mpted (*) and No	gative Pressure	dura				
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City, State			-		000010		Disposal Date	3	City, State						
Wayne, NJ 07470					a the		TBD		Tullytown, P	A		*			
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roject Manager for h	fondoring Firm	Tol	ephon	e No.		Telephone No.	Sacre 11.	License No.				_
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City, State						Disposal Date	City, State			7		_
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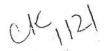
Date of Notification (1) 03/05/2013		12				Owner/Ope CAMDE			2012	* +					
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Name of Facility Where A								☐ s	of Facility (school (K-1	2)	as than K 1°	>\			
Street Address 108 NORTH PENNS	SYLVANIA AVI	≣.						X C	other (i.e. p tc.)	rivate &	er than K-12 k commercia	al build			s,
City (5) ATLANTIC CITY							- 1	2200		1	Floors	80	dg. A)+	je 	
County (6) ATLANTIC				County Co			-	CHU	RCH	1	ng demolish	ned)			
Name of Monitoring Firm MDG ENVIRONME		Owner (8)		ASCM	No.		Name o	of Abat JRED	ement Cor ENVIRO	ntractor ONME	(9) NTAL SE	RVIC	ES	NC.	
Street Address 1000 MAPLEWOOI	D DR.					1 1	Street / 570 C		s S RUN						
City, State, Zip Code MAPLE SHADE, No.	J 08052								p Code HILL, NJ	0806	2				
Project Manager for Mon TONY ESPOSITO	itoring Firm			Telephon 609-760			Teleph 610-3				License N 01145	lo.			
Start Date (10) 03/06/2013		Scheduler 03/15/2		pletion D	ate (11)	1	Name of		A Monitor		38				
Occupancy Status During Facility Closed/Vaca				nent			Street / 200 F		s 30 NORT	гн					
Abatement Perform Other – Describe:	ad Outside of Nor	nal Facility	Hours			_ [-		p Code NSON, N	J 080	77				
Scope of Work (Check A	II That Apply)									-1					
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf			enova emolit				×	Min Glo	i-Enclosur vebag Pro	e cedure				9	
		Is	Locati	on				I NOI	1-Exemple	u () ai	d Non-Friat	T	Abate		t
Location Asbestos-Containing TO BE AB In Faci (13)	Material (ACM) ATED lity	Used Mai	ormal d Sole ntena odial S (12)	ly by nce/		stos Conta . thermal s	systems ing, VA	laterial insula T, or		(Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
00.144	2405	Yes	No	N/A		PIPE IN	ICI II A	TION	1		00 LF	x			-
CRAWL S	SPACE .			X								ļ^	V	-	-
BOILER F	X				PIPE IN	ISULA	TION	1		10 LF		X			
Name of Degistered We	Name of Registered Waste Hauler					Cubic	rards		Name of	Regist	ered Landfi	1			
NETS						of Wast	te		ALLIE	D WA	STE IMPI		_LA	NDF	ILL
City, State HAZLETON, PA	+ 3					Disposi 3/18/2	013/		City, Sta		-				
Completed by RON SWANSON		Title PRO.	JECT	COOF	RDINAT		gnature	ull	W	rly	A . 4	ate 3/05/2	2013	2) pt	
ASB-41 (R-06-08)			9				* Do no	ot use t	this form fo	or asbe	stos licensu	re exer	npted	activ	ities.

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hate of Notification (1)						AMDEN	r(2)	TF				0		
gencies Notified	Type Notification			TOOL Add	ress RKET S	TREET			MAR	- 5/ 20	13		3	
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ST. MONICA'S CA	Abatement is Taking	Place (3) H	manus de la grico						12)	than K-12				halland the state of the state
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	m Hind by Building O	ener (8)		ASCM P	ło.	AS:	SUR	Abatement C RED ENVI	CONME	TAL SE	RVIC	F.S. (1	VC.	
Freet Arklinss 1000 MAPLEWOO						570	(CL	dress EMS RUN			_			
ity, State, 75p Codu VAPLE SHADE,						Gity, MU	State	e, 71p Code CA HILL. N	VJ 08062					
TONY ESPOSITO	unitoring Firm			elephono 109-760		610	30	e No 4-4676		(logness No 01145	D. 			
Start Date (10) 03/06/2013		Schaduled 03/15/20		letion Da	ato (11)	Nam		OBHA Monit	DT					
Occupancy Statut Dur	ing Aborement (Check					Stre 200	et Ad	idrese J. 130 NOI	RIH					
	med Outside of North EMERGENCY DISAS					_ City.	Stat	is, Zip Code MINSON,	NJ 080	77				**
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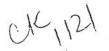
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gencies N X	EPA	Х	Emergen	cy Notificatio	1201 533	oute 1 Sou	th	871	17. 2011	FROI		
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		F: 1	l' II D	ildiaa Ouma	(0)	ASCM No.		e of Abateme	ent Contrac	ctor (9)		
Name of M E nviron n	/lonitoring	actics	lired by Bi	uilding Owne	(0)	0045	Glo	bal Abatem	ent Servi	ices, LLC		
Street Add		actics	, 1110			100.0		et Address				
64 Broad								Schoolhou				
City, State		de			PAGE 19			State & Zip				
Matawan	n, NJ 077	747						roe Towns		18831	Nivershor	
		r Monit	oring Firm		elephone 32-290-2			phone Numb -605-9062	er	License	Number 00714	
Tom Gei Scheduled		to (10)	Sch	eduled Comp				e of OSHA N	/lonitor			
Scrieduled	03/04/1		Journ		3/05/13	· ()		bal Abatem		ices, LLC		
Occupano	y Status	During	Abatemer	t (Check only	one)			et Address				
Fa	acility Clo	sed/Va	cated Duri	ng Entire Pe	iod of Aba	itement		Schoolhou				
				de of Normal		ours -		State & Zip		10024		
			Isolated	During Ab	atement		INIOI	nroe Towns	mp, NJ C	J003 I		
	ther - Des		114a-b-i									
		eck all	that apply) C Renovatio	n			Full C	ontainmen	t with Negative	Pressure	
0.000	emolition arge Proje	act	^	Nellovatio					nclosure	Ğ		
Y 0	uantity is	> 3 SF	or≥ 3 LF	ACM				X Glove	bag Proce	dure		
Λ α	uantity is	≥ 160	SF or ≥ 26	0 LF ACM				Other	: Non-fri	able		
		ocatio			Is Locat			escription of		Amount	Abater (Sacalif	nent Type : Removal,
			ntaining		Normally I			stos-Contain		(Specify Square Feet		ncapsulatio
		terial (Solely I Maintenan			aterial (ACM) thermal syste		or		closure)
		BE AB in Faci			Custodial			on, surfacing		Linear Feet)	1	
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			فليسمين		N/A			TSI		10 LF	Re	moval
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Name of	Registere	d Was	te Hauler		NJDEP Wa	aste Hauler II) #	Cu. Yds. of		Name of Reg	istered Lan	dfill
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City, Stat	te		COLUMN TO THE PARTY OF THE PART					Disposal Da 03/0	A142	City, State Tullytown,	Pa	
	hold, NJ			1200			-	Signature	4/13	i dily to wil,	. u	Date
Complete	ed By (Pri inick Tri		/pe)	Title	Manager				.1-	ringali		03/01/13
					med are not a sect of 1 to 10.							

Date of Notification (1)	Check#238	0			uilding Owner Vianney R			ZU13 M/	IR 11 PM 2				
3/4/20/3 Agéncies Notified	Type Notification			reet Add	ress e Avenue				700 n	169			,
EPA DEP DOL	Initial Amended Amendment #				, Zip Code ord, NJ 070	70		- 4. L	ICENSING"	(UL			
□ DOH	Emergency (in justification) Cancellation		1000	ame of C					Telephone Num	ber)		
□ DCA	Caricellation			FACILI	TY INFORMA	ATION	5000	-		-	-		
Name of Facility Where St John Vianney R	Abatement is Taking esidence (for retire	Place (3) re/priest)					☐ Sc	Facility (4) hool (K-12)					*
Street Address 60 Home Avenue								her (i.e. priv	(Other than K-12) vate & commercia	l buildi			s,
City (5) Rutherford, NJ 070	070		*		y 0 -		Square		# of Floors		dg. Aç	je	
County (6) BERGEN COUNT	Y			ounty Co	ode (7) SE ONLY)			Use (Prior home fo	if being demolisher priest	ed)			
Name of Monitoring Fire		wner (8)		ASCM	No.			ment Contr Corpora					
Street Address						0	Address 69th St						
City, State, Zip Code							State, Zip	Code NJ 0709	93				
Project Manager for Mo	onitoring Firm		T	elephon	e No.	Telep	hone No. -295-17		License No 01074	o.			
Start Date (10)		Scheduled				Name		A Monitor	12				
March /5- 201:		March		- 2013	S .								
Occupancy Status Duri Facility Closed/Va Abatement Perfor Other – Describe:	acated During Entire P	eriod of Ab	atem	ent			t Address State, Zip						
Scope of Work (Check	All That Apply)					Г] Full	Containme	nt with Negative F	ressur	re		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			novat moliti				× Glov	-Enclosure				e	-
		T		-				LACITIPIOG	() and Home			emen	t
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Locati Asbestos-Containi TO BE A In Fa (1	ng Material (ACM) NBATED Icility	Used Mair	ormall Sole itenar idial S (12)	ly by nce/	(i.e. the	Description Containing rmal system surfacing, Vener miscella	Material ns insulat AT, or	(ACM) tion,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
4 10 10 10 10 10 10 10 10 10 10 10 10 10		Yes	No	N/A		orrugate	d nine		10 LF	x			
Boiler	Boiler Room X					orrugate	a bibe		10 Li	-			-
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Name of Registered V	Vasta Hauler		TN	JDEP W	/aste C	ubic Yards		Name of I	Registered Landfil		-	, ii =	100
Freehold Carting						f Waste od			Management			-	
City, State PO Box 5010						oisposal Da od		City, State Tullytov	vn				
Completed by Gina Salvador		Title Office	Ma	nager		Signatu	ire E	Veuas		$\frac{3}{4}$	1/2	01	3



Date of Notification (1) 3-1-2013				Name of B Francis			perator (2) tractor.	(Page 1,2)	(2)						
Agencies Notified	Type Notification		100	Street Add				i i	**************************************	$^{1}/I_{P_{l}}$	M 2: 6	0:		2050	
EPA DEP DOL	Initial Amended Amendment	t		City, State West Ke					É LIL		linn				
☑ DOH DCA	Emergency (i justification) Cancellation	ncluding	100	Name of C Jaime R						ephone Ni	ímber	-			
				FACILI	TY INFO	RMATI	ON								
Name of Facility Where	Abatement is Taking	Place (3)					17	pe of Facility							
Residential.			-	_				School (K Subchapt	-12) er 8 (Oth	er than K-	12)				- 1
Street Address 833 Hudson St.							×	Other (i.e. etc.)	private	& commer	cial build	30			i.
City (5) Hoboken NJ. 0703	0						5.	quare Feet .000	3	of Floors	9	ldg. 0+	Age	е	
County (6) Hudson.				County Co (STATE US			c	urrent Use (F	rior if be	ing demoli	shed)				
Name of Monitoring Fire	n Hired by Building (Owner (8)		ASCM	No.			Abatement C Environme							
Street Address				1			Street Ad	dress ginia Ave.							
City, State, Zip Code							City, Stat	e, Zip Code City NJ. 0	7034						
Project Manager for Mo	nitoring Firm		T	Telephon	e No.	× 11 7	Telephor			License 01174				-	
Otest Deta (10)		Scheduled	d Cor	moletion D	ate (11)			OSHA Monit	or	10			_		X
Start Date (10) 3-5-2013		3-7-201		inpiction b	u.o ()		Green	Environme	ental S	ervices.					
Occupancy Status Duri	ng Abatement (Chec	k Only One	e)			7000	Street Ac		*						
Facility Closed/Va	cated During Entire I	Period of A	bater	nent				rginia Ave. te, Zip Code				152	-		
Abatement Performance Other – Describe:	med Outside of Norn	nal Facility	Hour	s 				City NJ 0	7304.					/	
Scope of Work (Check	All That Apply)		A	1)			[TOTAL								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enov				×	Full Contain Mini-Enclose Glovebag F Non-Exemp	ure Procedur	е			lure		
			-			-		Non-Exem	neu () a	III IVOITI	Table 1 1			ment	
- 10			Loca Iorma			D	escription o	f				_	Typ	oe	
Locati Asbestos-Containir TO BE A In Fa (1:	ng Material (ACM) BATED cility	Used Mai Cust	d Sol ritena odial (12)	ely by ance/ Staff?	Asbes (i.e.	tos Con therma		terial (ACM) nsulation, or		Amount (Specify SF or LF)	Removal	Kepan	Densir	Encapsulate	Enclosure
	<u> </u>	Yes	No	N/A		. 10	all Plaste		-	140SF	×	-	-		
1st Floor. Di			×						-	150SF	×	+	-	-	
1st Floor.		X			1 (1)	/all Plaste	.	-	50SF	×	-	-	-		
2nd Floor			X	-			Linoleum			140SF	x	+	-		
2nd Floor L			X	NJDEP W			/all Plaste		of Pogi	stered Lan	12 T	_	_	31.15	<u> </u>
	Name of Registered Waste Hauler Tri-State Transfer Assoc.					of W	ic Yards /aste	Mine	rva En	terprise.				1	
City, State Bronx-New York.						osal Date -2013	City, S Wyn		j-Ohio.						
Completed by Tiffany Nunez		Title Office	e Ma	anager,			Signature	-			Date 3-1-2	013			

Date of Notification (1) 3-1-2013		N F	ame of E rancis	Building O Genera	wner/Op I Cont	perator (ractor.	²⁾ (Pa	ge 2 of 2	2) 3 M	An .		A	in par		
Agencies Notified Type Notification EPA Initial	17		treet Add					ge 2 of $rac{2}{3}$	Q	<i>"'11</i>	Pis	2:	Re		
EPA Initial Amended Amendment #	aludina			e, Zip Cod eansbur					G (,	CENS	947	77)/		
DOH justification Cancellation	cidaling	1	ame of 0 aime F						Tele	enhone Ni	umher	1	•		
		_	FACILI	ITY INFO	RMATIC		YA .			2					
Name of Facility Where Abatement is Taking Residential.	Place (3)		w, f				☐ s	f Facility (4 chool (K-12	2)	or than V	12)				
Street Address 833 Hudson St.		ď.		4	. *		X O	ubchapter { ther (i.e. pr c.)	ivate 8	k commer			3667.		s,
City (5) Hoboken NJ. 07030							Square 5.000		3	Floors		90	lg. Aç +	je 	
County (6) Hudson.			ounty Co	ode (7) SE ONLY)		-	Curren	t Use (Pric	r if bei	ng demoli	ished)		- 5		
Name of Monitoring Firm Hired by Building O	wner (8)		ASCM	No.				ement Conti							
Street Address						Street /		a Ave.							-
City, State, Zip Code						City, St	ate, Zip		34			_			
Project Manager for Monitoring Firm		T	elephon	e No.			one No			License 01174					111
	Scheduled 3-7-2013		pletion D	ate (11)				A Monitor ironment	al Se	rvices.					
Occupancy Status During Abatement (Check	Only One)			-	-	Street	Addres	S			-	-			
Facility Closed/Vacated During Entire Po			ent			235 \	/irgini	a Ave.							
Abatement Performed Outside of Normal Other – Describe:	al Facility H	ours					tate, Zij ey City	o Code / NJ 073	04.						
Scope of Work (Check All That Apply)						I D	1			OL:					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		novat moliti				×	Min	Containme i-Enclosure vebag Prod i-Exempted	e cedure						2
	Т			- C-1-			I INOI	I-Exemple	1 () ai	id Non-Fi	- Iable I			ment	
		ocation rmall			2	2.4								ре	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Maint Custoo	Solel tenan dial S (12)	y by nce/ staff?		tos Con thermal surfa	scription taining M I system icing, VA miscellar	faterial s insula T, or		(Amount Specify F or LF)		Removal	Repair	Encapsulate	Enclosure
2nd Floor Bedroom	Yes	No X	N/A		Wa	II Plast	ter.		1	20SF		ς .		-	
Zha i looi Bearoom															
			-,					11.							
Name of Decision and Maria Variation		N	JDEP W	laste	Cubic	Yards		Name of	Regist	ered Land	dfill				
Name of Registered Waste Hauler Tri-State Transfer Assoc.		Н	auler ID 4456		of Wa					erprise.					
City, State Bronx-New York.					Dispo	sal Date 2013		City, Stat Wynes		Ohio.					
Completed by Tiffany Nunez	Title Office	Mar	nager.			Signatur	е	N. C.			Date 3-1-	201	13.		



Date of Notification (1) 3-1-2013					uilding Ov General) (Pag	ge 1 <i>2</i> 6/2),,,			9		
Agencies Notified	Type Notification		100	treet Add		19			ge 1 <i>2</i> 6/ ₂ / ₂	· An	$II \cdot P_i$	4 2:6	Q		
DEP DOL	Initial Amended Amendment				, Zip Code ansburg					410	Such Well	i inni			
DOH DCA	Emergency (i justification) Cancellation	ncluding	1 122.00	lame of C Jaime R		-		15		Tele	phone Nu	imber '-	8		
				FACILI	TY INFO	RMATIO	ON								
Name of Facility Where A Residential. Street Address	Abatement is Taking	Place (3)						Sc	Facility (4) chool (K-12) ubchapter 8 ther (i.e. pri) (Othe	r than K-	12) cial build	ings,	home	es,
833 Hudson St. City (5)								et Square	c.) Feet		Floors		dg. A		
Hoboken NJ. 07030	0							5.000	1000000000	- 11	- domali				
County (6) Hudson.				County Co STATE US	ode (7) SE ONLY)		_ '	Gurren	t Use (Prior	n ben	ig demoii	sneo)			
Name of Monitoring Firm	Hired by Building (Owner (8)		ASCM I	No.				ement Cont ronmenta						-
Street Address							Street A								
City, State, Zip Code							City, Sta Jerse		Code NJ. 0703	34					
Project Manager for Mo	nitoring Firm		T	Telephone	e No.		Telepho 201-3				License 01174				
Start Date (10) 3-5-2013		Scheduled 3-7-2013		pletion D	ate (11)				A Monitor ironment	al Se	rvices.		į.		
Occupancy Status Durir	ng Abatement (Chec	k Only One)				Street A								
	cated During Entire I			ent				-50	a Ave.						
Abatement Perform Other – Describe:	ned Outside of Norn	nal Facility F	lours			_	City, St Jerse		Code NJ 0730)4.					
Scope of Work (Check	All That Apply)				200			\$							
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			ocati					2000				= 13		ype	
Locatic Asbestos-Containin <u>TO BE Al</u> In Fac (13	g Material (ACM) BATED cility	Used Main Custo	ilena dial ((12)	ely by nce/ Staff?		tos Con thermal surfa	escription taining M I systems acing, VA miscellan	laterial s insula T, or		(Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
1st Floor Dir	ning Boom	Yes	No X	INA		Wa	all Plas	ter		1	40SF	x		1	
1st Floor. Dir			×	-	-	2 0100	all Plas				50SF	x			1
2nd Floor		+-+	×	+			inoleur				50SF	x		1	
2nd Floor Li			X		-		all Plas				40SF	x			
Name of Registered W	•			NJDEP W	/aste		Yards	-	Name of	Regist	ered Lan	dfill	-		
Tri-State Transfer	Contract of the South Contract		1	Hauler ID A456		of Wa	aste		Minerva	1 8	erprise.				
City, State Bronx-New York.					1 1 1		osal Date 2013		City, Stat Wynes	te burg-	Ohio.				
Completed by Tiffany Nunez		Title Office	Ма	nager.	. y		Signature	е				Date 3-1-20	13.		

Date of Notification (1) 3-1-2013							perator (2) tractor.	(Page 2 of	?2Y3 A	110.		**		
Agencies Notified	Type Notification		1000	treet Add				(Page 2 of	s JĀZS		PH 2	: 00	١.,	
DEP DOL	Amended Amendment				e, Zip Cod eansbur				G [ICENS,		ΩL		
DOH DCA	Emergency (i justification) Cancellation	ncluding	1000	lame of 0 Jaime F			82	2.0	Tel	ephone Nur	nber	w. (.		
	1=			FACIL	ITY INFO	RMATI	ON				2000			
Name of Facility Where Residential.	e Abatement is Taking	Place (3)						pe of Facility School (K-	12)	er than K-1	2)			
Street Address 833 Hudson St.		**					×	Other (i.e. etc.)	private	& commerci	al build			s,
City (5) Hoboken NJ. 0703	30				26		5.	quare Feet 000	3	of Floors	9	dg. A O+	ge 	
County (6) Hudson.	HERE			County C	ode (7) SE ONLY)		Ct	urrent Use (Pr	ior if be	ing demolisi	hed)			
Name of Monitoring Fir	rm Hired by Building (Owner (8)		ASCM	No.			Abatement Co Environmen						
Street Address							Street Add	dress ginia Ave.	0.					
City, State, Zip Code				7				e, Zip Code City NJ. 07	034					
Project Manager for M	onitoring Firm		Т	Telephon	e No.		Telephon 201-33			License N 01174	No.			
Start Date (10)	art Date (10) Schedu -5-2013 3-7-20							OSHA Monito Environme		ervices.				
Occupancy Status Dur	ring Abatement (Chec	A STATE OF THE STA	73-1-1				Street Ad	dress						
	acated During Entire	Period of A	batem	nent			300000000000000000000000000000000000000	ginia Ave. e, Zip Code					_	
Other – Describe						_	0.70	City NJ 07	304.	0.15				
Scope of Work (Check	k All That Apply)					0,	EVI							
≥3 sf or ≥3 lf ≥160 sf or ≥260 l	f		enova emolit				×	Full Contains Mini-Enclose Glovebag Pr Non-Exempt	ire ocedure	е			re	
		1						Non-Exemp		ind Non-inc			emen	t
Local	tion of	N	Locat	lly			escription of				-	T	уре	
TO BE A	ing Material (ACM) <u>ABATED</u> acility 13)	Mai Cust	d Sole intena odial ((12)	nce/ Staff?		therma	ntaining Mat al systems in acing, VAT, miscellaned	or		Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
2nd Floor	r Bedroom	Yes	No X	N/A	10 70 9	W	all Plaster			120SF	x			
2110 1 1001	Dedicom	1			1 7					in the same				
				NJDEP V			1.12.1	Lari Communication				L		
	Name of Registered Waste Hauler Tri-State Transfer Assoc.						ic Yards /aste			stered Land terprise.	TIII			
City, State Bronx-New York.		4 62 4 62			osal Date 2013	City, S Wyne		-Ohio.				1		
Completed by Tiffany Nunez		Title Office	e Ma	nager.			Signature				Date 3-1-20	013.		

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

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

Initial Friable Notification Check #: 5304

										Transport			
Date of Notification			Na	me of B	uild	ing Owner/Op	erat	or (2)		en			
0 3 1/10	19//1	131	11		0.000	Schools		- 13174	RII PH				
Agencies Notified	Type Noti	fication	Se	reet Ad	dres	3		i i i i i i i i i i i i i i i i i i i	- 111	21 Q	3		
[]EPA	[X]Init	ial	2	Cedar S	treet			1. 1. 1			•	i	
(X) DEP		fication	CI	ty. Sta	te,	Zip Code		~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	CEMSION .	MUL			
(X) DOL	[]Amen	ded fication	N	ewark, N	IJ 07	102			()				
[X] DOR	10770470707		Na	me of C	onta	ct		Tele	phone Numb	er	7		
DX1DCA	[]Canc	ellation	\parallel_{D}	ouglas P	Bland	, Bus. Admir	1	- 1					
			11-			INFORMATION							
Name of Facility W	nere Abate	ment is Ta	aking	2012				Type of Facil:	ty (4)				-
Dragow Avenue Cab	1							XI School	(K-12)				
Bragaw Avenue Sch	001							[]Subcha	(i.e., pr	her 1	than & co	K-12	2) C-
								cial Square Feet	wildings.	homes	ida.	Age	
103 Bragaw Avenue		County	7 (6)		17	ounty Code (->-	45000	3	1	0 yea		
City (3)		Codire	, (0)			STATE USE ON		Current Use (1					ed)
Newark, NJ 07112		Essex						School					
Name of Monitoring Owner (8)	Firm Hire	d by Build	iing	ASCM N	0.	Name of A	bate	ment Contractor	(9)				
Whitman Companies	, Inc.			00110		Four Stro	ng B	uilders, Inc.					
Street Address						Street Ad	dres	is					
116 Tices Lane, Unit	B-1					180 Sarge							
City. State. Zip Co	ode					City. Sta	te,	Zip Code					
East Brunswick, NJ (08816	or Cinn I	ים ומי	V	-6	Clifton, N.			11:0	nse	V		
	MOUTCOLL										читы	E L	
Kevin Lovely Scheduled Start Date	e (10) 13	Sched.Com	/32-3	90-5858	ar	973-614-0			008	07			
0 3 / 1 5 / 1 1 5 / 1 1 1 1 1 1 1 1 1	1 3 Year	0 3 1/1	1 8 Day	1/11/2 Yea	-	Four Stro	ng B	uilders, Inc.				-	
Occupancy Status Du []Facility Close				_		Street Ad							
of Abatement []Abatement Perf Hours - Descri	formed Out:	side of No				180 Sarge	eant te.	Avenue Zip Code			-		
[X]Other - Descri		Carrier and Carrier and Carrier				Clifton, N.	J 070	013					_
Scope of Work (Chec		apply)	00000000			[X]	Full	. Containment w	th Negativ	ve Pr	essu	re	*
[]Demoliti [X]>3 sf or []∑160 sf	>3 If	f	(X)	Renovat	ion	[]	Mini Glov	-Enclosure vebag Procedure -Friable Proced					
			Loc	Is ation				· · · · · · · · · · · · · · · · · · ·		Aba	teme	nt T	ype
Locati Asbestos-C			Nor	mally sed		Descri Asbestos-			Amount	RE	100	N	N
Material TO BE	(ACM)		So	lely Main-		Materia (i.e., ther	1 (A	ICM)	(Specify		R E P	A	T. 0
in Faci	lity		ten	ance/		insulation.	surf	acing, VAT,	LF)	V	A	S	S
. (13			Sta	ff(12)	40	or other	mrsc	ellaneous)		A L	R	L	R
Basement Boiler Roo	nm		Yes	No N/A	Pine	e Insulation			20 LF	1X	-	·	E
Dascinent Boiler Ho					i ibe	insulation			20 Li	+^	-	-	-
					-					+-	-		-
Name of Registered	Marka Man	0.7	LN	DEP Was		Cubic Yard		IV					
want of wedtareted	masce nadi			uler ID		of Waste		Name of Regis	rered rand				æ 10
Four Strong Builders	, Inc.		12	2609	100			G.R.O.W.S., In	C.				
City. State			11/			Disposal D	ate	City, State					
Clifton, NJ							Tullytown, PA						
Completed By (Print	or Type)	Title	11.1	7 (-	Signa	ture			D.	ate		
Bilyana Kulakovska		Office Ad	dmini	strator		(t	5.0	an		3	/5/13	3	
ASB-41 JUN 95								<u></u>		10			(1



03/05/2013 Check#2381		()IIIr I a	dy of M	ount Ca	perator armel		h and Sc	hool	.0 17	981	,		+ \$41
Agencies Notified Type Notification		Street Ad	•					11001	2013 M	1	1-1	110	
		99 Bro		į.						100	C.	<	(10
EPA Initial Amended Amendment #			te, Zip Co City,N.	ode J 07306	 3				- 52 L1	CEL	SIN	C/R	Οį
DOH justification) Cancellation		Name of F. Mich	Contact nael Sa	ntoro			4		ephone Nu	mber			
		FACII	LITY INFO	ORMATIC	ON								
Name of Facility Where Abatement is Taking Place (Ethical Community Charter School	3)					-	of Facility (4						
Street Address					-		School (K-12 Subchapter 8		er than K-1	2)			
95 Broadway					10±3		Other (i.e. pr				dings,	home	es,
City (5) Jersey City, NJ 07306	A					Square 50,00		3	f Floors	1000	Bldg. A	ge	
County (6) Hudson		County C	Code (7) JSE ONLY)		Currer	nt Use (Prio ool	r if bei	ng demolis	hed)			
Name of Monitoring Firm Hired by Building Owner (8) McCabe Environmental Services		ASCM	l No.				ement Cont es Corpor						
Street Address 464 Valley Brook Avenue					Street	Addres 69th S	s			110		1	1000000
City, State, Zip Code Lyndhurst, NJ 07071					City, S	State, Zi		93			-		
Project Manager for Monitoring Firm Jim Ruff		Telephor	ne No. 88-4839		Teleph	none No 295-1).		License N	No.			
Start Date (10) Schedul		mpletion [Name	of OSH	A Monitor		0.07.			-	
3/16/2013 3/18/2						e as al			400				
Occupancy Status During Abatement (Check Only O Facility Closed/Vacated During Entire Period of Abatement Performed Outside of Normal Facilit Other – Describe: Starting @ 10:00 AM	Abate	ment rs			1507-4-1-700-5-7-91	Addres			-				
	Renov Demol				×	Min Glo	Containme i-Enclosure vebag Proc n-Exempted	edure	-			e	
	Loca	tion									Abat	emen	t
Location of	Norma	ally		Des	cription	of					Ty	ре	_
Asbestos-Containing Material (ACM)	inten	Staff?		tos Conta thermal	aining N system: cing, VA	Material s insula T, or		(5	mount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
Yes	No	N/A										ĕ	
Boiler Room x				Pipe	Insula	ation		2	22 LF		x	_	-
	15.0									-			
Name of Pegistared Waste Haules		NJDEP W	lacte	Cubic \	Varde		Name of E	Penietr	ered Landfi	1	v _{ii}		
Name of Registered Waste Hauler Freehold Carting		Hauler ID 15939		of Was			Waste N						100
City, State PO BOX 5010				Dispos	al Date		City, State Tullytow		Α				
Completed by Title Gina Salvador Office	e Ma	anager		Si	ignature	M.	us-			ate /5/20	13		

Jy?

Date of Notification (1) D3 - D5 - 20#3 Agencles Notified Type Notification			Name of	Building WC Address	Owner LS	Operator (2 H G	y tes	2013	MR ! !-	PH.	2: n		
DOH DCA Initial Amended Amendment Emergency (justification) Cancellation	THE RESIDENCE AND ADDRESS OF THE PARTY OF TH		City, St	ate, Zip C	ode H	CEZCA	N.T	0		MI MG	ROL		
Name of Facility Where Abatement is Taking PRIVATE Street Address 48 - Jeffer Son			FAC	ILITY IMP		TON	ype of Facility School (K-	·12) er 8 (Ot	her than K-1 & commerc	2) ial bu	ildings	s, hon	nes,
City (5) Short Hills N County (6)			O7 S	Code (7) USE OML)	7	2	quare Feet , 900 Sourrent Use (Pr	⊋ 3 for If be	of Floors Storie sing demolis	5	Bidg.	77.	
Name of Monitoring Firm Hired by Building C	Owner (8)		ASCI	M No.		SHARO Street Ad	Abatement Co ON QUALIT	ntracto TY CC					
City, State, Zip Code						City, Stat HACKE	e, Zip Code ENSACK		07601				
Project Manager for Monitóring Firm Start Date (10) 13-14-2013 Occupancy Status During Abatement (Check	Scheduled	Con		Date (11)		SAN	8-4270 OSHA Monitor ATR - T		License N 01135		<u>эк</u>	s L	AR
Facility Closed/Vacated During Entire P Abatement Performed Outside of Normal Other – Describe:	eriod of Ab	aten	ent			155'	oress 1 - OAK e, Zip Code hata	Be	IDGE	D	٤. ٩	<u>.</u> 30 (
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		nova molit				Š	Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	e cedure			29	P	
Location of	No	ocati mal	У		Das	cription of		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Abate	omeni pe	1
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	-	tenar	ice/	Asbes (i.e.	tos Cont thermal surfac	aining Mate systems in sing, VAT, o siscellaneou	or I	(3	mount Specify For LF)	Removal	Repair	Encapsulate	Enclosure
Boiler Rowy Basement		×	IWA	Pip	E Z	nsolar	i [†] e3024	18	2 LF	X			
Name of Registered Waste Hauler Sharon Quality Co City, State Hacken Sack N.		T)			Cubic of Was	te # Cy al Date	TRI	57	ATE.		rv		0.5
Completed by CARLOS ESQUIVEL	Title SAFET			ER	-	gnature Bejv	influft	W/	Dal	_			