State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

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Date of Notification (1)					Nam	e of Buildin	g O	wner/Operator ((2)		1		"		1000	- 1
	07 /	19				wnship o			/		MAI	R 1	2 1	ากขก	t	
Agencies Notified	Type Notifi	cation			Stree	et Address				-	1/1/-/1	ш	6- 6	2019	+	41.7
☑ EPA ☑ DOLWD	☐ Initial	1 00			10	11 Coope	rS	treet							1	
☑ DOH		7.000			City,	State, Zip (Code	е	70		100		-		4.	
□ DCA	☐ Emerge	-	ludina		De	ptford, N	J 08	8096						2.57; = ·		
(NJAC 5:23-8)	justifica		dunig		Nam	e of Contac	:t			T	elephone	Numb	er			_
	☐ Cancella	ation			Do	nald Ban	ks				856-686					
					FA	CILITY IN	IFO	RMATION								
Name of Facility Where A		Taking I	Place	(3)					Type of Facility	(4)						
Deptford Municipal	Building								School (K-1	2)						
Street Address									Subchapter	8 (C	ther than	K-12)				
1011 Cooper Street									Other (i.e., homes, etc	priva .)	te and cor	mmer	ial b	uilding	js,	
City (5)									Square Feet	,	# of Floors		B	ldg. A	ne .	
Deptford									50,000		2			96	90	
County (6)					Cou	nty Code (7)(ST	ATE USE ONLY)	Current Use (P	rior i		moliek	- 1	50		
Gloucester							/\		Municipal I			11101151	icu)			
Name of Monitoring Firm					ASCM	No.	Na	ame of Abateme	ent Contractor (9		5	-				
Management & Envi	iro. Consu	Iting S	ervic	es			1		nmental, LLC	05.0						
Street Address							-	reet Address								
PO Box 341							(623 Cutler Av	enue							
City, State, Zip Code								ty, State, Zip Co								
Chesterfield, NJ 085	15							Maple Shade,								
Project Manager for Monit	oring Firm			Tele	phone	No.		lephone No.			License No	0				
Bill Weisgarber				60	9-298	-4070	8	356-755-0099			00842					
Start Date (10)		Schedul	ed Co	mple	tion Da	ite (11)	Na	me of OSHA M	onitor				_		_	-
03 /06 / _	19	03	_ /	_ 14	_ /	19	E	EMSL Analyti	cal, Inc.							
Occupancy Status During	Abatement ((Check o	nly or	ne)				eet Address								
□ Facility Closed/Vacated	During Enti	ire Perio	d of A	bate	nent			200 Route 130	North							
☐ Abatement Performed	Outside of N	lormal Fa	acility	Hour	s - Des	cribe		y, State, Zip Co								
Time of Abatement:	AM	PM/_		_PM-		AM		Cinnaminson,								
Scope of Work (Check all t	that apply)								, 110 00077							
□ >3 of or >3 If	1000 000	K	7.5					☐ Full Conta	ainment with Ne	gativ	e Pressur	е				
\boxtimes \geq 3 sf or \geq 3 lf \boxtimes \geq 160 sf or \geq 260 lf			Ren Den					☐ Mini-Enclo	osure							
		_	_ DCII	TOTAL	***			⊠ Non-Exen	npted (*) and No	n-Fr	iable Proc	edure				
				ocat								700010	20008	ateme	ent Ty	/ne
Location o Asbestos-Containing M			Used	ormal				Description of								
TO BE ABAT	ED	⁽¹⁾		ntena		Asbes	tos	Containing Mate ermal systems in	erial (ACM)		Amount		Remova	Repair	inca	Enclosure
IN Facility			Custo		Staff?	(1.0.	, tile	surfacing, VAT,	or		(Specify SF or LF)		ova	≝.	sde	nso
(13)			/00	(12)	NI/A			her miscellaneo					-		Encapsulate	ē
and El Or D		_	'es	No	N/A										(D	
2 nd Floor Storage Rooi	m	L]			Floor Til	e a	nd Mastic			414 SF		\boxtimes			
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		Т	7	П										-	님	
Name of Registered Waste	Hauler				JDEP V	Vaste	Cub	oic Yards of	Name of Desi		11 160			Ш	Ш	
Freehold Cartage	, idaio,			183153	auler IC		Was		Name of Regis							
City, State					15939		1		Fairless La	TDIII	111					
Freehold, NJ						13		oosal Date	City, State	-						
Completed By (Print or Typ	0)	Title					U.	3/14/2019	Morrisville	, PA						
Christina Lynch	c)	Title	D	o; -l -				Signature				Date			CONTROL FOR	
SR-41		vice	rre	sidei	IT OT C	perations	S	Model	\leq			3,	17.	119		

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

Date of Notification (1) 03/04/2019	B*			of Building ata Kalle		Operato	r (2)			<u> </u>	== 11	VS		
Agencies Notified Type Notification X EPA Initial	1			Address						MAR	12	2019	1	
X		_		tate, Zip C on, NJ 08					makety		4,7,			
☑ DOH justification ☐ DCA Cancellation)			of Contact ata Kalle					Те	lephone N	lumber			10.5
Name of Facility Where Abatement is Taki	ng Place (3)	FAC	ILITY INF	ORMAT	ION	Туре	of Facility	(4)					
Street Address City (5)							X C	other (i.e. p tc.)	r 8 (Oth private	ner than K- & commer	·12) rcial bu			nes,
Edison							N/A	e Feet	# c	of Floors A		Bldg. N/A	Age	
County (6) Middlesex				Code (7) USE ONLY)		Currer		ior if be	ing demol	shed)			
Name of Monitoring Firm Hired by Building N/A	Owner (8))	ASCI	M No.				ement Cor ement, In		(9)			1	
Street Address						1000000	Address	s ren Avei	nue					
City, State, Zip Code							State, Zip	Code 07512						
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph	none No 345-86			License 01311	No.			
Start Date (10) 03/14/2019	Schedul 03/15/2		mpletion	Date (11)				A Monitor ment, In						
Occupancy Status During Abatement (Chec Facility Closed/Vacated During Entire	Period of	Abaten	nent			Street	Address							
Abatement Performed Outside of Norr Other – Describe: Occupied	nal Facility	/ Hours	5		_		itate, Zip wa, NJ	Code 07512						
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf						F	7							
≥ 160 sf or ≥260 lf	-	Renova Demolit				×	Mini- Glov	Enclosure ebag Proc	e cedure	Negative				
		Locati				- Lauren	11011	Exempled	1 () aiii	u Non-i na	DIE FI	Abat	emen	t
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	Normal d Sole intenai todial S (12)	ly by nce/		tos Cont thermal surfac		laterial (. s insulati T, or		(S	mount Specify or LF)	Remova	Repair	e Encapsulate	Enclosure
	Yes	No	N/A								<u>a</u>		late	ľе
Kitchen & Laundry Room		Х			Lii	noleum	n		21	0 SF	Х			
							- Table	-				-		
N (D.)														
Name of Registered Waste Hauler D&S Abatement, Inc.		Н	JDEP W auler ID)996		of Was			Name of F Fairless		red Landfi fill	II			
City, State Totowa, NJ						al Date		City, State Morrisvi		Α				
Completed by Oliver Hegedis	Title Projec	ct Ma	nager		Si	gnature	1 1			D	ate 3/04/2	2019		

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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) 03/04/2019 Stevens Institute of Technology Agencies Notified Type Notification Street Address MAR 1 2 2019 1 Castle Point on Hudson **EPA** Initial City, State, Zip Code DEP X Amended × DOL Amendment # 1 Hoboken, NJ 07030 Emergency (including DOH Name of Contact justification) Telephone Number DCA Cancellation Kevin Klich 551-655-9149 FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Williams Library School (K-12) Street Address Subchapter 8 (Other than K-12) 1 Castle Point on Hudson Other (i.e. private & commercial buildings, homes, City (5) Square Feet # of Floors Bldg. Age Hoboken N/A N/A N/A County (6) County Code (7) Current Use (Prior if being demolished) Hudson (STATE USE ONLY) Williams Library Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Briggs Associates 0004 D&S Abatement, Inc. Street Address Street Address 3 Crosswicks Street 11 Rosengren Avenue City, State, Zip Code City, State, Zip Code Bordentown, NJ 08505 Totowa, NJ 07512 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Michael Hoodak 609-298-5520 973-345-8685 01311 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 03/15/2019 03/18/2019 D&S Abatement, Inc. Occupancy Status During Abatement (Check Only One) Street Address Facility Closed/Vacated During Entire Period of Abatement 11 Rosengren Avenue Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: Occupied Totowa, NJ 07512 Scope of Work (Check All That Apply) ≥3 sf or ≥3 If Renovation Full Containment with Negative Pressure ≥160 sf or ≥260 If Demolition Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Abatement

Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	Normal ed Sole intenai todial S (12)	ly by nce/	Asb (i.	Description of estos Containing Mate e. thermal systems ins surfacing, VAT, o other miscellaneou	sulation, or	Amount (Specify SF or LF)	Removal	Repair	e Encapsulate	Enclosure
	Yes	No	N/A					<u>a</u>	=	ilate	ure
Basement		Х			VAT & Mastic	;	460 SF	X			
	-										
Name of Registered Waste Hauler D&S Abatement, Inc.		H	JDEP Wa		Cubic Yards of Waste		Registered Landfil	1			

Fairless Landfill 20996 TBD City, State Disposal Date City, State Totowa, NJ TBD Morrisville, PA Completed by Title Signature Date Oliver Hegedis Project Manager 03/04/2019

KILLEGS PATT		NOTI	FICATION	State of New Jer ON OF ASBESTO nt to NJAC 8:60	S ABATE	EMENT (0)		n.n.n	(P)	G		V7	
Date of Notification (1) 03/06/19			Name Rose	of Building Owne Mary Potter	r/Operato	r (2)		M	IAR	1 2	20)19	-
Agencies Notified Type Notification	1		Street	Address						1 2		IJ	- 1 -
EPA Initial Amended Amendmen			City, S	State, Zip Code				-perft.			١.,١	24	4.4
Emergency			Hasb	rouck Heights	NJ 076	04			1 1-15				
DOH justification Cancellatio)	.9		of Contact Mary Potter			Te	elephone	Num	ber	-		
Name of Facility 141				CILITY INFORMA	TION								
Name of Facility Where Abatement is Taki Residential	ng Place	(3)				Type of Facil	ity (4)						
Street Address						School (Subchar Other (i. etc.)	K-12) oter 8 (Oth e. private	ner than & comm	K-12) nercial	l bui	ldings	, hom	ies,
City (5) Hasbrouck Heights NJ 07604						Square Feet 7,500	2	of Floors			3ldg. /	_	
County (6) Bergen				Code (7) USE ONLY)		Current Use (Residentia	Prior if be	ing dem	olishe	d)			
Name of Monitoring Firm Hired by Building Omega Environmental Services In	Owner (8 C	3)	ASC	M No.	Name Turn	of Abatement (Contractor	r (9)	oratio	n			
Street Address 280 Huyler Street					Street	Address Cranbury R							
City, State, Zip Code S. Hackensack NJ 07606					City, S	tate, Zip Code							
Project Manager for Monitoring Firm Ray Montes			Telepho 973-4	one No. 89-8700	Teleph	one No. 372-2177		Licens 01238					
Start Date (10) 03/16/2019	Schedu 03/18/			Date (11)	Name	of OSHA Monit Analytical I							
Occupancy Status During Abatement (Chec	k Only O	ne)				Address	_abbiati	JIIES		_			
Facility Closed/Vacated During Entire I Abatement Performed Outside of Norn	Period of	Abaten	nent			Vest 36th St	reet						
Other – Describe: Floor shall be vacate	d during	abatem	ent			ate, Zip Code York NY 100	013						
Scope of Work (Check All That Apply)	_												
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit			×	Full Contain Mini-Enclose Glovebag Pontage Non-Exemp	ure rocedure					a	
	1 522	Locati	50000								Abate	ment	
Location of Asbestos-Containing Material (ACM)	Use	Normal ed Sole aintenar	ly by	Asbestos Cor	escription taining Ma	of aterial (ACM)	Δ,	mount	-		Ту		
TO BE ABATED In Facility (13)		todial S (12)		(i.e. therma surfa	l systems icing, VAT miscellane	insulation, , or	(S	specify or LF)		Remova	Repair	Encapsulate	Enclosure
Basement	Yes	No	N/A	D:								fe	(D
Dasement		X		Pipe	insulat	ion	60	0 SF	-	Х			
						Anch Phillips of the							
Name of Registered Waste Hauler		N	JDEP W	acto Cubia	Yards	- N	(D-) :						
Fri-State Transfer Associates		Ha	auler ID S1896	No. of Wa			f Register /a Enter			ocia	ites		
City, State Bronx NY 10474				Dispo	sal Date	City, Sta	ate esburg,	OH 44	688				\neg
Completed by Emeka Okeke	Title Presi	dent		5	ignature	me	00		Date 03/06	6/19	9		
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Date of Notific 3/6/19	cation (1)					Building ((6)	(2)			EC	F	7	7	
Agencies Noti	ified	Type Notification			Street Ad	ddress										100
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EPA DEP				F	City, Stat	te, Zip Co	de				1	: MAF	172	2 20	19	13
× DOL		Amendment				, NJ 07										1
X DOH		Emergency		H	Name of	Contact					Tele	ephone Nu	mber.	ir di	1.7	
H DCA		justification) Cancellation			Debbie	Cairns	, Plym	outh								9
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Name of Facil	lity Where	Abatement is Takin	g Place (3)					Ту	pe of Facility (4)					
home									П	School (K-1	2)					
Street Addres	S									Subchapter	8 (Oth					
									×	Other (i.e. p	orivate 8	k commerc	al build	lings,	home	s,
City (5)									Sa	uare Feet	# of	Floors	В	ldg. A	ge	
Hazlet									1 :	900	2			4		
County (6)				- 1	County C	Code (7)		-		rrent Use (Pri	or if bei	na demolis	hed)			
Monmouth					(STATÉ U	ISE ONLY)	-		ho	ome		7				
Name of Mon	itoring Firm	Hired by Building	Owner (8)		ASCM	l No.				batement Cor vironmenta			2			
Street Addres	SS							Street	Add	Iress						
					*			4 E	Gat	e Drive, PC	Box	483				
City, State, Zi	p Code							City, S	State	, Zip Code						
								Gler	nwo	od, NJ 074	118					
Project Manag	ger for Mor	nitoring Firm			Telephor	ne No.		Telepi	hone	No.		License N	lo.			
								973-	-764	1-2276		703				
Start Date (10	0)		Schedule	ed Con	npletion [Date (11)		Name	of C	SHA Monitor						
3/9/19			3/16/1	9												
Occupancy S	tatus Durin	g Abatement (Che	ck Only Or	ne)			*******	Street	Add	Iress						
× Facility 0	Closed/Vac	ated During Entire	Period of	Ahaten	nent											
Abateme		ed Outside of Norr						City, S	State	, Zip Code						
Scope of Wor	rk (Check A	II That Apply)		57:33:33							-	17.725			-	
□ ≥3 sf or i	>3 If	(8/05 - 50/59)	X F	Renova	tion			[5	×	Full Containm	ant with	Negative	Draceii	ro		
-	or ≥260 If		in the same of	Demolit						Mini-Enclosure	е	rivogativo	10334			
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	Location			Normal ed Sole				escription						Г		
Aspestos-	Containing TO BE AB	Material (ACM)	Ma	intena	nce/					rial (ACM) sulation,		mount Specify	Z	_	Enc	찍
	In Faci		Cus	todial S (12)	Staff?		surfa	cing, VA	AT, o	r		or LF)	Remova	Repair	Encapsulate	Enclosure
	(13)			(12)			other	miscella	neou	ıs)			oval	air.	ula	sure
			Yes	No	N/A										6	
living re	oom, hall	, back office			х		f	loor tile	е		3	60 LF	х			
														1122		
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Newark Ca	arting			100	4509	. 10.	TBD			Grand	Centr	al Sanita	ry Lar	ndfill		
City, State								sal Date	е	City, Sta	te					-
Newark, N.	J						TBD			Pen Ar		Α				
Completed by			Title					Signatur	re	1	57.		ate			
A. Scott Hi			100 C.	ident		-	18		S-753	11_			6/6/19			

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Date of Notification (1) 3/8/19					of Building						M	AR	1 2	20	110	
Agencies Notified	Type Notificatio				n Feldm	ian Priv	ate Ho	ome		4 4 4			, 2	41	113	1
la d	1 200	H		Street	Address											
EPA DEP	Initial .			City Of	-1. 7: 0						-		34			
X DOL	Amended Amendmen	nt #			tate, Zip C ladies N						14. (2.16)					
	Emergency	(including	_				18									
DOH DCA	justification				of Contact					Tei	lephone	Numb	er			
LI DOA	Cancellatio	n		Brian												
Name of Facility Where	Abatement is Taki	na Place /	31	FAC	ILITY INF	ORMAT	ION	1~								
Brian Feldman Pr	ivate Home	rig i lace (3)					Тур	e of Facility	8 9						
Street Address		-							School (K-	12)		VE-1998 0175				
									Subchapte Other (i.e. etc.)	r 8 (Oth private	er than I & comm	K-12) ercial b	ouildi	ings,	hom	es,
City (5)	1							Squ	are Feet	# 0	f Floors		Blo	dg. A	ae	
Loveladies NJ 080	008							100	00	1			1	5+	3-	
County (6)					Code (7)			Curr	ent Use (Pr	ior if bei	na demo	olished				
Ocean				(STATE	USE ONLY	n		F1 (1)	use			Jiionica	,			
Name of Monitoring Firm	n Hired by Building	Owner (8))	ASC	M No.		Name	of Ab	atement Co	ntractor	(9)			-		
N/A							1	naco								
Street Address							Street	Addre	ess	-			-			
							PO	Box 3	329							
City, State, Zip Code							City, S	State, 2	Zip Code							
							Wes	st Ber	lin NJ 08	091						
Project Manager for Mor	nitoring Firm			Telepho	ne No.		Teleph	hone N	lo.		Licens	e No.			-	-
							856-	-753-	9800		0072					
Start Date (10)		Schedul	ed Cor	npletion	Date (11)		Name	of OS	HA Monitor							
3/18/19		3/22/1					Sam	ne								
Occupancy Status Durin	g Abatement (Che	ck Only Or	ne)				Street	Addre	SS				- 1	11878		_
X Facility Closed/Vac	ated During Entire	Period of A	Abaten	nent												
Abatement Perform Other – Describe:	ed Outside of Norr	mal Facility	Hours	5			City, S	tate, Z	ip Code					_		
						_										
Scope of Work (Check A	II That Apply)															
≥3 sf or ≥3 lf			Renova	tion] Fu	II Containm	ent with	Negativ	e Pres	cura			
≥160 sf or ≥260 lf		X	emolit	ion			-	Mi	ni-Enclosure	9	ivegativ	e ries	sure			
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Location Asbestos-Containing			d Sole		Achoo	Des tos Cont	scription	of		2		\vdash		1		
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		Yes	No	N/A											te	Ф
Exterior S	iding			х		Exter	rior Sic	dina		1	200	x	1	\exists		
						- Children Cove	Walter States			-		-	+	+	-	
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Name of Registered Was	te Hauler		134	JDEP W		Cubic '			Name of I	Register	ed Land	Ifill				
United Roll Off			12.0	auler ID	No.	of Was	te		G.R.O.	W.S						
City, State				2459		4 Diana	-10									
Elm NJ						3/22/	al Date		City, State		4000					
Completed by	547 CAIN A 4 ⁴ 5 E-10 E-2	Title				To a little of the	2006 and		Morrisv	IIIE PA						
Anthony T Perna		Presi	dent			Si	gnature	-				Date	_			
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State of Now Jamey NOTIFICATION OF ASBESTOS ABATEMENT 200											
ASAG PAULU	14011						i managar and a	-			
Date of Natification (1)	_		Name	of Building	Owner/Operator (2)		/			-
03 / 07 / 1	9		Shi	loy Rayr	or .	-	17/				
	1		Street	Address			L.V.				
						MIRINE	T ALLSON	17.17		-	
☑ DOH Amendment	_						_,.vr		me course of the		
	including				A CONTRACTOR OF THE PARTY OF TH		Telephone Nun	nber		-	-
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N. Cont.			FAC	CILITYIN	FORMATION		A				
	ng Placs	(3)									
			1			Subchapter !	(Other than K-1	2)			
Abmestigated						homes, etc.)	livate and comm	ercial bu	IIIqing	\$.	
					***************************************		# of Floors			16	0.1
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			Cour	ily Code (i	rystate use only		or it being dema	lisheq)			
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107.12											
		Tel	enorige	No.			License No.	·			
Blil Weisgarber		8	09-298	-4070	856-756-0095		00842				
					750						
				18		JCRL INC.			-		
			erriant?			IO North					
Abstoment Performed Outside of Norm	nd Facilit	y Hou	rs - Des	scribe					-		
	PMI	_PM		AM	Cinnaminson	n, NJ 08077					
Scope of Work (Check all that apply)					Full Con	tainment with No	sative Pressure				
2 ≥3 sf or ≥3 #	E R	Byond	lon		Mni-En	Hosuri					
	0112220				□ Non-ax	ptod (*) and No	in-Frishlip Proces	THE OWNER WHEN			_
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4SB-41 (R-05-05)					-		s this form fo	or asbes	tos licens	sure exer	npled	activi	ties

NOTIFICATION OF ASBESTOS ABATEMENT Check#3285 (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 03 08 / 19 Colleen Gregoria 2019 12 Type Notification Agencies Notified Street Address ☐ EPA ✓ Initial X DOLWD Amended City, State, Zip Code X DHSS Amendment # Plainfield, NJ 07062 ☐ DCA Emergency (including) (NJAC 5:23-8) Name of Contact justification) Telephone Number Cancellation Colleen Gregoria FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Private house School (K-12) Subchapter 8 (Other than K-1 2) Street Address Other (i.e., private and commercial buildings, homes, etc.) City (5) Square Feet # of Floors Bldg. Age Plainfield, NJ 07062 County (6) County Code (7) (STATE USE ONLY) Current Use (Prior if being demolished) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Gr Tech LLC Street Address Street Address 576 Valley Rd #283 City. State, Zip Code City, State, Zip Code Wayne, NJ 07470 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 973-638-1777 01127 Scheduled Completion Date (11) Start Date (10) Name of OSHA Monitor 03 / 18 / 19 03 / 19 / 19 Envirovision Consultants, Inc Occupancy Status During Abatement (Check only one) Street Address X Facility Closed/Vacated During Entire Period of Abatement 20-21 Wagaraw Road, Bldg .# 35E Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: _____AM-____PM/ PM___ AM Fair Lawn, NJ 07410 Scope of Work (Check all that apply) Clean up and decontamination with negative pressure Full Containment with Negative Pressure >3 sf or >3 If = 160 sf or 260 If Renovation Demolition Mini-Enclosure Glovebag Procedure Tent with Negative Pressure Non-Exempted (*) and Non-Friable Procedure is Location Abatement Type Normally Location of Description of Repair Used Solely by Remova Encapsulate Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED (i.e., thermal systems insulation, (Specify Custodial Staff? IN Facility surfacing, VAT, or SIF or LF) (12)(13)other miscellaneous) Yes N/A No \boxtimes Basement Pipe insulation 120 LF П NUDEP Waste Hauler ID No. | Cubic Yards of Waste | Name of Registered Landfill Name of Registered Waste Hauler Gr Tech LLC 0033785 TBD T.R.R.F. Inc City, State Disposal Date City, State Wayne, NJ 07470 TBD Tullytown, PA Completed By (Print or Type) Title Signature Date Teutic Wenad N.Jevtic Owner 03/08/19 ASB-41

State of New Jersey



Clett 1304

Date of Notification (1)		Name	of Building	Owner/Operator (2)				CICEF 1.	, 0	1			
3/8/19		1		ty Department o	f Public	Works		3 0	F	П	n/		
Agencies Notified Type Notification		_	Address					7 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		-13	125		
☐ EPA ☑ Initial		1 Be	rgen C	unty Plaza									
☐ DEP ☐ Amended		City, St	ate, Zip Co	de				1/40	1 .	. ,	2010		
■ DOL Amendment #		Hack	ensack	, NJ, 07601			34.1	MAR	1 2) (1019		200
☐ Emergency (including	g	Name o	of Contact				Telephone Number	er					
		Scott	t Luna				201-336-680	04		-	4.		u'
□ DCA □ Cancelation			F.A.		7011			* 6 6				-	
Name of Facility Where Abatement is Taking Place (3)			FA	ILITY INFORMAT		. F.F 112 (f)		200 10 100 100	Water Co	H. H. J. L. Y	100-1	2776	
Bergen County Justice Center Courtho	HISE				1	of Facility (4)							
Street Address						School (K-1	•						
10 Main St.							8 (Other than K						
lo Mair St.					X	Other (i.e. p	orivate & Comm	ercial buildir	igs, h	ome	s, etc	2.)	
City (5)					Square	e Feet	# of Floors	Bldg. Age					
Hackensack					342,	797	5	1957					
County (6)			County		Curren	nt Use (Prior if be	eing demolished)						_
Bergen			(STATE	ISE ONLY)	Cour	thouse							
Name of Monitoring Firm Hired by Building Owner (8)			**********	ASCM Na.	Name	of Abatement C	ontractor (9)						
Omega Environmental Services, Inc				00120	M. Company	orn Contrac							
Street Address				Lineari		Address							
280 Huyler Street						/illow Way							
City, State, Zip Code						tate, Zip Code				-			
South Hackensack, NJ, 07606						dland Park,	NI 07424						
Project Manager for Monitoring Firm			Telepho	ne No	-	ione No.	10 07424	License No.					
Alex Palets				31-6209		333-9176		01331					
7 Hex 1 diets		T	1202	7 0203	-	333 3170		01331		_			
Start Date (10)				tion Date (11)	22 0.00210.0000	of OSHA Monito							
03/18/19		4/19/	19		Envir	rovision Con	isultants, Inc.						
Occupancy Status During Abatement (Check Only One)					Street	Address							
☐ Facility Closed/Vacated During Entire F	eriod of Al	patemer	nt		20-23	1 Wagaraw	Rd., Bldg. 35-E						
	nal Facility	Hours			City, St	tate, Zip Code							
Other - Describe: 07:00pm - 0	3:30am		-		Fair L	Lawn, NJ 07	410						
Scope of Work (Check All That Apply)													
≥3 sf or ≥3 lf		X	Renov	tion		Full Contain	ment with Nega	ative Pressur	е				
≥160 If or ≥260 If			Demol	tion	X	Mini-Enclos	ure						
						Glovebag Pr	rocedure						
						Non-Exemp	ted (*) and Non	-Friable Proc	edure	2			
		Is Locatio									Abate		ŧ
Location of	1 ,,	Normall sed Solely				cription of				-	Ту	pe	
Asbestos-Containing Material (ACM) TO BE ABATED		1aintenan	0.00			ining Material (A systems insulation		Amoun (Specit					
In Facility	Ct	stodial St	aff?	,		ing, VAT, ar	-1.4	SF or Li	89 8	77		Encapsulate	Er
(13)		(12)			other mi	iscellaneous)				Removal	Re	nsde	Enclosure
	Yes	No	N/A				***		-	val	Repair	ate	ure
South Annex Tunnel	X					Fitting Insu		136 e	a		Х		
North Annex Tunnel	X					Fitting Insu		185 e	а		Х		
Administration Bldg Tunnel	X			0&M N	Audded	Fitting Insu	lation	68 ea	3		Х		
							The state of the s						
Name of Registered Waste Hauler		NJDEP V	Vaste Hau	er ID No.	Cubic Y	ards of Waste		Name of Reg	ustere	d Lan	dfill		
Unicorn Contracting Corp.		00358	344		5+ C	U YD		Fairless H	ills La	andf	Ili		
City, State					Disposa	al Date	1	City, State					
Woodland Park, New Jersey					TBD		1	Morrisvil.	e, PA	í			
Woodiand Fark, New Jersey					1.00								
Completed by	Title				1.00	Signature	//	11		Date			

OK 1523 PAI			CATION	tate of Ne N OF ASE to NJAC	BESTOS	ABATE				G	E 1	W	E.	
Date of Notification (1) 03/05/2019				of Building					111	MAR	1 2	วกาก		
Agencies Notified Type Notification			Street A		3		*)			WAII	1 2	2019		
EPA DEP DOL Amended Amendment Emergency		_[Parsip	ate, Zip C ppany, N	NJ 0705	54		27 (18)	la-mar.	(m5)45 (m4)35				
DOH justification) Cancellation				f Contact Pithwa					Те	lephone N	Number			
Name of Facility Where Abatement is Takin	a Place (2)		FACI	ILITY INF	ORMAT	ION	-							
Private Residence	y Flace (5)	,					Туре	of Facility	9 80 0000			~		
Street Address							×	School (K- Subchapte Other (i.e. etc.)	r 8 (Oth			iildings	s, hom	es,
City (5) Parsippany							Squa	re Feet 0 SF	2	f Floors		Bldg. 50+	Age	
County (6) Morris				Code (7) USE ONLY)			ent Use (Pri idence	or if be	ing demo	lished)			
Name of Monitoring Firm Hired by Building N/A	Owner (8)		ASCN	/I No.				atement Co struction, L		(9)				
Street Address						Street 63 Le		ss r Stockin	g Patl	h		81		
City, State, Zip Code								ip Code ark, NJ 07	7035					
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph 862-2				License 01306				
Start Date (10) 03/16/2019	Scheduled 03/16/2		npletion I	Date (11)		100000000000000000000000000000000000000		HA Monitor truction, L	.LC			-		
Occupancy Status During Abatement (Chec Facility Closed/Vacated During Entire F						Street 63 Le		ss r Stockin	a Path	n				
Abatement Performed Outside of Norm Other – Describe:	al Facility	Hours	S .			City, S	tate, Z	ip Code ark, NJ 07				141		
Scope of Work (Check All That Apply)								2111, 110 0						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova emolit				×	Mir Glo	Il Containm ni-Enclosure ovebag Pro- n-Exempte	e cedure	::::::::::::::::::::::::::::::::::::::			re	
Location of		_ocati										Abat	emen	t
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Mair Custo	Sole ntena	ly by nce/		tos Cont thermal surfa		aterial insula T, or		(5	mount Specify or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A										te	Ф
Ground Floor	-		X			VAT			56	50 SF	X	-	X	
				7.							+			
									111					
Name of Registered Waste Hauler Nari Construction, LLC		Н	JDEP W auler ID 037535	No.	Cubic of Was 5 CY			Name of G.R.O.		ered Land	fill			
City, State Lincoln Park, NJ			10 808		8.2.3	sal Date		City, State Morrisv		A		19		
Completed by Igor Jezdimirovic	Title P.Man	age	r		S	ignature				1	Date 03/05/	/2019	1	

27 Feb 2000 12:22AM NJ Asbestos Control 609.633.0664 02/28/2019 04:47PM 2013297440

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Name of Gented

JOHN GIANDULLO

BEST REMOVAL INC

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2/28/19

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State of New Jersey NOTIFICATION OF ASSESTOR ABATEMENT (Pursuant to MJAC 5:60 and 12:120)

Narge of Suitiding Owner/Operator (2)

68050 . PH , WO'N C

(D): MR ROBERT BERNOT # of Floors Party Age 1940

FACILITY INFORMATION Harris of Fashing When to Ababamant in Taking Place (3) MR ROBERT Type of Facility (4) BERNOT G School (K-12) G Schoolsphor 5 (Cither Smn K-12) George (Le. private & coramarchis buildinge, CE7 (6) homes, etc.) UNION 2000 . 2 County (6) County Code (7) (STATE USE Custom Use (Prior If Being demolisher UNION. CHLY Hartin of Montissing Fitte Hired by Balding Owner RESIDENCE ASCM No. Haras of Abatemport Contractor (8) Rest Removal Inc Street Advisors Sheet Address 450 South River St City, State, Zip Code CBy. State, Zip Code Hackensack, N.J. 07601 Project Manager for Montesting Parts Teisphone He. Telephene Hs. Start Deta (10)

3 /4 / 19

Cooccupancy Statue During Abstatront (Charle only 201-329-7444 Scheduled Completion Date (11) 00388 Name of OSHA Montor 8/5/19 Omega Environmental Street Address. D Facility Closed/Vacaded During Entire Period of Abajament D Adatament Parformed Outside of Normal Facility Hours A Other - Describe: \$160 AHT 0 \$100 M 280 Huyler St Gity. State. Zip Cede S. Hackensack , N.J. 07606 Scape of Wark (Check all that apply) 日本3年の35円 日本3年の35円 Pull Containment with Negative Pressure Renovation Distribution O Mirel Enciosum G directory Procedure
G mon-first or and Non-Frieble Precedure is Lecation Normally LOCKED OF TO SE ANATED Used Solely by Mainterance/ Description of the Conteining Material (ACM) CACAD MITS file descriptions described and substantial VAT, or AMOUNE Cumbelle! (13) (12) NO NA KITCHEN LIND WOULD 200 SF 9 4 Name of Registered Wants Haule: NJOEP Weste Hauter Gueic Yards of Best Removal Inc Name of Registered Landfül D No. Minerva Enterprises ,LLC 17109 24207 Hackensack , N.J. 07601 3/6/19 Completed by Waynesburg, Oh, 44688 J. Maiorano Estimator 2/29/19

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 03 80 19 Khulgen Zuunbaatar Agencies Notified Type Notification Street Address ☐ Initial **⊠** DOLWD ☐ Amended City, State, Zip Code ☑ DOH Amendment # Howell, NJ 07731 ☐ DCA (NJAC 5:23-8) justification) Name of Contact Telephone Number □ Cancellation Khulgen Zuunbaatar **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Residence School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e., private and commercial buildings, homes, etc.) City (5) Square Feet # of Floors Bldg. Age Howell 500 1 80 County (6) County Code (7)(STATE USE ONLY) | Current Use (Prior if being demolished) Monmouth Residence Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Guardian Contracting, Inc. Guardian Contracting, Inc. Street Address Street Address 1889 Rte. 9, Unit 61 1889 Route 9, Unit 61 City, State, Zip Code City, State, Zip Code Toms River, New Jersey 08755 Toms River, New Jersey 08755 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Nicholas Fernicola 732-349-9932 732-349-9932 00624 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 03 / 08 / 19 03 / 12 / 19 E.M.S.L. Analytical Occupancy Status During Abatement (Check only one) Street Address □ Facility Closed/Vacated During Entire Period of Abatement 1056 Stelton Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: ____AM-__ Piscataway, New Jersey 08854 Scope of Work (Check all that apply) □ Full Containment with Negative Pressure ☐ >3 sf or >3 If ☐ Renovation Mini-Enclosure ≥160 sf or ≥260 lf □ Demolition ☐ Glovebag Procedure ■ Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Asbestos-Containing Material (ACM) Used Solely by Removal Repair Encapsulate Enclosure Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED (i.e., thermal systems insulation. (Specify IN Facility Custodial Staff? surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A interior \boxtimes asbestos joint compound 200 sf M П П Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Guardian Contracting, Inc. Hauler ID No. Waste T.R.R.F. 20223 3 City, State Disposal Date City, State Toms River, New Jersey 03/12/19 Tullytown, Pennsylvania Completed By (Print or Type) Title Signature Date Nicholas Fernicola Project Manager

State of New Jersey

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Date of Notification (1) 3/8/19					of Building Ow of Vineland		or (2)		111		MAR	1	2	2019)
Agencies Notified	Type Notification	1			Address					1					
EPA	× Initial				Wood Str				10	1			1.		4
DEP DOL	Amended Amendmen	t #		101111111111111111111111111111111111111	ate, Zip Code and, NJ 08				£			4	المراجعة المراجعة	1	
X DOH	Emergency justification)				of Contact				Tel	ephone	Numb	er			
DOH DCA	Cancellation			Matt I	DePalma				100000000000000000000000000000000000000	6 809					
Name of Facility Where	Abatament is Takir	ag Plage /2	\	FAC	ILITY INFOR	MATION	1=								
Vacant Building #7	Abatement is Takir	ig Place (3)				Ту	pe of Facility							
Street Address							┨╢	School (K-1 Subchapter	12) - 8 (Oth	er than	K-12)				
111 Highland Aven	ue						×	Other (i.e.	orivate 8	& comm	ercial	ouilo	lings,	hom	es,
City (5)							Sq	etc.) uare Feet	# 01	Floors		В	ldg. A	ge	
Vineland													500		
County (6) Cumberland					Code (7) USE ONLY)		Cu	rrent Use (Pri	or if bei	ng dem	olished	1)			
Name of Monitoring Firm	Hired by Building	Owner (8)			M No.	Nom	o of A	hotomani Car		(0)					
The state of the s	r mod by banding	Owner (b)		AGGI	VI INO.			batement Cor onstruction		(9)					
Street Address							et Add								
						282	2 Cre	ek Road							
City, State, Zip Code								, Zip Code	,						
Project Manager for Moni	itorina Firm			Telepho	ine No		ohone	vr, NJ 0803	1	Linean	- 11-				
,				reieprio	TIC IVO.	N 9705033		.3366		Licens 0133					
Start Date (10)			d Con	npletion	Date (11)	Nam	e of O	SHA Monitor							
3/18/19	AL-1	7/1/19						Ricco							
Occupancy Status During		- 50	-				t Add	ress ek Road							
Facility Closed/Vaca Abatement Performe	ited During Entire I ad Outside of Nom	Period of A nal Facility	baten Hours	nent		0.000		Zip Code							
Other – Describe: _								/r, NJ 0803	1						
Scope of Work (Check Al	That Apply)							,							
23 sf or ≥3 lf			enova				F	Full Containme	ent with	Negativ	e Pres	sur	е		
× ≥160 sf or ≥260 lf		× De	emolit	ion			_ N	Mini-Enclosure Glovebag Prod	•						
								Non-Exempted		Non-F	riable F	roc	edur	е	
		733	Locati ormal									1	Abate Ty	ment	
Location Asbestos-Containing I		Used	Sole	ly by	Ashestos	Descriptio Containing		ial (ACM)	٨٠	nount	-	П	.,		
TO BE ABA In Facilit	TED	1.000	ntenar		(i.e. the	rmal systen	ns insi	ulation,	(S	pecify	1	D	N	Enca	Enc
(13)	y		(12)			urfacing, Vaner miscella			SF	or LF)		Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A				330			9	<u>n</u>	_	late	ire
Interio	r			Х	Black	Mastic/9	9X9 \	/AT	649	90 SF)				
Interio	r			Х	Brown F	Paper Pip	e Ins	ulation		0 LF)				
Interio	7			Х	Black	Mastic/12	2X12	VAT	100	00 SF	2	-			
Interio	r			X	Airce	ell Pipe In	sulat	tion	10	0 SF	7				
Name of Registered Wast	e Hauler		0.33	JDEP W	aste Ci	ubic Yards		Name of F			1				
Ricco Construction C	orp		H	auler ID 28909	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	Waste TBD		Cumber	land (County	,				
City, State					Di	sposal Date	3	City, State							\neg
Bellmawr, NJ Completed by		Tial				TBD /	1/	Millville,	JYJ	-					
Andrew Ricco		Title Pre	sider	nt		Signatur	9/16/1	11/2 /	111		Date 3/8/2	010	9		
						1 1/11	9/0	W //	VL	1	5,512	011	-		

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Date of Notification (1) 3/8/19					of Building of Vinela		Operato	r (2)	114		MAR 1	2 20	119	121	1
	Type Notification				Address E Wood	Street			*	F			W.	5	
DEP X DOL	Amended Amendment Emergency (_ [10000	tate, Zip C and, NJ				100 to		*		**************************************	20020	
DOH DCA	justification) Cancellation	iricidaling			of Contact DePalma					- 1	ephone Nu 66 809-12				
Name of Facility Where Ab	natement is Taking	Dlace (2)	FAC	ILITY INF	ORMAT	ION	1 -	65 10	7.0					
Vacant Building #7	atement is raking	y Flace (3)					Ту	pe of Facility						
Street Address 111 Highland Avenue	9							×	School (K- Subchapte Other (i.e. etc.)	r 8 (Oth	er than K-1 & commerc	2) ial buil	dings	, hom	es,
City (5) Vineland								Squ	uare Feet	#0	f Floors	E	Bldg. A	Age	
County (6) Cumberland					Code (7) USE ONLY)		Cui	rrent Use (Pr	ior if bei	ng demolis	hed)			
Name of Monitoring Firm H	lired by Building (Owner (8))	ASCI	M No.				batement Co onstruction						
Street Address				-			Street 282		ress ek Road						
City, State, Zip Code									Zip Code vr, NJ 0803	31					
Project Manager for Monito	oring Firm			Telepho	one No.		Telepi	none			License N 01339	lo.			
Start Date (10) 3/18/19		Schedul 7/1/19	ed Con	npletion	Date (11)		Name	of O	SHA Monitor Ricco						
Occupancy Status During A	Abatement (Check		ne)				Street	199							
Facility Closed/Vacate Abatement Performed	d During Entire P	eriod of	Abaten	nent			282	Cree	ek Road						
Other – Describe:		ai r aciiity	riouis	•					Zip Code r, NJ 0803	31					
Scope of Work (Check All 1	hat Apply)							_		240					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demolit					M G	full Containm fini-Enclosure Glovebag Pro- lon-Exempte	e cedure				e	
			Locati						,				Abate	ement	t
Location of Asbestos-Containing Market Marke	aterial (ACM)	Use Ma	Normall d Solel intenar todial S (12)	ly by nce/	Asbes (i.e.	tos Conta thermal surfac	scription aining N systems sing, VA niscellan	lateri s insu T, or		(S	mount pecify or LF)	Removal	Repair	e Encapsulate	Enclosure
		Yes	No	N/A								=		ate	G)
Exterior				Х	Wir	ndow G	lazing	& C	Caulk	220	00 LF	Х			
N (5		2													
Name of Registered Waste Ricco Construction Co			111 2082	JDEP Wauler ID 28909	No.	Oubic of Was	te		Name of Cumbe	00 00 0	red Landfill County				
City, State Bellmawr, NJ							al Date	٦,	City, State		_				
Completed by Andrew Ricco		Title Pre	esider	nt			gnature	14	Mul	M	Dat 3/8	te 3/201	9		

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Date of Notification (1) 3/8/19					Building (Vinelan		perato	r (2)		MA	R 12	2019			; ! ; !
	Type Notification		- 1	Street A	ddress Wood S	treet			1	and 5	* 41 1 4				3
DEP DOL	Initial Amended Amendment		- 4		te, Zip Co nd, NJ 0								1.45		
☑ DOH □ DCA	Emergency justification) Cancellation				Contact PePalma					1 22 22 22	ohone Nur 809-12				
				FACI	LITY INFO	RMATI	ON								
Name of Facility Where Ab Vacant Building #4	atement is Takin	g Place (3)					Ту	pe of Facility (4 School (K-1)	2)					
Street Address 111 Highland Avenue	Э							×	Subchapter Other (i.e. p etc.)	8 (Other rivate &	than K-12 commerci	2) al build	dings,	home	es,
City (5) Vineland								Sq	uare Feet	# of I	Floors	В	ldg. A	ge	
County (6) Cumberland					Code (7) USE ONLY)			Cu	ırrent Use (Prid	or if bein	g demolisi	ned)			
Name of Monitoring Firm F	lired by Building	Owner (8)		ASCM	l No.	75	100000000000000000000000000000000000000		Abatement Con Construction		9)				
Street Address							Stree 282		dress eek Road						
City, State, Zip Code									, Zip Code wr, NJ 0803	1					
Project Manager for Monito	oring Firm		T	Telepho	ne No.		Telep	hone			License N 01339	lo.			
Start Date (10) 3/18/19		Schedule 7/1/19	ed Com	pletion	Date (11)		Name	of C	SHA Monitor Ricco						-
Occupancy Status During	Abatement (Chec		ne)				Stree								
Facility Closed/Vacate Abatement Performed	ed During Entire	Period of A	Abatem				A THE POTENTIAL		eek Road						
Other – Describe:	2 Outoide of from	nui i uomiy	110010				200000000000000000000000000000000000000		wr, NJ 0803	1					
Scope of Work (Check All	That Apply)				-										
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	Renova Demoliti						Full Containme Mini-Enclosure Glovebag Prod Non-Exempted	edure				·e	
		Is	Locati	on									Abate	ement	t -
Location			Normall d Sole				scriptio						1)	/pe	Г
Asbestos-Containing N TO BE ABAT In Facility (13)	red ` ´	Ma Cus	intenar todial S (12)	nce/ staff?		thermal surfa		ns ins AT, c		(Sp	nount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
Land		Yes	No	N/A	D.4	ortar a	/··· CA	AL L C	Plank	40	0 SF				-
Interior				X					ck Mastic		0 SF	X			-
Interior				X					npound		25 SF	X			-
Interior				X		rcell B			-) SF	X			-
Name of Registered Waste			IN	JDEP W			Yards	isui	Name of			1 7550			
Ricco Construction C			9.00	auler ID 28909	No.	of Wa			Cumbe	rland (
City, State Bellmawr, NJ						1 2	sal Date BD	e	City, State Millville						
Completed by Andrew Ricco		Title Pr	eside	nt		8	Signatur	Pe 1	lus	Th	1.0	ate /8/20	19		

CONTINUED

Date of Notification (1)					f Building Owner/	Operato	r (2)		1///	w		
3/8/19				City o	f Vineland				MAR	12	201	9
Agencies Notified	Type Notification X Initial			Street A	ddress Wood Street			Frank	e alles		1.41	
EPA DEP	Initial Amended		t	City, Sta	ate, Zip Code							
X DOL	Amendment		_	Vinela	and, NJ 08362			W 201 Eq. 10			T-111791-3	
X DOH	Emergency justification)			Name o	f Contact			Telephone I	Number		100	
DCA	Cancellation			Matt D	DePalma			856 809-	1202			
				FAC	LITY INFORMAT	ION						
Name of Facility Where A Vacant Building #4	Abatement is Takir	ng Place (3)				Type of Facility (4 School (K-12	8) 4)				
Street Address								.) 3 (Other than K	(-12)			
111 Highland Aven	ue						Other (i.e. pr etc.)	ivate & comme	ercial bui	ldings	, hom	es,
City (5)							Square Feet	# of Floors	11	Bldg. A	Age	
Vineland										1000	95	
County (6)					Code (7)		Current Use (Prior	r if being demo	lished)			
Cumberland				(STATE	USE ONLY)							
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCN	/I No.		of Abatement Cont					
Street Address							o Construction	Corp				
Street Address							Address Creek Road					
City, State, Zip Code						City, S	State, Zip Code					-
							mawr, NJ 08031					
Project Manager for Mon	itoring Firm			Telepho	ne No.	0.0000000000000000000000000000000000000	none No. 931.3366	License 01339				
Start Date (10) 3/18/19		Schedule 7/1/19	d Con	npletion	Date (11)	and the same of the	of OSHA Monitor rew Ricco					
Occupancy Status During	Abatement (Chec	k Only On	e)				Address					
➤ Facility Closed/Vac	52 (A)	650	100	nent		282	Creek Road					
Abatement Perform	ed Outside of Norr	nal Facility	Hours	S .		City, S	State, Zip Code					-
Other – Describe:						Belli	mawr, NJ 08031					
Scope of Work (Check A	ll That Apply)		1111-77-11	V								
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		and the same of th	enova emolit				Full Containmer Mini-Enclosure Glovebag Proce Non-Exempted	edure				
		Τ.					Non-Exempled	() and Non-Fr	lable Fit	N-11	emen	+
Loostion			Locati Iormal		5.						/ре	
Location Asbestos-Containing		Used	d Sole	ly by	Asbestos Con	scription taining N		Amount			m	
TO BE ABA			ntena odial S		(i.e. thermal	system	s insulation,	(Specify	Re	R	Encapsulate	Enclosure
In Facil (13)	ity	000000000000000000000000000000000000000	(12)			cing, VA niscellar		SF or LF)	Remova	Repair	psu	losu
		Yes	No	N/A					<u>a</u>		ate	Ге
Exterio				Х	Flashir	ng (2 L	ayers)	1000 SF	X			
Exterio				X	Roofing Ma			4200 SF	X			
Exterio	or			Х	Wind	ow Gla	azing	720 LF	Х			
N(D												
Name of Registered Was			1 1 1 1 1 1	JDEP Wauler ID		Yards ste	0.0000000000000000000000000000000000000	egistered Land				
Ricco Construction (Corp			28909		3D	Cumberl	and County				
City, State Bellmawr, NJ					500000000000000000000000000000000000000	sal Date	City, State	Q ₁				
Completed by		Title				/	1) //		Date			
Andrew Ricco			eside	nt		Signature	When I		Date 3/8/20	19		

(Mac	120				N OF ASI				•) E		W?	
Date 0	of Notification (1)					of Building		Operator	(2)			The stranger				3
	ies Notified	Type Notification				Address Wood	Street				4 1	MA	R-1	2 2	019	
	PA DEP DOL	Initial Amended Amendment	#		City, St	ate, Zip C	ode					2				1.25
	ЮН	Emergency	(including]		of Contact					Tel	ephone No	ımher		-	
	CA	justification) Cancellation		1		DePalm					10000000	6 809-1				
NI	-55-121 105				FAC	ILITY INF	ORMAT	ION								
Vaca	int Building #6	Abatement is Takin	g Place ((3)					Туре	of Facility School (K-						
	^{Address} Highland Aven	ue							×	Subchapte Other (i.e. etc.)				dings	, hom	es,
City (5 Vinel									Squa	are Feet	# of	f Floors	[Bldg. A	Age	
County	v (6) berland					Code (7) USE ONL	0		Curr	ent Use (Pr	ior if bei	ng demolis	shed)			
Name	of Monitoring Firm	Hired by Building	Owner (8)	ASCN	M No.		10000		atement Co						
Street	Address							Street	Addre	ss	. остр					
City S	tate, Zip Code									k Road ip Code						
Oity, O	tato, zip oode									.ip Code , NJ 0803	31					
Project	Manager for Mon	itoring Firm			Telepho	ne No.		Teleph 856.9				License I	No.			
Start D 3/18/	ate (10)		Schedul 7/1/19		mpletion	Date (11)				HA Monitor						
- 5200 EE		g Abatement (Chec					-	Andre								
		ated During Entire F	0.0000000000000000000000000000000000000		nent					k Road						
L A	batement Perform ther – Describe: _	ed Outside of Norm	al Facilit	y Hours	S			1000		ip Code NJ 0803	31					
Scope	of Work (Check A	II That Apply)					illessa -									
	3 sf or ≥3 lf 160 sf or ≥260 lf		-	Renova Demolit	10000000000				Min	ll Containm ni-Enclosur ovebag Pro n-Exempte	e cedure				e	
				Locat									T	Abate	ement	
Ach	Location			Normal ed Sole		A - 1	De	scription	of		700	5350 NS	-	1 1	ре	
Asi	pestos-Containing TO BE ABA In Facili (13)	ATED	Ma	intena todial ((12)	nce/	(i.e.	thermal surfa	aining M systems cing, VAT niscelland	insula T, or	ation,	(S	mount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
			Yes	No	N/A										(D)	
	Exterio				X			lashing				00 SF	Х			
	Exterio		-		X		37	ng Mate				00 SF	X			
	Exterio		-		X			ow Glaz				0 LF	X			
Name o	Interio			LN	JDEP W	73		Joint Co	ompo			000 SF	X			
	Construction (53.93	lauler ID 28909	No.	of Was	ste		Cumbe		red Landfil County				
City, Sta Bellma	ate awr, NJ						Dispos	sal Date	7	City, Stat Millville		۷.				
Comple	ted by w Ricco		Title Pr	eside	nt		S	ignature	he	1	h	Da	ate '8/201	9		

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Date of Notification (1) 3/8/19				20000000	of Building O of Vineland	80	erator ((2)			AR 1	20	10	
Agencies Notified Ty	ype Notification			Street A					7 1	IVI /	411	4-6	19	
EPA X	Children Coll Communication				Wood St				,	metri	-			
DEP DOL	Amended Amendment	#			ate, Zip Cod and, NJ 08									J.
ĭ DOH	Emergency justification)		3		of Contact		 		Te	lephone l			2717 37	E1181
DCA C] Cancellation			Matt [DePalma				11 333000	6 809-				
Name of Facility Where Aba	tement is Takin	n Place (3)	FAC	ILITY INFO	RMATIO		Type of Facility	(4)					
Vacant Building #6	itomont is rain	ig i lace (٥,				١,	_						
Street Address								School (Ko	er 8 (Oth					
111 Highland Avenue							.	Other (i.e. etc.)	private	& comme	ercial bu	ldings	, hom	es,
City (5) Vineland								Square Feet	#0	f Floors		Bldg. /	Age	
County (6) Cumberland					Code (7) USE ONLY)			Current Use (P	rior if be	ing demo	olished)			
Name of Monitoring Firm Hir	ed by Building	Owner (8)	ASCN			Name o	f Abatement Co	ntractor	(0)				
	ou by building	owner (o	<i>)</i> .	7.00	VI 140.			Constructio						
Street Address						1000		ddress Freek Road						
City, State, Zip Code							ALCOHOLOGY.	ate, Zip Code						
	A STATE STATE OF						91/2	awr, NJ 080	31					
Project Manager for Monitori	ing Firm			Telepho	ne No.	100	Telepho 856.9	ne No. 31.3366		License 01339				
Start Date (10) 3/18/19		Schedul 7/1/19		mpletion	Date (11)			f OSHA Monito	r					
Occupancy Status During Ab	patement (Chec						Street A	w Ricco						
X Facility Closed/Vacated	During Entire I	Period of	Abater	ment				reek Road						
Abatement Performed (Other – Describe:	Outside of Nom	nal Facility	y Hour	s				ate, Zip Code awr, NJ 080	31					
Scope of Work (Check All Th	nat Apply)													
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		-	Renova Demoli					Full Containn Mini-Enclosus Glovebag Pro	re	Negativ	e Pressi	ıre		
		1			1		Ш	Non-Exempte	ed (*) and	d Non-Fr	iable Pro	535		
Location of			S Locat Norma										emen /pe	t i
Asbestos-Containing Mat		Use	ed Sole	ely by		s Contair		terial (ACM)	A	mount			ш	
TO BE ABATE In Facility	D	10.000	todial	Staff?	(i.e. th	ermal sy surfacin		insulation, , or		or LF)	Removal	Repair	Encapsulate	Enclosure
(13)			(12)			other mis				,	loval	oair	sula	osure
	320-3-20-1	Yes	No	N/A									le le	
Interior				X			100000000000000000000000000000000000000	12 VAT		05 SF	Х			
Interior				X		Transite	020000000000000000000000000000000000000		12	40 SF	Х			
Interior				X	Tran	site Ce	eiling 8	& Walls	40	00 SF	X			
Interior				Х		cell Pip				0 SF	X			
Name of Registered Waste H			- 2	IJDEP W lauler ID	(2)(0.00)	Cubic Ya of Waste	1000000	Name of	A ST. PROPERTY.					
Ricco Construction Cor	p			28909		TBD				County	·			
City, State Bellmawr, NJ						Disposal TBD	^	City, Sta Millville						
Completed by		Title		60-2 4 1V		Sign	nature	11. 1	11.		Date			
Andrew Ricco		Pr	eside	nt			1/1/6	WMINIE	11	1	3/8/20	19		

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Date of Notification (1) 3/8/19					of Building of Vinelar		Operator	(2)			MAF	1	2	2019		here and
Agencies Notified T	ype Notification Initial				Address Wood S	Street			14 14	j.		2		Ç:	1. 3.	
DEP X DOL	Amended Amendment				ate, Zip Co and, NJ (010					***********		-
DOH DCA	Emergency justification) Cancellation			Matt I	of Contact DePalma						ephone 6 809					
Name of Facility Where Aba	stoment is Takin	a Dlass /	2)	FAC	ILITY INFO	ORMATI	ON	_								
Vacant Building #6	atement is rakin	y Flace (3)					Typ	e of Facility	S 74						
Street Address 111 Highland Avenue								×	School (K- Subchapte Other (i.e.	r 8 (Othe	er than	K-12) nercia) I buil	dinas	, hom	ies.
City (5)								_	etc.)					78588		
Vineland								Squ	uare Feet	# 01	Floors	N.		Bldg. /	\ge	
County (6) Cumberland					Code (7) USE ONLY)			Cur	rent Use (Pri	ior if beir	ng dem	olishe	ed)			
Name of Monitoring Firm Hi	red by Building (Owner (8))	ASC	M No.				patement Co		(9)					
Street Address		100					Street	Addr			100-22-20					
City, State, Zip Code								Zip Code r, NJ 0803	21							
Project Manager for Monitor	ing Firm		T	Telepho	ne No.		Teleph	one	No.		Licens					
Start Date (10)			ed Cor	npletion	Date (11)		856.9 Name		3366 SHA Monitor		0133	9				
3/18/19		7/1/19					Andr	ew l	Ricco							
Occupancy Status During Al Facility Closed/Vacated Abatement Performed 0 Other – Describe:	l During Entire P	eriod of	Abaten	nent				Cree	k Road					HE COM		
Other - Describe:		ar r dollity	rioure			_			Zip Code r, NJ 0803	11						
Scope of Work (Check All Th	nat Apply)								,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demolit					M G	ull Containme ini-Enclosure lovebag Procon-Exempted	e cedure					· A	
		Is	Locati	on						- () and	14011-1	Tidbic		ATTO STATE OF	ement	1
Location of	£2		Normal d Sole			Des	cription	of				-		Ту	ре	
Asbestos-Containing Mai TO BE ABATE In Facility (13)		Ma Cust	intenar todial S (12)	nce/	(i.e. t	hermal s surfac		insu r, or		(Sp	nount pecify or LF)		Removal	Repair	Encapsulate	Enclosure
Interior		Yes	NO			D - 11						2				
Interior				X			Insula Insula				SF	-	X			
Interior				X			e Brick				nown		X			
Interior							- 1/1				nown	-	Х			
Name of Registered Waste H	lauler		l N	JDEP W	aste	Cubic Y	or Tile		Nome of !		Bags		Х			
Ricco Construction Cor				auler ID 28909	No.	of Wast	e		Name of F							
City, State Bellmawr, NJ	-					Disposa	al Date	7	City, State							
Completed by Andrew Ricco		Title	esider	n+			náture	111	1 de la	1	1	Date	20:			
TIGIOW INDOO		PIE	ssidel	11			110	1	vuy /	In		3/8/	201	9		

E2217001 77	
D	Form

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT

CK1943 F	AI	NOT	FICATIO	ON OF AS	BESTOS	ABATE	EMENT (0)			F		7	
Date of Notification (1) 3/7/19				of Buildin		/Operato	r (2)	8 4 7 A	A.A.A.	D 1.		202	
Agencies Notified Type Notification	on			Address				104	MAI	7 12	20	19	111
EPA Initial									<u> </u>				
DEP Amended Amended Amendment	ent#		City, S	State, Zip (rt Hills, N	Code LL 0707	'A		04				-	į.
DOH Emergence justification	y (includir	ng		of Contac					Telephone I	Number	750° (\$310)	W 1985	+ ++
DCA Cancellati	on		25 500000	icia (Ass				1	r cicpitotie i	vuilibei			
Name of Facility Where Abatement is Tal	ing Place	(3)	FA	CILITY IN	ORMAT	ION	Tune of F	-1114 - (4)					
Residential Home		(0)					Type of Fa						
Street Address							Subc	ol (K-12) hapter 8 (C '(i.e. privat	other than K e & comme	(-12) ercial bu	ildings	, hon	nes,
City (5) Short Hills		1					Square Fe 5000	et #	of Floors		Bldg		
County (6) Essex			County (STATE	Code (7)	n		Current Us Residen	e (Prior if t	eing demo				
Name of Monitoring Firm Hired by Building Project Manager	g Owner (8)	ASC	CM No.			of Abateme	nt Contract					
Street Address						Street	Address N. Midland	Tem Witness					
City, State, Zip Code						City, S	tate, Zip Co lle Brook,	de	2				
Project Manager for Monitoring Firm			Telepho	one No.		Teleph	one No.	143 0700	License	30.53			
Start Date (10) 3/11/19	Schedu 3/16/		mpletion	Date (11)			600-3184 of OSHA Mo	nitor	01305				
Occupancy Status During Abatement (Che	100000000000000000000000000000000000000	D150				Street	Address						
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe: 8 A.M to 4 P.M	Period of mal Facili	Abater ty Hours	ment s			City, St	ate, Zip Coo	le					
Scope of Work (Check All That Apply)						1000	20 Th						
≥3 sf or ≥3 lf ≥ 160 sf or ≥260 lf	germany.	Renova Demolii				×	Mini-Encl Glovebag	osure Procedure	th Negative			e	
Location of		s Locati Normal	ly		Des	cription (of				Abate Ty	emen pe	t
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	ed Sole aintenar stodial S (12)	nce/	Asbes (i.e.	tos Conta thermal surfac	aining Ma	aterial (ACM insulation,		Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
Living Poom	Yes	No	N/A									ite	Ф
Living Room		X			Р	laster		1	05 SF	X			
Name of Registered Waste Hauler		N	JDEP W	/asto	Cubia	/ards	1						
All Stages Abatement		H	auler ID 036592	No.	Oubic Y of Wast 3 yd				ered Landfi al Sanita		dfill		
City. State Saddle Brook, NJ				_	Disposa TBD	al Date	100000000000000000000000000000000000000	State Argyl, P	Α				\neg
Completed by Richard Cristofol	Title Pres	ident			Sig	gnature	11	11	D	ate /7/19			

CK1900 PA	ID			N OF ASE					, <u> </u>		- U	į			
Date of Notification (1) 3/8/19				of Building a Kravet		Operator	r (2)			MAR	1 2	20	19	1000	
Agencies Notified Type Notification			Street	Address					Laure			-		-	
EPA Initial			Cit. C	-t- 7:- 0					frauts-	w. 57	77.71			J L	
DEP Amended Amendment:				tate, Zip C wood, N		6			A tar		- 4	1000			
DOH Emergency (injustification)	ncludin	9		of Contact					Tel	ephone	Numb	er			
DCA Cancellation				Kravet		ION									
Name of Facility Where Abatement is Taking	Place	(3)	FAC	ILII I INF	URMAI	ION	Туре	of Facility (4)						
Residential Home Street Address								School (K-1							
Sireer Address								Subchapter Other (i.e. p				buile	dings	hom	es,
City (5)	• 17						Squa	etc.) re Feet	# 0	f Floors	3-18-7-1	TB	Bldg. A	Age	
Ringwood							235	-	2			6	55 +/		
County (6) Passaic				Code (7) USE ONLY)			ent Use (Prio sidential H		ng demo	olishe	d)			
Name of Monitoring Firm Hired by Building C Project Manager	wner (8	3)	ASCI	M No.		100113030 1102		atement Cor Abateme		(9)					
Street Address						Street 280		ss dland Ave							
City, State, Zip Code			Will-Lu-			City, S	state, Z	ip Code							
Project Manager for Monitoring Firm	-		Telepho	one No.		Teleph			1003	License	e No.				
Charles (40)							600-3			01305	5				
	Schedu 3/19/1		npletion	Date (11)		Name	of OSI	HA Monitor							
Occupancy Status During Abatement (Check	Only O	ne)				Street	Addre	SS							
Facility Closed/Vacated During Entire Po Abatement Performed Outside of Norma Other – Describe: 8 A.M to 4 P.M	eriod of al Facilit	Abaten y Hours	nent			City, S	tate, Z	ip Code							
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf	-	Renova Demolit				×	Mir Glo	Containmeni-Enclosure ovebag Proc n-Exempted	edure					е	
		Locati										1	Abate Ty	ment	
Location of Asbestos-Containing Material (ACM)	Use	Normal ed Sole	ly by	Asbes		scription aining M		(ACM)	Aı	mount	-		' '		
TO BE ABATED In Facility (13)	. 10.75	aintenar stodial S (12)			thermal surface	systems cing, VA niscellan	insula T, or		(S	pecify or LF)		Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A									-		ate	o,
Basement		х				VAT			66	9 SF	X				
											+	-			
						-					+				
Name of Registered Waste Hauler		1000	JDEP W		Cubic of Was			Name of F	Registe	red Land	fill				
All Stages Abatement		9119	36592		3 yd	ole.		Grand C	entra	l Sanit	ary L	.an	dfill		
City, State Saddle Brook, NJ					Dispos TBD	al Date		City, State Pen Arg		١					
Completed by Richard Cristofol	Title Pres	ident			S	ignature	1	1	,		Date 3/8/	19		90.0	

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	L.L.A.I.		(,		L TO NOAC							Ε	10		
Date of Notification (1) 3/8/2019	ini			Name of Alleg	of Building ro Devel	Owner/0 lopmer	Operato nt Com	r (2) ipan	y					i	
	lotification itial				Address South Ce	entral A	ive, Si	uite :	301		MAR	12	2019		1.6/1. =
DEP AI	mended mendment #			City, St St Lo	ate, Zip Co ouis, Miss	ode souri 6	3105			1					
DOH ju	mergency (ir stification) ancellation	ncluding	1		of Contact ael Dole						lephone N				
				FAC	ILITY INF	ORMAT	ION	40000			78 - V				
Name of Facility Where Abateme N/A	ent is Taking	Place (3)					Ту	oe of Facility						
Street Address 200 Old Hook Road								×	Subchapter Other (i.e. petc.)	8 (Oth			ilding	ıs, hon	nes,
City (5) Harrington Park									uare Feet 00,000	# o	f Floors		Bldg 195	Age 9	
County (6) Bergen					Code (7) USE ONLY)		Cur	rrent Use (Pri noccupied	or if be	ing demol	ished)	Bel		- F
Name of Monitoring Firm Hired by	y Building Ov	wner (8))	ASCI	M No.		Name Che	of A	batement Con ark Indust	ntractor	(9)			10	N Jen
Street Address							Street 54 N	CONTRACTOR OF THE PARTY OF THE	ress an Dr	<u> </u>					
City, State, Zip Code							City, S	State,	Zip Code NJ 07871						
Project Manager for Monitoring Fi	rm			Telepho	one No.		Teleph	none			License 01334		F3-5 Y-5		
Start Date (10) 3/12/2019	S	Schedul 4/28/2	ed Cor	npletion	Date (11)		Name	of O	SHA Monitor ark Industr	ial	01004		1		
Occupancy Status During Abatem							Street	21 7/152		iai					
Facility Closed/Vacated Durin Abatement Performed Outside	ng Entire Pe	riod of	Abaten	nent			54 N	/lorg	an Dr Zip Code						
									NJ 07871						
Scope of Work (Check All That Ap	oply)			01 H 31 1 2 30 T											
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		presented.	Renova Demolit	10 10 10 10 10 10 10 10 10 10 10 10 10 1			×	N G	ull Containme lini-Enclosure llovebag Prod lon-Exempted	edure				ıre	
		Is	Locati	on						· \ / and	4 14011 111	J. C. T. T.	60%	temen	t
Location of	2000 000000000	1	Normal	ly		Des	scription	of					_	уре	
Asbestos-Containing Material TO BE ABATED In Facility (13)	(ACM)	Ma Cus	d Sole intenar todial S (12)	nce/ Staff?		thermal surfac		s insu T, or		(S	mount Specify or LF)	Removal	Repair	Encapsulate	Enclosure
exterior		Yes	No	N/A										Ф	
Southeast 1 & 2 Floor in	torior		X				site bo				218 SF	X			
Southeast 1 & 2 Floor III	terior		X			trans	site bo	ard		1,5	96 SF	X	-		
								-117-				+	-		
Name of Registered Waste Hauler	•		1000	JDEP W	377.5	Cubic \			Name of F	Registe	red Landf	ill			
Newark Carting			Н	auler ID	No.	of Was 80	te		Grand (ndfil	l	
City, State Newark NJ						Dispos	al Date		City, State Pen Arg		4				
Completed by Corey Stankovic		Title CEO				Si	gnature	(5	Farka	· ~		ate 3/8/20	19		

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2) 2019 3/7/19 Jos. White Company Agencies Notified Street Address Type Notification 312 Rt 4 East EPA Initial City, State, Zip Code DEP Amended × DOL Amendment # Paramus, NJ 07652 Emergency (including Name of Contact Telephone Number DOH justification) DCA Cancellation Phillip White 201-489-6700 FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Commercial Retail Building School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, 312 Rt 4 East etc.) City (5) # of Floors Square Feet Bldg. Age Paramus 20000 65 +/-County (6) County Code (7) Current Use (Prior if being demolished) (STATE USE ONLY) Bergen Residential Home Name of Monitoring Firm Hired by Building Owner (8) ASCM No Name of Abatement Contractor (9) Project Manager All Stages Abatement Street Address Street Address 280 N. Midland Ave. City, State, Zip Code City, State, Zip Code Saddle Brook, NJ 07663 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 201-600-3184 01305 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 3/18/19 3/25/19 Occupancy Status During Abatement (Check Only One) Street Address Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: Scope of Work (Check All That Apply) ≥3 sf or ≥3 If Renovation Full Containment with Negative Pressure × ≥160 sf or ≥260 lf Demolition Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Туре Normally Location of Description of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ Encapsulate TO BE ABATED (i.e. thermal systems insulation, (Specify Enclosure Remova Repair Custodial Staff? In Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A Store Front X Fire Proofing Spray 2.500 SF X

NJDEP Waste

Hauler ID No.

0036592

Title

President

Cubic Yards

Disposal Date

Signature

of Waste

10 yd

TBD

City, State

Completed by

Name of Registered Waste Hauler

All Stages Abatement

Saddle Brook, NJ

Richard Cristofol

Name of Registered Landfill

City, State

Pen Argyl, PA

Grand Central Sanitary Landfill

Date

3/7/19

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

	4PAID	ı	(Pi	CATION Irsuant	ate of Nev I OF ASBE to NJAC 8	STOS 3:60 ar	ABATE nd 12:120	0)	NT		G	F		N ?	7	
Date of Notification (1) 3/7/19					f Building (n Aryova		Operator	(2)			MAR	1	2	2019		
Agencies Notified	Type Notification			Street A	ddress						MALL		-	-010		kernesti.
	☐ Initial		Ц								44-				** 34	
DEP X DOL	Amended Amendment #				ite, Zip Co ington, N		376					100			ş	
	× Emergency (in		_		f Contact	13 070	370			Tol	ephone I		hor	-47-67		C
DOH DCA	justification) Cancellation				n Aryova	ainen				1 161	epriorie i	NUITI	i Nest			
					LITY INFO		TION	_		1			-	-		
Name of Facility Where	Abatement is Taking	Place (3	3)					Ту	pe of Facility	(4)						
Residential Home									School (K-							
Street Address								×	Subchapte Other (i.e.					linas	home	25
									etc.)	tomation a serv		JI OIG		1 12 14 14 14 14 14 14 14 14 14 14 14 14 14		,,,
City (5) Washington								100	juare Feet 750	2	Floors			ldg. A 5 +/-	200	
County (6)	· ·			County (Code (7)				rrent Use (Pr		na dema	liche		3 1/-	ia Table	
Bergen					USE ONLY)	1		R	esidential l	Home	····	JIISHE	u)			
Name of Monitoring Firm Project Manager	Hired by Building O	wner (8)		ASCM	1 No.		100000000000000000000000000000000000000		Abatement Co les Abatem		(9)					
Street Address						-500,	Street 280		_{dress} Midland Av	re.						
City, State, Zip Code							1000		e, Zip Code Brook, NJ	07663						
Project Manager for Mon	itoring Firm		Telepho	ne No.		Teleph 201-		No. 0-3184		License 01305						
Start Date (10) 3/9/19	0.0	Schedul		pletion (Date (11)		Name	of C	OSHA Monitor				10-03			
Occupancy Status Durin			<u> </u>			V	Street	Add	dress							-
➤ Facility Closed/Vac	ated During Entire Pe led Outside of Norma	eriod of	Abatem	ent			City S	State	, Zip Code							
Other – Describe:						_										
Scope of Work (Check A	ii i nat Appiy)	[27]					IS	71			-	52.0				
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf			Renova Demolit				É	_	Full Containn Mini-Enclosus Glovebag Pro Non-Exempte	re ocedure					0	
		1.	1						Non-Exemple	u () an	u NOII-FI	labic		772 13 17	emeni	t
Location	o of	1	Locati Normal	ly		D	escription	o of						Ту	ре	
Asbestos-Containing	Material (ACM)		ed Sole			os Cor	ntaining N	Mate	rial (ACM)	(3)(3)	mount				Щ	m
TO BE AB. In Facil		100000000000000000000000000000000000000	todial S		(i.e.		al system acing, VA				or LF)		Remova	Repair	Encapsulate	Enclosure
(13)			(12)				miscellar				Sin Saf		ova	bair	sula	sure
		Yes	No	N/A											te	LD .
Kitche	х				VAT			34	16 SF		X					
Bathro	om		x				VAT			2	0 SF		×			
								1-3								
Name of Registered Was	ste Hauler		17969	JDEP W		C-1000000000000000000000000000000000000	c Yards		Name of	Registe	red Land	dfill				
All Stages Abateme	nt		100000	auler ID 036592		of Wa			Grand	Centra	al Sanit	tary	Lan	dfill		
City, State Saddle Brook, NJ						Dispo	osal Date)	City, Sta Pen A		Ą					
Completed by		Title	ident				Signature	e _o	11/	1		Date	9			
Richard Cristofol					fr.	Z			-	3/7	/19					

CK 1965 TA	D	(t to NJA							=	W	::: ::::::::::::::::::::::::::::::::::	
Date of Notification (1) 3/7/19				of Buildin Fleische		Operator	(2)						1	1
Agencies Notified Type Notification				Address	,1			-	11.	MAR	12	2019	1	That;
DEP Amended Amendmen	. 44			tate, Zip (1: 201			·		
	(includin	g		Rock, North		33							0.3	
DOH justification			The state of the s	Fleische					Te	lephone N	umber			
New (5 W)			FAC	ILITY IN	ORMAT	ION				1				
Name of Facility Where Abatement is Takir Residential Home	ig Place	(3)					Туре	of Facility	(4)			2.74		
Street Address							H	School (K- Subchapte		or than V	12)			
							×	Other (i.e.				ildings	, hon	nes,
City (5)							Squa	etc.) are Feet	# c	f Floors		Bldg.	Age	
Glen Rock							300	0	2			65 +		
County (6) Bergen			County (STATE	Code (7)	y)			ent Use (Pi sidential		ing demoli	shed)			
Name of Monitoring Firm Hired by Building	Owner (8	3)		M No.		Name		atement Co		(9)				
Project Manager								s Abatem		(-)				
Street Address						Street								
City, State, Zip Code								dland Av	/e.					
200								rook, NJ	07663					
Project Manager for Monitoring Firm		Telepho	ne No.		Teleph				License	No.				
Start Date (10)	Schodu	lod Cor	mpletien	Date (11)		201-6	0.00			01305				
3/8/19	3/13/1		npietion	Date (11)		ivame (of USI	HA Monitor	•					
Occupancy Status During Abatement (Chec	k Only O	ne)				Street /	Addre	SS						-
Facility Closed/Vacated During Entire R Abatement Performed Outside of Norm	Period of	Abater	ment											
Other – Describe:	iai Facilit	y Hour	S 			City, St	ate, Z	ip Code						
Scope of Work (Check All That Apply)														
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		Renova				×	Ful	I Containm	ent with	Negative	Pressu	ıre		
2100 \$1 01 2200 11	ш	Demoli	tion			Н	0.90%	ni-Enclosur ovebag Pro						
	1							n-Exempte		d Non-Frial	ble Pro			
Location of		Locati Normal										101100000000000000000000000000000000000	emen vpe	t
Asbestos-Containing Material (ACM)		ed Sole		Asbes	tos Cont	scription of aining Ma	aterial	(ACM)	Aı	mount			m	
TO BE ABATED In Facility		todial S		(i.e.	thermal surfac	systems cing, VAT		ition,		pecify or LF)	Ren	Re	Encapsulate	Enclosure
(13)		(12)				niscellane			Oi.	OI LI)	Remova	Repair	sula	osur
	Yes	No	N/A								-		ate	œ.
Basement	x				VAT			66	0 SF	х				
1st FI	х				VAT			35	2 SF	x				
Name of Registered Waste Hauler	sanacon Book o							Name of	Register	red Landfill				
All Stages Abatement			auler ID 036592		of Was 5 yd			Grand	Centra	l Sanitar	y Lar	ndfill		
City, State Saddle Brook, NJ					Dispos	al Date		City, Stat						
Completed by	Title				TBD	anatura	111	Pen Ar	gyl, PA		4-			
Richard Cristofol	Presi	dent			31	gnature	1/1	/	<i></i>	33300	ite 17/10			

State of New Jersey

Up and	A COL				to None				. 45	, /	F. (**) **) ** ** ** **		55	1	111
Date of Notification (1) 3/8/2019				Name o	of Building Bank NA	Owner/o Master	Operator Trust	r (2)			MAR 1	2 2	019		
Agencies Notified EPA	Type Notification	1			Address N. Hasl	kett Ave)							100	
DEP × DOL	Amended Amendmen				tate, Zip C s TX 75				(i)	1		2.3		-	25
DOH DCA	Emergency justification Cancellation)	3	The state of the s	of Contact Dunn						lephone Nu 01-956-2				
				FAC	ILITY INF	ORMAT	ION								
Name of Facility Where A	Abatement is Taki	ng Place	(3)					Тур	e of Facility (School (K-1						
Street Address 1205 Ringwood Av	е				<i>3</i> 2			×	Subchapter Other (i.e. petc.)	8 (Oth	er than K-1 & commerc	2) cial bui	ldings	, hom	ies,
City (5) Haskell				100				Squ 2,1	are Feet	# 0	f Floors		3ldg. /		
County (6) Passaic					Code (7) USE ONLY	0		Curi	rent Use (Pri	or if be	ing demolis	shed)			
Name of Monitoring Firm	Hired by Building	Owner (8)	ASCI	M No.		Name Che	of Ab	atement Cor ark Industr	ntractor rial	(9)				
Street Address							Street 54 N		ess an Dr						
City, State, Zip Code	-								Zip Code IJ 07871						
Project Manager for Mon	itoring Firm			Telepho	one No.		Teleph 973-		No. -2645		License N	No.			
Start Date (10) 3/9/2019		Schedu 3/15/2	led Cor	mpletion	Date (11)		Name Che	of OS	SHA Monitor ark Industr	ial					
Occupancy Status During	Abatement (Chec	ck Only O	ne)				Street	Addre	ess						
Facility Closed/Vaca Abatement Performe Other – Describe:	ited During Entire ad Outside of Norr	Period of nal Facilit	Abaten y Hour	nent s			City, S	tate, 2	an Dr Zip Code						
Scope of Work (Check Al	I That Apply)					_	Spai	rta N	J 07871						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	,, , , , , , , , , , , , , , , ,		Renova Demolii				×	M Gl	ull Containme ini-Enclosure lovebag Proc on-Exempted	edure				re ·	
		ls	Locat	ion						()			Abat	ement	t
Location		0.000	Normal			Des	scription	of				-	Ty	/pe	_
Asbestos-Containing TO BE ABA In Facilii (13)	TED	Ma Cus	intena todial ((12)	nce/ Staff?	Asbes (i.e.		aining M systems cing, VA niscellan	s insul T, or	lation,	(S	mount specify or LF)	Removal	Repair	Encapsulate	Enclosure
Baseme	ent	Yes	No	N/A		1/	AT Tile			0.0	0.05			Ö	0.00
Bacome			^	-		V.	AT THE	;		90	00 SF	X			
								//Air				-			
											i — Uliquini	1			
Name of Registered Wast Newark Carting	e Hauler		- 280	IJDEP W lauler ID		Cubic of Was			1 00000		red Landfill al Sanitai		ndfill		
City, State Newark NJ						1000	al Date		City, State	9					
Completed by Corey Stankovic		Title CEC)			Si	gnature	<u> </u>	Farka		Da	ite /8/20	19		

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Chk# 3533

Date of Notification (1)	ELE'S.	B			I NI n		7.0 0.00 and 0.					man and a	
	8 /	1	9				ng Owner/Operator	5-31 A		E		VI .	-
					IV	ioniciair	Twp Public Work	(S					· · · · · i
	Γype Notif ☑ Initial	ication	1			et Address					7		1
	☑ Initial ☐ Amend	od			2	19 North I	Fullerton Ave		MAR	1 :	2 20	19	
⊠ DOH	Amend		#		City	, State, Zip	Code			-			- 1
□ DCA [☐ Emerge	ency (i		ng		lontclair,			ļ				
(NJAC 5:23-8)	justifica	ation)			Nan	ne of Conta	ct		Telephone Nur	nber	17.0		-
L	Cancell	ation			N	/A			(973) 783-5	600	abrical file		
					F	ACILITY I	NFORMATION						
Name of Facility Where Aba				ce (3)				Type of Facility	(4)			-	
Montclair Twp Public	Works I	Build	ing					School (K-1	2)				
Street Address					15			Subchapter	8 (Other than K-1	2)	25 037422		
219 North Fullerton A	ve							homes, etc.	private and comme	ercial	buildir	igs,	
City (5)								Square Feet	# of Floors	1	3ldg.	Ane	7.0
Montclair								+-25,000	2	1.	+-5		
County (6)				7.20	Co	unty Code (7)(STATE USE ONLY)		rior if being demol	ished)			
Essex								Township I		isricu)			
Name of Monitoring Firm Hir	red by Bui	ilding	Owner	(8)	ASC	Л No.	Name of Abatem						
Hillmann Consulting								IVIRONMENTA					
Street Address							Street Address		, 1110.				
1600 Route 22 East							1123 BEAVE	R STRFFT					
City, State, Zip Code							City, State, Zip C	1900					
Union, NJ 07083							BRISTOL, PA						
Project Manager for Monitori	ing Firm			Te	ephone	No.	Telephone No.	1 10001	License No.				
Craig Abrams						7-3014	215-788-6040)	00509				
Start Date (10)		Sched	duled (Compl	etion D	ate (11)	Name of OSHA M		00303			-	
_3 / _18 / _^	19					19		VIRONMENTA	LINC				
Occupancy Status During Ab	patement (Chec	k only	one)			Street Address	THE THIN ETT PA					
☐ Facility Closed/Vacated D	During Enti	ire Pe	riod of	Abate	ement		1123 BEAVE	POTDEET					
Abatement Performed Out	itside of N	ormal	Facilit	v Hou	rs - De	scribe	City, State, Zip Co						
Time of Abatement:	AM	P	M/ <u>4:00</u>	PM-1	2:00A	M	BRISTOL, PA						
Scope of Work (Check all tha	at apply)						DICIOTOL, FA	19007					
☐ ≥3 sf or >3 If			-				☐ Full Cont	ainment with Neg	ative Pressure				
\(\sum_{\geq} \geq 160 \text{ sf or \geq} 260 \text{ lf}			⊠ Re					losure	,				
					OII		☐ Glovebag ⊠ Non-Exe] Procedure mpted (*) and No	n-Friable Procedu				
				Loca				, and the	Triable Frocedu		patem	ont 7	
Location of Asbestos-Containing Mate	:			Norma	illy ely by		Description of	f			_		1
TO BE ABATED		1)		intena		Asbes	stos Containing Mai	terial (ACM)	Amount	Removal	Repair	Enc	Eliciosure
IN Facility	_		Cus		Staff?	(1.6.	surfacing, VAT,	or	(Specify SF or LF)	10/2	=	aps	180
(13)			V-	(12)	T	-	other miscellaned	ous)	01 01 11)	=		Encapsulate	le le
st Floor Labbu			Yes	No	N/A							CD	
Ist Floor Lobby					\boxtimes	VAT/Ma	stic		422 SF				
2 nd Floor Lobby					\boxtimes	Linoleu	m & Mastic		395 SF		П	П	F
			П								1] [+=
			$\frac{\square}{\square}$			-					Ш	Ш	L
lame of Registered Waste Ha	auler			Ц.		Mark			7) 				
SERVICE TRANSPORT		, INC		175.000	JDEP \ auler II 20990	O No.	Cubic Yards of Waste	Name of Regist					
City, State					20990		Disposal Date	City, State					
YARDLEY, PA							TBD	WAYNESBI	URG, OH				
ompleted By (Print or Type)		Title					Signature		O Dat	e			
Dillan DeCaro		Es	timat	or			Dilla	· Da Car		-0	. /	G	

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

CMX# 3532

Date of Notification (1)	- 11102 W. Harris W.	eg Cor			Nan	ne of Buildi	ng Owner/Operator	(2)					
	8 /	1	9				search, Inc	(2)	EG	F	7	7	
	Type Notifi	ication			Stre	et Address)(1 19	1-1
K7	☐ Initial	27.0			12	0 West S	tate Street	(i)	lite.	-			
⊠ DOH	☐ Amenda Amenda		<i>t</i>		City	State, Zip	Code	100	MAR	+2	- 20	9	111
	☐ Emerge			- -	Tr	enton, N	J 08608						
(NJAC 5:23-8)	justifica		oraan	19	Nam	e of Conta	ct		Telephone Num	iber		-	
	☐ Cancell	ation			Ri	chard Hu	nter	19	609-392-420				10
		274-54-5			F	ACILITY II	NFORMATION			· /	- 1504		75
Name of Facility Where Ab	patement is	Takin	g Plac	e (3)			C. IIII (II CII	Type of Facility	(4)				
Hunter Research, Inc								School (K-12					
Street Address								Subchapter 8	Other than K-12	2)			
120 West State Stree	et							Other (i.e., pr	ivate and comme	rcial b	ouildir	gs,	
City (5)								Square Feet	# of Floors	Te	Olda I	\ ~~	
Trenton								+-4,000	3		3ldg. / +-5(
County (6)					Cou	inty Code (7)(STATE USE ONLY)	Current Use (Pri	or if being demoli	shed)			-
Mercer								Office					
Name of Monitoring Firm H			Owner	(8)	ASCN	1 No.	Name of Abatem	ent Contractor (9)		-			
Environmental Conn	ection, In	C					BRISTOL EN	VIRONMENTAL	., INC.				
Street Address							Street Address						
120 North Warren Str	reet						1123 BEAVE	R STREET					
City, State, Zip Code	-						City, State, Zip C	ode		-			
Trenton, NJ 08608							BRISTOL, PA	19007					
Project Manager for Monito	ring Firm			Te	lephone	No.	Telephone No.		License No.	-			
Steve Mania				1	09-39	2-4200	215-788-6040)	00509				
Start Date (10)		Sched	duled C	Comp	etion D	ate (11)	Name of OSHA N	Ionitor					
					6 /	19	BRISTOL EN	VIRONMENTAL	, INC				
Occupancy Status During A							Street Address						-
☐ Facility Closed/Vacated	During Ent	ire Pe	riod of	Abat	ement		1123 BEAVE	R STREET					
Abatement Performed O	outside of N	lormal	Facilit	у Но	ırs - De	scribe	City, State, Zip Co	ode					
Time of Abatement:		P	VI/ <u>4:00</u>	PIVI-	I:UUAW		BRISTOL, PA	19007					
Scope of Work (Check all the	nat apply)												
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf			⊠ Re □ De	enova	tion ion					~e			
				Loca				7 (7 (1)	Trable 1 Toccadi		patem	ont T	vno
Location of				Norma	ally lely by		Description of	f		-	_		1
Asbestos-Containing Ma TO BE ABATE		A)			ance/	Asbe	stos Containing Mai	terial (ACM)	Amount	Removal	Repair	Encapsulate	Enclosure
IN Facility			Cus		Staff?	(1.6	surfacing, VAT,	or	(Specify SF or LF)	ova	ai.	sde	uso
(13)				(12)	T	-	other miscellaned		01 01 21 /	-		ulate	6
			Yes	No	N/A							(D	
Basement						Pipe Ins	sulation		350 LF				
											П		
Name of Registered Waste I				1	NJDEP N	Vaste	Cubic Yards of	Name of Registe	ered Landfill	1	1		
Bristol Environmental	Inc.			F	18706	74.0000E-05	Waste TBD	Fairless Lar					
City, State							Disposal Date	City, State					
Bristol, PA							TBD	Fairless Hill	s, PA				
Completed By (Print or Type)	Title					Signature		Dat	е.			
Dillan DeCaro		Es	timat	or				DeCarn			-/	9	

PAID

CK# 931

Date of Notification (1)				Na	ame of Build	ing Owner/Operato	r (2)					•
03/11	1	9			Verizon	mg Owner/Operato	r (2)	EG	F		1	
Agencies Notified EPA DOLWD DHSS DCA (NJAC 5:23-8) Type Not Amen Amen Amen Cance	ded dment # gency (in cation)	#	– ng	Cit I Na	reet Address 1 Verizon \ y, State, Zip Basking Ri me of Conta Johnny De	Way Code idge, NJ		Telephone No. 301-802-5	ımber		9	The state of the s
				I	ACILITY I	NFORMATION		1				
Name of Facility Where Abatement Verizon Street Address 5 Walker Avenue City (5)	is Takin	g Plac	e (3)		AGILITY	IN CRIMATION	Type of Facility School (K-12 Subchapter 8 Other (i.e., pi) 3 (Other than K- rivate and comm	12) nercial	buildin	ıgs,	-
Allentown, NJ							Square Feet	# of Floors		Bldg. A	\ge	
County (6)							10,000	3		50		
Monmouth				Co	ounty Code (7)(STATE USE ONLY)	Current Use (Pri	or if being demo	lished)			
Name of Monitoring Firm Hired by Bi			(8)	ASC	M No.	Name of Abatem	nent Contractor (9)					
USA Environmental Managae	ement	Inc.				JVN Restora						
Street Address						Street Address						
8436 Enterprise Avenue						47 Foster Ro	oad					
City, State, Zip Code						City, State, Zip C						
Philadelphia, PA 19153						Staten Island						
Project Manager for Monitoring Firm			Te	lephon	e No.	Telephone No.	- 111 10005	Licones No				
Mark Jenkins					55-5810	718-605-6256		License No. 00774				
Start Date (10)	Sched	uled C	omp	letion [Date (11)	Name of OSHA N		00774				
03 / _25_ / _19_					19	Testor Tech	nomitor					
Occupancy Status During Abatement	(Check	only	ne)			Street Address						
☐ Facility Closed/Vacated During En	tire Per	iod of	Abati	ement		10 59 Jackso						
	Normal	Facility	Ho.	irs - De	escribe							
Time of Abatement:AM	PN	1/5:00	PM-1	1:30A	Л	City, State, Zip Co						
Scope of Work (Check all that apply)												
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf			nolit	ion		☐ Mini-Enc	tainment with Nega losure g Procedure mpted (*) and Non-		ıre			
Location of			Loca						Al	pateme	ent T	vne
Asbestos-Containing Material (ACI	M)	Used	d Sol	ely by	Achor	Description o	f	March 10 Tel Steel Artists	-			1
TO BE ABATED				ance/	(i.e.	stos Containing Ma , thermal systems i	insulation	Amount (Specify	Remova	Repair	nce	Enclosure
IN Facility (13)		Custo	(12)	Staff?		surfacing, VAT,	or	SF or LF)	ova	=	psu	nso
1st Floor		Yes	No	N/A		other miscellaned	ous)		-		Encapsulate	ē
1 Floor					Floor Ti	le and Mastic		200 SF			П	П
									П			П
									+-			
Name of Registered Waste Hauler			N	1000000	Waste	Cubic Yards of	Name of Register	and I am dell	\perp \sqcup			Ш
Newark Carting City, State			172	lauler l	D No. 66	Waste 5	G.R.O.W.S.,					
Hackettstown, NJ						Disposal Date	City, State					
			200			03/28/2019	Morrisville,P	A				
Completed By (Print or Type)	Title					Signature	111	Da	te		_	
Ralph Barnhardt	Pro	oject	Man	ager		AAAA					C.	
SB-41		_	_			11091	66 hours	(_	3-1	1.	1	

Date of Notification (1)	K9536 PAT			CATION	I OF ASBESTOS to NJAC 8:60 ar	ABATE				<u>s</u> u		1 12	i.	The second
Second Content of Pacific Process Second Content of Pacific Pr	Date of Notification (1) 02/26/2019						r (2)	:		MAR	1 2	201	9	
Emisting (richolding justification) Stant Tarzik Telephone Number 2128734919						2		-	Ĺ.	-Marin III I I I I I I I I I I I I I I I I I				
Second County Code (?) County Code (?) County (%) Residential Control (%) Residentia			_			4						en swee	over 1	
Name of Facility Where Asstement is Taking Place (3) Maybrook Gardens - Building 13 Street Address Street Address Square Feet 2 for Floors (4) Square Feet 2 for Floors (6) Bergen County (6) County (7) Crown Air Services LLC Street Address Stre	Emergency (justification) Cancellation	including												
Maybrook Gardens - Building 13 Sched (K-12) Subchapter 6 (Other than K-12) Subchapter 6 (Ot				FACI	LITY INFORMAT	TON								
25 Maybrook Drive	Maybrook Gardens - Building 13	g Place (3	3)					School (K-	12)					
Square Feet								Other (i.e.				dings,	home	es,
Bergen									100000000000000000000000000000000000000	Floors	1.00	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ge	
Crown Air Services LLC Street Address Street Address Street Address Street Address Street Address City, State, Zip Code Brooklyn, NY 11203 Project Manager for Monitoring Firm Telephone No. Te									or if bei	ng demolish	ned)			
Street Address 478 Albarny Street (179, State, Zip Code Brooklyn, NY 11203 Project Manager for Monitoring Firm Telephone No. Telephone No. Telephone No. Telephone No. Trest Address Table (10) 03/25/2019 Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other - Describe: Other - Describe: Scope of Work (Check All That Apply) 23 of or ≥250 if Renovation Demolition To Be ABATED In Facility (13) To Be ABATED In Facility (13) (6) Misc Crawl Spaces X Pipe Insulation Street Address 132 Washington Avenue City, State, Zip Code Brooklyn, NY 11205 Street Address 132 Washington Asbestways Solutions Corp Street Address 132 Washington Avenue City, State, Zip Code Brooklyn, NY 11205 Street Address 132 Washington Avenue City, State, Zip Code Brooklyn, NY 11205 Fruil Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempled (1) and Non-Friable Procedure Non-Exemple		Owner (8)		ASCN	1 No.	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2				2.00				
City, State, Zip Code Brooklyn, NY 11203 Project Manager for Monitoring Firm Telephone No. Teleph									venue					
Project Manager for Monitoring Firm	City, State, Zip Code		0			City, S	State, Zi	ip Code						
O3/25/2019 O4/19/2019 Asbestways Solutions Corp Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other – Describe: Abatement Street Address 132 Washington Avenue	Project Manager for Monitoring Firm			Telepho	ne No.	Telepi	hone No	0.			0.			
Cocupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Period of Normal Facility Hours Other - Describe: Scope of Work (Check All That Apply) Scope of Work (Check All That Apply) Store 3 If Full Containment with Negative Pressure Mini-Enclosure Giovebag Procedure Non-Exempted (*) and Non-Friable Pr					Date (11)	100000000000000000000000000000000000000	oradilinasianis			orp				
Abatement Performed Outside of Normal Facility Hours City, State, Zip Code	Occupancy Status During Abatement (Chec	k Only Or	ne)							•				
Scope of Work (Check All That Apply) Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Renovation Demolition Renovation Demolition Pull Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-	Facility Closed/Vacated During Entire F	eriod of	Abate	ment					venue					
Renovation Demolition Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Exempted		ai Facility	Houl	5					5					
Demolition Demolition Demolition Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Type Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Exempted	Scope of Work (Check All That Apply)						_							
Secretary Secr		-					Mir	ni-Enclosur	e cedure				е	
Location of Asbestos-Containing Material (ACM) Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A		Is	Loca	tion								Abate	ment	t
(6) Misc Crawl Spaces X Pipe Insulation 551 Lnf X Name of Registered Waste Hauler Newark Carting Inc City, State Newark, NJ 07102 Completed by Title Pipe Insulation 551 Lnf X Disposal Date Cubic Yards of Waste Cubic Yards of Waste Tully-town RE Facility Date	Asbestos-Containing Material (ACM) TO BE ABATED In Facility	Use Ma Cus	ed Sol aintena todial (12)	ely by ance/ Staff?	Asbestos Cor (i.e. therma surfa	ntaining Nataining National all system acing, VA	Material is insula AT, or		(8	Specify	Removal	Ī		Enclosure
Name of Registered Waste Hauler Newark Carting Inc City, State Newark, NJ 07102 Completed by Title NJDEP Waste Hauler ID No. 4506 Cubic Yards of Waste Tully-town RE Facility City, State Disposal Date Date		-	No	N/A	5:					415	1	-		-
Newark Carting Inc City, State Newark, NJ 07102 Completed by Hauler ID No. 4506 Tully-town RE Facility City, State Disposal Date City, State Date	(6) Misc Crawl Spaces	(6) MISC Clawl Spaces							55	ol Lnt	X			
Newark Carting Inc City, State Newark, NJ 07102 Completed by Hauler ID No. 4506 Tully-town RE Facility City, State Disposal Date City, State Date														
Newark Carting Inc City, State Newark, NJ 07102 Completed by Hauler ID No. 4506 Tully-town RE Facility City, State Disposal Date City, State Date	Name of Registered Waste Hauler			N.IDEP W	Vaste Cubic	c Yards		Name of	Registe	ered Landfil				
Newark, NJ 07102 Completed by Title Signature Date	Tennis of the first of the firs			Hauler ID										
Completed by Title Signature Date					Dispo	osal Date	7	City, Sta	te					
	Completed by		er			Signatur	e		1	10000		2019		

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CK9536 P	AID'			OF ASB					ty - 2 15° °	ALCOHOLOGICA				
Date of Notification (1) 02/26/2019				Building			(2)		M	AH 12	201	9	y sur	2
Agencies Notified Type Notifical	tion		Street A 155 Ri	ddress verside	Drive				L .			. 1		
X DEP Amende X DOL Amende	ment #			te, Zip Co ork, NY					7,5-17		tur tur	A_ 01 . **	163	
X DOH justificat		- 1	Name of	Contact						ephone Nui 2873491				
DCA Cancella	ation			LITY INFO	DRMATI	ON			214	2013491	9			
Name of Facility Where Abatement is T Maybrook Gardens - Building 1	aking Place (3 2)	1 401			O.R	Тур	of Facility (4						
Street Address 25 Maybrook Drive						â	×	Subchapter Other (i.e. pretc.)	8 (Othe			dings,	home	es,
City (5) Maywood							Squ	are Feet	# of	Floors	12.73	ldg. A	ge	
County (6) Bergen			County (Code (7) USE ONLY				ent Use (Prio sidential	r if bei	ng demolis	ned)			
Name of Monitoring Firm Hired by Build Crown Air Services LLC	ling Owner (8)		ASCN	No.				atement Contays Solution						
Street Address 478 Albany Street						Street 132		ess hington Av	enue					
City, State, Zip Code Brooklyn, NY 11203								Zip Code NY 11205	i					
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph 7188				License N 01340	lo.			
Start Date (10) 03/18/2019	Schedule 04/12/2		npletion (Date (11)		100		SHA Monitor ays Solutio	ns Co	orp				
Occupancy Status During Abatement (Check Only On	e)				Street		3.73.73						
Facility Closed/Vacated During En Abatement Performed Outside of Other – Describe:						City, S	state,	hington Ave Zip Code , NY 11205						
Scope of Work (Check All That Apply)						0.00	,							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Manage 1	enova				×	M	ull Containme ini-Enclosure lovebag Proc		Negative I	Pressu	re		
							l N	on-Exempted	(*) and	d Non-Friat	ole Pro		emen	
Location of Asbestos-Containing Material (ACN TO BE ABATED In Facility	1) Use Ma	Locati lormali d Sole intenar odial S	ly ly by nce/		tos Cont		/lateria	al (ACM) lation,	(5	mount specify or LF)	Remova		e Encapsulate	Enclosure
(13)	Yes	(12) No	N/A		other n	niscellar	neous)			oval	air	sulate	sure
(3) Misc Crawl Spaces	X				Pipe	Insula	ation		27	5 Lnf	X			
Basement	X				Pipe	Insula	ation		24	0 Lnf	х			
Meter Room	×				Pipe	Insula	ation		15	0 Lnf	x			
Name of Registered Waste Hauler Newark Carting Inc		H	IJDEP W lauler ID 506		Oubic of Was	Yards ste		F	3	red Landfil E Facility				
City, State Newark, NJ 07102						sal Date	2	City, State)					
Completed by Mendy Gorodetsky	Title Office	er			S	Signature	e l	0)/1			ate 2/26/	2019		
ASB-41 (R-06-08)						. Doш	ot use	this form for	asbes	tos licensu	e exe	npted	activ	ities.

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

UK95360 PAI			ursuant f	ate of New Jerse OF ASBESTOS to NJAC 8:60 an	ABATEM d 12:120)		LAD 1	.!!	2010		
Date of Notification (1) 02/26/2019	UU			Building Owner/Cook Gardens I		2)	MART	4	CUIJ		
Agencies Notified Type Notification			Street Ad	ddress verside Drive				(A)		-	
□ EPA □ Initial □ Amended □ DOL □ Amendment	#	_		te, Zip Code ork, NY 10024	1						
Emergency (justification) DCA Cancellation	6 I = 10 1000		Name of Brian T	Contact			Telephone Nun 2128734919				
E Cancalation				ITY INFORMATI	ON						
Name of Facility Where Abatement is Takin Maybrook Gardens - Building 14	g Place (3)				Type of Facility (4	7.0 				
Street Address 25 Maybrook Drive							8 (Other than K-12 rivate & commercia		lings,	home	es,
City (5) Maywood						Square Feet	# of Floors 2	B 6	ldg. A 0	ge	
County (6) Bergen			County C	Code (7)		Current Use (Prio	r if being demolish	ed)			
Name of Monitoring Firm Hired by Building (Crown Air Services LLC	Owner (8)		ASCM	No.		f Abatement Constways Solutio					
Street Address 478 Albany Street					Street A						
City, State, Zip Code Brooklyn, NY 11203					City, Sta	ate, Zip Code lyn, NY 11205					
Project Manager for Monitoring Firm			Telephor	ne No.	Telepho	ne No.	License No	э.		-	
Start Date (10)			npletion D	Date (11)	Name o	82600 f OSHA Monitor	01340				
03/25/2019	04/19/2			-		tways Solutio	ns Corp				
Occupancy Status During Abatement (Chec	Period of A	Abaten	nent			/ashington Av	enue				
Other – Describe:	iai Facility	nours			0.5	ate, Zip Code Iyn, NY 11205	5				
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	lenova emolit			×	Mini-Enclosure Glovebag Proc				е	
	le	Locati	ion						Abate	ement	t
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	Normal d Sole intena todial S (12)	lly ely by nce/ Staff?	Asbestos Con (i.e. therma surfa		aterial (ACM) insulation, , or	Amount (Specify SF or LF)	Removal	Repair	<u>Encapsulate</u>	Enclosure
(6) Misc Crawl Spaces	Yes	No	N/A	Pine	Insulat	ion	545 Lnf	x			
Meter Room	X		+		Insulat		90 Lnf	X	-	-	-
Basement	X				Insulat		140 Lnf	X	_	-	\vdash
Dasement	1^			гіре	insulat		170 LIII	1	-		-
Name of Registered Waste Hauler		1000	JDEP W dauler ID		Yards		Registered Landfill	1	-		
Newark Carting Inc		4	506		-12	V					
City, State Newark, NJ 07102				Dispo	sal Date	City, State	3				
Completed by Mendy Gorodetsky	Title Office		1		Signature	m	7 Da 02	te 2/26/2	2019		
ASB-4: (9-06-08)					Cono	/ 1	asbestos licensur	e exer	npted	activ	ities.

ASB-41

STATE OF NEW JERSEY NOTIFICATION OF ASBESTOS ABATEMENT (1) 4 (2) (2)

	Uniting 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	ALLE	(PURSUA	ANT TO NJ	AC 8:60-7	AND 12:120	1-7 Che	CRO	\$ (C)	067	
Date of Notification	1 (1)	,		CITY OF	Building C NEWARK	wner / Ope	erator (2)	. Ę		1 N/7	
Agencies Notified	Type of N	Notification		Street A	ddress AD STREE	_					***
☐ EPA		Initial		-	te, Zip Cod		1,,	1			- 11
☐ DEP		Amended			K, NJ 07102				MAR 1	2 2019	
□ DOH		Amendment		1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Contact			Telepho	ne Num	ber	7-11
☑ DOL		Emergency v	w/ justification	RICH LO	PEZ			973-424	-4145		
		Gariocilation	The state of the s	FACILITY	INFORMAT	ION			2 1		
Name of Facility W	here Abater	ment is Taking	Place (3)		Type of F	acility (4)				17 11 1970	
46-132 ST CHARLE	S	noncis raking	riace (3)		Type of F	acility (4)					
						School (H					
Street Address 46-132 ST CHARLE	c					Subchap	ter 8 (Other t	han K-12)		
40-132 31 CHARLE	5				V		., private & comes, etc.)	mmercia	I		
City (5)	County (6	6)	County Code	(7)	Square F		# Of Floors		Buildir	na Aae	
NEWARK	ESSEX			, ,	1	N/A	N/	A	Junun	ig rigo	
							f being demo	lished)	1	N/A	
Name of Monitoring	Eirm Liro	d bu Blda O	(0)	Lancas		R VACANT					
warne or wormtoring	, riiiii niie	a by Blag. Owl	ier (8)	ASCM NO	9						
EMILCOTT					NORTHS	TAR CONT	RACTING GR	OUP. IN	D.		
Street Address					Street Ad			,			
190 PARK AVENUE											
City, State, Zip Cod MORRISTOWN, NJ						ns Parkway					
Project Mngr. For N		irm	Telephone Nu	ımhor	City, Stat	e, Zip Code	9				
DAVID TOMSEY	· · · · · · · · · · · · · · · · · · ·		973-538-1110	illibei	East Hand	over, NJ 079	936				
Sheduled Start Date	(10)	Sched. Comp	oletetion Date (*	11)		e Number		License	Number		
03//25	/19	03	//	19							
Occupancy Status I	/ During Abat	tement (Check	Only 1)			84-8682				00860	
Facility C	losed/Vaca	ited During En	tire Period of		Production of the Control of the Con	OSHA Mon	itor RACTING GR	OLIP INC	,		
Abateme	nt				Street Ad		VIOTINO OIL	001 , 1140			
Abateme	nt Performe	ed Outside of I	Normal Facility								
✓ Other - D	escribe: _	_ MON-FRI _ 7:00 AM-3:30	DM			s Parkway					
l Caller - D	escribe	7.00 AIVI-3.30	PIVI		Fast Hand	e, Zip Code over, NJ 079	936				
Scope of Work (Che	ck All That	Apply)				101,110 07	,00				
☐ Demolition	on	7	Renovation		Full Cont	ainment wi	th Negative F	Processing			
	3lf		ronovation	-	Mini - End		ui Negative r	ressure			
☐ ≥160 sf o	r ≥260 If				Glovebag	Procedure					
				4	Non-Exen	npted (*) ar	nd Non-Friabl	e Proced	lure		
Location of	of	Is	T	Descript	ion of			Abateme	nt Type		
Asbestos Cont	aining	Location	As		ontaining			R	I	E	E
TO BE ABA	ren	Normally		Material			Amount	E	R	N	N
TO BE ABA		Used Solely		e., therma			(Specify	M	E	C	С
(13)		by Main-			facing, VA		SF or LF)	O V	P A	A P	L
		tenance/		011101 111100	,ciidiicous)		1 1	A	lî	s	O S
		Custodial						Ĺ	R	Ü	Ü
		Staff (12)								L	R
EXTERIOR SITE WO	RK	YES NO N/A	PIPE				10015				
			1				100 LF	<u> </u>	-		
									H	1 +	
Name of B											T
Name of Registered NORTHSTAR CONT			NJDEP Waste			Registered					
MORTHOTAR CONT	WOLLING G	INCOP, INC	Hauler ID No. 30534	Yards of Waste	FAIRLESS	LANDFILL					
City, State			00004	Disposal	City. State						
EAST HANOVER, N.				Date	MORRISV						
Completed by 12 **			1=nor								
Completed by (Print	or type)		Title			Signature	11			Date	
Steve Stiles			Project Manage	er		XXCi	ins (10		02/	11/19
ASD 44			The state of the s	-		Acres -	7 0			03/	11/19