STATE OF NEW JERSEY
NOTIFICATION OF ASBESTOS ABATEMENT
(PURSUANT TO NJAC 8:60-7 AND 12:120-7

Date of Noțification (1),					wner / Oper	rator (2)	1.13		H W/	P 1	m
$\frac{03}{2} / \frac{12}{2} / \frac{12}{2}$	15			First Ener					-		4 10	
Agencies Notified	Type of N	otification		Street Ac 76 South								
EPA	Type of N	otification Initial			te, Zip Code					5		
DEP		Amended			nio 44308	e			eren eren			-
☑ DOH		Amendment		Name of				Telepho	ne Numb	er		-
☑ DOL			- v/ justification	Jim Hals				Troiping	io ivaiii			
		Cancellation							1102	SHE.		
			F	ACILITY IN	NFORMATI	NC						
Name of Engility When	. A b = 4 =	antin Tables	DI (2)		IT (F							
Name of Facility Wher	e Abaten	ient is Taking	Place (3)		Type of F	acility (4)						
						School (K	-12)			8		
Street Address					1 7	STATE OF THE PARTY OF THE PARTY.	er 8 (Other	than K-1	2)			
820 ARNOLD AVENUE	& LINCO	LN AVE					, private &					
21. (2)			-			bldgs., ho	CONTRACTOR DESCRIPTION OF THE PARTY OF THE P					
	County (6))	County Code	(7)	Square F	eet	# Of Floor	rs	Buildin	g Age		
POINT PLEASANT	DCEAN				Current	lse (Prior if	baina dam	aliahad\	+			
					Telephone		being den	iolisnea)				
Name of Monitoring Fi	irm Hired	by Blda, Owr	ier (8)	ASCM NO		71 016						
		, ,			1							
Environmental Health Ir	rvestigatio	ns			NORTHS	TAR CONTR	RACTING G	ROUP. IN	IC.			
Street Address					Street Ad	dress						
655 West Shore Trail						- DI						
City, State, Zip Code Sparta, NJ 07871						s Parkway						
Project Mngr. For Mon	itorina Fi	rm	Telephone Nu	mhor	City, State	e, Zip Code						
Dino Nappi	intorning i		212-682-9271	ilibei	Fast Hand	ver, NJ 070	36					
Sheduled Start Date (1	10)	Sched. Comp	letetion Date (1	1)		e Number		License	Number			
03_ //25_ /	15	_3	/	15_								
// /		/	/		973-884-8682 00860							
Occupancy Status Dur						OSHA Monit			-			
Facility Clos	sed/Vacat	ted During En	tire Period of			AR CONTR	ACTING G	ROUP. IN	C.			
	Performe	d Outside of I	Normal Facility		Street Ad	aress						
		Friday 8:00 a			32 William	s Parkway						
						e, Zip Code						
						ver, NJ 070	36					
Scope of Work (Check	All That	Apply)										
☐ Demolition			D		F. II O 4							
		√	Renovation	\exists	Mini - End	inment with	n Negative	Pressure	f			
□ ≥160 sf or ≥				H		Procedure						
	149038690.041			V	2000 December 1988	pted (*) and	d Non-Fria	ble Proce	dure			
Location of		ls .		Descript				Abateme	nt Type	71.02	* 088	
Asbestos Contair	ning	Location Normally	As	Material	ontaining	- 1	A	R	_	E	E	
TO BE ABATE	_D	Used	(1.4	e., therma			Amount (Specify	M	R	N C	N C	
in Facility	-	Solely			facing, VA	r.	SF or LF)	6333	P	A	L	
(13)		by Main-			ellaneous)	' I	o. o. <u>.</u> .,	v	A	P	ō	
		tenance/			-0-00 0000 000		90	Α	1	S	s	
		Custodial				- 1		L	R	U	U	
		Staff (12) YES NO N/A								L	R	
Exterior Telephone Pole		TES NO N/A	Transite Condui	it			30 LF			+		7
Exterior releptione role			Transite Condu	IC.			30 LF	V		+	++]
										+ +		1
						-				1 7	1 -	1
Name of Registered Wa	aste Haul	er	NJDEP Waste		Name of R	egistered L	andfill.					_
NEWARK CARTING				Yards	I.E.S.I.							
City, State				of Waste Disposal	City. State							
NEWARK, NJ				Disposal		EM, PA 1810	05					
				C13.5		.,	55					
Completed by (Print or	Type)		Title			Signature	(, 5		Date		\neg
Steven Stiles			Project Manage	r		Sti	us \	1,1.			3/12/15	

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No	Til	E; Ch	17:0	NY

Date of Notification (1)				me of B	uilding Owne	r/Operat	or (2)		2177		-		
Agencies Notified Type Notifi	cation		Str	eet Add	ress ADLEY RO	AD							
□ EPA			Cit	y, State	, Zip Code PLAINFIE		07080		00-2-7 10-2	- - (3) - (3)	150.14	2.	
≥ DOH justifi	gency (included cation) ellation	ding	Na	me of C					Telephone Nu	mber			
DCA Cano	Cilation			FACILI	TY INFORMA	NOITA							
Name of Facility Where Abatement in PSE&G M - 1339 Street Address	(Loc	ATI			52)	44		ther (i.e. pri		2) ial buildir	ngs, h	omes	5,
City (5) FA; RLAW		ihe		051	<i>a</i> ,	7 1	Square N/A		# of Floors N/A	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	g. Ag	е	
County (6) BERGEN	10		Co (S	ounty Co	ode (7) SE ONLY)		Curren N/A	t Use (Prior	if being demolis	shed)			
Name of Monitoring Firm Hired by E ENVIRONMENTAL TACTIC	Building Owner	er (8)	12	ASCM 0045	No.	Na: Ul	me of Abate	ement Contr YSTEMS	actor (9) OF AMERIC	;A			
Street Address 64 BROAD STREET							eet Address 6 WHITE	S EHEAD A'	VE.				
City, State, Zip Code MATAWAN, NJ 07747						Cit	y, State, Zip OUTH RI	Code VER, NJ	08882				
Project Manager for Monitoring Firm TOM GEIGER	n			elephon 32-29	e No. 2-2217	100000000000000000000000000000000000000	lephone No 32-432-83		License 01111				
Start Date (10) 3/23/15		neduled /31/20		oletion D	Date (11)	Na U	me of OSH NIQUE S	A Monitor YSTEMS	OF AMERIC	CA			
Occupancy Status During Abateme							reet Addres 96 WHITE	s EHEAD A	VE.				
Facility Closed/Vacated During Abatement Performed Outside Other – Describe: outdoors	g Entire Perion of Normal F	acility H	ours	ent			ty, State, Zi	o Code VER, NJ	08882				
Scope of Work (Check All That App	oly)		24 111-7									8	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			novati molitic				Min	i-Enclosure vebag Proc				9	
							No.	I-Exempled	() and recht in			ment	
Location of Asbestos-Containing Material (TO BE ABATED In Facility (13)	ACM)	No Used Main Custo	tenan	/ y by ce/	(i.e. the	Containi ermal sys surfacing	ption of ing Material stems insula g, VAT, or cellaneous)	(ACM)	Amount (Specify SF or LF)	Removal	Repair	e Encapsulate	Enclosure
OUTSIDE		Yes	X	INA	ACM	I PIPE	SOMAST	TIC	200 LF	X			
001002													
												1	
								l Name of	Registered Land	dfill			
Name of Registered Waste Haule WASTE MANAGEMENT	ſ		Н	JDEP V auler ID 125	No.	Cubic Ya of Waste APPX.		GROW	'S NORTH				-
City, State ELIZABETH, NJ						Disposal TBD	2	City, Stat	ISVILLE, PA				
Completed by CAROL RAIMO		Title OFFI	CE N	igr.		Sign	nature	al X	aima	Date 3	12	//	5

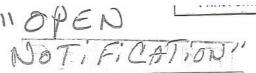
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te of Notification (1)		Name PSE		ding Owner/Ope	erator (Z) 			- 1		-		1
encies Notified Type Notification		Stree 400	t Addres	ss LEY ROAD								- 1	
EPA DEP DOI Amended Amendment #		City,	State, Z	ip Code LAINFIELD,	NJ 0	7080	:0					-37	
Emergency (inclusion)	iding	Nam	e of Cor	ntact				Telepho	one Number		2555		
DCA Cancellation				INFORMATIC	N								-
	CAT	ion	J	51)		Subcl	ol (K-12)	Other thate & co	nan K-12) ommercial b	uilding	s, hor	nes,	
11000	M:LE	Pos	sT_	2.5		Square Fe	et	# of Flo	8.50		Age		
FAIR LAWN ounty (6)		Cou	inty Cod	le (7)					demolished)			
BERGEN Tame of Monitoring Firm Hired by Building Ow	ner (8)	·	SCM N		Name	of Abateme	ent Contra	actor (9) OF AN	MERICA				
ENVIRONMENTAL TACTICS		0	045		Stree	t Address WHITEH							
64 BROAD STREET City, State, Zip Code					City.	State, Zip C UTH RIVE	ode						
MATAWAN, NJ 07747 Project Manager for Monitoring Firm		Tel	lephone	No.	Tele	phone No. 2-432-835		TI	icense No. 01111				
TOM GEIGER	Scheduled	Compl			Nom	ne of OSHA I	Monitor	OF A	MERICA				
3/23/15 Occupancy Status During Abatement (Check	0nly One				Stre	et Address 3 WHITEH							
Facility Closed/Vacated During Entire Per Abatement Performed Outside of Normal Other – Describe: outdoors	eriod of Ab	atemer	nt		City	, State, Zip (OUTH RIV	Code		2				
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enovatio emolitio				Mini-F	Enclosure	odura	Negative P				
	1					LI NOTE				,	Abate	ment	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Mai	Locatio lormally d Solely intenan odial Si (12)	y by cel	Asbestos Co (i.e. thern	nal syst	tion of ng Material (a tems insulati , VAT, or ellaneous)	ACM)	(8	mount Specify F or LF)	Removal	Repair	Encapsulate	1
	Yes	No	N/A	A CM I	DIDE (SOMASTI	IC	2	00 LF	X			
OUTSIDE		X		ACIVI	-IFE	JOIVIAGIT							
	-	-											1
	1	-	-										
Name of Registered Waste Hauler		I N	JDEP V Jauler II	No. of	ibic Ya Waste	10.000	Name of GROV		tered Landfi	N.			
WASTE MANAGEMENT			125	AF	PPX.		City, Sta	ate					
City, State ELIZABETH, NJ	Title				3D	nature	-	1		Date &	3/	./	
Completed by CAROL RAIMO		FICE	MGR.		,	LAR.	al I	al	me	_/	12	11	1

NOTIFICATION"

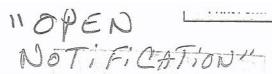
Date of Notification (1)		Nam PS		lding Owner/Op	erator ((2)							
Agencies Notified Type Notification		Stre	et Addre	ess DLEY ROAD	1								
EPA Initial Amended Amendment #		City	State, 2	Zip Code PLAINFIELD		7080							
Emergency (included justification)	ding	Nan	ne of Co	ntact				Telep	hone Numbe	ar .			
		100000000		Y INFORMATIO	NC	Type of F	acility (4)					_	-
Street Address	OCH			150)		School Sub-	ool (K-12) chapter 8 (er (i.e. priv	(Other ate &	than K-12) commercial l	ouildin	gs, ho	mes,	
ROUTE 208-1	1.16	. r	151	1.13		Square F		# of F	Floors	100	g. Age /A		
County (6)	<u>J</u>	Co (ST	unty Co	de (7)			Jse (Prior		g demolished	d)	,		
Name of Monitoring Firm Hired by Building Own ENVIRONMENTAL TACTICS	er (8)	1.	ASCM N	lo.	Name	of Abatem QUE SYS	nent Contra	actor (OF A	9) MERICA				
Street Address 64 BROAD STREET					Stree 396	t Address WHITEH	HEAD AV	/Ε.					
City, State, Zip Code MATAWAN, NJ 07747					City,	State, Zip (JTH RIV	Code ER, NJ (0888					
Project Manager for Monitoring Firm TOM GEIGER			lephone		732	ohone No. -432-835			License No.				
Start Date (10) / Sc	heduled 2/31/20		letion Da	ate (11)	UNI		Monitor STEMS	OF A	AMERICA				
Occupancy Status During Abatement (Check O			W			et Address WHITE	HEAD A	VE.					
Facility Closed/Vacated During Entire Peri Abatement Performed Outside of Normal Other – Describe: outdoors	od of Ab Facility h	ateme lours	nt			State, Zip UTH RIV		0888	32				
Scope of Work (Check All That Apply)							Contoinme	nt with	n Negative P	ressur	e		
≥3 sf or ≥3 if≥160 sf or ≥260 if	Samuel Control	novati emolitic				Mini-	Enclosure	edure				:	
						14011	<u> </u>	() = -			Abate Ty	ment	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Usec Mair	Location ormally a Solely ontenan odial Solely (12)	y by ce/	Asbestos Co (i.e. therm	nal syste facing,	ion of g Material (ems insulat VAT, or llaneous)	ACM) ion,	(Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A	10115	NDE C	TOMACT	IC		200 LF	x			
OUTSIDE		X		ACM F	IPE S	OMAST			200 21	+			
								-					
Name of Registered Waste Hauler WASTE MANAGEMENT		H	I IJDEP W lauler ID 125	No. of	bic Yard Waste PPX. 1		Name of GROW		stered Landfil	I			
City, State ELIZABETH, NJ			120		sposal D		City, Sta MORR	te USVII	LLE, PA				
Completed by CAROL RAIMO	Title OFF	ICE N	/IGR.		Signa	ature JA	al X	Das	. D	ate 6	12	//	15

CK #6128



C10 110.00		(i dioc	201112 20 1			: 						
Date of Notification (1)		PS	SEG	ilding Owner	r/Operator	(2)		10.2 11.3			1 1	
Agencies Notified Type Notification			eet Addr	ess DLEY RO	AD						3,41	
□ EPA □ Initial □ Amended □ Amendment #_		City	. State.	Zip Code PLAINFIE		7080						
Emergency (in justification)	cluding	Nai	me of Co	ontact			1	Telephone Numb	er			
DCA Cancellation		100		Y INFORMA	TION	1.5						
Name of Facility Where Abatement is Taking PSE&G ~ M-1339 (4) Street Address	LOCA	17,	ON	47,48		Sch Sub Sub	er (i.e. priva	Other than K-12) te & commercial	buildin	gs, ho	omes,	
Street Address 20 TH STREET City (5)	* ER	16	=	RR		Square I	Feet	# of Floors N/A		g. Age	•	
County (6)			ounty Co			Current		being demolishe	1			
BERGEN			ASCM N	E ONLY)	Name	N/A e of Abater	ment Contrac	ctor (9)				\neg
Name of Monitoring Firm Hired by Building O ENVIRONMENTAL TACTICS	Wilei (o)	9.00	0045		UNI	IQUE SY	STEMS C	OF AMERICA				-
Street Address 64 BROAD STREET					396		HEAD AV	E				
City, State, Zip Code MATAWAN, NJ 07747					City, SO	State, Zip UTH RIV	Code /ER, NJ 0	8882				
Project Manager for Monitoring Firm		Te	elephone	e No. 2-2217		phone No. 2-432-83		License No 01111				
TOM GEIGER Start Date (10)	Scheduled	Comp			Nam	Name of OSHA Monitor UNIQUE SYSTEMS OF AMERICA						
3/23//S Occupancy Status During Abatement (Check					Stre	et Address						
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm	Period of Ab	ateme	ent		City	, State, Zip						
Other – Describe: outdoors					100	70 111 14	,					
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enovati emolitio				Mini	-Enclosure	t with Negative P dure *) and Non-Friab				
						NON	-Exempled () and Non-i nac			ment	
		Locatio			Descript	tion of				Ту	pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mai	d Solel ntenar odial S (12)	nce/	(i.e. the	Containin	ig Material ems insula VAT, or	(ACM) tion,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A			ONACT	10	200 LF	X			
OUTSIDE		X		ACN	A PIPE S	SOMAST	10	200 Li	122			
Name of Registered Waste Hauler		F	NJDEP V Hauler ID	No.	Cubic Yar of Waste			Registered Landf	ut a			
WASTE MANAGEMENT		1	125		APPX. 1 Disposal [City, State	9		135/1/2		
City, State ELIZABETH, NJ					TBD	ature	MORRI	SVILLE, PA	Date 6	7		
Completed by CAROL RAIMO Title OFFICE MGR.						Zar.	al L		7	12	//	5

CX# 6129



Date of Notification (1) Name of Building Owner/Operator (2) PSEG															
	Notification		100	Street A	ddress	/ POAI				1					
DEP DOL	Initial Amended Amendment #		-	City, Sta	ite, Zip Co	ode		07080					3 %		
DOH DCA	Emergency (i justification) Cancellation	ncluding	100		F Contact KILLIAI	N			Tel	ephone Nu	mber				
Name of Facility Where Abates	ment is Taking	Place (3	3)		LITY INFO		-	Type of Facility	(4)						
PSE&G M-133	39 - CL	Loc	AT.	on	45	744	6)	School (K-12) Subchapter 8 (Other than K-12)							
0.	TORLO	T	AI	15				Other (i.e.	private	& commerci	al buil	dings,	hom	es,	
City (5) 1	AWA							Square Feet N/A	# o	f Floors 'A	Bldg. Age N/A				
County (6) BERGEN	1100				Code (7) USE ONLY)	_	Current Use (P	rior if be	ing demolisi	ned)				
Name of Monitoring Firm Hired ENVIRONMENTAL TAC		wner (8)		ASCN 0045				of Abatement Co QUE SYSTEM			4				
Street Address 64 BROAD STREET								Address WHITEHEAD	AVE.						
City, State, Zip Code MATAWAN, NJ 07747	City, State, Zip Code						E0000000000000000000000000000000000000	City, State, Zip Code SOUTH RIVER, NJ 08882							
Project Manager for Monitoring TOM GEIGER	Project Manager for Monitoring Firm						(0) (0) (0) (0) (0) (1) (1)	elephone No. License No. 732-432-8350 01111							
Start Date (10) 3/23/15		Schedule 12/31/2		pletion	Date (11)			of OSHA Monito		AMERICA	Ą				
Occupancy Status During Aba		2000 CO 100 2 0-10 CO 10	1150%					Address WHITEHEAD	AVE						
Facility Closed/Vacated D Abatement Performed Ou Other – Describe: outdoor	itside of Norma						City, S	State, Zip Code		22				-	
Scope of Work (Check All That			-07	112/17			300	JTH RIVER, N	J 0000	02			2		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		=	Renovat Demoliti				2	Full Containn Mini-Enclosu Glovebag Pro Non-Exempte	re ocedure				۵		
		ls	Location	on				2 Non Example	1	o Holl I Haz		Abate	ement	t	
Location of Asbestos-Containing Mater	rial (ACM)	The second second	Normall d Solel		Achor		scription	of Material (ACM)	_	mount		1 9	pe	Г	
TO BE ABATED In Facility (13)			intenar todial S (12)			thermal surfa		s insulation, AT, or	(5	Specify F or LF)	Removal	Repair	Encapsulate	Enclosure	
		Yes	No	N/A									Ü.		
OUTSIDE	X		A	CM PIF	PE SO	MASTIC	2	00 LF	X						
							-		-						
											-				
Name of Registered Waste Ha	uler		1 1 1 1 1 1 1 1	JDEP W		140000000000000000000000000000000000000	Yards	Name o	f Registe	ered Landfill					
WASTE MANAGEMENT			100000	auler ID 125	NO.	of Wa	<. 15	GROV		RTH					
City, State ELIZABETH, NJ				23-17		TBD	sal Date	MORF		E, PA					
Completed by CAROL RAIMO Title OFFICE MGR. Signature . Date							teg	12	//.	5					



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N	107	T;	F;	CATION

Date of Notification (1)		Name o	of Building	Owner/0	Operator	(2)	Ė	Appropriate to the second second							
Agencies Notified Type Notification EPA Initial		Street A	Address HADLE	Y ROA	D					-					
DEP Amended Amendment			ate, Zip Co "H PLAII		D, NJ 0	7080		11.000							
□ Emergency □ justification) □ DCA □ Cancellation			of Contact				T Te	lenhone Nii	mher			1			
Name of Facility Where Abatement is Takin	g Place (3)	FAC	ILITY INF	ORMATI	ION	Type of Facility (4)									
PSE&G - M - 1339 (Street Address 3 - 35 BAN	LOCA			44)	School (I	K-12) ter 8 (Oth	-12) er 8 (Other than K-12) private & commercial buildings, homes,							
City (5)	*	. AC	<u> </u>			etc.) Square Feet # of Floors					Bldg. Age				
County (6) BERGEN	N		Code (7)	7		Current Use (I			hed)	N/A					
Name of Monitoring Firm Hired by Building ENVIRONMENTAL TACTICS										4					
Street Address 64 BROAD STREET	Street Address 396 WHITEHEAD AVE.									<i></i>					
City, State, Zip Code MATAWAN, NJ 07747	City, State, Zip Code SOUTH RIVER, NJ 08882														
Project Manager for Monitoring Firm TOM GEIGER		Telepho 732-29	ne No. 92-2217		1800 994 900	none No. 432-8350	License No. 01111								
Start Date (10) 3/23/15	Scheduled C 12/31/201		Date (11)			of OSHA Monit QUE SYSTE		AMERIC	A						
Occupancy Status During Abatement (Chec Facility Closed/Vacated During Entire I	- B	Street Address 396 WHITEHEAD AVE.													
Abatement Performed Outside of Norm Other – Describe: outdoors	nal Facility Hou	irs		_		tate, Zip Code TH RIVER, I	NJ 0888	32							
Scope of Work (Check All That Apply)		22			F										
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	X Renor				×	Mini-Enclos Glovebag P	ure rocedure		ative Pressure						
	Is Loca					1 Non-Exemp	teo () an	u Non-Friat	DIE Pro	Abate	ement	t			
Location of Asbestos-Containing Material (ACM)	Norm Used So Mainten	lely by	Asbes		scription aining N	of laterial (ACM)	A	mount	-	13	rpe m	П			
TO BE ABATED In Facility (13)	Custodia (12	Staff?	(i.e.	surfac	systems cing, VA niscellan			Specify For LF)	Remova	Repair	Encapsulate	Enclosure			
OUTSIDE	Yes No		0.0	DIA DID							ite	е			
OUTSIDE	X	X ACM PIPE SOMASTIC 200 LF							X						
								-							
N							-								
Name of Registered Waste Hauler WASTE MANAGEMENT		NJDEP W Hauler ID 1125		of Was	ste		of Registe NS NO	red Landfill RTH							
City, State ELIZABETH, NJ				Dispos TBD	sal Date	City, St MORI	ate RISVILL	E, PA		Seatt					
CAROL RAIMO Title OFFICE MGR. Signature Anal Jarma Date 9/13/15							5								

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MOT	Fil	PATTIC	DID"

Date of Notification (1)		Name PSE0		Owner/Operat	or (2)		* 1 ° ° ° ° ° ° ° ° ° ° ° ° ° ° ° ° ° °			100	11	
Agencies Notified Type Notification EPA Initial			Address HADLEY	ROAD	-4	0	N4-, .				20	
DEP Amended DOL Amendmen			tate, Zip Co TH PLAIN	^{de} IFIELD, NJ	07080	7.0	Die					
DOH justification Cancellation	1		of Contact NKILLIAN	J	-	Te	lephone Nu	imber		* 1 (0).14.00		
Name of Facility Where Abatement is Takin		88 (32.85)	ILITY INFO	RMATION	Type of Facil	ty (4)						
Street Address 1-05 BAN	CLOC	Λ.	CE	75)	School (K-12) Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, the						nes	
City (5) FAIRLAWN	~	THA	CE		etc.) Square Feet	etc.)			Bldg. Age			
County (6) BERGEN			Code (7) USE ONLY)		N/A N/A N/A Current Use (Prior if being demolished) N/A							
Name of Monitoring Firm Hired by Building ENVIRONMENTAL TACTICS	Owner (8)	004	M No. 5			Abatement Contractor (9) JE SYSTEMS OF AMERICA						
Street Address 64 BROAD STREET				396	et Address WHITEHEA	D AVE.						
City, State, Zip Code MATAWAN, NJ 07747				SO	City, State, Zip Code SOUTH RIVER, NJ 08882							
Project Manager for Monitoring Firm TOM GEIGER		100000000000000000000000000000000000000	92-2217	732	elephone No. License No. 01111							
Start Date (10) 3/23/15	Scheduled 0 12/31/201		Date (11)		e of OSHA Monit QUE SYSTE		AMERICA	4				
Occupancy Status During Abatement (Chec	Period of Abat											
Abatement Performed Outside of Norm Other – Describe: outdoors	nal Facility Ho	Hours City, State, Zip Code SOUTH RIVER, NJ 08882										
Scope of Work (Check All That Apply) ≥3 sf or ≥3 if ≥160 sf or ≥260 if		ovation olition		Town States	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure							
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Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used So Mainter Custodia (1:	nance/ al Staff? 2)	(i.e. ti	Description Descri	Material (ACM) ns insulation, AT, or	(8	mount specify or LF)	Removal	Repair	Encapsulate	Enclosure	
OUTSIDE	X	*** ()	ACI	M PIPE SO	MASTIC	20	00 LF	X		w		
Name of Registered Waste Hauler		NJDEP W	20,000,000	Cubic Yards	Name o	of Registe	red Landfill					
WASTE MANAGEMENT		Hauler ID 1125		of Waste APPX. 15	GRO	VS NOF						
City, State ELIZABETH, NJ	Disposal Date TBD		ate RISVILL	E, PA								
Completed by CAROL RAIMO	MGR.		Signatur	rel X	n.	Dat (3	12	15	-		

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Date of Notification (4)			Т						N	211	1 2	CH	11	OA
Date of Notification (1)			Name PSE	of Building G	Owner	Operato	r (2)	-		Br. F.			-	
Agencies Notified Type Notificatio	n			Address HADLE	Y ROA	AD.		5.		n'				10-
DEP Amended DOL Amendmen	nt#			tate, Zip Co		D NI	07080							
■ Emergency justification	(includin	g	Name	of Contact		D, 140 (Telephone Number							
				V KILLIA		ION			-					
Name of Facility Where Abatement is Taking PSE&G = M - 133 9 (Street Address	Loc	AT	Tion	s 4	12)			of Facility School (K- Subchapte	12) г 8 (Oth	er than K-	12)			
1-25 BAN7	A	74	AC	.E			- 6	Other (i.e. etc.) re Feet		f Floors		Bldg.		nes,
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BERGEN			(STATE	Code (7) USE ONLY			Current Use (Prior if being demolished) N/A							
Name of Monitoring Firm Hired by Building ENVIRONMENTAL TACTICS	Owner (8)	ASCI 0045	M No. 5		Name	of Abat	ement Co	ntractor S OF	(9) AMERIC	:Δ			
Street Address 64 BROAD STREET						Street	Addres	s		WEIGO				
City, State, Zip Code MATAWAN, NJ 07747						City, S	396 WHITEHEAD AVE. City, State, Zip Code SOUTH RIVER, NJ 08882							
Project Manager for Monitoring Firm TOM GEIGER		Т	Telepho				IH KI		2 License I	No.				
Start Date (10)	Schedu	ed Co		92-2217 Date (11)			432-83	350 A Monitor		01111				
3/23/15	12/31/	2015		()		UNIC	QUE S	YSTEM	SOF	AMERIC	А			
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Other – Describe: outdoors Scope of Work (Check All That Apply)					_			VER, NJ	0888	2				
≥3 sf or ≥3 if ≥160 sf or ≥260 if	_	Renova Demolii				Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure								
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TO BE ABATED In Facility (13)	1.2027939	todial 3 (12)		(i.e. 1	thermal surfac	systems cing, VAT niscelland	insulati Γ, or	ion,	(S	pecify or LF)	Removal	Repair	Encapsulate	Enclosure
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OUTSIDE		X		AC	M PIP	E SOM	IASTI	C	20	0 LF	X			
4														
Name of Registered Waste Hauler		LAI	IDED W											
WASTE MANAGEMENT		Н	JDEP Wauler ID 1 125	No.	Cubic ` of Was APPX	te	1	Name of F						
City, State ELIZABETH, NJ		1.	0			al Date		City, State						
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	OFFICE MGR.							/X/	do	16)	-	13	110	

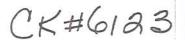


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Date of Notification (1)			ame of	Building Ov	wner/O	perator	(2)			1				
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□ DEP □ Amended □ DOL Amendment #	aludina			e, Zip Code I PLAINF		, NJ 0	16/04/30/20							
□ Emergency (in justification) □ DCA □ Cancellation	cluding	1000		Contact KILLIAN		Telephone Number								
Name of Facility Where Abatement is Taking PSE&G - M - / 33 4 - (LOC	A7	ion		MATIC	NC		of Facility (4 School (K-12 Subchapter Other (i.e. p	2) 8 (Othe	er than K-1	2) ial build	linas.	home	es.
526 N. M.D.				116.			- e	etc.) re Feet		Floors	В	dg. A		
SADDLEBR County (6) BERGEN	00	0	County Code (7) (STATE USE ONLY) Current Use (Prior if being of N/A						10E					
Name of Monitoring Firm Hired by Building On ENVIRONMENTAL TACTICS	wner (8)		ASCM No. Name of Abatement Co. 0045 UNIQUE SYSTEM								A			
Street Address 64 BROAD STREET				Street Address 396 WHITEHEAD AVE.										
City, State, Zip Code MATAWAN, NJ 07747			City, State, Zip Code SOUTH RIVER, NJ 08882							2				
Project Manager for Monitoring Firm TOM GEIGER		7	4	2-2217		732-	hone No -432-8	350		License N 01111	No.			
3/23/15	12/31/2	015	pletion [Date (11)		UNI	QUE S	HA Monitor SYSTEMS	S OF	AMERIC	A			
Occupancy Status During Abatement (Check							Addres WHIT	ss EHEAD <i>A</i>	AVE.					
Facility Closed/Vacated During Entire Poly Abatement Performed Outside of Norma Other – Describe: outdoors	eriod of A	Hours	ours City, State, Zip Code SOUTH RIVER, NJ 08882											
Scope of Work (Check All That Apply)														
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Name of Registered Waste Hauler WASTE MANAGEMENT	JDEP Wauler ID 125		[2] [1] [1] [2] [1] [1] [2] [1] [2] [2] [2] [2] [2] [2] [2] [2] [2] [2											
City, State ELIZABETH, NJ					TBD			City, Stat	ISVIL			,		
Completed by CAROL RAIMO	Title OFF	ICE M	IGR.		1	Signatu	a Vece	Exal Raims 3/12/15						

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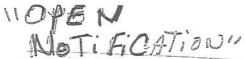
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Agencies Notified Type Not	ification		100	reet Add	iress ADLEY ROA	AD			1,1				
	al ended endment#		Ci	ty, State	, Zip Code PLAINFIEI		7080		1.				
× DOH _ justi	ergency (incluification)	iding .		ame of C	Contact				Telephone Numb	ar			
DCA Can	cellation		J			TION	**						
Name of Facility Where Abatement	is Taking Pla	ace (3)		FACILI	TY INFORMA	NON	Type of	Facility (4	.)				
PSE&G - M - 13 3 9 Street Address		CA	Tio		40)		Sc Su	hool (K-12		buildi	nge h	ome	
	N:DL	AL	00	A	VE.		Square	:.)	# of Floors		ig. Ag		J,
City (5) SADDLE	BR	00	K	2			N/A		N/A	1	I/A	,=	
County (6) BERGEN	101		C	ounty C	ode (7) SE ONLY)		Current N/A	Use (Prio	r if being demolishe	d)			
Name of Monitoring Firm Hired by	Building Own	er (8)	1	ASCM	No.				tractor (9) S OF AMERICA				
ENVIRONMENTAL TACTION Street Address	US			0045		Street	t Address						-
64 BROAD STREET								HEAD A	VE.				
City, State, Zip Code MATAWAN, NJ 07747					×	SOL		/ER, NJ					
Project Manager for Monitoring Fir TOM GEIGER	m			elephon 32-29	e No. 2-2217	732-	hone No. -432-83	50	License No 01111				
Start Date (10) 3/23/15	2000	heduled 2/31/20		pletion D)ate (11)			A Monitor YSTEMS	S OF AMERICA				
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Facility Closed/Vacated Durin	ng Entire Peri	od of Ab	ateme	ent			A PARAGRAPH SPACE	HEAD A	AVE.				
Abatement Performed Outsic X Other – Describe: outdoors	de of Normal I	Facility H	lours			100000000000000000000000000000000000000	State, Zip JTH RI	Code VER, N.	J 08882				
Scope of Work (Check All That Ap	oply)						-						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			novat moliti				Mini	-Enclosure				2	
						-	INOH	-Lxempte	a () and Hon I have		Abate		
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Location of Asbestos-Containing Material	(ACM)	Used	Solel	y by	Asbestos (Description Containing		(ACM)	Amount			m	_
TO BE ABATED	(MOINI)	Main Custo	tenan			mal syster		tion,	(Specify SF or LF)	Ren	Re	ncar	nc
In Facility (13)			(12)		oth	urfacing, V ner miscella	aneous)		Si Oi Li j	Remova	Repair	Encapsulate	Enclosure
(10)		Yes	No	N/A						_		ate	œ.
OUTSIDE			Χ		ACM	PIPE SC	DMAST	IC	200 LF	X			
										-	11		
Name of Registered Waste Haule	ar .		N	JDEP W	/aste C	ubic Yards		Name of	Registered Landfill	_	-		1
WASTE MANAGEMENT			Н	auler ID 125	No. of	Waste PPX. 15		GROW	/S NORTH				
City, State ELIZABETH, NJ					11000000	isposal Da 3D			ISVILLE, PA				
Completed by CAROL RAIMO		Title OFFI	CE N	IGR.		Signate	g Ora-	e K	emo Da	te3	12	/1.	5



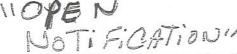
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Date of Notification (1)		Name	of Building Owr	ner/Operato	or (2)	10011		111	11	0 1			
Agencies Notified Type Notification	1	PSE(Address			10							
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DEP Amended Amendmen			tate, Zip Code TH PLAINFII	ELD, NJ	07080								
DOH Emergency justification)	Name	of Contact			Telephone N	lumbar	8					
DCA Cancellatio	n		N KILLIAN SILITY INFORM	MOITA									
Name of Facility Where Abatement is Taki	0.000			(4)									
PSE&G M - /339 Street Address	(LOC	4/101	N 38		School (K-	ool (K-12) chapter 8 (Other than K-12)							
68 ERIE SI	TREET				Other (i.e. private & commercial buildings, homes etc.)								
City (5) SANN/6 A	Roo				Square Feet N/A	# of Floors N/A	T	Bldg. Age					
County (6)	100	County	Code (7)		- 19 SACVE VILLEGA	ior if being demoli	ished)	N/A					
BERGEN Name of Monitoring Firm Hired by Building	Owner (8)		M No.		N/A								
ENVIRONMENTAL TACTICS	Owner (b)	004			Name of Abatement Contractor (9) UNIQUE SYSTEMS OF AMERICA								
Street Address 64 BROAD STREET					Address	A\/E							
City, State, Zip Code					396 WHITEHEAD AVE. City, State, Zip Code								
MATAWAN, NJ 07747 Project Manager for Monitoring Firm		1		SOL	ITH RIVER, N.	J 08882							
TOM GEIGER		732-2	one No. 92-2217		hone No. 432-8350	License 01111							
Start Date (10) 3/23/15	Scheduled 0 12/31/201		Date (11)		of OSHA Monitor QUE SYSTEM		.Δ						
Occupancy Status During Abatement (Chec	ck Only One)			Street	Address								
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr	Period of Abat	ement urs	nent s 396 WHITEHEAD AVE. City, State, Zip Code										
Sther - Describe: outdoors					SOUTH RIVER, NJ 08882								
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf	[V] D			Full Containment with No. 11									
≥160 sf or ≥260 lf		vation olition		Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure									
				×	Glovebag Prod Non-Exempted	cedure d (*) and Non-Fria	ble Pro	cedu	е				
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Asbestos-Containing Material (ACM) TO BE ABATED	Used So Mainter		Asbestos C	Description ontaining N	faterial (ACM)	Amount			m				
In Facility (13)	Custodia (12		su	rfacing, VA er miscellan		(Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure			
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OUTSIDE	X		ACM F	PIPE SON	MASTIC	200 LF	X						
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Name of Registered Waste Hauler		NJDEP W	laste Cut	oic Yards	Dogistore d I 15								
WASTE MANAGEMENT		Hauler ID 1125	No. of V	Vaste PX. 15	New York	Registered Landfil S NORTH	ı						
City, State		20	Disp	oosal Date	City, State)	•			_			
ELIZABETH, NJ Completed by	Title		TBI) Signature		SVILLE, PA							
CAROL RAIMO	OFFICE	MGR.	==	Oignature	3 pol XI	alma) Da	ate 3	19	/,				

CK # 6124



Date of Notification (1)		Name of PSEG	Building Owr	ner/Operator	(2)		2	A1 1	W	- 1				
Agencies Notified Type Notification		Street Ad 4000 H	dress ADLEY R	OAD	9	65	IV.							
EPA Milital Amended Amendment #_			e, Zip Code H PLAINFI	ELD, NJ 0	7080	70								
☐ Emergency (inc ☐ DOH justification) ☐ DCA ☐ Cancellation	cluding	Name of				*	Telepi	none Numb	er					
BCA Called later.		FACIL	ITY INFORI	MOITAN										
Name of Facility Where Abatement is Taking F PSE&G - M - 1339(Lo Street Address	Place (3) DATIO	N.	37)		Sub	ool (K-12 chapter 8 er (i.e. pr	2) B (Other	than K-12) commercial	buildi	ngs, l	nomes	à,		
City (5)	oo K	,	# of F N/A		Bldg. Age N/A									
County (6) BERGEN	701	County C	Code (7) USE ONLY)		Current I	Jse (Prio	r if being	demolishe	d)					
Name of Monitoring Firm Hired by Building Ov ENVIRONMENTAL TACTICS	vner (8)	ASCM 0045			of Abaten QUE SY									
Street Address 64 BROAD STREET				100000000000000000000000000000000000000	t Address WHITEH	HEAD A	VE.							
City, State, Zip Code MATAWAN, NJ 07747			City, State, Zip Code SOUTH RIVER, NJ 08882											
Project Manager for Monitoring Firm TOM GEIGER		Telephor 732-29	ne No. 32-2217	732	hone No. -432-835			License No 01111	•9					
	Scheduled Co 12/31/2015		Date (11)	Fig. 1. (C. C. C	e of OSHA QUE SY		S OF A	MERICA						
Occupancy Status During Abatement (Check	Only One)				t Address WHITE		WE							
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe: outdoors	eriod of Abate I Facility Hou	ement ers		City,	State, Zip	Code								
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Scope of Work (Check All That Apply) ≥3 sf or ≥3 If ≥160 sf or ≥260 If	X Renor			Lean Toward Insent	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure						è			
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		_						1						
	+													
Name of Registered Waste Hauler			EP Waste											
WASTE MANAGEMENT		Hauler ID 1125		of Waste APPX. 15 GROWS NORTH										
City, State ELIZABETH, NJ				Disposal Da TBD Signate		City, Stat MORR								
Completed by CAROL RAIMO	Title OFFICE	2 Kains Date 3/12/15												



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Date of Notification (1)			ne of Bu SEG	ilding Own	enOperato	01 (2)		1					
Agencies Notified Type Notification			eet Addr	ess DLEY RO	DAD				40				
EPA Initial Amended		Cit	v. State.	Zip Code PLAINFIE		07080			p/, 2		į		
DOL Amendment #_ Emergency (incl justification)	uding	Na	me of Co	ontact				Telep	phone Numb	er		1	
DCA Cancellation			DHN KI	Y INFORM	MOITA				Table				
Name of Facility Where Abatement is Taking PI PSE&G M. 1339 - (L	ace (3) -6C A	200		33	1	☐ Sch	Facility (4)		r than K-12)				
0: : 0:11	HEN				Swy	⊠ Oth	ner (i.e. pri .)	vate &	commercia	buildir			
City (5) RINGEFIELD	PA	-	K		,	Square N/A		N/A	Santa and the santa	N	g. Ag /A	=	
County (6) BERGEN			ounty Co	de (7) E ONLY)		N/A			ig demolishe	ed)			
Name of Monitoring Firm Hired by Building Ow ENVIRONMENTAL TACTICS	ner (8)	- 1	ASCM N 0045	No.	Nar UN	me of Abater	ment Contr STEMS	oF /	(9) AMERICA				
Street Address 64 BROAD STREET						eet Address 6 WHITE	HEAD A	VE.					
City, State, Zip Code MATAWAN, NJ 07747						City, State, Zip Code SOUTH RIVER, NJ 08882							
Project Manager for Monitoring Firm		Telephone No. 732-292-2217 732-432-8350							License No. 01111				
Stall Date (10)	Scheduled (Comp			Na	me of OSHA	Monitor STEMS	OF	AMERICA				
Occupancy Status During Abatement (Check		10				eet Address							
Facility Closed/Vacated During Entire Pe		ateme	ent		39	96 WHITE	HEAD A	VE.					
Abatement Performed Outside of Normal Other – Describe: outdoors	l Facility H	ours			/4 1 2000	City, State, Zip Code SOUTH RIVER, NJ 08882							
Scope of Work (Check All That Apply)						_							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		novati				Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure							
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In Facility (13)	Custo	dial S (12)	taπ?			g, VAT, or cellaneous)		S	F or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A							-		LU	
OUTSIDE		X		ACI	M PIPE	SOMAST	IC	2	200 LF	X			
	-									1			
	1		-	,									
Name of Registered Waste Hauler		l N	JDEP W	/aste	Cubic Ya		Name of	Regis	tered Landfi	II			1
WASTE MANAGEMENT			lauler ID 125	No.	of Waste APPX. 15 GROWS NORTH								
City, State ELIZABETH, NJ					Disposal TBD		City, Sta MORR		LE, PA				
Completed by CAROL RAIMO	Title OFFIC	CE N	/IGR.	,	Sign	natuje Mro-	e Ke	l V		ateg	12	/1	5

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Date of Notification (1)			Name of	f Building	Owner/C	perator	(2)	•					* /	5			
Agencies Notified Type Notification		_	Street A							U.S.			7				
EPA Initial				HADLEY	Color Section Color)				Kir 1		1 10	-96				
DEP Amended Amendment		_		ite, Zip Co H PLAII), NJ 0	7080			<u></u>							
DOH justification Cancellation	including	- 1		f Contact KILLIAI	N				Tel	ephone Nur	mber						
				LITY INFO		ON				-			-				
Name of Facility Where Abatement is Taking PSE&G ~ M 1339			7:0N 32) Type of Facility (4) ☐ School (K-12)														
Street Address 1172 EDGEL							×	Subchapter Other (i.e. p etc.)	8 (Otherivate 8	er than K-12 2 commerci	2) al buil	dings	, hom	es,			
RiDGEFIEL		P	A R	K			Square Feet # of Floors Bldg. Age N/A N/A N/A										
County (6) BERGEN				Code (7) USE ONLY)		Curre N/A	nt Use (Prid	or if bei	ng demolisi	ned)						
Name of Monitoring Firm Hired by Building C ENVIRONMENTAL TACTICS	Owner (8)		ASCN 0045					tement Con SYSTEMS			Ą						
Street Address 64 BROAD STREET						Street 396		ss EHEAD A	VE.								
City, State, Zip Code MATAWAN, NJ 07747			City, State, Zip Code SOUTH RIVER, NJ 08882														
Project Manager for Monitoring Firm TOM GEIGER		100	Telepho 732-29	ne No. 92-2217		Teleph 732-4	one No 432-8			License N 01111	0.						
Start Date (10) 3/23/15	Schedule		npletion	Date (11)				HA Monitor	SOF	AMERICA							
Occupancy Status During Abatement (Check	Only On	ie)				Street	Addres	ss									
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe: outdoors						396 WHITEHEAD AVE. City, State, Zip Code											
Scope of Work (Check All That Apply)						SOUTH RIVER, NJ 08882											
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit				Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure											
	le	Locati	on.			L^	1 Noi	n-Exempted	(*) and	Non-Friab	le Pro		e ement				
Location of	N	lormali d Sole	ly			scription					_	Ту	pe				
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mai	intenar todial S (12)	nce/		tos Cont thermal surfac other n		s insula T, or		(8	mount specify or LF)	Removal	Repair	Encapsulate	Enclosure			
	Yes	No	N/A										ē				
OUTSIDE	-	X		A	CM PIP	E SON	MAST	IC	20	00 LF	X						
						=		-			-						
										ř	-						
Name of Registered Waste Hauler		14 (322)	JDEP W		Cubic Yards Name of Registered Landfill												
WASTE MANAGEMENT		100	auler ID 125	No.	of Waste APPX. 15 GROWS NORTH												
City, State ELIZABETH, NJ	1 (10-2000)				TBD	sal Date		City, State		Ė, PA							
Completed by CAROL RAIMO	Title OFFI	Title Signature Date 3/12/							1,								

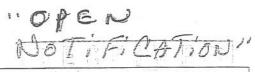
1	1	C	P	6	N				
	1	0	07		Fr	CA	Fi	ON	1

Date of Notification (1)		Name of PSEG	Building Owner	/Operator	(2)								
Agencies Notified Type Notification		Street Ad 4000 H	dress ADLEY ROA	AD	2	WAR TH							
EPA X Initial DEP Amended X DOL Amendment #_		City, State, Zip Code SOUTH PLAINFIELD, NJ 07080											
Emergency (in	cluding	Name of Contact JOHN KILLIAN											
		FACILITY INFORMATION Type of Facility (4)											
Street Address	OCAT:		31)		School (K-1			linas.	home	es.			
295 BERGEN	TURN	PIK	E		etc.)			177.51.0					
City (5) RIDGEFIELD	PAR	.14		3 II	Square Feet N/A	# of Floors N/A		ldg. A N/A	ge				
County (6) BERGEN		County C	Code (7) ISE ONLY)		N/A	or if being demolish	ied)						
Name of Monitoring Firm Hired by Building Ov ENVIRONMENTAL TACTICS	wner (8)	ASCM 0045			of Abatement Cor QUE SYSTEM	ntractor (9) S OF AMERICA	A.						
Street Address 64 BROAD STREET		Street Address 396 WHITEHEAD AVE.											
City, State, Zip Code MATAWAN, NJ 07747		City, State, Zip Code SOUTH RIVER, NJ 08882											
Project Manager for Monitoring Firm TOM GEIGER		Telephor 732-29	ne No. 12-2217	100000000000000000000000000000000000000	Telephone No. License No. 732-432-8350 01111								
	Scheduled Co 12/31/2015		Date (11)		me of OSHA Monitor NIQUE SYSTEMS OF AMERICA								
Occupancy Status During Abatement (Check	Only One)			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	eet Address								
Facility Closed/Vacated During Entire Per Abatement Performed Outside of Normal	eriod of Abate	ment rs			6 WHITEHEAD AVE.								
Other - Describe: outdoors				SOL	OUTH RIVER, NJ 08882								
Scope of Work (Check All That Apply)													
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	× Renov				Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure								
	Ι			L	Non-Exempte	d (*) and Non-Friad	le Pro	Abate					
Location of	Is Loca Norma	ally		Descriptio	n of		Туре						
Asbestos-Containing Material (ACM)	Used Sol Mainten		Asbestos C	ontaining	Material (ACM) ns insulation,	Amount (Specify	70		En	П			
TO BE ABATED In Facility	Custodial (12)		su	rfacing, V	AT, or	SF or LF)	Remova	Repair	Encapsulate	Enclosure			
(13)			othe	er miscella	ineous)	9	val	=	ulate	ure			
OUTOIDE	Yes No	N/A	A CNA I	DIDE SO	MASTIC	200 LF	x						
OUTSIDE	X		ACIVI	PIPE SC	MIASTIC	200 LF	1						
Name of Registered Waste Hauler		NJDEP W		bic Yards	Name of	Registered Landfill	1						
WASTE MANAGEMENT		Hauler ID 1125	AP	Naste PX. 15		/S NORTH							
City, State ELIZABETH, NJ			Dis TB	posal Date D		ISVILLE, PA							
Completed by CAROL RAIMO	Title. OFFICE	MGR.		Signatu	Wal I	arma Da	ate 9	12	1	5			

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OP	EM		
RIA	TIE.	1047	ion"
100	-4-4-4		0000

Date of Notification (1)	15		0.11689	ame of E	Building O	wner/O	perator ((2)							
Agencies Notified	Type Notification	······································		treet Add	dress ADLEY	ROAD)			₩					
DEP DOL	Initial Amended Amendment#				e, Zip Cod I PLAIN		, NJ 07	7080		****					
≥ DOH DCA	Emergency (ir justification) Cancellation	cluding	3 2 2 2 2	Name of Contact JOHN KILLIAN											
<u> </u>				FACIL	ITY INFO	RMATIC	NC			1					
	339 (1	OCAT			30)			Sc Su	Facility (4) chool (K-12 ubchapter 8) (Other than K-12	2)				
64 BE	RGEN 7	uRN	p: .	16				× Ot etc	c.)	vate & commerci				S,	
City (5) RidG	RCEN T EFIEL	0 1	PA	RK				N/A		N/A		ldg. Age N/A			
County (6) BERGEN				Journey O	ode (7) SE ONLY)	-		Current N/A	t Use (Prior	if being demolish	ned)				
Name of Monitoring Firm ENVIRONMENTAL		wner (8)		ASCM No. Name of Abatement Contractor (9) 0045 UNIQUE SYSTEMS OF AMERICA											
Street Address 64 BROAD STREE	ET .			Street Address 396 WHITEHEAD AVE.											
City, State, Zip Code MATAWAN, NJ 07				City, State, Zip Code SOUTH RIVER, NJ 08882											
Project Manager for Mo				Telephor	ne No. 2-2217		Telephone No. License No. 732-432-8350 01111								
Start Date (10) 3/23//		Scheduled		pletion [Date (11)		Name of OSHA Monitor UNIQUE SYSTEMS OF AMERICA								
Occupancy Status Durin	ng Abatement (Check			Street Address											
Facility Closed/Vac	cated During Entire P med Outside of Norm	eriod of Ab	atement 396 WHITEHEAD AVE. City, State, Zip Code												
Other - Describe:	outdoors	arr active r	SOUTH RIVER, NJ 08882												
Scope of Work (Check	All That Apply)	□ p.					Г	7 =	Cantainma	nt with Negative	Draceu	TO.			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			nova moliti					Mini	-Enclosure rebag Proc				0		
		Τ						1 NOTE	-Exempled	() and Non-i ha	Abatement				
Langtin	o of	No	ocational	у		De	escription of				Туре				
Asbestos-Containin TO BE Al In Fac	Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Used Maint Custor					tos Con therma surfa	ntaining Material (ACM) al systems insulation, acing, VAT, or miscellaneous) Amount (Specify SF or LF)					Repair	Encapsulate	Enclosure	
		Yes	No	N/A						20015	-	-			
OUTS	SIDE		Х		AC	SM PII	PE SO	MASTI	IC	200 LF	X				
Name of Registered W	asta Haular		l N	JDEP W	laste	Cubic	Yards	1	Name of F	Registered Landfi	1	1			
WASTE MANAGER			Н	auler ID 125		of Wa				S NORTH					
City, State ELIZABETH, NJ						Dispo TBD	sal Date		City, State	SVILLE, PA					
Completed by CAROL RAIMO		Title OFFIC	CE IV	IGR.			Signatur		el La	I . D	ate 9	12	1.	5	



Date of Notification (1)		Name of Building Owner/Operator (2) PSEG											
Agencies Notified Type Notification		Address HADLEY ROA	D.	Man To 1 2			-						
□ EPA	City, St	ate, Zip Code		5	3 13								
☐ Emergency (ind justification) ☐ DCA ☐ Cancellation	Name (of Contact N KILLIAN		Telephone Number									
BCA Cartestation	FAC	FACILITY INFORMATION											
Name of Facility Where Abatement is Taking F PSE&G M - 13 3 9 - (Street Address	LoCATion	, 29)	Type of Facility School (K-) ıl build	ings,	home	es,					
Street Address 53 BERCEN 7 City (5) City (6)	JAAK		# of Floors N/A	Bldg. Age N/A									
County (6) BERGEN	County	N/A N/A County Code (7) Current Use (Prior if being demolished) (STATE USE ONLY) N/A											
Name of Monitoring Firm Hired by Building Ov ENVIRONMENTAL TACTICS	vner (8) ASC 004	ASCM No. Name of Abatement Contractor (9) 0045 UNIQUE SYSTEMS OF AMERICA											
Street Address 64 BROAD STREET		Street Address 396 WHITEHEAD AVE.											
City, State, Zip Code MATAWAN, NJ 07747		City, State, Zip Code SOUTH RIVER, NJ 08882											
Project Manager for Monitoring Firm TOM GEIGER		none No. 292-2217	Telephone No. License No. 01111										
	Scheduled Completion	n Date (11)	Name of OSHA Monitor UNIQUE SYSTEMS OF AMERICA										
Occupancy Status During Abatement (Check	Only One)	Street Address											
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe: outdoors	eriod of Abatement I Facility Hours	atement ours 396 WHITEHEAD AVE. City, State, Zip Code SOUTH RIVER, NJ 08882											
Scope of Work (Check All That Apply)			0001111111211,1										
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 	RenovationDemolition		Mini-Enclosi Glovebag P	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure									
	Is Location				1	Abate	ement	ŧ					
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A	Asbestos Co (i.e. therm suri other	escription of ntaining Material (ACM) al systems insulation, facing, VAT, or miscellaneous)	Amount (Specify SF or LF)	Removal	Repair	e Encapsulate	Enclosure					
OUTSIDE	X	ACM P	IPE SOMASTIC	200 LF	X								
Name of Registered Waste Hauler			lasta	of Registered Landfil	1	Contract of the							
WASTE MANAGEMENT	Hauler 1125	APF	PX. 15 GRO	WS NORTH									
City, State ELIZABETH, NJ		TBL		RISVILLE, PA	-1-		11						
Completed by CAROL RAIMO	Title OFFICE MGR.		Signature / Signat	(arma)	ate 9	12	//	5					

CK 16377

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

CHECK # 16377

Date of Notification	(1)		TI.	Name	e of E	Building	Owner / Opera	tor (2)		40.0		Ü				
3-12-15						Environmental Liability Transfer										
Agencies Notified	Type Notifi	cation	3	Stree	t Add	dress										
⊠ EPA			s Rd., Suite 3	06	4	ACCEPTED TO										
☐ DEP ☐ DOL	X Initia	Part of the second	Code		4131111111111											
☑ DOH	The second second	ended					63131				1					
DON		ergency cellation				Contact					Teleph	one	Numl	ber		
	_ Can	Cenation	F			etz, E										
Name of Facility Wi	here Abatem	nent is Taking Di-	200 (3	rA	CILI	I Y IN	FORMATION	:::				T-007				
Garage #10, Buil	dina #12. I	Perth Amboy 1	160	" LLC			Type of Fac									
Street Address	J , -		100,				Subchapter 8 (Other than K-12)									
1160 State Street	t				Other (i.e. private & commercial buildings, hon											
							Square Fee		Floors		Bldg. Ag		eic.)			
City (5)	City (5) County				Code	(7)	NA			NA						
Perth Amboy		Middlesex	NA					Prior if being	NA na demol		NA					
•							None	y (i iioi ii boii	ig acilioi	isried)						
Name of Monitoring	Firm Hired	by Building Own	er (8)		AS	CM No		atement Cor	atractor (3)						
			(-)					Network F	Resoluti	ons Con	tractin	a I	10			
Street Address							Street Addre	ess	1000141	0110 0011	LIGOLIII	y, L				
011 01 1 1 1							874 Piney	Hollow Ro	ad, PO	Box 70						
City, State & Zip Co	de						City, State 8	Zip Code	La recorde							
Project Manager for	Monitorina	~:	T	h seed a seed	Winslow, New Jersey 08095											
roject wanager for	wormorning i	-11111	Telepl	none	Num	iber		Telephone Number License Number								
Scheduled Start Dat	e (10)	Scheduled Com	plotio	n Dot	0 /1	1)		609-567-0600								
3-23-15	.0 (10)	4-3-15	pielioi	II Dat	e (1	1)		EMSL Analytical								
Occupancy Status D	ouring Abate		v one)	_			Street Address								
	ed/Vacated	During Entire Pe	riod o	f Aba	teme	ent	107 Haddo									
Abatement F	Performed O	utside of Norma	Hou	rs - 7	am t	to 3pm		City, State & Zip Code								
Describe:					Westmont, NJ 08108											
Facility Occu	pied During	Abatement														
Scope of Work (Che	ck all that a	oply)					•	r								
≥3 sf or ≥3 If				-				Full Containment with Negative Pressure								
20 st of ≥3 ft				Ren				Mini-Enclosure Glove Bag Procedures								
	, II		\boxtimes	Dem	OIIIIO	n							100			
Lo	cation of		ls I	ocatio	n	Т-	Descriptio	n of		d and Nor Amount						
Asbesto	os-Containin	g	Norm	ally U	sed			Asbestos-Containing Material (ACM)			Abatement Type					
	rial (ACM)			lely by							_		Ш	m		
	E ABATED Facility		tenance or odial Staff? . ((i.e., thermal s	i.e., thermal systems			Removal	Re	ncal	ncl			
11.1	(13)		((12)	M11440000		insulation, surfa or other miscel	cing, VAT				Repair	Encapsulate	Enclsoure		
			Yes	No	N/A		or other miscer	ianeous)			=		ate	Ге		
Roof – Garage #1					\boxtimes	Roof	ing material		1,000	s.f.		П				
Roof – Building #	12				X		Flashing		500 s			H	H	H		
										ed hij		H	H	뉘		
												Ħ	H	H		
												Ħ	Ħ	Ħ		
											TH	Ħ	Ħ	計		
Name of Registered	Waste Haule	er					Cubic Yards	Name of R	egistered	Landfill				_		
Bull Waste & Recycling, Inc.						No.	of Waste	f Waste								
City, State	reinig, inc.			214	35		20	Salem Co	unty La	ndfill						
Berlin, NJ							Disposal Date		City, State							
	T\			1			4-15-15	Alloway, I	New Jer	Jersey						
Completed By (Print of heodore S. Budz	vneki			Title		-4	Signature	3		0.00	Date		G.			
	yiiski			Pres	side	ΠT					3-12-1	15				
										_						