

#### STATE OF NEW JERSEY

#### NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to N.J.A.C. 8:60 AND 12:120)

Sate of Notification (1)					Name of Building			. ***		-0	0.	- 4
Date of Notification (1)	3/15/20	013			Bridgewater-I	Raritan So	chool Distr	ict _	i'yyZ	7	17	<del>}</del>
Anneign Notified		Notification Ty	pe	,	Street Address	f			140)	dj.Ca	,	60
	1.	_			836 Newman	s Lane				17.2/	11×2	
	F		#	2000	City, State, Zip C	ode	0.5	- 4		*{	, 4	( = 1
∑ DOF	-			,	Bridgewater,	NJ 08807	7				- 132	
□ DOH	IL	justification	n)	e .	Name of Contac	t	1	Tel Num	-		V.	2
X DCA		Cancellati	on		Mr. Raymond	Ruth		-				
	es Notified PA   Notification Type				ORMATION Type of Facility	(4)						
	e Suit	301										
						r 8 (Other th						
	h. /6\		County Co.	de (7)			ommercial bu	uildings,				
0.13 (0)	Notification Type					C.)						
Dilugewater		Yupor (0)	ASCM No.		Name of Contra	ctor (9)						
	Cies Notified  EPA  DEP  DOL  DOH  DCA  Temperation  Temp				MTM Metro		n -					
					Street Address							
The state of the s					135-137 McE	Bride Ave						
					City State, ZipC	ode						
					Paterson, N.	7 (100 pp. 100						
		Talanhana N	umber		Telephone Nun			License	Numbe	er		
	EDER Notified  EPA  DEP  DOL  DOH  DCA  DEP  DOL  DCA  DCA  DEP  DOL  DCA  DCA  DCA  DCA  DCA  DCA  DCA  DC					30		00809				
		-		Date (11)	Name of OSHA							
			ompletion	bate (11)	MTM Metro		on					
			1		Street Address							
Occupancy Status During Abate	ment (C	neck only one	<u>)</u>		135-137 Mc		- 92					
=	uring Enf	tire Period of A	Abatement		City, State, Zip							
					Oity, Citato, — p							
Abatement Performed Out	side of N	Normal Facility	Hours		Paterson, N	J 07501						
ame of Facility Where Abatement is Taking Place (3) ridgewater-Raritan Middle School reet Address 28 Merriwood Rd  Tridgewater Rame of Monitoring Firm Hired by Bldg. Owner (8) Sorges Associates Troet Address Crosswick Street Sorgest Manager for Monitoring Firm Michael Hoodak Cheduled Start Date (10) 3/27/13 Cocupancy Status During Abatement (Check only one)  X Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other-Describe: Source of Work (Check all that apply) X 3 s f or > 3 lf X Renovation Demolition  Cocation of Asbestos- Containing Material (ACM) in Facility (13) Soller Room X Bre Soller Room X Bre Soller Room X Bre Name of Reg. Waste Hauler MTM Metro Corporation City, State Paterson, NJ 07501												
DOH DCA    justification     Cancellation     Cancellation     Cancellation     Cancellation     Cancellation     Cancellation     Cancellation     Cancellation     Cancellation     Fridgewater     Fridgewater     Fridgewater     Somerset     Somerset     Somerset     Somerset     ASCM No.					I Containment wit	h Negative	Pressure	X Mir	ni-Enclo	sure		
> 3 sf or > 3 lf	×	Renovation		-					vebag l	Procedur	е	
> 160 sf or > 260 lf		Demolition		☐ No	n-Exempted(*) &							
Location of Asbestos-				Description of	ACM (i.e.	Amount (	Specify SF or	·LF)	Abate	ment Typ	<u>je</u>	
Containing Material (ACM) in			stodial	thermal system surfacing, VA	T, or other	Ž.			Rem.	Rep.	Encap	Enclose
Facility (13)			N/A	miscell.)					X	Ticp.	X	T
Boiler Room			-	Breeching Insulation	on	30 SF 6 LF	1 - cas		Ŷ		X	1
Boiler Room	X			, pe i marge					-	-	-	+-
		LAUDEDWA	ete Houler	D#	Cubic Yards o	f Waste		Name	of Reg.	Landfill		
		Control of the contro	sie nauler	<del>        </del>	5			Tullytov	vn			
		20002			<u> </u>		Disp. Date			City, Sta	te	
City, State Paterson, NJ 07501	*						4/1/13			Fullytown	, PA	
		Title	W. Carlotte		Signature			Date				
	Initial   Amended #   Emergency (including justification)   Cancellation   Canc					i Masla	ırkov	3/15/20	013			
Elizabeth Masiarkov		- Dusiness Au	- Indianation						14			Maria.

State of NJ

8 & 6 proj. #: 2013-5	57		(Pursuan	n to NJAC 8	estos Abatem 160-7 and 12:1 E N C Y *****	20-7)	DOLand	O DAY		]	_
Date of Notification (1)			-	er/Operator (2)				R		0	
1	. 1	South C	orahee/Ma	anlewood S	chool District		MAR 1	4 0013	1.0		Ep.
0 3 / 11 4 / 11 13 gender Notified   Type Not		Street Addr				+ -	TAILA	11/	14		7
IT EDA	- 11		ademy St	reet			1 MM VIVI	TUP			
DEP X Ini	tial [	City, State.			- Samuel - S	+ WA	<b>WER AF</b>	PRUV	ED.	C. 8	1
	endment	Mapley	wood, NJ	07040		,			7		
IXI DOH		Name of Co					Telepho	ne Number	4	6	10
	ncellation	Willian	n Kyle				_				- 7
	U		FAC	LITY INFORM	IATION		9	•••			60
same of facility where oboten	nont is taking	place (3)				117	ype of Facility	(4) of (K - 12)			
							Summer!	hopter 8 (C		n K-12)	
Maplewood Middle Sch	KKN (nun s	an 0)					Cotto	(Privato/C	cmmon		
Stract Address						11	Bldg:	# of Floor	itc.	Ыфу.	Aue
7 Burnet Street					County Code (		Squara Foot	w dt uidd)			
Chy (5)	Co	ounty (6)			(State use only	)   [	Current Use (		g dem	dished)	
Maplewood. NJ 07040		\$\$ <del>@</del> X			1		school (not	sub8)			
lame of Mondoring Firm Hire	d by Blag. Ow	vnor (8)		ASCM No.	11	batement Co					
AHERA Consultants				0057	B & G	Restoration	n, Inc.			-	
Street Address						yerson Ros	ad				
PO BOX 385					City, State	-					
TO STATE OF COURS	3231-0385					in Park, N.	07035				
roject Vianager for Wonltoning		TF.	honé Nume	100	Telephone	Numbur		License	Number	36	(C-21)
Eric Clarkson		. 1	(609) 652	-1833		698-6869 OSHA Monitor		.00	1210		
cheduled Start Date (10)	86	ed. Comple	tion Date (1	1)		Restoration					
03/15/2013	0:	3/16/2013			Street Add						
ocupancy Status Duting Aba	tement (Chec	k only one)				yerson Ros	d	-			
Facility cineed/vocated d	furina entiro p	oned of aca	toment		City, State	Zip Code					
Abatement performed or Describs		al facility ho	ure-		Lincol	nPark, NJ (	17035				
Other-Describe: Start	3:30 pm				LINCO	nrain, isa s	77000				
Scope of Work (check all that	apply)		######################################		П с	ment w/nepat	Sia anagering	☐ Glovel	har are	codura	
Demoition	Ronovi						Mit biomeria			rocedun	0
<b>△</b> >3 ≤f or >3 If		or ≥260 if			Mini-encles		i —		TRI	RIE	
Location of	is loca	tion normally	istockaj A riseci gojej		ton of asbestos-co	nfeining.	Amount		e m	B U	1 0
asbactos containing	staff(1			- Descript	(ACM)	neza urg	(Specify	SFOF	0	P C	
abated in facility (13)	Yes	No	NA		83 98 (44.0)				¥	ļ P	1
lassroom 281			X	O&M rem	oval ceiling pla	ester	10 - 15	st	K	니트	믞
									#	<u> </u>	뉴
449-4-1							<b></b>		#	러분	1
		1		-			+		間	in the	市
		IDEP House	r 108 11	uble Yards of	To omen stagW	Registered La	andfill				
ogistared Waste Hauler 3 & G Restoration, Inc.	N.	19563	1	1 yard	T	ullytown R	esource & F	Recovery	Cent	31	
ity. State			Disposal 03	Date 3/18/2013	City, Sta	±e ullytown, P≀	A			- 10	
Lincoln Park, NJ	Title		-1	Signature			~~~	Date			
on ploted by (Print or Type) Gordana Luna	Secre	tary/Trea	surcr	0.56.50	Gordona	Zuna		03	/14/20	13	
			W. V.					W 22 004 06 JA 100			

P.1/1

B & G proj. #: 2013-57

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

\*\*\*\*\*\* EMERGENCY \*\*\*\*\*\*

20/3 Check # 5822

Date of Notification	1 (1)		Name of	Building Ow	ner/Operator (2	2)		رد الله الما	)	- 4	,		
0 13 1/11 14	_/ 1 3				Maplewood S		ol District	10 10 10 10 10 10 10 10 10 10 10 10 10 1	194				
Agencies Notified	Type Notific	ation	Street Ad			-		100 A	10	3/1			
∐ EPA	X Initia	.	525 A	cademy S	Street			140%	iliza i	· 64			
☐ DEP				e, Zip Code		A Vers			<del>) ' ' ' ' '</del> '		_		
X DOL	☐ Amen	idment		ewood, N.	J 07040				P3		- 3		
₩ DOH	☐ Cance	ellation	Name of (	Contact				Telepho	ne Numbe	er			
☐ DCA	Li Cance	nauon	Willia	m Kyle			- N						1
				FAC	CILITY INFORM	MATIC	N						
Name of facility wh	ere abatemen	t is taking p	lace (3)					Type of Facility				- 1	-
Maplewood M	liddle Schoo	ol (non su	ıb 8)				e 25		ol (K - 12				
Street Address									hapter 8 (0 (Private/0				
7 Burnet Stree	et						22		./Homes,	etc.			
City (5)		Cor	inty (6)			Co	ounty Code (7)	Square Feet	# of Floo	rs	'	Bldg. A	Age
Maplewood, I	NJ 07040	Es	ssex				tate use only)	Current Use (F		ng der	nolis	ned)	
Name of Monitoring	Firm Hired by	y Bldg. Owi	ner (8)		ASCM No.	_	Name of Abatement	school (non Contractor (9)	SUD8)				
AHERA Cons	sultants				0057		B & G Restora	tion Inc					
Street Address							Street Address					_	
PO BOX 385							105 Ryerson F			. 19			
City, State, Zip Code OCEANVILL		1-0385		7			City, State, Zip Code Lincoln Park,			3530753	£		
Project Manager for		m	1	Phone Numb			Telephone Number		License		ber		
Eric Clarkson				(609) 652			(973)696-686		00	378			
Scheduled Start Date	e (10)	Sche	d. Comple	etion Date (1	1)		Name of OSHA Mon B & G Restorat						
03/15/2013		03/	16/2013	3			Street Address						
Occupancy Status D							105 Ryerson R	load					
☐ Facility closed. ☐ Abatement per	vacated during	g entire per e of normal	iod of aba facility ho	tement. ours-		- 1	City, State, Zip Code						
Describe:						-1	LincolnPark, N.	J 07035					
Scope of Work (che							L <del></del>				-		
☐ Demolition	X	Renovati	on				Full Containment w/neg	gative pressure	Gloveb	ao pr	oced	ıre	
<b> ≥</b> ≥3 sf or ≥3 lf		≥160 sf or	≥260 If			X	Mini-enclosure		Non-fr				
Location of			n normally	y used solely	/					R	R	Ε	E
asbestos-conta material to be	aining	staff(12)	- Inanice/Cu	Stodiai	Descriptio material (/		asbestos-containing	Amount (Specify S	F or	e m	e p	n	n
abated in facili	ty (13)	Yes	No	N/A	material (/	-CIVI)		LF)	. 0.	0	a i	a p	L
Classroom 281		-		X	O&M remo	val	ceiling plaster	10 - 16 sf		e X	ń	П	-
								10 - 10 51		H		H	1
													T
Registr red Waste Ha	uler	L	EP Hauler	10# 10	ubic Yards of W	last-	INomo -f B - : :	L - JGIV					
B & J Restoration		INJU	19563	IU# CI	1 yard	asie	Name of Registered Tullytown I	Landfill Resource & Re	coverv (	Cente	er.		
City, State Lincoln Park, N.	J			Disposal D 03/	THE PARTY OF THE P		City, State Tullytown, F		,		-		
Completed by (Print of Gordana Luna	or Type)	Title Secreta	ry/Treas	urer	Signature	-	Gordana Luna		Date 03/1	4/20	13		_

Date of Notification (1) March 15, 2013			Name of Goldco	Building Cast, Sot	Owner/Ope heby's โ	erator (2) Afernatio	nal Realty	Check #	5	15	2	
	tification		Street At	ldress est Aver		• 30 cm	20 PM S	7: 40	2.0	-		8
DOL Am	ended endment #		Ocean	te, Zip Co City, No		& L/C	US CONTI	Ur		0		
X DOH jus	ergency (including tification) ncellation		Name of John P		= 0			Telephone Num	ber			
			FACIL	ITY INFO	RMATION							
Name of Facility Where Abatemer Street Address 24 Delaware Avenue	it is Taking Place	(3)	3: 5.	-		Typ	Other (i.e. pri			lings,	home	es,
City (5) Somers Point		_			- No. 10	Squ 2,5	etc.) uare Feet 500	# of Floors		ldg. <i>A</i> 15	ige	3.
County (6) Atlantic	. 3		County C	Code (7) ISE ONLY)		2110001111	rent Use (Prior sidence	if being demolishe	ed)	8		
Name of Monitoring Firm Hired by Management and Env. Cor	Building Owner (8	3) es	ASCM	No.			nvironment			R	n Fi	45,0
Street Address P.O. Box 341						Street Add						
City, State, Zip Code Chesterfield, NJ 08515						City, State, Maple S	Zip Code hade, NJ 08	3052				
Project Manager for Monitoring Fit Bill Weisgarber	rm		Telephor	ne No. 298-407		Telephone (856)755	No.	License No 00842	).	01.02		
Start Date (10)	Schedu April		mpletion I				SHA Monitor					
April 11, 2013		2	1,3			Street Add	2201		1			
Occupancy Status During Abatem					100	107 Had						
Facility Closed/Vacated Duri Abatement Performed Outsid Other – Describe:	ng Entire Period o de of Normal Facil	f Abate ity Hou	ment rs	-		City, State, Westmo		rsey 08108				
Scope of Work (Check All That Ap	oply)					579.000210						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	×	Renov Demol				$\mathbf{H}$	Mini-Enclosure Glovebag Proce	nt with Negative P edure (*) and Non-Friab			re	
			70				NOTI-EXCTIPIED	( ) and Non-1 hab	T		emen	nt
active stampage to one		Is Loca Norma			D		11 12		-	Т	уре	
Location of Asbestos-Containing Material TO BE ABATED In Facility (13)	(ACM) N	sed Sol flainten ustodial (12)	lely by ance/ Staff?		tos Contai thermal s surfaci	cription of ining Mater ystems ins ng, VAT, o scellaneou	ulation, r	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes			Λο	honton [	Dina Incu	lation	200 LF	Х	-		10
Basement and Crawls		XXX				oiler Insu	-	50 SF	X			
Basement and Crawls	pace	XXX	×	ASI	Desios B	Oller msc	ulation	30 31	Α.			
		-			-					1000	-	
N			NJDEP V	/aste	Cubic Y	ards	Name of F	Registered Landfill			• • •	
Name of Registered Waste Haule Freehold		- 1	Hauler ID 22253		of Wast		Grows L				-	11. (
City, State Mount Holly, New Jersey	8060				Disposa 4-13-1		City, State Tullytow					
Completed by Christina Lynch	Title		anager		Sign	nature HISIN	a lun	eh M		15,	2013	3

Date of Notification (1) March 14, 2013		**		Name of Jim Ma	1000	Owner/Op	chec	<sup>2)</sup> k # 5750 2013 HAR 20	DM O.	30				
Agencies Notified	Type Notification			Street Ad 118 W		ter Aver							ï	
EPA DEP DOL	Amended Amendment		[		te, Zip Co antville,	de NJ 0810	09	SESTOS & LICE	COM H WOUNG	tul - ø		F L	0	12
DOH DCA	Emergency (injustification) Cancellation	ncluding		Name of Jim Ma		- 1			Telepho	ne Num	ber	D		
			1.9	FACII	ITY INFO	RMATIO	N		1.5					
Name of Facility Where Maratea Residence Street Address		Place (3	3)		4			Type of Facility (4  School (K-12  Subchapter	2)	an K-12				
118 Westminster A	venue			0.7				Other (i.e. pr etc.)	rivate & cor	nmercia	l build			es,
City (5) Merchantville			В.	= 4				Square Feet 2,200	# of Flo		8	dg. A	ge	lt
County (6) Camden				County C	Code (7) ISE ONLY		_	Current Use (Prio Residence	r if being d	emolish	ed)		19	
Name of Monitoring Firm Management and E				ASCM	No.			of Abatement Conte						
Street Address P.O. Box 341								Address Cutler Ave.			7. 5			
City, State, Zip Code Chesterfield, NJ 08	515							ate, Zip Code e Shade, NJ 0	8052	201				
Project Manager for Mor Bill Weisgarber	200	11	П	Telephor	ne No. 915-114	200	Telepho		Lic	ense No	).			
Start Date (10)				mpletion [				of OSHA Monitor						
April 8, 2013	1 10	April 1		15 :				- ; Address		-				
Occupancy Status Durin				Planetow .				laddon Ave						
Facility Closed/Vac Abatement Perform Other – Describe:	ated During Entire F ned Outside of Norm	eriod of a lacility	Abater / Hour	nent s		_	City, St	ate, Zip Code mont, New Je	rsev 08	108				
Scope of Work (Check A	All That Apply)							-					_	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demoli				×	Full Containme Mini-Enclosure Glovebag Prod Non-Exempted	edure	1 1			e	
		T .	1 000	lian		-						PRINCE NO	ement	t
Locatio	n of		Locat Norma		8 B	Des	cription	of			_	Ту	ре	Т
Locatio Asbestos-Containing TO BE AB In Faci (13)	g Material (ACM) A <u>ATED</u> lity	Cus	ed Sole intena todial (12)	ance/ Staff?		tos Conta thermal s	aining M systems ing, VA	aterial (ACM) insulation, Γ, or	Amou (Spec SF or	ify	Removal	Repair	Encapsulate	Enclosure
Basem	ont	Yes	No XXX	N/A	Ash	estos Ci	ontain	ing Paper	120 \$	SF.	X			
basen	ient			-	7,30	03103 0	Ontain	ing r apor	120			- 1		
			7. II	1		11 1				1 = 1				
	in the sense of a					+		10 10 10 10 10			180			11.
Name of Registered Wa	ste Hauler			NJDEP W Hauler ID		Cubic Y of Wast		Name of I	Registered andfill	Landfill				
Freehold	a I we specify the	OCTAL EAST	2	2253	y 6.1	1		4						
City, State Mount Holly, New J	ersey 08060					Disposa 4-10-1		City, State Tullytov			+			
Completed by Christina Lynch		Title Offic	е Ма	nager	7	Sil.	gnature NHS	Hinalyr	reh	Da Ma	te arch	14, 2	2013	

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

CK# 0049

Date of Notification (1) 3-15-2013	)					wner/Opera			-	, , ,	10			
Agencies Notified	Type Notification	-	1	Street Ad		2	0131	AR 20 PF	9:	20	7-			-
EPA DEP DOL	Initial Amended Amendment		_	City, Stat	e, Zip Cod lph, NJ (	le n	i soli	STUS CO LICENSI	ATT	OL.	:		į.	
DOH DCA	justification) Cancellation			Name of David					-	ephone Nur	nber			
7-				FACIL	ITY INFO	RMATION							ĕ	- 0
Name of Facility Wher 3 Story House Street Address	re Abatement is Takin	g Place (3)			3.7			pe of Facility (4 School (K-12 Subchapter 8	2)	er than K-1'	2)			
29 Hazel Street							×	Other (i.e. pr etc.)	ivate	& commerci	al bui		No.	nes,
City (5) Morristown								uare Feet 000	3	f Floors	- 1	3ldg. 50+	Age	
County (6) Morris				County C (STATE U	ode (7) SE ONLY)		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	rrent Use (Prio ouse	r if bei	ng demolish	ned)	-		
Name of Monitoring Fi	irm Hired by Building	Owner (8)		ASCM n/a	No.			batement Cont Manageme			· · · · · · · · · · · · · · · · · · ·	1	1	
Street Address				1			eet Ado			o.po.a.o.				
n/a						22	2 Troy	Lane				185		
City, State, Zip Code n/a		//				10.00		, Zip Code Park, NJ 07	035					
Project Manager for M n/a	Ionitoring Firm	7.		Telephon n/a	e No.	1.000	ephone 73-70	No. 6-7950		License N 01193	0.	II II		
Start Date (10) 3-25-2013		Scheduled		npletion D	ate (11)			SHA Monitor Manageme	nt C	orporation	1			
Occupancy Status Du	ring Abatement (Ched	k Only One	e)				eet Add		5 14 "					
	acated During Entire	Period of Al	baten	nent				Lane						
Abatement Perfo	ormed Outside of Norr	nal Facility	Hours	5		1		, Zip Code Park, NJ 07	035					
Scope of Work (Check	k All That Apply)	*****							7			15		1 /4
≥3 sf or ≥3 lf × ≥160 sf or ≥260 l	lf		enova emolit				Н	Full Containme Mini-Enclosure Glovebag Proc Non-Exempted	edure	T			ıre	
			Locat			2776 27						Aba	teme	ent
Asbestos-Contain TO BE	tion of ing Material (ACM) <u>ABATED</u> acility 13)	Used	ormal d Sole ntena odial S (12)	ly by		Descript os Containin thermal syste surfacing, other misce	g Mate ems in: VAT, c	sulation, or	(	amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
Exte	erior		-	×		Asbestos	Sidir	ng	2,0	000 SF	X		-	
							7		1227	The he had				
			7	100			14-000			e grandero				19
Name of Registered V			1	IJDEP W lauler ID 033137	No.	of Waste TBD	ls	Name of F		ered Landfil ndfill	200			
City, State		*	10	.000101		Disposal D	ate	City, State		A 19067				
Lincoln Park, NJ	07035	Title				Signa	fure	IVIOITIOV	1		ate	1		Free
Completed by E. Cirovic	- Tay	Secre	etary			Zigila Z		Ciro	D		-15-	2013	}	)

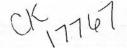
Check No. 21129

									C Marin Time Co.	30	-	_	_	-
Date of Notification (1)	- 6						Owner/Operator	(2) 2/1/2	MAR 20 PM Stac					
March 14, 2013	L.				100 S (100 D 100 S	Pierce			14R 20 000		W.		-	_
Agency Notified	Type N	otification			*1.75670707070301	ddress	- · · · · · · · · · · · · · · · · · · ·	Burn	FM	9:40				
□ EPA	☑ Initia	ı				uglas l		2135	5 Pag.	. 0	-			ι
Hot required per State Pag. 10 2004	☐ Ame	nded			nen amore en	ate, Zip C			CICEN SONT	Rm				
⊠ DOL	45,1000,000	endment # ergency (including				ia, NJ (			11/1/	mhor.		N.		
<b>⊠</b> DOH	justi	fication)				f Contact			Telephone Nur	nbet.				
□ DCA	☐ Can	cellation				Pierce								_
6 4					FACIL	ITY INFO	ORMATION	Turn of Facility	(4)		- 8			
Name of Facility Where	Abateme	nt is Taking Place	(3)					Type of Facility	(4)					
N/A							- 4 11 119	☐ School (K-12	)	0)				
Street Address								Subchapter 8	(Other than K-1 : ivate & commerci	z) al building	as,			
12 Douglas Place								homes, etc.)					. 1	
City (5)	4					1		Square Feet	# of Floors	Bldg.	Age			
Verona, NJ 07044							1	900	2	1929	9 +/	-		
County (6)	1 11					Code (7)	(STATE USE	Current Use (Pr	or if being demo	lished)				
Essex					ONLY)			Residential						
Name of Monitoring Firm	n Hired b	y Building Owner	TA	SCM	No.		Name of Abaten	nent Contractor (9	9)					
Chris Pierce						11. 16	B&N&K Res	storation Co.,	Inc., 22-2674	200				
Street Address	100			-			Street Address							
12 Douglas Place							223 Randol	ph Avenue						
City, State, Zip Code	te.		1	ttill ist.	-		City, State, Zip		T. C. 1	0.V27/02				
Verona, NJ 07044	, a a						Clifton, N.J							
Project Manager for Mo		irm	Tel	ephon	e No.		Telephone No.	-4	License No.			7		
Chris Pierce	cimig i				5-139	5	973-478-468	31	00120					
Start Date (10)		Scheduled Con	180,000	OR THE STATE	March Control	1. The second	Name of OSHA		1					
March 27, 2013		April 07, 20		136			McCabe En	vironmental s	Services, L.L.	.C.				
Occupancy Status Duris	ng Abater						Street Address			307				
1							464 Valley B	Brook Avenue	е					
□ Facility Closed/Vacat     □ Abatement Performe	ted During	g Entire Period of	Abate	ment			City, State, Zip	and the second of the second o						
Other - Describe:	u Outside	Of Normal Lacing	y riou				Lyndhurst,	NJ 07071-199	98					
Scope of Work (Check a	all that ap	(vla						T 17 F 22						
					⊠ Ron	ovation	⊠ Full □ Mini	Containment with i-Enclosure	n Negative Pressu	ire				
$\boxtimes \ge 3 \text{ sf or } \ge 3 \text{ lf}$ $\square \ge 160 \text{ sf or } \ge 260 \text{ lf}$					☐ Dem		☐ Glov	vebag Procedure		•				
_ 2 100 31 01 2 200 II							. □ Non	-Exempted (*) and	d Non-Friable Pro	cedure	Α	bate	me	nt
The horacet		- 4 - 4		Locati		65			# 1		^		pe	
Local	tion of			ormal I Sole		100	Description	of						
Asbestos-Contain		ial (ACM)		ntena		Asbe	stos Containing N	Naterial (ACM)	Amount		R	_	Enc	m
	ABATED			ustodi		(i.e	., thermal systems surfacing, VA		(Specify SF or LF		em	Rep	aps	Enclosure
	acility 3)			Staff? (12)			other miscellan		F 3 F		Removal	Repair	Encapsulate	sure
	e la			·-/		14 1			er star a s		-		e	-
athem are as aver	1 7 754		Yes	No	N/A				3	0 Sq Ft		-		
Living Room					X	Wall	Plaster		3	o oq rı		-		
							100				-	-	-	
	1			2000	12.00						-		-	
	94							I N	stand Landfill		_			
Name of Registered W			10000	DEP V No.	Vaste H	lauler	Cubic Yards of Waste	Name of Regis	stered Landfill					
B&N&K Restorat	ion Co.	, Inc.,	25000	NO.	hiv:		1	Minerva E	nterprises, In	ıc.	411			
22-2674200	100				1,242		Disposal Date	City, State		0.1			-	
City, State		- E					03/29/13	Waynesbu	ıra. OH			1		
Clifton, N.J 0701		Title				1.44(1.57)	Signature //	1/12	/	Date	-	-		-
Completed by	an	Project Ma	nage	<b>2</b> F				In		3/14/	201	13		1

00/10/2013 AM: 20 State of NJ Notification of Asbestos Abatement Paragon Job# (Pursuant to NJAC 8 60-7 and 12:120-7) DOL - 10 DAY Date of Notification (1) Name of Building Owner/Operator (2 10 13 1/11/13 1/11/13 1 Boardwalk Hall Agencies Notified Type Notification Street Address ☑ EPA Initial 2301 Boardwalk X DEP Amendment City State Zip Code DO DOL Amandment # Atlantic City, NJ 08401 Emergency (includ NO DOH Name of Contact Telephone Number uatification) DCA Cancellation Janet Mitrocsak FACILITY INFORMATION Name of facility where abatement is taking place (3) Type of Facility (4) School (K - 12) Boardwalk Upper West Hall (Florida Ave. Side) Subchapter 8 (Other than K-12) Street Address Other (Private/Commercial Bidgs/Homes, etc # of Floors Bldg Age 2301 Boardwalk Square Fuel 70 000,000 City (5) County (6) County Code (7) (State use only) Current Use (Prior If being demolished) Performance Center Atlantic City Atlantic Name of Monitoring Florn Hired by Bidg Owner (8) Verne of Abatement Contractor (9) ASCM No Paragon Contracting, Inc. Street Address Street Address 590 River Rd 5434 King Avc. Suite 101 Cily, State, Zip Code City State Zip Code Clifton, NJ 07014 Pennsauken, NJ 08109 License Number Project Manager for Monitoring Firm elephone Number Phone Number 00748 (973) 614-1600 856-616-9516 Name of QSHA Monitor Saladujed Start Date (10) Sched. Completion Date (11) Paragon Contracting, Inc. Street Address 03/20/2013 Occupancy Status During Abatement (Check only one) 590 River Rd Facility closed/vacated during entire period of abetement City State Zip Code Abatement performed outside of normal facility hours-Other-Describe Regulated area at the Upper West Hall of the facility Clifton, NJ 07014 Scree of Work (check all that apply) Demolition Full Containment winegative pressure Glovebag procedure Renovation Non-Exempted (\*) Non-friable procedure Mini-enclosure X >3 af or >3 If 160 af or ≥280 if is location normally used solely E Location of by maintenance custodial Amount re anbestos-containing Description of asbestos-containing C staft(12) (Specify SF or C material to bo O material (ACM) â abated in facility (13) You No N/A 1.800 SF O&M Floor Debris Clean up tipper West Hall Florida Ave. Side Registered Weste Hauler NJDEP Hauler ID# Cubic Yards of Waste Name of Registered Landfill Paragon Contracting, Inc. GROW5/Tullytown 22161 Disposal Date City, State City State Morrisville, PA TBD Chilton, NJ Signature Completed by (Print or Type) Title 03/15/2015 (ANAII Lazevski President

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

The second second second	27.5						JAMAN 32					
Date of Notification (1)		Name o	of Building Ow	ner/Operator (2	2)			- 4	2			
10 13 1/115 1/11	200000000000000000000000000000000000000	Board	dwalk Hall	in the state of				P/4 3. Z				
Agencies Notified Typ	e Notification	Street A	ddress (			<i>ξ</i>	17/20 4	. 42	)	**********		
⊠ DEP □	Initial	2301	Boardwalk					ξ.,	0			
	Amendment	City, St	ate, Zip Code					y W				
Award and a second	ndment#	Atla	ntic City, NJ	08401				C.	100			
☑ DOH ☑E	mergency (inclustification)		f Contact			,	Telepho	ne Number				
☐ DCA ☐	Cancellation	lan	et Mitrocsak									
		11			-							
			FAC	CILITY INFORM	MATION		5					
Name of facility where al	batement is taki	ng place (3)					Type of Facility		\$3	e ex		
Boardwalk Upper W	est Hall (Flori	ida Ave Si	de)					ool (K - 12)	10		277.520	
Street Address	est Hall (1 loll	ida Avc. Si	de)					chapter 8 (C			(-12)	
On corridatess						100		r (Private/C s./Homes, e		erciai		
2301 Boardwalk				1297	aku bir		Square Feet	# of Floor		В	ldg. A	ge
City (5)		County (6)				ty Code (7)	60,000	2		70		
					(State	e use only)	Current Use (		g den	nolish	ed)	
Atlantic City  Name of Monitoring Firm	Librard by District	Atlantic					Performance	Center				
	Hirea by Blag.	Owner (8)		ASCM No.		Name of Abatement	Contractor (9)					
EDI						Paragon Contrac	ting, Inc.					
Street Address						Street Address					180	ř.
5434 King Ave. Suit	te 101					590 River Rd.						AND DESCRIPTION
City, State, Zip Code						City, State, Zip Code						
Pennsauken, NJ 0810			Tall III			Clifton, NJ 070	14					Ŷ
Project Manager for Monit	oring Firm		Phone Num	ber		CO73) 614 1600		License 00748	Numb	per		
Jay Murry		10	856-616-9			(973) 614-1600 Name of OSHA Mon		00748				
Scheduled Start Date (10)		Sched. Com	oletion Date (1	11)		Paragon Contrac						
03 18/2013		03/20/2013	)			Street Address	ang, mc.					
Occupancy Status During	Abatement (Ch	eck only on	e)			590 River Rd.						
Facility closed/vacat					1	City, State, Zip Code						
Abatement performe Describe:	ed outside of no	rmal facility	hours-				*					
Other-Describe: Re	egulated area at t	he Upper We	st Hall of the fa	cility		Clifton, NJ 0701	14					
Scope of Work (check all	that apply)				$=$ $\mu$							
☐ Demolition		ovation			Пы	Il Containment w/neg	native pressure	Gloveb	20 00	ocod	uro	
>3 sf or >3 If	-	sf or ≥260 lf				ni-enclosure		mpted (") I				
			ally used sole	lvl	Z			mpted ( ) i	I R	R		Tuure
Location of asbestos-containing	, by n	naintenance			tion of oo	bestos-containing	Amount		e	e	E	E
material to be	stan	f(12)		- material		bestos-containing	(Specify	SF or	m o	p a	С	C
abated in facility (13	3) Ye	es No	N/A				LF)		v	i	a p	L
Upper West Hall Florida Av	e Side			O&M Floo	or Dehri	s Clean un	1,800 SF		e	-		
e pper west trait Florida AV	c. oluc			7	01 00011	5 Cican up	1,000 51					H
				#				2 75,07 7	H			1
				-	****				片			H
<del></del>		-		4				1000 AM 42 4 2 m	님	Η		1
Registered Waste Hauler		NJDEP Hau	ler ID# 10	Ubic Yards of	Waste T	Name of Registered	Landfill		Ш	Ш	Ш	
Paragon Contracting, I	nc.	22161	1	5	7 #4310	GROWS/Tullyto		274 				
City State	1 1 1 1 1		Disposal I			City, State					-	-
Clifton, NJ			TBD			Morrisville, PA						
Completed by (Print or Typ	and the second s		4	Signature	11	//		Date				
Goran Lazevski	Pres	ident			m.	//		03/15/2	013			



		(F	ursuan	t to NJAC 8:60 a	nd 12:12	0)	D.	long production of				
Date of Notification (1) 3/14/2013		TALL I		of Building Owner		T 2		100	P. Prin	**************************************		
Agencies Notified Type Notification    X   EPA     Initial				Address ROUTE 23, S	UITE 3	30	or Fift	20 PM	9:	l.n		
DEP Amended  DOL Amendment				ate, Zip Code NE, NJ 07470			& Z/	IS EON	Tha	* 6'	ı	
▼ DOH	)	9		of Contact ARD MAINAR	:DI		Te	elephone Nu	mber	i.		
Name of Facility Where Abatement is Takin	na Diana	(2)	FAC	ILITY INFORMAT	TION	~ (6 )	. (4)			T.		
FORMER UNION HOSPITAL	ig Flace	(3)				Type of Facil	15 (1935) 					
Street Address 1000 GALLOPING HILL ROAD	3						pter 8 (Ot	her than K-1 & commerc		ldings	, hom	ies,
City (5) UNION			2.7			Square Feet	# .	of Floors		Bldg. /	Age	
County (6) UNION				Code (7) USE ONLY)		Current Use	(Prior if be	eing demolis	hed)			
Name of Monitoring Firm Hired by Building WHITMAN COMPANIES	Owner (8	)	ASC	M No.		of Abatement O BROTHEI		250 500	NG			
Street Address 116 TICES LANE, UNIT B-1						Address RUTHERFO	ORD BC	ULEVAR	D			
City, State, Zip Code EAST BRUNSWICK, NJ 08816					400000000000000000000000000000000000000	tate, Zip Code TON, NJ 0		X				
Project Manager for Monitoring Firm KEVIN LOVELY			Telepho 732-3	ne No. 90-5858		one No. 956-8700	1	License 1 00494	No.			_
Start Date (10) 3/25/2013	Schedu 4/1/20		npletion	Date (11)		of OSHA Moni IE AS (9) Al		1				
Occupancy Status During Abatement (Chec	k Only O	ne)			Street	Address						
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe:	Period of nal Facilit	Abaten y Hours	nent	ngiri yat	City, S	tate, Zip Code						-
Scope of Work (Check All That Apply)		-		,				-		_		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	Renova Demolit			×	Mini-Enclos Glovebag F	sure Procedure	h Negative I			e	
Location of		Locati Normal	ly	De	escription	of					emen pe	t
Asbestos-Containing Material (ACM)  TO BE ABATED  In Facility  (13)	Ma	ed Sole aintenar todial S (12)	nce/ Staff?	Asbestos Con (i.e. therma surfa	taining M	laterial (ACM) insulation, T, or	(	Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
2ND FLOOR	res	No X	N/A	CE	EITTINI	20		22.05			- 7	
ZIND FLOOR	1.51				FITTING			32 SF	X	-		
				1 II	LE ONL	.1		45 SF	X			
Name of Registered Waste Hauler		1.	JDEP W	anta To:	Vend		10	11				
TWO BROTHERS CONTRACTING	an de la companya de La companya de la companya de	Н	auler ID 8743		Yards ste	2000000000		ered Landfill NAGEME		R.C	.W.S	3.
City, State CLIFTON, NJ			0140		sal Date	City, S						
Completed by VIVECA RAMOS	Title SEC	RETA	\RY		Signature	f Street	Cer	Da	ite 14/20	013		1

#### State of New Jersey

#### NOTIFICATION OF ASBESTOS ABATEMENT

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

D. 01.00				T			287			101	
Date of Notification (1) 3/15/2013		21 0		Name of Buildin	ng Owner/Op JAS J	erator (2) unior, LL6	an J	1 ( -	369	7	
	al Notific	cation tification		Street Address	POE	erator (2) unior, LLE	120 PM 9:	<b>4</b> C	5 1	24	
[x] DOL Ame		# ncluding		City, State, Zip		g Lake, NJ 07762	EN SILLIAN	,		í	
I A I DOIL	fication) cellation		es as	Name of Contact Joe	t		relephone Numbe	ŕ			
	,		FAC	CILITY INFOR	MATION						
Name of Facility Where Abatement is Takin Residence	ng Place (	(3)				Type of Facility (4)	School (k-12)		ш		
Street Address 310 Washington A	Avenue	V 10			- W 10	[ ] [x]	Subchapter 8 (c Other (i.e., priv homes, etc.)		100		ildings,
City	Count	y (6)		County Code (7) (STATE USE ON	LY)	Square feet 1500 sf	# of Floors	Bld	lg. Age	60	
Avon	0.556538500	mouth	7 - 1			Current Use (Prior i Resider	nce	d)			
Name of Monitoring Firm Hired by Building N/A	g Owner (	(8)		ASCM No.			r (9) an Contracting	, Inc.	N.E.		-
Street Address	1.51		ran ia di		Street A	1889 R	oute 9, Unit 61		-56		
City, State, Zip Code					City, Sta	te, Zip Code Toms R	River, New Jers	sey 08	755-1	271	
Project Manager for Monitoring Firm		Telephon	e Number			ne Number 9-9932	License 1 00624	Number	r		
Scheduled Start Date (10) 3/18/13	duled Start Date (10) Scheduled C 3/18/13 3/19/13					OSHA Monitor E.M.S.I	L. Analytical				
Occupancy Status During Abatement(Check  [ X ] Facility Closed/Vacate	ed During	g Entire Pe			Street Ac	ldress	elton Road			01.	
[ ] Other – Describe	Outside	or ivorinar	racinty r		City, Sta	te, ZipCode Piscatav	way, New Jerse	ey 088	354		
Scope of Work (Check all that apply)		7	2 3110011100		[ ]	Full Containment	with Negative Pro	essure			
[ ] >3 sf or ≥3 lf [ X ] ≥160 sf or ≥260 lf		[ ] [ x ]	Renova		[x]	Mini-Enclosure Glovebag Procedu Non-Exempted (*		Proced	ure		
						Harris III		Aba	tement	Туре	
Location of Asbestos-Containing Material (ACM)  TO BE ABATED in facility (13)	N	Is Location ormally to Solely becance/C Staff (12)	ised y	(i.	Descriptionsbestos-Con Material (A.e., thermal sulation, sur VAT, on the miscella	taining CM) systems facing, r	Amount (Specify SF or LF)	R E M O V A L	R E P A I R	E N C A P S U L E	E N C L O S U R E
Exterior	F # 1 2 4	X		Asbestos sidi	ng	transame en	1300 sf	X			
	- 1-0		100		*	e elementica	1-1-1-1	11		1/4	
								1 5	1012/		J
		ille Salpa		Landa -							
Name of Registered Waste Hauler Guardian Contracting, Inc.	N.	JDEP Was 2	20223	3	ards of Waste	T.R.R.F.	ed Landfill				
City, State Toms River, New Jersey			3/20/-	sal Date 13	City, Sta	te own, Pennsylvania					
Completed by (Print or Type) Nicholas Fernicola	Title Projec	t Manag		Signature	451	Les	1	Date 3/15	5/2013		

\*Do not use this form for asbestos licensure exempted activities.

Clack 11994

Date of Notification (1) 3/15/13				Name of Mary A	Building ann Kroeddress	Owner/O eger	perator	(2) 3 MA	0 0-	• •					722
Agencies Notified	Type Notification	, .			ddress coby St		# 47	- qu	1 < 0 PI	1 9:	20			-	
DEP DOL	Initial Amended Amendment				te, Zip Co wood, N			£ 1/1	CENSIN		$g_{L}$	10			
DOH DCA	Emergency ( justification) Cancellation	including			Contact on Kro	eger			7		lephone Nu	mber			
				FACII	LITY INFO	ORMATI	ON								
Name of Facility Where A	Abatement is Taking	Place (3)						Туре	of Facility (4	4)					
Street Address			- 1			ROW'S	A Page Land		School (K-1: Subchapter		orthon V 1	2)			
184 Jacoby Street							1.62	×	Other (i.e. p etc.)				dings	, hom	es,
City (5) Maplewood						-1,52 F		Squa 2000	re Feet	2	of Floors		3ldg. / 30	Age	
County (6) Essex				County C	Code (7) USE ONLY	)		Curre	ent Use (Pric	or if be	ing demolis	hed)			
Name of Monitoring Firm	Hired by Building (	Owner (8)	-	ASCM	No.				tement Con			;			
Street Address		*						Addres							-
				1.60					Orive, PO	Box	483				
City, State, Zip Code	17 P								ip Code , NJ 074	18	- 2				
Project Manager for Mon	itoring Firm	ee dan de		Telephor	ne No.			none N 583-8		57	License N	lo.			15
Start Date (10) 3/18/13		Scheduled 3/25/13	Con	pletion [	Date (11)		Name	of OSI	HA Monitor						
Occupancy Status During	g Abatement (Chec		)				Street	Addres	ss		1 2	-			
Facility Closed/Vaci Abatement Perform  Other – Describe:	ated During Entire F	Period of Ab	atem				City, S	state, Z	ip Code				7	-	
Scope of Work (Check A	II That Apply)		-						T 10 10 1		7				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	nova moliti				×	Mir Glo	Il Containme ni-Enclosure ovebag Proc n-Exempted	edure				re	
	4.1	le I	ocati	on				5 7		17-		1 8	Abat	emen	t
Location	n of	No	rmall	ly		Des	scription	of					T	уре	
Asbestos-Containing <u>TO BE AB</u> In Facil (13)	ATED		tenar dial S (12)	nce/		tos Cont thermal surfac	aining N	Material s insula T, or		(	Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A							127				
basem	ent	1 19.00		X		25.25	insula		91.11		10 LF	x			-1
basem			х		boiler	insula	ation			10 SF	x			201	
						444					ar Grae				
Name of Registered Was	ste Hauler		1000	JDEP W auler ID		Cubic of Was			The state of the s		ered Landfil				4
Tri State Transfer		7-1-1		2325		10	,,,,		Minerva	Ent	erprises				
City, State Bronx				re in Transi		Dispos	al Date	4.5	City, State Waynes		, OH	. 2	-2.3		
Completed by		Title			4.5	S	ignature	11 1				ate	-		0.5*
Andrew S Higgins		Presid	ent				6	1/C			3/	15/1	3		

40 hock

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

Date of Notification (1)		1000-20		Name	e of Buildi	ng Owner/Operator (	2)	_	. 1	C. 1940 .		
3 / 14	/13			JC	Penney	Company Incorp	orated	2013 MAD				
Agencies Notified Type No	tification		-	Stree	t Address			- 1911 30	1210			
	I .			650	01 Legac	y Drive			1 17	9: 4	n	
3												
The state of the s			_	1000				LICENS	27	801		
		ciuair	ig					Telephone Numi	ner"	- 1.	1000	
	35			So	v Thoma	ıs		Tolophono rami				
		N.	Alkonsite						-			
Name of Facility Where Abatement	t is Takino	Plac	e (3)	- ' ^	CILITI	INFORMATION	Type of Facility	(4)			-	
		,	- ( <del>-</del> )									
Street Address		1					☐ Subchapter	8 (Other than K-12)				
500 Quaker Bridge Mall									cial b	uildin	gs,	
City (5)								A 12 A	В	Ida A		
								10/200000000000000000000000000000000000	1		ge	
	-			Cou	nty Codo /	TAVETATE LISE ONLY				75		- 1
				Cou	inty Code (	(1)(STATE OSE ONLT)	Current Ose (FI	ioi ii being demoiis	nea)			
	Building C	hyper	(8)	ASCM	No	Name of Abotem	ant Contractor (O)					
	building C	VVIIGI	(0)	The State of the S								
				022	52		ion inc					
			5 25 545									
			I Tak		N		NY 10309	12.7		14		
7010 50 0	н					La company of the com		14 / 00000000000000000000000000000000000				
	Cabad						Library and the gran	00774				4,
	1					The state of the s	onitor					
Occupancy Status During Abateme	nt (Check	only	one)			Street Address					-	
☐ Facility Closed/Vacated During	Entire Per	riod of	Abate	ment		10 59 Jackso	n Avenue					
						City, State, Zip Co	ode			-	-	_
Time of Abatement:AM-	PN	//	PM		AM							
Scope of Work (Check all that apply	y)				-			A LONG TO L				_
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>						☐ Mini-Enc	losure Procedure		e.			
	- 6 0 0	1:	s Loca	tion	I		, , ,		1	atem	ent T	vne
	Y				18.5	Description o	f	1.00		_		T
	ACM)								em	ep:	nca	ncl
	100	Cus			(1.6				ova	₩	psu	uso
(13)	1 11 11			- Avenue					-		late	<b>₽</b>
ND		1.77	-		1111				-			-
2" Level Joe Fresh Dept		$\boxtimes$			VAT/M	ASTIC		1500SF				
					1				П	П	П	П
			+	-					=	-	=	-
				-					-	Ш	Ш	Ш
					14.11.	See Section 19	t. (X 1 )					
Name of Registered Waste Hauler			100	4.33	Despitation of the same		Name of Regis	tered Landfill	-			
Global Waste Industries, Inc			- 1	NJ-22		Waste 20	G.R.O.W.S	., Inc.				
City, State					1180	Disposal Date	City, State	There I .				
Hackettstown, NJ	1.					5/19/13	Morrisville	,PA	- 1	1		
Completed By (Print or Type)	Title				- 111	Signature	1)	Dat	e l	+		
	100000000000000000000000000000000000000		Proje	ct Ma	nager	1 July 1	Dorli	)	7-1	111	2	
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John Tardy ASB-41 MAY 11				ect Mai	7.7	tos licensure exemp	ded activities.	<u> </u>	3/14	#1		3



#### STATE OF NEW JERSEY

#### NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to N.J.A.C. 8:60 AND 12:120)

Date of Notification (1)	0/45/	0040			Name of Buildi	ng Owner/Operator (2)	Man
William Co.	3/15/	2013			Bridgewate	-Raritan School District	MAR 20 PH S. L.N.
Agencies Notified		Notification	Туре		Street Address	1 3.97	Ston 19 3. 40
X EPA		Initial			836 Newma	ns Lane	7173700
DEP	N 18	E 21	d #		City, State, Zip	Code	THE MSING THUL
X DOL				ng	Bridgewate	, NJ 08807	776
X DOH			region to the mile		Name of Conta	ict	Simbor VA
DCA		Cancella	ation		Mr. Raymor	d Ruth	
Name of Eacility Where Abate	ment is Ta	king Place (3	1	FACILITY IN	FORMATION Type of Facility	(4)	
			<u>/</u>				
	ted Scrit	JOI			School (F	(-12)	
Street Address					Subchap	er 8 (Other than K-12)	
	Some continued   Some					e., private & commercial buildings	s,
	## A STATE S					etc.)	
Diagovato.	Sies Notified   Notification Type						
	ed by Bldg.	Owner (8)		0.	Name of Contr		
Briggs Associates			00004		MTM Metro		
Street Address	ies Notified  Notification Type  Initial  Amended #  Emergency (including justification)  CA  OCA  FACILITY Where Abatement is Taking Place (3)  Inhower Intermediated School  Address  Eisenhower Ave  OCO  OCOUNTY (6)  Somerset  Of Monitoring Firm Hired by Bldg. Owner (8)  Gas Associates  Address  Sax Associates  Address  Sax Manager for Monitoring Firm  Inael Hoodak  Intermediated School  ASCM No.  100004  ASCM No.  1000004  ASCM No.  10000						
3 Crosswick Street					135-137 Mc		
City, State, Zip Code	Harris Harris				City State, Zip	Code	
Bordentown, NJ 08505			+		Paterson, N		
Project Manager for Monitoring	ng Firm	Telephone I	Number		Telephone Nu	mber Licen	se Number
Michael Hoodak		609-298-5	520		973 742 50	30 0080	)9
Scheduled Start Date (10)		Scheduled	Completion	Date (11)	Name of OSH	A Monitor	
3/25/13		3/27/13		- 1	MTM Metro	Corporation	
Occupancy Status During Ab	atement (C	heck only on	e)		Street Address		
					135-137 M	Bride Av	
	During En	tire Period of	Abatement		City, State, Zip	Code	
	Outside of I	Normal Facilit	y Hours				
					Paterson, N	J 07501	
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		Donovotion			I Containment wi	h Negative Pressure	Mini-Enclosure
X > 3 sf or > 3 lf	[2	_ _		لسا		IT Negative i resource	lovebag Procedure
> 160 sf or > 260 lf		Demolition		No	n-Exempted(*) &	Non-Friable Procedure X G	lovebag Flocedure
Location of Asbestos-	Is Loc	ation Normally	Used	Description of	V 35 12	Amount (Specify SF or LF)	Abatement Type
Containing Material (ACM) in			stodial	thermal system surfacing, VA		a to the above to the the	
Facility (13)		L'advantage	N/A	miscell.)			Rem. Rep. Encap Enclose
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					10110	I N	of Bog. Landfill
Name of Reg. Waste Hauler	4.11		ste Hauler	ID#	Cubic Yards o	f Waste Name	e of Reg. Landfill
MTM Metro Corporation		26552			3		
City, State						Disp. Date	City, State Tullytown, PA
Paterson, NJ 07501			11.00			4/1/13	
Completed by (Print or Type)	)	Title	A. 18		Signature	Date	
Elizabeth Maslarkov	e Ki Date (M.)	Business Ad	ministrator		Elizabetl	Maslarkov 3/15/2	2013
Lizabeth Wasiantov ,		Duomicoo /\u					

' NO HEAT EMERGENCY

State of New Jurally (1)	264
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Character to MLIAC 8:50 and 12	<b>=120)</b>

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Agencies Notified	Type Notification			et Addres			1 1 1				
⊠EPA □DEP			133	Main Stre	eet	2013 MAR 20	PM 9:20				
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			Mike	Murphy						STALL	
			F	ACILITY	INFORMATIO	N		1			
Name of Facility Whe Emerson High Scho	re Abatement is Takin ol	g Place (3)				acility (4) ool (K-12)				7.	
Street Address			1.7			chapter 8 (Other tha	an K-12)			*0	
131 Main Street		5 Mg. 15-7					commercial building	ıs ho	me i	etc.)	
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City (5) Emerson						0,000	1	33	50		
Emerson					Current U	lse (Prior if being de	emolished)	12		111	E
County (6) Bergen		County Coo	le (7)			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
Name of Monitoring F	irm Hired by Building (	Owner (8)		ASCN	No. Name of	Abatement Contract	tor (9)				
EnviroVision Consul Street Address	tants, Inc.		100	00079	Synatech	, Inc.					
20-21 Wagaraw Road	d- Building 35E				Street Add						
City, State & Zip Code						e & Zip Code					-
Fair Lawn, NJ 07410		<u> </u>	12 / 127		Little Egg	Harbor, NJ 08087	7			.,	
Project Manager for M Wille Morales	onitoring Firm		elephone 73-636-9	Number	Telephone 609-296-6		License Num		-		
Scheduled Start Date	(10) Schedu	led Complet	ion Date	OLA COL	Name of 0	OSHA Monitor	and the same of the	0081	/		
3/29/13 Occupancy Status Dur	ring Abatement (Chec		1/29/13		Synatech			1	Ŋ.		
Facility Close	d/Vacated During Enti	ire Period of	Abatem	ent	Street Add						
Abatement Pe	erformed Outside of N	ormal Hour	s			& Zip Code			_	-	
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iane Aloia	Exec. A	Administrate	or	1()	ane 110m		March 15, 2013				

CK#24096

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) NOVARTIS PHARMACUETICALS CORPORATION Date of Notification (1) Street Address 15 /13 Type Notification Agencies Notified 1 HEALTH PLAZA Initial Notification City, State, Zip Code EPA EAST HANOVER, NEW JERSEY 07936 DEP Amended Notification Cancellation DOL Telephone Number Name of Contact On Hold DOH **EMERGENCY NOTIFICATION** PETER GEANNAKOPOULOS DCA FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) NOVARTIS -EAST HANOVER Subchapter 8 (Other than K-12) Other (ie. private & commcl. bldgs., homes, etc.) Square Feet Street Address # of Floors Bldg. Age 1 HEALTH PLAZA 50,000 49 Current Use (Prior if being demolished) County Code (7) City (5) County (6) (STATE USE ONLY) EAST HAOVER MORRIS VACANT Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) HILLMAN ENVIRONMENTAL 17 PAR ENVIRONMENTAL CORPORATION Street Address Street Address 1600 ROUTE 22 EAST 313 SPOOK ROCK ROAD City, State, Zip Code City, State, Zip Code SUFFERN, NEW YORK 10901 UNION, NEW JERSEY 07083 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number MICHAEL NEHLSEN 908-688-7800 845-369-7500 Name of OSHA Monitor Expected State Date (10) Sched. Completion Date (11) QUALITY ENVIRONMENTAL 3/ 29 /13 6/ 13 /13 Year Month Day Year Month Day Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 1376 ROUTE 9 Abatement Performed Outside of Normal Facility Hours - Describe: Other - Describe FRIDAY 5PM-1AM, SATURDAY 8AM-4:30 PM City, State, Zip Code WAPPINGERS FALLS, NEW YORK 10016 Scope of Work (Check all that apply) Full Containment with Negative Pressure Demolition Mini-Enclo:, Renovation >3SF OR LF Glovebag Procedure 260 LF >160 SF OR Non-Friable Procedure Description of Asbestos-Is Location Abatement Type Location of normally used Containing Material (ACM) Asbestos-containing Amount ENCLOSUR ENCAPSU REMOVAL REPAIR Material (ACM) solely by (ie. Thermal systems (Specify TO BE ABATED Maint/Custodial insulation, surfacing, VAT, SF or LF) in Facility (13) Staff (12) or other miscellaneous) Yes No N/A 1ST FLOOR HALLWAY SPRAY ON FIREPROOFING 30 SF Name of Registered Landfill Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Waste MINERVA ENTERPRISES LLC GLOBAL WASTE INDUSTRIES INC. Hauler ID No. 699 WASHINGTON STREET 8955 MINERVA ROAD S.E. 22147 Disposal Date City, State HACKETTWON, NEW JERSEY 07840 3/29/13-6/13/13 WESBURG, OHIO 44688 Title Completed by (Print or Type) Signature

DIRECTOR OF OPERATIONS

BENJAMIN SANCHEZ

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) HESS CORPORATION Date of Notification (1) Street Address 3 /13 Agencies Notified Type Notification 1 HESS PLAZA Initial Notification City, State, Zip Code EPA WOODBRIDGE, NEW JERSEY 07095 Amended Notification #1 DEP DOL Cancellation DOH On Hold Name of Contact Telephone Number **EMERGENCY N** DAVID CERULO DCA FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) HESS PLAZA Other (ie. private & commcl. bldgs., homes, etc.) Street Address Square Feet # of Floors Bldg. Age 1 HESS PLAZA 187,000 13 42 City (5) County (6) County Code (7) Current Use (Prior if being demolished) WOODBRIDGE MIDDLESEX (STATE USE ONLY) COMMERCIAL OFFICE ASCM No. Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) PAR ENVIRONMENTAL CORPORATION HILLMANN ENVIRONMENTAL 17 Street Address Street Address 1600 ROUTE 22 313 SPOOK ROCK ROAD City, State, Zip Code City, State, Zip Code UNION, NEW JERSEY 07083 SUFFERN, NEW YORK 10901 Telephone Number License Number Project Manager for Monitoring Firm Telephone Number MIKE NEHLSEN 908-377-5644 845-369-7500 460 Expected State Date (10) Sched. Completion Date (11) Name of OSHA Monitor 12 / /13 3/ 15 QUALITY ENVIRONMENTAL 1/ Year Month Day Year Month Occupancy Status During Abatement (Check only one) 1376 ROUTE 9 W Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe: Other - Describe: Monday - Friday 6pm - 2:30 am City, State, Zip Code WAPPINGERS FALLS, NY 12590 addittional hours: 02/23/13 7am-3:30pm Scope of Work (Check all that apply) Full Containment with Negative Pressure Demolition Mini-Enclo:, Renovation >3SF OR LE Glovebag Procedure >160 SF OR Non-Friable Procedure Is Location Description of Asbestos-Abatement Type Location of Asbestos-containing normally used Containing Material (ACM) Amount REMOVAL REPAIR ENCAPSUL ENCLOSUR (Specify Material (ACM) solely by (ie. Thermal systems TO BE ABATED Maint/Custodial insulation, surfacing, VAT, SF or LF) in Facility (13) Staff (12) or other miscellaneous) es No 8,005 SF 4th FLOOR -ENTIRE VAT & MASTIC 25 SF X 4th FLOOR -ENTIRE TAR PIPE INSULATION 75 LF 4th FLOOR -ENTIRE 12,180 SF X 4th FLOOR -ENTIRE JOINT COMPOUND 4th FLOOR -ENTIRE COVE BASE MASTIC 495 SF X 8,005 SF **5TH FLOOR -ENTIRE** VAT & MASTIC 25 SF 5TH FLOOR -ENTIRE TAR X 75 LF X 5TH FLOOR -ENTIRE PIPE INSULATION JOINT COMPOUND 12,180 SF 5TH FLOOR -ENTIRE 5TH FLOOR -ENTIRE X COVE BASE MASTIC 495 SF X 8,005 SF **6TH FLOOR-ENTIRE** VAT & MASTIC X 6TH FLOOR-ENTIRE 25 SF X TAR PIPE INSULATION 75 LF X **6TH FLOOR-ENTIRE** X **6TH FLOOR-ENTIRE** JOINT COMPOUND 12,180 SF X **6TH FLOOR-ENTIRE** COVE BASE MASTIC 495 SF Name of Registered Landfill Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Waste GROWS LANDFILL DJM TRANSPORT, LLC Hauler ID No. 200 26981 City, State Disposal Date KEARNEY, NEW JERSEY 1/15/13-12/30/13 Completed by (Print or Type) BENJAMIN SANCHEZ Date Signature DIRECTOR OF OPERATIONS



#### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

ype Notification Initial Amended Equipment is Taking PARK (SAN)	Ame MEF n) on	RGENO	Y	Otreet Madre	ENVIRO Zip Code , NJ 086 ntact	ner/Operator (2) / ERSEY ONMENTAL PR	PH 9: 20	2/1	113		
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(12) Yes No N/A  VAT  PIPE INSULATION  NJDEP Waste Hauler ID No. 21079  City, State, Zip Code  City, State, Zip Code</td><td>HAMILTON, NJ 08691  Telephone No. 732-664-7788 609-890-7110  Scheduled Completion Date (11) Name of OSHA Monitor N/A  atternent (Check only one)  ED DURING ENTIRE ABATEMENT PERIOD Dutside of Normal Facility Hours  Telephone No. 609-890-7110  Street Address  City, State, Zip Code  Telephone No. 609-890-7110  Street Address  City, State, Zip Code  Telephone No. 609-890-7110  Street Address  City, State, Zip Code  Telephone No. 609-890-7110  Street Address  City, State, Zip Code  Telephone No. 609-890-7110  City, State, Zip Code  Telephone No. 609-890-7110  Street Address  City, State, Zip Code  Telephone No. 609-890-7110  Telephone No. 609-890-7110  Street Address  City, State, Zip Code  Telephone No. 609-890-7110  Telephone No. 609-890-7110  Street Address  City, State, Zip Code  Telephone No. 609-890-7110  Telephone No. 609-80-80-80  Telephone No. 609-80-80  Telephone No. 609-80-80  Telephone No. 609-80-80  Telephone No. 609-80-80  Telephone No. 609-80  Telephone No. 609-</td><td>City, State, Zip Code HAMILTON, NJ 08691  Telephone No. 732-664-7788  Go9-890-7110  Scheduled Completion Date (11) 3/20/2013  Scheduled Completion Date (11) Name of OSHA Monitor N/A  Street Address  Dutside of Normal Facility Hours  City, State, Zip Code  Street Address  City, State, Zip Code  Tutli Containment with Ne Mini-Enclosure Glovebag Procedure Normally Used Solely by Maintenance/Custo dial Staff? 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<sup>\*</sup> Do not use this form for asbestos licensure exempted activities

Ch# 0050

Date of Notification (1) 3-18-2013	The Land			Building O Manage	wner/Operato ement		410.00	+8	0.1.4				
Agencies Notified Type Notification	l i	1000	treet Add		ngston Ave		4AR 20	Ti	5. 4				
EPA Initial Amended Amendment			(50)C	e, Zip Cod ton, NJ		, #35 }	LIČE	VJI VJII	TKOL IG				
Emergency justification  DCA  Cancellatio	)	N	lame of 0	Contact				Tele	phone Nun	nber			
			FACIL	ITY INFO	RMATION								
Name of Facility Where Abatement is Taki Haddon View Apartments Street Address 1 Mac Arthur Blvd.	ng Place (3)					☐ s ☐ s	f Facility (4 chool (K-12 ubchapter ther (i.e. p	2) 8 (Othe	er than K-12 commercia	?) al build	ings,	home	es,
City (5) Haddon Township						Square	tc.) e Feet	# of	Floors		dg. A 0+	ge	
County (6) Mercer			County Co	ode (7) SE ONLY)			t Use (Prio tment Ur		ng demolish	ned)			
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Street Address					Stree	et Address Troy La	s						5
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n/a				X	Lin	coln Pa	rk, NJ 07	7035			4730-23		
Project Manager for Monitoring Firm n/a			elephon n/a	e No.		phone No 3-706-7			License N 01193	0.			
Start Date (10) 3-28-2013	Schedule 4-15-2		pletion D	ate (11)	4 - 4-1		A Monitor anageme	ent Co	orporation	1			
Occupancy Status During Abatement (Che	eck Only On	e)				et Addres							
Facility Closed/Vacated During Entire Abatement Performed Outside of No	e Period of A	batem Hours	ent			Troy La , State, Zi	Married Co.		***		_		0 1
X Other – Describe: 9am - 5 pm					— Lir	ncoln Pa	ark, NJ 0	7035	1000				
Scope of Work (Check All That Apply)  ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	- Annual -	lenovat emoliti				Min Glo	i-Enclosure vebag Pro	e cedure	Negative F			e	
						<u> </u>	I-Exempto	<u> </u>			Abat	emen	t
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Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma Cust	d Solel intenar todial S (12)	nce/		os Containing thermal system surfacing, other miscel	g Material ems insula VAT, or		(	mount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
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Name of Registered Waste Hauler Loznica Management Corporatio	n	Н	JDEP W lauler ID 033137	No.	Cubic Yard of Waste TBD	1014	G.R.O	.W.S.	ered Landfi Landfill	11 2			
City, State Lincoln Park, NJ 07035					Disposal Da TBD	ate	City, Sta Morris		PA 19067		7		
Completed by E. Cirovic	Title	retary			Signat	ture ()	תסר	ic.		ate 3-18-2	2013		7 1

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

Check# 2628

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

GAC Project # 060-13 Date of Notification (1) Name of Building Owner/Operator (2) March 14, 2013 RUTGERS, THE STATE UNIVERSITY OF NU Agencies Notified Notification Type Street Address □ EPA ☑ Initial Notification ENVIRONMENTAL HEALTH & SAFETY DEPT DCA ☐ Amended Notification 27 ROAD 1, BLDG 4086, LIVINGSTON CAMPUS X DOL ■ Emergency (including City, State, Zip Code ■ DEP- No Longer REQUIRED justification) PISCATAWAY, NJ 08854 X DOH □ Cancelled Name of Contact Telephone Number MICHAEL SMITH, ENV. **HEALTH & SAFETY** FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) PAUL ROBESON LIBRARY, BLDG # 7003 School (K-12) ☐ Subchapter 8 (other than K-12) Street Address ★ Other (i.e. private & commercial buildings, homes, etc.) NOT SUB 8 CAMDEN CAMPUS Sq. Feet: N/A # of Floors: 4 Bldg. Age: 60+ years City (5) County (6) County Code (7) CAMDEN (State Use Only) CAMDEN Current Use (prior if being demolished): ACADEMIC Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Contractor (9) ATC ASSOCIATES 0098 GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address Street Address 3 TERRI LANE 268 MAIN STREET City, State, Zip Code City State, ZipCode BURLINGTON, NJ 08016 BUTLER, NJ 07405 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number **BRIAN KEARNY** 609-386-8800 973-492-0477 00840 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 03/25/13 03/29/13 ENVIROVISION, INC. Occupancy Status During Abatement (Check only one) Street Address □ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours -20-21 WARGARAW ROAD Describe City, State, Zip Code ☑Other - Describe: Shift Hours: 5:00 PM - 5:00 AM (24Hr access as needed) FAIRLAWN, NJ Scope of Work (Check all that apply) Full Containment with Negative Pressure ≥ 3 sf or ≥ 3 lf **X**Renovation Mini-Enclosure ≥ 160 sf or > 260 ☐ Demolition П Glovebag Procedure Non-Exempted (\*) and Non-Friable Procedure Location of Asbestos-Containing Is Location Normally Used Description of Asbestos Centaining Material Amount Abatement Type Material (ACM) in Facility (13) Solely by Maint./Custodial (ACM) (i.e. thermal systems insulation, surfacing, (Specify SF Staff? (12) VAT, or other miscell.) Remove Repair Encap Enclose or LF) YES NO NA 299 Suite X VAT 4500 SF 299 Suite X TRANSITE 1100 SF X Name of Reg. Waste Hauler NJDEP Waste Hauler ID # Name of Registered Landfill Cubic Yards of Waste: 15 CY See Hauler Below #1 & 2 See Below G.R.O.W.S. North Landfill Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 Disposal Date City, State NJDEP # 12561 100 New Ford Mill 03/29/13 Hauler #2) Horizon Disposal Services, Inc., Trenton, NJ 08611 Rd. Morrisville, Pa NJ DEP# 22612 19067 215-736-1700 Completed by (Print or Type) Signature Date RAYMOND C. PEDALINO SENIOR PROJECT Raymand C. Pedalino March 14, 2013 MANAGER

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Shillington, PA 19607 Project Manager for Monit	oring	Firm [1	ele	phone	≥ Nun	nber	Tele	phone Num	nbe	r	Lice	nse l	umbe	er	
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Cranford, New Jersey 07016	3							rk, New Jersey	07424				
Project Manager for Monitoring Firm		75.1	Tele	phone	No	Telephone No		,	License No				
Kevin Burns				08-497		973-225-8			01104				
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Scope of Work (Check all that apply	')			100		- VI		The state of the	0.10				
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>	3.00	☑ Ren ☑ Den				☐ Mini- ☐ Glove	Enclo ebag	ainment with Nega osure Procedure opted (*) and Nor					
	er i er i		ocat		Fig.	6.000			1 4	A	bater	nent 7	Гуре
Location of Asbestos-Containing Material (A TO BE ABATED IN Facility (13)		Used Mair Custo	tena dial (12)	ely by nce/ Staff?		Description  estos Containing  e., thermal syste  surfacing, V  other miscell	Matems in /AT,	erial (ACM) nsulation, or	Amount (Specify SF or LF)	xemoval	Repair	Encapsulate	Enclosure
		Yes	No	N/A								-	
4th Floor File Room, Rotunda	Bldg [	]-[			Pipe In	sulation		and the second and a	10 LF				
	[				(O&M I	Repair-neg air	r, cri	ticals)		35. E			
	[	]							50 12 0 15				
					1		((5=)						
Name of Registered Waste Hauler	200		IN	JDEP \	Vaste	Cubic Yards o	f	Name of Regist	ered Landfill	77 14	1	1=	1
Lilich Corporation			H	auler II		Waste		G.R.O.W.S.					
City, State Woodland Park, New Jersey			-	18724		Disposal Date 03/28/13	1-1-1	City, State Morrisville,	Pennsylvar	nia			
Completed By (Print or Type)	Title				-	Signature		L			100		
Tatiana Kalenikova	Maria Maria	e Pre	side	nt	19-7			10 60 m	ckreen	Date		i seculto	200

# CK 623634

#### State of New Jersey

#### NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8: 60-7 and 12: 120-7)

Date of Notification (1)	1 5 / 1	3	Naı	me of Building Owner/Oper Beacon	ator (2) 2	013 MAR Z	20 pu d	- 15			
	pe of Notification			eet Address		1 Maria de la como		!	7		
[X] EPA				eacon Way		W 1 15 1	<u> </u>	13.	d.,		
[X] DOL [X	Initial Notification  ] Amended Notificatio	n .		y, State, Zip Code sey City, NJ 07306		-102	MSING"	WL			
	Amendment # 4					1 10 10 10 10					
	] Cancellation			ne of Contact		Te	elephone Numb	er			
[ ] DCA [ ]	] Emergency		11.170.07	n Wilk					_		,
Name of Facility Where Abatement is Tal Criterion Building Street Address 100 Clifton Avenue	king Place (3)		FACIL	ITY INFORMATION	Type of Facil	School (K- Subchapte Other (i.e.	12) r 8 (Other tha , private & com homes, etc.)				
City (5)	County (6)		Cour	nty Code (7)	Square Feet		of Floors	В	ldg. A	ge	
			(STA	TE USE ONLY)	Current Use	Prior if being o	lemolished)	_			
Jersey City	Hudson						remonstrea)				Œ,
Name of Monitoring Firm Hired by Build	ling Owner (8)	ASC	CM	Name of Abatem	ent Contractor (9	)					+
				J.R. Contracting	& Environmental	Consulting, Inc	ı.				
Street Address			100	Street Address							
10.550 12.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.			200	1141 Route 23							
				City, State, Zip							
Project Manager for Monitoring Firm		Talanhana	Number	Wayne NJ 07470		lr.	cense Number		-	-	_
Project Manager for Monitoring Firm		Telephone	Numbe	Telephone Numb	er		408				
Scheduled State Date (10)	Scheduled Con	npletion Date (	(11)	Name of OSHA N	Monitor	100	400				
	ear Month	9 2 5 Day	, L1	Enviro Vision Co	nsultants, Inc.						
Occupancy Status During Abatement (Ch  [X] Facility Closed/Vacate of Abatement  [] Abatement Performed  [X] Hours - Describe: [] Other - Describe:	d During Entire Period	cility		20-21 Wagaraw I City, State, Zip C Fairlawn NJ 074							
Scope of Work (Check all that apply) $[ \ ] \geq 3 \text{ sf or } \geq 3 \text{ lf}$ $[X] \geq 160 \text{ sf or } \geq 260 \text{ lf}$			olition ovation	[X [] [X [X	Mini-Enclosu Glovebag Pro			_			, 124 A 1 =
		Is	1 1					A	baten	E E	ype E
Location of Asbestos - Containing Material (ACM) TO BE ABATED in Facility (13)		Location Normally Used Solely by Maintenan Custodia Staff (12	, , , , , , ,	Description of Asbestos-Containi Material (ACM (i.e., thermal systet insulation, surfacin or other miscellar	) ms ng, VAT,	(5	mount Specify or LF)	R E M O V A L	R E P A I	N C A P S U L	N C L O S U R
WI STATE OF THE ST		Yes No	N/A					-	-	E	E
Please see attached.			-					_		_	
							- 15	-		$\dashv$	
	The second second second	7				-1	10.5				
Contract Balling Dignor of			10								
		-						-		-	-
Name of Registered Waste Hauler	Idia Ta	NJDEP Wa	No.	Cubic Yards of Waste		of Registered I	andfill				
J.R. Contracting & Environmental Consu City, State	nung, Inc.	1781	-	Disposal Date	G.R.O City, S			-			
Wayne NJ 07470	A try Nich By 381		1 -11			sville PA	1.3	1 4			8 8
Completed by (Print or Type)	Title	724	. 1 14.6	Signature		- %	Date			10	¥ .
Jerry Bijelonic	Project Manag	er		6		e fig.		3/15	/2013	-	

### NOTIFICATION OF ASBESTOS ABATEMENT Attachment

		Is	0013M	R 20 Pm -		Aba	ateme	nt Ty	pe
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	F C S	Used Solely By Mai Tenenc Custodi	/ n- e/ ial	Description of Asbestos-Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	R E M O V A L	R E P A I R	E N C A P S U L	E N C L O S U R
	Yes	No	N/A						E
Floor C - HVAC Room			X	Debris	225 SF	X		100	
Floor C - Throughout			X	Pine insulation	520 LF	X			
Floor C - Stairwell			X	Transite	120 SF	X	100000		1
Floor B - Dining Room			X	Radiator Pads	150 SF	X			
Floor B - Throughout			X	Pine Insulation	500 LF	X			
Floor A - Throughout			X	Pipe insulation	500 LF	X	10000		
Floor G - Throughout			X	Pine insulation	500 LF	X			
1st Floor - Throughout			X	Pine Insulation	500 LF	X			
1st Floor - Throughout			X	Duct Insulation	200 SF	X	Öt.		
2 <sup>nd</sup> Floor - Throughout			X	Pine Insulation	500 LF	X			
2 <sup>nd</sup> Floor - Throughout			X	Duct insulation	200 SF	X		100	
2 <sup>nd</sup> Floor - Throughout			X	VAT	520 SF	X			
3rd Floor - Throughout		V Chinese	X	Pine Insulation	500 LF	X			
3rd Floor - Throughout			X	Duct Insulation	200 SF	X			
3rd Floor - Throughout			X	VAT	2300 SF	X			
4th Floor - Throughout			X	Pipe Insulation	500 LF	X			
4th Floor - Throughout			X	Duct Insulation	200 SF	X			
5th Floor - Throughout			X	Pine Insulation	500 LF	X			
5th Floor - Throughout		27	X	Duct Insulation	200 SF	X			
6th Floor - Throughout			X	Pipe Insulation	500 LF	X			
6th Floor - Throughout			X	Duct Insulation	200 SF	X		- 1	
7th Floor - Throughout		10.00	X	Pipe insulation	500 LF	X			
7th Floor - Throughout			X	Duct Insulation	200 SF	X		1	
8th Floor - Throughout	1111		X	Pine Insulation	500 LF	X			
8th Floor - Throughout			X	Duct Insulation	200 SF	X		2,000	
9th Floor - Throughout			X	Pine Insulation	400 LF	X	WWW.		
9th Floor - Throughout			X	Duct Insulation	200 SF	X			
10th Floor - Throughout		35.01	X	Pipe Insulation	400 LF	X			
10th Floor - Throughout			X	Duct Insulation	200 SF	X			
11th Floor - Throughout			X	Pipe Insulation	400 LF	X			
11th Floor - Throughout			X	Duct Insulation	200 SF	X			
12th Floor - Throughout			X	Pipe Insulation	400 LF	X		ST. H.	
12th Floor - Throughout			X	Duct Insulation	200 SF	X			
13th Floor - Throughout			X	Pipe Insulation	400 LF	X	ii Viti		
13th Floor - Throughout			X	Duct Insulation	200 SF	X	-	100	
14th Floor - Throughout	grand.	W 14	X	Pipe Insulation	400 LF	X			
14th Floor - Throughout	0.119.11		X	Duct Insulation	200 SF	X			-
15th Floor - Throughout		70000	X	Pipe Insulation				100	*
15th Floor - Throughout	You think		X	Duct Insulation	300 SF	X	-		
16th Floor - Throughout			X	Pipe Insulation	200 SF	X			
16 <sup>th</sup> Floor – Throughout					300 LF	X			
17 <sup>th</sup> Floor – Throughout				Duct Insulation	200 SF	X	11,		
17 <sup>th</sup> Floor – Throughout		-11:		Pipe Insulation	300 LF	X	1		
17th Floor Throughout			X	Duct Insulation	200 SF	X	W		13.
17th Floor - Throughout				VAT	1000 SF	X		- The	
18th Floor – Elevator Room		-		Pipe Insulation	200 SF	X	Sec.		1.5
18th Floor - Elevator Room	1000			Duct Insulation	200 SF	X	- 01-56		
19th Floor - Throughout	1 D. C.			Pipe Insulation	200 LF	X	2	11 72	la III
20th Floor - Throughout			X	Pipe Insulation	200 LF	X			

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

(Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

Date of Notification (1)  March 14, 20	13			Name of Building Owner/C Ramirez Residence		. 0	19/ <sub>1</sub>	30	
Agencies Notified	Notificatio	n Type tial Notif	fication	Street Address 1011 Chimes Terrac	e	₹ <b>€</b>	100	1	ر بی
DCA x DOL	☐ Amend ☑ Emen		fication including	City, State, Zip Code Vineland, NJ 0836	50		X.	101	10
X DEP x DOH	justifi Canc	cation) elled		Name of Contact Mr. Ramirez		Telep	hone Nu	umber /	7
			FACILITY INF			To so	n - 22 - 23 - 25		
Name of Facility Where Abatemer Ramirez Residence	nt is Taking Place (3	1		Type of Facility (4) School (K-12)	V 40\				
Street Address 1011 Chimes Terrace			ti and the first term of	Subchapter 8 (other than  Other (i.e. private &  Sq. Feet: Unknown	commercial				ırs
	umberland		V Code (7) Use Only)	Current Use (prior if being					
Name of Monitoring Firm Hired by		ASCM 0007		Name of Contractor (9)	E . C . A				
EnviroVision Consult	ants inc.	0007		GREENWOOD ABAT	EMENT C	ONSU	JLTAN'	TS, INC	
Street Address 20-21 Wagaraw Road, B	Ida # 34A			Street Address					
20-21 Wagalaw Noau, D	nug # 54A			268 MAIN STREET	Arrest In		164 35 -		
City, State, Zip Code Fairlawn, NJ 07410				City State, ZipCode Butler, NJ 07405					
Project Manager for Monitoring Fi	rm Telephone			Telephone Number		Licen	se Numb	er	
Fred Larson	973-63	6-9145		973-492-0477		0084	40	- 4	
Scheduled Start Date (10) March 18, 2013	Scheduled March		on Date (11)	Name of OSHA Monitor		N in			
	1/01-1-1	·		EMSL inc. Street Address					
Occupancy Status During Abate Facility Closed/Vacated I Abatement Performed Ou Describe	Ouring Entire Period	of Abate		1056 Stelton Road City, State, Zip Code					
Other – Describe:				Piscataway, NJ 08	854				
Source of Work (Check all that ap	(vlgc		1		***				
		in tene	D-1		Full Conta		with Neg	ative Pre	ssure
≥ 3 sf or ≥ 3 lf □≥ 160 sf or ≥ 260			Renovation Demolition		Glovebag	Procedu			
									e Procedure
Location of Asbestos-Containing Material (ACM) in Facility (13)	Is Location Norm Solely by Maint./ Staff? (12)	Custodial	Description of As (ACM) (i.e. them VAT, or other mis	bestos Containing Material nal systems insulation, surfaci scell.)	ng, (Spec or LF	ify SF	N 101	ment Type e Repair	Encap Enclose
Basement	YES NO	NA X	VAT & Mast	lc	235	sf	X		
			Totalina (22)			LN	nf Dasi	stered La	odfill
Name of Reg. Waste Hauler See Hauler Below # 1 & 2	NJDEP W See Belo		er IID #	Cubic Yards of Waste:		Mea G.R.	dowfill I O.W.S erva Ent	Landfill	idilii
Hauler #1) Greenwood Ab NJ DEP # 1256 Hauler #2) Newark Carting Hauler #3) Tri State-Bronx	1 NY DEP # , Inc. – Newark, N	J 04509,	NJ DEP # 19551	07405	Disposal E March 1	ate	3	City, Stat Route 2, Bridgepo 304-842-	Box 68 rt, WVA 2784 erva Road
Completed by (Print or Type) Marin Graure	Title SENIOR MANAGE		СТ	Signature Marin Graure	THE ST	Date Ma			

973 - 492 - 0/33
State of New Jersey - Notification of Asbestos Abatement

		(Purs	suant to N.J.A.	.C. 8:60-7 and 12:120-7)		DO	L-	IN DAY	_
Date of Natification (1)		750		Name of Building Owners Ramirez Residenc					
March 14, 201 Agencies Netified  EPA DCA X DOL X DEP	Notification In Indiana Indian	itial Not ded Cert rgency ication)	ification (fication (Including	Simet Address 1011 Chimes Torra City, Sinte, Zip Code Vincland, NJ 0830 Name of Contact	ce	MA TA	Allen	4/2013	
x DOH	□ Cano	elled	EACH ITY I	Mr. Ramitez NFORMATION					_
Name of Facility Where Abelement Ramiroz Residence Sirael Address 1011 Chimes Terrace	in Tekina Placa (3	1	FACILITY I	Type of Facility (4)  School (K-12)  Subchapter 8 (other than  Other (i.e. private & Sq. Feet, Unknown	commercial (	building:	s, home	s elc)	
	nty (6) mberland		V Code (7) Use Only)	Current Use (prior if being			10Q. A	,,,,,,	
Name of Monitoring Firm Hirst by S Enviro Vision Consulta		ASCM 000		Name of Contractor (9)  GREENWOOD ABAT	EMENT C	ONSU	JLYAN	ITS, INC.	en.
Siresi Address 20-21 Wagaraw Road, Blu	dq # 34A			Street Address 268 MAIN STREET					
Cily State, Zip Coda Fairlawn, NJ 07410	No see al			Gly Stato. ZipCode Butler, NJ 07406		. T	1727-4		
Project Manager for Maniforing Film				Telephone Number		Licer	se Nun	<u>bor</u>	
Fred Larson	973-630			973-492-0477	The same	008	40		
Schodulod Sian Date (10) March 18, 2013	March 1	9 2013	en Date (11)	Name of OSHA Moretor EMSL Inc.					
Decupancy Siglun During Abatem Facility Closed/Vacated Du Abatement Performed Outs Describe Other – Describe	of Abele	iment rs -	1056 Stelton Road City State Zin Code Piscataway, NJ 08	854				•	
> 3 of or ≥ 3 I/  > 3 of or ≥ 3 I/  > 160 of or ≥ 280  acation of Asbostos-Containing Material (ACM) in Facility (13)	Is Location Normal Solely by Maint /6		Renovation Demolities Description of A		Mini-Endi	osure Procedu npted (' nt	one ) and P	galive Prosouro Non-Friebio Proco	
ADIEN: A (ACM) IN Facility (1-5)	Staff? (12) YES NO	NA	VAT or other m	niscall.)	or LF)		Bemer	e Repair Ences E	nclos
Basement		[8]	VAT & Mas	tic	235	5f	(8)		
Name of Rea Wasta Hauler See Hauler Below #1 & 2	NJOEP Wa See Belo	Mario Haulo	rID&	Cubic Yards of Waste:		Mea G.R.	dowfill O.W.S	intorod Landfill Landfill at. Ohlo	
Hauler #1) Greenwood Abat NJ DEP # 12661   Hauler #2) Newark Curting, It Hauler #3) Tri State-Bronx NY	NY DEP # 1c. – Newark, N.	J 04509,	NJ DEP # 1955		March 1	nto.		City, State Route 2 Bux 68 Bridgoport, WVA 304-842-2784 9000 Minerva Ro Waynesburg, OH	ocid
	Titlo			Signature		Date		4,2013	