

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

RECEIVED

021650 PAID

Date of Notification (1)
3/19/2019

Name of Building Owner/Operator (2)
LANXESS Solutions US Inc.

Agencies Notified
☒ EPA
☐ DEP
☒ DOL
☒ DOH
☐ DCA

Type Notification
☐ Initial
☒ Amended
Amendment # **2**
☐ Emergency (including justification)
☐ Cancellation

Street Address
1020 Kings George Post Road

City, State, Zip Code
Fords, NJ 08863

Name of Contact
Lisa Daniels

Telephone Number
732-306-4959

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
LANXESS Solutions US Inc.

Street Address
1020 Kings George Post Road

City (5)
Fords

County (6)
Middlesex

County Code (7)
(STATE USE ONLY)

Type of Facility (4)
☐ School (K-12)
☐ Subchapter 8 (Other than K-12)
☒ Other (i.e. private & commercial buildings, homes, etc.)

Square Feet
of Floors
Bldg. Age

Current Use (Prior if being demolished)
boiler house piping, processing plant & tanks

Name of Monitoring Firm Hired by Building Owner (8)
Emilcott Associates, Inc.

ASCM No.

Name of Abatement Contractor (9)
Stryker Demolition & Environmental Services, LLC

Street Address
190 Park Avenue

City, State, Zip Code
Morristown, NJ 07960

Street Address
992 Old Eagle School Road, STE 910

City, State, Zip Code
Wayne, PA 19087

Project Manager for Monitoring Firm
David Tomsey

Telephone No.
973-538-1110

Telephone No.
484-581-7428

License No.
01286

Start Date (10)
2/18/2019

Scheduled Completion Date (11)
5/3/2019

Name of OSHA Monitor
Stryker Demolition & Environmental Services, LLC

Occupancy Status During Abatement (Check Only One)
☒ Facility Closed/Vacated During Entire Period of Abatement
☐ Abatement Performed Outside of Normal Facility Hours
☒ Other - Describe: **boiler house**

Street Address
992 Old Eagle School Road, STE 910

City, State, Zip Code
Wayne, PA 19087

Scope of Work (Check All That Apply)
☐ ≥ 3 sf or ≥ 3 lf
☒ ≥ 160 sf or ≥ 260 lf
☐ Renovation
☒ Demolition
☒ Full Containment with Negative Pressure
☒ Mini-Enclosure
☒ Glovebag Procedure
☐ Non-Exempted (*) and Non-Friable Procedure

Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
#6 Fuel Line		X		Pipe Insulation (TSI)	197 LF	X			
Door Gasket on package boiler		X		Other Misc.	19 LF	X			
Ester 2 Area		X		Pipe Insulation (TSI)	400 LF	X			
Ester 2 Area		X		Surfacing	250 SF	X			

Name of Registered Waste Hauler
Horwith Trucks, Inc.

NJDEP Waste Hauler ID No.
SW-1998

Cubic Yards of Waste
35

Name of Registered Landfill
Cumberland County Landfill


City, State
Northampton, PA

Disposal Date
3/29/2019

City, State
Shippensburg, PA

Completed by
Mark Klotzbach

Title
Vice President

Signature


Date
3/19/2019

State of New Jersey - Notification of Asbestos Abatement

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

RECEIVED

OK 3219

Date of Notification (1) March 15, 2019		Name of Building Owner/Operator (2) Diocese of Paterson NJ		MAR 21 2019	
Agencies Notified X EPA DCA X DOL X DEP X DOH		Notification Type <input checked="" type="checkbox"/> Initial Notification Amended Certification X Emergency (including justification) <input type="checkbox"/> Cancelled		Street Address 777 Valley Road City, State, Zip Code Clifton, NJ 07013 Name of Contact Dennis Rodano Telephone Number 973-777-8818	
FACILITY INFORMATION					
Name of Facility Where Abatement is Taking Place (3) Diocese of Paterson NJ			Type of Facility (4) <input type="checkbox"/> School (K-12) <input type="checkbox"/> Subchapter 8 (other than K-12) <input checked="" type="checkbox"/> Other (i.e. private & commercial buildings, homes, etc.) Sq. Feet: # of Floors: 2 Bldg. Age: 50 years		
Street Address 777 Valley Road			Current Use (prior if being demolished):		
City (5) Clifton	County (6) Passaic	County Code (7) (State Use Only)			
Name of Monitoring Firm Hired by Bldg. Owner (8) EnviroVision Consultants inc.		ASCM No. 00079	Name of Contractor (9) GREENWOOD ABATEMENT CONSULTANTS, INC.		
Street Address 20-21 Wagaraw Road, Bldg # 35E			Street Address 511 MAIN STREET		
City, State, Zip Code Fairlawn, NJ 07410			City, State, Zip Code Butler, NJ 07405		
Project Manager for Monitoring Firm Fred Larson		Telephone Number 973-636-9145	Telephone Number 973-492-0477		License Number 00840
Scheduled Start Date (10) March 18, 2019		Scheduled Completion Date (11) March 19, 2019		Name of OSHA Monitor EMSL inc.	
Occupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe Other - Describe:			Street Address 1056 Stelton Road City, State, Zip Code Piscataway, NJ 08854		
Source of Work (Check all that apply) <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> ≥ 3 sf or ≥ 3 lf <input type="checkbox"/> ≥ 160 sf or ≥ 260 </div> <div> Renovation Demolition </div> <div> Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure X Non-Exempted (*) and Non-Friable Procedure Wrap & Cut </div> </div>					
Location of Asbestos-Containing Material (ACM) in Facility (13) Office Room Lower Level	Is Location Normally Used Solely by Maint./Custodial Staff? (12) YES NO NA <input checked="" type="checkbox"/> NA	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscell.) VAT	Amount (Specify SF or LF) 120 sf	Abatement Type Remove Repair Encap Enclose <input checked="" type="checkbox"/>	
Name of Reg. Waste Hauler See Hauler Below # 1 & 2		NJDEP Waste Hauler ID # See Below	Cubic Yards of Waste: 2	Name of Registered Landfill Meadowfill Landfill G.R.O.W.S	
Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 NJ DEP # 12561 NY DEP # Hauler #2) Newark Carting, Inc. - Newark, NJ 04509, NJ DEP # 19551			Disposal Date March 19, 2019	City, State Route 2, Box 68 Bridgeport, WVA 304-842-2784	
Completed by (Print or Type) Marin Graure		Title SENIOR PROJECT MANAGER	Signature <i>Marin Graure</i>		Date March 15, 2019

GAC # 2019-675

From: GREENWOOD ABATEMENT

19734920193

03/15/2019 19:08

#105 P.002/004

State of New Jersey - Notification of Asbestos Abatement

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

MAR 21 2019

Date of Notification (1) March 18, 2019		Name of Building Owner/Operator (2) Diocese of Paterson NJ	
Agencies Notified X EPA X DCA X DOL X DEP X DOH		Notification Type <input checked="" type="checkbox"/> Initial Notification Amended Certification X Emergency (Including Justification) <input type="checkbox"/> Cancelled	
Street Address 777 Valley Road		City, State, Zip Code Clifton, NJ 07013	
Name of Contact Dennis Rodano		Telephone Number 973-777-8818	
FACILITY INFORMATION			
Name of Facility Where Abatement is Taking Place (3) Diocese of Paterson NJ		Type of Facility (4) <input type="checkbox"/> School (K-12) <input type="checkbox"/> Subchapter S (other than K-12) <input checked="" type="checkbox"/> Other (i.e. private & commercial buildings, homes, etc.)	
Street Address 777 Valley Road		Sq. Feet: # of Floors: 2 Bldg. Age: 50 years	
City (5) Clifton	County (6) Passaic	County Code (7) (State Use Only)	
Name of Monitoring Firm Hired by Bldg. Owner (8) EnviroVision Consultants Inc.		Name of Contractor (9) GREENWOOD ABATEMENT CONSULTANTS, INC.	
Street Address 20-21 Wagaraw Road, Bldg # 35E		Street Address 611 MAIN STREET	
City, State, Zip Code Fairlawn, NJ 07410		City, State, Zip Code Butler, NJ 07408	
Project Manager for Monitoring Firm Fred Larson	Telephone Number 973-636-9145	Telephone Number 973-492-0477	Licenses Number 00840
Scheduled Start Date (10) March 18, 2019	Scheduled Completion Date (11) March 19, 2019		
Occupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe Other - Describe:		Name of OSHA Monitor EMSL Inc. Street Address 1056 Stetson Road City, State, Zip Code Piscataway, NJ 08854	
Source of Work (Check all that apply) <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> ≥ 3 sf or ≥ 3 W <input type="checkbox"/> ≥ 160 sf or ≥ 260 </div> <div> Renovation Demolition </div> <div> Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure X Non-Exempted (*) and Non-Friable Procedure Wrap & Cut </div> </div>			
Location of Asbestos-Containing Material (ACM) in Facility (13) Office Room Lower Level	Is Location Normally Used Solely by Maint./Custodial Staff? (12) YES NO NA	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscell.) VAT	Amount (Specify SF or LF) 120 sf
Abatement Type Remove, Seal, Enclose, Encapsulate		<input checked="" type="checkbox"/>	
Name of Reg. Waste Hauler See Hauler Below # 1 & 2	NIDEP Waste Hauler ID # See Below	Cubic Yards of Waste: 2	Name of Registered Landfill Meadowfill Landfill G.R.O.W.S.
Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 NJ DEP # 12561 NY DEP #		Disposal Date March 18, 2019	City, State Route 2, Box 68 Bridgeport, WVA 304-842-2784
Hauler #2) Newark Carting, Inc. - Newark, NJ 04509, NJ DEP # 19551			
Completed by (Print or Type) Marin Graure	Title SENIOR PROJECT MANAGER	Signature Marin Graure	Date March 16, 2019

GAC # 2019-675

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

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MAR 21 2019

Date of Notification (1) 03/18/2019		Name of Building Owner/Operator (2) Isabel DeJesus							
Agencies Notified	Type Notification	Street Address [REDACTED]							
<input type="checkbox"/> EPA <input type="checkbox"/> DEP <input checked="" type="checkbox"/> DOL <input checked="" type="checkbox"/> DOH <input type="checkbox"/> DCA	<input checked="" type="checkbox"/> Initial <input type="checkbox"/> Amended Amendment # _____ <input type="checkbox"/> Emergency (including justification) <input type="checkbox"/> Cancellation	City, State, Zip Code Metuchen NJ 08840							
		Name of Contact Angie	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Private House		Type of Facility (4)							
Street Address [REDACTED]		<input type="checkbox"/> School (K-12) <input type="checkbox"/> Subchapter 8 (Other than K-12) <input checked="" type="checkbox"/> Other (i.e. private & commercial buildings, homes, etc.)							
City (5) Metuchen		Square Feet	# of Floors						
County (6) Middlesex		County Code (7) (STATE USE ONLY) _____	Bldg. Age						
Name of Monitoring Firm Hired by Building Owner (8) Competent Supervisor		ASCM No.	Name of Abatement Contractor (9) Academy Construction Inc						
Street Address		Street Address 205 Route 46 Suite 14							
City, State, Zip Code		City, State, Zip Code Totowa NJ 07512							
Project Manager for Monitoring Firm		Telephone No.	License No.						
		973 832 4244	01379						
Start Date (10) 03/28/2019	Scheduled Completion Date (11) 04/11/2019	Name of OSHA Monitor Same as above							
Occupancy Status During Abatement (Check Only One)		Street Address							
<input checked="" type="checkbox"/> Facility Closed/Vacated During Entire Period of Abatement <input type="checkbox"/> Abatement Performed Outside of Normal Facility Hours <input type="checkbox"/> Other - Describe: _____		City, State, Zip Code							
Scope of Work (Check All That Apply)									
<input type="checkbox"/> ≥3 sf or ≥3 lf <input checked="" type="checkbox"/> ≥160 sf or ≥260 lf									
<input checked="" type="checkbox"/> Renovation <input type="checkbox"/> Demolition									
<input type="checkbox"/> Full Containment with Negative Pressure <input type="checkbox"/> Mini-Enclosure <input type="checkbox"/> Glovebag Procedure <input checked="" type="checkbox"/> Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Outside Sidding			x	Asbestos Sidding	3,800 SF	x			
Name of Registered Waste Hauler Academy Construction Inc		NJDEP Waste Hauler ID No. 0034422	Cubic Yards of Waste 3	Name of Registered Landfill Fairless Landfill					
City, State Totowa NJ			Disposal Date TBD	City, State Morrisville, PA					
Completed by John Geleski		Title Supervisor	Signature 	Date 03/18/2019					

CK#5276

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State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:126)

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MAR 21 2019

Date of Notification (1) 3/19/19		Name of Building Owner/Operator (2) John Palsi	
Agencies Notified <input checked="" type="checkbox"/> EPA <input checked="" type="checkbox"/> DEP <input checked="" type="checkbox"/> DOL <input checked="" type="checkbox"/> DOH <input type="checkbox"/> DCA		Type Notification <input checked="" type="checkbox"/> Initial <input type="checkbox"/> Amended <input type="checkbox"/> Amendment # <input type="checkbox"/> Emergency (including justification) <input type="checkbox"/> Cancellation	
Street Address [REDACTED]		City, State, Zip Code Pt. Pleasant, New Jersey	
Name of Contact John		Telephone Number	
FACILITY INFORMATION			
Name of Facility Where Abatement is Taking Place (3) Palsi Residence		Type of Facility (4) <input type="checkbox"/> School (K-12) <input type="checkbox"/> Subchapter 8 (Other than K-12) <input checked="" type="checkbox"/> Other (i.e. private & commercial buildings, homes, etc.)	
Street Address [REDACTED]		Square Feet 1200	
City (5) Pt. Pleasant (Boro)		# of Floors 1	
County (6) Ocean		Bldg. Age 55+	
County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished) residence	
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	
Street Address		Name of Abatement Contractor (9) Ace Insulation Co. Inc.	
City, State, Zip Code		Street Address 95 Montross Rd	
Project Manager for Monitoring Firm		City, State, Zip Code Caldwells Neck, NJ 07722	
Telephone No.		Telephone No. 732 244 7577	
Start Date (10) 3/20/19		Scheduled Completion Date (11) 4/2/19	
Occupancy Status During Abatement (Check Only One) <input checked="" type="checkbox"/> Facility Closed/Vacated During Entire Period of Abatement <input type="checkbox"/> Abatement Performed Outside of Normal Facility Hours Other - Describe: 7am-7pm		License No. 00029	
Scope of Work (Check All That Apply) <input checked="" type="checkbox"/> ≥3 sf or ≥23 lf <input checked="" type="checkbox"/> ≥160 sf or ≥260 lf <input type="checkbox"/> Renovation <input type="checkbox"/> Demolition <input type="checkbox"/> Full Containment with Negative Pressure <input type="checkbox"/> Mini-Enclosure <input type="checkbox"/> Glovebag Procedure <input checked="" type="checkbox"/> Non-Exempted (*) and Non-Friable Procedure		Name of OSHA Monitor [REDACTED]	
Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13) interior		Is Location Normally Used Solely by Maintenance/Custodial Staff? (12) Yes No N/A	
Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) floor tile		Amount (Specify SF or LF) 800 sf	
Abatement Type Removal Repair Encapsulate Enclosure		Abatement Type Removal Repair Encapsulate Enclosure	
Name of Registered Waste Hauler Ace Insulation Co. Inc.		NJDEP Waste Hauler ID No.	
City, State Caldwells Neck, New Jersey		Cubic Yards of Waste 4	
Disposal Date 4/2/19		Name of Registered Landfill Chrin	
Completed by Bree McGee		Title Secretary/Treasurer	
Signature [Signature]		Date 3/19/19	

IN CONJUNCTION WITH ANNUAL
NOTIFICATION CHECK 1768

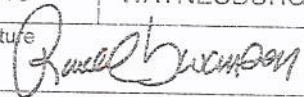
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

CHECK# 1770

PAID

RECEIVED

MAR 21 2019

Date of Notification (1) 03/14/2019		Name of Building Owner/Operator (2) MAPLEWOOD III LLC							
Agencies Notified	Type Notification	Street Address 2000 MAPLEWOOD DRIVE							
<input type="checkbox"/> EPA <input checked="" type="checkbox"/> DEP <input checked="" type="checkbox"/> DOL	<input checked="" type="checkbox"/> Initial <input type="checkbox"/> Amended <input type="checkbox"/> Amendment # <input type="checkbox"/> Emergency (including justification) <input type="checkbox"/> Cancellation	City, State, Zip Code MAPLE SHADE NJ 08052							
<input checked="" type="checkbox"/> DOH <input type="checkbox"/> DCA		Name of Contact LAURIE BALLARD	Telephone Number 856-482-6680						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) PARK CROSSING APARTMENT HOMES		Type of Facility (4) <input type="checkbox"/> School (K-12) <input type="checkbox"/> Subchapter 8 (Other than K-12) <input checked="" type="checkbox"/> Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 2000 MAPLEWOOD DRIVE		Square Feet 1000	# of Floors 1						
City (5) MAPLE SHADE		Bldg. Age 50+							
County (6) CAMDEN	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) RESIDENTIAL APARTMENTS							
Name of Monitoring Firm Hired by Building Owner (8) ACER ASSOC.		ASCM No.	Name of Abatement Contractor (9) ASSURED ENVIRONMENTAL SERVICES INC.						
Street Address 1012 INDUSTRIAL DRIVE		Street Address 570 CLEMS RUN							
City, State, Zip Code WEST BERLIN NJ 08091		City, State, Zip Code MULLICA HILL NJ 08062							
Project Manager for Monitoring Firm MATT DEPALMA		Telephone No. 856-809-1202	Telephone No. 610-304-4676						
Start Date (10) 03/18/2019		Scheduled Completion Date (11) 03/19/2019	License No. 01145						
Occupancy Status During Abatement (Check Only One) <input type="checkbox"/> Facility Closed/Vacated During Entire Period of Abatement <input type="checkbox"/> Abatement Performed Outside of Normal Facility Hours <input checked="" type="checkbox"/> Other - Describe: UNIT VACANT DURING ABATEMENT		Name of OSHA Monitor EMSL							
		Street Address 200 RT. 130 NORTH							
		City, State, Zip Code CINNAMINSON NJ 08077							
Scope of Work (Check All That Apply)									
<input checked="" type="checkbox"/> ≥3 sf or ≥3 lf <input type="checkbox"/> ≥160 sf or ≥260 lf		<input checked="" type="checkbox"/> Renovation <input type="checkbox"/> Demolition	<input checked="" type="checkbox"/> Full Containment with Negative Pressure <input type="checkbox"/> Mini-Enclosure <input type="checkbox"/> Glovebag Procedure <input type="checkbox"/> Non-Exempted (*) and Non-Friable Procedure						
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
1 PEACHTREE LANE-UNIT D			X	JOINT COMPOUND	96 SF	X			
Name of Registered Waste Hauler ASSURED ENVIRONMENTAL SERVICES		NJDEP Waste Hauler ID No. 0034895	Cubic Yards of Waste 6	Name of Registered Landfill MINERVA LANDFILL					
City, State MULLICA HILL NJ		Disposal Date 03/20/2019		City, State WAYNESBURG, OH					
Completed by RON SWANSON		Title GENERAL MANAGER	Signature 	Date 03/14/2019					

check # 3222

PAID

State of New Jersey - Notification of Asbestos Abatement

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

GAC Project # 060-18

Date of Notification (1) March 15, 2019		Name of Building Owner/Operator (2) RUTGERS, THE STATE UNIVERSITY OF NJ	
Agencies Notified <input type="checkbox"/> EPA <input type="checkbox"/> DCA <input checked="" type="checkbox"/> DOL <input checked="" type="checkbox"/> DEP- No Longer REQUIRED <input checked="" type="checkbox"/> DOH	Notification Type <input type="checkbox"/> Initial Notification <input checked="" type="checkbox"/> Amended Notification # 1 – New Start & Completion dates <input type="checkbox"/> Emergency (including justification) <input type="checkbox"/> Cancelled	Street Address ENVIRONMENTAL HEALTH & SAFETY DEPT. (REHS) 74 STREET 1603, BLDG 4116, LIVINGSTON CAMPUS	
		City, State, Zip Code PISCATAWAY, NJ 08854	
		Name of Contact MICHAEL F. SMITH, ENV. HEALTH & SAFETY	Telephone Number 848-445-2550
FACILITY INFORMATION			
Name of Facility Where Abatement is Taking Place (3) MEDICAL SCIENCE BLDG, BLDG# 7257		Type of Facility (4) <input type="checkbox"/> School (K-12) <input type="checkbox"/> Subchapter 8 (other than K-12) <input checked="" type="checkbox"/> Other (i.e. private & commercial buildings, homes, etc.)	
Street Address RBHS NEWARK CAMPUS		Sq. Feet: N/A # of Floors: 8 Bldg. Age: 60+ years	
City (5) NEWARK	County (6) ESSEX	County Code (7) (State Use Only)	Current Use (prior if being demolished): ACADEMIC
Name of Monitoring Firm Hired by Bldg. Owner (8) ATC		Name of Contractor (9) GREENWOOD ABATEMENT CONSULTANTS, INC.	
Street Address 3 TERRI LANE		Street Address 511 MAIN STREET	
City, State, Zip Code BURLINGTON, NJ 08016		City, State, Zip Code BUTLER, NJ 07405	
Project Manager for Monitoring Firm BRIAN R. KEARNEY	Telephone Number 609-386-8800	Telephone Number 973-492-0477	License Number 00840
Scheduled Start Date (10) 03/29/2019	Scheduled Completion Date (11) 04/01/19	Name of OSHA Monitor ENVIROVISION, INC.	
Occupancy Status During Abatement (Check only one) <input type="checkbox"/> Facility Closed/Vacated During Entire Period of Abatement <input type="checkbox"/> Abatement Performed Outside of Normal Facility Hours - Describe: <input checked="" type="checkbox"/> Other- Describe: Schedule: 5PM – 5AM (24 HOURS & WEEKENDS AS NEEDED)		Street Address 20-21 WARGARAW ROAD, BLDG# 35E	
		City, State, Zip Code FAIRLAWN, NJ 07410	
Scope of Work (Check all that apply)			
<input type="checkbox"/> ≥ 3 sf or >3 lf <input checked="" type="checkbox"/> ≥ 160 sf or ≥ 260 lf		<input checked="" type="checkbox"/> Renovation <input type="checkbox"/> Demolition	
		<input type="checkbox"/> Full Containment with Negative Pressure <input type="checkbox"/> Mini-Enclosure <input type="checkbox"/> Glove bag Procedure / Wrap & Cut <input checked="" type="checkbox"/> Non-Exempted (*) and Non-Friable Procedure	
Location of Asbestos-Containing Material (ACM) in Facility (13) G528, G530, G532	Is Location Normally Used Solely by Maint./Custodial Staff? (12) YES NO NA <input checked="" type="checkbox"/>	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscell.) VAT	Amount (Specify SF or LF) 400 SF
		Abatement Type Remove Repair Encap Enclose <input checked="" type="checkbox"/>	
Name of Reg. Waste Hauler See Hauler Below #1 & 2		NJDEP Waste Hauler ID # See Below	Cubic Yards of Waste: 10 CY
Name of Registered Landfill G.R.O.W.S. North Landfill			
Hauler #1) Greenwood Abatement Consultants, Inc. – Butler, NJ 07405 NJDEP # 12561 Hauler #2) Newark Carting, Inc., Newark, NJ 04509 NJ DEP # 4509		Disposal Date 04/1/2019	City, State 100 New Ford Mill Rd. Morrisville, Pa 19067 215-736-1700
Completed by (Print or Type) RAYMOND C. PEDALINO	Title SENIOR PROJECT MANAGER	Signature <i>Raymond C. Pedalino</i>	Date March 15, 2019

Copies To: Rutgers, REHS, Attn: Mike Smith and ATC, Attn: Brian Kearney

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

RECEIVED
MAR 21 2019

GAC Project # 060-18

Date of Notification (1) March 5, 2019		Name of Building Owner/Operator (2) RUTGERS, THE STATE UNIVERSITY OF NJ	
Agencies Notified <input type="checkbox"/> EPA <input type="checkbox"/> DCA <input checked="" type="checkbox"/> DOL <input checked="" type="checkbox"/> DEP- No Longer REQUIRED <input checked="" type="checkbox"/> DOH	Notification Type <input checked="" type="checkbox"/> Initial Notification <input type="checkbox"/> Amended Notification # <input type="checkbox"/> Emergency (including justification) <input type="checkbox"/> Cancelled		Street Address ENVIRONMENTAL HEALTH & SAFETY DEPT. (REHS) 74 STREET 1603, BLDG 4116, LIVINGSTON CAMPUS
		City, State, Zip Code PISCATAWAY, NJ 08854	
		Name of Contact MICHAEL F. SMITH, ENV. HEALTH & SAFETY	Telephone Number 848-445-2550
FACILITY INFORMATION			
Name of Facility Where Abatement is Taking Place (3) MEDICAL SCIENCE BLDG, BLDG# 7257		Type of Facility (4) <input type="checkbox"/> School (K-12) <input type="checkbox"/> Subchapter 8 (other than K-12) <input checked="" type="checkbox"/> Other (i.e. private & commercial buildings, homes, etc.)	
Street Address RBHS NEWARK CAMPUS		Sq. Feet: N/A # of Floors: 8 Bldg. Age: 60+ years	
City (5) NEWARK	County (6) ESSEX	County Code (7) (State Use Only)	Current Use (prior if being demolished): ACADEMIC
Name of Monitoring Firm Hired by Bldg. Owner (8) ATC		ASCM No. 00098	Name of Contractor (9) GREENWOOD ABATEMENT CONSULTANTS, INC.
Street Address 3 TERRI LANE		Street Address 511 MAIN STREET	
City, State, Zip Code BURLINGTON, NJ 08016		City, State, Zip Code BUTLER, NJ 07405	
Project Manager for Monitoring Firm BRIAN R. KEARNEY		Telephone Number 609-386-8800	License Number 00840
Scheduled Start Date (10) 03/15/2019	Scheduled Completion Date (11) 03/18/19		Name of OSHA Monitor ENVIROVISION, INC.
Occupancy Status During Abatement (Check only one) <input type="checkbox"/> Facility Closed/Vacated During Entire Period of Abatement <input type="checkbox"/> Abatement Performed Outside of Normal Facility Hours - Describe: <input checked="" type="checkbox"/> Other- Describe: Schedule: 5PM - 5AM (24 HOURS & WEEKENDS AS NEEDED)		Street Address 20-21 WARGARAW ROAD, BLDG# 35E	
		City, State, Zip Code FAIRLAWN, NJ 07410	
Scope of Work (Check all that apply)			
<input type="checkbox"/> > 3 sf or >3 lf <input checked="" type="checkbox"/> > 160 sf or > 260 lf		<input checked="" type="checkbox"/> Renovation <input type="checkbox"/> Demolition	
		<input type="checkbox"/> Full Containment with Negative Pressure <input type="checkbox"/> Mini-Enclosure <input type="checkbox"/> Glove bag Procedure / Wrap & Cut <input checked="" type="checkbox"/> Non-Exempted (*) and Non-Friable Procedure	
Location of Asbestos-Containing Material (ACM) in Facility (13) G528, G530, G532	Is Location Normally Used Solely by Maint./Custodial Staff? (12) YES NO NA <input checked="" type="checkbox"/>	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscell.) VAT	Amount (Specify SF or LF) 400 SF
			Abatement Type Remove Repair Encap Enclose <input checked="" type="checkbox"/>
Name of Reg. Waste Hauler See Hauler Below #1 & 2		NJDEP Waste Hauler ID # See Below	Cubic Yards of Waste: 10 CY
Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 NJDEP # 12561 Hauler #2) Newark Carting, Inc., Newark, NJ 04509 NJ DEP # 4509		Disposal Date 03/18/2019	Name of Registered Landfill G.R.O.W.S. North Landfill
Completed by (Print or Type) RAYMOND C. PEDALINO		Title SENIOR PROJECT MANAGER	Signature <i>Raymond C. Pedalino</i>
		Date March 5, 2019	

Copies To: Rutgers, REHS, Attn: Mike Smith and ATC, Attn: Brian Kearney

Mar.14.2019 06:33 AM A. Mac Contracting

201262032

E C F I V E

DOL-10 DAY

Check # 1221

OK 1223 PAID

**STATE OF NEW JERSEY
NOTIFICATION OF ABSECTOR AGREEMENT
(Pursuant to N.J.A.C. 2:25 and 12:102)**

Date of Notification (1)	3/14/19	Name of Building Owner/Operator (2) ROCK RIVER CONSTRUCTION							
Agency Address <input type="checkbox"/> EPA COP DOL <input type="checkbox"/> DCH DOA	Type of Facility <input type="checkbox"/> Initial Advanced Amendment & Emergency (including justification) Consolidation	Facility Address 220 HARTWORN DRIVE City, State, Zip Code SHORT HILLS NJ 07078	Telephone Number						
Name of Facility Where Abatement is Taking Place (3) HOUSE		Type of Facility (4) <input type="checkbox"/> School K-12 <input type="checkbox"/> Subchapter S (Other than K-12) <input type="checkbox"/> Other (i.e., private & commercial buildings, homes, etc.)							
Street Address [REDACTED]		Square Feet 1650	# of Floors 2	Bldg. Age 62					
City (5) SHORT HILLS	County (6) ESSEX	County Code (7) (IN STATE USE ONLY)	Current Use (Prior if being demolished) RES						
Name of Monitoring Firm Hired by Building Owner (8)	ASOM No.	Name of Abatement Contractor (9) A. Man Contracting Inc.							
Street Address		Street Address 185 Vreeland Ave.							
City, State, Zip Code		City, State, Zip Code Midland Park, N.J.							
Project Manager for Monitoring Firm	Telephone No.	Telephone No. 201-262-5441	License No. 00155						
Start Date (10) 3/14/19	Scheduled Completion Date (11) 3/21/19	Name of OSHA Monitor Omega Environmental Services Inc.							
Occupancy Status During Abatement (Check Only One) <input checked="" type="checkbox"/> Facility Closed/Vacated During Entire Period of Abatement <input type="checkbox"/> Abatement Performed Outside of Normal Facility Hours Other - Describe:		Street Address 280 Huyler Street City, State, Zip Code Hackensack, N.J. 07606							
Scope of Work (Check All That Apply) <input checked="" type="checkbox"/> AS or or AS II MSO or MSO II <input type="checkbox"/> Renovation Demolition <input type="checkbox"/> Full Containment with Negative Pressure Mini-Enclosure Cleaning Procedure Non-Sparked C) and Non-Fabric Protection									
Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (12)	Is Location Normally Used Only by Maintenance/Custodial Staff? (13)			Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Complete	Enclosure
Basement Floor			X	Pipe	60 LF	X			
Name of Registered Waste Handler Newark Carting, Inc.		HACMP Waste Handler ID No. 04608	Cubic Yards of Waste 1	Name of Registered Landfill Grand Central Sanitary Landfill					
City, State Newark, N.J. 07105		Disposal Date 3/14/19	City, State Pen Argyl, PA 06072						
Completed by R. McDonald		Title President	Signature [Signature]				Date 3/14/19		

A027-01 (5-02-00)

* Do not use this form for marketing currently completed activities.

State of New Jersey - Notification of Asbestos Abatement

RECEIVED

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

MAR 21 2019

NO CK

Date of Notification (1) March 14, 2019			Name of Building Owner/Operator (2) The Valley Hospital		
Agencies Notified <input checked="" type="checkbox"/> EPA <input type="checkbox"/> DCA x DOL <input checked="" type="checkbox"/> DEP x DOH		Notification Type Initial Notification x Amendment # 2 Emergency (including justification)		Street Address 223 North Van Dien Avenue City, State, Zip Code Ridgewood, NJ 07450-2736	
				Name of Contact William Stasiak Telephone Number 201-447-8141	
FACILITY INFORMATION					
Name of Facility Where Abatement is Taking Place (3) The Valley Hospital			Type of Facility (4) <input type="checkbox"/> School (K-12) <input type="checkbox"/> Subchapter 8 (other than K-12) <input checked="" type="checkbox"/> Other (i.e. private & commercial buildings, homes, etc.) Sq. Feet: Unknown # of Floors: 4 Bldg. Age: 50+ years		
Street Address 223 North Van Dien Avenue			Current Use (prior if being demolished): Hospital		
City (5) Ridgewood	County (6) Bergen	County Code (7) (State Use Only)			
Name of Monitoring Firm Hired by Bldg. Owner (8) Colden Corporation		ASCM No.	Name of Contractor (9) GREENWOOD ABATEMENT CONSULTANTS, INC.		
Street Address 28 Washington Street			Street Address 511 MAIN STREET		
City, State, Zip Code Ballston Spa, NY 12020			City, State, Zip Code Butler, NJ 07405		
Project Manager for Monitoring Firm Jim Miades		Telephone Number 347.435.3561	Telephone Number 973-492-0477		License Number 00840
Scheduled Start Date (10) March 15, 2019		Scheduled Completion Date (11) March 26, 2019		Name of OSHA Monitor EMSL inc.	
Occupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe Other - Describe:			Street Address 1056 Stelton Road City, State, Zip Code Piscataway, NJ 08854		
Source of Work (Check all that apply)					
<input type="checkbox"/> ≥ 3 sf or ≥ 3 lf <input checked="" type="checkbox"/> ≥ 160 sf or ≥ 260		Renovation Demolition		x Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure	
Location of Asbestos-Containing Material (ACM) in Facility (13)	Is Location Normally Used Solely by Maint./Custodial Staff? (12) YES NO NA	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscell.)	Amount (Specify SF or LF)	Abatement Type Remove Repair Encap Enclose	
Phillips/Bergen Corridor Ramp	<input checked="" type="checkbox"/>	VAT & Mastic	140 sf	<input checked="" type="checkbox"/>	
Kitchen	<input checked="" type="checkbox"/>	HVAC	200 sf		<input checked="" type="checkbox"/>
Name of Reg. Waste Hauler See Hauler Below # 1 & 2		NJDEP Waste Hauler ID # See Below	Cubic Yards of Waste: 5	Name of Registered Landfill Meadowfill Landfill/GROWS	
Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 NJ DEP # 12561			Disposal Date March 26, 2019	City, State Route 2, Box 68 Bridgeport, WVA 304-842-2784	
Hauler #2) Newark Carting, Inc. - Newark, NJ 04509, NJ DEP # 19551					
Completed by (Print or Type) Marin Graure	Title SENIOR PROJECT MANAGER	Signature <i>Marin Graure</i>	Date March 14, 2019		

GAC # 2019-673 Please Note: This amended notification includes the change in start date for the Phillips/Bergen Corridor abatement. This work will start on March 15th 2019 & The Kitchen abatement will start on March 22, 2019- Amendment # 2 - This is the correct address for the Phillips Wing Ramp & Kitchen project.

State of New Jersey - Notification of Asbestos Abatement

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

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<u>Date of Notification (1)</u> March 4, 2019		<u>Name of Building Owner/Operator (2)</u> The Valley Hospital	
<u>Agencies Notified</u> <input checked="" type="checkbox"/> EPA <input type="checkbox"/> DCA <input type="checkbox"/> x DOL <input checked="" type="checkbox"/> DEP <input type="checkbox"/> x DOH	<u>Notification Type</u> Initial Notification <input checked="" type="checkbox"/> Amendment # 1 Emergency (including justification)	<u>Street Address</u> 223 North Van Dien Avenue <u>City, State, Zip Code</u> Ridgewood, NJ 07450-2736 <u>Name of Contact</u> William Stasiak	
		<u>Telephone Number</u> 201-447-8141	
FACILITY INFORMATION			
<u>Name of Facility Where Abatement is Taking Place (3)</u> The Valley Hospital Warehouse		<u>Type of Facility (4)</u> <input type="checkbox"/> School (K-12) <input type="checkbox"/> Subchapter 8 (other than K-12) <input checked="" type="checkbox"/> Other (i.e. private & commercial buildings, homes, etc.) <u>Sq. Feet:</u> Unknown <u># of Floors:</u> 4 <u>Bldg. Age:</u> 50+ years	
<u>Street Address</u> 599 Valley Health Plaza		<u>Current Use (prior if being demolished):</u> Hospital	
<u>City (5)</u> Paramus	<u>County (6)</u> Bergen	<u>County Code (7)</u> (State Use Only)	
<u>Name of Monitoring Firm Hired by Bldg. Owner (8)</u> Colden Corporation		<u>ASCM No.</u>	
<u>Street Address</u> 28 Washington Street		<u>Name of Contractor (9)</u> GREENWOOD ABATEMENT CONSULTANTS, INC.	
<u>City, State, Zip Code</u> Ballston Spa, NY 12020		<u>Street Address</u> 511 MAIN STREET	
<u>Project Manager for Monitoring Firm</u> Jim Miades		<u>City, State, Zip Code</u> Butler, NJ 07405	
<u>Telephone Number</u> 347.435.3561		<u>Telephone Number</u> 973-492-0477	
<u>Scheduled Start Date (10)</u> March 15, 2019		<u>License Number</u> 00840	
<u>Scheduled Completion Date (11)</u> March 26, 2019		<u>Name of OSHA Monitor</u> EMSL inc.	
<u>Occupancy Status During Abatement (Check only one)</u> <input type="checkbox"/> Facility Closed/Vacated During Entire Period of Abatement <input type="checkbox"/> Abatement Performed Outside of Normal Facility Hours - Describe <input type="checkbox"/> Other - Describe:		<u>Street Address</u> 1056 Stelton Road	
		<u>City, State, Zip Code</u> Piscataway, NJ 08854	
<u>Source of Work (Check all that apply)</u> <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> ≥ 3 sf or ≥ 3 lf <input checked="" type="checkbox"/> ≥ 160 sf or ≥ 260 </div> <div> Renovation Demolition </div> <div> <input checked="" type="checkbox"/> Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure </div> </div>			
<u>Location of Asbestos-Containing Material (ACM) in Facility (13)</u>	<u>Is Location Normally Used Solely by Maint./Custodial Staff? (12)</u> YES NO NA	<u>Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscell.)</u>	<u>Amount (Specify SF or LF)</u>
Philips/Bergen Corridor Ramp	<input checked="" type="checkbox"/>	VAT & Mastic	140 sf
Kitchen	<input checked="" type="checkbox"/>	HVAC	200 sf
<u>Abatement Type</u> <input checked="" type="checkbox"/> Remove <input type="checkbox"/> Repair <input type="checkbox"/> Encap <input type="checkbox"/> Enclose			
<u>Name of Reg. Waste Hauler</u> See Hauler Below # 1 & 2		<u>NJDEP Waste Hauler ID #</u> See Below	
<u>Cubic Yards of Waste:</u> 5		<u>Name of Registered Landfill</u> Meadowfill Landfill/GROWS	
<u>Hauler #1)</u> Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 NJ DEP # 12561		<u>Disposal Date</u> March 26, 2019	
<u>Hauler #2)</u> Newark Carting, Inc. - Newark, NJ 04509, NJ DEP # 19551		<u>City, State</u> Route 2, Box 68 Bridgeport, WVA 304-842-2784	
<u>Completed by (Print or Type)</u> Marin Graure	<u>Title</u> SENIOR PROJECT MANAGER	<u>Signature</u> <i>Marin Graure</i>	<u>Date</u> March 4, 2019

GAC # 2019-673 Please Note: This amended notification includes the change in start date for the Phillips/Bergen Corridor abatement. This work will start on March 15th 2019 & The Kitchen abatement will start on March 22, 2019

State of New Jersey - Notification of Asbestos Abatement

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

MAR 21 2019

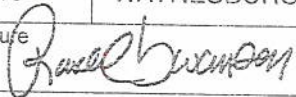
OK 3221 PAID

Date of Notification (1) March 15, 2019		Name of Building Owner/Operator (2) Lukoil North America, LLC	
Agencies Notified XEPA DCA x DOL X DEP x DOH	Notification Type <input checked="" type="checkbox"/> Initial Notification <input type="checkbox"/> Amended Certification <input type="checkbox"/> Emergency (including justification) <input type="checkbox"/> Cancelled	Street Address 302 Harper Drive, Suite 303 City, State, Zip Code Moorestown, NJ 08057 Name of Contact David Prusak Telephone Number 856.722.6449	
FACILITY INFORMATION			
Name of Facility Where Abatement is Taking Place (3) Former Lukoil Station		Type of Facility (4) <input type="checkbox"/> School (K-12) <input type="checkbox"/> Subchapter 8 (other than K-12) <input checked="" type="checkbox"/> Other (i.e. private & commercial buildings, homes, etc.) Sq. Feet: Unknown # of Floors: Bldg. Age: years	
Street Address 2195 State Highway 4		Current Use (prior if being demolished):	
City (5) Fort Lee	County (6) Bergen	County Code (7) (State Use Only)	
Name of Monitoring Firm Hired by Bldg. Owner (8) EnviroVision Consultants inc.		Name of Contractor (9) GREENWOOD ABATEMENT CONSULTANTS, INC.	
Street Address 20-21 Wagaraw Road, Bldg # 35E		Street Address 511 MAIN STREET	
City, State, Zip Code Fairlawn, NJ 07410		City, State, Zip Code Butler, NJ 07405	
Project Manager for Monitoring Firm Fred Larson	Telephone Number 973-636-9145	Telephone Number 973-492-0477	License Number 00840
Scheduled Start Date (10) March 25, 2019	Scheduled Completion Date (11) March 26, 2019	Name of OSHA Monitor EMSL inc.	
Occupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe Other - Describe: Vacant		Street Address 1056 Stelton Road City, State, Zip Code Piscataway, NJ 08854	
Source of Work (Check all that apply)			
<input type="checkbox"/> ≥ 3 sf or ≥ 3 lf <input type="checkbox"/> ≥ 160 sf or ≥ 260 lf <input type="checkbox"/> Renovation <input checked="" type="checkbox"/> Demolition			
Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure <input checked="" type="checkbox"/> Non-Exempted (*) and Non-Friable Procedure Wrap & Cut			
Location of Asbestos-Containing Material (ACM) in Facility (13) Bathroom Building	Is Location Normally Used Solely by Maint./Custodial Staff? (12) YES NO NA <input checked="" type="checkbox"/> YES	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscell.) Roof Flashing	Amount (Specify SF or LF) 150 sf
Abatement Type <input checked="" type="checkbox"/> Remove <input type="checkbox"/> Repair <input type="checkbox"/> Encap <input type="checkbox"/> Enclose			
Name of Reg. Waste Hauler See Hauler Below # 1 & 2	NJDEP Waste Hauler ID # See Below	Cubic Yards of Waste: 2	Name of Registered Landfill Meadowfill Landfill G.R.O.W.S
Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 NJ DEP # 12561 NY DEP #		Disposal Date March 26, 2019	City, State Route 2, Box 68 Bridgeport, WVA 304-842-2784
Hauler #2) Newark Carting, Inc. - Newark, NJ 04509, NJ DEP # 19551			
Completed by (Print or Type) Marin Graure	Title SENIOR PROJECT MANAGER	Signature <i>Marin Graure</i>	Date March 15, 2019

GAC # 2019-674

IN CONJUNCTION WITH ANNUAL NOTIFICATION CHECK 1768
 State of New Jersey
 NOTIFICATION OF ASBESTOS ABATEMENT
 (Pursuant to NJAC 8:60 and 12:120)

CHECK# 1771

Date of Notification (1) 03/14/2019		Name of Building Owner/Operator (2) MAPLEWOOD III LLC							
Agencies Notified <input type="checkbox"/> EPA <input type="checkbox"/> DEP <input checked="" type="checkbox"/> DOL <input checked="" type="checkbox"/> DOH <input type="checkbox"/> DCA	Type Notification <input checked="" type="checkbox"/> Initial <input type="checkbox"/> Amended <input type="checkbox"/> Amendment # <input type="checkbox"/> Emergency (including justification) <input type="checkbox"/> Cancellation	Street Address 2000 MAPLEWOOD DRIVE							
		City, State, Zip Code MAPLE SHADE NJ 08052							
		Name of Contact LAURIE BALLARD	Telephone Number 856-482-6680						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) PARK CROSSING APARTMENT HOMES		Type of Facility (4) <input type="checkbox"/> School (K-12) <input type="checkbox"/> Subchapter 8 (Other than K-12) <input checked="" type="checkbox"/> Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 2000 MAPLEWOOD DRIVE		Square Feet 1200	# of Floors 2						
City (5) MAPLE SHADE		Bldg. Age 50+							
County (6) CAMDEN	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) RESIDENTIAL APARTMENTS							
Name of Monitoring Firm Hired by Building Owner (8) ACER ASSOC.		ASCM No.	Name of Abatement Contractor (9) ASSURED ENVIRONMENTAL SERVICES INC.						
Street Address 1012 INDUSTRIAL DRIVE		Street Address 570 CLEMS RUN							
City, State, Zip Code WEST BERLIN NJ 08091		City, State, Zip Code MULLICA HILL NJ 08062							
Project Manager for Monitoring Firm MATT DEPALMA		Telephone No. 856-809-1202	Telephone No. 610-304-4676						
Start Date (10) 03/19/2019		Scheduled Completion Date (11) 03/19/2019	License No. 01145						
Occupancy Status During Abatement (Check Only One) <input type="checkbox"/> Facility Closed/Vacated During Entire Period of Abatement <input type="checkbox"/> Abatement Performed Outside of Normal Facility Hours <input checked="" type="checkbox"/> Other - Describe: UNIT VACANT DURING ABATEMENT		Name of OSHA Monitor EMSL							
		Street Address 200 RT. 130 NORTH							
		City, State, Zip Code CINNAMINSON NJ 08077							
Scope of Work (Check All That Apply)									
<input checked="" type="checkbox"/> ≥3 sf or ≥3 lf <input type="checkbox"/> ≥160 sf or ≥260 lf		<input checked="" type="checkbox"/> Renovation <input type="checkbox"/> Demolition							
		<input checked="" type="checkbox"/> Full Containment with Negative Pressure <input type="checkbox"/> Mini-Enclosure <input type="checkbox"/> Glovebag Procedure <input type="checkbox"/> Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
20 EVERGREEN CIRCLE			X	JOINT COMPOUND	8 SF	X			
Name of Registered Waste Hauler ASSURED ENVIRONMENTAL SERVICES		NJDEP Waste Hauler ID No. 0034895	Cubic Yards of Waste 2	Name of Registered Landfill MINERVA LANDFILL					
City, State MULLICA HILL NJ			Disposal Date 03/20/2019	City, State WAYNESBURG, OH					
Completed by RON SWANSON		Title GENERAL MANAGER	Signature 	Date 03/14/2019					

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

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MAR 21 2019

Date of Notification (1) <div style="text-align: center;">2 / 13 / 19</div>		Name of Building Owner/Operator (2) Princeton University-Office of Design and Construction	
Agencies Notified <input type="checkbox"/> EPA <input checked="" type="checkbox"/> DOLWD <input checked="" type="checkbox"/> DHSS <input checked="" type="checkbox"/> DCA (NJAC 5:23-8)	Type Notification <input checked="" type="checkbox"/> Initial <input checked="" type="checkbox"/> Amended Amendment # 2-3/15/19 <input type="checkbox"/> Emergency (including justification) <input type="checkbox"/> Cancellation	Street Address 200 Elm Dr. City, State, Zip Code Princeton, NJ 08544	
		Name of Contact Robert Ortego	Telephone Number 609-258-1841

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3) Princeton University-Guyot Hall		Type of Facility (4) <input type="checkbox"/> School (K-12) <input checked="" type="checkbox"/> Subchapter 8 (Other than K-12) <input type="checkbox"/> Other (i.e., private and commercial buildings, homes, etc.)	
Street Address Washington Rd			
City (5) Princeton	Square Feet	# of Floors	Bldg. Age 70
County (6) MERCER	County Code (7)(STATE USE ONLY)	Current Use (Prior if being demolished) Office/Classrooms	
Name of Monitoring Firm Hired by Building Owner (8) TTI Environmental Inc		ASCN No. 00003	Name of Abatement Contractor (9) BRISTOL ENVIRONMENTAL, INC.
Street Address 1253 North Church Rd		Street Address 1123 BEAVER STREET	
City, State, Zip Code Moorestown, NJ 08057		City, State, Zip Code BRISTOL, PA 19007	
Project Manager for Monitoring Firm Michael Keehn	Telephone No. 609-386-8800	Telephone No. 215-788-6040	License No. 00509
Start Date (10) 3 / 1 / 19	Scheduled Completion Date (11) 3 / 21 / 19	Name of OSHA Monitor BRISTOL ENVIRONMENTAL, INC.	
Occupancy Status During Abatement (Check only one) <input type="checkbox"/> Facility Closed/Vacated During Entire Period of Abatement <input type="checkbox"/> Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: 7:00AM-3:30PM / ____PM-____AM		Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007	

Scope of Work (Check all that apply)

- | | | |
|--|--|---|
| <input type="checkbox"/> ≥ 3 sf or ≥ 3 lf | <input checked="" type="checkbox"/> Renovation | <input checked="" type="checkbox"/> Full Containment with Negative Pressure |
| <input checked="" type="checkbox"/> ≥ 160 sf or ≥ 260 lf | <input type="checkbox"/> Demolition | <input type="checkbox"/> Mini-Enclosure |
| | | <input type="checkbox"/> Glovebag Procedure |
| | | <input type="checkbox"/> Non-Exempted (*) and Non-Friable Procedure |

Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Lab 303	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Floor tile and mastic	260 SF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lab 329	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Floor tile and mastic	560 SF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lab 323 & 323A	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Floor tile and mastic	1,900 SF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Name of Registered Waste Hauler Service Transport Group Inc.		NJDEP Waste Hauler ID No. 20990	Cubic Yards of Waste	Name of Registered Landfill G.R.O.W.S. NORTH LANDFILL	
City, State Yardley, PA		Disposal Date		City, State MORRISVILLE, PA 19067	
Completed By (Print or Type) Brian Scafiro	Title Estimator	Signature <i>Brian Scafiro / jrl</i>		Date 3/15/19	

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

RECEIVED
MAR 21 2019

Date of Notification (1) 2 / 13 / 19		Name of Building Owner/Operator (2) Princeton University-Office of Design and Construction	
Agencies Notified <input type="checkbox"/> EPA <input checked="" type="checkbox"/> DOLWD <input checked="" type="checkbox"/> DHSS <input checked="" type="checkbox"/> DCA (NJAC 5:23-8)	Type Notification <input checked="" type="checkbox"/> Initial <input checked="" type="checkbox"/> Amended Amendment #1-3/5/19 <input type="checkbox"/> Emergency (including justification) <input type="checkbox"/> Cancellation	Street Address 200 Elm Dr.	
		City, State, Zip Code Princeton, NJ 08544	
		Name of Contact Robert Ortego	Telephone Number 609-258-1841

FACILITY INFORMATION			
Name of Facility Where Abatement is Taking Place (3) Princeton University-Guyot Hall		Type of Facility (4) <input type="checkbox"/> School (K-12) <input checked="" type="checkbox"/> Subchapter 8 (Other than K-12) <input type="checkbox"/> Other (i.e., private and commercial buildings, homes, etc.)	
Street Address Washington Rd			
City (5) Princeton		Square Feet	# of Floors 70
County (6) MERCER	County Code (7)(STATE USE ONLY)	Current Use (Prior if being demolished) Office/Classrooms	

Name of Monitoring Firm Hired by Building Owner (8) TTI Environmental Inc		ASCM No. 00003	Name of Abatement Contractor (9) BRISTOL ENVIRONMENTAL, INC.	
Street Address 1253 North Church Rd		Street Address 1123 BEAVER STREET		
City, State, Zip Code Moorestown, NJ 08057		City, State, Zip Code BRISTOL, PA 19007		
Project Manager for Monitoring Firm Michael Keehn		Telephone No. 609-386-8800	Telephone No. 215-788-6040	License No. 00509

Start Date (10) 3 / 1 / 19	Scheduled Completion Date (11) 3 / 15 / 19	Name of OSHA Monitor BRISTOL ENVIRONMENTAL, INC.		
Occupancy Status During Abatement (Check only one) <input type="checkbox"/> Facility Closed/Vacated During Entire Period of Abatement <input type="checkbox"/> Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: 7:00AM-3:30PM/ PM- AM		Street Address 1123 BEAVER STREET		
		City, State, Zip Code BRISTOL, PA 19007		

Scope of Work (Check all that apply)

<input type="checkbox"/> ≥ 3 sf or ≥ 3 lf	<input checked="" type="checkbox"/> Renovation	<input checked="" type="checkbox"/> Full Containment with Negative Pressure
<input checked="" type="checkbox"/> ≥ 160 sf or ≥ 260 lf	<input type="checkbox"/> Demolition	<input type="checkbox"/> Mini-Enclosure
		<input type="checkbox"/> Glovebag Procedure
		<input type="checkbox"/> Non-Exempted (*) and Non-Friable Procedure

Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Lab 303	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Floor tile and mastic	260 SF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lab 329	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Floor tile and mastic	560 SF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lab 323 & 323A	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Floor tile and mastic	1,900 SF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Name of Registered Waste Hauler Service Transport Group Inc.		NJDEP Waste Hauler ID No. 20990	Cubic Yards of Waste	Name of Registered Landfill G.R.O.W.S. NORTH LANDFILL	
City, State Yardley, PA		Disposal Date		City, State MORRISVILLE, PA 19067	
Completed By (Print or Type) Brian Scafiro	Title Estimator	Signature Brian Scafiro		Date 3-5-19	

ASB-41
MAY 11 BS19015

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

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

CHK#3514

Date of Notification (1) <u>2</u> / <u>13</u> / <u>19</u>		Name of Building Owner/Operator (2) Princeton University-Office of Design and Construction	
Agencies Notified <input type="checkbox"/> EPA <input checked="" type="checkbox"/> DOLWD <i>5074</i> <input checked="" type="checkbox"/> DHSS <i>5067</i> <input checked="" type="checkbox"/> DCA <i>505b</i> (NJAC 5:23-8)	Type Notification <input checked="" type="checkbox"/> Initial <input type="checkbox"/> Amended Amendment # _____ <input type="checkbox"/> Emergency (including justification) <input type="checkbox"/> Cancellation	Street Address 200 Elm Dr.	MAR 21 2019
		City, State, Zip Code Princeton, NJ 08544	
		Name of Contact Robert Ortego	Telephone Number 609-258-1841

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3) Princeton University-Guyot Hall		Type of Facility (4) <input type="checkbox"/> School (K-12) <input checked="" type="checkbox"/> Subchapter 8 (Other than K-12) <input type="checkbox"/> Other (i.e., private and commercial buildings, homes, etc.)	
Street Address Washington Rd		Square Feet	# of Floors
City (5) Princeton		Bldg. Age 70	
County (6) MERCER	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Office/Classrooms	
Name of Monitoring Firm Hired by Building Owner (8) TTI Environmental Inc	ASCM No. 00003	Name of Abatement Contractor (9) BRISTOL ENVIRONMENTAL, INC.	
Street Address 1253 North Church Rd		Street Address 1123 BEAVER STREET	
City, State, Zip Code Moorestown, NJ 08057		City, State, Zip Code BRISTOL, PA 19007	
Project Manager for Monitoring Firm Michael Keehn	Telephone No. 609-386-8800	Telephone No. 215-788-6040	License No. 00509
Start Date (10) <u>3</u> / <u>1</u> / <u>19</u>	Scheduled Completion Date (11) <u>3</u> / <u>15</u> / <u>19</u>	Name of OSHA Monitor BRISTOL ENVIRONMENTAL, INC.	
Occupancy Status During Abatement (Check only one) <input type="checkbox"/> Facility Closed/Vacated During Entire Period of Abatement <input type="checkbox"/> Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: <u>7:00AM-3:30PM</u> PM-____AM		Street Address 1123 BEAVER STREET	
		City, State, Zip Code BRISTOL, PA 19007	

Scope of Work (Check all that apply)

- | | | |
|--|--|---|
| <input type="checkbox"/> ≥ 3 sf or ≥ 3 lf | <input checked="" type="checkbox"/> Renovation | <input checked="" type="checkbox"/> Full Containment with Negative Pressure |
| <input checked="" type="checkbox"/> ≥ 160 sf or ≥ 260 lf | <input type="checkbox"/> Demolition | <input type="checkbox"/> Mini-Enclosure |
| | | <input type="checkbox"/> Glovebag Procedure |
| | | <input type="checkbox"/> Non-Exempted (*) and Non-Friable Procedure |

Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Lab 303	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Floor tile and mastic	260 SF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lab 329	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Floor tile and mastic	560 SF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lab 323 & 323A	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Floor tile and mastic	1,900 SF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Name of Registered Waste Hauler BRISTOL ENVIRONMENTAL, INC.		NJDEP Waste Hauler ID No. 18706	Cubic Yards of Waste	Name of Registered Landfill G.R.O.W.S. NORTH LANDFILL	
City, State BRISTOL, PA 19007		Disposal Date		City, State MORRISVILLE, PA 19067	
Completed By (Print or Type) Brian Scafiro	Title Estimator	Signature <i>Brian Scafiro /gr</i>		Date 2-13-19	

ASB-41
MAY 11 *BS19015*

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

PAID

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

ETS JOB # 4959/17 CHECK #29639

AMENDMENT#3

Date of Notification (1) 3/14/2019		Name of Building Owner / Operator (2) NJIT	
Agencies Notified	Type Notification	Street Address 323 DR. MARTIN LUTHER KING BLVD.	
<input checked="" type="checkbox"/> EPA	<input type="checkbox"/> Initial Notification	City, State & Zip Code NEWARK, NJ 07102	
<input type="checkbox"/> DEP	<input checked="" type="checkbox"/> Amended Notification	Name of Contact MR. TODD K. MILLER	
<input checked="" type="checkbox"/> DOL	<input type="checkbox"/> Cancellation	Telephone Number 973-595-5509	
<input checked="" type="checkbox"/> DOH			
<input type="checkbox"/> DCA			

FACILITY INFORMATION

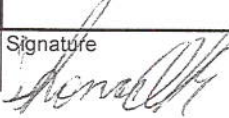
Name of Facility Where Abatement is Taking Place (3) NJIT - FACULTY MEMORIAL HALL		Type of Facility (4) <input type="checkbox"/> School (K-12) <input checked="" type="checkbox"/> Subchapter 8 (Other than K-12) <input type="checkbox"/> Other (i.e., private & commercial buildings, homes, etc.)	
Street Address 111 SUMMIT STREET AKA 120-142 BLEEKER STREET		Square Feet 92,516	# of Floors 5
City (5) NEWARK	County (6) ESSEX	Bldg. Age 52	
County Code (7)		Current Use (Prior if being demolished) UNIVERSITY	
Name of Monitoring Firm Hired by Building Owner (8) OMEGA ENVIRONMENTAL		ASCM No. 00120	
Street Address 280 HUYLER STREET		Name of Abatement Contractor (9) ETS CONTRACTING, INC.	
City, State & Zip Code SOUTH HACKENSACK, NJ 07606		Street Address 160 CLAY STREET	
Project Manager for Monitoring Firm ALEX PALLETS		City, State & Zip Code BROOKLYN, NY 11222	
Telephone Number 201-310-9665		Telephone Number 718-706-6300	License Number 00511
Scheduled Start Date (10) 11/26/2018	Scheduled Completion Date (11) 11/25/2019	Name of OSHA Monitor TESTOR TECH.	
Occupancy Status During Abatement (Check only one) <input type="checkbox"/> Facility Closed/Vacated During Entire Period of Abatement <input checked="" type="checkbox"/> Abatement Performed Outside of Normal Facility Hours - Describe: MONDAY - SATURDAY 6:00 AM - 6:00 PM <input type="checkbox"/> Other - Describe:		Street Address 10 59 JACKSON AVENUE	
		City, State & Zip Code LONG ISLAND CITY, NY 11101	

Scope of Work (Check all that apply)

- ☐ Demolition ☒ Renovation
☒ Large Project
☐ Quantity is ≥ 3 SF or ≥ 3 LF ACM
☒ Quantity is ≥ 160 SF or ≥ 260 LF ACM

- ☐ Full Containment
☐ Mini-Enclosure
☐ Glovebag Procedure
☒ Other: **TENT & EXTERIOR NON-FRIABLE PROCEDURES, WRAP & CUT**

Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13)	Is Location Normally Used Solely by Maintenance or Custodial Staff? (12)	Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous)	Amount (Specify Square Feet or Linear Feet)	Abatement Type (Specify: Removal, Repair, Encapsulation or Enclosure)
4 TH FLOOR	NO	PIPE INSULATION (WRAP & CUT) WINDOW GLAZING	213 LF 96 SF	TENT EXTERIOR NON-FRIABLE PROCEDURES
4 TH FLOOR - WEST CORRIDOR	NO	FLOOR TILES & MASTIC	480 SF	NON-FRIABLE PROCEDURES
4 TH FLOOR - NORTH & SOUTH PERIMETER	NO	FLOOR TILES & MASTIC	50 SF	NON-FRIABLE PROCEDURES
4 TH FLOOR - EAST SHAFT	NO	PIPE INSULATION (WRAP & CUT)	8 LF	TENT
3 RD FLOOR - EAST SHAFT	NO	PIPE INSULATION (WRAP & CUT)	3 LF	TENT

2 ND FLOOR – EAST SHAFT	NO	PIPE INSULATION (WRAP & CUT)	2 LF	TENT
4 TH FLOOR – WEST SHAFT	NO	PIPE INSULATION (WRAP & CUT)	3 LF	TENT
1 ST FLOOR	NO	WINDOW GLAZING	20 SF	EXTERIOR NON-FRIABLE PROCEDURES
Name of Registered Waste Hauler #1 JIMMY BYRNE T/A JIMMY BYRNE TRUCKING	NJDEP Waste Hauler ID # 19551	Cu. Yds. of Waste 120	Name of Registered Landfill #1 CUMBERLAND COUNTY LANDFILL	
City, State 1199 RANDALL AVENUE, BRONX, NY 10474		Disposal Date TBD	City, State 620 NEWVILLE ROAD NEWBURG, PA 17240	
Completed By (Print or Type) THOMAS AHERN	Title Project Executive	Signature 	Date 3/14/19	

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