	1-1	11 11	Total Park						Che	ck#1	074		
Date of Notification (1) March 2		u L				er / Operator	(2)						
Agencies Notified Type Noti	_		_	of Amer	1000			1 2-a//	F F	E I	7//	E	proving.
DEPA	iication) <u> </u>			E	
DEP			1090	Route 20	2 Sout	h				_			
	itial		City	State & Z	in Code				MAR	27	2018	}	1111
Mague A	mended			chburg, I					İ				la constant
l□	mendment # ancellation	<u> </u>	Name	e of Conta	act					C CYN			-
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			FA	CILITY	INFO	RMATION	Ý						
Name of Facility Where Abateme Bank of America	ent is Taking	Place (3)				Type of Fac	cility (4) I (K-12)						
Street Address						1=	apter 8 (Othe	r than K-12)					
1090 Route 202 South								A CONTRACTOR OF THE PARTY OF TH	rcial building	ne hor	ne e	tc)	
						Square Fee		of Floors		dg. Age		10.)	
City (5)						3,50		1		ug. Age	60		
Branchburg						Current Use	(Prior if bein	g demolishe	d)	Cartier with the			
County (6)	lo	County Code	e (7)			Bank							
Somerset	1	USE ONLY											
Name of Monitoring Firm Hired b	Building O	wner (8)		ASCM	No.	Name of Ab	atement Con	tractor (9)					100
New York Environmental Street Address						Synatech, I		20200-0					
88 Harbor Road						Street Addre 829 Radio F							
City, State & Zip Code						City, State 8						291	
Port Washington, NY 11050	GENERAL P					Little Egg H	larbor, NJ 0	8087					
Project Manager for Monitoring F Michael Baudo	rm		lephone 6-805-27			Telephone N 609-296-691			License Nur		-		
Scheduled Start Date (10)	Schedule	ed Completi		- Contraction of the Contraction		Name of OS	100.0			0081			
March 31, 2018		Apri	I 23, 201			Synatech, li							
Occupancy Status During Abaten Facility Closed/Vacated	During Entire	e Period of		nt		Street Addre 829 Radio F	(0.44 m)						
Abatement Performed O	utside of No	rmal Hours	3			City, State &	Zip Code						
Other – Describe:						Little Egg H	larbor, NJ 0	8087					
Facility Occupied During													
Scope of Work (Check all that ap	oly)												
N >2 of an > 50 kg			D	200		\trianglerighteq			legative Pres	sure			
\ge 3 sf or \ge 50 lf \ge 160 sf or \ge 260 lf			Renovati Demolitio			F	Mini-Enclos						- 1
			Demontic	on		F	Glovebag F						- 1
Location of		le Locati	on Norma	ally Used		Danasia		pted(*) and f	Non-Friable P				
Asbestos-Containing Materia	al (ACM)		y Mainter			Descrip Asbestos-C		Amo	ount (Specify	Ab	atem	ent i	ype
TO BE ABATED		Custo	dial Staff	? (12)		Material	(ACM)		SF or LF)				
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` '						or other misc	cellaneous)			Per	Re	ncal	inc
										Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A						<u>a</u>		ate	re
Teller Area				Х	1	Wall and Cei	ling Plaster		30 SF	X		\vdash	-
							3			⊣^			
										1 1			
Name of Registered Waste Haule	r	NJDEP V Hauler ID		Cubic \	Yards of	Waste	Name of F	Registered La	ındfill				
Synatech, Inc.			429	5			Fairless H	lills					
City, State				Dispos	al Date		City, State						
ittle Egg Harbor, NJ 08087				April 2	4, 2018		Morrisvill	o DA					
Completed By	Title			0: 1	10.00	0.1		Date					-
Diane Aloia					Mu	aln	25	T I	March 23, 20	18			
Ziane Aluid	⊏xecuti	ive Adminis	strator	1,4	who	UUNC		March 9	9, 2018			- 22	

Data of Natification (4)											Ch	eck#	1032		
Date of Notification (1) March 9, 201	18		Name	of Build	ling Owner	/ Oper	rator	(2)	r						
Agencies Notified	Type Notific			_	t Addres						[]	EG	BI	\mathbb{W}	E	Tr
□EPA □DEP				1090	Route 2	02 South								*		111.
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LIDCA		cellation			of Conta	act	112			burs	- Indiana and a		Telepho 516-972			er
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Name of Facility Whe Bank of America	re Abatement	is Taking	Place (3)			T	_		cility (4) I (K-12)							
Street Address		e					_		apter 8 (O	her than	K-12)					
1090 Route 202 Sout	th					1	Ot	her	(i.e., priv	ate & co	mme	rcial buildir			tc.)	
City (5)							quare	3,50		# of Flo	ors	le le	Bldg. Age	60		
branchburg									(Prior if b	eing den	olishe	d)		00		
County (6) Somerset		U	ounty Cod													
Name of Monitoring F New York Environme	irm Hired by B ental	Building Ov	vner (8)		ASCN	1.00.0000	me o	f Ab	atement C	ontracto	(9)					
Street Address		N.	4			St	reet A	ddre	ess				-			
88 Harbor Road City, State & Zip Code							9 Rac									
Port Washington, NY									Zip Code larbor, NJ							
Project Manager for M Michael Baudo	onitoring Firm	l		elephone N 6-805-270		Te		ne N	lumber	00007		License Nu	mber 0081	7		
Scheduled Start Date March 23, 2		Schedule	d Complet	ion Date (Na	_	f OS	HA Monito	or .			0001			
Occupancy Status Dui Facility Close	ring Abatemer d/Vacated Du	nt (Check or ring Entire	only one)			Str	reet A	ddre	ess							
Abatement Po	erformed Outs					Cit	y, Sta	te &	Zip Code							
Facility Occup	- Contracted	atement				Lit	tle Eg	gg H	arbor, NJ	08087						
Scope of Work (Check	all that apply)						V	-11						_	
≥3 sf or ≥ 50 lf			П	Renovatio	n				1		with N	legative Pre	ssure			
≥160 sf or ≥260	If		П	Demolitio				H	Mini-End							
			_		(2)			F		-		Non-Friable I	D			
Loca	tion of		Is Locati	on Norma	Ilv Used	<u> </u>	Des	crip	tion of	mpteu(and r	Non-Friable		ateme	ant T	VDA
Asbestos-Contair		ACM)	Solely b	y Mainten	ance or	A	sbesto	os-C	ontaining		Amo	ount (Specify		u(Ciii	JIIC 1	ypc
	ABATED acility		Custo	dial Staff?	(12)	/:			(ACM)	ļ.	,	SF or LF)	<u></u>			
	13)								I systems facing, VA	т					ш	
						or	other i	misc	ellaneous	,			Reg	R	ıca	inc
													Remova	Repair	Encapsulate	Enclosure
			Yes	No	N/A								<u>a</u>	7	ate	Ге
Teller Area					Х	Wal	l and	Ceil	ing Plaste	er		30 SF	X			
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Name of Registered W	aste Hauler		NJDEP V	Vaste	Cubic \	ards of Wa	aste		Name o	f Registe	red La	ndfill		_		
Synatook In-			Hauler ID				endo est. P li									
Synatech, Inc. City, State			27	429	5 Diamen	al Data			Fairless							
	08087				Disposi				City, Sta							
Little Egg Harbor, NJ Completed By	00007	Title			April 2		1	-	Morrisv		ntc					
Diane Aloia			e Adminis		171	ane (10	_	f	ال	ate					
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Date of Notification (1)	i larch 23, 201	lmd I	the trail			ing Owner			AND A STATE OF THE PARTY OF THE		-		
	Type Notifica				Property t Address	Managen	nent LLC		FR E		W	EF	See of the
/ igonoles riotilica	Type Notifica	ition		Stree	Address	5			111) 5 5 1	- I	V		
□EPA				1900	Union V	alley Road	Suite 3	N3					
DEP				1.000	Official V	ancy itoat	, Juite 3	03	11111	07.0	040	77	11
DOL		I		City	State & Z	in Code			III MAR	210	018	- 11	
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DCA	200000	ellation		Name	of Conta	act			ASSESTO	elepho			
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					907 04.	urigilu				13-100	-0000	k 	
				FA	CILITY	' INFORI	MATION	N			-4/10/03/9		
Name of Facility Where Vacant Building	e Abatement	is Taking	Place (3)			Ţ	ype of Fa	cility (4) ol (K-12)					
Street Address							_	napter 8 (Other tha	n K 12\				
330 Ratzer Road						L			55				
									commercial buildin			tc.)	
City (5)							quare Fe		oors	dg. Age			
Wayne								000	1		50		
and the second							ommerci	e (Prior if being de	molisnea)				
County (6)		10	County Cod	e (7)	2/4	-	Ommer G	ai			_		_
Passaic		1	USE ONLY	- (.,									
Name of Monitoring Fire	m Hired by Bi	uilding O	wner (8)		ASCM	No. N	ame of Al	batement Contract	or (9)				_
Partner Engineering a	and Science,	Inc.					ynatech,		o. (o)				
Street Address						S	reet Addi	ress					
611 Industrial Way We City, State & Zip Code	est						29 Radio		ii				
Eatontown, NJ 07724								& Zip Code					
Project Manager for Mo			ITA	lephone	Number		elephone	Harbor, NJ 08087			100		
Brian Nemetz	antening i min			2-542-35		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	9-296-69		License Nu	nber 0081	7		
Scheduled Start Date (1	10)	Schedule	ed Complet					SHA Monitor		0001	-		_
April 2, 2018	8		Ma	y 2, 2018		1	natech,						
Occupancy Status Durin Facility Closed	ng Abatemen	t (Check	only one)	Abatomo	nt	1.00	reet Addr						
Abatement Per					IIL		9 Radio	30150000					
		ide of No	rmal Hour	5				& Zip Code					
Other – Descri						Li	ttle Egg I	Harbor, NJ 08087					
Facility Occupi													
Scope of Work (Check a	all that apply)												
			_					Full Containmer	nt with Negative Pres	sure			
≥3 sf or > 3 lf			Ц	Renovati	on			Mini-Enclosure	8079 E.O				
≥160 sf or ≥260 I	lf		Ш	Demolitio	n			Glovebag Proce					
							D		(*) and Non-Friable F	rocedu	re		
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Asbestos-Containii		ACM)	Solely b	y Mainter	nance or			Containing	Amount (Specify		aconii.	, iii i j p	,0
TO BE A			Custo	dial Staff	? (12)			I (ACM)	SF or LF)				
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							other mic	ociianeous)		Removal	Repair	aps	-
			Yes	No	N/A					Va	ai-	ula	
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/acant Office Space					Х		Linoleur	n Mastic	2,000 SF	Х		_	
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Jama of Pagisters 4 14/	ata I la I		1115==		X		Pipe Ins		5 LF	X			
Name of Registered Wa	iste Hauler		NJDEP V		Cubic \	Yards of W	aste	Name of Regis	tered Landfill		-		
Synatech, Inc.			Hauler ID	10. 429	20			Fairless Hills I	andfill				
City, State					Disposa	al Date		City, State	-ailuiiii				_
1949						_, _aic		Oity, State					
ittle Egg Harbor, NJ (08087				May 3,	2018		Morrisville, PA					
Completed By		Title			Signatu		00		Date				
Diane Aloia		Evec A	dminietrat	0.5	1 4/1	Ane 1	elon.						

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Date of Notification (1) 3-16-2018			- Second	Name Apon	of Building te Deve	Owner/ lopmen	eperator of Corp	r (2)) M	AR 2	7 2	2018	
Agencies Notified	Type Notification				Address	=				-					- -
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X DOL	Amended Amendment				tate, Zip C In Park,		035			-		LICEN	ISIM	3	-compone
Ĭ DOH	Emergency (includin	g		of Contact					Tele	phone N	lumber			
DCA	Cancellation			Carlo	s Aponte	Э					1-638-2				
Name of Facility Where	Abstament is Tabia	- Di	(2)	FAC	ILITY INF	ORMAT	ION								
Residential	Abatement is Taking	Place	(3)					Тур	e of Facility (4)					
Street Address								×	School (K-12 Subchapter 8 Other (i.e. pri etc.)	(Othe	r than K	·12) rcial bui	ldings	, hom	es,
City (5) Englewood, NJ 076	31							Squ 102	are Feet	# of 2	Floors	1000	3ldg. /	Age	
County (6) Bergen					Code (7))			rent Use (Prior	1	g demol				
Name of Monitoring Firm	Hired by Building C	Owner (8	3)	ASCI	M No.				atement Contr						
Street Address							Gree		nvironmenta ess	al Ser	vices, l	LLC			
City, State, Zip Code									nia Avenue						
									Zip Code ity, NJ 0730)4					
Project Manager for Moni	toring Firm			Telepho	one No.		Teleph 201-3				License 01174	No.			
Start Date (10) 3-16-2018		Schedu 3-16-2		mpletion	Date (11)				SHA Monitor above			-11-71-11-1-1			
Occupancy Status During	Abatement (Check	Only O	ne)	-			Street								
Facility Closed/Vaca Abatement Performe Other – Describe:	ted During Entire Ped Outside of Norma	eriod of al Facilit	Abaten y Hours	nent					Zip Code						
Scope of Work (Check All	That Apply)												1-5		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	That y ppiyy		Renova Demolit				×	M GI	ull Containmen ini-Enclosure lovebag Proceon-Exempted (dure				e	
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Location Asbestos-Containing I <u>TO BE ABA</u> In Facilit (13)	Material (ACM) TED	Use Ma	ed Sole aintena todial S (12)	ly by nce/	Asbes (i.e.	tos Conta thermal surfac	scription aining M systems cing, VA niscellan	lateria insul T, or	20	(Sp	ount ecify or LF)	Remova	Repair	Encapsulate	Enclosure
Pagama		Yes	No	N/A										ate	œ .
Baseme	ent		X		Pipe	Insula	ition / v	vrap	& cut	15	LF	Х			
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Name of Registered Waste	e Hauler		l NI	JDEP W	lasts	C. L.	Vest								
Green Environmental			H	auler ID 34889	No.	Cubic \ of Was			Name of Re Fairless L			II			
City, State Jersey City, NJ				000		-	al Date		City, State						\dashv
Completed by		Title					gnature		Morrisville	e, PA					
Liliana Serrano		41 - 31373333	e Man	ager			ell (asern	lài		ate -16-20	18		



Name of Paciety When Abstracts it is falled by Building Owner (8) Name of Studieng Owner (9) September (2) Name of Studieng Owner (8) Name of Owner			TIFIDA (Pur	Si TION suant	ate of New Jersey OF ASBESTOS to NJAC 8:60 and	ABATEM 1 12:120)	MENT		CK	45	518	7.7	
Agencies Notified Part Pa	Date of Notification (1)		Nar						111)1_5_	<u> </u>	.	V	
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DPA	Agencies Notified / Type Notification		Stre	et Ade	iress		1	racego region		AR 2	7 ;	2018	
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County (6) County Code (7) Cournet Use (Prior if being demolabed)	Street Address							Other (i.e. pr	rivate & commercia	l buildin	gs, hor	nes, et	c.)
County (6) County Code (7) Cournet Use (Prior if being demolabed)	City (5)		5		£		Square	Feet	# of Floors	В	ldg. A	ge	
County (6) County Code (7) ASCM No. Name of Absterner Contractor (9) B. e. s. r. Removal Inc. City, State, Zip Code Hackensack, NJ 07601 Telephone No. County Code (7) City, State, Zip Code Hackensack, NJ 07601 County Code (7) City, State, Zip Code Hackensack, NJ 07601 County Code (7) City, State, Zip Code City, State, Zip Code Hackensack, NJ 07601 County Code (7) City, State, Zip Code City, State, Zip Code County Code (7) City, State, Zip Code County Code (7) County Code (7) City, State, Zip Code County Code (7) County Code (7) City, State, Zip Code City, State City, State, Zip Code City, State City, State, Zip Code City, State City, S		E					2	000			19	35	
Name of Monitoring Firm Hired by Building Owner (8) Street Address Street Address 450 South River Street City, State, Zip Code Hackensack, NJ 07601 Project Manager for Monitoring Firm Telephone No. Telephone No. Telephone No. 1 Telephone No. 201-329-7444 00388 Start Date (10) And J 8 Occupancy State Dating Abstement (Check Only One) Facility Closed/Vacated During Entire Period of Abstement Abstement Performed Deside of Normal Facility Blours Other-Describe: 2504-2504 Other-Describe: 2504-2504 South Hackensack, NJ 07606 Removation Pall Commitment with Negative Pressure Mini-Facilosare Grow-Backense Grow-Backense Grow-Backense (Specify Vall Committee Containing Material (ACM) (i.e. thermal system is unlaided, surfacing (Specify VAT, or other miscellanoous) Pall Committee Grow-Backense Containing Material (ACM) (i.e. thermal system is unlaided, surfacing (Specify VAT, or other miscellanoous) Pall Committee Grow-Backense Containing Material (ACM) (i.e. thermal system is unlaided, surfacing (Specify VAT, or other miscellanoous) Pall Committee Containing Material (ACM) (i.e. thermal system is unlaided, surfacing (Specify VAT, or other miscellanoous) Pall Committee Containing Material (ACM) (i.e. thermal system is unlaided, surfacing (Specify Material (Specify Materia							Curren	t Use (Prior	if being demolished	xd)			
Best Removal Inc.			(ST	ATE U	SE UNLY)								
450 South River Street City, State, Zip Code City, State, Zip Code Hackensack, NJ 07601		wner (8)	1	ASCM	No.	Name	of Abate	ment Contr	actor (9)				
450 South River Street City, State, Zip Code City, State, Zip Code Hackensack, NJ 07601						Bes	Re	moval	Inc.				
City, State, Zip Code Hackensack, NJ 07601 Project Manager for Monitoring Firm Telephone No. 1 Telephone No. 201-329-7444 00388 Start Date (10) Al 3/18 Occupancy Status During Abatement (Check Only One) Steer Address Occupancy Status During Abatement (Check Only One) Al 3/18 Occupancy Status During Abatement (Check Only One) Steer Address Other Describe: 730 Act To 3/90 CM Other Describe: 730 Act	Street Address												
Hackensack, NJ 07601	City State Zin Code								ver Stre	et			-
Telephone No. Telephone No. License No. License No. Q 0 3 8 8	City, State, Zip Code								NT 07601				
Start Date (10) A 3 18 Occupancy Status During Abstement (Check Only One) Facility Closed/Vacated During Entire Period of Abstement Other—Describe: 29 AV 70 39 CV Scope of Work (Check All That Apply) 3 st or 23 if	Project Manager for Manitaring Firm		Tel	enhon	e No					No.	T-10-11-		
Start Date (10) A A B Occupancy Status Buring Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Pacifity Hours Other - Describe: 70 of	Project Manager for Monitoring Firm		100	cpnon	C 140.	1			003	00			
Occupancy Status Buring Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Ourside of Normal Facility Hours Other—Describe: 750 Abt 75	Start Date (10)	Scheduled	Completi	on Da	te (11)	Name	of OSH	A Monitor		0.0			
Steet Kaddress Street Kadd		1	141	18	25 20	Omes	та Е	nviro	nmental				
Abatement Performed Outside of Normal Facility Hours City, State, Zip Code South Hackensack, NJ 07606 South Hackensack, NJ 07606 South Hackensack, NJ 07606 South Hackensack, NJ 07606 Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and		nly One)				Street	Address		3/3				
South Hackensack, NJ 07606 Sope of Work (Check All That Apply) 23 sf or 23 lf 2160 sf or 2260 lf Renovation Demolition Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A DANCECCT Nome of Registered Waste Hauler Name of Registered Waste Hauler Name of Registered Waste Hauler Normally Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Normally Used Solely by Maintenance/ (Specify Ser of LF) Registered Landfill Normally Normally Normally Used Solely by Maintenance/ (Specify Ser of LF) Registered Landfill Normally N	☐ Facility Closed/Vacated During Entire Per	riod of Abate	ment						treet	010000			
Scope of Work (Check All That Apply) 3 st or \ge 3 if 2 160 sf or \ge 260 if	Abatement Performed Outside of Normal	Facility Hou	rs			1							
Pull Containment with Negative Pressure Pull Containment with Non-Friable Procedure Pull Containment with Non-Friable Procedu						Sout	h H	acken	sack, NJ	076	06		
Demolition Dem		_				100							
Location of Asbestos-Containing Material (ACM) Location Normally										ressure			
Is Location Normally Used Solety by Maintenance/ Custodial Staff? (12) Yes No N/A N/AT, or other miscellaneous) SF or LF) Page 1 Page 2	□ ≥160 St 01 ≥200 II	<u>а</u> <i>Б</i> с	Mondon			1	- Glo	vebag Proce	edure	I - D	J.,		
Location of Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Name of Registered Waste Hauler Best Removal Inc City, State Hackensack, NJ 07601 Completed by J. Maiorano Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12) Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Per No N/A N/A Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) N/AT, or other miscellaneous						1 Not	n-Exempted	(*) and Non-Friab	le Proced		ement		
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Date of Notification (1)			Na	me of Build	ing Own	er/Operator	(2)	HA)-					1
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Agencies Notified Type Not	tification		-	eet Address	:								
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				ACILITY	NFORM	MATION		1 7		-			
Name of Facility Where Abatement	is Taking Pl	ace (3)					Type of Facili	tv (4)		venen			
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Street Address							Subchapte	er 8 (Other	than K-1	2)			
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City (5)							Square Feet		Floors		Bldg.	Δαρ	
Maplewood, NJ 07040 County (6)												, ige	
Essex			Co	unty Code (7)	(STATE	USE ONLY)	Current Use (Prior if be	ing demoli	shed)			
Name of Monitoring Firm Hired by Br	uilding O	or (0)							57W S 10500	-/			
and a second of the second of	unung Owne	er (8)	ASCI	M No.	1		ent Contractor (9)					
Street Address						ch LLC							
						Address							
City, State, Zip Code					576 V	alley Rd #	283						
						State, Zip Co			200				
Project Manager for Monitoring Firm		Te	ephone	e No.		e, NJ 0747 none No.	0	1					
				T. (1) (1) T. (1)	W	38-1777			nse No.				
Start Date (10)	Scheduled	Compl	etion D	ate (11)		of OSHA M	onitor	0112	.7				
///		/ _ 0	5 /	_18	1		nsultants,Inc						
Occupancy Status During Abatement	(Check only	one)			Street	Address	isuitants,inc						
Facility Closed/Vacated During En	tire Period	of Abate	ement				Road, Bldg .#	25E					
Abatement Performed Outside of Time of Abatement:AM	Normal Faci PM/	lity Hou PM	rs - De	scribe AM	City, S	tate, Zip Co	de	33E					_
Scope of Work (Check all that apply)				_AIVI	Fair La	wn, NJ 07	410						
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≥ 3 sf or >3 If ≥ 160 sf or ≥260 If		enovat			Н	Mini-Enclo	ainment with Ne	gative Pre	essure				
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Location of Asbestos-Containing Material (ACI		Norma			De	scription of				Ab	atem	ent T	/pe
TO BE ABATED	M	ed Sole aintena	ince/	Asbes	tos Cont	taining Mate	erial (ACM)	Am	ount	Re	Re	Enc	En
IN Facility (13)	Cu	stodial	Staff?	(1.6.	, uierma surfa	I systems in cing, VAT,	sulation, or		ecify or LF)	Removal	Repair	aps	Enclosure
(13)		(12)	T	-		niscellaneo		Oil 1	oi Li j	<u>a</u>		Encapsulate	Гe
asement&crawl space	Yes	No	N/A									O	
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mily room-first floor			\boxtimes	VAT floo	r tiles			300 SF			П		
ttic			\boxtimes	VAT floo	r tiles			200 SF				-	믐
								200 35				ᆜ	닏
ame of Registered Waste Hauler		NJD		Hauler ID No.	Cubic Yar	rds of Wastell	Name of Regis	tered I	dell	Ш	Ц	Ш	Ш
Tech LLC			03378		TBE			icieu Lan	uiiii				
ity, State			33310		Disposa		T.R.R.F. Inc City, State						
ayne, NJ 07470					TBE								
ompleted By (Print or Type)	Title					nature /	Tullytown, P.	A	l Dec				
Jevtic	Owner				- 9	11	wic Wend	. (Date				
B-41 Y 11							- wend	i or	03/2	3/18			

Check#3016		NOTI		TION	OF ASE	BESTOS ABA 0 8:60 and 5:1		D. E.C.		W	E	
Date of Notification (1)				Name	of Building	Owner/Operator	(2)	IIII MAR 2	7	2018		TU,
	23 /	18		Ann W	/eins				5 VA 18			
Agencies Notified	Type Notificati	on		Street	Address			ASBESTOS	100	ITD	1 9	
☑ EPA ☑ DOLWD	☐ Amended							LICE)L a	
☑ DHSS	Amendmen	it#		City, S	tate, Zip C	ode		Brown management and a second	A DESCRIPTION OF	MATERIAL STATE	resultane en	
☐ DCA	☐ Emergency		1	****	m, NJ 07							
(NJAC 5:23-8)	justification				of Contact			Telephone Number	ŧΓ			
	Cancellatio	n ————		Ann W	500.00	£1						
				FAC	CILITY IN	FORMATION						
Name of Facility Where A	Abatement is Ta	king Place	(3)				Type of Facilit					
Private house							School (K-	12) r 8 (Other than K-1 2)				
Street Address							Other (i.e.,	private and commerci	al bui	Idings	\$,	
C(1- /5)							homes, etc		Total	I - A -		_
City (5)							Square Feet	# of Floors	Bla	lg. Ag	е	
Chatham, NJ 07928 County (6)				Count	v Code (7)	STATE USE ONLY)	Current Hee (Prior if being demolish	ad\			_
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Morris Name of Monitoring Firm	Hired by Buildin	na Owner (8) [ASCM I	No	Name of Abatem	ent Contractor (91			7.7.4	-
		g	, ,	100W	10.		ient contractor (5)				- 1
Street Address												
	576 Valley Rd #283											
City, State, Zip Code	576 Valley Rd #283											
						Wayne, NJ 074						
Project Manager for Mon	itoring Firm		Tele	phone I	No.	Telephone No.		License No.				
(973-638-1777		01127				
Start Date (10)		cheduled C				Name of OSHA	Monitor					
04 /02 /	18	_04_/	03	_ / _	18	Envirovision C	onsultants,Inc					
Occupancy Status Durin	T (5)					Street Address						
Facility Closed/Vacat					000 00 700 0	20-21 Wagarav		# 35E				
Abatement Performer Time of Abatement:					cribe AM	City, State, Zip (Code					
						Fair Lawn, NJ	07410					
Scope of Work (Check a	II that apply)							nination with negative legative Pressure	press	ure		
>3 sf or >3 lf > 160 sf or >260 lf			novati			Mini-En	closure		_			
≥ 160 st or ≥260 lt		∐ De	molitic	n		Gloveb Non-Ex	ag Procedure Lempted (*) and l	Tent with Negative Non-Friable Procedure	Press	ure		
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IN Facil		Cus	todial	Staff?	(1.6	surfacing, VA		SIF or LF)	ova	air	psul	Sur
(13)		-	(12)	Τ	-	other miscellan	eous)	52-17-1, 52-17-20-101.	-		ate	(0)
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Garage			LL.	\boxtimes	Duct ins	ulation		150 SF				Ш
Basement-closet				X	VAT flo	or tiles		50 SF	X			
			П						П	П		П
Name of Registered Wa	ste Hauler		N.JI	EP Waste	e Hauler ID No.	Cubic Yards of Wa	ste Name of Re	gistered Landfill				
- 5												
Gr Tech LLC City, State				003378	53	TBD Disposal Date	T.R.R.F. Ir City, State	ic	- 1			
AND THE STATE OF T							1	DA				
Wayne, NJ 07470 Completed By (Print or 1	Tyne) I	Title	7.55			TBD Signature	Tullytown,	PA	ie.			-
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N.Jevtic ASB-41		Owner					Tente wen	ad 03/	23/18	5	-	

		(Pursu	ant to NJAC 800	0/and 12:120)	1 1	Im	EC			\mathbb{V}	
Date of Notification (1)		Name	of Building Ow					THE REAL PROPERTY.			
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Agencies Notified / Type Notification		Succi	Addiess			17.5	181 1A	11 4	3	2016	1
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DOH justification)	nuanig		of Contact			Falanhos	Nimhei		Sea Strongelie	-ucus reseas	
□ DCA □ Cancellation			R GIC						-		1
Name of Facility Where Abatement is Taking Pla	ce (3)	FA	CILITY INFOR	CIVIATION	Type of Facility (4	4)					
	LMAN	כ			☐ School (K-1:	2)					
Street Address				ę.	Subchapter 8 Other (i.e. pr	(Other than rivate & com	K-12) mercial bu	ilding	s, hon	nes, et	c.)
City (5)			· · · ·		Square Feet	# of Floo	ors	Blo	g. Ag	ge A r	
SUMMIT					2200] Z		1	1)	AC	_
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Name of Monitoring Firm Hired by Building Own	ner (8)	AS	CM No.	Name	of Abatement Contr		ω_				-
Traine of Monaching I am Trace by Sanding of the	.0. (0)	1.20									
Street Address				1	t Removal Address			100 14			
					South Ri	ver S	treet				
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D. W. C. M. Harris		Tolon	hone No.		kensack, one No.		ense No.	_			\dashv
Project Manager for Monitoring Firm		Teleb	HONE INO.	1		100000	00388				
Start Date (10)	Scheduled Co	ompletion	Date (11)	Name	- 3 2 9 - 7 4 4 4 of OSHA Monitor		00200				\neg
4/5/18	4/6	118	•	Omes	ga Enviro	nment	a.l				
Occupancy Status During Abatement (Check Only	y One)				Äddress						
☐ Facility Closed/Vacated During Entire Period ☐ Abatement Performed Outside of Normal Facility	mility Llour				Huyler S tate, Zip Code	treet		-			
Other - Describe: 730 AM TO	2:00	PM			h Hacken	sack	N.T O	760	16		1
Scope of Work (Check All That Apply)				Jour	on macken	Dack.	110 0	7.00			
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☐ ≥160 sf or ≥260 lf	□ Dem	olition			Mini-Enclosure Glovebag Proce	edure					
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TO BE ABATED		enance/			lation, surfacing,	(Speci SF or I		Ren	Re	incar	Encl
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DAX. C.			INCIONE	3431011	10000	110.	1	7			
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Name of Registered Waste Hauler		NJDEF	Waste	Cubic Yards	Name of	Registered La	andfill				-
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Best Removal Inc City, State		(77	109	Disposal Date		rva Er	rterp	ris	205	, ,	LLC
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Hackensack, N.J. 07601 Completed by	Title			Signature		عسسع	Date	,		1	
J. Maiorano	Esti	mato	r	λ	Moioro	und	-	3/2	3	18	
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ASB-41 (R-06-08)					Do not use this for	in for aspesto	o nocisul	CACI	-picu	ave: V I	

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03/22/2018				rd Barry	TON OPERATO	(2)				8 515		a company
	Notification		Street A	Address				ASSE	\$708	CON	TRO	L &
The state of the s	nitial Amended		City, Sta	ate, Zip Code					LICE	45th	G	-
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ĭ DOH _ j	ustification) Cancellation			f Contact rd Barry				Telephone N	umber	-		
				LITY INFORM	ATION					-		
Name of Facility Where Abatem House	ent is Taking Place (3)		25		Туре	of Facility (4))				
Street Address							School (K-12 Subchanter 8) I (Other than K-	12)			
						×		vate & commer		dings	, hom	es,
City (5)			**************************************			Squa	re Feet	# of Floors	100	Bldg. A	Age	
Teaneck County (6)			Country	Codo (7)		N/A	-411a - 75.2	N/A		N/A		
Bergen				Code (7) USE ONLY) _		Hou		if being demoli	sned)			
Name of Monitoring Firm Hired N/A	by Building Owner (8)		ASCN	∕l No.			tement Contr ement, Inc					
Street Address	<u></u>					Addre	55	10				
City, State, Zip Code							gren Aveni ip Code					
Androuwer Controller (Androuwer Androuwer Controller (Androuwer Androuwer A							J 07512					
Project Manager for Monitoring	Firm		Telepho	ne No.	100000000000000000000000000000000000000	hone N 345-8		License 01311	No.			
Start Date (10) 04/02/2018	04/03/2	2018	npletion	Date (11)			HA Monitor ement, Inc					
Occupancy Status During Abate						Addres	ss gren Avent	10				
Facility Closed/Vacated Du Abatement Performed Outs Other – Describe: occupied	side of Normal Facility	Abaten / Hours	nent S		City, S	State, Z	ip Code IJ 07512	1 C				
Scope of Work (Check All That A	Apply)				, 510	, 11						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Total Control of the	Renova Demolit			>	Mir Glo	ni-Enclosure ovebag Proce	nt with Negative dure (*) and Non-Fria			e.	
	Is	Locat	ion							Abate	emen	t
Location of	Llas	Normal ed Sole		Acharte	Description		(4004)	Α	-	Ty	/pe	
Asbestos-Containing Materia TO BE ABATED In Facility	Ma (ACIVI)	intena todial (nce/	(i.e. the	Containing Normal system aurfacing, VA	s insula		Amount (Specify	Rer	Re	Encapsulate	Enc
(13)		(12)			ner miscellar			SF or LF)	Remova	Repair	psula	Enclosure
	Yes	No	N/A						=		ate	e,
Basement		Х		Р	ipe Insula	ation		150 LF	Х			
Name of Davidson 199												
Name of Registered Waste Haul D&S Abatement, Inc.	er	F	IJDEP W lauler ID	No. of	wbic Yards Waste		100000000000000000000000000000000000000	egistered Landfi anagement (
City, State			0996		BD sposal Date		City, State					
Γotowa, NJ					BD	10	Morrisvill	e, PA				
Completed by Dliver Hegedis	Title	ot 3.4		L	Signature	# /	11/		ate			
Jilvel Heyeuls	I Proie	CL IVIE	anager		300000	11 11	1		3/22/	11118		

		NOTI		tate N	wVer	sey D			[m	E C	; E			int F
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X EPA X Initial Amended Amendmer	nt#			ate, Zip C Hills, N		78			le reconseque	DENTAL SERVICE OF THE	e - retur presentation	CARLES APPLIES	STATE STATE	****
DOH Emergency justification Cancellatio)	g		of Contact					l Tele	enhone N	lumber			
Name of Facility Mr.			FAC	ILITY INF	ORMA	TION								
Name of Facility Where Abatement is Taki House	ng Place	(3)					Тур	e of Facility	(4)					
Street Address							×	School (K- Subchapte Other (i.e.)	r 8 (Othe	er than K	-12) rcial bui	ldings	, hom	es,
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County (6) Essex			County (STATE	Code (7) USE ONLY	·			rent Use (Pri use						
Name of Monitoring Firm Hired by Building N/A	Owner (8	3)	ASCI	M No.		Name D&S	of Ab	atement Con tement, Ir	ntractor	(9)				
Street Address						Street								
City, State, Zip Code							-	ngren Ave	nue					
only, entite, Esp code								Zip Code NJ 07512						
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph 973-3	none N	No.		License 01311	No.			
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Abatement Performed Outside of Norr Other – Describe: Occupied	mal Facilit	y Hours	S			City, S	tate, 2	Zip Code NJ 07512						
Scope of Work (Check All That Apply)														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit				×	Mi Gl	ull Containme ini-Enclosure lovebag Proc	e cedure					
	lo	s Locat	ion			133	1 110	on-Exempted	a (*) and	Non-Fria	able Pro	(50.0)	e ement	
Location of		Normal ed Sole	ly		D	escription	of						ре	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	aintena stodial s (12)	nce/		therm surf	ntaining M al systems acing, VA miscellan	insul T, or	lation,	(Sp	nount pecify or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A								<u>a</u>		late	IГе
Furnace Room		X			F	loor tile:	S		120) SF	Х			
Name of Registered Waste Hauler		N	JDEP W	aste	Cubi	c Yards		Name of F	Register	ed Landfi	H			
D&S Abatement, Inc.		Н	auler ID 0996		of W	aste		Waste N	Manage					
City, State Fotowa, NJ					Disp	osal Date		City, State Morrisvi		o-				
Completed by Dliver Hegedis	Title Proje	ect Ma	nager		1100011000000	Signature	N	10111301	inc, FA	D	ate 3/22/2	2018		
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Deshot use this form in exclusion licensure everapies activities.

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Agencies Notified Type Notification Erast Urange Board of Education ASSESTCS CONTROL & LICENSING EACH OLIVE Amendment Erast Urange Board of Education ASSESTCS CONTROL & LICENSING Each Olive Eac				Name	of Building	Owner/Operator (2)		MAR	27	201	8	
Agency A	_03 / _22 /	18		Ea	st Orar	nge Board of	Education						
199 4th Ave.		ation				igo Boara or	Ladoation	ASB	ESTO:	i CC	NTR	01.8	
Record				199	4th A	ve.						OL G	
				City, S	itate, Zip C	Code							
Name of Facility (Neuroscience) Name of Contact Telephone Number Sqr.2-33-7300			ding '	Ea	st Orar	ge, NJ 0701	7						
Dario Lambkin FACILITY INFORMATION			-0.00 .0 0.	Name	of Contact			Telephone Num	nber		1100 8100 - 100 50		
Name of Facility (A) School (K-12) Schoo	☐ Cancella	tion		Dar	io Lam	bkin		973-233-	7300				
				FAC	CILITY IN	FORMATION							
Subchapter 8 (Other than K-12)	The second secon		ace (3)				Type of Facility (4)					
215 Dodd St.	Whitney E. Houston Aca	demy					School (K-12)		2.				
Dodd St.							Other (i.e., pr	Other than K-12	2) ercial bu	ildino	IS.		
East Orange							homes, etc.)			2	15.0		
County Code (7)x57ATE USE ONLY) Current Use (Prior if being demolished)	K and a second s						Square Feet	# of Floors	BI	dg. A	ge		
Sesex Section Secti				C	tu Cad- /7	VOTATE LIGE OF THE	0						
Name of Monitoring Firm Hired by Building Owner (8) ASCM No. O057 ACAGEMY Construction Inc. Street Address P. O. Box 385 City, State, Zip Code Oceanville, NJ 08231-0385 Project Manager for Monitoring Firm Forect Manager for Monitoring Manager for Monitoring Manager for Monitoring Firm Forect Manager for Monito				Coun	ty Code (/)(STATE USE ONLY)	Current Use (Prid	or if being demoli	ished)				
AHERA Consultants Inc. Street Address		dina Owr	er (8)	ASCM	No	Name of Abstan	ant Control to 100					_	
Street Address	The state of the s	ang Ow	(0)					lna					
P. O. Box 385				00.	31	inc.							
City, State, Zip Code	P.O. Box 385												
Totowa, NJ 07512 Totowa, NJ 07512								14					
Telephone No. Telephone No. Service Se	Oceanville, NJ 08231-03	385											
Start Date (10) Od	Project Manager for Monitoring Firm	,00	Te	lephone I	Vo.		01012	License No.					
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: ☐ AM- PM/ PM- AM ☐ City, State, Zip Code ☐ City, State ☐			60	09-652	2-1833	973-832-42	244	01155					
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement:AMPM/PMAM ☐ City, State, Zip Code ☐ City, State	E 52.02 N N 10					Name of OSHA N	lonitor						
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe ☐ Time of Abatement:AMPMAM ☐ Scope of Work (Check all that apply) ☐ ≥3 sf or ≥3 lf ☐ Z Renovation ☐ Demolition ☐ Demolition ☐ Demolition ☐ Glovebag Procedure ☐ Glovebag Procedure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure ☐ Scope of Work (Check all that apply) ☐ Asbestos-Containing Material (ACM) ☐ NF Facility ☐ (13) ☐ SE ABATED ☐ IN Facility ☐ (12) ☐ Yes No N/A ☐ Basement Classroom S-13 ☐ ☐ Transite wall board surfacing 420 SF ☐ Disposal Date ☐				<u> 17</u> / _	18	Same as a	bove						
Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement:AMPM/_PMAM City, State, Zip Code												$\overline{}$	
Scope of Work (Check all that apply) □ 23 sf or ≥3 If □ 2160 sf or ≥260 If □ Demolition □ Demolition □ Demolition □ Description of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) □ Transite wall board surfacing □ Glovebag Procedure □ Non-Exempted (*) and Non-Friable Procedure □ Signature □ Glovebag Procedure □ Non-Exempted (*) and Non-Friable Procedure □ Secription of Asbestos-Containing Material (ACM) Amount (Specify (I.e., thermal systems insulation, SF or LF) □ Description of Asbestos-Containing Material (ACM) (I.e., thermal systems insulation, SF or LF) □ Description of Asbestos-Containing Material (ACM) (Specify Observation of Asbestos-Containing Material (ACM) (I.e., thermal systems insulation, SF or LF) □ Description of Asbestos-Containing Material (ACM) (Specify Observation of Asbestos-Containing Material (ACM) (I.e., thermal systems insulation, SF or LF) □ Description of Asbestos-Containing Material (ACM) (Specify Observation of Asbestos-Containing Material (ACM) (I.e., thermal systems insulation, SF or LF) □ Description of Asbestos-Containing Material (ACM) (I.e., thermal systems insulation, SF or LF) □ Description of Asbestos-Containing Material (ACM) (I.e., thermal systems insulation, SF or LF) □ Description of Asbestos-Containing Material (ACM) (I.e., thermal systems insulation, SF or LF) □ Description of Asbestos-Containing Material (ACM) (Amount (Specify Observation of Observation of Asbestos-Containing Material (ACM) (I.e., thermal systems insulation, SF or LF) □ Description of Asbestos-Containing Material (ACM) (I.e., thermal systems insulation, SF or LF) □ Description of Asbestos-Containing Material (ACM) (I.e., thermal systems insulation, In Facility	☐ Abatement Performed Outside of N	re Period ormal Fa	of Abat	ement urs - Des	cribe	City Ctata 7ia C	3.						
□ ≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf Secondarian Se	Time of Abatement:AM	PM/_	P	Л	AM	City, State, Zip Ci	ode						
Secondation	Scope of Work (Check all that apply)												
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) Basement Classroom S-13 Description of Asbestos Containing Material (ACM) Yes No N/A Basement Classroom S-13 Description of Asbestos Containing Material (ACM) Maintenance/ Custodial Staff? (12) Yes No N/A Transite wall board surfacing 420 SF Description of Asbestos Containing Material (ACM) Specify (Specify (S						☐ Mini-End ☐ Gloveba	losure g Procedure						
Location of Asbestos-Containing Material (ACM) Used Solely by Maintenance / Custodial Staff? (12) Yes No N/A Basement Classroom S-13 Basement C			le I oo	ation		∐ Non-Exe	mpted (*) and Nor	-Friable Procedu			es pare		
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Basement Classroom S-13						other miscellane	ous)	O. O. L.	-		ılate	е	
Basement Classroom S-13 Pipe & Fitting Insulation	D		- 17		_				IZZI				
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Academy Construction Inc. 034422 6 Fairless Landfill City, State Disposal Date City, State Totowa, NJ TBD Morrissville, PA Completed By (Print or Type) Title Signature Date	Name of Registered Waste Hauler						Name of Regis	ered Landfill		1			
Totowa, NJ Completed By (Print or Type) Title Signature; Date		C.				6		andfill		v.			
Completed By (Print or Type) Title Signature Date	5.00							11 - DA					
		Title					Morrissvi		ate				
	John Geleski	PM				signagare,	HILA			1013	0		

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Date of Notification (1)	السا	-		f Building Owner/O			Г	- / 1			B 0	7 1	
3-23-18 Agencies Notified Type Notification				88 Route 1	0 W	est, L	LC	17)	E G	5		y l	E IF
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DOL Amendment	including	_		ate, Zip Code partanburç Contact	g, S(29	306		MAR	2)	20)18	
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-			FACI	LITY INFORMAT	TON				ASBESTO	FNS	SING	HUL	. či
Name of Facility Where Abatement is Taking	Place (3)				1011	Type of	Facility (4)		adamien.	DECEMBED 1		-
188 NJ - Route 10						□ Sc	hool (K-12)					
188 NJ - Route 10						□ Su	bchapter 8	(Other	than K-12) commercial b	uildin	gs, ho	mes, e	tc.)
City (5) East Hanover						Square F		# 01	Floors	1000	ldg. A		
County (6)						45,0			3	(60 y	rs.	
Morris			County (Code (7) USE ONLY)				if being	g demolished)				
Name of Monitoring Firm Hired by Building C	huner (9)		ASCN	5) 200000	Lv	Vac				57/200			
Whitestone Associate			ASCN	A NO.	1-11-20		nent Contra			_			
Street Address	J.S.			Wale live		ymout Address	in Env	iron	mental (٥٠.,	Inc).	
1600 Manor Drive					(STATE OF THE		s Aven	110					
City, State, Zip Code						State, Zip C		ue					
Chalfont, PA 18914							wn, P.	A 1	9401				
Project Manager for Monitoring Firm			Telephor	ne No.		one No.			License No.	-			
Jeremy Hassett			215-	712-2700	6	10-239	9-9920)	003	398			
Start Date (10)	Schedule			ite (11)	Name	of OSHA	Monitor						
4/13/18	4/1	7/18	3		E	HS Er	vironr	nen	tal, Inc.				
Occupancy Status During Abatement (Check O	55.				Street	Address			100	_			
 □ Facility Closed/Vacated During Entire Per □ Abatement Performed Outside of Normal 	riod of Aba Facility Ho	tement			4	115	outng	ate	Court,	Su	iite	上	
Other - Describe: building und	er con	struc	ction			tate, Zip C		A I	08056				
Scope of Work (Check All That Apply)	***************************************				IV	HORIC	itori, i	VU	00030				
≥3 sf or ≥3 lf	D I	Renovat	ion			T Euft C	`amtaimm	المائدة المائدة		200000			
≥160 sf or ≥260 lf		Demolit				Mini-l Glove	Enclosure bag Proced	lure	Negative Press Non-Friable P				
	T.	Locati	2.0			14011-1	skempled () and	Non-Friable P	rocea		ment	
Location of		Normal	ly	Da	scription	o.F					Ту		
Asbestos-Containing Material (ACM)		ed Solel		Asbestos Cont			CM)	А	mount				
TO BE ABATED In Facility	Fr. 2000/400	todial S		(i.e. thermal syste	ems insu VAT, or		facing,		Specify or LF)	Rer	Re	Enca	Enc
(13)		(12)			niscellar			31	OI LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A							-		ite	6
Roof				roof fla	shi	ng		2,4	00 SF	X			
Name of Registered Waste Hauler			JDEP W			1	Name of R	egistere	ed Landfill				-
Newark Carting		-	auler ID 4509		^{te} 0 ⟨	,	Mii	ner	va Lar	ndf	ill		
Newark N.J					7/18		City, State		esburg				
James Kelly	Title	Dro	sider		ignature	Min	MON	1	Date				
darries relig		116	SIUCI	IL \	VATI	(/ W ()	ILXXII	110		3-1	23-	IQ	

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

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Date of Notification (1)		(P	Name o	Building O	60 and 12:12 Wner/Operato	r (2)	-	MAR	27	201	8	
3/23/18 Agencies Notified Type Notification		_			Private H	ome						
	9		Street A	Address				ASBESTO			OL &	4
EPA Initial Amended		+	City, St	ate, Zip Code	е			LR	ENSI	NG		
DOL Amendmen				City NJ 08	800							
DOH justification)		Name of	of Contact				Telephone No	umber			
	100		90000	ILITY INFOR	RMATION			1		-		
Name of Facility Where Abatement is Takin	ng Place (3)				Тур	e of Facility (4)				
James Douglas Private Home Street Address							School (K-12	2) 8 (Other than K-	12)			
out of Address						岗	Other (i.e. pr	ivate & commer	12) cial bui	ldings	, hom	es,
City (5)			-			Squ	etc.) are Feet	# of Floors	- 11	Bldg. A	Age	
Surf City NJ 08008						15.5	00 +	2.		35+	3-	
County (6) Ocean				Code (7) USE ONLY)		1000		r if being demolis	shed)			
Name of Monitoring Firm Hired by Building	Owner (8)	i	ASCI		Name		ouse & gara patement Cont				-032	
N/A	Owner (o)		7001	W 140.		naco		ractor (9)				
Street Address					Stree	t Addre	ess	5,4				
City Otata 7ia Oada						Box :						
City, State, Zip Code							Zip Code rlin NJ 0809	0.1				
Project Manager for Monitoring Firm		-	Telepho	ne No.		hone N		License	No			
Θ.							-9800	00727	10.			
Start Date (10)	**************************************		npletion	Date (11)	The state of the s		SHA Monitor					
4/6/18 Occupancy Status During Abatement (Che	4/13/1	7.2			San							
Facility Closed/Vacated During Entire	53	(5)	ont		Street	Addre	ess					
Abatement Performed Outside of Norr Other – Describe:	mal Facility	/ Hours	ient		City, S	State, 2	Zip Code					
Scope of Work (Check All That Apply)										-		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	MATERIAL PROPERTY.	Renova Demolit				M GI	ini-Enclosure lovebag Proce	nt with Negative edure (*) and Non-Fria				
	le	Locati	on				on-Exempled	() and Non-Fina	DIE FIC	V 115 115 115 115	emeni	
Location of	1	Vormal	ly		Description	n of			_	Ту	/ре	
Asbestos-Containing Material (ACM) <u>TO BE ABATED</u>	Ma	ed Sole intenar	nce/		Containing I ermal system			Amount (Specify	70		E	ш
In Facility (13)	Cus	todial S (12)	Staff?	,	surfacing, VA	AT, or		SF or LF)	Remova	Repair	Encapsulate	Enclosure
(15)	Yes	No	N/A	0	urier miscella	neous,	'		Val	=	ulate	ure
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Exterior Siding			^		Exterior Si	ung		2500SF	X			
										-		
Name of Registered Waste Hauler		7 1 5555	JDEP W		Cubic Yards		Name of R	egistered Landfi	II			
United Containers		11	auler ID 2459		of Waste 4		G.R.O.V	V.S.				
City, State Elm NJ					Disposal Date	•	City, State	II. DA 40007				
Completed by	Title				4/13/18 Signature	7	IVIOTTISVII	lle PA 19067	ate			
Anthony T Perna		ident			Signatur	P	2	0.0	ate 3/23/1	8		

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Date of Notification (1) 03-22-2018					of Jesus (Latter-day S	Saint	L MA	R 2	7	2018	
Agencies Notified Type Notification	G.			Address			. 01	Lattor day t				84778X-0417	Maria Maria Maria	
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EPA DEP DOL Initial Amended Amendmen	t #	=07= 84		ate, Zip C	ode est Virgini	ia 26	555	-1968	Lancestone		LIVE	NOT	-	Amususki ja
□ Emergency justification □ DCA □ Cancellation		,		of Contact		.u 20		1000	Tel	ephone Nu	mber			_
DCA Cancellation														
Name of Facility Where Abatement is Takin	ng Place ((3)	FAC	ILITY INF	ORMATIO	N	Typ	oe of Facility (4	1)					
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Street Address 47 Bassett Highway							×	Subchapter Other (i.e. pr	8 (Oth			ldinge	hom	96
City (5)							_	etc.) uare Feet				- 15		
Dover								,450	2	f Floors		Bldg. / 32+	Age	
County (6) Morris				Code (7) USE ONL	n			rrent Use (Prio arehouse	r if bei	ing demolish	ned)			
Name of Monitoring Firm Hired by Building	Owner (8)	ASC	M No.				batement Cont Safety LLC	tractor	(9)				
Street Address					1	Street 22 T		ress Lane						
City, State, Zip Code								Zip Code						
			Telepho					Park, NJ 070	035					
	roject Manager for Monitoring Firm						276-	-0099		License N 01317	0.			
Start Date (10) 04-02-2018	04-07-	2018	npletion	Date (11)				SHA Monitor afety LLC						
Occupancy Status During Abatement (Chec						Street								
Facility Closed/Vacated During Entire Abatement Performed Outside of Nom	Period of a	Abaten y Hours	nent			22 Tr	87	Zip Code						
Other – Describe:								Park, NJ 070	035					
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf	[V] .	_					1 _					S 200		
≥160 sf or ≥260 lf		Renova Demolit				×	N G	ull Containmen fini-Enclosure Glovebag Proce Ion-Exempted	edure	570				
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Location of		Normal ed Sole	ly			ription			2.		-	Ту	/pe	
Asbestos-Containing Material (ACM) <u>TO BE ABATED</u>	Ma	intena	nce/	Asbes (i.e.	stos Contair . thermal sy	/stems	s insu	ulation,		mount specify	Re	7	Enc	E I
In Facility (13)	000	(12)	Juli :		surfacin other mis				SF	or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A								<u>a</u>	7	late	lre
					Continue	ed Pa	age	2						
Roof Wall		X		Meta	al Sheet	Caul	king	, Blue	1	7 SF	Х			
Roof (West Side)		Х			Tra	nsite			50	0 SF	Х			
1st Floor Interior East Side		Х		Wate	erproofing	y Mas	stic ((Black)	40) SF	Х			
Name of Registered Waste Hauler		100 100 100 100 100 100 100 100 100 100	JDEP W		Cubic Ya			Name of R						
Newark Carting Inc/United Safety L	LC	10220		036820		v.		IESI Lan	dfill/	GROWS	Land	llift		
City, State Newark, NJ/Lincoln Park, NJ					Disposal TBD	Date		City, State Bethlehe	m, P	A/Tullytov	vn, F	PA		
Completed by	Title				Sigr	nature			1	Dat	e			
Vanco Petkov	Proje	ct Ma	nager		-	11	20	12/24	5	03 معلى	-22-2	2018		

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Date of Notification (1) 03-22-2018			4.5		of Building Church o				atter-day	Saints	s M	AR	2 7	20	18			
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	justification)	ncluding		Name o	of Contact					Tel	ephone	Numl	ber					
Name of Facility Where	Abatament is Taking	Dlace (3)	FAC	ILITY INF	ORMAT	ION	Tues	of Fooility	(4)								
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City (5)	Bassett Highway (5) (5) (6) (6) (6) (6) (7) (7) (8) (9) (9) (9) (9) (9) (9) (9) (9) (9) (9								etc.) are Feet	# o	f Floors		В	ldg. A	ae			
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County (6) Morris					Code (7) USE ONLY		_		ent Use (Pr ehouse	ior if bei	ng dem	olishe	ed)					
Name of Monitoring Fire	m Hired by Building O	wner (8))	ASCI	И No.				atement Co fety LLC		(9)							
Street Address	<u> </u>						Street 22 Tr											
City, State, Zip Code									ip Code ark, NJ 0	7035								
Project Manager for Mo	onitoring Firm			Telepho	ne No.		Teleph 973-2				Licens 0131		y,					
Start Date (10) 04-02-2018		Schedul 04-07-		pletion	Date (11)		\$10.00 mg/10.00		HA Monitor fety LLC	1)								
Occupancy Status Duri	ng Abatement (Check	Only Or	ne)				Street	Addre	ss									
× Facility Closed/Va	cated During Entire Pe	riod of	Abatem															
Other – Describe:		I Facility	y Hours	urs City, State, Zip Code Lincoln Park, NJ						7035								
	All That Apply)						_	7										
			Renovat Demoliti				×	Mii Glo	II Containm ni-Enclosur ovebag Pro n-Exempte	e cedure								
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In Fac	of Monitoring Firm Hired by Building Over Address State, Zip Code It Manager for Monitoring Firm Date (10) 2-2018 Pancy Status During Abatement (Check of acility Closed/Vacated During Entire Perbatement Performed Outside of Normal Other – Describe: of Work (Check All That Apply) 3 sf or ≥3 If 160 sf or ≥260 If Location of bestos-Containing Material (ACM) TO BE ABATED In Facility (13) Ground 1st Roof Base ound 1st Roof Parapet Wall		todial S (12)	tam?	,	surfac	cing, VA	T, or			or LF)		Remova	Repair	Encapsulate	Enclosure		
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Ground 1st Root	f Parapet Wall		Х			Flas	shing T	ar		1	7 SF		Х					
Main Roof Parap	et & Vent Duct		Х			Flas	shing T	ar		1:	5 SF		Х					
			X			C	anopy			90	0 SF		Х					
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City, State Newark, NJ/Lincoln	Park, NJ					Dispos TBD	al Date		City, Stat Bethleh		A/Tully	ytow	n, P	Α				
Completed by		Title	-4.5.5			S	ignature		5			Date		045				
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Name of Facility Where Abatement is Taking	Dlaga (3)	FAC	LITY INF	ORMATIC	N	T	- # F: III - / 4)						
Proposed Church	Place (3)					Туре	of Facility (4)						
Street Address 47 Bassett Highway							×	School (K-12) Subchapter 8 Other (i.e. pri etc.)	(Other			ildings	, home	es,
City (5) Dover							Squa 41,4	are Feet	# of F	loors		Bldg. 62+	Age	
County (6) Morris				Code (7) USE ONLY)			ent Use (Prior rehouse	if being	demo	lished)			
Name of Monitoring Firm Hired by Building O	wner (8))	ASCN	I No.				atement Contr afety LLC	actor (9)				
Street Address					100	Street 22 T					25-2-2-7			
City, State, Zip Code								Zip Code ark, NJ 070	35					
Project Manager for Monitoring Firm	ect Manager for Monitoring Firm					Teleph 973-			11 535	icense				
	Schedul 04-07-		npletion	Date (11)				HA Monitor Ifety LLC						
Occupancy Status During Abatement (Check	Only O	ne)				Street						- 1.01		
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe:							tate, Z	ane ^{Zip Code} ark, NJ 070	35					
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st Floor Interior West Side (Middle)		X			rproofin		-		70		X			
Name of Registered Waste Hauler Newark Carting Inc/United Safety LL0	С	Н	JDEP Wauler ID 4509/00		of Waste			Name of Re	7.			dfill		
City, State lewark, NJ/Lincoln Park, NJ					Disposa TBD	I Date		City, State Bethleher	m, PA	/Tully	town,	PA		
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NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to M.V.A.C. 8:60 and 12:120) 3/22/18 4 om Date of Notification (1) Name of Building Owner / Operator (2) 3/22/18 County of Monmouth Agencies Notified Type Notification Street Address Special Services Complex, 2nd FIr, 300 Halls Mill Road ☐ EPA 2018 DEP Initial City, State & Zip Code $\overline{\boxtimes}$ DOL Amended Freehold, NJ 07728 GS CONTROL & Telephone Number \boxtimes DOH Emergency \boxtimes Name of Contact DCA Cancellation Casey Hornstra 732-431-7760 FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Monmouth County Courthouse School (K-12) Street Address Subchapter 8 (Other than K-12) 71 Monument Road Other (i.e. private & commercial buildings, homes, etc.) Square Feet # of Floors Blda. Age City (5) County (6) County Code (7) 45000 55+ Freehold Monmouth Current Use (Prior if being demolished) Courthouse Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) NV5 00030 Bristol Environmental, Inc. Street Address Street Address 850 Bear Tavern Road 1123 Beaver Street City, State & Zip Code City, State & Zip Code Trenton, NJ 08628 Bristol, PA 19007 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number Ryan Broadwater 609-323-2555 (215)788-6040 00509 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 3/23/18 3/24/18 Bristol Environmental Inc. Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 1123 Beaver Street X Abatement Performed Outside of Normal Hours - 7am to 3pm City, State & Zip Code Describe: 5:00 PM - 1:30 AM Bristol, PA 19007 Facility Occupied During Abatement Scope of Work (Check all that apply) Full Containment with Negative Pressure ≥3 sf or ≥3 If Renovation Mini-Enclosure ≥160 sf ≥260 If Demolition Glove Bag Procedures Non-Exempted and Non-Friable Procedure Location of Is Location Description of Amount Abatement Type Asbestos-Containing Normally Used Asbestos-Containing (Specify Material (ACM) Solely by Material (ACM) SF or LF) Encapsulate TO BE ABATED Maintenance or Enclsoure Remova (i.e., thermal systems Repair in Facility Custodial Staff? insulation, surfacing, VAT (13)(12)or other miscellaneous) Yes No N/A Mechanical/Storage Room Vibration Collar 16 SF \boxtimes Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste Service Transport Inc. 20990 1/2 Cu Yd Minerva Landfill City, State Disposal Date City, State New Castle, Delaware 3/26/18 Waynesburg, OH Completed By (Print or Type) Title Signature Date Gino Pizzigoni Project 3/22/18 Manager

State of New Jersey

Tom Voorhees, DOL

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Agencies Notified Type	Notification		Street	Address		,	Him				
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passag	Amended Amendment #		City, St	ate, Zip Code	Princ	ceton, NJ 08540			100000000000000000000000000000000000000		
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Name of Facility Where Abaten	nent is Taking Plac	e (3)	FAC	ILITY INFORMA	TION	Type of Facility (4	\			-	
	sidential	- (-)				School (K-1)					
Street Address						Subchapter	8 (Other than ivate & comr	K-12) nercial b	uildings	, hom	es,
	on, NJ 08540					Square Feet 2200	# of Floors	S	Bldg.		
County (6) Mercer				Code (7) USE ONLY)		Current Use (Prio	r if being den Residenti				
Name of Monitoring Firm Hired	by Building Owner	(8)		M No.	Name	of Abatement Conf		iai .			
MECS	(%)	5207			Stev	ens Environme	ntal Servic	es, Inc.			
Street Address PO Box 34	11				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Address Box 322					
City, State, Zip Code Chesterfield	d, NJ 08515	-				State, Zip Code stown, NJ 0850					
Project Manager for Monitoring Bill Weisgarber	Firm		Telepho	ne No. 98-4070	Teleph	none No. 259-9688		se No.			
Start Date (10) 4/5/2018	Sche			Date (11)	Name	of OSHA Monitor	0043				
Occupancy Status During Abate	ement (Check Only		10/2010		MEC Street	Address					
Facility Closed/Vacated Du	iring Entire Period	of Abater	ment		PO E	30x 341					
Abatement Performed Outs Other – Describe:	side of Normal Fac	ility Hour	S			tate, Zip Code sterfield, NJ 085	15				
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Name of Registered Waste Haul	er	I N	JDEP W	aste Cubic	Yards	Name of P	egistered Lar	odfill			
Stevens Environmental Se		583	lauler ID 18292	No. of Wa		Fairless	_	idnit.			
City, State Allentown, NJ			, .*		sal Date 9/2018	City, State	e. PA				
Completed by Mahlon E. Stevens	e oject Ma	anager		Signature		71.71	Date 3/2	6/18			
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Date of Notification (1) March 26, 2018			Name o	of Building	Owner/0	Operator	(2)		MAR	27	201	3	Lawrence of
Agencies Notified Type Notification			Street A						ASPERM	161 (C))	NTR	Oi. 8	1
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DOH Emergency justification)	•	3		of Contact					lephone N				
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Name of Facility Where Abatement is Takir	g Place ((3)	FAC	ILITY INF	ORMAT	ION	Type of Facility	/ (4)					
Vacant Residence							School (K						
Street Address							Subchapt Other (i.e.		er than K- & commer		ldings	, hom	ies,
City (5)							etc.) Square Feet	1#0	f Floors	1	3ldg.	Ane	Dillock!
Voorhees							1,100	2			-60	igo	
County (6) Camden				Code (7) USE ONLY)		Current Use (F Residence	rior if be	ing demoli	ished)			
Name of Monitoring Firm Hired by Building	Owner (8)	ASCN	M No.			of Abatement C	ontractor	(9)				
Vertex Street Address							ervices, LLC						
700 Turner Industrial Way, Suite 1	05						Address 3 National Ro	oad					
City, State, Zip Code Aston, PA 19014	13				,		tate, Zip Code n, PA 19341						
Project Manager for Monitoring Firm Dave Brown			Telepho	ne No. 45-6311		le de la constant	one No. 872-8884		License 01161	No.			
Start Date (10)				Date (11)		Name	of OSHA Monito	r	01101				
4/9/18 Occupancy Status During Abatement (Chec	4/20/1					EMS	Address						
Facility Closed/Vacated During Entire			ment				Route 130 No	orth					
Abatement Performed Outside of Norm Other – Describe: Vacant	nal Facility	y Hour	s			100000000000000000000000000000000000000	tate, Zip Code						
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TO BE ABATED In Facility	1000000	todial	Staff?		thermal		insulation,		Specify or LF)	Remova	Re	Encapsulate	Enclosure
(13)		(12)				niscellan			o, E,)	noval	Repair	sula	osure
	Yes	No	N/A									te	(0)
Basement			X			VAT		70	00 SF	X			
Basement / Stairway			X		Ceiling	g (textu	ured)	-	50 SF	X			
2nd floor			X	1/2000		VAT			00 SF	X			
Exterior Name of Registered Waste Hauler			X			,	15 each)		25 LF	X			
Waste Management	1 1000	NJDEP W Hauler ID		of Was			f Registe VS Lan	red Landf dfill	111				
City, State Trenton, NJ					Dispos	al Date	City, Sta Morris	ite ville, P	Ą				
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Date of Notification (1) March 26, 2018			Name of Linde,	f Building (LLC	Owner/C	perator	(2)		L	MA	R 2	7 21	018		ᆀ
Agencies Notified Type Notification EPA Initial		2		omerset		rate Bl	lvd,	Suite 700	00 A	800-6	0 (100)			8	
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DOH justification) Cancellation			Tom S							elepho 809-97					
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City (5) Pedricktown							Sq NA	uare Feet	1327	of Floo	ors		Bldg. A	ge	
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Name of Monitoring Firm Hired by Building O EHS	wner (8)		ASCM	l No.				batement C ices, LLC	ontract	or (9)					
Street Address 411 Southgate Court, Suite E						Street 303 B		ress ational Ro	oad						
City, State, Zip Code Mickleton, NJ	14							, Zip Code PA 19341		=					
Project Manager for Monitoring Firm Jack Carney		99	Telephor 356-22	ne No. 24-0080		Teleph 484-8		No. 2-8884		775553	ense N 161	lo.			
	Scheduled 5/4/18	Com	pletion [Date (11)		Name EMS		SHA Monito	ÞΓ				90		
Occupancy Status During Abatement (Check						Street 200 F		ress ite 130 No	orth						
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe: Vacant, former chemic	I Facility H		ent					, Zip Code inson, NJ							
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		ovat noliti				×	1 7	Full Contain Mini-Enclost Glovebag Pr Non-Exempt	ıre ocedur	re				е	
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Date of Notification (1)			Т	Name of	Building	Owner/C	perator	(2)		bed	1	MAH	21	2018				
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Project Manager for Monitor Dan Bruun						0 - 22	100000000000000000000000000000000000000	one No 872-88			License 01161	No.						
Start Date (10) 4/9/18		Scheduled 4/10/18	d Com	pletion I	Date (11)		Name EMS		A Monitor									
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Jack Bally Sr. Proje				Mana	ger	1	Dai	. /	3alla	Q))	3/23/18						



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Date of Notification (1) 3/23/2018			Name o	of Building (Owner/0	3339 32	r (2) awson				. (Л	100		
Agencies Notified Type Notification			Street A	Address					111		MAP.	2. 7.	× 00.	
			City, St	ate, Zip Coo		etuche	n, NJ	08840	j	L.	MAR	2	/ 200 -	8
DOH justification) Cancellation		' [Name o	of Contact Steven	Laws	son			Tele	phone N	Number		-N/ 4.	- 4
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Name of Facility Where Abatement is Takin Residential Street Address	g Place (3)						of Facility (School (K-1 Subchapter	2)	r than I	(40)	<u></u>		
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County (6) Mercer				Code (7) USE ONLY)	17		Curre	nt Use (Prid		g demo				
Name of Monitoring Firm Hired by Building MECS	Owner (8))	ASCI	M No.				tement Con			s, Inc.			
Street Address PO Box 341	PO Box 341						Addres	ss						
City, State, Zip Code Chesterfield, NJ 085						and the contract of the contract of	p Code NJ 0850	1						
Project Manager for Monitoring Firm Bill Weisgarber								D.		License				
Start Date (10) 4/2/2018	Schedul		npletion /5/2018	Date (11)		Name MEC		IA Monitor						
Occupancy Status During Abatement (Chec	k Only Or	ne)				Street	Addres	s						-
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe: 8 am 4 pm	Period of A	Abaten / Hours	nent			City, S		p Code	E15					
Scope of Work (Check All That Apply)						Cites	sterne	ld, NJ 08	010					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	Renova Demolit				×	Min Glo	Containme i-Enclosure vebag Proc i-Exempted	edure				re.	
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CK14607

Date of Notification (1)	I M	发展.		of Building	Owmork	Operator	- (2)	- 11	1	() () () () () () () () ()				~
3/23/18				Piekny	Owner	Operator	(2)	-		MAR	4.5	201	R	
Agencies Notified Type Notification	on		Street	Address						新作 小	2 1	L/92/5/	U	1
EPA Initial Amended			Cit. Ct	ata 7ia 0	- 1-				Ĺ.					i A
DEP Amended Amendme	nt #			ate, Zip C arest, NJ		7		-	k					
DOH Emergence	y (including			of Contact				17.	Tel	ephone N	ımber	- 5		
DCA Cancellati			Neil F								2111001			
Name of Facility Where Abatement is Tal	ing Place (3	1)	FAC	ILITY INF	ORMAT	ION	Time	of Facility /	4)					
Residential Home	ang ridoc (c	'/					_	of Facility (4	0.500 3.300					
Street Address		Pare I						School (K-1: Subchapter	8 (Oth	er than K-	12)			
								Other (i.e. p	rivate 8	& commerc	cial bui	ldings	, hom	es,
City (5) Demarest							Squar	re Feet	The state of the state of	Floors	31 3	Bldg.	-	
County (6)			County	Code (7)			3300		2	- 1 1		60+/-		
Bergen	¥/((STATE	USE ONLY)		Resi	nt Use (Pric	or it bei ome	ng demolis	shed)			
Name of Monitoring Firm Hired by Buildin	g Owner (8)		ASCI	M No.		Name	of Abat	tement Con	tractor	(9)			_	
Project Manager Street Address								Abateme	nt					
Street Address							Addres	s lland Ave						
City, State, Zip Code								p Code	•					
								ook, NJ 0	7663					
Project Manager for Monitoring Firm			Telepho	ne No.			one No			License I	No.		<u> </u>	
Start Date (10)	Schodulo	d Con	onlotion	Date (11)			600-3			01305				
4/2/18	4/5/18	u Con	npietion	Date (11)		Name	of OSH	A Monitor						
Occupancy Status During Abatement (Che	eck Only On	e)				Street	Addres	S						
Facility Closed/Vacated During Entire	Period of A	baten	nent											
Abatement Performed Outside of No Other – Describe: 8 A.M to 4 P.M	mal Facility	Hours				City, S	tate, Zip	Code						
Scope of Work (Check All That Apply)														
≥3 sf or ≥3 lf	× R	enova	tion] Full	Containme	nt with	Nedative	Dracei	ıre.		
≥160 sf or ≥260 lf	☐ D	emolit	ion			×	Mini	-Enclosure		regative	10330	ii C		
								rebag Proce -Exempted		Non-Fria	ole Pro	cedur	e	
	0.000	Locati											ement	t
Location of Asbestos-Containing Material (ACM)	Used	ormali i Sole	ly by	Ashes		scription aining M		(ACM)	۸-	nount		1,	İ	Н
TO BE ABATED In Facility		ntenar			thermal	systems	insulat		(S	pecify	Re	R	Enca	En
(13)		(12)				cing, VA			SF	or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A								<u>a</u>	'	ate	Ге
Basement		Х				VAT			22	2 SF	x			
Basement		Х			N	/lastic			18	4 SF	x			
											+			
											-			\vdash
Name of Registered Waste Hauler			JDEP W		Cubic '		Т	Name of R	egister	ed Landfil	1			\vdash
All Stages Abatement		1	auler ID 36592	5.055.025	of Was	ite		Grand C	entra	Sanitar	y Lar	dfill		
City, State					-	al Date		City, State						
Saddle Brook, NJ			8		TBD			Pen Argy						
Completed by Richard Cristofol	Title Presid	lent			Si	gnature	//				ite	,	10-11-01	
	1 16310	CHIL				M	111	40/		3/	23/18	5		

Ch 4442



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

Job #: 1803-2288

Date of Notification (1)				Nan	ne of	Bui	Idina	Owner / Opera	tor (2)		1 1 1	m 17	9 9	-		4:1
3.22.18				The	oma	s To	oolar	Owner / Opera	101 (2)		11.1	1111		0.01	n.	Table of the second
Agencies Notified Typ	e Notific	ation		Stre	et A	ddre	ss				14 1-1	1755 61	6	201	ŏ	F17924
DEP] Initia	I		City	Sta	te &	Zip (ode.								-
□ DOL □							VJ 07				7	oute 6		2	-1.4	
□ DOH □		rgency					ntact						eleph	one N	lumh	er
□ DCA □	_ Cano	cellation	- 1	The	mas	s To	oolar	İ				-				
				F	ACIL	ITY	INF	ORMATION								
Name of Facility Where Residential Property	Abatem	ent is Taking Pl	ace (3	3)				Type of Fac						n-c		
Street Address								School								
								Other (apter 8	(Other ti	han K-12)	م الماليين			4- \	
								Square Fee	t.c. piiv	# of FI			ldg. Ag		etc.)	
City (5)		County (6)	Co	unty	Cod	le (7)	1,924		1	00.0	1	972			
Freehold, NJ		Monmouth						Current Use	(Prior	if being	demolished			11-2-11		
Nama of Manitaria - Fire	11. 11							Residence	Section 113							
Name of Monitoring Firm Finog Environmenta	i Hired b	y Building Own	er (8)		Α	SCN	M No.		atemen	nt Contra	actor (9)					
Street Address								Asbestos : Street Addre	and IVI	old Sei	rvices, Co	rp.				_
617 Stokes Rd., Suite	4-318							3859 Sylor								
City, State & Zip Code Medford, NJ								City, State &	Zip Co	ode						
Project Manager for Mon	itorina F	irm	Telep	hon	a Niu	mho	ar.	Hainespor Telephone N			D .					
Finog Environmental			888-7				71	609-702-04			Lice	nse N	umber 9800	2		
Scheduled Start Date (10		Scheduled Com	pletio	n Da	ate (11)		Name of OS		nitor			0000	-	_	
4-6-18 Occupancy Status During		1-6-18						EMSL Ana								
Facility Closed/V	acated [During Entire Pe	riod o	e) of At	aten	nent	65	Street Addre								
Abatement Perfo	rmed Ou	itside of Norma	l Hou	rs			•	City, State &	-							-
Describe:								Westmont,								
Scope of Work (Check a	Il that an	m la d														
Coope of Work (Check a	п шасар	piy)							\square	Full Co	ntainment v	with No	activo	Dros	01150	
≥3 sf or ≥3 lf			\boxtimes	Re	nova	tion					iclosure	WHIH INC	En			- 1
≥160 sf ≥260 lf				De	molit	ion					Bag Procedi	ures	4-17	46	- L.L.	
Locatio	n of									Non-Ex	empted and	d Non-	Friable	Pro	cedu	re
Asbestos-Co		,	IS L Norm	oca allv		4		Descriptio Asbestos-Cor		r.	Amou	0.000	Aba	teme	ent T	/pe
Material (So	lely	by			Material (A	CM)		(Spec				ш	_
TO BE AE		100	Mainte Custo				:	(i.e., thermal s	systems	S	25/1/2 (854)		Ren	Re	ncar	incl
(13)		Ľ		(12)	Otali			or other miscell					Remova	Repair	Encapsulate	Enclsoure
			Yes	No	N/A	A				-,			-		ate	œ
Right Rear Bedroom				\boxtimes	LE] F	loor	Tile & Mastic	:		100 SF					
			$\dashv \vdash$	片	 	1										
	7.7.		\dashv	H	+	+							11	님	닖	밁
			H	H	┢	1							H	뮈	H	뷔
												-	-	H	H	Η
Name of Registered Was	te Haule	r						Cubic Yards	Name	of Reg	istered Lan	dfill				_
Freehold Cartage				Ha	uler 02	1D N 265	NO.	of Waste	GRO	ws						
City, State Trenton, NJ								Disposal Date	City, S	State	ese estati					\dashv
Completed By (Print or Ty	(ne)			7	1-			Y. (1)	Morri	isville,	PA					
Joann Mullarkey	pe)			Tit	_{le} dmi	n	5	Signature	701	7.1	1,1		Date	40		
				1	41111	11.		Jeen-	11/	ull	aycey	1	3.22	18		
							1/	1	- 1							



Job #: 1803-2287

Date of Notification (1)				Na	am	e of	Build	ding	Owner / Opera	tor (2)		En E			1.2		
3.22.18 Agencies Notified	Type N	otific	ation		Je	nn	nife	r & .	Jose	eph Krencick	i	1.1	M:		2 4	0010			
☑ EPA	i ype iv	Othic	ation		St	ree	et Ad	ldres	SS	100				MAh	21	ZU10		hinner hinner	7
☐ DEP	\boxtimes	Initia	ſ		Ci	tv.	State	e & 7	Zip (Code			-			_			_
□ DOL		Ame	nded							J 08505		1	7	1 5			م گارین	7	
DOH DOH			rgency		Na	ame	e of	Cont	tact				T -5.	1	Te	lepho			er
☐ DCA	Ц	Cano	ellation		Je	nr	ifer	Kre	enci	cki					-				O.
						FA	CIL	ITY	INF	ORMATION	75.5	-110	-11		_i_				
Name of Facility Whe	ere Aba	atem	ent is Taking F	lace	(3)					Type of Fac	ility (4	1)							
Residential Prope Street Address	rty									School	A STATE OF THE STA	*							
Street Address										Subcha	pter 8	(Other t	than K-1	12)					
										Other (i				ial build				etc.)	
City (5)			County (6)	To	`OUD	ty	Code	e (7)	Xê	Square Fee	t	# of F	loors			g. Ag	Э		
Bordentown, NJ			Burlington		Journ	Ly '	ooue	= (1)		1,200	/Drie	3	-l 17	- L - D	185	0			
			Darnington							Current Use Residence		i ii being	aemoii	snea)					
Name of Monitoring F	irm Hi	ed b	y Building Owi	ner (8	8)	_	IAS	SCM	No			nt Contr	actor (0	1			-		
Finog Environmen	ntal	25/0:A15%			-/		"		110.	Asbestos	and I	/lold Se	rvices	Corn					
Street Address								1-41111		Street Addre	ss		111000	, оогр.	-				
617 Stokes Rd., St City, State & Zip Code		318								3859 Sylor						-			
Medford, NJ 08055										City, State &									
Project Manager for M		na F	irm	Tele	enho	ne	Nun	nber		Telephone N				1.1				_	
Finog Environmen	tal				3-71					609-702-04		er.	- 1	License		ber 0086	2		
Scheduled Start Date	(10)		Scheduled Cor							Name of OS		onitor			,	0000		_	
4.5.18			1.5.18							EMSL Anal	lytica								
Occupancy Status Du Facility Closed	ring Al	aten	nent (Check or	nly or	ne)	۸ ۱۵ -				Street Addre									
Abatement Pe	erforme	d Ou	itside of Norm	elloc	101/	SUP	item	ent		107 Haddo									
Describe:	,,,,,,,,,,	u 00	itside of North	ai i iC	Juis					City, State &									
Isolated Area										Westmont,	NJ U	8108							
Scope of Work (Check	k all tha	at ap	ply)														1.00		_
≥3 sf or ≥3 lf				K-7	-			21				Full Co	ontainme	ent with	Nega	ative	Pres	sure	× .
≥3 \$1 01 ≥3 11 ≥160 sf ≥260 I	f			M			ovat				\boxtimes		nclosure						
100 01 = 200 1	•			Ш	D	en	olitio	on					Bag Pro				122		
	ation of			ls	Loc	atio	on	T		Description	n of	NON-EX	rempted	and N	on-Fr				
Asbestos				Nor	mall	уL	Ised			Asbestos-Con	tainin	g	1.11	Specify	-	Abat	eme	ent 1)	/pe
Materia TO BE					Solel					Material (A	CM)	70		or LF)		_		m	_
	acility			Mair					in	(i.e., thermal s sulation, surfac	ystem	IS /AT				ζem	Repair	cap	ncle
(13)			F-25000	(12	2)				or other miscell	aneou	is)				Removal	bair	Encapsulate	Enclsoure
				Yes	N		N/A								8			te	Ф
Basement										nsulation			7LF					П	П
Basement		12001		H		1	닏	Me	esh	w/ Troweled	on A	sb.	10 SF						
				井	╀╞	4	님	-											
				H	⊬	+	ዙ	-	2,000										
				H	H⊨	╁	H	+								Щ	4	Щ	ᆜ
Name of Registered W	aste H	aulei	,		1	171)EP	Was	ste l	Cubic Yards	Nam	e of Reg	istered	l andfill				Ш	Ш
							ler I	D No		of Waste	INGIII	ie oi iveg	jistereu	Lanuilli	5				
reehold Cartage							022	65			GRO	ows							
City, State Frenton, NJ										Disposal Date		State							
Completed By (Print or	Typo				1	7/1					Mor	risville,	PA						
loann Mullarkey						itle			5	Signature		V	, /	3	18.0	ate			
manarkey					-	4U	mir	1.		Gom		100,	11/10	alca	/ 3.	22.	18		
							_			Allan	- 1	1/11	1160	TEE	2				

CK4ccq1

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

Job #:1803-2285

Date CN CG 11				<u>.</u>		[F]	17 [
Date of Notification (1) 3.19.18	Nam	e of Building	Owner / Operate	or (2)	1. Jr	The second		7
Agencies Notified Type Notification		ian Jackso et Address	on		7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7			1
⊠ EPA	Otice	ot riddiess			i i Mati	27 20	18	-11U
☐ DEP ☐ Initial	City,	State & Zip	Code		1			E levenum
DOL Amended		ingboro, N			August 1	5.26	- 12	
□ DOH □ Emergency □ Cancellation		e of Contact			n 04 02	Telepho	ne Nu	ımber
☐ DCA ☐ Cancellation	Mari	ian Jackso	n					-88
	F.A	CILITY IN	FORMATION				100 -12	
Name of Facility Where Abatement is Taking	Place (3)		Type of Faci					
Residential Property Street Address			School (
Olicet Address				pter 8 (Other t				
			Other (i. Square Feet		ommercial buildi			C.)
City (5) County (6)	County	Code (7)	2,067	2	10015	Bldg. Age 1961	;	
Willingboro, NJ Burlington		(.)		(Prior if being	demolished)	1301		
, January 1			Residence		(derilonsried)			
Name of Monitoring Firm Hired by Building On	vner (8)	ASCM No		atement Contr	actor (9)			
Horizon Environmental	. ,				rvices, Corp.			
Street Address	retricen recallet		Street Addre					
P.O. Box 316 City, State & Zip Code			3859 Sylon					
Thorofare, NJ 08096			City, State &					
Project Manager for Monitoring Firm	Telephone	Number	Hainesport Telephone N		License	Number	_	
Dave Flanigan	856-848-		609-702-04		Licerise	0086	2	
Scheduled Start Date (10) Scheduled Co	ompletion Da	ate (11)	Name of OSI					
4.4.18 4.6.18			EMSL Anal	ytical				
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire	only one)	-4	Street Addres					
Abatement Performed Outside of Norn		atement	107 Haddor					
Describe:	nai nouis		City, State & Westmont,					
Isolated Area			westinont,	NJ 00100				
Scope of Work (Check all that apply)								
				Full-Co	entainment-with	Negative	Press	ure
≥3 sf or ≥3 lf ≥160 sf ≥260 lf		novation			nclosure	En	clos	SULLE
≥160 sf ≥260 lf	☐ Der	molition			Bag Procedures		_	
Location of	Is Locat	ion	Description		xempted and No			
Asbestos-Containing	Normally	10 C C C C C C C C C C C C C C C C C C C	Asbestos-Con		Amount (Specify	Aba	emer	nt Type
Material (ACM)	Solely		Material (Ad	CM)	SF or LF)			щ,
TO BE ABATED in Facility	Maintenan Custodial		(i.e., thermal s			Remova	Repair	Encapsulate
(13)	(12)	Otan:	insulation, surfactor or other miscella			ova	air	sula
	Yes No	N/A				-		te c
Living Room		Floo	r tile		308SF		ПΓ	$\exists \vdash$
Dining Room		Floo	r tile		132SF			
Name of Registered Waste Hauler		DED Wests	Cubic Yards	IN (D				
rame of Registered Waste Flauler		uler ID No.	of Waste	Name of Re	gistered Landfill			
Freehold Cartage	10	02265	or waste	GROWS				
City, State			Disposal Date	City, State			4117-1-7-1	12-12-1
Freehold, NJ			4.9.18	Morrisville	, PA			
Completed By (Print or Type)	Titl		Signature	70-	11 1	Date		
Joann Mullarkey	Ad	dmin.	Juan	-1 nu	H Willey	3.19.	18	

Date of Notification (1)				Name	of Build	ing Owner/Operato	or (2)			-			
March 20, 2018	a			I		k NJ, Newark I	A 150	national Airno	ort	***			
Agency Notified	Type Notification			-	t Address		in orty intoll		2 2 - 1		7		
□ EPA	EN lateral			Buil	dina 8	0, 2nd Floor							
Harming per State Reg. 10-2004	Initial □ Amended				State, Zip			HIII MAR	27	2018			
⊠ DOL	Amendment #			000000		J 07114		II LI WAT				(privately	
⊠ DOH	 Emergency (inclu justification) 	ding			of Conta			Telephone Nu	ımber	, eq. ,	g e Misse	25	
	☐ Cancellation			Rale	oh Cam	pione		973-624-6		:11	.i. &	1	
		B III S				FORMATION		Un man warmen	*	1			
Name of Facility Where At	patement is Taking P	lace (3	3)	1,7,1,0			Type of Facility	v (4)					
Terminal B, Satellite			•										
Street Address		-					School (K-1	8 (Other than K-	12)				
Terminal B, Newark	Liberty Interna	tiona	al Airp	ort			☑ Other (i.e. p	rivate & commerc	ial buildi	ngs,			
City (5)							Square Feet	# of Floors	Blda	. Age			
Newark							320,000	2	50	2			
County (6)				Count	v Code (7) (STATE USE	The second second	Prior if being demo	0000000	T/-			
Essex				ONLY		/ (OTATE OOL		rioi ii beilig delik	Jiisiieu)				
Name of Monitoring Firm F	lired by Building Own	ner	ASCN	1 No		Name of Abaten	Terminal nent Contractor ((0)					
PA of NY & NJ	mod by banding our		N/A	11117/02/20									
Street Address			IN/A				storation Co.	, inc.					
241 Erie Street, Roo	m 226		223 Ran			Street Address	mb Arramira						
City, State, Zip Code	/III 230		City, State, 2										
Jersey City, NJ 073	10												
Project Manager for Monito		Тт	Clifton, No. Telephone No.			Telephone No.	07011	License No.					
Ralph Campione	g		and the same	24-68	98	973-478-468	21	00120					
Start Date (10)	Scheduled (Name of OSHA	ME.	00120					
April 02, 2018	May 31, 2			(/				Services, L.L	C				
Occupancy Status During)			Street Address	vii Oriinicittai (oci vices, L.L	.0.	-			
W 250	A. SMASS CALLSONS		:53			Production and the state of the	Brook Avenue	Δ.					
 ☐ Facility Closed/Vacated ☒ Abatement Performed O 	During Entire Period utside of Normal Fac	of Aba	atemeni ours	t		City, State, Zip C							
☐ Other - Describe:							NJ 07071-199	98					
Scope of Work (Check all to	hat apply)								Service Service				
≥ 3 sf or ≥ 3 If				⊠ Ren	ovation		Containment with Enclosure	n Negative Pressu	ire				
≥ 160 sf or ≥ 260 If				☐ Dem	olition	☐ Glov	ebag Procedure						
						⊠ Non-	Exempted (*) and	d Non-Friable Pro	cedure	At			
			s Locat	0.000						0.000	atem Type		
Location			Normal ed Sole			Description	of				1	T	
Asbestos-Containing TO BE ABA			aintena			stos Containing Ma ., thermal systems		Amount		77	Ē		
IN Facilit		'	Custodi Staff?		(1.6	surfacing, VAT		(Specify SF or LF		em	apg	100	
(13)			(12)			other miscellane	eous)	50-000 ADS0110000 4		Removal	Encapsulate	Enclosure	
			T	Ī						-	9	"	
Future PA Storage Ro	om Near Gate 68	Yes	No	N/A	VAT			21	l6 sq ft		+	+	
- and a coording of the	om man date of		+		VAI				10 54 11	1	+	+-	
			-								+	+-	
			-								+		
Name of Registered Waste	Hauler	NI NI	IDED V	Vaste H	aular	Cubic Vords of	Name of Deci-	tored I and the					
		133300	No.	vaste H	auier	Cubic Yards of Waste	Name of Regis	terea Landfill					
Jimmy Byrne Trucki	ng	1	9555			15	Minerva Er	nterprises, In	c.				
City, State						Disposal Date	te City, State					-	
Bronx, NY						04/03/2018 - 04/30/2018	Waynesbu	rg, OH					
Completed by	Title					Signature	//	Date					
G. Roger Woodman	Project M	anad	er			1/1/	3/20/2018						

	Date of Notification (1)					Name	ot Brillan	ng Owner/Operato	r (2)	2.41 E 10.14 E E 140 (140)							
	February 12, 2018			PA of NY & NJ													
	Agency Notified	Type No	otification			Street	Address							311			
	□ EPA [☐ Initial	I					ridge, 2777 G	oethal Road	North	c ar	110		111	1		
	DOL Not equiral per State Reg. 10/2004	Amer					State, Zip		-	MAG	1 / E	910		1	man!		
			ndment # 02 rgency (includ	ina				nd, NY 10303-	8413	į.				-			
	☑ DOH	justif	ication)	9			of Conta			Telephone Nu	and the second second second	¢					
	□ DCA □	_ Cano	ellation			Uda	y Mehta	a	<u>i</u> _	201-595-4	381						
						FAC	ILITY INF	ORMATION									
	Name of Facility Where Aba								Type of Facility	(4)							
	Goethals Bridge - No	ew Je	rsey Side	of B	ridge				☐ School (K-12	2)							
	Street Address									8 (Other than K-1							
	2777 Goethals Road	Nort	h						homes, etc.	rivate & commerc)	iai bullair	ıgs,					
I	City (5)								Square Feet	# of Floors	Bldg.	Age	Э				
l	Staten Island, NY 10	303-8	413						440,758	1	88 -	+/-					
Ì	County (6)) (STATE USE	Current Use (P	rlor if being demo	olished)						
	Union					ONLY)			Bridge								
ľ	Name of Monitoring Firm Hi	ired by	Building Own	er	ASCN	1 No.		Name of Abatem	nent Contractor (9)							
l	BSI Services and So	lution	ns (NYC) Ir	ıc.,	N/A			B&N&K. Res	storation Cor	mpany, Inc.							
Ī	Street Address							Street Address		**************************************							
	121 West 36th Street	t, 3rd.	Floor					223 Randolp	oh Avenue								
Ī	City, State, Zip Code					City, State, Zip			Code								
	New York, NY 10018				Clifton, NJ 07011												
	Project Manager for Monitor	ring Fir	m	Telephone No. License No.													
L	Dmitry Khusidman			1929		90 632	23	973-478-468		00120							
	Start Date (10)		Scheduled Co			ite (11)		Name of OSHA	Monitor								
L	February 14, 2018		February						/ironmental S	Services, L.L.	.C.						
	Occupancy Status During A	bateme	ent (Check onl	y one))			Street Address									
	☐ Facility Closed/Vacated D	During I	Entire Period o	of Aba	tement	t			rook Avenue	•							
	☐ Abatement Performed Ou ☐ Other - Describe: Non-	itside o friabl	f Normal Facil	ity Ho	urs			City, State, Zip C									
_	Scope of Work (Check all th			WOIR				Lynanurst, I	, NJ 07071								
	2000 1999 199 <mark>8</mark> 1992 1 1994 129 129 129 129 129 129 129 129 129 129	iat appi	y) ==							Negative Pressu	re						
	 ≥ 3 sf or ≥ 3 lf ≥ 160 sf or ≥ 260 lf 					☐ Ren	ovation	_	Enclosure ebag Procedure	. 							
	E 100 51 01 2 200 11					2 5011	ontion			l Non-Friable Pro	cedure						
				Is	Locat	ion						A	bate		nt		
	Location of	nf.			Normal			Description of				_	Ту	pe			
	Asbestos-Containing N	/ //aterial	(ACM)		ed Sole intena		Asbes	stos Containing Ma		Amount				ш	_		
	TO BE ABAT				Custodi	ial	(i.e.	, thermal systems surfacing, VAT		(Specify		Removal	Re	Encapsulate	Enclosure		
	(13)				Staff?			other miscellane		SF or LF)		Nov	Repair	Sul	osui		
	it		-		(/							a	7	ate	е.		
_				Yes	No	N/A											
_	Bridge to Nowhere			X		Concrete Encased Transite Pipe (Parapet) -			ipet) - South Side		00 In ft						
							Concrete E	Encased Transite Pipe (Duc	t Bank) - South Side	2	00 In ft	X					
		Contract to															
_																	
	Name of Registered Waste I	Hauler		2.55	JDEP V No.	Vaste H	auler	Cubic Yards of Waste	Name of Regist	tered Landfill							
	Jimmy Byrne Truckir	ng		0.575	9551			125	Minerva Er	nterprises, In	С						
	City, State							Disposal Date	City, State	ear courant ord ■F 20090951 TH Med 20050							
	Bronx				02/15/2018 - 02/13/2019 Waynesb					ra. OH							
	Completed by		Title					02/13/2019 Signature	110000	. 9, 011	Date						
	G. Roger Woodman		Project Ma	anag													
				Manager 3/16/2018													



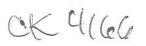
Date of Notification (1)			Na	me of Build	lina (Owner/Operator	(2)								
	18						3.555.00	9 Check #9968							
Agencies Notified Type Not	ification			eet Address				<u> </u>	1-	9 17	7 4	3 .			
☑ EPA ☑ Initial			1500000000	01 North	-	Street	1		e 30						
☑ DOLWD ☐ Amen			_	, State, Zip								111			
	dment #			lillville, N				MAR :	27	2018	3				
(NJAC 5:23-8) justific	gency (includent	ding	_	ne of Conta		3332	1	17				Freezen			
Cance				ob Ryan	act			Telephone Nun			1 100				
							7)	609-858-53			1.6				
Name of Facility Where Abatement i	a Takina Di	(0)	F.	ACILITY	INF	ORMATION		TOTAL PROPERTY			·	10-			
Millville Senior High School	s raking Pi	ace (3)					Type of Facilit	-							
Street Address							School (K-	12) r 8 (Other than K-12	21						
200 North Wade Blvd.							Other (i.e.,	private and comme	rcial	buildir	ngs,				
City (5)							Square Feet	# of Floors	\neg	Bldg.	Age				
Millville							200,000	2		50+					
County (6)			Cou	unty Code ((7)(S	TATE USE ONLY)	The state of the s	Prior if being demolis	shed						
Cumberland						an anni stann (abh-sileacan) i - theologica che si (al 🕊 ch.)	Education		21100	6					
Name of Monitoring Firm Hired by Bu	ilding Owne	er (8)	ASCA	l No.	N	ame of Abateme	ent Contractor (9	9)			-				
Brinkerhoff Environmental Se	ervices, In	c.	001	00	1	AbateTech. In		.,							
Street Address	(%)				_	treet Address									
1805 Atlantic Avenue					1	30 Maple Ave	PO Box 25								
City, State, Zip Code					_	ty, State, Zip Co									
Manasquan, NJ 08736						Lumberton, N									
Project Manager for Monitoring Firm		Tel	ephone	No.	_	elephone No.	0 00040	License No.							
Gary W. Fleming		7	32-223	3-2225	10000	609-265-2107		00529							
Start Date (10)	Scheduled	Comple	etion Da	ate (11)		ame of OSHA Me	1,1,2,1,1,2								
4/_2_/_18_	4	/ _ 30	/		1	EMSL Analyti	7.00 (B) (B)								
Occupancy Status During Abatement					Str	reet Address									
☐ Facility Closed/Vacated During Ent	tire Period o	f Abate	ment		2	200 Route 130	North								
Abatement Performed Outside of N Time of Abatement: <u>7AM-3:30</u> PM	Iormal Facil	ity Hou	s - Des	scribe	Cit	y, State, Zip Coo	de								
	3.30PIVI-12	ZAIVI			(Cinnaminson,	NJ 08077								
Scope of Work (Check all that apply)						M = 11 - MULLIMAZO - 100 (M)	Auto-company	CONT. CONT.		-					
 ≥3 sf or ≥3 if ≥160 sf or ≥260 if 	⊠R	enovati	on			☐ Full Conta	inment with Ne	gative Pressure							
≥160 sf or ≥260 If		emolitic				Glovebag	Procedure								
						Non-Exem	pted (*) and No	n-Friable Procedure	е						
Location of	1	s Locat Norma							Al	batem	ent T	уре			
Asbestos-Containing Material (ACN	(I) Us	ed Sole		Ashes	etne	Description of Containing Mate	rial (ACM)	A	Re	R	Щ	ш			
TO BE ABATED	l Ma	aintena stodial s				ermal systems in		Amount (Specify	Removal	Repair	ncap	ıclo			
IN Facility (13)	Cus	(12)	otali !			surfacing, VAT, o		SF or LF)	val	7	Encapsulate	Enclosure			
(1.5)	Yes	No	N/A		Ott	her miscellaneo	18)				ate				
See Attached				See Atta	ache	ed		See Attached			П				
									П						
									-	15					
		=							닏		Ш	Ш			
Name of Registered Waste Hauler															
AbateTech, Inc.		110000	IDEP V		Cub	oic Yards of	Name of Regis				-				
Dity, State			18750		12	2	G.R.O.W.S.	Landfill							
Lumberton, NJ						oosal Date	City, State					\neg			
					4/	30/18	Tullytown,	PA							
Completed By (Print or Type)	Title					Signature	A	Date	Э ,	Ø	,				
Gwendolyn Trumbetti	Operat	ions C	oordi	nator		(N	W		3	27	11	8			
L 41						9 / 79	-				1				

ASB-41 MAY 11

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

Scope of Work

Location of ACM U	sed for Maint.	Description of ACM	Amount	Abatement Type
Room D105	NO	Transite Panels	9 SF	Removal
Room D104	NO	Transite Panels	9 SF	Removal
Room D103	NO	Transite Panels	10 SF	Removal
Room D103	NO	Cove Base Mastic	8 LF	Removal
Room D101	NO	Transite Panels	10 SF	Removal
Room D101	NO	Cove Base Mastic	8 LF	Removal
Room D102	NO	Transite Panels	19 SF	Removal
Room D102	NO	Cove Base Mastic	7 LF	Removal
Room D113/114	NO	Transite Panels	60 SF	Removal
Room D113/114	NO	Chalkboards & Mastic	50 SF	Removal
Room D113/114	NO	Transite Door Panels	30 SF	Removal
(2) Storage Rms & Hall	NO	Floor tile & Mastic	150 SF	Removal
Throughout	NO	Door Caulk	10 SF	Removal



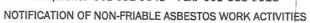
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Date of Notification (1) 03/16/2018				of Building Iin Towr					1 4					
Agencies Notified Type Notification EPA Initial				Address Amwell	Road				3 1	MAR :	2/2	018	100 contract of the contract o	errente.
DEP Amended DOL Amendment				ate, Zip C			ā.						: ik	
□ Emergency (including	,		of Contact han Toth				1897		ephone No 32) 302-				
			FAC	ILITY INF	ORMATI	ION	A Top out to the same		1					
Name of Facility Where Abatement is Taking Sampson G. Smith Intermediate So		3)					× Scl	Facility (4 nool (K-12)					
Street Address 1649 Amwell Rd								ochapter 8 ner (i.e. pr .)				dings	, hom	es,
City (5) Somerset NJ 08873							Square 90,000	Feet	# of	Floors		Bldg. A		
County (6) Somerset				Code (7) USE ONLY)			Use (Prior School	if bei	ng demoli	shed)			
Name of Monitoring Firm Hired by Building C AHERA Consultants	Owner (8)	ASCN 0057	M No. 7			of Abaten c Consti			(9)				
Street Address PO Box 385							Address Route 4	6 Suite	15					
City, State, Zip Code Oceanville, NJ, 08231-0385						0.000	State, Zip (wa, NJ (55				
Project Manager for Monitoring Firm John Smoyer			Telepho	ne No. 52-1833			none No. 339-973	5		License 01034	No.			
	Schedul 04/07/		npletion	Date (11)		September	of OSHA c Constr		Corp					
Occupancy Status During Abatement (Check	Only O	ne)					Address		9.6					
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other – Describe:	eriod of	Abatem	nent				Route 4		15					
	ai racilit	y nours					tate, Zip (wa, NJ (
Scope of Work (Check All That Apply)														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	CONTRACTOR OF THE PARTY OF THE	Renova Demolit				×	Mini-E Glovel	ontainmer inclosure bag Proce xempted	dure				re.	
	Is	Locati	on									Abat	ement	t
Location of		Normal ed Sole				scription					-	Т	ре Т	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	intenar todial S (12)	nce/		thermal surface				(S	mount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A										œ.	
Boys & Girls Student Restrooms		X		Р	ipe Fitt	ing Ins	sulation		2	1 LF	x		x	
Student Boys Restroom gym		X		Р	ipe Fitt	ing Ins	sulation		22	2 LF	x		X	
Student Girls Restroom gym		X		Р	ipe Fitt	ing Ins	sulation		16	6 LF	х		×	
Name of Registered Waste Hauler		1.0	IDED IA		101									
Savic Construction Corp		Н	JDEP W auler ID 2253		of Was		- 1	ame of Re ROWS	egister	red Landfi	I			
City, State Totowa NJ					Dispos 04/07	al Date /2018	100	ity, State Iorrisevi	lle, F	PA				
Completed by Milos Savic	Title Proje	ect Ma	nager			ignature	190	n 21	1-21		ate 3/16/2	2018		

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

New Jersey Department of Health and Senior Services PO Box 369, 3635 Quakerbridge Road Trenton, NJ 08625-0369

Telephone: 609-631-6749 Fax: 609-588-7618



Must be submitted 10 days prior to the beginning of work. Please type or print legibly.



Type of Notification (check	one) and Date Subm	itted								
[X] Initial [] Amended [] Cancellation [] Emergency (must	include justification)	Date of Notification: 03 / 16 / 2017								
Building Int	formation									
Name of Building Owner/Operator: Franklin Township Public Scho	ools									
Street Address: 1755 Amwell Road	_ _{City:} Somerset	State: NJ Zip: 08873								
Francisco II and a second a second and a second and a second and a second and a second and a second and a second and a second and a second and a second a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second a second and a second and a second a second a second		_ Telephone No.: 609-652-1833								
Facility Info	ormation									
Name of Facility Where Work Activity is to Take Place: Sampson G	Smith School									
Describe Facility Use: Public School										
Street Address: 1649 Amwell Road	_ city:_Somerset	State: NJ Zip: 08873								
County Name: Somerset		unty Code (state use only).:								
Scheduled Start Date: 03	Scheduled (Completion Date: 04								
Occupancy Status During Activity (check only one):										
Facility Closed/Vacated During Entire Activity										
[] Activity Performed Outside Normal Facility House	rs-Describe:	11								
[] Other—Describe:										
Scope of Work (check all that apply):										
Floor Tile Square Footage: 484 SF		Percentage Asbestos: N/A								
Mastic Square Footage: 484 SF	:	Percentage Asbestos: N/A								
[] Other: Square Footage:		Percentage As bestos:								
Contractor In	formation									
Company Name: Savic Construction Corp		Telephone No.: 973-339-9735								
Street Address: 205 Route 46 Suite 15	_ _{City:} _Totowa	State: NJ Zip: 07512								
New Jersey Asbestos License Number (if applicable): 01034		2000-000 (2000-000) (2000-000)								
Monitoring Firm (if applicable): AHERA Consultants		_Telephone No.: 609-652-1833								
Signatu	ure									
Completed By (type or print legibly): Sava Savic	_{Title:} Preside	ent								
Signature: Source Source	nature:									

New Jersey Department of Health and Senior Services PO Box 369, 3635 Quakerbridge Road Trenton, NJ 08625-0369

Trenton, NJ 08625-0369 Telephone: 609-631-6749 Fax: 609-588-7618

NOTIFICATION OF NON-FRIABLE ASBESTOS WORK ACTIVITIES

Must be submitted 10 days prior to the beginning of work. Please type or print legibly.

Type of Notification (chec	ck one) and Date Submitted
[X] Initial [] Amended [] Cancellation [] Emergency (mu	st include justification) Date of Notification: 03 / 16 / 2017
Building	information
Name of Building Owner/Operator: Franklin Township Public Sc	nools
Street Address: 1755 Amwell Road	_{City:} Somerset _{State:} NJ _{Zip:} 08873
	Telephone No.: 609-652-1833
	nformation
Name of Facility Where Work Activity is to Take Place: Franklin M	ddle School
Describe Facility Use: Public School	
Street Address: 415 Francis St	state:_NJ_zip:_08873
County Name: Somerset	County Code (state use only).:
Scheduled Start Date: 03 / 31 / 18	Scheduled Completion Date: 04 / 04 / 18
Occupancy Status During Activity (check only one):	
Facility Closed/Vacated During Entire Activity	
[] Activity Performed Outside Normal Facility Ho	urs-Describe:
[] Other—Describe:	
Scope of Work (check all that apply):	
Floor Tile Square Footage: 74 SF	Percentage Asbestos: N/A
Mastic Square Footage: 74 SF	Percentage Asbestos: N/A
[] Other: Square Footage:	
Contractor	Information
Company Name: Savic Construction Corp	Telephone No.: 973-339-9735
Street Address: 205 Route 46 Suite 15	TotowaState: NJ _{Zip:} 07512
New Jersey Asbestos License Number (if applicable): 01034	
Monitoring Firm (if applicable): AHERA Consultants	Telephone No.:_609-652-1833
Signa	ture
Completed By (type or print legibly): Sava Savic	Title: President
Signature: Laura Laura	Date: 03/16/2018



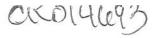
QL# 3337

Date of Notification					g Owr	ner / Operat	tor (2)	63 7.5	/ 10 - 1 10 - 1 - 1 1 1 1 1 1 1 1 1 1 1 1		75.		-				
Agencies Notified		Macys Inc. Street Address								12 "	1.5							
EPA				ress event	th St	reet			100		111	100						
☐ DEP				& Zip			11	111 14	AD A	7 0010		111						
□ DOL	☐ Ame	nded	Cincinnati, OH 45					L	M M	AR 2	7 2018	leaner leaner	4					
	DOH Emergency									Ī			Teleph	one	Num	ber		
☐ DCA		Γia V	Venri	ich			-	Land.		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	(513)	579-	724	1				
			FOR	MATION	+	1 7 12 60%		11.7		A								
Name of Facility Wh	1	Type of Facility (4)																
Macys Store Street Address								School (K-12)										
237 Woodbridge Center							H	Subchapter 8 (Other than K-12)										
237 Woodbridge Center								Other (i.e. private & commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Age										
City (5)		County (6)	Cor	ıntv (Code	(7)	—	oquare r eet		# 01 F1	oors	1	siag. A	ge				
Woodbridge Middlesex						(.)	lo	Current Use	(Pri	or if being	demoli	shed)						
						Current Use (Prior if being demolished) Retail												
Name of Monitoring	o. N	Name of Abatement Contractor (9)																
Pennoni Associates, Inc.								Bristol Environmental, Inc.										
Street Address 515 Grove St.								Street Address										
City, State & Zip Code								1123 Beaver Street City, State & Zip Code										
Haddon Heights, NJ 08035								Bristol, PA 19007										
Project Manager for	Monitoring F	irm	Telep			ber		Telephone Number License Number										
Ralph Coppola	856-6					(215) 788-6040 00509												
Scheduled Start Date 4/2/18	npletio		e (11)		Name of OSHA Monitor												
Occupancy Status During Abatement (Check only one)								Bristol Environmental Inc. Street Address										
Facility Closed/Vacated During Entire Period of						f Abatement 1123 Beaver Street												
Abatement Performed Outside of Normal Hours –								City, State & Zip Code										
Describe: 10PM to 7AM Facility Occupied During Abatement								ristol, PA										
Scope of Work (Che																		
ocope of work (offer	ck all that ap	ppiy)								Full Co	ntainm	ent with N	logotive	Dro	00115	•		
≥3 sf or ≥3 lf	\boxtimes	Renovation				Full Containment with Negative Pressure Mini-Enclosure							-					
≥160 sf ≥260		Dem	olitio	n														
1-							Non-Ex	empte	d and Non			Procedure						
Location of Is Asbestos-Containing Nor					on Ised		Δο	Description bestos-Con		ina	1 2	Amount						
Mate	So	lely b	У			Material (ACM)				(Specify SF or LF)			Е	_				
TO BI						i.e., thermal systems					Remova	Re	Encapsulate	Enclosure				
ш		olal 5 (12)	іап?			sulation, surfacing, VAT rother miscellaneous)					Nova	Repair	lusc	uso				
	No	N/A		0. 0	, , , , , , , , , , , , , , , , , , , ,					1 =		ate	9					
Mechanical Room					11,000	Fittings	s	5		56 Ea		П	П	П				
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100			\sqcup		ᆜ													
			$\dashv \vdash$	H	H								14	Ц	Ц	H		
Name of Registered	NJF	DEP V	Vaste	Cub	bic Yards Name of Registered Landfill							Ш						
25					ıler ID			/aste	140	ine of reg	1316160	Lanunn						
Service Transport Inc.					2099	90	1/	2/Cu Yd	Mi	nerva La	ndfill							
City, State New Castle, Delaware					Na Carrie			osal Date		y, State								
		Title Sig				4/4/18 Waynesburg, OH												
Completed By (Print or Type) Gino Pizzigoni					e ject			ignature Date										
5.110 T 122190111					nage		1	Dino Pingyoni/gn 3-						-2	23-18			
					3,5		1		/	10	1 11			-				



PAIN

Date of Notification (1)				Name of Building Owner/Operator (2)											
		1270047000000			te Companie		MAR	2	7 2	918	and the second				
Agencies Notified Type Notific		Street	Street Address									1			
☐ EPA ☐ Initial ☐ Amended		2 B	road Stre	eet,	Suite 400	1									
☑ DOLWD ☐ Amended ☑ DOH Amendm		City, State, Zip Code													
□ DCA □ Emergen		ludina		Blo	Bloomfield, NJ 07003										
(NJAC 5:23-8) justificati	on)	iaaiiig		Name	of Contac	t		Telephone N	Number	p.			1.45		
☐ Cancella	tion			Wa	rren Spra	ke			973-429-	7900					
Name of Escility Whore Abstement is 3	(0)	FA	CILITY IN	FO	RMATION	-									
Name of Facility Where Abatement is 7 Commercial	(3)					Type of Facility (4)									
168601111111111111111111111111111111111								☐ School (K-12) ☐ Subchapter 8 (Other than K-12)							
Street Address						Other (i.e., private and commercial buildings,									
653 Totowa Road					homes, etc.)										
City (5)						Square Feet	# of Floors		Blo	lg. Ag	je				
Totowa															
County (6)				Cour	nty Code (7)(STA	TE USE ONLY)	Current Use (Prior if being demolished)							
Passaic															
Name of Monitoring Firm Hired by Build	B)	ASCM	No.			ent Contractor (9)	0.7 T)								
Bio Terra Solutions				A	ALL PRO MA	LC									
Street Address					eet Address										
P.O. Box 1224				27 Outwater Lane											
City, State, Zip Code				City, State, Zip Code											
Union, NJ				Garfield, NJ 07026											
Project Manager for Monitoring Firm		phone		1 83	ephone No.		License No.								
Rick Eustaquio	200	3-494		-	73-928-4888		1188								
Start Date (10) Start Date (10			te (11) 18	LEATHER ST.	me of OSHA M	Monitor ANAGEMENT LLC									
Occupancy Status During Abatement (0	ne)			Stre	eet Address										
☐ Facility Closed/Vacated During Entir	nent	-	2	7 Outwater L	Lane										
Abatement Performed Outside of No	s - Des	cribe	City	, State, Zip Co	ode										
Time of Abatement:AM	_PM-		AM		Sarfield, NJ (
Scope of Work (Check all that apply)				× Wrap at	nd Cut	rativo Pragaura									
≥3 sf or ≥3 If	on			☐ Mini-Encl	ainment with Neg osure	egative riessule									
≥160 sf or ≥260 lf	n			Glovebag	Procedure	an Erichia December									
	Locati	on			☐ Non-Exer	mpted (*) and Nor	pted (*) and Non-Friable Procedure								
Location of	ly			Description of	F			Abatement Type							
Asbestos-Containing Material (ACM) Used So					Asbes	stos	Containing Mat		Amount		Rer	Repair	Enc	E	
TO BE ABATED IN Facility	170 (000)	odial S	0.000	(i.e.	e., thermal systems insulation, surfacing, VAT, or			(Specify		Remova	bair	aps	Enclosure		
(13)				her miscellane		SF or LF)	'	<u>a</u>		Encapsulate	лге				
	No	N/A									Ф				
Basement] [□ Pipe Inst		ula	tion- Wrap a	nd Cut	475 LF						
Basement	[Pipe Fit	ting	Insulation		30 LF		X				
	[
N															
Name of Registered Waste Hauler	JDEP V	2000000		oic Yards of											
ATC/Century Waste LLC/All Pro Management LLC					No. /32797/989	Wa:	ste s Needed	Minerva Enterprises/G.R.O.W.S. North Landfill/ Fairless Landfill/IESI Bethlehem Landfill							
City, State				posal Date	City, State										
Shirley, NY / Elizabeth, NJ / Garfield, NJ						Т	BD	Wayneshura Ol	Waynesburg, OH/Morrisville, PA/Bethlehem,PA						
Completed By (Print or Type)				Signature	Date										
Allen Monchik	ger														
		2000 30		Allen Monchik 3/23/18						5					



	I CARLE		(F	Pursuan	t to NJAC	8:60 an	ABA1E d 12:12	O)		居(O E				
Date of Notification (1) 03-23-18				Name o	of Building	Owner/	Operato	r (2)			b <u>r</u>		9-34 	Per I Committee agents	The state of the s
Agencies Notified	Type Notification				Address Hadley	Road				N	IAR 2	20	18	i boo	#
DEP DOL	Initial Amended Amendment			City, St	tate, Zip C	ode				Fig. 1.			()	1	-
DOH DCA	Emergency justification) Cancellation		9	Name o	of Contact r Stenge					Tele	ephone Nu		Ole ·		
_ BOA	Caricellation				ILITY INF		ION			132	2-215-35	0/2			
Name of Facility Where PSEG Hopewell S	Abatement is Takir Substation	g Place	(3)	17.0	321111111	Ortinari	ION	Control of the last	of Facility (
Street Address 2451 Pennington I	Road							X C	ther (i.e. p	8 (Othe	er than K-1 commerc	2) ial bui	ldings	, hom	es,
City (5) Hopewell								Square N/A	tc.) e Feet	# of N/A	Floors	- 11.3	Bldg. A	Age	
County (6) Mercer	TEL				Code (7) USE ONL	0		Curren	t Use (Pri	or if beir	ng demolis	hed)			
Name of Monitoring Fire N/A	m Hired by Building	Owner (8)	ASCN N/A	M No.			of Abate	ement Cor	ntractor	(9) rices, Inc).			
Street Address N/A							Street	Address							
City, State, Zip Code N/A								tate, Zip	Code IY 1198	n					
Project Manager for Mo	nitoring Firm			Telepho N/A	ne No.		Teleph	none No.		T	License N 01136	lo.	1		
Start Date (10) 04-02-18		Schedu 06-04-		mpletion	Date (11)		Name	of OSH	A Monitor		ices, Inc				-
Occupancy Status Durin	ng Abatement (Chec		-			-		Address		11 061 4	1005, 1110				
Abatement Perform	cated During Entire Fined Outside of Norm	nal Facilit	Abaten	nent				ld Doc tate, Zip	k Road						
Other – Describe:	Electrical circuit cabi	net				_			IY 11980	0					
Scope of Work (Check /	All That Apply)	Design of													
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		_	Renova Demolit				×	Mini- Glov	Enclosure ebag Proc	edure	Negative F			Δ.	
		Is	Locati	ion						· () una	- North Haz	1	Abate	ement	
Locatio			Normal ed Sole				scription					-	Ту	ре	_
Asbestos-Containing <u>TO BE AB</u> In Faci (13)	IATED lity	Ma	intenar todial S (12)	nce/				insulati T, or		(Sp	nount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
0.55		Yes	No	N/A										e	
Office Bu	uilding			X		Wa	II Caul	k		9	SF	X			
							- 1111123								
Name of Registered Was Waste Management			Н	JDEP W auler ID 7273		of Was			Name of F Fairless		ed Landfill ill				
City, State Elizabeth, NJ 07201				-		Dispos TBD	al Date		City, State Morrisvil		19067				
Completed by Raymond Tutiven		Title Supe	rvisor	18		isi	gnature		1	tin	Da	te -23-1	18		

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

B & G proj. #:

2018-74

Emergency Sub chapter 8

Check # 8881

Date of Notification	1 (1)	- 11	Name of Bu	ildina Owr	ner/Operator (2)			1 14	The state of the s	+*				
10 13 1/12 13	1/11 18 1			Public :					i E (1 1	¥ 1.		
Agencies Notified	Type Notifica	tion	Street Addre						1			100	13	+
☐ EPA	☐ Initial	Ш		hrop Ave	enue				1.0	ir co	55		Annual Control	
☐ DEP		11	City, State,					111	1 200	語 27	201	8	III.	<u> </u>
X DOL	X Amend			n, NJ 07	005			ĺ	Ĺ					
X DOH		11	Name of Co			or dress		-	Telephor	ne Numbe	r	11.6	اع	+
☐ DCA	☐ Cancel		9771.197-07.197-17		D :		. 10	Varia			7 (F)			E.
			Steven	Gardbe	rg, Business	Adn	nin/Board Secreta	ry	973-3	35-9700) x 8(003		
·				FAC	ILITY INFORM	ATIO	N							
Name of facility wh	ere abatement	is taking p	ace (3)					_	f Facility					
Boonton High	School							1 2	=	ol (K - 12)				
Street Address									_	apter 8 (0			(-12)	
306 Lathrop A	Venue							-	Bldgs.	(Private/C /Homes, e	omme etc.	erciai		
N								1		# of Floo	rs		dg. A	ge
City (5)		Cou	nty (6)				unty Code (7)	50,00		2		90		
Boonton		Mo	orris			(518	ate use only)	Scho	nt Use (P	rior if beir	ig den	nolish	ed)	
Name of Monitoring	g Firm Hired by	Bldg. Own	er (8)		ASCM No.	1	Name of Abatement	-						
Detail Environ	nmental Ser	vices			0012		B & G Restorati		100 A.O.					
Street Address						\dashv	Street Address	ion, me					_	
300 Grand A	venue						105 Ryerson R	load						
City, State, Zip Code						-	City, State, Zip Code						-	
Englewood, I							Lincoln Park, I	NJ 070	35					
Project Manager for	100 miles	1		one Numb			Telephone Number	0		License		oer		
Nadine Bello			97	3-616-46	301		(973)696-686			00)378			
Scheduled Start Dat	te (10)	Sche	d. Completio	on Date (1	1)		Name of OSHA Moni B & G Restorati							
03/22/2018		03/	25/2018				Street Address	1011, 1110	-					
Occupancy Status D	Ouring Abateme	nt (Check	only one)	a sive as a second		-	105 Ryerson Re	oad						
Facility closed	/vacated during	entire per	od of abate	ment.			City, State, Zip Code				-			
Abatement pe Describe: St	art: 2:00 p.m	of normal	d Shift)	'S-					_					
Other-Describ	e: occupied					-	Lincoln Park, N	J 0703	5				-1	
Scope of Work (che	eck all that apply	y)									0			
☐ Demolition	X	Renovation	n			F	ull Containment w/neg	ative pre	ssure	Glove	oag pr	ocedu	ire	
>3 sf or >3 lf		≥160 sf or	≥260 If			X N	/lini-enclosure		[Non-fr	iable p	oroce	dure	
Location of			n normally u								R	R	Ε	E
asbestos-cont material to be		staff(12)	mance/cust	oulai			sbestos-containing		Amount Specify S	For	m	p	n c	n
abated in facil		Yes	No	N/A	material (A	(Civi)		1 3	.F)	. 01	0	a	a p	L
Electrical Room					alla acces / ac			+-	151 50 151	100 (e	-		in
Trainer's Room				X	elbows / pi		sulation / VAT		If/ 50 If/ If / 40 If		X	님		H
Locker Room				×	elbows / pi				If / 10 If		X	屵	+	H
Drying Room				X	elbows / pi	-	Commence of the Commence of th		If / 7 If		X	뉘	1	一
Athletic Directors	s Office			X	elbows / pi				If / 40 If		X	一	一	一
Registered Waste Ha	auler	NJD	EP Hauler II		ubic Yards of W		Name of Registered	Landfill						_
B & G Restorati	on, Inc.		19563		5		Tullytown f	Resour	ce & Re	covery	Cent	er		
City, State Lincoln Park, N	J		[Disposal D 03/22/	ate 18-03/26/18		City, State Tullytown, F	PA					y	
Completed by (Print	or Type)	Title			Signature	(Gordana Luna			Date				
Gordana Luna		Secreta	ry/Treasu	rer			Zordana Luna			03/23	3/201	8		

Re:

Amended One page attachment to Emergency notification dated

03/19/2018 for asbestos removal at:

Boonton High School

306 Lathrop Avenue, Boonton, NJ 07005

Start date: 03/22/2018

Amended Added Hems

The following materials shall be abated:

Location of asbestos- containing material to be abated in facility	Is location normally used solely by maintenance / custodial staff	Description of ACM	Amount (LF or SF)	Remove	Repair
Locker Changing Room, Front Hallway Entrance	NO	Fitting Pipe insulation	10 lf 20 lf	X	
Boys Locker Room	NO	Asbestos ductwork	24 sqft	Wrap & cut	
Storage Room	NO	VAT & Mastic	120 sqft	X	
		,:			

hock

B & G proj. #: 2018-74

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

		•			Emergency	Sub	chapter 8	Chec	k # 8874				
Date of Notification	(1)	11	Name of Bu	ıildina Owi	ner/Operator (2	1							
10 13 1/11 19	1/11 18 1	- 11		n Public		,		15. 14	,	* - 17m - 1 +	N.J.		
Agencies Notified	Type Notific	ation	Street Addre	and the second second					± + ***				
☐ EPA ☐ DEP	Initial			hrop Ave	enue			5.0 4					7.1.1
₩ DOL	□ Amen	dment	City, State,	70				2027	12/	2016		11.1	
	L Amen			n, N J 07	005	Concession of the Concession o						A manager	- Line
▼ DOH	☐ Cance	8 76 III	Name of Co	ntact				Telepho	ne Numb	er			1
☐ DCA	☐ Cance	liation	Steven	Gardbe	rg, Business	Adı	min/Board Secreta	ry 973-3	35-970) x 8	003		
					ILITY INFORM								
Name of facility wh	ere abatement	is taking p	place (3)				Т	Type of Facility	(4)				
Boonton High									ol (K - 12)			
	001001							Subc	hapter 8 (Other	than	(-12)	
Street Address									(Private/0./Homes,		ercial		
306 Lathrop A	Avenue							Square Feet	# of Floo		T E	ldg. A	ae
City (5)		Coi	unty (6)			Co	unty Code (7)	50,000	2		90		3-
Boonton		M	orris			(St	ate use only)	Current Use (I	Prior if bei	ng der	nolish	ed)	
Name of Monitoring	Firm Hired by				1001111	Ц,	INIana of About	School					
Detail Enviror			ilei (b)		ASCM No. 0012	.	Name of Abatement						
Street Address						_	B & G Restorat	ion, Inc.					2
300 Grand Av	venue						105 Ryerson R	load					
City, State, Zip Code						-	City, State, Zip Code		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
Englewood, N						Lincoln Park,	NJ 07035						
Project Manager for	Monitoring Fire	n	Ph	one Numb	er	-	Telephone Number		License	Num	ber		
Nadine Bello		97	3-616-46	301		(973)696-686	9	0	378				
Scheduled Start Date	e (10)	Sche	d. Completic	on Date (1	1)	-	Name of OSHA Moni						
03/22/2018		03/	/25/2018				B & G Restorat	ion, Inc.					
Occupancy Status D	uring Abateme			-		_	Street Address 105 Ryerson Ro	and					
Facility closed/	vacated during	entire per	riod of abater	ment.		-	City, State, Zip Code	Jau					
Abatement per Describe: Sta	formed outside	of normal	I facility hour	s-		- 1	Oity, State, Zip Code						
Other-Describe		1. (3000)	id Offitt)			-	Lincoln Park, N	J 07035					
Scope of Work (che	ck all that appl	y)										-	-
Demolition	X	Renovati	on				full Containment w/neg	ative pressure	K Glove	oag pr	oced	ure	
> 3 sf or $>$ 3 lf		≥160 sf or	r ≥260 If			X	Mini-enclosure		Non-f				
Location of			on normally u			1000000000		-T	_	R	R	E	1-
asbestos-conta	aining	by maint staff(12)	enance/cust	odial	Description	n of a	sbestos-containing	Amount		e m	e	n	E n
material to be abated in facilit	ty (13)	Yes	1 22	T NUA	material (A			(Specify S	SF or	0	p a	c a	C
		163	No	N/A						v e	i r_	р	_
Electrical Room				X		_	nsulation / VAT	8 lf/ 50 lf/		X			
Trainer's Room				×	elbows / pip			5 lf / 40 lf		X			닏
Locker Room Drying Room				X	elbows / pi	-		4 lf / 10 lf		×	ᆜ	닏	片
	055-			X	elbows / pi			4 If / 7 If		X	ᆜ		H
Athletic Directors Registered Waste Ha		INID	EP Hauler ID)# Ci	elbows / pi		Sulation Name of Registered I	4 lf / 40 lf		X	Ш	Ц,	Ш
B & G Restoration	8 & G Restoration, Inc. 19563					2010		Resource & Re	covery	Cent	er	22	
City, State Lincoln Park, N.				Disposal Da	ate 18-03/26/18		City, State Tullytown, F						
Completed by (Print of		Title		JOIZZI	Signature				Date			y.	
Gordana Luna	. 7.5-7	The state of the s	ry/Treasu	rer		(Gordana Luna		03/19	/201	8		

State of NJ Notification of Asbestos Abatement

B & G proj. #:

2018-77

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

Check # 8879 Date of Notification (1) Name of Building Owner/Operator (2) 10 13 1/12 10 1/11 18 1 Somerset Hills Board of Education Agencies Notified Type Notification Street Address ☐ EPA 25 Olcott Avenue X Initial ☐ DEP City, State, Zip Code Amendment X DOL Bernardsville, NJ 07924 X DOH Name of Contact Telephone Number Cancellation ☐ DCA Dan McDougal 908-204-1930 **FACILITY INFORMATION** Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) Administration Building Subchapter 8 (Other than K-12) Street Address Other (Private/Commercial, Bldgs./Homes, etc. 25 Olcott Avenue Square Feet # of Floors Bldg. Age County (6) City (5) County Code (7) (State use only) Current Use (Prior if being demolished) Bernardsville, NJ 07924 Somerset Name of Monitoring Firm Hired by Bldg. Owner (8) Name of Abatement Contractor (9) ASCM No. ER & M Inc. B & G Restoration, Inc. Street Address Street Address 105 Ryerson Road 20-10 Maple Avenue, Bldg. 35E City, State, Zip Code City, State, Zip Code Fair Lawn, NJ 07410 Lincoln Park, NJ 07035 Project Manager for Monitoring Firm Telephone Number License Number Phone Number (973)696-6869 00378 Willie Morales 973-949-3525 Name of OSHA Monitor Scheduled Start Date (10) Sched. Completion Date (11) B & G Restoration, Inc. 04/04/2018 04/05/2018 Street Address Occupancy Status During Abatement (Check only one) 105 Ryerson Road Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Lincoln Park, NJ 07035 Other-Describe: Unoccupied Scope of Work (check all that apply) Demolition X Renovation Full Containment w/negative pressure ★ Glovebag procedure >3 sf or >3 If X Mini-enclosure >160 sf or >260 lf Non-friable procedure Is location normally used solely Ε Location of E e by maintenance/custodial е n asbestos-containing Amount Description of asbestos-containing n m staff(12) p C material to be (Specify SF or material (ACM) 0 C 2 a abated in facility (13) LF) Yes No N/A V p X Former maintenance shop TSI debris X 18 sf stairwell next to mens room 3 If X pipe insulation Cubic Yards of Waste Name of Registered Landfill Registered Waste Hauler NJDEP Hauler ID# B & G Restoration, Inc. 19563 Fairless Landfill Disposal Date City, State Lincoln Park, NJ 04/06/2018 Morrisville, PA Completed by (Print or Type) Signature Gordana Luna Gordana Luna Secretary/Treasurer 03/20/2018

B & G proj. #: 2017-78

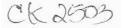
State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7)

Check # 8880

	ν.							Chec	K # 8880				_
Date of Notification	1 (1)		Name of E	Building Own	er/Operator (2)		1 . 2001 FOR HOPE OF	Not the	1	7 1		
10 13 1/12 13	1/1181	- 11			d of Educat				Va Fi				13
Agencies Notified	Type Notificat	tion	Street Add	Philippin and Company				- 1112/1 1-75/1		-	-	11	
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X DOH	_	11	Name of C	ontact				Telepho	one Numbe	r			-
☐ DCA	Cancell	ation	Scott	Chamberl	lin			973-4	427-1300				
				FAC	ILITY INFORM	IATIO	N					************	
Name of facility wh	nere abatement	is taking p	lace (3)					Type of Facility					
Washington S	School (non s	sub 8)							ool (K - 12) chapter 8 (C)ther t	han K	-12)	
Street Address								Other	r (Private/C	omme		,	
176 Mohawk	Avenue							Bldgs Square Feet	# of Floor		Ble	dg. A	ge
City (5)		Cou	unty (6)				unty Code (7)						
Hawthorne, N	NJ 07507	Pa	assaic			(Sta	ate use only)	Current Use (school (nor		g den	olishe	ed)	
Name of Monitorin	T		ner (8)		ASCM No.	1	Name of Abatement (
EnviroVision	Consultants				0079		B & G Restoration	on, Inc.					
Street Address							Street Address	· v					
	raw Avenue	- Buildin	g 35E				105 Ryerson R	oad					
City, State, Zip Cod Fair Lawn, N							City, State, Zip Code Lincoln Park, N	11.07035					
Project Manager for		1	T	Phone Numb	ner		Telephone Number	40 07033	License	Numl	ner		
Guillermo M		•	Ι.	973-636-			(973)696-6869	9	100000000000000000000000000000000000000	378			
Scheduled Start Da	ite (10)	ISche	d. Comple	etion Date (1		_	Name of OSHA Monit	70					
04/03/2018	()		/04/2018		*6		B & G Restorati	on, Inc.					
Occupancy Status I	During Abateme			,	Aprel - 1000 Hallo	_	Street Address 105 Ryerson Ro	and					
Facility closed	-		1.50	tement.		- 1	City, State, Zip Code	Jau ————————————————————————————————————					
Abatement pe	erformed outside					1	City, State, Zip Code						
Describe: Other-Descri	be:						LincolnPark, NJ	07035					
Scope of Work (ch	eck all that appl	y)											
☐ Demolition	X	Renovati	ion			□ F	Full Containment w/neg	ative pressure	✗ Glove	bag pr	ocedu	ire	
\times >3 sf or >3 lf		≥160 sf o	r ≥260 lf			X	Mini-enclosure		☐ Non-fi	riable	proce	dure	
Location of				y used solely	у			T		R	R	Ε	E
asbestos-cor material to be		by main staff(12)	tenance/cu	ustodial			asbestos-containing	Amount	CE	e m	e p	n	n
abated in fac		Yes	No	N/A	material	(ACM)		(Specify LF)	SF OF	0	a	а	L
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Basement girl's		X	#	4	pipe insul			4 If		X	片	片	ዙ
Basement boy	y's bathroom	X		-	pipe insul	ation		4 lf		X	H	片	H
			#=	-	1					ዙ	H	븜	H
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Registered Waste F	lauler	JL NJE	DEP Haule	r ID# C	Subic Yards of	Waste	Name of Registered	l Landfill		.[1-
B & G Restorat	tion, Inc.		19563		1/2		Tullytown I	Resource & F	Recovery	Cen	ter		
City, State Lincoln Park, N	NJ			Disposal Dis	Date /2018		City, State Tullytown, F	PA					
Completed by (Prin		Title		=1	Signature				Date				
Gordana Luna	l i	Secreta	ary/Treas	surer			Gordana Luna		03/2	3/201	8		



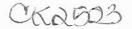
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DCA		_	201 22		Tre	nton, NJ	086	08							
(NJAC 5:23-8)	justification	on)			Name	of Contac	t			Telephone N	umber				
	☐ Cancellat	ion			Ric	k Ferrera	Ĺ			609-292-	1717				
					FA	CILITY IN	FOF	RMATION	7						
Name of Facility Where A	batement is T	aking	Place	(3)					Type of Facility	(4)					
Residential									School (K-1						
Street Address			-						Subchapter			مائدىما			
									Other (i.e., phomes, etc.)		merciai	DUIIC	ings	,	
City (5)									Square Feet	# of Floors		Blda	. Age	e	
South River										No. 400.000.000.000	-				
County (6)					Cour	ty Code (7)(STA	TE USE ONLY)	Current Use (Pr	ior if being dem	nolished)	_		
Middlesex						•	•		,						
Name of Monitoring Firm I	Hired by Build	ding O	wner (8)	ASCM	No.	Nai	me of Abateme	ent Contractor (9)	12	-	_	-		-
Bio Terra Solutions		2		.			1 000		NAGEMENT L						
Street Address		_						eet Address							-
P.O. Box 1224							2	7 Outwater	Lane						
City, State, Zip Code								, State, Zip Co					_		-
Union, NJ							l .	Sarfield, NJ							
Project Manager for Monit	oring Firm			Tele	phone	No.	-	ephone No.		License No					-
Rick Eustaquio	and a T error and a second			1000	73-494			73-928-4888		1188	•				
Start Date (10)	Is	Schedu	uled Co	mple	tion Da	te (11)		me of OSHA M		1		_			-
03 /26 /	700.000				1 /				NAGEMENT L	LC					
Occupancy Status During				1000				eet Address	camerr e		1 12-12-2			-	-
□ Facility Closed/Vacated					ment			7 Outwater I							
☐ Abatement Performed						cribe									
Time of Abatement:	AM	PM	1/	_PM		AM	- 3000	, State, Zip Co							
Scope of Work (Check all	that anniv)						9	Sarfield, NJ	07026						
	triat apply)							☑ Full Cont	ainment with Ne	ative Pressure					
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			Ren					☐ Mini-Enc	losure						
≥ 100 St or ≥200 if			□ Der	noliti	on			☐ Gloveba	g Procedure mpted (*) and No	n Friable Proce	oduro				
		1	Is	Loca	tion	Γ		Z Non Exc	inpica () and No	II-I Hable I Tock	1	hat		nt Tu	
Location of		1		orma				Description o	f		-			nt Ty	
Asbestos-Containing N)		d Sole ntena	ely by			Containing Ma		Amount	1		Renair	inc	inc
TO BE ABAT					Staff?	(i.e		rmal systems i surfacing, VAT,		(Specify SF or LF)	To the second		함	aps	Enclosure
(13)	,	-		(12)	_	1		her miscellane		SF OF LF)	1 2	-		Encapsulate	Ге
	- 4		Yes	No	N/A		-							е	
Interior						Plaster				3,000 SF		3 [
Exterior- Roof						Roofing	Ma	terial		280 SF	0	+	1		
Garage						Panelin	g Gl	lue		160 SF	0	-	7	司	П
								33121				-	=		
Name of Registered Waste	e Hauler			_	JDEP \	Vaste	Cul	oic Yards of	Name of Regis	stered I andfill		71.	71	ال	
Century Waste LLC				100	lauler II 32797	O No.	Wa	ste		. North Land	fill/Esi	rlee	s I -	and	fill
City, State	TO A COLOR DE LA COMPANION DE LA COLOR DE							s Needed			લા				
Elizabeth, NJ								posal Date BD	City, State	DA					
A TOTAL SECTION OF THE PROPERTY OF THE PROPERT							-1		Morrisville	, PA					
Completed By (Print or Ty	pe)	Title						Signature	Kallinger Serbic Sherrier	220	Date				
Allen Monchik		Pr	oject	wan	ager			Allen	Monchik	2	3/23	/18			



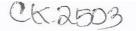
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Date of Notification (1)								ner/Operator (- 3		MAR	2	7 1	2010	
/	23 /	18			Div	ision of I	Prop	erty Manage	ement & Cons	truction		650		.010	
Agencies Notified	Type Notifica	ation			Street	Address							-		- 1
☑ EPA	☐ Initial				20 1	W. State	Stre	et, 3rd Flr.		Picci				1	176
☑ DOLWD	☐ Amended					State, Zip C	VW-17 11.11.11.	-,			NV = NFLP (4.1			m. CL
⊠ DOH	Amendme				1000	nton, NJ		ne						N. Ladina	dui mone
DCA	⊠ Emergend		cluding			of Contac				I Talantan N		100			
(NJAC 5:23-8)	justificatio					k Ferrera	7			Telephone N					
	L Caricellati	1011			2000					609-292-	1717				
					FA	CILITY IN	FOR	RMATION	V						
Name of Facility Where A	Abatement is T	aking	Place	(3)					Type of Facility	3.5					
Residential									School (K-12						
Street Address			1/4						☐ Subchapter☑ Other (i.e., p			hui	ldina	c	
									homes, etc.)		mercia	bui	uiiig	э,	
City (5)		9							Square Feet	# of Floors		Bld	g. Ag	je	
South River															
County (6)					Cour	ty Code (7)(STA	TE USE ONLY)	Current Use (Pr	ior if being dem	nolished	1)			\neg
Middlesex							^					,			
Name of Monitoring Firm	Hired by Build	lina O	wner (8) [ASCM	No.	Nar	ne of Abateme	ent Contractor (9)			-	-17.7		-
Bio Terra Solutions				٠		. 10.			NAGEMENT L						
Street Address								et Address	NAGEMENT	.LC			-		
P.O. Box 1224															
City, State, Zip Code								7 Outwater I					1.00		
Union, NJ								, State, Zip Co							
V-000/2000-00-00 (€ 000/000)								arfield, NJ	07026						
Project Manager for Moni	toring Firm			1000	phone		100	ephone No.		License No					
Rick Eustaquio				1000	73-494			73-928-4888		1188					
Start Date (10)	0.000				tion Da		LATTER ATT	ne of OSHA M							
03 /26 /	18	_0	5_ /	14	_ / _	18_	A	LL PRO MA	NAGEMENT L	LC					
Occupancy Status During	Abatement (C	Check	only o	ne)			Stre	et Address							
□ Facility Closed/Vacate	ed During Entir	e Peri	od of	Abate	ment		2	7 Outwater I	_ane						
☐ Abatement Performed	Outside of No	rmal	Facility	Hou	s - Des	cribe	City	, State, Zip Co	ode						
Time of Abatement: _	AM	PM	I/	_PM		AM		arfield, NJ							
Scope of Work (Check all	that apply)							•					_		-
1 <u>4 -</u>	,							☐ Full Cont	ainment with Neg	gative Pressure					
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			☐ Rei					Mini-Encl							
23 - 100 31 01 - 200 II			M De	HORU	Ж			☐ Glovebaç	g Procedure mpted (*) and No	n-Friable Proce	edure				
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(13)	· y			(12)				ner miscellane		SF or LF)		<u>a</u>		Encapsulate	ле
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Exterior					×	Transite	e Sic	lina		2,100 SF	: 1	XI	П	П	П
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	-				32797		Α	s Needed		. North Land	itili/Fa	ırie	SS L	and	THE
City, State							N-00000	oosal Date	City, State						
Elizabeth, NJ							T	BD	Morrisville	, PA					
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Allen Monchik		Pr	oject	Man	ager				man - 6 .	'	2/0/	014	0		
ASB-41			-	***************************************	100			AYEER	Monchik		3/23	0/1	0		



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Date of Notification (1)					Name	of Building	g Owr	ner/Operator (2)		MAR	2	1 2	2018	
03/	23 /	18	_		Div	ision of F	rop	erty Manage	ement & Const		*****				
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⊠ EPA	☐ Initial				20 \	N. State	Stree	et, 3rd Flr.		ASI	iety)(7743 1453	ll-c	lim &
□ DOLWD □ □ □ □ □ □ □ □ □	☐ Amended					State, Zip C				The contract of the same of th	CONTROL -		1111		-
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DCA (NJAC 5:23-8)		cy (incl	uding			of Contact				Telephone N	umher				\dashv
(110/10/03.20-0)	☐ Cancellati					k Ferrera				609-292-1					
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Name of Facility Where A	hatament is T	okina I	Diago	/2\	FAU	JILITY IN	FOR	MATION	T	/A)					\dashv
Residential	Abatement is 1	aking i	Place	(3)					Type of Facility						
Street Address									☐ School (K-12 ☐ Subchapter 8		-12)				
Street Address									Other (i.e., p	rivate and com		bui	lding	s,	
City (5)									homes, etc.)						
City (5)									Square Feet	# of Floors		Bld	g. Ag	je	
South River															
County (6)					Coun	ty Code (7)(STA	TE USE ONLY)	Current Use (Pr	ior if being dem	olished	i)			
Middlesex															
Name of Monitoring Firm		ing Ov	vner (8	3)	ASCM	No.	1		ent Contractor (9)						
Bio Terra Solutions	:						A	LL PRO MA	NAGEMENT L	LC					
Street Address							Stre	et Address							
P.O. Box 1224							225111	7 Outwater							
City, State, Zip Code							City	, State, Zip Co	ode						
Union, NJ							G	arfield, NJ	07026						
Project Manager for Mon	itoring Firm			Tele	phone	No.	Tele	ephone No.		License No					
Rick Eustaquio				97	73-494	-3762	97	73-928-4888		1188					
Start Date (10)	CONTROL IN INC.	chedu	led Co	mple	tion Da	te (11)	Nan	ne of OSHA M	lonitor						
03 /26 /	18	05	_ /	14	_ / _	18	Α	LL PRO MA	NAGEMENT L	LC					
Occupancy Status During	Abatement (C	Check	only o	ne)			Stre	et Address					_		\dashv
□ Facility Closed/Vacate	ed During Entir	e Perio	od of A	bate	ment		27	7 Outwater I	Lane						
☐ Abatement Performed	Outside of No	rmal F	acility	Hou	s - Des	cribe	City	, State, Zip Co	ode						\dashv
Time of Abatement: _	AM	PM/		_PM		AM		arfield, NJ							
Scope of Work (Check al	I that apply)	-													-
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≥3 sf or ≥3 lf≥160 sf or >260 lf		-	☐ Rer ☑ Der					☐ Mini-Enc							
23 _ 1.00 01 01 _ 2.00 11			A DC	1101111	<i>,</i> , , , , , , , , , , , , , , , , , ,			Non-Exe Non-Exe	mpted (*) and No	n-Friable Proce	edure				
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Location		.		lorma	lly elv by			Description of		Mail Common and California	-	D I	D	ш	т
Asbestos-Containing TO BE ABA)		ntena				Containing Ma rmal systems		Amount (Specify		Remova	Repair	nca	ncic
IN Facili		1	Cust		Staff?	(S	urfacing, VAT	, or	SF or LF)		oval	7	Encapsulate	Enclosure
(13)		-	Vac	(12)	T NI/A	1	oth	ner miscellane	ous)					late	0
		-	Yes	No	N/A						_				\vdash
2 nd Floor						VAT/Ma	stic			150 SF					
Exterior					\boxtimes	Transit	e Sid	ling		1,800 SF	:	X	П	П	
			П							11-11-2-11-11-11-11-11-11-11-11-11-11-11	-			П	
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Name of Registered Was					JDEP V		100000000000000000000000000000000000000	ic Yards of	Name of Regis	stered Landfill					
Century Waste LLC				1	lauler II 32797		Was	ste s Needed	G.R.O.W.S	. North Land	lfill/Fa	irle	ss L	.and	fill
City, State					02101			osal Date	City, State					715-47	
Elizabeth, NJ							Т	BD	Morrisville	, PA					
Completed By (Print or T	ype)	Title					1	Signature			Date	_	-		
Allen Monchik	,, - <i>,</i>	110000000000000000000000000000000000000	oject	Man	ager				711 1.1	,	ATTENDATE OF	0/4	0		
AOD 44			2,000		~9°!			Allen	Monchik	>	3/2	3/1	8		



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Date of Notification (1)	.12000							er/Operator (2	15		Carlotte Car	MAT	2	7 2	010	
03/	23 / _	18		- 1	Divi	sion of P	rope	erty Manage	ement	& Constr	uction	M//	1 4	6	UIO	
Agencies Notified	Type Notificati	ion			Street	Address						w/a				
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⊠ DOLWD	Amended			Ī	City, S	tate, Zip C	ode				1	i.	- 1- 2-		erum.	Direction 1
☑ DOH ☐ DCA	Amendmer Emergency	_	dina		Trer	ton, NJ (0860	8								
(NJAC 5:23-8)	justification		uirig	İ	Name	of Contact					Telephone	e Numb	er			
	☐ Cancellation	10		ı	Rick	Ferrera					609-29	2-1717	7			
		=			FAC	ILITY INI	FOR	MATION					100			
Name of Facility Where	Abatement is Ta	king Pl	lace	(3)					Type	of Facility (4)					
Residential		J		• •						:hool (K-12)						
Street Address										bchapter 8						
									M O	her (i.e., pri mes, etc.)	vate and c	commerc	cial bui	laings	5,	
City (5)			-			100				re Feet	# of Floo	ors	Bld	g. Ag	е	\neg
South River																
County (6)			_		Coun	ty Code (7)	(STAT	E USE ONLY)	Curre	nt Use (Pric	or if being o	demolis	hed)			\dashv
Middlesex					000	.,	,	_ 00_ 0,	0 0 1110	000 (zg .		,			
Name of Monitoring Firm	Hired by Buildi	na Own	ner (8	3) [ASCM I	Vo.	Nam	ne of Abateme	ent Cor	ntractor (9)				2 12/2		
Bio Terra Solutions			(, I.				LL PRO MA			_C					
Street Address	<u> </u>				-			et Address								\dashv
P.O. Box 1224								Outwater	Lane							
City, State, Zip Code			-				10.70	State, Zip Co	C. A. C. C.			_	10 - 5			
Union, NJ								arfield, NJ		3						
Project Manager for Mor	nitorina Firm			Tele	phone I	No.		phone No.			License	No.				-
Rick Eustaquio				University.	3-494			73-928-4888	3		1188					
Start Date (10)	So	chedule	ed Co		tion Dat	ACCOMMENT TO THE PARTY OF THE P	Nam	ne of OSHA M	onitor							
_ 03 / 26 /				(7)	/	45 0	Al	LL PRO MA	NAGI	EMENT LI	_C					
Occupancy Status Durin	The second second						Stre	et Address								
☐ Facility Closed/Vacat	T 1		77	90	ment			7 Outwater	l ane							
☐ Abatement Performe	2.77					cribe		, State, Zip Co								
Time of Abatement:	AM	_PM/_		_PM-		AM	OCCUPATION OF THE PARTY OF THE	arfield, NJ		3						
Scope of Work (Check a	Il that apply)															
	iii triat appiy)	36-3	49500								ative Press	sure				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 				novati				☐ Mini-End								
☑ <u>2</u> 100 Si di <u>2</u> 200 li			a nei	HOIRIG	л			☑ Non-Exe			n-Friable P	rocedu	e			
		T		Locat										ateme	ent Ty	ype
Location				lorma d Sole		١		Description of					Z	Ŋ.	Ш	ш
Asbestos-Containing TO BE AB				intena				Containing Ma rmal systems			Amor (Spec		Removal	Repair	ncal	olor
IN Faci			Cust		Staff?	(SI	urfacing, VAT	, or		SF or		val	7	Encapsulate	Enclosure
(13)		-	/	(12) No	I N/A	-	oth	ner miscellane	eous)	1					ate	L.
		_	Yes		100000		5020		-17-1176				-	_	_	_
1st Floor- Kitchen		L			\boxtimes	VAT/Ma	stic				250	SF		Ш	Ш	
		Г	_					7117					П		П	
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Name of Registered Wa				1.7%	IJDEP I lauler II		Cub Was	oic Yards of ste	110000000	me of Regis			//:			16;11
Century Waste LL	C				32797		A	s Needed		S.R.O.W.S	. North L	andtill	rairi	255 I	_ano	41111
City, State								posal Date		y, State						
Elizabeth, NJ							T	BD	l v	Norrisville	, PA					
Completed By (Print or	Type)	Title						Signature				Da	ate			
Allen Monchik		Pro	oject	Man	ager			Allen	m	onchik	2	3	3/23/	8		



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Date of Notification (1)		5528						er/Operator (A STATE OF THE STA	1110	0	7	2010	
		18	-		Divi	sion of F	rope	erty Manage	ement & Const	ruction	MAR	2	1	2018	
Agencies Notified EPA	Type Notificat	tion				Address V. State \$	Stree	et, 3rd Flr.			114 14 15				
⊠ DOLWD	☐ Amended			ı	City, S	tate, Zip C	ode			·	1.5	- 5	= .5.	5	A Sta
☑ DOH □ DCA	Amendme Emergence	_	ıdina		Tren	nton, NJ	0860	8		WALLES OF STREET	SAMONE W	4.75	- *** **	* 40 5 15.	ha dire
(NJAC 5:23-8)	justificatio		laing	1	Name	of Contact				Telephone No	umber				
,	☐ Cancellation				Rick	k Ferrera				609-292-1	717				
					FAC	ILITY IN	FOR	MATION							
Name of Facility Where	Abatement is Ta	aking P	Place	(3)					Type of Facility	(4)					
Residential									School (K-12		463				
Street Address									☐ Subchapter 8 ☐ Other (i.e., p			buil	dinas		
									homes, etc.)				3	,	
City (5)			1 100/11/10						Square Feet	# of Floors		Bld	g. Ag	е	
South River															
County (6)					Coun	ty Code (7)(STA	TE USE ONLY)	Current Use (Pr	ior if being dem	olished)			
Middlesex															
Name of Monitoring Fin		ing Ow	mer (8	3)	ASCM I	No.			ent Contractor (9)						
Bio Terra Solution	ns						Α	LL PRO MA	NAGEMENT L	LC					
Street Address							1000000	et Address							
P.O. Box 1224								7 Outwater							
City, State, Zip Code							1 .	, State, Zip C							
Union, NJ								arfield, NJ	07026						
Project Manager for Mo	onitoring Firm				phone I			phone No.		License No.					
Rick Eustaquio				0.00	3-494			73-928-4888		1188					
Start Date (10)				100	tion Dat	25.0		ne of OSHA N							
03 /26					_ / _	18	A	LL PRO MA	NAGEMENT L	LC			844		
Occupancy Status Duri	1978 M. 1978		1576					et Address							
☐ Facility Closed/Vaca	7.							7 Outwater							
Abatement Performed Time of Abatement:							2010	, State, Zip C							
							G	arfield, NJ	07026	A _ A					
Scope of Work (Check	all that apply)							☐ Full Con	tainment with Ne	native Pressure					
≥3 sf or ≥3 lf				novati				☐ Mini-End	losure	gatiro i roccaro					
≥160 sf or ≥260 If		Þ	✓ Der	molitic	n				g Procedure empted (*) and No	n-Friable Proce	edure				
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Location				lorma		124		Description of		32		-			
Asbestos-Containin TO BE Al)		d Sole intena				Containing Ma rmal systems		Amount (Specify		Removal	Repair	Encapsulate	-
IN Fac			Cust		Staff?	(1.0	s	urfacing, VAT	, or	SF or LF)		Wa	7	psul	Lilotogaio
(13	3)		Yes	(12) No	N/A	1	oth	ner miscellane	eous)					ate	
1st Floor Vitalian		_		200	10000000	VATRE	204	1		240.05	E	7			Г
1st Floor- Kitchen		-+				VAT/Ma	STIC			210 SF	_	X			L
1st Floor- Rear Half		-				VAT				30 SF	_	X			
1 st Floor- Main Batl	hroom] [Ø	VAT/Ma	astic			35 SF	_	X			
Exterior] [\boxtimes	Transit		10-01-01		2,700 SF		XI			
Name of Registered W				1.022	IJDEP		1000000	oic Yards of		stered Landfill	700				
Century Waste LI	LC			1	32797		Wa	ste s Needed	G.R.O.W.S	S. North Land	lfill/Fa	irle	ss L	and	fil
City, State								posal Date	City, State						
Elizabeth, NJ							T	BD	Morrisville	e, PA					
Completed By (Print or	r Type)	Title						Signature	· ·		Date				_
Allen Monchik	1986 19	Pro	oject	Man	ager			Allon	Monchik	6,	3/23	3/1	8		
		1	0000		Shill			1 x 1 cocord	invivau		10120		-		



Date of Notification (1)				_	Name	of Building	Owr	ner/Operator (2	2)		n .	24	West a		- 11
	23 / _	18				ma vesili			ement & Const	ruction MA	R 2	/	201	8	The property is a
Agencies Notified	Type Notifica	tion			Street	Address				L	Armen de la	an co	**.		I
⊠ EPA ⊠ DOLWD	☐ Initial			L	20 V	V. State \$	Stree	et, 3rd Flr.	*	ASSIGN		i.i	770	Cil. 8	Ł
⊠ DOH	Amended Amendme				City, S	tate, Zip C	ode			THE RESERVE AND PROPERTY AND PR	*******		. m.r.m	4.4	and the
□ DCA	⊠ Emergend	_	ina		Trei	nton, NJ	0860	08							
(NJAC 5:23-8)	justification		5	T	Name	of Contact				Telephone Nu	ımber				
+	☐ Cancellati	on			Ricl	k Ferrera				609-292-1	717				
					FAC	ILITY IN	FOR	MATION							
Name of Facility Where A	Abatement is T	aking Pla	ce (3)						Type of Facility	(4)					
Residential									School (K-12		40)				
Street Address									☐ Subchapter 8 ☐ Other (i.e., pr	rivate and comm	nercial	build	dings	s,	
City (E)									homes, etc.)						
City (5)									Square Feet	# of Floors		Bldg	J. Ag	е	
South River					_		/o=+		_				21177		
County (6) Middlesex					Coun	ty Code (7)	(SIA	TE USE ONLY)	Current Use (Pri	or if being dem	olished)			
Name of Monitoring Firm	Hirad by Build	ing Oum	r /0\	1	SCMI	Mo	Non	no of Abetome	nt Controlter (0)	,					
Bio Terra Solutions		ing Owne	1 (0)	^	ISCIVI I	NO.	100		ent Contractor (9) NAGEMENT L						
Street Address	•						15000	et Address	NAGEWIENT	LC					
P.O. Box 1224							0.00.00.00	7 Outwater I	220						
City, State, Zip Code								, State, Zip Co				_	_		_
Union, NJ								arfield, NJ							
Project Manager for Mon	itoring Firm		I T	elen	hone I	Vo		ephone No.	07020	License No.		_			-
Rick Eustaquio	itomig i iiii		- 1		3-494-		100123000	73-928-4888		1188					
Start Date (10)	Is	cheduled				THE STATE OF THE S		ne of OSHA M		1100			_	_	-
03 / _26_ /					_ /	7 12			NAGEMENT L	LC					
Occupancy Status During	Abatement (C							et Address			-				-
☐ Facility Closed/Vacate					ent			7 Outwater I	ane						
☐ Abatement Performed	d Outside of No	rmal Fac	ility Ho	ours	- Des	cribe		, State, Zip Co				_			-
Time of Abatement: _	AM	PM/	P	M		AM		arfield, NJ							
Scope of Work (Check al	I that apply)												_		-
☐ >3 sf or >3 lf		П	Renov	atio	n			☐ Full Cont ☐ Mini-Enc	ainment with Neg	gative Pressure					
≥160 sf or ≥260 lf			Demo		555			☐ Glovebag	Procedure						
								Non-Exer Non-Exer	mpted (*) and No	n-Friable Proce	dure				
Location	of		Is Lo					Di-#			1	Abat	teme	nt Ty	/pe
Asbestos-Containing			Ised S	olel	y by	Asbes	stos (Description o Containing Ma		Amount	1 2	0	Re	Ē	四
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IN Facili (13)	ity	Ľ		2)	·····			urfacing, VAT, ner miscellane		SF or LF)	2	2		Encapsulate	ure
		Ye	s N	lo	N/A		59							e	
Exterior]	\boxtimes	Transite	Sid	ling		1,600 SF	0	3			
Exterior]	\boxtimes	Window	/ Gla	azing		7 Units	0	3			
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]][
Name of Registered Was				10000	IDEP V		1000000000	oic Yards of	Name of Regis	stered Landfill					
Century Waste LLC					auler II 32797		Was	ste s Needed	G.R.O.W.S	. North Land	fill/Fai	rles	ss L	and	fill
City, State							-	posal Date	City, State						
Elizabeth, NJ							Т	BD	Morrisville	, PA					
Completed By (Print or T	ype)	Title						Signature	L.		Date				
Allen Monchik		Proje	ct M	ana	ger			Allen	Monchik		3/23	/18	3		



DATT

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

Date of Notification (1) Name of Building Owner/Operator (2) MAR 2 / 2		
00 / 00 / 40 Divi /D / N / N / O / N / N	018	
03		
Agencies Notified Type Notification Street Address		
☐ EPA ☐ Initial 20 W. State Street, 3rd Flr.		&
City, State, Zip Code	en est adolesia a s	Lair Season .
☑ DOH Amendment # ☐ DCA ☒ Emergency (including) Trenton, NJ 08608		
(NJAC 5:23-8) justification) Name of Contact Telephone Number		
☐ Cancellation Rick Ferrera 609-292-1717		
FACILITY INFORMATION		
Name of Facility Where Abatement is Taking Place (3) Type of Facility (4)		
Residential School (K-12)		
Stroot Address Subchapter 8 (Other than K-12)		
☐ Other (i.e., private and commercial building homes, etc.)	s,	
City (5) Square Feet # of Floors Bldg. Ag	10	-
South River	,0	
County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished)		\dashv
Middlesex		
Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9)		
Bio Terra Solutions ALL PRO MANAGEMENT LLC		
		_
City, State, Zip Code City, State, Zip Code		
Union, NJ Garfield, NJ 07026		
Project Manager for Monitoring Firm Telephone No. Telephone No. License No.		
Rick Eustaquio 973-494-3762 973-928-4888 1188		
Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor		
03 /26 /18		
Occupancy Status During Abatement (Check only one) Street Address		
☐ Facility Closed/Vacated During Entire Period of Abatement 27 Outwater Lane		
Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement:AMPM/PMAM City, State, Zip Code Continued N.L. 07026		
Garrielu, No 07020		
Scope of Work (Check all that apply)		
☐ ≥3 sf or >3 lf ☐ Renovation ☐ Mini-Enclosure		
≥160 sf or ≥260 lf		
Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure		
Is Location Abatem Location of Normally Description of	ent Ty	ype
	E	E
Asbestos-Containing Material (ACM) TO BE ABATED IN Facility Used Solely by Maintenance/ Custodial Staff? Used Solely by Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or SF or LF)	aps	Enclosure
IN Facility Custodial Staff? surfacing, VAT, or SF or LF)	Encapsulate	ure
Yes No N/A	te	
1st Floor- Kitchen, Dining Room, Rear Hallway 🔲 🔛 🛛 VAT		
	Ш	Ш
	П	
Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill		1-1
Century Waste LLC Hauler ID No. Waste G.R.O.W.S. North Landfill/Fairless	and	Hill
32797 As Needed		
City, State Disposal Date City, State		
Elizabeth, NJ TBD Morrisville, PA		
Completed By (Print or Type) Title Signature Date Allen Monchik Project Manager		

ASB-41 JAN 13

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