3

| 20 | | | NOTI | | | | BESTOS ABAT C 8:60 and 5:16 | · · | herk# | 90 | 11 | | |
|--|-----------------|------------|---------------|-----------------|----------------|---------------------|--|--|--------------------------------|--------|--------|-------------|-----------|
| Date of Notification (1) 3 / | 26 / | 14 | | | Name CRI | 15 (Sec. 199 | g Owner/Operator (2 | 2) | a | 7 1 | 7 | 7 | |
| Agencies Notified | Type Not | ification | | | | Address South Pe | nnsylvania Ave | | | | | | |
| DOLWD | Amen | ded | | | | tate, Zip C | | | <u>UKD 280</u> | 314 | - | . | |
| DOH DOH | a ana 233 samma | dment #_ | Vic 00201 | | | | , NJ 08401 | | | | | | |
| DCA | Emerg | | cluding | | | of Contac | anders also also | | Telenhone Numb | or | 10 | 1 | |
| (NJAC 5:23-8) | | cation) | | | 0.005.000.000 | | Knight/Christina | | | | | | |
| | | nauon | | | L | | | aruentes | <u> </u> | | | | |
| | 1.0 | | | | FAC | CILITY IN | FORMATION | | | | | | |
| Name of Facility Where | Abatement | is Taking | Place | (3) | | | | Type of Facility (4 | +) | | | | |
| Block 157 - Lot 10 | | | | | | | | School (K-12) | (Other then 1/ 12) | | | | |
| Street Address | | | | | | | | Subchapter 8 | | | ildina | S. | |
| 14 S Indiana Ave | | | | | | | | homes, etc.) | | | | | |
| City (5) | | | | | | | | Square Feet | # of Floors | Blo | ig. Ag | ge | |
| Atlantic City | | | | | | | | 2200 | 1 | 1 | 50+ | | |
| County (6) | | | | | Cour | ity Code (7 |)(STATE USE ONLY) | Current Use (Prio | r if being demolis | hed) | | | |
| Atlantic | | | | | | | | | - | • | | | |
| Name of Monitoring Firm | h Hired by E | Buildina C |)wner (| (8) | ASCM | No. | Name of Abateme | ent Contractor (9) | | | | | |
| Health & Safety Se | | | 00002369 | | 117 | | , showing a start of the second second second second | nvironmental Sy | vstems | | | | |
| Street Address | | | | l | | | Street Address | | | | | | |
| 318 12th Street | | | | | | | | lehem Pike - Su | ite 60 | | | | |
| City, State, Zip Code | | | | | | | City, State, Zip Co | | | | | | |
| Hammonton, NJ 08 | 2037 | | | | | | Spring House | | | | | | - |
| | 255-33245 | | | Tak | nhanc | Na | | 6, FA 13411 | Liconac No. | | | | |
| Project Manager for Mor | ntoring Firm | 1 | | 1.000 | ephone | | Telephone No. | | License No. | | | | |
| Jim Proctor | | 1.0.1 | | | 09-7'04 | | 215 542 7000 | | 00847 | | | | |
| Start Date (10) | | | | | etion Da | | Name of OSHA M | Ionitor | | | | | |
| / / | | | 4/ | | 1_/- | | CES | | | | | | |
| Occupancy Status Durin | g Abateme | nt (Checl | conly o | one) | | | Street Address | | | | | | |
| Facility Closed/Vacat | | | | | | | 1121 N. Beth | lehem Pike - Su | ite 60 | | | | |
| Abatement Performe Time of Abatement: | | | | | | cribe | City, State, Zip Co Spring House | | | | | | |
| Scope of Work (Check a | Il that apply | () | | | | | | | | | | | _ |
| ⊠ ≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf | | | □ Re ⊠ De | novat moliti | | | ☐ Mini-Enc ☐ Glovebag | tainment with Nega losure g Procedure mpted (*) and Non | | re | | | |
| | | | | Loca | | | | | | Ab | atem | ent T | ype |
| Location | | ~ | | Norma | ally ely by | | Description of | | | Re | Re | ц. | ц. |
| Asbestos-Containing TO BE AB | | CM) | 1 299023 | | ance/ | | estos Containing Ma e., thermal systems | | Amount (Specify | Remova | Repair | Encapsulate | Enclosure |
| IN Faci | lity | | Cus | | Staff? | | surfacing, VAT | , or | SF or LF) | Val | | sula | sure |
| (13) | | | Var | (12) No | 1 | - | other miscellane | eous) | | | | ate | |
| Exterior Window Ca | ulking | | Yes | | | Window | w Caulking | | 510 LF | | | | |
| Roof | | | | | \boxtimes | Roof M | embrane & Flas | hing | 2,135 SF | | | | |
| Roof | | | | | | Roof F | lashing | | 250 LF | | П | П | |
| | | | | H | | 110011 | uorining . | | 200 2. | | | F | |
| Name of Desistant Mis | ata Licula- | | | Ц. | | (Jack- | Cubie Verde of | Name of Decisi | | | | | |
| Name of Registered Wa Geppert Recycling | | | | | JDEP | | Cubic Yards of Waste 40 vd | Name of Registe Western Be | ered Landfill erks Communit | y Lan | dfill | | |
| City, State | | | | | | | Disposal Date | City, State | DA | | | | |
| Hatfield PA | | | | | | <u>a</u> | 4/14/14 | Birdsboro, | | | | | |
| Completed By (Print or T Patricia Visco | Гуре) | Title | e Iffice l | Mana | iger | | Signature Haluc | un Visc | Da | | 6/ | 1.4 | |
| ASB-41 | | | | | | | / | | | 1 | 1 | 4 | |

| | | | | | S | tat | te of New J | ersey | | r | | | | | |
|---|------------|--|--------------------|----------------|--------------------------|-------|-------------------------------|--|--------|--|------------------------------|---|-----------------|----------|----------|
| Check # 3 | 220 |) | | | | | F ASBESTOS 2 8:60-7 and 12 | | | ENT | | 10 | | | R.D |
| Date of Notification (1) | | | | | | | ding Owner/C | perato | or (2 | 2) | 33 1 | | | | |
| 04/27/14 Month/Dev/Vicen | | | | | Princeton | Un | iversity | | | | ×., | MAR | 2.8 | 2014 | ' |
| Month/Day/Year Agency Notified | Type Not | ificatio | n | | Street Add | Ire | SS | | | | - | | | | |
| EPA | x | Initia | | | P.O. box 2 | 158 | 8 | | | | | 11 | | | ! |
| DEP | | | ficatio | m | City, State | | 양 방향이 전망했는 것 같 | | | | | | | | - 1 |
| DCA DOH | | Amen | | | Princeton Name of C | _ | | | | | Talanh | one Nur | nhan | | <u> </u> |
| DOR | | | ficatio ellatio | | Robert Ot | | | | | ſ | Telepho | one Nui | aber | | |
| | | - | cinterio | | 1 | _ | INFORMAT | ION | | | | | | | |
| Name of Facility Where Abate Princeton University 80 A Street Address 80 Alexander Road Princeto | lexander I | Road | Place | (3) | | | | | T | ype of Facility School Subcha x Other buildi | (K12) pter 8 (i. e. Pr | | commen | | |
| So Alexander Road Trincen | | ity | | | | | | | S | | # of Flo | | Bldg. A | ge | |
| City (5) | | Coun | ty (6) | | | 1.000 | ounty Code (| | | 5000 | 2 | | 70+ | | |
| Princeton | | | | | | (S. | TATE USE ONLY |) | | Current Use (Pr Iniversity | ior if be | ing dem | olished |) | |
| Name of Monitoring Firm Hin ATC Associates, Inc | ed by Bui | l Iding (|)wner | (8) | | 1 | ASCM No. | 1. | e of A | Abatement Con d Specialty Con | | - 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10 | | الوجالي | |
| Street Address 3 Terri Lane | **** | | | | | | | Street 98 La | | ldress 1e Avenue | Σl | | | | |
| City, State, Zip Code Burlington NJ 08016 | | | | | | | | | | te, Zip Code ls, PA 19342 | | | | | |
| Project Manager of Monitoria Mike Keehn | ng Firm | | | | Telephone 609-386-8 | | | Telep 610-3 | | e Number 9622 | | | Licence 1103 | e Numb | er |
| Scheduled Start Date (10) 04/09/14 | | | Schee | 1. Con | opletion Dat 05/09/14 | | 11) | | | OSHA Monitor Labs | | | | | |
| Month/Day/Year Occupancy Status During Abs | atomant (C | 'hooly o | nhu ou | | onth/Day/Ye | ear | | Street | t A d | ldress | _ | | | | |
| Facility Closed/Vacate | | | | | batement | | | | | gresive Drive | | | | | |
| x Abatement Performed | Outside o | f Norn | nal Fa | | | | | City, | Stat | te, Zip Code | | | | | |
| Hours - Describe: | 7:00 AM | to 3:30 |) PM | | | | | Bensa | alem | PA 19020 | | | | | |
| Other - Describe: | | 600 | | | | _ | | | | | | | | | |
| Scope of work (Check all that Demolition | apply) | | | | Renovatio | | | | | ull Containme /ini - Enclosur | | Negativo | e Pressu | re | |
| x >3 sf or >3 if | | | | x | Renovatio | m | | x | | Slovebag Proce | | | | | |
| >160 sf or >260 lf | | | | | | | | x | | on-Friable Pro | | | | | |
| | - | 1 | Is | _ | | | | | T | | | Ab | atement | Туре | |
| Location of | | 1. | cation | | | | iption of | | | | | 70.00 | | E | E |
| Asbestos - Containing Material (ACM) | | 1 13 16 16 | rmally sed | , | | | -Containing al (ACM) | | | Amoun (Specify | | RE | R | N C | N C |
| TO BE ABATED | | 1 10 100 2001 | lely | | | | mal systems | | | SF or | | M | E | Ă | Ľ |
| In Facility | | - 10 m | Main | | insulation | 1, S | urfacing, VAT | ſ, | | LF) | | 0 | P | P | 0 |
| (13) | | | ance/ stodia | | or other | r m | iscellaneous) | | | | | | AI | S U | S U |
| | | | ff (12) | | | | | | | | | L | R | L | R |
| | | Yes | No | N/A | | | | | | | | | | | E |
| 1st Floor Kitchen | | | x | | linoleum | | | | 2 | 00 SF | | x | | | |
| | | | | | | | | | | | | x | | | |
| | | 1 | | | | | | | - | | | x | | | |
| | | | | - | | | | | + | | | | | | |
| Name of Registered Waste Ha | uler | | | 12/2011 D | EP Waste er ID No. | | Cubic Yards of Waste | | N | ame of Registe | red La | ndfill | I | l | |
| Robbinson Waste | | | | #### | | | 5 | | G | GROWS | | | | | |
| City, State | | | | | | | Disposal Date | | | City, State | | | | | |
| Voorhees NJ | | | | | | | As needed | | | Aorrisville PA | | | | - | |
| Completed By (Print or Type Mark Goshow |) | | | Title Proje | ect Manager | | | Signa | A | indo | lai | د | | Date 4-2 | 7-14 |
| ABS-41 | - | | | | | | | | | | | | | | |
| JUN 95 | | | | | | | | | | | | | | | G4667 |

Street.

| the shuts attached | - 49 1 | 1. / NOTII | | TION | OF ASE | w Jersey BESTOS ABAT C 8:60 and 5:16 | | | | | | | |
|---|-------------------------------------|-----------------------|--|----------|---------------------|--|---------------------------------|---------------|-----------|-------------|-----------------|-------------|----------|
| Date of Notification (1) | | | | Name | of Building | Owner/Operator (2 | 2) | | • | | | | |
| /12 / | 13 | | | Bell | eville Eq | uities, LLC | / Job # 1402- | -1846 Chk | . #NA | | | | |
| Agencies Notified Type Noti | fication | | | Street | Address | | | | | | | | |
| EPA Initial | | | | 3110 | 37 th Av | enue, Suite 500 | | | | | | | |
| DOLWD Ameno | and the second second second second | | F | City, S | tate, Zip C | ode | | | | | | | _ |
| approximation approximation | dment #0 | | | Lon | g Island, | NY 11101 | | | | | | | |
| DCA Emerg (NJAC 5:23-8) justific | | luaing | H | | of Contact | | | Telenhone | Numbe | r | | | |
| | | | | Mr. | George \ | /aliotis | * | 1 | | - | | | |
| | | | 1 | FAC | ILITY IN | FORMATION | | <u>L.</u> | | | | 0.000 | |
| Name of Facility Where Abatement | is Taking | Place | (3) | | | | Type of Facility (| 4) | | 1001005 | these t | 1990 H. | 225 |
| Belleville Equities, LLC | | | 0.62 | | | | School (K-12 |) | | | | | |
| Street Address | | | 4 | | | | Subchapter 8 | | | | . e | | |
| 520 Belleville Avenue | | | | | | | Other (i.e., pr homes, etc.) | ivate and c | ommerci | al bui | lding | s, | |
| City (5) | | | | | | | Square Feet | # of Floc | re | Blo | lg. Ag | 10 | _ |
| Belleville | | | | | | | 220,000 | 8 | | | ig. Ag 80 ye | | |
| | | | | 0 | hi Ord- /7 | VOTATE LIDE ONLY | | - | lom el'et | | o ye | ars | 5.00 |
| County (6) | | | | Coun | ty Code (/ |)(STATE USE ONLY) | Current Use (Pri | or it being c | emoilsh | ed) | | | |
| Essex | | | | | | | Vacant | | | | | - 10 A | |
| Name of Monitoring Firm Hired by B | Building O | wner (8 | B) / | ASCM | No. | Name of Abateme | | | | | | | |
| Horizon Environmental | | | | | | Asbestos and | d Mold Service | s, Corp. | | | | | _ |
| Street Address | | | | | | Street Address | | | | | | | |
| PO Box 336 | | | | | | 3859 Sylon B | oulevard | | | | | | |
| City, State, Zip Code | | | | | | City, State, Zip Co | ode | | | | | | |
| Thorofare, NJ 08086 | | | | | | Hainesport, N | 4J 08036 | | | | | | |
| Project Manager for Monitoring Firm | 1 | | Tele | phone I | No. | Telephone No. | | License | No. | 57.54 | 5000.00 | | |
| Mr. Steve Flanigan | | | 85 | 6-848 | -0800 | 609-702-0400 | 1 | 0086 | 2 | | | | |
| Start Date (10) | Sched | uled Co | omplet | tion Dat | te (11) | Name of OSHA N | lonitor | | | | | | |
| 02 / 26 / 14 | Shinete. | | and the second | 1 | | EMSL Analyt | ical, Inc. | (+ | | | | | |
| Occupancy Status During Abateme | nt (Chock | only o | no) | | a to links | Street Address | | Seza ware di | - | | 0.0000 | 20230 | _ |
| Status During Abatemie | | 1 - C. C C. C C C C C | | nont | | 200 U.S. Rou | to 130 North | | | | | | |
| Abatement Performed Outside o | | | | | cribe | | | | | | | | |
| Time of Abatement:AM | | | PM- | | AM | City, State, Zip Co | | | | | | | |
| | | | | | | Cinnaminsor | | | | | | | |
| Scope of Work (Check all that apply | () | | | | | A NKAY | tainment with Neg | HOPS - 3 | EEA11 | AL | tev | 1 | |
| □ >3 sf or >3 lf | | 🖾 Re | novati | on | | Mini-End | losure | Jauve Prese | are | | | | |
| ⊠ ≥160 sf or ≥260 lf | | De De | molitic | n | | | g Procedure | | | | | | |
| | | | | | | ∐ Non-Exe | mpted (*) and No | n-Friable P | rocedure | | | | - |
| | | 2007 | Locat Iorma | | | _ | | | | Ab | atem | ent T | yp |
| Location of Asbestos-Containing Material (A | CM) | | d Sole | | Ashe | Description o stos Containing Ma | | Amou | int | Re | Re | Ē | Lincoord |
| TO BE ABATED | (OIII) | 1 | intena | | | ., thermal systems | | (Spec | ify | Removal | Repair | Sap | |
| IN Facility | | Cust | (12) | Staff? | | surfacing, VAT | | SF or | LF) | a | | Encapsulate | |
| (13) | | Yes | No | N/A | 1 | other miscellane | ous) | | | | | te | |
| | | | | - | | | | | | 57 | | | + |
| SEE ATTACHED - 4 additonal | pages | | | | Pipe In: | sulation | | 7,566 | LF | \boxtimes | | | L |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | T |
| | | | | | | | | | | | | | L |
| | | | | | | | | | | | | | |
| Name of Registered Waste Hauler | | | 1. | JDEP 1 | | Cubic Yards of | Name of Regis | stered Land | fill | 3 | | | |
| Freehold Cartage, Inc. | | | H | auler II | | Waste | GROWS L | andfill | | | | | |
| City, State | | | | 02265 | , | 20 Disposal Date | City, State | | | | | | - |
| Freehold, NJ | | | | | | 04/30/14 | Morrisville | PA 1906 | 7 | | | | |
| | | | | an er | | And a state of the | 1 | | | - | 1222 | | 342 |
| Completed By (Print or Type) Kimberly A. Trumbetti | Title | | Coord | dinato | r | Signature | 1 - | | Dat | e 3-1 | 4-1 | 4 | |
| ASB-41 | | | | | | TAL | A | (Autor | -the star | | 100 | | |
| MAY 11 | * | Do not | use tl | his form | for asbes | tos licensure exern | pted activities. | Yat | 14 | 0 | 1 5 | P. St. | |

| Date of Notification (1) | | | | N | lame | of Building | Owner/Operator (2 | 2) | | | | | 107-10-1 | |
|--|-------------------------------------|----------------------|----------------------------|----------|---------------------------|----------------|---|--------------------------------------|------------------------------|--------------|-------------|--------|-------------|-----------|
| 03/ | <u>14</u> / | 14 | | | ССТ | S - Cres | tar Capitol, LLC | 1 | Job # 14 | 03-1854 | CI | 1k. # | NA | |
| Agencies Notified ⊠ EPA ⊠ DOLWD | Type Notifi ☐ Initial ⊠ Amend | | | | 1415 | Address | | | | | | | | |
| ⊠ DHSS | | ment # <u>1</u> | | C | | tate, Zip C | | | | | | | | |
| DCA | Emerge | | ding | | | of Contact | NJ 08034 | T | Tele | | | | | |
| (NJAC 5:23-8) | justifica | | | | 2002 11/20 | 9 | | | | | | | | 3 |
| | | auon | | | | lanrel | | <u> </u> | | | | - | | |
| | | | | | FAC | ILITY IN | FORMATION | | | | 4 | | | |
| Name of Facility Where A Residential Property | | s Taking Pl | ace (3) | | | | | Type of Facility (4 | | | | | | |
| Street Address | · | | | | | | | Subchapter 8 | | | hui | Idina | • | |
| 1325 Myrtle Avenue |) | | | | | | | Other (i.e., priv homes, etc.) | | 7 | | | | |
| City (5) | | | | | | | | Square Feet | # of Floors | 5 | | g. Ag | | |
| Plainfield | | a and a state of the | (a.5.14) | | | | | 2020 | 3 | | 2.11 | 965 | | |
| County (6) Union | | | | | Coun | ty Code (7 |)(STATE USE ONLY) | Current Use (Prio Residential | r if being de | molished | 4) | | | |
| Name of Monitoring Firm | Hired by Br | uilding Own | oer (8) | | SCM | No | Name of Abateme | | | | | | | |
| Sky Environmental | - 50 | 1.75 | | | SCIVIT | NU. | Sec. and a second | d Mold Services | Corn | | | | | |
| Street Address | Oel vices, | ino. | | | | | Street Address | | , oorp. | | | | | |
| 140 Boulevard | | | | | | | 3859 Sylon B | oulevard | | | | | | - |
| City, State, Zip Code | | | | | | | City, State, Zip Co | | | | | | | |
| Mountain Lakes, N | J 07046 | | | | | | Hainesport, N | 4J 08036 | | | | | | |
| Project Manager for Mon | | | Г | elept | none l | No. | Telephone No. | | License N | 0. | | | | |
| Leonid Shereshevs | sky | 1 | | 00000000 | | 4821 | 609-702-0400 | | 00862 | | | | | |
| Start Date (10) 03 / 24 / | 14 | Schedule 03 | d Com | Same | | | Name of OSHA N EMSL Analyt | | | | | | | |
| Occupancy Status During | | | | | | | Street Address | | | | | | _ | |
| Security Closed/Vacate | | | N | | ent | | 200 U.S. Rou | te 130 North | | | | | | |
| Abatement Performed | Outside of | Normal Fa | cility H | ours | - Des | | City, State, Zip Co | | | | | | | |
| Time of Abatement: _ | AM | PM/_ | F | PM | | AM | Cinnaminsor | | | | | | | |
| Scope of Work (Check al | l that apply) | | | | | | Eull Con | tainment with Nega | ative Pressu | re | | | | |
| □ ≥3 sf or ≥3 lf ⊠ ≥160 sf or ≥260 lf | | | Reno Demo | | | | Mini-End | | | | | | | |
| | | | | | | | Non-Exe | mpted (*) and Non | -Friable Pro | cedure | | | | |
| | | | | mally | | | | - | | | Ab | atem | ent T | уре |
| Location Asbestos-Containing <u>TO BE ABA</u> IN Facili (13) | Material (AC | | Used S Mainte Custod | Solely | / by ce/ | Asbe (i.e | Description of stos Containing Ma a., thermal systems surfacing, VAT other miscellane | iterial (ACM) insulation, , or | Amoun (Specif SF or Ll | t y =) | Removal | Repair | Encapsulate | Enclosure |
| | | Y | | No | N/A | | | | | | | | | |
| Basement | | |] [| | \boxtimes | Pipe W | rap | | 50 LF | | \boxtimes | | | |
| | | |] [| | | | | | | | | | | |
| | | |] [| | | | | | | | | | | |
| | | |] [| ו | | | | | | | | | | |
| Name of Registered Was Freehold Cartage, I | | | | Ha | DEP V uler ID 12265 | No. | Cubic Yards of Waste 5 | Name of Registe GROWS Lat | | | | | | |
| City, State | | | | | 2200 | | Disposal Date | City, State | - | | - | | | |
| Freehold, NJ | | | | | | | 3/24/14 | Morrisville, | PA 19067 | | | | | - |
| Completed By (Print or T Kimberly A. Trumb | | Title Offic | ce Co | ordi | nator | • | Signature | 10- | | Date | 7-1 | 9- | 14 | |
| ASB-41 | | - | | | | 5.0220 - 20220 | | P | | 1 | | | | |

| Date of Notification (1) | _ | 4 | | | | Owner/Operator (2 State Police | | / Job # 1403-1 | 857 (| `hk | #353 | 24 |
|--|--|--------------|-------------------|-----------------------|---------------------|---------------------------------------|--|------------------------|-------------|-------------|-------------|-----------|
| 03 /25 | <u> </u> | 4 | | NEW | Jersey | State Folice | 7.5 | 1.000 # 1.400- | 0.01 | | | |
| | pe Notificatio | n | | | Address Box 7068 | 8 - Facility & Mai | ntenance Unit - | Bldg. 17 | -9.) 1 | 1 | | 1. |
| 🛛 DOLWD | Amended | | | 1 | tate, Zip C | | | | | | | |
| ⊠ DHSS | Amendment | # | 0 | | | n, NJ 08628 | | MAR | 28 | 2014 | | ł |
| | Emergency | | 3 | | of Contact | | | Teleshene Numb | | 2019 | | |
| (NJAC 5:23-8) | justification) Cancellation | | | | Frank Sc | | ٢ | | | | | |
| | an a | Mercellin av | | FAC | ILITY IN | FORMATION | 2 | | 5. | | - | |
| Name of Facility Where Abat | tement is Tak | ing Place | (3) | | | - | Type of Facility (4 | 4) | 10 | | | |
| Princeton Station - Ba | | 5 | | | | | School (K-12) | 17 | | | | |
| Street Address 3925 Route One South | ı | | | | | | Other (i.e., priv homes, etc.) | | | ilding | 5, | |
| City (5) | | | | | | | Square Feet | # of Floors | Blo | lg. Ag | e | |
| Princeton | | | | | | | 11,016 | 2 | 6 | 52 | | |
| County (6) | | | | Coun | ty Code (7 |)(STATE USE ONLY) | Current Use (Pric | r if being demolis | hed) | | | |
| Mercer | | | | ooun | () 0000 (/ | | State Police | | | | | |
| Name of Monitoring Firm Hir | ed by Building | g Owner | (8) | ASCM | No. | Name of Abateme | ent Contractor (9) | | | | | - |
| USA Environmental | | | | | | Asbestos an | d Mold Services | s, Corp. | | | | |
| Street Address | | | | | | Street Address | | | | | | |
| 344 West State Street | | | | | | 3859 Sylon B | Boulevard | | | | | |
| City, State, Zip Code | | | | | | City, State, Zip C | ode | | | | | |
| Trenton, NJ 08618 | | | | | | Hainesport, I | | | | | | |
| Project Manager for Monitori | ing Firm | | Tele | phone | No | Telephone No. | | License No. | | | | |
| | ing i inn | | | | 3-0493 | 609-702-0400 | n e | 00862 | | | | |
| William Weisgarber | 0.1 | a duda d | and some star | and the second second | | | | 00002 | | | | |
| Start Date (10) 04 /7 / | 76 104 | 04 | | 1 | | Name of OSHA M EMSL Analyt | | | | | | |
| Occupancy Status During At | patement (Ch | eck only | one) | | | Street Address | | | | | | |
| Facility Closed/Vacated D | | - | | ment | | 200 U.S. Rou | te 130 North | | | | | 1 |
| Abatement Performed Ou | | | | | cribe | City, State, Zip C | ode | | | 0.040/0.453 | | |
| Time of Abatement: | AM | PM/ | PM | | AM | Cinnaminsor | | | | | | |
| Scope of Work (Check all the | at apply) | | | | | _ | | 201. 21. <u>2</u> . | 11005147 | | | |
| ⊇3 sf or ≥3 lf ≥160 sf or ≥260 lf | | | enovat emoliti | | | Mini-End | tainment with Nega closure g Procedure empted (*) and Nor | | re | | | |
| | | 1 | s Loca | tion | | | | | Ab | ateme | ent T | ype |
| Location of | | | Norma | | | Description of | of | | R | R | m | m |
| Asbestos-Containing Ma | | 1000 | ed Sol aintena | | | estos Containing Ma | | Amount | Removal | Repair | nca | Enclosure |
| TO BE ABATE IN Facility | <u>:D</u> | 2000 S | | Staff? | (1.6 | e., thermal systems surfacing, VAT | | (Specify SF or LF) | ova | ₹ | psu | usc |
| (13) | | | (12) | 1 | | other miscellane | eous) | | - | | Encapsulate | 9 |
| | | Yes | No | N/A | | | 0 | | | | CD . | |
| Basement #18,22,23,25, | ,29 & landir | g 🗆 | | | floor til | le | | 2,000 SF | \boxtimes | | | |
| Basement #18,22,23,25, | 29 & landir | g 🗆 | | \boxtimes | mastic | (wet non-friable | •) | 2,000 SF | \boxtimes | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| Name of Registered Waste I | Hauler | | | | Nasta | Cubic Yards of | Name of Regist | ered Landfill | | | | <u> </u> |
| Freehold Cartage, Inc | | | | Hauler II | | Waste | GROWS La | | | | | |
| | • | | | 02265 | 5 | 5 | | | | | | |
| City, State | | | | | | Disposal Date | City, State | | | | | |
| Freehold, NJ | | | | | | 4/12/14 | Morrisville, | PA 19067 | | 11. 2007 | | |
| Completed By (Print or Type | e) 1 | Title | | | | Signature | | | ite | 535 M | | |
| Kimberly A. Trumbett | i | Office | Coor | dinato | r | | 4 1- | | 8-2 | 5-1 | 4 | |
| ASB-41 | | | | | | | | | | | | |
| MAY 11 | | * Do no | t use t | his form | for asbes | tos licensure exem | pted activities. | | | | | |

| Check#8748 | NC | | ATION C | | ersey IOS ABATE 0 and 12:120 | | T. | | | - | · | E | |
|---|---------------------------|---|---------------------|--------------------------|--|-------------------------|--|---|-----------------------------|-----------------|----------------------|-------------|-----------|
| Date of Notification (1) | | | | Building Ow ip of Pen | ner/Operator nsauken | . (2) | | | | 12 | 0 | ч. | |
| Agencies Notified Type Notification | | | treet Add 605 N. | tress Crescen | t Blvd. | | | | MAR | 28 | 2014 | - | |
| EPA Initial DEP Amended DOL Amendment # | 2 | | | e, Zip Code uken, NJ | | | | | | | | | |
| Emergency (ir | | N | ame of C | Contact | | | | Teler | bone Nu | mber | • | | |
| DOH justification) DCA Cancellation | ti | E | | Grochov | | | 3 | <u>j — </u> | - | li li | - | | _ |
| Name of Facility Where Abatement is Taking | Place (3) | | FACIL | ITY INFOR | MATION | Тур | pe of Facility (4 | +) | | ** | | <u>.</u> | - |
| Former Acme Street Address 4675 River Rd. | | | | | | × | School (K-12 Subchapter Other (i.e. pr etc.) | 8 (Othe | r than K-1 commerc | 2) ial build | ings, | home | s, |
| City (5) Pennsauken | | | | | | | uare Feet ,000 | # of 1 | Floors | BI 45 | dg. Ag 5 | je | |
| County (6) Camden | | | County C | ode (7) SE ONLY) | | | rrent Use (Pric | | | | ars | | |
| Name of Monitoring Firm Hired by Building O | wner (8) | | ASCM 00021 | | | | batement Con Environme | | | Inc. | | | |
| Street Address 28 N. Pennell Rd. | | | | | | t Add Eas | tress at Union St. | | | | | | |
| City, State, Zip Code Media, PA 19063 | | | | | | | , Zip Code hester, PA 1 | 9382 | | | | | |
| Project Manager for Monitoring Firm Eric Houseknect | ii. | | elephon 908-29 | e No. 6-1132 | | -701 | e No. 1-9000 | | License 00508 | No. | | | |
| Start Date (10) | Schedule 4/18/14 | | pletion D | Date (11) | Nam AE | | OSHA Monitor | | | | - Maria A | | |
| Occupancy Status During Abatement (Check | Only On | e) | | | | | dress | | | | | | |
| Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other – Describe: | eriod of A al Facility | batem Hours | ent | Û. | City, | State | ennell Rd. e, Zip Code PA 19063 | | | | | | |
| Scope of Work (Check All That Apply) | | 1917 - 1917 - 1917 - 1917 - 1917 - 1917 - 1917 - 1917 - 1917 - 1917 - 1917 - 1917 - 1917 - 1917 - 1917 - 1917 - | | | | uia, | 1 A 10000 | | - <u></u> | | | | |
| ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf | | enovat emoliti | | | | × | Full Containm Mini-Enclosure Glovebag Prov Non-Exempted | e cedure | | | | e | |
| | 1 223 | Locatio | 1770 m | | | | | | | | Abate | ement pe | |
| Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13) | Use Ma | d Solel intenan odial S (12) No | y by nce/ | (i.e. th | Description Description Dermal system Surfacing, Nother miscell | Mate ms in /AT, 0 | sulation, | (S | mount Specify For LF) | Removal | Repair | Encapsulate | Enclosure |
| Rear loading dock roof | Tes | 140 | X | Т | ransite ro | of de | eck | | 200 | x | | | |
| Loading dock and expansion joint | | | X | | caul | | | | 70 LF | x | - | | |
| Roofing (unsafe roof, with demo) | | | X | | roofing | | | 18 | 00 SF | x | | | |
| throughout interior | | | X | FI | oor tile an | | | 18, | 850 SF | x | | | |
| Name of Registered Waste Hauler | | 0.000 | JDEP W | /aste | Cubic Yards | | | Registe | ered Land | fill | 1 | 1 | |
| Richard Burns | | | auler ID 9955 | | of Waste 60 | | Wester | n Berl | ks Com | munity | Lan | dfill | |
| City, State Philadelphia | | | | | Disposal Da TBD | ite | City, Sta Birdsbo | | 4 | | | | æ |
| Completed by Robert M. Casciato | Title Pres | ident | | | Signat | 1 | Éth | | | Date 3/24/1 | 4 | | |

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

| Date of Notification (1) | | | | of Building Owne ship of Penn | | (2) | | 2 | | | | |
|---|-------------------|----------------------------|-----------------------------|----------------------------------|--------------------|---|----------------|-------------------------------|-------------|---------|-------------|-----------|
| Agencies Notified Type Notification | | | Street A 5605 | Address N. Crescent | Blvd. | | | MAR | 28 | 201 | 1 | |
| DEP A Amended | | | | ate, Zip Code sauken, NJ 0 | 0110 | | - | | | | | |
| Emergency (| | -+ | | of Contact | 0110 | | I Te | lenhone Nu | mher | - | 8 . | + |
| DOH justification) DCA Cancellation | | | Edwa | rd Grochows | ki | | L | | | | 3 | |
| Name of Facility Where Abatement is Taking | Plane (| 3 | FAC | ILTY INFORM | ATION | Type of Facilit | (A) | | _ | | | |
| Former Acme | | -) | | | | School (K | | | | | | |
| Street Address 4675 River Rd. | | | | | | Subchapt | er 8 (Oth | ner than K-1 & commerc | | dings | , hom | es, |
| City (5) Pennsauken | 4 | | | | | Square Feet 23,000 | # c 1 | of Floors | | Bidg. / | Age | |
| County (6) Camden | | | County (STATE | Code (7) USE ONLY) | | Current Use (F abandoned | | | | ears | | |
| Name of Monitoring Firm Hired by Building C AET | Owner (8) |) | ASCI 0002 | M No. 21 | | of Abatement C nce Environn | ontracto | r (9) | | | | |
| Street Address 28 N. Pennell Rd. | | | | | Street | Address East Union S | | <u>,</u> | | | | |
| City, State, Zip Code Media, PA 19063 | | | | | City, S | tate, Zip Code t Chester, PA | | > | | | | <u> </u> |
| Project Manager for Monitoring Firm Eric Houseknect | | | Telepho 908-2 | one No. 96-1132 | Teleph | none No. 701-9000 | 10002 | License N 00508 | lo. | | | |
| Start Date (10) 3/25/14 | Schedul 4/18/1 | | 16-10-10-1-1 | Date (11) | Name | of OSHA Monite | or | 00000 | | | | |
| Occupancy Status During Abatement (Check | | | | | AET | Address | | | _ | | | |
| | 1 | ÷ | ment | | | . Pennell Rd. | | | | | | |
| Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe: | | | | | | tate, Zip Code a, PA 19063 | 0 | | | | | |
| Scope of Work (Check All That Apply) | | | | | | | | | | | | |
| ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf | | Renova Demoli | | | | Full Contain Mini-Enclose Glovebag Pr Non-Exempt | ure ocedure | | | | | |
| - | Is | Locat | ion | T | | a Non-Exemp | | iu Non-i nat | | | ement | |
| Location of | 1 | Norma d Sole | lly | | Description | | | | | T) | /pe | |
| Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13) | Ma | intena todial ((12) | nce/ Staff? | (i.e. them su | | | (5 | vmount Specify F or LF) | Remova | Repair | Encapsulate | Enclosure |
| | Yes | No | N/A | | | | | | | | te | Ű |
| Rear loading dock roof | | | X | Trar | nsite roof | deck | | 200 | X | | | |
| Loading dock and expansion joint | | | X | | caulk | | | 70 LF | X | | | |
| Roofing (unsafe roof, with demo) | | | X | Г | oofing fel | ts | 18 | 00 SF | X | | | |
| throughout interior | | X | | tile and r | | | 850 SF | X | | | | |
| Name of Registered Waste Hauler Richard Burns | | H | JDEP W lauler ID 9955 | | oic Yards Vaste | and the second se | Sec. 1 | ered Landfill Is Commu | | Lanc | Ifill | |
| City, State Philadelphia / PA | 1 | | | Disp TBI | oosal Date | City, Sta Birdsp | ite oro, PA | \ | | | | |
| Completed by Robert M. Casciato | Title Presi | dent | | | Signature | 10 FA | A | Da 3/ | te 19/14 | | | |
| | J | | | | THE | LU | | 1 | | | | |

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

#14038

; ; ;

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

| | | | (Purs | suant to | NJAC 8: | 60 and 12: | 120) | | | | | | | | E |
|---|---|------------------------------|-------------------------|------------------------------|---------------------|---|-------------------------|---------------------------------|---------------------------|------------|------------------------------|--------------|-------------|---------------|-----------|
| Date of Notification (1) | | 1997 - Cent | | | | wner/Opera nnsauke | | (2) | | | 3 | | | | |
| Agencies Notified | Type Notification | | | reet Add | | nt Blvd. | | | | | MA | IH 2 | 8 | 2014 | |
| EPA EPA | Initial Amended | | 1.50 | | , Zip Cod | 1204 1201 - 1201 - 1201 - 1201 - 1201 - 1201 - 1201 - 1201 - 1201 - 1201 - 1201 - 1201 - 1201 - 1201 - 1201 - 1201 - | | | | | | | | | |
| X EPA X DEP X DOL | Amendment #_ | al caller a | | | | J 08110 | | | | 57 | | | (7 | | |
| DOH DCA | Emergency (in justification) | ciuaing | 100000 | ame of C | Contact Grocho | weki | | | | Tele | nhone Num | her | | | 5.15 |
| DCA | Cancellation | | | | | RMATION | | | <u>}:</u> | ₹ | | | | | |
| Name of Facility Where | Abatement is Taking I | Place (3) | | FAGIL | IT INFU | RMATION | 1 | Туре от | Facility (4 |) | | | | | |
| Former Acme | | 01 (215)44 | | | 50: - | | | | chool (K-12 | | | | | | |
| Street Address 4675 River Rd. | | | | | | | | O et | ther (i.e. pr c.) | ivate 8 | commercia | l build | | | 3, |
| City (5) Pennsauken | | | | | | | | Square 23,00 | 0 | 1 | Floors | 45 | dg. Ag S | je | |
| County (6) Camden | | | | County Co | ode (7) SE ONLY) | | - | | | | ng demolish arket for | | ars | | |
| Name of Monitoring Firm AET | n Hired by Building Ov | wner (8) | | ASCM 00021 | | | | | ement Cont vironmen | | ⁽⁹⁾ ystems, lr | 1C. | | a. | |
| Street Address 28 N. Pennell Rd. | | | | | | | | Address East U | nion St. | | | | | | |
| City, State, Zip Code Media, PA 19063 | | | | | | | | itate, Zip t Ches | Code ter, PA 1 | 9382 | | | | | |
| Project Manager for Mo Eric Houseknect | nitoring Firm | | | elephon | e No. 6-1132 | 1.11 | | none No 701-90 | | | License No 00508 |) . | | | |
| Start Date (10) 3/25/14 | | Scheduled 4/18/14 | Com | pletion D |)ate (11) | | ame \ET | of OSH | A Monitor | | | | | | |
| Occupancy Status Durir | ng Abatement (Check | Only One) | 1 | | | 1 1 2 2 3 3 | 0.0.5 | Addres | | | | | | | |
| Facility Closed/Vac Abatement Perform Other – Describe: | cated During Entire Peneed Outside of Norma | eriod of Ab al Facility H | ateme lours | ent | | C | ity, S | State, Zip | Code 19063 | | | | | | |
| Scope of Work (Check | All That Apply) | | | | | | | | | | | | | | |
| ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf | | | novat moliti | | | | | Min Glo | i-Enclosure vebag Proc | e edure | n Negative P d Non-Friab | | | e | |
| | | | ocatio | | | | | | | . (/ | | T | Abate | ement | |
| Locatic Asbestos-Containin <u>TO BE AI</u> In Fac (13 | g Material (ACM) <u>BATED</u> sility | No Used Main Custo | rmall Solel tenan | y y by ce/ | | Descr tos Contain thermal sy surfacing other mise | ning M stem g, VA | Material ns insula AT, or | | (5 | mount Specify F or LF) | Removal | Repair | e Encapsulate | Enclosure |
| | | Yes | No | N/A | | | | | | | | - | | | hit |
| Rear loading | | | | X | | Transite | | | | | 200 | X | | | |
| Loading dock and | | | | X | | | aulk | | | | 70 LF | X | | | |
| Roofing (unsafe r | oof, with demo) | | | X | | roofir | - | | | | 00 SF | X | 0 | | |
| throughou | | | | X | | loor tile | | masti | | | 850 SF | X | | | |
| Name of Registered Wa Freehold Cartage | aste Hauler | | H | JDEP W auler ID 541261 | No. | Cubic Ya of Waste 60 | | 0 | Name of Grows | | ered Landfill ill | | | | |
| City, State Freehold, NJ | | | | | | Disposal TBD | Date | / | City, Stat Falls To | | nip, PA | e | | | |
| Completed by Robert M. Casciato | | Title Presid | ent | | | | fator | 114 | 1 | }_ | Da | ite 10/14 | 1 | | |
| | | | | | | -76 | U | r (| All | | | | - | | 10275 |

| Ċ | heck# | 8747 | NO | | ATION C | | STOS A | | | - 050 | | 41 - 1 | | , | Į. | |
|-------|--|--|--|--|--------------------|---------------------|------------------------|--------------------------------|----------------------------|--|---------------------|------------------|---------------|-------------|-------------|-----------|
| | e of Notification (1) 24/14 | | | | | | Owner/Op ristian S | | | | | | | | | à |
| | encies Notified | Type Notification | | | treet Add | | 5 South | 1 1 | | | | MAR | 28 | 2014 | | |
| ×× | EPA DEP DOL | Initial Amended Amendment | ŧ1 | Ci | ity, State | e, Zip Coo | | | _ | | 5 | 6 | | | | |
| | DOH DCA | Emergency (i justification) | the second s | Na | ame of (| | | | | i. | 1 - • • | | • | | 2 | |
| | DCA | Cancellation | | | | And a second second | | NI . | | | 1 | | | 29 | | |
| | ne of Facility Where A | Abatement is Taking | Place (3) | | PAGILI | II T INFO | ORMATIC | | Туре | e of Facility (4 School (K-12 | 22 | | <u>)</u> | | | |
| | eet Address 35 Central Ave. | | | | | | | | × | Subchapter Other (i.e. pr etc.) | 8 (Other t | | | dings, | home | s, |
| | (5) ean City | | | | | | | | Squ 500 | are Feet | # of FI 5 | oors | B 6 | ldg. A O | ge | |
| | unty (6) Ipe May | | Alen Maria | | ounty Co | ode (7) SE ONLY) | | _ | Curr | ent Use (Prio ant | r if being | demolis | hed) | | | |
| Nar | ne of Monitoring Firm | | wner (8) | | ASCM | No. | | | of Ab | atement Con Environmei | | | Inc. | | | |
| Stre | eet Address 7 Stokes Rd., Su | | | | | | | Street | Addre | and the second | | | 1 | | | |
| | , State, Zip Code edford, NJ 08055 | | | | | | | | | Zip Code ester, PA 1 | 9382 | | | | | |
| 1.2.2 | ject Manager for Mon ark Rubnitz | itoring Firm | | 1. | elephone 88-715 | e No. 5-2211 | | Teleph 610- | | | | icense N 0508 | lo. | | | |
| | rt Date (10) 3/14 | | Scheduled 5/2/14 | Comp | letion D | ate (11) | | Name FINC | | HA Monitor | | | | | | |
| Occ | cupancy Status During | g Abatement (Check | Only One) |) | | | | Street | | | | | | | | |
| × | | ated During Entire P ed Outside of Norm | | | nt | | _ | City, S | itate, i | es Rd. Zip Code NJ 08055 | | | | | | |
| Sco | pe of Work (Check A | II That Apply) | | | | | | | | | | | | | | |
| × | ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf | | | novatio | | | | × | M G | ull Containme lini-Enclosure lovebag Proc on-Exempted | edure | | | | e | |
| | Location | . of | | ocatior rmally | | | Dee | cription | | | | | | Abate | ement pe | 2 |
| | Asbestos-Containing <u>TO BE AB</u> , In Facil (13) | Material (ACM) | Maint Custoc (| Solely tenanc dial Sta (12) No | æ/ | | tos Conta thermal s | aining N system: ing, VA | Aateria s insu T, or | | Amo (Spe SF o | ecify | Removal | Repair | Encapsulate | Enclosure |
| | Exterior of Buildi | ngs A and B | | | X | | transit | e shir | ngles | ; | 25,50 | 0 SF | x | | | |
| | | | | | | | | | <u> </u> | | | | | | | |
| | | | | | | | | | | | | - | | | | |
| Nan | ne of Registered Was | ste Hauler | 1 | 100000 | DEP Wa | 2716772 | Cubic | Statistics and | | Name of F | Registere | d Landfil | | L | | |
| | thtech Contractin | ıg | | 0.00000 | uler ID N 20498 | 10. | of Was 15 | | | ACUA | | | | | | |
| 155 | , State Rte 50 Ocean V | 'iew NJ 08230 | - | | | | Variou | IS // | | City, State 6700 De | | | | or NJ | 082 | 34 |
| | npleted by pert M. Casciato | | Title Preside | ent | | | | gnature | les " | to | | | ate /24/14 | 4 | | |

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

| Check # C | 2 ДШ о | NOT | | TION | OF ASE | w Jersey BESTOS ABAT C 8:60 and 5:16 | | | | 1 | 2 1 | 5 | 1 |
|--|--|------------|-------------------|-------------------|-------------|--|----------------------------------|----------------|--------------|-------------|---------|-------------|-----------|
| Data of Notification (1) | PLIC | | | Namo | of Building | Owner/Operator (2 | 2) | | + | | 1 | | + |
| Date of Notification (1) | 24 / | 14 | | | | Research and E | | ., | | | | - 1 | |
| Agencies Notified | Type Notificati | ion | | Street | Address | | | | 28 | 2014 | 9 | | 1 |
| 🖾 EPA | Initial | | | 600 | Billingsp | oort Rd. | | MAH | 20 | 2011 | | | |
| 🖾 DOLWD | Amended | | | City, S | tate, Zip C | ode | | 1 1 | | | | | |
| DHSS | Amendmer | | | Pau | Isboro, N | IJ 08066 | | | - | | | | i |
| DCA (NJAC 5:23-8) | Emergency justification | | 1 | | of Contact | | | Talashaa | - Numbo | r P | 1 | | |
| (NJAC 3.23-0) | | | | Eliza | abeth Sa | ver | 1 | 1 | | | | | |
| | | | | | | FORMATION | | 1 | | | - | | |
| Name of Facility Where | Abatement is Ta | king Place | (3) | FAC | | I ORMATION | Type of Facility | (4) | | | | -011. | |
| Building #4 | Abatement is Ta | King Flace | : (3) | | | | School (K-12 | 2) | | | | | |
| Street Address | - | | | | | | Subchapter 8 | | | al hui | Idina | | |
| 600 Billingsport Ro | d. | | | | | | homes, etc.) | | ommerer | ai bui | ung | , | |
| City (5) | | | | | | | Square Feet | # of Floo | ors | Bld | g. Ag | e | |
| Paulsboro, NJ 080 | 66 | | | | | | 200.000 | 2 | | 4 | 0+ | | |
| County (6) | - Charles - Char | | | Coun | ty Code (7 | (STATE USE ONLY) | Current Use (Pr | ior if being o | demolish | ed) | | | 1 |
| Gloucester | | | | | | | Research | | | | | | |
| Name of Monitoring Firm | n Hired by Buildi | ng Owner | (8) | ASCM | No. | Name of Abateme | ent Contractor (9) | | | | -94.000 | | |
| Environmental Ma | nagement Inte | ernationa | al | NA | | Alliance Envi | ironmental Sys | stems | | | | | |
| Street Address | | | | | | Street Address | | | | | | | |
| 34 E. Germantown | Pike #204 | | | | | 550 East Uni | on St. | | | | | | |
| City, State, Zip Code | | | | | | City, State, Zip Co | ode | | | | | | |
| E. Norriton, PA 194 | 401 | | | | | West Cheste | r, PA 19382 | | | | | | |
| Project Manager for Mor | nitoring Firm | | Tele | phone | No. | Telephone No. | | License | No. | | | | |
| Ray Giordano | | | 100 | 10-277 | 5.220 | 610-701-9000 | | 0050 | 8 | | | | |
| Start Date (10) | | cheduled (| | | | Name of OSHA M | Ionitor | | | | | | |
| / / | | _4 | 9 | / | 14 | AET | | | | | | | |
| Occupancy Status Durin | 승규는 것 것 것 가지 않는 것 같아요. 것 같아. | | | | | Street Address | | | | | | | |
| Facility Closed/Vaca | | | | | | 34 E. German | ntown Pike | | | | | | |
| Abatement Performe Time of Abatement: | | | | | cribe | City, State, Zip C E. Norrington | | | | | | | |
| Scope of Work (Check a | all that apply) | | | - | | ☐ Full Con | tainment with Ne | aative Press | sure | | | | |
| | | | enovat | | | 🗍 Mini-End | closure | 9 | | | | | |
| □ ≥160 sf or ≥260 lf | | | emoliti | on | | | g Procedure empted (*) and No | on-Friable P | rocedure | 9 | | | |
| | | | s Loca | tion | | | | 41 | | | ateme | ent T | vpe |
| Locatio | n of | | Norma | ally | | Description of | of | | | | | | 1 |
| Asbestos-Containing | | | ed Sol aintena | | | stos Containing Ma | | Amo | Television - | Remova | Repair | Encapsulate | Enclosure |
| TO BE AB | | | | Staff? | (1.6 | e., thermal systems surfacing, VAT | | (Spec SF or | | ova | = | psu | Sur |
| (13) | | | (12) | | | other miscellane | | | - / | - | | late | e |
| 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 | | Yes | No | N/A | | | | | | | | | |
| Penthouse | | | | | Tar cov | vered cork pipe | insulation | 90 L | _F | \boxtimes | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | П | | |
| | | | | | | | | | | | | | |
| | | | | | | O this Marsha of | Name of Regi | | JEII | | | | |
| Name of Registered Wa Waste Manageme | | | | NJDEP Hauler I | | Cubic Yards of Waste | Glouceste | | | | | | |
| - | | | | | | 10 Disposal Date | City, State | y | | | | | |
| City, State | | | | | | Disposal Date TBD | Swedesbo | aro NI | | | | | |
| Paulsboro, NJ | | | | | | 1994,52 (2994) | Sweuesbo | 510, 145 | | | | | |
| Completed By (Print or | Type) | Title | - | | | Signature | M | | Dat | 3~ | 2 | · í | 11 |
| Mark Griffin | | Estim | ator | | | | HI | 2 | 1.1 |) ~ | 6 | T^{-} | 17 |
| ASB-41 | | | | | | | 11 | | | | | | |

| 1.00 | | • | |
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| MAY | 1 | 1 | |

| No Aleck | | N | | CATION | OF ASBE | STOS A | | | <i>r</i> | | | | | 7 - | 7 - | |
|--|--|------------------|--|------------------------------|-------------------------|-----------------------|--------------------|-------------------------------|--|------------|-------------------------------|-----------------|-----------|--------|-------------|-----------|
| Date of Notification (1) | <u> </u> | | | | Building C hip of Pe | | | (2) | | | | 4 | | | - 1 | |
| Agencies Notified | Type Notification | | | Street Ad | | | 7.5 | | 1 | | MAR | 28 | 20 | 14 | 7 | .1 |
| EPA DEP DOL | Initial Amended Amendment # | | | | e, Zip Coo Iuken, N | | 0 | | 1 | | - | | | | | |
| DOH DCA | Emergency (ir justification) | ncluding | | Name of (Edward | Contact I Grocho | owski | | | - | Tele | nhone I | Numh | ər | | 5 | |
| | | | | FACIL | ITY INFO | RMATIO | N | _ | | | | | | 5 | | |
| Name of Facility Where Former Acme | Abatement is Taking | Place (3) |) | | | | | - | of Facility (4 | | | | | | | |
| Street Address 4675 River Rd. | | <u>XCII I XC</u> | •••• | | | | | | chool (K-12 ubchapter 8 other (i.e. pr tc.) | B (Othe | er than h & comme | K-12) ercial | build | ngs, | home | s, |
| City (5) Pennsauken | | | | | | | | Square 23,00 | e Feet | # of 1 | Floors | | Bk 45 | dg. Ag | ge | |
| County (6) Camden | | | | County C (STATE U | ode (7) SE ONLY) | | _ | | nt Use (Prio doned su | | | | | ars | | |
| Name of Monitoring Firr | n Hired by Building C | wner (8) | | ASCM 0002 | | | | | ement Con ivironmer | | | s, Ind | | | | |
| Street Address 28 N. Pennell Rd. | | | | | | | | Addres East U | s Inion St. | | | | | | | |
| City, State, Zip Code Media, PA 19063 | | | | | | | | tate, Zi Ches | o Code ster, PA 1 | 9382 | | | | | | |
| Project Manager for Mo | nitoring Firm | | | Telephon | ne No. | | | ione No | | | Licens | e No. | | | | |
| Eric Houseknect | - | | | 908-29 | 6-1132 | | | 701-90 | | | 0050 | 8 | | | | |
| Start Date (10) | | Schedule | ed Con | npletion E | Date (11) | | Name AET | of OSH | A Monitor | | | | | | | |
| Occupancy Status Duri | ng Abatement (Check | Only Or | ie) | | | | | Addres | s nell Rd. | | | | | | | |
| | cated During Entire P med Outside of Norm | | | | | - | City, S | itate, Zi | p Code | | | | | | | |
| Scope of Work (Check | | | | | | _ | Med | ia, PA | 19063 | | | | | | | |
| ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf | Ан тпас Арріу) | | Renova Demolif | | | | × | Min Glo | Containme i-Enclosure vebag Proc | e edure | 8 | | | | e | |
| | | Is | Locat | ion | | | | | | | | | 63 | Abate | ement pe | : |
| Locatio Asbestos-Containin <u>TO BE A</u> In Fac (13 | g Material (ACM) BATED cility | Use Ma | Normal ed Sole intena todial \$ (12) | elý by nce/ | | tos Conta thermal | system cing, VA | Aaterial s insula T, or | | (| Amount Specify F or LF) | | Removal | Repair | Encapsulate | Enclosure |
| | | Yes | No | N/A | 5 | | | | | | | | | | æ | |
| Rear loading | g dock roof | | | X | | Transit | te roo | f deck | | | 200 | | X | | | |
| Loading dock and | l expansion joint | | | X | | | caulk | | | 4 | 70 LF | | Х | | | |
| Roofing (unsafe r | oof, with demo) | | | X | | roo | fing fe | elts | | 18 | 300 SF | | x | | | |
| throughou | it interior | | | X | f | Floor til | e and | masti | | | 850 S | | Х | | | |
| Name of Registered W Richard Burns | aste Hauler | | H | NJDEP W Hauler ID 9955 | | Cubic of Was 60 | | | Name of Wester | | | | nity | Lan | dfill | |
| City, State Philadelphia | | | | | | Dispos TBD | sal Date |) | City, Stat Birdsbo | | A | | | | | |
| Completed by Robert M. Casciato |) | Title Pres | ident | | | S | lightatur | e | too | 2 | | Date 3/2 | e 5/14 | Ļ | | |

7

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

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Print Form

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

L

| | | (Pursuar | nt to NJAC | 8:60 and 12: | :120 |) | | 5V | 5 5 | 7 6 | | 7 |
|---|----------------------|--|--------------------------|---|--------------|---|---------------------|----------------------------|--------------------|---------|-------------|-----------|
| Date of Notification (1) | | | | Owner/Operation | | | · · · · | 2 | | | 1 | |
| Agencies Notified Type Notific | ation | | Address Route 1 | South | 2 | (¹ | M | IAR 2 | 8 201 | 4 | | ji J |
| DEP Amend X DOL Amend | ment # | | state, Zip C n, NJ 08 | | | | | 1.55 | i e | | 1 | |
| DOH justifica | | | of Contact rt Hromir | | | | Tel | enhono N | lumhar | | - | |
| | | FAG | CILITY INF | ORMATION | | | | | | | - | _ |
| Name of Facility Where Abatement is Avalon Princeton | Taking Place (3) | | | 0 | | Type of Facility School (K- | | | | | | |
| Street Address 253 Witherspoon Street | | | | | | Subchapte Other (i.e. | r 8 (Oth private | er than K- & comme | -12) rcial buil | dings | , hom | es, |
| City (5) | | | | | | etc.) Square Feet | | f Floors | | Bidg. / | | |
| Princeton | | | | | | 289,000 | 7 | 1110013 | | 90 yr | | d |
| County (6) | | | Code (7) | ^ | | Current Use (Pr | | | | | | |
| Mercer | dia a (0) | | | | | Abandoned | 1 Fo | rmer | Hos | ata | / | |
| Name of Monitoring Firm Hired by Buil EWMA, LLC | aing Owner (8) | N/A | CM No. N | Ya | ame d ann | uzzi Environr | ntractor | (9) | U | | | |
| Street Address P.O. BOX 5430/100 Misty Lan | e | | | | | Address Route 206 So | uth | | | | | |
| City, State, Zip Code Parsippany | | | | | | ate, Zip Code orough, NJ | 08844 | | | | | |
| Project Manager for Monitoring Firm Craig Gorzyca | | | one No. 560-1400 | Tel | lepho | one No. 218-0880 | | License 01228 | | | | |
| Start Date (10) 4/7/14 | Scheduled 7/31/14 | Completion | | Nar | ime c | of OSHA Monitor | | | <u>.</u> | (d) | | |
| Occupancy Status During Abatement (| | | | | | uzzi Environr | nentai | Service | s, Inc. | | | |
| Facility Closed/Vacated During En | 1.1 | | | | | Route 206 So | uth | | | | | |
| Abatement Performed Outside of Other – Describe: | | | | | S 8 1 1 1 | ate, Zip Code orough, NJ | 08844 | | E. | | | |
| Scope of Work (Check All That Apply) | | | | 10 | 11130 | orough, No 1 | 00044 | | | | | |
| ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf | | novation molition | | | XXXX | Full Containm Mini-Enclosur Glovebag Pro Non-Exempte | e cedure | | | | | |
| | Isl | ocation | | | | Hon Exempte | | | | | emen | t |
| Location of | No | rmally | | Descript | tion o | of | | | | T | /pe | |
| Asbestos-Containing Material (ACM <u>TO BE ABATED</u> In Facility (13) | Maint Custor | Solely by tenance/ dial Staff? (12) | | tos Containin thermal syste surfacing, other misce | ems VAT | insulation, | (S | mount specify or LF) | Remova | Repair | Encapsulate | Enclosure |
| Anna an | Yes | No N/A | | | | | | | <u>a</u> | - | late | Ire |
| See attached NESHAPS Surv | /ey | | | | | | | | | | | |
| | | | | | | | | | | | | |
| Name of Registered Waste Hauler | | NIDED | North | Outer | | N | D | | | | | |
| Yannuzzi & Sons, Inc. | | NJDEP V Hauler IE 17467 | | Cubic Yards of Waste 40 CY | 15 | GROW | | red Landf | 111 | | | |
| City, State Hillsborough, NJ | | | | Disposal Da | | City, Stat | e | | | | | |
| Completed by John Mucha | Title | | | 4/10/14 - Signat | 1 | /14 Morrisv | /ille, P/ | 0 | Date | | | |
| | Project | Manage | r |) | AN Y | √{ | | 3 | 3/24/14 | + | | |

| 10#69133 | 15432 | | (Purs | ATION Consults to | e of New Jerse OF ASBESTOS NJAC 8:60 an | ABATEN d 12:120 |) | | DOL - 1 | 0 DA | | Prin | t Fo |
|---|----------------------------------|----------------------------------|--|----------------------------|---|--|-----------------------------|---------------------------------|----------------------------------|----------|--------|--------------|------------|
| Date of Notification (1) 3/27/2014 | | | | | Building Owner/GABODTMAN | | | | 1 | | 7 | | Τ |
| Agencies Notified | Type Notificatio | n | | reet Add 08 181 | | 40- × | <u></u> | | MAR 2 (| 2014 | 1 | | 1 |
| X EPA DEP X DOL | Initial Amended Amendme | | | | e, Zip Code CITY, NJ | | | | HED AD | וחםם | | N | ħ |
| DOH DCA | Emergence justificatio | | | ame of (OHN F | Contact PERRONE | | | | Telebhone N | lumber V | ΈD | | |
| | | 987-94 - Ani 2008-94-94 | | FACIL | ITY INFORMAT | ION | | | ġ | | ġ, | | |
| Name of Facility Where A NORMA BODTMAN | | king Place (3) |) | | | | | of Facility (4) School (K-12 |) | | | | |
| Street Address 308 18TH ST | | 1 | | | | | | | 3 (Other than K ivate & comme | | lings, | home | s, |
| City (5) UNION CITY | | 1 | | | | | Squa | are Feet | # of Floors | B | ldg. A | ge | |
| County (6) HUDSON | | | | ounty C | ode (7) SE ONLY) | | Curr | ent Use (Prior | r if being demo | lished) | | | |
| Name of Monitoring Firm | Hired by Buildir | ig Owner (8) | | ASCM | No. | | - C | atement Cont ment | ractor (9) | | | | April 1999 |
| Street Address | | | 1 | 1 | | Street 1009 | | nst Suite A | 4 | | | | |
| City, State, Zip Code | | | | | | | | zip Code gen, NJ 07 | 7047 | | | | |
| Project Manager for Mor | itoring Firm | | T | elephon | e No. | Telepl | | lo. | License 01223 | | | | |
| Start Date (10) 3/29/14 | | Schedule 4/29/13 | | pletion D | Date (11) | Name | of OS | HA Monitor | LTING LLC | | | | |
| Occupancy Status Durin | g Abatement (C | neck Only On | ne) | | | Street | | | | | | | |
| Facility Closed/Vac Abatement Perform Other – Describe: | ated During Entined Outside of N | re Period of A ormal Facility | Abateme Hours | ent | | City, S | State, 2 | ip Code | SUITE 107 | | | | |
| | 11 774 - 4 A 4 A | | | | | UNI | ONN | U 07083 | | | | | |
| Scope of Work (Check A ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf | M That Apply) | | Renovati Demolitic | | | 2 | M G | ini-Enclosure lovebag Proc | | | | .ө | |
| | | | Locatio | | | | | | | | | ement /pe | t |
| Locatio Asbestos-Containing <u>TO BE AB</u> In Faci (13) | g Material (ACM) ATED lity | Use Ma | ad Solely aintenan todial Si (12) | y by ce/ | Asbestos Co (i.e. therm sur | escription Intaining I al system facing, V/ r miscella | Materi ns insu AT, or | lation, | Amount (Specify SF or LF) | Removal | Repair | Encapsulate | Enclosure |
| BASEM | ENT | Yes | No | N/A X | PIPE | INSUL | ΔΤΙΟ | NN I | 160 | x | | 6 | |
| DAGEN | 1 m f V f | | | x | | SIDING | | | 1200 | X | | | |
| | | | | | | | | | | | | | - |
| Name of Registered Wa | | l | Ha | JDEP W auler ID 2430 | | ic Yards /aste | | | Registered Lar | | IMIS | | |
| City, State | 1 | | | | Disp | oosal Dat | e | City, State | | | | | |
| KENILWORKTH, N | U | Title | | | | Signatu | ~ | | | Date | | | |

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

| | | | (4 | | | | | 1 | | det | ‡ 🗷 | 230 | 58 | |
|---------------------------------------|---|---------------------|----------------------------|--------|-----------------------------|-------------------|------------------------|-------------------------------|---------------------------------------|------------------------------|--------------|--------|----------|--------|
| Date of Notification (1) | arch 20, 2014 | | | | Name of I | Building (| | erator (2) ntage Site Worl | k, f | | | 7 (F | | |
| | 8 | 10000 | | _ | Street Add | droop | | | <u> </u> | | | | <u>)</u> | |
| Agencies Notified | Type of Notificat | tion Notific | ation | | Sueet Add | 11055 | 335 P | arkertown Driv | /e | MAR 28 |) | | | 11 |
| | • • | | tification | | <u> </u> | 7. 0. | | 1 | 1 | MAN ZC |) 201 | 4 | | |
| [x] DOL | Amen | ndment # | ¥ | | City, State | e, Zip Co | | Egg Harbor, N | 1 08087 | | | | | |
| [x] DOH [| | | including | | | | Dittie | 255 114 001, 11 | • ÷ | | | | | |
| [] DCA | Contraction of the second s | cation) ellation | | | Name of (| Contact John T | hick | | Telepho | NDO - | | | 1 | |
| | | Ination | | | | John 1 | UCK | - 2 | | ۹ | | | | |
| | | | | FAC | ILITY IN | IFORM | ATION | | | | | | | |
| Name of Facility Where Aba | | g Place (| (3) | | | | | Type of Facility | | al (1-12) | | | | |
| Resid | lence | | | | | | | | 1753 C | ool (k-12) chapter 8 (oti | her thar | 1 k12) | | |
| Street Address | | | | | | | | | | er (i.e., priva | | | al buil | dings, |
| 1322 | Corlies Aven | ue | | | | | | | - | es, etc.) | | | | |
| City | | Coun | ty (6) | | County Co | | - | Square feet | # o | of Floors | Bldg | . Age | | |
| | | | | | (STATE U | SE ONL | Y) | 1452 sf | · · · · · · · · · · · · · · · · · · · | 2 | | 6 | 9 | |
| Neptune | | Mon | mouth | | | | | Current Use (Pr | sidence | g demoisned) | | | | |
| Name of Monitoring Firm Hi | ired by Building | Owner | (8) | - | ASCM No | | Name of | f Abatement Contr | | | | | | |
| N/A | | | (-) | | | | 1 | | ardian Co | ontracting, | Inc. | | | |
| Street Address | | | | | | | Street A | | 39 Route | 9, Unit 61 | | | | |
| City, State, Zip Code | | | | | | | City, St | ate, Zip Code | | New Jers | ev 08' | 755-11 | 271 | |
| Project Manager for Monitor | ring Firm | | Telephone Nu | mher | | | Telepho | one Number | uis Kivei, | License N | | 55-11 | | |
| Project Manager for Monitor | ing r nin | | relephone re | moor | | | | 19-9932 | | 00624 | | | | |
| Scheduled Start Date (10) | 1967 - 1979 - 1979 - 1979 - 1979 - 1979 - 1979 - 1979 - 1979 - 1979 - 1979 - 1979 - 1979 - 1979 - 1979 - 1979 - | | Scheduled Co | | ion Date (1 | 1) | Name o | f OSHA Monitor | | | | | | |
| 03/21/2014 | | | 03/25/201 | 4 | | | Street A | | A.S.L. Ar | nalytical | | | | |
| Occupancy Status During At | oatement (Check y Closed/Vacate | | | ofAb | atement | | Street A | | 56 Steltor | Road | | | | |
| | ment Performed | | | | | | | | | | | | | |
| | – Describe | Outside | | | | a 0 | City, St | ate, Zip Code Pis | cataway, | New Jerse | ey 088 | 54 | | |
| | -1 | | | _ | | | L | | | | | | | |
| Scope of Work (Check all th | at apply) | | | | | | L |] Full Contain] Mini-Enclos | | Negative Pre | essure | | | |
| [] >2-6 | ->216 | | a ۲ آ | lenova | tion | | L L | Glovebag Pr | | | | | | |
| [] >3 sf c [x] ≥160 s | | | L J | Demoli | | | [x | | | Non-Friable | Procedu | ure | | |
| | 1 01 <u>200 11</u> | | [] ~ | | 1 | | | | | | - | | T | |
| | | | | | | | | | | | Abai | ement | Type | |
| | | | Is Location | 1 | | | Descripti bestos-Co | | | Amount | R | R | E | E |
| Location of Asbestos-Containing Ma | | | Normally used Solely by | 1 | | | Material (. | | | pecify SF | E | E P | N C | N C |
| TO BE ABATI | ED | Main | ntenance/Cust | odial | 1.5 | | ., thermal | | | or LF) | M O | A | A | L |
| in facility | | e | Staff | | | ins | ulation, s | | | | v | I R | P S | O S |
| (13) | | | (12) | | | oth | VAT, er miscel | | | | A | , I | U | U |
| | | YES | S NO | N/A | | ou | ler miscei | lalleous) | | | L | | L | R |
| | - 10 | 11.0 | | | | | | | | 000 0 | | - | E | E |
| Exterior | | | X | | Asbes | tos sidir | 1g | | 27 | '00 sf | X | | | |
| | 69 | | | | | | | | | | | | | |
| | | | | | | | | | 8 | | | | | |
| | | | | | | | 17 | | | | - | | 20 | - |
| Name of Registered Waste H | | | NJDEP Waste | | ID No. | 1020202030300000 | ards of Wa | | | andfill | | | | |
| Guardian Cont | tracting, Inc. | | 202 | | and Detri | 3 | City, S | T.R.R. | F | | e9 | | | |
| City, State Toms River, N | Jew Jersey | | | | sal Date 6/2 <u>0</u> 14 | | | town, Pennsylv | vania/ | | | | | |
| Completed by (Print or Type | | Title | | 55121 | Signate | te v | / | 17 | 1 | | Date | | | |
| Nicholas Ferni | | Proj | ect Manager | | | VIC | cho | 1 th | -1 | | 3/2 | 0/201 | 4 | |

| | | ×. | | | | | 1 | | | | |
|--|---|--|------------------------|--------------------------|--|---|--|-------------|-----------------------|-------------------|---|
| Date of Notification (1) March 21, 2014 | | | Name o | of Building C | wner/Oper Fabco | | 5 | 33 | 86 | 作品 | - |
| [] DEP [] Amen [x] DOL Amen | Notification ded Notifica dment # | ation | | Address tate, Zip Cod | e | est Avenue Branch, NJ 077- | | AR 28 | 3 201 | 4 . | |
| [] DCA justifi | ency (inclu cation) llation | ding | Name | of Contact Anthor | | | Telephone ** | | 1.1 | | |
| | | E/ | | INFORM | - | | | | | | |
| Name of Facility Where Abatement is Taking Residence Street Address 489 Sycamore Ave | | IT | | INTORM | | Type of Facility ([[| (4) School (k-12) Subchapter 8 Other (i.e., pr homes, etc.) | (other thar | | al build | ings, |
| City Shrewsbury | County (6 | | | Code (7) E USE ONL | Ŋ | area area area area area area area area | # of Floors 2 or if being demolish dence | - | g. Age 8 | 0 | |
| Name of Monitoring Firm Hired by Building | | | ASCM | No. | Name of | Abatement Contra | ctor (9) rdian Contractio | og Inc | | | |
| Guardian Contract Street Address 1889 Rte. 9, Unit (| | | | н. | Street A | idress | 9 Route 9, Unit | | | | |
| City, State, Zip Code Toms River, NJ 08 | 3755 | 1bNumb | | | | te, Zip Code | ns River, New J | | | 271 | |
| Project Manager for Monitoring Firm Nicholas Fernicola | 2 C 1 C 2 C 2 C 2 C 2 C 2 C 2 C 2 C 2 C | elephone Numb 32-349-9932 | | | | 9-9932 | 0062 | | | | |
| Scheduled Start Date (10) 3/22/14 | | cheduled Comp 3/24/14 | letion Date | (11) | | the second se | I.S.L. Analytica | I | | | |
| Occupancy Status During Abatement (Check [] Facility Closed/Vacated [] Abatement Performed [] Other – Describe | l During En | | | | Street A City, Sta | 105 Ite, Zip Code | 6 Stelton Road cataway, New Jo | ersey 088 | 354 | | |
| Scope of Work (Check all that apply) $\begin{bmatrix} x \\ \end{bmatrix} >3 \text{ sf or } \ge 3 \text{ lf}$ $\begin{bmatrix} \\ \end{bmatrix} \ge 160 \text{ sf or } \ge 260 \text{ lf}$ | | | ovation nolition | | [[x [|] Mini-Enclosu] Glovebag Pro | | | ure | | |
| | | | 1 | | | | | Aba | tement | Туре | |
| Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> in facility (13) | No | E Location rmally used Solely by nance/Custod Staff (12) NO N/ | | (i.e ins | Descripti bestos-Co Material (, thermal ulation, su VAT, ner miscel | ntaining ACM) systems urfacing, or | Amoun (Specify S or LF) | | R P A I R | E N C A P S U L E | E N C L O S U R E |
| Basement | | X | Ast | bestos pipe | insulati | on | 200 lf | X | | | |
| | | | | | | | | | | | |
| | | | | | | | | | _ | - | - |
| Name of Registered Waste Hauler Guardian Contracting, Inc. | NJ | DEP Waste Ha 2022 | 3 | 4 | ards of Wa | T.R.R. | egistered Landfill F. | | | | <u> </u> |
| City, State | | | isposal Date /25/14 | • | City, S Tully | town/Pennsylv | vania / | | | | |
| Toms River, New Jersey Completed by (Print or Type) Nicholas Fernicola | Title Project | t Manager | | Rature | ich. | I te | 1 | Da 3/2 | te 21/201 | .4 | |

| 20 20 | | NOT | | | | ew Jersey | F 75. 7 | | | | | | |
|--|------------------------------|----------------------------|-------------------|------------------|-------------------------|---|--|---|----------------------------|--------------|--------|-------------|-----------|
| Check# 8 | 571 | NUI | | | | BESTOS ABAT AC 8:60 and 5:10 | | 1 | | tt h | 71 | F. | - |
| Date of Notification (1) | 19 / 14 | 4 | | 1 ~ | | g Owner/Operator (| | | R 28 | 201 | | • F | |
| Agencies Notified | Type Notification | | | Stree | t Address | | Ver Por | ~T / | 4471 | 481 | 4; 1 | ¥ | 2 |
| | Amended Amendment # | 1 | | City, | State, Zip (| Code | 949 | • · · · · · · · · · · · · · · · · · · · | | | • • | j i | - |
| DCA (NJAC 5:23-8) | Emergency (in justification) | ncludin | g | C Name | Amd of Contac | en N | 5 08 | Telenh | ana Numi | 001 | ¢ | | |
| | Cancellation | | | A CALCULATION OF | Summer participation of | BradFo | rD | | | | | | 4 |
| Name of Facility Where A | Abatement is Takin | n Place | (3) | FA | CILITYIN | IFORMATION | Trans of Family | | | | | | |
| BenjAmin Street Address | N Frank | lin | E | | dge | | Type of Facility School (K-12 Subchapter | 2) 8 (Other t | han K-12) |) cial bi | uildin | ns | |
| <u>5</u> + | Elm 5 | Tre | eT | - | | | homes, etc. |) . | | | | 90, | |
| | | | | | | | Square Feet | # of F | loors | BI | dg. A | • | |
| County (6) | en IV. | 5. | 0 | Cour | atv Code (7 |)(STATE USE ONLY) | + 500 | X | | 4 | - 5 | 0 | |
| CAMA | end | | | | | NOTICE ODE ONE I) | | | | ned) | | | |
| CAmd. Name of Monitoring Firm | Hired by Building | Owner | (8) | ASCM | No. | Name of Abateme | IFAIN ent Contractor (9) | ITAC | CKL | ip | 91, | 4 6. | e. |
| DATTA ENVIra | SMENTAL A | 1 5 50 | Ciard. | | | K+A ENV | | | | | | | |
| Street Address DEIA | WARE IN | Pus | Tri | ALI | PARK | Street Address | WCD MENIA | 1 CCX | ITAC | 1011 | , - | E AS | |
| City, State, Zip Code | Arfiela | WA | Y | | | 20 LA | uck Ro | 40 | | | | | |
| | VALUE AND A DESCRIPTION | | | | | City, State, Zip Co | ode | | | | | | |
| Project Manager for Moni | DE 19' | 713 | - 5 | 817 | | MOHNT | ON, PA | 19 | 540 se No. | | | | |
| | | | 1005000 | | 0.0707.0 | Telephone No. | | Licens | se No. | 2255 | | | |
| RAY CASS Start Date (10) | VY Contra | | 302 | -737 | -3376 | 610-856 | -7700 | 0 | 1102 | | | | |
| <u>2 / 11 /</u> | Sched | | | tion Da | | Name of OSHA M | lonitor | | | | | | |
| Occupancy Status During | | | | <u> </u> | 17_ | BATIA ENU Street Address | lirenmen | ITAL . | 4550 | ci. | AT | es | |
| Facility Closed/Vacate | | | | mont | | Street Address | Delaware | I INC | lu str; | Al | PAR | ·K | |
| Abatement Performed | Outside of Normal | Facilit | v Hour | s - Des | cribe | City, State, Zip Co | 6 GAri | Field | WA | Y_ | | | |
| Time of Abatement: | 7:00 AM-5:00 PI | W/ | _PM- | | АŅ | | | 0.0 | | | | | |
| Scope of Work (Check all | that apply) | | | | | IVEWArt | < DE | 9.77 | 3-5 | 81 | 7 | | |
| □ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf | | 图 Re 口 De | novati molitic | | | Mini-End Glovebag | | | | 9 | | | |
| | | Is | Locat | ion | Γ | | inprod () and the | in that is | Toccuur | 1 | atem | ant T | vno |
| Location Asbestos-Containing t | of | Construction of the second | Norma ed Sole | | | Description of | | | | - | | - | T |
| TO BE ABA | | Ma | intena | nce/ | | stos Containing Mat ., thermal systems i | | | ount [`] ecify | Remova | Repair | Encapsulate | Enclosure |
| IN Facilit (13) | ŷ | Cus | todial ((12) | Staff? | | surfacing, VAT, | or | | r LF) | oval | = | psul | SULE |
| (13) | | Yes | No | N/A | 1 | other miscellaned | bus) | | | | | ate | |
| TrANS; TE S | Him's | | | Ø | Tran | site SH: | ms | 900 | SF | | | | |
| ON TRAIN Tr. | ALK | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | Π | Π | | - | | | | | | | | |
| Name of Registered Wast | e Hauler | <u> </u> | - | JDEP V | Vaste | Cubic Yards of | Name of Regis | tered I an | dfill | | | | |
| K+A ENVICE | Tal contra | . 7 | L | aular IC |) NIn | Waste 4 | | | | | , | | _, |
| K+A Enjuirenme | MINI LENIA | K 1672 | the | 000 | 15 | Disposal Date | City, State | Alleg | Heni | 250 | 1.40 | JDI | :15 |
| mahates | PA | | | | | 6-30-14 | SciTHERN City, State DAVIDS | ~). | P | 2 | | | |
| MahnTon Completed By (Print or Ty | pe) Title | | | | | Signature | VAVIUS | Ville | | P-4 e | | | |
| ANTHONY J SAN | TATEIL | 10- | ~~~ | | . [| 13-4 | Λ λ. | 2- | | 3- | 30 | -14 | 4 |
| | | | | | | Chit | - j/ com | ~~ | | | 020 | 1 | / |
| AN 13 | • | Do not | use th | is form | for achact | os licensure exempt | and Katin iting | | | | | | |

| Date of Notification (1) | | | Na | me of B | uilding Own | ner/Operat | or (2) | | 20 | 62 | 125 | T |
|---|------------------------------------|--|--------------------|--------------------|---------------------|------------------------|--|--|------------|--------------|----------|--------|
| | ch 21, 2014 | | | |] | Monmo | uth Medical C | center of | 38 | 84 | F. 1 | 7,1 |
| [x] EPA [| 1 | otification | | reet Add | | 300 Sec | ond Avenue | Mar | 28 | 2014 | | |
| [] DEP [[[x] DOL [] | Amendn | d Notification nent # ncy (including | Ci | ty, State, | , Zip Code | Long B | ranch, New Je | | 1 | | | - . |
| [x] DOH [] DCA | justificat] Cancella | ation | | ame of C | Chris Ter | 107.0 | | Telephone Number | | | -i | |
| | | | FACILI | TY IN | FORMA | TION | T. C.D. Hite | : | | | | |
| Name of Facility Where Abaten Monmo | nent is Taking Pla outh Medical | ace (3) Center-3 rd floor | 2 | | | | Type of Facility | (4)] School (k-12)] Subchapter 8 (ot | her than | k-12) | | |
| Street Address 300 Se | cond Avenue | | | | | | [x] | homes, etc.) | | | l buildi | ngs, |
| City | | County (6) | | unty Coo FATE U | de (7) ISE ONLY) | | Square feet 10,000 | # of Floors 1 | Bldg. | Age 4 |) | |
| Long Branch | | Monmouth | | | | | Hos | ior if being demolished |) | | | |
| Name of Monitoring Firm Hire | | | AS | SCM No | a. 1 | Name of A | Abatement Contra Gua | ctor (9) ardian Contracting | Inc. | | | |
| Street Address | ian Contractin Rte. 9, Unit 61 | | | 8 | | Street Add | iress | 9 Route 9, Unit 61 | 5 | | | |
| City, State, Zip Code | | | | | | City, State | e, Zip Code | ns River, New Jers | ev 087 | 755-12 | 71 | |
| Project Manager for Monitorin | River, NJ 087 9 Firm | 755 Telephone Nu | mber | | | Telephone | e Number | License 1 | | 00 11 | | |
| Nicholas Fernico | | 732-349-99 | 932 | | | 732-349 | A CONTRACTOR OF A CONTRACTOR OFTA CONT | 00624 | | | | - |
| Scheduled Start Date (10) 3/22/14 | | Scheduled Co 4/01/14 | mpletion | Date (11 | | Name of | OSHA Monitor E.N | I.S.L. Analytical | | | | |
| Occupancy Status During Aba | tement (Check or | | of Abatam | ant | | Street Ad | | 6 Stelton Road | | | | |
| | | utside of Normal Faci | | | - | City Stat | e, Zip Code | | | | | |
| | Describe AFTE | | | | | Chy, Suit | Pise | cataway, New Jers | | 54 | | |
| Scope of Work (Check all that | apply) | | | | | [] | Full Contains Mini-Enclos | ment with Negative Pre | essure | | | |
| [X] >3 sf or | ·>3 lf | [x] I | Renovatio | n | | [x] | Glovebag Pr | | | | | |
| [| for ≥260 lf | | Demolitio | | | [] | Non-Exempt | ted (*) and Non-Friable | Procedu | ire | | |
| | 1 | | | | | | | | Aba | tement | Гуре | 1 |
| | | Is Location | | | | escriptio | | Amount | R | R | E | Е |
| Location of | arial (ACM) | Normally use Solely by | d | | | stos-Cor aterial (A | | (Specify SF | E M | E P | N C | N C |
| Asbestos-Containing Mat TO BE ABATE | | Maintenance/Cus | todial | | (i.e., | thermal | systems | or LF) | O | A | A | L |
| in facility | | Staff | | | insul | ation, su VAT, c | | | v | I R | P S | s |
| (13) | | (12) | | | othe | r miscell | | | A | | UL | U R |
| | | YES NO | N/A | | | | | | L | | E | E |
| Greenwall 6 th floor | | | x | Asbes | stos pipe f | fittings | | 50 fittings | X | | | |
| | | | | | | | | | \perp | | - | |
| | | - | | | | | | | | +- | - | - |
| | | | II. I. II | 2 No. | Cubic Yar | de of Was | te Name of R | Legistered Landfill | | 1 | | 1 |
| Name of Registered Waste Ha Guardian Cont | | NJDEP Waste 20 | Hauler II 223 | J INO. | Cubic Yar | | T.R.R. | | | | | |
| City, State | | | Disposal 4/2/14 | | | City, St | ate town, Pénnsyl | vania / | | | | |
| Toms River, N Completed by (Print or Type) | | Title | | Signat | hure A - | / | 17 | 1 | Dat 3/2 | te 21/201 | 4 | |
| Nicholas Ferni | cola | Project Manage | r | | VI | cho | -le | | 512 | | | _ |

Print Form

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

CHECK # 5777/21063

| Date of Notification (1) 03-20-14 | | | | | Building (ler Elev | | | | | | | 1 | e r | | |
|--|------------------------------------|---------------------------------------|--|-----------------|-----------------------------|--------------------------------|----------|-------------------------------|---|------------------|-------------------------------|----------------|-----------------|-------------|-----------|
| | Type Notification | | | eet Ado Whip | ^{dress} opany F | Road | | | 5 | | • • | | | | |
| X EPA DEP X DOL | Initial Amended Amendmen | t # 1 | 1. | y, State | e, Zip Co own | de | | | r i | MA | R 28 | 2014 | 0 | • | |
| | Emergency justification | (including | Na | me of (| Contact Raffert | v | | | | ۱ ب ۰ | | | | | |
| | | | | | ITY INFO | Construction of the | DN | | E come t | | | | 8 | | 5 |
| Name of Facility Where Ab | batement is Taki | ng Place (3) | | | 1 | | | | of Facility (4 School (K-1 | 2) | | | | 5 | |
| Street Address 20 Whippany Road | | | | | | | | X | Subchapter Other (i.e. p etc.) | | | | lings, | home | €S, |
| City (5) Morristown | | 6 | | | | | | | e Feet | # o 3 | f Floors | | ldg. A 0 yrs | | |
| County (6) Morris | | | | | ode (7) SE ONLY) | | | | nt Use (Prio mercial | or if bei | ing demoli | shed) | | | lan i |
| Name of Monitoring Firm H Detail Associates | Hired by Building | Owner (8) | | ASCM | | | | | ement Con | | | | | | |
| Street Address 300 Grand Avenue | | | | | | | Street | Addres | 1999 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - | | | <u></u> | | | |
| City, State, Zip Code Englewood, NJ 0763 | 1-4355 | | | | | | City, S | tate, Zi | p Code NJ 07072 | , | | | | | |
| Project Manager for Monite Stephen A. Jaraczew | oring Firm | | 1000 | ephone 01)56 | e No. 69-670 | 8 | Teleph | one No 939-6 | D . | | License 00756 | No. | | | |
| Start Date (10) 03-26-14(1)03-31-14 | | Scheduled 02-28-15 | Comple | and the second | | | Name | | IA Monitor | | 00100 | | | | |
| Occupancy Status During | Sector sector sector sector sector | | | _ | | | Street | Addres | s | | | - | | | _ |
| Facility Closed/Vacat Abatement Performe X Other – Describe: Ar | d Outside of Nor | | | t | | - | City, S | tate, Zi | kson Ave | | | | | | |
| | | | | | | _ | Long | Islan | d City, N | Y 11' | 101 | | | | |
| Scope of Work (Check All $\ge 3 \text{ sf or } \ge 3 \text{ lf}$ $\ge 160 \text{ sf or } \ge 260 \text{ lf}$ | That Apply) | | novatior molition | | | | F | | l Containme | | n Negative | Pressu | re | | |
| | | | nontion | | | | × | Glo | vebag Proc n-Exempted | cedure | | able Pro | cedur | e | |
| | | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | ocation rmally | | | _ | | | | | | | Abate Ty | ement pe | |
| Location of Asbestos-Containing N <u>TO BE ABA</u> In Facility (13) | Aaterial (ACM) TED | Used Maint Custor | Solely t tenance dial Stat (12) | aľ | | tos Conta thermal surfac | | laterial s insula T, or | | (| Amount Specify F or LF) | Remova | Repair | Encapsulate | Enclosure |
| | | Yes | No | N/A | | | | | | | | | | ite | œ |
| Lower Level: Da | ita Center | | | × | | Pipe | Insula | ition | | 10 | 000LF | x | | - | |
| | | | | | | | | | | | | | | | |
| Name of Registered Waste | e Hauler | | | EP Wa | aste | Cubic | Yards | | Name of | Regist | ered Landi | 11 | | | |
| ATC, Inc. / JBT (5007 | (1) | | Hau 243 | ler ID N 10 | No. | of Was TBD | | | Minerva | | erprises | | ×. | | |
| City, State Shirley, NY / Bronx, N | IY | | | | | Dispos TBD | al Date | 7 | City, Stat | |) OH 440 | 688 | | | |
| Completed by John Tancredi | | Title Project | t Mana | ager | | S | ignáture | 1 | | V | 1.0.2 |)ate)3-20- | 14 | | |
| ASB-41 (R-06-08) | | 0 | | | | . / | * Do no | ot use t | his form for | asbes | tos licensu | ire exer | npted | activi | ties. |

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

| | | N | | | OF ASBE | | | | C | 1PC+ | 1 | 10 | 38 | 6 | |
|---|--|-------------|-------------------|----------------------|-----------------------|------------|---|------------|--|----------------------|-----------------------|----------------|---------------|-------------|-----------|
| Date of Notification (1) 3-21-14 | | - 1. 2 | | | Building (| | | | c | 1 | \ 11 - | 1- | | E. | |
| Agencies Notified | Type Notification | | | Street Ad | | | | | 1 | • | | | | | |
| | | | | 1301 | North | 1 31s | t Str | reet | | | MAR 2 | 8 2 | 014 | 05 | 1 |
| EPA | □ Initial □ Amended | | | | te, Zip Co | | | | 1 | i. | | | | | |
| DOL | Amendment # | | — L | | adelph | nia, l | PA 1 | 9121 | | 1 | | | | | |
| X DOH | justification) | loiddirig | | Name of | Contact | | | | | relep | hone Nur | nber | ÷ | | |
| DCA - | Cancellation | | | FACI | LITY INFO | ORMATI | ON | | | | | | | | |
| Name of Facility Where 15 Washington | Abatement is Taking Street | Place (3) |) | 17101 | | | | | of Facility (4 School (K-1 | | | | | | |
| Street Address 15 Washington | Street | | | | | | | 反 | Subchapter Other (i.e. p etc.) | 8 (Other rivate & | than K-12 commerci | 2) al build | dings, | home | es, |
| City (5) Newark | | | | | 1 | | | Squa 15 | re Feet 0,000 | | loors 16 | 5 | ldg. A Oyr | | |
| County (6) Essex | | | | County ((STATE L | Code (7) JSE ONLY, |) | | | ent Use (Pric cant | or if being | g demolist | ned) | | | |
| Name of Monitoring Firm | Hired by Building O | wner (8) | | ASCN | 1 No. | | Name | of Aba | itement Con | tractor (S | 9) | | | | |
| EHS Environme | | | | 10000 | | | - | | h Envi | ronme | ntal C | 0., | Enc. | | |
| Street Address 411: Southgat | o Court Sui | to F | | | | | | Addre | | | | | | | |
| | e court, sur | Le L | | | | | | | ip Code | le . | | | | | |
| City, State, Zip Code Mickleton, NJ | 08056 | | | | | | seeling section. | | own, PA | A 1940 | 01 | | | | |
| Project Manager for Mor | | | | Telephor | ne No. | | | none N | | | License N | 0. | | | |
| Jack Carney | | | | | 24-008 | 80 | | | -9920 | | 0039 | 8 | | | |
| Start Date (10) | 4 | | | npletion I | Date (11) | | | | HA Monitor | +-7 | T | | | | |
| 3-22-14 | | 3-22- | 100 100 C | | | | 1.1.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2 | Addre | ironmer | itar, | Inc. | | | | |
| Occupancy Status Durin | | | | | | | | | thgate | Court | , Sui | te E | 2 | | |
| Facility Closed/Vac Abatement Perform Other – Describe: | ated During Entire Peneed Outside of Norma | al Facility | Hours | s | | * | City, S | State, Z | ip Code on, NJ | | | | | | |
| Scope of Work (Check A | I That Apply) | | | | | - | | | | | | | | | |
| 3 sf or ≥3 lf ≥160 sf or ≥260 lf | | | lenova)emolii | | | | C | I Mi | II Containme ni-Enclosure ovebag Proc on-Exempted | e edure | | | | e | |
| | | 10 | Least | | | 1 | | | | () une | | | Abate | ement | t |
| Location | n of | N | Locat Norma | lly | | De | scription | n of | | | | - | T <u>y</u> | vpe I | |
| Asbestos-Containing TO BE AB | Material (ACM) | Ma | d Sole intena | nce/ | | tos Con | taining N I system | Materia | | 1.1.1 | nount ecify | Re | - 71 | Enc | E E |
| In Faci | lity | Cust | todial ((12) | Staff? | | surfa | icing, VA miscellar | AT, or | | SF | or LF) | Remova | Repair | Encapsulate | Enclosure |
| (13) | | | | | | otheri | TheCentar | neous) | | | | al | - | late | Ire |
| | | Yes | No | N/A | | | | | | 20 0 | | + | | | |
| 1st floor | | | x | | aspe | STOS | debr: | 15 | | 28 5 | 5F | x | | | |
| | | | | | | _ | | | | | | | | | |
| Name of Registered Wa | ste Hauler | | I N | | /aste | Cubic | Yards | | Name of | Register | ed Landfil | | | | |
| Newark Cartin | | | | Hauler ID 4509 | | of Wa 5 | iste | | Waste | Mana | igemen | | | | |
| City, State Newark, NJ | | | | | | | sal Date 1–14 | 9 | City, Stat | | s, PA | | | | |
| Completed by | | Title | | | | C | Signature | | 16AA | | / | ate | | | |
| James Kelly | | P | resi | ident | | 1 | Agen | Nes | fully | \sim | 3 | -21- | -14 | | |

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

| | | | (F | | to NJAC | | | | Che | cK- | #1 | 030 | 10 | | |
|--|--|---------------|-----------------|-------------------|----------------------|------------------|--|-------------------|--|-------------|--------------------------|----------------------------------|------------------|-------------|-----------|
| Date of Notification (1) 3-21-14 | | | | | f Building | | | | | | | 1 1 1 | 5.7 | F | |
| Agencies Notified | Type Notification | 0.0 | | Street A 119 | Address West | 57th | Stree | et | | | | | | | i a |
| 道 EPA ロ DEP 道 DOL | Initial ☐ Amended Amendment | | | | ate, Zip Co York, | | 10019 |) | 1 | 6 | MAR 2 | - 8-2 | 014 | • | |
| DOH DCA · | Emergency (justification) Cancellation | incluaing | 8 | Name o Jim | f Contact Forgic | one | | | Ť. | Tolo | nhone Ni | ımber | | 4 | Ų. |
| | | | | FAC | ILITY INF | ORMAT | ION | | | | | | 27 | • ••- ••• | - |
| Name of Facility Where 251 Union Str | | g Place (| 3) | | | | | 15.6 | of Facility School (K- | 8 H | | | | | |
| Street Address | 3 | | | | | | | | Subchapte | | | | | ÷ | 100 B |
| 251 Union Str City (5) | eet | | | | | | | 6 | Other (i.e. etc.) re Feet | . C | commerc Floors | | aings Bidg. A | | es, |
| Northvale | | | | | | | | 100 | ,000 | | 2 | | 60yı | 1000 | |
| County (6) Bergen | | | | | Code (7) USE ONLY |) | | | ent Use (Pr Mercia | | g demolis | shed) | | | |
| Name of Monitoring Firm EHS Environme | Hired by Building C ntal, Inc. | Owner (8) |) | ASCN | M No. | | | | tement Co h Envi | | | ~ | Tnc | | |
| Street Address | , | | | | | | Street | | | | iicur v | | | | |
| 411 Southgate | Court, Suit | te E | | | | | | | s Aven | ue | | | | | |
| City, State, Zip Code Mickleton, NJ | 08056 | | | | | | | | ip Code Cown, P | A 194 | 01 | | | | |
| Project Manager for Mon Jack' Carney | itoring Firm | 0 | | Telepho | | • | Teleph | none N | | | License I | | | | |
| Start Date (10) | | Schedul | | | 24-008 Date (11) | | and a second sec | 100000000 | HA Monitor | | 005. | 50 | | | |
| 4-7-14 | 1. And 5. | | 4-1 | | | | Plyr | nout | h Envi | ronmer | ntal (| .,] | Inc. | | |
| Occupancy Status During | g Abatement (Check | Conly Or | ne) | | | | Street | | ss S Aveni | | | | - CALE I | | |
| Facility Closed/Vaca Abatement Perform Other – Describe: _ | | | | | | | City, S | tate, Z | ip Code | |)1 | | | | |
| Scope of Work (Check A | ll That Apply) | | | | | an a contra de | | | | | | | | | |
| □ ≥3 sf or ≥3 lf X□ ≥160 sf or ≥260 lf | | | Renov Demol | | | | XDDDD | l Mir I Glo | l Containm hi-Enclosur ovebag Pro n-Exempte | e cedure | | | | e | |
| | | l | Loca | tion | | | | | Line in pro- | a () and | | | Abate | ement | |
| Location | ı of | 1 | Norma ed Sol | ally | | De | scription | of | | | | | 19 | pe | |
| Asbestos-Containing <u>TO BE AB/</u> In Facili (13) | ATED | Ma | aintena | ance/ Staff? | | thermal surfa | taining N systems cing, VA niscellan | s insula T, or | | (Sp | iount ecify or LF) | Removal | Repair | Encapsulate | Enclosure |
| 1st Floor | | 100 | | 19075 | C1 | | , | | | 2,20 | 0 SF | x | | | |
| | | | x | | 11001 | : til | e/mas | tic | | 2720 | | | | | |
| | | | | | | | | | | | | | | | |
| Name of Registered Was | te Hauler | | l, | | laste | Cubic | Yards | | Name of | Registere | d andfi | | | | |
| Newark Carting | | | | Hauler ID 4509 | No. | of Wa | | | and the second second second | town] | | | Reco | over | ТY |
| City, State Newark, NJ | | | | | | Dispo | sal Date | | City, Stat | | | | | | |
| 1999-020029-000291-002200 - 070 | | 7:41- | | | | | 4-14 | | Tully | town, | | ote | | | |
| Completed by James M. Kelly | | Title Vice | è-Pr | esider | nt | 5 | Signature | | - | | | _{ate} - <u>21-</u> 1 | 4 | | |
| | | 1 | | | | | | _ | | | 1.5- | -1-1 | T | | |

| No Check | (Fulsua | uit to NJAC 8.00 | allu 12.12 | .0) | ÷ | | | · ·· | |
|---|--|-----------------------------------|---|--|---|---------------------------------|----------------------------|---|-------------------|
| Date of Notification (1) March 20, 2014 | ł | Name of Building | | ator (2) ry Storms | | | , " t | 1 | 15 |
| | ion Notification Inded Notification | Street Address | | terans Memorial H | lighway | V V P | 28 | 2014 | |
| [x] DOL Amer | adment # gency (including | City, State, Zip Co | | ville, NJ 08876 | ¥6 | | | | |
| justifi | ication) ellation | Name of Contact | ory Storms | | elephone Number | | | | |
| | | CILITY INFORM | | 5 | | | | | |
| Name of Facility Where Abatement is Taking Former Body Shop | Place (3) | | ATION | Type of Facility (4) | School (k-12) | | | | - |
| Street Address 44 Veterans Memo | | | | [] | Subchapter 8 (oth Other (i.e., private homes, etc.) | | | al build | ings, |
| City | County (6) | County Code (7) (STATE USE ONL | .Y) | Square feet 3500 sf | # of Floors | Bldg | . Age 6 | 0 | |
| Somerville | Somerset | | | Current Use (Prior i | f being demolished) Body Shop | | | - | |
| Name of Monitoring Firm Hired by Building (N/A | Owner (8) | ASCM No. | Name of | Abatement Contractor | the local many means the second se | Inc. | | | |
| Street Address | | | Street Ac | | loute 9, Unit 61 | | | | |
| City, State, Zip Code | | | City, Sta | te, Zip Code | River, New Jerse | ev 087 | 755-12 | 271 | |
| Project Manager for Monitoring Firm | Telephone Number | r | | ne Number 9-9932 | License N 00624 | | | | |
| Scheduled Start Date (10) 1/21/14 | Scheduled Comple 2/11/14 | tion Date (11) | | OSHA Monitor | L. Analytical | | _ | | |
| Occupancy Status During Abatement (Check [] Facility Closed/Vacated | | | Street Ac | idress | telton Road | | | | |
| [] Other – Describe | | | | | way, New Jerse | ey 088 | 54 | | |
| Scope of Work (Check all that apply) [] >3 sf or ≥ 3 lf [] ≥ 160 sf or ≥ 260 lf | [] Renov [] Demo | | [] [] [] | Mini-Enclosure Glovebag Proced | t with Negative Pres ure *) and Non-Friable 1 | | пе | | |
| | | 1 | | | T | Abat | tement | Туре | |
| Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> in facility (13) | Is Location Normally used Solely by Maintenance/Custodia Staff (12) YES NO N/A | l (i. ins | Description Substos-Con Material (A e., thermal sulation, su VAT, o her miscell | ntaining ACM) systems Irfacing, Dr | Amount (Specify SF or LF) | R E M O V A L | R E P A I R | E N C A P S U L E | E N C L O S U R E |
| Exterior | X | Asbestos roo | fing | | 3700 sf | X | | | |
| | | | | | | | - | | |
| Name of Registered Waste Hauler | NJDEP Waste Haule | er ID No. Cubic V | ards of Was | te Name of Regist | ered Landfill | | | | |
| Guardian Contracting, Inc. | 20223 | 45 | | T.R.R.F. | Siou Landin | | | | |
| City, State Toms River, New Jersey | 2/12 | osal Date 2/14 | City, St Tullyt | ate cown, Pennsylvani | a / | 1 | | | |
| Completed by (Print or Type) Nicholas Fernicola | Title Project Manager | Signature | cho | 1/2 | Λ | Date 3/2 | e 0/201 | 4 | |

| | | | State | e of Ne | w Jer: | sey | | | Ch | eck # 1 | 0171 | | |
|---|------------------------|----------|--------------------|------------------|--------|------------------------------|-----------------------|--------------------|--------------|-------------|-----------|-------------|-------------|
| | | NOT | | | | S ABATEMENT | | | | | | | |
| | | (Pursua | ant to | NJAC 8: | 60-7 : | and 12:120-7) | (0) | | | | | | |
| ate of Notification (| 1) | | | rge M | | mer/Operator | (2) | | | | | | |
| 3-18-2014 | | | | | | - | | 1 | | | 19 A. 19 | | |
| gencies Notified Ty | pe Notific | ation | | Address | | e Road | | i. | 1 | | | | |
| []EPA | [X] Initial Notific | ation | | | 220 | | | <u> </u> | M/ | <u>P 28</u> | -201 | 4 | |
| []DEP | []Amended | | | state, | | 07940 | | | | | | | |
| [X]DOL | Notific | 525-5 C | | 1993-999 A | | | Trol | onhone | 17 | | | | <u></u> |
| [X]DOH | [] EMERGEN | CY | Construction Const | f Conta rge M | | r | | | | 5 | 4.1 | 44 | |
| []DCA | []Cancell | | Geo | rge n | 1090 | - | | | -75 | | 1 | | |
| | []00010000 | | | FACILI | ITY IN | FORMATION | | | 2 | | ţx. | | |
| ame of Facility Where | a Abatement | is Taki | ng Plac | ce (3) | | | Type of 1 | | | | | | |
| Same as above | | | | | | | [][Su] | hool (R bchapte | ar 8 (Other | than F | (-12) | | |
| treet Addres | | | | | | | [X10t] | her (i. | .e., privat | e & con | mer- | | |
| | | | | | | | Contraction of the | | dings, ho | | g. A | re | |
| 2: br /5 | | County | (6)Ess | ex | Coun | ty Code (7) | Square F | D | 2 | 7 | 0 | | |
| City (5 | | pouncy | (0) 200 | | | TE USE ONLY) | | | rior if bei | ing demo | lish | ed) | |
| | | | | | | | | | (0) | | | | |
| Name of Monitoring Fi | rm hired by | y Buildi | ng ASC | M No. | | Name of Abate | | | | | | | |
| Owner (8) N/A | | | | | | AZTECH M | | 10.14 ± / | | | | | |
| Street Address | | | | | | Street Addres 86 Chris | | - st | | | | | |
| | | | | | | 1 | | | | | | | |
| City, State, Zip Code | 1 | | | | | City, State, Montclai | r. NJ | 0704 | 2 | | | | |
| | | | . 1 h | ne Numbe | | Telephone Num | 1 | | | icense | Numb | er | |
| Project Manager for M | fonitoring | | I/A | le Rumbe | | (973)744 | | | | 0037 | 1 | | |
| Scheduled Start Date | (10) Sci | hed. Com | | Date | (11) | Name of OSHA | Monitor | | L | | | | |
| 3-29-14 | (10) | 3-31 | | | | N/A | | | | | | | |
| Month Day Ye Occupancy Status Dur: | ar | Month | Day | Year | | Street Addres | SS | | | | | | |
| Occupancy Status Dur: [X]Facility Clos | ed/Vacated | During | Entire | Period | | | | | | | | | |
| of Abatement []Abatement Per | formed Out | side of | Normal | Facilit | Y | City, State, | Zip Code | | | | | | |
| Hours - Desci | ibe:«OffHo | urs Desc | ript» | | | | | | | | | | |
| []other - Descr | | | cy Desc | 11000 | | | | | | | | | |
| Scope of Work (Check | all that a | (ppry) | 129/240 | | | | Containm -Enclosur | | th Negative | Press | ire | | |
| [X]≥3 sf or []≥160 sf o | >3 lf r >260 lf | | | ovation | | [X] GLOV | ebag Proc | edure | | | | | |
| 1 1200 00 0 | - | | Is | | | []Non- | Friable P | roceau | re | Aba | ateme | nt T | |
| Location | of | | Locati | | 24 | Descripti | | | Amount | R | R | EN | E N |
| Asbestos-Con | | | Used | d _ | | Asbestos-Co Material | (ACM) | | (Specif | Y M | E | C A | CL |
| Material TO BE ABJ | ATED | | By Ma: tenand | in- | 1 | (i.e., therman sulation, sur | al systems | s TAT | SF or LF) | V | PAI | P S U | o s U |
| In Facil (13) | ity | | Custod | lial | ш | or other misc | ellaneous |) | | A L | R | L | RE |
| (15) | | Ye | | N/A | - | T=1 | tion | | 10 lf | X | 1 | · | Б |
| Basement | | | | X | Pil | pe Insula | | | 10 11 | | 1 | | |
| 10 | | | | | | | | | | | 1 | | |
| | V | | NJDEP | Waste | 0 | bic Yards | Name | of Regi | stered Lan | dfill | | | |
| Name of Registered W AZTECH MANAG | | | | ID No. | to . | Waste 1.5 | | O.W. State | S. | | | | |
| City, State Montclair, NJ | 07042 | | | | | isposal Date 4-1-14 | Mori | risvi | lle, PA | 190 | 67 | | |
| | or Type) | Title | | 1.000 | | Signatu | re | TT | 1 | Date | ⊇ 8-14 | | |
| Completed By (Print | | | | | | | | | 12 B | 1 2 1 | | | |
| Completed By (Print Constantine V | | Presi | dent. | | 1 | | inter: | al | Li- | - | | | |

Print Form

| | NC | TIFIC | ATION C | of New J | ersey TOS ABATE 0 and 12:12 | EMENT | | | | | | | |
|---|------------------|-------------------|----------------------|-----------------|---|---|--------------------------------|--------------------|------------|-------------------|--------|-------------|---------------|
| 1hoc1 # 000126 | | | | | | | | 1.5 1 | N | <u>n 7 6</u> | 5 | | \mathcal{H} |
| Date of Notification (1) 03-24-14 | | | | Building Ow | ner/Operato | or (2) | | | | | 3 | | |
| Agencies Notified Type Notification | n | S | treet Add | dress | | | 10 | 1.1 | | 0 001 | 6 | | 1 |
| . generation | | 1 | 17 Mat | Drive | | | | M. | 4R 2 | 8 201 | 4 | : | 1 |
| EPA Initial Amended | | C | ity, State | e, Zip Code | 1 | | 1 | | | | | | 1 |
| DEP Amended Amended | nt # | _ F | airfield | d NJ 070 | 04 | | | | - | 2 | | | 1 |
| Emergenc | y (including | N | ame of (| Contact | | | -28 | Tal- | | | | • | Í |
| DOH justification | | | Aida So | ciaparasi | | | | | | | | | |
| | | | FACIL | ITY INFOR | MATION | | | | | | | | |
| Name of Facility Where Abatement is Tak | ing Place (3) | | | | 2 | Туре | e of Facility (4 |) | | | | | |
| Aida Sciaparasi | | | | | 2011 - 12-12 | | School (K-12 | 2) | | | | | 82 |
| Street Address | | | | | | | Subchapter & Other (i.e. pr | B (Othe | r than K-1 | l2) sial build | inas | home | s |
| 17 Matt Drive | | | | | | X | other (i.e. pr etc.) | ivale a | comment | Adi Dulio | | nome | -1 |
| | | | | | | Squ | are Feet | # of | Floors | В | dg. A | ge | |
| City (5) Fairfield | | | | | | | | | | | | | |
| | | | County C | ode (7) | | Cun | rent Use (Prio | r if beir | g demolis | shed) | | | |
| County (6) | | 10 | STATEU | SE ONLY) | | | | | | | | | |
| Essex | 0 | | ASCM | No | Nar | The of At | atement Con | tractor | (9) | | | | _ |
| Name of Monitoring Firm Hired by Buildin | ig Owner (8) | | ASCIVI | INU. | 1 1 1 - State | | ontracting L | | . , | | | | |
| N/A | | | | | | eet Addr | | | | | | | - 00 - 1 |
| Street Address | 2 | | | | | 22 7th | | | | | | | |
| | | | | | | | | | | | | | |
| City, State, Zip Code | | | | | | | Zip Code ity NJ 0708 | 27 | | | | | |
| | | | | | and the second se | | | | License | No | | - | |
| Project Manager for Monitoring Firm | | | Telephor | ne No. | 10 10 10 10 10 10 10 10 10 10 10 10 10 1 | ephone 01 216 | | | 01206 | | | | |
| | | | | | | 51. 1. C. | | | 01200 | | | 14 | |
| Start Date (10) | 그는 것이야지만 직망가지했다. | | npletion (| Date (11) | | | SHA Monitor | 10 | | | | | |
| 04-04-14 | 04-07- | 14 | | | | 1.44 | ontracting L | LU | | | | | |
| Occupancy Status During Abatement (C | heck Only On | ne) | | | | eet Add | | | | | | | |
| | | | nent | | | 2 | Street | | | | | | |
| Facility Closed/Vacated During Entite Abatement Performed Outside of N | ormal Facility | Hours | ; | | | Control (10, 10) | Zip Code | | | | | | |
| Other – Describe: | | | | | - U | Inion C | ity NJ 070 | 87 | | _ | | | |
| Scope of Work (Check All That Apply) | | | | | | 10000 | | | | | | | |
| | | Renova | ition | | | × F | ull Containm | ent with | Negative | Pressu | ire | | |
| ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf | | Demolit | | | | | Mini-Enclosure | B | | | | | |
| | | | | | | H | Glovebag Pro Non-Exempte | cedure d (*) an | d Non-Fri | able Pro | ocedu | re | |
| | | | | | | Etable 1 | ton Example | - (7 | | | | emen | t |
| | | Locat | | | | | | | | | T | ype | |
| Location of | Lies | Normal ed Sole | | | Descrip os Containir | otion of | rial (ACM) | 4 | mount | | | - | |
| Asbestos-Containing Material (ACM | Ma | intena | nce/ | Aspest (i.e. | thermal syst | tems ins | ulation, | | Specify | Re | 7 | Encapsulate | Enclosure |
| TO BE ABATED In Facility | Cus | todial S | Staff? | | surfacing | VAT, o | r | S | F or LF) | Remova | Repair | sde | lös |
| (13) | | (12) | | | other misce | ellaneou | is) | | | Val | I ≣. | llat | lie |
| | Yes | No | N/A | | | | | | | | 1 | œ | |
| | | | | 1 | ermiculite | insula | tion | 9 | 00 SF | x | | | |
| Attic | | X | + | | cimiculite | niouia | | | | | + | - | 1 |
| | | | | | | | | | | | - | | +- |
| | | | | | | | | | | | | | 1 |
| | | | | | | | | | | | | | Γ |
| | | 1 | | Vento | Cubic Yar | de | Name of | Regist | ered Land | dfill | 1 | 1 | 1 |
| Name of Registered Waste Hauler | | | NJDEP V Hauler ID | | of Waste | 49 | | | | | VOD | Faci | lity |
| Delfa Contracting LLC | | | 35240 | | 4 | | i uliyto | wn R | esource | Reco | very | au | incy |
| City, State | | | | | Disposal I | Date | City, Sta | | | | | | |
| Union City NJ 07087 | | | | | 04-09-1 | | Tullyto | own, F | PA | | | | |
| Completed by | Title | | | | Sign | ature | 10 | | | Date | | | |
| | 100000 | . Mar | nager | | | _ | 54 | | | 03-24 | 1-14 | | |
| Jaime Delgado | 110 | · incat | | | | -11 | <u>S</u> | | | 1 | | | |

ASB-41 (R-06-08)

| 64 | n | 2 | N | 1 |
|----|---|------------|-----|----|
| 04 | υ | J - | 1.0 | υ. |

State of New Jersey

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

Initial Notification Check #: 5764

| Date of Notificatio | | T | Nam | e of Buil | ding | Owner/Operato | r (2) | | | . 7 | | _ |
|--|--|--------------------------|-------------------------------------|--|--------|---|--|------------------------------------|---------|--------|-----------|------------|
| 0 3 1/1 | 4 1/1 1 | | Ne | w Brunsw | ick B | oard of Educati | | ta : • | | | 5 | _ 1 |
| Agencies Notified | Type Notific | ation | Str | eet Addre | SS | | | | | | | - 1 |
| (X) EPA | | 26 | 268 Baldwin Street MAR 2 8 2014 | | | | | | | | | |
| (X) DEP | [X] Initial Notification [] Amended | | Cit | City. State, Zip Code New Brunswick, NJ 08901 | | | | | | | | |
| (X) DOL | | | Ne | | | | | | | | | |
| [X] DOH | Notific | | ne of Cont | | | Tele | phone Number | *** | | | 27765 | |
| | []Cancellation | | | hn Smovo | r (014 | /ner's rep.) | ڪلي ا | | | | | |
| C)DCA | | | 10 | | 1.1.1 | | | | | | | |
| | | | | | | NFORMATION | Type of Facili | ty (4) | | | | |
| Name of Facility W | here Abateme | nt is fa | king | Place (3 |) | | Mischool | (8-12) | | | | |
| St. Peter Elementary | y School | | | | | | []Subcha | pter 8 (Oth (i.e., priv | er th | an K | -12) | |
| Street Address | | | | | | | i ai al h | mildings, h | omes. | etc | .] | |
| 165 Somerset Stree | + | | | | | | Square Feet | # of Floors | BIG | Ig. A | ge | |
| City (5) | <u> </u> | County | (6) | | Cou | nty Code (7) | 50,000 Current Use (E | 2 Fior if hei | ng de | 60 | shed |) |
| | | | | | (ST. | ATE USE ONLY) | for an and the second sec | 1101 11 001 | g | | | 50 |
| New Brunswick, NJ Name of Monitoring | 08901 | Middle | Sex | ASCM No. | 1 | Name of Abate | School ment Contractor | (9) | | | | |
| Name of Monitoring Owner (8) | f firm Aired | DY BUILD | ing | About No. | | | | | | | | |
| Ahera Consultants, | Inc. | | 0057 | | | Four Strong Builders, Inc. | | | | | | |
| Street Address | | | | | | Street Address | | | | | | |
| P.O. Box 385 | | | | | | 180 Sargeant | Avenue | | | | | |
| City. State. Zip C | ode | | | | | City. State. | Zip Code | | | | | |
| Oceanville, NJ 08231 Project Manager for Monitoring Firm Tele | | | elen | hone Numb | er | Clifton, NJ 07 | License Number | | | | | |
| | | | | | | | 00007 | | | | | |
| John Smoyer Scheduled Start Da | ste (10) 50 | | | 652-1833 on Date (| m | 973-614-0377 Name of OSHA | Monicor | | | | | |
| 0 3 / 3 1 / Month / Day / Occupancy Status I | Year | 0 6 / 2 Month / | 2 0 Day | / 1 4 / Year | | Four Strong B | | | | | | |
| (X)Facility Close | sed/Vacated | During En | ntire | Period | | 180 Sargeant | Avenue | | | | | |
| of Abatement []Abatement Fer | | | | | 1 | City, State. | Zip Code | | | | | |
| Hours - Desci | ribe: | | x | | -0 - | 0 | 010 | | | | | |
| []Other - Desc: | | | _ | · · · | - | Clifton, NJ 07 | | | | | | - |
| Scope of Work (Ch | eck all that | appiy) | 00000 | 14 2010 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 | | [X]Ful | L Containment W | ith Negativ | e Pre | ssur | e | |
| []Demoli []>3 sf ([X]∑160 s | | | [X] | Renovatio | n | [X]GLo | i-Enclosure vebag Procedure -Friable Proced | ure | | | | |
| | | | 1 | Is | | | | | Abat | emer | E | E |
| Asbestos Materi TO BE in Fa | tion of -Containing sl (ACM) <u>ABATED</u> cility 13) | | Noi Si by tei Cui St | cation rmally Used olely Main- nance/ stodial aff(12) No N/A | i | Descripti Asbestos-Con Material ({i.e., thermal nsulation. sur or other mis | taining ACM) systems facing, VAT. | Amount (Specify SF or LF) | REMOVAL | REPALR | NCAPSUL . | NCI. OSURE |
| See Attached | | | | | | | | | X | | | |
| | · · · | | 1 | | | | | | | | | |
| | | | | | - | | | 1 | | | | |
| · · · · · · · · · · · · · · · · · · · | | | + | | | | | + | + | - | | 1 |
| | | | | JDEP Wast | • | TCubic Yards | Name of Regi | stered Land | din- | - | - | L |
| Name of Registere | a waste Haul | et | | auler ID | | of Waste | | | | | | |
| Four Strong Builde | ers Inc. | | 1 | 2609 | | | G.R.O.W.S. N | lorth, Inc. | - 22 | | | |
| City. State | | | | | | Disposal Date | City. State | | | | | |
| Oliffren NU | | | | | | | Tullytown, PA | | | | | |
| Clifton, NJ Completed By (Pri | nt or Type | Title | | | | Signatu | | | ם | ate | | |
| Carlotte States and a state of the second | | | | | | B | Qui - | ~ | | 14 4 1 | 4 / | |
| Bilyana Kulakovsk | a | Office A | Admi | nistrator | | 14 | | | 13 | 8/14/ | 14 | |
| A58-41 | | | | 29.3075 - 18 | | | | | | | | |

JUN 95

St. Peter ELEMENTARY School – Initial Notification - Page 2

MAR 2 8 2014

| Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13) | Is Location Normally Used Solely by Main- tenance/ Custodial Staff (12) | | | Description of Asbestos-Containing Material (ACM) (i.e, thermal systems insulation, surfacing, VAT, or other miscellaneous) | Amount (Specify SF or LF) | R E M V A L | R E P A I R | ENCAPSULAT | ENCLOSURE |
|--|--|----|-----|---|------------------------------------|----------------|----------------------------|------------|-----------|
| | Yes | No | N/A | Disc Fitting Inculation | 5,381 LF | x | - | - | + |
| Various Locations | | X | | Pipe Fitting Insulation | 13 ea. | X | | | |
| Room #: 123 & 216 | | X | | Pipe & Fitting Insulation | 240 SF | X | - | - | - |
| Boiler Room | X | | | Boiler Jacket Insulation | | | - | - | - |
| Boiler Room | X | | | Boiler Breeching Insulation | 320 SF | X | | - | + |
| Boiler Room | X | | | Boiler Rib Packing & Fire Brick | 318 SF | X | - | | - |
| Room #: 013 & 016 | X | 1 | | Shower Stall Vapor Barrier/Mastic | 989 SF | X | | | - |
| Room #: 001, 002, 008 & 015 | | X | | VAT & Mastic and Transite | 2,634 SF | X | | | |
| Room #: 027,028,032,033 & 034 | | X | | VAT & Mastic and some carpeting | 8,705 SF | X | | | |