

(K 142)	NOT	TIFICA (Purs	O MOITA	of New Jers F ASBESTO NJAC 8:60 a	SABATE	MENT D)	г		8 - 2 -	/ + . s	. 3		
Date of Notification (1) 05/25/2016			ame of B	uilding Owne	r/Operator	(2)		8	2016 MAR	29	Bee	7	ē.
Agencies Notified Type Notification		St	reet Add	ress	1			A	Syrey.		AN,	1:3	3
EPA Initial Amended Amendment #				, Zip Code NJ 07901					& LICI	EMS)	NG	KOL	
Emergency (indigenous plants) DOH justification) Cancellation	cluding	100	ame of C					Tele	nhone Numb	ner			
and the state of t	21000 (3)		FACILI	TY INFORM	ATION	Tvi	ne of Facility (4)						\dashv
Name of Facility Where Abatement is Taking I N/A Street Address	1806 (5)					×	School (K-12) Subchapter 8 Other (i.e. pri) (Othe	er than K-12) commercial	l buildir	ngs, h	omes	,
City (5) Summit						_	etc.) uare Feet 0	# of	Floors	Bld 98	lg. Ag	е	
County (6) Union			County Co	ode (7) SE ONLY)			rrent Use (Prior esidential	r if bei	ng demolishe	ed)			
Name of Monitoring Firm Hired by Building Or CPC Environmental	wner (8)		ASCM	No.	Nam Tur	e of A	batement Cont point Contra	ractor cting	(9) Corporati	on			
Street Address 142 N 13th Street					170000	et Add Berk	dress eley Terrace)					
City, State, Zip Code Newark NJ 07107							e, Zip Code n NJ 07111						
Project Manager for Monitoring Firm Chika Onwukaife	100		Telephon (973) 6	e No. 88-8056	1,500,000,000	phone 3-372	e No. 2-2177		License No 01238	0.			
Start Date (10)	Scheduled 04/11/10		pletion D	ate (11)	11 11 11 11 11 11 11 11	277	OSHA Monitor vironmental	Inc.					
Occupancy Status During Abatement (Check	Only One	9)					dress st 25th Street						
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norma Other – Describe:	eriod of Al al Facility	batem Hours	ent		City	, State	e, Zip Code ork, NY 1000						
Scope of Work (Check All That Apply)													
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova emolit				×	Full Containme Mini-Enclosure Glovebag Prod Non-Exempted	e cedure				e	
	la la	Locat	ion				Non-Exemple	u () ai	na reon i nac		Abate	ement	
Location of	N	locat Iormal d Sole	lly		Descript	ion of	f		Amount		1)	pe	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mai Cust	intena todial (12)	nce/ Staff?	(i.e. the	containing ermal systemal surfacing, other misce	ems in	or		(Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No X	N/A		Pipe ins	ulatio	on		60 SF	X			
Basement					ripe ilis	ulati							
			-										
Name of Registered Waste Hauler Newark Carting Inc			NJDEP V Hauler IC 1506	No.	Cubic Yard of Waste 1	ds	500000000000000000000000000000000000000		stered Landfi Refacility	ill			
City, State Newark NJ 07102					Disposal D	Date	City, Sta Tully T		PA				
Completed by Emeka Okeke	Title Pres	iden	t		Signa	ature	Fare	B) ate) 3/25/	201	3	

1 K 4622

ate of Notification (1)			Nan	ne of Bu	ilding Owner/Op	erator (In shes of	Princedora	Haw	-	N	1
3/28/16			TT	IUCA	WIN UNIVERS	21141	a V Shand No.	ļ frank	- CC	D		
gencies Notified	Type Notification		Stre	et Addr	ess	\A	u ne	5		N		0
T EPA	M Initial		Ch	1 MC	Mullen	2011	3		()	O		
DEP	Amended		City	, State,	Zip Code		SOCILIA	Ž,	C:	900		
DOL	Amendment #_		1	I WE	eton, No	2 (75244	Marian Midden		Stands.	-	40.00
· · · · · ·	Emergency (in	cluding	Nar	me of Co	ontact			Telephone Num	2621			77
₫ DOH	justification) Cancellation		10	do	ortega			-	~.r -	*3		BF (s)
DCA	Caricellation		1 4-	EACIL IT	Y INFORMATIO	N.				1		<u> </u>
	Abstament is Taking	Place (3)	-	ACILII	T INT OTHER		Type of Facility (4	.)		-5		
lame of Facility Where Prince to Street Address		1 1200 (0)			10.11		School (K-12 Subchapter Other (i.e. pr	2) 8 (Other than K-12) rivate & commercia) I buildin	igs, ho	mes,	•
03 McCost	, Curcle						etc.)	# of Floors		g. Age		
City (5)							Square Feet	3	10000000	07		
Princeton							3,200			-		-
County (6)				unty Co			Current Use (Price	or if being demolish	ea)			
Mercer			(S7	ATE US	E ONLY)		Resider			4		
Mei Ca	- Hirad by Building C	luner (8)	1	ASCM N	No.	Name	of Abatement Con	tractor (9)				
Name of Monitoring Firr	n Hired by Building O	Wilei (0)	1.0	100111	,,,		services					
Pennoni A	550010462								10			
01 -1 0 -1 -1 -1			gerbag .			Sileet	Address	In Hurt. Su	Ac 5	OU		
515 Grove	Street S	1 stive	0			40	1 40.000	1/1/30 1				-
City State 7in Code							State, Zip Code					
Haddon H	11 stdnia	121 T	135	5		Tox	ton PAI	9341				
Hadash F	itarian Firm	1 000			e No.	Telep	hone No	License N	0.			
Project Manager for Mo			QI	Slanta	56-2875	LIST	4-872-88	84 0116	1			
Alan Lloyo	7	Scheduled (10.	O WC	oto (11)	Name	of OSHA Monitor					
Start Date (10)				letion D	ate (11)		ist.					
Hillio		4/22/	10			Mary 4				-	-	-
Occupancy Status Duri	ng Abatement (Chec	k Only One)				Stree	t Address	nnindh				
	cated During Entire F		ateme	nt		120	O ROUR 13	20 1261-111				_
Facility Closed/Va	med Outside of Norm	nal Facility H	ours			City,	State, Zip Code					
Other – Describe:	ned Catalag of French		March Child			Cin	mamins	m NJ				
_			17.5			Cart	O GOTTINE					
Scope of Work (Check ≥3 sf or ≥3 lf		10000000	novatio				Full Containm Mini-Enclosur	nent with Negative l	Pressur	е		
≥160 sf or ≥260 lf		L Den	HOHRO				Glovehan Pro	ncedure				
								**** *** ***	t- Dan			
		V-A-STONE SANCE					Non-Exempte	ed (*) and Non-Fria			monet	
		ls I (ocatio	n T			Non-Exempte	ed (*) and Non-Fria		Abate		
			ocatio rmally			escriptio	on of	ed (*) and Non-Fria				L.
	ion of	No. Used	rmally Solely	y by	Asbestos Cor	escription ntaining	on of Material (ACM)	Amount		Abate Ty	ре	
Asbestos-Containi		Nor Used : Maint	rmally Solely tenan	/ y by ce/	Asbestos Cor (i.e. therma	ntaining al syste	on of Material (ACM) ms insulation,	Amount (Specify		Abate Ty	ре	100
Asbestos-Containi TO BE A In Fa	ng Material (ACM) ABATED acility	Used : Maint Custoo	rmally Solely tenan	/ y by ce/	Asbestos Cor (i.e. therma surf	ntaining al syste acing, \	on of Material (ACM) ms insulation, /AT, or	Amount		Abate	ре	CIOSOI
Asbestos-Containi TO BE A In Fa	ng Material (ACM) ABATED	Used : Maint Custoo	rmally Solely tenand dial St	/ y by ce/	Asbestos Cor (i.e. therma surf	ntaining al syste acing, \	on of Material (ACM) ms insulation,	Amount (Specify		Abate Ty		Ciocolo
Asbestos-Containi TO BE A	ng Material (ACM) ABATED acility	No Used Maint Custoo	rmally Solely tenand dial St	/ y by ce/	Asbestos Cor (i.e. therma surf	ntaining al syste acing, \	on of Material (ACM) ms insulation, /AT, or	Amount (Specify SF or LF)	Removal	Abate Ty	ре	Closule
Asbestos-Containi TO BE A In Fa (1	ng Material (ACM) ABATED acility 3)	Noi Used Maint Custoo	rmally Solely tenandial St (12)	y by ce/ taff?	Asbestos Cor (i.e. therma surf other	ntaining al syster acing, \ miscell	on of Material (ACM) ms insulation, /AT, or	Amount (Specify SF or LF)		Abate Ty	ре	Enclosure
Asbestos-Containi TO BE A In Fa	ng Material (ACM) ABATED acility 3)	Noi Used Maint Custoo	rmally Solely tenandial St (12)	y by ce/ taff?	Asbestos Cor (i.e. therma surf	ntaining al syster acing, \ miscell	on of Material (ACM) ms insulation, /AT, or	Amount (Specify	Removal	Abate Ty	ре	ICIOSOTE
Asbestos-Containi TO BE A In Fa (1	ng Material (ACM) ABATED acility 3)	Noi Used Maint Custoo	rmally Solely tenandial St (12)	y by ce/ taff?	Asbestos Cor (i.e. therma surf other	ntaining al syster acing, \ miscell	on of Material (ACM) ms insulation, /AT, or	Amount (Specify SF or LF)	Removal	Abate Ty	ре	Closuro
Asbestos-Containi TO BE A In Fa (1	ng Material (ACM) ABATED acility 3)	Noi Used Maint Custoo	rmally Solely tenandial St (12)	y by ce/ taff?	Asbestos Cor (i.e. therma surf other	ntaining al syster acing, \ miscell	on of Material (ACM) ms insulation, /AT, or	Amount (Specify SF or LF)	Removal	Abate Ty	ре	Ciosora
Asbestos-Containi TO BE A In Fa (1	ng Material (ACM) ABATED acility 3)	Noi Used Maint Custoo	rmally Solely tenandial St (12)	y by ce/ taff?	Asbestos Cor (i.e. therma surf other	ntaining al syster acing, \ miscell	on of Material (ACM) ms insulation, /AT, or	Amount (Specify SF or LF)	Removal	Abate Ty	ре	Closule
Asbestos-Containi TO BE A In Fa (1	ng Material (ACM) ABATED acility 3)	Noi Used Maint Custoo	rmally Solely tenandial St (12)	y by ce/ taff?	Asbestos Cor (i.e. therma surf other	ntaining al syster acing, \ miscell	on of Material (ACM) ms insulation, /AT, or aneous)	Amount (Specify SF or LF)	Removal	Abate Ty	ре	ICIOSUIG
Asbestos-Containi TO BE A In Fa (1)	ng Material (ACM) ABATED scility 3)	Voi Used: Maint Custor (rmally Solely tenan- dial St (12)	/ by ce/ taff?	Asbestos Cor (i.e. therms surf other	ntaining al syste acing, \ miscell	on of Material (ACM) ms insulation, /AT, or aneous)	Amount (Specify SF or LF)	Removal	Abate Ty	ре	COOR
Asbestos-Containi TO BE A In Fa (1)	ng Material (ACM) ABATED scility 3)	Voi Used: Maint Custor (rmally Solely tenan- dial St (12)	/ by by cel laff?	Asbestos Cor (i.e. therms surf other	ntaining al syster acing, \ miscell	on of Material (ACM) ms insulation, /AT, or aneous)	Amount (Specify SF or LF)	Removal	Abate Ty	ре	COSCIO
Asbestos-Containi TO BE A In Fa (1)	ng Material (ACM) ABATED scility 3)	Voi Used: Maint Custor (rmally Solely tenan- dial St (12)	/ by ce/ taff?	Asbestos Cor (i.e. therms surf other	ntaining al syste acing, \ miscell	on of Material (ACM) ms insulation, /AT, or aneous) Name of	Amount (Specify SF or LF) 1,350 SF Registered Land	Removal	Abate Ty	ре	Coccio
Asbestos-Containi TO BE A In Fa (1) St & 2nd flo Name of Registered Warray City, State	Naste Hauler	Voi Used: Maint Custor (rmally Solely tenan- dial St (12)	/ by ce/ taff?	Asbestos Cor (i.e. therms surf other	ic Yards/aste	on of Material (ACM) ms insulation, /AT, or aneous) Name of	Amount (Specify SF or LF) 1,350 SF Registered Land	Removal	Abate Ty	ре	00000
Asbestos-Containi TO BE A In Fa (1) St & 2nd flo Name of Registered Warray City State	Naste Hauler	Voi Used: Maint Custor (rmally Solely tenan- dial St (12)	/ by ce/ taff?	Asbestos Cor (i.e. therms surf other	ntaining al syste acing, \ miscell	on of Material (ACM) ms insulation, /AT, or aneous) Name of	Amount (Specify SF or LF) 1.350 SF If Registered Lands W.S. Lands Late Insville. (A	Removal	Abate Ty	ре	Icionic
Name of Registered Wards Manager City, State Trenton, N	Naste Hauler	Voi Used: Maint Custor (rmally Solely tenan- dial St (12)	/ by ce/ taff?	Asbestos Cor (i.e. therms surf other	ic Yards/aste	Name of Name of October State City, Signature	Amount (Specify SF or LF) 1.350 SF IRegistered Landf	Removal	Abate Ty Repair	e Encapsulate	ICIOSUIG
Asbestos-Containi TO BE A In Fa (1) St & 2nd flo Name of Registered Warray City State	Naterial (ACM) ABATED ACILITY 3) Waste Hauler Convert of New	Yes Title	rmally Solely Solely Solely Solely No	/ y by coe/ taff? N/A N/A JDEP W auler ID	Asbestos Cor (i.e. therms surf other	ic Yards	on of Material (ACM) ms insulation, /AT, or aneous) Name of CPA ate City, St	Amount (Specify SF or LF) 1.350 SF IRegistered Landf	Removal	Abate Ty Repair	e Encapsulate	Income

53	61-1	CK	# .	157	32
****	1-1	010	HO	17.	50

Date of Notification (1) 03/23/16					Building Oas J. O'Be				2016 M	Pac		* 50	4			
Agencies Notified	Type Notification	Carrier Code		Street A					2016 M	111 25	AM	8:4	9			
EPA EPA	× Initial				odland R				\$ 3.4FS & L	Too	1.1:817					
DEP X DOL	Amended Amendment #				and, NJ 0				de L	ICE	4SING	KOL				
DOH DCA	Emergency (in justification) Cancellation	ncluding			f Contact omas O'l	Beirne	9			Tele	ephone N	lumbe	r			
					LITY INFO											
Name of Facility Where A Commercial Building	_	Place (3	3)					Туре	of Facility (4)						
Street Address	9								School (K-1 Subchapter		er than K	-12)				
1267 McBride Aven	ue							X C	Other (i.e. p				uild	ings,	home	es,
City (5)								Square	e Feet	1000	Floors			dg. A	ge	
Woodland Park								20,00		1) +		
County (6) Passaic					Code (7) USE ONLY)			Currer Build	nt Use (Prid ling	or if bei	ng demol	lished)				
Name of Monitoring Firm Whitman	Hired by Building C	wner (8)	01	ASCM 0011					ement Cor acting &			al Co	ns	ultin	g, In	С.
Street Address	·						Street	Addres	s							
7 Pleasant Hill Road City, State, Zip Code	<u> </u>						100000000000000000000000000000000000000	Route tate, Zij								
Cranbury, NJ 08512	2						1 (70)	0.00	07470							
Project Manager for Mon Kevin Lovely	itoring Firm		11.5	Telepho 732-39	ne No. 90-5858		A STATE OF THE STA	one No 528-92			License 00408					
Start Date (10) 04/04/16		Schedul 04/29/		pletion	Date (11)		The second second second		A Monitor	ultants	. Inc.					
Occupancy Status During	Abatement (Check	Only Or	ne)					Addres			*				- H	
➤ Facility Closed/Vaca									araw Ro	ad, B	ldg. #34	4A				
Abatement Performe Other – Describe: _		al Facility	/ Hours			_		tate, Zip Lawn,	p Code NJ 0741	10						
Scope of Work (Check Al	l That Apply)							_								
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		-	Renova Demolit				×	Min	Containme	Э	Negative	e Pres	sur	е		
							×	- 0.0	vebag Prod -Exempte		d Non-Fri	iable F	Proc	edur	е	
		10	Locati										34		ment pe	
Location Asbestos-Containing			Normal ed Sole		Ashasta		scription taining M		(ACM)	^	mount	-		.,	1000	
TO BE ABA	ATED '	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	intenar todial S			thermal	systems	s insula		(5	Specify		D D	R	Enca	Enc
In Facili (13)	ty		(12)				cing, VA niscellan			St	or LF)		Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A									-		ate	roi
Exterior I		Х		F	Roofing			23,	350 SF	X						
Interior and	Exterior		X		Т	ransite	e		9,1	40 SF	X					
Restrooms, Office, S	Sprinkler Room			Х		Pipe	Insula	tion		30	00 LF	X				
Restroo				X		FI	loor Tile	е			70 SF	X				
Name of Registered Was		0 VICTORIO (**)	H	JDEP Wauler ID		Cubic of Wa	Yards ste		Name of							
J.R. Contracting & E	nvironmental Co	onsul.,	Incl	7819	1 T. C. T. C.	80			Grand		al Landi	TIII				
City, State Wayne, New Jersey					9.	Dispo	sal Date		City, Stat		ennsylv	ania				
Completed by Jerry Bijelonic		Title Proje	ect Ma	nager	2	S	Signature	1				Date 03/2	3/1	6		

Date of Notification (1)				Name	of Building	Owner/Operator (2	2)	The first				
	4 / 16	;		City	y of Cam	den	2016 MAD	29 AM 8:48				
	pe Notification			Street	Address		TIMI	29 AM 8: 48				
	Initial			PO	Box 951:	20	A SHE'CE	10				
The second secon	Amended			City, S	State, Zip C	ode	2110	IS CONTROL ENSING				
□ DCA □	Amendment #			Car	nden, NJ	08101	£ 1.10	EMSING -				
(NJAC 5:23-8)	justification)	icidaling		Name	of Contact			Telephone Number	er	0.7		
	Cancellation			Joh	nn Bond			1				
			- 4	FA	CILITY IN	FORMATION						
Name of Facility Where Abat			(3)				Type of Facility					
MT VERNON STREET	RESIDENCE						School (K-12	2) 8 (Other than K-12)				
Street Address								rivate and commerc	ial bu	uilding	js,	
City (5)							Square Feet	# of Floors	BI	dg. A	ge	
Camden							varies	varies		50+		
County (6)				Cour	nty Code (7)(STATE USE ONLY)	Current Use (Pr	ior if being demolish	ned)			
CAMDEN							HOUSING [DEEMED UNSAFI	E			
Name of Monitoring Firm Hir		Owner (8)	ASCM	No.	Name of Abateme	ent Contractor (9)					100
Health and Safety Serv	vices			117		Controlled E	nvironmental	Systems				
Street Address						Street Address						
PO Box 365						1121 N. Bethl	ehem Pike - S	uite 60				
-City, State, Zip Code						City, State, Zip Co	ode					
Berlin, NJ 08009						Spring House	e, PA 19477					
Project Manager for Monitori	ng Firm		1	phone		Telephone No.		License No.				80.00
Jim Proctor			1000		39-2432	215 542 7000		00847				
Start Date (10) 4 / 4 /			85	tion Da	23 S	Name of OSHA M	onitor					
Occupancy Status During Ab												
☐ Facility Closed/Vacated D				ment		Street Address	ehem Pike -Su	ita 60				
☐ Abatement Performed Ou	tside of Normal	Facility	Hou	rs - Des	cribe	City, State, Zip Co		iite oo			_	
Time of Abatement: 7:00	AM- <u>5:00</u> PM/_	PN	l	AM		Spring House						
Scope of Work (Check all that	it apply)					□ Eull Cont	oinmont with No	nativa Drassius				
≥3 sf or ≥3 lf		☐ Rei	novat	ion		☐ Mini-Encl	ainment with Ne osure	gative Pressure				
≥160 sf or ≥260 lf		□ Deli	moliti	on		☐ Glovebag	Procedure					
		l la	1		1	☑ Non-Exe	mpted (*) and No	n-Friable Procedure	1			
Location of		69.59	Loca Iorma			Description o	f		Ab	_	ent T	
Asbestos-Containing Mat	erial (ACM)			ely by	Asbe	stos Containing Ma		Amount	Rer	Repair	Enc	Enclosure
TO BE ABATEI IN Facility	2		ntena odial	ince/ Staff?	(i.e	., thermal systems i		(Specify	Removal	a:	aps	losu
(13)			(12)			surfacing, VAT, other miscellane		SF or LF)	<u>m</u>		Encapsulate	Гe
		Yes	No	N/A							æ	
SEE ATTACHED					SEE AT	TACHED		200 YD per res				
									П		П	П
	142											
				+=								닏
Name of Degisters 4344	Lautau						1	f	Ш			
Name of Registered Waste H			1199	IJDEP \ lauler II		Cubic Yards of Waste	Name of Regi	stered Landfill				
Waste Management of	IAN			17273		200/residenc	GROWS					
City, State						Disposal Date	City, State	12/2				
Fairless Hills, PA						5/20/16	Tullytown	PA				
Completed By (Print or Type)	6 00 TOSE					Signature		Dat	е	j	1	
Patricia Visco	C	office I	/lana	ger		Pate	ciel VX	200	31	12	1/	16
ASR-41				-		- 1			- 1		-	_

(Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1)			Mon	an of Duildin	- Oumar/Onaratas /		10011	10	1	11	
	16	15		ity of Cam	g Owner/Operator (den	2)	2016 MAR 2	29	АМ	0	
Agencies Notified Type Notifica	ation		Stre	et Address					717	8: 9	18
⊠ EPA			P	O Box 951	20		A SOESTO & LICI	87	Visit	~	
☑ DOLWD ☐ Amended			City	State, Zip 0	Code		& LICI	FN	LAL	IRE	I
☑ DOH Amendme ☐ DCA ☐ Emergence	CONTRACTOR OF THE PARTY	_ ng	C	amden, N.	J 08101			-11	171	2	
(NJAC 5:23-8) justification		ig	Nan	ne of Contac	t		Telephone Number	er			
☐ Cancellat	ion		J	ohn Bond							
			· F	ACILITY IN	NFORMATION						
Name of Facility Where Abatement is T	aking Pla	ce (3)	Y			Type of Facility	(4)				
ROMONA GONZALES STREET	RESIDE	NCE	S			☐ School (K-1:					
Street Address							8 (Other than K-12) private and commerc	ial bu	ıilding	gs,	
City (5)						Square Feet	# of Floors	TRI	dg. A	ne.	
Camden						varies	varies		50+	gc	
County (6)			Co	unty Code (7)(STATE USE ONLY)		rior if being demolish		-		
CAMDEN						HOUSING I	DEEMED UNSAFI				
Name of Monitoring Firm Hired by Build	ling Owne	r (8)		M No.	Name of Abateme						
Health and Safety Services	1172		11	7		nvironmental	Systems				
Street Address					Street Address		77.47				
PO Box 365						lehem Pike - S	Suite 60				
City, State, Zip Code					City, State, Zip Co						
Berlin, NJ 08009					Spring House	e, PA 19477					
Project Manager for Monitoring Firm		T	elephor		Telephone No.		License No.				
Jim Proctor			25/3/20/22/5	839-2432	215 542 7000		00847				
Start Date (10) S	scheduled 5			16 16	Name of OSHA M	Ionitor					
Occupancy Status During Abatement (0	Check only	one)			Street Address						
☐ Facility Closed/Vacated During Entir						ehem Pike -Su	iite 60				
☐ Abatement Performed Outside of No	rmal Faci	lity Ho	ours - D	escribe	City, State, Zip Co						
Time of Abatement: 7:00AM-5:00P	PM/	PM	AM		Spring House						
Scope of Work (Check all that apply)					□ Full Cont	tainment with Ne	gative Pressure				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 		Renov Demoi			☐ Mini-Enc ☐ Gloveba	losure g Procedure					
		ا ما	ation		⊠ Non-Exe	mpted (*) and No	on-Friable Procedure	-			100000
Location of			cation nally		Description of	.f		-	T	ent T	ype
Asbestos-Containing Material (ACM			olely by	Asbe	estos Containing Ma		Amount	Removal	Repair	Enc	Enclosure
TO BE ABATED			nance/ al Staff	, (i.e	e., thermal systems		(Specify	VOU	a e	aps	losu
IN Facility (13)			2)		surfacing, VAT other miscellane		SF or LF)	3		Encapsulate	Гe
	Ye	s N	lo N/	Ą						е	
SEE ATTACHED				SEE A	TTACHED		200 YD per res	\boxtimes			
1970/110-2-01-1-1-2-2-1					Ta Ta			П	П	П	
Name of Registered Waste Hauler		1		P Waste	Cubic Yards of	Name of Regi	stered Landfill				1_
Waste Management of NJ			7.202.30	ID No.	Waste 200/residenc	GROWS					
City, State					Disposal Date	City, State					
Fairless Hills, PA					5/20/16	Tullytown	PA				
Completed By (Print or Type) Patricia Visco	Title Office	e Mai	nager		Signature	icia []	Ja a Dat	e.	75	11.	
ASB-41					J. cerce		W-e	4	27	16	

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 5:16)

			,						' CI	MCKAL	- 1	02	16	0
Date of Notification (1)				N			- C-11000	ner/Operator (2						
	/	16			City	of Cam	den		2016 H	P 20 64 0				
Agencies Notified	Type Notifica	ation		8	Street	Address			2010 11;	IR 29 AM 8: 1	18		100	_
					PO	Box 951	20		A	to.				
☑ DOLWD	☐ Amended	14.54.50		C	City, S	State, Zip (Code		74 5	CLUS CONTRI	II		-	
☑ DOH □ DCA	Amendme		ina		Car	nden, NJ	J 0810	01	α.	LICENSING				
(NJAC 5:23-8)	justification		ıı ıg	N	lame	of Contac	ct			Telephone Number	er			
	☐ Cancellat	ion			Joh	n Bond								
					FAG	CILITY IN	VFOR	MATION		***************************************				
Name of Facility Where			ce (3))					Type of Facility					
SPRUCE STREET I	RESIDENCE								School (K-12	2) 8 (Other than K-12)				
Street Address									Other (i.e., p	rivate and commerc	ial bu	ilding	JS,	
City (5)		100000000000000000000000000000000000000							homes, etc.	# of Floors	DI	da A	20	
Camden									varies	varies	- 1	dg. A 50+	ge	
County (6)				-	Cour	ity Code (7	7)(STAT	TE USE ONLY)		rior if being demolish				-
CAMDEN							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,		DEEMED UNSAFE	70			
Name of Monitoring Firm	Hired by Build	ding Owne	er (8)	AS	SCM	No.	Nam	ne of Abateme	ent Contractor (9))				
Health and Safety S	Services				117		C	ontrolled Er	nvironmental	Systems				
Street Address							Stre	et Address			Annie		-	
PO Box 365							11	121 N. Bethl	lehem Pike - S	uite 60				
City, State, Zip Code	4						City	, State, Zip Co	ode	- Water Control				
Berlin, NJ 08009							S	pring House	e, PA 19477					
Project Manager for Mon	itoring Firm		T	eleph	none	No.	Tele	phone No.		License No.				
Jim Proctor				C 6	09-8	39-2432	21	15 542 7000		00847				
Start Date (10)	1400000	Scheduled					100000	ne of OSHA M	lonitor					
4//		5			- / -	16	C	ES						
Occupancy Status During							100000000000000000000000000000000000000	et Address						
 ☐ Facility Closed/Vacate ☐ Abatement Performed 									ehem Pike -Su	ite 60				
Time of Abatement: 7	1:00AM-5:00P	PM/	PM	ours -	- Des AM	cribe		, State, Zip Co						
Scope of Work (Check al	Il that apply)						3	pring House	e, PA 19477			-		
	,,,,								ainment with Ne	gative Pressure				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			Renov Demo		1			☐ Mini-Encl	losure g Procedure					
			3 113					Non-Exer Non-Exer	mpted (*) and No	n-Friable Procedure	;			
				cation							Ab	atem	ent T	уре
Location Asbestos-Containing		, lu	sed S	mally Solely		Asha	etoe C	Description of Containing Mar		Amount	Re	Re	Ē	m
TO BE ABA	ATED	1	/lainte			(i.e	e., ther	mal systems i	insulation,	(Specify	Removal	Repair	cap	clos
IN Facili (13)	ity		ustodi 1)	iai Sta 12)	аπ?	500		urfacing, VAT,		SF or LF)	/al		Encapsulate	Enclosure
(13)		Ye			N/A	1	Oth	er miscellane	ous)				te	
SEE ATTACHED		\neg				SEE AT	TTAC	HED		200 YD per res				
				5 10							=	-		
				_	_									屵
Name of Registered Was	to Haular					Masta	T C h	ic Yards of	No	†	Ш	Ш	Ш	
Waste Managemen				Нац	ıler IE	Naste D No.	Was	ste -	Name of Regis	stered Landfill				
City, State				1	7273	3		00/residenc					-0-12	
Fairless Hills, PA								20/16	City, State Tullytown	PA				
Completed By (Print or T	vpe)	Title					1	Signature		Date	9	,		
Patricia Visco	2 HT/	Office	e Mai	nage	er			Vat	1	40	= Z /-	7.1	/ 1) 1
		1500000		3	69		- 1	70110	ecel V	WYC	11	24	16	6

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 5:16)

	*****								. (· W	10Ch H	1,		' 1-	٦
Date of Notification (1)	24 /	16				of Building of Camo		ner/Operator (2	20		R 29 AM 8	L!			
Agencies Notified	Type Notificat	tion			Street	Address				1174	729 AM 8	1.0	_		
⊠ EPA	☐ Initial	uon				Box 9512	20		4 5	Fo	TOS CONTI	48			
□ DOLWD	☐ Amended					state, Zip C				31	INS CONT.	n.	-		72,570
⊠ DOH	Amendme					nden, NJ		01		~ [LEMSING!	UL			
DCA	☐ Emergenc justificatio		cluding			of Contact		-		T	Telephone Numb	er			
(NJAC 5:23-8)	☐ Cancellation					n Bond				,	Tolophone Traini				
	- Carroonati	-					FOD	BEATION		1				-	
Name of Facility When	Ab -4	-1-1	Disease		FAC	CILITY IN	FOR	MATION	T Fac	alliha (A	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				
Name of Facility Where		aking	Place	(3)					Type of Fac)				
MARION STREET	KESIDENCE										(Other than K-12				
Street Address											ate and commer	cial bu	uilding	js,	
Oit (E)		_							homes,		# of Floors	T D	da A		
City (5) Camden									Square Fee	#L	varies	1.00	dg. A 50+	ye	
					T C = 11	tu Cada /7	VCTA:	TE USE ONLY)		o /Drio	r if being demolis		30+		
County (6)					Coun	ity Code (/	NOTA	IE USE UNLT)			EMED UNSAF				
Name of Monitoring Firm	a Uisaal bu Duilal	inn O		0)]	ASCM	Na	Non	ne of Abateme			LIVIED UNSAI	_			
Health and Safety		ing O	wilei (0)	117	NO.		ontrolled Er			eteme				
Street Address	Services				117			et Address	ivitotilileti	ital Sy	Stellis				-
PO Box 365							100000	121 N. Bethl	ohom Dika	. 911	ite 60				
City, State, Zip Code				-				, State, Zip Co		, - Ju	116 00				
Berlin, NJ 08009							1000000	pring House		7					
	nitorina Firm			Tak	ephone	No		ephone No.	, FA 1341		License No.			5.70%	AT-1-0
Project Manager for Mor	intornig Firm			1 465	•	39-2432	6970	15 542 7000			00847				
Start Date (10)	Te	chad	ulad C	1000	etion Da			ne of OSHA M			00047				
4 / 4 /				890.) /			ES	ornicor						
Occupancy Status Durin	() THE SELECTION OF SERVICE SERVICES AND							eet Address 121 N Bethle	alaana Dilaa	C!4	- 00				
 ☑ Facility Closed/Vaca ☑ Abatement Performe 						cribe				-Suit	e 60				
Time of Abatement:						OTIDO	1 85	, State, Zip Co		7					
Scope of Work (Check a	all that apply						3	pring House	e, PA 1947	1			-		
Scope of Work (Check a	ан тпат арріу)							☐ Full Cont	ainment witl	h Nega	ative Pressure				
≥3 sf or ≥3 lf			Re					☐ Mini-Enc	losure	(622)					
≥160 sf or ≥260 lf			⊠ De	moliti	on			☐ Glovebag			-Friable Procedu	re			
		S-557515	İs	Loca	tion	1				T			oatem	ent T	vpe
Location	n of		1	Norm:	ally			Description o	f				-	1	
Asbestos-Containing)			ely by ance/			Containing Ma			Amount	Removal	Repair	Encapsulate	Enclosure
TO BE AB					Staff?	(I.e		rmal systems surfacing, VAT			(Specify SF or LF)	ova	=	nsd	unsc
(13)				(12)	4		her miscellane			,	-		late	Œ.
			Yes	No	N/A										
SEE ATTACHED			SEE AT	TAC	CHED			200 YD per res							
	П							*	П	П	П	П			
				-	_							+=	1		
				Ш								14	Ш		
											τ				
Name of Registered Wa	aste Hauler				NJDEP		2.90 STREET	oic Yards of			ered Landfill				
Waste Manageme	nt of NJ				Hauler I 1727		Wa 2	ste 00/residenc	GROV	VS					
City, State								posal Date	City, Stat	е					
Fairless Hills, PA							5	/20/16	Tullyte	own F	PA				
Completed By (Print or	Type)	Title	9				11.	Signature		1/	D	ate	1	1	-
Patricia Visco		0	ffice	Mana	ager			Wate.	110)(/11	00	3	12.Y	11	4
					192			17 will	100 11	N		- /	- 1	1 4	~

ASB-41 JAN 13

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

CK 71709

\$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100	, mar	-					
1 1	Lan.		3 -		1 .	j.,	
			ice	Ý.	-	F-4	1

Date of Notification (1) 3/24/2016			f Building Owne			FDUCATI	ON 2	016 MA	R 20	0 .	
Agencies Notified Type Notification		Street A	Address			2500,	é .			A	9 8:
EPA Initial Amended			COTT AVEN	UE			20 - 2	& L	Tus	CO	VTHC
DEP X Amended DOL Amendment #	1		ate, Zip Code IARDSVILLE	NJ 079	24			LE L	ILEI	43/1	VG C
Emergency (ir justification)	ncluding	Name o	f Contact		2018-0201		Telenhone !				
DCA Cancellation		500000000000000000000000000000000000000	MCDOUGAL	TION							
Name of Facility Where Abatement is Taking	Place (3)	FAC	ILIT INFORMA	TION	Туре	of Facility (4)				
BERNARDS HIGH SCHOOL Street Address						School (K-12		(10)			
25 OLCOTT AVENUE					Ħ	Other (i.e. pr	3 (Other than k ivate & comme		ildings	, home	es,
City (5) BERNARDSVILLE						etc.) are Feet	# of Floors		Bldg. A	Age	
County (6) SOMERSET			Code (7) USE ONLY)		Curre	ent Use (Prior	r if being demo	olished)			
Name of Monitoring Firm Hired by Building O' ENVIROVISION CONSULTANTS, I		ASCI	M No.			atement Cont	ractor (9) CONTRACT	ING, I	NC.		
Street Address 20-21 WAGARAW ROAD, BLDG 35	SF.				Addre	ss LAND AVE	NUF				
City, State, Zip Code						Zip Code					
FAIR LAWN, NJ 07410				100000000000000000000000000000000000000	Service State of	, NJ 07512	2				
Project Manager for Monitoring Firm FRED LARSON		Telepho 973-9	one No. 49-3525	1. 22	none N -956-		Licens 0049				
I Note that the second	Scheduled 0 3/26/2016		Date (11)			HA Monitor 5 (9) ABOV	/E				
Occupancy Status During Abatement (Check	Only One)			Street	Addre	ss					
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe: Saturday start at 8AM	I Facility Ho	ement urs		City, S	State, Z	Zip Code					
Scope of Work (Check All That Apply)											
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		ovation olition		×	Mi Gl	ni-Enclosure ovebag Proce					
	Is Loc	ation	17.5		_ INC	n-Exempted	(*) and Non-Fi	riable Pi		re emeni	
Location of	Norr	nally		Description	n of				T	ype	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mainte	olely by nance/ al Staff? 2)	Asbestos Co (i.e. therm sur		Materia s insul (T, or	ation,	Amount (Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes N	o N/A								e	TO .
AUDITORIUM	>	(CLOTH C	N WOC	D FF	RAME	34 SF				
			Wrapping	& In Ta	ct Re	moval					
Name of Registered Waste Hauler		NJDEP V	Vaste Cub	ic Yards		Name of P	egistered Land	dfill			
TWO BROTHERS CONTRACTING		Hauler ID 18743		/aste			MANAGEN		G.R.C	D.W.	5.
City, State TOTOWA, NJ			10.0	osal Date 6/2016		City, State MORRIS	SVILLE, PA				
Completed by VIVECA RAMOS	Title PROJE(CT COO	RDINATOR	Signature		IV.	nn	Date 3/24/2	2016		

Check # 10657

Date of Notification (1)	/larch 24, 201	6			of Buildi	ng Own	er / Op	erator	(2)	O I I	50K # 10	1/	4		
Agencies Notified	Type Notifica			Cyril, Street	Address					2016 MED	20		-		
□EPA □DEP	,,,,,				Atlantic /				4	2016 MAR CHESTO & LIC	29 Al 18 ma	1 8:	53		
⊠DOL				City, S	State & Zi	p Code				- 1-1C	ENSIL	TRO	11		
⊠рон	Amer	nded ndment #		Atlant	ic City, N	NJ 0840	01				.c/M	G			
DCA		ellation		Name	of Conta	ct						lephor			er
				Franc	ine Mille	r									12.
				FA	CILITY	INFO	RMA	TION					-		
Name of Facility When Residence	e Abatement	s Taking	Place (3)					of Facil School	S11.00 \$11.00 X		01				
Street Address							1		pter 8 (Other than	n K-12)					
									(i.e., private & c	ommercial	buildings	s, hor	ne, e	etc.)	
City (5)							Squa	re Feet			Bldg	g. Age			
Atlantic City								1,580 ent Use idence	O (Prior if being der	nolished)		5	0 yea	ars	
County (6)			County Cod				Resi	dence							
Atlantic Name of Monitoring Fi	rm Hired by B		VDE ONLY		ASCM	No	Name	of Aha	atement Contracto	or (0)					
N/A		anding O			/100111	140.		tech, In) (9)					
Street Address								t Addres							
City, State & Zip Code							City,	State &	Zip Code		-				
Project Manager for M	onitoring Firm		Te	elephone I	Number		Telep	hone N			ense Num				
Scheduled Start Date (10)	Schedule	d Complet	ion Date (11)		_	96-6910 e of OSI	HA Monitor			0081	7		
April 6, 201	6		Ma	y 6, 2016			Syna	tech, In	ic.						
Occupancy Status Dur Facility Close	d∕Vacated Dui	ing Entire	e Period of		nt			t Addres Radio R							
Abatement Pe		ide of No	rmal Hour	S					Zip Code						
Facility Occup		atement					Little	Egg Ha	arbor, NJ 08087						
Scope of Work (Check															
N									Full Containmer	nt with Negat	tive Press	ure			
≥3 sf or ≥ 50 lf ≥160 sf or ≥260	If		H	Renovation				\bowtie	Mini-Enclosure						
	11			Demonitio	н			H	Glovebag Proce Non-Exempted		Eriabla Dr	ooodu	**		
	tion of		Is Locati	ion Norma	Illy Used			Descript) and Non-	Fliable Fit	_	atem	ent T	Type
Asbestos-Contain	ing Material (A ABATED	ACM)	Solely b	y Mainten	ance or		Asbe	estos-C	ontaining	Amount		1			,,,,
	acility		Cusic	odial Staff	? (12)			faterial (thermal	(ACIVI) I systems	SF o	r LF)				
(1	13)				=		nsulat	ion, surf	facing, VAT			Z.	77	Enc	Ш
							or otn	er misc	ellaneous)	kr 10		Removal	Repair	aps	Enclosure
			Yes	No	N/A							val	air	Encapsulate	ure
Near New Egress Win	dow			Х			Dr	ywall/S	packle	12 S	F	Х	_	Н	-
				х				,	paration			1			
Name of Registered W	aste Hauler		NJDEP \		Cubic \	Yards of	Wast	е	Name of Regis	tered Landfil	I				
Synatech, Inc.				429	< 1				Grows Landfil	I					
City, State					Dispos	al Date			City, State						
Little Egg Harbor, NJ					May 9,	2016			Morrisville, PA						
Completed By		Title			Signati	Iro	. ,	20	T	Date			The Car		
Diane Aloia		Executi	ve Admini	strator	1	lan	e a	lor.	~	March 24, 2	016				

CK 78490

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

RECEIVED

Date of Notification (1) 03/23/2016				Building (erator,	(2)	0.		* 1,000		***	140		
Agencies Notified Type Notification			Street A		5011			21	116 MA	IR 29	ah	0	Pa		
		14.3		mpton.l	Road			,f. :	J~-		nii	0.	う信		
DEP Amended Amendment #				te, Zip Co e, NJ 07			10-10-10-10-10-10-1		& L	TOS ICEN	LUA	TI	ROL		
Emergency (in justification) DCA Cancellation	ncluding		Name of Karl Pe	Contact					Tel	ephone I	Numb	er			
			FACI	LITY INFO	ORMATIO	N		7-34							
Name of Facility Where Abatement is Taking William Patterson University	Place (3)					-	f Facility (
Street Address 300 Pompton Road							Si X	ubchapter ther (i.e. p	8 (Oth			build	lings,	hom	es,
City (5) Wayne, NJ 07470							Square 91,50	Feet		Floors		B 5	ldg. A	ge	
County (6) Passaic				Code (7) ISE ONLY))		Curren	t Use (Pri	or if bei	ng demo	olishe	d)			
Name of Monitoring Firm Hired by Building O TTI Environmental	wner (8)		ASCN N/A	l No.			of Abate	ement Cor nmenta		02. 500					
Street Address 1253 N Church Street						Street	Address								
City, State, Zip Code Moorestown, NJ 08057						City, S	tate, Zip			4000					
Project Manager for Monitoring Firm Jeff Seaman			Telephor	ne No.		Teleph	none No. 349-09		1 11	License					
Section 2 Section 1997	Schedule			Date (11)				A Monitor		286	75				
	07/04/2		piction	Sato (11)			n McR								
Occupancy Status During Abatement (Check	18	35					Address				- Doda				
Facility Closed/Vacated During Entire Package Abatement Performed Outside of Normal	eriod of A	Abatem	ent					dy Blvd.							
Abatement Performed Outside of Normal Other – Describe:	ii i aciiity	riours					tate, Zip onne. N	NJ 07002	2						
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	tenovat emoliti				×	Mini- Glov	Containme Enclosure ebag Prod Exempted	e cedure						
	ls	Locatio	on				1 11011	LXCITIPIC	u () ain	2 14011-1 1	Table		Abate		t
Location of	N	lormall d Solel	y		Desc	cription	of				-			ре	
Asbestos-Containing Material (ACM) TO BE ABATED	Ma	intenan	ice/		tos Conta thermal s					mount Specify		R		E	ш
In Facility (13)	Cust	odial S (12)	taff?		surfaci other mi	ng, VA	T, or			or LF)		Remova	Repair	Encapsulate	Enclosure
(.5)	Yes	No	N/A		outer mi	SUCIIAI	ieous)					val	Ŧ	ulate	ure
1st, 2nd & 3rd Floor	8	X			,	√AT			18	86 SF		Х			
1st, 2nd & 3rd Floor	1st, 2nd & 3rd Floor						9		22	25 SF		X			
1st, 2nd & 3rd Floor	X			C	aulk			3,1	60 SF		Х				
1st, 2nd & 3rd Floor		X		Е	Exterior	Brick	Mastic		1,0	75 SF		X			
Name of Registered Waste Hauler		100	JDEP W auler ID		Cubic Y of Wast			Name of							
ATC			310		30 Yar			Minerva	a Ente	rprises	i				
City, State Shirley, NY 11967					Disposa 04/06/2			City, State Waynes		OH 4	4688	3			
Completed by Ann A. Ali	Title Comp	olianc	e Assis	stant	Sig	gnature		9			Date 03/2		016		
						16	JAN LIEU					_			- (1)



Date of Notification (1)				Name	of Building	Owner/Operator (2)							
3 /	24 /	16		Pete	er Manic		3 3							
Agencies Notified	Type Notification	on		Street	Address			WAI	Z 2	2016				
⊠ EPA	Initial													
□ DOLWD	Amended			City, S	tate, Zip C	ode			- 1-1					
⊠ DOH	Amendment			Atla	ntic City	NJ 08401								
DCA (NJAC 5:23-8)	☐ Emergency justification)		g	Name	of Contact			Telephone Num	ber					
(140/10 0.20 0)	Cancellation			Joe										
				FAC	CILITY IN	FORMATION								
Name of Facility Where A	batement is Tak	king Plac	e (3)	1.42-10.3144	11 10 0 0 0 0	THE PERSON OF TH	Type of Facility	(4)		142				
Manic Residence		3.0					School (K-12							
Street Address							Subchapter	3 (Other than K-1) rivate and comme	2) ercial bu	ildina	5			
							homes, etc.))10iui bu		-,			
City (5)							Square Feet	# of Floors	Blo	lg. Ag	е			
Atlantic City							3,000	3	8	35				
County (6)				Coun	ty Code (7	(STATE USE ONLY)	Current Use (Pr	ior if being demol	ished)					
Atlantic							Residence							
Name of Monitoring Firm	Hired by Buildin	ng Owner	(8)	ASCM	No.	Name of Abatem	ent Contractor (9)							
Synertech, Inc.						Shade Envir	onmental, LLC							
Street Address						Street Address								
228 Moore Street						623 Cutler A	venue							
City, State, Zip Code			-			City, State, Zip C	ode							
Philadelphia, PA 19	148					Maple Shade	e, NJ 08052							
Project Manager for Moni			Tel	ephone	No.	Telephone No.		License No.				-		
Drew McMahon	~		2	215-755-2305 856-755-0099 00842										
Start Date (10)	Sc	heduled	Compl	etion Da	te (11)	Name of OSHA	Monitor							
04/05/	16	_04_	/ _1	9_/	16	EMSL Analy	tical, Inc.							
Occupancy Status During	Abatement (Ch	neck only	one)			Street Address								
□ Facility Closed/Vacate				ement		200 Route 13	30 North							
☐ Abatement Performed	Outside of Nor	mal Faci	ity Hou	irs - Des		City, State, Zip C	ode				100			
Time of Abatement: _	AM	_PM/	PN		AM	Cinnaminso								
Scope of Work (Check all	that apply)					V-70	200	300 NO						
Source has a common of	10 m regist to the 1 th 10 th		FL _ C . 52	·:			tainment with Ne	gative Pressure						
≥3 sf or ≥3 lf≥160 sf or >260 lf			tenova emolit			Gloveba	ag Procedure							
						☐ Non-Ex	empted (*) and No	on-Friable Proced						
			ls Loca					,	Ab	atem	ent T	уре		
Location		U	Norm sed So	ally lely by	Aaba	Description stos Containing M		Amount	Re	Re	En	四.		
Asbestos-Containing I TO BE ABA		I I	lainten	ance/		e, thermal systems		(Specify	Removal	Repair	caps	Enclosure		
IN Facilit		Ci	istodia (12	Staff?	-	surfacing, VA		SF or LF)	<u>a</u>		Encapsulate	ure		
(13)		Ye		1	1	other miscellan	eous)				te			
Throughout					Joint C	ompound and	Sheetrock	2,830 SF			П	П		
Tilloughout					- Oomic O	ompound und	SHOOLIOOK	2,000 0.						
			ᆜᆜ	$\perp \square$										
									\perp					
											Ш			
Name of Registered Was	te Hauler			NJDEP Hauler I		Cubic Yards of Waste		stered Landfill	af:II					
Freehold Cartage				1593		30		nd County Lar	iaiiii					
City, State						Disposal Date	City, State	DA						
Freehold, NJ						04/19/2016	Newburg,							
Completed By (Print or T	ype)	Title				Signature	0		Date		7			
Christina Lynch		Oper	ations	Manag	ger	1 (mx	DON		3/2	14)	114	?		

ASB-41 JAN 13

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

Date of Notification (1) Name of Building Owner/Operator (2) Camden City School District																	
Agencies Notified Type Notification		-	treet Add	iress uth 8th S	treet				N	Kii -	J 2	116					
EPA Initial Amended Amendment #				, Zip Code n NJ 081							7 .7						
Emergency (in justification) DCA Cancellation	cluding	1 33	Name of Contact Steve Nicolella								ımher		400	-			
			FACIL	ITY INFOR	MATIO										_		
Name of Facility Where Abatement is Taking Administration Building Street Address							So	Facility (4 hool (K-12 bchapter 8	2) 3 (Othe	er than K-	12)						
201 North Front Street	1/0	ti	0/			Ì	X Su Ot etc	her (i.e. pr 3.)			cial bu		X83 = ,		i,		
City (5) Camden NJ 08103	Ell v						Square 1000 -	+	9	Floors		Bld 35	g. Ag +	e 			
County (6) Camden			County C	ode (7) SE ONLY)		_	Current	Use (Prio	r if bei	ng demoli	ished)						
Name of Monitoring Firm Hired by Building Or Smithco Engineering Group	wner (8)		ASCM	No.			of Abate	ment Conf	tractor	(9)			1.9				
Street Address					-	Street A	Address										
808 Market Street Suite 336							ox 329					_			-		
City, State, Zip Code Camden NJ 08103						West	Berlin	NJ 080	91		N						
Project Manager for Monitoring Firm Sean Smith		11.0	856-365-9111 856-					ephone No. License No. 00727 ne of OSHA Monitor									
- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	Scheduled 4/3/16	Com	Completion Date (11) Name Sam					A Monitor									
Occupancy Status During Abatement (Check	Only One)				Street A	Address										
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norma Other – Describe:	eriod of Ab al Facility I	atem	ement urs City, State, Zip Code														
Scope of Work (Check All That Apply)							Clean	UP VO	accin	n Alboye	L Ce	The	175				
≥3 sf or ≥3 if ≥160 sf or ≥260 if		novation molition				×	Full Mini Glov	Containme -Enclosure rebag Prod -Exempted	ent with e cedure	n Negativ	e Pres	SUT	ure				
	Τ						11011				T			ment			
Location of Asbestos-Containing Material (ACM) TO BE ABATED	Used	ntenar	ly ly by nce/		os Cont thermal	scription taining M systems cing, VA	Material s insulat		Amount Specify F or LF)		Ren	Ty		Encl			
In Facility (13)		(12)				niscellar	3150 The 300		Ü	. 0. 1.		Removal	Repair	Encapsulate	Enclosure		
	Yes	No	N/A	-1 1	-1-1	م لمعدم	nd lov	ing on		nknown	×			(b)			
4th Floor Clean Up	X		-	glue do				ing on	ur	IKHOWH	-						
8th Floor Clean Up	X								nknown	×							
Out 1 foot Gloan op						f ceilin											
Name of Registered Waste Hauler			JDEP W lauler ID		Cubic of Wa	Yards		Name of			dfill						
United Containers		2459		TBD	244		G.R.O.										
City, State Elm NJ			4/3/1	sal Date	;			A 1906									
Completed by Anthony T Perna	Title Presid	dent	21		(Signatur	e/				Date		/16				

Agencies Notified	tion			reet Address		4	MAR 2	9 2	016	_			
□ DOLWD							£						
□ DHSS Amendme			16 City, State, Zip Code Trenton NJ 08629 ASDESTOS										
DCA Emergence		ng		ame of Conta			-Telephone Num	u rei	3	-			
(NJAC 5:23-8) justificatio ☐ Cancellati			288	Rita Gelli	acı		ber		4.0				
- Curiocilati					INTO DATA TION		-						
Name of Facility Where Abatement is Ta	akina Pla	ce (3)		FACILITY	INFORMATION	Type of Facility (4)						
St Francis Medical Center	aiking r ia	CC (3)	,			School (K-12)	10.50						
Street Address						☐ Subchapter 8	(Other than K-12						
601 Hamilton Ave						Other (i.e., pr homes, etc.)	ivate and commer	rcial b	uildin	gs			
City (5)						Square Feet	# of Floors	P	ldg. A	10			
Trenton						70,000	3		60+	37			
County (6)	77		TC	County Code	(7)(STATE USE ONLY)		or if being demolis	(bed)	00.				
MERCER					(.)(Hospital	o. Il bollig dollions	nicu)					
Name of Monitoring Firm Hired by Build	ng Owne	r (8)	AS	CM No.	Name of Abateme								
Vertex Companies					The same areas and the same and the same as	VIRONMENTAL	INC.						
Street Address					Street Address					_			
700 Turner Way					1123 BEAVE	R STREET							
City, State, Zip Code					City, State, Zip Co	ode				_			
Aston, PA 19014					BRISTOL, PA								
Project Manager for Monitoring Firm		T	elepho	one No.	Telephone No.								
Dave Turotsy			610-	558-8902	215-788-6040	l:	00509						
Start Date (10) So	cheduled	Comp	pletion	Date (11)	Name of OSHA N	lonitor				-			
3 /24 /16	3	/ _	24_	/ _16_	BRISTOL EN	VIRONMENTAL	, INC.						
Occupancy Status During Abatement (C	heck only	one))		Street Address				-				
Facility Closed/Vacated During Entire	Period o	of Aba	atemer	nt	1123 BEAVE	R STREET							
Abatement Performed Outside of Nor Time of Abatement: 7:00AM-3:30PI	mal Faci	lity Ho	ours -	Describe	City, State, Zip Co	ode				_			
	VI/	PIVI-		AIVI	BRISTOL, PA	19007							
Scope of Work (Check all that apply)					M Full Cont	ainment with Nega	ative Pressure		-07				
≥3 sf or ≥3 lf			ation		☐ Mini-Enc	losure	alive Plessure						
☐ ≥160 sf or ≥260 lf		Demol	lition		☐ Glovebag	g Procedure mpted (*) and Non	Eriable Broodu						
		Is Loc	cation			Impled () and Non	- Habie i Tocedui	1	atem	101			
Location of			mally		Description o	f			_	1			
Asbestos-Containing Material (ACM) TO BE ABATED			olely benance	, Ast	estos Containing Ma		Amount	Remova	Repair				
IN Facility	100	stodi	al Staf		e., thermal systems. surfacing, VAT,		(Specify SF or LF)	ova	¥.	1			
(13)			2)		other miscellane		,	-					
	Yes	s N		I/A									
Convent Mechanical Room		ļL			nsulation		20 LF						
Convent Mechanical Room] [] Tank I	nsulation		20 SF	\boxtimes					
Exterior				Pipe			10 LF	\boxtimes		1			
0										1			
Name of Registered Waste Hauler			31,315,300,315	P Waste	Cubic Yards of	Name of Registe	ered Landfill			157			
BRISTOL ENVIRONMENTAL, IN	Э.			er ID No. 706	Waste 1 Cu Yd	G.R.O.W.S.	NORTH LAND	FILL					
City, State			10	, , ,	Disposal Date	City, State				- 3			
BRISTOL, PA 19007					3/16/16	MORRISVIL	LE, PA 19067						
	Title				Signature	0	/ Da	te /	_/	,,			
	Estim	ator			Sinc 1	marin	1.1	te 3/2.	3/1	6			
Gino Pizzigoni	LStill				None 1	1 4 Justin	1-11	1					



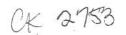
Date of Notification (1) March 14, 2016				FBuilding Ow x County T					1	33	Ü es				
Agencies Notified Type Notification			Street Address MAR 2 5									21	16	200	
☐ EPA ☐ Initial						ıd				ORTHOLOGY.	227. 0		710	14	1
DEP X Amended Amendment		_	City, Sta Sparta	ite, Zip Code ı, NJ)				٠			7 17		4	
□ Emergency (justification)	including	Ī	Name of Rob G	f Contact					Tele	phone l	Num	per	1	147	
DCA Cancellation				LITY INFOR	MATIO	N			1						
Name of Facility Where Abatement is Taking				LITT IN OR	MI CTIO		Туре о	f Facility (4)						
Greenhouse - Sussex County Tech	reet Address							chool (K-12 ubchapter 8		s than k	(12)				
105 North Church Road								ther (i.e. pric.)					dings,	home	es,
City (5)								Feet	# of	Floors		В	ldg. A	ge	
Sparta, NJ County (6)			County (Code (7)			Curren	t Use (Prior	if hain	a dema	liche	(d)			
Sussex				USE ONLY) _		_		nhouse	ii beiii	y dellic	nisnic	u)			
Name of Monitoring Firm Hired by Building (Karl & Associates	Owner (8)		ASCN	No.				ement Control							
Street Address 20 Lauch Road							Address		ue						
City, State, Zip Code				-	- (City, S	235 Watchung Avenue ity, State, Zip Code								
Mohnton, PA 19540 Project Manager for Monitoring Firm			Telepho	ne No.	t Orang	ge, NJ 07	052	Licens	e No						
Michael Krischer			610-85	56-7700	973-669-2900 01231										
Start Date (10) 03/28/2016	03/30/2			Date (11)		A Monitor Laborator	ies G	lobal l	lnc.						
Occupancy Status During Abatement (Chec	k Only On	ne)				Address	ry Street			9					
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm	al Facility	Hour	rs			State, Zip	8			-					
Other - Describe: Greenhouse vacated	during ab	pateme	ent		-	27.00 mm		VA. 2322	20					633-03	
Scope of Work (Check All That Apply)							7		42 100000	200	1022				
≥3 sf or ≥3 if × ≥160 sf or ≥260 if		Renov Demol					Mini-	Containmer Enclosure		Negativ	e Pr	essui	e		
				<u> </u>		×		ebag Proce Exempted		Non-F	riable	Pro	cedur	9	
	1000	Loca											atement Type		
Location of Asbestos-Containing Material (ACM)	Use		ely by	Asbestos		ription		ACM)	An	nount					
TO BE ABATED In Facility		intena todial	ance/ Staff?	(i.e. the		ystems	s insulat		(S	oecify or LF)		Rer	Re	nca	End
(13)		(12)			ther mis				31	OI LF)		Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A									_		ite	Ф
Greenhouse		X			g		1,7	00LF		X					
Name of Registered Waste Hauler	1	NJDEP W	/aste C	Cubic Ya	ards	T	Name of R	egister	ed Land	dfill					
Be Construction Corporation	Hauler ID	No. o	of Waste	9		Tullytow	n Fac	ility							
City, State West Orange, NJ 07052				D	Disposa	l Date		City, State Tullytowi							
Completed by Title Signature Date Barbara Reed President 03/14/20								016							

NOCK

Date of Notification (1)				Name	of Buildin	g Owner/	Operato	r (2)									
March 14, 2016				Sussex County Technical School													
Agencies Notified	Type Notification				Address North Cl	auroh P	ood										
EPA DEP	X Initial Amended				tate, Zip (Joau										
X DOL	Amendmen	t #		Spart		Jude											
X DOH	Emergency justification)			500040000-0000	of Contac	t				Te	lephone !	lumbe	r			_	
DCA	Cancellation			Rob (1 .0							
				FAC	ILITY IN	FORMAT	ION										
Name of Facility Where Greenhouse - Suss	Abatement is Takir	ng Place (3)					Type of Facility (4)									
Street Address	ex County Tec	ninicai S	cnoc)				School (K-12)									
105 North Church F	Road							Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes,									
City (5)								-	etc.)			974.500 11.					
Sparta, NJ								Squa	re Feet	# 0	f Floors		Bld	g. A	lge		
County (6)			- 1	County	Code (7)			Curre	nt Use (Pri	or if hai	na domo	lichod)					
Sussex				(STATE	USE ONL	n			enhouse	or it be	ng demo	listieu)					
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCI	M No.		Name	of Aba	tement Cor	ntractor	(9)						
To Be Determined						1		uction Co									
Street Address	-							Addres								17-5	
Amendment will be	filed according					235	Watch	nung Ave	nue								
City, State, Zip Code			200211				177997051	, State, Zip Code									
D.:								est Orange, NJ 07052 ephone No. License No.									
Project Manager for Mon	itoring Firm			Telepho	ne No.			none No 669-2			License 01231	No.					
Start Date (10)	<u>-</u>	Schodule	od Cor	nnlotion	Date (11)		1000		A Monitor		01231						
03/28/2016		03/30/2		ripietion	Date (11)				Laborato	ries C	Global Ir	nc.					
Occupancy Status During	Abatement (Chec	k Only On	e)					Addres				,,=,					
Facility Closed/Vaca	ited During Entire F	Period of A	baten	nent			2512	W Ca	ary Stree	t							
Abatement Performe	ed Outside of Norm	al Facility	Hours	3					p Code								
		during ab	ateme	nt			Rich	mond	, VA. 232	20							
Scope of Work (Check Al	That Apply)	0,000,000,000					7	_									
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		(Management)	enova						Containme		Negative	Press	ure				
2 100 31 01 2200 11			emolit	ion				Glo	i-Enclosure vebag Proc								
		T			T		×	Nor	n-Exempted	(*) and	Non-Fri	able P	oce	dure			
		1,737,0	Locati										Abatement Type				
Location Asbestos-Containing I			lormal i Sole	ly by De			scription					-	1	1 1	1		
TO BE ABA		Mai	ntenar	nce/		stos Cont . thermal					mount pecify	7			En	Ш	
In Facilit (13)	У	Custo	odial S (12)	ιαπ?		surfac	cing, VA	T, or			or LF)	Remova	1	Renair	caps	Enclosure	
(13)		-				otner m	niscellan	eous)				oval	1	<u>.</u>	Encapsulate	sure	
		Yes	No	N/A											е		
Greenhou	ıse		X			C	aulking	J		1,7	OOLF	X				100	
												T	\top				
									+	-		-					
Name of Registered Waste	e Hauler		N.	JDEP W	aste	Cubic `	Yards		Name of F	Register	ed Landf	ill .					
Be Construction Corp	oration		Ha	auler ID I	No.	of Was			Tullytow	- 355		44/11					
City, State						Dispos	al Date		City, State		7						
West Orange, NJ 070	52								Tullytow								
Completed by		Title Presid				Şi	gnature,	,	_/	1		ate					
Barbara Reed			10	tube	aca	Kee	el	0	3/14/	201	6						

CK 2:153

f ate of Notification (1) 03/24/2016				of Buildin						77			į.		
Agencies Notified Type Notification EPA Initial Pa		of 2	1 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	Address einhard	t Road				MAR	257	2016	1			
DEP Amended Amendmen Emergency	t #2			State, Zip (ne, NJ (ta,			40				
DOH justification Cancellatio	1	ig		Name of Contact Diana C Lobosco Telephone Number											
Name of Facility Where Abatement is Takin	a Dlass	(2)	FA	CILITY IN	FORMAT	ION	T								
Passaic County Tech. Institute B-1 Street Address 45 Reinhardt Road	Ning In	terior	Renov	vations			Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes,								
City (5) Wayne, NJ 07470							etc.) Square Feet 224,200		# of Floors			Bldg. Age			
County (6) Passaic				Code (7)			Current Use (P		g demo	- 1	1070				
Name of Monitoring Firm Hired by Building ABS Environmental Services LLC	Owner (8	3)	ASC	M No.			of Abatement Construction C								
Street Address P. O. Box 483							Address Vatchung Av	enue							
City, State, Zip Code Glenwood, NJ 07418							State, Zip Code st Orange, NJ 07052								
Project Manager for Monitoring Firm Scott Higgins	ggins						one No. 669-2900		License 01231						
Start Date (10) 03/17/2016	04/01/	2016	mpletion	Date (11)			of OSHA Monito eider Labora		obal li	nc.					
Occupancy Status During Abatement (Chec							Address								
Facility Closed/Vacated During Entire R Abatement Performed Outside of Norm Other – Describe: Work area vacant	eriod of al Facilit	Abater y Hour	nent s			City, St	W Cary Stre								
Scope of Work (Check All That Apply)					_	Richn	nond, VA. 23	220							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	(PRESSURE)	Renova Demolit				×	Full Containn Mini-Enclosu Glovebag Pro	re ocedure				ra			
	Is	s Locati	on					Non-Exempted (*) and Non-Friable Proces					t		
Location of Asbestos-Containing Material (ACM)		Normal ed Sole		A - b	Des	scription o	of			-	T	уре	1		
TO BE ABATED In Facility (13)	Ma Cus	intenar todial S (12)	nce/ Staff?	Asbes (i.e.	thermal surfac	aining Ma systems sing, VAT niscellane		(Spe	ount ecify r LF)	Removal	Repair	Encapsulate	Enclosure		
Service Garage NE Area	Yes	No	N/A		-1							Ф			
Room B105		X		1		les w/m		1,28		X					
Plenum Space Above Classrooms		X		Mudda		or Tiles		320		X					
Auto Body Shop		X		iviudue		-	g/pipe Insul	301		X					
Name of Registered Waste Hauler	JDEP W	/aste	Cubic	or Tiles		3S Registered		X							
Be Construction Corporation	Construction Corporation Haule							vn Facili		Ш					
City, State West Orange, NJ 07052							City, Stat								
Completed by Barbara Reed	mpleted by Title						Tullytown, PA Date 03/24/2016								



Date of Notification (1) 03/24/2016				of Building Owner aic County Tec	1, -1		4							
Agencies Notified Type Notification			Street /	Address einhardt Road				1	MAR	2	9 20	16		
DEP X Amended Amendment			City, St	ate, Zip Code e, NJ 07470						71.7	73			
■ Emergency justification) ■ DCA ■ Cancellation		3		of Contact C Lobosco	Te	Telephone Number								
Name of Facility Where Abatement is Takir	a Diago /	2)	FAC	ILITY INFORMAT	ION	T								
Passaic County Tech. Institute B-V Street Address			Renova	ations		Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes								
45 Reinhardt Road						etc.)	e. private	& comm	nercia	i buii	aings	, nom	es,	
City (5) Wayne, NJ 07470						Square Feet 224,200	Feet # of Floors			Bidg. Age 1970				
County (6) Passaic				Code (7) USE ONLY)		Current Use (Prior if be	ing dem	olish	ed)				
Name of Monitoring Firm Hired by Building ABS Environmental Services LLC	lame of Monitoring Firm Hired by Building Owner (8) ABS Environmental Services LLC						Contractor Corpora		*					
Street Address P. O. Box 483						Address Watchung A	venue							
City, State, Zip Code Glenwood, NJ 07418						State, Zip Code st Orange, NJ 07052								
Project Manager for Monitoring Firm Scott Higgins						none No. 669-2900		Licens 0123						
Start Date (10) 03/17/2016	Schedul 04/01/2		mpletion	Date (11)	0.0000000000000000000000000000000000000	of OSHA Monit	70 8 2	Global	Inc.					
Occupancy Status During Abatement (Chec	k Only Or	ne)			Street	Address							_	
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm	eriod of a	Abaten / Hours	ment 2512 W Cary Stree City, State, Zip Code											
Scope of Work (Check All That Apply)					mond, VA. 2	3220								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	BEAUTIFUL STATE OF THE STATE OF	Renova Demolit				Full Contair Mini-Enclos Glovebag P Non-Exemp	ure rocedure					dure		
	12.000	Locati								Abatement				
Location of Asbestos-Containing Material (ACM)	Use	Normal d Sole	ly by		scription				-	13		уре		
TO BE ABATED In Facility (13)	Cust	intenar odial S (12)	Staff?			insulation, Γ, or	(8	mount Specify or LF)		Removal	Repair	Encapsulate	Enclosure	
F-1 /F-1/ P	Yes	No	N/A									(D		
Entrance/Exit Doors		X			Insula		-	4SF	-	X				
Throughout		X			g Insula		-	000LF	-	X				
Bathrooms	X		Pipe	Insulat	ion	11	00LF	-	X					
Name of Registered Waste Hauler	N.	JDEP W	aste Cubic	Yards	Name	of Registe	red Lan	dfill						
Be Construction Corporation	auler ID I 35767	No. of Was			own Fac		- 1111							
City, State West Orange, NJ 07052		Dispos	al Date	City, St Tullyto	ate own, PA									
Completed by Barbara Reed		S	ignature	head	sed .	2	Date 03/2		016					