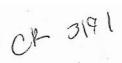
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Date of Notification (1) 4/29/13					of Building ott Burke					20/3	MAV			2.5	
Agencies Notified T	ype Notification			Street A	arding	Ave			· A	591	MAY.	Ph	/() ₁	Gr.	
DEP DOL	Amended Amendmen		_		ate, Zip C Beach C			- 1		E _C	LIGEN		111	· U	
DOH DCA	Emergency justification) Cancellation		Ī	Name o Marke	f Contact tt				**************************************	Te	lephone N	lumber	-	A	
Name of Casilly Manager				FAC	LITY INF	ORMAT	ION	,				÷			
Name of Facility Where Aba Markett Burkett (Priva	atement is Takir ite House)	ig Place (3)						Туре	of Facility (4)					
Street Address 449 Harding Ave					Iş.			×	School (K-1 Subchapter Other (i.e. p etc.)	8 (Oth	ner than K- & comme	-12) rcial bui	ldings	, hom	es,
City (5) Ortly Beach 08751									re Feet	# 0	of Floors		Bldg. A	Age	
County (6) Ocean					Code (7) USE ONL	0		Curre	nt Use (Prid	or if be	ing demol	ished)			
Name of Monitoring Firm Hi N/A	ean e of Monitoring Firm Hired by Building Owner (8) et Address State, Zip Code ect Manager for Monitoring Firm Date (10) O/13 Schedu 5/17/1 Japancy Status During Abatement (Check Only Control of Security Closed/Vacated During Entire Period Of Security Closed/Va							of Aba	tement Con	tracto	(9)				
Street Address		2		-		7.40.	92 FORES	Addres							
City, State, Zip Code									p Code n NJ 080	91					
Project Manager for Monitor	ring Firm		T	Telepho	ne No.		Telepi	none No 753-9	D.		License 00727	No.		-	
Start Date (10) 5/10/13			npletion	Date (11)			of OSH	A Monitor						-2-0	
Occupancy Status During A	batement (Chec	k Only One	4)			-		Addres							
Facility Closed/Vacated	cupancy Status During Abatement (Check Only Or Facility Closed/Vacated During Entire Period of A Abatement Performed Outside of Normal Facility						17		p Code						
Scope of Work (Check All T	hat Apply)			7									-		
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Location of			ocati										Abat	emen /pe	t
Asbestos-Containing Ma TO BE ABATE In Facility (13)	iterial (ACM)	Custo	itenai	nce/	Asbes (i.e	tos Cont thermal surfa	scription taining M systems cing, VA niscellar	faterial s insula T, or	(ACM) tion,	(3	mount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A			9							e	
Exterior Sidi	ng			х		Exte	rior Sic	ding		12	00 SF	x			
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City, State Elm NJ				. 4	Dispos 5/17/	sal Date		City, State Morrisvil		19067					
Completed by Anthony T Perna		Title Presid	ent			s	ignature	e			0.00	ate 1/29/13	: 3	67.7	

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Date of Notification (1) 4/29/13	4			uilding Ow eangelo			ise) (9si	2013 MA	l,		i.e.			
Agencies Notified Type Notification		1	reet Add				d,		7	PHIQU	Ç.			
EPA Initial Amended Amendment				, Zip Code wkin NJ		τ 50		614	E)		i			
■ Emergency justification □ DCA □ Cancellation		10000	ame of C	Contact					Tele	phone Num	ber			
	ni (0)		FACILI	TY INFOR	MATIC		Type of	Facility (4	`			_	11-11-4	-
Name of Facility Where Abatement is Taki Tony Deangelo (Private House)	ng Place (3)						Sc	hool (K-12	2)					
Street Address							Su × Ot	ibchapter & her (i.e. pr	3 (Othe ivate &	r than K-12 commercia) ıl buildi	ngs, l	nomes	3,
113 Jetemale							etc Square		# of	Floors	Blo	lg. Ag	ie	
City (5) Manahawkin NJ 08050					n.		1000		1		35	•		
County (6) Ocean		C (S	ounty Co	ode (7) SE ONLY)		_	Home		r it beir	ng demolish	eu)			
Name of Monitoring Firm Hired by Building N/A	Owner (8)		ASCM	No.			of Abate	ment Cont	tractor	(9)				
Street Address						1000 500	Address ox 329		3 50 g		1	Openia Acta		
City, State, Zip Code			7.80	×		City, St	ate, Zip	Code						
		17	elephon	o No			Berlin one No.	NJ 080	91	License N	0.			
Project Manager for Monitoring Firm						856-7	753-98	00		00727				
Start Date (10) 5/10/13	Scheduled 5/17/13	Com	pletion D	ate (11)		Name Same		A Monitor						
Occupancy Status During Abatement (Ch	eck Only One))				Street	Address	3	4	. 31				·
Facility Closed/Vacated During Entir Abatement Performed Outside of No Other – Describe:	e Period of Ab rmal Facility H	ateme	ent		_	City, S	tate, Zip	Code						
Scope of Work (Check All That Apply)							_	Ť						
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Location of	No	ocationall	y		De	escription	of	enos antigoria			-	13	rpe	Т
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Main Custo	ntenar	nce/	Asbest (i.e.	therma surfa	ntaining Nal system acing, VA miscellar	s insula T, or	(ACM) tion,	(Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A										(D)	
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Name of Registered Waste Hauler			JDEP W		100000000000000000000000000000000000000	c Yards		Name of	Regis	tered Landfi	II			
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City, State Elm NJ					Dispo 5/17	osal Date 7/13		City, Sta Morris		A 19067				
Completed by Anthony T Perna	Title Presid	dent			0	Signatur	el			1,627	ate 1/29/1	3		13)



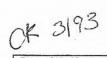
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× DOH	Emergency justification) Cancellation	51 1.7%		Name of Joseph						Tel	ephone Nu	nber	,		
DCA	Cancellation					ORMATIC	N			1 _					
Name of Facility Where Joseph Rao (Priva		g Place (3)		1 AUIL	iri nur c	J.C. J.C.		-	of Facility (4	50					
Street Address									School (K-1) Subchapter		er than K-1	2)			
39 Ruth Dr								100	Other (i.e. petc.)	rivate	& commerc	al build	lings,	home	es,
City (5) Manahawkin NJ 08	8050							Squar 1000	e Feet)	# o	f Floors		ldg. A 5+	ge	
County (6) Ocean	**************************************	***		County C	ode (7) SE ONLY	,		Curre	nt Use (Prid	or if bei	ng demolis	hed)	18		
Name of Monitoring Firm	n Hired by Building	Owner (8)		ASCM	No.	***		of Aba	tement Con	tractor	(9)				
Street Address					•		Street	Addres	ss						
City, State, Zip Code								3ox 32	ip Code			•			
City, State, Zip Code							Wes	t Berli	n NJ 080	91	25.0				
Project Manager for Mo	nitoring Firm			Telephon	e No.			hone N 753-9			License N 00727	lo.			
Start Date (10) 5/10/13		Scheduled 5/17/13		pletion E	Date (11)		Name Sam		A Monitor						
Occupancy Status Durin	ng Abatement (Che	ck Only One)				Street	Addres	SS				-	-	
	cated During Entire ned Outside of Norr				1	_	City, S	State, Z	ip Code						
Scope of Work (Check /	All That Apply)														
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Location	on of	l N	Locati ormali	ly		Des	scription	n of					T	/pe	_
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		Yes	No	N/A	2									ē	(D
Exterior	Siding			x		Exte	rior Si	iding	V.	12	200 SF	×	_		
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Name of Registered Wa	aste Hauler		N	JDEP W	/aste	Cubic	Yards		Name of	Regist	ered Landf	11	-	1	!
United Containers			2000	lauler ID 2459	No.	of Was	ste		G.R.O.	W.S.					
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Completed by Anthony T Perna		Title Presi	dent			S	Signatur	re C	,			ate /29/1	3		
L			£												- 41

CK 3194

Date of Notification (1) 4/29/13				Name o	f Building	Owner (prive	r/Operator ate home	(2) 20	1221						
Agencies Notified	Type Notification	1		Street A	Address				13 MAY	1 PA	l In	,·.			
EPA DEP DOL	Initial Amended Amendmer			City, Sta	ate, Zip C River N	ode		d Section)	1000. 14. 13.		1/100	: <u>'U</u>			
DOH DCA	Emergency justification Cancellatio)		Marty	f Contact						Y		1		
Name of Facility Where	Abatement is Taki	ng Place (3)		FAC	LITY INF	ORMA	TION	Type of Faci	ility (4)			,			
Marty Caffrey (priv	rate home)							School	(K-12)						
683 Bayview (Gree	en island Section	on)						Subcha Other (i etc.)	pter 8 (Or i.e. private	her than & comm	K-12) ercial l	ouilo	lings,	hom	es,
City (5) Toms River NJ 087	753		II.					Square Feet 1000 +	2	of Floors			ldg. <i>A</i> 5+	ge	
County (6) Ocean		17,150			Code (7) USE ONLY)		Current Use Home	(Prior if b	eing dem	olished)			
Name of Monitoring Firm N/A	m Hired by Building	Owner (8)		ASCN	/I No.			of Abatement aco Inc	Contracto	or (9)					
Street Address				-			500000000000000000000000000000000000000	Address Sox 329							
City, State, Zip Code							City, S	tate, Zip Code Berlin NJ (
Project Manager for Mo	nitoring Firm		T	Telepho	ne No.		Teleph	one No. 753-9800	-	Licens					300
Start Date (10) 5/10/13		Schedule 5/17/13		npletion	Date (11)	-		of OSHA Mon	itor						
Occupancy Status Durin	ng Abatement (Che						Address		•						
➤ Facility Closed/Vac	cated During Entire ned Outside of Nor	baten	nent				tate, Zip Code	3							
Scope of Work (Check A	All That Apply)		~				<u> </u>			-		No Proc			-
≥3 sf or ≥3 if ≥160 sf or ≥260 if			enova				×	Full Conta Mini-Enclo Glovebag	sure Procedure	•				_	
		ls l	_ocati	on.				Non-Exem	ipted (*) a	na Non-F	nable i	-		ement	
Locatio		N	ormal Sole	ly		D	escription	of			-	_		ре	
Asbestos-Containing TO BE AB In Faci (13)	BATED llity	Mair Custo	ntenar	nce/	Asbes (i.e.	therm: surf	ntaining M al systems acing, VA miscellan			Amount (Specify F or LF)		Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A										te	Ф
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Name of Registered Wa	ste Hauler		LAI	JDEP W						tion to		1118		, ,	
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City, State Elm NJ		AL INTE	-1	104			osal Date	City, S Morr	State risville P	A 1906	7				
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CHECK # 19376

Date of Notification (1) 04-24-13					of Building Own			7 10,					
Agencies Notified	Type Notification			Street A		- A			CO				
EPA DEP DOL	Initial Amended Amendment		_	+	ate, Zip Code			761 7	4		<i>t</i>		
☑ DOH DCA	Emergency justification) Cancellation				f Contact II Rafferty			Tele	ephone Nu	mber	**		
Name of Facility Where	Abatament in Takin	- Dia (2)		FAC	ILITY INFORM	IATION		_11					
Street Address 20 Whippany Road	· · · · · · · · · · · · · · · · · · ·	g Flace (3)				y 43	Type of Facility School (K-Subchapte Other (i.e. etc.)	12) r 8 (Othe	er than K-1 & commerc	2) ial bui	ldings	s, hom	nes,
City (5) Morristown	W				A., 8		Square Feet	# of	Floors		Bldg. 20 yr		
County (6) Morris				County (STATE	Code (7) USE ONLY)		Current Use (Pri Commercial	or if bein	ng demolis	hed)			
Name of Monitoring Fire Detail Associates	m Hired by Building (Owner (8)		ASCN 0001			of Abatement Cor acle Environm						
Street Address 300 Grand Avenue)						Address Broad Street						
City, State, Zip Code Englewood, NJ 07	631-4355	9					state, Zip Code stadt, NJ 0707	2					
Project Manager for Mo Stephen A. Jaracz				Telepho (201) 5	ne No. 569-6708	10.00	none No. 939-6565		License N 00756	lo.			
Start Date (10) 05-06-13		Scheduled 05-20-1		npletion	Date (11)		of OSHA Monitor I-Air Inc.	**	-				
Occupancy Status Durin	ng Abatement (Checi	c Only One	2)				Address			-	-		
Facility Closed/Vac Abatement Perform Other – Describe:	cated During Entire F ned Outside of Norm Area is vacant	eriod of Al al Facility l	batem Hours	ent -		City, S	9 Jackson Ave tate, Zip Code						
Scope of Work (Check A						Long	Island City, N	Y 1110	01		- 11		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		- president	enova			×	Full Containme Mini-Enclosure Glovebag Prod Non-Exempted	e cedure				е	×
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2nd Floor: East Wi	•			X		Pipe Fittin	1 1 1 1 1 1		20	х		, .	
1st Floor: Ea	ast wing			X		Pipe Fitting	gs	2	20	х			
Name of Registered War ATC, Inc. / JBT (500			Ha	JDEP Wa auler ID I		oic Yards Vaste	Name of F Minerva						
City, State Shirley, NY / Bronx,	NY		-	10.0	Dis TB	posal Date	City State		OH 4468	8			
Completed by John Tancredi		Title Project	t Ma	nager	- L	Signature	UL		Dat	12.00	3		



Agencies Notified Type Notification	Date of Notification (1) 4/29/13				Name of			perator	(2)	2	1813 M	Δv			Ť.	- 1
Separation County Code (7) County Code (7)		Type Notification					capes		-	. A	* 64	11-1	1300	<u>.</u>		
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Some of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) Step 1000 Subchapter 8 (Other than K-12) Step 1000 Subchapter 8 (Other than K-12) Step 1000 Step		Amendment	#					57			ea L	luen.	1110	70		1
Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) Street Address Subchapter 9 (Subchapter		justification)		- 1		Contact			111-2000-0-12-0		Tele	ephone N	umber	l h	7,9 1200	
Farm House / Mt Laurel TWP Street Address School (K-12) Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, home etc.) Other home of Monton etc.) Other home of Monton etc.) Other home of Monton etc. Other home of Monton etc.) Other home of Monton etc. Other home of Monto					FACIL	ITY INFO	DRMATI	ON						_		-
Street Address			ig Place (3)		¥				PROPERTY		SEEST TO SEE SEE SEEST TO SEE SEEST TO SEE SEE SEE SEE SEE SEE SEE SEE SEE SE					
Square Feet		<u> </u>								Subchapter Other (i.e. p	8 (Othe			lding	s, ho	mes,
Burlington		1		1					Squar	e Feet	3750	Floors	7.93		Age	
N/A Street Address City, State, Zip Code West Berlin NJ 08091 Project Manager for Monitoring Firm Telephone No. Scheduled Completion Date (11) Scheduled Completion Date (11) Some of OSHA Monitor Same Cocupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code City, State, Zip Code City, State, Zip Code Full Containment with Negative Pressure Mini-Enclosure Glovedag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-										0.5	or if beir	ng demoli	shed)			
Street Address		Hired by Building	Owner (8)		ASCM	No.					tractor	(9)				
City, State, Zip Code West Berlin NJ 08091 Project Manager for Monitoring Firm Telephone No. Start Date (10) 5/10/13 Scheduled Completion Date (11) 5/17/13 Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other – Describe: Scope of Work (Check All That Apply) ≥ 3 sf or ≥3 lf ≥ 160 sf or ≥260 lf Location of Asbestos-Containing Material (ACM) 10 BE ABATED In Facility (13) Near Of OSHA Monitor Street Address Street Address Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Specific Custodial Staff? (12) Yes No N/A Near Chimney Black roof Flashing 10 lf x II containing Material (ACM) (Specify SF or LF) Region Abatement Type Black roof Flashing 10 lf x Black roof Flashing 10 lf x	01927/C403;				1									27.00	-	
Project Manager for Monitoring Firm	١.															
Start Date (10) 5/10/13 Scheduled Completion Date (11) 5/17/13 Same Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other – Describe: Scope of Work (Check All That Apply) ≥ 3 sf or ≥3 if ≥ 160 sf or ≥260 if Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Kitchen Kitchen Kitchen Near Chimney Scheduled Completion Date (11) Scheduled Completion Date (11) Same Street Address City, State, Zip Code City, State, Zip Code Street Address City, State, Zip Code City, State, Zip Code City, State, Zip Code City, State, Zip Code Street Address City, State, Zip Code City, Stat	City, State, Zip Code		1/1								91					
Same Street Address Street Addres	Project Manager for Mor	nitoring Firm			Telephor	ne No.							No.			
Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other – Describe: Scope of Work (Check All That Apply)				Cor	npletion [Date (11)				A Monitor		*) *)				
Abatement Performed Outside of Normal Facility Hours Other − Describe: Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Renovation Demolition Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Type Abatement Type Abatement Type Abatement Type Asbestos-Containing Material (ACM) In Facility (13) Yes No N/A Kitchen X Floor Tile 150 Sf x Near Chimney Black roof Flashing It Location of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Black roof Flashing It Location of Abatement Type Abatement Type Black roof Flashing	Occupancy Status Durin	g Abatement (Che	ck Only One)		4		Street	Addres	s i			30			
≥3 sf or ≥3 lf	Abatement Perform	ed Outside of Norr					_	City, S	tate, Zi	p Code					2	
≥160 sf or ≥260 lf	Scope of Work (Check A	II That Apply)		-				10								
S Location of Asbestos-Containing Material (ACM) See Solely by Maintenance/ Custodial Staff? (12) Yes No N/A			Secretary.					×	Min Glo	i-Enclosure vebag Prod	e cedure			*10 0	uro	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Yes No N/A Kitchen X Floor Tile 150 Sf x Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Black roof Flashing 10 lf x			Т.,		. 1				2 1401	PEXEMPLE	1 () aire	I NOTE III	DIE FT	EXX		ent
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Yes No N/A Kitchen X Floor Tile Near Chimney Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) For LF Republic	Location	n of					Do	oorintion	of							
Kitchen x Floor Tile 150 Sf x Near Chimney Black roof Flashing 10 lf x	Asbestos-Containing <u>TO BE AB</u> In Faci	Material (ACM) ATED lity	Main Custo	tena dial s	nce/ Staff?		tos Con thermal surfa	taining M systems cing, VA	faterial s insula T, or		(8	pecify	Remova	Veball	nicapsula	Enclosure
Near Chimney Black roof Flashing 10 lf x			Yes	No	N/A										ā	
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windows Glazing 47 windows x				A		1								L		
	windo	ws					(Glazing			47 w	vindows	x	1		-
Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste	The state of the s	ste Hauler		100			-0.021000000			CHROSOMORAC ASSESS		red Land	fill	_		L.
United Containers 22459 4 G.R.O.W.S.			7 14	100		Telephone Num Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12 Subchapter 8 (Other than K-12 Subchapter 8 (Other than K-12 Other (i.e. private & commercial etc.) Square Feet 1000 + 2 Corrent Use (Prior if being demolish Home M No. Name of Abatement Contractor (9) Pernaco Inc Street Address PO Box 329 City, State, Zip Code West Berlin NJ 08091 Telephone No. 856-753-9800 Date (11) Name of OSHA Monitor Same Street Address City, State, Zip Code West Berlin NJ 08091 Telephone No. 856-753-9800 Date (11) Name of OSHA Monitor Same Street Address City, State, Zip Code Full Containment with Negative Fount-Exempted (*) and Non-Friab Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Floor Tile 150 Sf Black roof Flashing 10 If Glazing 47 windows Vaste Of Waste 4 Disposal Date 5/17/13 Name of Registered Landfill G.R.O.W.S. Disposal Date 5/17/13 Signature									+	
												19067				
Completed by Title Signature, Date 4/29/13				ent			8	Signature	"e					3		

Date of Notification (1)	1/12			Name	e of Buildir	g Owner/Operato	or (2) Alison Saund	ders 20/3 MAY	,			65
Agencies Notified	1/13 Type Notification			Stree	t Address		Alison Saulic	1012	~/_	179	//	
EPA DEP	☑ Initial						80 Linden La	ane	,	.,,	11/	<u> </u>
DEP	Amended Amendment #	£		City,	State, Zip (1.75	1.		,
	☐ Emergency (in		g				rinceton, NJ (* 44	11	17	_
DOH DCA	justification) Cancellation			Name	of Contac			Telephono Num	har			
						Irs. Saunders						<u>:</u>
None of Facility Maria	balanca (C. T. C.	- D'-	- /2\	FA	CILITY INF	ORMATION	T Time of Facility	74)				
Name of Facility Where A		g Place idenc	0.5				Type of Facility					
Street Address	80 Lin						Other (i.e., p	8 (Other than K-1 rivate & commerc		dings		
City (5)	OU LIII	dell	Jane				homes, etc.	# of Floors	ГВ	ldg. A	Age	
7	Princetor	, NJ	085	42			2500	2		_	30	
County (6)	7 7 7 8			Cou		7) (STATE		rior if being demol	ished)			
Total Control	ercer			USE	ONLY)			Residence				
Name of Monitoring Firm I	- 1년, 1월 1일 (1일 1일) - 1일 (1일 1일 1	Owner		ASCM	No.	527	ment Contractor (9					
	MECS						vens Environr	nental Servic	es, Ir	ıc.		_
Street Address	DO D 34	1		17		Street Address		222		- Contract		
City State 7% Code	PO Box 34	1		-		City Ct-t- 7: /		322 Sox 322			-	_
City, State, Zip Code	sswicks, NJ	0851	5			City, State, Zip		n, NJ 08501				
Project Manager for Monit		0001.	N. S. Company	phone	No.	Telephone No.	2 Michie	License No.	=-51-77			_
William Wei			1 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		8-4070	[1]	59-9688		0049	3		
Start Date (10)		duled C	_			Name of OSHA						_
5/31/13			6/7/1	W			M	ECS				
Occupancy Status During	Abatement (Che					Street Address	-					
Facility Closed/Vacated								341				_
Abatement Performed Other - Describe: 8	<u>AM - 4:30PM</u>		y Hou	rs		City, State, Zip (cs, NJ 08515				
Scope of Work (Check all ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	that apply)		enovati emolitic			☐ Mini-En	ntainment with Neg closure ag Procedure cempted (*) and No		ıre			
			Locatio								ment	
Location of			ormally I Solel		-	Description o	ıf .			Ту	oe -	_
Asbestos-Containing Ma TO BE ABATE IN Facility (13)	aterial (ACM)	Mair Cu	ntenan ustodia Staff? (12)	ce/		os Containing Ma thermal systems surfacing, VAT other miscellane	terial (ACM) insulation, , or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A		a (41 m/25)					Ф	
Basemen	nt			×	The	ermal Pipe In	sulation	80 lf	×			
				×								
Name of Registered Waste	e Hauler			JDEP \		Cubic Yards	Name of Regis	stered Landfill				
Stevens Environm	ental Service	s Inc.	_ "	auler IE	90. No. 1	of Waste		T.R.R.F., I	nc.	- 11		- 65
City, State	Allentown, N	IJ		2011 		Disposal Date 6/7/13	City, State	Tullytown,	PA			
Completed By Mahlon E. Stev	rens		oject	Man	ager	Signature		Date	5/1.	/13	12	

ASB-41 MAR 00

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

1304-4632 Check #5194

Date of Notification	(±) 4/29/13					uilding (Owner / Operator	r (2) 2	013 MAY -!				
Agencies Notified EPA	Type Notific	ation		Stree	t Add	ress	ge Ave.	6.		P# 11.	160	ı	
DEP	☐ Initia	l				& Zip C		*	45 7 1 2 2 2	10 mm 10 mm			
DOL		nded #					NJ 07079				\mathcal{O}_{L}		
☑ DOH	☐ Eme	rgency				ontact			I-	relenho	ne N	ıımb	er
☐ DCA	☐ Cand	cellation		Mich	nael I	Marcor	ni				-		
				FΔ	CILI	TY INF	ORMATION			-2004 (3.000-01030000			
Name of Facility WI	here Abatem	ent is Taking P	lace (3				Type of Facili	ty (4)					
Seton Hall Unive			\				School (F						
Street Address					7		- Install	ter 8 (Other than	AND THE PROPERTY AND ADDRESS OF THE PARTY OF				
400 South Orang	je Ave.							e. private & comr	A SECURIO DE LA COMPANSIONA DE LA CONTRA DEL CONTRA DE LA CONTRA DE LA CONTRA DEL CONTRA DE LA CONTRA DEL CONTRA DE LA CONTRA DEL CONTRA DE LA CONTRA DEL CONTRA DE LA CONTRA			tc.)	
				4			Square Feet	# of Floor	s B	lldg. Ag			
City (5)		County (6)	Co	unty	Code	(7)	10,000		2		90		-0.00
South Orange		Essex						Prior if being de	molished)				
						-	University						
Name of Monitoring		y Building Ow	ner (8)		AS	CM No.		tement Contract					
Omega Environn	nental						AbateTech, Street Addres		00529		_		
Street Address 280 Huyler Stree	•						PO Box 25	55					
City, State & Zip Co				_			City, State & 2	7ip Code					
South Hackensa		06					Lumberton,						
	oject Manager for Monitoring Firm eiser Fajardo heduled Start Date (10) Scheduled Cor 5/10/13					nber	Telephone Nu		License N	lumber			
Geiser Fajardo	cheduled Start Date (10) 5/10/13 Ccupancy Status During Abatement (Check of						609-265-210)7		0052	29		
[cheduled Start Date (10) Scheduled Cor 5/10/13 Scheduled Cor ccupancy Status During Abatement (Check of Facility Closed/Vacated During Entire F					1)	Name of OSH						
	cheduled Start Date (10) 5/10/13 Ccupancy Status During Abatement (Check of Facility Closed/Vacated During Entire F						EMSL Analy						
	cheduled Start Date (10) 5/10/13 Cccupancy Status During Abatement (Check of Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm					ont	Street Addres						
	5/10/13 ccupancy Status During Abatement (Check o Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm					ent	City, State & 2				100	- 14	
	cheduled Start Date (10) 5/10/13 Ccupancy Status During Abatement (Check of Facility Closed/Vacated During Entire F						Westmont,	A service and the service and					
	Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Describe: 5 PM Start						westinoni,	143 00 100					
		A STATE OF THE STA		-		-							
	#. # 10 . # 11 . # 15 min 1 . 15 min	FF-77							ainment with N	legative	Pres	sure	•
≥3 sf or ≥3 l	lf		\boxtimes		novat			Mini-Encl					
≥160 sf ≥26	O If			De	moliti	on			g Procedures		_		
									npted and Nor				
	ocation of			Loca	tion Used		Description Asbestos-Conf		Amount (Specify	Aba	atem	ent i	уре
	tos-Containir terial (ACM)	ig		olely			Material (A		SF or LF)	5056		m	
	BE ABATED				nce o	r	(i.e., thermal sy	ystems		Ren	ᇛ	nca	no
i	n Facility		Cust		Staff	?	insulation, surfac			Removal	Repair	Encapsula	Enclosure
	(13)		Yes	(12) No	N/A		or other miscella	aneous)		<u>n</u>		ate	6
			Tes	NO			Flooritie 9 8	54i-	75.05			П	
Room 119			H	님			Floor tile & N		75 SF 100 SF		H	H	H
Room 111	September		H	H			Floor tile ot it	nastic	100 31		H	H	H
		4.1		H	H	-	10 0			H	H	H	H
			H	H						H	H	H	H
-	7.0		H	H							H	Ħ	Ħ
Name of Registered	d Waste Hau	ler	1	N.	JDEP	Waste	Cubic Yards	Name of Regis	tered Landfill				
				H		ID No.	of Waste						
AbateTech, Inc.					187	750	6	TRRF Landfi	ll				
City, State				100	14.14.0		Disposal Date	City, State					
Lumberton, NJ							5/12/13	Tullytown, P.	A	TE	-10-10-20		
Completed By (Prin					tle		Signature	\cap		Date	140	3.0	
Gwen Trumbe	etti			100	ffice			1 /		4/29	113		
				C	oord	1.	TVO				-11		

Date of Notification (1)			Name	of Buildi	ng Owner/Operator	(2) 2017 M.		7.20			
	13		NJ	DEP			4635 Check #5	193			
Agencies Notified Type Notifica	ition	-	Stree	t Address		12.2		Ç _O			-
☑ EPA ☑ Initial			275	5 Freeho	ld-Englishtown F	Rd ,		* U			
☑ DOLWD ☐ Amended		- 5	City,	State, Zip	Code	- 72	· CWEST OF SIN	17			
☑ DHSS. Amendment ☐ DCA ☑ Emergence	1.0	- a	En	glishtow	n, NJ 07726		1753				
(NJAC 5:23-8) justification		9	Name	of Conta	ct		Telephone Nun	nber			
☐ Cancellat	ion		Do	nald Del	uca		1	3			
		- weak	FA	CILITY	NFORMATION						
Name of Facility Where Abatement is T	aking Plac	e (3)		71		Type of Facility	5 7				
Drumthwacket	4					School (K-12	2) 8 (Other than K-1:	2)			
Street Address						Other (i.e., p	rivate and comme	z) ercial bu	uilding	as,	
354 Stockton Street						homes, etc.)					
City (5)						Square Feet	# of Floors	BI	dg. A	ge	
Princeton							The second second	-			
County (6)			Cou	nty Code	(7)(STATE USE ONLY)	Current Use (Pr	ior if being demoli	ished)		727.	
Mercer						Office Build	ding				
Name of Monitoring Firm Hired by Build	ling Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)				25	
Environmental Connection, Inc					AbateTech, I	nc.				00	
Street Address		-		Te ret	Street Address						
120 North Warren Street					30 Maple Ave	e. PO Box 25					
City, State, Zip Code	120				City, State, Zip Co	ode					
Trenton, NJ 08608	4.1				Lumberton, I	NJ 08048					
Project Manager for Monitoring Firm		Tele	ephone	No.	Telephone No.		License No.				
Ryan Broadwater		6	09-392	-4200	609-265-2107		00529				
Start Date (10)	cheduled (Comple	tion Da	ate (11)	Name of OSHA M	lonitor	4 "	-			
4////////	5	/1		13	EMSL Analyt	ical					
Occupancy Status During Abatement (0	Check only	one)			Street Address				- 12		
☐ Facility Closed/Vacated During Entir	e Period of	Abate	ment		108 Haddon	Ave.					
Abatement Performed Outside of No					City, State, Zip Co	ode					
Time of Abatement:AM	PM/	PM		_AM	Westmont, N						
Scope of Work (Check all that apply)					Прика	La Caracana de La Maria	-ti - D				
≥3 sf or ≥3 lf	⊠ Re	enovat	ion		⊠ Mini-Enc	tainment with Neg losure	jative Plessure				
☐ ≥160 sf or ≥260 lf		emoliti				g Procedure				ii 6.	e (He
				_	∐ Non-Exe	mpted (*) and No	n-Friable Procedu	-			
		s Loca Norma			D			Ab	_	ent Ty	уре
Location of Asbestos-Containing Material (ACM)		ed Sol		Asb	Description of estos Containing Ma		Amount	Re	Repair	Ē	Enc
TO BE ABATED	IVI	aintena	ince/ Staff?		e., thermal systems	insulation,	(Specify	Remova)air	aps	Enclosure
IN Facility (13)	Cus	(12)	Otalir		surfacing, VAT, other miscellane		SF or LF)	<u>n</u>		Encapsulate	ure
(13)	Yes	No	N/A		Other miscellane	ous)				te	
Mechanical Crawlspace				ACM d	ebris	- 11/1/2	15 SF				
					5 34 315						
					:) . : .		1	$ \Box$	П	П	П
					The second second						
Name of Registered Waste Hauler			JDEP \		Cubic Yards of	Name of Regis	tered Landfill	1-	_	믜	_
AbateTech, Inc.		100	lauler II	D No.	Waste	TRRF Land					
City, State	1 144	_1_	18750)	2 Disposal Date	City, State					
Lumberton, NJ	W. (1)				5/1/13	Tullytown,	PA				
Completed By (Print or Type)	Title				Signature			ate		1111	
Gwendolyn Trumbetti	Operat	ions (Coord	inator	Olgitatule A	ct	, , , , , , , , , , , , , , , , , , ,	4/	29	113	3

ASB-41 MAY 11 * Do not use this form for asbestos licensure exempted activities.

1304-4632 Check #5192

Date of Notification (1) 4/29/13					Owner / Operat	or (2)	70.		-9		
Agencies Notified Type Notification EPA DEP Initial		Stree 400 City,	et Addr South State	ess 1 Ora & Zip	nge Ave. Code			0	,	i	
☑ DOL ☐ Amended # ☑ DOH ☐ Emergency ☑ DCA ☐ Cancellation	1	Nam	th Ora e of Co nael N	ontact			الم	Felepho	one N	lumb	oer
The second secon	_	FA	CILIT	Y IN	FORMATION						
Name of Facility Where Abatement is Taking Seton Hall University- President's Hall Street Address 400 South Orange Ave.		3)		Y		(K-12) pter 8 (Other t	han K-12) ommercial building	gs, hon	nes, e	etc.)	
					Square Feet			ldg. Ag			
City (5) County (6)	Co	unty	Code	(7)	10,00	0	2		90		
South Orange Essex					Current Use University	(Prior if being	demolished)				
Name of Monitoring Firm Hired by Building On Omega Environmental	wner (8)		ASC	CM No	Name of Aba AbateTech	atement Contr , Inc.	actor (9) 00529			4	
Street Address 280 Huyler Street City, State & Zip Code				1,14,527	Street Addre PO Box 25 City, State &	Zip Code					
South Hackensack, NJ 07606					Lumberton		0125912			-	
Project Manager for Monitoring Firm Geiser Fajardo	201-4	189-			Telephone N 609-265-21	07	License N	umber 005	29		
Scheduled Start Date (10) Scheduled Co 5/10/13	ompletio 5/12		ite (11))	Name of OS EMSL Anal						
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire			ateme	nt	Street Addre 108 Haddo						
Abatement Performed Outside of Norn Describe: 5 PM Start	mal Hou	ırs			City, State & Westmont,	- · · · ·					
Facility Occupied During Abatement			11		71.0	1. 1	Term Medical				
Scope of Work (Check all that apply) ≥3 sf or ≥3 lf ≥160 sf ≥260 lf			novatio			Mini-E Glove	ontainment with No nclosure Bag Procedures xempted and Non-				
Location of	ls L	ocat	ion		Description		Amount	Aba			
Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> in Facility (13)	Maint Custo	olely enan			Asbestos-Con Material (A (i.e., thermal s insulation, surfac or other miscell	CM) ystems cing, VAT	(Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
Room 15- Men's Room		П			Pipe Insula	ation	30 LF			П	П
Room 15- Men's Room		H			Pipe Insulation	Water the same of	30 LF	T I	H	H	H
Room 16	THI	Ħ	X		Pipe Insulation		30 LF	T	П	Ħ	Ħ
Room 18		Ī	Ø		Pipe Insulation		30 LF	X	Fi		靣
							C. Linkton				
Name of Registered Waste Hauler			DEP V	No.	of Waste	100	gistered Landfill				
AbateTech, Inc.		4 20	1875	0	10	TRRF Land	ifill			1	
City, State Lumberton, NJ					Disposal Date 5/12/13	City, State Tullytown,	PA		enti- can		
Completed By (Print or Type) Gwen Trumbetti			e fice		Signature	al		Date 4/29	/13		

No check

State of New Jersey 1304-4 NOTIFICATION OF ASBESTOS ABATEMENT Check # (Pursuant to N.J.A.C. 8:60 and 12:120)

1304-4630

Date of Notification	A/29/13 Notified Type Notification Initial						Owner / Operati	tor (2)		Ph		7		
Agencies Notified	7-	cation			t Addre		ersity				11.	-		
⊠ ĘPA	, , , , , , , , , , , , , , , , , , , ,	1					ge Ave.		1.64		110%)	7	
☐ DEP		al			State 8					140,57				
□ DOL	☐ Ame	ended #1		Sout	h Ora	nge, l	NJ 07079			May 1	01			
□ DOH			1	Name	of Co	ntact					Teleph	one N	lumb	or
☐ DCA	☐ Can	cellation	1	Mich	ael M	arcon	i .							
					CILIT	Y INF	ORMATION							
			Place (3	3)			Type of Fac							
Street Address	rsity- Starr	ord Hall					School	112						
reservation appreciation									(Other than K				2 2	
400 South Orang	je Ave.								vate & comme				etc.)	
City (5)		County (6)	10-		Onda /	7\	Square Fee		# of Floors	E	Bldg. Ag			
			JC0	unty	Code (/)	10,00		2			90		0.0340
South Orange		Essex						. 73	if being demo	lished)				
Name of Manitorina	Circo Historia	Duilding O	(0)		1400		University	Commence of the Control of the Contr						
		by Building Ow	mer (8)		ASC	M No.			nt Contractor					
Street Address	iciitai					- 11	AbateTech Street Addre	,		0529			,	-
280 Huyler Street	ŧ						PO Box 25							
City, State & Zip Co					_		City, State 8		ode			-	-	
		06					Lumberton							
	Monitoring F	irm	Telep	hone	Numb	en	Telephone N			License N	umber			
Geiser Fajardo			973-7			/	609-265-21	107			005	29		
Scheduled Start Da	te (10)	Scheduled Co	mpletio 5/16		te (11)		Name of OS							
	5/6/13 cupancy Status During Abatement (Check ont						EMSL Ana		1					
Ccupancy Status L	cupancy Status During Abatement (Check on Facility Closed/Vacated During Entire Pe					·+	Street Addre					ā.		
Abatement I	cupancy Status During Abatement (Check ont Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Normal					ıı	108 Haddo City, State &		10/51				_	
Describe:	Cupancy Status During Abatement (Check on Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Normal Describe: 5 PM start						Westmont	1.5						
	Abatement Performed Outside of Normal Describe: 5 PM start Facility Occupied During Abatement						AAGSTIIIOIIT,	, 145 0	0100					
	Describe: 5 PM start						- House and	1931						
_									Full Contain	ment with N	egative	Pres	sure	,
≥3 sf or ≥3 lf			\bowtie		ovatio				Mini-Enclosu					
≥160 st ≥260) If		Ш	Den	nolition	1			Glove Bag P					
						2 /			Non-Exempt					
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		a	Norm	ocati	2/2 2/2 1		Descriptio Asbestos-Cor		_	Amount	Ab	ateme	ent T	ype
		9		lely b			Material (A			(Specify SF or LF)			ш	
<u>TO B</u>	E ABATED		Maint				(i.e., thermal s			0. 0. 2.)	Re	70	nca	Enc
in in			Custo		Staff?		isulation, surfa				Removal	Repair	Encapsulate	Enclosure
	(13)			(12) No	N/A		or other miscel	laneou	ıs)		<u>a</u>	- =	late	īe
First Floor Room	400 Cumpl	v Classa	165	INO			FI 471 0			22.25	N			
THIST FIGUR KOOIII	100 Suppi	y Closet	H	H			Floor tile &	wasti	С	80 SF			님	H
			H	H	+		1.17				님	H	님	H
TW 2 2 PH 1 1 PH			H	H	H			-			님	님	님	H
		17		H	H	_		-			+	님	片	님
				H	H			1			$\dashv H$	H	Η	H
Name of Registered	Waste Haul	er		NJI	DEP W	aste (Cubic Yards	Nam	e of Registere	d Landfill		Ш	الا	ш
					uler ID	Carried and an artist of the carried and an artist of the carried and	of Waste		o					
AbateTech, Inc.	T 8 1 1	1,14			1875	0	5	TRR	RF Landfill					
City, State	115			4		[Disposal Date		State					
Lumberton, NJ			The state of	TO STATE			5/16/13	Tull	ytown, PA					
Completed By (Print				Title		. 3	Signature	\			Date			
Gwen Trumber	tti				fice		(001	1		4/29	/13		
				Co	ord.			XVV						

1304-4630 Check #

Date of Notification (1) 4/29/13		N	ame o	f Buildir	ng Owner / Opera	ator (2)	404 -1 bill	100			
Agencies Notified Type Notification				Address	liversity	<u>Z</u> 513 i	1131 1 11414				
☑ EPA	į.	100000			ange Ave.		r 1 - 1 - 11	AGL		į.	
DEP Initial		C	ity, Sta	ate & Zip	Code		& LICENSIE	3			
☐ DOL ☐ Amended #		S	outh	Orange	e, NJ 07079		J. 1.1W-110				
□ □ DOH □ Emergency □ □ Cancellation	1			f Contac				Teleph	one l	luml	ber
Za za,.					ADMITTAL TO THE PARTY OF THE PA			10			
Name of Facility Where Abatement is T	aking Place	(2)	FACI	LITY IN	FORMATION	700 (4)		11			
Seton Hall University- Stafford Ha	aking Flace	: (3)			Type of Fac	cility (4) I (K-12)					
Street Address						apter 8 (Other	than K-12)				
400 South Orange Ave.							commercial buildi	nas hon	165	atc \	
					Square Fee		Floors	Bldg. Ag		310.7	
City (5) Count	y (6)	Cour	nty Co	de (7)	10,00		2	Diag. 7 tg	90		
South Orange Esse	(1.5			e (Prior if being	g demolished)				
					University		,				
Name of Monitoring Firm Hired by Build	ng Owner (8)	. /	ASCM N	lo. Name of Ab	patement Cont	ractor (9)			1	
Omega Environmental					AbateTecl	h, Inc.	00529		erce owner		
Street Address 280 Huyler Street					Street Addr						
City, State & Zip Code				101	PO Box 2		بر برید کی بالگوت	energy live live		-	
South Hackensack, NJ 07606					City, State 8	n, NJ 08048					
Project Manager for Monitoring Firm	Tel	epho	one N	umber	Telephone I		License	Number			L name
Geiser Fajardo	/		31-900		609-265-2		License	0052	29		
	led Comple			(11)	Name of OS	SHA Monitor				A CONTRACT	
5/6/13		16/1	3		EMSL Ana	lytical					
Occupancy Status During Abatement (C Facility Closed/Vacated During B	heck only o	ne)	A bata		Street Addre				1	100.00	
Abatement Performed Outside o				ment	108 Haddo						
Describe: 5 PM Start	i Noimai Ti	ours	5		City, State 8						
Facility Occupied During Abatem	ent				vvestmont	, NJ 08108					
Scope of Work (Check all that apply)		7.5								- 4	
							ontainment with I	Vegative	Pres	sure	•
≥3 sf or ≥3 lf ≥400 = 6 > 200 lf	\boxtimes		Renova			Mini-E	Enclosure				
≥160 sf ≥260 lf		L	Demoli	ition			Bag Procedures				
Location of		10	cation		D		xempted and No				
Asbestos-Containing			lly Use		Asbestos-Co		Amount (Specify	Aba	teme	ent T	ype
Material (ACM)			ly by	- 1 4	Material (A		SF or LF)	3.	4	m	_
TO BE ABATED			nance		(i.e., thermal	systems		Remova	R	Encapsulate	nc
in Facility (13)	Cus		al Stat 2)	Π?	insulation, surfa or other miscel	lcing, VAT		Nou	Repair	nso	Enclosure
	Yes		-	/A	or other miscer	lianeous)		<u>m</u>		ate	6
	П	F	1 [1	7,1090-1	1111111111111111111111111111111			П	П	
Basement	一百	TF		1	Fitting De	hris	128 LF		H	H	H
Basement		TE			ACM Gas		35 each	Ø	H	H	H
Basement					ACM Ro		130 LF	Ø	Ħ	H	H
									Ħ	Ħ	Ħ
Name of Registered Waste Hauler	Min. O. P. C.			P Waste		Name of Re	gistered Landfill	2124-2	Da		
AbateTech, Inc.				ID No.	of Waste	TDDELen	J.C:11				. 1
City, State		(44.6)	5-1	7 30	Disposal Date	City State	uilli	- A			
Lumberton, NJ				100	5/16/13	City, State Tullytown,	ΡΔ				
Completed By (Print or Type)	W.	- 1-	Title	3	Signature	- anytown,	1 1111111111111111111111111111111111111	Date	100		s i=m
Gwen Trumbetti	111	1 1 2	Office	е		Part 1		4/29/	12		
	1	(Coor	d.		ut		TI 201	10		

Ut 520505

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 7:26-2.12)

Date of Notification (1) 04/30/13		Name of Build E.I. DuPont D	2											
Agencies Notified (X) EPA	Type otification	***************************************	Street Addres	SS	42.8	20/3/1/1/ PM								
(X)DOL (X)DOH ()DCA		(X) Amend () Cancello		ition	City, State, Zi Deepwater, N	PA								
	,			Name of Con Richard Clark			Tel. Number -							
		1		FACILITY IN	FORMATION						-	30.77		
Name of Facility Where A Dupont Chambers Works	batement is 1	Taking Place (3)	14, 407	Type of Facili () School (K-	-12) er 8 (other t						0		
Street Address Route 130		(X) Other (i.e. private & commercial bldgs., homes, etc. Sq. Feet 3000 # of Floors 2												
City (5) Deepwater	County (6) Salem		County C (State Us		Bldg. Age 52 Current Use (cal Mar	nufactur	er						
Name of Monitoring Firm Harvard Environmental,	ASCM N	0.		Name of Co	Contractor (9) nolition and Remediation, LP									
Street Address 760 Pulaski Highway					Street Address 395 Turner Industrial Way									
City, State, Zip Code New Castle, DE 19720			City State, ZipCode Aston, PA 19014											
Project Manager for Monit Wesley Morrison		Telephone Number 484-480-8931 License Number 01006												
Scheduled Start Date (10) 05/01/2013	Date (11)	Name of OSHA Monitor EMSL Analytical												
Occupancy Status During (X) Facility Closed/Vacat () Abatement Performed Describe	ted During Er	ntire Period of	Abatement		Street Address 107 Haddon A	Ave p Code								
Describe		9			Westmont, N.	00108								
Other – Describe								640 A 4						
Source of Work (Check al () Demolition (X) Rei (X) Large Proj. (>160 SF (X) Full Containment with	novation or >260 LF /		oj. (>25<16 () Mini-En		60 LF ACM) () Glovebag Proc		oj. (<25 SF or	<10 LF A	(CM)					
Location of Asbestos- Containing Material (ACM Facility (13)	estos- Is Location Normal			Description of thermal system surfacing, VA	ns insulation,	Amount	(Specify SF or	Abatement Type						
_YES NO			NA	miscell.)	77				Rem.	Rep.	Encap	Enclose		
East of Bldg. #1156	X			Tank Insulatio	n	280 SF			X		-	+		
East of Bldg. #1156	X			Pipe Gaskets		10 LF			X			 		
Name of Dec Wests 1	los	LAUDEDW	ato United	D#	Cubia Vanda	of Maste		Nama	of Per	landen				
Name of Reg. Waste Hau DuPont Company	<u>ier</u>	NJDEP Wa	ste Hauler i	<u>D#</u>	Cubic Yards of Waste			Name of Reg. Landfill DuPont Chambers Works						
City, State Deepwater, NJ				Disp. D 05/07/2										
Completed by (Print or Ty Russell King	roject Mana	ager	Signature		No.	Date 04/30/2013								

OF 39P

Date of Notification (1) 04/30/13				Name of Building Owner/Operator (2) 207 Van Vorst Street Realty Company LLC												
Agencies Notified		Street A				, 00				7	- 1		135			
EPA DEP DOL	Initial Amended Amendment			City, Sta	te, Zip Co en, NJ	ode										
DOH DCA	Emergency (justification) Cancellation			Name of Kyle M	Contact asters	•	To	lonb- ··			1, 2	6,5				
				FACI	LITY INF	ORMATI	ION			1986						
Name of Facility Where 207 Van Vorst Pro		g Place (3))				70.175		of Facility (4 School (K-12	2)						
Street Address 203-207 Van Vorst		Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes etc.)														
City (5) Jersey City	= 1				7.		equare Feet 2,000		# of Floors 2+		Bldg. Age					
County (6) Hudson		County Code (7) (STATE USE ONLY)					Current Use (Prior if being demolished)									
Name of Monitoring Firm							e of Abatement Contractor (9) Enterprises, Inc.									
Street Address							t Address 12th Street									
City, State, Zip Code			City, S					State, Zip Code mmonton, NJ 08037								
Project Manager for Mo		10.000000				bhone No. License No. 01172										
Start Date (10) 05/14/13		Schedule	d Con	npletion [Date (11)		Name	of OSI	-IA Monitor	wash,						
Occupancy Status Durin	ng Abatement (Chec	k Only On	e)				Street	Addres	SS				-			
Facility Closed/Vac Abatement Perform Other – Describe:	cated During Entire Fined Outside of Norm	Period of A nal Facility	baten Hours	nent	Y		City, S	tate, Z	ip Code	t/Other		-				
Scope of Work (Check /	All That Apply)				70.00		40000									
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	enova emolit					Mir Glo	I Containme ni-Enclosure ovebag Proc n-Exempted	edure				re		
1	Locati	nally					ntion of				Abatement Type					
Asbestos-Containing Material (ACM) TO BE ABATED In Facility Used S Mainte Custodi				ed Solely by aintenance/ stodial Staff? (12) Asbestos Co				escription of ntaining Material (ACM) al systems insulation, acing, VAT, or miscellaneous)			Amount (Specify SF or LF)		Repair	Encapsulate	Enclosure	
		Yes	No	N/A			4						_	10		
Counter	•			X	1170.75				500 SF			X		<u> </u>		
Roofi				X		1375			22,000 S			X		_	_	
Tile & M				X	7 (0)	1 10		-	4,000 SF			X	_	_		
Pipe Insulatio		X	- 1		43			200 LF X								
Name of Registered Wa Waste Managemen		NJDEP Waste Hauler ID No. Cubic Yards of Waste				S Name of Registered Landfill Grows North & Tullytown Landfills										
City, State Camden, NJ		Disposal Date Various					City, State Morrisville, PA									
Completed by Kati DiNatale	*	Title Si Office Manager						A	Date 04/30/13							



Date of Notification (1)				Name of Building Owner/Operator (2) PSEG Street Address													
Agencies Notified Type Notification			Street Address								14,	(P	,				
EPA DEP	☐ Initial			4000 Hadley Road							3		1	7//	بدر ا		
DEP DOL	Amended Amendment	City, State, Zip Code South Plainfield New Jerse						080	PHILLE								
DOH DCA	Emergency justification) Cancellation	8		Name o	of Contact Hoarle			Telephone Number									
Name of Equiliby Where	Ab-4	- DI - 16		FAC	ILITY INF	ORMATIC	ON			15			10 T S				
Name of Facility Where McCarter Switching	Abatement is Takin Station	g Place (3	3)					Committee	of Facility								
Street Address 33 Littleton Avenue								×	School (K- Subchapte Other (i.e. etc.)	r 8 (Othe			ldings	, hom	es,		
City (5) Newark, New Jerse	2					re Feet ,000	# of 5	Bidg. Age 55 years									
County (6) Essex		County Code (7) (STATE USE ONLY)					Current Use (Prior if being demolished) Not in use										
Name of Monitoring Firm CNS Management	Hired by Building	Owner (8)							e of Abatement Contractor (9) mercy Group Inc.								
Street Address 208 Newtown Road						Address D Burns Avenue											
City, State, Zip Code Plainview, NY 1180			,			Zip Code n NY 11793											
Project Manager for Monitoring Firm Michael Nolan								hone No. License No. 01085									
Start Date (10) Scheduled Co 1-14-13 12-31-13									of OSHA Monitor mercy Group Inc.								
Occupancy Status During Abatement (Check Only One)									et Address								
× Facility Closed/Vaca	ated During Entire F	Period of A	baten	nent			3000	Burn	s Avenue	9							
Other – Describe: Facility scheduled for demolition. N					су		State, Zip Code stagh, NY 11793										
Scope of Work (Check A	Il That Apply)	_					1591				144.74	1 (+)					
≥3 sf or ≥3 lf Renovation ≥160 sf or ≥260 lf Demolition							× × ×	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure									
	Locati	ocation					Lacingia	2 () and	TTOTI-T HAD	Abatement							
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility Norm Used So Mainter Custodia							ription				Amount		Туре				
				Maintenance/ Custodial Staff? (12) Aspestos Contain (i.e. thermal sys surfacing other misc					ining Material (ACM) ystems insulation, ng, VAT, or scellaneous)			Removal	Repair	Encapsulate	Enclosure		
Plana asa	Yes No N/A												ro .				
 							+	ttached See Attached X									
Roof				X	5	Roofing	g Mate	erial		60,0	00 sf	Х					
	,							ž <u>/ *</u>		<u> </u>	der en en en			-			
Name of Registered Wast	te Hauler	el l	100	JDEP W	2010 00 10 10 10	Cubic Y		100	Name of	Register	ed Landfill	85. 5		1			
Horwith Trucks Inc.	1000	Hauler ID No. of Waste 400				G.R.O.W.S. North Landfill											
City, State Northampton, PA 180	4		n e e	Disposa 6-30-12	20	1	City, State Morrisy			djan i							
Completed by Title Signature Robert Lewin Environmental Coordinator									Then	1	Dat 4-3	e 30-13	3				