**State of New Jersey**  
**NOTIFICATION OF ASBESTOS ABATEMENT**  
(Pursuant to NJAC 8:90 and 12:120)

**Date of Notification:** 4/30/14  
**Name of Building Owner/Operator:** Tim Builders

<table>
<thead>
<tr>
<th>Agencies Notified</th>
<th>Type Notification</th>
<th>Street Address</th>
<th>City, State, Zip Code</th>
<th>Name of Contact</th>
<th>Telephone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>EPA</td>
<td>Initial</td>
<td>2390 Riverside Terrace</td>
<td>Wall, NJ 07746</td>
<td>Tim</td>
<td><strong>201-123-4567</strong></td>
</tr>
</tbody>
</table>

**FACILITY INFORMATION**

<table>
<thead>
<tr>
<th>Name of Facility Where Abatement is Taking Place</th>
<th>Type of Facility</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tim Builders</td>
<td>School (K-12)</td>
</tr>
</tbody>
</table>

**Street Address:**  
**City:**  
**County:**

<table>
<thead>
<tr>
<th>Name of Monitoring Firm Hired by Building Owner</th>
<th>ASCM No.</th>
<th>Name of Abatement Contractor</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Ace Insulation Co., Inc.</td>
</tr>
</tbody>
</table>

**Start Date:** 5/1/14  
**Scheduled Completion Date:** 5/16/14  
**Current Use (Prior if being demolished):** Home

**Project Manager for Monitoring Firm:**

<table>
<thead>
<tr>
<th>Telephone No.</th>
<th>License No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>732-294-1757</td>
<td>000209</td>
</tr>
</tbody>
</table>

**Occupancy Status During Abatement: (Check Only One)**

- Facility Closed/Vacated During Entire Period of Abatement
- Abatement Performed Outside of Normal Facility Hours

**Scope of Work (Check All That Apply):**

- ≥300 sf or ≥3,000 sq ft
- Renovation Demolition

**Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility**

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
<th>Description of Asbestos-Containing Material (ACM)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>(i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)</td>
</tr>
</tbody>
</table>

**Cubic Yards of Waste:**

**Name of Registered Landfill:** Chrin

**City, State:**

<table>
<thead>
<tr>
<th>Disposal Date</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>5/16/14</td>
<td>4/30/14</td>
</tr>
</tbody>
</table>

**Completed by:** Bree McGuire  
**Title:** Secretary Treasurer  
**Signature:**  
**Date:** 4/30/14

---

*Do not use this form for asbestos licensure exempted activities.*
**State of New Jersey**

**NOTIFICATION OF ASBESTOS ABATEMENT**

(Pursuant to NJAC 8:66 and 12:20)

<table>
<thead>
<tr>
<th>Date of Notification (1)</th>
<th>4-29-14</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Building Owner/Operator (2)</td>
<td>BRICK UTILITIES</td>
</tr>
<tr>
<td>Street Address</td>
<td>(RT. 88) 101 SANDRA PLACE</td>
</tr>
<tr>
<td>City, State, Zip Code</td>
<td>BRICK, N.J. 08724</td>
</tr>
<tr>
<td>Name of Contact</td>
<td>ERIC PLACKIS</td>
</tr>
<tr>
<td>Telephone Number</td>
<td></td>
</tr>
</tbody>
</table>

**FACILITY INFORMATION**

| Name of Facility Where Abatement is Taking Place (3) | |
| Street Address | 101 SANDRA PLACE |
| City (5) | BRICK, N.J. |
| County (6) | OCEAN |
| County Code (7) | (STATE USE ONLY) |
| Current Use (Project being demolished) | SEWER PUMP STATION |
| Square Feet | 100 |
| # of Floors | 1 |
| Bldg. Age | 30 |

| Name of Monitoring Firm Hired by Building Owner (8) | |
| Street Address | |
| City, State, Zip Code | |
| Project Manager for Monitoring Firm | |
| Telephone No. | |
| ASCM No. | |
| Name of Abatement Contractor (9) | BRICK INDUSTRIES INC |
| Street Address | 145 NATICK TR. |
| City, State, Zip Code | BRICK, N.J. 08724 |
| Telephone No. | 972-899-1499 |
| License No. | 01196 |
| Name of OSHA Monitor | |
| Street Address | |
| City, State, Zip Code | |

**Start Date (10) | 5-7-14**

**Scheduled Completion Date (11) | 5-8-14**

**Occupancy Status During Abatement (Check only one) | Facility Closed/Vacated During Entire Period of Abatement**

**Scope of Work (Check all that apply) | Renovation**

<table>
<thead>
<tr>
<th>Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)</th>
</tr>
</thead>
<tbody>
<tr>
<td>MUFFLER UTG (GEN)</td>
</tr>
<tr>
<td>MUFFLER INSULATION</td>
</tr>
<tr>
<td>GEN.</td>
</tr>
<tr>
<td>REMOVAL</td>
</tr>
</tbody>
</table>

**Amount (Specify SF or LF) | 4 LF**

<table>
<thead>
<tr>
<th>Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)</th>
</tr>
</thead>
<tbody>
<tr>
<td>MUFFLER INSULATION FOR GENERATOR</td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>

**Name of Registered Waste Hauler | BRICK INDUSTRIES INC**

| NDEP Waste Hauler ID No. | 21602 |
| Disposal Date | 5-9-14 |
| City, State | BRICK, N.J. |

**Completed By | ERIC PLACKIS**

| Title | PRES |
| Signature |   |

*Do not use this form for asbestos licensure exempted activities.
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to N.J.A.C. 8:60 and 12:120)

Date of Notification (1)
April 25, 2014

Name of Building Owner / Operator (2)

City of Ventnor

Agencies Notified
□ EPA
□ DEP
□ DOL
□ DOH
□ DCA
Type Notification
□ Initial
□ Amended
□ Emergency
□ Cancellation

Street Address
6201 Atlantic Avenue

City of Ventnor
City, State & Zip Code
Ventnor NJ 08406

Name of Contact
Bill Finkle

Facility Information

Name of Facility Where Abatement is Taking Place (3)
Ventnor City Municipal Building

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

Square Feet
15,000

# of Floors
2

Bldg. Age
90 years

Current Use (Prior if being demolished)
Municipal Building

Name of Monitoring Firm Hired by Building Owner (8)
NA

ASCM No.

Name of Abatement Contractor (9)
Mid Atlantic Abatement, LLC

Street Address
PO Box 1314

City, State & Zip Code
Cherry Hill, NJ 08003

Project Manager for Monitoring Firm

Telephone Number
609-667-0950

License Number
01187

Name of OSHA Monitor
EMSL Analytical

Street Address
107 Haddon Ave.

City, State & Zip Code
Westmont, NJ 08108

Occupancy Status During Abatement (Check only one)
□ Facility Closed/Vacated During Entire Period of Abatement
□ Abatement Performed Outside of Normal Hours – 7am to 3pm
□ Facility Occupied During Abatement

Scope of Work (Check all that apply)
□ ≥3 sf or ≥3 if
□ ≥160 sf ≥260 if
□ Renovation
□ Demolition
□ Full Containment with Negative Pressure
□ Mini-Enclosure
□ Glove Bag Procedures
□ Non-Exempted and Non-Friable Procedure

Location of Asbestos-Containing Material (ACM) TO BE ABATED
in Facility (13)

Is Location Normally Used Solely by Maintenance or Custodial Staff? (12)
□ Yes
□ No
□ N/A

Description of Asbestos-Containing Material (ACM)
(i.e., thermal systems insulation, surfacing, VAT or other miscellaneous)

Amount (Specify SF or LF)

Abatement Type

Office space

Floor tile & mastic
6,700 sq.ft.

Name of Registered Waste Hauler
NJDEP Waste Hauler ID No.
781586

Cubic Yards of Waste
40 cy

Name of Registered Landfill
ACUA

Service Transportation Group
City, State
New Castle, DE

Disposal Date
7-27-14

City, State
Egg Harbor Twp., NJ

Completed By (Print or Type)
Theodore S. Budzynski
Title
Gen. Mgr.

Signature

Date
4-25-14
## Notification of Asbestos Abatement

**State of New Jersey**

**NOTIFICATION ASBESTOS ABATEMENT**

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

### Date of Notification (1)
4/27/14

<table>
<thead>
<tr>
<th>Agencies Notified</th>
<th>Type Notification</th>
<th>Name of Building Owner/Operator (2)</th>
</tr>
</thead>
<tbody>
<tr>
<td>DOL</td>
<td>Initial</td>
<td>Gerald Sinclair</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Street Address</th>
<th>City, State, Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>204 N. Marion Avenue</td>
<td>Wenonah, NJ 08090</td>
</tr>
</tbody>
</table>

**FACILITY INFORMATION**

<table>
<thead>
<tr>
<th>Name of Facility Where Abatement is Taking Place (3)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Residence</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Street Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>204 N. Marion Avenue</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>City (s)</th>
<th>County Code (7) (STATE USE ONLY)</th>
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<tbody>
<tr>
<td>Wenonah,</td>
<td></td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>County (6)</th>
<th>Telephone Number</th>
<th>Current Use (Prior to being demolished)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gloucester</td>
<td></td>
<td>Residence</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Monitoring Firm Hired by Building Owner (5)</th>
<th>ASCM No.</th>
<th>Name of Abatement Contractor (6)</th>
</tr>
</thead>
<tbody>
<tr>
<td>AEI2, LLC</td>
<td></td>
<td>AEI2, LLC</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Project Manager for Monitoring Firm</th>
<th>Telephone No.</th>
<th>License No.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Telephone No.</td>
<td>License No.</td>
</tr>
<tr>
<td></td>
<td>609-481-2122</td>
<td>00689</td>
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<table>
<thead>
<tr>
<th>Start Date (10)</th>
<th>Scheduled Completion Date (11)</th>
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<tbody>
<tr>
<td>5/8/14</td>
<td>5/10/14</td>
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<table>
<thead>
<tr>
<th>Occupancy Status During Abatement</th>
<th>Street Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Facility Closed/Vacated During Entire Period of Abatement</td>
<td>300 Lenola Road</td>
</tr>
<tr>
<td>Abatement Performed Outside of Normal Facility Hours</td>
<td>Maple Shade, NJ 08052</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Scope of Work (Check all that apply)</th>
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</thead>
<tbody>
<tr>
<td>3 or 2 sf or 3 lf or 260 sq ft</td>
</tr>
<tr>
<td>Renovation or Demolition</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Location of Asbestos-Containing Material (ACM)</th>
<th>Is Location Normally Used Solely by Custodial Staff?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attic</td>
<td>Yes No N/A</td>
</tr>
<tr>
<td>Vermiculite</td>
<td>X</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Is Location Normally Used Solely by Custodial Staff? (12)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes No N/A</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)</th>
</tr>
</thead>
<tbody>
<tr>
<td>4 sf</td>
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<table>
<thead>
<tr>
<th>Amount (Specify SF or LF)</th>
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<tbody>
<tr>
<td>X</td>
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</table>

**Abatement Type**

<table>
<thead>
<tr>
<th>Cubic Yards of Waste</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Registered Landfill</th>
</tr>
</thead>
<tbody>
<tr>
<td>TBD</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Registered Waste Hauler</th>
</tr>
</thead>
<tbody>
<tr>
<td>AEI2, LLC</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>City, State</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maple Shade, NJ</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Disposal Date</th>
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<tbody>
<tr>
<td>TBD</td>
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<table>
<thead>
<tr>
<th>City, State</th>
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<tbody>
<tr>
<td>TBD</td>
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</table>

<table>
<thead>
<tr>
<th>Completed by</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wm Minnick</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Title</th>
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<tbody>
<tr>
<td>Program Mgr.</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Signature</th>
</tr>
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<tbody>
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<table>
<thead>
<tr>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>4/28/14</td>
</tr>
</tbody>
</table>

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Do not use this form for asbestos licensure exempted activities.
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1) 04/29/14
Name of Building Owner/Operator (2) Felice Stokes
MAY 2 2014

Agencies Notified:
□ EPA
X DOH
□ DSS
□ DCA
(NJAC 8:23-8)
Type Notification:
□ Initial
□ Amended
□ Amendment #
□ Emergency (including justification)
□ Cancellation

Name of Facility Where Abatement is Taking Place (3)
Private home
Street Address
106 Sherman Avenue
City, State, Zip Code
Teaneck, NJ 07666
County (5)
Bergen
County Code (7) (STATE USE ONLY)

Name of Monitoring Firm Hired by Building Owner (8)
ASCN No.
Name of Abatement Contractor (9)
Gr Tech LLC
ASCM No.
Street Address
576 Valley Rd #283
City, State, Zip Code
Wayne, NJ 07470
Project Manager for Monitoring Firm
Telephone No.
973-638-1777
License No.
01127
Name of GSHA Monitor
Envirovision Consultants, Inc
Street Address
20-21 Wagner Road, Bldg # 34A
City, State, Zip Code
Fair Lawn, NJ 07410

Start Date (10) 05/09/14
Scheduled Completion Date (11) 05/10/14

Occupancy Status During Abatement (Check only one)
X Facility Closed/Vacated During Entire Period of Abatement
□ Abatement Performed Outside of Normal Facility Hours - Describe

Time of Abatement: AM_ PM__ PM__ AM

Scope of Work (Check all that apply)
□ >50 sf or >3 if
□ > 180 sf or >260 if
□ Renovation
□ Demolition
□ Clean up and decontamination with negative pressure
□ Full Containment with Negative Pressure
□ Mini-Enclosure
□ Glovebag Procedure
□ Tent with Negative Pressure
□ Non-Exempted (*) and Non-Frangible Procedure

Location of Asbestos-Containing Material (ACM) TO BE ABATED
IN Facility (13)

Asbestos-Containing Material (ACM) Normally Used Solely by Maintenance/Custodial Staff? (12)
□ Yes
□ No
□ N/A

Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)

Amount (Specify SIF or LF) 200 LF

Abatement Type

Name of Registered Waste Hauler
Gr Tech LLC
0033785

Cubic Yards of Waste
TBD

Name of Registered Landfill
T.R.R.F. Inc
TBD

City, State

Wayne, NJ 07470

Complied By (Print or Type)
N.Jevtic
Owner

Signature

Date
04/29/2014

* Do not use this form for asbestos license in-compliance activities.
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 8:16)

Date of Notification (1) 3 / 21 / 14
Name of Building Owner/Operator (2) Verizon

Agencies Notified
- EPA
- DOLWD
- DHSS
- DCA (NJAC 5:23-8)

Type Notification
- Initial
- Amended Amendment #2-4/29/14
- Emergency (including justification)
- Cancellation

Street Address
15 East Montgomery Place, Lower Level
City, State, Zip Code
Pittsburgh, PA 15212

Name of Contact
Anthony Porta
Telephone Number

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
Verizon Whippany CO

Street Address
330 Route 10
City (5)
Whippany
County (6)
Morris

County Code (7)(STATE USE ONLY)


Name of Monitoring Firm Hired by Building Owner (8)
USA Environmental Management

ASCM No.

Name of Abatement Contractor (9)
BRISTOL ENVIRONMENTAL, INC.

Street Address
8436 Enterprise Ave
City, State, Zip Code
Philadelphia, PA 19153

Project Manager for Monitoring Firm
Mark Jenkins
Telephone No.
215-365-5810

License No.
00509

Start Date (10)
4 / 7 / 14
Scheduled Completion Date (11)
4 / 30 / 14

Name of OSHA Monitor
BRISTOL ENVIRONMENTAL, INC.

Street Address
1123 BEAVER STREET
City, State, Zip Code
BRISTOL, PA 19007

Occancy Status During Abatement (Check only one)
- Facility Closed/Vacated During Entire Period of Abatement
- Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement:

Scope of Work (Check all that apply)
- ≥3 sf or ≥3²
- ≥160 sf or ≥260²
- Renovation
- Demolition
- Full Containment with Negative Pressure
- Mini-Enclosure
- Glovebag Procedure
- Non-Exempted (*) and Non-Friable Procedure

Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)

<table>
<thead>
<tr>
<th>Location of Asbestos-Containing Material (ACM)</th>
<th>Is Location Normally Used Solely by Maintenance/Custodial Staff?</th>
<th>Description of Asbestos-Containing Material (ACM)</th>
<th>Amount (Specify SF or LF)</th>
<th>Abatement Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Basement Battery/Power Room</td>
<td>☒</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Basement AC Equipment Room 2</td>
<td>☒</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Basement AC Equipment Room 3</td>
<td>☒</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

Name of Registered Waste Hauler
SERVICE TRANSPORT GROUP, INC.
NJDEP Waste Hauler ID No.
20990
Cubic Yards of Waste

Name of Registered Landfill
MINERVA LANDFILL
City, State
WAYNESBURG, OH 44688

Completed By (Print or Type)
Brian Scafiro
Title
Estimator
Signature

ASB-41
MAY 11

B514013

* Do not use this form for asbestos licensure exempted activities.
# Notification of Asbestos Abatement

- **State of New Jersey**
- **Notification of Asbestos Abatement**
- **(Pursuant to NJAC 8:60 and 6:16)**

## Date of Notification
- 3 / 21 / 14

## Name of Building Owner/Operator
- Verizon

### Agency Notified
- EPA
- DOLWD
- DHSS
- DCA (NJAC 5:23-8)

### Type of Notification
- Initial
- Amended
- Amendment #1-4/28/14
- Emergency (including justification)
- Cancellation

### Street Address
- 15 East Montgomery Place, Lower Level

### City, State, Zip Code
- Pittsburgh, PA 15212

### Name of Contact
- Anthony Porta

### Telephone Number

### Name of Facility Where Abatement is Taking Place
- Whippany

### City
- Whippany

### County
- Morris

### County Code

### Square Feet

### # of Floors

### Bldg. Age

### Type of Facility
- School (K-12)
- Subchapter 8 (Other than K-12)
- Other (i.e., private and commercial buildings, homes, etc.)

### Current Use (Prior if being demolished)

### Office

### Name of Monitoring Firm Hired by Building Owner
- USA Environmental Management

### ASCM No.

### Name of Abatement Contractor
- BRISTOL ENVIRONMENTAL, INC.

### Street Address
- 8436 Enterprise Ave

### City, State, Zip Code
- Philadelphia, PA 19153

### Street Address
- 1123 BEAVER STREET

### City, State, Zip Code
- BRISTOL, PA 19007

### Project Manager for Monitoring Firm
- Mark Jenkins

### Telephone No.
- 215-365-5810

### Telephone No.
- 215-768-5604

### License No.
- 00509

### Start Date
- 4 / 7 / 14

### Scheduled Completion Date
- HOLD

### Name of OSHA Monitor
- BRISTOL ENVIRONMENTAL, INC.

### Occupancy Status During Abatement
- Facility Closed/Vacated During Entire Period of Abatement
- Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: AM - PM / 5:00 PM - 1:30 AM

### Scope of Work
- ≥ 3 sf or ≥ 3 if
- ≥ 160 sf or ≥ 280 if
- Renovation
- Demolition
- Full Containment with Negative Pressure
- Mini-Enclosure
- Glovebag Procedure
- Non-Exempted (*) and Non-Friable Procedure

### Location of Asbestos-Containing Material (ACM) TO BE ABATED

### IN Facility
- (13)

### Is Location Normally Used Solely by Maintenance/Custodial Staff?
- Yes
- No
- N/A

### Description of Asbestos Containing Material (ACM)
- (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)

### Amount (Specify SF or LF)

### Abatement Type

### Cubic Yards of Waste

### Name of Registered Landfill
- MINERVIA LANDFILL

### City, State
- WAYNESBURG, OH 44688

### NJDEP Waste Hauler ID No.
- 20990

### Disposal Date

### Name of Registered Waste Hauler
- SERVICE TRANSPORT GROUP, INC.

### City, State
- NEW CASTLE, DE 19720

### Completed By (Print or Type)
- Brian Scafro

### Title
- Estimator

### Signature

### Date
- 4/28/14

---

*Do not use this form for asbestos licensure exempted activities.*
State of New Jersey  
NOTIFICATION OF ASBESTOS ABATEMENT  
(Pursuant to NJAC 8:50 and 5:16)

<table>
<thead>
<tr>
<th>Date of Notification (1)</th>
<th>3 / 21 / 14</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Building Owner/Operator (2)</td>
<td>Verizon</td>
</tr>
<tr>
<td>Street Address</td>
<td>15 East Montgomery Place, Lower Level</td>
</tr>
<tr>
<td>City, State, Zip Code</td>
<td>Pittsburgh, PA 15212</td>
</tr>
<tr>
<td>Name of Contact</td>
<td>Anthony Porta</td>
</tr>
</tbody>
</table>

FACILITY INFORMATION

| Name of Facility Where Abatement Is Taking Place (3) | Whippany CO |
| Street Address | 330 Route 10 |
| City (5) | Whippany |
| County (6) | Morris |

Name of Monitoring Firm Hired by Building Owner (5)  
USA Environmental Management

| Name of Asbestos Monitoring Firm (6) | USA Environmental Management |
| Street Address | 8436 Enterprise Ave |
| City, State, Zip Code | Philadelphia, PA 19153 |
| Project Manager for Monitoring Firm | Mark Jenkins |
| Telephone No. | 215-385-5810 |

| Start Date (10) | 4 / 7 / 14 |
| Scheduled Completion Date (11) | 5 / 2 / 14 |

Occupancy Status During Abatement (Check only one)  
☐ Facility Closed/Vacated During Entire Period of Abatement  
☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: AM/PM/8:00AM-1:30PM

Scope of Work (Check all that apply)  
☐ ≥3 sf or ≥3 ft
☐ ≥160 sf or ≥260 ft
☐ Renovation  
☐ Demolition  
☐ Full Containment with Negative Pressure  
☐ Mini-Enclosure  
☐ Glovebag Procedure  
☐ Non-Exempted (*) and Non-Friable Procedure

Location of Asbestos-Containing Material (ACM) TO BE ABATED IN FACILITY (13)

<table>
<thead>
<tr>
<th>Location</th>
<th>Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)</th>
<th>Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)</th>
<th>Amount (Specify SF or LF)</th>
<th>Abatement Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Basement Battery/Power Room</td>
<td>☒</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Basement AC Equipment Room 2</td>
<td>☒</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Basement AC Equipment Room 3</td>
<td>☒</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

| Name of Registered Waste Hauler | SERVICE TRANSPORT GROUP, INC. |
| NJDEP Waste Hauler ID No. | 20590 |
| Cubic Yards of Waste | |
| Name of Registered Landfill | MINERVA LANDFILL |
| Disposal Date | City, State | WAYNESBURG, OH 44688 |
| Completed By (Print or Type) | Brian Scafido |
| Title | Estimator |
| Signature | Signature |
| Date | 3/31/14 |
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

Date of Notification (1)
March 24, 2014

Name of Building Owner/Operator (2)

Bridgewater Owner/Operator (2)

Bridgewater Site

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

Type Notification
☐ Initial
☐ Amended
☐ Amendment #1
☐ Emergency (including justification)
☐ Cancellation

Street Address
10 Finderne Avenue

City, State, Zip Code
Bridgewater, NJ 08807

Name of Contact

Project Manager

FACILITY INFORMATION

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

Square Feet

# of Floors

Bldg. Age

Current Use (Prior if being demolished)

Business

SOMERSET

Name of Monitoring Firm Hired by Building Owner (8)
AET

ASCM No.
0021

Name of Abatement Contractor (9)
The MACK Group, LLC

Street Address
907 Doolittle Drive

Bridgewater, NJ 08807

City, State, Zip Code
Bridgewater, NJ 08807

Project Manager for Monitoring Firm

Eric Houseknecht

Telephone No.
(908) 218-1108

Telephone No.
(973) 759 - 5000

License No.
00781

Name of OSHA Monitor
The MACK Group, LLC.

Street Address
1500 Kings HWY N, STE 209

City, State, Zip Code
Cherry Hill, NJ 08034

Occurrence Status During Abatement (Check Only)

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 ft

☒ °180 sf or °260 ft

☐ Renovation

☒ Demolition

☐ Full Containment with Negative Pressure

☐ Mini-Enclosure

☐ Gloves Procedure

☐ Non-Exempted (*) and Non-Friable Procedure

Location of Asbestos-Containing Material (ACM)

TO BE ABATED

In Facility

(13)

Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)

Yes

No

N/A

Bld 7 Rms 7113-7119

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,void of Waste

Cubic Yards of Waste

Name of Registered Landfill

Freehold / Newark Carting / Rovic Disposal

City, State
Freehold, Newark, NJ

Completed by

Mike Cooper

Title
President

Signature

Date
3/24/14

* Do not use this form for asbestos licensure exempted activities.
**Date of Notification (1):** March 24, 2014

**Name of Building Owner/Operator (2):** Bridgewater Site

**Street Address:**
- **10 Finderne Avenue**
- **Bridgewater, NJ 08807**

**Name of Facility Where Abatement is Taking Place (3):**
- **Building 7**
- **10 Finderne Avenue**
- **Bridgewater, NJ 08807**

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

**Square Feet:**

**# of Floors:**

**Bldg. Age:**

**Current Use (Prior if being demolished):** business

**Name of Monitoring Firm Hired by Building Owner (8):**
- AET
- 0021

**Name of Abatement Contractor (9):**
- The MACK Group, LLC

**Street Address:**
- 907 Doolittle Drive
- Bridgewater, NJ 08807

**Telephone No.:**
- (908) 218-1108

**License No.:**
- (973) 759-5000

**Name of OSHA Monitor:**
- The MACK Group, LLC.

**Street Address:**
- 1500 Kings HWY N, STE 209
- Cherry Hill, NJ 08034

**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):**
- ≥ 25 sf or ≥ 2 ft
- ≥ 100 sf or ≥ 200 sf

**Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13):**

<table>
<thead>
<tr>
<th>Location</th>
<th>Yes</th>
<th>No</th>
<th>Description</th>
<th>Amount (Specify SF or LF)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bld 7 Rms 7113-7119</td>
<td></td>
<td>✓</td>
<td>metal pan ceiling</td>
<td>1,200 s/f</td>
</tr>
<tr>
<td>1x2 transite wall panels</td>
<td>✓</td>
<td></td>
<td>pipe insulation</td>
<td>240 lf</td>
</tr>
</tbody>
</table>

**Location of Asbestos-Containing Material (ACM) USED SOLELY by Maintenance/Custodial Staff (12):**

<table>
<thead>
<tr>
<th>Location</th>
<th>Description</th>
<th>Amount (Specify SF or LF)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>metal pan ceiling</td>
<td>1,200 s/f</td>
</tr>
</tbody>
</table>

**Name of Registered Waste Hauler:**
- Newark Carting / Freehold / Rovic Disposal
- NJ DEP Waste Hauler ID No.: 4509

**Cubic Yards of Waste:** 15.6

**Name of Registered Landfill:**
- Cumberland County Landfill
- City, State: Newburg, PA

**Disposal Date:** 4/5/15

**Completed by:**
- Mike Cooper
- Title: President

**Date:** 3/24/14

* Do not use this form for asbestos licensure exempted activities.
State of New Jersey - Notification of Asbestos Abatement  
(Pursuant to N.J.A.C. 8:60-7 and 12:120-7)  

GAC Project # 060-14  
Date of Notification (1)  
April 28, 2014  

<table>
<thead>
<tr>
<th>Agencies Notified</th>
<th>Notification Type</th>
<th>Name of Building Owner/Operator (2)</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ EPA</td>
<td>□ Initial Notification</td>
<td>RUTGERS, THE STATE UNIVERSITY OF NJ</td>
</tr>
<tr>
<td>□ DCA</td>
<td>□ Amended Notification #2</td>
<td></td>
</tr>
<tr>
<td>□ DOLO</td>
<td>□ Additional Qty. &lt; 3SF/room and extend completion date</td>
<td></td>
</tr>
<tr>
<td>□ DEP: No Longer REQUIRED</td>
<td>□ Emergency (including justification)</td>
<td></td>
</tr>
<tr>
<td>□ DOH</td>
<td>□ Cancelled</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Facility Where Abatement is Taking Place (3)</th>
<th>Street Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>BISHOP QUAD, MULTIPLE ABOVE GROUND STRUCTURES COMMON BASEMENT/Foundation</td>
<td>ENVIRONMENTAL HEALTH &amp; SAFETY DEPT.</td>
</tr>
<tr>
<td>BLDG#s 3055/3054/3053/3051</td>
<td>27 ROAD 1, BLDG 4086, LIVINGSTON CAMPUS</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Street Address</th>
<th>City, State, Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>COLLEGE AVENUE CAMPUS</td>
<td>PISCATAWAY, NJ 08854</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>City (5)</th>
<th>County (6)</th>
<th>County Code (7)</th>
</tr>
</thead>
<tbody>
<tr>
<td>NEW BRUNSWICK</td>
<td>MIDDLESEX</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Monitoring Firm Hired by Bldg. Owner (8)</th>
<th>ASCM No.</th>
<th>Name of Contractor (9)</th>
</tr>
</thead>
<tbody>
<tr>
<td>ATC ASSOCIATES</td>
<td>0098</td>
<td>GREENWOOD ABATEMENT CONSULTANTS, INC.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Street Address</th>
<th>City, State, Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>3 TERRI LANE</td>
<td>BURLINGTON, NJ 08016</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Project Manager for Monitoring Firm</th>
<th>Telephone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>BRIAN KEARNY</td>
<td>609-386-8800</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Scheduled Start Date (10)</th>
<th>Scheduled Completion Date (11)</th>
</tr>
</thead>
<tbody>
<tr>
<td>04/22/14</td>
<td>05/12/14</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Occupancy Status During Abatement (Check only one)</th>
<th>Street Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Facility Closed/Vacated During Entire Period of Abatement</td>
<td>20-21 WARGARAW ROAD</td>
</tr>
<tr>
<td>□ Abatement Performed Outside of Normal Facility Hours - Describe</td>
<td>FAIRLAWN, NJ</td>
</tr>
<tr>
<td>□ Other - Describe: Shift Hours: 3:00PM - 5:00AM</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Scope of Work (Check all that apply)</th>
<th>Street Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Greater than 3 sf or 3 If</td>
<td>20-21 WARGARAW ROAD</td>
</tr>
<tr>
<td>□ Greater than 160 sf or 260</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Location of Asbestos-Containing Material (ACM) in Facility (13)</th>
<th>Name of Req. Waste Hauler</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is Location Normally Used Solely by Maint./Custodial Staff? (12)</td>
<td>See Hauler Below #1 &amp; 2</td>
</tr>
<tr>
<td>YES</td>
<td>See Below</td>
</tr>
<tr>
<td>NO</td>
<td>NA</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Cubic Yards of Waste:</th>
<th>Name of Registered Landfill</th>
</tr>
</thead>
<tbody>
<tr>
<td>10 CY</td>
<td>G.R.O.W.S. North Landfill</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Req. Waste Hauler</th>
<th>NJDEP Waste Hauler ID #</th>
</tr>
</thead>
<tbody>
<tr>
<td>See Hauler Below #1 &amp; 2</td>
<td>See Below</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Disposal Date</th>
<th>City, State</th>
</tr>
</thead>
<tbody>
<tr>
<td>05/12/14</td>
<td>City, State</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>City, State</th>
<th>Road. Morrisville, Pa</th>
</tr>
</thead>
<tbody>
<tr>
<td>100 New Ford Mill</td>
<td>19067</td>
</tr>
<tr>
<td>215-736-1700</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Completed by (Print or Type)</th>
<th>Title</th>
<th>Signature</th>
</tr>
</thead>
<tbody>
<tr>
<td>RAYMOND C. PEDALINO</td>
<td>SENIOR PROJECT MANAGER</td>
<td>Raymond C. Pedalino</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Date</th>
<th>Copies To: Rutgers, REHS, Attn: Mike Smith and ATC, Attn: Brian Kearney</th>
</tr>
</thead>
<tbody>
<tr>
<td>April 28, 2014</td>
<td></td>
</tr>
</tbody>
</table>
**State of New Jersey - Notification of Asbestos Abatement**

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

**GAC Project # 060-14**

**Date of Notification (1)**

**April 22, 2014**

**Name of Building Owner/Operator (2)**

RUTGERS, THE STATE UNIVERSITY OF NJ

**Notification Type**

- Initial Notification
- Amended Notification #1 - Facility has multiple above ground structures sharing a common basement/foundation
- Emergency (including justification)
- Canceled

**Name of Facility Where Abatement is Taking Place (3)**

BISHOP QUAD, MULTIPLE ABOVE GROUND STRUCTURES COMMON BASEMENT/FOUNDATION
BLDG#s 3055/3054/3053/3051

**Street Address**

COLLEGE AVENUE CAMPUS

**City (5)**

NEW BRUNSWICK

**County (8)**

MIDDLESEX

**County Code (7)**

(Middlesex)

**Name of Monitoring Firm Hired by Bldg. Owner (8)**

ATC ASSOCIATES

**ASCM No. (8)**

0098

**Name of Contractor (9)**

GREENWOOD ABATEMENT CONSULTANTS, INC.

**Street Address**

3 TERRI LANE

BURLINGTON, NJ 08016

**City State, Zip Code**

**Project Manager for Monitoring Firm**

BRIAN KEARNEY

**Telephone Number**

609-386-8800

**Scheduled Start Date (10)**

04/22/14

**Scheduled Completion Date (11)**

04/28/14

**Occupancy Status During Abatement (Check only one)**

- Facility Closed/Vacated During Entire Period of Abatement
- Abatement Performed Outside of Normal Facility Hours - Describe
- Other - Describe: Shift Hours: 3:00PM - 5:00AM

**Scope of Work (Check all that apply)**

- ≥ 3 sf or ≥ 3 if
- ≥ 160 sf or ≥ 260
- Renovation
- Demolition

**Location of Asbestos-Containing Material (ACM) in Facility (13)**

Description of Asbestos-Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)

**Various Rooms**

- VAT

**Name of Reg. Waste Hauler**

See Hauler Below #1 & 2

**NJDEP Waste Hauler ID #**

See Below

**Disposal Date**

04/28/14

**Hauler #1**

Greenwood Abatement Consultants, Inc. - Butler, NJ 07405
NJDEP # 12561

**Hauler #2**

Horizon Disposal Services, Inc., Trenton, NJ 08611
NJ DEP # 22612

**Name of Registered Landfill**

G.R.O.W.S. North Landfill

**City State, Zip Code**

100 New Ford Mill Rd, Morrisville, PA 19067

**Telephone Number**

215-736-1700

**Name of Contact**

MICHAEL SMITH, ENV. HEALTH & SAFETY

**Street Address**

ENVIRONMENTAL HEALTH & SAFETY DEPT.
27 ROAD 1, BLDG 4086, LIVINGSTON CAMPUS

**City State, Zip Code**

PISCATAWAY, NJ 08854

**Telephone Number**

**Type of Facility (4)**

- School (K-12)
- Subchapter 8 (other than K-12)
- Other (i.e. private & commercial buildings, homes, etc.)

**Sq. Feet**

N/A

**# of Floors**

3

**Bldg. Age**

80+ years

**Current Use (prior if being demolished)**

ACADEMIC

**Copies To:**

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

**Signature**

Raymond C. Pedalino

**Date**

April 22, 2014
State of New Jersey - Notification of Asbestos Abatement
(Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

GAC Project #060-14

Date of Notification (1) April 11, 2014

Name of Building Owner/Operator (2)
RUTGERS, THE STATE UNIVERSITY OF NJ

Street Address
ENVIRONMENTAL HEALTH & SAFETY DEPT.
27 ROAD 1, BLDG 4086, LIVINGSTON CAMPUS

City, State, Zip Code
PISCATAWAY, NJ 08854

Name of Contact
MICHAEL SMITH, ENV. HEALTH & SAFETY

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
BISHOP QUAD, BLDG# 3055

Street Address
COLLEGE AVENUE CAMPUS

City (5) County (6) County Code (7)
NEW BRUNSWICK MIDDLESEX 0098

Name of Monitoring Firm Hired by Bdgs. Owner (8)
ATC ASSOCIATES

Name of Contractor (9)
GREENWOOD ABATEMENT CONSULTANTS, INC.

Street Address
3 TERRI LANE

City, State, Zip Code
BURLINGTON, NJ 08016

Project Manager for Monitoring Firm
BRIAN KEARNY

Telephone Number
609-386-8800

Telephone Number
973-492-0477

License Number
00840

Name of OSHA Monitor
1 ENVIROVISION, INC.

Street Address
20-21 WARGARAW ROAD

City, State, Zip Code
FAIRLAWN, NJ

Occupancy Status During Abatement (Check only one)
□ Facility Closed/Vacated During Entire Period of Abatement
□ Abatement Performed Outside of Normal Facility Hours -
Describe: Shift Hours: 3:00PM – 5:00AM

□ Other – Describe: Month/Date

Scope of Work (Check all that apply)
□ ≥ 3 sf or ≥ 3 lf
□ ≥ 160 sf or ≥ 260

□ Renovation
□ Demolition

Location of Asbestos-Containing Material (ACM) in Facility (13)
Is Location Normally Used Solely by Maint./Custodial Staff? (12)
YES No

Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other misc.)

Amount (Specify SF or LF)
100 SF

Abatement Type
□ Full Containment with Negative Pressure
□ Mini-Enclosure
□ Glovebag Procedure
□ Non-Exempted (*) and Non-Friable Procedure

Various Rooms
□ VAT

Name of Reg. Waste Hauler
NJDEP Waste Hauler ID #
See Hauler Below #1 & 2

Cubic Yards of Waste
5 CY

Name of Registered Landfill
G.R.O.W.S. North Landfill

Hauler #1 Greenwood Abatement Consultants, Inc. – Butler, NJ 07405
NJDEP #12561
Hauler #2 Horizon Disposal Services, Inc., Trenton, NJ 08611
NJ DEP # 22612

Completed by (Print or Type)
RAYMOND C. PEDALINO
Title
SENIOR PROJECT MANAGER

Signature
Raymond C. Pedalino
Date
April 11, 2014

Disposal Date
04/28/14

City, State
100 New Ford Mill Rd. Morrisville, Pa 19067
215-736-1700

Copies To: Rutgers, REHS, Attn: Mike Smith and ATC, Attn: Brian Kearney
# State of New Jersey
## NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:1:20)

### Date of Notification (1): 5/29/19

### Name of Building Owner/Operator (2): Pinelands Construction

### Street Address: 300 77 TH ST.

### City, State, Zip Code: Sea Isle City, N.J. 08243

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

### Current Use (Prior to being demolished):
- [ ] VACANT

## FACILITY INFORMATION

### Name of Facility Where Abatement is Taking Place (5):
- [ ] RESIDENCE

### Street Address: 8 VICTORIA LANE

### City (5):

### County (6):

### Name of Monitoring Firm Hired by Building Owner (8):
- [ ] N/A

### ASCN No.:

### Name of Abatement Contractor (9):
- [ ] Klemco Inc.

### Street Address: 369 S. SPRUE DUR

### City, State, Zip Code: Maple Shade, N.J. 08052

### Telephone No.:

### License No.:

### Name of OSHA Monitor:

### Street Address: 369 S. SPRUE DUR

### City, State, Zip Code: Maple Shade, N.J. 08052

### Name of Registered Waste Handler:
- [ ] Klemco Inc.

### NJDEP Waste Handler D.No.:

### Cubic Yards of Waste:

### Name of Registered Landfill:
- [ ] C.M.C.M.V.A.

### City, State:

### Disposal Date:

### Compiled By:
- [ ] Joseph Klemm

### Signature:

### Date:

---

*Do not use this form for asbestos licensure-exempted activities.*
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

Date of Notification (1)
April 29, 2014

Agencies Notified
[ ] EPA
[ ] DEF
[ ] DOL
[ ] DOH
[ ] DCA
[ ] Initial Notification
[ ] Amended Notification
[ ] Emergency (including justification)
[ ] Cancellation

Name of Building Owner/Operator (2)
Edison Twp. Public Schools

Street Address
312 Pierson Avenue

City, State, Zip Code
Edison, NJ 08837

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
James Monroe Elementary School 1962 Building

Street Address
7 Sharp Road

City
Edison

County (6)
Middlesex

County Code (7)
STATE USE ONLY

Name of Monitoring Firm Hired by Building Owner (8)
Guardian Contracting, Inc.

ASCM No.

Name of Abatement Contractor (9)
Guardian Contracting, Inc.

Street Address
1889 Rte. 9, Unit 61

City, State, Zip Code
Toms River, NJ 08755

Subtype of Facility (4)
[x] School (k-12)
[ ] Subchapter 8 (other than k-12)
[ ] Other (i.e., private & commercial buildings, homes, etc.)

Square feet
30,000 sf

# of Floors
1

Current Use (Prior if being demolished)
School

Bldg. Age
50

Occupancy Status During Abatement (Check only one)
[x] Facility Closed/Vacated During Entire Period of Abatement
[ ] Abatement Performed Outside of Normal Facility Hours
[ ] Other - Describe

Scope of Work (Check all that apply)
[x] >3 sf or >3 ft
[ ] 2160 sf or >2600 sf
[ ] Renovation
[ ] Demolition

Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility (13)

Location Normally used Solely by Maintenance/Custodial Staff (12)

YES NO N/A

Throughout
X

Asbestos fittings
83

Throughout
X

Asbestos floor tile
16,643

Description of Asbestos-Containing Material (ACM)
I.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)

Amount (Specify SF or LF)

REMoval
[ ] REPAIR
ENCapsule
ENCLOSURE

Abatement Type

[x] Full Containment with Negative Pressure
[ ] Mini-Enclosure
[ ] Glovebag Procedure
[ ] Non-Exempted (*) and Non-Friable Procedure

Name of Registered Waste Hauler
Guardian Contracting, Inc.

NJDEP Waste Hauler ID No.
20223

Cubic Yards of Waste
20

Name of Registered Landfill
T.R.R.F.

City, State
Toms River, New Jersey

Disposal Date
5/28/14

Completed by
Nicholas Fernicola

Title
Project Manager

Signature

Date
4/29/2014

*Do not use this form for asbestos licensure exempted activities.
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

Date of Notification (1)  April 29, 2014
Name of Building Owner/Operator (2)  Schweitzer-Mauduit

Agencies Notified
- [x] EPA
- [x] DOL
- [x] DOH
- [ ] DEP
- [ ] DCA

Type of Notification
- [x] Initial Notification
- [ ] Amended Notification
- [ ] Emergency (including justification)
- [ ] Cancellation

Name of Contact  Hal Bernstein

Street Address  85 Main Street
City, State, Zip Code  Spotswood, New Jersey 08884-0401

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
Schweitzer-Mauduit-Machine Room Building

Street Address  85 Main Street
City  Spotswood
County (6)  Middlesex
County Code (7) (STATE USE ONLY)  ASCM No.

Name of Monitoring Firm Hired by Building Owner (8)
Guardian Contracting, Inc.
Street Address  1889 Route 9, Unit 61
City, State, Zip Code  Toms River, NJ 08755

Project Manager for Monitoring Firm  Nicholas Fernicola
Telephone Number  732-349-9932
Scheduled Start Date (10)  5/12/14
Scheduled Completion Date (11)  5/14/14

Occupancy Status During Abatement (Check only one)
- [x] Facility Closed/Vacated During Entire Period of Abatement
- [ ] Abatement Performed Outside of Normal Facility Hours
- [ ] Other - Describe area we are working in is closed

Scope of Work (Check all that apply)
- [x] >3 sf or ≥3 if
- [x] Renovation
- [ ] Demolition

Location of Asbestos-Containing Material (ACM) TO BE ABATED
in facility

<table>
<thead>
<tr>
<th>Location</th>
<th>Amount (Specify SF or LF)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tunnel</td>
<td>Asbestos pipe insulation</td>
</tr>
</tbody>
</table>

Abatement Type
- [x] Full Containment with Negative Pressure
- [ ] Mini-Enclosure
- [x] Glovebag Procedure
- [ ] Non-exempted (*) and Non-Friable Procedure

Name of Registered Waste Hauler  Guardian Contracting, Inc.
NJDEP Waste Hauler ID No.  20223
Cubic Yards of Waste  2
Name of Registered Landfill  T.R.R.F.
City, State  Toms River, New Jersey
Disposal Date  5/15/14

Completed by (Print or Type)  Nicholas Fernicola
Signature  Project Manager  4/29/2014

*Do not use this form for asbestos licensure exempted activities.
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

State of New Jersey

Date of Notification (1) April 29, 2014

Name of Building Owner/Operator (2)
Wood Ridge Industrial

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3) Warehouse

Street Address 1 Passaic Street

City Wood Ridge
County (6) Bergen
County Code (7) (STATE USE ONLY) N/A

Name of Monitoring Firm Hired by Building Owner (8) N/A

Name of Abatement Contractor (9)
Guardian Contracting, Inc.

Project Manager for Monitoring Firm N/A

City, State, Zip Code Toms River, New Jersey 08755-1271

Type of Facility (4)
[ ] School (k-12)
[ ] Subchapter 8 (other than k-12)
[ ] Other (i.e., private & commercial buildings, homes, etc.)

Occupancy Status During Abatement (Check only one)
[ x ] Facility Closed/Vacated During Entire Period of Abatement
[ ] Abatement Performed Outside of Normal Facility Hours
[ ] Other - Describe

Square Feet 100,000 sf

Name of OSHA Monitor E.M.S.L. Analytical

Street Address 1056 Stelton Road
City, State, Zip Code Piscataway, New Jersey 08854

Type of Work (Check all that apply)
[ ] Full Containment with Negative Pressure
[ x ] Encapsulation
[ ] Glovebag Procedure
[ ] Non-Exempted (*) and Non-Friable Procedure

Scope of Work (Check all that apply)
[ x ] >3 sf or ≥31 ft
[ ] ≥160 sf or ≥260 ft
[ ] Renovation
[ ] Demolition

Location of Asbestos-Containing Material (ACM) TO BE ABATED
in facility (13)

Building 24 & 30 X Damaged pipe insulation 500 lf X

Is Location Normally used Solely by Maintenance/Custodial Staff (12)

YES NO N/A

Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)

Amount (Specify SF or LF)

Abatement Type REMOVAL REPAIR ENCLOSURE

Name of Registered Waste Hauler Guardian Contracting, Inc.

NJDEP Waste Hauler ID No. 20223

Cubic Yards of Waste T.R.R.F.

Name of Registered Landfill

City, State Tullytown, Pennsylvania

Completed by (Print or Type)
Nicholas Femicola Project Manager

Signature

Date 4/29/2014

*Do not use this form for asbestos licensure exempted activities.
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

Date of Notification (1)  March 24, 2014
Name of Building Owner/Operator (2)  Bridgewater Site

Agencies Notified  Type Notification
- EPA  Initial
- DEP  Amended
- DOL  Amendment #
- DOH  Emergency (Including Justification)
- DCA  Cancellation

Street Address  10 Finderne Avenue
City, State, Zip Code  Bridgewater, NJ 08807
Name of Contact  Project Manager

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
Building 7
Street Address  10 Finderne Avenue
City (5)  Bridgewater, NJ 08807
County (6)  Somerset

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

Square Feet  # of Floors  Bldg. Age

Current Use (Prior to being demolished)

BUSINESS

Name of Monitoring Firm Hired by Building Owner (8)  ASCM No. 0021
Name of Abatement Contractor (9)  The MACK Group, LLC
Street Address  907 Doolittle Drive
City, State, Zip Code  Bridgewater, NJ 08807

Street Address  1500 Kings HWY N, STE 209
City, State, Zip Code  Cherry Hill, NJ 08034

Start Date (10)  4/5/14
Scheduled Completion Date (11)  4/5/15

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
- Renovation
- Demolition
- Full Containment with Negative Pressure
- Mini-Enclosure
- Glovebag Procedure
- Non-Exempted (*) and Non-Fireable Procedure

Location of Asbestos-Containing Material (ACM) TO BE ABATED

<table>
<thead>
<tr>
<th>In Facility</th>
<th>(13)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bld 7 Rms 7113-7119</td>
<td></td>
</tr>
<tr>
<td>1x2 transite wall panels</td>
<td>240 l/f</td>
</tr>
<tr>
<td>pipe insulation</td>
<td>120 l/f</td>
</tr>
</tbody>
</table>

Amount (Specify SF or L/F)

Description of Asbestos-Containing Material (ACM)
(I.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)

Abatement Type

Name of Registered Waste Hauler  NJ DEP Waste Hauler ID No. 4509
Cubic Yards of Waste  15.6
Name of Registered Landfill  Cumberland County Landfill

City, State  Newburg, PA
Disposal Date  4/5/15

Completed by  Mike Cooper
Title  President
Signature  Date  3/24/14

* Do not use this form for asbestos licensure exempted activities.
NOTIFICATION OF ASBESTOS ABATEMENT  
(Pursuant to NJAC 8:60 and 12:120)

Date of Notification (1): 5/1/14

Agencies Notified:  
- EPA (x)
- DEP
- DOL (x)
- DOH
- DCA

Type Notification:  
- Initial (x)
- Amended
- Amendment # 1
- Emergency (including justification)
- Cancellation

Name of Building Owner/Operator (2): Reichhold Inc.

Street Address: 2400 Ellis Road
City, State, Zip Code: Durham, NC 27703

Name of Contact: Brian Kanzler

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3): Reichhold Inc.
Street Address: 400 Doremus Avenue
City (5): Newark
County (6): Essex

Current Use (Prior if being demolished): chemical manufacturing

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

Square Feet: 700,000 +/-
# of Floors: 3
Bldg. Age: 60+

Name of Monitoring Firm Hired by Building Owner (8): AET Inc.
ASCM No.: 
Name of Abatement Contractor (9): ecoservices, LLC

Street Address: 28 N. Pennell Road
City, State, Zip Code: Media, PA 19063

Telephone No.: 908-296-1132
License No.: 01161

Start Date (10): 5/12/14
Scheduled Completion Date (11): 5/31/14

Occupancy Status During Abatement (Check Only One):  
- Facility Closed/Vacated During Entire Period of Abatement
- Abatement Performed Outside of Normal Facility Hours (x)
- Other – Describe: all work in segregated areas

Name of OSHA Monitor: EMSL

Street Address: 200 Route 130 North
City, State, Zip Code: Cinnaminson, NJ

Scope of Work (Check All That Apply):  
- ±23 sf or ±23 If (x)
- ±160 sf or ±260 If

Location of Asbestos-Containing Material (ACM) TO BE ABATED  
- In Facility (x)

Is Location Normally Used Solely by Maintenance/Custodial Staff? (12): Yes

Description of Asbestos Containing Material (ACM)  
(i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous):  

Amount (Specify SF or LF):  

Abatement Type:  
- Full Containment with Negative Pressure
- Mini-Enclosure
- Glovebag Procedure
- Non-Exempted (*) and Non-Friable Procedure

Location of Registered Waste Hauler  
- NJDEP Waste Hauler ID No.: 
- Cubic Yards of Waste: 400
- Name of Registered Landfill: GROWS

City, State: Newark, NJ
Disposal Date: TBD
City, State: Morrisville, PA

Completed by: Jack Bally  
Title: Sr. Project Manager  
Signature:  
Date: 5/1/14

ASB-41 (R-05-08)

* Do not use this form for asbestos licensure exempted activities.
Client: REICHHOLD CHEMICAL  
400 DOREMUS AVENUE - NEWARK, NEW JERSEY

Building: Guard Shack and Bldg 9  
Floor/Level: 

<table>
<thead>
<tr>
<th>Functional Space</th>
<th>Material ID / Description</th>
<th>Estimated Quantity</th>
<th>Frangible (Y/N)</th>
<th>% Damage (Loc/Disl.)</th>
<th>Debris (Y/N)</th>
<th>Contact (U/M/H)</th>
<th>Sample Reference #</th>
</tr>
</thead>
<tbody>
<tr>
<td>Guard Shack</td>
<td>23 - Roofing Material &quot;Pitch Layer&quot;</td>
<td>250 SF</td>
<td>N</td>
<td>0</td>
<td>N</td>
<td>L</td>
<td>7393NJ-23</td>
</tr>
<tr>
<td>Bldg 9</td>
<td>26 - Roofing Flashing</td>
<td>100 SF</td>
<td>N</td>
<td>0</td>
<td>N</td>
<td>L</td>
<td>7393NJ-26</td>
</tr>
<tr>
<td>Guard Shack</td>
<td>118 - Window Glazing</td>
<td>2 SF</td>
<td>N</td>
<td>0</td>
<td>N</td>
<td>L</td>
<td>7393NJ-118</td>
</tr>
</tbody>
</table>

Notes: 

Inspector: Anthony Keir  
Inspection Date: 4-23-2013
### Asbestos Containing Material Inventory Data

**Client:** Reichhold Chemical  
400 Doremus Avenue - Newark, New Jersey

**Building:** 13  
**Floor/Level:** 2ND

<table>
<thead>
<tr>
<th>Functional Space</th>
<th>Material ID / Description</th>
<th>Estimated Quantity</th>
<th>Frangible (Y/N)</th>
<th>% Damage (Loc./Dist.)</th>
<th>Debris (Y/N)</th>
<th>Contact (L/MH)</th>
<th>Sample Reference #</th>
</tr>
</thead>
<tbody>
<tr>
<td>Throughout Office/Conference Room</td>
<td>Mastic associated with 12”x12” Tan Floor Tile.</td>
<td>3292 SF</td>
<td>N</td>
<td>0%</td>
<td>N</td>
<td>L</td>
<td>7393NJ-001AM</td>
</tr>
<tr>
<td>Roofing</td>
<td>Roof Flashing</td>
<td>656 SF</td>
<td>N</td>
<td>0%</td>
<td>N</td>
<td>L</td>
<td>7393NJ-012A - C</td>
</tr>
<tr>
<td>Exterior Old Canopy</td>
<td>Caulking, Building 13 Exterior “Mud Layer”</td>
<td>115 SF</td>
<td>N</td>
<td>0%</td>
<td>N</td>
<td>L</td>
<td>7393NJ-172</td>
</tr>
<tr>
<td>Exterior Old Canopy</td>
<td>Caulking, Building 13 Exterior “Caulk Layer”</td>
<td>115 SF</td>
<td>N</td>
<td>0%</td>
<td>N</td>
<td>L</td>
<td>7393NJ-173</td>
</tr>
<tr>
<td>Exterior Old Canopy</td>
<td>Caulking, Building 13 Exterior “Caulk Layer”</td>
<td>115 SF</td>
<td>N</td>
<td>0%</td>
<td>N</td>
<td>L</td>
<td>7393NJ-200</td>
</tr>
</tbody>
</table>

**Notes:**

**Inspector:** Anthony Keir  
**Inspection Date:** 4-22 and 4-25-2013
**NOTIFICATION OF ASBESTOS ABATEMENT**

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

**State of New Jersey**

**Name of Building Owner/Operator:**
FIRST HARD REALTY CORPORATION

**Name of Contact:**
TONY BALLANACI

**Name of Facility Where Abatement is Taking Place:**
FUTURE C/V'S

**Street Address:**
453 Valley Street

**City:**
Maplewood

**County:**
Essex County

**Type of Facility:**
Vacant

**Square Feet:**
36,000

**# of Floors:**
1

**Bldg. Age:**
23

**Start Date:**
5/19/14

**Scheduled Completion Date:**
10/19/14

**Occupancy Status During Abatement:**
Facility Closed/Vacated During Entire Period of Abatement

**Scope of Work:**
Renovation, Demolition, Full Containment with Negative Pressure

**Is Location Normally Used Solely by Maintenance/Custodial Staff?**
Yes

**Description of Asbestos-Containing Material:**
VAT Fly Packing, VAT Mosiac, Pipe Insulation,
Roofing Flashing

**Amount:**
1,833 SF

**Name of Registered Waste Hauler:**
ATC INC

**Cubic Yards of Waste:**
3,811 SF

**Name of Registered Landfill:**
Minerva Enterprises

**Disposal Date:**
5/19/14

**Completed by:**
VINCENT ADINOCI

**Signature:**

---

*Do not use this form for asbestos licensure exempted activities.*
### State of New Jersey
### NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:16)

#### Name of Building Owner/Operator
Dept. of Human Services-Office of Property Management & Construction

#### Agencies Notified
- [ ] EPA
- [x] DOLWD
- [x] DHSS
- [ ] DCA (NJAC 5:23-8)

#### Type Notification
- [ ] Initial
- [ ] Amended
- [ ] Emergency (including justification)
- [ ] Cancellation

#### Date of Notification
- 4 / 28 / 14

#### Street Address
PO Box 700-222 South Warren St.
Trenton, NJ 08625

#### City, State, Zip Code
Trenton, NJ 08625

#### Name of Contact
Joe Kosek

#### Telephone Number

---

### FACILITY INFORMATION

#### Name of Facility Where Abatement is Taking Place
Greystone Psychiatric Hospital- Garages B

#### Street Address
59 Koch Rd.
Morris Plains

#### County Code
Morris

#### Name of Monitoring Firm Hired by Building Owner
Environmental Connections, Inc

#### ASCM No.

#### Name of Abatement Contractor
BRISTOL ENVIRONMENTAL, INC.

#### Street Address
120 N. Warren St.
Trenton, NJ 08608

#### City, State, Zip Code
Trenton, NJ 08608

#### Telephone No.
609-392-4200

#### License No.
215-788-6040

#### Phone No. 00509

#### Start Date
5 / 12 / 14

#### Scheduled Completion Date
5 / 13 / 14

#### Name of OSHA Monitor
BRISTOL ENVIRONMENTAL, INC.

#### Street Address
1123 BEAVER STREET

#### City, State, Zip Code
BRISTOL, PA 19007

#### Occupancy Status During Abatement (Check only one)
- [x] Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: 7:00AM-3:30PM

#### Scope of Work (Check all that apply)
- [x] 3 sf or ≥ 3sf
- [ ] 160 sf or ≥ 260 sf
- [ ] Renovation
- [ ] Demolition
- [ ] Full Containment with Negative Pressure
- [ ] Mini-Enclosure
- [ ] Glovebag Procedure
- [ ] Non-Exempted (*) and Non-Friable Procedure

#### Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility

| Garage B | Pipe Insulation Wrap and Cut | 40 LF |

<table>
<thead>
<tr>
<th>Location Normally Used Solely by Maintenance/Custodial Staff?</th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is Location Normally Used Solely by Maintenance/Custodial Staff?</td>
<td>(13)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Description of Asbestos-containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)

#### Amount (Specify SF or LF)

#### Abatement Type

#### Name of Registered Waste Hauler
SERVICE TRANSPORT GROUP, INC.

#### NJDEP Waste Hauler ID No.
20990

#### Cubic Yards of Waste

#### Name of Registered Landfill
MINERVA LANDFILL

#### City, State
NEW CASTLE, DE 19720

#### Disposal Date

#### City, State
WAYNESBURG, OH 44688

#### Completed By (Print or Type)
Brian Scafiro

#### Title
Estimator

#### Signature
Brian Scafiro

#### Date
4/28/14

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*Do not use this form for asbestos licensure exempted activities.*
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to N.J.A.C. 8:60 and 12:120)

Date of Notification (1) 4/28/14

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

Type Notification
☒ Initial
☐ Amended
☐ Emergency
☐ Cancellation

Name of Building Owner / Operator (2)
Trenton Board of Education

Street Address
1490 Prospect Street
City, State & Zip Code
Trenton, NJ 08628
Name of Contact
Mr. Everett O. Collins

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
Trenton Central HS West

Street Address
1001 West State Street

City (5) County (6) County Code (7)
Trenton Mercer

Name of Monitoring Firm Hired by Building Owner (8)
Environmental Connection

ASCM No. Name of Abatement Contractor (9)

Environmental Connection

Street Address
120 North Warren Street
City, State & Zip Code
Trenton, NJ 08010

Name of OSHA Monitor
Bristol Environmental Inc.

Street Address
1123 Beaver Street
City, State & Zip Code
Bristol, PA 19007

Project Manager for Monitoring Firm
Dominick Dercole

Telephone Number
609-392-4200

Scheduled Start Date (10) Scheduled Completion Date (11)
5/8/14 5/14/14

Occupancy Status During Abatement (Check only one)
☒ Facility Closed/Vacated During Entire Period of Abatement
☒ Abatement Performed Outside of Normal Hours – 7am to 3pm
Describe: 4 PM to 1:30 AM
□ Facility Occupied During Abatement

Scope of Work (Check all that apply)

☐ ≥3 sf or ≥3 lf
☒ ≥160 sf ±280 lf
☐ Renovation
☒ Demolition

Location of Asbestos-Containing Material (ACM)
TO BE ABATED
in Facility
(13)

Is Location Normally Used Solely by Maintenance or Custodial Staff?
Yes No N/A

Description of Asbestos-Containing Material (ACM)
(i.e., thermal systems insulation, surfacing, VAT or other miscellaneous)

Amount (Specify SF or LF)
Auditorium VAT & Mastic 1,300 SF

Full Containment with Negative Pressure
Minicontainment
Mini-Enclosure
Glove Bag Procedures
Non-Exempted and Non-Friable Procedure

Name of Registered Waste Hauler
Bristol Environmental Inc

NJDEP Waste Hauler ID No.
18706

Cubic Yards of Waste
8 cu yd

Name of Registered Landfill
GROWS Landfill

City, State
Bristol, PA

Disposal Date
5/15/14

City, State
Morrisville, PA

Completed By (Print or Type)
Gino Pizzigoni

Title Project Manager

Signature

Date 4/28/14

GI 14093
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to N.J.A.C. 8:60 and 12:120)

Date of Notification (1) 4/28/14

Name of Building Owner / Operator (2)
State of New Jersey Department of Human Services

Agencies Notified Type Notification
- EPA
- DEP
☒ DOL
- DOH
- DCA

Type of Notification
- Initial
- Amended
- Emergency
- Cancellation

Street Address
P.O. Box 700, 222 South Warren Street
Trenton, NJ 08625

Name of Contact
Pam Harlan

State Information

Name of Facility Where Abatement is Taking Place (3)
Trenton Psychiatric Hospital - Haines Bldg

100 Sullivan Way PO Box 7500

City (5) West Trenton

County (6) Mercer

County Code (7)

8608

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

Square Feet 75000

# of Floors 3

Bldg. Age 40+

Current Use (Prior if being demolished)
Various Services

Name of Abatement Contractor (9)
Bristol Environmental, Inc.

Street Address
1123 Beaver Street

City, State & Zip Code
Bristol, PA 19007

Name of Monitoring Firm Hired by Building Owner (8)
Environmental Collection

ASCM No.

Name of OSHA Monitor
Bristol Environmental Inc.

Street Address
1123 Beaver Street

City, State & Zip Code
Bristol, PA 19007

Name of Registered Waste Hauler
Bristol Environmental Inc
NJDEP Waste Hauler ID No. 18706

Cubic Yards of Waste 1 Cu yd

Name of Registered Landfill
GROWS Landfill

City, State
Bristol, PA

Morrisville, PA

Completed By (Print or Type)
Gino Pizzigoni

Title Project Manager

Signature

Date 4/28/14

GI 13217 A
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to N.J.A.C. 8:60 and 12:12E)

Date of Notification (1) 4/28/14

Name of Building Owner / Operator (2)
State of New Jersey Department of Health Services

Agencies Notified (3)
- EPA
- DEP
- DOL
- DOH

Type Notification
- Initial
- Amended
- Emergency
- Cancellation

Street Address
P.O. Box 700, 222 South Warren Street
City, State & Zip Code
Trenton, NJ 08625

Name of Contact
Pam Harian

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
Trenton Psychiatric Hospital - Marquand

Street Address
100 Sullivan Way PO Box 7500
City (5) West Trenton
County (6) Mercer
County Code (7)

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

Square Feet # of Floors Bldg. Age
75000 3 40+

Current Use (Prior if being demolished)
Various Services

Name of Abatement Contractor (9)
Bristol Environmental, Inc.

Street Address
1123 Beaver Street
City, State & Zip Code
Bristol, PA 19007

License Number 00509

Project Manager for Monitoring Firm
Ryan Broadwater
Telephone Number (215) 788-6040

Name of OSHA Monitor
Bristol Environmental Inc.

Scheduled Start Date (10) 5/12/14
Scheduled Completion Date (11) 5/14/14

Occupancy Status During Abatement (Check only one)
- Facility Closed/Vacated During Entire Period of Abatement
- Abatement Performed Outside of Normal Hours - 7am to 3pm
- Describe: 4PM - 12:30AM
- Facility Occupied During Abatement

Scope of Work (Check all that apply)
- ≥3 sf or ≥3 if
- ≥160 sf or ≥260 if
- Renovation
- Demolition
- Full Containment with Negative Pressure
- Mini-Enclosure
- Glove Bag Procedures
- Non-Exempted and Non-Friable Procedure

Location of Asbestos-Containing Material (ACM)

TO BE ABATED in Facility (13)

Is Location Normally Used
Solely by Maintenance or Custodial Staff? (12)
- Yes
- No
- N/A

Description of Asbestos-Containing Material (ACM)
(i.e., thermal systems insulation, surfacing, VT or other miscellaneous)

Amount (Specify SF or LF)

Abatement Type

- Removal
- Repair
- Encapsulate
- Endorse

Name of Registered Waste Hauler
Bristol Environmental, Inc.

NJDEP Waste Hauler ID No. 18706

Cubic Yards of Waste 1 Cu yd

Name of Registered Landfill
GROWS Landfill

City, State
Bristol, PA

Disposal Date
5/14/14
City, State
Morrisville, PA

Completed By (Print or Type)
Gino Pizzigoni
Title Project Manager
Signature
Date 4/28/14

GI 13217 B
State of New Jersey  
NOTIFICATION OF ASBESTOS ABATEMENT  
(Pursuant to NJAC 8:60 and 5:16)

<table>
<thead>
<tr>
<th>Date of Notification (1)</th>
<th>Name of Building Owner/Operator (2)</th>
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<tbody>
<tr>
<td>4 / 28 / 14</td>
<td>American Continental Properties, LLC</td>
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<table>
<thead>
<tr>
<th>Agencies Notified</th>
<th>Type Notification</th>
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<tbody>
<tr>
<td>□ EPA</td>
<td>Initial</td>
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<tr>
<td>□ DOL/WD</td>
<td>Amended</td>
</tr>
<tr>
<td>□ DHSS</td>
<td>Amendment #1</td>
</tr>
<tr>
<td>□ DCA (NJAC 5:23-8)</td>
<td>Emergency (including justification)</td>
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<table>
<thead>
<tr>
<th>Street Address</th>
<th>City, State, Zip Code</th>
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</thead>
<tbody>
<tr>
<td>460 Park Ave., 11th Floor</td>
<td>New York, NY 10022</td>
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<table>
<thead>
<tr>
<th>Name of Contact</th>
<th>Telephone</th>
</tr>
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<tbody>
<tr>
<td>Guy Morton</td>
<td></td>
</tr>
</tbody>
</table>

**FACILITY INFORMATION**

<table>
<thead>
<tr>
<th>Name of Facility Where Abatement is Taking Place (3)</th>
<th>Type of Facility (4)</th>
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<tbody>
<tr>
<td>Former KMart Plaza</td>
<td>□ School (K-12)</td>
</tr>
<tr>
<td></td>
<td>□ Subchapter 8 (Other than K-12)</td>
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<tr>
<td></td>
<td>□ Other (i.e., private and commercial buildings, homes, etc.)</td>
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<table>
<thead>
<tr>
<th>City (5)</th>
<th>County (6)</th>
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<tbody>
<tr>
<td>Burlington, NJ 08016</td>
<td>Burlington</td>
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</table>

<table>
<thead>
<tr>
<th>County Code (7) (STATE USE ONLY)</th>
<th>Current Use (Prior if being demolished)</th>
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<tbody>
<tr>
<td></td>
<td>Retail</td>
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<table>
<thead>
<tr>
<th>Name of Monitoring Firm Hired by Building Owner (8)</th>
<th>ASCM No.</th>
<th>Name of Abatement Contractor (9)</th>
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</thead>
<tbody>
<tr>
<td>VERTEX</td>
<td>NA</td>
<td>Alliance Environmental Systems</td>
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<thead>
<tr>
<th>Street Address</th>
<th>Telephone No.</th>
<th>License No.</th>
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<tbody>
<tr>
<td>700 Turner Way</td>
<td>610-558-8902</td>
<td>00508</td>
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<table>
<thead>
<tr>
<th>Name of OSHA Monitor</th>
</tr>
</thead>
<tbody>
<tr>
<td>AET</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Start Date (10)</th>
<th>Scheduled Completion Date (11)</th>
</tr>
</thead>
<tbody>
<tr>
<td>5 / 28 / 14</td>
<td>7 / 7 / 14</td>
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**Occupancy Status During Abatement**

<table>
<thead>
<tr>
<th>Facility Closed/Vacated During Entire Period of Abatement</th>
<th>Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement:</th>
<th>Name of OSHA Monitor</th>
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<tbody>
<tr>
<td>□</td>
<td>ZAM 3:30 PM</td>
<td>AET</td>
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</tbody>
</table>

**Scope of Work (Check all that apply)**

<table>
<thead>
<tr>
<th>Scope of Work</th>
<th>Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ ≥3 sf or ≥3 ft²</td>
<td>□ Renovation □ Demolition □ Full Containment with Negative Pressure</td>
</tr>
<tr>
<td>□ 150 sf or ≥250 ft²</td>
<td>□ Abatement Performed Outside of Normal Facility Hours - Describe</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Location Normally Used Solely by Maintenance/Custodial Staff? (12)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Description of Asbestos Containing Material (ACM)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Amount (Specify SF or LF)</th>
</tr>
</thead>
<tbody>
<tr>
<td>78,000 SF</td>
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</tbody>
</table>

**Abatement Type**

<table>
<thead>
<tr>
<th>Abatement Type</th>
<th>Removal</th>
<th>Repair</th>
<th>Encapsulate</th>
<th>Endorse</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
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</tbody>
</table>

**Location of Asbestos-Containing Material (ACM)**

<table>
<thead>
<tr>
<th>Location</th>
<th>Description</th>
<th>Amount (Specify SF or LF)</th>
</tr>
</thead>
<tbody>
<tr>
<td>KMart</td>
<td>VAT/Mastic</td>
<td>78,000 SF</td>
</tr>
<tr>
<td></td>
<td>Duct Insulation</td>
<td>240 SF</td>
</tr>
<tr>
<td></td>
<td>Transite</td>
<td>1000 SF</td>
</tr>
<tr>
<td></td>
<td>Roofing</td>
<td>42,550</td>
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</table>

**Name of Registered Waste Hauler**

<table>
<thead>
<tr>
<th>N.E.T.S.</th>
<th>NJ DEP Waste Hauler ID No.</th>
<th>Cubic Yards of Waste</th>
<th>Name of Registered Landfill</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>18947</td>
<td>150</td>
<td>Allied BFI Imperial</td>
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</table>

<table>
<thead>
<tr>
<th>City, State</th>
<th>Disposal Date</th>
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</thead>
<tbody>
<tr>
<td>Hazard, PA</td>
<td>TBD</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>City, State</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Imperial, PA</td>
<td>4/28/14</td>
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</tbody>
</table>

*Do not use this form for asbestos licensure exempted activities.*
<table>
<thead>
<tr>
<th>Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility</th>
<th>Description of Asbestos-Containing Material (ACM)</th>
<th>Amount (Specify SF or LF)</th>
<th>Removal</th>
<th>Repair</th>
<th>Encapsulate</th>
<th>Enclosure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Space # 3</td>
<td>Roofing</td>
<td>756 SF</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
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<tr>
<td>Space # 4</td>
<td>VAT/Mastic</td>
<td>1400 SF</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Space # 5</td>
<td>Roofing</td>
<td>1415 SF</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Space # 6</td>
<td>VAT/Mastic</td>
<td>2000 SF</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
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</tbody>
</table>
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:12)

Date of Notification (1)
4/10/14

Name of Building Owner/Operator (2)
Borough of Keansburg

 Agencies Notified Type Notification
☐ EPA ☐ Initial
☐ DEP ☐ Amended
☐ DOL ☐ Amendment #
☒ DOH ☒ Emergency (including justification)
☐ DCA ☐ Cancellation

Street Address
29 Church St.

City, State, Zip Code
Keansburg, NJ 07734

Name of Contact
Edward Streidl

Telephone Number

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
FEMA Flood Project - Sandy Related Demolition

Street Address
85 Shore Boulevard

City (5)
Keansburg

County (6)
Monmouth

County Code (7)
(STATE USE ONLY) _____

Square Feet
1,500

# of Floors
2

Bldg. Age
70 yrs. old

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

Current Use (Prior if being demolished)
abandoned

Name of Monitoring Firm Hired by Building Owner (8)
Consulting Services of America, LLP

Name of Abatement Contractor (9)
Yannuzzi Environmental Services, Inc.

Street Address
26 Lorenzo Court

City, State, Zip Code
Aberdeen Township, NJ 07747

Hillsborough, NJ 08844

Project Manager for Monitoring Firm
Michael Chain

Telephone No.
732-921-9223

Telephone No.
908-218-0880

License No.
01228

Name of OSHA Monitor
Yannuzzi Environmental Services, Inc.

Street Address
152 Route 206 South

City, State, Zip Code
Hillsborough, NJ 08844

Start Date (10)
4/14/14

Scheduled Completion Date (11)
4/15/14

Occupy 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)
☒ ≥ 33 sq ft or ≥ 33 ft
☐ ≥ 160 sq ft or ≥ 260 ft²
☐ Renovation
☒ Demolition
☒ Full Containment with Negative Pressure
☐ Mini-Enclosure
☐ Glovebag Procedure
☐ Non-Exempted (*) and Non-Firable Procedure

Location of Asbestos-Containing Material (ACM)
TO BE ABATED
In Facility

Is Location Normally Used Solely by Maintenance/Custodial Staff?
(12)
Yes
No
N/A

Description of Asbestos Containing Material (ACM)
(i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)

Amount
(Specify SF or LF)

Abatement Type
Removal
Repair
Encapsulate
Enclosure

West/Front Bedroom under Carpet
x

9" x 9" Green Floor Tile w/ mastic
120 SF

Name of Registered Waste Hauler
Yannuzzi & Sons, Inc.

NJDEP Waste Hauler ID No.
17467

Cubic Yards of Waste
2

Name of Registered Landfill
Grand Central Sanitation

City, State
Hillsborough, NJ

Disposal Date
4/15/14

City, State
Pen Argyl, PA

Completed by
Anna Bastos

Title
Administrative Assistant

Signature

Date
4/10/14

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