State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NIAC 8-60.7 and 12:120.7)

(Pursuant to NJAC 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) Date of Notification (1) HESS CORPORATION /12 Street Address Agencies Notified Type Notification 1 HESS PLAZA **EPA** Initial Notification City, State, Zip Code 2012 MAY DEP Amended Notification 18 WOODBRIDGE, NEW JERSEY 07095 DOL Cancellation DOH On Hold Name of Contact Telephone Number ASBESTOS CONTROL & DCA EMERGENCY N DAVID CERUI O **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) HESS PLAZA Subchapter 8 (Other than K-12) Other (ie. private & commcl. bldgs., homes, etc.) Street Address Square Feet # of Floors Bldg. Age 1 HESS PLAZA 187,000 13 42 City (5) County (6) County Code (7) Current Use (Prior if being demolished) (STATE USE ONLY) WOODBRIDGE MIDDLESEX COMMERCIAL OFFICE Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) HILLMANN ENVIRONMENTAL PAR ENVIRONMENTAL CORPORATION Street Address Street Address 1600 ROUTE 22 313 SPOOK ROCK ROAD City, State, Zip Code City, State, Zip Code SUFFERN, NEW YORK 10901 UNION, NEW JERSEY 07083 Project Manager for Monitoring Firm Telephone Number License Number Telephone Number MIKE NEHLSEN 908-377-5644 845-369-7500 Expected State Date (10) Sched. Completion Date (11) Name of OSHA Monitor 4/ /12 5/ 30/ 12 QUALITY ENVIRONMENTAL Day Year Month Day Year Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 1376 ROUTE 9 W Abatement Performed Outside of Normal Facility Hours - Describe: Other - Describe: MON. - FRI. 6 PM - 2:30 AM City, State, Zip Code WAPPINGERS FALLS, NY 12590 Scope of Work (Check all that apply) Full Containment with Negative Pressure Demolition Renovation Mini-Enclo:, >3SF OR LF Glovebag Procedure >160 SF OR Non-Friable Procedure Location of Description of Asbestos-Is Location Abatement Type Asbestos-containing normally used Containing Material (ACM) Amount ENCL ENCAPSULE REPAIR REMOVAL Material (ACM) solely by (ie. Thermal systems (Specify SO TO BE ABATED Maint/Custodial insulation, surfacing, VAT, SF or LF) in Facility (13) Staff (12) or other miscellaneous) RE Yes No N/A 3RD FLOOR - ENTIRE X VAT & MASTIC 8,005 SF X 3RD FLOOR - ENTIRE X PIPE FITTINGS 75 LF X 3RD FLOOR - ENTIRE JOINT COMPOUND X 12,180 SF X 3RD FLOOR - ENTIRE COVE BASE MASTIC 495 SF Χ X 3RD FLOOR - ENTIRE X 25 SF TAR 2ND FLOOR- ENTIRE X VAT & MASTIC 8,005 SF X 2ND FLOOR- ENTIRE X COVE BASE MASTIC 495 SF X 2ND FLOOR- ENTIRE X JOINT COMPOUND 12,180 SF X 2ND FLOOR- ENTIRE TAR X X 25 SF 2ND FLOOR- ENTIRE PIPE FITTINGS INSULATION 380 LF X PLAZA-ENTIRE VAT & MASTIC 12,425 SF X PLAZA-ENTIRE COVE BASE MASTIC X 495 SF X PLAZA-ENTIRE JOINT COMPOUND X 18,820 SF X PLAZA-ENTIRE X ACCOUSTICAL PLASTER 7,275 SF X PLAZA-ENTIRE TAR 25 SF X X PLAZA-ENTIRE PIPE FITTINGS INSULATION 200 LF X 1ST FLOOR-MECHANICAL ROOM X DUCT INSULATION 665 SF X 1ST FLOOR-MECHANICAL ROOM X PIPE FITTINGS INSULATION 207 LF X 1ST FLOOR-MECHANICAL ROOM VIBRATION CLOTH X 4 SF 1ST FLOOR-MECHANICAL ROOM **GASKETS** X 10 SF X 1ST FLOOR -BOILER ROOM PIPE FITTINGS INSULATION 45 LF X X 1ST FLOOR-BOILER ROOM DUCT INSULATION 240 SF 1ST FLOOR - CAFETERIA X VAT & MASTIC X 3.000 SF 1ST FLOOR- CAFETERIA JOINT COMPOUND 5,700 SF X 1ST FLOOR - CAFETERIA X COVE BASE MASTIC 175 SF X 1ST FLOOR - CAFETERIA PIPE INSULATION 25 I F X X

DUCT INSULATION

770 SF

1ST FLOOR HALLWAY	Γ'''	Tx.	PIPE FITTINGS	20	LF	хТТ	
1ST FLOOR STORAGE ROOM		X	PIPE FITTINGS		LF	X	
1ST FLOOR STORAGE ROOM		Х	VAT & MASTIC	300) SF	Х	
11TH FLOOR -ENTIRE		Х	VAT & MASTIC	8,0	00 SF	X	
11TH FLOOR -ENTIRE		Х	JOINT COMPOUND	7,9	20 SF	х	
11TH FLOOR PERIMETER		Х	COVE BASE MASTIC	55	SF	Х	
11TH FLOOR-THROUGHOUT		X	PIPE FITTINGS	75	LF	Х	
11TH FLOOR-PERIMETER WALL		Х	TAR MASTIC	25	SF	X	
13TH FLOOR - MER ROOM		x	GASKET	35	SF	X	
13TH FLOOR - MER ROOM		X	PIPE FITTING INSULATION	ON 180) LF	X	
1ST FLOOR OFFICE AREA		Х	FLOOR TILE MASTIC	500) SF	X	
1ST FLOOR OFFICE AREA		X	PIPE FITTINGS	25	LF	X	
1ST FLOOR GENERATOR ROOM		X	PIPE FITTINGS	25	LF	X	
ADDITION TO SCOPE: 12TH FL MER R	MOO	Х	PIPE FITTINGS	35	LF	Х	
Name of Registered Waste Hauler DJM TRANSPORT , LLC	Haule	P Waste or ID No. 26981	Cubic Yards of Waste 10	Name of Registered GROWS LANDFILL			
City, State KEARNEY, NEW JERSEY	1		Disposal Date 6/23/11-05/15/2012	City, State 7 MORRISVILLE, PA			, .
. , , , , , , , , , , , , , , , , , , ,	Fitle DIRECTOR	OF OPER	RATIONS Signature		Date	5/	2/12



State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) · 加州克拉尔 Date of Notification (1) HESS CORPORATION 0 1 Street Address /11 Type Notification Agencies Notified 1 HESS PLAZA **EPA** Initial Notification City, State, Zip Code DEP Amended Notification WOODBRIDGE, NEW JERSEY 07095 DOL Cancellation On Hold DOH Name of Contact Telephone Number DCA **EMERGENCY NOTIFICATION** DAVID CERULO FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) HESS PLAZA Subchapter 8 (Other than K-12) Other (ie. private & commcl. bldgs., homes, etc.) Street Address Square Feet # of Floors Bldg. Age 1 HESS PLAZA 187,000 42 Current Use (Prior if being demolished) City (5) County (6) County Code (7) WOODBRIDGE MIDDLESEX (STATE USE ONLY) COMMERCIAL OFFICE Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) HILLMANN ENVIRONMENTAL PAR ENVIRONMENTAL CORPORATION 17 Street Address Street Address 313 SPOOK ROCK ROAD 1600 ROUTE 22 City, State, Zip Code City, State, Zip Code SUFFERN, NEW YORK 10901 UNION, NEW JERSEY 07083 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number MIKE NEHLSEN 908-377-5644 845-369-7500 460 Expected State Date (10) Sched, Completion Date (11) Name of OSHA Monitor QUALITY ENVIRONMENTAL 12 5/ 30/ Month Day Year Month Day Year Occupancy Status During Abatement (Check only one) Street Address 1376 ROUTE 9 W Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe: Other - Describe: MON. - FRI. 6:00 PM - 4:00 AM City, State, Zip Code WAPPINGERS FALLS, NY 12590 Scope of Work (Check all that apply) Full Containment with Negative Pressure Demolition Mini-Enclo:, Renovation >3SF OR LF Glovebag Procedure >160 SF OR Non-Friable Procedure Location of Is Location Description of Asbestos-Abatement Type Containing Material (ACM) Asbestos-containing normally used Amount REPAIR ENCLOSURE REMOVAL ENCAPSULE (Specify Material (ACM) solely by (ie. Thermal systems TO BE ABATED Maint/Custodial insulation, surfacing, VAT, SF or LF) in Facility (13) Staff (12) or other miscellaneous) Yes No N/A 3RD FLOOR - ENTIRE VAT & MASTIC 8,005 SF 3RD FLOOR - ENTIRE PIPE FITTINGS 75 LF X X 3RD FLOOR - ENTIRE X JOINT COMPOUND 12,180 SF X 3RD FLOOR - ENTIRE COVE BASE MASTIC X 495 SF X 3RD FLOOR - ENTIRE TAR 25 SF X X 2ND FLOOR- ENTIRE VAT & MASTIC 8,005 SF X X 2ND FLOOR- ENTIRE X COVE BASE MASTIC 495 SF X 2ND FLOOR- ENTIRE X JOINT COMPOUND 12,180 SF X 2ND FLOOR- ENTIRE 25 SF X X 380 LF X 2ND FLOOR- ENTIRE X PIPE FITTINGS INSULATION PLAZA-ENTIRE VAT & MASTIC 12,425 SF X X PLAZA-ENTIRE X COVE BASE MASTIC 495 SF X X PLAZA-ENTIRE X JOINT COMPOUND 18,820 SF PLAZA-ENTIRE X ACCOUSTICAL PLASTER 7,275 SF Х PLAZA-ENTIRE X TAR 25 SF X PLAZA-ENTIRE X PIPE FITTINGS INSULATION 200 LF X 1ST FLOOR-MECHANICAL ROOM 665 SF X DUCT INSULATION X 1ST FLOOR-MECHANICAL ROOM PIPE FITTINGS INSULATION 207 LF X X 1ST FLOOR-MECHANICAL ROOM 4 SF X VIBRATION CLOTH 10 SF X 1ST FLOOR-MECHANICAL ROOM GASKETS PIPE FITTINGS INSULATION 1ST FLOOR -BOILER ROOM 45 LF X X 1ST FLOOR-BOILER ROOM X DUCT INSULATION 240 SF X 1ST FLOOR - CAFETERIA X VAT & MASTIC 3,000 SF X 1ST FLOOR- CAFETERIA JOINT COMPOUND 5,700 SF X X 1ST FLOOR - CAFETERIA X COVE BASE MASTIC 175 SF X

PIPE INSULATION

Cubic Yards of Waste

25 LF

Name of Registered Landfill

X

NJDEP Waste

1ST FLOOR - CAFETERIA

Name of Registered Waste Hauler

ORT, LLC	Hauler ID No. 26981	1	GROWS LANDFILL	
, NEW JERSEY		Disposal Date 6/22/11-05/15/2012	City, State MORRISVILLE, PA	1 1
J by (Print or Type) VIIN SANCHEZ	Title DIRECTOR OF OPE	RATIONS Signature	Da	6/8/11



State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) Date of Notification (1) HESS CORPORATION Street Address /11 Agencies Notified Type Notification 1 HESS PLAZA FPA Initial Notification City, State, Zip Code WOODBRIDGE, NEW JERSEY 07095 DEP Amended Notification DOL Cancellation Name of Contact DOH On Hold Telephone Number DCA **EMERGENCY NOTIFICATION** DAVID CERULO **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) HESS PLAZA Other (ie. private & commcl. bldgs., homes, etc.) Street Address Square Feet # of Floors Bldg. Age 187,000 1 HESS PLAZA 42 13 Current Use (Prior if being demolished) City (5) County (6) County Code (7) COMMERCIAL OFFICE WOODBRIDGE MIDDLESEX (STATE USE ONLY) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) PAR ENVIRONMENTAL CORPORATION HILLMANN ENVIRONMENTAL Street Address Street Address 313 SPOOK ROCK ROAD 1600 ROUTE 22 City, State, Zip Code City, State, Zip Code SUFFERN, NEW YORK 10901 UNION, NEW JERSEY 07083 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number 845-369-7500 MIKE NEHLSEN 908-377-5644 Expected State Date (10) Name of OSHA Monitor Sched. Completion Date (11) QUALITY ENVIRONMENTAL 6/ 23 / 5/ 30/ 12 Month Day Year Month Day Year Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 1376 ROUTE 9 W Abatement Performed Outside of Normal Facility Hours - Describe: Other - Describe: MON. - FRI. 6:00 PM - 2:30 AM City, State, Zip Code WAPPINGERS FALLS, NY 12590 Scope of Work (Check all that apply) Full Containment with Negative Pressure Mini-Enclos. Demolition Renovation SF OR LF Glovebag Procedure >160 SF OR Non-Friable Procedure Abatement Type Location of Is Location Description of Asbestos-Asbestos-containing normally used Containing Material (ACM) Amount REPAIR ENCAPSULE ENCLOSURE REMOVAL solely by (Specify Material (ACM) (ie. Thermal systems TO BE ABATED Maint/Custodial insulation, surfacing, VAT, SF or LF) in Facility (13) Staff (12) or other miscellaneous) Yes No N/A 3RD FLOOR - ENTIRE VAT & MASTIC 8,005 SF 3RD FLOOR - ENTIRE 75 LF PIPE FITTINGS X 3RD FLOOR - ENTIRE X JOINT COMPOUND 12,180 SF X 3RD FLOOR - ENTIRE COVE BASE MASTIC 495 SF X X 3RD FLOOR - ENTIRE 25 SF X TAR X 2ND FLOOR- ENTIRE VAT & MASTIC 8,005 SF X COVE BASE MASTIC 495 SF 2ND FLOOR- ENTIRE X X 2ND FLOOR- ENTIRE JOINT COMPOUND 12,180 SF X X 2ND FLOOR-ENTIRE X TAR 25 SF X 2ND FLOOR- ENTIRE PIPE FITTINGS INSULATION 380 LF X X PLAZA-ENTIRE **VAT & MASTIC** 12,425 SF PLAZA-ENTIRE COVE BASE MASTIC X 495 SF X PLAZA-ENTIRE X JOINT COMPOUND 18,820 SF Х ACCOUSTICAL PLASTER PLAZA-ENTIRE X 7,275 SF X PLAZA-ENTIRE TAR 25 SF X X PLAZA-ENTIRE PIPE FITTINGS INSULATION 200 LF X X X 1ST FLOOR-MECHANICAL ROOM DUCT INSULATION 665 SF PIPE FITTINGS INSULATION 1ST FLOOR-MECHANICAL ROOM X X 207 LF 1ST FLOOR-MECHANICAL ROOM VIBRATION CLOTH 4 SF X X 1ST FLOOR-MECHANICAL ROOM 10 SF **GASKETS** X X 1ST FLOOR -BOILER ROOM PIPE FITTINGS INSULATION 45 LF X X 1ST FLOOR-BOILER ROOM **DUCT INSULATION** 240 SF X 1ST FLOOR - CAFETERIA Х VAT & MASTIC 3,000 SF X **IST FLOOR- CAFETERIA** JOINT COMPOUND 5,700 SF X X 1ST FLOOR - CAFETERIA COVE BASE MASTIC 175 SF X X 1ST FLOOR - CAFETERIA PIPE INSULATION 25 LF Name of Registered Waste Hauler NUDEP Waste Cubic Yards of Waste Name of Registered Landfill DJM TRANSPORT . LLC GROWS LANDFILL Hauler ID No.

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/ ty, State KEARNEY, NEW JERSEY		Disposal 6/23/11-0	Date 05/15/2012	City	State/ BRISVILLE: PA				,	
Completed by (Print or Type) Title	Title DIRECTOR OF OP	ERATIONS	Signature	X	XX	Date	61	121	111	
			17	70		-	-	7		_



State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:50-7 and 12:120-7) Name of Building Owner/Operator (2) HESS CORPORATION Date of Notification (1) Street Address /11 3 2012 MAY Type Notification 1 HESS PLAZA Agencies Notified City, State, Zip Code Initial Notification EPA WOODBRIDGE, NEW JERSEY 07095 DEP Amended Notification #3 ASBESTOS CONTROL & Cancellation DOL LICENSING Name of Contact Telephone Number DOH On Hold EMERGENCY NOTIFICATION DAVID CERULO DCA FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Subchapter 8 (Other than K-12) HESS PLAZA Other (ie. private & commol. bldgs., homes, etc.) # of Floors Bldg. Age Square Feet Street Address 42 187,000 1 HESS PLAZA Current Use (Prior if being demolished) County Code (7) City (5) County (6) (STATE USE ONLY) COMMERCIAL OFFICE MIDDLESEX WOODBRIDGE Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. PAR ENVIRONMENTAL CORPORATION 17 HILLMANN ENVIRONMENTAL Street Address Street Address 313 SPOOK ROCK ROAD 1600 ROUTE 22 City, State, Zip Code City, State, Zip Code SUFFERN, NEW YORK 10901 UNION, NEW JERSEY 07083 Telephone Number License Number Telephone Number Project Manager for Monitoring Firm 460 845-369-7500 908-377-5644 MIKE NEHLSEN Name of OSHA Monitor Sched. Completion Date (11) Expected State Date (10) QUALITY ENVIRONMENTAL 5 / 30/ 12 23 / Day Year Month Day Year Month Occupancy Status During Abatement (Check only one) Street Address 1376 ROUTE 9 W Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe: City, State, Zip Code Other - Describe: MON. - FRI. 6:00 PM - 2:30 AM WAPPINGERS FALLS, NY 12590 Full Containment with Negative Pressure Scope of Work (Check all that apply) Mini-Enclo:, Renovation Demolition >3SF OR LF Glovebag Procedure Non-Friable Procedure >160 SF OR Abatement Type Description of Asbestos-Location of Is Location Containing Material (ACM) Amount ENCLOSURE REPAIR ENCAPSULE Asbestos-containing normally used REMOVAL (Specify solely by (ie. Thermal systems Material (ACM) SF or LF) insulation, surfacing, VAT, TO BE ABATED Maint/Custodial or other miscellaneous) Staff (12) in Facility (13) Yes No N/A 8,005 SF VAT & MASTIC X X 3RD FLOOR - ENTIRE 75 LF X 3RD FLOOR - ENTIRE X PIPE FITTINGS JOINT COMPOUND 12,180 SF 3RD FLOOR - ENTIRE X 495 SF X COVE BASE MASTIC X 3RD FLOOR - ENTIRE 25 SF X 3RD FLOOR - ENTIRE TAR 8,005 SF X VAT & MASTIC X 2ND FLOOR- ENTIRE 495 SF X X COVE BASE MASTIC 2ND FLOOR- ENTIRE JOINT COMPOUND 12,180 SF X 2ND FLOOR- ENTIRE X TAR 25 SF X 2ND FLOOR- ENTIRE PIPE FITTINGS INSULATION 380 LF X 2ND FLOOR- ENTIRE X VAT & MASTIC 12,425 SF X X PLAZA-ENTIRE COVE BASE MASTIC 495 SF X X PLAZA-ENTIRE 18,820 SF X JOINT COMPOUND PLAZA-ENTIRE ACCOUSTICAL PLASTER 7,275 SF X PLAZA-ENTIRE X 25 SF X TAR PLAZA-ENTIRE X 200 LF X PIPE FITTINGS INSULATION PLAZA-ENTIRE DUCT INSULATION 665 SF X X 1ST FLOOR-MECHANICAL ROOM PIPE FITTINGS INSULATION 207 LF X 1ST FLOOR-MECHANICAL ROOM X 4 SF X 1ST FLOOR-MECHANICAL ROOM X VIBRATION CLOTH 10 SF X GASKETS 1ST FLOOR-MECHANICAL ROOM X PIPE FITTINGS INSULATION 45 LF 1ST FLOOR -BOILER ROOM X X 240 SF DUCT INSULATION 1ST FLOOR-BOILER ROOM VAT & MASTIC 3,000 SF X X 1ST FLOOR - CAFETERIA IST FLOOR- CAFETERIA JOINT CCMPOUND 5,700 SF X X 175 SF X COVE BASE MASTIC **IST FLOOR - CAFETERIA** X PIPE INSULATION 25 LF IST FLOOR - CAFETERIA X

DUCT INSULATION

X

13TH FLOOR - MER ROOM

X

770 SF

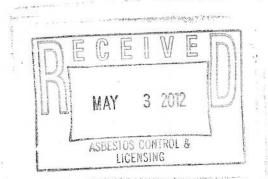
Registered Waste Hauler RANSPORT, LLC	NJDEP Waste Hauler ID No. 26981	Cubic Yards of Waste 1	Name of Registered Landfill GROWS LANDFILL	
Jily, State KEARNEY, NEW JERSEY		Disposal Date 6/23/11-05/15/2012	MOFIRISVILLE, PA	12/11
Completed by (Print or Type) BENJAMIN SANCHEZ	Title DIRECTOR OF OPE	ERATIONS Signature	XX 11/	20/11



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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) Date of Notification (1) HESS CORPORATION /11 Street Address (1) Type Notification Agencies Notified 1 HESS PLAZA **EPA** Initial Notification City, State, Zip Code DEP Amended Notification WOODBRIDGE, NEW JERSEY 07095 MAY DOL Cancellation DOH On Hold Name of Contact Telephone Number DCA **EMERGENCY NOTIFICATION** DAVID CERULO FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) HESS PLAZA Subchapter 8 (Other than K-12) Other (ie. private & commcl. bldgs., homes, etc.) Street Address Square Feet # of Floors Bldg. Age 1 HESS PLAZA 187,000 13 City (5) County (6) County Code (7) Current Use (Prior if being demolished) WOODBRIDGE (STATE USE ONLY) MIDDLESEX COMMERCIAL OFFICE Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) HILLMANN ENVIRONMENTAL 17 PAR ENVIRONMENTAL CORPORATION Street Address Street Address 1600 ROUTE 22 313 SPOOK ROCK ROAD City, State, Zip Code City, State, Zip Code UNION, NEW JERSEY 07083 SUFFERN, NEW YORK 10901 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number MIKE NEHLSEN 908-377-5644 845-369-7500 460 Expected State Date (10) Sched. Completion Date (11) Name of OSHA Monitor 23 / 5/ 30/ 12 QUALITY ENVIRONMENTAL Day Month Year Month Day Year Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 1376 ROUTE 9 W Abatement Performed Outside of Normal Facility Hours - Describe: MON. - FRI. 6:00 PM - 2:30 AM Other - Describe: City, State, Zip Code WAPPINGERS FALLS, NY 12590 Scope of Work (Check all that apply) Full Containment with Negative Pressure Demolition Renovation Mini-Enclor, >3SF OR LF Glovebag Procedure >160 SF OR Non-Friable Procedure Location of Is Location Description of Asbestos-Abatement Type Asbestos-containing normally used Containing Material (ACM) Amount ENCAPSULE ENCL REMOVAL REPAIR Material (ACM) solely by (ie. Thermal systems (Specify TO BE ABATED Maint/Custodial SO insulation, surfacing, VAT, SF or LF) in Facility (13) Staff (12) or other miscellaneous) URE Yes No N/A 3RD FLOOR - ENTIRE VAT & MASTIC 8,005 SF X 3RD FLOOR - ENTIRE X PIPE FITTINGS 75 LF IX 3RD FLOOR - ENTIRE JOINT COMPOUND 12,180 SF 3RD FLOOR - ENTIRE X COVE BASE MASTIC 495 SF X 3RD FLOOR - ENTIRE X TAR 25 SF X 2ND FLOOR- ENTIRE VAT & MASTIC X 8,005 SF X 2ND FLOOR- ENTIRE COVE BASE MASTIC 495 SF X X 2ND FLOOR- ENTIRE X JOINT COMPOUND 12,180 SF X 2ND FLOOR- ENTIRE X 25 SF ΙX 2ND FLOOR- ENTIRE PIPE FITTINGS INSULATION X 380 LF X PLAZA-ENTIRE X VAT & MASTIC 12,425 SF X PLAZA-ENTIRE COVE BASE MASTIC X 495 SF X PLAZA-ENTIRE JOINT COMPOUND 18,820 SF X PLAZA-ENTIRE ACCOUSTICAL PLASTER 7,275 SF X PLAZA-ENTIRE TAR X 25 SF X PLAZA-ENTIRE PIPE FITTINGS INSULATION 200 LF X IST FLOOR-MECHANICAL ROOM X DUCT INSULATION 665 SF X 1ST FLOOR-MECHANICAL ROOM PIPE FITTINGS INSULATION X 207 LF X 1ST FLOOR-MECHANICAL ROOM VIBRATION CLOTH 4 SF X 1ST FLOOR-MECHANICAL ROOM GASKETS 10 SF X 1ST FLOOR -BOILER ROOM PIPE FITTINGS INSULATION X 45 LF X 1ST FLOOR-BOILER ROOM DUCT INSULATION 240 SF X 1ST FLOOR - CAFETERIA X VAT & MASTIC 3,000 SF X 1ST FLOOR- CAFETERIA JOINT COMPOUND 5,700 SF X X IST FLOOR - CAFETERIA COVE BASE MASTIC 175 SF X IST FLOOR - CAFETERIA PIPE INSULATION 25 LF 13TH FLOOR - MER ROOM X **DUCT INSULATION** 770 SF X

, registered Waste Hauler, ransport, LLC	NJDEP \ Hauler IE	No.	fards of Waste 1	Name of Registered Landfill GROWS LANDFILL	
ity, State KEARNEY, NEW JERSEY		Dispos 6/23/11	al Date -05/15/2012/	MORRISVILLE, PA	
Completed by (Print or Type) BENJAMIN SANCHEZ	Title DIRECTOR O	OPERATIONS	Signature	Date	8/22/1/



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Date of Notification (1)				-	Name of Building		erator	2)			1.00	Charle	where he a complete
5. ACT 10. ACT	900			1.	HESS CORPORA	TION		police and the second	******	erietings o	Mary Service M	=process	Carenta Age of
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	Initial Notification Amended Notification #5 Cancellation On Hold EMERGENCY NOTIFICATION ment is Taking Place (3) County (6) MIDDLESEX d by Building Owner (8) NION, NEW JERSEY 07083 Firm Telephone Nu 908-377-5644 Sched. Completion 5 / Month ment (Check only one) ed During Entire Period of Abatem of Outside of Normal Facility Hours MON FRI. 6:00 PM - 2:30 AM Ply) X Renovation Is Location normally used solely by Maint/Custodial Staff (12) Yes No N/A X VAT X PIPE X JOIN X COV X TAR X VAT X COV X JOIN X TAR X PIPE X VAT X COV X JOIN X ACCO X JOIN X A		I HESS PLAZA	- 111			5 (0 1	5	- W	FI		
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	otification (1) / 25 /11 Notified Type Notification EPA Initial Notification DEP X Amended Notification DOL Cancellation DOH On Hold DCA EMERGENCY NOTIFICATION Country (6) MIDDLESEX Country (6) MIDDLESEX Conitoring Firm Hired by Building Owner (8) ENVIRONMENTAL ESS TE 22 Zip Code UNION, NEW JERSEY 07083 ager for Monitoring Firm Telephone Notes (1) Sched. Completion 23 / /11 Day Year Month Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatemabatement Performed Outside of Normal Facility Hour Other - Describe: MON FRI. 6:00 PM - 2:30 AM Ork (Check all that apply) Permolition Material (ACM) TO BE ABATED In Facility (13) ENTIRE X VANABOBES AND NI/A ENTIRE X VANABOBE	b V	VOODBRIDGE, N	EW JERSE	Y 0709	5	22/6/1				# /		
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	JEMEROLINO	- 110	111107			TION				*100			
Name of Facility Where Abatem	ent is Taking	Place	2 (3)		ACILITY INFORM	Type of	F1111	\$	ASBE			ROL	
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Street Address							e Feet	# of Floor		-g,		Bldg.	
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City (5)	3000000	(C-200)	-55-27-45-55-55	C	ounty Code (7)	Current	Use (P	ior if being de	molish	ed)			
ACCOMPANIES AND ACCOMPANIES AN				(ST	ATE USE ONLY)	COMME							
	by Building C	wner	(8)		ASCM No.			ment Contrac			770	17,000	
					17			MENTAL COR	PORA	TION			
1600 ROUTE 22						Street Ac		CK BOAD					
City, State, Zip Code		ASSET						CK ROAD					
	ON, NEW JEI	RSEY	07083			City, Stat		V YORK 1090	1				
Project Manager for Monitoring Fin		-		e Number		Telephon			cense	Numl	ner		
MKE NEHLSEN		90	8-377-	5644		845-369-			50		,,,,		
xpected State Date (10)	d State Date (10) 6 / 23 / /11 Day Year Month Sched. Comple 5 / Month Status During Abalement (Check only one) Facility Closed/Vacated During Entire Period of Ab			etion Date	(11)	Name of					-		
	6 / 23 / /11 5 / h Day Year Month ancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of A				/ 12	1		ONMENTAL					
	HLSEN 908-377- d State Date (10) Sched. Comp 6 / 23 / /11 5 / Day Year Month cy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Al Abatement Performed Outside of Normal Facility				Year								
	6 / 23 / /11 5 / Day Year Month Cy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement Performed Outside of Normal Facility F					Street Add	776	.,					
Abatement Performed C	Outside of Nor	mal F	acility i	tours - De	scribe:	1376 ROL	JIE 91	V					
						City, State	Zin C	ode	-			-	
X >160 SF OR					Non-Friab	Procedure le Procedur	e ,						
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TO BE ABATED		int/Cu	stodial		insulation, surfaci			SF or LF)	REMOVA	REPAIR	ENCAPS	ENCLOS	
in Facility (13)					or other miscella	neous)	- 1		A	1~	SULE	18	
	Yes	No	N/A						1	_	im	둶	
D FLOOR - ENTIRE		-	Y	VAT & MA	LETIC			005.05	-	-	-	-	
D FLOOR - ENTIRE		1	-	PIPE FIT			-	3,005 SF '5 LF	X	+	+	-	
D FLOOR - ENTIRE		1			OMPOUND		-	2,180 SF	x	-	+	+	
FLOOR - ENTIRE			_		SE MASTIC		-	95 SF	X		1		
D FLOOR - ENTIRE		-	-	TAR					1	1	T		
FLOOR- ENTIRE		-	-	VAT & MA	P. LIL.		-	5 SF	X	-	+		
FLOOR- ENTIRE							8	,005 SF	Х			_	
The state of the s		-	-		SE MASTIC		8	,005 SF 95 SF	X				
			х	JOINT CO			8	,005 SF 95 SF 2,180 SF	X X				
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M TRANSPORT, LLC	Hauler 2	ID No. 6981	1		GROWS LANDFILL				
City, State KEARNEY, NEW JERSEY			sposal Date 23/11-05/15/2	012	NORRISVILLE PA	104	1-1	111	
Completed by (Print or Type) BENJAMIN SANCHEZ	Title DIRECTOR	OF OPERAT		ature	780	Date S	125	/ //	



A. Comment			N	OTIFIC	ATION OF ASBESTO	ABATEMENT							
				(Purs	nant to NJAC 8:60-7 at		(2)				WY CO.	ART DAY TO STATE OF	1/4
Date of Notification (1)					HESS CORPORATION		AND AND AND ADDRESS OF THE ADDRESS O	Mit + Egyr	ikousedizu	of Michael	THE .	May 1 - W	į.
9 / 9	/11				Street Address	- i T	FR	TE	T	\\//	15	100	1
	e Notification	1			1 HESS PLAZA			匚	ij	/!/	E		1
TEPA T	Initial Notifi	icatio	n		City, State, Zip Code		- T	and an array	2 10.20			11 1 1 1	
DEP X	Amended N	Votifi	cation #6	i	WOODBRIDGE, NE	W JERSEY 070		.,	0	0.04	9		
X DOL	Cancellatio	n					Telephone Nu	-	3	201		11-/1	6
X DOH X	On Hold		OTIFICA	TION	Name of Contact DAVID CERULO	200	- I lelennone Nin	moer)					
DCA	EMERGEN	CYF	OTIFICA	TION	FACILITY INFORMA	TION	· · ·	CTAR	CON	TDAL	Q.	1	li ii
Name of Facility Where Abate	ment is Takin	na Pl	ace (3)		FACILITY INFORMA	Type of Facil			NSIN		CE		H H
riante of racinty where Abate	ment is rann	9, 1	400 (0)			School	K-12)	-			and the last	Arrest and the second district	
HESS PLAZA						Subchap	ter 8 (Other than	K-12)	10754HS	-12,54,5-9	t animals	DAY	
						X Other (ie	. private & comm			mes,	etc.)		
Street Address						Square Feel	# of Floors			ь	ldg. A 42	ge	
1 HESS PLAZA	County (6)			-	County Code (7)		Prior if being demo	olished	d)				-
City (5) WOODBRIDGE	MIDDLESE				(STATE USE ONLY)	COMMERCIAL			•				
Name of Monitoring Firm Hire	A STORY OF THE PARTY OF THE PAR		ner (8)		ASCM No.	Name of Abat	ement Contracto	or (9)					
HILLMANN ENVIRONMENTAL	SS. 30	3	19 /8-24		17		NMENTAL CORP	ORAT	ION	5/0/5			
Street Address						Street Address							
1600 ROUTE 22						City, State, Zip	STAGE AND THE STATE OF THE SECOND	-			-		
City, State, Zip Code	INION, NEW .	JERS	EY 0708	3			W YORK 10901						
Project Manager for Monitoring I			Telepho		nber	Telephone Nu		ense N	lumbe	er			5 5 57 18
MIKE NEHLSEN			908-377	-5644		845-369-7500	460)					
Expected State Date (10)		Sche		letion	Date (11)		OSHA Monitor						
6 / 23 /	/11 Year	B.A.	5/ onth	1	30/ 12 Day Year	QUALITY ENV	IRONMENTAL						
Month Day Occupancy Status During Abate	The second second				Jay , cur	Street Address							
Facility Closed/Vaca	ted During En	tire P	eriod of A	Abatemo	ent	1376 ROUTE !	w w						
Abatement Performe					- Describe:	01 01 1 7	0.1.						
X Other - Describe:	MON FRI	6:00) PM - 2:3	IMA DI		City, State, Zip	WAPPINGER	S FAL	LS, N	Y 125	90		
Scope of Work (Check all that a	pply)				X Full Conta	inment with Neg	ative Pressure						
Demolition		Rend	ovation		X Mini-Encl	CONTRACTOR OF THE PARTY OF THE							
>3SF OR LF X >160 SF OR						Procedure le Procedure							
Location of		ls	Location	T	Description of As		T	T		Abate	ment	Туре	
Asbestos-containing	,		mally use	d	Containing Materi	al (ACM)	Amount	吊	R	E	E		
Material (ACM)			olely by		(ie. Thermal sy		(Specify SF or LF)	REMOVAL	REPAIR	ENCAPSU	ENCLOSU		
TO BE ABATED in Facility (13)			t/Custodi taff (12)	ai	insulation, surfact or other miscella		Jaron Li)	P	12	UŠ	SS	1	
arr domy (10)		Yes		4					1_	F	R		
							1	-	+-	-	-		
3RD FLOOR - ENTIRE			X		& MASTIC		8,005 SF 75 LF	X	+-	-	+		
3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE			X	_	FITTINGS IT COMPOUND		12,180 SF	x	+	-	+	-	
3RD FLOOR - ENTIRE			X		E BASE MASTIC		495 SF	х					
3RD FLOOR - ENTIRE			X	TAR			25 SF	X	_	_	-		
2ND FLOOR- ENTIRE			X		& MASTIC		8,005 SF 495 SF	X	+-	+-	+		
2ND FLOOR- ENTIRE 2ND FLOOR- ENTIRE			X		E BASE MASTIC IT COMPOUND		12,180 SF	X	-	+	1		-
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2ND FLOOR- ENTIRE			х	_	FITTINGS INSULATI	ON	380 LF	Х			1		
PLAZA-ENTIRE			X	_	& MASTIC		12,425 SF	X	-	-	-		
PLAZA-ENTIRE			X		E BASE MASTIC IT COMPOUND		495 SF 18,820 SF	X	1	+	+-		
PLAZA-ENTIRE PLAZA-ENTIRE		_	X		OUSTICAL PLASTER		7,275 SF	X	1	T	1		
PLAZA-ENTIRE			X	TAR			25 SF	X					
PLAZA-ENTIRE			Х		FITTINGS INSULATION	ON	200 LF	X	-	-	1		
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1ST FLOOR-MECHANICAL ROOTST FLOOR-MECHANICAL ROOTST		- 230	X		ATION CLOTH		4 SF	X	-				
1ST FLOOR-MECHANICAL RO			X		KETS		10 SF	х					
1ST FLOOR -BOILER ROOM			Х		FITTINGS INSULATION	N	45 LF	X	-	-	-		
1ST FLOOR-BOILER ROOM			X		T INSULATION		240 SF 3,000 SF	X	-	-	-		
1ST FLOOR - CAFETERIA IST FLOOR- CAFETERIA			X	_	& MASTIC IT COMPOUND		5,700 SF	X		-	-		
IST FLOOR - CAFETERIA			x		E BASE MASTIC		175 SF	X					
IST FLOOR - CAFETERIA			Х	PIPE	INSULATION		25 LF	Χ					1 1
13TH FLOOR - MER ROOM			Х	DUC	T INSULATION		770 SF	X			L		

Registered Waste Hauler	NJDEP Waste Hauler ID No. 26981	Cubic Yards of Waste 1	Name of Registered Landfill GROWS LANDFILL	
City, State KEARNEY, NEW JERSEY		Disposal Date 6/23/11-05/15/2012	MORPHEVILLE, PA	2 2 1
Completed by (Print or Type) BENJAMIN SANCHEZ	Title DIRECTOR OF OPER	Signature Signature	Date	9-9-11



			*	Na	me of Building	Owner/Operato	r (2)	one stories comme	r in management	marging.	Grane Constant	prykaren
Date of Notification (1)				HE	SS CORPORAT	ION 🍦		- F	11	t) //	Tr-1	The same of
9 / 2	6 /11			Sti	reet Address		FATE	n E		\\	E	1111
Agencies Notified	Type Notification			11	HESS PLAZA		ILU/=-			and the same is an		
EPA	Initial Notific	cation	1	Cit	ty, State, Zip Cod	е	INI					
DEP	X Amended N	otific	ation #	7 W	OODBRIDGE, N	EW JERSEY 07	095	AY	3	201	2	
X DOL	Cancellatio	n					Lad tasks			LVI		kana
X DOH	On Hold	20000		CONTRACTOR OF THE STATE OF THE	me of Contact		Telephone	Number				1
DCA	EMERGEN	CY N	OTIFIC	ATION DA	IVID CERULO				MAK	TROL	Ç,	ent
				FAC	CILITY INFORMA		rio	1101	MEIN	C		
lame of Facility Where A	batement is Takin	g Pla	ce (3)			Type of Fac					- Shinter H	WORLD-WATER CO.
JECC DI AZA						-				3652	Lu ciata	47.124.1-1
HESS PLAZA							opter 8 (Other that ie, private & com		Service Corp.	omee	etc.)	
Street Address			-			Square Fe			190., 11		Bldg. A	~
HESS PLAZA						187,000	13				42	•
City (5)	County (6)		Confedence	Cot	unty Code (7)	Current Use	(Prior if being de	molishe	ed)	V-10/V-10		
VOODBRIDGE	MIDDLESE			(STA	TE USE ONLY)	COMMERCIA	AL OFFICE		552			
lame of Monitoring Firm		Own	er (8)		ASCM No.		itement Contra					
ILLMANN ENVIRONMEN	TAL				17		NMENTAL COR	RPORAT	TION			
treet Address						Street Addres						
600 ROUTE 22							ROCK ROAD				-	
ity, State, Zip Code	UNION, NEW JI	PSE	א חקחם	3		City, State, Z	p Code EW YORK 1090	11				
roject Manager for Monitor						Telephone N		icense l	Numbe	er		
IKE NEHLSEN						845-369-7500	1	60		-,		
xpected State Date (10)	Is				(11)	Name of OSI						
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ccupancy Status During A		12 miles See	100000			Street Addres						
	acated During Enti Ormed Outside of No				oriha:	1376 ROUTE	9 00					
X Other - Describe					GIDE.	City, State, Zi	o Code	-		-		
							WAPPINGE	RS FAL	LS, N	Y 125	90	
cope of Work (Check all th						ainment with Ne	gative Pressure					
Demolition	X	enov	ation		Mini-Encl							
>3SF OR LF X >160 SF OR						g Procedure ble Procedure						
Location of	T	ls I	ocation	Т	Description of A		T			41 1		
Asbestos-conta	00000		ally use	200	Containing Mater					Mhate	ment	Lyne
Material (ACI		sol	ely by	100			Amount	20			ment I III	Туре
TO BE ABATI		laint/		20.0	(ie. Thermal sy	al (ACM) stems	(Specify	REMO				Туре
in Facility (13	3)		Custodi	al i	nsulation, surfac	al (ACM) stems ng, VAT,		REMOVA	REPAIR	ENCAP	ENCLO	Туре
	Y	Sta	ff (12)			al (ACM) stems ng, VAT,	(Specify	REMOVAL		ENCAP	ENCLO	Туре
	Y		ff (12)		nsulation, surfac	al (ACM) stems ng, VAT,	(Specify					уре
D FLOOR - ENTIRE	Y	Sta	ff (12)		nsulation, surfact or other miscella	al (ACM) stems ng, VAT,	(Specify			ENCAP	ENCLO	Туре
	Y	Sta	ff (12) lo N//	X	nsulation, surfact or other miscella	al (ACM) stems ng, VAT,	(Specify SF or LF)	X X		ENCAP	ENCLO	Туре
D FLOOR - ENTIRE D FLOOR - ENTIRE	\ <u>\</u>	Sta	ff (12)	VAT & MA PIPE FITT JOINT CO	nsulation, surface or other miscella STIC TINGS	al (ACM) stems ng, VAT,	(Specify SF or LF) 8,005 SF 75 LF 12,180 SF	X X X		ENCAP	ENCLO	Туре
D FLOOR - ENTIRE D FLOOR - ENTIRE D FLOOR - ENTIRE	Y	Sta	ff (12)	VAT & MA PIPE FITT JOINT CO COVE BAS	nsulation, surface or other miscella STIC	al (ACM) stems ng, VAT,	(Specify SF or LF) 8,005 SF 75 LF 12,180 SF 495 SF	X X X		ENCAP	ENCLO	Туре
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ED FLOOR - ENTIRE	Y	Sta	ff (12) lo N// X X X X X X	VAT & MA PIPE FITT JOINT CO COVE BAS TAR VAT & MA COVE BAS	nsulation, surface or other miscella strice in the surface in the	al (ACM) stems ng, VAT,	(Specify SF or LF) 8,005 SF 75 LF 12,180 SF 495 SF 25 SF 8,005 SF 495 SF	X		ENCAP	ENCLO	Туре
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Completed by (Print or Type) BENJAMIN SANCHEZ	Title	CTOR	OF OPER	Signature	XXX		ate	91	26/1
City, State KEARNEY, NEW JERSEY				Disposal Date 6/23/11-05/15/2012	MORPHSVILLE			21	1
Name of Registered Waste Hauler DJM TRANSPORT , LLC	-	Haule	P Waste r ID No. 26981	Cubic Yards of Waste 1	Name of Reging GROWS LAN				
1ST FLOOR STORAGE ROOM			X	VAT & MASTIC		300 SF	X		
31 FLOOR STORAGE ROOM			Х	PIPE FITTINGS	13 LF	Х			
LOOR HALLWAY			X	PIPE FITTINGS		20 LF	X		<u> </u>



State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60-7 and 12:120-7) Date d Notification (1) Name of Building Owner/Operator (2) HESS CORPORATION /11 Agencies Notified Street Address Type Notification 1 HESS PLAZA EPA Initial Notification DEP Amended Notification #8 City, State, Zip Code DOL WOODBRIDGE, NEW JERSEY 07095 Cancellation DOH On Hold DCA EMERGENCY NOTIFICATION Name of Contact relephone Number ONTROL & DAVID CERULO Na Fre OF Facility Where Abatement is Taking Place (3) FACILITY INFORMATION ISING HESS PLAZA Type of Facility (4) School (K-12) Street Address Subchapter 8 (Other than K-12) 1 HESS PLAZA Other (ie. private & commol. bldgs., homes, etc.) City (5) Square Feet County (6) # of Floors WOODBRIDGE 187,000 Bldg. Age Name of Monitoring Firm Hired by Building Owner (8) MIDDLESEX County Code (7) 13 Current Use (Prior if being demolished) (STATE USE ONLY) HILLMANN ENVIRONMENTAL COMMERCIAL OFFICE ASCM No. Street Address Name of Abatement Contractor (9) 1600 ROUTE 22 PAR ENVIRONMENTAL CORPORATION City, State, Zip Code Street Address 313 SPOOK ROCK ROAD UNION, NEW JERSEY 07083 Project Manager for Monitoring Firm City, State, Zip Code MIKE NEHLSEN SUFFERN, NEW YORK 10901 Telephone Number Expected State Date (10) 908-377-5644 Telephone Number Sched. Completion Date (11) License Number 845-369-7500 23 / Month Name of OSHA Monitor 5/ Year Occupancy Status During Abatement (Check only one) 30/ QUALITY ENVIRONMENTAL Facility Closed/Vacated During Entire Period of Abatement Day Year Abatement Performed Outside of Normal Facility Hours - Describe: Street Address Other - Describe: 1376 ROUTE 9 W MON. - FRI. 6 PM - 2:30 AM SAT. & SUN 7AM-3:30PM Scope of Work (Check all that apply) City, State, Zip Code Demolition WAPPINGERS FALLS, NY 12590 Full Containment with Negative Pressure Renovation >3SF OR LF Mini-Enclor, >160 SFOR Glovebag Procedure Location of Non-Friable Procedure Asbestos-containing Is Location Description of Asbestosnormally used Material (ACM) Containing Material (ACM) TO BE ABATED solely by Abatement Type (ie. Thermal systems in Facility (13) Maint/Custodial Amount REMOVAL insulation, surfacing, VAT, ENCAPSULE ENCLOSU Staff (12) (Specify or other miscellaneous) No N/A SF or LF) 3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE VAT & MASTIC 3RD FLOOR - ENTIRE PIPE FITTINGS 8,005 SF 3RD FLOOR - ENTIRE JOINT COMPOUND X 75 LF 3RD FLOOR - ENTIRE COVE BASE MASTIC 12,180 SF 2ND FLOOR- ENTIRE X X TAR 495 SF 2ND FLOOR- ENTIRE X X VAT & MASTIC 25 SF 2ND FLOOR- ENTIRE X COVE BASE MASTIC 8,005 SF 2ND FLOOR- ENTIRE X JOINT COMPOUND 495 SF 2ND FLOOR- ENTIRE X X 12,180 SF PIPE FITTINGS INSULATION PLAZA-ENTIRE X 25 SF X PLAZA-ENTIRE X VAT & MASTIC 380 LF PLAZA-ENTIRE COVE BASE MASTIC X 12,425 SF X PLAZA-ENTIRE JOINT COMPOUND X 495 SF PLAZA-ENTIRE ACCOUSTICAL PLASTER X 18,820 SF X PLAZA-ENTIRE TAR 7,275 SF PIPE FITTINGS INSULATION 1ST FLOOR-MECHANICAL ROOM X X 25 SF 1ST FLOOR-MECHANICAL ROOM X DUCT INSULATION X 200 LF 1ST FLOOR-MECHANICAL ROOM PIPE FITTINGS INSULATION X X 665 SF 1ST FLOOR-MECHANICAL ROOM X X VIBRATION CLOTH 207 LF 1ST FLOOR -BOILER ROOM GASKETS 4 SF PIPE FITTINGS INSULATION X IST FLOOR-BOILER ROOM X 10 SF X X DUCT INSULATION 1ST FLOOR - CAFETERIA 45 LF IST FLOOR- CAFETERIA X X VAT & MASTIC 240 SF IST FLOOR - CAFETERIA X JCINT COMPOUND X 3,000 SF X X COVE BASE MASTIC IST FLOOR - CAFETERIA 5,700 SF 13TH FLOOR - MER ROOM X PIPE INSULATION X 175 SF X DUCT INSULATION X 25 LF X 770 SF X

Completed by (Print or Type) BENJAMIN SANCHEZ	Title	CTOR	OF OPER	RATIONS	Signature	1115		ate	7/	22/1	
City, State KEARNEY, NEW JERSEY				Disposal 6/23/11-0	5/15/2012	City State	E, PA		ے	/ ,.	_
Name of Registered Waste Hauler DJM TRANSPORT , LLC		Haule	P Waste r ID No. 26981	Cubic Ya	rds of Waste 1	Name of Regi	stered Landfill DFILL				
ST FLOOR STORAGE ROOM			X	M & TAV	ASTIC		300 SF	X	-		
FLOOR STORAGE ROOM			Х	PIPE FIT	TINGS		13 LF	Х		T	
LOOR HALLWAY			X	PIPE FIT	TINGS		20 LF	X	1	1	_



State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) HESS CORPORATION Date of Notification (1) /11 Street Address 1 HESS PLAZA Type Notification Agencies Notified EPA Initial Notification City, State, Zip Code 2012 MAY WOODBRIDGE, NEW JERSEY 07095 DFP Amended Notification DOL Cancellation On Hold #9 Name of Contact Telenhone Number DOH CONTROL & **EMERGENCY NOTIFICATION** DAVID CERULO DCA CHENC FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Subchapter 8 (Other than K-12) HESS PLAZA Other (ie. private & commol, bldgs., homes, etc.) # of Floors Square Feet Bldg. Age Street Address 1 HESS PLAZA 187,000 13 42 County Code (7) Current Use (Prior if being demolished) City (5) County (6) (STATE USE ONLY) COMMERCIAL OFFICE WOODBRIDGE MIDDLESEX ASCM No. Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) PAR ENVIRONMENTAL CORPORATION HILLMANN ENVIRONMENTAL 17 Street Address Street Address 313 SPOOK ROCK ROAD 1600 ROUTE 22 City, State, Zip Code City, State, Zip Code SUFFERN, NEW YORK 10901 UNION, NEW JERSEY 07083 Telephone Number Telephone Number License Number Project Manager for Monitoring Firm MIKE NEHLSEN 908-377-5644 845-369-7500 460 Expected State Date (10) Sched, Completion Date (11) Name of OSHA Monitor 5/ 30/ 12 QUALITY ENVIRONMENTAL Month Day Month Year Year Day Street Address Occupancy Status During Abatement (Check only one) 1376 ROUTE 9 W Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe: MON. - FRI. 6 PM - 2:30 AM SAT. & SUN 7AM-3:30PM City, State, Zip Code Other - Describe: WAPPINGERS FALLS, NY 12590 Full Containment with Negative Pressure Scope of Work (Check all that apply) Demolition Renovation Mini-Enclor. >3SE OR LE Glovebag Procedure >160 SF OR Non-Friable Procedure Abatement Type Location of Is Location Description of Asbestos-Containing Material (ACM) Amount Asbestos-containing normally used ENCAPSULE ENCLOSURE REMOVAL Material (ACM) solely by (ie. Thermal systems (Specify TO BE ABATED Maint/Custodial insulation, surfacing, VAT, SF or LF) in Facility (13) Staff (12) or other miscellaneous) Yes No N/A 3RD FLOOR - ENTIRE VAT & MASTIC 8,005 SF 75 LF X 3RD FLOOR - ENTIRE X PIPE FITTINGS 3RD FLOOR - ENTIRE JOINT COMPOUND 12,180 SF X X 3RD FLOOR - ENTIRE X COVE BASE MASTIC 495 SF lχ 25 SF X 3RD FLOOR - ENTIRE TAR 8,005 SF 2ND FLOOR- ENTIRE X VAT & MASTIC X 2ND FLOOR- ENTIRE COVE BASE MASTIC 495 SF X 2ND FLOOR- ENTIRE X JOINT COMPOUND 12,180 SF X 25 SF 2ND FLOOR- ENTIRE X TAR X PIPE FITTINGS INSULATION 380 LF X 2ND FLOOR- ENTIRE X PLAZA-ENTIRE VAT & MASTIC 12,425 SF X X COVE BASE MASTIC 495 SF PLAZA-ENTIRE JOINT COMPOUND 18,820 SF X PLAZA-ENTIRE 7,275 SF PLAZA-ENTIRE ACCOUSTICAL PLASTER X X PLAZA-ENTIRE X TAR 25 SF X 200 LF PLAZA-ENTIRE PIPE FITTINGS INSULATION lΧ X 1ST FLOOR-MECHANICAL ROOM DUCT INSULATION 665 SF X X 1ST FLOOR-MECHANICAL ROOM X PIPE FITTINGS INSULATION 207 LF VIBRATION CLOTH X 1ST FLOOR-MECHANICAL ROOM X 4 SF 10 SF 1ST FLOOR-MECHANICAL ROOM X GASKETS X 1ST FLOOR -BOILER ROOM PIPE FITTINGS INSULATION 45 LF X 240 SF 1ST FLOOR-BOILER ROOM DUCT INSULATION X X 1ST FLOOR - CAFETERIA VAT & MASTIC 3,000 SF X 1ST FLOOR- CAFETERIA JOINT COMPOUND 5,700 SF X COVE BASE MASTIC 175 SF 😹 X IST FLOOR - CAFETERIA X 1ST FLOOR - CAFETERIA PIPE INSULATION 25 LF X X

DUCT INSULATION

770 SF

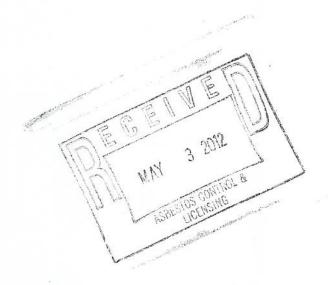
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Completed by (Print or Type) BENJAMIN SANCHEZ	Title DIRE	CTOR	OF OPER	RATIONS	Signature	SVY	L	Date	0/1	4111
City, State KEARNEY, NEW JERSEY		585742-00-044.		Disposal 6/23/11-0	5/15/2012	City, State				111
Name of Registered Waste Hauler DJM TRANSPORT , LLC	[1] [1] [1] [1] [1] [1] [1] [1] [1] [1]		ID No.	Cubic Ya	rds of Waste 1	GROWS LA	gistered Landfill NDFILL			
ST FLOOR STORAGE ROOM		-	X	VAT & M	ASTIC		300 SF	X		
FLOOR STORAGE ROOM			Х	PIPE FIT			13 LF	X		
JOR HALLWAY			X	PIPE FIT	TINGS		20 LF	Х		



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	nitial Notificat	ion		City,	State, Zip Code		#	141	NA AN		3	201	4	-		+-
	Amended Not		n #10		DBRIDGE, NEV		0709	5						1		
	Cancellation			Niere	e of Contact		<u> </u>	<u> </u>	alanhana	Numba	ONT	ROL	G.	And		1
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Name of Facility Where Abatemen	t is Taking F	lace (3	3)			Type of	Facili	ty (4								-11.50
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HESS PLAZA						-			(Other that ate & com			hom	es. c	etc.)		
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Name of Monitoring Firm Hired by		vner (8)	(SIAIL	ASCM No.			_	nt Contra	tor (9)	_			-		
HILLMANN ENVIRONMENTAL		•			17	PAR EN	VIRO	ME	NTAL CO	RPORA	TION	1				
Street Address						Street Ac			DOAD							
1600 ROUTE 22 City, State, Zip Code		-				313 SPO City, Stat							-	-		
5.11	UNION, NEW JERSEY 07083								ORK 1090	1						
Project Manager for Monitoring Firm	ct Manager for Monitoring Firm Telephone Nu			Number		Telephon	e Nu	nber	1	icense	Nurr	ber				
MIKE NEHLSEN	NEHLSEN 908-377-5644					845-369-				160						
Expected State Date (10)	200		omple: 5 /	tion Date (11	1)	Name of QUALITY			nior IMENTAL							
Month Day Year		Aonth .	***	Day	Year											
Occupancy Status During Abatement Facility Closed/Vacated D		30 20 37075	of Abo	tement	8	Street Ad 1376 RO										
Abatement Performed Ou					oe:	1376 KO	UIES									
	ON FRI. 6 I		C. C			City, State	e, Zip				00 E			-1000		
Scope of Work (Check all that apply)				f	Full Contai	 nment with	Noa		/APPINGI	ERS FA	LLS,	NY	1259	90		
Demolition	X Rer	novatio	n	ŀ	Mini-Enclo		i Neg	auve	riessuie							
>3SF OR LF				[2	X Glovebag											
X >160 SF OR Location of		s Locat	tion 1		Non-Friabl	a Procedur										
Asbestos-containing	- 1						0	T		T	-	AF	votor	nont	Tim	
Material (ACM)		rmally	used		escription of Asi entaining Materia	bestos-		T	Amount	22	Z		pater	_	Тур	9
		solely	used by	Co	ontaining Materia (ie. Thermal sys	bestos- al (ACM) stems	8		(Specify	REMO	XII TA			_	Тур	9
TO BE ABATED in Facility (13)		solely int/Cus	used by todial	Co	ontaining Materia (ie. Thermal sys sulation, surfacin	bestos- al (ACM) stems ag, VAT,				>	KETAIK		ENCAPSI	ENCLOSE	Тур	9
in Facility (13)	1	solely	used by todial (2)	Co	ontaining Materia (ie. Thermal sys	bestos- al (ACM) stems ag, VAT,			(Specify	REMOVAL	ZETAIZ		ENCAPSI	_	Тур	Э
in Facility (13)	1	solely l int/Cus Staff (1	used by todial 2) N/A	ins	ontaining Materia (ie. Thermal sys sulation, surfacin or other miscellar	bestos- al (ACM) stems ag, VAT,			(Specify SF or LF	1	KETAIX		ENCAPSI	ENCLOSE	Тур	9
in Facility (13) 3RD FLOOR - ENTIRE	1	solely l int/Cus Staff (1	used by todial 2) N/A X	ins o VAT & MAS	ontaining Materia (ie. Thermal sys sulation, surfacin or other miscellar	bestos- al (ACM) stems ag, VAT,			(Specify SF or LF)	X	XET AIX		ENCAPSI	ENCLOSE	Тур	9
in Facility (13) 3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE	1	solely l int/Cus Staff (1	used by stodial 2) N/A X	ins	ontaining Materia (ie. Thermal sys- sulation, surfacin or other miscellar TIC IGS	bestos- al (ACM) stems ag, VAT,		75	(Specify SF or LF)	X X X	KETAK		ENCAPSI	ENCLOSE	Тур	9
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IST FLOOR STORAGE ROOM			X	VAT & MASTIC		300 SF	Х		
Name of Registered Waste Hauler DJM TRANSPORT , LLC		Haule	P Waste er ID No. 26981	Cubic Yards of Waste	Name of Register GROWS LANDF				<u> </u>
City, State KEARNEY, NEW JERSEY				Disposal Date 6/23/11-05/15/2012	City, State	5 _A			,
Completed by (Print or Type) BENJAMIN SANCHEZ	Title DIRE	CTOR	OF OPER	RATIONS Signature	3/1	C	ate /	11	4/11



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Agencies Notified Type Noti	ification		1 HES	SS PLAZA		VA14	3	2017	2	L	/
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Name of Facility Where Abatement is	s Taking Pla	ace (3)	171012	111 1111 0111111	Type of Facili			-			
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Street Address 1 HESS PLAZA					187,000	13	1			42	,-
	unty (6)		Count	ty Code (7)	Current Use (F	rior if being demo	lished))			
	DLESEX		(STATE	USE ONLY)	COMMERCIA						
Name of Monitoring Firm Hired by B	uilding Owr	ner (8)		ASCM No.	n. Name of Abatement Contractor (9) PAR ENVIRONMENTAL CORPORATION						
HILLMANN ENVIRONMENTAL			1	17	Street Address		UKAII	UN		_	
Street Address 1600 ROUTE 22					313 SPOOK ROCK ROAD						
City, State, Zip Code					City, State, Zip		-		- 10.7		
The second secon	, NEW JERS	SEY 07083				W YORK 10901					
Project Manager for Monitoring Firm					Telephone Nu		ense N	lumbe			
MIKE NEHLSEN	E NEHLSEN 908-377-56				845-369-7500 Name of OSH	460					
Expected State Date (10)	Sch	ed. Comple 5 /	30/	12		IRONMENTAL					
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[20 Bec 20	N FRI. 6 P				City, State, Zip	Code					
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Scope of Work (Check all that apply)	- In		-	Full Conta	inment with Neg	ative Pressure					
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1-001 01421			12	X Glovebag	Procedure						
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STEEDON STORAGE ROOM		1 1	IA.	ILILE LILL	HYGO		113 LT			
1ST FLOOR STORAGE ROOM			X	VAT & MA	STIC		300 SF	X		
Name of Registered Waste Hauler DJM TRANSPORT , LLC		NJDEP I Hauler II	O No.	Cubic Yan	ds of Waste 1	Name of Reg GROWS LAN	istered Landfill			<u> </u>
City, State KEARNEY, NEW JERSEY				Disposal 0 6/23/11-05		City, State	E, PA			
Completed by (Print or Type) BENJAMIN SANCHEZ	Title DIRE	CTOR O	F OPEF	RATIONS	Signature /	SXA		Date /	1//	4/11



State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) Date of Notification (1) HESS CORPORATION /12 Street Address Agencies Notified Type Notification 1 HESS PLAZA Initial Notification City, State, Zip Code DEP Amended Notification #13 WOODBRIDGE, NEW JERSEY 07095 DOL Cancellation X DOH On Hold Name of Contact CENSING DCA **EMERGENCY NOTIFICATION** DAVID CERULO **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) HESS PLAZA Subchapter 8 (Other than K-12) Other (ie. private & commcl. bldgs., homes, etc.) Street Address Square Feet # of Floors Bldg. Age 1 HESS PLAZA 187,000 42 City (5) County (6) Current Use (Prior if being demolished) County Code (7) WOODBRIDGE MIDDLESEX (STATE USE ONLY) COMMERCIAL OFFICE Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) HILLMANN ENVIRONMENTAL 17 PAR ENVIRONMENTAL CORPORATION Street Address Street Address 1600 ROUTE 22 313 SPOOK ROCK ROAD City, State, Zip Code City, State, Zip Code UNION, NEW JERSEY 07083 SUFFERN, NEW YORK 10901 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number MIKE NEHLSEN 908-377-5644 845-369-7500 Expected State Date (10) Sched. Completion Date (11) Name of OSHA Monitor 11/ /11 QUALITY ENVIRONMENTAL 5/ 30/ 12 Month Year Month Year Day Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 1376 ROUTE 9 W Abatement Performed Outside of Normal Facility Hours - Describe: MON. - FRI. 6 PM - 2:30 AM Other - Describe: City, State, Zip Code WAPPINGERS FALLS, NY 12590 Scope of Work (Check all that apply) Full Containment with Negative Pressure Demolition Renovation Mini-Enclos >3SF OR LF Glovebag Procedure >160 SF OR Non-Friable Procedure Description of Asbestos-Location of Is Location Abatement Type Asbestos-containing normally used Containing Material (ACM) Amount ENCAPSULE ENCLOSURE REMOVAL Material (ACM) solely by (ie. Thermal systems (Specify TO BE ABATED Maint/Custodial insulation surfacing VAT SF or LF) Staff (12) in Facility (13) or other miscellaneous) Yes No N/A 3RD FLOOR - ENTIRE X VAT & MASTIC 8,005 SF 3RD FLOOR - ENTIRE PIPE FITTINGS X 75 LF X 3RD FLOOR - ENTIRE X JOINT COMPOUND 12,180 SF х 3RD FLOOR - ENTIRE COVE BASE MASTIC 495 SF 3RD FLOOR - ENTIRE X TAR 25 SF X 2ND FLOOR- ENTIRE X VAT & MASTIC 8,005 SF X 2ND FLOOR- ENTIRE X COVE BASE MASTIC 495 SF X 2ND FLOOR- ENTIRE JOINT COMPOUND 12,180 SF X X 2ND FLOOR- ENTIRE TAR 25 SF X 2ND FLOOR- ENTIRE PIPE FITTINGS INSULATION X 380 LF PLAZA-ENTIRE X VAT & MASTIC 12,425 SF X PLAZA-ENTIRE COVE BASE MASTIC 495 SF X X PLAZA-ENTIRE X JOINT COMPOUND 18,820 SF X PLAZA-ENTIRE ACCOUSTICAL PLASTER 7,275 SF X X PLAZA-ENTIRE X TAR 25 SF PLAZA-ENTIRE PIPE FITTINGS INSULATION X X 200 LF 1ST FLOOR-MECHANICAL ROOM X DUCT INSULATION 665 SF X 1ST FLOOR-MECHANICAL ROOM PIPE FITTINGS INSULATION 207 LF X 1ST FLOOR-MECHANICAL ROOM VIBRATION CLOTH X 4 SF X 1ST FLOOR-MECHANICAL ROOM X GASKETS 10 SF X 1ST FLOOR -BOILER ROOM PIPE FITTINGS INSULATION 45 LF X 1ST FLOOR-BOILER ROOM DUCT INSULATION X 240 SF X 1ST FLOOR - CAFETERIA VAT & MASTIC X X 3,000 SF 1ST FLOOR- CAFETERIA JOINT COMPOUND 5,700 SF X 1ST FLOOR - CAFETERIA X COVE BASE MASTIC 175 SF X

PIPE INSULATION

DUCT INSULATION

25 LF

770 SF

X

X

1ST FLOOR - CAFETERIA

Completed by (Print or Type) BENJAMIN SANCHEZ	Title		OF OPER	RATIONS Signature	XX	D	ate //	12	3/12
City, State KEARNEY, NEW JERSEY				Disposal Date 6/23/11-05/15/2012	City, State			1	1
DJM TRANSPORT , LLC			r ID No. 26981	100	GROWS LANDI				
Name of Registered Waste Hauler		NJDE	P Waste	Cubic Yards of Waste	Name of Registe	L ered Landfill			
11TH FLOOR-PERIMETER WALL		\vdash	х	TAR MASTIC		25 SF	Х	-	
11TH FLOOR-THROUGHOUT			X	PIPE FITTINGS		75 LF	X		
11TH FLOOR PERIMETER			X	COVE BASE MASTIC		55 SF	Х		
11TH FLOOR -ENTIRE			Х	JOINT COMPOUND		7,920 SF	X		
11TH FLOOR -ENTIRE			х	VAT & MASTIC		8,000 SF	X		
1ST FLOOR STORAGE ROOM			Х	VAT & MASTIC		300 SF	X		
1ST FLOOR STORAGE ROOM			X	PIPE FITTINGS		13 LF	Х		
1ST FLOOR HALLWAY		1 1	X	PIPE FITTINGS		20 LF	X	1	`



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DCA										II + (j - t	INV		2 2	112	114
NAME OF FACILITY Where Abatement is Taking Place (3)										Telephone	Numb		1 1	156.	1
Type of Facility (4)		LIEMERO	PENC	Y NO	HEIC	CATION	DAVID CERULO								
Type of Facility (4)	11- 15- 111-		157				FACILITY INFORMA	ATION	-	Laurenten			0.0100.000	A D	· l
School (K-12)	Name of Facility Where A	batement is Ta	aking	Place	e (3)				of Faci	lity (A)				儿位	
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County (6)										1	ors				
MIDOLESEX	City (5)	County	(6)	0.77		1	County Code (7)	_						42	
Name of Absternert Contractor (s)		MIDDLE	SEX			1 0		Curren	it Use (i	Prior if being de	emolisi	hed)			
Fill	Name of Monitoring Firm	Hired by Build	ina C	wner	(8)									Direction of the Control	
Street Address Stre	HILLMANN ENVIRONMENT	TAL			101		The state of the s	Name o	of Abat	ement Contra	ctor (9	9)			
131 SPOOK ROCK ROAD											RPORA	ATION	1	- 12	
UNION, NEW JERSEY 07083	1600 ROUTE 22									7					
UNION, NEW JERSEY 07083	City, State, Zip Code	*													
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Abatement Performed Outside of Normal Facility Hours - Describe: X Other - Describe: Mon FRI. 6 PM - 2:30 AM City, State, Zip Code WAPPINGERS FALLS, NY 12590 Demoiltion - 3SF OR LF - 3SF OR	Facility Closed/V	acted During E	K Only	one)				Street Ad	ddress						
City, State, Zip Code Warpingers Falls, NY 12590 Cope of Work (Check all that apphy) Demolition ->35F OR LF X > 160 SF OR Location of Asbestos-containing Multerial (ACM) TO BE ABATED in Facility (13) DEFLOOR - ENTIRE DELOOR - ENTIRE	Abatement Porfes	mad Out-ide	nure	Period	d of A	Abatemen	1	1376 RO	OUTE 9	W					
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Completed by (Print or Type) BENJAMIN SANCHEZ	Title DIRE	CTOF	R OF OPE	RATIONS Signature	10	Da	ate /	12	4/12
City, State KEARNEY, NEW JERSEY				Disposal Date 6/23/11-05/15/2012	City State	, PA		1	/
Name of Registered Waste Hauler DJM TRANSPORT , LLC	-	Haul	EP Waste er ID No. 26981	Cubic Yards of Waste 100	Name of Regi				
						-	++	\dashv	
TOTAL COST - MERCHOOM				PIPE PITTING INSULATION	JN	180 LF	X		
13TH FLOOR - MER ROOM		+	X	GASKET PIPE FITTING INSULATE	ON.	35 SF	X		ļ
11TH FLOOR-PERIMETER WALL 13TH FLOOR - MER ROOM		-	X	TAR MASTIC		25 SF	X		
11TH FLOOR-THROUGHOUT		-	X	PIPE FITTINGS		75 LF	X		
11TH FLOOR PERIMETER		_	X	COVE BASE MASTIC		55 SF	X		
11TH FLOOR -ENTIRE			X	JOINT COMPOUND		7,920 SF	X		-
,11TH FLOOR -ENTIRE			X	VAT & MASTIC		8,000 SF	X		
1ST FLOOR STORAGE ROOM			X	VAT & MASTIC		300 SF	X		
1ST FLOOR STORAGE ROOM			X	PIPE FITTINGS		13 LF	X		1
1ST FLOOR HALLWAY	102210	1	X	PIPE FITTINGS		20 LF	X		



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Date of Notification (1)				HESS CORPORAT	TION		North Cores	nistia n eti spo	The second	9554	7/5
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Agencies Notified	Type Notifica	ation			1 HESS PLAZA			= U	17.7	L		- The second
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WOODBRIDGE	MIDDLE				TATE USE ONLY)	COMMERCIA	Prior if being der	nolishe	ed).			
Name of Monitoring Fir	rm Hired by Build	ing Ow	ner (8)		ASCM No.		tement Contrac	tor (0)		_		_
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1600 ROUTE 22 City, State, Zip Code						313 SPOOK						
Oity, State, Zip Code	UNION, NE	W IFP	SEY 07092			City, State, Zi						
Project Manager for Mon		ounc	_	e Numbe	ar .	Telephone Nu	EW YORK 1090		NI			_
MIKE NEHLSEN			908-377-			845-369-7500	1	cense 60	Numb	er		
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Abatement Pe	erformed Outside of	of Norma	al Facility H	lours - De	ecrihe.	1376 KOUTE	9 W					
X Other - Descr			M - 2:30 A		John De.	City, State, Zip	Code					_
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Completed by (Print or Type) BENJAMIN SANCHEZ	Title DIRECTO	R OF OPER	Signature	3/	Da	te 2	128	112
City, State KEARNEY, NEW JERSEY			Disposal Date 6/23/11-05/15/2012	City State			1	
Name of Registered Waste Hauler DJM TRANSPORT , LLC		DEP Waste ler ID No. 26981	Cubic Yards of Waste 100	Name of Registere GROWS LANDFIL		_1		
			-			11		1
			THE THING INSULAT	ION 1	80 LF	X	+	-
13TH FLOOR - MER ROOM		1 x	PIPE FITTING INSULAT		5 SF	X		
13TH FLOOR - MER ROOM		×	GASKET		5 SF	X		
11TH FLOOR-PERIMETER WALL		1 12	PIPE FITTINGS TAR MASTIC		5 LF	X		
11TH FLOOR-THROUGHOUT		X X	COVE BASE MASTIC		5 SF	X		
11TH FLOOR PERIMETER		X	JOINT COMPOUND	7	,920 SF	X		
11TH FLOOR -ENTIRE		X	VAT & MASTIC	8	,000 SF	X		
1ST FLOOR STORAGE ROOM 11TH FLOOR -ENTIRE		X	VAT & MASTIC		00 SF	X		
1ST FLOOR STORAGE ROOM	- 11	X	PIPE FITTINGS		3 LF	X		1



State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) Date of Notification (1) HESS CORPORATION 18 112 Street Address Agencies Notified Type Notification 1 HESS PLAZA **EPA** Initial Notification City, State, Zip Code ZUIZ DEP Amended Notification WOODBRIDGE, NEW JERSEY 07095 DOL Cancellation DOH On Hold Name of Contact Telephone Number CONTROL & DCA **EMERGENCY N** DAVID CERULO NSING FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) HESS PLAZA Subchapter 8 (Other than K-12) Other (ie. private & commol. bldgs., homes, etc.) Street Address Bldg. Age Square Feet # of Floors 1 HESS PLAZA 187,000 42 City (5) County (6) County Code (7) Current Use (Prior if being demolished) WOODBRIDGE MIDDLESEX (STATE USE ONLY) COMMERCIAL OFFICE Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) HILLMANN ENVIRONMENTAL 17 PAR ENVIRONMENTAL CORPORATION Street Address Street Address 1600 ROUTE 22 313 SPOOK ROCK ROAD City, State, Zip Code City, State, Zip Code UNION, NEW JERSEY 07083 SUFFERN, NEW YORK 10901 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number MIKE NEHLSEN 908-377-5644 845-369-7500 Expected State Date (10) Sched. Completion Date (11) Name of OSHA Monitor 5 / 30/ QUALITY ENVIRONMENTAL 12 Month Day Year Day Year Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 1376 ROUTE 9 W Abatement Performed Outside of Normal Facility Hours - Describe: Other - Describe: MON. - FRI. 6 PM - 2:30 AM City, State, Zip Code WAPPINGERS FALLS, NY 12590 Scope of Work (Check all that apply) Full Containment with Negative Pressure Demolition Repovation Mini-Enclo:, >3SF OR LF Glovebag Procedure >160 SF OR Non-Friable Procedure Location of Is Location Description of Asbestos-Abatement Type Asbestos-containing normally used Containing Material (ACM) Amount REPAIR ENCAPSULE ENCLOSURE REMOVA Material (ACM) solely by (ie. Thermal systems (Specify TO BE ABATED Maint/Custodial insulation, surfacing, VAT, SF or LF) in Facility (13) Staff (12) or other miscellaneous) Yes No N/A 3RD FLOOR - ENTIRE VAT & MASTIC 8,005 SF 3RD FLOOR - ENTIRE PIPE FITTINGS 75 LF X 3RD FLOOR - ENTIRE X JOINT COMPOUND 12,180 SF X 3RD FLOOR - ENTIRE X COVE BASE MASTIC 495 SF X 3RD FLOOR - ENTIRE TAR X 25 SF X 2ND FLOOR- ENTIRE VAT & MASTIC 8,005 SF IX 2ND FLOOR- ENTIRE X COVE BASE MASTIC 495 SF 2ND FLOOR- ENTIRE X JOINT COMPOUND 12,180 SF X 2ND FLOOR- ENTIRE 25 SF X 2ND FLOOR- ENTIRE X PIPE FITTINGS INSULATION 380 LF X PLAZA-ENTIRE VAT & MASTIC 12,425 SF X PLAZA-ENTIRE COVE BASE MASTIC 495 SF X PLAZA-ENTIRE X JOINT COMPOUND 18,820 SF X PLAZA-ENTIRE ACCOUSTICAL PLASTER X 7,275 SF X PLAZA-ENTIRE X TAR 25 SF X PLAZA-ENTIRE X PIPE FITTINGS INSULATION 200 LF X 1ST FLOOR-MECHANICAL ROOM DUCT INSULATION X 665 SF X 1ST FLOOR-MECHANICAL ROOM PIPE FITTINGS INSULATION 207 LF X 1ST FLOOR-MECHANICAL ROOM VIBRATION CLOTH X 4 SF X 1ST FLOOR-MECHANICAL ROOM X **GASKETS** 10 SF X 1ST FLOOR -BOILER ROOM X PIPE FITTINGS INSULATION 45 LF X 1ST FLOOR-BOILER ROOM X DUCT INSULATION 240 SF X 1ST FLOOR - CAFETERIA X VAT & MASTIC 3,000 SF X 1ST FLOOR- CAFETERIA X JOINT COMPOUND 5.700 SF X 1ST FLOOR - CAFETERIA X COVE BASE MASTIC 175 SF Х 1ST FLOOR - CAFETERIA X PIPE INSULATION 25 LF

DUCT INSULATION

770 SF

X

Title		Disposal Date 6/23/11-05/15/2012 Signature	City, State MORRISVILLE		ate ,	101
		Cubic Yards of Waste 10				
-+	++	 		+	+	
	X	PIPE FITTINGS		25 LF	X	+
	X	PIPE FITTINGS		_		
	X	FLOOR TILE MASTIC		500 SF		
	X	PIPE FITTING INSULATI	ION	180 LF	X	
	x	GASKET		35 SF	X	
	X	TAR MASTIC		25 SF	X	
	X	PIPE FITTINGS		75 LF	X	
	X	COVE BASE MASTIC		55 SF	x	
					X	
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State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60-7 and 12:120-7)

in the constitution of

D-1				(1 0100	Name	of Building	Owner/Operat	or (2)	\ F=	Elizanianian El	F) /2	COLUMN ATTEC	2 Schenerous Land	all r
Date of Notification (1)					HESS	CORPORA	TION	MEC	, E		W	E	m	1
Agencies Notified Type No		1				Address SS PLAZA		K	********		1	1-1-1		
EPA Init	ial Notifi	ication			_	State, Zip Coo	la	11 111	77	- 25	cont			-
	ended		ation	#17			EW JERSEY 0	7095	11	3	ZUIZ			
	ncellatio	in						j						
	Hold ERGEN	CYN				of Contact	i	Telephone	Numb	er	2013			
	LIVOLIV					CERULO		-	Ĺ	ISING	ALLE C	y		
Name of Facility Where Abatement	s Takin	g Place	e (3)		ACILI	TY INFORMA		IIIA. (A)	***************************************		THE PERSON NAMED IN	-	ke m ranare	
		,	- 1-7				Type of Fac	l (K-12)	r di agrica	Say Orac	0-2	alle de esp		
HESS PLAZA								apter 8 (Other th	an K-1	2)				- 45
Street Address							X Other	(ie. private & con			home	es, etc	.)	
1 HESS PLAZA							Square Fe	경우 : [ors			Bldg.	-	
City (5) Cou	inty (6)			1 (County	Code (7)	187,000	1.70 m				4:	2	
WOODBRIDGE MID	DLESEX	(JSE ONLY)	COMMERCI	(Prior if being de	emolish	ied)				
Name of Monitoring Firm Hired by B	uilding	Owner	(8)		T	ASCM No.		atement Contra	ctor (9)		-		
HILLMANN ENVIRONMENTAL Street Address						17		DNMENTAL COP						
1600 ROUTE 22							Street Address							
City, State, Zip Code	-							ROCK ROAD						
UNION,	NEW JE	RSEY	07083				City, State, Z	ip Code IEW YORK 1090	14					
Project Manager for Monitoring Firm				Numbe	r		Telephone No		icense	Mumb	ner .			
MIKE NEHLSEN			8-377-5			7012	845-369-7500		60	- TOTAL				
Expected State Date (10) 4 / 19 / /12	S	ched. (tion Dat			Name of OSI-	IA Monitor						-
Month Day Year		Month	5 /	3 Day	0/	12 Year	QUALITY EN	VIRONMENTAL						
Occupancy Status During Abatement (C	heck on	ly one)	- 10000	,		1 eal	Street Addres	•						
Facility Closed/Vacated Duri	ng Entire	e Perio	d of Aba	atement			1376 ROUTE							
Abatement Performed Outsid	de of No	rmal Fa	acility H	ours - D	escribe) :		H77/5740						
X Other - Describe: MON.	FRI. 6	5 PM - 2	2:30 AM				City, State, Zip	Code						
Scope of Work (Check all that apply)					Y	Teuli Cont.	immond with N	WAPPINGE	RS FA	LLS, N	IY 12	590		
	X Re	enovatio	on		^	Mini-Enclo	amminent pattu id	legative Pressu	re					
>3SF OR LF					X	Glovebag								
X >160 SF OR							e Procedure							
Location of Asbestos-containing		is Loca ormally				cription of Asl					Abate	ement	Туре	
Material (ACM)	"	solely				ining Materia Thermal sys	Control of the Contro	Amount	ᇛ	REPAIR	EN	E	7	
TO BE ABATED	Ma	aint/Cus	, ,			tion, surfacin		(Specify SF or LF)	REMOVAL	PA	ENCAPSULE	ENCLOSURE		
in Facility (13)		Staff (her miscellar		0.0.2.	P	120	SS	18	1	
	Yes	s No	N/A								Fin	굒		98
RD FLOOR - ENTIRE	+	+-	X N	/AT 2 M	ACTIC					-	_	1		
RD FLOOR - ENTIRE	-	+	-	VAT & M		Charles Charles Charles		8,005 SF 75 LF	X	-	-	1		
RD FLOOR - ENTIRE			-	OINT C				12,180 SF	X	+	-	+	*	
RD FLOOR - ENTIRE			X C	OVE BA				495 SF	x		-	1		
RD FLOOR - ENTIRE ID FLOOR- ENTIRE	-	-	-	AR				25 SF	x					-
ID FLOOR- ENTIRE		+-		AT & M				8,005 SF	X					
ID FLOOR- ENTIRE	-	+		OINT CO				495 SF	X	-		-		1920
ID FLOOR- ENTIRE			-	AR	-102 ()			12,180 SF 25 SF	X	-	-	-		
ID FLOOR- ENTIRE				SUMME.	rings	INSULATIO	N	380 LF	X	-	-	-		_
AZA-ENTIRE	1	+	X V	AT & MA	STIC			12,425 SF	X					
AZA-ENTIRE AZA-ENTIRE	-	+		OVE BA				495 SF	Х					
AZA-ENTIRE	+	+		DINT CC		-		18,820 SF	Х					- 9
AZA-ENTIRE	+	_		AR	IICAL	PLASTER		7,275 SF	X					
AZA-ENTIRE	1	+			INGS	NSULATION		25 SF 200 LF	X					
T FLOOR-MECHANICAL ROOM	I			JCT INS				665 SF	X	-				
T FLOOR-MECHANICAL ROOM		_				NSULATION		207 LF	X					
T FLOOR-MECHANICAL ROOM T FLOOR-MECHANICAL ROOM	-	-		BRATIO		TH		4 SF	х					V
FLOOR-BOILER ROOM	+)		ASKETS		ICI II ATION		10 SF	Х					a 1
FLOOR-BOILER ROOM	+-	5		JCT INS		NSULATION		45 LF	X			:		
FLOOR - CAFETERIA		X	_	T & MAS	-	J.1		240 SF 3,000 SF	X	-	-			
FLOOR- CAFETERIA		X	_	INT CO		ND			X	-	-			
FLOOR - CAFETERIA		Х	_	VE BAS					x	-+	-			
FLOOR - CAFETERIA	-	Х		E INSU					X	+				_
H FLOOR - MER ROOM		X		CT INSU										

City, State EARNEY, NEW JERSEY Completed by (Print or Type) ENJAMIN SANCHEZ DIRECTOR OF OPER					Signature	3VX	Da	te H	271	17		
				Disposal Date City, State 6/23/11-05/15/2012 MORRISVILLE,			.PA		/	<i>t</i>		
Name of Registered Waste Hauler DJM TRANSPORT , LLC		NJDEP Waste Hauler ID No. 26981		100000000000000000000000000000000000000		Name of Regis	Registered Landfill LANDFILL					
Name of Registered West 11	37						+	++	++-			
TO THE PERIOD ROOM		\vdash	X	PIPE FI	TTINGS		25 LF	X				
1ST FLOOR GENERATOR ROOM		-	X	PIPE FITTINGS			25 LF	X				
IST FLOOR OFFICE AREA		-	X	FLOOR TILE MASTIC			500 SF	X				
1ST FLOOR OFFICE AREA		-	X	PIPE FITTING INSULATION			180 LF	X		7/		
13TH FLOOR - MER ROOM		-	x		GASKET			X	1			
11TH FLOOR-PERIMETER WALL 13TH FLOOR - MER ROOM		-	X	TAR MASTIC			25 SF	X				
11TH FLOOR DEPIMETED MAN		-	X		TTINGS	Marie -	75 LF	X				
11TH FLOOR PERIMETER		_	X	COVE BASE MASTIC			55 SF	X				
11TH FLOOR -ENTIRE		1	X	JOINT	COMPOUND		7,920 SF	X	1-1-			
11TH FLOOR -ENTIRE		1	X	VAT &	MASTIC		8,000 SF	X				
1ST FLOOR STORAGE ROOM		_	X	VAT & MASTIC			300 SF	X	++-			
1ST FLOOR STORAGE ROOM			X	PIPE FITTINGS			13 LF	X	\rightarrow			
1ST FLOOR HALLWAY			X	PIPE F	ITTINGS		20 LF	IX I	T			



D&S Proj. #: MS 12-151

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

BOGDAN JOL	DZIC	PRESID:		for asbest	os licensure ex	empte	d activities.	04/30/12						
51					Signature		TULLYTOWN,	WN, PA						
D & S RESTOR	ATION, INC.	135			2 YDS		TULLYTOWN,		COVER	Y				
Registered Waste H		NJDE	EP Hauler	C	Cubic Yards of	Waste	Name of Registered	Landfill					Ш	
						2002								
BASEMENT CRAWL	SPACE		X		PIPE INSULA		ION	15 L FT		M				
BASEMENT			X		PIPE INSULAT		ION	102 L FT		×				
material (acm) to be abated in facility (13)		staff(12) Yes			material (ACM			(Specify SF or LF)		m o v e	p a i	c a p	c L	
Location of ashestos-containing		by mainte	n normally enance/cu	used solel stodial	5)	ion of	asbestos-containing	Non-Exempted (*) Amount	and Non-	R	R	E n	E	
≥3 sf or ≥3 lf≥160 sf or ≥2		Renovation						Mini-enclosure Glovebag procedu	re					
Scope of Work (ch								-ull Containment w	//negative	press	ure		=	
Facility close Abatement portion Describe: Other-Descri			**	City, State, Zip Code Paterson, NJ 07503										
Occupancy Status							20 California Av	renue						
05/10/12							D & S Restorati	on, Inc.				-		
Start Date (10) Sched. Completion Date (1					1)	=	Name of OSHA Mon							
Project Manager for Monitoring Firm Phone Num					ber	er Telephone Number 973-345-8020			License Number 00159					
8000				Paterson, NJ 07			7503							
City, State, Zip Code						20 California Ave. City, State, Zip Code								
Street Address			1		Street Address									
	11		**************************************				D & S RESTOR							
MANASQUA Name of Monitorin			NMOU er (8)	IH	ASCM No.		Name of Abatement	Contractor (9)						
City (5)	NT.		nty (6)	TT I			unty Code (7) ate use only)	Current Use (Prior if being demolished)						
145 FLETCHE	ER AVENUE	T 0-	-t · (0)						# of Floo		В	dg. A	ge	
Street Address	*		m=-w				Other (Private/Commercial Bldgs./Homes, etc.							
MIKE O'CON	NOR						School (K - 12) Subchapter 8 (Other than K-12)							
Name of facility w	here abatement i	s taking pla	ace (3)					Type of Facility						
				FAC	CILITY INFORM	MATIC	N		-					
☐ DCA	Cancellation	- 11	JIM DALLAS											
□ DOH	(including justification)	Itn	lame of C		NJ 08730		Telephor	ne Numbe	Γ	ji.				
☐ DOL	Amendment #:		City, State, Zip Code LICENSING MANASQUAN, NJ 08736											
☐ DEP	Amended		145 FLETCHER AVENUE											
Agencies Notified EPA	Type Notificat	tion	MIKE O'CONNOR Street Address											
10 14 1/13 10				-)			and colored	Manager Annual Property and Company of the Company	W. 177					
Date of Notification	2 (1)	TIN	Name of F	Ruilding Ow	ner/Operator (2	2)		5 6 6 1	VE,				_	
0	WIS 12-131			(i uis	dant to NOA	.0.0.0	17.120j	EGEI	W P		7 i			

2213

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

Date of Notification (1)			T Na	me of Build	ding Owner/Operat	01 (2)	PETE	Marine and	March	le .	hillianay "			
05/01/2012						shire Group			E	1	77	ø			
Agencies Notified	Type Noti	fication			eet Addres Maple A			14.	14		1	(1)			
DEP DOL	Amend	dment #		Cit	City, State, Zip Code Morristown, NJ 07960										
⊠ вон	Emerg	ency (includir	ng		The same of the sa		<u>'</u>	The The	14.	1	1:	,			
DCA	llation		0.000	me of Cont pert Schm			LICEA	mber	ĺ		1				
				F	ACILITY II	NFORMATION	7-42	the second recipion requires	S READ TO SERVICE OF THE PERSON NAMED TO SERVICE OF THE PERSON	\exists					
Name of Facility When Hudson County Ch	e Abatement i nromium Su	s Taking Plac ite # 114	e (3)				Type of Fac	ility (4)			5	-			
Street Address							School (F Subchapt	K-12) ter 8 (Other than K-	1 2)						
880-900 Garfield A	Ave						Other (i.e.	., private & commer	cial b	uilding	gs,				
City (5)				Square Feet	The state of the s		Bldg.	Age	_						
Jersey City, NJ		-					N/A	N/A	_	N/A					
Hudson				US	unty Code E ONLY)	(7) (STATE	Current Use (Prior if being demolished) Vacant Land								
Name of Monitoring Fir	m Hired by Bu	uilding Owner			VI No.		tement Contractor (9)								
Street Address				N/A			al Constructi	on, Inc.	, Inc.						
Street Address						Street Address		MD 0 : 4 040							
City, State, Zip Code						City, State, Zip (MB Suite 218				_			
						Clifton, NJ									
Project Manager for Mo	Project Manager for Monitoring Firm Tele				e No.	Telephone No.		License No.	License No.						
Start Date (10) Scheduled Comple						973-389-00	00000								
Start Date (10) Scheduled Comple 05/11/2012 05/14/2012					ate (11)	Name of OSHA	al Construction, Inc.								
Occupancy Status During Abatement (Check only one)						Street Address	Constructio	on, inc.							
X Facility Closed/Vaca	ted During En	tire Period of	Abat	ement			, Avenue, Pi	MB Suite 218							
Abatement Performe Other - Describe:	d Outside of N	Normal Facilit	у Ноц	ITS		City, State, Zip Code									
						Clifton, NJ 0	7012								
Scope of Work (Check	all that apply)					☐ Full Co	ntainment with N	Negative Pressure							
X >3 sf or >3 lf ☐ Renovat ≥160 sf or ≥260 lf ∑ Demol						Mini-En Goveba	nclosure ag Procedure exempted (*) and Non-Friable Procedure								
		ls L	ocati	on	T	IXI Non-Ex	kempted (*) and	Non-Friable Proc							
Location of Used Sole						December 1			1	Abatement Type					
Asbestos-Containing Material (ACM) Maintenan				ice/		Description of tos Containing Mat	erial (ACM)	Amount				Г			
TO BE ABA			taff?	11	(i.e.,	thermal systems in surfacing, VAT,		(Specify SF or LF)	Re	Z Z	Encapsulate	Enc			
(13)			(12)			other miscellaneo		0.0.2.7	Removal	Repair	psul	Enclosure			
		Yes	No	N/A					<u>a</u>	-	ate	9			
Exterior				X	Transite	Pipe		40 LF	X	-					
									1	-					
									+-			-			
									-						
					Waste	Cubic Yards	Name of Registered Landfill								
					No. 1110	of Waste TBD	Chemical Waste Management Inc								
City, State Northampton, PA						Disposal Date	Disposal Date City, State								
Completed By		Title	-			TBD	Emelle, AI								
Krutarth Jagad President						Signature	1)	05/01/2	2012						
SB41			-			-1 \sim \sim	VC	03/01/.	2012						



Date of Notification (1)		Name of Building Owner/Operator (2) MARKET HALSEY URBAN RENEWAL LLC												
04/30/12	T					SEY UF	KBAIN		T-2	The second second	Wat less o	e propi	45	
Agencies Notified EPA	Type Notification X Initial			Street Add	dress 34TH S	TREET	STE	2106	E	IVE		1	· .	
X DEP X DOL	Amended Amendment				e, Zip Cod ORK N		0	MAY	′ ວ	5010		ACCOUNTS OF THE PARTY.		
ĬX DOH	Emergency (justification)	including		Name of 0			1		Tele	phone Nur	mber /			
DOH DCA	Cancellation			BOB KI	LUG	- Name of the last	1	l						
				FACIL	ITY INFO	RMATIO	N	ASBEST	US CON	Thole is		-		
Name of Facility Where MARKET HALSEY			;					Type of Facility (School (K-1	2)	ARTE AND ADDRESS OF THE PARTY.	NATIONAL DE			-
Street Address 165 HALSEY STR	EET							Subchapter Other (i.e. petc.)	8 (Othe private 8	er than K-12 commerci	2) al build	ings,	home	s,
City (5)				72				Square Feet 30000	# of	Floors	BI 80	dg. A	ge	
NEWARK NJ County (6)				County C				Current Use (Pri	or if bein					
ESSEX	n Wirnd by Deilding	Dunor (9)		ASCM	SE ONLY)		Name	OFFICE BUI		X				
Name of Monitoring Firm RKO ENVIRONME		JWHEF (0)		0090	140.			O CONSTRUC			ORA	LION	INC	J
Street Address 401 ST, JAMES A'	VENUE	****						Address RT 46 SUITE	3D					
City, State, Zip Code	VLINOL				- IV		City, St	tate, Zip Code				-		
PHILLIPSBURG, N				Telephon	a No		857/5	OWA NJ 0751 one No.	2	License N	lo.			-
Project Manager for Mo JON GILBERT	nitoning Firm			908 45			973 2	256 7010		00666				
Start Date (10) 05/11/12		Scheduled 05/13/1		npletion D	ate (11)			of OSHA Monitor O CONSTRU		& REST	ORA	TION	IINC	Э.
Occupancy Status Durin	ng Ahatement (Chec	18TA THE RESIDENCE OF THE						Address		50				-
			26					RT 46 SUITE	3D					
Abatement Perform	cated During Entire med Outside of Norr Occupied Fri 8am-5	nal Facility	Hours	city, State, Zip Code - 6pm. Sun 8am - 12pm City, State, Zip Code TOTOWA NJ 07512										
Scope of Work (Check	All That Apply)													
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		The same of the sa	enova emolit				××	Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	re ocedure				e.	
							L	1 Non-Exemple	u () an	u Non-i na		Abate		
			Locat orma										ре	
Location Asbestos-Containin TO BE AF In Fac (13	g Material (ACM) BATED cility	Used Mail	l Sole ntena	ely by nce/ Staff?	Asbes (i.e.	tos Conta thermal surfac	scription aining M systems cing, VA niscellar	Material (ACM) s insulation, T, or	(5	mount Specify or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A									l o	
15TH FLOOR	TANK ROOM	X				-	TSI		1	00LF	X			
	*******	+							-					
777						7		*						
Name of Registered W			1 1	NJDEP W Hauler ID		Cubic of Was				ered Landfi	11	50000		
BAKO CONSTRUC	9	20889	3 %	6		G.R.O		INC.		-				
City, State TOTOWA NJ				05/14	sal Date 1/12			LE PA	450 10					
Completed by	10.00	Title	7			S	Signatur	1 - No	7/	4	ate	40	882	
GORAN KOJIC	THE STREET OF THE STREET	V.P.			- (V2) 1			Krow	- MG	X-C)4/30/	12	The state of	

STEVENS	ENVIRONMENTAL
SCRVICE	s The
(1 Books	1

	A/30/12 Initial	Na —	ame of Build	ling Owner/Operat	or (2) Christine	Fitch G E	11 1	<u> </u>	3	E-		
Agencies Notified		ation		St	reet Addres		5 Coastal Hi	Chyot A 5	_		A Company	
DEP	Amended			Cit	ty, State, Zip		J Coastal II	ignwam Ao	3 2	012	4	L
DOL.			dina	"	,, o.a.o, 2.p		wey,DE 199	971-2343				
DOH DCA	iustificati	on)	9	Na	me of Conta	act	ı	Telephone N	umber	L&	_	-
	Cancellati	on		1_		Christine Fitch	1					*
Name of Eacility Whose	Abetemantin	-12 51	(0)		FACILITY IN	FORMATION		340	يروح خاطأ الماء	widow think	PAC.	
TVaine of Facility VVIIere		Charles of the Charles					Type of Faci					
Street Address		COSTGC	100				School (K	(-12) er 8 (Other than K	(-12)			
	263 H	awtho	rne A	ve.			Other (i.e.	., private & comme	ercial b	uildin	gs,	
City (5)							homes, e Square Feet			Bldg.	Age	-
	F	rincet	on							Diug.	, igo	e.
County (6)	1 ama am			Co	ounty Code SE ONLY)	(7) (STATE	Current Use	(Prior if being dem		d)		_
		22 0000			diameter and			residenc	е			_
(0)		ng Owne	er	ASC	M No.		ment Contractor			Ţ		
Street Address	WILCO		_	L		Street Address	vens Enviro	nmental Serv	ices,	Inc.	_	_
	PO Box 3	341				Street Address	PO	Box 322				
City, State, Zip Code	32 32 930					City, State, Zip (DOX 322			-	
		IJ 085	15				Allentov	wn, NJ 08501				
	_	-18- <u>50///</u>	1000000	lephon		Telephone No.		License No.			- 41.000	
Start Date (10)		(s = d) (t = d)			98-4070	the state of the s	59-9688		0049	93		_
5/9/12	50				Date (11)	Name of OSHA I		ÆC0				
	g Abatement (C	heck onl	2/10. v one)	/12		Street Address		MECS				_
Facility Closed/Vacate	ed During Entire	Period o	f Abat	ement		Offeet Address	PO	Box 341				
Abatement Performed	Outside of Norr	nal Facil	lity Hou	urs		City, State, Zip C						_
						-	Crosswic	ks, NJ 08515				
cope of Work (Check al	I that apply)				6	□ Eull Con	tainment with N	egative Pressure				=
23 sf or ≥3 lf 2160 sf or ≥260 lf		X R	enova	tion		✓ Mini-Enc	closure	egative Pressure				
] _ 100 st of 2200 ii		По	emolitic	on		☐ Gloveba	g Procedure	on-Friable Proced	uro			
		1100000	Location				7.5-(/ / .	- Triable Freed		Abate	men	t
Location of			lormally d Solel			Description of				Тур		
Asbestos-Containing Ma <u>TO BE AB</u> ATE			ntenan ustodia		Asbesto	os Containing Mate	erial (ACM)	Amount	20	77	Ш	T
IN Facility			Staff?		(i.e.,	thermal systems in surfacing, VAT,	or	(Specify SF or LF)	Removal	Repair	nca	
(13)		-	(12)		-	other miscellaneou	us)		val		Encapsulate	
		Yes	No	N/A							te	
basemen	t .			×		duct insulati	on	-70 SF	×			t
basemen		×		duct insulati	on	70 SF	×					
me of Registered Waste	Hauler		IN	JDEP \	Vaste 1	Cubic Yards	Name of Regis	stered Landfill				L
tevens Environme	ental Service	s, Inc.		auler ID 182	No.	of Waste			or 10	:11		
		2, 1110.	= 1 =	102		2 CU Disposal Date	City, State	R.R.F., Inc. L	andi	111		-
y, State	Allentown, NJ					5/10/12	5.17, 5/2.0	Tullytown,	DΛ			
4	mentown,	. 10		E-100 Hours - 100 Hours	The state of the s	OI LUISLE H						
	Title	9	oject			Signature	NI	Date	IA	_	_	=

CHECK# 2299

							11 11 11 11/	15		1				
Date of Notification (1)	11/12		Name of Building Owner/Operator (2) EALTHTECH CONTRICTING											
Agencies Notified	Type Notification		Street	Address		11111		•		Carlo	7			
To the second of	[X] Inival			155	Rr, 50	IJ LI	MAY 3 201	2	61	1-	-			
Ø o⊕	Amended		City, S	tate, Zip (C∞de	1 1-		1						
Ø DOL Ø D⊕ Ø ⊕v	Amendment #				LEEN FIE	= LB, NT				1	_			
Прон	Emergency (in justification)	cluding	Name	of Contac	il .		Telephone Numbe	1.		ř				
DCA	Cancellation				ULE BREU	INIG		=====						
<u> </u>	···		EAC		ORMATION	# margar		Officer Colo	10.		1			
Name of Facility Where	Alexandra Takin	Diace (3)			0141111111	Type of Facility	(4)	Janife - A	one of the	00_90V				
		y Flace (3)				School (K-12								
1663	DENCE					Subchapter	8 (Other than K-12)							
Street Address 7' A	, ADAM.	sdit	, ,			Other (i.e., p homes, etc.								
	1 70 2					Square Feet	# of Floors	Bidg	Age					
City (5)	ROATE					1		<u> </u>						
	ANTIC		Coun	ily Cope (7) (STATE	Current Use (Pr	or if being demolish	red)						
			1000000		Name of Ahaler	ment Contractor (9					-			
Name of Monitoring Firm		wner	ASCM	NO.		EMCO I								
	//A				Const Address					10000	18			
Street Address					369	S, S PRUC	E DUE,				= -			
City, State, Zip Code					Cia Ctate Zin (Code		nd n	- >					
City, State, Zip Code		VAC			· Mo	bre SHO.	DE INIJ,	00 0			-			
Project Manager for Mo	outovina Ermi	T,e	elephone	No.	Telephone No.		License No	ט ע			i			
Project Manager for the				19	856-77	9-0472	007		<u> </u>					
S'art Date (10)	T Scher	duied Comp	detion Da	te (11)	Name of OSHA	Monitor	525							
5/14/12		121	/12				EMM			_	=			
Secupancy Status Duni	ng Abatement (Che	ck only one)		Street Address	S C 01	10c= 200.							
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Other - Describe:					101	APLE 3	1200		===					
Scope of Work (Check	all that apply)				C Eull Co	ontainment with N	egative Pressure				1			
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X ≥160 st or ≥260 If	() 1)22 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	<u> </u>			Non-E	xempled () and is	I I I I I I I I I I I I I I I I I I I	TA	Later	(M) (C)				
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rame of Registered W	aste Hauler		NUDEP Hauler		of Waste		C, U, A,							
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MARCE	SHADE				10000000	_		1	/					
Completed By	Tit	le v/	10		Signature	ren Keli	m 51	1	12	=				
JOSEPH	KLEMM -	V	/		=I-A				- ;					
					7									

State of New Jersey
NOTIFICATION OF ASBESTOS ABA FEMENT

Date of Notification (1)				Name	of Building	g Owner/Operator	(2) 1 1/12/	110 -40 [VAN	111	7	-
May / s	1 2943	*****			The state of the s	of Camd	- 141777年 1977年7日第) Licheek	#4	333		
Agencies Notified	Type Notification			VICTORIST CONTROL	Address		ASBF TOS			Table of the Control	April 1	
EPA	圖 Initial					Street [ASBELTOS	MAYROL & 20	12	1		
DEP DCA (NJAC 5:16)	Amended Amendment 8			100000000000000000000000000000000000000	state Zip C		IUL)	VSTING TO L	114	11		
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(N.IAC 5:23-8)	justification) Concellation				of Contact		WAI	AH elcohono Nun	her	/EI		
						FORMATION		- CALL NOOT	3-4			
Name of Facility Where	Abatement is Takin	g Place	3 (3)				Type of Feoility	(4)		-	· · · · · · · · · · · · · · · · · · ·	37
Holy Child Paris	h						School (K-12					
Street Address			A VIII VIII VIII				Subchapter :	8 (Other than K 12 rivate & commerci	i) igi build	ilngs.		
13 E. Evesham I	Road			- 1905			homoz, ole.)					
City (5)						3.000	Square Feet	# of Figory		dg. A	_	
Runnemede							1800			0 Y	ears	3
County (6)		(8)		Cour	ity Code (7	TISTATE USE ONLY!	- 27	ior if being demoli	shed)			
Camden				1		The state of	Garage .					
Name of Monitoring Firm		Owner	(8)	ASCM	NQ.		ent Contractor (9)					
MGD Environme			لــــــ			Street Address	· · · · · · · · · · · · · · · · · · ·				-	
Street Address 1000 Maplewood	10- 5-4-20	17				47 S Lippin	CON AVA					
City, State, Zip Code	1 DI. QUILE 21.	,,				City State, Zip C					-	
Maple Shade, N	1 08052						ie, NJ 0805	2				
Project Manager for Mor			Tel	eplione	No.	Telephone No.	3, 30 3030	License No.				
Tony Esposito			100000		5-9300	856-755-00	99	00842				
Stort Date (10)	Scho	duled C		etion Da		Name of OSHA	The second secon				_	
May 1 7: 1				/		EMSL						
Occupancy Status Durin						Street Address	RE	MEMBER _	MAIL	IN	LIAF	יתו
E Fodily Closed/Vecal				ment		107 Haddor	Ave Ave	Service accommode	191 <i>1</i> 74][_	. 114	TAF	IU (
Abstament Performs	d Outside of Norma	Facili	ty How	ira - Doc		City, State, Zip C	ode					
Time of Abstomeré	AMP	W!	PM		AM		New Jersey	08108				
Scope of Work (Check o	il that apply)	e e e e e e e e e e e e e e e e e e e			acamera, ne aba	57.5.5	4-1					
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[≥160 all or ≥260 ll			emciili			☐ Gloveba	g Procedure					
2284B		1		A2		☐ Non-Exe	emplied () and No	n-Friable Procedu		010-	001 7	
1 gr 2022 44000		100	s Loca Norms			Description (nel .		-	alem	_	1
Location Asbestos-Containing	Material (ACIV)	Lis	ed Sal	lely by	Acbe	atos Containing Ma	atérial (ACM)	Arount	R	Rep	Enc	End
TO BE AB	ATED		sinten laibot	Stall?	(Le., the	mal systems insul VAT or	tation, surfacing.	(Specify SF or UF)	mova	par	apa	clasure
IN Faci			(12)		787	other miscalians	eous)	S. III S. /	-		capaulate	8
0.52 7.		Yes	No	NA			- 45				,,,	
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Cycle Service Company	4.Wangacana											
Name of Registered Wa			100	NJDEF		Cubic Yards of	Name of Regit			5) = 150 <u>1</u> 38		
Freehold Carta	ige, Inc			Hauler (i 12253) M0	Waste	Grows La	andfill				
City. State		Transcription of the second				Disposal Cate	City, State					
Mount Holly, N	IJ						Tullytown	ı, PA				155 E.W.
		e	_			Signature,		7 1 1	ate			
		ce F	res	ideni		hVIII	10h V	-Vnch	lay '	1, 2	012	2
Completed By (Print or William Lynch	(vpc) Tit	1000	res	iden		Signature	lan I			1, 2	012	2

Date of Notification (1)		Name of Building Owner/Operator (2) Atlantic States Cast Iron Pipe, Inc.													
4-30-12						State	es Ca	st Iro	n Pi	pe, I	nc.		1		See that
Agencies Notified XI EPA	Type Notification			Street A	ddress Sitec	graves	str	eet		MA	4 3	2012	And the second s		All controls
DEP DOL DOL DOH DOA DOA		(including		Phi Name o	ate, Zip Co 11ipsk f Contact an Nic	ourg,	NJ	08865	L		SIOS COM			*******	TO SHOULD AT ABLE OF
					LITY INF	GCCMMHE	ON						5.0		- 1
Name of Facility Where Atlantic State Street Address				nc.					hool (K		er than K	-12)			The A
183 Sitegrave	s Street							etc	.)	private 8			- 05		es,
City (5) Phillipsburg								Square 75, 0		# 01	Floors 2	E	3ldg. <i>A</i>	7	
County (6) Warren				County (STATE	Code (7) USE ONLY)		Current	Use (P atri	rior if bei	ng demo	lished)			A 4300
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCN	Λ No.		Name	of Abater	nent Co	ontractor	(9)				
EHS Environme	ntal, Inc.				95			mouth	Env:	ironme	ental	Co.,	[nc.		
Street Address 411 Southgate	Court							Address Haws	Aver	nue					
City, State, Zip Code Mickleton, NJ	09056	****						tate, Zip			104				
Project Manager for Mon				Telepho	ne No			riston	m, I	PA 194	License	No			
Jack Carney	iitoring r iim			224-00	80		-239-	9920		Liocrisc	00398	3			
Start Date (10) 4–13–12				Date (11)			of OSHA mouth			ental	CO	Tnc			
Occupancy Status During	g Abatement (Chec		8-12 ie)	<u>-</u>				Address							
□ Facility Closed/Vac	ated During Entire	Period of A	Abaten	nent				Haws		nue					
☐ Abatement Perform ☐ Other – Describe:	ed Outside of Norn	nal Facility	Hours					tate, Zip		ח 10	101				
Scope of Work (Check A	II That Apply)						IVOI	risto	WII,	PA 19	101			-	-
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			tenova emolit					Mini-E Glove	nclosu bag Pro	nent with re ocedure ed (*) and				e	
			Locat										Abate	2000	
Location Asbestos-Containing TO BE AB/ In Facili (13)	Material (ACM) ATED	Use Ma	lormal d Sole intena odial S (12)	ly by nce/		tos Conta thermal surfac		laterial (A s insulatio T, or		(S	mount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
200		Yes	No	N/A										fe .	
South casting r		х			tran					440 \$		х			
2nd floor hot h	oox wall	х		-	tran	site				1,360	SF	х			
					-					-					
Name of Registered Was Newark Carting	10000	JDEP W lauler ID 4509		Cubic of Was	ste 8		IES:		red Land	fill					
City, State Newark, NJ						The same of the same	al Date 3–12		ity, Sta Betl	_{ite} nleher	n, PA				
Completed by James M. Kelly Projec					iger		ignature 111	rh		111 - 1-		Date 4-30-	-12		
ASB-41 (R-06-08)				- /	* Do no	t use this	form fo	or asbesto	os licensi	ure exen	npted	activit	ties.		

		MCDEGAT (Parson	it to MIAC	ESTOS ASIATEM B:60 and 12:120		GEIN		- Construction of the Cons
Date of Notification (1)	5-1-12		W IS	og Owner/Operator EQU		Office Control Control Control	012	A CONTRACTOR OF THE PROPERTY O
Agencies Notified	Type Notification	Sire	nat Addrass	(100 h A)	cox 1	VF		
LITER -	[] Initial	\ rai	y, Stale, Zip	Juliuly M S			i k	100
11 500	Anundment #,	City	Run	CON A	13 0	ASUES CONTROL ASUES		
	[] Envergency (incl					Telephone Rumi	7777	10 men
LYDOU	justification) [] Cancellation	IMA	ine or Coma	whatm	111			
11144			And Control Street	A R OF SECTION AND PROPERTY AND ADDRESS OF THE PARTY AND ADDRESS OF THE	Carrier Control of the Control of th			
BUILDING TO THE TOTAL			WCH BA 470	ORMATION	Trype of Facility	(i)		
Name of Facility Where	Abatement is Taking	Place (3)			1 Cebrol B-1	21		
1. WR.	EQUITE	<u> </u>		64 - 1,044 - 144 -	1 1 Consequences	R (Ciber tiviti No. 1)	?)	
Street Address	C. C				Office (i.e.,)	nivate & commetet	at brutangs.	
14/ W	ARBOIL /	1 V 6	and any properties on the	Colorador Colorado (Colorado Colorado (Colorado Colorado (Colorado Colorado	homes, etc. Square Feet	# of Floors	[fildg. A	ge
City (5)	1				1500	12	1 80	+
Rumsu			ounty Code	eo Torkiili	Concouttise (I)	dor If heing demoli	shed)	
County (6)	-1	111	ounty Code : SE OMLY)	(7) (SIAI):		053		
Name of Monitoring Fire	uvi h		M No.	T Allega of Abalan	ient Contractor (S		05000	
	n Hired by Building Ov	mer ASC	IVI NO.	Maine of Anaton	T. Leans	KEN CV.	TAIL	y
(8)	in the second of the second		Committee of the commit	Street Address	FW. Jakin	R. J. W. L. S. Market		
Street Address				Cit 168	vikesa	RA		
A second of the second			The state of the s		Y HILLIAM		or state that it	
City, State, Zip Code				City, State, 7.10 C	was cher al	t orgal		
	dial an agraphic will a de l'Establishe Francis a l'Estab		ener energy	CCGALS 5	ALL A	License No.		15
Project Manager for Mo	nitoring Plum	Telapho	ne No.	Telephone No.	11757	1.0002	di	
			AND	Name of OSHAT	Monitor			A 1000
Start Date (10)	1	led Completion		Plante of Och act	et stend ditty o	V SW IN	ر ن	
5-10-12		-16-1	2	Street Address	H YEARM A LOS	V. 0.W. 210		
Occupancy Status Duri					Troversia D	· (À		
☐ Facility Closed/Vaca	ted During Entire Perio	od of Abatemen	·(City, State, Zip C	MMXG R			
Abatement Performe	ad Outside of Normal F	SCHIA LIORES		COLO.	A) Pacific	NT 013	7727	
[Other - Describe:	and the second second is the second	and the second of the second o	to energy and the	1	/ V - 44 >	'-YY		
Scope of Work (Check	all that apply)	1		[_] Fall Cor	itairiment with Ne	galive Pressure		
(2) 53 st or 53 ff	T.	Denovation		[[Mini-End	elosure			
[]≥160 at or ≥260 R	1	Demolition		Glovena Ulston-Exe	ag Procedure empted (*) and isl	on Edable Procedi	IFC)	242
		la Location	1		and the feature of the state of the state of		Montes	
		Hornally					137	1
Location	200	(Ised Solely by Maintenance/	Action	Description of tos Containing Mat	r Legial (ACM)	Утосия		19 10
Asbestos-Containing TO BEABA	material (ACAM)	Custodial	(i.o.	, thermal systems i	nsulation,	(Specify	Repair Repair	
fM t-neith		Staff?		surfacing, VAT, other miscellaned	ot (eus)	GF or LF)	Repair Repair	1. 19
(13)		(43)	-	Outer transmission	200002		1 12 1	17 6
		(es No N/	А		V	0.1.12		
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CONTRACTOR		1000 pt 4	y re-	1.9	1-1-1-1	AND A BASE OF THE		
gamma walantii mataas					.*!** - ****	A CONTRACTOR		-
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Maine of Registered Wa	ste Hauler		P Waste r ID No. ,	Cubic Yards of Waste	reading on 1809	r1 -142	19 H	
ALL TWEL	LATTURIN Col	TNY 17	086	12	1 76	> 4	ar in the	NIRT I PA
City, State	PATER SA.	T. S. Lake	arpoleticitat -	Disposal Date	City State	like als . Ol	34	
CHICS NE	edic NIS and	11102		5.1612	一方层以	TENAM I	161	
Completed by	Tille	T VELTILLE II.		1 Signaturo (112. 1.6	Date:	1-17	
Landh Gra	16 10	yr's wa	61th	1 Just	E CITAL C		1	
ASH 41		201 A MA	4 17.000.000 10	I				

Date of Notification (1)				Name of Building Owner/Operator (2)								
05/	/1/2012			cs	X Corporation	[U U	MAY	2	Ŋ		1 i i	
Agencies Notified	Type Not	ification		Stree	t Address	7 7		2012	1 1	11	11	
	(X) Initia				Water Street				J.	-/ [# 1	
() DEP (X) DOL	() Ame	ended endment #			State, Zip Code		5HL5705	CONTROL &		l	1	
		rgency (inclu	uding		ksonville, FL 3	2202	LICEN	ALIVIE			- [
(X) DOH	justif	fication)		-2000	of Contact			Tel. N	umber	J.	1	
() DCA	() Cance	lation		and the second	vid Ohr						4	
Name of Facility Where Abater	ment is Ta	king Place /	3)	FACILITY IN	FORMATION	ilit. (A)					1	_
Conrail Railyard - Woodbury		King Flace (<u>5)</u>		Type of Faci						17.	
					() Subchap	ter 8 (other tha	n K-12)					
Street Address					(X) Other (i.e	e. private & con	nmercial	buildings, h	omes,	etc.		
Corner of Barber Avenue & R.	ailroad Av	re.									+	
City (5)					Sq. Feet	# of Floors	T	Bldg. Age				-
Woodbury, NJ 08096						1		30+				
County (6)		County Co	do (7) (C	TATE	500	(Delevished						
Gloucester		County Co USE ONLY		IAIE	The state of the s	(Prior if being	aemolisne	ea)				
Sioucestei		-			Industri	aı						
Name of Monitoring Firm Hired	by A	SCM No.		Name of 0	Contractor (9)							
Bldg. Owner (8)				Prism	n Response, In	C.						
Shaw Environmental, Inc.												
Street Address				Stree	et Address							
128 South Tryon Street – Inters	state Towe	er .	mercen engine	102	Technology Lar	ne						
City, State, Zip Code			-	City S	State, Zip Code	2						
Charlotte, NC 28202				Expo	rt, PA 15632							
Project Manager for Monitoring	Firm	Telephone	No.	Telep	phone No.	License No.			- 15 MARINE			
Gary Wyrwa		732-939-37	707	(724-	325-3330	01121						
Start Date (10)	Schedu	led Completi	ion Date (11) Name	e of OSHA Mor	l nitor				-	-	_
5/10/2012		5/10/201			/ Environmenta	2-23						
Occupancy Status During Abate	ement (Ch	eck only on	2)			-,				1200	- 14	
(X) Facility Closed/Vacated Dur				· · · · · · · · · · · · · · · · · · ·	t Address		~					
() Abatement Performed Outside				120 3	South Tryon Str	eet – Interstate	lower					
	de of Iton	riai i aciiity i	iouis	City,	State, Zip Code	2						
Describe:					70000 000							
() Other Describe:				Charl	otte, NC 28202	!						
Source of Work (Check all that a	apply)											
() ≥3 sf or ≥3 lf		(X) Renova	ation			nment with Ne	gative Pre	essure				
(X) ≥160 sf or ≥260 lf		() Demolit			() Mini-Encl () Glovebag		2					
		3 5000			(X) Non-Exer	mpted (*) and N	lon-Friat	ole Procedu	ıre			
											ement	
Location of		Is Locati	ion							T	/ре	_
Asbestos-Containing Materia	al	Normal						4				
(ACM)		Used Sole			Descriptio			Amount			ш	
TO BE ABATED IN Facility		Maintenar Custodi	10171700			Material (ACM)		(Specify	Remova	Re	Encapsulate	
(13)		Staff?			T, or other mis	ulation, surfaci cellaneous)	ng,	SF or LF)	SVOC	Repair	Sul	
		(12)				/				500	ate	
	Y	es No	N/A									
Conrail Woodbury Yard			X	Transite F	Panele		24	0 SF	X			0
			- 1	Transitor	ancis		24		_^			
				11								
							14					
lame of Reg. Waste Hauler	NJDEP V	Naste Hauler	r ID#	Cubic Ya	ards of Waste	Name	of Reg. L	andfill		Li-		_
Waste Management		SW1724		1				Sanitary Lan	dfill			
city, State				77/101	Disp. Date		ity, State					_
Camden, New Jersey					5/1/2	012 P	enn Argy	I, PA				
Completed by (Print or Type)	<u>Title</u>		I N	S	ignature .	0		/ Da	ite			
essica Busch	A	dministrative	Support		Leone	axx	WC	11	5/1/2	2012		
B-41				7	The court		001		- Or 172	-012		_

Job #: 1203-1632 Check #: 2665

Date of Notification 04/03/12			Name of Building Owner / Operator (2) Middletown V.F., LLC-Vornado Realty Trust										
Agencies Notified EPA	Type Not	ification	100		Addre oute	ess 4 Eas	t		BIVE		本本		
□ DEP □ DOL	⊠ Ai	itial mended #2 OFF OLD	C	ity, S	tate 8	Zip Co NJ 070	ode	JU MAY		A CONTRACTOR OF THE PARTY OF TH	The case of the control of the contr		
DOH DCA DCA		mergency ancellation			of Co ichol		imbene		OS CONTROL & +	<u>Téle</u> phor	ie Ni	ımbe	ŧr
					CILIT	Y INFO	ORMATION 🐫	Security of the Paris of the Pa	ICLNSING				
Name of Facility W Former Colony D			ace (3)			Type of Facility School (K		n K-12)	How to seen			
Street Address 840 Route 35 So	uth								mercial buildin	as, home	es, e	c.)	
640 Route 33 50	utii						Square Feet	# of Floo		Bldg. Age			
City (5)		County (6)	Cou	unty C	Code (7)	1,068	1		1975			***
Middletown		Monmouth					Current Use (F	Prior if being de	emolished)				
							Former Dry			=			
Name of Monitoring			er (8)		ASC	M No.		ement Contrac					
Absolutely Clear	n Enviro	nmental						nd Mold Serv	ices, Corp.				
Street Address 53 Orleans Gree	n						Street Address 3859 Sylon I	Blvd.			- 6		
City, State & Zip Co							City, State & Z						
Coram, NY 1172		na Eirm	Telep	hone	Numi	nor	Hainesport, Telephone Nu		License 1	Number			
Project Manager fo Jeff Sheridan	r Monitorii	ng Film	516-0			Jei	609-702-040		Licerise	0086	2		
Scheduled Start Da	ate (10)	Scheduled Cor 4/27/12)	Name of OSH EMSL Analy	A Monitor					
Occupancy Status	During Ab	atement (Check o	nly one	e)		Chock	Street Addres						
		ted During Entire F			ateme	nt	107 Haddon						
	Performe	d Outside of Norm	ai Hou	rs			City, State & Z						
Describe:	-02						Westmont, I	NJ 00 100					
Scope of Work (Ch		at apply)				-							7
000000, 110 (0.									e Pressure End	losure			8
≥3 sf or ≥3			\boxtimes		novatio			Mini-End					
≥160 sf ≥20	60 If		Ш	Der	nolitio	n			Cut Methodolo	The state of the s	Dro	d	
			T 10	Locat	ion		Description	Account to the second	empted and No Amount		-	ent Ty	MANAGEMENT OF THE PARTY OF
	ocation of stos-Conta				Used		Asbestos-Cont		(Specify	Aba	teme	1111	ype
Ma	aterial (AC	M)	S	olely	by		Material (AC	CM)	SF or LF)	ایرا		Ē	ш
	BE ABAT				ice or Staff?		(i.e., thermal sy insulation, surfac			Remova	Repair	caps	ncls
	in Facility (13)		Cusi	(12)	olan :		or other miscella			oval	air	Encapsulate	Enclsoure
	(,		Yes	No	N/A	1		•				6	
Throughout						Floo	r Tile & Mastic		840 SF				
Boiler Room				Boile	er Flue Pipe		20 LF						
					\boxtimes						Ц	Щ	
												님	
						10/	Out in Varida	Name of Dog	intered Landfill		Ш		
Name of Registered Waste Hauler Horizon Disposal						Waste D No. 12	Cubic Yards of Waste 4	GROWS	istered Landfill				
City, State							Disposal Date	City, State	55 50 60 60 60 60				-
Trenton, NJ				-	4/27/12	Morrisville,	PA				-		
Completed By (Pri					Signature >		7 7 - 7 - 7	Date					
Kim Trumbet			Admin.				The state of			4/23	/12		

Job #: 1205-1670 [M] Check #: 2675

5/1/12 Jersey Central Power & Light	Date of Notification	N	ame	of Bui	Iding C	wner / Operator	(2) C E							
Agencies Notified Separate S	5/1/12	. ,		J	erse	y Cer	ntral F	ower & Light						
DEP DEP Amended Morristown, NJ 07962	Agencies Notified	Type Notifi	cation					1171		10.1	111 (5			
DEP				3	00 M	ladis	on Av	enue	MAY	3 2012				
DOL Amended Morristown, NJ 07962 Amended DCA Cancellation Name of Contact Amended Mr. Ken Seborowski Mr. Ken Seborows		☐ Initi	al	C	ity, S	tate &	Zip C	ode		4	4.5			
DOH	⊠ DOL									1	1 13			1
DCA	⊠ DOH	□ Fm	ergency						ASBESTOS C	ONTROL &	Telephor	ne Nu	ımbe	er
FACILITY INFORMATION Sesidential Property Title Signature Steel Address Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) Subchapter 8 (Other (I.e. private & commercial buildings, homes, etc.) Square Feet	DCA			12 100				wski	LICENS	SIMG			_	
Name of Facility Where Abatement is Taking Place (3) Residential Property Street Address 3705 Arctic Avenue County (6)		L Cui	icollation .						Charles and San		7		•	
Residential Property School (K-12) School (K-12) School (K-12) School (K-12) Stheet Address Street Address Str					FAC	CILIT	Y INF	ORMATION	Chertage - 198 C - 1985 No. 30					
Residential Property Street Address 3705 Arctic Avenue County (6)	Name of Facility W	here Abater	ment is Taking Pl	ace (3)			Type of Facilit	ty (4)					
Subchapter 8 (Other file, private & commercial buildings, homes, etc.)				•				School (K	(-12)					
County (6) County (7) County Code (7) Square Feet # of Floors Bildg. Age Square Assets and Mold Services, Corp. Street Address Store Address Street		-		1000				Subchapt	ter 8 (Other tha	an K-12)				
Square Feet # of Floors Square Feet Square Feet # of Floors Square Feet		2116									ngs, home	es, ef	tc.)	
City (5)	3703 AICHE AVE	iue						Name of the last o						
Name of Monitoring Firm Hired by Building Owner (8)	011 (5)		10 1 (0)	10-		\l_ /	7)	_	10000 2000000000000	404-9004				
Residential Property Name of Monitoring Firm Hired by Building Owner (8) Name of Monitoring Firm Hired by Building Owner (8) Name of Abatement Contractor (9) Asbestos and Mold Services, Corp. Street Address Street Address Street Address Street Address 3859 Sylon Blvd. City, State & Zip Code Hainesport, NJ 08036 Telephone Number Dave or Steve Flanigan Scheduled Start Date (10) Scheduled Completion Date (11) S18/12 Cocupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Hours Describe: Isolated Area Scope of Work (Check all that apply) Saf or 23 if	[230] [27] [27] [27] [27]			Col	inty C	oue (1)				00			
Name of Monitoring Firm Hired by Building Owner (8) Horizon Environmental Street Address Street Address Street Address Sass Sylon Blvd. City, State & Zip Code Thorofare, NJ 08086 Project Manager for Monitoring Firm Telephone Number Guty, State & Zip Code Hainesport, NJ 08036 Project Manager for Monitoring Firm Sas6-848-0800 Scheduled Start Date (10) Scheduled Completion Date (11) Str8/12 Occupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Hours Describe: Isolated Area Scope of Work (Check all that apply) Location of Asbestos-Containing Normally Used Material (ACM) TO BE ABATED In Facility (13) To BE ABATED In Facility (12) Yes No IVA Pressore Tile In Facility (13) To BE ABATED In Facility (13) To BE ABATED In Facility (12) Yes No IVA Pressore In Facility (12) Yes No IVA Pressore In Facility (13) To BE ABATED In Facility (12) Yes No IVA Pressore In Facility (13) To BE ABATED In Facility (12) Yes No IVA Pressore In Facility (13) To BE ABATED In Facility (12) Yes No IVA Pressore In Facility (12) Yes No IVA Pressore In Facility (13) Normally Used Material (ACM) Solely by Material (ACM) In Facility (12) Yes No IVA Pressore In Facility (13) Normally Used Material (ACM) In Facility (13) Normally Used Material (ACM) In Facility (14) Normally Used Material (ACM) In Facility (15) Normally Used Material (AC	Wildwood		Cape May							iemolisnea)				
Asbestos and Mold Services, Corp.	7.							Residential	Property			000		
Horizon Environmental Asbestos and Mold Services, Corp. Street Address PO Box 316 City, State & Zip Code Hainesport, NJ 08086 Project Manager for Monitoring Firm Dave or Steve Flanigan Scheduled Start Date (10) Scheduled Completion Date (11) Sf14/12 SS6-848-0800 Scheduled Start Date (10) Sf14/12 SS6-848-0800 Scheduled Start Date (10) Sf14/12 SS6-848-0800 Scheduled Start Date (10) Scheduled Completion Date (11) Sf14/12 SS6-848-0800 Scheduled Start Date (10) Scheduled Completion Date (11) SS6-848-0800 Scheduled Start Date (10) Scheduled Completion Date (11) SS7/14/12 SS7/14/14 SS7/	Name of Monitoring	g Firm Hired	by Building Owr	ner (8)		ASC	M No.	Name of Abat	ement Contra	ctor (9)				
Street Address 70 Box 316 City, State & Zip Code Thorofare, NJ 08086 Project Manager for Monitoring Firm Dave or Steve Flanigan Scheduled Start Date (10) Scheduled Completion Date (11) Sf/8/12 Scheduled Start Date (10) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Hours Describe: Isolated Area Scope of Work (Check all that apply) 23 sf or 23 if Renovation Demolition Removation Demolition Removation Demolition Removation Demolition Removation Demolition Removation Demolition Removation Describion Removation Demolition Removation Describion Removation Demolition Removation Describion Removation Removation Demolition Removation Removation Demolition Removation Removation Removation Demolition Removation Remova			, ,	, ,				Asbestos ar	nd Mold Ser	vices, Corp.				
Negative Pressure Enclosure Steet ABATED Steet ABATED Steet ABATED Steet ABATED Steet ABATED In Facility (13) To BE ABATED In Facility (13) To BE ABATED In Facility (13) To Facil							2292				,			
City, State & Zip Code Thorofare, NJ 08086 Thorofare, NJ 08086 Thorofare, NJ 08086 Telephone Number Base or Steve Flanigan Scheduled Start Date (10) Scheduled Completion Date (11) St181/2 Scheduled Start Date (10) Scheduled Completion Date (11) St181/2 Occupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Hours Describe: Isolated Area Scope of Work (Check all that apply) ≥ 3 sf or ≥ 3 if ≥ 160 sf ≥ 260 if Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) 13* Floor Kitchen 14* Floor Kitchen 15* Floor Exterior Name of Registered Waste Hauler Horizon Disposal City, State & Zip Code Hainesport, NJ 08036 Telephone Number 609-702-0400 Stepet Address 107 Haddon Ave. City, State & Zip Code Wastmont, NJ 08108 License Number 1086-2814 Stepet Address 107 Haddon Ave. City, State & Zip Code Westmont, NJ 08108 License Number 1086-2814 Stepet Address 107 Haddon Ave. City, State & Zip Code Westmont, NJ 08108 Stepet Address 107 Haddon Ave. City, State & Zip Code Westmont private Address 107 Haddon Ave. City, State & Zip Code Westmont private Address 107 Haddon Ave. City, State & Zip Code Westmont, NJ 08108 Street Address 107 Haddon Ave. City, State & Zip Code Westmont, NJ 08108 Street Address 107 Haddon Ave. City, State Non-Exempted and Non-Friable Procedure Nanier Pressure Enclosure Mini-Enclosure Glove Bag Procedures Non-Exempted and Non-Friable Procedure Non-Exempted Adament of Non-Exempted Adament of Non-Exempted Non-Exempted Non-Friable Procedure Non-Exempted Non-Friable Procedure Non-Exempted Non-Fr								3859 Sylon	Blvd.					
Thorofare, NJ 08086 Project Manager for Monitoring Firm Base Sease Seas		ode										17 4-3		1
Telephone Number Stews Flanigan S														
Dave or Steve Flanigan							ner			License	Number			
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Strikt Surgest Strikt			Cahadulad Car			AND DESCRIPTION	\	Description of Commission of the International Principles						
Occupancy Status During Abatement (Check only one)		ate (10)		ripietio	пра	le (11,	,							
Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Hours Describe: Isolated Area Negative Pressure Enclosure					,									
Abatement Performed Outside of Normal Hours Describe: Scope of Work (Check all that apply) ≥3 sf or ≥3 lf ≥160 sf ≥260 lf Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13) 1st Floor Kitchen 1st Floor Exterior Name of Registered Waste Hauler Horizon Disposal City, State Copposition of Anount Aspestos-Containing Mini-Enclosure Asbestos-Containing (Specify SF or LF) Sefinor Amount Asbestos-Containing Material (ACM) (Specify SF or LF) Mini-Enclosure Monorisvible Procedure Asbestos-Containing Material (ACM) (Specify SF or LF) Material (ACM) (Specify SF or LF) Morrisville, PA Cubic Yards of Waste 4 GROWS City, State Trenton, NJ Completed By (Print or Type) Title Signature City, State Trenton, NJ Completed By (Print or Type) Title City, State Trenton, NJ Completed By (Print or Type) Title City, State Trenton, NJ Completed By (Print or Type) Title City, State Trenton, NJ Completed By (Print or Type) Title City, State Trenton, NJ Completed By (Print or Type) Title City, State Trenton, NJ Completed By (Print or Type) Title City, State Trenton, NJ	Occupancy Status	During Abat	tement (Check o	nly one)									
Describe: Stolated Area Scope of Work (Check all that apply) Scope of Wini-Enclosure Glove Bap Procedures Mini-Enclosure Glove Bap Procedures Non-Exempted and Non-Friable Procedure Non-Exempted and Non-Friable Procedure Abatement Type Abatement Type Scope of Wasterial (ACM) Scop						ateme	nt					_		
Scope of Work (Check all that apply) Scope of Work (Specify Specify Scope of Work (Specify Scope of Work (Specify Specify Spe	Abatement	Performed	Outside of Norm	al Hou	rs			2,500						
Scope of Work (Check all that apply) ≥3 sf or ≥3 lf	Describe:							Westmont,	NJ 08108					100
Scope of Work (Check all that apply) ≥3 sf or ≥3 lf	☐ Isolated Ar	rea							19 (41)					20. 7
≥3 sf or ≥3 lf		neck all that	apply)											
≥ 160 sf ≥ 260 lf Demolition Glove Bag Procedures Non-Exempted and Non-Friable Procedure Non-Exempted (ACM) Non-Exempted and Non-Friable Procedure Non-Exempted (ACM) Non-Ex			10.0						Negativ	e Pressure En	closure			
Non-Exempted and Non-Friable Procedure	≥3 sf or ≥3	If		\boxtimes	Rer	ovatio	on		Mini-Er	nclosure				
Non-Exempted and Non-Friable Procedure	⊠ ≥160 sf ≥2	60 If		Ħ	Der	nolitio	n		Glove E	Bag Procedures	S			
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Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13) 1st Floor Kitchen 2nd Floor Exterior Name of Registered Waste Hauler Horizon Disposal Completed By (Print or Type) Asbestos-Containing Material (ACM) Solely by Maintenance or Custodial Staff? (12) Yes No N/A Floor Tile Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous) Floor Tile 100 SF Siding 900 SF Name of Registered Landfill Name of Registered Landfill Name of Registered Landfill Date Date		ocation of		Is	ocat	ion	1	Description	The state of the s					
Material (ACM) TO BE ABATED in Facility (13) Maintenance or Custodial Staff? (12) Yes No N/A Siding Name of Registered Waste Hauler Horizon Disposal City, State Trenton, NJ Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous) Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous) SF or LF) Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous) SF or LF) Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous) SF or LF) Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous) SF or LF) Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous) SF or LF) Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous) SF or LF) Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous) SF or LF) Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous) SF or LF) Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous) SF or LF) Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous) SF or LF) Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous) SF or LF) Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous) SF or LF) Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous) SF or LF) Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous) SF or LF) Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous) SF or LF) Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous) SF or LF) Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous) SF or LF) Material (ACM) (i.e., thermal systems insulation, surfacing,			ning										1000	7
Maintenance or Custodial Staff? (12) Yes No N/A 1st Floor Kitchen 2nd Floor Exterior Name of Registered Waste Hauler Horizon Disposal City, State Trenton, NJ Maintenance or Custodial Staff? (12) Yes No N/A Floor Tile Siding Floor Tile 100 SF Siding 900 SF Name of Registered Landfill Name of Registered Landfill GROWS City, State Trenton, NJ Completed By (Print or Type) Maintenance or Custodial Staff? (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous)													Щ	
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Yes No N/A				Custo	odial :	Staff?					non	pa	psu	so
Yes No N/A					(12)	contrarion.		or other miscell	aneous)		<u>a</u>	-5	lat	l le
2 nd Floor Exterior		*****		Yes	No	N/A					i		Ф	3390
2 nd Floor Exterior	1St Elear Vitaba					M	Floo	r Tilo		100 SF	M	П	П	П
Name of Registered Waste Hauler Name of Registered Waste Hauler Name of Registered Landfill				+=	H							H	H	H
Name of Registered Waste Hauler Name of Registered Waste Hauler Name of Registered Landfill	2 Floor Exterio	or		닏	Щ		Siuli	19		300 SF		무	H	H
Name of Registered Waste Hauler NJDEP Waste Hauler ID No. of Waste GROWS City, State Trenton, NJ Completed By (Print or Type) Name of Registered Landfill Name of Registered Landfill Cubic Yards of Waste GROWS City, State Morrisville, PA				닏								님	<u>H</u>	H
Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Waste Hauler ID No. of Waste 22612 City, State Trenton, NJ Completed By (Print or Type) Name of Registered Landfill Name of Registered Landfill Cubic Yards of Waste GROWS City, State Disposal Date 5/18/12 Morrisville, PA Date										1		Ш	Щ	Ш
Name of Registered Waste Hauler NJDEP Waste Hauler ID No. 22612 Cubic Yards of Waste								10000	1777				Ш	Ш
Name of Registered Waste Hauler Horizon Disposal City, State Trenton, NJ Completed By (Print or Type) NJDEP Waste Hauler ID No. 22612 Disposal Date 5/18/12 Cubic Yards of Waste GROWS City, State Disposal Date Signature Disposal Date Date						M								
Hauler ID No. of Waste 22612 4 GROWS City, State Trenton, NJ Completed By (Print or Type) Title Hauler ID No. of Waste 4 GROWS City, State Disposal Date 5/18/12 Morrisville, PA Date	Name of Registered Waste Hauler				ĪN.		Waste	Cubic Yards	Name of Reg	gistered Landfil	I			
Horizon Disposal City, State Trenton, NJ Completed By (Print or Type) Disposal Date City, State Morrisville, PA Disposal Date Signature Date	Name of Registered Waste Fladier									9				
City, State Trenton, NJ Disposal Date 5/18/12 Completed By (Print or Type) Title Disposal Date Morrisville, PA Date	Horizon Disposal							4	GROWS					
Trenton, NJ Completed By (Print or Type) Title Signature Date							-	Disposal Date					1000	
Completed By (Print or Type) Title Signature Date										PA				
completed by (1 line of 1966)	150								INDITIONING	,	10-4-			-
Kim Trumbetti Admin. 5/1/12		State of the state						Signature				40		
	Kim Trumbet						n.	GALL (\	_{(m} taphwa)	5/1/	12		

Job #: 1204-1636 Check #: NA

Date of Notification (1) 4/18/12				Building f Americ	Owner / Operati	or (2)	CENTY	医厅	11/	
Agencies Notified Type	e Notification	Sti	reet Ac	ddress				11	11:	
⊠ EPA	Initial				50 Route 173		114V 3 2014	- 11		
DOL X				te & Zip (, NJ 088			med = 0 ZUIZ	(14,10.05	41	
Ø DOH □	Emergency			Contact		Turn with	7 N + 02-44	elephon	e Num	her
☐ DCA ☐	Cancellation	M	r. Chri	istophe	r P. D'Alleinne)	Programme of the state of the s	J. J	- Tan	P.C.
			FACIL	ITY INF	ORMATION		reservation is settled to the		-	
Name of Facility Where	Abatement is Taking P			-	Type of Faci	lity (4)	The state of the s	Section .	12	-250
Bank of America	771	*			School	(K-12)		e version of	90.0	
Street Address 600 East Union Aven	ON HO	LD-C	heck	will h	e sent for	an additio	nal		32	
out East Union Aven	ue				off hold.		pullaing	s, home	Contract Contract)
City (5)		WHEH	14 15	taken	on noid.	nank you	4	-		
Bound Brook	Joomerset	-			- Journal Coo	(i noi ii bonig	D	4		
				Vicinia Vicinia		perty-Bank	•			
Name of Monitoring Firm		ner (8)	Α	SCM No		atement Contra				
Lead Consultants of Street Address	America, Inc.						rvices, Corp.			
225 Demott Lane, Su	ite 206				Street Addre	The second second				
City, State & Zip Code			-		City, State &					
Somerset, NJ 08873		1			Hainesport	, NJ 08036				
Project Manager for Mor Stuart Levitch	itoring Firm	Telepho			Telephone N		License N			
Scheduled Start Date (1)	O) Scheduled Cor	732-41			609-702-04 Name of OS	AND 10-10-10-10-1		00862	2	
4/30/12	5/4/12	npiedon	Date (11)	EMSL Ana					
Occupancy Status Durin	g Abatement (Check or	nly one)			Street Addre					
	acated During Entire P			ment	107 Haddo					
Abatement Perfo	ormed Outside of Norm	al Hours			City, State &					
Isolated Area					Westmont,	NJ 08108				
Scope of Work (Check a	Il that apply)								-	-
	N 2024 8 100 100					Full Co	ontainment with Ne	egative F	ressu	re
≥3 sf or ≥3 lf ≥160 sf ≥260 lf			Renova				nclosure			
≥160 sf ≥260 lf			Demoli	tion			Bag Procedures cempted and Non-	Erioblo	Droos	lura
Location	on of	Is Lo	cation	-	Descriptio		Amount		ement	
Asbestos-C		Norma	lly Use		Asbestos-Cor	ntaining	(Specify	/ tbat	T	Турс
Material TO BE A		Sole Mainter	ely by	or	Material (A (i.e., thermal s		SF or LF)	R	_ [п
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(13)		12)		or other miscel		ŀ	Va.	Repair	Enclsoure
F-4 :		Yes N	No N/						a)
Exterior Exterior		片片		_	ing and Slag		3,400 SF		415	
Exterior		片片			ning		340 LF		┵	
		計片							╡╬╘	
	***************************************								= -	
	100.20								터는	
Name of Registered Was	ste Hauler		NJDE	P Waste		Name of Reg	gistered Landfill			
Horizon Disposal			1970	r ID No. 2612	of Waste	GROWS		100		
City, State	Name and a				Disposal Date	City, State		¥		
Trenton, NJ					5/5/12	Morrisville.	, PA			
Completed By (Print or T	ype)	-	Title		Signature			Date		
Kim Trumbetti			Adm	in.	PW			4/27/	12	7. I

Job #: 1109-1594 Check #: NA

Date of Notification 3/1/12	(1)	Name of Building Owner / Operator (2) Camden Plaza Associates, c/o Edward D. Sheehan, Esq.										
Agencies Notified EPA	Type Notification		Stree	t Add			11 000 1 000	SETWE		100	4	
DEP	☐ Initial				& Zip		TITAL		111	1 1 1	-	-
□ DOL	Amended #3 ON H	OLD		_	J 08102		111111111111111111111111111111111111111	AV 2 2012				
□ DOH	Emergency		650 185		ontact		13 14 17		elepho	one M	Jumb	er
☐ DCA	Cancellation		Mr. E	dward	Sheeh	nan	1 1		4			
		0.15	FA	CILI	TY IN	FORMATION	, ASE	ESTUS CONTROL &	Manage -	1	• • •	
Name of Facility WI	nere Abatement is Taking F	Place				Type of Facil	lity (4)	LICENSIO			-	
Camden Plaza Hotel						School ((K-12)	and the state of the				
Street Address							pter 8 (Other th		-			
506 Cooper Street								mmercial building	s, hon	nes,	etc.)	
0:1 (5)						Square Feet	# of FI	oors Bl	dg. Ag	je		
City (5) Camden	County (6)			Cada	/7\	175,000	عا		years			
						LD		olished)		5 5 5		
Horizon Environmen	Firm Hired by Building Ow tal	ner (8)	AS	CM No		atement Contra I Mold Services					
Street Address PO Box 316						Street Addre	T. T					
City, State & Zip Co	de					3859 Sylon BI City, State &						
Thorofare, NJ 08086		200				Hainesport, N						
Project Manager for				Num	ber	Telephone N	umber	License Nu	mber			
Dave or Steve Flanig Scheduled Start Da			348-08	CT STORY	Y.	609-702-0400	10.00		6086	52	370	
3/14/12	8/14/12	mpieu	OII Da	ite (11)	Name of OSI EMSL Analytic						
Occupancy Status [Ouring Abatement (Check o	nly or	ie)			Street Addres						
	ed/Vacated During Entire F			ateme	ent	107 Haddon A	lve.					
	Performed Outside of Norm	nal Ho	urs			City, State &	Zip Code					
Describe:						Westmont, NJ	J 08108					
Isolated Are	51									8		
Scope of Work (Che	eck all that apply)						N 5 110			_		
≥3 sf or ≥3 li	f	П	Rer	novati	on			ntainment with Ne	gative	Pre	ssure	:
≥160 sf ≥260		X		nolitic	T-1,015			Bag Procedures				
	6 3							cempted and Non-	Friable	Pro	cedu	ire
	ocation of		Locat			Description		Amount			ent T	
	os-Containing		mally			Asbestos-Con		(Specify				71-
	erial (ACM) BE ABATED		olely ntenar			Material (A (i.e., thermal s		SF or LF)	ی	_	Encapsulate	ш
	Facility			Staff?		insulation, surface	cina. VAT	4	Remova	Repair	caps	Enclsoure
	(13)		(12)			or other miscell			Va	쁰	sula	oure
		Yes	No	N/A							te	
Roof Roof				X	Roofi			11,000 SF				
Roof	10.7	H	H			lashing site Material		1,000 SF 6 SF	X			
Various Locations Th				×		Insulation		2,720 LF		H	H	H
(Basement, Stairwell,						70.5		<u> </u>				
Various Locations Th (Basement & 1st Floor				Floor	Tile		15,300 SF					
Boiler Room					Exha	ust Duct Insulation	n	400 SF		\Box		П
Boiler Room	Boiler Room Boiler Room				Boile	r Insulation		300 SF	\boxtimes	d		
Name of Registered					ng Tank Insulation		300 SF	\boxtimes				
Horizon Disposal		uler II	D No.	Cubic Yards of Waste 100	GROWS	istered Landfill						
City, State				220								
Trenton, NJ				Disposal Date 8/14/1/2	City, State Morrisville, PA	Α.				-		
Completed By (Print	or Type)		Tit	le	- 1	Signature	1		Date			-
Kim Trumbetti	m Trumbetti					- Chal			4/26/	12		

Job #: 1205-1670 (14) Check #: 2676

Date of Notification 5/1/12			J	erse	y Cen	tral F	Owner / Operator Power & Light	(2)	6 E I W	E	The land of the la		
Agencies Notified EPA	Type Notifica	ation	40		Addre adisc	ss on Av	enue	III II M	AY 3 201	2 11		1	
☐ DEP						Zip C				Lane		70.5	
☑ DOL	☐ Amer	nded	N	lorris	stowi	ı, NJ	07962	/ <u>L</u>	B. For Confedence 11.7	and the same of th	4		
□ DOH □	☐ Emer	gency	N	ame	of Cor	ntact		ASE	ESTUS CONTROL	Telephor	ie Ni	ımbe	er
DCA	Cano	ellation	N	ır. K	en Se	boro	wski	Le manuelle de	LICENSING				
1000				FΔC	III ITY	INF	ORMATION .		A CONTRACTOR OF THE PROPERTY.	PRINCIPLES		-	
Name of Facility W	here Ahateme	ent is Taking P	ace (3)	-	/ILII	1141	Type of Facilit			14	e ou de	1-	
Residential Prop		one to running i	400 (0,				School (K						
Street Address	0.19						Subchapt	ter 8 (Other tha	an K-12)				
3711 Arctic Aver	niie						Other (i.e	. private & con	nmercial buildin	igs, home	es, e	tc.)	
07777110010771701							Square Feet	# of Floo	ors	Bldg. Age	:		
City (5)		County (6)	Cou	inty C	ode (7)	1000	1		58			
Wildwood		Cape May						Prior if being d	emolished)				
WIIIUWOOG		Cape may					Residential		**************************************				
Name of Monitoring	Firm Hired h	v Building Owr	ner (8)		ASC	M No.		ement Contrac	ctor (9)				
Horizon Environ		by building Own	101 (0)		1,00			nd Mold Serv					
Street Address	montai						Street Addres						
PO Box 316							3859 Sylon	Blvd.					
City, State & Zip Co	ode		33				City, State & 2		*/				
Thorofare, NJ 08	3086						Hainesport,			- 22			
Project Manager fo	r Monitoring I	Firm			Numb	er	Telephone Nu		License I		_		
Dave or Steve F			856-8				609-702-040			0086	2		
Scheduled Start Da	Control of the Contro	Scheduled Co	mpletio	n Dat	te (11)	(8)	Name of OSH						
5/14/12	1000000	5/18/12					EMSL Analy						_
Occupancy Status	During Abate	ment (Check o	nly one	e) of Abr	atomo	nt	Street Addres						
		During Entire F			ateme	iii.	City, State & 2						
	Performed C	utside of Norm	ai Hou	rs				n of The same are an income					
☐ Describe: ☐ Isolated Ar							Westmont,	NJ 00 100					
		nnlıd		-	-								-
Scope of Work (Ch	ieck all triat a	ppiy)							e Pressure End	closure			
☐ ≥3 sf or ≥3	If		\boxtimes	Ren	ovatio	n		Mini-En	closure				
≥160 sf ≥26	7		Ħ	Den	nolitio	n		Glove B	ag Procedures	10			
								Non-Ex	empted and No	n-Friable	Pro	cedu	ire
T 1	ocation of		Isl	Locat	ion		Description		Amount	Aba	teme	ent T	уре
	stos-Containii	ng		nally l			Asbestos-Con		(Specify			_	
	iterial (ACM)			olely			Material (A) (i.e., thermal s		SF or LF)	R	71	Encapsulate	m
	BE ABATED in Facility		100000000000000000000000000000000000000		ce or Staff?		insulation, surface			Remova	Repair	aps	Enclsoure
	(13)		Judi	(12)	J.u		or other miscell			val	¥.	ulat	ure
			Yes	No	N/A							æ	
1 st Floor			П	П		Text	ured Ceilings		900 SF				
1 st Floor		-	T	ī			ured Walls		3,400 SF				
1 st Floor			Ħ	Ħ	Ø	Tran	site Wall & Ce	iling Panels	400 SF				
1 st Floor				Ī	X	-	Sheet Flooring		25 SF				
1 st Floor			I	П			r Caulk		40 LF				
Exterior			T	Π	X	Flas	hing	•	300 SF				
Name of Registere	ed Waste Hau	ıler		10000	IDEP	Waste	Cubic Yards of Waste	Name of Reg	istered Landfill				
Horizon Dispos	al				226	12	6	GROWS				11	
City, State				-			Disposal Date	City, State					
Trenton, NJ							5/18/12	Morrisville,	, PA				
Completed By (Pri	nt or Type)		and the Rose	Tit	tle		Şignature			Date	6.0%		1
Kim Trumbet	5000 1000			A	dmir	٦.	Kult			5/1/	12		

Job #: 1203-1629-1 Check #: 2669

Date of Notification 5/1/12			5	prin	gpoi	nt at I	Owner / Operator leadow Lakes,		EIVE				
Agencies Notified EPA	Type Notifica	ation			Addr		, Suite C120	MAY	2 2012	A STATE OF THE STA			
DEP DOL DOH DCA			F	City, S Princ Name	eton of Co	& Zip C , NJ 0 ontact	ode	ASBESTO	3 2012 S CONTROL & ENSING	Telephor	ie Nu	ımbe	er
					100000000000000000000000000000000000000	500 MOW	ORMATION	and the second s	Katakana	T			
Name of Facility W	here Abateme	ent is Taking P	ace (3		CILII	TINE	Type of Facility				N .		
Meadow Lakes S				·			School (K	-12)					
Street Address								er 8 (Other th				\	
300 Meadow Lak	es								mmercial buildi			.c.)	
Oit (E)		County (6)	Co	until 1	20do	/7)	Square Feet	# of Flo		Bldg. Age			
City (5) East Windsor		County (6) Mercer	Col	unity (Code	(1)	547,111 Current Use (F	2 Prior if being		41			
East windsor		wercer							ment Commi	ınitv			
Name of Monitoring	Firm Hired b	v Building Owr	er (8)		AS	CM No.							
Criterion Labora		,	(0)						vices, Corp.				
Street Address	(A)						Street Address		9				
3370 Progress D		J					3859 Sylon I						
City, State & Zip Co Bensalem, PA 19							City, State & Z Hainesport,					-	
Project Manager fo	r Monitoring F	irm	Telep		Num	ber	Telephone Nu 609-702-040	ımber	License	Number 0086	2		
Scheduled Start Da 5/4/12	ate (10)	Scheduled Cor 5/8/12	1)	Name of OSH EMSL Analy						
The state of the s	sed/Vacated Performed O	ment (Check o During Entire F utside of Norm	eriod	of Ab	ateme	ent	Street Address 107 Haddon City, State & Z Westmont, I	Ave. Zip Code		2		33-95	
Scope of Work (Ch		oply)							1031 V VV	88 8			
\[\ge 23 \text{ sf or ≥3} \] \[\ge 2160 \text{ sf ≥26} \]					novati			Mini-Ei Glove Non-E	ontainment with nclosure Bag Procedure xempted and N	s on-Friable	Pro	cedu	re
10/20	ocation of			Loca			Description Asbestos-Cont		Amount (Specify	Aba	teme	ent T	ype
Ma TO	stos-Containin terial (ACM) BE ABATED in Facility (13)	ig	S Main	olely tenar	Used by nce or Staff?	2	Material (AC (i.e., thermal sy insulation, surfac or other miscella	CM) ystems ing, VAT	SF or LF)	Removal	Repair	Encapsulate	Enclsoure
Boiler Room				П	$+\Box$	Heat	Exchanger Ins	sulation	300 SF		П	П	П
Boiler Room			X	Ħ	IП		m Line Pipe In:		90 LF				
-			Ħ		T	-		Ü.					
	1 7 7												
	245- 2											Щ	
Name of Registere Horizon Disposa		ler		26.40		ID No.	Cubic Yards of Waste	Name of Re	gistered Landfil	l			
City, State		-			4	-	Disposal Date	City, State			2		
Trenton, NJ			n Si sa			up G	5/8/12	Morrisville	, PA				
Completed By (Prinkin Trumbet				L Chief	^{tle} dmi	n.	Signature		-	5/1/	12		

STATE OF NEW JERSEY NOTIFICATION OF ASBESTOS ABATEMENT (PURSUANT TO NJAC 8:60-7 AND 12:120-7 ANNUAL NOTIFICATION

Check # 2647

Date of No	oțification (The state of the s			wner/Ope	and the second s		T (54) 25 (4)		
04	/ _23	/12					COMPANY	The state of	E A		(T	and the same of th	
Agencies	Notified	Type of N	otifica	ation		Street Ac 100 WES	T HUNTER	AVENUE	15 to 1	'- II i	/ 5		
	EPA DEP		Initia				te, Zip Cod OD, NJ 076		VAM	2 00	1	Table Street	Ę
	DOH DOL DCA		Eme	ndment a rgency w cellation	#1 // justification	Name of JOHN MA			111711	Telepho	ne Num	ber/	
	2011		June	Jonation	F	ACILITY II	NFORMATI	ON	AODEMO. LICI	NSING	8		
Name of F	Facility Whe	ere Abatem	nent is	Taking	Place (3)		Type of F	acility (4)	Andrew or the second second second second second		THE RESERVE	-	
	COMPANY				omior estonitori				(40)			Party .	
Street Ad	droce					- 2	1	School (F	(-12) ter 8 (Other	than K 1	2)	_*	
	T HUNTER	AVENUE						Other (I.e	., private & omes, etc.)				
City (5)	75	County (6)		County Code	(7)	Square F		# Of Floor	rs	Buildir	ng Age	
MAYWOO	D	BERGEN					and the same of th	0,000		2	1	50	+
					L			Jse (Prior it CTURING	being dem	iolished)			
Name of N	Monitoring	Firm Hired	by BI	lda. Own	er (8)	TASCM NO			Contractor	(9)			
	3		,	-5						,- /			
AET								onmental Se	ervices Inc.				
Street Add	dress _ITTLE DRI\	/E					Street Ad	dress					
	e, Zip Code		-				462 Getty	Avenue					
	VATER, NJ							e, Zip Code)				
	ngr. For Mo		irm		Telephone Nu	ımber	1						
	JSEKNECH		10.1	1.0	908-218-1108	141	Clifton, N.			Tr ·			
O5	Start Date	/ 12	Sche	05	letetion Date (1	11)	Telephon	e Number		License	Number		
/	/ /	/——	-	/	/		973-7	72-3660				00117	
Occupano	y Status D							OSHA Mon		Accommendation			
			ted D	uring Ent	tire Period of			onmental Se	rvices Inc.				
	Abatemen Abatemen Hours - De	t Performe	d Out	side of N	lormal Facility		Street Ad 462 Getty	5					
		scribe:	7:00	AM-5:00F	PM		Control of the Contro	e, Zip Code NJ 07011	,				
Scope of	Work (Chec	k All That	Apply	1)			-						
	Demolition	n		N	Renovation	П	Full Cont	ainment wi	th Negative	Pressure	e		
	≥3sf or_≥3	lf					Mini - End	closure			8		
	≥160 sf or	≥260 If						Procedure					
						V	Non-Exen	npted (^) ar	nd Non-Fria	ble Proce	eaure		- 14
	Location of			ls	1	Descript	tion of			Abateme	ent Type		
	estos Conta		100000000	cation	As		Containing			R		E	E
	laterial (AC O BE ABAT		50000000	rmally Jsed		Material e., therma			Amount (Specify	E M	R	N C	N C
10	in Facility			olely			facing, VA	т.	SF or LF)		P	A	L
	(13)		0.000	Main-			ellaneous)		J. S. L. ,	v	A	Р	o
			65,000 to	nance/						Α	1	s	s
			125000000	stodial aff (12)	1					L	R	U	U
				NO N/A	 				-		-	-	R
BLDG 10					TRANSITE				20 SF	V		1	1
												10	
						7							
					LUBER IV.	Io	100 66		15:11				
	Registered \ CARTING	Waste Hau	ler	10	NJDEP Waste Hauler ID No. 4509		I.E.S.I.	Registered	Landfill				82
City, State	9				4003	Disposal	City. State)					
NEWARK,				(character		Date	BETHLAH						
Complete	d by (Print	or Type)			Title			Signature		6	1	Date	
STEVENS	STILES				PROJECT MAI	NACED		to	PAL)	8)		05/01/12

04/

Date of Notification (1) .					g Owner/Operato	11 11 12 12	EINE		ř ie			
04/30/2012						Regional Hig	h School	The second secon	100	47			
Agency Notified	Type Notification			Street	Address	<u> </u>	11 11	*					
⊠ EPA			. [rling Ro		U U MAY	3 2012 #	41	-		-	_
☐ DEP	⋈ Amended		- 1	City, S	tate, Zip	Code	F.	(Acc)	-/				
⊠ DOL	Amendment # 3	dina	1		ı, NJ 070		Latron				101		_
⊠ DOH	 Emergency (included justification) 	anig		Name	of Contac	it [_	LIC	Telephone Numb	er a				
⊠ DCA	☐ Cancellation			Γim St	ys		The second secon	-	- August	0			
				FACI	LITY INF	ORMAT10N	The state of the s	nation of the Assessment of the same		<u>. </u>			
Name of Facility Whe	ere Abatement is Taking Pl	ace (3)					Type of Facilit	y (4)	- 74 - 47 4 - 94	W.			
Watchung Hills Reg							School (K-1	8 (Other than K-1 2)					
								rivate & commercial	building	gs,			
108 Stirling Road							homes, etc	# of Floors	Bldg.	Age	-		-
City (5)								# 01110013		, .90			
Warren, NJ 07059							20000+ SF		50+				
County (6)	1 10 11 11 11 11) (STATE USE		or if being demolis	nea)				
Somerset				ONLY)			High	School					,
Name of Monitoring F	irm Hired by Building Own	ner	ASCM	No.		Name of Abate	ement Contractor	(9)					
(8) Ahera Co	nsul fants	(0057			RICI CORP							
Street Address	, , , , , , , ,					Street Address			-				T
P.O. Box 385						41 LIBERTY	STREET						
City, State, Zip Code						City, State, Zip							Т
En S Augusta Constructions	21 0205					PASSAIC, NJ	07055						
Oceanville, NJ 0823 Project Managerfor N		T	elepho	ne No.		Telephone No.		License No.				No.	
	nonitoning r iiiii			-1833		973-614-1266		00838					
Domenic D'Errico	Scheduled (Name of OSH		100020				10	T
Start Date (10)			ion ba	to (1 1)		RICI CORP							
05/02/2012	06/01/2012					Street Address					and the same of		
Occupancy Status Di	uring Abatement (Check o	nly one,											
☐ Facility ClosecNac	cated During Entire Period	of Aba	temen			41 LIBERTY City, State, Zip				-	_		-
 □ Abatement Perform ⋈ Other - Describe 	ned Outside of Normal Fa			2.		1000 0000	1000000						
Academic Aca	Occupied 6a	m	to	2pm)	PASSAIC, N.	1 0 / 0 5 5			_			
Scope of Work (Chec : 3 sf or ~: 3 lf : 1 60 sf or ~: 260 lf					novation nolition	☐ Mir	ni-Enclosure ovelbag Procedure	th Negative Pressure e nd Non-Friable Proc					
		Ι.	s Locat	ion	1				* 4 *	A		eme	nt
Asbestos-Conta <u>TO BE</u> IN	cation of ining Material (ACM) E ABATED Facility (13)	Us Ma	Norma ed Sole aintena Custod Staff' (12)	lly ely by ince/ ial		Description estos Containing la e., thermal system surfacing, Vo other miscella	Material (ACM) ns insulation, AT, or	Amount (Specify SF or LF)	#8 %	Removal		e Encapsulate	Enclosure
	CONTROL OF	Yes	No	N/A						-		-	
Large Group Instruc	ction Room Vestibule		x		Glue D	ot asso. with 1 X	1 Ceiling Tiles	20 SF		x			
Large Group Instruc	ction Room		x		9 X 9 Floor	tiles and mastic (beneat	h carpets & runners)	1100 SF		X			
Large Group Instruc			x		Textur	ed Ceiling plas	ter	4500 SF		X			_
		1					E 10 10	10 10 10 10					
Name of Registered	Waste Hauler	10.00	JDEP 1 No.	Waste I	Hauler	Cubic Yards o Waste		stered Landfill					
RICI CORP		29	051			TBD		LANDFILL			-		Ļ
City, State	er e e e e e e e e e e e e e e e e e e		12-	4		Disposal Date	TO 1422/948000 504						
PASSAIC, NJ					Language Com	TBD	MORRISVI	LLE, PA					4
Completed by	Title		N.	1042		Signature	2 (1/2)	-	Date		-		1.5
RISTO TRAJKOV	PRESIDEN	IT	2. 20			INO	12)4/30/2	2012	2		
ASB-41	* Do n	ot use t	his for	m for as	sbestos li	censure exempte	ed activities.	2, 151 11					

Or HE

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

at s		NOI				AC 8:60 and 5:10	The state of the s	on a second management of the confidence of the	LANGE IN	district :			
						i	TO E	CEIW	E		1		
Date of Notification (1)		12		100.000		ng Owner/Operator (rformance Mater	111 11 cm	W E I W		or from the country of	THE STATE OF THE S		
Agencies Notified ☑ EPA	Type Notification	n			t Address	nd Street	-	MAY 3 201	2		-		
□ DOLWD	Amended			City.	State, Zip	Code	1 1		1		1		
DHSS	Amendment			9786		g, NJ 08865-1271	I LA	BESTOS CONTROL	8		000	3	
☐ DCA (NJAC 5:23-8)	Emergency justification)		g		e of Contac		A STATE OF THE PARTY OF THE PAR	Telephone Num	ber	Land Street	j		
(☐ Cancellation			Ro	bert Sny	der	er differentiation a great	_	_ 7	69			
				FA	CILITY II	NFORMATION	The state of the s	0.002 0.00		-4 0	10 .60		
Name of Facility When	e Abatement is Tak	ing Place	e (3)		(OILITTI	VI OTUII/TITOIT	Type of Facility	(4)			-	-	
Avantor Perform		2000 - 277 - 20-2011		5			School (K-12						
Street Address		COSIIII-	_		-			3 (Other than K-12			nan		
600 N. Broad Stre	eet						homes, etc.)		nercial buildings,				
City (5)					natural designation		Square Feet	# of Floors	BI	dg. A	ge		
Phillipsburg, NJ	08865-1271						4000	1	10000	60			
County (6)		-	8.5	Cou	nty Code (7)(STATE USE ONLY)	Current Use (Pr	ior if being demoli	shed)				
Warren					(4)		**	*					
Name of Monitoring Fi	rm Hired by Building	Owner	(8)	ASCN	l No.	Name of Abatement Contractor (9)							
Health & Safety S	Services, Inc.					Alliance Envi	ronmental Sys	stems					
Street Address				-		Street Address				18			
318 12th Street						550 East Unio	on Street						
City, State, Zip Code					a <u>14100-0-13</u>	City, State, Zip Co		- 77					
Hammonton, Nev	v Jersey 08037					West Chester	r, PA 129382						
Project Manager for M	onitoring Firm		Te	lephone	No.	Telephone No.		License No.					
Jim Proctor			(609) 7	04-8850	610-701-9000							
Start Date (10)	Sch	eduled C	ompl	letion D	ate (11)	Name of OSHA M	lonitor						
04 /10	/ _12	04 /	1	3 /	12	Vertex Engine	eering						
Occupancy Status Dur	ing Abatement (Che	eck only	one)		- 1900	Street Address						7	
Facility Closed/Vac						1102 Baltimo	re Pike, Suite	201					
Abatement Perform					scribe	City, State, Zip Co	ode						
Time of Abatement	: <u>/</u> AMPM/ <u>3</u>	:30PM		_AM		Glen Mills, PA	A 19342						
Scope of Work (Check	all that apply)					12-12-12-12-12-12-12-12-12-12-12-12-12-1	N: 40 1000/0000						
≥3 sf or ≥3 lf≥160 sf or ≥260 lf		⊠ Re	enova emolit			☐ Mini-Enc ☐ Glovebag	g Procedure	gative Pressure n-Friable Procedu	re				
		Is	Loca	ation						atem	ent T	vpe	
Location		- T	Norm			Description o				_			
Asbestos-Containir TO BE A				lely by ance/		estos Containing Ma e., thermal systems		Amount (Specify	Removal	Repair	Encapsulate	Enclosure	
IN Fac		Cus		Staff?	(1.0	surfacing, VAT,		SF or LF)	oval	=	psu	Sur	
(13	3)		(12		-	other miscellane	ous)				ate	(D	
		Yes	No	1 1 1 1 1 1 1					+=	_	_		
Bld. 135 Boiler Hou	ise - Boiler 3				Pipe In	sulation		50 LF			Ш		
		Ш											
Name of Registered W N.E.T.S.	aste Hauler		183	NJDEP Hauler		Cubic Yards of Waste	Name of Regis						
AND				1894	7	10		uı					
City, State Hazelton, PA						Disposal Date TBD	City, State Imperial, P	A					
Completed By (Print or	Type) IT	itle	-		-	Signature	10/7		até /				

ASB-41 MAY 11

John Heemer

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

Estimator

Date of Notification (1) 03 /	21 /	12				ng Owner/Operator erformance Mate		- Andrew Code (TOTAL)	\$2.75°	men		
Agencies Notified	Type Notificati			Stree	et Address					7		
⊠ EPA	☐ Amended					ad Street		V-10-100-100-100-100-100-100-100-100-100		11		
⊠ DHSS	Amendmen	t #			State, Zip		MAY II MAY	3 2012		1		
DCA	☐ Emergency	(includi	ng			g, NJ 08865-127	10 E 1800			1		
(NJAC 5:23-8)	justification	-		(2)700000	e of Conta			Telephone Nur	mber	· ¥		
	☐ Cancellation	n ———			bert Sny		Marilian 1			_		
				F.A	CILITY	NFORMATION	Mary suppression and the suppression of the supersion of the suppression of the suppressi	The state of the s	NATURE LANGE	carre-of-		
Name of Facility Where				12				(4)			. 5	
Avantor Performa	ince Materials -	Buildi	ng 13	5			School (K-12	2) 8 (Other than K-1	2)	* * ***.	E.c.	
Street Address								rivate and comme		uildir	qs,	
600 N. Broad Stre	et					7	homes, etc.)				900	
City (5)							Square Feet	# of Floors	E	Bldg. A	\ge	
Phillipsburg, NJ 0	8865-1271						4000	1		60		
County (6)				Cou	nty Code	(7)(STATE USE ONLY)	Current Use (Pr	ior if being demol	lished)			
Warren												
Name of Monitoring Fin	m Hired by Buildin	g Owner	(8)	ASCN	No.	Name of Abater	nent Contractor (9)					-
Health & Safety S						Alliance En	vironmental Sys	stems				
Street Address						Street Address						
318 12th Street						550 East Un	ion Street					
City, State, Zip Code						City, State, Zip (Code	· · · · · · · · · · · · · · · · · · ·		*****		
Hammonton, New	Jersey 08037						er, PA 129382					
Project Manager for Mo	253		Tel	ephone	No	Telephone No.		License No.				
Jim Proctor	intorning i iiiii		1000000		04-8850	610-701-900	0	00508				
Start Date (10)	· Sch	eduled	- 1			Name of OSHA		, ,	-			
04 /03 /			300		12	Vertex Engi						
Occupancy Status Durin	ng Abatement (Che	eck only	one)			Street Address	- III/KUUSSALAIAU					
☐ Facility Closed/Vaca						1102 Baltim	ore Pike, Suite 2	201				
☐ Abatement Performe					scribe	City, State, Zip C	Code					
Time of Abatement:	7AMPM/3	:30PM-		_AM		Glen Mills, F	PA 19342	12				
Scope of Work (Check a	all that apply)											
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf			enova emoliti			☐ Mini-En 図 Gloveba	ntainment with Neg closure ag Procedure empted (*) and Nor		ıre		2.0	
		1	s Loca	tion	T					atem	ent T	vpe
Location	n of		Norma			Description	of		-	· · · · · ·		1
Asbestos-Containing			ea Soi aintena	ely by	Asbe	estos Containing Ma e., thermal systems	aterial (ACM)	Amount	Remova	Repair	Encapsulate	Enclosure
<u>TO BE AB</u> IN Faci			todial	Staff?	(1.6	surfacing, VAT		(Specify SF or LF)	ova	=	psu	unsc
(13)	,	-	(12)	7		other miscellane		,			late	Q,
- 67		Yes	No	N/A								- 0
Bld. 135 Boiler Hous	e - Boiler 3	\boxtimes			Pipe In	sulation		50 LF				

		П	П	To					To	П	П	П
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	ta Hautaa			JDEP V	Mosts	Cubic Yards of	Name of Regist	arad Landell		Щ.	ш	Ш
Name of Registered Was	ste nauter		0.000	lauler IE		Waste	BFI Imperia					
N.E.T.S.				18947		10			15			
City, State					4	Disposal Date	City, State					
Hazelton, PA						TBD	Imperial, PA	\			E	
Completed By (Print or T	ype) Tit	le		No. of the second		Signature	1/1	Da	ite /			235.0
John Heemer		Estima	tor			17/	0		2/:	1/	17	_
SB-41						1//			10	+	, -	
IAV 11		* Do not	use th	is form	for ashest	os licenture exemp	ted activities			1		

Completed by (Print or Type)

Nick Petrovski

Title

President

NOTIFICATION OF ASBESTOS ARATEMENT

3100				(Pursuant to	N.J.A.C. 7	26-2.12)	The state of	EG	EI	WE		Π
Date of Notification (1)					Name	e of Building Owne	11111		Fa II	W L	1 11	
Aganaisa Natifia d					North	Brunswick TOD	Associates	LLC			111	
Agencies Notified () EPA		Notification			Stree	t Address US Route 1 North	111 111	MAY	3	2012		1
(X) DOL (X) DOH		(X) Amen	ded Notific	oation No.3	City,	State, Zip Code Brunswick						1 2 7
() DCA		() Cance	lled		Name	of Contact	1	Pho	ne Colt	NÚL à		1 1 6
				FAOULT			La proposition	zatus			TEXT FROM THE PARTY.	Lette
Name of Facility Where Aba	atement is	Taking Place	(3)	FACILITY			(24)	etin pelkabera (tir)	rms.redemograps.com	witch tach and t	ulis intal in	
North Brunswick TOD As Buildings 4,5,6,7,11 and 4	sociates.	LLC	(0)		() Sc	of Facility (4)				(***) 1°	1 1 3- 3- 4- 1	terral V
Street Address					(X) O	ochapter 8 (other the the contract of the cont	nan K-12) commercial	hldas h	nmae a	to		
2300 US Route 1									onics, c	io.		
City (5)	County (6)		County	Code (7)	Sq. Fe	et_150,000 SF	No. of Flo	ors: 2				
North Brunswick	Middlesex		(State I	Jse Only)	Bldg. /	Age <u>78 vrs</u> nt Use (prior if bein	n demolishe	d) Vacan	of Dida	(prior u	no 0661.	DIJ \
Name of Monitoring Firm Hi	red by Bld	g. Owner (8)	ASCM	No.		the contract of the contract o	Name of	Contracto	r (9)	(prior u	se Omc	e Blag.)
Health & Safety Services,	Inc.		00117			*	Superior	Abateme	ent, Inc.			
Street Address					Street	Address				-		
318 12 th Street						derson Drive, Ste	A					
City, State, Zip Code			***		City St	ate, Zip Code				-		
Hammonton, NJ 08037						Caldwell, NJ 0700	6					
Project Manager for Monitor	ing Firm	Telephone	Number		Teleph	one Number		Licen	se Num	hor		
Jim Proctor		609-704-88	50			08-1616		0041		Dei		
Scheduled Start Date (10) 3/19/2012		Scheduled 6 6/20/2012		n Date (11)	Name	of OSHA Monitor or Abatement, Inc						
Occupancy Status During At	patement (Check only on	e)		Street							
() Facility Closed/Vacated D () Abatement Performed Ou	tside of No	rmal Facility F	atement lours –		2 Hend	lerson Drive, Ste.	Α					-914
(X) Other – Describe: Vacar	nt Bldg.				City, St	ate, Zip Code						
					West C	aldwell, NJ 07006	3					
Source of Work (Check all th	at apply)											
(X) Demolition () Renov	/ation	(6)										
(X) Large Proj. (>160 SF or	>260 LF A	CM) () SM Pr	oj. (>25<1	160 SF or >10 <	260 LF AC	M) () Minor Pr	roi (<25 SE	or <10 I F	ACM)			
(X) Full Containment with N Location of Asbestos-Contain	egative Pr	essure (X)	Mini-Encl	osure (X) Glove	bag Proce	dure () Non-friab	le Procedure	for Asbe	estos Ro	of Remo	oval.	
Location of Asbestos-Contain Material (ACM) in Facility (13		ely by Maint./C		Description of	ACIVI (I.e.	thermal Amoun	t (Specify SF	or LF)	Abate	ment Ty	ре	
, , , , ,	Sta	ff? (12)	dotodiai	systems insul VAT, or other	auon, Sun	acing,						
Bldg. 6 - Boiler Room	NA NA		NO						Rem.	Rep.	Encap	Enclose
Bldg. 5 Basement	X		W-3-	Pipe Insulation	on		520 LF		Х			T
Bldg. 6 Boiler Room	^	1 1		Duct/Tank In:	sulation		2,360 SF		Х			
Bldg. 5 - Basement & Bldg. 11 – 2 nd Floor	Х			VAT and Mas	tic		16,800 SF		Х			
3ldg. 5 Basement 3ldg. 4 2 nd Fl. Mech/Mixer F	X			Pipe Elbow In	sulation		150 EA		X	-		-
Bldg. 11 Exterior Beam Stru	ict. X	-		Carrett and Fin								
Name of Reg. Waste Hauler		NJDEP Wast	e Hauler I	Spray-on Fire		ards of Waste	950 SF	T	X			
Service Transport Group, In	ıc	SW2117	o i iddici i	<i>- - - - - - - - - -</i>	300	alus oi vvaste			of Reg. va Lan			
City, State						Disp. Date						
lew Castle, DE						5/25/2012			inerva I	Road	0	

C:\WORD\MYDOCS\ASBESTOS 9/18/00 Amended Notification No. 1: Change of Completion Date from 04/13/2012 to 05/25/2012. Additional time is needed to complete this project. Also for Bldg. 6 (Boiler Room) we have added additional 520 LF of Pipe/Fitting Insulation and 2,210 SF of Tank and Duct Insulation (Entire Boiler Room).

Signature

Waynesburgh OH 44688

Date

04/30/2012

Amended Notification No. 2: We have reduced the quantities taking out (Building 6) Boiler Room. The reason for this is we have not received Owner approvals for the additional work in the (BLDG. 6) Boiler Room.

Amended Notification No.3: Additional quantities added to scope of work and change to Completion date from 5/25/12 to 6/20/12.

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

Date of Notification (1)					Name of North Br	Building unswick	Owner/Operator (2)	_c	W	5.	Marketter Action	
03/09/2012		L N. CC. C.			Street Ac	Idroop				-11	7 7 7	
Agencies Notified		Notification	Type		2300 US		North MA	Y 3	2012	11	7	
()EPA	\$5	(X)Initial N	Notification ed Notificati		City, Stat	te, Zip Co	ode					
(x) DOH () DCA		() Cancell			Name of Nimish F	Contact	ASRI	Phone	MTDAL C	- manager	and the same of	
· ·	Yes (1.11.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1				UEODMATI	211	L-			Section of the second	aread	
Name of Facility Where Al	notoment is T	oking Place /	2)	FACILITY	NFORMATION Type of F		editalializaren pieteta	A PROPERTY OF	And Harry			5.
North Brunswick TOD As Buildings 4,5,6,7,11 and	ssociates, L	LC	3)		() School	ol (K-12) apter 8 (other than K-12)	A12 , 1				
Street Address 2300 US Route 1			3 4	98			vate & commercial blo		nes, etc.			
	O		County	20do (7)	Sq. Feet	150,000	No. of Floor	5. 4		ĕ		
City (5) North Brunswick	County (6) Middlesex		County C (State Us		Bldg. Age Current U	e <u>78 y</u> Jse (prior	r if being demolished)	Vacant	Bidg. (p	rior use	e Office	e Bldg.)
Name of Monitoring Firm F	Hired by Blda	Owner (8)	ASCM N	0.			Name of Co	ntractor	(9)	-		
Health & Safety Services		. Omior (o)	00117				Superior A	oatemer	nt, Inc.			
Street Address			-		Street Ac							
318 12 th Street					2 Hende	rson Driv	ve, Ste A					
City, State, Zip Code					City State							
Hammonton, NJ 08037					West Ca	ldwell, N	IJ 07006					
Project Manager for Monito	oring Firm	Telephone I	Number		Telephor	e Numbe	er .		e Numb	ər		
Jim Proctor		609-704-88			(973) 808	3-1616		00411		t		
Scheduled Start Date (10) 3/19/2012		Scheduled (4/13/2012	Completion	Date (11)	Name of		lonitor ent, Inc.	* 2 -				
Occupancy Status During	Abatement (C	Check only on	e)		Street Ac	Idress						
() Facility Closed/Vacated () Abatement Performed C	During Entire Outside of No	e Period of Ab rmal Facility F	atement Hours –		2 Hende	rson Driv	ve, Ste. A					
(X) Other - Describe: Vac					City, Stat West Ca	e, Zip Co	ode					
					west ca	iuweii, it	3 07000					
Source of Work (Check all	that apply)											
(X) Demolition () Ren	ovation						D : / -05 05 -	40 [[A CMA)			
(X) Large Proj. (>160 SF of X) Full Containment with	or >260 LF AG Negative Pre	CM)()SMP essure (X)	roj. (>25<1 Mini-Encle	60 SF or >10 < osure (X) Glove	260 LF ACM bag Procedu	1) ()! ure ()N	Minor Proj. (<25 SF o lon-friable Procedure	for Asbe	stos Ro	of Remo	val.	
Location of Asbestos-Cont	aining Is L	ocation Norm	ally Used	Description of	f ACM (i.e. the	nermal	Amount (Specify SF	or LF)	Abater	nent Typ	oe.	
Material (ACM) in Facility (ely by Maint./0 ff? (12)	Custodial	systems insul VAT, or other		ing,			88			
	NA NA		NO	VAT, or other	misocii.)				Rem.	Rep.	Encap	Enclose
Bldg. 6 - Boiler Room	Х			Thermal Sys		tion	60 LF		X			-
Bldg. 4, 7, 42 – 1 st & 2 nd F	loors X			VAT and Mas		ulation	4,200 SF 180 EA		X			-
Bldg. 4 & 5 – 1st Floor	X			Thermal Pipe			4,000 SF	-	X			-
Bldg. 11 & 42 - Exterior	^			Window Barr			4,000 0.					
			+									+
Name of Reg. Waste Haule	25	NJDEP Was	te Hauler I	D#	Cubic Ya	rds of Wa	aste	Name	of Reg.	Landfill		
Service Transport Group	, Inc	SW2117	no riadioi i		160		A		va Lan			
City, State			-4			Disp. Da		1000	C-1		2 1 200	
New Castle, DE						4/13/201	11		linerva l	Road OH 4468	Q	
0 11111 /0:1: 7	-01	Title			Signature		1 11	Date	sourgn (711 7700		
Completed by (Print or Typ Nick Petrovski	e)	Title President			Signature	7/	////	03/09/2	2012			
	A terms of	4	200			1100	Mor					
		(480 % 78 78			1		01000	NAVDO.	CCLACE	ESTOS	0/10	2/00

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

Date of Notification (1)					g Owner/Operator (2) ck TOD Associates, L		* 1.4	- Andread	The state of the s
03/09/2012		0700-00-00-00-00-00-00-00-00-00-00-00-00			-111	III MAY	/ 3	2012	11111
Agencies Notified	Notification	3.5.5		Street Address 2300 US Route				4014	
() EPA () DOL	(X) Amer	Notification nded Notific		City, State, Zip (North Brunswic		ASTES	108 006	1601 &	الم
(x) DOH () DCA	() Canc	elled		Name of Contac Nimish Patel	et -	Phone	The Bolton College	-1	
			FACILITY	INFORMATION		· · · · · · · · · · · · · · · · · · ·			
Name of Facility Where Abaten	nent is Taking Place	2 (3)	TAGILITI	Type of Facility	(4)				
North Brunswick TOD Associ Buildings 4,5,6,7,11 and 42 (C	iates, LLC	. (0)		() School (K-12 () Subchapter 8	(other than K-12)		pare.		
Street Address 2300 US Route 1				(X) Other (i.e. p	rivate & commercial bloom No. of Floor	5	tc.		
	nty (6) dlesex		Code (7) Jse Only)	Bldg. Age 78			(prior u	ise Offic	e Bldg.)
Name of Monitoring Firm Hired Health & Safety Services, Inc.		ASCM N 00117	No.		Name of Co Superior Al	ntractor (9) batement, Inc			
Street Address	· · · · · · · · · · · · · · · · · · ·	1		Street Address			-		·
318 12 th Street				2 Henderson Dr	ive, Ste A	22			
City, State, Zip Code Hammonton, NJ 08037			92	City State, Zip C West Caldwell,			33		
Project Manager for Monitoring I Jim Proctor	Firm Telephone 609-704-8			Telephone Numb (973) 808-1616	per	License Nun 00411	ber		1
Scheduled Start Date (10) 3/19/2012	5/25/2012		n Date (11)	Name of OSHA Name of OSHA Name of OSHA Name of OSHA					
Occupancy Status During Abate () Facility Closed/Vacated Durin () Abatement Performed Outside	g Entire Period of A	Abatement		Street Address 2 Henderson Dr	ive, Ste. A				
(X) Other – Describe: Vacant B	idg.			City, State, Zip C West Caldwell, I					
Source of Work (Check all that a	pply)								
(X) Demolition () Renovation (X) Large Proj. (>160 SF or >260 (X) Full Containment with Nega	OLFACM)()SM	Proj. (>25<1	160 SF or >10 <	260 LF ACM) ()	Minor Proj. (<25 SF or Non-friable Procedure f			noval.	
Location of Asbestos-Containing Material (ACM) in Facility (13)	Is Location Nom Solely by Maint. Staff? (12)	nally Used /Custodial	Description of	f ACM (i.e. thermal lation, surfacing,	Amount (Specify SF	or LF) Abat	ement T	ype	Enclose
Bldg. 6 – Boiler Room	NA YES	NO	Dino/Fitting I	navletian	580 LF	X	Tiop.	Tiloap	Liliciose
Bldg. 4, 7, 42 – 1 st & 2 nd Floors	x		Pipe/Fitting I VAT and Mas		4,200 SF	X	-	-	-
Bldg. 4 & 5 – 1 st Floor	x -	-	Pipe Elbow I		180 EA	X	+	-	+
Bldg. 11 & 42 - Exterior	x			al Behind Blue	4,000 SF	x	1	1	1
Bldg. 6 – Boiler Room	X		Tank and Du		2,210 SF	X			
	<u> </u>				<u> </u>		1 151		
Name of Reg. Waste Hauler Service Transport Group, Inc	SW2117	iste Hauler I	D#	Cubic Yards of W	aste	Mame of Reg Minerva La		è	
City, State New Castle, DE				Disp. Da 5/25/20	12	9000 Minerva Waynesburgh		88	
Completed by (Print or Type) Nick Petrovski	Title President			Signature	Mah	Date 04/12/2012	14		

C:\WORD\MYDOCS\ASBESTOS 9/18/00

Amended Notification No. 1: Change of Completion Date from 04/13/2012 to 05/25/2012. Additional time is needed to complete this project. Also for Bldg. 6 (Boiler Room) we have added additional 520 LF of Pipe/Fitting Insulation and 2,210 SF of Tank and Duct Insulation (Entire Boiler Room).

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

Date of Notification (1) 3/09/2012	·				Name o	of Build Brunsw	ing Owner/Opera	tor (2)		1 117	国际	7
Agencies Notified () EPA (X) DOL (X) DOH () DCA		Notificatio ()Initial N (X) Amen () Cance	lotificatio ded Notif	n ication No.2	Street A 2300 U City, St North E Name o Nimish	S Rout ate, Zip Brunsw of Conta	e 1 North Code	Trans.	one 🔐	201 2		
				FACILITY	Y INFORMAT	ION	Fan	Transcore (
Name of Facility Where Abater North Brunswick TOD Assoc Buildings 4,5,6,7,11 and 42 (C Street Address 2300 US Route 1	iates, L One Stru	LC	(3)		Type of () School () Subc	Facility ool (K-1 hapter er (i.e.	2) 8 (other than K-1 private & comme	2) rcial bldgs., h	nomes, e	tc.	9 40	
	nty (6) dlesex			y Code (7) Use Only)	Bldg. Ag Current	je <u>78</u> Use (pr			nt Bldg.	(prior u	ıse Offi	ce Bldg
Name of Monitoring Firm Hired Health & Safety Services, Inc.	by Bldg.	Owner (8)	ASCM 00117	No.				e of Contract rior Abatem			-	
Street Address 318 12 th Street					Street Ac 2 Hende		rive, Ste A					
City, State, Zip Code Hammonton, NJ 08037					City State West Ca	e, Zip C I ldwell,	ode NJ 07006					
Project Manager for Monitoring F Jim Proctor	(0.100 May 200	Telephone I 609-704-88			Telephor (973) 808	ne Num 3-1616	ber	Licer 0041	nse Num 1	ber		45
Scheduled Start Date (10) 3/19/2012		Scheduled 0 5/25/2012		on Date (11)	Name of Superior		Monitor ment, Inc.					
Occupancy Status During Abater () Facility Closed/Vacated During () Abatement Performed Outside	g Entire I	Period of Ah	atement		Street Ad 2 Hender		ive, Ste. A					
(X) Other – Describe: Vacant BI	dg.				City, State West Cal							
Source of Work (Check all that as	oply)						-					
(X) Demolition () Renovation (X) Large Proj. (>160 SF or >260 (X) Full Containment with Negat Location of Asbestos-Containing Material (ACM) in Facility (13)	LF ACN ive Press	sure (X) ation Norma by Maint./C	Mini-Encl	Description o	ebag Procedu of ACM (i.e. the lation, surfaci	re () I	Minor Proj. (<25 Non-friable Proce Amount (Speci	J 6 A - I		ment Ty	/pe	
Bldg. 6 - Boiler Room	X	T T	110	Pipe Insulati	ion	NESTINE N	60	I F	X	Rep.	Encap	Enclose
Bidg. 4, 7, 42 – 1 st & 2 nd Floors	Х			VAT and Mas	stic		4,200		X		-	_
Bldg. 4 & 5 – 1 st Floor Bldg. 11 & 42 - Exterior	X			Pipe Elbow I			180		X			
Didg. 11 & 42 - Exterior	^		1	Fiber Materia Window Barr		1e	4,000	SF	Х			
Name of Reg. Waste Hauler Service Transport Group, Inc		JDEP Waste W2117	e Hauler I	D#	Cubic Yard	ds of W	aste	Name Miner	of Reg.	Landfill dfill		
City, State New Castle, DE			10			Disp. Da 5/25/201		10 10 10 10 10 10 10 10 10 10 10 10 10 1	linerva I		8	
Completed by (Print or Type) Nick Petrovski	L. J. 1182 (C. S.	tle resident			Signature	1	11/1	Date 04/13/2				

Amended Notification No. 1: Change of Completion Date from 04/13/2012 to 05/25/2012. Additional time is needed to complete this project. Also for 3ldg. 6 (Boiler Room) we have added additional 520 LF of Pipe/Fitting Insulation and 2,210 SF of Tank and Duct Insulation (Entire Boiler Room).

<u>Imended Notification No. 2</u>: We have reduced the quantities taking out (Building 6) Boiler Room. The reason for this is we have not received Owner pprovals for the additional work in the (BLDG. 6) Boiler Room.