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D&S Proj. #: MS 12-156						s Abatement and 12:120)			PPROVE			٦	
	7							Depp of He	alth & Se	nior S	ervici	25	
Date of Notification (1)		lame of B	ullding Own	er/Operator (2) ,	New years		AND THE RESERVE	(signature)	7	1	-	
0 5 / 0 1 1/1 2		JOHN I	AILLS		ĺ	IFTER	B II	Date S (1)		. Con	SP	n	
Agencies Notified Type Notificat	lon S	treet Add		an district		EL / Pro-	Tarrens and	Detes (III)	Les Lin	163		-	
☐ EPA ☐ Initial ☐ Amended	- 11	211 BA	RONE AV	ENTIE	, Aug		-						
Amendment #:	. 1	THE REAL PROPERTY.	Zip Code			A RACE	77	2012	1 t d			-	
☑ DOL ☑ Emergency			AINFIELI	זע כ	1	j	7 (1012	1				
DOH (findhiding	IN	arne of C		2,113	7		Articles of the same	Telephon	e Numbo		-		
DCA justification)	11	JOHN	MILLS		L.	Adams 1.5.	TSING	TO LONG	2				
			FAC	ILITY INFORM	IATION	The Wallington Residence 1			-				
Name of facility where abatement i	s taking pla	ce (3)					Ту	oe of Facility (
JOHN MILLS								_	(K - 12)			8200	
Street Address							-		apter 8 (C Privata/C			-12)	
211 DARONE AMENITO								Bldgs./	Homes, e	łc.		-	
211 BARONE AVENUE City (5)	I Cour	nty (6)			1 0		- 80	juare Feat	# of Ploo	'S	B	dg. A	38
and fol	00.00	ny (o)				nty Code (7) te use only)	-	urrent Use (Pr	ior if hair	n den	olish	ad)	
SO. PLAINFIELD		DDLESI	ΣX		,		11"	uren cae (i i	ica ii pen	2 4011	(Charles)		
Name of Monitoring Firm Hired by	Bldg. Own	u (8)		ASCM No.	-	Name of Abateme	ail Cont	acic: (9)					
						D & S RESTO	RATIO	ON, INC.	•				
Street Address				1000		Street Address		AN MAJAN					W Talanta
City, State, Zip Code						20 California							
City, State, Zip Code						City, State, Zip Coo							
Project Manager for Monitoring Firm		12	1) A.I			Paterson, NJ				-			
Lioloct stattedat for Michilifornia Little	i.	1	hone Numb	er		Telephone Numbe 973-345-802			License	Num: 0159			
Otat Data (tD)	1211			* ***		Name of OSHA M				0 X 3 Z			-
Start Date (10)	Sohod	. Comploi	on Date (1	1)		D & S Restor		nc.					
05/02/12	05/1	/12				Street Address					the contract of		
Occupancy Status During Abatemen						20 California	Avenue	3					
Facility closed/vacated during Abatement performed outside	entire perio	od of abat	ement.		11	City, State, Zip Coo	de		44.4.600				
Describe:		acimy no	3180						10				
Other-Describe: NURMAL H					-	Paterson, NJ	07503						
Scope of Work (check all that apply	À				V 10 1101 1	Ī		containment w	/negative	press	ure		
	Renovatio	ก				2		enclosure					
≥160 st or ≥260 ff	Demolition	l				-		bag procedur Exempted (*):		friable	proc	edura	
Location of	le location by mainte	normally	used solely							R	R	E	E
asbestos-containing material (acm) to be	staff(12)	H (BI I LAST GLI	SH.A.JIGI			sbestos-containing		Amount		e m	b	1)	n
abated in facility (13)	Yes	No	N/A	material ((ACM)			(Specify 5	ror	n	4	a	C
DA CUD CENTE			,,,,,					100 TS		6	ľ	Þ	
BASEMENT		X		BOILER II	SUL	ATION	4	O SQ FT		X			
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			-		- 1344 - 34								Ш
Rogistared Weste Hauler	INIDE	P Hauler	ID4 I A	ubic Yards of V	Vasta	Name of Samuel		340					Ш
D & S RESTORATION, INC.	135			YD.	* 4 4 4 4 4	Name of Register TULLYTOWN	ed Land V. RES	IIII OURCE RE	COVER	Y			
City, State DATEDSON NO 07502			Disposal D			City, State			- 1 2/2				
PATERSON, NJ 07503			05/03/1			TULLYTOW	N, PA						
Completed by (Print or Type) BOGDAN JOLDZIC	Title	יייי		Signature					Date		Mary V		
	PRESIDI		for ashada	a licensure ex	and the sale	d odi. Wi-			05/01/	12	0		
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D&S Proj. #: MS 12-156

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

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Date of Notification			Name of E		ner/Operator (2)		it.	IVIE			V		
Agencies Notified		tion	Street Add				11111			t tel				
☐ EPA	Initial		211 D A	DOME AS	ZENITE		10 L MA	?	4 2012					
☐ DEP	Amended	1		RONE A	VENUE									
DOL	Amendment #			, Zip Code			1 65-		and the same of the same of					
_	Emergency (including	1.1		AINFIEL	D, NJ		ASDEC.	100 D	UnTKUL &	4			mointeen en	
DOH	justification)	Name of C	ontact			La series and the ser	Town Street, Line	Telepho	ne Numbe				
☐ DCA	Cancellation	- 11	JOHN	MILLS		29	er state of the second	*	erro Spiroto.		ž.			
				FAC	ILITY INFORM	OITA	N							
Name of facility w	here abatement	is taking pl	ace (3)				W. China	П	Type of Facility					
JOHN MILLS									=	ol (K - 12) hapter 8 (C	ther t	han K	-12)	
Street Address									○ Other	(Private/C	omme		,	
211 BARONE	AVENUE							1	Square Feet	# of Floor		В	ldg. /	Age
City (5)		Cou	inty (6)			Cou	unty Code (7)	-	.,		-	0.574		J -
SO. PLAINFI	ELD	МІ	DDLESI	ΣX			ate use only)		Current Use (F	Prior if bein	g den	nolish	ed)	
Name of Monitorin					ASCM No.	1	Name of Abateme	ent Co	ontractor (9)				_	
		J	- (-/		AGONI NO.		1 - A							
Street Address						_	D & S RESTO)KA	HON, INC.					
Street Address							1							
City, State, Zip Coo							20 California). 					
City, State, Zip Coo	ie						City, State, Zip Co	de						
						_	Paterson, NJ		03					
Project Manager fo	r Monitoring Firm	1	F	Phone Numb	per	l	Telephone Number			License				500000000000000000000000000000000000000
							973-345-80			0	0159			
Start Date (10)		Sche	d. Comple	tion Date (1	1)		Name of OSHA M							
05/02/12		05/1	1/12				D & S Restor	ratioi	n, Inc.					
Occupancy Status	During Abateme						20 California	A						
	d/vacated during		1700	ement.			City, State, Zip Co		nue				_	
Abatement pe	erformed outside						City, State, Zip Co	ae	***					
Describe:	NORMAL E	IOURS					Paterson, NJ	075	0.2					
							Faterson, NJ						_	
Scope of Work (ch		7.0							III Containment	w/negative	press	ure		
≥ 3 sf or >3 If	\bowtie	Renovation	on				į.		ini-enclosure					
≥160 sf or ≥2	260 If	Demolitio	n						ovebag procedu on-Exempted (*)		riable	nroc	edur	2
Location of		Is locatio	n normally	used solely	/	-			Lxomptou	, and Hom	R	R	E	T
asbestos-cor			enance/cu	stodial	Description	on of a	sbestos-containing		Amount		e	е	n	l E
material (acn abated in fac		staff(12)	Т	Т	material ((Specify	SF or	m	p a	C	C
abated in fac	ility (13)	Yes	No	N/A					LF)		v	i	a p	L
BASEMENT					BOILER IN	ICIII	ATION		40 SQ FT		e	r		
DATOLINEITI		-		4==	J DOILLE II	VOOL	ATION		403Q11		X	님	片	뷰
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							This are a second as a few to the second as a second a	-			Ш	Ц	Ш	
							A 1000 CO. T.							
Registered Waste F D & S RESTOR		NJD 135	EP Hauler 506		ubic Yards of V YD	Vaste	Name of Register TULLYTOW			ECOVER	Y			
City, State				Disposal D	ate		City, State							
PATERSON, N	J 07503			05/03/1	2		TULLYTOW	N, P	A					- 22
Completed by (Print		Title			Signature					Date				
BOGDAN JOL	DZIC	PRESID	ENT							05/01/	12			
ASB-41		Do not us	e this form	for asbesto	s licensure exe	empted	d activities.				-			

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1 2 1 10	State of No
DOP	Notification of Asbestos Abateme
0&S Proj. #: MS 12-157	(Pursuant to NJAC 8:60 and 12:12

			(D. 11-1	Oursel	Operator (2)				,				
Date of Notification	(1)			BRENNE	Operator (2)		MAEG	EIWE	571				
Agencies Notified	Type Notification		t Address				11 11 12	Non-Hall Park Company Company		1			
EPA	M Initial	11			CT AVENI	nc		Servan					
DEP	Amended	10 cm 200 fp20	State, Zip		ST AVENU	E	11 6 11	 2012 					
☑ DOL	Amendment #:						1						
	Emergency (including		ONTCL of Conta	AIR, NJ			l Land	Telephone	Number	-	-	-	-
□ DOH	justification)						1		10/				
☐ DCA	☐ Cancellation	<u>N</u>	IARGIE	BRENN	ER		-						_
				FACIL	ITY INFORMA	NOITA		1= (5 111 (4)	A 4 4 10				
Name of facility w	here abatement is t	aking place	(3)					Type of Facility (4)	(K - 12)				
MARGIE BRE	ENNER							Subchar	oter 8 (Oth	er tha	ın K-1	2)	
Street Address									rivate/Con lomes, etc		ial		
119 GORDON	NHURST AVEN	UE				4			of Floors		Bldg	g. Ag	e
City (5)		County	(6)				y Code (7)						
	=	FOOR	v			(State	use only)	Current Use (Price	or if being	demo	lished	1)	
MONTCLAI	R ing Firm Hired by Bl	ESSE dg. Owner (- T	ASCM No.	III	Name of Abatement	Contractor (9)					
Name of Monitori	ing i init i inca by bi	ug. Omio. (-/				D & S RESTOR	ATION, INC.					
Ol and Address						- 5	Street Address						
Street Address							20 California A	ve.	700 BO				
City, State, Zip Co	ode					<u> </u>	ity, State, Zip Code				303li i ee 3-		
City, State, Zip Oc	,40						Paterson, NJ 0	7503					
Project Manager f	for Monitoring Firm		Ph	one Numbe	er	T	elephone Number		License N		er		
r roject Manager .							973-345-8020		00	159			
Start Date (10)		ISched (Completic	on Date (11)		Name of OSHA Mo						
Start Date (10)				•			D & S Restora	tion, Inc.				-	
05/15/12		05/25/				`	Street Address						
Occupancy Statu	s During Abatemen	(Check on	y one) Lof abate	ment			20 California A City, State, Zip Cod						
Facility clos	sed/vacated during of performed outside	of normal fa	cility hour	rs-		11	Jily, State, Zip Cou						
Describe:						-11	Paterson, NJ 0	07503					
	cribe: _NORMAL H					=11		Full Containment w	/negative r	oressi	ure	-	
	check all that apply							Mini-enclosure					
$\ge 3 \text{ sf or } >3$	ilf 🖂	Renovation						Glovebag procedur	е				
≥160 sf or	≥260 If	Demolition						Non-Exempted (*)	and Non-fi	R	Proce R	E	Г
Location o	f	Is location by mainter	normally	used solely stodial				Amount		е	е	n	E n
asbestos-o material (a		staff(12)	ianoor cas		Descript material		bestos-containing	(Specify S	For	m o	p a	a	C
	facility (13)	Yes	No	N/A				LF)		٧	i	р	L
				-	PIPE INS	III ATI	ON	120 L FT		e	m	П	I
BASEMENT			X				ING BOARD	64 SQ FT		X	$\overline{\Box}$	Ħ	盲
BASEMENT			X_	-	1 IKANSII	L CLII	MITO DOTALD			Ħ	一	Ħ	
				-						〒	$\overline{\sqcap}$		
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	- Houles	INJDE	P Hauler	ID# I	Dubic Yards of	Waste	Name of Register	ed Landfill	1.	_		_	
Registered Wast D & S RESTO	ORATION, INC.	135			2 YDS		TULLYTOWN	N, RESOURCE RE	ECOVER	Y			
City, State	NIX 07503		16	Disposal 05/16/			City, State TULLYTOW	N PA					
PATERSON		T==		- 05/10/	Signature		TOLLTTOW		Date				
Completed by (F BOGDAN J		Title PRESID	ENT		Oiginaturo .				05/01/	12			
BOGDAN J				n for asbes	tos licensure e	exempted	d activities.						

CK-DO4930

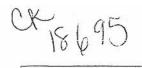
D&S Proj. #: MS 12-155

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

							Promonen	· F	- in a gray of	THE REPORT	Bitter to	* **		
Date of Notification			Name of B	uilding Owr	er/Operator (2)			LE	GEIT	16	5	7		
Agencies Notified	Type Notifica	tion		RD MURI	PHY	75-245			The same of the sa					
EPA	Initial Initial		Street Add					l A	IAY A 20	120	111			
☐ DEP	Amended				AVENUE			1	AY 4 20	112	7			
□ DOL	Amendment #	- 11	City, State,		11.05.150		1 8 4	ASI	TSTAR ORDER		The State of the S			
□ DOH	Emergency (including	l to	lame of Co	WOOD, N	NJ 07450		<u> </u>	-	LSTOS CONTROL		- 1			
☐ DCA	justification)				DITT		4		Leichnon	C IVUITIDO				
	Cancellation	1	RICHA	RD MUR								744		
Name of facility wh	acra abatament	is taking al	200 (2)	FAC	ILITY INFORMA	ATIO	V	11-						
Name of facility wi	iere abatement	s taking pi	ace (3)						ype of Facility (4) I (K - 12))			
RICHARD MU	RPHY								Subch	apter 8 (0	Other t	han K	(-12)	
Street Address										Private/C		ercial		
344 HIGHLAN	ND AVENUE	20								# of Floo		В	ldg. A	Age
City (5)		Cou	nty (6)				unty Code (7)	-	*					
RIDGEWOOL) ·	DE	RGEN			(Sta	ate use only)		Current Use (P	rior if beir	ng den	nolish	ed)	
Name of Monitorin					ASCM No.	-	Name of Abateme	ent Cou	ntractor (9)					
	,		o. (o)		AGOINTNO.		D & S RESTO							
Street Address						-	Street Address	JKAI	ION, INC.					
							20 California	Ave.						
City, State, Zip Cod	е			- 10,000 - 10 - 10 - 10 - 10 - 10 - 10 -		_	City, State, Zip Co	de					_	
						_	Paterson, NJ		3					
Project Manager for	Monitoring Firm	1	P	hone Numb	per		Telephone Number			License		oer		-10
							973-345-80 Name of OSHA M				0159			
Start Date (10)		Sched	d. Complet	ion Date (1	1)		D & S Restor		Inc					
05/11/12		05/2					Street Address							
Occupancy Status I							20 California	Aven	ue					
Abatement pe	d/vacated during erformed outside	of normal					City, State, Zip Co	de						
Other-Describ	oe: NORMAL H					-	Paterson, NJ	07503	3					
Scope of Work (ch	eck all that appl	y)				-			Containment w	/negative	press	ure		
$\ge 3 \text{ sf or } >3 \text{ lf}$		Renovation	on				<u>[</u>		i-enclosure vebag procedur					
≥160 sf or ≥2	60 If	Demolitio	n						n-Exempted (*)		friable	proce	edure	9
Location of			n normally enance/cus	used solely							R	R e	Е	E
asbestos-con material (acm) to be	staff(12)			Descriptio material (A	n of a	sbestos-containing	-	Amount (Specify S	F or	m	р	C	n
abated in faci	lity (13)	Yes	No	N/A	, material (r	.0,,			ĹF)		o v	a i	a p	L
BASEMENT			X		DUCT WO	RK			191 L FT		e	ń	П	\vdash
BASEMENT (7 LOCAT	TONS)		X		DUCT (ASI		TOS TAPE)		30 L FT		X	H	H	描
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Registered Waste H D & S RESTOR		NJD 135	EP Hauler 506		ubic Yards of W 3 YDS	Vaste	Name of Register TULLYTOW			COVER	Y			27
City, State	v 00			Disposal D			City, State							
PATERSON, N.				05/12/1			TULLYTOW	N, PA						
Completed by (Print BOGDAN JOLI		Title PRESID	ENT		Signature		27			Date 05/01/	10			
ASB-41				for asbesto	s licensure exe	mpte	d activities.		Metallo de la companya de la company	05/01/	14		_	

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	-	70-171
CHECK:	u-	17771
State or and the state of the s	. –	1111
CHECK	#:	11/71

Date of Notification (1)			I Name	of Building O	10		- 117		2 1	3	11/1	E
5.2.12			Ivanie	of Building Owne			HIL.	A trace		*****		F (4-20)
Agencies Notified Type Notification	n		Street	Address	e III	LL SUE	440				0010	
□ EPA □ Initial				351 V	EST	HUBBAR	0/3	REFT		4	2012	1
☐ DEP ☐ Amended ☐ Amended ☐ Amendmed	nt#		City, S	state, Zip Code	2	1,41,75895 97 1,59	1	Garren				1
☐ Emergency	(including	9	Namo	CHICA(<u> 20 </u>	16 60	654	ADUL	کرنگ ۱۳۶۲	11.	ul d	No Despire
□ DCA justification □ Cancellation				of Contact	lbera	2	TAR	anhana hir	mhar	-	-	OF THE PARTY OF
Name of Facility Wiles Alexander	more see decreases	**********	FA	CILITY INFORMA	TION	/\	1.		- Description	owen Tal	of the same	(Alexyana)
Name of Facility Where Abatement is Taki	ng Place (Type of Facility	(4)	*				
Street Address		W.				☐ School (K-	-12)					
343 MURRAY 1711	PARK	in IA-1	i			☐ Subchapte ☑ Other (i.e.	r 8 (Other private &	than K-1	2) ial bui	Idinas	hom	.00
City (5)		1.11.1	<u>-1</u>	· · · · · · · · · · · · · · · · · · ·		etc.) Square Feet						C5,
EAST RUTHERFORE	2					53,170	# 01	Floors	- Carrier	Bldg.	Age	
County (6)			County	Code (7)		Current Use (Pr	rior if being	g demolisi	ned)		9	
Name of Monitoring Firm Hired by Building	Ourpor (9)					l Offi	Cl					
Street Address	Owner (8)		AS	CM No.	A. M.	of Abatement Co AC Contracting In	ontractor (9 c	9)				
						Address owell Road						
City, State, Zip Code		NEWS THE PARTY OF	WALL STREET, ST.			State, Zip Code	er commensurare	PARTICULAR DE LA COMPANION DE	Carrent .		T-MERCHAN	Caronical e
Project Manager for Monitoring Firm		1	T-1		 	Rock, NJ 07452	1					
Chat Date (10)	1			ohone No.		one No. -262-5841		License N 00156	0.			
Start Date (10) 5-11-12	Schedu	led Co	mpletion	Date (11)	Name Ome	of OSHA Monitor ega Environmenta	al Service:	s Inc.	AND THE PARTY OF			AND PROPERTY OF
Occupancy Status During Abatement (Che Facility Closed/Vacated During Entire	Period of	hatam	ent		Street	Address		*********				
☐ Abatement Performed Outside of Norm☐ Other - Describe:	al Facility	Hours		22 E-2 (2000 MONE NO 2000 CO 1 PAN	City, St	luyer Street tate, Zip Code ensack, NJ 07606			THINOSOS	Westeringto	38 ml - //	Participal Control
Scope of Work (Check All That Apply)					Tracke	, NJ 07000	'					
☐ ≥3 sf or ≥3 lf	™ R	enovat	ion		rer	F						
☐ ≥160 sf or ≥260 lf		emoliti				 Full Containme Mini-Enclosure 		gative Pr	essure	9		
MANAGEMENT AND						Glovebag Proc. Non-Exempted	edure (*) and N	on Eriabla	Droo			
		Locati			**COMMONSTAN	. Troil Exempled	() and Ivi	on-Friable	Proc		emen	THE REAL PROPERTY.
Location of Asbestos-Containing Material (ACM)	Use	Normal d Sole	ly Iv by	De	escription	of					ре	
TO BE ABATED	Ma	intenar todial S	ice/	Asbestos Cor (i.e. therma	ntaining M	laterial (ACM)	537777	ount			Ę	
In Facility (13)	Cus	(12)	lait!	surfa	cing, VAT	, or		r LF)	Berroval	Repair	cap	ncb
	Yes	No	N/A	other	niscellane	eous)			eve	эk	Encapsulate	Enclosure
main Floor affices			X	1/	AT		1.00	165	V			
			<i>-</i>	V	11		1.166	<i>)</i> 71	1			
	1										-	
		-			A STATE OF THE STA						_	
Name of Registered Waste Hauler			DEP Wa		Yards	Name of R	Caiotarad	Landell				- Biclaures
Rovic Transport			uler ID N 0785	lo. of Was								
City, State, Zip Code Riverdale, NJ 07457				Dispos	al Date	IESI PA B			orp.			\Box
Completed by	Trail	-		15	1	Bethleben			44			
R. McDonald	Title Preside	nt		S	grature	M.J	1	Date		10	500 moraci	-
					1	0 300	/	1	-) . /	.1.1		



Date of Notification (1) 05/01/2012				Name o	of Building	Owner/	Operato	r (2) TH (CARE SYST	EM.	1 W	E	F	T	450	
Agencies Notified EPA DEP DOL	Type Notification Initial Amended Amendment Emergency		_	Street A OLD S City, St LIVIN	Address SHORT ate, Zip C GSTON	HILLS ode NJ 07	RD	many or or or other delicity of the annual delicity of the			4 201	hand	The state of the s	A THE PARTY OF THE	The state of the s	
DOH DCA	justification) Cancellation)			of Contact		N '		ACCU	Tel	lephone	Nun	iber	- Albertanie		
Name of Facility Where A					ILITY INF	ORMAT	ION	Тур	e of Facility (4		Sex and	ign of			, it	
Street Address 94 OLD SHORT HI) 10 I EIV	I- FA	IN ROC	JIVI G			×	School (K-12 Subchapter of Other (i.e. pretc.)	8 (Oth	er than & comm	K-12 nercia) I buil			ies,
City (5) LIVINGSTON	-							Squ	are Feet	# 0	f Floors	-	E	3ldg. /	Age	
County (6) ESSEX		111			Code (7) USE ONL	n		Cur	rent Use (Prio SPITAL	r if bei	ing dem	olish	ed)			
Name of Monitoring Firm ENVIROVISION	Hired by Building	Owner (8)		ASC	M No.		Name ENV	of Ab	natement Cont NMENTAL	ractor	(9) ITRAC	тог	 RS I	NC.		
Street Address 20-21 WAGARAW	RD						Street	et Address 5 WATCHUNG AVE								
City, State, Zip Code FAIRLAWN NJ 07	410							State, Zip Code ST ORANGE NJ 07052								
Project Manager for Mon WILLIE MORALES	itoring Firm			Telepho 973-63	ne No. 36-9145	j	Teleph 973-2		No. 9872		Licens 0055					
Start Date (10) 05/03/12		Schedule 05/04/1		npletion	Date (11)	555-1			SHA Monitor LAND ANA	LYTI	CAL					
Occupancy Status During Facility Closed/Vaca	ated During Entire F	eriod of A	baten	nent				COL	IN DRIVE							
Abatement Performe Other – Describe: C	Occupied work hrs: 7	al Facility am-3:30 p	Hours				7000		Zip Code OOK, NY 11	741				100000		
Scope of Work (Check Al ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	П Г пат Арріу)	-	enova emolit	1787097			×××	M GI	ull Containmer ini-Enclosure lovebag Proce on-Exempted (dure					9	
			Locati						on Exampled	() dilo	2 14011-1	nable		Abate	emeni pe	t
Asbestos-Containing TO BE ABA	Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Normally Used Solely by Maintenance/ Custodial Staff? (12)					tos Cont thermal surfac	scription aining M systems cing, VA niscellan	lateria insul T, or		(S	mount pecify or LF)		Removal	Repair	Encapsulate	Enclosure
FAN ROO	M G	Yes	No	.N/A		PIPE II	NSULA	TIOI	N	20) LF	-	X		Ф	
			-							1		-				
Name of Registered Wast			27.0	JDEP Waller ID		Cubic C			Name of Re	egister	ed Land	dfill				
ENVIRONMENTAL CONTRACTORS 19101 City, State				of Waste NEW MORGAN LANDFILL CO												
WEST ORANGE NJ				Disposal Date City, State EXTON, PA												
					Date 05/0		2									

0274

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT

11			Pursua	ant to NJ	AC 8:60 and 5:1	16)					
Date of Notification (1)			Nam	ne of Buildi	ng Owner/Operator	(2)			100	7	
	12		0	XYCHEM				1:1	11]	11:	55
Agencies Notified Type Noti	fication		Stree	et Address					1 1	H	
☐ EPA ☐ Initial			65	1 TONNE	LE AVENUE	IJL N	4 201	2		1	
☑ DOLWD ☐ Amend			City,	State, Zip	Code	1 /		- i	e-il-r-a	1 .	
	lment # ency (includi	-	JE	RSEY CI	TY, NJ 07307	Aca	CALL STORY				
(NJAC 5:23-8) justification		ng	-	e of Conta	Real Control of the section of the s	Sand Branch and American	Telephone Nur	mber		1	-
☐ Cancel	lation		0/	WNER'S	REP: CLINT YING	GLING			Parameter	3	
				CILITY	NFORMATION	Page (1 to a		•	+ - 1 -	No. and	
Name of Facility Where Abatement is	s Taking Pla	ce (3))			Type of Facility					
OXYCHEM				- 400		School (K-12		3 \.			
Street Address						Other (i.e., p	3 (Other than K-1 rivate and comm	 ercial b 	uildin	as.	
621 TONNELE AVENUE						homes, etc.)				J-1	
City (5)						Square Feet	# of Floors	В	lldg. A	\ge	
JERSEY CITY, NJ County (6)						120,000	2		40		
HUDSON			Cou	inty Code (7)(STATE USE ONLY)	Current Use (Pri	1975	lished)			
Name of Monitoring Firm Hired by Bu	ilding Owne	r (8)	ASCN	1 No.	Name of Abatem	ent Contractor (9)		-			
LANGEN ENGINEERING					BRISTOL EN	IVIRONMENTAL	_, INC.				
Street Address	7			77.70	Street Address						
619 RIVER DRIVE CENTER 1					1123 BEAVE	R STREET					
City, State, Zip Code					City, State, Zip C		1				
ELMWOOD PARK, NJ 07407					BRISTOL, PA	19007					
Project Manager for Monitoring Firm		The same	elephone		Telephone No.		License No.				7.0-0.0
JAKE SUROWIECKI Start Date (10)	0.1.1.1		201-794		215-788-6040		00509				
5/18/12	Scheduled				Name of OSHA N	CONTRACTOR					
			22_ /		BRISTOLEN	VIRONMENTAL	., INC.				
Occupancy Status During Abatement					Street Address						
☐ Facility Closed/Vacated During En☐ Abatement Performed Outside of I	tire Period o	t Aba	tement	coribo	1123 BEAVE						
Time of Abatement: 7:00AM-	PM/ <u>3:30</u> F	PM	AM		City, State, Zip Co						
Scope of Work (Check all that apply)				,	BRISTOL, PA	19007					
					☐ Full Con	tainment with Neg	ative Pressure				
≥3 sf or ≥3 lf≥160 sf or >260 lf	⊠R	enov emol			☐ Mini-Enc	losure					
<u> </u>		CITIOI	ition		□ Glovebay Non-Exe	g Procedure mpted (*) and Nor	-Friable Procedu	ıre			
	1		ation					-	atem	ent T	vpe
Location of Asbestos-Containing Material (AC	un lis	Norn	nally olely by	1	Description of		100.00.00000000000000000000000000000000		_	107	·
TO BE ABATED	M	aintei	nance/		stos Containing Ma ., thermal systems		Amount (Specify	Removal	Repair	nca	ncic
IN Facility	Cus	stodia (1:	al Staff?		surfacing, VAT,	or	SF or LF)	val	=	Encapsulate	Enclosure
(13)	Yes	N.	<u> </u>	1	other miscellane	ous)				ate	W
Renovation Area-Offices/Bathro				VAT & I	Vlastic		1050 SF		П	П	П
Bathroom			1=	Mirror N			16 SF				
Exterior Roof					Stone Caulk	F 72, 1	15 SF				
			15	Coping	Otorio Gaaix		1001			-	
Name of Registered Waste Hauler			NJDEP \	Naste	Cubic Yards of	Name of Registe	arod Landfill		Ш	Ш	Ľ
WASTE MANAGEMENT		1.5	Hauler II	100000000000000000000000000000000000000	Waste 7 CY	GROWS Lai					
City, State	7				Disposal Date	City, State					-
BRISTOL, PA					5/22/12	Morrisville,	PA 19067		**		
Completed By (Print or Type)	Title				Signature	2. 1	and the second s	ate /	1,0		
GINO PIZZIGONI	Estima	tor			Hin 1	110.	.1	5/11	10		1

ASB-41 G-I 12095

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

CK 2734

Date of Notification (1)				Name	of Buildi	ng Owner/Operate	25/23/11/11/	S PARTIES	1.0			
5-3-12						Health In		951	V E	Tr	7	7
Agency Notified	Type Notification			Stree P.	t Address O. B	ox 388	10 111	Ww		7/	111	
CXEPA CXDEP	E Initial ☐ Amended			32	State, Zip		-//-	MAY 4 20	12 /	4	#	
₫ DOL	Amendment #	dina				, NJ 080	53 -		12 11	1		
CKDOH	justification)	allig		1000000	of Conta	700	A management	Telephone Num	-			
CKDCA	☐ Cancellation				b Mai		Total States			- /		
Name of Facility Where A	Ahatement is Taking P	are /3		FAC	ILITY INF	ORMATION	Type of Facilit	Marian Roman Comment	Name and Address of the Owner, where	_]		
Old Voorhees	s Hospital	acc (o	,					William P. A. Marketter Co.			· · ·	
Street Address							☐ School (K-1	8 (Other than K-12)			****	
101 Carnie E	Boulevard						Other (l.e. p	rivate & commercial	building	s,		
City (5)							Square Feet	# of Floors	Bldg. A	ge		
Voorhees							10,500	6	Ulara a sana a sana	+/-	-51	0
County (6) Camden			77	ONLY) (STATE USE	hospita	Prior if being demolis	hed)			
Name of Monitoring Firm	Hired by Building Own	ner	ASC	√ No.		Name of Abater	ment Contractor	*		-	- 10	
(8) Criterion	Laboratorie	es			Ofer			ntal Serv	ices	, :	Ind	c.
Street Address 3370 Progres	ss Drive, S	uit	e J			Street Address 2251 Fr	aley St	reet				
City, State, Zip Code Bensalem, PA	A 19020			(Fee E-10)		City, State, Zip Philade	Code Lphia, Pi	A 19137				
Project Manager for Moni				ne No.		Telephone No.		License No.			-	
Mike Panepr					-1300			01166		U.Sec.1993	:3581110	00-2000
Start Date (10) 5-14-12	Scheduled C	omple 14 –		ale (11)		Name of OSHA Criterio	Monitor on Labora	atories				
Occupancy Status During	Abatement (Check'on	ly one)			Street Address						
☐ Abatement Performed	d During Entire Period Outside of Normal Fac	of Aba	temen ours	t		City, State, Zip (Code	rive, Suit	e J		de l	
C Other - Describe:						Bensalem	, Pa 190	20				
Scope of Work (Check all	that apply) *abat	eme	ent	pri	or to	demo*	Containment with	Negative Pressure				
□ ≥ 3 sf or ≥ 3 lf □ ≥ 160 sf or ≥ 260 lf	\$.				ovation nolition	☑ Glov	ebag Procedure					
					ı ·	⊠ Non-	Exempted (*) an	d Non-Friable Proce		Abat	eme	enf
Location	of	1	Locat Norma	lly							ре	
Asbestos-Containing	Material (ACM)	V 0.000	ed Sole intena			Description of tos Containing Ma	aterial (ACM)	Amount			m	
TO BE AB. IN Faci		(Custod Staff?		(i.e.	, thermal systems surfacing, VAT		(Specify SF or LF)	Kemova	Ref	псар	nclo
(13)			(12)			other miscellane	eous)		oval	air	Encapsulate	Enclosure
		Yes	No	N/A							е	
***see attach	ed sheet**	*		x					2	X.		
				_						1		Ш
Name of Registered Wast	e Hauler	NJ	DEP V	Vaste H	auler T	Cubic Yards of	Name of Regis	tered Landfill				Щ
Service Trans			No.			Waste	A & L S					
City, State Morrisville,	PA					Disposal Date	City, State Libson,	OH				\neg
Completed by Jennifer Niv		Op	era	tio	ns	Signature	1	D	ate -3-12			
ACR 41	* Do not	tico th	ic for	for ach	vootee lier	JAL-	JANE -	<u> </u>				

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

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

				(0)	The same	September 1	
	1	Name of Building C	owner/Operate Jack Der	or (2)	CON MICHOLD	里去	10
of Notification (1) May 1, 2012				1160/19-	Company of the Compan		Percentage Percentage
Type of Notification	1	Street Address	428 Clif	ton Avenue, #138	MAY 4 2012		
ncies Notified r 1 Initial Notifie	ation	City, State, Zip Coo		1 (4) (1)	MAY 4 2012		
] DEP Amendment	#	City, State, 21p	Lakewo	ood, NJ 08701	ephone Number		1.
DOL [x] Emergency (including	Name of Contact		Tel	epnone tymore	- //	
DOH justification)	11	Jack I		Manufactus Rose	The same of the sa	Libitonen	
] DCA [] Cancellation	FAC	L CILITY INFORM	MATION	= Selfacility (4)		107 1	
Taking Place				[]	School (k-12) Subchapter 8 (other th	nank-12)	
ame of Facility Where Abatement is Taking Place Residence	(V)			[]	Other (i.e., private &	commerci	al buildi
				[x]	homes, etc.)	ldg. Age	
treet Address 731 Spruce Street		County Code (7)		Square feet	# of Floors B	8 Nage 1	30
Con	unty (6)	(STATE USE ON	VLY)	2000 sf Current Use (Prior i	f being demolished)		
City	ercer			ll Resider	nce		
Trenton		ASCM No.	Name (of Abatement Contracto	r (9) an Contracting, In	c.	
Name of Monitoring Firm Hired by Building Own	ner (8)	ASCITION	Church				
Guardian con-	, mc.		1	1889 1	Route 9, Unit 61		1071
Street Address 1889 Rte. 9, Unit 61			City, S	State, Zip Code Toms	River, New Jersey	08755-	12/1
2.1	.5		Telep	hone Number	License Nur 00624	moei	
City, State, Zip Code Toms River, NJ 0875 Project Manager for Monitoring Firm	Telephone Numl 7321-349-99	ber 32	722-	349-9932			
Nicholas Fermicola	Scheduled Com	pletion Date (11)	Name	E.M.	S.L. Analytical		
Scheduled Start Date (10)	5/3/12		Stree	t Address	Stelton Road		
5/2/12 Occupancy Status During Abatement (Check of Facility Closed/Vacated)	aly one)	of Abatement	1				
[x] Facility Closed/Vacated I	utside of Normal Facili	ty Hours	City	, State, Zip Code Pisca	ataway, New Jerse	y 08854	
[] Abatement 1 cristment					nent with Negative Pre		
			l I	i Mini-Enclosu	ire		
Scope of Work (Check all that apply)	G 955	diam.	L	x] Glovebag Pro	ocedure	Procedure	e
HOMES NO.					-4 (*) and Non-Friable		1000
[v] >3 sf or ≥3 lf	[x] R	tenovation Demolition		Non-Exempt	ed (*) and Non-Friable	Abates	ment Typ
[x] >3 sf or ≥3 lf ≥160 sf or ≥260 lf		Demolition		Non-Exempt	ed (*) and Non-Friable	Abater	ment Typ
[x] >3 sf or ≥3 lf [] ≥160 sf or ≥260 lf		Demolition	Desc	cription of	ed (*) and Non-Friance	Abater R E	R F
[x] >3 sf or ≥3 lf [] ≥160 sf or ≥260 lf	[] E	Demolition	Desc A shesto	cription of os-Containing	Amount (Specify SF	Abater R E	R F P
[] ≥160 sf or ≥260 lf	Is Location Normally use	Demolition	Desc Asbesto Mate	cription of os-Containing rial (ACM)	ed (*) and Non-Friance	R E M O	R F P A I
Location of Askertos-Containing Material (ACM)	Is Location Normally use Solely by Maintenance/Cus	Demolition	Desc Asbesto Mate (i.e., th	cription of os-Containing rial (ACM) ermal systems ion, surfacing,	Amount (Specify SF	R E M O V	R F P A
Location of Asbestos-Containing Material (ACM) TO BE ABATED	Is Location Normally use Solely by Maintenance/Cus Staff	Demolition	Desc Asbesto Mate (i.e., th	cription of os-Containing rial (ACM) ermal systems ion, surfacing,	Amount (Specify SF	R E M O V	R F F P A I R
Location of Ashertos-Containing Material (ACM)	Is Location Normally use Solely by Maintenance/Cus Staff (12)	pemolition ed stodial	Desc Asbesto Mate (i.e., th	cription of os-Containing rial (ACM) ermal systems ion, surfacing,	Amount (Specify SF or LF)	R E M O V A L	R F F P A I R
Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility	Is Location Normally use Solely by Maintenance/Cus Staff	Demolition ed stodial	Desc Asbesto Mate (i.e., th insulati	cription of os-Containing rial (ACM) ermal systems ion, surfacing, VAT, or niscellaneous)	Amount (Specify SF	R E M O V	R F F P A I R
Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility (13)	Is Location Normally use Solely by Maintenance/Cus Staff (12)	Demolition ed stodial	Desc Asbesto Mate (i.e., th	cription of os-Containing rial (ACM) ermal systems ion, surfacing, VAT, or niscellaneous)	Amount (Specify SF or LF)	R E M O V A L	R F F P A I R
Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility	Is Location Normally use Solely by Maintenance/Cus Staff (12) YES NO	Demolition ed stodial	Desc Asbesto Mate (i.e., th insulati	cription of os-Containing rial (ACM) ermal systems ion, surfacing, VAT, or niscellaneous)	Amount (Specify SF or LF)	R E M O V A L	R F F P A I R
Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility (13)	Is Location Normally use Solely by Maintenance/Cus Staff (12) YES NO	Demolition ed stodial	Desc Asbesto Mate (i.e., th insulati	cription of os-Containing rial (ACM) ermal systems ion, surfacing, VAT, or niscellaneous)	Amount (Specify SF or LF)	R E M O V A L	R F F P A I R
Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility (13)	Is Location Normally use Solely by Maintenance/Cus Staff (12) YES NO X	ed stodial N/A Asbes	Desc Asbesto Mate (i.e., th insulati other r	cription of os-Containing rial (ACM) ermal systems ion, surfacing, VAT, or miscellaneous) sulation	Amount (Specify SF or LF) 150 lf	R E M O V A L	R F F P A I R
Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility (13) Basement	Is Location Normally use Solely by Maintenance/Cus Staff (12) YES NO X	ed stodial N/A Asbes ste Hauler ID No. 20223	Desc Asbesto Mate (i.e., th insulati other r	cription of os-Containing rial (ACM) ermal systems ion, surfacing, VAT, or miscellaneous) sulation	Amount (Specify SF or LF) 150 lf f Registered Landfill R.F.	R E M O V A L	R F F P A I R
Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility (13) Basement Name of Registered Waste Hauler Guardian Contracting, In	Is Location Normally use Solely by Maintenance/Cus Staff (12) YES NO X	ed stodial N/A Asbes ste Hauler ID No. 20223 Disposal Date	Desc Asbesto Mate (i.e., th insulati other t	cription of os-Containing rial (ACM) ermal systems ion, surfacing, VAT, or miscellaneous) sulation	Amount (Specify SF or LF) 150 lf f Registered Landfill R.F.	Abatel R E M O V A L X	R F E I P A I R
Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility (13) Basement Name of Registered Waste Hauler Guardian Contracting, In	Is Location Normally use Solely by Maintenance/Cus Staff (12) YES NO X NJDEP Wa	ed stodial N/A Asbes ste Hauler ID No. 20223	Desc Asbesto Mate (i.e., the insulati other restos pipe in	cription of os-Containing rial (ACM) ermal systems ion, surfacing, VAT, or miscellaneous) sulation	Amount (Specify SF or LF) 150 lf f Registered Landfill R.F.	Abatel R E M O V A L X	R F E I P G A I R
Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility (13) Basement Name of Registered Waste Hauler Guardian Contracting, In	Is Location Normally use Solely by Maintenance/Cus Staff (12) YES NO X NJDEP Wa c.	ste Hauler ID No. 20223 Disposal Date 5/4/12	Desc Asbesto Mate (i.e., the insulati other r	cription of os-Containing rial (ACM) ermal systems ion, surfacing, VAT, or miscellaneous) sulation	Amount (Specify SF or LF) 150 lf Registered Landfill R.F.	Abatel R E M O V A L X	R F E I P A I R

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· D	rin	4	E-	rm
1 13	ш		гυ	HIII

No of

Date of Notification (1)		Na	me of Bu	ilding Owne	er/Operato	r (2)	CK, U	2017	T.	1	-	
Agencies Notified Type Notifica	ition		ane Te				17 N X	0010		1		
EPA Initial	0027			hester Ro	ad		M/.T 4	2012	L	1		
DER Amende	nent #		y, State, . sex Fe	Zip Code IIs N.I		1 6		Tito in the	Ì		1	
DOM justificat	ncy (including ion)	Nar	me of Co	ntact		1	Teleph	ione Mumi	hor		¥ .	
DCA Cancella			ane Ter			A second					Transport.	
Name of Facility Where Abatement is T	aking Place (3)	ACILITY	INFORMA	TION	Type of Facili	tv (4)			==		
house Street Address						School (I	50					
74 Old Chester Road						Subchap	ter 8 (Other the. private & co	nan K-12)	huildii	ore b		
City (5) Essex Fells	···········					etc.) Square Feet	# of Flo					
County (6)						5000	3	12.50	50	g. Age	•	
Essex		(STA	nty Code TE USE C	(7) DNLY)		Current Use (F	Prior if being d	lemolished	1)	1		
Name of Monitoring Firm Hired by Buildi J & S Environmental	ng Owner (8)	AS	SCM No.		Name o	of Abatement C	ontractor (9)			-		
Street Address					ABS	Environment	al Services	s, LLC				
2333 Route 22 W	<u> </u>				Street A 4 E G	∖ddress ate Drive, P	O Box 483					
City, State Zip Code Union NU 07083					City, Sta	ate, Zip Code				+		
Project Manager for Monitoring Firm		Telep	hone No			ood, NJ 07						
Sherrill Gelisomo		908-	206-00	73	973-76	ohone No. License No. 703						
ON HOLD	Scheduled 6/15/12	Completio	on Date (11)	Name of	OSHA Monitor				+		
Occupancy Status During Abatement (Ch					Street A	ddress	-			1		
Facility Closed/Vacated During Entire Abatement Performed Outside of No	Period of Aba	atement										
Other - Describe: Monday - saturday	8 am - 5 pm	ours			City, Sta	te, Zip Code	****			1		
Scope of Work (Check All That Apply)						-				4		
≥3 sf or ≥3 if × ≥160 sf or ≥260 if		ovation			×	Full Containm Mini-Enclosure	ent with Nega	itive Press	ure			
		cation			- Feed	Non-Exempted	d (*) and Non-	-Friable Pr		re emen	ıt	
Location of Asbestos-Containing Material (ACM)	Used S	nally olely by	Ach	Des	cription of			_		ype	· -	
TO BE ABATED In Facility	Custodia	nance/ al Staff?	(1.	estos Conta	ystems in	sulation.	Amount (Specify		71	Enc	g	
(13)	(1	2)		other mi	ng, VAT, o scellaneou	ns)	SF or LF	Removal	Repair	Encapsulate	Enclosure	
- His	Yes N	o N/A						<u>n</u>		late	ЭТС	
attic		×	-	roof rafte			2000 SF	×				
			(exclu	des soffit	& below	subfloor)						
		-										
Name of Registered Waste Hauler		NJDEP W	/aste	Cubic Ya	orde	TN:				-		
reehold Cartage		Hauler ID 15939	31.000 T T T T	of Waste			egistered Lan N Landfill	dfill				
City, State reehold NJ		Disposal Date City, State TBD Morrisville PA					ePΔ				-	
ompleted by ndrew Scott Higgins	Title President			Sigr	nature	1	-	Date,		+		
- In Cook inggins				M			21-	20	-/	7		

Date of Notification (1) 5/2/12				Name of	f Building ⁄Iill Inn	Owner/	114		MACLE	II YAS		TO STANDARD TO			
Agencies Notified	Type Notification			Street A 225 Ro	ddress oute 202	2			MAY	4 201	2				
DEP X DOL	Amended Amendment #		_ [ite, Zip Co ng Ridge		- Marie Carlo	, de la companya de l	ASBESTOS	COMTROL	3		Name of the last		
	Emergency (in justification) Cancellation	ncluding			f Contact semann	2)	L.		COC	Teleph		mber		·	
Name of Facility Where Olde Mill Inn	Abatement is Taking	Place (3)		FACI	LITY INF	ORMAT	TION	☐ s	of Facility (4))					
Street Address 225 Route 202								X C	ubchapter 8 other (i.e. pri tc.)				ldings	, hom	es,
City (5) Basking Ridge	Water and the second							Square 3000		# of Flo	ors		Bldg. 7 50	Age	
County (6) Somerset				County (Code (7) USE ONLY			Currer	nt Use (Prior	if being o	demolis	hed)			
Name of Monitoring Firm	Hired by Building O	wner (8)		ASCM	l No.				ement Contr onmental :		s, LL(3			
Street Address								Address Gate D	rive, PO E	3ox 483	3				
City, State, Zip Code								state, Zip wood,	Code NJ 0741	8					
Project Manager for Mor	itoring Firm		T	Telepho	ne No.		Teleph	none No 764-22		200 m	cense N	No.			
Start Date (10) 5/14/12		Scheduled 5/28/12	Con	npletion (Date (11)		Name	of OSH	A Monitor						
Occupancy Status Durin	g Abatement (Check	Only One)				Street	Address	5				_		
	ated During Entire Po ed Outside of Norma						City, S	itate, Zip	Code						
Scope of Work (Check A	II That Apply)					-111.00						oldis—		-	
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		Secretal Control of the Control of t	nova molit	3000000			×	Mini Glov	Containmen -Enclosure rebag Procer -Exempted (dure				re	
		59,6390.0	ocati rmali	AT 1000									Abat	ement pe	
Location Asbestos-Containing TO BE AB In Facil (13)	Material (ACM) ATED	Used Main Custo	Sole lenar	ly by rice/		tos Cor therma surfa	escription staining M I systems acing, VA miscellan	faterial (s insulat T, or		Amou (Spec SF or	ify	Removal	Repair	Encapsulate	Enclosure
baseme	ent	Yes	No	N/A		nine	e insula	tion		80 L	F	x	-	Ф	
- Date in				^		Pipe	, modia								
Name of Desistered 144	to Houles:			IDED 1		C. L	Vasta		Name of D		ا میادا				
Name of Registered Was Newark Carting	ste riauler		Н	JDEP W auler ID 509		of Wa	: Yards iste		Name of Re	gistered	Landfil				
City, State Newark NJ	7/2					Dispo	sal Date		City, State Bethleher	m PA	.,			-	
Completed by Andrew Scott Higgin	s	Title Preside	ent				Signature ک	2			100000000000000000000000000000000000000	ate 2/12			

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County (6) Hudson		1			Code (7) JSE ONLY)				nt Use (Prior idential Pr					on								
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n/a				n/a			Jadar Contracting, LLC															
Street Address n/a							Street Address 22 Troy Lane															
City, State, Zip Code							The state of the s		p Code													
n/a					Lincoln Park, NJ 07035																	
Project Manager for Mon n/a		Telephoi n/a	ne No.		Telephone No. License No. 973-706-7950 01088																	
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City, State Lincoln Park, NJ		Disposal TBD					City, State Morrisvil	lle, P	A 190	67				(4								
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Lillie Lazarevich	tary			0	L. Lizamo 5-2-2012							1.5										

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

Date of Notification	on (1)	(Purs				g Owner/Ope			7 (A) IF	1/1/	14-	1 1	1	- 10-32-
5/1/12								Justin Bi	licki		L	-11		
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Street Address						Street Ad	100							-
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City, State, Zip Coo	de					City, Sta	ate, :	Zip Code			- 22			-
						Monto	clai	r, NJ 070	42					
Project Manager for	Monitoring Fir	m Te	lepho	ne Num	ber	Telephone	e Numb	ber		Licer	se	Numh	er	_
		N,	/A			(973)	744	-8800		00	37	1		
Scheduled Start Date		l. Comp		n Date	(11)	Name of C	SHA N	Monitor	-yearlin					
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Month Day Ye Occupancy Status Dur	ear Mon	th (Check	Day	Yea:	r	Street Ad	Idross							
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Date of Notification (1) 5-2-2012				e of Building	Owner/Operat	tor (2)	CEI	VEI	M	1		
Agencies Notified EPA DEP DOL	Type Notification Initial Amended Amendment		Stree 160 City,	et Address	vingston Av	N. Constitution of the Con	MAY 4	2012		The second second		
☑ DOH DCA	Emergency (justification) Cancellation	including	Joh	67.0	<u>i</u>	Ä	SBESTUS CUTE LICENSING	lephone Nur	mber	i liman		
Name of Facility Where A Lalor Gardens Unit Street Address Stenton Court		g Place (3)	F.	ACILITY INF	ORMATION	Sch Sul Sul	Facility (4) hool (K-12) bchapter 8 (Other (i.e. private	ner than K-1:		Idings	, hom	nes,
City (5) Hamilton						Square	1	of Floors	- 1	Bldg. 50+	Age	
County (6) Mercer			(STA	nty Code (7) TE USE ONLY		Apartr	Use (Prior if be nent Unit		ned)			
Name of Monitoring Firm n/a Street Address	Hired by Building (Owner (8)	n/	SCM No.	Ja	dar Contra	nent Contracto acting, LLC	r (9)				
n/a City, State, Zip Code					22	et Address Troy Lan State, Zip (
n/a Project Manager for Moni	itorina Fi rm	F-1-1111	Teler	ohone No.	Lin		c, NJ 07035	License N	0			
n/a Start Date (10)	T	Scheduled	n/a		97:	3-706-795 ne of OSHA		01088				
5-14-2012 Occupancy Status During	Abatement (Chec	5-15-201 k Only One)				dar Contra	acting, LLC					
Facility Closed/Vaca Abatement Performe Other – Describe:	ated During Entire F	Period of Aba	atement		City,	Troy Land	Code				5	
Scope of Work (Check Al					Lin	coln Park	k, NJ 07035					
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	mark (C.)											
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City, State Lincoln Park, NJ 070	035	*	•		Disposal Dat TBD	N	ity, State Morrisville, P	\ <u> </u>				
Completed by Lillie Lazarevich	20 (2) (0.00)	Title Secreta	ary -		, Signatu	re lig	mi	Dat 5-	e 2-20	12		

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Completion	Date	Am	(Pi	CATION I	OF ASBE	STOS AF	BATEMEN 12:120)	IT Ser	40	n. 4	1/20	1/2	Ð,
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Notification Date Amended Determined Date Notification Name of Building Owner/Operator (2) Name of Building Owner/Operator (3) Name of Building Owner/Operator (4) Name of Building Owner/Operator (5) Name of Building Owner/Operator (6) Name of Building Owner/Operator (7) Name of Building Owner/Operator (8) Name of Building Owner/Operator (8) Name of Building Owner/Operator (9) Name of Collaboration Name of Contact David Telephone Number of Contact David Telephone Number of Contact David Telephone Number of Contact David Subchapter (8) (Name of Facility (4) Subchapter (8) (Name of Name o													
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DCA C	ancellation			The state of the state of	ETY INFO	DMATIO	14/		1 5000				
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Other – Describe: 9am - 5r	om							Park, NJ 0	7035				
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Jadar Contracting, LLC City, State	ıler	Title Secr		003313	7	Dispos	sal Date			_ Da	ite -2 - 20	12	

Print Form

CK#1179

State of New Jersey NOTETICATION OF ASSESTED ARATEMENT PROMOTE TO NAME SAME and 12-1203

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Street Address						☐ Stibcha	pler 8 (Ollher)	han 16	12)			
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Agencies Notified	Type Notification		-	Street A		gemen		1110			u U	5	A		:	
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Name of Monitoring Firm	n Hired by Building	Owner (8)	1	ASC	M No.		Name	of Abat	ement Cont	ractor	(9)				-	
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Project Manager for Mor	nitoring Firm		T	Telepho	ne No.		Telepl	hone No).		License	No.	A		-	_
n/a				n/a			973-	-706-7	950		01088					
Start Date (10)		Schedule	ed Co	mpletion	Date (11)		Name	of OSH	A Monitor							
5-21-2012		5-22-2	012				Jada	ar Con	tracting, I	LC						
Occupancy Status Durin	g Abatement (Chec	k Only On	ie)				Street	Addres	s							
Facility Closed/Vac	ated During Entire I	Period of A	Abater	nent			22 T	roy La	ane	122						
Abatement Perform	ned Outside of Nom	nal Facility	Hour	s			City, S	State, Zi	p Code			277				
Other – Describe:	9am - 5 pm						Line	oln Pa	rk, NJ 07	035						
Scope of Work (Check A	All That Apply)	-50000							2							
≥3 sf or ≥3 lf		X R	Renova	ation				Full	Containme	nt with	Negative	Press	ure			
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Name of Registered Wa	ete Hauler			JDEP W	lacto	Cubic	Yards		Name of R	eniete	red Landf	 501	L			
			100000	ijder w lauler ID		of Wa										
Jadar Contracting L	03313		TBD			G.R.O.V	v.S.	Landfill								
City, State							sal Date		City, State			2				
Lincoln Park, NJ 07		LIE-Edi.	TBD			Morrisvi	lle, P	A 19067	7							
Completed by		Title				S	Signature	9	C	7	- 1	Date				
Lillie Lazarevich	- a - E - E	Secretary L. Lusque 5-2-2012								2						

במותם תבתבה

1-001

MO 20140355/25

Date of Notification (1) April 24,2012			Nam	e of Building	Owner/Opera	ator (2)		(1)	7-10		57		
Agencies Notified Type Notifical	ion		Stree	et Address	Reinicker			11 1	1 15	-	Action of the second of the se		
EPA Initial Amende				Hawthorr State, Zip C			1 M/Y	4 20)12		ACTION OF THE PERSON OF T		
Emerger	cy (includin	g	Hac	idonfield	EE080.L.N	ATT TETELOM	Ì.		e vet Mak		- Appendix		
DCA justificati Cancella				e of Contact rew Amy		Decine.	/ Telephon	e Numb	ér ⁽⁾		-		
Name of Facility Where Abatement is Ta	king Place	(3)	F/	CILITY INF	ORMATION	Type of Eaci	in the car	Get 15 of 1940 April 1960	in the same				
Street Address						School	ity (4) (K-12)		(m)***	uar etel se resi	ert mitty		
315 Hawthome Ave.						Subcha Other (i.	pter 8 (Other than e. private & comm	K-12) nercial b	uildin	as, ha	mes		
City (5) Haddonfield						Square Feet 3600	# of Floors		Bldg	. Age			
County (6) Camden			Count (STAT	y Code (7) E USE ONLY	1	Current Use (Prior if being den	nolished)	97	-	OK Jahreniera		
Name of Monitoring Firm Hired by Buildir Environmental Management Inte	g Owner (8)	1 000	CM No.	Man	Resident ne of Abatement (Contractor (9)						
Street Address	mationat,	inc.			Gra	eham-Tech Er	nvironmental S	ervice	s LL	C.			
204 e. Germantown Pike City, State, Zip Code					14	14 Read Drive							
Norriton, P.A. 19401					City,	City, State, Zip Code Sicklerville, N.J. 08081							
Project Manager for Monitoring Firm Raymond J. Giodano				ione No. 229-5369	Tele	ohone No. 5) 318-1341	Licens						
Start Date (10) May 5, 2012	Schedul May 8,	ed Co	mpletion	Date (11)	Nam	e of OSHA Monito	0115 or						
Occupancy Status During Abatement (Che	ck Only Or	10)			Gra Stree	ham-Tech En t Address	vironmental se	ervices			A-30-		
Facility Closed/Vacated During Entire Abatement Performed Outside of Not Other – Describe:	Period of A	Abater Hour	ment s		14 F	Read Drive State, Zip Code							
Scope of Work (Check All That Apply)					- Sick	derville, N.J. 0	8081						
≥3 sf or ≥3 If ≥160 sf or ≥260 If		enova emoli				Glovebag Pro	ocedure						
t and the se		Locat			L	Non-Exempted (*) and Non-Friable Pr					t		
Location of Asbestos-Containing Material (ACM) TO BE ABATED	Used	ormal I Sole ntenai	ly by	Asbestos	Description Containing N	flaterial (ACM)	Amount	-	T	ype	}		
In Facility (13)	Custo	dial 8 (12)	Staff?	(i.e. th	ermal system surfacing, VA ther miscellar	s insulation, T. or	(Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure		
Basement	Yes	No	N/A				4	Val	¥	ulate	sure		
Dasement	-	Х			Pipe Insula	tion	30 LF	x					
	+++								-				
Jamo of David											_		
lame of Registered Waste Hauler merican Disposal System	A. C.	Ha	IDEP Williams Juler ID I V2069	No. o	Subic Yards f Waste		Registered Landfi				-		
ity, State .O.Box 348, Lumberton, N.J. 0804	Disposal Date			City, State	3				\dashv				
ompleted by fillis Graham			Signature	727 Rec	d Lane Road E	Birdsbo ate	oro, P	P.A.					
						28 100							