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

<table>
<thead>
<tr>
<th>Date of Notification (1)</th>
<th>05/05/16</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Building Owner/Operator (2)</td>
<td>TOWNSHIP OF MONROE</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Agencies Notified</th>
<th>Type Notification</th>
</tr>
</thead>
<tbody>
<tr>
<td>EPA</td>
<td>Initial</td>
</tr>
<tr>
<td>DEP</td>
<td>Amended</td>
</tr>
<tr>
<td>DOL</td>
<td>Amendment #1</td>
</tr>
<tr>
<td>DOH</td>
<td>Emergency (including justification)</td>
</tr>
<tr>
<td>DCA</td>
<td>Cancellation</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Facility Where Abatement is Taking Place (3)</th>
<th>FORMER MONROE TOWNSHIP LIBRARY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Street Address</td>
<td>306 SOUTH MAIN STREET</td>
</tr>
<tr>
<td>City</td>
<td>WILLIAMSTOWN</td>
</tr>
<tr>
<td>County</td>
<td>GLOUCESTER</td>
</tr>
<tr>
<td>Name of Monitoring Firm Hired by Building Owner (8)</td>
<td>TTI ENVIRONMENTAL</td>
</tr>
<tr>
<td>ASCM No.</td>
<td></td>
</tr>
<tr>
<td>Name of Abatement Contractor (9)</td>
<td>PEPPER ENVIRONMENTAL SERVICES, INC.</td>
</tr>
<tr>
<td>Street Address</td>
<td>1253 NORTH CHURCH STREET</td>
</tr>
<tr>
<td>City, State, Zip Code</td>
<td>MOORESTOWN, NJ 08057</td>
</tr>
<tr>
<td>Project Manager for Monitoring Firm</td>
<td>JEFFREY SEAMAN</td>
</tr>
<tr>
<td>Telephone No.</td>
<td>(856) 840-0800</td>
</tr>
<tr>
<td>Telephone No.</td>
<td>(215) 533-5155</td>
</tr>
<tr>
<td>License No.</td>
<td>01186</td>
</tr>
<tr>
<td>Start Date (10)</td>
<td>05/09/2016</td>
</tr>
<tr>
<td>Scheduled Completion Date (11)</td>
<td>05/31/2016</td>
</tr>
<tr>
<td>Facilty Closed/Vacated During Entire Period of Abatement</td>
<td>X</td>
</tr>
<tr>
<td>Abatement Performed Outside of Normal Facility Hours</td>
<td>X</td>
</tr>
<tr>
<td>Other – Describe:</td>
<td></td>
</tr>
<tr>
<td>Scope of Work (Check All That Apply)</td>
<td>ABATEMENT PRIOR TO DEMO</td>
</tr>
<tr>
<td>≥25 sf or ≥23 ft</td>
<td>X</td>
</tr>
<tr>
<td>≥160 sf or ≥260 ft</td>
<td></td>
</tr>
<tr>
<td>Renovation</td>
<td></td>
</tr>
<tr>
<td>Demolition</td>
<td></td>
</tr>
<tr>
<td>Full Containment with Negative Pressure</td>
<td>X</td>
</tr>
<tr>
<td>Mini-Enclosure</td>
<td></td>
</tr>
<tr>
<td>Glovebag Procedure</td>
<td></td>
</tr>
<tr>
<td>Non-Exempted (*) and Non-Friable Procedure</td>
<td></td>
</tr>
<tr>
<td>Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (12)</td>
<td></td>
</tr>
<tr>
<td>Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)</td>
<td>Yes No N/A</td>
</tr>
<tr>
<td>Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)</td>
<td></td>
</tr>
<tr>
<td>Amount (Specify SF or LF)</td>
<td></td>
</tr>
<tr>
<td>Abatement Type</td>
<td></td>
</tr>
<tr>
<td>Removal</td>
<td></td>
</tr>
<tr>
<td>Repair</td>
<td></td>
</tr>
<tr>
<td>Encapsulate</td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>X</td>
</tr>
<tr>
<td>NO</td>
<td>X</td>
</tr>
<tr>
<td>NO</td>
<td>X</td>
</tr>
<tr>
<td>Name of Registered Waste Hauler</td>
<td></td>
</tr>
<tr>
<td>SERVICE TRANSPORT</td>
<td></td>
</tr>
<tr>
<td>NJ/DEP Waste Hauler ID No.</td>
<td></td>
</tr>
<tr>
<td>Cubic Yards of Waste</td>
<td></td>
</tr>
<tr>
<td>Name of Registered Landfill</td>
<td></td>
</tr>
<tr>
<td>A &amp; L SALVAGE</td>
<td></td>
</tr>
<tr>
<td>City, State</td>
<td>LIBSON, OH</td>
</tr>
<tr>
<td>Disposal Date</td>
<td></td>
</tr>
<tr>
<td>City, State</td>
<td></td>
</tr>
<tr>
<td>Completed by</td>
<td></td>
</tr>
<tr>
<td>DENISE M. NIVEN</td>
<td></td>
</tr>
<tr>
<td>Title</td>
<td>ADMIN. ASST.</td>
</tr>
<tr>
<td>Signature</td>
<td></td>
</tr>
<tr>
<td>Date</td>
<td>05/05/2016</td>
</tr>
</tbody>
</table>

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

Date of Notification (1) 5/2/2016

Name of Building Owner/Operator (2) Garfield BOE

Agencies Notified
- EPA
- DEP
- DOL
- DOH
- DCA

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

Street Address 125 Outwater Lane

City, State, Zip Code Garfield NJ 07026

Name of Contact Dr Edward Izbicki

Telephone Number

Name of Facility Where Abatement is Taking Place (3)
American Legion Post

Street Address 171 Cedar Street

City (6) Garfield, NJ 07026

County (6) Bergen

County Code (7) n/a

Type of Facility (4)
- School (K-12)
- Subchapter 9 (Other than K-12)
- Other (i.e. private & commercial buildings, homes, etc.)

Square Feet 6000

# of Floors 1 +basement

Bidg. Age 50+

Current Use (Prior if being demolished, abandoned)

Name of Monitoring Firm Hired by Building Owner (8)
LEW Corporation

ASCN No. n/a DEmo

Name of Abatement Contractor (9)
Yannuzzi Environmental

Street Address 1090 Bristol Rd

City, State, Zip Code Mountainside, NJ 07092

Project Manager for Monitoring Firm Neil Wendt

Telephone No. 908-654-0868

Start Date (10) 5/12/16

Scheduled Completion Date (11) 5/18/16

Name of OSHA Monitor Yannuzzi Group

Street Address 135 Kinnelon Rd Suite 102

City, State, Zip Code Kinnelon NJ 07040

Occupancy Status During Abatement (Check Only One)
- Facility Closed/Vacated During Entire Period of Abatement
- Abatement Performed Outside of Normal Facility Hours

Other - Describe:

Scope of Work (Check All That Apply)
- Renovation
- Demolition
- Full Containment with Negative Pressure
- Mini-Enclosure
- Glovebag Procedure
- Non-Exempted (*) and Non-Friable Procedure

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

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>floor</td>
<td></td>
<td>x</td>
<td></td>
</tr>
<tr>
<td>siding</td>
<td></td>
<td>x</td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Material</th>
<th>Amount (Specify SF or LF)</th>
</tr>
</thead>
<tbody>
<tr>
<td>vat &amp; Mastic</td>
<td>400 sf</td>
</tr>
<tr>
<td>siding</td>
<td>900 sf</td>
</tr>
</tbody>
</table>

Name of Registered Waste Hauler Yannuzzi Group

NJDEP Waste Hauler ID No. 17467

Cubic Yards of Waste 20

Name of Registered Landfill Grows

City, State Kinnelon NJ

Completed by John Mucha Title Sr. project Mang.

Disposal Date 5/18/2016

City, State Morrisville, Pa

Signature

Date 5/2/2016

ASB-41 (R-06-08)

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## NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to N.J.A.C. 8:60 and 12:120)

**Date of Notification (1):** 5/3/16  
**Name of Building Owner / Operator (2):** Verizon

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

### Type Notification
- [x] Initial  
- [ ] Amended  
- [ ] Emergency  
- [ ] Cancellation

### Street Address
34 Alden Street

### City, State & Zip Code
Cranford New Jersey

### Name of Contact
Alex Baylor

### Telephone Number

### FACILITY INFORMATION

#### Name of Facility Where Abatement is Taking Place (3)
**Cranford Central Office**

#### Street Address
34 Alden Street

#### City (5)  
**Cranford**

#### County (6)  
**Union**

#### County Code (7)  

#### Name of Monitoring Firm Hired by Building Owner (8)
USA Environmental Inc.

#### ASCM No.

#### Project Manager for Monitoring Firm
Mark Jenkins

#### Telephone Number
215-365-5810

#### Scheduled Start Date (10)  
5/16/16

#### Scheduled Completion Date (11)  
5/17/16

#### Occupancy Status During Abatement (Check only one)
- [ ] Facility Closed/Vacated During Entire Period of Abatement
- [x] Abatement Performed Outside of Normal Hours – 7am to 3pm  
  
  **Describe:** 5 PM – 1:30 AM
- [ ] Facility Occupied During Abatement

### Scope of Work (Check all that apply)
- [x] ≥3 sf or ≥3 lf
- [x] ≥160 sf ≥260 lf
- [x] Renovation
- [ ] Demolition

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

#### Normally Used by Maintenance or Custodial Staff? (12)
- [ ] Yes  
- [ ] No  
- [ ] N/A

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

#### Amount (Specify SF or LF)
- **Pipe insulation:** 15 LF
- **Duct Insulation:** 40 SF

#### Abatement Type
- [ ] Full Containment with Negative Pressure
- [ ] Mini-Enclosure
- [ ] Glove Bag Procedures
- [ ] Non-Exempted and Non-Friable Procedure

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

### NJDEP Waste Hauler ID No.
20990

### Cubic Yards of Waste
2

### Name of Registered Landfill
MINERVA LANDFILL

### City, State
Waynesburg, OH 44688

### Disposal Date
TBD

### Completed By (Print or Type)
Patrick T. DeCaro

### Title
PROJ. MGR.

### Signature
[Signature]

### Date
5/3/16

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PD16062
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1) 5/2/16

Name of Building Owner/Operator (2) Forman

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

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

Street Address

City, State, Zip Code Piscataway, NJ 08854

Name of Contact Susan Forman

Telephone Number

FACILITY INFORMATION

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

Street Address

City (5) Piscataway, NJ

County (6) Middlesex

County Code (7) (STATE USE ONLY) 

Current Use (Prior if being demolished)

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

Square Feet 2500

(# of Floors 2

Blg. Age 90+/-

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

ASCM No. 

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

Street Address PO Box 322

City, State, Zip Code Allentown, NJ 08501

Telephone No. (609) 259-9688 License No. 00493

Name of OSHA Monitor MECS

Street Address PO Box 341

City, State, Zip Code Crosswicks, NJ 08515

Start Date (10) 5/11/15

Scheduled Completion Date (11) 5/13/16

Occupancy Status During Abatement
☒ Facility Closed/Vacated During Entire Period of Abatement
☐ Abatement Performed Outside of Normal Facility Hours
☐ Other - Describe:

Scope of Work (Check all that apply)
☒ ≥2000 sf or ≥2000 sf
☐ ≥1600 sf or ≥260 sf
☒ Renovation
☒ Demolition

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

IN Facility

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

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

Amount (Specify SF or LF) 25 LF

Name of Registered Waste Hauler Stevens Environmental Services, Inc.

NJDEP Waste Hauler ID No. 18292

Cubic Yards of Waste 1 CU

Name of Registered Landfill GROWS Landfill

City, State Allentown, NJ

Disposal Date 5/13/16

City, State Morrisville, PA

Completed By Mahlon E. Stevens Project Manager

Signature Date 5/2/16

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