B & G proj. #:

State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7)

Check # 5180

					Amen	ame	nı	Check					•
Date of Notification	(1)	Name	e of Building Ow	ner/C	Operator (2)			and the state of t	2000年1月1日	Maria I			
0 4 /1 12	1/12		Clare's Health				and Salah with the	ACCORDING MARCHANT CHIEF	CE CONTRACTOR CONTRACT	· '			
Agencies Notified	Type Notification		t Address				The State of the S	n ND	E In	11.			
☐ EPA	☐ Initial	25	Pocono Road	V-100e-100			PI	中屋川山		111			
☐ DEP	► Amendme		State, Zip Code				· IIII	and the same of th	- 11				
⊠ DOL	Amendme	De	enville, NJ 078	334			11531	7 20	17 Number	and 1	The in	of album	12
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☐ DCA	Cancellati	<u>D</u>	rew Van Hook				15				1	_	_
			FA	CILIT	TY INFORM	ATION		ASBEST					
Name of facility w	here abatement is	taking place	(3)					Type of Facility (4	4) (K - 12)	i,			
St Clare's Heal	th System (non s	ub 8)							apter 8 (O	ther th	nan K-	12)	
Street Address	th System (non s	400)						Other (Private/Co	omme			
	- L WE 2 C / L	har & Dal	ivanı)						Homes, e # of Floor		Blo	ig. Ag	ge
	ad, Wing 3-C (La	County				Cour	nty Code (7)	oquaio i doc	0, 1 100				5
City (5)			/	50	2		e use only)	Current Use (Pr	ior if bein	g dem	olishe	d)	
Denville, NJ (Morris		-			Name of Abatement C	Hospital					
1	ng Firm Hired by Bl	dg. Owner (8	3)		ASCM No.								
Total Solution	Environmental			0	17		B & G Restoration	n, Inc.		_		-	
Street Address					105 Ryerson Roa	d							
	22 Columbia Road lity, State, Zip Code						City, State, Zip Code						
Morristown, N							Lincoln Park, NJ	07035					
Project Manager fo			Phone Nur	nber			Telephone Number		License	Numb	er		
Ben Waer			973-998-	9348	8		973-696-6869		0378	_			
Scheduled Start D	ate (10)	Sched. C	ompletion Date	(11)			Name of OSHA Monit B & G Restoration						
04/13/2012		05/31/2	012				Street Address	ni, mo.		-		Market Control	
Occupancy Status	During Abatement						105 Ryerson Roa	d					
Facility close	ed/vacated during e	entire period	of abatement.				City, State, Zip Code						
Describe:	performed outside of		ility hours-			_		0.502.5					
Other-Descr	ribe: _7:00am - 3:30						Lincoln Park, NJ	07035					
	heck all that apply)					П.		estivo proposuro. F	ズ Glovei		a a a di		
☐ Demolition		Renovation				10000	ull Containment w/neg //ini-enclosure	ative pressure [Non-fi	1000			
>3 sf or >3 l	lf ∐≥	160 sf or ≥2				N N	mini-enclosure		_ Notisii	TR	R	E	
Location of	atoining		ormally used so ince/custodial	lely	Danasiasi		abactes containing	Amount		e	e	n	E n
asbestos-co material to b	pe i	staff(12)		-	material		sbestos-containing	(Specify S	F or	o m	p a	c	С
abated in fa	cility (13)	Yes	No N/A					LF)		v e	i	р	L
Nurses Locker Rm			X		pipe insula	tion		36 lf					
Anesthesia Sleep Rm b			pipe insula	tion		1 1/2 lf		X					
								井			붜		
Registered Waste Hauler NJDEP Haule					oic Yards of	Macte	Name of Registered	Landfill		<u>.</u>		Ш	Ш
Registered Waste B & G Restorat	Hauler ID#		yard	vasie	Tullytown Resou	rce & Recovery	Center			= 1.5 = 1.5			
City, State					te		City, State						
Lincoln Park, NJ 07035 4/1 Completed by (Print or Type) Title					4/13/12 - 5/31/12 Tullytown, PA Date					-			
Completed by (Pri Gordana Luna				Jigilatale		Gordana Luna		4/12/2	2012				

State of NJ
Notification of Asbestos Abatement
Pursuant to NJAC 8:60-7 and 12:1/20-

B & G proj. #:	2012-32 E			(Pursuar	nt to NJAC 8		and 12:120-7)	Check	# 5235	<u></u>		
Date of Notification	(1)	111	Name of Bu	uilding Own	er/Operator (2)				odlik koʻzetenin	٦.		
0 5 /10 2	1/1121			Health S			The second second	FIN	TER			
Agencies Notified EPA	Type Notifica	tion	Street Addre	ess	<u> </u>		TEN IS	66	-111	11		
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☐ DEP			City, State, 2	Zip Code			11011	MAY T	2012	1		
☑ DOL		ment	Denville	, NJ 0783	34		III U	Miss				
DOH			Name of Co	ntact			: 1	Telephor ASI ESTOS CO	e Number	1		
☐ DCA	☐ Cancell	ation	Drew V	an Hook					Mi cano			
	927-2 14 <u></u>			FAC	ILITY INFORM	ATION		And hills and the state of				
Name of facility who	ere abatement	is taking pl	ace (3)				- Contraction of the	Type of Facility	(4) ol (K - 12)			
St Clare's Health	System (nor	sub 8)						=	apter 8 (Other	than I	K-12)	
Street Address								○ Other	(Private/Comr			
25 Pocono Road	1 4-C (same (dav surge	rv)					Bldgs. Square Feet	/Homes, etc. # of Floors	TE	Bldg. A	ae
City (5)	1, 4-C (3ame (inty (6)			Cou	inty Code (7)	oquale reet	<i>II</i> 01 1 10010		5	.50
						57,5789711675	te use only)	Current Use (P	rior if being de	molish	ned)	
Denville, NJ 07			orris			L.,		Hospital				
Name of Monitoring		150	er (8)		ASCM No.		Name of Abatement					
Total Solution E	nvironmental				017	_	B & G Restoration	on, Inc.				
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22 Columbia Ro City, State, Zip Code	2000					_	105 Ryerson Ro City, State, Zip Code	STATE OF THE OWNER, WHEN PARTY AND PARTY AND PARTY AND PARTY.	-			
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Morristown, NJ Project Manager for		1	I Di	none Numb	ner .		Lincoln Park, N Telephone Number	J 07035	License Nur	nher		-
	Worldoning 1 in	•					973-696-6869		0378			
Ben Waer Scheduled Start Date	a (10)	ISche	d. Completic	73-998-93		_	Name of OSHA Mon	itor	4			
05/3/2012	3 (10)		1/2012	on Date (1	')		B & G Restorati	on, Inc.		in the second	e included and the	
Occupancy Status D	uring Abateme	Charles Street Co.					105 Ryerson Ro	ad				
Facility closed/							City, State, Zip Code					
Describe: Other-Describe	2: 7:00am - 3:3	Opm occupi	ied			-	Lincoln Park, N	1.07035				
Scope of Work (che						_		0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0				
☐ Demolition	×	Renovation	on			ПЕ	ull Containment w/ne	gative pressure	Glovebag	oroced	ure	
>3 sf or >3 lf	ī	≥160 sf or	>260 If			CHEMICAL STATE	Mini-enclosure		Non-friable			
			n normally	used solely	/	_		<u>.</u>		R	ĪΕ	T
Location of asbestos-cont	aining	by maint	enance/cus			on of a	sbestos-containing	Amount	_ e	е	n	l E
material to be abated in facili	tu (12)	staff(12)	Γ	T same	material ((Specify S	F or o	p a	c a	c
abateu III Iaciii	13 (13)	Yes	No	N/A				1 17	v e	i	р	-
SDS intersection	*			IX	pipe insulat	ion	X	30 lf				
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Registered Waste Ha B & G Restoration			EP Hauler I 563		ubic Yards of V yard	Vaste	Name of Registered Tullytown Resou		Center		4	
City, State	i, iii.			Disposal D			City, State	ince & Recovery	Center			
Lincoln Park, NJ	07035				5/31/12		Tullytown, PA		1 11 12 12 12 12 12 12 12 12 12 12 12 12			
Completed by (Print of	or Type)	Title Treasure	er		Signature	(Gordana Luna		Date 5/2/2012			

· Check-#8297

Date of Notification (1) 5–2–12					of Building				*(1/0		77		5.7	FF
	encies Notified Type Notification						asi, I	LC	THE	IE	PF		W	0.5
Agencies Notified	Type Notification				Address O. Box	. 62			1 111		0)	1		Total Control
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Name of Facility Where		ng Place (3)					Type of Fac		PROTEIN DESCRIPTION		and office	demoki	(Gjegster :
64 North Del	sea Drive							□ School	(K-12)	All receive	,,	M Control		
Street Address			21.000.1-2					☐ Subcha	apter 8 (Otl					
64 North Del	sea Drive							Other (etc.)	i.e. private	& comn	nerciai c	ullain	js, hon	nes,
City (5) Vineland								Square Fee 7,495	t #0	of Floors			. Age 40+y.	rs.
County (6) Cumberland					Code (7)	n		Current Use multi	(Prior if be	ing dem tail,	olished comm	erc:	ial	
Name of Monitoring Firm	Hired by Building	Owner (8)		ASC	M No.		Name	of Abatement	Contracto	r (9)				
EHS Environm	ental Inc.						10000	outh Env			Co.,	Inc		
Street Address 411 Southgat	e Court Sui	to E					Street	Address						
	e court, sui	Le E					923 1	Haws Ave	enue					
City, State, Zip Code						d	City, St	ate, Zip Code	9					
	Mikcleton, NJ 08056 Project Manager for Monitoring Firm							istown,	PA 194	01				
Project Manager for Moni	roject Manager for Monitoring Firm						Telepho			Licens				
Jack Carney Start Date (10)	Jack Carney					80		239-9920		003	398			
5-21-12		6-30-		npletion	Date (11)			of OSHA Mor	10.70	T				
Occupancy Status During	Abatement (Chec							ENviron	mericar	Inc.	L.			
				Street Address 411 Southgate Co						rt.Su	ite 1	F)		
☒ Facility Closed/Vaca☒ Abatement Performe	ed Outside of Norm	al Facility	bater Hours	nent S		8 /		ate, Zip Code						
□ Other – Describe: _				- 10				leton, N		5				
Scope of Work (Check All	That Apply)													
≥3 sf or ≥3 lf		□ Re	nova	ition				Full Conta	inment with	Megativ	o Proc	Suro		
≥160 sf or ≥260 If			molit					Mini-Enclo	sure	rivegau	ve ries	suie		
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Name of Registered Waste			0.000				Cubic Yards Name of Registered			red Land	dfill			
17				Hauler ID No. of Waste 17304 120			120 Cumberland County Landfill							
City, State				Disposal Date City, State										
Bellmawr, NJ						6-30-	-12		eland,	NJ				
Completed by		Title	Date Date											
Timothy E. Bryan Vice-Pre					resident (2/2		5–2-	-12		

(Pursuant to NJAC 8:60 and 12:120) Check #6436 Date of Notification (1) Name of Building Owner / Operator (2) May 4, 2012 Bank of America Agencies Notified Type Notification Street Address EPA 125 East Main Street DEP **DOL** Initial City, State & Zip Code Amended Denville, NJ 07834 ⊠рон Amendment #_ DCA Cancellation Name of Contact C. Telephone Number ASBESTOS - 2000 Jim Kalafsky **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) Bank of America - Drive-Up Facility Subchapter 8 (Other than K-12) Street Address 125 East Main Street Other (i.e., private & commercial buildings, home, etc.) # of Floors Bldg. Age City (5) 100 44 Current Use (Prior if being demolished) Denville Bank - Drive-up Facility County (6) County Code (7) USE ONLY Morris Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) **Environmental Testing Consultants, LLC** Synatech, Inc. Street Address Street Address One Mall Drive, Suite 404 829 Radio Road City, State & Zip Code City, State & Zip Code Cherry Hill, NJ 08002 Little Egg Harbor, NJ 08087 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number Howard Zenobi 856-482-1311 609-296-6916 00817 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor May 16, 2012 May 16, 2012 Synatech, Inc. Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 829 Radio Road Abatement Performed Outside of Normal Hours City, State & Zip Code Other - Describe: Little Egg Harbor, NJ 08087 Facility Occupied During Abatement Scope of Work (Check all that apply) Full Containment with Negative Pressure ≥ 3 sf or ≥ 50 If Renovation Mini-Enclosure >160 sf or >260 lf Demolition Glovebag Procedure Non-Exempted(*) and Non-Friable Procedure Is Location Normally Used Location of Description of Abatement Type Asbestos-Containing Material (ACM) Solely by Maintenance or Asbestos-Containing Amount (Specify TO BE ABATED Custodial Staff? (12) Material (ACM) SF or LF) IN Facility (i.e., thermal systems Encapsulate (13)insulation, surfacing, VAT Enclosure Removal Repair or other miscellaneous) N/A Yes Drive-Through Canopy X Roof Flashing 100 SF X Bathroom X Floor Tile 20 SF X Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Waste Name of Registered Landfill Hauler ID No. 27429 Synatech, Inc. Grows Landfill City, State Disposal Date City, State Little Egg Harbor, NJ 08087 May 17, 2012 Morrisville, PA

Wand

Date

May 4, 2012

Signature

Completed By

Diane Aloia

Title

Executive Administrator

2301).

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Site of Notification (1)	4/12		, N			Owner/Operator	/ 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	LACTING	ש ש	Management of Artista
Agencies Notified	Type Notification		S	Veel Ac	sdress		- iifhii	,	0010	11111
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3/11/1						Sueet Address	Spruce	1.1=		
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- Anatement Perform	ed Outside of Noma	I Facility t	Hours			CITY, SCHIE, AUP.	Code LE SHADE	= N.J.	0805	7.
= Other - Describe						MAP	LE DAMP	1 1 1 1 1		
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State of New Jersey - Notification of Asbestos Abatement

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

112

GAC Project # 060-11 Client Project #

Name of Building Owner/Operator (2) Date of Notification (1) RUTGERS, THE STATE UNIVERSITY OF NJ May 3, 2012 Street Address Agencies Notified Notification Type ENVIRONMENTAL HEALTH & SAFETY DEPT. □Initial Notification 27 ROAD 1, BLDG 4086, LIVINGSTON CAMPUS ■ Amended Notification # 1 – ■ EPA City, State, Zip Code DCA Scope of work method Non-PISCATAWAY, NJ 08854 X DOL friable/cut & wrap Telephone Number DEP- No Longer REQUIRED Name of Contact ■ Emergency (including MICHAEL SMITH, ENV. X DOH justification) **HEALTH & SAFETY** □ Cancelled FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) OLSON HALL, BLDG# 7229 ☐ Subchapter 8 (other than K-12) Street Address ■ Other (i.e. private & commercial buildings, homes, etc.) **NEWARK CAMPUS** Sq. Feet: N/A # of Floors: 4 Bldg. Age: 60+ years County (6) County Code (7) City (5) Current Use (prior if being demolished): ACADEMIC (State Use Only) ESSEX NEWARK Name of Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. ATC ASSOCIATES 0098 GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address Street Address 3 TERRI LANE **268 MAIN STREET** City State, ZipCode City, State, Zip Code BUTLER, NJ 07405 BURLINGTON, NJ 08016 License Number Telephone Number Project Manager for Monitoring Firm Telephone Number 609-386-8800 BRIAN KEARNY 00840 973-492-0477 Scheduled Completion Date (11) Name of OSHA Monitor Scheduled Start Date (10) 05/07/12 05/03/12 ENVIROVISION, INC. Street Address Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement 20-21 WARGARAW ROAD ☐ Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code Describe XOther - Describe: 5PM - 5AM FAIRLAWN, NJ Scope of Work (Check all that apply) ■ Full Containment with Negative Pressure ■ Mini-Enclosure ▼ Renovation $\square > 3 \text{ sf or } \ge 3 \text{ lf}$ Slovebag Procedure / Wrap & Cut ≥ 160 sf or ≥ 260 Demolition Non-Exempted (*) and Non-Friable Procedure Abatement Type Amount Description of Asbestos Containing Material Location of Asbestos-Containing Is Location Normally Used (ACM) (i.e. thermal systems insulation, surfacing, (Specify SF Solely by Maint./Custodial Material (ACM) in Facility (13) Remove Repair Encap Enclose or LF) Staff? (12) VAT, or other miscell.) NO NA YES 500 SF X VAT, TRANSITE, BENCH TOPS Room 101 X Name of Registered Landfill 10 CY NJDEP Waste Hauler ID# Cubic Yards of Waste: Name of Reg. Waste Hauler G.R.O.W.S. North Landfill See Hauler Below #1 & 2 See Below City, State Disposal Date Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 100 New Ford Mill 05/07/2012 NJDEP # 12561 Rd. Morrisville, Pa Hauler #2) Newark Carting, Inc., Newark, NJ 04509 19067 NJ DEP # 4509 215-736-1700 Signature Completed by (Print or Type) May 3, 2012 SENIOR PROJECT RAYMOND C. PEDALINO MANAGER

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

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

GAC Project # 060-11					1	Im	5 6 E	1 /	y IS	11 111
Client Project #					I None of Delibling Owner(Or	111 11-				
Date of Notification (1) April 18,	2012				Name of Building Owner/Op RUTGERS, THE STA		FRSITY	OF No	hen	11]]]
Agencies Notified		fication	Tyne		Street Address	THUM	WAY	772	UIZ	
Agencies Notified			Notificati	on	ENVIRONMENTAL H	EALTH	SAFETY	DEP	т.	
□ EPA	23,200,000,000		ed Notific		27 ROAD 1, BLDG 40					3
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⊠ DOL			cation)	ora anng	PISCATAWAY, NJ 08	854	LIU	THOTHO		
☑ DEP- No Longer REQUIRE		ancel			Name of Contact		Telephone	Numbe	<u>er</u>	
⊠ DOH					MICHAEL SMITH, EN	<u>V.</u>				
7.					HEALTH & SAFETY					
				FACILITY IN						
Name of Facility Where Abatemer		ace (3)			Type of Facility (4)					
OLSON HALL, BLDG# 7	229				School (K-12) Subchapter 8 (other than	K 12)				
Street Address					Subchapter 8 (other than Subchapter 8 (other than Subchapter 8 (other than		nge homes	etc.)		
NEWARK CAMPUS							Bldg. Ac		+ vears	
City (5)	unty (6)		County (Code (7)						
NEWARK	ESSEX		(State U	se Only)	Current Use (prior if being of	lemolished)	: ACADEN	IIC		
Name of Monitoring Firm Hired by	Bldg. Owner	(8)	ASCM N	lo.	Name of Contractor (9)		7			
ATC ASSOCIATES			0098		GREENWOOD ABATE	MENT C	ONSULTA	NTS,	INC.	
Street Address			-		Street Address		8.77			
3 TERRI LANE										
		2 3 3			268 MAIN STREET					
City, State, Zip Code BURLINGTON, NJ 08	016				City State, ZipCode BUTLER, NJ 07405					
Project Manager for Monitoring Fi			Number		Telephone Number		License Nu	mber		
BRIAN KEARNY	60	9-386	-8800		973-492-0477		00840			
Scheduled Start Date (10)	Sch	eduled (Completion	Date (11)	Name of OSHA Monitor		00040			1 1 1 1 1 1 1 1 1 1
05/03/12		07/12		Date (11)	1					
					ENVIROVISION, INC.					
Occupancy Status During Abate					Street Address					
□ Facility Closed/Vacated Durin	Carrier and Carrier State Street, and the Carrier State Street,				20-21 WARGARAW RO	DAD				
■ Abatement Performed Outsid Describe	e or Normai i	racility	Hours -		City, State, Zip Code					.1:
XOther - Describe: 5PM - 5A	M									
					FAIRLAWN, NJ					
					TAIRCEASTS, 100					
Scope of Work (Check all that app	oly)				П	ull Contains	nent with Ne	antivo	Droccuro	
⊠ ≥ 3 sf or ≥ 3 lf				⊠Renovation		ni-Enclosur		gative i	ressure	
□ ≥ 160 sf or ≥ 260	Y			□ Demolition		Glovebag P				
2 100 01 01 2 200	200			_ Demonion			ed (*) and No	n-Friab	ole Proce	dure
Location of Asbestos-Containing	Is Location			Description of Asl	pestos Containing Material	Amoun		tement '		de California
Material (ACM) in Facility (13)	Solely by N				nal systems insulation, surfacing		y SF Rem	ove Rer	pair Encap	Enclose
la la la la de	Staff? (12) YES	NO	NA .	VAT, or other mis	ceii.)	or LF)	1.500			
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Room 101		X		VAI, IRANS	ITE,BENCH TOPS	500 S	F 🗵	_		-
	-		-						_	_
News of Dea Wests Houses	LNID	ED Mes	to Unidos II	D.#		0.014	Name of Re	ngietoro	d Landfill	
Name of Reg. Waste Hauler See Hauler Below #1 & 2		Below	ste Hauler I v	D#	Cubic Yards of Waste: 1	O CY	G.R.O.W.			lfill.
Hauler #1) Greenwood Abatemen	t Consultant	s, Inc. –	Butler, NJ	07405		isposal Da			State	
NJDEP # 12561	Namonic NI	0.4500		2	0	5/07/201	2	- S	New Ford Morrisville	
Hauler #2) Newark Carting, Inc., NJ DEP # 4509	Newark, NJ	04309						1906	7	4745 (ASS ASS ASS ASS ASS ASS ASS ASS ASS AS
								215-7	736-1700	
Completed by (Print or Type)	Title			4 1 1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Signature	1	<u>Date</u>			
RAYMOND C. PEDALING	The state of the s		ROJECT		72 /1	111	April	18, 2	012	
	MAN	AGER	?	Service Commission	12-16.	/ -		11 5	1	***

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

Check # 2540

GAC Project # 060-12				٠ مطاعتاني	Je suit	and the second section of the second	AND AND AND SECURE		
Client Project #				James	Section 1	**************************************	NAE	m	
Date of Notification (1) May 3, 2012				Building Owner/Op ERS, THE STA	perator (2)	P 15 1	WE		
Agencies Notified IX EPA IX DCA IX DOL IX DEP- No Longer REQUIRED IX DOH	□ Amende □ Emerg	Notification ed Notification Jency (including cation)	27 ROA City, State PISCAT Name of MICHA	DNMENTAL H D 1, BLDG 40 D Zip Code TAWAY, NJ 08 Contact EL SMITH, EN	86, LIVII	Telephone	CAMPUS		and a second sec
		FAC	HEALI	H & SAFETY	2.455.105	Alter Trans man	Series - 1 -		
Name of Facility Where Abatement is NICHOLAS HALL, BLDG# 8			Type of Fa	cility (4)	K-12)	ings, homes	etc.)		
DOUGLASS CAMPUS			Sq. Feet			Bldg. Ag		ars	
NEW BRUNSWICK County MID	DDLESEX	County Code (7) (State Use Only)	Current U	se (prior if being d	emolished)	: ACADEM	IC		
Name of Monitoring Firm Hired by Bldg ATC ASSOCIATES	g. Owner (8)	ASCM No. 0098		ontractor (9) WOOD ABATE	MENT C	ONSULTA	NTS, INC.		
Street Address 3 TERRI LANE			Street Add	N STREET					
City, State, Zip Code BURLINGTON, NJ 08016	5			R, NJ 07405					
Project Manager for Monitoring Firm BRIAN KEARNY	Telephone 1 609-386	nana and an analysis and a second a second and a second a	<u>Telephone</u> 973-492	- 552-1010-001		License Nur 00840	<u>mber</u>		
Scheduled Start Date (10) 05/17/12	Scheduled (06/21/12	Completion Date (11	1	SHA Monitor		2		,	
Occupancy Status During Abatemer Facility Closed/Vacated During Er Abatement Performed Outside of Describe Other – Describe: 3PM - 5AM	ntire Period of A	batement	20-21 W City, State	ARGARAW RO	DAD				
Scope of Work (Check all that apply)									
	Location Norma		on of Asbestos Conta	☐ Mi ☑ G ☐ No ining Material	ni-Enclosur Glovebag Pron-Exempte Amoun	rocedure / Wed (*) and No	rap & Cut		
St	olely by Maint./C taff? (12) 'ES NO		i.e. thermal systems in other miscell.)	isulation, surfacing	, (Specif or LF)	Remo	ove Repair E	ncap Encl	ose
RESTROOMS	X	TSI - F	PIPE INSULATION	DN .	200 L	F X			
Name of Reg. Waste Hauler See Hauler Below #1 & 2	NJDEP Was	ste Hauler ID#	Cubic Yar	ds of Waste: 25	5 CY	Name of Re G.R.O.W.			
Hauler #1) Greenwood Abatement Co NJDEP # 12561 Hauler #2) Newark Carting, Inc., Ne NJ DEP # 4509		- Butler, NJ 07405			eisposal Da 16/21/201		City, State 100 New F Rd. Morris 19067 215-736-1	Ford Mill sville, Pa	
Completed by (Print or Type) RAYMOND C. PEDALINO	Signature	101	2-	Date May 3	3, 2012		B.		

State of New Jersey - Notification of Asbestos Abatement Check # 2539 (Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

GAC Project # 060-12

	tification	Type		Name of Building Owner RUTGERS, THE S			TV OF				
No X		Type		RUTGERS, THE S	TATE UNI	VED C					
		Tyne									
		Votifica	ation fication						S		
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, =	Cancel			Name of Contact	water and the same	Tele	phone Nu		A Company of the Comp	n de la comme	
						-	معتد مالد بدر (۱۹۵۶)				
			FACILITY IN	FORMATION		-2				-	
	Place (3)			☐ School (K-12)		A Committee					
inty (6)		Count	y Code (7)	Sq. r eet. N/A	FUI FIDUIS.	<u> </u>	g. Age.	00∓ y	ears		
/IIDDLES	SEX			Current Use (prior if bein	g demolished): AC	ADEMIC				
Bldg. Owner	r (8)			Name of Contractor (9)							
28 		0030	4	GREENWOOD ABA	TEMENT C	ONSL	JLTANT	S, INC) .		
				Street Address							
				BUTLER, NJ 07405							
oject Manager for Monitoring Firm PIAN KEARNY 600, 386, 8800											
BRIAN KEARNY 609-386-8800				973-492-0477 00840							
		ompletic	on Date (11)	Name of OSHA Monitor 1 ENVIROVISION, INC.							
Entire Per	riod of Ab	atemer	nt	Street Address 20-21 WARGARAW	ROAD			7-			
				City, State, Zip Code							
				FAIRLAWN, NJ							
Ŋ					Full Contains	ment wi	th Negati	ve Pres	sure		
			☐ Demolition		Glovebag P	rocedu		riahle F	Procedi	ıre	
				bestos Containing Material	Amour						
)				ng, (Specif or LF)	y SF	Remove	Repair I	Encap (Enclose	
	X		VAT & MAST	ГІС	3000	SF	X				
lame of Reg. Waste Hauler NJDEP Waste Hauler ID#					20.01	Norse	of Docist	l rod!	AE"		
See Hauler Below #1 & 2 See Below										II	
		Butler, N	NJ 07405				10 R 19	00 New d. Morri 9067	Ford M sville,		
Completed by (Print or Type) RAYMOND C. PEDALINO SENIOR PROJECT MANAGER					Signature May 2, 2012						
	James Bidg. Owner D16 MIDDLES Bidg. Owner O5 Ment (Check of Section Normal MI Is Location Solely by Staff? (12 YES) NJE Section Normal Newark, N. Title SEN	Junty (6) WIDDLESEX Bldg. Owner (8) D16 Telephone N 609-386- Scheduled C 05/22/12 ment (Check only or g Entire Period of Ab e of Normal Facility H WI IS Location Normall' Solely by Maint./Cu Staff? (12) YES NO NJDEP Waste See Below Consultants, Inc. — Newark, NJ 04509	Junty (6) WIDDLESEX Bldg. Owner (8) O16 Telephone Number 609-386-8800 Scheduled Completic 05/22/12 ment (Check only one) Gentire Period of Abatemer of Normal Facility Hours of Normal Facility Hours of Normal Facility Hours Solely by Maint./Custodial Staff? (12) YES NO NA NDEP Waste Hauler See Below Consultants, Inc. – Butler, Newark, NJ 04509	t is Taking Place (3) ## 8330 Unity (6) MIDDLESEX Bldg. Owner (8) D16 Telephone Number 609-386-8800 Scheduled Completion Date (11) 05/22/12 Ment (Check only one) Gentire Period of Abatement For Normal Facility Hours For Normal Facility Hours MI Staff? (12) YES NO NA NJDEP Waste Hauler ID # See Below Consultants, Inc. – Butler, NJ 07405 Newark, NJ 04509 Title SENIOR PROJECT	HEALTH & SAFET FACILITY INFORMATION	Type of Facility (4) School (K-12) Subchapter 8 (other than K-12) Street NA # of Floors: Street Address 268 MAIN STREET Scheduled Completion Date (11) O5/22/12 Intellegence Number 973-492-0477 Name of OSHA Monitor 1 Street Address 20-21 WARGARAW ROAD City, State, Zip Code FAIRLAWN, NJ Street Address 20-21 WARGARAW ROAD City, State, Zip Code FAIRLAWN, NJ Street Address 20-21 WARGARAW ROAD City, State, Zip Code Solely by Maint./Custodial Staff? (12) YES NO NA Sale Subchapter 8 (other than K-12) Subchapter 9 (other tha	HEALTH & SAFETY FACILITY INFORMATION Tis Taking Place (3) # 8330 Type of Facility (4) School (K-12) Subchapter 8 (other than K-12) Subchapter 8 (othe	HEALTH & SAFETY FACILITY INFORMATION 1s Taking Place (3)	HEALTH & SAFETY	HEALTH & SAFETY FACILITY INFORMATION Tis Taking Place (3) ## 8330 Type of Facility (4) Subchapter 8 (other than K-12) Subchapter 9 (other than K-12) Subchapter 8 (other than K-12) Subchapter 9 (other than K-12) Subchapter 8 (other than K-12) Subchapter 9 (other than K-12) Subchapter 8 (other than K-12) Subchapter 9 (other than K-12) Subchapter 8 (other than K-12) Subchapter 9 (other than K-12) Subchapter 8 (other than K-12) Subchapter 9 (other than K-12) Subchapter 8 (other than K-12) Subchapter 9 (other than K-12) Su	

State of New Jersey - Notification of Asbestos Abatement (Pursuant to N.J.A.C. 8:60-7 and 12:120-7) Cleck# 2541 GAC Project # 060-11 Client Project # Date of Notification (1) Name of Building Owner/Operator (2) RUTGERS, THE STATE UNIVERSITY OF NJ May 3, 2012 Agencies Notified Notification Type Street Address ENVIRONMENTAL HEALTH & SAFETY DEPT. ☑Initial Notification ☐ EPA 27 ROAD 1, BLDG 4086, LIVINGSTON CAMPUS □Amended Notification DCA City, State, Zip Code ■ Emergency (including X DOL PISCATAWAY, NJ 08854 justification) ▼ DEP- No Longer REQUIRED Name of Contact Telephone Number (0) □Cancelled X DOH 2---MICHAEL SMITH, ENV. **HEALTH & SAFETY** FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) **HURTADO HEALTH CENTER, BLDG# 3061** School (K-12) ☐ Subchapter 8 (other than K-12) Street Address Other (i.e. private & commercial buildings, homes, etc.) **COLLEGE AVENUE CAMPUS** # of Floors: 4 Bldg. Age: 60+ years Sq. Feet: N/A County (6) County Code (7) **NEW BRUNSWICK** (State Use Only) MIDDLESEX Current Use (prior if being demolished): ACADEMIC Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Contractor (9) ATC ASSOCIATES 0098 GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address Street Address 3 TERRI LANE **268 MAIN STREET** City, State, Zip Code City State, ZipCode BURLINGTON, NJ 08016 BUTLER, NJ 07405 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number **BRIAN KEARNY** 609-386-8800 973-492-0477 00840 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 05/18/12 05/21/12 ENVIROVISION, INC. Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 20-21 WARGARAW ROAD ☐ Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code Describe Other - Describe: 5PM - 5AM FAIRLAWN, NJ Scope of Work (Check all that apply) ■ Full Containment with Negative Pressure $\square \ge 3 \text{ sf or } \ge 3 \text{ lf}$ □ Renovation ■ Mini-Enclosure X > 160 sf or > 260 ☐ Demolition Glovebag Procedure ★ Non-Exempted (*) and Non-Friable Procedure Location of Asbestos-Containing Is Location Normally Used Description of Asbestos Containing Material Amount Abatement Type Solely by Maint./Custodial Material (ACM) in Facility (13) (ACM) (i.e. thermal systems insulation, surfacing, (Specify SF Remove Repair Encap Enclose Staff? (12) VAT, or other miscell.) or LF) YES NO NA Room 104 X VAT 800 SF NJDEP Waste Hauler ID# Name of Reg. Waste Hauler 10 CY Name of Registered Landfill Cubic Yards of Waste: G.R.O.W.S. North Landfill See Hauler Below #1 & 2 See Below Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 Disposal Date City, State 100 New Ford Mill NJDEP # 12561 05/21/2012 Rd. Morrisville, Pa

RAYMOND C. PEDALINO SENIOR PROJECT May 3, 2012 MANAGER

Signature

19067

215-736-1700

Hauler #2) Newark Carting, Inc., Newark, NJ 04509

NJ DEP # 4509

Completed by (Print or Type)

State of New Jersey - Notification of Asbestos Abatement

Check # 2542

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

GAC Project # 060-11 Client Project

Name of Building Owner/Operator (2) Date of Notification (1) RUTGERS, THE STATE UNIVERSITY OF NJ May 3, 2012 Agencies Notified Notification Type Street Address ENVIRONMENTAL HEALTH & SAFETY DEPT ☑Initial Notification ☐ EPA ■Amended Notification 27 ROAD 1, BLDG 4086, LIVINGSTON CAMPUS □DCA □ Emergency (including City, State, Zip Code X DOL PISCATAWAY, NJ 08854 justification) ☑ DEP- No Longer REQUIRED Name of Contact Telephone Number □Cancelled X DOH MICHAEL SMITH, ENV. HEALTH & SAFETY FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) a stableton Man QUAD II, HOUSE 29, BLDG# 4142 ☐ School (K-12) ☐ Subchapter 8 (other than K-12) Street Address Other (i.e. private & commercial buildings, homes, etc.) LIVINGSTON CAMPUS Sq. Feet: N/A # of Floors: 4 Bldg. Age: 60+ years City (5) County (6) County Code (7) **MIDDLESEX PISCATAWAY** (State Use Only) Current Use (prior if being demolished): ACADEMIC Name of Monitoring Firm Hired by Bldg. Owner (8) Name of Contractor (9) ASCM No. ATC ASSOCIATES 0098 GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address Street Address 3 TERRI LANE 268 MAIN STREET City, State, Zip Code City State, ZipCode BUTLER, NJ 07405 BURLINGTON, NJ 08016 Project Manager for Monitoring Firm Telephone Number License Number Telephone Number **BRIAN KEARNY** 609-386-8800 00840 973-492-0477 Name of OSHA Monitor Scheduled Start Date (10) Scheduled Completion Date (11) 05/23/12 05/29/12 ENVIROVISION, INC. Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 20-21 WARGARAW ROAD □ Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code Describe XOther - Describe: 3PM - 5AM FAIRLAWN, NJ Scope of Work (Check all that apply) ■ Full Containment with Negative Pressure □ > 3 sf or > 3 lf ▼ Renovation ■ Mini-Enclosure X ≥ 160 sf or > 260 ■ Demolition Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Location of Asbestos-Containing Is Location Normally Used Description of Asbestos Containing Material Amount Abatement Type Solely by Maint./Custodial (Specify SF Material (ACM) in Facility (13) (ACM) (i.e. thermal systems insulation, surfacing, Remove Repair Encap Enclose Staff? (12) VAT, or other miscell.) or LF) NO YES B-29-3 X VAT 500 SF X Name of Reg. Waste Hauler NJDEP Waste Hauler ID # Name of Registered Landfill 8 CY Cubic Yards of Waste: See Hauler Below #1 & 2 G.R.O.W.S. North Landfill See Below Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 Disposal Date City, State 100 New Ford Mill NJDEP # 12561 05/29/2012 Hauler #2) Newark Carting, Inc., Newark, NJ 04509 Rd. Morrisville, Pa 19067 NJ DEP # 4509 215-736-1700 Completed by (Print or Type) Signature Date RAYMOND C. PEDALINO SENIOR PROJECT May 3, 2012 MANAGER

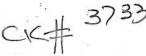
State of New Jersey - Notification of Asbestos Abatement

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

GAC Project # 060-12			(1 415)	uant to N.J.A.C	2. 0.00-7 and 12.120-7)		Che	ek 7	# 2	254	13		
Client Project # Date of Notification (1) May 3, 20	012			Ġ.	Name of Building Owner/			SITY O	F NJ	Oliver Commen	1		
Agencies Notified ☐ EPA ☐DCA ☑ DOL ☑ DEP- No Longer REQUIRE ☑ DOH		Notification ⊠Initial N □Amendo □ Emerg justific □Cancel	Notifica ed Notifica gency (i cation)	fication	Street Address ENVIRONMENTAL 27 ROAD 1, BLDG City, State, Zip Code PISCATAWAY, NJ Name of Contact MICHAEL SMITH, E HEALTH & SAFET	4086, LI 08854	VINGS	FON C	AMP	US	American Company of the Company of t		
				FACILITY IN	FORMATION (1	- KSBE	370S 60	1510		- Commence		
Name of Facility Where Abateme SILVERS APTS., BLDG	AND CONTRACTOR STATE OF THE PARTY.				Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (other th ☒ Other (i.e. private & co			LICENS	ietscau · · ·				
BUSCH CAMPUS						of Floors				years			
City (5) PISCATAWAY	ounty (6)	LESEX		/ Code (7) Use Only)	Current Use (prior if being	g demolish	ed): AC	ADEMIC	:				
Name of Monitoring Firm Hired by ATC ASSOCIATES	/ Bldg. C	Owner (8)	ASCM 0098		Name of Contractor (9) GREENWOOD ABA Street Address	TEMENT	CONSI	JLTAN	TS, II	IC.			
3 TERRI LANE	3 TERRI LANE City, State, Zip Code					39	-6						
BURLINGTON, NJ 08016					City State, ZipCode BUTLER, NJ 07405								
Project Manager for Monitoring Firm BRIAN KEARNY Telephone Number 609-386-8800					<u>Telephone Number</u> 973-492-0477 00840								
Scheduled Start Date (10) 05/15/12		Scheduled 0 05/21/12		on Date (11)	Name of OSHA Monitor 1 ENVIROVISION, INC.	3 .	2						
Occupancy Status During Abate Facility Closed/Vacated During Abatement Performed Outsid Describe Other – Describe: 3PM - 5A	ng Entir de of No	e Period of A	batemer	nt	Street Address 20-21 WARGARAW City, State, Zip Code FAIRLAWN, NJ	ROAD							
Scope of Work (Check all that ap	oly)			16-17-yy 18-110-110-110-110-110-110-110-110-110-1									
□≥ 3 sf or ≥ 3 lf ☑ ≥ 160 sf or ≥ 26	0			☑Renovation ☐ Demolition		Full Conta Mini-Enclo Glovebag Non-Exen	sure g Procedu	ıre			dure		
Location of Asbestos-Containing Material (ACM) in Facility (13)	Solel	cation Norma ly by Maint./C ? (12) NO			sbestos Containing Material mal systems insulation, surfaci scell.)		ount ecify SF F)	S-2000	ment Ty	r <u>pe</u> ir Encap	Enclose		
Apts. 199-220		X		VAT	1	198	30 SF	X	T				
			-						-				
Name of Reg. Waste Hauler		NJDEP Was	te Haule	r ID#	Cubic Yards of Waste:	8 CY	Name	e of Regi	stered l	andfill	L.,		
See Hauler Below #1 & 2		See Belov	v			4- 4	G.R.	.O.W.S	Nort	Land	fill		
Hauler #1) Greenwood Abatement Consultants, Inc. – Butler, NJ 07405 NJDEP # 12561 Hauler #2) Newark Carting, Inc., Newark, NJ 04509 NJ DEP # 4509				NJ 07405		Disposal 05/21/2			Rd. Md 19067	ate w Ford orrisville 6-1700			
Completed by (Print or Type) RAYMOND C. PEDALINO Title SENIOR PROJECT MANAGER				т	Signature R AC	12	Date	May 3,	flay 3, 2012				

CK# 3735

Date of Notification (1)				Name	of Buildin	g Owner/Operato	r (2)	and the second second	1,250,000	-	7	
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Agency Notified	Type Notification			oncer	With 622	- 1	The state of the s	REIV	15		11	
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D DEP EI DOL	Q Amended Amendment #				state, Zip		WHICH THE	743477	012	1	71	1
EZ DOH	D Emergency (includ	ing	ŀ		of Contac		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Telephone Num	ber	1		-
☑ DOH	justification) Cancellation		- 1			DNE	111 111	Respiratio Hair		J.	4	1
		4-12-14				ORMATION		ASBESTOS CUN				- سـ
Name of Facility Where	Abatement is Taking Pla	age (3)		1 /10		Old Prior	Type of Facility	(4) LICENSIN	G .	L-Challenger	-	_
- 6	ECON, HUR	1200	==				' \	CONTRACTOR DESCRIPTION OF THE PERSON OF THE				
Street Address	114003	1100	<u> </u>	<u>. </u>			☐ School (K-12	(Other than K-12)				
7.0021	WAGARAW	0	Λ	58	***			ivate & commercial	building	s,		
City (5) .	or It Copyra t				·		homes, etc.	# of Floors	Bldg. A	ge		_
FAMEL	MUN						10000	2	95	4	R	5
County (6)	700.			Count	v Code (7) (STATE USE	1 -0	rior if being demolis				_
BERG	SN S		İ	ONLY				tse				
	m Hired by Building Own	er .	ASCN	No.		Name of Abater	nent Contractor (
(8)					* .	Best Re	emoval In	ı c				
Street Address	***************************************		-53	٠,		Street Address				-		
و وا						450 Sout	h River	St	•			
City, State, Zip Code						City, State, Zip (Code				``	
							sack , N.	J. 07601			_	
Project Manager for Mo	onitoring Firm	Te	lepho	ne No.		Telephone No.		License No.				
						201-329-		0038	38			
Start Date (10) 5/4//2	Scheduled C		on Da		٠	Name of OSHA		tai Camer				
	ing Abatement (Check on		>/ /			Street Address	ivironmer	tal Servi	ces			
O E				581		280 Huy1	er St					
Abatement Performs	ted During Entire Period ed Outside of Normal Fac	ility Ho	emení urs	t .		City, State, Zip C						
-2 Other - Describe: .	7AM TO SPH	1		70		South H	lackensac	k , N.J. (7606)		
Scope of Work (Check	all that apply)				1.	D 5.4	~	No modition Description				
EE23stor≥3F	€			Ren	ovation		Containment wan Enclosure	Negative Pressure	*			
Q ≥ 160 sf or ≥ 260 lf				O Den	notition		ebag Procedure	Non-Friable Proce	dura			
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Locat Asbestos-Contain	tion of ing Material (ACM)		d Sole		Ashor	Description of the Stos Containing Ma		Amount			m	_
TO BE	ABATED		usted			, thermal systems	insulation,	(Specify	26	3	100	Enclosure
	acility 13)		(12)			surfacing, VAT other miscelland		SF or LF)	New York		Encapsulate	Inso
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211		Yes	No	N/A	<u> </u>	· · · · · · · · · · · · · · · · · · ·		4.0	_	+	\vdash	╀
BM635				X	THE	MAR SYSTE	SHS	1354	Fy	4	-	┞
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		ليها				·	T 3:				L	L
Name of Registered W		1000000	DEP V No.	Maste H	lauler	Cubic Yards of Waste	Name of Regis	ered Landhii	12			
Best Remov	al Inc	1 2 2 2 2 2	71	09	2,	207	Minerva	Enterpri	sės	In	С	
City, State						Disposal Date	City, State					
Hackensack	, N.J.					5/15/12	Waynesb	urg , OH				
Completed by	Title	+1				Signature			Date	1.	_	
J.Maiorano				9			عماماه،	3	5/11	//	6	
ASB-41				n for se	bestos lic	ansure byomnthd	arthanos			1		



Date of Notification (1) 5 Z / 12		Nam	of Buildin	ng Owner/Operato	(2) GRAPE	wine	kestirenogerige er	n	anteres
Agency Notified Type Notific	ation						DD F3	E-	Table 1
	20		Zas	GRAF	2410 3	后,从人信	WE	1	11
DEP Critical DAmended	1	City.	State, Zip	Code .	TIEST				11
Amendm Amendm	ent#	1	1=W	MILFOR	o lut	NA 0764	6		1
	cy (including	Name	of Conta	d	9 /11 13	Telephone Numb	sec 2		1
DCA justificati		111	1 -	EA PENT	NE I	Toophone running	PO 12. 13	_1	1
					77 -			-	1
Name of Francisco		FAC	ALITY MI	FORMATION	£	ASBESTOS CONTR	201 8		1
Name of Facility Where Abatement is			•		Type of Facility	(4) LICENSING	-0		ğ
UR. GRAPE	とよるの				School (K-12	Mariana maria	2021	CHANGE OF	i.d.
Street Address						(Other than K-12)			1.0
235 GRAP	HIC B	CUD			homes, etc.)	vate & commercial	buildings,	1.00	4024 20
City (5)			·		Square Feet		Bldg. Age		
NEW MILFORG	\				2000	2	193	35	
County (6)		I Cours	v Code (7) (STATE USE		ior if being demolis			
BELGEN		ONLY		MOINIE GOE		SIDEN CE			
Name of Monitoring Firm Hired by Buil	fing Owner A	SCM No.		Name of Abote	nent Contractor (9				
(8)	and Other 1	SOM NO.		1.					
Street Address	L				emoval In	ic			
Street Address		*.·		Street Address			5/2		
11	-				h River	St	···		
City, State, Zip Code				City, State, Zip (1	
	• •			Hackens	sack , N.	J. 07601		`	(6
Project Manager for Monitoring Firm	Tele	phone No.		Telephone No.		License No.			
				201-329-	7444 .	0038	88		
Start Date (10) Sch	eduled Completion			Name of OSHA					
5/24/12	5/25	5/12		Omega En	vironmen	tal Servi	ces		
Occupancy Status During Abatement (Check only one)			Street Address			***************************************		
☐ Facility Closed/Vacated During Entir	e Period of Ahater	nent		280 Huy1	er St				
Abatement Performed Outside of No	rmal Facility Hours	3		City, State, Zip C					
Other - Describe: 70M TO	5 PM			South H	ackensac	k , N.J. 0	7606		
Scope of Work (Check all that apply)									-
₽£3sfor≥3ff		BIRO	novation		Containment with I Enclosure	Negative Pressure			
□ ≥ 160 sf or ≥ 260 lf			notition		ebag Procedure	4			
				□ Non-	Exempted (*) and	Non-Friable Proces			
	7/8/1/	cation		**	1		Ab	ateîn Type	
. Location of	Head	mally Solely by		Description of				7	T
Asbestos-Containing Material (AC		enance/		stos Containing Ma	eterial (ACM)	Amount	_	100	
TO BE ABATED	7. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2.	todial	(i.e.	, thermal systems		(Specify	Removal	Repair	Enclosure
(13)		12)		surfacing, VAT other miscelland		SF or LF)	YOU		neo
		121	1				=	ate	. 6
	Yes	No N/A							
BASEMENT			HER	YAL INSULA	TION	75 LF	×		T
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Name of Registered Waste Hauler	- 1 1	P Waste H	1	Saturation of				_	\perp
The property of the contract o	ID No		rauser	Cubic Yards of Waste	Name of Regist	ered Landilli			
Best Removal Inc		109	2	11/207	Minerwa	Enterpri	gag Ti	nc	I
City, State				Disposal Date	City. State	PHECTALL	263 1	ii C	\dashv
Hackensack , N.J.			7,2	5/25/12		urg , OH			1
Completed by Title				Signature 0	Maynesbi		ate .	_	\dashv
	Patinata			1 ~ ()	10000		5/2/	10	
J. Halulano	Estimator		bestos lic		- shoul		0/-/	10	

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P1	110	MISS F	- (0)	m
33.0	70.5	2023		5.5

Date of Notification (1) 05/03/12 Ck# 2057 \$200			Name of Janet	f Building Owner Pelzer	r/Operato	r (2)	月				
Agencies Notified Type Notification			Street A 365 Ui	ddress nion Avenue		1 //	YAM I	1	2012	.	1
DEP Amended DOL Amendmen		_ [ite, Zip Code n Plains, New	Jersey	07076	ASDE	STOS CO	NTROL	8	
DOH Justification Cancellation			Janet			· 1	Tolonhone	Number	sir		
Name of Facility Where Abatement is Takin Residence	ng Place (3)		FACI	LITY INFORMA	TION	Type of Facility					
Street Address 365 Union Avenue			-				r 8 (Other than l private & comm		ildings	, hom	es,
City (5) Scotch Plains, New Jersey 07076						Square Feet 10,000	# of Floors		Bldg 55+	Age	
County (6) Union	skilit =		County (Code (7) USE ONLY)		Current Use (Pri Home	or if being demo	olished)			
Name of Monitoring Firm Hired by Building	Owner (8)		ASCM	1 No.		of Abatement Con Corporation	ntractor (9)				
Street Address					606	Address McBride Aveni	ue				
City, State, Zip Code	**************************************				Woo	State, Zip Code odland Park, Ne				,	
Project Manager for Monitoring Firm		Telephor		973-	horle No. 225-8400	Licens 0110					
Start Date (10) 05/14/12	Scheduled 05/15/12		ipletion i	Jate (11)	J&S	of OSHA Monitor Environmenta					
Occupancy Status During Abatement (Chec Facility Closed/Vacated During Entire	Period of Ab	atem	ent		2333	Address Route 22 We	st				
Abatement Performed Outside of Norr Other – Describe: 9AM Start	nal Facility H	ours				State, Zip Code on, New Jersey	07083				
Scope of Work (Check All That Apply) ≥3 sf or ≥3 if ≥160 sf or ≥260 if	- Control	nova				Mini-Enclosure Glovebag Pro-	71.00.000.00			re	
Location of	Is Lo	rmal	y		on a sinting				Abat	ement /pe	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)		enar	nce/	Asbestos Co (i.e. therm surf		Material (ACM) s insulation, T, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
Basement					TSI		150 LF	Х			
								-	-	-	
Name of Registered Waste Hauler		N	JDEP W	aste Cubi	c Yards	Name of	Registered Lan	dfill			
Lilich Corporation	•	10000	auler ID I 3724	No. of W	aste		W.S Landfill				
City, State Woodland Park, New Jersey 07424					osal Date 6/12		e ille, Pennsyl	vania			
Completed by Tatiana Kalenikova		Signature (a.T.	acarla	lutan	Date 05/03/	12					

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

Emergency Notification check #: 4711

Date of Notification	. //>		IINa	me o	Bui	ldín	a Own	er/Operato	01	r (2)-	The State of the S	-10 PM	ower.C	19211	100,000 pm
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	Type Notifi		11	acke			chool	District	-	Toll	3 C E	11 1	15	#	111
· []EPA	.750 1.0004									(())					
	[X]Initia Notifi	1					Aven		_	1151		-7-	7012	-111	IJ
[]DEP			11					•		. 111 13	MAY	1 1	_014	1	
(X) DOL	(}Amende Notifi	cation		acke					_	UTele	phone Num	er	0.01		
[X] DOH	[]Cancel	lation	11								ADTETA	S COM!	RUL O		
[]DCA			IM	like S						i i		and the latest live and th	Section 1		
							NFORM	MOITA		Lancaria de la constante de la	et a label a facilità de	No. Providence	, 4.46.		
Name of Facility Wh	ere Abateme	nt is Ta	aking	, Pla	ce (3)				Type of Facili					
Hatchery Hill Element	ary School									[]Subcha	pter 8 (0	ther	than	K-12	2)
Street Address									1	cial l	(i.e., pr uildings,	home	s. et	c.)	
398 5th Avenue										Square Feet	# of Floo	rs B	ldg.	Age	
City (5)		Count	y (6)	· ·	Sirk Comme			ode (7)		40,000 Current Use ()	rior if b	eing	50	White and the same	<u>-d)</u>
Hackettstown, NJ 078	240	Warre	n			1,3,	INIE U	JE ORLI,	11	School		9			,
Name of Monitoring	Firm Hired			ASC	M No		Name	of Abate	en	ment Contractor	(9)	-			
Owner (8)							_{E0}	r Strong B	2	uilders, Inc.					
Westchester Environm	mental, Inc.			1000	127		Stre	et Addres	ss	s .					
207 North Wolnut Str	oot						180	Sargeant	Δ	Avenue					
307 North Walnut Stro							180 Sargeant Avenue								
West Chester, PA 19	380	Firm	Tele	nhone	Num	ber	Clift	on, NJ 070	0	13-1935 Ser	Lic	ense	Numbe	r	
			431-7				- -614-0377			008	107				
Matt Abraham Scheduled Start Dat	hed.Com				(11)		of OSHA		Monitor		<u></u>			-	
0 4 / 2 8 / 1 1 Day / Day / Docupancy Status Du	Year	0 4 / .	2 9	1/12	Year	<u> </u>		r Strong B		uilders, Inc.					
[X] Facility Close of Abatement [] Abatement Perf	d/Vacated D	uring E	ntir	e Per	iod		180	Sargeant	: <i>P</i>	Avenue					
Hours - Descri							Cliff	on, NJ 070	· ^	112					
Scope of Work (Chec	k all that	apply)			•		Tom		-						
[]Demoliti [X]>3 sf or []>160 sf	on >3 1f		Ţ]Renc	vati	on		[]Mini	i- ve	Containment w -Enclosure ebag Procedure Friable Proced		ve Pr	essu	:e	
			T.,	Is	. 1				•			Aba	teme	it T	ype E
Location of No. Asbestos-Containing Material (ACM) Some ABATED by The Facility terms (13)					Location Normally Used Solely by Main-			Description of the control of the co	ta Al	aining CM)	Amount (Specify SF or LF)	R E M O V A L	R E P A I R	NCAPSUL	NCI. OSURE
Class Room #C111			ies	No		Clea	n-up h	ehind the	ı	univent	10 SF	1	X	·	-
Class Hooli #CTTT			-			Oloui	- up L				-	+	-		-
			-									+-	-	-	├-
			-									-	-	-	-
Name of Pogistared	Uanta Hanle		1 1 1 1	JDEP	Wast		Cubic	Yards	21010	Name of Regis	tered Land	FILL		L.,	<u></u>
Name of Registered	maste dante			auler			of Wa			Manual Of Megis	June				
Four Strong Builders	, Inc.		1	2609					_	G.R.O.W.S., In	ic.				
City. State	1000						nispo	osal Date	1	City. State					
Clifton, NJ							- 1			Tullytown, PA					
Completed By (Print or Type) Title					Signature	e	Id	- 15	D	ate					
Bilyana Kulakovska		Office A	dmir	nistra	tor		.,	BL	1	21		5	/2/12		
ASB-41 JUN 95															

Ch#1234

												0 111	10	1)	,	and.
Date of Notification (1) 5-4-2012	Name of Building Owner/Operator (2) Affiliated Management																
Agencies Notified	Type Notification		-		Address			10		and the same of	THE PROPERTY OF	MINITED TO		ACT - 1024	in Olycod		
Agencies reduied						ivingstor	α Δνα	Ì	179.10	Sell C	0	TE N	M	E	P. P.	16	2
EPA	× Initial						I Ave.	•	15	JE	16	B 11	M	(ha	Ш	111	-17
DEP X DOL	Amended	. 44			ate, Zip C		•	å	111		3	and the second distance of the second	Name of Street, or other parties.		W		1
IXI DOL	Amendmen Emergency		- 1			J 07039	9	jt.	11 15	31				_	11	111	1
ĭ DOH	justification			Name o	of Contac	t		9	-111	111	ATE	ephone	Numb	ar.	L		
☐ DCA	Cancellation	n .		Tim		122		1	11	ПП	1011				1		
Name of Facility Where	Abstament in Taki	Dl (2)		FAC	ILITY IN	FORMATI	ON	1 = 1					Aurini	-2-	·		
	Abatement is Takii	ng Place (3)						Туре	e of F	acility (47 ASB	ESTOS C	GMUMOI	_ C2			1
Apartment Bldg									Scho	ool (K-1	2)	LICEN	2111.0		15-0-00	1000	and .
Street Address												er than					ì
704 Chestnut Stre	et									r (i.e. p		& comm	ercial b	uild	ings,	hom	ies,
City (5)									are Fe		-	f Floors		Ble	dg. A	Age	
Teaneck								200		-	2				0+	·90	
County (6)			1	County	Code (7)				to the second	co (Dri		ing demo	oliobod				
Bergen					USE ONL							ing dem	olistieu	,			
Name of Monitoring Firm	m Hirad by Ruilding	Owner (8)		ASC	4 No		Apartment Bldg. Name of Abatement Contractor (9)										
n/a	in timed by building	Owner (6)		n/a	VI INO.			ne of Abatement Contractor (9) Idar Contracting, LLC									
	+			II/a				-		cting,	LLC	1 1					
Street Address n/a								Street Address 22 Troy Lane									
								-									
City, State, Zip Code							City, State, Zip Code										
n/a							Linc	oln P	ark,	NJ 07	035						
Project Manager for Mo	nitoring Firm	T	Telepho	ne No.		Teleph	none N	lo.	50520000		Licens	e No.					
n/a							973-	706-	7950)		0108	8				
Start Date (10)	Cor	mpletion	Date (11)		Name	of OSI	НА М	onitor						-			
5-14-2012							Jada	ar Coi	ntrad	cting,	LLC						
Occupancy Status Durin	ng Abatement (Che	k Only One)				Street			<u> </u>			-				
☐ Facility Closed \\ /ac	cated During Entire	Dariad of Al				1	22 T	roy L	ane								
Abatement Perform	ned Outside of Norr	nal Facility I	lour	nem s		H	City, S	00-0 Consu		de	II See						
Other – Describe:										NJ 07	702E						
Scope of Work (Check A	All That Apply)			-200			LITTO	Onri	aik,	143 07	033					-	
	an inderapity)						la.	3									
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			nova				ļ^	Ful	II Con	itainme	nt with	Negativ	e Pres	sure			
		□ ре	molit	lion			Mini-Enclosure Glovebag Procedure										
												Non-Fr	iable P	roce	dure	•	
		ls L	ocati	ion										Α	bate	ment	
Location	n of	0.000	rmal	200		Dog	cription	of		- 1					Тур	oe .	
Asbestos-Containing		Used Main			Asbes	stos Conta	ining M	laterial	(ACI	(N	A	mount				m	
TO BE AB		Custo			(i.e.	. thermal s	systems	insula	ation,			pecify	7	2	$_{\rm Z}$	nc	트
In Faci (13)			(12)			other mi	ing, VA				SF	or LF)	Kemova		Repair	sde	clos
(10)		-		т		ouic: III	iscollari	cous		-			á		=	Encapsulate	Enclosure
		Yes	No	N/A												Ф	
Basem	ent		Asbes				Pipe Ir	nsulat	tion		10	0 LF	1	/			
			-	Asbestos Pip				100 21					+	-	-		
		+												-	_		
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Name of Registered Was	ste Hauler			JDEP W		Cubic Y			Nan	ne of R	egister	ed Land	Ifill				
ladar Contracting 11 C				auler ID I 033137		of Wast	е		GF	ROWS	S Lan	dfill					
City, State						ANDRES	osal Date City, State						_				
Lincoln Park, NJ 07035				ranga 18	TB	ii Date		220000		lo D	A 1906	7					
Completed by Title						(mak/		IVIC	JIISVII	7							
			on.			Sig	nature)		4		100	Date	040	,		
Lillie Lazarevich Secretary					- 1	X	.1	len	In	1	_		5-4-2	U12	4		

Chk#1008

			ALC: NO.	C. Carlos			
Date of Notification (1) 4 20 12	a contract	Name of Buildin	CONST THE	(2)	班哪屋 10	MEN	RA
Agencies Notified Type Notification		Street Artriness		北国的世		11	1
DEP · Amended Amendment#		City, State, Zip	Code	POLIVIAN	7 2012	+	
DOH Emergency (inch	uding	NEWA Name of Conta	ct .	T CHY I MAY	Telephone Number	- \-	
DCA Cancellation		Kr I	EKEIRA!	TISBE!	THE THE THE		
Name of Facility Where Abatement is Taking I	Place (3)	racello e da	FORMATEON	Type of Facility			
Street Address					8 (Other than K-12)		
595-597 HONROE	AUG			homes, etc.	rivate & commercia) # of Floors		
EZIZABETH				Square Feet 5,000		Bldg. /	
County (6) UNPON		USE OMLY)	(7) (STATE		for if being demolish	ned)	
Name of Monitoring Firm Hired by Building Ox (8)	ner	ASCHI No.	Name of Abatem	nent Contractor (9)		
Street Address			Street Address	214			
City, State, Zip Code			City, State, Zip C	ode OF WD	08857		
Project Manager for Monitoring Firm	Tel	ephone No.	Telephone No.	8x7500	License No.	<u></u>	
Start Date (10) Schedu	ed Consplic	ation Date (11)	Name of OSHA	Monitor \	1 .0000		
	13011	<u>٠ . </u>	NOVATE	th INC	. : ' 		
Occupancy Status During Abatement (Check Dispatitly Closed/Vacated During Entire Period	od of Abets		Street Address				
Abatement Performed Outside of Normal F Other - Describe:	actity Hou		City. State. Zp C	1-1	- FESSO.		
Scope of Work (Check all that apply)				ntzinnent with Ne	gative Pressure		
	☐ Renova ☐ DemoSt	tion on	Mari-En	ag Procedure	on-Friable Procedur	e e	
	Is Locati Normal		- A	-		Abat	ement ype
Location of Asbestos-Containing Material (ACM)	Used Solo	ely by noe/ Asbe	Description o stos Containing Ma	terial (ACM)	Amount (Specify		m 1
TO BE ABATED IN Facely	Custodi Staff? (12)		thermal systems surfacing, VAT other miscellane	, or	SF or LF)	Removal	Encapsulate
(13)	Yes No	N/A	COM CONTRACTOR			el ,	1
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FXIERIOR	_	X TO	AUSITE_		500 5/F	X	++
	-						
Name of Registered Waste Haufer (NCUATEO) NC		NUDEP Waste Hauter D No.	Outric Yards of Waste	0 0	istered Landfill		
Cilve States	3000	1	Disposal Date	City, State		<i>-</i> ,	
	1885		Signature	7 11./	Date	70/K	7
CARRY AIGIDA TITLE	()FSIC	DEN	1 400	2000 Comily	<u>- </u>	100	

CK# 2211

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

Date of Notification (1) 5/2/2012	Name of Building Owner/Operator (2) Karin Weinberg													
Agencies Notified	Type Notification			Street A 7 Len	ox Place				M	4	ONTR	JL &	1	1
EPA DEP DOL	Amended Amendment				ate, Zip Co wood, N		40	1/	1	SBESTOS LIC	ENSING			
DOH DCA	Emergency justification) Cancellation			Name o Ben E	f Contact yler			L	Tal	enhone N	Number			
Name of Facility Where A	Abatement is Takir	g Place (3)		FAC	ILITY INFO	ORMAT		Type of Facility.		-				
Street Address 7 Lenox Place			-		-			School (K- Subchapte Other (i.e.	r 8 (Oth			ildings	, hom	es,
City (5) Maplewood, NJ 07	040	_						etc.) Square Feet 2,000	# 0	f Floors		Bldg.	Age	
County (6) Essex					Code (7) USE ONLY)			Current Use (Pr Residence	ior if bei	ng demo	lished)			
Name of Monitoring Firm Omega Environmen		Owner (8)		ASC	И No.			of Abatement Co pervices Corpo						
Street Address 280 Huyler Street							Street A 426-6	ddress 9th Street						
City, State, Zip Code Hackensack, NJ	7							ity, State, Zip Code Guttenberg, NJ 07093						
Project Manager for Mon Alberto Fajardo	itoring Firm			Telepho	ne No.		17000 18000	Telephone No. License No. 01074						
Start Date (10) 5/12/12		d Com	pletion	Date (11)			f OSHA Monitor ervices Corpo							
Occupancy Status During				ent			Street A 426-6	ddress 9th Street	1870					
Abatement Perform Other – Describe:	ed Outside of Norr	nal Facility	Hours		*		0.000	ate, Zip Code nberg, NJ 07	093					
Scope of Work (Check A	II That Apply)	_												
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Parameter 1	enova emolit				Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure							
			_ocati						77.50			Abai	emen	i .
Locatior Asbestos-Containing <u>TO BE AB.</u> In Facil (13)	ormali I Sole ntenar odial S (12)	y by nce/ staff?	Asbesi (i.e.	tos Cont thermal surfa	scription of taining Ma systems cing, VAT niscellane	iterial (ACM) insulation, , or	(5	mount Specify or LF)	Removal	Repair	Encapsulate	Enclosure		
Entire Bas	N/A x	Wet Wi	pe,He	ppa Vac	uum cleanu		I SF	х						
Name of Registered Was	ste Hauler		300	JDEP W			Yards	Name of	Registe	red Land	fill			
Freehold Carting 1593					Hauler ID No. of Waste 15939 tbd			waste Management						
City, State PO Box 5010						Disposal Date City, State tbd Tullytown landfill								
Completed by Gina Salvador Title Office Mana					ce Manager Signature Queas - 5/2/2012									

Print Form

Date of Notification (1				I N	ame of Bu	ilding Owner/opera	tor (2)		Spirition 10	snyn .		-
Agencies Notified	Type Notifica	ition	-	S	treet Addre	oy Board of Edu	cation	HAE	GE	= n	W	San San
DEP	Initial Amended			1		cks Street				C AMERICAN		
☑ DOL	Amendme	nt#			ity, State, Z							
DOH DCA	Emergence justification	cy (includ	ding	P	ert Ambo	y, NJ 08861			AY	7	20	12
□ DCA	Cancellation				ame of Cor ario Cofin			Te ·				
									TIL STREET		ITDAI	0
Name of Facility When	a Abatamant in T	-1			FACILITY	INFORMATION		1	LIC	FNSII	(G	-
Anthony V. Ceres	Elementary Sc	aking Pla hool	ace (3)		50	Type of Fa	cility (4)	e ba			
Street Address	Be	11001								harry 194	The same of	e Capitalier.
445 State Street							Other (i	oter 8 (Other than I e., private & comm	(-12)			
City (5)							homes,	etc.)	erciai	uildir	igs,	
Pert Amboy, NJ 08	861						Square Fee	t # of Floors		Bldg	. Age	
County (6)							-					
Middlesex County				C	ounty Code SE ONLY	e (7) (STATE	Current Use	(Prior If being der	nolishe	d)		
Name of Monitoring Fire	m Hired by Ruildin	an Own	r	-		Til						
(8) AHERA Consul	tants. Inc.	ig Owne	11	ASC	M No.	Name of Abate	ment Contracto	or (9)			-	
Street Address	turito, mo					Nick Restora						
PO Box 385						Street Address				-		
City, State, Zip Code						72 Brookside						
Oceanville, NJ 0823	31					City, State, Zip	Code				_	
Project Manager for Mo			T	ا ما ما ما	-N-	Randolph, NJ	07869					
John Smoyer	morning t min			elephor	e No. 2-1833	Telephone No.		License No.				
Start Date (10)	I Sal	andulad.				973 933-2550		001133				
05/18/2012	0.	5/20/20	Comp	letion L	Date (11)	Name of OSHA						
Occupancy Status Durin	ng Ahatement (Ch	0/20/20	112			J&S Environn	nental					
Facility Closed/Vacat	ed During Entire	Deried o	y one,) 		Street Address						
Abatement Performed	Outside of Norm	nal Facili	ity Ho	ement		2333 Rt 22 W						
Other - Describe: F	riday 4pm-11.3	30pm	, 110	uis		City, State, Zip C						
Scope of Work (Check a	I that apply)					Union, NJ 070	083					
2000						Eull Cor	stainment with	Negative Pressure				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enovat			Mini-End	closure	vegative Pressure				
		\boxtimes De	emoliti	on		Gloveba	g Procedure					
		Is	Locati	on	T	L J NOII-EXE	empted (*) and	Non-Friable Proced	ure			
Location o	f	N	ormall Sole	y				100 0			ment	
Asbestos -Containing M	aterial (ACM)	Mair	ntenar	nce/	Ashes	Description of tos Containing Mate	rial (AOAA)		-	7	pe	
TO BE ABATI	ED	C	ustodi	al	(i.e.,	thermal systems in	sulation	Amount (Specify			m	_
(13)		1 '	Staff? (12)			surfacing, VAT,	or	SF or LF)	Reg	Re	cap	no.
			(/	Т	1	other miscellaneo	us)		Removal	Repair	Encapsulate	Enclosure
D. 11 =		Yes	No	N/A					<u> a</u>		te	ō
Boiler Room			X		Therma	l System Insulat	ion	25 SF	+			_
								23 31	_ X			
		+-+										
												\neg
Name of Registered Waste	a Hauler	$\perp \perp$	-	15-							+	\dashv
Nick Restoration LLC				JDEP \		Cubic Yards	Name of Reg	istered Landfill				-
			_ 8	auler 15 03378	32	of Waste	G.R.O.W.S					
City, State						Disposal Date	City, State		_			=
Randolph, NJ 07869						TBD Tullytown, PA						
Completed By Ivira Mrda Ivira Mrda Ivira Mrda Ivira Mrda				Signature / Data						_		
i resident						Elvin	2 Mido		2/2012	,		1
-41			100				7.00	03/02	L/ ZU12			

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

	7089
CHECK &	ROOM

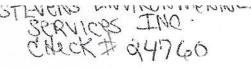
		-			National Advances	-ADAUGUST-		Carle Children et al.			PROV		A CHARLES	Sile.
Date of Notification (1) 5-1-12	5-1-12						Name of Building Owner/Operator (2) NORALES Street Address						Serv	ces
Agencies Notified Type Notification ☐ EPA ☐ Initial		1	17	1 En	ate s	3tra	et	STIPLE OF THE PERSON NAMED IN COLUMN TO PERS	Date:	4/30/	(natura	ine	砂	SA
☐ DEP ☐ Amended ☐ DOL ☐ Amendment #		_		ne, zip co Mafu	de N	10	276	MATE	6	E				1
Emergency (itse justification) □ DCA □ Cancellation	nuomg		Name of	Contact N N	lorat	<i>e</i> 5		IIMI	Tele	ohone Nun	nbor	4.1	Lucia	1
Name of Facility Where Abstement is Taking P	face (3)		FACIL	LETY INFO	RMATIC	HNE	Туре	of Facility (4))		ONTRO)L &		1
MOVAL6								of Facility (4) ichool (K-12 ubchapter 8 other (i.e. pri etc.)	(Other	SBESTUS C	SING	بالمانية المانية	zielke vija	
171 Engle Street	CO terrorial	********	Attan Aleena				Source	Subchapter 8 Other (i.e. prinetc.)	vate & c	ommercia Hoore	l build	ings,	home	5 ₇
Caty (5) TEMAFM							1	80Q		2		B		
County Bernen			County C	Code (7) ISE ONLY)	-and a College			int Use (Prior 1616AN		demolish	ed)			
Name of Monitoring Firm Hired by Building Own	ner (8)		ASCI	M No.		Name A. Mi	of Aba	tement Contr tracting Inc)				
Street Address							Address Lowell F			VIII - 10 - 10 - 10 - 10 - 10 - 10 - 10 -			Anton California	*****
City, State, Zlp Code	7.							ip Code NJ 07452						-
Project Manager for Menitoring Firm							hone No -262-58			License No.	o.	nation of the section		
Start Date (10) 5:1-12	d Son	notation E)ate (11)		Name	of OS	A Monitor vironmental	Service					WALLEY .	
Occupancy Status During Abatement (Check El Facility Closed/Vacated During Entire Per D Abatement Performed Outside of Normal Cl Other - Describe:	riod of Al	patem	ent			Street 280 F City, S	Address Huyer S	SS					NS-MARINE	
Scope of Work (Check All That Apply)														
23 sf or ≥3 lf □ ≥160 sf or ≥260 lf		novat moliti				大学の	Mini K Glov	Containment Enclosure rebag Proce Exempted (dure					
- Allahida ayan adda da		Locati				-	7.001		mb over 1	T COLUMN	T	Abab	Abe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Mai	d Sola intena odial S (12)	ly by noe/ staff?		tos Cont thermal:	system: ing. VA	Materia s insuls (T, or		(8)	nount seaify or LF)	Ramova	Repair	Encapsulate	Enclosura
10. A 0. C C 0. L	Yes	Na	N/A						7 37	1 727			i di	- ap
basement basement			X		PIPE	pioe insulation 140 LF X						_		
ryose i raji					711				20					
									***************************************		T			
Name of Registered Waste Hauter		IN	JOEP W	este	Cubic Y	fards	-	Name of R	egistere	d Landfill			-	-
Name of Registered Waste Hauter Rovic Transport		Н	JOEP W Jauler (D 1 20785		Cubic Y of Was			Name of R	_		Corp.	<u> </u>		
		Н	lauler (D)		Of Was	al Date		IESI PA B City, State, Bethligher	ethiehe Zip Co	m Landfill (de	Согр.		- 1000	

STATE OF NEW JERSEY

NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to N.J.A.C. 8:60 AND 12:120)

Date of Notification (1) 5/3/1	2	-,		Name of Building Owner/Operator (2) William Paterson University										
				-	tersor driver atty									
Agencies Notified	Notification	Туре		Street Address	s III									
▼ EPA	Initial			300 Pompto										
X DEP		d # ·		City, State, Zir	p Code MAY / ZUIZ									
X DOL	Emerge	ncy (includi	ng	Wayne, NJ	07470									
X DOH	justificat			Name of Conta										
□ DCA	Cancella	ation		John Urinyi										
Lat			FACILITY IN	FORMATION	The second secon									
Name of Facility Where Abatement is 1	aking Place (3	<u>)</u>		Type of Facility	ty (4)									
William Paterson University		•		School (H	K-12)									
Street Address			-	Subshani	oter 8 (Other than K-12)									
300 Pompton Road														
City (5) County (6)		County C	ode (7)		e., private & commercial buildings,									
		(State Us		homes, e	etc.)									
viajiio	· ·	ASCM No	,	1										
Name of Monitoring Firm Hired by Bldg	Owner (b)			Name of Contractor (9)										
TTI Environmental & ECI Inc.		00003;	00030	MTM Metro Corporation										
Street Address	, , , , , , , , , , , , , , , , , , , ,	N 400 N	Marray Ct	Street Address										
TTI -1253 N.Church St Moores	town,NJ EC	JI - 120 IN	. vvarren St.											
City, State, Zip Code				City State, ZipCode										
Trenton, NJ 08608				Paterson, N										
Project Manager for Monitoring Firm	Telephone I	Vumber		Telephone Nu	umber License Number									
Jeff Seaman; Rick Beach	856.840.8	800 ; 609	9.392.4200	973-742-50	00809									
Scheduled Start Date (10)	Scheduled (Completion	Date (11)	Name of OSH	IA Monitor									
5/14/12	9/15/2012			MTM Metro	Corporation									
Occupancy Status During Abatement (Check only one	e)		Street Address	\$									
				135-137 Mg	cBride Ave									
Facility Closed/Vacated During Er	tire Period of	Abatement	84	City, State, Zip	p Code									
Abatement Performed Outside of														
L-J				Paterson, NJ 07501										
X Other-Describe: Morrison,Rau	binger and She	ea Ctr will b	be occupied											
Source of Work (Check all that apply)														
> 3 sf or > 3 lf	Renovation	1	Full	Containment wit	ith Negative Pressure Mini-Enclosure									
× > 160 sf or > 260 lf	Demolition		X Nor	n-Exempted(*) &	Non-Friable Procedure Glovebag Procedure									
	ation Normally		Description of		Amount (Specify SF or LF) Abatement Type									
[- NG(10] : [10] (10] (10] (10] (10] (10] (10] (10] (10] (10] (10] (10] (10] (10] (10] (10]	by Maint./Cus	stodial	thermal system surfacing, VAT											
Facility (13) Staff?	(12) NO	N/A	miscell.)	i, or other	Rem. Rep. Encap Enclos									
Morrison&Raubinger Hall,Shea Ctr. Blr.₽	X		VAT		35,242 SF X X									
					2,000 SF X X									
Cooling Tower X Transite Panels Chiller Plant, Boiler Rm X Window Glazing					3.500 LF X X									
Roof Flushing X Roof Flushing NJDEP Waste Hauler ID #				Cubic Yards o										
MTM Metro Corporation 26552				60 Tullytown										
City, State	1				Disp. Date City, State									
Paterson, NJ	- 1				9/17/2012 Tullytown, PA									
Completed by (Print or Type) Title				Signature	Date									
				Elizabeth Maslarkov 5/3/12										
lizabeth Maslarkov Business Administrator				Elizabeth Masiarkov 5/3/12										



Date of Notification (1	Name of Building Owner/Operator (2) Warren Fabrizio												
Agencies Notified	5/4/12 Type Notificatio	n		Stree	et Address		-2000	The state of the s	and the last		5	T	
EPA	Initial	A-10				1	10 Bridgeton	Pike	M	E	U	1	
DEP DOL	Amended Amendment Emergency		-	City,	State, Zip (llica Hill N	8882 E 1			M	1	
M DOH □ DCA	justification)	ig	Nam	e of Contac W		1 111)	Telephone Nu	mbery(112	1	7	
	1			FA		ORMATION	1111	1 - Mar.			_=	_	
Name of Facility When							Type of Facility	(4) ASDESTO	S CON	ROL	2	_	
	Re	siden	ce				School (K-1:	8 (Other than	CENSIN	Jaka a kinda	şele	- 1 30"	
Street Address	110 Bri	dgeto	n Pil	ce			11011100, 010.				S,		
City (5)	M1	llion I	Y:11				Square Feet	# of Floors	E	3ldg.	Age		
County (6)	Mul	llica F	1111	T Cou	inty Code (7) (STATE	Current Use (Pr	rior if being demo	lished	-		_	
	loucester	es in the second		USE	ONLY)	., (residence					
Name of Monitoring Fire		Owner		ASCM	No.		nent Contractor (9	50					
(8)	MECS						vens Environi	nental Servi	ces, I	nc.			
Street Address	PO Box 34	11				Street Address	PO Box 322						
City, State, Zip Code	TO BOX 3	-	-			City, State, Zip C	Code						
	Crosswicks, NJ	0851	5				Allentow	n, NJ 08501					
Project Manager for M				ephone		Telephone No.	50.0699	License No.	0040	2			
	William Weisgarber Jr. (609) 298- Start Date (10) Scheduled Completion Date						59-9688 Monitor	I	0049	3		_	
Start Date (10) 5/14/12	Sch		5/18/		ate (11)	Name of OSHA I		ECS					
Occupancy Status Dur	ring Abatement (Ch			12		Street Address						_	
☐ Facility Closed/Vaca								ox 341					
☐ Abatement Perform ☐ Other - Describe:			ty Hou	City, State, Zip Code Crosswicks, NJ 08515									
Scope of Work (Check	all that apply)					Full Cor	ntainment with Neg	native Pressure					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enovat emolitic			☐ Mini-End ☐ Gloveba			ure				
**************************************			Location				Simpled () and the	in inable in reced		Abate			
Location	n of		ormally Sole		-	Description of				Тур	e		
Asbestos-Containing TO BE ABA	Material (ACM)	Mai	ntenar ustodia	ice/		os Containing Mat thermal systems in	erial (ACM)	Amount (Specify	₽ R	Re	回	E	
IN Facili	ty		Staff?		(1.6.,	surfacing, VAT,	or	SF or LF)	Remova	Repair	caps	Enclosure	
(13)		-	(12)	Γ		other miscellaneo	ous)		<u>n</u>		Encapsulate	ā.	
Yes No N/A													
basem	ent			×		boiler insulat	tion	60 SF	×		-	\dashv	
		-							-				
									+			-	
Name of Registered Wa	aste Hauler		IN	JDEP V	Naste	Cubic Yards	Name of Regis	tered Landfill					
Stevens Environ		s, Inc	. H	lauler ID 182	No. 292	of Waste 1 CU		R.R.F., Inc. I	Landf	ill			
City, State	Allentown 1	NI		1 + 1		Disposal Date 5/18/12	City, State	Tullytown,	РΔ		89		
Allentown, NJ Completed By Title					Signature/	147	Date	171			-		
Mahlon E. Stevens Project Manager						////	1		5/4/	12		_	

78HD00#87

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

Print Form

1000000								- 14	1121	150	-		[]	111
Date of Notification (1) 5/2/12	Name of Building Owner/Operator (2) New Jersey Turnpike Authority Street Address Name of Building Owner/Operator (2) New Jersey Turnpike Authority 7 2012													
Agencies Notified	Type Notificatio	n			Address Main Stre	et		1	111	. 11				7
EPA DEP DOL	Initial Amended Amendmen	nt #		City, St	ate, Zip Co bridge, I	ode	195		18	ASBEST	OS CO	NTRO!	8	
□ DOH	Emergency	y (including		Name o	of Contact		*		1	Telephone Nu	No. of Concession, Name of Street, or other Persons, Name of Street, or ot	Sant Paris of		
☐ DCA	Cancellation				rd J. Rad		200			portir.			_	
Name of Facility Where a Bridge Overpass	Abatement is Tak	ing Place (3)		TAG	ILIT INT	ORMAI	ION	Type of F		vo.e.				
Street Address 269 Prospect Plains	s Road			1-0				Sub-	chapter 8 er (i.e. priv	(Other than K-1 rate & commerc		ldings	, hom	es,
City (5) Cranbury Township)							Square F		# of Floors N/A	- 1	3ldg. /	Age	
County (6) Middlesex	and the file of the second				Code (7) USE ONLY)			Current U Bridge	se (Prior	f being demolis	hed)			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASC	M No.			of Abatemi iola Servi				8		
Street Address								Address B Lucor	Road					
City, State, Zip Code						-		State, Zip Co pack, PA			-0.0			
Project Manager for Mon	Project Manager for Monitoring Firm						100000000000000000000000000000000000000	none No. 539.5634		License N 01077	lo.			
Start Date (10) 5/10/12 5 /11 /12 (Ca))	Scheduled 8/10/12	Cor	mpletion I	Date (11)			of OSHA N ola Servi		3				
Occupancy Status During								Address B Lucon	Road					
Facility Closed/Vaca Abatement Performe Other – Describe: S	ed Outside of Non	mal Facility F					City, S	tate, Zip Co	ode					
Scope of Work (Check Al	l That Apply)						Skipl	Dack, FA	13474					
≥3 sf or ≥3 if ≥160 sf or ≥260 if		Spinore and the spinore and th	nova molit	275.T-3.T-			×	Mini-En Gloveba	closure ag Proced	with Negative F ure) and Non-Friab			e	
		170000	ocati							,		Abat	ement	Į.
Location Asbestos-Containing		Used		ly by	Asbesto		cription	of laterial (AC	M)	Amount		Τ΄,		
TO BE ABA In Facilit (13)		Main Custo			(i.e. t	surfac	systems sing, VA siscellan			(Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
Bridge - undersi	do of dook	Yes	No	N/A X	tw.	onoito	aandu	it nino		20015	V		Φ	
Bridge - undersi	de of deck			^	ura 	ansite	conqu	it pipe		200 LF	X			
								2 %						
Name of Registered Wast	e Hauler		I N	JDEP Wa	aste	Cubic \	/ards	Nai	me of Rec	istered Landfill	<u></u>	<u></u>	-	
Freehold Cartage, Inc. Hauler S2265					Hauler ID No. of Waste IESI Bothloham Landfill									
City, State Freehold, NJ	10-1- + -Z-		1			Disposa	al Date		, State thlehen	ı, PA		4		
Completed by Title Caroline M. Harper Project Manager						86	gnature	1.17	1/	Da 5/2	te 2/12			THE ST
Carolino IVI. Harper		1 TOJECT	ivia	nager	3 1	0	40	4/1	turn	200	-/ 12			2 1

* Emergency * NOTE

Date of Notification (1)				Name	of Building	Owner/	Operato	r (2)	Cr	- do	<u> </u>	ر			
4/27/12		Name of Building Owner/Operator (2) Rochell & Steven Nisenfeld / Residence													
Agencies Notified	Type Notification	1			Address			1 1 1 2	appears and	Market Tolland	ПП	П	51	Lad J	1
EPA DEP DOL	☐ Initial				ast Vass		4.5	Π	ME	CE	11	<u> </u>	5	11	
X DEP X DOL	Amended Amendmen	+ #			tate, Zip C			and the same of th	11)1=	The second secon				III	
	Emergency	(including	-		bon, NJ			- Section 1	151		7	2010)	1	/\
DOH DCA	justification Cancellatio				of Contact elle / Ste			A Company		Melèbhor	ne Nur	nber		1	1
	Caricellatio	<u> </u>			ILITY INF		1011	- 9	In A			- 700		7	and the
Name of Facility Where	Abatement is Taki	ng Place (3)	FAC	ILITINE	ORMAI	ION	Type of	Facility (2	ASBESTO	3 CON	TROL	B		1
Rochell & Steven N	lisenfeld / Resi	dence						D c	hool (K-1	LIC MODEDLE	ENSIN	G	-	-	
Street Address								Su Su	bchapter.	8 (Other tha	n K-12	2)	Make Jan.	1.0-	
45 East Vassar Rd								x Ot	her (i.e. p	rivate & com	merci	al bui	Idings	, hon	nes,
City (5)								Square		# of Floor	rs	T	Bldg.	Age	
Audubon, NJ 08106	j		15/24/57/51					1000 -	-	2			35+		
County (6) Camden				County (STATE	Code (7) USE ONLY)		Current	Use (Prio	r if being de	molish	ed)			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCI	M No.		Name	ame of Abatement Contractor (9)							
Health & Safety Ser	rvices							ernaco Inc							
Street Address					## V 7		Street	treet Address							
318 12th Street							PO E	30x 329							
City, State, Zip Code Hammonton NJ 080	127							tate, Zip							
									NJ 0809	91					
Project Manager for Mon	itoring Firm			Telepho	ne No.			one No. 753-980	00	Licer 007	nse No 27).	ger der de		
Start Date (10) 4/27/12	d Cor	npletion	Date (11)		4000	of OSHA	Monitor								
Occupancy Status During	Abatement (Che	5/1/12	2)				Samo								
Facility Closed/Vaca							Street	Address							
Abatement Performe	ed Outside of Norr	nal Facility	Hours	S			City, S	tate, Zip (Code					-	
Scope of Work (Check Al										9					
	і тпас Арріу)	100					کے	Clean	Upw	ith Negat	tive	Pre	55 U	e.	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	enova emolit				-	Full C	ontainmer	nt with Nega	tive Pr	essu	re		
			Silioni		9				nclosure pag Proce	dure					
		1						Non-E	xempted	(*) and Non-	Friable	Pro	cedur	e	
			Locati ormal						Į.					emen	t
Location Asbestos-Containing			I Sole		Ashaat		cription			2 0			1 1 1	ре	1
TO BE ABA	TED		ntenar					aterial (A)		Amount (Specify		R	_	En	ш
In Facilit (13)	ty	0000	(12)	Julii:			ing, VA			SF or LF)		Remova	Repair	aps	Enclosure
	No	N/A		outer III	ii 300ii ai ji	5005)				val	air	Encapsulate	sure		
Baseme	х		Boiler	Insula	tion		unknowr	,	x						
Laying in yard on s	side of house			х		Boiler	Insula	tion		unknowr	_	x		-	(1-1
Name of Registered Wast	e Hauler		1	IDEE:				i i							
United Containers	C Hadiei		100.0	JDEP W auler ID I		Cubic Y of Wast		1 4		gistered Lar	ndfill	-			
						2	G.R.O.W.S.								
City, State Elm NJ				Disposal Date											
					5/1/12 Morrisville P			e PA 19067					Proj.		
Completed by Anthony T Perna		Title	ont			Signature Date									
Anthony T Perna President						1	1				4/27	7/12			

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(Miss.							(0)	HAY /	LU		1	
Date of Notification (1)	19/12			Name o	of Building	Owner/Operator Jacobus Pha	armaceutical	omnany Inc.	101/11	JI &		_
Agencies Notified	Type Notification		+	Street	Address		P.O. Box 529	O ASBESTOS	SHAR		e-constant	_
EPA DEP	Initial Amended Amendment #_	1	+	City, St	ate, Zip C	ode	inceton, NJ.08	and the second second	ellis.			
DOL.	Emergency (inc	luding	-	Name	of Contact		inceton, NJ. 00	Telephone Numb	er			_
DOH DCA	Cancellation		_	Name .	Ro	bert Warman						_
				FAC	ILITY INF	ORMATION	Type of Facility	(4)			C	-
Name of Facility Where	Abatement is Taking obus Pharmacet	Place	(3) Con	npany	Inc.		School (K-12)				
Street Address	31 Schalks C						Subchapter 8 Other (i.e., proposed) homes, etc.)		il build			
City (5)						,	Square Feet	# of Floors	Blo	lg. Ag	je	
- (0)	Plain	sbore)	Coun	tv Code (7) (STATE	Current Use (Pr	or if being demolis	hed)			=
	iddlesex			USE	ONLY)			research lab				=
Name of Monitoring Firm (8)	n Hired by Building C MECS	wner	1	ASCM	No.	Name of Abater Ster	ment Contractor (9) vens Environr	nental Service	s, In	c.		
Street Address		_	<u>-</u> -			Street Address		30x 322				
- V	P.O. Box 34	1				City, State, Zip (Code		_	_	_	_
City, State, Zip Code	Crosswicks,NJ 0	8515					Allentow	n, NJ 08501				_
Project Manager for Mo	onitoring Firm			phone I	No. 8-4070	Telephone No. (609) 2	59-9688		0493	;		
Start Date (10)	Veisgarber Jr. Sched	uled C	-			Name of OSHA	Monitor	ECC				
4/30/12			/11/	12		Street Address		ECS				
Occupancy Status Dur Facility Closed/Vaca	ated During Entire Pe	riod of	Abate	ment					_	_		
☐ Abatement Performe Other - Describe:	ed Outside of Normal	Facility	y Hour	rs		City, State, Zip Code Crosswicks, NJ 08515						
Scope of Work (Check 3 sf or 3 lf 160 sf or 260 lf	all that apply)	X Re	enovati emolitio	ion in		Full Co	dure					
			ocatio							bate Typ		
Location Asbestos-Containing <u>TO BE AB</u> IN Facil (13)	Material (ACM) ATED ity	Used Mair Cu	ormally I Solel Intenanustodia Staff? (12)	y by ice/ al	Asbes (i.e.	Description of the story Containing Management of the story of the sto	aterial (ACM) s insulation, T, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A		pipe insula	tion	130 LF	X			
outside storage 2nd floor Mech.I				X		pipe insula		110 LF	×			
2nd floor Mech.	(III-IVIaIII DIUg											_
Name of Registered W			1	NJDEP Hauler II		Cubic Yards of Waste	Name of Reg	istered Landfill T.R.R. F. Lar	4611			,
Stevens Environ	nmental Service	s Inc	<u>.</u> L.	18	292	2 CU Disposal Date	City, State			-		
City, State	Allentown, 1					5/1/124A	/AI	Tullytown,	PA		_	-
Completed By Title				t Ma	nager	Signature			5/4	/12		

STEVENS ENVIRONMENTAL SERVICES INC. EHECK # 34751

e of Notification (1) 4/19/12			Name of Building Owner/Operator (2) E F F Jacobus Pharmaceutical Company, Inc.											
Agencies Notified	Type Notification	n		Str	reet Address	3	A CONTRACTOR OF THE CONTRACTOR		111	Ш	1.1				
⊠ EPA	Initial			_			P.O BoxA5	290 7 2012	11	4	1)				
DEP DOL	Amended Amendment			Cit	y, State, Zip		rinceton, NJ	08540		1					
₩ DOH	Emergency justification		ing	Na.	me of Conta				-l	-	-				
DCA	Cancellation			140		obert Warma	n	ICENS PROPERTY	imbei	ı	. \$	*****************************			
	<u> </u>			F	ACILITY IN	FORMATION	A THE STREET	And any and the man			ę.				
Name of Facility When		(3)(3)			7		Type of Facil	ity (4)	-		No.				
	cobus Pharmac	eutic	al C	ompa	any Inc.		School (K		40)						
Street Address	31 Schalks	Cros	ssing	Roa	d			er 8 (Other than K , private & comme		uildin	gs,				
City (5)							Square Feet	# of Floors		Bldg	Age				
	Pla	insbo	oro						_ [
County (6)	C: 1 11			Co	ounty Code (SE ONLY)	7) (STATE	Current Use (Prior if being demo		1)					
	liddlesex						J	research l	ab						
Name of Monitoring Fig (8)	m Hired by Building MECS	Owne	r	ASC	M No.		ment Contractor			T					
Street Address	MECS	-				Street Address		mental Servi	ces,	inc.					
Officer Vooress	P.O. Box 3	41				Street Address		Box 322							
City, State, Zip Code	1.0.20.0		•			City, State, Zip 0		DON 322				_			
(Crosswicks,NJ	0851	5					vn, NJ 08501							
Project Manager for M			110000	lephon		Telephone No.		License No.							
	Veisgarber Jr.			100	98-4070		59-9688		0049	93					
Start Date (10)	Sche	eduled			Date (11)	Name of OSHA	10.851(1).67()	1ECS							
4/30/12 Occupancy Status Dur	ing Abatement (Che	eck onl	5/4/			Street Address		TECS							
☐ Facility Closed/Vaca						Oli Cot Addiess	P.O.	Box 341							
☐ Abatement Performe	ed Outside of Norma	al Facil				City, State, Zip C						=			
Other - Describe:		1					Crosswicks, NJ 08515								
Scope of Work (Check	all that apply)					[] Eull Con	Containment with Negative Pressure								
X ≥3 sf or ≥3 lf			enova				Inclosure								
≥160 sf or ≥260 lf			emoliti	on			ebag Procedure Exempted (*) and Non-Friable Procedure								
			Locati				omptod () and 11	on made mode		Abate	ment				
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TO BE ABA IN Facilit			ustodi Staff?		(i.e.,	thermal systems in surfacing, VAT.		(Specify SF or LF)	Remova	Repair	nca	nclo			
(13)	,		(12)			other miscellaneo		. 01 01 11 7	oval	1 =	Encapsulate	Enclosure			
		Yes	No	N/A							ate				
outside storage	e building			X		pipe insulati	on	130 LF	×						
2nd floor Mech.R	m-Main Bldg			×		pipe insulati	on	110 LF	×						
н									1						
						Cubic Yards of Waste	Name of Regis	stered Landfill							
Stevens Environ	mental Service	s Inc.	_ "	auler 10 182	292	2 CU		T.R.R. F. Lan	dfill						
City, State	Allowt	11	1/2	201		Disposal Date	City, State	T 11	D.4		3000				
Completed By	Allentown, N	17			l·	5/4/12, 1 Signature		Tullytown,	PA			=			
Mahlon E. Ste		Pr	oiect	Mar	nager			Date	4/19	/12					
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Date of Notification (1)	= 0 10			Name	of Buildi	ng Owner/Operato	or (2)	Winesas Shirth	nn E	To	1		
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Agency Notified	Type Notification	14.25	5 F - 170 '	Stree	t Address	100	- 111116	and management to the second s		The state of	1		
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D DEP	Amended Amendment #	4-45	1.5	City,	State, Zip		1411	MAY /	ZUIC		THE STATE OF	Market Company	1-1
f .	☐ Emergency (incl	uding		Name	of Conta	unellen,	Nロア	78817		1		The same	
D DCA	justification) Gancellation					ni so.n	111	Telephone Ni	imner	assered.		Mary and a second	
						FORMATION	-	LICENSI	NG	pacy to pro	energy in	-	-
Name of Facility Where A	spatement is Taking	Place (3	ĭ	FAC	ILIT IN	- ORMATION	Type of Facility	y (4)	Account the Park of the Park o	18:			_
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Street Addless	mily Doue	ucre	<u>;</u>				School (K-1	2) 8 (Other than K-	121				
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City (5) Marztin	rsville	N	5				Square Feet	# of Floors	Bldg.		_+-		
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Some	rse+			ONLY)			7	98				
Name of Monitoring Firm	Hired by Building Ow		ASCI	4 No.		Name of Abatem	ment Contractor	(9)					
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Street Address				7		Street Address		~	105.6	Car.		-	
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City, State, Zip Code	TN +(A C T	22			City, State, Zip (Code						
Demont Manager for Monit	oring Firm	1	nianha	no No		New	· Egypt	License No.	<u>4705.</u>	13			
Project Manager for Month	oning Film	c,	od 🛪	ne no.	, we will								
Start Date (10)	Scheduled	Comple	tion Da	3 te (11)	363	Name of OSHA	Monitor		"CAJT	1_			_
Steve Scherolate (10) 5-15-12	5	- /(, ~1	7		The second secon		inter	-				ĺ
Occupancy Status During	Abatement (Check o	nly one				Street Address	- ICCII	nalogies.	<u> </u>	-	-		
AFacility Closed/Vacated	During Entire Period	of Aba	lomon	, a.		P.C	Box	337					
Abatement Performed (City, State, Zip C	Code			-			-
☐ Other – Describe:	13		•			New	Egypt	NJ.	065	3.3	5		
Scope of Work (Check all	that apply)			T.									
□ ≥ 3 sf or ≥ 3 lf			->		ovation		Enclosure	Negative Pressu	ure				
260 If ≥ 260 If				□ Den	nolition		ebag Procedure						-
Allower measurements and the second		Τ.	1 1			Non-	exempled (*) an	d Non-Friable Pro	ocedure	At	aten	nent	-
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Location			d Sole		Achor	Description of stos Containing Ma							
Asbestos-Containing TO BE ABA			intena Justodi		77/335-35-35	, thermal systems		Amount (Spacify	,	Re	Repair	Encansulati	n
IN Facili	ty		Staff?		862	surfacing, VAT other miscellane		SF or LF)	Remova	Repair	JOS.	-
(13)			(12)	,		Other miscellane	ious)			8	7 0	late late	
		Yes	No	N/A						1	_	1	_
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Laundry Roc	<u> </u>		×	-	F10			100		χ		+	-
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Car port	Haviles	LALI	DED V	Vaste H		Cubic Yards of	Name of Regis	500 SF	=	X		<u>.l.</u>	-
Name of Registered Waste		0.535.60	No.	70	aulei	Waste				r	-68		1
EPC Techn	iclogics :=		-/	100	00	6		Mary	: D3E!	Š			-
City, State						Disposal Date	City, State		PA				1
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Stelle X hear	Car Title PRE	Sich	271			Signature	12/501	1	Date	-1	2		-
SIECE X NEAT				for ach	State Sch. 5-3-12								

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Date of Notification (1)			Name of Building Owner/Operator (2)													
5-1-12				Prin	nceton	Univ	ersit	y ////)/		1	2000 I	لمسمدر		7		
Agencies Notified	Type Notification	n			Address MacMi	llan	Buile	ding	MA	A. Samuel	CHIRO	i is	ESSENCE OF STREET			
□ EPA □ DEP	☐ Initial				tate, Zip Co		Duzz	77.	4	501310S	HOING.	attack.	pt.	p at a st		
DE DOL	Amendmen	nt # 1		1000000	nceton,		08544		1	HOUR CIP	· Sandinia	andre , i				
☑ DOH	☐ Emergency		3	A LONDON TO THE REAL PROPERTY.	of Contact	-10		- 1	Ie	fephone N	lumber		-	-		
D DCA	justification Cancellatio				Ortega	g v		1 1	ALL STREET		10011,001					
				200000000000000000000000000000000000000	ILITY INFO		ION		11	e e e e e e e e e e e e e e e e e e e						
Name of Facility Where A Vacant Houses	Abatement is Taki	ng Place ((3)					Type of Facility	(4)							
Street Address								☐ School (K			40)					
17,19 & 21 Old	den Street					ě		Subchapt Other (i.e. etc.)	private	& comme	rcial bui	ldings	, hom	nes,		
City (5) Princeton						1/2		Square Feet 3,360	2	f Floors		Bldg. 50y				
County (6) Mercer				County (STATE	Code (7) USE ONLY)			Current Use (P			ished)					
Name of Monitoring Firm	Hired by Building	Owner (8)	ASCI	M No.		Name	of Abatement Co				7.6-				
ATC Associates	, Inc.			1				nouth Envi			Co.,	Inc.				
Street Address		*10				1-25		Address								
Three Terri La	ne						923	Haws Aver	nue							
City, State, Zip Code							0.000	tate, Zip Code								
Burlington, NJ				Telepho				ristown, E	PA 19	401						
Mike Keehn								one No. -239–9920		License 003						
Start Date (10) 4–26–12	ed Cor	mpletion	Date (11)			of OSHA Monito mouth Env		mental	Co.	Inc						
Occupancy Status During	Abatement (Che							Address								
☐ Facility Closed/Vaca				ment			923	B Haws Ave	enue							
□ Abatement Performe	d Outside of Norr	nal Facility	y Hour	S		82	A11200100100	ate, Zip Code								
☐ Other – Describe: _		-				-		cristown,	PA ´	19401						
Scope of Work (Check All	That Apply)															
□ X ≥3 sf or ≥3 lf			Renova									Pressure				
□ ≥160 sf or ≥260 lf		⊠ [Demoli	tion			✗☐ Mini-Enclosure									
							☐ Glovebag Procedure ☑ Non-Exempted (*) and Non-Friable Procedure									
		Is	Locat	ion								Abat		t		
Location	of		Vorma			Des	scription (of			-		/pe			
Asbestos-Containing N TO BE ABA			d Sole			s Cont	aining Ma	aterial (ACM)	1 7222	mount	1_		m	m		
In Facility		Cus	todial S	Staff?	(i.e. ti		systems cing, VAT	insulation, , or		pecify or LF)	l em	Repair	сар	nde		
(13)			(12)			other n	niscellane	eous)			Removal	pair	Encapsulate	Enclosure		
		Yes	No	N/A									fe	0		
17 Olden Street				х	trans	ite	flue	stack	30	LF	X					
19 Olden Street				х	trans	ite	flue	stack	30	LF	X					
21 Olden Street			1	x	trans	ite	flue	stack	30	LF	x					
Name of Registered Waste	e Hauler			JDEP W		Cubic '		Name of	Registe	red Landfi	II					
Robinson Waste			183	auler ID 7304	No.	of Was 5	ite	GROWS	S,Inc	• .						
City State Bellmawr, NJ						Dispos 5–4	al Date -12	City, Star		be,PA		4	15			
Completed by		Title				Si	gnature	1	1/	/	ate		-	-		
Timothy E. Brya	ny E. Bryan Vice-						1-	1/1	1),		5-1-1	2				

Check# 8230

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

□ EPA □ DEP □ Amended Bear Dollar Emergency (including justification) □ Cancellation		12								
□ EPA □ DEP □ Amended Bear Dollar Emergency (including justification) □ Cancellation	er on T	12								
Amendment # Princeton, NJ 08544 By DOH DCA . Emergency (including justification) Cancellation	er on	(L								
Amendment # Princeton, NJ 08544 By DOH DCA . Cancellation Princeton, NJ 08544 Name of Contact Bob Ortega FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Vacant Houses Street Address 17,19 & 21 Olden Street City (5) Amendment # Princeton, NJ 08544 Name of Contact Bob Ortega FACILITY INFORMATION Type of Facility (4) Subchapter 8 (Other than k-12) City (5) City (5)		. 4								
Emergency (including justification) Name of Contact Bob Ortega		. 4	11-							
DCA Cancellation Bob Ortega FACILITY INFORMATION Vacant Houses Street Address 17,19 & 21 Olden Street City (5) Bob Ortega FACILITY INFORMATION Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) City (5)		. 4	1							
Name of Facility Where Abatement is Taking Place (3) Vacant Houses Street Address 17,19 & 21 Olden Street City (5) FACILITY INFORMATION Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) City (5)	CONTI	در سعر	III)							
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17,19 & 21 Olden Street City (5) Subchapter 8 (Other than K-12) Other (i.e. private & commercial tet.)	chizm	G.	The same of the sa							
City (5) etc.)	30.5	100	****							
	uilding	js, ho	omes							
Square Feet # of Floors	Bldg	. Age	9							
Princeton 3,360 2	50y	yrš.	•							
County (6) County Code (7) Current Use (Prior if being demolished)									
vacant houses	,									
Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9)										
ATC Accordator To-	T	2. 10								
Street Address Street Address	, Inc									
Three Terri Lane	venue									
City, State, Zip Code City, State, Zip Code City, State, Zip Code										
Birlington NT 00016										
Project Manager for Monitoring Firm										
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Stad Data (40)	98									
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Occupancy Status During Abstract (Ob. 1.0.1.5	Inc	•								
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Absternant Referred Outside Period of Abatement										
Uther – Describe:										
Scope of Work (Check All That Apply) Norristown, PA 19401										
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	ure									
Mini-Enclosure	u.c									
Glovebag Procedure Non-Exempted (*) and Non-Eriable Po	3 34									
Is Location Non-Exempted (*) and Non-Friable Pr										
Location of Normally		temer ype	nt							
Asbestos-Containing Material (ACM) Used Solely by Description of	1	T	T							
TO BE ABATED Maintenance/ Maintenance/ Amount		E	П							
(12) surfacing, VAT, or SF or LF)	Repair	Encapsulate	Enclosure							
other miscellaneous)	air	sula	Sur							
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Name of Facility Where Abatement is Taking Place (3) Name of Contact Takenhone Number	I:
Name of Pacility Where Abatement is Taking Place (3) PLICATE INFORMATION Name of Pacility (4) Street Andress Course (5) Name of Manitoring Firm Hired by Building Owner (8) Street Address City, State, Zip Code City, State,	
County Code (7)	1
Country Code (7) WHAT Contractor (8) Name of Monitoring Firm Hired by Building Owner (8) Street Address City, State, Zip Code	
Name of Monitoring Firm Hired by Building Owner (8) Street Address City, State, Zip Code Connection No. 201-262-5841 Connection No. City State Address City State Addres	
Street Address Street Address City, State, Zip Code Glan Rock, NJ 07452 Telephone No. Telephone No. Telephone No. Start Date (10) Scheduled Completion Date (11) Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code City, State, Zip Code Glan Rock, NJ 07452 Telephone No. Telephone No. 201-262-5841 Name of OSHA Monitor Omega Environmental Services Inc. Street Address 280 Huyer Street City, State, Zip Code Hackenseart, NI 077678	(executed)
Sireet Address 105 Lowell Road City, State, Zip Code City, State, Zip Code Glan Rock, NJ 07452 Project Manager for Monitoring Firm Telephone No. Telephone No. 201-262-5841 Scheduled Completion Date (11) Name of OSHA Monitor Omega Environmental Services Inc. Occupancy Status During Abatement (Check Only One) Facility Closect/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other - Describe: Street Address 280 Huyer Street City, State, Zip Code Hackeneack M Lorenz	-
Project Manager for Monitoring Firm Telephone No. Telephone No. Telephone No. Start Date (10) Scheduled Completion Date (11) Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Glan Rock, NJ 07452 Telephone No. 201-262-5841 Name of OSHA Monitor Omega Environmental Services Inc. Street Address 280 Huyer Street City, State, Zip Code Hackgreack NI 07602	
Telephone No. Telephone No. 201-262-6841 Licensa No. 201-262-6841 Constant Date (10) Start Date (10) Scheduled Completion Date (11) Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Hackensack N. 107609	-
Start Date (10) Scheduled Completion Date (11) Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other - Describe: Name of OSHA Monitor Omega Environmental Services Inc. Street Address 280 Huyer Street City, State, Zip Code Hackensack Mil Ozero	
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Scope of Work (Chack All That Apply)	
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☐ ≥3 sf or ≥3 if ☐ Renovation ☐ ≥160 sf or ≥260 if ☐ Demofition ☐ Full Containment with Negative Pressure ☐ Glovebag Procedure	
Is Location Non-Exempted (*) and Non-Friable Procedure Abateme	ıt .
Asbestos-Containing Material (ACM) Asbestos-Containing Material (ACM) Normally Used Solely by Maintenance/ Asbestos Containing Material (ACM) Amount	1
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Maceument V	T.
first + second floor X floor hit 1600 SF X	
Name of Registered Waste Hauler NUDEP Waste Cubic Yards Name of Registered Landfill Registered Landfill	
ity, State, Zip Code	WWW
Overdale, NJ 07457 Disposal Date City, State, Zip Code Bethlehem, PA 15015	
Completed by McDonald Title President Signature 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	-

May 04 12 07:36a A, MAC Contracting, Inc.

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Street continue to \$1100 Right and 40-400)

Date of Notification (1)		- 1	hiame of	Building		ACCOUNTS .							
54.2012				GM	The state of the s		ociati	96	NJ Dept. of	fealth	185	nior (Servi
Agencies Notified Type Notification EPA Initial DEP Amended DOL Amendment Emergency	The second secon		Street Ad	700 le Zip Co			treet	E G 15103	7 - 201		(re)		35
☑ DOH justification) ☐ DCA ☐ Cencellation			Name of	1	tileb	ard		" Tel	epnone Num	ber			
Name of Facility Where Abatement is Takin	o Place (3)		FACI	LITY INF	ORMATI	I MC	Type of Facility		S CONTROL)		ACA.	
Klesidenhal Street Address							□ School (N	(-12) ter 8 (Othe	r than K-12)	4. W. 4.			1
760 Main Street	SPACE - SPECE	.,			other hardstaller are		図 Other (i.e etc.)	Sittemature of the same			ALL DISTRICT	100	Б,
Paterson						1	Square Feet	# 0	f Floors	1 1	ldg. A		
County (6)			County C	Xode (7) ISE ONLY	7		Current Use (Prior if bell		d)			
Name of Monitoring Firm Hired by Building	Owner (8)		ASC	M No.			of Abatement C Contracting		(9)	-0.00			
Street Address						PER PROPERTY AND ADDRESS.	Address owell Road						
City, State, Zip Code							tate, Zip Code Rock, NJ 0745	2					
Project Manager for Monitoring Firm		Telepi	hone No.			one No. 282-5641		License No 00156					
Start Date (10) 5-4 12	5.2	pletion t	Date (11)			of OSHA Mosi ega Environme		ces Inc.					
Occupancy Status During Abatement (Che B) Facility Closed/Vacated During Entire D Abatement Performed Outside of Norm C) Other - Describe:	Period of Al	atem	ent			280 F City, S	Address lover Street tate, Zip Code ensack, NJ 076						
Scope of Work (Check All That Apply) ☐ ≥3 sf or ≥3 if ☐ ≥160 sf or ≥260 if		novat mol i k			i, unamenda	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Enable Procedure							
	ls.	Locati	on			- 0	- Non-Exemple	E3 () and	NOIFFIADIC	100	Abat	ement	L
Location of	t N	lormal Sole	ly			scription				_	T)	pe	_
Asbestos-Containing Material (ACM) TO BE ASATED In Facility (13)	Mai Cust	ntenar odfal S (12)	nce/ staff?		thermal :			(Amount Specify For LF)	Remayal	Repair	Encapaulate	Enclosure
logi-eim eart	Yes	No	N/A X	-	2.07	1,67	Vahen)	-	0010	V			
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Name of Registered Wasta Hau/er Rovic Transport	H	JDEP W. auter to i	0.000.000	Cubic of Was		0		red Landfill em Landfill C	orp.				
City, State, Zip Code Riverdale, NJ 07457		Disposal Date City, Stafe, Zip Co 5.4 CM Bethletiern, PA 18					ode 18015						
Completed by R. McDonald	nt				ignature		4	Date	9	4.1	2		

снеск#: 7894

Date of Notification (1)				Name of Building Owner/Operator (2)												
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Agencies Notified T	ype Notification			Street A	Address	_	1	- Lance Cold	· · · · · · · · · · · · · · · · · · ·		5.0		To	T		
1 1 7	Initial			<u> </u>	717	OMNE	enas	Tract	E C	E	W	E				
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□ DOH □	Emergency justification)		-	Name o	of Contac	t 11171	VICA	NJ. W	79. 30.7	one Nu	rhber	112	l loss	4		
	Cancellation			_JOU	1CE P	2011-6	Ÿ		111				1	A. C.		
Name of Facility Where Aba	tement is Takin	g Place (3	·	FAC	ILITY IN	FORMAT	ION	Type of Facility	(4)	2700	CONT	OL &				
Butler		9 . 1000 (0	,				- The state of the	1	(4) LASE	ESTOS LICE	NSING	and the second	COLUMN TWO IS NOT	الوفسيمعين		
Street Address								☐ School (K-☐ Subchapter	8 (Other th	an K-12	2)					
307 70M156	nd Sha	et						Other (i.e. petc.)	private & cor	mmerci	al buil	dings	hom	es,		
City (5)	and le							Square Feet	# of Flo	ors		Bldg.		-		
County (6)	VICE			County	Code (7)			Current Use (Pr	ء ا	<u> </u>			3			
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Name of Monitoring Firm Hir	ed by Building (Owner (8)		ASC	M No.		Name of A. MA	of Abatement Co C Contracting In	ntractor (9)							
Street Address			-		**********			Address owell Road								
City, State, Zip Code	Manta property reports to the contract		ACCORDING TO NAME	THE RESERVE THE PARTY OF THE PA	HATCH COLOR	-	City. St	ate, Zip Code	OCCUPANT SPRING	- NI NUMBER	COLUMN AND DESCRIPTION OF THE PERSON NAMED IN COLUMN ASSESSMENT OF THE PERSON NAMED IN COLUMN AS ASSESSMENT OF THE PERSON NAMED IN COLUMN ASSESSMENT OF THE PERS	TORESTONE ST	MILETURAL S	TO COLUMN		
Draigat Managas for 88 - 11 - 1								Rock, NJ 07452								
Project Manager for Monitori	ng rirm			Telep	hone No		Telepho 201-2	one No. 262-5841		ense N 00156	0.					
Start Date (10) 5・(4)	12	Schedul	ed Cor	npletion I	Date (11)		of OSHA Monitor ga Environmenta		nc.		OR OTHER DAY	in the state of th	ONC TEXTS SELECTION		
Occupancy Status During Al	batement (Che	ck Only O	ne)		***************************************		Street A						*******			
☑ Facility Closed/Vacated☐ Abatement Performed O	During Entire F outside of Norm	Period of A	batem Hours	ent				uyer Street ate, Zip Code		Salain berre mea		- Market Service	CHONON CALL	Electric de la constante de la		
Other - Describe:						-		nsack, NJ 07606	i							
Scope of Work (Check All Ti	hat Apply)	2					L									
 □. ≥3 sf or ≥3 lf □. ≥160 sf or ≥260 lf 		*	enovat				Q.	Full Containme	nt with Nega	ative Pr	essure	9				
7 -100 01 01 -200 11		ט ט	emoliti	on		(4)	Œ.	Mini-Enclosure Glovebag Proc	edure							
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Location of			Locati Normal	ly		Do	porinting .				Management of the Control of the Con		emen /pe	t		
Asbestos-Containing Mat TO BE ABATE			ed Sole			stos Con		aterial (ACM)	Amou	int			m			
In Facility	<u>D</u>		todial S (12)		(i.e	surfa	cing, VAT	insulation, , or	(Spec SF or L		Remova	Repair	de 30	Enck		
(13)			-			other n	niscellane	ous)		- /	bya	1	Encapsulate	Enclosure		
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busemen	1 <u>† </u>			X	(21pe	เทรบโ	athen	<i>3</i> W	LF	X					
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Name of Registered Waste H	auler		I NI	JDEP Wa		1011	()			and the second						
Rovic Transport	No.	of Was			Registered L Bethlehem L		Согр									
City, State, Zip Code Riverdale, NJ 07457	ty, State, Zip Code verdale, NJ 07457						al Date	te City, State, Zip Code								
Completed by		Title					gnature /	196								
R. McDonald		Preside	ent			1	KI	10 could	·	Á						

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		State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT CHECK #: 7674										4			
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Dete of Notification (1) 5-4-12			Name o	FBuilding	Owner/C		(2)	DK	nog Cor i		Senio	r Sen	Ces		
Agencies Notified Type Natification			Street A		acon Charles and Charles		lace	IMI	msp.	(signatur		T.	1	П	
DEP DEP DEP DEP DESCRIPTION OF THE PROPERTY OF	· #		City, Sta	ete, Zip Ci	ode	82		L Dele	- WITT		imo:	-		-	
☐ Emergency (☐ DOH [ustification]	including	-	Name o	DHOK.			0142	2 1	Nelep	horie No	NTROL	8.		-	
D DCA D Cancellation			FAC	A) (C	A HOTE			- San Sali Saraha	1	St. Calcada			- demonstration	and and	
Name of Facility Where Abatement is Taking Pa.HW-EW	g Place (3))			Set Gride I	OIS	Type of	Facility (4				1, 4, 400	INF TO		
Street Address 33 Hollywood Place	· · · · · · · · · · · · · · · · · · ·						□ Sub	ool (K-12 chapter 8 er (i.e. pri	(Other t			dings,	hom	86,	
Hotokus							Square 1	eet	#dF		T	Bldg.			
County (6)			County (Code (7) USE ONLY	9		Current	Use (Prio		demolisi	ned)		£		
Name of Monitoring Firm Hired by Suikling C	Owner (8)		ASC	M No.	***************************************		of Abaten	nent Cont		*****	*COLUMN 1 MACH	4-1-1-			
Street Address		AND PROPERTY OF THE PERSON OF	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	14-119-A-119-A-12		The Control of the Control	Address owell Roa	d			-	Manager 1			
City, State, Zip Code					***************************************	City, S	tate, Zip C Rock, NJ I	Code	Nei-Alexander Lanca rens an	***************************************				-	
Project Manager for Manitoring Firm	Project Manager for Manitoring Firm							#! ≈ ₩	Tu	icense N	lo.				
Start Date (10) 5.7-12	Schedul	ed Cor	npletion i	Date (11)		Name	of OSHA I		Seniras	00156					
Occupancy Status During Abatement (Chec Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm.	eriod of A	ne) Matem				Street 280 H	Address uver Stre	et .	hdad flavordom, em				10-10 WILLY		
Other - Describe:					-			sack, NJ 07506							
Scope of Work (Check All That Apply) M ≥3 sfor≥3 # □ ≥160 sfor≥250 #		enovat emoliti) <u>1</u>	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure								
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Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Lites Ma	Normal ed Sole sintena 4odial S (12)	ly by nce/	Asbes (i.e	tos Con thermal	scription taining & systems sing, VAT niscelland	laterial (A insulation r, or	ICM)	Amo (Spe SF or	cify	BACKIES	Rapair	Encapsulate	Enclosure	
	Yes	Nic	N/A								1=		200	LE .	
Vancament			X	-pip	le ins	<i>olati</i>	on		29	LF	X				
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Name of Registered Waste Hauter			JDEP Wa		Cubic		N.	ame of Re	egislered	Landfill					
Rovic Transport			auler ID N 20785	N O.	of Was	## ≠ <i>1</i>	\$E	SI PA Be	ethlehem	Landfill	Corp.				
City, State, Zip Code Riverdale, NJ 07457			er Svii		Dispos	ONA	, B	ly, State, ethlehem				-			
Completed by R. McDonald	Signature of 1 Date						te to	4.1	n						

CHECK#: <u>7895</u>

Date of Notification (1)		Т	Name of Building Owner/Operator (2)										ilia.		
5.4.12					10116		d	medication or all and a solution	recent years		HOW OF	gyese	7		
Agencies Notified Type Notifica	ation			Address	11/110		1000	OF I	W	(C)	F	7			
□ EPA ဩ Initial			_ 6	-10	FIFT	1511	ZEEIT E	GEI	M	5	4	M			
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	tion)	1	1 1	of Contac	100	1.14	UU	Telephon	e Numb	er	1	1			
☐ DCA ☐ Cancell	ation				taalia)				
Name of Facility Where Abatement is T	aking Place (3)		FAC	ILITY IN	FORMAT	ION	Tona af Facility	ASBESTOS CO	HUMING	Ġ	N. SALISHER		PERMINI		
AGALIONS	aning 1 1200 (0)						Type of Facility	Contraction Contraction Contraction	TPIO	s. Street ere	-	······································			
Street Address							☐ School (K-☐ Subchapter	12)	K-12\				1		
6-10 FIFTH GARE	ET						⊠ Other (i.e.	orivate & comm	nercial b	uild	ings	hom	ies,		
City (5)					***********		etc.) Square Feet	# of Floors	-	Te	Bldg.	Λαο			
FAIR LANN							1700	2	3	2	-)()			
County (6)		T		Code (7)			Current Use (Pr		olished)					
PERIOEN			(STATE	USE ONL	y)		1285104		•						
Name of Monitoring Firm Hired by Build	ing Owner (8)		ASC	CM No.		Name A. M	of Abatement Co AC Contracting In	ntractor (9)	-				-		
Street Address	The second secon	-					Address owell Road		-		(anti-line and a second		P-11		
City, State, Zip Code	THE STATE OF THE S			TOTAL CONTRACTOR	**************************************	105 [Jowell Road		A malescope and the same	MENTANANA	Partie of the last		omat ma		
						City, S Glen	tate, Zip Code Rock, NJ 07452								
Project Manager for Monitoring Firm			Telep	hone No.			one No. 262-5841	Licens 001	se No.						
Start Date (10) 5 - 15 - 12	d Com	pletion I	Date (11))	Name	of OSHA Monitor	I Services Inc	Te difference contacts and a second	*****	Miles of the					
Occupancy Status During Abatement (I ☑ Facility Closed/Vacated During Ent ☐ Abatement Performed Outside of N ☐ Other - Describe:	ire Period of Ab	oateme	ent			Street 280 H City, Si	Address luyer Street tate, Zip Code			u delinone	Property of				
All Salve Control of C						наске	ensack, NJ 07606								
Scope of Work (Check All That Apply)															
型 ≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf		novatio molitio				[28]	□ Full Containment with Negative Pressure □ Mini-Enclosure □ Glovebag Procedure □ Non-Exempted (*) and Non-Friable Procedure								
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Location of	N	omall	y		Doc	scription						pe pe	T)		
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mair	d Solely ntenan odial St (12)	ce/	Asbe: (i.e	stos Cont thermal surfac	aining N	laterial (ACM) insulation, r, or	Amount (Specify SF or LF)	Control Structure Control		Repair	Encapsulate	Ench sure		
	Yes	No	N/A						- 10		and the same of th	8	Ø		
<u> bowernent</u>	-		X	P	upe IV	Isula	ition	50 L	FX						
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									and the second	.					
None of Decision						-			and the same	T	1				
Name of Registered Waste Hauler	Ha	DEP Wa uler ID N		Cubic Y of Wast	•	Name of F	legistered Land	Ifill		CONTRACTOR OF THE PARTY OF THE	amount of	AND LANCE			
Rovic Transport City, State, Zip Code		20	0785			رما د		ethlehem Land	Ifill Corp						
Riverdale, NJ 07457					Disposa	I Date	City, State Bethleher	, Zip Code n, PA 18015			100000				
Completed by R. McDonald	Title Presiden	nt				rature	1 / /		Date \hat{c}_{j}	<u> </u>	12				

	10								9	ME	C B	<u> </u>		111			
4/19/12						of Bi	uilding ey De	Owner / Opera	tor (2)	IIII	(0)	7 2012	1		1		
Agencies Notified Type Notification EPA					eet /	Addı	ress			11711	MAY	7 2016			1		
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□ DOH □ Emergency □ Cancellation							ontact Coch			1.		Telept	one	Num	ber		
							1	AL ARTHUR SHARE									
Name of Facility Wh	nere Abatem	ent is Taking Pla	ace i	3)	AC	ILIT	YIN	Type of Fac	rility (A)		7790		1100				
Furniture Store									School (K-12)								
Street Address								Subcha	Subchapter 8 (Other than K-12)								
Route 130 & 30																	
								Square Fee		# of Floors		Bldg. A					
City (5) County (6)					у Сс	ode	(7)	Approx. 5,	Approx. 5,000 2			1930's					
Collingswood ON HOLD					Ch	ec	k w			lished)							
Name of Monitoring	Name of Monitoring Firm Hired the Horizon Environmental project is taken										0)			-			
Horizon Environmental						13	lar	ch on ho	n on nota.			9) s, Corp.					
Street Address							- 0	Tourcet Addition			э, ос.р.						
PO Box 316					3859 Sylon B												
City, State & Zip Code								City, State 8	Zip Co			- 4					
Thorofare, NJ 08086								Hainespor		8036			about a				
					hone Number 848-0800				Telephone Number			License Number					
Scheduled Start Date (10) Scheduled Completion									609-702-0400 00862 Name of OSHA Monitor								
5/2/12 5/4/12							EMSL Analytical										
Occupancy Status D	uring Abater	nent (Check on	ly on	e)		2-110-25		Street Addre				•					
Facility Closed/Vacated During Entire Period of A						eme	nt	107 Haddo	n Ave.								
Abatement Performed Outside of Normal Hour					S			City, State &	City, State & Zip Code								
Describe:								Westmont	Westmont, NJ 08108								
Isolated Area																	
Scope of Work (Che	ck all that ap	ply)										200	7985				
≥3 sf or ≥3 lf	6		П	D	2001	ratio	. n			Full Contain	ment with I	Vegative	Pre	ssure)		
≥160 sf ≥260 lf				Renovation Demolition					✓ Negative Pressure Enclosur✓ Glove Bag Procedures				ire				
Z 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2				Demonition													
Location of Is L						1		Descriptio	n of	Non-Exempt	mpted and Non-Friable Procedure Amount Abatement Type						
Asbestos-Containing Norm								Asbestos-Cor	Asbestos-Containing			Ab	Abatement Type				
Material (ACM)				olely	by			Material (A	Material (ACM)					m	_		
TO BE ABATED				tena				(i.e., thermal s	(i.e., thermal systems			Re	Z,	nca	Enc		
in Facility (13)				odial (12		aff?		insulation, surfa	sulation, surfacing, VAT or other miscellaneous)			Removal	Repair	Encapsulate	Enclsoure		
(13)				No		I/A		or other miscer				<u> </u>	~	late	J.Te		
Exterior			П	П	_		Grav	Sheet Flooring	na .	70 5	SF		Ė				
Exterior						X		oor Tile & Mastic			195 SF		H	H	片		
						X				100	<u> </u>		H	H	H		
-						X							H	H	H		
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						$\overline{\mathbf{X}}$	3					X	H	H	H		
Name of Registered Waste Hauler					NJDEP Waste			Cubic Yards	Name	of Registere	ed Landfill	123			ш		
Horizon Disposal					Hauler ID No. of			of Waste					2				
City, State										V/00000		<u> </u>					
Frenton, NJ								Disposal Date 5/4/12	City, S Morris				2%				
Completed By (Print or Type)					tle	-	The same	Signature						-			
Kim Trumbetti					Admin.			1/1 :	4/19/12								
				-			76	CXA.				7/13	112				

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

Job #: 1205-1642 Check #: 2688

Date of Notification (1 5/3/12	1)						Owner / Operato	or (2)	Market Barrell				
	ype Notific	ation		***************************************	et Add	Control of the Contro	u IVII'S. Dana S	aewitz	n WI B	In			
							ning Avenue	ER	[]	II/IIr	1		
☐ DEP ☐ DOL	☐ Initia			100000000000000000000000000000000000000		& Zip		ME	Control of the Contro		1		
□ DOL		nded rgency				NJ 08 ontact	406	INT	7 2012	- Variable	- N		
DCA		cellation				ael Sa	ewitz	11111 M	AY P	Telèph	on e l	Numi	oer
						201.00 - 31-0200				<u>.</u>	- 5		
Name of Facility Whe	re Abatem	ent is Taking F	Place ((3)	ACILI	I Y INI	Type of Faci	lity (4)	ASSESTOS CONTROL	-	Maria Caralle		ă
Residential Proper	rty	ont to Taking I	1400 ((0)			School (K-12)	LICENO				
Street Address						44	Subchar	oter 8 (Other th	nan K-12)				
12 North Wyoming	J Avenue								mmercial building	gs, hon	nes,	etc.)	
City (5)		(C(C)			0 1	(7)		# of Fl		ldg. Ag	je		
Ventnor		County (6)	100	ounty	Code	(7)	1780	2		921			
AGUILIOI		Atlantic						(Prior if being	demolished)				
Name of Monitoring F	irm Hired b	v Building Ow	ner (8)	AS	CM No	Residentia	tement Contra	actor (0)	-			
Tiger Environment		,g	(0	,	1,10	OW NO			rvices, Corp.				
Street Address	> 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		100.11				Street Addre		осо, ос.р.		1		
16 West Elizabeth							3859 Sylon						
City, State & Zip Code Linden, NJ 07036	•						City, State & Hainesport						
Project Manager for M	Monitoring F	irm	Tele	phon	e Num	ber	Telephone N		License N	umbor			
Kelly Walton		2-2-70 /A11	908	862	4301		609-702-04		License	0086	32		
Scheduled Start Date	100000000000000000000000000000000000000	Scheduled Co	mpleti	on Da	ate (11)	Name of OSI						
5/17/12		5/17/12					EMSL Anal						
Occupancy Status Du Facility Closed	nng Abatei d∕Vacated I	ment (Check o Durina Entire F	nly on Period	ie) of Al	pateme	ent	Street Addres						
Abatement Pe						-,,,	City, State &						
Describe:							Westmont,						
Isolated Area								SANGEROUS PHILIPS MONORORISES INC.	19				
Scope of Work (Check	k all that ap	oply)						□ EI.C.		7.	_		
≥3 sf or ≥3 lf			\boxtimes	Re	novati	on			ntainment with Naclosure	egative	Pre	ssure	÷
≥160 sf ≥260 l	lf			De	molitio	n	\$		Bag Procedures				
							V 101		empted and Non	-Friable	e Pro	cedu	ıre
	ation of s-Containin	a		Loca			Description		Amount	Aba	atem	ent T	ype
	ial (ACM)	9		colely	Used by		Asbestos-Con Material (A		(Specify SF or LF)			П	
TO BE	ABATED		Mair	itena	nce or		(i.e., thermal s	ystems	O. O. Li	Removal	R	Encapsulate	Enclsoure
	acility (13)		Cust	odial (12)	Staff?		insulation, surfactor or other miscella	cing, VAT		von	Repair	nsd	Isou
			Yes	No	N/A	1	or other miscen	arieous)		<u>a</u>		late	<u>-</u>
Attic			П	\Box		Pipe	Insulation		100 LF		П		
Attic							glass Batt Insul	ation/Debris	20 SF		片	H	H
Attic					\boxtimes	Tank	Insulation	- 1	10 SF	X	П	Ħ	Ħ
					N					\boxtimes			
Name of Registered W	Vaste Haule	er		I L	IDEB	Masta	Cubic Yards	Name of Dr -	iotorod Lar Jell				
The critical content of the	racio i lauli				auler I		of Waste	Name of Reg	istered Landfill				
Horizon Disposal					2261	12	4	GROWS					
City, State							Disposal Date	City, State					
Trenton, NJ Completed By (Print or	r Tume'			1-0		1,11,1	5/18/12	Morrisville,	PA	,			
Kim Trumbetti	(ype)			Tit	_{ile} dmin		Signature	The state of the s		Date	•		
			133		uiiiiii	. (Pall			5/3/1	2		



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

Date of Notification (1) 5 - 4 - 2012				of Building S. E →		Operator (2)	ME	BEIW	F	Th	7	·
Agencies Notified Type Notification	-		Street	Address	,,,			9 13 11 11	[23	1		9
EPA Initial Amended		- 1	City St	ate, Zip Co	HAL	LEY	ROAL	NV 7 20	10	$\parallel \downarrow \mid$	#	
DOL Amendment			Sou	ITH	PL	AINFIE	27 7	T 07	580	الر	4	
Emergency (i justification)	including	Ī	Name o	of Contact		1	L	Telephone Ni	ımhor	1		
X DCA Cancellation				URE		THOMA	S MOD	4			-	
Name of Facility Where Abatement is Taking	Place (3	3)	PAC	LIII INFO	JAMAI		pe of Facility (4	in the second second second	afficience an			-
PSE+G Street Address							School (K-12				v	
CORNER OF TRENTON	1 01/	11	ET	14)			Other (i.e. pri	(Other than K-1 vate & commerc	ial bui	ldings	, hom	es,
City (5)) 4 (ساس	11 10	//0		Sq	etc.) - uare Feet	# of Floors		3ldg. /	Age	
ELIZABETH				-			Rx. 8000		1	50.00 (- 10 00-0)		YR5
County (6) UNION				Code (7) USE ONLY		Cu	rrent Use (Prior	if being demolis	hed)			
Name of Monitoring Firm Hired by Building C	wner (8)	L	ASCI	M No.		Name of A	batement Contr	actor (9)	11,0			
Environmental Tactics			0045	5	Verie			OF AMERIC	Α			
Street Address 64 Broad St						Street Add 396 WH	ress ITEHEAD A'	√E				40
City, State, Zip Code Matawan, NJ 07747				-	- 227	City, State,	Zip Code RIVER, NJ (08882	7.4	2 (4		
Project Manager for Monitoring Firm Tom Geiger			Telepho 732-29	ne No. 90-2217	1	Telephone 732-432		License I	No.			
Start Date (10) 5-21-2012			npletion	Date (11)			SHA Monitor SYSTEMS	OF AMERIC	Α	E		-
Occupancy Status During Abatement (Check	Only On	e)		10		Street Add						-
Facility Closed/Vacated During Entire Po	eriod of A	baten	nent				ITEHEAD A	/E.				
Abatement Performed Outside of Norma Other – Describe: Nasated a	rept	four	ala	tenen	ŧ	City, State, SOUTH	Zip Code RIVER, NJ (08882				
Scope of Work (Check All That Apply)					1	-						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	enova emolil				日為	Mini-Enclosure Blovebag Proce	t with Negative I dure *) and Non-Frial					
	Is	Locati	ion			EN I	von-Exempled () and Non-Filal	JIE FIO	10.000	emen	t
Location of	N	lormal d Sole	ly			scription of				Ty	ре	-
Asbestos-Containing Material (ACM) TO BE ABATED	Mai	ntena	nce/		thermal	taining Mater I systems insi	ulation,	Amount (Specify	R	70	Enc	ᄪ
In Facility (13)	In Facility Custodia (13)					cing, VAT, or niscellaneous		SF or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A						a		ate	re
2ND FIR. CONTROL ROOM		X		ACM	FI	OOR PAN	ELS	320SF	X			
outside		X		ACM				3 LF	×			
		_ 1.25			-							
			JDEP W	aste		Yards	Name of Re	gistered Landfill				-
WASTE MANAGEMENT			auler ID 125	No.	of Wa	ste 15	GROWS					
City, State / ELIZABETH, NJ					1000	3 - 2012	City, State MORRIS	VILLE, PA				
Completed by	Title			1		ignature /	1	Da		,		\dashv
CAROL RAIMO	OFF.	38	Ma	R		Las	al Lac	mo &	5-4	1-2	010	2

CX#004225

State of NJ

D&S Proj. #: MS 12-159				8:60 and 12:120	Name and Address of the Owner, where the Owner, which is	ECEI	VE	Petrophysical Street	A Company of the Comp	4	
Date of Notification (1)	MIC	of Building Own		A Diginal of the Control		MAY 7	2012		2)		
Agencies Notified Type Notified Initial Amended	5 P	Address LYMOUTH R	OAD			ASBESTOS CO	ING	Lucian			
DOL Amendment		State, Zip Code MMIT, NJ			4	Aldring and the Section of the Secti	Section Section				
□ DOH (including justification justification in the content of the content	Name	of Contact	DONE -			Telephone	Number				
		FACI	LITY INFORM	ATION							
Name of facility where abatemen	nt is taking place (3)				ype of Facility (4					
MICHAEL CARDONE							pter 8 (Ot	her th	ian K-	-12)	
Street Address							Private/Co lomes, et		rcial		
5 PLYMOUTH ROAD	- 100				_		of Floors		Blo	dg. Ag	је
City (5)	County (6			County Code (7) (State use only)	7 -	Current Use (Price	or if being	j dem	olishe	ed)	
SUMMIT Name of Monitoring Firm Hired b	UNION ov Bidg, Owner (8)		ASCM No.	Name of Abat	ement Co	ntractor (9)					
g	,3, (-/		7100M 110.	D & S RES							
Street Address		terrore management.		Street Address	s						
				20 Califor			-				
City, State, Zip Code				City, State, Zip Paterson,		3					
Project Manager for Monitoring Fi	rm	Phone Numb	er	Telephone Nu		- 1	License	Numb	er		
				973-345			00)159			
Start Date (10)	Sched. Co	mpletion Date (11)	Name of OSH D & S Re							
05/04/12	05/11/12	*		Street Address		, mc.					
Occupancy Status During Abatem				20 Californ	nia Aven	ue					
Facility closed/vacated duri	de of normal facili			City, State, Zip Paterson,		2	tā Z			¥	
Other-Describe: NORMAI Scope of Work (check all that ap	Control of the Contro			- Taterson,		Containment w/i	negative	nress	uro		_
	Renovation Demolition				☐ Mir ☑ Glo	ni-enclosure ovebag procedure n-Exempted (*) a)	• 3620.00000000		duro	
Location of	Is location nor	mally used solely			LINO	II-Exempted () a	III IVOII-II	R	R	E	E
asbestos-containing material (acm) to be abated in facility (13)	by maintenand staff(12)		Description material (A	n of asbestos-contain ACM)	ning	Amount (Specify SF LF)	or	e m o	e p a	n c a	n c L
		No N/A						e e	-	р	
BASEMENT LAUNDRY RI	M		PIPE INSU			4 L FT 8 L FT			님	片	H
BASEMENT BOILER RM		X	PIPE INSU			3 L FT (ELB	OWS)		님	H	ዙ
BASEMENT WATER HEATER RM			PIPE INSU	LATION		3 L F1 (ELD	O W 3)		片	H	H
								Ħ	Ħ	H	恄
Registered Waste Hauler D & S RESTORATION, INC	NJDEP H C. 13506		ubic Yards of V YD		istered La WN, RE	ndfill ESOURCE REC	COVER	Y			
City, State		Disposal D		City, State	OHA! P						
PATERSON, NJ 07503 Completed by (Print or Type) BOGDAN JOLDZIC	Title PRESIDENT	05/07/1	Signature	TULLYTO	JWN, PA	4	Date 05/02/	12	7.		
ASD 41		form for asbesto	s licensure exe	empted activities.			- 05/02/			-	

State of NJ Notification of Asbestos Abatement

2012-89 B & G proj. #:

(Pursuant to NJAC 8:60-7 and 12:120-7)

Check # 5234

	(4)			VV ESAV									
Date of Notification		Nan	ne of Build	ding Owne	er/Operator (2)			and the second second	And the special specia	Frankis			
0 4 1/13 10		St	Francis	Resident	ial Communi	ity	n a distance of the second	manufacture and a Co.	2 11 111	F	1	111	
Agencies Notified EPA	Type Notification	110	et Addres		D 1		7				7	11	
☐ DEP	✓ Initial		State, Zi	ond Sprin	ng Road			1111		10	ij.	3)	
☑ DOL	☐ Amendm	ent	No react Season Commit	70	og:		1	YAM IM	7	2012	1/4	RESIDENCE.	
	_		Denville, ne of Cont	NJ 0783	4			/// Telephone	Number		-	7	亡
	☐ Cancella	tion					1	P.L.I.		NTROL	8		
☐ DCA		<u>_</u>	Richard S	Scudder					ســــانا		- Contract of the Contract of	and the second	
				FACI	LITY INFORM	ATION			and the h				
Name of facility wh	ere abatement is	taking place	(3)					Type of Facility (4) (K - 12)				
St Francis Resid	lential Commu	nity (non s	ub 8)						pter 8 (Ot			12)	
Street Address									Private/Co lomes, et		cial		
122 Diamond S	nring Road								of Floors		Bk	dg. Ag	je
City (5)	pring road	County	(6)			Cou	nty Code (7)			_			
Only (O)						(Stat	te use only)	Current Use (Pri				d)	
Denville, NJ 0	7834	Morr						Health care fac	cility (no	n suc	(8)		_
Name of Monitorin	g Firm Hired by E	Bldg. Owner	(8)		ASCM No.		Name of Abatement C						
					n/a	_	B & G Restoration	n, Inc.					
Street Address							105 Ryerson Roa	d				2	
						-	City, State, Zip Code	u	-	-			
City, State, Zip Cod	е						Lincoln Park, NJ	07035					
Project Manager for	Monitoring Firm		I Pho	one Numb	er	-	Telephone Number	0,000	License	Numb	er		
Project Mariager 10	Worksoning 1 iiiii						973-696-6869		0378				
	4- (40)	I School	Completio	n Date (11	1)	-	Name of OSHA Monit	tor					
Scheduled Start Da	te (10)			ii Date (1	.,		B & G Restoration	on, Inc.			-		
5/14/2012		5/16/2				_	Street Address						
Occupancy Status				mont.			105 Ryerson Roa	ıd					
Facility closed Abatement per Describe:	d/vacated during erformed outside	of normal fa	cility hours	nent. s-		_	City, State, Zip Code						
Other-Descri	be:					-	Lincoln Park, NJ	-07035					
Scope of Work (ch	eck all that apply	1)							242				
Demolition	\boxtimes	Renovation				⊠ F	full Containment w/neg	ative pressure	Glovet				
3 sf or > 3 If	\boxtimes	≥160 sf or ≥	260 If			⊠ v	Mini-enclosure	L	Non-fr	iable p	oroce	dure	
Location of		Is location			/					e	R	E n	E
asbestos-cor		by mainten staff(12)	ance/cust	odiai			sbestos-containing	Amount (Specify S	For	m	р	С	n
material to be abated in fac		Yes	No	N/A	material ((ACIVI)		LF)		v e	i	a p	L
Room A				X	pipe insula	tion		30 lf		X			
Room B				IX	pipe insulat	tion		60 lf					닏
Room C				X	pipe insulat	tion		250 lf					닏
Room C				X	heat exchar	nger ir	nsulation	90 sf		X	닏	님	片
	1 1 90										Ш		
Registered Waste		NJDEI 1956	Hauler II		Cubic Yards of	Waste	Name of Registered Tullytown Resou	Landfill	Center				
B & G Restorati	on, inc.	1930		Disposal D	6 yards Date	-	City, State	nee as receivery			1		
City, State Lincoln Park, N	J 07035			5/17/20			Tullytown, PA					_	
Completed by (Prin		Title			Signature		Gordana Luna		Date			111	
Gordana Luna	10 to	Treasurer					Gordana Luna		4/30/1	2			

CX# 4846

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

Date of Notification (1)				Man	f D. :!-!!		(0)	141	-	1 20	112	1
04 /	30 /	12				ng Owner/Operator		MAY III				1
							riais	7 7		-0171	8 10c	
Agencies Notified ⊠ EPA	Type Notification	on		- 1900	et Address		Sec.	ASBE	STOS	COMIT	,	-
☑ DOLWD	☐ Amended			1000		ad Street			- AND SHAPE	Die or		
☑ DHSS	Amendment				State, Zip			Constitution of the Consti	1	Distriction of the		
□ DCA	☐ Emergency	(includir	g		7	g, NJ 08865-127	1					
(NJAC 5:23-8)	justification) Cancellation				e of Conta		衛	Telephone Nun	nber			
	Caricellation	1.			bert Sny							
Name of Facility Miles of Al				FA	CILITY	NFORMATION						
Name of Facility Where Al				_			Type of Facility (0.			
Avantor Performance	e Materials -	Buildir	ng 13	5			☐ School (K-12) ☐ Subchapter 8		2)			
Street Address 600 N. Broad Street							Other (i.e., pr homes, etc.)	ivate and comme	ercial b	ouildir	ıgs,	
City (5)					14		Square Feet	# of Floors	TE	Bldg. /	Age	
Phillipsburg, NJ 088	65-1271						4000	1		60		
County (6)	33			Cou	nty Code (7)(STATE USE ONLY)	Current Use (Price	or if being demoli	shed)			
Warren							42.					
Name of Monitoring Firm H	lired by Building	g Owner	(8)	ASCN	l No.	Name of Abatem	ent Contractor (9)					-
Health & Safety Serv	rices, Inc.					Alliance Env	ironmental Syst	tems				
Street Address		100000			-	Street Address				1		
318 12th Street						550 East Uni	on Street					
City, State, Zip Code						City, State, Zip Co	ode		4	9.39	19.50	
Hammonton, New Je						West Cheste	r, PA 129382					
Project Manager for Monito	oring Firm			ephone		Telephone No.		License No.				
Jim Proctor					04-8850	610-701-9000		00508				
Start Date (10)	The second secon	eduled C			Della Alle March and Control of the	Name of OSHA M	200.000.3 20.0		.78			
		05_ /		1 /	12	Vertex Engin	eering					
Occupancy Status During A	-					Street Address						
☐ Facility Closed/Vacated ☐ Abatement Performed C							re Pike, Suite 20	01				
Time of Abatement: 7A					scribe	City, State, Zip Co Glen Mills, PA			(8)	332		
Scope of Work (Check all to	hat apply)		30000				ainment with Nega	ative Pressure				474
≥3 sf or ≥3 lf≥160 sf or ≥260 lf		⊠ Re □ De				☐ Mini-Encl	osure		re			
		100	Loca		T				1	atem	ent T	vpe
Asbestos-Containing Ma	Location of Asbestos-Containing Material (ACM) TO BE ABATED Normally Used Solely by Maintenance/					Description of stos Containing Mat ., thermal systems in surfacing, VAT,	erial (ACM) nsulation,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
(13)		Yes	(12) No	N/A		other miscellaned	ous)				late	Ф
Bld. 135 Boiler House -	Bld. 135 Boiler House - Boiler 3				Pipe Ins	sulation		50 LF	×			
									П	П	П	П
					2	100			1] [
			55797	-	1200				닏	Ш	ш	ш
							1 71					
Name of Registered Waste N.E.T.S.	Hauler		190	IJDEP V lauler IE 18947	No.	Cubic Yards of Waste 10	Name of Registe BFI Imperial					
City, State Hazelton, PA				.5041		Disposal Date TBD	City, State Imperial, PA			2		
Completed By (Print or Type		le Estimat	or			Signature	ML	Dat	e //	13	1/	1
SR-41	1						V ·		//	y	1	4

ASB-41 MAY 11

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

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

Date of Notification (1)				LAIR					and second			111
	09 /	12				ling Owner/Operator erformance Mate		YAM IM	7	20	12	
⊠ EPA [ype Notification Initial Amended	on		A CONTRACT	eet Address 00 N. Bro	ad Street		ASRES	09.00	WTRO	IL &	1
☑ DHSS	Amended Amendmen	+ #002		City	, State, Zip	Code	į	ASELS	ICEN:	HNG		Table of Party and
] Emergency		ina	P	hillipsbu	rg, NJ 08865-127	1		AND DESCRIPTION OF THE PERSON NAMED IN		والمفادرين	ggestalen er
(NJAC 5:23-8)	justification)	3	Nan	ne of Conta	act		Télèphone Nur	nber	No.		
	Cancellation	n		R	obert Sn	yder	Francisco					
				F	ACILITY	INFORMATION						
Name of Facility Where Aba							Type of Facility	(4)	-	-	-	
Avantor Performance	Materials -	Buildi	ng 13	35			School (K-1	2)				
Street Address				- W			Subchapter	8 (Other than K-1 private and comm	2)	huildi		
600 N. Broad Street							homes, etc.)	ercial	bundi	igs,	
City (5)	E 4074						Square Feet	# of Floors		Bldg.	Age	
Phillipsburg, NJ 0886	5-12/1						4000	1		60		
County (6) Warren				Co	unty Code	(7)(STATE USE ONLY)	Current Use (Pr	ior if being demol	ished)			
	and her Desirate		(0)									
Name of Monitoring Firm Hi		g Owne	r (8)	ASC	/I No.		ent Contractor (9)		***			
Health & Safety Service Street Address	ces, Inc.						rironmental Sys	stems				
318 12th Street						Street Address						
City, State, Zip Code						550 East Uni						
Hammonton, New Jer	COV 09027					City, State, Zip C				-00		
Project Manager for Monitor			1-		N	West Cheste	r, PA 129382					
Jim Proctor	ng riini			ephone		Telephone No.		License No.	9			
Start Date (10)	Sch	adulad i	D. C.		04-8850 ate (11)	610-701-9000		00508				
_5 / _02 / _	12				12	Name of OSHA M						
Occupancy Status During Ab	U. C.					Vertex Engin	eering					
☐ Facility Closed/Vacated D				mont		Street Address						
☐ Abatement Performed Ou	tside of Norma	al Facili	tv Hou	rs - De	scribe		re Pike, Suite 2	201				
Time of Abatement: 7AM	PM/3:	30PM-	.,	AM	SOLIDO	City, State, Zip Co		1 3		100		
Scope of Work (Check all tha	t apply)				***	Glen Mills, PA	4 19342					
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 	к арріуу		enovat emoliti			☐ Mini-Encl ☐ Glovebag	Procedure	ative Pressure ı-Friable Procedu	~			
		Is	s Loca	tion	T .		1	T Tiddle T Todeadi		atem	ont T	ima
Location of			Norma			Description of	F .					7.
Asbestos-Containing Mate			aintena		Asbe	stos Containing Mat ., thermal systems in	erial (ACM)	Amount	Remova	Repair	Encapsulate	Enclosure
IN Facility		Cus	todial	Staff?	(1.6	surfacing, VAT,		(Specify SF or LF)	ova	i iii	psu	nso
(13)		Vac	(12)	Taux		other miscellaneo	ous)	•	-		ilate	6
Did 425 Dallan Hanna - 5	5	Yes	No	N/A	-							
Bld. 135 Boiler House - E	soller 3		Ш		Pipe Ins	sulation		50 LF				
									П			
			П			- tourist			H			믬
Name of Registered Waste Ha	auler	1-1		JDEP V	Vaste I	Cubic Yards of	Name of David	and Lawren		Ш	Ц	Ш
N.E.T.S.	adio!			auler IC		Waste	Name of Register					
City, State				18947		10 Diameter Date	BFI Imperial					
Hazelton, PA			- 12			Disposal Date	City, State			1	7	
Completed By (Print or Type)		- 1		-	* *	TBD	Imperial, PA			1	1	
John Heemer	Title	e stimat	or			Signature	Spane	Date	11.	3/	10	
SB-41 AY 11		Do '			for achoeto	" 1/0/			10	11	1/	

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

	12		N		ing Owner/Operator erformance Mate	A D. L. Martin, M.	ECE	l W		- Constitution	1
Agencies Notified Type Notifi ☐ EPA			S	treet Address 600 N. Bro			MAY	7 20)12	4	J
-	ed ment #00°		C	ity, State, Zip	Code	1 10 0	1			1	
☐ DCA ☐ Emerge		•		Phillipsbur	rg, NJ 08865-127	1	L ACCEPTANT	voertra/	N 0	_}	
(NJAC 5:23-8) justifica	tion)	3	N	ame of Conta	ect		Telephone Nu	mber	11.0		
☐ Cancell	ation			Robert Sny	/der					S. P. Feet State S. P.	-
		20078		FACILITY I	NFORMATION		1 to the second of the	-12 7 W		0.000	_
Name of Facility Where Abatement is	Taking P	ace (3				Type of Facility ((4)			-	_
Avantor Performance Materia	ls - Build	ding '	135			School (K-12					
Street Address				1965		→ □ Subchapter 8	(Other than K-1	2)			
600 N. Broad Street						Other (i.e., pr homes, etc.)	ivate and comm	ercial	buildi	ngs,	
City (5)						Square Feet	# of Floors		Bldg.	Λαο	_
Phillipsburg, NJ 08865-1271						4000	1	1'	60	Age	
County (6)			10	County Code	(7)(STATE USE ONLY)	Current Use (Price		liahad\	1000		_
Warren				, , , , , , , , , , , , , , , , , , , ,	(Nomine due one i)	Ourient Ose (File	or it being demoi	isnea)	B.		
Name of Monitoring Firm Hired by Bui	lding Own	er (8)	AS	CM No.	Name of Abatem	ent Contractor (9)			-	-	
Health & Safety Services, Inc.					Alliance Env	ironmental Sys	tems				
Street Address			7.1	- 100 to	Street Address			-	- 177		-
318 12th Street					550 East Uni	on Street					
City, State, Zip Code					City, State, Zip Co	ode				100	_
Hammonton, New Jersey 0803	7				West Cheste						
Project Manager for Monitoring Firm	7/	T	elepho	ne No.	Telephone No.	•	License No.				_
Jim Proctor			(609)	704-8850	610-701-9000	ľ	00508				
Start Date (10)	Scheduled	Com	pletion	Date (11)	Name of OSHA M	Ionitor	1 0000				_
04 / 10 / 12	04	1	13	/ 12	Vertex Engin	eering					
☐ Facility Closed/Vacated During Enti ☐ Abatement Performed Outside of North Time of Abatement: 7AMPN	ormal Fac // <u>3:30</u> PM	ility Ho	ours - [t Describe	City, State, Zip Co Glen Mills, PA						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	1000000	Renov Demoi		1 10		osure		re			
-			cation					Ab	atem	ent T	Γνι
Location of Asbestos-Containing Material (ACM	U		nally olely by	/ Ash-	Description of				1	T-	1
TO BE ABATED	, N		nance/	l (i e	stos Containing Mat ., thermal systems in	erial (ACM)	Amount (Specify	Remova	Repair	Encapsulate	
IN Facility	Ci	istodia (12	al Staff	?	surfacing, VAT,	or	SF or LF)	oval	=	nsd	
(13)	Yes	1		Δ	other miscellaneo	us)	¥8 12			late	
ld. 135 Boiler House - Boiler 3				Pipe Ins	sulation		FOLE	N			-
				Tipe ms	, and to m		50 LF		ᆜ		1
<u> </u>	- 0								Ц	Ц,	1
The second weather		耑	+						Ш	Ц	L
ame of Registered Waste Hauler				Waste	Cubic Yards of	Name of Register			Ш		
N.E.T.S.		9.20	Hauler 1894	ID No.	Waste 10	BFI Imperial	eu Landill				
			.00		Disposal Date TBD	City, State Imperial, PA			1124		
ity, State Hazelton, PA					100	imperial, I'A		2.00			
Hazelton, PA	Title Estima	itor			Signature	A)	Dat	e//	,/,	2	223

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

John Heemer	E	Suma	.UI			1 / 1 /	V		8 -			
ompleted By (Print or Type		stimat	or			Signature	1	Dat	e /	1		
ity, State Hazelton, PA						Disposal Date TBD	City, State	10				70.73
N.E.T.S.				Hauler I 1894	D No. 7	Waste 10	BFI Imperial	es candini	- September			
ame of Registered Waste I	Hauler	1			Waste	Cubic Yards of	Name of Register	red Landfill]Ц.		Ш	L
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			П	+	1-			4	12			L
TO THE RESERVE TO THE	* 1							JU LIF				1
ld. 135 Boiler House -	Boiler 3	Tes		, IN/A	Pipe Ins	ulation		50 LF				
Location of Asbestos-Containing Ma <u>TO BE ABATI</u> IN Facility (13)	aterial (ACM)	M	ainter	olely by nance/ il Staff?	(i.e	Description of stos Containing Ma , thermal systems surfacing, VAT, other miscellane	terial (ACM) nsulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	
			s Loc	ation		☐ Non-Exe	mpted (*) and Non	-Friable Procedu		atem	ent T	
Scope of Work (Check all t ☐ ≥3 sf or ≥3 If ☑ ≥160 sf or ≥260 If	hat apply)		enov		8 45 75	⊠ Full Con □ Mini-End	tainment with Nega	ative Pressure		NI NI		9000
Abatement Performed (Time of Abatement: 7A	Outside of Norm MPM/ <u>3:</u>	al Faci 30PM-	lity Ho	ours - D _AM	escribe	City, State, Zip C Glen Mills, P	ode					
☐ Facility Closed/Vacated	During Entire P	eriod o	f Aba	tement			ore Pike, Suite 2	01				
Start Date (10) 04	12	04_	/	06_	Date (11) /12	Vertex Engir						
Jim Proctor				(609)	704-8850	610-701-900		License No. 00508				
Project Manager for Monit			T	elepho	ne No.	Telephone No.	er, PA 129382	Linemer M.			<i>5</i>	
City, State, Zip Code Hammonton, New Jo	ersev 08037					City, State, Zip (
318 12th Street						550 East Un	The state of the s					
Street Address						Street Address	vironmental Sys	stems				200
Name of Monitoring Firm Health & Safety Ser		g Own	er (8)	ASO	CM No.		nent Contractor (9)					
Warren		11.00			and the second of the second	· · · · · · · · · · · · · · · · · · ·	32 OSC (F)	ior it being deffic	marie0	,		
County (6)				10	County Code	(7)(STATE USE ONLY		ior if being demo	lichen	60		_
City (5) Phillipsburg, NJ 08	365-1271						Square Feet 4000	# of Floors		Bldg.	Age	Total Control
600 N. Broad Street		and the same		-			Other (i.e., p	rivate and comn	nercial	build	ings,	
Street Address	ce materials .	Bullo	iing	135			☐ School (K-1)	2) 8 (Other than K-	12)			
Name of Facility Where A Avantor Performan							Type of Facility					
		102			FACILITY	INFORMATION						
	☐ Cancellatio	ח	11/052		Robert Sn	yder	wall to a	Short Burning		T. 7137 (100 A)		
☐ DCA (NJAC 5:23-8)	☐ Emergency justification	(inciu i)	aing	N	ame of Cont	the same of the party of the same of the s		LICERSING Telephone No	ımber			9
☑ DHSS	Amendmer				ity, State, Zi Phillipsbu	p Code irg, NJ 08865-12	71	ASSESTOS CONTA	UL &	ATT HOUSE		COLUMN
⊠ DOLWD	Amended				COMPANIES CONTRACTOR	oad Street						
Agencies Notified EPA	Type Notificat ☑ Initial	ion		S	treet Addres			MAY 7 2	012	1	1	
										- 41		
	21 /	12			Avantor F	erformance Mat	erials				111	

State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60 and 12:120) D&S Proj. #: MS 12-158 Name of Building Owner/Operator (2) Date of Notification (1) 2012 |0|5|/|0|2|/|1|2|MICHAEL CARDONE MAN Agencies Notified Type Notification Street Address | Initial ☐ EPA STOS CONTROL 42 HAWTHORNE PLACE Amended DEP City, State, Zip Code FICEMOI Amendment #: DOL. SUMMIT, NJ Emergency (including DOH. Name of Contact Telephone Number justification) ☐ DCA MICHAEL CARDONE Cancellation FACILITY INFORMATION Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) MICHAEL CARDONE Subchapter 8 (Other than K-12) Street Address Other (Private/Commercial Bldgs./Homes, etc. **42 HAWTHORNE PLACE** Square Feet # of Floors Bldg. Age County (6) County Code (7) City (5) (State use only) Current Use (Prior if being demolished) UNION SUMMIT Name of Monitoring Firm Hired by Bldg. Owner (8) Name of Abatement Contractor (9) ASCM No. D & S RESTORATION, INC. Street Address Street Address 20 California Ave. City, State, Zip Code City, State, Zip Code Paterson, NJ 07503 Telephone Number License Number Project Manager for Monitoring Firm Phone Number 973-345-8020 00159 Name of OSHA Monitor Sched. Completion Date (11) Start Date (10) D & S Restoration, Inc. Street Address 05/15/12 05/25/12 Occupancy Status During Abatement (Check only one) 20 California Avenue Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Other-Describe: NORMAL HOURS Paterson, NJ 07503 Scope of Work (check all that apply) Full Containment w/negative pressure Mini-enclosure \boxtimes >3 sf or >3 If Glovebag procedure >160 sf or ≥260 lf Demolition Non-Exempted (*) and Non-friable procedure Is location normally used solely E Location of E е by maintenance/custodial е n asbestos-containing Amount Description of asbestos-containing n m staff(12) p C (Specify SF or material (acm) to be material (ACM) 0 a abated in facility (13) N/A Yes No PIPE INSULATION 85 L FT BASEMENT BOILER RM 30 L FT PIPE INSULATION M BASEMENT STORAGE RM PIPE INSULATION 35 L FT BASEMENT LAUNDRY RM PIPE INSULATION 45 L FT BASEMENT LIVING RM Cubic Yards of Waste Name of Registered Landfill Registered Waste Hauler NJDEP Hauler ID# 13506 TULLYTOWN, RESOURCE RECOVERY D & S RESTORATION, INC. 2 YDS Disposal Date City, State City, State 05/18/12 TULLYTOWN, PA PATERSON, NJ 07503 Signature Date Completed by (Print or Type) Title 05/02/12 **BOGDAN JOLDZIC** PRESIDENT

Do not use this form for asbestos licensure exempted activities.

ASR_41

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

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

				(Pur	suant to NJA	C 8:60 a	nd 12:120)	CK #21862	and the same of th			
Date of Notification (1)					Name of Bui	Iding Ow	ner/Operator (2)	OK #21002	1		3,00	
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Agencies Notified	Type Notifica	tion		Will be the second	Street Addre		200	THE STATE OF THE S	11/1	1		
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DEP	☐ Amende	ed Ame	endmer	nt#	City, State, Z			110	1/2	1		III-SHE-SALE
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□ DOH	justificat				Name of Cor		1 HULL		Tela	inhone	Num	ber
□ DCA	☐ Cancella				JOSEPH A		NE / // ()	MAY				
					FACILITY IN			OS CONTRO	V	-	_	3
Name of Facility Where Ab	atement is Ta	king P	lace (3		AOILITT III	1 Ortion	1011	Type of Facility (4)	. 25	1 2 2 2 2 2 2	, o e .	
PRIVATE RESIDENCE		3		,			1	School (K-12)	g-balleton.			
537 CRYSTAL AVENUE							15	Subchapter 8 (Oth	er tha	n K-1	2)	
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27 WARION ROAD EAS	91	-						Square Feet				. Age
PRINCETON							4 mm. 4 mm.	>			1	
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Name of Monitoring Firm H	ired by Buildir	na Owr	ner (8)		ASCM No.	Name o	of Abatement Con	fractor (9)				
N/A	mod by buildin	ng Om	101 (0)		7.00			RONMENTAL INC.				
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Olicel Address						Benches a	CK FOREST F	POAD				
City, State, Zip Code							ate, Zip Code	COAD				
Oity, Otato, Zip Oddo							LTON, NJ 0869	1				
Project Manager for Monito	ring Firm	Telen	hone N	lo.		Telepho			Lice	nse N	0	
1 Toject Wallager for Worke	g	Tolop	110110 1			609-89			0067		•	
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5/3/2012		5/3/20		, o.i.ipioi	aon Bato (11)	Parameter control	ITECH SERVIO	~F				
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Other - Describe	Cutside of 14	ommu.	domey				LLETTE,NJ 08	735				
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X $\geq 3 \text{ sf or } \geq 3 \text{ lf}$	illat apply)				Renova	tion		☐ Mini-Enclosure		3		
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					pa Domone			☐ Non-Exempted (*)		-Friah	le Pro	cedure
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		Variation 1997	mally I		Description	of Asbe	stos Containing			T	-	
Location of Asbestos-C		100000000000000000000000000000000000000	Solely I				thermal systems	Amount (Specify SF or	Re	R	ncs	E
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Name of Registered Waste	Hauler				Hauler ID No.		Waste	Name of Registered Lan	idilli			~ .
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City, State				-	1		Disposal Date	City, State				
HIGHTSTOWN, NJ							5/4/2012	MORRISVILLE, PA				.
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DAVID D'ANDREA		II KES	IDEN			1/4/11	No to		JI 41 4		G 1	

^{*} 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)

Agencies Notified Type Notification Type Initial Amended Amended DOL Amended Amended DOL Amended Amended DOL Docardinate Is Initial Dole Docardinate Is Initial Dole Dole Docardinate Is Initial Dole Docardina	5		·	T	(D 3) (F			##T *	- A CONTRACTOR OF THE PARTY OF	11 1		31	111	
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DOH	DEP			City,	State, Zip C	ode			.†			, c, a - m	Ī	1
DOH	■ DOL		ina	New	York, NY	10271		116 /	-	crack Till	KI KUL	S		أس
Name of Facility Where Abatement is Taking Place (3) Building Street Address 800 South Ave. City (5) Plainfield, NJ County (6) Union Name of Monitoring Firm Hired by Building Owner (8) ASC M No. ARET ACT (100 Street Address City, Size, Zip Code Bridgewater, NJ Oseady Robert (11) Salte (11) Street Address Coupancy Status During Abatement (Check Only One) Astar Date (10) Facility (North Actions of Abatement Outside of Normal Facility Hours Coupancy Status During Abatement (Check Only One) Astar Date (10) Astar Date (10) Astar Date (10) Astar Status During Abatement (Check Only One) Astar Date (10) Astar Status During Abatement (Check Only One) Astar Date (10) Astar	⊠ DOH		mig	Name	e of Contact			31	Telep	hone Nú	mber_	manage (4	-	
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Project Manager for Monitoring Firm Frice Houseknecht (908) 218-1108 (973) 759 - 5000 (90781 Start Date (10) Scheduled Completion Date (11) Start Date (10) Start Date (10) Scheduled Completion Date (11) Start Date (10) Start Date (11) Start Date (10) Start Date (11) Start Date (10) Start Date (10) Start Date (11) Start D								namen Sila na mana ana	4					
Eric Houseknecht Start Date (10) Scheduled Completion Date (11) Start Date (10) Scheduled Completion Date (11) S-25-12 The MACK Group, LLC. 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) 23 sf or 23 lf 2160 sf or 2560 lf Renovation Demolition Renovation Demolition Renovation Demolition Renovation Demolition Renovation Demolition Renovation Demolition Full Containment with Negative Pressure Mini-Enclosure Mini-Enclosure Mini-Enclosure Mon-Exempted (1) and Non-Friable Procedure Non-Exempted (2) and Non-Friable Procedure Non-Exempted (3) and Non-Friable Procedure Non-Exempted (5) and Non-Friable Procedure Non-Exempted (6) and Non-Friable Procedure Non-Exempted (7) and Non-Friable Procedure Non-Exempted (8) and Non-Friable Procedure Non-Exempted (8) and Non-Friable Procedure Non-Exemp		Eirm		Tolon	hono No					iconno N	lo.			
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Demolition Mini-Enclosure Glovebag Procedure Non-Exampled (*) and Non-Friable Procedure Non-Exampled (*) and Non-Exampled	Scope of Work (Check All That	Apply)	8				_	7						
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Yes No N/A Mame of Registered Waste Hauler Name of Registered Landfill City, State Newark, NJ Title Signalure Date			F 1658 HOUSE AND			100	-	기계 1 시간 나는 사람들이 가장 아니라 아니라 하는데 보는데 보다 없다.		egative f	Pressui	re		
Non-Exempted (*) and Non-Friable Procedure Normally Description of Asbestos-Containing Material (ACM) Normally Used Solely by Maintenance / Custodial Staff? (12) Non-Exempted (*) and Non-Friable Procedure Abatement Type Non-Exempted (*) and Non-Exempted (≥160 sf or ≥260 lf	\boxtimes	Demo	olition			-							
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Yes No N/A Mame of Registered Waste Hauler Nowark Carting City, State Newark, NJ Completed by Location of Normally Used Solely by Maintenance/ Custodial Staff? (12) Normally Used Solely by Maintenance/ Custodial Staff? (12) Vat/Mastic Sheetrock compound Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Normally Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) NAMOUNT (Specify SF or LF) NAMOUNT (Specify SF							>			n-Friable	Proce	dure		
Normally Used Solely by Maintenance/ Custodial Staff? (12) Normally Used Solely by Maintenance/ Custodial Staff? (12) Pes No N/A N			le Loo	otion								Abat	emen	t
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) The second staff of	l and the of				400	Da						T	/pe	2
TO BE ABATED In Facility (13)		rial (ACM)			Asbes				Amo	unt		1		
mezzanine / office —"- Name of Registered Waste Hauler Newark Carting City, State Newark, NJ Completed by No N/A Vat/Mastic 2500 s/f Sheetrock compound 2250 s/f Cubic Yards of Waste Hauler ID No. 4509 47.5 Cumberland County Landfill City, State 5-25-12 Newburg, PA Date						. thermal	systems	insulation,			R	וג	nca	E
mezzanine / office —"- Name of Registered Waste Hauler Newark Carting City, State Newark, NJ Completed by No N/A Vat/Mastic 2500 s/f Sheetrock compound 2250 s/f Cubic Yards of Waste Hauler ID No. 4509 47.5 Cumberland County Landfill City, State 5-25-12 Newburg, PA Date								5 (2 (V) (1) L	SF or	LF)) m	ép	aps	clos
mezzanine / office —"- Name of Registered Waste Hauler Newark Carting City, State Newark, NJ Completed by No N/A Vat/Mastic 2500 s/f Sheetrock compound 2250 s/f Cubic Yards of Waste Hauler ID No. 4509 47.5 Cumberland County Landfill City, State 5-25-12 Newburg, PA Date	(13)	(13)				other	niscenane	eous)			ava	<u>a</u> .	ulat	ure
Name of Registered Waste Hauler NJ DEP Waste Hauler ID No. Newark Carting City, State Newark, NJ Completed by Name of Registered Landfill Cubic Yards of Waste Cubic Yards of Waste Cumberland County Landfill Disposal Date 5-25-12 Newburg, PA Date	(C)	Ye	s No	N/A	A						1		Ф	
Name of Registered Waste Hauler NJ DEP Waste Hauler ID No. Newark Carting City, State Newark, NJ Completed by Name of Registered Landfill Cubic Yards of Waste Cubic Yards of Waste Cumberland County Landfill Disposal Date 5-25-12 Newburg, PA Date	mezzanine / offic	ce	\rightarrow			Va	at/Masti		2500) s/f	X			
Name of Registered Waste Hauler NJ DEP Waste Hauler ID No. Newark Carting City, State Newark, NJ Completed by NJ DEP Waste Hauler ID No. 4509 47.5 Cumberland County Landfill City, State Newark, NJ Disposal Date 5-25-12 Newburg, PA Date			-	$\rightarrow \vdash$	-						\leftrightarrow	-	-	-
Newark Carting 4509 47.5 Cumberland County Landfill City, State Disposal Date City, State Newark, NJ 5-25-12 Newburg, PA Completed by Title Signature Date						sheetro	ck com	pound	2250) s/t			ļ	
Newark Carting 4509 47.5 Cumberland County Landfill City, State Disposal Date City, State Newark, NJ 5-25-12 Newburg, PA Completed by Title Signature Date	Local State Action 22													
Newark Carting 4509 47.5 Cumberland County Landfill City, State Disposal Date City, State Newark, NJ 5-25-12 Newburg, PA Completed by Title Signature Date														
Newark Carting 4509 47.5 Cumberland County Landfill City, State Disposal Date City, State Newark, NJ 5-25-12 Newburg, PA Completed by Title Signature Date	Name of Registered Waste Had	uler		NJ DEF	Waste	Cubic	Yards	Name of	Registered	Landfill	.1		1	-
City, State Newark, NJ Completed by Disposal Date City, State Newburg, PA Signature Date				Hauler	ID No.	of Wa	ste	4.50005 53	•					
Newark, NJ 5-25-12 Newburg, PA Completed by Title Signature Date	Newark Carting				1509	1	47.5	Cumber	land Cou	inty La	ndfill			
Completed by Title Signature Date	City, State	Car		1.0	***	Dispos	sal Date	City, Stat	е					
4.17.	Newark, NJ					5	5-25-12	Newburg	g, PA					
Mike Cooper President 5/3/12	Completed by	Titl	е			8	ignature,	112		Da	ate			
	Mike Cooper	Pre	sident				Man!			5/3	/12			

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

CX148D

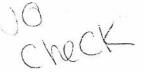
NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to <u>N.J.A.C.</u> 8:60-12:120)

1 '						Mark Mark			3 5	10	
Date of Notification (1)	5/03/2012				of Building Ow X Corporation	ner/Operator (2)	EREN	W	2		
Agencies Notified	Type Noti	fication		Street	t Address	1111		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	- 1	1 11	<u>j</u>
() EPA	() Initial	200			Water Street	11/11/		7 201)	.)	1
() DEP	(X) Amer		No 1 1		State, Zip Code	11/11/	YAM	1-00	-	ξ.	· Vig
(X) DOL		ndment #_		Jac	ksonville, FL 32	2202	Mice		, a	die	M.
(X) DOH		gency (inco cation)	auding	Name	of Contact	100	Tel. N	lumber	LS		Ť,
() DCA	() Cance			Dav	vid Ohr	Į.	LA			يميد عددتنده	And a second
				FACILITY IN	FORMATION		- Company	Jul - 41.5	+		
Name of Facility Where Abate Conrail Railyard – Camden Y	ement is Tal	king Place	(3)		Type of Facil () School (K	(-12)		24			
Street Address					(X) Other (i.e.	er 8 (other than K private & comme	-12) arcial buildings It	omee	oto		
626 27 th Street					(x) Galler (i.e	. private a commi	ordar buildings, i	iomes,	G10.		
City (5)					Sq. Feet	# of Floors	Bldg. Age		-		-
Camden, NJ 08105					576	3	30+				
County (6)		County C	ode (7) (S	TATE		Prior if being den	nolished)			<u> </u>	
Camden		USE ON	LY)			al Service					
Name of Manitaring Firm Hissa	J 6 1 A	201111-									
Name of Monitoring Firm Hired Bldg. Owner (8)	1 DY A	SCM No.			Contractor (9)						
Shaw Environmental, Inc.				Prism	n Response, Inc	.					
Street Address				Stree	t Address		****				
128 South Tryon Street – Inters	state Towe	г		100000000000000000000000000000000000000	Technology Lan	Α					
City, State, Zip Code		· ·			State, Zip Code						
Charlotte, NC 28202					rt, PA 15632						
Project Manager for Monitoring	Firm T	Tolophon	o No			1: N:-					
Gary Wyrwa	T CHILD	Telephone 732-939-3	English Company	77-70-00-00-00-00-00-00-00-00-00-00-00-0	hone No.	License No.					
\sim	Vo.	_			325-3330	01121					
Start Date (10)	Schedule	ed Comple	tion Date (of OSHA Mon						
- 5/8/2012	X	5/11/20		Shaw	Environmental	, Inc.					
Occupancy Status During Abat			-		t Address				50		
(X) Facility Closed/Vacated Du				128 S	outh Tryon Stre	eet – Interstate To	wer				
() Abatement Performed Outs	ide of Norm	nal Facility	Hours	City S	State, Zip Code						
Describe:											
() Other Describe:				Charlo	otte, NC 28202						
Source of Work (Check all that	apply)							Station and	-	-	
(X) ≥ 3 sf or ≥ 3 If () ≥ 160 sf or ≥ 260 If		(X) Renov			() Mini-Enclo () Glovebag	Procedure					
					(X) Non-Exem	pted (*) and <u>Non</u>	-Friable Proced	ure			
										ement ype	
Location of		Is Loca	ition				-		Γ.	ype	
Asbestos-Containing Materia	al	Norma		1							
(ACM) TO BE ABATED		Used Sol Mainten		Ashest	Description os Containing N		Amount (Specify	l "	_	E	ш
IN Facility		Custo				ulation, surfacing,	SF or LF)	lem	Repair	cap	ncic
(13)	19	Staff			T, or other misc		0.0121)	Remova	air	Encapsulate	Enclosure
		(12)								ie i	w
	Ye	s No	N/A							ST .	
Camden Hump Tower			X	VAT			23SF	X			
Camden Hump Tower			X	Firestop P	uddy	7-	1SF	X			
Camden Hump Tower			X	Caulking/G	Glazing		15SF	X			
Camden Maintainer Box				T			00.05				
Name of Reg. Waste Hauler	NJDEP W	aste Haule	X er ID #	Cubic Ya	rds of Waste	Name of E	60 SF Reg. Landfill	X			
Waste Management		SW1724	. ID II	1	ius oi vvasie			odfill			
City, State		3111124			Disp. Date		ntral Sanitary Lar State	IUIIII	-		-
Camden, New Jersey					O 5/11/12		Argyl, PA				
Completed by (Print or Type)	Title	Allies as Alex		Si	ignature	, ,	D	ate			
Jessica Busch	Ad	ministrativ	e Support		Lessica	Busco	1	5/3/2	2012		
SR-41	11-277-11	241			-	1					

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

	APPROV	ED)
NJ De	pt, of Health & S	Senior Services
1	<u> </u>	Capital ordinary
- control	(signature	DVIII V

Date of Notification (1)	/3/12			Name of Building Owner/Operator (2) Samuel Graff & Sally Lanc												
Agencies Notified	Type Notification			Street Address 928 Bollovic Ave.												
IS DOI'	Amended Amendment		_	City,	State, Zip	Code	Frenton NJ	-	201	2		1				
DOH DCA	Emergency (in Justification) Cancellation	ncludin	g	Nam	e of Confe		1 111 1	Telaphone Nu	mber	-	· B					
				FA	CILITY IN	ORMATION	1	ASBLATIAL LICE!	ISING	*********		_				
Name of Facility Where		g Place					Type of Facili	y (4)	(Landingarie							
Street Address	928 Bel						Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) Other (Le., private & commercial buildings,									
City (5)	000						Square Feet	# of Floors	18	dg. A	ge					
County (6)	Aercer	enton		Cou	inty Code (E ONLY)	7) (STATE	Current Use (Prior If being demolished)									
Name of Monitoring Firm		Owner	T	ASCN	No.		Residence ement Contractor (9) evens Environmental Services, Inc.									
Street Address		. "				Street Address		8-	.cs, 1	110.		_				
City, State, Zip Code	PO Box 34	1				City, Slate, Zip (PO Box 322									
C	rosswick, NJ (8515					Allentown, NJ 08501									
Project Manager for Mor William W	nlloring Firm eisgarber Jr.			phone 19) 29	No. 18-4070	Telephone No. (609) 2:	59-9688	License No.	0049	3						
Start Date (10) 5/7/12	Sche		S/7/1		ate (11)	Name of OSHA		(ECS				-				
Occupancy Status Durin	53t N	ck only	ona)			Street Address	no.	241				_				
☐ Facility Closed/Vacali ☐ Abatement Performed	d Outside of Norma	Facili			- *	City. State, Zip C	Code	Box 341				_				
Scope of Work (Check a							Crosswic	ks, NJ 08515				_				
23 sf or ≥3 lf ≥160 sf or ≥260 lf	an (i-at bypig)		navati molilic			☐ Mini-En	ad Procedure	ogative Pressure	une							
		N	Location				1	Abatement Type								
Location of Asbestos - Con(atning N <u>IO BE ABA)</u> IN Facility (13)	Material (ACM)	Mair Cr	l Solei nlenan uslodia Staff? (12)	ce/		Description of os Containing Mai thermal systems I surfacing, VAT, other misocillane	lerial (ACM) Insuletion, , or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	0.0000				
-		Yes	No	N/A							le					
1st Floor kitchen	1&bedroom			×		pipe insulat	ion	50 LF	×		-					
Name of Registered Was			1 4	JOEP auter II	No.	Cubic Yerds of Waste	s Name of Registered Landfill									
Stevens Environm	mental Service	s Inc.		182	292	1 CU Disposal Dates	CRy/State	R.R.F., Inc. I	andf	ill		_				
Ony, State	Allentown, N	IJ				5/7/12	N' STATE	Tullytown,	PA							
Completed By Mahlon E. Ste	Trile		oject	Mar	nager	Signe	11	Date	5/3/	12	-					
\$8-41 AR 00					******	s beensure exem	7				==	=				



State of New Jersey 1203-4455 NOTIFICATION OF ASBESTOS ABATEMENT Check #4021 (Pursuant to N.J.A.C. 8:60 and 12:120)

Data Chi es e (d)							31	Francis [7 10 1	I I	1 1	1	11				
Date of Notification (1) 5/2/12		N	SE	e of Bu	uilding	Owner / Opera	5 6										
Agencies Notified Type Notification			-	t Addr	ess	***************************************		115		- 0	010	+	11				
⊠ EPA		-		ark P	The second second second				MAY	7 2	2012	Lum					
☐ DEP ☐ Initial ☐ Amended #1				State				10				1					
1				ark, N		ASBEST OF CONTROL &											
☑ DOH		1 2 2 2		of Co Caca				1	ASBES	Teleph	none l	Num	ber				
			es avesses					and approximate	AND DESCRIPTION OF THE PERSON	alassa :							
Name of Facility Where Abatement is Takir	a Dlac	(2)		CILIT	Y INI	ORMATION		silatit	and the second								
PSE&G Exterior	ig Flac	e (3)				Type of Fac		marine	way returned.								
Street Address						Subchapter 8 (Other than K-12)											
Devlin Ave. & West Broad Street																	
						Square Fee		# of Floors	Bldg. A		,						
City (5) County (6		Cou	nty (Code	(7)												
Burlington Burlingt	on						(Prior i	f being demo	lished)								
Name of Manitarina Circultianth, D. 11.		(0)		1.00		Exterior											
Name of Monitoring Firm Hired by Building Health & Safety Services	Owner	(8)		ASC	M No			Contractor ((9)								
Street Address						AbateTech Street Addre		276-2575-2	-	/							
318 12 th Street																	
City, State & Zip Code				PO Box 25 City, State 8		de					-						
Hammonton, NJ 08037				Lumbertor													
Project Manager for Monitoring Firm James Proctor	one	Numb	oer	Telephone N 609-265-21			License	Number									
Scheduled Start Date (10) Scheduled		Name of OS		itor	1	005	29										
5/14/12	()		EMSL Ana		iitoi												
Occupancy Status During Abatement (Chec	k only	one)			76	Street Addre	ess										
Facility Closed/Vacated During Enti				ateme	nt	108 Haddo											
Abatement Performed Outside of No Describe:	ormal	Hour	S			City, State &	and the second second						90-11-1				
Facility Occupied During Abatement	·					Westmont,	, NJ 08	108									
Scope of Work (Check all that apply)					-												
								Full Containn	nent with	Negative	e Pres	sure	}				
≥3 sf or ≥3 lf				ovatio				Mini-Enclosu				: 000 707 707	500				
≥160 sf ≥260 lf	L		Dem	nolition	1			Glove Bag Pr									
Location of		1-1-						Non-Exempte									
Asbestos-Containing		Is Lo orma				Description Asbestos-Cor			Amount			ent T	ype				
Material (ACM)		Sole				Material (A			(Specify SF or LF)			ш					
TO BE ABATED		ainte				(i.e., thermal s	systems			Rer	20	nca	Enc				
in Facility (13)	Ci	ustodi	iai S 12)	taff?	1	nsulation, surfactor or other miscell				Remova	Repair	Encapsulate	Enclosure				
(1.5)	Ye		VO	N/A		or other miscen	aneous	,		<u> </u>		ate	Te				
Exterior		1		Ø	Ex	terior Transit	e Conc	luit 1	,500 LF				П				
		ווֹן	Ī				3 20110		,ove Li	러	H	H	H				
										一片	H	H	H				
							A. C.		1 7		Ti	Ħ	Ħ				
Nome of Designated 10/2 To 11							T.										
Name of Registered Waste Hauler			DEP W Iler ID		Cubic Yards of Waste	Name	of Registered	d L'andfill									
Maste Management					NO.	950)	Grow	s Landfill	1	n 11 1							
City, State			V-11/2-			Disposal Date (City, State											
Elizabeth, NJ						6/8/12 Morrisville, PA											
Completed By (Print or Type) Title						Signature	. 1		(2.00	Date							
Gwen Trumbetti		Offi	ce Co	ord.	5/2/12												

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

CK# 1233

Date of Notification (1)				Nome	f Duilding	Oumarl	Inoroto	- (2)		1 11	10		2					
5-4-2012				Name of Building Owner/Operator (2) Affiliated Management Street Address														
Agencies Notified	Type Notification			Street Address 301 South Livingston Ave														
□ EPA	Initial			301 S	South Liv	ingsto	n Ave.	ALCOHOL:	STATE OF THE PARTY	@ [3 11 1	A F	2	1	14			
DEP DOL	Amended Amendment #	‡		1277-2777	ate, Zip Co ston, N.		9	1 [ME	6					//(
	Emergency (i	ncluding	_ -		f Contact				HYI-	ΙΤο	lenhond l	Marin.		- Unan	1	-		
DOH DCA	justification) Cancellation			Tim				Telephone Number										
Name of Facility Where	Abatamant in Talsina	DI (2)		FAC	ILITY INF	ORMAT	ION	Type of Escility MA) - OS CONTROL &										
Apartment Bldg	Abatement is Taking	Place (3)						Type of Facility (4) ASBESTOS CONTROL & LICENSING										
								School (K-12)										
Street Address	-4							Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes,										
701 Chestnut Stree	et								etc.)		4 .		unu	n igo		.03,		
City (5)									re Feet		f Floors			dg. A	lge			
Teaneck									0	2			50	0+				
County (6)					Code (7)			100000000000000000000000000000000000000	ent Use (Prid		ing demo	lished)					
Bergen				(SIAIE	USE ONLY	,		Apa	artment Bl	dg.								
Name of Monitoring Firm	n Hired by Building O		ASCN	/ No.				tement Con		(9)								
n/a				n/a			Jada	ar Co	ntracting,	LLC								
Street Address		***************************************		-			Street	Addre	ss									
n/a							22 T	roy L	ane									
City, State, Zip Code							City, S	State, Z	ip Code							SSE-50-0		
n/a							Linc	coln Park, NJ 07035										
Project Manager for Mor	nitoring Firm		T	Telepho	ne No.	-	Teleph	none N	0.		License	No.		_				
n/a							973-	706-7	7950		01088	3						
Start Date (10)		Scheduled	Con	pletion	Date (11)		Name	of OSI	HA Monitor					-	9000000	800 T		
5-14-2012		5-16-20			32 33		Jada	ar Cor	ntracting,	LLC								
Occupancy Status Durin	g Abatement (Check	Only One)				Street	Addres	ss									
☐ Facility ClosedNac	ated During Entire Po	ariod of Ah	atom	ement 22					ane									
Abatement Perform	ed Outside of Norma	al Facility F	lours						ip Code	Trans-				W.7.				
X Other – Describe:	9am - 5pm								ark, NJ 07	035								
Scope of Work (Check A	II That Apply)						111101101							200				
× ≥3 sf or ≥3 lf		X Po	nova	tion			Full Containment with Negative Press						ecuro					
≥160 sf or ≥260 lf			molit						i-Enclosure		ivegauve	Pres	sure					
		-					-		vebag Proc									
						*		J Noi	n-Exempted	(*) and	d Non-Fri	n-Friable Procedure						
			ocati						-111			Abateme Type				.		
Location		Used	rmal Sole				scription			20	4 52		T					
Asbestos-Containing TO BE AB		Main	tenar	nce/		tos Cont thermal				97 (33.55	mount specify	١,	,		Ē	m		
In Facil	ity	Custo	dial S (12)	staff?	(1.01		cing, VA				or LF)	Zeriova		Repair	cap	olo		
(13)			(12)			other n	niscellan	reous)	1			l va		a-	Encapsulate	Enclosure		
		Yes	No	N/A											te			
Baseme	ent			X	Asl	estos	Pipe II	nsulat	tion	.10	00 LF	X						
						te control and	un die same	70000					+					
									755.00		+	+		_				
				55.5						- A		+	+		-			
Name of Registered Was	ste Hauler		N	JDEP W	aste	Cubic	Yards		Name of R	eaiste	red Land	fill				\dashv		
Jadar Contracting, L			Н	auler ID	No.	of Was												
			0	0033137 TBD						GROWS Landfill								
City, State				Disposal Date										V.PE				
Lincoln Park, NJ 070	035			ТВ					Morrisvi	lle, P	A 1906	1						
Completed by		Title							Signature Date									
Lillie Lazarevich	tary	y Li					Tayerter 5				5-4-2012							

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

Check # 2655

Date of Notification				Name o	f Building (Owner / Ope		/ 00		4-4-6	, p					
05 / 04	/12			NBC Street Address												
Agencies Notified	Type of	Notification			iddress -30 ROCKEI	ECLLED DI	A7A	and the second		2						
☐ EPA		Initial			ate, Zip Coc			and The state of		, UC.	Care I					
☐ DEP		Amended			ORK, NY 10		THE STREET	Name and Address of the Owner, where the Owner, which is the Owner, where the Owner, which is the	F- []	ME	1011.					
☑ DOH		Amendment			f Contact	1	15-71	Telepho		ber	41 4 4 4					
✓ DOL DCA		Emergency Cancellation	-		IT LACERR	j		212-664	-1698		And the second s					
				ACILITY	INFORMAT		h III	MA	1 7	2012						
Name of Facility Who 60 SELLARS STREE	ere Abater T	ment is Taking	Place (3)		Type of I	Facility (4)	1 113 #		and the second second		-3					
			2502			School (I	K-12)	L-ASBI	STOS CL	ATROL &						
Street Address					7 0	Subchap	ter 8 (Other	her than K-12)								
60 SELLARS STREET		A1	10			ian,	a tas Nes to mi									
City (5) KEARNY	County (6 HUDSON		County Code	(7)	Square F	eet N/A	# Of Floo	rs /A	Buildi	ng Age 50	+					
						Co.	f being den	nolished)	7							
Name of Monitoring	Firm Hired	d by Bldg. Ow	ner (8)	TASCM N	STORAG	Control of the Contro	Contracto	(0)								
		1 by bidg. O	iei (o)	ASCINITI	Olivaine of	Abatement	Contractor	(a)								
LEA ENVIRONMENTA	AL				LVI Enviro	onmental Se	ervices Inc.									
Street Address	TE 405				Street Ac	dress			A1100-1504-130							
901 ROUTE 168, SUIT City, State, Zip Code					- AS2 Cetty	Augnua										
TURNERSVILLE, NJ (462 Getty City, Stat	e, Zip Code										
Project Mngr. For Mo		irm	Telephone Nu	mber	٦.,,, ٥	.u,p	•									
TIFFANY WOLF			856-262-2335		Clifton, N.											
Sheduled Start Date (06 / 11		100	pletetion Date (1	/	Telephon	e Number		License	Number	r						
$\frac{-06}{}$ / $\frac{-11}{}$ /	/12		/ /	12	973-7	72-3660				00117						
Occupancy Status Du	uring Abaf	tement (Check	Only 1)			OSHA Mon	itor			00117						
☐ Facility Clo	osed/Vaca	ated During En	tire Period of			onmental Se										
Abatement Abatement	t Performe	ed Outside of I	Normal Facility		Street Ad 462 Getty											
Hours - De	escribe:							- 6								
		_ 7:00AM-3:30F	PM -			e, Zip Code NJ 07011			24 (c		8					
Scope of Work (Chec	k All That	Apply)									_					
Demolition	1	v	Renovation		Full Conta	ainment wi	th Negative	Pressure								
_ ≥3sf or_≥3lf					Mini - End											
≥160 sf or a	≥260 If			. 📙	Glovebag											
					Non-Exen	npted (*) an	d Non-Fria	ble Proce	dure							
Location of		Is		Descript	tion of			Abateme	nt Type							
Asbestos Contai		Location	As	bestos - C	Containing			R		E	E					
Material (ACN TO BE ABATE	0.07	Normally Used	0.	Material			Amount	E	R	N	N					
in Facility		Solely	100000		il systems facing, VA1	г.	(Specify SF or LF)	M	E P	C A	C					
(13)		by Main-			cellaneous)		J. 01 L1 /	v	A	P	0					
		tenance/				A E		Α	1	s	s					
		Custodial Staff (12)						L	R	U	U					
		YES NO N/A							-		R					
				1 - 1 - 70	7											
STORAGE UNITS 1 - 1	9		TRANSITE				23,000 SF	- 7								
	-															
Name of Registered W	/aste Haul	er	NJDEP Waste	Cubic	Name of D	Registered I	andfill									
NEWARK CARTING			Hauler ID No.		I.E.S.I.	ogistereu l	-andilli				20 20					
City, State	111				City. State											
NEWARK, NJ				Date	BETHLAHEM, PA											
completed by (Print or	r Type)		Title			Signature		-/ /) <u> </u>	Date						
STEVEN STILES			PROJECT MANA	AGER		Stee	n S	LEV	0		05/04/12					

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

Check #4088

1204-4462

Date of Notification	(1) 5/3/12						Owner / Operat		The state of the s	FIN	E	1	11	1			
Agencies Notified EPA DEP DEP DOL DOH	Type Notific			Stree 311 F City, S Penr	t Addre Penni State 8	ess ngtor & Zip (on, NJ	- Rocky Hill I	1	DE	MAY T	2012 Tele) Ine M	lumb	er		
☐ DCA		cellation			n Jon	CHAPTER TO SERVICE TO		· · · · ·		ASBESTOS C'	1117191	prio	110 1	- Contract	,		
					CILIT	Y INF	ORMATION	- 1		HOW THOUSE	Land Street Street Street	ا ندریس.			102		
Name of Facility W Burke & Kerr Fa Street Address		ent is Taking I	Place (3	3)			Type of Faci	(K-12)	J	2.51		X					
311 Pennington-	Rocky Hill	Rd.					Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Age										
City (5)		County (6)	Co	untv (Code (7)	- Square reer		# 01 1 100	15	ыuy.	Ag	5				
Pennington		Mercer			,		Current Use (Prior if being demolished) Farm House										
Name of Monitoring Health & Safety		y Building Ow	/ner (8)		ASC	M No.											
Street Address 318 12 th Street							Street Addre	ess									
City, State & Zip Co				City, State & Lumbertor				-									
Project Manager for Jim Proctor	Monitoring F	hone 704-8	Numb	er	Telephone N	lephone Number License Number 9-265-2107 00529											
Scheduled Start Da 5/12/12		Name of OS EMSL Ana															
Occupancy Status I		ment (Check of During Entire I		e)	atemer	nt	Street Addre	ss									
		utside of Norm			2011101		City, State &										
Describe:	Saturday upied During	Ahatement					Westmont,										
Scope of Work (Che			W-165-5555	-		24 3/8/12/2							-				
≥3 sf or ≥3 l	f			Pon	ovatio	n			Full Conta Mini-Enclo	ainment with I	Negat	ive	Pres	ressure			
≥3 si 0i ≥3 i			X		nolition			H		osure g Procedures							
					1			Market and the first state of	Exempted and Non-Friable Pro				ocedure				
	ocation of			ocati			Descriptio			Amount	1	Aba	temo	ent T	уре		
	tos-Containin erial (ACM)	g	Norm	nally t olely t			Asbestos-Cor Material (A		g	(Specify SF or LF)				ш			
TO E	BE ABATED		Maint				(i.e., thermal s	Of Of Lif		Re	Ŗ	Encapsulate	Enclosure				
ir	n Facility		Custo		Staff?	i	nsulation, surfa-	cing, \	/AT			Removal	Repair	nsd	losu		
	(13)		Yes	(12) No	N/A		or other miscell	laneou	ıs)			<u>a</u>	7	late	ē		
Exterior of Farm	House				M		Roofing Ma	ateria	l	931 SF		XI					
			님	井	H						L	4	님	H	H		
			H	H	H						I L	+	님	H	H		
			H	H	H							╡	H	H	H		
Name of Registered			DEP W		Cubic Yards of Waste		_	ered Landfill				-					
Clean Harbors						0.72/	10	Gro	ws Landfi	ill			-				
City, State						2	Disposal Date 5/12/12		State ytown, PA	1							
Completed By (Print	or Type)			Title	е		Şignature		١		Da	te					
Gwendolyn Trumbetti Opps.							Su	T	_		5/3	3/1	2				

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

1107-4333 SUB8 Check #4089

Date of Notification		40		Name of Building Owner / Operator (2) Kearny Board of Education															
A N:C . I	5/3								of Education	- tea ^{ct}	A STATE STATE	an adjust to the property of the party	The Table	=1		3177			
Agencies Notified EPA	Type	Notification		10			ddr vis	ess Ave	69	Address of the second	Malical Longia de Livro	T NI	個個	1					
☐ DEP	П	Initial		_			-		Code	-	1 11/2 12	2 11 10	205	111	<u> </u>				
Ĭ DOL	\boxtimes	Amended #1		1000	5 C C C C C C C C C C C C C C C C C C C			J 07		male		und Little mengen in State	1	11	1				
☑ DOH		Emergency						ntaci		111111			CTS b		N 13	1			
☐ DCA		Cancellation		183				evita		1101	YAM I		Teleph	оне	MÅLL	iber			
		W			F	ACI	LIT	Y IN	FORMATION	1 111 11	-1	_	FOOT &	-2	Ì				
Name of Facility Wh	nere Ab	atement is Taking	Place	e (3)				Type of Fac	cility (4)	1	TOS CUN	LEGIT OF		and the same				
Kearny High Sch Street Address				•	•				School	(K-12)	ASB	ESTOS CON LICENSII	113	C. Constant					
	is.									Subchapter 8 (Other than K-12)									
336 Devon Street									Other (i.e. private & commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Age										
City (5)		County (6)	T	Cou	intv	Co	de (7)		4	100.0	1	Jiug. 7 (go					
Kearny		Hudson			,				Current Use	Prior if being	a demoli	shod)		-					
rouniy		muuson							School	e (i iloi ii belii)	y demons	sileu)							
Name of Monitoring	Firm H	ired by Building Ov	wner	(8)		I	ASC	M No	. Name of Ab	atement Cont	ractor (9))							
Briggs Environm	ental							AbateTecl	h. Inc.	(-,	,								
Street Address				e)=III.e.	tie sila				Street Addre										
3 Crosswicks Str									PO Box 25	5									
City, State & Zip Co	de								City, State 8	Zip Code									
Bordentown, NJ									(a) (b) (b)	n, NJ 08048									
Project Manager for	Monito	ring Firm				umb	er	Telephone N			License N	lumber							
Mike Hoodak			-	Sec.	_	552			609-265-2107 00529										
Scheduled Start Dat 4/6/12	e (10)	Scheduled Co		etior /31/			(11)		Name of OSHA Monitor EMSL Analytical										
Occupancy Status D	urina A	Abatement (Check			1150,000				Street Addre			ALMERY TO SERVE							
		ated During Entire				ate	mer	nt	108 Haddo										
Abatement F	erform	ed Outside of Norr	nal F	lour	s –				City, State &					- 0.0	-				
Describe:									Westmont										
Facility Occu	pied D	uring Abatement							Trootinon.	, 110 00100									
Scope of Work (Che	ck all th	nat apply)																	
□ >0 -t>0 t				7	_							ent with N	egative	Pre	ssure	3			
≥3 sf or ≥3 lf			\succeq	7			atior			E_N	nclosure								
≥160 sf ≥260) IT		L		Der	moli	tion	W		Manage and the same and the sam	Bag Pro								
									-		ted and Non-Friab			ble Procedure					
Asbesto	cation			s Lo					Descriptio			mount	Aba	atement Type					
	rial (A			rmally Used Solely by					Asbestos-Cor Material (A			Specify							
	E ABA					ice (or		(i.e., thermal s		51	or LF)			Щ	m			
	Facility					Staf			insulation, surfa		Remova	Repair	Encapsulate	Enclosure					
	(13)		1 1 1 1 1 1		12)				or other miscel		1		VOL	pai	nsc	OSC			
			Yes	s I	Vo	N/	Ά			•			<u>n</u>	•	ate	ē			
Boiler Room				1		E	1		Breeching M	laterial	1.0	90 SF		П	П				
1 st Floor Corridor			П		X	Г	1		Pipe Insula			68 LF		H	Ħ	H			
Room 117		N. A. L. Walt & Basel			X	Ī] [1.4	Pipe Insulation			0 LF		Ħ	Ħ	H			
Room 101	F - 1				X				Pipe Insulation			0 LF		Ħ	Ħ	H			
Room 101D		2			X		11		Pipe Insulation		_	0 LF	X	Ħ	Ħ	H			
Room 122		$\overline{\lambda}$	F	T	1.1	Pipe Insulation			50 LF		H	Ħ	H						
Name of Registered Waste Hauler									Cubic Yards Name of Registered Landfill							-			
AbateTech, Inc.						uler 750	ID I	NO.	of Waste 30	TRRF Land	fill								
City, State			10000						Disposal Date	City, State			-		-	-			
Lumberton, NJ								-	12/31/12 Tullytown, PA										
Completed By (Print of	ог Туре)			Title	е			Signature	^			Date	_		-			
Gwen Trumbetti						ps.	Cod		Chu	+			5/3/1	2					

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to <u>N.J.A.C.</u> 8:60 and 12:120)

1107-4333 SUB8 Check #4089

Date of Notification		Name of Building Owner / Operator (2)																
	5/3/12		Ke	Kearny Board of Education Street Address														
Agencies Notified EPA	Type Notification																	
DEP	☐ Initial				vis /	-												
	Amended #1				ate &													
	☐ Emergency				y, NJ of Con		32				T							
☐ DOH☐ DCA	Cancellation		100000		el De						Teleph	ione	Nur	nber				
				-		200000												
Name of Facility W	here Abatement is Taking	Place	(3)	AC	LIIY	INF	ORMATION	_	. (4)									
Kearny High Sch		1 lacc	(3)				Type of Fa											
Street Address								Subchapter 8 (Other than K-12)										
336 Devon Stree	t						Other (i.e. private & commercial buildings, homes,											
							Square Fee							.,				
City (5)	County (6)	0	ounty	y Co	de (7)			" 01110	Bidg. Age								
Kearny	Hudson		85	100 111	``	,	Current Use	e (P	rior if being o	demolished)				_				
							School	acinolistica)										
	Firm Hired by Building Ov	wner (3)									-						
Briggs Environm	nental						AbateTecl	h, lı	nc.	(0)								
Street Address			200		1		Street Addr	ess				200		-				
3 Crosswicks Str							PO Box 25 City, State 8											
City, State & Zip Co Bordentown, NJ																		
Project Manager for			- NI			Lumberto												
Mike Hoodak	Worldring Filli	-298		umbe	r		hone Number License Number 00529											
Scheduled Start Dat	te (10) Scheduled Co		And the second				Name of OS		Monitor		005	29						
4/6/12			31/12		(1.1)		EMSL Ana											
Occupancy Status D	Ouring Abatement (Check	only o	ne)	100	4		Street Addre					0.000						
	ed/Vacated During Entire				ment		108 Haddo	on A	۱ve.									
	Performed Outside of Norr	nal H	ours -	-			City, State 8							- 1				
Describe: Facility Occu	upied During Abatement						Westmont	, N.	J 08108	+								
Scope of Work (Che			-			-												
	on an inat apply)							\times	1 Full Con	tainment with N	Jegative	Pre	966111	·_				
≥3 sf or ≥3 lf		\boxtimes	Re	nov	ation			\boxtimes	Mini-End		· ogac		,ooui					
≥160 sf ≥260) If		De	mol	ition			X		ag Procedures								
							Non-Exempted and Non-Fria						-Friable Procedure					
	cation of		Loca		100	-4	Descriptio	n of		Amount								
	os-Containing erial (ACM)		mally		d	- 4	Asbestos-Cor			(Specify			Т	7.				
	E ABATED		olely itenai		or		Material (A (i.e., thermal s			SF or LF)	_		П	ı				
	Facility		odial			in	nsulation, surfa		den	Ze e	Cap	incl						
	(13)		(12)			(or other miscel	lane	eous)		Removal	Repair	Encapsulate	Enclosure				
		Yes	No	N	Ά						<u>=</u>		ate	6				
Throughout New	Addition Corridors	In		+	1	2	X Floor tile 8	> n.a.	notio	2 220 05								
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Name of Registered	lame of Registered Waste Hauler						Cubic Yards	Na	me of Regis	tered Landfill								
AboteTech luc					ID N	0. 0	of Waste											
AbateTech, Inc.			18	750			30 TRRF Landfill											
City, State _umberton, NJ						C	Disposal Date City, State											
Completed By (Print	or Tyne)						12/31/12 Tullytown, PA											
Swen Trumbetti	or rype)		U Properties		Coor	Signature					_							
		۳۵.	2001		5/3/12					2								