| | 1 x x | vald | |
|----|-------|------|--|
| Va | #1 | XGC | |
| 1 | | 1 | |

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

| Date of Notification (1) | | | | | Name of Build | ling Owner/Op | erator (2) | ((/)) | / | 6 | 3 11 | The state of the s |
|--|-----------------------------------|---------------------------|---|--|--|-------------------------|----------------|------------------|------------------|-----------|-----------|--|
| | 4/25/20 | 012 | | | Hercules | | 1/ | 44/ | MA | 77 | | 7 18 7 |
| Agencies Notified | | Notification | Type | | Street Address | <u>s</u> | 1/ | | 11/ | _ | | 211 |
| (X) EPA () DEP (X) DOL (X) DOH () DCA | | | ed Notification of the second | | 500 Hercules City, State, Zip Wilmington Name of Cont Joe Keller | on, DE, 19 | 9808 | | LICENS LICENS | 8 | 2012 | <u> I</u> |
| | | | | FACILITY IN | FORMATION | | L | 1 | | . ~ | - | - |
| Name of Facility Where Al Hercules Former Facility | | aking Place (| 3) | 77012177 113 | Type of Facilit () School (K- () Subchapte | 12) er 8 (other than | | | | +: | * | |
| Street Address | | | | | (X) Other (i.e. | private & com | imercial bldg: | s., home | s, etc. | | | |
| 145 oakdale road City (5) | County (6) | | County C | | Sq. Feet | 6000 | # of F | loors | _3 | | | |
| CHESTER | MORRIS | | (State Us | se Only) | Bldg. Age_ Current Use (p | 30+ prior if being d | emolished) | RES | SIDEN | CES | | |
| Name of Monitoring Firm EHS INC | | | ASCM N | <u>0.</u> | Name of Contr Alliance Envir | | stems | | | | | |
| Street Address | | | | | Street Address | <u>S</u> | | | | | | |
| 9 MAIN STREET | | | | | 550 East Unio | | | | | | | |
| City, State, Zip Code MULLICA HILL, NJ | | | | | West Chester | r, PA 19382 | | | | | | |
| Project Manager for Monit JACK CARNEY | oring Firm | Telephone I 8562230080 | | | Telephone Nu 610-701-9000 | | | License 00508 | Numbe | <u>er</u> | | |
| Scheduled Start Date (10) 5/14/2012 | | Scheduled (7/6/2012 | Completion | Date (11) | Name of OSH, EHS, INC | A Monitor | | | | | | |
| Occupancy Status During (X) Facility Closed/Vacate () Abatement Performed | d During Enti | re Period of A | batement | | Street Address 9 MAIN STRE | ET | | | | | | |
| DescribeOther - | | | | | City, State, Zig MULLICA HIL | | | | | | | |
| Source of Work (Check all | that apply) | | | | | | | | | | | |
| (x) Demolition () Rer (X) Large Proj. (>160 SF of () Full Containment with N | or >260 LF A0 | CM) () SM Pr | oj. (>25<16 Iini-Enclosu | 60 SF or >10 <26 ire (x) Glov | 60 LF ACM) (ebag Procedure |) Minor Proj. | (<25 SF or < | <10 LF A | CM) | | | |
| Location of Asbestos- Containing Material (ACM) Facility (13) | Is Local) in Solely Staff? | | stodial | Description of thermal systen surfacing, VAT | ns insulation, | Amount (Sp | ecify SF or L | | | nent Ty | | |
| ROOF | _YES | NO | NA X | miscell.) Roofing | | 57185sf | | | Rem. | кер. | Encap | Enclose |
| 1 ST FLOOR | | - | x | Vat & mastic | | 39855sf | | | X | | | |
| 1 ST FLOOR | | | X X X | TRANSITE WINDOW CAL Duct tar paper | | 60SF 8If 845SF | | | X X X | | | |
| 1 ST FLOOR | W. | | X | JUMPER WIR | E | 600LF 1435LF 40LF | | | X X X | | | |
| Name of Reg. Waste Haul | <u>l</u> | SEAM TAR D#\ | Cubic Yards of | | | Name of | | andfill | L | | | |
| N.E.T.S. / Miners | | 17235 | | | Approx. 100 | | | BFI Imp | erial | | | |
| City, State | | | | | Approx. 100 | | Disp. Date | Di Limp | | ity, Stat | <u>te</u> | |
| Hazelton, PA | | | | | 1202 | Т | BD | | In | nperial. | , PA | |
| Completed by (Print or Ty | pe) | <u>Title</u> | | | Signature | 0. | | Date | | | | |
| DEVIN BLOM | | Estimator | | | th | DV. | \sim | 5/4/2012 | ! | | | |

Mail to: NJDEP-DSHW-BRRTP

401 E. State St., PO 414 Trenton, NJ 08625-0414 Telephone 609-984-6620

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

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

| Date of Notification (1) | | | | *********** | Name of Build | ding Owner | Operator (2) | | | | | |
|--|--|--------------------------|----------------|---------------------------------|---------------------------------|--------------------|--|-------------|----------|------------|-------|---------|
| | 4/25/2 | 042 | | | Hercules | | | | | | | |
| Agencies Notified | 4/23/2 | Notification | Туре | | Street Address | SS | | | | | | |
| (X) EPA | | (X) Initial N | otification | | 500 Hercules | Road | | | | | | |
| () DEP (X) DOL | | () Amende Amendr | | ion | City, State, Zi | p Code | | | | | | |
| (X) DOH | | () Emerge | ncy (includ | ing justification) | Wilmingt | on. DE. | 19808 | | | | | |
| () DCA | | () Cancella | ation | | Name of Con | | 17000 | I Tal N | lumhar | | | |
| | | | | FACILITY II | Joe Keller NFORMATION | | | | | . — | | |
| Name of Facility Where A | | Taking Place (| 3) | | Type of Facili | | | | | | | |
| Hercules Former Facility | | | | | () School (K- | er 8 (other t | han K-12) | | | | | |
| Street Address | | 98 | | | (X) Other (i.e. | private & c | commercial blo | dgs., hon | nes, etc | | | |
| 145 oakdale road City (5) | County (6) | | County (| Code (7) | Sq. Feet | 6000_ | # or | f Floors_ | 3 | _ | | |
| CHESTER | MORRIS | | (State U | se Only) | Bldg. Age | 30+ | | | | | | |
| | | | 400141 | | Current Use (| prior if bein | g demolished |)R | ESIDEN | NCES_ | | |
| Name of Monitoring Firm EHS INC | | | ASCM N | <u>0.</u> | Name of Cont Alliance Envi | | Systems | | | | | |
| Street Address 9 MAIN STREET | | | | | Street Addres | | | | | | | |
| City, State, Zip Code | | | 72 | | City State, Zip | Code | | | | 430-7-1 | | |
| MULLICA HILL, NJ Project Manager for Monit | oring Firm | Telephone I | Number | | West Cheste | | 2 | Licens | se Numi | oor | | |
| JACK CARNEY | oring r init | 8562230080 | | | 610-701-9000 | | 3 | 00508 | | <u> </u> | | |
| Scheduled Start Date (10) 5/9/2012 | | Scheduled (6/29/2012 | Completion | Date (11) | Name of OSH EHS, INC | A Monitor | | | | | | |
| cupancy Status During (x) Facility Closed/Vacate () Abatement Performed | d During Ent | ire Period of A | batement | | Street Addres 9 MAIN STRE | ET | | | | | | |
| Describe | | | | | City, State, Zig MULLICA HIL | | 72 | | | | | |
| Source of Work (Check all | that apply) | | | | | | | | | | | |
| (x) Demolition () Ren (X) Large Proj. (>160 SF of () Full Containment with N | r >260 LF A | CM) () SM Pr | oj. (>25<10 | 60 SF or >10 <2 | 60 LF ACM) (| | roj. (<25 SF o | r <10 LF | ACM) | | | |
| Location of Asbestos- | Is Loc | ation Normally | Used | Description of | ACM (i.e. | | Specify SF or | LF) | Abate | ment Ty | pe | |
| Containing Material (ACM) Facility (13) | in Solely Staff? | by Maint./Cus | todial | thermal syster surfacing, VA | ns insulation, | | | | | | | |
| KG | YES | NO NO | NA | miscell.) | , or other | | | | Rem. | Rep. | Encap | Enclose |
| ROOF 1 ST FLOOR | | | X | Roofing Vat & mastic | | 57185sf 39855sf | and the same of th | | X | | | _ |
| 1 ST FLOOR | | | X | TRANSITE | | 60SF | | | X | - | | 1 |
| 1990 | | | X | WINDOW CAI Duct tar paper | | 8lf 845SF | 0 0 | | X | | | |
| 1 ST FLOOR | | | X | JUMPER WIR | E | 600LF | | | X | | - | |
| 1 | | | X | PIPE INSULATE | TION | 1435LF 40LF | 1 | | X | | | |
| Name of Reg. Waste Haul | te Hauler I | | Cubic Yards of | | | Name | | Landfill | | | | |
| N.E.T.S. / Miners | The second secon | | | | | | 5 4 200 6 | BFI Im | perial | | | - |
| City, State | City, State | | | | | - | Disp. Date | 170 | 2 | City, Stat | e | |
| Transfer in Transf | | | | | | | TBD | | lı | mperial, | PA | |
| Completed by (Print or Type | <u>oe)</u> | <u>Title</u> | | | Signature | 01 | di seba l | <u>Date</u> | | | | |
| DEVIN BLOM | | Estimator | | | 12- | 12 | | 4/25/20 |)12 | | | - 1.5 |

Mail to: NJDEP-DSHW-BRRTP 401 E. State St., PO 414 Trenton, NJ 08625-0414 Telephone 609-984-6620

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

CX#6162

| Date of Notification (1) 05/04/2012 | | T | | f Building C |)wner/Opera | tor (2) | | | - // Q -x - : : : : | | 7 777 | 100 |
|--|-------------------------------|------------------|--------------------|-----------------------|----------------------------|------------------------|----------------------------------|---|------------------------|--------------|---------------|-----------|
| Agencies Notified Type Notif | ication | - | Street A | | ersity | | - : / | JH W | d L | | 17 | 7.3 |
| | | | | | Building | | 1 | ~ L' M, | 97 | 0 | | *** |
| EPA Initial DEP X Amer | | | City, Sta | ite, Zip Coo | de | | | La. | | 2 | 7/2 | -7 |
| X DOL Amer | ndment #1 gency (including | | Prince | ton, NJ 0 | 8544 | | , have | Adding | | | _ | - Fe |
| DOH justifi | cation) ellation | | Name of Bob O | f Contact rtega | | | | Tolanhono | ilimbar | W, | ¥ | with |
| No. of Facility Manager Alexander | - T 1: D1 (0 | , | FACI | LITY INFO | RMATION | 1 = | | 7+ - 75 + 1 | 1.50 | - | William Const | |
| Name of Facility Where Abatement i 120 Prospect Apartments | s Taking Place (3 |) | | | | | of Facility (4) School (K-12) | | | 8. | | |
| Street Address 120 Prospect Avenue | | | s. | | | | | (Other than K- rate & commer | | dings | , home | es, |
| City (5) Princeton, | | | | | | | re Feet | # of Floors | | Bldg. A | Age | |
| County (6) Mercer | | | County (| Code (7) USE ONLY) | | | ent Use (Prior ulty Reside | if being demol | ished) | | | |
| Name of Monitoring Firm Hired by Bo ATC Associates, Inc. | uilding Owner (8) | | ASCN 0009 | | - 12 | me of Aba zon, Inc | atement Contra | actor (9) | | | | |
| Street Address 3 Terri Lane | | | | | Stre | et Addre | | ue | | | | |
| City, State, Zip Code | | | | | | , State, Z | | | | _ | | |
| Burlington NJ 08016 | | | | | | | nia, PA 191 | 53 | | | | |
| Project Manager for Monitoring Firm Michael Keehn | | | Telephor 609 38 | ne No. 86 8800 | 2.2723 | ephone N 7 284 1 | | License 01109 | No. | | | |
| Start Date (10) 05/04/2012 | Schedule 07/18/2 | | npletion [| Date (11) | Access | | HA Monitor aronski | | | | | |
| Occupancy Status During Abatemen | t (Check Only On | e) | | | Stre | et Addre | SS | | | | | |
| Facility Closed/Vacated During | | | | | 100000 | | cutive Aven | ue | | | | |
| Abatement Performed Outside of Other – Describe: work area isc | | | | n | 100 | , State, Z iladelpl | ip Code hia, PA 191 | 53 | | | | |
| Scope of Work (Check All That Apply | 1) | | | - | | | | | | | | |
| ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf | - | enova emolit | | | | × Mi | ni-Enclosure ovebag Proced | t with Negative dure *) and Non-Fri | | | . | |
| | ile. | Locati | | | | 140 | III-Exempled (|) and Honer in | abic i io | Discount Dr. | ement | |
| Location of | N | Locati Iormal | ly | | Descript | ion of | | | | T | уре | |
| Asbestos-Containing Material (A | | d Sole ntenar | | | os Containing | Materia | | Amount | - | | Щ | ш |
| TO BE ABATED In Facility | Cust | odial S (12) | Staff? | | hermal syste surfacing, | VAT, or | | (Specify SF or LF) | Remova | Repair | Encapsulate | Enclosure |
| (13) | | | | | other miscel | laneous) | | | oval | air | sulate | sure |
| | Yes | No | N/A | | | | | | | | (D | |
| West Basement | X | | | | TSI & Fi | | | 550 LF | x | | х | |
| Attic | | X | | | TSI & Cl | | | 6 LF | x | | x | |
| Units A1-E3 | X | | | Sheet Flo | ooring | | 1639 SF | x | | | | |
| | () | х | JDEP W | | Wall Ma | 200 0000 20 | | 790 SF | x | | | |
| Name of Registered Waste Hauler | | | | | | | 2000 | gistered Land | fill . | | | |
| Waste Management, Inc. | | | auler ID 0990 | | of Waste 40 CY | | Growes L | andfill. | 7. = | | CHECKIE | |
| City, State Tullytown, PA | | N = | 3 | | Disposal Da 07/19/201 | | City, State Tullytown | , PA | | | 85 | |
| Completed by | Title | | Parking of Caronin | | Signat | | 1 | | Date | | | |
| Piyush Patel | Progr | am M | lanage | r. | Pi | yu | 1 N | rate 1 | 05/04/1 | 12 | | |

| Date of Notification (1) 05/04/2012 | | | | | f Building ton Uni | | Operator (| 2) | | | | | | | | 3500 |
|---|--|--------------|-------------------|---|-----------------------|----------|----------------------|--------------|--|------------------|------------------|--------|---------------------------------------|-----------|-------------|-----------|
| Agencies Notified | Type Notification | | | Street A E.A. M | ddress IacMilla | n Build | dina | | | | | | | | | |
| EPA DEP DOL | Initial Amended Amendment | #1 | - | City, Sta | ite, Zip Co | ode | | | | | | | 77 | | | |
| ☑ DOH DCA | Emergency justification) Cancellation | | | | Contact | | | | | Tel | ephone N | umbei | r | | | |
| N DON | Caricellation | | | | LITY INF | ORMAT | ION | | | | | - | - | 12000-200 | | |
| Name of Facility Where a | | ig Place (3 |) | 170 | | OT CHILD | | _ | of Facility (4 | | | | | | | |
| Street Address 120 Prospect Aven | | | | - | | | | × S | School (K-12 Subchapter 8 Other (i.e. pr | (Oth | | | uildi | ngs, | home | es, |
| City (5) Princeton, | | | | | *** | | | - | etc.) e Feet 00 | # of | f Floors | | Bld 80 | dg. A | ge | |
| County (6) Mercer | | | | County (| Code (7) JSE ONLY |) | | | nt Use (Prior Ity Reside | | ng demoli | ished) | | | | |
| Name of Monitoring Firm ATC Associates, In | | Owner (8) | | ASCM 0009 | | | Name o | | ement Cont | ractor | (9) | | | | | |
| Street Address 3 Terri Lane | | | | | | | Street A | | s utive Ave | nue | | | | | | |
| City, State, Zip Code Burlington NJ 0801 | ton NJ 08016 fanager for Monitoring Firm | | | | | | City, Sta | | p Code ia, PA 191 | 153 | | | | | | |
| | | | Telephor | ne No. | | Telepho | ne No |). | | License 01109 | No. | | 2 60 | | | |
| Start Date (10) 05/04/2012 | chael Keehn rt Date (10) /04/2012 Schedule 07/18/2 | | | | | - | Name o | f OSH | A Monitor Ironski | | 01100 |) | | 000 | | |
| Occupancy Status During | Abatement (Chec | | | | | | Street A | | | | | | | | | |
| Facility Closed/Vac | | | | ont | | | | | s utive Avei | nue | | | | | | |
| Abatement Perform Other – Describe: | ed Outside of Norn | nal Facility | Hours | | 1 | | City, Sta | 102 | o Code ia, PA 19° | 153 | | | | | | |
| Scope of Work (Check A | II That Apply) | | | | | | | | | | - | | | | | |
| ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf | | - | enova emolit | | | | × | Mini Glov | Containmer i-Enclosure vebag Proce i-Exempted | dure | | | | | e | |
| | | ls | Locati | on | | | | | | | | T | | | ment | |
| Location | of | N | lormal | у | | De | scription o | of | | | | | _ | Ту | ре | |
| Asbestos-Containing | | | d Sole intenar | | | tos Con | taining Ma | aterial | | | mount | - | . | | Щ | m |
| TO BE ABA | The state of the s | Cust | odial S | Staff? | (I.e. | | systems cing, VAT | | tion, | | pecify or LF) | Kemova | | Repair | cap | nclo |
| (13) | | Yes | (12) No | N/A | | other r | miscellane | eous) | | | | ovai | | air | Encapsulate | Enclosure |
| West & East end | l Basement | | | x | Wind | low Ca | aulking 8 | & Gla | zina | 23 w | vindows | x | + | | _ | |
| 1st-3rd Floor West | | 1 | | x | 1500-1500-15 | | aulking 8 | | | | windows | | + | - | | |
| East & Wes | | + | | x | | | aulking 8 | | | | vindows | | + | - | | |
| Last & We. | or Attio | | | | VVIIIC | JOW Ca | auiking c | x Gia | Zirig | 17 V | muows | 1 | + | | | |
| Name of Registered Was | lame of Registered Waste Hauler | | | | | Cubic | Yards | | Name of R | egiste | red Landf | fill | | | | |
| Waste Management, | Inc. | | 10000 | auler ID 1990 | No. | of Wa | ste | | Growes | Land | fill | | · · · · · · · · · · · · · · · · · · · | Samo | | |
| City, State Tullytown, PA | # 50.T | | | | | | sal Date 9/2012 | | City, State Tullytown | n, PA | | | | | | |
| Completed by | | Title | | .00000000000000000000000000000000000000 | | | Signature | 1 | ^ | 10 | 0 0 | Date | | | | |
| Piyush Patel | | Progr | am M | lanage | r | - 1 | riyu | 7 / | 1 10 | 14 | | 05/04 | /12 | 2 | | 1 1 |



| Date of Notification (1) 05/04/2012 | | | | | Building (| | perator | (2) | 1 1/ | | | 1 1 | M | 125 | 7 |
|--|--|---------------------|--------------------------|---------------------|-------------------------|---|---|-------------------|--|----------|-----------|----------------|---------|--------------|--|
| Agencies Notified | Type Notification | | - 13 | Street Ad E.A. M | ddress acMillar | Build | ing | | 701 | : / / | MAY | 0 | | 153 | $\{i_j\}$ |
| DEP DOL | Amended Amendment Emergency | | | | te, Zip Co ton, NJ (| | | i | 1 6 | - And | | ° 20 | 112 | 1 | 77 |
| ➤ DOH ➤ DCA | justification) Cancellation | | | Name of Bob Or | rtega | | | 1 | | Teler | hone M. | , · · · | | | To Company of the Com |
| Name of Facility Where | | g Place (3) | | FACII | LITY INFO | ORMATI | ON | Туре о | f Facility (4) |) | | The same | 1 | J | 1 |
| 120 Prospect Apar Street Address 120 Prospect Aven | | | | | 12 10 100 100 | | | X S | chool (K-12 ubchapter 8 ther (i.e. pri | (Other | | | dings, | home | es, |
| City (5) Princeton, | | | | | | | | Square 60,00 | | # of F | loors | 0.000 | ildg. A | ge | |
| County (6) Mercer | | | | County C | Code (7) ISE ONLY) | | | | t Use (Prior | | g demolis | shed) | | | |
| Name of Monitoring Firm ATC Associates, In | | Owner (8) | | ASCM 0009 | | | | | ement Cont | | 9) | | | | |
| Street Address 3 Terri Lane | | | - | | | | Street | Address | | nue | | | | - X T X 1988 | |
| City, State, Zip Code Burlington NJ 0801 | 6 | | | | | 100000 | City, S | state, Zip | | | | | | | |
| Project Manager for Mor Michael Keehn | | | | Telephor | ne No. 6 8800 | | Teleph | none No 284 10 | | | License | No. | | | |
| Start Date (10) 05/04/2012 | | Schedule 05/18/2 | | npletion (| Date (11) | | 100000000000000000000000000000000000000 | of OSH | A Monitor ronski | | | | | | |
| Occupancy Status Durin | ng Abatement (Chec | | 150 Strate | | | | Street | Address | | nuo | | | | | |
| Facility Closed/Vac Abatement Perform Other – Describe: | eated During Entire ned Outside of Norr work area isolated - | nal Facility | Hours | 3 | n | _ | City, S | state, Zip | | | | | | | |
| Scope of Work (Check A | All That Apply) | | | | - | | - F | 71 | | | | _ | | | |
| ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf | | Section 1 | enova emolit | | | | × | Mini | Containment -Enclosure lebag Proces -Exempted | edure | • | | | · A | |
| | | | Locati | | | | | _ Non | -Exempled | () and | 140111111 | J. J. C. T. C. | Abate | ement /pe | |
| Location Asbestos-Containing TO BE AB | Material (ACM) | Used Mai | ormal d Sole ntena | ly by | | tos Con | scription taining N I system | Naterial | | | ount | R | | | ā |
| In Faci (13) | | | (12) | | 150 | | cing, VA miscellar | | | SF | or LF) | Removal | Repair | Encapsulate | Enclosure |
| East Baseme | ent Area 1 | Yes | No X | N/A | | TS | I Fittin | as | | 90 | LF | x | | x | |
| East Baseme | X | | | | I Fittin | | | |) LF | x | | x | | | |
| | | | | | | | | | | | | | | | |
| Name of Registered Wa | ste Hauler | | 1 3272 | JDEP W | | 1 | Yards | | Name of R | Register | ed Landf | ill . | | | |
| Waste Management | | lauler ID 0990 | No. | of Wa | | | Growes | Landf | ill | | | | | | |
| City, State Tullytown, PA | | | | 3.0 | sal Date 9/2012 | | City, State Tullytow | | | | *1 | - | | | |
| Completed by Piyush Patel | 11 11 11 21 21 | Title Progr | am N | //anage | er | 8 | Signature | e hJ | hr | a te | 1 | Date 05/04/ | 12 | | |

D&S Proj. #: MS 12-007

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

CHECK NUMBER #004227

| Data of Natification (4) | LINE | omo of | Duilding Ou | | | | | | | | | | |
|--|--|------------|--|------------------------|-------|--------------------------------|---------|---------------------------------------|-------------------------|----------|---------|---------|-----|
| Date of Notification (1) | | | & Abibe K | ner/Operator (2) | | | | | | | | | |
| Agencies Notified Type Notifica | tion | eet Add | | adakcı | | | | | - | | | | |
| ☐ EPA ☐ Initial ☐ Amended | | 18 Uor | vard Street | | | | * | | Dan Barre | (AU) | | ** | |
| DEP Amended | 1 | | , Zip Code | | * | | | HANFE O | 6 B | | April 1 | ** 201 | |
| DOL Emergency | | | | Nam. T 07 | 7440 | | 1 | 4 11 | The same ! | | THE | | ••• |
| DOH (including | Na | me of C | The same of the sa | New Jersey 07 | 442 | | | MAY | a Monada | | 5 | 1 | 3 |
| ☐ DCA ☐ justification |) | | | #8 | | | 1 | Telephon | e Numbe | | | 11 | // |
| Cancellatio | n . | Nezla | & Abibe K | abakci | | | A. A. | _1 | | | | -61 | |
| - | | | FAC | ILITY INFORMA | MOITA | 1 | -20 | 1000 | | m / | · *=_ | 1 | |
| Name of facility where abatement | is taking plac | e (3) | | | | | | Type of Facility (| | | | / | |
| Private Residence | | | | | | | | = | (K-42 | The same | . / | | |
| Street Address | | | | | | | - | | apter 8 (0 Private/0 | | | | |
| 1095 Ringwood Avenue | | | | | | | | Bldgs./ | Homes, | etc. | ·** | | |
| City (5) | County | (6) | | | | | = | Square Feet | # of Floo | ors | E | ildg. / | Age |
| , | Journey | (0) | | | | inty Code (7) ite use only) | | Current Hea (Pr | ion if hair | | | 1) | |
| Wanaque | Passa | | | | (0.0 | no doo only j | | Current Use (Pr | nor it beli | ng aer | nolist | iea) | |
| Name of Monitoring Firm Hired by | Bldg. Owner | (8) | | ASCM No. | | Name of Abatem | nent C | ontractor (9) | | | | | |
| | | | | | | D & S REST | ORA | TION, INC. | | | | | |
| Street Address | | | | | | Street Address | | | | | | | |
| | | | | | | 20 Californi | ia Ave | э. | | | | | |
| City, State, Zip Code | С. 110-11-11-11-11-11-11-11-11-11-11-11-11- | | 100 | | | City, State, Zip Co | ode | | | | - 197 | | |
| | | | | | | Paterson, N. | | 03 | | | | | |
| Project Manager for Monitoring Firm | | P | hone Numb | er | | Telephone Numb | | | License | | | | |
| | | | | | | 973-345-80 | | | 0 | 0159 | | | |
| Start Date (10) | Sched. C | omplet | ion Date (1 |) | | Name of OSHA I D & S Resto | | NO | | | | | |
| 05/4/12 | | 18/12 | | | | Street Address | oratio. | ii, mc. | | | - | | |
| Occupancy Status During Abatemen | | | | | | 20 California | a Ave | nue | | | | | |
| Facility closed/vacated during | entire period | of abate | ement. | | | City, State, Zip C | | | | | - | _ | |
| Abatement performed outside Describe: | | ility hou | ırs- | | | | | ₹% | | | | | |
| Other-Describe: NORMAL H | OURS | | | | - 11 | Paterson, N. | J 075 | 03 | | | | | |
| Scope of Work (check all that apply | 1) | | ************* | | | | FL | III Containment w/ | negative | press | ure | | |
| ☐ > <u>3</u> sf or > <u>3</u> If | Renovation | | | | | | = | ini-enclosure | ****************** | - | | | |
| ≥160 sf or ≥260 lf | Demolition | | | | | | | ovebag procedure on-Exempted (*) a | | friabla | Droc | adura | |
| Location of | Is location n | | | | | | | | | R | R | E | |
| asbestos-containing material (acm) to be | by maintena staff(12) | nce/cus | stodial | | | bestos-containing | g | Amount | | e m | e | n | l E |
| abated in facility (13) | Yes | No | N/A | material (A | CM) | | | (Specify SF LF) | or or | 0 | a | a | C |
| | | | INA | | | | | | | v e | i r | р | - |
| Exterior | | X | | | | Aixed With AC | M | 150 YD | | X | | | |
| | | | | Transite Sidi | ng | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| Registered Waste Hauler | NJDEP | Univided 1 | D# 10 | hio Vordo - 1117 | 201- | N 22 22 | | | 10 | | | | |
| D & S RESTORATION, INC. | 13506 | | N | ibic Yards of Wa 50 | aste | Name of Registe TULLYTOW | | andfill ESOURCE REC | COVER | Y | | | |
| City, State | | | Disposal Da | | - | City, State | 2.,10 | -JOURNAL INTE | O T LIN | | | - | |
| PATERSON, NJ 07503 | | | 5/4/1 | 2-5/18/12 | | TULLYTOW | VN, P. | A | | | | | |
| 1920 P. S. B. B. B. S. | Title | T | | Signature | | | | | Date | | | | |
| | PRESIDEN Do not use th | | for asbestos | licensure exem | npted | activities | | | 5/ | 4/201 | 2 | | _ |

D&S Proj. #: MS 12-007

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

CHECK NUMBER #004227

| Date of Notification (4) | | None of F | Called and | | | | | | | | | | |
|--|------------------------|------------------------|-------------|---|--------|---------------------------------|-------------------|-------------------|-------------------------|-------------|--------|------------|-----|
| Date of Notification (1) | | | | ner/Operator (2 |) | | | | | 3 | | | |
| Agencies Notified Type Notified | cation | Nezla & | Abibe K | abakci | | | | | | | | | |
| EPA Initial | | 0 94000000000 | 13405 H-W | | | | | | | | | | |
| DEP Amended Amendment | 1.1 | 48 How City, State, | ard Stree | t | | | | | | | | | |
| DOL Emergend | | 1.5 | -50 | N | | | | | | | | | |
| DOH (including | 11 | Name of Co | | New Jersey 0' | /442 | | | T= : : | | | - | | |
| DCA justification | n) | Name of O | Jillact | | | 8 | | Telepho | ne Numb | er | _ | | |
| Cancellat | on | Nezla & | & Abibe I | Kabakci | | | | | | | _ | | |
| | | | FAC | CILITY INFORM | ATIO | N | | | | | | | |
| Name of facility where abatemen | t is taking p | lace (3) | | | | | Туре | of Facility | | | | | |
| Private Residence | | | | | | | | = | ol (K - 12 | | | | |
| Street Address | | | | | - | | 4 | | hapter 8 ((Private/ | | | (-12) | |
| 1095 Ringwood Avenue | | | | | | | | Bldgs | ./Homes, | etc. | | | |
| City (5) | Cor | unty (6) | | | Co | unty Code (7) | - Squ | are Feet | # of Floo | ors | 8 | ldg. A | \ge |
| W 2000 | | | | | | ate use only) | Curi | rent Use (F | Prior if hei | na den | nolish | ed) | |
| Wanaque | | ssaic | | | | | | 755 | TIOI II DOI | ng don | 101131 | cuj | |
| Name of Monitoring Firm Hired by | / Bldg. Own | er (8) | | ASCM No. | | Name of Abateme | nt Contrac | tor (9) | | | | <i>-</i> | |
| Street Address | | | | | | D & S RESTO | RATION | I, INC. | | | | | |
| Street Address | | | | | | Street Address | A | **************** | | | | | |
| City, State, Zip Code | | | | | | 20 California | | | WI | | | | |
| ,, p | | | | | | City, State, Zip Coo | | | | | | | |
| Project Manager for Monitoring Fire | m | Pi | none Numb | oer | - | Paterson, NJ Telephone Numbe | CONTRACTOR STANCE | | License | Numl | oor | | |
| સં | | | | | | 973-345-802 | | | - | 00159 | | | |
| Start Date (10) | Sche | d. Completion | on Date (1 | 1) | - | Name of OSHA Me | onitor | | | | | | |
| 05/4/12 | | | (. | , | 1 | D & S Restora | ation, Inc | | | | | | |
| Occupancy Status During Abateme | |)5/18/12 | | ACCUPATION OF THE PARTY OF THE | _ | Street Address | | | | | | | |
| Facility closed/vacated during | | | ment. | | | 20 California | | | | - | | | |
| Abatement performed outside Describe: | e of normal | facility hour | s- | | | City, State, Zip Coo | ie . | | | | | | |
| Other-Describe: NORMAL | HOURS | | | | - | Paterson, NJ | 07503 | | | | | | |
| Scope of Work (check all that app | ly) | | | | | l. — — — — F | | tainment w | v/negative | nrace | uro | | |
| ☐ > <u>3</u> sf or > <u>3</u> If | Renovation | on | | | | | Mini-end | | wilegauve | piess | uie | | |
| ≥160 sf or ≥260 lf | Demolition | n | | | | F | | g procedu | | 20.70 | | | |
| Location of | | n normally u | | 1 | | | _ Non-Exe | empted (*) | and Non- | friable | Proce | edure E | 1 |
| asbestos-containing | by mainte staff(12) | enance/cust | odial | Description | n of a | sbestos-containing | | Amount | | e | е | n | E |
| material (acm) to be abated in facility (13) | Yes | No | T | material (A | | | | (Specify S LF) | F or | m o | p a | c a | C |
| | 163 | No | N/A | T1. | | - | | , | | V e | i | р | L |
| Exterior | | | | | | Mixed With ACM | 150 | YD . | | \boxtimes | | | |
| | | | | Transite Sidi | ng | | | | | | | | |
| | | | | | - | | | | | | | | |
| | | | | | | | - | | | | | | |
| egistered Waste Hauler | INIDE | P Hauler II |)# (| ubic Yards of W | aete | Mamo of Desist | d l caden | | | | | | |
| D & S RESTORATION, INC. | 135 | 06 | | 50 | asic | Name of Registere TULLYTOWN | | RCE RE | COVER | Y | | | |
| ity, State | | Ī | Disposal Da | | | City, State | | | | | | - | |
| PATERSON, NJ 07503 | | | 5/4/1 | 2-5/18/12 | | TULLYTOWN | I, PA | | | | | | |
| ompleted by (Print or Type) BOGDAN JOLDZIC | Title PRESIDI | ENT | | Signature | | | | | Date | 14122 | | | |
| | Do not use | | or achaeta | - Unanavas | | 0-10 | | | 5/ | 4/201 | 2 | _ | |

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

| | | (Pursu | | | | | 12:120- | | | | | | - | - | |
|--|--|----------|-----------------------------------|--------------------|----------|--|--------------------------------|----------------|---|-----------------------|-----------------------|-------------|-------------|------------------|---|
| | e of Notification (1) 5/4/12 noties Notified Type Notificat. | | | | | Jone Jone | /Operato | or (2 | |) IP | All Contracts | ٠., | | | |
| | Trme Notifica | tion | Stroo | t Addr | 2000 | | | | - (III) | HER | II. II | - Total | ungana. | Trans | |
| []EPA | [X]Initial | | | | | ton A | venue | 9 | | 1 | | | | 1 | 377 |
| []DEP | Notific | ation | | State | | | | | 1 /1/11 | MAY | | | | 1 | |
| [X]DOL | []Amended | | S | outh | Ora | ange, | NJ (| 0707 | 79 / | | 8 | 2012 |) | | # |
| [X]DOH | Notific | ation | Name | of Con | tact | 10.1 | | | Telenhan | ~ >- | | 9 12 | - | | 1 |
| []DCA | []EMERGENC | | | | | Jones | | | 1 | LICENS | ເບວວ ປາເປັນ 200 | L & | j | | |
| | [] Cancerra | | 1 | FACT | T.TTV | INFORM | ATTON | | 1000 | 100 | Litt. | | - | - 1 | |
| Name of Facility Who | ere Abatement | is Taki | ng Pla | | | | | Ty | pe of Facil: | ity (4) | The second second | - | **** | w.J | |
| Private Street Address | | | | | <u> </u> | | | - | []School []Subchape [x]Other (: | ter 8 (Oth | | | | | |
| 147 Ralston | Avenue | | | | | | | Sq | cial b | uildings, # of Flo | | | tc.) | | |
| City (5) | | County | (6) | | Co | unty Co | ode (7) | | 4000 | 3 | | 1 | 41 | | |
| South Orange | | Esse | × | | (S | TATE U | SE ONLY) | Cu | rrent Use (| | eing | dem | olis | shed |) |
| | | D :23:- | - 1200 | T) () Y- | | hiomo | of Abot | | Residence t Contractor | | | - | | | - |
| Name of Monitoring P Owner (8) N/A | Firm hired by | Buildin | 67 | CM No. | | 0.0000000000000000000000000000000000000 | 시내가를 다입하다. | | AGEMENT | | | | | | |
| Street Address | | J. 14. | | | | 7 10 10 10 10 10 10 10 10 10 10 10 10 10 | et Addre | | pher St | • | | 2.31 | | | |
| City, State, Zip Coo | ie | | | | | | , State | | | | | - | | 7. | |
| | | | | | | | | | NJ 070 | | | | | | |
| Project Manager for | Monitoring Fi | | lephor /A | e Numb | per | | 73) 74 | | | | Licer 00 | 37 | | per | |
| Scheduled Start Date | (10) Sche | d. Comp. | letion | Date | (11) | Name | of OSH | A Mon | itor | | | | | | |
| 5/13/12 | 75275 | 14/12 | | | | N/A | | | | | | | | | |
| Month Day Ye | ear Mo | nth 1 | Day | Year | r 100 | | I Hallane | | | | | | | | |
| Occupancy Status Dur [X]Facility Clo of Abatemen | sed/Vacated D | 77 | | | L | Stree | et Addre | ess | | | | | | | |
| []Abatement Pe | rformed Outsic ribe: «OffHour: | s Descri | .pt» | | .ty | City | , State, | , Zip | Code | | | | | | |
| Scope of Work (Check | | | | | | 11 | | | | | | | | | |
| [X]>3 sf or []>160 sf or | ≥3 lf | Ε | | ovation olition | | | []Min: [X]Glo | i-Enc vebag | tainment wi closure procedure able Procedu | - | e Pre | essu | re | | |
| | | | Is | 54556 54656 | 1 | | | | | | | Aba | teme | nt 1 | OCCUPATION AND DESCRIPTION OF THE PERSON NAMED IN |
| Location Asbestos-Con Material | ntaining | | locati Normal Used Solel | ly | | Asbe | escript estos-Co aterial | ontai | ning | Amount (Specif | August 1 | R E M | R E P | E N C A | E N C L |
| TO BE AB | | | By Mai: enanc | | | | , therm | | | SF or LF) | | 0 | A | PS | OS |
| In Facil | ity | C | ustodi | al | 1 | | ner misc | | ng, VAT, neous) | LE | 1 | A | I R | T. | UR |
| (25) | 57 98 | Yes | No | N/A | | | | | | | | | | | E |
| Basement | | | | X | Pip | e In | sulat | ion | | 50 lf | | X | | | |
| Basement | | | X | Cle | anin | g of | bar | e pipe | 150 lf | | | | x | | |
| | | | JDEP W | lagte | 1 | ubic Ya | rde | h1 | lame of Regi | stered Tan | dfill | | | L | |
| Name of Registered W AZTECH MANAG | | C H | | ID No. | 1 653 | f Waste | | 1,815 | G.R.O.W. | | | | | | |
| City, State | | | | | | isposal | | 11 000 | ity, State | | 2 2237 247 | | 2.607.0 | | - 3 |
| Montclair, NJ | 07042 | | | | | 5/15 | /12 | M | Morrisvi. | lle, PA | 19 | 06 | 7 | | |
| Completed By (Print | | | | | | 5 | gignatu | re) | 1-1-11 | / | Da | te | | 70000 | 3 7 |
| Constantine V | ivian Pr | eside | ent | | | (| in | Mu | ula /- | | 5, | /4/1 | 2 | | |
| | | | | | | 1 | | | | | | | | | |

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

Check # 6729 E. P. W. S. .. Name of Building Owner/Operator (2) Date of Notification (1) Mercer County Community College 5/4/12 Type of Notification Street Address Agencies Notified 1200 Old Trenton Road [] EPA Initial [] DEP Notification City, State, Zip Code DOL West Windsor, NJ 08550 Amended DOH Notification [X] Telephone Number Name of Contact [] DCA [] Cancellation Fred Carella - Carriedor **FACILITY INFORMATION** Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Subchapter 8 (Other than K-12) Other (i.e. private and commercial buildings, Math & Science Bldg. Street Address homes, etc.) 1200 Old Trenton Road # of Floors Bldg. Age Square Feet ~55 County Code (7) County (6) City (5) Current Use (Prior if being demolished) (STATE USE ONLY) Mercer West Windsor College classrooms Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner ASCM No. Jupiter Environmental Services, Inc. 00110 Whitman Companies, Inc. Street Address Street Address 3 Lynn Court 116 Tices Lane, Unit B-1 City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035 East Brunswick, NJ 08816 License Number Telephone Number Telephone Number Project Manager for Monitoring Firm 00852 973-709-0200 732-390-5858 Kevin Lovely Name of OSHA Monitor Scheduled Start Date (10) Sched, Completion Date (11) J & S Environmental Laboratories, LLC 5/14/12 5/31/12 Street Address Occupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement 2333 Route 22W Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code Describe: Union, NJ 07083 Other - Describe: partially vacant Scope of Work (Check all that apply) Full Containment with Negative Pressure Mini - Enclosure Renovation [x] [] Demolition [] Glovebag Procedure [] ≥3 sf or ≥3 lf Non - Friable Procedure [X] ≥160 sf or ≥260 lf [x] Abatement Is Location Туре Description of Normally Used Amount R R E Asbestos - Containing Solely by Location of E N C E Material (ACM) (Specify N Maintenance/Cus Asbestos - Containing SF or LF) M C (i.e., thermal systems Material (ACM) todial Staff (12) 0 A A L insulation, surfacing, VAT, TO BE ABATED Р or other miscellaneous) V 1 0 In Facility R S Α S N/A No Yes (13)U 8600 SF VAT and mastic, table tops, transite 2nd and 3rd floors X Name of Registered Landfill NJDEP Waste Cubic Yards Name of Registered Waste Hauler Hauler ID No. Of Waste Minerva Landfill Jupiter Environmental Services 04782 Disposal Date City, State City, State Waynesburg, OH 5/30/12 Lincoln Park, NJ Date Signature Completed By (Print or Type)

General Manager

Pane Repic

5/4/12

| | | | | | ASBESTOS A | BATEMENT 1 12:120-7 | · digreen | a scholoral deliveral | Shidonian S. S. | 数数等 ~ | | |
|--------------------------------|-------------------------|-----------------|--|---|----------------|---------------------------|----------------------------------|------------------------------|-----------------|--|------------|-----|
| Date of Notification | ı (1) | (EULS) | | | | r/Operator | | | N// 17 | 5 1 | 77 | |
| 5/4/12 | | | Ca | roly | n A. S | isto | IKE | and The I | WE | 3// | | |
| Agencies Notified | Type Notific | ation | | Addre | | D | | MAV - | | | Ш | |
| []EPA | [X]Initial | | 20 | Sou | th Pie | rson R | oad | MAY 8 | 2012 | | 7 | |
| []DEP | Notific | cation | | | Zip Code | | | | | The same of the sa | N. Carlot | |
| [X]DOL | []Amended Notifie | ration | Ma | plew | rood, N | J 0704 | 0 1 | ASBESTOS CONT | ROL & | _ | American | |
| [X]DOH | ROCILIA | Jacron | Name o | of Cont | act | | See of | - JIPFARCIAN | 104 0 | - | - | |
| []DCA | []EMERGENO | CX | Dori | is Sis | sto Lust | usky, E | XE 🐣 🚬 | | of the spinors | | à | |
| | []Cancella | ation | | | | | ***** | | | | - 481 - 14 | |
| | | : - m-1- | : Dl- | | LITY INFOR | MATION | Type of Faci | 1 i tor (4) | | | | |
| Name of Facility Whe | ere Abatement | is Tak | ing Pia | ce (3) | | | []School | | | | | |
| | | | | | | | []Subcha | pter 8 (Othe | | | | |
| Street Address 20 South Pie | maan Ban | 4 | | | | | | (i.e., priva buildings, h | | | | |
| 20 South Pie | rson Road | 1 | | | | | Square Feet | # of Floo | | ldg. | | |
| City (5) | | County | (6) | *************************************** | County | Code (7) | 2046 | 2 | | 83 | 5- | |
| Maplewood | | Ess | ex | | (STATE | USE ONLY) | Current Use | (Prior if be | ing de | moli | shed |) |
| | | | | | | | Residen | ce | | | | |
| Name of Monitoring H | Firm hired by | Buildi | ng ASC | M No. | | | ment Contracto | | | | | |
| Owner (8) | | | 67 | | A | ZTECH N | MANAGEMENT | r, Inc. | | | | |
| Street Address | | | | | 11 | eet Addres | | | | | | |
| | | | | | 8 | 6 Chris | stopher St | | | | | |
| City, State, Zip Coo | ie | | | | | y, State, ontcla: | Zip Code Lr, NJ 070 |)42 | | | | |
| Project Manager for | Monitoring F | irm To | elephone | e Numbe | er Tel | ephone Num | ber | ф | icense | Num | ber | |
| | | | /A | | (| 973) 744 | 1-8800 | | 0037 | 11 | | |
| Scheduled Start Date | e (10) Sch | ed. Com | oletion | Date (| (11) Nam | e of OSHA | Monitor | | | | | |
| 5/14/12 | 5 | /15/1 | 2 | | N/ | A | | | | | | |
| Month Day Ye | | onth t (Chec | Day k only | Year | Str | eet Addres | 19 | | - 44 | | | |
| [X]Facility Clo | sed/Vacated I | During E | Intire P | Period | | | | | | | | |
| of Abatemen []Abatement Pe | | ide of N | Tormal F | acilit | v Cit | y, State, | Zip Code | | | | | |
| Hours - Desc | ribe: «OffHou | cs Desci | cipt» | | | 1, 55000, | 41P 0000 | | | | | |
| []other - Desc | | | y Descr | ipt» | | | | | | | | |
| Scope of Work (Check | k all that ap | ply) | | | | []Full | Containment w | ith Negative | Press | ure | | |
| $[X] \ge 3$ sf or | | | [X] Reno | | | []Mini- | -Enclosure | | | | | |
| []≥160 sf o | or >260 lf | | []Demo | lition. | * | | ebag Procedure Friable Proced | ure | | | | |
| | | | Is | n | | | | | Aba | ateme | | |
| Location Asbestos-Cor | | | Normall | | As | Description Destos-Con | | Amount | R | R | E N | E |
| Material | 이용하다 그들은 교육하다 | - | Used Solely | | | Material | (ACM) | (Specify | | E | C A | CFO |
| TO BE AB | | | By Main tenance | | | ., therma | l systems acing, VAT, | SF or LF) | O A | Ā | PS | S |
| In Facil | P200831 37 6 | | Custodia Staff (1 | | | ther misce | 1000 TOS 1000 | | A | R | U | UR |
| | | Yes | | N/A | | | | 75.16 | 37 | - | | E |
| Basement | | | 1 | X] | Pipe II | nsulati | .on | 75 lf | X | - | | |
| | | | | | | | | - | | | | |
| | | | | | | | | L.,,,,,, | | | | L |
| Name of Registered V | | 140000 | NJDEP Wa | | Cubic : | ards te 1.0 | G.R.O.W. | istered Land | TILL | | | |
| AZTECH MANAG | ENENI, II | | 17040 | | | | | | | | | |
| City, State | 07040 | | STATE OF THE PARTY | | Disposa E/1 | | City, State | 110 /02 | 1004 | :7 | | |
| Montclair, NJ | 07042 | | | | 5/10 | 5/12 | MOLLISVI | lle,/PA | T 306 | , , | | |
| Completed By (Print | or Type) Ti | tle | | | | Signature | 1/ | -1/ | Date | | | |
| Constantine V | | resid | ent | | 4. 1 | 100 | Vate de | 1/. | 5/4/ | 12 | | |

| Date of Notification (1) | | | | Name of | Building (| Owner/Operate | or (2) | | | 1 1 2 | | | |
|--------------------------------|--|-------------|-----------------------|-----------------|----------------------|-------------------------------|-------------|---|-----------------------------------|-----------|---------------|--------------|--|
| Ma | y 04, 2012 | | | Donnell | y Constr | ruction | | | | | | The second | |
| Agencies Notified | Type Notification | | | Street A | | | | i i i | AY 8 2 | 712 | | | _ |
| EPA EPA | Initial | | | 557 Rt 2 | 23 South | 1 | ļ | | 4- | or com | الموابده | | |
| DEP | Amended | | | City, Sta | te, Zip Co | de . | | t | (X 7) . E. | 200 | - | 1 | - |
| DOL | Amendment | | | Wayne, | NJ 074 | 70 | . ! | rı. | | in the | | 2 | |
| DOH. | Emergency (| including | | - | Contact | 200-100 P | į. | | Telephone | | anthern Color | ٠ کی | |
| DCA | Cancellation | | | Mike Mo | Namara | a | 6, | - | A COURT OF THE PARTY OF | n ** / - | | | |
| | L | | | FACI | LITY INFO | RMATION | | <u> </u> | | | | | |
| Name of Facility Where | Abatement is Takin | g Place (3 | 3) | | | | Тур | e of Facility (4 | 1) | | | | |
| Toys R Us | | | | | | | | School (K-12 | | | | | |
| Street Address | | | | | | 4 | | | 8 (Other than K rivate & comme | | dinas | hom | 00 |
| 1701 Morris Ave | | | | | | | X | etc.) | invate & comme | rciai bui | uiiga | , 110111 | C3, |
| City (5) | | | | | | | Squ | are Feet | # of Floors | | 3ldg. | Age | |
| Union, NJ | | | | | | | | | | | | | 9 |
| County (6) | | | | County C | | | Curr | ent Use (Prio | r if being demo | lished) | | | |
| Union | | | | STATE U | JSE ONLY) | | | | retail | | | | |
| Name of Monitoring Fire | m Hired by Building | Owner (8) | | ASCM | No. | Nam | ne of Ab | atement Conf | tractor (9) | 72-1-1 | | | |
| AET | | | | 0021 | | The | MACK | Group, Ll | _C | | | | 9° 1. 19° 1. 18° 1. 18° 1. 18° 1. 18° 1. 18° 1. 18° 1. 18° 1. 18° 1. 18° 1. 18° 1. 18° 1. 18° 1. 18° 1. 18° 1. |
| Street Address | | | | | | Stre | et Addre | ess | | | | | |
| 907 Doolittle Drive | | | | | | 1500 |) Kings | s HWY N, | STE 209 | | | | |
| City, State, Zip Code | | | | | | City, | State, | Zip Code | | | | | |
| Bridgewater, NJ 088 | 307 | | | | | Cher | rry Hill | , NJ 08034 | 1 | | | | |
| Project Manager for Mo | A STATE OF THE PARTY OF THE PAR | | | Telephor | ne No. | | phone I | | License | No. | | | |
| Eric Houseknecht | | | | (908) 21 | 8-1108 | (973 | 759 | - 5000 | 00781 | | | | |
| Start Date (10) | | Schedule | ed Co | mpletion [| Date (11) | Nam | ne of OS | SHA Monitor | | | | | |
| 5-18-1 | 12 | | | 8-15-12 | 2 | The | MACK | Group, Ll | _C. | | | | |
| Occupancy Status Durin | ng Abatement (Chec | k Only On | ne) | | | Stree | et Addre | ess | _ | | | | |
| Facility Closed/Vac | cated During Entire I | Period of A | Abate | ment | | 1500 |) Kings | s HWY N, | STE 209 | | | | |
| Abatement Perform | ned Outside of Norm | al Facility | Hour | rs | . d a 7a aa | City, | State, | Zip Code | | | | | |
| Other - Describe: | 13 Phases all week | end work, | rn n | opm - wor | iday /ami | - Cher | rry Hill | , NJ 08034 | | | | | |
| Scope of Work (Check / | All That Apply) | | | | | | | | | | | | |
| ≥3 sf or ≥3 lf | | X F | Renov | ation | | | X F | ull Containme | nt with Negative | e Pressi | ire | | |
| ≥160 sf or ≥260 lf | | | Demol | ition | | | | ini-Enclosure | | | | | |
| | | | | | | | | lovebag Proc on-Exempted | edure (*) and Non-Frial | ble Proce | edure | | |
| | | la la | Loca | 4: | - | | | <u>-</u> | | | Aba | temen | t |
| Lacation | | | Norma | 101 | | Descripti | | | | | Т | ype | |
| Locatio Asbestos-Containing | | 7000000 | | ely by | Asbest | Descriptions Containing | | al (ACM) | Amount | | | m | |
| TO BE AE | *************************************** | 1 2 2 | intena todial | ance/ Staff? | | thermal syster | ms insu | | (Specify | Re | R | nca | Enc |
| In Fac (13) | | 000 | (12) | , consequences | | surfacing, V other miscell | | , | SF or LF) | Remova | Repair | nsdi | Enclosure |
| (10) | ' | | | | | other midden | uncouo | ′ | | Val | ¥ | Encapsulate | Тe |
| | | Yes | No | N/A | | | | | | | _ | " | 1 |
| through | hout | | X | | | Vat/Ma | stic | | 37,000 s/f | X | | | |
| | | | | | | | | | . , | | | | |
| | | | | | | | | | | | - | + | - |
| | | + | | | | | | | | | | - | - |
| | P 2 | | | | | (0 5 | | | | | | | |
| Name of Registered Wa | ste Hauler | 100 | NJ DEP W Hauler ID | 3333030303 | Cubic Yards of Waste | | Name of F | Registered Land | lfill | 47/30 | | -65/0000 | |
| Newark Carting | * * * | | 450 | | 370 | | Cumberla | and County I | andfill | | | | |
| City, State | | | 430 | | Disposal Dat | te | City, State | CONTRACTOR OF THE PARTY OF THE | _andill | | | | |
| Newark, NJ | | | | | | 8-15-1 | | Newburg | | | | | |
| Completed by | | Title | | | | Signatu | | INCAPOLITY | | Date | - | V | |
| Mike Cooper | | Presid | ent | | | Shar | 1 111 | | | 6/4/12 | | | |
| wike Cooper | | riesiu | CIIL | | | | | - | | 14/12 | _ | | |

C/#00104910

| Date of Notification (1) 05/03/2012 | | | | f Building College c | | | | | Con I Tombre | | W | Jan Jan | |
|--|---|--------------------------------------|---------------------------|------------------------------------|------------------------------|-----------|--|---------------------|------------------------------|----------------|----------------|-------------|-----------------|
| Agencies Notified X EPA X Initial Amended Amendmen Emergence Emergence Amendmen Emergence E | nt # | _ | City, Sta Ewing | Penning ate, Zip Co , NJ 086 | ode 628 | ad | 16 | L. Asi | MAY | 8 2 | 012 | | |
| DOH justification Cancellation | 1) | | David | f Contact Jurkin | | - | | | | IE'S | | | 1 |
| Name of Facility Where Abatement is Tak The College of New Jersey - Cros Street Address 2000 Pennington Road | | | FACI | ILITY INF | ORMAT | ION | Type of Facility School (K- Subchapte Other (i.e. etc.) | 12) er 8 (Oth | | | ildings | , hom | <i>j</i> es, |
| City (5) Ewing | | | | | | | Square Feet 54000 | # o | f Floors | | Bldg. / 20+ | Age | |
| County (6) Mercer | | | | Code (7) USE ONLY |) | | Current Use (Pr Dormitory | rior if be | ing demol | ished) | | | |
| Name of Monitoring Firm Hired by Building USA Environmental Management | |) | ASCN 0112 | | | | of Abatement Co ola Services, | | (9) | | | | |
| Street Address 344 West State Street | | | | | | | Address B Lucon Roa | ad | | | | | |
| City, State, Zip Code Trenton, NJ 08618 | | | | | | | tate, Zip Code back, PA 194 | 74 | | | | 8 | 27-2-2 |
| Project Manager for Monitoring Firm William Weisgarber, Jr. | | | Telepho 609.65 | ne No. 56.8101 | | | none No. 539.5634 | + | License 01077 | No. | | , | |
| Start Date (10) 06/01/12 | ate (10) Schedule /12 07/06/1 | | | | | | of OSHA Monito ola Services, | | | | | | |
| ➤ Facility Closed/Vacated During Entire | 12 07/06/1 ncy Status During Abatement (Check Only One cility Closed/Vacated During Entire Period of A atement Performed Outside of Normal Facility | | | | | | Address B Lucon Roatate, Zip Code pack, PA 194 | | | | | | |
| Scope of Work (Check All That Apply) | | | | | | Onap | Juon, 171 10 1 | | | | | | |
| ≥3 sf or ≥3 if ≥160 sf or ≥260 if | | Renova Demoli | | | | × | Full Containn Mini-Enclosu Glovebag Pro Non-Exempte | re ocedure | | | | ·e | |
| | | Locat Norma | | | | | | | | | Abat | emen /pe | 1 |
| Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) | Use Ma | ed Sole iintena todial (12) | ely by ince/ Staff? | | tos Cont thermal surfa | | laterial (ACM) s insulation, T, or | (5 | mount Specify F or LF) | Removal | Repair | Encapsulate | Enclosure |
| Basement, Floors 1 thru 6 | | X | 1.0. | Vinv | l asbe | stos tile | e & mastic | 46 | 850 SF | X | +- | - | |
| Basement, floors 1 thru 6 | | X | | | | | insulation | - | 74 LF | X | | | |
| Cromwell Hall - Roof | X | | F | Roof dr | ain ins | ulation | 1 | 2 LF | x | | | | |
| Basement | | X | | | ACM | coated | sink | | 1EA | х | | | |
| Name of Registered Waste Hauler Waste Management | H | IJDEP W lauler ID 1727 | No. | Cubic of Was | ste | Waste | Mana | red Landi gement | TU | Щ | י שני | J | |
| City, State Keyport, NJ | - 4 | - 62 | | * | Dispos | al Date | City, Sta | | N, Pi | 4 | | | |
| Completed by Caroline M. Harper | Title Proje | ct Ma | anager | | S | igrature | | terx | | Date 5/3/12 | | | |

Check# 8308

| Date of Notification (1) 5–4–12 | T | Name o | of Building au Ame | Owner/ erist | Operator eel | (2) | | 11-1- | | | | 1, 21, 21, 21, 21, 21, 21, 21, 21, 21, 2 | en e | | | | |
|---|--|----------------------------|-----------------------|--|--|-------------------|---|------------------------|-------------------------------|-----------------|-----------|--|---------|---|-----------|--|--|
| Agencies Notified X EPA | Type Notification | | | Street A 1 No | Address orth Ci | cossm | ans Ro | oad | | | . ! | V | IG. | | 1 | | |
| D DEP | ☐ Amended Amendment | | _ [| City, Sta | ate, Zip C rsvil | ode Le, N | J 088 | 72 | | 11117 | 0 | o cy | (7) | I | | | |
| DOH DCA | ☐ Emergency (i justification) ☐ Cancellation | ncluding | | | f Contact Blai | re | | 67 |) | Telephone | Numb | er | | | | | |
| - | | | | FAC | ILITY INF | ORMAT | ION | ·········· | 1 1,5 | 1 1 | · Itali | | 120 | | | | |
| Name of Facility Where | | Place (3) | | | | | | Type of F | acility (4) | i at | | | | 0.0000000000000000000000000000000000000 | | | |
| Gerdau Ameri | steel | | | | | | | □ Scho | ool (K-12) | i i | No. | | | | | | |
| Street Address 1 North Cross | mans Road | 27 | | | | | | | chapter 8 (er (i.e. priva | | | ouilo | lings | , hom | es, | | |
| City (5) | | | | | | | | Square F | | # of Floors | | В | ldg. A | Age | | | |
| Sayersville | | | | | | | | 100,0 | 00 | 2 | | | 50 | | | | |
| Sayersville County (6) Middlesex | | e and many my part and the | | | Code (7) USE ONLY |) | | | Ise (Prior if | being dem | olished |) | | | | | |
| Name of Monitoring Firm | Hired by Building C | wner (8) | - de | ASCN | Л No. | 100 | Name | of Abatem | ent Contrac | ctor (9) | - | | | | | | |
| n/a | | | | | | | | | Enviro | | L Co. | ,1 | nc. | i | | | |
| Street Address | | | | | | | | Address | | | | | | | | | |
| | | | | | | | Her. 0.707.700 | | Avenue | 9 | | | | | | | |
| City, State, Zip Code | | | | | | | 1 1 2 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | ate, Zip C | | | | | | | | | |
| 5 | roject Manager for Monitoring Firm | | | | | | | | n, PA | | | | | | | | |
| Project Manager for Mon | | Telepho | ne No. | | | one No. –239–9 | 920 | Licen: | se No.)398 | | | | | | | | |
| Start Date (10) 5-22-12 | | | | | | | | of OSHA M | Monitor Enviro | nmenta | l Co | • , : | [nc | | | | |
| Occupancy Status During | g Abatement (Check | Only One |) | | | | | Address | | | | | | | | | |
| ☐ Facility Closed/Vac | ated During Entire P | eriod of Ab | atem | 022 Herra Avenue | | | | | | | | | | | | | |
| □ Abatement Perform | ed Outside of Norma | | | urs City, State, Zip Code | | | | | | | | | | | | | |
| Other – Describe: | | *** | | Norristown,PA 19401 | | | | | | | | | | | | | |
| Scope of Work (Check A | II That Apply) | | | | | | | | | | | | | | | | |
| ≥3 sf or ≥3 lf≥160 sf or ≥260 lf | | | nova moliti | vation ☐ Full Containment with Negative Press lition ☐ Mini-Enclosure ☐ Glovebag Procedure | | | | | | | | | | | | | |
| | | | | | , | | ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure | | | | | | | | | | |
| | T. | ls L | ocatio | on | | | | | | | | 1 | | ement | t | | |
| Location | | No Used | rmall | | | De | escription | of · | | | _ | | <u></u> | pe | | | |
| Asbestos-Containing TO BE ABA | | Main | | | | | | aterial (AC insulation | | Amount (Specify | | " l | | Ē | т | | |
| In Facili | | Custo | | taff? | (1.6. | surfa | cing, VA7 | Γ, or | | SF or LF) | | em | Repair | cap | nclo | | |
| (13) | | | (12) | | | other | miscellan | eous) | | | | Removal | air | Encapsulate | Enclosure | | |
| | | Yes | No | N/A | 1 | | | | | 4 | | | | te | U | | |
| electrical buil | lding | x | | | roof: | ing f | lashi | ng | 250 | O SF | x | | | | | | |
| | | - | 2,- | | | | | | | | | | | | | | |
| | | | | | | 100 | | 700 | | | | | | | | | |
| | | | 1 | | | | | | | | | | | | | | |
| | | | | | aste No. | of Wa | | 1000000 | me of Reg | istered Lar | dfill | | | | | | |
| | | | | |) | 30 | | | IESI | | | | | * | | | |
| City, State | | | | | | | sal Date | | y, State Rothlel | nem DA | | | | | | | |
| Newark, NJ | | | | | 6-4-12 Bethlehem, PA e Signature Date | | | | | | | | | | | | |
| Completed by James M. Kelly | 7 | Title Pro | jec | t Mar | nager | " | Jighalure | 11 | 1000 | | Date 5-4- | 12 | | | | | |
| (A) | | | | | 11 | /// | | | | | | | | | | | |

| * 1 | | | Ą | |
|-----|-------------|----|-----------|-----|
| 11 | - ~ | KH | 1 4 | 801 |
| / 1 | ΔDC | K | 11/ | TUZ |
| 1 | 100 | < | · Carlina | |

| Date of Notification (1) 4/26/2012 | - 10 | Name of Building Owner/Operator (2) Northvale Shopping Center Associates | | | | | | | | | | | | | |
|--|---|---|--------------------------|---|-----------------------------|---|--|---------------------|------------------------------------|-----------|--|----------------|--|-----------|--|
| Agencies Notified Type Notification | | 5 | Street A | dispersion representation | ., . | | | m | EGE | | W | E | | 1 | |
| EPA Initial Amended Amendment DOH Emerger.cy (justification) DOA Cancellation | | - 1 | City, Sta Fort Le | te, Zip Co ee NJ 07 Contact Slater | de | | 2 paragraphic | | MAY | 8 Numb | 20 |)12 | The second secon | 圳 | |
| | | | | LITY INFO | ORMAT | ON | ĺ | - | ASBEST | OS CO | NTR | JL & | min California | - | |
| Name of Facility Where Abatement is Takin Private Property | g Place (3) | | | | | | Type of Fa | - | Annument of the Co. | CENS | and the later of t | and the second | | - | |
| Street Address 254 Livingston Street | | | | | | | Subc | hapter 8 | Other than ate & comm | K-12) | | | | es, | |
| City (5) Northvale New Jersey | | | | | 4 | | Square Fe 6000 | et | # of Floors 2 | 3 | 5000 | ldg. A 50 | ge | | |
| County (6) Bergen | | | | Code (7) JSE ONLY) | | | Current Us | se (Prior i | f being dem | olishe | d) | | | | |
| Name of Monitoring Firm Hired by Building on/a | Owner (8) | | ASCN n/a | l No. | | 0.0000000000000000000000000000000000000 | of Abateme Phase G | | ector (9) | | | | | | |
| Street Address | | | | | | 1000000000 | Address 52nd stre | et suite | #16 | - 0 | | | | | |
| City, State, Zip Code | | | | | | City, State, Zip Code West New York NJ 07093 | | | | | | | | | |
| Project Manager for Monitoring Firm | | - 8 | elephor | ne No. | | Teleph | none No. 758-7158 | | Licens 0011 | | J. 100730 | | | | |
| Start Date (10) 5/8/2012 | Scheduled 5/14/201 | Com | | Date (11) | | Name | of OSHA M Environm | | | | | | 1000 | | |
| Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire Facility Closed/Vacated During Entire Facility Closed/Vacated During Entire Facility Closed/Vacated During Entire Facility Closed Vacated During Entire Facility Closed Vacated Control of Control o | Period of Aba | ateme | ent | iinde Sasaan | | 2333 City, S | Address Route 22 tate, Zip Co n NJ 0708 | de | | | | | | | |
| Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf | | novation molition | | | | × | Mini-End Gloveba | closure g Proced | with Negati lure) and Non-F | | | | e | | |
| | 5933000 | catio | | | - | | | | | | | | ment pe | | |
| Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) | Used S Maint Custod (| Solely enan | y by ce/ | | tos Con thermal surfa | | Material (ACI s insulation, T, or | | Amount (Specify SF or LF) | | Removal | Repair | Encapsulate | Enclosure | |
| Roof | | | х | | roo | f mate | rial | | 6000SF | | x | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | + | | | | | |
| Name of Registered Waste Hauler | | IDEP W | | 100000000000000000000000000000000000000 | Yards | Nai | me of Reg | gistered Lar | ndfill | | | | | | |
| D'IW | Hauler ID No. of Waste Cumberland | | | | | | | | | | | | | | |
| City, State 109-113 Jacobus Ave | Disposal Date City, State South Kearny NJ | | | | | <u> </u> | | | | | | | | | |
| Completed by Edwin Precilla | Mai | nager | Signature Date 4/26/2012 | | | | | | | | | | | | |

Chalat 1497

| Date of Notification (1) 4/26/2012 | | K | enned | Building O y Realty | | | | enter of the for | | modernos A. J. Ja | | 700 | | | | |
|---|---------------------------------------|-------------------------------------|-----------------|------------------------|----------------------------------|---------------------|---------------------------------|-----------------------|-------------------------------------|------------------------|---------|----------|-------------|-----------|--|--|
| Agencies Notified Type Notification EPA X Initial | on | 54 | | ennedy | | 3 | | 16 | G | | E | In | 1 | _ | | |
| DEP Amended Amended Amendme | ent # cy (including | | | , Zip Cod ew York | | 093 | | | T= . | nhana Neim | har | | | | | |
| DOH justificatio | n) | | ame of C .by | Contact | | in the party of | | , | Larele | nraa arin | .mar | 1 | - | | | |
| | | | FACILI | TY INFO | RMATIO | N 3 | upo of E | actity (X) | a moto | S CONTRO | 0 | 3 | 4 | - | | |
| Name of Facility Where Abatement is Tal Private Property Street Address | king Place (3) | | | | | | Scho | ool (K-12 |) Lli | CENSING r than K-12 |) | - صديدات | | | | |
| 5418 Kennedy Blvd | | | | | | 2 | etc.) | | | commercia | | ngs, I | | s, | | |
| City (5) West New York NJ 07093 | | | | 77. | | 3 | Square F 850 | | 1 | Floors | +5 | 00770 | Je | | | |
| County (6) Hudson | 04.1 019 | | ounty Co | ode (7) SE ONLY) | | _ ' | Current C | Jse (Prioi | r it beir | ng demolish | ea) | | 36 | | | |
| Name of Monitoring Firm Hired by Buildin | ng Owner (8) | \dashv | ASCM | No. | | Name of First P | | | ractor | (9) | | | | | | |
| n/a | | | n/a | | | Street A | | Лоцр | | - | | | | | | |
| Street Address n/a | | | | | 7335-100 | | | eet Suit | ite#16 | | | | | | | |
| City, State, Zip Code n/a | | | | | | City, Sta West 1 | te, Zip C Vew Yo | ode ork NJ (| NJ 07093 | | | | | | | |
| Project Manager for Monitoring Firm n/a | | | elephon n/a | e No. | | Telepho 201-75 | ne No. 58-715 | 8 | - 277 | License N 001144 | | | | | | |
| Start Date (10) 5/7/2012 | Scheduled 5/9/2012 | | oletion D | ate (11) | | Name of J&S E | | Monitor mental | Corp | | | | , A | | | |
| Occupancy Status During Abatement (C | | | | | | Street A | | 22 Wes | st | | | | | | | |
| Facility Closed/Vacated During Ent Abatement Performed Outside of N Other – Describe: 8 Hours | ire Period of Ab Iormal Facility F | ateme Hours | ent | | _ | City, Sta | | Code | | | | | - | | | |
| Scope of Work (Check All That Apply) | | | _ | | | | | | | | | | | | | |
| ≥3 sf or ≥3 lf x ≥160 sf or ≥260 lf | - | novati | | | | × | Mini-E Glove | nclosure | edure | Negative F | | | e | | | |
| | | | | | | | INOTI-L | xempled | · | a Ivoir i ilai | | | emen | t | | |
| Location of | | ocation ormally | | | Des | scription of | of . | | | | | Ty | ре | | | |
| Asbestos-Containing Material (ACM TO BE ABATED In Facility (13) |) Mair Custo | Solely ntenan odial S (12) | taff? | Asbes (i.e. | tos Conta thermal s surfac | aining Ma | ateria! (A insulatio , or | CM) in, | CM) Amount (Specify SF or LF) | | Removal | Repair | Encapsulate | Enclosure | | |
| | Yes | No | N/A | | tr | ransite | | | | 50SF | x | | | | | |
| Garage | | - | X | | u | ansite | | | _ | | | | | | | |
| | | | 16 | | | | | | - | | | | | | | |
| | | | | | | | | | | | | | | | | |
| Name of Registered Waste Hauler | 1000 | JDEP W | | Cubic of Was | | - 1 | | | ered Landfi | II | | | | | | |
| DJM | DJM | | | | | | | Cumbe | | | | | | | | |
| City, State 109-113 Jacobus Ave | | | | | | sal Date | | City, Stat South I | Kearr | | | | | | | |
| Completed by Edwin Precilla | ct Ma | nager | | S | Signature | Cu | -10 | C | 4 | ate -/26/2 | 012 | | | | | |

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

| D&S Proj. #: MS 12-161 | | | | | | 3 Abatement 0 and 12:120) | | | | | u _{igo La} | | |
|--|-----------------------|------------------|--|---|--------|--|-----------|---------------------------------------|-------------------|----------|------------------------|--------|--------------|
| Date of Notification (1) | | Name of B | uilding Own | er/Operator (2) |) | | 1000 | | 1 | 11/ | 137 | 7.5 | 7 |
| $ \frac{0}{5} / \frac{0}{4} / \frac{1}{2} $ | | CARMI | ELYN TO | BIN | | | 1- | MAY | | | 100.3 | | 1 |
| Agencies Notified Type Notific | ation | Street Add | In the fill is not the control of the fill | | | | le le | | -8-0 | 110 | | 777 | |
| ☐ EPA ☐ Initial ☐ Amended | | 89 GOR | DONHIII | RST AVENU | F | L. | | AUL TOL | | (C) | - (A) - (* (* (E))) | | |
| DEP Amended | _# | City, State, | | COTTIVETO | | *************************************** | | - 100 m | A . | · / | | 1 | |
| DOL ☐ Emergenc | | | MONTC | TATE NIT | | The state of the s | | · · · · · · · · · · · · · · · · · · · | | - | | 1 | |
| DOH (including | l h | Name of Co | | LAIR, NJ | | | | LTelepho | ne Numb | er · | - | - | |
| ☐ DCA justification ☐ Cancellation | . 11 | CARM | ELYN TO | BIN | | | | T Tolophio | 10 1101110 | | ~ | | |
| | | | FAC | ILITY INFORM | ATIO | N | | -1 | | | | | |
| Name of facility where abatement | is taking p | lace (3) | | *************************************** | | | Тур | e of Facility | (4) | | - | | -0.000 |
| CADMELYALTORRI | | | | | | | | | ol (K - 12 | 2) | | | |
| CARMELYN TOBIN | | | | **** | | | | | napter 8 (| | | | |
| Street Address | | | | | | | | Other Pldgs | (Private/0/Homes, | Comme | ercial | | |
| 89 GORDONHURST AVE | NUE | | | | | | Sa | uare Feet | # of Flor | | I B | ldg. A | lae. |
| City (5) | Cou | unty (6) | | | Cou | unty Code (7) | 1 | | # OI 1 10 | 5,0 | _ | lug. / | ·go |
| | | | | | | ate use only) | Cu | rrent Use (F | rior if bei | ng den | nolish | ed) | |
| UPPER MONTCLAIR | | SEX | | | | | | | | | | | |
| Name of Monitoring Firm Hired by | Bldg. Own | ier (8) | | ASCM No. | | Name of Abateme | nt Contra | actor (9) | | | | | |
| | | | | | | D & S RESTO | RATIC | N, INC. | | | | | |
| Street Address | | | | | | Street Address | | 7.00 | | | | | |
| 01.06.7.6.1 | | | | | | 20 California | | | | | | | |
| City, State, Zip Code | | | | | | City, State, Zip Coo | | | | | | | |
| Project Manager for Monitoring Fire | | | | | | Paterson, NJ | | | | | | | |
| Project Manager for Monitoring Fin | n | IP | hone Numb | er | | Telephone Number 973-345-802 | | | License | | per | | |
| 0 | | | | | | Name of OSHA Mo | | | 1 | 00159 | _ | | |
| Start Date (10) | Sche | d. Complet | ion Date (11 |) | | D & S Restora | | ic. | | | | | |
| 05/26/12 | - STATE | 1/12 | | | | Street Address | | | | - | - | | |
| Occupancy Status During Abateme | | | | | | 20 California | Avenue | | | | | | |
| Facility closed/vacated during | entire per | iod of abate | ement. | | - 1 | City, State, Zip Coo | | | | | | - | |
| Abatement performed outside Describe: | | facility hou | rs- | | | | | | | | | | |
| Other-Describe: NORMAL | | | | | _ | Paterson, NJ | 07503 | 9 | | | | | |
| Scope of Work (check all that app | ly) | 7.00 | | | | | Full Co | ontainment v | v/negative | e press | ure | | |
| \boxtimes >3 sf or >3 lf | Renovati | on | | | | | | nclosure | | | | | |
| ≥160 sf or ≥260 lf | Demolitio | n | | | | ₽ | | pag procedu xempted (*) | | friable | proo | adura | |
| Location of | | | used solely | | | | | vembred () | and Non | R | R | E | 1 |
| asbestos-containing | by maint staff(12) | enance/cus | todial | Description | n of a | sbestos-containing | | Amount | | e m | е | n | E n |
| material (acm) to be abated in facility (13) | | 1 | T | material (| ACM) | | | (Specify S LF) | F or | 0 | p a | c a | С |
| | Yes | No | N/A | | | | | L1) | | v e | i | p | L |
| BASEMENT | | | | HEATING | PIPE | INSULATION | 13 | 20 L FT | | × | | | |
| BASEMENT | | X | | WATER PI | PE IN | SULATION | 2 | 0 L FT | | X | | П | 愩 |
| 4 | | | | | | | | esternossina wang | | 同 | | 百 | 愩 |
| | | | | | | | | | | | | 百 | |
| | | | | | | | | * | | | 一 | I | 百 |
| Registered Waste Hauler D & S RESTORATION, INC. | | EP Hauler 506 | | bic Yards of V YDS | Vaste | Name of Registere TULLYTOWN | | | COVE | RY | | | 17. |
| City, State | | | Disposal D | ate | | City, State | , | | | | | | |
| PATERSON, NJ 07503 | | | 05/28/12 | 2 | | TULLYTOWN | N, PA | | | | 000 F8 | | |
| Completed by (Print or Type) | Title | | | Signature | | | | | Date | | | | |
| BOGDAN JOLDZIC | PRESID | | | | | | | | 05/04/ | /12 | | | |
| ASR-41 | Do not us | e this torm | TOT ashesto | s licensure eve | mnter | activities | | | | mile and | | | ACTOR - TEST |

CK#OUNLI

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

| D&S Proj. | #: MS 12-146 | _ | (Pur | suant to N | JAC 8:60 | and 12:120) | į. | | | DE T | T P | Valuation of the last of the l | ter. |
|------------------------------------|--|--|--|---|------------------|--|-------------------|--------------------------|-------------------|----------------------|--|--|----------|
| Date of Notification | 2 (1) | II Name o | f Building O | vner/Operato | or (2) | | | 117)/ | | Topics of the second | W | | T |
| Date of Notification | | | | мпел-орегато | 01 (2) | | - '- | 14 11 | MAY | | - | | |
| Agencies Notified | Type Notificatio | n Street A | N ABEL | | | | | | | 8 2 | 519 | | 13/1 |
| ☐ EPA | Initial | | | RNE TERR | ACE | | L | A | Elerie | we. | *60 | | H |
| ☐ DEP | Amended Amendment #: | | ite, Zip Code | | ACE | | | | 4107 | Cart of me | 13 - | 1 | + |
| DOL | Emergency | | GEWOOD, | | | | | r. | The state of | orige | Q. | _ | |
| □ DOH | (including | | Contact | NJ 07430 | | - | | I Teleph | one Nun | wher | The same of the sa | - | |
| DCA | justification) | | | | | | | relepi | one ivan | IIDCI | | | |
| | ☐ Cancellation | ROE | BIN ABEL | | | | | | | | | - | |
| | | | FA | CILITY INFO | DRMATION | l | | | | | | | |
| Name of facility w | here abatement is | taking place (3) | | | | | Ту | pe of Facilit | y (4) ool (K - | 12) | | o Mankani | |
| ROBIN ABEL | | | | | | | | = | - 27 | 8 (Other | than l | (10) | |
| Street Address | | | | | | | - | | 2.7 | te/Comm | | (-12) | |
| 272 CHELDO | IDNE TEDDA C | 117 | | | | | | Bldg | s./Home | es, etc. | | | |
| City (5) | URNE TERRAC | County (6) | | | | | = S | quare Feet | # of F | loors | В | ldg. A | ige |
| City (5) | | County (6) | | | | inty Code (7) ite use only) | - | urrent Use | (Drior if I | holog dor | | a d\ | _ |
| RIDGEWOOI | | BERGEN | ſ | | | | | unent ose | (1101111 | being dei | HOHSH | eu) | |
| Name of Monitorin | ng Firm Hired by Bl | dg. Owner (8) | Tig. | ASCM N | lo. | Name of Abatem | nent Cont | ractor (9) | | | | | |
| | | | | | | D & S REST | ORATI | ON, INC. | | | | | |
| Street Address | | 36 | The same of the sa | | | Street Address | | | | | | | |
| | | | | | | 20 Californi | EUROSON DE SOUNTE | | | | | | |
| City, State, Zip Coo | de | | | | | City, State, Zip C | | | | | | | |
| Project Manager fo | r Manitarina Firm | | I Dhana Na | | | Paterson, N | | | | | | | |
| Froject Manager 10 | n wondoning Firm | | Phone Nur | nber | | Telephone Numb 973-345-80 | | | Lice | nse Num 00159 | 74555 | | |
| Start Date (10) | | Sched. Comp | lation Data | (4.4) | | Name of OSHA | | | | 00133 | | | |
| | | | Dietion Date | (11) | | D & S Resto | oration, l | nc. | | | | | |
| 05/14/12 | | 05/31/12 | | *************************************** | | Street Address | | | | | | | |
| Occupancy Status | | | | | | 20 California | | е | | | | | |
| | d/vacated during e erformed outside o | 5. 1. 1. 1 [T. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. | | | | City, State, Zip C | ode | | | | | | |
| Describe: | ibe: NORMAL HO | 150 | | | | Datargan N | 1.07502 | | | | | | |
| | neck all that apply) | | | | | Paterson, N. | | | | | | | |
| >3 sf or >3 lf | | Renovation | | | | | == | Containment enclosure | t w/nega | tive press | sure | | |
| | M . | Demolition | | | | | | ebag proced | dure | | | | |
| | | Is location norm | ماليد بروم ما | -1-1 | S. | | Non- | Exempted (| *) and N | | - | 1 | |
| Location of asbestos-cor | ntaining | by maintenance | | | | -1 | | Amount | | R | R | E n | E |
| material (acr | n) to be | staff(12) | | | rial (ACM) | sbestos-containin | g | (Specify | | m | p | С | n |
| abated in fac | cility (13) | Yes No | N/A | | | * | | LF) | | V | i | a p | L |
| BASEMENT BOILI | ER ROOM | | | DUCT | INSULA | TION | | <2 SQ FT | | e I | Á | П | \vdash |
| GARAGE | | X | | | INSULA' | | | 57 SQ FT | | | H | H | 片 |
| | | | | | - | | | | | | Ħ | Ħ | 〒 |
| | | | | | | and the same of th | | | | ᅥ | H | Ħ | Ħ |
| * | | | | | | | | | | | ī | Ħ | 盲 |
| Registered Waste F D & S RESTOR | | NJDEP Hau 13506 | iler ID# | Cubic Yards | of Waste | Name of Registe | | | FCCI | ED11 | | | |
| City, State | arron, mc. | 15500 | Disposa | | | TULLYTOW City, State | N, KES | OURCE | CECUV | EKY | | | - |
| PATERSON, N | IJ 07503 | | 05/15 | | | TULLYTOV | VN. PA | | | | | | |
| Completed by (Prin | | Title | | Signatur | e | 1 | -, | | Date | е | | | |
| BOGDAN JOL | | PRESIDENT | | | TOTAL CONTRACTOR | | | 04/2 | 24/12 - | | | | |
| ASB-41 | * [| Do not use this fo | orm for asbe | stos licensure | e exempted | activities. | 82546 | | | | | | |

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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)

| Date of Notification (1) May 4, 2012 | | | Name of Building Owner Dover Blackwell F | | 1 | LIVER | | | | | | |
|--|--|-----------------------------------|--|---------------------------------|--|--|--|--|--|--|--|--|
| Agencies Notified | Notificatio Initia | n Type I Notification | Street Address 64 East Midland A | venue | MAY | 0 000 | | | | | | |
| EPA | Amer | ded Certification | City, State, Zip Code | 1 1 | | 0 2012 11 11 | | | | | | |
| DCA | The state of the s | rgency (includir | 1 | ersev 0765 | 2 | 3.292-, 9 | | | | | | |
| X DOL | | ication) | Name of Contact | 7 | Talanhana | Number | | | | | | |
| X DEP | | | Tom Allesandrello | Brown AND Delivery Co. | | | | | | | | |
| X DOH | ☐ Cano | | CILITY INFORMATION | There is a second | New York Co. | | | | | | | |
| | -ti- T-li Dises (2 | | Type of Facility (4) | 7 4 | The second second | TOTAL CONTRACTOR OF THE PARTY O | | | | | | |
| Name of Facility Where Abateme | ent is Taking Place (3 | 1 | School (K-12) | | Control of the last of the las | The Bowney, | | | | | | |
| Commercial Building | | | | V 40) | | 41.4 | | | | | | |
| Street Address | | | Subchapter 8 (other t | | | -4-1 | | | | | | |
| 1-5 Blackwell Street | | | Other (i.e. private & co | | | | | | | | | |
| | | | Sq. Feet: Unknown | 3 # 01 F1001 | s: Blag. | Age: 100 years | | | | | | |
| | County (6) Morris | County Code (7 (State Use Only | Current Use (prior if beir | ng demolished) | : | | | | | | | |
| Name of Monitoring Firm Hired b | y Bldg. Owner (8) | ASCM No. | Name of Contractor (9) | | | | | | | | | |
| EnviroVision Consul | | 00079 | | | | | | | | | | |
| EHVIIO VISION CONSUI | tants inc. | | GREENWOOD ABA | TEMENT CO | DNSULTA | NTS, INC. | | | | | | |
| Street Address | | | Street Address | | | | | | | | | |
| 20-21 Wagaraw Road, | Bldg # 34A | | | | | | | | | | | |
| | | | 268 MAIN STREET | | | | | | | | | |
| City, State, Zip Code | | | | City State, ZipCode | | | | | | | | |
| Fairlawn, NJ 07410 | | | | Butler, NJ 07405 | | | | | | | | |
| Project Manager for Monitoring I | | | Telephone Number | Telephone Number License Number | | | | | | | | |
| Fred Larson | 973-63 | 6-9145 | | | 00040 | | | | | | | |
| TO THE CONTRACTOR OF THE CONTR | | | 973-492-0477 | | 00840 | | | | | | | |
| Scheduled Start Date (10) | | Completion Date (1 | 11) Name of OSHA Monitor | | | | | | | | | |
| May 4, 2012 | May 6, | 2012 | FIRST in- | | | | | | | | | |
| | | | EMSL inc. | | | | | | | | | |
| Occupancy Status During Aba | | | Street Address | | | | | | | | | |
| Facility Closed/Vacated | | | 1056 Stelton Road | 1056 Stelton Road | | | | | | | | |
| Abatement Performed C | outside of Normal Fa | icility Hours - | | City, State, Zip Code | | | | | | | | |
| Describe | | | Only, Olate, Zip Gode | | | | | | | | | |
| Other - Describe: | | | Piscataway, NJ 08 | Piscataway, NJ 08854 | | | | | | | | |
| | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | | | | | | |
| | | | | | | | | | | | | |
| Source of Work (Check all that a | (pply) | | | Eull Contr | ainmont with | Negative Pressure | | | | | | |
| 45 TM 45 TM 45 TM 15 | | _ | | Mini-Enclos | | riogative r ressure | | | | | | |
| \geq 3 sf or \geq 3 lf | | | enovation | | | | | | | | | |
| $\square \ge 160 \text{ sf or } \ge 260$ |) | D | emolition | | Procedure | las Esiable Dranadura | | | | | | |
| | | | C. CALL AND CONTROL Material | | | Non-Friable Procedure tement Type | | | | | | |
| Location of Asbestos-Containing | Is Location Norm Solely by Maint. | | ption of Asbestos Containing Material (i.e. thermal systems insulation, surfa- | cing, (Specif | | tement Type | | | | | | |
| Material (ACM) in Facility (13) | Staff? (12) | | r other miscell.) | or LF) | Rem | ove Repair Encap Enclose | | | | | | |
| | YES NO | NA | | | | | | | | | | |
| First Floor | X | VAT | & Mastic | 1,900 | SF 🗵 | | | | | | | |
| 1 1131 1001 | | " | | 1 | | | | | | | | |
| | | | | | | | | | | | | |
| Name of Reg. Waste Hauler | NIDED W | aste Hauler ID # | Cubic Yards of Waste: | | Name of Re | egistered Landfill | | | | | | |
| See Hauler Below # 1 & 2 | 1115 21 113 21 113 113 113 113 113 113 113 1 | | Judio Targo of Waste. | 20 | | ill Landfill | | | | | | |
| | | | Dutter NI 0740E | Disposal Da | te | City, State | | | | | | |
| Hauler #1) Greenwood | | nsultants, inc. | – Butier, NJ 0/405 | May 6, 20 | | Route 2, Box 68 | | | | | | |
| NJ DEP # 1 | | | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | 101dy 0, 20 | | Bridgeport, WVA | | | | | | |
| Hauler #2) Newark Cart | ing, Inc. – Newa | rk, NJ 04509, N | J DEP # 19551 | | | 304-842-2784 | | | | | | |
| | | | | | | | | | | | | |
| N - 1 W N S N - 174 | 1841_11 | | | | | | | | | | | |
| Completed by (Print or Type) | Title | | Signature | | Date 4 | | | | | | | |
| Marin Graure | SENIOR | PROJECT | Marin Gran | the l | May 4, | 2012 | | | | | | |
| | MANAGE | R | The state of the s | W | | | | | | | | |
| | | | | and the second second second | | | | | | | | |

P.2/5

| | State of N | ew Je | rsey - Notil | fication of Asbestos | ADET | emeni | | 4 |
|---|---|--|-----------------------------------|--|----------------|--------------------------------|---------------------|--|
| WEMBER - MAIL IN HARD | / | (Purs | mant to N.J.A. | C. 8:60-7 and 12:120-7) | | | L - | 10 DAY |
| Date of Notification (1) | | : | | Name of Building Owner Davor Blackwell F | Open lealty | , Inc. | | |
| Agencies Notified FPA DCA X DOL X DEP X DOH | Amend Emerg | Notific ded Cor gency (cation) | rtification (including | Stord Address 64 East Midland A City, Store Zin Code Paramus, New Je Name of Connet Town Allesandrollo | ersky | NAT | MAY PALER | 1 2012 DODONE |
| | water Please (D) | | FACILITY II | Type of Facility (4) | الا فهده. | tradi | | |
| Name of Facility Where Abstracts Commercial Building | is Toking Frach (3) | | | Substraptor 8 (cener t | han K- | (2) | | 7 |
| Street Address 1-5 Blackwell Street | | | | Other (i.e. private & or Sq. Feet: Unknown | mneve | sol buildings | hoaws, e Bida. / | sc.) <u>lac.</u> 160 year |
| | nty (6) HTIS | | y Code (7) (JRA Only) | Carrent Use (prior if bold | g dem | olished). | | |
| Name of Assultation From Hired by E Emviro Vision Consulta | | ASCM OOC | | None of Contractor (8) | ~~ msc | -v1.1t t.√U9% | CINI TAR | WIE IMP |
| Biont Address 20-21 Wagaraw Road, Blo | AM. | | | GREENWOOD ABA | I EBIG | -NI CON | SULIN | 413,1196. |
| City, Stato, 2to Code | | - | | 208 MAIN STREET | | | | |
| Fairlawn, NJ 07410 | . 120.4 | lumbar. | | Butler, NJ 07405 | | 1 La | SENTER NITT | e/Der |
| Proinct Manager for Monitoring Firm Fred Larson | 973-636- | -9145 | | 973-492-0477 | | | 08-80 | - V |
| Scheduled Blan Date (10) Many 4, 2012 | May 6, 20 | | an Date (11) | Percefosha Menitor EMSL Inc. | | | | 03.500000000000000000000000000000000000 |
| Occupancy Status During Abatem Facility Closed/Vacated Du | uring Entire Period o | of Abate | mont | ShociAddess 1056 Station Read | | | | |
| Abatement Performed Order Describe Other Describe | śda of Nomiai Faci | lity Hou | ™ - | Chy. State. Zio Code Placataway, NJ Ol | | | | |
| Source of Work (Check all that agai | W. | : | | i is | | ull Containu | | Nogative Prossu |
| ≥3 sfor≥3 if □≥ 160 sfor≥ 260 | | į | Removation Demolition | n | G | lovoban Pri | ambana | ton-Priable Proce |
| Location of Ashestna-Containing Majortal (ACM) in Pacify (13) | Is Location Normal Solidy by MainL/Cu Staff? (12) YES NO | | (ACM) (Lo. the VAT, or other m | chostos Contaming Material med cystems insulation, surfa- niscall.) | cing. | Amount (Specify S or L() | F | ON RODAL FOOD |
| First Floor | 130 | | VAT & Mas | tic | | 1,900 S | FE | |
| Name of Reg. Waste Hauler Sea Hauler Rolow # 1 & 2 | NJDEP Was | | r ID # | Cubic Yards of Whate; | 20 | PW. | | aistered Landfill |
| Hauler #1) Greenwood Al NJ DEP # 1256 Hauler #2) Newark Carting | 61 | | | | | y 6, 2012 | 2 | City, State Roude 2, Box 68 Bridgeport, WV 304-842-2764 |
| Completed by (Print or Type) Marin Graure | Title SENIOR PI | - | | Maria Grages May 4, 2012 | | | | |

(FX 10)

| Date of Notification (1) May 3, 2012 | | Name of Mile L | of Building _aw | Owner/ | Operator | г (2) | | n). | EC | 信 | | W | | Th | | |
|---|--|----------------|--------------------|------------------|--------------------------------|-----------------------------|---|--|---|--|----------------------------|---------|---------|------------------|-------------|-----------|
| Agencies Notified EPA DEP DEP | Type Notification Initial Amended | . 65 | | 1004 City, St | Address Parry Avate, Zip Co | ode | | | Complete on the second | The state of the s | MA | Υ | 8 | 2012 |) | |
| DOL DOH DCA | Amendment Emergency justification Cancellatio | (including | | Name of Mile L | | | | | 2000 | 4 | lenhohe | | | POI : | Ž. | 100 |
| Name of Facility Where Resident Street Address | Abatement is Taki | ng Place (3 | 3) | FAC | ILITY INF | ORMAT | TION | | of Facility (4 School (K-1 Subchapter | 4) 2) 8 (Oth | ner than | K-12) | | | | |
| City (5) Palmyra | | 1 | | | | | | _ е | Other (i.e. p etc.) re Feet | | & comm | ercial | E | dings Bldg. / | | es, |
| County (6) Camden | | | | | Code (7) USE ONLY |) | | Currer | nt Use (Pric | or if be | ing dem | olished | 1) | 1 | | |
| Name of Monitoring Firm Environmental Mar | | | | ASC | M No. | | | | ement Con ech Envir | | | ervic | es | LLC | | |
| Street Address 204 E. Germantow | n Pike | 25.00000-1-1 | | | | | 14 R | Address Read D | rive | | | | | | | |
| City, State, Zip Code Norriton, P.A. 1940 | | | | Telepho | | | Sickl | | , N.J. 080 | 081 | | | | | | |
| Raymond J. Gioda | roject Manager for Monitoring Firm Raymond J. Giodano tart Date (10) Scheduled | | | | |) | (856) |)318-1 | 341 | | Licens 01158 | | | | | |
| | 5-5-2012 | May 07 | ,201 | | Date (11) | | Grah | nam-Te | A Monitor ech Envir | onme | ental S | ervic | es | | | |
| Occupancy Status Durin X Facility Closed/Vac Abatement Perform Other – Describe: | ated During Entire | Period of A | bate | ment 's | | | 14 R | Address ead Di state, Zip lerville. | rive | 081 | | | 200 | | | |
| Scope of Work (Check A ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf | All That A pply) | announced. | enov | ration × | | | | | Containme -Enclosure /ebag Proce -Exempted | nt with | | | | | 9 | |
| Location | n of | N | Locat | illy | | De | scription | of | | | | | 18 | Abate Ty | | |
| Asbestos-Containing <u>TO BE AB</u> In Facil (13) | ATED lity | Mai | ntena | Staff? | | os Cont thermal surfa | taining M systems cing, VA niscellan | faterial (s insulati T, or | | (8 | mount Specify or LF) | | Removal | Repair | Encapsulate | Enclosure |
| Crawl Sp | х | | | Pipe | Insulat | tion | | 3 | 0 LF | x | | | | | | |
| | | | | | | | | | | | - | | | | | |
| American Disnosal System | | | | | aste No. | Cubic of Was | Yards ste | | Name of R | | | | l | na ——1 | | - |
| City, State P.O.Box 348, Lumberton, N.J. 08048 | | | | | SW2069 Disposal Date | | | | City, State | | | | | | - Λ | |
| Completed by Title Willis Graham Owner | | | | | 727 Red Lane R | | | | | | Date 5 | /4 | /// | 2 | | |

Check #6435

| Date of Notification (| 1) May 3, 2012 | | | | of Building gan Chas | Owner / Operator (e & Co. | 2) | | | | | |
|---|--|-----------------------|-------------|---|-------------------------|---|-------------------------------|--|--------------|-----------------|---------------|-----|
| Agencies Notified | Type Notification | | | Street A | Address anbury Ro | ad | | Miller | | | | |
| □DEP □DOL □DOH □DCA | Initial Amende Amendm | nent #_2_ | | East Br | ate & Zip (| Code NJ 08816 | | MAY LÎTE | lénhon | e Nui | mber | 7 |
| | | .uo.ii | | Damiar | no Albane | se | | w. | | | | / |
| | | | Anto-status | FAC | ILITY II | NFORMATION | | The same of the sa | ٠. | i. | / | 7 |
| Name of Facility Wh JP Morgan Chase E | | aking Place | e (3) | | | Type of Facil | (K-12) | The second secon | and the same | and the same of | Í | |
| Street Address | | | | | | 1 — | pter 8 (Other tha | an K-12) commercial building | e hom | | (c) | |
| 591 Cranbury Road | I | | | | | Other (| | | g. Age | | | |
| City (5) | | | | | | 7,00 | | 1 | 9. 7.90 | 50 | | |
| East Brunswick, N. | J | | | | | Bank | (Filor ii being de | | | | | |
| County (6) Middlesex | | | y Code | (7) | | | | | | | | |
| Name of Monitoring Arcadis US Inc. | Firm Hired by Build | ling Owner | (8) | | ASCM N | lo. Name of Aba Synatech, Ir Street Addre | | tor (9) | | | | |
| Street Address 35 Columbia Road | | | | | | 829 Radio R | | | | | | |
| City, State & Zip Coo | | | | | | City, State & | Zip Code arbor, NJ 0808 | 7 | | | | |
| Project Manager for Peter Banas | | ephone N 3-526-100 | | Telephone N 609-296-691 | umber | License Num | ober 0081 | 7 | | | | |
| Scheduled Start Dat | | heduled Co | | on Date (1 | 11) | Name of OS Synatech, Ir | | | | | | |
| May 4, 2 Occupancy Status D Facility Clos | | Check only | one) | | nt | Street Addre 829 Radio R | ss | | | | | |
| | Performed Outside | | | | | City, State & | | | | | | |
| | scribe: Other Trade cupied During Abate | | ı | | | Little Egg H | arbor, NJ 0808 | 7 | | | | |
| Scope of Work (Che | eck all that apply) | | | | | | , | | | | Here's Const. | |
| | | | \boxtimes | Renovatio | ND. | <u> </u> | Full Containme Mini-Enclosure | ent with Negative Pres | sure | | | |
| ≥3 sf or ≥ 50 l ≥160 sf or ≥2 | | | = | Demolition | | _ | Glovebag Prod | | | | | |
| | | | . (1000000 | | | × | | d(*) and Non-Friable P | | | | |
| Asbestos-Cont | ocation of aining Material (AC BE ABATED | | solely b | on Norma y Mainten dial Staff? | ance or | Descrip Asbestos-C Material | ontaining | Amount (Specify SF or LF) | Ab | atem | ent T | ype |
| 11 | Yes | No | N/A | (i.e., therma insulation, sur or other miso | facing, VAT | | Removal | Repair | Encapsulate | Enclosure | | |
| Basement and 1st f | | | X | Floor | Tile | 450 SF | X | | | \vdash | | |
| Basement and 1 1 | | | ^ | 71001 | 7110 | ,,,,,, | ^ | | | | | |
| | | | IDES: | Mant- | I Curbin V | ards of Waste | Name of Boo | stered Landfill | | | | |
| Name of Registered Waste Hauler NJDEP W. Hauler ID | | | | | | arus or vvaste | | | | | | |
| Synatech, Inc. 27429 | | | | | 3 Disposa | I Date | Grows Landf City, State | III | | | | |
| City, State | | | | | | | . 1 | | | | | |
| Little Egg Harbor, I | | Title | | | May 7, Signatur | 2012 | Morrisville, P | PA Date | | | | |
| Completed By | | | | - | July / | ani allora | | | | | | |
| Diane Aloia | E | xec. Admi | inistrat | or | 1 194 | ine citila | | May 3, 2012 | | | | |

Check # 8192

| Date of Notification (1) | 5-5-12 | , | N | ame of | Building | Owner/Operator (| | TERE | S | | | | |
|--|---|-----------------|-----------------------------|---------------|--|------------------------------------|-------------------------------------|----------------------|--|--------|----------|------------|-----------|
| The second second second second | Type Notification | | S | treet A | ddress | 7 7 7 Y | | ALLE PO | The same of the sa | -1 | | | i. |
| Agency Notified | HONOR HAR HED STATE | | , | | P | lo. Box | 508 | 111/5 | 15 1 | | | 284 | |
| © EPA © DEP | Amended | | C | ity, Sta | te, Zip C | ode | 1. 1.14 | Made | in the first | y. | The same | The same | |
| Z DOL | Amendment # | 20 | | | | ode Martinsu | ille NJ | 08830 | ber | ٠ | (in | 10 | 3 |
| ZÍDOH | ☐ Emergency (including justification) | ig | N | | Contact | 9 | - / | 6 | | | | 9 | |
| DCA | ☐ Cancellation | | | | | Moran | 10 | | | - | | 1/ | 1 |
| | | | | FACILI | TY INFO | RMATION | Type of Facility | (A) - 411 (1) | 177.4 | | - | 4 | 1 |
| Name of Facility Where | Abatement is Taking Pla | ce (3) | - (| \mathcal{L} | (1 | | | The same of | galle of | j | | 1 | |
| Street Address | anily Dwell | ing | | Vac | ant) | | ☐ School (K-12 ☐ Subchapter 8 | Other than K-12 |) | | 1 | f | |
| Street Address . | C. 1 7 | ` | | | | | Other (i.e. pri | vate & commercia | al buildings | in. | 1 | | |
| 1410 | Glenwood T |) riv | <u>-</u> | | | | homes, etc.) Square Feet | # of Floors | Bldg. Ag | je | | | 1 |
| City (5) D. | 711 | | ^ | 888 | -v | | | 2 | 80 | 1 | _ | | |
| Viscata | way NJ | - | | County | Code (7) | (STATE USE | Current Use (Pr | rior if being demol | ished) | 10000 | | | 1 |
| County (6) Middle S | | | | ONLY) | | | Single | family ! |)wellr. | ጎና | | | |
| IT I Cacres | n Hired by Building Own | er A | SCMI | No. i | | Name of Abatem | ent Contractor (9 | 9) | | J | | | |
| | | | i | VA | | EPO | Tech | nclogies | Lac | _ | | | |
| Street Address | chnologies | | | 1.1 | O 100 C 1 | Street Address | | 3 | | | | | |
| P.O. Bo | 337 | | | | | | P.O. Bo | x 33 t | | | | | - |
| City, State, Zip Code | | | | | | | | | つらてる | \sim | | | |
| Alex Fai | IPT NJ O | 82: | 33 | | | Neu | Egypt | License No. | 7033 |) | | | 7 |
| Project Manager for Mo | nitoring Firm | 101 | chilon | | | l'elephone No. | 220.5 | C) | 0394 | 1 | | | |
| Steve Sch | enker | 600 | 1 75 | 8-3 | 365 | 609-758 Name of OSHA | -33@3 Monitor | | 9011 | | | | 7 |
| Start Date (10) | 3Crieduled O | | | | | | | ologies. | Inc | | | | |
| 5-15-12 | 5- | ly one) | 12 | | | Street Address | | 0 | | | | | |
| | ng Abatement (Check on | | 27 G - 200 C 200 a 1 | 9 | | P.C | Bex | 337 | | | | | _ |
| Facility Closed/Vaca | ted During Entire Period d Outside of Normal Fac | of Abate | ment rś | | | City State Zin (| Code | | 00-7 | ., | | | |
| ☐ Abatement Performe ☐ Other — Describe: | d Outside of Norman as | , | | | | New | Egypt | 147 | 0853 | 2 | | 7 | - |
| Scope of Work (Check | all that apply) | | | | | | | h Negative Pressu | ure | | | | |
| *€ ≥ 3 sf or ≥ 3 lf | | | | ☐ Rend | | ☐ Mini | -Enclosure | 19 | | | 4 | | |
| □ ≥ 160 sf or ≥ 260 lf | 715. | | > | Dem | olition | ☐ Glov SerNon | vebag Procedure -Exempted (*) ar | nd Non-Friable Pro | ocedure | | | | _ |
| | | T | Laantii | | ###################################### | | | | | Ab | Typ | | 4 |
| | | N | Location ormali | y | | Description | of | ÷ | 1 | \neg | | | |
| Loca | tion of | | d Solel | | Asbe | stos Containing M | faterial (ACM) | Amoun | | R | _ | Enc | E |
| Asbestos-Contain TO BE | ing Material (ACM) ABATED | | ustodi | SQA STREET | (i.e | ., thermal system surfacing, VA | s insulation, | (Specify SF or LF | y =) | Remova | Repair | aps | Enclosure |
| IN F | acility | | Staff? (12) | | | other miscellar | neous) | | | Va. | # | ncapsulate | ure |
| | 13) | | - | | | | | | | | | (0 | |
| | | Yes | No | N/A | | <u>, a</u> | <u> </u> | 150 3 | E | X | | | |
| Basement | | X | | | TRU | insite Pan | eling | 130 3 | | - | | | |
| Carrie | | | 1 | <u>.</u> | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | 5551 | V4- 1 | laulor | Cubic Yards of | Name of Red | gistered Landfill | | | | | |
| Name of Registered W | aste Hauler | 17271300 | No. s | Vaste F | | Waste | Misch | e Manag | emea | F | | | |
| EPC Tec | hnologies | | 1 | 10 | 00 | 4 | | e marry | Chich | | | | _ |
| City State | <u> </u> | | | | | Disposal Date | City, State | | PA | | | | |
| NE NJ | To me week | 3000 <u>1-1</u> | | | | 5-16-12 | INJORA | is ville | Date | | | | |
| Completed by | Title Da | esid | 41 | _ | No winds | Signature C | Twe Sch | e he | 5- | 5 | -17 | _ | |
| Steve Sche | nkak rk | 310 | - (L) | o for a | hostos I | icensure exempte | - | | | | | | |
| | * Do no | ot use th | IS TOTT | 11 101 45 | DE2102 1 | Coriboro Cacinpio | | 72 5 36 | | | | | |