State of New Jersey APPROVED PAUL HORNER, NJDOH
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NIAC 2:50 and 5:45)

(Pursuant to NJAC 8:60 and 5:16)

Cl # 2805

Date of Notification (1)				Name	of Building	g Owi	ner/Operator (2	2)					7
	5 / _	15		Bud	keye Pa	rtnei	rs, LP - Nort	heast District	E (% E		E		1
100000000000000000000000000000000000000	Type Notifica	ition		Street	Address			- 1,21	* 100			1	
□ EPA				750	Cliff Roa	ad			000	- 001			
	Amended Amendme			City, S	state, Zip C	ode			WAY -	S ZUI)	-	
☐ DCA				Por	t Readin	g, N.	J 07064	7					
(NJAC 5:23-8)	justification		1	Name	of Contact	t		·	Telephone Nu	ımber	7 E		1
	☐ Cancellati	ion		Joh	n Philbir	1			S				
				FAC	CILITY IN	FOR	RMATION	a-11-4+4* F	- pur library Agrantian Company				
Name of Facility Where At		aking Place	(3)					Type of Facility	(4)				
Buckeye Partners, L	.P							School (K-12					
Street Address								☐ Subchapter 8 ☐ Other (i.e., p	3 (Other than K- rivate and comn	·12) nercial l	uildin	as	
123 Derousse Ave.	RIVER ROA	AD TERMI	NAL -	DOC	Κ2		9.	homes, etc.)			20110111	901	
City (5)								Square Feet	# of Floors		Bldg. A	ge	
Pennsauken								8 2	-		-		
County (6)				Coun	ity Code (7)(STA	TE USE ONLY)	Current Use (Pr	ior if being demo	olished)			
Camden								Exterior					
Name of Monitoring Firm H	Hired by Build	ling Owner	(8)	ASCM	No.	Nar	ne of Abateme	ent Contractor (9)					
RJB Environmental,	Inc.					В	RISTOL EN	VIRONMENTA	L, INC.				
Street Address						Stre	eet Address		5. Heige 2005				
56 East Bridge Stree	et					1	123 BEAVE	R STREET					
City, State, Zip Code					5-0-0-1-0-1	City	, State, Zip Co	ode					-
Morrisville, PA 1906	7					В	RISTOL, PA	19007					
Project Manager for Monit	oring Firm		Tele	phone	No.	Tele	ephone No.		License No.				
Jim Frisbee			26	7-991	-9212	2	15-788-6040		00509				
Start Date (10)	S	Scheduled C	omple	tion Da	te (11)	Nar	ne of OSHA M	lonitor					
5/_6_/	15	5 /	8	_ / _	15	В	RISTOL EN	VIRONMENTA	L, INC.				
Occupancy Status During	Abatement (0	Check only	one)			Stre	et Address		3		12		
☐ Facility Closed/Vacated	d During Entir	e Period of	Abater	ment		1	123 BEAVER	R STREET					
☐ Abatement Performed					cribe	City	, State, Zip Co	ode					
Time of Abatement: 7:	00AM- <u>3:30</u> P	PM/P	M	AM		1 35	RISTOL, PA						
Scope of Work (Check all	that apply)						□ Eull Cont	ainment with Neg	rative Pressure				
≥3 sf or ≥3 lf		⊠ Re	novati	on			☑ Mini-Enc		gative riessure				
≥160 sf or ≥260 lf		☐ De	molitic	n			⊠ Glovebag		- Friehle Deser	4			
		T is	Locat	ion	1		□ Non-Exe	mpted (*) and No	n-Friable Proce		t1	4 T	
Location of	of.	0.00	Vorma				Description o	f			baten	T	T
Asbestos-Containing N			d Sole		Asbe	stos	Containing Ma		Amount	Nellova	Repair	Enc	Enclosure
TO BE ABAT		7,683.53	intena todial		(i.e		rmal systems		(Specify	OV	<u>a</u> .	aps	losu
IN Facility (13)	/	000	(12)				urfacing, VAT, ner miscellane		SF or LF)	=		Encapsulate	le le
3 - 2		Yes	No	N/A								O.	
Exterior - River Rd. Do	ock 2				Pipe Ins	sulat	tion		117 LF				
										Г	ı	П	П
			_										
Name of Registered Waste		_	71,877	JDEP \ auler IE		Cub Was	oic Yards of	Name of Regis					
BRISTOL ENVIRON	VIENTAL IN	C		20990		5		GROWS L	andfill				
City, State							oosal Date	City, State					
BRISTOL, PA 19007						5	/8/2015	Morrisville	, PA 19067				
Completed By (Print or Type	pe)	Title					Signature	0.	,	Date_	1-1	_	
Gino Pizzigoni		Estima	tor				Dino	Pergya	one	5/) / K	7	

														111
Date of Notification (1) 05/05/2015					Building Own arbor Town		(2)			MAY -	8 20	15		4
Agencies Notified	Type Notification			Street A	ddress				1				-	
					Bargaintow	Road			barrens			1-47-5	<u></u> l	
EPA DEP DOL	× Initial		-	111/1/200777.1.2.001	te, Zip Code				_ASB	LICEN	Service :	ساني ر	α	-
X DEP X DOL	Amended Amendment	#				abia NII	00001	1		LIUE.	ب ۱۱۷۰۰			
	Emergency			674M	arbor Town	SHIP, NO	00234		1 = 1					
≥ DOH	justification)				Contact				Tele	ephone Nu	mber			
DCA	Cancellation			Peter	Miller									
				FACI	LITY INFORM	ATION								
Name of Facility Where	Abatement is Takin	ig Place (3)				Type	of Facility (4)					
Fortune Inn								School (K-1	2)					
Street Address								Subchapter				••		
8024 Black Horse	Pike						2.44	Other (i.e. p	rivate 8	commerc	ial buil	dings,	home	es,
City (5)								etc.) e Feet	# of	Floors	F	Bldg. A	ne	
Egg Harbor							100000000000000000000000000000000000000	0 SF	1	1 10010	1000	30	·go	
												50		
County (6)					Code (7) ISE ONLY)			nt Use (Pri						
Atlantic County								ant Mote			1			
Name of Monitoring Firm	n Hired by Building	Owner (8)		ASCN	l No.			ement Cor		(9)				
EnviroVision						Incii	nia Co	ntracting	, Inc.					
Street Address						Street	t Addres	S						
20-21 Wagaraw Ro	oad - Building 3	35E				136	0 Clifto	on Avenu	ie, Un	it 365				
City, State, Zip Code						City, S	State, Zi	p Code						
Fair Lawn, NJ 074	10							07012						
Project Manager for Mor			1	Telepho	ne No		hone No		_	License I	Vo.			
Fred Larson	mornig i iiii				636-9145		3) 450-			01036	10.			
		0 1 11		76 1070						01030				- 0
Start Date (10)				ipletion i	Date (11)			IA Monitor	lno					
05/22/2015		06/01/2				L STIFFE		ntracting	, Inc.					
Occupancy Status Durin	ig Abatement (Chec	ck Only On	e)				t Addres							
Facility Closed/Vac Abatement Perform	ated During Entire	Period of A	batem	nent				on Avenu	ie, Un	it 365			-,	
	ned Outside of Norr	nal Facility	Hours	i		City, S	State, Zi	p Code						
Other – Describe:						Clift	ton, Nu	J 07012						
Scope of Work (Check A	All That Apply)													
23 sf or ≥3 lf	±	Пв	enova	tion] Full	Containme	ent with	Negative	Pressi	re		
≥160 sf or ≥260 lf		Management .	emolit					i-Enclosure		rioganie	, ,0000			
		_						vebag Prod			V-0-0 1			
		-				Ľ	× Nor	n-Exempted	d (*) and	d Non-Fria	ble Pro	Part and	G0-G-60-	
		Is	Locati	on									ement /pe	1
Location	n of		lormal			Description	n of				-	1 1	he	
Asbestos-Containing			d Sole intenar			Containing I				mount	100,000		Ш	
TO BE AB		2000	odial S			mal system		tion,		pecify	Reg	Z.	ıca	inc
In Faci (13)	XXXXXX	100000	(12)			urfacing, VA er miscella			51	or LF)	Remova	Repair	psu	Enclosure
(10)				T	0.0	or mooding					a	_	Encapsulate	ıre
		Yes	No	N/A										
Throughout	Building		X	X		Linoleu	m		3,8	40 SF	X			
											1			
				-							+	-		
Name of Registered Wa	ste Hauler		N	JDEP W	aste Ci	bic Yards		Name of	Reaiste	red Landfi	II		-	
25 500 E	010 1100.01		200	auler ID	1515 TO 10	Waste		5035000000000000						
Atlantic Carting			N	J-641	40)		IESI P	4 Beth	ilehem L	andti.	1001	p.	
City, State					Di	sposal Date	е	City, Stat	е					
Wayne, NJ					T	3D		Bethlel	nem, F	PA				
Completed by		Title			1	Signatur	à /)	_		ate	1500		
Milena Zoric		200000	utive	Direct	or	MIN	M	100))5/05/	2015	5	
AND ARREST METERS OF THE STATE OF					70	1 1 1	VIL	\sim \				1.00		

NO CK

ASR_41 /R_06_081

Print For State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12 120) Date of Notification (1) Name of Building Owner/Operator (2) McAllister Towing of Philadelphia Agencies Notified Type Notification Street Address 4 south King Street FPA hillial DEP Amended City State Zip Code DOL Amendment # Gloucester, New Jersey 08030 Emergency (including DOH Name of Contact justification) Telephone Number DCA Cancellation George Doms FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Camden Docks School (K-12) Street Address Subchapter 8 (Other than K-12) 2500 S. Broad way Other (i.e. private & commercial buildings homes. X etc) City (5) Square Feet # of Floors Bldg Age Camden 2000 2 60+ County (6) County Code (7) Current Use (Prior if being demolished) Camden (STATE USE ONLY) Tug Boat Name of Monitoring Firm Hired by Building Owner (8) ASCM No Name of Abatement Contractor (9) AET, Inc 107 ecoservices, LLC. Street Address Street Address 28 N. Pennel RD 407 W. Lincoln Highway suite 500 City, State, Zip Code City, State, Zip Code Media, PA. 19603 Exton, Pa. 19341 Project Manager for Monitoring Firm Telephone No. Telephone No License No Dave Turtsy 610-891-0114 484-872-8884 01161 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor **EMSL** Analytical Occupancy Status During Abatement (Check Only One) Street Address Facility Closed/Vacated During Entire Period of Abatement 200 Route 130 North Abatement Performed Outside of Normal Facility Hours Other - Describe: City, State, Zip Code Cinniminson, NJ. 08077 Scope of Work (Check All That Apply) ≥3 sf or ≥3 If Renovation ≥160 sf or ≥260 lf Full Containment with Negative Pressure X Demolition Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Туре Normally Location of Description of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount TO BE ABATED Maintenance/ Encapsulate (i.e. thermal systems insulation, (Specify Remova In Facility Custodial Staff? Repair surfacing, VAT, or SF or LF) (13)(12)other miscellaneous) Yes No N/A Galley LF X 120 X Galley X 330 SF X Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. ecoservices, LLC. of Waste Grows (a WM landfill) swe-13-012785 City, State Disposal Date City, State Exton, PA. TBD Morrisville, PA Completed by Title Signature Tom Joiner Project Manager

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

GAC Project # 060-15 Name of Building Owner/Operator (2) Date of Notification (1) RUTGERS, THE STATE UNIVERSITY OF NJ May 5, 2015 Notification Type Street Address Agencies Notified ENVIRONMENTAL HEALTH & SAFETY DEPT. DEPA ☑ Initial Notification 27 ROAD 1, BLDG 4086, LIVINGSTON CAMPUS **D**DCA □Amended Notification # X DOL City, State, Zip Code ■ Emergency (including PISCATAWAY, NJ 08854 ■ DEP- No Longer REQUIRED iustification) Name of Contact Telephone Number X DOH □ Cancelled 28 MICHAEL SMITH, ENV. **HEALTH & SAFETY** FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) PAUL ROBESON LIBRARY, BLDG# 7003 School (K-12) ☐ Subchapter 8 (other than K-12) Other (i.e. private & commercial buildings, homes, etc.) NGT SUB 8 Street Address CAMDEN CAMPUS # of Floors: 2 Bldg. Age: 60 years City (5) County (6) County Code (7) CAMDEN CAMDEN (State Use Only) Current Use (prior if being demolished): ACADEMIC Name of Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Cardno ATC 0098 GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address Street Address 3 TERRI LANE **268 MAIN STREET** City State, ZipCode City, State, Zip Code **BURLINGTON, NJ 08016** BUTLER, NJ 07405 License Number Project Manager for Monitoring Firm Telephone Number Telephone Number **BRIAN KEARNY** 609-386-8800 973-492-0477 00840 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor ENVIROVISION, INC. 05/15/15 05/18/15 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 ☑Other - Describe: Shift Hours: 5:00 PM - 5:00 AM (24 hours as needed) FAIRLAWN, NJ Scope of Work (Check all that apply) ■ Full Containment with Negative Pressure □ Renovation Mini-Enclosure ≥ 3 sf or ≥ 3 lf ■ Demolition Glovebag Procedure ≥ 160 sf or ≥ 260 lf ■ Non-Exempted (*) and Non-Friable Procedure Is Location Normally Used Description of Asbestos Containing Material Amount Abatement Type Location of Asbestos-Containing (Specify SF (ACM) (i.e. thermal systems insulation, surfacing, Material (ACM) in Facility (13) Solely by Maint./Custodial Remove Repair Encap Enclose Staff? (12) VAT, or other miscell.) or LF) YES NO NA Rooms 193, 194, 197, & 1000SF X X VAT Stairwell NJDEP Waste Hauler ID # Name of Reg. Waste Hauler Name of Registered Landfill Cubic Yards of Waste: 10 CY G.R.O.W.S. North Landfill See Hauler Below #1 & 2 See Below City, State Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 Disposal Date 100 New Ford Mill 05/26/15 NJDEP # 28969 Rd. Morrisville, Pa Hauler #2) STG - 58 Pyles Lane, New Castle, De 19720 19067 NJ DEP# 20990 215-736-1700 Date Completed by (Print or Type) May 5, 2015 SENIOR PROJECT Raymand C. Pedalino RAYMOND C. PEDALINO MANAGER

Check # 2814

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

GAC Project # 060-15 Name of Building Owner/Operator (2) Date of Notification (1) May 5, 2015 RUTGERS, THE STATE UNIVERSITY OF NJ Agencies Notified Street Address Notification Type ENVIRONMENTAL HEALTH & SAFETY DEPT. DEPA ☑ Initial Notification 27 ROAD 1, BLDG 4086, LIVINGSTON CAMPUS DCA □ Amended Notification # ■ Emergency (including X DOL City, State, Zip Code ☑ DEP- No Longer REQUIRED PISCATAWAY, NJ 08854 justification) Name of Contact Telephone Number X DOH □ Cancelled MICHAEL SMITH, ENV. lin it **HEALTH & SAFETY** FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) HENDERSON APTS, BLDG# 8425 ☐ School (K-12) MAY - 8 2015☐ Subchapter 8 (other than K-12) Street Address Other (i.e. private & commercial buildings, homes, etc.) NOT SUB 8 **DOUGLASS CAMPUS** Sq. Feet: N/A # of Floors: 4-Bldg. Age: 60+ years ASBEDING City (5) County Code (7) County (6) Current Use (prior if being demolished): ACADEMIC DORMITORY (State Use Only) NEW BRUNSWICK MIDDLESEX ASCM No. Name of Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) Cardno ATC 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 Telephone Number License Number BRIAN KEARNY 609-386-8800 00840 973-492-0477 Name of OSHA Monitor Scheduled Completion Date (11) Scheduled Start Date (10) ENVIROVISION, INC. 05/18/15 05/26/15 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 ☑Other - Describe: Shift Hours: 8:00 AM - 8:00 AM (24 hours as needed) FAIRLAWN, NJ Scope of Work (Check all that apply) ■ Full Containment with Negative Pressure Mini-Enclosure $\ge 3 \text{ sf or } \ge 3 \text{ lf}$ □ Renovation ≥ 160 sf or ≥ 260 lf Demolition Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Normally Used Description of Asbestos Containing Material Amount Abatement Type Location of Asbestos-Containing (Specify SF Solely by Maint./Custodial (ACM) (i.e. thermal systems insulation, surfacing, Material (ACM) in Facility (13) Remove Repair Encap Enclose or LF) Staff? (12) VAT, or other miscell.) YES NO NA Various Closets 700SF X X VAT Name of Registered Landfill Name of Reg. Waste Hauler NJDEP Waste Hauler ID # Cubic Yards of Waste: 10 CY 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 # 28969 05/26/15 Rd. Morrisville, Pa Hauler #2) STG - 58 Pyles Lane, New Castle, De 19720 19067 NJ DEP # 20990 215-736-1700 Date Signature Completed by (Print or Type) Raymand C. Pedalino May 5, 2015 SENIOR PROJECT RAYMOND C. PEDALINO MANAGER

Date of Notification (1)									CHE	SEK #	21827	/ 5	825	/	2194	49
05-04-15					of Building Ow ton Educat							1-1	-		70,000	
Agencies Notified	Type Notification				Address ark Place				2015	HA.I	-8 £	11	į	5		
	Amended Amendment				ate, Zip Code rk, NJ 0710				F .: .	2 1 17	15 15 N	F. 1	RU	L.		
X DOH	Emergency justification)		t	Name o	of Contact			-		Te	lephone	Numb	er			
☐ DCA	Cancellation			Amy E						1						
Name of Facility Where Al	patement is Takin	g Place (3	3)	FAC	ILITY INFOR	MATI	ON	Typ	e of Facility	(4)		-				
Vacant Building			2					l T	School (K-							
Street Address 129-165 Littleton Ave	onuo								Subchapte Other (i.e.	er 8 (Oth	er than I	(-12)		d:	Lance	
City (5)	enue							×	etc.)			erciai i				ies,
Newark								9000000	are Feet 000	1.5	f Floors			ldg. /	Age	
County (6) Essex					Code (7) USE ONLY)				ent Use (Pr mmercial	rior if be	ing demo	olished	1)			
Name of Monitoring Firm I	lired by Building (Owner (8)		ASCN	M No.				atement Co Environm							
Street Address							(SE() () () () ()	Addre Broa	ess d Street			*****				
City, State, Zip Code						H+1/2/4/5			Zip Code				=20.	52 - V.		-
Project Manager for Monito									NJ 0707	'2				Day Ton 1		
	oring Firm		Telepho				hone 1 939-			Licens 00756						
Start Date (10) 03-30-15(1)04-07-15		4-30-1	5(1)0	npletion 5-15-1	Date (11) 5(3)06-01-	15		of OS n-Air	HA Monitor Inc.							
Occupancy Status During								Addre		V.0.5-00.00						
Facility Closed/Vacate Abatement Performed	ed During Entire F I Outside of Norm	Period of A al Facility	Abatem Hours	nent					ckson Ave Zip Code	enue						
Other – Describe:							Long	g Isla	nd City, N	NY 111	01					
Scope of Work (Check All	(hat Apply)						-	7								
≥3 sf or ≥3 lf x ≥160 sf or ≥260 lf		- Commence of the last of the	enova emolit				-	Mi GI	ull Containm ini-Enclosur ovebag Pro on-Exempte	e cedure	-					
		Is	Locati	on				140	JII-EXEMPLE	u () and	J NOII-FI	lable i	_	2025 78	e emen	t
Location o		N	lormall d Sole	у		Des	cription	of				_		Ту	ре	
Asbestos-Containing M <u>TO BE ABAT</u> In Facility (13)	ED	Mai	ntenar odial S (12)	nce/		rmal surfac		s insul T, or	ation,	(8	mount Specify or LF)		Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A											te	
Roof			Х			Flash			2,8	62SF	2	C				
Roof Parag	2012		X		- 1	et Flas			8	78SF	2	2				
(2)1st Floo				Х	F	Pipe	Insula	tion			20LF	3	2			
(3)Ground				Х			Insula	ition			24LF	2	2			
Name of Registered Waste Freehold Cartage	mauler		0.44000	JDEP W auler ID		ubic ` Was	Ƴards te		Name of	Registe	red Land	fill				
			18	693	40)			TRRF							
City, State Freehold, NJ					20,775	ispos 3D	al Date		City, Stat							
Completed by Niamh Fleming		Title Office	Man	ager		Si	gnature	1	no	them		Date 05-0	1-1	5		

Title Of Project: 129-165 Littleton Avenue, Newark, NJ Additional Materials / Floors

Pg. 2

Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13)	Is Location Normally Used Solely by Maintenance or Custodial Staff? (12)	Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous)	Amount (Specify Square Feet or Linear Feet)	Abatement Type (Specify: Removal, Repair, Encapsulation or Enclosure)
(3) Ground	N/A	Debris	20SF	Clean Up

2015 HAY -8 EM 1: 15

CK# 204

Date of Notification (1) 3/27/2015						wner/Oper olding LL)	20	5 M&Y -8	Ald ,			
Agencies Notified	Type Notification			Street Add		reet 7th f	floor			1.17.	nii j	. (9	
EPA DEP DOL	Initial Amended Amendment		-	City, State	e, Zip Cod				. j _a . i	& LICEN		NU	-	
☑ DOH DCA	ix Emergency justification) Cancellation		1.	Name of C		es				Telephone N	lumber			
				FACIL	ITY INFO	RMATION			6 E 104 - 741					
Name of Facility Where A	Abatement is Takin	g Place (3)						7 s	f Facility (4) chool (K-12)	40\			
Street Address 160-194 Passaic A	ve						L	× 0	ubcnapter of ther (i.e. pri c.)	Other than Kivate & comme	rcial buil	dings	, hom	es,
City (5)							04.5	Square	Feet	# of Floors		ldg.	Age	
Kearny NJ							11.0	3000		6		-50		
County (6) Hudson				County C (STATE U			-	Curren	t Use (Prior	if being demo	iisnea)			
Name of Monitoring Firm		Owner (8)		ASCM	No.				ement Cont vironmen					
Sky Environmental							Street A			tal LLC			7.000	
Street Address 140 Boulevard							- C. L. Son C. S. C. C.		ette Stree	t				
City, State, Zip Code Mountian Lake NJ	07046					1000			Code 07015					
Project Manager for Mor				Telephon	e No.		elepho			Licens	e No.			
Leonid Shereshevs					8-4821		973-4			0124)			
Start Date (10) 3/30/2015		Schedule 6/30/20		npletion D	Date (11)	10000			A Monitor onmental					
Occupancy Status Durin	ng Abatement (Che					S	Street A	Addres	S					
				nent					e 22 Wes	st .				
Facility Closed/Vac Abatement Perform Other – Describe:	ned Outside of Nor	mal Facility	Hour	S					p Code 07083					
Scope of Work (Check /	All That Apply)													
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			tenova emoli					Min	i-Enclosure vebag Proc	edure				
							×	Nor	n-Exempted	(*) and Non-F	nable Pr		temer	nt
Locatio	n of	100	Local Norma			Desc	ription	of ·			_	, 1	уре	_
Asbestos-Containin <u>TO BE AB</u> In Fac	g Material (ACM) BATED ility	Ma	intena	Staff?	Asbes (i.e.	thermal sy surfacin other mis	ning M ystems ng, VA	aterial insula r, or	(ACM)	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A							_	-	-	
1 22			Х			- 1						,	+	
TICEN	3 CH		Х	-		pipe ir	nsulat	ion		50 LF	1	+	+-	+-
			Х	-								+	+	+-
5	.r		X	NJDEP W	lacte	Cubic Ya	ards		Name of	Registered Lar	dfill			
Name of Registered Wa Freehold cartage	iste nauler		1	Hauler ID 02265		of Waste			and the second	n Berks Cor		y La	ndfill	
City, State						Disposa	I Date		City, State					
Freehold New Jers	ey	Tiels	adina i o				naturo	/	Birdsbo	JU FA	Date		1	
Completed by Carlos Gomes		Title Pres	ident	i		Sig	nature		~		- 5	· -	5/2	201
ASB-41 (R-06-08)		W.				6	Do no	t use t	his form for	asbestos licer	sure exe	mpte	d acti	vities.



& Emergency &

Date of Notification (1) 5/4/15					Building Caum Priv			(2)	n Ĕ.	(5)	r, U	W	lla,			
Agencies Notified	Type Notification		1000	treet Ac	dress Voir Ave	9				VA M	- 8 .	 2015			5	
EPA DEP DOL	Initial Amended Amendment #	1	C	ity, Stat Beach	e, Zip Coo Haven N	de NJ 0	8008	2		DEL CO						
DOH DCA	Emergency (in justification) Cancellation	ncluding	N		Contact			4.7	udahari	Tele	ephone N	lumb	er			
	1-			FACIL	ITY INFO	RMAT	ION	-	MARKET	1						
Name of Facility Where Matt Baum Private		Place (3)						Property .	of Facility (4 School (K-12	5.5						
Street Address 216 Belvoir Ave		Ÿ						×	Subchapter (Other (i.e. protec.)				build	ings,	home	es,
City (5) Beach Haven NJ	08008								e Feet	# of 2	Floors		1	dg. A	ge	
County (6) Ocean					Code (7) ISE ONLY)	_		Currer	nt Use (Prio se	r if bei	ng demo	lished	1)			
Name of Monitoring Firm	n Hired by Building C	wner (8)	1	ASCM	No.	ž	2,000	of Abat	ement Conf	tractor	(9)			•		
Street Address								Addres				3752				
City, State, Zip Code	******************	() ()				4		State, Zij t Berlin	p Code n NJ 0809	91						
Project Manager for Mon	nitoring Firm		Т	elephor	ne No.		Telepl	one No 753-98).		License		7			
Start Date (10) 5/5/15		Scheduled 5/8/15	Comp	oletion [Date (11)			of OSH	IA Monitor			-				
Occupancy Status Durin	ng Abatement (Check	Only One)						Addres	9					-		
Facility Closed/Vac	cated During Entire P	eriod of Aba	ateme	ent				State, Zi							lesso se	
Scope of Work (Check A	All That Apply)						L									
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	ш тих фруу		novatio	-				Min Glo	Containme i-Enclosure vebag Proc n-Exempted	edure	(8)				e	
		ls l	ocatio	n										Abate	ment	
Locatio			rmally	,			escription					-	-	Ту	ре	
Asbestos-Containing TO BE AB		Maint	enand	ce/		therma	itaining I Il system	s insula		-	mount Specify		Re	ZJ	Encapsulate	En
In Fac		100	12)	allr	76		acing, VA miscella			SI	or LF)		Remova	Repair	apsu	Enclosure
		Yes	No	N/A		0.1101	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						al	7	late	ле
Exterior	Siding			Х		Exte	erior Si	ding		19	00 SF		x			
		+										\dashv				
Name of Registered Wa	ste Hauler		NJ	DEP W	/aste	Cubic	Yards		Name of I	Registe	ered Land	dfill				
United Containers			200-200	uler ID 459	No.	of Wa	aste		G.R.O.\	N.S.			10.00			
City, State Elm NJ						Dispo 5/8/1	sal Date	9	City, State Morrisvi		A 1906	7				
Completed by Anthony T Perna		Title Preside	ent			(Signatur	e C				Date 5/4				

TF.	1-55	P. 15	-		
グラ		76	by	35	-
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Date of Notification (1)	5/15		P			Owner/Operator Ü∈ N D≡		WAY - 3	0045		1	
Agency Notified	Type Notification		5	Street A	ddress		7	10/4/ - >	-010			7
	Dr Initial			4	5 R	ALPH S	ST .	·				
□ EPA □ DEP	☐ Amended		1	City, St	ate, Zip C	ode .	. –	10 July 10 10 10 10 10 10 10 10 10 10 10 10 10				1
₽ DOL	Amendment#			BE	ERGE	ENFIELD	. NJ	07621				
Z DOH	□ Emergency (includin iustification)	g			of Contac			Telephone Nun	ber			+
D DCA	☐ Cancellation		1	UR.	HEW!	DERSON						
				FACIL	JTY INFO	ORMATION		£.:				
Name of Facility Where	Abatement is Taking Place	æ (3)					Type of Facility	(4)	1			
Mike	2. HENDE	28	200	7		2	☐ School (K-12	3				*
Street Address					10.5	:	☐ Subchapter 8	Other than K-12	2)	2002		
45	RALPH ST				**		homes, etc.)	ivate & commercia	ai building	gs,		
City (5) .		100			7		Square Feet		Bldg.			
BE	RGENFIE	75	>		- 62		1800	Z	1	0	15	W
County (6)				County	Code (7)	(STATE USE	Current Use (P	rior if being demol	ished)			
RED	GEN		1	ONLY)			No.	SIDEN	CE			
Name of Monitoring Firm		ГА	SCM	No.		Name of Abaten	nent Contractor (
(8)	· ·					Best Re	emoval I	nc				
Street Address						Street Address					.00	
				100		450 Sout	ch River	St				
City, State, Zip Code						City, State, Zip (Code	AV.				
	8					Hackensa	ack , N.	J. 07601	1			
Project Manager for Mor	nitoring Firm	Tel	ephon	e No.		Telephone No.		License No.				
	-					201-329-	-7444 -	003	88			
Start Date (10)	Scheduled Co			e (11)		Name of OSHA	Monitor					
5/26	9 9/	7/	17				nvironmen	ntal Inc				
Occupancy Status Durin	g Abatement (Check only	one)				Street Address		Ŷ				
☐ Facility Closed/Vacate	ed During Entire Period o	f Abate	ment			280 Huy1			1			-
Abatement Performed		ity Hou	rs	-		City, State, Zip (07601		100		
Dother - Describe: 7	West of the Control o					Hackensa	ack , N.	J. 0760I				
Scope of Work (Check a	is triat apply)		8					Negative Pressur	re			
D≥3 sf or ≥3 lf D≥160 sf or ≥ 260 lf				☐ Den	ovation olition		-Enclosure rebag Procedure		•			
U 2 100 St 01 2 200 H						□ Non-	-Exempted (*) an	d Nón-Friable Pro	cedure			
		ls l	Locatio	on	20.	4 . 4					tem ype	
Locati			ormall		=	Description	of				T	T
Asbestos-Containir			l Solel ntenar			stos Containing M	aterial (ACM)	Amount		-	9	m
TO BE A	BATED	Çı	ustodi	al	(i.e	, thermal systems surfacing, VA*		(Specify SF or LF)		Repair	Sep	nclo
IN_Fa	3300 · 1000		Staff? (12)		1	other miscellan		. 0. 0. 1.7		Removal	Encapsulate	Enclosure
	10			T	1						9	1
		Yes	No	N/A	-11-1	1111	1105	02.		×	+	+
BASEN	-N-			×	THERU	ual system	7 (14) 10 197 1040	851-	7	/	+	+
4.								- i		-	+	-
									`~	+	+	+
							1 No 12	abanad I gadett				
Name of Registered Wa	ste Hauler	NJI ID I		Vaste I	lauler	Cubic Yards of Waste	Name of Regi	stered Landfill				
Best Remo	val Inc	1		Ω		207	Minerva	Enterpr	ises	. L.F	C	
City, State		11/	7109	7		Disposal Date	City, State	- IIICCI PI	2000			
The state of the s	ok N I O7	601				5/27/15	-	ourg ,0h	.446	88		
Completed by	ck ,N.J. 07	OOT				Signature /	" " dylles	, 011	Date			
		ator	_				مرعمص	9	5/	5/1	2	
J.Maioran				n for as	bestos li	censure exempte	l-activities.	, ,	1			-

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

Check#2180			(P	ırsua	nt to NJA	C 8:60 and 5:16	6)			_	
Date of Notification (1)						g Owner/Operator (5	C F I W	15 -		
					Cushing	g owner/operator (2/				
Agencies Notified EPA	Type Notification	on		Stree	t Address			MAY - 8 201	5	/	
☑ DOLWD	Amended					ld Avenue			1-141-0-1		
☑ DHSS	Amendmen	t #		City,	State, Zip (Code	A C III	Le Tue Curtin	لعسان		
DCA	☐ Emergency		g			e, NJ 07974	1	LICENSING			
(NJAC 5:23-8)	justification Cancellation			Territoria	e of Contac	t		Telephone Nur	mber	and the same of th	
	ouncenation			1	Cushing						
Name of Facility Where A	shatement is Tal	ring Place	121	FA	CILITY IN	IFORMATION	T (F 30)	7.5			
Private house	toatement is 1 ai	mig Flace	: (3)				Type of Facility School (K-1				
Street Address							Subchapter	8 (Other than K-1	2)		
1567 Springfield Aven	nie						Other (i.e., homes, etc.	private and comme	ercial buildir	gs,	
City (5)	ac						Square Feet	# of Floors	Bldg.	Δα0	
New Providence, NJ 0	7974						e quare , bot	01 1 10013	Diag. ,	-ige	
County (6)				Cour	nty Code (7)	(STATE USE ONLY)	Current Use (P	rior if being demol	lished)		
Union						10,	28		/		
Name of Monitoring Firm	Hired by Buildin	g Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9))			
						Gr Tech LLC					
Street Address						Street Address					
City Chata 71 Oct						576 Valley Rd #					
City, State, Zip Code						City, State, Zip Co					12
Project Manager for Moni	torina Firm		Tal		N.	Wayne, NJ 0747	70				
	toring r min		Tele	phone	NO.	Telephone No.		License No.			
Start Date (10)	LScl	neduled C	omnis	tion Ds	ota (11\	973-638-1777 Name of OSHA M	Innitat	01127			
05/14/		05				AZONO-CONSTRUCTOR OF KIND OF KIND OF A					
Occupancy Status During			11-0-0-			Envirovision Co Street Address	nsultants,Inc				
□ Facility Closed/Vacate				ment			D1 D11 #	25 P			
Abatement Performed	Outside of Norn	nal Facilit	v Hou	s - Des	scribe	20-21 Wagaraw City, State, Zip Co		35 E			
Time of Abatement: _	AIVI-	_PM/	PM_		_AM	Fair Lawn, NJ 0					
Scope of Work (Check all	that apply)							nation with negative	ve pressure		
		⊠ Ra	novati	an.			tainment with Ne		9.		
≥ 3 sf or >3 If ≥ 160 sf or ≥260 If			molitic					Tent with Negativ	e Pressure		
						☐ Non-Exe	mpted (*) and No	on-Friable Procedu	ure ,		
Location	of		Locat Norma			Description			Abatem	ent Ty	уре
Asbestos-Containing N			d Sole		Asbes	Description o tos Containing Mat		Amount	Re Re	En.	E
<u>TO BE ABA</u> IN Facilit	The state of the s		intena todial			., thermal systems in	nsulation,	(Specify	Remova	caps	Enclosure
(13)			(12)	_		surfacing, VAT, other miscellaned		SIF or LF)	val T	Encapsulate	ure
		Yes	No	N/A						e	
Basement				\boxtimes	Pipe insu	lation		60 LF		П	П
				In							
		1		#						Ш	Ш
Name of Registered Wast	a Haular		L	TED IN	11. 1. 15.0	0.11	· · · · · · · · · · · · · · · · · · ·				
	e riaulei				Hauler ID No.	Cubic Yards of Waste	Name of Regis	stered Landfill			
Gr Tech LLC City, State			(03378	35	TBD	T.R.R.F. Inc				
X 5/310 € (6/00/10/20045)						Disposal Date	City, State				
Wayne, NJ 07470						TBD	Tullytown, P.				
Completed By (Print or Ty	10001	itle				Signature /	he Wevra	1. D	ate		
N.Jevtic	0	wner				- Head	rc Wevia	05	5/05/2015		
199771						11				-	

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

471-NJ-15A

Date of Notification (1	05/05/20	15					vner/Opei vestor,			E	7 1	II IF	3 -		
Agencies Notified	Notification T			Street			vootor,	LLO			2000	7 11			
(X) EPA	() Initial Not	ification	n			nland A		*							
() DEP	(X) Amended		1			Zip Code			M. A	4Y -	3 4	J D	1	21	
(X) DOL	Amendme				er en mener e	k, NJ 0	7432								
(X) DOH	() Emergend		uding	Name					1,00		Tel	Num	ber	i	
() DCA	justification () Cancellation			Marc	Flus	sche			ASBL	LIG		man is not beautiful.		تت	
				FACIL	ITY II	NFORMA	NOITA								
Name of Facility Whe	ere Abatement i	s Takir	ng Place	(3)				000.500.000	of Facility (4 hool (K-12)						
Street Address 35 S Highland Av	re							() Su (X) Ot	bchapter 8 her (i.e. pri omes, etc.	(other	than comn	K-12) nercia	ıl build	dings	S,
City (5)									e Feet	# of F	Floor	S	Bldg.	Age	1
Glen Rock															
County (6) Bergen				County USE C		e (7) (ST	ATE	Curre	nt Use (Prid	or if beir	ng de	molis	hed)		
Name of Monitoring F	Firm Hired by B	lda. Ov	vner	ASCM	No.		Name o	of Contr	actor (9)						_
(8)	,								RUCTIO	N SEI	RVI	CES	LLC	;	
Street Address							Street A								
							365 R	19865 H 1985							
City, State, Zip Code							City Sta Garfie		07026						
Project Manager for I	Monitoring Firm	Tele	ephone i	Vumber		·	Telepho (973)6				2003	ense i 191 '	Numb 'A"	er	
Scheduled Start Date	(10)	Sch	eduled (Complet	ion Da	ate (11)	Name o	of OSH	A Monitor						
05/09/20	015		00	6/06/20)15		Testor	Tech							
Occupancy Status Di	uring Abatemer	nt (Che	ck only o	one)			Street A	Address	3						
									on Aveni	ne					
(X) Facility Closed/Va	acated During E	Entire P	eriod of	Abatem	ent		City, Sta	(0) (5)							
() Abatement Perfor () Other – Describe:		INOIII	ai Facilii	y Hours			Long I	sland	City, NY	1110	1				
Source of Work (Che	ck all that apply	y)					() Full	Contai	nment with	Negati	ive P	ressii	re		
(X) ≥ 3 sf or ≥ 3 lf		()	Renova	ition			() Min	i-Enclo	sure	ivegati	1001	0000			
(X) ≥ 160 sf or ≥ 260	If	()	Demoli	tion			() Glo	ve bag	Procedure pted (*) an	d Non-F	Friah	o Pro	cedu	'	
					T		(V) 1401	I-EXEII	pteu () an	u INOII-I	Hab		teme		ne.
Location	71.24		ation No					constant to the			-	7100	T		
Asbestos-Containir	ng Material		ed Solel		55,55		ion of Asb Vlaterial (A		0	nount		R	_	Enc	Щ
(ACM) TO BE ABA	TED		dial Stat				stems ins		(0	pecify or LF)		emo	Repair	aps	ıclo
in Facility							g, VAT, or		31	OI LI')		Removal	air	Encapsulate	Enclosure
(13)		Yes	No	N/A		misc	cellaneous	5)						te	(b
Basement / Laun	dry Room			X	VA	Т			50	0 SF		Χ			
Second Floor Be	droom			X	VA	T			18	0 SF		Χ			
Kitchen				X	VA	T				0 SF		Χ			
Name of Reg. Waste Cid Construction Ser		NJD # 32		te Haule	r ID	Cubic \	Yards of V	Vaste	Name of 110 Sand						
City, State Garfield, NJ						Dispos TBD	al Date		City, State Melville, N	9					
Completed by	Title				Si	gnature		-			Dat	e			-
Roque Schipilliti	Project M	anager			_	1/20	9501	chep	Stelly				/05/20	15	
3-41		ACCUSES 1				V/ 0		1	,						



Date of Notification (1) 5/5/15				Т				r/Operator			<u> </u>	n .1.7	11	101	11,2		
Agencies Notified	Type Not	ification					Com	munity (Colleg	je .	11		Α	17.			
1	-				Street A	lack H	orse l	Pike			N.	AY -	- 18	- ZVI:)	C.	11
EPA DEP DOL		al ended endment :	#			ate, Zip Co Landing		18330								٠	
■ DOH	Eme		including	-		f Contact	140 0		12.4	E .		ephone		nhor-			
DCA		cellation			Chris							CDIJONE	. A TOI	ibei			
Name of Facility Where	Ahatement	is Taking	Dlace /	2)	FAC	LITY INF	ORMA	TION			(4)						
Building D Atlantic	Cape Co	ommuni	ity Colle	ege					PERSON	of Facility	3070						
Street Address									×	School (K- Subchapte	r 8 (Oth	er than	K-12	2)			
5100 Black Horse	Pike									Other (i.e. etc.)	private	& comm	nercia	al buil	dings	, hom	es,
City (5) Mays Landing NJ (18330								Squa	re Feet	1200	f Floors		11 (9)	Bldg. A	Age	
County (6)					County	Code (7)			1000		1+			- 1 -	5+		
Atlantic					(STATE	USE ONLY)		Curre	ent Use (Pr	ior if bei	ng dem	olish	ed)			
Name of Monitoring Firm Brinkerhoff Environ	n Hired by B	Building C	Owner (8)		ASCI	/ No.				atement Co	ntractor	(9)		-1-10-11-1			
Street Address	imentai								aco I		_				٠		
1805 Atlantic Ave									Addre Box 3	C 100 C							
City, State, Zip Code								City, S	state, Z	ip Code							
Manasquan NJ								Wes	t Berl	in NJ 080	091						
Project Manager for Mor	nitoring Firm	1			Telepho 732-52	ne No. 28-6368			one N 753-9			Licen: 0072		ο.			
Start Date (10) 5/18/15			Schedule 6/5/15	ed Con	npletion	Date (11)		Name Sam		HA Monitor							
Occupancy Status Durin	g Abatemer	nt (Check	Only Or	ie)				Street	Addres	SS					-		
Facility Closed/Vac Abatement Perform Other – Describe:	ated During ned Outside	Entire P of Norma	eriod of A	Abatem	nent			City, S	tate, Z	ip Code							
-							_										
Scope of Work (Check A	Ali That Appi	ly)	I					ļ-	1				_				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			The same of the sa	enova emolit					Mir Glo	ll Containm ni-Enclosur ovebag Pro	e cedure						
			Т.					×	No	n-Exempte	d (*) and	d Non-F	riabl				
Location	n of		1	Locati Iormal	ly	8	_	opprintion								ement pe	
Asbestos-Containing TO BE AB	Material (A	CM)	Use Ma	d Sole intenar	ly by		tos Co	escription ntaining N	aterial		А	mount				т	
In Facil	lity		Cust	odial S (12)	Staff?	(i.e.		al systems acing, VA		ation,		pecify or LF)		Remova	Repair	ncap	Enclo
(13)				20 22	1		other	miscellar	eous)					oval	oair	Encapsulate	Enclosure
Poomo 101	100 0101		Yes	No	N/A											(D)	
Rooms 121,				Х				Tile & r				00 SF		x			
Mechanica	Mechanical Room x							on (wet	Wrap	& Cut)	1	0 LF		x			
			-														
Name of Registered Was	ste Hauler			I NI	JDEP W	asto	C.L.	o Vord-		Ner	Devist		15"				
Transformation	J.O I IGUICI			H	auler ID		of W	c Yards aste		Name of ACUA	Registe	red Lar	ndtill				
City, State				18	3952		5										
Egg Harbor NJ						2),	6/5/	osal Date		City, Stat 6700 D		Rd. El	1 TH	۱J			
Completed by Anthony T Perna			Title Presi	don+				Signature	1	7			Dat				\dashv
- maiony i i ema			Fresh	Jent					~				5/5	/15			



Date of Notin	fication (1)					f Building c Cape				9 ()	9.F.ova						
Agencies No	otified	Type Notification			Street A 5100 E	ddress Black Ho	orse Pil	ke		6	11.	<u> </u>	1 1 1	-	5		
EPA DEP X DOL		Amended Amendment				ite, Zip Co Landing		330		Ž.	Lily.	E.L.	e _{i,1}	17	L		
DOH DCA	3 E *	Emergency justification) Cancellation			Name of Chris	f Contact					Tele	phone N	lumbe	r			
					FACI	LITY INFO	ORMATI	ON									
		Abatement is Takir Cape Commur							Туре	of Facility (4)							
Street Addre		Cape Commu	nty Cone	ge		£0				School (K-12)							
5100 Blad		Pika	353							Subchapter 8 Other (i.e. pri				ildi	inas	home	25
City (5)	JK 110136 1	inc							е е	etc.)		* 1100-4-4-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1					
Mays Lan	ndina NJ 0	8330							Squar 1000	e Feet ∩∔	# of 1+	Floors		35	dg. A	ge	
County (6)	<u> </u>			-	County (Code (7)				nt Use (Prior		na demol	lished)		71:		
Atlantic						USE ONLY				000 (1 1101		ig doillo					
		Hired by Building	Owner (8)		ASCM	No.	7	1		ement Contr	actor	(9)				- 1	
Brinkerho		mental						Pern	aco In	ic.							
Street Address 1805 Atla									Addres Box 32	751							
City, State, 2 Manasqu										p Code n NJ 0809	1						
Project Man	ager for Mor	nitoring Firm			Telephor	ne No. 28-6368			one No 753-98			License					
Start Date (1	10)		Schedule					Name	of OSH	IA Monitor		00727		-			
5/18/15	01-1 5		6/5/15					Sam	10000								
		g Abatement (Che						Street	Addres	S							
Abatem	Closed/Vac nent Perform - Describe:	ated During Entire ned Outside of Norr	Period of A nal Facility	baten Hours	nent			City, S	tate, Zi	p Code							
Scope of Wo	ork (Check A	II That Apply)															
× ≥3 sf or			(management)	enova emolit				×	Min Glo	Containmen i-Enclosure vebag Proce n-Exempted (dure						
	15.		le	Locati	on				1101	LXCIIIptou) une		Idolo		1010103000	ment	
	Location	n of	N	ormal	ly		Da	scription	of.						Ту	ре	
Asbestos	s-Containing	Material (ACM)		d Sole			tos Cont	taining N	Naterial		A	mount				Е	
	TO BE AB				Staff?	(i.e.	thermal	systems cing, VA		tion,		pecify	3		Re	nca	Enc
	(13)			(12)				niscellar			SF	or LF)	Kolliova		Repair	Encapsulate	Enclosure
			Yes	No	N/A	11							1 5	-		ate	re
	Lab ro	om		х		AC	M Und	lercoat	ted Sir	nks	2	Each	x	1			
			х									Marin W.					
														1			
													_	+	_		
Name of Reg	gistered Was	ste Hauler		IN	JDEP W	/aste	Cubic	Yards		Name of Re	egiste	red Land	dfill				
Transform	ation			100	lauler ID 8952	No.	of Was			ACUA	-3.515		31010				
City, State Egg Harbo	or NJ					•	Dispos 6/5/1	sal Date		City, State 6700 Del	lilah I	Rd. EH	IT NJ				
Completed b			Title					Signature	-	•			Date	_			
Anthony T	Perna		Presid	dent					Q				5/5/1	5			

Print Form

CK 4833

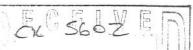
Date of Notification (1) 5/5/15					f Building											
Agencies Notified	Type Notification		_		ic Cape	Com	nunity (colleg	le str		2 ×	11				
EPA DEP	Type Notification Initial			Street A 5100 E	ddress Black Ho	orse F	Pike		9			012	1	٠ . ١	i	
DEP X DOL	Amended Amendment #		_		ate, Zip Co Landing		8330			à L	ici.					
DOH DCA	Emergency (ir justification) Cancellation	nciuaing		Name o Chris	f Contact					-	phone	Numb	_			
				FACI	LITY INFO	ORMA	TION	-							-	
Name of Facility Where	Abatement is Taking	Place (3)					Type	of Facility (4))						
Building A Atlantic Street Address	Cape Communit	y Colle	ge		٠				School (K-12)							
5100 Black Horse I	Pike								Subchapter 8 Other (i.e. pri				build	dings,	hom	es.
City (5)					-				etc.) re Feet	# of I	Floors		Тв	ldg. A	000	
Mays Landing NJ 0	8330							1000		1+	10015			5+	vge.	
County (6) Atlantic					Code (7) USE ONLY)		Curre	ent Use (Prior	if bein	g demo	olishe	d)			
Name of Monitoring Firm Brinkerhoff Environ		wner (8)		ASCN	/ No.	-	The state of the s		tement Contr	actor (9)					
Street Address	mental							aco li Addre						•		
1805 Atlantic Ave							PO E	30x 3	29							
City, State, Zip Code Manasquan NJ									ip Code in NJ 0809	1						
Project Manager for Mor	itoring Firm			Telepho	ne No. 28-6368			one N			Licens					
Start Date (10)		Schedule	ed Cor		Date (11)			753-9 of OSI	HA Monitor		00727					
5/18/15		6/5/15		*	0 1		Sam									
Occupancy Status Durin			50.50				Street	Addres	SS							
Facility Closed/Vac Abatement Perform Other – Describe:	ated During Entire Pe led Outside of Norma	eriod of A Il Facility	baten Hours	nent s			City, S	tate, Z	ip Code							
Scope of Work (Check A						-										
23 sf or ≥3 lf	ш ттаг друу)	× R	enova	tion				1	II Cantainna	4		*				
≥160 sf or ≥260 lf			emolit					Mir	Il Containmen ni-Enclosure		Negativ	e Pre	ssur	e		
							×		ovebag Proce n-Exempted (Non-Fi	riable	Pro	cedur	е	
		220	Locat												emen	t
Location Asbestos-Containing			lormal d Sole		Achoo		escription		· (A CAA)			ŀ		1 9	ре	
TO BE AB	ATED	2,548 55	ntena odial S		(i.e.	therma	ntaining M al systems	insula	ation,	(Sp	ount ecify		Re	70	Enc	En
In Facil (13)			(12)			surf	acing, VA miscellar	T, or eous)		SF	or LF)		Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A				į.					a	-	late	ıre
Through out E	Building A		Х			Floor	Tile & n	nastic		980	0 SF	1	c			
Bio Lab, Physics La	o, Division office					Lab	Bench 7	Горѕ		475	SF	1	ς			
Bio Lab, Physics La	o, Division office					peg	wall bo	ard		450	SF					
Name of Barbara								.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								
Name of Registered Was Transformation	ste Hauler		1 33	IJDEP W lauler ID		Cubi of W	c Yards aste		Name of Re	egistere	ed Land	dfill				
	*			8952	858X	30	1/8/9/38		ACUA							
City, State Egg Harbor NJ					•	Dispo 6/5/	osal Date 15		City, State 6700 Del	ilah R	ld. EH	IT N	J			
Completed by		Title				T	Signatore	1				Date				
Anthony T Perna		Presid	dent				(_		_		5/5/	15			

Date of Notification (1)		100		Building Ov		rator	(2)	2015	HAY -8	LW	1.		
05/05/2015	100		00	arbor Tov	vnsnip					rat t	! •	4-1	_
Agencies Notified Type Notificati	on	1 12	treet Ad	idress Bargaintov	wn Roa	d		Ásig					
× EPA × Initial		- 1		e, Zip Code					LIST		100		
EPA Initial DEP Amended DOL Amendment				arbor Tov		N.1 (18234				1.3		
Emergen	cy (including			Contact	viloiip,	140 (,020 .	Tele	phone Nu	mber			
DOH justification DCA Cancellat		1 200	Peter N							~~~			
Dea Caricera	1011			ITY INFOR	MATION					_			
Name of Facility Where Abatement is Ta	king Place (3)		17.012				Type of Facility (4)					
Hampton Motor Lodge							School (K-1	2)					
Street Address							Subchapter	8 (Othe	er than K-1	2)		LO CONTROL	
8018 Black Horse Pike							Other (i.e. p	rivate à	commerc	al bullo	lings,	nome	s,
City (5)							Square Feet	# of	Floors	В	ldg. A	ge	
Egg Harbor							4,000 SF	1.		6	0		
County (6)				Code (7)			Current Use (Prid	or if bei	ng demolis	hed)			
Atlantic County		(-	STATE U	ISE ONLY)			Vacant Mote	for D	emolition	1			
Name of Monitoring Firm Hired by Buildi	ng Owner (8)		ASCM	No.	N	lame	of Abatement Cor	tractor	(9)				
EnviroVision					1	Incin	ia Contracting	, Inc.					
Street Address					1		Address						
20-21 Wagaraw Road - Buildin	g 35E					1360	Clifton Avenu	ie, Un	it 365				
City, State, Zip Code							tate, Zip Code						
Fair Lawn, NJ 07410						Clifto	on, NJ 07012						
Project Manager for Monitoring Firm			elephor			10.500	ione No.		License N	10.			
Fred Larson				636-9145		3000) 450-9500		01036				
Start Date (10)	Scheduled		pletion [Date (11)	189		of OSHA Monitor		•				
05/19/2015	05/26/2						ia Contracting	, Inc.					
Occupancy Status During Abatement (C	heck Only One)					Address	11.					
Facility Closed/Vacated During Ent Abatement Performed Outside of N	ire Period of Ab	oatem	ent				Clifton Avenu	ie, Un	11 365				
Abatement Performed Outside of N Other – Describe:	ormal Facility I	Hours				1500	tate, Zip Code						
						Cliff	on, NJ 07012			-			
Scope of Work (Check All That Apply)													
≥3 sf or ≥3 lf	Manager 1	enovat emoliti					Full Containm Mini-Enclosure		Negative	Pressu	re		
≥160 sf or ≥260 lf	× De	HOHLI	JH				Glovebag Pro	cedure					
0						×	Non-Exempte	d (*) an	d Non-Fria	ble Pro	0.00	Same and	
	400,000	ocatio	2010								Abate	ement roe	
Location of	Head	ormally Solely			Descr								
Asbestos-Containing Material (ACM) TO BE ABATED		itenan					Material (ACM) s insulation,		mount Specify	D	_	Enc	m m
In Facility	Custo	dial S	taff?		surfacin	g, VA	T, or		or LF)	Remova	Repair	aps	clos
(13)		(12)			other mis	cellar	neous)			ova	air.	Encapsulate	Enclosure
	Yes	No	N/A									Ф	1 N/
Office 2		Х	Х		Linc	oleur	n	5	0 SF	Х			
000 2		262	2000				100						
						-					-		
											-		
Name of Registered Waste Hauler			JDEP W		Cubic Ya		Name of	Registe	ered Landfi	H			
Atlantic Carting		1000	J-641	NO.	of Waste		IESI P	A Betl	nlehem L	.andfil	I Cor	p.	
City, State		14	0-041		Disposal	Date	City, Star	te					
Wayne, NJ					TBD		Bethle		PA				
Completed by	Title				-	natur				ate			
Milena Zoric	Execu	utive	Direct	or		W	Rye	\leq) ()5/05/	2015	5	

Print Form

	of Notification (1)				1000		Building C			(2)	M	4Y - 8	ZUID				
	/05/2015	-	11 05 0				arbor To	WIISIII	þ	_						-	
	ncies Notified	-	e Notification			Street Ad 3515 E	adress Bargainto	own R	oad		ASBE	STUE CI. LICENSI		128			
×	EPA DEP	×	Initial Amended				te, Zip Cod			2.,	7.25 F 14.18	LIUEINA	100			_	
X	DOL		Amendment	#			arbor To		p, NJ (08234							
	DOLL		Emergency		1	Name of	Contact					Telepho	ne Nun	nber			
×	DOH DCA		justification) Cancellation			Peter I	Miller										
							ITY INFO	RMATI	ON								
	ne of Facility Where	Abate	ment is Takin	g Place (3)						Туре	of Facility (4))					
	y Breeze Hotel		**								School (K-12		17.40				
700	et Address										Subchapter 8 Other (i.e. pri				inas.	home	s.
70	90 Black Horse	Pike								е е	etc.)						
City											e Feet	# of Floo	ors		dg. A	ge	
_	g Harbor		- U C							1.00	0 SF	2	11-1-	6	U	-01	7
	nty (6)						Code (7) ISE ONLY)				nt Use (Prior ant Motel	Filment for Frankrich					İ
	antic County				- 1					20000000	T-1010-01000 (0,000)	Navaran - Navaran - Alba	HOIJIIC				
	ne of Monitoring Firm	n Hire	d by Building	Owner (8)		ASCM	No.				tement Contracting,	8 %					
177250	viroVision								2000	Addres		IIIC.					
10000000	et Address -21 Wagaraw Ro	004	Building (DEE							s on Avenue	I Init 36	35				
		oau -	- building (DOE							p Code	o, Ornic oc	,,,	<u> </u>			-
	, State, Zip Code ir Lawn, NJ 074	10							33-50		J 07012						
200000	ect Manager for Mor	7.500	a Firm		- 15	Γelephor	ne No.			none No		Lio	ense N	0.			
	ed Larson		3				636-914	5	10.400.000.000.000	450-		01	036				
Star	t Date (10)		1	Schedule	d Com	pletion [Date (11)		Name	of OSH	A Monitor						
05	/18/2015			06/01/2	015				Incir	nia Co	ntracting,	Inc.	- 00-70				
Occ	upancy Status Durin	ng Aba	atement (Che	ck Only One	e)					Addres		12014111121114111					
×	Facility Closed/Vac	ated	During Entire	Period of Al	batem	ent			1000-0000		on Avenue	e, Unit 36	35				
×	Abatement Perform		utside of Norr	nal Facility	Hours						p Code						
100000000000000000000000000000000000000	Other - Describe:								Clift	on, N	J 07012						
Sco	pe of Work (Check A	All Tha	at Apply)						_	=							
	≥3 sf or ≥3 lf			Constitution of the last of th	enovat						l Containme i-Enclosure	nt with Neg	ative F	ressur	е		
×	≥160 sf or ≥260 lf			X De	emoliti	on				Glo	ii-⊑nciosure ivebag Proce	edure					
									×	Nor	n-Exempted	(*) and No	n-Friab				
				ls l	Locatio	on										ment pe	
	Locatio	n of			ormall Solel				scription					-	1 9	pc	
,	Asbestos-Containing				ntenar				taining N system			Amou (Spec	200	70		En	ш
	TO BE AB In Faci		2	Custo	odial S	taff?	(1.6.	surfa	cing, VA	T, or	tuori,	SF or L		Remova	Repair	caps	nclo
	(13))			(12)			other r	miscellar	neous)				oval	air	Encapsulate	Enclosure
				Yes	No	N/A										е	
	Exterior 9	Sidin	g		X	X	Corr	ugate	d Shin	gle Si	ding	10,000	SF	Х			
															1		
Nan	ne of Registered Wa	ste H	auler		N	JDEP W	/aste	Cubic	Yards	_	Name of F	Registered	Landfill				
	antic Carting		00.000 (1975)		3/3	auler ID	No.	of Wa	ste		Distriction Color	Bethleh			Cor	p.	
					N	J-641		40	I D-1		3002003000000000				1000		
	, State							TBD	sal Date		City, State Bethleh						
	yne, NJ			Title					Signatur	9 \	/ Delillell	om, i A	Ds	ate			
	ena Zoric				utive	Direct	or	1		MA	M (>	10000	5/05/	2015	,	
iville	5.74 £0110				21110	2.1001	-1		1	V							

Date of Notification (1) 05/05/2015				Building Owner/ arbor Townsh			1.1.7	0 20	15			
Agencies Notified Type Notificatio	n		Street Ad		пр		MAY -	- 8 20	13		-	
	1			Bargaintown F	Road	1			, ,	į		
X DEP Amended				te, Zip Code		The state of the s	US 100E	rainid	الا سائية:		1	
X DOL Amendme	nt # y (including	-	Egg H	arbor Townsh	nip, NJ 08:	234	Live	المداد المرادا				
DOH justification Cancellation			Name of				Tele	phone N	umber			
DCA Cancellation	on		Peter I				4					
Name of Facility Where Abatement is Tak	ing Place (3)	FACIL	LITY INFORMAT		pe of Facility ((4)					_
Hickory Lodge Restaurant	g / (0	'				School (K-1						
Street Address						Subchapter	8 (Othe					
8036 Black Horse Pike					×	Other (i.e. p	orivate 8	commer	cial buil	dings,	home	es,
City (5)				9	Si	quare Feet	# of	Floors	В	ldg. A	ge	
Egg Harbor						,000 SF	1			60		
County (6)			County C	Code (7) USE ONLY)	1000	urrent Use (Pri					1110	
Atlantic County						acant Mote	Simon		n			
Name of Monitoring Firm Hired by Buildin EnviroVision	g Owner (8)		ASCM	l No.		Abatement Cor		(9)				
Street Address					Street Ad	Contracting	, iric.					
20-21 Wagaraw Road – Building	35F					diess Hifton Avent	ıe I İni	t 365				
City, State, Zip Code						e, Zip Code	30, 011					
Fair Lawn, NJ 07410						NJ 07012						
Project Manager for Monitoring Firm			Telephor	ne No.	Telephon	e No.		License	No.			
Fred Larson				636-9145	(973) 4	50-9500	10	01036				
Start Date (10)	Schedule		pletion [Date (11)	A STATE OF THE PARTY OF THE PAR	OSHA Monitor				•		
05/22/2015	06/01/2					Contracting	, Inc.					
Occupancy Status During Abatement (Ch					Street Ad	_{dress} Hifton Avent	ıo I Ini	+ 365				
Facility Closed/Vacated During Entin Abatement Performed Outside of No Other – Describe:						e, Zip Code	Je, Om	1 303				
Other – Describe:	illiai i adiity	110013	9. 			, NJ 07012						
Scope of Work (Check All That Apply)					- Cinton	, 110 01012						
≥3 sf or ≥3 lf	Пв	lenova	tion		×	Full Containm	ent with	Negative	Pressu	re		
≥160 sf or ≥260 lf	CONTRACTOR OF THE PARTY OF THE	emoliti				Mini-Enclosur	е	-3				
					×	Glovebag Pro Non-Exempte		Non-Fri	able Pro	cedur	е	
	le	Locati	on						1		ement	
Location of	1	Normall	ly	D	escription of					Ty	pe	-
Asbestos-Containing Material (ACM)		d Sole		Asbestos Cor	ntaining Mate	erial (ACM)		mount			Ē	m
TO BE ABATED In Facility	Cust	odial S	Staff?		al systems in acing, VAT,			pecify or LF)	Remova	Repair	cap	nclo
(13)		(12)		other	miscellaneo	us)			oval	air	Encapsulate	Enclosure
	Yes	No	N/A		0000000						(e)	
Main Room/Kitchen		Χ	X	Viny	l Floor Til	es	3,2	00 SF	X			
Exterior		X	X	Corrugate	ed Siding S	Shingles	80	00 SF	X			
Windows		Χ	X	Wind	low Caulk	ing	10	00 LF	X			
Name of Registered Waste Hauler		1,500	JDEP W auler ID		c Yards	Name of	Registe	red Land	fill			
Atlantic Carting		0255	J-641	40	4310	IESI P	A Beth	lehem l	Landfil	I Cor	p.	
City, State		12			osal Date	City, Star						
Wayne, NJ				TBD		Bethle	hem, F	74.00				
Completed by Milena Zoric	Title	u tivo	Directo	(1	Signature	0.			Date 05/05/	2015		
IVIII CITA ZUTIO	Exec	ulive	DILECTO	J. 1	VVIX	(1) A)		00/00/	2010	611	- 1



Date of Notification (1),				g Owner/Operator		MAY - 3	2016			1)	li
5/5/15		MA	2. F	red NA	IURAUE	MIAI 0	401)	11	1	
Agency Notified Type Notification			Address		1				1		-
D EPA DYNitial		5	86 E	EAST PAS	SSAIC	AUGESTOS		31	it.		-
□ DEP □ Amended	-		tate, Zip			LICENS	ING				T
Amendment #	. 1	B	MOOL	FIELD . N	1J. 0700	3			nu-temphic:		-
DOH justification)	'	Name	of Contac	zt .		Telephone Num	ber		_		
□ DCA □ Cancellation		A	RIF	, NATURAL	?	1 110 010			٦		
		FACI	LITY INF	ORMATION							
Name of Facility Where Abatement is Taking Place	(3)		18		Type of Facility	y (4)					
MR. NATURALE			_		School (K-1	2)					
Street Address	100 March 100 Ma		1,	4		8 (Other than K-12)					
586 EAST PASSAIC	- A	しそ			homes, etc.	rivate & commercia .)	DUIIGIA	igs,			
City (5)					Square Feet		Bldg.	_			
BLOOMFIELD			17		2200	2	2	30	901	AA	ذ
County (6)		County	Code (7) (STATE USE	Current Use (F	Prior if being demolis	shed)				
ESSEX		ONLY)			RE	SIDEN CE					
Name of Monitoring Firm Hired by Building Owner	ASC	A No.		Name of Abatem	ent Contractor ((9)					
(8)				Best Re	moval I	nc ·					
Street Address				Street Address		iic			_		
				450 Sout	h River	St					
City, State, Zip Code				City, State, Zip C						_	
				Hackensa	ck N	T 07601					
Project Manager for Monitoring Firm	Telepho	ne No.		Hackensa Telephone No.	CR . IV.	License No.					
				201-329-	7444 -	0038	88				
Start Date (10) / Scheduled Com	pletion Da	ate (11)		Name of OSHA	Monitor						
5/27/15 5/2	-8/15			Omega En	vironme	ntal Inc					
Occupancy Status During Abatement (Check only of	one) .			Street Address							
☐ Facility Closed/Vacated During Entire Period of /	Δhatamon	ŧ		280 Huy1							
☐ Abatement Performed Outside of Normal Facility				City, State, Zip C				02			
DOther-Describe: 7DM TO 5 PM				Hackensa	ck , N.	J. 07601					
Scope of Work (Check all that apply)				D Fell C	Containment with	Negative Pressure					
El≥3 sf or≥3 lf			ovation	-2 Mini-	Enclosure	. Negoure : recour					
☐ ≥ 160 sf or ≥ 260 lf		□ Den	nolition		ebag Procedure	d Non-Friable Proce	velu tra				
				Q NOIP	Exempled () an	a Northable Floor		A	bate	mer	nt
	Is Local		1						Тур	эе	
. Location of	Used Sol		-	Description of		· · ·				_	
Asbestos-Containing Material (ACM) TO BE ABATED	Maintena			stes Containing Ma thermal systems		Amount (Specify		Re	20	no	E
IN Facility	Custod		fe.C.	surfacing, VAT		SF or LF)		Removal	epe	sole	Enclosure
(13)	(12)			other miscellane	eous)	W 0.00000000000000000000000000000000000		Val	Repair	in a	LIF0
	res No	N/A	1			" a				•	
BASEMENT		100	الم الماليال	MAC IN SUL	TION	16018	=	×		1	
UNDERCEN	-	1	17014		.,	1002		1	1	+	-
	_	-	-					\vdash	\vdash	-	
	+	+					**	H	\forall	+	_
	N INC.	NA	laulee	Cubic Yards of	Name of Dani	stered Landfill				_	-
Name of Registered Waste Hauler	NJDEP ID No.	vvaste h	nawer	Waste	maine of Regi	SCHOOL EGILLING					
Best Removal Inc	1710	9		39	Minerva	a Enterpri	ses	. I	LC		
City, State	11/10	,		Disposal Date	City, State				ACCO.	100	
Hackensack , N.J. 0760	0.1			5/28/15	Wayneel	ourg ,0h .	446	88			
Completed by Title	0.1	-		Signature /	I we Attest	,011	Date	1	7		
	tor			1/	سرصه وال	3	5	5	11-	5	
		m for ac	bostos lie	censure exempted					1		

CK14661.

STATE OF NEW JERSEY NOTIFICATION OF ASBESTOS ABATEMENT

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

Date of Notification (1)	5/0//	2015			Name of Buildi	ing Owner/C	Operator (2)					
	5/04/	2015			William Cre	ss	10.00 m	MAY	- 8	2015	1.2	111
Agencies Notified	AL.	Notification	Туре		Street Address	3						
X EPA		Initial			28 Worcest	er Drive	, L		er i can e ain		الما	
X DEP		Amende	ed #		City, State, Zip	Code	A	11	CENSI	NG	<u>. 0</u>	
X DOL			ncy (includ	ing	Wayne, NJ	07470	Separated to see the little little					
X DOH		justificat	100000000		Name of Conta			Tel. Ni	ımher			
DCA		Cancella	ation	EACH ITS/IN	Mr. William	Cress						
Name of Facility Where Abates	ment is Ta	aking Place (3	3)	FACILITY IN	FORMATION Type of Facility	v (4)						
Residential Home												
Street Address					School (k	(-12)						
155 Beechwood Rd					Subchapt	ter 8 (Other	than K-12)					
	ounty (6)		County C	Code (7)			commercial b	uildings	,			
	rgen		(State Us		homes, e	etc.)						
Name of Monitoring Firm Hired		Owner (8)	ASCM N	0.	Name of Contr	actor (9)						
n/a			(5)	_	MTM Metro		ion					
Street Address					Street Address	•						
					135-137 Mc	Bride Ave	е					
City, State, Zip Code					City State, Zip	Code						
					Paterson, N	J 07501			*			
Project Manager for Monitoring	g Firm	Telephone I	Number		Telephone Nu			Licens	e Numb	er		
n/a					973-742-50	30		00809	9			
Scheduled Start Date (10)		Scheduled (Completion	Date (11)	Name of OSH	A Monitor						
5/16/2015		5/18/2015	i		MTM Metro	Corporat	tion					
Occupancy Status During Aba	tement (C	Check only one	e)		Street Address	3				August 1		
					135-137 Md	Bride Av	enue					
Facility Closed/Vacated [During En	tire Period of	Abatement		City, State, Zip	Code			207			
Abatement Performed Or	utside of I	Normal Facility	y Hours									
Other-Describe:					Paterson, N	J 07501						
Source of Work (Check all that	t apply)											
> 3 sf or > 3 lf	×	Renovation	ı	Full	Containment wit	th Negative	Pressure	☐ Mi	ni-Enclo	sure		
> 160 sf or > 260 lf		Demolition		Non	-Exempted(*) &	Non-Eriable	Procedure	☐ Glo	ovebag l	Procedu	re	
		J:	- United						T A I - 1 -			
Location of Asbestos- Containing Material (ACM) in		ation Normally by Maint./Cus		Description of thermal systen		Amount (Specify SF or	LF)	Abate	ment Ty	<u>Je</u>	
Facility (13)	Staff? YES		NIA	surfacing, VAT miscell.)					Rem.	Rep.	Encan	Enclose
basement	TES	NO	N/A X	duct insulation		100 SF			×	Т, сер.	Г	T
						100 01						
	1 ,	-		-		-	88.		*			-
Name of Reg. Waste Hauler		NJDEP Was	ste Hauler I	ID#	Cubic Yards of	f Waste		Name	of Reg.	Landfill		
MTM Metro Corporation		26552			10			Tullytov	vn			
City, State							Disp. Date		1.0	City, Sta		
Paterson, NJ 07501							5/19/2015	- 7000		ullytown	PA	
Completed by (Print or Type)		Title	-		Signature			Date				
Elizabeth Maslarkov		Dueiness Ad-	niniatrata-		Elizabeth	Masla	rkov	E (0.4.12.0	15			
LIIZADEUI IVIASIAI KUV		Business Adr	innistrator			Treadu		5/04/20	10			

ASB-41

Do not use this form for asbestos licensure exmpted activities.

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

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

								F 6	n F2 n 110	FED		-	
Date of Notification (1) May 5, 2015				Name of	Building (Semino		Construction) (5)	4	7	
	l Notific	ation tification		Street A			artlet	t Avenue MA	Y - 8 2015	1	1		
[x] DOL Ame	ndment gency (i			City, Sta	te, Zip Coo	e West (Creek	c, NJ 08092		1.8			
I A I DON	ication) ellation			Name of	Contact Joyce		12	Tōl	ephone Number				
			FAC	II YTLII	NFORM	ATION							
Name of Facility Where Abatement is Taking Residence	Place (3	3)					Тур		School (k-12)		20 00		
Street Address 79 Beverly Lane								[x]	Subchapter 8 (oth Other (i.e., private homes, etc.)			al build	ings,
City	Coun	ty (6)		County C (STATE	ode (7) USE ONL	()	Squ	are feet 1000 sf	# of Floors	Bldg	Age 6	0	
Beach Haven West	Oce	an					Cur	rent Use (Prior if b Residenc					11
Name of Monitoring Firm Hired by Building N/A	Owner (8)		ASCM N	lo.	Name of	Abate	ment Contractor (9 Guardian) Contracting,	Inc.			
Street Address						Street Ad		1889 Ro	ute 9, Unit 61				
City, State, Zip Code						City, Stat		Toms Ri	ver, New Jerse		55-12	271	
Project Manager for Monitoring Firm		Telephone				Telephon 732-34	9-99	32	License N 00624	umber			
Scheduled Start Date (10) 5/5/15		Scheduled 5/7/1		ion Date (1	1)				. Analytical				
Occupancy Status During Abatement (Check [X] Facility Closed/Vacate			od of Aba	itement		Street Ad	ldress		lton Road				
Abatement Performed Other – Describe	Outside	of Normal Fa	acility Ho	ours		City, Stat	te, Zip		ay, New Jerse	y 088	54		
Scope of Work (Check all that apply)						[]		Full Containment w	vith Negative Pres	sure			
$\begin{bmatrix} \\ \\ \end{bmatrix} > 3 \text{ sf or } \ge 3 \text{ lf}$ $\begin{bmatrix} \\ \\ \\ \end{bmatrix} \ge 160 \text{ sf or } \ge 260 \text{ lf}$		[]	Renova			[]	(Glovebag Procedure			222		
[X] ≥160 sf or ≥260 lf	,	[x]	Demoi	ппоп		[x]	1	Non-Exempted (*)	and Non-Friable i	Toccuu	10		
		Is Locatio	n			Description	n of				ement '		
Location of		Normally u			As	estos-Cor	ntaini		Amount	R	R E	E N	E N
Asbestos-Containing Material (ACM)	Mai	Solely by ntenance/Cr				Material (A ., thermal			(Specify SF	М	P	С	C
TO BE ABATED in facility	Mai	Staff	ustourar			i, inermai ulation, su			or LF)	0	A I	A P	LO
(13)		(12)				VAT, o	or			V	R	S U	S U
	YES	s NO	N/A		oth	er miscella	aneou	15)		A L		L E	R E
Exterior house		X		Asbe	stos sidir	ıg			750 sf	Х			
							. 1	.	1 7 1011				
Name of Registered Waste Hauler Guardian Contracting, Inc.		NJDEP Was	te Haule 20223	r ID No.	Cubic Ya	irds of Was	te	Name of Registere T.R.R.F.	ed Landfill				
City, State Toms River, New Jersey				sal Date		City, St Tullyt		Pennsylvania					
Completed by (Print or Type) Nicholas Fernicola	Title Proj	ect Manag		Signat	ure)	(hal)	7		Ħ	Date 5/5/	2015		

^{*}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)

								P F D D	7 5-0		-	
Date of Notification (1) May 5, 2015				Name of	Building O		ator (2) ole Construction		2	46	76	
	l Notific	cation otification		Street Ad		100000000000000000000000000000000000000	artlett Avenue	MAY - 8 201	5	2		
[x] DOL Amer	ndment gency (#including			te, Zip Cod	e West (Creek, NJ 08092		128			
I X I DOH	ication) ellation			Name of	Contact Joyce		at.	Telephona Number				
			FAC	ILITY I	NFORM	ATION						
Name of Facility Where Abatement is Taking Residence	Place (3)					Type of Facility (School (k-12)	(Ver 1) States	hak attantions		
Street Address 25 Marguerite Lar	ne						[x]	Subchapter 8 (of Other (i.e., priva homes, etc.)			al build	ings,
City	Cour	nty (6)		County Co (STATE U	ode (7) JSE ONLY)	Square feet 1000 sf	# of Floors	Bldg	, Age	60	
Beach Haven West	Beach Haven West County (6) Ocean of Monitoring Firm Hired by Building Owner (8) N/A Address State, Zip Code ct Manager for Monitoring Firm Telephone duled Start Date (10) 5/5/15 Scheduled ' 5/7/1						Current Use (Prio Resid	r if being demolished lence)			
N/A	Owner ((8)		ASCM No	о.			tor (9) dian Contracting	Inc.			
3,420,500,77,500,003,003,003						Street Ac	1889	Route 9, Unit 61				
100 H2 H211				0				s River, New Jers	sey 087	755-1	271	
	of Monitoring Firm Hired by Building Owner (8) N/A Address State, Zip Code It Manager for Monitoring Firm Telephone uled Start Date (10) Scheduled 5/5/15 ' 5/7/1 sancy Status During Abatement (Check only one) [X] Facility Closed/Vacated During Entire Period					Telephor 732-34	ne Number 9-9932	Dicense N 00624	Number			
5/5/15	N/A et Address 7, State, Zip Code fect Manager for Monitoring Firm Telephone eduled Start Date (10) 5/5/15 Scheduled 5/7/1 pupancy Status During Abatement (Check only one) [X] Facility Closed/Vacated During Entire Periot [] Abatement Performed Outside of Normal Formal Formal Performed Outside of Normal Formal Performance Performed Outside of Normal Formal Performance Performanc				1)	Name of	OSHA Monitor E.M.	S.L. Analytical				
	me of Monitoring Firm Hired by Building Owner (8) N/A set Address y, State, Zip Code ject Manager for Monitoring Firm Telephone seduled Start Date (10) Scheduled 5/5/15 supancy Status During Abatement (Check only one) [x] Facility Closed/Vacated During Entire Peri [] Abatement Performed Outside of Normal F					Street Ac		Stelton Road				
1 1	N/A set Address y, State, Zip Code ject Manager for Monitoring Firm Telephone eduled Start Date (10) 5/5/15 supancy Status During Abatement (Check only one) [x] Facility Closed/Vacated During Entire Peric [] Abatement Performed Outside of Normal F [] Other – Describe					City, Sta	te, Zip Code	itaway, New Jerse	av 088	5/1		
Scope of Work (Check all that apply)						[]		ent with Negative Pres	2.4. 0.0000			
[] >3 sf or ≥3 lf		г 1	Renova	tion		[]	Mini-Enclosure Glovebag Proc	8				
$\begin{bmatrix} X \end{bmatrix} \ge 160 \text{ sf or } \ge 260 \text{ lf}$		[x]	Demoli		36	[x]		l (*) and Non-Friable	Procedu	ıre		
				1					Abat	ement '	Гуре	
Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility (13)		Is Location Normally us Solely by ntenance/Cus Staff (12)	ed		Asb M (i.e., insu	Description estos-Cor laterial (A , thermal lation, su VAT, or er miscell	ntaining ACM) systems rfacing, or	Amount (Specify SF or LF)	R E M O V A L	R E P A I R	E N C A P S U L E	E N C L O S U R F
Exterior house		X		Asbes	tos sidin	<u> </u>		900 sf	X		3	Е
Exterior roof		X		_	tos tar			550 sf	X			
		3565										
Name of Registered Waste Hauler Guardian Contracting, Inc.		NJDEP Waste)223		Cubic Yar	ds of Was	T.R.R.F.	stered Landfill				
City, State Toms River, New Jersey			Dispos 5/8/1			City, Sta Tullyt	ate own, Pennsylvan	nia	10			
Completed by (Print or Type) Nicholas Fernicola	Title Proj	ect Manage	er	Signatu	Note to the state of the state	icho	l-te	9	Date 5/5/	2015		

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

f: <u>:</u>



Date of Notification (1) 05/05/15					Building ON PR			(2)			116	MAT	We .	1	44	: 4
Agencies Notified	Type Notification			Street Ad 7 GLE	ddress NWOOI) AVE	NUE, S	SUITE	412		1	A. I	- 34		7	. 62
DEP DOL	Initial Amended Amendment				te, Zip Co ORANO		07017					A		1		
DOH DCA	Emergency (justification) Cancellation	including			Contact Y EHRI	ΛΑN				Tele	ephone I	Numb	er			
				FACII	LITY INFO	DRMATI	ON			I.						
Name of Facility When	e Abatement is Taking	g Place (3)							of Facility (4) school (K-12)		5					
Street Address 27 SOUTH ROAD)							× o	Subchapter 8 Other (i.e. priste.)				ouild	lings,	home	es,
City (5) BLOOMINGDALE	E, NJ							Square 2000	e Feet	# of 2	Floors		BI	dg. A	ge	
County (6) PASSAIC COUN	TY			County (Code (7) JSE ONLY			Curren	nt Use (Prior IE	if beir	ng demo	olished)			
Name of Monitoring Fi	rm Hired by Building (Owner (8)		ASCM	No.				ement Contr			-In 1				
Street Address							476.00	Address	s OOVE COI	URT						
City, State, Zip Code						*		State, Zip	Code	701						
Project Manager for M	onitoring Firm			Telephor	ne No.		Teleph	hone No 668-90	,		Licens	e No.				
Start Date (10) 05/17/15		Schedule 05/17/1		npletion [Date (11)		Name	of OSH	A Monitor PROFES	SSIO	NALS					
Occupancy Status Du	17/15 05/ pancy Status During Abatement (Check Onl						J. C. Street, St.	Address	20 PAGE 2015							
➤ Facility Closed/V	acated During Entire F	Period of A	baten	nent			6 WI	HITE D	OVE CO	URT						
	rmed Outside of Norm						5883	State, Zip EWOC	Code DD, NJ 08	701						
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		Is	Locat	ion						7				Abate	emen	
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		Mair	ntena			thermal surfa				(S	mount Specify or LF)		Removal	Repair	Encapsulate	Enclosure
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EXTE		++					SIDING	3			00 SF		X			
								2								
Name of Registered W	/aste Hauler		1	JDEP W	/aste	Cubic	Yards		Name of R	egiste	red Lan	dfill				
NEWARK CARTIN			1	lauler ID 4509		of Wa			IESI	3.3.0		, TOM				
City, State NEWARK, NJ						Dispo 05/17	sal Date 7/15	•	City, State BETHLE	HEN	1 PA					
Completed by JOSEPH PERLST	EIN	Title OWN	ER			5	Signature	е				Date 05/0		5		

Check#2174		WOII				SESTOS ABAT C 8:60 and 5:16		i k	Eme	rgency	notif	icatio	п
Date of Notification (1)			1	Name	of Building	Owner/Operator (2	2) 1		APPROVED	1	(CENTRAL)		
05/	_04/_	15	1					Dont A	Arrinowed dealth & Sei		rice.		
Agencies Notified	Type Notifica				Esokern: Address	MIL.		HOW!	Callin a Sei	nur sen	ncos		
□ EPA	⊠ inlūai					ills Road	1	A STATE OF THE PARTY OF THE PAR	(signature)	14/	_		
Ø DOLWD	Amended		}		State, Zip C			Date:	4/19-	DA	41	111	
☑ DH\$S	Amendm	THE RESERVE AND LOCAL PROPERTY.	1				1	-	Tim	G: 17./	111	1.4	
☐ DCA (NJAC 5:23-8)	Emergen Justificati	icy (Including	1		of Contac				-				
(mane diad-o)	Cancellal					-			Telephone Nu	mber			
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Name of Familia (Mary)	A			FA	CILITY IN	FORMATION			,	. Ca .	12.		
Name of Facility Where A	Apatement is	Faking Place	(E)				1	Facility (
rivate house Street Address			-				Sci	rool (K-12)	(Other than K-1	Miky	- 9	3 20	115
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30 Old Short Hills Roa	ad		-				ho	mes, etc.)			-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	941	
City (5)							Squar	Feet	# of Flaces		ldg. A	₽g∉ .	
Millburn, NJ 07041									ASI	SES O	EN S	aNG	
County (6)				Coun	ly Code (7)	(STATE USE ONLY)	Curren	it Use (Pri	or-If being derm	गंडान्ड्य)	-		-
Essext			04500000						and care				
Name of Monitoring Firm	Hired by Build	ding Owner (9)	ASCM	No,	Name of Abstance	nt Can	ractor (9)					
			1			Gr Tech LLC							
Street Address			i			Street Address							
		*				576 Valley Rd #	797						
City, State, Zip Code			-			City, State, Zip Co							
Project Manager for Mon	Itoring Firm		Tele	phone	No	Wayne, NJ 0747 Telephone No.	'U		License No.				
			1000	in tout	110.	1 releptions inch			LICENER NO.				
			1			050 (40 4888							
Stert Date (10)		Scheduled C	nmole	inn On	to (11)	973-638-1777	f 16 - 1	f	01127				
Start Date (10) 05 / 05 /		Scheduled Co				Name of OSHA N	0.000 \$10,000	f	01127	~~~			
05/05/	15	05	06			Name of OSHA M Envirovision Co	0.000 \$10,000	ats,lnc	01127	~~~~			
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State of NJ

B & G proj. #:

2015-86

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

B & G proj. #:	2015-86		(F	ursuari	I TO NUME O	.00-7	and 12.120-1)	F Check	#71975	Fr.			_
Date of Notification	(1)	IIN	ame of Build	ing Owne	er/Operator (2)			e leave to the second					
10 15 1/10 15	1/115	11	Marie Mor				-	MAY - 8	2015		11		
Agencies Notified	Type Notification	on St	reet Address	3				101733					
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☐ DEP			ity, State, Zip				£	LICENSI	NG				
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⋉ DOH	Cancella	1	ame of Conta	act				Telephon	e Number				
☐ DCA	L Cancella	LIOIT	Marie Mo	ongioi									
(4)				FACI	LITY INFORM	ATION							
Name of facility wh	ere abatement is	taking pla	ice (3)					Type of Facility					
Marie Mongioi								1 =	I (K - 12) apter 8 (Ot	har th	an K.	12)	
Street Address									Private/Co			12)	
660 East Pas	saic Ave								Homes, et		RIC	ig. Ag	7.0
City (5)		I Cour	nty (6)			Cour	nty Code (7)	Square Feet	# of Floors		Dic	g. As	,,,
935436 V.200 1004						100000000000000000000000000000000000000	e use only)	Current Use (P	rior if being	dem	olishe	d)	
Bloomfield		Ess	7.05.03					residential					
Name of Monitoring	g Firm Hired by I	Bldg. Owne	er (8)		ASCM No.	.	Name of Abatement						
n/a 						_	B & G Restorat Street Address	ion, Inc.					
Street Address							105 Ryerson F	Road		720			
City, State, Zip Code	e			ŧ			City, State, Zip Code				-		
2.0)(2.0.0) = [Lincoln Park,	NJ 07035					
Project Manager for	Monitoring Firm	V .	Pho	ne Numb	er		Telephone Number (973)696-686	Q.	License	Numb	er		
							Name of OSHA Mon			3/0			
Scheduled Start Da	te (10)	Sched	I. Completion	Date (1	1)		B & G Restorat						
05/15/2015			16/2015				Street Address						
Occupancy Status I				7900 TV			105 Ryerson R		20				
Facility closed	d/vacated during erformed outside						City, State, Zip Code						
Describe: Other-Descril						-11	LincolnPark, N	J 07035					
Scope of Work (ch		()										+1	1
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>3 sf or >3 If		≥160 sf or	≥260 If				lini-enclosure		Non-fr	iable p	oroce	dure	
Location of			n normally u		/					R	R	E	E
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abated in fac		Yes	No	N/A	material	(ACIVI)		ĹF)		v	i	a p	L
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City, State Lincoln Park, N				Disposal Dis			City, State Tullytown,					Y	
Completed by (Prin	t or Type)	Title			Signature		Gordana Luna		Date	- 10.0	-		
Gordana Luna	l	Secreta	ry/Treasu	rer			Joraana Luna		05/05	0/201	15		

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nded dment #_ gency (inc cation) ellation	cludin		City, Tir Name	OO Route State, Zip (Inton Falls of Contact	Code s, NJ 07753	AS	DESTOR LICENSING Telephone Num	-IÚL (£		
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gency (inc cation) ellation	cludin		Tir Name Jol	nton Falls of Contac	t, NJ 07753	AC	Telephone Num	-	&		
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						Subchapter	 (Other than K-12 	2)			
						Other (i.e., p	private and commer	rcial b	uildin	gs,	
						homes, etc.)		3		
						Square Feet	# of Floors	В	ldg. A	ge	
						NA	1		Vari	es	
	F-100		Cou	nty Code (7)(STATE USE ONLY)	Current Use (Pr	ior if being demolis	shed)			
						Vacant	Fel	53			
Building O	wner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9))				
					Asbestos and	d Mold Service	es, Corp.				
					Street Address						
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Section Type Notification Type Notification Street Address Stree		lusc	Enclosure								
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Date of Notification (1) 05/01/2015	Name of Building Owner/Operator (2) Stone Industries Inc.														
Agencies Notified	Type Notification		S	treet A						M.EV					
EPA DEP DOL	Initial Amended Amendment		С	ity, Sta	te, Zip Co on, NJ 0	de			Tr.	ر ان ان ان ان ان ان ان ان ان ان ان ان ان			. A		
▼ DOH DCA	Emergency justification) Cancellation		108		Contact Gerver	ns			The state of	Telep	ohone N	lumber			
Nome of Facility VAIL	AL	51 (6)		FACI	LITY INFO	RMAT	ION								
Name of Facility Where North Building	Abatement is Takin	g Place (3)						Type of Facility (4)							
Street Address								School (K-12) Subchapter 8 (Other than K-12)							
Valley View Road 8	& Kattak Parkwa	ay						Other (i.e. private & commercial etc.)							
City (5) Haledon									uare Feet # of Floors Bldg. Ag 5,000 3 70					Age	
County (6) Passaic					Code (7) ISE ONLY)				nt Use (Prior mercial -			lished)			
Name of Monitoring Firm	n Hired by Building	Owner (8)		ASCM	No.				ement Cont		9)				
Street Address						Street	Addres	s			22,-1120				
City, State, Zip Code							Valle State, Zi	y Road, S	Suite K						
only, onato, zip oode									ew Jersey	07470	0				
Project Manager for Mor	nitoring Firm		Te	elephor	ne No.			lephone No. License No. (73) 928-5040 00874							
Start Date (10) 05/10/2015		Scheduled 06/30/20		oletion [Date (11)	61	100000000000000000000000000000000000000	me of OSHA Monitor ky Contracting, LLC							
Occupancy Status Durin	ng Abatement (Chec	k Only One)					Street	reet Address							
Facility Closed/Vac	cated During Entire	Period of Aba	ateme	ent				Valley Road, Suite K tate, Zip Code							
Abatement Perform Other – Describe:	ned Outside of Norr	nal Facility H	ours			_			p Code ew Jersey	0747	0				
Scope of Work (Check A	All That Apply)						,	_							
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		provinces.	novatio				× × ×	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure							
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Name of Registered Wa	NJDEP Waste Cubic			Cubic Yards Name of Registered Landfill											
Service Transport G	Hauler ID No. of Waste 40				Minerva Enterprises, LLC										
City, State New Castle, Delawa	Disposal Date TBD					Date City, State Waynesburg, Ohio									
Completed by	Signature								Date						
Predrag Sarcev	esident				05/04/0045										

NORTH BUILDING

		NOKIH BUILL	סאווע		
Material		Location	ACM, Non-ACM or Assumed ACM	Estimated Quantity of ACM or Assumed ACM	Notes/Comments
		ACM and/or Assumed AC			
Pipe insulation (observed)	PI	Basement - Tank Room	ACM	100LF	
70 40 40 11 55511	PI	. Crawl Spaces	ACM	700LF	-
	PI	1st Floor - Northern Section	ACM	350LF	OTTITITITI).
	PI	1st Floor - Center Section Ceiling Plenum	ACM	200LF	
	PI	2nd Floor - Mechanical Room	ACM	25LF	
Pipe insulation (assumed concealed)	PI	Throughout the Building	ACM	1,500LF	WALL CAVITIES/PIPE- CHASES, CEILING.PLENUMS AND CRAWL SPACES – THROUGHOUT THE BUILDING
Pipe insulation debris	DEB	Basement - Tank Room	ACM	400SF	
**	DEB	Crawl Spaces	ACM	600SF	
	DEB	1st Floor - Kitchen	ACM	20SF	
Grey window/window lintel caulk (old)	OWC, WLCK	Perimeter Walls	ACM	1,700LF	***********
Door lintel caulk (old)	DLCK	Perimeter Walls	ACM	15LF	Apprex. 105 masonry window openings, 3 masonry door openings.
Fan flexible connector with black mastic	FLEX-2	2nd Floor - Mechanical Room	ACM	, 5SF	
Elevator switch panel Transite	EPT	2nd Floor - Mechanical Room	ACM	5SF	
Elevator brake pads	EBP	2nd Floor - Mechanical Room	ACM	2SF	
Electrical panel side backing Transite sheet	EBS	Selected Building Locations	ACM	10SF	
12-inch off-white floor tile and mastic	FT-4	81	Non-ACM		
12-inch tan floor tile and mastic	FT-5	1st Floor - Small storage/office in the Kitchen	Non-ACM	70SF	
9-inch light green floor tile and mastic	FT-6		ACM		
12-inch alternatively installed mottled tan and red floor tile and mastic	FT-10	2nd Floor - North End Room across Staircase	ACM	. 80SF	

NOTE:
1. THIS SKETCH IS PROVIDED TO SHOW APPROXIMATE LOCATIONS OF ASBESTOS CONTAINING MATERIALS. THE ACTUAL LAYOUT OF THE BUILDING MAY BE SLIGHTLY DIFFERENT THAN SHOWN. ALSO, THE SKETCH IS NOT TO SCALE, AND THEREFORE, THE PLAN SHALL NOT BE USED FOR ANY OTHER PURPOSES.

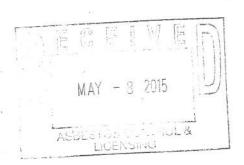
^{2.} THE HEATING, HOT AND COLD WATER PIPES ON THE UPPER FLOORS ARE MOSTLY CONCEALED WITHIN WALL, CEILING AND FLOOR CAVITIES, THE CONCEALED PIPES ARE MOST LIKELY INSULATED WITH AGM.

OK 1584

Date of Notification (1) 05/01/2015	Name of Building Owner/Operator (2) Stone Industries Inc.								-								
Agencies Notified	Type Notification		1	treet Ac	idress entral Av	onuc			Ā	SEES			75.1	- ,_1			
X EPA X DEP X DOL	Initial Amended		С	ity, Stat	te, Zip Cod	de					1,75 to 1		*****	. &		Į.	
▼ DOL	Amendmen Emergency	(including	200	in the second	on, NJ 07	7508				Tele	nhone N	(l b		1200			
DCA DCA	justification) Cancellation		1 327	⁄lr. Bill	Gerven		<i>9</i> ,000000000000000000000000000000000000				-,						
Name of Facility Where	Abatement is Takir	ng Place (3)		FACIL	LITY INFO	RMA'	TION	Туре	of Facility (4)				5/21			
East Building Street Address								School (K-12) Subchapter 8 (Other than K-12)									
Valley View Road &	k Kattak Parkw	ay						×	Other (i.e. p				build	ings,	home	es,	
City (5) Haledon									e Feet	# of	Floors		BI 70	dg. A	ge		
County (6) Passaic					Code (7)			Current Use (Prior if being demolished) Commercial - Vacant									
Name of Monitoring Firm	Hired by Building	Owner (8)	1						ement Cor	ntractor	200	1920					
Street Address							Street	Addres	s	2000 20							
City, State, Zip Code									y Road, p Code	Suite	K					- 17	
Project Manager for Mor	aitorina Eirm		T =	olonbor	no Nie		1970		w Jerse	y 0747		- 11-					
	intolling Fillin			Telephone No.				Telephone No. (973) 928-5040 License No. 00874									
Start Date (10) 05/10/2015		Scheduled 06/30/20		oletion [Date (11)			Name of OSHA Monitor Sky Contracting, LLC									
Occupancy Status Durin				6			100000000000000000000000000000000000000	reet Address 385 Valley Road, Suite K									
Facility Closed/Vac Abatement Perform Other – Describe:	ed Outside of Nor	Period of Aba mal Facility H	iteme ours	nt			City, S	tate, Zi	p Code								
Scope of Work (Check A		111-111-1					Way	ne, New Jersey 07470									
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		Is Lo	cation	n					Excliptor	<u> </u>	2 1401111	I		Abate	ment		
Location Asbestos-Containing		Used S		by	Ashest		escription		(ACM)	Δ	mount	ŀ		Ту			
TO BE AB In Facil	ATED	Mainte Custod	ial Sta			therm	al system acing, VA	s insula		(8	pecify or LF)		Removal	Repair	Encap	End	
(13)			12) No	N/A			miscellar				J. L.)		noval	pair	Encapsulate	Enclosure	
See atta	ched		х	100000			Various	3		SF	& LF		x				
	*																
Name of Registered Was	NI II						Ne	Da =!-!	wa al 1	1511							
Service Transport G	На	NJDEP Waste Hauler ID No. of Waste 20990 40				Waste Minorya Enterprises LLC											
City, State New Castle, Delaware					Disposal Date City, State TBD Waynesburg, Ohio												
Completed by Title							Signatur	9				Date					
Predrag Sarcev Vice Pre										-	05/01/2015						

EAST BUILDING

Material		Lecation	ACM or Assumed ACM	Estimated Quantity of ACM or Assumed ACM	Notes/Comments
		ACM and/or Assumed AC	M		
Mudpack joint associated with fiberglass insulated pipe (observed)	MPJ	1st Floor - Corridor	ACM	60LF	
iner diess wanten bibe (observed)	MPJ	Besement - Heater Room	ACM	50LF	
e insulation (assumed concealed) _		Besement - Crawl Spaces	Assumed ACM	1,700LF	WALL CAVITIES/PIPE
el .		1st Floor	Assumed ACM	800LF	CHASES, CEILING PLENUMS AND CRAWL SPACES – THROUGHOUT THE
	-	2nd Floor	Assumed ACM	500LF	BUILDING
Tank insulation	-	Basement - Heater Room	Assumed ACM	100SF	
Metal Counter Caulking	CCF	Mechanical Room - Roof	ACM	60LF	****
Roof flashing with mestic	RF	Roof	ACM	1,000SF	
Louvre Caulking	LC	Mechanical Room - Roof	ACM	20LF	
Old window culking on wood windows	owc	Perimeter Walls	ACM	1,600LF	Approximalatly 80 masony window openings.



						tor (2)	1000000				5 1 7		- 1	
		Na	Name of Building Owner/Operator (2)											
of Notification (1)		S	tone I	ndustr	ies Inc.			IV.	AT = 3	4210	11-1			
01/2015		S	reet Ad	dress	902									
ncies Notified Ty	pe Notification	4	00 Ce	entral A	Avenue					and the second second	.i			
	Initial	10	ity Stat	te, Zip C	Code			ASSL	Billion 1	_ 1.1 LL &				
EPA DEP	Amended	ŀ	Haledo	n, NJ	07508		1	Ad least to	LILE	none Number		-	\neg	
DOL	Amendment # Emergency (including			Contac					lelepr	TOTTE I VALITIE				
L	justification)		Name of	Gerv	ens									
DOH DCA	Cancellation		VII. DII	1 0011	FORMATIO	N								
100000			FACI	LITYIN	IFUNIMATIO		Type of	Facility (4)					
me of Facility Where Aba	atement is Taking Place	€ (3)					Sc	hool (K-	12)	V 12\				
est Building						_	Su	bchapte	r 8 (Other	than K-12) commercial b	uildings,	hom	es,	
at Address							⊠ Ot et							-
alley View Road & F	Kattak Parkway						Square		# of F	loors	Bldg.	Age		
							27 00	0	3		70			
ty (5)							Curron	tilse (P	rior if bein	g demolished)			
laledon			County	y Code	(7)		Comi	mercial	- Vacar	nt				
ounty (6)			(STATI	E USE O	NĹY)				ontractor					1
Passaic	- W. II - Own	or (8)	ASC	CM No.		Name	of Abat	ement C	I I C	(0)				
lame of Monitoring Firm	Hired by Building Owne	51 (0)						acting,						
TBD						Stree	t Addres	S	4 Cuito	K				
Street Address									d, Suite	IX.				
						City,	State, Z	ip Code	074	70				
City, State, Zip Code						Wa	yne, N	ew Jer	sey 074	70				
Jily, State, Zip Code					T-		phone N			License No	•			
	nitoring Firm		Tele	phone N	١٥	(97	3) 928	-5040		00874				
- for Mor														
Project Manager for Mor				520		11-	on of OS	HA Mon	itor					
	So	cheduled (Complet	ion Date	e (11)	Nan	ne of OS	HA Mon	itor , LLC					
Start Date (10)	So	cheduled (Complet 15	ion Date	e (11)	Nan Sk	ne of OS y Cont	HA Mon racting	itor , LLC				<u> 100</u>	
Start Date (10)	So	6/30/201	Complet 15	ion Date	e (11)	Nan Sk	ne of OS y Cont	HA Mon racting	, LLC	e K				
Start Date (10) 05/10/2015	ng Abatement (Check C	6/30/201 Only One)	15		e (11)	Nan Sk Stre	ne of OS y Cont eet Addre 85 Val	HA Mon racting ess ley Roa	, LLC ad, Suite	e K				
Start Date (10) 05/10/2015 Occupancy Status Duri	ng Abatement (Check C	6/30/201 Only One)	15 atement		e (11)	Nan Sk Stre	ne of OS y Cont eet Addre 85 Val	HA Mon racting ess ley Roa	ad, Suite					
Start Date (10) 05/10/2015 Occupancy Status Duri	ng Abatement (Check Concated During Entire Permed Outside of Normal	6/30/201 Only One)	15 atement		e (11)	Nan Sk Stre	ne of OS y Cont eet Addre 85 Val	HA Mon racting ess ley Roa	, LLC ad, Suite					
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WEST BUILDING

		AAEST BOILD	IIAG		
Meterial		Location	Survey Results	Estimated Quantity of ACM or Assumed ACM	Notes/Comments
N. C.		ACM and/or Assumed AC	M		
Pipe insulation (observed & concealed)	PI	Basement and Crawl Spaces	ACM	1,700LF	
Pipe insulation (concealed)	Pi	1st Floor	ACM	800LF	WALL CAVITIES/PIPE CHASES, CEILING PLENUMS
-0 Like -0 -0 -0 -0 -0 -0 -0 -0 -0 -0 -0 -0 -0	PI	2nd Floor	ACM	. 500LF	AND CRAWL SPACES – THROUGHOUT THE BUILDING
12" square beige floor tile with mastic	FT-1	1410-15	Non-ACM		
9" square red floor tile with mastic	FT-2	1st and 2nd Floor	ACM	12,000SF	
Parapet tar around caulking	J-PT	Roof	ACM	150SF	****
White/Tan window caulking	J-WC		ACM		
Old window caulk remnants	OWCK WC	Perimeter Walls	ACM	3,200 LF	-0-0-0-0-0-0-0-0-
White door caulking	J-DC	Roof	ACM	20LF	Approximalely 60 masonry window openings. One masonry door earning.
White vent caulking	J-VC	Roof	ACM	20LF	VENTS

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

CR# 2806

	<u> </u>											
Date of Notification (1) 5/5/14			owner / Operator									
Agencies Notified Type Notification			Addres	desar party								
	10.000				Dead		E I W E	2 173	M			
				-	Road		N 1 1		1			
☐ DEP ☐ Initial				Zip C								
□ DOL □ Amended	В	orde	ntow	n Ne	w Jersey 0850	5						
			of Con			WAY	- 12 2010	Tele	epho	ne N	umbe	er
	12.00		BAYI			PAT L.		4	1-1		-	3374
					ORMATION							
N			11111	HAL		L. (4)550000		- 2	-			
Name of Facility Where Abatement is Taking	Place (3)				Type of Facilit		ICENSING					
Bordentown Central Office					School (K							
Street Address					Subchapt							
195 Crosswicks Road					Other (i.e	. private & c	ommercial buil	ldings,	hom	es, e	tc.)	
					Square Feet	# of F			. Age			
City (5) County (6)	Cour	nty Co	ode (7	7)	10350		2					
Bordentown Burlington	1				Current Use (Prior if being	demolished)					
					COMMUNIC							
Name of Monitoring Firm Hired by Building Ov	upor (0)		ASCI	M No.			ractor (Q)					
USA ENVIRONMENTAL MANAGEMENT			ASCI	VI INO.	BRISTOL EI		(419-1919)					
Street Address			Street Addres	S								
8436 ENTERPRISE AVENUE					1123 BEAVE	ER STREE	T					
City, State & Zip Code					City, State & Z	Zip Code						
PHILADELPHIA, PA 19153					BRISTOL, P							
Project Manager for Monitoring Firm	Teleph	one N	dumb	er	Telephone Nu		Licens	se Num	her			
MARK JENKINS	215-3			01	215-788-604		2.00.110		0050	9		
The state of the s			1000							_		
Scheduled Start Date (10) Scheduled Co	ompletion 5/29/		(11)		Name of OSH BRISTOL EI		ENTAL INC					
Occupancy Status During Abatement (Check	only one))			Street Addres	S						
Facility Closed/Vacated During Entire			temen	t	1123 BEAVE	ER STREE	Т					
Abatement Performed Outside of Nor					City, State & Z							
	mai moui	10	uiii to	Opini	(5.5)							
0100 1 111 1100 1 1111					BRISTOL, P	A 19007						
Facility Occupied During Abatement												
Scope of Work (Check all that apply)						-				D		
527-25							containment wit	th Neg	ative	Pres	sure	Ď.
≥3 sf or ≥3 lf	\bowtie	Rend	vation	า			Enclosure					
≥160 sf ≥260 lf		Dem	olition			Glove	Bag Procedur	res				
						☐ Non-E	Exempted and	Non-Fr	riable	Pro	cedu	re
Location of	le L	ocatio	n		Description		Amour					
Asbestos-Containing	Norma				Asbestos-Conf		(Specif					7
Material (ACM)		lely by			Material (AC		SF or L				Ш	_
TO BE ABATED	Mainte				(i.e., thermal sy		0, 0, 2	. ,	Re	Z	nca	E
in Facility	Custo			i	nsulation, surfac				ğ	Repair	sde	ds
(13)		(12)	tan:		or other miscella				Removal	air.	Encapsulate	Enclsoure
(13)	-	1	N/A		or other misseal	arioodoj			12		te	O
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BASEMENT EQUIPMENT ROOM				PIP	E FITTING INS					무	⊢	H
BASEMENT EQUIPMENT ROOM					DUCT INSULA	ATION	800 S	F	\boxtimes	Ш	Ш	
BASEMENT EQUIPMENT ROOM					VAT/MAS	TIC	400 S	F	\boxtimes			
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Name of Registered Waste Hauler					Cubic Yards	Name of R	egistered Land	11111				
		100000000000000000000000000000000000000	ıler ID	No.	of Waste		LANDELL					
SERVICE TRANSPORT GROUP, INC.		209	90		85		LANDFILL					
City, State					Disposal Date	City, State						
NEW CASTLE, DE 19720					TBD		BURG, OH 4					
Completed By (Print or Type)		Title)		Signature Patrick 1. De Caro / Je 5/5/15							
PATRICK T. DeCARO	D. T.	0 /11 /9	Klin 1-1	e 15	5/5/1	5						
n e		ranich	S VIII	4/								

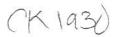
State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT:

(Pursuant to NJAC 8:60 and 5:16)

S	Date of Notification (1)		Name of Building Owner/Operator (2)													
Agencies Notified □ EPA □ Initial □ DOLVID □ Amended □ PA □ Initial □ DOLVID □ Cancellation □ Cancellation □ Cancellation □ Cancellation □ Cancellation □ Cancellation □ Cancellation □ Cancellation □ Cancellation □ Cancellation □ Cancellation □ Cancellation □ Cancellation □ PACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) ■ School (K-12) □ Scho	5/	5 /	15			State of NJ Dept of Treasury-DPMC										
DOLAND	Agencies Notified	Type Notifi	cation	1/-		Street	Address					-015		11-	711	
DISS DCA Emergency (including justification) Cancellation Facility (Where Abstement is Taking Place (3) Name of Contact Georgette Bunch School (K-12) Scho						33	West Sta	te S	t						1	
DAS Caregory (including Iustification) Cancellation Caregory (including Iustification) Cancellation Caregory (including Iustification) Caregory (including	The second secon					City, S	State, Zip (Code		ASS	481001				1	
Name of Contact Second S			-			25.0			25				. Š		11	
Cancellation Georgette Bunch FACILITY INFORMATION				cluding	3	100000			20			-	-			
Name of Facility Where Abatement is Taking Place (3)	(NJAC 5:23-8)	120000000	200						h		i elepnone N	iumbe	Γ			
Name of Facility (4) Street Address 20 West State St Street Address County (6) County (6) County (7) County (7) County (8) Count								2000			1					
School (K-12) Street Address Street Address Square Feet For Floors Bidg. Age Trenton County (6) MERCER Monitoring Firm Hired by Building Owner (8) ASCM No. USA Env Manangement Inc Street Address Stre	Name of Facility Where /	Abatement is	Taking	Place	(3)					Type of Facility	(4)					
Street Address 2 20 West State St Subchapter 6 (Other tan K. T.) Other (i.e., private and commercial buildings, homes, etc.)					(-)											
20 West State St Stores (Fig. 6) Courty (State St) Square Feet # of Floors Bidg. Age County (State St) County		9				- 7 - 7						(-12)				
County (6) County (7) County Code (7) STATE USE ONLY) Current Use (Prior if being demolished) MERCER										Other (i.e., p	rivate and com		al bu	ilding	JS,	
County (6)	City (5)									Square Feet	# of Floors		Blo	dg. A	ge	
MERCER Name of Monitoring Firm Hired by Building Owner (8) USA Env Manangement Inc Street Address 344 West State St City, State, Zip Code Trenton, NJ 08618 Project Manager for Monitoring Firm William Weisgarber Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Telephone No. 609-656-8101 Start Date (10) 5 / 15 / 15 5 / 17 / 15 RRISTOL ENVIRONMENTAL, INC. Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Telephone No. 215-788-6040 00509 Start Date (10) 5 / 15 / 15 5 / 17 / 15 RRISTOL ENVIRONMENTAL, INC. Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Soche of Work (Check all that apply) Asbestos-Containing Material (ACM) ID BE ABATER Renovation Demolition Renovation Demolition Abatement Type Asbestos-Containing Material (ACM) (Ital) Normally Used Solely by Maintenance/ Cutsfoldial Staff? (Ital) Normally Surfacing, NaT. or Special Candilli Renovation Description of Abatement Type Asbestos-Containing Material (ACM) (Ital) Normally Surfacing, NaT. or Special Staff? Surfacing, Nat. or	Trenton															
MERCER Name of Monitoring Firm Hired by Building Owner (8) USA Env Manangement Inc Street Address 344 West State St City, State, Zip Code Trenton, NJ 08618 Project Manager for Monitoring Firm Froject Manager for Monitoring Firm Froject Manager for Monitoring Firm Start Date (10) 5 / 15	County (6)					Cour	tv Code (7)(STA	TE USE ONLY)	Current Use (Pri	ior if being den	nolishe	(h			
USA Env Manangement Inc BRISTOL ENVIRONMENTAL, INC.							, (,,,,,,,	12 002 011217		ior ii boirig dori	TOTION	Juj			
USA Env Manangement Inc BRISTOL ENVIRONMENTAL, INC.	Name of Monitoring Firm	Hired by Bu	ildina C	Owner	(8)	ASCM	No	Na	me of Abateme	ent Contractor (9)						
Street Address 344 West State St 1123 BEAVER STREET	570		3		·-/		3.55	1								
344 West State St										· · · · · · · · · · · · · · · · · · ·				-		
City, State, Zip Code Trenton, NJ 08618	344 West State St		3					100		STREET						
Trenton, NJ 08618							4	1/2	THE SECTION ASSESSMENT	AND ASSESSMENT OF THE PROPERTY						
Project Manager for Monitoring Firm William Weisgarber								0.5	300 St. 1500							
William Weisgarber 609-656-8101 215-788-6040 00509 Start Date (10)	Ta .	itorina Firm			Tal		Ma			19007	Tr					
Start Date (10) 5).				
Street Address Str											00509					
Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement AM-5:00 PM PM-1:30 AM PM-		_15_						100555			L, INC.					
Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement AM-5:00 PM	Occupancy Status During	Abatement	(Check	c only o	one)			Stre	eet Address							
Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: AM-5:00PM/ PM-1:30AM Scope of Work (Check all that apply) □ 3 sf or ≥3 lf □ ≥160 sf or ≥260 lf Location of Abatement (ACM) IN Facility (13) 1st Floor corridor Ist Floor corridor Normally (1st Floor corridor) Name of Registered Waste Hauler BRISTOL ENVIRONMENTAL, INC. Abatement Performed Outside of Normal Facility Hours - Describe BRISTOL, PA 19007 City, State BRISTOL, PA 19007 City, State BRISTOL, PA 19007 Completed By (Print or Type) Title City, State BRISTOL, PA 19007 City, State BRISTOL PA 19007 City, State BRISTOL, PA 19007 City, State BRISTOL, PA 19007 City, State BRISTOL, PA 19007 City, State BRISTOL, PA 19007 City, State BRISTOL, PA 19007 Title City, State BRISTOL, PA 19007 City, State BRISTOL, PA 19007 Title City, State BRISTOL, PA 19007 City, State BRISTOL, PA 19007 Title City, State BRISTOL, PA 19007						ement		No.		STREET						
Time of Abatement: AM-5:00PM PM-1:30AM BRISTOL, PA 19007	Abatement Performed						cribe									
Scope of Work (Check all that apply) □ ≥3 sf or ≥3 if □ Demolition □ Demolition □ Glovebag Procedure □ Non-Exempted (*) and Non-Friable Procedure □ Non-Ex	Time of Abatement:	AM- <u>5:</u>	00PM/		PM-1	:30AM			10일 시작한 10일 개최 시간							
Sality Security	Scope of Work (Check al	- 7AM	-11:	301	DAN				MOTOL, IA	13007				-		
Sality Sality	Coope of Front Concort at	r that apply)							☐ Full Cont	ainment with Neo	ative Pressure	9				
Some of Registered Waste Hauler BRISTOL ENVIRONMENTAL, INC. Some of Registered Waste Hauler BRISTOL, PA 19007 Completed By (Print or Type) Title Signature Completed By (Print or Type) Title Signature Completed By (Print or Type) Title Signature Completed By (Print or Type) Title Completed By (Print or									☐ Mini-Enc	losure						
Secription of Asbestos-Containing Material (ACM) Secription of Asbestos-Containing Material (ACM) Used Solely by Maintenance/Custodial Staff? (12) Yes No N/A N/A Floor corridor Secription of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Secription of Asbestos Containing Material (ACM) (Specify SF or LF) Secription of Asbestos Containing Material (ACM) (Specify SF or LF) Secription of Asbestos Containing Material (ACM) (Specify SF or LF) Secription of Asbestos Containing Material (ACM) (Specify SF or LF) Secription of Asbestos Containing Material (ACM) (Specify SF or LF) Secription of Asbestos Containing Material (ACM) (Acmount (Specify SF or LF) Secription of Asbestos Containing Material (ACM) (Acmount (Specify SF or LF) Secription of Asbestos Containing Material (ACM) (Acmount (Specify SF or LF) Secription of Asbestos Containing Material (ACM) (Acmount (Specify SF or LF) Secription of Asbestos Containing Material (ACM) (Acmount (Specify SF or LF) Secription of Asbestos Containing Material (ACM) (Acmount (Specify SF or LF) Secription of Asbestos Containing Material (ACM) (Acmount (Specify SF or LF) Secription of Asbestos Containing Material (ACM) (Acmount (Specify SF or LF) Secription of Asbestos Containing Material (ACM) (Acmount (Specify SF or LF) Secription of Asbestos Containing Material (ACM) (Acmount (Specify SF or LF) Secription of Asbestos Containing Material (ACM) (Acmount (Specify SF or LF) Secription of Asbestos Containing Material (ACM) (Acmount (Specify SF or LF) Secription of Asbestos Containing Material (ACM) (Acmount (Specify SF or LF) Secription of Asbestos Containing Material (ACM) (Acmount (Specify SF or LF) Secription of Asbestos Containing Material (ACM) (Acmount (Specify SF or LF) Secription of Asbestos Containing Material (ACM) (Acmount (Specify SF or LF) Secription of Asbestos Containing Material (ACM) (Acmount (Specify SF or LF) Secription of Asbestos Containing Ma	∠ ≥ 160 st or ≥260 lf			∐ De	moliti	on					n-Frighle Dress	adura				
Location of Asbestos-Containing Material (ACM) Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) 1st Floor corridor 2,474 SF S D D D D D D D D D D D D D D D D D				le	Loca	tion			M MOII-EXE	inpled () allu NO	II-I HADIE PIOO	eduite	Λ-	otor		
Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) 1st Floor corridor 1st Floor corridor Name of Registered Waste Hauler BRISTOL ENVIRONMENTAL, INC. City, State BRISTOL, PA 19007 Completed By (Print or Type) I Sed Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Floor tile and mastic 2,474 SF Disposal Date City, State MORRISVILLE, PA 19067	Location	of		1	Norma	ally			Description of	f		-	000000			-
Surfacing, VAT, or other miscellaneous SF or LF SF or LF ST of LF S			M)	Use	d Sol	ely by	Asbe	stos			Amount		Ren	Rep	Enc	Enc
Surfacing, VAT, or other miscellaneous SF or LF S				No. 10 (2005)				e., the	rmal systems	nsulation,			vou	oair	Sap	clos
1st Floor corridor		ty		Ous							SF or LF)		a	200	sula	иге
Name of Registered Waste Hauler BRISTOL ENVIRONMENTAL, INC. Disposal Date City, State BRISTOL, PA 19007 Title Signature Date City City Date City Date City Ci			2001	Yes	No	N/A				540)					te	
Name of Registered Waste Hauler BRISTOL ENVIRONMENTAL, INC. City, State BRISTOL, PA 19007 Completed By (Print or Type) Name of Registered Waste Hauler NJDEP Waste Hauler ID No. 18706 Cubic Yards of Waste Waste Cubic Yards of Waste Cubic Yards of Waste Cubic Yards of Waste Cubic Yards of Waste City, State Disposal Date City, State MORRISVILLE, PA 19067	1 st Floor corridor						Floor ti	le ar	nd mastic		2,474 SF		\boxtimes			
Name of Registered Waste Hauler BRISTOL ENVIRONMENTAL, INC. City, State BRISTOL, PA 19007 Completed By (Print or Type) NAME of Registered Landfill Hauler ID No. 18706 Cubic Yards of Waste Waste Cubic Yards of Waste Cubic Yards of Waste Cubic Yards of Waste Cubic Yards of Waste City, State MORRISVILLE, PA 19067 Completed By (Print or Type) Title Date Date																
Name of Registered Waste Hauler BRISTOL ENVIRONMENTAL, INC. NJDEP Waste Hauler ID No. 18706 Disposal Date City, State BRISTOL, PA 19007 Completed By (Print or Type) Title NJDEP Waste Hauler ID No. 18706 Disposal Date Signature Cubic Yards of Waste G.R.O.W.S. NORTH LANDFILL City, State MORRISVILLE, PA 19067																
BRISTOL ENVIRONMENTAL, INC. Hauler ID No. 18706 City, State BRISTOL, PA 19007 Completed By (Print or Type) Title Hauler ID No. 18706 Disposal Date City, State MORRISVILLE, PA 19067 Completed By (Print or Type) Date	(2)						-									
City, State BRISTOL, PA 19007 Completed By (Print or Type) Title 18706 City, State Disposal Date City, State MORRISVILLE, PA 19067 Date Date	Name of Registered Was	te Hauler			1030			552,353,55		Name of Regis	tered Landfill					
BRISTOL, PA 19007 Completed By (Print or Type) Title Signature Date Date	BRISTOL ENVIRON	MENTAL, I	INC.		H			Was	ste	G.R.O.W.S	. NORTH LA	NDFI	LL			
Completed By (Print or Type) Title Signature								Disp	oosal Date	City, State						
	BRISTOL, PA 19007	7								MORRISVII	LLE, PA 190	67				
	Completed By (Print or Ty	ype)	Title				- 100	_	Signature	2 2	/	Date	-1	,		-
			Es	stima	tor				1 - 1 -	Scalein	fil	5	1.5	//	5	

ASB-41 B 5/5038 MAY 11 B 5/5038

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



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Date of Notification (1)		Name of Building Owner/Operator (2) NY/C LONG - STOTO CODITO									
Agencies Notified Type Notification		Street /	Address 36-42	API	BALST.	15 15	11 11	Ŵ.	1.5		
DEP Initial Amended Amendment:	¥	City, St	ato Zin Codo		50703	YAM		115			_
DOH Emergency (of Contact	1 1 /0	3 0 100		ephone Nun		Ţ.	-	<u></u>
DCA Cancellation		Eric F	Plackis						نب		
		FAC	ILITY INFORM	ATION	1		rich manne			1	
Name of Facility Where Abatement is Taking	Place (3)		×		Type of Facility School (K-				-		
Street Address 132 East 2nd F	X /P N LI	0 ,			Subchapte	er 8 (Othe	er than K-12 commercia) al bui	dings	, hom	es,
City (5)	NUDVI				etc.) Square Feet	# of	Floors	T	Bldg. /	ine	•
hoselle					2948		2	Ι.	87	·go	
County (6)		County (STATE	Code (7) USE ONLY)		Current Use (Pr		ng demolish	ed)		46	
Name of Monitoring Firm Hired by Building C	wner (8)	ASC	M No.	Name	of Abatement Co		70)				3
			W 140.	1	k Industries In		(3)				
Street Address				100	t Address Box 915						
City, State, Zip Code					State, Zip Code						
					k, New Jersey	08723					
Project Manager for Monitoring Firm	0	Telepho	one No.		hone No.		License No).			
Start Date (10)	Scheduled C	`amalatian	Deta (44)		(732)899-7499 01196 Name of OSHA Monitor						
216/17	5/8	115	Date (11)	Name	O OSMA MONITO						
Occupancy Status During Abatement (Check	Only One)	-		Street	t Address		in p				1
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other – Describe:	eriod of Abat al Facility Ho	ement urs		City, S	State, Zip Code					10	
Scope of Work (Check All That Apply)											2
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Section 1997	ovation olition			Full Containn Mini-Enclosu Glovebag Pro Non-Exempte	re ocedure				D	
	la tas	- 47				T () and	140111 Habi			ement	
Location of	Is Loc	nally		Description	n of					ре	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used So Mainter Custodia (1:	nance/ al Staff?	Asbestos C (i.e. then su	ontaining I	Material (ACM) as insulation, AT, or	(SI	nount pecify or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes N	o N/A					*	_		ite	0
·		IX	pipe ins	sulation	P/\	100	14	R			
											ŧ
Name of Registered Waste Hauler		NJDEP V Hauler ID		bic Yards Naste		100000	ed Landfill				2
Brick Industries Inc.		21602		4	GROV						
City, State Brick, New Jersey			Dis	posal Date	City, Sta	ite					
Completed by	Title		10	Signatur			Dat	e	Victoria de la companione de la companione de la companione de la companione de la companione de la companione		
Eric Plackis	Preside	nt			710			5	151	1	

OK 20171

Date of Notification (1) 05/05/2015	Name of Building Owner/Operator (2) OCEAN COUNTY COLLEGE														
Agencies Notified Type Notification	1	3750	treet Ac	ddress LEGE D	RIVE			L.	ASBESTOS C.		: &				
EPA Initial Amended Amendment #				te, Zip Coo RIVER,		754	YG	1	LICENSII						
□ Emergency (ii □ justification) □ Cancellation	ncluding	10000		Contact BRUNO	1 16				Telephone Nur	nhar		-			
			FACIL	ITY INFO	RMATIC	N-	3.		2 1911 2 10		(0.00	, 16	, S		
Name of Facility Where Abatement is Taking OCEAN COUNTY COLLEGE - INS		NAL	BUIL	DING	5 1 76	Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12)									
Street Address 1 COLLEGE DRIVE		14	*			- , -	T o		ivate & commerci	al build			es,		
City (5) TOMS RIVER		So ¹		ir 9	H 7 8		Squar	e Feet	# of Floors	В	ldg. A	ge			
County (6) OCEAN				Code (7) ISE ONLY)		_	Curre	ní Use (Prio	r if being demolish	ned)					
Name of Monitoring Firm Hired by Building O WHITMAN COMPANIES	wner (8)		ASCM	No.	6 S Vs			tement Con	ractor (9) CONTRACTIN	G, IN	C.		ā a		
Street Address 7 PLEASANT HILL ROAD							Addres	s AND AVE	ENUE				8		
City, State, Zip Code CRANBURY, NJ 08512		12	1.6					p Code NJ 0751	2	* *		2.5	# ₃		
Project Manager for Monitoring Firm KEVIN LOVELY		200	elephor 732) 3	ne No. 190-5858	3		one No 956-8		License N 00494	0.					
	Scheduled (letion D	Date (11)	1 12 E			A Monitor (9) ABOV	Æ.						
Occupancy Status During Abatement (Check	Only One)	the second				Street	Addres	ss		100	-				
Facility Closed/Vacated During Entire Polyabete Abatement Performed Outside of Normal	eriod of Aba		nt			City S	tate. Zi	p Code					\		
Other – Describe: UNOCCUPIED										¥,			3 8 8		
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		ovatio				×	Min Glo	i-Enclosure vebag Proc				a			
			. 1				1101	- Excilipiou	() and real rinds			ement			
		catior maily	201		_			ļ			Ty	ре			
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used S Mainte Custodi	Solely enanc	by e/		os Conta thermal s	systems ing, VA	faterial s insula T, or		Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure		
2011 52 20014	20275	No	N/A	DDE	- CLUN	O INIC	NIII AT	TION	100 LF	1,7		te			
BOILER ROOM	X				ECHIN			WA-51222		Х					
BOILER ROOM	X			PIPE-	FITTIN	IG IN	SULA	TION	25 LF	Х					
							4								
Name of Registered Waste Hauler									Name of Registered Landfill						
TWO BROTHERS CONTRACTING,	Hauler ID No. of Was 18743 30) WASTE MANAGEMENT G.R.O.W.					.W.S	5				
City, State TOTOWA, NJ				Disposa 06/13/	2015		City, State	SVILLE, PA							
Completed by ELIZABETH MLADENOVIC	СТ	COOR	RDINATO		gnature Luga	lut	tim)		ite 5/05/2	015					