1205-4477 Check #4090

Date of Notification (1) 5/7/1	12				uilding iversi	Owner / Operato	or (2)	A STATE OF THE STA	***********	The second	The same	
	otification		Stree				2.1.3002.00	1.0	1-2 1	17	Challen Care	
⊠ EPA			COUNTY OF THE PARTY OF			ville Road		0.00	****	17		13
	Initial				& Zip		i	J.		17.	· !	
□ DOL □	Amended #					NJ 08648	14		n .		y	- 11
	Emergency Cancellation	- 1			ontact		/	L LT	elenho	MA-AI	umh	or.
LI DCA	Cancellation		Phil	Vooi	rhees		L	4.	~ ~		N	
			FA	CILI	TY INI	ORMATION		The state of the s		- 2		1
Name of Facility Where Aba		lace (3	3)			Type of Facil						
Rider University - Fine	Arts Building					School (N. di					
Street Address								han K-12) (Unocci				
						- Control of the Cont		ommercial building			tc.)	
2083 Lawrenceville Roa						Square Feet	# of FI	oors	ldg. Ag	je		
City (5)	County (6)	Co	unty	Code	(7)							
1000	e-200					The state of the s	(Prior if being	demolished)				
Lawrenceville	Mercer					Mechanica	DE DESCRIPTION CARD DEVE					
Name of Monitoring Firm Hi		ner (8)		AS	CM No		tement Contra	actor (9)				
Pennoni Associates, Inc	C					AbateTech.		7				
Street Address 515 Grove Street Suite	1D					Street Addres 30 Maple A						
City, State & Zip Code	ID					City, State &						
Haddon Heights, NJ 080	135					Lumberton						
Project Manager for Monitor		Teler	phone	Nun	nber	Telephone N		License N	umber			
Alan Lloyd		856-				609-265-21			0052			
Scheduled Start Date (10)	Scheduled Cor	npletio	on Da	te (1	1)	Name of OSI	HA Monitor					
5/16/12		5/31			105	EMSL Anal	ytical	-				
Occupancy Status During A						Street Addres						
Facility Closed/Vaca	27			atem	ent	107 Haddoi						
Abatement Perform	ed Outside of Norm	al Ho	urs			City, State &						
Describe:						Westmont,	NJ 08108					
Facility Occupied D												
Scope of Work (Check all the	іат арріу)						□ Full Co	ontainment with Ne	anative	Pres	SIIFA	· · ·
≥3 sf or ≥3 lf		\boxtimes	Rer	novat	ion			nclosure	-guii v	1 100	Juic	3
≥160 sf ≥260 lf		Ħ		moliti	1000 C		Glove	Bag Procedures				
			1575677.11					xempted and Non-	Friable	e Pro	cedu	re
Location	of	Is	Locat	ion	T	Description		Amount	1	ateme		0635008
Asbestos-Cont			nally			Asbestos-Con		(Specify				
Material (AC			olely			Material (A		SF or LF)	, D		E	Щ
TO BE ABAT		Custo	tenar		CALL PARTY	(i.e., thermal s insulation, surface			Removal	Repair	apo	iclo
(13)		Cusii	(12)	Otan		or other miscell			oval	왕	Encapsulate	Enclosure
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		Yes	No	N/A			•				é	U
Mechanical Room		\boxtimes	П	П		Vibration Co	ollars	200 SF		П	П	П
Mechanical Room		X				Pipe Insula		7 LF				
							The state of the s					
						8						
Name of Registered Waste	Hauler				Waste	Control of the Contro	Name of Reg	gistered Landfill		Acres Danie		
AbateTech, Inc.			Ha	uler 187	ID No.	of Waste	TRRF Land	4fill				
City, State		ă)		101		Disposal Date	City, State	arill .				_
Lumberton, NJ				10		5/31/12	Tullytown,	PA				
Completed By (Print or Type)		Tit	le		Signaturé	1		Date		3-152	
Gwen Trumbetti	•		2000		ord.		017		5/7/	12		
				22.70		V 1	V		1			

State of New Jersey 1204-4462 NOTIFICATION OF ASBESTOS ABATEMENT Check #4088 (Pursuant to N.J.A.C. 8:60 and 12:120)

Date of Notification					Owner / C					42	4.				
Agencies Notified	5/4/12 Type Notific	ation		treet			Squibb C	ompa	any			700			-
⊠ EPA	Type Nounc	alion	1000				n- Rocky	Hill R	SH	1	[AS]		1.5		
DEP	☐ Initia					& Zip			tu.	- 1.1		- 2	110	, market	Mark Say
□ DOL		nded #1					J 08534-2	130			7		_!/		700
□ DOH		rgeńcy	N	ame	of C	ontact		197799		7/		Teleph	one I	Numb	per
☐ DCA	Cano	ellation	K	evin	ı Joi	nes				1/				-	• //
				FAC	CILIT	TY INI	ORMAT	ON	-	- Car			-	-	7:7
Name of Facility Wh		ent is Taking P	lace (3)				Туре	of Facil	lity (4)	7.	4 6	1. 1.		. 100	7
Burke & Kerr Far	m Roof	1000.				200		chool (N 15		* 12		24		1
Street Address										Other than h		~~~		, i	
311 Pennington-	Rocky Hill	Rd.								te & comme				etc.)	
Oit (F)	-	10 1 (0)	10			(7)	Squar	e Feet	4	# of Floors		Bldg. A	ge		
City (5)		County (6)	Cou	nty C	oae	(7)	0	411	/D-::		- I' - I - D			-30511	
Pennington		Mercer							(120) H	being dem	olisnea)				
Name of Monitoring	Eirm Hirad b	L Puilding Our	207 (9)		TAG	CM No	Farm	The second secon	0000	Cambrastas	(0)				
Health & Safety S		y Building Owi	lei (o)		AS	CIVI INC	Abate			Contractor	(9)				
Street Address	70111000				-		Street								
318 12 th Street							30 Ma	ple A	ve						
City, State & Zip Co				P0050					Zip Co						
Hammonton, NJ			I=						, NJ 0	3048					
Project Manager for Jim Proctor	Monitoring F	·irm	Teleph 609-7						umber		License I				
Scheduled Start Dat	o (10)	Scheduled Cor		0.000	3,000,000,000		609-2		HA Mon	itor		005	29		
5/12/12		Scrieduled Col	5/12/		e (11	1)	EMSL			iitor					
Occupancy Status D	ouring Abater	ment (Check o	nly one))		as:	Street								
		During Entire F			teme	ent			n Ave.						
		utside of Norm	al Hou	rs			535,935		Zip Co						
Describe:	Saturday upied During	Abatamant					Westi	nont,	NJ 08	108					
Scope of Work (Che															
		1.37								Full Contain	ment with I	Vegative	Pre	ssure	9
≥3 sf or ≥3 lf				Ren	ovati	on				Mini-Enclos	ure				
≥160 sf ≥260) If		\boxtimes	Dem	olitic	on				Glove Bag F					
						1			M-mark -	Non-Exemp					
	cation of os-Containin	a	Norma	ocatio			Des Asbesto	cription			Amount (Specify	Ab	atem	ent T	ype
and the second of the second o	erial (ACM)	9		lely b				rial (A			SF or LF)			т	
	E ABATED		Mainte	enand	ce or		(i.e., the	rmal s	ystems			Rer	₽.	nca	nc
ir	Facility		Custo		Staff?	•	insulation,					Remova	Repair	Encapsulate	Enclosure
3)	(13)			12) No	N/A	1	or other r	niscen	aneous	,		<u>m</u>		ate	<u>a</u>
Exterior of Farm	House		П	П		-	Roofii	ng Ma	terial		931 SF		П	П	П
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			T	MI	Ħ							一门	IT	П	Ħ
											N. S.		П	П	Ī
Name of Registered					Cubic Ya	rds	Name	of Register	ed Landfill		mysid- v sy				
Clean Harbors				Hau	166	D Nò.	of Waste		Grove	s Landfill					
City, State				1	100	J.	Disposal		City, S						
Édison, NJ					Carponic as		5/12/			town, PA	1				
	Sampleted By (Print or Type)						Signature		1	1	1	Date			-
Gwendolyn Tr	105,070 - 400				ps.			1	. /	a.		5/4/	12		
		20.5	0 2		ord.	1 EE		wit	mx	N	7		-		

Date of Notification (1) 5 - 4 - 12					g Owner/Operator ealth Inc		197 4	1				
Agency Notified	Type Notification		100		Address	Carcii III				9	1070	
Agency Notified	Type Notification		Ι,	P.	D. Bo	x 388	14	A		-	UZ	
CKEPA CKDEP	☐ Initial Amended 1				tate, Zip C		3	Lic	9,000	A S. J.	15 %	1
₫ DOL	Amendment #	ding			of Contac	NJ 0805	3	Tolonhona Niver	-	1102	ů `	<u>\</u>
DKDOH DKDCA	justification) Cancellation		100		o Mar						Canada San	-
-				FACII	LITY INFO	ORMATION						
Name of Facility Where A		lace (3)					Type of Facility					
Street Address	, modprour						☐ School (K-12	!) 3 (Other than K-12)				
101 Carnie E	oulevard					27	Other (i.e. pr homes, etc.)	ivate & commercial	building	gs,		
City (5)	-						Square Feet	# of Floors	Bldg.	Age		- 775-
Voorhees							10,500	6		+/	-5	0
County (6)				County ONLY)		(STATE USE	Current Use (P	rior if being demolis	hed)	-		
Camden	I list at the Desirable - Occ	1	A COLU	Na		Name of Abotem	nent Contractor (9		200 27 17		-	
Name of Monitoring Firm (8) Criterion			ASCM	NO.				ntal Serv	ices	,	In	c.
Street Address 3370 Progres	ss Drive, S	Suite	J J		12	Street Address 2251 Fr	aley Str	eet				
City, State, Zip Code Bensalem, Pi	A 19020					City, State, Zip C Philadel	Dode phia, PA	19137				
Project Manager for Mon	toring Firm	Tel	lephon	e No.	-	Telephone No.		License No.				
Mike Panepr		21	15-2	244-	-1300	215-533-	-5155	01166				
Start Date (10) 6-4-12	Scheduled 9	Completic 14-1		le (11)		Name of OSHA Criterio	Monitor on Labora	tories				
Occupancy Status During	Abatement (Check o	nly one)				Street Address						
⊈Facility Closed/Vacate	d During Entire Period	of Abate	ement					rive, Suit	te J			e Level Units
☐ Abatement Performed ☐ Other – Describe:						City, State, Zip (Bensalem	, Pa 190					
Scope of Work (Check al	that apply) *aba	teme	nt p	pri	or to	demo*	Containment with	Negative Pressure	•			
 ≥ 3 sf or ≥ 3 lf ≥ 160 sf or ≥ 260 lf 	(20)			u ken	ovation nolition	☐ Mini- ☐ Glov	Enclosure ebag Procedure					
		1	Ana or non-ware			LA Non-	Exempted (*) and	Non-Friable Proce	edure	Ab	atem	ent
			Location lormall								Туре	-
Locatio Asbestos-Containing		Used	d Solel	y by	Achas	Description stos Containing Ma	Commence of the second	Amount			n	, l_
TO BE AB	ATED	400000000000000000000000000000000000000	ntenan ustodia			, thermal systems	insulation,	(Specify	10	Remova	Repair	Enclosure
IN Fac (13)			Staff?			surfacing, VAT other miscelland		SF or LF)		nov	Renair	USO
(13)			(12)			Olici milocolari				<u>a</u>	. 6	9
		Yes	No	N/A						х	+	+
***see attacl	ned sheet*	*		x					-	_	+	+
		-							+ -	+	-	1
										- 4	+	+
Name of Registered Was	to Hauler	I NI IT	DEP W	laste L	lauler	Cubic Yards of	Name of Regis	stered Landfill	لببب			
Service Tran		IDI		, asic 1	iudioi	Waste	A & L S	461				
City, State						Disposal Date	City, State					
Morrisville,	PA					\triangle	Libson,		1 1			
Completed by Jennifer Niv	ren Dir. c	f Op	era	tio	ns	Signature 7	1	5	Date /	12		
ASB-41	* Do n	ot use thi	is form	for as	bestos lic	ensure exempted	activities.			-		

State of New Jersey

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

18 00 V

Date of Notification (1)		Name of B)perator	· (2)	No. of Lots					
04/30/12				Princeton	Universi	ty			- Annahita	and the same		
Month/Day/Year				1					Villag	The same	We .	
Agency Notified	Type Notificati			Street Add				1 //	760	The same	The same of	*
EPA	Initi		20.000	P.O. box 2				- (/)	11/8	1/10	1400	'R214
DEP		tificati	ion	City, State	10.00			1 1/2	4/2	65/	S B	(Wallship)
DCA		ended		Princeton		3	-	17/214	abana Niv	mbon	- //	19 10
DOH		tificati cellati		Name of C				/ Tele	phone Nu	mner		1 /5
	Can	сенац	OII	Robert Ot	TY INFO	DMAT	ION		MA	1		and the same of th
Name of Facility Where Abate	ment is Taking I	Diana	(2)	FACILI	I I INFO	IXIVIZX I	1011	Type of Facility (4)		- 6	2011	- //
Magic Apartments	ment is Taking i	riace	(3)					School (KI		than K	12)	
Street Address								x Other (i. e.			rcial	1
Princeton University								buildings,		-	26	<u> </u>
					To .				Floors	Bldg.	Age	
City (5)	Cou	nty (6)		County	enanthamprica and		Current Use (Prior if	8 being dem	50+		-
Princeton					(STATE U	SE ONLY)	University	being den	ionsneu	,	
Name of Monitoring Firm Hire	ed by Building ()wner	(8)		ASCM	I No.	Name	of Abatement Contract	or (9)			
ATC Associates, Inc					100000000000000000000000000000000000000	#2000000000000000000000000000000000000	Associ	ated Specialty Contract	ing Inc			
Street Address 3 Terri Lane	Terri Lane							Address Crue Avenue		34W - W		
City, State, Zip Code	·			A-10-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1			The state of the s	State, Zip Code Mills, PA 19342	HOW-			
Burlington NJ 08016				T 25-1	Number		-	one Number		I icono	e Numb	
Project Manager of Monitorin Mike Keehn	LD ON ESS	Telephone 609-386-88				64-9622		0070				
Scheduled Start Date (10)		Sche	d. Con	npletion Date	(11)		Name	of OSHA Monitor				
05/10/12				05/17/12			Criter	ion Labs				
Month/Day/Year Occupancy Status During Abat				onth/Day/Yea	ar		Street	Address		-		-
x Facility Closed/Vacated				atement				rogresive Drive				
Abatement Performed				atement.			_	tate, Zip Code				
Hours - Describe:								em PA 19020				
Other - Describe:												
Scope of work (Check all that a	nnly)	-						Full Containment with	Negative	Pressu	re	
Demolition .	bby3)		x	Renovation	n			Mini - Enclosure				
x >3 sf or >3 if			107331		105			Glovebag Procedure				
>160 sf or >260 lf							xx	Non-Friable Procedur	e	20		
The second secon		Is	-						Aba	atement	Type	
Location of	Lo	cation	ı	Desc	cription o	f					E	E
Asbestos - Containing	No	rmally	,	Asbesto	os-Contai	ining		Amount	R		N	N
Material (ACM)		sed			rial (ACI			(Specify	E	R	C	C
TO BE ABATED	100 miles 100 mi	olely		The state of the s	ermal sys			SFor	M	E	A	L
In Facility (13)	D.27425	Main- nance/	8 11	insulation.	, surfacin miscellar		•	LF)	O V	P	P	S
(13)	//33072	stodia		or other	miscenai	neousi			l Å	î	Ü	Ü
	255	ff (12)	2						L	R	L	R
	Yes		N/A									E
5th floor Apt 5P		x		VAT & ma	stic			2 SF	x			
6th floor Apt 6 P		x		VAT & ma	2			2 SF	x .			
7th floor Apt 7 W		VAT & ma	stic			2 SF	x					
8th floor apt 8 W		VAT & ma	stic			2 SF	x					
Name of Registered Waste Hau	Contract of the	EP Waste er ID No.	Cubic of Was	te	1	Name of Registered L	andfill					
Horizon Disposal	100					1		GROWS	M n		0.4	
City, State Trenton NJ					Disposa As need			City, State Morrisville PA				
Completed By (Print or Type) Mark Goshow			Title Proje	ct Manager	1		Signatu	Tar Ash	19 19		Date	-12
ARS-41				-			//	1 - JUST	1		20	

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

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

							- 11 - 4	1 / 6	Dr. Land		
Date of Notification (1) 04/30/12				Name of B	uilding Owner/C	Operator	r (2)	V.,	SMS2 a chaps.	Hrma -	The second second
				Timeeton	Oniversity		1. "	Biology or an	THE RESIDENCE OF	The same of	20
Month/Dav/Year Agency Notified	Type Notification		-	Street Add	race		Hi II-			2000	-
EPA	Initia			P.O. box 21			19111	71 15	P E	7 11	17 5
			_			-	- 11	11-	10 1		W 11-
DEP		ificatio	n		, Zip Code		. 117	3		-	
DCA	x_Ame		- 1	Princeton I				111			
DOH	101	ificatio	200	Name of C			Tele	ephone Nu	nber	0 0	210
	Cano	ellation	n	Robert Oto		TON.		,	-	9 /	112
	production and the second		Succession	FACILIT	TY INFORMAT	ION	n				
Name of Facility Where Abat	ement is Taking P	lace (3)				Type of Facility (4)	ASA	ECTAC	2011	
Magie Apartments							School (K	12)	110 5	CONTRO	18
							Subchapter				
Street Address							x Other (i. e.	homes, etc.		rciai	
Princeton University								Floors	Bldg.	l ma	
City (5)	I Cause	ity (6)			County Code	(7)	60000 # 01	8	50+	ige	11.00
Princeton	Cour	ity (0)		V 1	(STATE USE ONL)		Current Use (Prior if			`	
Princeton	1				(STATE USE ONL)	,	University	being dem	onsucu	,	
Name of Monitoring Firm Hi	red by Building O	wner (8)		ASCM No.	Name	of Abatement Contract	or (9)			
ATC Associates, Inc	rea by Danaing O	,,,,,,,	·,		1		iated Specialty Contrac				
STATE OF THE PROPERTY OF THE P					1	-					
Street Address 3 Terri Lane							Address Crue Avenue				
City, State, Zip Code							State, Zip Code				
Burlington NJ 08016						Glen N	Mills, PA 19342				
Project Manager of Monitori	ng Firm			Telephone	Number	Telepl	hone Number		1000	e Numb	er
Mike Keehn				609-386-88	00	610-36	64-9622		0070	5	
Scheduled Start Date (10)		Sched.	. Com	pletion Date	(11)	Name	of OSHA Monitor				
05/10/12		Joen Ca.		05/17/12			ion Labs				
Month/Day/Year			Mo	nth/Day/Yea	r						
Occupancy Status During Ab	atement (Check or	nly one)		HENT AZIOTA F CIN		Street	Address	000000000000000000000000000000000000000			
x Facility Closed/Vacate				tement		3370 F	Progresive Drive				
Abatement Performed						City, S	State, Zip Code				
Hours - Describe:	7:00 AM - 3:30						lem PA 19020				
Other - Describe:	_ 1100 11111 0100										
						Ш	Full Containment wit	h Negative	Drocen		
Scope of work (Check all that	apply)							n Negative	riessui	e	
Demolition			x	Renovation			Mini - Enclosure				
x > 3 sf or > 3 if							Glovebag Procedure				
>160 sf or >260 lf						xx	Non-Friable Procedu	re			
		Is						Aba	tement		
Location of	1.0	cation			ription of			_		E	E
Asbestos - Containing	0.000	mally			s-Containing		Amount	R		N	N
Material (ACM)	1000	sed			ial (ACM)		(Specify	E	R	C	C
TO BE ABATED	1.0	lely			rmal systems	8	SF or	M	E	A	L
In Facility		Main-			surfacing, VAT	•	LF)	0	P	P	o S
(13)		ance/		or other	miscellaneous)			V	A	U	U
		todial						L	R	L	R
			N/A				V				E
1st floor Apt 1 K	103	X	1/23	VAT & mas	stic		2 SF	x			,
2nd floor Apt 2 K		x	-	VAT & mas			2 SF	x			
146		-	-				2 SF				
3rd Apt 3 B		х		VAT & mas				х			
4th floor Apt 4B		x		VAT & mas	,		2 SF	x			
Name of Registered Waste Ha	uler	1		P Waste ID No.	Cubic Yards of Waste		Name of Registered I	andfill			
Horizon Disposal		1	auter	10 10.	or waste		GROWS				
City, State				77	Disposal Date		City, State			STORE OF THE STORE	1111
Frenton NJ					As needed		Morrisville PA				
			r. d			C!	1	2000		Data	
Completed By (Print or Type)			Fitle Project	t Managar		Signat	h ht 1.			Date	2-12
Mark Goshow		ľ	rojeci	t Manager		111	and soll	1		0	10
ARS-41											

ABS-41

JUN 95

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

(Pursuant to NJAC 8:60-7 and 12:12Q-7) B & G proj. #: 2012-88 Check # 5247 Date of Notification (1) Name of Building Owner/Operator (2) 0 5 /0 8 /1 2 Ronald Carbone Agencies Notified Type Notification Street Address ☐ EPA Initial 484 Madison Avenue DEP City, State, Zip Code DOL Amendment Roselle Park, NJ 07204 Telephone Number DOH. Name of Contact Cancellation □ DCA Ronald Carbone **FACILITY INFORMATION** Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) Subchapter 8 (Other than K-12) Ronald Carbone Other (Private/Commercial Street Address Bldgs./Homes, etc. # of Floors Bldg. Age Square Feet 484 Madison Avenue County (6) County Code (7) City (5) (State use only) Current Use (Prior if being demolished) residential Roselle Park, NJ 07204 Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. B & G Restoration, Inc. n/a Street Address Street Address 105 Ryerson Road City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035 Telephone Number License Number Project Manager for Monitoring Firm Phone Number 0378 973-696-6869 Name of OSHA Monitor Sched. Completion Date (11) Scheduled Start Date (10) B & G Restoration, Inc. Street Address 5/18/2012 5/18/2012 Occupancy Status During Abatement (Check only one) 105 Ryerson Road Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Lincoln Park, NJ 07035 Other-Describe: Scope of Work (check all that apply) Demolition ☐ Full Containment w/negative pressure ☑ Glovebag procedure \times >3 sf or >3 lf Mini-enclosure Non-friable procedure ≥160 sf or ≥260 lf Is location normally used solely Location of F e by maintenance/custodial n Amount asbestos-containing Description of asbestos-containing m staff(12) p C (Specify SF or material to be material (ACM) 0 a LF) abated in facility (13) Yes No N/A V е 120 lf pipe insulation X basement Cubic Yards of Waste Registered Waste Hauler NJDEP Hauler ID# Name of Registered Landfill 19563 B & G Restoration, Inc. 2 yards Tullytown Resource & Recovery Center Disposal Date City, State City, State Lincoln Park, NJ 07035 5/19/2012 Tullytown, PA

Signature

Gordana Luna

Date

5/8/2012

Completed by (Print or Type)

Gordana Luna

Title

Treasurer

			N	ame of Buil	ding Owner/Opera	10r (2)	11,	- W	1/2	1
5-	8-12		-	بعد عرصآ	1 C 1	101 (2)			7	11
Agency Notified	Type Notification		Si	reet Addres	SS MUM	1101PAL UT	LITIES AUTHOR	ROTY 1	JCI	40
≝ EPA	≱ Initial		1	544	Dr UII	'n L	AU	-015	: 44	1
₩ DEP	O Amended		Ci	ty. State. Zi	RT. 44	0	and the same		ji.	. 1
O DOL	Amendment #			7. 7.	/ - 232/		CONTRACT NO	1 Tom	7	À
™ DOH	D Emergency (including justification)	cluding	NIs	JE/C	sey City	NJ. O	7305	- 0	r.	1
 DCA	□ Cancellation				.000		Telephone Nu	mber		+
					SCATURED)				Š
lame of Facility Where	Abatement is Taking	Place (3)	F	ACILITYIN	FORMATION			1090	-	1
						Type of Facil	ity (4)			_
treet Address	JATER TREA	THEUT	FAC	ility		☐ School (K-	12)			
1 01						☐ Subchapte	r 8 (Other than K-1;	21		
640 GE	EEEN BANK	120				Other (i.e.	private & commerci	al buildin	ıns	
ity (5)						nomes, eli	C.)		30,	
BOONTO	N, NJ 0	-	_			Square Feet	# of Floors	Bldg.	Age	
ounty (6)	1000	1005				50000 =	2	6	0+	•
			Cou	unty Code (7) (STATE USE	Current Use (Prior if being demol	ished)		_
MORRIS			ON	LY)						
me of Monitoring Firm			ASCM No.		Name of Abata	ment Contractor	LABS, UTIL	177.		
ENVIRONMEN	THE THETICS ,	NC	a .	045	The second secon	Com acioi	(9)	10		
eer Address		,		-15	UNIPR	O, INC				
64 BROAT	> 5-									
y, State, Zip Code					173 K	ARKUS	AVE			
HATAMA	41 ~	0	./-		City, State, Zip	Code			_	
HATAWAN Dject Manager for Moni	Ioring Firm	077	47		WOOD	BRIDER	License No.	070	90	_
BHOM AS P.	6016	7 2	phone No	0.	Telephone No.		License No	0 10	12	
rt Date (10)	CEILER	1/37	2.290.	2217	132-7	26-3111	006			
	Scheduled	Completio	n Date (11	1)	Name of OSHA	Monitor	000	13		-
5-21-12	6-	8-15	_							
cupancy Status During	Abatement (Check o	nly one)			Street Address	MENTRE T	Aeries INC	u		
acility Closed/Vacated	During Entire Period	of Abatas							2	
potentient renomined (Dutside of Normal Fa	cility Hour	nent	+	City, State, Zip C	COAD ST.				
other - Describe:	94			ĺ			2			-0.0
pe of Work (Check all I	that apply)				MATA	NAN, NJ	07747			
3 sf or ≥ 3 lf			do		 Full C	Ontainment	Visite State of			
	10.		MO DA	novation			Alasari a			
160 sf or ≥ 260 lf			D Do		- IAMILIA-E	liciosure	Negative Pressure			
160 sf or ≥ 260 lf			D Der	molition	☐ Glove	bag Procedure	20			
160 sf or ≥ 260 lf		ls Lo	O Der	molition	☐ Glove	bag Procedure	Negative Pressure Non-Friable Proce			
	of	Non	Cation mally	molition	☐ Glove	bag Procedure	20		Abate	0.700
Location	of Aaterial (ACM)	Non Used S	cation mally solely by	molition	☐ Glove ☐ Non-E	bag Procedure exempted (*) and	20		Abate	0.700
Location Asbestos-Containing No. 10 BE ABA	Material (ACM) TED	Non Used S Mainte	cation mally colely by enance/	Molition Asbesto	Description of os Containing Mat	bag Procedure empted (*) and	20		Ty	ре
Location Asbestos-Containing Model ABA	Material (ACM) TED	Non Used S Mainte Cust	cation mally solely by	Molition Asbesto	Description of os Containing Mat	bag Procedure erial (ACM)	Non-Friable Proces Amount (Specify		Ty	ре
Location Asbestos-Containing No. 10 BE ABA	Material (ACM) TED	Non Used S Mainte Cust	cation mally folely by mance/ lodial aff?	Asbesto (i.e.,	Description of os Containing Mat thermal systems in surfacing, VAT	bag Procedure exempted (*) and erial (ACM) ensulation, or	Non-Friable Proces		Ty	ре
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Location Asbestos-Containing M TO BE ABA IN Facility (13)	Material (ACM) TED y	Non Used S Mainte Cust Sta (1	cation mally solely by mance/ lodial aff?	Asbeste (i.e.,	Description of os Containing Mat thermal systems in surfacing, VAT, other miscellaneo	bag Procedure exempted (*) and erial (ACM) ensulation, or	Amount (Specify SF or LF)		Ty	ре
Location Asbestos-Containing A TO BE ABA IN Facility (13)	Malerial (ACM) TED y + Storagear	Non Used S Mainte Cust Sta (1	cation mally colely by mance/ codial aff?	Asbesti (i.e.,	Description of os Containing Mat thermal systems in surfacing, VAT, other miscellaneo	bag Procedure exempted (*) and erial (ACM) ensulation, or	Amount (Specify SF or LF)	Removal	Repair	ре
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Location Asbestos-Containing A TO BE ABA IN Facility (13)	Haterial (ACM) TED Y + STORAGEARER OPRIODE + OFFICE	Non Used S Mainte Cust Sta (1	cation mally iolely by mance/ iodial aff?	Asbeste (i.e.,	Description of os Containing Mat thermal systems in surfacing, VAT. other miscellaneous HASTIC HASTIC Cubic Yards of Vaste	bag Procedure exempted (*) and erial (ACM) ensulation, or	Amount (Specify SF or LF) 900 ± Sf. 900 ± Sf.	Removal	Repair	ре
Location Asbestos-Containing A TO BE ABA IN Facility (13)	Haterial (ACM) TED Y + STORAGEARER OPRIODE + OFFICE	Non Used S Mainte Cust Sta (1	cation mally iolely by mance/ iodial aff?	Asbesti (i.e.,)	Description of os Containing Mat thermal systems in surfacing, VAT, other miscellaneous HASTIC HASTIC	erial (ACM) nsulation, or	Amount (Specify SF or LF) 900 ± Sf. 900 ± Sf.	Removal	Repair	ре
Location Asbestos-Containing M TO BE ABA IN Facility (13) B #1, /sf.F4. of Registered Waste H	Haterial (ACM) TED Y + STORAGEARER OPRIODE + OFFICE	Non Used S Mainte Cust Sta (1	cation mally iolely by mance/ iodial aff?	Asbesti (i.e.,)	Description of os Containing Mat thermal systems in surfacing, VAT, other miscellaneous + HASTIC + MASTIC	erial (ACM) nsulation, or ous) Name of Registe	Amount (Specify SF or LF) 900 ± Sf. 900 ± Sf.	Removal	Repair	ре
Location Asbestos-Containing M TO BE ABA IN Facility (13) B #1, 1st.F4. To B 2, 21 to of Registered Waste F EWARK CAS late JEWARK,	Hauler RING / NC	Non Used S Mainte Cust Sta (1	cation mally iolely by mance/ iodial aff?	Asbeste (i.e., support of the control of the contro	Description of os Containing Mat thermal systems in surfacing, VAT, other miscellaneous + HASTIC + MASTIC	erial (ACM) nsulation, or ous) Name of Registe	Amount (Specify SF or LF) 900 ± Sf. 900 ± Sf.	Removal	Repair	ре
Location Asbestos-Containing M TO BE ABA IN Facility (13) B #1, /sf.F4. G #2. 21 +c of Registered Waste H	Hauler RING / NC NJ, Title	Non Used S Mainte Cust Sta (1	cation mally iolely by mance/ iodial aff?	Asbeste (i.e., surface)	Description of os Containing Mat thermal systems in surfacing, VAT, other miscellaneous + HASTIC + MASTIC	erial (ACM) nsulation, or ous) Name of Registe	Amount (Specify SF or LF) 900 ± Sf. 900 ± Sf.	Removal	Repair	ре



CK 2547

Date of Notification (1) 5/7/12					f Building of Life Ap			(2)			- 54	84.2			II.	* 2
Agencies Notified EPA DEP DOL	Type Notification Initial Amended Amendmen		-	City, Sta	ddress Virgina ate, Zip Co c City N	ode		nt 309	9				W	E		The same of the sa
DOH DCA	Emergency justification) Cancellation	(including	F	Name of Tom	f Contact				Commence	Tel	ěphone	Nim	Wary Va			The second secon
Name of Facility Where A Best of Life Apartm Street Address		ng Place (3)		FACI	LITY INF	ORMATI	ON		of Facility (4 School (K-1) Subchapter	2)	LICETE	SING				-
129 S Virgina ave A					. 37,00			Squar	Other (i.e. p etc.) re Feet	rivate			build B	ildg. A		es,
Atlantic City NJ 084 County (6) Atlantic	.07				Code (7))		1000 Curre)+ nt Use (Pric	1+ or if bei	ng demo	olishe		5+		
Name of Monitoring Firm	Hired by Building	Owner (8)	_1_	ASCN	1 No.			of Aba aco Ir	tement Con	tractor	(9)					
Street Address			-W-1,755					Addres Box 32								
City, State, Zip Code		ā							p Code n NJ 080	91						
Project Manager for Mon	itoring Firm			Telepho				none No 753-9			Licens 00727					
Start Date (10) 5/8/12		Scheduled 5/9/12		pletion I	Date (11)		2277	of OSH aco Ir	HA Monitor NC							
Occupancy Status During Facility Closed/Vaca Abatement Perform	ated During Entire	Period of Ab	atem	ent			PO E	Addres 30x 32	29							
Other – Describe: _ Scope of Work (Check A		nair acility r	10015						p Code n NJ 080	91		-				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	п тпас Арріу)	promotion .	nova molit				×	Min Glo	Containme i-Enclosure vebag Proc n-Exempted	edure					e	
Location	of		ocati rmal			D	scription							Abate	ement	
Asbestos-Containing <u>TO BE AB/</u> In Facil (13)	Material (ACM) ATED	Used Main Custo	tenar	ice/		tos Cont thermal surfac	aining N	Material s insula T, or		(5	mount Specify or LF)		Removal	Repair	Encapsulate	Enclosure
Apt 30	9			x		FI	oor Til	е	747	3	75 Sf	a ^t	x		- Cas	
	3 9															
Name of Registered Was	te Hauler		N	JDEP W	/aste	Cubic	Varde		Name of F	Pagisto	red las	dell				
United Containers			Н	auler ID 2459		of Was	2		G.R.O.V	50000000	eu Lan	ann				
City, State Elm NJ				62		Dispos 5/9/12	al Date		City, State Morrisvil		19067	7			11	
Completed by Anthony T Perna		Title Preside	ent			S	ignature	7				Date 5/7/				

			(F	ursuan	t to NJAC	8:60 and	12:12	0)	CH	SCV	1/5	770)		
Date of Notification (1) 5/1/12		CHAIL DO'N !			of Building n Emmo				ool				- Company	7	
Agencies Notified	Type Notification	1			Address School re	oad	**************************************		NE	っに	WW.	B		COLUMN TAN	
EPA DEP DOL	Amended Amendmen				ate, Zip Con, NJ (ida. Maria		0 201	2		ALL SALES	1/
X DOH DCA	Emergency justification Cancellation)			of Contact ett Burn				10	Tele	phone Ni	imber	i -		
Name of Facility When	e Abatement is Taki	ng Place (3)	FAC	ILITY INF	ORMATIO	ON	5 COM	of Facility (101	CINTRO INSING	_ & <u>.</u>	***********		
Street Address One School Road									School (K-1 Subchapter Other (i.e. p etc.)	8 (Othe			ldings	, hom	ies,
City (5) Newton								Squa	ire Feet	# of	Floors		Bldg.	Age	
County (6) Sussex					Code (7) USE ONLY)	_	Curre	ent Use (Pri	or if bein	g demolis	shed)			
Name of Monitoring Fir	m Hired by Building	Owner (8)	ASC	M No.				atement Cor ronmenta			0			
Street Address								Addre Gate	ss Drive, PO	Box 4	83				
City, State, Zip Code									ip Code I, NJ 074	18					
Project Manager for Mo	onitoring Firm	27/1-24		Telepho	ne No.			none N 764-2			License 1 703	No.			
Start Date (10) 6/18/12		Schedu 7/5/12		mpletion	Date (11)		Name	of OS	HA Monitor			55			
Occupancy Status Duri							Street	Addre	ss					9	
Facility Closed/Va Abatement Perform Other – Describe:	cated During Entire med Outside of Norr	Period of nal Facilit	Abaten y Hours	nent S			City, S	state, Z	ip Code						
Scope of Work (Check	All That Apply)		-									700100	_		-
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		-	Renova Demolit				×	Mir Glo	ll Containme ni-Enclosure ovebag Prod n-Exempted	edure				e	
10		200	Locati							7	ni entre la liago del		Abat	emen	t
Locatio Asbestos-Containin TO BE AE In Fac (13)	g Material (ACM) BATED ility	Use	Normal ed Sole intenar todial S (12)	ly by		tos Conta thermal s	systems ing, VA	faterial s insula T, or		(Sp	nount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
-	00	Yes	No	N/A										ie.	
Door				Х			ite sid				SF .	x			
Door				X			ite sid	-			SF	х			
Door				X			ite sid				SF	х			
Door			- 1 51	X			ite sid	ing			SF	х			
Name of Registered Wa Freehold Cartage	ste Hauler		H	JDEP W auler ID 5939		Cubic Y of Wast 10			Name of F						
City, State Freehold NJ			-		4.5	Disposa TBD	I Date		City, State Morrisvi						
Completed by Andrew Scott Higgir	ns	Title Presi	dent			Sig	nature	Un			Da 5/4	ite 1 /12		147-11-11	

TH 8302

Date of Notification (1)	1 - /1 -			Name		ng Owner/Operato						1
	1/1/2				//	1esserc	ola B	rothers	The second second	1 de	11	
Agency Notified	Type Notification			Stree	t Address	100	st Dair	mate day.	WE.	11		
D EPA	☐ Amended	1.19		City,	State, Zip	Code-	ST Cherry			1	11	1
Z DOL	Amendment #						L	17 07	/1/ On	1	1	1
E DOH	□ Emergency (incliging justification)	uding		Name	e of Conta	ct	3	Tolophone Num	her	- 1	20.0	1
DCA	☐ Cancellation		-	Re	2000	do Messe	EW			1	1	1
						ORMATION	ACO LA . S	-			м	1,
Name of Facility Where A	batement is Taking	Place (3)			OKMATION	Type of Eacility	(4)	<u> </u>		ua V	-+
		40						(4) pour (1)	The second second	A14.		
Strate to	nily Desc	Illing		-			☐ School (K-12) 3 (Other than K-12)				1
							Other (i.e. pr	vate & commercia) I buildings.			
	Mores						homes, etc.)		2		-	
City (5)	h Plains		1	7	A7	071	Square Feet	# of Floors	Bldg. Age			
77 05/5	N I lains	<u> </u>	10	ل	0 /	016		&	5	0	t-	-
County (6) Unio				ONLY	y Code (7) (STATE USE		ior if being demolis				
					,	-	Dingle	family	Dice	1/in	15	
Name of Monitoring Firm			ASC	1 No.						-)	
(8) EPC Tec	maclogies			14/1-	1	ヒド	- lech	neligies,	Inc			
Street Address	337					Sileet Address						
City State Zin Code						City State 7in (P.O. Bor Code	$: \mathcal{I} \mathcal{I} \mathcal{I} \mathcal{I}$			-	-
Alex F GALL)+ NI	085	33			A/	. Æ	A/T V	L = 22	7		
Project Manager for Monit	oring Firm	IT	elepho	ne No.		Telephone No.	- SYPE	AJ O	((, (, ,)	<u>}</u>		_
Steve Sche	in Keie	6	0T T	50 .	277.5	109-750	2365	License No.	. 10 0			- 1
Start Date (10)	Scheduled	Comple	tion Da	te (11)	2202	Name of OSHA	Monitor	<u> </u>	<u>~117</u>	W 700	5000	-
Start Date (10) 5-18-12	5-	21-1	2									
Occupancy Status During	Abatement (Check o	nly one)			Street Address	- (ulcgies,		_		
ASS THE STREET OF THE STREET	During Entire Perior	l of Abo	tomoni			P.C	Box .	227				Ì
Facility Closed/Vacated Abatement Performed (City, State, Zip C	8 < c				-	
Other - Describe:		00000	•			Nec	Emmt	NJ C	853	2		
Scope of Work (Check all	that apply)					45 CARROLL CONTROL				×		
> 2≥ 3 sf or ≥ 3 lf			29	□ Ren	novation		Containment with Enclosure	Negative Pressure	2			
□ ≥ 160 sf or ≥ 260 lf		91			nolition	Glove	ebag Procedure	÷				
		·				□ Non-	Exempted (*) and	Non-Friable Proce				
		2.7	Locati			ξ()			- A	bate. Ty		nt
Location	of		Normal d Sole			Description of	of	25		\Box		П
Asbestos-Containing	Material (ACM)	10000000	intena			tos Containing Ma	aterial (ACM)	Amount	1 -		m i	m
TO BE ABA			Staff?	-	(i.e.	 thermal systems surfacing, VAT 		(Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
(13)	,		(12)			other miscellane		31 01 21)	ova	pair	sula	JUSC
				T	1				-		te	e l
		Yes	No	N/A	-		,					H
Backyand Root	Soffit			X	Pip	e Insula	400	16 LF	X			
1st Floor Wa	-11			X.	Pipe	Insular	tion	16 LF	×	<u> </u>		Ш
Basement		×			Pipe	Insular	-den	LOLF	<u> </u>			
Name of Registered Waste	Hauler	ID ID		/aste H	lauler	Cubic Yards of Waste	Name of Regist	4				
EPC Tech	ickgies		1	701	00	VVasie	Waste	Mensyer	orcat			
City, State						Disposal Date	City, State		PA	** part . mar.	mi- 1000 min	
Completed by	Title	,				Signature T	T TOWN	No. 1 1 2 2	Date /	7		
Stell X hear		Sich	eat			SL	and Sch.	h	5/7	/,	2	
DIEC X MILL	101	1 15		for - it	and an U			1		4.]

Date of Notification (1)				Mana	(D "."			,		E II	5 E	. W		15	1
5/7/12					of Building Sautaken					· No Productions	re.	elev a	1.21		The section
Agencies Notified EPA	Type Notification			Street A	Address Hylton F	Road				ÌĄ,		9 20	12		
EPA DEP DOL	Amended Amendmen		_		ate, Zip Ci sauken I		10	; ;		ASE:	11087	CONTROL	р		
DOH DCA	Emergency justification) Cancellation				of Contact C Oberg		-	į. l	o.			Number	GS.	Harrison .	
Name of Facility Where	Abstament in Takin	Dlass (2		FAC	ILITY INF	ORMATI	ON			.18					
Pennsauken Centr	al School	ig Place (3)					Type of F	acility (4 ool (K-12						
Street Address 2300 Merchantville	Aug							× Sub	chapter ter (i.e. pr	8 (Othe			Idinas	hom	or
City (5)					V-14-7-1000-1-10			etc.)						es,
Pennsauken NJ 08	3110							Square F 1000+	eet	1+	Floors	40.2	Bldg. 35+	Age	
County (6) Camden					Code (7) USE ONLY)		Current U	Jse (Prio	r if beir	ng demo	olished)			
Name of Monitoring Firm Remington & Vern	n Hired by Building ick Engineers Ir	Owner (8)		ASCI	M No.			of Abatem aco Inc	ent Cont	tractor	(9)				
Street Address 232 Kings Highway	32 Kings Highway East							Address Box 329					-		
City, State, Zip Code Haddonfield, NJ 08	laddonfield, NJ 08033							tate, Zip C		91					
Project Manager for Mo Marco Carulli	roject Manager for Monitoring Firm Marco Carulli							one No. 753-980	0		Licens			-	
Start Date (10) 5/21/12		Schedule 6//18/1:		npletion	Date (11)			of OSHA I	Monitor						
Occupancy Status Durin	ng Abatement (Ched	k Only On	e)			-	Street .	Address							
Facility Closed/Vac Abatement Perform	ated During Entire ned Outside of Norn	Period of A	batem	nent				ox 329							
Other – Describe: Scope of Work (Check A		nai i aciiity	riours	' 			1.00	tate, Zip C Berlin N		91					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	чі тпас Арріу)	-	enova emolit				×	Mini-Ei Gloveb	ontainmen nclosure pag Proce xempted	edure				re	
		Is	Locati ormali	oņ,			9							emen ype	t
Location Asbestos-Containing		Used	l Sole ntenar	ly by	Asbes		scription aining M	of laterial (A0	CM)	An	nount		Τ	T	П
TO BE AB In Faci (13)	lity		odial S (12)			thermal surfac		insulation T, or		(S	oecify or LF)	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A		27						<u> </u>	'	ate	Гe
Class ro				х		Floor t	ile on v	wood		16,9	920 sf	x		12	
Hallwa	iys			х				ic mastic							
					mastic	betwee	en first	and sec	cond						
Name of Registered Was	eta Haulor		LN	IDEDIA	1-1-		er only				10 sf	x			
R & B Debris LLC	ste i laulei		Н	JDEP W auler ID 9439		of Was			ame of R unnel H			dfill			
City, State Hainesport NJ						Dispos 6/18/1	al Date		ity, State ew Lex		n OH	43764			
Completed by Anthony T Perna						Si	ignature			3.3.		Date 5/7/12			
								\sim		-		Town Street			

No

		(Fui	Suant to	NJAC 8:	60-7 and 12:12	0-7)	TEI	GEIVEI
	2 otificatio	n	Name Nick	of Building (Owner / Operator (2)			9 2012
Agencies Notified X EPA X DEP X DOL X X DOH	Initial Amen	gency Notifica Notification ded Notificatio	street 150 E City, S Elizal	Address Imora Ave State & Zip Co beth, NJ 07 of Contact	ode		73	PREFITANCE THE REPORT OF THE PROPERTY OF THE P
DCA	across a suppose			orcontact		Tage 6		Telephone Number
			FA	CILITY INFO	ORMATION			_
Name of Facility Where A	batemer mmerc	nt is Taking Pla cial/Residen	ace (3) ce		Type of Facility (4) School (K-12)			
Street Address	150 E	lmora Ave			Subchapter 8 X Other (i.e., pri	(Other than K- vate & comme	-12) ercial bui	ildings, homes, etc.
City (5) Elizabeth	0.00	County (6) Jnion	County C	ode (7)	Square Feet 5000 Current Use (Prior	# of Floors		Bldg. Age 60
Name of Monitoring Firm F	lired by	Building Owne	er (8)	ASCM No.	Residential/Com	nmercial		
Environmental Tactics Street Address 4 Broad Street	, Inc		-		Global Abateme Street Address	nt Services,	LLC	,
City, State & Zip Code					City, State & Zip Co	ode		e v = '
roject Manager for Monito om Geiger			Telephone N 732-290-22	217	Monroe Townsh Telephone Number 732-605-9062	ip, NJ 08831		e Number
cheduled Start Date (10) 5/5/12		heduled Comp	5/8/12	(11)	Name of OSHA Mod Global Abatemen	nitor nt Services.	LLC	00714
Facility Closed/Vac Abatement Perform X Describe: Area I Other - Describe:	ated Du ed Outs solated	ring Entire Per ide of Normal I During Aba	riod of Abate	ement Irs -	Street Address 443 Schoolhouse City, State & Zip Co Monroe Townshi	e Road		
cope of Work (Check all the Demolition Large Project X Quantity is ≥ 3 SF of Quantity is ≥ 160 S) r≥3LF	Renovation ACM	n	20	Mini-Enc	tainment with I losure g Procedure	Negative	Pressure
Location of Asbestos-Conton Material (AC TO BE ABAT in Facility (13)	aining CM) CED	N	Is Location Normally Use Solely by flaintenance sustodial Sta (12)	or (iff? inst	Description of Asbestos-Containing Material (ACM) .e., thermal systems ulation, surfacing, VA other miscellaneous	(Sp Squa T Linea	nount pecify re Feet or ir Feet)	Abatement Type (Specify: Removal, Repair, Encapsulation or Enclosure)
Base	ment	41	N/A		Pipe Insulation	12	LF	Removal
me of Registered Waste I Freehold Cartage	lauler	NJ		Hauler ID #	Cu. Yds. of Was		of Regis	stered Landfill
y, State Freehold, NJ	1. 8.+.		10	1033	Disposal Date 5/7/12	City, S	tate	
mpleted By (Print or Type Dominick Tringali)	Title Pres.			Signature Dominick Tr	The state	own, P	Date 5/3/12
3-41 JUN 95 G4667		1				1		3.0.12