CK# 7696

Date of Notification (1)					Owner/Operator		DECE		$\mathbb{W}$	E	JF
	5-8-12		-	R	HNIMEN		-<1		-		$\Pi$
Agencies Notified	Type Notification		Street A		thunch	57-11	111				
☑ EPA	Initial	1	-		do		THE MAY T	7	2012		TH
☐ DOL ☐ DEP	Amended Amendment #			te, Zip Co	' / /	1/01	08520	)			-
27,3000	☐ Emergency (inc	cluding	-	bbike		71	Te "			l.	
DOH DOH	justification)	1	Name o	f Contact	1) ANOR	with 1					
□ DCA	Carcellatori		1/19	VR.			and the de		-	lu men	4
			FACI	TY INF	ORMATION	Type of Facility (	4)		on the State	er (e-6 meta	100 k 100 m
Name of Facility Where	Abatement is Taking	Place (3)	/	~	-	School (K-12)	Contract of the Contract of th			2 60	170
PRIVATE	Res. 36	Chun	colq	5%		Cubchanter 8	(Other than K-12)	er ercent			1
Street Address	/	_				Other (i.e., pr	ivate & commercial l	buildir	ngs,		1
36 Chu	ach 51.					homes, etc.) Square Feet	# of Floors	Blde	g. Age	9	$\dashv$
City (5)	11	1				Squale reet	11 01 1 100.0				
Robbins	Ville 11	11-11-				Compatible (Pri	or if being demolishe	ed)			ᅱ
County (6)			Count	Code (7	) (STATE	Current use (i ii	of it boiling domination				
Merco	en.			-		nent Contractor (9)					=
Name of Monitoring Fire		wner	ASCM N	0.	Name of Abatem	The section (5)	ontal Inc.				
(8)	V/4				Cream Rido	e Environii	ental, Inc.				=
Street Address	11				Street Address						
	/				15 Black I	Forest Road					-
City, State, Zip Code					City, State, Zip C	2002					_
J Sign Time					Hamilton,	NJ 08691	License No.		-		$\exists$
Project Manager for Me	onitoring Firm	Tele	ephone N	lo.	Telephone No.	110	00676				_
	93				609-890-7		000.1				$\neg$
Start Date (10)	Scheo	duled Comple	etion Date	e (11)	Name of OSHA		PRICES.				
5-9-1	2 5	-//-	12		Hmen	12CH 0	- revices:				$\dashv$
Occupancy Status Dur	ring Abatement (Che	ck only one)			Street Address	= 4714	INTIC IN	24	1.		_
☐ Facility Closed/Vac	ated During Entire Pe	eriod of Abate	ement		18.1	Podo	747.4	-/-			
Abatement Perform	ed Outside of Norma	I Facility Hot	ırs )	11	City, State, Zip C	Le1/4, 1	1.1.0873	35	-		
Other - Describe:	· KemoLil	IEN C	rpc	-05 -	-AVH	-e1/4/10					
Scope of Work (Check	( all that apply)				☐ Full Co	ntainment with Ne	gative Pressure				
		Renova	tion		☐ Mini-Er	nclosure					- 1
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Demoliti	on		Glovet Non-E	pag Procedure empted (*) and No	on-Friable Procedure	9			_
		1.1.2.2.21	inn T		t-e-g			A	bater		- 1
		Is Locat Normal							Тур	<del>-</del> -	$\dashv$
Locatio	n of	Used Sole	ly by	4-5-	Description of stos Containing Ma	of aterial (ACM)	Amount			ш	m
Asbestos-Containing	g Material (ACM)	Maintena Custod		Asbes	thermal systems	insulation,	(Specify	Remova	ZD	Encapsulate	Enclosure
TO BE AB		Staff	?		surfacing, VA	, or	SF or LF)	Non	Repair	lusc	Insc
(13)		(12)			other miscelland	eous)		<u>a</u>		ate	6
		Yes No	NIA					-			$\vdash$
	71.1		/	1	47.		1.33(50	1			
TRECIGIOUT	Bldg	1	-		-11-1		1				
7											
1.1											
						T Name of Por	gistered Landfill				
Name of Registered V	Vaste Hauler	· T	NJDEP		Cubic Yards of Waste						
LUCAS	DICPOSE	76	Hauler IC	354	of Waste /C		Pouls			_	
and the second second	001100	===		-	Disposal Date	City, State	/	0,			
City, State	Tand 11.	T.			5-14-1	- 100		4.			
1 HISh 15	TOWN ATT	le			Signature	000	Dáte Dáte	8-	-12	_	
David J. D'A	A 0.00	Presid	ent		Las	VIII CAIL	new _				

0534

Date of Notification (1) 05/08/2	2011	-					ng Owner/Operator nty Building &		WEID				
Agencies Notified  EPA	Type Notifi	cation				et Address Pennsyl	vania Ave	. 1	1 2012				
DEP DOL	Amenda Amenda Emerge	ment #		10		State, Zip erson, NJ		MAY -	1				
DOH DCA	justifica	ation)	oluuli	ig	100000000000000000000000000000000000000	e of Conta Jack Nig	,	ASBESTOS LICE	CINTelephone Num	ber	_		
	L						FORMATION	- mi 24-24-1	AND THE PROPERTY OF THE PROPER	-	-		
Name of Facility Where	Abatement is	Taking	Plac	e (3)		OILITT III		Type of Facilit		17,000	100		
Passaic County Cou				.05/65			Contractor -	School (K-					
Street Address 63-71 Hamilton St.,								Other (i.e.,	r 8 (Other than K-1 private & commerc		lding	3,	
City (5)								homes, etc Square Feet	# of Floors	TE	Bldg.	Age	
Paterson			-mulion				W	80,000 SF	4	100	0+	.5-	
County (6) Passaic				32.52.50.00		inty Code ONLY)	(7) (STATE	Current Use (F	Prior if being demoli	shed)			
Name of Monitoring Firm	Hired by Bu	ilding C	wner		ASCM	No.	Name of Abatem	ent Contractor (	9)				
(8) Langan Engineer	ing Service	es Inc			0009	9	Valiant Asso	ciates, LLC					
Street Address							Street Address		***				
River Drive Center (	One, 4th Fl	oor					145 Mill Stre						
City, State, Zip Code Elmwood Park, NJ 0	7407						City, State, Zip C Paterson, N						
Project Manager for Mon	itoring Fi <b>rm</b>			Te	ephone	No.	Telephone No.		License No.				
Vijay Patel						00 x 4544	973-553-537	74	01108				
Start Date (10)					etion Da	ate (11)	Name of OSHA N						
05/18/2011 Occupancy Status During	a Abatament		9/20	-			Valiant Asso Street Address	clates, LLC					
Facility Closed/Vacate					ement		145 Mill Stre	et					
Abatement Performed							City, State, Zip C				-		
Other - Describe:							Paterson, NJ						
Scope of Work (Check a	II that apply)			******									
>3 sf or >3 lf 2160 sf or 2260 lf				enova emo	tion Iition		☐ Mini-End ☐ Goveba	losure g Procedure	egative Pressure				
			Is	Locati	on	I	Non-Ex	empted (*) and	Non-Friable Proce	1	Ahate	ment	
				ormal			_			1	Ту		6
Location of Asbestos-Containing M		)		ntena	ly by nce/	Asbes	Description of tos Containing Mate		Amount				
TO BE ABAT				ustodi staff?		(i.e.	<ul> <li>thermal systems in surfacing, VAT,</li> </ul>		(Specify SF or LF)	Re	Z	Encapsulate	Enc
(13)				(12)			other miscellaneo		SF OI LF)	Removal	Repair	psul	Enclosure
						1				al	=	ate	ē
1st Floor Corridor			Yes	No	N/A X	Elbow	Insulation		3 LF	X			
1st Floor Map Room			X	Elbow	Insulation	CONTRACTOR OF THE PARTY OF THE	3 LF	X					
Second Floor Room			X		Insulation		3 LF	X					
· · · · · · · · · · · · · · · · · · ·					1				median di alemania	1	-		
Name of Registered Was	te Hauler			Т	NJDEP	Waste	Cubic Yards	Name of Reg	istered Landfill				
Service Transport Gr	oup				dauler II 20990	No.	of Waste 2 CY	Minerva L	andfill				
City, State							Disposal Date	City, State		75 - S		-	
New Castle, DE	4			10			05/19/2011	Waynesbu	rg, OH 44688				
Completed By		Title					Signature	Pl	Date				
Miodrag Stamenovic		Pres	ident	t			Moindra	P COOLINA	en to 13/08/	2011			

#### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

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

Date of Notification (1	) 9/2012					g Owner/Operator damo Realty	(2)	GEIV	E			*
Agencies Notified  EPA	Type Notific				t Address Bergen I	3lvd.		MAY 1 1 20	12		1	
DEP DOL	Amende Amende		_		State, Zip o gefield, N	Code NJ 07657		- Commence of the comment of the com	es mente la con-		New Country	
DOH DCA	justifica  Cancella	ition)	9		of Contac Attilio Ac		Later decontraction of the second	Telephen Mull	iben)	zrena		
				FA	CILITY IN	ORMATION			7			
Name of Facility When Residence	re Abatement is	Taking Place	∋ (3)				Type of Facilit		21			
Street Address 55 West Edsall Av	/e.							private & commerc	CO. 5. VV.	dings	ι,	
City (5) Palisades Park							Square Feet 2,000	# of Floors		ldg. / 0+	Age	
County (6) Bergen					nty Code (	(7) (STATE	Current Use (F Vacant Resid	Prior if being demol	ished)			
Name of Monitoring Fi	irm Hired by Bu	ilding Owner		ASCM N/A	No.		nent Contractor ( I Constructio					
Street Address		The second secon		***************************************		Street Address 1360 Clifton,	Avenue, PM	B Suite 218				
City, State, Zip Code						City, State, Zip C Clifton, NJ (	ode 07012	4				
Project Manager for M	lonitoring Firm		Tel	ephone	No.	Telephone No. 973-389-00	89	License No. 00693				
Start Date (10) 5/19/2012		Scheduled 0 5/20/201		etion Da	ate (11)	Name of OSHA	Monitor I Constructio					
Occupancy Status Du		(Check only	one)			Street Address						_
Facility Closed/Vac						1360 Clifton City, State, Zip C	Avenue, PN	/IB Suite 218				
Other - Describe:	***************************************					Clifton, NJ 0	7012					_
Scope of Work (Check >3 sf or >3 If >160 sf or >260 If	k all that apply)	⊠ R	enova Demo			Mini-En Goveba	closure ag Procedure	egative Pressure  Non-Friable Proc	edure			
		[4] CHANG	Locati			TANONE	xomptou ( ) und	THE PROPERTY OF	T	Abate Ty	ment	
Locatic Asbestos-Containing <u>TO BE AB</u> IN Fac (13	g Material (ACM <u>BATED</u> ility	Use Mai	d Sole ntenar ustodi staff? (12)	ly by nce/ al		Description o tos Containing Mar , thermal systems i surfacing, VAT other miscellane	terial (ACM) insulation, , or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A	D: /E1	1 T 1.4		70.1.5	-	-	-	
Basement				X	Pipe/El	bow Insulation		70 LF	X			
				-								
Name of Registered V	Vaste Hauler			NJDEP		Cubic Yards	Name of Reg	istered Landfill				
Service Transport	Group		_  '	1auler II 20990	D No.	of Waste	Minerva L	andfill				
City, State New Castle DE						Disposal Date 5/20/2012	City, State Waynesbu	rgh OH	1 2700			
Completed By Krutarth Jagad		Title Presiden	t			Signature	D	Date 05/09	/2012			
			MATERIAL PROPERTY.	NAME OF TAXABLE PARTY.			( / ·			-		

Dag Floj. II	1419 14-102						formation on a seco	Simulative state of the		· ; · · · · · · · · · · · · · · · · · ·	Maria Sec.			
	£1		1.1			E 11	1137	<b>元</b>		1///	in par	77		
Date of Notification	(1)	Name of	Building O	wner/Op	perator (2)			THE WAY		14 1				
0 5 1/10 8	1/112		INICK LC	RELL	I							15		
Agencies Notified	Type Notification	Street A					10 1	MAY	11	2012	- 11 /			
☐ EPA	Initial Amended	384 1	O. FULL	ERTO	N AVENU	JE						i		
☐ DEP	Amendment #:	City, Sta	ate, Zip Cod	le						AUL &				
□ DOL	Emergency		NTCLAIR	, NJ					elephor		ber	T		
<b>⋈</b> DOH	(including	Name o	Contact				Olean.	S-10,1				J		
☐ DCA	justification)  Cancellation	DO	MINICK I	LOREL	.LI						1 1000	ne 204		
	Cancellation		F	FACILIT	Y INFORM	ATION		1, 2,000						
	L betomont is to	king place (3)	1					Type of	Facility School	(4) ol (K - 1	12)			
Name of facility w	here abatement is ta	King place (e	5.5 -					1 -	_		Other	than	K-12)	
DOMINICK I	ORELLI								7 Other	r (Privat	e/Comm			
Street Address									Bldgs	s./Home	s, etc.		Bldg.	Age
204 NO EU	LERTON AVENU	JE						Squar	e Feet	# of F	loors		Jiug. i	Age
	LEKTON AVEN	County (6	)				Code (7)		-111	Dring if I	being de	molis	shed)	
City (5)						(State	use only)	Curre	ent Use (	(Prior if I	being de	HOIIS	.,,,,,,	Try case of
MONTCLAI	IR	ESSEX					lame of Abatemen	t Contract	or (9)					
Name of Monitor	ring Firm Hired by Blo	lg. Owner (8)		1	ASCM No.		D & S RESTOI							
							treet Address	CITION	,					
Street Address						110	20 California	Ave.						
							ity, State, Zip Cod	THE RESERVE TO SHARE VEHICLE AND ADDRESS OF THE PARTY OF		Holl Head			(4)	
City, State, Zip C	ode						Paterson, NJ (			12 mm - 10 mm -				
			I Dhann	Numbe	r	<sub> T</sub>	elephone Number			Lic	ense Nu			
Project Manager	for Monitoring Firm		Phone	Mullipe	•		973-345-802	20			001:	)9		
	ora move esta			1- 74 4 1			Name of OSHA Mo							
Start Date (10)	)	Sched. Co	ompletion D	ate (11)		11	D & S Restor	ation, Inc	). 					_
05/18/12	*	05/31/12					Street Address							
Occupancy Stat	us During Abatement	(Check only	one)				20 California							
☐ Facility of	ening between	entire period	of abatemer	nt.		119	City, State, Zip Co	ue						
	nt performed outside		illy flours-				Paterson, NJ	07503					7	
Other-De	scribe: NORMAL H	OURS				$-\Box$	Taterson, 1		ontainme	ent w/ne	gative pr	ressu	ire	
Scope of Work	k (check all that apply	)					l		nclosure		S			
$\ge 3$ sf or $\ge$	> <u>3</u> If ⊠	Renovation						☑ Glovel	bag prod	cedure	d Non-fri	ahla	nroce	dure
>160 sf c	or ≥260 lf	Demolition						∐ Non-E	xempte	d (*) and	J NOII-III	R	R	E
Location	of	Is location r	ormally use	ed solely	/		talala		Amou			e m	e p	n
asbestos	s-containing	by maintena staff(12)	ance/custou	liai	Descr	ription of a rial (ACM)	sbestos-containing	9		cify SF	or	0	a	c a
material	(acm) to be n facility (13)	Yes	No	N/A	mater	iai (7 totu)			LF)			v e	i	р
apated i		163			1 DIDE IN	SULAT	ION		39 L F	T				
BASEMEN'	Γ		X	===	PIPEIN	JEATIN	G PIPES		16 L F1	Γ				
BASEMENT	Γ		_X_		DAKE	HIAT I IIV	<u> </u>							$\boxtimes$
								-						
			5 11 1-15	#	Cubic Yard	s of Waste	Name of Regis	tered Land	dfill					
Registered Wa	aste Hauler TORATION, INC		P Hauler ID )6	)#	2 YDS		TULLYTO	WN, RES	SOURC	E REC	COVER	Y		
City, State				isposal			City, State	WINT DA						
PATERSC	N, NJ 07503			05/19/			TULLYTO	WIN, FA			Date			
Completed by	(Print or Type)	Title	D 1717	N. Carlotte	Signatu	ire					05/08/	12		
BOGDAN	JOLDZIC	PRESID	this form f	or ashe	stos licensu	re exempt	ted activities.						action (follow)	V
-		* Do not use	e mis form f	oi asue:	3,00 11001100	,								

ASB-41

DASPROJ.#: MN 12-16	i4	ava	No	ification of As	besine Absternant	X 10 S. 30 .YAM			ţ
REME		MAIL II	V HARD (	OPY 1	C 8:00 and 12:120)	DOL'-	10 DAY	4	
Data of Notification (1) [0  5  / 0  9  / 1  2	difference to the playment of	L calmitted C	A manifold 44	Mon(Opprator (2	E (C II II II II				
Agencies Notified Type Notified EPA Initial		NAN Stroot A	CY TUMP	OSKY	S IS II W IF	MAY	8/2012		
DEP Amende			AY STRE		MAY 1 1 2012	TIMA	ADURON	JED.	
DOL Amendmen		1	to, Zip Code	2 1		WANTE	VOLUME	IEU	
DOH (Including	1	NOM Nome of	Contact	NJ 07042	APRESTAG CONTRACT				i 4
DCA Cancella		1	CY TUME	OSKV	LIGENSING -	Telepho	one Number	and deal fifth	
			William .	CILITY INFORM	<b>STION</b>		2		
Namo of facility whore abatemen	ıl la taking	(E) eoskq		- TAT OTTO	T	Type of Facility	745		- 10091
NANCY TUMPOSKY						Scho	(4) ol (K - 12)		
Sfreet Address						Subc	hapter 8 (Other	than K	-12)
8 GRAY STREET						Bldgs	(Private/Comm /Homes, etc	orcial	
City (5)	Co	unty (b)	170		County Gode (7)	Square Feet	# of Floors	Ble	dg. Age
MONTCLAIR	l Es	SSEX			(State use only)	Current Use (F	rior if being der	nolisho	nd)
Name of Monitoring Firm Hired b	y Bldg Own	101 (8)		ASCM No.	Name of Abatement				
Street Address					D&SRESTOR	10000 1000000			
in in invarious				,	Street Address				Sen V
City: State, Zip Code					20 California Av City, State, Zip Code	Ve.			
			i.e.		Paterson, NJ 07	502			
Project Manager for Monitoring Fin	m		Phono Numb	oor	Tolophone Number		License Numb	101	
Start Dote (10)	ISche	d Campia	tion Data (1	(	973-345-8020 Name of OSHA Month	for	00159		***
05/09/12	05/1		eou crata (.)	1)	D & S Restoration				
Occupancy Status During Abateme	nt (Chack o	inly one)			Street Address			Mary Company	
Facility closed/vacated during  Abatement performed outside  Describe	of normal	od of abai facility ho	ement. Ira-		City, State, Zip Code	cnue			
Other-Describe. NORMACT					Paterson, NJ 075	503			
Scope of Work (check all that appl					F	ull Containment w	negative pressi	ıre	******
2 160 of or ≥260 if	Ronovatio	1			⊠ G	Aini-enclosuro Novebag procedun Ann-Exempted (°) :	ond Non-friable	nrosod	la mes
Location of asbeston-conteining	by mainte	n normally manco/out	used solely stodial				R	R	E F
material (acm) to be abated in facility (13)	staff(12)		т—	Description of material (AC	of asbeatos-containing (M)	Amount (Specify St	or m	~	n n
•	Yes	No	N/A			LF)	0		a L
BASEMENT		X		PIPE INSULA	A MANAGEMENT CONTRACTOR OF THE PARTY OF THE	HILFT	N N	1	
		_X_		VERMICULI	I'E	5 SQ PT			
						+		#	411
								711	111
ogistered Wasto Haulor  2 & S RESTORATION, INC.	NJDE 1350	P Mauler   06	7.0	bic Yards of Was YDS		andfill	Nº		1   1
ity, State PATERSON, NJ 07503		7	Disposal Do 05/10/12		City, State TULLYTOWN, P		UVERY		
ompleted by (Print or Type) BOGDAN JOLDZIC	Title	'A IO'		Signature		^	Date	. District	
	PRESIDE		OF appositor	liconsure exemp	tad pollution		05/08/12	-	<del>-</del>
Marine to the second se					or phianipp.				

### D&S Proj. #: MS 12-164

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

							3,3		1 X 81 1 71	a.anmy			
Date of Notification	1(1)		Vame of B	uilding Own	er/Operator (2)	)	III-NE			111	1		
10 15 1/10 19			NANCY	TUMPO	SKY		= -   -  -						
Agencies Notified EPA	Type Notifica	tion	Street Addr	ess			11111	11412 1 T 01	nn III	111			
☐ DEP	Amended		8 GRAY	STREET	Γ			MAY 1 1 2	)12	4			
_	Amendment#	:  [7	City, State,	Zip Code			4		II.	T			
⊠ DOL			MONT	CLAIR, N	J 07042		-	ASSESTED CONTRO	l ä	1			
□ DOH	(including justification)	N	lame of Co	ntact	Magnet and		Market and the second	Telepho	ne Numbe	F		-	
☐ DCA	Cancellation	11	NANC	Y TUMPO	OSKY			3.4209.D					
				FAC	ILITY INFORM	ATION							
Name of facility wh	nere abatement	is taking pla	ace (3)			<u> </u>		Type of Facility	(4)				
NANCY TUM	POSKY								ool (K - 12)		V	10)	
Street Address									hapter 8 (0 r (Private/0			-12)	
									s./Homes,		ioiai		
8 GRAY STRE	BET							Square Feet	# of Floo	rs	BI	dg. A	ge
City (5)		Cour	nty (6)				nty Code (7)						
MONTOLAD		FO	31737		7	(Sta	te use only)	Current Use (	Prior if beir	ng dem	olishe	ed)	
MONTCLAIR Name of Monitorin			SEX		4001411	L_	INCOME OF Abotemen	1 (0)					
Name of Monitorin	g riiiii mileu by	blug. Owne	11 (0)		ASCM No.		Name of Abateme	7.60					
- 67 - 74 11						_		RATION, INC.					
Street Address							Street Address						
0. 0 7. 0.1							20 California		our all the North Walland		SHIRING	*	
City, State, Zip Cod	е						City, State, Zip Cod						
5				<del></del>		_	Paterson, NJ		11.				
Project Manager for	Wonitoring Firm	1	P	hone Numb	er		Telephone Number 973-345-802		License	Numb 10159	er		
							Name of OSHA Mo			0139		-	
Start Date (10)		Sched	. Complet	ion Date (1	1)		D & S Restora						
05/09/12		05/15	5/12				Street Address	ition, me.					
Occupancy Status [	Ouring Abateme	nt (Check o	nly one)	***************************************			20 California	Avenue					
Facility closed	d/vacated during	entire perio	od of abate	ement.			City, State, Zip Coo						
Abatement per Describe:	erformed outside	of normal t	facility hou	rs-									
Other-Describ	oe: NORMAL H	IOURS				-1	Paterson, NJ	07503					
Scope of Work (ch				-			Г	Full Containment	w/negative	press	ure		
$\ge 3$ sf or $>3$ If	×	Renovatio	n					Mini-enclosure					
≥160 sf or ≥2	-	Demolition	1				2	Glovebag proced					
				used solely	,			Non-Exempted (	) and Non-	TR	Proce		
Location of asbestos-con	taining	by mainte	enance/cus		1	on of a	sbestos-containing	Amount		е	e	E n	E
material (acm	n) to be	staff(12)		T	material (		spesios-containing	(Specify	SF or	m o	p a	C	n
abated in faci	lity (13)	Yes	No	N/A				LF)		v	i	a p	L
BASEMENT			TX.		PIPE INSU	LATI	ON	111 L FT		e			
ATTIC			X		VERMICU	LITE		5 SQ FT			П	П	
						in the same	The state of the s			1	F	П	愩
										I	n	I	百
Registered Waste H			EP Hauler	ID# C	ubic Yards of V	Vaste	Name of Register	ed Landfill		-			
D & S RESTOR		135		2	YDS			N, RESOURCE R	ECOVE	RY			
City, State				Disposal D			City, State	0.00					
PATERSON, N.				05/10/1			TULLYTOW	N, PA					
Completed by (Print		Title	ENT		Signature				Date	/12			
BOGDAN JOLI		PRESID		for achoes	e licensure ex	ampter	1 activities		05/08	12			

### 3/8

10 11 115 11	45		- 1.		(D)	1-1: (	2	- (2)		1 12	11	111	
Date of Notification	OROGEO					5	Owner / Operator	(2)	The second second second second second second	Telephone (C)	$\neg H$		Wit.
	5/6/2012				tro R		state				#	H	3 1
Agencies Notified	Type Notifica	ation	100		Addre				MAY 1 1 20	112	11	71	The state of the s
⊠ EPA	57 1-11-1			1977	Jnion State 8	1-12-12-13-13-13-13-13-13-13-13-13-13-13-13-13-	ada	-			House		¥ 1
□ DEP     □ DOL	☐ Initial		100		State &			1 -	ACDECTOR OCCUPA	Andreas and the second	The same of		15
					le , NJ		00		ASBESTOS CONTROL LICENSINGTE	enho	ne N	umhe	ər
□ DOH		gency ellation			of Cor		_	tory later to see any	CIOCH SIMPLE	epilo	110	1	7
☐ DCA	Cand	eliation	1	KICH	aru De	ereur	<b>)</b>	(	range of the second	ensome ya	-		ĝ,
			W//=	FA	CILIT	Y INF	ORMATION	Street .	***** *** ****			-6"	7
Name of Facility WI Apartments	here Abateme	ent is Taking P	lace (3	)			Type of Facili School (F						
Street Address				William Co.				ter 8 (Other th					
606 West Maple							Other (i.e	e. private & co	mmercial buildings	, hom	es, e	tc.)	
							Square Feet	# of Flo	oors Bld	g. Ag	е		
City (5)		County (6)	Cou	unty (	Code (	7)	20000		2		+08		
Merchantville		Camden						Prior if being	demolished)		-		
Name of Monitoring	Cirm Hirad h	y Building Own	ner (8)		TASC	M No.	Name of Ahat	tement Contra	ctor (9)				
	i Fillii filled b	by Building Owi	iei (0)		1,30	IVI IVO.	ALPHA EN	/IRONMENT					
Street Address							Street Addres	SS					
City, State & Zip Co	y, State & Zip Code						City, State &				7. =		
							Hamilton, N		License Nur	mher			
Project Manager for	oject Manager for Monitoring Firm					er	215-295-100		Election Iva	0109	1		
Scheduled Start Da	100000000000000000000000000000000000000	Scheduled Cor	mpletio	n Da	te (11)		Name of OSF						
5/16/201	to the second second	5/26/2012					EMSL Analy						
Occupancy Status I	During Abate	ment (Check o During Entire F	nly one	e)	atemei	nt	Street Addres						
		utside of Norm					City, State &						
Describe:	renonned O	utside of North	ai i iot	113	rain to	, opin	Westmont,				62		
	upied During	Abatement					Westinone,	110 00 100					
Scope of Work (Ch				-						-23.47			
Coops of From (cir	oon an anat an	-177						Full Co	ntainment with Neg	gative	Pres	ssure	1
≥3 sf or ≥3	lf		$\boxtimes$	Rer	novatio	n			nclosure				
≥160 sf ≥26	O If			Der	molition	1		Glove	Bag Procedures				
			-					☐ Non-Ex	xempted and Non-F	riable	e Pro	cedu	re
1	ocation of		Isl	ocat	tion		Description		Amount		atem		
V-23	tos-Containin	ıa			Used		Asbestos-Con		(Specify		Ι	Ι	
	terial (ACM)	5		olely			Material (A		SF or LF)	70		Encapsulate	ш
	BE ABATED				nce or		(i.e., thermal s			Remova	Repair	cap	Enclsoure
i	n Facility		Custo		Staff?		insulation, surfactor or other miscell			ova ova	air	suls	0
	(13)		Yes	(12) No	N/A		or other miscen	aneous)		_		ite	(D)
						-	Pipe Insula	ation	800lf repair	$\Box$	$\boxtimes$	П	П
Basement				Ц			ripe insuit		estimate 100ft	ا			
Name of Registered	d Waste Hau	ler			JDEP V			Name of Re	gistered Landfill		-		
				100000	auler IE	No.	of Waste	C	deill				
Service Transpo	rt			20	990		Dianagal Data	Grows Lar City, State	IQTIII				
City, State					Disposal Date	Oity, State							
New Castle, DE	ew Castle, DE						various	Morrisville	, PA				
	mpleted By (Print or Type)						Signature			Date			
Rod Richardson							Rod Richardson			5/6/	1201	12	

CK 1290

12		NOT	FICATION :	te of Hew Jersey OF ASBESTOS	abatem	ent	market and the state of the sta	artifikasibe .			38%		
		(		o NJAC 8:60 divi	Alba Marie	12-76-7	922 - 22 N	Cale of	Health & S	remor	Servi	:63	-
Date of Notification (1)				Building Owner/C	permit	Charge II	D E	1 West	signature	1	Auth.		
5-9-2012				Vasques	111 11	L (	7 C				100		
Agencies Notified T	ype Notification		Street Ad 14 Fra	nklin Street	IN		han.		The second secon	Particular de la constanta de			
DEP DOL	Initial Amended			le, Zip Code Srange, NJ	Carried Control	I M	AY 1	2012		dougle de			
DOL IS	Amendment#			<b>v</b> .	1-	-		Telapi	hone Numb	er			
E 00H	justification)  Cantalization		Name of	Contact	P B	ASE	SESTOS CO	DETROL &					
J DCA L	_ Campassion	-		LITY INFORMAT	ION.	INCOMEDIATION OF		tuc	Nove Control ( 1)			-	
Name of Facility Where Ab	atement is Talding	Place (3)				Type o	Facility (4	<b>!</b> )	ii.				
House for Demo				f.,,	.,	S S	chool (K-1	2)	than K-12)	1,2			
Street Address						國。	upenapiei Their (I.e., P	nivate & c	Submercial orange (4, 17)	buildir	ngs, h	omes	ī,
815 East 19th Street							(c.)	# of F			ig. Ag		g j j w
City (5)						union		2	10014	50			
Paterson			Coumbe	Coda (7)				or if being	demolishe	ed)	M2716 (1)		
County (6)			CANAL	USE ONLY)		Hous	se for De	mo					
Passalc Neme of Monitoring Firm F	tined by Building C	wner (6)	ASCA	A No.			ement Cor		3)				
MS is the second of the control of t	noco ay amang a		n/a		Jack	ar Con	tracting,	LIC					
Street Address					1	Addres							
n/a		January 1				roy La							
City, State. Zip Code						State, Za	rk, NJ 0	7035					
n/a				Nr-		hone No			License No	).			_
Project Manager for Month	oring Firm		Telepho n/a	me No.	H 400000000000	-708-7			01088				
n/a	1	Scheduled	1	Date (11)			A Monkor					,	
Start Date (10) 5-10-2012	- [		-20				N.						
Occupancy Stable During	Abstement (Checi	_		-	Stree	Addres	Ś						
Facility Closed/Vaces			dement										
Abatement Performs	d Outside of Norm	al Fecility H	ours		City,	State, Zi	p Code						
Other - Describe: _				-		ston t	sage er	FATTA	CHED W	preist p	ROC	EDL	1RO
Scope of Work (Check Al	That Apply)				. 1				Negative P				
☐ ≥3 sf or ≥3 ff			overtion		-	- LA	I-Endosu	ICIAL CONST.					
		Prince -							1				
2160 st or ≥260 %			nolltion			Ch	webag Pro	ncedsută	Non-Friab		erium	1	t
<b>2160 at or ≥260 f</b>		Der	nolltion			Ch	webag Pro n-Exempte	ncedsută	Non-Friab	le Proc	Abanc	ment	
≥160 at or ≥260 %		Der le Le	nolltion ocadon			Glo No	webeg Pro	ncedsum	Non-Friable	le Proc	Abak Ty	ment	
Location		la Le Nor Used	nolltion ocation multy Solely by	Achestra C	Descriptio	Glo No Motorisi	(ACM)	ed (°) and	noist	le Proc	Abane Ty	ment 99	0
Location Asbestos-Containing TO BE ASA	Material (ACM) ATED	le Le No: Used Maint	nollion ocedon	Ashestos Co	Description ordering and system	Glo No: Motorisi	(ACM)	edure ed (") and Ar (S		le Proc	Abane Ty	ment 99	SHOW SHOW
Location Asbestos Containing TO BE ASA	Material (ACM) ATED	le Le No: Used Maint	nothion ocation multy Solely by enance/	Ashestos Co (I.e. them	Descriptio	Motories Meteries instruction	(ACM)	edure ed (") and Ar (S	nount pecify	le Proc	Abanc	ment 99	Chemania
Location Asbestos-Containing TO BE ASA	Material (ACM) ATED	le Le No: Used Mairi Custos	notion  cation  multy  solety by  enance/ fial Staff?	Ashestos Co (I.e. them sui	Description of the contract of	Motories Meteries instruction	(ACM)	edure ed (") and Ar (S	nount pecify	le Proc	Abane Ty	ment	cholognia
Location Asbestos Containing TO BE ASA In Facili (13)	Material (ACM) <u>NTED</u> Ty	le Le Nor Used Maint Custos	notition ocasion multy solety by enance/ ital Staff?	Ashestos Co (I.e. them sui	Description on taining hall system facing. V or mlacelle	Motorial Material Material AT. or aneous)	Example (ACM)	edure ed (") and Ar (S	nount pecify	le Proc	Abane Ty	ment 99	EACIDENTS
Location Asbestos Containing TO BE ASA	Material (ACM) <u>NTED</u> Ty	le Le Nor Used Maint Custos	notition ocasion multy solety by enance/ ital Staff?	Ashestos Co (I.e. them sui	Description on taining hall system facing. V or mlacelle	Moterial install AT. or anneous)	Example (ACM)	edure ed (") and Ar (S	nount pecify	le Proc	Abane Ty	ment 99	EACIDENTA
Location Asbestos Containing TO BE ASA In Facili (13)	Material (ACM) <u>NTED</u> Ty	le Le Nor Used Maint Custos	notition ocasion multy solety by enance/ ital Staff?	Ashestos Co (I.e. them sui	Description and system facing. Ver miscelle possed	Moterial install AT. or anneous)	Example (ACM)	edure ed (") and Ar (S	nount pecify	le Proc	Abane Ty	ment 99	CACIOSTIA
Location Asbestos-Containing TO BE ASA In Facili (13)	Material (ACM) <u>NTED</u> Ty	le Le Nor Used Maint Custos	notition ocasion multy solety by enance/ ital Staff?	Ashestos Co (I.e. them sui	Description and system facing. Ver miscelle possed	Moterial install AT. or anneous)	Example (ACM)	edure ed (") and Ar (S	nount pecify	Remove	Abane Ty	ment 99	Ciciosnie
Location Asbestos Containing TO BE ASA In Facility (13) Entire Stru	Material (ACM) TED Ty  Inclure	le Le Nor Used Maint Custos	notition methy solety by enance/ tel Statt? 12) No N/A	Ashestus Co (I.e. them sun other To be dis	Description antering and system facing. Ver miscella possed waste	Glo No.  Motorisi Motorisi AT. or aneous)  as Ash	(ACM)	Ar (S)	nount pacify or LF)	Zemove Remove	Abane Ty	ment 99	
Location Asbestos Containing TO BE ASA In Facili (13)  Entire Stru  Neme of Registered Was	Material (ACM) TED Ty  Inclure	le Le Nor Used Maint Custos	notition ocasion multy solety by enance/ ital Staff?	Asbestus Co (I.e. them sui other To be dis	Description on terming that system facing. Ver muscelle possed waste	Glo No.  Motorisi Motorisi AT. or aneous)  as Ash	(ACM)	Ar (S)	nount pecify	Zemove Remove	Abane Ty	ment 99	0.0000
Location Asbestos Containing TO BE ASA In Facility (13) Entire Stru	Material (ACM) TED Ty  Inclure	le Le Nor Used Maint Custos	notion  contion  mally Solety by enance/ fall Starr? 12)  No N/A	Asbestus Co. (I.e. them sun other  To be dis	Description on terminal system of a system	Glo No.  No.  No.  No.  No.  No.  No.  No.	(ACM)	Ar (S SF	nount pacify or LF)	Zemove Remove	Abane Ty	ment 99	Chicago
Location Asbestos Containing TO BE ASA In Facility (13) Entire Structure of Registered War	Material (ACM) TED Ty  Inclure	le Le Nor Used Maint Custos	notion  contion  mally Solety by enance/ tal Starr? 12)  No N/A	Asbestus Co. (I.e. them sun other control of the co	Description on terminal system of a system	Glo No.  No.  No.  No.  No.  No.  No.  No.	(ACM)	Ar (S SF	nount pacify or LF)	Zemove Remove	Abane Ty	ment 99	CIC Pour o
Location Asbestos-Containing TO BE ASA In Facili (13) Entire Stru Neme of Registered Was	Material (ACM) TED Ty  Inclure	la Le No: Used Mairi Custor Yes	notion  contion  mally Solety by enance/ tal Starr? 12)  No N/A	Asbestus Co. (I.e. them sun other control of the co	Description Intering and System facing. Vermiscella Waste Waste BD posel Description of the Parket P	Glo No.  Motorisi Motorisi AT. or aneous)  ES Asb	(ACM)	Ar (S SF	nount pacify or LF)	Zemove Remove	Abane Ty	ment 99	E Total of
Location Asbestos Containing TO BE ASA In Facili (13) Entire Stru Neme of Registered War Yannuzzi & Sons D	Material (ACM) TED Ty  Inclure	le Le Nor Used Maint Custos	notion  casion  melty Solety by enance/ lai Stat?  12)  No N/A  NJOEP Hauler I  17497	Asbestus Co. (I.e. them sun other control of the co	Description on terminal system of a system	Glo No.  Motorisi Motorisi AT. or aneous)  ES Asb	(ACM)	Ar (S SF	notati pacify or LF)	Remove	Abore	ment 99	E Princer o

### J-1914

Date of Notification (1) 5/9/2012				Name of J. SUP		Owner/Operat	tor (2)		EGE		E		Constitution of
Agencies Notified	Type Notification			Street Ac 500 SU		OULEVAR	RD, B	UILDING #1	1 <sub>MAV 1</sub>	1 201	(1)	The state of the s	Total Control
DEP  DOL	Initial Amended Amendment				te, Zip Coo ISON, N	de J 07029		The second secon	, and a second		t en	Tendosco	distance of the last of the la
☑ DOH DCA	Emergency (i justification) Cancellation	ncluding		Name of MARK	Contact A. TRIA	NO		The Continuence	Telephone Ni	imber l	3		
			!	FACIL	ITY INFO	RMATION			160		F 157		
Name of Facility Where A PARKING DECK	Abatement is Taking	Place (3	)				Ty	pe of Facility (4 School (K-12	!)	10)			
Street Address 1000 FRANK ROG	ERS BOULEVA	RD					×		3 (Other than K- ivate & commer	cial buil			es,
City (5) HARRISON								quare Feet	# of Floors		ildg. A	.ge	
County (6) HUDSON				County C	Code (7) ISE ONLY)	-	Cı	urrent Use (Prior	r if being demoli	shed)			
Name of Monitoring Firm N/A	Hired by Building C	Owner (8)		ASCM	l No.	CONTROL		Abatement Cont BROTHERS (		NG			
Street Address			- 31				et Ado	dress JTHERFORD	BLVD.				
City, State, Zip Code					City	, State	e, Zip Code						
							ON, NJ 0701						
Project Manager for Mon	litoring Firm		Telephor	ne No.		ephone 73-95	e No. 6-8700	License 00494	No.				
Start Date (10) 5/19/2012		Schedule 5/22/20		mpletion [	Date (11)			OSHA Monitor AS (9) ABO\	/E				
Occupancy Status Durin	g Abatement (Chec	k Only On	e)		-	Stre	et Ad	dress					
Facility Closed/Vac Abatement Perform Other – Describe:	ated During Entire F led Outside of Norm	Period of A al Facility	Abater Hour	ment s		City	, State	e, Zip Code					
Scope of Work (Check A	II That Apply)						- A						
≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf		-	enov emol				×	Full Containment Mini-Enclosure Glovebag Proce Non-Exempted	edure			·e	
		1	Loca	tion				THOIT EXOTIPIES	( ) dira itani i iii		Abat	emen	t
Location	n of	1	Norma	illy	_	Descript	ion of	46		-	Ty	/pe	_
Asbestos-Containing TO BE AB In Faci (13)	Material (ACM) A <u>TED</u> lity	Ma Cus	intena todial (12)	Staff?	Asbest (i.e.	tos Containing thermal system surfacing, other misce	g Mate ems in VAT, o	sulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A			-				-	-	-
ATTI	C		X			PIP			15 LF	X	-		
ROC	F	X	-	TI	RANSITE I	ROO	FING	200 SF	X				
Name of Degistered We	eto Hauler			NJDEP W	aste	Cubic Yard	s	Name of R	Registered Land	ill			
Name of Registered Wa TWO BROTHERS		Hauler ID 18743		of Waste		2000	MANAGEM		6.R.C	D.W.	S.		
City, State CLIFTON, NJ					Disposal Da 5/22/20/12		City, State MORRI	SVILLE, PA					
Completed by VIVECA RAMOS		Title SEC	RET	ARY		Signat	ture	cala	100	Date 5/9/20	12		



Date of Noti						r / Operator (2)		153 U UU E		,
Agencies N		e Notificatio	n	Nick Kouro Street Addres			EC			Ť.
Х	EPA		gency Notification			1100	1	-		1.1
	DEP		Notification	City, State & Elizabeth, N			II MAY	1 1 2012		- [
	DOT DOH	51.2 R.W. 1. P. 1.	ided Notificatior ellation	Name of Con		1	mh .	1.00 S S114	Telephone	Number
	DCA	Cario	eliation	Kouroupas		1	OCHENT	OS DOMESTICAL A		
	DOM:			FACILITY		MATION	110000	CENSING	TA CAPTAGE	
Name of Fa	cility Whe	ere Ahateme	nt is Taking Pla			ype of Facility (4	)	Marine Street	MA A THE STATE OF	1
I valle of to	ionity vvii	Commer	cial/Residence	e		School (K-12)	)			3,
Street Addr	ess	450.5	The are Are		,	Subchapter 8  Other (i.e., pr			nas homes	s. etc.
		150 1	Elmora Ave		1.775	quare Feet	# of Floo		Bldg. Age	, 0.0.
City (5)			County (6)	County Code (7		5000		3		60
	Elizabet	h	Union			urrent Use (Prio	r if being de	emolished)		
						esidential/Co				
			y Building Owne	er (8) ASC		ame of Abateme				
Environm		ctics, Inc				lobal Abatem	ent Service	ces, LLC		
Street Addr						treet Address 43 Schoolhou	ea Road			
64 Broad		lo.				ity, State & Zip (				
City, State Matawan,						Ionroe Towns				
Project Mar	nager for	Monitoring F		Telephone Numb		elephone Numb 32-605-9062	er	License	Number 00714	
Tom Geig		(10)		732-290-2217		ame of OSHA M	Ionitor		00714	
Scheduled	5/5/12	e (10)	Scheaulea Corr	pletion Date (11) 5/10/12		Global Abatem		ces, LLC		
Occupancy	Status D	uring Abater	ment (Check on	ly one)	1969	treet Address	as Dond			
				eriod of Abatemen		43 Schoolhou ity, State & Zip				
			utside of Norma	I Facility Hours -		flonroe Towns		8831		
	scribe. ner - Desc		ted During A	Jatement	"					
Scope of W	Vork (Che	ck all that ap	oply)	0.000					<u> </u>	
	molition		X Renovati	on				with Negative	Pressure	
	rge Projec			*			inclosure bag Proced	lura		
		3 SF or ≥ 3 > 160 SF or ≥	≥ 260 LF ACM		i e	X Glove Other	100000	iure		
- 40		cation of		Is Location		Description of		Amount		nent Type
	Asbest	os-Containin	ng	Normally Used	As	sbestos-Contain		(Specify		: Removal,
		erial (ACM)		Solely by Maintenance or	/i.	Material (ACM) e., thermal syste		Square Feet or		ncapsulation closure)
		E ABATED  Facility		Custodial Staff?		lation, surfacing,		Linear Feet)	OI LII	ologato)
	U	(13)		(12)		other miscellane		100 (C) 4 (C) 100 (C) 100 (C)		
-		Basemer	nt	N/A		Pipe Insulatio		12 LF		moval
	Ва	sement		N/A	Clean	up/Decontam	ination	40 LF	Rei	noval
		2				Pipe				
		Waste Hau	ler	NJDEP Waste Ha		Cu. Yds. of	All the second of the second o	Name of Reg	I istered Lan	dfill
	old Cart	age		1869	93	Disposal Da		City, State		
City, State Freeh	old, NJ				3	5/10		Tullytown,	Pa	
Completed	By (Prin		Title			Signature			2 2	Date
Domir	nick Trin	gali	Pres.			Dominic	k Tringal	1		5/8/12

Date of Notification (1) 05/09/2	2012				of Buildir		vner/operator Iomes	(2)		M	5	1	The state of the s
Agencies Notified	Type Notific	ation			t Address Witthill		d		W/\ 13 o	/110			The second secon
DEP	Amende			City,	State, Zip	Code					i		Laborate Control
DOL	Amendm Emerger	ncy (including	g	Ridg	gewood,	NJ 0	7450	į i.s			<u>ئ</u> ي.		1
DOH DCA	justificat	tion)	7	100000000000000000000000000000000000000	of Conta			3	Tolontaria Mirmbo				1
	L_ Caricella	iliOiT		Sydn	ey McPh	ee						* 0.7:EL-10	
				FA	CILITY IN	FORM	AATION						
Name of Facility Where Residential Property Street Address								Type of Facility School (K-1 Subchapter		) I build	lings		
242 Vivien Court	V							homes, etc		Dunc	inigo	P. (	
City (5)								Square Feet	# of Floors		dg. A	ge	
Paramus, NJ								2,500	_ 2	-	) +		
County (6) Bergen				Cou USE	nty Code			Residential P		hed)			
Name of Monitoring Firm	n Hired by Buil	ding Owner	T	ASCM	No.			ent Contractor (	9)				
(8) N/A				N/A		-	dar Contract	ing LLC					_
Street Address						-	eet Address						
N/A							Troy Lane						
City, State, Zip Code N/A							y, State, Zip C ncoln Park, l						
Project Manager for Mor	nitoring Firm		Tel	ephone	No.		ephone No.		License No.	- water			
N/A			N/.	A		-	3-706-7950		01088				_
Start Date (10)		Scheduled C	omple	tion Da	te (11)	1	me of OSHA						
05/21/12		05/23/12				-	lar Contract	ing LLC				_	_
Occupancy Status Durin							eet Address						
Facility Closed/Vacat	ed During Ent	ire Period of	Abate	ement		-	Troy Lane						
Abatement Performed	d Outside of N	lormal Facilit	ty Hou	irs			y, State, Zip C						
Other - Describe: S		r Demonu	OII			Li	ncoln Park,	NJ 07035					
Scope of Work (Check a	all that apply)		enovat emoliti				Mini-End Gloveba	closure la Procedure	egative Pressure on-Friable Procedure	e		,	
		Is	Locati	on			If and					ment	
	ila-	N	ormall	у			Danielian of				Тур	oe	
Location Asbestos -Containing M TO BE ABAT IN Facility (13)	//aterial (ACM) <u>FED</u>	Mai C	d Sole ntenar ustodi Staff? (12)	nce/ al		tos C , ther su	Description of containing Mat mal systems in refacing, VAT, er miscellaned	erial (ACM) nsulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A	YAT		. Acto was believed		150 SF	X			$\vdash$
Kitchen		_		X	VAT	-			150 51	^			
		-		-									
Name of Registered Wa	ste Hauler		T	NJDEP	Waste		bic Yards	Name of Reg	istered Landfill				
Jadar Contracting Ll	_	Hauler JI 2033 I	3 No.	-	Waste	G.R.O.W.S	. Landfill		_		_		
City, State Lincoln Park, NJ 07	035					U.S. Sales	sposal Date BD	City, State Morrisville	, PA				
Completed By		Title					Signature	0	Date	1/201	2	1000	
Lillie Lazarevich		Secretar	У				Fillie	Lagareres	2 05/09	9/201	2		

CX562

Date of Notification (1)	^			Name o	of Building O	wner/Operator (2		The State of the S	75			
5 / _	8 / 12					tners, LLc		EIW	GI	7		_
Agencies Notified  EPA	Type Notification  Initial			Street A	Address 00 Ocea	n Avenue		The same of the sa				
DEP DCA (NJAC 5:16) DHSS	Amended Amendment #			City, St Ask	ate, Zip Cod oury Pa	rk, NJ 077	12	Y 1 1 20%		71		
DCA (NJAC 5:23-8)	justification)  Cancellation			Name	of Contact	Bardsley	Rich I	Telephone Nun	nber ;	7		
	January Contracts			FAC	ILITY INFO	ORMATION	the place of	ent objecting program and design programs (August		K	1	
Name of Facility Where	Abatement is Takir	g Place	(3)				Type of Facility (					100/2011
Street Address	oe Avenue						School (K-12) Subchapter 8 Other (i.e., pr	(Other than K-1	2) cial buildi	ngs,		
City (5) Asbury Par							Square Feet 2700 sf	# of Floors		g. Ag 8 <b>5 y</b>		
County (6) Nionmouth	IK, IKO			Coun	ty Code (7)(S	STATE USE ONLY)			ished)			
	·		walld begin				former re	sidence				
Name of Monitoring Firm	n Hired by Building	Owner (	8)	ASCM I	10 TOTAL   10 TOTAL		ent Contractor (9)	- 4 A la - 4 a		00		
n/a						Inishing I	ouch Asbe	stos Abate	ment	00	ıρ.	
Street Address						N Description of the second	pson Stree	t				
City, State, Zip Code						City, State, Zip Co	ode					
0 0 to 0					*		ng Branch,					
Project Manager for Mon			Tele	phone I	No.	Telephone No. 732-222-8	372	00040				
Start Date (10) 26	, 12 Sche	eduled C		tion Da		Name of OSHA N	Monitor					
Occupancy Status Durin		ck only	ne)			Street Address						
Facility Closed/Vaca Abatement Performe Time of Abatement:	d Outside of Norm	al Facilit	y Hou	rs - Des	cribe AM	City, State, Zip C	ode					
Scope of Work (Check a	SAMINADAS ARTES INSTANT			-								
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>	and oppryy	□ R€	novat moliti			Mini-End Gloveba	itainment with Neg closure ig Procedure empted (*) and No		dure			
		Is	Loca	tion	T	DE NOIT-EX	sinpled ( ) dire ite			atem	ent T	уре
Locatio Asbestos-Containing TO BE AE IN Fac (13)	g Material (ACM) BATED ility	Use Ma	inten	ely by ance/ Staff?		Description tos Containing Manal systems insul VAT, or other miscelland	aterial (ACM) lation, surfacing,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A								L
Exterior Sidir	ng				sidin	g		3200 sf	□X		Ш	닏
						· ·						
							- 1					
Name of Registered With		s		NJDEP Haule2		Cubic Yards of Waste		stered Landfill WS Landfi	ill 1	Vor	:h	
City, State Oceanport,	NJ 07757-0	400		-		Disposal Date 5/29/12	City, State Morrisv	ille, PA		-		
Completed By (Print or Joseph P.	Type) T	îtle	Pre	sider	nt	Signature	Rynh	a	Date 5/8	/12		
				5,401		10	marile a	"				

2562

Date of Notification (1)	8 , 12					owner/Operator (2 rtners, LLc		V	W	II-a	1	1
Agencies Notified	Type Notification			Street A	Address 00 Ocea	an Avenue		MAY 11	201	2		
DEP DCA (NJAC 5:16) DHSS	Amended Amendment #	ludina	Ī	City, St. Ask	ate, Zip Co	ark, NJ 077	12	L. Alakili A. Ipo		,	Î	
DCA (NJAC 5:23-8)	justification)  Cancellation			Name o	of Contact eorge I	Bardsley	gent inquisipped	Telephone Number	er	•		
				FAC	ILITY INF	ORMATION	-services	Company of the Company of the Company	to a transfer	- prompte	y - 8	
Name of Facility Where	Abatement is Taking	Place	(3)				Type of Facility (					
Street Address	Last control of the second of						School (K-12) Subchapter 8	(Other than K-12)	huildi	nge		
1604 Webb	Street						homes, etc.)	ivate & commercial	bulla	ngs,		
City (5)	and the same of th						Square Feet	# of Floors		g. Ag		
Asbury Pa							2800 sf	2		0 +	yrs	3
County (6) Wionmouth				Count	,	STATE USE ONLY)	forme	or if being demolisher residence	ied)			
Name of Monitoring Fir	m Hired by Building C	wner (	3) /	SCM I		Name of Abateme		-4 Al4	+	C-		
n/a Street Address						Street Address	ouch Aspe	stos Abaten	ient	CO	ıρ.	
Street Address							pson Stree	t				
City, State, Zip Code						City, State, Zip Co	ng Branch,					
Project Manager for Mo	onitoring Firm		Tele	phone N	No.	Telephone No. 732-222-8		License No. 00040				
Start Date (10) 5 / 24	, 12 Sched			ion Dat		Name of OSHA N	1onitor					
Occupancy Status Duri	ing Abatement (Check	conly o	ne)	<del></del>		Street Address						
Facility Closed/Vaca  Abatement Perform Time of Abatement		Facility	Hour:	s - Des		City, State, Zip C	ode	100			-	
Scope of Work (Check  ≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf	all that apply)	□ Re	novati molitic	on on		Mini-End	a Procedure	gative Pressure on-Friable Procedur	e			
		Is	Locat	ion			1 1 1			ateme	ent T	уре
Location Asbestos-Containin TO BE A IN Fac (13	ng Material (ACM) BATED cility	Use Ma	Norma d Sole intena todial ( (12)	ely by nce/		Description of the store Containing Market Store Containing Market Store Containing Market Store Containing Co	aterial (ACM) ation, surfacing,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A							· CD	
Basemen	t				TSI			130 LF	CX			
									Ø			
								t				
Name of Registered W Finishing To	laste Hauler uch Asbestos	5		IJDEP V		Cubic Yards of Waste	Name of Regi	stered Landfill WS Landfill	١	Vort	:h	
City, State Oceanport,	NJ 07757-04	00				Disposal Date 5/29/12	City, State Morrisv	ille, PA				
Completed By (Print or Joseph P.	r Type) Title	e	Pres	sider	nt	Signature	200 m		<sub>ste</sub> 5/8/	12		

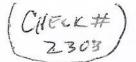
C\$62

		1.	lomo of	Building (	Owner/Operator (2	<del>-                                       </del>	- 12 E	LD		1	
12											
ation		5	110	ddress O Ocea	an Avenue		MAY III 20	2 -		Acres and a	
nent#	ding	C	Oity, Sta	te, Zip Co ury Pa	ark, NJ 077	12	Life and the control of			and the same of th	
tion)		1	Vame of Ge	Contact Corge	Bardsley	Text existing a series	Talephone Numbe		-		
			FACI	LITY INF	ORMATION		CONTRACTOR ON CASE		ON THE PROPERTY.		
Taking P	lace (3	3)				School (K-12)	(Other than K-12)				
						Other (i.e., pr	ivate & commercial	buildin	gs,		
						Square Feet	# of Floors 2.5				
			Count	Code (7)	(STATE USE ONLY)	Current Use (Pri	or if being demolish				
							sidence				
ilding Ow	ner (8	) A	SCM N	lo.					O		
					Finishing T	ouch Asbe	stos Abatem	ient	C01	ıρ.	_
						nson Stree	t				
					City, State, Zip C	ode					
					West Lor	ng Branch,	NJ 07764				
		Tele	phone N	lo.			00040				
Schedu 5					n/a	Monitor					
					Street Address						
Normal F	acility	Hour	s - Desc	cribe AM	City, State, Zip C	ode					
					L						
					及Mini-En 図 Gloveba	closure ag Procedure		70.			
	le.	Locat	tion	1	∐ Non-Ex	empted (*) and No	n-Filable Frocedu	100000	ateme	ent T	уре
CM)	Use Ma	lorma d Sole intena odial	ally ely by ance/ Staff?	Asbe (i.e., the	estos Containing M ermal systems insu VAT, or	laterial (ACM) lation, surfacing,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A					<u> </u>		_	<u> </u>
			×		TSI		240 LF		Ш	Ш	上
											L
+ 1	П	П									
estos			NJDEP Haule2		Cubic Yards of Waste	A contract of the contract of	istered Landfill WS Landfill	N	Vort	th	
		-	170		and the second second	01 01 1			100		
57-040	00				Disposal Date 5/25/12	City, State Morris\	/ille, PA				1
	Schedu  Schedu  5  It (Check ontire Period Normal Fem.)	Scheduled Co  Sc	action  cation  d nent # ney (including tion) ation  Taking Place (3)  Telep  Scheduled Complet  5 / 23  t (Check only one) ntire Period of Abater Normal Facility Hour PM/ PM-  CM)  Renovati Demolitic  Is Local Norma Used Sole Maintena Custodial Custodial Custodial (12) Yes No	Asbustation  attion  attion  Asbustation  Asbustation  City, Stat Asbustation  City, Stat Asbustation  Record FACI  Taking Place (3)  County  Telephone Normal Place (3)  Telephone Normal Facility Hours - Description  Normal Facility Hours - Description  PM/ PM-  Benovation  PM/ PM-  CM)  Renovation  Normally Used Solely by Maintenance/ Custodial Staff?  Custodial Staff?	Asbury Paration  Street Address 1100 Oce and Asbury Paration City, State, Zip Condestion Asbury Paration Asbur	Asbury Partners, LLc street Address 1100 Ocean Avenue City, State, Zip Code Asbury Park, NJ 077 Name of Contact George Bardsley  FACILITY INFORMATION  Taking Place (3)    County Code (7)(STATE USE ONLY)	Street Address 1100 Ocean Avenue    City, State, Zip Code	Asbury Partners, LLC  Street Address 1100 Ocean Avenue  City, State, Zip Code Asbury Park, NJ 07712  Name of Contact George Bardsley  FACILITY INFORMATION  Taking Place (3)  Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) Subchapter 9 (Other than K-12) Subchapt	Asbury Partners, LLc  Street Address 1100 Ocean Avenue  City, State, Zip Code Asbury Park, NJ 07712  Name of Contact George Bardsley  FACILITY INFORMATION  Taking Place (3)  Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) Type of Facility (4) Subchapter 8 (Other than K-12) Subchapter 8 (Other than K-12) Subchapter 8 (Other than K-12) Type of Facility (4) Subchapter 8 (Other than K-12) Subchapter 8 (Other than K-12) Subchapter 8 (Other than K-12) Type of Facility (4) Subchapter 8 (Other than K-12) Subchapter 8 (Other than K-12) Type of Facility (4) Subchapter 8 (Other than K-12) Type of Facility (4) Subchapter 8 (Other than K-12) Type of Facility (4) Subchapter 8 (Other than K-12) Type of Facility (4) Subchapter 8 (Other than K-12) Type of Facility (4) Subchapter 8 (Other than K-12) Type of Facility (4) Subchapter 8 (Other than K-12) Type of Facility (4) Subchapter 8 (Other than K-12) Type of Facility (4) Subchapter 8 (Other than K-12) Type of Facility (4) Subchapter 8 (Other than K-12) Type of Facility (4) Subchapter 8 (Other than K-12) Type of Facility (4) Subchapter 8 (Other than K-12) Type of Facility (4) Subchapter 8 (Other than K-12) Type of Facility (4) Subchapter 8 (Other than K-12) Type of Facility (4) Type of Facility (4) Type of Facility (4) School (K-12) Type of Facility (4) Type of Facilit	Asbury Partners, LLC  aution  Street Address  Street Address  Street Address  Street Address  Tool (Including Iden)  Asbury Park, NJ 07712  Name of Contact  George Bardsley  FACILITY INFORMATION  Taking Place (3)  Type of Facility (4)  School (K-12)  Subchapter 8 (Other than K-12)  Other (i.e., private 8 commercial buildings, homes, etc.)  County Code (7)(STATE USE ONLY)  Finishing Touch Asbestos Abatement Colstractor (9)  Telephone No.  Touch Asbestos Abatement Normal Facility Hours - Describe PM/ PM- AM  Demolition  PM - AM  Demolition  Street Address  Treat Address  City, State, Zip Code  Maintenance/ Custodial Staff?  Custodial Staff?  Custodial Staff?  VAT. or other miscellaneous)  Normal Stacility Asbestos Containing Maderial (ACM)  (Specify SF or LF)  Abatema	Asbury Partners, LLc  Street Address 1100 Ocean Avenue  City, State, Zip Code Asbury Park, NJ 07712  Name of Contact George Bardsley FACILITY INFORMATION  Taking Place (3)  Taking Place (3)  Total County Code (7)(STATE USE ONLY)  C

CK 12562

N C			(ruis	Suant	O NUMBER	0.00 and 0.1-7		2 1 5 1	11//	7 [	10	1
Date of Notification (1)	8 , 12		1000			owner/Operator (2)			n E		- Charles	Company of the Compan
Agencies Notified	Type Notification		S	treet Ac	o Ocea	an Avenue		MAY 11 2	012		1	
□ EPA □ DEP □ DCA (NJAC 5:16)	Amended Amendment #		C	Asb	te, Zip Co ury Pa	de ark, NJ 077	12	ASSESTES CONTRI		7	and an amount of the	
☐ DHSS ☐ DCA (NJAC 5:23-8)	justification)  Cancellation	nordanig	N	lame of Ge	Contact corge	Bardsley	Haran Salah	Telephone Number	- ( ) -	Marketon (	manue)	
				FACI	LITY INF	ORMATION			95. y	· range	triviat	G-yer di
Name of Facility Where Street Address	Abatement is Takir	ng Place (	3)				Type of Facility (4	(Other than K-12) vate & commercial l	ouildine	os.		
404 Sewell Av	venue		5				homes, etc.)					-
City (5) Asbury Pa	rk, NJ						Square Feet 1200 sf	# of Floors 2.5	6	Age 0 +	yr	s
County (6) Monmouth				County	Code (7)	(STATE USE ONLY)	former res	or if being demolished	ea)			
Name of Monitoring Fire	n Hired by Building	Owner (8	3) A	SCM N	0.	Name of Abateme	ent Contractor (9)			^		
n/a						Finishing T	ouch Asbes	stos Abatem	ent	Cor	p.	$\dashv$
Street Address							pson Stree	t				
City, State, Zip Code						City, State, Zip Co	ode					
Oity, Otate, 219 0000						West Lor	ng Branch,					
Project Manager for Mo	initoring Firm		Telep	ohone N	o.	Telephone No. 732-222-8		00040				
Start Date (10) _5 / _21	, 12 Sch	neduled Co				Name of OSHA N	Monitor					
Occupancy Status Duri	ng Abatement (Ch	eck only o	ne)			Street Address						
Facility Closed/Vaca  Abatement Perform Time of Abatement	ed Outside of Norn	nal Facility	v Hours	s - Desc	cribe AM	City, State, Zip C	Code					
Scope of Work (Check					-							
≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf	an old, opply		novati emolitic			Mini-En	an Procedure		0			
			Locat	lion	I	Lx Non-Ex	empted (") and No	n-Friable Procedur		ateme	nt Ty	/pe
Locati Asbestos-Containii TO BE A IN Fa	ng Material (ACM) BATED Icility	Use Ma	Norma ed Sole aintena stodial (12)	ally ely by ance/ Staff?	Asbe (i.e., the	Description estos Containing M ermal systems insu VAT, or other miscellan	Material (ACM) ulation, surfacing,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A				120 LF	DX		П	П
Basement				X		TSI					一	믐
Exterior Siding						Siding		60 SF	10			뭄
									+	1	1	片
						16	Nome of Pag	istered Landfill		1_	Щ	L
Name of Registered V	Vaste Hauler buch Asbest	tos		NJDEP Haule2		Cubic Yards of Waste	GRO	WS Landfill		Vort	h	
City, State Oceanport,	NJ 07757-	0400				Disposal Date 5/25/12	City, State Morris\	ville, PA			V	
Completed By (Print of		Title		sider		Signature		D	ate 5/8/	/12		

					of New J			NJ Dept. o	APPRO Health A	DVED Sen	ior Sergines	rue L	78	96	Republica
		NO.	TIFIC./ (Pur	ATION OF Suant to	FASBES NJAC 8:6	TOS AE	254 L E2661-7	NT	(signat	- Party	O OCIONES	R III	Π/7	icia (i	神学
Date of Notificelian (1)	Annual Control of the		f N	ame of B	uilding Ov	men/Opi	erator (2	Date:	1 Cla	Wei	989		W	B	T
5/8/	12		1		GOL	DBE	RO"	REAC	प्पा	11/	annual programme of the same				
	Type Notification		S	tennal Brief	MARA			S ROP	111		MAY 1	1 2	012	The state of the s	IJ
□ EPA □ DEP	☐ initial ☐ Amended		C	ity States	Zin Code				4					MARKET PARTY	
E DOL	Amendment (					TC	AUD	WELL	- 15T	<u> </u>	ohone Numb	ONTR	01 8		_
⊠ DOH P	justification)  Cancellation	Marchi (d)	A	Pich	ARD	SHA	TWE	ill_	Walter Walter	rele	onone Muner	31 W 15		- to-suming of a	
Name of Facility Where Al	natement is Taking	Place (3)		FACILI	TY INFO	RMATIC	PN	Type of Fa	cility (4)	on accompand	A DESCRIPTION OF THE OWNER, WHEN THE PARTY OF THE OWNER, WHEN	-		*****	
BELLA VIST	120				and a constitution of the same and the same a			☐ Sohoo	i (K-12)	·					Addition
Street Address				A CONTRACTOR OF THE CONTRACTOR				(E) Other	apter 8 ( (i.e. priva	other ste &	than K-12) commercial b	uildin	gs, h	ames,	
522 - 22NT	JAKER!	Selection of the select			ACCEPTANT ACCESSAGED			etc.) Square Fe			Floors	Bid	g. Ag	e	
UNSIDES CIT	ч .		-		and the second second second second			250			6		2.9	<del>Tolerone</del>	
County (a) HUDSON				County Go STATE US		***************************************	enstant#s	AFAN	SM Ant	î.	g demolished	,			- marrieda
Name of Monitoring Firm	Hired by Building O	wner (8)		ASCM	No.		Name A. M	of Abateme C Contract	int Contra ing Inc	ector (	9)				
Sheet Address		na mana sa menena alka 1954-1954-195	MESSASSIS.	Louis		Merron		Address .cwell Road	and <sub>the s</sub> an stress has the large	Anneste	-1.11	-			
City, State, Zip Code			al all printers.	an igulantisti gʻilganiyasi			City, S	tate, Zip Co Rock, NJ 0	7452					-	
Project Manager for Moni	itoring Firm			Teleph	one No.		Telept	none No. 262-5841	Company of the Association of the State of t		License No.				
Start Date (10)		Schedule	d Gorr	ptetion D	ate (11)		Name	of OSHA M	fonitor	Servic	es Inc.		egy grand		
Occupancy Status Durin	g Abatement (Che	ck Only One	*)			WALLES THE PARTY OF	Street	Address	manus manus ken dalih Ausk	"A'v milie v Gerel	AND DESCRIPTION OF THE PARTY OF				
☐ Facility Closed/Vaca ☐ Absternent Performs ☐ Other - Describet	ated During Entire I ad Outside of Name	eriod of Ab al Facility H	atem lours	ent	CLUB CONTRACTOR CONTRA	-	City, S	łuyer Stree tate, Zip C ensack, <b>N</b> J	od∉		AND DESCRIPTION OF THE PARTY OF		a Charles		Merri
Scope of Work (Check A	Ul That Apply)	v su sa	THE PERSON				I			interior and bear		town Aud (2017)	District		OCTION NAME OF TAXABLE PARTY.
다 23 sfor 23 lf 면 2160 sfor 2260 lf		⊠ Re □ De	novat moliti	100 100 100			E	Mini-End	dosure a Proce	dune	Negative Pre				
		-						J Non-Ex	empted (	) and	Non-Friable	Proce		ament	
Locatio			Locati	ly i		De	escription	กอร์	l				T3	pe	
Asbestos-Conteining TO SE AP In Fact (13)	Material (ACM) ATED lifty	Mai	d Sole intena octat ( (12)	nce/	Asbes (i.e.	therma	nteining	Material (A is insulation AT, or	CM)	(	Amount Specify (F or LF)	(Bycone)	Repair	Encapsulate	Enabeure
		Yes	No	N/A		-		-							
Boulan Room	<u> </u>			X	B	REEC	41.46			-	320 sa′	X	mind house v		
					Shidoolianaaannoo	a was	COLD DISTRIBUTION		-						
	· · · · · · · · · · · · · · · · · · ·							same and a second about	1						
Name of Registered Wa	iste Hauler		- 6	UDEP W lauler ID 20785		Cubic of Wa	Yards	1			ered Candfill hem Landfill (	Догр.			
Rovic Transport  City, State, Zip Code Riverdale, NJ 07457		1.2	1		PER STATE STATE AND ADDRESS OF THE PERSON NAMED IN COLUMN TWO PERSON NAMED IN COLUMN TRANSPORT NAMED IN COLUMN TWO PERSON NAMED I	Dispo	sal Date		ity, State Bethlehs:	, Zip I	Code				
Completed by		Title				1	1	- Lell	1 20	916	LA Dat	e/s	5/1	<b>7</b>	
R. McDonald		Presid	ant				1/20	mark	12- 661	15	- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1.	11		



						1:60 and 1		Tr.	NEGI	BIW	E		1
Date of Notification (1)	9/12		Na	ne of	Building	Owner/Ope	orator (2)	MI	ŠI:			A CONTRACTOR OF THE PERSON NAMED IN CONTRACTOR OF T	Petrological and the second and the
Agencies Notified  The property of the propert	Type Notification    Initial	uding	Ci	reel Active, State	dress	Xe Enwure	) × 5 Z	1,5.08	MAY  2 3 dSBESTO	S CONTROL	Ž å	The state of the s	
□ 0CA			دان	<u> </u>		ORMATION		<del></del>	2** ***				
Street Address 15 ME City (5) A VA	DENCE LON HARM	w	Lan	JE		) (STATE	Yyr	Other (I.e., prinhomes, etc.) usre Feet 0 0 0	(Other than K-1 vate & commerce # of Floors 2_ or If being demo	Bidg	No.		
County (6) CAPE	= MAY		_   '	USE O	YLY) -	Name of	- Latement	Contractor (9)	DNT			•	
Name of Monitoring Firm (8)	Hired by Building Ov	vner	AS	CM No	).	KL	GMCC	DA					+
Street Address						36	9 S.	SPRUC	E AVE.				4
City, State, Zip Code								SHAD	T License No.		<u>د</u>	<u>-</u> ,	; }
Project Manager for Mo	nitoring Firm	· ·	Teleph	none N	0.		-779	-0472	The state of the s	144			4
Stan Date (10)  S/2// Occupancy Status Dun  Facility Closed/Vaca  Abatement Perform	ing Abatement (Check	100 DOI P	8/1 (xne) (batem	L ient		Sueel A	idress	Spruce	μ =/\υ= , =, Ν, Σ	, 080	====================================		
Other - Describe:  Scope of Work (Check	all that apply)	Rer Der	novalio	on .			Mini-Enclo	sure	on-Friable Proc	ædure .			-
2160 st or ≥260 H		Is L	ocatio	n						^	Datem		
Locatio Asbestos Containin TO BE AB IN Fac	y Material (ACM) IATED Ility	Used Mair Cu	Soleh Nenanustodia Staff? (12)	by cel	Asbe (i.e	sios Conta	cription of ining Mater systems ins ng. VAT, o iscellaneou	of	Amount (Specity SF & LF)	Removal	Repair	Encapsulate	· Eixposma
	X 10	Yes	No	N/A		TAN	US 17 E	: .	1500 #	_ X		_	
3101	WG-	-		-							-	-	
				1	-						+		
	Maria Hauler	<u></u>	_	NOEP	Maste	Cubic of Wa		Name of Re	egistered Land	, U, K			
Name of Registered	O INC.			179	0 No. 04		sal Date						
City State MAPLE SI	LADE, N.	5,0	180	52				Woo	DBINE	Date		_	
Completed By	LEMM -	ri o		ER			100	into		5/9	11.	2	<u>—</u> ;

#### 0489

Date of Notification (1) 05/08/2012			1	Name of Bender	Building O	wner/Operat relopment	or (2) Comp	any, ild	CEI	V E		7	
Agencies Notified  EPA DEP DOL	Type Notification  Initial Amended Amendment			Street Ad 570 De City, Stat	dress laware A e, Zip Cod , NY 172	Avenue			MAY 11	2012	St. Gild of the second of the		
⊠ DOH ⊠ DCA	Emergency justification) Cancellation	N. 3		Name of Adam I			2		Telephone Nu	mber	- Atomis		
Name of Facility Where A Residence Street Address	Abatement is Takin	g Place (3)		FACIL	ITY INFO	RMATION	Тур	e of Facility (4 School (K-12 Subchapter	2) 8 (Other than K-1	2)	ja zen		
2056 Delsea Drive City (5) Deptford				-			Squ 3,0	etc.) uare Feet	# of Floors		ldg. A		is,
County (6) Gloucester				County C	ode (7) SE ONLY)	***************************************	Cur	rent Use (Prio cant Reside	r if being demolis ence schedule	hed) ed for	dem	0	
Name of Monitoring Firm Health & Safety Ser		Owner (8)		ASCM 00117		Lu	zon, lı		tractor (9)				
Street Address 318 12th Street						84		ecutive Ave	enue				
City, State, Zip Code Hammonton, NJ 08						Ph	iladel	Zip Code ohia, PA 19	153	No			
Project Manager for Mon Jim Proctor	itoring Firm	Scheduled		Telephon	4 8850	26	7 284		01109	<b>VO.</b>			
Start Date (10) 05/25/2012 Occupancy Status During	a Abatamant (Cha	05/29/2	012	ipietion t	Date (11)	Jos		Maronski					
Facility Closed/Vaca Abatement Perform Other – Describe:	ated During Entire	Period of Al	batem	nent		84 City	51 Ex	ecutive Ave Zip Code phia, PA 19	NAC 42 / No.	· · · · · · · · · · · · · · · · · · ·			
Scope of Work (Check A  ≥3 sf or ≥3 If  ≥160 sf or ≥260 If	ll That Apply)	Section 200	enova					Full Containme Mini-Enclosure Glovebag Proc	ent with Negative			e	
		2007	Locati				·					emen pe	t
Location Asbestos-Containing TO BE AB In Facil (13)	Material (ACM) ATED ity	Used Mair	l Sole ntena	ly by		Descript tos Containin thermal syste surfacing, other misce	g Mater ems ins VAT, o	ulation, r	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
Kitche	en			Х		Linole	um		160 SF	x			
							15						
Name of Registered Was	ste Hauler		IN	JJDEP W	/aste	Cubic Yard	s	Name of	Registered Landf	ill			
Luzon, Inc.			0000	lauler ID 2587	No.	of Waste 3 CY			a Landfill				
City, State 8451 Executive Ave	nue, Philadelpl	9153			Disposal D 05/30/20		City, Stat Wayne:	e sburg, OH 446	688				
Completed by Piyush Patel		am N	Manage	er	Signa	ture	nsh c		0ate 05/08/	12			



1			•		N3AC 5.00			- 111	11 15	100	7 1	11/	1 [	3 6	The same
Date of Notification (1) 05/08/2012			Na B	ame of B enders	uilding Own on Develo	er/Operator opment C	(2) ompai	ny, LLC		of the same of		17	L.	1//	
Agencies Notified	Type Notification			reet Add 70 Dela	iress aware Ave	enue				MAY	11 2	2012	2		
EPA DEP DOL	Initial Amended Amendment #				, Zip Code NY 17202	2			Č. AS	SBESTOS	CONTR	71 8		Lawrence	A SECTION OF SECTION S
— DOH	Emergency (i justification)	ncluding	1 1 1000	ame of C					Tele	phone N	umber	, in	MONES SERVICE	William .	Character
⊠ DCA	Cancellation					ATION	- X)	No park	F	-		177	4-12.72	and the second	
Name of Facility Where Residence Street Address		Place (3)		FACILI	TY INFORM	ATION		of Facility (4 School (K-12 Subchapter 8 Other (i.e. pr	2) 8 (Othe	er than K-	-12)			omes	
2050 Delsea Drive		-						etc.) re Feet 0	# of	Floors	100	Bldg 30	. Age	)	
Deptford County (6)				ounty Co	ode (7) SE ONLY) _		Curre	nt Use (Prio ant Reside	r if beir	ng demol	ished) led for	de	mo		
Gloucester  Name of Monitoring Fire Health & Safety Se	m Hired by Building (	Owner (8)		ASCM 00117	No.	32	200000	tement Con							
Street Address 318 12th Street	arvices, me.						t Addre	ss cutive Ave	enue						1000
City, State, Zip Code Hammonton, NJ 0	8037			<u> </u>				ip Code nia, PA 19	153	H = 2					
Project Manager for Mo			323	elephon		100000000000000000000000000000000000000	phone N 284 1			License 01109				3	
Start Date (10) 05/22/2012		Scheduled 05/23/20		pletion D	ate (11)			HA Monitor aronski							
Occupancy Status Dur							et Addre	ss cutive Ave	enue						
Facility Closed/Va Abatement Perfor Other – Describe:	ncated During Entire med Outside of Norm	Period of At nal Facility I	-lours	ent				ip Code hia, PA 19	9153					朝	
Scope of Work (Check  ≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf		10000	enovat emoliti				Mi Gl	ull Containm ini-Enclosure ovebag Pro on-Exempte	e cedure					)	
		ls I	Locati	on								Α	bate Typ	ment oe	
Locat Asbestos-Containi TO BE A In Fa (1	ng Material (ACM) ABATED	Used Mair	ormall I Sole ntenar odial S (12)	y ly by nce/	(i.e. th	Description Containing	Materia ms insu /AT, or	lation,	(	Amount Specify F or LF)	None	Domonia	Repair	Encapsulate	Enclosure
Gar	age			Х	Trar	nsite Sidir	ng in b	ags	7	20 SF	x	1			
Name of Registered V	Vaste Hauler		H	JDEP W lauler ID 2587	No.	Cubic Yards of Waste	3	Name of Minery			ndfill				
Luzon, Inc.	City State					Disposal Da		City, Sta	ite	g, OH 4	4688	_			
8451 Executive A	venue, Philadelp	Title			1000000	05/30/201 Signat	ure YW		a t	- 6	Date 05/0	8/1	2	7	
Piyush Patel		Progr	am I	Manage	31	1 1	10	211	~ '	_ `				-	_



Name of Building Owner/Operator (2)   Benderson Development Company, ILC   Benderso	, home	
City (5)   County (6)   Count	, home	
DOH   DCA     justification   Adam Harris   Adam Harris   DCA     Type of Facility (4)   School (K-12)   Subchapter 8 (Other than K-12)   Other (i.e. private & commercial buildings, etc.)   Square Feet   # of Floors   Bldg. A floor (STATE USE ONLY)   Safety Services, Inc.   Street Address   Street Address   ASCM No.   Name of Monitoring Firm Hired by Building Owner (8)   Health & Safety Services, Inc.   Street Address   Stree	, home	
Name of Facility Where Abatement is Taking Place (3) Residence Street Address 2120 Delsea Drive City (5) Deptford County (6) Gloucester Name of Monitoring Firm Hired by Building Owner (8) Health & Safety Services, Inc.  Street Address 318 12th Street City, State, Zip Code Hammonton, NJ 08037 Project Manager for Monitoring Firm Jim Proctor  Street Address Start Date (10) 05/25/2012  Type of Facility (4) School (K-12) Sc	, home	
Residence  Street Address 2120 Delsea Drive  City (5) Deptford  County (6) Gloucester  Name of Monitoring Firm Hired by Building Owner (8) Health & Safety Services, Inc.  Street Address 318 12th Street  City, State, Zip Code Hammonton, NJ 08037  Project Manager for Monitoring Firm Jim Proctor  Street Address Street (10) 05/25/2012  Scheduled Completion Date (11) 05/25/2012  Scheduled Completion Date (11) Other (i.e. private & commercial buildings, other)  Strat Date (10) 05/25/2012  Scheduled Completion Date (11) 05/25/2012  Scheduled Completion Date (11) 05/25/2012	, home	
City (5) Deptford  County (6) Gloucester  Name of Monitoring Firm Hired by Building Owner (8) Health & Safety Services, Inc.  Street Address 318 12th Street  City, State, Zip Code Hammonton, NJ 08037  Project Manager for Monitoring Firm Jim Proctor  Strat Date (10) 05/25/2012  County Code (7) (STATE USE ONLY)  County Code (7) (STATE USE ONLY)  ASCM No. 00117  ASCM No. 00117  Name of Abatement Contractor (9) Luzon, Inc.  Street Address 8451 Executive Avenue  City, State, Zip Code Philadelphia, PA 19153  Telephone No. 267 284 1050  O1109  Name of OSHA Monitor Joseph Maronski		es,
Deptford  County (6) Gloucester  Name of Monitoring Firm Hired by Building Owner (8) Health & Safety Services, Inc.  Street Address 318 12th Street  City, State, Zip Code Hammonton, NJ 08037  Project Manager for Monitoring Firm Jim Proctor  Start Date (10) 05/25/2012  County Code (7) (STATE USE ONLY)  ASCM No. 00117  ASCM No. 00117  Name of Abatement Contractor (9) Luzon, Inc.  Street Address 8451 Executive Avenue  City, State, Zip Code Philadelphia, PA 19153  Telephone No. 609 704 8850  Scheduled Completion Date (11) 05/25/2012  Scheduled Completion Date (11) 05/25/2012  Joseph Maronski		
Gloucester  Name of Monitoring Firm Hired by Building Owner (8) Health & Safety Services, Inc.  Street Address 318 12th Street  City, State, Zip Code Hammonton, NJ 08037  Project Manager for Monitoring Firm Jim Proctor  Start Date (10) 05/25/2012  ONAME of Abatement Contractor (9) Luzon, Inc.  Street Address 8451 Executive Avenue  City, State, Zip Code Philadelphia, PA 19153  Telephone No. 609 704 8850  Scheduled Completion Date (11) 05/25/2012  Vacant Residence scheduled for dem Name of Abatement Contractor (9) Luzon, Inc.  Street Address 8451 Executive Avenue  City, State, Zip Code Philadelphia, PA 19153  Telephone No. 267 284 1050  Name of OSHA Monitor Joseph Maronski		
Health & Safety Services, Inc.  Street Address 318 12th Street  City, State, Zip Code Hammonton, NJ 08037  Project Manager for Monitoring Firm Jim Proctor  Street Address 8451 Executive Avenue  City, State, Zip Code Philadelphia, PA 19153  Telephone No. 609 704 8850  Start Date (10) 05/25/2012  Scheduled Completion Date (11) 05/25/2012  Output  Lizense No. 01109  Name of OSHA Monitor Joseph Maronski	10	
Street Address         318 12th Street       8451 Executive Avenue         City, State, Zip Code         Hammonton, NJ 08037       City, State, Zip Code         Project Manager for Monitoring Firm       Telephone No.         Jim Proctor       609 704 8850         Start Date (10)       Scheduled Completion Date (11)         05/25/2012       Name of OSHA Monitor         Joseph Maronski		
Philadelphia, PA 19153		
Jim Proctor         609 704 8850         267 284 1050         01109           Start Date (10)         Scheduled Completion Date (11)         Name of OSHA Monitor Joseph Maronski           05/25/2012         05/25/2012         Joseph Maronski		
05/25/2012 Joseph Maronski		
Occupancy Status Duning Abatement (Onesis Sin) 5.157		
Facility Closed/Vacated During Entire Period of Abatement  8451 Executive Avenue		
Abatement Performed Outside of Normal Facility Hours Other – Describe:  Other – Describe:		
Scope of Work (Check All That Apply)  ≥3 sf or ≥3 If  Renovation  Renovation  Parallition  Parallition  Renovation  Mini-Enclosure		
Silvebag Procedure		
Non-Exempted (*) and Non-Friable Procedu  Abai	temer	nt
Is Location T	уре	120
Location of Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)  Location of  Asbestos Containing Material (ACM) Maintenance/ Custodial Staff? (12)  Description of  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Amount (Specify SF or LF)	Encapsulate	Enclosure
Yes No N/A	Ф.	20.00
Basement X Pipe Packing 3 SF x	X	$\vdash$
Name of Registered Waste Hauler  Luzon, Inc.  NJDEP Waste Hauler ID No. 32587  Cubic Yards of Waste 0.3 CY  Name of Registered Landfill Minerva Landfill		
City, State  8451 Executive Avenue, Philadelphia, PA 19153  Disposal Date 05/30/2012  Oity, State Waynesburg, OH 44688		
Completed by Piyush Patel Program Manager Piyush 1 a tel 05/08/12		



Date of Notification (1) 05/08/2012						vner/Operato elopment (		any, LLC	) E	G F		1/7	G	
Agencies Notified	Type Notification		1 9	Street Ad 570 De	ldress Iaware A	venue					J.,	\\\		
EPA DEP X DOL	Initial Amended Amendment				e, Zip Code , NY 172					MAY 1	1 2	012	1	IJ
X DOH X DCA	Emergency justification) Cancellation	1 123	- 3	Name of Adam I				-	1 0	phone Nur	- Landie	•	-	
				FACIL	ITY INFOR	RMATION		San Grander	Contract of the last	1.15_1.	:1 <b>7</b> (;			100
Name of Facility Where Residence Street Address	Abatement is Takir	g Place (3)					Тур	School (K-12 Subchapter 8						
1810 - A Hurffville	Road						X	etc.)	ivate &	commerci	ai build	ings,	ПОПТЕ	s,
City (5) Deptford							Squ 3,0	are Feet 00	# of 2	Floors	B 6	ldg. A O	ge	
County (6) Gloucester				County C STATE U	code (7) ISE ONLY)			rent Use (Prior cant Reside				dem	0	
Name of Monitoring Fire Health & Safety Se		Owner (8)		ASCM 0011		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	e of At	oatement Control	ractor (	9)		-1000		
Street Address 318 12th Street		14(1) P. 100 P.	-			0.0	et Addr	ess ecutive Ave	nue		F.77.5			
City, State, Zip Code	9027					City,	State,	Zip Code ohia, PA 19						
Hammonton, NJ 0				Telephor		Tele	phone	No.		License N	lo.			-
Jim Proctor Start Date (10)		Scheduled			4 8850 Date (11)		7 284 ne of OS	SHA Monitor		01109				
05/22/2012		05/23/20	012				1/15/0	Maronski						
Occupancy Status Duri	ng Abatement (Che	ck Only One	)				et Addr	ess ecutive Ave	nuo					
Facility Closed/Va Abatement Perform Other – Describe:	cated During Entire med Outside of Non	Period of Al mal Facility I	oatem Hours	ent		City	State,	Zip Code ohia, PA 19	- Carriero					
Scope of Work (Check	All That Apply)													
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enova emolit					ull Containme Mini-Enclosure Blovebag Proce Mon-Exempted	edure	#			· A	
,		T	41					Ton Exempled	( ) and	11011111101	- A		ement	t
Locatio	of		_ocati ormal			Descripti	on of	**				Ty	/ре	
Asbestos-Containin <u>TO BE Al</u> In Fac (13	ng Material (ACM) BATED cility		Sole ntenar odial S (12)	nce/	(i.e. t	os Containing hermal syste surfacing, \ other miscel	Mater ms inso VAT, or	ulation,	(S	nount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A									a	
1st Floor Men	's Bathroom			X		'AT (botto				) SF	x			
1st Floor Men		X	V	'AT (botto	0 000	∍r)		) SF	x					
2nd Floor F	Restroom			X		VAT			20	) SF	x			
Name of Registered W	aste Hauler		N	JDEP W	/aste	Cubic Yards	3	Name of F	Registe	red Landfil	1		-	
Luzon, Inc.			100	lauler ID 2587		of Waste 1 CY		Minerva	Land	fill				
City, State 8451 Executive Av	enue, Philadelpl	153			Disposal Da 05/30/201		City, State Waynes		OH 446	88				
Completed by Piyush Patel		Title Progra	am N	/lanage	er	Signat	ure 1`y \	ish 1	Cxt	-000	ate 5/08/1	12		

187		N		CATION		Jersey TOS ABATI 30 and 12:12		ENT		E (	9 E		W/	E E	n	1.
Date of Notification (1) 05/08/2012						vner/Operato elopment (			LLC	IS U	<i>y</i> <u>L</u>		U		MANAGEMENT OF THE PARTY OF THE	
_	ype Notification			Street Ad 570 De	<sub>dress</sub> laware A	venue		A Party		M	AY .	1 1	2012		U	and the same of th
DEP DOL	Initial Amended Amendment = Emergency (i justification)		-						d- waterwater		BESTOS ephone		VFROL	3	\ 	The state of the s
⊠ DCA	Cancellation			1 0100000000000000000000000000000000000	ITY INFOR	MATION	_		5° V	-	-			2000	naide >	10.0
Name of Facility Where Ab Residence Street Address 2053 Delsea Drive	atement is Taking	Place (3)		17,012				Subo	ool (K- chapter er (i.e. )		er than & comr	ı K-12 nerci	2) al build	ings,	home	s,
City (5)								etc.) Square F 3,000		# 01	Floor	s	BI 60	dg. A	ge	
Deptford				County C	ode (7)			Current L	lse (Pri	-	ng der	nolist	100			
County (6) Gloucester					SE ONLY)			Vacant						demo	)	
Name of Monitoring Firm H Health & Safety Serv		Owner (8)		ASCM 00117		100		f Abatem , Inc.	ent Co	ntractor	(9)					
Street Address 318 12th Street								ddress Executi	ve Av	enue						
City, State, Zip Code Hammonton, NJ 080	37							ate, Zip C lelphia,		9153						
Project Manager for Monit				Telephon				ne No. 84 1050	)		Lice 011	nse N 09	lo.			
Start Date (10) 05/23/2012		Schedule 05/25/2		npletion D	Date (11)			f OSHA I h Maro								
Occupancy Status During	Abatement (Chec	k Only On	e)			1000000		ddress Executi	νο Δι	onue			= = 2000		5.5	
Facility Closed/Vacat Abatement Performe Other – Describe:	ed During Entire F d Outside of Norm	Period of A nal Facility	Nbaten Hours	nent S		City	, Sta	ate, Zip C delphia,	ode							_
Scope of Work (Check All	That Apply)			-	21		·	Joipina,				_	-			_
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Renova Demoli				×	Mini-E Glovel	nclosu bag Pro	nent wit re ocedure ed (*) ar					e	
		Is	Locat	ion											ement /pe	1
Location Asbestos-Containing I TO BE ABA In Facilit (13)	Material (ACM) TED	Use Ma	Norma d Sole intena todial (12)	ely by ince/ Staff?	Asbesto (i.e. t	Descript os Containin hermal syste surfacing, other misce	g Ma ems VAT	aterial (Α insulatio Γ, or	CM) n,	(	Amoun Specif F or Ll	y	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A												
1st Floor Bat	SOUTH PROPERTY.			X	L	inoleum &	2015				25 SF		x	-	-	-
2nd Floor & 2nd	Floor Foyer			x		12x12	. X 22 2				99 S		X	-	-	-
Exterio	r			X		Transite	Sid	ling		-	000 S	_	x	_	_	
Baseme				×		uct Insula		Section of the second		1	24 SF		×		х	
Name of Registered Wast Luzon, Inc.	e Hauler		1	NJDEP W Hauler ID 32587	100000000000000000000000000000000000000	Cubic Yard of Waste 8 CY	is	1	Miner	of Regist va Lar		.andfi				
City, State 8451 Executive Aven	ue, Philadelph	nia, PA 1	9153	3		Disposal D 05/30/20			City, St Wayn	ate esburç	j, OH	446	888			
Completed by Piyush Patel		Title Prog	ram	Manage	er	Signa	ture	nsl	1	Tat	e		ate  5/08/	12		

Check # 6472

Date of Notification (	(1) May 10, 2012			of Building O	wner / Operator (	2)************************************	a to a seminar among a company of the seminar of	Sp.			
Agencies Notified  EPA  DEP	Type Notification		0	Address ohn F. Kenn	nedy Boulevard	ECE!	WEM	1			
DOL	Initial Amended			tate & Zip Co	. 111 11	MAY 11	2012	to			
⊠DOH □DCA	Amendment :	#		of Contact				phone	e Nur	nber	r
_			Dino N	lappi	1	ASBESTOS CON LICENSIA					
			FAG	CILITY INF		i din en i i statististististististististististististist	Received to produce to				
Name of Facility Wh Bank of America	ere Abatement is Takin	g Place (3)			Type of Facil	(K-12)	IC 40)	e#			
Street Address 2400 John F. Kenn	edy Roulevard					pter 8 (Other than i.e., private & co	mmercial buildings	, hom	ie, et	c.)	
	edy Boulevard				Square Feet	# of Flo		. Age	148		
City (5) Jersey City		10			8,000 Current Use Bank	Prior if being den			140		
County (6) Hudson		County Code	(7)								
Name of Monitoring Environmental Tes	Firm Hired by Building ( ting Consultants, LLC	Owner (8)		ASCM No.	Synatech, In		r (9)				
Street Address One Mall Drive, Su	ite 404				Street Addres 829 Radio R	oad					
City, State & Zip Co	de				City, State &	Zip Code arbor, NJ 08087					
Cherry Hill, NJ 080 Project Manager for	Monitoring Firm		lephone N		Telephone N 609-296-691	umber	License Numb	er 0081	7	200 100	
Howard Zenobi Scheduled Start Da	te (10) Schedu	led Completi	6-482-13° on Date (	-	Name of OSI	HA Monitor		0001	0.00		
May 20,		-	20, 2012		Synatech, In Street Addres						
Facility Clo	sed/Vacated During Ent	tire Period of		nt	829 Radio R	oad					
Other – De	Performed Outside of Nescribe: cupied During Abatemer		5		City, State & Little Egg H	arbor, NJ 08087					
Scope of Work (Che											
≥3 sf or ≥ 50 ∑ ≥160 sf or ≥2	lf		Renovation Demolitic			Mini-Enclosure Glovebag Proce	it with Negative Pressidure  *) and Non-Friable Pro		re		
L	ocation of		on Norma		Descrip	tion of			atem	ent 7	Гуре
<u>TO I</u>	taining Material (ACM) BE ABATED N Facility		y Mainter dial Staff		Asbestos-C Material (i.e., therma	(ACM)	Amount (Specify SF or LF)	H		- m	_
	(13)	Yes	No	N/A	insulation, sur or other miso			Removal	Repair	Encapsulate	Enclosure
Teller Area / Viewi	ng Booth			Х	Floor Tile a	nd Mastic	1,500 SF	X			
Name of Registered	d Waste Hauler	NJDEP I		Cubic Yard	ds of Waste	Name of Regis	tered Landfill				
Synatech, Inc.			429	5 Disposal D	)ate	Grows Landfill City, State	<u> </u>				
City, State											
Little Egg Harbor, Completed By	NJ 08087			May 21, 2 Signature	/17/	Morrisville, PA	Date				
Diano Alois		utive Admini	strator	I Cia	ni lllor		May 10, 2012				

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

	Ver William Considerate a common	Name of the last o	,				gan State of the second	Check #647	11	V-04.4	nesen <sub>j</sub>	
Date of Notification (	(1) May 10, 2012	T.	2 (0 10	Name of Angel		Owner / Operator (2	)			Edin.	1	
Agencies Notified  EPA  DEP	Type Notificati	on		410 Cir	Address  ncinnati /			MAY 1 1 2012			W 17-1-1-1	
⊠DOH	Initial Amen	ded dment#				, NJ 02125		mini - com	The second second	attended	1	
DCA	Cance			Name of Angel	of Contac Torres	t	le consumer	ASBESTOS CONTRITO LICENSING	ephon	e Nur	ber	
				FAC	CILITY	NFORMATION	S	eng, ngamayasekik, isopira minoralisi d	re-to-lus-	tione S	∳ oneranie	
Name of Facility Wh Residence Street Address		Taking P	lace (3)				(-12) er 8 (Other thar	36.00		5555 12 <b>.</b> T	- N	
410 Cincinnati Ave	nue					Square Feet	# of Flo		g. Age			
City (5) Egg Harbor City						1,500 Current Use (F Residence	Prior if being der	+ Basement   molished)	96	3 yea	rs	
County (6) Atlantic			unty Code	9 (7)		220						
Name of Monitoring N/A Street Address	Firm Hired by Bu	ilding Owr	ner (8)		ASCM	No. Name of Abate Synatech, Inc Street Address		or (9)				
City, State & Zip Co	de			<u> </u>		829 Radio Ros City, State & Z				<del></del>		
			TT.	lephone N	lumbar		bor, NJ 08087	License Num	her			
Project Manager for						609-296-6916		License (vaiii	0081	7		
Scheduled Start Dat May 25, 2		Scheduled		on Date (* <b>25, 2012</b>		Name of OSH/ Synatech, Inc						
	sed/Vacated Dur	ing Entire	Period of		nt	Street Address 829 Radio Ro	ad	i.				
Other – De	Performed Outsi scribe: cupied During Ab		nal Hours	<b>S</b>		City, State & Z Little Egg Har	ip Code bor, NJ 08087					
Scope of Work (Che	lf			Renovatio Demolitio			Mini-Enclosure Glovebag Proce	nt with Negative Press edure (*) and Non-Friable Pr		re		
Asbestos-Cont	ocation of taining Material (A BE ABATED	ACM)	Solely b	on Norma y Mainten odial Staff	nance or	Description Asbestos-Con Material (A	ntaining NCM)	Amount (Specify SF or LF)	Ab	ateme	ent Ty	ре
11		Yes	No	N/A	(i.e., thermal a insulation, surfa or other misce	cing, VAT		Removal	Repair	Encapsulate	Enclosure	
Basement / Crawl	Space	-		Х		Pipe Insul	ation	200 LF	X			
Basement				Х		Jacketing and Boi	ler Materials	8 SF	X			
Name of Registered	d Waste Hauler		NJDEP \		Cubic Y	'ards of Waste	Name of Regis	tered Landfill	_			
Synatech, Inc. City, State			27	429	1.5 Disposa	al Date	Grows Landfil City, State	II		-		
	N.I. 00007				May 29		Morrisville, PA	4				
Little Egg Harbor, Completed By	18000 UNI	Title			Signate	re		Date				
Diane Aloia		Executiv	e Assista	int	· K	Kane alor		May 10, 2012				

CK 22877

Date of Notification (1)					Name of Building Owner/Operator (2)  MERCK SHARP & DOHME CORP.											
5 / 10 /12				Str	reet Address		11/2/				-	7111	11			
Agencies Notified Type Noti		6 E. LINCOLN AVE	ENUE													
X EPA X Initi	al Notification	ification Notification			ly, State, Zip Code AHWAY, NEW JEF			IAY	11	ŻŪ	12	T				
	Hold			Na	me of Contact		Telenhone Miii	nhên (	15 7	No.	.2					
DCA EMI	ERGENCY	NOTIF	CATI	M NC	ARY BETH BAKER				SENS.		x 58					
				FA	CILITY INFORMAT	TION	for smedulineous tripos									
Name of Facility Where Abatement i	s Taking P	lace (	3)			Type of Facility	y (4)	e san en ad	534,553,763							
						School (K	The state of the s									
MERCK SHARP & DOHME CORPOR	ATION					pter 8 (Other than K-12) e. private & commcl. bldgs., homes, etc.)										
Street Address			an hand to the and provide			Square Feet	# of Floors	T			dg. Ag 82	е				
126 EAST LINCOLN AVENUE - BUILD				,		50,100	2		D.		62					
City (5) County (6)				The state of the s	unty Code (7)	VACANT	ior if being demo	olisned	1)							
RAHWAY UNION   Name of Monitoring Firm Hired by Building Owner (8)				(514	ASCM No.		ment Contracto	r (9)					-			
ENVIRONMETAL HEALTH INVESTIG		100	2)		17	o. Name of Abatement Contractor (9) PAR ENVIRONMENTAL CORPORATION										
Street Address		Street Address														
655 WEST SHORE TRAIL		313 SPOOK RO														
City, State, Zip Code						City, State, Zip Code										
	A, NEW JEF			NI		SUFFERN, NEW YORK 10901 Telephone Number   License Number										
Project Manager for Monitoring Firm		1		Number	845-369-7500 460											
WILLIAM S. KERBEL, CIH	Cal		-729-50	tion Date	(44)	Name of OSHA					<u> </u>	(21111120000000000000000000000000000000				
Expected State Date (10)  5 / 24 /12	24 /12 Year		ORATORIES INC	2	#1	1480										
Month Day Year  Occupancy Status During Abatement (	i eai	Street Address														
X Facility Closed/Vacated Du Abatement Performed Outs	ring Entire	Period nal Fa	cility H	ours - De	escribe:	117 EAST 30TH										
Scope of Work (Check all that apply)  X Demolition  >3SF OR LF  X >160 SF OR 260 LF	Rer	ovatio	on		X Mini-Encl X Gloveba	ainment with Nega o: , g Procedure ble Procedure	NEW YORK, ative Pressure	NEW	YORK	( 1001	6		THE REAL PROPERTY AND PROPERTY			
Location of	1	s Loca	ation		Description of A	sbestos-		American property presents			ment	Гуре				
Asbestos-containing	no	normally used solely by Maint/Custodial Staff (12)			Containing Mater	330	Amount (Specify SF or LF)	REMOVAL	RE	m	ENCLOSURE					
Material (ACM)					(ie. Thermal sy			ō	REPAIR	ENCAPSULE	15					
TO BE ABATED in Facility (13)	1				insulation, surfactor or other miscella	370	SF OILF)	18	70	JSc	)SC					
iii i dointy (10)	-				or outer milesem					Fi	RE					
THROUGHOUT			x	PIPE IN	SULATION & ELBO	ows	730 LF	x								
THROUGHOUT			x	FLOOR	TILE AND MASTIC	2	16,425 SF	x								
ROOF		1	x		LASHING		2,300 SF	X								
WINDOWS THROUGHOUT (11	1	1	x		W GLAZING		11 SF	x		1		-				
WINDOWS THROUGHOUT (TI		+	+	VVIIVE	V OD ENTO		1	1	1		1					
			I													
									_	1	1					
		_	-				1	-	-	-	-					
		+	+-					-	+	-	-					
		+	+-				<del> </del>	+-	+		1					
			1						1							
		$\top$	1						1			1000				
					ards of Waste	Name of Registered Landfill LYCOMING COUNTY RESOURCE MANAGEMENT SERVICES										
FREEHOLD CARTAGE, INC. Hauler ID No.					50				ANAGI	EMEN	T SEF	RVICES				
825 HIGHWAY 33		1593	39				R DRIVE/ROUT	E 15			-					
City, State				Disposa		City, State	V DA 47753									
FREEHOLD, NEW JERSEY	Trate			5/24-8/2		MONTGOMER	Y , PA 17752 Dat	0	1		1					
Completed by (Print or Type) BENJAMIN SANCHEZ	Title	R OF	OPER	ATIONS	Signature		Dat		5//	101	10	_				
	1							-	manufacture 4	manufacture for	and the same		CHARLES COMMON AND ADDRESS OF THE PARTY NAMED IN			

**			NC	S	tate of New Jer	sey		us igas	C	'K		226	> /	
				(Pursuant to	NJAC 8:60-7	nd 12:120-7)	TIEC	E	11	W	C		j <sup>k</sup>	
Date of Notification (1)	227230000	ne of Building RCK SHARP &	Owner/Operator (	KITT	hand management		U			10				
5 / 10	Stre	Street Address												
Agencies Notified Type						126 E. LINCOLN AVENUE III MAY 1 1 2012 III								
X EPA X	Initial Notif	ication		City	City, State, Zip Code									
DEP	Amended Cancellation		n	RAH	RAHWAY, NEW JERSEY 07065 ASBESTOS CONTROL &									
X DOL	Non		177	Telephone Nu	NO CL	HIR(	11 8		_					
DCA		ne of Contact RY BETH BAKE	R	Telephone Nu	mbero	IME.	NO. OF PARTIES.	August 199	-manaJ					
	JEMEROLI				ILITY INFORMA		623			-			+	
Name of Facility Where Abatem	ent is Takir	ng Place	3)	170	LITT I'M OTHER	Type of Facilit	y (4)		-			and the same	<u>4</u>	
						School (K	-12)							
MERCK SHARP & DOHME CORPORATION						-	chapter 8 (Other than K-12)							
Street Address						X Other (ie.	private & comm # of Floors	mmcl. bldgs., homes, etc.)					-	
126 EAST LINCOLN AVENUE - B			39,250 3					Bldg. Age 72						
City (5)	County (6	-		Cou	County Code (7) Current Use (Prior if being demolished)									
RAHWAY	UNION	·		1	E USE ONLY)	COMMERCIAL			1.0		_			
Name of Monitoring Firm Hired			8)	ii	ASCM No.	1								
ENVIRONMETAL HEALTH INVES Street Address		17	PAR ENVIRONMENTAL CORPORATION											
655 WEST SHORE TRAIL						Street Address 313 SPOOK RO	OCK ROAD							
City, State, Zip Code						City, State, Zip				_				
	RTA, NEW	JERSEY	07871				N YORK 10901							
Project Manager for Monitoring Fir	ect Manager for Monitoring Firm Telephone Number						nber Lic	ense N	lumbe	er				
WILLIAM S. KERBEL			-729-5			845-369-7500	460	)						
Expected State Date (10) 5 / 24	40			etion Date (		Name of OSHA Monitor  AMERISCI LABORATORIES INC. #11480								
	/12 ear	Month	8 /	Day	1 /12 Year	AMERISCI LAB	ORATORIES IN	C.	#	11480				
Scope of Work (Check all that app  X Demolition  >3SF OR LF	Outside of I MONDAY -	Normal Fa	cility I 7AM-3	lours - Desc	X Full Con X Mini-End X Gloveba	g Procedure	Code NEW YORK,	, NEW	YOR	K 1001	16			
X >160 SF OR				T		ble Procedure								
Location of Asbestos-containing		Is Loca normally			Description of A Containing Mate									
Material (ACM)		solely	by		(ie. Thermal s	[		EMOVAL	EPAIR	S S	15			
TO BE ABATED in Facility (13)		Maint/Custodial Staff (12)			nsulation, surfa					CAPSULE	CLOSURE			
in radiity (13)	Yes No	N/A		or other miscel	arieous)	a visit	-	O PROPERTY.	E	R				
									1		1			
THROUGHOUT			x	PIPE INSL	ILATION & ELB	ows	2,320 LF	х						
THROUGHOUT			x	LAB BENC	CH TOPS		1,600 SF	x					-	
THROUGHOUT			x	FLOOR TI	LE & MASTIC		21,030 SF	x	T		T			
THROUGHOUT			Х		FUME HOOD	LINING	800 SF	X						
THROUGHOUT			Х		TLE MASTIC DA		4,045 SF	Х						
THROUGHOUT			X		N CORK DUCT		150 SF	X			-			
THROUGHOUT			X	ROOF FLA	-	ORK & EXTERIOR	1,900 SF 2,100 SF	X	-	-	-			
THROUGHOUT			X		R DIDING TRAN	ISITE	900 SF	X	-		-		- 33	
THROUGHOUT			X	WINDOW	GLAZING		600 SF	X						
				WATERPROOFING			X	_						
THROUGHOUT		_	X	CAULK			50 SF	X	-	-	-			
ame of Registered Waste Hauler		NJDEP W	aste	Cubic Yarr	ls of Waste	Name of Registe	I ered Landfill				-			
FREEHOLD CARTAGE, INC. Hauler ID No.				l and	60	LYCOMING CO		CE MA	NAG	EMET	SRVI	CES		
825 HIGHWAY 33 15939						447 ALEXANDE	R DREIE/ROUT	E 15						
			LINE STATE	Disposal D	ate	City, State	V-730-51-5-5-5-5-5-5-5-5-5-5-5-5-5-5-5-5-5-5		100171.00	17				
City, State	5046			Diopodai D	3777		D 4 4 7 7 F 7							
oity, State REEHOLD, NEW JERSEY 07728 Completed by (Print or Type)	3-5010  Title			Diopoda	Signature	MOTGOMERY,	PA 17752   Dat	e	~	1	11	2	1560110	