

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

	B.C.		- Constant	l W	国厅
E-man	MAY	1	1	2018	The chart of the state of the s
	CLH	P :	2	-2-7	

Date of Notification	(1)	- Some	INam	a of Duildi	ng Owner/Operator (2)				- OCH	_	-	-1	4
5/7/18	26.5				Township School [lictrics		100	ASSESTED USE	12.37	1115	VL &	Ä
Agencies Notified	Type Notification			t Address	TOWNSHIP SCHOOL	JISTITICI		(meng	Processor Company of the Company of	7	A DI Memoria		
⊠ EPA				New Ro	oad								
☐ DEP	☐ Amended		_	State, Zip (
⊠ DOL	Amendment #		1		, NJ 08088								
	☐ Emergency (includi	ng		of Contac				T=					
⊠ DOH	justification)		100000000000000000000000000000000000000		1echanical - Richard	l Kaca		Telephone Num					
□ DCA	☐ Cancellation		0		rectionical - Menait	1 1/026	rs.	609-929-87	61				
				F	ACILITY INFORMA	TION							
Name of Facility Wh	ere Abatement is Taking Place (3)						of Facility (4)						
Kenneth R. Ols	on Middle School					X	School (K-12	1					
Street Address								, 8 (Other than	V 12)				
132 New Road												10	
City (5)							Other (i.e. pi	ivate & Comr	nercial buildings, I	nome	s, etc)	
Tabernacle						Squar	e Feet	# of Floors	Bldg, Age	SIII			
						100,		1	50+				
County (6)					Code (7)	Curre	nt Use (Prior if bei	ng demolished)					
Burlington				STATE	USE ONLY)	Scho	ool						
Name of Monitoring	Firm Hired by Building Owner (8)				ASCM No.	Name	of Abatement Cor	ntractor (9)					
Health & Safety	Sevices, Inc.						orn Contracti						
Street Address							Address	пр согр.		-			
PO Box 365	3657					1853	/illow Way						
City, State, Zip Code							tate, Zip Code						
Berlin, NJ 08009	9					2.3000,000	dland Park, N	11 07424					
Project Manager from	n Monitoring Firm			Telepho	ine No		ione No.	1 07424					
Jim Proctor				9-20-30-30-30	52-1311		333-9176		License No.				
Start Date (10)			Schadu		etion Date (11)	-			01331				
6/18/18			6/29/		etion Date (11)		of OSHA Monitor	W V					
	ing Abatement (Check Only One)		0/23/	10			ovision Consu	iltants, Inc.					
	sed/Vacated During Entire Pr	oriod of Ah					Address						
	t Performed Outside of Norm			11		20-21	L Wagaraw Ro	d., Bldg. 35-E					
✓ Other - De:		and the first of the same of	Hours				ate, Zip Code						
cope of Work (Check		cupied				Fair L	awn, NJ 074:	10					
≥3 sf or ≥3											Not the		
			\boxtimes	Renova		X	Full Containm	ent with Nega	itive Pressure				
≥160 sf or 3	2260 17			Demoli	tion		Mini-Enclosur	50					
							Glovebag Proc	edure					
							Non-Exempted	d (*) and Non-	Friable Procedure	9			
	Leantle f		Is Locatio								Aba	temer	it
Asbestos-	Location of Containing Material (ACM)	Us	Normally ed Solely				iption of			1	1	уре	7
	TO BE ABATED	1	aintenan	2000			ning Material (ACN estems insulation,	1)	Amount				
	In Facility	Cu	stodial St	aff?	(1.2.1)		g, VAT, or		(Specity SF or LF)			Enc	m
	(13)		(12)		c	ther mis	cellaneous)		51 61 61 7	Rem	R	sde	nclo
		Yes	No	N/A						Removal	Repair	Encapsulate	Enclosure
	Boiler Room	X			В	oiler B	Breeching		250 SF	X		1.7	
	Boiler Room	X			Boiler Asbe	stos P	acking and Ga	askets	30 SF	X	-	1	
										+	+		
										-	+	-	\vdash
ame of Registered Wa			NJDEP W	aste Haule	er ID No.	Cubic Ya	rds of Waste		Name of Regustered	Landi	501	-	4
nicorn Contract	ing Corp.		00358		3	W. 100 100 100 100 100 100 100 100 100 10		Fairless Hills La					
ty, State		and the same of		Disposal	Date	/		mum			-		
oodland Park, I	New Jersey				4	TBD		1 (City, State				
empleted by		Title					ignature //	1	Morrisville, PA	1-		-	-
imo Golcev		Genera	il Mana	ger			(/h.	1/1/1	E error	Dat			
				0				011		15/	7/18		- 1

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P		NOT (Purs	yant	to NJAC	8:60	STOS ABATEMENT -7 and 12:120-7		247			
Date of Notification 5/7/18	(e) U U	-		of Bu		Owner/Operato	r (2)	(71)	E G		WE
Agencies Notified	Type Notisi-	ation								ina B	V L
[]EPA	Type Notific	ation	Stre	et Add	ress						
[]DEP	[X]Initial Notific	ation	Cit	Ctat	0 7:	Code		li i	MAY	11	2018
[X]DOL	[]Amended			, State		Code , NJ, 070	40	internal	92 20		
[X]DOH	Notific	ation		of Cor		, , , , , ,	ma11	1	SHEFT	O COL	THOL &
[]DCA	[]EMERGENC	Y	Be		Loaut		Programme 1		Ł.1.	en Commence e	() Militaria mando
	[]Cancella	tion									
Name of Facility Whe	re Abatement	is Take	no Pi			INFORMATION	m				
Ben Garrison	ro roa cement	IS IGN	ing Pi	race (3	,		Type of Faci.				
Street Address							[X]Other	oter 8 (Oth (i.e., priv , homes, et	ate & c		ial
City (5)		County	16)		Con	unter Code (7)	Square Feet	# of Flo	ors Bl	dg. Ag	je
Maplewood		country		sex		unty Code (7) FATE USE ONLY)	Cumpant Has	(Decises de la			
2017							Current Use	(FILOT IT b	eing der	molish	ea)
Name of Monitoring Fi Owner (8)	rm hired by	Buildin	g As	SCM No.			ment Contracto				
N/A							IANAGEMENT	, Inc.			
Street Address						Street Address					
City, State, Zip Code	1					City, State,	topher St	•			
							r, NJ 070	42			
Project Manager for M	Monitoring Fi			ne Numb	er	Telephone Numb			License	Number	r.
		N	/A			(973)744	-8800		0037	1	
Scheduled Start Date 05 - 18- 1	_ _	d. Comp.			(11)	Name of OSHA N	Monitor				
Month Day Yes	ar Mon	nth 1	21- Day	18 Year		N/A					
Occupancy Status Duri [X]Facility Close	ng Abatement	(Check	only	one)	-	Street Address	3			-	
of Abatement											
[]Abatement Peri Hours - Descri	be: «OffHours	Descri	pt»		ty	City, State, 2	Zip Code				
[]other - Descri	be: «Other Oc	cupancy	Desc	ript»							
Scope of Work (Check	all that app:	Ly)) וויישון	Containment wi	th Nogative	Dmagan		11122200
[X]>3 sf or > []>160 sf or				ovation olition		[X]Mini-I [X]Glove-	Enclosure -bag Procedure riable Procedu		Pressu	ire	
Location	of	L	Is ocati	on					Aba	tement	_
Asbestos-Cont	aining	N	ormal Used	ly		Description Asbestos-Cont		Amount	R	R N	I N
Material (A TO BE ABAT		By Ma		nance/		Material (i.e., thermal	2 1 100 cm (fr	(Specify SF or	E M O	E A	L
In Facili (13)	ty	St	aff (12)		sulation, surfa	cing, VAT,	LF)	V	I S	S
		Yes	No	N/A		or other miscel	.ianeous)		L	R L	
Basement- uti	lity room	n.		X	7773-75	e Insulati		35 LF	X		
Basement				X	Pip	e Insulati	ion	60 LF	X		
Name of Registered Was	ste Hauler	l l	DEP W	laste	Cort	oic Yards	Nome of D		6:22		
AZTECH MANAGEI		На	uler	ID No.		Waste 1.0	Name of Regis			INC	
City, State		1	7040	,	Dis	sposal Date	City, State				
Montclair, NJ	07042				100000	/22/18	Waynesb	urg, Oh:	io 44	688	
completed By (Print or	Type) Titl	.e				Signature	//				20 2 THE W
Constantine Vi		side	nt			Signature .	starting.	fre	Date 8/31/	2017	
						()	fart 11 och	Milia	<u></u>		

(D)		NOFIF	ICATI	ON OF	ASBES1 8:60-7	COS ABATEMENT /	Chi	0240)	V-500 TSC 92			
Date of Notification	ا لاحتال		Name o	of Buil	Lding	Owner/Operator	(2)	[Promoti	E 0		17 17		
5/7/18		- 11	Kel	ly F	Raabe	9		[[7]	E C	15_			
Agencies Notified	Type Notifica	tion	Street	Addre	ess								
[]EPA	[Maitial							Annual Company	1447	1 1	00	40	
[]DEP	Notifica	tion		State					WAT	1 1	20	ľď	1000
[X]DOL	Amended Notifica	tion	Mor	itcla	uir,	NJ, 07042	2						il i
[X]DOH	NOULLICS		Name o	of Cont	tact		Te	lenhone Numbe	Andrew (7S C(7175	OL	&
[]DCA	[]EMERGENCY		Kel	ly							ita ji		
				FACI	LITY I	NFORMATION							
Name of Facility Whe Kelly Raabe	ere Abatement :	ls Takin	g Pla	ce (3)			[]So	Facility (4) chool (K-12) abchapter 8 (Other t	han l	r-12	1	
Street Address							[x] Of	ther (i.e., p lings, homes,	rivate	& CO1	mer	cial	
32 L							Square I	Feet # of	Floors	Bld	lg. I	Age	
City (5)	C	County (nty Code (7) ATE USE ONLY)					. 7	41	
Montclair		Ess	ex					Use (Prior i	r being	demo	OLIS	nea)	
Name of Monitoring E	irm hired by I	Building	ASC	M No.		Name of Abate							
N/A (8)								MENT, Inc	, .				
Street Address						Street Addres		r St.					s
City, State, Zip Coo	le					City, State, Montclai	_	07042					
Project Manager for	Monitoring Fi	m Tel	0.070	e Numb	er	Telephone Num (973)744)37:		er	
Scheduled Start Date	(10) Sched	i. Compl	etion	Date	(11)	Name of OSHA	Monitor				88		
05- 16- 1	8 0	5- 1	8-	18		N/A							
Month Day Y Occupancy Status Dur	ear Mor		only	Year		Street Addres	ss						
[X] Facility Clo of Abatemen	sed/Vacated Du t	ring En	tire I	Period									
[]Abatement Pe Hours - Desc []other - Desc	ribe: «OffHours	Descri	pt»		сy	City, State,	Zip Code						
Scope of Work (Check						Ш		0 10 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0					
[X]>3 sf or []>160 sf	>3 lf	[2		ovation olition		[X]Mini- [X]Glove	Containm Enclosure-bag Pro Friable P	cedure	tive Pr	cessu	re		
E		т.	Is ocatio	on		Descripti	on of			Aba	teme	nt I	Ype E
Location Asbestos-Con			ormal. Used	Ly		Description Asbestos-Con		Amo	ount	R E	R	N	N
Material			Solely	y .		Material (i.e., therma			ecify or	M	P	A P	L L
TO BE AB		Cu	stodi	al	in	sulation, surf			F)	V A	A	S	S
(13)		Yes	No.	N/A		or other misce	ellaneous).		L	R	L	R
Basement		-		X	Pipe	Insulati	on	70	LF	X			
Crawl Space				X		Insulati		7 :	LF	X			
CTGMT PDGCE		+											
Name of Registered Name AZTECH MANAG		с на	DEP W	ID No.	31 55	bic Yards Waste 1.0		f Registered erva Ente			INC	2	
City, State		-	1040		Di	sposal Date	City,	State		VOLUME			41-12-012-5
Montclair, NJ	07042					5/21/18	Way	nesburg,	Ohio	44	688	3	
Completed By (Print						Signatur	e // ,	1 /		ate 05/07	/18		
Constantine V	ivian Pr	eside	:11 C			\ 1n	is fariti	ne: frian				000-000	-



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

CX 4596

Date of Notification (1)			1		Building C		rator (2)	4 ROTT	-	EG	E	n v	//	EI
5/8/18	T 11.75		1	مي	AUU'	7 1			\mathcal{A}	150	15-3	11 \	7 1	5 !
Agencies Notified	Type Notification		2	Street Ad	idress	,X)	M	in the contract of	7				100
□ EPA □ DEP	Initial Amended			City, Star	te, Zip Cod	le				MAY	1	1 20	118	
DOL	Amendment #_	1 1:	_	C	Ress	5Kig		: NJ	. €	2626	•			
-DOH	justification)	cluding	1	Name of	Contact				Tele	ephone Numb	er -	2017		سندن. بل
□ DCA	☐ Cancellation				C. PA)	<u> </u>			na diseasa anno		***
Name of Facility Where A	hatement is Taking Pla	ce (3)		FACII	LITY INFO	ORMATI		Type of Facility (4)	THE COLOR WINDS	- 2 2004			
A.K	- DANNY	PINA	2	on	D			☐ School (K-						
Street Address		•			~			☐ Subchapter	8 (Other	than K-12)				
							1	Other (i.e. p	rivate &	commercial b	uildin	gs, non	nes, e	tc.)
City (5)							8	Square Feet	# of	Floors	. B	ldg. Ag	41	0
	all			,	1 (77)			2 000 Current Use (Price		Z Jamaliahad	1	17	4	_
County (6)	=01-EN1			County C STATE U	SE ONLY)		_ ' '	Current Use (Pric		J E				
		ner (8)		ASCM	í No.		Name of	Abatement Cont						-
	,	(-)							17# 					
Street Address	Manager for Monitoring Firm ate (10) Schedule				Hereit		Street Ad	Remova Idress	L	·				
	Address Add							South R:	iver	Stree	t			
City, State, Zip Code	Address Address tate, Zip Code Manager for Monitoring Firm Schedule ancy Status During Abatement (Check Only One) acility Closed/Vacated During Entire Period of Aba							te, Zip Code						
7 :	Amendment #				N			ensack,	NJ (07601 License No.	2000			
Project Manager for Monit	Amendment #				e No.	1	Telephon							
Start Date (10)	(6) BERCOEN of Monitoring Firm Hired by Building Owner (8) Address tate, Zip Code Manager for Monitoring Firm ate (10) Schedule Address ate (10) Schedule Concy Status During Abatement (Check Only One) acility Closed/Vacated During Entire Period of Abatement Performed Outside of Normal Facility Heather – Describe: Of Work (Check All That Apply) S of or ≥3 If 160 of or ≥260 If				te (11)		2 ()] - ' Name of	3 2 9 – 7 4 4 2 OSHA Monitor	-	0038	8	-		
5/17	CRESSICIUM (6) BERCOEN of Monitoring Firm Hired by Building Owner (8) Address tate, Zip Code Manager for Monitoring Firm ate (10) Schedule ancy Status During Abatement (Check Only One) acility Closed/Vacated During Entire Period of Abatement Performed Outside of Normal Facility Hother – Describe: of Work (Check All That Apply) 3 sf or ≥3 lf 160 sf or ≥260 lf Location of sbestos-Containing Material (ACM) TO BE ABATED				8		Omeos	e Enviro	nmei	1+21				
Occupancy Status During	Abatement (Check Only	y One)	/		-		Street Ad	Environderess	ZUME					
☐ Facility Closed/Vacat	Address State, Zip Code It Manager for Monitoring Firm Date (10) Schedule Schedu					1	280 I	Huyler S	Stree	e t				
Abatement Performed	t Manager for Monitoring Firm Date (10) Schedule ancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Performed Outside of Normal Facility Hother – Describe:				4			te; Zip Code	::					
	SITO IT & Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Performed Outside of Normal Facility Householder - Describe:						South	n Hacker	sacl	c, NJ	076	06	-	
5	That Apply)	P Par	novatio	22				Full Containm	ame writh	Vacative Pres	nire			
≥160 sf or ≥260 lf			molitic					Mini-Enclosur	e	vegative ries	Suic			
								Glovebag Proc Non-Exempted		Non-Friable F	roced	ure		- 4
		Ie I	ocatio	ın.								Abate		
Location	of	No	rmally	/		Desc	cription of	f				Ту	ne .	
Asbestos-Containing	Material (ACM)		Solely		Asbes	stos Contai	ining Mate	erial (ACM)		mount Specify	H		띰	Е
	THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUMN TW	The realizable	dial St	aff?	(i.e. thei		AT, or	ion, surfacing,		or LF)	Removal	Repair	caps	Enclosure
(13)			(12)			other m	iscellaneo	ous)			val	air	Encapsulate	sure
		Yes	No	N/A									63	
RECHT SIDE	400 SE				Six	Dinic	- MA	TEM AL		580 SF	×			
									- 0					
Name of Registered Waste	Registered Waste Hauler				aste	Cubic Y	'ards	Name of	Register	ed Landfill				
B . B	-			uler ID		of Waste	20/2	C7 34 .	(148) (148)	Б.				
Best Removal City, State	Inc			1710	19	Disposa	Date.	/ Mine City, Star	rva e	Enterr	ri	ses	,	LLC
Hackensack.	NI 07601					S		Wayn		ra OL	r /ı	468	Q	
Completed by	MU 1/1001	Title				Sig	gnature	()	_	Dat		- 1	0	
J. Maiorano		Esti	ima	tor			X	Joion	سند	5	51 '	1/8	X	
ASB-41 (R-06-08)							U * D	Oo not use this fo	rm for as	bestos licensu	ге ехе	mpted	activ	ities.

CK# 16	46	PL	No fi	S FICATIO Pursuan	tate of N N OF AS t to NJAC	ew Jerse BESTOS C 8:60 ar	ey S ABATE nd 12:12	MEN ⁻	T		E (6 [\mathbb{W}	E	
Date of Notification (1)					of Building			r (2)	The state of the s	1	3.1	4 V	4 4	0040	11	1 1 1 1 1 1
May 8, 2018					amania	n Rama	3		- Addi		MA	41	11	2018	The state of the s	1
Agencies Notified	Type Notification	1		Street /	Address											ĺ
EPA EPA	× Initial									ŀ	ASSE:	TOS	a coi	TRO	L&	arussand.
DEP X DOL	Amended				ate, Zip C				l.	Statute en.	O SAME TO A	LIUS	111664	G		
	Amendmer Emergency				t Hills, N		78									
DOH	justification)			of Contact					1	Talanh	one h	dumha	ar		
DCA	Cancellatio	n			ol Devel	•										
Name of Facility Where	Abatement is Taki	na Dlana /	2)	FAC	ILITY INF	ORMAT	ION									
House under Reno		ing Place (3)					Тур	e of Facility	/ (4)						
Street Address	vation								School (K							
ou out / ladi coo								H	Subchapte Other (i.e.	er 8 (C	ther the	ian K	12) arcial h	uildin	re hou	mac
City (5)								ш	etc.)	. piivai		1111110	Total D	ananış	j5, 1101	nes,
City (5) Short Hills									are Feet	1	of Flo	ors		Bldg	. Age	
County (6)								240			2			50+		
Essex					Code (7) USE ONLY	n			ent Use (P							
- Committee and						" —			use - Un			atio	n			
Name of Monitoring Firm n/a	Hired by Building	Owner (8)		ASC	M No.		I management		atement Co		tor (9)					
1000000				n/a			Harr	nony	Contrac	eting						
Street Address n/a							Street									3723
									ade Ave							
City, State, Zip Code							L 00000		Zip Code							
n/a							Garf	ield,	NJ 0702	6						
Project Manager for Mon	itoring Firm			Telepho	ne No.		Teleph				Lic	ense	No.			
n/a				n/a			973-	460-	6026		01	255	j			
Start Date (10)				npletion	Date (11)				HA Monito	-				11000		
5/18/2018		5/21/20				Į.			Contrac	ting						
Occupancy Status During	Abatement (Che	ck Only On	e)				Street		-							
× Facility Closed/Vaca	ted During Entire	Period of A	bater	nent			360	Palis	ade Ave							
Abatement Performe Other – Describe:	ed Outside of Norr	nal Facility	Hour	S			City, S	tate, Z	ip Code							
E-Francisco							Garf	ield,	NJ 0702	6						
Scope of Work (Check Al	I I hat Apply)															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enova				\boxtimes	Fu	II Containm	nent w	ith Neg	gative	Pres	sure		
≥160 sf or ≥260 lf			emoli	tion			-		ni-Enclosur							
								No	ovebag Pro n-Exempte	ed (*) a	e and No	n-Fria	able P	roced	ire	
		Is	Locat	ion											temer	nt
Location	of	N	ormal	ly		Des	scription	of							Гуре	
Asbestos-Containing I	Material (ACM)		d Sole ntena		Asbes	tos Cont	aining M	ateria	(ACM)		Amou	nt			m	
TO BE ABA			odial S		(i.e.	thermal			ation,		(Speci		7 e	ת וי	nce	Enc
(13)	9		(12)				cing, VA				SF or L	.F)	Remova	Repair	psc	Enclosure
		Yes	No	N/A				,					/a	. =	Encapsulate	ure
129		163	140	IN/A												
Kitcher	<u> </u>			Х	As	bestos	Pipe Ir	ısula	tion		25 LF	=	X			
													+		-	
		+													-	
Name of Posisters J W	a Haul		1	10.55	Disease and the second											
Name of Registered Wast				JDEP Wauler ID		Cubic of Was			Name of	Regis	tered L	andf	ill			
Harmony Contracting	J					TBD			GROW	VS La	andfill					
City, State					-	ACCURACY OF THE	al Date		City, Stat	te						
Garfield, NJ						TBD			Morris		PA 19	067				
Completed by		Title					gnature	~			10		Date			
E. Cirovic		Secre	tarv			"	61	Y_)		177.152-72	5/0/2	010		

*PROJECT CAN	CELED \			ICATION	N OF ASE	BESTOS	ABATE		г	[7]	E	C	E.		1 15	2 1
Data as N. 155 . 15 . 16	10 U)	(1)		to NJAC			251				~				1
Date of Notification (1) 05/07/18		70			of Building sh and \					A TOTAL OF THE PARTY OF THE PAR	34	AY	11	201	Q	2 110
Agencies Notified	Type Notification		-	Street A		randine	001 110			id in	[MAI	A I	1 1	20	U	
⊠ EPA	☐ Initial			24 Kin	nbles B	each R	oad		10 m	-NO	Agor		0.00		505 6	
X EPA X DEP X DOL	X Amended	.114		The state of the s	ate, Zip Co						AND DESCRIPTION OF		333			<u>. </u>
	Amendment Emergency	(including	-		May Co		use, N	J 082	210		1.000					
DOH DCA	justification) Cancellation				Braudis					Tel	ephone	Nun	nher			
General					ILITY INF		ION					_				
Name of Facility Where	Abatement is Takin	g Place (3	3)					Туре	e of Facility (4	.)						
Street Address									School (K-12		66 1		,			
1140 Rt 49								X	Subchapter of Other (i.e. pr					dings,	hom	es,
City (5)									etc.) are Feet	# 01	Floors		IB	ldg. A	ne	
Pennsville								162		2	1 10010		6		90	
County (6)					Code (7)	n			ent Use (Prio	r if bei	ng dem	olish	ed)			
Salem	Librard L. D. Hall	2 (0)						Nor								
Name of Monitoring Firm	Hirea by Bullaing (Jwner (8)		ASCN n/a	/ No.		Name SA2		atement Cont	ractor	(9)					
Street Address		179					Street 1800		ess eral Street							
City, State, Zip Code									Zip Code							
5 :									NJ 08105					3500		
Project Manager for Mon	itoring Firm			Telepho	ne No.		Teleph 856 6				Licens).			
Start Date (10)		Schedule	ed Con	npletion I	Date (11)				HA Monitor		01303	5				
05/07/17		05/08/			(,		Self									
Occupancy Status During	Abatement (Chec	k Only On	e)				Street	Addre	ess							
Facility Closed/Vaca Abatement Perform	ated During Entire F	Period of A	baten	nent								<u>Carrier S</u>				
Other – Describe:	ed Odiside of North	iai raciiity	nours	;			City, S	tate, z	Zip Code							
Scope of Work (Check A	Il That Apply)															
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			lenova emolit						ill Containmei	nt with	Negativ	/e Pr	essur	e		
							×	GI	ovebag Proce on-Exempted	dure	Non-F	riahl	a Proc	adur		
		Is	Locati	on				- 100	JI Exempted	() and	711011-1	ilabi		Abate		
Location			lormal d Sole				scription							Ту	oe	
Asbestos-Containing TO BE ABA	Material (ACM) ATED	Ma	intenai	nce/			aining M systems		I (ACM) ation.		mount pecify		Z	_	Enc	ш
In Facili (13)		Cust	odial 8 (12)	starr?		surfac	cing, VA	T, or			or LF)		Remova	Repair	Encapsulate	Enclosure
(.0)		Yes	No	N/A		oulet II	Посенан	ieous)					val	=	ulate	ure
Stairwell-To	op wall			х			rywall			34	4 SF		x			
2nd flo	or			х		Li	noleun	n		52	6 SF		x			
	***************************************			х												
Name of Registered Was	te Hauler			JDEP W		Cubic			Name of R	egiste	red Lan	dfill				
Champion Disposal			100000	auler ID	INO.	of Was	ste		GROWS	Land	dfill					
City, State							sal Date		City, State							
Hainsport, NJ						05/09			Morrisvil	e, P	4					
Completed by Jeff Yekenchik		Title Owne	er			S	ignature	1	1			Date 05/	e 07/1	8		

State of New Jersey

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no CK			CATION	ate of Nev I OF ASB to NJAC	ESTOS	ABATE		T		i, C. E		<u>V</u> . [3 5 6 7 7 7	Carried Control
Date of Notification (1) 05/07/18				f Building			77.5	the second state of the se		MAY 1	1 20	118	- 1	
Agencies Notified Type Notification		-	Street A	Realty A	ISSOCIA	iles LL	C	1	ker .	***************************************				-
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X EPA X DEP X DOL Initial Amended Amendment	# 0			ate, Zip Co				L.	LATTE SEE VEN	Editorial				
Emergency	(including	-		Berlin, N	1J 080	91			Tal	lephone Nu	mhor			
DOH justification) DCA Cancellation				Gottlieb					10000	56 626 15				
Non- of Falls and Artist and Arti				LITY INFO		ON								
Name of Facility Where Abatement is Takin Camden Commodities Internation)					Тур	e of Facility (4						
Street Address					***		H	School (K-1: Subchapter	8 (Oth					
1895 Federal Street							X	Other (i.e. p	rivate	& commerc	ial build	dings,	home	es,
City (5)							6000	are Feet	1000	f Floors	1	ldg. A	ge	
Camden, NJ 08105 County (6)			County	Codo (7)	,			4,000	2		- 1	38		
Camden				Code (7) USE ONLY				rent Use (Pric arehouse	r it be	ing demoils	nea)			
Name of Monitoring Firm Hired by Building	Owner (8)		ASCA	/ No.		Name		atement Con	tractor	(9)				
Health & Safety Services Inc			n/a			SA2								
Street Address 318 12th Street						Street		_{ess} deral Stree						
City, State, Zip Code							0.6	Zip Code				-		
Hammonton, NJ 08037								, NJ 08105						
Project Manager for Monitoring Firm			Telepho			Teleph				License N	Vo.			
Jim Proctor Start Date (10)	Schedule	d Con		52 1311 Date (11)				3288 SHA Monitor		01303				
09/11/17	06/30/		ipiedori	Date (11)		Self								
Occupancy Status During Abatement (Chec	k Only On	e)				Street	Addre	ess						
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe:	Period of A nal Facility	baten Hours	nent			City, S	tate,	Zip Code				ice-unite		
Scope of Work (Check All That Apply)										*				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova emolit		(*)		×	M	ull Containme lini-Enclosure llovebag Proc on-Exempted	edure				_	
	le	Locati	on				1 14	on-Exempled	() an	u Non-Friai	JIE PIO	Abate		
Location of	N	lormal	ly		De	scription	of					Ту	ре	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mai	d Sole intenai odial S (12)	nce/		thermal surface	taining M systems cing, VA niscellar	s insu T, or		(\$	mount Specify or LF)	Removal	Repair	Encapsulate	Enclosure
Basement/Warehouse	169	NU	-			TSI			0	79 LF	-			
2nd FL/1st FL Offices			X			VAT					X			
Heater Room	-		X			ransite				00 SF 0 SF	X			
Alcove Area/Warehouse	1		X		- 1						X			
Name of Registered Waste Hauler		N	JDEP W	/aste	Cubic	VAT Yards		Name of F		45 SF ered Landfil	1			
Champion Disposal		1	auler ID 2707	No.	of Was			GROW	S Lar					
City, State Hainsport, NJ					Ongo	sal Date oing		City, State Morrisv		PA				
Completed by Jeff Yekenchik	Title	er				Signature	1	1	, 1	Da	ate 5/07/	18		
9							1	M						

THE POINT

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

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Date of Notification (1)				Name	of Building (Owner/	Operato	r (2)		114	Arran II		1			
05/07/18					Realty A						17.11			00/0	i	Table of the same
Agencies Notified	Type Notification			Street	Address					44-	- MA	Y 1		2018		
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X EPA X DEP X DOL	Amended		. [tate, Zip Co					Į.	SELE	700	COi	TRO	11.64	-1,-,-
2	Amendment :		_		t Berlin, N	JJ 080	91			. 771 12722	ternar –			9		
DOH DCA	justification)		1		of Contact	0)					lephone					
LI DCA	Cancellation				Gottlieb					88	56 626	15	17			
Name of Facility Where A	batement is Taking	Place	(3)	FAC	ILITY INFO	DRMAT	ION	Tv	pe of Facility	(4)						
Camden Commodit	ies Internationa	ı								Ave Sc						
Street Address						*******		H	School (K- Subchapte	-12) er 8 (Oth	er than	K-12	2)			
1895 Federal Stree	t							X		private	& comm	nercia	al buil	dings	, hom	ies,
City (5)								Sq	uare Feet	# 0	f Floors		TE	Bldg. /	Age	
Camden, NJ 08105								10	04,000	2				38		
County (6)					Code (7)				irrent Use (Pr		ing dem	olish	ed)		-	
Camden					USE ONLY)		_	1000	/arehouse							
Name of Monitoring Firm Health & Safety Ser		wner (8)	ASCI n/a	M No.		Name SA2		batement Co	ontractor	(9)					
Street Address							Street					-				
318 12th Street							1800) Fe	ederal Stre	et						
City, State, Zip Code							City, S	tate	, Zip Code							
Hammonton, NJ 08							Cam	nder	n, NJ 0810)5						
Project Manager for Monit Jim Proctor	toring Firm			Telepho			Teleph				Licens).		11.550110	
Start Date (10)		Cabadul	-40-		52 1311				3288		0130)3				
09/11/17		06/30		npietion	Date (11)		Name		SHA Monitor							
Occupancy Status During							Street									
Facility Closed/Vaca Abatement Performe	ted During Entire Pe	eriod of	Abatem	ent												
Other – Describe: _		ıı Facılıt	/ Hours			_	City, S	tate,	Zip Code				H0400#2 11	1212 -		
Scope of Work (Check All	That Apply)													17-		
≥3 sf or ≥3 lf≥160 sf or ≥260 lf			Renova				X	F	Full Containm	ent with	Negativ	ve Pr	essu	re		
≥ 100 SI OF 2200 IT			Demoliti	ion			-	1	Mini-Enclosur Glovebag Pro	e						
							X	1	lon-Exempte	d (*) and	d Non-F	riable	e Pro	cedur	е	
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Location Asbestos-Containing N			Normall d Solel				scription							Ty	ре	Т
TO BE ABA	TED	. Ma	intenar	ice/	Asbesto (i.e. th	os Cont hermal	aining M systems	later	ial (ACM)		mount pecify		20		Ē	ш
In Facility (13)	У	Cus	todial S (12)	tatt?		surfac	cing, VA	T, or			or LF)		Remova	Repair	Encapsulate	Enclosure
(13)					. '	otner n	niscellan	eous	s)				oval	air	sulat	sure
		Yes	No	N/A											Θ	
Main Warehouse	Boiler Wall			х		Т	ransite			40	0 SF		x			
Main Wareh	ouse			х		FI	oor Fill			847	75 SF		х			
Front Office	Area			х		N	/lastic			197	75 SF		x			
				-	-End	of Mate	erial	-								
Name of Registered Waste	e Hauler	W1301581	JDEP W		Cubic '			Name of	Register	red Land	dfill			_	\dashv	
Champion Disposal			10	auler ID 2707	100,000	of Was	te		GROW							
City, State							al Date		City, Stat							
Hainsport, NJ						Ongo			Morrisv	/ille, P	Ą					
Completed by Jeff Yekenchik		Title				Si	gnature	1				Date		59.3		
Jell Teketictilk		Own	er					1/	1			05/	07/1	8		

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Date of Notification (1) 05/07/18	1	I	of Building o Park LI		Operator	r (2)	and the second second	10 m	MAY	1 1	20	018	And the second	1
Agencies Notified Type Notification			Address			35/10		ED.,	-		-		1 210	700
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X DEP X Amended Amendment	#2	100000000000000000000000000000000000000					L	CONTRACTOR OF THE PERSON OF TH	Real 1	Jan S	211,417	NAME OF TAXABLE PARTY.	-	
Emergency			iton, NJ (18609										
DOH justification)		1,10,110	of Contact					Te	ephone	Num	ber			
☐ DCA ☐ Cancellation	1	Micha	ael Comp	etielle				60	9-658	-421	0			
		FAC	ILITY INFO	ORMATI	ON									
Name of Facility Where Abatement is Takir	g Place (3)					Type	of Facility	(4)						
Metal shack roof							School (K-	12)						
Street Address						П:	Subchapte	r 8 (Oth						
1800 E State Street							Other (i.e.	private	& comm	ercia	build	dings,	home	es,
City (5)							etc.)	1 # =	f Floors		Тъ	ldg. A	~~	
Hamilton						N 2000	re Feet	1000000	Floors		1000	_	_	
						6000		1				Inkno	own	
County (6)		County	Code (7)	,			nt Use (Pr							
Mercer		(STATE	USE ONLY	'		Con	struction	mate	rial sto	rage				
Name of Monitoring Firm Hired by Building	Owner (8)	ASC	M No.		Name	of Aba	tement Co	ntractor	(9)					
n/a		n/a			SA2	LLC			8 10					
Street Address			X - X		Street	Addres	25	-		-				
							eral Stree	nt.						
City State 7in Code					100000000000000000000000000000000000000		and a second second	2 L						_
City, State, Zip Code	W						ip Code	_						
							NJ 0810	5						
Project Manager for Monitoring Firm		Teleph	one No.		Telepi	hone No	0.		Licens	se No				
					856	630 3	288		0130	3				
Start Date (10)	Scheduled	Completion	Date (11)		Name	of OSI	A Monitor							-11115
04/07/18	06/01/18					monit								
Occupancy Status During Abatement (Chec		*				Addres								
		8			Outcol	Addies	55							
Facility Closed/Vacated During Entire								120000000000000000000000000000000000000						
Abatement Performed Outside of Norr Other – Describe: Occupied	nai Facility F	lours			City, S	State, Zi	ip Code		25					
leaned				_										
Scope of Work (Check All That Apply)					****									
≥3 sf or ≥3 If	□ Re	novation] Ful	I Containm	ent with	. Negati	ve Pr	ااعودااا	re.		
≥160 sf or ≥260 lf		molition					i-Enclosur		i ivegau	IVE I I	CSSU	10		
 .	District				-		vebag Pro							
					Σ	✓ No.	n-Exempte	d (*) an	d Non-F	riable	Pro	cedur	е	
	Is L	ocation										Abate		t
Location of		rmally		Dos	scription	o of						Ту	ре	
Asbestos-Containing Material (ACM)	Used	Solely by	Asbes	tos Cont			(ACM)	م ا	mount				Е	
TO BE ABATED		tenance/ dial Staff?		thermal	system	s insula		10.00	Specify		R	70	nc	Enclosure
In Facility		(12)			cing, VA			SI	or LF)		Removal	Repair	Encapsulate	clos
(13)				other n	niscella	neous)					va	air	ula	Sure
	Yes	No N/A											te	w
D (+		1										-	-
Roof		X		HOOTII	ng ma	teriai		;	5200		x			
					-							-		
Name of Registered Waste Hauler		NJDEP \	Vaste	Cubic	Yards		Name of	Registe	ered Lar	ndfill				1
		Hauler II		of Was				EG 250						
Champion Disposal		32707		43			Grows	Landi	Ш					
City, State				Dispos	sal Date		City, Sta	te						
Hainsport, NJ				Ongo			Morris		Α					
Completed by	Title				ignature	a /	1	-, -		Date	3			
Jeff Yekenchik	Owner					//	1				07/1	18		
	1			- 1		* E						_		

State of New Jersey

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Date of Notification (1) 5/7/18				of Building North A			(2)			MA	Y 1	1	201	R	
Agencies Notified Type Notification			Street A	Address th Avenu	ue				hah basi						57
□ EPA □ Initial □ Amended □ Amendment #	#	_		ate, Zip Co York, NY		7			dot, reposite	ASSIS	HOS LICE	00	NYP.	OL 8	•
Emergency (i justification) DCA Emergency (i justification) Cancellation	ncluding			of Contact cca Herb	ert				353722	ephone I 6-722-		er			
			FACI	ILITY INFO	ORMATI	ION									
Name of Facility Where Abatement is Taking Former Lukoil Station #57259	Place (3	3)					Тур	e of Facility (School (K-1	A III						
Street Address 1349 Route 9							×	Subchapter Other (i.e. p etc.)	8 (Oth			uilo	lings,	hom	es,
City (5) Toms River							Squ 1,0	are Feet	# o	f Floors		B: 3:	ldg. A	ge	
County (6) Ocean				Code (7) USE ONLY,)			rent Use (Prios		ng demo	lished)			
Name of Monitoring Firm Hired by Building O The Vertex Companies	wner (8)		ASCN	Л No.				eatement Cor	tractor	(9)					
Street Address 700 Turner Way, Suite 105						Street	Addr		ıd						
City, State, Zip Code Aston, PA 19014						City, S	tate,	Zip Code A 19341							
Project Manager for Monitoring Firm Joseph Anello			Telepho	ne No. 58-8902		Teleph 484-8	none l	No.		License 01161					
Start Date (10)	Schedule	ed Com		Date (11)		Name	of OS	SHA Monitor		01101					
Occupancy Status During Abatement (Check		5.0				EMS Street	Addre								
Facility Closed/Vacated During Entire Po	eriod of <i>A</i> al Facility	Abatem Hours	ent					e 130 Zip Code							
Other – Describe: Scope of Work (Check All That Apply)					_	Cinna	amir	nson, NJ							
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 	ACCUPATION .	tenovat emoliti				×	M G	ull Containme lini-Enclosure lovebag Proc on-Exempted	edure					e	
Location of	1	Locatio										-	9.63.2	ment	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	d Solel intenan odial S (12)	ice/		tos Cont thermal surfac		lateria s insu T, or		(S	mount Specify or LF)		Remova	Repair	Encapsulate	Enclosure
0-11-12-1	Yes	No	N/A											e	
Cashier Kiosk ext.			X	F	aux br	rick on	met	al	60	00 SF	Х	+			
Name of Registered Waste Hauler		l Ni	JDEP W	lasta	Out:	Vasal -			2	11	16.11				
Waste Management		2000	auler ID	555	of Was			Name of I			ITIII				
City, State Trenton, NJ					Dispos TBD	al Date		City, State Morrisvi		Α					
Completed by Jack Bally	Title Sr. Pi	roject	Manag	ger	S	ignature		Bally	(all)		Date 5/7/1	8			



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

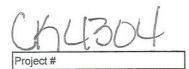
CHECK # 5999

Date of Notification (1) 05-04-18					of Building ((2)		10.00			- 10-10-10-10-1	***	
Agencies Notified Typ	e Notification			Street A	ddress idden Ri	dge				A Comment of the Comm			-	\mathbb{V}	E
DEP DOL	Amended Amendment a Emergency (i		_[Irving,	10.0000000	de				7 Part 1	MΔ	Y 1	1 ;	2018	20 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
⊠ DOH □	justification) Cancellation	ricidaling			f Contact Kingsbur	~				Telephor (201) 3					1
					ILITY INFO		ION			Samuel and the state of	1822		CCN	TRO	L
Name of Facility Where Abate	ement is Taking	Place (3	3)					Туре	of Facility (4		()	(Cell	1:114	3	
Street Address 1883 Highway 27									School (K-12 Subchapter Other (i.e. pretc.)	8 (Other tha			dings,	hom	es,
City (5) Edison, NJ								Squar 80,0	re Feet 00	# of Floo	rs		Bldg. A	\ge	
County (6) Middlesex					Code (7) USE ONLY)				nt Use (Prio imercial	or if being de	molish	ied)			
Name of Monitoring Firm Hire ESIS Health, Safety & E				ASCN	/I No.				tement Con						
Street Address P.O. Box 430							Street 200 E		Street						
City, State, Zip Code North Versailles, PA 15	rth Versailles, PA 15137								ip Code NJ 07072						
Project Manager for Monitoring Brian Kingsbury	ject Manager for Monitoring Firm an Kingsbury						Teleph 201-9			Lice 007	nse N	0.			
Start Date (10) 05-14-18	an Kingsbury rt Date (10) Schedul						Name of		A Monitor		10000				
Occupancy Status During Aba	tement (Check	Only On	e)				Street /	Addres	ss						
Facility Closed/Vacated I	During Entire Po	eriod of A	batem	ent			30.000.000.00	NOTE OF THE ST	son Aver	nue					
Abatement Performed Outline Other – Describe:	JISIDE OF NOTTIN	ai Facility	Hours			_	City, St		p Code d City, NY	(11101					
Scope of Work (Check All Tha	t Apply)														
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf			enova emoliti				×	Min Glo	Containmenti-Enclosure vebag Procest-Exempted	edure				e	
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Roof: Main				x	. 011		Flashi		ing	500SF		x			
Roof: Main				x))		h Pock	0.00		2SF		x			
Roof: Main			x		D	uct Tar			600SF		x				
Name of Registered Waste Ha							Yards		Name of R	egistered La	andfill				
ATC, Inc. / JBT (50071)		0.00	310	A CONTRACTOR OF THE PARTY OF TH	of Was			54 VO. (0.0 (0.0 (0.0 (0.0 (0.0 (0.0 (0.0 (0	Enterpris	es					
City, State Shirley, NY / Bronx, NY						TBD	sal Date	1	City, State Waynesh	burg, OH	4468	8			
Completed by Joseph Patrick		Title Project	ct Ma	nager		S	ignature	A	N		Dat 05	e -04-1	18		

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

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	1 0			7												
							Name of Building Owner / Operator (2)									
. :	N															
Agenci	EPA	Type of Noti		n / Notificatio		Address	S									
	DEP			ication		toto 8 7	Zip Code			1 may 1			42 111			
Х	DOL			Notification		rk, NJ					MAY 1	2018				
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Name o	of Facility V	Vhere Abater			ace (3)		Ту	Company of Salar Reserved	Facility (4)							
Stroot /	Address		Resid	ence					nool (K-12)	041 H	IC 40)					
Sueeur	Address						1.		ochapter 8 (0		n K-12) mercial build	inas homo	o oto			
								quare		# of Floor						
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	ate & Zip C	F-12							ate & Zip Co							
	an, NJ 07								e Townshi		831					
		or Monitoring	Firm	Т	elephone I	Number			ne Number	p, 140 00		Number				
Tom G					32-290-2				5-9062		2.00.100	00714				
Schedu	led Start D	ate (10)	Sched	luled Comp	letion Date	e (11)	Na	ame of	f OSHA Mon	itor						
	5/14/18	8			5/15/18		GI	lobal	Abatemen	t Servic	es, LLC					
		During Abat							ddress	_						
		ed/Vacated [hoolhouse							
	patement i escribe:	Performed Or	utside	of Normal	Facility Ho	urs -			ate & Zip Coo							
	escribe: ther - Desc	cribe:					IM	onro	e Townshi	p, NJ 08	831					
575	mante andiana	heck all that	annlul													
	emolition	HECK All that i		Renovation	2				Eull Cont	oinmont	ith Negative	Drocouro				
1000	arge Projec	* †	^	Renovation	1				Mini-Enc		vith Negative	Pressure				
		3 SF or ≥ 3	IFAC	^M				v	(Glovebag							
		≥ 160 SF or ≥						^	AND COMPANY OF STREET	y Non-frial	alo					
Q		ocation of	200 1	LI AOW	Is Location	on T		Docor	ription of	NOII-IIIAI	Amount	Abata	ment Type			
		tos-Containii	na		Normally U				-Containing		(Specify	(Specify	: Removal,			
	Ma	terial (ACM)			Solely by		1	Materi	al (ACM)		Square Feet		epair,			
		BE ABATED		1000	Maintenand				mal systems		Linear Feet)		sulation or			
		in Facility (13)			Custodial Si (12)	tan?			surfacing, VA iscellaneous			End	closure)			
		(10)			(12)		01 00	.1101 1111	isocharicous	"						
	В	asement		_	N/A	-		TSI	l Pipe		105 LF	Re	moval			
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												+				
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	old Cartag	ed Waste Ha	ulef	IN	JDEP Was	ste наи 18693	eriD#	Cu	. Yds. of Wa		lame of Regi cumberland		aiill			
City, Sta		J-				10033		Dia	sposal Date		ity, State	County				
	eehold, N	IJ						Dis	5/15/18		lewburg, P	Α				
		nt or Type)		Title			and the second second second	Sin	nature	1,,			Date			
	inick Tri			Manager				1 -	uminick Tr	inaali			5/4/18			
		474		-				200								

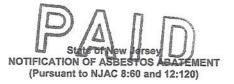


NOTIFICATION OF ASSESTOS ABATEMENT (Pursuant to N. AC. 8: 40 and 12:120)

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[M/1]]	Check #	11111	<u> 9</u>	12-3	Ц	U	15	
	Check #	16-24						

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Date of Notification (1)			Name of	f Building (Owner/Operato	r (2)		4					
05/07/2018				pher Ma	arino				ACT I		000		11 8
Agencies Notified Type Notification	n		Street A	ddress				U apparent	Balance to the second	LÖÜ	ON	G.,	The be
☐ EPA ☐ Initial								ENT-TOWNS	fiction manual pr	and the state	and make		
DEP Amended Amendmer	ot #			ate, Zip Co									
Emergency				it, NJ 07	901			1 Tol	ephone Nu	mher			
DOH justification								1 1 616	sprione Nu	inibei			
DCA Cancellation	ın			pher Ma	RMATION	-			_				
Name of Facility Where Abatement is Tak	ing Place (3)	FACI	LITTINEC	RWIATION	Typ	e of Facility	(4)					
Residence	,	5)					School (K-	12\					
Street Address						Ħ	Subchapte	r 8 (Othe					
							Other (i.e.	private 8	& commerc	ial build	dings,	home	s,
City (5)						Squ	etc.) uare Feet	# of	Floors	В	ldg. A	ge	
Summit, NJ 07901								100.00			549 7 8 - 8	201	
County (6)		Т	County	Code (7)		Cui	rrent Use (Pr	ior if bei	ng demolis	shed)			
Union County				USE ONLY)									
Name of Monitoring Firm Hired by Building	Owner (8)	ASCN	ЛNo.	Name	e of A	batement Co	ntractor	(9)	*			
	191				Nick	Res	toration L	LC					
Street Address						t Add							
					72 B	rook	side Rd						
City, State, Zip Code					City,	State	Zip Code						
					Rand	dolpl	h, NJ 078	69					
Project Manager for Monitoring Firm			Telepho	ne No.	Telep	hone	No.		License	No.			
					973	933-	2550		01358				
Start Date (10)	Schedul	led Co	mpletion	Date (11)	Name	e of O	SHA Monitor						
05/18/2018	05/23/2	2018			IRIS								
Occupancy Status During Abatement (Che	eck Only O	ne)				t Add							
Facility Closed/Vacated During Entire						100000	22 West						
Abatement Performed Outside of No Other – Describe:	rmal Facilit	y Hour	s				Zip Code						
					- Unio	n, N	J 07083						
Scope of Work (Check All That Apply)						-							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	and the same of th	Renov					Full Containm Mini-Enclosur		Negative	Pressu	re		
2160 St 0r 2260 IT		Demol	luon			Secret 1	Glovebag Pro	10.77					
				,			Non-Exempte	ed (*) an	d Non-Fria	ble Pro	cedur	е	
	1:	s Loca	tion									ement pe	ĺ
Location of		Norma ed Sol			Descriptio					-	1)	pe	
Asbestos-Containing Material (ACM) TO BE ABATED		aintena			tos Containing thermal systen				mount Specify	70	_	E	Ш
In Facility	Cus	stodial		(1.6.	surfacing, V				or LF)	Remova	Repair	Encapsulate	Enclosure
(13)		(12)			other miscella	aneou	s)			oval	air.	sulat	sure
	Yes	No	N/A									ie	
Attic		x		Vermic	ulate			1300	SF				
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-		_									-	_	_
Name of Registered Waste Hauler			NJDEP V		Cubic Yards		Name of	f Registe	ered Landf	ill			
Nick Restoration LLC			Hauler ID 003378		of Waste TBD		G.R.O.	W.S					
City, State			700010		Disposal Dat	te	City, Sta	ite					
Randolph, NJ					TBD,	100	Tullyto		3				
Completed by	Title				Signatu	re	1 1 .	,		ate			
Nikica Mrda	Pres	ident			12	1	M	_ '	lo	5/07/2	2018		

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Date of Notification (1)			T		f Building						- :				
05/04/2018				Count	ty of Mid	dlesex	d Office	e of	Engineering	1	<u>-</u>	, e grana a . A sana a .			
Agencies Notified	Type Notification			Street A	ddress					-	A Comment	\$ 50°			FOL.
X EPA	× Initial			75 Ba	yard Stre	eet, 5t	h Flooi	r, PC	BOX 871	Longe	Character as as well	TP- 11-1	"THE THE	to the paint	ture to
X DEP	Amended			-0.0	ate, Zip Co							***************************************			
X DOL	Amendment		-	New E	Brunswic	k NJ (08901								
X DOH	Emergency justification)			Name o	f Contact					Tele	phone N	ımber		10011	
X DCA	Cancellation			Josep	h Valdes	5				73	2-745-				
				FACI	ILITY INFO	RMAT	ION								
Name of Facility Where								Тур	e of Facility (4))					18,620,656,15
Maintenance Buildi	ng B-Boller Ro	om ————							School (K-12						
Street Address	 ■ Department on 							×	Subchapter 8	(Othe	er than K-	12)	dinaa	h	
130 Apple Orchard	Lane							Ш	Other (i.e. pri etc.)	vate 6	commerc	ilud ibil	aings,	nome	es,
City (5)								Squ	are Feet	# of	Floors	E	ldg. A	\ge	
North Brunswick NJ	08902							n/a		n/a		r	ı/a		
County (6)					Code (7)			Curr	rent Use (Prior	if beir	ng demolis	shed)			
Middlesex				(SIAIE	USE ONLY)	1 1 To 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			iler Room						
Name of Monitoring Firm	757			ASCN	A No.		Name	of Ab	atement Contr	ractor	(9)				
Matrix New World E	ngineering Inc						Ama	x Co	ontracting LI	LC					
Street Address							Street								
26 Columbia Tpk, S	econd Floor		DOM:				POE	BOX	734						
City, State, Zip Code							1 150		Zip Code					X 14 == 3000	
Florham Park NJ 07							Woo	dlan	d Park NJ 0	7424	1				
Project Manager for Moni	toring Firm		1	Telepho			Teleph			T	License	Vo.			
Matthew Sheldon				973-24	40-1800		973-	692-	6298		01266				
Start Date (10)		Scheduled		pletion I	Date (11)		TO STATE OF THE PARTY.		SHA Monitor						
05/15/2018		05/25/2	7000				Ama	x Co	ontracting LI	_C					
Occupancy Status During	Abatement (Chec	k Only One	2)				Street				19 10000				
Facility Closed/Vaca	ited During Entire F	Period of Al	oaten	ent			POE	зох	734						
Abatement Performe X Other – Describe: 0	ed Outside of Norm	al Facility	Hours						Zip Code						
							Woo	dlan	d Park NJ 0	7424	1				
Scope of Work (Check Al	That Apply)	72003						_			Wa-04a				
≥3 sf or ≥3 lf		(Description)	nova						ull Containmen	t with	Negative	Pressu	re		
× ≥160 sf or ≥260 lf		De	molit	on			-	1000000	ini-Enclosure lovebag Proce	dura					
							-	N	on-Exempted ((*) and	Non-Fria	ble Pro	cedur	е	
		Isl	ocati	on									11.000	ment	
Location	of	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ormal	0.07		De	scription	of					Ту	ре	
Asbestos-Containing	Material (ACM)	Used	Sole		Asbest				al (ACM)	Ar	nount			m	
TO BE ABA	<u>TED</u>	Custo			(i.e. 1		systems		lation,		pecify	Re	70	nca	Enc
(13)	ıy		(12)	0.000			cing, VA niscellan		,	SF	or LF)	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A					·			<u>a</u>	-	late	ıre
		168	NO	IN/A											
Boiler Ro	om			X		Boile	r Insula	ation		12	0 SF	X			
Boiler Ro	om			x	Inter	nal an	d Base	e Ma	terial						
												+			
		-					1.00					-			
Name of Posistand March	to Hauler		T N.	IDECT		0.11	Vest								
Name of Registered Was				JDEP W auler ID		Cubic of Was	Yards ste		Name of Re		ed Landfi	I			
Amax Contracting LL	.C			036184		30 cy			Fairless	Hills					
City, State	WOOMER COLUMN		_				sal Date	4	City, State						
Woodland Park NJ 0	7424				1	06/02	2/2018		Morrisvill	e PA					
Completed by		Title				S	ignature	1	10		D	ate			
Tome Maslarkov		Projec	t Ma	nager				1	(u	1	0	5/04/2	2018		

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT Pulsuantito NJAC 8:60 and 12:120)	
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Date of Notification (1) 5/10/2018	- 8					g Owner/0		(2)			ar t	MAY	1	1-2	2018
Agencies Notified	Type Notification			Street A	Address Wayne						į Š		ŪÐ (TRO
EPA DEP DOL	Initial Amended Amendmen	t #		City, Sta	ate, Zip (144			I,	ULTY A TENE	1 	e s	SW	ž —
ĭ DOH	Emergency justification)	(including	,		of Contac		144			Te	lephone N	umber			
DCA	Cancellation					uson 26		111			7-414-4				
Name of Facility Where	Abatement is Takir	ng Place (3)	FAC	ILITY IN	FORMATI	ION	Туре	of Facility	(4)					
Mastery Charter So Street Address 800 Erie Street	chool - Pyne Po	int Cam	ipus					Ħ	School (K- Subchapter Other (i.e. petc.)	8 (Oth	er than K- & commer	12) cial bui	ldings	, hom	ies,
City (5) Camden									are Feet	36752300	f Floors chen		3ldg. /		
County (6) Camden				County (STATE	Code (7) USE ONL	Y)		Curre	ent Use (Pri ool	or if bei	ng demoli	shed)			
Name of Monitoring Firm FINOG Environmen		Owner (8))	ASCN	M No.				atement Cor d Special			1			
Street Address 617 Stokes Road S	uite 4-318						Street 98 La		ss Ave						
City, State, Zip Code Medford, NJ 08055							60.00		ip Code , PA 193	42	Winds				
Project Manager for Mor Mark Rubnitz	itoring Firm			Telepho 888-7	ne No. 15-221	1	Teleph 610-				License 1103	No.			
Start Date (10) 5/21/2018		6/21/2	018	mpletion	Date (11)	Name Crite		HA Monitor _abs	3	A STATE OF THE STA				
Occupancy Status Durin Facility Closed/Vac Abatement Perform	ated During Entire	Period of	Abaten	nent s				Prog	ss gress Dr lip Code						
Other – Describe: Scope of Work (Check A							Bens	alem	, PA 190	20					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	іі тпас Арріу)		Renova Demolit				×	Mir	II Containmeni-Enclosure ovebag Prod n-Exempted	edure	217.0015 144-045			'e	
		Is	Locat	ion						. (/ ===			Abate	emen	t
Locatior Asbestos-Containing <u>TO BE AB</u> In Facil (13)	Material (ACM) ATED	Use Ma	Normal ed Sole intena todial S (12)	ely by nce/		stos Cont e. thermal surfac		laterial insula T, or		(8	mount Specify or LF)	Remova	Repair	e Encapsulate	Enclosure
Kitche	an.	Yes	No X	N/A		Dino	Inquia	tion		- 1	e i E			ate	0
Ritche			^			Pipe	Insula	tion		1	6 LF	X			
Name of Registered Was	ite Hauler		1372.5	IJDEP W		Cubic			Name of	Registe	red Landf	11			
Mercer Group Intern	H	lauler ID	No.	of Was			Tulleyto		esource	Reco	very	Faci	ility		
City, State 519 Rev S Howard	Woodson Jr W		nton,	NJ 086	38	As red	1		City, State Tulleyto		Α				
Completed by John Lynch		Title	- 1 0 0	anager		S	ignature	7	1		0	ate	2018		

CK 50	32	_/	NO		CAZÎO Pjyrey	N OF A	New Jersey SBESTOS AB AC 8 60 and 5	ATEMENT :16)		C E		W	E
Date of Notification (1)					Nai	ne of Build	ing Owner/Operato	or (2)	MI MI	4Y 1	1-	2018	_
	09 /	1	88		0	lem Map	р	/ Job #1805-23	06 Chk. #5	032			
Agencies Notified	Type Notif	fication	1		Stre	et Addres	3		ASSE	11 ()	1.73	.20	1 9
□ EPA											SIN	3	(m 62)
☑ DOLWD ☑ DHSS	Amend				City	, State, Zip	Code		The state of the s	2006-Stronge	an other		75.5
□ DCA	Amend			_		wing, NJ							
(NJAC 5:23-8)	☐ Emerge justifica	ericy (i	nciuai	ng		ne of Conta			T				
	☐ Cancel					lem Map			Telephone Nu	mber			
		100000000000000000000000000000000000000		_			NFORMATION		1				
Name of Facility Where Al	patement is	s Takir	ng Plac	e (3)		ACILITY	NFORMATION	T (5 m)					
Residential			.9	<i>(</i> 0 <i>)</i>				Type of Facility					
Street Address								School (K-12	t) 3 (Other than K-1	2)			
								Other (i.e., p.	rivate and comm	ercial b	uildin	ıgs,	
City (5)			-					homes, etc.)					
Ewing, NJ								Square Feet	# of Floors	В	ldg. A		
County (6)					00	Inty Cod	(7)/OTATE USE SALE	1476	3		196	0	
Mercer					00	inty Code	(7)(STATE USE ONLY		or if being demo	lished)			
Name of Monitoring Firm H	lired by Ru	ildina	Ownor	(0)	ACC	4.51-	1	Residential					
Horizon Environmen	ifal	liding	Owner	(0)	ASC	/I No.		nent Contractor (9)					
Street Address								nd Mold Service	s, Corp.				
P.O. Box 316							Street Address		1 44				
City, State, Zip Code							3859 Sylon						
Thorofare, NJ							City, State, Zip (
Project Manager for Monito	ring Firm			-			Hainesport,	NJ 08036					
Steve Flanigan	ning riim			0.000	lephone		Telephone No.		License No.				
Start Date (10)		Cala				8-0800	609-702-040		00862				
5 / 18 /	18					ate (11)	Name of OSHA	CONTRACTOR AND					
		_			<u> </u>	18	EMSL Analy	tical, Inc.					
Occupancy Status During A	Abatement	(Checl	k only	one)			Street Address						
	During Ent	tire Pe	riod of	Abate	ement		200 U.S. Rot	ute 130 North					
Time of Abatement:	AM-		racilit /I/	y Hou PN	ırs - De I-	scribe AM	City, State, Zip C	ode					
				' .,		_AIVI	Cinnaminso	n, NJ 08077					
cope of Work (Check all the	nat apply)						57						
≥3 sf or ≥3 lf≥160 sf or ≥260 lf			⊠ Re □ De	enova emolit			☐ Mini-En	g Procedure					
			Is	Loca	tion		⊠ Non-Exe	empted (*) and Non	-Friable Procedu				
Location of			1	Vorma	ally		Description	of		Ab	_	ent T	ype
Asbestos-Containing Ma TO BE ABATE	terial (ACN	Л)	Use	d Sol	ely by	Asbe	stos Containing Ma	aterial (ACM)	Amount	Rer	Repair	E	En
IN Facility			Cus	todial	Staff?	(1.6	., thermal systems surfacing, VAT		(Specify	Removal	pair	caps	Enclosure
(13)				(12)	_	1	other miscellane		SF or LF)	<u>a</u>		Encapsulate	ure
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rst Floor Area/Bathro	om & Der	n			\boxtimes	Floor T	ile		230 SF	\boxtimes	П		Г
										10			
			$\overline{\Box}$									Ш	Ш
me of Registered Waste I	Hauler		Ч	1000	1000	Mante	O.F. V						
	.44.01			1830	IJDEP I lauler II		Cubic Yards of Waste	Name of Registe					
Waste Management					1727		5	Atlantic Cou	inty ACUA				
							Disposal Date	City, State			_		
ty, State								Oity, Otato					
Waste Management ty, State Lafayette, NJ							5/23/18	Egg Harbor	Twp., NJ				
ty, State)	Title			linato				, Da	ite			



Check # 25589

Date of Notification (1) 5/10	/2018			Name o	of Building (Owner/	50	(2) Kopcsi	k		E	G		V	E
Agencies Notified	Type Notification			Street A	Address			rtopooi		1100/				9	1.2.2001000
□ EPA	× Initial										M	AY	1 1	201	9
DEP × DOL	Amended Amendment		_	City, Sta	ate, Zip Coo	de	Trento	on, NJ	08638		m	AI	1 1	ZUII	3
ĭ DOH	Emergency (justification)	(including		Name o	of Contact					Telepha	na Ni.	mh/2"	25.50	A 1 1 1226	n L
☐ DCA	Cancellation				Mrs. K					1					· 22335-
Name of Facility Where	Abatement is Takin	n Place (3	8)	FAC	ILITY INFO	RMAT	ION	Tuna	f Capility /4	,				-	
and of rading vinore,	Residential	g i lace (c	,,					_	f Facility (4 chool (K-12	***					
Street Address								St X Of	ubchapter 8 ther (i.e. pri	(Other tha	an K-12 nmerci	2) al buil	dings,	home	es,
City (5)	nton, NJ 08638							Square 22		# of Floo	ors		81dg. A		
County (6)					Code (7)			- 5757	t Use (Prior	050	emolish		0U+/	_	
Name of Monitoring Firm		Owner (8)		ASCN			Nama	of Aboto	mant Cant	t (O)					
MEC		owner (o)		ASCI	vi NO.	(1			ment Conti vironmer		ces,	Inc.			
Street Address PO B	341						100000000000000000000000000000000000000	Address 30x 322							
City, State, Zip Code Chest	erfield, NJ 0851	15						tate, Zip town, N	Code NJ 08501						
Project Manager for Mon Bill Weisgar				Telepho	ne No. 98-4070		Teleph	one No. 259-968	-		ense N	0.			
Start Date (10) 5/21/2018		Schedule			Date (11)		Name	of OSHA	Monitor		-50			1.51.45,950	
Occupancy Status During	Abatement (Chec	k Only On		0/29/20	10		MEC	Address							
➤ Facility Closed/Vaca			120	mont			57555555555	ox 341							
Abatement Perform Other – Describe:	ed Outside of Norm	al Facility	Hour	S		_		tate, Zip sterfield	Code I, NJ 085	15					
Scope of Work (Check Al	I That Apply)														\dashv
≥3 sf or ≥3 if ≥160 sf or ≥260 if			enova	3 (4 (4) 3 (4) 4 (4)			×	Mini-l Glove	Containmen Enclosure ebag Proce Exempted (dure				21	
		Is	Locat	ion				1 14011-1	Lxempled) and Noi	I-FIIAD			ement	
Location		N	lorma	lly		De	scription	of				_	Ту	ре	
Asbestos-Containing TO BE ABA In Facili (13)	TED	Mai Cust	(12)	nce/ Staff?	(i.e. ti	hermal surfa	taining M systems cing, VA niscellan	insulation		Amoun (Specif SF or LI	у	Removal	Repair	Encapsulate	Enclosure
Baseme	ant	Yes	No X	N/A	Tha	rmal	Dina I-	ouleti-	_	460	£	ļ.,		Ф	
Attic Ev	toonie		X				Pipe In Pipe In			120 1	Т	X			
Auto Et					1116	iiiidl	ripe in	Suidlio		6 If		Х			\dashv
Name of Registered Was	te Hauler		l N	JDEP W	/aste	Cubic	Yards	11	Name of Re	egistered I	andfill				
Stevens Environmen			1000	lauler ID 18292	No.	of Wa			Fairless I	70	willi				
City, State Allentown, NJ							sal Date 29/2018		City, State Morrisvill	e,/PA					
Completed by Mahlon E. Stevens		Title Projec	ct Ma	anager		8	Signature	M	-()	/	Da	te 5/10/	/18		

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10 CK		NOTIF (F	ICATIO	tate of Ne N OF ASE t to NJAC	BESTOS	ABATE	MEN 0)	IT		E	C I			7 [
Date of Notification (1) 05/09/2018			Name o	of Building	Owner/C	perato	r (2)			M	AY	1 1	201	8	-
Agencies Notified Type Notification EPA Initial	on			Address ark Place	9					asec:		100	7. Ta	CI 8	-
DEP X Amended Amended Amendme		_		ate, Zip C rk, NJ 0				ı	To the second second	temanna)		n 18010 n 18010 estembo	3	7777.77.77	And the sufficient
□ DOH				of Contact Milarcz					7.1	elephone					
			FAC	ILITY INF	ORMATI	ON	_								
Name of Facility Where Abatement is Tak PSE&G Bayway Substation	ring Place (3	3)					Тур	e of Facility School (K	500 M						
Street Address 400 Clifton Street							×	Subchapte Other (i.e.	er 8 (Oth	ner thar & comr	n K-12 mercia) al buil	dings,	, hom	es,
City (5) Elizabeth							900	uare Feet	1	of Floors	S		Bldg. A	\ge	
County (6) Union			County (STATE	Code (7) USE ONLY	n	_		rent Use (P Pump Ho		eing den	nolish	ed)			
Name of Monitoring Firm Hired by Building Bureau Veritas	g Owner (8)		ASC	M No.		Name Bran	of Al	patement Co burg Indu	ontracto estrial S	r (9) Service	e Co	mpa	ıny	wealin)	
Street Address 110 Fieldcrest Avenue - Raritan F	Plaza I			14		Street 2217		ess illman Dri	ve				7.5%		
City, State, Zip Code Edison, NJ 08837								Zip Code m, PA 18	015						
Project Manager for Monitoring Firm JB Chadwick			Telepho 732-22	ne No. 25-6040		Teleph 610-		No. -1800		Licen 0072	ise No 21),			
Start Date (10) 05/07/2018	Schedule 05/18/2		npletion	Date (11)		Name Bran		SHA Monito burg	r						
Occupancy Status During Abatement (Che	eck Only On	ie)				Street						-			
Facility Closed/Vacated During Entire Abatement Performed Outside of No Other – Describe:	e Period of A	Abaten	nent		-	City, S	tate,	Ilman Driv Zip Code					C Nay s		
					_	Beth	lehe	m PA 180	015						
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		lenova emolit				Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure					e				
Location of	N	Locati	ly		Des	cription	08						Abate	emen	t
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Asbestos-Containing Material (ACM) TO BE ABATED In Facility Used Main Custo							al (ACM) llation,	(5	mount Specify F or LF)		Remova	Repair	Encapsulate	Enclosure
Roof of Oil Pump House	Yes Yes						•			00				ate	ře
•		X			Flash				20 LF		X				
Roof of Oil Pump House		X	E	xpansio	n Join	t Ca	ıulk	5	0 LF		X				
Name of Registered Waste Hauler		N	JDEP W	/aste	Cubic Y	'ards		Name of	Registe	ered Lar	ndfill				
VM of New Jersey	H	auler ID 7273		of Wast	e		WM Fa				fill				
City, State Sethlehem, PA					Disposa 05/07/		/18/	City, Sta		A 190	67				
Completed by Stephen Carne	Title Enviro						Signature Date 05/09/2018					2018			