1305-4641 Check #5254

Date of Notification				Nam	e of	Building	Owner / Operatoversity	or (2) 29	3 MAY 1	5	127			
Agencies Notified		ation		Stree	ot Ac	ddress	versity	76		√ AH 2:	ôn:			
⊠ EPA	1 ype rionno	ation					nge Ave.	4.3	777	KSING	C			
☐ DEP	## State Scheduled					te & Zip			& Time		004.			
□ DOL		nded#					NJ 07079		יי גוננ	Malka	₹ <i>1</i> ,			
□ DOH	☐ Eme	rgency		Nam	e of	Contact					Telepho	ne N	lumb	er
☐ DCA	☐ Cano	ellation		Leo	n Va	andeme	eleubroeke	Ħ		l.	~ `			
				FΔ	CII	ITY INI	FORMATION						~	
Name of Facility Wh	nere Abateme	ent is Taking F	lace (1012		Type of Faci	lity (4)						
				-/			School							
Street Address							Subcha	pter 8 (Oth	er than K-	12)				
400 South Orang	e Ave.						Other (i.	e. private 8	& commer	cial buildin	gs, hon	ies, e	etc.)	
							Square Feet	# 0	f Floors	E	Bldg. Ag	е		
City (5)		County (6)	Co	ounty	Coc	de (7)	10,00	0	2			90		
South Orange		150,700		- 3			Current Use		ing demol	ished)				
3							University							
Name of Monitoring	ncies Notified EPA DEP DOL DOL DOH)	A	ASCM No		atement Co	ntractor (9	9)				
	e of Monitoring Firm Hired by Building Orga Environmental t Address Huyler Street State & Zip Code th Hackensack, NJ 07606 ct Manager for Monitoring Firm er Fajardo duled Start Date (10) 5/24/13 pancy Status During Abatement (Check Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Describe: 5 PM Start Facility Occupied During Abatement						AbateTech			0529				
Street Address	Environmental Idress Ider Street e & Zip Code Iackensack, NJ 07606 Idanager for Monitoring Firm Fajardo Ed Start Date (10) Scheduled C				_		Street Addre	ss						
280 Huyler Street	DEP DOL						PO Box 25							
	## State Start Date (10) Scheduled Start Date (10) Start Date (10) Scheduled						City, State &							
							Lumberton		8					
	Monitoring F	irm				umber	Telephone N			License N				
			_	489-			609-265-21				0052	29		
l .	10,000 7000	Scheduled Co	7.1	on Da 5/13	ate ((11)	Name of OS EMSL Anal							
							Street Addre	ss						
Facility Clos	Type Notification EPA DEP DEP DOL				ater	ment	108 Haddo	n Ave.				v casoure		
	Type Notification EPA DEP DEP DOL						City, State &	Zip Code						
Describe:	of Facility Where Abatement is Taking Hall University- McQuaid Hall Address outh Orange Ave. County (6) Essex of Monitoring Firm Hired by Building Oga Environmental Address uyler Street tate & Zip Code Hackensack, NJ 07606 Manager for Monitoring Firm Fajardo uled Start Date (10) 5/24/13 ancy Status During Abatement (Check Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Describe: 5 PM Start Facility Occupied During Abatement of Work (Check all that apply) ≥3 sf or ≥3 If ≥160 sf ≥260 If Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13) ay in Basement ay in Basement						Westmont,	NJ 08108	3					
	Hackensack, NJ 07606 Manager for Monitoring Firm Fajardo led Start Date (10) Scheduled Co. 5/24/13 ncy Status During Abatement (Check Facility Closed/Vacated During Entire Abatement Performed Outside of Norn Describe: 5 PM Start Facility Occupied During Abatement of Work (Check all that apply)													
Scope of Work (Che	eck all that ap	ply)								8 80 80				
	ser Fajardo eduled Start Date (10) 5/24/13 upancy Status During Abatement (Check Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Describe: 5 PM Start Facility Occupied During Abatement De of Work (Check all that apply)							200000		nent with N	egative	Pres	ssure	,
	me of Monitoring Firm Hired by Building Conega Environmental eet Address D Huyler Street y, State & Zip Code uth Hackensack, NJ 07606 Digect Manager for Monitoring Firm iser Fajardo Deduled Start Date (10) S/24/13 Cupancy Status During Abatement (Check Facility Closed/Vacated During Entiry Abatement Performed Outside of No Describe: 5 PM Start Facility Occupied During Abatement Dipe of Work (Check all that apply) ≥3 sf or ≥3 If ≥160 sf ≥260 If Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13) Ilway in Basement Ilway in Basement					ation			i-Enclosu	8000				
≥160 sf ≥260	bject Manager for Monitoring Firm biser Fajardo heduled Start Date (10) 5/24/13 Cupancy Status During Abatement (Check Facility Closed/Vacated During Entire Abatement Performed Outside of No Describe: 5 PM Start Facility Occupied During Abatement Ope of Work (Check all that apply) ≥3 sf or ≥3 If ≥160 sf ≥260 If				moli	ition			ve Bag Pr			D		
	ostion of		l lo	Loop	tion		Dogarintia			ed and Non				
		n		Locat nally			Descriptio Asbestos-Cor			Amount (Specify	ADa	atem	3111	ype
		9		olely		, ,	Material (A			SF or LF)			Ш	
TO E	SE ABATED		Mair	itenar	nce		(i.e., thermal s	systems		VE BEFERRER SO	Remova	Re	Encapsulate	Enclosure
ir			Cust	odial	Staf	ff?	insulation, surfa-				Von	Repair	nsc	OSL
	ect Manager for Monitoring Firm Ser Fajardo Iduled Start Date (10) 5/24/13 Ipancy Status During Abatement (Che Facility Closed/Vacated During En Abatement Performed Outside of I Describe: 5 PM Start Facility Occupied During Abateme e of Work (Check all that apply) ≥3 sf or ≥3 If ≥160 sf ≥260 If Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility		Yes	(12) No	TNI	/A	or other miscel	laneous)			<u>n</u>	3	ate	6
Hallows in Danse			103	140			Davible Leves I	Tiona Tile		40 CF				-
			님	H			Double Layer F			40 SF		H	H	H
Martin and the second s			H	H			Single Layer F		-	160 SF 200 SF		H	H	H
Hallway in Basen	ient		H	H	12	- 	Mastic			200 SF		H	H	H
			H	님	+ ⊨	╡┼┈┈					H	H	H	H
			H	H	+⊨	╡┤					$\dashv \vdash \vdash$	井	H	H
Name of Degistered	Masta Haula	or.			IDE	<u>」</u> P Waste	Cubic Yards	Name of	Registere	d Landfill				
Marile of Negistered	vvaste i laute	31		100000		r ID No.	of Waste	Ivalle of	rvegistere	a Lanuilli				
AbateTech, Inc.	of Facility Where Abatement is Taking Hall University- McQuaid Hall Address outh Orange Ave. County (6) Essex of Monitoring Firm Hired by Building Cola Environmental Address uyler Street tate & Zip Code Hackensack, NJ 07606 Manager for Monitoring Firm r Fajardo Uled Start Date (10) Scheduled Colled Start Date (10) Scheduled C					3750	12	TRRF La	andfill					
City, State						V-100-110-110-110-110-110-110-110-110-11	Disposal Date	City, Stat						
Lumberton, NJ							5/26/13	Tullytov						
	or Type)			Tit	tle		Signature	1			Date			
	1.059.50 0.5				ffic	e		1	-		5/10	/13		
					oor			MUI			J J			

No chel

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

1304-4631 Check #

Date of Notification	(1)			Mama	of D.	ldina (2	(0)	45/3	11 5 11					
Date of Notification	5/10/13						Owner / Operat	tor (2)	1 773	THE	15 AM	~			
Agencies Notified	Type Notific	ation			Addre		inications				15 AM	250			
⊠ EPA	Type reduie	ation			reen		Δνο			-370	**	_			
DEP	☐ Initia	I			State &		The second secon		— €€	LIC	OCCUPACION OCCUPACION DE LA COMPACION DE LA CO		-		Vie .
⊠ DOL	20000000	nded #1				7.0	19046			. 01	-Mallig	•			
☑ DOH		rgency			of Cor		13040			-			ono l	Juml	hor
DCA		cellation			Baylo						ı	Teleph (one i	vumi	ber
													-	1	
Name of Equility VVI	a a za A h a ta un		21		CILITY	INF	ORMATION								
Name of Facility Will Verizon	nere Abatem	ent is Taking F	Place (3)			Type of Fac								
Street Address	·					-	School								
95 William Street									(Other th						
95 William Street	li.										ial buildin			etc.)	
City (E)		10 . (0)	- 10-				Square Feet	t	# of Flo	ors	E	Bldg. Ag	jе		
City (5)		County (6)	Co	unty C	ode (7	()								2227	
Newark		Essex					Current Use	(Prior	if being o	demolis	shed)				
							Offices								
Name of Monitoring		y Building Ow	ner (8)		ASCI	M No.	Name of Aba			ctor (9))				
USA Environmen	ital						AbateTech	,							
Street Address							Street Addre								
8436 Enterprise A							PO Box 25								emechas
City, State & Zip Co Philadelphia, PA							City, State &								
Project Manager for		irm	Tolon	bana	NI		Lumbertor								
Mark Jenkins	wormorning r	11111		none 8 65-58	Numbe	er	Telephone N 609-265-21		r		License N				
Scheduled Start Dat	e (10)	Scheduled Co			_	-	Name of OS	Control of the Contro	:4			0052	29		a power.
5/2/13	(10)	ocheduled Co	<i>5</i> /31		a (1)		EMSL Anal								
Occupancy Status D	uring Abater	nent (Check ø			-		Street Addre								
		During Entire F			tem e n	t	108 Haddo		a.						
Abatement F	Performed Ou	itside of Norm	al Hou	ırs	/		City, State &			-				1000	
Describe:		(/			Westmont,								
Facility Occu	pied During	Abatement	_				, recuire,		0100						
Scope of Work (Che	ck all that ap	ply)							17.000	*****					-
									Full Cor	ntainme	ent with N	egative	Pres	ssure)
≥3 sf or ≥3 lf			\boxtimes	Rend	ovation			\boxtimes	Mini-End	closure	9				
≥160 sf ≥260) If			Dem	olition			\boxtimes	Glove B	ag Pro	cedures				
			,						Non-Exe	empted	and Non	-Friable	Pro	cedu	ire
	cation of			ocatio			Description				mount	Aba	atem	ent T	ype
	os-Containing rial (ACM))		ally U			Asbestos-Con Material (A		3		Specify	71			
	E ABATED			olely by enanc			(i.e., thermal s		s	Si	or LF)	em	-	Enc	四四
	Facility			dial St			sulation, surface	cing, V	'AT			Removal	Repair	aps	응
	(13)			(12)			or other miscell	aneou	s)			-	air	Encapsulate	Enclosure
			Yes	No	N/A									ਰ	
2 nd Floor – AC Ro	om		\boxtimes			780	Floor tile & I	Vlasti	С	3	80 SF		П	П	П
2 nd Floor – AC Ro	om		\boxtimes		П		Pipe Insula				IO LF		Ħ	Ħ	H
			П	Πİ									H	Ħ	H
				ΠT	ΠT							一片	H	Ħ	H
				ΠI	ΠT			******				一片	H	H	H
			Ħ	ĦŦ	Ħ							ㅐ	H	H	H
Name of Registered	Waste Haule	r		NJD	EP Wa	aste C	Cubic Yards	Nam	e of Regis	stered	Landfill				Ч_
				37.575	ler ID I	200	f Waste				Larrann				
AbateTech, Inc					18750		2	TRR	F Landf	ill					
City, State				-		D	isposal Date	City,	State	,		"			
Lumberton, NJ				-			5/31/13		ytown, Æ	PΑ					
Completed By (Print of	or Type)			Title			ignature	·	IN			Date			
Gwen Trumbetti				Opp	s. Coo		(/	\mathcal{M}	/V()			5/10/	13		
								$\overline{}$	× × ×				<u> </u>		

Date of Notification (1)			Name	e of Buildin	g Owner/Operator	(2)		· · · · · · · · · · · · · · · · · · ·	42	चुर	
5 / 9 /	13		DP	MC	1	Job # 1304246	344 Check #5	253			
Agencies Notified Type Notif	cation			t Address		100	100	ÅH 2;	50		
☐ Initial			33	West Sta	te Street 9th Flo	or PO Box 034					
☑ DOLWD ☑ Amend	ed ment # <u>1</u>		City,	State, Zip	Code	(& LICENS!		\.		
1 	nent #1 ency (includir	na	Tre	enton, NJ	08625			NG	1.		
(NJAC 5:23-8) justifica		.9	Name	e of Contac	rt .		Telephone No	umber		334100	
☐ Cancel	ation		Ge	orgette E	Bunch						- 157
			FA	CILITY II	FORMATION						
Name of Facility Where Abatement is	Taking Place	e (3)				Type of Facility					
Hunterdon Developmental Co	enter- Cool	ing T	ower			School (K-12		-12)			
Street Address						Other (i.e., p			uilding	gs,	
40 Pittstown Rd.						homes, etc.)					
City (5)						Square Feet	# of Floors	В	ldg. A	.ge	
Clinton			and the same								
County (6)			Cou	nty Code (7)(STATE USE ONLY)	Current Use (Pr		olished)			
Hunterdon					T	Cooling To					
Name of Monitoring Firm Hired by Bu	ilding Owner	(8)	ASCM	No.	A common common and the	ent Contractor (9))				
TTI Environmental					AbateTech, I	nc.			_		
Street Address					Street Address	202 05					
1253 North Church Street						e. PO Box 25					
City, State, Zip Code					City, State, Zip C						
Moorestown, NJ 08057		1-			Lumberton,	NJ 08048	Trissessan				
Project Manager for Monitoring Firm		10	ephone		Telephone No.	7	License No. 00529				
Jim Guilardi	O-b-d-l-d		09-314		609-265-2107 Name of OSHA N		00529				
Start Date (10) 5	Scheduled 5		etion Da		EMSL Analyt	DC 79589 59*					
Occupancy Status During Abatement	(Check only	one)			Street Address	- WE			- # 6		
☐ Facility Closed/Vacated During Er	tire Period o	f Abate	ement		108 Haddon	Ave.					
☐ Abatement Performed Outside of					City, State, Zip C	ode		WVWV			
Time of Abatement:AM	PM/	PN	l	_AM	Westmont, N	J 08108					
Scope of Work (Check all that apply)					П	tainmant with Na	tiva Danasura				
≥3 sf or ≥3 lf	Пв	enova	tion		☐ Mini-End	tainment with Neg closure	gative Pressure				
☐ ≥160 sf or ≥260 lf		emolit				g Procedure	51 H D	na komune			
			e!		. 🗵 Non-Exe	empted (*) and No	n-Friable Proce			T	
Location of		s Loca Norma			Description of	sf.		10000	oatem	T	1
Asbestos-Containing Material (AC			lely by		stos Containing Ma	aterial (ACM)	Amount	Removal	Repair	Encapsulate	Enclosure
TO BE ABATED		ainten stodial	ance/ Staff?	(i.e	e., thermal systems surfacing, VAT		(Specify SF or LF)	SVOI	a-	apsu	uso
IN Facility (13)		(12			other miscellane		01 01 21)	=		liate	Гe
	Yes	No	N/A								
Cooling Tower		ļD.	40-	Transit	e	table of a community of the property of the second	2,160 SF				
Chiller Room				Pipe Fi	ttings		12 SF			D	
							- Change - Constant - Constant	\Box			
		П	\Box								
Name of Registered Waste Hauler			NJDEP'	Waste	Cubic Yards of	Name of Regis	stered Landfill		1		
AbateTech, Inc.		1.00	Hauler II	D No.	Waste 6	T.R.R.F La					
City, State					Disposal Date	City, State					
Lumberton, NJ					5/21/13	Tullytown,	PA				
Completed By (Print or Type)	Title		-		Signature	Ł	1	Date	10	1	
Gwendolyn Trumbetti	Opera	tions	Coord	inator	()	nit		5	19	11:	5

ASB-41 MAY 11

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

1305-4642 Check #5255

Date of Notification							Owner / Operato	r (2)	**************************************	2013 MAY	ir		- 6 ₀₀	
A NI-4:6		-41	and the second		Add		ersity				LO A	4 -		
	Type Notifica	ation					ago Avo		3.5	48 m.		" " <	ં ઈંદ)
	☑ Initia	ri-					ige Ave.			6. 1	J. 7 . 4			
						& Zip (& LICE	1.	17	生工家	
	(1-1)						NJ 07079			17	elepho	E N	(- <u>/ ,</u>	
						ontact	# 1000 OF 1000 OF 1000 OF			111	elepho	ne iv	umb	er
□ DCA	☐ Cano	ellation					leubroeke					_		
					CILIT	TY INF	ORMATION							
			lace (3	3)			Type of Facili							
Seton Hall Unive	rsity- Corri	gan Hall					School (The second second						
Street Address									Other than K-1	105 22				
400 South Orang	e Ave.						Other (i.e	e. priva	ite & commerc				tc.)	
_							Square Feet		# of Floors	Ble	dg. Ag	е		
City (5)		County (6)	Co	unty (Code	(7)	10,000)	2			90		
South Orange		Essex					Current Use	(Prior if	being demoli	shed)	28011 7.00			
							University							
Name of Monitoring	Address South Orange Ave. County (6) Essex of Monitoring Firm Hired by Building Coga Environmental Address Huyler Street State & Zip Code h Hackensack, NJ 07606 at Manager for Monitoring Firm er Fajardo duled Start Date (10) 5/24/13 Dancy Status During Abatement (Check Facility Closed/Vacated During Entire Abatement Performed Outside of No Describe: 5 PM Start Facility Occupied During Abatement				AS	CM No		tement	Contractor (9))				
	e of Monitoring Firm Hired by Building Coga Environmental Address Huyler Street State & Zip Code h Hackensack, NJ 07606 et Manager for Monitoring Firm er Fajardo duled Start Date (10) 5/24/13 pancy Status During Abatement (Checker Facility Closed/Vacated During Entire						AbateTech,			529				
Street Address	of Facility Where Abatement is Taking Hall University- Corrigan Hall Address South Orange Ave. County (6) Fessex of Monitoring Firm Hired by Building Coga Environmental Address Suyler Street State & Zip Code Hackensack, NJ 07606 Et Manager for Monitoring Firm Fajardo Sulled Start Date (10) Scheduled Coga Environmental Scheduled Coga Environmental Address State & Zip Code Hackensack, NJ 07606 Et Manager for Monitoring Firm Fajardo Sulled Start Date (10) Scheduled Coga Environment (Checker Facility Closed/Vacated During Entire Abatement Performed Outside of No Describe: 5 PM Start Facility Occupied During Abatement						Street Addres	SS						
	South Orange Ave. County (6)				300		PO Box 25	7:- 0-	4.					
							City, State &							
			Telep	h - n -	Nicon	hor	Lumberton Telephone N		0040	License Nu	mbor			
	ivionitoring F	·irm	201-			ibei	609-265-210			License ivi	0052	9		
	te (10)	Scheduled Cor	_			1)	Name of OSH		nitor					_
	0.2 0.2	oonoaanoa oon	5/26			7	EMSL Anal		0.000					
					72		Street Addres							
					ateme	ent	108 Haddor							
		utside of Norm	al Hou	ırs			City, State &	3.5						
	DEP						Westmont,	NJ 08	108					
	of Monitoring Firm Hired by Building Opa Environmental Address uyler Street tate & Zip Code Hackensack, NJ 07606 t Manager for Monitoring Firm Fajardo uled Start Date (10) 5/24/13 ancy Status During Abatement (Check Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Describe: 5 PM Start Facility Occupied During Abatement of Work (Check all that apply) ≥3 sf or ≥3 If ≥160 sf ≥260 If Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13)					- 5								
Scope of Work (Che	eck all that ap	oply)						\square	Full Containm	ent with Ne	native	Dres	cure	4
N . 2 . 5 2 . 1	·			Dan					Mini-Enclosur		gative	1 100	Suic	**
l Kara			\bowtie		ovati				Glove Bag Pr					
≥160 st ≥260	O If			Den	nolitic	on					e de la la	D		
	ne of Monitoring Firm Hired by Building of the Ega Environmental set Address Huyler Street The State & Zip Code ath Hackensack, NJ 07606 The Est Manager for Monitoring Firm ser Fajardo The Eduled Start Date (10) The State S					1			Non-Exempte			-		-
	ega Environmental et Address Huyler Street State & Zip Code ath Hackensack, NJ 07606 ect Manager for Monitoring Firm ser Fajardo eduled Start Date (10) 5/24/13 upancy Status During Abatement (Chec Facility Closed/Vacated During Enti Abatement Performed Outside of N Describe: 5 PM Start Facility Occupied During Abatement pe of Work (Check all that apply) ≥3 sf or ≥3 If ≥160 sf ≥260 If Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13)				ion		Description		E 1	Amount (Specify	Aba	teme	ent i	ype
		g		nally l			Asbestos-Con Material (A			SF or LF)			ш	
			Main				(i.e., thermal s			or Er)	₽ Re	Z	nca	En
			Custo				insulation, surface				Remova	Repair	Sde	os
				(12)			or other miscell				∑ <u>a</u>	Ħ.	Encapsulate	Enclosure
	3 -7		Yes	No	N/A	1			70				æ	
Lower Level			П	\boxtimes	П	1	Spray on de	ebris		80 SF				
			Ħ	Ħ	Ħ	1					In	П	П	П
			Ħ	Ħ	H	1						Ī	Ħ	
			Ħ	Ħ	Ħ							\sqcap	Ħ	
			H	H	H	+					TĦ	Ħ	Ħ	Ħ
	con Hall University- Corrigan Hall et Address South Orange Ave. (5) th Orange e of Monitoring Firm Hired by Building ega Environmental et Address Huyler Street State & Zip Code th Hackensack, NJ 07606 et Manager for Monitoring Firm ser Fajardo duled Start Date (10) 5/24/13 spancy Status During Abatement (Che Facility Closed/Vacated During Ent Abatement Performed Outside of N Describe: 5 PM Start Facility Occupied During Abatemer e of Work (Check all that apply) ≥3 sf or ≥3 If ≥160 sf ≥260 If Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13) er Level e of Registered Waste Hauler teTech, Inc. State sherton, NJ pleted By (Print or Type)		H	H	H	-					IH	Ħ	Ħ	Ħ
Name of Registered	Waste Haul	er		N.I	DFP	Waste	Cubic Yards	Name	e of Registere	d Landfill		ш	ш	
	raoto riaul	<u>.</u>				D No.	of Waste							
AbateTech, Inc.					187	50	8	TRR	F Landfill					
City, State				-	-		Disposal Date	City,					100	
Lumberton, NJ							5/26/13	Tully	rtown, PA					
Completed By (Print	t or Type)			Tit			Signature).	/		Date			
Gwen Trumbe	tti			01	ffice	0.0		AA			5/10	/12		
				Co	oord		XI	001						

Check #5006

1302-4609

		7.7.7				STOS ABAT		14.	eck #50	06			
40 hoch	Purs	sua	ant 1	to <u>N.</u>	J.A.	C. 8:60 and <i>'</i>	12:120)		y Gi				
Date of Notification (1) 5/10/13		l F	Name Princ	of Bui	lding (C. 8:60 and	(2)AY	5 _{6M} .	1-60				
Agencies Notified Type Notification		5	Street	Addre	SS	4.00	f	-44 5	· ên	1120 / 641 (540)		017111-12	
Ď EPA		1	Trust	tees o	f Prir	nceton Univers ode 8544	ity E.A.	MacMilla	n Bldg.				
DEP Initial			City, S	State &	Zip C	ode	- LICEN	and the	r T				
DOL				eton,		8544		-1116	, 	elepho	no N	lum	her
☑ DOH ☐ Emergency ☑ DCA ☐ Cancellation		1113		rt Ort		P.E.			Į.	етерпо	ille i	varin	اعبر
				CILITY	/ INF	ORMATION							
Name of Facility Where Abatement is Taking Princeton University 87 Prospect St. 0				ildine	,	Type of Facili							
Street Address	COMP	Juic	יו טנ	manie	1		ter 8 (Othe	er than K-	12)				
87 Prospect Street									cial building	s, hom	ies,	etc.)	
or respect surse.						Square Feet	# o	f Floors	BI	dg. Ag	е		
City (5) County (6)		Co	unty (Code (7)	30,000		4			504	-	
Princeton Merce	er					Current Use (Prior if be	ing demoli	shed)				
						Building						000000000000000000000000000000000000000	
Name of Monitoring Firm Hired by Building (Pennoni Associates, Inc.	Owner	(8)		ASC 0010	M No.	Name of Abat AbateTech,		ntractor (9	9)				
Street Address		-		100		Street Addres							
515 Grove Street Suite 1B						PO Box 25							
City, State & Zip Code Haddon Heights, NJ 08035						City, State & Z Lumberton,		18					
Project Manager for Monitoring Firm				Numb		Telephone Nu			License No		21221		
Alan Lloyd			CONTRACTOR OF THE	0505 x	2875					0052	29		
Scheduled Start Date (10) Scheduled 3/22/13		letio /15		te (11)		Name of OSH EMSL Analy							
Occupancy Status During Abatement Chec Facility Closed/Vacated During Entir	k only e Peri	one	e) of Aba	atemer	nt	Street Addres							
Abatement Performed Outside of No						City, State & 2		**		0.000		1	
Describe:						Westmont,	NJ 08108	3					
Facility Occupied During Abatement													
Scope of Work (Check all that apply)							Ful	l Containn	nent with Ne	egative	Pre	ssur	e
\ \ \ ≥3 sf or ≥3 lf	r	X	Rer	novatio	n		KN	i-Enclosu		oguare		ooui	Ü
≥160 sf ≥260 lf	Ľ	7		nolition				ve Bag Pr					
Z 2100 01 =200 11	_	_					☐ No	n-Exempte	ed and Non-	-Friable	e Pro	ced	ure
Location of	T	ls l	Locat	ion		Description			Amount	Ab	atem	ent	Туре
Asbestos-Containing	V			Used		Asbestos-Con			(Specify				
Material (ACM) TO BE ABATED	l N		olely l	by nce or		Material (AC (i.e., thermal sy		,	SF or LF)	Re	R	inca	
in Facility	14 5.52	diam'r.		Staff?		insulation, surfac				Remova	Repair	Encapsulate	Enclosure
(13)			(12)	1		or other miscella	aneous)			<u>a</u>	=	late	i e
	Y	es	No	N/A						F.7		-	1
Throughout Basement	Ļ		Ц		Sp	ray-Applied Fi			1,250 SF		H	누	H는
Rooms G03,G23,G23C,Storage Rm adj to G23C,basement level stair landing, G22A, G22 Corrido & G38A	ors L	_	П			Floor tile & N	/lastic	3	,210 SF				
Rooms G15,G18A,G18B,G23A & G23B	7 [Mastic		1	,925 SF				
												L	
			Ц	Ш		10 1: V	101 -	D	J I JEII		Ш		
Name of Registered Waste Hauler			100000	auler ID	No.	Cubic Yards of Waste		Registere	d Landiiii				
AbateTech, Inc.				1875	0	12	TRRF L						
City, State Lumberton, NJ						Disposal Date 5/15/13	City, Stat						
Completed By (Print or Type)			Tit			Signature	/			Date			A CHILL
Gwen Trumbetti			Ot	ops. Co	oord.	501	W			5/10)/13	3	

CK * 25/69

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1)	13/13	10000		Name	of Buildin	g Owner/Operator K	(2) Cathleen D' H	eron 29/3 MAY	10		٠.,	
Agencies Notified	Type Notifica	ation	\dashv	Street	Address	2	06 Howard S	44	<i>1</i>	ĀĶ	2:3	
EPA DEP DOL	Initial Amended	ent #	_	City, S	State, Zip C	Code	Brunswick, N	€ 4/0°	(1) (1)			(
M DOH □ DCA	Emergen justificati	on)	1	Name	of Contac			Telephone Numb	er	r (;	•	
		-	1:	FAC	CILITY INF	ORMATION						
Name of Facility Where							Type of Facility					
-		Residenc	e				School (K-12	8 (Other than K-12))			
Street Address	206	Howard S	Stree	t			Other (i.e., p homes, etc.	rivate & commercia)	l build	dg. A		
City (5)	New Bru	nswick.	NJ 0	8901			Square Feet 1400	# of Floors		39. A	520	_
County (6)	ddlesex			Cour	nty Code (7 ONLY)	7) (STATE	Current Use (Pr	for if being demolis Residential	hed)			
Name of Monitoring Firm		ding Owner	_	ASCM	No.		nent Contractor (9					
(8)	MECS						vens Environi	nental Service	s, Ir	c.		
Street Address	PO Box	341	081000			Street Address	PO E	322 Sox 322				_
City, State, Zip Code	rosswicks,	NI 0851	 5			City, State, Zip C	Code Allentow	n, NJ 08501				
Project Manager for Mo		110 00011		phone	No.	Telephone No.		License No.				
William W		r	(60	9) 29	8-4070	(609) 25	59-9688	0	0493	3		_
Start Date (10) 5/23/13		Scheduled C	omple /24/		te (11)	Name of OSHA I		ECS				
Occupancy Status Durin	ng Abatement			1.5		Street Address						_
▼ Facility Closed/Vacat	ed During Enti	re Period of	Abate					341			-	
☐ Abatement Performe☐ Other - Describe: _{			y Hou	rs		City, State, Zip C		ks, NJ 08515				
Scope of Work (Check a ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	all that apply)		enovati emolitio			Mini-En	ag Procedure	gative Pressure on-Friable Procedur	e			
			_ocatio			****				bater Typ		
Location Asbestos-Containing I <u>TO BE ABA</u> IN Facilit	Material (ACM) TED	Used Mair Co	l Solely ntenan ustodia Staff?	y by ce/		Description of tos Containing Ma thermal systems i surfacing, VAT	terial (ACM) insulation, , or	Amount (Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure
(13)		Yes	(12) No	N/A		other miscellane	ous)		<u>0</u>		ulate	ıre
Baseme	ent			×		Pipe Insulat	ion	100 lf	×			
		_									_	
						Corbin Vanda	Name of Regi	etorod Landfill				
Name of Registered Wa Stevens Environ		vices Inc		JDEP V Jauler ID 182		Cubic Yards of Waste 2 CU	Name of Negi	T.R.R.F., In	ıc.			
City, State						Disposal Date	City, State	Tullytown, I	οΔ			
Completed By	Allentow	n, NJ				5/24/13 Signature/	4 *	Date	Λ			_
Mahlon E. Ste	evens	1000000	ojec	t Mar	nager	_///	_/		5/13	3/13		_

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

Noneck

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)

ame of Building Owner/Operator (2, JC Penney Company Incorporate 20/3 MAY 15 AM 2: 50 Name of Building Owner/Operator (2) Date of Notification (1) 14 / 13 5 Type Notification Street Address Agencies Notified **⊠** EPA ☐ Initial □ DOLWD City, State, Zip Code **⊠** DHSS Amendment #2 Plano, Texas 75024 ☐ Emergency (including ☑ DCA Name of Contact Telephone Number justification) (NJAC 5:23-8) ☐ Cancellation Soy Thomas FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) JC Penney Quaker Bridge Mall Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, 500 Quaker Bridge Mall homes, etc.) Square Feet # of Floors Bldg. Age City (5) 150,000 2 75 Trenton County Code (7)(STATE USE ONLY) | Current Use (Prior if being demolished) County (6) Mercer Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. 62252 JVN Restoration Inc Hillmann Consulting Street Address Street Address 47 Foster Road 1600 Route 22 East City, State, Zip Code City, State, Zip Code Staten Island NY 10309 Union NJ 07083 Telephone No. License No. Project Manager for Monitoring Firm Telephone No. 718-605-6256 00774 908-956-1233 Tom Rubino Scheduled Completion Date (11) Name of OSHA Monitor Start Date (10) 05 / 21 / 13 06 / 08 / 13 **Testor Tech** Occupancy Status During Abatement (Check only one) Street Address □ Facility Closed/Vacated During Entire Period of Abatement 10 59 Jackson Avenue Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: ____AM-___PM/10PM-6:30AM LIC NY 11101 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure Renovation ☐ >3 sf or >3 lf ≥160 sf or ≥260 lf □ Demolition Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Description of Location of Repair Removal Encapsulate Enclosure Used Solely by Asbestos Containing Material (ACM) Amount Asbestos-Containing Material (ACM) Maintenance/ (i.e., thermal systems insulation, (Specify TO BE ABATED Custodial Staff? surfacing, VAT, or SF or LF) IN Facility (12)other miscellaneous) (13)Yes No N/A П \boxtimes VAT/MASTIC 800 SF 1st Level Home Street Dept. \boxtimes \boxtimes П M П NJDEP Waste Cubic Yards of Name of Registered Landfill Name of Registered Waste Hauler Hauler ID No. Waste G.R.O.W.S., Inc. Global Waste Industries, Inc. 10 NJ-22147 City, State Disposal Date City, State Morrisville, PA 06/08/13 Hackettstown, NJ Date Completed By (Print or Type) Signature Senior Project Manager John Tardy

ASB-41 MAY 11

* Do not use this form for asbestos licensule exempted activities.

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

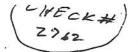
(Pursuant to NJAC 8:60-7 and 12:-120-7)

											(11)	
Date of Notification (1) 05/14/13					Building Owner University	Operato	r (2)				JA	Ay 15
Month/Day/Year	IT. N. CC.			-	•							
Agency Notified EPA	Type Notificat			Street Ad							4/1	C/10)
	x Init			P.O. box 2						_	1//	7
DEP	1000	tificat	State Inter		te, Zip Code							7/10/
DCA		ended			NJ 08543							
DOH	- 1 Light	tificat		Name of (Telephone	Numb	oer		
	Can	cellat	ion	Robert O	tego			<u></u>		_		
				FACILI	TY INFORMA	ΓΙΟΝ						
Name of Facility Where Ab: Princeton University Fo				c Lab			Subch	(K12) apter 8 (Oth				
Street Address 300 Forrestal Road								(i. e. Private lings, homes,		mme	rcial	
							Square Feet	# of Floors		ldg.	Age	
City (5)	Cou	nty (6	5)		County Code	(7)	10000	3	10.5	0+		
Princeton					(STATE USE ONL	Y)	Current Use (P	rior if being	demol	ished)	
					<u> </u>		University					
Name of Monitoring Firm I Pennoni Associates Inc	lired by Building ()wner	(8)		ASCM No.		of Abatement Co- iated Specialty Co					
Street Address 515 Grove Street Suite 1B						11000000	Address Crue Avenue					
City, State, Zip Code Haddon Heights NJ							State, Zip Code Mills, PA 19342					
Project Manager of Monitor Alan Lloyd	ring Firm			Telephone 856-547-03		11	hone Number 64-9622		100	icenc 1103	e Numb	per
Scheduled Start Date (10) 05/28/13		Sche	d. Cor	mpletion Date 05/29/13	0.05		of OSHA Monitor					
Month/Day/Year			M	lonth/Day/Ye		Criter	ion Labs					
Occupancy Status During A	batement (Check o	nly on				Street	Address					
Facility Closed/Vaca	ted During Entire	Perio	d of Al	oatement		3370 F	Progresive Drive					
x Abatement Performe	ed Outside of Norn	nal Fa	cility			City, S	State, Zip Code					
Hours - Describe:	8:00 AM to 4:3	0 PM					lem PA 19020					
Other - Describe:						1						
Scope of work (Check all tha	t apply)					11	Full Containmen	t with Negat	ive Pr	000111		
Demolition	PP-27		X	Renovation	n		Mini - Enclosure	100	iveli	cssui	•	
x > 3 sf or > 3 if			2550	richo, acio.								
>160 sf or >260 lf							Glovebag Proce					
100 31 01 200 11						x	Non-Friable Pro	cedure				
1		Is							Abate	ment		
Location of Asbestos - Containing	4.5333	cation			ription of						E	E
Material (ACM)		rmally			os-Containing		Amoun			_	N	N
TO BE ABATED		sed			rial (ACM)		(Specify			R	C	C
27 - 27 - 27 - 27 - 27 - 27 - 27 - 27 -		lely			ermal systems		SF or	M		E	A	L
In Facility		Main			surfacing, VAT	,	LF)	0		P	P	0
(13)	No. 100 (1990)	ance/ stodia		or other	miscellaneous)			V	- 1	A	S	S
	1	ff (12)						l A		1	U	U
	Yes		N/A					L		R	L	R E
1st floor	103	x	INIA	vat and ma	stic		8 SF	x	\top			E
									1			
Name of Registered Waste H	auler		NJDI	EP Waste	Cubic Yards		Name of Register	ed Landfill	\perp			
Horizon Disposal				er ID No.	of Waste			ed Dalluilli				
					1		GROWS					
City, State Frenton NJ					Disposal Date As needed		City, State Morrisville PA					
Completed By (Print or Type Mark Goshow)		Title Proje	ct Manager		Signatu	ire //		*****		Date	 1-13
			. roje	Centanager		1//	andoh	un			214	
ABS-41						-						1.00

JUN 95

Chal# 8174

Date of Notification (1)	14 /	12			1	e of Buildi	ing Ov	vner/Operator	(2)		11-		60	,
		13							< 5/ j	May.		ų.	· W	
Agencies Notified	Type Notific	cation			2000	et Address			, T	MAY 15 AN	2			
⊠ EPA ⊠ DEP		d				14 Atlan State, Zip		and the second second		- 47	<: 5	L'		
DCA (NJAC 5:16) DHSS	Amendn	ncy (in		g	At	lantic Ci	ty, N.		Œ.	LICENSIN I	1.74			
DCA (NJAC 5:23-8)	justificat Cancella				1	e of Conta Rachell		ight		Telephone Nun	nber '	-	\	
					FA	CILITY	NFO	RMATION		Lal				
Name of Facility Where	Abatement is	Taking	g Place	e (3)					Type of Facility	(4)				
Block 126 Lot 53	ži.								School (K-12					
Street Address 211 Grafton Terrac	e		 						Subchapter 8 Other (i.e., pr	(Other than K-1) ivate & commerc		dings	7 .	
City (5)									Square Feet	# of Floors	В	ldg. A	\ae	
Atlantic Clty									2000	2		NA	-5	
County (6)		== 100==			Cou	nty Code	(7)(STA	ATE USE ONLY)	Current Use (Pri	or if being demol	shed)			
Atlantic									home					
Name of Monitoring Firm	Hired by Buil	lding C	Owner	(8)	ASCM	No.	Na	me of Abatem	nent Contractor (9)				88	
Health & Safety Sei	rvices, Inc				117		(Controlled E	invironmental S	ystems				
Street Address							Str	eet Address						
318 12th Street							1	121 N. Beth	nlehem Pike - Su	iite 60				
City, State, Zip Code								y, State, Zip C						
L				_			-		se, PA 19477					
Project Manager for Mon	itoring Firm			1	ephone			ephone No.		License No.				
Jim Proctor						1-8850		15-542-700		00847				
Start Date (10) 5 / 21 /	0.000000					ate (11) 13	3000	me of OSHA I CES	Monitor					
Occupancy Status During							Str	eet Address						-
☐ Facility Closed/Vacate							1	121 N. Beth	lehem Pike - Su	ite 60				
Abatement Performed Time of Abatement: 7							0.000	y, State, Zip C Spring Hous	ode e, PA 19477					
Scope of Work (Check all	that apply)										though an or a	_	0.70	
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			⊠ Re □ De					☐ Mini-End☑ Gloveba	Itainment with Nega closure g Procedure empted (*) and Non		re			
			Is	Loca	tion	1					1000	atem	ent T	vpe
Location				Norma	ally ely by			Description of				Т	T	T
Asbestos-Containing I TO BE ABA IN Facilit	TED	1)	Ma	inten: todial	ance/ Staff?		ermal	VAT, or	ation, surfacing,	Amount (Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure
(13)				(12)	1		oth	ner miscellane	eous)		-		late	ď.
Basement			Yes	No	N/A	Debris	Clea	n up		405		П	П	1
Basement						Pipe In				100				$\frac{1}{1}$
100000000000000000000000000000000000000						pe				100				
											10	H		H
Name of Registered Wast	e Hauler			-	JDEP I	Waste	Cub	oic Yards of	Name of Registe	ered Landfill	14			
STG	o riadioi			77.5	lauler II	D No.	Was		Minerva Lar					
City, State							1	oosal Date	City, State	- OU 44000		80-08		
New Castle, DE		т=	-,,,,,,,,,,				5/	/23/13	Waynesbur	g, OH 44688				
Completed By (Print or Ty Patricia VIsco	pe)	Title Of	fice l	Mana	ger			Signature	cia Vi	sco Da	ste /	14/	1	3



	i		1	Vame o	/ Buildin	Owner/Operator	(2)	29/11			
Date of Notification (1)	19 /13			talle (ATHON		x ca J d AY	476-		- 5
Agencies Notified	Type Notification			Steet A	ddyess	B0×19		81 J.	4	W Z	== : 5.
	☑ Jnitial ☐ Amended		1	Sh. Cin	le, Zip C		<u> </u>	4/10		_	
0 00r	Amendment #		1	ry, Sia	10, 40	= May C	OURT H	OUSEICE	V877	:7	-1
Прон	Emergency (in justification)	duding	1		Contac			Telephone Number	· ***	5	<u> </u>
	Cancellation		1		SIN						
			_1=	EACH	TY INF	ORMATION					
Name of Facility Where	Abelemont is Taking	Place (3	1	- ACK			Type of Facility	(4)			
Rame of Faculty Where	DENCE	7 1 800 (5)	,				School (K-12) 3 (Other than K-12)			
Street Address	2 1/8 T.M	. 57,					homes, etc.)	ryale & commercial	bular		
	ONE HAN				-		Square Feet	# of Floors 2		Age 10 t	
	DEMAI			County USE O) (STATE	Current Use (Pri	or If being demolist	ned)		
		===	- 1	SCM No	- ·	Name of Abater	neni Contractor (9)				
Name of Movitoring Firm	Hired by Building C	wher	1~	JUM 140	.	KLEM	co IN	CI			
Street Address	//\		<u> </u>			Sueel Address	3. SPRU	cé Ave.			
		1-1-				Car State Tin (Me				
City, State, Zip Code						MAR	LE SHRI	of NJO	805	<u> </u>	===
Project Manager for Mo	nitoring Firm	1.1	Teleph	none No	0.	Telephone No.	79-0472	0044	14		
	27-23	duled Com	nolelin	on Date	(11)	Name of OSHA	Monitor,				
Stan Date (10) 5/28/6		/4//	13	X1 0010	()	JOSE	PKALEM	M			
Occupancy Status Duni						Sueel Address	Spruc	=115			
M sandin Closed Naca	ted During Entire Pe	riced of Ab	patem.	ent							
Abatement Performe	d Outside of Norma	Facility F	Hours			City, State, Zip	Code SUAD	E, N. J.	080	57	5
Other Describe			_			MAP	LE JANY				
Scope of Work (Check	all that apply)					Full Co	ontainment with Ne	gative Pressure			
☐ >3 s1 or ≥3 11		Reno	ovation	n		= = = = = = = = = = = = = = = = = = = =	nclosure pag Procedure	_			
2160 st or 2260 II		₩ Demk	alitan			Non-E	N bus (,) perduex	on-Friable Procedu	re A	paten	ne n
		Is Loc	cation							Typ	
	01	Used S	solely			Description los Containing M	of aterial (ACM)	Amount			<u>ت</u> .
Location Aspesios Containing	Material (ACM)	Mainte	nano		Asbes (i.e.	ios containing m unormal systems	s insulation.	(Specify SF & LF)	Ren	Reput	Encapsulato
TO BE ABA	TED	Sta	aH?			surfacing, VA other myscellan	T. 01	SPACIT	Removal	D. H.	Sul.
(13)	·1	(1	12)	_		00101111000			E.		Ē
		Yes	No	N/A				20004	×		
	16			x	7	MANSIT			-	-	
SIDI		-	_						+	-	-
		-	-						-	-	-
		-					15	- and and the			
Name of Registered W	aste Hauler	 _	TH	DEP W	Vaste	Cubic Yards of Waste	Name of Re	oistered Landfill , C , M , U	, 1		
Kiemci	DINC'		. He	790	7	5					
Cin State		_ , , ,	,,,,	->		Osposal Date	Waa	DBINE, M	$C_{i,U}$,	
MAPLESIN	ADE, NI	5,08	0 5			Signature		Date 55	-10	1,	>
Completed By	Tid	e OW	NE	ER			rough I Se	5.65	17		_
JOSEPH CI	EMM					()					

		(Pu	rsuant t	o NJAC 8	:60 and	12:120))		, ,		C	A#	69	22
Date of Notification (1) May 8th, 2013		1	Name of RBH-T	Building C	owner/Op ST/URI	perator (BAN R	(2) ENE	WAL ENÍ	MAN	A v .			(12
Agencies Notified Type Notification		5	Street Ad	ldress ket Stre	et				,,	11 15	AM 2			
EPA Initial Amended Amendment	!		City, Stat	te, Zip Cook, New	de				of L	CENE,	74/20	. e [
Emergency (i DOH DCA Emergency (i justification) Cancellation	ncluding	1112		Contact McAle	er				Tele	phone Nu	mber	 L	_	
			FACIL	ITY INFO	RMATIC	ON			1-					
Name of Facility Where Abatement is Taking Teacher Village Phase #2	Place (3))					(COUNT)	of Facility (4 School (K-12						
Street Address 33-35 William Street							×	Subchapter & Other (i.e. pretc.)	(Othe	r than K-1 commerc	2) ial build	lings,	home	∌S,
City (5) Newark							Squa	re Feet	# of	Floors	В	ldg. A	ge	
County (6) Essex		(County C	ode (7)			Curre	nt Use (Prio	r if bein	g demolis	hed)			-10
Name of Monitoring Firm Hired by Building C	wner (8)		ASCM	No.				tement Cont		(9)				
CSA Street Address 26 Lorenzo Court			L			Street /	Addres	ss		- 10				
City, State, Zip Code Matawan, New Jersey 07470						City, St	tate, Z	ip Code ew Jersey	0701	1-1802				
Project Manager for Monitoring Firm		-	Геlерhor	ne No.		Teleph		<u> </u>		License N	No.	*		
Michael Chain			732-92	1-9220		973-4	178-4	848		00724				
May 20, 2013		2.0	pletion D				о Со	HA Monitor Instruction	Inc.					
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire F			ent			164 (
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe: 7:00am-3:30pm Mon	al Facility	Hours			_	F 5000		ip Code J 0711-18	02					
Scope of Work (Check All That Apply)												-21.00		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renoval Demoliti				×	Min	Il Containme ni-Enclosure ovebag Proc n-Exempted	edure				е	
	Is	Location	on						1,7			Abate		t
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	Normall d Solel intenar todial S (12)	y by nce/		tos Cont thermal surfac		fateria s insula T, or	ation,	(S	mount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A						- 4	201 5				
Basement			Х			Insula				60LF	x			-
Basement			Х			r Insula				0SF	х			-
Basement (Crawl Space)			X	Ві	rown &			ter		50SF	x			
First Floor & Elevator Room		L.,	X	11-	Cubic	or Tile	es	I Name of I		00SF red Landfi	x			<u> </u>
Name of Registered Waste Hauler Slavco Construction Inc.		Н	JDEP W auler ID 3508	0.355	of Was			G.R.O.\						
City, State Clifton, New Jersey 07011-1802					Dispos	sal Date		City, State Morrisv		а				
Completed by Vivian D. Jurcevic	Title Offic	e Mar	nager			Signature) Qua	MILLI		ate ⁄lay 8t	h, 20)13	

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

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

					J. 7 1		Ü	Page 2	of 2
					LICEN	377.1		ent Typ	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma /C	ution No Used Solely by intenan Custodia Staff (12	/ ce	Description of Asbestos-Containing Material (ACM) (i.e. thermal systems, insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF dr LF)	R E M O V A L	R E P A I R	ENCAPSUL	ENCLOSURE
			v	Mastic	700SF	x			
First Flr. & Elevator Room Main Staircas			x	Plaster Ceiling	20SF	×			
Second Floor (Main Room)			×	Baseboard	40 LF	×			
Second Flr. (Main Room, Office	e)		x	Floor Tiles	350SF	х			
Third Flr.(Main,Back Office)			х	Floor Tiles	600SF	x			
Third Flr.(Main,Back Office)			×	Mastice	600SF				
					 		_		
				-			-		
			_					-	
	-				+	-			
	-	-				-	-	-	
	_	-				-	-	+	
	-	-	-		-		-	-	
	-	-	-		-	-			
	+-	-	-		+	-		-	
	+-	-	-		-	-	-	-	
	-	-	-		+				
	-	+-	-		+	-	-		
	-	-	+-		-	+-	+-	+	
	+-	+			+	_	+	+	

		1		ICATION	OF ASBI	ESTOS	ABATE				(T) .				
Date of Notification (1) 5/7/2013	Check#2412				Building (Operator	(2)		21	13 MAY	, , _			
Agencies Notified	Type Notification			Street Ac	ddress oosevelt	Aveni	ue	- 1110	-2-2	č.	13 MAY	-15-	ЙM	2: >	v
EPA DEP X DOL	Initial Amended Amendment	#		City, Stat	te, Zip Co y Heigh	de					& LIL		-1.4	is tal	
□ DOH	Emergency justification)	(including	_	Name of		13, 110	01322			Tel	enhone N	lumber	MG		-
DCA	Cancellation				v Prach					L					
Name of Facility Where A	Abatement is Takin	g Place (3	3)	FACIL	LITY INFO	DRMATI	ION	Туре	of Facility (4	4)					
Church of Little Flov	wer	70				-			School (K-1) Subchapter		er than K	-12\			
Street Address 310 Plainfield Aven	ue							IT O	Other (i.e. petc.)				ldings	, hom	es,
City (5) Berkley Heights, NJ	1	2						Squar 30,00	e Feet 00	# of 2	f Floors		3ldg. 30+	Age	
County (6) UNION			T	County C	Code (7) ISE ONLY)			Curre	nt Use (Pric	or if bei	ng demol	ished)			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCM	l No.	5110		of Abat	ement Con						
Street Address							Street	Addres	s	allon	·				
0: 0: 7: 0 4								69th S State, Zi							
City, State, Zip Code							Gutte	enberg	g, NJ 070	93					
Project Manager for Mon	itoring Firm			Telephor	ne No.	750.57		none No 295-1			License 01074				
Start Date (10) 5/18/2013		Schedule 5/20/20		mpletion [Date (11)		100000000000000000000000000000000000000	of OSH e as a	IA Monitor bove						
Occupancy Status During	g Abatement (Chec	ck Only Or	ne)				Street	Addres	S		70 100				
Facility Closed/Vaca Abatement Perform Other – Describe:	ed Outside of Norr	nal Facility					City, S	State, Zi	p Code						
Scope of Work (Check A															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	Renova Demoli				×	Min Glo	Containme i-Enclosure vebag Prod n-Exempted	edure				re	
			Locat	0.000000	2000									temen ype	t
Location Asbestos-Containing TO BE AB/ In Facil (13)	Material (ACM) ATED ity	Use Ma	Norma ed Sole intena todial (12)	ely by ince/ Staff?		tos Con thermal surfa	escription taining N I system icing, VA miscellar	Material s insula \T, or		(5	mount Specify or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A							10		-	т в	
School's Electr	rical Room			177-18-2		Elbows				16	x	+			
						1000									
										125.2					
Name of Registered Was Freehold Carting	ste Hauler		F	NJDEP W Hauler ID 5939		of Wa	Yards ste		Name of Waste						
City, State PO BOX 5010	····					Dispo tbd	sal Date	1	City, State Tullytov		ndfill				
Completed by Gina Salvador		Title Offic	е Ма	nager	3.200		Signature	e	Éluic	18-		Date 5/7/20	13		

		00
= - +		61 "
	E	63 10

Date of Notification (1)	Ob 1-#0444						Operator	(2)		20	13 May	15	40.00		
	Rotified Type Notification Initial Amended Amendment # Emergency (including justification) Cancellation Facility Where Abatement is Taking Place (3) irrit Rectory dress ourban Road County Code (STATE USE 0)		II CI I					1771	15	44	2	\overline{D}			
CHARLE	1					Road				100					•
DEP X DOL	Sept	į.													
	Check#2411														
				FACI	LITY INFO	DRMAT	ION	-	F 104 - //4						
Holy Spirit Rectory		ig Place (3))					-	School (K-12	2)	orthan K-1	12)			
000011100101	ıd							-	Other (i.e. pr etc.)	ivate	& commerc	cial bu			es,
City (5) Union, NJ 07083								3,0	00	2			536999	Age	
County (6) UNION	al and a second							Scl	nool			shed)			
Name of Monitoring Firm	n Hired by Building	Owner (8)		ASCM	1 No.										
Street Address															
City, State, Zip Code							300000000000000000000000000000000000000			93					
Project Manager for Mo	nitoring Firm		T	Telepho	ne No.							No.			
Start Date (10) 5/18/2013				npletion l	Date (11)						L				
Occupancy Status Durin	ng Abatement (Che	k Only On	e)				Street	Addr	ess						
Abatement Perform	ned Outside of Norr	nal Facility	baten	nent s		20102	City, 8	State,	Zip Code		2002-00-00-00-00-00-00-00-00-00-00-00-00			- 14 A 14	
												-			
≥3 sf or ≥3 lf	That yes,yy	ARTICULAR DE LA CONTRACTOR DE LA CONTRAC					2	N G	lini-Enclosure llovebag Proc	edure	-			ге	
11		Is	Locat	ion						-			Aba	temen	t
Asbestos-Containing TO BE AB In Faci	g Material (ACM) BATED ility	Used Mai Cust	d Sole ntena odiai ((12)	ely by nce/ Staff?		tos Con therma surfa	taining N I system icing, VA	Materi s insu AT, or	lation,	(5	Specify	Removal			Enclosure
Rasem	nent				Pir	e Insu	lation	(Lea	king)		8 LF	×	+		
Bascii				-					37			+	+	+-	
		+									<u> </u>	+-	+	-	-
		-	-				Carrier -					+	+-	-	
Name of Registered Wa	ste Hauler		IN	JDEP W	/aste	Cubic	Yards		Name of F	Registe	ered Landfi	II	1		1
Freehold Carting					No.	tbd			Waste N	1ana				2	
City, State PO BOX 5010						tbd	sal Date	_	City, State Tullytow			714.00			
Completed by Gina Salvador		Title Office	Mai	nager			Signatur	e E	fuer!	_	10.552	ate 5/7/20	13		

Ch 33/11/4

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8: 60 and 12: 120-) Date of Notification (1) Name of Building Owner/Operator (2) 5 0 State of Gale Denecki \ Agencies Notified Street Address [X] EPA 16349 Fletcher DEP [X] Initial City, State, Zip Code [X] DOL Amiss Ville, VA 20106 [| Amended Amendment # [X] DOH [] Emergency (including Name of Contact Telephone Number Justification) [] DCA [] Cancellation Glen Denecki FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Residence School (K-12) 1 1 Street Address Subchapter 8 (Other than K-12) 1 1 [X] Other (i.e., private & commercial 286 Boulevard buildings, homes, etc.) City (5) County Code (7) County (6) Square Feet # of Floors Bldg. Age (STATE USE ONLY) Current Use (Prior if being demolished) Pompton Lakes Passaic Name of Monitoring Firm Hired by Building Owner (8) Name of Abatement Contractor (9) Enviro Vision Consultants, Inc. J.R. Contracting & Environmental Consulting, Inc. Street Address Street Address 20-21 Wagaraw Road, Bldg. #34A 1141 Route 23 City, State, Zip Code Fairlawn NJ 07410 Wayne NJ 07470 Project Manager for Monitoring Firm Telephone Number Telephone Number License No. Willie Morales 973-636-9145 973 628-9500 00408 Scheduled State Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 0 5 0 5 2 0 Enviro Vision Consultants, Inc. Month Day Year Month Day Year Occupancy Status During Abatement (Check only one) Street Address [X] Facility Closed/Vacated During Entire Period 20-21 Wagaraw Road, Bldg. #34A of Abatement Abatement Performed Outside of Normal Facility Hours 1 1 City, State, Zip Code Fairlawn NJ 07410 Other - Describe: Scope of Work (Check all that apply) Full Containment With Negative Pressure [X] Renovation Mini-Enclosure ≥ 3 sf or ≥ 3 If [X] Demolition Glovebag Procedure [X] \geq 160 sf or \geq 260 lf Non-Exemted (*) and Non-Friable Procedure Abatement Type Is E E Location Description of R N N Location of Normally Asbestos-Containing Amount E C C Asbestos - Containing Used Material (ACM) (Specify M E A L Material (ACM) Solely by (i.e., thermal systems SF or LF) 0 0 TO BE ABATED Maintenance / insulation, surfacing, VAT, V in Facility (13) Custodial or other miscellaneous) U U Staff (12) L R L R Yes No Basement pipe insulation 80 LF Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Waste Name of Registered Landfill Hauler ID No. J.R. Contracting & Environmental Consulting, Inc. 17819 G.R.O.W.S City, State Disposal Date City, State Wayne NJ 07470 Morrisville PA Completed by (Print or Type) Title Signature Date

Jerry Bijelonic

5/7/2013

Project Manager

ct 20548490-

- 4	1
12	
100	- 1

Date of Notification (1) 5/9/13				Name o	of Building	Owner/C	Operator	(2) 201	3 MAY 15		12	,				
Agencies Notified	Type Notification		\dashv	Street A	Address	, ity 0111	voluty	201.	MAY 15	Ar	1 2:	· D				
⊠ EPA	× Initial			2039	John F I	Kenned	dy Blvd	A 17								
X DEP X DOL	Amended Amendment		_		ate, Zip C y City, N)5		& LICE	uu: 1811	v i me iG	91.				
DOH DCA	justification) Cancellation		Ī		of Contact Delvecch						lephone	e Nun	nber			
				FAC	ILITY INF	ORMAT	ION			-						
Name of Facility Where Pump House - Wes				mont)				Туре	of Facility (4)						
Street Address	st Carripus Area	(ixedev	elobi	nent)					School (K-12 Subchapter 8		er than	K-12	١			
2039 John F Kenne	edy Blvd							×	Other (i.e. pr etc.)					dings	, hom	ies,
City (5) Jersey City									re Feet	# 0	f Floors	3	1000	3ldg. /	∖ge	
County (6)			Т	County	Code (7)				ent Use (Prio	18	ing dem	nolish				
Hudson	1			(STATE	USE ONLY)		Pun	np House							
Name of Monitoring Firm	Hired by Building	Owner (8)		ASC	M No.		100		tement Cont ervices, Ll		(9)	Mro2/V				
Street Address								Addre B Lu	ss icon Road							
City, State, Zip Code									ip Code PA 19474							
Project Manager for Mon	itoring Firm			Telepho	ne No.		Teleph 610.	one N			Licen 0107).			
Start Date (10) 5/22/13		Schedule 9/30/13		pletion	Date (11)		E		HA Monitor ervices, Ll	С				50-00		
Occupancy Status During	g Abatement (Chec						Street								-	
➤ Facility Closed/Vac	ated During Entire F	Period of A	baten	ent			2082	B Lu	con Road							
Abatement Perform Other – Describe:	ed Outside of Norm	al Facility	Hours				10000000		ip Code PA 19474							
Scope of Work (Check A	ll That Apply)	714525397													920	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		COLUMN TO SERVICE STATE OF THE PERSON STATE OF	enova emolit	31,000			×	Mir Glo	l Containmer ni-Enclosure ovebag Proce	dure	-					
		Ι.					<u> </u>	J NOI	n-Exempted	(*) and	a Non-F	riable	e Pro	arrive service	e ement	t
Location	of	N	Locati ormal	y		Des	scription	of							ре	
Asbestos-Containing TO BE ABA In Facili	Material (ACM) ATED	Maii	l Sole ntenar odial S	nce/		tos Cont thermal	aining M	laterial insula		(S	mount specify or LF)		Remova	Re	Encapsulate	Enclosure
(13)		Yes	(12) No	N/A			niscellan				,		ioval	Repair	sulate	osure
Entrance Door, Ex	nansion loint	103	140	X			aulking	,		7	5 LF		Х			
Roof	•			X			ip roof				00 SF		X			
Roof				X	Blad	ck grav	*		kina		0 LF		X			
Roof				X			lashing		9		0 LF		X			\vdash
Name of Registered Was			N	JDEP W	/aste	Cubic	_	'	Name of R		24 - 14/9					
Waste Management,			Н	auler ID 273		of Was			Waste M				c.			
City, State Keyport, NJ						Dispos	al Date		City, State Tullytown	n, PA						
Completed by Caroline M. Harper		Title Projec	t Ma	nager	/ Sec.	28	ignature Oro	li,	Mal	1/D	er	Date 5/9				

State of New Jersey	
NOTIFICATION OF ASBESTOS AF	ATEMENT
(Piursuant to NLIAC 8:50 and	121 201

		NOTE:	ursu	YON OF A	AC 8:50 a	ABATEM nd 12:120)	MIN -		0	KHE	#=	5 /	2	٦
e of Notification (1)					ting Owner	/Operator (nt	(2)	NJ De	pt. ohl	lealth & Ser	ior Sel	Aices		1
9-2013				et Addres		2013 M	AY	5 AM 2) 10	(signature)	_	22 6	1	
I.	ype Notification		16	so s. Liv	ingston i		iri i	Toate	4	13 11	net	6	4	4
D-1 (ps	d tritial Amended		Çity	r, State, Z	ip Code	1 4		10 pt 15	(5.5):					1
DEP L	Amendment#_		Li	vingstor	1, NJ 070	39 ू	140	i u u u li (I li i u u li (h Alisanha				٦
DOH	Emergency (suc justification)	luding		me of Cor	ntact	64	6. I U	t Kond	(elep	UODS Lemine	*			
DCA [Cancellation			ohn	· maragar	ATTO NO.								
		- fox		FACILITY	MFORM	AHON	Туре	of Facility (4)						
eme of Facility Where Al Vestfield Hamilton I	ratement is Taking P House - Apt. 3E	10ce (3)						School (K-12)	(Cabos	than K-12)			9	
reet Address							×	Subchapter of Other (i.e. pri	∀द्राप्त स् (दर्गाल	commercial	prigaging	is, ho	mes,	
124 Mountain Ave.		8					2	elc.)				-		_
ity (5)							Sque	re Fost	#4	Floors	50-	. Ago		
Westifeld, NJ 07039	1			ounty Car	lo (7)		Cum	ent Use (Prior	If bein	g demolisha	d)			
ounty (6)			(S	TATE USE	ONLY) _		Ap	artments						_
Union	Uned by Dribbon Ot	vner (8)	1	ASCM N	Q.	Name	e of Ab	atement Cont	ractor	9)				
lame of Monitoring Firm	Hitea by containing or	with (o)		n/a		Loz	inica l	Manageme	int Co	rporation				_
n/a							Addr							
itreet Address							Troy							
n/a			-			City,	State,	Zip Code		5a		3		
City, State, Zip Code								Park, NJ 07	035					
n/a	in admin Elizare		T	elephone	No.		phone			License No				
Project Munager for Mon	moing run			n/a	150.500	110000000		-7950		01193				
n/a		Scheduled	Com	pletion De	te (11)	Nam	ne of O	SHA Monitor						
Start Dale (10)		5/13/201		*.02.07.30%.3=*.18				Manageme	ant Co	orporadon				-
5/10/2013 Occupancy Status Durin	a Abotement (Check	(Only One)	_				et Addi				82			
Occubation angres point	y pagement (andord of Ah	alam	ent				Lane					_	
Abatement Perform Other - Describe:	ated During Entire P red Outside of Norm 9um - 4pm	al Facility H	lours			- Li	, State, ncoln	Zip Code Park, NJ 0	7035					_
Scope of Work (Check A □ 23 stor 23 lf ≥ 160 stor ≥ 260 lf	All Thet Apply)		nova molit				×	Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	T)				·	
								Mott-Exembra	7 / 1	140.0	1	Abate	ment	
		is l	ocat	ion								Ty	po	_
Locatite Asbestos-Containin TO BE A In Fa	g Maturial (ACM) BATED cility	Used Medi	ntena	ely by noce/ Staif?	(i,e, t	Description Becoming a Containing Termal system surfacing, ather misce	ems in	DF.		Amount (Specify SF or LF)	Rerooval	Repair	Encapsulate	
,		Yes	No	N/A					-	500 SF	X	-	-	+
Throughout	Apartment			X		VA	1		+-3	JUL OF	+-	-	-	+
3	·								-	-	+		-	+
				-					+		1			T
	- CONTRACTOR OF THE CONTRACTOR	لــــــــــــــــــــــــــــــــــــــ		NUDEP W	lasta T	Cubic Yer	ds	Nome	of Rugi	tieved Lands	h			
Name of Registered V			1	Hauter D	No.	of Weste	- 10 76			andfill				
Loznica Managen	nent Corporation	l 		003313	1	TBD Disposal I	Date	City, Si	latu					
DOZINEC MICEINS						TBD	- CONTRACTOR	Morri	sville	PA 19067			_	_
City, State					- 1	100		111711						
		Tille					sture	5			hate 5-9-20			





Date of Notification (1) 5/9/2013	Check#241	3			Building		Operator	(2)	2013 MA	17 15	5 AM	2: 31	1	Pa	age	1
Agencies Notified EPA	Type Notification X Initial			Street A	^{ddress} Nevins F	Road			A 54	1			3			
EPA DEP DOL	Amended Amendment		_		te, Zip Co awn, NJ		0		ěz L	ICE	WSTAL	G				
DOH DCA	Emergency justification) Cancellation	Marie Carlotte Marie		Name of Albert	Contact Mips		÷			Te	lephone	Numbe	•			
				FACI	LITY INFO	ORMA	ΓΙΟΝ									
Name of Facility Where	Abatement is Takin	g Place (3)					Туре	e of Facility (4)						
Sandvik, Inc	1908								School (K-1		ar than 1	Z 10\				
Street Address 1702 Nevins Road								×	Subchapter Other (i.e. p				iildii	ngs,	home	es,
City (5)									etc.) are Feet	1#0	f Floors		Bld	lg. A	00	
Fair Lawn, NJ 0741	10							200000000	,000	1	1110013		50		ge	
County (6)			T	County C				Curr	ent Use (Pri	or if be	ing demo	olished)				
BERGEN COUNTY				(STATE L	JSE ONLY,			1/01/01/09/51	rehouse							
Name of Monitoring Firm EnviroVision Consu	하는 사람들은 살아보다 아니라 하는 아니라 아니라 모든데 없다.	Owner (8)		ASCM	No.				atement Cor ces Corpo							
Street Address 20-21 Wagaraw Ro	ad. Bldg 35-E		-	A			Street 426		ess Street # 1							
City, State, Zip Code	,						City, S	state, 2	Zip Code	-			W.C.			
Fair Lawn, NJ 0741	10						Gutte	enbe	rg, NJ 070	93						
Project Manager for Mor Fred Larson	nitoring Firm	*		Telephor 973-63	ne No. 6-9145		Teleph 201-				Licens 01074					
Start Date (10) May 24/2013		Schedule July 24			Date (11)		2000000		HA Monitor above							
Occupancy Status Durin	g Abatement (Chec				2.00		Street	Addre	ess	-						
Facility Closed/Vac Abatement Perform Other – Describe:	ated During Entire I	Period of A	baten				City, S	state, z	Zip Code	-						
Scope of Work (Check A	II That Apply)								n l							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	enova emolit	70700			×	Mi GI	ull Containme ini-Enclosure lovebag Proc on-Exempted	e cedure					4	
		le le	Locati	on											ment	
Location	n of	N	lormal	ly		D	escription	of				_	-	Ту	ре	
Asbestos-Containing	Material (ACM)		d Sole intena			tos Cor	ntaining M	Materia			mount	-			E	т
<u>TO BE AB</u> In Facil		Cust	odial 9 (12)	Staff?	(1.6.		acing, VA		iation,		Specify F or LF)	Kemova		Repair	caps	Enclosure
(13)		-	(12)			other	miscellar	neous))			Val		air	Encapsulate	sure
		Yes	No	N/A					_				1		(D	
Phase 1A-Rea			X				TSI				74 LF	x				
Phase 1-B			X				TSI				050 LF	Х	1			
Phase 1- C	Kitchen		X				TSI				62 LF	x				
Phase 1-D			X				e in 20"	Iron	V. difference		2 LF	x				
Name of Registered Was	ste Hauler		1 22	JDEP Wauler ID	100000000000000000000000000000000000000	of Wa	Yards aste		Name of I							
Freehold Carting		2000	0.000	5939		tbd			Waste N		gemen	τ				
City, State PO Box 5010) i	Dispo tbd	sal Date		City, State Tullytow		4					
Completed by		Title					Signature	//	91	1		Date	140			\neg
Gina Salvador		Office	Mar	nager				E	fuid	1-		5/9/20	113			



		N		ICATION	OF ASBES	STOS A	BATE		?	25	11.	ř.	0	37		
Date of Notification (1)						wner/O	perator	(2) 2						Pa	ige 2	2
Agencies Notified Type	Notification					oad		ă.	130		417 2:	41				
EPA DEP DOL	Initial Amended Amendment	#	_					27-192-0	& LIC	EN.	lika K	i);				
Agencies Notified Type Notification Street Address 1702 Nevins Road City, State, Zip Code Fair Lawn, NJ 07410 Name of Contact Albert Mips FACILITY INFORMATION Type of Facility (4) Street Address 1702 Nevins Road City, State, Zip Code Fair Lawn, NJ 07410 Name of Contact Albert Mips FACILITY INFORMATION Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) Other (i.e. private & commercial builletc.) City (5)	er		N. K. O.													
				FACIL	ITY INFO	RMATIC	ON			_		-	_			
	ment is Takin	g Place (3)					Туре	of Facility (4)						
											er than K-	-12)				
								×	Other (i.e. pr				build	ings,	home	es,
City (5)								Squar	e Feet	100	f Floors		3943	dg. A	ge	
				0) - d - (7)					1	na domoli	icho	1)+		
							_			i ii bei	ng demoi	15110	u)			
		Owner (8)		ASCM	No.											
	31dg 35-E								T							
	-									93						
[2] [1] [2] [2] [2] [2] [2] [2] [2] [2] [2] [2	g Firm	- neim											S.			
					Date (11)											
Occupancy Status During Aba	tement (Chec	k Only Or	ne)				Street	Addres	s						1=:	
X Abatement Performed Ou	itside of Norm	nal Facility					City, S	State, Zi	p Code							
																-
23 sf or ≥3 lf		-					×	Min Glo	i-Enclosure vebag Proc	edure	-				e	
		Is	Locat	tion						5,500 H. C.					ment pe	
Location of Asbestos-Containing Mate TO BE ABATED In Facility (13)		Use Ma	Norma ed Sole iintena todial (12)	ely by ance/ Staff?		os Conta	system cing, VA	Material s insula \T, or		(mount Specify or LF)		Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A				Marin Carlo								
Cafeteria			Х				Insula				80 LF	-	x			
Second Floor			X			Pipe	Insula	ation		3	60 LF	-	X			
		-		-					-							
Name of Registered Waste Ha	uler		1	NJDEP W	aste	Cubic			Name of F	Registe	ered Land	fill				
Freehold Carting			100	Hauler ID 5939	N1150000	of Was			Waste N	0000000000	gement					
City, State PO Box 5010		- 1-10				Dispos	al Date		City, State Tullytow							
Completed by Gina Salvador		Title Offic	е Ма	nager		S	ignature		eas-		2.5	Date 5/9) 201	3		

		IN	Jame of F	Building Owr	er / Operator (2)	***	60			
e of Notification (1)	S	Salvatore	Mennella		73				
N. Weigh	May 10, 2013 Type Notification		Street Add		∠₩,	13 MAY 15 A				
encies Notified	Type (votillocator)			•	.£	· 0 4,	7 2:20			
EPA		1	3 Oxford	Court		Variable Control	- 6			_
DEP			City State	e & Zip Cod	9	& LICENSIA	1.70			
DOL				, NJ 07747		7.0年代的/高	G			
	Amended Amendment #	1						hone Nu	ımber	7. 19
DOH DCA	Cancellation		Name of	Contact		*	1			
JUCA			Dennis H	lala – DHJ I	Builders					_
			FACI	LITY INF	ORMATION					
×2. 50 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 ×		DI (2)			Type of Facility (4	1)				
	here Abatement is Taking	Place (3)			School (K-1	2)	2)			
esidence					Subchapter	8 (Other than K-1	Z)	home	etc.)	
reet Address					Other (i.e.,	private & comm	nercial buildings,	Age		
32 Lawrence Ave	enue				Square Feet	# of Floors	1	50 Ye	ears	
ity (5)					948 Current Use (Pri	or if being demolis	shed)			
ity (5) lanahawkin					Residence					_
		County Code	(7)							
ounty (6)		USE ONLY_	(')			Contractor (9	\			
cean	g Firm Hired by Building			ASCM No.	Name of Abaten Synatech, Inc.	nent Contractor (9	,			
IAME OF MOTILOTIN	91111111110007				Street Address					
Street Address					829 Radio Road	<u>d</u>				
01 1 0 7:00	`ada				City, State & Zip Little Egg Harb	Code Nor N.I 08087				
City, State & Zip C				lumbar	Telephone Num	ber	License Numb	er 00047		
Project Manager f	or Monitoring Firm	Tel	ephone N	umber	609-296-6916			00817		_
		uled Completic	on Date (1	11)	Name of OSHA	. Monitor	757.30			
Scheduled Start [2 2013	June	e 5, 2013		Synatech, Inc. Street Address					- Constitution
	a . At -tement /Cho	ck only one)	A batama	nt	829 Radio Roa	ıd				
Facility (closed/vacated During Li	ithe i diloa a	Abatemer		City, State & Zi					
Abateme	ent Performed Outside of	Normal Hours	,		Little Egg Har	bor, NJ 08087				
Other -	Describe:									_
	Occupied During Abateme	ent								
Scope of Work (Check all that apply)					Full Containment	with Negative Press	ure		
			Renovati	ion		Mini-Enclosure				
≥3 sf or ≥	50 If	×	Demolitie			Glovebag Procedi	ire	ranadur		
∑ ≥160 sf o	r ≥260 lt						and Non-Friable Pr	Aha	temen	t Tv
	Leasting of	Is Locat	tion Norm	ally Used	Description Asbestos-Co	on of	Amount (Specify	1		e0. 50
Ashestne-C	Location of Containing Material (ACM)	Solely	by Mainte	nance or	Material (ACM)	SF or LF)	-		\neg
1	O BE ABATED	Cust	odial Stat	(12)	(i.e. thermal	systems		77		g
	IN Facility (13)	1	1		insulation, surf	acing, VA1		em	Repair	aps
	(10)		1	1	Of Other Hillson			Remova	air	Encapsulate
			No	N/A				-		ē
		Yes	INO			oining siding	900 SF	X		
Futorica			X		Asbestos-conta	aning siding				
Exterior										
						Name of Regist	ered Landfill			
Name of Pagie	tered Waste Hauler		Waste	Cubic Y	ards of Waste					
Name of Regis	ioroa rradio ri		ID No. 27429	5		Grows Landfil				
Synatech, Inc.			21428	Disposa	al Date	City, State				
City, State						Morrisville, PA	N 100			
Little Eng Har	bor, NJ 08087	¥6.		June 6 Signati			Date			
Little Lgg Hai	T	tle		Signati	ine ala	,	May 10, 2013			
Completed By	1			0.000						

	20	١ .	
01	(A)	11 (1370
/ h	00	1	1210
	667	71	

11 115 11 - (4)	TN	Name of Bu	uilding Owner/0	Operator ((2)			1-1-			
Date of Notification (1)		USPS		2	013 MAY	45	H 2: 20			-	
5-9-13 Agencies Notified Type Notification		Street Addr	ress Highway				111 20				
X EPA ☐ Initial ☐ DEP ☐ Amended ☐ Amendment # 1		City, State, Trento		8650	& L	IČĒKŠ	ING				
☐ Emergency (including justification)		Name of C Dennis	ontact Dernbac	h			Telephone Nu	imber	_	è	
DCA · Cancellation		FACILI	TY INFORMAT	ION	T (1	Collity (4)					
Name of Facility Where Abatement is Taking Place (3) USPS Trenton P&DC Street Address					☐ Sch☐ Sub	er (i.e. pri		12) cial buildi	ngs,	hom	es,
680 US Highway 130 City (5)	-				Square I	eet	# of Floors	77533	dg. A		
Trenton					980,0	Llee (Prior	r if being demoli				
County (6) Mercer		County Co (STATE US	ode (7) EE ONLY)		USPS	Distr	ibution C	enter			
Name of Monitoring Firm Hired by Building Owner (8) TTI Environmental		ASCM	No.	Ply		nent Cont Envir	onmental	Co.,I	nc.		
Street Address 1253 North Church Street				923	Address Haws		e				
City, State, Zip Code Moorestown, NJ 08057				Nor	State, Zip ristov	Code wn,PA		No			
Project Manager for Monitoring Firm Jim Guilardi				610)-239-						
Start Date (10)			ate (11)	Ply	mouth	Envir	conmental	Co.,	inc	•	
1 3-13-13							10				
Facility Closed/Vacated During Entire Period of A	bate Hour	3	ted	City,	State, Zip	Code					
							0.000 9.400.000.00				
G R					☐ Mini-	Enclosure	e cedure			ure_	
					QQ INON				Aba	ateme	
Location of Use Asbestos-Containing Material (ACM) Ma	Norm d So inten todia	ally lely by lance/ I Staff?	Asbestos C (i.e. there	ontaining mal system orfacing, V	Material of the Material of th	(ACM) ion,	Amount (Specify SF or LF)	Removal	T	Type	
Yes	No	N/A					430 SE		×	+	
office area	х								-	-	-
office area	х		VAT &	masti	c		625 SF	-	× _		-
			Vesta 1 C	ibic Varde		Name o	f Registered Lar	ndfill			
		Hauler ID	No. of	Waste	•	and the second second					
		1730	D	sposal Da							
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Pes No N/A Office area Asbestos Containing (i.e. thermal syste surfacing, other misce) To BE ABATED In Facility (13) Yes No N/A VAT & masting To BE ABATED In Facility (13) Yes No N/A To BE ABATED In Facility (12) Yes No N/A To BE ABATED In Facility (12) Yes No N/A To BE ABATED In Facility (12) Yes No N/A To BE ABATED In Facility (12) Yes No N/A To BE ABATED In Facility (12) Yes No N/A To BE ABATED In Facility (I.e. thermal syste surfacing, other misce) The Asbestos Containing (I.e. thermal syste surfacing, other misce) To BE ABATED In Facility (I.e. thermal syste surfacing, other misce) To Asbestos Containing (I.e. thermal syste surfacing, other misce) To Asbestos Containing (I.e. thermal syste surfacing, other misce) To Asbestos Containing (I.e. thermal syste surfacing, other misce) To Asbestos Containing (I.e. thermal syste surfacing, other misce) To Asbestos Containing (I.e. thermal syste surfacing, other misce) To Asbestos Containing (I.e. thermal syste surfacing, other misce) To Asbestos Containing (I.e. thermal syste surfacing, other misce) To Asbestos Containing (I.e. thermal syste surfacing, other misce) To Asbestos Containing (I.e. thermal syste surfacing, other misce) To Asbestos Containing (I.e. thermal syste surfacing, other misce) To Asbestos Containing (I.e. thermal syste surfacing, other misce) To Asbestos Containing (I.e. thermal syste surfacing, other misce) To Asbestos Containing (I.e. thermal syste surfacing, other misce) To Asbestos Containing (I.e. thermal syste surfacing, other misce) To Asbestos Containing (I.e. thermal syste surfacing, other misce) To Asbestos Containing (I.e. thermal syste surfacing, other misce) To Asbestos Containing (I.e. thermal syste surfacing, other misce) To Asbestos Containing (I.e. thermal syste surfacing, other misce) To Asbestos Containing (I.e. thermal syste surfacing, other misce) To Asbestos Containing (I.e. thermal syste surfacing, other m	71 1		IVIOTE	UAULITE . F	11						
Telephone No. S56-840-8800 S56-840-8800 S16-239-9920 O0398											

		(Put	300				ent	134	16C37#		9,5		
te of Notification (1)		N	Name of USPS	Building	g Owner/Ope	erator (2	2)		15 AM 2:			-	
5–1–13			Street A				12.1	7	"1 2:	20			
encies Notified	Type Notification		680	US I	Highway	130	4						
encies Notifica		-	City, Sta		Code		-	410:	ENSING TE	1			
EPA	n Amended		Tre	nton	, NJ 0	8650		——————————————————————————————————————	elephone Numbe	er			
DEP DOL	Amendment #_ Emergency (incl	uding	Nome 0	f Conta	ct			1	, icpris				
	instification)		Den	nis	Dernbac	h					Ť		
DOH DCA ·	☐ Cancellation		FAC	ILITY II	NFORMATIO	N	Type of Facil	ity (4)					
The state of the s	Taking P	lace (3)						40)	0.020				
lame of Facility Where	Abatement is Taking P						School Subcha	pter 8 (O	ther than K-12) e & commercial	buildings,	hom	es,	1
JSPS Trenton I	2&DC						₩ Other (.e. privat	e a commo				-
Street Address	. 130						etc.) Square Feet	; #	of Floors	Bldg. A			
80 US Highwa	y 130						980.000		3				1
City (5)					777		Current Use	(Prior if	being demolishe	ed) nter			1
Frenton			Count	y Code E USE C	(/) ONLY)		USPS DI	SLIIL	Julion Con				1
County (6) Hamilton		1 1000	1			T Name	e of Abatemer	t Contrac	otor (9)	Tnc			
nailliteon	irm Hired by Building O	wner (8)	AS	CM No.		plv	mouth En	viron	mental Co).,1110.			7
Name of Monitoring F TII Environme	ental					Stree	et Address						
						923	Haws A	renue					
Street Address 1253 North Ch	nurch Street					011	Chata Zin Co	de	10401				
						No	rristown	, PA	License N	lo.			_
City, State, Zip Code Moorestown, 1	л.т 08057		Tale	phone N	Vn	Tele	ohone No.		003				
Project Manager for	Monitoring Firm		2000			61	0-239-99	20					
Jim Guilardi		Scheduled	856	0-840)-8800 e (11)	Nan	ne of OSHA M	lonitor	nmental C	oInc	٥.	35-5	
Start Date (10)				,1011 0 0 1				nviic					
1 140		5/24/1	3			Stre	eet Address						
							23 Haws A	veriue					
	ouring Abatement (Che	CK Office Office	i annt			92	7:n C	ode					
Occupancy Status D	Ouring Abatement (Chec	Period of via	lours			City	y, State, Zip C	ode 1.PA 1					
Occupancy Status D	Macated During Entire	Period of via	lours	acat	ed	City	y, State, Zip C prristowr	ode 1,PA 1					
Occupancy Status D Facility Closed Abatement Pe Other - Descri	Nacated During Entire rformed Outside of Nor be: <u>abatement</u>	Period of via	lours	acat	ed _	City	orristow	ı,PA	9401	e Pressure			
Occupancy Status D Facility Closed Abatement Pe Other - Descri	Nacated During Entire rformed Outside of Nor be: <u>abatement</u>	mal Facility H	lours be v	acat	<u>ed —</u>	City	Full C	ontainme	9401 Int with Negative			31 3	
Occupancy Status D Facility Closed Abatement Pe Other – Descri Scope of Work (Ch	Nacated During Entire formed Outside of Nor be: _abatement eck All That Apply)	mal Facility h	lours	acat n	<u>ed</u> _	City	Full C	ontainme	9401 Int with Negative	iable Proc	edure		_
Occupancy Status D Facility Closed Abatement Pe Other - Descri	Nacated During Entire formed Outside of Nor be: _abatement eck All That Apply)	mal Facility h	lours be v	acat n	ed	City	Full C	ontainme	9401 	iable Proc	edure Abate		_
Occupancy Status D Facility Closed Abatement Pe Other - Descri Scope of Work (Ch	Nacated During Entire formed Outside of Nor be: _abatement eck All That Apply)	mal Facility Farea to	lours be V enovation	n	ed	City	□ Full C □ Mini-E □ Glove ☑ Non-E	ontainme	9401 Int with Negative	iable Proc	edure		
Occupancy Status D Facility Closed Abatement Pe Other - Descri Scope of Work (Ch	Nacated During Entire formed Outside of Nor be: _abatement eck All That Apply)	mal Facility Face to	be V enovation emolition Location	acare	- E	City	Full C Glove Non-E	ontainme Inclosure bag Prod Exempted	ent with Negative sedure d (*) and Non-Fri	iable Proc	edure Abate Ty	pe	
Occupancy Status D □ Facility Closed □ Abatement Pe X□ Other – Descri Scope of Work (Ch □ ≥3 sf or ≥3 lf x□ ≥160 sf or ≥26	Nacated During Entire rformed Outside of Nor- be: _abatement eck All That Apply) 60 If	mal Facility Farea to	be venovation be	by	Asbestos	Descrit Contain	Full C Full C Glove Non-E	ontainme Inclosure bag Prod Exempted	ent with Negative sedure (*) and Non-Fri Amount (Specify	iable Proc	edure Abate Ty	pe	
Occupancy Status D Facility Closed Abatement Pe Other – Descri Scope of Work (Ch 3 sf or ≥3 lf 160 sf or ≥26	Nacated During Entire rformed Outside of Nor- be: _abatement eck All That Apply) 50 If ocation of taining Material (ACM)	mal Facility Farea to	hours be v enovation emolition Location lormally d Solely intenano	by tel	Asbestos (i.e. the	Descrit Contain	Full C Full C Mini-E Glove Non-E	ontainme Inclosure bag Prod Exempted	ent with Negative sedure d (*) and Non-Fri	iable Proc	edure Abate	pe	
Occupancy Status D Facility Closed Abatement Pe Cher - Descri Scope of Work (Ch 3 sf or ≥3 lf 2160 sf or ≥26 Asbestos-Con	Nacated During Entire rformed Outside of Nor- be: _abatement eck All That Apply) 50 If ocation of taining Material (ACM) BE ABATED In Facility	mal Facility Farea to	be venovation be	by tel	Asbestos (i.e. the	Descrit Contain	Full C Full C Glove Non-E	ontainme Inclosure bag Prod Exempted	ent with Negative sedure (*) and Non-Fri Amount (Specify	iable Proc	edure Abate Ty		•
Occupancy Status D Facility Closed Abatement Pe Cher - Descri Scope of Work (Ch ≥3 sf or ≥3 lf ≥160 sf or ≥26 Asbestos-Con	Nacated During Entire rformed Outside of Nor- be: _abatement eck All That Apply) 60 If ocation of taining Material (ACM) BE ABATED	mal Facility Farea to	be V enovation condition Location Location lormally d Solely intenance codial State	by tel	Asbestos (i.e. the	Descrit Contain	Full C Full C Mini-E Glove Non-E	ontainme Inclosure bag Prod Exempted	ent with Negative edure (*) and Non-Fri Amount (Specify SF or LF)	iable Proc	Abate Ty Repair	pe	
Occupancy Status D Facility Closed Abatement Pe Cother - Descri Scope of Work (Ch ≥3 sf or ≥3 lf ≥160 sf or ≥26 Asbestos-Con	Nacated During Entire rformed Outside of Nor- be: _abatement eck All That Apply) 50 If ocation of taining Material (ACM) BE ABATED In Facility	mal Facility Farea to	be venovation Location Location of Solely internance odial State (12)	n by sel saff?	Asbestos (i.e. the	Descri Contain ermal sy surfacin ther mis	Full C Full C Mini-E Glove Non-E iption of aing Material (/ estems insulating, VAT, or icellaneous)	ontainme Inclosure bag Prod Exempted	ent with Negative sedure (*) and Non-Fri Amount (Specify	Removal	Abate Ty Repair	pe	
Occupancy Status D Facility Closed Abatement Pe Other – Descri Scope of Work (Ch 3 sf or ≥3 If 160 sf or ≥26 Asbestos-Con TO	Avacated During Entire rformed Outside of Nor- be: _abatement eck All That Apply) 50 If ocation of taining Material (ACM) BE ABATED In Facility (13)	mal Facility Farea to	be V enovation Location Location lormally d Solely intenance codial Sta	n by sel saff?	Asbestos (i.e. the	Descri Contain ermal sy surfacin ther mis	Full C Full C Mini-E Glove Non-E iption of aing Material (/ estems insulating, VAT, or icellaneous)	ontainme Inclosure bag Prod Exempted	ent with Negative edure (*) and Non-Fri Amount (Specify SF or LF)	Removal	Abate Ty Repair	pe	
Occupancy Status D Facility Closed Abatement Pe Cother - Descri Scope of Work (Ch ≥3 sf or ≥3 lf ≥160 sf or ≥26 Asbestos-Con	Avacated During Entire rformed Outside of Nor- be: _abatement eck All That Apply) 50 If ocation of taining Material (ACM) BE ABATED In Facility (13)	mal Facility Farea to	be venovation Location Location of Solely internance odial State (12)	n by sel saff?	Asbestos (i.e. the	Descri Contain ermal sy surfacin ther mis	Full C Full C Mini-E Glove Non-E iption of aing Material (/ estems insulating, VAT, or icellaneous)	ontainme Inclosure bag Prod Exempted	ent with Negative edure (*) and Non-Fri Amount (Specify SF or LF)	Removal	Abate Ty Repair	pe	
Occupancy Status D Facility Closed Abatement Pe Cother – Descri Scope of Work (Ch 33 sf or ≥3 lf 2160 sf or ≥26 Asbestos-Con TO	Avacated During Entire rformed Outside of Nor- be: _abatement eck All That Apply) 50 If ocation of taining Material (ACM) BE ABATED In Facility (13)	mal Facility Farea to	be venovation Location Location of Solely internance odial State (12)	n by sel saff?	Asbestos (i.e. the	Descri Contain ermal sy surfacin ther mis	Full C Full C Mini-E Glove Non-E iption of aing Material (/ estems insulating, VAT, or icellaneous)	ontainme Inclosure bag Prod Exempted	ent with Negative edure (*) and Non-Fri Amount (Specify SF or LF)	Removal	Abate Ty Repair	pe	
Occupancy Status D Facility Closed Abatement Pe Cother – Descri Scope of Work (Ch 3 sf or ≥3 If 160 sf or ≥26 Asbestos-Con TO	Avacated During Entire rformed Outside of Nor- be: _abatement eck All That Apply) 50 If ocation of taining Material (ACM) BE ABATED In Facility (13)	mal Facility Farea to	be V enovation Location	by sel aff?	Asbestos (i.e. the	Descrit Contain sysurfacin ther mis	Full C Glove Non-E iption of sing Material (/ stems insulating, VAT, or scellaneous)	ontainme inclosure bag Proc exemptes	ent with Negative sedure (*) and Non-Fri (Specify SF or LF)	Removal X	Abate Ty Repair	pe	
Occupancy Status D Facility Closed Abatement Pe Cother - Descri Scope of Work (Ch Scope of Work (Ch Assessor 23 If Asbestos-Con TO Office are	Avacated During Entire rformed Outside of Nor- be: _abatement eck All That Apply) 50 If ocation of taining Material (ACM) BE ABATED In Facility (13)	mal Facility Farea to	be V enovation Location	by sel aff?	Asbestos (i.e. the	Descrit Contain ermal sy surfacing ther mis	Full C Glove Non-E iption of aing Material (/ stems insulating, VAT, or incellaneous)	ontainmee inclosure bag Proc exemptes ACM) on,	Amount (Specify SF or LF)	Removal X	Abate Ty Repair	pe	
Occupancy Status D Facility Closed Abatement Pe Cother - Descri Scope of Work (Ch 33 sf or ≥3 lf 2160 sf or ≥26 Asbestos-Con TO Name of Registe	Avacated During Entire rformed Outside of Nor- be: _abatement eck All That Apply) 50 If ocation of taining Material (ACM) BE ABATED In Facility (13) ea	mal Facility Farea to	be V enovation emolition Location formally d Solely intenance codial State (12) No X	by el aff?	Asbestos (i.e. the	Descrit Contain sysurfacin ther mis	Full C Glove Non-E iption of sing Material (/ stems insulating, VAT, or scellaneous) Tic	ontainme inclosure bag Proc exempted ACM) on,	Amount (Specify SF or LF) 430 SF of Registered La	Removal X	Abate Ty Repair	pe	
Occupancy Status D Facility Closed Abatement Pe Cother - Descri Scope of Work (Ch Scope of Work (Ch Asbestos-Con TO Office are	Avacated During Entire rformed Outside of Nor- be: _abatement eck All That Apply) 50 If ocation of taining Material (ACM) BE ABATED In Facility (13) ea	mal Facility Farea to	be V enovation emolition Location formally d Solely intenance codial State (12) No X	by sel aff?	Asbestos (i.e. the	Descrit Contain sysurfacin ther mis mast	Full C Glove Non-E iption of aling Material (/ stems insulating, VAT, or incellaneous) CiC	n,PA ontainmee inclosure bag Proc exemptec ACM) on, Name of GR	Amount (Specify SF or LF) 430 SF ARGINERAL ARGUMENT (Specify SF or LF) 430 SF	Removal X	Abate Ty Repair	pe	
Occupancy Status D Facility Closed Abatement Pe Cother - Descri Scope of Work (Ch Scope of Work (Ch Assestor 23 If Assestor 23 If Assestor 20 Office are Name of Registe Robinson	Avacated During Entire rformed Outside of Nor- be: _abatement eck All That Apply) 50 If ocation of taining Material (ACM) BE ABATED In Facility (13) ea	mal Facility Farea to	be V enovation emolition Location formally d Solely intenance codial State (12) No X	by el aff?	Asbestos (i.e. the	Descrit Contain sysurfacin ther mis mast	Full C Glove Non-E iption of sing Material (/ stems insulating, VAT, or incellaneous) Tic	n,PA ontainmee inclosure bag Proc exemptec ACM) on, Name of GR	Amount (Specify SF or LF) 430 SF of Registered La	Removal X	Abate Ty Repair	pe	
Occupancy Status D Facility Closed Abatement Pe Cother - Descri Scope of Work (Ch 33 sf or ≥3 lf 2160 sf or ≥26 Asbestos-Con TO Name of Registe	Avacated During Entire rformed Outside of Nor- be: _abatement eck All That Apply) SO If Ocation of taining Material (ACM) BE ABATED In Facility (13) ea ered Waste Hauler Waste	mal Facility Farea to	be V enovation emolition Location formally d Solely intenano odial Str (12) No X	by el aff?	Asbestos (i.e. the	Descric Contain remail sy surfacin ther miss mast Cubic Yof Was 3 Dispos 5/24	Full C Glove Non-E iption of sing Material (/ stems insulating, VAT, or incellaneous) Tic	n,PA ontainmee inclosure bag Proc exemptec ACM) on, Name of GR	Amount (Specify SF or LF) 430 SF ARGINERAL ARGUMENT (Specify SF or LF) 430 SF	Removal X	Repair	pe	

Ut, 2968

	0.1500												
Date of Notification (1) MAY 10, 2013				f Building Ov EDDIE S	wner/Operator CHOOL	(2)			<8/3	Mar			
Agencies Notified	Type Notification		Street A		AIN STREE	Т			45,5		15	AM	
EPA DEP DOL	Initial Amended Amendment	t#		ite, Zip Code	e , NJ 08520				28/3 & L	CEL		*/	\
DOH DCA	Emergency justification) Cancellation			f Contact NEWMAI		Tele	phone Nu	mber	SIN	3	ÚĮ,		
			FACI	LITY INFOR	RMATION								
Name of Facility Where A FORMER RESIDE				Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12)									
Street Address 223 WARD STREE	T				Ot etc	her (i.e. pr c.)	rivate 8	commerc	al build			es,	
City (5) HIGHTSTOWN					Square 600 SI		# of 1	Floors		ldg. A 00 Y			
County (6) MERCER			Code (7) USE ONLY)			Use (Prio		ng demolis NCE	hed)				
Name of Monitoring Firm	Hired by Building	ASCN	I No.			ment Cont		(9) s Abaten	nent C	Corp	Inc		
N/A Street Address				Street	Address			- Abaton	ioni c				
Name of Monitoring Firm Hired by Building Owner (8) N/A Street Address City, State, Zip Code Project Manager for Monitoring Firm Start Date (10) MAY 20, 2013 Scheduled MAY 21						hompso State, Zip	on Stree	t					
	Level Control of the		-1-::		Wes	t Long (Branch,	NJ 07		l-			
roject Manager for Monitoring Firm tart Date (10) Scheduler			Telepho	ne No.	7.1	Telephone No. 732-222-8372			License No. 00040				
Schedule MAY 20, 2013 Occupancy Status During Abatement (Check Only Only)			Completion	Date (11)	Name	Name of OSHA Monitor							
Start Date (10) MAY 20, 2013		MAY 21,		,	NIA								
MAY 20, 2013	g Abatement (Che	MAY 21,				Address	acras		u. Zupa			17	
MAY 20, 2013 Occupancy Status Durin Facility Closed/Vac	ated During Entire	MAY 21, ck Only One) Period of Aba	2013		Street								
MAY 20, 2013 Occupancy Status Durin Facility Closed/Vac Abatement Perform Other – Describe:	ated During Entire ned Outside of Nor	MAY 21, ck Only One) Period of Aba	2013		Street	Address							
MAY 20, 2013 Occupancy Status Durin Facility Closed/Vac Abatement Perform	ated During Entire ned Outside of Nor	MAY 21, ck Only One) Period of Abamal Facility H	2013		Street	Address State, Zip Full C	Code Containme Enclosure ebag Proc	edure	Negative			e	
MAY 20, 2013 Occupancy Status Durin Facility Closed/Vac Abatement Perform Other – Describe: Scope of Work (Check A	ated During Entire ned Outside of Nor	MAY 21, ck Only One) Period of Aba mal Facility H	2013 atement ours		Street City, S	Address State, Zip Full C	Code Containme Enclosure ebag Proc	edure	Negative	ole Pro	cedure Abate	ement	t
MAY 20, 2013 Occupancy Status Durin Facility Closed/Vac Abatement Perform Other – Describe: Scope of Work (Check A	nated During Entire ned Outside of Norn All That Apply) n of Material (ACM) ATED lity	MAY 21, ck Only One) Period of Aba mal Facility H Ren Ren Den Is Lo Nor Used S Maint Custod	2013 atement ours	Asbesto (i.e. th	Street City, S	Address State, Zip Full (Mini- Glove Non- n of Material (s insulation) AT, or	Code Containme Enclosure ebag Proc Exempted	edure I (*) and A	Ecolor C SERVICE	ole Pro	cedure Abate	ement pe	
MAY 20, 2013 Occupancy Status Durin Facility Closed/Vac Abatement Perform Other – Describe: Scope of Work (Check A ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location Asbestos-Containing TO BE AB In Faci (13)	n of ATED	MAY 21, ck Only One) Period of Abamal Facility He Ren X Den Is Lo Nor Used S Maint Custod (atement ours novation molition ocation maily Solely by enance/ lial Staff? 12) No N/A	Asbesto (i.e. th	Description os Containing Mermal system surfacing, VA other miscellar	Full (Mini- Glove Non- n of Material (is insulation T, or neous)	Code Containme Enclosure ebag Proc Exempted ACM)	edure (*) and A (S SF	mount specify or LF)	Removal	cedure Abate Ty	ement	Enclosure
MAY 20, 2013 Occupancy Status Durin Facility Closed/Vac Abatement Perform Other – Describe: Scope of Work (Check A ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location Asbestos-Containing TO BE AB In Faci (13) KITCH	ated During Entire ned Outside of Norn All That Apply) n of g Material (ACM) ATED lity	MAY 21, ck Only One) Period of Abamal Facility He Ren X Den Is Lo Nor Used S Maint Custod (atement ours novation molition ocation maily Solely by enance/ ial Staff? 12) No N/A X	Asbesto (i.e. th	Description os Containing Mermal system surfacing, VA other miscellar	Full Control of Material (Assinsulation of Material (Assinsulation of Material) (Assin	Code Containme Enclosure ebag Proc Exempted ACM)	Al (S SF	mount Specify or LF)	Removal X	cedure Abate Ty	ement pe	
MAY 20, 2013 Occupancy Status Durin Facility Closed/Vac Abatement Perform Other – Describe: Scope of Work (Check A ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location Asbestos-Containing TO BE AB In Faci (13) KITCH BASEM	ated During Entire ned Outside of Norn Ill That Apply) In of Material (ACM) ATED lity ENT	MAY 21, ck Only One) Period of Abamal Facility He Ren X Den Is Lo Nor Used S Maint Custod (atement ours novation molition ocation maily Solely by enance/ lial Staff? 12) No N/A X X	Asbesto (i.e. th	Description os Containing Mermal system surfacing, VA other miscellar	Full Control of Material (Assinsulation of Material (Assinsulation of Material) (Assin	Code Containme Enclosure ebag Proc Exempted ACM)	Al (S SF	mount Specify or LF)	Removal X	cedure Abate Ty	ement pe	
MAY 20, 2013 Occupancy Status Durin Facility Closed/Vac Abatement Perform Other — Describe: Scope of Work (Check A ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location Asbestos-Containing TO BE AB In Faci (13) KITCH	ated During Entire ned Outside of Norn Ill That Apply) In of Material (ACM) ATED lity ENT	MAY 21, ck Only One) Period of Abamal Facility He Ren X Den Is Lo Nor Used S Maint Custod (atement ours novation molition ocation maily Solely by enance/ ial Staff? 12) No N/A X	Asbesto (i.e. th	Description os Containing Mermal system surfacing, VA other miscellar	Full Control of Material (Assinsulation of Material (Assinsulation of Material) (Assin	Code Containme Enclosure ebag Proc Exempted ACM)	Al (S SF	mount Specify or LF)	Removal X	cedure Abate Ty	ement pe	
MAY 20, 2013 Occupancy Status Durin Facility Closed/Vac Abatement Perform Other – Describe: Scope of Work (Check A ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location Asbestos-Containing TO BE AB In Faci (13) KITCH BASEM BASEM Name of Registered Wa Finishing Touch Ast City, State	ated During Entire ned Outside of Norn I That Apply) In of Material (ACM) ATED Iity ENT ENT ste Hauler	MAY 21, ck Only One) Period of Abamal Facility Horizontal Ren Is Lo Nor Used 3 Maint Custod Yes	atement ours novation molition ocation maily Solely by enance/ ial Staff? 12) No N/A X X NJDEP V	Asbesto (i.e. th	Description of Containing Mermal system surfacing, VA other miscellar TSI Cubic Yards of Waste 5 cy Disposal Date	Full (Mini-Glove Non-nof Material (Material (Mini-AT, or neous))	Code Containme Enclosure ebag Proc Exempted ACM) on, RING Name of F	Al (S SF	mount Specify or LF)	Removal X X	Repair	ement pe	
MAY 20, 2013 Occupancy Status Durin Facility Closed/Vac Abatement Perform Other – Describe: Scope of Work (Check A ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location Asbestos-Containing TO BE AB In Faci (13) KITCH BASEM BASEM Name of Registered Wa Finishing Touch Ast	n of Material (ACM) ATED lity ENT ENT ENT ste Hauler pestos Abateme	MAY 21, ck Only One) Period of Abamal Facility Horizontal Ren Is Lo Nor Used 3 Maint Custod Yes	atement ours atement ours avoid on molition avoid on maily Solely by enance/ ial Staff? No N/A X X NJDEP V Hauler ID 12058	Asbesto (i.e. th	Description os Containing Mermal system surfacing, VA other miscellar TSI Cubic Yards of Waste 5 cy	Full C Mini-Glove Non-n of Material (As insulation AT, or neous) FLOOP	Containme Enclosure ebag Proc Exempted ACM) ion, RING	Al (S SF	mount Specify for LF) 20 SF 3 SF 2 LF ared Landfill RTH LAN	Removal X X	Repair	ement pe	



				60 and 12:120	1	112							
Date of Notification (1) MAY 10, 2013			Name of Building Owner/Operator (2) THE PEDDIE SCHOOL Street Address										
Agencies Notified	Type Notification		Street Address 201 SOUTH MAIN STREET City, State, Zip Code HIGHTSTOWN, NJ 08520										
EPA DEP X DOL	Initial Amended Amendment #												
DOH	Emergency (in justification) Cancellation	cluding		f Contact NEWMAN	N	Telephone Number							
DCA	L Caricellation		FAC	ILITY INFOR	MATION								
Name of Facility Where A FORMER RESIDEN Street Address		Place (3)					of Facility (4 School (K-12 Subchapter 8 Other (i.e. pr		2) al buildi	ings, h	iome:	s,	
158 ETRA ROAD				XX	e	etc.) re Feet	# of Floors		dg. Ag		_		
City (5) HIGHTSTOWN						600	SF	2		00 YF	łS −		
County (6) MERCER			Code (7) USE ONLY)		FOR	MER RE	r if being demolis SIDENCE	ned)					
Name of Monitoring Firm	wner (8)	ASC	M No.	Name Fini	e of Aba	tement Cont Touch Ask	ractor (9) pestos Abaten	nent C	orp.,	Inc.			
N/A Street Address				Stree	t Addres	SS							
				1000		son Stree	t		-				
City, State, Zip Code							ip Code g Branch,	NJ 07764					
Project Manager for Mor		Telepho	one No.		phone No. License No. 00040								
Start Date (10)		Scheduled 0		Date (11)		ne of OSHA Monitor							
MAY 20, 2013 Occupancy Status Durin							eet Address						
Facility Closed/Vac Abatement Perform Other – Describe:	cated During Entire P ned Outside of Norm	eriod of Aba	tement		City,	State, Z	ip Code			_			
Scope of Work (Check /	All That Apply)		ovation nolition			× Mi	ill Containme ni-Enclosure ovebag Prod		Pressu				
≥160 sf or ≥260 lf						L. Gi	n-Exempted	cedure d (*) and Non-Fria	ble Pro	cedur	9	t	
≥160 st or ≥260 if			cation	T		L. Gi	on-Exempted	cedure d (*) and Non-Fria	ble Pro	Abate	ement	50	
Locatic Asbestos-Containin TO BE Al In Fac (13	g Material (ACM) BATED cility	Is Lo Nor Used S Mainte Custod	cation mally Solely by enance/ ial Staff?	Asbesto (i.e. t	Description Containing thermal system surfacing, Nother miscel	on of Materia ms insul	al (ACM)	Amount (Specify SF or LF)	Removal		ement pe	Γ	
Locatic Asbestos-Containin <u>TO BE At</u> In Fac	g Material (ACM) BATED cility	Is Lo Nor Used S Mainte Custod	mally Solely by enance/ ial Staff? 12) No N/A	(i.e. t	Description Containing thermal system surfacing, Vother miscel	on of Materia ms insul /AT, or laneous)	al (ACM) lation,	Amount (Specify SF or LF)	Removal	Abate Ty	ement		
Locatic Asbestos-Containin <u>TO BE At</u> In Fac	g Material (ACM) BATED illity)	Is Lo Nor Used S Mainte Custod	mally Solely by enance/ ial Staff? 12) No N/A	(i.e. t	Description Containing thermal system surfacing, Vother miscel	on of Materia ms insul /AT, or laneous	on-Exempter al (ACM) lation,	Amount (Specify SF or LF)	Removal	Abate Ty	ement pe	Γ	
Locatic Asbestos-Containin TO BE AF In Fac (13 KITCH	g Material (ACM) BATED illity) HEN RTH BEDROOM	Is Lo Nor Used S Mainte Custod	mally Solely by enance/ ial Staff? 12) No N/A X	AC SH	Description Containing thermal system surfacing, other miscel IEET VINY	on of Materia ms insul/AT, or laneous	on-Exempted at (ACM) lation, ORING	Amount (Specify SF or LF)	Removal X	Abate Ty	ement pe		
Locatic Asbestos-Containin TO BE Al In Fac (13	g Material (ACM) BATED illity) HEN RTH BEDROOM	Is Lo Nor Used S Mainte Custod	mally Solely by enance/ ial Staff? 12) No N/A	AC SH	Description Containing thermal system surfacing, Vother miscel	on of Materia ms insul/AT, or laneous	on-Exempted at (ACM) lation, ORING	Amount (Specify SF or LF)	Removal	Abate Ty	ement pe	Γ	
Locatic Asbestos-Containin TO BE AF In Fac (13 KITCH 2ND FLOOR NOF 2ND FLOOR SOL Name of Registered W Finishing Touch As	g Material (ACM) BATED illity) HEN RTH BEDROOM JTH BEDROOM aste Hauler	Is Lo Nor Used S Mainte Custod (** Yes !	mally Solely by enance/ ial Staff? 12) No N/A X X NJDEP Hauler	AC SH AC SH AC SH	Description Containing thermal system surfacing, Nother miscel SEET VINY SEET VINY SEET VINY Cubic Yards of Waste 7 cy	on of Materia ms insult/AT, or laneous)	ORING ORING ORING ORING ORING ORING	Amount (Specify SF or LF) 200 SF 130 SF 80 SF Registered Land	Removal X X X	Repair	ement pe	Γ	
Locatic Asbestos-Containin TO BE AF In Fac (13 KITCH 2ND FLOOR NOF 2ND FLOOR SOL Name of Registered W	g Material (ACM) BATED illity) HEN RTH BEDROOM JTH BEDROOM aste Hauler	Is Lo Nor Used S Mainte Custod (** Yes !	mally Solely by enance/ ial Staff? 12) No N/A X X NJDEP Hauler	AC SH AC SH AC SH	Description Containing thermal system surfacing, Vother miscel SEET VINY SEET VINY SEET VINY SEET VINY Cubic Yards of Waste	on of Materia ms insult/AT, or laneous)	ORING	Amount (Specify SF or LF) 200 SF 130 SF 80 SF Registered Land	Removal X X X	Repair	ement pe	Enclosure	



Date of Notification (1) 5 / 9 / 13					Schimenti Construction Street Address										
Agencies Notified EPA	fied	I DECEMBER	t Address O Danbur	y Road			11-2:1	C							
□ DOLWD				City, State, Zip Code Ridgefield Connecticut 06877											
☑ DHSS		- 1868		Ridgefield Connecticut 06877											
☐ DCA			ng	-	e of Contac			Telephone Num							
(NJAC 5:23-8)	120 00000				dd Wisha			, copilorio riun	7						
	Cancellatio)[]						:	7						
N. CE 111 141	A	Line Die	- (2)	FA	CILITYIN	IFORMATION	Type of Facility	(4)			-				
				aza			School (K-12	?) 8 (Other than K-1;	2)	م مذاما:					
	d Center Roa	d					homes, etc.)	rivate and comme	erciai bu	liulity	5,				
City (5)							Square Feet	# of Floors	Blo	lg. Ag	je				
Deptford							60,000	2		50					
County (6)		-		Cou	nty Code (7)(STATE USE ONLY)		ior if being demol	ished)						
Gloucester County	,				inty code (///	Theater and								
		ing Owne	r (8)	ASCN	1 No	Name of Abateme	ent Contractor (9)								
100000000000000000000000000000000000000	Trined by Buildi	ing Owne	. (0)	000		Luzon Inc.	, ,								
ATC Associates Street Address 3 Terri Lane						Street Address	<u> </u>								
						8451 Executi	ve Ave.								
City, State, Zip Code															
	116					City, State, Zip Code Philadelphia , Pa. 19153									
			Te	enhone	No.	Telephone No. License No.									
Michael Keehn	illoring i iiii		1		6-9900	267-284-1050)	01109							
Start Date (10)	- le	chadulad				Name of OSHA N			-						
	1			5.5											
						Street Address	-					- 30			
[] [] [] [] [] [] [] [] [] []	. T														
						Philadelphia									
Scope of Work (Check a	all that apply)		***			□ Eull Con	tainment with Ne	gative Pressure							
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			Renova Demoli												
			Is Loc	ation		Z Non-Exc	inploa () and its	l laste i i con		atem	ent T	vpe			
Location of Non Ashestos-Containing Material (ACM) Used S				ally lely by ance/ I Staff?	(i.e	Description of estos Containing Ma e., thermal systems surfacing, VAT other miscelland	of Amount Specify T, or SF or LF)			Repair	Encapsulate	Enclosure			
Yes			-	_					57						
Movie Theater					Roofin	g Material		20,000 SF							
Movie Theater Proje	ection Area			\boxtimes	Floor	Tile and Mastic		3,400 SF		ᆜ	Ц				
Strip Mall				\boxtimes	Windo	w Caulking & Gl	azing	675		Ш	Ш				
Name of Registered Wa	iste Hauler				Waste	Cubic Yards of	Name of Regi	stered Landfill							
Waste Managemen	nt			Hauler 2099	ID No.	Waste 40 CYS.	Minerva L	andfill							
City, State				209	70	Disposal Date	City, State								
Tullytown Pa.						7-31-13	Tullytown	Pa.							
Completed By (Print or	Tyne)	Title				Signature		4 1	Date	1	1004 I				
Piyush Patel	1,100)		ram N	lanage	er	Piqu	ih ra	tel	5 9	11	3				

ASB-41 MAY 11 * Do not use this form for asbestos licensure exempted activities.

973-389-1189
State of New Jorksy
NOTIFICATION OF ASBESTOS ABA

	2 00002/00	004
DOL -	10 DAY	7
6,		Į

F Size of Nice of							AC 8:50 and 12:	1 4	MA	Ye,	, 201	3		
Date of Notification (1)	05/06/2013 encies Notified Type Notification						nqida dariqi obsis	IDT (2 M 2	40	MA	HH)		╂-	_
		-6:411			_				-	DADI	2R0		ī	
□ EPA	[] Initial		on			TOOL Adde			HAIVE	171	KU	VE.) -	=
DEP	Ame	ndeg					lish Avenue	1 60 15 18	(file		. 9			~
	Amor	admen	#	-	1	lly, Sinte, 1 Varrino 14	NJ 07090	EMB/HGI	- 1	100			-	-
DOH	Emo:	gestion (Souch	(mciu	ding		nme of Cor								
- DCA	L Cano	zellation	ĺ		173	ame of Col	Bayern (Owne		17	ньььоле	Numbe		_	-
		-		-				re Kep)						
Name of Facility Where Residence	Abatement	l IS Tak	ing Pla	206 (3)	FACILITY	INFORMATION	Type of Fa	ciliby (4)					_
Street Address								School	1000					
725 Standish Avenu	_							Subche	O) 8 rera	her than I	K-1 2)			
City (S)								Other (e., privat	c & comm	ercial b	ultar	gs.	
Westfield, NJ 07090	,							Square Fe	et e	of Flagra		Dida	_	_
ounty (b)								1,500 SF		011 11014		60+	. Ag	¢
Union					C	ountly Cod	6 (7) (STATE	Current Us	e (Prior if	being der	nolisho	d)		=
	Him C.	tanket-	==	_	=	SE ONLY)		Residence	•	_				
ome of Monitoring Firm Hired by Building Owner N/A					ASC	M No.	Name of Abata	mont Contract	or (8)			_	_	=
treet Address					1	-	DIA Genen		tion, Inc	2				
)							Street Address					_		=
City State Zip Code				-			1360 Clifton	Avenue 1	MB Su	ite 218				
					730		City, State Zip Clifton, NJ	Code				-		=
lojaat Manager for Won	toring Firm	1		7	elephor	NO BLE		VIVIZ				_		_
		No.		1	#16h110l	∞ NO.	973-389-00	100	1	cense No.		_		-
itari Data (10)		School	duled	Corre	piction i	Data (11)	Name of QSHA			00693				_
05/07/2013		05/	08/20	113		- mu (11)	DIA Genera		!_	and the second				
ecupancy Status During	Abetemen	f (Che	sic only	r orin)		Street Address	- Struct	wn. Inc			_		-
Facility Closed/Vacato	d During Er	ntire ko	flori n	FAhn	******		1360 Clifton	Avenue	MP Q.	10 340		- 3		-
Abetement Porformed Other - Describe.	Outside of I	Normal	Facil	A HO	Mie		City State. Zip C		-ein Ou	10 210	==		=	=
							Clifton, NJ 0							
cope of Work (Chock all	that apply)				-		<u> </u>				_	_		
] > 3 mf or > 3 lf				cnava	etian.		Fyll Co	ntainment with	Negative	Pressure				
>160 of or >260 if			N O	emo	lition			Inclosure bag Procedure						
· 						T	Non-E	compted (*) or	d Non-Fr	inble Pro	pedure			
			N	ormal Locat	JA.							Abata	men	11
Lacinion of Special Education (Page 18)	torial /Action	, 1	Vand	Sale	ely by		Description of	İ		Amount		Туг		
TO BE AHATE		"		rtoni: rstudi		Asbes	tos Containing Mate thermal systems in	onal (ACM)					m	1
IN Facility				leff?		"-	Juriading VAT,	OF		or LF)	2	لذ	Ence	
7.07		-	-	(12)	, -	4	other miscellaneo	rtg)			lavom #5	Repair	capautate	
			Yes	No	N/A				İ		8	1	E E	
Floor & Garage					х	Paper I	Duct Insulation		2 SF		+ -	-	-	
terior - Waste Conta	mer				×		os Debris				X	_	<u></u>	
		-			-	1.30080	20 DON 128		4 Bag	Zz	X	L.		
					-	-			-					
me of Registered Wasto	Houter		-	-	1JOEP 1	Abrella 1	n.x.E.V.	197						1
rvice Transport Gro							Cubio Yards of Wasto	Name of Re		andfill			_	4
, State	<u> </u>				20970			Minerva I	andfill					
t) SMIT						T	Disposal Date	City, State	-				-	=
New Castle, DE							05/08/2013	Waynesb	TE OII	44688				
	******		Tillo							A CONTRACTOR OF THE PARTY OF TH	100000000000000000000000000000000000000			
ew Castle, DE mpleted By uterth Jagad		Title Presi		_			Signaturo	1		Dafe		_		=