CV 1250-	2 5	State of N	lew Je	ersey - Notif	ication of Asbestos <u>C</u> . 8:60-7 and 12:120-7	Abater	nent =			Early and a second
GAC Project # 060-19	PA	III	(Pur	suant to N.J.A.	<u>C</u> . 8:60-7 and 12:120-7	)	n)_[	G	<u> </u>	
Date of Notification (1)	10, //	A A A F			Name of Building Owne	er/Operator	[2]			
Agencies Notified	3, 2019	Notificatio	n Tuna		RUTGERS, THE	STATE L	NIVER	SITYOF	NJ 20	
		Initial I		ation	Street Address ENVIRONMENTA					Laborator.
□ EPA □ DCA		□Amend			74 STREET 1603,	BLDG 4	116, 11	VINGST	ON CA	PUS
☑ DOL				(including	City, State, Zip Code	4	210		NSING	<del>/L di</del>
DEP- No Longer REQUI	RED	Cance	cation	)	PISCATAWAY, N. Name of Contact	08854	Tol	ephone Nu	ımhor	Buttle prije in territorion on the
<b>⊠</b> DOH			ilica		MICHAEL F. SMIT	H, ENV.	2000	8-445-25	100 mm 1 mm 2000	
				EACH ITY IN	HEALTH & SAFET	ſΥ				
Name of Facility Where Abater					Type of Facility (4)		- India			
SCHOOL OF DENTAL	. MEDIC	INE, BLD	G# 72	53	School (K-12)					
Street Address					Subchapter 8 (other the Subchapter 8) Other (i.e. private & c	an K-12)	uildinas l	h t -		
RBHS NEWARK CAM	PUS				Sq. Feet: N/A	# of Floor	s: 4 Blo	nomes, etc dg. Age:	60+ yea	s
City (5) NEWARK	County (6			y Code (7)					1227	
NEWARK	ES	SEX	State	Use Only)	Current Use (prior if being	ng demons	iedj: AC	SADEMIC		
Name of Monitoring Firm Hired	by Bldg. C	Owner (8)	ASCM	No.	Name of Contractor (9)					
ATC			0009							
Street Address					Street Address	TEMENT	CONS	ULTANT	S, INC.	
3 TERRI LANE										
City, State, Zip Code					511 MAIN STREET  City State, ZipCode					1
BURLINGTON, NJ	08016				BUTLER, NJ 07405					
Project Manager for Monitoring BRIAN R. KEARNEY	Firm	Telephone 609-386			Telephone Number		Licer	nse Numbe	er .	
		P. M. S. P. College Co			973-492-0477		008	40		
Scheduled Start Date (10) 05.24/2019			3/2019	on Date (11)	Name of OSHA Monitor ENVIROVISION, IN	C				
Occupancy Status During Ab	atement (0	Check only o	ne)		Street Address	20010				-
□ Facility Closed/Vacated Du □ Abatement Performed Outs	uring Entire	e Period of A	batemer	nt	20-21 WARGARAW	ROAD, I	BLDG#	35E		
Describe:		12.			City, State, Zip Code	20042				
☑ Other- Describe: Schedul     WEEKENDS AS NEEDEL	le: 5PM -	- 5AM (24 H	IOURS	&	FAIRLAWN, NJ 074	10				
WEEKENDS AS NEEDEL	)									
Scope of Work (Check all that a										_
Scope of Work (Check all that a	appiy)				1	Full Conta	inment w	with Negati	ive Proce	0
□≥ 3 sf or >3 lf			1	Renovation		Mini-Enc		viui rvegau	VC   1635	C
X ≥ 160 sf or ≥ 2	60 If			☐ Demolition		Glove ba				
Location of Asbestos-Containing	g Is Loc	cation Normal	ly Used	Description of As	bestos Containing Material	Non-Exe	mpted (*) ount		Friable Pent Type	cedure
Material (ACM) in Facility (13)	Solely Staff?	/ by Maint./Cι (12)	istodial	(ACM) (i.e. them VAT, or other mis	nal systems insulation, surfact	ing, (Sp	ecify SF			ip Enclose
	YES	NO	NA	V///, or other fine	iceii.)	or L	r)	1.0111040	rtopun Li	ip Endose
D-LEVEL 721 SUITE		X		VAT		52	200 SF	X	Т	
Name of Reg. Waste Hauler		NJDEP Was	te Haule	ID#		22.01/	LNI	1	Щ.	
See Hauler Below #1 & 2		See Below		10 #	Cubic Yards of Waste:	80 CY		of Register. O.W.S. N		
Hauler #1) Greenwood Abaten NJDEP # 12561	nent Consu	Itants, Inc	Butler,	NJ 07405		Disposal	Date		city, State	V040-20-200
Hauler #2) Newark Carting, In	ic., Newark	k, NJ 04509				06/02	2040	100.0	00 New F	
NJ DEP # 4509						06/03/	2019	1	9067 15-736-17	1000M C 100
Completed by (Print or Type)		tle	4.5-3-3-3-3-3-3-3-3-3-3-3-3-3-3-3-3-3-3-3		Signature		Date		.5-150-17	*
RAYMOND C. PEDALII		ENIOR PI		T	Raymond C. Pe	daling		13, 201	9	
	M	IANAGER			- ayrana o. o e	weekene.				

( 1) 12KAI	$\circ$ S	tate of N			ication of Asbestos		ent	-		EUGD-0-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-
GAC Project # 060-19	P	AM	(Purs	suant to N.J.A.C	C. 8:60-7 and 12:120-7)	)  [	n E	C		EM
Date of Notification (1)		A H H H W			Name of Building Owne	r/Operator (	20	he high the Proper Security Proper	AND DESCRIPTION OF THE PERSON	111
May 13	, 2019				RUTGERS, THE S	STATE U	VIVERS	SITY O	F NJ	Anna Property of the Park of t
Agencies Notified		Notification		7-	Street Address	61		MAT	1 / 70	)
□ EPA		⊠Initial			ENVIRONMENTAL	- HEALT	1 & SA	FETY	DEPT. (	EHS)
□ DCA		A STATE OF THE PARTY OF THE PAR		ification # (including	74 STREET 1603,	BLDG 41	16, 11	INGS	S CONT	PUS
X DOL			cation)		City, State, Zip Code PISCATAWAY, NJ	08854	MO		ENSING	JL Q
DEP- No Longer REQUIR	RED	Cance		<b>.</b>	Name of Contact	00004	Tele	phone N	lumber	Bhalledon/sales/es-
<b>⊠</b> DOH		-041100	iiou		MICHAEL F. SMIT	H, ENV.	310100000000	-445-2	SCHOOL STATES	
					HEALTH & SAFET	Υ				
Name of Facility Where Abatem	nent is Tak	ring Place (2)		FACILITY IN	FORMATION					
ENVIRONMENTAL SC	IENCES	S BLDG. F	RI DG#	6279	Type of Facility (4)  School (K-12)					
		<i>D D D D D D D D D D</i>	J	02/0	Subchapter 8 (other that	an K-12)				
Street Address					Other (i.e. private & co		ildinas. h	omes et	c.)	
COOK CAMPUS						# of Floors				s
	County (6)	and the second second second second		/ Code (7)		****************************				
NEW BRUNSWICK	MIDD	LESEX	(State	Use Only)	Current Use (prior if beir	ng demolish	ed): AC	ADEMIC	;	
Name of Monitoring Firm Hired ATC	by Bldg. O	Owner (8)	ASCM		Name of Contractor (9)					
AIC			0009	98	GREENWOOD ABA	TEMENT	CONSI	II TAN	TS INC	
Street Address					Street Address	ILIVILIVI	CONS	JETAN	13, 1140.	-
3 TERRI LANE					544 114 114 0=====					
Cit. Ct					511 MAIN STREET					
City, State, Zip Code BURLINGTON, NJ (	08016				City State, ZipCode					
Project Manager for Monitoring		Telephone I	Vumber		BUTLER, NJ 07405 Telephone Number		Linon	ise Numb		3
BRIAN R. KEARNEY		609-386			Telephone Number		Licen	ise Numb	<u>er</u>	
Scheduled Start Date (10)		0.1.1.1.1			973-492-0477		0084	40		
05/24/2019		05/28		on Date (11)	Name of OSHA Monitor ENVIROVISION, IN	_				
Occupancy Status During Aba	atement (C				Street Address	U.				
☐Facility Closed/Vacated Du	ring Entire	Period of A	batemer	nt	20-21 WARGARAW	ROAD, B	LDG# :	35E		
☐Abatement Performed Outs					N 2024-200					
Describe:	CD14	FARE (0.4.)			City, State, Zip Code FAIRLAWN, NJ 074	10				
☑ Other- Describe: Schedule WEEKENDS AS NEEDED	e: 5PM -	- 5AM (24 F	IOURS	&	FAIRLAVIN, NJ 0/4	10				
WEEKENDS AS NEEDED	')									
Scope of Work (Check all that a	pply)									1.
<b>⊠</b> ≥ 3 sf or >3 lf				IDI		Full Conta		ith Nega	tive Press	ъ.
□≥ 160 sf or ≥ 260	n If			Renovation Demolition		Mini-Encl				
<u> </u>	0.11		2	□ Demoillion		I Glove bag ☑Non-Exer				and the
Location of Asbestos-Containing	ls Loc	ation Normal	ly Used	Description of Asl	bestos Containing Material	Amo			nent Type	cedure
Material (ACM) in Facility (13)	C2.073.071.070	/ by Maint./Cu	stodial	(ACM) (i.e. therm	nal systems insulation, surfac	ing, (Spe	cify SF			sa Caelese
	Staff?		NA	VAT, or other mis	ceii.)	or LF	-)	Kemove	Repair Er	ap Enclose
101A	+	X	20,000	VAT		40	0.05	Text		
DE PROPERTIE DE LA CONTRACTOR DE LA CONT	-	121		VAI		12	0 SF	X	+	
	+								+	_
Name of Reg. Waste Hauler		NJDEP Was	te Haule	r ID #	Cubia Varda af Mark	E CV	Name	of Pogis	tered Land	
See Hauler Below #1 & 2		See Below		<del></del>	Cubic Yards of Waste:	5 CY			North La	
Hauler #1) Greenwood Abatem	ent Consu	ltants, Inc	Butler, N	NJ 07405	L.	Disposal D	ate	- 1	City, State	
NJDEP # 12561							0110		100 New F	No. of the Control of
Hauler #2) Newark Carting, Inc NJ DEP # 4509	c., Newark	i, NJ 04509				05/28/	2019		Rd. Morris 19067	Ile, Pa
1.0 DD1 # 4003									215-736-17	0
Completed by (Print or Type)	-	<u>tle</u>			Signature		Date			
RAYMOND C. PEDALIN	A 150	ENIOR P		T	Raymond C. Pe	dalina		13, 20	19	
We will be a second of the sec	M	IANAGER			- cagmona O. 9 e	umm				

	V 1201	PA			CATION	ate of New I OF ASB to NJAC	ESTOS A	ABATE		T	R	E C	; E		$\overline{\mathbb{W}}$	E	And the second s
100000000000000000000000000000000000000	of Notification (1)			Т	Name o	f Building	Owner/O	perator	(2)			M/	Y 1	7	201	-	
	-13-2019					Properti	es			1000	-						and the second
Age	ncies Notified	Type Notification			Street A					the state of the s	-	ASBES	STOS	CO	NTA	16	
×	EPA	Initial Amended				Morris A					and the second of the	Company Systems (T) 25	LICE	NSII	VCa	ومسا فدينتني	
×	DEP DOL	Amended Amendment	#			ate, Zip Co NJ 070											
100000000000000000000000000000000000000		Emergency (		_  -	1850111191111	f Contact					Tal	ephone	Numb	or		_	
×	DOH DCA	justification) Cancellation				oud Adl	V					epriorie 18-868					
			200		FACI	LITY INFO	ORMATIC	ON									
	ne of Facility Where A mmercial Proper		Place (3	3)					Тур	e of Facility (	(4)						
	et Address	ues							H	School (K-1 Subchapter		or than	V 12)				
170470171	4 Hillside Ave								×	Other (i.e. p				build	lings	nome	es,
City					1000000				Sau	etc.) lare Feet	1#0	f Floors		BI	ldg. /	ie.	
17/20/2017/04	side NJ 07205								N/A		N/				I/A	,-	
1212	nty (6)					Code (7)				rent Use (Pri		-	olishe	d)		-	
Un						USE ONLY)				mmercial		- T					
l .	e of Monitoring Firm	Hired by Building C	wner (8)		ASCN	ΛNo.				patement Cor		(9)				(Notes)	
	et Address			-301-001-0						ontracting	LLC					_	
0.757.0.75	30 W Chestnut S	t#1224						Street PO E									
	State, Zip Code									Zip Code			-110-5711				-
	ion NJ 07083							A 14-78-0		d Park NJ	0742	4					
	ect Manager for Moni	itoring Firm			Telepho	ne No.		Teleph	one	No.		Licens	se No.	3	-		$\neg$
	k Eustaquio				SULLINGS OF SUL	94-3762		15.00.00		-6298		0126	6				
100000000000000000000000000000000000000	Date (10) 2/2019		Schedule 08/22/2		pletion	Date (11)				SHA Monitor					0	SA.	
	upancy Status During	Abatement (Check						Street		ontracting I	LLC					_	_
×	Facility Closed/Vaca		ALCOHOLOGIC SANCTON		ant			PO E									
	Abatement Performe	ed Outside of Norm	al Facility	Hours	ieni		ŀ			Zip Code					_		-
Ц	Other - Describe: _						-	Woo	dlar	nd PaRK n	0742	4					
Scop	e of Work (Check Al	I That Apply)							_					-01/-0			
×	≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		participation of the last of t	Renova Demolit				××××	M G	ull Containmo lini-Enclosure llovebag Prod on-Exempted	e cedure	-					
			/ /	Locati											Abat	nent	
	Location			lormal d Sole				cription		The Control of Control			F	_	<u></u>	e	-
А	Asbestos-Containing TO BE ABA		Ma	intenar	nce/		tos Conta thermal :			al (ACM)		mount Specify		70	_	Enc	ш
	In Facili		Cust	odial 8 (12)	staff?		surfac	ing, VA	T, or	70		or LF)		Remova	Repair	aps	Enclosure
	(13)		L. 1	- 10 0	T		other m	iisceiian	eous	6)				val	¥.	Encapsulate	sure
		V II 22	Yes	No	N/A												
Base	ement & 2nd floo	or hallway office			X			VAT				86 SF	_	X			
	Roof				Х	Roo	of Mate	erial &	Flas	shing	53	10 SF	- 1	х			
1	st Floor & 2nd F	loor Hallway			Х	(	Grey/W	hate F	Plast	er	50	40 SF	:	x			
	Basement Cra				x		ebris/p		sulat	tion	20	00 SF		x			
	e of Registered Was			9233	JDEP W auler ID	77.7	Cubic \ of Was			Name of	Registe	red Lan	dfill				
Ama	ax Contracting LL	_C			036184		90 CY			Fairless	s Hills						
	State odland Park NJ 0	7424					Disposa 08/30/	al Date		City, State		Δ					
, area and	pleted by		Title					gnature	8	IVIOITISV			Date				
	ie MAslarkov		1 200	ct Ma	ınager			1	$\sim$						2019		

Name of Registered Waste Hauler Spes Contracting LLC  Name of Registered Landfill Fearless Landfill Signature  Name of Registered Landfill Fearless Landfill Signature  Disposal Date TBD  Name of Registered Landfill Fearless Landfill Disposal Date Morrisville, PA												Pr	it Fo	orm
also of Notification (1) 5.51 4 2019  BEPA   Initial Ammended   Initial Initial Ammended   Initial Initial Ammended   Initial In	1/11/0/	PAID	NOTIF (P	ursua	ON OF ant to N	ASBESTOS IJAC 8:60 at	8 ABATEN nd 12:120)	)		The second of th				Will promise the comment of the comm
gencies Notified    Speak							/Operator	(2)		MAY	/ 2019	)		1
Initial DEP   Amended	ALTERNATION AND ADDRESS OF THE ALTERNATION ADDRESS OF THE ALTE	Type Notification		Stree	et Addre	ess			Bellouis and all and	ASBESTOS	CINC	3 JC		nddia ye c
3 DOL	EPA DEP	Amended		City,	State, a	Zip Code	78				OIIYU	na este es person	· p	
Scheduled Completion Date (11)   Scheduled Completion Date (11)   Start Date (13)   Start Date (14)   Start Date (15)   Start Date (16)   Start Date (17)   Start Date (18)   Start Date (19)	DOL	Emergency (inc	uding	Nam	ne of Co	ntact			Т	Telephone Num	ber			
Jame of Facility Where Abstement is Taxong Prizote (S) Private Residence    School (K-12)   S	DCA						TION	T of F	a ciliby (4)				_	-
Size Address	Name of Facility Where	Abatement is Taking P	lace (3)					☐ Scho	ool (K-12)					
Square Feet   def Floors   1933   1								Sub Sub	chapter 8 er (i.e. priv	(Other than K-12	) ıl buildinç	gs, ho	es,	
Short Hills  County (S)  Essex County  Name of Monitoring Firm Hired by Building Owner (8)  NA  Street Address  Street Address	City (5)							Square F			111111111111111111111111111111111111111			
Sees County  Name of Monitoring Firm Hired by Building Owner (8)  NA  Street Address  Street Address  164 Meriline Unit C  City, State, Zip Code  Woodland Park, NJ 07424  Froject Manager for Monitoring Firm  Telephone No.  17elephone No.	Short Hills			Cou	unty Co	de (7)		Current U		if being demolish	ed)		-	
Street Address  City, State, Zip Code  City, State, Zip Code  Woodland Park, NJ 07424  Project Manager for Monitoring Firm  Telephone No. 973-807-6330  Start Date (10) 05.23.2019  Cocupancy Status During Abatement (Check Only One)  Staglity Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours  Other – Describe:  Scope of Work (Check All That Apply)  Saf or 23 lf 23 of or 23 lf 1 Sealous Containing Material (ACM) TO BE ABATED In Facility (13)  Basement - throughout  Name of Registered Waste Hauler Spes Contracting LLC  Street Address 164 Meriline Unit C City, State, Zip Code Woodland Park, NJ 07424  Full Containment with Negative Pressure Minn-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Abateman Performed Containing Material (ACM) (i.e. thermal systems insulation, Surfacing, VAT, or other miscellaneous)  Name of Registered Waste Hauler Spes Contracting LLC  Name of Registered Waste Hauler Spes Contracting LLC  Name of Registered Waste Hauler Spes Contracting LLC  Name of Registered Landfill Fearless La	Essex County	m Hired by Building Ov	vner (8)				Name	e of Abatem	nent Contr	ractor (9)			-	
City, State, Zip Code    City, State, Zip Code   Woodland Park, NJ 07424	N/A	:M:///////					Stree	t Address	DOMESTIC AND THE PROPERTY OF T				-	
Telephone No.   Telephone N	Street Address												-	-
Telephone No.   Separation	City, State, Zip Code						Wo	odland P	ark, NJ		lo.		) <u></u>	
Start Date (10) 05.23.2019 05.24.2019 Spes Contracting LLC  Spes Contracting LLC  Spes Contracting LLC  Spes Contracting LLC  Street Address 164 Meriline Ave Unit C  City, State  Normally Used Solely by Maintenance/ Custodial Staff?  (13)  Spes Contracting LLC  Specify Specify  Specify Specif	Project Manager for M	onitoring Firm		Те	lephone	e No.	973	8-807-633			10.			
Street Address 164 Merilline Ave Unit C    Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other – Describe:   Scope of Work (Check All That Apply)					etion Da	ate (11)	Spe	es Contra	acting LL	_C			-	
Abatement Performed Outside of Normal Pacility   Notice      Other - Describe:	Occupancy Status Dur	ring Abatement (Check	Only One)			4	Stree	et Address 4 Meriline	e Ave Ur	nit C				
Scope of Work (Check All That Apply)    Scope of Work (Check All That Apply)   Scope of Work (Check All That Apply)   Scope of Work (Check All That Apply)   Scope of Work (Check All That Apply)   Scope of Work (Check All That Apply)   Scope of Work (Check All That Apply)   Scope of Work (Check All That Apply)   Scope of Work (Check All That Apply)   Scope of Work (Check All That Apply)   Scope of Work (Check All That Apply)   Scope of Work (Check All That Apply)   Scope of Work (Check All That Apply)   Scope of Work (Check All That Apply)   Scope of Work (Check All That Apply)   Scope of Work (Check All That Apply)   Minimal Procedure	Abatement Perfo	rmed Outside of North	eriod of Aba al Facility Ho	itemei ours	nt		City,	, State, Zip oodland F	Code Park, NJ	07424				
Secretarion of Asbestos-Containing Material (ACM)   Used Solely by Maintenance/ Custodial Staff?   (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)   TOBE ABATED In Facility (13)   Yes No N/A   TSI - pipes and fittings   TSI - pipes and	Scope of Work (Check	k All That Apply)						Mini-	Enclosure	e redure	able Proc	edure		
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)  Yes No N/A  Basement - throughout  NJDEP Waste Hauler ID No. 0038075  Name of Registered Waste Hauler Spes Contracting LLC  City, State Woodland Park, NJ 07424  Used Solely by Maintenance/ Custodial Staff? (12)  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing insulation, surfacing insulation, surfa							V6 8							
Basement - throughout  X TSI - pipes and fittings  160LF X  NJDEP Waste Hauler Spes Contracting LLC  City, State Woodland Park, NJ 07424  X TSI - pipes and fittings  160LF X  Cubic Yards of Waste Hauler ID No. 0038075  Disposal Date TBD  Date	Asbestos-Contain TO BE In F	ning Material (ACM) ABATED Facility	Used Maint Custoo	Solely tenandial St	by ce/	(i.e. the	Containin ermal syste surfacing.	g Material ( ems insulat VAT, or	(ACM) lion,	(Specify	Removal	Repair	Encapsulate	Enclosure
Name of Registered Waste Hauler Spes Contracting LLC  City, State Woodland Park, NJ 07424  NJDEP Waste Hauler ID No. 0038075  Disposal Date TBD  Name of Registered Landfill Fearless Landfill City, State Morrisville, PA		thanabout	Yes	No		TSI	- pipes a	and fitting	gs	160LF	X			
Name of Registered Waste Hauler Spes Contracting LLC  City, State Woodland Park, NJ 07424  NJDEF Waste Hauler ID No. 0038075  Disposal Date TBD  City, State Morrisville, PA  Date	Basement	- (nroughout			, ,								_	
Name of Registered Waste Hauler Spes Contracting LLC  City, State Woodland Park, NJ 07424  NJDEF Waste Hauler ID No. 0038075  Disposal Date TBD  City, State  Morrisville, PA  Date												-	-	
City, State Woodland Park, NJ 07424  Disposal Date TBD  City, State Morrisville, PA  Date	BANK MARKATAN KANE			H	auler ID	) No.	of Waste 1.5		Fearle	ss Landfill	dfill '			
Cignature	City, State	N.I 07424				100		Date	Morris	sville, PA				
Completed by Branislav Pavlov  Title project manager  05.14.2019	Completed by		Title	ct ma	anager	-	Sign	ature	6			.201!	_	

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Date of Notification (1)  Name of Rotification (2)  Street Address    Initial   Dob	025463116383	AIID		ICATIO	N OF ASBEST t to NJAC 8:60	OS ABATE		Locations	m	E C			$\mathbb{V}$		
Agencies Notified   Type Notification   Type	Date of Notification (1)					er/Operator	r (2)		KI	PARTY CONTROL OF THE PARTY CON	undirection of	on the same of the	riginalisa alikuwa di Para	escipo.	
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Anne Caprio   Facility Where Abatement is Taking Place (3)   FACILITY INFORMATION   Type of Facility (4)   School (K-12)	Emerge	ncy (including	-							- No. Tourst.	LIC	ENS	ING	Mile-in	ed-e
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School (K-12) Subchapter 8 (Other than K-12) Other (ic. private & commercial buildings. privat		aking Place (3)	)				Type of	f Facility	(4)						
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Number	City (5)						et	c.)						1000000	,
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ASCM No.   Name of Monitoring Firm Hired by Building Owner (8)   ASCM No.   Name of Registered Landfill Fairless Abatement, Inc.			Т	County	Code (7)			Use (Pr	1.05,000		olishe	1		_	
Street Address  Street Address  11 Rosengren Avenue  City, State, Zip Code  Totowa, NJ 07512  Froject Manager for Monitoring Firm  Telephone No.  12 Felphone No.  13 Felphone No.  14 Felphone No.  15 Felphone No.  15 Felphone No.  16 Felphone No.  17 Felphone No.  17 Felphone No.  17 Felphone No.  18 Fell Containment (Check Control of Abatement Abatement Performed Outside of Normal Facility Hours  19 Fell Containment with Negative Pressure  11 Rosengren Avenue  City, State, Zip Code  Totowa, NJ 07512  Telephone No.  10 Fell Rosengren Avenue  City, State, Zip Code  Totowa, NJ 07512										3 -5111		/			
City, State, Zip Code  Totowa, NJ 07512  Start Date (10)  05/28/2019  Cocupancy Status During Abatement (Check Only One)  Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours  City, State, Zip Code  Totowa, NJ 07512  Steret Address 11 Rosengren Avenue  City, State, Zip Code  Totowa, NJ 07512  Scope of Work (Check All That Apply)  Abatement Performed Outside of Normal Facility Hours  City, State, Zip Code  Totowa, NJ 07512  Scope of Work (Check All That Apply)  Asbestos-Containing Material (ACM)  To BE ABATED  In Facility (13)  In Facility (13)  Abatement  X VAT  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Normally  Popcorn Ceiling & Walls  Name of Registered Landfill  Fairless Landfill  City, State  TibD  City, State  TibD  Completed by  Title  Signature  Date		ing Owner (8)		ASCI	M No.					(9)				_	
City, State, Zip Code	Street Address							en Ave	nue	////				-	
Start Date (10)	City, State, Zip Code					City, S	tate, Zip	Code						_	
05/28/2019  05/28/2019  05/28/2019  D&S Abatement, Inc.  Occupancy Status During Abatement (Check Only One)  Facility Closed/vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours  Other – Describe:  Scope of Work (Check All That Apply)    ≥ 3 sf or ≥3 lf	Project Manager for Monitoring Firm			Telepho	ne No.			 35				).			
Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other – Describe:  Scope of Work (Check All That Apply)  ≥ 3 sf or ≥ 3 lf ≥ 160 sf or ≥ 260 lf  Location of Abaterial (ACM) I Demolition  I S Location Normally Used Solely by Maintenance/ Custodial Staff? (12)  Yes No N/A  Basement  X VAT  About (I.e. thermal systems insulation, SF or LF)  Winterproper Systems insulation, SF or LF)  Kitchen  X Popcorn Ceiling & Walls  Name of Registered Waste Hauler D&S Abatement, Inc.  Name of Registered Waste Hauler D&S Abatement, Inc.  Title  Name of Registered Landfill  Fairless Landfill  Fairless Landfill  Fairless Landfill  Fairless Landfill  City, State TBD  Name Of Registered Landfill  Fairless Landfill  Fairless Landfill  City, State Morrisville, PA  Completed by  Title  Signature  Date				npletion	Date (11)	200-3800000								-	
Abatement Performed Outside of Normal Facility Hours  Other – Describe:  Scope of Work (Check All That Apply)  ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf  Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)  Basement  X  X  X  Yes  No  N/A  Basement  X  X  Yort  Ato SF  X  No  N/A  Normally Used Solely by N/A  Basement  X  X  Yort  About  Amount (Specify Ser other miscellaneous)  Normally Used Solely by N/A  Amount (Specify Ser other miscellaneous)  Normally Used Solely by N/A  Amount (Specify Ser other miscellaneous)  Normally Used Solely by N/A  Amount (Specify Ser other miscellaneous)  Normally Used Solely by N/A  Amount (Specify Ser other miscellaneous)  Normally Used Solely by N/A  Amount (Specify Ser other miscellaneous)  Normally Used Solely by N/A  Amount (Specify Ser other miscellaneous)  Normally Used Solely by N/A  Amount (Specify Ser other miscellaneous)  Normally Used Solely by N/A  Amount (Specify Ser other miscellaneous)  Normally Used Solely by N/A  Amount (Specify Ser other miscellaneous)  Normally Used Solely by N/A  Amount (Specify Ser other miscellaneous)  Normally Used Solely by N/A  Amount (Specify Ser other miscellaneous)  Normally Used Solely by N/A  Amount (Specify Ser other miscellaneous)  Normally Used Solely by N/A  Amount (Specify Ser other miscellaneous)  Normally Used Solely by N/A  Amount (Specify Ser other miscellaneous)  Normally Used Solely by N/A  Amount (Specify Ser other miscellaneous)  Normally Used Solely by N/A  Abatel Individual Staff?  Other miscellaneous  Normally Used Solely by N/A  Amount (Specify Ser other miscellaneous)  Normally Used Solely by N/A  Amount (Specify Ser other miscellaneous)  Normally Used Solely by N/A  Amount (Specify Ser other miscellaneous)  Normally Used Solely by N/A  Amount (Specify Ser other miscellaneous)  Normally Used Solely by N/A  Amount (Specify Ser other miscellaneous)  Normally Used Solely by N/A  Amount (Specify Ser other miscellaneous)  Normally Used Solely by N/A  Amount (Specify Ser other miscellaneous)  Normally	Occupancy Status During Abatement (C	heck Only One	e)										-	-	_
Other - Describe:  Scope of Work (Check All That Apply)    ≥ 3 sf or ≥ 3 lf   ≥ 160 sf or ≥ 260 lf	Facility Closed/Vacated During Ent	ire Period of Al	baten	nent					nue						
≥3 sf or ≥3 lf	Other – Describe:	Iormal Facility	Hours	3		1000	200								
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Name of Registered Waste Hauler  D&S Abatement, Inc.  City, State Fotowa, NJ  Completed by  Title  NJDEP Waste Hauler ID No. 20996  Disposal Date TBD  City, State Morrisville, PA  Date	Basement		X			VAT			45	50 SF		Х			
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Date of Notification (1) 05/14/2019			1 = 52.5113		f Building Almeida		Operator	(2)	D. S. Steiner, D. Steiner, D. S. Steiner, D. S. Steiner, D. S. Steiner, D. S. Ste	Ш	MA	<del>Y 1</del>	7	2019	-	
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ĭ DOH DCA	Emergency justification) Cancellation				f Contact Almeida					Tr	elenhone	Num	ber			
Name of Facility Where	Abatement is Takir	na Place (S	2\	FACI	LITY INF	ORMATI	ION	T	- £ 5" 1114	(4)						
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City (5) Bloomfield, NJ 0700	03								e Feet		of Floors /A	3	1000	ldg. A	-	
County (6) Essex					Code (7) USE ONLY	)		Currer	nt Use (Pri Se	or if be	eing den	nolishe	ed)		-	
Name of Monitoring Firm N/A	Hired by Building	Owner (8)		ASCN	/ No.				ement Cor ement, Ir		or (9)					
Street Address								Address oseng	s ren Ave	nue					-	
City, State, Zip Code								itate, Zip wa, N.	p Code J 07512							
Project Manager for Mon	itoring Firm			Telepho	ne No.			none No 345-86			Licen 0131	se No 1			-	30000
Start Date (10) 05/24/2019		Schedule 05/25/2		mpletion	Date (11)				A Monitor ement, Ir	IC.					_	
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Name of Registered Was D&S Abatement, Inc			H	IJDEP W lauler ID 0996		Cubic of Was TBD			Name of Fairless			ndfill				
City, State Totowa, NJ			-	11000		Dispos	al Date		City, Stat Morrisv		PA				-	
Completed by Ned Joksimovic		Title Proie	ct Ma	anager		S	ignature	Y	71			Date		019		

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

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Date dr. doil		Name of Building	Owner/Opera	tor (2)	ASBESTO OTTORAGE	JS CC SENS	JNTT ING	101	Ž.
Agencies No. :	Visit No. (1985)	Street Address		P.O.86				MONTH AND	ELCA!
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City (6)	14	-			# of Floors		Bldg.		
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Street Section		1845		ie of Abatement C	ontractor (9)				
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Street Address					Street	ac Contraction	-		-			
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Project Manager for Monitoring Firm			Talank	iene No.	Midla	nd Park, NJ	07432					22.00
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<sup>\*</sup> Do not use this form for asbestas licensure exampled solvides,

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Name of Facility Where Abatement	is Taking Place (3	)	FACIL	TY INFORM	ATION	-	Type of Fa	cility (4)				-
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Name of Monitoring Firm Hired by E N/A	Building Owner (8)		ASCM	No.			of Abateme ervices C					
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Project Manager for Monitoring Firm	n		Telephon	e No.	1000		one No. 295-1700	N.	Licens 0107			
Start Date (10) 5/21/19	Schedul 5/23/2		pletion D	ate (11)			of OSHA Me as abov					
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Facility Closed/Vacated Durin Abatement Performed Outside Other – Describe:	e of Normal Facility	Abatem y Hours	nent		Ci	ity, St	ate, Zip Co	de				-
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Delley Doom	Yes	No	N/A		Pipe In	sula	tion		30 LF	x		$^{\dagger}$
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encies Notified Type Notification			t Address Broadw					ASREST	os co	NTRO		_	Marian
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DEP Amended Amendment #		Jers	sey City	, NJ 073	06			Telephone N	Number			_	1
Emergency (Include	ding		e of Cont	act Repollet				973-954-	1512			_	1
DOH DCA Cancellation				INFORMA	ION		11)					_	1
me of Facility Where Abatement is Taking Pla	ce (3)		- COLLEGE			Type of Fa							
ur Lady of Mount Carmel Parish							ol (K-12) hapter 8 (	Other than h	(-12)	ildings	home		
reet Address						Other etc.)	r (i.e. priva	other than r	ercial b			_	
5 Broadway						Square Fe	eet	# of Floors		Bldg. 60+	Age		Ĭ,
ty (5)						20,000	oo /Prior i	1 f being dem	olished	-		_	
ersey City ounty (6)		Cou	unty Code	(7) ONLY)		Church		, bomg				_	
HIDSON	(0)		ASCM No		Nam	e of Abatem	ent Contra	actor (9)					
ame of Monitoring Firm Hired by Building Owr	ier (8)	1	400W 140			Services	Corpora	ation				-	-
N/A street Address						et Address 6 69th Stre	eet						
treet Address					0	State, Zip C							
City, State, Zip Code					Gu	ittenberg,	NJ 0709	93	N			_	_
A Maritoring Firm		Te	elephone	No.	Tele	ephone No.	20	010	nse No. 74				
Project Manager for Monitoring Firm						1-295-170 ne of OSHA		- 1010				_	
	cheduled		letion Da	te (11)		ame as ab						_	_
5/22/19	5/24/201				Stre	eet Address							
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire Per Abatement Performed Outside of Norma	riod of Ab	ateme	ent		City	y, State, Zip	Code					-	
Other – Describe: 8 AM  Scope of Work (Check All That Apply)								A with No.	ative P	ressure			
The state of the s	ズ Re	novati	ion			Mini	-Fnclosure	ent with Neg e	jauvei	,000			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	De	emolitio	on			✓ Glov ✓ Non	ebag Pro	cedure d (*) and No	n-Friab	le Proc	edure	_	_
	T									1	Abaten Type		
	N	Location ormali	ly		Descri	ption of	(A CAA)	Amou	ınt			ı	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mai	d Sole ntenar odial S (12)	nce/	(i.e. th	ermal sys	ing Material stems insula g, VAT, or cellaneous)	tion,	(Spec	cify	Removal	Repair		
90 M	Yes	No	N/A			on Mron 9	2 Cut	35	_F	х			
Rectory Basement		Х		Pipe	insulatio	on-Wrap 8	Cut						
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													1
			1	Monto	Cubic Y	ards	Name	of Registere	d Land	fill			
Name of Registered Waste Hauler			NJDEP V Hauler II		of Wast			rva Enter					
Tri-State Transfer Assoc	35.85		19551		TBD Disposa	al Date	City, S	tate					
City, State					TBD		Way	nesburg,		Date		_	_
City, State								1.1	1	LISTE			
Bronx, NY Completed by	Title				Si	gnature /	Muli	a X		5/8/2	019		

P	nt Form	

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

CK 30910	N			OF ASBE										
Date of Notification (1) 5-10-2019				Building O Buildin			(2)							
Agencies Notified Type Notification  EPA   Initial	**	2000	Street Ad 70 Gran	dress nd Aven	ue								-	
DEP Amended  X DOL Amendment #				e, Zip Cod Arlington		7661								
Emergency (ir justification)  DCA  Cancellation	icluding	1000	Name of Mark P				-			hone Num 390-644				
DCA Cancellation				ITY INFO	DMATIC	N.								
Name of Facility Where Abatement is Taking Commercial Street Address	Place (3)		TAGIL		NHA (IC			of Facility (4) School (K-12 Subchapter 8	)	than K-12	)			
77 Ridge Road							1201	Other (i.e. pri etc.)	ivate &	commercia	l build	ngs,	10 5	es,
City (5)							Squa	re Feet	100000000000000000000000000000000000000	loors	19 . 6276	dg. Ag	je	
North Arlington, NJ			Saunty C	odo (7)			800	0 ent Use (Prior	2	domolish	75	)+		
County (6) Bergen				SE ONLY)							eu)			
Name of Monitoring Firm Hired by Building O	wner (8)		ASCM	No.		Gree	en En	vironmenta			С			
Street Address						Street 235		ess nia Avenue						
City, State, Zip Code								Zip Code ty, NJ 0730	04					
Project Manager for Monitoring Firm		T	Telephor	ne No.			none N 333-8		1.3	License No 01174	0.		- ,	-
	Schedule		pletion [	Date (11)				HA Monitor vironmenta	al Serv	vices II	C.		2.00	
Occupancy Status During Abatement (Check							Addre			7,000, EE				
Facility Closed/Vacated During Entire P			ient					nia Avenue						
Abatement Performed Outside of Normal Other – Describe:								Zip Code ity, NJ 073	04					
Scope of Work (Check All That Apply)			***************************************	e										
≥3 sf or ≥3 lf   ≥ 160 sf or ≥260 lf	-	tenova Vemolit				2	M G	ull Containme ini-Enclosure lovebag Proc on-Exempted	edure	. LXXX.00			<u> </u>	
Location of	100	Locati			Dor	scription	n of					Abate Ty		t
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Ma Cusi	d Sole intenai todial S (12)	nce/ Staff?		tos Cont thermal surfac	aining f	Materia is insu AT. or		(Sp	nount pecify or LF)	Removal	Repair	Liceronica	Enclosure
Donf	Yes	No	N/A		Doofi	Ma	torio		20	0 SF	X			-
Roof Second Floor	-	X	-		Roofi	/ Linol				0 SF 0 SF	X			-
	-		-							0 SF	1 <sub>X</sub>	-	-	
Store front / 1st Floor	-	X				ling T				0 SF 0 LF	X			
Basement		5.94	JDEP W	lacto	Cubic		allon	Name of F		ed Landfill			-	1
Name of Registered Waste Hauler Green Environmental Services		1-	lauler ID 034889	No.	of Was			Fairless						
City, State Jersey City, NJ					Dispos 5-25-	sal Date 2019	9	City, State Morrisvi		Α			ored to	
Completed by Liliana Serrano	Title Offic	e Mai	nager		S	Signatur	e L(L	wSu	UE	10 5-	ite 10-2	019		

X5706	PAII	D	NO		ATIO ursua	nt to NJ	AC	STOS ABA 8:60 and 5:1	6)	DEC	E		<u>I</u>	E	And the state of t
Date of Notification (1)  05 /	13 /	18	3					wner/Operator Plainsboro R	(2) Regional Sch	DOI District	<del>1</del> /\-	7	20	1	L
Agencies Notified	Type Notific	cation				et Address									
⊠ EPA		oution			000000000	1 Village		ad Fast	6.	ASBES	LICEN	AOS Mis	ITF	)L&	
□ DOLWD	☐ Amende					State, Zip				- Later Company of the Company of th	Del Chair	Ully	nonece:	Maria	
⊠ DOH	Amenda			_	1 - 100000			NJ 08550							
DCA (NJAC 5:23-8)	☐ Emerge justificat		ncludin	g		e of Conta		143 00330	-	T-1	NI		-		
(NOAC 5.25-6)	☐ Cancella					omas Da				Telephone 609-716			051		
							•	RMATION		003-710	-5000	χ 5.	-		
Name of Facility Where A	Abatement is	Takin	g Plac	e (3)	- 17	CILITI	NFO	RIVIATION	Type of Facilit	by (4)			_		
Maurice Hawk Elem			3	- (-)					School (K-	St. 1943					
Street Address									☐ Subchapte	r 8 (Other than	K-12)				
305 Clarksville Roa	d								Other (i.e., homes, etc	private and co	mmerci	al bu	iildi	js,	
City (5).			111111111111111111111111111111111111111				1000		Square Feet	# of Floors		BI	dg.	00	
Princeton Junction									80,000	2	3		40	ge	
County (6)					Cou	nty Code (	7)/ST	ATE USE ONLY)		Prior if being de	molishe				
Mercer						10.10 <b>-</b> 10.10.10.10.10.10.10.10.10.10.10.10.10.1	11		School	nor in boiling do		, ,			
Name of Monitoring Firm	Hired by Bui	lding (	Owner	(8)	ASCN	No.	Na	ame of Abateme	ent Contractor (	9)					
PARS Environment	al, Inc.	967.9		3. 50					onmental, LL	2,100					
Street Address							-	reet Address	,				-		
500 Horizon Drive, S	Suite 540							623 Cutler Av	/enue						
City, State, Zip Code								ty, State, Zip Co	ode				_	-	
Robbinsville, NJ 08								Maple Shade							
Project Manager for Monit	toring Firm			Tel	ephone	No.	_	lephone No.	,	License N	0.				
Julian Fernandez				6	09-468	3-6946		356-755-0099	ſ	00842					
Start Date (10)		Sched	luled C	omple	tion Da	ate (11)	Na	me of OSHA M	lonitor				_		
05 /28 / .						19	I	EMSL Analyti	ical, Inc.						
Occupancy Status During  Facility Closed/Vacated					ment		3335000	eet Address 200 Route 13	0 North						
Abatement Performed Time of Abatement:	Outside of N	ormal	Facilit	y Hou	rs - Des	scribe AM	Cit	y, State, Zip Co	ode						
Scope of Work (Check all	that apply)							Cinnaminson	, NJ 08077						
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>	energy property pro			enovat emoliti											
			Is	Loca	ion			Z Non-Exc	inpice ( ) and is	Ton-i nable i loc	Jeuure	Λhe	oto:	ant Ti	ma
Location of				Norma				Description of			-		_	ent Ty	
Asbestos-Containing M TO BE ABAT		1)		ed Sole				Containing Mat		Amount		Removal	Repair	inca	Enclosure
/ IN Facility			Cus	todial	Staff?	(1.6		ermal systems i surfacing, VAT,		(Specify SF or LF	,	ova	=	sde	nso
(13)			Vaa	(12)	T NI/A			her miscellaned		0. 0. 2.	<b>'</b>	-		Encapsulate	Гe
Offices	-		Yes	No 🖂	N/A	Mastic				1,529 SI	=				П
Offices			Dine Fi	Hina	s (Wrap and	Cut				늗	$\exists$				
	$\exists$			Tipe III	ttirig	S (Wrap and	Cuty	7 LF			늗				
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Name of Registered Waste	Hauler		Ц_		JDEP \	Masta	C	olo Vordo -f	Non (D	ata and the second			Ш	Ш	
Freehold Cartage	And the second s						Wa		Fairless L	stered Landfill					
City, State	ity, State						Disi	posal Date	City, State				_		
Freehold, NJ								5/31/2019	Morrisville	- ΡΔ					
Completed By (Print or Typ							111071104111	-, · A	D-1						
Christina Lynch	,	Title Vi	ce Pr	eside	nt of (	Operation	าร	Signature	7	4	Date 5	12	he		
CD 44								LINA			0	د له ۱	1.		

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Date of Notification	7 (1)	(Pur	suant	to NJI	AC 8:60	0-7 and 12:120-7	7)	IID) E	CE	11		=
	11 (1)					g Owner/Operato	r (2)		Control of Some 10 to 10	13		-
5/14/2019				annes	2116	ridan			4	8/		Beautiful C
Agencies Notified	Type Notifica	tion	Str	eet Ad	dress			lii iii M	AY 1	7 20	19	-11
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[ ]DEP	Notifica	tion	City	r, Sta	te, Zi	p. Code		L	- 112-11-12 EF-201-EF-1	y		1
[X] DOL	[ ]Amended		1			d,NJ,07003		ASBE	STOS C		÷0	&
0.200.200.000	Notifica	tion				(5). (5)			LICENS	NIVO	-	1,00,000
[X] DOH	[ ]EMERGENCY		11		ontact		Teleph	one Number				
[ ]DCA			Je	ames	She:	ridan						
	[ ]Cancellat	lon	11									-
Name of Facility Whe	are Abstonet :	- m-1		FA	CILITY	INFORMATION .						
James Sherida		s rak	ing P.	race (	3)		Type of Fac:	ility (4)				
ommes SHETTON	24						[ ]School					
Street Address				***			[ ]Subcha	apter 8 (Oth	ner than	K-1	2)	
							cial	(i.e., priv buildings,	homes.	etc.	r- )	
							Square Feet			ldg.		100
City	lc	ounty			lco	ounty Code (7)	1	IL OT ETC	DLS B	Luy.	чč	
province to the second		1			1000	TATE USE ONLY)		(Davis				_
Bloomfield	Fe	sse	¥.				Current Use	(Prior if b	eing de	moli	she	l)
Name of Monitoring F	Val.		A 1000	SCM No		Name of Abate	mont Contact	on /01				
Owner (8)				JOH INO	•		ment Contract IANAGEMEN:					
N/A	S. S.							r, inc.				
Street Address						Street Address						
						86 Chris	topher S	t.				
City, State, Zip Cod	e					City, State,	Zip Code				_	-
						Montclai	r, NJ 070	042				
Project Manager for	Monitoring Fire	m Te	elepho	ne Num	ber	Telephone Numb	per		License	Num	bei	_
		2000	/A			(973) 744			0037			
Scheduled Start Date	(10) Sched	Com	oletic	n Date	(11)	Name of OSHA N			300	: <del></del>		
05 24 19		2	26	19	(11)	N/A	TOHI COL					
Month Day Ye	ar Moni	-h	Dav	Yea	r	12/22						
Occupancy Status Dur	ing Abatement	(Check	only	one)		Street Address	3				-	
[X] Facility Clos of Abatement	sea/Vacated Dur	ing E	ntire	Perio	d							
[ ]Abatement Per	formed Outside	of N	ormal	Facili	ity	City, State, 2	in Code				-	
Hours - Descr	ibe: «OffHours	Descr:	ipt»			1 5 5 7 7 5 6 6 6 7 2						
[ ]other - Descr			y Desc	ript»								
Scope of Work (Check	all that apply	7)				P 3-22						_
[X]≥3 sf or		1	[X]Ren	ovatio	n		Containment w Enclosure	ith Negative	e Press	ure		
[ ]≥160 sf o				olitio			pag Procedure					
		T	Is		1	[ ]Non-Fr	riable Proced	ure				
Location	of		Locati			Description	n of		Aba	teme	nt	;Abe
Asbestos-Cont		l r	Normal Used	7		Asbestos-Cont		Amount	R	R	N	N
Material (	223.03.22	1	Solel By Mai			Material (A		(Specify		E P A	C	C
TO BE ABA		į į	tenanc	e/	in	(i.e., thermal sulation, surfa		SF or	0	A	PS	os
(13)			ustodi taff (			or other miscel		LF)	A	I R	U	U
		Yes	No	N/A					L		L.	R
Basement				X	Pipe	e Insulatio	n	70 LF	X			
												1000000
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Name of Registered Wa	ste Hauler	N.	JDEP W	laste	Cul	bic Yards	Name of Regi	Istered Land	lfill			-
AZTECH MANAGE		на	auler	ID No.		Waste 1.0	Tri - S					
City, State	,	1	7040	,								
Montclair, NJ	07042				Dis	sposal Date	City, State	2000 000	7.0			
MULLICOTORITY, NO	01082				0=	5/28/19	bronx,	NY, 104	14			
Completed By (Print o	r Type) Title				0-	Signature	1.	/.	D :			-
Constantine Vi			en i			Signature -	4.1.1	//	Date	2010		
						1 Cus	1au ne 11	DIVICA	5/14/	2019		
73 Ernst Ava		-			9-91-5-18-19-19-19-19-19-19-19-19-19-19-19-19-19-							-

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Date of Notification (1)				Nan	ne of Buildi	ng C	Owner/Operator	(2)	- 1121					
05/13	_ /	19			rian Cuna			<b>\-</b> /		h t a		1.		
Agencies Notified Type	Notificatio	n		Stre	et Address					MA'	Ĭ	1	_201	9
⊠ EPA ⊠ In					0171001000				and the same of th					
	mended			City	State, Zip	Con	le		A	ODEST	CS	1.1	VIH	772 8
	nendment		_		enilworth	AT STATE OF			and the second feet of a second		CE		IG	ال د
	mergency (stification)	includi	ng		ne of Conta				Telephone	Alumba		-	District Control	and the contract of the
	ancellation			3000	ck Gray				relephone	Numbe	1			
						NIE	DREATION							
Name of Facility Where Abatem	ent is Taki	na Plac	ne (3)		ACILITY	NFC	DRMATION	T						
Cunado Residence	one is raid	ilg i lat	JE (J)					Type of Facility						
Street Address				=======================================			<del> </del>	School (K-1 Subchapter Other (i.e.,	8 (Other than private and co	K-12) mmercia	al bu	ıildi	JS,	
City (5)								homes, etc						sti yout
Kenilworth								Square Feet	# of Floor	S		dg.	ge	
County (6)				TCo	inti Cada	71/0	TATE LINE ON IN	1,232	2			78		
Union				Cot	mty Code (	(1)(5)	TATE USE ONLY)	Current Use (P	The same of the sa	emolishe	ed)			
Name of Monitoring Firm Hired to	v Building	Ouman	(0)	1001	1.51	1		Residence						
Management & Enviro. Co				ASCN	I No.	- 1		ent Contractor (9	ā .					
Street Address	วทรนเนท์	Serv	ices			-		onmental, LLC	;					
PO Box 341						1000	treet Address							
City, State, Zip Code						-	623 Cutler A							
Chesterfield, NJ 08515						1000	ity, State, Zip C							
Project Manager for Monitoring F	iem		T			-	Maple Shade	, NJ 08052						
Bill Weisgarber			6		3-4070		elephone No. 856-755-0099		License N 00842	ΙΟ.				
Start Date (10)					ate (11)	Na	ame of OSHA N	lonitor				-	-	
06 /03 /19		06_	/ _1	0_/	19		EMSL Analyt	ical, Inc.						
Occupancy Status During Abater						St	reet Address					******	-	
☐ Facility Closed/Vacated Durin	g Entire Pe	eriod of	Abate	ment			200 Route 13	0 North						
Abatement Performed Outside	of Norma	I Facili	ty Hou	rs - Des	scribe	Cit	ty, State, Zip Co	ode			-	-	-	
Time of Abatement:Al	ИP	M/	PM		_AM		Cinnaminson							
Scope of Work (Check all that ap	ply)						-	•				-	-	
≥3 sf or ≥3 If		M P	enovat	ion			☐ Full Cont	ainment with Neg	gative Pressur	e				
≥160 sf or ≥260 lf			emoliti				☐ Mini-Enc ☐ Glovebac	osure Procedure						
							Non-Exe     Non-Exe	mpted (*) and No	n-Friable Prod	cedure				
Lagation of		1100	s Loca Norma	0.000							Aba	ten	nt Ty	уре
Location of Asbestos-Containing Material	(ACM)	Use	ed Sole	ely by	Asha	etne	Description of Containing Mar				Z	R	ш	Ш
TO BE ABATED	(, , , , , ,		intena		(i.e	., the	ermal systems i	nsulation.	Amount (Specify	,	Removal	Repair	пса	nclo
IN Facility		Cus	todial (12)	Staff?			surfacing, VAT,	or	SF or LF	)	oval	=	Encapsulate	Enclosure
(13)		Yes	No	N/A	1	of	ther miscellaned	ous)					late	Ф
Basement			$\boxtimes$		Floor T	ile			1,600 SI	F [	X	П	П	П
	П									7	一	$\equiv$		
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Name of Registered Waste Haule				JDEP V	Moote	0	ala Va-1- f	TN := 1			7	Ш		Ш
Freehold Cartage	-		10370	auler II 15939	No.	Wa		Name of Regis Fairless La						
City, State				10000			0 posal Date	City, State			1707			-
Freehold, NJ							6/10/2019	Morrisville.	PA					
Completed By (Print or Type)	Title					******	Signature			Date			-	
Christina Lynch	1000000		eside	nt of 0	Operation	ıs	101	0		2500000	( )	2.		
SD 41					r		Ohister			5/	13,	1.		

CK 7369 PA	ID		ICATION	tate of New Je N OF ASBEST to NJAC 8:60	OS ABATE		The state of the s		C	E		Pri
Date of Notification (1)		1	Name o	of Building Own	ner/Operato	r (2)			MAY	1	7 20	19
5/13/19			Ocea	n County D	epart. of I	Buildi	ngs & Grour	nds	\$417.41			IJ
Agencies Notified Type Notification	1		Street A	Address							4 m n 4-	
X EPA X Initial		-	239 V	Vashington	St, POb	ox 21	91	ASI	BESTO	)9 C	CONT	<b>ROL</b> (
DEP Amended		Ī	City, Sta	ate, Zip Code				ra to aportunita is	LIC	EN	SING	TO CALL STATE OF THE STATE OF T
DOL Amendmen			Toms	River NJ 0	8753							
☑ DOH     ☐ Emergency     ☐ justification		1	Name o	of Contact				Telepho	one Nur	nber		
DCA Cancellation			Joe N	Never					29-20			
				ILITY INFORM	IATION		1					
Name of Facility Where Abatement is Takin	ng Place (	3)				Туре	of Facility (4)					
Vacant House						П	School (K-12)					
Street Address						-	Subchapter 8	Other th	an K-12	2)		
795 Ocean Ave						X	Other (i.e. priv				ildings	, home
City (5)							etc.)	# of Flo	ore		Dida 1	\ae
Lakewood NJ 08701						100	are Feet	# of Flo	UIS		Bldg. A	ige
			Carri	0-4- (7)				. No.			50+	
County (6) Ocean				Code (7) USE ONLY)		15576	ent Use (Prior i	being d	emolish	ned)		
	0 /=			5-28534 G. 1-5165 277 H. 123		Hou	T. T					
Name of Monitoring Firm Hired by Building	Owner (8	)	ASC	vi No.	100		atement Contra	ctor (9)				
N/A						naco						
Street Address						Addre						
	00-10-1-100-1-1				PO	Box 3	329					
City, State, Zip Code					City, S	State, Z	Zip Code					
					Wes	st Ber	lin NJ 0809					
Project Manager for Monitoring Firm			Telepho	ne No.	Telepl	hone N	lo.	Lic	ense N	0.	-	
					856-	-753-9	9800	00	727			
Start Date (10)	Schedul	ed Con	mpletion	Date (11)	Name	of OSI	HA Monitor		2			
5/23/19	6/14/1				Sam	ne						
Occupancy Status During Abatement (Che	ck Only O	ne)			Street	Addre	SS					
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe:	Period of nal Facility	Abaten y Hours	nent		City, S	State, Z	ip Code					
Scope of Work (Check All That Apply)												
			Seattle Control of the Control of th		15	7						
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>	-	Renova Demolit			<u> </u>	Mir	II Containment ni-Enclosure ovebag Proced n-Exempted (*	ure	5.0			e
	le	Locati	ion			-						ement
Location of		Normal	ly		Description	of					Ту	ре
Asbestos-Containing Material (ACM)		ed Sole		Asbestos (	Description Containing N		I (ACM)	Amou	nt			m
TO BE ABATED		intenal todial S		(i.e. ther	mal system:	s insula		(Spec	ify	Re	Z	nce
In Facility (13)	-	(12)			urfacing, VA ier miscellar			SF or L	_F) .	Remova	Repair	sde
(.0)	-		T	- Ou	ior macenal	icous)				val	=	Encapsulate
	Yes	No	N/A									Ф
Through-out			x	Spa	ckle Com	pound	d	6000	SF	x		
Basement			х	Flo	or Tile M	astic		700 S	SF.	x		
Exterior siding			х	Е	xterior Sig	ding		12 S	F	x		
						3				-	+-	-
Name of Registered Waste Hauler		I N	JDEP W	laste C	ibic Yards		Name of Reg	ictored	andell		1	
5		1	auler ID		Waste				Lanullii			
lorizon Disposal		1000	7512	40			G.R.O.W.	S.				
City, State				Dis	sposal Date		City, State				-	
renton NJ				6/	14/19		Morrisville	PA 19	9067			
Completed by	Title				Signature	-			Dat	te		
Anthony T Perna	Pres	ident			1	/		-		13/1	9	

										Pri	
CK7370 PAI	D NOTI	FICATION	ate of New Jerse I OF ASBESTOS to NJAC 8:60 an	ABATE		NE	GE		$\mathbb{V}$		1
Date of Notification (1) 5/14/19			f Building Owner/		4.1	M					1
Agencies Notified Type Notification		Street A	y Nacca Privat	e Hom	e		MAY I	7 6	2019		أري
⊠ EPA ⊠ Initial										To a market of the	
L DEP L Amended	Д	1	ate, Zip Code		į	AS	BESTOS			_&	
Emergency (			Beach NJ 08	800		Tal	LICEN		3		_
DOH justification)  DCA Cancellation		Sandy				rei	ebnone Nur	noer			
		FACI	LITY INFORMAT	ION							_
Name of Facility Where Abatement is Takin Sandy Nacca Private Home	g Place (3)				Type of Facili						
Street Address						oter 8 (Other	er than K-12				
							& commercia		dings,	home	1
City (5)					Square Feet	100	Floors		Bldg. A	ge	-
Brant Beach NJ 08008 County (6)	~	County	Code (7)		1000 Current Use (	1.5			35+		-
Ocean			USE ONLY)		House & G		rig demonsi	ieu)			
Name of Monitoring Firm Hired by Building	Owner (8)	ASCN	A No.	1	of Abatement (	Contractor	(9)				-
N/A Street Address					Address						_
					Box 329						
City, State, Zip Code			, , , , , , , , , , , , , , , , , , , ,	100000000000000000000000000000000000000	State, Zip Code st Berlin NJ 0						-
Project Manager for Monitoring Firm		Telepho	ne No.		none No. -753-9800		License No 00727	0.			
Start Date (10) 5/22/19	Scheduled Co 5/31/19	ompletion I	Date (11)	Name Sarr	of OSHA Monit 1e	tor					
Occupancy Status During Abatement (Chec	k Only One)			Street	Address						
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe:				City, S	State, Zip Code						-
Scope of Work (Check All That Apply)											-
≥3 sf or ≥3 lf     ≥160 sf or ≥260 lf	Renov Demo			×	Mini-Enclos Glovebag P	sure Procedure	Negative P			e	
	Is Loca							T	Abate	ment	
Location of Asbestos-Containing Material (ACM)	Norm Used So			scription	of Material (ACM)	Δ.	mount		l y		-
TO BE ABATED In Facility (13)	Mainten Custodia (12	Staff?	(i.e. thermal surfa		s insulation, T, or	(8	Specify or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes No	N/A								te	
Exterior Siding		X	Exte	erior Sid	ding	21	00SF	x			_
											-
Name of Registered Waste Hauler	4	NJDEP W	/aste Cubic	Yards	Name	of Registe	red Landfill				-

Hauler ID No.

22459

Title

President

of Waste

5/31/19

Disposal Date

Signature

4

Anthony T Perna

Completed by

United Roll Off

City, State

Elm NJ

Date

5/14/19

Morrisville PA 19067

G.R.O.W.S.

City, State

CIVE 5314 PAID			CATIO	tate of New Jerse N OF ASSESTOS t to DJAC 8:50 an	ABATEME	and the second s	DECE			
Date of Notification (1)		7	Name o	of Building Owner/	Operator (2	)	MAY	7 2019		
SIU IG Agencies Notified   Type Notification		-	Street A	circum, C	(('	- 1	TAT 143 7-1 1	7 2018		
DEP Amended Amendment Emergency (		a cup is to the life and	QIS City, Sta	T US HU	5 For	02/3/	72	NSING		
DON Justification) Cancellation	-	. The second sec	Name o	of Contact	7.0		Telephone Mi 90878	236	3	
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Street Address			aranda atronos tronos		— E	School (K-		2) Sei huddill an	haar	ac.
1464 Rte 31N					\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	etc.)	i it of Pleas	Stea	ige	
Annandale					[ ]	5000	1	5	<i>}-</i>	
County (6)		and the same	County (STATE	Code (7) USE ONLY}		()	rior if being demolis	ined)		
Name of Monitoring Firm Hired by Building (	loner (0	<u>i</u> _	ASC	Male.	Manse of	Abatement Co	ontractor (9)			
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City, State, Zip Code						e, Zip Code	New Jers	50.115	7)	2
Project Manager for Cloritoring Firm			Yelepha	re No.	Telephone	a No.	License N		10	
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5 3 1 9 Occupancy States During Abatement (Check	5)		19	Philosophiath It Labora makent oburs or the Armount Holes &	Shoon 5 d					
Facility Closed/Vacated Buring Entire F			teni		Street Ad	R1:695				
Abatement Performed Outside of Norm Other – Describe:	al Facility	y Hours			City, State	e, Zip Code	r		-	-
Scope of Work (Check All That Apply)	5000				7 B				2 1000	A PETER SER
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	£0 0000	Local		nanco renderit			-	Alo	eman yae	íL
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And the second state of th	Yes	Pło	MA					<u> </u>	F	
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10 42-100			4-4	Glate			Dundous	121	-	
bornert			7	Pipeis	501010	<u>°</u>	40 LF	1	-	
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City, State			200	Dispos	al Date	City, Stat	te /		20	
City, State  (3) H Mick, New Decay  Completed by  (2) (2) (2) (2) (2)	tre		1 ,		30 )19 Ignature	100+	7 / 1 / 10cc ·	Sv-/16	1	
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ASB-41 (R-06-08)			1000		* Do not us	se this form fo	r asbestos licensur	e exempte	activi	ties.

Date of Notification (1)		(Pi	ICATIOI ursuani	tate of New Je N OF ASBESTO to NJAC 8:60	OS ABATE and 12:12	0)	Property of Parameters of Para		1	201	9	FIRE FORM
05/15/19 Agencies Notified Type Notification							4	<u></u>	The second section of the sect			Total Control
				Address . Main Stree	t			ASBES L	TOS CO ICENSI	NTR NG	OL	die Grand
EPA X Initial DEP Amended			City, St	ate, Zip Code	A)			THE PARTY OF THE P	The second second		Markey a	<u></u>
DOL Amendment Emergency		_		ngton, NJ								
DOH justification)  Cancellation	,		Name o	f Contact				Telephone	e Numbe	ſ		
Name of Facility Where Abatement is Takin	- DI (0		FAC	LITY INFORM	ATION							
211 N. Main Street	g Place (3	)				Туре	e of Facility (4	6				
Street Address							School (K-12 Subchapter	8 (Other than	K-12)			
211 N. Main Street	An 1 To 1 T					×	Other (i.e. pretc.)	rivate & comr	nercial bu	uilding	s, ho	ies,
City (5) Pennington, NJ						Squa	are Feet	# of Floors	3	Bldg.	Age	
County (6) Mercer				Code (7) USE ONLY)		Curre	ent Use (Prio	r if being den	nolished)			
Name of Monitoring Firm Hired by Building (	Owner (8)		ASC	/I No.	AAA	LEA	atement Conf D PROFE		3			
Street Address					100000000000000000000000000000000000000	Addre	oss DOVE CO	URT				
City, State, Zip Code							Zip Code OD, NJ 08	701				
Project Manager for Monitoring Firm			Telepho	ne No.	Telepl	none N	Vo.		se No.			
Start Date (10) 05/27/19	Schedule 05/30/1		pletion	Date (11)	100000000000000000000000000000000000000		HA Monitor D PROFES					
Occupancy Status During Abatement (Chec	k Only One	e)				Addre			10			
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe:	Period of A al Facility	batem Hours	ent		City, S	tate, Z	DOVE CO Zip Code OD, NJ 08				-	_
Scope of Work (Check All That Apply)					LAN	LVVO	OD, N3 00	701				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	enovat emolitio			×	Min	III Containmei ni-Enclosure ovebag Proce on-Exempted	edure			ıre	
	440000	Locatio								Aba	teme	t
Location of Asbestos-Containing Material (ACM)		ormally Solely			Description		1/4010		-	7	уре	
TO BE ABATED	Mair	ntenan odial St	ce/		nal systems	s insula		Amount (Specify	Re	Z Z	<u>c</u>	ᄪ
In Facility (13)		(12)			facing, VA r miscellar			SF or LF)	Remova	Repair	Elicabsulate	Enclosure
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INTERIOR				PIPE	INSULA	OITA	N	200LF	x			
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Name of Registered Waste Hauler NEWARK CARTING		На	IDEP Waller ID 509		ic Yards /aste		Name of R	egistered Lar	ndfill	-		
City, State NEWARK, NJ		,		1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	osal Date 30/19		City, State BETHLE	НЕМ РА				
Completed by JOSEPH PERLSTEIN	Title OWNE	ER			Signature				Date 05/15/	/19		

State of N.J.

B & G proj. #:

2019-92

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

Roofing materials added Check # 9290 Date of Notification (1) Name of Building Owner/Operator (2) 0 15 /1 10 / 1 19 Henpal Realty Agencies Notified Type Notification Street Address EPA 222 Grand Avenue Initial ☐ DEP City, State, Zip Code X DOL X Amendment Englewood, NJ 07040 X DOH Name of Contact Telephone Number G Cancellation T DCA Paul Schmidt 201-569-8500 **FACILITY INFORMATION** Name of facility where abatement is taking place (3) Type of Facility (4) School (K - 12) Former Sears Hardware & Appliance Subchapter 8 (Other than -12) Street Address Other (Private/Commercia Bldgs./Homes, etc. 80 Godwin Ave Square Feet # of Floors dg. Age City (5) County (6) County Code (7) (State use only) Current Use (Prior if being demolis 3d) Midland Park Bergen Sears Store Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Abatement Contractor (9) n/a B & G Restoration, Inc. Street Address Street Address 105 Ryerson Road City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035 Project Manager for Monitoring Firm Telephone Number License Number Phone Number (973)696-6869 00378 Name of OSHA Monitor Scheduled Start Date (10) Sched. Completion Date (11) B & G Restoration, Inc. 05/07/2019 05/21/2019 Street Address Occupancy Status During Abatement (Check only one) 105 Ryerson Road Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Lincoln Park, NJ 07035 Other-Describe: Scope of Work (check all that apply) wrap & cut X Demolition Renovation Full Containment w/negative pressure Glovebag procei ire 3 sf or >3 IfMini-enclosure Non-friable proc dure ≥160 sf or ≥260 lf Is location normally used solely Е Location of E by maintenance/custodial e n asbestos-containing Amount Description of asbestos-containing m staff(12) (Specify SF or C material to be material (ACM) 0 a abated in facility (13) LF) Yes No N/A Main flat roof roofing 42 sf X rolled roofing Upper round roof 14,400 sf X Y equipment flashing 12 sf Upper round roof X X Front step roofs perimeter 1.800 sf flashing & seams X X Cubic Yards of Waste Name of Registered Landfill NJDEP Hauler ID# Registered Waste Hauler B & G Restoration, Inc. 19563 Grand Central Landfill Disposal Date City, State City, State Lincoln Park, NJ 05/07-21/2019 Pen Argyl, PA Signature Completed by (Print or Type) Date Gordana Luna Gordana Luna 05/10/2019 Secretary/Treasurer

### State of NJ Notification of Asbestos Abatement

2019-92 B & G proj. #:

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

Check # 9262

Date of Notification	1 (1)	IIN	lame of Bu	ildina Owr	ner/Operator (2	)		III) B	GE	N W		Tal
10 14 1/12 13			Henpal			•				<u> </u>	_ =	Total de la company de la comp
Agencies Notified  EPA  DEP	Type Notifica	tion	treet Addre 222 Gra	ess and Aver	nue			And the property of the state o	MAY	7 201	9	U
X DOL	Amend		ity, State, Englew	Zip Code rood, NJ	07040			AS	BESTOS C	ONTE		
<b>X</b> DOH		N:	ame of Co	ntact	<del></del>			4	ne Numbe	nicia		ature or a
☐ DCA	Cancel	lation	Paul S	chmidt				201-5	569-8500			
	WAY HILL SALES			FAC	ILITY INFORM	ATIO	N					
Name of facility wh	ere abatement	is taking pla	ce (3)					Type of Facility				
Former Sears	Hardware &	Applianc	е					=	ol (K - 12) hapter 8 (O	ther the	en '-11	2)
Street Address 80 Godwin Av	/e							X Other	(Private/Const./Homes, e	ommero tc.	Cia	. Age
City (5)		Coun	ty (6)			Co	unty Code (7)		# 01 1 1001			, ige
Midland Park		Ber	gen		_	(St	ate use only)	Current Use ( Sears Store		g demo	lis əd)	
Name of Monitoring	g Firm Hired by	Bldg. Owne	r (8)		ASCM No.		Name of Abatement (	Contractor (9)				
Street Address						_	B & G Restoration	on, Inc.			= =	
Street Address						and the same of	105 Ryerson R	oad				
City, State, Zip Code	9						City, State, Zip Code			A COLUMN TO SERVICE AND ADDRESS OF THE PARTY	that most	
Project Manager for	Monitoring Firm	2	l Dh	one Numb	or	-	Lincoln Park, N	NJ 07035	License	Numbe		
Project Wallager for	Monitoring 1 in			ione ranni	ie.		(973)696-6869			378		
Scheduled Start Dat	te (10)	Sched	Completio	on Date (1	1)		Name of OSHA Monit B & G Restorati					
05/07/2019			1/2019				Street Address					
Occupancy Status D							105 Ryerson Ro	oad			= =	
Describe:	rformed outside					_	City, State, Zip Code Lincoln Park, No	1 07035				
Scope of Work (che						ᆜ	<u> </u>				= =	
Demolition	cox all triat appi	Renovatio	1			=	wrap & cut Full Containment w/neg	ative pressure	Gloveb	ag prod	e ire	
>3 sf or >3 if	X	≥160 sf or ≥	260 If			X	Mini-enclosure			able pro		
Location of		Is location by mainte		used solely	1				-		RE	1 -
asbestos-cont material to be	•	staff(12)	narioc/ous	<del></del>	Description material (		asbestos-containing	Amount (Specify	SF or	m o	p c	l n
abated in facil	lity (13)	Yes	No	N/A	1			LF)		v e	a a	1 L
2nd Floor and sta	irwell from			X	sheetrock	& A(	CM joint compound	4,500 sq	ft	X		
2nd Fl. to 1st Fl.								-			<b>≒</b>	쉬片
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Registered Waste Ha B & G Restorati			P Hauler I 9563	D# C	ubic Yards of V 40	Vaste	Name of Registered I Grand Central I					,
City, State Lincoln Park, N	J	l.		Disposal D	ate 5/07-21/2019	)	City, State Pen Argyl, PA					ν.
Completed by (Print Gordana Luna	or Type)	Title Secretar	y/Treasu	ırer	Signature		Gordana Luna		Date 04/23	/2019		

CK#4856



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

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Date of Notification (1)	3-19		_	N		ling Owner/Operato		WARA	TOTA	100	IR)		
Agencies Notified	Type Notifica	ion		S	treet Addres	s		- Tack of proper Complete	1C-LU	<u>u</u> 0	_	Mark at the least	
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Dep   Mar dor	Amended Amendme	nt#		C	ity, State, Zip				20.0	2	-		
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				1=		FORMATION					=	=	
Name of Facility Where	Abatement is Ta	kina Pla	ice (3)		PACIENTIN	PORMATION	Type of Faci	ility (4)		adilio-a	_		
	RESIDE						School (F						
Street Address						d	Subchape Other (i.e homes, e	., private & d			ildi	IS,	
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WA	RGATE						1500	_   _2		_   _	5	) t	
County (6)	HUTIC				ounty Code SE ONLY)		Current Use	1CAN-	g demoli	shed)			
Name of Monitoring Firm	Hired by Buildin	g Owne	r	ASC	M No.	Name of Abater		100 mm 10					
<sup>(8)</sup> N	J.A			_			th co	TMC			=		
Street Address						Street Address 369	S. S.	RUCE	AL	ť			
City, State, Zip Code					· .	City, State, Zip C	LE SH	LADE	MI.J	- 0	9	2550	,
Project Manager for Moni	toring Firm		Tel	ephor	ne No.	Telephone No.	9-047	2 Licens	se No.	71			
Start Date (10) 5-73-19	Sch		Comple 2 I		Date (11)	Name of OSHA	Monitor W /	A			=		
Occupancy Status During	Abatement (Ch	eck only	y one)			Street Address					=		_
Facility Closed/Vacated				ment									_
Abatement Performed Other - Describe:	Outside of Norm	al Facili	ty Hou	rs		City, State, Zip C	ode	- 4					
Scope of Work (Check all	that apply)										=		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	• S (00000 to 0000)		enovat emolitic			☐ Mini-End ☐ Gloveba	itainment with Nalosure og Procedure empted (*) and N	* (0000) 2000					
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			ormally			5						ре	
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TO BE ABATE		1	ustodia Staff?	1	(i.e.,	thermal systems in surfacing, VAT,		(Spec		Rei	;	Encapsulate	Enclosure
IN Facility (13)			(12)			other miscellaneo		Sruit	Lr)	Removal	upon	psul	uso
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											_	H	
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Name of Registered Waste	Hauler				Waste	Cubic Yards	Name of Reg	istered Lan	dfill		-		
KLTMCO	INC		17	uler I	DNG DY	of Waste	A	CUA	7				
City, State MAPLE SH	ADE NI	T				Disposal Date	City, State	+S Halt	VIL	LÉ			
Completed By	Title					Signature (	M		Date	15	=	=== 2	
MICHAEL KL	EMM _	50	P.			- Mer	WIV		) -	13		1_	_

						State of N	New Jersey	[	F 6		7) (7	Feet .	p 1011
CK5709	PA	TI	TON				BESTOS ABA AC 8:60 and 5:1		DEC	EI			The formation of the state of t
Date of Notification (1)	43 A A	HA	27		Nam	e of Buildir	ng Owner/Operator	(2)		. 1			#
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Agencies Notified	Type Notific	cation	-301-025		Stree	et Address			1				1
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⊠ DOLWD	☐ Amende				City.	State, Zip	Code		Li	CENSI	1G_	_	-
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DCA (NJAC 5:23-8)	☐ Emerger justificat		ncludin	g		e of Conta			Tolophone M			_	
(140/40/0.20-0)	Cancella	50			1576358	ck Gray	CL*		Telephone N	umber			
	Odricelle			-	1		NEODMATION					_	
Name of Facility Where Al	batement is	Takin	a Place	(3)	FA	CILITY	NFORMATION	Type of Facility	. (4)				
Vicroy Residence		- aniii	9 1 1000	(0)				Type of Facility  ☐ School (K-1	.6.1.60				
Street Address								Subchapter	8 (Other than K	-12)			
olico(/ludioss								Other (i.e., phomes, etc.	private and com	mercial b	uildinį	•	
City (5)								Square Feet	# of Floors	В	ldg. A	9	
Short Hills								1,371	2		67		
County (6)					Cou	nty Code (	7)(STATE USE ONLY)		rior if being dem	olished)		-	
Essex							,	Residence	nor it bonig don't	iononou)			
Name of Monitoring Firm I	Hired by Buil	ldina (	Owner	(8)	ASCM	No	Name of Abateme		1				
Management & Envi		30 - S						onmental, LLC	*				
Street Address	10. 00.104	iting	00111	003			Street Address	oninental, LLC	*			_	
PO Box 341							623 Cutler Av	/onuo					
City, State, Zip Code							City, State, Zip Co	A STATE OF THE STA				_	
Chesterfield, NJ 085	15						Maple Shade						
Project Manager for Monito				Tal	ephone	No		, 145 06052	Tris-s-No				
Bill Weisgarber	ornig i iiiii			100000	609-298		Telephone No. 856-755-0099		License No.				
Start Date (10)		Schoo	lulod C			ate (11)			00842			_	
05/22/	19	_(	05 /	_2	4 /		Name of OSHA N EMSL Analyt						
Occupancy Status During							Street Address					-	
☐ Facility Closed/Vacated							200 Route 13	0 North					
Abatement Performed (							City, State, Zip Co	ode				-	
Time of Abatement:	AIVI	P	VI/	_PM		_AM	Cinnaminson	, NJ 08077					
Scope of Work (Check all t	hat apply)			II.									
			⊠ Re	novo	lion		☐ Full Cont	ainment with Ne	gative Pressure				
≥160 sf or ≥260 lf				moliti			☐ Mini-Enc ☐ Glovebag						
			547				Non-Exe     Non-Exe	mpted (*) and No	n-Friable Proce	dure			
			100	Loca						Ab	atem	t T	ype
Location o Asbestos-Containing M		<b>*</b>	1000	Norma	ally ely by		Description o			R	T	100	_
TO BE ABAT		11)			ance/		stos Containing Ma e., thermal systems i		Amount (Specify	ema	Repair	nca	nclo
IN Facility			Cust		Staff?	(,,,	surfacing, VAT,		SF or LF)	Removal	=	DS.I	Enclosure
(13)			Vaa	(12)		-	other miscellane	ous)		-		Encansulate	Œ
Lower Level Living Ro	om & Hall	way	Yes	No	N/A	Floor T	ilo		765 SF				
		way				110011			700 35				
				1	1_							_	
Name of Registered Waste Freehold Cartage	Hauler			1 552	JDEP \	O No.	Cubic Yards of Waste	Name of Regis					
City, State					15939	1	5 Disposal Date	City, State					-
Freehold, NJ							05/24/2019	Morrisville	, PA				
Completed By (Print or Typ	e)	Title					Signature			Date		-	-
Christina Lynch	restati			eside	ent of (	Operation	0 /	-		5/13	10		

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT														(5)
CK 570=	7 PA							:60 and 5:1		ME	GE		_	
Date of Notification (1)	2000				1			ner/Operator (		limil	7		***************************************	
	13 /	19			We	est Winds	sor-F	Plainsboro R	legional School	District	MAY I	7 2	19	a Castrona
Agencies Notified	Type Notific	ation			Stree	t Address				led took			-	
⊠ EPA					32	1 Village	Roa	d East				CON	80	<b>i</b>
⊠ DOLWD	Amende	- 10 CO			City,	State, Zip	Code			i AS	EESTOS LIGE	NSIN	170	e, w
☑ DOH ☑ DCA	Amendm  Emerger		alı ıdin.		We	st Winds	sor,	NJ 08550			Tank Control of the C		ALC: NO	
(NJAC 5:23-8)	justificati		Judin	g	Name	of Conta	ct		I	Telephone N	Number			
	☐ Cancella	ition			The	omas Da	ly			609-716-		351		
		-1,500			FΔ	CILITYII	VEO	RMATION					-	
Name of Facility Where A	batement is	Taking	Place	e (3)	- ' '	OILIT II	11 01	MATION	Type of Facility (4	1)			_	
Maurice Hawk Elem				(0)					School (K-12)	• /				
Street Address									Subchapter 8	(Other than h	<-12)			
305 Clarksville Roa	d								Other (i.e., pri	vate and com	nmercial b	uilding		
City (5)									homes, etc.) Square Feet	# of Floors		Ida A	_	
Princeton Junction									80,000	2		ldg. A	3.	
County (6)					Cour	nty Code /	71/27/	TE USE ONLY)			e e tie be ed\	40		
Mercer					Cou	ity Code (	11(31)	TE USE UNLT)	Current Use (Prio	r ir being der	nolishea)			
Name of Monitoring Firm	Hirad by Build	dina O	wnor	/9)	ASCM	No	No	ma of Abotam					-	
PARS Environment		ung O	WHE	(0)	001:		1		ent Contractor (9)					
Street Address	ai, iiic.				001	31			onmental, LLC				_	
500 Horizon Drive, S	Suito E40						5000,550	eet Address	12200					
City, State, Zip Code	Juile 340				40.000		-	23 Cutler Av					_	
	604							y, State, Zip Co						
Robbinsville, NJ 08 Project Manager for Monit		V-11/12/22		T-1-	-1		-	/laple Shade	, NJ 08052	T.,			_	
Julian Fernandez	toring Firm			1 000	phone		100	ephone No.		License No	).			
Start Date (10)		Cabad.	Jad O	100		-6946		56-755-0099		00842				
						ite (11) 19	200	me of OSHA N EMSL Analyt						
Occupancy Status During	Abatement (	Check	only o	one)			Str	eet Address	1-1					
□ Facility Closed/Vacate     □ Facil							2	00 Route 13	0 North					
Abatement Performed Time of Abatement:							City	y, State, Zip Co	ode					
Time of Abatement	AIVI	PIVI		PIVI-		AM	C	innaminson	, NJ 08077					
Scope of Work (Check all	that apply)													
			⊠ Re	novati	on				ainment with Nega	tive Pressure	9			
☐ ≥160 sf or ≥260 lf		8		molitic				Glovebag	g Procedure					
						,		☐ Non-Exe	mpted (*) and Non-	Friable Proc	edure			
V =				Locat Vorma				F26 6772 7			At	ateme	t Ty	/pe
Location of Asbestos-Containing N		1)		d Sole		Ashe	stos	Description o Containing Ma		Amount	Re	Re	П	Ē
TO BE ABA	TED			intena			e, the	rmal systems i	insulation,	(Specify	Removal	Repair	מנ	Enclosure
IN Facility (13)	у		Cus	todial ( (12)	Stan?			urfacing, VAT,		SF or LF)	<u> </u>		Encanelilate	sure
(13)			Yes	No	N/A		Oti	her miscellane	ous)				Ď	
Bathrooms						Plaster	::::::::::::::::::::::::::::::::::::::			70 SF		П	7	$\Box$
													=	
		_	<u> </u>	Ш.	-							$\square$	4	Ш
		_											]	
							- T-	727	· (c )					
Name of Registered Waste	e Hauler			62.50	JDEP \		1553 (511)	oic Yards of	Name of Registe	red Landfill	- W. C.			
Freehold Cartage				H	auler II 15939		Wa:		Fairless Lan	dfill				
City, State					10000			oosal Date	City, State				-	
Freehold, NJ								5/29/2019	Morrisville, I	PA				
Completed By (Print or Ty	pe)	Title						Signature	<del></del>		Date		_	
Christina Lynch			ce Pr	eside	nt of (	Operation	ns	Chilto	A					
					0.000	1	55	CHUND			5/13	1		

NI DOMINI	(Purs	suant t	o NJAC	BESTOS ABA 8:60 and 12			) <u>E</u>	GEI	and the special desired the second	#	1	
( K U ) ( U )	I N	ame of	Building	Owner/Ope	rator (2	2)	7)	20 N 7 0	010-	Designation of the last of the	Military Market	
of Notification (1)	1	NJDPN	ИC					MAY 7 2	119	lase		
3/19 Type Notification	S	street A	ddress	t- Ct			id the	and the same of the William			- 5-	
nicles Notified			st Sta			-	ASS	ESTOS CON	TAOL		) k	
EPA Initial Amended			ate, Zip				- John City on And Charles	LICENSING	<del></del>	gradient en		
DEP Amendment #			on, NJ of Conta				Tele	phone Number				
instification)			na Brui				60	9-433-8745		_		
DOH DCA Cancellation		FAC	ILITY II	NFORMATIO	N	Type of Facilit	v (4)					
Abstancet is Taking Place	(3)	17.0										
ume of Facility Where Abatement is Taking Place or mer Residence BLUE ACRES	A. 31					School (I	ter 8 (Oth	er than K-12)	ildinas	hon	s,	
						Other (i.	e. private	er than K-12) & commercial bu				1
reet Address		10,000				etc.) Square Feet	# 0	of Floors	Bldg. A	ge		1
Leroy Ave						2 000	2		50+			1
ity (5) South River NJ			Codo	(7)		Current Use	(Prior if be	eing demolished	)			1
County (6)		(STAT	y Code E USE C	NLY)		Abandone	d Blue	Acres		10000		1
VII dellocov	(0)	I AS	CM No.		Nam	e of Abatement	Contracto	or (9) al Stylces, Inc	С			
MadleSex  Name of Monitoring Firm Hired by Building Owner	(0)	/					onment	al Srvices, Inc				
N/A					Stree	et Address 5 Kinnelon F	d Suit	e 102				
Street Address					13	, State, Zip Coo	le , Curr					
				<del>2013 (1. 1924)</del> (1	City	nelon, NJ 0	7405					
City, State, Zip Code						ephone No.		License No				
Project Manager for Monitoring Firm		Tele	phone N	No.	90	8-448-5709		01228		_		_
			tion Dat	e (11)	Nor	me of OSHA Me	onitor .	1-0				
Start Date (10)	eduled (	Comple	tion Dat	0(1.)		annuzzi Env	. Service	es, inc		_	-	
Seconds on	Ju One)				Str	eet Address	a Cuite	102				
Occupancy Status During Abatement (Check Or	lly One)	ataman	t		3	5 Kinnelon F	d. Suite	, 102			16 CS	
Facility Closed/Vacated During Entire Period Abatement Performed Outside of Normal F	acility H	lours			Cit	ty, State, Zip Co (innelon, NJ	07405					_
Abatement Performed Outside of Norman Other – Describe:			A		K	unneion, 143	01 100					
Scope of Work (Check All That Apply)						▼ Full Co	ntainmen	t with Negative F	Pressure			
		novatio	n			× Mini-E	nclosure	d				
≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf	X De	molition	n			Glovel Non-E	pag Proce	dure (*) and Non-Fria	ble Proc	edu		
									1	1DC	oe se	
	ls l	Location	n		Desci	ription of		21 2		_	m	
Location of	Use	ormally d Solely	by	Asbestos	Cantai	ning Material (P	CM)	Amount (Specify	Re	R	Encapsulate	
Ashastos-Containing Material (ACM)	Mai	ntenano odial St	ce/	i a the	rmal SI	ystems insulations, VAT, or	)11,	SF or LF)	Remova	Repair	psul	1
TO BE ABATED In Facility	Cust	(12)	laii:	0	ther mis	scellaneous)			à	7	ate	1
(13)		No	N/A							-	-	+
Less.	Yes	No			,	VAT		35 SF	X	-	+-	+
Rear Vestibule			X			& Mastic		400 SF	X	_	1	-
Basement Floor			X			& Mastic		400 SF		1	1	
Attic Floor			X		VAI	& Mastic						
Autorioo						Vardo	Name of	Registered Lan	dfill			
S .: tared Waste Hauler		1	NJDEP	Waste	Cubic of Was			VS Fairless				
Name of Registered Waste Hauler			Hauler I 17467	D INU.	30	5.3				-		_
Yannuzzi Group, Inc.			11 101		Dispo	sal Date	City, St	sville, PA				
City, State					/	1 1	VIVIOITE	, i i i i	Date			
Kinnelon, NJ	Title				3	Signature	1,11	1.	5/13	/19		_
Completed by			Manag									

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	02 PAI	D	NOTII	FICATIO	tate of Ne N OF ASE t to NJAC	ESTOS	ABATE	MENT 0)	Language and produced and produ	10),	EC	E			
Date of Notification (1) 5/13/19				Name o	of Building PMC	Owner/	Operato	r (2)			MAY	1 7	2019	_	-
Agencies Notified	Type Notification	1			Address	NS1-			44		1411.11		2015	-	hages
EPA	✓ Initial			- CONTRACTOR - CO.	est State				7.3-9.4	ya L	ACRECT	00.0	SNUTCH	مىنىت ئا	l
DEP DOL	Amended Amendmen	+ #			ate, Zip Co	ode			4.		E the see her to .	CENS		<del>. G</del>	
	Emergency	(including			on, NJ				E.		Mandin Subsection Desperate		urd Territoria de la compansión de la comp	bracer	Arguston and a
DOH DCA	justification Cancellatio				of Contact na Bruno					11 6333	lephone N				
					ILITY INF		ION			60	)9-433-8	3/45			
Name of Facility Where A	Abatement is Taki	ng Place (3	3)	1710	activities.	ORWAI	ION	Туре с	f Facility (	(4)				-	
former Residence E	BLUE ACRES							Пѕ	chool (K-1	(2)					
Street Address								S	ubchapter	8 (Oth	er than K-	-12)			
15 Maple St									ther (i.e. p c.)	orivate	& commer	rcial bu	ildings,	om	es,
City (5) South River NJ								Square 2,000	Feet	170	f Floors 1/2		Bldg. A	Э	
County (6) Middlesex					Code (7)	1		Curren	t Use (Pri	or if be	ing demoli	- 1		-	
Name of Monitoring Firm	Hisad by Duilding	0(0)							doned E						
N/A	rified by Building	Owner (8)		ASCI	VI No.				ment Cor		(9) Srvices	. Inc			
Street Address							Street	Address				,		_	
City, State, Zip Code								tate, Zip	on Rd , S	Suite	102				
							14.5%		J 07405	5					
Project Manager for Monit	toring Firm			Telepho	ne No.		100000000000000000000000000000000000000	one No.			License	No.		-	
Start Date (10)		Cabadal	10	1.0				448-57			01228				
5-14-					Date (11)				Monitor		1				
Occupancy Status During	Abatement (Chec	k Only On	ie)	7-1	9			Address	nv. Serv	rices,	Inc				
Facility Closed/Vacat				nent					Rd. Su	ite 10	12				
Abatement Performe Other – Describe:	d Outside of Norm	nal Facility	Hours	3			City, S	tate, Zip	Code					-	
Scope of Work (Check All	That Apply)						Kinn	elon, N	J 07405	5					
≥3 sf or ≥3 lf	(F-3)	Пь	lenova	tion			×	1							
≥160 sf or ≥260 lf			emolit				××	Glove	Enclosure ebag Proc	edure	Negative				
		ls	Locati	on				14011	ZXCITIPICU	( ) and	1 NOII-I IId	DIE FIG	Abate	-	
Location	of	N	lormal	ly		Des	scription	of					Туј		
Asbestos-Containing N TO BE ABA	Material (ACM)		d Sole ntenai		Asbest	os Conta	aining M	aterial (A	ACM)		mount			п	_
In Facility		Cust	odial S	Staff?	(i.e.		systems sing, VA	insulation	on,		pecify or LF)	Ren	Re	ופיים	ncl
(13)		(12)	_			niscellan				J. 2. )	Remova	Repair	Enconculata	Enclosure	
		Yes	No	N/A										Ď	Ф
First Floo	or	-		Х		VAT	Substr	ate		25	0 SF	Х		_	
												_		_	
							-					-		_	
Name of Registered Waste	Hauler		IN	JDEP W	aste	Cubic \	Yards		Jame of E	Pagieto	red Landfi				
Yannuzzi Group, Inc.			H	auler ID		of Was			GROWS	1000					
City, State Kinnelon, NJ						Dispos	al Date	19	City, State						
Completed by		Title				1 6.	1		Morrisvi	lle, P					
John Mucha			ct Ma	nager		Si	gnature	1	Mar	(~	1,74,935	ate /13/1	9		

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

Check # 25876

Date of Notification (1) 5/14/2019  Agencies Notified  Type Notification  Initial		f Building Owner/				transaction and the			
	0		Front	Porch Realty L	4831				
	Street A	ddress	Р	O Box 4636	II II MAY	1 -	7 20	19	
DEP Amended	City, Sta	ate, Zip Code			Į			_	-
X DOL Amendment # Emergency (including			Highlan	d Park, NJ 089	POLICE			30	d &
DOH justification)  Cancellation	Name or	f Contact Jeffery Aar	on		Telephone Num (732) 80				\$08Nuccess
	FACI	LITY INFORMAT			(102)00	1-0-1		_	
Name of Facility Where Abatement is Taking Place (3) Residential				Type of Facility (4	4)				
Street Address				School (K-1) Subchapter	2) 8 (Other than K-12	2)			
				Other (i.e. p etc.)	rivate & commercia	al buil	dings,	ho	es,
City (5) Highland Park, NJ 08904				Square Feet 2500	# of Floors	7.398	8ldg. A	_	
County (6) Middlesex	County (	Code (7) USE ONLY)			or if being demolish		-	_	-
Name of Monitoring Firm Hired by Building Owner (8)	ASCM	1 No.		of Abatement Con		-		_	_
MECS Street Address				ens Environme Address	ntal Services, I	nc.			
PO Box341				Box 322					
City, State, Zip Code Chesterfield, NJ 08515				tate, Zip Code town, NJ 0850	1				
Project Manager for Monitoring Firm Bill Weisgarber	Telephor	ne No. 08-4070	Teleph	none No.	License N	0.		-	-
Start Date (10) Scheduled Col				259-9688 of OSHA Monitor	00493			_	
5/24/2019 5/	/31/201		MEC						
Occupancy Status During Abatement (Check Only One)				Address Box 341					
Facility Closed/Vacated During Entire Period of Abater Abatement Performed Outside of Normal Facility Hour				tate, Zip Code		-		_	-
Other – Describe:			Ches	sterfield, NJ 08	515				
Scope of Work (Check All That Apply)  ≥3 sf or ≥3 If  × Renova			Г	1					
≥3 st or ≥3 if			×	Mini-Enclosure Glovebag Proc					
Is Local	tion			1 Non-Exempled	( ) and Non-Fhab		Abate		
Location of Norma	lly		scription			_	Ту		
TO BE ABATED  Maintena  Custodial	ince/	Asbestos Con (i.e. thermal			Amount (Specify	Z.	7	Enc	E
In Facility (13) Custodial (12)			cing, VA		SF or LF)	Remova	Repair	Encapsulate	Enclosure
Yes No	N/A			*		<u>a</u>		late	ıre
Basement X		Thermal	Pipe In	sulation	220 If	Х		_	
								_	
								-	
	NJDEP W Hauler ID	No. of Wa	Yards ste		Registered Landfill			_	
	18292		3	Fairless	1			_	
City, State Allentown, NJ			sal Date /2019	City, State					
Completed by Title		S	Signature	11 11 1	Da			-	
Mahlon E. Stevens Project Ma	anager		11/			5/14	/2019	<del></del>	

CKall9 PA	ID		ICATION ursuant	ate of Ne I OF ASB to NJAC	8:60 and	ABATE d 12:12	0)	т <sub>е</sub> г түн өздей. Задайда өзгөөжөөж	Din	The second secon				_ <u>₩</u>		The second second second
Date of Notification (1) 5/14/19				f Building Silberber		perato	r (2)		LIL	7	M	AT	1	201	3	-
Agencies Notified Type Notificat	ion		Street A					1		A	SEE	STOS	S CO ENSIN	NIF	DL &	
EPA	ent # <u>1</u> ncy (including on)	-	Paran Name o	ate, Zip Co nus, NJ f Contact Silberber	07652				1	Tele	ephon			101		
Cancella	tion			LITY INFO		ON			-							-
Mame of Facility Where Abatement is Ta Residential Home Street Address	aking Place (	3)			Oldinati			of Facility School (K- Subchapte Other (i.e. etc.)	-12) er 8 (0					dings,	hom	3,
Caly (5) Paramus								re Feet	- 11	# of 2	Floor	S	100000	ldg. <i>A</i>		1
County (6) Bergen Name of Monitoring Firm Hired by Buildi	na Owner (9)			Code (7) USE ONLY	)	Name	Res	ent Use (Pridential I	Hom	ne		nolish	ed)			_
Project Manager Sheet Address	ng Owner (6,		ASON	// NO.		All S Street	Stages Addre	Abatem	nent		(9)					-
City, State, Zip Code								ip Code ook, NJ	076	63						_
Project Manager for Monitoring Firm			Telepho	ne No.		100000000000000000000000000000000000000	hone N -600-3				Licer 013	nse N 05	٥.		7 20	ं
Start Date (10) 5/20/19	Schedul 5/25/1		npletion	Date (11)		Name	of OSI	HA Monitor	ſ							-
Facility Closed/Vacated During Ent Abatement Performed Outside of N Other – Describe: 8AM to 4 P.M	re Period of	Abaten					Addres	ip Code								-
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	=	Renova Demolit				2	Mir	I Containm ni-Enclosur ovebag Pro	re ocedu	ıre						122
	1000	Locati	10.00				□ NO	n-Exempte	(°)	and	Non-	Friab	T	Abate		
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	ed Sole iintena todial 3 (12)	ly by nce/		tos Conta thermal surfac		Material s insula T, or			(S	mount pecify or LF		Removal	Repair	Encapsulate	
Main Area Basement	Yes	No X	N/A			VAT				26	4 SF		×		œ.	-
Closet		×				VAT		ta di scocco cima		_	6 SF		X			100
Walk-In Closet		X				VAT				247	4 SF					1
Laundry Room		X				VAT					SF		X			-
Lauridity Room Laurid		N	IJDEP W lauler ID 036592	No.	Cubic of Was	Yards	0.024	Name of Grand		iste	red La		x / Lar	dfill		3
City, State Saddle Brook, NJ		- 11 1 1 1			Dispos TBD	al Date	1	City, Sta Pen Ar		PA	Ą					
Completed by Richard Cristofol	Title Pres	ident			Si	ignature		1	//	_	>-	Da 5/	te 14/19	9		- 5

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n	4	_	-	-	nin	
		_	n	П	11	

CKA120 PA		NOTIF (F	ICATIO	tate of New Jer N OF ASBESTO t to NJAC 8:60	S ABATE	MEN <sup>®</sup>		$\overline{n}$	E G	E		$\mathbb{V}$	
Date of Notification (1) 5/14/19				of Building Owne ard Burke	r/Operato	r (2)	The state of the s	M	h ! A !	v l	-79	0010	
Agencies Notified Type Notification			Street A	Address				111	MA	¥ - 1	-/-	2019	
EPA Initial							AL and Street	-					ra kindan medi
DEP Amended Amendmen	#1			ate, Zip Code	004		epopular 7	2	ASBES	TOS	001	VIAC	118
	(including	<del>,</del>		enfield, NJ 07	621				ATHERE EMPIRE SERVICE	_	NSIN	10	hacile de la
DOH justification)				rd Burke				16	elephone	e Nur	nber		
	<u> </u>		201000-2000000	ILITY INFORMA	TION		<i>A</i>			-			
Name of Facility Where Abatement is Takir	g Place (	3)				Тур	e of Facility	(4)					
Residential Home							School (K-	12)					
Street Address							Subchapte Other (i.e.	er 8 (Ot	her than	K-12	2) al buil	dinas	hon
65.76						×	etc.)						
City (5) Bergenfield						Squ 170	are Feet		of Floors	3		Bldg. A	
County (6)			County	Codo (7)				2		11 . 1.	1	65 +/-	
Bergen				Code (7) USE ONLY)			ent Use (Pr sidential I			iolish	ed)		
Name of Monitoring Firm Hired by Building	Owner (8	)	ASC	л No.	Name	2654	atement Co						
Project Manager						s Abatem							
Gireet Address			Street				778	_					
							idland Av	e.					
City, State, Zip Code					10 3 3 3 3 5 5 5 6 7		Zip Code	0700					
Project Manager for Monitoring Firm			Talaska	- N			rook, NJ	0/66					
Project Manager for Monitoring Firm			Telepho	ne No.	Teleph 201-		No. 3184		Licen 0130		0.		
Start Date (10)	Schedul	ed Cor	noletion	Date (11)			SHA Monitor		0130				_
5/15/19	5/19/1		npicaon	Date (11)	Ivanie	01 00	I IA WOULD						
Occupancy Status During Abatement (Chec	k Only O	ne)			Street	Addre	ess						
Facility Closed/Vacated During Entire I	Period of	Abaten	nent										
Abatement Performed Outside of Norn  Other – Describe: 8A.M to 4 P.M	nal Facility	y Hours	3		City, S	State, 2	Zip Code						
Scope of Work (Check All That Apply)						71 <del>2)</del>							_
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		Renova Demolit			×	Mi Gl	ull Containm ini-Enclosur ovebag Pro on-Exempte	e cedure					
	10	Locati	ion.				JII-EXEMPLE	u ( ) ai	10 14011-1	TIAUI	1	Abate	
Location of	1	Locati Normal	ly	-	escription	of						Ту	
Ashestos-Containing Material (ACM)	100000000000000000000000000000000000000	ed Sole		Asbestos Co	ntaining M	/lateria			Amount				ш
TO BE ABATED In Facility		todial S		(i.e. therm	al systems facing, VA		ation,		Specify F or LF)		Remova	Re	Encapsulate
(13)		(12)			miscellar			Ĭ	,		lova	Repair	sula
	Yes	No	N/A								-		ate
Basement Bedroom		×			VAT			2	55 SF		x		
Basement Bedroom		x		F	ipe Wra	ap		_	31 LF		X		_
				•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			`		11-22-1	^		- 170
Hame of Registered Waste Hauler		10000	JDEP W auler ID		c Yards aste		Name of						
All Stages Abatement		10000	036592				Grand	Centr	al San	itary	Lan	dfill	
City, State				Disp	osal Date	-0.5	City, Stat		**************************************				-
Saddle Brook, NJ				TBE			Pen Ar	gyl, P	A				
Completed by Richard Cristofol	Title Pres	idest			Signature	1	11	4	5	Dat			
All Chistolol			M	1 11	_		5/1	4/19	1				

													Г	P	nt Form
CN 2121 PA	MD		CATION	ate of New I OF ASBES to NJAC 8:	STOS A	BATE		Wanter Day of Manager Const. Ast.	Dr	E C			$\mathbb{V}$	<u>[</u>	Parameter
Diele of Notification (1)				f Building O		perator	(2)	Elling Control appropri		MΑ	Y 1	7	2019	9	២
Agencies Notified Type Notification			Street A					100	-			-			Para de la composición del composición de la composición de la composición de la composición del la composición del composición del composición de la composición del composición
⊠ EPA ☐ Initial								Aprilion de la casa	j	SBES				OL.	A
DEP Amended Amendment #	£ 1			ate, Zip Cod a, NJ 078					- mentinana	Control State of State of	LIGE	ASIL	40	Shelito	U
Emergency (in				f Contact	1 1				Tele	ephone	Numh	er	_		-
DOH justification) Cancellation		- 1		en Rosen	nfeld				1	- p o o					
Thurs of Eacility Where Abstement is Taking	Diago (2	2)	FACI	LITY INFO	RMATIC	NC	Tuno	of Facility	4)						
Hame of Facility Where Abatement is Taking Residential Home	Place (3	5)						of Facility	527 conne						
Street Address								School (K- Subchapter	8 (Oth						
								Other (i.e. petc.)	orivate 8	& comm	ercial	build	ings,	hon	S,
City (5) Sparta							Squa 190	are Feet	# of 2	Floors		11 252	dg. A 5 +/-	2000	
County (6)		T	County	Code (7)			0.55	ent Use (Pri	N=0	na demi	olishe		3 +/-		
Sussex				USE ONLY)				sidential F		ng donn	Olionic	۷)			
Name of Monitoring Firm Hired by Building O	wner (8)		ASCN	/ No.				atement Cor		(9)					
Project Manager								s Abatem	ent						-
Sheet Address						Street 280			е.						
280 N. Midland Ave.  City, State, Zip Code  City, State, Zip Code															
								rook, NJ (	7663						
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph 201-				Licens 0130					
Start Date (10) 5/16/19	Schedule 5/20/19		pletion	Date (11)		Name	of OS	HA Monitor							
Goodpancy Status During Abatement (Check	Only Or	ne)				Street	Addre	ess							
Facility Closed/Vacated During Entire Pont Abatement Performed Outside of Normal Other – Describe: 8A.M to 4 P.M						City, S	tate, Z	Zip Code			7-3				
Scope of Work (Check All That Apply)															-
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renoval Demoliti				×	Mi	ull Containm ini-Enclosur ovebag Pro on-Exempte	e cedure					•	
	le le	Location	20				_ INC	DII-EXEMPLE	J ( ) all	u NOII-F	Habie		Abate		
Location of	1	Vormall	у		Des	cription	of						Ту	ре	-
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Ma	ed Solel iintenar todial S (12)	ice/	1300000000	hermal	system: ing, VA	s insul T, or	ation,	(5	mount Specify or LF)		Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A									i i		te	Ф
Storage Room		x				VAT			8	5 SF		X			
Storage Room		х			N	/lastic			18	37 SF				x	
Laundry Room		х				VAT			7	6 SF		X			
Laundry Room		х			N	/lastic	) )		7	6 SF				×	
Name of Registered Waste Hauler		1100	JDEP W	9,000,000	Cubic '			Name of	000				U.SEV-1		
All Stages Abatement		11	36592	950	3 yd			Grand	Centra	al San	itary	Lan	dfill		
City, State					Dispos TBD	al Date		City, Stat		٨					
Saddle Brook, NJ Completed by	Title				100000000000000000000000000000000000000	ionatura	• 4	Pen Ar	gyi, P		Date				-
Completed by Title Signature Date 5/14/19															

3 & G proj. #: 2019-116

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

						Check	# 9292	-	
Date of Notification (1)	Name o	f Building Owi	ner/Operator (2	)		InE	GEIV	E	1
10  5  / 1  4  / 1  9	Benja	amin McCa	rdell			IIU	the made with a country of a company with the Polymer Country of		CONTRACTOR OF STREET
Agencies Notified Type Notificati	on Street A	ddress					MAY 7 20	1	U
DEP Initial							NIFLI / CU		hamesta
DOL Amendr		te, Zip Code gston, NJ (	07039			ASF	ESTOS CONTI	JL&	
<b>▼</b> DOH	Name of						LICENSING e Number		
DCA Cancella	ation	jamin McCa	ardell				- www.		
			CILITY INFORM	ATIO	N				
Name of facility where abatement is	s taking place (3)					Type of Facility (	4)		
Benjamin McCardell	0, ,,						(K - 12)		
Street Address		***************************************					apter 8 (Other tha Private/Commerc		
						Bldgs./	Homes, etc.		
City (5)	County (6)			Co	unty Code (7)	Square Feet	# of Floors	3ldg. A	.ge
Livingston, NJ 07039	Essex			Total Section Co.	ate use only)	Current Use (P	rior if being demol	hed)	_
Name of Monitoring Firm Hired by B			1 4003431		Nome of Abeliance	residential			
Hame of Monitoring Filli Filled by E	Jug. Owner (0)		ASCM No.		Name of Abatement (	Control of the Contro			
Street Address				-	B & G Restoration				-
					105 Ryerson R	oad			
City, State, Zip Code					City, State, Zip Code	11.07025			
Project Manager for Monitoring Firm		Phone Numb	her	-	Lincoln Park, N	NJ U7U35	License Number		
,		i none ram	001		(973)696-6869	)	00378		
Scheduled Start Date (10)	Sched. Comp	letion Date (1	1)	-	Name of OSHA Monit				
05/24/2019	05/25/201	9			B & G Restorati	on, Inc.			
Occupancy Status During Abatemen	ann a' agus - Thao 12 - Chairtean Le <del>a</del> nna Chaireach	P.00	DAY S		105 Ryerson Ro	pad			
Facility closed/vacated during Abatement performed outside					City, State, Zip Code				
Describe:				-	Lincoln Park, N.	J 07035			
Scope of Work (check all that apply	)								-
Пъ	Renovation				Full Containment w/neg	ative pressure	Glovebag proc	iure	
>3 sf or >3 lf	≥160 sf or ≥260 lf			X	Mini-enclosure		Non-friable pro		
Location of	Is location normal by maintenance/		у				RII	E	E
asbestos-containing material to be	staff(12)		Description material (		asbestos-containing	Amount (Specify S	m   ;	n	n
abated in facility (13)	Yes No	N/A		,		LF)	v i	p	L
asement boiler rm & play room		X	pipe insula	ation		68 If	X	10	
								口	
								#	H
-			]		1			#	H
Registered Waste Hauler B & G Restoration, Inc.	NJDEP Haul 19563	er ID# C	Subic Yards of V	Vaste	Name of Registered I Grand Central			1	1-
City, State Lincoln Park, NJ		Disposal D	Date 28/19		City, State Pen Argyl, PA				
	Title Secretary/Trea	asurer	Signature		Gordana Luna		Date 05/14/2019		_
	- 30.0.a.j, 1100				0		00/1-1/2010		

Dillan DeCaro

ASB-41 JAN 13

# State of New Jersey NOTIFICATION OF ASSESTOS ABATEME

I.	AUD	NO				AC 8:60 and 5:1		chrt	73	25	d
Date of Notification (1)				Name	e of Buildir	ng Owner/Operator (	(2)	NEGI	3 1	\\//	1 =
	14 /	19		1		mmunications	To the Notice of Street, Stree		=	U	
Agencies Notified	Type Notificat	ion	ille ille	Stree	t Address			1			- 111
□ EPA	☑ Initial			15	East Mo	ntgomery Street	Signature of the state of the s	ILI MAY	17	2019	
☑ DOH	Amended Amendmer	a+ #		City,	State, Zip	Code		i i			- I harranta
DCA	Emergency	-	-	Pit	tsburgh,	PA 15212	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ASBESTOS	1.00%	77777	
(NJAC 5:23-8)	justification	1)	9	Name	e of Contac	ct		Telephone Num			
	☐ Cancellation	n		An	thony Po	orta		412-633-403	CALL CONTRACTOR	- ALEXANDER	Mil. defect of a con-
		777-100-100		FA	CILITY II	NFORMATION					
Name of Facility Where A			e (3)				Type of Facility	(4)			-
Verizon Middletowr	Central Offi	ce					School (K-1				
Street Address							Subchapter	8 (Other than K-12 private and comme	2) vrcial b	uildina	6
1009 State Route 3	5						homes, etc.	)	i ciai bi	illuling	5
City (5)							Square Feet	# of Floors	В	dg. Ag	
Middletown							12,425	2		+-50	
County (6)				Cou	nty Code (7	7)(STATE USE ONLY)	Current Use (Pr	rior if being demoli	shed)		
Monmouth							Verizon				
Name of Monitoring Firm		ng Owner	(8)	ASCM	No.	Name of Abateme	(6)		7.77		
Chubb Global Risk	Advisors					BRISTOL EN	VIRONMENTA	L, INC.			
Street Address						Street Address					
10 Exchange Place		25-1-A-022				1123 BEAVE					
City, State, Zip Code						City, State, Zip Co					
Jersey City, NJ 073						BRISTOL, PA	19007				
Project Manager for Moni Brian Kingsbury	toring Firm			phone		Telephone No.		License No.		TO A SHAPE OF THE	
Start Date (10)	100	bodulad C		01-356		215-788-6040		00509			
5 /28 /		heduled C				Name of OSHA M BRISTOL EN	lonitor VIRONMENTA	L, INC			
Occupancy Status During						Street Address				-	-
☐ Facility Closed/Vacate	d During Entire	Period of	Abate	ment		1123 BEAVER	R STREET				
Abatement Performed Time of Abatement: 6:	Outside of Norr	nal Facilit	y Hou	rs - Des	scribe	City, State, Zip Co	ode		1000		-
		"P	IVI	AIVI		BRISTOL, PA	19007				
Scope of Work (Check all	that apply)					Π = " ο					
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>			novat molitic			☐ Mini-Encl	Procedure	gative Pressure on-Friable Procedu	re		
			Locat						Ab	ateme	n Type
Location of			Norma			Description of			72-73		
Asbestos-Containing N TO BE ABA	red (ACM)	Ma	intena	nce/		stos Containing Mat ., thermal systems i		Amount (Specify	Removal	Repair	Enclosure
IN Facility	/	Cus	todial	Staff?	,	surfacing, VAT,	or	SF or LF)	oval	=	Sur
(13)		Yes	(12) No	N/A	-	other miscellaned	ous)				0
Roof				N/A	Roof FI	ashing		700 SF			- +
Roof						Stone Caulk		300 LF			
Side of Building					Caulk			88 LF			
		П									
Name of Registered Waste	e Hauler		N	JDEP V	Vaste	Cubic Yards of	Name of Regis	tered Landfill			- 1
SERVICE TRANSPO	RT GROUP, I	NC.	1997.0	auler ID	No.	Waste	MINERVA				
City, State				20990		Disposal Date	City, State			-	-
YARDLEY, PA						TBD	WAYNESB	URG, OH			
Completed By (Print or Type	oe) T	itle				Signature		0.10, 0.1	to		

Estimator

<sup>\*</sup> Do not use this form for asbestos licensure exempted activities.

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)													
Date of Notification (1)  5 /	15 /		19		10 0	me of Build		Owner/Operator	(2) #1905-5482	Check		7 201	9 1
⊠ EPA	Type Notif	ficatio	n			eet Addres		ue		ACLI	The second second	CHTP	it .&
The state of the s	☐ Amend					, State, Zip							
□ DHSS	Amend			_		lewark, N							
DCA (NJAC 5:23-8)	☐ Emerge justifica			ing		ne of Conta				Telephone N	lumber		
	☐ Cancell					anielle L		ud		908-756-			
										900-756-	1130		
Name of Facility Where Ab	atomont in	Taki	na Dla	(2)		ACILITY	INF	ORMATION	1				
PSE&G Ewing Subst		Iaki	ng Pia	ce (3)					Type of Facility				
Street Address	lation								School (K-12	2) 8 (Other than k	(12)		
1475 Prospect Street	t								Other (i.e., p	rivate and com	mercial b	uilding	S,
City (5)									Square Feet	# of Floors	E	Bldg. Ag	je
Ewing, NJ 08638									**			0070	
County (6)					Co	unty Code	(7)(S	TATE USE ONLY)	Current Use (Pr	ior if being dem	nolished)		
Union								COSTO DE HARMO EN EL COSTO PAR ES ANA DE PROPERTO DE LA CONTRACTOR DE LA C	Substation	3	,		
Name of Monitoring Firm H	ired by Bui	ilding	Owner	(8)	ASC	M No.	IN	lame of Abateme	ent Contractor (9)				_
Health & Safety Servi	ices							AbateTech, I					
Street Address							S	treet Address					
PO Box 365								30 Maple Ave	PO Box 25				
City, State, Zip Code				9			0	ity, State, Zip Co					
Berlin, NJ 08009								Lumberton, N					
Project Manager for Monitor	ring Firm			Te	lephon	e No	+	elephone No.	10 00040	License No.			
James Proctor						4-8850		609-265-2107		00529			
Start Date (10)	1	Sche	duled (			ate (11)	N	ame of OSHA M		00329			
	19		6	/ _2		19		EMSL Analyti					
Occupancy Status During A							S	treet Address					
☐ Abstament Bode and C	During Enti	ire Pe	riod of	Abat	ement			200 Route 130	TO THE PARTY OF TH				
Abatement Performed On Time of Abatement:	utside of N AM-	orma	i Facilii M/	ty Hot	ırs - De 1_	Scribe	Ci	ity, State, Zip Co	de				-
								Cinnaminson	, NJ 08077				
Scope of Work (Check all the	at apply)								ainment with Nega	ative Pressure			
<ul> <li>≥3 sf or ≥3 if</li> <li>≥160 sf or ≥260 if</li> </ul>			□ Re					☐ Mini-Enclosed Glovebag Mon-Exen		ı-Friable Proce	dure		
			155	Loca								ateme	nt ype
Location of				Norma	ally ely by			Description of					
Asbestos-Containing Mat TO BE ABATE		1)			ance/			Containing Mate ermal systems in		Amount	Removal	Repair	Enclosure
IN Facility	=		Cus		Staff?	(1.6		surfacing, VAT,		(Specify SF or LF)	ova	=	DSUI
(13)				(12)		-	0	ther miscellaneo	ous)		-		e late
Control House	Control House Yes No N/A							ines		16 SF			
Exterior													
						Stucco		_		450 SF		Ш	
Roof						Roofing	g Ma	aterial		120 SF			
Name of D. 11													
Name of Registered Waste H				199	IJDEP lauler I		SYSCOS	bic Yards of	Name of Registe				
Environmental Transp	ort Grou	p, IN	C.			92061		este 10	Grows- Fair	less Landfill			
City, State							_	posal Date	City, State				
Flanders, NJ							6	3/28/19	Morrisville,	PA 19067			
Completed By (Print or Type)		Title						Signature	7	~ [[	Date	4	
Gwendolyn Trumbetti Operations Coordinator 5   5   1									1				

### State of New Jersey NOTIFICATION OF ASBESTOS ABAT (Pursuant to NJAC 8:60 and 5:16 Name of Building Owner/Operator (

520 Nugentown Road

Little Egg Harbor, NJ

**FACILITY INFORMATION** 

County Code (7)(STATE USE ONLY)

Kevin MacDonald

Street Address

City, State, Zip Code

Name of Contact

ASCM No.

Telephone No.

Scheduled Completion Date (11)

6 / 28 / 19

856-840-8800

Pinelands Regional School

ew Jersey BESTOS ABAT C 8:60 and 5:1			[ W [	The second secon
Owner/Operator (	(2)	H MAY 1	7 2019	$\parallel U \parallel$
경우 이 경우 나는 아이를 보고 있다면 얼마나 하나 있었다.	CONTRACTOR OF THE PARTY OF THE	1808-5359 Chec	k#	
egional concor	District? COD II	Lancon		1
wn Road		ASBESTOS C LICENS		#6.000
ode				
arbor, NJ				
		Telephone Numbe	r	
onald		856-662-9500		
FORMATION		And the first of the second se		
Oranization	Type of Facility (	4)		
	School (K-12)			
	☐ Subchapter 8	(Other than K-12)		
	Other (i.e., pri	ivate and commerci	al buildings,	
	Square Feet	# of Floors	Bldg. Age	
	Square reet	# 011 10013	blug. Age	
(STATE USE ONLY)	Current Use (Price	l or if being demolishe	 ∋d)	-
Name of Abateme	ent Contractor (9)			-
AbateTech, Ir				
Street Address				
30 Maple Ave	. PO Box 25			
City, State, Zip Co				
Lumberton, N				
Telephone No.		License No.		-
609-265-2107		00529		
Name of OSHA M				
EMSL Analyti				
- Arrent				_
Street Address	O North			
200 Route 13				
City, State, Zip Co				
Cinnaminson	, NJ 08077			
☐ Mini-Encl	Procedure	ative Pressure		
			Abatemen	Туре
** <u>*</u> **************	- 1	-		

Scope of Work (Check all that apply)  □ ≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf	-	novati molitic			☐ Mini-Enc ☐ Glovebag	tainment with Ne losure g Procedure mpted (*) and No	-					
	3.7	Locat						Al	atem	en	Ту	ре
Location of Asbestos-Containing Material (ACM TO BE ABATED IN Facility (13)	) Use Ma	Norma ed Sole iintena todial (12)	ely by ince/		Description o estos Containing Ma e., thermal systems surfacing, VAT, other miscellane	terial (ACM) insulation, , or	Amount (Specify SF or LF)	Removal	Repair	Linahonian		Enclosure
	Yes	No	N/A							Ţ,	1	
Various Bathroom/Locker Rooms		$\boxtimes$		Bathro	oom fixture caulk		600 LF			]		
Cafeteria				Cove	Base Mastic		400 LF			[		
										[	1	
										1	1	
Name of Registered Waste Hauler AbateTech, Inc.	-	100	JDEP \ lauler II 18750	No.	Cubic Yards of Waste 40	Name of Regis						
City, State Lumberton, NJ			10100		Disposal Date 6/28/19	City, State Tullytown,	, PA					
Completed By (Print or Type)  Gwendolyn Trumbetti	Title Operati	ions (	Coord	inator	Signature	MI		Date 5	-15	>	1	5
ASB-41			-			) V			W			

Date of Notification (1)

Agencies Notified

(NJAC 5:23-8)

Street Address

City (5)

County (6) Ocean

Street Address

City, State, Zip Code

Jim Guilardi

Start Date (10)

**⊠** EPA

**⊠** DOLWD

**⊠** DHSS

☐ DCA

5

15

Name of Facility Where Abatement is Taking Place (3)

Name of Monitoring Firm Hired by Building Owner (8)

Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement

☐ Abatement Performed Outside of Normal Facility Hours - Describe

Time of Abatement: \_\_\_\_AM-\_\_\_PM/\_\_\_\_PM-\_\_\_AM

Pinelands Junior High School

590 Nugentown Road

Little Egg Harbor, NJ

TTI Environmental

1253 North Church Street

Project Manager for Monitoring Firm

\_\_8\_\_ / \_\_22\_\_ / \_\_18

Moorestown, NJ 08057

☐ Initial

1

Type Notification

Amendment #8

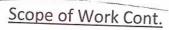
justification)

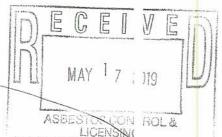
☐ Cancellation

☐ Emergency (including

19

CK1131	51	PA	NO	TIFI (	CATI Pursu	State of ON OF As ant to NJ	SB	w Jersey ESTOS ABA 3 8:60 and 5:	ATEMENT 16)	Pin ( - ) ( Free of Table )	BI	1000			and land	
Date of Notification (1)		327		- 7	Na	me of Buildi	ing	Owner/Operator	(2)			M	AY	17	-6	19
	13	/ <u> </u>	19			PSE&G /			# 1904-5460		-	heck#	‡1131	5		
Agencies Notified	Type Not		n		Str	eet Address				-		ASBE	STO	SCO	Ω.	HUL
☑ EPA ☑ DOLWD	☐ Initial ☐ Amen				4	000 Hadle	y F	Road		å	and the Second	whether the party		ENSI		MMG-2-570
☑ DHSS		dment	#2		City	, State, Zip	Co	de		-					_	-
DCA	☐ Emerg		-	ina	S	outh Plair	nfie	eld, NJ								
(NJAC 5:23-8)	justific	cation)		J	0.000	ne of Conta				1	Telepho	ne Nu	mber		_	
	☐ Cance	ellation			P	atrick Dis	pot	to			908-9	86-57	41			
		Hard State of the			F	ACILITY II	NF	ORMATION						- 1		-
Name of Facility Where A				ce (3)					Type of Facility	(4)						
PSE&G- Madison S	treet Sub	statio	n						☐ School (K-1	2)						
Street Address			0.00						Subchapter Other (i.e., p	8 (0	Other th	an K-1	2)	ب الماليينا	22	
1160 Madison Stree	t								homes, etc.	) .)	ite and	comm	erciai	bullain	g:	
City (5)									Square Feet		# of Flo	ors	1	Bldg. A	λa	
Hoboken									1427 POSES						3	
County (6)					Co	unty Code (7	7)(S	TATE USE ONLY)	Current Use (Pr	rior	f being	demol	ished)			
Hudson									Substation		3		,	3		
Name of Monitoring Firm I		uilding	Owne	r (8)	ASC	Л No.	N	ame of Abateme	ent Contractor (9)	)						
Health & Safety Sen	/ices							AbateTech, I								
Street Address							St	treet Address		1-0					_	
PO Box 365								30 Maple Ave	e. PO Box 25							
City, State, Zip Code							-	ity, State, Zip Co								
Berlin, NJ 08009						_		Lumberton, N	J 08048							
Project Manager for Monito	oring Firm	-		Tel	ephone	No.	-	elephone No.		-	icense	No.				-
James Proctor		- 5.		0000		4-8850		609-265-2107			0052	9				
Start Date (10)		Sched	duled (	Comple	etion D	ate (11)	Na	ame of OSHA M	lonitor						_	
4 /22 / _	19		5		4_ /	19		EMSL Analyti	cal							
Occupancy Status During A	Abatement	(Check	k only	one)			Str	reet Address			W				_	
1 Facility Closed/Vacated	During En	tire Pe	riod of	Abate	ment		2	200 Route 130	0 North							
Abatement Performed C	Outside of N	Vormal	Facilit	y Hou	rs - De	scribe		y, State, Zip Co		-					_	
Time of Abatement:		PN	///	PM	_	_AM		Cinnaminson								
Scope of Work (Check all the	nat apply)							The second control of							_	-
≥3 sf or ≥3 If			ПВ	enovati	on			☐ Full Conta	ainment with Neg	ativ	e Press	ure				
☐ ≥160 sf or ≥260 lf				molitic					Procedure							
								Non-Exen	npted (*) and Nor	n-Fri	able Pr	ocedu	re			
Location of				Locat Vorma									Ab	ateme	en	Гуре
Asbestos-Containing Ma		(N)		d Sole		Ashesi	toe	Description of Containing Mate			Λ		R	Re	ū	Щ
TO BE ABATE	<u>D</u>			intena todial				rmal systems in			Amour (Speci	50.752	Removal	Repair	Elicabsulate	Enclosure
IN Facility (13)			Cus	(12)	otan?			surfacing, VAT,			SF or L		Val		Sul	sure
(1.5)		İ	Yes	No	N/A	1	Oti	her miscellaneo	us)						e	
Control House						Door Cat	ulk	P. C.			10 LF	:			_	-
Control House						Cement I		- 0			95 SF				<u>_</u>	H
Control House				П		Window	3777.5			_	12 LF					#
KV Yard				П		Transite					300 L				<u>-</u>	旹
ame of Registered Waste I	Hauler			I N	JDEP V			oic Yards of	Name of Pegiste	oroc					L	
Environmental Transp		p, INC	<b>)</b> .	Hauler ID No. Waste Grows- Fairless Landfille												
ity, State				000692061   25   Disposal Date   City, State						_						
Flanders, NJ				5/24/19 Morrisville, PA 19067												
ompleted By (Print or Type	)	Title							_							
Gwendolyn Trumbetti		055	erati	ons O	oordi	nator		Signature .	MA			Dat	e //)	-1		
R-41			10071000000		J - 1 WI			/. 1				1	13	L		





Location of ACM Used for Maint. Description of ACM Amount Abatement Type

Control House NO Roofing 450 SF Removal

10-

CK11314 I	AII	NO	OTIFI (	CATI Pursi	ON OF A	f New Jersey ASBESTOS AB JAC 8:60 and 5	ATEMENT :16)			<u>  W</u>	_
Date of Notification (1) 5 / 13	, .	19			me of Build	ding Owner/Operato	pr (2) #1905-5479	MAY			L
Agencies Notified Type  ☑ EPA ☑ Ir	Notificatio	n		Str	eet Addres	s		ASBEST	<u> 35</u>	L ONTRI SING	ũ
	mended			-	1000 Hadi			A STATE OF THE PARTY OF THE PAR	ewitic o-chesting		<u> </u>
1 Carrier 1 Carr	mendment		_		y, State, Zip						
DCA E	mergency (	includ	ing			infield, NJ					
	stification)				me of Conta			Telephone Nu	mber	8	-
	ancellation			P	rt Sferlaz	ZO		732-684-10	085		
Name of Facility 18th				F	ACILITY	INFORMATION		•			
Name of Facility Where Abatem	ent is Takir	ng Pla	ce (3)				Type of Facili	ty (4)			-
PSE&G- Former Exxon S	tation						☐ School (K-	-12)			
Street Address							Subchapte	er 8 (Other than K-1	2)		
468 Route 71 North							homes, et	private and comm	ercial	building	S
City (5)			0.00				Square Feet	1,150		Bldg. A	
Harbrouck Heights, NJ										Jiug. A	30
County (6)				Co	unty Code	(7)(STATE USE ONLY)	Current Use (	Prior if being demol	ished	1	_
Bergen							Substation		isneu,	ì	
Name of Monitoring Firm Hired b	y Building (	Owner	(8)	ASCI	И No.	Name of Abatem					_
NA						AbateTech,		9)			
Street Address						Street Address					_
							DO D 05				
City, State, Zip Code							e. PO Box 25				_
						City, State, Zip C					
Project Manager for Monitoring Fi	irm		Tele	phone	No.	Lumberton, I	NJ 08048				
rations in the			TOIC	phone	110.	Telephone No.		License No.			2000
Start Date (10)	Sched	uled C	omple	tion D	ate (11)	609-265-2107		00529	**		
_6 / _3 / _19					19	Name of OSHA M					
Occupancy Status During Abatem	80, id =					EMSL Analyt	ical				
▼ Facility Closed/Vacated During	ent (Check	only o	one)			Street Address					_
Abatement Performed Outside	of Normal	od of	Abater	nent		200 Route 13	0 North				
	I- PM	/aciiity	PM-	s - Des	AM	City, State, Zip Co					_
Time of Abatement:AM					27 (101	Cinnaminson	, NJ 08077				
Time of Abatement:AM											_
Time of Abatement:AM							errence and the second				
cope of Work (Check all that app	oly)	Rei	novatio			☐ Mini-Encl	Procedure				
cope of Work (Check all that app	oly)	☐ Rei	nolitio	n		☐ Mini-Encl	osure Procedure	gative Pressure n-Friable Procedur	e		
cope of Work (Check all that app 3 sf or ≥3 If 2160 sf or ≥260 If	oly)	☐ Rei ☑ Der	nolitio Locati	n on		☐ Mini-Encl ☐ Glovebag ☒ Non-Exer	osure Procedure npted (*) and No		_	patemer	-it
cope of Work (Check all that app    ≥3 sf or ≥3 if   ≥160 sf or ≥260 if    Location of	oly)	Rei	Location ormali	on y y by	Aches	☐ Mini-Encl☐ Glovebag ☑ Non-Exer	osure Procedure npted (*) and No	n-Friable Procedur	Ab		
Cope of Work (Check all that app    ≥3 sf or ≥3 lf   ≥160 sf or ≥260 lf    Location of Asbestos-Containing Material (ADDE ABATED	oly)	Rei Der Is N Usec	Location ormalid Solel	on y y by	Asbes (i.e.	☐ Mini-Encl☐ Glovebag ☐ Non-Exer  Description of stos Containing Mat, thermal systems in	osure Procedure npted (*) and No erial (ACM) sulation	n-Friable Procedur	Ab		_
Cope of Work (Check all that app    ≥3 sf or ≥3 lf   ≥160 sf or ≥260 lf    Location of Asbestos-Containing Material (   TO BE ABATED   IN Facility	oly)	Rei Der Is N Usec	Location ormall of Solel ottenant	on y y by	Asbes (i.e.	☐ Mini-Encl☐ Glovebag ☐ Non-Exer  Description of stos Containing Mat, thermal systems in surfacing, VAT,	osure Procedure npted (*) and No erial (ACM) nsulation, or	n-Friable Procedur	_		
Cope of Work (Check all that app    ≥3 sf or ≥3 lf   ≥160 sf or ≥260 lf    Location of Asbestos-Containing Material (ADDE ABATED	ACM)	Rei Der Is N Usec	Location ormall of Solel ontenan odial Solel (12)	on y y by ice/ taff?	Asbes (i.e.	☐ Mini-Encl☐ Glovebag ☐ Non-Exer  Description of stos Containing Mat, thermal systems in	osure Procedure npted (*) and No erial (ACM) nsulation, or	n-Friable Procedur  Amount (Specify	Ab		t Encansulate
Cope of Work (Check all that app    3 sf or 3 if   5 160 sf or 5 260 if	ACM)	☐ Rei ☐ Der ☐ Is ☐ N ☐ Used ☐ Main ☐ Custo Yes	Location ormall di Solel ntenanodial Solel (12)	on y y by ice/ taff?	(i.e.	Description of stos Containing Mat, thermal systems in surfacing, VAT, other miscellaneo	osure Procedure npted (*) and No erial (ACM) nsulation, or	Amount (Specify SF or LF)	A Removal		
Cope of Work (Check all that app    3 sf or 3 if   10 sf or 260 if	ACM)	Rei Rei Der Is N Usec Maii Custo Yes	Location ormall of Solel ontenan odial Solel (12)	on y y by ice/ taff?  N/A	Asbes (i.e.	Description of stos Containing Mat, thermal systems in surfacing, VAT, other miscellaneo	osure Procedure npted (*) and No erial (ACM) nsulation, or	n-Friable Procedur  Amount (Specify	Ab		
Cope of Work (Check all that app  23 sf or ≥3 if  2160 sf or ≥260 if  Location of Asbestos-Containing Material (ATO BE ABATED IN Facility (13)	ACM)	☐ Rei ☐ Der ☐ Is ☐ N ☐ Used ☐ Main ☐ Custo Yes	Location ormall di Solel ntenanodial Solel (12)	on y y by ice/ taff?	(i.e.	Description of stos Containing Mat, thermal systems in surfacing, VAT, other miscellaneo	osure Procedure npted (*) and No erial (ACM) nsulation, or	Amount (Specify SF or LF)	Ab Removal		
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Cope of Work (Check all that app  23 sf or ≥3 lf 2160 sf or ≥260 lf  Location of Asbestos-Containing Material (ATO BE ABATED IN Facility (13)  24 Attached	ACM)	Is Nused Main Custo	Location ormall of Solel of So	on y y by ice/ taff?  N/A	See Atta	☐ Mini-Encl☐ Glovebag ☐ Non-Exer  Description of stos Containing Mat, thermal systems in surfacing, VAT, other miscellaneo	osure Procedure Inpred (*) and No erial (ACM) Insulation, or us)	Amount (Specify SF or LF)	Ab Removal		
Cope of Work (Check all that app  23 sf or ≥3 lf 2160 sf or ≥260 lf  Location of Asbestos-Containing Material ( TO BE ABATED IN Facility (13)  Pee Attached  me of Registered Waste Hauler	ACM)	Red	Location ormall disolel nitenano dial S (12)  No  No  NJ	on y y by ice/ taff?  N/A	See Atta	☐ Mini-Encl☐ Glovebag ☐ Non-Exer  Description of stos Containing Mate, thermal systems ir surfacing, VAT, other miscellaneo  Iched  Cubic Yards of	osure Procedure Inpled (*) and No erial (ACM) Insulation, or us)  Name of Regist	Amount (Specify SF or LF)	A Removal		
Cope of Work (Check all that app    ≥3 sf or ≥3 lf   ≥160 sf or ≥260 lf    Location of Asbestos-Containing Material (ASSE ABATED IN Facility (13)   Location of Asbestos-Containing Material (ASSE ABATED IN Facility (13)   Location of Asbestos-Containing Material (ASSE ABATED IN Facility (13)   Location of Asbestos-Containing Material (ASSE ABATED IN Facility (13)   Location of Asbestos-Containing Material (ASSE ABATED IN Facility (13)   Location of Asbestos-Containing Material (ASSE ABATED IN Facility (13))   Location of Asbestos-Containing Material (ASSE ABATED IN Facility (13))   Location of Asbestos-Containing Material (ASSE ABATED IN Facility (13))   Location of Asbestos-Containing Material (ASSE ABATED IN Facility (13))   Location of Asbestos-Containing Material (ASSE ABATED IN Facility (13))   Location of Asbestos-Containing Material (ASSE ABATED IN Facility (13))   Location of Asbestos-Containing Material (ASSE ABATED IN Facility (13))   Location of Asbestos-Containing Material (ASSE ABATED IN Facility (13))   Location of Asbestos-Containing Material (ASSE ABATED IN Facility (13))   Location of Asbestos-Containing Material (ASSE ABATED IN Facility (13))   Location of Asbestos-Containing Material (ASSE ABATED IN Facility (13))   Location of Asbestos-Containing Material (ASSE ABATED IN Facility (13))   Location of Asbestos-Containing Material (ASSE ABATED IN Facility (13))   Location of Asbestos-Containing Material (ASSE ABATED IN Facility (13))   Location of Asbestos-Containing Material (ASSE ABATED IN Facility (13))   Location of Asbestos-Containing Material (ASSE ABATED IN Facility (13))   Location of Asbestos-Containing Material (ASSE ABATED IN Facility (13))   Location of Asbestos-Containing Material (ASSE ABATED IN Facility (13))   Location of Asbestos-Containing Material (ASSE ABATED IN Facility (13))   Location of Asbestos-Containing Material (ASSE ABATED IN Facility (13))   Location of Asbestos-Containing Material (ASSE ABATED IN Facility (13))   Location of Asbestos-Containing Material (ASSE ABAT	ACM)	Red	Location ormall disolel nitenano dial S (12)  No  No  NJ  Hai	on y y by ice/ taff?  N/A	See Atta	☐ Mini-Encl☐ Glovebag ☐ Non-Exer  Description of stos Containing Mat, thermal systems in surfacing, VAT, other miscellaneo	osure Procedure Inpled (*) and No erial (ACM) Insulation, or us)  Name of Regist	Amount (Specify SF or LF)	A Removal		
Cope of Work (Check all that app  ≥3 sf or ≥3 if ≥160 sf or ≥260 if  Location of Asbestos-Containing Material ( TO BE ABATED IN Facility (13)  ee Attached  me of Registered Waste Hauler Environmental Transport Gr y, State	ACM)	Red	Location ormall disolel nitenano dial S (12)  No  No  NJ  Hai	on y y by lice/ taff?  N/A  DEP Wuler ID	Vaste No. 2061	☐ Mini-Encl☐ Glovebag ☐ Non-Exer  Description of stos Containing Mate, thermal systems in surfacing, VAT, other miscellaneo  Iched  Cubic Yards of Waste	osure Procedure Inpled (*) and No erial (ACM) Insulation, or us)  Name of Regist	Amount (Specify SF or LF)	A Removal		
Cope of Work (Check all that app  ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf  Location of Asbestos-Containing Material ( TO BE ABATED IN Facility (13)  ee Attached  Ime of Registered Waste Hauler Environmental Transport Gr y, State Flanders, NJ	ACM)	Red	Location ormall disolel nitenano dial S (12)  No  No  NJ  Hai	on y y by lice/ taff?  N/A  DEP Wuler ID	Vaste No. 2061	☐ Mini-Encl☐ Glovebag ☐ Non-Exer  Description of stos Containing Mat, thermal systems ir surfacing, VAT, other miscellaneo  Iched  Cubic Yards of Waste 40	osure Procedure Inproduct (*) and No erial (ACM) Insulation, or us)  Name of Regist Grows-Fai City, State	Amount (Specify SF or LF)  See Attached  ered Landfill  rless Landfille	A Removal		-
Cope of Work (Check all that app  ≥3 sf or ≥3 if ≥160 sf or ≥260 if  Location of Asbestos-Containing Material ( TO BE ABATED IN Facility	ACM)	Red	Location ormall disolel nitenano dial S (12)  No  No  NJ  Hai	on y y by lice/ taff?  N/A  DEP Wuler ID	Vaste No. 2061	Description of Stos Containing Mate, thermal systems in surfacing, VAT, other miscellaneous tehed  Cubic Yards of Waste 40  Disposal Date	osure   Procedure   Procedure   npted (*) and No   erial (ACM)   nsulation,   or   us)  Name of Regist   Grows-Fai	Amount (Specify SF or LF)  See Attached  tered Landfill rless Landfille  PA 19067	Ab Removal		Encapsulate

NOCK		NC			ON OF AS	New Jersey SBESTOS ABA JAC 8:60 and 5:1		ID) E	G I		<u> </u>
Date of Notification (1)	13 /	19			me of Buildi	ing Owner/Operator	(2) # 1903-5447	Check#	AY	1/;	119
Agencies Notified  ⊠ EPA  ⊠ DOLWD  ⊠ DHSS	Type Notification ☐ Initial ☐ Amended			8	eet Address <b>0 Park Av</b> , State, Zip	enue		ASBE	STOS LICE	S CON ENSING	ROL
DCA (NJAC 5:23-8)	Amendment  Emergency justification)	includ	ing	0.89	ewark, Nu			Talanha N			
(	☐ Cancellation				hris Castr			Telephone Nur 908-412-22			
				F	ACILITY II	NFORMATION					
Name of Facility Where A PSE&G- Bay Way Re		ng Pla	ce (3)				Type of Facility (	177 <del>0</del>			
Street Address 1400 park Avenue	•						Subchapter 8 Other (i.e., pri	(Other than K-1)	2) ercial t	ouilding	
City (5) Linden, NJ 07036							Square Feet	# of Floors	E	Bldg. Ag	-
County (6)											
Union				Cou	inty Code (7	7)(STATE USE ONLY)	Current Use (Price Refinery	or if being demoli	shed)		
Name of Monitoring Firm H		Owner	(8)	ASCN	l No.	Name of Abateme	ent Contractor (9)				-
Health & Safety Serv	ices					AbateTech, Ir	nc.				
Street Address						Street Address					
PO Box 365						30 Maple Ave	. PO Box 25				
City, State, Zip Code						City, State, Zip Co					
Berlin, NJ 08009						Lumberton, N					
Project Manager for Monito	ring Firm		Tele	phone	No.	Telephone No.		License No.			
James Proctor	# 2000 M E.		- Andrews		1-8850	609-265-2107		00529			
Start Date (10)	Sche	duled (			ate (11)	Name of OSHA Mo	onitor	00020			
5/13/	19	5	31			EMSL Analyti					
Occupancy Status During A	batement (Chec	k only	one)		And the same of th	Street Address					_
☐ Facility Closed/Vacated	During Entire Pe	riod of	Abate	nent	_	200 Route 130	North				
Abatement Performed O	utside of Norma	Eacilit	y Hour	s - Des	scribe	City, State, Zip Coo	12 (HARTON)				-
Time of Abatement:		M/	PM-		AM_	Cinnaminson,					
Scope of Work (Check all th	at apply)										
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf			enovati emolitio			☐ Mini-Enclo			re		
		2.88	Locati						Ab	atemer	Туре
Location of Asbestos-Containing Ma TO BE ABATE IN Facility (13)		Use Ma	Normal d Sole intenar todial S (12)	ly by nce/	Asbes (i.e.	Description of stos Containing Mate , thermal systems in surfacing, VAT, o other miscellaneo	erial (ACM) sulation, or	Amount (Specify SF or LF)	Removal	Repair	
Exterior		Yes	No	N/A						à	
Exterior					Coal Tar	r Wrap		235 SF			
Name of Registered Waste F Environmental Transp		С.	Ha	IDEP V	No.	Cubic Yards of Waste	Name of Register		-		
City, State	- fac	C		00069		8 Disposal Date	City, State		_		
Flanders, NJ					1-	5/31/19	Morrisville, P	A 19067			

Completed By (Print or Type)

Gwendolyn Trumbetti

Title

Operations Coordinator

Signature

Date 5-13-19

CK1777	PA	III) M	OTIF	ICATION	tate of Ne N OF ASE to NJAC	ESTOS	ABATE	MEN (0)	ot Ch	1EC	K# 1	77	7	******	
Date of Notification (1) 05/13/2019				Name o	of Building AND VA	Owner/6	Operato E HAR	r (2) RIS	100	(n)	EG		$\mathbb{V}$		The same
Agencies Notified Ty	pe Notification	-		Street A	Address				The Control of the Co		54.657	1 -	0010	-	The second secon
EPA DEP DOL DOH	Initial Amended Amendment : Emergency (i		_	VINC Name o	ate, Zip Co ENTOW	/N NJ (	08088		menyaha didagdilan accass (* **)	I II	MAY	s cc	NTRE	-8	
DCA	Cancellation				N MCAT				Ť				-46	049 ±11	de(Attention)
Name of Facility Where Abate RESIDENTIAL	ement is Taking	Place (3	)	FACI	ILITY INF	ORMAT	ION	Ту	pe of Facility	(4)					
Street Address  City (5)								7	Other (i.e. etc.)	r 8 (Oth private	er than K-1 & commerc	ial buil			es,
VINCENTOWN									uare Feet 311	# 0	f Floors		3ldg. <i>A</i> 76	е	
County (6) BURLINGTON					Code (7) USE ONLY	)		Cu R	rrent Use (Pri ESIDENTI	ior if bei	ng demolis CANT	hed)			
Name of Monitoring Firm Hire CRITERION LABS	ed by Building C	wner (8)		ASCN	/ No.		Name ASS	of A	batement Co ED ENVIR	ntractor ONMI	(9) ENTAL SI	ERVI	CES	VC	
Street Address 400 STREET ROAD							Street 570		ress EMS RUN						
City, State, Zip Code BENSALEM PA 19020									Zip Code A HILL NJ	0806	2			-	
Project Manager for Monitorin MIKE PANEPRESSO	ng Firm			Telephor 215-2	ne No. 44-1300	)	Teleph 610-		No. -4676		License N 01145	lo.			
Start Date (10) 05/14/2019		Schedule 05/20/2	d Con	npletion I	Date (11)		Name EMS		SHA Monitor					-	
Occupancy Status During Aba  Facility Closed/Vacated				nent			Street 200		ress 130 NORT					-	
Abatement Performed O Other – Describe:	utside of Norma	l Facility	Hours						Zip Code /IINSON N	J 0807	77	×====		_	
Scope of Work (Check All Tha	at Apply)													(0), (1)	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		ACCOUNT OF THE PARTY OF THE PAR	enova emolit	31/3/3/2				N	full Containm Aini-Enclosure Blovebag Prod Ion-Exempted	e cedure					
24 American - 112		1	_ocati			The second second				, , ,			Abate Ty		
Location of Asbestos-Containing Mate TO BE ABATED In Facility (13)		Used	Sole ntenar	ly by nce/		tos Cont thermal surfac		later s insu T, or		(S	mount pecify or LF)	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A		0010111	noodiian		,,			\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	=	ulate	ure
THROUGHOUT H	OUSE			Х		NF1 F	LOOR	TIL	E	100	00 SF	Х			
						-						-			
Name of Registered Waste Ha ASSURED ENVIRONMI		/ICES	H	JDEP Wauler ID in 234895	No.	Cubic of Was					red Landfill NDFILL	1			
City, State MULLICA HILL NJ				···			al Date /2019		City, State		RG, OH				
Completed by RON SWANSON		Title GENE	RAL	. MANA	AGER	Si	gnature	Xu	sephi	CUI DE	Da Os		2019	( <u>************************************</u>	

				4 AM) INC		e 1	IIII	EG	PAC		1
35/13/2019 11:22AM 1856224	8799			ASSUM	id ser	RVICES		To be a separate of the separa	PAU	CO SE	
	R	(Pu	ation Ruant l	to of New Jorsey Of Asbertos 6 NJAC 5:50 and	PATER 12:122	1 FGF	EC	framework & bud	777	7 201	7
Date of NetRosdon (1) OS/13/2019		P	KIRK /	Building Owner/O AND VALERIE	perator HARF		1 75	ASHASI	UNICEN.		9
Agencies Notified Type Notification		\$	Weel As	drass	-	and the same of th	)	Secretary Printers, Section 201	T)		-
EPA DEP Initial Amended Amendment (	<u>.                                    </u>	(	By State	A. ZIP Code NTOWN NJ 0	8088	eranacy - Prochamacy		可	上	<u> </u>	+
COH Smergency (I justification)  Cancalision	relusing		MEVIN	Contact MOATEER	e) (ternel/goods		Aine	ealant kur		Ü	1
Lama of Capilla Mage Alexander in Taking	Block 19		FACIL	ity informati	ON	Type of Facility					
riame of Facility Where Abalament is Teking RESIDENTIAL	A LIMPAN (19	7				School (K-	12)				
Street Address				Transfer of		Subahapte Other (I.e.	18 (Cth	er than K-12 E commerci	i) al build	lings, har	ne
ON (8) VINOENTOWN						Equato Feet 1,311	1	Flagra	7	idg. Aga 'S	
County (5) BURLINGTON		t	County C STATE L	ide only)	PORRIEGY.	Current Use (Pr REBIDENTI			(ed)		
Name of Monitoring Firm Hired by Budding C CRITERION LABS	lwner (8)		ASCM	Na.	Nemo ASS	of Abatement Co URED ENVIR	mirzeler ONME	(9) Ental Se	ERVK	CE8 IN	ō.
400 STREET ROAD	All Children and All Children			And the second second	81/491 570	Address CLEMS RUN	**************************************	No. of Concession, Name of		4	PERMIT
City, State, Zip Code BENSALEM PA 19020	AND THE PERSON AND TH		and the second section of the second	and the second of the second o	City, 8 MUL	Hairo, Zip Code LICA HILL NJ	0806	2			
Project Meneger for Manifesting Firm MIKE PANEPRESSO			Telephor 215-24	10 No. 14-1300	610-	ione No. 304-4676		License N 01145	0,		
Start Date (10) 05/14/2019	8cheduk 05/20/	2018 S018	philip 1	Date (11)	Name EMS	af OSHA Manitor IL					
Coupancy Status During Abatement (Check Psellty Closes/vacated During Entire P Abatement Performed Duriside of Norm	District Annual Control		eni		Street 200	Address AT. 130 NORT	TH			-	
Abatement Performed Outside of Norm Other - Describe:	el Facility	r Hours			Chy, S	lato, zio code NAMINSON N	J 080	77	The same of the sa		
Scope of Work (Chack All That Apply)  23 of or 23 if  2180 of or 2250 if		kanovai Damski				Full Contains Mini-Grobeur Giovebag Pro Non-Buempre	esture	-			
Location of	1 1	Location	9	Do	nalidita		P			Abstame Type	31£
Asbertos-Containing MatsAsi (ACM) <u>TO BE ABATED</u> In Pacific  (13)	Me	ed Selel Unionen Eddel 2 (12)	ness/	Asbestos Con (i.e. thermal suns	alning A	falensi (ACM) a Insulation. T. or	15	rmount Specify For LF)	finova	Encapadale Pagais	
	Yes	Ne	N/A	A)Es E	LOOR	7112	10	00 SF	12	- 6	1
THROUGHOUT HOUSE	1										- 2

NJDEP WEEKS Havist ID No. 0054895

THIS GENERAL MANAGER Gubia Yarda of Weste 15

Disposel Data 05/21/2019

Signature

City, State MULLICA HILL NJ

Completed by RON SWANSON

Name of Registered Visete Hauter

ASSURED ENVIRONMENTAL SERVICES

Date 05/13/2019

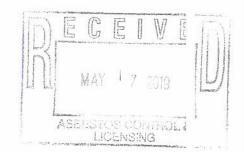
Name of Registered Landfill

MINERVA LANDFILL

Chy, Sizes WAYNESBURG, OH

1001				NEW JERSEY		F-	- @ F	ппп	F20 2 2 2 2
	,			SBESTOS ABATEME					EIN
Date of Notification (1)		(PURSUAI	Action to the second	C 8:60-7 AND 12:120			Michael Share Manager and Japanese Assess		
04 / 09 / 19			PSE&G	Building Owner / Ope	erator (2)				
$\frac{-67}{-} / \frac{-63}{-} / \frac{-13}{-}$			Street Ad	dress			MAT	7 2000	1111
Agencies Notified Type of N	Votification		4	NLEY TERRACE	İ	H H	1417.11	CUIT	Louise
☑ EPA □	Initial			e, Zip Code		-			-
DEP 0	Amended		UNION, N			A 9	SESTOS C	YOMTEV	ئے۔۔۔ نگ
☑ DOH	Amendment #	± 1	Name of		- Particular and Particular		ne Number		14 GE
☑ DOL □	Emergency w		KEVIN KN			732-850-		THE RESERVE AND ADDRESS OF	Seculation
O DOL	Cancellation	,				1 02 000	00.0		
		-	ACILITY II	NFORMATION	The state of the s	ART ESTATE OF THE PARTY OF		Fig. 1982 TV	
				01 11.011					
Name of Facility Where Abater	ment is Taking	Place (3)		Type of Facility (4)					
PSE&G	<u> </u>			,,,					
				☐ School (F	(-12)				
Street Address				☐ Subchapt	ter 8 (Other ti	han K-12)			
2198 STANLEY TERRACE					., private & c	mmercial			
	***************************************				omes, etc.)				
City (5) County (	6)	County Code	(7)	Square Feet	# Of Floors		Building A	ge	
UNION UNION				10,000	1		1		
				Current Use (Prior if		lished)		40 +	
	-			;PRODUCTION/OFF	ICE	Management			200
Name of Monitoring Firm Hire	d by Bldg. Own	er (8)	ASCM NO	1					- Access - Comment
							8 9		
LANGAN ENGINEERING				NORTHSTAR CONT	KACTING GR	OUP, INC			
Street Address 300 KIMBALL DR, 4TH FLOOR				Street Address					
				00 MUU BI					
City, State, Zip Code				32 Williams Parkway					
PARSIPPANY, NJ 07054		1= 1 1 11		City, State, Zip Code	9				
Project Mngr. For Monitoring I BRIAN FEURY	-trm	Telephone Nu 973-560-4857	mper	Foot Honover, N.I.070	226				
Sheduled Start Date (10)	Isohad Camp	letetion Date (1	4)	East Hanover, NJ 079	936	License	Management		
05 / 06 / 19	06	21 /	, <b>''</b> 19	Telephone Number		License	Number		
05 // 00 / 19		/		973-884-8682			0086	30	
Occupancy Status During Aba	tement (Check	Only 1)		Name of OSHA Mon	itor		0000	-	
☑ Facility Closed/Vac				NORTHSTAR CONT		OUP. INC	9		
Abatement	3			Street Address					
☐ Abatement Perform	ed Outside of N	lormal Facility							
Hours - Describe:				32 Williams Parkway					
Other - Describe:	7:00 AM-3:30	PM		City, State, Zip Code					
				East Hanover, NJ 079					
Scope of Work (Check All Tha	t Apply)								
<ul><li>Demolition</li></ul>		Renovation	~	Full Containment wi	th Negative F	ressure			
≥3sf or≥3lf				Mini - Enclosure					
≥160 sf or ≥260 lf				Glovebag Procedure					
			V	Non-Exempted (*) ar	nd Non-Friab	le Proced	ure		
1									
Location of	Is	1	Descript			Abateme		. 1	
Asbestos Containing	Location Normally	As	bestos - C Material		Amount	R E	R N		
TO BE ABATED	Used	, n	e., therma		(Specify	M	E C	333	
in Facility	Solely	100	STATE OF THE PARTY	facing, VAT,	SF or LF)	0	P A		
(13)	by Main-	E. (C. (C. (C. (C. (C. (C. (C. (C. (C. (C		ellaneous)	SF OF LF)	l v	A P		i i
(10)	tenance/		other mise	chancous,		À	i s		.21
	Custodial					Ιĉ	R U		
	Staff (12)						L		
	YES NO N/A								
EXTERIOR		WINDOW GLA	ZING		21 EA	V			
ROOF		ROOFING & F			8,900 SF	V			
ROOF		ROOF TAR	To be a control of	·	270 SF	V			
OFFICES		VAT/MASTIC			300 SF	V			T
Name of Registered Waste Ha	uler	NJDEP Waste	Cubic	Name of Registered					
ENVIRONMENTAL TRANSPOR	T GROUP INC	Hauler ID No.	Yards Of	FAIRLESS LANDFILI					
		*00692061	Waste -100			0.0			
City, State			Disposal	City. State					
FLANDERS, NJ			Date	MORRISVILLE, PA					
			TBD		-				
Completed by (Print or Type)		Title		Signature	1/		D	ate	
Stove Stiles		Denie et Me		V Vo	in L	10		0.4"	140
Steve Stiles		Project Manage			II. /V		NA STATE OF THE PARTY OF THE PA	04/	3/19
ASB-41									

Location of	Is	Description of		Abateme	ent Type	The second second second	
Asbestos Containing	Location	Asbestos - Containing		R	I	E	Ε
	Normally	Material (ACM)	Amount	E	R	N	Ų
TO BE ABATED	Used	(I.e., thermal systems	(Specify	M	E	C	0
in Facility	Solely	insulation, surfacing, VAT,	SF or LF)	0	P	Α	L
(13)	by Main-	or other miscellaneous)		V	A	P	2
	tenance/			Α	1	s	3
	Custodial			L	R	U	J
	Staff (12)					L	3
	YES NO N/A						
OFFICES	☐ ☑ ☐ VA	T	350 SF	V			
				П	ITT	1 1	



## State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

ALDUI MA	(Pursu	ant to NJAC 8	3:60 and 12:120)	and design	-				1
Date of Notifica	19 Nam PG	ne of Building C	Dwner/Operator (2) BOY HOUSI	NG A	ASSESTO ASSESTO	S CC	ONTE	ग्र	8
Agencies Notifie Type Notifies  EPA Typinist	ation Stree	et Address	Y' AVE, P.						
DEP Amend	ed City,	State 7th Cor	HBOY, N			-		_	-
DOH USING	tion Nam	e of Contact	S SABE		Telephone Nu 732 794				-
Name of Facility of any Labors 15		ACILITY INFO	RMATION			J.R	211	_	_
CWANGE THE LIFE IN GAME.	2	TITLE		of Facility School (K- Subchapter	12) r 8 (Other than K-1	2)			
125 W-T-0 M-1	+ AVE			Other (i.e. petc.)	orivate & commerci	ial bui			ies
4/GUZ = 5 3 W7				re Feet		E	Bldg. 1	5.5	
Albert To	(STA	ty Code (7) TE USE ONLY)	Curre	ent Use (Pri	or if being demolish	ned)			_
ame in Months The medical Colors of the Colo		ON No.	Name of Aba					-	
2 4 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			Street Address	44 57	7,				-
	1777 July		PATER		NJE	75	01	/	
HOVES Y	EL 132	hone No. 24022	17 201190	0539	License N	0.		_	_
57/2	Scheduled Completic	on Date (11)	Name of OSH GORA	A Monitor					
Factor Constitution of the Bo	neci Onu Dia)		Street Addres	SS					-
Fallin, Class of Salar S	rt mai Faoille Hours		City State 7i	in Code	NJ 0	75	0/	_	_
onen kontro e e inne apo Prema men I etto efforto	enovation Damoliden		Full Min Glo	Containme	ent with Negative P	ressu	re		
	ls Location Normally		5000 1000000 00				Abate		t
	s ed Solely by "Renance Disputal Sight? (12)	(i.e. th	Description of a Containing Material ermal systems insular surfacing, VAT, or other miscellaneous)	(ACM) tion,	Amount (Specify SF or LF)	Remova	Repair	b   Encapsulate	
	Yes No NA		Ţ.			a	=;	Hate	100
	<i>V</i>		5/		200 SF	~		_	
									-
ne leve v t i i i		Vvaste T	Cubic Yards	Name of F	Registered Landfill				
	- (الله - 19 ما الله br>- (الله - 19 ما الله	D Vo I	of Waste		Registered Landilli				
) (S. 1) 24 (T. 1)	The state of the s		Disposal Date	City, State		PA		_	-
mp	6.0		Signature	1	Dat		-1	1	7
				×		- E.J.	101	_	_

	- 1	-	
CIP	2+	L0	rm
111	11	ΓU	rm

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

N(,)(,)		(P	ursuant	to NJAC	8:60 and	12:120	0)			HECK	# 26	227	7	100mm	
Date of Notification (1) 05-10-19				of Building ers, The				of NJ				3		Ţ	
Agencies Notified Type Notification  X EPA Initial			Street A 74 Str	Address eet 160	3					M A	\V 1	7	20:		D. STATUTE CHANGE
EPA Initial  DEP Amended  Mended Amendment  Emergency			Piscat	ate, Zip Co taway N		4		W.Y. Color demands		Mirror and a service of the service			20	J	
X   DOH   justification)     X   DCA     ☐   Cancellation			Micha	of Contact el F Sm				75	Tel 84	éphone 8-445-	Numb 2550	erc NSI	NTF NG	0	&
Non-Afficial Afficiation of Figure 1	5		FAC	ILITY INF	ORMATI	ON								_	
Name of Facility Where Abatement is Takin Richardson Apartments	g Place (	3)						pe of Facility School (K-							
Street Address 187 Bevier Road							×	Subchapte Other (i.e. etc.)				build	dings,	hc	ies,
City (5) Piscataway							Sq	uare Feet	# o	f Floors		В	ldg. A	lgε	
County (6) Middlesex				Code (7) USE ONLY	)			rrent Use (Presidential	ior if bei	ng demo	olished	i)			
Name of Monitoring Firm Hired by Building ( ATC Group Services	Owner (8)	)	ASCN	M No.				batement Co Environm						_	
Street Address 3 Terri Ln			-1			Street	Add	Sec. 222-24 (20-74-20)		Technol Pers				-	
City, State, Zip Code Burlington NJ 08016						City, S	tate	, Zip Code It, NJ 0707	2					_	
Project Manager for Monitoring Firm			Telepho			Teleph	one	No.	_	License				_	_
Brian Kearney Start Date (10)	Schedul			36-8800 Date (11)			200100	-6565 SHA Monitor		00756	5				
06-03-19	06-21-	19				Even									
Occupancy Status During Abatement (Chec						Street 10-59		ress ackson Ave	enue						
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe: 8am - 8am, 24hr acc	al Facility	/ Hours	1		_			Zip Code and City, N	IY 111	01					
Scope of Work (Check All That Apply)														-	
≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf		Renova Demolit			_	×	1	Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	e cedure					e	
	100	Locati			22000				- 1 /				Abate		ıt
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma Cus	ed Sole iintenar todial S (12)	ly by nce/ Staff?		tos Conta thermal surfac		later s ins T, or	r	(5	mount Specify or LF)		Removal	Repair	Linapoulate	Enclosure
2nd Floor	Yes	No	N/A	\ /:		4 <b>-</b> 1	.,	0/AT		20005	-			Ľ,	$\vdash$
3rd Floor			X		yl Shee	Section Control				00SF 00SF		x x		_	$\vdash$
STO F 1007				VIII	yi Onee		11116	<i>J</i> ( ) ( )	1,0	00031	1	^			
Name of Registered Waste Hauler ATC, Inc. / Newark Carting, Inc. (04)	509)	Н	JDEP W auler ID 1310		of Was			Name of Minerva							
City, State Shirley, NY / Newark, NJ					Dispos TBD	al Date		City, Stat Wayne		OH 44	1688				
Completed by Richard Doran	Title Proje	ect Ma	nager		Si	gnature		ME		T	Date 05-1	0-1	9	_	

Form

NOUK

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

CHECK #26226

Date of Notification (1) 05-10-19		Name of Building Owner/Operator (2) Rutgers, The State University of NJ										î <del>l</del>		
Agencies Notified Type Notification	1	1	Street Address 74 Street 1603											
EPA Initial  DEP X Amended  Amendmen		City, State, Zip Code Piscataway NJ 08854									_	D <del>istrict</del>		
DOH justification Cancellatio	(including Name of Contact Telephone Number													
Name of Facility Where Abatement is Taki		FACI	LITY INFOR	(4)										
Nicholas Hall Street Address 43 Dudley Rd		School (K-12						** **				ies,		
City (5) New Brunswick	Square Feet						f Floors	100	Bldg. 60+y					
County (6) Middlesex	6	County (	Code (7) USE ONLY)		- A	Current Use (Prior if being demolished) Academic								
Name of Monitoring Firm Hired by Building ATC Group Services	Owner (8)		ASCN	No.			e of Abatement Contractor (9) nacle Environmental Corp.						-	
Street Address 3 Terri Ln			Street Address 200 Broad Street											
City, State, Zip Code Burlington NJ 08016							e, Zip Code dt, NJ 07072	2						
Project Manager for Monitoring Firm Brian Kearney	- 1	Telephone No. Telep			lephone	ione No. License No. 939-6565 00756								
Start Date (10) 05-24-19	Comp					e of OSHA Monitor								
Occupancy Status During Abatement (Chec				Str	eet Add	Address 9 Jackson Avenue						-		
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe: 5pm - 5pm; 24hr acc	ours	City, State, Zip Code					de							
Scope of Work (Check All That Apply)				Lo	ong Isl	land City, N	Y 111	01				-		
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		ovatio				Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure								
	catio								The second secon			t		
Location of Norma Asbestos-Containing Material (ACM)  Location of Norma Used Solu			by	Asbestos		scription of aining Material (ACM)		Ar	Amount		T '	ре	Г	
TO BE ABATED In Facility (13)	-	ial Sta 12)	aff?	(i.e. the	mal syste urfacing, ner misce	ems ins VAT, o	sulation,	ation, (Specify SF or LF)		Removal	Repair	Encapsulate	Enclosure	
1st Floor	Yes N	10	N/A X		\/AT/NA	lastic		40.4	14405	x		е		
2nd Floor				VAT/Mast VAT/Mast			,		0,141SF 2,288SF		-	_		
3rd Floor						T/Mastic		300,000	767SF					
				******				1		-		_		
ATC. Inc. / Newark Carting Inc. (04509)				NJDEP Waste Cubic Y Aduler ID No. of Waste 4310			Name of Registered Landfill Minerva Enterprises							
City, State Shirley, NY / Newark, NJ		Disposal Date TBD				City, State Waynesburg, OH 44688						-		
Completed by Richard Doran  Title Project Ma					Signat	ture	Date 05-10-19							

Date of Notification (1) 05/14/2019	3 PA	ID		Pursuan Name o	tate of New N OF ASBES t to NJAC 8: of Building Oval Presbyteri	60 and	ABATEMENT i12:120) perator (2)	The specific control of the sp	D	MAY	[ ] 1 / eck#	W 2015		
Agencies Notified	Notified Type Notification									SBESTOS				
□ EPA				2010-11	ple Street		1	P. Commission	G_	-&				
⊠ DEP ⊠ DOL	□ Amended Amendment		_	City, State, Zip Code Summit, New Jersey 07901									Phiefdonis	*** *
☑ DOH ☐ DCA	Emergency (i justification)   Cancellation		Ī		of Contact Richardson		Telephone Number 908-273-0441 x 15							
FACILITY INFORMATION  Name of Facility Where Abatement is Taking Place (3)  Type of Facility (4)														
Name of Facility Where Abatement is Taking Place (3)  Central Presbyterian Church  Type of Facility (4)														
Street Address 70 Maple Street					☐ Subcha	· · · · · · · · · · · · · · · · · · ·								
City (5) Summit, New Jersey (				Square Feet 30,000					ldg 0+	је				
County (6) Union		Code (7) USE ONLY)		Current Use	(Prior if be Chu		olished)							
Name of Monitoring Firm Detail Associates Inc	ASCI	M No.		Name of Aba Lilich Corpo	atement Co oration	ntractor	(9)							
Street Address 560 Sylvan Avenue, S		Street Addre 246 Union	FD 67 CO	I										
City, State, Zip Code Englewood, New Jers		City, State, Zip Code Totowa, New Jersey 07512												
Project Manager for Mon Anthony Valentine	Telepho 201-56	one No 9-6708		Telephone No. 273-225-8400 License No. 01104										
Start Date (10) 05/28/2019		Date (11)		Name of OSHA Monitor Iris Environmental Laboratories, LLC										
Occupancy Status During			Street Addres						-					
☐ Facility Closed/Vaca ☐ Abatement Perform ☐ Other – Describe:	Abaten / Hours	City, State, Zip Code Union, NJ 07083									-			
Scope of Work (Check A	II That Apply)												_	-
		ition ion	- i an contaminant mai riogativi						ntainm	ent :	nt			
		500	Locat			Desc	scription of				T	Abat n		
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)  Norma Used Sol Maintena Custodial					(i.e. th	ermal s surfaci	nining Materia systems insula ing, VAT, or iscellaneous)	(S	Amount (Specify SF or LF)		Repair	Encapsulate	Enclosure	
		Yes	No	N/A							Removal	7	ate	Гe
xterior X					Window (	Glazin	ng		20 LF		х			
										18320		_	$\dashv$	
Lance of the second sec					800	Cubic Y of Wast		ds Name of Registered Landfill						
7 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)					18724 2 Fairless Landfill									
City, State Totowa, New Jersey			(	Disposa 05/30/2	2019 / /	City, Star Morrisv								
Completed by Title Adriana Olejarova President						Sig	nature 2	16	2	Da 5/	te 14/20	19		

	TO A T	TOM	IEICA			ew Jersey BESTOS ABAT	FEMENIT	Check N	o. <u>5</u>	876	_				
00010					ant to NJAC 8:60 and 12-120)										
Date of Notification (1)						ng Owner/Operator	Y/			1					
Agency Notified	May 14, 2019 PA of NY Agency Notified Type Notification Street Address														
	Type Notification				Erie Sti	vo o t		I LA MAY 1	7 201	9		2			
EPA  Notices, indiger Sciences, 16/2004	Initial □ Amended				tate, Zip						-  -	-			
☑ DOT					, NJ 07302	1	ASBESTOS	CONTR	ioi	ا -	1				
Ed DOLL			of Contac		į.		· _								
☑ DOH □ DCA			h Cam												
	☐ Cancellation			-											
Name of Facility Where At	otomont is Takina	Diago (2	2)	FACI	LIIY INF	ORMATION	ii								
Terminal B	Jatement is Taking	Place (3	)			Type of Facility (4)									
					☐ School (K-12)										
Street Address	90 0 00					☐ Subchapter 8 (Other than K-12) ☑ Other (i.e. private & commercial buildings,									
Newark Liberty Inte	rnational Airp	ort			homes, etc.)										
City (5)							Square Feet	# of Floors	Bldg. Age						
Newark							320,000	2	50 ÷/-						
County (6)						) (STATE USE	Current Use (	Prlor if being demo	iolished)						
Essex				ONLY)			Terminal								
Name of Monitoring Firm H	lired by Building O	wner	ASCN	No.				_							
PA of NY & NJ			N/A			B&N&K Res	toration Co	o., Inc.							
Street Address						Street Address		a. <b>*</b> e-e-transper			-				
241 Erie Street, Roc			223 Randolph Avenue												
City, State, Zip Code		City, State, Zip Code													
Jersey City, NJ 07310						Clifton, NJ 0	7011								
Project Manager for Monitoring Firm Telephon						Telephone No.		License No.							
Ralph Campione 973-62					8	973-478-468	1	00120							
Start Date (10) Scheduled Completion Date					0	Name of OSHA I	Monitor				-				
May 28, 2019 July 03, 2019						EMSL Analy	tical, Inc.								
Occupancy Status During /	e)					_									
☐ Facility Closed/Vacated During Entire Period of Abatement						200 Route 130 N									
☐ Abatement Performed O	utside of Normal F	acility Ho	ours			City, State, Zip Code									
☑ Other - Describe: Full	Containment	Occup	ied B	uildin	ilding Cinnaminson, NJ 08077-2892										
Scope of Work (Check all t	hat apply)					₩ FU.		AL N C D			_				
≥ 3 sf or ≥ 3 If		⊠ Ren	ovation		containment wi Enclosure	th Negative Pressu	e								
≥ 160 sf or ≥ 260 lf					olition		ebag Procedure								
		1				∐ моп-	exempted (*) a	nd Non-Friable Pro	seaure	ΔΙ	e em	ent			
		1	s Locat Normal									)			
Location		Us	ed Sole			Description of									
Asbestos-Containing TO BE ABA		4000000	aintena			stos Containing Ma , thermal systems		Amount		R	_ =	1 4			
IN Facilit		3	Custodi Staff?		(1.0.	surfacing, VAT		(Specify SF or LF)		em	capsula	Clo			
(13)	76		(12)			other miscellane	ous)			Removal	Encapsulate	Enclosure			
			T	T						-	6				
Yes No Gates Level, Air Canada Proposed Office Space Column 6A			No	N/A	Cons	rad an Finance	6:	4 sq ft		- +	-				
			-	Spray	ed-on Firepro	oning	Ň	-  -	+						
											.				
											-				
N (5 ) ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;															
Name of Registered Waste Hauler NJDEP V ID No.				Vaste H	auler	Cubic Yards of Waste	Name of Registered Landfill								
Jimmy Byrne Trucki	ing		9555			20	Minerva Enterprises, Inc.								
City, State						Disposal Date	City, State								
Bronx, NY					05/29/2019 - May 200 burgs OH										
Completed by	Title	-				Signature Date									
G. Roger Woodman Project Manager						5/14/2019									