STATE OF NEW JERSEY

NOTIFICATION OF ASBESTOS ABATEMENT

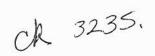
(Pursuant to N.J.A.C. 8:60 AND 12:120)

2812	20.		
4413	MA	1	20

Date of Notification (1)	5/15	/2013			Name of Build				- 41	7 2:	~ D	
		72013			County of F	Passaic F	Public Build	ings			- 6	
Agencies Notified		Notification	Туре		Street Addres	S	Cc	I to r	12.00	1 p3	90	
⋉ EPA		Initial			317 Penns	ylvania A	venue	LILE	14.111	A C	L	
₩ DEP			ed #		City, State, Zi					- 50		
X DOL			ncy (includ	ling	Paterson, N		y 20					
				3	Name of Cont			I Tol M	umber			
DCA		Cancella	ation		Mr. Jack Ni			Tel. IV	umber			
Name of Facility VAII- and About		alian Black (6		FACILITY IN	FORMATION							
	tement is i	aking Place (3	<u>)</u>		Type of Facilit	ty (4)						
					School (K-12)						
Street Address					Subchan	ter 8 (Othe	r than K-12)					
11 Mashall Street								hllalia.a.a				
Cancellation FA Name of Facility Where Abatement is Taking Place (3) Passaic County Jail Street Address 11 Mashall Street City (5) Paterson Name of Monitoring Firm Hired by Bldg. Owner (8) Langan Engineering & Environmental Street Address 619 River Drive City, State, Zip Code Elmwood Park, NJ 07407 Project Manager for Monitoring Firm Vijay Patel Scheduled Start Date (10) 5/28/2013 County Code (7) County Code (7) State Use Only ASCM No. 00099 Telephone Number 201-794-6900 Scheduled Completion Date (6) 6/22/2013					X homes,		& commercial	buildings				
Paterson	gencies Notified Sepa			se Only)								
Name of Monitoring Firm Hir	ed by Bldg	. Owner (8)	ASCM N	0.	Name of Contr	ractor (9)						
Langan Engineering &	Environ	mental	00099		MTM Metro	Corpora	tion					
Street Address 619 River Drive City, State, Zip Code Elmwood Park, NJ 07407					Street Address	s						
11 Mashall Street City (5)					135-137 Mc	Bride Av	re e					
City, State, Zip Code	pencies Notified Sepa				City State, Zip	Code						
City, State, Zip Code Elmwood Park, NJ 07407 Project Manager for Monitoring Firm Vijay Patel Telephone Numb 201-794-6900					Paterson, N	JJ 07501						
Project Manager for Monitori	ng Firm	Telephone N	Number		Telephone Nu			Licens	e Numb	er		
City, State, Zip Code Elmwood Park, NJ 07407 Project Manager for Monitoring Firm Vijay Patel Scheduled Start Date (10) 5/28/2013 City, State, Zip Code Telephone No. 201-794-69 Scheduled Code 6/22/2013			900		973-742-50			00809				
				Date (11)	Name of OSH	A Monitor						
Vijay Patel 201-794-6900 Scheduled Start Date (10) Scheduled Completion D 5/28/2013 6/22/2013					MTM Metro	MTM Metro Corporation						
Occupancy Status During Ab	atement (0	heck only one	9)		Street Address							
					135-137 M	cBride A	/e					
Facility Closed/Vacated	During En	tire Period of	Abatement		City, State, Zip Code							
Abatement Performed (Outside of I	Normal Facility	Hours									
Other-Describe: OCCL	ipied by ot	her trades			Paterson, N	J 07501						
Source of Work (Check all the	at apply)				.				-			
> 3 sf or > 3 lf	×	Renovation		Full	Containment wit	th Negative	Pressure	X Mir	ni-Enclo	sure		
> 160 sf or > 260 lf		Demolition		X Non	-Exempted(*) &	Non-Friable	e Procedure	X Glo	vebag F	rocedu	re	
	I le Loo	ation Normally	Head						Aboto			
				Description of thermal system		Amount	Specify SF or	LF)	Abatei	ment Ty	<u>pe</u>	
Facility (13)	Staff?	(12)		surfacing, VAT					_		_	
2nd Floor	YES		N/A	miscell.)					Rem.	Rep.		Enclose
				Pipe Insulation Duct Floor Joint Cau	ılı.	318 LF 1 SF			X		 X	
			Duct Floor Joint Cau		1 SF			- x		Î	-	
Roof X Mastic			Mastic material on fit		3,090 SF			×		1 x	1	
Name of Reg. Waste Hauler		NJDEP Was	te Hauler I	D#	Cubic Yards of	Waste		Name o	of Reg.	Landfill		_
MTM Metro Corporation		26552			30	143	J.	Tullytow	n			
City, State							Disp. Date			City, Sta	te	
Paterson, NJ					6/22/2013 Tullytown, PA					, PA		
Completed by (Print or Type)		Signature			Date			-				
Elizabeth Maslarkov	F018	Business Adm	inistrator		Elizabeth	Masla	rkov	5/15/20	13			
											1000	

ASB-41

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



Date of Notification (1) 5/16/13				Name of	Building	Owner/	Operator	(2) nato (Private H	ome)					.1	
Agencies Notified	Type Notification			Street A			. 0404				20 AV	1	24211	-1006		-
⊠ EPA				49 We	st Anch	or			vá v s		N.	2:	EU			
DEP	Amended				te, Zip Co			,	K.,	1				-		
DOL	Amendment Emergency				gg Hart	or NJ	08087			I Tal	A	lumbar	P.			
DOH DCA	justification) Cancellation		100	Name of Carmin	Contact					1 ren	ephone N	umber				
	Carlocilation				LITY INFO	ORMAT	ION			-			V-1.700			
Name of Facility Where								Туре	of Facility (4	1)						
Carmine & Kierst	en Cucunato (F	rivate H	ome)						School (K-12 Subchapter		er than K	-12\				
49 West Anchor								×	Other (i.e. pr				ildir	ngs,	home	s,
City (5)									etc.) re Feet	# 01	f Floors		Bld	g. A	ge	
Little Egg Harbor N	J 08087							1000		1			35	T		
County (6)					Code (7) USE ONLY				nt Use (Prio	r if bei	ng demol	lished)			B((
Ocean								Hom			(0)					
Name of Monitoring Firm N/A	Hired by Building	Owner (8)		ASCM	1 No.		1775	of Aba	tement Cont	tractor	(9)				į	
Street Address		***************************************	10-11-1	-				Addres								
1								30x 32								
City, State, Zip Code									ip Code n NJ 0809	91						
Project Manager for Mor	nitoring Firm			Telepho	ne No.		100000000000000000000000000000000000000	hone No 753-9			License 00727		Y-market			
Start Date (10) 5/29/13	t Date (10) Sched						Name		A Monitor				,			
Occupancy Status Durin	g Abatement (Che	ck Only On	e)				Street	Street Address								
Facility Closed/Vac Abatement Perform Other – Describe:	ned Outside of Norr				City, State, Zip Code											
Scope of Work (Check A															7120	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	iii mac Appiy)	-	enova					Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure								
		ls.	Locati	on								T		bate	ment	
Location	n of	N	Iormal	ly		De	escription	n of				-		Ту	pe	
Asbestos-Containing TO BE AB		Mai	d Sole intena	nce/			ntaining f				mount Specify	7	,	_	Enc	Щ
In Faci	lity	Cust	odial 8 (12)	Staff?	(1.6.	surf	acing, VA	AT, or	1		or LF)	Kemova		Repair	Encapsulate	Enclosure
(13)		-		Τ		otner	miscella	neous)				Val	-	=	ılate	ure
	<u> </u>	Yes	No	N/A			· 0:				00.05	+	+			
Exterior Siding				×		Ext	erior Si	aing		11	00 SF	x	+			
													\pm			
Name of Registered Wa	ste Hauler		IN	JDEP W	/aste	Cubi	c Yards		Name of F	Registr	ered Land	dfill				
United Containers	ed Containers				No.	of W			G.R.O.V							
City, State				2459			osal Date	Date City, State Morrisville PA 19067								
Completed by		Title	//-				Signatur	e	Monio			Date				
Anthony T Perna		Presi	dent					e_				5/16/	13			

1685 code

Date of Notification (1) 5/15/13 5/14/13	1					Operator (2 e Sea Re			TAIL,	20			10%	7.3	
Agencies Notified Type Notification		10000	treet Add	ress lantc Av	enue	9			2.	4		٥,			
EPA Initial Amended Amendment #_				, Zip Code City NJ		01			72.5	1			•		
Emergency (inc justification) DCA Emergency (inc justification) Cancellation	luding	100	ame of C	Contact				, , , , , , , , , , , , , , , , , , ,	Tele	phone N	lumb	er			
DOA CONCONCION			FACILI	ITY INFO	RMAT	ION			1						
Name of Facility Where Abatement is Taking P Our Lady Star of The Sea Rectory Street Address	lace (3)						Sc	Facility (4 chool (K-12 ubchapter	2) B (Othe	er than K	(-12)				
2651 Atlantc Avenue						Ī	Of et	ther (i.e. pr	ivate 8	k comme	rcial	buildi	ngs, l	nome	s,
City (5) Atlantic City NJ 08401						1.	Square 1000	Feet +	1+	Floors		35	dg. Aq b+	je	
County (6) Atlantic			ounty Co	ode (7) SE ONLY)			Current	t Use (Prio	r if bei	ng demo	lishe	d)			
Name of Monitoring Firm Hired by Building Ow N/A	ner (8)		ASCM	No.		Name o Perna		ment Con	tractor	(9)			,		
Street Address						Street A									
3	2000					PO Bo						70		-	
City, State, Zip Code						City, Sta West									
Project Manager for Monitoring Firm		T	elephon	e No.		Telepho 856-7	53-98	. 00		License 00727		•			
	cheduled /17/13	Com	pletion D	ate (11)		Name of OSHA Monitor Same									
Occupancy Status During Abatement (Check (Only One)			econor	Street A	ddress	3							
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Normal Other – Describe: Basement Closed	riod of At Facility I	oateme Hours	ent	/	_	City, Sta	, State, Zip Code								
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 lf ≥ 160 sf or ≥260 lf		enovat emoliti				×	Mini	Containme -Enclosure rebag Prod -Exempted	e cedure) = T.				e .	
			1				NOI	-Cxemple	1 () ai	d Holl I	III		Abate	ement	t
Location of	N	ocation or mally	y		D	escription	of						Ту	ре	_
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mair Custo	Solel ntenan odial S (12)	taff?	Asbest (i.e.	os Co therm surf	ntaining Mal systems facing, VAT r miscelland	aterial insulat r, or	(ACM) tion,	(Amount Specify F or LF)		Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A							00 SF					-
Basement Hallway			X		Flo	or Tile C	nly			00 SF		x			
Name of Registered Waste Hauler			JDEP W		Fig. 125.532.250	ic Yards		Name of	Regist	ered Lar	ndfill				
United Containers		auler ID 2459	No.	2	Vaste		G.R.O.						701.01110		
City, State Elm NJ					1000	oosal Date 7/15		City, Star Morris		A 1906	67				
Completed by Anthony T Perna	Title Presi	dent				Signature	1		_		Da 5/	te 14/1:	3		



11	Olim
LINE WALLES	

Date of Notification (1) 5/15/13					of Building				rivate Hom	ω)	201	24				-
Agencies Notified	Type Notification			Street	Address Sunset		Dolaive	3 (1 1			201	147	1/ :),	97	3: F.
EPA DEP DOL	Initial Amended Amendmen				ate, Zip C City NJ (-			r.;	L	2	,÷ ,.		**/
DOH DCA	Emergency justification Cancellation			Name o	of Contact W					Те	lephone	Num	ber	1		
				FAC	ILITY INF	ORMATI	ION			N-	30.00					
Name of Facility Where	Abatement is Takir	ng Place (3)					Тур	e of Facility	(4)						
Andrew & Kathleen Street Address 1402 Sunset Av	Delaive (Priva	te Home		2002MIX.				×	School (K-1 Subchapter Other (i.e. p	8 (Oth				dings	, hom	ies,
City (5) Surf City NJ 08008	10		1.0.5500.5-0						etc.) uare Feet 00 +	# 0	f Floors		10%	Bldg. /	\ge	
County (6) Ocean					Code (7) USE ONLY)			rent Use (Pri me	or if be	ing dem	olish	ed)			
Name of Monitoring Firm N/A	Hired by Building	Owner (8)		ASCI	M No.		Name Pern		natement Cor	ntractor	(9)					
Street Address	>= 0:10:0:10						Street PO E									
City, State, Zip Code					,		City, S	tate,	Zip Code rlin NJ 080	091						
Project Manager for Mon	itoring Firm		T	Telepho	one No.		Teleph	none		License No. 00727						
Start Date (10)		Schedul	ed Cor	npletion	Date (11)				SHA Monitor		0072					
5/16/12		5/17/13	3													
Occupancy Status During							Street	Addr	ess		,					
Facility Closed/Vaci Abatement Perform Other – Describe:	ed Outside of Norr	Period of Annal Facility	Abaten Hours	City, State, Zip Code												
Scope of Work (Check A	Il That Apply)															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		PROPERTY.	Renova Demolit	30 Car 10			×	M G	lini-Enclosure							
		Is	Locati	an.										Abate	emen	t
Location	of	1	Vormal	ly.		Des	scription	of						Ту	ре	
Asbestos-Containing <u>TO BE AB</u> In Facil (13)	ATED	Ma	d Sole intena todial S (12)	nce/		thermal surface		insu T, or		(5	mount Specify F or LF)		Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A											te	(D)
Exterior S	Siding		х		Exte	rior Sic	ding		6	00 Sf		x				
						-		-				-				
Name of Registered Was United Containers	Name of Registered Waste Hauler United Containers				Vaste No.	Cubic of Was			Name of I		red Land	dfill				
City, State Flm NJ					Disposal Date City, State				te ville PA 19067							
Completed by Anthony T Perna		Title Presi	dent				ignat <u>u</u> re	_	7			Date 5/15/13				
			-					_		5/15/13						



Date of Notification (1) 5–15–13					of Building Owner American Wa		r (2)	23/3		7		- 8
Agencies Notified	Tuna Natification			100000	Address	ater			20	7.6		
Agencies Notified	Type Notification	1			inden Avenu	ue		23/3/19/		77 3	1 81	٦
□ DEP	□ Amended	1			State, Zip Code			44.1.				
⊠ DOL	Amendmen □ Emergency	t#	<u> </u>		obsboro, NJ	0802	26					
XI DOH	justification))	3	1 22	of Contact Gordon Der	onic		Telephone	Numbe	r		
D DCA +	☐ Cancellation	n			CILITY INFORMAT							
Name of Facility Where	Abatement is Takir	ng Place	(3)	FA	CILIT INFORMAT	IION	Type of Facility	(4)				
NJ American Wa		,	80.5				☐ School (K-	05 = 70 200028				
Street Address							☐ Subchapte	r 8 (Other than private & comm		uildina	s. hor	nes.
3 Linden Avenue	e 						etc.)					
City (5) Gibbsboro							Square Feet 7,200 SF	# of Floors		Bldg.	Age yrs	
County (6)	746	350 Brillian		County	Code (7)		Current Use (Pr					
Camden	2.00			(STATE	USE ONLY)		water comp		ice k	ouil	din	g
Name of Monitoring Firm		Owner (8)	ASC	M No.		of Abatement Co					
EHS Environmen	tal, Inc.						mouth Envi	ronmental	Co.	,Inc		
Street Address 411 Southgate (Court, Suit	e E					Address Haws Aven	ue				
City, State, Zip Code	•					City, S	tate, Zip Code					
Mickleton, NJ							ristown, P.					
Project Manager for Moni Jack Carney	toring Firm				one No. 224–0080		one No. -239-9920	Licens 00	e No. 398			
Start Date (10) 5-14-13		Schedul 5-31		mpletion	Date (11)	1	of OSHA Monitor nouth Envi	conmental	Co.,	Inc		
Occupancy Status During	Abatement (Chec	k Only Or	ne)			Street	Address			-		
☐ Facility Closed/Vaca	ted During Entire F	Period of	Abater	nent			Haws Avenu	ie .				
□ Abatement Performe	d Outside of Norm	nal Facility	y Hour			18	ate, Zip Code		2.0			
Other - Describe: _		LSOIAL	.eu_			Nor	ristown, PA	19401				
Scope of Work (Check All	I hat Apply)											
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 		5.000 N	Renova Demoli			Ø		ent with Negativ	e Press	ure		
A = 100 01 01 = 200 11			50111011				Glovebag Prod	edure				
					T		Non-Exempted	(*) and Non-Fr	iable Pr		re emeni	
		7773	Locat Normal								еттетт уре	
Location (Asbestos-Containing N		Use	d Sole	ly by	Asbestos Cont	scription aining Ma		Amount		T	m	I
TO BE ABA	TED	01 000000	intena todial S		(i.e. thermal	systems	insulation,	(Specify	Re	, D	nca	Enc
In Facility (13)	+	003	(12)	Jiair.		cing, VAT niscellane		SF or LF)	Removal	Repair	Encapsulate	Enclosure
(1.9)		Yes	No	N/A			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		'al	-	late	Ire
main building			х		muffler ex	haust	insulatio	n 130 SF	x			
main building			х		breeching	insul	ation	45 SF	x			
Name of Registered Waste	: Hauler		311 5338	JDEP W auler ID				Registered Land	TI (I			
Robinson Waste			10.00	17304	6		GROWS,					
City, State	-				1.000	al Date						
Bellmawr, NJ	Lmawr, NJ				5-31-	-	Morrie	Ville, PA				
Completed by Timothy E. Bryan		Title	, Dw	nai a		gnature	1/1	,	Date			
Drydii		ATCE	-PIE	eside	IIC	1 1	VII'	/ 5	-15-	13		

Ch# 0152

Date of Notification (1)				Name	of Building Ov	wner/Operat	or (2)		171	UI					
5-15-2013				Festa	a Carpentry	y			2	01-					
Agencies Notified	Type Notification	1		Street	Address				4	810 (M)	20	//			
□ EPA	× Initial			118 9	St. Lawren	ce Blvd.					is U		2	- /1	
DEP	Amended			City, St	ate, Zip Code	9					-			-	
⊠ DOL	Amendmen		_	Brick	, NJ					6.71					
X DOH	Emergency justification			Name o	of Contact				Te	lephone N	lumber	9 1			
DCA	Cancellation			David	t							7			
Name - 6 F - 104 - 144				FAC	ILITY INFOR	RMATION									
Name of Facility Where	Abatement is Takir	ng Place (3)				Тур	e of Facility (4	4)						
House								School (K-1							
Street Address	S							Subchapter				ildina	a bom		
118 St. Lawrence E	Blvd.			2.20.00				Other (i.e. p etc.)	iivate	a comme	ciai bu	liding	s, non	ies,	
City (5)		1000	5(-150)				Squ	are Feet	# 0	f Floors		Bldg.	Age		
Brick							100	00	1			50+			
County (6)					Code (7)		Сип	ent Use (Pric	or if be	ng demol	shed)		-		
Ocean				(SIAIE	USE ONLY)		Ho	use							
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCI	M No.	A CONTRACTOR OF THE PROPERTY O		atement Con	AND THE STREET STREET STREET STREET						
n/a					10.000211001000000000000000000000000000	Lo	znica I	Manageme	ment Corporation						
Street Address							et Addre								
n/a						22	Troy l	_ane							
City, State, Zip Code					D-00177	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Zip Code							
n/a			_55000			Lin	coln P	ark, NJ 07	035						
Project Manager for Mon	itoring Firm		T	Telepho	ne No.		phone N			License	No.				
n/a				n/a		973	3-706-	7950		01193					
Start Date (10)		Schedule		npletion	Date (11)	Nam	e of OS	HA Monitor				-			
5-24-2013		5-25-20				Loz	znica M	Manageme	nt Co	orporation	n				
Occupancy Status During	Abatement (Chec	k Only One	9)				et Addre								
Facility Closed/Vaca	ited During Entire	Period of A	baten	nent			Troy L			0.5					
Abatement Performe Other – Describe:	ed Outside of Norn	nal Facility	Hours	S		1		Zip Code	Τ.						
						Lin	coln P	ark, NJ 07	035						
Scope of Work (Check Al	I That Apply)	100000				20030107000					(6)				
≥3 sf or ≥3 lf		greening	enova					II Containme	nt with	Negative	Pressi	ıre			
× ≥160 sf or ≥260 lf		∐ De	emolit	tion		1	100	ni-Enclosure ovebag Proce	ndura						
			La Company					n-Exempted		d Non-Fria	ble Pro	ocedu	re		
		ls l	ocati	ion					-X				emen	t	
Location	of	No	ormal	ly		Descriptio	n of					Т	ype		
Asbestos-Containing	Material (ACM)	Used	Sole	2 - 1	Asbestos	Containing		I (ACM)	Aı	mount			m		
TO BE ABA		Custo				ermal systen		ation,		pecify	Re	Z.	nce	Enc	
(13)	.y		(12)			surfacing, Valle Sther miscella			SF	or LF)	Remova	Repair	Encapsulate	Enclosure	
* *		Yes	No	N/A			,				à	=	late	re	
		res	INO	IN/A			Sec. 10.				-	_			
Exterior of I	Home			X	Α	sbestos S	Siding		1,0	00 SF	X				
					7)						1				
0.144	and the same same same same same same same sam										+-				
		++		-							-	-			
Name of David Children															
Name of Registered Wast			10.007/40	JDEP W auler ID		ubic Yards f Waste		Name of R	egiste	red Landfi	11				
Loznica Managemen	t Corporation			033137		BD		GROWS	Lan	dfill					
City, State	•		1			isposal Date	3	City, State	-		3-72				
Lincoln Park, NJ 070	35					BD		Morrisvil	le, P	A 19067					
Completed by		Title		*************		Signatur	en -				ate				
E. Cirovic		Secre	tary			12	/ :	www	,		-15-2	013			

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

Date of Notificatio	n (1)		Name	of Bui	lding	Owner/Operator	(2)					
5-15-2013			To	ny C	uozz	0	20					
Agencies Notified	Type Notifica	ation	Stre	et Addr	ess			9/1/2 is			-	
[]EPA	[X]Initial		41	.0 Va	lley	Road	24	9 				
[]DEP	Notific	ation	City	, State	, Zip	Code			1 G: 5			
[X]DOL	[]Amended				M 55	NJ,07042	흲	1.		4		
[X] DOH	Notific	ation	Name	of Con	tact			one Number				
[]DCA	[]EMERGENC	Y	100000000000000000000000000000000000000	ny Ci		0	i					
	[]Cancella	tion						- 15 T				
			•			INFORMATION						
Name of Facility Wh		is Taki	ng Pl	ace (3)			Type of Faci	lity (4)				
Same as above	•						[]School	1988 50 1988			2.0	
Street Addres						***************************************		pter 8 (Othe (i.e., priva				
								buildings, h				
							Square Feet	# of Floo	rs B	ldg.	Age	
City (5		County	(6) Es	sex	553	nty Code (7)	2800	3	-	93		
							Current Use	(Prior if be	ing de	moli	shed	()
Name of Monitoring	Firm hired by	Buildin	or As	CM No.		Name of Abate	ment Contract	or (9)				
Owner (8)	miled Dy	Durrarii	9 1	our no.		Andrew Control of the	ANAGEMEN'					
N/A Street Address						Street Address		,				
bereet madess							, topher St					
City, State, Zip Coo					City, State, 2	*******						
orely beare, mp co.	46					FB	r, NJ 070	142				
Project Manager for	Monitoring Fi	- m	lopho	ne Numb		Telephone Numb).		
rioject Manager for	Monitoring Fi	1	/A	ne Numb	er	(973) 744		ľ	icense		ber	
Scheduled Start Date	2 (10) Saha		UMCESS.	n Date	(11)					_		
5-29-2013	(C) (C) (C)	5-30-			(11)	Name of OSHA Monitor N/A						
			Day	Year								
Occupancy Status Dur [X]Facility Clo						Street Address	3					
of Abatemen		irring in	LULLE	rerrou								
[]Abatement Pe	rformed Outsid			Facilit	ty	City, State, Z	Kip Code					
[]other - Desc				cript»								
Scope of Work (Check	all that app	ly)				Ш						
[X]>3 sf or	\2 1£		VIDon	ovation	200		Containment w: Enclosure	ith Negative	Press	ure		
[] <u>></u> 160 sf		- 57		olition		T	pag Procedure					
			Ta			[]Non-Fr	riable Proced	ire	155			m
Location	n of		Is ocati			Description	n of		ADa	teme	E	E
Asbestos-Cor	사용 (1) 전 1 전 1 전 1 전 1 전 1 전 1 전 1 전 1 전 1 전	1	Used	1		Asbestos-Cont		Amount	R	R	N	C
Material TO BE AB		E	Solel y Mai			Material (i.e., thermal		(Specify	M	P	A P	L
In Facil			enand			sulation, surfa	cing, VAT,	LF)	V	A	S	S
(13)	Yes	aff No	(12) N/A		or other miscel	laneous)		L	R	Ľ	R	
Basement	+	1	X	Boi	ler		75 SF	X		•		
								<u> </u>				1
· · · · · · · · · · · · · · · · · · ·												
Name of Registered W	Waste Hauler	N.	DEP V	Waste	Cul	oic Yards	Name of Regi	stered Land	Fill	1		1
AZTECH MANAG		C. Ha	uler	ID No.		Waste 1	G.R.O.W.					
City, State			704		Dis	sposal Date	City, State					
Montclair, NJ 07042					2000	-31-2013	Morrisvi	lle,/PA	1906	7		
·							1	1/				
Completed By (Print			900	Signature	1	1/	Date	001				
Constantine V	ivian Pr	eside	nt	<u> </u>		1011	Skullie	1110cm	5-15-	-2013	5	273

AND ROCA LY	7	. 1	may 10	heck	W. W. W.	LAN IV	100 E
	NOTIFICATION OF	of New Jurany F ASBESTOS A NJAC 8:60 and	BATEMENT 12:120)	NI DENCO	Sam	Sgin	_
Date of Notification (1) 5-16-	13 Name of Bu	ullding Ownerrop		1	1 16	gnate P	MAG
Agencies Notification Type Notification	Street Addr		^	Dam		-4	9,
☐ EPA	City, State,	Zlp Code	0	Bayvieu			
DOH Emergency ((Including Name of Co	ontact	ms River	NOT 08		53	
D DGA D Cancellation	FACILIT	YINFORMATIO	RszulaK	`.			
Name of Facility Where Abelement is Takin	ig Place (3)		Type of Facilit	y (4)		Ç.	
Street Address 309 West B	Daywin De	. 1	School (F Subchap Other (i.e	C-12) (cr 8 (Other than K- :. private & commen	12) cial bui	idlaas	bor
city(s) Toms River	•	753	Square Feet	# of Floors		Bldg. A	
County (6) Ocean	County Cod (STATE USE	(Y) at	Current Use (F	Prior It bolns damoils		60	
Name of Monitoring Firm Filmed by Building (Owner (8) ASCM No		Name of Abatement C	ontractor (9)	Du	<u>. lle</u>	3
Street Address	agies N	//A	Street Address	chnole	gie	& ,	L
City, State, Zip Code	NT ODE	223	City, State, Zip Code	1 22 1			
Project Manager for Mouth ril go Firm	NO O83	25	New Est	License	0	85	13
Start Date (10)		58-3365 6	09 758-33	45 0	Ö.	39	4
5-22-13	5-23-13		Name of OSHA Monito	hnologies	T	`a.c	-9
Occupancy Status During Abatement (Check Facility Closed/Vaceted During Entire F			PO Bo	~ .			
Abatement Performed Outside of Norm Other - Describe:	nal Facility Hours	(City, State, Zip Code				
Scope of Work (Chack All That Apply)			New Egypt	· MT	<u> 90</u>	53	3
2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Renovation Demolition		☐ Gloveban Pr	nent with Negative ine- ocedure od (*) and Non-Frial			
	Iz Location Normally		THE CONTRACTOR OF THE CONTRACT	J Blid Noji-riigi	I I	Abater Typ	mei
Location of Asbestos-Containing Material (ACM)	Used Solely by	Asbestos Contain	iption of ring Material (ACM)	Amount			
TO BE ABATED In Facility (13)	Custodiel Staff7 (12)	surfacin	stems insulation, g, VAT, or	(Specify SF or LF)	Remove	Repair	Encapaulale
(15)	Yes No N/A	other mig	collangous)		(and	a	sulale
			1	800 St	X		
Exterior Walls	Y S	siding S	phingles	ال بال			
Exterior Walls	X S	iding S	phingles	<u> </u>			
	X S	siding S	ningles	200 3/			
Name of Registered Waste Hauler	NJDEP Waste	Cubic Ya		f Registered Landfill		-	
Name of Registered Waste Hauler EPC Technologies City, State	NJDEP Waste	Cubic Ya	5 Was	f Registered Landfill teManage		- o F	-

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NOTIFICATION OF ASBESTOS ABATEMENT

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

Date of Notification (1) May 15, 201	3	Name of Buildin		erator (2) y Bobcat Excava	ting CL	2,2	16	51		
[] DEP [] Amo	cation al Notification ended Notification endment # ergency (including	Street Address City, State, Zip	Code	Route 9 River, NJ 08753	4	*? 	47. K	٠ <u>٠</u>		
[] DCA justi	ification)	Name of Contac Bob			Telephone Number					
Name of Facility Where Abatement is Takir		CILITY INFOR	MATION	Type of Facility (4	4)					
Residence Street Address 443 Eisenhower A	Avenue	·		[] [x]	School (k-12) Subchapter 8 (o Other (i.e., priva homes, etc.)				ldings,	
City Ortley Beach	County (6) Ocean	County Code (7) (STATE USE ON	ILY)	Square feet 1000 sf Current Use (Prior	# of Floors 1 if being demolished		, Age (50		
Name of Monitoring Firm Hired by Buildin N/A		ASCM No.	Name of	Resid Abatement Contract	ence		<u> </u>			
Street Address		1	Street A	ddress 1889	Route 9, Unit 61					
City, State, Zip Code Project Manager for Monitoring Firm	Telephone Numb	er		te, Zip Code Toms ne Number	River, New Jers		55-1	271		
Scheduled Start Date (10)	Scheduled Compl		732-349-9932 00624 ion Date (11) Name of OSHA Monitor							
그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그	5/16/13 c only one) ed During Entire Period of A Outside of Normal Facility									
Scope of Work (Check all that apply) $ \begin{bmatrix} $	5 E 0000000	vation blition	[] [] [x]	Mini-Enclosure Glovebag Proce	nt with Negative Produce dure (*) and Non-Friable		re			
Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility (13)	Is Location Normally used Solely by Maintenance/Custodia Staff (12) YES NO N/A	d (i.	Description sbestos-Cor Material (A e., thermal s sulation, su VAT, of her miscella	ntaining .CM) systems rfacing, or	Amount (Specify SF or LF)	R E M O V A L	R E P A I R	E N C A P S U L E	E N C L O S U R E	
Exterior	Asbestos sid	ing		675 sf	X					
				1						
Name of Registered Waste Hauler Guardian Contracting, Inc. City, State Toms River, New Jersey	er ID No. Cubic No. 2 osal Date 7/13	City, Sta	T.R.R.F.							
Completed by (Print or Type) Nicholas Fernicola	Title Project Manager *Do not use this for	Signature	hol	ton	/	Date 5/15/	13			

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

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

Date of Notification (1)	M 15 2013				Nam	e of Building C	wner/Opera Robert	ator (2) Amat	0 281	134.	u 216	05)		
Agencies Notified	May 15, 2013 Type of Notification Initial N	n otificatio	on		Stre	et Address	33 Rust	tic Tra	ail		u 216	7.13			
[x] EPA [] DEP [x] DOL	[] Amende Amendr	d Notific	eation		City	, State, Zip Coo	le Flemin	gton,	NJ 08822	4 1	10 VI				
[x] DOH [] DCA	[X] Emerge justifica [] Cancell		uding		Nar	ne of Contact Rober	Amato			Teleph	none Number	_			
3	1 1			F	ACILI	TY INFORM	ATION						_		
· ·	Abatement is Taking I sidence	Place (3)						Type	of Facility [[[x] Sc] Su] Ot	hool (k-12) behapter 8 (other her (i.e., private	er than k	12) nercial	buildin	gs,
Street Address	1 Eisenhower Av	enue								20,000	mes, etc.)	Bldg. A	ge		
City		County	(6)		Cot (ST	inty Code (7) ATE USE ONI	.Y)		re feet 1500 sf ent Use (Pr		1 ng demolished)		60		-
Ortley Bead	ch	Ocean						1	Res	idence					
Name of Monitoring Fire	n Hired by Building	Owner (8	3)		AS	CM No.	Name of	f Abate	ment Contr Gua	ardian (Contracting,	Inc.			
Name of Monitoring No.	/A						Street A			39 Rout	te 9, Unit 61				
				_			City, St	ate, Zip	Code	ms Riv	er, New Jerse	ey 0875	5-12	71	12
/	City, State, Zip Code Project Manager for Monitoring Firm Telephone N						Telepho 732-3	one Nu	mber	ms xuv	License N 00624	lumber			
	Project Manager for Monitoring 1 min					Date (11)	Name (of OSH	A Monitor	MCI	Analytical				
Scheduled Start Date (1 5/15/1 Occupancy Status Durin	13		5/16				Street	Addres			Analytical ton Road				
Scope of Work (Check	>3 sf or ≥3 lf	Outside	of Norm	al Fac	Renovation	on	[[[1	Full Contai Mini-Enclo	inment wo	ay, New Jers with Negative Pr e and Non-Friable	essure			
[x]	≥160 sf or ≥260 lf		[x]		Demoliti	on				===7			ement	Гуре	
Locati Asbestos-Containir TO BE A in fac	ng Material (ACM) ABATED	1	Is Loc Normal Solel ntenanc Sta (1	ly use y by e/Cus aff 2)	ed		Descrip Asbestos-C Material (i.e., therm insulation, VA' other miso	Contain I (ACN nal sys , surfac T, or	ning (1) tems cing,		Amount (Specify SF or LF)	R E M O V A L	R E P A I R	E N C A P S U L E	E N C L O S U R E
		+-	X			Asbestos s	iding				1350 sf	-\^	+-	-	+
Exterior												1			1
						-									
Name of Registered V	Waste Hauler n Contracting, In	c.	NJDEF		te Hauler	A.C.	ic Yards of	ty State	T.R.	R.F.	ered Landfill				
City, State Toms R	iver, New Jersey	Titl	e		5/17/		Tu	illytov	vn, Jenns	sylvania	a d	Da 5/	te 15/13		
Completed by (Print Nicholas	Completed by (Print or Type) Nicholas Fernicola *Do not us:						licensure	(exemp	1	ies.					

State of New Jersey - Notification of Asbestos Abatement

Ch story

(Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

Date of Notification (1)	Nome of Building O	10	1 (0)	<812							
May 14, 201	3				Name of Building Own The Village Sch		itor (2)	. 1			
Agencies Notified		Notificatio			Street Address	001					
X EPA				tification	100 West Prospe	ect Stre	et				
x DCA				rtification	City, State, Zip Code			470			7)
x DOL				(including	Waldwick, NJ ()7463		**			
X DEP			cation)	Name of Contact		1	Telenhon	o Alumba	-	
x DOH		□ Canc	elled		Marilyn Larkin		-			1 4	
Name of Facility Where Abaten	nent is Tak	ing Place (3)		FACILITY	INFORMATION						
The Village School	TOTAL TO TAK	ing ridde (5			Type of Facility (4) School (K-12)						
Street Address					Subchapter 8 (other t	han K-12\	į.				
100 West Prospect Str	eet				Other (i.e. private &	commerci	ial buildin	nas homes	etc.)		
07. (5)					Sq. Feet: Unknow	n #0	f Floors	: 3 Blda	. Age:	50 yea	rs
100.00	County (6)			ty Code (7)						,	
Waldwick	Bergen		ISIAI	e Use Only)	Current Use (prior if be	ing demo	olished):				
Name of Monitoring Firm Hired	by Blda O	wner (8)	ASCA	M No.	I November 1						
EnviroVision Consu	tante i	ne (o)	000		Name of Contractor (9)						
	icanto n				GREENWOOD AB	ATEME	NT CO	NSULTA	ANTS II	NC.	
Street Address	D				Street Address					10.	
20-21 Wagaraw Road,	Bldg # 3	34 <u>A</u>			200 MAIN CEDEET						
City, State, Zip Code					268 MAIN STREET City State, ZipCode						
Fairlawn, NJ 07410					Butler, NJ 07405						
Project Manager for Monitoring	<u>Firm</u>	Telephone I			Telephone Number			License Nu	ımber		
Fred Larson		973-636	-9145		070 400 0477				**************************************		
Scheduled Start Date (10)	+	Scheduled (Completi	on Date (11)	973-492-0477 Name of OSHA Monitor			00840			
June 22, 2013		July 12,		OH Dute (11)	Name of OSHA Monitor						
Occupancy State Building	- 1				EMSL inc.						
Occupancy Status During Aba	tement (C	heck only o	ne)	137	Street Address						
Facility Closed/Vacated Abatement Performed C	During En	Normal Fac	of Abate	ement	1056 Stelton Road						
Describe		voimar i ac	iity i iou	15 -	City, State, Zip Code			-			
Other - Describe: Vac											
Sub Chapter 8 – N	on-Occ	upied			Piscataway, NJ 0	8854					
Source of Work (Check all that a	nnly)										
an that a	ppi ()					w E.III	~4-i			_	
\geq 3 sf or \geq 3 lf				Renovation	1		Sontainn Enclosui	nent with f	Negative I	Pressure	į.
□≥ 160 sf or ≥ 260				Demolition	Ži.		bag Prod				
Location of Ashartan Control				-				d (*) and N	lon-Friab	le Proced	dure
Location of Asbestos-Containing Material (ACM) in Facility (13)		ition Normall by Maint./Cu		Description of As	bestos Containing Material	A	mount	Abat	ement Ty		
, , , , , , , , , , , , , , , , , , , ,	Staff? (Stoulai	VAT, or other mis	mal systems insulation, surfaction	70.00	Specify S r LF)	Remo	ove Repair	Encap E	Enclose
CIA/ C	YES	NO	NA				,				
SW Corner Stairwell 1 st & 2 nd Floors			X	Plaster		1	,031 s1	f X			
1 st Floor Hallway			1521								
i Floor Hallway			X	Plaster		2	,850 sf	f X	- 1		
	1					- 1			- 1		
€3										1 1	
Name of Reg. Waste Hauler	IN	IJDEP Waste	Hauler	ID#	Cubic Yards of Waste:		1.0				
See Hauler Below # 1 & 2	10 11	Cubic Talus of Waste:	40		ame of Red leadowfi						
Hauler #1) Greenwood A	bateme	ent Cons	ultant	s, Inc Butle	r. NJ 07405	Disposa			City, Sta		
NJ DEP # 12	000 P. C.		12, 201	3	Route 2,	Box 68					
Hauler #2) Newark Cartin	19551		# III 3		Bridgepo						
	ereconnect (SOS)				304-842	-2104					
Completed by (Print or Type)	Title						-071.91t JR				
Marin Graure	Signature			ate							
	Marin Graure		M	ay 14, 2	013						
140 110010 001	1017	NAGER			No. 100 No. 10						

State of New Jersey - Notification of Asbestos Abatement

04/0300

(Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

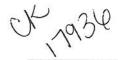
Date of Notification (1) May 13, 2013				7	Name of Building Owner BES, Inc.	er/Operator (2)	23/34
Agencies Notified EPA		Notification IXI Init		ification	Street Address 64 East Midland A	venue		20
DCA				(including	City, State, Zip Code			to the
X DOL		justific			Paramus, New J	ersey 07	652	*/ h = 17.2.
X DEP		☐ Cance	lled		Name of Contact		Tel	ephone Number
X DOH					Mark Wagener			
Name of Facility Where Abatem	ont is Tak	ring Place (2)		FACILITY IN	FORMATION (A)			(4)
Berkeley College- Bldg					Type of Facility (4) School (K-12)			<i>y</i>
Street Address 44 Rifle Camp Road					Other (i.e. private Sq. Feet: Unknown	& commercia 3 # of Flo	l building oors:	gs, homes, etc.) Bldg. Age: 100 years
A STATE OF THE PARTY OF THE PAR	ounty (6)	•		y Code (7) Use Only)	Current Use (prior if bein	ng demolish	ed):	
Name of Monitoring Firm Hired to EnviroVision Consul			ASCM 000		Name of Contractor (9) GREENWOOD ABA	TEMENT	CONS	ULTANTS, INC.
Street Address	DL4 "	255		-	Street Address			
20-21 Wagaraw Road, I	Blag #	35E			268 MAIN STREET			
Fairlawn, NJ 07410					City State, ZipCode Butler, NJ 07405			
Project Manager for Monitoring F Fred Larson	·irm	<u>Telephone N</u> 973-636-			Telephone Number		Lice	nse Number
		070-000-	3143		973-492-0477		008	340
Scheduled Start Date (10)		Scheduled C		on Date (11)	Name of OSHA Monitor		•	
May 16, 2013		May 20, 2	2013		EMSL inc.			
Occupancy Status During Abat	tement (0	Check only or	ne)		Street Address			
Facility Closed/Vacated	During E	ntire Period o	f Abate	ment				
Abatement Performed O Describe	utside of	Normal Faci	ity Hour	'S -	1056 Stelton Road			
Other – Describe: Wee	kend V	Nork			City, State, Zip Code			
Strict Bescribe.	Keria i	VOIK			Piscataway, NJ 08	8854		
Source of Work (Check all that a	oply)		West State					
						Full Conf	ainment	with Negative Pressure
_ ≥ 3 sf or ≥ 3 lf				Renovation		Mini-End	losure w	vith negative air
$\square \ge 160 \text{ sf or } \ge 260$				Demolition		Gloveba	,	3.70 P.70
						Non-Exer Wrap & 0) and Non-Friable Procedure
Location of Asbestos-Containing	Is Loc	ation Normall	y Used	Description of Asl	bestos Containing Material	Amo		Abatement Type
Material (ACM) in Facility (13)		by Maint./Cu	stodial		nal systems insulation, surfac		cify SF	Remove Repair Encap Enclose
	Staff? YES	11 TO CONDESSES	NA	VAT, or other mis	ceii.)	or LF)	Kemeve Kepan Encap Enclose
Cafeteria			X	VAT & Masti	С	1,38	0 sf	X
Old Security Rm&			X	VAT & Masti	С	9	0 sf	
Closet								
Community Room			X	VAT & Masti	С	88	0 sf	
Name of Reg. Waste Hauler See Hauler Below # 1 & 2 NJDEP Waste Hauler ID # See Below					Cubic Yards of Waste:	15		e of Registered Landfill dowfill Landfill
Hauler #1) Greenwood			ultant	s. Inc. – Butle		Disposal [City, State
NJ DEP # 12				,		May 20,		Route 2, Box 68
Hauler #2) Newark Carting, Inc Newark, NJ 04509, NJ DEP					19551			Bridgeport, WVA 304-842-2784
Completed by (Print or Type) Title					Signature		Date	
Marin Graure SENIOR PROJECT								13, 2013
			Marin Grau	7-E				

State of New Jersey - Notification of Asbestos Abatement

(Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

	APPRO	OMED	-	
No Dept	l Health	& Senio	r Ser	vices
379/2	(signa	lure)	AX	
Dater	Merra	_ Time:	89	Page 1
		J. 1.	,	

Date of Notification (1)					The state of the s	Carrier Striker - Archite	(signature)
May 13, 2013				Name of Building C	wner/Operator	(2)	Date: Tim
Agencies Notified		Notification	on Type	BES, Inc.			Date: 115 32 13411
EPA (1)	.555.005.00		itial Notification	Street Address	٠,٠,٠		٠.
DCA			rgency (Including	64 East Midlan City, State, Zip Cod	u Avenue	(4)	17.
X DOL	na na mangalaga	licht	ication)				
X DEP		□ Cano		Paramus, Nev	V Jersey 07	652	- 1 had side
X DOH		- Cario	eneg	Name of Contact		Tel	ephone Number
			540V ==	Mark Wagener			
Name of Facility Where Abat	tement is Tel	king Piace (3	PACILITY	INFORMATION			
Berkeley College- Bi	ldgs 4 &	5		Type of Facility (4) School (K-12)			
Street Address				School (K-12)	eng magag		
44 Rifle Camp Road				Subchaptor 8 (of	nor enan K-12)		
				Other (i.e. private Sq. Feet: Unknow	a commercial b	ulldings, h	nomes, elc.)
City (5)	County (6)		County Codo (7)	Sq. Tock Official	WI 3 # 01 F	oors:	Bldg. Age: 100 years
Woodland Park	Passaid	C	(State Use Only)	Current Use (prior if	beina demolish	odl.	
				-	comy admonstr	eu).	
Name of Monitoring Firm Hire	d by Bldg. C	Wner (B)	ASCM No.	Name of Contractor (9	1		
EnviroVision Cons	ultants i	nc.	00079	GREENWOOD A	BATEMENT	CONSI	II TAMES INC
Street Address				and the same of th		201101	CIANIS, INC.
20-21 Wagaraw Road	Blda#	346		Street Address			
	4, DIUY #	JAM		200 MAIN 077			\$
City, State, Zip Code				268 MAIN STREE	1		
Fairlawn, NJ 07410				City State, ZioCode Butler, NJ 07405			*
Project Manager for Monitoring	g Elm	Telephone I	Number	Telephone Number		11:	
red Larson		973-636	-9145			Licen	so Number
cheduled Start Date (10)				973-492-0477		0084	10
May 16, 2013		Scheduled (ompletion Date (11)	Name of OSHA Monito	<u>r</u>	1 0000	
H 6761		May 20,					84
Occupancy Status During At	patement /C	hack only a	201	EMSL Inc.			
Facility Closed/Vacate	d During Er	Illra Dariad	of Abotement	Street Address	(0)-20/12/12/22		
Aparement Perronned	Outside of	Normal Each	ire Atamoniciii	ADEC CANAL D			
	Carolan Al	LACTURE L'OF	IIIV MOURS -	I TUDO STEIRON KAS	t CN		
Deactibe			illy Hours -	1056 Stelton Roa	10		
Describe Other - Describe: We			illy Hours -	City State, Zip Code			
Deactibe			illy Hours -	Cly Stele, Zip Code Piscataway, NJ			
Other - Describe: We	eekend V		illy Hours -	City State, Zip Code			
Other - Describe: We	eekend V		illy Hours -	City State, Zip Code			
Other - Describe: We	spely)			City Stele, Zip Code Piscataway, NJ	08854	inment v	vith Negative Pressure
Other - Describe: We ource of Work (Check all that ≥ 3 sf or ≥ 3 If	eekend W		Renovatio	City Stele, Zip Code Piscataway, NJ	08854 Full Conta	iinment v	vith Negative Pressure
Other - Describe: We	eekend W			City Stele, Zip Code Piscataway, NJ	98854 Full Conte	osure wit Procedu	th negative alr re
Other - Describe: We ource of Work (Check all that ≥ 3 sf or ≥ 3 if □≥ 160 sf or ≥ 26	eekend Vi		Renovatio	City Stele, Zip Code Piscataway, NJ	Full Conte Mini-Enci Glovebag Non-Exer	Procedu pled (*)	th negative alr re
Other - Describe: We ource of Work (Check all that ≥ 3 of or ≥ 3 if □≥ 160 of or ≥ 26	apply)	Vork	Renovation Demoiltion	City Stele, Zip Code Piscataway, NJ	Full Conte Mini-End Glovebag Non-Exer Wrap & C	osure wit Procedu pled (*) i ut	th negative air re and Non-Friable Procedure
Other - Describe: We ource of Work (Check all that ≥ 3 of or ≥ 3 if □≥ 160 of or ≥ 26	apply) Solely is Local	Vork	Renovation Demolition / Used Description of Asteroidal (ACM) (i.e. there	Piscataway, NJ Piscataway, NJ thestos Containing Material	Full Conte Mini-Encl Glovebag Non-Exem Wrap & C	osure wit Procedu pled (*) i ut	th negative alr re
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Other - Describe: We ource of Work (Check all that ≥ 3 sf or ≥ 3 if □≥ 160 sf or ≥ 26 Destion of Asbestos-Conteining sterial (ACM) in Facility (13) afoteria Id Security Rm& loset Dommunity Room me of Reg. Waste Hauler the Hauler Below # 1 & 2 Builor #1) Greenwood NJ DEP # 12	apply) Solety Steff YES	Mork Itlen Normally by Maint./Cur 12) NO IJDEP Waste see Below ent Const	Renovation Demolition / Used Description of Asteroidal (ACM) (i.e. there is the interpretation of A	Piscataway, NJ thestos Containing Material and systems insulation, auricell.) Cubic Yards of Waste: r, NJ 07405	Full Conte Mini-Encl Glovebag Non-Exem Wrap & C Spec or LF) 1,356 500 880	osure with Procedu pled (*) is ut not life SF (*) Sf (*) Sf (*) Sf (*) Sf (*) Sf (*) Meadule	th negative air re Abatement Type Remove Repair Encare Enclose Remove Remove Repair Encare Enclose Remove Remove Repair Encare Enclose Remove Remov
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Date of Notification (1) 5/14/2013					of Building O ERT BAUN	wner/Operato	or (2)	2	9/0,	ł n					C
Agencies Notified	Type Notification	l		Street A	Address				· I J F	M7.20	7 4	1). ,	140	
EPA DEP DOL	Initial Amended Amendmen	+ #		City, St	ate, Zip Cod		n	*1	1 1 1 2 1				•	<u>[</u>]	-
□ DOH	Emergency justification	(including		Name o	of Contact				Te	lephone	Numb	er			
DCA	Cancellation	n			RT BAUN				_			_			
Name of Facility Where RESIDENCE	Abatement is Takir	ng Place (3)	FAC	ILITY INFO	RMATION	Туре	e of Facility (4						-	
Street Address 118 COLUMBIA RO	DAD	18		-			×	Subchapter 8 Other (i.e. pr etc.)	B (Oth			buil	dings	, hom	nes,
City (5) MORRISTOWN			20000000			***************************************	Squa	are Feet	T# c	of Floors		E	Bldg. A	Age	
County (6) MORRIS					Code (7) USE ONLY)		Curr	ent Use (Prior	r if be	ing dem	olished	1)			
Name of Monitoring Firm N/A	Hired by Building	Owner (8)		ASC	M No.			otement Cont			TING				
Street Address							t Addre	ess HERFORD	BL'	VD.					
City, State, Zip Code		123000				10 months		Zip Code	4						
Project Manager for Mor	itoring Firm		Telepho	ne No.	Telep	hone N	lo.		Licens 0049						
Start Date (10) 5/24/2013		Schedule 5/29/20		npletion	Date (11)			HA Monitor S (9) ABOV	/E						
Occupancy Status Durin	g Abatement (Che	ck Only On	e)				t Addre				- 023				
Facility Closed/Vac Abatement Perform Other – Describe:						City, S	State, Z	Zip Code							-11-
Scope of Work (Check A	II That Apply)														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	enova emolit			2	Mir K Glo	II Containmen ni-Enclosure ovebag Proce on-Exempted (dure						
		le	Locati	on				in-Exempled () an	d Non-i	Tiable I	-		emen	t
Location	of	N	ormal	ly		Description	n of				_		Ту	ре	
Asbestos-Containing <u>TO BE AB</u> , In Facil (13)	ATED `	Mair	d Sole ntenar odial S (12)	nce/	(i.e. th	Containing Nermal system surfacing, VA ther miscellar	Materia is insula AT, or	ation,	(8	mount Specify or LF)		Removal	Repair	Encapsulate	Enclosure
CRAWLSI	PACE	res	X	IN/A		TILE ON	LY		50	00 SF	2				
BASEME			X		PI	PE INSULA		١	-	30 LF	2				
									_		+	-			
Name of Registered Was	te Hauler		11.15.40.0	JDEP W	2011	Cubic Yards		Name of Re	egiste	red Lan	dfill				
TWO BROTHERS O	CONTRACTING	}		auler ID 8743	No.	of Waste 5		WASTE	1AM	NAGEN	MENT	G	R.C	.W.S	3.
City, State CLIFTON, NJ						Disposal Date /29/2018		City, State MORRIS	VILI	LE, PA					
Completed by VIVECA RAMOS		Title SECF	RETA	λRY	A	Signature	vec	Nar	rr		Date 5/14/	20	13		

				I TO NUME O			2012							
	Check#24	16		of Building (ch of Our				ar 2	7	F	PAG	E#1		
Agencies Notified Type Notifica	tion			Address Prospect S	Street		.0		47	7.				
EPA Initial Amende	d			tate, Zip Co			<u> </u>	-			0			
DOL Amenda	nent #			orange,		079	1				•			
DOH Emerger	ncy (includin on)	g		of Contact				Te	lephon	e Nur	nber			
DCA Cancella	tion			n Reyes										
Name of Facility Where Abatement is Ta	aking Place	(3)	FAC	ILITY INFO	ORMATIC	NC	Type of Facility	(4)						
Our Lady of Sorrows- Rectory	aning i lace	(0)						8 6						
Street Address							School (K- Subchapte	r 8 (Oth	ner than	K-12)			
217 Prospect Street							Other (i.e. etc.)	private	& com	mercia	al bui	ldings	, hon	nes,
City (5) South Orange, NJ 07079							Square Feet 4,000	# 0	f Floor	S		Bldg. 60+	Age	
County (6)	1201000			Code (7)			Current Use (Pr	1 -	ing der	nolish				
ESSEX			(STATE	USE ONLY)		-	Office-Recto	ry			,			
Name of Monitoring Firm Hired by Buildi N/A	ng Owner (8)	ASC	M No.			of Abatement Co Prvices Corpo							
Street Address		700				Street A 426- 6	oddress 39th Street	*******						
City, State, Zip Code			60.000				ate, Zip Code							
Designat Managar for Manifesian Circu		— т					nberg, NJ 07	093						
Project Manager for Monitoring Firm			Telepho	ne No.		Telepho 201-2	ne No. 95-1700		Licen 0107					
Start Date (10) 5/29/13	5/30/2		npletion	Date (11)	10.4		f OSHA Monitor as above							
Occupancy Status During Abatement (C	heck Only O	ne)	-			Street A	ddress					-		
Facility Closed/Vacated During Enti Abatement Performed Outside of N Other – Describe:	re Period of ormal Facilit	Abaten y Hours	nent			City, Sta	ite, Zip Code		-					
Scope of Work (Check All That Apply)							*****							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	announce .	Renova Demolit					Full Containmon Mini-Enclosure Glovebag Prod Non-Exempted	e cedure						
	Is	Locati	on					1.7		nubic	110	Abate		t
Location of		Normal ed Sole				ription o						Ту	ре	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma Cus	intenar todial S (12)	nce/ Staff?	(i.e. th	hermal sy	ystems in ng, VAT,		(S	mount pecify or LF)		Removal	Repair	Encapsulate	Enclosure
Law-da D	Yes	No	N/A										Ф	
Laundry Room		X				e ins			LF			x		
Bathroom		X				e ins			LF			x		
Conference Room		х			<u>.</u>	e ins			5 LF			х		
Food Pantry		X				e ins) LF			х		
Name of Registered Waste Hauler FREEHOLD CARTING		Ha	JDEP Wa auler ID 1 5939	No.	Cubic Ya of Waste tbd	111000000000000000000000000000000000000	Name of F Waste N							
City, State PO Box 5010					Disposal tbd	Date	City, State		dfill					
Completed by Gina Salvador	Man	ager			nature	Bluas	1		Date 5/13				-	

Agencies Notified Type Notification Initial Initial Americand # Americand # Initial Americand # Americand # Americand # Initial Americand # Americand # Americand # Initial Americand # Americand # Initial Americand # Americand # Initial Initial Americand # Initial	Date of Notification (1) 5/13/2013	Che	eck#2416	Name of Building Owner/Operator (2) 416 Church of Our Lady of Sorrows PAGE#2												
DCP Amended Amended Amended South Orange, NJ 07079 South Orange, NJ 07079 South Orange, NJ 07079 Super Facility Where Abatement is Taking Place (3) Super Facility Where Abatement is Taking Place (3) Super Facility Where Abatement is Taking Place (3) Super Facility (4) Subchappine (3) (Other than K-12) Subchappine (3) (Other than K-12) Subchappine (4) (Other th				190			Street						· _			
DOH	DEP X DOL	Amended	#					7079		17			**C			
Same of Facility Where Abatement is Taking Pface (3)											Tel	ephone Nu	mber			
Name of Facility (Where Abatement is Taking Place (3)	DCA DCA	Cancellation	1					O.V.								
Street Address City, State, Zip Code City, State City, Stat	Name of Facility Where A	Abatement is Takir	g Place (3)		FACIL	ITY INFO	RMATI	ON	Type	of Facility (4	1)					
Street Address 217 Prospect Street City (5) South Orange, NJ 07079 County (6) South Orange, NJ 07079 County (7) SSENCE Address City (5) South Orange, NJ 07079 County Code (7) SSENCE Address City (7) Street Address City State, Zip Code City, State City			· · · · · · · · · · · · · · · · · · ·							,	•					
Square Feet 4,000 2 60+		t					***		X S	Subchapter Other (i.e. p	8 (Oth			dings	home	es,
SSEX STATE USE ONLY Office-Rectory		7079							Squar	e Feet		Floors	100		Age	
Street Address Street Address Street Address Street Address Street Address City, State, Zip Code City, State, Zip Code City, State, Zip Code City, State, Zip Code Star Date (10) 5/29/13 Star Date (10) 5/29/13 Star Date (10) 5/29/13 Star Date (10) 5/29/13 Star Date (10) 5/30/2013 Star Date (11) 5/29/13 Star Date (10) 5/29/13 Star Date (11) Star Date (10) 5/29/13 Star Date (11) Star Date (11) Star Date (11) Star Date (10) 5/29/13 Star Date (11) Star Date (11) Star Date (10) 5/29/13 Star Date (11) Star Date (11) Star Date (11) Star Date (10) Star Date (11) Star D		-11-08-0	-									ng demolis	hed)			
Street Address Street Address A26-69th Street	[- 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	Hired by Building	Owner (8)	<u> </u>	ASCM	No.										
Project Manager for Monitoring Firm											V 3					
Project Manager for Monitoring Firm	City, State, Zip Code	1 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 -								93						
Start Date (10) 5/29/13 Scheduled Completion Date (11) 5/29/13 Scheduled Completion Date (11) 5/30/2013 Same as above Street Address Street Address Street Address Scope of Work (Check All That Apply) Sas of or 23 If 2160 of or 2260 If Scope of Work (Check All That Apply) Sas of or 24 If 2160 of or 2460 If Scope of Work (Check All That Apply) Sas of or 25 If 2160 of or 2460 If Scope of Work (Check All That Apply) Sas of or 25 If 2160 of or 2460 If Scope of Work (Check All That Apply) Sas of or 25 If 2160 of or 2460 If Scope of Work (Check All That Apply) Sas of or 25 If 2160 of or 2460 If Scope of Work (Check All That Apply) Sas of or 25 If 2160 of or 2460 If Scope of Work (Check All That Apply) Sas of or 25 If 2160 of or 2460 If Same as above Street Address Street Address Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure No	Project Manager for Mon	itoring Firm		Telephor	ne No.		Teleph	none No).			No.				
Cocupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Perioded Outside of Normal Facility Hours Other – Describe: Scope of Work (Check All That Apply) 23 sf or ≥3 lf	Start Date (10)		Schedule	d Con	pletion E	Date (11)										
Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code				93												
Abatement Performed Outside of Normal Facility Hours Other – Describe: Scope of Work (Check All That Apply)	Occupancy Status During	g Abatement (Che	ck Only One	:)				Street	Addres	s						
≥3 sf or ≥3 if	Abatement Perform	ated During Entire ed Outside of Non	Period of Al nal Facility	oatem Hours	nent		_	City, S	tate, Zi	p Code						
Demolition Demolition Demolition Demolition Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Exempted (*) and Non-Exempted (*) and Non-Exempted (*) and Non	Scope of Work (Check A	II That Apply)								2.00.40						2412-1241
Secretarion of Asbestos-Containing Material (ACM) Secretarion of Asbestos-Containing Material (ACM) Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Boiler Room X Pipe ins 20 LF X Under Stairs X Pipe ins 3 LF X Garage X Pipe ins 20 LF X Boiler Room/Garage X Pipe ins 20 LF X Boiler Room/Garage X Pipe ins 20 LF X Boiler Room/Garage X Pipe ins 20 LF X Completed by Title Signature Abatement Type Abatement Type Abatement Type Abatement Type Abatement Type Amount (Specify SF or LF) Replace Room Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Abatement Type Amount (Specify SF or LF) Replace Room Abatement Type Abatement Type Abatement Type Abatement Type Abatement Type Amount (Specify SF or LF) Room Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Abatement Type Abate					S07.70			×	Min Glo	i-Enclosure vebag Prod	edure	•			·e	
Normally Used Solely by Maintenance / Custodial Staff? (12) Yes No N/A			le l	ocati	on				-					Abat	emen	t
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Yes No N/A Boiler Room Under Stairs Garage Romand of Registered Waste Hauler FREEHOLD CARTING 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) Pipe ins 20 LF X Pipe ins 20 LF X Boiler Room/Garage X Pipe ins 20 LF X Boiler Room/Garage X Bibows A LF /1 LF X Name of Registered Waste Hauler FREEHOLD CARTING City, State PO Box 5010 Completed by Title Signature Absestos 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) A property of the prope	Location	of .	N	ormal	ly		De	scription	of						/pe	
Boiler Room	Asbestos-Containing TO BE ABA In Facil	Material (ACM) ATED	Mair	itenar idial S	nce/		thermal surfa	systems cing, VA	s insula T, or		(5	Specify	Remova	Repair	Encapsula	Enclosur
Under Stairs x Pipe ins 3 LF x Garage x Pipe ins 20 LF x Boiler Room/Garage x Elbows 4 LF /1 LF x Name of Registered Waste Hauler FREEHOLD CARTING Name of Registered Landfill City, State PO Box 5010 Completed by Title Signature			Yes	No	N/A										le e	
Garage x Pipe ins 20 LF x Boiler Room/Garage x Elbows 4 LF /1 LF x Name of Registered Waste Hauler FREEHOLD CARTING NJDEP Waste Hauler ID No. 15939 Vaste tbd Waste Management City, State PO Box 5010 Completed by Title Signature	Boiler R	oom		x			F	Pipe ins	5					x		
Boiler Room/Garage x Elbows 4 LF /1 LF x Name of Registered Waste Hauler FREEHOLD CARTING NJDEP Waste Hauler ID No. 15939 City, State PO Box 5010 Date Ribows 4 LF /1 LF x NJDEP Waste Hauler ID No. of Waste tbd Disposal Date tbd City, State Tullytown Landfill Date	Under Stairs x						F	Pipe ins	\$				1	х		
Name of Registered Waste Hauler FREEHOLD CARTING NJDEP Waste Hauler ID No. 15939 City, State PO Box 5010 Name of Registered Landfill Waste Management City, State Tullytown Landfill Signature	Garag	X			F	Pipe ins	3					x				
FREEHOLD CARTING Hauler ID No. 15939 of Waste tbd Waste Management City, State PO Box 5010 Completed by Title Signature	Boiler Room	/Garage		х			E	Elbows								
FREEHOLD CARTING 15939 tbd Waste Management City, State PO Box 5010 Completed by Title Signature	Name of Registered Was	ste Hauler								CONTRACT EN	30000		1			
PO Box 5010 tbd Tullytown Landfill Completed by Title Signature Date	FREEHOLD CARTIN		140.		310				gement							
Completed by				240				sal Date				ndfill			- 4 0.2 4000	
				Mar	nager		S	Signature		was-	_			3		

Date of Notification (1)			Name	of Buildin	a Owne	er/Operator (2)							
05/08/13 Check #2624			PSE		y Owne	si/Operator (2)	1.5	School of the second	М	ΔΥ	2 (20	113
Agencies Notified Type Notification)			t Address	Door				141	-			
EPA Initial DEP Amended				Hadley		l			ASEE	270	20	UNIT	TATE
X DOL Amendmen						ew Jersey	07080		NOU-	LIC	ENS	M4G	
DOH Justification)	g	Name	of Contac	t			Telepho	one Nu	mbe			
				McGuire		TION		<u>l</u>					
Name of Facility Where Abatement is Takir Residence	ng Place ((3)		OICH I III	OKIMA		pe of Facilit	y (4)			-		
Street Address							School (K	(-12)					
84 Runyon Road						×	Other (i.e	er 8 (Other th . private & cor	an K-1. nmerci	2) al bu	ilding	s, ho	mes.
City (5)						Sq	etc.) uare Feet	# of Floo			Bldg.		
Clifton, New Jersey 07013 County (6)						20	000	2			55+	, igo	
Passaic			(STATE	Code (7)	n	—— Cu	rrent Use (P esidence	rior if being de	emolish	ned)			
Name of Monitoring Firm Hired by Building N/A	Owner (8)	ASC	M No.	S-21-11	Name of A	batement Co	ontractor (9)		_			
Street Address						Lilich Co	rporation						
						Street Add 606 McF	ress Bride Aver	niie				7,533	
City, State, Zip Code				-		City, State,	Zip Code						
Project Manager for Monitoring Firm			Talast		\$			ew Jersey	0742	4			
,			Telepho	one No.		Telephone 973-225		. Lice	nse No).	100000		
Start Date (10)				Date (11)		Name of O	SHA Monitor			-	-		
05/20/13 Occupancy Status During Abatement (Check	05/2	7/1	3					al Laborato	ories I	nc.	=== = 1300000		
Facility Closed/Vacated During Entire P	eriod of A	hater	ment			Street Addr 2333 Ro	ess ute 22 We	st					
Abatement Performed Outside of Norm Other – Describe:	al Facility	Hour	s			City, State,	Zip Code			_			
Scope of Work (Check All That Apply)						Union, N	ew Jersey	07083					
23 sf or ≥3 lf	R	enova	ation			Пь	ull Contolor						
≥160 sf or ≥260 lf	Comments	emoli	8 7 1 T 1 T 1 T 1 T 1 T 1 T 1 T 1 T 1 T 1			M	ini-Enclosur	ent with Nega	itive Pr	essu	re		
						× N	lovebag Pro on-Exempte	cedure d (*) and Non-	Friable	Pro	cedur	е	
Location of		Locati ormal									Abate		t
Asbestos-Containing Material (ACM)	Used	Sole otena	ly by	Asbest	os Con	scription of taining Materia	al (ACM)	Amount		_	1,		
TO BE ABATED In Facility		dial 8		(i.e.	thermal	systems insu cing, VAT, or	lation,	(Specify SF or LF		Ren	Re	Enca	End
(13)	-		Т		other r	niscellaneous)	01 01 21	'	Removal	Repair	Encapsulate	Endosure
House Exterior	Yes	No	N/A									te	æ
Kitchen&BasemntStaircaseLanding			X	Drou		site Siding		1250 SF		K			
Basement							0.0000000000000000000000000000000000000	150 SF		ζ			
Basement			X			ile & Masti		660 SF		۲			
Name of Registered Waste Hauler		N.	JDEP W		Cubic	Exhaust Pi		1 LF Registered La		2		l	
ilich Corporation		H	auler ID I 1724	No.	of Was			V.S Landfil					
City, State					Dispos	al Date	City, State						
Voodland Park, New Jersey Completed by	Title				05/28	/13 gnature		lle, Pennsy	Ivania	١			
atiana Kalenikova							/	01	Date 05/0	Q/1°	2		
						alen	ron /Ca	letter	05/0	0/1)		

Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Use	S Locat Norma ed Sole eintena todial ((12)	lly ely by nce/ Staff?	Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)		Amount Specify or U	E	Bemova	a Repair	e dincapsylate	Enclosu 2013	E	
	Yes	No	N/A	other miscenarieous)		1111		MAY	1.4	ate	2013		L
Basement	· [] ·		X)	Gray Exterior Window Glaze		72 SF		X					
Garage		<u> </u>	X)	Gray Interior WIndow Glaze		50 LF	ASE	-			VITE I	DL&	
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Date of Notification (1)					3 8:60 and 12;		Variation V	MAY 2	. 0	2013	
05/08/13 Check #2624			PSE	E&G	Owner/Operat	or (2)				2010	+
Agencies Notified Type Notificati	on			et Address 0 Hadley	Road		ASBE	ESTOS LIÇEN	CON	TROL	<u>a</u>
DEP Amended Amendm Emergen	ent #_ cy (inclu	ding	Sou	State, Zip C th Plainfie	old, New Jers	sey 07080					
DOA Justification	on) Ion			of Contact McGuire			Tolon	hone Nu	mber		
Name of Facility Where Abatement is Tal	des Di-	- /2:			ORMATION			-11-			
Residence	ung Plac	ce (3)				Type of Fac	ility (4)				
Street Address 84 Runyon Road						Subcha	(K-12)	han K-1	2)		
City (5) Clifton, New Jersey 07013						Square Feet	i.e. private & co			dings, h	
County (6) Passaic			County	y Code (7)		2000	2		5	5+	
Name of Monitoring Firm Hired by Building		13	STATE	USE ONLY)		Residence	(Prior if being o	demolish	ed)		
N/A	Owner	(8)	ASC	M No.	Name	of Abatement	Contractor (9)				
Street Address						Address	n				
City, State, Zip Code						McBride Ave	enue			10.59	
- 7) Calo, Lip Godo					City, S	tate, Zip Code					
Project Manager for Monitoring Firm			Telepho	one No	VVOO	dland Park,	New Jersey	07424			
Start Date (10)					973-2	one No. 225-8400		ense No 104			
Start Date (10)	Sched	uled C	ompletion	Date (11)	Name	of OSHA Monit	or				
Occupancy Status During Abatement (Chec	k Only (One)			J&S	Environme	ntal Laborat	ories Ir	ic.		
Facility Closed/Vacated During Entire Abatement Performed Outside of Nora	Dorland a		ment		2333	Address Route 22 W	est est				
Other - Describe:					- Union	ate, Zip Code , New Jerse	07000				
Scope of Work (Check All That Apply)						, 140W Jeise	ey 07083				
≥3 sf or ≥3 if ≥ 2160 sf or ≥260 if	X	Renov Demol			×	Glovebag Pr	ocedure				
		s Local				Non-Exempt	ed (*) and Non-	-Friable		dure atemer	
Location of Asbestos-Containing Material (ACM)		Norma ed Sole			Description o	f			7,0	Туре	
TO BE ABATED In Facility (13)	Cus	aintena stodial ((12)	nce/ Staff?	(I.e. the	Containing Mai rmal systems in surfacing, VAT, her miscellaned	nsulation, or	Amount (Specify SF or LF		Removal	Encapsulate	Endosure
House Exterior	Yes	No	N/A	-				1	3 =	late	ure
tchen&BasemntStaircaseLanding			X		ransite Sidir	2000	1250 SF	= x	+-	-	\vdash
Basement		X		Inoleum&A		150 SF		+	-	-	
Basement			X		or Tile & Ma		660 SF	x	+	+	-
me of Registered Waste Hauler		15:	X		site Exhaust	Pipe	1 LF	Х	1		
ch Corporation	JDEP Was Juler ID No 724	o. of	iblc Yards Waste		Registered Lar W.S Landfill						
y, State odland Park, New Jersey	4			15 Dis	sposal Date /28/13	City, Stat	9				
npleted by Jana Kalenikova	ent	105.	Signature		ille, Pennsyl	Vania Date					
	11001	10310	Ont		/ale	marker	Pele.	05/08	13		

SB-41 (R-06-08)

Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Üs	ustodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Ŋ	AmourMAY (Specify SF or LF)	Removal	atem Repair	1 Bcapsu	Enciosur
Basement	Yes	-	N/A			ASBESTO LIC	S C ENS			L &
Garage	<u> </u>		(X)	Gray Exterior Window Glaze Gray Interior Window Glaze		72 SF	N			
				oldy Interior Wildow Glaze		50 LF	XI.	<u>.</u> D.		
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321 State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) 5/16/13 Tony Zaffarese (private Home) Agencies Notified Type Notification Street Address MAY 20 2013 55 Ralph **EPA** Initial City, State, Zip Code DEP Amended × DOL Amendment # Manahawkin NJ 08050 ASBESTOS CONTROL & Emergency (including Name of Contact 4 Gelestotte Numbe × DOH justification) DCA Cancellation Tony **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Tony Zaffarese (private Home) School (K-12) Street Address Subchapter 8 (Other than K-12) × 55 Ralph etc.) City (5) Square Feet # of Floors Manahawkin NJ 08050 1000+ 35 +County (6) County Code (7) Current Use (Prior if being demolished) (STATE USE ONLY) Ocean Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) N/A Pernaco Inc. Street Address Street Address PO Box 329

Other (i.e. private & commercial buildings, homes, Bldg. Age City, State, Zip Code City, State, Zip Code West Berlin NJ 08091 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 856-753-9800 00727 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 5/27/13 Same Occupancy Status During Abatement (Check Only One) Street Address Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf Renovation Full Containment with Negative Pressure ≥160 sf or ≥260 lf Demolition Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Type Normally Location of Description of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Encapsulate Maintenance/ TO BE ABATED Enclosure (i.e. thermal systems insulation, (Specify Removal Custodial Staff? Repair In Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes N/A No Exterior Siding **Exterior Siding** 1000 Sf X Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste **United Containers** G.R.O.W.S. 22459 City, State Disposal Date City, State Elm NJ 6/3/13 Morrisville PA 19067 Completed by Title

Anthony T Perna

President

Signature

Date 5/16/13 Ch 3234

Date of Notification (1) 5/16/13						ner/Operator a Reilly (I			C	5	\mathbb{V}				
Agencies Notified	Type Notification Initial	***************************************	1 1	Street Ad 1505 Ba	dress arnegat A	venue			MAY	2.0	2013				
EPA DEP DOL	Amended Amendment				e, Zip Code ottom NJ (8008		IL						7	
DOH DCA	justification) Cancellation	100		Name of 0	Contact			ASE	Fair	A SOUTH	TERS	&			
Name of Facility Where A	batement is Takin	g Place (3)		FACIL	ITY INFORM	MATION	Туре	e of Facility (4	1)	A. A					
Tom & AnnaMaria F	Reilly (Private I	Home)					H	School (K-12 Subchapter		er than K-	12)				
1505 Barnegat Aver	nue						×	Other (i.e. pretc.)	rivate 8	commer	cial bui				s,
City (5) Ship Bottom NJ 080	800						100		1	Floors		35+	g. Ag -	je	
County (6) Ocean				County C	ode (7) SE ONLY)	_	Curr	ent Use (Prio me	r if bei	ng demoli	shed)				
Name of Monitoring Firm N/A	Hired by Building	Owner (8)		ASCM	No.		of Ab	atement Con Inc.	tractor	(9)			•		
Street Address							t Addre								
City, State, Zip Code								Zip Code Iin NJ 080	91				-		
Project Manager for Mon	itoring Firm		T	Telephon	e No.	Telep	hone I	No.		License 00727	No.				
Start Date (10)		Schedule	d Com	pletion D	Date (11)			9800 SHA Monitor							
5/29/13		6/5/13		500 Sec. 10 Se		San	ne t Addre	000							
Occupancy Status During X Facility Closed/Vaca				ent		Stree	t Addit	ess							
Abatement Perform Other – Describe:	ed Outside of Norr	nal Facility	Hours			City,	State,	Zip Code	***						+ 5-3
Scope of Work (Check A	ll That Apply)														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	enova emoliti				M G	ull Containme lini-Enclosure Blovebag Prod Ion-Exempted	e cedure				dure		
		Is	Locati	on			14	IOII-EXEMPLE	1 () un	u Holl i li	ubic i i		bate	ment	
Location Asbestos-Containing TO BE AB. In Facil (13)	Material (ACM) ATED	lormall d Sole ntenar odial S (12)	ly ly by nce/	(i.e. the	Descriptions Containing ermal system surfacing, V other miscella	Materi ns insu AT, or	ulation,	(mount Specify F or LF)	Kemovai		Ty _I Repair	Encapsulate	Endosure	
Exterior S	Siding	Yes		X		Exterior S	iding		13	300 SF	x	1			
												1			
Name of Registered Was	ste Hauler		1,550	IJDEP W		Cubic Yards of Waste				ered Land	Ifill				
United Containers			2000	2459	2	2		G.R.O.							
City, State Elm NJ						Disposal Dat 6/5/13	e	City, Stat Morrisv		A 19067	7		005-550		
Completed by Anthony T Perna	20.4100		Signatu	re			1	Date 5/16/	13						

Date of Notification (1) 05/14/13 Ck: 2632 \$200	PS	Name of Building Owner/Operator (2) PSE&G Street Address								5	Ш		
gencies Notified Type Notification		67.50		ess dley Roa	ad			YAM	20	2013	}		
EPA Initial Amended Amendment #1		Cit	ty, State, outh Pl	Zip Code ainfield,	New Jerse	ey 07080	0						
Emergency (incl	uding	11 11 5 3 5 5 5 5	Name of Contact Telephone Number CONTR										
DOH Justification Cancellation	im McC		MATION		E,					_			
Name of Facility Where Abatement is Taking Pl	ace (3)		FACILIT	TY INFOR	MATION	Type of	Facility (4)						
Residence Street Address						Su	hool (K-12) bchapter 8	(Other than K-12) vate & commercial	buildir	nas, h	omes		
84 Runyon Road				etc	;.)								
City (5) Clifton, New Jersey 07013	Square Feet 2000					# of Floors 2	Bldg. Age 55+						
County (6) Passaic	ounty Co	de (7) E ONLY)		Resid	ence	if being demolished	.u)						
Name of Monitoring Firm Hired by Building Own AECOM	ASCM N	SCM No. Name of Abatement Contractor (9) Lilich Corporation											
Street Address 30 Knightsbridge Road, Suite 520			606	Street Address 606 McBride Avenue									
City, State, Zip Code Piscataway, New Jersey 08854			City, Woo	y, State, Zip Code oodland Park, New Jersey 07424									
Project Manager for Monitoring Firm Mark Connors, CMI	elephone			hone No. -225-84		License No. 01104							
Start Date (10)	oletion D	ate (11)	Nam J&S	Name of OSHA Monitor J&S Environmental Laboratories Inc.									
05/29/13 Occupancy Status During Abatement (Check Company			Stree	Street Address 2333 Route 22 West									
Facility Closed/Vacated During Entire Per Abatement Performed Outside of Normal Other – Describe:	riod of At	ateme	ent		City,	State, Zip	Kara 1999-1999						
Scope of Work (Check All That Apply)													
≥3 sf or ≥3 If ≥160 sf or ≥260 If		enovat emoliti				Mini	-Enclosure				9		
						Linear 100 miles							
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Location ormall Solel Intenar odial Solel (12)	y ly by nce/ Staff?	Asbest (i.e.	Descripti os Containing thermal syste surfacing, other miscel	Material ms insula VAT, or	(ACM) tion,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Liciosaic		
	Yes	No	N/A X		Transite	Siding		1250 SF	X				
House Exterior			X	Bros	wnLinoleur		sive	150 SF	Х				
Kitchen&BasemntStaircaseLanding			X		Floor Tile 8			660 SF	Х				
Basement	-	A SECULE	ransite Exh			1 LF	Х	1		T			
Basement		I N	JDEP W		Cubic Yard		Name of	Registered Landfi	1	-		-	
Name of Registered Waste Hauler Lilich Corporation		F	lauler ID 8724		of Waste 15			W.S Landfill					
City, State Woodland Park, New Jersey 07424					Disposal D 06/10/13		City, Star Morris	ville, Pennsylva				_	
Completed by Tatiana Kalenikova	ident		Signa	ture	. /		ate 5/14/	13					

		Locati		Description of	34	1	ateme			ט ע	
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Use Ma	d Solel intenar odial S (12)	ly by nce/ staff?	Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Removal	Repair	Encara ulate	Enclosure	0 2013	
	Yes	. No	N/A	Gray Exterior Window Glaze	72 SF	XJ	AŞI	BES	TOS	CONTROL NSING	_&
Basement	المما		XI-	The state of the s	50 LF	X			TEE	NSING	
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Agencies Notified Type Notification Agencies Notified Type Notification Name of Facility New Jersey 07080 Name of Facility New Jersey 07080 Name of Facility Where Abatement is Taking Place (3) Residence Facility Information Type of Facility (4) Street Address 84 Runyon Road Type of Facility (4) Street Address Street Address Square Feet 2000 Square Feet 2000 Current Use (Prior if being demolished) Residence Name of Monitoring Firm Hired by Building Owner (8) N/A Street Address Street Address 606 McBride Avenue City, State, Zip Code Project Manager for Monitoring Firm Telephone No. Telephone No. 973-225-8400 Street Address Incompleted Laboratories Incomplete Incomp	Date of Notification (1)		Name of Building Owner/Operator (2) PSE&G							5	G	E	1	\mathbb{V}_{1}			
PPA DEP													_		-		
South Plainfield, New Jersey 07080 Amendement Amende			4	1000 H	adley Ro	ad	i			ЦЦ		MAY	2	0 2	2013		
DOH	DEP Amended Amendment #		_	City, State South F	e, Zip Code Plainfield,		ACD	COT	200	CONT	TRO	0					
Name of Facility Where Abatement is Taking Piaco (3) Residence Street Address Residence R	Emergency (in	cluding	11 23			Tele	ephone Number LICENSING										
Scheduling Street Address ARRIVON Road City (5) County (5) County (6) Passalc Name of Monitoring Firm Hired by Building Owner (8) NiA Street Address City, Siate, Zip Code Woodland Park, New Jersey 07424 Project Manager for Monitoring Firm Telephone No. Street Address City, Siate, Zip Code Woodland Park, New Jersey 07424 Project Manager for Monitoring Firm Telephone No. Street Address City, Siate, Zip Code Woodland Park, New Jersey 07424 Project Manager for Monitoring Firm Telephone No. Street Address Size Address City, Siate, Zip Code Woodland Park, New Jersey 07424 Project Manager for Monitoring Firm Telephone No. 973-225-8400 Ot 1104 Street Address City, Siate, Zip Code Woodland Park, New Jersey 07424 Telephone No. 973-225-8400 Ot 1104 Street Address City, Siate, Zip Code Woodland Park, New Jersey 07424 Telephone No. 973-225-8400 Ot 1104 Telephone No. 973-225-8400 Ot 1104 Street Address City, Siate, Zip Code Woodland Park, New Jersey 07424 Telephone No. 973-225-8400 Ot 1104 Telephone No. 104-1104 Telephone No. 973-225-8400 Ot 1104 Telephone No. 105-27/13 Telephone No. 105-27/13 Telephone No. 106-27-27/13 Telephone No. 107-27/13 Telephone No. 107-27/13 Telephone		FACIL	ITY INFOR	MATION	T.	no of English //	1						_				
Steel Address School Steel Address Ste	Residence			E	School (K-12 Subchapter	2) 8 (Othe	r than	K-12)									
County (6)					ercial				s,								
County (6) Passale Passale Residence Range of Monitoring Firm Hired by Building Owner (8) N/A Street Address St	City (5) Clifton, New Jersey 07013			Square Feet # of													
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Project Manager for Monitoring Firm				-			Street Address										
Project Manager for Monitoring Firm	City, State, Zip Code																
Start Date (10) 05 / 20 / 13 05 / 20 / 13 Occupancy Status During Abatement (Check Only One) Street Address 2333 Route 22 West City, State, Zip Code Union, New Jersey 07083 Facility Closed/Nacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other − Describe: Scope of Work (Check All That Apply) ≥ 3s for ≥3 if ≥ 2s for ≥3 if ≥ 2s for ≥260 if Renovation Demolition Full Containment with Negative Pressure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-																	
O5 / 20 / 13 Occupancy Status Durling Abatement (Check Only One) Facility Closed/Vacated Durling Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other – Describe: Scope of Work (Check All That Apply) ≥ 3 sf or ≥ 3 if ≥ 160 sf or ≥ 260 if Renovation Demolition Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Normally Used Solely by Maintenance/Custodial Staff? (12) Yes No N/A House Exterior Kitchen&Basemnt StaircaseLanding Basement Normally Warnelly (12) Yes No N/A Find Containing Material (ACM) Abatement Type Asbestos Containing Material (ACM) Amount (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Kitchen&BasemntStaircaseLanding X Transite Siding Basement X Floor Tile & Mastic Cubic Yards of Wastle Hauler ID No. 18724 City, State (Obic State Woodland Park, New Jersey)	Project Manager for Monitoring Firm	973-225-8400															
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Woodland Park, New Jersey O5/28/13 Morrisville, Pennsylvania				0/24		37.55	te	City, Sta	te								
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Garage			<u>(X)</u>	Gray Interior WIndow Glaze	50		X-1			-	
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