State of New Jersey

1963905696

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:20/N.J.A.C. 7:26-2.12)

Date of No 05/16/201	otification (1):				ilding O	wner/Operator (2)				100	Ē (e E		E.	m	1
Agencies Notified	Type Notificat	tion	1174140000000	t Addre						3						The state of the s
/	X Initial		the same of the sa	lar Stre						111	1.7	AU n	000	1.		ļ
J.DEP	☐ Amended Amendment#:			State, z	Zip Code	2:			ļIJ	u	M.	AT Z	20	1		
DOL	□ Emergency			of Con					Telepl	hone	NI				1	1
	(including				Olagade	eyo			10,00			Litos co	NTROL	8	3	-
DOH DCA	justification Cancellation		. ~				13		<u></u>	**************************************		LICENS		-	Mark Market Street	J
			15			FACILITY INFO	ORMA	TION				(4) C.D.		1175	(%)	
	acility Where		ment is	Taking	Place (3	3):	Тур	e of Facility ((4):							
	lementary Scho	ool					_ D80	chool (K-12)				60				
Street Add							□ Su	bchapter 8 (0	Other tha	an K-1	2)					
150 Newto	on Street	0	. (6)		T-0		_ Ot	ther (i.e., priv	rate & co	ommer	rcial bu	uildings, h	omes, e	tc.)		
City/ (5): Newark	1	Essex	ty (6):		07106	ty Code (7):	Sau	are Feet:				# of Floo	rs:			
INCWAIK		Essex			07100							011100				
	1							g. Age rent Use : S	lahaal					•		
Name of N	Monitoring Fire	n Hire	d by Bi	ilding	Owner:	ASCM No.:		ne of Abate		ontra	ctor (S)/•				-
Whiteman			u 0, Di	mame	Owner.	MOCIVI No					7	·)·				
				virocare E		rises,	, Inc									
Street Add			Stre	et Address:								12				
110 11ces	lane, Unite		358	8 Broady	way											
City, State	, Zip Code:						City	, State, Zip	Code:							
East Brur	swick, NJ 08	2816					Nes	wark, NJ (07104							
	mager for Mor		g Firm:		. ,	Telephone No.:		phone No.:		T	Licer	nse No.:				
Kevin Lo			6			732-390-5858				1						
Start Date		- 17	Cahadul	ad Can	latian	Data (11):		3) 485-4000			0101	7				
05/18/2012	2	(05/24/2	2012		Date (11):		ne of OSHA eriSci	A Monit	or:						
	Status During A				. 6			et Address:								
☐ Facility C	losed/vacated D	uring E	Entire Per	riod of A	batemen	t		East 30th S					40			
☐ Abatemer Describe:	t Performed Ou	tside of	f Normal	Facility	Hours	** s		, State, Zip								
Describe.							New	v York, Nev	w York	, 100	16					8
□ Other						7/			85							
Describe:	-1. (01.). !! !!							-								
10/20/01/70/01/20/20/20/20/20/20/20/20/20/20/20/20/20/	ork (Check all th	nat appi	ly):						ΠFu	ıll Co	ntainn	nent with	Negat	ive Pr	eccure	
$\square > 3$ sf or	$\geq 3 \text{ lf}$				Reno	vation			M	ini-Ei	nclosu	ire	riega		cosurc	
<15≥ 160 sf	Of ≥ 260 II				□ Demo	olition			"VYGI	oveba n-Exe	ag Pro	cedure (*) and I	Non-Er	iable P	rocedi	ire
	·		Is	Locati	ion	26		<u></u>			- Proc	()	1		ement	
	ocation of			Vormal			escripti		(40)					Ty	/pe	
Asbestos-C	Containing Ma	terial		d Solel		Asbestos Con (i.e., therma	taining al syste	Material ((ACM))					T	
TO I	(ACM)			intena		surfa	cing,	VAT, or	tion,		Ar	nount	Re	7	nc	E
	BE ABATED			Staff?	1000			llaneous)				pecify	mc.	Repair	ap	clo
11	N Facility (13)			(12)								or LF)	Removal	H	Encapsulat	Enclosure
Yes No N/A															at	(0
Bsmt boys bathroom X						plaster					16 8	SF	X			
	s bathroom			Х,	1,	Pipe insulation		West of the World			6LF	*.	X			
Name of Registered Waste Hauler: NJDEP Waste Newark Carting 4506						P Waste Hauler ID	No.:	Cubic Ya				e of Regi- town Re.			l:	
City, State: Newark NJ			77	Dispo	sal Date	»:		City, Stat								
Completed					Title:		Signa	Tullytow	n, PA	-	- T	Date:				
Sam Illoun						t Manager	Sign of	P.	0 0,	_ (05/16/20	12			
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 4 12 Rutgers University Agencies Notified Type Notification Street Address Ø EPA 0 8 6 4 Initial #27 Road 1 Bldg 4086 ☑ DOLWD 3412 ☐ Amended DHSS 0 888 City, State, Zip Code Amendment # ☐ DCA ☐ Emergency (including Piscataway, NJ 08854 (NJAC 5:23-8) justification) Name of Contact Telephone Number □ Cancellation Mike Smith **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Miller House School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e., private and commercial buildings, 857 Hoes Lane homes, etc.) City (5) Square Feet # of Floors Piscataway Bldg. Age 5000 3 County (6) 80+ County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Middlesex Residential Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) ATC 86000 BRISTOL ENVIRONMENTAL, INC. Street Address Street Address 3 Terri Lane 1123 BEAVER STREET City, State, Zip Code City, State, Zip Code Burlington Township, NJ 08016 BRISTOL, PA 19007 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Brian Kearney 609-386-8800 215-788-6040 00509 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 5 / 7 / 12 5 / 11 / 12 BRISTOL ENVIRONMENTAL, INC. Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 1123 BEAVER STREET ☐ Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: 7:00AM-5:00PM/_ PM-BRISTOL, PA 19007 Scope of Work (Check all that apply) Full Containment with Negative Pressure ≥3 sf or ≥3 If ☐ Renovation ☐ Mini-Enclosure ≥160 sf or ≥260 ff □ Demolition Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Location of Normally Description of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Repair Removal Encapsulate Enclosure TO BE ABATED Maintenance/ Amount (i.e., thermal systems insulation, Custodial Staff? (Specify IN Facility surfacing, VAT, or SF or LF) (13)(12)other miscellaneous) Yes No N/A Basement/Crawlspace П X Pipe insulation, Furnace Insulation 575 LF, 48 SF \boxtimes Living Room П X П Transite 432 SF Ø Roof Ø Roofing 64 SF X Kitchen & Bathrooms X Sinks 4 EA X П Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill SERVICE TRANSPORT GROUP, INC. Hauler ID No. Waste MINERVA LANDFILL 20990 5 Cu Yds City, State Disposal Date City, State NEW CASTLE, DE 19720 5/11/12 WAYNESBURG, OH 44688 Completed By (Print or Type) Title Signature

Dear

Elszegon.

Gino Pizzigoni

General Manager

Date 4/24/12

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

4 / 24	_ /	12			Rutgers U	ing Owner/Operator	(2)	I WAY 2		2012	11.	1
⊠ EPA ⊠ Ir	Notification nitial mended mendment		14112	Stre	eet Address	1 Bldg 4086						9.
□ DCA □ E	mergency	(includ		P	iscatawa	y, NJ 08854						
	stification) ancellation				ne of Conta			Telephone Nur	nber			
**1						NFORMATION						
Name of Facility Where Abaten	nent is Tak	ing Pla	ce (3)	· ·	, tolli i	W OKINATION	Type of Facilit	v (4)				
Miller House							School (K-	12)				
Street Address							☐ Subchapte	r 8 (Other than K-1	2)			
857 Hoes Lane		1					homes, etc	private and comme	ercial	buildi	ngs,	
City (5)							Square Feet	# of Floors		Bldg.	A.00	
Piscataway			10				5000	3			_	
County (6)				Co	unty Code ((7)(STATE USE ONLY)	Current Use (F	Prior if being demol	ished)		-	
Middlesex							Residentia		.c.i.cu,	le .		
Name of Monitoring Firm Hired I	by Building	Owne	r (8)	ASCI	M No.	Name of Abateme	ent Contractor (9	9)				_
				000	098	BRISTOL EN						
Street Address						Street Address					-	
3 Terri Lane					OVER-	1123 BEAVE	RSTREET					
City, State, Zip Code						City, State, Zip Co	ode					
Burlington Township, NJ						BRISTOL, PA	19007					
Project Manager for Monitoring F	irm			ephone		Telephone No.		License No.				
Brian Kearney Start Date (10)	7=-				6-8800	215-788-6040		00509				
	Sche				ate (11) 12	Name of OSHA M						
Occupancy Status During Abater	_					BRISTOL EN	/IRONMENTA	L, INC.				
☐ Facility Closed/Vacated Durin	a Entire P	eriod o	Ahate	ment		Street Address						
□ Abatement Performed Outside	e of Norma	Facili	ty Hou	e - De	scribe	1123 BEAVER						
Time of Abatement: 7:00AM-	5:00PM/_	F	M	AM	l	City, State, Zip Co						
Scope of Work (Check all that ap	(vla					BRISTOL, PA	19007	<u> </u>				
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf			enovati			☐ Mini-Encid	Procedure	gative Pressure	·e			
			S Locat Norma		A Marketin Co. Marketin Co.				1	patem	ont 7	
Longtian of		- 9			1				ΔH		ent i	-
Location of Asbestos-Containing Material TO BE ABATED IN Facility (13)	(ACM)	Use Ma	ed Sole intena todial ((12)	ly by nce/	Asbes (i.e.	Description of stos Containing Mate , thermal systems in surfacing, VAT, o other miscellaneo	sulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsul	Could
Asbestos-Containing Material TO BE ABATED IN Facility (13)	(ACM)	Use Ma	ed Sole intena todial	ly by nce/	Asbes (i.e.	stos Containing Mate , thermal systems in	sulation, or	(Specify		1	Encapsulate	onid
Asbestos-Containing Material TO BE ABATED IN Facility (13) Basement/Crawlspace	(ACM)	Use Ma Cus	ed Sole intena todial s (12)	ly by nce/ Staff?	(i.e.	stos Containing Mate , thermal systems in surfacing, VAT, o	sulation, or us)	(Specify	Removal	Repair		Could
Asbestos-Containing Material TO BE ABATED IN Facility (13) Basement/Crawlspace Living Room	(ACM)	Use Ma Cus Yes	ed Sole intena todial s (12)	ly by nce/ Staff?	(i.e.	stos Containing Mate , thermal systems in surfacing, VAT, o other miscellaneo	sulation, or us)	(Specify SF or LF)	Removal	1	Encapsulate	
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Asbestos-Containing Material TO BE ABATED IN Facility (13) Basement/Crawlspace Living Room Roof (itchen & Bathrooms		Vse Ma	ed Sole intena todial (12) No	N/A	Pipe ins Transite Roofing Sinks	stos Containing Mate , thermal systems in surfacing, VAT, o other miscellaneon	sulation, or us)	(Specify SF or LF) 575 LF, 48 SF 432 SF	Removal 🛛 🕅	Repair		
Asbestos-Containing Material TO BE ABATED IN Facility (13) Basement/Crawlspace Living Room Roof Citchen & Bathrooms lame of Registered Waste Hauler		Yes	ed Sole intena todial (12) No	N/A N/A DEP Valuer IC	Pipe ins Transite Roofing Sinks Vaste	stos Containing Mate , thermal systems in surfacing, VAT, o other miscellaneon	sulation, or us) Insulation Name of Regist	(Specify SF or LF) 575 LF, 48 SF 432 SF 64 SF 4 EA	Removal 🛛 🗎	Repair		
Asbestos-Containing Material TO BE ABATED IN Facility		Yes	ed Sole intena todial (12) No	N/A N/A	Pipe ins Transite Roofing Sinks Vaste	stos Containing Mate, thermal systems in surfacing, VAT, on other miscellaneous culation, Furnace Cubic Yards of Waste 5 Cu Yds	sulation, or us) Insulation Name of Regist	(Specify SF or LF) 575 LF, 48 SF 432 SF 64 SF 4 EA	Removal 🛛 🕅	Repair		
Asbestos-Containing Material TO BE ABATED IN Facility (13) Basement/Crawlspace Living Room Roof Litchen & Bathrooms ame of Registered Waste Hauler SERVICE TRANSPORT GR ity, State		Yes	ed Sole intena todial (12) No	N/A N/A DEP Valuer IC	Pipe ins Transite Roofing Sinks Vaste	stos Containing Mate, thermal systems in surfacing, VAT, of other miscellaneous distribution, Furnace culation, Furnace cubic Yards of Waste 5 Cu Yds Disposal Date	sulation, or us) Insulation Name of Regist MINERVA L	(Specify SF or LF) 575 LF, 48 SF 432 SF 64 SF 4 EA tered Landfill	Removal 🛛 🕅	Repair		
Asbestos-Containing Material TO BE ABATED IN Facility (13) Basement/Crawlspace Living Room Roof Citchen & Bathrooms lame of Registered Waste Hauler SERVICE TRANSPORT GR		Yes	ed Sole intena todial (12) No	N/A N/A DEP Valuer IC	Pipe ins Transite Roofing Sinks Vaste	stos Containing Mate, thermal systems in surfacing, VAT, on other miscellaneous culation, Furnace Cubic Yards of Waste 5 Cu Yds	sulation, or us) Insulation Name of Regist MINERVA L	(Specify SF or LF) 575 LF, 48 SF 432 SF 64 SF 4 EA	Removal 🛛 🕅	Repair		

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

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Date of Notification (1)	14	12				of Building	Second rec	ner/Operator (111 711		17.	1	1	
Agencies Notified ⊠ EPA	Type Notifica				200000	Address Road 1	Bldg	4086				154	No.	
☑ DOLWD ☑ DHSS ☐ DCA	Amended Amendme	ent # <u>2</u>	6 30.			State, Zip C cataway,								
(NJAC 5:23-8)	justification	on)	adding	'		of Contac	t			Telephone Number	er			ÿ!
	☐ Cancellat	ion			4-4	e Smith			2 16		_			
N			D:	(0)	FA	CILITY IN	IFOF	RMATION	r=	******				
Name of Facility Where A	Abatement is T	aking	Place	(3)					Type of Facility	******				
Street Address		-			W n				School (K-12	2) 8 (Other than K-12)				
857 Hoes Lane										rivate and commerc	ial bu	ilding	s,	
City (5)									Square Feet	# of Floors	ТВІ	dg. A	ae	
Piscataway									5000	3	- 11	80÷	-	
County (6)					Cour	nty Code (7)(STA	ATE USE ONLY)	Current Use (Pr	ior if being demolish	ed)			_
Middlesex									Residential					
Name of Monitoring Firm	Hired by Build	ding O	wner ((8)	ASCM		1		ent Contractor (9)					
ATC					0009	98			VIRONMENTA	L, INC.				
Street Address 3 Terri Lane							1000	eet Address 123 BEAVE	PETDEET					
City, State, Zip Code					-14			y, State, Zip Co						
Burlington Townsh		6		,			E	BRISTOL, PA		· ·				
Project Manager for Mon	itoring Firm				phone		6.5	ephone No.	rs.	License No.				
Brian Kearney Start Date (10)	To	Cabadi	ilod C		9-386	-8800 te (11)		215-788-6040 me of OSHA M		00509				
5 /7 /	454.00					12	1000000		IONITOR VIRONMENTA	L, INC.				
Occupancy Status During	Abatement (Check	only c	ne)			Stre	eet Address						
☐ Facility Closed/Vacate							September 1	123 BEAVE						
☐ Abatement Performed Time of Abatement: 7						cribe		y, State, Zip Co						
Scope of Work (Check al	I that apply)							BRISTOL, PA	19007					
	i mar appiy)								tainment with Neg	gative Pressure				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			☐ Re 図 De					☐ Mini-Enc	losure g Procedure					
				22007711917000				⊠ Non-Exe	mpted (*) and No	n-Friable Procedure				
1	-4			Locat Norma	-			D			Ab		ent T	ype
Location Asbestos-Containing		1)	Use	d Sole	ly by	Asbe	stos	Description of Containing Ma		Amount	Rer	Repair	Enc	Enc
TO BE ABA				intena todial	nce/ Staff?	(i.e		ermal systems		(Specify	Removal	bair	aps	Enclosure
(13)	ıy			(12)				surfacing, VAT, her miscellane		SF or LF)	<u> </u>		Encapsulate	ē
			Yes	No	N/A								to	
Basement/Crawlspac	e			\boxtimes		Pipe in:	sula	tion,Furnace	e Insulation	575 LF, 48 SF	\boxtimes			
Living Room	04024_026000			\boxtimes		Transit	е			432 SF	\boxtimes			
Roof				\boxtimes		Roofing	9			64 SF	\boxtimes			
Kitchen & Bathrooms	3			\boxtimes		Sinks				4 EA	\boxtimes			
Name of Registered Was				1000	JDEP \		100000000	bic Yards of	Name of Regis			1		
SERVICE TRANSPO	ORT GROUP	, INC			auler II 20990		Wa 5	Cu Yds	MINERVA	LANDFILL				
City, State NEW CASTLE, DE 1	19720						Dis	posal Date /11/12	City, State WAYNESE	BURG, OH 44688				
Completed By (Print or Ty		Title						Tai Co		15.	e /	,		-
Gino Pizzigoni	.ı -,		enera	l Mar	ager			Jac	gu Luc	Uka 3	5/1	6/1	12	

GI 12082 ASB-41 MAY 11

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

NOTIFICATION OF ASBESTOS ABATEMENT *Only completion date is amended. (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) 5-18-2012 Legow Management MAY 2 1 Agencies Notified Type Notification Street Address 160 South Livingston Ave. **EPA** Initial City, State, Zip Code X DEP Amended LICENSING × DOL Amendment #1 Livingston, NJ 07039 Emergency (including Name of Contact Telephone Number DOH justification) DCA Cancellation John FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Lalor Gardens Unit # 110A School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, × Stenton Court etc.) City (5) Square Feet # of Floors Bldg. Age Hamilton 50 +County Code (7) County (6) Current Use (Prior if being demolished) (STATE USE ONLY) Mercer Apartment Unit Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) n/a Jadar Contracting, LLC Street Address Street Address n/a 22 Troy Lane City, State, Zip Code City, State, Zip Code n/a Lincoln Park, NJ 07035 Project Manager for Monitoring Firm Telephone No. License No. Telephone No. 01088 n/a 973-706-7950 n/a Start Date (10) Name of OSHA Monitor Scheduled Completion Date (11) 5-21-2012 Jadar Contracting, LLC 7-22-2012 Occupancy Status During Abatement (Check Only One) Street Address 22 Troy Lane Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code X Other - Describe: 9am - 5 pm Lincoln Park, NJ 07035 Scope of Work (Check All That Apply) Full Containment with Negative Pressure ≥3 sf or ≥3 lf Renovation ≥160 sf or ≥260 lf Demolition Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Туре Normally Location of Description of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ Encapsulate Enclosure TO BE ABATED (i.e. thermal systems insulation, (Specify Removal Repair Custodial Staff? surfacing, VAT, or In Facility SF or LF) (12)(13)other miscellaneous) Yes No N/A VAT 96 SF Kitchen Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste Jadar Contracting LLC G.R.O.W.S. Landfill 0033137 TBD City, State Disposal Date City, State Lincoln Park, NJ 07035 TBD Morrisville, PA 19067 Completed by Title Signature Date Lillie Lazarevich 5-18-2012 Secretary

State of New Jersey

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.IAC 8:50 and 12:120)

1362		(Pu	rsuant t	to NJAC 8:6	60 and 12:120	0)		promotes 1	. N. I VALLAGETA I IV		1 1 1		
Date of Notification (1) 5-18-2012					vner/Operator g Authority			1 1	4 2 1	2012	<i>;</i>		
Agencies Notified Type Notification EPA Initial		1 2	Street Ac 500 Br	ddress oad St				1			a secure	i.	Transfer or
DEP Amended				te, Zip Code			7			1	3		
DOL Amendment #				k, NJ 071	102		an emiliar	Tole	phone Num	her			
□ DOH justification) □ DCA □ Cancellation	577			annetti				licie	priorie rvan	ibei			
			FACIL	LITY INFOR	MATION								
Name of Facility Where Abatement is Taking James Baxter Terrace - Unoccupie						Ту	pe of Facility (
Street Address	a Diag.	# 12				H	School (K-1 Subchapter		er than K-12)			
57 Sussex Ave.						×	Other (i.e. petc.)	orivate 8	commercia	ıl build	ings,	home	s,
City (5)				-			uare Feet		Floors		dg. A	ge	
Newark, NJ 07102						1	5,000	3			0 +		
County (6) Essex			County C STATE U	Code (7) ISE ONLY)		2000	rrent Use (Pri		사용프랑인 사용이 없이 보고 사용하다 보실 없으고		Der	no	
Name of Monitoring Firm Hired by Building O	wner (8)		ASCM	l No.	Name	1	Abatement Cor	-					-
Lewis Consulting Group	, ,		n/a		Jad	ar C	Contracting	LLC					
Street Address					Stree								
40 Clinton Str., 6th Floor Suite 101 City, State, Zip Code		-2-19-00-20-			the same of the sa		Lane , Zip Code	2000					
Newark, NJ 07102					4		Park, NJ 0	7035					
Project Manager for Monitoring Firm		Τ.	Telephor	ne No.	Telep	hone	e No.		License No	o.			
Leon							6-7950		01088				
Start Date (10) 5-29-2012	Schedule 12-31-		pletion [Date (11)			OSHA Monitor Contracting						
Occupancy Status During Abatement (Check					Stree			-	H-1007-100-7				
Facility Closed/Vacated During Entire P					22								
Abatement Performed Outside of Norm Other – Describe: Unoccupied Property S					100000000000000000000000000000000000000		e, Zip Code Park, NJ 0	7035					
Scope of Work (Check All That Apply)						_			11				
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf	_	Renova Demoliti			-		Full Containm Mini-Enclosur		Negative P	ressu	е		
2100 St 01 2200 II		rinonu	1011		F	4	Glovebag Pro	cedure			****** * ****	74.55	
	T						Non-Exempte	d (*) an	d Non-Friab	le Pro	1000	e ement	
Location of	1	Locati Vormal	ly		Descriptio	n of					Ту	ре	
Asbestos-Containing Material (ACM)		ed Sole intenar			s Containing nermal system	Mate		127.5	mount Specify	70		5	ė
TO BE ABATED In Facility	Cus	todial S (12)	Staff?		surfacing, V	AT, c	or		or LF)	Remova	Repair	Encapsulate	Enclosure
(13)			Т		other miscella	neo	us)			val	1	ulate	ure
	Yes	No	N/A					10		111			
Interior of Bldg.	-		X		VAT & Ma				500 SF				
Roof			Х		Built up Ro	0,000	ng	100	500 SF				
Exterior Windows		Х		Caulkir				Windows	1111			_	
Below Brick Veneer	L	X		apor Barrie	r Ma			00 SF	Ш			L_	
Name of Registered Waste Hauler	2000	JDEP W lauler ID	999 (13	Cubic Yards of Waste		110 S	8 4	ered Landfill					
Global Waste Services	2	2171		TBD				J.					
City, State Hacketstown, NJ				Disposal Dat TBD	е	City, Sta Mellvil		11704					
Completed by	Title				Signatu	re	0		()	ate	0.40		
Lillie Lazarevich	Seci	retary			15.ll	4	Huzan	eus	\searrow 5	-18-2	012		

16955					N OF ASE t to NJAC				ME	R	FIN	7 6	Property Street	7	
Date of Notification (1) 5/18/2012					of Building			(2)	N.						
Agencies Notified	Type Notification				Address WIN PL	ACE			UU	dri e		116	-11	7	
DEP DOL	Amended Amendment				ate, Zip C DMFIELI		7003	j	- Lune		OS CONTRO CENSING)L 8	-	1	
DOH DCA	Emergency (justification) Cancellation	including			of Contact ES GAR		N		en geletti automoti ne		ephone Nu	mher	***		
N				FAC	ILITY INF	ORMATI	ON			-				07255	
Name of Facility Where	Abatement is Takin	g Place (3	3)						of Facility School (K-	12)					
Street Address 19 IRWIN PLACE				199				×	Subchapter Other (i.e. petc.)	r 8 (Oth private	er than K-1 & commerc	2) ial buil	dings	, hom	es,
City (5) BLOOMFIELD									re Feet	# 0	f Floors	E	Bldg. /	Age	
County (6) ESSEX					Code (7) USE ONLY)		Curre	ent Use (Pri	or if bei	ng demolis	hed)			
Name of Monitoring Firm N/A	Hired by Building (Owner (8)	-	ASC	M No.				tement Cor			JG		ţ.	
Street Address							Street	Addres	ss			-			
City, State, Zip Code							City, S	tate, Z	HERFOR		7D.				
Project Manager for Mon	itoring Firm		T	Telepho	ne No.		Teleph			14	License N	lo.			
Start Date (10) 5/29/2012				mpletion	Date (11)		Name	of OSI	HA Monitor		00494		•	220	
Occupancy Status During	Abatamant (Chael	5/31/20							(9) ABO	VE					
Facility Closed/Vaca Abatement Perform Other – Describe:	ated During Entire P	eriod of A	bater	ment s	100		Street City, S		ip Code						
Scope of Work (Check Al	I That Apply)														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		promote and the second	enova				×	Mir Glo	I Containmoni-Enclosure ovebag Prod n-Exempted	e cedure				e	
Location	of	2000	Locat lorma			Doc	cription	o.f	4					ement pe	t
Asbestos-Containing TO BE ABA In Facili (13)	Material (ACM) TED	Mai Cust	d Sole ntena odial ((12)	nce/ Staff?		tos Conta thermal s	aining M systems ing, VA	laterial insula T, or		(S	mount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
EXTERI	OR	Yes	No	N/A		TRANS	ITE Q	IDINIC		1	0.05	ļ.,_		Ö	
						TRANS	IIE S	IDING		4:	50 SF	X			
	1000										*******				
Name of Registered Wash TWO BROTHERS C		<u> </u>	H	JDEP W lauler ID 8743		Cubic Y of Wast					red Landfill		.R.C).W.S	S.
City, State CLIFTON, NJ						Disposa 5/31/2			City, State		.E, PA				
Completed by VIVECA RAMOS		Title SECI	RETA	ARY		Sig	gnature	ا نهندار	ca V)	Da	te 18/20	112		

State of New Jersey

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

16954					BESTOS . 8:60 and						Market Street	A	en la	7
Date of Notification (1) 5/18/2012					Owner/C			S. N.	C	B		5		-
Agencies Notified Type Notification Initial				Address CENTER	R GROV	E ROA	AD	M	122		2017)		U	1
DEP Amended Amendment Emergency				ate, Zip C DOLPH,	ode NJ 078	69				3	220	1		
DOH justification) Cancellation	100000000000000000000000000000000000000		1 10011110	of Contact PH PO	NTURO			1	ATele	phone Nu	mber	, — ,		
N			FAC	ILITY INF	ORMATI	ON			-	-	- 101			
Name of Facility Where Abatement is Takin COUNTY COLLEGE OF MORRIS	g Place (COHE	3) N HA	LL				manus.	of Facility (chool (K-1						
Street Address 214 CENTER GROVE ROAD										er than K-1 commerc		dings	, hom	ies,
City (5) RANDOLPH							Square		# of	Floors	E	3ldg. /	Age	
County (6) MORRIS		,		Code (7) USE ONL	0	_	Curren	t Use (Pri	or if beir	ng demolis	hed)			
Name of Monitoring Firm Hired by Building WHITMAN COMPANIES	Owner (8)	ASC	VI No.				ment Cor		(9) RACTIN	lG	_	-	
Street Address 116 TICES LANE, UNIT B-1							Address	ERFOR	D BI V	D .				
City, State, Zip Code EAST BRUNSWICK, NJ 08816				**		City, St	ate, Zip							
Project Manager for Monitoring Firm KEVIN LOVELY			Telepho	ne No. 90-5858		Teleph	one No. 956-87		1	License N	lo.			
Start Date (10) 6/1/2012	Schedul 6/6/20			Date (11)	la consent	Name o	of OSHA	A Monitor		00494				
Occupancy Status During Abatement (Chec						Citiza District	Address	(9) ABO	VE					
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe: Friday 4:30 PM, Sati	Period of a	Abaten	nent			City, St		2						
Scope of Work (Check All That Apply)												70-00		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Accounts	Renova Demolit				×	Mini- Glov	Enclosure ebag Proc	edure	Negative F			e	
	7 1752	Locati						10%				Abate		t
Location of Asbestos-Containing Material (ACM)	Use	Normal ed Sole	ly by	Ashao	Desi tos Conta	cription o						1 9	ре	
TO BE ABATED In Facility (13)	Cus	intenar todial S (12)	Staff?		thermal s	systems ing, VAT	insulati , or		(Sp	nount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
CLASSDOOMS 240 8 200	Yes	No	N/A								<u> </u>		Φ.	
CLASSROOMS 210 & 260	X			VAT 8	& MAS	TIC		1,14	12 SF	Х				
Name of Registered Waste Hauler		N	JDEP W	aste	Cubic Y	'arde	—	Name of F	Panietor	ed Landfill				
TWO BROTHERS CONTRACTING		Н	auler ID 8743		of Wast		4			AGEME	NT G	.R.C	.W.5	S.
City, State CLIFTON, NJ					Disposa 6/6/20		1 2	City, State MORRI		E, PA				
Completed by VIVECA RAMOS	Title SEC	RETA	RY			rature 1	u	NA)ar	Da 5/	te 18/20	12		

			State	e of 1	New Jer	sey			Court	Check	# 10	133	1
						S ABATEMENT	71			11 (4)	Ц.	1	
Date of Notification	(1)	(Pursu				and 12:120-7 wner/Operato		2)					111
5/16/12	1-7	R/1111	5.02		Wil:		- (.	i ji U	Wall 1		4	L	
Agencies Notified	Type Notifica	tion	Street	Addre	ess					-		1	1
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[]DEP	Notifica	ation	City, S	tate.	Zip C	ode	2017		3,711	MSING.	78.0 m	_	
[X]DOL	[]Amended		52000			NJ 07088			St.				
	Notifica	ation		20,0,0,0,0				b					
[X] DOH	[]EMERGENCY	7	Name of		wilm	020		Terebron	e Number				
[]DCA	[]Cancellat	ion	Rone	110	AA T TIII.	OTE							
			4	FACII	LITY IN	FORMATION							-
Name of Facility When	e Abatement	is Taki	ng Place	e (3)			Ty	pe of Facil:	ity (4)				
Private								[]School	(K-12)				
Street Address							-11	[]Subchap					
329 Stiles St	reet							[x]Other (: cial b	i.e., priva uildings, h				
							Sc	quare Feet	# of Floo		ldg.		
City (5)	19	County	(6)		7.1 VACES (2003)	ty Code (7)	71	2600	2		75		
Vauxhall		Unic	n		(STA	TE USE ONLY)	Cu	errent Use (Prior if be	eing de	moli	shed)
						170-1407 - 27 - 181		Residenc	e				
Name of Monitoring Fi Owner (8)	rm hired by	Buildin	g ASCM	No.	12	Name of Abate							
N/A			67			AZTECH I	MAN	NAGEMENT	, Inc.				
Street Address					2	Street Addres	-						
						86 Chris	sto	opher St	•				
City, State, Zip Code)					City, State,	_			0			
						Montcla	ır,	, NJ 070	42				
Project Manager for M	Monitoring Fi		lephone /A	Numbe	er	relephone Num (973)744				License 003		ber	
Scheduled Start Date	(10) Sched	i. Comp	letion I	ate ((11)	Name of OSHA	Mon	nitor	l				5000
5/25/12	5/	26/12	2			N/A							
Month Day Yea			Day	Year									
Occupancy Status Duri [X]Facility Close						Street Addres	SS						
of Abatement													
[]Abatement Per: Hours - Descr				cilit	A C	City, State,	Zip	Code					
[]other - Descr				pt»									
Scope of Work (Check	all that app	Ly)											
[X]>3 sf or >	3 1f	r	X]Renova	ation		[]Full []Mini-		ntainment wi	th Negative	e Press	ure		
[]>160 sf or]Demol:			S. 2 2 2		g Procedure					
						[]Non-I	Fria	able Procedu	re				
Location	of		Is Location			Description	on o	of		Ab	atem	ent :	Fype
Asbestos-Cont		1	Normally Used			Asbestos-Con		031	Amount	R	R	N	N
Material () TO BE ABA		F	Solely By Main-		,	Material			(Specify	Y M	P	A	L
In Facili		t	tenance/ ustodial			i.e., thermail lation, surf	100		LF)	v	A	PS	O S
(13)		St	aff (12)		other misce				A L	R	L	U R
Basement		Yes	No X	N/A	Pine	Insulati	ion		50 lf	X	+	<u> </u>	E
Dadement					Tpe	Insulaci	LOIL	-	30 11		+	-	-
		-	1 -	-			3					\vdash	
Name of Registered Wa	ste Hauler	N.	JDEP Was	te	Cubi	c Yards	P.	Name of Regis	stered Land	dfill			
AZTECH MANAGE		н.	auler ID		100000000000000000000000000000000000000	aste .75	115	G.R.O.W.					
City, State			7040	5250	Disp	osal Date	-	city, State	124			t	
Montclair, NJ	07042				720	28/12		Morrisvi.	lle, PA	190	67		
Completed By (Print o	r Type) Tit	le				Signature	e/	1	/	Date			
Constantine Vi		eside	ent			1	1	1//	/	5/16			
						- lee	W	france /	Va				
								/					

Chech # 2348

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) 05/16/2012 Livingston Board of Education Agencies Notified Type Notification Street Address 11 Foxcroft Drive ASBEST **EPA** Initial City, State, Zip Code DEP Amended × DOL Amendment # Livingston NJ 07039 Emergency (including Name of Contact Telephone Number DOH justification) Paul Ko DCA Cancellation **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) MT Pleasent Middle School School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, 11 Broadlawn Drive etc.) City (5) Square Feet # of Floors Bldg. Age Livingston County Code (7) (STATE USE ONLY) County (6) Current Use (Prior if being demolished) **FSSEX** Public School Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Horizon Environmental 00073 Savic Construction Corp Street Address Street Address PO Box 316 205 Route 46 Suite 15 City, State, Zip Code City, State, Zip Code Thorofare NJ 08086 Totowa, NJ 07512 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Steve Flanigan 856-848-0800 973-339-9735 01034 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 05/18/2012 05/19/2012 Savic Construction Corp Occupancy Status During Abatement (Check Only One) Street Address 205 Route 46 Suite 15 Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: From 3 pm until 10 pm Totowa, NJ 07512 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 Normally Used Solely by Туре Location of Description of Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED (i.e. thermal systems insulation, Enclosure (Specify Removal Repair Custodial Staff? In Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A Cafeteria crawl Space X TSI Fittings 8 LF Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste Savic Construction Corp **GROWS** 32253 10 yr City, State Disposal Date City, State Totowa NJ Morriseville, PA Completed by Title Signaturé Date Sava Savic President 05/16/2012

Print Form

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

Date of Notification (1)			Name	of Building	g Owner/Operator (2)	造步步	UW	15		1
	12		Mo	nmouth	County Park Sy	stem	CK 2072	\$ \$ 2	200		
Agencies Notified Type Notif	cation		Street	Address		111-1	MAY 2	1 201	1	U	H
☐ EPA ☐ Initial			805	Newmar	n Springs Road	ll l	11 11 15 1 4				
☑ DOLWD ☐ Amend	ed ment #		City, S	State, Zip C	ode	1				1	
	ency (includ	ina	Lin	croft, Nev	w Jersey 07738	1	ASBESTOS	CONTROL	3		
(NJAC 5:23-8) justifica		119	Name	of Contact			Telephone Nu	ımber	V2001	· · · · ·	
☐ Cancell	ation		Fra	ncine P.	Lorelli		10		ë s		
			FA	CILITY IN	IFORMATION						
Name of Facility Where Abatement is	10.70		600			Type of Facility					
Deep Run Recreation Area, H	lenry Hud	son T	rail			School (K-12	2) 8 (Other than K-	12\			
Street Address							rivate and comn		ilding	s,	7)
Route 79				William Service		homes, etc.)				500	1013112552
City (5)						Square Feet	# of Floors	Blo	ig. Aç	je	
Marlboro, New Jersey 07738						1000	1	1 4	55+		
County (6)			Cour	nty Code (7)(STATE USE ONLY)	Current Use (Pr	ior if being dem	olished)	200		
Monmouth					*	Outdoor Re	ecreation Office	ce			
Name of Monitoring Firm Hired by Bu	ilding Owne	er (8)	ASCM	No.	Name of Abateme	ent Contractor (9))				
Environmental Tactics, Inc.					Lilich Corpor	ration					
Street Address			-		Street Address				-		
64 Broad Street					606 McBride	Avenue					
City, State, Zip Code					City, State, Zip Co	ode	1864	14		-	
Matawan, New Jersey 07747					Woodland Pa	ark, ['] New Jerse	y 07424				
Project Manager for Monitoring Firm		Te	lephone	No.	Telephone No.		License No.		-		
Thomas P. Geiger		- -	732-290	-2217	973-225-8400)	01104				
Start Date (10)	Scheduled	Comp	letion Da	ite (11)	Name of OSHA N	Monitor					
05 / 30 / 12	05	/ _3	31 /	12_							
Occupancy Status During Abatement	(Check on	y one)		•	Street Address	130000000000000000000000000000000000000					
☐ Facility Closed/Vacated During Er											
Abatement Performed Outside of Time of Abatement:AM					City, State, Zip Co	ode	11	100	******		
Scope of Work (Check all that apply)		S. 1997-1991			. D.F./// Com	Animum and solding Nic		- 1000 000 000			
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 		Renova Demoli			☐ Mini-End	tainment with Ne closure g Procedure	gative Pressure				
2					⊠ Non-Exe	empted (*) and No	n-Friable Proce	dure	- 1		
	1	Is Loc Norm				// _*		Ab	atem	ent T	уре
Location of Asbestos-Containing Material (AC	m L		lely by	Ashe	Description of stos Containing Ma		Amount	Re	Repair	E	E
TO BE ABATED		Mainter			e., thermal systems	insulation,	(Specify	Removal	pair	cap	Enclosure
IN Facility		ustodia (12	I Staff?		surfacing, VAT		SF or LF)	<u>a</u>		Encapsulate	ure
(13)	Ye				other miscellane	ous				te	
Hanger/Workshop Bldg 3603				Tar coa	ating on corruga	ted metal	1000 SF				
an a same			10	siding	panels and door	rs		\boxtimes			
				1	To all 19 ago antiquations promised in			\boxtimes	П		
		\Box		1			The fact of the fa			П	In
Name of Registered Waste Hauler			NJDEP		Cubic Yards of	Name of Regi	Lstered Landfill				
Lilich Corporation			Hauler I	D No.	Waste 5	G.R.O.W.					
City, State			1012	-	Disposal Date	City, State		Name of the last o			
Woodland Plark, New Jersey	07424	10			06/01/12	1 07	e, Pennsylvar	nia			
Completed By (Print or Type)	Title				Signature	/	, /	Date ,			
. Tatiana Kalenikova	Vice	Presid	dent		Take	un Kali	Me	5/17	1/12	_	

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NIAC 8:60 and 42:420)

MO#19807847537	N	(Pı	ursuan	t to NJA	C 8:60	and 1	ATEMENT 2:120)					
Date of Notification (1)				me of Build			11	JU MAY 2	1. 2	019		111
05/18/2012						17Opera	ator (2)	Į.				i
Agency Notified	Type Notification		A STATE OF THE PARTY OF THE PAR	zy Czastk eet Address	CONTRACTOR OF THE PARTY OF THE		· i	ASBESTUS (HVID	1 0	···	1
⋈ EPA	S2 1=34=1			7 Washin		reet	l _{ow} .	LICEN	SING	UL O		
DEP	⊠ Initial ☐ Amended		City	y, State, Zip	Code	CCL				-	-	
⊠ DOL	Amendment #			ooken, NJ								
⊠ DOH	☐ Emergency (including justification)	9		me of Conta				Telephone Nur	mher	****	- mag	
☐ DCA	☐ Cancellation		Jerz	y Czastki	ewicz			relephone ival	inei			
				ACILITY IN		ION						
Name of Facility Where	Abatement is Taking Place	e (3)					Type of Fac	cility (4)				
Apt. bldg.												
Street Address					-		☐ School (F	<-1 2) Iter 8 (Other than K-1 2	2)			
1127 Washington Str	eet						☑ Other (i.e	e. private & commercia	د) al build	linas		
City (5)							homes,	etc.)				
Hoboken, NJ 07030							Square Fee	t # of Floors	Bld	g. Ag	е	
County (6)			Cou	inty Code (7	7) / \$\frac{1}{2} \tag{2}	LICE						12200
Hudson			ONL	_Y)) (SIAIE	USE	Current Use	(Prior if being demoli	ished)			333
	History B. D. C.	I AS	SCM No.		Name	of Abot	ement Contracto	(6)	The same street			
Name of Monitoring Firm	Hired by Building Owner	8)	20111 110.					or (9)				
Street Address		=			Gr Tec							
												K-1
City, State, Zip Code					City, St	ate Zir	d #283					
					Wayne							
Project Manager for Moni	toring Firm	Telep	phone No).	Telepho			License No.				
					973-63			01127				
Start Date (10)	Scheduled Com	pletion	Date (11	1)			A Monitor	101127				
05/27/2012	05/29/2012				Envirov	ision	Consultants,	Inc				
Occupancy Status During	Abatement (Check only	ne)			Street A							
☑ Facility Closed/Vacated	During Entire Period of	Abatem	ent		20-21 V	Vagara	aw Road, Blo	lg .# 34A				
☐ Abatement Performed (☐ Other - Describe	Outside of Normal Facility	Hours			City, Sta	te, Zip	Code	<u> </u>				
Scope of Work (Check all					Fair La	wn, N	J 07410					
	tnat apply)				D	J	Contribution			-		
≥3 sf or >3 If ≥160 sf or >260 If				novation		Min	i-Enclosure	ith Negative Pressure				
			⊔ De	molition	-	Glov	vebag Procedur	e				
		Is Loc	ation			14011	-Exempted (*) a	and Non-Friable Proce	dure	ΔÞ	ato	mer
Location	of	Norn								7.	Typ	
Asbestos-Containing I	Material (ACM)	Jsed So Mainte	olely by	Ashest	Desc os Contai	cription	of aterial (ACM)	-			i	
TO BE ABA	TED	Custo		(i.e.,	thermal s	ystems	insulation.	Amount (Specify		Z .		Enc
(13)	cy	Sta (12			surfaci other mi	ng, VA	T, or	SF or LF)		Removal	0 7	SOR
		(12		_	other m	scenari	eous)			oval	9	Encapsulate
00000000	Ye	s No	N/A									1
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ame of Donist					-							
ame of Registered Waste		NJDEP ID No.	Waste F		Cubic Yai	ds of	Name of Reg	stered Landfill	!	1	-	
Tech LLC				1	Waste							
ty, State	0	03378	35		No.		T.R.R.F. Inc	2				
ayne, NJ 07470				1	Disposal I	oate	City, State					
ompleted by	Title				Cionat .	//	Tullytown, I	1				
Jevtic	Owner				Signature	He.	whe 11	mad	ate			
SB-41		this for	m for not	bestos licen		/		05/	/18/20	112		

NOTE TEATION OF ASSESSION ANA PERSON E 15 E 1 CAS 37 54

Date of Notification (1) 5-18-2	012 Name of Building Own	T. M. (2) retendo be	JONG	
Agencies Notfled Type Notfleation	Street Address	111111		1
© EPA III Initial	City, State, Zip Code		3BLE STREET	1
DEP Amended Assendment	factories	MIOLAWI	PARK NT 0743	12
E DOH jutification		026	Telephone Number	
Name of Facility Where Abelement is Tald		Type of Facility (4)		T
M. DE JONG	•	D School (K-12)		adapt and them I deal
40 RUBBLE S	TREET	Other (i.e. pri	rate & commercial buildings, home	NO.
Minimum PAG		2100	Sof Floors Bar Age	July July
BERGEN.	County Code (7)	Current Use (Prior	if boing demolished)	2
Name of Monitoring Firm Hand by Building		Name of Alasansa Contra		† †
Street-Address		Best Removal		-
City, State, Zip Code		Street Address 450 South Ri	ver St	-
		Eackensack,	N.J. 07601	-
Project Manager for Monitoring Firm	Telephone No.	Telephone No. 201-329-7444	Union No. 00388	J-
6-7-2012.	Scheduled Completion Date (11)	Name of OSHA Monitor		
Occupancy Status During Abelement (Chec		Street Address	mental Services	
Pacify Greed/Vacated During Entre J Abstract Parisoned Outside of Norm Color - December A A M	Period of Abelement mil Popilly Hours	280 Huyler S	t.	
Scope of Wash (Check All That Apply)	PM		ack N.J. 07606	- 41.000
A Selection in the sele	Renovation	D. Full Containment	with Negative Processo.	
	El Demoliton	Mini-Enclosure Gloveber Process		
	Is Lecenters	LI ROB-EMBRING	Abitment	H
Locality of Anbusine-Containing Maintel (ACM) TO REASSATED	Used Solely by Astrontes Co	Description of Charles (ACM)	Amount Typo	\dashv
in Facility (13)	Custodial Stati? (i.e. therm	el systems insulation, lacing, VAT, or	SF CF LF)	Strode
	Yes No MA	massesses social)	Wal at Mark	THE STREET
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				-
•				-
Name of Registered Weste Hester	NJOSP Whate Cubi	C Yands Name of Rag	bined Landing	1
Best Removal Inc.	17109 3/	\/ 0	va Enterprises to	4
Hackensack, NJ	6	8-20/7 Waynest	ourg, OH,	-
R.Veldran		P. Veldran	5-18-2012	2
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* Do not use this form for asbestos lice

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

CHECK	200	7	7	2	1
- " 1COP	7	-1	1.	0	
NAME OF TAXABLE PARTY.	- 22				di-

Date of Notification (1)					Name	of Buildir	ng Owner/Operator (3		I W	5	11	111
	18 /	12					er - Jonathan Mil	1 1 1 1 1 1	MAY 2 1	0.0-	10		
Agencies Notified	Type Notific	ation			Stree	t Address		15 1	I MAIZI	_20	2	1	4
	Initial				13	Mine Str	eet					1	A house
	Amended	0.00			City.	State, Zip	Code		ASDESTOS CO	NTROL	R	<u>.i</u>	
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DCA (NJAC 5:23-8)	Emergen justificati		ıding			of Contac			Telephone Num	hor			
	☐ Cancella				- PERSONAL PO	Jonatha	7.7.		relephone radiu)EI	***	- water the same	- الدونات من
					FA	CILITY II	NFORMATION						
Name of Facility Where Ab	atement is 7	Taking P	lace	(3)				Type of Facility (4)	-			11
Private Home								School (K-12)					
Street Address								☐ Subchapter 8	(Other than K-12)			
16 Mine Street								Other (i.e., prince) homes, etc.)	vate and commer	cial b	uilding	JS,	
City (5)					***			Square Feet	# of Floors	B	dg. A	20	
New Brunswick								2,600	2	100000	40+	ge	
County (6)					Cou	nty Code (7)(STATE USE ONLY)	Current Use (Price	or if being demolis	hed)			
Middlesex							· · · · · · · · · · · · · · · · · · ·	Home					
Name of Monitoring Firm H	ired by Build	ding Ow	ner (8)	ASCM	No.	Name of Abateme	ent Contractor (9)			-		
Lis Consulting Service	ces				N/A		East Coast H	az Mat Remova	ıl, Inc.				
Street Address						22.5	Street Address						
134 Bennington Pkw	у						494 E. 41 Str	eet					
City, State, Zip Code						City, State, Zip Co	ode						
Franklin Park, NJ 088	323						Paterson, NJ						
Project Manager for Monito				Tele	phone	No	Telephone No.	0.00.	License No.				
Mr. Krzysztof A. Lis	•				32-940		973-345-0022		00507				
Start Date (10)		Schedule	ed Co				Name of OSHA M		00307				
_06 / 02 /	5437500043				3 /			azMat Removal	Inc				
Occupancy Status During A		150000	-32					aziviat Kelliova	, IIIC.				
☐ Facility Closed/Vacated							Street Address						
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Time of Abatement: 8:0	0AM-4:30F	PM/	P۱	Л-	AM	CIDE	City, State, Zip Co						
Scope of Work (Check all th							Paterson, NJ	07504			-		
☐ >3 sf or >3 lf		K-2	10		eres.		☐ Full Cont	ainment with Nega	ative Pressure				
≥160 sf or ≥260 lf		_		novat			☐ Mini-Enc ☑ Glovebag						
		_	, 50,	none.	JII.		☐ Non-Exe	mpted (*) and Non	-Friable Procedur	e e			
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Basement]		\boxtimes	Pipe In	sulation		97 LF				
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East Coast Haz Mat R	emoval, lı	nc.		Н	18602		Waste 5	and the second s	NS, Inc WM				
City, State	110				.0002		Disposal Date	City, State				-	
Paterson, NJ 07504							06-04-2012,	Morfisville,	PA 19067				
Completed By (Print or Type	e)	Title					Signature		Da	to		-	
Leslie Olszewski	(2)		ect	Man	ager			THAL			2	101	-9
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DOM justification		Name	M EL	RING			Telepho	no Nu	mber	-	
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Street Address					-	C Other (Le	(-(2) or 8 (Cthar in	m K-1	2)	120	
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Hackensack, NJ		4		Disposal I	Date	City, State	D -		•		
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AND-41 (P-43-43)				*D	lo not un	e this form for	asbestos fra			· Inchele	

NOTIFICATION OF ASSESTED ARATEMENT Pursuant to MAG 250 and 42-120

5-17-2012	LS	- BORG	oc/Operator	a			المسال	V/		7
Agencies Notified Type Notification I EPA II Initial Amended Amended Amended	Cha	Address 7 ²	h S.T.	RCET	II MAY	-		012	[- Allerandra and a second
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County (2) County (2) 1-10050N Manual of Manual Spiritual by Bushings	(873)	y Code (7)		2600 Committee (P)	ior if being d] :			Ago YC	
Street Address	· Asc	AN 190.	Best/	Abstancet Co Remova Midress	l Inc	<u> </u>				one section of the se
City, Santo, Zip Code Project Manager for Monthship Fam	Telaph	one No.	City, St	South kensack	,N.J.	1	760	1		·····
15-50-2012 .1	Scheduled Completion	Poto M40	Name o Omeg	329-744 FOSHA Monitor a Envir	4 (038	88	Vi.	ces	
Cocupancy Status During Abatement (Choo Pacify Closed/Acested During Enths F Abatement Performed Outside of Norm Coter - Describe: Scope of Wast (Chock All That Apply)	t Only One)			ddess Huyler 18,29 Code h Hacker		W: .1		076	: 	or depth silvers or description
	Renountion Demolition			Pull Contains Mis Engloses Gloveling Pro- Non President	ent with Nego	the Pi	7000L	18-		
Location of Action Contains a Material (ACCA)	Is Location Normally Used Sciely by		escription of					Abia T)	ment po	Auth for the water
ID SEASATED In Facility (13)	Maintenance Custodial State? (12)	(i.e. from Surfi other	Isystems in care, VAT,	or i	Amount (Special SF cr LF)	Removal	Repair .	Encepeulata	- ameopura-
BASEMENT BOLLER ROOM	. X	THERMAL THERMAC		THE RESERVE THE PARTY OF THE PA		LF	MANAGORNA !	· :		
Rest Removal Inc.	1710	No. of Wa		*	rva En	•	Dr.	se	S.Iı	
Hackensack, NJ	Tes Estimator	5-3		2 Wayne		/Date	-	-2	018	2.1

State of New Jersey - Notification of Asbestos Abatement (Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

GAC Project # 060-11

Client Project #		L	1-200-11-0-25	are some to a part of the const	anne de la companya d		11111	臣		3 // [W 10	-
Date of Notification (1) May 3, 20	12				Name of Building Ov RUTGERS, THI				*****	Wateria.	7 5	-!!]!
Agencies Notified EPA		Notification Initial N In Amende	Votifica		Street Address ENVIRONMENT 27 ROAD 1, BLI							
□DCA ☑ DOL		■ Emerging iustific	ency (i ation)	including	City, State, Zip Code PISCATAWAY,		4	Aba	derde.	CLATE.	-	1
図 DEP- No Longer REQUIRED DOH		□Ćancel			Name of Contact MICHAEL SMIT HEALTH & SAF		×	Telep	hone N	lumber		
				FACILITY IN		EII		TE COL				
Name of Facility Where Abatemen			3061	TAGILITTIN	Type of Facility (4) School (K-12)		1	152				
Street Address			WINTA T		Subchapter 8 (oth	er than K-1	2)					
COLLEGE AVENUE CAN	MPUS				Sq. Feet: N/A						/ears	
		.ESEX			Current Use (prior if			CONTRACTOR OF				
Name of Monitoring Firm Hired by ATC ASSOCIATES	RUNSWICK County (6)											
Street Address						DAILINI	INT CO	NSU	LIAN	13, 114	<u>. </u>	
3 TERRI LANE	C ASSOCIATES 0098 GREENWOOD ABATEMENT CONSULTANTS, INC. **Street Address** Street Address*											
City, State, Zip Code BURLINGTON, NJ 08	016				City State, ZipCode BUTLER, NJ 074	05						
Project Manager for Monitoring Fir BRIAN KEARNY	m	Telephone N 609-386			Telephone Number				se Num	ber		
Scheduled Start Date (10)		Cabadulad (Nama mladia	- D-t- (11)	973-492-0477			0084	10			
05/18/12		05/21/12	ompletic	on Date (11)	Name of OSHA Monitor 1 ENVIROVISION,							
Occupancy Status During Abate	ment (C	heck only o	ne)		Street Address			-				
☐ Facility Closed/Vacated Durin ☐ Abatement Performed Outside				nt	20-21 WARGARA	AW ROA	D	Name Name				
Describe Mother – Describe: 5PM - 5A	M				City, State, Zip Code							
					FAIRLAWN, NJ							
Scope of Work (Check all that app	ly)					☐ Full (Containm	ont wi	th Nos	ativo Dro	Pressure Pressure Pressure Pressure Pressure Pressure Procedure Proced	
$\square \ge 3 \text{ sf or } \ge 3 \text{ lf}$				⊠Renovation		☐ Mini-I	Enclosure		2.70	alive rie	ssuie	
\boxtimes \geq 160 sf or \geq 260)			☐ Demolition			ebag Pro			-Friable	Proced	lure
Location of Asbestos-Containing Material (ACM) in Facility (13)		ation Normal			bestos Containing Mater nal systems insulation, su	ial	Amount (Specify			ment Typ		
material (tem) in a comity (te)	Staff? YES		NA	VAT, or other mis		macing,	or LF)	31	Remov	e Repair	Encap	Enclose
Room 104		X		VAT			800 SF	-	X			
	-											1
Name of Reg. Waste Hauler	L	NIDEDIMO	to Herder	-10.#				Name	of Door	-4	- 4511	
See Hauler Below #1 & 2	4 7	NJDEP Was See Below	100 - 100 00000	rid#	Cubic Yards of Wast	e: 10 C						fill
Hauler #1) Greenwood Abatemen NJDEP # 12561 Hauler #2) Newark Carting, Inc., NJ DEP # 4509			Butler, 1	NJ 07405			osal Date 21/2012			Rd. Mor 19067	v Ford I	
Completed by (Print or Type) RAYMOND C. PEDALING		le ENIOR PI ANAGER		CT C	Signature	6/	2	Date N	/lay 3	, 2012		
	141	ANAGER	•			-					_	-7

State of New Jersey - Notification of Asbestos Abatement (Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

GAC Project # 060-11 Client Project # Date of Notification (1) Name of Building Owner/Operator (2) May 17, 2012 RUTGERS, THE STATE UNIVERSITY OF NJ Agencies Notified Notification Type 2012 □Initial Notification **ENVIRONMENTAL HEALTH & SAFETY DEPT.** EPA ■ Amended Notification Room 27 ROAD 1, BLDG 4086, LIVINGSTON CAMPUS DCA # should have been shown as City, State, Zip Code LICENSING X DOL PISCATAWAY, NJ 08854-"109" ■ DEP- No Longer REQUIRED Name of Contact Telephone Number ■ Emergency (including X DOH MICHAEL SMITH, ENV. justification) **HEALTH & SAFETY** ■Cancelled FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) **HURTADO HEALTH CENTER, BLDG# 3061** ☐ School (K-12) ☐ Subchapter 8 (other than K-12) Street Address X Other (i.e. private & commercial buildings, homes, etc.) **COLLEGE AVENUE CAMPUS** Sq. Feet: N/A # of Floors: 4 Bldg. Age: 60+ years City (5) County (6) County Code (7) **NEW BRUNSWICK MIDDLESEX** (State Use Only) Current Use (prior if being demolished): ACADEMIC Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Contractor (9) ATC ASSOCIATES 0098 GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address Street Address 3 TERRI LANE 268 MAIN STREET City, State, Zip Code City State, ZipCode BURLINGTON, NJ 08016 BUTLER, NJ 07405 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number **BRIAN KEARNY** 609-386-8800 973-492-0477 00840 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 05/18/12 05/21/12 ENVIROVISION, INC. Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 20-21 WARGARAW ROAD ☐ Abatement Performed Outside of Normal Facility Hours -Describe City, State, Zip Code Other - Describe: 5PM - 5AM FAIRLAWN, NJ Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure $\square \ge 3$ sf or ≥ 3 If **X**Renovation ☐ Mini-Enclosure × > 160 sf or > 260 Demolition Γ Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Location of Asbestos-Containing Is Location Normally Used Description of Asbestos Containing Material Amount Abatement Type Material (ACM) in Facility (13) Solely by Maint./Custodial (ACM) (i.e. thermal systems insulation, surfacing, (Specify SF Remove Repair Encap Enclose Staff? (12) VAT, or other miscell.) or LF) YES NO NA Room 109 X VAT 800 SF X Name of Reg. Waste Hauler NJDEP Waste Hauler ID# Name of Registered Landfill Cubic Yards of Waste: 10 CY See Hauler Below #1 & 2 See Below G.R.O.W.S. North Landfill Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 Disposal Date City, State NJDEP # 12561 100 New Ford Mill 05/21/2012 Hauler #2) Newark Carting, Inc., Newark, NJ 04509 Rd. Morrisville, Pa 19067 NJ DEP # 4509 215-736-1700 Completed by (Print or Type) Signature Date SENIOR PROJECT RAYMOND C. PEDALINO May 17, 2012 MANAGER

State of New Jersey
NOTIFICATION OF ASSESTEDS ABATEMENT CAK#1009
(Pursuant to NJAC 8:60 and 12:120)

Special Content of Pacific Vibrary Abdresses Special Address Special Address Special Amended Ame	Date of Notification (1)	12/12			Name 115	of Buildh	g Owner/Operate	A HA	EUS IN			
County (c) County Couls (7) (SYATE Current Use, (prior it being destination of the part of Control of State County (c)	Agencies Notified DBP DBP	Type Notification	•	100	10	DAY	1010 51	1111 2				
Name of Feedily When Abatement is Tailing Place (3) Since Address (I) DAY (I) Store (R-12) School (R-12) Sc	Ø DOH :	Emergency (in justification)	cluding	WAS PETTING BA	E-L Name	of Conta	eth No), WATER CO.	Telephone Munsh			-
Special Part Special	Litta	LI Cancellation		_ _	-			Appertus;	18		_	
Street Address City (5) City (5) City (6) City (7) County (7) County (7) County (7) City (8) County (8) City (8) Ci	Name of Facility Where	Abatement is Taking	Place (3)	Carr	eccan a nec	- Andrews Contra					
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Name of Monitoring Firm Misses of Abellement Consocier (9)	- EZIZA	BETH NO),					Square Feet 2500	# of Floors	1.7		e
Name of Manistrating Firm Hirred by Bulliding Owner ASCAN No. Name of Abeliament Contisation (9) No. V.C.V. I.V.	County (6)	no for			Cour	ty Code (OMLY)	7) (STATE	Current Use (IP	nor if being demolish	red)		
Street Address City, State, Zip Code City,	Name of Monitoring Firm (8)	n Hired by Building O	uner	TA	SCH	No.		ment Contractor (9				
City, State, Zip Code Project Manager for Monitoring Firm Telephone No. Telephone No	Street Address			=1=			C Proposition of the Contract					
Project Manager for Monitoring Firm Telephone No. Start Date (10) Schedulind Completion Date (11) Coccupancy Status Durling Abatement (Check duity onle) Facility Closed/Vacated Durling Entire Petiod of Abatement Abatement Performed Outside of Normal Pacifity Hours Chy State, Zip Code Chy State,	City, State, Zip Code				-		City, State, Zip		JO 0884			
Start Date (10) Couple(s) Status During Absternent (Check dilly one) Facility Closed/Vacated During Entire Period of Absternent Absternent Performed Outside of Normal Facility Hours Other - Describe: Scope of Work (Check all that apply) Sope of Work (Check all that apply) Pull Conteinment with Negative Pressure More Enclosure Chorefael Procedure Non-Exempted (1) and Non-Frieble Procedure Asbestos-Containing Material (ACM) (Disc ABATED IN Facility (13) Name of Registered Weste Heater Non-Exempted (2) and Non-Frieble Procedure Absternent (Specify (12) Yes No N/A Name of Registered Weste Heater Non-Exempted (2) and Non-Frieble Procedure Absternent (Specify (12) Yes No N/A Name of Registered Weste Heater Non-Exempted (3) Amount (Specify (12) Yes No N/A Name of Registered Landiel Non-Exempted (3) Amount (Specify	Project Manager for Mo	niloning Fam		Telep	hone	No.	Telephone No			· · ·		
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Abatement Performed Outside of Normal Facility Hours City State Zip Code	Occupancy Status Durin	ng Abatement (Chec	k daily or	ne)			Street Address	814				
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Name of Registered Weste Heater NOVALECY INL City, State OID BRINGE NO 08857 Title RESIDENT Signalure Si	Asbestos-Containing (TO BE ABA IN Facility	Material (ACM)	Mainte Cus St	enanc todial ali?	ef.		tos Containing M , thermal systems surfacing, VA	eterial (ACM) insulation, l', or	(Specify	Removal	Repair	Encapsulat
Name of Registered Weste Heater NOVALECY INC Heater DING of Waste City, State CITY Stat			Yes	No	N/A						_	6
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to the second se				-					- For 1-	1	T	

GAC# 335-12							e-2001204-00-00-0				
Date of Notification (1) May 18, 2	2012				Name of Building Owner MR. BATES	/Operator (2	1 (1)	C	F-1	<u>[]//</u>	EF
Agencies Notified EPA		Notification Initial	Notific		Street Address 124 ANDERSON P	ARKWAY	12(1			18/	
DCA DOL		□ Emerg	ency (i	tification # including	City, State, Zip Code CEDAR GROVE, N	J 07009	7 1	MAY	2 1	2012	- January o
☑ DOL ☑ DEP- No Longer REQUIRE ☑ DOH	D I	Justifi Cance	cation lled		Name of Contact GEORGE HALDEN INC.)	IAN (IRS,	Telepho		(1)	ROL &	
				FACILITY IN	FORMATION		See The State of	Serrich Care in		C	
Name of Facility Where Abatemer BATES RESIDENCE	nt is Takin	g Place (3)			Type of Facility (4) School (K-12)		S =	6 Me'	i je de Ste	4- 4-	1901 - 140°
Street Address 124 ANDERSON PARKY	VAY			1,5028908	Subchapter 8 (other that Subchapter 8 (other that Subchapter 8 (other that Sq. Feet: Unknown	mmercial bui	ldings, home	es, etc.)	o: 61		
City (5) CEDAR GROVE	unty (6) ESS	EX		y Code (7) Use Only)	Current Use (prior if bein			0.51	<u> </u>)+ yea	irs
Name of Monitoring Firm Hired by	Bldg. Ow	mer (8)	ASCM	1 No.	Name of Contractor (9)						
ENVIROVISION, INC.			009		GREENWOOD ABA	TEMENT (CONSUL	TANTS	. INC	Ĺ	
Street Address 20-21 WARGARAW ROAL)				Street Address 268 MAIN STREET						
City, State, Zip Code FAIRLAWN, NJ					City State, ZipCode BUTLER, NJ 07405						
Project Manager for Monitoring Fir	m T	Telephone N	lumber		Telephone Number		License	Numbor			
FRED LARSON		973-636-			973-492-0477		00840	ivumber			
Scheduled Start Date (10) 05/31/12		6/02/12 06/02/12	Completion	on Date (11)	Name of OSHA Monitor	_	-1				
Occupancy Status During Abate	ment (Ch	eck only o	ne)		ENVIROVISION, INC Street Address	٥.					
☐ Facility Closed/Vacated Durin				ent	Olicel Address						
☐ Abatement Performed Outsid Describe	e of Norn	nal Facility	Hours -		20-21 WARGARAW City, State, Zip Code	ROAD					
☑Other – Describe: Work Are	ea Close	ed/Vacan	t Durin	a Entire							
Period of Abatement 8:00	AM – 8	3:00 PM	. –	9	FAIRLAWN, NJ						
Source of Work (Check all that app	oly)										
≥ 3 sf or ≥ 3 lf				■ Renovation		Full Contai Mini-Enclo		Negativ	e Pres	sure	
\ge 160 sf or \ge 260				Demolition		Glovebag	Procedure	Ř.			
Location of Ashestes Containing	F 1- 1				X	Non-Exem		d Non-Fr	riable F	roced	ure
Location of Asbestos-Containing Material (ACM) in Facility (13)	Solely b Staff? (1 YES	tion Normall by Maint./Cu 12) NO	y Used stodial		pestos Containing Material nal systems insulation, surfaci cell.)	ing, (Spec	ify SF	batemen emove R			nclose
BASEMENT	X	T	147	VAT		400	ee R	3			
		1		AVI		400	or E	2			
Name of Reg. Waste Hauler	IN	JDEP Wast	e Hauler	r ID#	Cubia Vanda of Monta	4F CV	Name of	Pogiator	odlan	4611	
Newark Carting, Inc.	100	NJ DEP #			Cubic Yards of Waste:	15 CY	G.R.O.				11
Newark, NJ 04509										arram.	.
Notes: None			3		-	Disposal D 06/2/12	ate	100 Moi	y, State New F rrisville 5-736-1	ord Mi , Pa 19	100 V
Completed by (Print or Type) RAYMOND C. PEDALING		NIOR PE NAGER		т	Signature	PL	Date May	18, 20	112		
				100	fund						

Syldo	200			AC 8:60 and		2)					-	1
of Notification (1)				n Tech			6-6-	1	, ii			
5/16/12		B	0190	n leck	10164	/	Choc	The second secon	2 17	ii (7 1	i.
Type Notification		Stree	Addres	E. F	Ridge	wood	Ave	Telephone Number	e H	jl (1 1	-
Amended Amended		City,	State, Z	ip Code	1/J	0:	7652			94 P	. 0.00	1
Amendment # DOL	ding				/V V			Telephone Number	er 4	ei i	2014	
Cancellation		70	om J	Todice	- ON			-	1560			- 2
DCA Cartesians		F	ACILITY	INFORMAT	ION	Type of Fa	acility (4)	1	Last	History		
ne of Facility Where Abatement is Taking Plan 5 He Ven C. Fung	CENT	_				Scho	1 .1 0 /	Other than K-12) ate & commercial	di gent		nes.	
at Address 275 Pascack	Road					Othe etc.)		# of Floors	Bldg.			-
(5) A												
Paramus		Cou	unty Cod	le (7)		Current L	lse (Prior i	f being demolishe	d)			
unty (6) Berger		(ST	ATE USE	ONLY)		of Abatem	och och	/				
me of Monitoring Firm Hired by Building Own	er (8)	1	ASCM N	0.	Name	D Abatem	0 - < 1	VE INC	1			
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ty, State, Zip Code Mourselown NJ US Mourselown Firm	1059				1 14 1	10m/11	10 1	11.1				-
modiselown NV DE	500	Te	elephone	No.	Telep	hone No.		Election 11	357			
oject Manager for Monttoning		8	5b-84	10-8800	973	3-680	0088		90/			
mike Stocku Is	cheduled	Comp	letion Da	ate (11)	Nam	e of OSHA	Monitor					
tart Date (10) / 05/29//2		5/0	29/12		Chron	et Address						
occupancy Status During Abatement (Check C	Only One)	,	/		Street	er Vanices						
Facility Closed/Vacated During Entire Per	riod of Ab Facility H	ateme	ent		City,	State, Zip	Code					
Other – Describe: Stuffing & AM Scope of Work (Check All That Apply)						Пы	Containme	ent with Negative	Pressur	е		
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≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	M De	HORU	OH			Glov	ebag Prod	cedure d (*) and Non-Fria	ble Prod	cedure		
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		_ocatio			Descript	tion of			-	- 71		_
Location of	Used	Sole	ly by	Asbestos	Containin	a Material	(ACM)	Amount (Specify	R	R	Encapsulate	Enc
Asbestos-Containing Material (ACM) TO BE ABATED	Main	ntenar	nce/ Staff?		surfacing.	ems insula VAT, or	uon,	SF or LF)	Remova	Repair	nsdr	Enclosure
In Facility	Just	(12)		ot	ther misce	ellaneous)			val	1 = 1	late	Te
(13)	Yes	No	N/A					, 10 15	= 2	-		
104		/		WAAPT	CVT	FIHI	195	4 10 UF	X	+		1
Room 104				Trans.	te f	une/		235F				
	-		+						460			
10 July and Weste Hauter			NJDEP \		Cubic Ya	rds	Name	of Registered Land	/	A / -	00	
Name of Registered Waste Hauler			Hauler II	2061	of Waste	2	(WA	n Chemica	1 50	CVIC	25	
rICT				AND THE RESERVE OF THE PARTY OF	Disposal	Date	UILY, O		(A	14		
E[G] City, State								model (in	Data /		,	
City, State Canbuly Completed by Shacen Hendee	Title		1700			nature	1/ 1	n Chemica tate Model Co	Date	111	//2	

State of NJ

Notification of Asbestos Abatement D&S Proj. #: MS 12-180 (Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2) Date of Notification (1) 10 15 1/11 15 1/11 12 1 MIKE MOSCARA Agencies Notified Type Notification Street Address | Initial **EPA** 48 FREEMAN PLACE Amended DEP City, State, Zip Code Amendment #: LICENSING DOL Emergency NUTLEY, NJ DOH. (including Name of Contact Telephone Number justification) ☐ DCA MIKE MOSCARA Cancellation **FACILITY INFORMATION** Name of facility where abatement is taking place (3) Type of Facility (4) School (K - 12) MIKE MOSCARA Subchapter 8 (Other than K-12) Street Address Other (Private/Commercial Bldgs./Homes, etc. 48 FREEMAN PLACE Square Feet # of Floors Bldg. Age City (5) County (6) County Code (7) (State use only) Current Use (Prior if being demolished) NUTLEY **ESSEX** Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Abatement Contractor (9) D & S RESTORATION, INC. Street Address Street Address 20 California Ave. City, State, Zip Code City, State, Zip Code Paterson, NJ 07503 Project Manager for Monitoring Firm Telephone Number Phone Number License Number 973-345-8020 00159 Name of OSHA Monitor Start Date (10) Sched. Completion Date (11) D & S Restoration, Inc. 05/30/12 06/08/12 Street Address Occupancy Status During Abatement (Check only one) 20 California Avenue Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Other-Describe: NORMAL HOURS Paterson, NJ 07503 Scope of Work (check all that apply) Full Containment w/negative pressure >3 sf or >3 lf Renovation Mini-enclosure Glovebag procedure ≥160 sf or ≥260 lf Demolition Non-Exempted (*) and Non-friable procedure Is location normally used solely E Location of by maintenance/custodial e n asbestos-containing Description of asbestos-containing Amount n staff(12) m material (acm) to be (Specify SF or C material (ACM) C 0 a a abated in facility (13) LF) Yes No L N/A p e BASEMENT PIPE INSULATION 36 L FT X 29 L FT BASEMENT BARE HEATING PIPES X Registered Waste Hauler Cubic Yards of Waste Name of Registered Landfill NJDEP Hauler ID# D & S RESTORATION, INC. 13506 1 YD TULLYTOWN, RESOURCE RECOVERY Disposal Date City, State City, State

Do not use this form for asbestos licensure exempted activities. ACD 11

PRESIDENT

Title

PATERSON, NJ 07503

Completed by (Print or Type)

BOGDAN JOLDZIC

05/31/12

Signature

TULLYTOWN, PA

Date

05/15/12

D&S Proj. #: MS 12-179

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

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Date of Notification (1)	Na	me of B	uilding Owne	er/Operator (2)			***	THE STATE OF THE S			, ,				
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Agencies Notified Type Notificati	on Str	eet Addr	ess		7		. OF AT				-				
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Amendment #:	Cit	y, State,	Zip Code			į.		er langer							
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justification)		A NIDDI	EW GRISA	A ET					20						
Cancellation		ANDR					î	==							
N			FACI	LITY INFORM	ATION										
Name of facility where abatement is	taking place	e (3)					Type of Facility School	(4) ol (K - 12))						
ANDREW GRISAFI								apter 8 (0		nan K	-12\				
Street Address								(Private/C			-12)				
190 RIDGEWOOD AVENUE	2						Bldgs.	/Homes, e	etc.						
City (5)	County	(6)					Square Feet	# of Floo	rs	В	dg. A	ge			
City (5)	County	(0)				County Code (7) (State use only) Current Use (Prior if being demolished)									
GLEN RIDGE	ESSE	EX			(Olai	te use only)	Current Use (F	rior if beir	ng dem	olish	ed)				
Name of Monitoring Firm Hired by B	Bldg. Owner	(8)	T	ASCM No.		Name of Abatement Co	ntractor (9)				-				
						D & S RESTORAT									
Street Address						Street Address									
						20 California Ave.									
City, State, Zip Code					-	City, State, Zip Code			-		-				
						Paterson, NJ 0750)3								
Project Manager for Monitoring Firm		P	hone Numbe	er	-	Telephone Number		License	Numb	er		-			
					- 11	973-345-8020			0159						
Start Date (10)	Sched.	Complet	on Date (11			Name of OSHA Monitor									
05/16/12				•		D & S Restoration	, Inc.								
Occupancy Status During Abatement	05/31/					Street Address		20				12000			
Facility closed/vacated during	on the control of the		ment			20 California Aven	iue								
Abatement performed outside						City, State, Zip Code									
Describe: NORMAL HO					-11	Determen NI 0750	.2								
					- 11	Paterson, NJ 0750									
Scope of Work (check all that apply ≥ 3 sf or ≥ 3 If						- Breeze	l Containment v	v/negative	press	ure		8			
	Renovation					Brown S.	ni-enclosure ovebag procedu	re							
≥160 sf or ≥260 lf	Demolition			Re-costs times and the state of			n-Exempted (*)		friable	proce	edure	ı			
Location of	Is location r		used solely						R	R	E	E			
asbestos-containing material (acm) to be	staff(12)	arrocrous	nociai			sbestos-containing	Amount (Specify S	SE or	m	e p	n	n			
abated in facility (13)	Yes	No	N/A	material (/	ACIVI)		LF)	51 01	O V	a	а	L			
			1						e	r	р				
BASEMENT,GARAGE,ATTIC		X		PIPE INSU			350 L FT								
BASEMENT		X		HOT WATI	ER TA	ANK INSULATION	80 SQ FT								
BASEMENT		X		BARE HEA	TINC	PIPES	200 L FT				\boxtimes				
Registered Waste Hauler D & S RESTORATION, INC.	NJDEF 1350	Hauler 6		ibic Yards of V 0 YDS	/aste	Name of Registered La TULLYTOWN, RF		COVE	v						
City, State			Disposal D			City, State	BOOKCE KI	COVE	<u> </u>						
PATERSON, NJ 07503			05/21/12			TULLYTOWN, PA	A								
	Title		1	Signature		1		Date							
BOGDAN JOLDZIC	PRESIDE	NT		4				05/15	/12						
ASR-41 *	Do not use t	his form	for asbesto	s licensure exe	mnted	activities		1							

State of NJ Notification of Asbestos Abatement

D&S Proj. #: MS 12-179			(Pursu	ant to NJAC	8:60	and 12:120)					,	
104247					20 112	•		roved	0a:	wlanc		
Date of Notification (1)	- II	Name of B	uilding Own	er/Operator (2)			NJ Dept of Hea	CII & ORBI	ni of	¥1668		·
0 15 1/1 15 1/11 12			W GRISA				[S	onature)	dilla	1000		1
Agencies Notified Type Notifice	ition 1	Street Add		And the state of t			Date:	for the		2.000		
DEP Amended		190 KII	JGEWOO	DAVENUE		1		9 1	·onst	1		1
Amendment #		City, State,	Zip Code		A		Lad Tank				State -	i i
Ma Emergency			RIDGE, N	IJ.		9				l meneral rungs	i.	1
DOH (including justification)	lame of Co	netect				Telephor	e Numbe	THUL	U		
DCA Cancellation	n 📗	ANDR	EW GRIS.	AFI				- A	,	IN STREET, SHALL	ensus market t	cante ²
			FAC	ILITY INFORMA	ATION	1		The state of the s	a real support			
Name of facility where abatement	is taking pl	ace (3)					Type of Facility				-	
ANDREW GRISAFI							arrests.	K-12)		h 1.	40)	
Street Address				The same of the sa	A CHINAL L		The Latter of the Control of the Con	apter 8 (0 (Private/0				
190 RIDGEWOOD AVENU	TE.						Bldgs.	Homes, e	etc.		_	
City (5)		nty (6)			Cou	nty Code (7)	Square Feet	# of Floo	rs	В	ldg, A	ge
OF EN PER CE						te use only)	Current Use (P	rior if bein	g den	nolish	ed)	
GLEN RIDGE Name of Monitoring From Hinsel by		SEX		<u> </u>	-		<u> </u>	upon borney				
A COUNTY OF THE PARTY OF THE PARTY OF THE	Paralli r avesa	nt (e)	The state of the s	ASCM No.		Name of Abatement Co						
Street Address	***				-	D & S RESTORAT	CION, INC.			-		
						20 California Ave.						
ity, State, Zip Code						City, State, Zip Code	-		-	-		
						Paterson, NJ 0750	3					
Project Manager for Monitoring Firm	n	P	hone Numb	er		Telephone Number	X 200 100	Licensa				
			7			973-345-8020	C F Madder of the Control		0159			
Start Date (10)	Sched	t. Complet	ion Date (11			Name of OSHA Monitor D & S Restoration						
05/16/12	05/3	1/12		× .		Street Address	, IIV.			-		Musi-da 1
Occupancy Status During Abateme	ni (Check o	inly one)			District.	20 California Aver	iue					
Facility closed/vacated during Abatement performed outside	entire peri of normal	od of abad facility bou	ement.			City, State, Zip Code				-		The state of the s
Describe: NORMAL F		· · · · · · · · · · · · · · · · · · ·			-	No. 1. 217 APREC						
Scope of Work (check all that appl	at the last the same of the sa	-			<u>- U</u>	Paterson, NJ 0750						
☐ >3 sf or >3 lf	Renovatio	sn.				ar ma	i Contzinment w hi-enclosure	/negative	press	ure		
≥160 af or ≥260 lf	Domolitica					☑ Gid	vebag procedu					1
Location of	Is location	normally	used solely			· LING	n-Exempted (*)	and Non-	Mable	Proc	Sure	1
asbestos-containing material (acm) to be	staff(12)	nonoo/out	stodial	Description	of as	sbestos-containing	Amount		A m	8	n	E
abated in facility (13)	Yes	No	N/A	material (A	(CM)		(Specify S	For	0	9	c	0
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egistered Waste Hauler D & S RESTORATION, INC.	NJDF 135	P Hauler		ubic Yards of W 0 YDS	asto	Name of Registered La	ndfill		1	how		12-1
ity, State			Disposal Da			TULLYTOWN, RE	SOURCE RE	COVER	Y			
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ompleted by (Print or Type) BOGDAN JOLDZIC	Titles .			Signaturo	-		·	Date		COLUMN TO	-	
	PRESID:	70.000000000000000000000000000000000000	for select	n llannar				05/15/	12		dermone	2000

24789

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

STEVENS ENVIRONMENTAL SERVICES INC CHECK # 24789

5) 5/16/12			INAII	ile of Buildi	ing Owner/Operato	Barbara Hu		F	1- N	7 [
Agencies Notified EPA	Type Notifica	tion		Stre	et Address	S	1 1 1	7		1 1//	
DEP	Initial Amended			City	State 7	Code	7 Skyfield Di				
M DOL	Amendme	nt #_	ina	City,	, State, Zip		rinceton, NJ 0	MAY 8540	2 1	20	12
DOH DCA	justification Cancellation	on)	9	Nam	ne of Conta			Telephone Nu	mber	W. hashan me a	ile.
				F/	ACILITY IN	FORMATION		L. Fi.	CINAR	¥17	Name and
Name of Facility Where		7.0		1 Comment		7110	Type of Facility	(4)		-,	 -
Street Address	R	Residen	ice				School (K-12	2)	4.00		
offeet Address	7 Sk	yfield	Drive	3			Other (i.e., p	8 (Other than K- rivate & comme	12) rcial b	uilding	JS.
City (5)	7 5 8	ymera	DIIVC				homes, etc.) Square Feet	# of Floors			
	P	rinceto	on				3000	1		Bldg.	50
County (6)	Mercer			Cou	unty Code (E ONLY)	(7) (STATE	Current Use (Pri	or if being demo			30
Name of Monitoring Firm	n Hired by Buildin	ng Owne	r	ASCM	1 No.	Name of Abatem	ent Contractor (9)				
	MECS						ens Environn		ces.	Inc.	
Street Address	DO D					Street Address					
City, State, Zip Code	PO Box 3	541						ox 322			
100 - 100 -	rosswicks, N	J 0851	5			City, State, Zip C		, NJ 08501			
roject Manager for Mor		- 5551		ephone	No.	Telephone No.	Anemown	License No.			
William W	eisgarber Jr.		10000000		8-4070	(609) 25	9-9688		0049	93	
tart Date (10)	Sc	heduled (Comple	tion Da	ate (11)	Name of OSHA M					
6/25/12			7/6/1	2			MI	ECS			
occupancy Status Durin Facility Closed/Vacate				mont		Street Address	DO D	241			
Abatement Performed	d Outside of Norr	nal Facili	ity Hou	rs	+	City, State, Zip Co	PO Bo	DX 341			
Other - Describe: 8	3AM - 4:30P	M		4.5		3.3, 3.0.0, 2.p 00		, NJ 08515			
cope of Work (Check a	Il that apply)										_
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4-400 -5 -000 11		☐ De	emolitio	n		Glovebag	Procedure mpted (*) and Non-	F:			
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]≥160 sf or <u>≥</u> 260 lf			Locatio					-Friable Procedu	T	Abate	men
Location o		N	Locatio ormally d Solely					Friable Procedu	T	Abate Typ	
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Location of Asbestos-Containing M TO BE ABATI IN Facility (13) basement ba	nt Hauler Hental Service	N Usec Mair Cu	ormally if Solely intenancustodial Staff? (12)	N/A N/A N/A	/aste No. 92	Description of os Containing Mate thermal systems ins surfacing, VAT, cother miscellaneous floor tile Cubic Yards of Waste 6 CU Disposal Date	rial (ACM) sulation, or s)	Amount (Specify SF or LF)	Removal	Тур	ре
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