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Date of Notificatio	n /1) 5/10/12		INT	(D)						
	Type Notification	n	Genon	of Building Own	ner / Operator	(2)		,	J. 30 11	inspirer.
Agencies Notified X EPA		gency Notificatio	Street A	Address x 3795					S CONTROL	S
X DEP X DOL	TA POSSIBLE CONTRACTOR	Notification ided Notification		ate & Zip Code on, TX 77253					Later Co.	
X DOH DCA		ellation	Name o	f Contact					Telephor	ne Number
				ILITY INFOR	RMATION					-
Name of Facility V	Vhere Abateme	nt is Taking Plac			Type of Facilit	v (4)				
	Gill	bert Plant	, , ,		School (K	(-12)				
Street Address	315 Ri	egelsville Rd			X Other (i.e.	., privat		12) cial build		
City (5)		County (6)	County Co		Square Feet 50,000	#	of Floors		Bldg. Age	
Milfo		Hunterdon		,	Current Use (F	Prior if b		shed)		60
Name of Monitorin Environmental	g Firm Hired by Tactics, Inc	Building Owner	(8)	ASCM No.	Name of Abate	ement (Contractor (9 Services.) LLC		
Street Address 64 Broad Street					Street Address 143 Schoolh	ouse l	Road			
City, State & Zip C Matawan, NJ 07	747				City, State & Z					
Project Manager for Fom Geiger		1 27	elephone N 32-290-22	umber 7	elephone Nui 32-605-906	mber	, 00001	License	Number 0071	4
Scheduled Start D 5/29/1		Scheduled Compl 5	etion Date /30/12		Name of OSHA			LLC		•
Occupancy Status Facility Clo	sed/Vacated D	uring Entire Perio	od of Abate	ment 4	Street Address	6		32		
Abatement	Performed Ou Area Isolate	tside of Normal F ed During Aba	acility Hou	rs -	City, State & Z Monroe Tow	ip Code			n D	
Scope of Work (Ch Demolition		oly) X Renovation			Full	l Contai	nment with I	Negative	Pressure	
	ect ≥ 3 SF or ≥ 3 ≥ 160 SF or ≥				Min Glo	i-Enclos vebag l	sure Procedure			
	ocation of	ZOO EL ACIVI	Is Location		Description		on-Friable	nount	Abator	nent Type
Ma <u>TO</u>	stos-Containing terial (ACM) <u>BE ABATED</u> in Facility (13)	М	ormally Use Solely by aintenance ustodial Sta (12)	or (i.e	sbestos-Conta Material (ACI e., thermal sys lation, surfacir ther miscellar	aining M) stems ng, VAT	(Sp Squa	pecify are Feet or ar Feet)	(Specify Repair, E	r: Removal, ncapsulation nclosure)
	Vacant Offic	ce	N/A	Tra	nsite Wall P	anels	12	0 SF	Re	moval
Iomo of Daniel	-110/									
lame of Registere	nt Services,	LLC		Hauler ID # 2401	Cu. Yds. o	of Wast 5	e Name	of Regi	stered Lan	dfill
ity, State Nonroe Twp, NJ	08831	3			Disposal I	Date 30/12	City, S) ₂	
ompleted By (Prir Dominick Tri	it or Type)	Title Pres.			Signature Domin			town, I	d	Date 5/19/12

- 2674 -	(Pu	rsuant t	o NJAC 8	:60 and 1	12:120)	HUZT	· · · · · · · · · · · · · · · · · · ·				
Date of Notification (1) 05/21/12 Ck# 2079 \$200			Building O				d. -	MAY 2	<u>a</u> 20	12		
Agencies Notified Type Notification	1.00	Street Ad 44 Blac	dress kburn R	Road				120123224	SAMERA		.1	1
EPA X Initial DEP Amended X DOL Amendment #			e, Zip Cod t, New J		7901			LICEN		t. C/		
Emergency (including justification) DCA Emergency (including justification) Cancellation	N		Contact					Telephone Nu	mber	i		
		FACIL	ITY INFO	RMATIO	N						ger.	
Name of Facility Where Abatement is Taking Place (3) Oak Knoll School of the Holy Child, Connelly	y Hal	I				×s	f Facility (4) chool (K-12)					
Street Address 44 Blackburn Road						F O		(Other than K-1 ate & commerc		dings,	home	s,
City (5) Summit, New Jersey 07901						Square 20,00	Feet	# of Floors 2		ldg. A 5+	ge	
County (6) Bergen		County C	ode (7) ISE ONLY)		_	Curren	7.7	f being demolis	shed)			
Name of Monitoring Firm Hired by Building Owner (8) Birdsall Services Group		ASCM	No.	- 4			ement Contra oration	actor (9)				
Street Address 65 Jackson Drive		I		31.0		Address McBric	s le Avenue			1)		
City, State, Zip Code Cranford, New Jersey 07016						tate, Zip dland		Jersey 074	24			
Project Manager for Monitoring Firm Mike Kruppa		Telephon	ne No. 7-8900			orle No 225-84		License 01104	No.			
Start Date (10) Scheduled 06/15/12 06/18/12		pletion D	Date (11)				A Monitor Inmental L	abs LLC				
Occupancy Status During Abatement (Check Only One	ð					Addres	s e 22 West					
Facility Closed/Vacated During Entire Period of At Abatement Performed Outside of Normal Facility I Other – Describe: 7AM Start		ent		-	10500	tate, Zip	o Code v Jersey 0	7083				
Scope of Work (Check All That Apply)	******					·						
≥3 sf or ≥3 lf	enovat emoliti		53 52 52			Mini Glo	i-Enclosure vebag Proce	t with Negative dure *) and Non-Fria			e	
Isl	ocatio	on				-				Abate	ement	
Location of Used Asbestos-Containing Material (ACM) TO BE ABATED Mair	ormall Solel ntenan odial S (12)	y ly by nce/		Desc tos Conta thermal s surfaci other mi	ystem ng, VA	Material s insula T, or		Amount (Specify SF or LF)	Removal	Repair	e Encapsulate	Enclosure
· Boiler Room x	140	INA	0	&M TS	l Wra	p & Cı	ut	150 LF	X			
	, P			_	01.00 (
Name of Registered Waste Hauler	1 1 1 2 2 2	JDEP W		Cubic Y			Name of R	egistered Land	fill		1	
Lilich Corporation		auler ID 3724	No.	of Wast				/.S Landfill				
City, State Woodland Park, New Jersey 07424	N			Disposa 06/19/	12		Contract Con	e, Pennsylv				
Completed by Title Tatiana Kalenikova Vice F	Presi	dent		Si	gnatur	Pea	un ta		Date 05/21/	12		

Date of Notification (1)	-2//					Operator (2)	22.0					(constitution	-
5-4-2012				S.E 7	'G		[]1	1 45 5	1.7				
Agencies Notified Type Notification				Address	11.		0				1	71	-
EPA Initial		-	70	00 1	HAL	DLEY	KOA	Δ				111	
DEP Amended Amendment #	ŧ	1	City, Sta	ate, Zip Co	Dide D	AINFIE		117 2	100	71		1 1	
Emergency (ii		-	Name o	f Contact	PL	AINFIE	LD,	N J O	100	-			
X DOH justification) X DCA Cancellation		- 1			-, 1 -	THOMAS	1	Telephone	Numb	er	-3		,
			FAC	LITY INFO	ORMAT	TION	·	1			-	9	
Name of Facility Where Abatement is Taking	Place (3)						of Facility	(4)			•		-
PS6+G							School (K-						
Street Address	/	7,					Subchapte Other (i.e.	r 8 (Other than private & comn	K-12)	huila	linas	ham	
CORNER OF TRENTON	9(11	110	N			etc.).						35,
City (5)			,				re Feet	# of Floors		В	ldg. A	ge	
ELIZABETH County (6)		- (Country	Code (7)			x. 8000			A	PPX	65	YRS
UNION				USE ONLY)			Swit	ior if being dem	TAT		. 1		20
Name of Monitoring Firm Hired by Building O	wner (8)		ASCN	/ No.		Name of Aba		ntractor (9)	IHI	10	\mathcal{L}	_	
Environmental Tactics			0045					S OF AMER	RICA				
Street Address		10.27	1			Street Addre	SS						
64 Broad St	Management					396 WHIT		AVE					
City, State, Zip Code Matawan, NJ 07747						City, State, Z		1.00000					
Project Manager for Monitoring Firm		т-	F-1b-	51		SOUTHR							
Tom Geiger			Telepho 732-29	ne No. 90-2217		Telephone N 732-432-8		0111	se No. 1				
Start Date (10) 5-21-2012				Date (11)		Name of OSI		S OF AMER	DICA	112-94-5			
Occupancy Status During Abatement (Check	Only One	メ <u>ラ</u>	-0.0	012		Street Addre		3 OF AMER	CICA	-			
Facility Closed/Vacated During Entire Pe			ont			396 WHIT		AVE.					
Abatement Performed Outside of Norma	I Facility	Hours	- CANA	-	1	City, State, Z	ip Code						·
Other - Describe: Nacated as	cept	for	aux	lener	Z	SOUTHR	RIVER, N.	J 08882					
Scope of Work (Check All That Apply)													<u> </u>
≥3 sf or ≥3 lf	Management .	enovat						ent with Negat	ive Pre	ssur	е		
≥160 sf or ≥260 lf		emoliti	on .				ni-Enclosur ovebag Pro						8
				·				d (*) and Non-l	Friable	Proc	cedur	e ·	
		Locatio					9 1			3		ement	t
Location of		ormali i Solel				escription of			-	-	13	ре	
Asbestos-Containing Material (ACM) TO BE ABATED	Mair	ntenan	ice/			ntaining Materia al systems insula		Amount (Specify		20	_	m	m
In Facility (13)	Custo	dial S (12)	tatr?	·	surfa	acing, VAT, or		SF or LF)		Removal	Repair	caps	Enclosure
(13)	\	No	N//0		outer	miscellaneous)				val	₩.	Encapsulate	sure
2 (10.0 +0.1.0	Yes		N/A	Λ.σ.				24					
2ND FIR. CONTROL ROOM		$\frac{7}{\times}$				OOR PANE	ELS	3205		×			
outside		X		Hen	1 5	OCK		3 LF	:)	X			
		4											
Name of Registered Waste Hauler		1000	JDEP Wauler ID		of Wa	Yards aste	1	Registered Lar					
WASTE MANAGEMENT			25			15	GROW	S NORTH	1.				
City, State /						sal Date	City, Stat						
Completed by	Title				£ -6	23-2012		SVILLE, PA					
CAROL RAIMO	Title OFF.	05	MA	. 0	1	Signature	00		Date	. (1-1	018	,
CANOL FAILED	OFF	-6	1.10	~		Lars	x Xa	imo	9	7	0	010	٠ا

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Date of Notification (1) original	el)	T	_	f Building		Operator	(2)	1 - 1 - 1			-	123		
Agencies Notified Type Notification	12)		Street A	44.000			317	^						-
EPA Initial Amended			City Sta	100 /	HAD	LE)	ب ٧	ROA.	9					
DOL Amendment			Sou	TH	PLA	4 in F	iEL	Δλ	JJ	070 phone Nur	80			
Emergency (in justification)	nciuoing		Name of	f Contact		T / /			Tele	phone Nur	nber		r	
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Name of Facility Where Abatement is Taking	Place (3)			***************************************		Emiles .	f Facility (200					
Street Address		<u> </u>					S		8 (Othe	r than K-12			7.0	
CORNER OF TRENTON) 4 (26	FTO	N			et	tc.)		commerci				ıs,
ELIZABETH							Square A DD R	e Feet 4. 8000	1000000	Floors		ldg. A معم	.ge 65	100
County (6)				Code (7)			Curren	t Use (Prid	or if bein	g demolish	ned)		63	YES
UNION Name of Monitoring Firm Hired by Building C	wner (8		ASCN			Name		ement Cor		STA	7:0	N	-	
Environmental Tactics	wher (o	,	0045							MERIC/	A			
Street Address 64 Broad St							Address	HEAD A	AVE					
City, State, Zip Code						City, S	state, Zip	Code						
Matawan, NJ 07747						1		VER, NJ	0888					
Project Manager for Monitoring Firm Tom Geiger			Telepho 732-29	ne No. 90-2217	* * * *	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	none No. 432-83			License N 01111	0.			
				Date (11)				A Monitor	S OF /	AMERICA	۸ .			
5-21-2012 Occupancy Status During Abatement (Check			-20	012			Address		3017	AIVILITIO/				
Facility Closed/Vacated During Entire P							BURGE WALKING	HEAD A	AVE.					<u></u>
Abatement Performed Outside of Norm Other – Describe: Wacated 2	Leg ?	y Hours	ales	temen	t	V	State, Zip ITH RI	VER, N.	0888	2				
Scope of Work (Check All That Apply)														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit						Containm		Negative F	ressu	re		
						×		ebag Prod Exempted		l Non-Friat	ole Pro	cedur	e	
		s Locati			70	÷							ement	Į.
Location of Asbestos-Containing Material (ACM)	Us	Normal ed Sole	ly by	Asbes		escription		(ACM)	Aı	mount		1		
TO BE ABATED In Facility		aintenai stodial S		(i.e.	surfa	I systems	T, or	tion,		pecify or LF)	Remova	Repair	Encapsulate	Enclosure
(13)		(12)	Т	-	other	miscellar	neous)				oval	air	sulate	sure
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2ND FIR. CONTROL ROOM	-	X	-			OOR		Ls		OSF 3LF	×			-
outside				1701	1 3	OUR) Lr	1			
Name of Registered Waste Hauler			JDEP W		Cubic of Wa	Yards ste			100	red Landfill				
WASTE MANAGEMENT	1	1	125		Diana	15		GROW City, Stat			- V			
City, Citato					-	sal Date	1			F D.				
ELIZABETH, NJ					.5/	221	12	MORRI	SVILL	E, PA				

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

B & G proj. #: 2012-89

Signature Proper Manager for Montering Firm Head by Bidg. Owner (9) ASCM No. In/a Denville, NJ 07834 Morris Street Address Denville, NJ 07834 Morris Street Address Denville, NJ 07834 Morris Denville, NJ 07834 Morris Denville, NJ 07834 Morris Denville, NJ 07834 Morris Denville, NJ 07834 Denville, NJ 07835	Date of Notification (1)							1 10 10 10 10 10 10 10 10 10 10 10 10 10			1 1/5		
Signature (Contact Proposition	1947		Name o	of Building C)wner/Operator ((2)		(_l_l_)	1	iv.			哥
EPA			11										
DEP Initial 122 Diamond Spring Road City Site. 26 Code Denville, NJ 07834 Name of Contact Richard Soutder Street Address Street Address Street Address Street Address Denville, NJ 07834 Name of Contact Street Address Street Address Street Address Street Address Street Address Denville, NJ 07834 Name of Contact Street Address Street Add		tification			icitiai Commit	anny					V ₂ A	ij	4.1
Denville, NJ 07834 Name of facility where abatement is taking place (3) St. Francis Residential Community (non sub 8) Steel Address 122 Diamond Spring Road Coty (b) Denville, NJ 07834 Morris Street Address 123 Diamond Spring Road County Code (7) State use only) Denville, NJ 07834 Morris Street Address 124 Diamond Spring Road County Code (7) State use only) Denville, NJ 07834 Morris Street Address 105 Ryerson Road City, State, Zip Code Lincoln Park, NJ 07035 Scheduled Start Date (10) Scheduled Start Dat	In	itial	122 [Diamond S	pring Road								1
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DCA	⋈ DOH				7834			WITH VEHICLES	4	-	and the same	ilangera.	at second
Richard Scuader FACILITY INFORMATION	□ DCA □ Ca	ncellation	Name of	Contact				Tele	phone Nur	nber			-
Street Address City, State, Zip Code Project Manager for Monitoring Firm Phone Number Scheduled Start Date (10) Froject Manager for Monitoring Firm Phone Number Project Manager for Monitoring Firm Phone Number Scheduled Start Date (10) Scheduled Start Da			Rich	ard Scudde	er			,1		7			
Sit Prancis Residential Community (non sub 8) Stoed Address 122 Diamond Spring Road City (5) Denville, NJ 07834 Morris Name of Monitoring Firm Hired by Bidg. Owner (8) Name of Monitoring Firm Hired by Bidg. Owner (8) Street Address Diffy, State, Zip Code City, State, Zip Code City, State, Zip Code Froject Manager for Monitoring Firm Phone Number Project Manager for Monitoring Firm Phone Number Project Manager for Monitoring Firm Phone Number Scheduled Start Date (10) Sched. Completion Date (11) St/14/2012 Scheduled Start Date (10) Sc	Name of facility			FA	CILITY INFORM	MATI	ON	75			_	_	
Streat Address City (5) Denville, NJ 07834 Name of Monitoring Firm Hired by Bidg. Owner (8) Street Address	ivarne of facility where abatem	nent is taking	place (3)					Type of Fac	ility (4)				
Subchapter 8 (Other than K-12)	St Francis Residential Con	mmunity (r	ion sub 8	1						12)			
City (6) County (6) Count	Street Address		.011 540 0					☐ Su	bchapter 8	3 (Othe	er than	K-1	2)
City (5) Denville, NJ 07834 Morris Name of Monitoring Firm Hired by Bidg. Owner (5) Street Address Street Address City, State, Zip Code Project Manager for Monitoring Firm Phone Number Phone Number Phone Number Phone Number Phone Number Phone Number Project Manager for Monitoring Firm Phone Number Project Address Street Address Ios Rystron Road City, State, Zip Code Lincoln Park, NJ 07035 City State Project Manager for Monitoring Firm Phone Number Project Manager for Monitoring Firm Ph	122 Diamond Suriage D							⊠ Ot	her (Privat	e/Com	merci	al	50 -
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Name of Monitoring Firm Hired by Bldg. Owner (8) Street Address City, State, Zip Code City, State, Zip Code Project Manager for Monitoring Firm Phone Number Project Address 105 Ryerson Road City, State, Zip Code Lincoln Park, NJ 07035 Licans Number 105 Ryerson Road City, State, Zip Code Lincoln Park, NJ 07035 Pull Containment winegative pressure Mini-enclosure Mini-enclos	Oity (5)	C	ounty (6)						1 " 011	10015		Diag	. Age
Name of Monitoring Firm Hired by Bidg. Owner (8) ASCM No. n/a Name of Abatement Cerefacility (non sub 8) Name of Abatement (no. Street Address 105 Ryerson Road City, State, Zip Code Lincoln Park, NJ 07035 Telephone Number 973-696-6869 937-8 Name of OSHA Monitor 8 & G Restoration, Inc. Street Address 105 Ryerson Road City, State, Zip Code Lincoln Park, NJ 07035 Telephone Number 973-696-6869 937-8 Name of OSHA Monitor 8 & G Restoration, Inc. Street Address 105 Ryerson Road City, State, Zip Code Lincoln Park, NJ 07035 Telephone Number 973-696-6869 937-8 Name of OSHA Monitor 8 & G Restoration, Inc. Street Address 105 Ryerson Road City, State, Zip Code Lincoln Park, NJ 07035 Full Containment winegative pressure City, State, Zip Code Lincoln Park, NJ 07035 Telephone Number 973-696-6869 937-8 Name of OSHA Monitor 8 & G Restoration, Inc. Street Address 105 Ryerson Road City, State, Zip Code Lincoln Park, NJ 07035 Full Containment winegative pressure City, State, Zip Code Lincoln Park, NJ 07035 Non-friable procedure Non-friable procedure Non-f	Denville, NJ 07834	l N	Anrris			(5	State use only)	Current Use	e (Prior if b	eing d	_l _ emolis	shed')
Street Address City, State, Zip Code Project Manager for Monitoring Firm Phone Number Scheduled Start Date (10) Scheduled St	Name of Monitoring Firm Hired	by Bldg. Ov	vner (8)		I ASCMAN		I INC. CAL	Health car	e facility	(non	sub 8)	No.
Street Address City, State, Zip Code Froject Manager for Monitoring Firm Phone Number Scheduled Start Date (10) Sched. Completion Date (11) 5/14/2012 Sczy 2012 Scheduled Start Date (10) Facility closed/vacated during entire period of abatement. Abatement performed outside of normal facility hours- Describe: Other-Describe: Demolition Renovation Scope of Work (check all that apply) Demolition Renovation Scope of Work (check all that apply) Location of asbestos-containing material to be abated in facility (13) Renovation Room A Room A Room A Room C Registered Waste Hauler Registered Waste Hauler Registered Waste Hauler Base C Restoration, Inc. Street Address 105 Ryerson Road City, State, Zip Code Lincoln Park, NJ 07035 Full Containment winegative pressure Mini-enclosure Signature Si													
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Project Manager for Monitoring Firm													
Lincoln Park, NJ 07035	City, State, Zip Code					_		d		_			
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Scheduled Start Date (10) Sched. Completion Date (11)							and the same of th				nber		
Occupancy Status During Abatement (Check only one) Facility closed/vacated during entire period of abatement. Abatement performed outside of normal facility hours- Describe: Other-Describe: Demolition Renovation ≥3 sf or >3 if ≥160 sf or ≥260 if Location of asbestos-containing material to be abated in facility (13) abated in facility (13) Room A Room B	Scheduled Start Date (10)	Sche	ed. Comple	tion Date (1	1)		Name of OSHA Monito	or	- 0071				
Scope of Work (check all that apply) □ Demolition □ Renovation of asbestos-containing material to be abated in facility (13) Room A □ □ N/A □ □ N/A □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □		5/2	3/2012	X		1		n, Inc.					
Abatement performed outside of normal facility hours-	Occupancy Status During Abater	ment (Check	only one)				The second secon						
Describe: City, State, 2ip Code City, State City, S	Facility closed/vacated duri	ing entire ne	riod of obe	tement.				i					
Other-Describe: Lincoln Park, NJ 07035	LI Abatement performed outs	ide of norma	I facility ho	urs-			City, State, Zip Code						
Demolition	Other-Describe:					-	Lincoln Park NIL	07025					
Full Containment w/negative pressure Societion of asbestos-containing material to be abated in facility (13) Societion for procedure Societio	Scope of Work (check all that ap	ply)					Emcom rark, NJ	37033					
Location of asbestos-containing material to be abated in facility (13) Room A Room B Room C Room	☐ Demolition ☐	Renovati	on			M.	Full Containment	•					
Location of asbestos-containing material to be abated in facility (13) Room A Room B Room C Room C Registered Waste Hauler B & G Restoration, Inc. City, State Lincoln Park, NJ 07035 Completed by (Print or Type) Gordana Luna Is location normally used solely by maintenance/custodial staff(12) Description of asbestos-containing material (ACM) Poper insulation Description of asbestos-containing material (ACM) NAMOUNT (Specify SF or D on D	☐ > <u>3</u> sf or > <u>3</u> If		>260 If					tive pressure					
asbestos-containing material to be abated in facility (13) Room A Room B Room C Room C Registered Waste Hauler B & G Restoration, Inc. City, State Lincoln Park, NJ 07035 Completed by (Print or Type) Gordana Luna Description of asbestos-containing material (ACM) Amount (Specify SF or LF) Description of asbestos-containing material (ACM) Pipe insulation 30 If Description of asbestos-containing material (ACM) Pipe insulation 30 If Description of asbestos-containing material (ACM) Pipe insulation Could Park (ACM) Pipe insulation Description of asbestos-containing material (ACM) Pipe insulation Could Park (ACM) Pipe insulation Description of asbestos-containing material (ACM) Pipe insulation Could Park (ACM) Pipe insulation Description of asbestos-containing material (ACM) Pipe insulation Could Park (ACM) Pipe insulation Description of asbestos-containing material (ACM) Pipe insulation Could Park (ACM) Pipe insulation Description of asbestos-containing material (ACM) Pipe insulation Could Park (ACM) Pipe insulation Could Park (ACM) Pipe insulation Description of asbestos-containing material (ACM) Pipe insulation Could Park (ACM) Pipe insulation Could Park (ACM) Pipe insulation Description of asbestos-containing material (ACM) Pipe insulation Could Park (ACM) Pipe insulation Could Park (ACM) Pipe insulation Description of asbestos-containing material (ACM) Pipe insulation Could Park	Location of	Is location	n normally	used solely		Δ,	wiin-enclosure		Non-	friable	proce	dure	
Room A Room B Room C Room C Registered Waste Hauler B & G Restoration, Inc. NJDEP Hauler ID# Cubic Yards of Waste Lincoln Park, NJ 07035 Disposal Date Lincoln Park, NJ 07035 City, State Lincoln Park, NJ 07035 Title Gordana Luna Treasurer Clockman Suna Conductor	asbestos-containing	by maint	enance/cu	stodial		of o	obsets			200	1000000	18 85	E
Room A Room B Room C Room C Registered Waste Hauler B & G Restoration, Inc. City, State Lincoln Park, NJ 07035 Completed by (Print or Type) Gordana Luna LF) V a a a c v v v v v v v v v v v v v	abated in facility (13)		T	Т	material (A	CM)	spesios-containing		SF or	m	1000		n
Room B Room C Room C Room C Room C Registered Waste Hauler B & G Restoration, Inc. City, State Lincoln Park, NJ 07035 Completed by (Print or Type) Gordana Luna Room B Registered Waste Hauler ID# Disposal Date Signature Si		res	No	N/A							a		L
Room C Room C Room C Registered Waste Hauler B & G Restoration, Inc. City, State Lincoln Park, NJ 07035 Completed by (Print or Type) Gordana Luna Pippe insulation pipe insulation posf Cubic Yards of Waste Name of Registered Landfill Tullytown Resource & Recovery Center City, State Tullytown, PA Completed by (Print or Type) Gordana Luna Completed by (Print or Type) Title Treasurer City, State Tullytown, PA Completed by (Print or Type) Title Treasurer City, State Tullytown, PA Completed by (Print or Type) Title Treasurer City, State Tullytown, PA Completed by (Print or Type) Title Treasurer City, State Tullytown, PA Completed by (Print or Type) Title Treasurer City, State Tullytown, PA Completed by (Print or Type) Title Treasurer City, State Tullytown, PA Completed by (Print or Type) Title Treasurer City Completed City	A CONTRACTOR OF THE PARTY OF TH				pipe insulation	on .		30.1f			r	P	_
Registered Waste Hauler B & G Restoration, Inc. Disposal Date Lincoln Park, NJ 07035 Completed by (Print or Type) Gordana Luna Treasurer Close					pipe insulatio	n						Щ	14
Registered Waste Hauler B & G Restoration, Inc. City, State Lincoln Park, NJ 07035 Completed by (Print or Type) Gordana Luna Lincoln Park Completed by (Print or Type) Completed				X	pipe insulatio	n					片	븪	부
Registered Waste Hauler B & G Restoration, Inc. Output Disposal Date Lincoln Park, NJ 07035 Completed by (Print or Type) Gordana Luna NJDEP Hauler ID# Cubic Yards of Waste 6 yards Tullytown Resource & Recovery Center City, State Tullytown, PA City, State Tullytown, PA City, State Tullytown, PA City, State Tullytown, PA Completed by (Print or Type) Treasurer Completed by (Print or Type) Treasurer Date	NOOM C				AND DESCRIPTION OF THE PARTY OF	-	sulation				님	님	14
B & G Restoration, Inc. 19563 G Yards of Waste Syards Name of Registered Landfill Tullytown Resource & Recovery Center	Registered Waste Haules							70 01			片	片	岩
City, State Lincoln Park, NJ 07035 Completed by (Print or Type) Gordana Luna Disposal Date 5/14/12 - 5/23/12 City, State Tullytown, PA City, State Tullytown, PA Completed by (Print or Type) Title Treasurer Completed by (Print or Type) Title Treasurer Completed by (Print or Type) Total	B & G Restoration, Inc.	NJDE 195	P Hauler I			ste	Name of Registered La	ndfill			Ц	Ц	
Completed by (Print or Type) Gordana Luna Signature Treasurer Signature Gordana Luna Date	City, State						Tullytown Resource	& Recovery	Center				
Gordana Luna Title Treasurer Signature Gordana - Gor											2011		
Gordana, Tuna		100000000000000000000000000000000000000				_			To				
	Gordana Luna	Treasure				(Gordana Luna		1	2			

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

(Pursuant to NJAC 8:60-7 and 12:120-7) 2012-89 B & G proj. #: *** Amended *** Date of Notification (1) Name of Building Owner/Operator (2) 0 5 /12 11 1/11 12 St Francis Residential Community Agencies Notified Type Notification Street Address Initial 122 Diamond Spring Road ☐ DEP City, State, Zip Code DOL. X Amendment Denville, NJ 07834 DOH DOH Name of Contact Telephone Number Cancellation ☐ DCA Richard Scudder **FACILITY INFORMATION** Name of facility where abatement is taking place (3) Type of Facility (4) School (K - 12) St Francis Residential Community (non sub 8) Subchapter 8 (Other than K-12) Street Address Other (Private/Commercial Bldgs./Homes, etc. 122 Diamond Spring Road Square Feet # of Floors Bldg. Age City (5) County (6) County Code (7) (State use only) Current Use (Prior if being demolished) Denville, NJ 07834 Morris Health care facility (non sub 8) Name of Monitoring Firm Hired by Bldg. Owner (8) Name of Abatement Contractor (9) ASCM No B & G Restoration, Inc. Street Address Street Address 105 Ryerson Road City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035 Project Manager for Monitoring Firm Phone Number Telephone Number License Number 973-696-6869 0378 Name of OSHA Monitor Scheduled Start Date (10) Sched. Completion Date (11) B & G Restoration, Inc. 5/14/2012 5/25/2012 Street Address Occupancy Status During Abatement (Check only one) 105 Ryerson Road Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Other-Describe: Lincoln Park, NJ 07035 Scope of Work (check all that apply) Demolition Renovation Full Containment w/negative pressure Glovebag procedure >3 sf or >3 If ≥160 sf or ≥260 lf Mini-enclosure Non-friable procedure Is location normally used solely Location of by maintenance/custodial e asbestos-containing n Amount Description of asbestos-containing staff(12) m n material to be p (Specify SF or С material (ACM) 0 abated in facility (13) a Yes No N/A Room A pipe insulation 30 lf \boxtimes Room B pipe insulation 60 lf M Room C pipe insulation 250 lf X Room C heat exchanger insulation 90 sf X Heat Pump Room pipe insulation 240 lf Registered Waste Hauler NJDEP Hauler ID# Cubic Yards of Waste Name of Registered Landfill B & G Restoration, Inc. 19563 9 yards Tullytown Resource & Recovery Center City, State Disposal Date City, State Lincoln Park, NJ 07035 5/14/12 - 5/25/12 Tullytown, PA

Signature

Cordana Luna

Date

5/21/12

Completed by (Print or Type)

Gordana Luna

Title

Treasurer

				30					Che	ck #648	31			
Date of Notification (1) May 22, 201	2			of Buildi	ng Owner / Opera	ator (2)	N 121 /2	TURNSURAN SVENENSSES	to distance of			
Agencies Notified	Type Notifica	-		Stree	t Address	ne Avenue				r 1	Ϋ́́,	15	100	
□DEP ☑DOL	☐ Initia			200	State & Zi			<u> </u>		N 5 A	201	9	1	= 1
⊠рон		ended endment#		West	New Yor	k, NJ 07093		1	4,	i Sivas ir	Th		1	1
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				FA	CILITY	INFORMATI	ON	*** seegge	Grand of the second					
Name of Facility Wh Bank of America	ere Abatement	is Taking	Place (3)			Type of Sc	Facility hool (K							
Street Address								er 8 (Other than						
6050 Bergenline Av	enue							e., private & c					tc.)	
City (5)						Square	Feet 10,000	# of Flo	oors 1	Bldg	g. Age	66		
West New York								rior if being den	nolished)			- 00		
County (6) Bergen		U	County Cod ISE ONLY	e (7)										
Name of Monitoring Environmental Test Street Address			wner (8)		ASCM	Synated	ch, Inc.		or (9)					
One Mall Drive, Sui	te 404					Street A 829 Rad								
City, State & Zip Coo Cherry Hill, NJ 080	02					City, Sta		p Code bor, NJ 08087						
Project Manager for I Howard Zenobi	Monitoring Firm	1		lephone 6-482-13		Telepho 609-296		nber	Licer	nse Numb			-1.111000	
Scheduled Start Date June 1, 2		Schedule	d Completi		(11)		f OSHA	Monitor			0081	<u></u>	Min III	
Occupancy Status D		nt (Check our in a continuation of the continu	only one)			Street A 829 Rad	ddress							
	Performed Out:					City, Sta		<u> </u>			-			
Other – Des	cribe: upied During A	batement				Little Eg	gg Harl	oor, NJ 08087						
Scope of Work (Chec	k all that apply	')						-						
≥3 sf or ≥ 50 lf	2		\boxtimes	Renovati	on			ull Containmen	t with Negati	ve Pressi	ure			
≥160 sf or ≥26	60 If			Demolition	on			Slovebag Proce						
Loc	cation of		lls I ocati	on Norm	ally Used	Dos		on-Exempted(*) and Non-F	riable Pro				r
Asbestos-Conta TO BI	ining Material (E ABATED	ACM)	Solely b		nance or	Asbeste Mate	os-Con erial (A	taining CM)	Amount (Aba	atem	ent i	Гуре
	Facility (13)		Yes	No	N/A	(i.e., the insulation or other	, surfac	ing, VAT			Removal	Repair	Encapsulate	Enclosure
Basement Vault Roo	nm .					DI1		<u> </u>					te	
- Committee of the comm	<i></i>			.*	X	Plaste	er Top	Coat	72 S	<u></u>	X			
Name of Registered V	Vaste Hauler		NJDEP V Hauler ID	No.		ards of Waste	1	Name of Regist	ered Landfill		A.			
Synatech, Inc. City, State			27	429	.5 Disposa	al Date		Grows Landfill						
	1 0000=				The second second			City, State						
ittle Egg Harbor, N. Completed By	J 08087	Title			June 4, Signátu			Morrisville, PA				- 11	_	
Diane Aloia			e Adminis	etrato-	1 -/ 1	ani all	1 17_		Date					
		LACCULIA	- Adminis	Mator	1.00	was con			May 22, 2012					

1987000090	N			OF ASBESTOS to NJAC 8:60 ar		01	unctional decision		17	21 21	T	$\overline{1}$	
Date of Notification (1) 05-21-2012				Building Owner/ HIPPEN CC									
Agencies Notified Type Notification EPA Initial		10000	Street A	^{ddress} ALISADE AV	E SUI	Γ - 20	2	311131	2012			atans course	
× DEP	al ralia a			te, Zip Code I CIY NJ 0	7087	3 1 2 2	est.						
□ DOH	cluding	1000		Contact KOCHER		-		. Telephone I	Number	,		1.000	
N (5 W)			FACI	LITY INFORMAT	ION			10 12		. 4	44	Arte of	ši.
Name of Facility Where Abatement is Taking 100	Place (3)	3			□ s	of Facility (School (K-1	2)	. 40				
Street Address SHIPPEN ST	85				6	×		8 (Other than K private & comme		iildi	ngs,	home	s,
City (5) UNION CITY NJ 07087			40			Squar 6000	e Feet	# of Floors			dg. Ad 80 \	ge YEA	RS
County (6) HUDSON				Code (7) JSE ONLY)		Currer	nt Use (Prid	or if being demo	lished)				
Name of Monitoring Firm Hired by Building Ov N/A	vner (8)		ASCN	l No.				tractor (9) Y CONSTRU	JCTIC	N	LLC	5	
Street Address					100000000000000000000000000000000000000	Addres	s ORDEN	PL					
City, State, Zip Code	1011	0				State, Zi KENS		NJ 07601					
Project Manager for Monitoring Firm		7	elepho	ne No.	100	hone No 708-42		License 01135					
- 1985 N. C.	Schedule 05-31-2		pletion I	Date (11)			IA Monitor RONME	NTAL SERV	/CES				
Occupancy Status During Abatement (Check	Only Or	ne)			Street	Addres	s						-
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe:	riod of A	Abateme Hours	ent		City, S	RT State, Zip ON N		EST					
Scope of Work (Check All That Apply)					6.77.1.7793								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renovat Demolitio			2	Min	i-Enclosure vebag Prod					e	
Location of		Locatio		2		. '				P	\bate Ty	ment pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma Cus	d Solel intenan todial S (12)	y by ce/ taff?	Asbestos Cor (i.e. therma surf		Material is insula AT, or		Amount (Specify SF or LF)	Zeillovei]	Repair	Encapsulate	Enclosure
DACEMANT	Yes	No	N/A	VAT	EL OOI) TH F		600 SQFT	- 1	+			
BASEMANT SECOND FLOOR		X			FLOOF			672 SQFT		-			
ATTIC	X			FLOOF			528 SQFT		+		_		
ATTIC		^		VAI	LOUR	TILE	-	320 SQF		-			
Name of Registered Waste Hauler		N.	JDEP W	/aste Cubi	c Yards		Name of	Registered Lan	dfill				
SHARON QUALITY CONSTRUCTION	ON LLO		auler ID 33967		1			ATE TRANS	FER	SE	RVI	CES	;
City, State HACKENSACK N.J. 07601			06/0	osal Date 1/2012		City, Stat	e K N.J. 10474						
Completed by XIOMARA GOMEZ C.	Title PRE	SIDEN	JT		Signatur X (O)	e mar	a 60 v	vezC.	Date 05/21	/2	012		

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Date of Notification (Name of Building Owner/Operator (2) 05/21/12 Ck# 2080 \$200 IFF Inc. Agencies Notified Type Notification Street Address Po Box 8 EPA Initial DEP Amended City, State, Zip Code × DOL Amendment # Hazlet, New Jersey 07735 Emergency (including Name of Contact DOH justification) Telephone Number DCA Cancellation Gary Stapperfenne **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) International Flavors & Fragrances School (K-12) Street Address Subchapter 8 (Other than K-12) 1515 State Route 36 Other (i.e. private & commercial buildings, homes, etc.) City (5) Square Feet # of Floors Bldg. Age Union Beach, New Jersey 07735 30,000 55+ County (6) County Code (7) Current Use (Prior if being demolished) Monmouth (STATE USE ONLY) Manufacturing Company Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Garden State Environmental Lilich Corporation Street Address Street Address 555 Broad Street, Suite K 606 McBride Avenue City, State, Zip Code City, State, Zip Code Glen Rock, New Jersey 07452 Woodland Park, New Jersey 07424 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Richard Lester 209-652-1119 973-225-8400 01104 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 07/13/12 07/15/12 J&S Environmental Labss LLC Occupancy Status During Abatement (Check Only One) Street Address 2333 Route 22 West Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other – Describe: 4PM Start City, State, Zip Code Union, New Jersey 07083 Scope of Work (Check All That Apply) ≥3 sf or ≥3 If Renovation Full Containment with Negative Pressure × ≥160 sf or ≥260 If Demolition Mini-Enclosure × Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Normally Type Location of Description of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED Encapsulate (i.e. thermal systems insulation, Custodial Staff? (Specify Removal In Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A Lab 220 & 221 X Elbows 30 Each. Lab 220 & 221 X TransiteFumeHoodsNONFRIAR 400 SF X Lab 220 & 221 卖 TransiteCounterTopsNON FRIAB 300 SF X Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. Lilich Corporation of Waste G.R.O.W.S Landfill 18724 4 City, State Disposal Date City, State Woodland Park, New Jersey 07424 07/16/12 Morrisville, Pennsylvania Completed by Signature Date

Vice President

Tatiana Kalenikova

05/21/12

State of New Jersey - Notification of Asbestos Abatement Check # 2548 (Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

GAC Project # 060-12 Client Project #			(I uis	uant to N.J.A.C	. 6.00-7 and 12.120-7)	in F	(1 12) 	1 17	emis		
Date of Notification (1) May 21, 2	012				Name of Building Owner/ORUTGERS, THE ST		VERSIT	Y OF I	NJ		
Agencies Notified EPA DCA		Notification Initial Amende	Notificated Noti	fication	Street Address ENVIRONMENTAL I 27 ROAD 1, BLDG 4					}	
X DOL		□ Emerg		including	City, State, Zip Code PISCATAWAY, NJ 0	8854	7.				
☑ DEP- No Longer REQUIRE	0	□ Cance			Name of Contact GREG LUPINSKI, E HEALTH & SAFETY		Telepho	one Num	nher		
				FACILITY INF	ORMATION	·					
Name of Facility Where Abatemer CLOTHIER HALL, BLDG					Type of Facility (4) School (K-12)	- 14 40)					
Street Address COLLEGE AVENUE CA	MPUS	67			Subchapter 8 (other than Signature 2 other (i.e. private & comes Signature 3 other 1 other (i.e. private 4 other than 5 other (i.e. private 4 other than 5 other 1 oth				60+ ve	ars	
	unty (6) MIDDI	LESEX		y Code (7) Use Only)	Current Use (prior if being				, , , , , , , , , , , , , , , , , , ,	.a.c	
Name of Monitoring Firm Hired by ATC ASSOCIATES	Bldg. O	wner (8)	ASCM 0098	Control Control Control	Name of Contractor (9) GREENWOOD ABAT	EMENTO	ONEILI	TANTO	. INC	2	
Street Address					Street Address	EINIEIN I C	ONSOL	IANIS	, INC	•	
3 TERRI LANE					268 MAIN STREET						
City, State, Zip Code BURLINGTON, NJ 0801					City State, ZipCode BUTLER, NJ 07405						
Project Manager for Monitoring Fit BRIAN KEARNY	m	Telephone N			Telephone Number		License	Number			
Cabadulad Ctad Data (40)		0 1 1 1 1 1		5 / // //	973-492-0477		00840				
Scheduled Start Date (10) 05/30/12		Scheduled (06/01/12	Completic	on Date (11)	Name of OSHA Monitor 1 ENVIROVISION, INC						
Occupancy Status During Abate Facility Closed/Vacated Durin	g Entire	Period of A	batemer	nt	Street Address						
☐ Abatement Performed Outsid Describe	e of Nor	mal Facility	Hours -		20-21 WARGARAW F City, State, Zip Code	ROAD					
☑Other – Describe: Shift Ho	urs: 4	:00 PM -	5:00 A	M							
				-	FAIRLAWN, NJ						
Scope of Work (Check all that app	ly)					Full Contain	mant with	Moneti	us Dras		
≥ 3 sf or ≥ 3 lf				⊠Renovation		Mini-Enclo		i Negati	ve ries	Suie	
≥ 160 sf or ≥ 26	0			□ Demolition		Glovebag P					
Location of Asbestos-Containing	Is Loc	ation Normal	ly I lsed	Description of Ash	pestos Containing Material	Non-Exemp Amour	1	d Non-F			ure
Material (ACM) in Facility (13)		by Maint./Cu			al systems insulation, surfacin		fy SF	Remove I			Enclose
STAIRWELL	YES	NO	NA	MAT		400.5	_				
OTAIIWELL				VAT		120 8	5F E	X			
		-									
Name of Reg. Waste Hauler See Hauler Below #1 & 2		NJDEP Was See Below	-	ID#	Cubic Yards of Waste:	5 CY	Name of				!!!
						2: 1.5	G.R.O.				.11
Hauler #1) Greenwood Abatemen NJDEP # 12561 Hauler #2) Newark Carting, Inc., NJ DEP # 4509			Butler,	NJ 07405		Disposal Da 06/01/12	<u>ite</u>	10 Ro 19	ty, State 0 New 1. Morri 067 5-736-1	Ford N sville,	
Completed by (Print or Type) RAYMOND C. PEDALING		ENIOR PI		T ,	Signature	Oc.	Date Ma	ay 21,	2012		
	M	ANAGER			The state of	/					

Check # 2550

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

GAC Project # 060-12

Client Project #							The second	tem constante con			(7 (=	
Date of Notification (1)					Name of Building Owne	r/Opera	ator (2)	TC.	lir !		7 15	1111
May 21	, 2012				RUTGERS, THE S	STAT	E UNIV	ERS	ITY O	FNJ	100 m	
Agencies Notified EPA		Notification Initial □Amend	Notific		Street Address ENVIRONMENTAL 27 ROAD 1, BLDG						4	
DCA DOL			gency (cation)	including	City, State, Zip Code PISCATAWAY, NJ			1		s coati		1
☑ DEP- No Longer REQUIR ☑ DOH	RED	☐ Ćance			Name of Contact GREG LUPINSKI, HEALTH & SAFET					lumher	a sual mentals	
				FACILITY IN	IFORMATION							
Name of Facility Where Abatem NEW GIBBONS B5 & E					Type of Facility (4) School (K-12)			59				
Street Address DOUGLASS CAMPUS				£1	☐ Subchapter 8 (other to Sq. Feet: N/A	ommer					vears	
City (5) NEW BRUNSWICK	County (6)	LESEX		y Code (7) Use Only)	Current Use (prior if being			100000000				
Name of Monitoring Firm Hired ATC ASSOCIATES	by Bldg. C	Owner (8)	0098		Name of Contractor (9) GREENWOOD ABA	TEM	ENT CC	MISIA	II TAN	ITC IN	<u> </u>	
Street Address					Street Address	4 t P=1411	LINI GO	1430	LIAN	110, 114	<u>.</u>	
3 TERRI LANE					268 MAIN STREET							
City, State, Zip Code BURLINGTON, NJ 08					City State, ZipCode BUTLER, NJ 07405			11000				
Project Manager for Monitoring BRIAN KEARNY	<u>Firm</u>	Telephone 609-386			<u>Telephone Number</u> 973-492-0477			Licens	se Num	ber		
Scheduled Start Date (10) 05/30/12		Scheduled 05/31/12		on Date (11)	Name of OSHA Monitor 1 ENVIROVISION, IN	IC.		000-	,,,			
Occupancy Status During Aba Facility Closed/Vacated Du Abatement Performed Outs	ring Entire	e Period of A	batemer	nt	Street Address 20-21 WARGARAW City, State, Zip Code	ernski ekste zakovn	D					
Describe Souther – Describe: Shift F	lours: 3	3:00 PM -	5:00 A	AM.	FAIRLAWN, NJ							
Scope of Work (Check all that a	ipply)				1	NO STATE OF THE ST					-	
≥ 3 sf or ≥ 3 ≥ 160 sf or ≥	260			☑Renovation		Mi Glov	Containn ni-Enclos /ebag Pro -Exempte	ure ocedu	re			dure
Location of Asbestos-Containing Material (ACM) in Facility (13)	Solel	cation Norma y by Maint./C ? (12) NO			sbestos Containing Material mal systems insulation, surfac scell.)		Amount (Specify or LF)	a average	Abate	ment Ty		
STAIRWELL		X	I	VAT			100 SF	=	X	T	T	T
										_		
							7 - 1000			-		-
Name of Reg. Waste Hauler See Hauler Below #1 & 2		NJDEP Was	ID#	Cubic Yards of Waste:	5 C				istered L North	andfill Landf	 ill	
Hauler #1) Greenwood Abatem NJDEP # 12561 Hauler #2) Newark Carting, In NJ DEP # 4509			- Butler, I	NJ 07405			osal Date 31/12	2			w Ford I rrisville,	
Completed by (Print or Type) RAYMOND C. PEDALII	NO S	itle SENIOR P JANAGEF	т	Signature	1/	2	<u>Date</u>	May 2	21, 201	2		
									No. of Street, or other Persons		_	

*			(Pursuar	t to NJAC	8:60 a	nd 12:12	0)	Cler	17:11	37	2		n n	17 F	- Contraction
Date of Notification (1) 5/22/12	75 II		15		of Building / Hahn	Owner	r/Operator	r (2)	0,00						/ [5	
Agencies Notified	Type Notification	n .			Address Engle Str	eet								-50	19	
EPA DEP					tate, Zip Co				- 1	-						Service
DOL	Amendmer Emergency		<u> </u>		ewood, N	J 07	631		į.	fina-	ASEE	8 05	Cin	TOVI.]
DOH DCA	justification Cancellatio)	9	Carlo	of Contact Hahn				رما	Tele	nh-			<i>t</i>	te see	
Name of Facility William	Abot C Tit				CILITY INFO	ORMA	TION	100000				20				
Name of Facility Where	Abatement is Taki	ng Place	(3)					_	of Facility	1000				-		
Street Address 350 Engle Street		- 1					Girana Giran	×	School (K- Subchapte Other (i.e. etc.)	r 8 (Othe	er than comm	K-12 nercia) Il buil	ldings	, hom	es,
City (5) Englewood	123 X								re Feet	# of	Floors	-	E	Bldg. /	Age	
County (6) Bergen					Code (7) USE ONLY)		Curre	ent Use (Pri	ior if bein	g dem	olish	ed)			
Name of Monitoring Fire Hillmann Environm	m Hired by Building nental Group	Owner (8	3)	ASC	M No.				tement Co			LC				
Street Address 1600 Route 22 E								Addre: Gate I	ss Orive, PC) Box 4	83	-0110		-		
City, State, Zip Code Union NJ 07083									ip Code NJ 074	18						
Project Manager for Mo Mike Nehlsen	nitoring Firm			Telepho 908-6	one No. 88-7800		Teleph	none N 764-2	0.	T	Licens	se No),			
Start Date (10) 6/5/12		Schedu 7/5/12		mpletion	Date (11)				HA Monitor					33.55		
Occupancy Status Durir	ng Abatement (Che	ck Only O	ne)	-			Street	Addres	SS			****				
Facility Closed/Vac Abatement Perforn Other – Describe:	cated During Entire ned Outside of Norr	Period of mal Facilit	Abater y Hour	ment s			City, S	tate, Zi	p Code							
Scope of Work (Check A	All That Apply)													-	-	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demoli				×	Min Glo	Containmoi- i-Enclosure vebag Prod -Exempted	e cedure					e	
			s Locat							- 1.7				Abate	ement	
Location Asbestos-Containing			Normal ed Sole		Ashaal		escription		(4.04.4)			-	-	1 1 1	pe	ı
TO BE AB In Faci (13)	ATED Ity	Cus	aintena stodial ((12)	Staff?	(i.e.	therma surfa	ntaining M il systems acing, VA miscellan	insula T, or	tion,	(Sp	ount ecify or LF)		Removal	Repair	Encapsulate	Enclosure
3rd floor we	et wing	Yes	No	N/A	-	- I	fill					_			Ф	
3rd floor we		X			oe fitting loor tile				0 SF		x					
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Name of Registered Was	ste Hauler		IN	JDEP W	lasto	Cubio	Yards		Name of I			160				
reehold Cartage	4400.1056 ONESONO		Н	auler ID 5939	No.	of Wa			Name of I	vegistere	u Lan	uill				
City, State Freehold, NJ							sal Date		City, State Bethleh				-			
Completed by Andrew Scott Higgin	s	Title Presi	dent				Signature	12/	20011011	- III Т		Date				
		1 1031	JOIN				ب د	W		_		3/2	1112			

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

Job #: 1205-1643 Check #: NA

no chack	(Pt	ırsu	ant	to N	.J.A.	C. 8:6	0 and	12:120)		Chec	k#;1	VA.		1
Date of Notification (1)						Owner /		or (2)	1 1 2 2 2		41 41 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4			4-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1
5/11/12						ate Polic	ce	1			ont	9	1	
Agencies Notified Type Notific	ation			t Addı				9 1		11.	6,330	L-	10.00	è
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	ergency	1	Vame	e of Co	ontact			-	distributes in the		elenho	N - 1		
DCA Can	cellation	ľ	VIr. F	rank	Solti	S		89.					AZ	4413
			FA	CILIT	TY INF	ORMA	TION		-					
Name of Facility Where Abatem	ent is Taking PI	ace (3	3)	20			of Facil							
Marine Station					100000		School (72			
Street Address								oter 8 (Other t						
341 Espanong Road								e. private & co			· ·		etc.)	
City (E)	To	-10					re Feet	# of FI	oors	BI	dg. Ag	е		
City (5)	County (6)	Co	unty	Code	(7)	1300		1		60	year	s		
Lake Hopatcong	Morris					Curre	ent Use	(Prior if being	demol	shed)	-			
							ant Pro			253				
Name of Monitoring Firm Hired I	y Building Own	er (8)		AS	CM No			tement Contra	actor (9	9)				-
Horizon Environmental		. ,				Asb	estos a	nd Mold Se	rvices	Corn		Q.		
Street Address							t Addre		1 11000	, оогр.				
PO Box 316							Sylon							
City, State & Zip Code					77.05			Zip Code			-			
Thorofare, NJ 08086								, NJ 08036						
Project Manager for Monitoring I	Firm	Telep	hone	Num	ber		hone N			License Nu	ımhor			
Dave or Steve Flanigan	C AND VA	856-8			001		702-04			LICENSE IVE	0086	2		
Scheduled Start Date (10)	Scheduled Com)			HA Monitor			0000			
	5/23/12	ipiotio	11 Du	10 (11	,	100000000000000000000000000000000000000	L Anal							
Occupancy Status During Abate	Contract of the Contract of th	ly one	2)				t Addre			-				
Facility Closed/Vacated	During Entire Po	eriod o	of Ah	ateme	ent		Haddo:	3430						
Abatement Performed O				atomo	2110				-			_		
Describe:	utside of Northe	ii i iou	15					Zip Code						
Isolated Area						Wes	tmont,	NJ 08108						
Scope of Work (Check all that a									MP			115		
Geope of Work (Check all that a	ppiy)							N	-					
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≥160 sf ≥260 lf		\bowtie		novatio					nclosu					
2 100 SI 2200 II			Der	nolitio	n					ocedures				
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TO BE ABATED		Maint	olely				terial (A		5	SF or LF)	70		E	- m
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Marine Station		TT	П		Floo	r Tile ar	nd Mas	tic	500	SF		П	П	
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Name of Registered Waste Haul	er					Cubic Y		Name of Re	gistere	d Landfill			-	
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				2261	12	5		GROWS						
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Trenton, NJ			2000	30014175		5/24/12	?	Morrisville	, PA					
Completed By (Print or Type)			Tit	le		Signatu	re				Date	•		
Kim Trumbetti			A	dmir	١.	1	ì				5/22	112		
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Job #: 1203-1633 Check #: NA

Date of Notification 05/11/2012	(1)			Nar	me d aha	of Bu	uilding	Ow Pa	ner / Operate	or (2)		e If II a	1 1 3		Management of the state of the	
Agencies Notified EPA	Type Notifi			Stre	eet /	Addr	ess		ley Road			M 29 4	77	Land Land		
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				F	AC	ILIT	Y INI	FOF	RMATION							
Name of Facility Wi Graham Foods F Street Address	here Abaten Packaging	nent is Taking F	Place	(3)					Type of Faci	(K-12)			91			
600 5 th Street									Other (i.	.e. privat	other than K	rcial building			etc.)	
City (5)	2/	County (6)	C	ount	у Со	ode	(7)	\neg	Square Feet 90k production 60k warehouse	on	# of Floors 1		ldg. Ag 0 year			
Belvidere		Warren							Current Use Manufactu	ring Pl	ant					
Name of Monitoring	Firm Hired	by Building Ow	ner (8	3)		ASC	CM No		Name of Aba							
Street Address									Asbestos a Street Addre 3859 Sylon	ess	id Service	s, Corp.				
City, State & Zip Co								City, State &		le				-		
Project Manager for	City, State & Zip Code Project Manager for Monitoring Firm Cicheduled Start Date (10) Scheduled Coulombre (12) Sccupancy Status During Abatement (Check					Numl	her		Hainesport Telephone N		036	Il issans N				
				1) 					609-702-04			License N	neamu 0800	2		
Scheduled Start Da 5/21/12	te (10)	Scheduled Co. 5/23/12	mplet	ion E	ate	(11))	- 1	Name of OSI EMSL Anal		itor					
Occupancy Status I	During Abate	ement (Check o During Entire F	nly or	ne)	الم ما				Street Addre	ss						
		Outside of Norm			Noati	eme	:III		107 Haddo City, State &		le .					
Describe:	ea								Westmont,							
Scope of Work (Che	eck all that a	ipply)			0.550											
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		ng		Loca			-	А	Description sbestos-Con			Amount (Specify	Aba	teme	ent T	уре
	Location of I Asbestos-Containing No Material (ACM) TO BE ABATED Ma in Facility Cus (13)		5	Solely	y by	,			Material (A	CM)		SF or LF)	71		E	m
	TO BE ABATED in Facility					aff?		inst	e., thermal s lation, surfactoring of the contractoring of the contracto	cing, VA			Remova	Repair	Encapsulate	Enclsoure
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Name of Registered Horizon Disposal	34	ler			laul		No.	- CONTRACT	bic Yards Waste		of Registere	ed Landfill				
City, State							-	105	sposal Date	GRO\ City, S						
Trenton, NJ						5/2	21/12	100000000000000000000000000000000000000	sville, PA							
Completed By (Print Kim Trumbetti	or Type)			- 1	itle \dn	nin.	4	Sig	pature			•	Date 5/22/	12		

Job #: 1203-1633 Check #: NA

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Date of Notification	(1)						Owner / Operat	or (2)		1				-11	
05/11/2012 Agencies Notified	Type No	otification		Gra	ham I et Add	Foods	Packaging								
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□ DOH		Emergency			e of C					110	Telep			ımb	er
DCA		Cancellation		Kev	in Mo	rriso	n				6				
				F/	CILI	TY IN	FORMATION			1	_		_		
Name of Facility WI Graham Foods P	here Aba	tement is Taking F	Place (3)			Type of Faci							ii.	
Street Address	ackagii	ig					School Subaba			40)					
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							Square Feet		# of Floors	Ciai bullul	Bldg.		s, et	C.)	
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Delvidere		ON HOLI	J-IVI	OD1	lize	a, bi	ut due to w	veatl	ner we w	ıll not	be				
Name of Monitoring	Firm Hi		ab	le t	o pe	erfoi	m abatem	ent t	oday.						
NA							TASDESTOS 2	and w	lola Services	s. Corn			87		
Street Address							Street Addre	ss		, - c.p.				e e	
City State 9 7:- C-	d .						3859 Sylon	Blvd							
City, State & Zip Co	ae						City, State &			(IIIII)					
Project Manager for	Monitori	na Firm	Teler	hone	e Num	hor	Telephone N			Ice			_		
			TOICE	311011	e raum	Dei	609-702-04		n.	License		er 862	į		
Scheduled Start Da	te (10)	Scheduled Co	mpletio	on Da	ate (11)	Name of OS		nitor						
5/21/12)i	5/24/12					EMSL Anal								
Occupancy Status D	ed/Vaca	ted During Entire F	nly one	e) of Δk	ateme	nt	Street Addre								
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Isolated Are							westinont,	140 0	0100						
Scope of Work (Che	eck all the	at apply)													
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≥3 \$1 or ≥3 11 ≥160 sf ≥260			\bowtie		novati				Mini-Enclosu						
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Lo	cation of		Isl	Loca	tion	T	Descriptio	D of	Non-Exempte	ed and No					
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	erial (ACI			olely			Material (A	CM)		SF or LF)				m	
	E ABAT	<u>ED</u>			nce or Staff?		(i.e., thermal s					Ren	Re	ncar	ncl
	(13)		Ousid	(12)			insulation, surfacell	cing, v Ianeou	(A)			Removal	Repair	Encapsulate	Enclsoure
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Name of Registered	Wasto L	lauler	Ш	L	IDEB V	Mest	louble V	TNI][[
rame of registered	and of Registered Waste Hauter				auler II		Cubic Yards of Waste	Nam	e of Registere	d Landfill					
Horizon Disposal					226		4	GRO	ows		8				
City, State							Disposal Date		State			_			
Trenton, NJ			200000000000000000000000000000000000000				5/21/12		risville, PA				80		
Completed By (Print				Tit			Signature	(Dat	e			
Kim Trumbetti				A	dmir	1.	1 Oka	U_				111	2		

Job #: 1204-1636 Check #: 2708

Date of Notification (1) 4/18/12		Nar	ne of B	Building	Owner / Opera	tor (2)			W.E	10				
Agencies Notified Type Not	ification		nk of		са									
☐ EPA	meation	1 (C) (C) (C) (C)	et Add		50 Route 173		iji ww	2.7	2012					
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	mended #2 Off Hold		nton, I							ì				
	mergency		ne of C				1	Telepho	ne Num	hor				
☐ DCA ☐ Ca	ancellation	Mr.	Chris	tophe	er P. D'Alleinn	е	The second of the second	relepito	ne num					
		F	ACILI	TY INI	FORMATION									
Name of Facility Where Abate	ement is Taking Plac	ce (3)	1/6		Type of Fac	cility (4)				ent of the				
Bank of America Street Address					School									
600 East Union Avenue					Subcha	apter 8 (Other t	than K-12)							
Coo Last Officia Avenue							ommercial buildin							
City (5)	County (6)	Count	y Code	(7)	Square Fee	t # of F		Bldg. Age	9					
Bound Brook	Somerset	Count	y Code	(1)	2416	1	4	12						
	Somerset					(Prior if being								
Name of Monitoring Firm Hire	d by Building Owner	(8)	IAS	CM No		operty-Bank atement Contr								
Lead Consultants of Ame	rica, Inc.	(0)	1,10	OW INC		and Mold Se	ervices, Corp.							
Street Address					Street Addre		rvices, corp.	s, Corp.						
225 Demott Lane, Suite 2	06				3859 Sylor									
City, State & Zip Code Somerset, NJ 08873					City, State 8	Zip Code			-					
Project Manager for Monitorin	n Firm	elephor	as Nives	la a a	Hainespor	t, NJ 08036								
Stuart Levitch		зерпог 3 2-418		ber	Telephone N 609-702-04		License N		2					
Scheduled Start Date (10)	Scheduled Comp)	Name of OS			0086	2					
5/23/12	5/28/12		u.o (,	EMSL Ana									
Occupancy Status During Aba	tement (Check only	one)			Street Addre				-					
Facility Closed/Vacate	d During Entire Peri	od of A	bateme	ent	107 Haddo									
Abatement Performed Describe:	Outside of Normal I	Hours			City, State &									
Isolated Area					Westmont	, NJ 08108								
Scope of Work (Check all that	annly)													
(uppiy)					□ Full Co	ontainment with N	oootius (D====					
≥3 sf or ≥3 If		Re	enovati	on		Mini-F	nclosure	egative i	Pressure	е				
≥160 sf ≥260 lf		∑ D∈	emolitio	n			Bag Procedures							
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Location of Asbestos-Contain	ning N	Is Loca			Descriptio	n of	Amount		tement 7					
Material (ACM		ormally Solely			Asbestos-Cor Material (A		(Specify							
TO BE ABATE	<u> </u>	aintena	ince or		(i.e., thermal		SF or LF)	20	Enc.	- <u>E</u>				
in Facility (13)	Cı	ustodial			insulation, surfa	cing, VAT		Removal	Repair	clsc				
(13)	Ye	(12 es No		-	or other miscel	laneous)		Val	Encapsulate Repair	Enclsoure				
Exterior		7 7		Dool					(D					
Exterior		111		Flasi	fing and Slag		3,400 SF							
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Name of Registered Waste Ha	uler	N	JDEP \	Vaste	Cubic Yards	Name of Reg	gistered Landfill	IKALI	-11-					
Horizon Disposal		H	auler II 2261		of Waste		*26							
City, State				-	10	GROWS								
Trenton, NJ					Disposal Date 5/28/12	City, State	DA		020000H 10000000					
Completed By (Print or Type)		TTi	tle		Signature \	Morrisville	, ra	15.						
Kim Trumbetti		, X			Date	40								
			dmin	. (VMV			5/22/	14					

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

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

Job #: 1205-1644 Check #: 2705=

Date of Notification (1) Name of Building Owner / Operator (2) 5/18/12 O'Buck Estate Agencies Notified Type Notification Street Address X **EPA** 26 Woodland Aveue DEP Initial City, State & Zip Code ASDESTOS CONTROL & \boxtimes DOL Amended Fords, NJ 08863 LICENSING M DOH Emergency Name of Contact Telephone Number DCA Cancellation Mr. Dick Gassert **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Residential Property School (K-12) Street Address Subchapter 8 (Other than K-12) 26 Woodland Avenue Other (i.e. private & commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Age City (5) County (6) County Code (7) 980 65 Fords Middlesex Current Use (Prior if being demolished) Vacant-Residential Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Horizon Environmental Asbestos and Mold Services, Corp. Street Address Street Address PO Box 316 3859 Sylon Blvd. City, State & Zip Code City, State & Zip Code Thorofare, NJ 08086 Hainesport, NJ 08036 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number Dave or Steve Flanigan 856-848-0800 609-702-0400 00862 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 6/4/12 6/5/12 **EMSL Analytical** Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 107 Haddon Ave. Abatement Performed Outside of Normal Hours City, State & Zip Code Describe: Westmont, NJ 08108 Isolated Area Scope of Work (Check all that apply) Full Containment with Negative Pressure ≥3 sf or ≥3 If Renovation Mini-Enclosure ≥160 sf ≥260 If Demolition Glove Bag Procedures Non-Exempted and Non-Friable Procedure Location of Is Location Description of Amount Abatement Type Asbestos-Containing Normally Used Asbestos-Containing (Specify Material (ACM) Solely by Material (ACM) SF or LF) Encapsulate TO BE ABATED Maintenance or Remova (i.e., thermal systems Repair in Facility Custodial Staff? insulation, surfacing, VAT (13)(12)or other miscellaneous) Yes No N/A Basement Floor Tile & Mastic <160 SF Quantity Unknown X Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste Horizon Disposal 22612 **GROWS** City, State Disposal Date City, State Trenton, NJ 6/5/12 Morrisville, PA Completed By (Print or Type) Title Signature Date Kim Trumbetti Admin. 5/18/12

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

Job #: 1204-1638 Check #: 2703

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

Date of Notification (4)			-1-								Carrier of the Carrie	1 15 15	L 1	191	L	
Date of Notification (1) 4/19/12			1	lam	e of	Build	ng Owne	er / Opera	ator (2)							
Agencies Notified Type Not	ification	-	5	Stree	et Ac	dress	Departi	nent of	ransp	ortation	1 7 7 1	1 MAY	7.4	2012)	+U
⊠ EPA						x 600						A (0) (1)	/ 1	5372.85		houses
	itial						p Code	700.				Lauren				3
He	mended #2 OFF OLD						08625				y distribute		TOS CON LICENSIN		8	
	nergency		2 200			Conta					THE CHILD	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	Telenh	no N	mb	er
L DCA	ancellation		V	Ar. I	Pau	l Koc	her					-	-			
				FA	CIL	ITY I	NFORM	TATION								
Name of Facility Where Abate	ement is Taking F	Place	e (3))				pe of Fac	cility (4)						-	
Furniture Store									I (K-12)							
Street Address								Subch	apter 8	(Other the	an K-	12)				
Route 130 & 30												cial buildin	gs, hon	nes, e	tc.)	
City (5)	10- 1 (0)	- 1.	_		_			quare Fee		# of Flo	ors	E	Bldg. Ag	je		
	County (6)	10	Cou	inty	Cod	e (7)		pprox. 5		2		1	930's			
Collingswood	Camden							urrent Us	e (Prior	if being d	lemoli	shed)				
Name of Monitoring Firm Hire	d by Building Ou		(0)		Ta	0014		acant								
ATC Associates, Inc.	a by Building Ow	ner ((0)		A	SCM		ame of Al								
Street Address 3 Terri Lane 3859 Sylon Blyd																
	i Lane 3859 Sylon Blyd							1								
City, State & Zip Code								ty, State								_
Burlington, NJ 08016	08016 Hainesport, NJ 08036															
Mr. John Lutz						mber		lephone		r		License N	lumber			
Scheduled Start Date (10)	Cabadulad O				880			9-702-0					0080	62		
5/16/12	Scheduled Co 5/18/12	mpie	oite	1 Da	ite (11)	17,0858	ame of OS								
Occupancy Status During Aba		nly c	ne'					VISL Ana reet Addr								_
Facility Closed/Vacate	d During Entire F	Perio	d o	f Ab	aten	nent		7 Hadd								
Abatement Performed	Outside of Norm	nal H	our	s				ty, State &				-				77.70
Describe:								estmon								
Isolated Area								72.01101 STREET								
Scope of Work (Check all that	apply)															
≥3 sf or ≥3 lf			7	Ro	nova	tion			\boxtimes			ent with N		Pres	sure)
≥160 sf ≥260 lf		×	1		molit				\boxtimes			ssure Enclo ocedures	osure			
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Location of		1	s L	ocat	tion	T		Description		THOIT EXC		Amount		ateme		
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TO BE ABATE				lely	by ice c)r	(i.o.	Material (A , thermal	ACM)		S	SF or LF)	Z		En	ш
in Facility					Staff		insula	tion, surfa	acina. V	'AT			Remova	Repair	Encapsulate	Enclsoure
(13)				12)				her misce					oval	a-	sula	oure
		Yes	S	No	N/	Α									e	L.
Exterior			Ц	Ц				et Floori			70 S	F	\boxtimes			
Exterior		Щ	1				or Tile	& Masti	ic		195	SF	\boxtimes			
		닏	1	13		Tolorow Co.										
			<u> </u>	Ц.												
		H	-	片												
Name of Registered Waste Ha	uler			INI	DEL		te Cubic		- INI							
Horizon Disposal	idici				uler	ID No	of Wa			e of Regi	stered	d Landfill				70.00
City, State			_		22	612	5		GRO							
Trenton, NJ								osal Date		State	D.0				205.00	
Completed By (Print or Type)				Tit			5/18/	1	INOL	risville,	PA					
Kim Trumbetti				2000	_{ie} dmi	in	Signa	iure					Date			
				1	ulill	111.	MX	ヘーナ					5/15	112		1

NOTIFICATION OF ASBESTOS ABATEMENT

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

CHECK#21909

Date of Notification (1)					Name of Buil	lding Own	er/Operator (2)	11111	1000	3	11/	ĺ
5/21/2012					OCEAN TV	VP. BD. 0	OF EDUCATIO	N M	5.11	٠.	-utant	1
Agencies Notified	Type Notifica	tion			Street Addre	SS						
□ EPA	Initial				163 Monmo	uth Road	ı i	ASBESTOS CON	TROL	.g	les:	į.
□ DEP	Amende	ed Ame	ndmen	nt #	City, State, Z	ip Code		EIDENSIN	7-0-18-00			†
□ DOL	☐ Emerge	ncy (in	cluding		Oakhurst,N	J 07755						
□ DOH	justifica	tion)			Name of Cor	ntact			Tele	phone	Numb	ber
□ DCA	☐ Cancella	ation			David J. D'A	Andrea			1			
			W. W. W. H. W.		FACILITY IN	FORMA"	TION	1 3				
Name of Facility Where Ab	atement is Ta	aking P	ace (3))				Type of Facility (4)				
OCEAN TWP. HIGH SC	HOOL							X_School K-12				
Street Address								Subchapter 8 (Other	er tha	n K-12	2)	
550 WEST PARK AVEN	UE											
City (5)								Square Feet	# of	Floors	Bldg.	Age
OCEAN TWP. HIGH SC	HOOL											
County					County Code	(7) (STA	ATE USE ONLY)	Current Use (Prior if be	ing de	molis	ned)	
Monmouth												
Name of Monitoring Firm H	DEP DOL DOL DOH DOL DOH DOA DOH DOA DOA DOH DOA DOA DOA DOA DOCA DOCA DOCA DOCA DOC					Name of	f Abatement Cont	ractor (9)				
	Type Notification EPA					CREAN	M RIDGE ENVI	RONMENTAL INC.				
Street Address						Street A	ddress			77		
P.O. BOX 341						15 BLA	CK FOREST R	OAD				
City, State, Zip Code						City, Sta	ite, Zip Code				200	
CROSSWICKS, NJ 0851	15					HAMII	TON, NJ 08691	1				
Project Manager for Monito	ring Firm	Telep	none N	lo.		Telepho	ne No.		Licer	ise No	٥.	
WILLIAM WEISGARBI	LLIAM WEISGARBER 609-396-92					609-890			0067	6		
Start Date (10)		Sched	luled C	omplet	ion Date (11)	Name of	f OSHA Monitor					
7/9/2012		12 15 16 TO A TANK	NAME OF STREET			MANA	GEMENT ENVI	RONMENTAL CONS	ULT	ING S	SERV	ICE
						Street A	ddress					
(4)					ent	P.O. BO	OX 341					v2
I X			100	Hours		City, Sta	ite, Zip Code					
		SONN	EL			CROSS	WICKS, NJ 085		- 0			
	nat apply)							☐ Full Containment w	ith Ne	gative	e Pres	sure
$\boxtimes \ge 3 \text{ sf or } \ge 3 \text{ lf}$					Renova							
					□ Demolit	ion		☐ Glovebag Procedu				
					,			Non-Exempted (*)	_	_		
		1			Description	a of Achor	stos Containing		Abat	ement	Туре	
			1.5				hermal systems	Amount (Specify SF or	70		Enc	面
	BATED In	100 march 100 ma		100			, VAT, or other	LF)	l e	Repair	aps	clo
racility (13)					ļ	miscellane	eous)		Removal	<u>a</u> .	Encapsulate	Enclosure
		Yes	No	N/A							e e	W.
WINDOW GLAZING				X	GLASS CUI	RTAIN V	VALL	150 S.F.	X			
				-						<u> </u>	\sqcup	
Name (D. 11 11M)				200	NIDED III		To the Visit of		1511			
Name of Registered Waste	Hauler				NJDEP Waste Hauler ID No.		Cubic Yards of Waste	Name of Registered La	natili			
LUCAS DISPOSAL					22384		1	GROWS				
City, State		A7-31-5276			22004		Disposal Date	City, State				
HIGHTSTOWN							7/16/2012	MORRISVILLE, PA				
Completed By		Title				Signatur		LA A	Date			
DAVID D'ANDREA		0.0000000000000000000000000000000000000	IDEN'	т		1 1 1	wil I.K.	tendres		2012		
ASB-41		111111111111111111111111111111111111111	417E/17			I/Ch	NA Y. Y	e caua	13/21/	2012		

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

Date of Notification (1)			Name o	f Building	Owner/0	Operator	(2)		(D) (U) (40	14	15	
	2.1. 2000		m	- 1100	USTR	ZIES,	(2) 						
EPA Initial Amended Amendment #			73	73	WES.	TSIDE	AVE.				TROL	2.	
DOH justification Cancellation	cies Notified Type Notification EPA DEPA DEP DOL Amended Amendment # Emergency (including justification) Cancellation DOCA DOC						-0	THE RESERVE AND ADDRESS OF	elephone Nu		Ė		
Street Address 73.73 WESTSIDE AUE	Place (3	3)	FACI	LITY INFO	DRWATI	ON	Type of Faci School Subcha Other (i	(K-12) pter 8 (Ot	her than K-1 & commerc	2) ial bui	Idings	, hom	ies,
City (5) NO.271+ BE.26-E.U							Square Feet 70, 00	e l			Bldg.		
County (6) HUDSON	=	County (Code (7) USE ONLY)			Current Use OFFICE		eing demolis ೧೬೫೦ಬರ್	ned)				
		ASCN	I No.			of Abatement ac Contrac							
Street Address							Address Lowell Roa	d					
City, State, Zip Code													
Project Manager for Monitoring Firm	Telephone No. Telephone No. License No. 201-262-5841 O0156												
	Alte, Zip Code City, State, Zip Code Glen Rock, N.J. 07452 Manager for Monitoring Firm Telephone No. 201-262-5841 Name of OSHA Monitor Omega Environmental Services Inc. 101 102 103 104 105 104 105 105 105 106 107 107 107 107 107 107 108 108												
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe:	riod of A	, Abater	nent s			280 F	duyler Streate, Zip Code						
≥3 sf or ≥3 If ≥160 sf or ≥260 If		Renova Demoli				公公公公	Mini-Enclos Glovebag I	sure Procedure	h Negative F			e	
Location of		Locat	lly		Dec	cription o					Abat	emen pe	t
Asbestos-Containing Material (ACM) TO BE ABATED In Facility	Mai Cust	d Sole intena odial ((12)	nce/	Asbesti (i.e. t	os Conta thermal surfac	aining Ma	iterial (ACM) insulation, , or	(Amount Specify F or LF)	Removal	Repair	Encapsulate	-Enclosure
mail Finz	100				**par ;	not d				+-	-		
			X	VA		- 1vi4.	5.70	1	000 35	1	-	-	_
THREAGHENT + MEZZANINE		1	×		ないう				100 SF -500	X	-		
Name of Registered Waste Hauler Rovic Transport		H	JDEP Walauler ID I	SATURDAY.	Cubic \of Was		1		ered Landfill hlehem La	indfil	l Cor	р.	
City, State Riverdale, New Jersey 07457					Dispes	al Date	City, S		PA 18015				
Completed by R. McDonald	Title Presi	dent		1	Si	gnature	1 Foods		Da	te /a	2/	12	

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

D&S Proj. #: MS 12-188 (Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2) Date of Notification (1) $\frac{0}{10} \frac{5}{10} \frac{1}{10} \frac$ SUSAN STANG Type Notification Agencies Notified Street Address | Initial EPA **46 DIXON AVENUE** ACRECIAS COM Amended DEP City, State, Zip Code Amendment #: DOL BOONTON, NJ 07005 Emergency Telephone Number (including DOH Name of Contact justification) DCA SUSAN STANG Cancellation FACILITY INFORMATION Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) SUSAN STANG Subchapter 8 (Other than K-12) Other (Private/Commercial Street Address Bldgs./Homes, etc. Bldg. Age # of Floors 46 DIXON AVENUE Square Feet City (5) County (6) County Code (7) (State use only) Current Use (Prior if being demolished) BONTOON MORRIS Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. 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 License Number Phone Number 00159 973-345-8020 Name of OSHA Monitor Sched. Completion Date (11) Start Date (10) D & S Restoration, Inc. 05/31/12 Street Address 06/08/12 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 \times >3 sf or >3 If Mini-enclosure □ Renovation Glovebag procedure ≥160 sf or ≥260 lf Demolition Non-Exempted (*) and Non-friable procedure R Is location normally used solely Location of E е by maintenance/custodial n Amount asbestos-containing Description of asbestos-containing n m staff(12) p C (Specify SF or material (acm) to be material (ACM) C 0 a abated in facility (13) N/A Yes No ν p е BASEMENT PIPE INSULATION 28 L FT X BASEMENT BARE HEATING PIPE 23 L FT X Registered Waste Hauler Cubic Yards of Waste Name of Registered Landfill NJDEP Hauler ID# D & S RESTORATION, INC. 13506 TULLYTOWN, RESOURCE RECOVERY 1 YD Disposal Date City, State City, State 06/01/12 PATERSON, NJ 07503 TULLYTOWN, PA Completed by (Print or Type) Signature Title Date BOGDAN JOLDZIC PRESIDENT 05/19/12

State of NJ Notification of Asbestos Abatement D&S Proj. #: MS 12-190 (Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2) Date of Notification (1) $|\frac{0}{5}|/|\frac{2}{1}|/|\frac{1}{2}|$ WYATT TURNER Agencies Notified Type Notification Street Address ASBESTOS CONTROL Initial EPA LICENSING 125 KENNETH TERRACE Amended DEP Amendment #: City, State, Zip Code DOL SO. ORANGE, NJ 07079 Emergency (including DOH Name of Contact Telephone Number justification) DCA WYATT TURNER Cancellation **FACILITY INFORMATION** Name of facility where abatement is taking place (3) Type of Facility (4) School (K - 12) WYATT TURNER Subchapter 8 (Other than K-12) Street Address Other (Private/Commercial Bldgs./Homes, etc. 125 KENNETH TERRACE Square Feet # of Floors Bldg. Age County (6) City (5) County Code (7) (State use only) Current Use (Prior if being demolished) SO. ORANGE **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 Telephone Number Project Manager for Monitoring Firm Phone Number License Number 00159 973-345-8020 Name of OSHA Monitor Sched. Completion Date (11) Start Date (10) D & S Restoration, Inc. 06/04/12 06/18/12 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 If Mini-enclosure □ Renovation Glovebag procedure ≥160 sf or ≥260 lf Demolition Non-Exempted (*) and Non-friable procedure Is location normally used solely E Location of Ε е by maintenance/custodial n asbestos-containing Amount Description of asbestos-containing n m staff(12) p C (Specify SF or material (acm) to be material (ACM) C 0 a a abated in facility (13) Yes No p PIPE INSULATION 64 L FT **BASEMENT-3 ROOMS** Registered Waste Hauler Cubic Yards of Waste Name of Registered Landfill NJDEP Hauler ID# D & S RESTORATION, INC. 13506 1 YDS TULLYTOWN, RESOURCE RECOVERY

* Do not use this form for scheetos licensure evennted activities

PRESIDENT

Title

City, State

PATERSON, NJ 07503

Completed by (Print or Type)

BOGDAN JOLDZIC

Disposal Date

06/05/12

Signature

City, State

TULLYTOWN, PA

Date

05/21/12

no chech				N OF ASB t to NJAC					programme over the same	FA	E	1 1	7 [= [
Date of Notification (1) May 21, 2012			Name of	of Building	Owner/O	Operator ON	(2)				[]	11 1	1 1	
Agencies Notified Type Notificati	on			Address ss Plaza						10/-	/ 2	3 %	52	1
X DEP X Amended Amended Amended	ent #1			ate, Zip Co Ibridge, N		ersey 0	7095		-	288	3108	CONI	RGL &	1
DOH justification Cancellat				of Contact nt ConFr	reda				11.	k1.,	mher		, , , , and a part	popular or on the
Name of Facility Where Abatement is Ta	king Place /	2)	FAC	ILITY INFO	DRMAT	ION	-							
HESS CORPORATION	king Flace (.)						of Facility				ŝ.		
Street Address Mutton Hollow							×	School (K- Subchapter Other (i.e. petc.)	r 8 (Othe	er than K-1 commerc	2) ial buil	dings	, hom	es,
City (5) Woodbridge,								re Feet	# of	Floors		Bldg. A		
County (6) Middlesex				Code (7) USE ONLY)			Curre	nt Use (Pri	or if beir	g demolis	hed)			
Name of Monitoring Firm Hired by Buildir Hillmann Environmental Group	g Owner (8)		ASCI	M No.				tement Cor						
Street Address 1600 Route 22 East							Addres	ss Y AVE.						
City, State, Zip Code Union, New Jersey 07083								ip Code NEW JE	RSEY	07011-	1802			
Project Manager for Monitoring Firm Craig Abaram	4.		Telepho 908-68	ne No. 88-7800			one No 478-4			License N 00724	lo.			
Start Date (10) May 22,2012	May 3	,2012		Date (11)				A Monitor		ON INC.				
Occupancy Status During Abatement (Ch	eck Only Or	ie)		 			Addres	illi					-	
Facility Closed/Vacated During Entir Abatement Performed Outside of No Other – Describe: 7:00am-3:30pm	e Period of A rmal Facility	Abatem Hours	ent			City, S	tate, Zi	Y AVE. p Code NEW JE	RSEY	07011-	1802			
Scope of Work (Check All That Apply)								0_		07011	1002			
≥3 sf or ≥3 if ≥160 sf or ≥260 if		enova emoliti				×	Min	Containme i-Enclosure vebag Prod -Exempted	e cedure				e.	
	Is	Location	on						1/2	11077 1 1100		Abate	men	1
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility	Use Ma	lormall d Solel intenar odial S	y by ice/		os Conta thermal	scription aining M systems	laterial insula		(Sp	nount pecify	Re		pe Enc	5
(13)	Yes	(12) No	N/A			cing, VA ⁻ niscellan			SF	or LF)	Removal	Repair	Encapsulate	Enclosure
Edge of Roof	100	110	×		Roof	f Flash	ina		72	5SF	77			
Five Rooms inside Bldg			×			VAT	iiig			0SF	X			
Behind Bathroom Mirror		,õ	X			or Mas	tic	-		SF	X			
											1			
Name of Registered Waste Hauler			JDEP W		Cubic `	Yards		Name of I	Register	ed Landfill	L			
Slavco Construction Inc.			auler ID 508	No.	of Was	ite		G.R.O.\	N.S LA	NDFILL				
City, State CLIFTON , NEW JERSEY 07011-	1802				Dispos TBD	al Date		City, State		Ξ, PA				-
Completed by VIVIAN D.JURCEVIC	Title GEN.	MGF	\.	1	Si	ignafure ////		kn	Mul	Da	te AY 2	1,201	12	
						since	UC d	in ne	Julle				vent0	

Date of Notification (1) May 10th, 2012						Owner/Op					1	<u> </u>		1	
Agencies Notified	Type Notification	1			Address s Plaza				400	J.E.	MA)	23	1 1 1	100	
× EPA × DEP × DOL	Amended Amendmen				ate, Zip C bridge,	ode New Jers	sey 0	7095	- /	t	Tr			- E	9 -
☑ DOH DCA	Emergency justification Cancellation)			of Contact nt Confr				Ener	Tel	ephone Nu	mber	HOAP Brown	-	
Name of Facility Where A	hatement is Taki	na Place (3/	FAC	ILITY INF	ORMATIO	N	LTimo	of Facility	1			•		
Amerada Hess Corp		ig riace (2)					learning.	of Facility (School (K-1	V. 100					
Street Address Kramer Site Mutton	Hollow Road,	Block 1	96E,	Lot10A				×	Subchapter Other (i.e. p etc.)	8 (Oth	er than K-1 commerc	2) ial buil	dings	, hom	ies,
City (5) Woodbridge,		X81.00					10	Squa 29,5	re Feet 524	# of	Floors		3ldg. 27 yr		
County (6) Middlesex					Code (7) USE ONLY	n	_	Curre	ent Use (Pri	or if bei	ng demolis	hed)			
Name of Monitoring Firm ENVIRO VISION CO	Hired by Building	Owner (8)		ASC	VI No.				atement Cor CONTRU						
Street Address 20-21 Wagaraw Roa	ad, Bldg.#34A					- 1		Addre	ss TY AVE.						
City, State, Zip Code FairLawn, New Jers	ey 07410					- 1			ip Code , NEW JE	RSEY	07011-	1802			
Project Manager for Moni Guillermo Morales	toring Firm			Telepho 973-6	one No. 36-9145			hone N 478-4			License N 00724	lo.	-		
Start Date (10) Schedule May 21, 2012 May 29					Date (11)				HA Monitor CONSTR	UCTIO	ON INC.				
Occupancy Status During	Abatement (Che	ck Only O	ne)		-			Addre							
Facility Closed/Vaca Abatement Performe Other – Describe: 7	ed Outside of Non	Period of a	Abate / Hour	ment rs		-	City, S	State, Z	Y AVE. ip Code , NEW JE	:BSE/	7 07011	1802			
Scope of Work (Check All	That Apply)						OLII	1014	, 11277 02	- I (OL I	0/011-	1002			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renov				×	Min	Il Containme ni-Enclosure ovebag Proc n-Exempted	e edure	_			re	
		Is	Loca	tion		i				7 / 01/	THOM THE	1		emen	t
Location Asbestos-Containing I TO BE ABA In Facilit (13)	Material (ACM)	Use Ma	intena	ely by ance/ Staff?		Desc stos Contai thermal s surfacir other mis	ystem: ng, VA	/lateria s insula T, or		(S	mount pecify or LF)	Removal	Repair	e Encapsulate	Enclosure
		Yes	No	N/A								=		ate	9
Edge of F				X		Roof	Flash	ning		72	25SF	x			
Five Rooms ins		55		X		\	/AT			98	30SF	Х			
Behind Bathroo	m Mirrors		,2	X		Mirro	r Mas	stic		7	5SF				
Name of Registered Wast										-					
Slavco Construction I			1	NJDEP W Hauler ID 8508		Oubic Ya of Waste			I standard one of		red Landfil ANDFILL				
City, State CLIFTON , NEW JEF	RSEY 07011-1	802				Disposa TBD	l Date		City, State MORRI		E, PA				
Completed by VIVIAN D.JURCEVIC	,	Title OFFI	CE N	/IGR.		Sig	nature		10Qu	iceie		ite AY 1	OTH	,201	 2
							1	-VV /	· ·					-	

Date of Notification (1)	/	2		The contract of		ng Owner/Operator		EGE	1 W	E		
☐ EPA	Notification tial nended nended hergency (instification) ncellation	t	i	City, We	t Address Stonele: State, Zip est Wind of Conta irley We	Code sor, NJ 08550		ASBESTOS CI	ONTROL			A STATE OF THE PROPERTY AND ADDRESS.
				FA	CILITY I	NFORMATION	* * ** **					
Name of Facility Where Abateme Residential Street Address 11 Stonelea Drive	ent is Takin	g Plac	e (3)					2) 8 (Other than K- rivate and comm		uildin	gs,	
City (5)							Square Feet	# of Floors	В	ldg. A	ge	
West Windsor			i				1900	2		50+		
County (6) Mercer						7)(STATE USE ONLY)	Residence	ior if being demo	lished)			
Name of Monitoring Firm Hired b	S. Company	Owner	(8)	ASCM	No.	Name of Abatem	10.					
Environmental Connectio	n					BRISTOL EN	VIRONMENTA	L, INC.				
Street Address						Street Address		\				
120 N Warren Street						1123 BEAVE						
City, State, Zip Code						City, State, Zip Co						
Trenton, NJ 08608			т= .			BRISTOL, PA	19007					
Project Manager for Monitoring F Rick Beach	irm			ephone		Telephone No.		License No.				
Start Date (10)	Caha	الديارا		09-392		215-788-6040		00509				
5 / _23 / _12		5		3 /	ite (11) 12	Name of OSHA N BRISTOL EN	fonitor VIRONMENTA	L, INC.				
Occupancy Status During Abaten Facility Closed/Vacated During Abatement Performed Outside	g Entire Pe	riod of	Abate	ment	cribe	Street Address 1123 BEAVE						
Time of Abatement: 7:00AM-	3:30PM/_	F	M	AM	Cribe	City, State, Zip Co						
Scope of Work (Check all that ap	ply)					2110102,17	. 10007					_
≥3 sf or ≥3 If ≥160 sf or ≥260 If		Million .	enovat emoliti			☐ Mini-Enc ☐ Glovebag	tainment with Neg losure g Procedure mpted (*) and No		ure			
			Loca				- I			atem	ent T	vpe
Location of Asbestos-Containing Material TO BE ABATED IN Facility (13)	(ACM)	Us:	Norma ed Sol aintena todial (12)	ely by ance/ Staff?	Asbe (i.e	Description of estos Containing Ma e., thermal systems is surfacing, VAT, other miscellane	terial (ACM) insulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A							(D)	
Foundation Heat Registers		\boxtimes			Transit	e		40 SF		\boxtimes		
												E
												Г
		П	In					1-70-0				
Name of Registered Waste Haule SERVICE TRANSPORT GR		L	1 1000	JDEP V lauler ID 20990	No.	Cubic Yards of Waste	Name of Regis				Ш	
City, State NEW CASTLE, DE 19720				20330		1/2 Disposal Date 5/21/12	City, State Morrisville,	PA 19067				<u> 2-10-3</u>
Completed By (Print or Type) Gino Pizzigoni	Title	stima	tor			Signature —	Para .		ate 5/	9/1	 2	
SB-41 MAY 11 GT D 0.97	. *!	Do not	use th	is form	for asbest	os licensure exemp	ted adjulities.	11	0/	11	2	-

GT MAGE

Check # 2277

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Date of Notification (1) 05 /	09 /	12				g Owner/Operator				1 1	419	7
		12		Le	on Lazari	us & Shirley We	itz					1
Agencies Notified EPA	Type Notifica			0.000	t Address Stonelea	Drive	1.3	L MAI	22 8	2012		
☑ DOLWD 145 8 ☑ DHSS 1441	Amended Amendme			City,	State, Zip (Code	1		Designation of the last of the	Ten roser		
DCA	Emergence		- Ia	We	st Winds	or, NJ 08550	Attack	127-47	110	V4 9		
(NJAC 5:23-8)	justificatio		9	Name	of Contac	et .		Telephone 1	Number		(Andrews)	# #47.540
	☐ Cancellation	on		Sh	irley Weit	tz						
				FA	CILITY IN	FORMATION		-			-	
Name of Facility Where	Abatement is Ta	aking Plac	e (3)				Type of Facility	(4)				
Residential							School (K-12	2)				
Street Address							☐ Subchapter ☐ Other (i.e., p	B (Other than I	K-12)	uildin		
11 Stonelea Drive							homes, etc.)		illiercial D	ulialité	ys,	
City (5)		-				~	Square Feet	# of Floors	В	ldg. A	ge	
West Windsor							1900	2		50÷		
County (6)	200			Cou	nty Code (7)(STATE USE ONLY)	Current Use (Pr	ior if being der	molished)			
Mercer	- As - Company						Residence					
Name of Monitoring Firm		ing Owner	(8)	ASCM	No.	Name of Abatem	ent Contractor (9)				-	-
Environmental Cor	nection					BRISTOL EN	VIRONMENTA	L, INC.				
Street Address						Street Address					****	
120 N Warren Stree	t					1123 BEAVE	R STREET					
City, State, Zip Code						City, State, Zip C	ode					
Trenton, NJ 08608						BRISTOL, PA	19007					
Project Manager for Mon	itoring Firm			ephone		Telephone No.		License No	o.			
Rick Beach				09-392		215-788-6040)	00509				
Start Date (10)		cheduled C				Name of OSHA N	Monitor					-
				3_/.	12	BRISTOL EN	VIRONMENTA	L, INC.				
Occupancy Status During		and the control of the same	C-1000 000 e-1			Street Address						
☐ Facility Closed/Vacate						1123 BEAVE	R STREET					
Abatement Performed Time of Abatement: 7	Outside of Nor :00AM-3:30PM	mai Facilit	y Hou M	rs - Des AM	scribe	City, State, Zip Co				15		
Scope of Work (Check al	that apply)					DIGIOL, I A	13007					-
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			enovat emolitio			☐ Mini-End	tainment with Neg losure g Procedure mpted (*) and No					
			Loca							atem	ent T	vne
Location			Norma ed Sole			Description of				1	T	-
Asbestos-Containing I TO BE ABA		Ma	aintena	ince/		stos Containing Ma ., thermal systems		Amount (Specify		Repair	Encapsulate	Enclosure
IN Facilit	У	Cus	todial (12)		(surfacing, VAT	, or	SF or LF) <u> _{a}</u>	=	usc	Sur
(13)		Yes	No	N/A		other miscellane	ous)				ate	"
Foundation Heat Reg	isters	⊠			Transite	e		40 SF	\neg		П	1
				+=-	 					+=-		+=
Name of Registered Wast	e Hauler			JDEP V	Nosta	Cubia Vand	This is				Ш	
SERVICE TRANSPO		INC		lauler IC		Cubic Yards of Waste	Name of Regis					
				20990	2	1/2	GROWS La	inatili				
City, State NEW CASTLE, DE 1	9720					Disposal Date 5/21/12	City, State Morrisville,	, PA 19067				
Completed By (Print or Ty	pe)	Title				Signature -	70.		Date			
Gino Pizzigoni		Estima	tor			H.	/		21	9/1	2	

GT DAGG