ETS JOB # 3802/12 NO Chach			::	MENDME	NT # 7 // //
Date of Notification (1) 5/18/2012	Name of Building Bed, Bath and	Owner / Operator (2)  Beyond	And the same of	2	- 3 2012
Agencies Notified	Name of Contact	Code 83 t	Lagar description of the	ASBESTOS ( LICEN	CONTROL 8 SING
DCA DCA	Mr. John Purc	ell			
2	FACILITY IN	IFORMATION			
Name of Facility Where Abatement is Taking Bed, Bath and Beyond Property Street Address	Place (3)	Type of Facility (4) School (K-12) Subchapter 8 (			
		Other (i.e., priv			
650 Liberty Avenue City (5) County (6)	County Code (7)	Square Feet	# of Floors	BIG	dg. Age <b>50+</b>
	County Code (7)	200,000 Current Use (Prior i		shed)	707
Union		Commmercial O	1.7	sileu)	
Name of Monitoring Firm Hired by Building Ov ATC Associates, Inc. Street Address 1090 King Georges Post Road, Suite 70	00098	o. Name of Abatemen  ETS Contracting  Street Address  160 Clay Street	t Contractor (9)	)	
City, State & Zip Code		City, State & Zip Co			
Edison, NJ 08837	Telephone Number	Brooklyn, NY 11 Telephone Number		License Nu	ımber
Project Manager for Monitoring Firm  Pat Sisk	(732) 771-0051	718-706-6300		LICENSC IVO	00511
The state of the s	ompletion Date (11)	Name of OSHA Mo	nitor		
4/25/2012	12/31/12	Environmental T	actics, Inc.		
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire Abatement Performed Outside of Nor	Period of Abatement	Street Address 64 Broad Street City, State & Zip Co	ode -		
Describe:  Other - Describe: Work Area Va	cated: - Working Hou	Matawan, NJ 077			
from 7:00 AM-	3:30 AM				
Scope of Work (Check all that apply)  □ Demolition		Mini-End Gloveba Other:	ng Procedure  Non Friable	Removal	**
Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13)	Is Location Normally Used Solely by Maintenance or Custodial Staff? (12)	Description of Asbestos-Containing Material (ACM) (i.e., thermal system insulation, surfacing, V or other miscellaneou	g (S Squa s Line /AT	mount Specify are Feet or ear Feet)	Abatement Type (Specify: Removal, Repair, Encapsulation or Enclosure)
1 <sup>st</sup> Floor	No -	VAT	100	,000 SF	Removal
2 <sup>nd</sup> Floor	No	VAT		,000 SF	Removal
2 <sup>nd</sup> Floor	No	Pipe Insulation		00 LF	Removal
Name of Registered Waste Hauler Tri State Transfer	NJDEP Waste Hauler 19551	Cu. Yds. of W 600			ered Landfill prises, Inc.
City, State Bronx, NY		Disposal Date TBD	City,	State <b>nesburg</b> ,	
Completed By (Print or Type) Title	ECT EXECUTIVE	Signature	h		Date 5/18/2012

	/	12	. 0	5	IMON GF	ing Owner/Operator	(2) (	in the second	1 15	1	1	
Agencies Notified  ☐ EPA  ☑ DOLWD 3438  ☑ DHSS 5805  ☐ DCA (NJAC 5:23-8)	Type Notificat  ☐ Initial ☐ Amended     Amendmen ☐ Emergency     justification ☐ Cancellation	nt # y (inclu	ding	City II Nar	v, State, Zip NDIANAP ne of Conta	WASHINGTON S Code OLIS, INDIANA 4	6204	A COS SONTO		-	And the second s	
						NFORMATION	ERS KEP.					
Name of Facility Where A QUAKERBRIDGE N Street Address 150 QUAKER BRID City (5)	ALL - OLD N	king PI	ace (3)				Mother (i.e., homes, et	12) er 8 (Other than K-1 private and comm	2) ercial	buildi	ngs,	
LAWRENCEVILLE,	NJ						Square Feet	# of Floors	T	Bldg.	Age	_
County (6) MERCER		9		Co	unty Code (	(7)(STATE USE ONLY)	Current Use (	Prior if being demol	lished)	)		
Name of Monitoring Firm VERTEX	Hired by Buildin	g Own	er (8)	ASC	/ No.	Name of Abateme						
Street Address 1102 BALTIMORE P	IVE					Street Address		AL, INC.				
City, State, Zip Code	INC					1123 BEAVE						
GLEN MILLS, PA 19	342					City, State, Zip Co BRISTOL, PA						
Project Manager for Monit			Tele	phone	No.	Telephone No.	19007	License No.				
DON HEIM Start Date (10)	To	ad. 1 .	0			215-788-6040		00509				
5 /24 / _	12 Sch		Comple /29		ate (11)	Name of OSHA M BRISTOL ENV					JAMES 1	
Facility Closed/Vacated Abatement Performed C Time of Abatement: 7:0 Scope of Work (Check all t	Outside of Norm 00AM-3:30PM/	al Faci	ity Hour	s - Da	scribe	1123 BEAVER City, State, Zip Co BRISTOL, PA	de 19007	i v				
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf			enovatio emolitio	on n		☐ Glovebag	Sure Procedure	gative Pressure				
☐ ≥3 sf or ≥3 lf			emolitio s Locati	n on	I	☐ Glovebag	Sure Procedure	gative Pressure	-			
☐ ≥3 sf or ≥3 lf	aterial (ACM)	Us M Cus	s Locati Normali ed Sole aintenar stodial S (12)	on ly ly by nce/ itaff?	Asbes (i.e.	☐ Glovebag	osure Procedure apted (*) and No erial (ACM) sulation,		-	Repair	T	-
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf  Location of Asbestos-Containing Ma TO BE ABATE IN Facility (13)	aterial (ACM) ED	Us M Cus	s Locati Normali ed Sole aintenar stodial S (12)	on ly ly by nce/ itaff?	(i.e.	Description of stos Containing Mate, thermal systems in surfacing, VAT, cother miscellaneous	osure Procedure apted (*) and No erial (ACM) sulation,	Amount (Specify SF or LF)	A Removal	T	en Encapsulate	-
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf  Location of Asbestos-Containing Ma TO BE ABATE IN Facility	aterial (ACM) ED	Us M Cu:	s Locati Normall ed Sole aintenar stodial S (12) No	on ly by loce/ staff?	RESIDU.	Description of stos Containing Mate, thermal systems in surfacing, VAT, cother miscellaneous	erial (ACM) sulation, or	Amount (Specify SF or LF)	A Removal	Repair	T	1
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf  Location of Asbestos-Containing Ma TO BE ABATE IN Facility (13)  PACE 2102 - REAR ST	aterial (ACM) ED  TORAGE  STORAGE	Us M Cus	s Locati Normall ed Sole aintenar stodial S (12) No	on ly ly by loce/ ltaff?	RESIDU. Residua	Description of stos Containing Mate, thermal systems in surfacing, VAT, cother miscellaneous AL MASTIC	erial (ACM) sulation, or	Amount (Specify SF or LF) 450 SF	Removal 🛛	Repair	Encapsulate	1
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf  Location of Asbestos-Containing Ma TO BE ABATE IN Facility (13)  PACE 2102 - REAR ST  PACE 2101 - CENTER	aterial (ACM) ED  TORAGE  STORAGE	Us M Cus	s Locati Normall ed Sole aintenar stodial S (12) No	on ly by hice/ ctaff?	RESIDUA Residua FLOOR	Description of stos Containing Mate, thermal systems in surfacing, VAT, cother miscellaneous AL MASTIC	erial (ACM) sulation, or	Amount (Specify SF or LF) 450 SF 1200 SF 500 SF	Removal 🛛 🕅	Repair	Encapsulate	1
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf  Location of Asbestos-Containing MaTO BE ABATE IN Facility (13)  PACE 2102 - REAR ST  PACE 2101 - CENTER  PACE 2105 - REAR ST	TORAGE STORAGE ORAGE Hauler	Us M Cu:	s Locati Normali ed Solel aintenar stodial S (12) No	on ly by hice/ ctaff?  N/A  DEP Wuler ID	RESIDUA Residua FLOOR	Description of stos Containing Mate, thermal systems in surfacing, VAT, cother miscellaneous AL MASTIC  I Mastic below Could be a surfacing to the miscellaneous AL MASTIC	Procedure Procedure Inpted (*) and No Perial (ACM) Sulation, or Jus)  Peramic Tile  Name of Regist	Amount (Specify SF or LF)  450 SF 1200 SF 500 SF	Removal 🛛	Repair	Encapsulate	Likiosure
Location of Asbestos-Containing Ma TO BE ABATE IN Facility (13)  PACE 2102 - REAR ST PACE 2101 - CENTER PACE 2105 - REAR ST PACE 2114 - MISC. In Facility (13)	TORAGE STORAGE ORAGE Hauler	Us M Cus	s Locati Normali ed Solel aintenar stodial S (12) No	on by by by bice/ bitaff?	RESIDUA Residua FLOOR RESIDUA //aste No.	Description of Non-Exem  Description of Stos Containing Mate, thermal systems in surfacing, VAT, cother miscellaneous AL MASTIC  I Mastic below Countries  AL MASTIC  Cubic Yards of Waste	erial (ACM) sulation, or us)	Amount (Specify SF or LF)  450 SF 1200 SF 500 SF 1600 SF	Removal 🛛 🕅	Repair	Encapsulate	ype

150 QUAKER BRIDGE MALL  City (5)  LAWRENCEVILLE, NJ  County (6)  MERCER  Name of Monitoring Firm Hired by Building Owner (8)  VERTEX  Street Address  1102 BALTIMORE PIKE  City, State, Zip Code  GLEN MILLS, PA 19342  Project Manager for Monitoring Firm  DON HEIM  Start Date (10)  5 / 24 / 12  Scheduled Completion Date (11)  Docupancy Status During Abatement (Check only one)  Facility Closed/Vacated During Entire Period of Abatement  Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement:  AMPM/9:00PM-5:30AM  County Code (7)(STATE USE ONLY)  Current U  Name of Abatement Contrace BRISTOL ENVIRONME  City, State, Zip Code City, State, Zip Code BRISTOL ENVIRONME  Street Address  1123 BEAVER STREE*  City, State, Zip Code BRISTOL, PA 19007  Scope of Work (Check all that apply)	Telephon  cility (4) (K-12) pter 8 (Other that e., private and cetc.) et # of Floor e (Prior if being or (9)  NTAL, INC.  License 0050	ors E demolished)	VTRO VC	012. 01.8		The state of the s
Agencies Notified □ EPA □ DOLWD □ DHSS □ DCA □ (NJAC 5:23-8) □ DCA □ (NJAC 5:23-8) □ Cancellation □ MATTHEW ELICKER - OWNERS REP  FACILITY INFORMATION  Name of Facility Where Abatement is Taking Place (3) □ QUAKERBRIDGE MALL - OLD NAVY □ School □ Subchs □ Square Fe  LAWRENCEVILLE, NJ  County (6) ■ MERCER  Name of Monitoring Firm Hired by Building Owner (8) ■ VERTEX  Street Address  1102 BALTIMORE PIKE □ City, State, Zip Code INDIANAPOLIS, INDIANA 46204  Name of Contact MATTHEW ELICKER - OWNERS REP FACILITY INFORMATION  Type of Fi School □ Subchs □ Other I Nomes ■ Square Fe Square Fe Square Fe Square Fe City (5) ■ County Code (7)(STATE USE ONLY) □ Current U ■ BRISTOL ENVIRONME ■ Street Address ■ 1123 BEAVER STREE*  City, State, Zip Code GLEN MILLS, PA 19342  Project Manager for Monitoring Firm DON HEIM □ DON HEIM □ Scheduled Completion Date (11) □ 5	Telephon  cility (4) (K-12) pter 8 (Other thate, private and cetc.) et # of Floor e (Prior if being or (9) NTAL, INC.	an K-12) commercial body demolished)	VTRO VC	OL &		
□ EPA □ DOLWD □ Amended Amendment #1-5/23/12 □ Emergency (including justification) □ Cancellation □ Cancellati	Telephon  cility (4) (K-12) pter 8 (Other thate, private and cetc.) et # of Floor e (Prior if being or (9) NTAL, INC.	an K-12) commercial body demolished)	VTRO VC	OL &		
Amendment #1-5/23/12   Emergency (including justification)   Cancellation   Name of Contact MATTHEW ELICKER - OWNERS REP FACILITY INFORMATION   Type of Fig. School Subch.   School Subch.   Square Fe	Telephon  cility (4) (K-12) pter 8 (Other thate, private and cetc.) et # of Floor e (Prior if being or (9) NTAL, INC.  License 0050	an K-12) commercial to demolished)	v()	lings,		
DHSS	Telephon  cility (4) (K-12) pter 8 (Other thate, private and cetc.) et # of Floor e (Prior if being or (9) NTAL, INC.  License 0050	an K-12) commercial to demolished)	v()	lings,		
Name of Contact   MATTHEW ELICKER - OWNERS REP	cility (4) (K-12) pter 8 (Other that e.e., private and cetc.) et # of Floor or (9) NTAL, INC.	an K-12) commercial to	, <sup>7</sup>	lings,		
Cancellation	(K-12) pter 8 (Other that e., private and cetc.) et # of Floor e (Prior if being or (9) NTAL, INC.	ors E demolished)				
Name of Facility Where Abatement is Taking Place (3) QUAKERBRIDGE MALL - OLD NAVY  Street Address 150 QUAKER BRIDGE MALL  City (5) LAWRENCEVILLE, NJ  County (6) MERCER  Name of Monitoring Firm Hired by Building Owner (8) VERTEX  Street Address 1102 BALTIMORE PIKE  City, State, Zip Code GLEN MILLS, PA 19342  Project Manager for Monitoring Firm DON HEIM  Start Date (10) 5 / 24 / 12	(K-12) pter 8 (Other that e., private and cetc.) et # of Floor e (Prior if being or (9) NTAL, INC.	ors E demolished)				
Name of Facility Where Abatement is Taking Place (3) QUAKERBRIDGE MALL - OLD NAVY  Street Address 150 QUAKER BRIDGE MALL  City (5) LAWRENCEVILLE, NJ  County (6) MERCER  Name of Monitoring Firm Hired by Building Owner (8) VERTEX  Street Address 1102 BALTIMORE PIKE  City, State, Zip Code GLEN MILLS, PA 19342  Project Manager for Monitoring Firm DON HEIM  Start Date (10) 5 / 24 / 12	(K-12) pter 8 (Other that e., private and cetc.) et # of Floor e (Prior if being or (9) NTAL, INC.	ors E demolished)				
Street Address 150 QUAKER BRIDGE MALL  City (5)  LAWRENCEVILLE, NJ  County (6)  MERCER  Name of Monitoring Firm Hired by Building Owner (8)  VERTEX  Street Address 1102 BALTIMORE PIKE  City, State, Zip Code GLEN MILLS, PA 19342  Project Manager for Monitoring Firm  DON HEIM  Start Date (10)  5 / 24 / 12	(K-12) pter 8 (Other that e., private and cetc.) et # of Floor e (Prior if being or (9) NTAL, INC.	ors E demolished)				
150 QUAKER BRIDGE MALL.  City (5)  LAWRENCEVILLE, NJ  County (6)  MERCER  Name of Monitoring Firm Hired by Building Owner (8)  VERTEX  Street Address  1102 BALTIMORE PIKE  City, State, Zip Code  GLEN MILLS, PA 19342  Project Manager for Monitoring Firm  DON HEIM  Start Date (10)  5 / 24 / 12  County Code (7)(STATE USE ONLY)  Scheduled Completion Date (11)  DOCUPANCY State, Zip Code  BRISTOL ENVIRONME  City, State, Zip Code  GLEN MILLS, PA 19342  BRISTOL, PA 19007  Telephone No.  215-788-6040  Start Date (10)  5 / 24 / 12  Cocupancy Status During Abatement (Check only one)  Facility Closed/Vacated During Entire Period of Abatement  Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement:  AM-  PM/9:00 PM-5:30 AM  Full Containment wi	e., private and detc.)  et # of Floor  e (Prior if being or (9)  NTAL, INC.  License  0050	ors E demolished)				
City (5) LAWRENCEVILLE, NJ  County (6) MERCER  Name of Monitoring Firm Hired by Building Owner (8) VERTEX  Street Address 1102 BALTIMORE PIKE  City, State, Zip Code GLEN MILLS, PA 19342  Project Manager for Monitoring Firm DON HEIM  Start Date (10) 5 / 24 / 12  County Code (7)(STATE USE ONLY)  Current U  Name of Abatement Contrace BRISTOL ENVIRONME  Street Address 1123 BEAVER STREE  City, State, Zip Code BRISTOL, PA 19007  Telephone No. 215-788-6040  Start Date (10) 5 / 24 / 12 5 / 29 / 15  BRISTOL ENVIRONME  Scheduled Completion Date (11) BRISTOL ENVIRONME  Occupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement:  AM- PM/9:00 PM-5:30 AM  Full Containment wi	etc.) et # of Floor e (Prior if being or (9) NTAL, INC.  License 0050	demolished)				
City (5) LAWRENCEVILLE, NJ  County (6) MERCER  Name of Monitoring Firm Hired by Building Owner (8) VERTEX  Street Address 1102 BALTIMORE PIKE  City, State, Zip Code GLEN MILLS, PA 19342  Project Manager for Monitoring Firm DON HEIM  Start Date (10) 5	et # of Floor e (Prior if being or (9) NTAL, INC.  License 0050	demolished)	ldg.	. Age		
County (6)  MERCER  Name of Monitoring Firm Hired by Building Owner (8)  VERTEX  Street Address  1102 BALTIMORE PIKE  City, State, Zip Code  GLEN MILLS, PA 19342  Project Manager for Monitoring Firm  DON HEIM  Start Date (10)  5 / 24 / 12  Scheduled Completion Date (11)  Facility Closed/Vacated During Abatement (Check only one)  Facility Closed/Vacated During Entire Period of Abatement  Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement:  AM-  PM/9:00PM-5:30AM  ASCM No.  Name of Abatement Contrace  BRISTOL ENVIRONME  City, State, Zip Code  BRISTOL, PA 19007  Street Address  1123 BEAVER STREE*  City, State, Zip Code  BRISTOL ENVIRONME  City, State, Zip Code  BRISTOL, PA 19007  Street Address  1123 BEAVER STREE*  City, State, Zip Code  BRISTOL, PA 19007	Dr (9) NTAL, INC.  License 0050	∍ No.				
Name of Monitoring Firm Hired by Building Owner (8)	Dr (9) NTAL, INC.  License 0050	∍ No.				
Name of Monitoring Firm Hired by Building Owner (8) ASCM No.  VERTEX  Street Address  1102 BALTIMORE PIKE  City, State, Zip Code  GLEN MILLS, PA 19342  Project Manager for Monitoring Firm  DON HEIM  Start Date (10)  5 / 24 / 12  Scheduled Completion Date (11)  Docupancy Status During Abatement (Check only one)  Facility Closed/Vacated During Entire Period of Abatement  Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement:  AMPM/9:00PM-5:30AM  Name of Abatement Contract  BRISTOL ENVIRONME  City, State, Zip Code  BRISTOL ENVIRONME  Street Address  1123 BEAVER STREET  City, State, Zip Code  BRISTOL, PA 19007  Scope of Work (Check all that apply)	License					
Street Address 1102 BALTIMORE PIKE  City, State, Zip Code GLEN MILLS, PA 19342  Project Manager for Monitoring Firm DON HEIM  Start Date (10) 5 / 24 / 12  Coccupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement:  AMPM/9:00PM-5:30AM  Street Address 1123 BEAVER STREE  City, State, Zip Code BRISTOL ENVIRONME  Street Address 1123 BEAVER STREE  City, State, Zip Code BRISTOL, PA 19007  Full Containment wi	License					
Street Address  1102 BALTIMORE PIKE  City, State, Zip Code GLEN MILLS, PA 19342  Project Manager for Monitoring Firm DON HEIM  Start Date (10) 5 / 24 / 12  Scheduled Completion Date (11) Coccupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement:AMPM/9:00PM-5:30AM  Street Address 1123 BEAVER STREE  City, State, Zip Code BRISTOL ENVIRONME  City, State, Zip Code BRISTOL, PA 19007  Full Containment wi	License 0050					
City, State, Zip Code GLEN MILLS, PA 19342  Project Manager for Monitoring Firm DON HEIM  Start Date (10) 5 / 24 / 12  Coccupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement:  AM- PM/9:00PM-5:30AM  City, State, Zip Code BRISTOL, PA 19007  Street Address  1123 BEAVER STREE  City, State, Zip Code BRISTOL, PA 19007  Full Containment wi	License					
City, State, Zip Code GLEN MILLS, PA 19342  Project Manager for Monitoring Firm DON HEIM  Start Date (10) 5 / 24 / 12  Coccupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement:  AM- PM/9:00PM-5:30AM  City, State, Zip Code BRISTOL, PA 19007  City, State, Zip Code BRISTOL, PA 19007  Full Containment wi	License					
GLEN MILLS, PA 19342  Project Manager for Monitoring Firm  DON HEIM  Start Date (10)  5	0050					
Project Manager for Monitoring Firm  DON HEIM  Start Date (10)  5  / 24  / 12  5  / 29  / 15  Scheduled Completion Date (11)  Occupancy Status During Abatement (Check only one)  Facility Closed/Vacated During Entire Period of Abatement  Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement:  AM-  PM/9:00  PM-5:30  AM-  PM/9:00  Full Containment wi	0050					
Start Date (10)  Scheduled Completion Date (11)  Scheduled Completion Date (11)  BRISTOL ENVIRONME  Occupancy Status During Abatement (Check only one)  Facility Closed/Vacated During Entire Period of Abatement  Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement:  AM-  PM/9:00PM-5:30AM  Scope of Work (Check all that apply)		9				
	NTAL, INC.					
Occupancy Status During Abatement (Check only one)  Facility Closed/Vacated During Entire Period of Abatement  Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement:AMPM/9:00PM-5:30AM  Scope of Work (Check all that apply)  Street Address  1123 BEAVER STREE  City, State, Zip Code BRISTOL, PA 19007	NTAL, INC.					
☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement:AMPM/9:00PM-5:30AM						-
Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement:AMPM/9:00PM-5:30AM City, State, Zip Code BRISTOL, PA 19007  Scope of Work (Check all that apply)						
Time of Abatement:AMPM/9:00PM-5:30AM BRISTOL, PA 19007  Scope of Work (Check all that apply)						
Scope of Work (Check all that apply)						
☐ Full Containment wi				157		N
□ ≥3 sf or ≥3 lf       ☑ Renovation       ☐ Mini-Enclosure         ☑ ≥160 sf or ≥260 lf       ☐ Demolition       ☐ Glovebag Procedure         ☑ Non-Exempted (*) a	J					
Is Location			bate	emen	nt Ty	pe
Location of Normally Description of Used Solely by Ashestos Containing Material (ACM)	.		-			-
Asbestos-Containing Material (ACM) TO BE ABATED  Used Solely by Maintenance/ Maintenance/ (i.e., thermal systems insulation,	Amou (Spec		Kepair	Pos :	ca	nclo
IN Facility Custodial Staff? surfacing, VAT, or	SF or	LF)	-	٦	Encapsulate	Enclosure
(13) (12) other miscellaneous) Yes No N/A					ate	
SPACE 2102 - REAR STORAGE	450	SF 🗵	1=	] [	at	
SPACE 2101 - CENTER STORAGE   Residual Mastic below Ceramic	ile 1200		-	-		
SPACE 2105 - REAR STORAGE	500	SF 🗵	E	1		
SPACE 2114 - MISC.	1600	SF 🗵		][		
I I - J - J D N - J N - J - J N - J - J	Registered Land	Ifill				
City, State 18706 Disposal Date City, Sta	Market State Control of the State of the Sta					
BRISTOL, PA MORI	ISVILLE, PA					
Completed By (Print or Type)  PATRICK T. DeCARO  Estimator  Signature  Patrick  Title	00/	Date 5	13	//.	2	

Check# 80.45

Date of Notification (1)								160	14	T 0	0.	1.	) .			
2-9-12					of Building kheed					3 16	L.P	17	153	1	77	
	Notification			Street	Address						dia 1	- 1/	45	11		1
1 100 2000 00 1000 0 10 10 10 10 10 10 10 10 10	Initial				Borto		nding	Road						1		
	Amended Amendment	#		100000	ate, Zip C			1	.3 1.	1.5	4 9	2012				
	Emergency (		]		restow		080	5/ 1			-11				-	
	justification) Cancellation			STATE OF THE PARTY	ul Kim	5		ě		4	elephon	ie Nun	nber_		9	
	Curiocitation			V-10/ VAN	ILITY INF		ION		-	- N	no - Transporter	F/E: 300mm			1	
Name of Facility Where Abaten Lockhead Martin,	nent is Taking Inc.	Place (	3)	IA	10111111	Ordina	1014		of Facility		- 1 Politica (in	लेखु <u>का</u>	Kan La I			V
Street Address 199 Borton Landin	g Road	*			7/				School (K- Subchapte Other (i.e. etc.)	er 8 (Ot	ther than & com	n K-12 mercia	) al buil	dings	, hom	ies,
City (5) Moorestown								Squa	re Feet	#	of Floor	'S	E	Bldg. 7		
County (6) Burlington				County (STATE	Code (7) USE ONLY	n		Curre	nt Use (Pr	rior if b	eing der	molish	ed)			- 1
Name of Monitoring Firm Hired	by Building O	wner (8	)	ASCI	M No.		Name	of Aba	tement Co	ntracto	or (9)					
Harvard Environmer	ntal						Marian Company		h Envi		30.35	1 0	, -	[nc		
Street Address					i i		Street			1011	iciica		-1-	1110		-
760 Pulaski Highwa	ay						923	Haw	s Aver	iue						
City, State, Zip Code	1						City, S	tate, Zi	p Code					-		
Bear, DE 19701							Nor	rist	own, F	PA 19	9401					
Project Manager for Monitoring Chuck Styles	Firm			Telepho	ne No. 26–233	22	Teleph				Licer	nse No				
Start Date (10)		Schedul	ed Co		Date (11)				-9920 IA Monitor			00	398	3		
2/22/12		12/2	8/12		Date (11)		Plyn	nouth	n Envi		ental	Co	.,I	nc.		
Occupancy Status During Abate							Street		( <del>10</del> )	*						
<ul> <li>☐ Facility Closed/Vacated Du</li> <li>☐ Abatement Performed Outs</li> </ul>	Abatement Performed Outside of Normal Facility								Aven	ue						
CK Other - Describe: work	ted	5			City, St			n 10	401		*					
Scope of Work (Check All That /	Other - Describe: work areas isolate  ope of Work (Check All That Apply)						NOLL	ısıc	own, P	4 194	401					
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		T					₩	1001	n-Exempte	a (*) ar	na Non-	Friable		1000	e emen	
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Building 127-2nd fl	loor hal	L	х		fire	proof	ing			2.1	00 SI	7	х		-	
-room 1	128		х		fire	proof:	ing	X			00 SE		х			
-room 2	228		X		fire	proof	ing			1,3	00 SE	-	X			
LBTS Building	t	Х	VAT	∛ mast	tic	•			00 SE		Ÿ.					
Name of Registered Waste Haule		l		JDEP W		Cubic '			Name of	Regist	ered La	ndfill				
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City, State Camden, NJ						Dispos Vario	al Date DUS		City, Stat		n, PA	7				
Completed by	WCC/Whitelessor	Title			. 10	S	ignature		1	11	)	Date	)			
Timothy E. Bryan		eside	nt	1	_/		111	13	5	2/	9/1	2		-556047744		

Date of Notification (1) 5–22–12					of Building kheed 1					POUR				
37	Type Notification	-		Street	Address Borto			1 1		g 23	2012	į.		
□ DEP □	□ Initial  X Amended	1			tate, Zip C				<u></u>			-		1
DOL X	Amendment  Emergency (		_		restow		080	57	L	ASBESTOS CO	NIAGL E	Maria eng		and the same of th
⊠ DOH	justification)  Cancellation	ii lolaali ig			of Contact L Kim				-	Telephone	Nümber			
Name of Facility Where Ab	atement is Taking	Dlace /	31	FAC	CILITY INF	ORMATI	ON	Tuna of Fa	ailite . (4)					
Lockheed Martin	, Inc.	y riace (	رد,					Type of Fa	1000000					
Street Address 199 Borton Land	ing Road							☐ Subch	ol (K-12 napter 8 (i.e. pri	) (Other than k vate & comme	(-12) ercial bu	ilding	s, hon	nes,
City (5) Moorestown								Square Fee		# of Floors		Bldg. 50y		
County (6) Burlington					Code (7) USE ONLY	0		Current Use offices	e (Prior S	if being demo	olished)			
Name of Monitoring Firm H		Owner (8	)	ASC	M No.			of Abatemer		(A-10) (A-11) (A-10) (A-10)			-	
Harvard Environ	mental								viro	nmental	Co.,	Inc		
760 Pulaski Hig	hway							Address Haws Av	zenue	<u> </u>				
City, State, Zip Code								ate, Zip Coo						
Bear, DE 19701	. P							istown,	PA					
Project Manager for Monito Chuck Styles				Telepho 302-	326–23	33		one No. 239–992	20	License 003				
Start Date (10) 2/22/12					Date (11)			of OSHA Mo		onmental	CO	Tnc		-1
Occupancy Status During A	batement (Check	8/12 ne)		<del></del>			Address	IVII	JIIICITCAL .	co.,		•		
☐ Facility Closed/Vacate	d During Entire P	Abaten	nent				Haws A	venue	9					
Abatement Performed Other – Describe: _ w	Outside of Norma	v Hours	3		// e		ate, Zip Cod ristown		19401		<del></del>			
Scope of Work (Check All T	hat Apply)													
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Asbestos-Containing Ma <u>TO BE ABATE</u>		Ma	intena	nce/				aterial (ACM insulation,	)	Amount (Specify	73	-	E	Ū.
In Facility (13)		Cus	todial 8 (12)	statt?		surfaci other mi	ing, VAT	, or		SF or LF)	Remova	Repair	Encapsulate	Enclosure
: <b>&gt;</b> 2000.€		Yes	No	N/A		outer in	ioociiaik	,003)			Val	=	ulate	ure
Building 127-2nd	floor hal		х	1	firep	roofin	ng		+	2,100 SF	x	$\vdash$	-	$\vdash$
-roo	m 128		X		firep	roofin	ng			1,300 SF				
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LBTS Building		х	VAT &	masti	LC			500 SF	x		1			
Name of Registered Waste I Waste Management	I A SOUTH	JDEP V auler ID 3912	No.	Cubic Y of Wast 30	te	7,590	e of Re	gistered Land	fill	٠	J			
City, State Camden, NJ				Disposa	al Date	1 (Activity of 1971)	State	town!, PA						
Completed by		Title					gnature	1 1	//	, , ,	Date			
Timothy E. Bryan		Vic	e-Pr	eside	ent		-		16	4	5-22	-12		

# State of Now Jersey MOTEGATION OF ASSESTOS ABATEMENT CONTROL TO MAC 8:60 and 12:120)

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Name of Facility Where	Abatement is Takir	g Place (3)	er	and the first	-	Type of Facility					
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(8)				44 - 44 4 444 4	Street Address	777.77.77	La Constanting Control	****	100 p. at 1 400		
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6-1-12 Occupancy Status Du		Charles and the second section of the		S. (13 12 11	Street Address			2002			
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Other - Describe:	JAM-	7pm			Cotil.	NEGE	NS #2	L.E.	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
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TO BE AD IN Faci		Staffs		ti.v.	surfacing, VA	f, or	SF or LF)	Remove	Reper	TOROSCIETA	0
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ASB 41						anda Laciniine					

State of New Jersey
PROFICATION OF ASSESTED ADACEMENT
(Pursuant to PLAC 8:60 and 12:120)

	Plane of Highlin	g Owner/Operator (2)	ELGET	M E E
trate of Modification (i) 5-24-12	1 1 6	VAN HOUTEN	らい多世	V G IN
Agencies Notified Type Notification	Street Address	or I CUDA		
Letter Letter	37.7		F MAY 29 2	02 11111
TOOL Amended	City, Stolle, Zip		50	
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[	77 6 You	N SAKOVILL	LIGENSTATE	
	(ACILIA)M	COMMATION	See an artist of the	
Name of Facility Where Abatement is Taking	Place (3)	Type of Facility		4
VAN HUUTSN PA	UP3817	(i.e., )	- 8 (Office from N=12) private & communicial	buildings,
435 VAN HOUTSM	AVG	homes, etc Square Feet	1 Tot Floors	Tuidg, Ago
(b) City (b)	n 10 70 70 10 10 10 10 10 10 10 10 10 10 10 10 10	1//200	La min	80
PASSALE	County Code	ra retate Cuncii Uso (i	dor if heing demolist	uei)
County (6)	USE ONLY)	1 (	STURY STRU	15000
Name of Monitoring Firm Hired by Huilding C	wher   ASCM No.	The man Contractor (	9)	
(8)		ACE INSOLA	Tigin He	1.000
Street Address	and address on the annual contract of	Street Address 9.5 Marst Trass	0202	
City, State, Zip Code		COLTS Micsetels and	J 07722	
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Telephone No.	Telephone No.	License No.	
Project Manager for Monitoring Plum	TOMPANN.	1782 294 1151	0002	
Start Date (10) Schur	fuled Completion Date (11)	Mame of OSHA Monitor	1 C. Tala	
5.11-12 (6	01-12	AIGE IN SULMITI	and plan	
Occupancy Status During Abatement (Chec	ck only one)	Street Address 95 Mon Mark Market	2À	
[7] Facility Closed/Vacated During Entire Pe	riod of Abatement Exertity Hours	City State, Zio Code		
Abatement Performed Outside of Mormal     Other - Describe:   7 Avg -	7,000	COLTS NECK	AUS. DIT	124
Scope of Work (Check all that apply)	Secretary of the second	[ ] Full Containment with h		
	[ ] [kdnovation	i TMini-Enclosure	332,000	
	Demolition	Slovebag Procedure (*) and	Mon-Friable Procedu	0
2	I Is Location	)/////////////////////////////////////		Abalement
	idonnally	ry		1.1
Location of	Used Solely by Maintenance/ Ash	Description of estos Containing Material (ACM)	Amount (Specify	
Asbestos-Containing Material (ACM) TO BE ABATED	Custodial (i. Staff?	e., thermal systems Insulation, surfacing, VAT, or	SE or LF)	Remove
IN Facility (13)	(12)	other miscellaricous)		Remove.
1	Yes No MA			
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programme sense a contract		1000-1100		
	and the second second	<ol> <li>I methodological policy policy for the property of the property o</li></ol>		
1 Annual Control of the Control of t	N.IDEP Waste	Cubic Yards   Name of Re	igistered Landfill	
Name of Registered Waste Hauter	When I Hauter ID Mo.	of Waste CY GR	0 W 2	
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Date of Notification (1) 5-24-2012	Name - W				Building k Hous					E C		\\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	IL.			
Agencies Notified	Type Notification			Street Ad					Ilenii		y 29	-01	110			-
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DOH DCA	justification) Cancellation				iannetti					1.01	FIGERS	MING	a metalogical	***************************************	A - BANCON (179)	eti.
					LITY INFO	ORMAT	TION		197.数	Light of the Control	Medic According to	3.00	1 241 5			
Name of Facility Where A		54 (V.)						Туре	of Facility	(4)						
James Baxter Terra	ace - Unoccupie	ed Bldg.	# 5						School (K-		or than V	12)				
Street Address 57 Sussex Ave.									Other (i.e.				build	lings,	home	es,
- management						<del></del>		_	etc.) are Feet	# of	Floors		I B	ldg. A	ne	
City (5) Newark, NJ 07102								15,	000	3			5	iug. 7		
County (6)	100000000000000000000000000000000000000			County C	Code (7)			1	ent Use (Pr					_		
Essex									occupied	_		uled	1 TOI	Der	no	
Name of Monitoring Firm Lewis Consulting G		Owner (8)		ASCM n/a	l No.				atement Co ntracting		(9)					
Street Address				1			Street	t Addre	ess							
40 Clinton Str., 6th	Floor Suite 101							Froy L								
City, State, Zip Code							0.000		Zip Code	7005						
Newark, NJ 07102			- 1						ark, NJ 0	17035	License	No				
Project Manager for Mon Leon	itoring Firm			Telephor	ne No.			hone N -706-			01088			ş		
Start Date (10)		ed Con	pletion [	Date (11)		District Assetting		HA Monitor		311/2/2/2						
6-4-2012		2012						ntracting	LLC							
Occupancy Status During	g Abatement (Chec	k Only Or	ne)					t Addre								
Facility Closed/Vaca								Troy L	Zip Code							
X Other – Describe:							A CONTRACTOR OF THE PARTY OF TH		ark, NJ 0	7035		20022				
Scope of Work (Check Al	I That Apply)						_	_								
≥3 sf or ≥3 lf			Renova				-	7.45	III Containm		Negative	e Pre	essui	re		
× ≥160 sf or ≥260 lf		×	Demolit	ion				GI	ini-Enclosur ovebag Pro	cedure						
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Name of Registered Was	te Hauler	100	JDEP W		2500000	c Yards		Name of	Registe	ered Land	Hill			98		
Global Waste Service	ces	4 53	auler ID 2171	INO.	TBE	aste O			and Co	). 						
City, State Hacketstown, NJ	3 2			110	Disp TBI	osal Date	9	City, Sta Mellvil		11704					productive services	
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Lillie Lazarevich		Secr	etary						Laze	m	70	5-2	4-2	012		

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

Date of Notification (1) 5-24-2012				Name of	Building (	Owner/Oper	rator	(2)	12		33 - T	1	
Agencies Notified	Type Notification			Street Ad	ddress	- Colombo		1111	MAR Z	5 1	1	1 marin	4
EPA DEP DOL	Initial Amended Amendment		_	City, Sta	te, Zip Co	de		a de la companya de l	ASBESTOS	CONTRO	-8		1
DOH DCA	Emergency ( justification) Cancellation	including		Name of	Contact			Same in the property of the	Telephone		ATTACK TO		
Name of Facility Where	Abatament is Taking	Place (3)		FACII	LITY INFO	RMATION		Type of Facility (	4)				
Name of Facility Where	Abatement is Takint	g Place (3)											
Street Address		10-11-11-11			2/8				2) 8 (Other than private & comm		ilding	s, hon	ies,
City (5)			33.E 37009-					Square Feet	# of Floors		Bldg	Age	
County (6)				County C	Code (7) ISE ONLY)		-	Current Use (Pri-	or if being dem	olished)			
Name of Monitoring Firm	Hired by Building (	Owner (8)		ASCM	No.	N	ame	of Abatement Cor	ntractor (9)				
Street Address		2014 Pro - 2014 Pro Pro				St	treet	Address					
City, State, Zip Code				***		Ci	ity, S	tate, Zip Code	*		170120		
Project Manager for Mon	nitoring Firm		T	Telephor	ne No.	Te	eleph	ione No.	Licens	se No.			
Start Date (10)		Scheduled	l Corr	pletion [	Date (11)	Na	ame	of OSHA Monitor					
Occupancy Status Durin	g Abatement (Chec	c Only One	)			St	reet.	Address	X				
Facility Closed/Vac Abatement Perform Other – Describe:	atem Hours	ent		Ci	ty, S	tate, Zip Code							
Scope of Work (Check A	II That Apply)												
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Interio				VAT &	Mas	stic	3700 SF	4	-	-			
Name of Registered Was	0.000000	JDEP Wauler ID		Cubic Yar of Waste	rds	Name of	Registered Lar	ndfill					
City, State					-	Disposal [	Date	City, Stat	е		(10,5,747)	7/	
Completed by Lillie Lazarevich		Title Secre	tarv	17		Signa	ature	lie Laze	2	Date 5-24-	201	2	
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Date of Notification (1) 5-24-2012					f Building rk Hous				113.0	The state of the s	7 FU 1	101	۷		The second secon	And the same of th
Agencies Notified	Type Notification			Street A		-				111	MAY	2 9	Z	112	Lune	1
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Name of Facility Where	C C C C C C C C C C C C C C C C C C C		150					Type of	f Facility	(4)			-			
James Baxter Terra	ace - Unoccupie	d Bldg.	.#6						chool (K-							
Street Address 57 Sussex Ave.									ubchapte ther (i.e. p					lings,	home	es,
City (5)								Square		# of	f Floors		В	ldg. A	ge	
Newark, NJ 07102								15,00		3				+ 0		
County (6) Essex					Code (7) USE ONLY				t Use (Pri cupied					Der	no	
Name of Monitoring Firm	Hired by Building C	Owner (8)		ASCM	i No.		Name	of Abate	Value - Transmission							
Lewis Consulting G				n/a				ar Cont			. ,					
Street Address					=======================================		Street	Address								
40 Clinton Str., 6th	Floor Suite 101							roy La					250.			
City, State, Zip Code							3.55	State, Zip		7005						
Newark, NJ 07102 Project Manager for Mon	itarias Circa		т.	Talaaba	N-			oln Par		7035					-	
Leon	itoring Firm			Telephor	ne ivo.			hone No. -706-79			License 01088		•			
Start Date (10)	T	Schedul	ed Com	pletion I	Date (11)		Name	of OSHA	Monitor							
6-4-2012		12-31-	2012				Jada	ar Cont	racting	LLC						
Occupancy Status During	g Abatement (Check	Only Or	ne)					Address								
Facility Closed/Vaca Abatement Perform	ated During Entire P	eriod of	Abatem	ent				roy Ln	0.1							
× Other – Describe:								State, Zip coln Par		7035						
Scope of Work (Check A	ll That Apply)	***************************************							.,							
≥3 sf or ≥3 lf x ≥160 sf or ≥260 lf		-	Renovat Demoliti	33.53.00				Mini- Glove	Containm Enclosur ebag Pro Exempte	e cedure					е	
		Is	Location	on			700-17155						2		ement	
Location			Normall ed Solel				scription		Assessment A			-		IУ	pe	
Asbestos-Containing TO BE ABA		Ma	intenar	ice/				Material (A s insulati			mount Specify		æ	_	En	щi
In Facili (13)	ity	Cus	todial S (12)	tarr?	•		ing, VA	T, or			or LF)		Remova	Repair	aps	Enclosure
(13)		Yes	No	N/A		other in	iisceiiai	neous)					val	Ħ	Encapsulate	ure
Exterior Wi	ndows			х		Ca	aulkin	g		160 V	Vindov	vs	III			
Roof			_	х	Asb	estos F	Roofin	g Mate	rial	4,5	00 SF		ΪΪ			
Basement W	-¢	х		Windo	ow Gla	azing		12 V	Vindow	'S	iii					
Below Brick		х	V	/apor B	arrier	Mastic		80	00 SF		Ш					
Name of Registered Was	100 000	JDEP W		Cubic '	STATE OF STREET		Name of	Registe	red Land	dfill	111					
Global Waste Service	3 S S S S S S S S S S S S S S S S S S S	auler ID 2171	No.	of Was	ste		110 Sa	and Co	).							
City, State Hacketstown, NJ				Dispos TBD	al Date		City, Stat Mellvill		11704							
Completed by		Title	10 11				ignature	e L	1)			Date	2			
Lillie Lazarevich		Secr	etary					Qui o	Kuze	and	DI		4-2	012		

Date of Notification (1)						Owner/Ope	September 1			X 111			710		Charter and Charte
5-24-2012						ing Autho	ority	1111		MAY 2	9 7	01	2	116	11
Agencies Notified	Type Notification			Street A	ddress road St			1	1					The same of the sa	-
EPA	X Initial		-		te, Zip Co	4-	-1		És samos	5 <u>553705 C</u>	WT.		mean	-1	_
DEP × DOL	Amended Amendment	#			rk, NJ 07					LICENS		-	v		- Constitution of the Cons
	☐ Emergency	(including	- F		Contact	102			Tel	ephone Nu	mho	or strain	-	id (menon)	anas)
DOH DCA	justification) Cancellation				iannetti				'	opriorio i va	11100			March	of a sector
						DRMATION	ı								
Name of Facility Where			55					ype of Facility	(4)						
James Baxter Terra	ace - Unoccupi	ea Blag.	#4					School (K-							17
Street Address 57 Sussex Ave.							I X	Subchapter Other (i.e. )				uild	inas.	home	es.
								etc.)					- T		
City (5) Newark, NJ 07102								quare Feet 5,000	3	f Floors			dg. A O +	ge	
County (6)				County C	`ode (7)			urrent Use (Pri		na demolie	had)		0 1		
Essex					ISE ONLY)			Inoccupied				or	Der	no	
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCM	No.	N	lame of	Abatement Cor	ntractor	(9)					
Lewis Consulting G	Froup	100.00		n/a			Jadar (	Contracting	LLC						
Street Address	Floor Suite 40	4				1,000	treet Ad								
40 Clinton Str., 6th City, State, Zip Code	rioor Suite 10	1						y Lane e, Zip Code				_			
Newark, NJ 07102							7.55	n Park, NJ 0	7035						
Project Manager for Mon	itoring Firm			Telephor	ne No.	1	elephon			License N	lo.				
Leon								6-7950		01088					
Start Date (10)		Schedule		pletion [	Date (11)	1000		OSHA Monitor							
6-4-2012	Ab atom ant (Cha	12-31-						Contracting	LLC						
Occupancy Status During						treet Add	· 10 (5) 10 (10 (10 (10 (10 (10 (10 (10 (10 (10								
Facility Closed/Vaca Abatement Perform							e, Zip Code								
Other - Describe:								n Park, NJ 0	7035						
Scope of Work (Check A	Il That Apply)														$\neg$
23 sf or ≥3 lf		☐ R	enova	tion				Full Containm	ent with	Negative I	Press	sur	е		
≥160 sf or ≥260 lf		× D	emolit	on				Mini-Endosure	е	•					
								Glovebag Pro Non-Exempte		d Non-Friat	le P	гос	edur	е	
		ls	Locati	on							T		Abate	ment	
Location		l N	lormall	у		Descri	iption of				-	1	Ту	pe	
Asbestos-Containing			d Solel ntenar					erial (ACM)	5320	mount	1.	,		Щ	m
TO BE ABA		Cust	odial S	taff?	(i.e.	thermal sys surfacing				pecify or LF)	Kemova		Repair	cap	nclo
(13)			(12)			other misc	cellaneo	us)			ova		air	Encapsulate	Enclosure
		Yes	No	N/A										te	
Basements V	Vindows			x		ACM (	Glazing	3	12 V	Vindows		Ц			
Roof			ç	х	Asb	estos Ro	ofing N	/laterial	4,5	00 SF	Ш	Ц			
Exterior Wi		х		Cau	lking		160 \	Vindows							
Below Brick		х		apor Bar	Series of the company			00 SF							
Name of Registered Was	0.000	JDEP Wa	SOUND FOR A FEE	Cubic Yar of Waste	rds	Name of	Registe	red Landfil							
Global Waste Service	200	2171	110.	TBD		110 Sa	Laurence	).							
City, State						Disposal	Date	City, Stat		44704					
Hacketstown, NJ		T				TBD		Mellvill	e, NY						
Completed by Lillie Lazarevich		Title Secre	ator			Sign	ature	. P.	0		ite -24-	20	112		
LIIIIC LAZAIEVICII		Lary			10ci	llie	Lazen	rus S	. 5	-24-	20	112			

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) Name of Building Owner/Operator (2) 24 Asbury Partners, LLc Agencies Notified Type Notification Street Address 1100 Ocean Avenue DEPA
DOCA (NJAC 5:16) ☑ Initial ☐ Amended City, State, Zip Code Amendment # DHSS DCA Asbury Park, NJ 07712 ASBESTOS CONTROL & Emergency (including LICENSIMO justification) Name of Contact (NJAC 5:23-8) ☐ Cancellation Telephone Number George Bardsley **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Former Residence School (K-12)
Subchapter 8 (Other than K-12) Street Address 209 1st Avenue Other (i.e., private & commercial buildings, City (5) homes, etc.) Square Feet # of Floors Asbury Park, NJ Bldg. Age 62 yrs 1200 County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) former residence Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Finishing Touch Asbestos Abatement Corp. Street Address 17 Thompson Street
City, State, Zip Code City, State, Zip Code West Long Branch, NJ 07764 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 732-222-8372 00040 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor n/a Occupancy Status During Abatement (Check only one) Street Address Tacility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: \_\_\_AM-\_\_PM/\_\_PM-\_\_AM City, State, Zip Code Scope of Work (Check all that apply) Full Containment
Mini-Enclosure
Gloveban Proce Full Containment with Negative Pressure ≥3 sf or ≥3 If Renovation X ≥160 sf or ≥260 lf Demolition Glovebag Procedure Non-Exempted (\*) and Non-Friable Procedure Is Location Normally Location of Abatement Type Asbestos-Containing Material (ACM) Used Solely by Description of Asbestos Containing Material (ACM) Maintenance/ TO BE ABATED Removal Amount Encapsulate (i.e., thermal systems insulation, surfacing, Custodial Staff? (Specify IN Facility VAT, or (12)(13)SF or LF) other miscellaneous) Yes No N/A Exterior X siding 375 sf X П П Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Finishing Touch Asbestos Haule 2058 Waste **GROWS Landfill** North City, State Disposal Daté City, State Oceanport, NJ 07757-0400 Morrisville, PA Completed By (Print or Type)
Joseph P. Miller 6/6/12 Title Signature Date President 5/24/12 ASB-41

State of New Jersey

#### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

		NOTI	FICA			ew Jersey BESTOS ABAT	FMENT	MEG	FI	IV	7 / [	3 1
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Date of Notification (1)	22 37	100				g Owner/Operator (		I Ш МАУ	10.0	30	(7)	
05/-	23 / 12		4	PV	rillip	sibury As	sociates	10			1,80	
Agencies Notified	Type Notification			Stree	Address			1				
□ EPA	☑ Initial			22	2 Car	neron Dr	THE SU	te TIDBEST	05 107		1	-4
DOLWD	Amended Amendment #			City, S	State, Zip (	Code	L	T WINDS MAN TO SEE A SECOND SE		-	-	-
☐ DHSS ☐ DCA	☐ Emergency (ir			Pr	illios	burg, NJ	08865	Ś				
(NJAC 5:23-8)	justification)	roidding		Name	of Contac	t		Telephone Nun	ber			
	☐ Cancellation			Da	ve Zi	mmerma	J)			-	_	
				-		FORMATION			-			-
Name of Facility Where			_				Type of Facility					
Phillipsbu	a Comm	wice	to	2/1	د		School (K-1	2) 8 (Other than K-1:	2)			
Street Address	3	2 2					Other (i.e., p	orivate and comme	rcial b	uildin	qs,	
Bldg 8, 149	1 Bronico	2 WC	1/2	- 100			homes, etc.	)				
City (5)			)				Square Feet	# of Floors		dg. A		
Phillipsbur	9			1			65,000	1		J9 ,	413	
County (6)				Cour	nty Code (7	)(STATE USE ONLY)		rior if being demol	shed)			
Warren							Come	nercial				
Name of Monitoring Firm		Owner (8	5)	ASCM	No.	Name of Abateme		)				
RT Environn Street Address	nental	-				ecoser	Mes L	LC				
	50h 12 = 5	-1				Street Address	,	1.1				
215 WCST Chi City, State, Zip Code	NUMACO					J.W. U	<u>100010</u>	Hwy.				
1.1	MG DIZZ	101	101			City, State, Zip Co		I.				
Project Manager for Mon	USSICI FA	190	†UI	() phone	Telephone No.	A 1934						
		000	License No.									
Start Date (10)	andrini	duled Co			-1510	484872-		01161			- 2	
06/07/		06/				Control of the Contro						
Occupancy Status During				~ , -	1-	EMSL						
Facility Closed/Vacate				nont		Street Address						
☐ Abatement Performed					cribe	City, State, Zip Co	JE 130 V	jorth				
Time of Abatement: _	AM	W/12	PM-		AM	Ο.	•0	T 000	00			
Scope of Work (Check al	If that apply)	-		-		Cinnam	LYSON, I	1) (80	11			
1 ≥3 sf or ≥3 lf		Ren	ovetic				ainment with Ne	gative Pressure				
1 ≥160 sf or ≥260 lf		☐ Dem	nolitio	n		☐ Mini-Encl						
				260				n-Friable Procedu	ire			
		4	_ocati ormal						Ab	atem	ent T	ype
Location Asbestos-Containing		Used			Ashe	Description of stos Containing Mar		Amount	Re	Re	E	En
TO BE ABA	ATED `		ntenar			, thermal systems i	nsulation,	(Specify	Remova	Repair	cap	Enclosure
IN Facili (13)	ity	Custo	(12)	мап?		surfacing, VAT, other miscellane		SF or LF)	<u>a</u>		Encapsulate	ure
(10)		Yes	No	N/A		other miscellane	ous)				te	
Tla lated Clean	na 12: 00		X		100	1 colotion	^	INTE	M			
Elevated Steam			-		LIK	Insulation		16 LF	X		П	
Elevated Stear	n Elbow		文 C		Pipe	Elban		3		风		
						W. S. W. S.				П	П	П
Name of Registered Was	te Hauler		N.	JDEP V	Vaste	Cubic Yards of	Name of Regis	stered Landfill				
()	runsport	-		auler IE		Waste ,	Minen	1 16	115			
City, State	2013/2011		12/	11211	4	Disposal Date	City, State	ia cuna	111			-
New Castle	DE					TRO	Waynes	bug OH				
Completed By (Print or Ty	ype) Title					Signature	Moduca		ate .			
Jack Ball		D.	- Ma-	LM.	1.000	// ~ .1	4 ONA	1.40	5/2	3/10	7	
ASB-41	4 13	110	AL	LIIV	inage-	11 400	1 Bull	7		41.	-2.50	
MAY 11	*	Do not u	se thi	s form	for asbesto	s licensure exemp	ted activities.					

no Check		(F			NJAC 8:				N.	2	t tests		7	Street Street		
Date of Notification (1) May 23rd,2012		Name of Building Owner/Operator (2) CYNTHIA STEWART RESIDENCE														
Agencies Notified Type		Street Address 351 CLAREMONT AVE.  ASRESTOS CONTROL &														
X DEP X DOL	Initial Amended Amendment #				City, State, Zip Code JERSEY CITY, NEW JERSEY											
X DOH	Emergency (including justification) Cancellation	9	Name of Contact Telephone Number CYNTHIA STEWART													
=				FACIL	ITY INFO	RMATI	ON				-					
Name of Facility Where Abaten CYNTHIA STEWART	nent is Taking Place	(3)							of Facility (4) School (K-12)							
Street Address 351 CLAREMONT AVE.							×	Subchapter 8 Other (i.e. privetc.)				buildings, homes,				
City (5) Jersey City								Squar 1800	2.4. : : : : : : : : : : : : : : : : : :				Bldg. Age 50+			
County (6) Hudson					ode (7) ISE ONLY)			Curre	nt Use (Prior	if being dem	olishe	ed)				
Name of Monitoring Firm Hired Enviro Vision Consultant	3)		ASCM	No.		Name of Abatement Contractor (9) SLAVCO CONTRUCTION INC.										
Street Address 20-21 Wagaraw Road B						Street Address 164 GETTY AVE.										
City, State, Zip Code Fair Lawn, NJ 07410								p Code NEW JEF	RSEY 07011-1802							
Project Manager for Monitoring Guillermo Morale			elephon	ne No. 6-9145		Telephone No. License No. 973-478-4848 00724										
Start Date (10) May 21,2012	uled Co 25th,			Date (11)		Name of OSHA Monitor SLAVCO CONSTRUCTION INC.										
Occupancy Status During Aba			Street Address													
Facility Closed/Vacated D Abatement Performed Ou Other – Describe:	f Abate ity Hou	tement urs 164 GETTY AVE.  City, State, Zip Code  CLIFTON, NEW JERSEY 070							11-1	-1802						
Scope of Work (Check All Tha	t Apply)										7533 - 232					
≥3 sf or ≥3 If ≥ 160 sf or ≥260 If	×		rovation Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure													
	Is Loc	ation	n				Abater						ement	6		
Location of Asbestos-Containing Mate TO BE ABATED In Facility (13)	Norm sed So Mainter ustodia (12	nally olely nanc al Sta	by ce/	Descriptio Asbestos Containing (i.e. thermal systen surfacing, V. other miscella			ing Material (ACM) stems insulation, g, VAT, or		Amount (Specify SF or LF)		Removal	Repair	e Encapsulate	Enclosure		
	Yes	N	0	N/A						100						
Pile of Building D	ebris			Х		otl	ner mi	sc.		120cy		х				
1			6												_	
		-	*													
Name of Registered Waste Ha	1	17.000	DEP W		Cubic Yards		Name of Registered Landfill					-				
Slavco Construction Inc.			uler ID 508	No.	of Wa	Constitution of				S LANDFILL						
City, State CLIFTON , NEW JERSE					TBD			City, State MORRIS	SVILLE, P							
Completed by VIVIAN D.JURCEVIC	n. Mg	gr. Signature Date May 23,								3,20	2012					

#### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

				(P	ursua	nt to NJ	AC 8:60 and 8	5:16	6)	C# 228	5	A .	MOTO American	-		
Date of Notification (1)  5 /		Name of Building Owner/Operator (2) Princeton University-Office of Design and Construction														
Agencies Notified  ☐ Type Notification ☐ EPA ☐ Initial ☐ Amended						Street Address 200 Elm Dr.  City, State, Zip Code										
⊠ DHSS	Amende				City,	State, Zip	Code							1		
☑ DCA	☐ Emerger		dina		Pr	inceton,	NJ 08544		A JUNE 100 CONTROL &							
(NJAC 5:23-8)	justificat	ion)	3		Nam	e of Conta	ct		Telephone Number							
		Ro	bert Orte	ega					dia di di	Nacional American						
	Court of Carago Introduces and			11	FA	CILITY	NFORMATION							-		
Name of Facility Where A	batement is	Taking P	ace	(3)	77-708				Type of Facility (	4)		-				
Princeton Universit	y-Jadwin H	lall							School (K-12)	58						
Street Address				Subchapter 8 (Other than K-12)												
Washington Rd.				Other (i.e., private and commercial buildings, homes, etc.)												
City (5)		-			Square Feet # of Floors Bldg. Age											
Princeton									oquaic i cci	# 011 10013	"	ilug. F	·ye			
County (6)	nty Code (	7)(STATE USE ONL	N	Current Use (Price	or if being demo	ishod)		·								
MERCER						my oddo (	MOTHE OOF ONE	.,	ourient ose (i in	or it being demoi	isneu)					
Name of Monitoring Firm	No.	Name of Abate	omo	ent Contractor (0)		5.00										
ATC Associates Inc		ang om		,	000		Name of Abatement Contractor (9)  BRISTOL ENVIRONMENTAL, INC.									
Street Address							Street Address		AUCHAILIAIAL	, INC.						
3 Terri Lane		1123 BEAN	=00	CTREET												
City, State, Zip Code							9.7539									
Burlington,NJ 0801	City, State, Zip Code BRISTOL, PA 19007															
Project Manager for Monit	No.	Telephone No. License No.														
Michael Keehn	215-788-6040 00509															
Start Date (10)	Name of OSHA Monitor															
6/6/	ate (11) 12	A THE RESIDENCE OF THE PARTY OF														
						12	Street Address		/IRONMENTAL	, INC.						
	Occupancy Status During Abatement (Check only one)  ☐ Facility Closed/Vacated During Entire Period of Abatement															
☐ Abatement Performed	d During Enti Outside of N	re Period	of A	bate	ment		1123 BEAV	OCCUPATION OF								
Time of Abatement: 7:	00AM-3:30F	omarra PM/	PM	Hou  -	rs - Des AM		City, State, Zip			***************************************						
			•			S	BRISTOL,	PA	19007							
Scope of Work (Check all  ≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf	that apply)			ovat	1000AT1525		☐ Mini-E	Enclo	ainment with Nega osure Procedure npted (*) and Non			**				
			Is I	_oca	tion	T			inpled ( ) and Non	-r nable Procedi						
Location	of		N	orma	lly		Descriptio	n of				Abatement Type				
Asbestos-Containing N TO BE ABA					ely by ince/		stos Containing	Mate	erial (ACM)	Amount		Repair	Encapsulate	Enclosure		
IN Facility					Staff?	(i.e	., thermal systen surfacing, V			(Specify SF or LF)	Removal	≅.	aps	lost		
(13)				(12)		_	other miscella			SF OI LF)	1 2		ulat	19		
		Y	es	No	N/A								(D)			
Throughout 1st Floor				$\boxtimes$		Floor tile and mastic				10,102 SF						
Throughout 1 <sup>st</sup> Floor						Pipe Sa	ddles			224 LF						
Throughout 1 <sup>st</sup> Floor						Plaster	Plaster 11									
Room 111						Windov	v caulk and gla	azir	ng	200 LF						
Name of Registered Waste	Cubic Yards of Name of Registered Landfill															
BRISTOL ENVIRONM	VC.		18706	VVasie		G.R.O.W.S.	NORTH LAND	FILL								
City, State BRISTOL, PA 19007		Disposal Date	City, State  MORRISVILLE, PA 19067													
Completed By (Print or Type) Title																
Brian Scafiro	-1	Estin	nato	r			Signature	n	Sceliro	1 1 1 1 1 1	5/2	2/	12			

ASB-41 MAY 11 B5/2056

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

Date of Notification (1)	-						10 0.00 and 0.1			a a		7					
5 / 22 / 12				Name of Building Owner/Operator (2)													
Agencies Notified Type Notification					Brixmor Property Group												
☐ EPA	☐ I ype Notific	cation				Street Address											
⊠ DOLWD	☐ Amende	ed				Mid-Atlantic Regional Office Two Tower Bridge, Suite 300  City, State, Zip Code											
☑ DHSS	Amenda	1000			37702	12 15	I II. FIV STULL										
□ DCA	☐ Emerge		cludin	g			ken, PA 19428	-	br. s.	Great and	127	ent a Par					
(NJAC 5:23-8)	justifical		1 100			e of Contac			Telephone Nu								
	☐ Cancella	ation			Je	rry McMu	ıllen										
					FA	CILITY	NFORMATION										
Name of Facility When		Taking	Place	e (3)			Type of Facility										
Gateway Shoppin	ng Center						School (K-12	2)	40)								
Street Address 1000-1074 Route	9					<ul> <li>         ⊠ Subchapter 8 (Other than K-12)         Other (i.e., private and commercial buildings, homes, etc.)     </li> </ul>											
City (5)		10/200						Square Feet # of Floors Bldg. Age									
Old Bridge								oquaio i oot	# 011 loois		iug. A	ige					
County (6)					Cou	nty Code (	7)(STATE USE ONLY)	Current Use (Pr	ior if being demo	lished)			******				
Middlesex	UT.							Shopping p	laza								
Name of Monitoring Fire	rm Hired by Bui	lding (	Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)				-					
AET							BRISTOL EN	VIRONMENTA	L, INC.								
Street Address							Street Address										
28 N. Pennell Roa	ad						1123 BEAVE	R STREET									
City, State, Zip Code							City, State, Zip Co	ode					-				
Media, PA 19063							BRISTOL, PA 19007										
Project Manager for Mo	onitoring Firm			Te	lephone	No.	Telephone No. License No.										
Dave Turotsy				8	300-969	-6AET	215-788-6040		00509								
Start Date (10)		Sched	uled C	ompl	etion Da	ate (11)	Name of OSHA Monitor										
6 /04	/ _12		<u> </u>	(	3_/	BRISTOL EN	BRISTOL ENVIRONMENTAL, INC.										
Occupancy Status Duri	ing Abatement (	(Check	only	one)		Street Address											
☐ Facility Closed/Vaca	ated During Ent	ire Per	riod of	Abate	ement		1123 BEAVER STREET										
Abatement Perform	ed Outside of N	lormal	Facilit	у Ног	ırs - Des	scribe	City, State, Zip Code										
Time of Abatement: 7AM-330PM/PMAM							BRISTOL, PA										
Scope of Work (Check	all that apply)												77				
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>			⊠ Re □ De				☐ Mini-Encl			lura							
			Is	Loca	ation	T	2,11011 2010	, prod ( ) dila red	THOSE THOSE		atem	ont T	uno				
Location				Norm:			Description of	f				1	1				
Asbestos-Containin TO BE A		Л)			lely by ance/		stos Containing Mat		Amount (Specify	Removal	Repair	nc	Enclosure				
IN Fac	The state of the s				Staff?	(I.e		thermal systems insulation, surfacing, VAT, or			a÷.	apsi	uso				
(13	)			(12		-	other miscellaned			=		Encapsulate	9				
Casa Nambar 4044			Yes	No													
Space Number 1018	5 					2x laye	r VAT/Mastic		500 SF	$\boxtimes$							
								8									
										П	П	П	П				
Name of Registered Waste Hauler NJDEP Waste							Cubic Yards of	Name of Regist	tered Landfill								
SERVICE TRANSPORT GROUP, INC. Hauler ID No. 20990							Waste 6 Cu Yds  MINERVA LANDFILL										
City, State							Disposal Date	City, State									
NEW CASTLE, DE	19720						6/8/12	WAYNESB	URG, OH 4468	38							
Completed By (Print or Type) Title							Signature	0 "	/ [0	Date ,		,					
Gino Pizzigoni General Mar							Din Pagagoni /il 3/22/12										
SR-41 #		1		-			rua 1	Tryou	17	-/-	1	0					

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

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

(Pursuant to NJAC 8:60 and 12:120) D&S Proj. #: MS 12-193 Name of Building Owner/Operator (2) Date of Notification (1) 2 9 2012 10 |5 |/|2 |2 |/|1 |2 | FANIA ROOFING COMPANY Agencies Notified Type Notification Street Address ASBESTOS CONTROL & | Initial EPA ASDLUCEAGINGTROL & 271 E. BLACKWELL STREET Amended DEP City, State, Zip Code Amendment #: DOL L Emergency DOVER, NJ (including ☑ DOH Name of Contact Telephone Number justification) DCA FRED FANIA Cancellation **FACILITY INFORMATION** Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) FRED FANIA Subchapter 8 (Other than K-12) Other (Private/Commercial Street Address Bldgs./Homes, etc. Square Feet # of Floors Bldg. Age 271 E. BLACKWELL STREET County (6) County Code (7) City (5) (State use only) Current Use (Prior if being demolished) DOVER 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 Telephone Number License Number Phone Number Project Manager for Monitoring Firm 00159 973-345-8020 Name of OSHA Monitor Sched. Completion Date (11) Start Date (10) D & S Restoration, Inc. Street Address 06/06/12 06/26/12 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 Full Containment w/negative pressure Scope of Work (check all that apply) Mini-enclosure  $\boxtimes$  >3 sf or >3 If Glovebag procedure ≥160 sf or ≥260 lf Demolition Non-Exempted (\*) and Non-friable procedure Is location normally used solely E E Location of by maintenance/custodial n Amount asbestos-containing Description of asbestos-containing n m p C staff(12) (Specify SF or material (acm) to be material (ACM) 0 a a abated in facility (13) ΝA Yes No p TRANSITE CEILING PANELS 420 SO FT GARAGE Cubic Yards of Waste Name of Registered Landfill NJDEP Hauler ID# Registered Waste Hauler TULLYTOWN, RESOURCE RECOVERY D & S RESTORATION, INC. 13506 5 YDS Disposal Date City, State City, State 06/07/12 TULLYTOWN, PA PATERSON, NJ 07503 Signature Date Completed by (Print or Type) Title 05/22/12 BOGDAN JOLDZIC PRESIDENT

Do not use this form for asbestos licensure exempted activities.

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