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Street Address						M.A	AC Cont	cting	Inc.				
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City, State, Zip Code	,					City, S	itato, Zip C	10				_	_
Project Manager for Monitoring Firm			Teleph	IDITA NO.			and Park	NJ 07					
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#### State of New Jersey

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

Ch # 8967 Name of Building Owner/Operator (2) Date of Notification (1) 5/24/18 Susan Demarco Agencies Notified Type of Notification Street Address [] EPA Initial [] DEP Notification City, State, Zip Code DOL Oradell, NJ 07649 Amended [X] DOH Notification Name of Contact Telephone None NTROL & [] DCA [] Cancellation 'IG Brian Starkey FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) Residence Other (i.e. private and commercial buildings, homes, etc.) Street Address Square Feet # of Floors Bldg. Age City (5) County (6) County Code (7) 2000 ~65 (STATE USE ONLY) Current Use (Prior if being demolished) Oradell Bergen residence Name of Monitoring Firm Hired by Building Owner ASCM No. Name of Abatement Contractor (9) N/A Jupiter Environmental Services, Inc. 000 Street Address Street Address 323 Changebridge Rd., Suite 100 City, State, Zip Code City, State, Zip Code Pine Brook, NJ 07058 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number 973-575-8700 00852 Scheduled Start Date (10) Sched. Completion Date (11) Name of OSHA Monitor 6/2/18 6/9/18 Iris Environmental Laboratories, LLC Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 2333 Route 22W Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code Describe: Union, NJ 07083 Other - Describe: partially vacant [] Scope of Work (Check all that apply) Full Containment with Negative Pressure Demolition Renovation Mini - Enclosure [X] ≥3 sf or ≥3 lf Glovebag Procedure [] [X] ≥160 sf or ≥260 lf [x] Non - Friable Procedure [X] Is Location Abatement Normally Used Description of Type Location of Solely by Asbestos - Containing Amount R R E E Asbestos - Containing Maintenance/Cus Material (ACM) N (Specify E N todial Staff (12) C Material (ACM) (i.e., thermal systems SF or LF) C M TO BE ABATED insulation, surfacing, VAT, 0 A Α L In Facility P or other miscellaneous) 0 V (13)Yes No N/A Α R S S U basement TSI 25 LF X X basement X VAT 350 SF X Name of Registered Waste Hauler Name of Registered Landfill NJDEP Waste Cubic Yards Hauler ID No. Of Waste Jupiter Environmental Services Alliance Landfill 04782 3 City, State City, State Disposal Date Taylor, PA Pine Brook, NJ 6/7/18 Completed By (Print or Type) Signature Date Pane Repic 5/24/18 General Manager

Date of Notification (1)	_0		Name	of Building Ow	ner/Operato	or (2)	1			MON HARRING	Charles of the Control
3/22/19	8			Doli	loh	Hodas			E	1 W	7 E
Agencies Notified	Type Notification		Street	Address	100.1	The Chile		<del>-</del>	L23	J U	
EPA	Initial										
DEP	Amended		City, S	State, Zip Code				MAY	2)	201	8
	Amendment Emergency			Ruc	lingto	$\Gamma N$ , $\Lambda$	1086	91/2		-5777-576	
DOH	justification)		Name	of Contact	1	11000	Telephon	e Numbe	r		
DCA	Cancellation			Delil	ah						- &
Name of Facility Where	Abatement is Takin	a Place (2)	FA	CILITY INFORM	IATION	1	- P				-
les:cent		y riace (3)				Type of Facility	(4)				
Street Address	1.6.1					School (K	-12)				
	[ ]					Other (i.e.	er 8 (Other than private & com	n K-12) mercial b	ildina	s hom	200
City (5) /2	,					etc.)			illuling	5, 11011	165,
Buclino	7100					Square Feet	# of Floor	s	Bldg.	Age	J.
County (6)	, .,		Count	Code (7)		1400	12		N	IA	
Bulling	ton		(STATE	USE ONLY)		Current Use (P		nolished)			
Name of Monitoring Firm	Hired by Building (	Owner (8)	LASC	M No.	Nama	Resi	dential				
	n W con mend		1.00			of Abatement Co		₹.			
Street Address	110	1130				Hrymat Address	Construc	lian			
L P.O BO	× 11645					P.O Box	11687				
City, State, Zip Code	A	,				tate, Zip Code	11301				
Ph.la. f	'A. 1911	6				hila. PA	19116				
Project Manager for Moni	itoring Firm		Telepho	one No.		one No.		se No.			
Jasov	7					784-469		1276			
Start Date (10)	1 11	Scheduled Co	mpletion	Date (11)		of OSHA Monitor		1/10			
5/23	110	5/23	3/18		1 5	Frain T	) usc				
Occupancy Status During	Abatement (Check	Only One)			Street	Address					-
Facility Closed/Vaca	ited During Entire P	eriod of Abater	nent		127	79 Hendi	ris 11				
Abatement Performe Other – Describe:	ed Outside of Norma	al Facility Hour	S			tate, Zip Code	1	,			-
	171				PI	hila. P	A 1911	6			
Scope of Work (Check All	i Triat Apply)	erred)			1_	-					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova			_	Full Containm	ent with Negati	ve Pressi	ле		
		Demoli	lion			Mini-Enclosur Glovebag Pro	е				
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Asbestos-Containing N TO BE ABA	viateriai (ACM) TED	Maintena	nce/	Asbestos Co	ontaining Ma nal systems	aterial (ACM)	Amount			ш	_
In Facility	у	Custodial (12)	Staff?	Sui	facing, VAT	, or	(Specify SF or LF)	Rem	Repair	ncap	incl
(13)		(/		othe	r miscellane	eous)	,	Remova	pair	Encapsulate	Enclosure
		Yes No	N/A					=	1	ate	6
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City, State	λ (	10	10	Disp	oşal Date	City, State		^ /			_
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Completed by		Title /	C -	Ī	Signature	1 1		Date	,	/	_
Etra'm	/va	V. P	125		411	min 11 -		Date 5/	231	18	
					- 4	wood force		- E	1	-	

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State of New Jersey - Notification of Asbestos Abatement

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Date of Notification (1)						Name of Building Owner	/Operator /	25						H
May 23, 2018						The Valley Hospit		711	272-10-102	7020			Action of the control	
Agencies Notified		Notification	Туре			Street Address		111	MAY	29	201	9		1
⊠ EPA		x Initial N		n		223 North Van Die		- I					DIA COMM	
□ DCA						City State Zin Code		1					1	- 8
x DOL						Ridgewood, NJ	07450 27	136AS	SBEST	OS CC	NTR	OL&		
⊠ DEP		Emerger	cy (includ	dina	-	Name of Contact	0743072	30	110	CENS	ING	-	new errorient n	-
x DOH		justific		unig		William Stasiak			elephone					
		justilie	ation)			William Stasiak		4	01-447	-814	1			
				FACILITY	VINEO	RMATION								
Name of Facility Where Abate	ement is Ta	king Place (3)		THOILITT		Type of Facility (4)								
The Valley Hospital						School (K-12)								
Bergen Lower Level	Rm# BB	3121				Subchapter 8 (other tha	n K 12\							
Street Address		7121				Other (i.e. private &		المالييما ا			,			
223 North Van Dien	Avenue					Sq. Feet: Unknown	x commercia	ora: A	igs, nom	es, etc.	.) EO:			
						oq. reet. Ulikilowii	# 01 110	015. 4	blug.	Age.	507	yea	rs	
<u>City (5)</u>	County (6		County Co			Current Use (prior if bein	a demolishe	ad). H	loenital					
Ridgewood	Berger	ו	(State Use	Only)		ourront dod (prior il belli	g domonant	,uj. 11	ospitai					
Name of Manitarina Firm I live	d boo Dide of													
Name of Monitoring Firm Hire		Owner (8)	ASCM No.			Name of Contractor (9)								
Colden Corporatio	n				1,	GREENWOOD ABA	TEMENT	CONS	SULTA	NTS,	INC.			
Street Address						Street Address					-		_	
28 Washington Stree	t				1 3	511 MAIN STREET								
City, State, Zip Code						City State, ZipCode								-
Ballston Spa, NY 12	020					Butler, NJ 07405								
Project Manager for Monitorin	g Firm	Telephone N	umber			Telephone Number		Lic	ense Nur	mher				
Jim Miades		347.435.3				973-492-0477			840	11001				
Scheduled Start Date (10)		Scheduled Co	ompletion Da	ate (11)		Name of OSHA Monitor		100	0.0					
June 1, 2018		June 30,				EMSL inc.								
Occupancy Status During A					5	Street Address	-BUILDING -							
Facility Closed/Vacate	ed During E	Entire Period o	f Abatemen	it										
Abatement Performed	Outside o	f Normal Facil	ity Hours -			1056 Stelton Road								
Describe						City, State, Zip Code								
Other - Describe:					- 1	Piscataway, NJ 088	54							
Source of Work (Check all tha	t apply)												200	
CONTROL OF THE COST OF THE COS							x Full Conta	inmen	t with Ne	egative	Pres	sure		
$\geq$ 3 sf or $\geq$ 3 lf				Renovati	tion		Mini-Enclos	ure						
$\square \ge 160 \text{ sf or } \ge 2$	160			Demolitic	ion		Glovebag F	roced	ure					
Location of Asbestos-Containi	20	la Landian M		10-1-1	1.5		Non-Exem					roced	ure	
Material (ACM) in Facility (13)	ng	Is Location N by Maint./Cus				cription of Asbestos taining Material (ACM) (i.e	Amo	5000000		ement	Type			
, , , , , , , , , , , , , , , , , , , ,			IO NA	(12)	therr	mal systems insulation,	or LF	cify SF		ve Re	pair En	сар Е	nclose	2
						acing, VAT, or other misce		,						
Bergen Lower Level				X	VAT	「 & Mastic	400		छा					-
Rm#BB121					VAI	& Wastic	100 :	ST	X			- 1		-
MII#BB121					-									
Name of Reg. Waste Hauler		NIDED WA	ll- I- ID (		1									
See Hauler Below # 1 & 2	,	NJDEP Waste See Below	Hauler ID #	Ŧ	2	Cubic Yards of Waste:	_		ne of Rec				_	
						5			adowfill	,		ROW	S	
Hauler #1) Greenwood A		nt Consultan	its, Inc. –	Butler, N.	IJ 074	05	Disposal D		0		State	ov 60		
NJ DEP # 125		_					June 30	, 201	ŏ		te 2, Bo geport,			
Hauler #2) Newark Carti			04509, NJ 1	DEP # 1955	551						842-27			
Completed by (Print or Type)		itle	0.18.55		S	Signature		Date						
Marin Graure	150	SENIOR PR	OJECT		9	Marin Graure		Ma	ay 23,	2018				
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MANAGER

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Date of Notification (1)					Name	e of Buildin	g Owner/Operator	(2)		and white it has pur has	-		
	23 /	18			Ste	erling Hig	h School Distric	ct iii	MAN	0010			Ш
Agencies Notified	Type Notific	ation			Stree	t Address		14 11	MAY 2	_/\/18			4
⊠ EPA					80	1 Preston	Avenue, Suite	В					T-SECTION S
⊠ DOLWD	Amende	33/			_	State, Zip (		300	ASBESTOS CO	JNTRO	8.10	1	-
⊠ DOH	Amendm					medale, l			LICENS				
□ DCA     (NJAC 5:23-8)	☐ Emerger justificat		ing		_	e of Contac			Telephone Nu	mber			-
	Cancella				To	m Arcine	se		856-566-41				
					FA	CILITY IN	IFORMATION						
Name of Facility Where A	batement is	Taking Pla	ce (	3)		OILITT II	II ORINATION	Type of Facility (	4)	-,	-		
Sterling High School				,				School (K-12)	- 5				
Street Address								Subchapter 8	(Other than K-1				
501 South Warwick	Road							Other (i.e., pr	vate and comm	ercial b	uilding	gs,	
City (5)			11.00					Square Feet	# of Floors	B	ldg. A	ne.	
Somerdale								50,000	2		80 80	ge	
County (6)					Cou	nty Code (7	)(STATE USE ONLY)				00	-	
Camden						., (	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	School	or in being demo	ilanca)			
Name of Monitoring Firm	Hired by Buil	dina Owne	er (8)		ASCM	No.	Name of Abatem	ent Contractor (9)					
ATC Group Services		•			000			onmental. LLC					
Street Address				_	-		Street Address	orimoritar, EEO					
3 Terri Lane, Suite 4							623 Cutler Av	venue					
City, State, Zip Code							City, State, Zip C						
Burlington, NJ 0801	6						Maple Shade						
Project Manager for Monit			T	Tele	phone	No	Telephone No.	, 110 00002	License No.	-			
John R. Lutz	3					-8800	856-755-0099	9	00842				
Start Date (10)	13	Scheduled	Con	_ 35%			Name of OSHA N		00042				
06 / 25 /	1000				6 /		EMSL Analyt						
Occupancy Status During	Abatement (						Street Address						
☐ Facility Closed/Vacated					ment		200 Route 13	0 North					
☐ Abatement Performed						scribe	City, State, Zip Co						
Time of Abatement:							Cinnaminsor						
Scope of Work (Check all	that apply)						Ommaninison	1, 143 00077					
30 50 50 50 50 50 50 50 50 50 50 50 50 50	and apply)	_					□ Full Conf	tainment with Nega	tive Pressure				
≥3 sf or ≥3 lf     ≥160 sf or ≥260 lf				ovati			☐ Mini-Enc						
		ш,	Jenn	Ontio	)[]		☐ Non-Exe	g Procedure mpted (*) and Non	-Friable Proced	ure			
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Location of				rmal			Description, o	of		-	_		-
Asbestos-Containing N TO BE ABA					ely by nce/		stos Containing Ma		Amount	Removal	Repair	Encapsulate	Enclosure
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(13)				(12)	1		other miscellane					late	e e
		Ye	S	No	N/A								
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Freehold Cartage					auler II 15939		Waste 10	Fairless Lar	ndfill				
City, State					. 5500		Disposal Date	City, State					
Freehold, NJ							07/06/2018	Morrisville,	PA				
Completed By (Print or Typ	oe)	Title					Signature		n	ate			
Christina Lynch	S 188	Vice I	res	ide	nt of (	Operation	1111	14	1000	- 10	2 1	d	

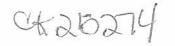


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Date of Notification (1)				Nome	f Duilding	0	O	(2)		E (	C E	Ш	\ <u>\</u>	<u>L</u>	11	1
	k # 3182				f Building nus Cath											
Agencies Notified	Type Notification		-	Street A		10110 11	igii oci	1001		<u> </u>	AAY 2	9	2018	}	$\mathbb{H}^{\downarrow}$	#
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EPA DEP	Initial Amended		+	City, Sta	ate, Zip Co	ode			- (						1	1
DOL	Amendment:			Param	nus, NJ	07652			i i	ASB	ESTOS	CO	NTR	OL 8	4	
П рон	Emergency (i	ncluding	-	Name of	f Contact					Tel	LICE					L
DCA	Cancellation			Micha	el						1-445-			175		
				FACI	LITY INFO	ORMAT	ION					700 7000				
Name of Facility Where	9440,400 (1970) - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Place (3	3)					Туре	of Facility (	4)						
Paramus Catholic I	High School								School (K-1							
Street Address									Subchapter Other (i.e. p	8 (Oth	er than I	K-12)	build	linge	home	20
425 Paramus Road								<u>ы</u> е	etc.)	nivate t	x comm	Groiai	Dulle	iii igs,	HOHIE	55,
City (5)	2								e Feet		f Floors		100	ldg. A	ge	
Paramus, NJ 07652								25,00		2			100	0+		
County (6) BERGEN				County (	Code (7) USE ONLY	)		Scho	nt Use (Pri	or if bei	ng demo	olishe	d)			
Name of Monitoring Firm	Hirod by Building C	)		ASCN			Niere			44	(0)					
Ivame of Monitoring Firm	i Filled by Building C	wher (o)		ASCIV	I NO.				ement Cor Corpor		(9)					
Street Address				1			-120	Addres		ation						-
0.100171.000								69th S	T 200							
City, State, Zip Code								tate, Zij	0 0 1							
644 Carl (# 14 to 10 to							200	4.0	g, NJ 070	093						
Project Manager for Mon	itoring Firm			Telepho	ne No.			one No	51-		Licens	e No.				
1972 (SEC)				1200 A 1000				295-1			0107	4				
Start Date (10)		Schedule	ed Cor	mpletion I	Date (11)		Name	of OSH	A Monitor							
5/22/18		5/24/1	8				Sam	e as A	Above							
Occupancy Status During	g Abatement (Check	Only Or	ne)				Street	Addres	s							
Facility Closed/Vaca	ated During Entire P	eriod of A	Abater	nent												
Abatement Perform Other – Describe:		al Facility	/ Hour	S			City, S	tate, Zip	p Code							
Scope of Work (Check A	II That Apply)	_					_	7								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demoli				-	1	Containme		-					
= 100 SI OI = 200 II		Ц,	Jemon	uon			×	Glov	vebag Prod	cedure	Wr	ap	2	CU	J	
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Asbestos-Containing TO BE ABA		Ma	intena	nce/			taining N systems				mount Specify		Z.	_	Enc	Щ
In Facil		Cus	todial ( (12)			surfa	cing, VA	T, or			or LF)		Remova	Repair	Encapsulate	Enclosure
(13)			(1.2)			other r	niscellar	leous)					oval	air	ulat	sure
		Yes	No	N/A											O	3.52
Boiler Ro	oom		х			Pipe	Insula	tion		3	2 LF		х			
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Name of Desire 1331	4-11-4		100	11055	(t-		V- 1	-	Ne	D - 1 -		1511				
Name of Registered Was			1000	IJDEP W lauler ID		Oubic of Was	Yards ste		Name of							
Tri-State Transfer A	ssociates		988	9551	men Care	TBD			Minerva	a Ente	rprises	s Inc				
City, State							sal Date		City, State		NV000140-110					
Bronx, NY						TBD			Wayne	sburg,	ОН					
Completed by		Title	5500			S	Signature	(h)	11/	1		Date		9.		
Gina Betances		Offic	e Ma	nager				10	Pull )			5/2	1/20	118		

	PAID	)		ICATION	ate of New NOF ASB to NJAC	ESTOS	ABATE		* Tables Pool Life voice insulating passes	D	) E	C	3		V	
Date of Notification (1) 5/21/2018 Chec	k # 3185				f Building th of the				determinance		The same of the sa	IAY :	2 0	20	)18	
Agencies Notified	Type Notification			Street A	ddress				-	hal be			- *	-	710	-11
□ EPA	☐ Initial			110 R	oosevel	t Aven	ue								-	
DEP	Amended		f	City, Sta	ate, Zip Co	ode					ASBE	STOS	CC	)NT	ROL	. &
▼ DOL	Amendmen			Berke	ly Heigh	ts, NJ	07922		L		-	LICE	1/1/21	NG		
□ DOH	Emergency justification)		İ	Name of	f Contact			2019		Tel	ephone I	Numbe	r			-
DCA	Cancellation			Nichol	las Sble	ndorio				1.000	8-464-					
				FACI	LITY INFO	ORMAT	ION				200	- W. W. W.				
Name of Facility Where		ng Place (3	3)					Туре	of Facility (4)	)						
Church of the Little	Flowers							П	School (K-12	)						
Street Address		a a							Subchapter 8	(Oth						
110 Roosevelt Ave	nue							X	Other (i.e. pri etc.)	vate	& comme	ercial b	uildii	ngs,	home	es,
City (5)								Squa	are Feet	# 0	f Floors		Bld	g. A	ae	
Berkeley Heights								15,0	000	2			50	+		
County (6)			T	County (	Code (7)			Curre	ent Use (Prior	if bei	ng demo	lished)				
UNION				(STATE U	USE ONLY				ırch			Č.				
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCN	I No.		Name	of Aba	atement Contr	actor	(9)		_	-		
									ce Corporat							
Street Address							Street	Addre	ss		<u> </u>					
							426-	69th	Street							
City, State, Zip Code							City, S	tate, Z	Zip Code							
							367320		rg, NJ 0709	93						
Project Manager for Mon	itoring Firm			Telephor	ne No.		Teleph				License	e No			207/0	_
070							201-				01074					
Start Date (10)		Schedule	ed Cor	npletion (	Date (11)			eranoma. A	HA Monitor					7		
5/22/18		5/23/18							Above							
Occupancy Status During	Abatement (Chec	ck Only On	ie)				Street									_
Facility Closed/Vaca				oont.												
Abatement Perform  Other – Describe:	ed Outside of Norr	nal Facility	Hours	3			City, S	tate, Z	ip Code							
Scope of Work (Check A	II That Apply)															
≥3 sf or ≥3 lf	,		lanaum	.ti				1 -				_				
≥160 sf or ≥260 lf		and the same of th	lenova emolit						II Containmen ni-Enclosure	t with	Negativ	e Press	sure			
		_					×	Glo	ovebag Proce	dure						
								■ No	n-Exempted (	*) and	d Non-Fr	iable P				
		JA 2073	Locati	20010									А	bate Typ	ment	
Location	Parties and the commencer		lormal d Sole				scription			-			T	1,7,		
Asbestos-Containing TO BE ABA		Mai	intena	nce/			aining M systems				mount Specify	٦ .	,		E	ш
In Facili		Cust	odial 3 (12)	Staff?	(1.0.		cing, VA		ation,		or LF)	Kemova		Repair	Encapsulate	Enclosure
(13)			(12)			other n	niscellan	eous)	9			ova		air	sula	sur
		Yes	No	N/A								-		- 1	te	Ф
Upper Ch	urch		х			Celar	n-up de	ebris		6	SF	x	$^{\dagger}$			
1.1		+ +	71.71							_			+	-		
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					1											
Name of Registered Was	te Hauler		122	JDEP W		Cubic			Name of Re	giste	red Land	Ifill	_			
Tri-State Transfer As	ssociates		1078	lauler ID	No.	of Was	ste		Minerva							
5 (% 20 3			1	9551		TBD					. р000					
City, State Bronx, NY						Dispos	sal Date		City, State		OLI					
		Tip							Waynesh	urg,		D :	_			
Completed by Gina Betances		Title	- Mai	nager		S	ignature	B	0/		1	Date 5/21/	204	Q		
Onia Detailes		UIIICE	ivial	iayti		1		V 1	110/1/1.		1	J/21/	2U 1	0		- 1

State of New Jersey

PAI			ICATION	ate of Ne I OF ASB to NJAC	ESTOS	ABATE		) E C	E		E	n	A CONTRACTOR OF THE PARTY OF TH	
Date of Notification (1) 05/23/2018				f Building je of Sai			r (2)	31 MA	Υ 2	9 2018	1		Section (Section 1975)	
Agencies Notified Type Notification  EPA Initial	1		Street A	ddress vent Ro	ad					2010	,	-	and district	
X DEP Amended X DOL Amendmer				ate, Zip Co town, N		60		ASBES	TOS	CONTR NSING	OL &			
X Emergency justification Cancellation	)			f Contact Iacovo			Lun	And the second s	8 00 100 1	ephone Nu 3-290-40				
Name of Facility Where Abatement is Taki	na Dlaga /	1.	FACI	LITY INFO	ORMATI	ION	-	C = W. (1)	_					
Founders Hall	ng Place (	)						of Facility (4)						
Street Address 2 Convent Road		1					×	School (K-12) Subchapter 8 Other (i.e. pri	(Oth			ldings	, hom	es,
City (5) Morristown								etc.) re Feet	# o	f Floors		3ldg.	Age	
County (6) Morris			County (	Code (7) USE ONLY	)		Curre	ent Use (Prior ege	if bei	ng demolis	hed)			
Name of Monitoring Firm Hired by Building N/A	Owner (8)		ASCM	I No.	20			tement Contr	actor	(9)				
Street Address						Street	Addre	SS						
City, State, Zip Code						City, S	State, Z	ip Code ark, NJ 070	35					
Project Manager for Monitoring Firm			Telephor	ne No.		Teleph	none N 276-0	0.		License N	10.			774
Start Date (10) 05/24/2018	Schedule 05/30/2		npletion (	Date (11)		Name	of OSI	HA Monitor fety LLC		01011				
Occupancy Status During Abatement (Che	ck Only Or	ie)				Street	Addres	SS						
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe:	Period of A	Abaten	nent S			City, S		ip Code						
Scope of Work (Check All That Apply)					_	Linco	oln Pa	ark, NJ 070	35					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	enova emolit				×	Mir	I Containmen ni-Enclosure ovebag Proced n-Exempted (	dure				e e	
Location of	11	Locati Iormal			Do	ariation							emen /pe	t
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Ma	d Sole intena odial s (12)	nce/		tos Cont thermal surfac		Material s insula T, or		(8	mount specify or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A								11500		te	LU .
Restrooms - Throughout		X			E	Ibows			53	Total	X			
Name of Registered Waste Hauler		l N	JDEP W	aste	Cubic	Varde		Name of Re	ainto	rod Landel				
United Safety LLC		H	auler ID 036820	No.	of Was			Grows La	52		1			
City, State Lincoln Park, NJ					Dispos TBD	al Date		City, State Tullytown	, PA	<b>\</b>				
Completed by Vanco Petkov	Title Proje	ct Ma	nager		- S	ignature	N C	191	>	10000	ate 5/23/	2018		



Date of Notification (1) 05-21-18	di d	PAT				f Building			(2)		10)		C	5		7 [		-
Agencies Notified		Notification			Street A							THE THE PERSON OF THE PERSON O	MAY	2 9	20	18	1	卅
DEP DOL	A A	nitial mended mendment mergency (			City, Sta Irving,	ate, Zip Co TX	ode					ASB	ESTO	S C	ONTE	ROL	3	
DOH DCA	ju	ustification) cancellation	including	- 41.3	Rafae	f Contact I Leonar				and and	v Nov. I sammy gregor	-	7) 74			******	-	
Name of Facility Where Central Office	Abateme	ent is Takin	g Place (3	3)	FACI	LITY INFO	ORMATI	ON	Ту	pe of Fac								
Street Address 282 Washington Av	/enue									School Subcha Other ( etc.)	apter 8	(Othe				lings,	home	es,
City (5) Belleville										quare Feet 0,000	t	# of 3	Floors		B 6	ldg. A	ge	
County (6) Essex						Code (7) USE ONLY)	9		100000	irrent Use ommerc		if beir	ig dem	olishe	ed)			
Name of Monitoring Firm ESIS Health, Safety					ASCN	/ No.				Abatement e Enviro			5 50					
Street Address P.O. Box 430								Street 200 l		dress ad Stree	et							
City, State, Zip Code North Versailles, PA	State, Zip Code th Versailles, PA 15137 ect Manager for Monitoring Firm							F-98 - 12 - 12 - 12 - 12 - 12 - 12 - 12 - 1		e, Zip Code dt, NJ 07								
Project Manager for Mor Chris Pierce	t Manager for Monitoring Firm S Pierce						5	Teleph 201-9		No. 9-6565			Licens 0075					
Start Date (10) 05-30-18			Schedul 08-30-		pletion	Date (11)				SHA Mor r Inc.	nitor							
Occupancy Status Durin								Street 10-59		fress ackson i	Aveni	ue						
Facility Closed/Vac Abatement Perform Other – Describe:	ed Outs							City, S	State	, Zip Code	е		01					
Scope of Work (Check A	II That A	(pply)																
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf				Renovat Demoliti					1	Full Conta Mini-Enclo Glovebag Non-Exen	osure Proced	dure	## #				е	
				Location												Abate	ment pe	
Location Asbestos-Containing <u>TO BE AB</u> In Facil (13)	Materia <u>ATED</u> lity	I (ACM)	Use Ma	Normall d Solel intenar todial S (12)	ly by nce/		tos Cont thermal surfac		/late s ins		)	(S	nount pecify or LF)		Removal	Repair	Encapsulate	Enclosure
2nd Floor - F	an Roo	om	1		X		VAT	& Ma	stic	;	+	40	0SF		х			
	2nd Floor - Fan Room																	
Name of Registered Was	ste Haule	er		N.	JDEP W	/aste	Cubic	Yards	_	Nam	e of Re	eaister	ed Lan	dfill				
ATC, Inc. / JBT (500	TC, Inc. / JBT (50071)						of Was	ste		Min	erva E	0.70	prises					
City, State Shirley, NY / Bronx,	NY					10	Dispos TBD	al Date	(		State ynesb	urg,	OH 4	4688	3			
Completed by Joseph Patrick			Title Proje	ct Ma	nager		S	ignature	9	To				Date 05-	e 21-1	18		



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

CHECK #25274

Date of Notification (1) 05-21-18				of Building (			r (2)		) E	G	3	W		In
Agencies Notified  EPA DEP DEP DOL Amended Amendment Emergency justification)	(including	- L	700 H City, St Irving Name of	of Contact	de				Telephor		gber	NTR		The second secon
DCA Cancellation				el Leonard		ION			(917) 7	47-9	898	NG		
Name of Facility Where Abatement is Takin Central Office Street Address 282 Washington Avenue	g Place (3)	)					Type of Facility School (I) Subchap X Other (i.e.	<-12) ter 8 (0				ldings	, hom	nes,
City (5) Belleville							Square Feet 30,000	1 2	# of Floo 3	rs		3ldg.	Age	
County (6) Essex				Code (7) USE ONLY)			Current Use (I		being de	molish	ned)			
Name of Monitoring Firm Hired by Building C ESIS Health, Safety & Environmen			ASCI	M No.			of Abatement C acle Environ			**************************************				
Street Address P.O. Box 430						15.700.000	Address Broad Street							
City, State, Zip Code North Versailles, PA 15137							State, Zip Code Stadt, NJ 070	72						
Project Manager for Monitoring Firm Chris Pierce		11.2	Telepho (201)	ne No. 492-3165	5		none No. 939-6565		Lice 007	nse N 56	0.			
Start Date (10) 05-30-18	Scheduled 08-30-1	8	pletion	Date (11)		0.0200000	of OSHA Monit n-Air Inc.	or						
Occupancy Status During Abatement (Chec  Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe:	Period of Al	batem	ent		_	10-5 City, S	Address 9 Jackson Av tate, Zip Code I Island City,							
Scope of Work (Check All That Apply)  ≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf		enovat emoliti				×	Full Contain Mini-Enclose Glovebag Pontain	ure rocedu	re				e	
La contract of the	325755	ocatio											ement	t
Location of Asbestos-Containing Material (ACM)  TO BE ABATED In Facility  (13)	Used Main Custo	Solei	y by ice/	(i.e. t	os Cont hermal surfac		laterial (ACM) s insulation, T, or		Amount (Specify SF or LF	,	Removal	Repair	Encapsulate	Enclosure
2nd Floor - Fan Room			х		VAT	& Ma	stic		400SF	•	x			
Name of Registered Waste Hauler ATC, Inc. / JBT (50071)		Ha	IDEP Wauler ID 310	No.	Cubic 'of Was				stered La terprise					
City, State Shirley, NY / Bronx, NY		1	-x10.16682			al Date	City, St.		g, OH	4468	8			
Completed by Joseph Patrick	Title Project	t Mai	nager		Si	gnature	THE			Dat 05	e -21-	18		

\*\*\*\*\*\*\* \*\*\* TX REPORT \*\*\* \*\*\*\*\*\*\*\*\*

#### TRANSMISSION OK

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

CHECK #25274

D ( 1) 115 11 115									
Date of Notification (1) 05-21-18			Name of Building C	wner/Operato	r (2)				
			Verizon Comm	unication					
Agencies Notified	Type Notification	1	Street Address	,					
EPA	☐ Initial		700 Hidden Rid	dge					
DEP	Amended		City, State, Zip Coo	de		-			
N DOL	Amendmen		Irving, TX			6			
DOH.	Emergency justification	(including	Name of Contact			~	Tal	ephone Num	hor
DCA	Cancellatio	) n	Rafael Leonard	lo			0.000	17) 747-98	
Document	Bessel .		FACILITY INFO	2072			10	11/11/100	
Name of Facility Where	Abatement is Taki	ng Place (3)	7 AGILITY INFO	KWATION	Typ	e of Facility (4	()		
Central Office					1_	Z 18	(50)		
Street Address					H	School (K-12 Subchapter		orthan K-12	
282 Washington Av	venue					Other (i.e. pr	ivate	& commercia	l buildings, homes,
City (5)					-	etc.)	1		
Belleville						are Feet	1000000	f Floors	Bidg. Age
County (6)						000	3		65
Essex			County Code (7) (STATE USE ONLY)			rent Use (Prio	r if bei	ng demolishe	ed)
			(STATE USE ONLY)		Co	mmercial			
Name of Monitoring Firm	Hired by Building	Owner (8)	ASCM No.			patement Cont			
ESIS Health, Safet	y & Environme	ntal		Pinn	acle	Environme	ntal	Corp.	
Street Address				Stree	Addr	ess			-
P.O. Box 430				200	Broa	d Street			
City, State, Zip Code	USS - NYCEPHORNOLOM			City, S	State,	Zip Code			
North Versailles, P.				Carl	stadt	, NJ 07072			
Project Manager for Mor	nitoring Firm		Telephone No.	Telep	hone	No.	-	License No	
Chris Pierce		*	(201) 492-3165			6565		00756	
Start Date (10)		Scheduled Co	empletion Date (11)	Name	of OS	SHA Monitor			
05-30-18	2	08-30-18		Ever					
Occupancy Status Durin	a Abatement (Che	ck Only One)		Street					
		150				ess ckson Aven	110		
Facility Closed/Vac Abatement Perform	ated During Entire	Period of Abate	ment			Service Services	ue		
Other - Describe:	- Carolide Of 14011	mai r admity i lod	13	100	70	Zip Code			
Scope of Work (Check A	Il That Annha			- Long	ISIA	and City, NY	111	01	
Prompt of the last	ii i iiat Appiy)								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renov		-	F	ull Containme	nt with	Negative Pro	essure
2 100 St 01 2200 If		Demol	ition	-	M	ini-Enclosure			
					G	lovebag Proce on-Exempted	dure	d Non-Eriable	Procedure
		Is Loca	tion	Bar Bar	- 14	Excimpled	) ail	2 NOTE-FILABLE	Abatement
Location	of	Norma	E11.57(11)	23 2 20	2				Type
Ashastas Castaining		Used Sol		Description	of	1			<del>-                                    </del>



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Date of Notification (1) 5/24/18					f Building NOLE C									П	<u> </u>	7
Agencies Notified	Type Notification			Street A	ddress artlett Av	ve					M	AY	29	20	18	
DEP × DOL	Amended Amendmen Emergency	(including	- [	west C	ite, Zip Co Creek No f Contact		2		The late of the second		ASBE	LICE	ENIS	ONTE NG	ROL	&
DOH DCA	justification) Cancellation		100	Joycel	ynn						9-296					
Name of Facility Where	Abatement is Takir	ng Place (3	)	FACI	LITY INFO	ORMAT	ION	Тур	e of Facility (	(4)						
Street Address City (5)								X Squ	School (K-1 Subchapter Other (i.e. p etc.) pare Feet	8 (Oth private # o		ercial		ings, dg. A		es,
Beach Haven				County	Codo (7)			C	contillos (Dei	1	aa daa	allaha	4)			
County (6) Ocean					Code (7) JSE ONLY,	)		hoi				olisne	a)			
Name of Monitoring Fire	m Hired by Building	Owner (8)		ASCM	1 No.		- 100 NOSCHOOL		atement Cor AD PROFE							
Street Address	2						Street 6 WH		ess DOVE C	OURT						
City, State, Zip Code									Zip Code OOD, NJ 0	8701						
Project Manager for Mo	nitoring Firm			Telephor	ne No.		Teleph 732-6				Licens 1200		io i			
Start Date (10) 6/3/18		Schedule 6/6/18	d Corr	pletion [	Date (11)				SHA Monitor AD PROFE		NALS					
Occupancy Status Durin				90			Street 6 WH		ess DOVE CO	OURT						
	cated During Entire ned Outside of Norr						City, S	tate,	Zip Code							
Scope of Work (Check	All That Apply)						L/ tixe		JOD, 140 0	0101					V	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		manage of the same	enovat emoliti				×	N G	ull Containm lini-Enclosure lovebag Pro- lon-Exempte	e cedure					a	
20 100	8		Location				65 66						-		ment	
Locatio Asbestos-Containin TO BE AE In Fac (13)	g Material (ACM) BATED ility	Use Mai	d Solel ntenar odial S (12)	y by nce/	Asbes (i.e.	tos Con therma surfa	scription taining M systems cing, VA niscellan	fateri s insu T, or		(8	mount Specify or LF)		Removal	Repair	Encapsulate	Enclosure
EXTER	ZIOR	Yes	No	N/A			Siding			25	500SF		x		CD	
- LATE							Olding				70001		^			
Name of Registered Wa	ste Hauler		N	JDEP W	/aste	Cubic	Yards		Name of	Registe	ared Lar	adfill				
NEWARK CARTING			H	auler ID 1509		of Wa	10.5		IESI	regist	rea Edi	-GIIII				
City, State NEWARK, NJ						Dispo 6/6/1	sal Date 8		City, Stat BETHL		/ PA					
Completed by JOSEPH PERLSTE	IN	Title	 ER		8.211 8.98111	1 5	Signature	)	1		MILLION OF	Date	!		10-20	

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Date of Notification (1) 5/23/18				f Building ure Con			(2)		DI	15 0	<i>y</i> 1				-
Agencies Notified Type Notification			Street A							W	AI	2 5	20	118	- In the second
EPA X Initial Amended Amendment			City, Sta	ite, Zip Co					A CONTRACTOR OF THE PARTY OF TH	ASB	EST	os (	ON' SIN	TROI	_&
□ Emergency (	including		Name of	f Contact			7		Tele	ephone-	1 11	21	31.44		
Name of Facility Where Abatement is Taking	Place (3)		FACI	LITY INFO	ORMATI	ON	Туре	of Facility (	4)						
Street Address	7						×	School (K-1 Subchapter Other (i.e. p	8 (Othe			build	lings,	home	es,
City (5) Jackson	-							etc.) re Feet	# of	Floors		В	ldg. A	ge	
County (6) Ocean				Code (7) JSE ONLY	)		Curre	ent Use (Pri	or if bei	ng demo	olishe	d)			
Name of Monitoring Firm Hired by Building (	Owner (8)		ASCM	1 No.				atement Cor D PROFE							
Street Address							Addre HITE	ss DOVE CO	DURT	3					
City, State, Zip Code						(C) (C) (C)		ip Code OD, NJ 0	8701						
Project Manager for Monitoring Firm			Telephor	ne No.			none N 668-9			Licens 1200	e No.	(	1185001		
Start Date (10) 6/3/18	Schedule 6/8/18		npletion (	Date (11)				HA Monitor D PROFE	SSIO	NALS					
Occupancy Status During Abatement (Checi Facility Closed/Vacated During Entire F			ent				Addre	ss DOVE CO	DURT						
Abatement Performed Outside of Norm  Other – Describe:	al Facility	Hours			_			ip Code OD, NJ 0	8701						
Scope of Work (Check All That Apply)			80			·	7		000 - 5000	- 5004 - 6000	V88				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	annotation.	enova emoliti				×	Mir	II Containme ni-Enclosure ovebag Prod n-Exempted	e cedure					2	
	100000000000000000000000000000000000000	ocati	18991					III Exemples	a ( ) and	110111	Habic		Abate	ment	
Location of Asbestos-Containing Material (ACM)	Used	ormali Solei	ly by	Ashes	Des tos Cont	scription		L(ACM)	A	mount	ŀ		Ту		
TO BE ABATED In Facility (13)		ntenar odial S (12)			thermal surfac		s insula T, or	ation,	(S	pecify or LF)		Remova	Repair	Encapsulate	Enclosure
WITEDIOD	Yes	No	N/A											te	
INTERIOR	-		-			oor tile				00SF	-	X			
EXTERIOR				K	oofing	and F	iasnir	ng	15	00SF		X			
Name of Registered Waste Hauler		13000	JDEP W auler ID		Cubic of Was			Name of	Registe	red Lan	dfill				
NEWARK CARTING		10.250000	1509		15			IESI							
City, State NEWARK, NJ					Dispos 6/8/18	al Date		City, State BETHL		I PA					
Completed by JOSEPH PERLSTEIN	Title OWN!	ER			S	ignature	9				Date				



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	A CAL		(Pt	ırsuant	to NJAC 8	3:60 an	d 12:120	))	A Paragraphic	1	FC	2 [c	2 1	1\/7	E	
Date of Notification (1) 5/24/18	4				f Building ( antville H				y		<u>E                                    </u>	7 15	<del>-</del> 1	_₩	<u>E</u>	
Agencies Notified	Type Notification			Street A							MA	Y S	) G	2018		
EPA	× Initial			211700200	Main St ite, Zip Co					1 11	1117		- ~	2010		brogues
DEP × DOL	Amended Amendment			100000000000000000000000000000000000000	antville, 1		232			1_	ASBES	TOO	001	UTDA	)! O	
DOH DCA	Emergency ( justification)	including		Name of	f Contact					Te	elephone	Nun	iber		71_ C4	
DCA	Cancellation									60	09-204	-345	54			
Name of Facility Where	Abatement is Taking	Place (3)	)	FACI	LITY INFO	RMAT	ION	Ty	pe of Facility	(4)			-			-
Units A308 and A10			33					П	School (K-	100						
Street Address 156 N Main St								×	Subchapte	er 8 (Ot				dings,	home	es,
City (5) Pleasantville								Sq	uare Feet	# (	of Floors	3	В	ldg. A	ge	
County (6) Atlantic					Code (7) USE ONLY)				irrent Use (Pi ome	ior if be	eing dem	nolish	ed)			
Name of Monitoring Firm	Hired by Building (	Owner (8)		ASCM	No.				Abatement Co			 S				
Street Address			And the second	.l.			Street 6 WH		dress E DOVE C	OUR	т					
City, State, Zip Code			23-20-2						e, Zip Code OOD, NJ (	08701						
Project Manager for Mon	itoring Firm		T	Telepho	ne No.		Teleph	none			Licen 1200		D.			
Start Date (10)		Schedule	d Con	pletion l	Date (11)		S. Moderno.	236236	OSHA Monito	r	1200					
6/4/18		6/11/18		**	8.8		AAA	LE	AD PROF	ESSIC	DNALS	5				
Occupancy Status During	g Abatement (Chec	k Only On	e)				Street		iress E DOVE C	OLIB.	т					
Facility Closed/Vac Abatement Perform X Other – Describe:							City, S	tate	, Zip Code OOD, NJ							
Scope of Work (Check A	II That Apply)						1									
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Asbestos-Containing TO BE AB In Facil (13)	ATED	Mai	ntenar odial S (12)	nce/		therma surfa	taining M I systems acing, VA miscellar	s ins	or		Amount (Specify SF or LF)		Removal	Repair	Encapsulate	Enclosure
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Name of Registered Was AAA LEAD PROFES			H	JDEP Wauler ID 4509		of Wa	: Yards iste		ACUA		tered La	ndfill				
City, State LAKEWOOD, NJ				A		Dispo	sal Date 18		City, Sta		OR TV	VP N	IJ			
Completed by JOSEPH PERLSTE	IN	Title	ER				Signature	9				Da	te		175	
TOOL III LIKEOIL	M.S.	OVVIN														

PAID

City, State

Lincoln Park, NJ

Gordana Luna

Completed by (Print or Type)

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

2018-109 (Pursuant to NJAC 8:60-7 and 12:120-7) B & G proj. #: \*\*\* NEW START DATE \*\*\* Check # 8992 Date of Notification (1) Name of Building Owner/Operator (2) 10 15 1/12 12 1/11 18 1 PSE&G Agencies Notified Type Notification Street Address □ EPA 4000 Hadley Road Initial ☐ DEP City, State, Zip Code X DOL Amendment South Plainfield, NJ 07080 ASBESTOS CONTROL & X DOH Name of Contact Telephone-Number VOING Cancellation ☐ DCA Chris Nemeth 908-412-2419 **FACILITY INFORMATION** Name of facility where abatement is taking place (3) Type of Facility (4) School (K - 12) PSE&G Wave One - Metro Clifton Subchapter 8 (Other than K-12) Street Address Other (Private/Commercial Bldgs./Homes, etc. 150 Circle Avenue Square Feet | # of Floors Bldg. Age City (5) County (6) County Code (7) (State use only) Current Use (Prior if being demolished) Clifton, NJ 07011 Passaic Offices Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Abatement Contractor (9) Burean Veritas North America n/a B & G Restoration, Inc. Street Address Street Address 105 Ryerson Road 109 North Center Drive City, State, Zip Code City, State, Zip Code North Brunswick, NJ 08902 Lincoln Park, NJ 07035 Project Manager for Monitoring Firm Phone Number Telephone Number License Number (973)696-6869 J.B. Chadwick 732-623-4555 00378 Name of OSHA Monitor Scheduled Start Date (10) Sched, Completion Date (11) B & G Restoration, Inc. 05/23/2018 \*\*\* 06/30/2018 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: Occupied 7:00 am - 3:30 pm LincolnPark, NJ 07035 Scope of Work (check all that apply) ☐ Demolition Renovation Full Containment w/negative pressure Glovebag procedure >3 sf or >3 If X ≥160 sf or ≥260 lf Mini-enclosure Non-friable procedure Is location normally used solely Location of E by maintenance/custodial е e asbestos-containing n Amount Description of asbestos-containing staff(12) m n p C material to be (Specify SF or material (ACM) C 0 a abated in facility (13) a Yes LF) No N/A e Lower roof roof flashing & tar X X 1,380 sf Loading Dock 17,000 sf transite roof & siding X Registered Waste Hauler NJDEP Hauler ID# Cubic Yards of Waste Name of Registered Landfill B & G Restoration, Inc. 19563 150 Fairless Landfill

Disposal Date

Secretary/Treasurer

05/23/18 - 06/30/18

Signature

City, State

Gordana Luna

Morrisville, PA

05/22/2018



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

B & G proj. #: 2018-109

JAC 8:60-7 and 12:120-7)

Note that the second se					*** ON	HOLI	D ***	Check	# N/A				-
Date of Notification	1 (1)	- 11	Name of	Building Ow	ner/Operator (2	2)		III E	P E	ĪÌ.	11/7	TP.	g-manu.
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Agencies Notified	Type Notifica	tion	Street Ad	dress				1175	-			1	
☐ EPA ☐ DEP	X Initial			Hadley Ro	oad				MAY ?	. 6	718		
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☐ DCA	Cancel	lation	Chris	Nemeth					12-2419				
l control of the cont				FAC	CILITY INFORM	MATIO	N						
Name of facility wh	nere abatement	is taking p	place (3)				I	Type of Facility				700	
PSE&G Wave	one - Metr	o Clifton	Í						ol (K - 12) napter 8 (0		han K	-12)	
Street Address									(Private/C			-12)	
150 Circle Av	enue								/Homes,	etc.		dg. A	age
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Clifton, NJ 07			assaic			(Sta	ate use only)	Current Use (F Offices	Prior if bein	ng den	nolish	ed)	
Name of Monitoring			ner (8)		ASCM No.	,	Name of Abatement	Contractor (9)					
Burean Verita	as North Am	erica			n/a		B & G Restora	tion, Inc.					
Street Address							Street Address						
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City, State, Zip Code North Brunsv		02					City, State, Zip Code Lincoln Park,						
Project Manager for	Monitoring Fire	n		Phone Numb	per	_	Telephone Number		License	Numi	ber		
J.B. Chadwid	ck			732-623-4	555		(973)696-686	39	0	0378			
Scheduled Start Dat	te (10)	Sche	ed. Compl	etion Date (1	1)		Name of OSHA Mor	117.7					
05/14/2018			/30/201				B & G Restora Street Address	tion, inc.				-	-
Occupancy Status E							105 Ryerson F	Road					
Abatement pe	I/vacated during erformed outside						City, State, Zip Code						
Describe:						=	LincolnPark, N	J 07035					
Scope of Work (che	eck all that appl	у)											V -
Demolition	X	Renovat	ion			□ F	Full Containment w/ne	gative pressure	Glove	bag pr	ocedu	ıre	
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abated in facil		Yes	No	N/A	material	(ACM)		(Specify S LF)	or or	o v	a i	a	C L
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Registered Waste Ha	aulor	L		- 'D# 1 C	Subje Verde of	Masta	III (B.:.	150					
B & G Restorati		NJL	19563	#   C	Cubic Yards of 150	vvastė	Name of Registered Fairless L						
City, State Lincoln Park, N	IJ			Disposal Dis	Date 4/18 - 06/30	/18	City, State Morrisville						
Completed by (Print	***	Title			Signature		<del> </del>	1171	Date				
Gordana Luna	* 1- 1		ary/Trea	surer			Gordana Luna			1/201	8		

UN 6041

Date of Notification (1)	. 01			· i	No CD III		_0,		1 F	P	F	1	W/ I
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I DCA	justifica	tion)	-		Name of Contact	7 .			Telepho	LiC	ENS	SING	
- Den	☐ Cancella	ition			F	什			lelepho	ne Nun	iber		hambane usine
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						City, Oldie,	Zip Code				FOR	E-2777	
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PA State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

Check 10372

Date of Notification (1)	+	2.21.11		A1	- (D 111 - (				٠.					
Date of Notification (1)	5/24/18	)		Name	of Building (	Owner/C	perator (2)	Car	1 -	3e11	PC			
Agencies Notified	Type Notification	1.1		Street	Address	W 12		Car	<u> </u>	JC 11	رے			
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≠ DOH	☐ Emergency ( justification)	including		Name	of Contact	44	MRC	ice /	V U L	phone N	(C) (d	NA S		#
□ DCA	□ Cancellation						••			.·	umber			111
Name of Facility Where	Abatement is Taking	Place (	3)	FAC	ILITY INFO	RMATI		pe of Facility	74	MAY	29	201	8	
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Name of Monitoring Firm	Hired by Building C	wner (8)		ASC	M No.		Name of A	batement Co		100	_	(i)	_	
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Start Date (10)	2010	Schedule	d Con	pletion	Date (11)		Name of O	SHA Monitor	,		dia d	1	-	
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Facility Closed/Vaca				ont			_	Box	33	7				
□ Abatement Performe	ed Outside of Norma	al Facility	Hours	Ciii			City, State,	Zip Code		•				
Other - Describe:	-						New	Egypt	N	J	08	53	3	
Scope of Work (Check Al	I That Apply)	1222 1944						- (•	50					
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DCA Cancellat	on		MAU					I.					
Name of Facility Where Abatement is Ta	king Place	(3)	FA	CILITY II	VFORMAT	TION	Type of Facility	(4)					
PRIVATE							School (K-	. ,					
Street Address							Subchapte	r 8 (Othe	er than K-	12)			
City (5)						1	Other (i.e. etc.)	private &	commer	cial bu	ilding	s, hor	nes,
RAMSEY NJ. 07446							Square Feet	# of	Floors		Bldg.	Age	
County (6)			Country	Code (7	,		1,820		2		F	2	
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Name of Monitoring Firm Hired by Buildin	g Owner (8	3)	ASC	M No.	220	Name o	f Abatement Co	101	(0)				
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Street Address						Street A							
City, State, Zip Code				- 1			51- ST.						
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Project Manager for Monitoring Firm			Telepho	ne No		Telepho	H BERGEN						
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Start Date (10) 05			mpletion	Date (11	)		OSHA Monitor		1000				
Occupancy Status During Abatement (Che	05/26	2018				ENVIF	RO PROBE II	VC,					
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Abatement Performed Outside of Nor	Period of mal Facilit	Abateı v Hour	ment 's				BERTY ST. te, Zip Code				ÿ.		
Other – Describe:							CHEN NJ.						
Scope of Work (Check All That Apply)							OTILITY IVO.						
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Date of Notification (1) 5/24/18			Name	of Building	Owner/Opera	ator	(2)			MA	Y 29	20	18	
Agencies Notified Type Notification	n			Address Bartlett Av	ve			)**		ASBES	TOS C	ONTI	TOL	<u> </u>
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DCA DOH justification Cancellation	٦)	ig	The State of the S	of Contact e Lynn						elephone 09-296-				
Name of Facility Where Abatement is Tak 700 Newman Springs Rd	ing Place	(3)	FA	CILITY INFO	ORMATION	T	Туре	of Facility	(4)					
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City (5) Lincroft								re Feet	# 0	of Floors		Bldg.	Age	
County (6) Monmouth			County (STATE	Code (7) USE ONLY)			Curre	ent Use (Pr	ior if be	ing demo	olished)	-		
Name of Monitoring Firm Hired by Building	Owner (	3)	ASC	M No.	Nar AA	ne o	f Aba	tement Co	ntractor	r (9) NALS				
Street Address							ddres	ss DOVE C	OURT					
City, State, Zip Code					City	, Sta	ate, Z	ip Code OD, NJ 0	8701					
Project Manager for Monitoring Firm			Telepho	one No.	Tele	epho	ne No	0.		License	e No.			-
Start Date (10) 5/24/18	Schedu 6/4/18		mpletion	Date (11)	Nam	ne of	OSF	A Monitor PROFE						
Occupancy Status During Abatement (Che		337.01			Stre	et A	ddres	ss				-57.4	73-7-7-7	
Facility Closed/Vacated During Entire     Abatement Performed Outside of Non Other – Describe:	Period of mal Facilit	Abater y Hour	ment s		City,	Sta	te, Zi	DOVE CO p Code DD, NJ 0						
Scope of Work (Check All That Apply)							,,,,,	<i>DD</i> , 140 0	0/01					
≥3 sf or ≥3 if ≥160 sf or ≥260 if	×	Renova Demoli	ation tion				Min	Containme i-Enclosure vebag Prod i-Exempted	edure					
1		Locat Normal						ZAGIIPES	y ( ) and	2 14011-1 11	able Fit	Abat	emen ype	t
Location of Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Us Ma	ed Sole aintena todial s (12)	ly by nce/	(i.e. th	Descriptions Containing the C	Mat ms ir AT,	erial Isulat or	(ACM) tion,	(S	nount pecify or LF)	Remova	Repair	Encapsulate	Enclosure
INTERIOR-wet demo	Yes	No	N/A		pina ina d								ate	Ге
					pipe insul	allO	11		/5	50LF	×			
Name of Registered Waste Hauler NEWARK CARTING		Н	JDEP W auler ID 1509	No.	Cubic Yards of Waste 30	× 11-1-1-1		Name of F	Register	ed Landf	ill			
City, State NEWARK, NJ			-	ı	Disposal Date 5/4/18	е	1	City, State BETHLE		ΡΔ				
Completed by JOSEPH PERLSTEIN	Title OWN	IER			Signatur	re .					ate			$\dashv$

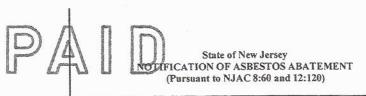
	PA			FICATIO	State of No N OF ASE t to NJAC	BESTOS	ABATE			(	N	anle	1	10	13
Date of Notification (1) 05/22/2018		and Greed	CO.	The properties with a	of Building elle Ros		Operator	(2)		<u> </u>			TI III	П	\// E
Agencies Notified  EPA	Type Notification			Street	Address							5 6	Ę	1	y E
DEP X DOL	Amended Amendmen				tate, Zip C Bridge, N		57			1		MAY	2	9 2	)18
DOH DCA	Emergency justification) Cancellation				of Contact					Tel	ephone l			ONT	DOL /
				FAC	ILITY INF	ORMAT	ION			-				SHMG	ROL 8
Name of Facility Where A Residential Propoer		ng Place (	(3)					Туре	of Facility (4)		State State of State				
Street Address	325								School (K-12 Subchapter 8 Other (i.e. pri	(Oth	er than k & comme	(-12) ercial b	ıildin	gs, hor	nes,
City (5) Old Bridge								Squa	etc.) are Feet	# o	f Floors		Bldg	. Age	
County (6)				County	Code (7)				ent Use (Prior		na demo	liched)	190	0	
Middlesex					USE ONLY	n					_	ilisi ieu)			
Name of Monitoring Firm I	Hired by Building	Owner (8	)	ASCI	M No.				atement Contr Ontracting L		(9)	*************			
Street Address							Street 240							***	
City, State, Zip Code									ip Code NJ, 07206						
Project Manager for Monit	oring Firm			Telepho	one No.		Teleph 908-	one N	0.		License 01355				
Start Date (10) 06/02/2018					Date (11)		Name	of OSI	HA Monitor			,			
Occupancy Status During	Abatement (Chec	06/09/	ATTENDED TO	1			Iris E Street		nmental La	abora	atories				
Facility Closed/Vacat Abatement Performer	ed During Entire I	Period of	Abater	nent			2333	Rou	te 22 West						
X Other – Describe: Other	CCUPIED	iai Facility	y Hour	5					ip Code , 07083						
Scope of Work (Check All	That Apply)	992,000													
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf			Renova Demoli				×	Mir Glo	l Containmen ni-Enclosure ovebag Proced	dure					
		Τ.			1	447.4		1 No	n-Exempted (	*) and	Non-Fri	iable Pi	77.5	ure atemer	
Location of	of	1	Locat Normal	lly		Des	scription	of						Гуре	
Asbestos-Containing N <u>TO BE ABA</u> T In Facility (13)	TED	Ma	ed Sole intena todial ( (12)	nce/ Staff?		tos Cont thermal surfac	aining M	aterial insula T, or		(S	mount pecify or LF)	Remova	Kepair	Encapsulate	Enclosure
		Yes	No	N/A										ate	е
Exterior Sig	ding			X		Trans	site Sic	ling		1,2	00 SF	X	-		
	- 155-155-155-166-16	1		-								+	+	+	
										100000		+	+	+	
Name of Registered Waste Danvic Contracting LL			Н	IJDEP W lauler ID		Cubic of Was	te		Name of Re Fairless h	750000000					
City, State Elizabeth, New Jersey	,		3	7574		4 Cu Dispos	al Date		City, State						
Completed by		Title					gnature		Morrisville	e, P/		Date	(2-11) -S		
leymy Donneys		Own	er									05/22	/201	8	

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Check#3065		NO	11F1C (F	hema	nt conju	AQ 8:6	OS ABA	TEMENT 16)	10,65	7 5	ij.	W_	5
Date of Notification (1)				Nam	e of Buildin	alown	e Operator	(2)					
05/	24 /	18			Paine	398	Operator	(2)	II LI MA	Y 2	9 2	2018	Standard Co.
Agencies Notified	Type Notific	cation			t Address								-
□ ЕРА									ASBES	TOS	CON	TRO	L&
DOLWD	Amende			City.	State, Zip	Code				LICEN	SIN	3	Annuers.
☑ DHSS	Amenda				clair, NJ								
DCA (NJAC 5:23-8)	justificat	ncy (includir	ng		e of Contac				Telephone Num	nher			
	Cancella				Paine	37.			Telephone Han	ibe:			
				-	CILITY II	VEOR	MATION			· <del>-</del>			
Name of Facility Where	Abatement is	Taking Plac	e (3)	TP	CILITTI	VFUKI	WATION	Type of Facili	tu (4)			TID See	
Private house		raking r lac	· (5)	20				School (K-					
Street Address									-12) er 8 (Other than K-1 2	2)			
								Other (i.e.	, private and comme	rcial bu	uildin	gs,	
City (5)			-					homes, et					
Montclair, NJ 07043								Square Feet	# of Floors	В	ldg. A	\ge	
County (6)				Com	nty Code (7)	(STATE	USE ONLY	Current Hay	Dring if halos de la	-6-0			0 10
Essex				Cour	ny code (7)	(STATE	. USE UNLY)	Current Use (	Prior if being demoli	sned)			
Name of Monitoring Firm	n Hired by Bui	ldina Owner	(8)	TASCM	No	TNom	o of Abote		(0)				
9		9 0	(0)	AGGIVI	INU.	1		nent Contractor (	(9)				
Street Address				<u> </u>		_	ech LLC						
0.1.0017.000						1	et Address						
City, State, Zip Code						_	Valley Rd						-
							State, Zip						
Project Manager for Mor	nitorina Firm		Te	lephone	No	management of the second	ne, NJ 074 phone No.	170	Liannan Na				
• • • • • • • • • • • • • • • • • • • •			10	epriorie	140.		538-1777		License No.				
Start Date (10)		Scheduled	Compl	etion Da	ate (11)		e of OSHA	Monitor	01127				
				2_/	18	Envir	ovision C	onsultants,Inc					
Occupancy Status Durin						Stree	t Address						
<ul><li>☐ Facility Closed/Vacat</li><li>☐ Abatement Performent</li></ul>	ted During Ent	tire Period o	f Abat	ement		20-21	Wagarav	v Road, Bldg .	# 35E				
Time of Abatement:	AM-	normai Facii PM/		irs - Dei I_		City,	State, Zip (	Code					
					2 555	Fair I	Lawn, NJ						
Scope of Work (Check a	II that apply)					-			nination with negativ	e press	sure	and Assessment of the State of	
>3 sf or >3 lf > 160 sf or >260 lf			enova			E	Mini-En	closure					
≥ 160 sf or ≥260 lf			emolit	ion		Σ			Tent with Negative		sure		
			Is Loca	ation	T		J NOII-EX	empled ( ) and r	Non-Friable Procedu		1		
Location			Norm	ally		1	Description	of			1	ent T	T
Asbestos-Containing	Material (ACN		ed So ainten	lely by		stos Co	ontaining M	aterial (ACM)	Amount	Remova	Repair	Enc	Enc
TO BE ABI		7 Table 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Staff?	(1.€		nal systems facing, VA	insulation,	(Specify	Von	pair	aps	Enclosure
(13)	or di		(12	)			r miscellan		SIF or LF)	<u>a</u>		Encapsulate	re
		Yes	No	N/A			and the second of the second o					O	
Basement				$\boxtimes$	Pipe insi	ulation	ı		120 LF	×	П	П	П
			П										
												닏	<u> </u>
				$\perp \square$							Ш	Ш	Ш
Name of Registered Was	ste Hauler		N	JDEP Wast	e Hauler ID No.	Cubic	Yards of Was	Name of Reg	gistered Landfill			d Control	
Gr Tech LLC				00337	35	T	BD	T.R.R.F. In	С				
City, State						Dispo	sal Date	City, State			*******		
Wayne, NJ 07470						T	BD	Tullytown,	PA				
Completed By (Print or T	ype)	Title					10475-2 A			ate	-		-
N.Jevtic		Owner					7	Pewho Wen	ad 105	/24/18	2		
ASB-41		To Artion					//	, so - wen	03.	124/10	,		

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

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	U U I	1 1				-0,		C+12	ECY	- #	- 7
Date of Notification (1) 5/18/2018				of Building Own	er/Operato	or (2)	par an Parlament and and	NAME OF THE OWNER OF THE OWNER.			
Agencies Notified Type Notifica	tion			Address				EG	F	n n	//
EPA Initial							IIUIT	<u> </u>		LI (	1
X DEP Amende Amende				tate, Zip Code					0 4		
Emerge.	ncy (includin	ıg		son, NJ 0751	4			100000000000000000000000000000000000000	2 9	20	18
DCA justificat			110000	of Contact Topper			l Talenhai	ne Numbe	er	-	- 120
				CILITY INFORMA	ATION			ASBEST			ROL
Name of Facility Where Abatement is T Residential / Two Family	aking Place	(3)				Type of Facility	(4)	Name of the last o	CENS	SING	-
Street Address						School (K-					
						Subchapte  Other (i.e.	r 8 (Other tha private & com	in K-12) imercial b	uildina	s hor	nae
City (5)						etc.) Square Feet					1103,
Paterson						4,800	# of Floo	rs	Bldg. 98		
County (6)				Code (7)		Current Use (Pri		molished)			
Passaic				USE ONLY)		Offices					
Name of Monitoring Firm Hired by Buildi TBD	ng Owner (8	3)	ASCI	M No.	Name	of Abatement Cor	ntractor (9)				
Street Address						Contracting, LI	_C				
						Address Valley Road,	Suite K				
City, State, Zip Code						State, Zip Code	oune iv				
Division						ne, New Jerse	y 07470				
Project Manager for Monitoring Firm			Telepho	one No.		none No.	Lice	nse No.		*	-
Start Date (10)	Sahadu	lod Co		Date (11)		928-5040	800	74			
5/28/2018	5/31/2		inpietion	Date (11)		of OSHA Monitor Contracting, LL	C				
Occupancy Status During Abatement (C	neck Only O	ne)			100	Address	.0				
Facility Closed/Vacated During Enti	re Period of	Abater	nent		1385	Valley Road,	Suite K				
Abatement Performed Outside of N Other – Describe:	ormal Facilit	y Hour	S			tate, Zip Code					
Scope of Work (Check All That Apply)					Wayı	ne, New Jerse	y 07470				
× ≥3 sf or ≥3 lf	×	Donous				1			-4-0-		
≥160 sf or ≥260 lf	= .	Renova Demoli				Full Containme Mini-Enclosure	ent with Nega	tive Press	ure		
					×	Glovebag Proc	edure	F :			
	Is	Locat	ion			Non-Exempted	(*) and Non-	Friable Pr		re emen	+
Location of		Normal	ly	D	escription	of				ype	
Asbestos-Containing Material (ACM)  TO BE ABATED	Ma	ed Sole intena	nce/	Asbestos Cor	ntaining M	aterial (ACM)	Amount			Ш	_
In Facility (13)	Cus	todial ( (12)	Staff?	surf	acing, VA		(Specify SF or LF)		Repair	ncap	inclo
(13)		(Ca. 1/2	T	other	miscellan	eous)		oval	pair	Encapsulate	Enclosure
Pagament	Yes	No	N/A							te	(D
Basement		X		Pipe	e Insulat	ion	100 LF	x			
Name of Registered Waste Hauler		1									
Service Transport Group, Inc.		70.000	JDEP Waller ID I		Yards aste	Page 1990	egistered Lar				
			990	TBD		Minerva	Enterprise	s, LLC			
City, State Iew Castle, Delaware					sal Date	City, State					
Completed by	Title			TBD	1	Waynes	ourg, Ohio				
Predrag Sarcev	100000000000000000000000000000000000000	Presid	dent	7	Signature			Date 5/18/2	118		
				1 17	70.000	- Aug 6 Table 1		UI IUIZ	11(1		



Claud	(and ) (and )	- Constitutions	(Pu	rsuant t	to NJAC 8:6	0 and 1	2:120)				ch	edle	462	-1	
Date of Notification (1) $5-23-2018$			N	ame of E	Building Own	er/Ope	rator (2)	N			n E	C	E		$\mathbb{W}$
□ EPA □ DEP □ □	Notification Initial Amended Amendment#_		Si C	ity, State	ress ; Zip Code GF W				07	45		MA	7 2	9 2	018
■ DOH □ DCA □	Emergency (incl justification) Cance lation	uding	N	ame of (	CRONK		7			Tail			4.5	LO-LINE	-
Name of Facility Where Abateme		e (3)		FACIL	ITY INFOR	MATI	ON		Facility (4)			orienten an	Careary Service		encome###
Street Address								<b>M</b> O	ther (i.e. pri	vate & co	ommercial				tc.)
City (5) County (6)	D				- d- (7)			Square 166		# of F		2	3ldg. A	ge YRS	Ē.
BERGEN Name of Monitoring Firm Hired	by Building Osen	er /8)		County Co	SE ONLY)		Name	RE	S 1 D 6	FNC		1)			
Street Address	by building Own			ADCIN			Ве		noval In						
City, State, Zip Code			-				City, S	tate, Zip			:t		Will of		
Project Manager for Monitoring	Firm		Т	elephone	e No.		Teleph	one No.	ick, NJ ( 29-7444	T	License N	o. )388			
Start Date (10) 6-6-2018		Scheduled -		etion Da			Or	nega I	Monitor Environr	nenta	1				
Occupancy Status During Abatem  Facility Closed/Vacated Du Abatement Performed Outs	ring Entire Perio	d of Abate	ment				28	Address 80 Hu tate, Zip	yler Stre	et					
Other – Describe: 2 P	m+ 51	000				_			łackensa	ack, N	IJ 0760	6			
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>	PPG)		novati molitic				B	Min Glov	Containmer i-Enclosure vebag Proced -Exempted (	dure			dure		
Location of		N	Location ormally Solely	y			scription	n of					Aba	tement ype	
Asbestos-Containing Mater TO BE ABATED In Facility (13)		Ma	intenan odial Si (12)	ce/	Asbesto (i.e. therm	al syste				(S	nount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
BASEMENT & CRAWL	SPACE	165	140	X	THERO	nal	in	SULA	TION	_ tc	77 LI	= X			
Name of Registered Waste Haul Best Removal Inc	er			JDEP W auler ID 171	No.		ste 2 y	05	100000	linver	d Landfill va Ente		ses, l	LLC	
City, State Hackensack, NJ 076	501	1 7:				6-	sal Dale		City, State Wayı		rg, OH		38		
Completed by  Robert Veldran		Title	stima	tor		1	R. V	Peldr	an		- 1	Date 5 - 2	3-	20	18

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Date of Notification (1),			Z- 411	a secret ( IS	UNAME 9:00	and 12:1	(20)		ASBE	STO	sici	DATTA	BOL
Agencies Notified Toma North			1	BLEID OL E	Sill o	ar/Openid	(2)			LU	19	NG-	
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DEP Ameri			CH	y. State.	Zip Code					-	71	1	8
Emerg	inent e aloy (inch	uding	-1	- 6	EDIRON	Z.W.	08	ורוי	MAIVE	17 1		-	
DCA Dence	ition) lation		Na	SIM	onlast	ıl.		·	TORONON	N Killian		30	1
Name of Facility Where Abstement is	Takino Pile	Cm /91		ACILIT	YINFORM	HOI		. — —					
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					-		Sct. Sut.	si (IC-12) Tapar 8 (	Other shen	K-12)			
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County (6)			T Av.				1.3	0	of Floors		1	4 5 G	-
Name of Manager Start			1	TE VEE			Current (	B (F rice H	being dem	OVENO	1)	734	
Name of Monitoring Firm Hired by Bulk	ing Owne	(8)	A	OM No.		Name	of Abadem		001/4 10(19)	<u>L.</u>			
Street Address						A.MA	Address	ettrig in	C.				
City, State, Zip Code	<del></del>				-	188	Midland .	re					
Project Manager for Monitoring Firm						City, 6t	nd Park	B 11 27/2					1972-9
			Telep	hone No		Telepho	one No.	43 7/43	Licens	e No.			
Start Date (10) 5/22/15	Sched	Juled (	- L Completio	n Date (	11)	201-2 Name o	62-5841 OSPA M		00156		200000000000000000000000000000000000000		
Occupancy Status During Abatement (Ci	reck Only	Ones	130/18	?		Omeg	a Enviro	mental	Services	Inc			
Facility Closed/Vacated During Entitle Absternant Performed Outside of No Other - Describe:	B Period o	of Abai	ement urs			Street A 280 H	ddress Uyler Str te, Zip Co.	el					
Scope of Work (Check All That Apply)				_		Hacke	nsack, I	1 07606					
\$3 84 01 53 85 K		Reno	vation olition				Gloveber	Personal com					
Location of		S Loca Norm	ettori	1			Non-Exe	Max! (2) et	Mon-Fried by	bie Pa			_
Asbestos-Containing Material (ACM)  IO BE ABATED	Us M	ed Sa sinten	lely by	Asb	GEICH CAMbi	cription of				-		VPe VPe	ni.
In Facility (13)	ÇW	(12)	Staff?	0.	turieci	ysiems in ng. VAT. c scellango:	mulelion,	1 (6	indunt Specify ar LF)	Removal	Repair	Encapsarate	Endosure
BED WOULS IST FLOOR	Yes	No	N/A	<u></u>				1_		1	4	事	8
121 1202	+-	-	-		VAT			30	OSF	1			-
								+	action recommend				
Name of Registered Waste Hauter								+		+-			
Newark Carting Inc.		H	inder to	Meter No.	Cubic Ya			1 Rigister					-
City, State Newark, NJ 07105		10	4509		Disposal	Data .		Cantra	Sanitar	y Lan	Hill		
Completed by	Tille				5/20/10	ON	Pen	rgyl, PA	08702				
Joseph Vocaturo	Vice i	Presid	dent		Sign	Atura L	/		Det		7	-	-
		-			200	AI W	Ornte	.04	1	5/00	HA		- 1

Mull!			*	OTIFICAT (Pyrsii	NON OF AS	Vew Terson BESTOS C 3:00.ap	ABATT	EMENT		DE	G			<u> </u>
Date of Notification (1) 05-21-2018				43	ne of Buildin	COLUMN TO SERVICE					12 435	2 0	0.00	100
1				Os	ter Berger	nfield P	roperato	or (2)			WAY	2	1 20	118
	Notification	n		Stree	et Address	- Intold   I	- oper ti	es LLC						
EPA X II	Initial				Sylvan A	Ave				ASI	BEST	os o	ONT	ROI
DOI A	Amended				State, Zip C						LIC	DENS	SING	
	Amendmen Emergency	t#	ı.	- Eng	glewood C	Cliffs N.	1 076	30						104000
- Ju	ustification)	)	aing	Name	e of Contact	t	010	JZ						
LI DCA	Cancellation	n			Eden Kor					elephone				
Name of Facility Where Abateme	ant is Takin	- DI		FA	CILITY INF		ON			201-567	7-007	0		
Former Hudson United Ba	ank / Slace	ng Plac	e (3)					Type of Fac	ility (4)			/ 12 7 10 1		
Street Address		epy s	iviatti	ess Sto	ore			Effects						
509 South Washington Av	//2							Subcha	pter 8 (Of	ther than	K-12)			
City (5)									.e. private	& comm	nercial I	buildir	nas. h	ome
Bergenfield							-	etc.) Square Feet		of Floors				
County (6)								8,000	1 1	or Floors			g. Age	9
Bergen				County	y Code (7)			Current Use	F 17	eina dom	oliobad	50-	т	
Name of Monitoring Firm Hired by	/ Building C	)w=	(0)		EUSE ONLY)		-	Former Ba	ink / Ma	ttrese S	Store	)		
IRIS Environmental Labora	atoriee	wner	(8)	ASC	CM No.		Name o	of Abatement	Contracto	r (9)	21016			
Street Address							Hazm	at Diagnos	tic LLC	. (0)				
2333 US-22						5	Street A	ddress						
City, State, Zip Code								enwild Ave						
Union, NJ 07083								ite, Zip Code						
Project Manager for Monitoring Fire	m							ingdale, N	J 0740	3				
Rick Eustaquio				Telepho	one No.	T	elepho	ne No.		License	No			
			- 1	U/2 A	04 2700									
Start Date (10)		Cob - 1	1-1-	313-4	94-3762	1 8	973-92	28-3995	ĺ					
Start Date (10) 06-02-2018	1 6	11/_15	2010	mpletion	Date (11)	N	lame of	OSHA Monito	or	01181				
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Name of Facility Whore Abetertis Tu	. 5.		FA	CILITY IN	FORMAT	ION								
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County (6) Ocean			County C (STATE U	lode (/) ISE ONLY)	)			ent Use (Pri				olishe	ed)			
Name of Monitoring Firm Hired by Building	Owner (8)		ASCM	No		Name		atement Cor			-				llys-	
Whitestone Associates,Inc	Owner (0)		AGGIVI	itto.				Diagnosti			(3)					
Street Address						Street							-	i con		$\dashv$
35 Tehnology Drive South						16 G	lenw	ild Ave								
City, State, Zip Code Warren, NJ 07059								Zip Code dale, NJ	074	103						
Project Manager for Monitoring Firm		Τ.	Telephon	ne No.		Teleph					Licens	e No				-
Mr.Jeremy Hassett				6-7955		10 00		3995			0118	1				
Start Date (10)	Scheduled		pletion D	Date (11)				HA Monitor								
5-25-2018	6-20-20							Diagnostic	C LI	LU						
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire			ent			Street . 16 G		rild Ave								
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe:								Zip Code	074	100		***				
Scope of Work (Check All That Apply)						D100	ming	dale, NJ	0/4	103				12000		
≥3 sf or ≥3 if ≥160 sf or ≥260 if		enoval emoliti				×	Mi GI	ill Containme ni-Enclosure ovebag Prod on-Exempted	e cedu	re					Э	
	F-1 (2.12-2.22-2.22-2.22-2.22-2.22-2.22-2.22	ocatio	-0.00m												ment pe	.
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility	Used	itenar	y by nce/		tos Cont	systems	lateria insul	al (ACM) ation,		(S	nount		Rer			Enc
(13)		(12)				cing, VA niscellan				SF	or LF)		Removal	Repair	Encapsulate	Enclosure
D : 0 : 0	Yes	No	N/A		. ,		0 1			00	0.0=				0	
Basement Crawl Space			X			ulation					0 SF		Х			
Bathroom, Entry, Rooms			X	Linole				Mastic		13000	0 SF		X			
Roof Penetrations			X		BI	ack Ta	r			10	) SF		Х			
Pitched Roof	1		X			f Shing	les				00 SF		Х			
Name of Registered Waste Hauler		H	JDEP Wa		Cubic of Was	Yards		Name of	Regi	ster	ed Lan	dfill		25.0		
Hazmat Diagnostic LLC/Newark C	arting Inc		035440		TBD	0.6		G.R.O.	W.S	S. N	iorth /	Fai	rless	Lar	ndfill	
City, State Bloomingdale, NJ / Newal	100				TBD	sal Date		City, Stat Morrisv		PA	4					
Completed by Deni Naumovski	Title Presid	lent			S	Signature	1	7				Date 5/2	e 21/20	18		

Print Form,

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D			NO				SBESTOS ABA AC 8:60 and 5:1		D)-E	G E		<u> </u>	L
Date of Notification (1)	1 1 L	1 6	Sand of		Nam	ne of Buildin	ng Owner/Operator	(2)	++++	50.000	^		
	24 /	_1	8			utgers Ur			1805-2308	MAY 2 Chk.			
Agencies Notified	Type Notifi	icatior	1		Stre	et Address				describeration arranged	DV7F6mo-co	No contractions	
⊠ EPA	☐ Initial				33	Knights	bridge Road		ASE	ESTOS LICEI	AOD	TRO	L&
☑ DOLWD ☑ DHSS	Amend	737	ц			State, Zip			L	LIUCI	10114	<u> </u>	
□ DCA	Amenda Emerge			_	Pi	scataway	, NJ 08854						
(NJAC 5:23-8)	justifica	tion)	riciuali	ig	-	e of Conta			Telephone I	Mumbar			
,	Cancell	Control Company			The second	an Stanto	5058						
					_		- 25		848-445	-2419			
Name of Facility Where A	hatament is	Tokin	a Dias	- (2)	FA	CILITY	NFORMATION						
Facilities Maintena				e (3)				Type of Facility	5 5				
Street Address	ce bullaing	g #35	21					School (K-12					
								Subchapter 8	(Other than I	K-12) nmercial I	nuildir	nae	
590 Taylor Road								homes, etc.)	ivate and con	irrierdari	Junun	igs,	
City (5)								Square Feet	# of Floors	1	3ldg.	Age	
Piscataway								7000	1		50		
County (6)					Cou	nty Code (	7)(STATE USE ONLY)	Current Use (Pri	or if being der	nolished)			
Middlesex								Vacant					
Name of Monitoring Firm	Hired by Bui	lding	Owner	(8)	ASCN	No.	Name of Abateme	ent Contractor (9)					
Criterion Laborator	ies			200				d Mold Service	s Corn				
Street Address							Street Address	a Mora Service	s, corp.				
400 Street Road							OVERALISE VIEW OF THE PARTY.	ouloused					
City, State, Zip Code							3859 Sylon B						
Bensalem, PA 1902	n						City, State, Zip Co						
Project Manager for Monit				17.1			Hainesport, N	NJ 08036					
Mike Panepresso	toring Firm			1000	phone		Telephone No.		License No	).			
						I-1300	609-702-0400		00862				
Start Date (10)6 /8/						ate (11) 18	Name of OSHA M						
						10	EMSL Analyt	ical, Inc.					
Occupancy Status During							Street Address						
<ul> <li>☑ Facility Closed/Vacated</li> <li>☐ Abatement Performed</li> </ul>	a During Ent	ire Pe	riod of	Abate	ment		200 U.S. Rou	te 130 North					
Time of Abatement:	AM-	iormai Iq	racilit	y Hou	s - Des	scribe	City, State, Zip Co	ode					
						Alvi	Cinnaminson	, NJ 08077					
Scope of Work (Check all	that apply)						M Euil Cont	alamant with N					
☐ ≥3 sf or ≥3 lf				novati			☐ Mini-Encl	ainment with Nega	ative Pressure				
≥160 sf or ≥260 lf			☐ De	molitic	n		Glovebag	Procedure					
								npted (*) and Non	-Friable Proce	edure			
Location of	, f		(C) (C)	Locat Vorma						A	patem	ent T	уре
Asbestos-Containing N		A)		d Sole		Ashe	Description of stos Containing Mat			R	R	m	ш
TO BE ABAT	<u>red</u>	,		intena		(i.e.	, thermal systems i	nsulation.	Amount (Specify	Removal	Repair	ıcaı	1Clo
IN Facility (13)	/		Cus	todial : (12)	stan?		surfacing, VAT,	or	SF or LF)	val	=	Encapsulate	Enclosure
(13)			Yes	No	N/A	1	other miscellaned	ous)				late	O
Kitchen 103A					N/A	Floor Ti	le & Mastic		130 SF				
Exterior						Transite			3500 SF				
								-	3300 31		_		
J.												Ш	
Name of Registered Waste	Haulor				IDED !	0//	011111						
Champion	nauler			1.0000	JDEP \ auler I[		Cubic Yards of Waste	Name of Registe					
					32707		5	Grand Cent	ral				
City, State							Disposal Date	City, State					
Hainesport, NJ							6/19/18	Penn Argyle	, PA				
Completed By (Print or Typ	oe)	Title		-17	eld = 1-0		Signáture A		30	Date			
Kimberly A. Trumbet	ti	Of	ffice C	oord	inator	e	XIV.			5-2	5-	10	
							KIN I		1	1 1	. 1	1.3	

PAGE 1 OF 2	5014	Ì	(Pı	rsuapt	ate of Nev	ESTOS 8:60 an	ABATE	9)				LAY	20	1 2	018		
Date of Notification (1) 04-12-18	,			Name o PSEG	f Building	Owner/0	Operator	(2)	To a said	L L.	71	IIAI			010	- considerates	
	Гуре Notification		100	Street A	ddress Hadley F	Rd.					ASB		OS C			L &	
EPA DEP	Initial Amended	.1	-	City, Sta	ate, Zip Co Plainfiel	de			les		Pendistratus metae	ALL PROPERTY.	outperson res	NOA JONE			NOTE OF THE PERSON NAMED IN
X DOL	Amendment # Emergency (in				f Contact	u NJ				$\neg$	Teleph	one N	lumbe	er			
DOH DCA	justification) Cancellation				on Prest	300					908-2						
Name of Facility Where Ab	atement is Taking	Place (3	3)	FACI	LITY INFO	DRMATI	ON	Туре	of Facility	(4)				-			
PSE&G Linden Switch	h 138 kv								School (K-								
Street Address 4013 Tremley Road									Subchapte Other (i.e.					uild	ings,	home	es,
City (5)								6	etc.) re Feet	Т	# of Flo	ors		Ble	dg. A	ge	
Linden				<u> </u>				N/A			N/A				Ά		
County (6) Union					Code (7) USE ONLY)				nt Use (Pi rol Hou:		being o	demol	ished	)			
Name of Monitoring Firm F	lired by Building O	wner (8)		ASCN N/A	/ No.		THE PROPERTY AND		tement Co			es Ir	nc.				
Street Address				1			Street	Addres	ss			, 11	10.				
N/A City, State, Zip Code							11.10		ck Road	l							
N/A									Y 1198	0							
Project Manager for Monito N/A	oring Firm			Telepho N/A	ne No.		2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	none No 924-8			11 10 10 10 10 10 10 10 10 10 10 10 10 1	cense 1136					
Start Date (10) 04-23-18		Schedul 09-24-		pletion	Date (11)				IA Monitor		Service	es In	C.				
Occupancy Status During	Abatement (Check	Only Or	ne)					Addres	s ck Road	1							
Facility Closed/Vacate Abatement Performed Other – Describe: Ele	Outside of Norma	al Facility			,	_	City, S	tate, Zi	p Code NY 1198					- E-1700.			
Scope of Work (Check All	That Apply)	- Sanatan Cario					Тарі	TOTAL T						110000		Virginia.	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	Renovat Demoliti				×	Min Glo	Containn i-Enclosu vebag Pro	re ocedu	ıre					e	
			Location											,	Abate Ty		
Location of Asbestos-Containing M		Use	Normall d Solel	y by	Asbest		scription taining N		(ACM)		Amou	unt			.,,		
TO BE ABAT	ED		intenar todial S		(i.e.	thermal	systems cing, VA	s insula	tion,		(Spec			Remova	Repair	ncap	Enclosure
(13)			(12)	Т			niscellar							oval	air	Encapsulate	sure
Control Ho		Yes	No	N/A			Roof				5000	ee.		-			
Control Ho		-		X		Tran	site pa	nole			416		x	-			
Control Ho				X			pping t				360 \$		x	-			
Control Ho				X			Caulk	ape			170		x	-			
Name of Registered Waste			N-	JDEP W	/aste		Yards		Name of	f Rea							
Waste Management				auler ID 7273	No.	of Was	ste		Fairles								
City, State Elizabeth, NJ 07201						Dispos TBD	sal Date		City, Sta Morris		PA 19	9067					
Completed by		Title				18	Highature	)	_			1	Date				
Raymond Tutiven		Supe	rvisor			-	(44)	now	1/2	th	w		04-1	2-1	8		

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Pr	In	÷.	Forr	n

PAGE 2 OF 2	016		NOTIF (P	ICATION	ate of Ne N OF ASB to NJAO	ESTOS	ABATE	MENT 0)			E	C	E		// [[	
Date of Notification (1) 04-12-18	*			Name o	of Building	Owner/0	Operator	r (2)			N	IAY	2 9	20	10	The state of the s
Agencies Notified	Type Notification			Street A	Address Hadley F	24				ied bin					10	
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× DOL	Amendment Emergency				Plainfie					The Add Name of Street, Street	der autori	LIC	ENS	ING.	- Marie and	tereno to La
DOH DCA	justification)  Cancellation				of Contact	on				(Ly.) 2020	ephone 8-202					
	_				ILITY INFO		ON			1 30	0-202	03	04	-		
Name of Facility Where A PSE&G Linden Sw	Abatement is Takin itch 138 kv	g Place (	3)					Туре	of Facility	(4)						
Street Address 4013 Tremley Road								×	School (K- Subchapte Other (i.e. )	r 8 (Oth	er than & comn	K-12 nerci	2) al buil	dings	, hom	es,
City (5) Linden									etc.) re Feet	# o	f Floors	3	1100	Bldg. A	Age	
County (6) Union					Code (7) USE ONLY				ent Use (Pri trol Hous		ng den	nolish	ned)			
Name of Monitoring Firm	Hired by Building (	Owner (8	)	ASCN N/A	M No.			of Aba	tement Cor	ntractor		Inc				
Street Address N/A				INIT		E-E-Me-e-Tiller	Street	Addres	ss	ai Sei	vices,	IIIC				
City, State, Zip Code							City, S	State, Z	ck Road ip Code							
N/A Project Manager for Mon	itorina Eirm			Tolonho	na Na				NY 11980	)						
N/A	itoning Film			Telepho N/A	ne No.			none N 924-8			Licen 0113		0.			
Start Date (10) 04-23-18		Schedul 09-24-		npletion	Date (11)				A Monitor	al Sen	vices	Inc.				
Occupancy Status During		- 52						Addres						-		
Facility Closed/Vaca Abatement Perform Other – Describe:	ed Outside of Norm	al Facility	Abatem y Hours	nent			City, S	state, Zi	p Code							
Scope of Work (Check A	II That Apply)			-			тарг	lank i	NY 11980	J						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		perment	Renova Demolit				×	Mir	I Containmoni-Enclosure vebag Produces	e cedure					6	
			Locati				100000000000000000000000000000000000000							Abate	ement	
Location Asbestos-Containing TO BE AB/ In Facili (13)	Material (ACM) ATED	Use Ma	Normalled Sole intenar todial S (12)	ly by nce/		os Conta thermal surfac		faterial s insula T, or		(8	mount specify or LF)		Removal	Repair	Encapsulate	Enclosure
0 7.1.		Yes	No	N/A											ė	
Switching	***************************************			Х			ct ban				30 LF		х			1
Control H	ouse			X		Trar	nsite pi	ipe		24	10 LF		x			
Name of Registered Was	te Hauler		l NI	JDEP W	laste	Cubic `	Varde		Name of	Doniet-	rod I -	den				
Waste Management			Н	auler ID 7273		of Was			Fairless			iailli				
City, State Elizabeth, NJ 07201			17	210			al Date		City, State	e						
Completed by Raymond Tutiven	<del></del>	Title Supe	rvisor				gnature	a	1		- 1	Dat	e -12-1	18		
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Date of Notification (1)  05 /	25 /	1	8		100000			wner/Operator ate Compani		M M	AY 2	2 9	201	8	
Agencies Notified	Type Notific	cation				et Address				led belt 400		T. (3.74)			- Speeding
⊠ EPA	☐ Initial				21	Broad Sti	reet,	Suite 400		ASBE	STOS	00	MT G	n	2.
☑ DOLWD	Amende Amenda		и			State, Zip				PODLES	Litza			126	CX.
□ DCA	☐ Emerge			a	BI	oomfield	, NJ	07003		The second second second	T-10-11- 10			211000	neeth type in
(NJAC 5:23-8)	justificat		ioidaiii	9	Nam	e of Conta	ct			Telephone	Numb	er			
	☐ Cancella	ation			W:	arren Spr	ake			973-429			205		
					FA	CILITY II	VFO	RMATION							
Name of Facility Where A	Abatement is	Takin	g Place	e (3)					Type of Facility	v (4)					
Commercial									School (K-						
Street Address									☐ Subchapter	8 (Other than	K-12)				
169 Minnisink Road	I- Power He	ouse	Build	ing					homes, etc	private and cor	mmerc	ial bu	ilding	IS,	
City (5) Totowa									Square Feet	# of Floors	S	Bl	dg. A	ge	
County (6)					Cou	nty Code (	7\/07	ATE USE ONLY)	Comment Head	V: 161 · ·					
Passaic					1000	my Code (	1)(31)	ATE USE UNLY)	Current Use (F	rior if being de	molish	ed)			
Name of Monitoring Firm	Hired by Buil	dina (	Owner	(8)	ASCM	No	INI	mo of Abetom	ent Contractor (9	N					
Bio Terra Solutions				(0)	ACCIVI	110.			NAGEMENT I						
Street Address							-	reet Address	MAGEWENT	LLC					
P.O. Box 1224								27 Outwater	Lane						
City, State, Zip Code								y, State, Zip Co							
Union, NJ							1	g, State, Zip Ct Garfield, NJ							
Project Manager for Monit	toring Firm			Tele	phone	No	-	lephone No.	07026	Linana N	_				
Rick Eustaquio	•			100000		-3762	1	73-928-4888		License No	0.				
Start Date (10)	15	Sched	luled C			ite (11)	-	me of OSHA M		1100					_
03 /15 / _	18	_(	06_ /	_ 25	5_ /	100 500	Sec.		NAGEMENT L	LC					
Occupancy Status During							Str	eet Address							$\neg$
☐ Abstament Barfacet	d During Enti	re Pe	riod of	Abate	ment		2	7 Outwater I	_ane						
Abatement Performed Time of Abatement:	Outside of No	ormal Pi	Facility	y Houi	s - Des	cribe	City	y, State, Zip Co	ode						$\neg$
			·"			.Alvi	0	Sarfield, NJ	07026						
Scope of Work (Check all	that apply)							X Wrap and	d Cut ainment with Ne	native Pressur					
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf				novati molitic				☐ Mini-Encl	osure	ē.					
				Locat				23 2	mpted ( ) and rec	I Habie 1 100	Jeduie	۸h	teme	-4 T	_
Location o				Norma				Description of			-		T		
Asbestos-Containing M TO BE ABAT		1)		intena				Containing Maternal systems i		Amount		Removal	Repair	nca	Enclosure
IN Facility			Cust	todial	Staff?	1	., aic	surfacing, VAT,	or	(Specify SF or LF)		lova	air	apsı	nso
(13)			Yes	(12) No	N1/A	1		her miscellaned			<b>'</b>	-		Encapsulate	е
Roof			Tes	No	N/A	Built-Up	Ro	ofina		3,000 Si	_				
1st Floor													븨		믜
. 11001						Pipe ins	sula	tion- Wrap a	nd Cut	250 LF					
		- 4											Ш	Ш	
Name of Registered Waste	Llauter														
				1	JDEP \ auler II		Cut	oic Yards of	Name of Regis	stered Landfill prises/G.R.O.W.S	2 Month	. 1	JEIU		
ATC/Century Waste LLC	/ All Pro Mai	nager	nent L	LC SV	V-24310	/32797/989	Α	s Needed	Fairless Landfi	II/ IESI Bethlehe	m Land	ifill	aniii/		
City, State								posal Date	City, State						
Shirley, NY/Elizabeth,	NJ /Garfiel						Т	BD	Waynesburg	, OH/Morrisvil	le, PA	/Beth	ilehe	m, P	A
Completed By (Print or Typ	oe)	Title		72-77A U ***	See See See See			Signature			Date				
Allen Monchik		Pi	roject	Mana	ager			Allen	Monchik	2	5/2	5/18	3		

### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.IAC 8:60 and 5:16)

		144	0111					60 and 5:16			AY 2	Q	201	8	
Date of Notification (1)					Name	of Building	Own	er/Operator (2	2)	M W	ALL	J	LU		-)
03 /	06 /	18				_		e Companie			Contact of the con-	- 15	u at area t		0.
Agencies Notified	Type Notificati	ion		-	Street	Address				ASDI	ETOS LILIE	Cif	1941) (542)	: Che	OL.
⊠ EPA						oad Stre	et. S	uite 400		I make the second secon		and the same	in the		
□ DOLWD	☐ Amended			H	10000100000	tate, Zip C									-
⊠ DOH	Amendmer					omfield, l		7003							
DCA	☐ Emergency		ding	ŀ		of Contact				Telephone N	lumber	y 5			-
(NJAC 5:23-8)	justification  Cancellation					ren Spra				973-429-			205		
						ILITY IN		MATION			STATE STATE OF				
Name of Facility Where A	batement is Ta	king P	lace	(3)					Type of Facility	(4)					
Commercial									School (K-1						
Street Address									☐ Subchapter	8 (Other than k	(-12)		· P		
169 Minnisink Road	- Power Hou	ise Bu	ıildir	ng					homes, etc.	orivate and com	mercia	buil	dings	5,	
City (5)									Square Feet	# of Floors		Bld	g. Ag	е	
Totowa															
County (6)					Coun	ty Code (7)	(STAT	E USE ONLY)	Current Use (P	rior if being den	nolishe	d)			
Passaic															
Name of Monitoring Firm		ng Ow	ner (8	3) <i>A</i>	ASCM I	No.			ent Contractor (9						
Bio Terra Solutions						- 3			NAGEMENT	LLC					
Street Address								et Address							
P.O. Box 1224								Outwater I							_
City, State, Zip Code Union, NJ								, State, Zip Co arfield, NJ							
Project Manager for Moni	toring Firm			Teler	ohone I	VIO.		phone No.	01020	License No	`				-
Rick Eustaquio	toring r inti				3-494-	35.000		73-928-4888		1188					
Start Date (10)	Sc	chedule	ed Co	1000	ion Dat	100000000000000000000000000000000000000	1000	ne of OSHA M							
03/15/	3000				_ / _	10 Page 10 Pag	January Company		NAGEMENT	LLC					
Occupancy Status During	Abatement (C	heck o	nly o	ne)			Stre	et Address							
☐ Facility Closed/Vacate						1220	27	7 Outwater I	Lane						
Abatement Performed Time of Abatement: _							1 5	, State, Zip Co							
						uvi	G	arfield, NJ	07026						
Scope of Work (Check al	that apply)							☐ Full Conf	tainment with Ne	egative Pressure	e				
≥3 sf or ≥3 lf				novatio				☐ Mini-Enc	losure	<b>3</b>					
≥160 sf or ≥260 lf			☑ Der	nolitio	n				g Procedure mpted (*) and N	on-Friable Prod	cedure				
			Is	Locati	on							Aba	ateme	ent T	vpe
Location	of			lormal				Description of			h				-
Asbestos-Containing				d Sole				Containing Ma		Amount		em	Repair	nca	nclo
TO BE ABA				odial S		(1.6		rmal systems urfacing, VAT		(Specify SF or LF		Removal	=	Encapsulate	Enclosure
(13)	•	-		(12)	T			ner miscellane				_		late	e
		_	Yes	No	N/A		_				_	<b>F</b> 2			
Roof		- 1				Built-U	p Ro	ofing		3,000 S	F	$\boxtimes$	Ш	Ш	
		] [												Ш	
		1													
		1													
Name of Registered Was	ste Hauler		7-1		JDEP 1		0	oic Yards of	Name of Reg	jistered Landfill			-		-
ATC/Century Waste, LLC/	All Pro Managen	nent, Ll	LC	H	auler II W-24310	D No. 1327971989	Wa	ste s Needed	Minerva Enterprises	G.R.O.W.S North Landfill	/Fairless Lar	dfillill	SI Bethi	ehem La	indfill
City, State			******					posal Date	City, State						
Shirley,NY/Elizabeth,N	J/Garfield.N.I						T	BD	Waynesburg,Ol	-l/Morrisville,PA/Be	thlehem,	PA			
Completed By (Print or T		Title					-	Signature			Date				
Allen Monchik		Pro	oject	Man	ager			Allen	Monches	6	3/6	/18			

ASB-41 JAN 13

\* Do not use this form for asbestos licensure exempted activities.

Date of Notification (1)	16		NOT	IFICA (Pu	IION rsuan	t to NJA	C 8	105 ABAT	6)	IKI	GE AY 2	******	201	8	
05 /	25 /	18						ner/Operator (							Name
			_				Sta	te Compani	es	ASBES	2702	200	NITE	0	<u></u>
Agencies Notified  EPA	Type Notifica	ation				Address				TODE	LICEN			0_	CK
☑ DOLWD	☐ Initial  ☐ Amended	ı				T10103000000000000000000000000000000000		Suite 400		r de en maria de la composition della compositio	Thurst Charles	and participal	Mentiodustre	Mining	11 Tubs 48A a
☑ DOH	Amendme		I			State, Zip C									
☐ DCA	☐ Emergend		- cluding			omfield,		07003							
(NJAC 5:23-8)	justificatio			- 9		of Contac	300			Telephone N					
	☐ Cancellat	ion			Wa	rren Spra	ike		-	973-429-7	7900 e	xt.	205		
N					FAG	CILITY IN	FOF	RMATION							
Name of Facility Where A	batement is T	aking	Place	(3)					Type of Facility	S 5					
Commercial		SOLVE CO.							School (K-1	2) 8 (Other than K	12\				
Street Address									Other (i.e., p	orivate and com		bui	lding	s,	
169 Minnisink Road	- Meese Bu	ildin	g						homes, etc.	,	TATALAN TARONA				
City (5) Totowa									Square Feet	# of Floors		Blo	g. Ag	je	
County (6)					Coun	hy Codo (7	VCTA	TE USE ONLY)	Current Hee (D	sion if hains day	t'- t	J.			
Passaic					Cour	ty Code (r	JOTA	TE USE UNLT	Current Use (P	nor ir being den	iolisne	1)			
Name of Monitoring Firm	Hired by Build	ling O	wner (	8) [/	ASCM	No.	Nai	me of Abateme	ent Contractor (9	)					
Bio Terra Solutions	December of the second			,	(1)35(37)A31(X				NAGEMENT L						
Street Address							-	eet Address				_			-
P.O. Box 1224							2	7 Outwater I	Lane						
City, State, Zip Code							City	, State, Zip Co	ode						-
Union, NJ							G	arfield, NJ	07026						
Project Manager for Monit	toring Firm			Telep	hone l	No.	Tel	ephone No.		License No					
Rick Eustaquio					3-494		9	73-928-4888		1188					
Start Date (10)						te (11)	Nar	ne of OSHA M	lonitor						
03 /26 /					_ / -	18_	Α	LL PRO MA	NAGEMENT L	.LC					
Occupancy Status During							Stre	eet Address							
□ Facility Closed/Vacate     □ Abatement Performed						ariba		7 Outwater I							
Time of Abatement: _	AM-	PN	racility 1/	PM-	- Des	AM	0.72	, State, Zip Co							
Scope of Work (Check all		-2.					G	arfield, NJ	07026						
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf	шас арріу)			novatio molitio						-					
				Locati								Aba	teme	nt Ty	/ре
Location Asbestos-Containing	2010	,		lormal d Sole	-	Achor	otor i	Description o				Z	<sub>Z</sub>	ш	ш
TO BE ABA	TED	'	Ma	intenar	ice/			Containing Ma rmal systems i		Amount (Specify		Remova	Repair	ncar	nclo
IN Facilit (13)	У		Cust	odial S (12)	itatt?			urfacing, VAT,		SF or LF)		val	7	Encapsulate	Enclosure
(13)			Yes	No	N/A		Ott	ner miscellane	ous)					ate	
Basement/Crawl Space	ce				$\boxtimes$	Pipe Ins	sulat	tion		7,000 LF	:	X		П	
1st Floor						Pipe Ins	sulat	tion		475 LF		X			
Basement/Crawl Space	ce					-		Insulation		375 LF		X		౼	
1st Floor								Insulation		50 LF		X		$\frac{\Box}{\Box}$	
Name of Registered Wast	te Hauler	7		N.	JDEP V	Vaste	Cub	oic Yards of		stered Landfill				_	_
ATC / Century Waste, LLC/A	All Pro Managm	ent, L	.LC	H	auler II -24310	No. 32797/989	Wa	ste s Needed		prises/G.R.O.W.S ill/ IESI Bethlehe			dfill/		
City, State								posal Date	City, State	,ac. scandic	= 4114				
Shirley, NY / Elizabe	eth, NJ						Т	BD .		OH/Morrieville B	A/Roshi	oh-	m DA		
Completed By (Print or Ty	rpe)	Title		-	-			Signature	maynesburg,	OH/Morrisville, P.	Date	ene	II,PA		
Allen Monchik		Pi	roject	Mana	ger				Monchik	6	5/28	5/1	8		



# State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8-60-7 AND 12:1207) CONTINUATION SHEET

				(Pursuant to NJAC 8-60-7 AND 12:120 7) CONTINUATION SHEET			ASI	BESTO	SCONTE
				169 Minnisink Rd Meese Building		Abateme	nt Type	TELEPOOL VERVISOR	70
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Faculty (13)	No: S Main	s Locat rmally Solely tenandal Staf	Used by ce/Cust	Description of Asbestos-Containing Material (ACM) (i.e. thermal systems, insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	R e m o v a I	R e p a i r	E n c a p s u	E n c l o s u r e
2nd Floor			Х	Pipe Fitting Insulation	85 LF	X			
Crawlspace			Х	Duct Insulation	500 LF	X			
1st Floor			Х	VAT	1,750 SF	X			$\vdash$
Lobby			Х	VAT	1,000 SF	X			
2nd Floor			Х	VAT	900 SF	X			
Basement			Х	VAT	200 SF	X			$\vdash$
2nd Floor			Х	VAT	575 SF	X	<del>                                     </del>		
Lst Floor			Х	VAT	800 SF	X			
1st Floor			Х	Transite Panels	300 SF	Х			
obby			Х	Textured Ceiling	1,000 SF	Х			
				1					

Completed by: (Print or type)	Title:	Project Manager	Signature:	Date:
Allen Monchik			Allen Monchik	5/25/18

### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

			NOT		TION		BES	ersey TOS ABAT :60 and 5:10			C I	E.		W_	E
Date of Notification (1)  03 /	15 /	18						ner/Operator ( te Compani		1	AY	2 9	21	018	And the second second
Agencies Notified	Type Notifica	tion			Street	Address				A C For	THE THE THE PARTY OF THE PARTY	TEDIO	et/makee	CONTRACTOR OF THE PERSON OF TH	-
⊠ EPA					2 B	road Stre	et, S	Suite 400		ASSE	ESTO( LIGE	S C	ONT ING	ROL	. &
☑ DOLWD ☑ DOH	Amended Amendme				City, S	State, Zip C	ode			Linguistic Company of the Company of the Street of the Company of	-		1. 10.	570564	NEW ROOM BOOK
□ DCA	☐ Emergend		cluding	.	Blo	omfield,	NJ 0	7003							
(NJAC 5:23-8)	justification	on)	3.aa9		Name	of Contact				Telephone N	lumber				
	☐ Cancellati	ion			Wa	rren Spra	ke			973-429-7	7900 e	xt.	205		
					FAC	CILITY IN	FOR	RMATION							
Name of Facility Where A	Abatement is T	aking	Place	(3)					Type of Facility	10.5					
Commercial									School (K-12		40)				
Street Address		20000							☐ Subchapter 8 ☐ Other (i.e., pr			bui	lding	5,	
169 Minnisink Road	i- Meese Bu	ildin	g						homes, etc.)						
City (5) Totowa									Square Feet	# of Floors		Bld	g. Ag	e	
County (6)					10		/071	TE 1/05 01814				_			
Passaic					Coun	ty Code (7)	(SIA	TE USE ONLY)	Current Use (Pri	or if being dem	nolished	1)			
Name of Monitoring Firm	Hirad by Build	lina C	hamor (	0)	ASCM	Ma	Non	no of Abotom	-101(0)						
Bio Terra Solutions		iiig C	wilei (	0)	40CIVI	NO.			ent Contractor (9) NAGEMENT L						
Street Address				1				et Address	NAGEWENT	LC		_			
P.O. Box 1224							100	7 Outwater I	ane						
City, State, Zip Code								, State, Zip Co				_	-		-
Union, NJ							183	arfield, NJ							
Project Manager for Moni	toring Firm			Tele	ohone l	No.		ephone No.		License No.					_
Rick Eustaquio				97	3-494	-3762	9	73-928-4888		1188					
Start Date (10)		ched	uled C	omplet	ion Dat	te (11)	Nan	ne of OSHA M	lonitor	110					
03 /26 /	18	_0	5_/	25	_ / _	18	Α	LL PRO MA	NAGEMENT L	LC					
Occupancy Status During	Abatement (C	Check	only o	ne)			Stre	et Address							
☐ Facility Closed/Vacate						S200	2	7 Outwater I	Lane						- 1
Abatement Performed Time of Abatement: _	Outside of No	rmal	Facility	Hours	s - Des	cribe	City	, State, Zip Co	ode						
			" <u> </u>	_FIVI-		Aivi	G	arfield, NJ	07026						
Scope of Work (Check all	that apply)							□ F!! C4	-i	-4' D					
<ul><li>≥3 sf or ≥3 lf</li><li>≥160 sf or ≥260 lf</li></ul>				novatio molitio				Mini-Enc     Glovebag							
60 179	980			Locati								Aba	teme	nt Ty	ре
Location Asbestos-Containing I		١		iormal d Sole		Achor	stos (	Description of Containing Ma		Amerini		D D	Z	ш	Щ
TO BE ABA	TED	'		intena				mal systems		Amount (Specify		Removal	Repair	Encapsulate	Enclosure
IN Facilit (13)	ty		Cusi	odial 9 (12)	otan?			urfacing, VAT, ner miscellane		SF or LF)		va	.	sula	sure
(10)			Yes	No	N/A	1	Ott	iei iiiisceiiaiie	ous)			1		te	2200
Basement/Crawl Spa	ce				×	Pipe Ins	sulat	tion- Wrap a	nd Cut	7,000 LF		XI			
1st Floor						Pipe Ins	sulat	tion- Wrap a	nd Cut	475 LF	0				
Basement/Crawl Spa	ce				×	Pipe Fit	ting	Insulation		375 LF		Ø			
1st Floor						Pipe Fit	ting	Insulation		50 LF	1	X			
Name of Registered Was					JDEP \			oic Yards of	Name of Regis						
ATC/Century Waste, LLC	All Pro Manag	emen	t,LLC	H	auler II W-24310	O No. /32797/989	Was	ste s Needed	Minerva Enterpris IESI Bethlehem La		th Landfi	l/Fai	rless I	.andfil	1/
City, State	7000 Westers							oosal Date	City, State						
Shirley, NY / Elizabe	eth, NJ						Т	BD	Waynesburg,OH/M	forrisville,PA/Beth	ilehem. P	А			
Completed By (Print or Ty	ype)	Title						Signature			Date				
Allen Monchik		P	roject	Mana	ager			Allen	Monchik		3/15	5/18	3		



#### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8-60-7 AND 12:1207) CONTINUATION SHEET

				169 Minnisink Rd Meese Building		Abateme	nt Type		
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Faculty (13)	O BE ABATED In Solely by Maintenance/Cust odial Staff (12)  Yes No N/A  X P		Used by ce/Cust f (12)	Description of Asbestos-Containing Material (ACM) (i.e. thermal systems, insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	R e m o v a I	R e p a i r	E n c a p s u	E n c l o s u r e
2nd Floor	res	IVO	_	Pipe Fitting Insulation	85 LF	X		-	-
Crawlspace	or		_	Duct Insulation	500 LF	X			-
1st Floor				VAT			_	_	
Lobby			VAT	1,750 SF X 1,000 SF X					
2nd Floor	-	-		VAT	900 SF	X			-
Basement	X \ X \ X \ X \ X \ X \ X \ X \ X \ X \		VAT	X			-		
2nd Floor	$\vdash$	-		VAT	200 SF 575 SF	X			-
1st Floor	$\vdash$	$\vdash$		VAT	800 SF	X			-
1st Floor	-	$\vdash$		Transite Panels	300 SF			-	-
Lobby	$\vdash$	-	X	Textured Ceiling	1,000 SF	X			
			Â	Textured Centring	1,000 3F	X			
	F								
	+	-	-					-	<del> </del>

Completed by: (Print or type)  Allen Monchik	Project Manager	Signature: Allen Monchik	Date: 3/15/18
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Ch 1179		Ne	) PFIFIG	CATIO	NOF AS	New Jersey BESTOS ABA AC 8:60 and 5:1	TEMENT		7 E	Town of the	<u> </u>	G.		
Date of Notification (1)	25 /	18				ng Owner/Operator Burlington	(2)	L	Y 2	9	2018			
Agencies Notified	Type Notific  ☑ Initial				et Address Rancoc	as Valley Road		ASEES	TOS JOE	CON	THC	E. &		
⊠ DOLWD	Amende				State, Zip				AS DAFFIL	- har n		1 1-1 140		
☑ DOH □ DCA	Amendm  Emerger		ing	M	ount Holl	y, NJ 08060								
(NJAC 5:23-8)	justificati		ing		e of Conta			Telephone Num	her					
\$ S	☐ Cancella	tion		Ma	ark Hans	en		856-722-670			35			
		117-117-127/	me consti	F/	CILITY	NFORMATION		1 000 122 011						
Name of Facility Where A	batement is	Taking Pla	ce (3)		COLLII I	IN ORMATION	Type of Facility	(4)						
Commercial		3	(-,	4			School (K-12							
Street Address							Subchapter 8	) 3 (Other than K-12	2)					
630 Pemberton Brow	wns Mills R	Road					Other (i.e., pr homes, etc.)	ivate and comme	rcial b	uildin	gs,			
City (5)	(6)					*	Square Feet	# of Floors	В	ldg. A	ge			
Pemberton, NJ				-K 22		35 B								
County (6)				Cor	inty Code (	7)(STATE USE ONLY)	Current Use (Pri	or if being demoli	shed)					
Burlington		7				at 1								
Name of Monitoring Firm H	Hired by Build	ding Owne	r (8)	ASCM No. Name of Abatement Contractor (9)										
T&M Associates				001	00145 ALL PRO MANAGEMENT LLC									
Street Address	200 50 7					Street Address								
200 Century Parkwa	y, Suite B													
City, State, Zip Code	12				City, State, Zip Code									
Mount Laurel, NJ 08	054				Garfield, NJ 07026									
Project Manager for Monito	oring Firm		Te	lephone	No.	Telephone No.		License No.			_			
Kevin Burns			1 5	908-347	347-4396 973-928-4888 1188									
Start Date (10)		Scheduled	Comp	letion Da	n Date (11) Name of OSHA Monitor									
06 /04 / _	18	07	/_(	06_ /	18									
Occupancy Status During	Abatement (0	Check only	one)	+		Street Address					_			
□ Facility Closed/Vacated	During Entir	e Period o	f Abat	ement		27 Outwater I	ane	- Table						
Abatement Performed (	Outside of No	ormal Facil	ity Ho	urs - De	scribe	City, State, Zip Co					1011	1		
Time of Abatement:	AM	PM/	PN	Λ	_AM	Garfield, NJ	7)							
Scope of Work (Check all t	hat apply)					Carriera, No						_		
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf			enova emoli			☐ Mini-Encl			re					
7			ls Loc						1	atem	ent T	vpe		
Location o Asbestos-Containing M		Us	Norm sed So	ally lely by	A -1	Description o		#11		1				
TO BE ABAT		'   M	ainten	ance/	(i.e	stos Containing Mat ., thermal systems i	terial (ACM)	Amount (Specify	Removal	Repair	Encapsulate	Enclosure		
IN Facility		Cu	stodia (12	Staff?		surfacing, VAT,	or	SF or LF)	oval	=	nsd	Sur		
(13)		Yes		1	1	other miscellaned	ous)			100	late	œ		
Roof				\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Black Aspl	haltic Roofing Flashing/ \$	Sealant Compound	1,000 SF						
g , N	U st			10					12	_				
			1		1 .		2.0					Ш		
+-						52			П	П	П	П		
Name of Registered Waste ATC/ Century Waste,				NJDEP Hauler I	D No.	Cubic Yards of Waste	Name of Registe Minerva Enterp	ered Landfill orises/ G.R.O.W.:	1-		ndfil	=		
City, State				SW-243	10/32797	As Needed	Fairless Landfi		o sane ne SZSP					
Shirley, NY/ Elizabeti	n N I					Disposal Date	City, State							
P. J. Children Physics and Children Communication and Communication of Communication and Communication						TBD	Waynesbur	g, OH / Morrisv	ille, F	PA				
Completed By (Print or Typ	e)	Title				Signature		Da	te					
Allen Monchik		Projec	t Mar	nager		1000	Marchile	-	OEIA	0				

Date of Notification (1)	25 /		F		ATION rsuar Name	to NJA	BES AC 8:	TOS ABAT :60 and 5:1 ner/Operator (	6)		B E	20	7 <u>E</u> 18	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
Agencies Notified  EPA  DOLWD	Type Notifica	ation			Street	Address		lley Road			STOS CO LICENS		OL	R.
☑ DOH ☐ DCA	Amended Amendme	ent #_ cy (in	cluding		Мо	State, Zip (	, NJ	08060	7	· · · · · · · · · · · · · · · · · · ·	•			+
(NJAC 5:23-8)	justification Cancellate	T				of Contact k Hanse			Ÿ.	Telephone N 856-722-				
		-11			FA	CILITY IN	IFOF	RMATION						$\neg$
Name of Facility Where A Commercial Street Address 600 Pemberton Bro			Place	(3)					Type of Facility ☐ School (K-1 ☐ Subchapter ☒ Other (i.e., phomes, etc.	2) 8 (Other than K private and com	(-12) imercial b	uilding	ıs,	
City (5)									Square Feet	# of Floors	В	dg. A	ge	
Pemberton, NJ County (6) Burlington				69	Cour	ity Code (7	')(STA	TE USE ONLY)	Current Use (P	rior if being den	nolished)			$\neg$
Name of Monitoring Firm T&M Associates	Hired by Build	ding C	wner (	8)	ASCM 0014		. A	LL PRO MA	ent Contractor (9 NAGEMENT L	i in the second of the second				
City, State, Zip Code	200 Century Parkway, Suite B y, State, Zip Code							Street Address 27 Outwater Lane City, State, Zip Code						
	Mount Laurel, NJ 08054 roject Manager for Monitoring Firm							Garfield, NJ 07026 one No. Telephone No. License No.						
Start Date (10)				omple	tion Da	47-4396     973-928-4888     1188       Date (11)     Name of OSHA Monitor       / 18     ALL PRO MANAGEMENT LLC								
Occupancy Status During    Facility Closed/Vacate   Abatement Performed   Time of Abatement:	d During Entir Outside of No	e Per ormal	iod of	Abate Hou	rs - Des		2	eet Address 7 Outwater , State, Zip Co						
Scope of Work (Check all  ≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf			□ Re	novat	ion	7101	G	☐ Mini-End	tainment with Ne			ld.	(H)	
Location Asbestos-Containing N TO BE ABA IN Facilit (13)	Material (ACM TED	)	Use Ma	intena	ely by ance/ Staff?		., the	Description of Containing Ma rmal systems urfacing, VAT ner miscellane	iterial (ACM) insulation, , or	Amount (Specify SF or LF)	Remov	Repair	ent Encapsulate	ype Enclosure
Pagamant	No	N/A	Disco Inc		9 Fiat.		70015	57						
Basement			Tank In			g Insulation	720 LF 75 SF							
Basement							Suia	aon	,	250 SF		H		
1st Floor, Left Bathroo	om								80 SF		H			
ATC/ Century Waste, LLC						NJDEP Waste Hauler ID No. SW-24310/32797 As Needed Sw-24310/32797 As Needed Name of Registered Landfill Minerva Enterprises/ G.R.O.W.S. North Fairless Landfill				rth L	andfi	11/		
City, State Shirley, NY/ Elizabe	th, NJ						Disp	oosal Date BD	City, State Waynesb	urg, OH / Mor	risville.	PA		
Completed By (Print or Ty Allen Monchik		Title	roject	Man	ager		1	Signature	Monchik	<del></del>	Date 5/25/			

## State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8-60-7 AND 12:1207) CONTINUATION SHEET



				600 Pemberton Browns Mills Road		Abateme	nt Type		LIC
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Faculty (13)	BE ABATED In Solely by		Used by ce/Cust f (12)	Description of Asbestos-Containing Material (ACM) (i.e. thermal systems, insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	R e m o v a	R e p a i	E n c a p s u	E n c l o s u r e
	Yes	No	N/A		2.0				
1st Floor- Rear Bathroom			Х	VAT	95 SF	Х			
1st Floor- Left Bathroom			х	Cementitious Flooring and Base Trim Cementitious Flooring and	130 SF	X .			-
2nd Floor- Left Bathroom			х	Base Trim	130 SF	Х			
2nd Floor- Left Bathroom			х	VAT	70 SF	х			
Exterior		+1	Х	Caulking	550 LF	X			
Throughout			Х	Window Glazing Putty	1,840 SF	Х			
Roof			X	Cementitious Roof Shingles	2,950 SF	Х			
							-		
						-			
		-				-			
						-			

Completed by: (Print or type) Allen Monchik	Title:	Project Manager	Signature:	Date:

										F	0	F	П	П	P
Ch 1180			NOT	THE	AT O	nt-to NJ	BE:	STOS ABAT 3:60 and 5:1	6)		G	<u>同</u>		OUTTO MAN	
Date of Notification (1)					Nam	e of Buildin	ig Ov	wner/Operator (	(2)		MAY	Ĺ	9 2	UIO	
05 /	25 /	18			Wa	alters Gro	oup								Laman C.
Agencies Notified	Type Notific	ation			Stree	t Address				ASE	EST				L &
⊠ EPA		_			50	0 Barneg	at B	oulevard N,	Building 100	Lawrence and the same of the s	LI(	CEN	SINC	) Mariement	MIDAL MIN
☑ DOH	☐ Amended Amendm				City,	State, Zip	Code	)	1						
DCA.	☐ Emergen		cluding		Ва	rnegat, N	J 08	3005							
(NJAC 5:23-8)	justificati	ion)	oraani	9	Name	e of Contac	ct			Telephone I	Numbe	er			
	☐ Cancella	tion			Jo	e Steinhe	eiser	•		609-607-	9500				
	80				FA	CILITY IN	VFO	RMATION							
Name of Facility Where Al	batement is 7	Taking	Place	(3)					Type of Facility	(4)					
Commercial									School (K-12						
Street Address		18							☐ Subchapter (i.e., p			ial hı	ilding	ie.	
6303 Browning Road	d								homes, etc.)		interc	iai bu	muniç	ιο,	
City (5)						6	-		Square Feet	# of Floors		Bl	dg. A	ge	- 3
Pennsauken		09 85								-					
County (6)					Cou	nty Code (7	7)(STA	ATE USE ONLY)	Current Use (Pr	ior if being der	nolish	ed)			
Camden						***									
Name of Monitoring Firm H	Hired by Build	ding O	wner (	(8)	ASCM	No.	Na	me of Abateme	ent Contractor (9)						
Bio Terra Solutions							1	ALL PRO MA	NAGEMENT L	LC					
Street Address							Str	eet Address							
P.O. Box 1224							2	7 Outwater	Lane				1		
City, State, Zip Code		200			57.		Cit	y, State, Zip Co	ode		ACC. 17				1000
Union, NJ	31					Garfield, NJ 07026									
Project Manager for Monito	oring Firm			Te	ephone	ephone No. Telephone No. License No.									
Rick Eustaquio				1	73-494	73-494-3762 973-928-4888 1188									
Start Date (10)					etion Date (11) Name of OSHA Monitor										
06 /04 /	18	_ 0	7_ /	0	6_/	18	A	ALL PRO MA	NAGEMENT L	LC					
Occupancy Status During	Abatement (0	Check	only o										-	-	
□ Facility Closed/Vacated							27 Outwater Lane								
Abatement Performed	Outside of No	ormal I	Facility	y Hot	ırs - Des		City	y, State, Zip Co	de					2/	_
Time of Abatement:	AM	PM	1/	_PN	I	AM.		Sarfield, NJ							
Scope of Work (Check all t	that apply)							*							
☐ ≥3 sf or ≥3 lf			П п-		47			☑ Full Cont	ainment with Neg	Negative Pressure					
≥3 si oi ≥3 ii     ≥160 sf or ≥260 if			☐ Re 図 De				<ul> <li>☐ Mini-Enclosure</li> <li>☒ Glovebag Procedure</li> </ul>								
RANGER BOTTON III					1885.02 11				mpted (*) and Nor	n-Friable Proc	edure				
		-		Loca				9	60 6			Aba	ateme	ent Ty	уре
Location of Asbestos-Containing M		n			lely by	Asha	etne	Description of Containing Mat		Amount	ĺ	Re	Re	Щ	щ
TO BE ABAT	TED	'			ance/			emal systems i		(Specify		Removal	Repair	Encapsulate	Enclosure
IN Facility	/		Cust	todia (12	Staff?			surfacing, VAT,		SF or LF)		val	7	Sul	sure
(13)		f	Yes	No		1	oti	her miscellaned	ous)					ate	
Room 1		-			Pine Inc	ellis	tion- Elbows	/Fittings	15 Fitting						
1.4	m 1 🗆									W12 124 0					
	om 2- Chapel						-	tion- Elbows		18 Fitting			Ш		
Room 3							sula	tion- Elbows	/Fittings	20 Fitting	s	$\boxtimes$			
Room 3			VAT/Ma	stic			150 SF		$\boxtimes$						
Name of Registered Waste		NJDEP		1000000	oic Yards of	Name of Regis	tered Landfill								
Newark Carting						D No.	Wa:	ste s Needed	IESI Bethle	hem Landfi	H				
City, State		02383			posal Date	City, State						-			
Newark, NJ					0.000	BD	Bethlehem	, PA							
Completed By (Print or Type) Title								Signature	voin viitovaini T. A.S. T. M.	• ver control	Date				_
Allen Monchik	: 8 <b>5</b>		Mar	nager				Monchik		120000000		_			
			,					XYEEEN	monence		5/2	5/1	B		

#### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8-60-7 AND 12:1207) CONTINUATION SHEET

DEGELVED MAY 2 9 2018

	_			7) CONTINUATION SHEET				ASPI	20108	LONTROL
				6303 Browning Road		Abateme	nt Type	al section to	LCE	uing
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Faculty (13)	No Main	s Locat rmally Solely itenand al Staf	Used by ce/Cust f (12)	Description of Asbestos-Containing Material (ACM) (i.e. thermal systems, insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	R e m o v a	R e p a i	E n c a p s u	E n c l o s u r e	
Room 7	Yes	No	N/A						92	
		-	Х	Pipe Insulation Elbows/Fittings	12 Fittings	X				]
Room 7	_		X	VAT/Mastic	150 SF	X				
Patio			Х	Exterior Stucco Paneling	200 SF	X				]
Patio			х	Exterior Caulk assoc. with Stucco Paneling	200 SF	Х				
Kitchen			Х	Pipe Insulation Elbows/Fittings	25 Fittings	Х			-	
Room 4			Х	Pipe Insulation Elbows/Fittings	20 Fittings	Х				1
1st Floor- Hallway			Х	Pipe Insulation Elbows/Fittings	20 Fittings	X			-	
Room 8- Restroom			Х	Glue Dots Assoc. with Mirrors	20 SF	Х				
Room 15- Shower Room			Х	Caulk Assoc. with Tub/Shower	75 LF	X			-	
Boiler Room			Х	Pipe Insulation Elbows/Fittings	10 Fittings	Х				201 25
Boiler Room			Х	Fire Door	15 SF- 1 Door	X				15.77
Boiler Room			Х	Internal Boiler Insulation	25 SF	X			-	9 9
Exterior				Stucco Paneling	3,000 SF	X	_		-	
Exterior				Caulk Assoc. with Stucco Paneling	1,000 LF	X			,	9
Exterior			Х	Caulk Assoc. with Vent Cover	75 LF	Х				
Exterior			Х	Roofing Materials	4,500 SF	X				
Exterior (Main Entrance Overhang)			X	Plaster Ceiling assoc. with Soffit	250 SF	Х				
	24					-				\$* a
2 20 18									1 +	

Completed by: (Print or type)	Title:	Project Manager	Signature:	Date:
Allen Monchik			Allen Monchik	

						-	per						-	-	Pr	int E	orm
	5001	9	NOT	IFICATIO	t to NJAC	8:60 an	ABATE d 12.TZ	95	DOD		E	C		V		n n	
Date of Notification (1) 05/25/18				Name	of Building	Owner/0	Operator	(2)			M	AY &	2 9	20	18	1	到
Agencies Notified	Type Notification			-	eye Par	tners L	LP	-								-	
<u> </u>		ľ			Address Maurer I	3d			ľ	-	ASBE	ESTOS	3 CO	NTF	ROL	e e	+
X EPA X DEP	Initial Amended				ate, Zip C					TARKE POTTON		HOP			eurolysia:	grandett- i	
X DEP X DOL	Amendmen				Amboy												
X DOH X DCA	Emergency justification		g	Name o	of Contact					Tele	phone	Numbe	er	-			-
X DCA	Cancellation			Travi	s Bains					1 .	1-446						
Name of Facility Where A	Abatement is Takir	na Place /	(3)	FAC	ILITY INF	ORMATI	ION	T =									1
Buckeye Partners L		ig i lace (	(0)					Тур	e of Facility (4)								
Street Address						-		H	School (K-12 Subchapter 8	) (Othe	r than l	(-12)					
380 Maurer Rd								X	Other (i.e. pri	vate &	comme	ercial b	uildir	igs, l	nome	es,	
City (5) Perth Amboy								Squi 800	etc.) are Feet	# of	Floors		Bld 0	g. Ag	je		
County (6)				County	Code (7)				ent Use (Prior	"	a dema	lichad					-
Middlesex				(STATE	USE ONLY	)			ansfer Pipes		ig demo	JIISHEU,					
Name of Monitoring Firm	Hired by Building	Owner (8	()	ASCI	M No.		Name		atement Contr		(9)		-			_	1
	*						Adva	ance	d Specialty	Cont	ractor	S					
Street Address							Street 2400		ess in Street Ex	tensi	on Su	ite 10					
City, State, Zip Code							City, S	tate, 2	Zip Code								1
<u> </u>				Sayreville, NJ 08872 Telephone No. Telephone No. License No.													
Project Manager for Moni	toring Firm			Telepho	ne No.		Teleph 732-		No. 0100		License 0075						
Start Date (10)				ompletion	Date (11)				HA Monitor							-	1
06/11/18 Occupancy Status During	Ab (Ot	06/19/							vironmental								
		3590	60				Street 2		100 g 100								
Facility Closed/Vaca Abatement Performe Other – Describe: A	ed Outside of Norn	nal Facility	v Hou	ement rs		_	City, St	tate, 2	Zip Code 08724								
Scope of Work (Check All	That Apply)						DITCH	, 143	00724								-
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	gentreens	Renov				X	Mi	Ill Containmen ni-Enclosure ovebag Proce	dure							
		le le	s Loca	tion	Ī			1 140	on-Exempted (	) and	NON-Fr	Table P		oater	nent		
Location	of	1	Norma	ally		Doc	scription	of.						Тур			
Asbestos-Containing I TO BE ABA			ed Sol	lely by ance/	Asbes	tos Conta	aining M	ateria	I (ACM)		nount				п		
In Facilit		Cus		Staff?	(i.e.	thermal surface	systems ing, VA7		ation,		ecify or LF)	Kelliova		Re	Encapsulate	Enclosure	
(13)			(12)	, <del></del>		other m	niscellan	eous)			,	OVA		Repair	sula	nusc	
	-	Yes	No	N/A											te	(D	
Transfer F	Pipe	х				Pipe	Insulat	tion		800	) LF	x	1				
				-							-	-	-	+			
Nome of Pariety 1111	- 111												1				
Name of Registered Wast Freehold Cartage	e riauier			NJDEP W Hauler ID 15939		of Was			Name of Re Fairless I	ATTRACTO OVER 1		1611					
City, State				10000		Disposi	al Date		City, State								
Freehold NJ						06/19		1	Morrisvill	e. PA							
Completed by		Title	THE PARK OF				gnature	11	111			Date					
Dan Baptista		Safe	ty Ag	gent			#	Th	WIII			05/25	5/18				
ASB-41 (R-06-08)							*Do not	use t	this form for as	bestos	s licens	ure ex	empt	ed a	ctiviti	es.	E .

Ch 000	1758	57_	NOTIF	FICATION DE A	J.A.C. 7:26-2.		The second	n.E	G	E 1	VE	
Date of Notification (1) 05/25/2018		<b>2</b> 0			Name of Build	ding Owner/	Operator (2)	5				
03/23/2016					The Chemour	re Company				0 0	0040	
Agencies Notified		Notification	Type		Street Addres			1 1	MAY	29	2018	
(X) EPA		(X) Initial N			1007 Market		1					-0.0
() DEP		( ) Amende		tion	City, State, Zi						The second second	
(X) DOL		( ) Cancelle			Oity, Otale, 21	D Code	Į.	AS	BESTO	S CON	S JORTH	3
(X) DOH					Wilmington, D	DE 19899	The state of the s			ENSIN		3.00
()DCA					Name of Cont		ione	Tel. N	lumber	Managemball to the		
					Jim Lacey			-	40-2394	1		
				FACILITY IN	FORMATION							
Name of Facility Where Aba	atement is T	aking Place (	3)		Type of Facili	ty (4)						
					( ) School (K-							
Chemours Chamber Works	Facility				( ) Subchapte							
Street Address Canal Rd.					(X) Other (i.e.	private & co	ommercial bl	dgs., hor	nes, etc			
Cariai Ru.					Sq. Feet 4,50	0 # of Elec	nm 2					
City (5)	County (6)		County C	Codo (7)	3q. Feet 4,50	0 #01 F100	JIS3					
Sity (S)	County (o)		(State Us		Bldg. Age 8	7						
Deepwater	Salem		Totale of	oc omy	Current Use (		demolished	) Chemi	cal Plan	t		
Name of Monitoring Firm H		Owner (8)	ASCM N	lo.			Name of C					
		3111131 137	1.00				I Vallic of O	ontractor	10)			
Harvard Environmental, Inc							Brandenbu	ra Indust	trial Sen	vice Cor	npany	
Street Address			-		Street Address	s		9			,	
760 Pulaski Highway					2217 Spillman	n Dr						
City, State, Zip Code					City State, Zip	Code						
Bear, DE 19701					Bethlehem Pe		18015					
Project Manager for Monito	ring Firm	Telephone I			Telephone Nu				se Numb	per		
JT Morrison		302-326-23	33		610-691-1800			00721				
Schodulad Start Data (10)		Cabadulad	0	Deta (44)	Name of OOU							
Scheduled Start Date (10)	1	Scheduled (	Completion	Date (11)	Name of OSH	A Monitor						
06/11/2018		07/27/2018			Brandenburg I	Industrial Se	anvice Compa	nv				
Occupancy Status During A	batement ((		e)		Street Address		TVICE COMP	arry				
(x) Facility Closed/Vacated					Officer Address	2						
( ) Abatement Performed O	utside of No	rmal Facility	Hours -		2217 Spillman	Drive						
Standard Work Week: Mon-				luding Major	City, State, Zir	Code						
Holidays						0:1						
Describe_ Demolition	2011111											
(x ) Scheduled Demo Start (		40			Bethlehem, PA	A 18015						
Scheduled Demo Comp Source of Work (Check all t		/18										
(x) Demolition () Renov												
(x) Large Proj. (>160 SF or		M) ( ) SM Pr	roi (>25<1)	60 SE or >10 <2	SOLE ACM)	( ) Minor Pr	oj. (<25 SF o	r - 10 I E	ACM)			
(x) Full Containment with N	Negative Pre	ssure (x)	Mini-Encl	losure (x)	Glovebag Proced		0j. ( 20 01 0	1 -10 LI	ACIVI)			
Location of Asbestos-	Is Loca	tion Normally	Used	Description of			Specify SF o	r LF)	Abate	ment Ty	/pe	
Containing Material (ACM) i		by Maint./Cus		thermal system				/	- 10010			
Facility (13)	Staff?	500 TO 100	surfacing, VAT	, or other	1			100000000				
	YES	NO	NA	miscell.)			MINES CO.		Rem.	Rep.	Encap	Enclose
Bldg 656 – 1st Floor			X	VAT & Mastic		4,025 SF			X			
Bldg 656 – 1st Floor		-	X	Duct Insulation		240 SF			Х			
Bldg 656 – 1st Floor	_		X	Pipe Insulation		178 LF		Services en la	X			
Bldg 656 – 1st Floor			Х	Stair Tread Ma	stic	68 SF			Х			
Bldg 656 – 1 <sup>st</sup> Floor Bldg 656 – 2 <sup>nd</sup> Floor	_		X	Transite		104 SF			Х			
			Х	VAT & Mastic		3,600 SF			Х			
Bldg 656 – 2 <sup>nd</sup> Floor Bldg 656 – 2 <sup>nd</sup> Floor			Х	Cove Base Ma	stic	90 LF			X			
Bldg 656 – 3 <sup>rd</sup> Floor	_		X	Transite		840 SF			Х		-	
Bldg 656 – 3 <sup>rd</sup> Floor		_	X	Fire Door Transite		1 each			X		+	
Bldg 656 – Exterior		-	X	Window Caulk		204 SF			X		-	-
Bldg 656 – Exterior			X	Roof Flashing		372 LF 104 SF	<del></del>		X	-	+	+
Didg 000 Exterior				Root Flashing		104 5F			X		+	
Name of Reg. Waste Hauler	,	NJDEP Was	te Hauler I	D #	Cubic Yards of	f Macto		Nome	of Reg.	Landfill	1	
SJ Transportation Co., Inc.	-	03217	ic Haulti I	<u>υπ</u>	300 cy	vvaste			County			
City, State		30211			300 by	[	Disp. Date	Jaicill		City, Sta		
Woodstown, NJ 08098							BD			Alloway,		
Completed by (Print or Type	2)	Title			Signature /			Date				
Stephen Carne		Environment	tal Manage	er	111			05/25/	18			
					ST	M						

Mail to: NJDEP-DSHW-BRRTP 401 E. State St., PO 414 Trenton, NJ 08625-0414

Telephone 609-984-6620

C:\WORD\MYDOCS\ASBESTOS 9/18/00

Notification of Ashestos Abatement

B & G proj. #: 2018-	116	) /\	\				7 and 12:120-7)	Check	# 8993			_
Date of Notification (1)	1	I Man	of Ruit	dinh bula	er/Operator (2)	,	Provide the second account of the second and the second account of					
0 15 1/12 14 1/11 18	_	I T	eri & Ja	Quantities (4)				ME	GEI		EI	7
Agencies Notified Type No	tification	Stree	et Addres	s					9 13 1	<u>U</u>		1 111
□ EPA 🗷 In	itial											
DEP DEP	11.11.15.11.0.	City.	State, Zi	p Code					MAY 50	2018	11	#
▼ DOL	nendment		Vayne, I		70			Designation of the second states of the second stat		STEOCHDOTTS-THE		
▼ DOH		Nam	e of Cont	act		- Colombia		Telephon	E Number LICENSI	INT <b>HO</b> NG	Lä	
☐ DCA ☐ Ca	ncellation	<u> </u>	Keri & Ja	ason Vi	on			<u>-</u> '	- 4	2411/2	otionistaemius	messend
				FAC	LITY INFORM	ATIO	N					
Name of facility where abaten	nent is takin	g place	(3)					Type of Facility (	(4) I (K - 12)			
Keri & Jason Vion							**		apter 8 (Othe	er than I	<-12)	
Street Address							9.		Private/Com Homes, etc.	mercial		
									# of Floors	B	ldg. A	ge
City (5)		County	(6)	=			unty Code (7) ate use only)				1\	
Wayne		Passa	aic			(3)	ate use only)	Current Use (P Residential	for it being o	emolisi	.ea)	
Name of Monitoring Firm Hire	d by Bldg. C	Owner (8	8)	1	ASCM No.		Name of Abatement C					-
				0	n/a	_	B & G Restorati	on, Inc.				
Street Address							Street Address 105 Ryerson R	oad				
City, State, Zip Code						-	City, State, Zip Code					
							Lincoln Park, N	NJ 07035				
Project Manager for Monitoring	j Firm		Pho	ne Numb	er		Telephone Number (973)696-6869		License Nu 0037			
Scheduled Start Date (10)	S	ched. C	ompletion	Date (11	1)	-	Name of OSHA Monit B & G Restorati					
06/04/2018		06/05/	2018				Street Address					
Occupancy Status During Abai				Carrier Landson	Jakes and considerable and the second		105 Ryerson Ro	oad				
Facility closed/vacated d  Abatement performed out							City, State, Zip Code					
Describe:  Other-Describe:				-		-	Lincoln Park, N.	J 07035				
Scope of Work (check all that	apply)						1				- 13	
Demolition	X Reno	vation					Full Containment w/neg	ative pressure	Glovebag	proced	ure	
>3 sf or $>3$ If	≥160 s	of or ≥26	60 If			X	Mini-enclosure		Non-friab	le proce	dure	
Location of			ormally us						F	R	E	E
asbestos-containing material to be	staff(		iice/cusio	uiai	Description material (		asbestos-containing	Amount (Specify S	For	n p	С	n
abated in facility (13)	Yes	s	No	N/A	material (	ACIVI	V:	LF)	. 01		a p	L
Basement				SOPPHIND	nina inquia	. ti o o		05.16	- E		1	$\vdash$
		<b>-</b>   -		X	pipe insula	ווטוו		95 lf 20 sqft			뚬	計
Basement landing	_	井		×	inioleani			20 Sq1t		러片	片	卅
	_	= -				ON THE REAL PROPERTY.			- F	計片	情	厅
	-	=  -								計	盲	「
Registered Waste Hauler	11		Hauler ID	# C	ubic Yards of V	Vaste						
B & G Restoration, Inc.		195		isposal D	2 ate		City, State	Resource & Re	covery Ce	enter		
City, State Lincoln Park, NJ					5/2018		Tullytown, F	PA			Ÿ	
Completed by (Print or Type)	Title	etan/	Treasur	or	Signature		Gordana Luna		Date 05/24/2	018		

									E C		, <sub>[]</sub>	P	rint E		
Mac			FICATIO	N OF ASE	ew Jersey BESTOS AB 8:60 and 12				ID E	C		<u> </u>			
Date of Notification (1) 05/25/2018					Owner/Open ority of Ne			& New Je		WAY 2	9 7	2018	1		
Agencies Notified Type Notific  EPA Initial	ation		2 Gat		enter, 14th	ı Flo		ASBESTOS CONTROL & LIGENSING							
	ment #02			tate, Zip Cark, NJ 0				the second second second	AND THE PARTY OF T	www.ntm	Mean white	(Densemble)			
DOH Emerge	ency (including tion)	9	Name	of Contact					Telephone		r				
DCA Cancel	ation			Milarcz	•				484-239	-1902					
Name of Facility Where Abatement is	Taking Place (	(3)	FAC	ILII Y INF	ORMATION		Туре	of Facility (4	4)						
Newark Airport - Building 345 Street Address								School (K-1							
350 Scargo Earhart Drive							×	Subchapter Other (i.e. p etc.)	8 (Other than rivate & comm	K-12) nercial bi	uilding	s, hom	es,		
City (5) Newark							Squar 43,2	re Feet 00	# of Floors		Bldg. 35+	Age	Age		
County (6) Union				Code (7) USE ONLY	)	Current Use (Prior if being demolished)  Mail Sorting Facility									
Name of Monitoring Firm Hired by Build Matrix New World Engineering	ding Owner (8	)	ASC	M No.		Name of Abatement Contractor (9) Brandenburg Industrial Service Company									
Street Address 26 Columbia Turnpike					St	ive									
City, State, Zip Code Florham Park, NJ 07932			City, State, Zip Code Bethlehem, PA 18						 3015						
Project Manager for Monitoring Firm		Telepho		Te	Telephone No. License No.						<u> </u>				
Start Date (10)	Schodu	led Co		40-1800 Date (11)		610-691-1800 00721  Name of OSHA Monitor									
06/04/2018	06/22/		inhierion	Date (11)	1 323	Brandenburg									
Occupancy Status During Abatement (	ne)			Str	s nan Drive										
Facility Closed/Vacated During Er Abatement Performed Outside of	Normal Facilit	v Hour	ment s					nan Drive	)						
Other – Describe: DEMO - 6/18/20	)18-7/20/2018					Bethlehem PA 18015									
Scope of Work (Check All That Apply)							,								
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>		Renova Demoli				×	Min Glo	i-Enclosure vebag Proce							
	Is	s Locat	ion			- Lennard	1 1401	-Exempled	( ) and Non-F	TIADIE FI	able Procedure Abatement				
Location of	110	Norma ed Sole				escription of				-	T	Type			
Asbestos-Containing Material (ACM TO BE ABATED	) Ma	aintena stodial	nce/		tos Containir thermal syst				Amount (Specify	1 2		Enc	m		
In Facility (13)	Ous	(12)	Jian !		surfacing, other misce				SF or LF)	Remova	Repair	Encapsulate	Enclosure		
	Yes	No	N/A				~~~~~~~ <del>*</del> ~			<u>a</u>	7	late	ıre		
1st Floor Room 1A			X		Floor Tile	- 12	2x12		40 SF	Х					
Roof			X		Flash	ning			1600 SF	Х					
Throughout Building			X	Pipe Se	ealant on S	Spri	nkler	Heads	885 Units	X					
Name of Degistered Wests Used			IID== ::												
Name of Registered Waste Hauler Frandenburg Industrial Service	Co	H	IJDEP W lauler ID 1838		Cubic Yard of Waste 30	eto			Registered Landfill ethlehem Landfill						
City, State					Disposal D	sal Date City, State									
Bethlehem, PA Completed by	Title				06/11/18-			Bethlehe	em, PA	D .					
Stephen Carne	10 10 10 10 10 10 10 10 10 10 10 10 10 1	onme	ental F	ngineer	Signa	fure		0		Date 05/25	/2019	2			

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

Check # 25599

Date of Notification (1)	Name o	of Building C	Owner/0	Operator	DECEIVE												
5/26/2	0/			Ka													
	Type Notification			Street /	Address		The state of the s	MAY 2 9 2018									
DEP I			-	City, St	ate, Zip Cod	ie			and less:								
X DOL	Amendment Emergency		_		***************************************	ASBESTOS CONTROL											
⊠ DOH CA	_ justification)			Name o	of Contact	Kalıla			CEN		of antiquety						
☐ DCA [	Cancellation	1		FAC	JOHN ILITY INFO		amanis	IS									
Name of Facility Where At		g Place (3	3)	170	ILIT I INTO	MAII	ON	Type of Facility (	4)								
Charact Address	Bar / Tavern							School (K-1									
	1 Woodline R	d.						8 (Other than K-12) rivate & commercial buildings, homes,									
City (5) Mt.	Holly, NJ 080	060						etc.) Square Feet 3500	# of Floor	s	Bldg.	Age )+/-					
County (6) Burlingt	on				Code (7) USE ONLY)			Current Use (Price	or if being der	molished)		**************************************					
Name of Monitoring Firm F MECS		Owner (8)		ASC	M No.			of Abatement Con ens Environme	tractor (9) ntal Services, Inc.								
Street Address PO Bo	x 341						Street	Address Sox 322									
City, State, Zip Code Cheste	rfield, NJ 085	15					City, S	1									
Project Manager for Monitor	T	Telepho	ne No. 98-4070		Teleph	ntown, NJ 08501  hone No. License No. 259-9688 00493											
Start Date (10) 6/4/2018			Date (11)			e of OSHA Monitor											
Occupancy Status During A	Abatement (Chec	k Only On		711720	10		Street										
Facility Closed/Vacate Abatement Performed Other – Describe: 7 a	nent s																
Scope of Work (Check All 7							Ches	terfield, NJ 085	515								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	ation tion		ent with Negative Pressure edure (*) and Non-Friable Procedure														
		Is	Locati	ion					( ) and item	, riable r	Abatement						
Location of			lormal				cription			<u> </u>	Туре						
	Asbestos-Containing Material (ACM)  TO BE ABATED In Facility  Used So Mainten Custodia					ermal s surfac			Amount (Specify SF or LF)		Repair	Encapsulate	Enclosure				
Basemen	it	Yes	No X	N/A	E	Boiler	Insula	tion	35 sf	X		"					
											+						
Name of Registered Waste			1000	JDEP W	200000000	Cubic Y		Name of R									
Stevens Environmenta	I Services		13	Hauler ID No. of Waste Fairles					s Landfill								
City, State Allentown, NJ					[		al Date 1/2018	City, State Morrisvil	e, PA								
Completed by Mahlon E. Stevens		Title Projec	ct Ma	nager		Sig	gnature	11/	Date 5/26/18								



# State of New Jersey FIFICATION OF ASBESTOS ABATEMENT Pursuant to N.J.A.C. 8:60 and 12:120)

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011	W# 3375	_
(M	1044 55 /5	

Date of Notification	(1)		Nai	me c	of Build	ding O	wner / Operato					10						
					District	\-/		E	SE		$\mathbb{W}$	E						
Agencies Notified	Type Notific	ation			Addres					III)r				(14 mm) 1 day 44				
⊠ EPA	<b>5</b> 7		-		rth Ro										- 11			
☐ DEP ☐ DOL	☐ Initia		1 22			Zip Co					M	4X 5	9 2	018				
	Ame					0793	0			tene toul.	TT.	.	- NI-	ء ما مدد	- 1			
□ DOH     □ DCA		rgency cellation	100		of Con							elephor						
Z 20/1	Odino									ASE 208-879-7377 OL & LIGENSING								
Name of English VAII	horo Abotom	antin Takina Di		AC	ILITY	INFO	DRMATION Type of Facility (4)											
Name of Facility WI			ace (3)				School (K-12)											
Street Address	Subchapter 8 (Other than K-12)																	
250 State Route 24							Other (i.e. private & commercial buildings, homes, etc.)											
							Square Feet		# of Floors		Blo	dg. Age	;					
City (5)		County (6)	Count	ty Co	ode (7)	)												
Chester		Morris					Current Use (	(Prior i	f being demo	lished)			News and					
		1					School											
Name of Monitoring		y Building Own	er (8)		ASCN	I No.	Name of Abatement Contractor (9)  Bristol Environmental, Inc.											
RJB Environmer Street Address	itai inc		-				Street Addres		iental, inc.				_					
56 East Bridge S	treet								et									
City, State & Zip Co			<del></del>				1123 Beaver Street City, State & Zip Code											
Morrisville, PA 1							Bristol, PA 19007											
					lumbe	r	Telephone Nu	Number License Number										
Rick Beach	267-99				(215)788-6040 00509													
Scheduled Start Date (10) Scheduled Completion Date (11 6/25/18 7/3/18							Name of OSHA Monitor Bristol Environmental Inc.											
Occupancy Status I	During Abater	ment (Check or	nly one)	-			Street Addres							-				
Facility Closed/Vacated During Entire Period of Abate					ement		1123 Beaver Street											
Abatement Performed Outside of Normal Hours –																		
	7am to 3pm						Bristol, PA 19007											
	upied During												35075	200000				
Scope of Work (Che	eck all that ap	opiy)						$\boxtimes$	Full Contain	ment wi	th Ne	native	Pres	sure				
≥3 sf or ≥3 l	f		⊠ R	Reno	vation			Ħ	Mini-Enclosu			9.000						
≥160 sf ≥26	O If			emo	olition			П	Glove Bag P	rocedui	res							
			******						Non-Exempt	ed and	Non-l	Friable	Prod	edu	re			
1000 00 000	ocation of		Is Loc		277		Description			Amour	Abatement Type							
	tos-Containin erial (ACM)	g	Normall Solel				Asbestos-Cont Material (AC		(Specif SF or L			ш						
	BE ABATED		Mainten			8	(i.e., thermal sy		OI OI L	Re	Z	Encapsulate	Enclsoure					
	n Facility		Custodia		S 9715-65	ins	sulation, surfac	ing, V			Remova	Repair	psu	Isou				
	(13)		Yes N		N/A	0	r other miscella	aneous	s)			a	7	late	Ге			
Boiler Room			⊠ L			-	Tank Insula	tion		250 S								
Boiler Room				$\dashv +$	H		Boiler Flu			280 S			H	H	뉘			
Boiler Room				$\dashv$	ĦH	Pi	pe Fitting Ins		on	25 LF			H	H	H			
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			TIT	il	ĦĦ						V	T	Ħ	Ħ	Ħ			
				Ī	ΠT													
Name of Registered	d Waste Haul	er	10			200	ubic Yards	Name	e of Registere	ed Land	fill							
Service Transpo	rt Inc.			Haul <b>209</b> 9	ler ID I <b>90</b>		f Waste Cu YD	Mine	rva Landfil	II								
City, State							isposal Date	City,	MILITA COLOR SOLO SOLO SOLO SOLO SOLO SOLO SOLO									
New Castle, DE						1	/3/18		nesburg, O	Н								
Completed By (Prin				Title		S	ignature	0 .				Date						
Gino Pizzigon	i				ject		Deno Penzigoni / gr 5/23/18											
				Man	nager	1	JUNO 1	1/	0	10								

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

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

L-		II IUP	urs	uar	it i	to <u>N</u>	N.J.A	.C.	8:60 and	12:1	20)		Clu	4	£3.	37	5					
Date of Notification (	0 60	0 -	Na	me	of B	uilding	) Owr	ner / Operato	or (2)			7010	2 01		A III							
	5/23/18	_			Schoo	ol Di	strict			1	EC	E		M	B							
	Type Notific	ation					lress					U	50		П	U	5					
	N 1-141-			_			Road					In										
☐ DEP ☑ DOL				10 27			& Zip		111 111 111 111 111 111 111 111 111 111 111 111													
		100000000					NJ 07					LL	WAI					7				
□ DOH □ DCA		rgency cellation		1			ontact					Telephone Number										
□ DCA	☐ Cano	cellation		Dr	ew	var	nderze	ee		ASBEST 908-879-7373												
	CILI	TY INI	FOR	MATION			The State of the S	LIC	CEN	SING	1	- 4										
Name of Facility Who	ere Abateme	ent is Taking P	lace	(3)				T	Type of Facil	lity (4)						- Comments						
Dickerson Elemer	ntary Scho	ool		88788					School (	K-12) (	(Non Subchapter 8)											
Street Address											Other than K-12)											
250 State Route 2	4								Other (i.	e. priva	ate & commercial buildings, homes, etc.)											
								18	Square Feet		# of Floors Bldg. Age											
City (5)		County (6)	C	ount	ty C	ode	(7)															
Chester		Morris						(	Current Use	(Prior i	f being	demol	ished)									
								School														
Name of Monitoring I	Firm Hired b	y Building Owr	ner (8	3)		AS	CM No	o. N	Name of Aba	temen	nt Contractor (9)											
RJB Environment									Bristol Env													
Street Address									Street Addres													
56 East Bridge St								1	123 Beave	er Stre	et											
City, State & Zip Cod							City, State &	Zip Co														
Morrisville, PA 19		Bristol, PA 19007																				
Project Manager for I	epho				100	elephone N				License	Num	ber										
Rick Beach	'-99	_			(	215)788-60	)40			00509												
Scheduled Start Date (10) Scheduled Completion							1)	- 1	Name of OSI													
7/5/18	6/18																					
Occupancy Status During Abatement (Check only one)							- 8		Street Address													
Facility Closed/Vacated During Entire Period of Abatement Performed Outside of Normal Hours																						
			al H	ours	7.																	
Describe: 7					Bristol, PA 19007																	
Facility Occu																						
Scope of Work (Ched	ck all that ap	oply)									FII O-			M		_						
≥3 sf or ≥3 lf				P	Renovation							Containment with Negative Pressure i-Enclosure										
≥160 sf ≥260	If					olitic																
Z = 100 01 = 200			ш	D	CIII	Ontic	J11					ve Bag Procedures n-Exempted and Non-Friable Procedur										
loc	cation of		lo	Loc	atio	nn.	Т		Description		INOTI-LX	_	Amount	71-11								
	s-Containing	a		rmall				As	sbestos-Con				(Specify	1	Abatement Typ							
	rial (ACM)			Solel					Material (A				SF or LF)	- 1			ш	ш				
	<u> ABATED</u>			nten			531		e., thermal s			30 (C-00/22/20 <b>0</b> )	- 1	Rer	교	ıca	nc					
in	Facility		Cus	todia		taff?	<b>'</b>		lation, surfac				1	Remova	Repair	Encapsulate	Enclsoure					
	(13)		Yes	(1: N		N/A		or c	other miscell	aneous	5)			1	<u>a</u>	· 75	late	Гe				
D - 11 D					7	IN/A						-				_						
Boiler Room			X	1 -	4	Щ	W	/rap	and Cut of	2 Boi	lers		250 SF			Ш	Ш	Ц				
			Ц	1	1	Щ											Ш					
			Щ	1	4		-								Ш		Ш					
			Ц	1	1																	
Name of Registered Waste Hauler					NJDEP Waste Cubic Yards						Name of Registered Landfill											
Service Transport Inc.					Hauler ID No. of Waste 20990 20 Cu YD N						Minerva Landfill											
City, State					Disposal Date City, S							ity, State										
New Castle, DE								7/6/18 Waynesburg, OH														
Completed By (Print of	or Type)				Title			Signature							Date							
Gino Pizzigoni		Project Manager				Dino Pinnigoni / gr 5/2:							3/18									
				1.0	101 -0	115611	put II	7.5	11311 411	-5	11 15 11 1	~ N	11	1				- 1				