Date of Notification (1)	5-24-12					ng Owner/Operato	r (2)		100			7 7
5-24-12			l	Virt	tua E	Health In	c.					1 ;
Agency Notified	Type Notification				Address O. Bo	ox 388		MAY 3	1 /	17.		20.35
OKEPA OKDEP	□ Initial ➡ Amended 2				tate, Zip							1
₫ DOL	Amendment # Emergency (include)	ina				, NJ 0805	3	13	6.	5. 6	8	
©KDOH □KDCA	justification) Cancellation	5			of Contact		ļ	and the second				ALL PARTY
				FACI	LITY INF	ORMATION		3,000 3,000	7			
Name of Facility Where A		ace (3)		17101		Oranzinon	Type of Facility	/ (4)				
Old Voorhees	s Hospital						☐ School (K-1	2)				
Street Address								8 (Other than K-12) rivate & commercial		10		
101 Carnie E	Boulevard						homes, etc.)	Dullullig	JS,		
City (5)							Square Feet	# of Floors	Bldg. A		1227	25.00
Voorhees							10,500	6		+/	-5	0
County (6) Camden				County ONLY)) (STATE USE	Current Use (F hospita	rior if being demolis	ned)			
Name of Monitoring Firm	Hired by Building Own	er T	ASCN	No.		Name of Abaten		20000			100	-
(8) Criterion								ntal Serv	ices	,	In	c.
Street Address 3370 Progre	ss Drive, S	uit	e J	9		Street Address 2251 Fr	aley Str	reet		<u>Allenes</u>		
City, State, Zip Code Bensalem, Pi	A 19020					City, State, Zip C Philadel	Code phia, PA	A 19137				
Project Manager for Mon	itoring Firm	Te	elepho	ne No.		Telephone No.		License No.			-	
Mike Panepr	esso	2	15-	244-	-1300	215-533-	-5155	01166				
Start Date (10) 6 - 4 - 12	Scheduled C	omplet 14-		ate (11)		Name of OSHA Criterio	Monitor on Labora	atories				
Occupancy Status During	Abatement (Check on	ly one)				Street Address						
Facility Closed/Vacate Abatement Performed	d During Entire Period Outside of Normal Fac	of Abat	ement urs	t		City, State, Zip (Code	rive, Suit	e J			
☐ Other – Describe:						Bensalem	, Pa 190	20				
Scope of Work (Check all	that apply) *abat	eme	nt	pri	or to	demo*	Containment with	Negative Pressure				
□ ≥ 3 sf or ≥ 3 lf □ ≥ 160 sf or ≥ 260 lf	æ			☐ Ren ☐ Den	OAGHOLL	☐ Glov	ebag Procedure					
					1	⊠ Non-	Exempted (*) an	d Non-Friable Proce	dure	Δh	atem	ant
			Locat Vorma								Туре	
Location Asbestos-Containing		Use	d Sole	ly by	Anha	Description stos Containing Ma					_	
TO BE AB	ATED		intena			, thermal systems		(Specify		찡.	D Inc	En
IN Faci (13)			Staff?		330, 5	surfacing, VAT other miscelland		SF or LF)	l	Removal	psu	Sol
(1.0)			(12)			outer mascenario	5005)			a	late	Enclosure
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Name of Registered Was	te Hauler	DEP V	Vaste H	auler	Cubic Yards of	Name of Regi	stered Landfill				\perp	
Service Tran		No.	vacto i	uuici	Waste	A & L S						
City, State Morrisville,	מת					Disposal Date	City, State	OII				
Completed by	Title					-Signature	Libson,		Date			
Jenniter Niv	ren Dir. of				()	Int	perty		-24-	12		
ASR-41	* Do not	tion th	in form	a for mal	nontan lin	opering overmelad	hotivition / /	1,000	00 West 1000			

Date of Notification (1) 5-29-11	5-29-17						ng Owner/Operato Id's Corp	r(2) oration	МАУ З	7 000		*	i	
Agency Notified	Type No	tification			Street 3 0	Address 25 C	nemical R	loado, Si		1 	-	-	7 -	
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CKDOH CKDCA	justifi Cance	gency (includ cation) ellation	ing			of Conta i Ke	_{tt} idasch	The Name of Street	Telephone Nur	nber	-			1
			_		FAC	ILITY INF	ORMATION			•				
Name of Facility Where McDonald's	Abatement Resta	is Taking Pl urant	ace (3))	1.5			Type of Facilit						
Street Address								☐ Subchapter ☐ Other (i.e. p	8 (Other than K-12 rivate & commercial		gs,			
56 East Bro	ad St	reet					*	homes, etc Square Feet	# of Floors	Bldg.	Age	_		
Bridgeton								3000	1		/-			
County (6)) (STATE USE	Current Use (F	rior if being demol	ished)				_
Cumberland					ONLY)		The special result and the	restaurar	reflection in a		*1		
Name of Monitoring Fire			er	ASCI	d No.		Name of Abater							-
(8) EHS Envir	onment	al					Pepper E	nvironme	ntal Serv	rices	,	Iı	nc	٠.
Street Address 9 S. Main S	Street	6				31,	Street Address 2251 Fr	aley St	reet			(40,500)		
City, State, Zip Code Mullica Hil	City, State, Zip Code Mullica Hill, NJ 08067 Project Manager for Monitoring Firm						City, State, Zip (Philadel		A 19137				30.10	-
							Telephone No. 215 - 533 -	-5155	License No. 00848					
Start Date (10) 6 - 8 - 12		Scheduled C	omplei 8 - 1:		ate (11)		Name of OSHA EHS Envi		al					
Occupancy Status Durir	ng Abateme	nt (Check on	ly one))			Street Address				-			-
☐ Facility Closed/Vacat ☐ Abatement Performe	ed During E	ntire Period Normal Fac	of Aba	temen urs	t	*	9 South City, State, Zip (Code						
☐ Other - Describe:							Mullica 1	Hill, NJ	08062	Suggestive et the control of				
Scope of Work (Check at □ ≥ 3 sf or ≥ 3 lf □≥ 160 sf or ≥ 260 lf	all that apply) *abat	eme	nt	pri □ Ren □ Den	Ovation	☐ Glov	ebag Procedure	n Negative Pressur d Non-Friable Prod					
		- 1	Is	Local	tion	Γ					Ab	ater		nt
Locati Asbestos-Containir <u>TO BE A</u> IN Fa (13	ng Material (BATED cility	(ACM)	Use Ma	Norma ed Sole intena Custod Staff (12)	ely by ince/ lial	Asbes (i.e.	Description of the stop of the	aterial (ACM) insulation, r, or	Amount (Specify SF or LF)		Removal	Repair		Enclosure
			Yes	No	N/A				1		4	4		
roof					x	mic	cellaneou	ic tar	180sf		-	+	-	_
1001	7001					IIII	CETTAILEU	is car	10051		X	+	-	
		+						+	+	\dashv	-			
Name of Registered Wa	DEP V No.	J Waste H	auler	Cubic Yards of Waste	Name of Regi				L	_1				
	Service Transport							A & L S	arvage					
City, State Morrisville	, PA						Disposal Date	City, State Libson,	ОН					
Completed by Jennifer Ni	17	itle ir. of	Op	era	atio	ns	Signature	Mi	4: 1	Date 5 - 2 9) – [12		
ACD 41		+5	110 - 11	in for		1								

<u>861178</u>		(rursu	ant to NJAC 8:60 and 1	(2:120)	1	T. Charles and			
Date of Notification (1)		Nam	of Building Owner/Ope	TOHNS	是作用	W	E	m	
Agencies Notified Type Notification		Stree	et Address	, 1		*			11
DEP Initial Amended Amendment	#	100000000000000000000000000000000000000	State, Zip Code	h .	20 MAY 3 H	2017	_	IJ.	1
DOH Emergency justification) Cancellation	(including	Nam	of Contact	NS, 10 <	Jelephone N	1-7 umber	YU		1
Carlosianon		- 0	NY LEFAR						_
Name of Eacility Where Abatement is Takin	offers	5 300-9		Type of Facili	The second	- ALTERNATION			
Street Address	2020	- 10		Other (i.e	<-12) ter 8 (Other than K- private & commerce	12) cial bui	ldings	, hom	nes.
Monnis Plains	2011 9			Square Feet	# of Floors		Bldg.	Trings	
County (6) MONNIS		Coun (STAT	ty Code (7)	Current Use (I	Prier if being demolis	shed)	4	6	
Name of Monitoring Firm Hired by Building (Owner (8)	AS	CM No. N	ame of Abatement C	Contractor (9)	_		<u>.</u>	-
Street Address	λ,	<u> </u>		treet Address	nitasi (BW	7.	<u>ا</u>	enu
City State, Zip Code	ne U	ruc	P	O NOX 5	17				-
(DARTA, NJ			<i>f</i>	ity, State, Zip Code	STOWN,	A	J	-	00
Project Manager for Monitoring Firm	97	3-7	none No. 1649 9	alephone No.	235 License 1	0.0	6	8	
Start Date (10)	Scheduled	Completio		ame of OSHA Monito	or or				
Occupancy Status During Abatement (Check		- (reet Address					
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other - Describe:	eriod of Aba al Facility H	atement ours	Ci	ty, State, Zip Code					-
Scope of Work (Check All That Apply)	-			8					
≥3 sf or ≥3 if □ ≥160 sf or ≥260 if		ovation nolition	Adakament on	☐ Mini-Enclosu☐ Glovebag Pr	ocedure				
	· Is Lo	cation	T	□ Non-Exempt	ed (*) and Non-Friat	-	00000000	e ement	
Location of Asbestos-Containing Material (ACM)	Used S	mally lolely by	Descrip Asbestos Containir	otion of		-	Ту	pe	
TO BE ABATED In Facility (13)	Custodi (1	nance/ al Staff? 2)	(i.e. thermal syst surfacing, other misca	tems insulation, VAT, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
66 Roslen Room	Yes N	lo N/A	<u> </u>		11000	A A		6	
		+	131 00	meat	20 sque	X	-	-	\dashv
								-	-
Name of Registered Waste Hauler	9.	NIDEE							
WASTE MANASEMENT		NJDEP I			Registered Landfill				
City, State EWING NJ	=		Disposal D	ate City, Sta		Da			\dashv
Completed by WASHam IA	Title	(gca)	L Signat		shear Da	te/	r/	7	-
SP 44 /D 00 00)	File			y wa	47	104	//		

Name of Building Owner/Operator (2) P.S.E. & G Type Notification Street Address 150 Circle Ave. **EPA** Initial City, State, Zip Code DEP Amended Clifton, NJ 07011 DOL Amendment # × ACRESTOS CONTINU Emergency (including Name of Contact Telephone Number DOH justification) Craig O'Connell DCA Cancellation × **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) P.S.E. & G School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e. private & commercial buildings, homes, × 7-01 NEVINS ROAD etc.) City (5) Square Feet # of Floors Bldg. Age Fairlawn 1700 APPX County Code (7) (STATE USE ONLY) County (6) Current Use (Prior if being demolished) Switch Station Bergen Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) **Environmental Tactics** 0045 Unique Systems of America Street Address Street Address 396 Whitehead Ave. 64 Broad Street City, State, Zip Code City, State, Zip Code Matawan, NJ 07747 South River, NJ 08882 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Tom Geiger 732-290-2217 732-432-8350 01111 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 6/16/12 6/ Occupancy Status During Abatement (Check Only One) Unique Systems of America Street Address 396 Whitehead Ave. Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: South River, NJ 08882 Scope of Work (Check All That Apply) Full Containment with Negative Pressure ≥3 sf or ≥3 lf Renovation ≥160 sf or ≥260 lf Demolition Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Type Normally Description of Location of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Encapsulate Maintenance/ Enclosure (i.e. thermal systems insulation, (Specify TO BE ABATED Remova Custodial Staff? In Facility surfacing, VAT, or SF or LF) (12)other miscellaneous) (13)Yes No N/A Men's Bathroom & Store Room X 102 LF Thermal systems insulation Х Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste Waste Management Grows 1125 APPX. City, State Disposal Date City, State Elizabeth, NJ Morrisville, PA Completed by Carol Raimo Office Mgr.

1205-4482 Check #4171

Date of Notification	(1) 5/29/12						Owner / Operat	tor (2)		FI	W	GI	Fam.	7
Agencies Notified	Type Notific	ation			ry HI Addr	II B.O	.E.		1 200	7	- B	17/	5	M	-
⊠ EPA	Type Nounc	ation				lo Ter	race							Ц	
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			W.	FA	CILIT	Y INF	ORMATION		W. Salverton Co.		- Language			*****	
Name of Facility Wh	nere Abatem	ent is Taking P	lace (3)				Type of Fac						11		
Joyce Kilmer ES	5														
Street Address									8 (Other tha						
2900 West Chape	el Ave.								rivate & con					c.)	
City (F)		10 (0)	-10				Square Feet	t	# of Floo	ors	Bld	lg. Age	9		
City (5)		County (6)	Con	inty (Code	(7)		/D ·							
Cherry Hill		Camden					Current Use	e (Pri	or if being d	emolished)					
Name of Manitarina	Cinn Him d b	Duilding O	(0)		1400	20.4.01.	School			(0)					
Name of Monitoring TTI Environment		by Building Owl	ier (8)		ASI	CM No	. Name of AbateTech			tor (9)					
Street Address	ai			25_2	-		Street Addre		.					_	-
1253 North Churc	ch Street						PO Box 25								
City, State & Zip Co		12					City, State &		Code						-
Moorestown, NJ			Teleph				Lumbertor								
	oject Manager for Monitoring Firm n Guilardi						Telephone N		oer	Licens	se Nur		200		
							609-265-21					0052	9		
	cheduled Start Date (10) Scheduled Con 6/18/12)	Name of OS EMSL Ana								
Occupancy Status D	Ouring Abate	ment (Check o	nly one)			Street Addre				C-51804-5-5-5-		22700 21220		
		During Entire F			ateme	nt	108 Haddo								
A MARKON CONTRACTOR	Performed O	utside of Norm	al Hou	rs			City, State &	1.7							
Describe:	: ID :	A1 '1 '1 / F					Westmont	, NJ	18108						
Scope of Work (Che		Abatement (E	xterior	VVOI	rk)				The state of the s					٠	91 6
ocope of work (one	on all tilat a	opiy)						\boxtimes	Full Con	tainment wi	th Ner	native	Pres	sure	
23 sf or ≥3 lf	f		\boxtimes	Ren	ovatio	on		H	Mini-End			ganvo	1 100	Juio	
≥160 sf ≥260	O If		Ħ	Den	nolitio	n		П		ag Procedur	res				
	-w. 10-2-10-1-20-1-20-1-	_ 3 .00								mpted and		riable	Proc	edu	re
30 50 70	cation of			ocati			Description			Amour		Aba	teme	nt T	ype
	os-Containin erial (ACM)	g	Norm	ally t lely t			Asbestos-Cor Material (A			(Specif				m	
	BE ABATED		Mainte				(i.e., thermal			SF or L	Γ)	Re	20	Encapsulate	Enclosure
	Facility		Custo				insulation, surfa					Remova	Repair	sde	clos
	(13)	N. S.		(12)			or other miscel	llane	ous)			l a	=	ılatı	ure
			Yes	No	N/A									_	_
Areas #1 & #2			H	Ц.	X		or cement plaste			220 S			Щ	Ц	\Box
Area #4				Ц.		Exter	or cement plaste	erso	ffit material	400 S	F		밁	Щ	닏
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Name of Registered	ame of Registered Waste Hauler						Cubic Yards	TN:	ame of Regi	stered Land	fill		للا		ш
LIE	1.70 2. Mar 1990 - 1888 - 1888 - 1888 - 1888 - 1888 - 1888 - 1888 - 1888 - 1888 - 1888 - 1888 - 1888 - 1888 - 1888						of Waste		anno on mogn	otoroa Lana	0.000				
AbateTech, Inc.	ateTech, Inc.						20	TI	RRF Landf	ill					
City, State	y, State						Disposal Date		ty, State	- 118-110	7/				300
Lumberton, NJ							6/22/12	Tu	ıllytown, F	Α		10.000			
Completed By (Print	or Type)			Titl			Signature	n		34	10	Date			
Gwen Trumbetti				55000	fice		(21	K		9		5/29	112		
				CO	ord.		V ILL	-1							

1205-4486

Date of Notification	(1)		Nar	ne i	of Bui	Idina	Owner / Operate		- Ur		1 12	100	11	4
V-12	5/29/12					ersit		111111				7//		
Agencies Notified	Type Notification	7/			Addre			Local Local	MAY	3 1 9	117	11		***************************************
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☐ DEP ☐ DOL	☐ Initial ☐ Amended #		100			Zip C		1 1				1	į	
Ø DOH	Emergency						NJ 08648	- 1	ASBEST	IOS CONTRO	1 %	-1	1	21.30
□ DON	Cancellation				of Cor oorh			L. Constantino	Pile annualisamente	ICEMSING 7	eleph	one	Num	ber
										dis.				
Name of Facility W/	here Abatement is Taking I	Dloop	F	AC	ILITY	INF	ORMATION	III. 74)						
	- Fine Arts Building	lace	(3)				Type of Faci							
Street Address					T		Subcha	pter 8 (Other th	an K-1	2) (Unoco	upied)		
2083 Lawrencevi							Square Feet	e. private & co # of Flo			idg. Ag	1-171	etc.)	
City (5)	County (6)	C	ount	у С	ode (7	7)								
Lawrenceville	Mayee							(Prior if being	demolis	shed)				
	Mercer Firm Hired by Building Ow	mor (9	1	-	ACCI	M No.	Boiler Roo		-1 (0)				1300	
Pennoni Associa	ites. Inc.	nei (o)		ASCI	VI INO.	AbateTech	atement Contra	ictor (9)				
Street Address							Street Addre					-		
515 Grove Street							30 Maple A							
City, State & Zip Co							City, State &		- COM					
Haddon Heights,		Tala		N	lumbe		Lumberton							
Alan Lloyd							Telephone N 609-265-21			License N	umber 005			
Scheduled Start Da	te (10) Scheduled Co	-					Name of OSI				003	23		
6/11/12		6/2	2/12		. ,		EMSL Anal							
Occupancy Status [During Abatement (Check of	nly or	ie)	•			Street Addres	ACTION AND ADDRESS OF THE PARTY		-0.000000000000000000000000000000000000				
	sed/Vacated During Entire I Performed Outside of Norm			bat	emen	t	107 Haddo	CONTROL CONTRO						
	4PM- 12 Midnight	iai Ho	ours				City, State &							
	upied During Abatement						Westmont,	NJ 08108						
Scope of Work (Che			-											
								Full Co	ntainme	ent with Ne	egative	Pre	ssure	е
≥3 sf or ≥3 li		\boxtimes			vation	1		Mini-En	closure	е				
≥160 sf ≥26	0 If	Ш	De	emo	olition					ocedures				
10	ocation of	T-1-	1	-41-						d and Non-			-	40000
	os-Containing		Loca mally				Description Asbestos-Con	n ot Itaining		Amount Specify	Abi	atem	ent	Туре
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II.	r Facility (13)	Cust	odia (12		ап?		nsulation, surfact or other miscell				Remova	Repair	Encapsulate	Enclosure
	()	Yes	No		N/A		of other miscen	aneousj			1 20	E.	ate	9
Boiler Room		X					Tank Insula	ation	1	50 SF		П		П
							100000000000000000000000000000000000000						IT	厅
Name of Registered	Waste Hauler	LLI.	L	LID	EP W	ast. I	Outin Val	INI. CD		1		Ш		
	me of Registered Waste Hauler						Cubic Yards of Waste	Name of Reg	ıstered	Landfill				
AbateTech, Inc.				1	8750)	12	TRRF Land	fill					
City, State Lumberton, NJ							Disposal Date 6/22/12	City, State Tullytown,	PA					
Completed By (Print				itle			Signature	1			Date			
Gwen Trumber	tti		C	ff.	Coor	rd.	(All	4			5/29	/12		

State of New Jersey 1205-4491 NOTIFICATION OF ASBESTOS ABATEMENT Check#4170 (Pursuant to N.J.A.C. 8:60 and 12:120)

Date of Notification	5/29/12 cies Notified Type Notification							er / Opera			13 (2)	<u> </u>	17		= .	
Agencies Notified		notion					/lemori	ial Hospi	ital		13.33	144	1			1 11
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N				F	AC	ILITY I	VFORM	ATION								
Name of Facility W Residential Doct	here Abatem	ent is Taking P	lace	(3)			Ţ	pe of Fac	ility (4)							
Street Address	or Office						_	School	- 50							
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110 North Wood	bury Ka.							Other (i		ate & commer		gs, ho Ildg. A			tc.)	
City (5)		County (6)	С	ount	y Co	ode (7)		quare r cc	`	# 011 10015		lug. A	ige			
Pitman		Gloucester	- 1			. ,	Ci	irrent Use	(Prior i	f being demol	ished)	7	2/45			
								octor's C		being demoi	isrieuj					
Name of Monitoring	Firm Hired I	y Building Owr	er (8)	T	ASCM N				t Contractor (3)		_			
TTI Environment	al		200 1820				20000	oateTech			٥,					
Street Address								reet Addre								
1253 North Chur								D Box 25								
City, State & Zip Co Moorestown, NJ								ty, State &								
	ject Manager for Monitoring Firm							imbertor		8048						
Mike Stocku								lephone N 9-265-21			License N					
Scheduled Start Da	te (10)	Scheduled Con		-840				me of OS		nitor		005	23			
6/3/12			6/3	/12				/ISL Ana		iitoi						
Occupancy Status I	During Abate	ment (Check or	ly or	ie)				eet Addre						-		
Facility Clos	ed/Vacated	During Entire P	eriod	of A	bate	ement		7 Haddo			. 6476277 577					
		utside of Norma	al Ho	urs				y, State &	T		100				11	
Describe:							W	estmont,	, NJ 08	108						
Scope of Work (Che	upied During				-										-	
70 W		7 /							П	Full Containm	nent with No	egativ	e P	res	sure	
≥3 sf or ≥3 lf			\boxtimes			ation/				Mini-Enclosur	e	3				
≥160 sf ≥260) If			De	emo	lition				Glove Bag Pr	ocedures					
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	os-Containin	a		Loca nally				Descriptio estos-Cor			Amount	Ab	ate	eme	nt T	ype
	erial (ACM)	9		olely		cu	Van	/laterial (A	CM)		(Specify SF or LF)			T	т	
	E ABATED			tena		100000000000000000000000000000000000000	(i.e.,	thermal s	systems		or Er)	Re	1	Z	nca	Enc
In	Facility (13)	1	Cust	odial (12	21/2000	aff?	insulat	ion, surfa	cing, VA	T		Remova		Repair	Encapsulate	Enclosure
	(10)		Yes	No		I/A	OI OII	er miscell	ianeous)		<u>a</u>		-	late	эrе
(2) Areas					1		Flo	or tile & N	Mastic	100) SF total		Г	7	П	
					T					100	or total	12	+	#	H	H
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Name of Posistored	ne of Registered Waste Hauler						1-						L	1		
vallie of Registered	vvaste Haule	er				P Waste	of Wa		Name	of Registered	Landfill			oct bonz		
AbateTech, Inc.				1.1		8750	OI VV	5	TRRF	Landfill						
City, State							Dispo	sal Date	City, S					_		
Lumberton, NJ								/4/12		own, PA						
Completed By (Print	or Type)				tle		Signa	ture	1			Date				\vdash
Gwen Trumbetti				0	ffice	e Coord		YVV	1			6/29				

STATE OF NEW JERSEY

NOTIFICATION OF ASBESTOS ABATEMENT NOTIFICATION OF ASBESTOS ABATEMENT
(PURSUANT TO NJAC 8:60-7 AND 12:120-7

			ANNU	AL NOTIF	ICATION		(')	lect	生生	\prec	6//
Date of Notification	(1)			CHEVRO		ner / Opei					
A	/			Street A			F 3	1-3	Te Control	for the	
Agencies Notified		Notification			ATE STREET		11111	1 1 1	h- 11		16831
EPA		Initial		0.000	te, Zip Code						
H POI		Amended	2	-	AMBOY, NJ		dir				
☑ DOH		Amendment			Contact			Telepho	ne Num	ber	1
☑ DOL			w/ justification	STEVE E	BARROW	4.	[L L		2 22 10 10 10 10 10 10 10 10 10 10 10 10 10	111.	
		Cancellation		ACILITY I	NFORMATION					-	
							,	distant.		100	740
Name of Facility Wh	ere Abater	nent is Taking	Place (3)		Type of Faci	ility (4)					
CHEVRON										The Contraction of the Contracti	4-17-5763-E-17-57
						chool (K					
Street Address						ubchapte	er 8 (Other	than K-1	2)		
1200 STATE STREE	I						, private &	cmmerci	ial		
611 151	-						mes, etc.)		DOMESTIC OF THE	_6.00	
City (5)	County (6		County Code	(7)	Square Feet		# Of Floor	'S	Buildir	ng Age	
PERTH AMBOY	MIDDLES	EX			N/A	and the second second		/A		N/A	A
					Current Use		being dem	olished)	T		
					PRODUCTIO	CONT					
Name of Monitoring	Firm Hired	d by Bldg. Ow	ner (8)	ASCM N	Name of Aba	atement (Contractor	(9)		THE PERSON NAMED IN COLUMN	
AET					LVI Environm	nental Sei	vices Inc.				
Street Address					Street Addre	ess					
907 DOOLITTLE DRI											
City, State, Zip Code				and the second second	462 Getty Av						
BRIDGEWATER, NJ					City, State, Z	Zip Code					-
Project Mngr. For Me	onitoring F	irm	Telephone Nu	mber							
ERIC			908-218-1108		Clifton, NJ 0	7011					
Sheduled Start Date	(10)	Sched. Com	oletetion Date (1	1)	Telephone N	lumber		License	Number		
06 / 11	/12	_06_	/29/	12	4-900-00-00-00-0						
/ /		/	/		973-772-	3660				00117	
Occupancy Status D					Name of OSI				XIII		
		ated During Er	tire Period of		LVI Environm	nental Ser	vices Inc.				
Abatemer					Street Addre	ess					
		ed Outside of	Normal Facility		462 Getty Av	enue					
Hours - D											
Other - De	escribe:	_7:00AM - 5:00	PM		City, State, Z			***************************************			
Scope of Work (Che	ck All That	Apply)		-	CLIFTON, NJ	J 07011				-	
		11.77									
Demolition	n		Renovation		Full Contains	ment with	h Negative	Pressur	е		
≥3sf or ≥3	If	9			Mini - Enclos				20		
≥160 sf or	≥260 If				Glovebag Pr	ocedure					
				~	Non-Exempt	ed (*) and	d Non-Fria	ble Proce	edure		
Location of		ls .		Descript				Abateme	nt Type	02	
Asbestos Conta	•	Location	As		Containing	1		R		E	E
Material (AC	10050	Normally		Material	18 S	1	Amount	E	R	N	N
TO BE ABAT		Used			l systems	1	(Specify	M	E	C	C
in Facility		Solely			facing, VAT,		SF or LF)	0	P	Α	L
(13)		by Main-	ord	other misc	ellaneous)	- 1		V	A	P	0
		tenance/				- 1		Α	1	S	S
		Custodial	1			- 1		L	R	U	U
		Staff (12)								L	R
EVTERIOR		YES NO N/A	A CONTRACTOR OF THE PARTY OF TH								
EXTERIOR			TRANSITE PIP	E			200 LF	V			
			ļ								
											
Name of B			ļ								
Name of Registered	waste Hau	ler	NJDEP Waste		Name of Reg	istered L	andfill.				
BY OWNER			Hauler ID No.								
City State				of Waste							
City, State				Disposal	City. State						
				Date							
Completed by (Print	or Tun-1		Tritta		L			-			
Completed by (Print	or type)		Title		Sig	gnature	(K		Date	
STEVE STILES			PROJECT MAN	IACED		\ In	2 X	12	1		05/00/40
	a complete por complete party	and the second	I KOJECI WAN	MOEK	1 1	JAVA	1 Rue Jo	-		1	05/29/12

STATE OF NEW JERSEY NOTIFICATION OF ASBESTOS ABATEMENT (PURSUANT TO NJAC 8:60-7 AND 12:120-7

Check # 2678

Date of Notification					Building Ov				orene e		
$\frac{05}{29}$	/			Street Ac	o Refining Co	ompany LL	С				
Agencies Notified	Type of N	lotification			gsport Road		1. 2	ner alexandra	News and the second	NAMES ASSESSED.	Constitution of the section
☐ EPA	7	Initial			te, Zip Code			115	7	1 1	
☐ DEP		Amended			o, NJ 08066		+ 1-	1 1			
☑ DOH		Amendment		Name of	NEW CONTRACTOR OF THE PARTY OF		7	Telepho	ne Numl	ber	111
☑ DOL DCA		Emergency v Cancellation	v/ justification	Ravi Jare	cha		1 1		20.00	7 0012	1 1 1
DOA		Cancellation		ACILITY IN	NFORMATIO	N			-		
			•	AOILITTII	W OKWATIO		ž	farm.			
Name of Facility Wh		nent is Taking	Place (3)		Type of Fa	cility (4)				*5 4	
Paulsboro Refining C	ompany						lecones.	Al literature and a second	Ph. 1 10 mm A - 11	chique el management	make a make a second
Street Address					- A. C.	School (K	12) er 8 (Other	than K f	2)		
800 Billingsport Road	1						, private &				
						bldgs., ho	mes, etc.)				
City (5)	County (6		County Code	(7)	Square Fe		# Of Floor		Buildir		
Paulsboro	Glouceste	r				A (Dries if	N/		4	N/A	
					TANK FAR		being dem	olisnea)			
Name of Monitoring	Firm Hired	by Bldg. Owr	ier (8)	ASCM NO	Name of A		Contractor	(9)			
BY OWNER		,						(-)			
					LVI Enviror		rvices Inc.				. 2004
Street Address					Street Add	ress					
City, State, Zip Code)				462 Getty A	Venue					
,					City, State,						
Project Mngr. For M	onitoring F	irm	Telephone Nu	mber	1						
					Clifton, NJ						
Sheduled Start Date	','	The state of the s	letetion Date (1	, .	Telephone	Number		License	Number		
$\frac{-6}{}$	/12	$\frac{6}{}$	//	12	973-77	2-3660			,	00117	
Occupancy Status D	uring Abat	ement (Check	Only 1)		Name of O		tor			00117	
		ted During En			LVI Environ		57(5) 51%				
Abateme	100 in the contract of the con				Street Add	ress					
	nt Performe escribe:	ed Outside of I	Normal Facility		400 0-44 - 4					**	
		MON-FRI.			462 Getty A		*1				
		7:00AM-3:30F	M		Clifton, NJ						
Scope of Work (Che	ck All That	Apply)					A STATE OF THE STA				
☐ Demolitio	_		D		- " o . :			_			1 1
☐ Demolitio ✓ ≥3sf or ≥3	573	$\overline{\checkmark}$	Renovation		Full Contai Mini - Encl		n Negative	Pressur	е		
☐ ≥160 sf or					Glovebag F						
98505 tt / 12564					Non-Exemp			ble Proc	edure		
Location o		le.		Deservice				* 1			
Asbestos Cont		Is Location	Δς	Descript	on of Containing			Abatem R	ent Type	ĮΕ	le ·
Material (AC		Normally		Material			Amount	E	R	N	N
TO BE ABAT		Used		e., therma	l systems		(Specify	M	E	C	c
in Facility		Solely			facing, VAT,		SF or LF)	0	P	A	L
(13)		by Main- tenance/	ord	other misc	ellaneous)			V	A	P	0
		Custodial						A L	I R	S U	S U
		Staff (12)						-	1.,	L	R
		YES NO N/A	Committee of the last of the l								
700,701,1900,1902 Ta	ank Area		Pipe Insulation				88LF	V			
										1 -	
								ᆜ	1-1	1	
Name of Registered	Waste Hau	ler	NJDEP Waste	Cubic	Name of Re	egistered I	_andfill				
LVI Demolition Servic		anes.	Hauler ID No.	Yards	G.R.O.W.S.						- 1
32 Williams Parkway			30534	of Waste							
City, State East Hanover, NJ 079	36				City. State	and Name				10	
Last Hallover, NJ 0/9	50			Date 6/30/2012	1000 New F Morrisville, I		1.				
Completed by (Print	or Type)		Title	3.00.2012	Andrew Control of the last of	Signature	7.7	<i>J</i> i	***************************************	Date	
Dan Stabilito, P. Dem			Health and Safe	ety Officer		7 /	, \L	1/4	11 1/25	-	
						LU	X_)/(LUL	LUN		05/29/12

CL# 2289

Date of Notification (1)			Name	e of Buildin	g Owner/Operator (N	•			
05/25/	12		Vir	tua Mem	orial Hospital of	Burlington Co	ounty				
Agencies Notified			120020	t Address 5 Madiso	n Ave.		EGET	W	E	n	North Control
☑ DOLWD☑ Amended☑ DHSSAmendment			City,	State, Zip	Code	1 1	•			11	
□ DCA □ Emergence		na	Mo	unt Holly	y, NJ 08060	Maria Mira	WAY 2 1	9/110		U	1
(NJAC 5:23-8) justification			Name	of Contac	ct		Telephone Num	ber	7	et al.	T
☐ Cancellati	on		Dia	ına Amey	/	1 1 1		_			NA.
			FA	CILITY IN	NFORMATION	Electronic State (Section 1997)	THOUSAND CONTRACTOR				-
Name of Facility Where Abatement is T	aking Pla	ce (3)				Type of Facility	(4)	of the selection	to Tables	Marine (1)	
Virtua Memorial Hospital of Bui	rlington	Coun	ty			School (K-1	2)		Marrie.		
Street Address		-				☐ Subchapter	8 (Other than K-12 private and comme) rcial bi	ilding	15	
175 Madison Ave.						homes, etc.		olul bi	anding	,,	
City (5)			77.7			Square Feet	# of Floors	BI	dg. A	ge	П
Mount Holly											
County (6)			Cou	nty Code (7)(STATE USE ONLY)	Current Use (P	rior if being demolis	shed)		-	
Burlington						Hospital					
Name of Monitoring Firm Hired by Build	ing Owne	r (8)	ASCM	No.	Name of Abateme	ent Contractor (9)				П
AET, Inc.					BRISTOL EN	VIRONMENTA	L, INC.				
Street Address					Street Address	1000					
28 N. Penell Road					1123 BEAVE	R STREET					
City, State, Zip Code			30000		City, State, Zip Co						
Media, PA 19063					BRISTOL, PA	19007					
Project Manager for Monitoring Firm		0.000	ephone		Telephone No.		License No.				
Dave Turotsy		10.7	10-891	and the second	215-788-6040		00509				
Start Date (10) S	cheduled 06	700	etion Da 4/	3) (7/)	Name of OSHA M BRISTOL EN	lonitor VIRONMENTA	L, INC.				
Occupancy Status During Abatement (C			ement		Street Address	OCTOEET				-	
Abatement Performed Outside of No Time of Abatement: 7:00AM-3:30P	rmal Faci	lity Hou	irs - Des		City, State, Zip Co	ode					_
Scope of Work (Check all that apply)					BRISTOL, PA	19007					_
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 		Renova Demoliti			☐ Mini-Enc ☐ Glovebag	Procedure	gative Pressure on-Friable Procedu	re			
		Is Loca	ition					Ab	atem	ent T	уре
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	I N	Norma sed Sol flaintena stodial (12)	lely by ance/ Staff?		Description o estos Containing Ma e., thermal systems i surfacing, VAT, other miscellane	terial (ACM) insulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	1
40 (10 (10 ft))	Ye	s No	N/A		7. ga taon in 1995 taon in 1997 (1997)	- SALLAND				O	
Labor& Delivery - Bathroom Show	ver 🗆	\boxtimes		Floor ti	le and mastic		10 SF	\boxtimes			
											Е
					***************************************		- A. F				
	\neg		10						П		
Name of Registered Waste Hauler			NJDEP 1	Waste	Cubic Yards of	Name of Regis	stered Landfill		ГП		L
SERVICE TRANSPORT GROUP,	INC.	1.00	Hauler II	D No.	Waste	Minerva L					
City, State			20990)	1 Disposal Date	City, State	unaiiii				_
NEW CASTLE, DE 19720					06/04/12	Waynesbu	ırg, OH				
Completed By (Print or Type)	Title				Signature	Λ · ·	, Da	ite /		,	
Gino Pizzigoni	Estim	ator			Sinct	Gran	/il. -	5/2	5/	12	62
SB-41 GI 12123	* Do n	ot use t	his form	for ashes	tos licensure exemp	000	11	-/			

Name of Building Owner/Operator (2) PSE&G Agencies Notified Type Notification Street Address 4000 Hadley Road **EPA** Initial City, State, Zip Code DEP Amended × DOL Amendment # South Plainfield, NJ 07080 Emergency (including Name of Contact DOH Telephone Number justification) Richard Strauss × DCA Cancellation **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) P.S.E & G School (K-12) Street Address Subchapter 8 (Other than K-12) 155 Raymond Blvd. Other (i.e. private & commercial buildings, homes, X etć.) City (5) # of Floors Square Feet Bldg. Age Newark approx 2500 2 88 yrs County (6) County Code (7) Current Use (Prior if being demolished) Essex (STATE USE ONLY) SWITCH STATION Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) **Environmental Tactics** Unique Systems of America 2045 Street Address Street Address 64 Broad Street 396 Whitehead Ave. City, State, Zip Code City, State, Zip Code Matawan, NJ 07747 South River, NJ 08882 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Tom Geiger 732-290-2217 732-432-8350 01111 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor Unique Systems of America Occupancy Status During Abatement (Check Only One) Street Address 396 Whitehead Ave. Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours
Other - Describe: Nacated escept for Metaled City, State, Zip Code South River, NJ 08882 Scope of Work (Check All That Apply) ≥3 sf or ≥3 If Renovation Full Containment with Negative Pressure ≥160 sf or ≥260 lf Demolition Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Normally Type Location of Description of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ Encapsulate TO BE ABATED (i.e. thermal systems insulation, Enclosure (Specify Remova Custodial Staff? Repair In Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A Control Room X Transite Panels 30 SF X ACM Sock 50 LF X Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste WASTE MANAGEMENT **GROWS NORTH** 1125 APPX. City, State Disposal Date City, State ELIZABETH, NJ MORRISVILLE, PA Completed by CAROL RAIMO OFFICE MANAGER

CK# 18754

Date of Notification (1) 05/25/2012				Name 1 EX	of Buildin	g Owner	Operato	r (2) LLC c/o ON`	YX MAN	AGEM	FNT		-	ET SABO
I	Type Notificatio	n		Street	Address			ET, SUITE 12	1 = 1		1.1		1	\ <u>1</u>
DEP X DOL	Initial Amended Amendmen Emergency			City, S	tate, Zip 0 SEY CIT	Code		1)		1 47	10		
Ŭ DOH DCA	justification Cancellation)	d.		of Contac D'Donne				Tele	phone N	umbe		ì	-
Name of Facility Where At	natement is Taki	na Place /	3)	FAC	ILITY IN	FORMAT	ION	- 65 111		16 x+ 1		. 5		
1 EXCHANGE PLAC			3)					Type of Facility	market adjusted \$2.1 - 5	Tarris I	i sumum i nati	elanon, said is a	esting action	and the
Street Address 1 EXCHANGE PLAC	E							School (K Subchapt Other (i.e. etc.)	er 8 (Othe	r than K- commer	12) cial bu	ilding	s, hon	nes,
City (5) JERSEY CITY								Square Feet	# of	Floors	T	Bldg.	Age	
County (6) HUDSON		W			Code (7) USE ONL			Current Use (P	rior if bein	g demoli	shed)			
Name of Monitoring Firm H Sky Environmental	ired by Building	Owner (8)	ASCI	M No.			of Abatement Co				- 155		
Street Address 140 Boulevard		1972						Address Natchung Av	e					
City, State, Zip Code Mt. Lakes NJ 07046							City, S	tate, Zip Code Orange, NJ						
Project Manager for Monito Leon Shereshevsky	ring Firm			Telepho 973-76	one No. 69-6946	3	Teleph	one No. 243-9872		License	No.			
Start Date (10) 06/06/2012	4 =	Schedul 06/08/2		mpletion	Date (11)		Name	of OSHA Monito					1	
Occupancy Status During A	batement (Che	L ck Only Or	ne)					Address						
Facility Closed/Vacate	d During Entire	Period of A	Abaten	nent			110 (Colin Drive						
Other – Describe:		nal Facility	Hour	S				ate, Zip Code prook NY 117	41					
Scope of Work (Check All T	hat Apply)	Prom												
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Transmiss .	enova emolit				×	Glovebag Pro	e cedure					
		le	Locati	ion				Non-Exempte	d (*) and I	Non-Fria	ble Pro		re emen	t
Location of		N	lormal	ly		Des	cription	of					/pe	
Asbestos-Containing Ma TO BE ABATE In Facility (13)		Mai	d Sole ntenar odial S (12)	nce/		tos Cont thermal surfac	aining M	aterial (ACM) insulation, r, or		ount ecify r LF)	Remova	Repair	Encapsulate	Enclosure
		Yos	No	N/A							1		ate	ē
Ground Floor Co	orridor			X			Pipe		20	If .	X			
Ground Floor Co		x	I	Radiato	r heat	sheld	20	sf	x					
											-			
Name of Registered Waste F Environmental Contract			H	JDEP Wa auler ID I 1101		Cubic \ of Was		11 848 8	Registere					
City, State West Orange NJ						Disposi	al Date	City, State Morgan	e					
Completed by Slawomir Kielczewski		Title Presid	lent			Si	gnature	renski"		Da	ite 5/25/2	2012		
		1.	-				LUC	01.014						

State of NJ

D&S Proj.	#: MS 12-195				cation of As uant to NJA0				小屋匠	肾川	W			
(X)L	1274											-		
Date of Notification				uilding Owr	ner/Operator (2	2)				3.1	900	1		
Agencies Notified	Type Notifica	tion	Street Add		ARDEN			-						
LI EPA	Initial Amended		302 MA	NOR RO	AD			,		TOS GONT ICENSIN				
DEP	Amendment #	-	City, State,		AD				1	IN CAROLLA	U Olimania			
DOL	Emergency				II 07460				The state of		*			
□ DOH	(including	11	Name of Co	WOOD, I	NJ 07430				LTolonhan	- November		-		
☐ DCA	justification) [[& JOAN I	IARDEN				Telephon	e Numbe	31			
				FAC	ILITY INFORM	MATION					1			
Name of facility wh	nere abatement	is taking p	lace (3)	= 0				T	ype of Facility (7		
RICK & JOAN	HARDEN								=	I (K - 12	765			
Street Address	TIMOLIV							-		apter 8 (0			-12)	
302 MANOR I	POAD								Bldgs./	Private/0 Homes,	etc.	ercial		
City (5)	COAD	T Cou	unty (6)			7-2		= 5	Square Feet	# of Floo	ors	В	dg. A	ge
City (5)		1000	inty (O)			13.70	Code (7) use only)	-						
RIDGEWOOI		BI	ERGEN			(State t	ise only)		Current Use (Pr	ior if bei	ng den	nolish	ed)	
Name of Monitorin	g Firm Hired by				ASCM No.	-I Na	ame of Abaten	nent Cor	tractor (9)					
							D & S REST	ORAT	ION. INC.					
Street Address							reet Address							
**************************************			7.0				20 Californi	a Ave.						
City, State, Zip Cod	е					Cit	y, State, Zip C	ode		-				
							Paterson, N	J 07503	3					
Project Manager for	Monitoring Firm	n	P	hone Numb	per	Te	lephone Numi			License		er		
10							973-345-8			(00159			
Start Date (10)		Sche	d. Complet	ion Date (1	1)		ame of OSHA							
06/07/12		06/2	20/12			_	D & S Resto	oration,	Inc.					
Occupancy Status I	During Abatemer						20 California	n A 220m						
Facility closed	d/vacated during	entire per	iod of abate	ement.			y, State, Zip C		ie					
Abatement pe Describe:	erformed outside	of normal	facility hou	rs-		l long	y, Otato, Zip o	oue						
Other-Descrit	oe: NORMAL F	HOURS					Paterson, N	J 07503	}					
Scope of Work (ch	eck all that appl	y)						Full	Containment w	/negative	nress	ure		
≥ 3 sf or >3 If	\boxtimes	Renovati	on					_	-enclosure	mogative	picoo	uic		į.
≥160 sf or ≥2	60 If	Demolitic	on						ebag procedur					
Location of			on normally	used solely	/			∐ Nor	-Exempted (*)	and Non-	-friable	proce		1
asbestos-con		by maint	tenance/cus			ion of asha	stos-containin	ia	Amount		е	e	E n	E
material (acm abated in faci		staff(12)	1	1	material (otoo comamin	9	(Specify S	F or	m	p a	С	n
abated in ide	ty (10)	Yes	No	N/A					LF)		V	i	a p	L
BASEMENT CRAW	L SPACE		X		PIPE INSU	JLATION	1		60 L FT		e			П
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Registered Waste H D & S RESTOR			EP Hauler 506	MILESON A	ubic Yards of V	AN ADDRESS OF THE PROPERTY OF	ame of Regist		dfill SOURCE RE	COVE				
City, State	,			Disposal D			City, State	11, ICE	SOURCE RE	COVE	(1			
PATERSON, N.	J 07503			06/08/1			TULLYTOV	VN. PA						
Completed by (Print		Title			Signature			,		Date				
BOGDAN JOLI		PRESII								05/23	/12	1		
ASB-41		* Do not us	se this form	for asbesto	os licensure ex	cempted ac	tivities.							

D&S Proj. #: MS 12-194

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

								ile il			28	
Date of Notification (1)				ner/Operator (2 S ANIMAL H		E			1.			111
Agencies Notified Type Notified Initial Amended			THER JOH	INS LANE			6,			l ver		
DOL Amendment Emergence		SPAR	, Zip Code				Sant accompanies to show a	er construction	115		A12	
DOH (including	N	ame of C					Telephor	ne Number				
DCA justification	11	PHILI	P DEACO	N			Telephon	ic realitibes				
			FAC	CILITY INFORM	MATION	١			=			
Name of facility where abatemen	t is taking pla	ce (3)					Type of Facility	(4)				-
FATHER JOHNS ANIMAL	HOUSE							ol (K - 12)				
Street Address								apter 8 (Ot (Private/Co			-12)	
50 FATHER JOHNS LANE							Bldgs.	/Homes, et	c.			
City (5)	Coun	ty (6)			Cou	inty Code (7)	Square Feet	# of Floors	à	BI	dg. A	ge
SPARTA	ESS	EV				ite use only)	Current Use (P	rior if being	den	olish	ed)	
Name of Monitoring Firm Hired by				ASCM No.	<u></u>	Name of Abatemer	t Contractor (9)					
				710011110.		-777-m 0.000 - 777-0.000 0.000 0.000	RATION, INC.					
Street Address				-	-	Street Address	idition, inc.		_			
						20 California						
City, State, Zip Code		The state of the s				City, State, Zip Cod			NO. LOW THE			
Project Manager for Monitoring Fire	n	To	hone Numb	nor.		Paterson, NJ (Telephone Number						
		1	,	JEI		973-345-802		License N	Numb 1159	er		
Start Date (10)	Sched.	Complet	tion Date (1	1)	_	Name of OSHA Mo	enitor					
05/29/12	06/08		•	3 4)		D & S Restora	tion, Inc.					
Occupancy Status During Abateme						Street Address 20 California A						
Facility closed/vacated during Abatement performed outside Describe:	g entire perio	d of abat	ement. urs-			City, State, Zip Cod				-		
Other-Describe: NORMAL	HOURS				_	Paterson, NJ (7503					
Scope of Work (check all that app		1				 X 	Full Containment w Mini-enclosure Glovebag procedur Non-Exempted (*)	е			edure	
Location of asbestos-containing	Is location by mainter		used solely stodial	The second secon					R e	R e	Е	Е
material (acm) to be abated in facility (13)	staff(12) Yes	No	N/A	Description material (sbestos-containing	Amount (Specify S LF)	F or	m o v	p a i	n c a p	n c L
1ST FLOOR		X	1	TRANSITE	ECEII	LING PANELS	3950 SQ FT		e	r	_	\vdash
2ND FLOOR		X	1	-		ING PANELS	620 SQ FT			H	H	片
										計	古	盲
Pagistarad Wasta Hawles				<u> </u>								
Registered Waste Hauler D & S RESTORATION, INC.	NJDE 1350	P Hauler)6		ubic Yards of V 25 YDS	vaste	Name of Registere TULLYTOWN	d Landfill , RESOURCE RE	COVERY	7			
City, State PATERSON, NJ 07503			Disposal D 06/01/1:			City, State						
Completed by (Print or Type) BOGDAN JOLDZIC	Title PRESIDE	NT	33/01/1.	Signature		TULLYTOWN	i, FA	Date 05/23/1	2			
ASB-41	* Do not use	this form	for asbesto	s licensure exe	empted	activities.		L	_		-	

Fax: State of NJ

Notification of Asbestos Abatement D&S Proj. 於 MS 12-194 (Pursuant to NJAC 8:60 and 12:120) APPROVED **Bept.** of Health & Senior Services Date of Notification (1) Name of Building Owner/Operator (2) 10 5 /2 3 /1 2 sature) FATHER JOHNS ANIMAL HOUSE Agencies Notified Type Notification Street Address Initial EPA Amended 50 FATHER JOHNS LANE DEP City, State, Zip Code Amendment #: X DOL Emergency SPARTA, NJ DOH (Including Name of Contact Telephone Number justification) DCA PHILIP DEACON Cancellation FACILITY INFORMATION ASBESTOS CONTROL & Name of facility where abatement is taking place (3) Type of Facility (4) School (K-12) FATHER JOHNS ANIMAL HOUSE Subchapter 8 (Other than K-12) Street Address Other (Private/Commercial Bldgs./Homes, etc. 50 FATHER JOHNS LANE Square Feet # of Floors Bidg. Age City (5) County (6) County Code (7) (State use only) Current Use (Prior if heing damnished) SPARTA Name of Monitoring Firm Hired by Bldg. Owner (9) Name of Abatement Contractor (9) ABOM No. D & S RESTORATION, INC. Street Address Street Address 20 California Ave. City, State, Zip Code City, State, Zip Code Paterson, NJ 07503 Project Manager for Monitoring Firm Phone Number Telephone Number License Number 973-345-8020 00159 Name of OSHA Monitor Start Date (10) Schert, Completion Date (11) D & S Restoration, Inc. 05/29/12 06/08/12 Street Address Occupancy Status During Abatement (Check only one) 20 California Avenue Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Uther-Dascribe: NORMAL HOURS Paterson, NJ 07503 Scope of Work (check all that apply) Full Containment w/negative pressure >3 af or >3 If X Renovation Mini-enclosure Glovebag procedure 2160 at or ≥260 tr Demolition Non-Exempted (*) and Non-friable procedure Is location normally used solely Location of by maintenance/custodial 5 asbestos-containing n Description of asbestos-containing Amount 9詞作(12) n material (acm) to be m (Specify SF or LF) p C material (ACM) abated in facility (13) 0 8 я Yes No N/A p 1ST FLOOR TRANSITE CEILING PANELS 3950 SQ FT \times 2ND FLOOR TRANSITE CEILING PANELS 620 SO FT Registered Waste Haule NUDEP Hauler IDH Cubic Yards of Waste Name of Registered Landfill D&S RESTORATION, INC. 13506 25 YDS TULLYTOWN, RESOURCE RECOVERY City, State Disposal Date City, State PATERSON, NJ 07503 06/01/12 TULLYTOWN, PA Completed by (Print or Type) Signature Title Date BOGDAN JOLDZIC PRESIDENT

Do not use this form for asbestos ilcensure exempted activities.

ASB-41

05/23/12

State of NJ Notification of Asbestos Abatement

D&S Proj. #: MS 12-196			(Pursua	ant to NJAC	8:60	and 12:120)	-	NE		W	臣	n	
004275							1	U	12.0 14	h. f			
Date of Notification (1)	Na	me of Bu	ilding Owne	er/Operator (2)			1			V1/17/		11 /	
0 5 / 2 3 / 1 2		LLAN	ARK					U U MA	Y 3 1			hamad	
Agencies Notified Type Notificat	ion Str	eet Addre	ess				70001					<u> </u>	_
		27 HAI	RPER STR	REET			9		STOS COL		Š		
Amendment #:			Zip Code				- 1	and Principles and Association of the	1 (1) (1) (1)	(# (C)			
DOL Emergency]	HIGHL	AND PAR	K, NJ				4 , 44 ,					
DOH (including justification)	100	ne of Co			-			Telephone	Numbe	r			
DCA Cancellation		ALLAN	ARK										
			FACII	LITY INFORMA	ATION				:				
Name of facility where abatement is	s taking place	e (3)				The Company of the Co	Тт	ype of Facility (4	1)				
		, ,							(K - 12)				
ALLAN ARK Street Address							4		pter 8 (C			-12)	
100.00									Private/C Homes, e		rcial		
127 HARPER STREET							_ 5	Square Feet	# of Floo	rs	В	dg. Ag	ge
City (5)	County	y (6)				nty Code (7)	1 -						
HIGHLAND PARK	MID	DLESE	X		(Sta	te use only)	11'	Current Use (Pr	ior if beir	ig dem	olish	ed)	
Name of Monitoring Firm Hired by I				ASCM No.	\neg	Name of Abateme	ent Cor	tractor (9)					—
						D & S RESTO	ORAT	ION, INC.					
Street Address						Street Address			-				
						20 California	Ave.						
City, State, Zip Code						City, State, Zip Co	ode		- 200				
						Paterson, NJ		3					
Project Manager for Monitoring Firm		Ph	none Numbe	er	13	Telephone Number			License		er		
					_	973-345-80 Name of OSHA N				0159			
Start Date (10)	Sched.	Completi	on Date (11)		D & S Restor		Inc					
06/06/12	06/20/	12				Street Address	ration,	me.			_		
Occupancy Status During Abatemer						20 California	Aven	ie					
Facility closed/vacated during						City, State, Zip Co	ode				State 1		
Abatement performed outside Describe:		cility nou	rs-		_	2000 175							
Other-Describe: NORMAL II					-	Paterson, NJ	07503	3					
Scope of Work (check all that apply							=	Containment w	negative	press	ure		
∑ > <u>3</u> sf or > <u>3</u> lf	Renovation							i-enclosure rebag procedure	9				
≥160 sf or ≥260 lf	Demolition							-Exempted (*)		friable	proc	edure	
Location of	Is location by mainten		used solely							R	R	Е	E
asbestos-containing material (acm) to be	staff(12)	<u> </u>		Description material (sbestos-containing	3	Amount (Specify Si	For	m	p	n C	n
abated in facility (13)	Yes	No	N/A	I i i ateriai (i	ACIVI)			LF)		o v	a	a p	L
BASEMENT		$\overline{}$	1	PIPE INSU	LATI	ON		120 L FT		e	r		
BASEMENT CRAWL SPACE		\Rightarrow		PIPE INSU				6 L FT			片	H	ዙ
Z. I. Z. I. Z. Z. I. Z.		\rightarrow								H	H	H	計
										+	H	H	一
	F									Ħ	Ħ	F	亓
Registered Waste Hauler		Hauler	(2001) 보다 :	ubic Yards of V	Vaste	Name of Registe				-1	-		
D & S RESTORATION, INC.	1350	6		YDS		TULLYTOW	N, RE	SOURCE RE	COVER	RY			
City, State PATERSON, NJ 07503			Disposal D: 06/21/12			City, State TULLYTOW	/N DA						
Completed by (Print or Type)	Title			Signature		TOLLTION	11,17		Date				
BOGDAN JOLDZIC	PRESIDE	NT	- 54						05/23/	/12			
ASR-41	Do not use	this form	for asbesto	s licensure exe	empted	d activities.	20. 000000						

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

D&S Proj. #: MS 12-197

ASB-41

	(1001Ca)			(i disc	Jan to NoAt	0.0	0 and 12.120)	me	F	₩			
Date of Notification					ner/Operator (2)			Y 3 1	201)		
Agencies Notified EPA	Type Notificat	tion	Street Add	1								i device	
DEP	Amended Amendment #:	1		, Zip Code	H STREET			4565	SIUS CON	TROL	Ü		1
□ DOL	Emergency	$-\parallel$		PECT PAR	K NI			The state of the s	+ -:		deren, roue		
☑ DOH	(including	IN	ame of C		113			Telephon	e Numbe		-		
☐ DCA	justification) Cancellation		COLL	EEN HOL	LISTER								
1.				FAC	ILITY INFORM	IATIO	V						
Name of facility wh	nere abatement i	s taking pla	ace (3)		40/	more de la constante de la con		Type of Facility (-			
COLLEEN HO	LLISTER							=	l (K - 12)				
Street Address	EDIOTEIC								apter 8 (C			12)	
114 NORTH 1	2TH CTDEET							Bldgs./	Private/C Homes, e	tc.	ercial		
City (5)	31H SIKEEI		nty (6)			T 0-		Square Feet	# of Floor	S	В	ldg. A	ge
ony (o)		000	ity (0)				unty Code (7) ate use only)	Current Use (P	rior if hoin	a don	olich	od)	
PROSPECT P.			SSAIC					Odirent Ose (F	ioi ii beiii	y uen	IOHSH	euj	
Name of Monitorin	g Firm Hired by	Bld g . Owne	er (8)		ASCM No.		Name of Abatement C	ontractor (9)					
01-1011					-		D & S RESTORA	TION, INC.					
Street Address							Street Address						
City, State, Zip Cod	e						20 California Av City, State, Zip Code	e.					
							Paterson, NJ 075	503					
Project Manager for	Monitoring Firm		T	Phone Numb	er	-	Telephone Number	703	License	Numb	er		
							973-345-8020		Transfer and the State of the S	0159			
Start Date (10)		Sched	. Comple	tion Date (1	1)	-	Name of OSHA Monit						
06/05/12		06/20)/12				D & S Restoration	on, Inc.					
Occupancy Status I	During Abatemer		TATO CONTRACTOR		*****	-	20 California Ave	enne					
Facility closed Abatement per Describe:	d/vacated during erformed outside						City, State, Zip Code	and					
Other-Describ	be: NORMAL H	OURS					Paterson, NJ 075	503					
Scope of Work (check ≥ 3 sf or ≥ 3 ff ≥ 160 sf or ≥ 2		() Renovation					□ M ⊠ G	ull Containment w Mini-enclosure Blovebag procedur	e	•			
Location of				y used solely	/			Von-Exempted (*)	and Non-1	R	Proc	Edure	T
asbestos-con material (acm		by mainte staff(12)	nance/cu	ıstodial			sbestos-containing	Amount	_	e m	e	n.	E n
abated in faci		Yes	No	N/A	material (ACM)		(Specify S LF)	F or	o v e	a	c a p	C L
BASEMENT			X		PIPE INSU	LAT	ION	124 L FT		×			
Registered Waste H	auler	[NUD	P Haule	ID# 10	ubic Yards of V	Masta	Nome of Desisters 11	andfill					
D & S RESTOR.		135			UDIC YARDS OF V	vasie	Name of Registered I TULLYTOWN, R		COVER	Y			
City, State	I 07502			Disposal D			City, State						
PATERSON, N. Completed by (Print		T:# -		06/05/1			TULLYTOWN, I	PA PA	15				
BOGDAN JOLI		Title PRESID	ENT		Signature				Date 05/23/	12			
ASB-41	*	Do not use	this forn	n for asbesto	s licensure exe	empte	d activities.		1			-	

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

Date of Notification (1)	5.25.12		1	Name of E	Building O		perator (2)		则	15. Up					
Agencies Notified	Type Notification		+	Street Add	iress			Λ:-		MA	Y 3 1	2012		U	
□ EPA □ DEP	Initial Amended		0	City, State	, Zip Cod	е	UNELE	ANE			Feros CON	ITROI	8		\forall
⊠ DOL	Amendment Emergency (i		٠Ļ		UER	BEY	1 Con	IN	10	73/0	STOS CON	NG.	o.		1
☑ DOH	justification) □ Cancellation		1	Name of 0		20 -	TORRE	=	18/26/	Helepi	none Num	per	۵,		
B DOA	La Caricenatori			4 1 1 1 1 1 1 1 1	ITY INFO		ON		a some of						
Name of Facility Where	Abatement is Taking	Place (3)			1	Acres (No. 100 Acres)	Τ	Type of Fa	acility (4))					
TORRES Street Address	· (\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \							☐ School ☐ Subch ☐ Other	apter 8	(Other t	han K-12) ommercial	buildi	nas. h	omes	š.
Control of the Contro	NELE AVE		-					etc.) Square Fe		# of F			dg. Ag		
City (5)	CTTV						1	30k		#017		l bi	i)		
County (6)				County Co				Current U	se (Prio	r if being	demolishe	ed)			
HUDSON				(STATE US						MAIN	-				
Name of Monitoring Fire	m Hired by Building (Owner (8)		ASCN	/I No.			f Abateme C Contrac		ractor (9)	1				
Street Address		M. Ser O. BERTELLING ST. BERTELLING ST. BERTELLING ST. BERTELLING ST. BERTELLING ST. BERTELLING ST. BERTELLING					Street A	ddress well Road	le .			MAD CHEST	11		
City, State, Zip Code								ate, Zip Co							
Project Manager for Mo	oject Manager for Monitoring Firm				one No.		Telepho	ne No. 62-5841		1	icense No 00156).	***********		
Start Date (10) 6.6					ate (11)		1	f OSHA N ja Enviroi		Services	s Inc.				
Occupancy Status Dur	ing Abatement (Che	ck Only One)	0·12			Street A	ddress	at .						
☐ Abatement Perform ☐ Other - Describe:							City, Sta	ate, Zip C nsack, NJ	ode						
Scope of Work (Check	All That Apply)														
10 ≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf	2.	-1271(231) FALSO	novat noliti				N N	Mini-End Gloveba	closure a Proce	edure	egative Pro				
		T		. 1		-	0	NON-EX	mpted	() and iv	IOII-FIIADIE	T		emen	t
Locati	on of	No	.ocati ormal	lly		D	escription o	of	1			_	T	/pe	
Asbestos-Containir TO BE A In Fa (1:	BATED	Custo	itena	nce/ Staff?		therma surf	ontaining M al systems facing, VAT miscellane	insulation , or		(S	nount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A				eners were				<u></u>		_	_
basen	nent			X	PI	De	insula	thon		25	DLF	X	_	_	_
			*		4							-			_
												_	_	_	L
						10:	· · · ·			Device	-d1 100				
Name of Registered W Rovic Transport	aste Hauler		ŀ	JDEP W lauler ID 20785		of W	c Yards aste			7.5K	ed Landfill m Landfill	Согр.			
City, State, Zip Code Riverdale, NJ 07457	y, State, Zip Code					Disp	osal Date			e, Zip Co em, PA 1					
Completed by R. McDonald		Title Preside	nt				Signature		a. m	· Jan	LA DE	ate 5	25	12	

Date of Notification (1)	-		Name	f Dulldian O			ERFI	ΠΠ	2	5	7
5.25.12			Name o	f Building Owner/		(2)		W			
Agencies Notified Type Notification			Street A	36 Thir	dA	ve III	MAY 31	2012			
☐ DEP ☐ Amended Amendmer ☐ Emergency				te, Zip Code TOWTMO	rne	NUDI	1500 CONT	DOL 0			
☑ DOH justification ☐ DCA ☐ Cancellation			Name o	Contact,	011	. 9,	Telephone No	mher			
				LITY INFORMAT	ION	1	<u></u>				
Name of Facility Where Abatement is Takin	g Place (3))				Type of Facility					
Street Address 136 Third AV	l					☑ Other (i.e. p	12) · 8 (Other than K-1 private & commerc	2) ial buile	dings,	home	es,
City (5) Hawthorne						etc.) Square Feet	# of Floors	T	Bldg.		
County (6)		1	County (Code (7)		Current Use (Pr	jor if being demolisi	ned)	10	02	in the same of the
Name of Monitoring Firm Hired by Building	Owner (8)			M No.	Name	of Abatement Co	entral				
Street Address					A. M	AC Contracting In	C			220	
						Address owell Road					Table Committee
City, State, Zip Code						tate, Zip Code Rock, NJ 07452	-				-
Project Manager for Monitoring Firm			Telepi	hone No.	Teleph	one No. 262-5841	License N 00156	lo.		-	
Start Date (10) 6.6.12	Schedul	ed Cor	mpletion [Date (11)		of OSHA Monitor					
Occupancy Status During Abatement (Che Facility Closed/Vacated During Entire Abatement Performed Outside of Norm Other - Describe:	Period of A	hatem	nent		Street 280 H City, S	Address luyer Street tate, Zip Code					
Scope of Work (Check All That Apply)					Hacke	ensack, NJ 07606					
≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf		enova emoliti		32	23, 121	Mini-Enclosure Glovebag Proc	nt with Negative P edure (*) and Non-Friabl				
		Locat					7 4114 11011 11001	T	Abat	emen	t
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use	Norma ed Sole aintena todial ((12)	ely by nce/ Staff?	Asbestos Cor (i.e. therma surfa	escription ntaining M Il systems acing, VA miscellan	laterial (ACM) insulation, T, or	Amount (Specify SF or LF)	Remova	Repair	pe Encapsulate	Enclosure
	Yes	No	N/A			5545)		/al	Ť	ıl ate	ura
ignsement			X	pine	WEN	lation	50 LF	X			
· ·	-			11	************						
	+	_	+	-,							
Name of Registered Waste Hauler		IN	JDEP Wa	este Cubic	Yards	Name of	Registered Landfill		<u> </u>		
Rovic Transport		H	lauler ID N 20785				Bethlehem Landfill	Corp.			
City, State, Zip Code Riverdale, NJ 07457		and the same	*************	1	sal Date	City, State	e, Zip Code m, PA 18015		-		
Completed by R. McDonald	Title Preside	ent		THE RESERVE OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAME	Signature	Lela.m		te L	5.96	5.10)

no Ch	rck			CATIO	N OF ASE	ew Jersey BESTOS ABATE C 8:60 and 5:16	33000000000000000000000000000000000000	ECE		\mathbb{V}	E	n
Date of Notification (1)	/24/12			Name	e of Buildin	g Owner/Operator La	(2) kehurst Nava	BaseMAY 3	1 2	012	1	U)
Agencies Notified	Type Notif	ication	THE STATE	Stree	et Address	era galar e e	Route 547	Marie America 2003	2000	18 NO. 18	* 1	_
EPA DEP DOL	Initial Amend			City,	State, Zip 0			LICENS	I NG)l &		
⊠ DOH	☐ Emerge	ency (includi ation)	ng	Name	e of Contac		kehurst, NJ	Telephone Numb	er			
□ DCA	Cancell	lation				Sudie Mitta						
Name of Facility Where	Ahatement is	Taking Pla	ce (3)	FA	CILITY INF	FORMATION	Type of Facility	(4)				
		hurst Na		ase			School (K-1	2)				
Street Address		Route 5	47					8 (Other than K-12 private & commercia		dings		
City (5)		Lakehu					Square Feet 400,000	# of Floors	В	ldg. A	ge 0	
County (6)		Lakenu	131	Cou	nty Code (7) (STATE		rior if being demolis	l- hed)		0	-
Name of Monitoring Fin	Ocean	ilding Owne	r [ASCM	ONLY)	Name of Abatem	nent Contractor (9	naval base				_
(8)	MECS	many Owne	.	AGCIVI	140.	The state of the s	and the state of t	mental Service	s, Iı	ıc.		
Street Address	P.O. Bo	ox 341		. Jesus		Street Address	PO F	30x 322				
City, State, Zip Code			٠,			City, State, Zip C	Code					=
Project Manager for Mo	Crosswick,	NJ 0851		ephone	No.	Telephone No.	Allentow	n, NJ 08501				_
William W		Jr.			8-4070	(609) 25	59-9688		049	3		
Start Date (10)		Scheduled			ate (11)	Name of OSHA		ECS				
6/6/12 Occupancy Status Dur	ing Abatemen	t (Check on	6/29/ ly one)	12		Street Address	171	EC3			_	-
☐ Facility Closed/Vaca								Box 341				
Other - Describe:			iity Hot	ırs	105	City, State, Zip C		k, NJ 08515			N.	
Scope of Work (Check	all that apply)		(1			☐ Full Cor	ntainment with Ne	gative Pressure				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demoliti	tion on		☐ Mini-End Gloveba	closure ag Procedure	on-Friable Procedur	e			
			Locati Normall	y		_00.00			F	Nbate Typ		
Location Asbestos-Containing	Material (ACM	1) Ma	ed Sole aintenar Custodi	ice/	Asbest	Description of os Containing Mat	erial (ACM)	Amount	R	D	m	ш
TO BE ABA			Staff?		(i.e.,	thermal systems i surfacing, VAT,	or	(Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure
(13)		Yes	Ť	N/A		other miscellaned	ous)		<u>a</u>		ulate	re
Hanger #5 - va	rious area	S	×			VAT		400 SF	×			
Hanger #5 - va	rious areas	S	X			pipe insulat	ion	990 LF	×			
Name of Registered Wa	aste Hauler		1	JDEP \	Naste I	Cubic Yards	Name of Regi	stered Landfill				_
E and the second	ale Dispos	al		lauler ID		of Waste 30 CU		R.R.F., Inc. L	andf	ill		
City, State	Hamilton,	NI 08610)			Disposal Date 6/29/12	City, State	Tullutown	۸ م			
Completed By		Title				Signaju	1-4	Tullytown, I			-	=
Mahlon E. St	evens	<u>F</u>	rojec	t Man	ager	_////			5/24	/12		

STEVENS ENVIRONMENTOL SCRUCES FIX CHECK # 04806

Date of Notification (1) 5/24/12			Na	me of Build	ing Owner/Oper TI	ator (2) ne Lawrencev	DEC			/ [5
Agencies Notified EPA DEP DOL DOL	Type Notificat Initial Amended Amendmen Emergency	nt #	ding	Cit	eet Address y, State, Zip	Route 206		NJ 08648		-20	12	
DCA DCA	justificatio Cancellatio			Na	me of Conta Ja	ct imes Kesilm	nan	Telephê Nû	िष्टि	VTRO	2.	-
and the second state				F		FORMATION		The second contract of	ole e	er'i ve		
Name of Facility When					5- V-X-1-03-150		Type of Fac					*
Street Address	Kirby	Art	Cent	er			School (F	(-12)	10)	1 7		
City (5)	Route 20	5 & N	<u> Iain</u>	Stree	t		Other (i.e homes, e		rcial b		526777	
Oity (5)	Law	rence	eville				Square Feet 5000	# of Floors		Bldg	Age 40	
County (6)				Co	ounty Code ((7) (STATE		(Prior if being demo)	40	=
Name of Monitoring Fir	Mercer	a Own	or.		M No.	I Name of Abot	tement Contractor	classroom	IS			
/0\	Environment		-1	0.000	0112			nmental Servi	cec .	Inc		
Street Address	V2-00 20 20 20 20 20 20 20 20 20 20 20 20 2	2004	_			Street Addres		initental Bervie	ccs,	inc.		_
City State 7: Only	344 W. State	Stree	t					Box 322				
City, State, Zip Code	Trenton, NJ (08618	3			City, State, Zip		wn, NJ 08501				
Project Manager for Mo	onitoring Firm			lephon	e No.	Telephone No		License No.			_	
	Veisgarber Jr.		_		56-8101		259-9688		0049)3		
Start Date (10) 6/7/12	Sch	eduled			ate (11)	Name of OSH		MECC				
Occupancy Status Duri	ing Abatement (Ch	eck on	6/11 ly one)	/12		Street Addres		MECS				_
Facility Closed/Vaca	ated During Entire F	Period o	of Abat	ement			P.O.	. Box 341				
Abatement Performe Other - Describe:	7AM -4PM	al Faci	lity Ho	urs		City, State, Zip	EW 13	ck, NJ 08515				
Scope of Work (Check	all that apply)	1.0				M Full C			-			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demoliti			☐ Mini-E	nclosure bag Procedure	legative Pressure	ıro			
			Locati				, , , , , , , , , , , , , , , , , , ,	T THE SECULO		Abate	ment	t
Location Ashastas Containing		Use	d Sole	ly by		Description				Ту	pe	
Asbestos-Containing I TO BE ABA IN Facility (13)	TED	0	intenar Sustodi Staff? (12)	al	(i.e., t	os Containing Ma hermal systems surfacing, VAT other miscelland	insulation,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Licosule
	72.70 Table 1	Yes	No	N/A							late	0
basement mecha		×				tank insula	tion	180 SF	×			
basement mecha	nical room	X				asbestos fitt	ings	60 fittings	×			
				9								
ame of Registered Was	ste Hauler		IN	JDEP V	Vaste I	Cubic Yards	Name of Pos	istered Landfill				
Stevens Environn		s, Inc	1	auler ID	No.	of Waste 2 CU	Traine of Reg	T.R.R.F., In				
ity, State	Allentown, N		-L-	102		Disposal Date	Otty, State			-		_
ompleted By	Title					Signature	11/	Tullytown, I	A	_		=
Mahlon E. Ste	vens	Pr	oject	Man	ager	MV	1'		5/24	/12		

STATE OF NEW JERSEY

NOTIFICATION OF ASBESTOS ABATEMENT

			(P	ursuant to N.J.A.	C. 8:60 AND 12:	120)	Company of the compan		- Y-100/40		MF -	
Date of Notification (1)	51014		ar Mari		Name of Build	ling Owner	Operator (2)	GE	11		M	e de la constantion de la cons
	5/3/1	2		1-9-7-17	William Pa		11111	(3) (3)	U 1.			2.
Agencies Notified	14-7-7-1	Notification	Туре		Street Addres		HAIF				+ 111	
X EPA		Initial			300 Pompt	on Road	ШШ. Л	MAY 3	1 20)12	1	
DEP .		Amende	ed #	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	City, State, Zi			·		==		
X DOL			ncy (includ	lina	Wayne, NJ		1	BESTOS C	PONTO			
▼ DOH		justifical		9	TOTAL TOTAL		, Ac	TILEN		10		
DCA DCA		Cancella	ation		Name of Cont John Urinyi		· Sale Sale .	ALIAL NII	mhar	-		
				FACILITY IN	FORMATION '			-				
Name of Facility Where Abai		aking Place (3	<u>s)</u>		Type of Facilit	ty (4)					4124000	1000
William Paterson University	ersity				School (K-12)						
Street Address					Subchap	ter 8 (Other	than K-12)					
300 Pompton Road		220		34 4. ***********************************			•					
City (5)	County (6)		County C		Other (i. homes,	e., private 8	& commercial	buildings,				
Wayne P	assaic		(State U	se Only)	nomes,	Cto.,						
Name of Monitoring Firm Him	ed by Bldg.	Owner (8)	ASCM N	lo.	Name of Contr	actor (9)						
TTI Environmental			00003	*	MTM Metro	Corpora	tion					
Street Address					Street Addres	S						
1253 N.Church St			•	18	135-137 Mc	Bride Av	е					
City, State, Zip Code					City State, Zip	Code						
Moorestown, NJ 08057					Paterson, N					N=3		
Project Manager for Monitori	ng Firm	Telephone I	Number	•	Telephone Nu	mber		License	e Numb	er		
Jeff Seaman		856.840.8	800		973-742-50	30		00809)			
Scheduled Start Date (10)		Scheduled (Completion	Date (11)	Name of OSH	A Monitor		I				
5/29/12		6/08/2012			MTM Metro	Corpora	tion					14
Occupancy Status During Ab	atement (C	heck only one	<u>e)</u>	-	Street Address	S			•		1	
	•				135-137 M	cBride Av	re .					
Facility Closed/Vacated	During En	tire Period of	Abatement		City, State, Zip	Code		•				
Abatement Performed 0	Outside of N	Normal Facility	Hours	*								
		will be occup	oied		Paterson, N	IJ 07501			1 8			
Source of Work (Check all th	at apply)											
> 3 sf or > 3 lf	- L	Renovation		∑ Full	Containment wi	th Negative	Pressure	Min	ii-Enclo	sure		
× > 160 sf or > 260 lf	×	Demolition		. Nor	n-Exempted(*) &	Non-Friable	e Procedure	Glov	vebag l	Procedur	re	
Location of Asbestos-	Is Loca	tion Normally	Used	Description of	ACM (i.e.	Amount (Specify SF or	LF)	Abate	ment Typ	oe .	
Containing Material (ACM) in Facility (13)	Solely Staff?	by Maint./Cus	todial	thermal system				* 1				
	YES	NO NO	N/A	surfacing, VAT miscell.)	, or other				Rem.	Rep.	Encap	Enclose
Boiler Room .	X			Tubular Boiler Insul	ation	200 SF			X	T	X	T
	-	-										
										-	-	
Name of Reg. Waste Hauler		NJDEP Was	te Hauler I	D#	Cubic Yards o	f Waste	***************************************	Name o		Landfill	1	
MTM Metro Corporation		26552	•		15			Tullytow	n			
City, State -							Disp. Date			City, Stat	e	
Paterson, NJ							6/8/2012		Т	ullytown,	, PA	
Completed by (Print or Type)	• 1	Title			Signature			Date				
Elizabeth Maslarkov		Business Adm	inistrator		Elizabeth	Masla	rkov	5/3/12				
										-		

STATE OF NEW JERSEY NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to N.J.A.C. 8:60 AND 12:120) Name of Building Owner/Ope Date of Notification (1) 5/25/12 William Paterson University Street Address Notification Typè Agencies Notified 2012 300 Pompton Road EPA X Initial DEP X City, State, Zip Code ASBESTOS CONTROL & DOL X Wayne, NJ 07470 **Emergency** (including LICENSING DOH justification) Name of Contact ...Tel. Number Cancellation DCA John Urinyi FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) William Paterson University School (K-12) Street Address Subchapter 8 (Other than K-12) 300 Pompton Road Other (i.e., private & commercial buildings, County Code (7) City (5) County (6) homes, etc.) (State Use Only) Wayne Passaic Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Contractor (9) TTI Environmental 00003 MTM Metro Corporation Street Address Street Address 135-137 McBride Ave 1253 N.Church St City, State, Zip Code City State, ZipCode Moorestown, NJ 08057 Paterson, NJ 07501 Telephone Number License Number Project Manager for Monitoring Firm Telephone Number 973-742-5030 00809 Jeff Seaman 856.840.8800 Scheduled Start Date (1,0) Scheduled Completion Date (11) Name of OSHA Monitor MTM Metro Corporation 6/04/12 6/08/2012 Occupancy Status During Abatement (Check only one) Street Address 135-137 McBride Ave Facility Closed/Vacated During Entire Period of Abatement City, State, Zip Code Abatement Performed Outside of Normal Facility Hours Paterson, NJ 07501 adjanced office will be occupied Other-Describe: Source of Work (Check all that apply) Mini-Enclosure | Full Containment with Negative Pressure > 3 sf or > 3 lf Renovation Glovebag Procedure > 160 sf or > 260 lf Demolition Non-Exempted(*) & Non-Friable Procedure Description of ACM (i.e. Amount (Specify SF or LF) Abatement Type Location of Asbestos-Is Location Normally Used Solely by Maint./Custodial thermal systems insulation, Containing Material (ACM) in Facility (13) Staff? (12) surfacing, VAT, or other Rep. Encap Enclose Rem NO N/A miscell.) YES Boiler Room X X Tubular Boiler Insulation X 200 SF Name of Reg. Waste Hauler NJDEP Waste Hauler ID # Cubic Yards of Waste Name of Reg. Landfill Tullytown MTM Metro Corporation 26552 15 Disp. Date City, State City, State 7/8/2012 Tullytown, PA Paterson, NJ Date Completed by (Print or Type) Title Elizabeth Maslarkov 5/25/12 Elizabeth Maslarkov Business Administrator

Ck# 2287

Date of Notification (1)	24/	12				of Buildin	g Owner/Operator (iversity	2)		\//- [<u>-</u>	G F	21	
□ EPA [ype Notific					Address Road 1	Bldg 4086			W E			
☑ DHSS	Amende Amendn Emerge	nent#		- g	Pis		NJ 08854		MAY 3 1 2			1	
(NJAC 5:23-8)	justificat Cancella	tion)				of Contac			Telephone Num	ber			
1 2 2 2 2 3 3	_ Cancella	alion					mith, CHMM			<u> </u>	1		16
Mana of Facility Miles of Ab		Table	DI	(0)	FA	CILITY IN	IFORMATION	T-40% (A)	(1)	Tar Carlot			
Name of Facility Where Ab Camden Science Bui			g Place	= (3)				Type of Facility ☐ School (K-12) ☐ Subchapter 8)	2 A	0004 5 H	
Street Address 315 Penn Street								Other (i.e., p	rivate and comme	rcial bu	uilding	js,	
								homes, etc.)		I DI	-l- A	· .	
City (5) Camden								Square Feet	# of Floors	1	dg. A 60+	ge	
County (6)		-	-		Cour	ty Code (7)(STATE USE ONLY)	Current Lies (Pr	ior if being demoli		00*	_	
Camden				- I				ACADEMIC		sileu)			
Name of Monitoring Firm H ATC	irea by Bui	iaing (Jwner	(8)	ASCM 0009		Name of Abateme						
Street Address					000	98		VIRONMENTA	L, INC.				
3 Terri Lane							Street Address 1123 BEAVE	PETPEET					
City, State, Zip Code							City, State, Zip Co			12-2-20			
Burlington, NJ 08016							BRISTOL, PA						
Project Manager for Monito				Tele	phone	No	Telephone No.	13007	License No.				
Brian Kearney	illig i illii					-8800	215-788-6040	r e	00509				
Start Date (10)		Sched	fuled C			te (11)	Name of OSHA M		1 00000				_
6 / 8 /	107863			11		AND THE PARTY OF T		VIRONMENTA	L, INC.				
Occupancy Status During A			72		ment		Street Address 1123 BEAVE	DOTDEET		*		1	
Abatement Performed C	utside of N	Vormal	Facilit	y Hour	s - Des	cribe	City, State, Zip Co	ode					-
Scope of Work (Check all ti							BRISTOL, PA	19007					
 Scope of Work (Check all the Scope of Work (Check all the Scope of Sco	іат арріу)		_	enovati emolitio			☐ Mini-End	g Procedure	gative Pressure n-Friable Procedu	re			
			100	Locat						Ab	atem	ent T	уре
Location of Asbestos-Containing Ma TO BE ABATI IN Facility (13)	aterial (ACI	M)	Use Ma	Normal ed Sole aintena todial ((12)	ly by nce/		Description of estos Containing Ma e., thermal systems surfacing, VAT other miscellane	terial (ACM) insulation, , or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
			Yes	No	N/A								
ROOM 208						TSI			20 LF				
ROOM 208				□ •		ACM C	EILING TILES		130 SF				
		•											
Name of Registered Waste SERVICE TRANSPOR		P, IN	D.	- L 1873	JDEP V	O No.	Cubic Yards of Waste	Name of Regis					
City, State					20990		Disposal Date	City, State	URG, OH 4468	R			
NEW CASTLE, DE 19	720							WALLED	0110, 011 1100	•			
	STATE	Title		al Man		N	Signature	0		ate /2	4/	12	

State of New Jersey 1205-4487 Check #4129
NOTIFICATION OF ASBESTOS ABATEMENT FOR THE PROPERTY OF THE PROPERTY

no check (Pi	ursuant to	N.J.A.	<u>C.</u> 8:60	and	12:12	0)		fi fil	IS		Management of the second
Date of Notification (1) 5/21/12		of Building			or (2)		MAY 3	1 201	2		A STATE OF THE STA
Agencies Notified Type Notification EPA DEP Initial Amended #1	Street A 2 Regu City, St Turne	Address ulus Driv ate & Zip (rsville, N	e Code				ACCEPTAGE LICEN	CONTROL ISING	2		0.000
☑ DOH ☐ Emergency ☐ DCA ☐ Cancellation		of Contact e Lodish				# 180000		Telepho	ne l	Numb	er
	FAC	ILITY INF	ORMATI	ON							
Name of Facility Where Abatement is Taking P Kennedy Memorial Hospital Street Address	lace (3)	s. 1 22		chool ((K-12)	ther than K-	.12)				1000
18 East Laurel Rd.				ther (i.e	e. private	e & commer	cial buildin	gs, hom 3ldg. Ag		etc.)	_
City (5) County (6)	County Co	ode (7)		TOT CHARGE				7149.719			
Stratford Camden			Hospi	ital		peing demol					
Name of Monitoring Firm Hired by Building Own Criterion Laboratories, Inc.	ner (8)	ASCM No	Abate	Tech,	, Inc.	Contractor (9)				
Street Address 3370 Progress Drive			Street PO Bo		SS						
City, State & Zip Code Bensalem, PA 19020			City, S	tate &	Zip Cod						
Project Manager for Monitoring Firm Michael Panepresso	Telephone N 215-244-13	300	Teleph 609-20		umber 07		License N	lumber 0052	29		
Scheduled Start Date (10) Scheduled Con 5/29/12	6/12/12	(11)	Name EMSL		⊣A Monit ytical	tor					
Occupancy Status During Abatement (Check or Facility Closed/Vacated During Entire P Abatement Performed Outside of Norma Describe: 12 am to 8 am Working Monday 6/4 and Monda Facility Occupied During Abatement	eriod of Abate al Hours – Tuesday 5/		1000000	addor tate & 2	7.70						
Scope of Work (Check all that apply)			Side 36								
≥3 sf or ≥3 lf≥160 sf ≥260 lf	Renor				☐ N	ull Containn lini-Enclosu llove Bag Pi lon-Exempte	re rocedures				
Location of	Is Location	1000		cription			Amount	Aba	atem	ent T	уре
Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13)	Normally Us Solely by Maintenance Custodial Sta (12) Yes No N	e or	Asbesto Mate (i.e., the insulation, or other n	rial (A0 rmal sy surfac	CM) ystems cing, VAT		(Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
Elevator Cars			Floorin	ng Ma	terial		144 SF			\Box	
		HI						ᆜᆜ	닏	H	Щ
***	吕님님	H		10000					님	H	님
Name of Registered Waste Hauler AbateTech, Inc.	Haul	EP Waste er ID No.	of Waste	rds		of Registere	d Landfill			1	
City, State Lumberton, NJ	1	18750	Disposal I		City, St						
Completed By (Print or Type) Gwen Trumbetti	Title Opps	s. Coord.	6/12/ Signature		t ullyte	own, PA		Date 5/21	/12	D.Y.	

State of New Jersey 1205-4488 Check #4168 NOTIFICATION OF ASBESTOS ABATEMENT

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

Date of Notification	(1) 5/22/12							Owner / Operaton h Facilities	or (2)					
Agencies Notified EPA	Type Notific	ation		Str	eet	Addr		. ,		Mr. 31	5.11-5-	1 6.0		
DEP	☐ Initia						& Zip (POSTEROW NAME		1	-	
□ DOL	1 - 2 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	nded#						J 08012		ASBESTOS CONT			THE STATE OF THE S	
The state of the s							ontact		Lorenza		Telepho	ne N	lumb	er
□ DCA	L Can	cellation		Ge	org	ge L	odish		2 3 2					
					FAC	ILIT	Y INF	ORMATION						
			lace	(3)				Type of Facil		77 77 77				
Street Address	iai Hospita	1	-		-			School (then 1/ 40\				17
	d								pter 8 (Other	ınan K-12) commercial buildir	nge hom	200 (oto)	
TO Edot Edulet IX	u.		10.00					Square Feet			Bldg. Ag	_	510.)	
City (5)		County (6)	C	oun	ty C	ode	(7)		" 011	10010	Diag. Ag			
Stratford		Camden						Current Use	(Prior if being	demolished)			-	
								Hospital		,				
			ner (8)		ASC	CM No		atement Cont	ractor (9)		-		
	tories, Inc.							AbateTech						
Street Address								Street Addre						
	State & Zip Code salem, PA 19020					4		PO Box 25		-				
	State & Zip Code salem, PA 19020 ct Manager for Monitoring Firm ael Panepresso							City, State &	, NJ 08048					
	Progress Drive State & Zip Code alem, PA 19020 It Manager for Monitoring Firm ael Panepresso Filled Start Date (10) 5/22/12 Scheduled Facility Closed/Vacated During Ent				ne	Num	ber	Telephone N		License I	Number			
Michael Panepre	alem, PA 19020 t Manager for Monitoring Firm ael Panepresso uled Start Date (10) Scheduled					300		609-265-21		12.00.100	0052	29		
	Manager for Monitoring Firm el Panepresso lled Start Date (10) 5/22/12 Scheduled Start Status During Abatement (Che				Date	e (11)	Name of OSI	HA Monitor					
	of Monitoring Firm Hired by Building ion Laboratories, Inc. Address Progress Drive Itate & Zip Code alem, PA 19020 It Manager for Monitoring Firm ael Panepresso uled Start Date (10) 5/22/12 ancy Status During Abatement (Che Facility Closed/Vacated During En Abatement Performed Outside of N Describe: 1:30 PM- 10PM Facility Occupied During Abatement of Work (Check all that apply) ≥3 sf or ≥3 If ≥160 sf ≥260 If Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13)				2			EMSL Anal						
Occupancy Status [Address Progress Drive State & Zip Code alem, PA 19020 It Manager for Monitoring Firm ael Panepresso uled Start Date (10) 5/22/12 Scheduled Facility Closed/Vacated During En Abatement Performed Outside of N Describe: 1:30 PM- 10PM Facility Occupied During Abatement of Work (Check all that apply) ≥3 sf or ≥3 If				۸ha	.		Street Addre						
	duled Start Date (10) 5/22/12 Scheduled Scheduled Scheduled Scheduled Scheduled Scheduled Scheduled Scheduled Dancy Status During Abatement (Che Facility Closed/Vacated During Ent Abatement Performed Outside of N					teme	ent	108 Haddo City, State &						
The state of the s	uled Start Date (10) 5/22/12 ancy Status During Abatement (Che Facility Closed/Vacated During Ent Abatement Performed Outside of Notes Describe: 1:30 PM-10PM				, –			Westmont,						
							144	westinoni,	142 00 100					
	5/22/12 Deancy Status During Abatement (Che Facility Closed/Vacated During En Abatement Performed Outside of National Describe: 1:30 PM-10PM											0 0 0 0		
	2		_							ontainment with I	Vegative	Pres	ssure	9
			\bowtie			ovatio				Enclosure				
≥160 sf ≥26	O IT		Ш	L)em	olitio	n			Bag Procedures		-		
10	cation of		le	100	catio		Т	Description		Exempted and No				
8 2		ıa	Nor					Asbestos-Con		Amount (Specify	Ab	atem	enti	ype
Mate	erial (ACM)		5	Sole	ly b	у		Material (A	CM)	SF or LF)			m	
						e or		(i.e., thermal s			Re	20	nca	Enc
II			Cusi	(1		taff?		insulation, surfactor or other miscell		*	Remova	Repair	Encapsulate	Enclosure
	()		Yes			N/A	1	or outer missen	iancous)		<u> </u>	_	late	l le
		Wilder L		<u> </u>										
Air Handler Unit			Ц	L	4			Pipe Insula	ation	24 LF				
			Н	1.	4	H						Ц		H
			H	+	#	ዙ					$-$ \vdash	Ц	님	H
			H	++	+	H					$\dashv \vdash$	H	H	ዙ
	The same and the s			+	┽┼	H	-					H	H	ዙ
Name of Registered	ne of Registered Waste Hauler				NJE)FP \		Cubic Yards	Name of Re	egistered Landfill			Ш	1
AbateTech, Inc.					Hau		O No.	of Waste	TRRF Lan					
City, State	[200]		mi ac		-		. 7	Disposal Date	City, State	1004				
Lumberton, NJ								5/23/12	Tullytown	, PA				
Completed By (Print	or Type)				Title			Signature	1		Date	-		
Gwen Trumbetti					Opp	os. C	oord.	Shu	1		5/22	/12		

Check #4169

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

Date of Notification								Owner / Operato	or (2)	MAY 3 1 2	hasa			
		<u>y</u>					versit	у		MAI O I S	2012	l lead	11	
	Type Notifica	ation				Addr						·	. 1	
	N Initial							ville Road		ACRECTOS CONTR	016	No.5		
				550			& Zip (· ·	LICENSING			i	
	and the second of the second o		2.15=4				ontact	NJ 08648		Para Maria Maria	Talanta.		manife	
							nees				Telepho)ne iv	Himn	·OF
							55 555	ORMATION						7.1
Name of Facility W/h	ere Ahateme	ent is Taking F	lace (AC	ILII	Y IINF	Type of Facil	ity (4)					
			lace (3)				School (
Street Address			*******					A CONTRACT OF THE PARTY OF THE		an K-12) (Unocc	upied)			
i v										mmercial building		nes, e	etc.)	
2083 Lawrencevi	lle Road	N 11 - 55 1						Square Feet			ldg. Ag			
City (5)		County (6)	Co	ounty	Co	ode ((7)			u .	33	153		
		100					===	Current Use	(Prior if being o	demolished)				
Lawrenceville	ler University – Fine Arts Building eet Address 33 Lawrenceville Road (5) County (6) Wrenceville Mercer me of Monitoring Firm Hired by Building Onnoni Associates, Inc. eet Address Grove Street Suite 1B (5) State & Zip Code ddon Heights, NJ 08035 ject Manager for Monitoring Firm In Lloyd In Lloyd In Lloyd In Lloyd In Loyd							Mechanica						
Name of Monitoring	Firm Hired b	y Building Ow	ner (8))		ASC	CM No	. Name of Aba	tement Contra	ctor (9)				
	wrenceville me of Monitoring Firm Hired by Building Onnoni Associates, Inc. eet Address 5 Grove Street Suite 1B y, State & Zip Code ddon Heights, NJ 08035 oject Manager for Monitoring Firm an Lloyd heduled Start Date (10) 5/24/12 cupancy Status During Abatement (Check Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Describe: 4PM to Midnight							AbateTech,	, Inc.					
Street Address	encies Notified EPA DEP DEP DOL Amended # DOH Emergency Cancellation Type Notification Amended # DOH Emergency Cancellation The Arts Building The Art							Street Addres						
	Sepa				-570			30 Maple A						
								City, State & Lumberton						
		irm	Tele	nhor	ΛοΛ	lumi	ner	Telephone N		License N	umbor			-
Alan Lloyd	Worldoning i		856-				361	609-265-21		License N	0052			
	te (10)	Scheduled Co)	Name of OSI						
	Section 19 Contract 19 Contrac		5/26					EMSL Anal						
								Street Addres			CONTRACTOR SERVICE			
					bat	eme	nt	107 Haddor						
			al Ho	urs				City, State &						
	ider University – Fine Arts Building freet Address D83 Lawrenceville Road fity (5)							Westmont,	NJ 08108					
	awrenceville ame of Monitoring Firm Hired by Building Orennoni Associates, Inc. reet Address Is Grove Street Suite 1B Ity, State & Zip Code addon Heights, NJ 08035 roject Manager for Monitoring Firm In Lloyd Cheduled Start Date (10) 5/24/12 Ccupancy Status During Abatement (Check Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Describe: 4PM to Midnight Facility Occupied During Abatement Cope of Work (Check all that apply) ≥3 sf or ≥3 If Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13)						- H							
Caspa of From Colle	DCA Cancellation Cancellation								☐ Full Cor	ntainment with N	egative	Pres	ssure	9
≥3 sf or ≥3 lf	ř.		\bowtie	Re	eno	vatio	on		Mini-En					
≥160 sf ≥260	ity, State & Zip Code addon Heights, NJ 08035 roject Manager for Monitoring Firm lan Lloyd cheduled Start Date (10) 5/24/12 ccupancy Status During Abatement (Check Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Describe: 4PM to Midnight Facility Occupied During Abatement cope of Work (Check all that apply) ≥3 sf or ≥3 If ≥160 sf ≥260 If Location of Asbestos-Containing				emo	olitio	n		The state of the s	Bag Procedures				
	and the second								Non-Ex	empted and Non	-Friable	e Pro	cedu	ıre
				Loca				Description		Amount	Ab	atem	ent T	уре
		9	Non					Asbestos-Con		(Specify			_	
			Mair	olely				Material (A (i.e., thermal s		SF or LF)	Z.	70	nc	四
			Cust					insulation, surfac			Remova	Repair	aps	clos
	(13)	4		(12				or other miscell			va va	1	Encapsulate	Enclosure
			Yes	No	1	N/A		7-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1					Ф	
Mechanical Roon	Awrenceville Ame of Monitoring Firm Hired by Building Connoni Associates, Inc. Freet Address Is Grove Street Suite 1B By, State & Zip Code Addon Heights, NJ 08035 Toject Manager for Monitoring Firm An Lloyd Coupancy Status During Abatement (Check Facility Closed/Vacated During Entire Abatement Performed Outside of No Describe: 4PM to Midnight Facility Occupied During Abatement Tope of Work (Check all that apply) ≥3 sf or ≥3 If Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13) Chanical Room			L	Ш		Plas	ster Ceiling (H	ole Drilling)	5 SF				
			Щ	Ļ	1	닏						Ш	Ц	
			H	4.							ᆜᆜ	님	H	H
			H	1	-	Щ					닏	H	H	H
			H	늗	-	H					ᆛH	H	H	ዙ
Name of Registered	Waste Haule	er .			IID	ED /	Macta	Cubic Yards	Name of Pog	istered Landfill			Ш	
Tramo or registered	vvaste i laute	51					No.	of Waste	Name of Neg	istereu Landilli				
AbateTech, Inc.						1875		1	TRRF Land	fill				
City, State	DOL							Disposal Date	City, State		2000		-	
Lumberton, NJ	240 0							5/29/12	Tullytown,	PA				
					itle			Signature /	1		Date			
Gwen Trumbe	tti			C	off.	Co	ord.	nu			5/23	3/12		

1205-4486 Check #4169

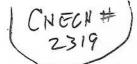
Date of Notification (1) 5/23/12		P to				Owner / Oper	rator (2)			1 1//	17		
Agencies Notified Type Notified EPA	cation		Stre	er Un et Add	Iress	eville Road			MAY 3	3 1 2012)	1 2	Andrew Patrick
DEP Initia	al ended #1		City	State	& Zip	TOTAL STATE OF THE PARTY OF THE							-
	ergency cellation		Nan	ne of C I Voo i	ontact			Lawrence Commence	AGBEOT	Telepho	ne l	lumb	per
	-		F	ACILI	TY IN	FORMATION			A Same and	30)	-		-
Name of Facility Where Abatem Rider University – Fine Arts Street Address	ent is Taking Pl Building	lace (3)				ol (K-12)						
Officer Address									K-12) (Uno ercial build		es,	etc.)	82
2083 Lawrenceville Road						Square Fe		of Floors		Bldg. Ag			74.00
City (5)	County (6)	Co	ounty	Code	(7)	Current Us	e (Prior if	being dem	olished)			=	
Lawrenceville	Mercer					Universit							
Name of Monitoring Firm Hired I Pennoni Associates, Inc.	by Building Own	er (8))	AS	CMN	1		Contractor	(9)				
Street Address						AbateTed Street Add					100000		
515 Grove Street Suite 1B						30 Maple							
City, State & Zip Code						City, State		е					Aller
Haddon Heights, NJ 08035		- -				Lumberto		048					
Project Manager for Monitoring I Alan Lloyd		856-	547	e Num -0505		Telephone 609-265-2			License	Number 0052	9		
5/24/12	Scheduled Com	5/26	/12	ate (11	1)	Name of O EMSL An		tor					
Occupancy Status During Abate Facility Closed/Vacated	ment (Check on During Entire Pe	ly one	e) of Al	oateme	ent	Street Add 107 Hadd	ress						
Abatement Performed O	utside of Norma					City, State		e					
Describe: 4PM to Mid Facility Occupied During	dnight Abatement					Westmon	t, NJ 081	08					
Scope of Work (Check all that ap				7									
≥3 sf or ≥3 lf			_						nment with	Negative	Pres	sure	į
25 \$1 01 ≥5 11 1 ≥ 160 sf ≥ 260 lf		\bowtie		novati molitic			-	lini-Enclos					
		Ш	De	montic	161		-	10 -2 0	Procedures ted and No		Pro	cadu	ıro
Location of		ls l	Loca	tion	1	Descript		OH EXCITIO	Amount	Aba			
Asbestos-Containin	g			Used		Asbestos-Co	ontaining	1	(Specify				100
Material (ACM) TO BE ABATED			olely	by nce or		Material (SF or LF)	70	_	Enc	Щ
in Facility				Staff?		i.e., thermal insulation, surf		.		Remova	Repair	aps	Iclo
(13)	\ <u> </u>	Yes	(12) No	N/A		or other misc)val	air	Encapsulate	Enclosure
Above Stage Area		Tes	NO	N/A	<u> </u>	otor Coiling (Uala Dell	line and	F 0F				
Above drage Area		H	H	H	Pia	ster Ceiling (Hole Drii	iing)	5 SF		H	井	H
		H	Ħ	tH						ᆂ	H	ዙ	H
		П	n	ΙĦ					-	一门	Ħ	Ħ	H
						-					Ħ	Ħ	П
													百
Name of Registered Waste Haule	∌r ∍r			auler II	O No.	Cubic Yards of Waste	Name	of Register	ed Landfill				
AbateTech, Inc.				187	50	1		Landfill					
City, State Lumberton, NJ						Disposal Date 5/29/12		ate own, PA					
Completed By (Print or Type)	N		Tit			Signature	0	-		Date			
Gwen Trumbetti			Of	ff. Co	ord.	(41	*			5/23/	12		

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

Date of Notification (1) 5/21/12			Name of Building Owner / Operator (2) Princeton University											
Agencies Notified Type Notifie	cation													
⊠ EPA		Street Address Trustees of Princeton University E.A. MacMillan Bldg.												
☐ DEP ☐ Initia	al			& Zip C		ney Line made	man Diag.							
	ended #8			1, NJ 0		1 6	market personal action of							
the state of the s	and the second s	-111						Telephone Number						
							Children of the County of the Print of the County of the C	i elebuorie ivi	mber					
			Robert Ortego, P.E. FACILITY INFORMATION											
Name of Facility Where Abatem	Access to the second se	ACILI	I I IINF	Type of Facility (4)										
Princeton University - Fire	cc (5)			School (K-12)										
Street Address	otolic Library		W			Subchapter 8 (Other than K-12)								
One Washington Road				Other (i.e. private & commercial buildings, homes, etc										
One washington Road				Square Feet										
City (5)	Count	y Code	(7)	- Square reet	# 011 10013		olug. Age							
Princeton	County (6) Mercer	Count	y code	(1)	Current Use (Prior if being den	nolished)							
Filliceton	Mercer				University L		ionsiled)							
Name of Monitoring Firm Hired	by Building Owne	r (8)	IAS	CM No.	DESCRIPTION OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN	ement Contracto	r (0)							
ATC Associates, Inc.	by building Owne	1 (0)	143	CIVI INO.	AbateTech,		1 (9)							
Street Address					Street Addres									
Bromley Corporate Center	3 Terri Lane. S	uite 12			PO Box 25									
City, State & Zip Code					City, State & Z	Zip Code		100						
Burlington, NJ 08016					Lumberton,	Lumberton, NJ 08048								
Project Manager for Monitoring		elepho			Telephone Number License Number									
Mike Keehn	09-386			609-265-2107 00529										
Scheduled Start Date (10) 10/17/11	Date (11	1)	Name of OSHA Monitor EMSL Analytical											
Occupancy Status During Abate	WASHING DUCKSE - SOLE			Street Address										
Facility Closed/Vacated During Entire Period			batem	ent	108 Haddon	108 Haddon Ave.								
Abatement Performed Outside of Normal H					City, State & Z	City, State & Zip Code								
Describe:			Westmont, NJ 08108											
Facility Occupied During														
Scope of Work (Check all that a	ipply)													
□ >2 of or >2 If		K				Negative Press	ure							
23 sf or ≥3 lf	4		enovat			Mini-Enclo	7,710							
≥160 sf ≥260 lf		Πр	emoliti	on			Procedures							
						The state of the s	pted and No							
Location of Asbestos-Containi		ls Loc Normall			Description Asbestos-Cont		Amount	Abatement Type						
Material (ACM)	ing i	Solel			Material (AC		(Specify SF or LF)		m					
TO BE ABATED		Mainten			(i.e., thermal sy		of of Li	교 교	En					
in Facility		Custodia			insulation, surfac			Repair	clos					
(13)		(12			or other miscella			val air	Enclosure Encapsulate					
	Y	es N	o N/A						6					
Level A Elevator Lobby]	Floor	tile & Mastic (Full	Containment)	450 SF							
Mechanical Shaft				Pipe	Insulation (Full C	Containment)	150 LF							
Level 1 - main Stair (WA #7	7)			Ac	oustical Ceilin	stical Ceiling Plaster 800 SF			7-0					
							NAME OF THE PARTY							
Name of Registered Waste Hau	ıler	100			Cubic Yards	Name of Regist	ered Landfill							
AbateTech, Inc.		1	lauler 187		of Waste	of Waste								
City, State			10/	30	V. 0 .	TRRF Landfill								
Lumberton, NJ					Disposal Date 6/30/12	City, State Tullytown, PA	2							
Completed By (Print or Type)		1	Γitle		Signature	^		Date						
Gwen Trumbetti		100	Opps. (Coord.		, &		5/21/12						
				\ \n	1									

State of New Jersey 1109-4387 NOTIFICATION OF ASBESTOS ABATEMENT Check #3947 (Pursuant to N.J.A.C. 8:60 and 12:120)

			\\			119		= \\		1 000	111	
Date of Notification (1)		Name of Building Owner / Operator (2)										
5/21/12 Agencies Notified Type Notification		Princeton University Street Address										
EPA					ceton University	FA Mac	11 10 20 20 20 20	3 1 20	iz.	1260		
☐ DEP ☐ Initial				Zip Co		1				i	-	
DOL Amended #8	-	s contro	L &									
☐ DOH ☐ Emergency			of Co			1		Telepho		umbe	er	
☐ DCA ☐ Cancellation		Robe	rt Ort	tego, F	P.E.	lase to	CHE PROPERTY OF THE PARTY OF TH	Parties and restal and a second			Z-A-CHI	
	Y INFO	FORMATION										
Name of Facility Where Abatement is Taking I	Place (3		CILII	1 HVI C	Type of Facility ((4)						
Princeton University - Firestone Librar	-,											
Street Address							12.7					
One Washington Road				ngs, homes, etc.)								
				Square Feet	ors	Bldg. Age						
City (5) County (6)	Co	County Code (7)										
Princeton Mercer					Current Use (Pri	or if being d	emolished)					
					University Library							
Name of Monitoring Firm Hired by Building Ow	ner (8)		ASC	M No.	Name of Abatem		ctor (9)					
ATC Associates, Inc.					AbateTech, In	c.	1400-150					
Street Address					Street Address							
Bromley Corporate Center 3 Terri Lane	Suite	12			PO Box 25	0-1-						
City, State & Zip Code Burlington, NJ 08016					City, State & Zip							
Project Manager for Monitoring Firm	hone	Numb	ner	Lumberton, NJ 08048 Telephone Number License Number								
Mike Keehn		386-8		,01	609-265-2107 00529							
Scheduled Start Date (10) Scheduled Co	on Dà	te (11)		Name of OSHA Monitor								
10/17/11	100000000000000000000000000000000000000	/12/										
Occupancy Status During Abatement (Check	é)			Street Address								
Facility Closed/Vacated During Entire	et turns	ateme	nt	108 Haddon A					2000203-			
Abatement Performed Outside of Norm	nai Ho	urs			City, State & Zip							
Describe: Facility Occupied During Abatement					Westmont, NJ	08108						
Scope of Work (Check all that apply)												
Coope of Work (Officer all that apply)						Full Cor	tainment with	Negative	Pres	sure	,	
≥3 sf or ≥3 lf	\boxtimes	Rer	ovatio	n		Mini-En		•				
≥160 sf ≥260 lf		Demolition				Glove B	ag Procedures	ıres				
					\boxtimes	Non-Exe	xempted and Non-Friable Pr				Control of the Contro	
Location of		_ocation			Description of		Amount	Aba	Abatement Type			
Asbestos-Containing		nally Used olely by			Asbestos-Contain Material (ACM)		(Specify SF or LF)					
Material (ACM) Sol TO BE ABATED Mainte					(i.e., thermal systems		SF OI LF)	R	20	nca	E	
in Facility					nsulation, surfacing			Remova	Repair	sde	Enclosure	
(13)		(12)			or other miscellane			a la	=	Encapsulate	ure	
Work Area #1 Level A	Yes	No	N/A	Floor	tile & Mastic (NF		400 SF					
Work Area #1 & #2 Level A	14	Ц	\boxtimes		Floor tile & Mas		39,600 SF		Щ	Н	Ц	
Work Area #1 & #2 Level A	14	H			Pipe/Fitting Insul		4,500 LF	-	H	H	H	
Work Area #3 Level A	+H			Joil	t Compound & drywall		8,500 SF		H	ዙ	H	
Work Area #3 Level A Work Area #4 Level B	H	H			Pipe/Fitting Insulation Floor tile & Mastic		100 LF		H	H	H	
Work Area #1 Level 1A	+H	H			Floor tile & Mas	100000000000000000000000000000000000000	1,780 SF 1,063 SF	-	H	H	H	
Name of Registered Waste Hauler	1	I LI	DEP V	Maste	the second secon		istered Landfill				Ш	
Traine of Registered Waste Hadier			uler IE	Contract the second	of Waste	and or reg	lotoroa Eariailii					
AbateTech, Inc.			1875	50	14 T	RRF Land	fill					
City, State						ity, State	teave					
Lumberton, NJ					ullytown, l	PA			-			
Completed By (Print or Type)		Tit			Signature	٨		Date				
Gwen Trumbetti	Ob	ps. C	oord.		J-		5/21	/12				
					7 1/1 /	1						



Date of Notification (1) /29/12	The T		e of Buildin	o Owner/Operator	(2)	Lieuw o 1	0.050	i	\dashv			
Agencies Notified Type Notificate	on	Stre	Street Address 225 FREEMONT SUE. City, State, Zip Code WOOD BINE, N. J. OSZ70									
☐ BA ☑ Jinital ☐ CB ☐ Amended ☐ DOL Amendmen	n(#	City.										
□ DOH □ Emergency □ DOH □ justificatio □ DCA □ Cancellatio	n) .	Nam	Name of Contact 1 SA FISHER									
		,		ORMATION		4						
Name of Facility Where Abatement is Ta			CIDITIN	OLOWATION	Type of Facility	(4)			-			
PESIDENÇE Street Address					School (K-12		building	s ,				
400 20TH	>7,				homes, etc.)		Bidg		-	1		
Ciry (5) AUALON					1000	2	1	0 +				
County (6) CAPE MAY		Cod	uniy Code (E ONLY)	1) (STATE	VA.	ior If being demolish	ed)					
Name of Manitoring Firm Hired by Building	og Owner	ASCI	J No.	KLGM	nent Convactor (9	61				1		
Street Address				369 S. SPRUCE AVE.								
City, State, Zip Code				Ciry. State. Zip Code MAPLE SHADE, NJ. 08052								
Project Manager for Monitoring Firm		, Telephon	Valephone No. 856-779-0472 00444									
Sian Daie (10) / 7/12 Sc	cheduled Co	mpletion (Date (11)	JOSE	PKALEN				_			
Occupancy Status During Abatement (C Facility Closed/Vacated During Entire	heck only o	one) Abatement			SPILUC	EAVE,				-		
Abatement Performed Outside of No Other - Describe:	rmal Facility	Hours		City, State, Zip	Code SHAD	E, N, J,	0805	12		_		
Scope of Work (Check all that apply)	Re	novation molition		Mini-E	ontainment with N nclosure bag Procedure	egative Pressure	are .					
2160 st or ≥260 H		ocation		□ Non- E	Xempled () alo.	T	TA	Abatement Type				
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Used Mair Cu	Staff?	1 Aria	Description estos Containing M e., thermal system surfacing, VA other miscellar	(atenal (ACM) is insulation, AT, or	Amount (Specify SF or LF)	Removal	Repair	T			
* *	Yes	но н	IA	-2 4 11 15	172	1600#	1		\sqcap			
SIDING	_			TRAWS	700-	<u> </u>						
	_	-	+=							_		
	=	-	-					1_	1	1		
Name of Registered Waste Hauler		Haul	EP Waste	Cubic Yards of Waste	Name of R	egistered Landfill 1, C, M, C	1, K	,		_		
KIEMCO INC.	1 ~ "		904	Disposal Date	0 0	The second secon				_		
Completed By	Title	NNE		Signatur		Date	,	1/1	2			
JOSEPH KLEMM		20 20	=	- I-A			-			i.i.		

Date of Notification (1)				Name of Building Owner/Operator (2)											
May 29, 2012				Newark Public Schools											
Agency Notified Type Notification					Street Address										
□ EPA	⊠ Initia				2 Ce	dar Str	eet		4			11			
E DEP Not something State (ch. 17300)	☐ Ame		- 60-		City, S	tate, Zip (Code		MAI 3 1	2012	111	Ĵ,	1		
⊠ DOL	0.000	endment #	20		New	ark, NJ	07102				head	1997	1		
⊠ DOH		ergency (including ification)			Name	of Contac	ot .	- 1	Telephone Num	ber					
						ory Till	Tillman								
					FACI	LITY INF	ORMATION		The market of the same		-				
Name of Facility Where	Abateme	nt is Taking Place	(3)					Type of Facility		-					
American History High School								D School (K 13	Λ.						
Street Address							☐ School (K-12) ☑ Subchapter 8 (Other than K-1 2)								
200 Warren Stree	at .								ivate & commercia	l building	gs,				
	, L			- 60		-		homes, etc.) Square Feet	# of Floors	Blda	Ane		-	-	
City (5)							30,000 +/- 3				Bldg. Age 40+/-				
Newark, NJ 0710	J4 			_	County	· Cada /7) (CTATE LICE		or if being demoli					-	
County (6)					ONLY)) (STATE USE		- 180	sneuj					
Essex			1 .	0011				Educationa							
Name of Monitoring Fir			2500	SCM				nent Contractor (
Whitman Compa	ny, Inc.			001	10			storation Co.,	Inc., 22-26742	200					
Street Address							Street Address								
7 Pleasant Hill R	oad						223 Randolph Avenue								
City, State, Zip Code							City, State, Zip Code								
Cranberry NJ 08512							Clifton, N.J 07011 Telephone No. License No.								
Project Manager for Monitoring Firm Telepho							973-478-4681 00120								
Kevin Lovely		T 0 1 1 1 1 0	732-390-5858				Name of OSHA Monitor							_	
Start Date (10) Scheduled Completion Date (11)							A COMPANY OF THE CONTRACTOR		Comilege I I (_					
June 11, 2012	a a Abata	June 18, 20	50555W				Street Address	vironmental	Services, L.L.	J.	- 9	70			
Occupancy Status During Abatement (Check only one)							Prook Avenu								
☑ Facility Closed/Vacated During Entire Period of Abateme ☐ Abatement Performed Outside of Normal Facility Hours			men	t		City, State, Zip	Brook Avenue	,				-			
Other - Describe:	ed Outside	or Normal Facilit	у нои	rs				NJ 07071-199	18						
Scope of Work (Check	all that an	nlv)					Lynanaist,	140 0707 1-100	,,,					-	
					KM na=		□ Full	Full Containment with Negative Pressure Mini-Enclosure							
$\boxtimes \ge 3$ sf or ≥ 3 If $\square \ge 160$ sf or ≥ 260 If					novation nolition	A 100 A	ovebag Procedure								
1 2 100 St 01 2 200 H					2 700 1 165 166		☐ Non	on-Exempted (*) and Non-Friable Procedure							
			Is	Locat	ion						Abatemen Type			nt	
Loca	tion of			orma			Description	of				-7			
Asbestos-Contain		ial (ACM)					stos Containing M	laterial (ACM)	Amount				E	ш	
	ABATED			Custodial (i			., thermal systems surfacing, VA		(Specify SF or LF)		₹en	Re	cap	ncic	
	acility 13)			Staff (12)			other miscellan		SF OF LF)		Removal	Repair	Encapsulate	Enclosure	
1	15	-		(/		-					a_	.	ite	е	
			Yes	No	N/A					7 In ft		_			
Basement Boiler	Basement Boiler Room			4		Pipe	Insulation						_		
Basement Boiler	Basement Boiler Room					Pipe	Insulation			36 In ft		_	X		
											i de la constantina				
1				Vaste Hauler Cubic Yards of			s of Name of Registered Landfill								
B&N&K Restoration Co., Inc., 12695						Waste .5	Minerva F	va Enterprises, Inc.							
22-2674200			12	-							_				
Cliffor N. 1.0704	4						Disposal Date City, State								
Clifton, N.J 0701	1	Title					6/18/12 Signature	Waynesburg, OH							
Completed by G. Roger Woodman Project Manager						5/29/2012									