CK11976 PA	AIL). N	ITOI		MOIT		BES	Jersey STOS ABAT :60 and 5:10)	EG	E		\mathbb{V}		Communication of the Communica
Date of Notification (1)					Name	of Building	g Ow	ner/Operator (2)		MAY	2 1	0	010		11
05/29	_ / _	19	_		UM	DASCH	REA	L ESTATE U	ISA LTD	L	II MAI	J	4	UI9	-	
Agencies Notified Type	e Notificat	ion			Street	Address						ent-five-renn				
⊠ EPA ⊠ Ir					214	Gates R	oad		A particular of		ASBESTO				18	
	mended			1	City. S	State, Zip C	ode	**************************************	La		LIC	ENS	ING	3	Marine 1-0	agales turn.
4 P.	mendmer					le Ferry,										
DCA DCA DE (NJAC 5:23-8)	mergency ustification	y (inclu	uding		10000	of Contact				7	Telephone Nu	ımhar				
	ancellation					is Goldb	-				201-853-0					
								RMATION		1	201 000 0				027-	
Name of Facility Where Abaten	nent is Ta	kina P	Place	(3)	IA	JILII III	101	XIVIA I I ON	Type of Facility	1 (4)	·					
Commercial		3		(-)					School (K-1	935	9					
Street Address									☐ Subchapter	8 (
521 Main Avenue, Buildi	ing #13								Other (i.e., homes, etc		ate and comm	nercia	l bui	ilding	s,	
City (5)									Square Feet		# of Floors		Bld	ig. Ag	e	
Wallington															97	
County (6)					Cour	ty Code (7)(STA	TE USE ONLY)	Current Use (P	rior	if being demo	olishe	d)			-
Bergen								o del son entre del entre entr								
Name of Monitoring Firm Hired	by Buildin	ng Ow	mer (8	3)	ASCM	No.	Nai	me of Abateme	ent Contractor (9	9)		li serie				
Mark Jovic Consulting L	.LC						A	LL PRO MA	NAGEMENT	LLC						
Street Address							Stre	eet Address								
87 Main Street, Suite A							2	7 Outwater I	Lane							
City, State, Zip Code							City	y, State, Zip Co	ode							
Lincoln Park, NJ 07035							G	Sarfield, NJ	07026							
Project Manager for Monitoring	Firm			Tele	phone	No.	Tel	ephone No.			License No.					
Mark Jovic				0.000	3-650	5.00	9	73-928-4888			1188					
Start Date (10)					tion Da		11-11-11-11-11	me of OSHA M								
			74		_ / -	19	A	LL PRO MA	NAGEMENT I	LLC	3					
Occupancy Status During Abate							Stre	eet Address								
☐ Facility Closed/Vacated Dur								7 Outwater I								
Abatement Performed Outsi Time of Abatement:	ide of Nor AM-	mai Fa	acility	PM-	s - Des	cride AM	- 997	y, State, Zip Co		-7311						
				-00			G	Sarfield, NJ	07026							
Scope of Work (Check all that a	apply)							☐ Full Cont	ainment with Ne	nat	ive Pressure					
≥3 sf or ≥3 lf				novati				☐ Mini-Enc	losure	gui	ave i ressure					
≥160 sf or ≥260 lf		\bowtie	☑ Der	nolitio	n			☐ Gloveba	g Procedure mpted (*) and N	on-	Eriable Droce	duro				
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Location of				lormal				Description o	f			H		_		-
Asbestos-Containing Materi TO BE ABATED	ial (ACM)			d Sole ntena				Containing Ma		1	Amount		em	Repair	nca	ncl
IN Facility					Staff?	(i.e		ermal systems i surfacing, VAT,			(Specify SF or LF)		Remova	air	sqe	Enclosure
(13)		-	. 1	(12)	1 5000	1		her miscellane			0. 0. 2. /		-		Encapsulate	Ге
Roof Level			Yes	No	N/A					-			_			_
		_	<u> </u>					ing Material		-	40 SF	-			Ц	
Roof Level		L				Edge Ta	ar			_	40 SF					
] [
		1														
Name of Registered Waste Har	uler			14 17 18 18	JDEP \		100 W. C. C.	bic Yards of	Name of Reg	iste	red Landfill					
Century Waste / Newark	Carting	1		H	auler II 32797	O No. 7 / 0283		ste As Needed								
City, State						. 0200		posal Date	City, State							
Elizabeth, NJ / Newark, I	NJ						Т	BD	Morrisvill	e, l	PA / Pen Ar	gyl, l	PA			
Completed By (Print or Type)		Title			-			Signature				Date				
Allen Monchik		Pro	ject	Man	ager			Allen	Monche	K		5/2	29/	19		

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT

	LLE)	(F			AC 8:60 and 5:1	· UVE	24-46	12	15	3	
Date of Notification (1)		•				ng Owner/Operator		DE C	2 [2 1	W	7 18
	/ _1			Н	olmdel To	wnship Schools		10)E	0 1		V	
Agencies Notified Type No ⊠ EPA □ Initia					et Address							
☑ DOLWD ☐ Amer						bell Road		M/	AY .	3 1	201	9
	ndment #		_		State, Zip							
DCA Emer		ncludin	g		Imdel, N							
(NJAC 5:23-8) justifi	cation) ellation			100000000000000000000000000000000000000	e of Conta	ct sland- Director of	f Dlant	Telephone Num 732 946 181	LICE	NSI	ivih VG	OF &
						NFORMATION	i Piant	132 346 181	3 EX	1-34	21	TO STREET, CASE
Name of Facility Where Abatement	is Takin	a Place	e (3)	ГР	CILITY	NFORMATION	Type of Facility	. (4)				
Satz MS/Holmdel HS	io raitii	91140	J (J)				Type of Facility					
Sireet Address							☐ Subchapter	8 (Other than K-12))			
24/36 Crawfords Corner Rd							Other (i.e.,) homes, etc.	private and commer	cial b	uildin	ıgs,	
City (5)							Square Feet	# of Floors	10	ldg. A	100	
Holmdel							oquaic i cct	# 01110015		50+		
County (6)				Cou	nty Code (7)(STATE USE ONLY)	Current Use (P	rior if being demolis	hed)			
Monmouth							School		,			
Name of Monitoring Firm Hired by E	Building	Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9))			7.000	
AHERA Consultants				005	7	Controlled Er	nvironmental	Systems				
Street Address						Street Address			-			
PO Box 385						1121 N. Bethl	ehem Pike - S	Suite 60				
City, State, Zip Code						City, State, Zip Co	ode		Sille			
Oceanville, NJ 08231-0385						Spring House	e, PA 19477					
Project Manager for Monitoring Firm	1		1	ephone		Telephone No.		License No.		Sall I		
John Smoyer Start Date (10)	10.1			09 652		215 542 7000		00847				
6 / _14_ / _19_	1		100	etion Da	(N) (N)	Name of OSHA M CES	onitor					
Occupancy Status During Abatemen	nt (Chec	k only o	one)			Street Address						
☐ Facility Closed/Vacated During E	ntire Pe	riod of	Abate	ement		1121 N. Bethle	ehem Pike - S	uite 60				
Abatement Performed Outside o	Normal	Facility	y Hou	rs - Des	cribe	City, State, Zip Co						_
Time of Abatement: 7:00AM-7:0		P	W	AM		Spring House	, PA 19477					
Scope of Work (Check all that apply)						a9 // 200 ASS DISS		5-010	-		
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		⊠ Re	novat moliti				Procedure	gative Pressure on-Friable Procedure	9			
Section of the Section		2,000	Loca						T	atem	ent T	ype
Location of Asbestos-Containing Material (A	CM)		lorma d Sol	ally elv bv	Aaba	Description of				_	1	
TO BE ABATED	Olvin		intena		(i.e.	stos Containing Mate , thermal systems in	sulation,	Amount (Specify	Removal	Repair	Encapsulate	Enclosure
IN Facility (13)		Cust	(12)	Staff?		surfacing, VAT, other miscellaneo	or	SF or LF)	val	¬	Sula	sure
(3.5)		Yes	No	N/A		other miscellaneo	us)				ate	
Various Classrooms			\boxtimes		Windov	v Glazing		210 LF		П	П	
Throughout parts of Bldg					Transite	Panels/Hoods/S	Soffit	416 SF		П		
Various Classrooms					10Sinks	-TableTop/Backs	Splash Stan	585 SF				
Mechanical Room-Girl Locker	Rd				Pipe Fit	tings		5 Ea		П		
Name of Registered Waste Hauler			7 1000	JDEP V		Cubic Yards of	Name of Regis		_			
Geppert Recycling			F	lauler IE	No.	Waste		erks Communtiy	Lan	dfill		
City, State						Disposal Date	City, State					
Hatfield, PA							Birdsboro,	PA 19508				
Completed By (Print or Type)	Title					Signature		Date	9			-

Patricia Visco

Office Manager

0	K002802	PA		NOTIF (P	ursuani	t to NJAC	8ESTOS 8:60 an	ABATEME d 12:120)) [6]	GEI	\mathbb{V}	E	In	-
	te of Notification (1) /28/19				Name o	of Building ers Univ	Owner/o	Operator (2)			1AV 2 1			The second secon	of Control of Control
Ag	encies Notified	Type Notification				Address			141	il M	IAY 3 1	2019		land	4
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H	DOH DCA	justification) Cancellation			Name of Joan	of Contact					ephone Nun				
	10000		Mary			ILITY INF	ODMAT	1011		84	8-445-240)4			
Na	me of Facility Where	Abatement is Takir	g Place ((3)		ILII INF	ORWAI		/pe of Facility	(4)				7.37	
Bi	uilding E Corwin E	Buildings, Cook	Dougla	as Car	npus				School (K	-0.400.40					
1 200	eet Address 346 Nichol Ave.								Subchapte	er 8 (Oth	er than K-12)			
	y (5)							×	etc.)	private a	& commercia	ıl buil	dings	, hom	ies,
Ne	ew Brunswick, NJ							S	quare Feet	# 0	f Floors		Bldg. A	Age	
	unty (6) iddlesex					Code (7) USE ONLY)	C	urrent Use (P ormer Dor	rior if bei	ng demolish	1 7		200-200	
Nai	me of Monitoring Firm	Hired by Building	Owner (8)	ASCI	M No.			Abatement Co		(0)				
	A (Demolition)							Yannuz	zi Environ	mental	Services.	Inc.			
Stre	eet Address							Street Add			,				
City	y, State, Zip Code					-60		135 Kir	nelon Rd.	Suite 1	02				
Oity	, State, Zip Code								, Zip Code						
Pro	ject Manager for Mon	itorina Firm			Telepho	no Na			n, NJ 0740)5					
		3			releptio	me No.		Telephone 908-218			License No 01228	1.			
	rt Date (10)		Schedul	led Con	npletion	Date (11)			OSHA Monito	r l	01220			-	
1	12/19		6/21/1						zi Environi		Services,	Inc.			
	cupancy Status During			(7)				Street Add							-
×	Facility Closed/Vaca Abatement Performe	ited During Entire I ad Outside of Norm	Period of	Abatem	ent				nelon Rd.	Suite 1	02				
	Other - Describe: _		iai i aciiit	y riours	'				, Zip Code	. =					
Sco	pe of Work (Check Al	That Apply)						Kiririeio	n, NJ 0740	JO					
	≥3 sf or ≥3 If			Renova	tion				Full Containn	oont with	Magative De				
×	≥160 sf or ≥260 If			Demolit		i (7			Mini-Enclosu	re	Negative Pr	essu	re		
								X	Glovebag Pro Non-Exempte	ocedure ed (*) and	1 Non-Friable	Pro	redur		
			ls	s Locati	on					7 / 4/10	- Hon Habi		Abate		t
	Location		29.000	Normalled Sole	3		Des	scription of					Ту	ре	
	Asbestos-Containing TO BE ABA	Material (ACM)	Ma	aintenar	ice/	Asbes	tos Cont	aining Mate systems ins	rial (ACM)	325,500	mount	_		Щ	_
	In Facilit (13)	ty	Cus	todial S (12)	staff?	(surfac	cing, VAT, o	Г		pecify or LF)	Remova	Repair	псар	inclo
	(10)				Т	-	other n	niscellaneou	is)		1.5	oval	pair	Encapsulate	Enclosure
	Through	ou t	Yes	No	N/A									e e	
	Trilough	——————————————————————————————————————			X		F	RACM		Entire	Structure	Х			
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									Harrison Prices of the Section						
Ner	o of Dociete														
	ne of Registered Wast				JDEP Wauler ID		Cubic of Was		Name of	Registe	red Landfill				
	nuzzi Group, Inc.				7467	. 10.	500	nic .	GROV	VS/Fair	less				
6	State							al Date	City, Sta	te					
	nelon, NJ		1					0 6/21/19	Morris	ville, PA	A				
	n Mucha		Title Sr P	roject	Mana	gor	Si	ignatu e	NI		Date)			\neg
			J1. P	Oject	Mana	yer		Mr.	Juh		5	- 2	28	79	
ASB-	41 (R-06-08)						0	Do not us	e this form fo	r asbesto	os licensure i	exem	nted :	activit	ioc

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT

CKOOD BA			(Pursua	nt to N.	JAC 8:60 a	nd 12:12	20)			r	P	7	1 11/1	P	
Date of Notification (1) 5/30/19			Name	of Build	ding Owner	/Operato	r (2)			E	(C)	5	1 W		
Agencies Notified Type Notific	ation		Street	Addres	s					N	IAY	31	2019		100
EPA Initial Amend					bridge R	d		and the same of th	led bet	- Andrews			2013	,	L
DOL Amend	ment #			State, Zi	p Code y, NJ 088	DE A		The same of the sa		ASBE	STO	S CC	NTD	71 8	-
L Justifica	ency (includination)	ng		of Cont				-			LICE	ENSI	NG	JE 04	
DCA Cancel	ation			Sitler						Teleph 848-					
Name of Facility Where Abatement is	Taking Place	(3)		CILITY	NFORMAT	TION				0-10-	740-2	2402			
Building F Corwin Buildings, C	ook Doug	las C	ampus					of Facili							
Street Address 8346 Nichol Ave.							H	School (Subchap	K-12)	Other t	hon V	101			
City (5)							X	Other (i.e	e. priva	ate & co	omme	rcial I	ouildin	gs, ho	me
New Brunswick, NJ								re Feet	Т	# of Flo	oors		Bldo	. Age	_
County (6)			Count	Code (71					2			50+		
Middlesex			(STATE	USE ON	/) /LY)		Curre	nt Use (I ner Do	Prior if	being o	demol	shed)		
Name of Monitoring Firm Hired by Build N/A (Demolition)	ling Owner (8)	ASC	M No.		Name		tement C							
Street Address						Yann	nuzzi l	Enviror	nmen	tal Se	rvice	s. Ir	IC.		
						Street	Addres	S							
City, State, Zip Code								lon Rd.	. Suit	e 102					
Project Manager 6						City, St Kinne		p Code NJ 074	05						
Project Manager for Monitoring Firm			Telepho	one No.		Telepho				Lic	ense	No			
Start Date (10)	Schedu	led Co	mpletion	D		908-2				. 10250052	228	10.			
6/17/19	6/25/1	19	ripletion	Date (1	1)			A Monito							_
Occupancy Status During Abatement (C						Street A	Address	nviron	ment	al Sei	vices	s, In	C	5.855	
Facility Closed/Vacated During Ent Abatement Performed Outside of N	ire Period of	Abate	ment					on Rd.	Suite	102					
Other - Describe:	ormal Facilit	y Hou	rs			City, Sta									
Scope of Work (Check All That Apply)						Kinne	lon, N	NJ 074	05						
≥3 sf or ≥3 if ≥160 sf or ≥260 if	×	Renov Demoli	ation ition			×	Glov	Containn Enclosu ebag Pro	re ocedur	·P					
	Is	Locat	tion				Non-	Exempte	ed (*) a	and Nor	n-Frial	ole P			
Location of Asbestos-Containing Material (ACM)		Norma	lly		Des	cription o	f							emen	it
TO BE ABATED	Ma	intena	ince/	Asbe	estos Conta e. thermal s	aining Ma	terial (ACM)		Amour	nt		T	T_m	T
In Facility (13)	Cus	todial ((12)		ζ	surfac	ing, VAT.	or	on,		(Specif SF or LI		Rem	Re	nca	1 2
	Yes	No	N/A		other m	iscellane	ous)				50	Removal	Repair	Encapsulate	Luciosuie
Throughout	1,00	140	-											te	6
			X		R	ACM			Entir	e Stru	cture	x			
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ame of Registered Waste Hauler			JDEP W		Cubic Y		Tr	Name of	Regist	ered I :	andfill				
nnuzzi Group, Inc.			auler ID I 7467	NO.	of Waste	е		GROW							
y, State nnelon, NJ					Disposa		-	City, Stat				_		- C-U-1	
mpleted by	Title					6/25/1		Morrisv		PA					
hn Mucha		roioat	Manag	22020	Sig	neture	AA				Dat	е			
ili Mucha	Sr. Pr	OFF	IVIADAG	er	1	Del	101	11				100	-		

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Dat	te of Notification (1)) IA			(Pursua	nt to NJA	C 8:60 ar	nd 12:120	0)	MEG		$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	5	n,
	30/19				Name	of Buildingers Uni	ng Owner/ versity	Operator	(2)					A CONTRACTOR OF THE PARTY OF TH
Age	encies Notified	Type Notification	1		-	Address	· Or Oily			H WAY	31	2019		11
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	DCA	justification Cancellatio				Ol Contact	t			Telephone N		•		
Nan	an of English Math					CILITY IN	FORMAT	ION		848-445-2	404			
Bu	ne of Facility Where A ilding G Corwin E	Abatement is Taki	ng Place	(3)				ION	Type of Facilit	y (4)		-		7/2
Stre	et Address	Januarigs, Coo	k Dougl	as C	ampus				School (H	(-12)				
834	46 Nichol Ave.								Subchapi	ter 8 (Other than K- . private & commen	12)	ء مالانان		22.55
City									etc.)			260 250 mm 250		nes,
-	w Brunswick, NJ								Square Feet	# of Floors	- 1	Bldg. 50+	Age	
	nty (6) ddlesex				County	/ Code (7)			Current Use (F	Prior if being demolis		3U+		
	e of Monitoring Firm	Hirod by Buildin	0 /			USE ONL	Y)		Former Dor	mitory	,,,cu,			
N/A	(Demolition)	i med by Building	Owner (8	3)	ASC	M No.		Name o	of Abatement C	ontractor (9)	1000			
Stree	et Address									mental Services	s, Inc	: .		
	8								Address (innelon Rd.	Suito 102				7-0
City,	State, Zip Code								ate, Zip Code	Ouite 102				
Proie	ect Manager for Monit	ode Fi					, =		lon, NJ 074	05				
	ot Manager for Morni	oring Firm			Teleph	one No.		Telepho		License N	Vo.			
0.252.000.00	Date (10)	-	Schedu	led Co	moletion	Date (11)			18-0880	01228				
	1/19		6/30/1	9	pictioi	Date (11)			f OSHA Monito	r mental Services	Inc			
	pancy Status During							Street A	ddress	- Tierrial Services	, IIIC	•		
X	Facility Closed/Vacat Abatement Performer	ed During Entire I	Period of	Abate	ment		Į	135 K	innelon Rd.	Suite 102				
	Other - Describe:	d Odtside of Norri	iai Facilit	y Hour	S				ate, Zip Code				-	
Scope	e of Work (Check All	That Apply)						Kinne	lon, NJ 0740)5				
N S	≥3 sf or ≥3 If			Renova	ation			П	F. 11.0	93 VESS 5500				
	≥160 sf or ≥260 If			Demoli					Mini-Enclosus		Pressu	ire		
								×	Glovebag Pro	cedure ed (*) and Non-Friat	lo Dra		12.0	
				Locat	7077					did North Hat	T	Abate		t
As	Location of sbestos-Containing M			Norma ed Sole			Des	cription o	f				ре	
	TO BE ABAT	ED	Ma	intena todial	nce/	Asbes (i.e.	tos Conta	aining Ma	terial (ACM) nsulation,	Amount	_		m	
	In Facility (13)		Ous	(12)	olan :		surfaci	ing, VAT,	or	(Specify SF or LF)	Remova	Repair	псар	nclo
			Yes	No	N/A	1	outer in	iscellaneo	ous)		oval	air	Encapsulate	Enclosure
	Througho	ut									_		Ф	
		77.7			X		R	ACM		Entire Structure	х			
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Name	of Registered Waste	Hauler		- 1	10000									
	uzzi Group, Inc.	riduici		H	JDEP Wauler ID	/aste No.	Cubic Y of Wast		Name of	Registered Landfill				
City, S					7467		500	53	GROW	/S/Fairless				
All harmone	lon, NJ						Disposa		City, Stat					
Comple	eted by		Title					6/30/1	9/ Morrisv	rille, PA				
John	Mucha			roject	Mana	ger	Sig	mature	//	Dat	e_/	1	1	
ASD 44	(B.06.08)							1V			<u> </u>	28/	116	
	(R-06-08)						-	po not u	se this form for	asbestos licensure	avam	ntad -		1

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Date of Notification (1)		NO	TIFICATI (Pursua	ON OF	ASBESTO JAC 8:60 a	SARATE	MENT D)) E C	E		\mathbb{V}	
6/3/19			Name	e of Buil	ding Owne	r/Operator	(2)	111			_		The state of the s
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Agencies Notified Type Notificat	ion		F 6000000	t Addres				+	-			010	
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Amended	1				ip Code				ASBEST L	CEN.	SING	HOL	હ્ય
Emergen	ent # cy (includi	ina	Pisc	atawa	y, NJ 08	854		- or transportation	ort. Across Sandrate Springers	-		-	
justification justification	on)	ing		of Con				T.	ala-b 1				
L Cancella	tion		Joan	n Sitler	-				elephone N 48-445-2				
Name of Facility Where Abatement is Ta	kina Di-	(0)	FA	CILITY	INFORMA	TION				2404			
Building I Corwin Buildings, Coo	k Dougl	(3)					Type of Facil	ity (4)					
Street Address	ik Dougi	as Ca	ampus				School (
8346 Nichol Ave.							Subchar	pter 8 (Oti	her than K-	12)			
City (5)							Other (i. etc.)	e. private	& commer	cial b	uildin	gs, ho	me
New Brunswick, NJ				- N-577			Square Feet		of Floors				
County (6)							1700	2	01110015		50+	. Age	
Middlesex			County	Code ((7)		Current Use (ing demoli	ahad)			
Name of Monitoring Firm Hired by Buildin			STATE	USE O	NLY)		Former Do	rmitory	ang demon	snea)			
N/A (Demolition)	g Owner (8)	ASC	M No.			f Abatement (r (Q)				
Street Address						Yannı	uzzi Enviro	nmental	Service	e Ind	_		
						Street A	ddress		OCI VICE	5, 1110	J.	-	
City, State, Zip Code						The second secon	innelon Rd	Suite	102				
ony, crate, zip code							ite, Zip Code	. Gaite	102			745	
Project Manager for Monitoring Firm						Kinnel	on, NJ 074	05					
reject Mariager for Monitoring Firm			Telepho	one No.		Telepho			Liene				- 12
Start Date (10)							18-0880		License N 01228	VO.			
6/24/19	Schedu	iled Co	mpletion	Date (1	1)		OSHA Monito	or	01220				
Occupancy Status During Abatement (Che	7/13/	19					zzi Environ		Services	Inc			
Facility Closed/Vacated During Entire	eck Only C	ne)				Street Ac	idress		OCI VICES	, IIIC			
	Period of	Abate	ment			135 Ki	nnelon Rd.	Suite 1	02				
Abatement Performed Outside of Nor Other – Describe:	mal Facili	ty Hour	rs				e, Zip Code		02				
Scope of Work (Check All That Apply)			Western 1991				on, NJ 074	05					
] ≥3 sf or ≥3 lf	_												
≥160 sf or ≥260 lf		Renova					Full Contains	mant !!!.	N .				
<u> </u>	X	Demoli	ition				Full Contains Mini-Enclosu	re	Negative F	ressu	ire		
						×	Glovebag Pro	ocedure					
	Is	s Locat	ion				Non-Exempte	ed (*) and	Non-Friab	le Pro	10.00		
Location of		Norma	lly		_	-002000 at						emen	t
Asbestos-Containing Material (ACM) TO BE ABATED	Use	ed Sole aintena	ely by	Asbe	Des estos Conte	cription of	erial (ACM)			-	T 1	уре	_
In Facility		todial S		(i.e	e. inermal s	systems in	sulation	Fr 33350	nount Decify	-		ш	1.
(13)		(12)			surfac	ing, VAT, c	or		or LF)	Remova	Repair	Encapsulate	Liciosule
	Yes	No	NI/A		oulei m	iscellaneou	ls)			lova	pair	lusc	USU
Throughout	100	INU	N/A							_		ate	G
oagnout			x		R	ACM		Entire S	Structure	v			-
									- acture	Λ			
	1												
me of Registered Waste Hauler		1	IDEE										
nnuzzi Group, Inc.		N.	JDEP Wa	iste Jo	Cubic Y		Name of	Registere	d Landfill				
			7467	10.	of Waste	е	SI C	S/Fairle					
y, State		1			Disposa	I Data			.00				
nelon, NJ						7/13/19	City, Stat						
							Morrisv	ille, PA	2-12/2		1	1	1
mpleted by	Title											- /	
	-	oject	Manag	er	Sig	nature	MA		Date	5	12.	8/1	9
mpleted by	-	oject	Manag	er	Sig	That the state of	MI		Date	5	12.	36	9

OKOORSOB PA	ID	NOTIF	CATIO	tate of New Jo N OF ASBEST t to NJAC 8:60	OS ABATE	MENT 0)	DE	C [V	55
Date of Notification (1) 5/28/19				of Building Own		r (2)	Company of the Compan	MAY .	? 1 /	2010	1
				ers Universi	ty		14 [4]	MINI .		2019	l la
				Address	חא				**************************************		
EPA Initial Amended				nightsbridge ate, Zip Code	Ru.		ASE	ESTOS HCF	CON	TROL	હ્ય
DOL Amendment	#			taway, NJ 0	18854				1401137	3	-
DOH Emergency justification)	includin	g		of Contact			Telephone	e Numbe	ır		
DCA Cancellation			Joan	Sitler			848-445				
			FAC	ILITY INFORM	IATION	Tr					
Name of Facility Where Abatement is Takin						Type of Facility (4)				
Building J Corwin Bldgs, Cook Dou	igias C	ampu	IS			School (K-1					
8346 Nichols Ave.						Subchapter Other (i.e. p	8 (Other than private & comm	K-12)	uilding	s hom	200
City (5)						etc.)			55.1 		cs,
New Brunswick						Square Feet 1700	# of Floors	5	Bldg. 50+	Age	
County (6)		T		Code (7)		Current Use (Price	_	nolished)			
Middlesex			8	USE ONLY) _		Abandoned	•				
Name of Monitoring Firm Hired by Building (Owner (8	3)	ASCI	M No.		of Abatement Cor					
Street Address						nuzzi Environm	nental Servi	ices, In	c.		
Olicet Address					N. 225 S.	Address Kinnelon Rd.					
City, State, Zip Code						State, Zip Code					
						elon, NJ 07405	5				
Project Manager for Monitoring Firm		T	Telepho	ne No.		none No.		se No.			-
					908-	448-5709	0122	28			
Start Date (10) 6/20/19			npletion	Date (11)	110000000000000000000000000000000000000	of OSHA Monitor					
Occupancy Status During Abatement (Check	7/13/1	277				nuzzi Environm	ental Ser v	ices, Ir	ic.		
AND STREET STREET	_					^{Address} Kinnelon Rd. S	uito 100				
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm	al Facilit	Abaten v Hours	nent		1	tate, Zip Code	uite 102				
Other – Describe: Abandoned Property						elon, NJ 07405	5				
Scope of Work (Check All That Apply)					1 3 3 7 7	0,0,1,1,0,0,1,00					-
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	_	Renova Demolit			×	Full Containme Mini-Enclosure Glovebag Prod Non-Exempted	edure			re	
	100	s Locati	(1777-7						Abat	ement	
Location of		Normal ed Sole			Description			_	T	уре	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	aintena stodial S (12)	nce/	(i.e. then	Containing M mal systems urfacing, VA er miscellan	T, or	Amount (Specify SF or LF)	Kemova	Repair	Encapsulate	Enclosure
	Yes	No	N/A							te	
Entire Structure			Х		RACM		1700 SF	X			
Name of Registered Waste Hauler			105011								
Yannuzzi Group, Inc.		Н	JDEP W auler ID	No. of	bic Yards Waste		Registered Lar	ndfill		on a series	
City, State		1	7467	50			S Fairless				
Kinnelon, NJ				1 (0.000)	posal Date	City, State					
Completed by	Title				Signature	Morrisvi	ile, PA	D-t-			
John Mucha	110000000000000000000000000000000000000	ect Ma	nager		Oignature	KIW		Date	5	-28	7-19

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

FIIIR FUITH

UK 102803	B PA				to NJAC				NI I	IU		5 1	W		
Date of Notification (1) 5/28/19		Street of a land of a college.	- 1		Building		perator	(2)	100		MAY	3 1	2010	-	
Agencies Notified	Type Notification			Street A	rs Unive	ersity				LI LI	FALL/	0 1 6	2019	- I	-
	10 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -		71		ghtsbrid	dge Rd	_		1		ACDECTO	. 6.0.	Arra At		
EPA DEP	Initial Amended		_		te, Zip Co	•		- 115	1		ASBESTOS LICE	NSING	HO G	- de	-
Ø DOL	Amendmen		-	Piscat	away, N	IJ 0885	54		be			***************************************	dan dan paga bagian	the case of the	mere I
□ DOH	Emergency justification				Contact						Telephone Nu	mber			
☐ DCA	Cancellatio	1		Joan S							848-445-24	104			
Name of Facility Where	Abatement is Takir	ng Place (3)		FACI	LITY INFO	ORMATI	ON	Tv	pe of Facility	, (1)		-			
Building K Corwin I			mpu	S				1 7	• · · · · · · · · · · · · · · · · · · ·						
Street Address								H		er 8 (C	Other than K-1				
8346 Nichols Ave.								×	Other (i.e. etc.)	. priva	te & commerc	ial buil	dings	home	es,
City (5)								100	uare Feet	#	f of Floors	В	Bldg. A	ge	
New Brunswick									700		2		5 0+		
County (6) Middlesex				County C	Code (7) ISE ONLY)					being demolis	hed)			
Name of Monitoring Firm	Lirad by Building	Ournes (9)					Name		bandoned						
N/A	i Filled by Building	Owner (o)		ASCM	I NO.				Abatement C		tor (9) tal Services	. Inc			
Street Address	10						Street			mom	ai ocivioco	, 1110.			
									nelon Rd.						
City, State, Zip Code							City, S	State	, Zip Code						
							Kinn	elo	n, NJ 074	05					
Project Manager for Mor	nitoring Firm			Telephor	ne No.	V-0.00	Teleph				License N	No.			
Start Date (10)		Cabadulas	10	-1-4: F	D-4- (44)		15.5.5		3-5709		01228				
6/20/19		Scheduled 7/13/19	Corr	ipietion L	Jate (11)				OSHA Monito		al Ser vice	e Inc			
Occupancy Status Durin	g Abatement (Che	1775 UNSBERGE)				Street					0, 1110			
Facility Closed/Vac				ent			135	Kin	nelon Rd.	Suite	102				
Abatement Perform	ned Outside of Nor	mal Facility I	Hours)			City, S	state	, Zip Code						
Other – Describe:		TV				_	Kinn	elo	n, NJ 074	05					
Scope of Work (Check A	II That Apply)	_						_							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		_	novat moliti				-		Full Containi Mini-Enclosu		vith Negative	Pressu	re		
		<u>M</u>	monu	OII			×	1	Glovebag Pr	ocedu					
		T						บ	Non-Exempt	ed (*)	and Non-Fria	ble Pro			
			ocation of the contract of the	2000									Abate Ty	pe	
Location Asbestos-Containing		Used	Solel	y by	Asbes		scription		rial (ACM)		Amount			_	
TO BE AB In Faci	ATED	Custo	tenar dial S			thermal	systems	s ins	sulation,		(Specify	Re	R	nca	Enc
(13)			(12)				cing, VA niscellar				SF or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A								<u>m</u>		ate	Te
Entire Str	ucture			x		F	RACM			1	1700 SF	X			H
		+	11000 11							-	1700 01	+			
											- 1157/1071 - 115				
												-			
Name of Registered Was	ste Hauler		- KI	JDEP W	acto	Cubic	Varda		Non	f De-	otorod I Je				
50.54 (0.545)				auler ID		of Was	All the Contract of the		6.00	- 17	stered Landfi	1			
Yannuzzi Group, Ind	J.		17	7467		500					airless				
City, State Kinnelon, NJ							sal Date		City, St		DA				
Completed by		Title				7/13/	N 1		Morris	sville,		ote	1	,	
John Mucha		Projec	t Ma	nager		5	igilature	1	M		D	ate	20	/0	
		1,50				1	77	1	V			1/-	0/	/ 7	
ASB-41 (R-06-08)							Do no	ot us	e this form f	or asb	estos licensui	e exen	npted	activi	ties.

State of New Jersey

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Date of Notification (1) 5/22/19				Name of Macer	f Building ich	Owner/0	Operator	(2)		M	AY 3	1 201	9		川
Agencies Notified	Type Notification			Street A	ddress			-	1 1					1	
✓ EPA	Initial		4	101 S	anta M	onica	Blvd.	Suite	e 700	ASBE	STOS	CONTR	OL 8	_l	Antion
√ DEP	Amended			11/5	ite, Zip Co						LICE	VSING		OSSET VILLAGE	
DOL.	Amendment F.mergency				Monic	a CA	90401								
✓ DOH	justification)				f Contact					1 2 2 2 2 2	phone N				
L DCA	Cancellation	1	/	1200508-188080	in Ghat	STATE OF THE STATE				424	-229-	-3387			
Name of Facility Where A	batement is Takir	ng Place (3	3)	FACI	LITY INFO	ORMAI	ION	Type	of Facility (4)					
Former Sears Sto		,	*						School (K-12						
Street Address									Subchapter 8	3 (Othe					
1750 Deptford C	enter Road	d						1	Other (i.e. pr tc.)	ivate &	comme	ercial build	ings.	home	2S.
City (5)						// ///////////////////////////////////		and the same of th	e Feet	# of	loors	BI	dg. A	ge	
Deptford Townshi	р							1500		2)+		
County (6)					Code (7) USE ONLY			Currer	nt Use (Prio nt	r if bein	g demo	lished)			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCN	1 No.		Name	of Abat	ement Cont	ractor (9)				
IPR Associates &				7801	12		Asso	ciate	d Specia	ality (Contr	acting	Inc		
Street Address							Street		74						
191-20 115 Road							98 La								
City, State, Zip Code							City. St			10					
Saint Albans NY 1									Pa. 193						Society.
Project Manager for Monit	toring Firm			Telepho	ne No.		Teleph 610-3			15	1 icenso 0110:				
Paul Olisah Start Date (10)		Schodul	od Com	anlotion I	Date (11)		ENGLASSING AND		A Monitor		0110				-
5/7/19		6/28/1		ipiction	Date (11)		Syne								
Occupancy Status During	Abatement (Che	ck Only Or	nc)				Street								
Facility Closed/Vaca									oad St						
Abatement Performe Other - Describe:	ed Outside of Norr	nal Facility	/ Hours				City, St			1115					
							Phila	ueipi	nia Pa 1	9143				-	
Scope of Work (Check All	That Apply)	[mar]					V]				- D			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demolit				✓	Mini	Containme i-Finclosure vebag Proce	edure	•				
					Т			Non	-F.xempted	(*) and	Non-Fr	-			
		5000	Locati											ment pe	189
Location		100000000000000000000000000000000000000	Normal d Sole	Carlo Carlo	A-1		scription taining M		(0.000)	٨٥	nount			_	
Asbestos Containing I TO BE ABA		Ma	intenar	nce/			systems				pecify	Re	D	inca	Enc
In Facilit	And the second second	Cus	todial S (12)	staπ?			cing, VA			SF	or LF)	Remova	Repair	Encapsulate	Enclosure
(13)				1		Otheri	macchan	cous				(a)	-	late	lle
A. I. O. I.	- Doof	Yes	No	N/A			roofing			8/1	00 sf	x			
Auto Center		X					vat				00 SI 00sf	×			
Main Buil		×				Flue p	ipe Insu	ulation			301f	×			
				-				73.00	-		500sf	×			
Main Building 1	Contract of the contract of th	×		JDEP W	lasto		or mast	iiC i	Name of I-						
Name of Registered Was		ations.	1	auler ID		of Wa			Tulleytov				N/Arv	lar	ndfill
Mercer Grou	p interna	auona	1 1			200	Call (S.)				Source		, v Cı y	Lai	-GIIII
City, State 1519 Rev S. Howard	d Woodson Ir	· Way -	Crento	on. N.I	08637		sal Date eeded		City, State Tulleyto		PA				
Completed by	u vvoodon on	Title		, . 10			Signature					Date			
Jack Tomasura			Estim	ator)(1/	11/1	mark	M		5/30/1	9		
ASR-41 (R-06-08)						1	Do no	ot use th	nis form for	asbesto	s licens	sure exen	pted	activi	ities.

PAID

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

CK#1043

Date of Notification (1)	· A BARRED	·			Mana	-f D. Halla	- ^		0) [э П	F) [7]	12	
05 /	30 /	19			2009000	ntander E		ner/Operator (2)	JEC E		\mathbb{V}_{-}		m
		110000					Jank	, 14.7.		2				
Agencies Notified	Type Notifica	ation			1117=17-1001	Address			District of the second	MI) + .			
⊠ EPA ⊠ DOLWD	☐ Initial ☐ Amended	E			1	State Stre				MAY 3	0 2	2019		1
☑ DHSS	Amendme					State, Zip C				ĺ			4	
☐ DCA	☐ Emergen		uding			ston, MA				ASBESTOS	CON	TRO	8	
(NJAC 5:23-8)	justification				Control of	of Contact	7.5			Telephone Num	hesino	3		
	☐ Cancellat	ion			Sus	san Peck			1-44	617-757-563	32		-	
					FA	CILITY IN	FOF	RMATION						
Name of Facility Where A	Abatement is T	aking F	Place	(3)					Type of Facility	(4)			Paylin	
Santander Bank									School (K-12					
Street Address										8 (Other than K-12 rivate and comme		ilding	8	
463 Washington Av	renue								homes, etc.)		roidi be		٠,	
City (5)									Square Feet	# of Floors	Ble	dg. A	ge	
Belleville, NJ 0710	9								2,500	1		45		
County (6)					Cour	ity Code (7)(STA	TE USE ONLY)	Current Use (Pr	ior if being demoli	shed)			
Essex														
Name of Monitoring Firm	Hired by Build	ling Ow	mer (8	3)	ASCM	No.	Nar	me of Abateme	ent Contractor (9)	N	WV-0-00			
Hillmann Consultin	g				6225	52	J	VN Restora	tion Inc					
Street Address							Stre	eet Address						
1600 Route 22 East							4	7 Foster Ro	ad					
City, State, Zip Code							City	, State, Zip Co	ode					
Union NJ 07083							S	taten Island	NY 10309					
Project Manager for Mon	itoring Firm			Tele	phone	No.	Tele	ephone No.		License No.				
Tammy Lomax				9	08-577	-6171	7	18-605-6256	i	00774				
Start Date (10)	S	Schedul	ed Co	mple	tion Da	te (11)	Nar	me of OSHA N	onitor		7 2 -			
06 /10 /	19	07	/	08	3_ /	19	Т	estor Tech						
Occupancy Status During	Abatement (0	Check o	only o	ne)			Stre	eet Address						
☐ Facility Closed/Vacate					ment		1	0 59 Jackso	n Avenue					
Abatement Performed						cribe	200	, State, Zip Co						-
Time of Abatement: _/	AMPM	<u>/6:00</u> F	PM- <u>2:</u>	<u>30</u> A	M		10 333	IC NY 11101						
Scope of Work (Check al	I that apply)													_
									tainment with Neg	gative Pressure				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			Rer Der Der Rer Rer Rer Rer					☐ Mini-End	losure g Procedure					
△ ≥ 100 31 01 ≥200 11		_	_ Del	ionti)11					n-Friable Procedu	re			
				Loca							Ab	atem	ent T	ype
Location				orma	lly ely by			Description of				_		
Asbestos-Containing TO BE ABA)			ince/			Containing Ma rmal systems		Amount (Specify	em	Repair	nca	nclo
IN Facili			Custo		Staff?	(1.0		surfacing, VAT		SF or LF)	Removal	=	Encapsulate	Enclosure
(13)			V	(12)	1 21/0	-	oth	ner miscellane	ous)		-		late	o l
Decement IIVAC Dec			Yes	No	N/A	Di I				40515				
Basement HVAC Roo						Pipe Ins				125 LF				
Basement HVAC Roo		-				Duct In:				300 SF				
Basement HVAC Roo	om					Viberat	tion	Cloth		5 SF				Ш
										1				
Name of Registered Was	te Hauler			1,000	IJDEP \		0.000	oic Yards of	Name of Regis					
Newark Carting				F	lauler II NJ-56		Wa:	ste 5	Grand Cer	ntral Sanitary La	andfill			
City, State					110-00			posal Date	City, State					
Newark, NJ							0	6/20 /19	Pen Argyl,	Pa				
Completed By (Print or T	ype)	Title						Signature	The state of the s	D	ate #		1	
Ignatius Marraccino	5.50 (6)		ject	Man	ager			0	- in		- 1	ウム	1	9
	A	100			· • · · ·			Von	du 17 Ka	nuccio	21	30	16	1

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

				(Pt	ırsuar	nt to NJA	C 8:60 and 5:10	6)						Carolitation age
Date of Notification (1)					Name	of Buildin	g Owner/Operator (2)		MAY	3	1-20)19	- 11
05/	17 /	19					Bank, N.A.							
Agencies Notified	Type Notifi	ication			Street	Address			-	ASBEST	JS C	ONT	HOL	i
⊠ EPA					75	State Str	eet			LK	CENS	SING	-	
□ DOLWD	☐ Amend	ed				State, Zip (100.481.40-4		
□ DHSS	Amend					ston, MA								
DCA	☐ Emerge		cluding	1		of Contac			Tolonh	one Numb	~-			
(NJAC 5:23-8)	justifica Cancell				100000	san Peck				-757-5632				
							IFORMATION							
Name of Facility Where A	batement is	Taking	Place	(3)		012111111	ii Oranizariora	Type of Facility	(4)					
Santander Bank			, , ,,,,,,	(0)				☐ School (K-12						
Street Address				_				Subchapter 8		than K-12)				
463 Washington Av	02110							Other (i.e., p	rivate an		ial bu	ilding	s,	
	enue							homes, etc.)			100			
City (5) Belleville, NJ 07109								Square Feet	# of F	loors	-	dg. A	ge	
County (6)	3			8-0-1-5-	Cour	tu Codo /7)(STATE USE ONLY)	2,500	1			45		
Essex					Cour	ity Code (7)(STATE USE UNLY)	Current Use (Pri	or it bein	ig aemolisr	iea)			
Name of Monitoring Firm	Hired by Ru	ildina (Juner (8)	ASCM	No	Name of Abateme	nt Contractor (0)				67/	_	
Hillmann Consulting		numg (JWIICI (0)	6225		JVN Restorat	March 1981						
Street Address	9		-		0220	,,,	Street Address	ion me						
1600 Route 22 East							47 Foster Roa	ad						
City, State, Zip Code				-			City, State, Zip Co							
Union NJ 07083							Staten Island							
Project Manager for Monit	toring Firm			Tele	phone	No	Telephone No.	10000	Licen	se No.				
Tammy Lomax				10000	8-577		718-605-6256			774				
Start Date (10)		Sched	luled C	omple	tion Da	te (11)	Name of OSHA M	onitor				VI		
06 /03 /	19					19	Testor Tech							
Occupancy Status During	Abatement	(Checl	c only c	ne)			Street Address							
□ Facility Closed/Vacate	d During En	tire Pe	riod of	Abater	nent		10 59 Jackson	n Avenue						
Abatement Performed						cribe	City, State, Zip Co	de						_
Time of Abatement: _A	MP	M/ <u>6:00</u>	_PM- <u>2</u>	:30 AI	VI		LIC NY 11101							
Scope of Work (Check all	that apply)													_
≥3 sf or ≥3 If			⊠ p _o					ainment with Neg	ative Pre	essure				
≥160 sf or ≥260 lf			⊠ Re □ De	molitic			☐ Mini-Encl	osure i Procedure						
<u> </u>	-2-2/17/08/21/08-17				25	VA		npted (*) and No	n-Friable	Procedure)			
				Locat							Ab	ateme	ent Ty	уре
Location Asbestos-Containing N		B.A.		lorma d Sole			Description of			. Skole v Skole s k ed	Z.	Z	ш	Ш
TO BE ABA		ivi)	0.0000000000000000000000000000000000000	intena			stos Containing Mat ., thermal systems i			ount ecify	Removal	Repair	пса	Enclosure
IN Facilit			Cust	odial	Staff?	(surfacing, VAT,	or		or LF)	ova	=	psu	Sur
(13)			V	(12)	N1/0	1	other miscellaned	ous)		1000 (1000 € 11)			Encapsulate	e
Basement HVAC Roo			Yes	No	N/A	D: I								
							sulation			5 LF			Ц_	
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Basement HVAC Roo	m		\boxtimes			Viberat	tion Cloth		5	SF				
Name of Registered Wast	e Hauler			01 339	JDEP V		Cubic Yards of	Name of Regis	tered La	ndfill				
Newark Carting				H	auler ID NJ-56		Waste 25	Grand Cen	tral Sar	nitary Lar	ndfill			
City, State							Disposal Date	City, State						
Newark, NJ							06/20 /19	Pen Argyl,	Pa					
Completed By (Print or Ty	pe)	Title)				Signature			Date	е :		I	-

Ignatius Marraccino

Project Manager

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CK1002	PAI	D	OTII		ırsuar	nt to NJA	AC 8:60	OS ABA1 0 and 5:1	6)	D) EC	E		W		
Date of Notification (1) 05 /	30 /	19			P House	of Buildin		r/Operator (2)	The same of the sa	l MAY	3 1	2	019		U)
Agencies Notified	Type Notifie	otion	<u> </u>		Ctrool	Address	and the second			Ind &	4		-	713	- [1	******
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⊠ DHSS	Amendm					State, Zip			Ĺ		L-1(CENS	ING		inimate and a	
DCA	☐ Emergen	ncy (inclu	ding		Hill	side, NJ	07642									
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	batement is	Taking Pl	ace	(3)					Type of Facil	ity (4)					
Bank of America									School (K							
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84 Park Avenue									homes, et		rate and con	mercia	וו וו	namg	S,	
City (5)									Square Feet	,	# of Floors		Blo	dg. Ac	ne .	
Hillside, NJ 07642									5,000		1		1 .	45	, -	
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	rined by built	ullig Owl	iei (o	"	ASCIVI	NO.	1.000		ent Contractor	(9)						
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Street Address							1	Address	20							
								oster Ro								
City, State, Zip Code							City, S	state, Zip Co	ode							
							Stat	ten Island	NY 10309							
Project Manager for Moni	toring Firm			Tele	phone	No.	Teleph	none No.			License No					
Dino Nappi				51	6-972	-8809	718	-605-6256			00774					
Start Date (10)	5	Schedule	d Co	mple	tion Da	te (11)	Name	of OSHA M	lonitor							
06 /08 /	19	06	_ /	23	_ / _	19	Tes	tor Tech								
Occupancy Status During	Abatement (Check or	nly or	ne)			Street	Address								
☐ Facility Closed/Vacate	d During Enti	re Period	of A	bater	nent		10-	59 Jackso	on Avenue							
							City, S	tate, Zip Co	ode							
			30 P	PM- <u>S</u>	aturda	ıy,	A POSTANCE	NY 11101								
Scope of Work (Check all	that apply)	AM					1000			DVCHS						
	and the same of th	70.00						☑ Full Cont	ainment with N	lega	tive Pressure)				
≥3 sf or ≥3 if ≥160 ef or >260 if		\boxtimes		ovation			_	Mini-Enc								
△ ≥100 SI OI ≥200 II			Den	nolitio	П		ŀ	☐ Glovebaç	Procedure mpted (*) and	Non-	Friable Proce	edure				
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Location	of		No	ormal	ly		D	escription o	f			-		ateme		
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	у			(12)				acing, VAT, miscellane			SF or LF)		a		Encapsulate	ure
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1 st Floor	1414]			Floor T	ile and	Mastic			650 SF		\boxtimes			
1st Floor			1			Cove B	ase Ma	stic			75 LF		\boxtimes			
	11117]													
Name of Registered Wast	e Hauler			N	JDEP V	Vaste	Cubic '	Yards of	Name of Re	giste	red Landfill			_		, (C
Newark Carting				Н	auler ID		Waste 15			_	al Sanitary	Land	lfill			
City, State					.10-00			al Date	City, State						Mark Hilliam	
Newark, NJ								3/2018	Pen Arg	yl, P	Α					
Completed By (Print or Ty	pe)	Title		100 W	-		Si	gnature //	1/1	-	_	Date				
Ralph Barnhardt	W 45	Proje	ect l	Vlana	ager			Mille	It has	2	フ	US	-	30	- i	9

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

Date of Notification (1)				Name	of Building	g Owr	ner/Operator (2)	THE MAN	V 2 1	0044		
05/21/	19				nk of Am				JLI MA	Y 3 1	2019	1	
Agencies Notified Type Not	fication			Street	Address			and the state of t					-
☐ EPA ☐ Initial	J_ J			84	Parkl Ave	enue		and the same of th	ASBEST	IOS CO)L&	
☑ DOLWD ☐ Amen ☑ DHSS Amen	dea dment #			City, S	State, Zip C	Code		T- com		Mary Mary Control		-	P24
□ DCA □ Emerg		- 10 No. of the Co.	1	Hill	side, NJ	0764	12						
(NJAC 5:23-8) justific	ation)	-		Name	of Contac	t			Telephone N	lumber			
☐ Cance	llation			Din	o Nappi				516-972-8	8809			
				FAG	CILITY IN	IFOR	RMATION			J. 1100 - 1400			
Name of Facility Where Abatement	s Takin	Place	(3)			27111121		Type of Facility	(4)				
Bank of America								School (K-12					
Street Address								☐ Subchapter ☐ Other (i.e., p	8 (Other than K	(-12) mercial	huildin	ne.	
84 Park Avenue								homes, etc.)		merciai	bullani	90,	
City (5)								Square Feet	# of Floors		Bldg. A	ge	
Hillside, NJ 07642								5,000	1		45		
County (6)				Cour	ity Code (7)(STA	TE USE ONLY)	Current Use (Pr	ior if being dem	nolished)		
Bergen													
Name of Monitoring Firm Hired by E	uilding (Owner ((8)	ASCM	No.	Nan	me of Abateme	ent Contractor (9)					
ARCADIS U.S Inc.						J'	VN Restorat	tion Inc					
Street Address						Stre	eet Address						
44 South Broadway	Code s, NY 10601					4	7 Foster Ro	ad					
City, State, Zip Code						City	, State, Zip Co	ode					
White Plains, NY 10601	de NY 10601					S	taten Island	NY 10309					
Project Manager for Monitoring Firm			Tele	phone	No.	Tele	ephone No.		License No				
Dino Nappi	, NY 10601 for Monitoring Firm Scheduled C					7	18-605-6256		00774				
Start Date (10)	ppi 10) Scheduled						ne of OSHA M	lonitor					
06 /01 /19	Manager for Monitoring Firm Nappi ste (10) Scheduled						estor Tech						
Occupancy Status During Abateme	t (Chec	k only o	one)			Stre	et Address						
					200	10	0- 59 Jackso	on Avenue					
						City	, State, Zip Co	ode					
			. IVI- <u>O</u>	aturuc	.y.	L	IC NY 11101						
Scope of Work (Check all that apply)						N 5-11 0	-i in No.					
☐ >3 sf or >3 lf		⊠ Re	novati	on			☐ Mini-Enc	ainment with Neo losure	gative Pressure)			
⊠ ≥160 sf or ≥260 lf		☐ De	molitic	n			☐ Glovebag	g Procedure					
		1 10	Loop	ion	1		∐ Non-Exe	mpted (*) and No	n-Friable Proce	- 1			
Location of			Locat Norma				Description o	f			baten	T	ype
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TO BE ABATED			intena todial			., the	rmal systems	insulation,	(Specify	Zaliova)air	aps	Enclosure
(13)			(12)				urfacing, VAT, ner miscellane		SF or LF)	<u> </u>	-	Encapsulate	ле
		Yes	No	N/A								e	
1st Floor		\boxtimes			Floor T	ile aı	nd Mastic		650 SF	D			
1 st Floor					Cove B	ase l	Mastic		75 LF	D			
												П	
Name of Registered Waste Hauler			I	JDEP \		Cub	oic Yards of	Name of Regis	stered Landfill				
Newark Carting			F	NJ-56		Was	7/1		ntral Sanitary	Landf	ill		
City, State				140-00			oosal Date	City, State					
Newark, NJ						06	6/08/2018	Pen Argyl,	PA				
Completed By (Print or Type)	Date (10) Date (10)						Signature/ /		1	Date			
Ralph Barnhardt	1 - 335		Man	ager			Milh	Ahr		05	-21	-10	î

CK# 1210 PAI			CATION	te of New OF ASBES o NJAC 8:	STOS	ABATE		The state of the s),[E C	E		/		7
Date of Notification (1)	Y			Building O	wner/O	perator	(2)		1				504 (196)	necessaria secucione	Charleson of the Control of the Cont
05/29/2019			Mike G	CONTRACTOR OF THE PARTY OF THE					Ш	MAY	3	20	119		الا
Agencies Notified Type Notification		1 3	Street Ad	ldress outh Livir	agetor	Δνο		1							100
EPA Initial		-		e, Zip Cod		IAVE	_	The state of the s	L	SBEST	08.0	TNO	BOL	8	-
DEP Amended Amendment #_				ston, NJ		a		and the same of th	P		CENS				Supplied to
Emergency (in	cluding		Name of		0700			Toron Mobile	Te	lephone	Numh	er			
DOH justification) Cancellation			Mike	Jornado					4	портисто	, , , , , , ,				
			FACIL	ITY INFO	RMATI	ON	072		-	-					
Name of Facility Where Abatement is Taking	Place (3)					Туре	of Facility (4)						
Commercial property								School (K-1							
Street Address								Subchapter Other (i.e. p				huildi	inae l	nome	
531 S Livingston Ave							<u> </u>	etc.)			erciai	bullul	iigs, i	iome	5,
City (5)							Squar	re Feet	# (of Floors		Ble	dg. Ag	ge	
Livingston										.,					
County (6)			County C	code (7) SE ONLY)			Curre	nt Use (Pri	or if be	eing dem	olishe	d)			
Essex			ASCM			Mana	-f Ab-	tement Cor		- /O\					
Name of Monitoring Firm Hired by Building Ov	vner (8)		ASCM	INO.		ı		Safety LL		1 (9)					
Street Address						800000	Addres								
						8 Cr	osby	Ave							
City, State, Zip Code						City, S	tate, Z	ip Code							
						Pate	erson,	NJ 0750	2						
Project Manager for Monitoring Firm			Telephor	ne No.		Teleph	none N	0.		Licens	se No.	ili.			
			ULTI Integration			973-	400-8	3711		0133	32				
			npletion [Date (11)		(800,000,000)	(m) (m)	HA Monitor	\$						
7.7.7.7.7	06/12/						ne as	<u> </u>							
Occupancy Status During Abatement (Check	Only Or	ie)				Street	Addres	SS							
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe: 8:00am - 4:30pm	riod of A I Facility	Abatem Hours	ient		_	City, S	State, Z	ip Code		11.45 15.66.4					
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit				>	Mir Glo	ll Containm ni-Enclosur ovebag Pro n-Exempte	e cedure	Э				e	
	Is	Locati	ion									3	Abate		
Location of		Vormal			De	scription	n of					_	Ту	pe	_
Asbestos-Containing Material (ACM) TO BE ABATED		d Sole				taining N system		I (ACM)		Amount (Specify		וג	to except	Ē	Ш
In Facility	Cus	todial (12)	Staff?	(1.0.	surfa	cing, VA	T, or	auori,		SF or LF))	Remova	Repair	Encapsulate	Enclosure
(13)		(12)			other r	miscella	neous)					oval	air	sular	sure
	Yes	No	N/A	*										te l	
Basement			х		F	loor tile	es			300 SF		х		х	
Name of Registered Waste Hauler		I	JDEP W	/aste	Cubic	Yards		Name of	Regis	stered La	ndfill				
Removal Safety LLC		H	lauler ID 03700	No.	of Wa	iste		Fairles	SS						
City, State Paterson, NJ					Dispo	sal Date	9	City, Sta Morris		DΛ					
Completed by	Title					Signatur	6)	IVIOITIS	ville,	1 /	Dat	Δ			
Lasko Veskov		sident				~	no	101		/		The second	2019)	

CK# 1200	PAI	D	NOT	FICATIO	State of N ON OF AS nt to NJA	BESTOS	ABATE	MENT [7,6	C	E I	\mathbb{V}		7
Date of Notification (1) 05/29/2019					of Buildin	g Owner/	Operator	r (2)		MAY	3 1	2010	and the second	₩
•	e Notification				Address				4	IMIWI	0 1	2013		
					South L	ivinasta	η Δνα	A Section	1_					- Contraction
DEP	Initial Amended				tate, Zip (III AVE		A	SBESTO	S COI	OHTI	- Ø	
× DOL	Amendment	#			gston, N		39	1	and the second s	LIC	CINON		-	
ĭ DOH	Emergency justification)	(includin	g		of Contac				TT	elephone	Numbe			
DCA	Cancellation			Mike						elephone	Nullibe	31		
Name of Facility Where Abate	ment is Takin	g Place	(3)	FAC	ILITY IN	FORMAT	ION	Type of Facilit	. (4)					
Commercial property														
Street Address								School (k	(-12) er 8 (O	ther than	K-12)			
17 E. Northfield Rd								X Other (i.e	. private	e & comm	nercial b	uilding	s, hon	nes,
City (5)								etc.) Square Feet		of Floors				
Livingston								- 4-4-6	"	01110015		Bldg	Age	
County (6)				County	Code (7)			Current Use (F	rior if b	eina dem	olished			
Essex				(STATE	USE ONL	n		2		3		7		
Name of Monitoring Firm Hired	d by Building (Owner (8	3)	ASCI	M No.			of Abatement C		or (9)				
Street Address							Rem	oval Safety L	LC					
on out Address								Address						
City, State, Zip Code								osby Ave						
							20.00	tate, Zip Code	00					
Project Manager for Monitoring	Firm			Telepho	ne No			rson, NJ 075	02	1			10,000	
	(2003/10/10/20)			reieprie	nie IVO.			one No. 400-8711		Licens				
Start Date (10)		Schedu	led Co	mpletion	Date (11)	,		of OSHA Monito		0133	2			
06/08/2019		06/12	/2019		_ == (, ,)			e as (9)	1					
Occupancy Status During Abat	ement (Check	Only O	ne)					Address						
Facility Closed/Vacated D	uring Entire P	eriod of	Abater	ment										
Abatement Performed Ou Other – Describe: 8:00ar	tside of Norma	al Facilit	y Hour	rs			City, St	ate, Zip Code						
Scope of Work (Check All That	Apply)													
≥3 sf or ≥3 lf		×	Renova	ation			П	Full Ot-i-						
≥160 sf or ≥260 lf			Demoli					Full Containn Mini-Enclosu	nent wit re	th Negativ	e Press	sure		
							×	Glovebag Pro	cedure) 				
		10	Locat	ion				Non-Exempte	ed (*) ar	nd Non-Fi	riable P	interestinated		
Location of		1	Verma			-							emen ype	t
Asbestos-Containing Materi	ial (ACM)		ed Sole		Asbes	tos Conta	scription of aining Ma	aterial (ACM)		Amount		3	T	T
TO BE ABATED In Facility			todial		(i.e.	thermal	systems	insulation,	(Specify	7 2	7	Enc	E
(13)			(12)			other m	ing, VAT iscellane	, or eous)	S	F or LF)	Remova	Repair	apsı	Enclosure
		Yes	No	N/A				/			<u>a</u>	=	Encapsulate	ure
Basement				x		Flo	or tiles		24	100 SF	x	+-		
									_	100 01	^	+-	X	
												+	_	
				+										
Name of Registered Waste Hau	ler		IN	JDEP W	acto	CL'- Y	/and-	1	_					
Removal Safety LLC	07.50		22.5	lauler ID		Cubic \ of Was		F 2000 2000 2000		ered Land	ifill			
City, State			0	037007	7	7		Fairles	S					
Paterson, NJ						Disposa	al Date	City, Stat						
Completed by		T'AL.				TBD		Morris	ville, F	PA				
Lasko Veskov		Title Pres	ident			Şi	gnature	///	/		Date			
		1 103	uent				ask	o Wesh	N		05/29	/2019)	

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

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W 2210				V						MAY 3	3 1	2019)	114
Date of Notification (1)	20000	Carre			A		g Owner/Operator (and last					1
	17 /	19			Sta	te of Nev	v Jersey Dept. o	f Transportation						
Agencies Notified	Type Notifica	ation			Street	Address			- 1	ASBESTOS LICE			3L.8	
⊠ EPA					PO	BOx 600)	1.	رسر والموسوس وا	LIVE	NOI!	i Li	ting (December)	Jan 5 Free 12 4
☑ DOLWD	☐ Amended					State, Zip (
☑ DHSS	Amendme					nton, NJ								
☐ DCA (NJAC 5:23-8)	☐ Emergen		luding			of Contac	POSERVICE		Teler	ohone Numb	er	(
(NOAC 5.25-6)	☐ Cancellat				1.00.0000000000000000000000000000000000	eryl Quat				9-963-2181				
									00	3-303-210			_	
Name of Facility Where A	hatament is T	okina F	Dlaca	(2)	FA	SILITY IN	IFORMATION	T 6 F 314	(4)		+			
DOT Jersey City Ma			riace	(3)				Type of Facility						
Street Address	amtenance	raru						School (K-12		r than K-12)				
								Other (i.e., p	rivate a			ilding	js,	1
401 Lincoln Highwa	ау							homes, etc.)			151			
City (5) Jersey City								Square Feet 22000	# of	Floors	1 2	dg. Ad 1958		
County (6)					Cour	ty Code (7)(STATE USE ONLY)	Current Use (Pr	ior if be	ing demolish	ned)			
Hudson					l lossociations		,	Maintenanc						
Name of Monitoring Firm	Hired by Build	ding Ow	vner (8)	ASCM	No.	Name of Abateme	1		<u></u>				
Environmental Con	nections, In	ic.					Asbestos an	d Mold Service	s, Co	rp.				
Street Address	Marine Control of Marine						Street Address							-
120 North Warren S	Street						3859 Sylon B	Boulevard						
City, State, Zip Code		18					City, State, Zip Co							
Trenton, NJ 08608							Hainesport, I							
Project Manager for Mon	itoring Firm			Tele	phone	No.	Telephone No.		Lice	ense No.				
Roland Jones				1000	9-392		609-702-0400)	10000000	0862				
Start Date (10)	S	Schedul	led Co	omple	tion Da	te (11)	Name of OSHA M							-
6 / 4 /					1		EMSL Analyt							
Occupancy Status During	Ahatement (Street Address							_
☐ Facility Closed/Vacate					ment		200 U.S. Rou	to 130 North						
☐ Abatement Performed						cribe	City, State, Zip Co							
Time of Abatement: _							Cinnaminsor							
Scope of Work (Check al	I that annly)						Olilialilisoi	i, NJ 00077						
ocope of work (offect at	i tilat apply)						☐ Full Conf	tainment with Neg	gative F	ressure				
☐ ≥3 sf or ≥3 lf			Rei				Mini-Enc							
≥160 sf or ≥260 lf] Der	molitic	on			g Procedure mpted (*) and No	n-Friah	le Procedure	2			
			Is	Locat	ion			mpton () ama tto		10 1 10000011	T	ateme	ent T	vne
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Asbestos-Containing)		d Sole		Asbe	stos Containing Ma	iterial (ACM)		mount	\em	Repair	nc	ncl
TO BE ABA					Staff?	(i.e	., thermal systems surfacing, VAT			Specify F or LF)	Removal	air	sde	Enclosure
(13)	·y			(12)			other miscellane		31	OI LIF)	=		Encapsulate	Гe
			Yes	No	N/A	(+)							(D	
Window Panels		[Caulk			1	92 LF	\boxtimes			
Interior		[Expans	ion Joint Comp	ound	3	00 LF	\boxtimes			
		[
Name of Registered Was	te Hauler			1.4	JDEP \		Cubic Yards of	Name of Regis	tered L	andfill.				-
Waste Management	t			H	17273		Waste 5	Grand Cen	itral					
City, State							Disposal Date	City, State	11.00					\neg
Lafayette, NJ							6/12/19	Penn Argy	le, PA					
Completed By (Print or Ty	npleted By (Print or Type) Title						Signature	7		Dat	е			-
Kimberly Trumbetti		Ope	erati	ons	Coord	inator			P	5-	-17-	19		

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 5 13 19 1 Nancy Richardson / Job #1905-2442 Chk. #NA ASBESTOS CONTROL & Agencies Notified Type Notification Street Address LICENSING **⊠** EPA ☐ Initial **⊠** DOLWD □ Amended City, State, Zip Code **⊠** DHSS Amendment #1 Bordentown, NJ 08505 ☐ DCA ☐ Emergency (including) (NJAC 5:23-8) justification) Name of Contact Telephone Number ☐ Cancellation Nancy Richardson **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Residential Property ☐ School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, homes, etc.) City (5) Square Feet # of Floors Bldg. Age Bordentown +/- 2.000 3 110 County (6) County Code (7)(STATE USE ONLY) | Current Use (Prior if being demolished) Burlington Residential Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Briggs and Associates Asbestos and Mold Services, Corp. Street Address Street Address 3 Crosswicks Street 3859 Sylon Boulevard City, State, Zip Code City, State, Zip Code Bordentown, NJ 08505 Hainesport, NJ 08036 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Doug Ferry 609-847-2957 609-702-0400 00862 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor __5__ / __20__ / __19 __5__ / __22__ / __19 EMSL Analytical, Inc. Occupancy Status During Abatement (Check only one) Street Address □ Facility Closed/Vacated During Entire Period of Abatement 200 U.S. Route 130 North Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: ____AM-___PM/___PM-__ Cinnaminson, NJ 08077 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure ≥3 sf or ≥3 lf □ Renovation ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure wrap & cut ≥160 sf or ≥260 lf ☐ Demolition Is Location Abatement Type Normally Location of Description of Repair Used Solely by Removal Encapsulate Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED (i.e., thermal systems insulation, (Specify Custodial Staff? IN Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A Basement X Ductwork with Asbestos Pipe Wrap 30 LF X Basement X Ductwork 30 LF X П П Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. Waste Waste Management **Grand Central** 17273 5 City, State

Kaysi Gruner ASB-41 **MAY 11**

Lafayette, NJ

Completed By (Print or Type)

Title

Office Assistant

Disposal Date

Signature

5/22/19

City, State

Penn Argyle, PA

Date

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

Date of Notification (1) Name of Building Owner/Operator (2) 5 28 Montclair Police Headquarters Agencies Notified Type Notification Street Address ☐ EPA MAY 3 1 637 Bloomfield Ave 2019 **⊠** DOLWD ☐ Amended City, State, Zip Code Amendment # ☑ DOH Montclair, NJ 07042 ASSESTOS CONTROL & Telephone NumperENSING ☐ Emergency (including ☐ DCA Name of Contact (NJAC 5:23-8) justification) ☐ Cancellation N/A **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Montclair Police Headquarters School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, 637 Bloomfield Ave homes, etc.) City (5) Square Feet # of Floors Bldg. Age Montclair +-30,000 4 +-100 County (6) County Code (7)(STATE USE ONLY) | Current Use (Prior if being demolished) Essex Township Building Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) **Environmental Connection** BRISTOL ENVIRONMENTAL, INC. Street Address Street Address 120 North Warren Street 1123 BEAVER STREET City, State, Zip Code City, State, Zip Code Trenton, NJ 08608 BRISTOL, PA 19007 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Rollie Jones 609-392-4200 215-788-6040 00509 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 6 / 10 / 19 7 / 12 / 19 BRISTOL ENVIRONMENTAL, INC Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 1123 BEAVER STREET Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: ____AM-___PM/7:00PM-3:30AM BRISTOL, PA 19007 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure □ Renovation ☐ Mini-Enclosure ≥3 sf or ≥3 If ≥160 sf or ≥260 lf ☐ Demolition Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Repair Removal Encapsulate Enclosure Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ (i.e., thermal systems insulation. TO BE ABATED (Specify Custodial Staff? IN Facility surfacing, VAT, or SF or LF) (12)other miscellaneous) (13)Yes No N/A **Detectives Office** \boxtimes VAT/Mastic/Linoleum 985 SF X Hallway \boxtimes VAT/Mastic/Linoleum 120 SF X П П NJDEP Waste Name of Registered Waste Hauler Cubic Yards of Name of Registered Landfill Hauler ID No. Waste SERVICE TRANSPORT GROUP, INC. MINERVA LANDFILL 20990 City, State Disposal Date City, State YARDLEY, PA TBD WAYNESBURG, OH Completed By (Print or Type) Title Signature

Dillan DeCaro

5-28-19

Estimator

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Commercial	ADDICTION IS	aniiy	riace	(3)					Type of Facility ☐ School (K-12)							
Street Address									Subchapter		r than K-	-12)				
521 Main Avenue, E	Ruilding #1								Other (i.e., p	rivate a	nd comr	nercia	al bui	ldings	j	
City (5)				-					homes, etc.) Square Feet		Class		DI	- ^		_
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Bergen					Jour	ity code (i	//Oir	ITE OOL ONLT	ouncil ose (F)	ioi ii be	ing dem	UllSHE	uj			
Name of Monitoring Firm	Hired by Build	ling O	wner ((8)	ASCM	No.	Nai	me of Abateme	ent Contractor (9))						
Mark Jovic Consult		•					1		NAGEMENT L							
Street Address	11 (1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						-	eet Address								_
87 Main Street, Suit	te A						2	7 Outwater I	ane							
City, State, Zip Code								y, State, Zip Co								-
Lincoln Park, NJ 07	035							Sarfield, NJ								
Project Manager for Mon	itoring Firm			Tele	phone	No.	-	ephone No.		Lice	nse No.	-				_
Mark Jovic				97	73-650	-0392	1955	73-928-4888		11	188					
Start Date (10)		chedu	ıled C	omple	tion Da	te (11)	Nar	me of OSHA M	onitor		Invitations					
06 /10 /	_19_	08	3_ /	30	_ / _	19	A	LL PRO MA	NAGEMENT L	LC						
Occupancy Status During	Abatement (C	Check	only o	ne)			Stre	eet Address								
□ Facility Closed/Vacate	ed During Entire	e Peri	od of	Abate	ment		2	7 Outwater I	_ane							
Abatement Performed	Outside of No	rmal I	acility	/ Hour	s - Des	cribe	City	, State, Zip Co	de		V503					
Time of Abatement: _	AM	PM	/	PM-		AM	G	Sarfield, NJ	07026							
Scope of Work (Check al ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	I that apply)		□ Re 図 De					☐ Mini-Encl		T-3						
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IN Facili	ty		Cus	todial (12)	Staff?		S	surfacing, VAT,	or		or LF)	- 1	oval	7	bsul	Sur
(13)		t	Yes	No	N/A		ot	her miscellane	ous)						ate	Ф
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1 st Floor- Lobby & Base	mont Stainus	, II	_			VAT	viast				50 SF	-			뷔	
1st Floor- under carpe	70	all				VAT/Ma	otio					\rightarrow			井	님
Basement		-		-						-	900 SF	-			4	
Name of Registered Was	te Hauler		Ц		IJDEP (_	duct insulat			10 SF					Ш
Century Waste / Ne		g		1000	lauler IC	No.	Wa		Name of Regis	th Land	Ifill / Fai		Lan	dfill /		
City, State					32797	/ / 0283		s Needed posal Date	Grand Centra City, State	ai Sanit	ary Lan	atill				
Elizabeth, NJ / New	ark, NJ						1	BD	Morrisville	. PA /	Pen Ar	avi i	Δ			
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Allen Monchik	16-7		oject	Man	ager				Monchik	6,		Date 5/2	9/1	9		

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Date of Notification (1)				Name	of Buildin	g Owner/Operato	or (2)	1	4 11 111	111 0	401		
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	Type Notificat	ion		Stree	Address			1	ASSE	STOS C LICENS	ONTR	OL.	å
☑ EPA □ □ DOLWD	☐ Initial			214	Gates F	Road		f.,			il il il	Name and Address of the Owner, where	-
⊠ DOH	Amended Amendmen	nt#		City,	State, Zip (Code							\neg
de la constantina del constantina de la constantina de la constantina del constantina de la constantin	☐ Emergency		ng	Litt	le Ferry,	NJ 07643							
(NJAC 5:23-8)	justification	n)		(0.00)	of Contac	3			Telephone N	umber			
	☐ Cancellation	on		Lot	uis Goldb	perg			201-853-0	594			
				FA	CILITY IN	FORMATION							
Name of Facility Where Al	patement is Ta	king Pla	ce (3)				1	ype of Facility (
Commercial						- 3		School (K-12) Subchapter 8		12)			
Street Address	11.11. 11.4							Other (i.e., pri			uildings		
521 Main Avenue, B	uilding #1							homes, etc.)					
City (5) Wallington							So	quare Feet	# of Floors	BI	dg. Age)	
County (6)				Cour	at Cada /	VOTATE LIGE ONLY	10	111 (D.)					_
Bergen				Coul	ity Code (/)(STATE USE ONL)	7) Cl	urrent Use (Prid	or it being dem	iolisned)			
Name of Monitoring Firm F	lired by Buildin	na Owne	r (8)	ASCM	No	Name of Abate	ment	Contractor (0)					_
Mark Jovic Consulti		•	. (-)					AGEMENT LL	С				
Street Address						Street Address						77.1	\dashv
87 Main Street, Suite	A					27 Outwate	er Lai	ne					
City, State, Zip Code				-		City, State, Zip	9.0000000000000000000000000000000000000	0100					-
Lincoln Park, NJ 070	35					Garfield, N.							
Project Manager for Monito	oring Firm		Te	lephone	No.	Telephone No.	e li		License No.				\neg
Mark Jovic			9	973-650	-0392	973-928-48	88		1188				
Start Date (10)		cheduled				Name of OSHA	Moni	itor					\neg
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Occupancy Status During						Street Address							\neg
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Scope of Work (Check all I	inat apply)					□ Full Co	ontain	ment with Nega	ative Pressure				
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(13)		Ye				other miscella	neous	5)				ate	(0)
1st Floor-Bathroom					Mirror I	Vlastic			80 SF			7	\exists
1 st Floor- Lobby & Baser	ment Stairwel	. 0			VAT				150 SF			=	뒴
1st Floor- under carpe					VAT/Ma	astic			3,900 SF			=	늼
Basement			П		Corrua	ated duct insu	latio	n	40 SF			計	귀
Name of Registered Waste	e Hauler			NJDEP		Cubic Yards of	1	Name of Regist	ered Landfill		1-1.		
Century Waste / New	vark Carting			Hauler I		Waste		GROWS North Grand Central	n Landfill / Fai		ndfill /		
City, State				32/9	7 / 0283	As Needed Disposal Date	_	City, State	January Lan	unti			-
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Allen Monchik		Proje	ct Ma	nager		ADDa.	12	Manchib		5/29/	10		

MAY 3 1 2019 ASBESTOS CONTROL& LICENSING

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

	1			521 Main Ave, Wallington, NJ - Bldg 1		Abateme	nt Type		
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Faculty (13)	No Main	s Locat rmally Solely itenandal sal Staf	Used by ce/Cust	Description of Asbestos-Containing Material (ACM) (i.e. thermal	Amount (Specify SF or LF)	R e m o v a I	R e p a i	E n c a p s u l	E n c l o s u r e
	Yes	No	N/A						
1st Floor			X	Sink undercoat	8 SF	Х			
Exterior			Х	Window and Door Caulk	300 LF	Х			
Northern Exterior of Bldg			Х	Putty at electrical penetrations	4 SF	Х			
Roof Level			Х	Duct and Misc. Tar	100 SF	Х			

Completed by: (Print or type) Allen Monchik	Title:	Project Manager	Signature: Allen Monchik	Date: 5/29/19
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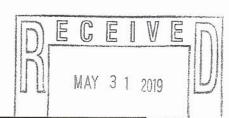
State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)

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	ASBEST LI	CEN	SIN	THC 3	L&	Pagagori.
	Telephone Numb 201-853-0594					
	2) 8 (Other than K-12) private and commerc	ial bu	ilding	js,		
Feet	# of Floors	Blo	dg. A	ge		
Use (Pr	rior if being demolish	ed)				
ector (9)		-3011				
	License No. 1188					
ENT L	LC					
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M)	Amount (Specify SF or LF)	A Removal	Repair	ent Encapsulate	e Enclosure	

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Date of Notification (1)	20	40		N			7	ner/Operator (53		Wift)	1 7	2019	
	/	19			UM	DASCH	REA	L ESTATE L	ISA LTD						
Agencies Notified EPA	Type Notifica	ation		S		Address Gates F	Road			ASB	ESTO LIC				11.8
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(NJAC 5:23-8)	☐ Emergend justification		ing	N		of Contac				Telephone N	lumber				
V	☐ Cancellati					is Gold				201-853-					
					FAC	CILITY IN	VFOF	RMATION		1					
Name of Facility Where A	Abatement is T	aking Pla	ce (3))					Type of Facility	(4)	-	-			
Commercial			•						School (K-1	* *					
Street Address									Subchapter	8 (Other than k	(-12)				
521 Main Avenue, E	Building #5								Other (i.e., phomes, etc.		mercia	l bu	ilding	js,	
City (5)							-		Square Feet	# of Floors		Blo	lg. A	ge	
Wallington													-5	50	
County (6)					Coun	ty Code (7	7)(STA	TE USE ONLY)	Current Use (P	rior if being den	nolished	d)			
Bergen								•	A	managara negotatata de la Taliffi de					
Name of Monitoring Firm	Hired by Build	ing Owne	er (8)	AS	CM	No.	Nar	ne of Abateme	ent Contractor (9)		17.			
Mark Jovic Consult	ting LLC						A	LL PRO MA	NAGEMENT L	LC					
Street Address							Stre	eet Address							
87 Main Street, Suit	te A						2	7 Outwater I	Lane						
City, State, Zip Code							City	, State, Zip Co	ode		-12,21		7		-
Lincoln Park, NJ 07	035						G	arfield, NJ	07026						
Project Manager for Moni	toring Firm		T	eleph	one l	No.	Tele	ephone No.		License No).				\dashv
Mark Jovic				973-	650-	-0392	9	73-928-4888		1188					
Start Date (10)	970000774	cheduled					Nan	ne of OSHA M	lonitor						
06 /10 /		08		111111111111111111111111111111111111111	1_	19	A	LL PRO MA	NAGEMENT L	.LC					
Occupancy Status During							Stre	et Address							
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Abatement Performed Time of Abatement: _	Outside of No	rmal Fac	ility Ho	ours -	Desc	cribe	City	, State, Zip Co	ode						
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Scope of Work (Check all	that apply)							□ Eull Cont	oinment with No						
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(13)		Ye		2) lo l	W/A			ner miscellane		0, 0, 2, ,		=		ulate	Гe
1st Floor Central Offi	ce		5 1		X/A	VAT				270 SF	-	X	П		
Basement- Locker Rm, Bre	ak Rm, Offices,		1		<u>-</u>	VAT] [
Storage Areas All Roof Levels					<u> </u>	Miscell	0000	uo Tor		3,000 SF		X			
Roof R3			-	_	-					2,000 SF		X			
Name of Registered Was	to Hauler					Roof FI		0	TN (5	100 SF		X	П	Ш	Ш
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	waik Carting	3		200000000000000000000000000000000000000		/ 0283	A	s Needed	Grand Centra	al Sanitary Lar					1
City, State							100000	oosal Date	City, State						
Elizabeth, NJ / New							T	BD	Morrisville	e, PA / Pen A	rgyl, P	Α			
Completed By (Print or Ty	ype)	Title	75.0					Signature			Date				
Allen Monchik		Proje	ct Ma	anag	er			Allen	Monchik	2	5/29	9/1	9		
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Date of Notification (1) 05 /	29 /	19			1			ner/Operator (L ESTATE U	105 OE A	J J MA	Ý 3	2	019				
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□ DCA	☐ Emergen			1	Lit	tle Ferry,	NJ	07643									
(NJAC 5:23-8)	justificati	on)			Name	of Contac	ct			Telephone N	lumber						
	☐ Cancella	tion			Lo	uis Gold	berg			201-853-	0594						
					FA	FACILITY INFORMATION											
Name of Facility Where A	batement is 1	Taking	Place	(3)					Type of Facility	(4)							
Commercial									School (K-1	2)	(10)						
Street Address									Other (i.e.,	8 (Other than k private and com	(-12) imercia	buil	dinas.				
521 Main Avenue, B	Building #6								homes, etc.				3 ,				
City (5) Wallington									Square Feet	# of Floors		Bldg	Bidg. Age				
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Mark Jovic Consult	Commence of the second second	ung C	wner ((8)	ASCM	No.			ent Contractor (9								
Street Address	ilig LLC								NAGEMENT L	LC_							
87 Main Street, Suit	ο Δ					Street Address 27 Outwater Lane											
City, State, Zip Code	- A						-										
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Project Manager for Monit	Tolo	phone	No	_	ephone No.	07026	Tr: N		-90								
						-0392		ернопе 140. 73-928-4888		License No	G.						
Start Date (10)	15	Sched	uled C			ite (11)		ne of OSHA M		1100							
06/10/						19	1		NAGEMENT L	.LC							
Occupancy Status During							Stre	eet Address									
☐ Facility Closed/Vacate	d During Entir	re Per	iod of	Abate	ment	20	2	7 Outwater I	_ane								
☐ Abatement Performed Time of Abatement:	Outside of No	ormal PA	Facility //	Houi PM.	s - Des	cribe AM		, State, Zip Co									
			"			. Auvi	G	arfield, NJ	07026								
Scope of Work (Check all	that apply)							□ Full Cont	ainment with Ne	antius Pronours							
≥3 sf or ≥3 lf			☐ Re					☐ Mini-Encl	osure	gauve Pressure							
≥160 sf or ≥260 lf			☑ De	molitio	n	n ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Pro											
			Is	Locat	ion	1		M MOII-LACI	inpieu () and No	II-rhable Proci		Abat		Tuna			
Location				Vorma				Description o	f		-		1	Туре			
Asbestos-Containing N TO BE ABA		1)		d Sole intena				Containing Ma		Amount		em .	Repair	nc			
IN Facilit				odial	Staff?	(1.6		rmal systems i urfacing, VAT,		(Specify SF or LF)		Remova	air abs	Enclosure			
(13)				(12)	Τ	-		ner miscellane		0. 0. 2. /		-	Repair	6			
1st Floor- Southern O	ffice Area		Yes	No	N/A	VAT	-			530 SF	F	3					
1st Floor- near stairs 2						VAT				120 SF	_						
1st Floor- Southern Of						VAT/Ma	estic			400 SF	_	X I	7 -				
1st Floor- Southern Of	П				eath carpet		850 SF			<u> </u>							
Name of Registered Wast					JDEP			oic Yards of	Name of Regi	stered Landfill		24 I	_ _	111			
Century Waste / Nev		q		2.00	lauler I	D No.	Wa	ste	GROWS Nort	th Landfill / Fai		and	ill /				
City, State					3279	7 / 0283		s Needed posal Date	City, State	al Sanitary Lan	ndfill						
Elizabeth, NJ / Newa	ark, NJ							BD		e, PA / Pen A	ravl. P	Α					
Completed By (Print or Ty	pe)	Title						Signature	1	,	Date	•					
Allen Monchik	* = 14	1000000		Man	ager				711	/							
SD 44		Project Manager Allen Monchik								k 5/29/19							

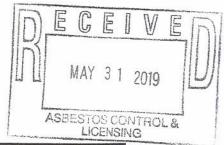
State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8-60-7 AND 12:1207) CONTINUATION SHEET



						ş				
				521 Main Ave, Wallington, NJ - Bldg 6		Abateme	nt Type AS	BESTO	S CON	TROL
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Faculty (13)		s Locat rmally Solely tenand al Staf	Used by ce/Cust	Description of Asbestos-Containing Material (ACM) (i.e. thermal systems, insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	R e m o v a I	R e p a i	E n c a p s u I	E n c l o s u r e	
	Yes	No	N/A							
Western Portion of 2nd Floor										i
Offices (Former Executive				Remant black mastic beneath						
Office area)			Х	carpet tile	1,200 SF	Х				
Western Roof Level			X	Roofing Material	9,500 SF	Х				
Western Roof Level			Х	Edge Tar	380 SF	Х				
Western and Central Roof										
Levels			Х	Silver Duct Coating	50 SF	Х				
Central Roof Level			Х	Roof Flashing Material	2,500 SF	Х				
Central Roof Level			Х	Miscellaneous and Edge Tar	750 SF	Х				
Central Roof LEvel			Х	Duct Tar Coat	100 SF	Х				
Eastern Upper Roof Level			х	Bottom-Layer Roofing Material	22,000 SF	х				
Eastern Upper Roof Level			Х	Roof Flashing Material	1,800 SF	Х				
Eastern Upper Roof Level			Х	Miscellaneous Tar	150 SF	Х				
	_		_							
	-	_	-							
			_							
	_	-	-							
		-	-			-				
		-	-							
		-	 							
			1							

Completed by: (Print or type) Allen Monchik	Title:	Project Manager	Signature: Allen Monchik	Date:
			NEUN MONCAUR	5/29/19

CK1127Le	AID		NOT		MOITA		BES	Jersey STOS ABAT ::60 and 5:1		IENT	DE	G May	E ~	1 20	10			
Date of Notification (1)	56	Name of Building Owner/Operator (2) UMDASCH REAL ESTATE USA LTD										MAI	·	1 20	IJ	1		
05/	/	19			UM	DASCH					The same of the sa							
Agencies Notified	Type Notific	ation			Street	Address				1	ASSESTOS CONTROL &							
☑ EPA ☑ DOLWD	⊠ Initial				214	Gates F	Road	I		1.	and the same and the same of t	LIU	EN	SING	n Table and the State of the St	Managary Drivery		
☑ DOLWD	Amended Amendm	TO 120			City, S	State, Zip	Code		-70									
DCA	☐ Emergen			9		le Ferry,		07643										
(NJAC 5:23-8)	justificati	on)	-83			of Contac	22				Telephone N	Vumber						
	☐ Cancella	tion			Lou	iis Goldi	perg				201-853-	0594						
N 75 W 117					FA	CILITY IN	VFOI	RMATION										
Name of Facility Where A	Abatement is 1	Γaking	Place	(3)					Тур	e of Facility (4	1)							
Commercial										School (K-12)		(10)						
Street Address										Subchapter 8 Other (i.e., priv			bui	Idinas				
521 Main Avenue, E	Building #8									homes, etc.)								
City (5) Wallington									Squ	uare Feet	# of Floors		Blo	g. Age				
County (6)					Cour	ty Code (7)(STA	TE USE ONLY)	Cur	rent Use (Prio	r if being der	nolished	d)			\neg		
Bergen										•			-,					
Name of Monitoring Firm	Hired by Build	ding C	wner	(8)	ASCM	No.	Na	me of Abateme	ent C	ontractor (9)					-	\dashv		
Mark Jovic Consult	ing LLC						4	ALL PRO MA			С							
Street Address							Str	eet Address								\dashv		
87 Main Street, Suit	e A					27 Outwater Lane									1			
City, State, Zip Code	- 101;						City	y, State, Zip Co	ode			* **				\dashv		
Lincoln Park, NJ 07	035					Garfield, NJ 07026												
Project Manager for Monit	Tele	phone	No.	-	ephone No.		5032	License No).	_			\neg					
Mark Jovic				97	73-650	-0392	9	73-928-4888	3		1188							
Start Date (10)		Sched	uled C	omple	tion Da	ion Date (11) Name of OSHA Monitor												
06 /10 /	19	_ 0	8_/	30	_ / _	19	A	LL PRO MA	NAG	SEMENT LL	С							
Occupancy Status During	Abatement (0	Check	only	one)			Stre	eet Address								\dashv		
□ Facility Closed/Vacate	d During Entir	re Per	iod of	Abater	nent		2	7 Outwater I	Lane									
Abatement Performed	Outside of No	ormal	Facility	y Hour	s - Des	cribe	City	, State, Zip Co	ode				-			\dashv		
Time of Abatement:	AM	PN	Μ	PM-	AM Garfield, NJ 07026													
Scope of Work (Check all	that apply)									1//2						\neg		
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			-	novati molitic				☐ Mini-Enc☑ Glovebag	losur g Pro									
			65.5	Locat					-				Aba	tement	Tv	pe		
Location (Asbestos-Containing N	700			Norma ed Sole				Description o			720 00	_ h		- 1	- 1			
TO BE ABA		"	Ma	intena	nce/			Containing Ma rmal systems i			Amount (Specify		Removal	Repair		Enclosure		
IN Facilit	у		Cus	todial ((12)	Staff?	,	S	surfacing, VAT,	, or	1	SF or LF)		oval	ir ban	3	Sur		
(13)		ı	Yes	No	N/A		oti	her miscellane	ous)					idie	1	e		
Throughout 1st Floor	Office Area					VAT					2,850 SF	=	X	ПГ	+	\exists		
Throughout 2 nd Floor	Office Area				\boxtimes	VAT he	neaf	th carpet			4,750 SF		-		7	듬		
Basement- Boiler Roo								et Material			50 SF		XI X		╣	믬		
Perimeter Roof Levels						Edge Ta	or								-	귀		
Name of Registered Wast					JDEP V			oic Yards of	No	me of Decist-	950 SF		X		7			
Century Waste / Nev		a			auler IE	No.	Wa	ste		me of Registe ROWS North			.and	lfill /				
City, State					32797	/ 0283		s Needed	_	rand Central S	Sanitary Lar	ndfill				_		
Elizabeth, NJ / Newa	ark, NJ						1	posal Date BD		ty, State Morrisville, I	PA / Pen A	rgvl. P	Α					
Completed By (Print or Ty	rpe)	Title						Signature	1			Date			5,150			
Allen Monchik	Man	ager																



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

				521 Main Ave, Wallington, NJ - Bldg 8	Abatement Type					
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Faculty (13)	No Main	Solely by		Description of Asbestos-Containing Material (ACM) (i.e. thermal systems, insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	R e m o v a I	R e p a i	E n c a p s u I	E n c l o s u r e	
	Yes	No	N/A							
Scattered throughout Roof		-	14/1							
Level			Х	Miscellaneous Tar	300 SF	х				
	_	-								
	\vdash									
	-	_								
		-								
	_	_								
	\vdash	\vdash	_							
	_	_								
	_									
	_									

Completed by: (Print or type) Allen Monchik Title: Project Manager	Signature: Allan Monchik	Date: 5/29/19
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K1676P	AID	,	ТОИ		ATION		BE	Jersey STOS ABA 3:60 and 5:1		Din	EG	E		\mathbb{V}		de constant de la con	
Date of Notification (1)	29 /	19			1		107	wner/Operator			1 MA	/ 3	1	2019			
Agencies Notified ⊠ EPA ⊠ DOLWD	Type Notific ☑ Initial ☐ Amende			******		t Address 4 Gates F	Roac	1	ASBESTOS CONTROL & LICENSING								
⊠ DOH	Amendm				City,	State, Zip	Code	2			The state of the s						
☐ DCA	☐ Emerger			g g		tle Ferry,	0000000	07643									
(NJAC 5:23-8)	justificati			-	Name	of Contac	ct				Telephone N	lumbe	r				
	☐ Cancella	tion			Lo	uis Goldl	berg				201-853-	0594					
					FA	CILITY IN	NFO	RMATION									
Name of Facility Where A	batement is 1	Γaking	Place	(3)					Type of Facil	ity (4))			15-T-1-			
Commercial									School (K	-12)							
Street Address									Subchapte Other (i.e.	er 8 (Other than k	(-12)	al bu	ildina	10		
521 Main Avenue, E	Building #12	2							homes, et		ate and com	mercia	ai Du	manig	JS,		
City (5) Wallington									Square Feet		# of Floors		Blo	dg. A	ge		
County (6)				15-4	Cour	nty Code (7	7)(STA	ATE USE ONLY)	Current Use	Prior	if being den	nolishe	h)			_	
Bergen							11	,		, ,,,,,,	ii boilig dell	10113110	.u)				
Name of Monitoring Firm	Hired by Build	ding C	wner	(8)	ASCM	No.	Na	me of Abateme	ent Contractor	(9)		-	_				
Mark Jovic Consult	ing LLC						1	ALL PRO MA			2						
Street Address								eet Address			7						
87 Main Street, Suit	e A					27 Outwater Lane										ı	
City, State, Zip Code						Cit	y, State, Zip Co	ode						_			
Lincoln Park, NJ 07	035						0	Sarfield, NJ	07026								
Project Manager for Monit	phone	No.		ephone No.			License No										
Mark Jovic	73-650	-0392	9	73-928-4888			1188										
Start Date (10)		Sched	uled C	omple	tion Da	te (11)	Na	me of OSHA M	lonitor							-	
06 /10 / .	19	_ 0	8_/	30	_ / _	19	A	LL PRO MA	NAGEMENT	LLC	:						
Occupancy Status During	Abatement (0	Check	only o	one)			Str	eet Address	3.000			_		-		-	
☐ Facility Closed/Vacate	d During Entir	re Per	iod of	Abate	ment		2	7 Outwater I	Lane								
Abatement Performed	Outside of No	ormal	Facility	y Hour	s - Des	cribe	City	y, State, Zip Co	State, Zip Code								
Time of Abatement:	AM	PN	N/	PM-		AM	0	Sarfield, NJ	07026								
Scope of Work (Check all	that apply)																
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf			□ Re														
				Locat						T		T	Aba	ateme	ent T	vpe	
Location of Asbestos-Containing M	303	,		Norma ed Sole		A=6=		Description o						_	_		
TO BE ABA		,	Ma	intena	nce/	(i.e	sios ., the	Containing Ma rmal systems i	terial (ACM) insulation.		Amount (Specify		Remova	Repair	Encapsulate	Enclosure	
IN Facility	y		Cus	todial (12)	Staff?		S	surfacing, VAT,	or		SF or LF)		oval	Ŧ	nsd	Sur	
(13)		ĺ	Yes	No	N/A		ot	her miscellane	ous)						late	Ø.	
Roof Level					×	Top-La	yer I	Roofing Mate	erial	+	50 SF						
Roof Level						Bottom	-l av	er Roofing I	Material	+	50 SF	-			100	_	
				_		Bottom	Luy	ci itooiiiig i	naterial	+	50 SF	_	\boxtimes				
Name of Registered Wast				1500	JDEP V		11 110000	oic Yards of	Name of Re	gister	ed Landfill						
Century Waste / Nev	vark Cartin	g		H	32797	No.	Wa	ste s Needed									
City, State	SV POPOLEY							posal Date	City, State							-	
Elizabeth, NJ / Newa	rk, NJ						Т	BD	Morrisvil	le, P	A / Pen Ar	gyl, F	PA				
Completed By (Print or Ty	pe)	Title						Signature		e e e e e e e e e e e e e e e e e e e		Date					
Allen Monchik		Pi	oject	Man	ager		200 21 11						5/20/10				