					State of N	ew .lers	SeV		EGE	3 1	W	EI	-			
010 0 V			NOT	IFICΔ			S ABATEMENT		EGE		M		M			
	(Pursuant to N	NIACS					eck # 26561 (mail		as emerg )	-6			111			
	(1 disdant to i	TOAC	).00 ai	IG 12.1	20)	Circ	CCK # 20501 (man		NOV -		2017		111			
Date of Notification (1)					Name of Buil	ding Ow	ner/Operator (2)	and book	NOA		CULL	- 14				
10/30/2017							FALITY GROUI	,								
Agencies Notified	Type Notifica	ation			STREET AD		once		ASBESTOS	CON	ITRO	_&				
EPA	Initial				4569 SOUT	H BRO	AD STREET	Participant of the last	LICE	NSIN	G					
DEP	☐ Amend	ed Ame	endmer	nt#	City, State, Z		io ornaar									
₩ DOL	Emerge				HAMILTO		8620									
□ DOH	justifica			50	Name of Cor		0020			Tele	phone	Numl	ber			
□ DCA	☐ Cancell				DAVID J. D	'ANDR	FA				<b>6</b> //05/21/5	110 (657) (419)	500			
Northeday (My				-	FACILITY IN						_					
Name of Facility Where	Abatement is T	aking P	lace (3		7.0.2			Type of Fa	cility (4)	-						
FORMER QUARTER					Т											
Street Address			2011	O LU LI I				Schoo	apter 8 (Oth	er tha	n K-12	2)				
351 W. 9TH AVENU	E							Other (i.e., private & commercial build								
City (5)								Square Fee								
SHIP BOTTOM, NJ								Square Feet # of Floors Bldg. A								
County					County Code	(7) (ST	ATE USE ONLY)	() Current Use (Prior if being demolished)								
OCEAN						, , ,	,	/ Current ose (1 nor il bellig demolished)								
Name of Monitoring Fire	m Hired by Build	ing Ow	ner (8)		ASCM No.	Name	of Abatement Con	tractor (9)		-						
		·						VIRONMENTAL INC.								
Street Address						-	Address									
						15 BL	ACK FOREST R	OAD								
City, State, Zip Code		-					ate, Zip Code									
- 1 day						Hamilt	on, NJ 08691									
Project Manager for Mo	nitoring Firm	Telep	hone N	10.		Telepho				Licer	nse No	).				
(4						609-89	0-7110			0067	76					
Start Date (10)		Sche	duled C	omplet	tion Date (11)	Name o	of OSHA Monitor									
11/13/2017		11/30	/2017	EF.		MECS										
Qccupancy Status Duri	ng Abatement (C	heck o	nly one	()		Street A	Address									
Facility Closed/Va	cated During Ent	ire Per	od of A	Abateme	ent	P.O. B	OX 341									
Abatement Perform	med Outside of N	Vormal	Facility	Hours		City, St	ate, Zip Code									
ESSENTIAL PERSONN	NEL/EVENING 4	PM-12/	MA			CROS	SWICKS, NJ 08	515								
Scope of Work (Check	all that apply)							☐ Full Co	ontainment w	ith Ne	egative	Pres	sure			
$\square \geq 3 \text{ sf or } \geq 3 \text{ lf}$					☐ Renova	tion		☐ Mini-E	nclosure							
<b>⊠</b> ≥ 160 sf or ≥ 260 l	Ť				Demoliti	ion		☐ Gloveb	oag Procedu	re						
1	12							☐ Non-E	xempted (*)	& Non	-Friab	le Pro	cedu			
			Locat							Abat	ement	Туре				
Location of Asbesto	s-Containing		rmally				estos Containing	A	16.05	77		E	m			
Material (ACM) TO B	7. N		Solely	by e/Custo			thermal systems g, VAT, or other		pecify SF or .F)	\en	Re	cap	ncl			
Facility (1	13)		Staff?			niscellar		'	-1 /	Removal	Repair	Encapsulate	Enclosure			
		Yes	No	N/A	1		,			=		ate	l e			
KITCHEN			X		ASBESTOS	SPRAY	ED CEILING	3000 S.F.		X						
MAIN BALLROOM			X		ASBESTOS	SPRAY	ED CEILING	7000 S.F.		X						
Name of Registered Wa	aste Hauler				NJDEP Waste		Cubic Yards of	Name of Re	egistered La	ndfill						
CUAMBION DISPOS	AI CEDVICE	2			Hauler ID No.		Waste	GROWS								
CHAMPION DISPOS	AL SERVICES				32707		40 YDS			-151 / 15 / 15 -						
City, State						Disposal Date	City, State									
HAINESPORT,NJ		lo:	12/6/2017	MORRIS	VILLE, PA.	_										
Completed By		Title				Signatu	ry27-Mar	1 01	/ 1	Date						

Date Ce 10/30/2017

PRESIDENT

ASB-41

DAVID D'ANDREA

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

	PAI	D 148	M	(Pı	CATION irsuant i	ate of New Jersey OF ASBESTOS to NJAC 8:60 and	ABATE d 12:120	0)	т		E G	E [ - 1	201	)恒 17	ht Fe		
6.22	te of Notification (1) 0/30/17	,				Building Owner/CEY MANAGEM		(2)									
Ag	encies Notified	Type Notification			Street Ac 411 AS	ddress SHLEY AVE			Į		ASBESTO LIC	S CO ENS	ING	IOL	Ĝi.		
×	EPA DEP DOL	Initial Amended Amendment	#	100		te, Zip Code VOOD, NJ 087	701										
×	DOH DCA	Emergency ( justification) Cancellation	including	100	Name of DEVO	Contact RA				Tal	enhone Niin	nher					
					FACII	LITY INFORMATI	ON	N									
Na	me of Facility Where	Abatement is Taking	g Piace (3	()				Тур	e of Facility (	(4)							
Str	eet Address							X		8 (Oth	er than K-12 & commercia		dings,	home	es,		
	y (5) AKEWOOD							Squ	are Feet	t # of Floors Bldg. Age							
1000	unty (6) CEAN				County Code (7) Current Use (STATE USE ONLY) home						ing demolish	ied)					
Na	me of Monitoring Firm	Hired by Building (	Owner (8)		ASCM No. Name of Abatemen AAA LEAD PR						10 N						
Str	eet Address						ess DOVE C	OURT	-								
Cit	y, State, Zip Code		<del></del>			La IV S			Zip Code DOD, NJ 0								
Dre	ject Manager for Mor	pitoring Firm			Telephor	ne No					License N	0			-		
		intorning i mini					Telephone No. License No. 1200										
	rt Date (10) 1/9/17		Schedule 11/13/		pletion (	Date (11)			SHA Monitor AD PROFE		NALS						
Oc	cupancy Status Durin						Street 6 Wi		ess DOVE C	OURT	•		a, 1 2/3				
×	Facility Closed/Vac Abatement Perform Other – Describe:	ated During Entire F ned Outside of Norm					City, S	State,	Zip Code								
							LAK	ĽVV(	DOD, NJ 0	10/01				-50100			
Sca	ope of Work (Check A ≥3 sf or ≥3 If ≥160 sf or ≥260 If	Il That Apply)			molition Mini-En Gloveb:					e cedure	n Negative P			e			
			Is	Locati	on								Abate		t		
	Location Asbestos-Containing TO BE AB In Facil (13)	Material (ACM) ATED lity	Use Ma	Normal ed Sole intenar todial S (12)	ly ly by nce/	Asbestos Con (i.e. thermal surfa		Mater is ins AT, or	ulation,	(	Amount Specify F or LF)	Removal	Repair	e Encapsulate	Enclosure		
			100	1.10	1 13773							1	1		1		

Name of Registered Waste Hauler NEWARK CARTING	V 1-4-5	NJDEP Waste Hauler ID No. 04509	Cubic Yards of Waste 15	Name of Registered La	andfill	
City, State NEWARK, NJ			Disposal Date	City, State BETHLEHEM PA		
Completed by JOSEPH PERLSTEIN	Title OWNE	R	Signature		Date	

SIDING

**FLOORING** 

2000 SF

250 SF

X

X

**EXTERIOR** 

INTERIOR

									house	e	0 5		Pr	int F		
CK 6028			ICATIO	tate of Ne N OF ASE t to NJAC	BESTOS	ABATE					C E		$\mathbb{V}$			
Date of Notification (1) 10/30/17			Name of John	of Building	Owner/	Operator	(2)		ЦЦ	N	0V -	1 2	017			
Agencies Notified Type Notification	1		Street A	Address										+		
☐ EPA 🗵 Initial		- [						1		ASBE	STOS (	CONT	ROL	&		
DEP Amended  X DOL Amendmer	n+ #			ate, Zip C or City,		106				Name of Street,	CONTRACTOR STATES	91146	-	-		
Emergency	(including	,		of Contact	143 00	+00			Tol	enhone	Number					
DOH justification			John	/ Contact								٠				
No.			FAC	ILITY INF	ORMAT	ION										
Name of Facility Where Abatement is Taki	ng Place (	(3)					Туре	of Facility (4	25							
Street Address	11 - 12 - 12 - 12 - 12 - 12 - 12 - 12 -	-					H	School (K-1) Subchapter		er than k	(-12)					
								Other (i.e. p				ildings	, hom	es,		
City (5) Ventnor City							100000	etc.) ire Feet	30.00	Floors		Bldg.	Age			
County (6)			0	0-4-7			240		2			-				
Atlantic				Code (7) USE ONLY	)		HOI		Jse (Prior if being demolished)							
Name of Monitoring Firm Hired by Building	Owner (8	)	ASCM No. Name of Abatement Contra AAA LEAD PROFES													
Street Address						Street 6 WF		ss DOVE CC	COURT							
City, State, Zip Code			- 57			City, S	tate, Z	ip Code								
Project Manager for Monitoring Firm			Telepho	ne No.		LAKE		OD, NJ 08	3701	License	- No					
01-1-1-1-1-1-1-1			732-668-9078							1200						
Start Date (10) 11/9/17	11/13/		Completion Date (11) Name of OSHA Monito  AAA LEAD PROF						SSIO	VALS						
Occupancy Status During Abatement (Che	ck Only O	ne)				Street										
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe:	Period of mal Facilit	Abaten y Hours	nent s			City, S	tate, Z	DOVE CO ip Code OD, NJ 08								
Scope of Work (Check All That Apply)		)= -);;=				L) (I C	-110	05, 140 00	77 0 1	-						
× ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit				×	Mir Glo	Il Containme ni-Enclosure ovebag Proce n-Exempted	edure				re .			
		Locati											ement			
Location of Asbestos-Containing Material (ACM)		Normal ed Sole		Anhon		scription taining M		(40044)	Α		-	1	he			
TO BE ABATED  In Facility		aintena todial S	1975 37 114		thermai	systems cing, VA	insula		(S	nount pecify or LF)	Rer	Re	Enca	Enc		
(13)	Yes	(12)				niscellan			31	UI LF)	Removal	Repair	Encapsulate	Enclosure		
BASEMENT CRAWL SPACE	No	N/A		Pine	Insulat	tion		ΛΙ	) LF	x		Ø	5 - E - E			
ATTIC		-			A VICENTIA CONTRACTOR	Sentential.	-		) LF	-						
7(110				Pipe Insulation						) LF	Х					
Name of Registered Waste Hauler			JDEP W		Cubic		20	Name of R	egister	ed Land	fill					
IEWARK CARTING		6.956	auler ID 4509	INU.	of Was	7.52-c		IESI								
City, State NEWARK, NJ					Dispos 11/13	al Date		City, State BETHLE		PA						
Completed by	Title					ignature		OCITIEL			Date					
OSEPH PERLSTEIN	OWN	IER														

PAID

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

n	E	C			$\mathbb{V}$	E	M
	1	ck 2 NOV	219 -	7	2017		

Date of Notification	(1)			Name of Building Owner / Operator (2)  ASBESTOS C LICENS									DL &				
A : N : ::	10/24/2017								L		IOLIVOI	ING		about the same			
Agencies Notified  EPA	Type Notific	cation		Street	Addi	ress				11							
DEP		al.		City C	tata	0 7:- 0	and a										
⊠ DOL	Second .	ended		Flore:		& Zip C	,oae										
□ DOH		ergency		Name							I-T - 1 1						
☐ DCA		cellation	1	Tom S							Telepl	ione	Numb	oer			
						5/15/											
Name of Facility Wi	are Ahatam	ent is Takina D	loon /	PAC	ILII	YINF	ORMATION	·Pr 745									
Ivaline of Facility VVI	icie Abateii	ent is raking P	lace (	3)			Type of Fac										
Street Address								pter 8 (Ot	her the	an K-12\							
1501 Hornberger	Ave									nmercial buildi	nas ho	mae	etc \				
							Square Feet		of Floo		Bldg. A		010.)				
City (5)		County (6)	Co	unty C	ode	(7)	4500			2	Diag. 7	80-	÷				
Florence		Burlington		ever <del>a</del> . He			Current Use (Prior if being demolished)										
							Bar										
Name of Monitoring	Firm Hired I	y Building Owr	ner (8)		ASC	CM No.											
							Alpha Envi										
Street Address							Street Addre										
City, State & Zip Co	do						PO Box 8297										
Oily, Clate & Zip Co	46							ty, State & Zip Code renton, NJ									
Project Manager for	Monitoring F	irm	Telep	hone I	Vuml	per	Telephone N										
							609-847-2956 01222										
Scheduled Start Dat		Scheduled Con	npletio	n Date	(11)	)	Name of OS	HA Monito	or								
11/4/201		11/11/2017					EMSL Anal	lytical									
Occupancy Status D	uring Abate	ment (Check or	nly one	9)			Street Addre										
		During Entire P			f Abatement 107 Haddon Ave. rs – 7am to 3pm City, State & Zip Code												
Describe:	enonned O	utside of Norma	al Hot	11S - 78	am to	3pm											
Facility Occu	pied During	Abatement					Westmont,	NJ 0870	8								
Scope of Work (Che									0		-	70.00		<del>-</del>			
								☐ Fu	II Cont	ainment with I	Vegativ	e Pre	ssure				
≥3 sf or ≥3 lf				Reno					ni-Enc		-						
≥160 sf ≥260	) If		$\boxtimes$	Demo	olition	1		G	ove Ba	g Procedures							
								No	n-Exe	mpted and No	n-Friab	e Pro	cedu	re			
	cation of			ocatio			Description			Amount	Ab	atem	ent T	уре			
	os-Containin rial (ACM)	9		ally Us dely by			Asbestos-Con			(Specify		T					
	E ABATED	ĺ		enance			Material (Al (i.e., thermal s			SF or LF)	R	71	Enc	E			
in	Facility			dial St	aff?		sulation, surfac	cing, VAT			Remova	Repair	Encapsulate	Enclsoure			
	(13)			(12)			or other miscell	aneous)			va	=	ulat	ure			
Protection.			Yes		N/A								(D)				
Exterior					ЦΙ	Roof	ing (In conju		rith 4	1500sf							
Name of Registered	Waste Haule	ar L	NJDEP Waste Cubic Yards Name of Registered Landfill														
ramo or registered	vvasto i lauli	51		- Committee Committee			Cubic Yards Name of Registered Landfill of Waste										
MidCounty Haulin	g			358			30	Grows	Landi	Fill							
City, State		X-3X(					Disposal Date	City, Sta									
Eggégmentes: N.																	
Eastampton, NJ							/arious	Morrisy	rille, P	PA							
Completed By (Print Rod Richardson	or Type)			Title		100	Signature				Date						
Nou (Nicharusoff				Project Rad Richardson 10/24/201						017							
				I													

D&S Proj. #: 17-277	AID 175	(Pursi	uant to NJAC	esto 8:60	J s Abatement o and 12:120)		E C E		V E	
Date of Notification (1)    1   10   / 12   3   / 11   7    Agencies Notified	john a	delman	ner/Operator (2)			A	SBESTOS	CON NSIN	TROL 8	<u> </u>
DOL Emergency (including justification)  DCA Cancellation	Name of	Contact adelman	, NJ 07043			Telephor	ne Number			
Name of facility where abatement is  john adelman  Street Address		FAC	CILITY INFORMA			Subch Other Bldgs.	(4) ol (K - 12) apter 8 (Ot (Private/Co /Homes, etc	mmero		
City (5)  Upper Montclair  Name of Monitoring Firm Hired by E	County (6)  essex  Bldg. Owner (8)		ASCM No.		nty Code (7) te use only)  Name of Abatement	Current Use (P	rior if being	demo	ished)	_
Street Address  City, State, Zip Code  Project Manager for Monitoring Firm				_	D & S RESTORA Street Address 20 California Av City, State, Zip Code Paterson, NJ 07	ve.				_
Start Date (10)  10/27/17  Occupancy Status During Abatement	Sched. Comple	Phone Numb			Telephone Number 973-345-8020  Name of OSHA Moni D & S Restoration Street Address	on, Inc.	License N	169		
Facility closed/vacated during e Abatement performed outside of Describe: NORMAL HO	entire period of aba of normal facility ho DURS			-	20 California Av City, State, Zip Code Paterson, NJ 073					
≥160 sf or ≥260 lf	Renovation Demolition Is location normall	v used solely	ı			Full Containment w Mini-enclosure Glovebag procedur Non-Exempted (*)	e and Non-fri	able p	ocedure	)
asbestos-containing material (acm) to be abated in facility (13)	by maintenance/ct staff(12)				bestos-containing	Amount (Specify S LF)		e m	R E n c a p	E n c L
basement	X		plaster ceiling	g		80 sq ft				
Registered Waste Hauler D & S RESTORATION, INC. City, State PATERSON, NJ 07503	NJDEP Haule 13506			aste	Name of Registered I TULLYTOWN, I City, State TULLYTOWN,	RESOURCE RE	COVERY	7		
BOGDAN JOLDZIC I	Fitle PRESIDENT Do not use this form	n for asbesto	Signature	noted			Date 10/23/2	017		

D&S Proj. #: 17-301  Date of Notification (1)    1   0   / 2   7   / 1   7    Agencies Notified   Type Notifica			(Pursu		besto C 8:6	IJ os Abatement i0 and 12:120)			C E	1 2	017 ROL	& &	
☐ EPA ☐ Initial	11,	Sileet Addre	35					The same of the sa			45.0	National States	necessari.
DEP Amended Amendment#	1	City, State, Z	Zip Code										
□ DOL		montelai		42									
DOH (including justification)		lame of Con						Telephon	e Numbe	r			
DCA Cancellation	- 11	kent ahm	nad					1 .					
			FACI	LITY INFORM	IATIO	N							
Name of facility where abatement	s taking pl	ace (3)				3.00	П	Type of Facility (	(4)				
kent ahmad								_	I (K - 12)				
Street Address									apter 8 (0 (Private/0			(-12)	
								Bldgs./	Homes,	etc.			
City (5)	I Cour	nty (6)						Square Feet	# of Floo	rs	В	dg. A	ge
City (5)	Cou	ity (O)			2000	unty Code (7) ate use only)	+	Current Use (P	rior if beir	na den	nolish	ed)	
montclair	ess								14.000 14.000.00			/	
Name of Monitoring Firm Hired by	Bldg. Own	er (8)		ASCM No.		Name of Abatemen							
Street Address					_	D & S RESTOR	RA	TION, INC.					
Street Address						20 California A	We						
City, State, Zip Code					-	City, State, Zip Code	_				-		
						Paterson, NJ 0	750	03					
Project Manager for Monitoring Firm	1	Pho	one Numb	er	_	Telephone Number			License				
						973-345-8020				1169			
Start Date (10)	Sched	I. Completio	n Date (11	)		Name of OSHA Mo D & S Restora							
10/31/17	11/24	POLYACIO PA				Street Address		,					
Occupancy Status During Abatemen						20 California A		nue					
Facility closed/vacated during Abatement performed outside						City, State, Zip Code	е						
Describe:NORMAL H					-	Paterson, NJ 0	750	)3					
Scope of Work (check all that apply						1 44615011, 113 0		II Containment w	/negative	nress	ure		
≥3 sf or ≥3 lf	Renovation	n					Mi	ni-enclosure	11	Piooc	, 41.0		
≥160 sf or ≥260 lf	Demolition	1					-	ovebag procedur on-Exempted (*)		friahla	nroc	adura	
Location of		n normally u					1 144	JII-Exempled ( )	and Non	R	R	E	E
asbestos-containing material (acm) to be	staff(12)	enance/cust	odial			asbestos-containing		Amount (Specify S	E or	e m	e p	n	n
abated in facility (13)	Yes	No	N/A	material (	ACIVI)	N.		LF)	. 01	O V	a i	a p	L
ground level				PIPE INSU	LAT	TON		106 l ft		e	-		
ground level				TILLINSO	LAI	ION		100111			H	片	H
								1		情		H	計
Registered Waste Hauler D & S RESTORATION, INC.	NJDE 135	EP Hauler II 06	200	ubic Yards of V yd	Vaste	Name of Registere TULLYTOWN			COVE	RY		V	
City, State			Disposal D	ate		City, State	, 10	LOCOROL ICL	JOY LI	-			_
PATERSON, NJ 07503			11/01/17			TULLYTOWN	I, P	A					
Completed by (Print or Type) BOGDAN JOLDZIC	Title PRESID	ENT		Signature					Date 10/27/	2017			



### State of NJ Notification of Asbestos Abatement

B & G proj. #:

2017-155

(Pursuant to NJAC 8:60-7 and 12:120-7)

Check # 8672 Date of Notification (1) Name of Building Owner/Operator (2) 1 10 1/13 10 1/11 17 Justyna Bak Type Notification Agencies Notified Street Address ☐ EPA 2017 NOV Initial DEP City, State, Zip Code X DOL Amendment Lawrencville Twsp., NJ 08648 ASBESTOS CONTROL & elephone NumbéCENSING X DOH Name of Contact Cancellation ☐ DCA Justyna Bak FACILITY INFORMATION Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) Justyna Bak Subchapter 8 (Other than K-12) Other (Private/Commercial Street Address Bldgs./Homes, etc. # of Floors Bldg. Age Square Feet County Code (7) County (6) City (5) (State use only) Current Use (Prior if being demolished) Mercer Lawrencville residential Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. n/a B & G Restoration, Inc. Street Address Street Address 105 Ryerson Road City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035 License Number Telephone Number Project Manager for Monitoring Firm Phone Number (973)696-6869 00378 Name of OSHA Monitor Scheduled Start Date (10) Sched. Completion Date (11) B & G Restoration, Inc. 11/09/2017 11/10/2017 Street Address 105 Ryerson Road Occupancy Status During Abatement (Check only one) Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Lincoln Park, NJ 07035 Other-Describe: Scope of Work (check all that apply) Glovebag procedure Full Containment w/negative pressure X Demolition Renovation Non-friable procedure Mini-enclosure >160 sf or ≥260 lf >3 sf or >3 lf E Is location normally used solely E Location of е n by maintenance/custodial Amount Description of asbestos-containing m asbestos-containing C (Specify SF or staff(12) C material to be material (ACM) 0 a a LF) abated in facility (13) Yes No N/A p X 40 saft **Boiler Insulation** × Basement Name of Registered Landfill Cubic Yards of Waste NJDEP Hauler ID# Registered Waste Hauler Tullytown Resource & Recovery Center 19563 B & G Restoration, Inc. Disposal Date City, State Tullytown, PA Lincoln Park, NJ 11/10/2017 Signature Completed by (Print or Type) Gordana Luna 10/30/2017 Secretary/Treasurer Gordana Luna



# State of NJ Notification of Asbestos Abatement

B & G proj. #: 2017-154

(Pursuant to NJAC 8:60-7 and 12:120-7)

	=									C	heck	# 8670				_	
Date of Notification	(1)	11	Name (	of Building O	M/D	er/Operator (2)											
11 10 1/13 10	1/11 17 1			dale Publi						ſ	7	EC	; [		$\mathbb{V}$	E	T.
Agencies Notified	Type Notifica	tion	Street A								IJ)		) L	Ш	U	<u>L</u>	#
☐ EPA ☐ DEP	Initial		32 F	Ruckman F		ad					$\mathbb{D}$	NO	<i>l</i> –	1 2	017		
X DOL	Amend	lment		ate, Zip Cod dale,NJ 0		42											-
<b>▼</b> DOH	_	1	Name o	f Contact					-	Tel	epho	re-Warne	ĮUS	CUN	ROI	. &	
☐ DCA	Cancel	lation	Lirc	a Garcia								1	IC:FD	ISINO	<u></u>	тинис	
				F/	ACI	LITY INFORM	ATIC	N									
Name of facility whe	ere abatement	is taking p	place (3)						T	Type of Fa							
George G Whit	te Middle S	chool (N	on-sub	8)								ol (K - 12 apter 8 (	2000	than I	(-12)		
Street Address											other	(Private/0	Comm		0010007		
120 Magnolia	Avenue								-	Square Fe		/Homes, # of Floo		В	ldg. A	ge	
City (5)		Co	unty (6)					unty Code (7)						_	12000		_
Hillsdale		В	ergen				(St	ate use only)	y) Current Use (Prior if being demolished non-sub 8								
Name of Monitoring		Bldg. Ow	ner (8)		T	ASCM No.		Name of Abatement			_						
T & M Associa	ates					145		B & G Restorat	tio	n, Inc.							
Street Address							_	Street Address	<u> </u>	1							
11 Tindall Roa								105 Ryerson F	-	ad	-		-		-		_
City, State, Zip Code Middletown, N								City, State, Zip Code Lincoln Park,		J 07035							
Project Manager for N	Monitoring Firn	1		Phone Nur	one Number Telephone Number							License	Num	ber	_	_	_
Kevin Burns				732-676-	-17	25		(973)696-686	_			0	0378				
Scheduled Start Date	(10)	Sche	d. Com	oletion Date	(11	)		Name of OSHA Moni B & G Restorat	100								
11/11/2017		11	/12/201	17				Street Address	LIO	III, IIIC.							-
Occupancy Status Du			2.5					105 Ryerson R	202	ad							
Facility closed/\ Abatement perf								City, State, Zip Code									_
Describe:  Other-Describe	:						-	LincolnPark, N.	J (	07035							
Scope of Work (chec	ck all that apply	y)														-	_
☐ Demolition	X	Renovat	on					Full Containment w/neg	gat	tive pressur	re [	Glove	baq p	roced	ure		
$\ge 3$ sf or $>3$ If		≥160 sf o	r <u>≥</u> 260 lf					Mini-enclosure				₩ Non-f					
Location of				ally used sol	ely							-	R	R	E	E	
asbestos-conta material to be	ining	staff(12)		custodial				asbestos-containing		Amo (Spe	20 70	For	m	e p	n	n	
abated in facility	y (13)	Yes	No	N/A		material (A	ACIVI)			LF)	city C	1 01	o v	a	a	L	
ledia Center North	h Entrance	1	×	-	VAT & ma	aetic			00.05			e	r		+	7	
· ·	Stairwell			=	- V/ (1 C 1110	الالا	,		90 sf		-		1	H	1-	-	
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Registered Waste Hau B & G Restoratio		NJD	EP Hau 19563	ler ID#	Cı	bic Yards of W	aste	Name of Registered Tullytown			R Re	COVERY	Cen	ter			_
City, State Lincoln Park, NJ		L		Disposal				City, State Tullytown, I			~ 1 (0	Jovery	0011	(CI			_
Completed by (Print o		Title			1	Signature			. /	`		Date			- 1		_
Gordana Luna	, , , ,	Secreta	irv/Tre	asurer		3.3		Ciordana Luna				10/3/	1/20-	17			



Completed by (Print or Type)

Gordana Luna

Title

Secretary/Treasurer

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

B & G proj. #: Check # 8671 Date of Notification (1) Name of Building Owner/Operator (2) 1 10 1/13 10 1/11 17 1 Todd Scheifele Agencies Notified Type Notification Street Address X EPA NOV - 1 2017 X Initial ☐ DEP City, State, Zip Code Amendment DOL Verona, NJ 07044 ASBESTOS CONTROL & elephone Number ENSING X DOH Name of Contact Cancellation ☐ DCA Todd Scheifele **FACILITY INFORMATION** Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) Todd Scheifele Subchapter 8 (Other than K-12) Street Address Other (Private/Commercial Bldgs./Homes, etc. # of Floors Bldg. Age Square Feet County (6) City (5) County Code (7) (State use only) Current Use (Prior if being demolished) Verona, NJ 07044 Essex residential Name of Monitoring Firm Hired by Bldg. Owner (8) Name of Abatement Contractor (9) ASCM No. n/a B & G Restoration, Inc. Street Address Street Address 105 Ryerson Road City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035 Telephone Number Project Manager for Monitoring Firm License Number Phone Number (973)696-6869 00378 Name of OSHA Monitor Scheduled Start Date (10) Sched. Completion Date (11) B & G Restoration, Inc. 11/13/2017 11/16/2017 Street Address Occupancy Status During Abatement (Check only one) 105 Ryerson Road Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Lincoln Park, NJ 07035 Other-Describe: Scope of Work (check all that apply) ☐ Demolition | Renovation Full Containment w/negative pressure Glovebag procedure Mini-enclosure Non-friable procedure ≥ 3 sf or ≥3 lf ≥160 sf or ≥260 lf Is location normally used solely E Location of Ε e е by maintenance/custodial n Amount asbestos-containing Description of asbestos-containing n m staff(12) p C (Specify SF or material to be material (ACM) 0 a LF) abated in facility (13) Yes No N/A p vermiculite 550 sf X attic Registered Waste Hauler NJDEP Hauler ID# Cubic Yards of Waste Name of Registered Landfill Tullytown Resource & Recovery Center B & G Restoration, Inc. 19563 Disposal Date City, State Lincoln Park, NJ Tullytown, PA 11/17/2017

Signature

Gordana Luna

10/30/2017



## State of NJ Notification of Asbestos Abatement

(Pursuant to NJAC 8:60-7 and 12:120-7) 2017-134 B & G proj. #: Check # 8669 Date of Notification (1) Name of Building Owner/Operator (2) 1 10 1/13 10 1/11 17 Karen Timmons Agencies Notified Type Notification Street Address ☐ EPA 2017 Initial DEP City, State, Zip Code Amendment DOL Livingston, NJ 07039 ASPESTOS CONTROL & X DOH Name of Contact Telephone Number NSING Cancellation ☐ DCA Karen Timmons **FACILITY INFORMATION** Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) Karen Timmons Subchapter 8 (Other than K-12) Other (Private/Commercial Street Address Bldgs./Homes, etc. Bldg. Age # of Floors Square Feet County (6) City (5) County Code (7) (State use only) Current Use (Prior if being demolished) Livingston, NJ 07039 Essex residential Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Abatement Contractor (9) n/a B & G Restoration, Inc. Street Address Street Address 105 Ryerson Road City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035 License Number Telephone Number Project Manager for Monitoring Firm Phone Number (973)696-6869 00378 Name of OSHA Monitor Sched. Completion Date (11) Scheduled Start Date (10) B & G Restoration, Inc. 11/10/2017 11/11/2017 Street Address 105 Ryerson Road Occupancy Status During Abatement (Check only one) Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Lincoln Park, NJ 07035 Other-Describe: Scope of Work (check all that apply) Demolition Full Containment w/negative pressure Glovebag procedure | Renovation Non-friable procedure Mini-enclosure >3 sf or >3 If 2160 sf or ≥260 lf E Is location normally used solely Location of E by maintenance/custodial n Amount asbestos-containing Description of asbestos-containing n m staff(12) (Specify SF or C material to be material (ACM) 0 a a abated in facility (13) L Yes No N/A p X basement pipe 85 If NJDEP Hauler ID# 19563 Cubic Yards of Waste Name of Registered Landfill Registered Waste Hauler B & G Restoration, Inc. Tullytown Resource & Recovery Center Disposal Date City, State Tullytown, PA Lincoln Park, NJ 11/13/2017

Signature

Secretary/Treasurer

Gordana Luna

Completed by (Print or Type)

Gordana Luna

Date

10/30/2017

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Date of Notification (1)					Nar	ne of Buildi	ling O	wner/Operator	(2)	11					$\parallel$		
10/3	1/	_ 1	7			Bl Projec		973.0101	(2)		NOV .	- 1	21	)17			
Agencies Notified Ty	pe Notif	ficatio	n			et Address				leed bank					-		
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(NJAC 5:23-8)	justifica Cancel	100				ne of Conta				Telephone	e Numbe	er					
	Cancel	lation			A	nthony A	rmar	nto									
Manager III and					F	ACILITY I	INFO	RMATION					-				
Name of Facility Where Abat	ement is	Takir	ng Plac	ce (3)					Type of Facilit	Facility (4)							
Former Henry Bonsall	Eleme	ntary	Scho	loc					School (K-12)								
Street Address									Subchapter 8 (Other than K-12)  Other (i.e., private and commercial buildings,								
1575 Mt. Ephraim Aver	nue								homes, etc	private and co	mmerci	al b	uildir	gs,			
City (5)									Square Feet	# of Floor	re	ID	lala /				
Camden									Square Feet # of Floors Bldg. Age 60000 3 75+								
County (6)		7.57		-5-3-3-	Cou	inty Code (	(7)(STA	ATE USE ONLY)	Current Use (F	4 8	om eliek	-1	10+				
Camden									emolishe	ea)							
Name of Monitoring Firm Hire	d by Bui	ilding	Owner	(8)	ASCN	1 No.	Na	me of Abateme									
Whitman					110-200-0-001												
Street Address								eet Address	Specialty Contracting, Inc.								
7 Pleasant Hill Road							1	8 Lacrue Av									
City, State, Zip Code							_	y, State, Zip Co									
Cranbury, NJ 08512																	
Project Manager for Monitoring	g Firm			Tel	ephone	No	_	Glen Mills, PA	4 19342								
Kevin T. Lovely					15	0-5858		10-364-9622		License N	lo.						
Start Date (10)		Sched	duled (			ate (11)		me of OSHA M	•	01103							
11 /06 /17	7				1 /		-	riterion Labs									
Occupancy Status During Aba							1		S 								
☐ Facility Closed/Vacated Du	ring Enti	ire Pe	riod of	Abata	mont			eet Address									
☐ Abatement Performed Outs	side of N	ormal	Facilit	v Hou	rs - Des	scribe		370 Progress									
Time of Abatement: 7:00A	M- <u>3:30</u>	PM/_		M	AM		10 0000	, State, Zip Co			100						
Scope of Work (Check all that	annly						В	ensalem, PA	19020								
	apply)							D Eull Conta					-112-				
<ul><li>≥3 sf or ≥3 If</li><li>≥160 sf or ≥260 If</li></ul>				novat				☐ Mini-Enclo	ainment with Ne	gative Pressur	e						
24 2 100 St 01 2200 II			☐ De	molitic	on				Procedure								
			Is	Locat	ion			Non-Exem	npted (*) and No	n-Friable Prod	cedure						
Location of			1	Vorma	lly			Description of			L	Aba	atem	ent T	уре		
Asbestos-Containing Mater	ial (ACN	1)		d Sole intena		Asbes	stos (	Containing Mate	erial (ACM)	Amount		Re	Re	Щ	m		
TO BE ABATED IN Facility				todial		(i.e.	., the	rmal systems in	sulation,	(Specify	,	Remova	Repair	Encapsulate	Enclosure		
(13)				(12)				urfacing, VAT, oner miscellaneo		SF or LF	)	Val	-	lusc	sure		
			Yes	No	N/A		Out	ici miscenaneo	us)					ate	CD		
Front section all floors					$\boxtimes$	Floor til	le & ı	mastic		16,000 S	F	3		П			
Bathroom pipe chases (6)	ea				$\boxtimes$	Pipe Ins	sulat	ion		600 LF		3					
Classroom all floors					$\boxtimes$	Glue do	ots as	ssoc with bla	ckboards	10,000 S	- 2	<u>a</u>	님				
					П					,			님	님	님		
Name of Registered Waste Hau	uler			N	JDEP V	Vaste I	Cubi	ic Yards of	Name of Regis	torod Landfill				Ш	Ш		
Mercer Group Internation	nal				auler ID		Was	te		Resources I	Door		_	117			
City, State							Disp.	osal Date		resources I	recove	гу	raci	iity			
1519 Rev S Howard Woo	dson J	lr Wa	y, Tre	nton	NJ 0	8638		s req.	City, State Tullytown,	DΛ							
Completed By (Print or Type)		Title					- 10		Tunytown,	FA							
Jack Tomasura			nior I	Estim	ator			Signature	10		Date						
00.44					4101		1	-11/11	MANA	1	10	1 -	711	, 7			