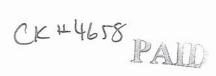
PAID

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

NOV - 1 2018

Agendes Notified Type Notification		A PARTER					NOV	10.00	4	160	i		
September Solid September Septembe)	-18		Name of Buil			USTRUCT	10	سر زال	· · · · · · · · · · · · · · · · · · ·			
Dep				Street Addre	ss 300 7	TTU CT	1	films to the	#13	15.	23		
Section Sect	DEP A			City State 7		31	1-		-		=		
Name of Coglact FACILITY INFORMATION PACIFICATION PACIFICA			ding			CITY	N.T	26	74	2			
DDA Cancellation FACELITY INFORMATION	DOH ju		JH NG					-					
Name of Facility Where Abatement is Taking Place (3) RESIDEALCE Street Address City (5) County (6) CAPE WAY County (6) County (6) CAPE WAY County (7) County (8) County (9) County (8) County (9) County (9) County (10) County	DCA Ca	ncellation			RAMIC			1100					
Street Address School (K-12) School (K-12		T (4)		FACILITY	NEORMATION								
Street Address Subchapter 8 (Other than K-12) County (6) County (6) CAPE WAY CAP			ece (3)			CASSOCIATION ASSOCIATION	500 100000						
County (6) CAPTE WAY County (7) County (8) CAPTE WAY County Code (7) (STATE CURRENT Use (Prior If being demosphed) CAPTE WAY County Code (7) (STATE CURRENT Use (Prior If being demosphed) CAPTE WAY County Code (7) (STATE CURRENT Use (Prior If being demosphed) CAPTE WAY County Code (7) (STATE CURRENT Use (Prior If being demosphed) Capter Address Street Address Str		DEMILE				Subchapte	er 8 (Other than K-	12)					
County (6) COUNTY (6) CAPTE WAY County Code (7) (STATE USE ONLY) Name of Monitoring Firm Hired by Building Owner (8) Name of Monitoring Firm Hired by Building Owner (8) Name of Monitoring Firm Hired by Building Owner (8) Name of Monitoring Firm Hired by Building Owner (8) Name of Abatement Contractor (9) City, State, Zip Code City, State, Zip Code WA PCE SHADE A TO 8002 Project Manager for Monitoring Firm Telephone No. Street Address 36 9 S LPRUCE AUCT City, State, Zip Code WA PCE SHADE A TO 8002 Telephone No. SST-77 9 - 0472 City, State, Zip Code WA PCE SHADE A TO 8002 Telephone No. SST-77 9 - 0472 City, State, Zip Code WA PCE SHADE A TO 8002 Telephone No. SST-77 9 - 0472 City, State, Zip Code WA PCE SHADE A TO 8002 Telephone No. SST-77 9 - 0472 City, State, Zip Code WA PCE SHADE A TO 8002 Telephone No. SST-77 9 - 0472 City, State, Zip Code WA PCE SHADE A TO 8002 Telephone No. SST-77 9 - 0472 City, State, Zip Code WA PCE SHADE A TO 8002 Telephone No. SST-77 9 - 0472 City, State, Zip Code WA PCE SHADE A TO 8002 Telephone No. SST-77 9 - 0472 City, State, Zip Code WA PCE SHADE A TO 8002 Telephone No. SST-77 9 - 0472 City, State, Zip Code WA PCE SHADE A TO 8002 Telephone No. SST-77 9 - 0472 City, State, Zip Code WA PCE SHADE A TO 8002 Telephone No. SST-77 9 - 0472 City, State, Zip Code WA PCE SHADE A TO 8002 Telephone No. SST-77 9 - 0472 City, State To 8000 Telephone No. SST-77 9 - 0472 City, State To 8000 Abatement Type Abatement Type Abatement (ACM) To 8000 To						homes, et	c.)	cial bu	iilding	S,			
County (6) CAN'E WAY Name of Monitoring Firm Higed by Building Owner (8) Street Address S	City (5)	AL CITE					# of Floors			3000			
Name of Monitoring Firm Highed by Building Owner (8) Street Address Street A		o CIII		County Code	(7) (STATE		Prior if being demo	- -			_		
Street Address Stre	CAPEI	MAY		USE ONLY)		V							
Street Address Telephone No. Street Address		Building Owne	er /	ASCM No.					Ø.				
Size Address SPRUCE AUCT City, State, Zip Code City, State, Zip Code MAPLE SHADE N.T. 08052	IVIA		<u>—</u> 1:			CM (O	TNC				_		
City, State, Zip Code	Street Address					S. SP	RUCE AU	(-,					
Telephone No. \$56-779-0472 License No. \$56-779	City, State, Zip Code					ode	LANE AL	+ /	75	2	,		
Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor Street Address			Tolor	shone Nh		LE ST) (000	ررر	<u>_</u>		
Street Address Stre	Project Manager for Monitoring Fi	m	1 616,	# DIRE 140.	856-77	9-0472	. College No.	3.7	Ĺ				
Street Address Street Address	Start Date (10)	Scheduled			Name of OSHA N	Monitor . /							
Abatement Abatement Performed Outside of Normal Facility Hours City. State, Zip Code		11-		-18		N	<u>A</u>						
Abatement Performed Ourside of Normal Facility Hours Other - Describe: City, State, Zip Code				ant.	Street Address								
Other - Describe:	➤ Facility Closed/Vacated Duning Abatement Performed Outside	Entire Period of of Normal Facili	tv Hours	en(City, State, Zip Code								
23 sf or 23 if	Other - Describe:	0171011110111011											
3 sf or ≥3 if	Scope of Work (Check all that app	ły)			□ Full Con	tainment with Ne	ertative Pressure				5000000		
Demotition Slovebag Procedure Specify Saletante Specify	7>3 sf or >3 ff			1	☐ Mini-Enc	losure	gadve Flessule						
S Location of Abatement Type	≥160 sf or ≥260 lf	Ø □	emolition				on Eriable Demodu	ro					
Normaly Used Solety by Maintenance Custodial Staff? (12) Yes No N/A N/A N/A N/A N/A N/A		1-1	ocation		MINOREXE	Indico () and in	AFFIRDE FIDOSOU		Abate	ment	_		
Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) Yes No N/A SIDING NIDEP Waste Hauler NIDEP Waste Hauler D No. 17904 Disposal Date City. State Wood Biwle Night Signature		N	omally					'	_				
TO BE ABATED IN Facility (13) Yes No N/A SID IM G TO BE ABATED IN Facility (12) Yes No N/A TRAM SITE Custodial Staff? (12) Yes No N/A TRAM SITE Custodial Staff? (12) TRAM SITE Custodial Surfacing, VAT, or other miscellaneous TRAM SITE TRAM		1				rial (ACM)	Amount						
SIDING X TRANSITE 2250SF SIDING NDEP Waste Cubic Yards of Waste Cubic Yards of Waste CM. C. M.J.A. Yes No N/A TRANSITE 2250SF Name of Registered Landfill Hauser D No. 7904 Disposal Date— City. State WASTE WOODBING Name of Registered Landfill CM. C. M.J.A. Signature - WOODBINGE N.T. Signature - WOODBINGE N.T.		C	ustodial		thermal systems in	sulation,	(Specify	R	R	inc	Enc		
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ime of Registered Waste Hauler NUDEP Waste Cubic Yards Name of Registered Landfill		Yes	No I								_		
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WALL SHADE NI. I 08052 Signature - 100 Signatu					O. His Varia	Name of De	torndl == 40"						
y, State WARLE SHADE NI. T 08052 Disposal Date— City, State 2000 BINGE N. T MARPLE SHADE NI. T 08052 Signature - 1000 BINGE N. T Signature - 1000 BINGE N. T	lame of Registered Waste Hauter	_			25.00	•	S 90 90 4 0						
WARLE SHADE NI. I 08052 WOODBINGE N. I Signature - 100 Signature - 100 - 28-18	KLEMCO DU	<u> </u>	-115	904			·MU.H.	_			=		
mpleted By Title Signature - Signature - 10 - 28-18	ity. Staté	_ 11 -	T 0	8052	Ursposal Date—	Ulty, State	Built A	1 7	-				
mpraed by (/ // / / / / / / / / / / / / / / / /				0076	Signature -	1/2		2	2 .	0			
MICHAEL CLONIN SUR.	MICHAEL CLOMM		JP.		- When	Wil	- 10-	<u>-L</u>	8-1	8	_		



NOV - 1 2018

Agencies Notified PA
Amendment #
Name of Contact SAME
Street Address Stre
Street Address
Street Address Subchapter 8 (Other than K-12) Other (i.e., private & commercial buildings, homes, etc.) Square Feet # of Floors 50 + County (6) County Code (7) (STATE Current Use (Prior if being demolished) VACAUT Name of Monitoring Firm Hired by Building Owner ASCM No. Name of Abatement Contractor (9) Street Address Street Address Street Address
County (6) Name of Monitoring Firm Hired by Building Owner (8) Square Feet # of Floors 50 + County Code (7) (STATE Use (Prior if being demolished) VA CANT Name of Abatement Contractor (9) KLEM CO INC Street Address
County (6) CIAPE MAY Name of Monitoring Firm Hired by Building Owner (8) Street Address County Code (7) (STATE USE ONLY) Current Use (Prior if being demolished) VIA CHALT Name of Abatement Contractor (9) KLEM CO INC Street Address
Name of Monitoring Firm Hired by Building Owner (8) Name of Abatement Contractor (9) KLEM CO INC Street Address Street Address
Street Address Street Address
369 S SPRUCE 41F
City, State, Zip Code City, State, Zip Code
MAPLE SHADE NIJ
Project Manager for Monitoring Firm Telephone No. Telephone No. Telephone No. Telephone No. Discription of the phone No. Telephone No. Telephone No. Telephone No. Telephone No.
Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor
Occupancy Status During Abatement (Check only one) Street Address Street Address
Abatement Performed Outside of Normal Facility Hours City, State, Zip Code
Scope of Work (Check all that apply)
☐ ≥3 sf or ≥3 lf ☐ Renovation ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Stone Friable Procedure
Is Location Abatement Type
Location of Used Solety by Description of Asbestos-Containing Material (ACM) Maintenance/ Asbestos Containing Material (ACM) Amount m TO BE ABATED Custodial (i.e., thermal systems insulation, (Specify 20 m 3
Aspestos-Containing Material (ACM) TO BE ABATED IN Facility (13) (12) Aspestos Containing Material (ACM) Custodial Staff? surfacing, VAT, or other miscellaneous) Aspestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)
Yes No N/A
SIDING X TRANSITE SOODER X
Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill
KLTMCO INC 1904 S vos C. M. C. M. U. A
City. State Disposal Date City. State WOOWBINE N.T
Completed By MICHAEL KLIMM SUP. Signature 10-78-18

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Name of Facility Wilson Abelement is Talci	ng Pisoe (3)		ACIL	ST STEP	ACCOUNT OF	Jane	Type of r	willing (4))	CANCELLA SERVICE CONTRACT				-
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Street Address						ar exhibit mark	THE CHAN	title mi	train it	CONTRACTOR CO.	is bulled	nga, f	OTHER	ě,
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County (6) (SAPLACE)		(97	ATE U	rde (7) NE ONE 19				RES	166NC	Ė.				-
Name of Monitoring Firm Hand by Building	Character (87)		ARCM	Poles.			Abeton C Cont			93				
Street Address	- Name and Address of the Address of						Address	ourse, and		- Indentification	a and the same of the same			
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Project Manager for Manitoring Firm		176	ephon	e No.		Teleph	one No.	Later Vision	T	License N	6		-	eener .
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85000 Dele (10) 10/26/18		130 M		INDIAN 6.1.15		Ome	ga Envi	Onma	ntal Sc	rvioes fr	ic .			
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Facility Closed-Vacated During Entire Abstracts Performed Outside of No	a Pariod of A	Abatemen Hours	R.			4	lais, Zip					-	****	-
C Other - Describe:					minh	Haci	censac!	NJ 07	608					
Scope of Work (Check All That Apply)						e	. r.so.5		noné wollén	Negačiva i	Demonstra to	198		
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Location of Asbestos-Containing Malarial (ACM)		Hormally ed Solety Intenditor			toe Con		ica Ambarimi (/ microslado		A	mount pearly	30	-	5	-
TO BE ASATED	- Cus	todiel Šta .(12)	d??	£4.48.	quatre	nding, Vê miscele	T. or	A. British	ÈF	orLF)	Rayracyraf	Repute	Exceptable	Commentation of the Personal Property learning
(13)	Yes	No	NVA		Vhier sides	HUNGER	serves				1	-		Special way
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Andrew Commission of the Commi	1	1					*******	Chart . North					Brandon	-
Name of Registered Waste Healer Name of Carting Inc.		Han	DEP W uler ID 509		Cubi of W	o Yards este 3				sed Landi al Saniti		ndfill		
Cay, Same		1 1993	308			cest Cas		77. Sta	BAL			*****		-
Newark, NJ 07105				entres entre	1/1/2	CA OF		Pen A	rgyl, P	A 08702	isia			-
Completed by	1100	Presid			1	Bignoigh	2 5	Continu		1,	at/a	4 100		

Date of Notification (1)				T	Name of Buil	Iding Owner/Operato	- (2)		- epi an establishe ist	rest y 100	
10 /30	/	18			State of	f NJ Departm	ent of Trees	Time / Joh	#4040 E	101	
Agencies Notified Tyr	e Notifica	tion	_		#10751 1	0752 10753 1075	4	, MOA	#1910209	04	Che
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DCA DCA	Emergeno	y (inclu	ding	_	Trenton, I		in.	Some on the state of the state of	Standard State of State	* ***	5,61 + 5
	justificatio Cancellatio				lame of Cont	375/7-74		Telephone Nu	mber		
	Jancellatio	on			Mike Wils			609-512-2	345		
Name of Facility Where Abater	ment is Ta	kina DI	200 /3	2)	FACILITY	INFORMATION					
Executive State House	mont is 18	Killy FI	ace (S)			Type of Facility				
Street Address							School (K-1	2)			
125 West State Street							Other (i.e. r	8 (Other than K-1 private and comm	i2) Jercial build	linas	
City (5)							homes, etc.)	Crciai bullo	iriys,	
Trenton, NJ							Square Feet	# of Floors	Bldg	. Age	
County (6)										-	
Mercer				0	ounty Code	(7)(STATE USE ONLY)	Current Use (Pr	rior if being demol	lished)		
								3	10.104)		
Name of Monitoring Firm Hired	by Buildin	g Owne	er (8)	AS	CM No.	Name of Abatem	nent Contractor (9))			
Langan Engineering						AbateTech,		6			
Street Address						Street Address					
300 Kimball Drive							e. PO Box 25				
City, State, Zip Code						City, State, Zip C					
Parsippany, NJ 07054						Lumberton,					
Project Manager for Monitoring I	Firm		Te	elepho	ne No.	Telephone No.	140 00040	1			
Vijay Patel				577	60-4900	609-265-2107	,	License No.			
Start Date (10)	Sch	eduled			Date (11)	Name of OSHA N		00529			
11 /12 /18					18	EMSL Analyt			30 KA		
Occupancy Status During Abater	ment (Che	ck only	(ono)				icai				
☐ Facility Closed/Vacated Durin	σ Entire P	eriod o	f Abo			Street Address					
□ Abatement Performed Outside	e of Norma	al Facil	ity Ho	ure - D	accriba	200 Route 13					
Time of Abatement:Af	VIF	PM/	PN	a.о д Л-	AM	City, State, Zip Co				7	
Scope of Work (Check all that ap						Cinnaminson	, NJ 08077				
☐ ≥3 sf or ≥3 lf	,	12000					ainment with Nega	ative Proceurs			
\(\text{\geq} \geq 160 \text{ sf or \geq 260 \text{ lf}}\)		⊠ R	enova emolit	tion			osure	alive Flessule			
			emolit	ion		☐ Glovebag	Procedure				
		1	s Loca	ation	T	□ Non-Exer	npted (*) and Non	-Friable Procedur	e		
Location of			Norm	ally		Docorintias et			Abatem	nent T	Гуре
Asbestos-Containing Material	(ACM)			ely by	Asbes	Description of stos Containing Mat	erial (ACM)	Amount	Re Re	Щ	m
TO BE ABATED IN Facility				ance/ Staff?	l (ia	., thermal systems in	nsulation,	(Specify	Remova	car	ıclo
(13)			(12)			surfacing, VAT, other miscellaneo	or	SF or LF)	val	Encapsulate	Enclosure
9277 - 20 		Yes	No	N/A	. ,	other miscellaned	us)			ate	0
SEE ATTACHED					SEE AT	TACHED		SEE	N D	-	
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ame of Registered Waste Hauler											
AbateTech, Inc.				JDEP lauler l		Cubic Yards of Waste	Name of Registe	red Landfill			
				1875	The second second	40	G.R.O.W.S. I	_andfill			
ty, State						Disposal Date	City, State				_
Lumberton, NJ						11/26/18	Tullytown, P.	Α			
empleted By (Print or Type)	Title					Signature	,,.				10
Gwendolyn Trumbetti	0	peratio	ons (Coord	inator	- gradule	MA	Date	0 30	118	
3-41				200		-	11111	116	1120	الدا ا	

Scope of Work Cont.

NOV - 1 2018

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Location of ACM	Used for Maint.	Description of ACM	Amount	Abatement Type
Governor's Office	NO	Plaster	1,250 SF	Removal
Governor's Office	NO	Duct Insulation	50 SF	Removal
Governor's Office	NO	Vapor Barrier	150 SF	Removal
2 nd Floor	NO	Plaster	2,100 SF	Removal
2 nd Floor	NO	Duct Insulation	150 SF	Removal
2 nd Floor	NO	Vapor Barrier	150 SF	Removal
Building Entrance	NO	Plaster	1,900 SF	Removal
Exterior	NO	Roofing Material	600 SF	Removal
Throughout	NO	Window Caulk	200 LF	Removal



State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT E C E I W

Date of Notification (1)						Nam	ne of Buildi	ina (Owner/Operator	(2)			- 1		11		
10/	26	/	18			Rutgers, The State University of N.J NOV.Job 1 #2012.5									Cher		
Agencies Notified	Type Not	tificatio	nn -	_	-	111	0713 107 et Address	714	10715 10716	10717 10718	10719 10720	-40		hard.	31100		
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☑ DHSS	Amen		_		1		scataway				A						
DCA (NJAC 5:23-8)	☐ Emerg			ling	′ ,		e of Conta		J 08854								
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1,	_ Cance	-Ha <u>tion</u>	Lynd L			1,77.7	chael F.				848-445-25	50					
Name of Facility Where Ab	oto	- T-1-	- 51			FΑ	CILITY II	NFO	ORMATION								
										Type of Facilit	,						
Rutgers- Livingston (Street Address	Campus	s- Blo	gs. 4	086,	4087	& 4	4155			School (K-	12)						
27 Road #1											r 8 (Other than K-12 private and comme		huildi	nas			
The Court State State Living										homes, etc		i Giai i	Juliul	igs,			
City (5)									8	Square Feet	# of Floors	E	3ldg.	Age			
Piscataway, NJ 08854	1			25/1							4		60+				
County (6)						Cou	nty Code (7	7)(S7	TATE USE ONLY)	Current Use (F	Prior if being demoli	shed)					
Middlesex										Academic							
Name of Monitoring Firm Hi		uilding	Owne	r (8)	AS	CM	No.	N	ame of Abateme	ent Contractor (9	9)						
Health & Safety Service	ces				1	117			AbateTech, Ir	nc.							
Street Address								St	treet Address								
PO Box 365									30 Maple Ave	. PO Box 25							
City, State, Zip Code	PE.		-,	City, State, Zip Code													
Berlin, NJ 08009						1 .	Lumberton, N										
Project Manager for Monitori		T	elepho	one	No.	-	elephone No.		License No.								
James Proctor							-1311	100000	609-265-2107		00529						
Start Date (10)		Sche	duled (Comp			te (11)		ame of OSHA Mo	onitor	00323						
7/25/	18						18	1	EMSL Analytic								
Occupancy Status During Ab	atement	(Chec	k only	one)				-	reet Address					-			
☐ Facility Closed/Vacated D	uring En	tire Pe	riod of	f Aba	temer	nt		20000	200 Route 130	North							
☐ Abatement Performed Ou	tside of N	Norma	l Facili	tv Ho	ours -	Desc	cribe		y, State, Zip Coo								
Time of Abatement:	AM	P	M/	P	M	/	MA	- 2.3	Cinnaminson,								
Scope of Work (Check all tha	it apply)								, , , , , , , , , , , , , , , , , , ,	145 00077							
≥3 sf or ≥3 lf			-						☐ Full Conta	tainment with Negative Pressure							
\(\text{\geq} \geq 160 \text{ sf or \geq 260 lf}\)			⊠ Re						Mini-Enclo Mini-Enclo	closure							
				-111011	don				⊠ Glovebag ⊠ Non-Exem		n-Friable Procedur	Δ .					
			Is	Loc	ation					, ,,		1	atom	ent T	\'ne		
Location of				Norm					Description of				_	1	-		
Asbestos-Containing Mate		Л)			olely b		Asbes	tos	Containing Mate	erial (ACM)	Amount	Rem	Repair	nc	incl		
IN Facility	2		25.000.000	todia	I Staff	8	(I.e.,		ermal systems in surfacing, VAT, o		(Specify SF or LF)	Removal	air	aps	Enclosure		
(13)				(12					her miscellaneou		31 01 L1)	=		Encapsulate	ē		
			Yes	No) N	/A								a			
See Attached						1	See Atta	che	ed		See Attached		П				
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ame of Registered Waste Ha	auler				NJDE				oic Yards of	Name of Regis	tered Landfill						
AbateTech, Inc.					Haule 187		No.	Was 40		Fairless La	andfill						
ity, State					.07	00	1			City, State				-	_		
Lumberton, NJ									1/30/18	Tullytown,	PA						
Completed By (Print or Type) Title									Signature								
Gwendolyn Trumbetti		33307.77	erati	ons	Cool	din	ator		O'gratare)	AKA	Date	= - (3 /		0.		
P 41			- o. au	2.10	2001	ulli	401		11/	UXI		01-	10	11	3		

ASB-41 **MAY 11**

Scope of Work Cont.

NOV - 1 2018

Building #4086 NO Roof Flashing 125 SF Remove Building #4086 NO Floor tile 6,884 SF Remove Building #4087 NO Floor tile 7,732 SF Remove Building #4087 NO Mastic 43 SF Remove Building #4087 NO Furnace Gasket 5 LF Remove Building #4087 NO Furnace Door Packing 2 SF Remove Building #4087 NO Roof Flashing 125 SF Remove Building #4087 NO Roof Flashing Building #4087 NO Ro	ype
Building #4087 NO Floor tile 7,732 SF Remove Building #4087 NO Mastic 43 SF Remove Building #4087 NO Furnace Gasket 5 LF Remove Building #4087 NO Furnace Door Packing 2 SF Remove Building #4087 NO Furnace Door Packing 2 SF Remove Building #4087 NO Furnace Door Packing 2 SF Remove Building #4087 NO Furnace Door Packing 2 SF Remove Building #4087 NO Furnace Door Packing 2 SF Remove Building #4087 NO Furnace Door Packing 2 SF Remove Building #4087 NO Furnace Door Packing 2 SF Remove Building #4087 NO Furnace Door Packing 2 SF Remove Building #4087 NO Furnace Door Packing 2 SF Remove Building #4087 NO Furnace Door Packing 2 SF Remove Building #4087 NO Furnace Door Packing 2 SF Remove Building #4087 NO Furnace Door Packing 2 SF Remove Building #4087 NO Furnace Door Packing 2 SF Remove Building #4087 NO Furnace Door Packing 2 SF Remove Building #4087 NO Furnace Door Packing 2 SF Remove Building #4087 NO Furnace Door Packing 2 SF Remove Building #4087 NO Furnace Door Packing 2 SF Remove Building #4087 NO Furnace Door Packing 2 SF Remove Building #4087 NO Furnace Building #4087 NO Furnace Door Packing 2 SF Remove Building #4087 NO Furnace Building #408	
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Building #4087 NO Furnace Gasket 5 LF Remove Building #4087 NO Furnace Door Packing 2 SF Remove Building #4087 NO React Starts	val
Building #4087 NO Furnace Door Packing 2 SF Remove	val
Building #4087 NO Boof Flority	val
Building #4087 NO Roof Flashing 125 SF Remova	val
	/al
Building #4155 NO Transite Ceiling Panels 1,400 SF Remova	/al
Building #4122 NO Complete Wet Demolition & Disposal as ACM Remova	ral
Building #4089 NO Complete Wet Demolition & Disposal as ACM Remova	al
Building #4090 NO Complete Wet Demolition & Disposal as ACM Remova	al
Building #4102 NO Complete Wet Demolition & Disposal as ACM Remova	al
Building #4103 NO Complete Wet Demolition & Disposal as ACM Remova	al
Building #4127 NO Complete Wet Demolition & Disposal as ACM Removal	al
Building #4155 NO Complete Wet Demolition & Disposal as ACM Removal	al
Building 5022 Kiln NO Complete Wet Demolition & Disposal as ACM Removal	al

Date of Notification (1)			Name	of Buildin	a Owner!	Oporata	- (2)	1 -	17.4mm V						
10/25/2018			Name of Building Owner/Operator (2) Mohamed Seyam												
Agencies Notified Type Notification			Street	Address					()	9 !	- I			4	110
EPA Initial Amended Amendmen	+ #		City, S	state, Zip (Hiawat	Code			1 1 2 4		NOV -	-1	201	8	Anti-	
X Emergency	(includin	ig .		of Contac								-		12,00	
DCA justification Cancellation			Mark	o Stank	ovic, P	950	Mana	ager	/ <u>le</u>	lephone	e Numr	ner 2		F	Na die
Name of Facility Where Abatement is Takir	ng Place	(3)	FAC	CILITY IN	FORMAT	ION	Typ	e of Facility	(4)	a Managarita (residence seeks .		1 - Thomas	Print groups	ri- i
N/A							School (K-12)								
Street Address							×	Subchapte Other (i.e. etc.)	r 8 (Oth	er than & comn	K-12) nercial	buil	dings	, hon	nes,
City (5) Lake Hiawatha							Squ 70	are Feet	# 0	f Floors	i		3ldg 1943		
County (6) Morris				Code (7)			Current Use (Prior if being demolished) residence								
Name of Monitoring Firm Hired by Building	Owner (8	3)	ASC	M No.		Name Che	of Ab	atement Co ark Indust	ment Contractor (9) Industrial						
Street Address							et Address Morgan Dr								
City, State, Zip Code							v, State, Zip Code parta NJ 07871								
Project Manager for Monitoring Firm		Telepho	one No.		Teleph 973-		No. -2645	doe O'r	Licens 0133	se No.		-			
Start Date (10) 10/26/2018	led Co /2018	mpletion	Date (11))	Name	of OS	SHA Monitor ark Industr	rial	0.00			V 5000			
Occupancy Status During Abatement (Chec	k Only O	ne)		Street Addr					iui						
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe:	Period of al Facilit	Abate y Hou	ment rs	nent 54 Morgan Dr City, State, Zip Code Sparta NJ 07871											
Scope of Work (Check All That Apply)								J 07871							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Commenced	Renov Demol				×	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure								
	Is	s Loca	tion					ZAGIIIPIO	· () unc	14011-1	Table			ement	
Location of Asbestos-Containing Material (ACM)		Norma ed Soie		Ashaa		cription					8		Ту	ре	
TO BE ABATED In Facility (13)	Cus	todial (12)	Staff?	(i.e.	thermal surfac other m	systems sing, VAT hiscelland	insul T, or	ation,	(S	nount pecify or LF)		Removal	Repair	Encapsulate	Enclosure
roof	Yes	No	N/A			oofing								(D)	
roof	-	X	-			flashir	200		-	0 SF	2				
roof	X			1001	tar	ig			0 SF	2					
roof	X		ala	aze/cau	E.	nata	rial		SF	2					
Name of Registered Waste Hauler	JDEP W	Control of the	Cubic Y		nate	Name of F			7 5 11						
Atlantic Carting	Hauler ID No. of Waste 12					Waste N									
City, State Wayne NJ	Disposal Date					City, State Tulleyto		١							
Completed by Corey Stankovic			Sig	gnature (C 6	Farko	·		Date 10/2	25/2018					



CM # 3460

Date of Notification (1)					Man	e of Buildi	ng Owner/Operator	(2)										
	30 /	18	3				redesboro C.O.	(2)		EC	F		W					
Agencies Notified	Type Notific	cation			Stre	et Address			1111		9 10 1000		era lagre	1				
⊠ EPA					2"	d & Broad	d Street		A COLUMN TO THE PARTY OF THE PA				2000	elentanie Peterone				
⊠ DOLWD	Amende	1700 to 1000 to			City	State, Zip	Code		711 43	NOV	/ -	1 2	018					
□ DCA	Amendn			_	Sı	vedesbor	ro, NJ 08085							T-1-Carp				
(NJAC 5:23-8)	justificat		iciudiri	g		e of Conta			Telepho	ne Num	ber		nibe ii	<u>.</u> I				
	☐ Cancella				Bı	ian Tiltor	า		Telephone Number 2156404563									
					F	ACILITY II	NFORMATION		Annual and the second of the s									
Name of Facility Where A	batement is	Takin	g Place	e (3)				Type of Facility	/ (4)									
Verizon Swedesbore			50%	0.5855				School (K-12										
Street Address								☐ Subchapter	er 8 (Other than K-12)									
2 nd and Broad Stree	t							Other (i.e., p		comme	rcial b	uildin	gs,					
City (5)			-					Square Feet	# of Flo	oore	IR	ldg. A	100					
Swedesboro								5,398	2	0013		+-50						
County (6)					Cou	inty Code (7)(STATE USE ONLY)	Current Use (Pr	ior if being	demolis	shed)							
Gloucester								Verizon										
Name of Monitoring Firm I				(8)	ASCN	1 No.	Name of Abatem											
USA Environmental	Managem	ent li	nc				BRISTOL EN	VIRONMENTA										
Street Address							Street Address											
8436 Enterprise Ave							1123 BEAVE											
City, State, Zip Code							City, State, Zip C											
Philadelphia, PA 191							BRISTOL, PA	19007										
Project Manager for Monito	oring Firm			-	lephone		Telephone No.		License	e No.								
Mark Jenkins				1		5 5870	215-788-6040	00000										
Start Date (10)						ate (11)	Name of OSHA N											
//					1_ /	18	BRISTOL EN	L, INC										
Occupancy Status During						D-0-31, -3, y	Street Address											
☐ Facility Closed/Vacated	During Enti	re Pe	riod of	Abat	ement		1123 BEAVE	R STREET										
Abatement Performed (Time of Abatement:	AM	ormai PI	гаспіт Л/ <u>5:00</u>	PM-	irs - De 2:00	scribe I	City, State, Zip Co											
Scope of Work (Check all t	hat apply)						BRISTOL, PA											
☐ ≥3 sf or ≥3 lf			⊠ Re	nova	tion		☐ Full Cont	tainment with Neg	ith Negative Pressure									
≥160 sf or ≥260 If			☐ De	molit	ion		☐ Glovebag	g Procedure										
							☐ Non-Exe	mpted (*) and Nor	n-Friable P	rocedur	е							
1				Loca							Ab	atem	ent Ty	уре				
Location o Asbestos-Containing M		1)			lely by	Ashe	Description o estos Containing Ma		A	t	Re	Re	m	Щ				
TO BE ABAT	ED	2			ance/		., thermal systems		Amor (Spec		Removal	Repair	ıcap	Enclosure				
IN Facility (13)			Cus	(12	Staff?	-	surfacing, VAT, other miscellane	or	SF or		val	-	Encapsulate	sure				
(10)			Yes	No			other miscellane	ous)					ate					
Generator Room						VAT/Ma	astic		270	SF				\exists				
														귀				
			П	П														
Name of Registered Waste	Hauler		_		NJDEP	Waste	Cubic Yards of	Name of Regist	tered Land	fill			Ш	Ш				
SERVICE TRANSPOR		, INC	: .	1000	lauler I	D No.	Waste	MINERVA L										
City, State							Disposal Date	City, State										
YARDLEY, PA							TBD	WAYNESBI	URG, OH									
Completed By (Print or Type) Title							Signature		12	Dat	e							
Dillan DeCaro		Es	stimat	or				u DeCani	/m			30	-18	2				

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Pri	nt	-	Or	m	

CC193PATTO		NOT	IFICATION	State of New ON OF ASBE nt to NJAC 8	STOS ABAT	EMENT 20)	EQ	E	Ŋ	En		And the second s	
Date of Notification (1) 10/30/18				of Building O icia Bole	wner/Operate	or (2)	MO	v - 1	2016	3		TO STATE OF STREET	
Agencies Notified Type Notification	1		Street	Address			NU	1/ 1	ZUR)	-	4	
EPA Initial Amended			City S	State, Zip Cod	9					0.360		:	
X DOL _ Amendmer				ngfield, NJ					113			1. 7	
DOH justification)	ıg		of Contact				ephone N		516 6	-1	de en	
DCA Cancellatio	n		10000000	cia Bole			1						
Name of Facility Where Abatement is Taki	ng Place	(3)	FAC	CILITY INFOR	RMATION	Type of Facilit	y (4)						
Residential Home Street Address						School (K	(-12)						
Street Address						Subchapt	er 8 (Othe private &	er than K-	12) cial bu	ildings	, hon	nes.	
City (5)						etc.) Square Feet		Floors		Bldg.			
Springfield County (6)						2150	2	(1) (A) (A) (A) (A) (A) (A) (A) (A) (A) (A		60 +/			
Union				Code (7)		Current Use (P	rior if bein	g demolis	hed)				
Name of Monitoring Firm Hired by Building	Owner (8	3)	ASC	M No.	Name	Residential Home ne of Abatement Contractor (9)							
Project Manager	///				All S	Stages Abatement							
Street Address				I Security	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	et Address 0 N. Midland Ave.							
City, State, Zip Code						State, Zip Code	ve.						
Drainet Manage for the training						dle Brook, NJ	07663						
Project Manager for Monitoring Firm			Telepho	one No.	100	none No.		License N	lo.				
Start Date (10)	Schedu	led Co	mpletion	Date (11)		of OSHA Monito		01305					
10/31/18	11/3/1	8	86	8 5	,,,,,,,,	or con a civionito							
Occupancy Status During Abatement (Chec					Street	Address							
Facility Closed/Vacated During Entire R Abatement Performed Outside of Norm Other – Describe:	Period of al Facilit	Abater y Hour	ment s		City, S	tate, Zip Code							
Scope of Work (Check All That Apply)													
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf	_	Renova Demoli			×	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure							
		Locat				•				Abate	ment		
Location of Asbestos-Containing Material (ACM)	Use	Norma ed Sole	ly by	Ashestos	Description	of aterial (ACM)				Ty	oe		
TO BE ABATED In Facility	200000	intena todial s		(i.e. the	rmal systems urfacing, VA	insulation,	(Spe	ount ecify	Rei	Z.	Encapsulate	Enc	
(13)		(12)			ner miscellan		SF 0	r LF)	Remova	Repair	psul	Enclosure	
	Yes	No	N/A						_		ate	9	
Basement		X			VAT		434	SF	x				
Name of Registered Waste Hauler		l Ai	IDED	note C	ht- \								
All Stages Abatement		Н	JDEP Wauler ID I 036592	No. of	ıbic Yards Waste	M	Registered			-16.11			
City, State		sposal Date		Central (Sanitary	Lan	atiil						
Saddle Brook, NJ	10.3556	sposal Date 3D	City, State Pen Arg										
Completed by Richard Cristofol	Title Presi	al a t			Signature	111	Laferen	Dat	е				
			L. Fall	M kg		10	/30/1	8					

	CALL	(i dist	ant to NJAC	0:00 and 12:12	20)		A CONTRACTOR DISCONORION	werpy must him	.a	10 to	10.0				
Date of Notification (1) 10/30/2018			ne of Building arbara Paor	Owner/Operato	or (2)			E !	1 0	153					
Agencies Notified Type No	tification		et Address	35.		11-51					111				
DO:	al ended endment #	City	, State, Zip Co			Action of the state of the stat	NOV	- 1	201	8					
□ Fm	ergency (including		lison, NJ 0	8820	A TREATER OF THE LA										
P DOH _ just	ification)		ne of Contact			Telephone Number									
DCA Car	cellation	Ba	rbara			*, ye. * * mil			1000 A		1-511-69				
Name of Escility Whom Abote		F	ACILITY INFO	ORMATION											
Name of Facility Where Abatement Private home	is Taking Place (3)				Type of Facili	5407/35									
Street Address					Subchap Other (i.e	ter 8 (Oth	er than K & comme	-12) rcial bu	ıilding:	s, hon	nes,				
City (5) Colonia					Square Feet	# 0	f Floors	T	Bldg.	Age					
County (6)		Cour	nty Code (7)												
Middlesex		(STA	TE USE ONLY)		Current Use (Prior if being demolished)										
Name of Monitoring Firm Hired by B	Building Owner (8)	AS	SCM No.		ne of Abatement Contractor (9)										
Street Address					noval Safety LLC										
				1 4 5 6 5 6 6 7	et Address Crosby Ave										
City, State, Zip Code					State, Zip Code										
					erson, NJ 075	502									
Project Manager for Monitoring Firm	1	Telep	phone No.	Teleph	hone No.		License	No.							
Start Date (10)	T Catalan		_		-400-8711		01332								
11/09/2018	11/12/20		on Date (11)		of OSHA Monito	or									
Occupancy Status During Abatemen					e as (9)										
Facility Closed/Vacated During Abatement Performed Outside Other – Describe: normal hou	Entire Period of Aba	tomont			State, Zip Code										
Scope of Work (Check All That Appl	v)														
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf	× Ren	ovation nolition		×	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure										
	ls Lo	cation			1 Non-Exempt	eu () and	Non-Fria	ible Pro		e ement					
Location of	Nor	mally		Description	of					/ре					
Asbestos-Containing Material (A TO BE ABATED In Facility (13)	Custodi	Solely by enance/ al Staff?	(i.e. ti	os Containing M hermal systems surfacing, VA other miscellan	laterial (ACM) s insulation, T, or	(S	mount pecify or LF)	Remova	Repair	Encapsulate	Enclosure				
	Yes N	lo N/A	A .					<u>a</u>		ate	Ге				
Basement		x	F	Floor tiles, m	astic	35	0 SF	х		х					
Name of Registered Waste Hauler			100												
Removal Safety LLC		NJDEP Hauler I		Cubic Yards of Waste	Name o	f Register	ed Landfi	II	-						
		00370		3	GROV	VS Nort	:h								
City, State Paterson, NJ			The state of the s	Disposal Date TBD	City, Sta	ite ville, PA	۸								
Completed by	Title			Signature/	,	iville, PA		oto							
asko Veskov	Preside	nt		Hast.	o Verl	w		ate 0/30/2	2018						

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) 10 25 18 1 Seaview Resorts Acquisition Group, LLC Job#1809-5384Check #10712 Agencies Notified Type Notification Street Address Initial 5600 Mariner Street, SUite 200 **⊠** DOLWD □ Amended City, State, Zip Code **⊠** DHSS Amendment #2 Tampa, FL 33609 ☐ Emergency (including □ DCA (NJAC 5:23-8) justification) Name of Contact Telephone Number ☐ Cancellation Chris Walsh 609-517-5741 **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Stockton Seaview Hotel & Golf Club ☐ School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings. 401 South New York Road homes, etc.) City (5) Square Feet # of Floors Bldg. Age Galloway, NJ 08205 County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Atlantic Hotel Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Heath & Safety Services AbateTech, Inc. Street Address Street Address PO Box 365 30 Maple Ave. PO Box 25 City, State, Zip Code City, State, Zip Code Berlin, NJ 08009 Lumberton, NJ 08048 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Jim Proctor 609-704-8850 609-265-2107 00529 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor __10__ / __15 / _18 11 / 30 / 18 **EMSL Analytical** Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 200 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) $\square \ge 3$ sf or ≥ 3 If Mini-Enclosure ≥160 sf or ≥260 lf ☐ Demolition Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Used Solely by Asbestos-Containing Material (ACM) Repair Removal Encapsulate Asbestos Containing Material (ACM) Amount TO BE ABATED Maintenance/ (i.e., thermal systems insulation, (Specify Custodial Staff? IN Facility surfacing, VAT, or SF or LF) (13)(12)other miscellaneous) Yes No N/A

Regency Wing 2nd FI. П П \boxtimes Accoustical Fire proofing 2,500 SF X Regency Wing 3rd Fl. \boxtimes Accoustical Fire proofing 2,500 SF X Bay Wing 3rd Fl. X Accoustical Fire proofing 2,500 SF X Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. AbateTech, Inc. Waste G.R.O.W.S. Landfill 18750 40 City, State Disposal-Date City, State Lumberton, NJ 11/30/18 Tullytown, PA Completed By (Print or Type) Title Signature Gwendolyn Trumbetti Operations Coordinator

Accoustical Fire proofing

2,500 SF

П

X

ASB-41 MAY 11

Regency Wing 1st Fl.

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

NOV - 1 2018

Scope of Work Cont.

Location of ACM	Used for Maint.	Description of ACM	Amount	Abatement Type
Crawlspace	NO	Fittings	30 total	Removal
Crawlspace	NO	Soil	5,400 SF	Clean Up
9 Locations Baseme	ent NO	Pipe Insulation	3 LF	Removal
Regency Wing 1st Fl	. NO	Pipe Insulation	27 LF	Removal
Regency Wing 2 nd Fl	. NO	Pipe Insulation	27 LF	Removal

M U		1	тои		ATIO		BES	TOS ABA 6TOS and 5:1	(1)	ECE		V	11.1				
Date of Notification (1)	26 /	18			1		-	ner/Operator #1808-5373	(2) Check #10677	NOV -	1 2	018	Marine account	IJ			
Agencies Notified ☑ EPA ☑ DOLWD	Type Notific				69	et Address 05 Rockle		Drive		A VERENCE LICEN	TON 18th	11					
☑ DHSS	Amenda	nent # <u>1</u>				State, Zip C		2047									
□ DCA	☐ Emerger		ludin	g		ethesda, M		J017		Talanhana Nivasi							
(NJAC 5:23-8)	justificat Cancella				The Street	siness of	90			Telephone Numi							
	☐ Caricella	ation								240-694-436	9						
None of Facility 100		T 11	D1	(0)	FA	CILITY IN	IFOR	MATION	T=								
Name of Facility Where A Monmouth Service		laking	Place	(3)					Type of Facility ()							
Street Address Garden State Parkw	ay Mile Po	st 100	NB	SB						(Other than K-12) ivate and commer		uilding	s,				
City (5)									Square Feet	# of Floors	BI	dg. A	ge				
Wall Township																	
County (6)					Cou	nty Code (7))(STA	TE USE ONLY)	Current Use (Price	or if being demolis	hed)						
Monmouth					100000000		**		Service Plaz		111111111111111111111111111111111111111						
Name of Monitoring Firm I	Hired by Buil	Iding Ov	vner	(8)	ASCM	No.	Nan	ne of Abateme	ent Contractor (9)								
	Hillaman Consulting, Inc.								nc.								
Street Address						Street Address											
PO Box 385							30	Maple Ave	e. PO Box 25								
City, State, Zip Code							City, State, Zip Code										
Oceanville, NJ 08231	1						L	umberton, I	NJ 08048								
Project Manager for Monito	oring Firm			Tele	ephone	No.		phone No.		License No.							
Craig Downs			arameter to	9	08-721	-2302		9-265-2107	•	00529							
Start Date (10)	15	Schedul	led C	omple	etion Da	ate (11)	Nan	ne of OSHA N	Monitor								
10 /23 / _	18	/_10	_ /	_2	9_/	18	/ EI	MSL Analyt	ical								
Occupancy Status During	Abatement (Check	only o	ne)			Stre	et Address									
☐ Facility Closed/Vacated						and the last own distances.	20	0 Route 13	0 North								
Abatement Performed (City	State, Zip Co	ode								
Time of Abatement:	AM- <u>\</u> _	PM/	-	PM		_AM	Ci	nnaminson	n, NJ 08077								
Scope of Work (Check all t	hat apply)																
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf				novat		# 1 + # F	***************************************	☐ Mini-Enc ☐ Glovebag	tainment with Nega losure g Procedure mpted (*) and Non		e e						
			2000	Loca					**********		Ab	atem	ent T	уре			
Location o				lorma	illy ely by	1		Description o			R	Z.	Щ	ū			
Asbestos-Containing M TO BE ABAT		1)		intena				containing Ma mal systems i		Amount (Specify	Removal	Repair	Encapsulate	Enclosure			
IN Facility			Cust	0.00	Staff?	(St	irfacing, VAT,	, or	SF or LF)	val	7	sula	sure			
(13)		-	Yes	(12) No	N/A	-	oth	er miscellane	ous))			ate				
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Name of Registered Waste AbateTech, Inc.	Hauler			133	IJDEP \ lauler II 18750	D No.	Was 40		Name of Registr G.R.O.W.S.								
City, State								osal Date	City, State								
Lumberton, NJ							10	/29/18	Tullytown, I	PA							
Completed By (Print or Typ	e)	Title						Signature /		Da			(24				
Gwendolyn Trumbett	i	Ope	erati	ons	Coordi	inator			MU		0	Ho	18	1			

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) 10 24 1 18 Department of Military & Veterans Affairs / Job #1810 5393 Check #8 Agencies Notified Type Notification Street Address **⊠** EPA ☐ Initial 101 Eggerts Crossing Road **⊠** DOLWD ASSESTOR CONTINULA City, State, Zip Code **⊠** DHSS Amendment #1 ☐ DCA ☐ Emergency (including Lawrenceville, NJ 08648 (NJAC 5:23-8) justification) Name of Contact Telephone Number ☐ Cancellation Ali Malik 718-447-7787 FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) National Guard Armory School (K-12) Street Address ☐ Subchapter 8 (Other than K-12) 1008 Absecon Blvd. Other (i.e., private and commercial buildings, homes, etc.) City (5) Square Feet # of Floors Atlantic City, NJ Bldg. Age County (6) County Code (7)(STATE USE ONLY) | Current Use (Prior if being demolished) Atlantic Armory Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) TTI Environmental AbateTech, Inc. Street Address Street Address 1253 North Church Street 30 Maple Ave. PO Box 25 City, State, Zip Code City, State, Zip Code Moorestown, NJ 08057 Lumberton, NJ 08048 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Mike Stocku 609-304-3969 609-265-2107 00529 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor <u>10</u> / <u>22</u> / 18 <u>11</u> / <u>16</u> / 18 **EMSL Analytical** Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 200 Route 130 North Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: ____AM-___PM/___PM-__AM City, State, Zip Code Cinnaminson, NJ 08077 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure ≥3 sf or >3 If ☐ Mini-Enclosure ≥160 sf or ≥260 lf ☐ Demolition ☐ Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Location of Normally Description of Asbestos-Containing Material (ACM) Used Solely by Repair Asbestos Containing Material (ACM) Removal Encapsulate Enclosure TO BE ABATED Maintenance/ Amount (i.e., thermal systems insulation, Custodial Staff? IN Facility (Specify surfacing, VAT, or SF or LF) (13)(12)other miscellaneous) Yes No N/A Exterior П X Perimeter Window Caulking 396 LF X П Exterior \boxtimes Plate Washer Caulking 52 LF X Exterior П M Limestone Caulking 520 LF X. Exterior \boxtimes Parapet Wall Flashing 650 SF X Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill AbateTech, Inc. Hauler ID No. Waste **ACUA Landfill** 18750 40 City, State Dispósal Date City, State Lumberton, NJ 11/16/18

Signature

Inleted By (Print or Type)

lyn Trumbetti

Title

Operations Coordinator

Egg Harbor, NJ

Date

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

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

	MODESTOS ADATE
(Pursuant to	NJAC 8:60 and 5:16)

Date of Notification (1)	5		NOT	(Pu	TION OF rsuant to h	of New Jersey ASBESTOS AE NJAC 8:60 and	5:16)	E	(5)		****	17.3		
	30 /	18			Name of Bui Verizon (ilding Owner/Operations	2002	4840 Face	-		11			
Agencies Notified	Type Notific	ation	·· · · · · · · · · · · · · · · · · · ·	-			7 JOD #	1810-5387 CI	neck	#				
⊠ EPA	☐ Initial				Street Addre			NO NO	V -	1 4	2018			
DOLWD				1		nwood Avenue								
☑ DHSS ☐ DCA	Amendm	ent #1		1	City, State, Z			/2200		- 1	FY74	. 7		
(NJAC 5:23-8)	☐ Emergen justificati	icy (incl	uding	1		wn, PA 19046		1	LOE!	est.	3			
	☐ Cancellat			1	Name of Con			Telephone N	lumbe	r		-		
	No. 100	140			Carol Sou	10.000		856-429-2	2231					
Name of Facility Where At	antomont in T				FACILITY	INFORMATION								
Verizon- Woodbury	co	aking F	Place (3)			Type of Facil	ity (4)		_				
Street Address							School (K	-12)						
24 Curtis Avenue							── Subchapte	er 8 (Other than K	-12)					
City (5)							homes, et	, private and comr	nercia	l build	dings	i,		
							Square Feet	# of Floors		D1.1		_		
Woodbury, NJ 08096								# OI Floors		Ridd	. Age	3		
County (6)				(County Code	(7)(STATE USE ONLY	Current Lice /	Prior if hairs 1	- I: I					
Gloucester					ST69			Current Use (Prior if being demolished) Offices						
Name of Monitoring Firm Hi	red by Buildi	ng Owr	er (8)	AS	CM No.	Name of Abaton	nent Contractor (
USA Environmental			2000		A 4104000000000000000000000000000000	AbateTech,		ontractor (9)						
Street Address				1		Street Address								
8436 Enterprise Ave.														
City, State, Zip Code							e. PO Box 25							
Philadelphia, PA 1915	3					City, State, Zip C								
Project Manager for Monitori			T	olonho	ne No.	Lumberton,	NJ 08048							
Mark Jenkins	3	and the second of			65-5810	Telephone No.		License No.						
Start Date (10)	Scl	neduler			Date (11)	609-265-2107		00529						
11 /5 /	18 /				Date (11) /18	Name of OSHA N								
Occupancy Status During Ab			<u> </u>	25	/	EMSL Analyt	ical							
☐ Facility Closed/Vacated D	atement (Ch	eck only	y one)		A Care of the Control	Street Address						_		
Abatement Performed Ou	tside of Nor	Period (of Abat	ement		200 Route 13	0 North							
Time of Abatement:	AM-	PM/	IIIY HO	urs - D 11_	escribe AM	City, State, Zip Co	ode							
				"	AIVI	Cinnaminson	, NJ 08077							
Scope of Work (Check all that	t apply)									_				
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						Non-Exer	npted (*) and No	n-Friable Procedu	re					
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Asbestos-Containing Mate	rial (ACM)	Us	ed Sol	ely by	Ashas	Description of stos Containing Mat			100	$\overline{}$	1	-		
TO BE ABATED IN Facility		Cui	aintena	ance/ Staff?		, thermal systems in	erial (ACM)	Amount (Specify	Remova	Repair	nce			
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		Yes	No	N/A		other miscellaneo	us)	•			Encapsulate	1		
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AbateTech, Inc.			1		on I	40	U.I.U.VV.J.	e according						
AbateTech, Inc. y, State				18750				Landini						
AbateTech, Inc. y, State .umberton, NJ				18/50		Disposal Date	City, State					_		
AbateTech, Inc. y, State .umberton, NJ mpleted By (Print or Type)	Title)		18750		Disposal Date 11/23/18		PA						
AbateTech, Inc. y, State .umberton, NJ		e perati				Disposal Date	City, State	PA	0/3	7	0			

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

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) 10 26 18 JCP&L/FirstEnergy Company / Job #1810-5399 Check # Agencies Notified Type Notification Street Address **⊠** EPA ☐ Initial 10 Legion Place- Building A ☑ DOLWD City, State, Zip Code □ DHSS Amendment #1 Morristown, NJ 07960 ☐ DCA ☐ Emergency (including (NJAC 5:23-8) justification) Name of Contact Telephone Number ☐ Cancellation John Greco 201-602-1499 **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) JCP&L-Freehold School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e., private and commercial buildings, 44 Dutch Lane Road homes, etc.) City (5) Square Feet # of Floors Bldg. Age Freehold, NJ County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Monmouth Substation Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) 1 Source Safety & Health, Inc. AbateTech, Inc. Street Address Street Address 140 S. Village Ave. Suite 130 30 Maple Ave. PO Box 25 City, State, Zip Code City, State, Zip Code Exton, PA 19341 Lumberton, NJ 08048 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Brian Hovendon 610-524-5525 609-265-2107 00529 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 10 / 29 / 18 11 / 12 / 18 **ÉMSL** Analytical Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 200 Route 130 North Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: ____AM-___PM/_ PM- AM Cinnaminson, NJ 08077 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ≥3 sf or ≥3 lf

□ ≥100 st or ≥260 lf		Dem	olitio	n		☐ Gloveba ☑ Non-Exe	g Procedure mpted (*) and No	n-Friable Proced	ure			
Location of			ocati rmal	7						atem	ent T	уре
Asbestos-Containing Material (ACN TO BE ABATED IN Facility (13)	Used Solely TO BE ABATED IN Facility (13) Used Solely Maintenanc Custodial Sta (12) Yes No I					Description of estos Containing Ma e., thermal systems surfacing, VAT, other miscellane	terial (ACM) insulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
952 120	Ye	s	No	N/A		other miscellane	ous)				ate	
Exterior Pole JC1140MAR					Asbest	os risers		16 LF		П	П	П
						-				П		H
									Th			
Name of Registered Waste Hauler AbateTech, Inc.			Ha	DEP V	No.	Cubic Yards of Waste	Name of Regis G.R.O.W.S			П	Ц	
City, State Lumberton, NJ		7		10750		Disposal Date 11/12/18	City, State Tullytown,					
Completed By (Print or Type) Gwen Trumbetti	Title	tion				Signature	A	Da	ate			

10-26-18

Operations Coordinator

UZAP107				ASB	ESTOS	rsey ABATEMENT and 12:120)		EC		W	To the second	A CONTRACTOR OF THE PARTY OF TH		
Date of Notification (1) October 29, 2018						er/Operator (2) micals – Delawar	e River Plant	NOV	- 1	2018				
Agencies Notified	Notification Type		Street Ac	dress			ALL STANDARD	Property of the second of the	s co	JTEY	1 £.	A STATE OF		
DOL	Amended Amendment #	ina	City, Stat Bridgepe			sey 08014	Servinger son	A 40 cm	hiltoria.					
DOH DCA	Justification) Cancellation	ing	Name of Lola O					Teleph 856.4						
			FACIL	_ITY II	NFORM	IATION								
Name of Facility Where A Valtris site Lab	batement is Taking Plac	e (3)					Type of Facilit	Valence of the second						
Street Address 170 Route 180 South							School (K- Subchapte Other (i.e. homes, etc	r 8 (other the			iildin	ıgs,		
City (5) Bridgeport			2-				Square Feet 5000	# of Flo	ors	BI	dg. <i>A</i> 75	Age		
County (6) Gloucester				Co	unty Co SE ONL	ode (7) (STATE Y)	Current Use (p	orior if being	g demo	lished)			
Name of Monitoring Firm Harvard Environmen)	ASCM No).		of Contractor (9) nty Environmer	ıtal							
Street Address 760 Pulaski Highwa	60 Pulaski Highway					Address New Churchma	ans Rd.							
City, State, Zip Code Bear, Delaware 19					New	tate, Zip Code Castle, DE 197	720							
Project Manager for Monit Chuck Styles			one No. 26.2333			hone Number) 322-8946		License 00578		er				
Scheduled Start Date (10) November 12, 2018	Scheduled Com November 1					of OSHA Monitor nty Environmen	tal							
Occupancy Status During	Abatement (Check only	one)			Street	Address New Churchma								
Other - Describe: Uno	Outside of Normal Facili ccupied open roof.	f Abater ty Hour	ment s -		City, S	City, State, Zip Code New Castle, DE 19720								
Scope of Work (Check all ≥ 3 sf or ≥ 3 lf ≥ 160 sf or ≥ 260 lf	that apply)		8		ovation olition	Glovebag				e				
		1	s Location	1						Al	Typ	ment be		
Locatio Asbestos-Containir TO BE AI IN Facilit	Normally Used Solely by Maintenance/ Custodial Staff? (12)			Asbe (i.e	Description estos Containing M e. thermal systems surfacing, VAT other miscelland	aterial (ACM) insulation, Γ, or	Amou (Spec SF or	ify	Removal	Repair	Enclosure			
	Yes	No	N/A											
Two Small Fume Hoods	Two Small Fume Hoods in Site Lab					site Fume Hood L	iner	30 SF		X				
Name of Reg. Waste Hau Service Transport Grou	10000000	DEP Was No.	te Haı	uler	Cubic Yards of Waste 0.5	s of Name of Reg. Landfill Minerva Landfill								
City, State New Castle, Delaware 19				Disposal Date 11/29/2018	City, State Waynesbur	g. OH 446	88							
Completed by Dan Brown	er				Signature 2	Waynesburg, OH 44688 Date 10/29/2018								

CK22/ PAII		NOTIF (F	FICATIO	N OF ASI	BESTOS	ABATE		\ [E	C	E	W7			
Date of Notification (1) 10/30/2018			Name S & I	of Building Suppli	Owner/es Inc.	Operator	(2)			,		2 - 4 * 1 - 7 - 4		The property of the control of the c
Agencies Notified Type Notification EPA Initial	in -			Address a France	e Ave			1 1 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		NOV	1	2010	}—	1 1 2
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DOH justification Cancellation				of Contact o Stank		roject N	Manager			hone N -570-2	umber	V-11 - 47 * -	(Sept Action	Maria de Mar
			FAC	ILITY INF	ORMAT	ION								
Name of Facility Where Abatement is Tak N/A Street Address	ing Place (3)						ol (K-12)						
51 La France Ave							Subc Other etc.)	hapter 8 r (i.e. priv	(Other rate &	than K- commer	12) cial bui	ldings	hom	ies,
City (5) Bloomfield NJ							Square Fe 140,000		# of F 2	loors		Bldg. <i>F</i> 1955		
County (6) Essex			(STATE	Code (7) USE ONL	0		Current Us warehou	se (Prior USE	if being	demoli	shed)			
Name of Monitoring Firm Hired by Building	Owner (8)	ASCI	M No.	4	Name Chec	of Abateme ckmark In	nt Contra dustria	actor (9	9)				
Street Address	24						^{Address} lorgan Dr	8						
City, State, Zip Code						City, Si Spar	tate, Zip Co ta NJ 078	de 371						
Project Manager for Monitoring Firm			Telepho	one No.			one No. 570-2645		1 1	icense	No.			
Start Date (10) 11/13/2018	Schedul 12/17/	ed Cor /2018	npletion	Date (11)		Name of Chec	of OSHA Mo	onitor dustria						
Occupancy Status During Abatement (Che				V			Address lorgan Dr							
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe:	Period of A	Abaten y Hours	nent		de 271									
Scope of Work (Check All That Apply)						Opai	ta NJ 078	07 1						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit				×	Mini-End Gloveba	ull Containment with Negative Pressure ini-Enclosure lovebag Procedure on-Exempted (*) and Non-Friable Procedure						
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Location of Asbestos-Containing Material (ACM)		Normal d Sole				scription					-	Ту	ре	_
TO BE ABATED In Facility (13)	Ma	intenar todial S (12)	nce/			aterial (ACN insulation, Γ, or eous)	A)	(Spe SF o	ecify	Removal	Repair	Encapsulate	Enclosure	
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S & F Supplies Inc section	X			pipe	insulat	ion		2,300	SF	Х				
N(D. 11 D. 11														
Name of Registered Waste Hauler Atlantic Carting		3.60	NJDEP Waste Cubic Yards Hauler ID No. of Waste 80				1	ne of Req aste Ma			I		,	
City, State Wayne NJ		Disposal Date					State	n PA						
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CVIEGO PA	JII	NOT	IFICATIO	NOFAS	lew Jerse BESTOS	ABATE	EMENT	Г					. 15	59		
UH 301			(Pursuan	t to NJA	C 8:60 an	id 12:12	(0)	F-+ ****	177	PE	1	N/7				
Date of Notification (1)			Name	of Buildin	g Owner/	Operato	r (2)	- 11	15	<u> </u>	- 1	111				
October 29, 2018			E. Dick	kerson (& Sons,	Inc										
Agencies Notified Type Notificatio	n			Address							1	2010	-			
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DEP Amended			City, St	tate, Zip (Code				1							
DOL Amendmer	-		Denvill	e. NJ												
DOH Emergency justification		g	_	of Contac	et		=		Telep	honeNu	mber	-		-		
DCA Cancellation			Project	Manag	ner					34-702						
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Name of Facility Where Abatement is Tak	ng Place	(3)					Туре	of Facility (4)				_			
Mt Tabor Foodtown								School (K-12	1							
Street Address							П	Subchapter 8	(Other	than K-1	2)					
559 East Main St							X	Other (i.e. pr	ivate & c	ommero	ial bui	dings,	hom	ies,		
City (5)							Sauz	etc.) are Feet	# of FI	oore	-	Bldg. A	-			
Denville							Oqui	310 1 001	# 0171	0015		olug. F	ge			
County (6)			County	Code (7)			Curr	ent Use (Prior	if hoing	domelie	hod)	_	_			
Morris				USE ONL			Ouii	ciii 036 (Filoi			neu)					
Name of Monitoring Firm Hired by Building	Owner (8	3)	ASC	M No		Name	of Ahr	atomont Contr	store							
A.E.S.L.	0.5.1012.TQ V .		1,001			100 march 100 ma		Abatement Contractor (9)								
Street Address							e MACK Group, LLC.									
2200 Paterson Plank rd # 7	00 Paterson Plank rd # 7						500 Kings HWY N, STE 209									
City, State, Zip Code								STE 20	9							
North Bergen, NJ 07047						110000000000000000000000000000000000000		Zip Code								
Project Manager for Monitoring Firm			Talaska	a a Nia				NJ 08034								
Carmelo Altomonte			Telepho			Teleph			L	icense N	lo.					
Start Date (10)	Cabadu		201-864			(973) 759 - 5000				781						
11/13/18	Schedu	ied Co	mpletion)			HA Monitor								
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Scope of Work (Check All That Apply)	_					_										
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Name of Registered Waste Hauler																
Name of Registered Waste Hauter		100 800	NJ DEP W Hauler ID I		Cubic \ of Was			Name of Re	gistered	Landfill	*					
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Newark, NJ																
Completed by			12/31/18 Tullytown, PA Signature Date													
Michael Cooper	dent 10/29/18															
	. 10010	·								110/	29/18			1		

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

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Date of Notification (1)	29 /	18		2001		Owner/Operator (t Custom Builde		NOV -	1 2018	1					
Agencies Notified	Type Notifica	ation		Street	Address	mander more prior to the first out plant process per secondary						71			
⊠ EPA	☐ Initial			250	1 Seapor	t Drive, Suite S	H400								
⊠ DOLWD	Amended			City, S	State, Zip C	ode		7-1-1-1-1-1	torin.						
⊠ DOH	Amendme		1	Che	ester, PA	19013	-,-,,								
DCA (NJAC 5:23-8)	☐ Emergen justification	350	9		of Contact			Telephone Nu	ımber						
(110/10/0.20/0)	□ Cancellat			Jor	n Hansen			609-352-4							
	<u></u>			FA	CILITY IN	FORMATION									
Name of Facility Where	Abatement is T	Taking Place	(3)				Type of Facility ((4)							
Vacant Residence							School (K-12								
Street Address							Subchapter 8			.tratta.a					
125 E. Atlantic Bou	llevard						Other (i.e., pr homes, etc.)	rivate and comm	nerciai bi	maing	js,				
City (5)							Square Feet	# of Floors	I BI	dg. A	ae	-1.0000			
Ocean City							2.672	2	4 .	80					
County (6)				Toour	the Code (7))(STATE USE ONLY)	Current Use (Pri					-			
Cape May				Cour	ny code (r)	NOTATE OOL ONET).	Residence	or it being dem	olisticu)						
	Hirad by Build	dina Owner	(0)	ACCOM	No	Nome of Abotem									
Name of Monitoring Firm				ASCM	NO.	THE PROPERTY OF THE PROPERTY O	ent Contractor (9)								
Management & Env	viro. Consui	ting Servi	ces				onmental, LLC								
Street Address				*		Street Address									
PO Box 341						623 Cutler A									
City, State, Zip Code						City, State, Zip C						-			
Chesterfield, NJ 08	515					Maple Shade	, NJ 08052								
Project Manager for Mon	itoring Firm		Tel	ephone	No.	Telephone No.		License No.							
Bill Weisgarber			6	09-298	-4070	856-755-0099	9 -	00842							
Start Date (10) 10 / 31 /	7.000 T	Scheduled C				Name of OSHA N EMSL Analyt									
Occupancy Status During	g Abatement (0	Check only	one)			Street Address									
□ Facility Closed/Vacate	ed During Entir	re Period of	Abate	ement		200 Route 13	0 North								
☐ Abatement Performed						City, State, Zip C	ode					10000			
Time of Abatement: _	AM	PM/	PM		AM		nson, NJ 08077								
Scope of Work (Check a	I that apply)						71, 10 00077								
	that apply)						tainment with Neg	ative Pressure							
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			enovai emoliti	The state of the s		☐ Mini-End	g Procedure								
							empted (*) and Nor	n-Friable Proce	dure						
	***************************************		s Loca						Ab	atem	ent T	ype			
Location		11-	Norma			Description of			Z Z	R	Ш	m			
Asbestos-Containing TO BE ABA			ainten	ely by ance/	Asbes	stos Containing Ma ., thermal systems	aterial (ACM)	Amount (Specify	Removal	Repair	Encapsulate	Enclosure			
IN Facil		Cus		Staff?	(1.6.	surfacing, VAT		SF or LF)	oval	=	nsc	Sur			
(13)	1.50		(12))		other miscellane		2 2 - 4			ate	0			
		Yes	No	N/A								_			
Exterior					Transite	e Siding		2,672 SF							
- 1															
Name of Registered Was	ste Hauler	acasan dan era		NJDEP I		Cubic Yards of	Name of Regis	tered Landfill			A				
Freehold Cartage			1	Hauler II 15939	Real ways agreement	Waste 40	Cape May County Landfill								
City, State				- mariner of the second		Disposal Date	te City, State								
Freehold, NJ			11/09/2018				Woodbine,	NJ							
Completed By (Print or T	ype)	Title				Signature			Date						
Christina Lynch		Vice P	resid	ent of	Operations 10/20						129/18				

CK 1892	PAIL		ICATION	ate of Net OF ASB to NJAC	ESTOS	ABATE		r ()				I.I.	Andrew State of the State of th		
Date of Notification (1) 10-28-18				Building			(2)	The second of	N	0V -	1 2018	1		1174/Juhann	
☐ EPA ■	Notification Initial			mon St					Lum	STORY		i A			
	Amended Amendment # Emergency (including	_	Newar	te, Zip Co k, NJ 07 Contact				for a sur	Tol	ephone N	lumbor		2011110		
The state of the s	justification) Cancellation			Espino	sa				# 1 000 NO	73) 344-					
			FACII	LITY INFO	DRMAT	ION							2010		
Name of Facility Where Abater Private Home	nent is Taking Place (3	3)					Тур	e of Facility School (K-	77.						
Street Address							c	Subchapte Other (i.e. petc.)	r 8 (Oth			dings,	home	95,	
City (5) Little Falls							Squ	are Feet	# 01	Floors	E	ildg. A	lge		
County (6) Bergen			County C	Code (7) USE ONLY			Cur	rent Use (Pri	ior if bei	ng demol	ished)				
Name of Monitoring Firm Hired	by Building Owner (8)		ASCM	l No.				atement Co		(9)					
Street Address						Street 522	Addr	ess		****					
City, State, Zip Code			÷		20.200000000000000000000000000000000000		Zip Code ty NJ 0708	37	**************************************						
Project Manager for Monitoring		Telephor	ne No.		Teleph	none i			License 01206						
Start Date (10) 11-13-18	Schedule 11-19-		mpletion [Date (11)		Name	of OS	SHA Monitor ntracting L		01200					
Occupancy Status During Abat			Stre				Addre	ess							
Facility Closed/Vacated D Abatement Performed Ou Other – Describe:	uring Entire Period of Aside of Normal Facility	Abater Hour	urs City,					Zip Code							
Scope of Work (Check All That	Apply				_	Unio	nion City NJ 07087								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	□ F	Renova Demoli				-	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure								
	4 27	Locat	SELECTION OF						()	The section of the se		Abate	ement pe		
Location of Asbestos-Containing Mater TO BE ABATED In Facility (13)	al (ACM) Use Ma	Norma d Sole intena todial (12)	ely by ince/		tos Cont thermal surfa	Description of containing Material (ACN mal systems insulation, urfacing, VAT, or er miscellaneous)			(8	mount Specify For LF)	Remova	Repair	Encapsulate	Enclosure	
	Yes	No	N/A								-		ate	6	
1st Floor	х			Joint	Compo	ound		2,0	00 SF	х					
2nd Floor	Х				VAT			17	70 SF	x					
Basement	X			Pipe	Insula	tion		1	2 LF	х					
Name of Registered Waste Hau	- []	JDEP W		0.11	V				· · .						
Delfa Contracting LLC	1	fauler ID I 356240	No.	Oubic of Was		Name of Registered Landfill Tullytown Resource Recovery Facility									
City, State Union City, NJ		Disposal Date 11-16-18				City, Stat					31 1177 1				
Completed by Jaime Delgado	Mana	ager.		S	Signature Date 10-28-18						18				

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CK 1593 P	AII	NOTII	FICATIO	State of No N OF ASI It to NJAC	BESTOS	ABATE	MEN 0)	т		E C			W		and an and a state of the state	
Date of Notification (1) 10-28-18				of Building Construc			r (2)			NO	V	- 1	2018	}		
Agencies Notified Type Notification EPA Initial	1			Address ermon S	t.		26300			110	*				1	
DEP Amended Amendmen				tate, Zip Cark, NJ 0						I was an are	uc.	TRACE	73	<u> </u>	1974	
☐ DOH ☐ Emergency justification ☐ Cancellatio)	g		of Contact on Espin						lephone						
Name of Facility Where Abatement is Takin	na Place	(3)	FAC	ILITY INF	ORMAT	ION	Tyr	e of Facility								
Private Home								School (K								
Street Address								Subchapte Other (i.e. etc.)	er 8 (Ott	er than & comm	K-12 nerci	?) al buil	dings	, hom	es,	
City (5) Little Falls							Squ	are Feet	# 0	of Floors	Ÿ	E	Bldg. /	\ge		
County (6) Bergen			County (STATE	Code (7) USE ONLY	0		Cur	rent Use (P	rior if be	ing dem	olish	ed)				
Name of Monitoring Firm Hired by Building	Owner (8	3)	ASCI	M No.				patement Co		r (9)					-	
Street Address						Street 522	Addr	ess								
City, State, Zip Code						City, S	tate,	Zip Code	07						-	
Project Manager for Monitoring Firm		T	Telepho	ne No.		Teleph	опе		07	Licens		D.				
Start Date (10)	Schedu	led Cor	npletion	Date (11)		201 2 Name	1000	9603 SHA Monitor	-	0120	6					
11-16-18 Occupancy Status During Abatement (Chec	11-22	-18				Delfa Contracting LLC										
Facility Closed/Vacated During Entire	Period of	Ahaten	nent		Street Address 522 7th St.											
Abatement Performed Outside of Nom Other – Describe:	nal Facilit	y Hours	rs City, State, Zip Co-						87							
Scope of Work (Check All That Apply)			Official City No.													
≥3 sf or ≥3 if ≥160 sf or ≥260 if	_	Renova Demolit	THE R. P. LEWIS CO., LANSING, MICH.			-	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure									
		Locati							, J.	a rion r	iabi		Abate	ment		
Location of Asbestos-Containing Material (ACM)	Use	Normal ed Sole intenar	ly by	Asbes		scription taining M		al (ACM)	А	mount			1 9	ре		
TO BE ABATED In Facility (13)		todial S (12)		(i.e.	surfac	systems cing, VAT niscelland	Γ, or			Specify or LF)		Remova	Repair	Encapsulate	Enclosure	
4-4-0-0-1-0	Yes	No	N/A									_		ate	Ø.	
1st & 2nd Floor			Joint	Compo	und		4,1	00 SF		х						

Name of Registered Waste Hauler Delfa Contracting LLC		100000	JDEP W auler ID		Cubic Yards Name of Registered Landfill of Waste											
City, State		10.0000	56240	14.00-10.00	20 Tullytown Resource Recovery Facili Disposal Date City. State					acilit	у					
Union City, NJ						22-18		City, Stat								
Completed by Jaime Delgado		Si	ignature	1.	2	Date 10-28-18										

1/291	PA	N. N.		CATION	ate of New OF ASBE to NJAC 8	STOS	ABATE				CE				
Date of Notification (1) 10-28-18	-				Building ((2)			NOV -	1 201	8		
Agencies Notified	Type Notification			Street A	ddress mon St.						NO T				
DEP DOL	Initial Amended Amendment #				te, Zip Co					I see					-
□ DOH	Emergency (in justification)	cluding	_	Name of	Contact						ephone Nu				
☐ DCA	Cancellation				Espino					(97	'3) 344-4	508			
Name of Facility Where	Abatement is Taking	Place (3	3)	FACI	LITY INFO	RMATI	ON	Туре	of Facility	(4)					
Private Home Street Address									School (K-1		ib 1/ 1	2)			
Street Address								F	Subchapter Other (i.e. petc.)	orivate 8	commerc	al build	lings,	home	es,
City (5) Little Falls					HI TOWN OF THE				re Feet	# of	Floors	В	ldg. A	ge	
County (6)	- H2 H2- y		1	County (Code (7)	·		Curre	nt Use (Pri	or if bei	ng demolis	hed)			
Bergen Name of Monitoring Firm	n Hired by Building O	vner (8)		ASCN			Name	of Aba	tement Co	ntractor	(9)				
	, , , , , ,						Delfa	a Conf	tracting l						
Street Address							7.4	Addres 7th St							
City, State, Zip Code							500000000000000000000000000000000000000		ip Code NJ 0708	37			12-500-2-5		
Project Manager for Mo	nitoring Firm			Telepho	ne No.		Telepl	none No 216-9	0.		License N	No.			
Start Date (10) 11-09-18		Schedule		npletion I	Date (11)		100000000000000000000000000000000000000		HA Monitor tracting L						
Occupancy Status Durir								Addres			A-MILE TO THE RESIDENCE OF THE PERSON OF THE		-1111/22	-0.5816	
Facility Closed/Vac	cated During Entire Pe	eriod of	Abaten	nent				7th St							
Abatement Perform Other – Describe:	ned Outside of Norma	I Facility	/ Hours	5					ip Code / NJ 070	87					
Scope of Work (Check /	All That Apply)				er- Section etter in settle					10/10					
≥3 sf or ≥3 lf = ≥160 sf or ≥260 lf			Renova Demolit					Mir Glo	l Containm ni-Enclosur ovebag Pro n-Exempte	e cedure	8326			e	
		11000	Locat										Abate	ement pe	
Locatio Asbestos-Containing		1	Normal ed Sole		Achael		scription taining I		(ACM)	Δ	mount				
TO BE AE	BATED	10 SQUEST	intena todial \$			thermal	system	s insula		(5	Specify or LF)	Rer	Re	Encapsulate	Encl
In Fac (13)			(12)				niscella			31	OI LI)	Remova	Repair	slusc	Enclosure
		Yes	No	N/A							- Aller			ite	0
Exter	ior	X			Tran	site Si	dina		20	000 SF	x				
Roo		X	-			of Shin				00 SF	x		-		
1.00						1,00		5.00		1,0		+			
Name of Registered Wa	aste Hauler		- 24	JDEP W		Cubic of Wa	Yards		100000000000000000000000000000000000000		ered Landfi				1
Delfa Contracting L	LC		- 1	356240			20				source F	Recov	ery F	acili	ty
City, State Union City, NJ							sal Date 16-18		City, Sta		A				
Completed by Jaime Delgado		Title	Man	ager.		5	Signatur	e fr	1		D	ate 0-28-	18	- Periller	
Daine Delgado		1 10].	iviaile	ayel.			/	1 pl	7		П,	0-20-			

180h	PALL		(P	ursuant	to NJAC	8:60 an	d 12:12	0)			manufacture of the second of the		ci i	and the	
Date of Notification (1) 10-28-18			and the same of th		f Building onstruct			(2)	1.2	i E	C.E			2	
Agencies Notified	Type Notification			Street A 49 He	ddress rmon St						NOV -	- 1 2)18		11
DEP DOL	Amended Amendment Emergency		[Newa	ate, Zip Co rk, NJ 07					1	1107				
DOH DCA	justification) Cancellation	į.			f Contact n Espino	sa				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	23) 344			12	. 1
Name of Facility Where	Abatament is Takin	a Place (2)	FAC	ILITY INFO	ORMATI	ION	-							
Private Home	Abatement is Takii	ig Flace (3)					i yp	e of Facility						
Street Address				1				-	School (K- Subchapte Other (i.e. etc.)	r 8 (Othe			ilding	s, hom	es,
City (5) Little Falls								Squ	iare Feet	# of	Floors		Bldg.	Age	
County (6) Bergen					Code (7) USE ONLY)		Cur	rent Use (Pr	ior if bein	ng demo	lished)			
Name of Monitoring Firm	Hired by Building	Owner (8))	ASCA	/I No.		HART RED		ntracting I		(9)				
Street Address	<u> </u>			-			Street 522		777						
City, State, Zip Code							53/11/15/04/05		Zip Code ty NJ 0708	 87			70 til 200		
Project Manager for Mor	itoring Firm			Telepho	ne No.		Teleph 201 2		No. 9603		License 01206				
Start Date (10) 11-19-18		Schedul 11-23-		npletion	Date (11)				SHA Monitor ntracting l						
Occupancy Status Durin	g Abatement (Chec	k Only O	ne)				Street	Addr	ess						
Facility Closed/Vac Abatement Perform Other – Describe:	ated During Entire I led Outside of Norn	Period of an all Facility	Abaten y Hours	nent s				tate,	Zip Code						
Scope of Work (Check A	II That Apply					22 - 300	Unio	n Ci	ty NJ 070	87					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	п тпат Арріу)	-	Renova Demolit				z c	N G	ull Containm lini-Enclosur llovebag Pro on-Exempte	e cedure				re	
		Is	Locati	on			WINE COLORS						Aba	temen	t
Location			Normal ed Sole				scription					-	T -	уре	-
Asbestos-Containing TO BE ABI In Facil (13)	ATED	Ma	tintenar todial S (12)	nce/ Staff?		thermal surface		insu T, or		(Sp	nount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
Attic		165	No	N/A									1	1	
Exteri	X		V	ermicu	ng Par		ion		00 SF	x	1	-			
	B (00 SF	x	-	-	
KOO			Х			Flas	shing T	ar		5	SF	x	-	_	
Name of Registered Was	ste Hauler		N	JDEP W	aste	Cubic	Varde		Name of	Degister-	ed Land	1511			
Delfa Contracting LL			Н	auler ID 356240	No.	of Was			Tullyto	10.00			ery	Facili	ty
City, State Union City, NJ							al Date 23-18		City, Stat						
Completed by Jaime Delgado		Title Proj.	Mana	iger.		S	ignature	1	P			Date 10-28-	18		- The state of the

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P	rı	nr	1	O	rr	n

2 1/ T2 1	AIN			State of I	New Jerse	ev			dinitalismentalism.	0 0	7 1	
Date of Notification (1)		UNOT	(Pursua	ON OF AS	SBESTOS AC 8:60 an	ABATEN d 12:120		JE O	7 15			And the second s
10/29/18			Sou	e of Buildir th Stree	ng Owner/e t Constri	Operator (uction	2)	NC)V -	1 20)18	
Agencies Notified Type Notificati	on		Stree	t Address						33-31-		
EPA X Initial Amended	ľ		City, S	State, Zip	Code			1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	711	201. t	1
DOL Amendme	ent #	na						son in the s	LICIA	100		
DOH justification Cancellati	n)	118		of Contac				Telepho				-
Carlochat					yer IFORMATI	ON		732-30	00-076	7		
Name of Facility Where Abatement is Tal	king Place	(3)		OILIT III	II OKWATI		Type of Facility	(4)				
Street Address						Sand Sand	School (K- Subchapte Other (i.e. etc.)	12) r 8 (Other tha private & con	an K-12) nmercial	buildi	ngs, ho	mes,
City (5) Long Branch							Square Feet	# of Floo	ors	Blo	lg. Age	
County (6) Monmouth			County (STATE	Code (7) USE ONL) .Y)	i	Currect Use (Pri	or if being de	emolishe	d)		
Name of Monitoring Firm Hired by Building	g Owner (8)	ASC	M No.		Name of AAA L	Abatement Cor EAD PROFE	ntractor (9)	S			4
Street Address						Street A						
City, State, Zip Code						City, Sta	te, Zip Code VOOD, NJ 0			*		
Project Manager for Monitoring Firm			Teleph	one No:		Telephor		Lice	nse No.			
Start Date (10) 11/8/18	Schedu 11/15		mpletion	Date (11))	Name of	OSHA Monitor	120				
Occupancy Status During Abatement (Che						Street Ad	EAD PROFE	SSIONAL	S 			
Facility Closed/Vacated During Entire	Period of	Abate	ment				E DOVE CO	URT				
Abatement Performed Outside of Nor Other – Describe:	mal Facili	ty Houi	rs				e, Zıµ Code VOOD, NJ 08	3701				
Scope of Work (Check All That Apply)			<u>u</u>	0	,							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	processing .	Renovi Demoli				×	Full Containme Mini-Enclosure Glovebag Proc Non-Exempted	edure				
		s Locat					Tron Exempled	() and Non-	Fliable		atemer	nt
Location of Asbestos-Containing Material (ACM)	Usi	Norma ed Sole	lly ely by	A - b	Desc	ription of			-		Туре	_
TO BE ABATED In Facility (13)		aintena stodial ((12)		(i.e.	thermal sy surfacir	ning Mate ystems in: ng, VAT, c scellaneou	or	Amount (Specify SF or LF)		Romove	Encapsulate	Enclosure
EV/TEN A	Yes	No	N/A						2	- -	late	lre
EXTERIOR					ROC	DFING		1200SF	×			,
INTERIOR					SHING		100LF					
INTERIOR				FLC	ORING	AND M	ASTIC	300SF				
Name of Registered Waste Hauler		1	IDEE									
NEWARK CARTING		H	JDEP W auler ID 1509		Oubic Ya of Waste 12	30000000	Name of R	egistered Lar	ndfill			
City, State NEWARK, NJ					Disposal 11/15/1		City, State BETHLE	HEM PA				
Completed by OSEPH PERLSTEIN	Title OWN	IER				nature		IVITA	Date 10/29	/12		
	_	-							10/25	110		

	AID		NOTI	FICATIO	State of N ON OF AS of to NJA	BESTOS	ABATE	MEN.	r	*1.		0 E		W		
Date of Notification (1) 10/25/2018 check#	0075			Name	of Buildin	g Owner/	Operator	(2)	11	- (1						A Change
Agencies Notified	Type Notification	1		F1000000000000000000000000000000000000	Address 18TH A\	/E				-33	NC.	\\	- 1	2018		
EPA DEP	Initial Amended				tate, Zip C	U-Card					W. S. W. L.		000	1944	-	
X DOL	Amendmen Emergency			PATE	ERSON,	NJ 075	504			Y.					. Ci	
DOH DCA	justification) Cancellation)	,	10114544400	of Contact		N			Te	elephor	ne Nu	mber			
					ILITY IN	BAARS COLORES	1177						- 7_			11000-0
Name of Facility Where	Abatement is Takir	ng Place	(3)				1	Туре	e of Facility	(4)						
Street Address 265 18TH AVE								×	School (K- Subchapte Other (i.e. etc.)	r 8 (Ot	her tha	n K-1 imerc	2) ial buil	dings,	hom	es,
City (5) PATERSON,NJ 075	504							10000	are Feet (100	(S) (S) (S)	of Floo FL	rs	1000	Bldg. A	-	S
County (6) BERGEN					Code (7)	n		Curr BAS	ent Use (Pr	ior if be	eing de	molis PIEC	hed)			
Name of Monitoring Firm	Hired by Building	Owner (8)	ASC	M No.				atement Co UTIONS			TING	G INC			
Street Address							Street /		ess CH ST							-
City, State, Zip Code									Zip Code DD NJ,074	407						
Project Manager for Moni	itoring Firm			Telepho	one No.		Telepho (201)	one N	lo.		Lice 013	nse N	lo.			
Start Date (10) 10/26/2018		Schedul 10/27/	ed Coi 2018	mpletion	Date (11)		Name o	of OS	HA Monitor JTIONS (CONT			= INC			
Occupancy Status During	Abatement (Chec	k Only O	ne)				Street A	Addre	SS		1010	11140	2 1140			
Facility Closed/Vaca Abatement Performe X Other – Describe: I	ed Outside of Norn	nal Facility	Hour	2	HE HOUSE	-	City, Sta	ate, Z	CH ST			15075		-		
Scope of Work (Check Al				OAI II	11.110031		ELMV	VOC	D NJ,074	107						
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		- Constant	Renova Demoli	0000			×	Mir	II Containmeni-Enclosure ovebag Prod n-Exempted	e cedure						
			Locat							() = .		1100	1	Abate		
Location Asbestos-Containing I TO BE ABA In Facilit (13)	Material (ACM) TED	Use Ma	Normal ed Sole intena todial s (12)	ly by nce/	Asbes (i.e.	tos Conta thermal surfac	scription of aining Ma systems bing, VAT hiscellane	aterial insula , or	(ACM) ation,	(5	Amount Specify F or LF	02	Remova	Typ	e Encapsulate	Enclosure
# sts		Yes	No	N/A		other ii	nocenarie	ous					val	Ť	ulate	ure
BASEME	NT			X		PIPE IN	NSULA"	TION	I	3	35LF		Х			
Name of Registered Wast	e Hauler		l N	JDEP W	/aste	Cubic	Yards		Name of F	Reniete	arad I a	ndfill				
ATLANTIC CARTING			355	auler ID	100 December 1	of Was			GRAND							
City, State PEN ARGYL						Disposa TDB	al Date		City, State		, PA,1	807	2			
Completed by LUIS ARCILA		Title PRES	SIDE	NT		Si	ghature	_	4	Ź	/>	Dat		018		
ASB-41 (R-06-08)		-				1	* Do not	use th	nis form for	asbest	os lice	nsure	exem	pted a	ctiviti	ies.



State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

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

	d & Madadil		(1	Pursua	nt to NJAC 8:60 an	d 12:1:	20)		CKH 17	3	2		
Date of Notification	(1)		Name of	Building	Owner/Operator (2)			F- 1-		W +1	11 (1		***
10/26/18				new Ba	arko			115			19	- 1	
Agencies Notified	Type Notification		Street A	ddress				1163					
□ EPA	Initial		City State	te, Zip Co	da			F 1 1 1	11				- 1
□ DEP	Amended			NJ 076					NOV -	1 2	2018	}	
⊠ DOL	Amendment # Emergency (including		370	Contact				Telephone Number				_	-
⊠ DOH	justification)			new Ba	rkho			relephone Number					1
□ DCA	☐ Cancelation		IIII	ic ii bi				r ±	I		100		
				FA	CILITY INFORMAT	ION		+++.	11 11 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
	ere Abatement is Taking Place (3)					Type of	f Facility (4)						
Residence							School (K-12						
Street Address								8 (Other than K-1	THE SECOND SECOND				
						X	Other (i.e. p	rivate & Commer	cial buildings, hom	es, et	c.)		
City (5)						Square	Feet	# of Floors	Bldg. Age				
Lodi, NJ 07644						2,056	5	2	76				i
County (6)				County (Current	t Use (Prior if be	ing demolished)					
Bergen				(STATE U	JSE ONLY)	Resid	lential						
Name of Monitoring	Firm Hired by Building Owner (8)				ASCM No.	Name	of Abatement Co	ontractor (9)					
						Unico	orn Contract	ting Corp.					
Street Address						Street	Address						
						32 W	illow Way						
City, State, Zip Code						City, St	ate, Zip Code						
				,		Woo	dland Park,	NJ 07424					_
Project Manager fo	Monitoring Firm			Telepho	ne No.	Teleph	one No.		License No.				
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Start Date (10)					etion Date (11)		of OSHA Monito						
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Street Address 165 Halsey Street								Subchapter i Other (i.e. pr etc.)				lings,	home	s,
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City, State, Zip Code Phillipsburg, NJ 08865					and the control of th			Zip Code NJ 07512					//////XXX	
Project Manager for Monitoring Firm Jon Gilbert			Telephor 908-43	ne No. 34-6316	and the state of t	Teleph 973-		No. -7010		License No 0666).			
	Schedule 11/23/2		pletion [Date (11)				SHA Monitor Instruction	Res	storation,	Inc			
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Bako Constr. & Rest. Inc./ Newark C	arting	H	lauler ID 0889/4	No.	of Was				1000	source R	ecov	ery F	acili	ty
City, State Totowa, NJ/ Newark, NJ					Dispos TBD	al Date)	City, State Tullytov		4				
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Street Address 165 Halsey Street							0	ubchapter ther (i.e. pr c.)				ings, l	nome	s,
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County (6) Essex		18	County Co	ode (7) SE ONLY)		-	Office	t Use (Prio Building	r if bei	ng demolisi	ned)			
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Street Address 401 St. James Ave.	***************************************		1	th from the thicken and pro-			Address	e 46 Suit	e 3D		***************************************			
City, State, Zip Code Phillipsburg, NJ 08865		***********					tate, Zip wa, NJ	Code 07512		rfe-user etten ötter midsacer				
Project Manager for Monitoring Firm Jon Gilbert			Telephon 908-43				one No 256-70			License N 0666	lo.		-	en en en en
Start Date (10) 06/25/2018	Scheduled 11/10/20			Pate (11)	200			A Monitor struction	& Res	storation,	Inc.			
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City, State Totowa, NJ / Newark, NJ			- Or a property and good films for five		Disposa TBD	I Date)	City, Stat		A		,		
Completed by Damir Valjevac	Project	ct M	anager	7	Sig	natur		Yar	gra		ate 10/16/	2018		

ASB-41 (R-06-08)

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

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Date of Notification (1) 08/20/2018		Marinda Miller danna, Marida Marinda qui qu			uilding Ow ating Inc		erator	(2)			140.4		010		
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City, State, Zip Code Phillipsburg, NJ 0	8865	The second second purpose of the local			Control of the Contro				e, Zip Code I, NJ 07512						
Project Manager for Me Jon Gilbert	onitoring Firm		T	Telephon 908-43					ie No. 66-7010	u siri Maranawi	License No 0666	•			Barra estate
Start Date (10) 06/25/2018	\overline{A}	Scheduler 10/31/2	d Cor	mpletion D	Pate (177)				OSHA Monitor Construction	& Re	storation, I	nc.			
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Date of Notification (1) 06/12/2018		-	T	Name o	f Building	Owner/0	Operator	(2)			N	<u>0Y</u>	-1	201	8
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J. Majorano Estimator Company		NT T A 7	601									
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)

907119	PALL		NOTI)	FICATIO	ON OF AS	BESTO	SABATE	MENT	Г		G	E		7						
Date of Notification (1) 10/29/18					of Building Broitm						W-2-2-1			-						
Agencies Notified	Type Notification				Address						NOV	- 1	20	18_		111				
EPA DEP	Initial America			Oit o																
☑ DOL	Amended Amendment				City, State, Zip Code Long Beach Township NJ 08008															
☑ DOH	Emergency justification)	includin	g	Name of Contact							Telephone Number									
☐ DCA	Cancellation			Craig	Ì		relephone Number													
Name of Facility Where	Abatement is Takin	n Place	(3)	FAC	CILITY IN	ORMA	TION	-												
Craig Broitman Priv	ate Home	9 1 1000	(0)					Туре	of Facility	2500										
Street Address						School (K-12) Subchapter 8 (Other than K-12)														
011 (5)						X	Other (i.e. etc.)	private	& com	merci	al bui	ldings	, hom	ies,						
	City (5) Long Beach Township NJ 08008							Square					T	3ldg.	Age					
County (6)	County Code (7)					0+	2				35+									
Ocean	(STATE USE ONLY)					ent Use (Pr JSE	rior if bei	ing den	nolish	ed)										
Name of Monitoring Firm N/A	ASC	M No.			e of Abatement Contractor (9)															
Street Address							t Address													
City, State, Zip Code				29																
Oity, State, Zip Code						ip Code	204			100										
Project Manager for Moni	Telepho	one No.	T	Teleph		lin NJ 08	091	Licen	oo Ma											
	:*;			856-				0072).										
Start Date (10) 11/7/18	npletion	Date (11)				HA Monitor														
Occupancy Status During	/18				Sam															
Facility Closed/Vaca Abatement Performe	ted During Entire P	eriod of	Ahaten	nent			Street			•										
Other – Describe: _		ar r donne	y i louis	•			City, St	ate, Z	p Code											
Scope of Work (Check All	That Apply)										-									
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	*	-	Renova Demolit	tion Mini-Er Gloveb						Containment with Negative Pressure il-Enclosure vebag Procedure n-Exempted (*) and Non-Friable Procedure					e					
		F	Locati										Abatement							
Location Asbestos-Containing N	of Material (ACM)	Use	Normal ed Sole	ly by	Achoe	De tos Con	scription	Material (ACM) ms insulation, /AT, or						Ту	pe					
TO BE ABA In Facility (13)	TED	50000	intenar todial S (12)	0.5056	(i.e.	thermal surfa	systems cing, VAT niscellane				nount pecify or LF)		Remova	Repair	Encapsulate	Enclosure				
		Yes	No	N/A									₩		ate	re				
Exterior Si	ding			х		Exte	rior Sidi	ing		200	00 Sf		х							
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Name of Registered Waste	Houles																			
United Roll Off	i idulej		Ha	JDEP W auler ID		Cubic of Was			Name of I	- State of the state of	ed Lan	dfill								
City, State			22	2459		3		G.R.O.W.S.												
Elm NJ						Dispos	al Date /18		City, State Morrisv		1000	7								
Completed by		Title					ignature		IVIOTISV	me PA	1906	Date	0			_				
Anthony T Perna					10/29/18															

Check No. 5398

LL. J 398	E A MARI	()	ıı Su	ani io	NJAC	0.00 and 12-	120)	F	CB	1	n o	-	72			
Date of Notification (1)		Name o	f Buildi	ing Owner/Operato	10,4		-11-	17	-	-						
October 29, 2018				State	of NJ,	Dept. of Treasu	ry, Div. of Pro	perty Manage	ement 8	Co	nstr	uci	tion			
Agency Notified T	ype Notification			Street A				111 [1]	W. Carlo				-			
□ EPA 🔯	I Initial			20 We	est St	ate Street	[4 44] N	10V -	1 2	2018						
Not equired per State Reg. 10:2004	l Amended			City, Sta	ate, Zip	Code						1				
⊠ DOL	Amendment #	237		Trente	on, N	J 08625	1 /335	4708 f			1 5					
⊠ DOH	I Emergency (includin justification)	g		Name o	f Conta	ıct		Telephone N	lumber	PAPERS	F 4 2 44					
□ DCA □	Cancellation			(201)	499-1	194	201-499-1194									
				FACIL	ITY IN	FORMATION						-				
Name of Facility Where Aba	tement is Taking Plac	e (3)		TATOLE		ORMATION	Type of Facilit	v (4)								
Tramburg Building																
Street Address					School (K-1	2)	40)									
99 West Burlington S					☐ Subchapter	8 (Other than K- rivate & commer	-12) cial build	linas.								
					homes, etc.)			2							
City (5)	•						Square Feet	# of Floors	Bld	g. Ag	е					
Bordentown Township							39,677	2	53	+/-						
County (6)			9	County (Code (7	7) (STATE USE	Current Use (F	ror if being dem	nolished)							
Burlington			1	ONLY)			Business (Group B								
Name of Monitoring Firm Hir		AS	SCM I	No.		Name of Abatem			77							
Environmental Conne	ection, Inc.	0	0030	0		B&N&K Res	toration Co.	Inc.								
Street Address						Street Address										
120 North Warren Str	eet					223 Randolp	h Avenue									
City, State, Zip Code						City, State, Zip C										
Trenton, NJ 08608						Clifton, NJ 0										
Project Manager for Monitorin	ohone	e No.		Telephone No.		License No.										
Roland C. Jones	-392	2-4200)	973-478-468	1	00120										
Start Date (10)	Date	e (11)		Name of OSHA I	Monitor											
November 08, 2018	December		18			McCabe Env	rironmental :	Services, L.L	C.							
Occupancy Status During Ab	atement (Check only	one)				Street Address										
☐ Facility Closed/Vacated Du	ring Entire Period of	Abatan	ont			464 Valley B	rook Avenue	9								
☐ Abatement Performed Outs	side of Normal Facility	Hours	ient			City, State, Zip C				-						
☑ Other - Describe: Non-f	riable exterior w	ork				Lyndhurst, N										
Scope of Work (Check all that	t apply)							Process of Alberta								
$\boxtimes \ge 3 \text{ sf or } \ge 3 \text{ lf}$			Σ	☑ Renov	ation	☐ Full C	Containment with Enclosure	Negative Press	ure							
\square \geq 160 sf or \geq 260 lf			100	Demol		☐ Glove	rebag Procedure									
						⊠ Non-I	xempted (*) and Non-Friable Procedure									
			catio							Abat			nt			
Location of		Used S	mally olely			Description o	of				Ty	po				
Asbestos-Containing Ma		Mainte	enand	cel		stos Containing Ma		Amoun	t			щ	m			
TO BE ABATE IN Facility	<u>:D</u>		todial aff?		(1.e.	, thermal systems i surfacing, VAT,		(Specify SF or LF		Ren	Re	cap	ncle			
(13)		1077.5	12)			other miscellane		3F UI LF	1	Removal	Repair	Encapsulate	Enclosure			
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Doof Control Into		res 1	No	N/A	Caulk											
Roof Control Joint	Roof Control Joint								10 ln f	t X						
Name of Registered Waste Hauler NJDEP W					ler	Cubic Yards of	Name of Regis	tered Landfill		-1						
B&N&K Restoration C	o., Inc.,	1D No.		2A456	2	Waste	Min									
Tri-State Transfer Ass	ociates, Inc.	1208	101	4M400	,	1		nterprises, In	ic.							
Clifton N.I. 07044 / Dree	NIV					Disposal Date	City, State									
Clifton, NJ 07011 / Bro						12/31/2018	Waynesbu	rg, OH								
Completed by	Title	**************************************				Signature	///		Date							
G. Roger Woodman	Project Man	ager				////	10/2	9/20	/2018							

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Date of Notification (1) 10/29/18				f Building n Towns			1072	1000	N	lov -	- 1	201	8	The state of the s		
Agencies Notified Type Notification			Street A	ddress			į					1	-			
☑ EPA ☑ Initial			22 Ha	artford Re	ASSESSED CONTROLL											
DEP Amended Amendment	#			ate, Zip Co n NJ 080	L.CEA139103											
Emergency (-		f Contact	775		Telephone Number									
☑ DOH justification) ☐ DCA ☐ Cancellation	justification)									6-461					1	
			FAC	LITY INFO	ORMAT	ION										
Name of Facility Where Abatement is Taking Delran High School	Type of Facility (4)															
Street Address	M	School (K- Subchapte		or than	K-12\											
50 Hartford Road									private 8				lings,	home	es,	
City (5)	Sai	etc.) uare Feet	# of	f Floors		В	dg. A	ae								
Delran NJ 08075	- 1	100000	+ 000	2			10.3	0+	J .							
County (6)	County Code (7) (STATE USE ONLY)					rrent Use (Pri	or if bei	ng dem	olishe	ed)						
Burlington Name of Monitoring Firm Hired by Building ()wner (8'		ASCN			Name	of A	batement Co	ntractor	/Q)					_	
N/A		7.00.			Perr			nuacioi	(3)							
Street Address					Street											
City, State, Zip Code	Box 329 State, Zip Code															
	est Berlin NJ 08091															
Project Manager for Monitoring Firm Telephone No. Telephone No.										Licens						
Start Date (10)	Date (11)	-	1000000		SHA Monitor		0072	27								
								ame								
Occupancy Status During Abatement (Check	Street	t Address														
Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other – Describe: City, S								State, Zip Code								
Scope of Work (Check All That Apply)																
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	_	Renovat Demoliti				×	N	Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	e cedure					9		
		Location											Abate Ty	ment		
Location of Asbestos-Containing Material (ACM)	1	Normalled Solel	-	Ashoot		escription		ial (ACM)		mount	ł		.,		\neg	
TO BE ABATED In Facility (13)		intenan todial S (12)			therma surfa	containing Material (ACM) mal systems insulation, urfacing, VAT, or er miscellaneous)			(S	Specify or LF)		Removal	Repair	Encapsulate	Enclosure	
	Yes	No	N/A											fe		
Automotive Shop Closet		х			floor	tile &M	asti	С	28	30 SF		x				
Automotive Shop		Х				caulk			10	00 LF		х				
Automotive Shop		Х				site pa		3		8 SF		х				
Automotive Shop		X	IDED W			all board	ds			8 SF	1511	х				
Name of Registered Waste Hauler United Containers		100000	JDEP W auler ID		of Wa	Yards aste		Name of		red Lar	ndfill					
		22	2459		4			G.R.O								
City, State Elm NJ						sal Date 3/18		City, Stat		A 1960	0					
Completed by	Title					Signature	0	1			Date	3			\dashv	
Anthony T Perna President								10/29/18								

Jan 11 2000 10:38PM NJ Asbestos Control 609.633.0664

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BEST REMOVAL INC

PAGE 02/04

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City (5)			-:	-		Squere Pe		# of Floors		& A@	06		
TEANECK			,	-	L	170		Z (being domolished)	18	641	2 3	_	
(SERGEN)			MATE U	u (141)	-		12 Des			(/2)		100	
Name of Managering Fire Hirst by Building Ow	mar (3)	-	ASCM	No.		of Abeteur	Contra	and (9)				-	
Street Address					Bas	Address	vel	Inc				_	
Souther Leader And A					450	Sout	kiver Street						
City, State, Zip Code					1.5	State, Zip C		NJ 07601					
Project Manager for Monitoring Para.		17	Felephon	s No.		homa No.	-	License No					
					201	-329-	- 444 00388						
Seet Dista (10) 10 - 31 - 18	Boheduled 4 (-	Compl		m (11)	1	of OSRA							
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Pacific Cased/Vacated During Enths For Abstracted Performed Cetally of Normal Cetall	lod of Abet Pacility Ho	tometers person	ti		City.	Summer, Zop C	do	sack. NJ	076	06		_	
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Location of Asbestos-Countring Misorist (ACM) TO HE ARATEL To Fig. 13) (13)	Use Ma	Compail d Solet drawns hodial S (\$2)	acas, A p.A.	(Le dema	Description Containing systems in VAT, o then to isosti	Material (A po <u>l</u> adors, sus of	M() licing,	Amount (Specify SF or LF)	Ramovs	T)rp.	5	Емскамить	
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Name of Ragioured Wasts Stanfor			UDEP W		phic Yards f Wagen		Name of	Registered Landfill	<u> </u>	L		-	
Best Removal Inc.		1	171	09	1/2 : Xaponel Da		City, State				51	ı	
Hackensack, N.I 07601	Tide	_			- - Signab	Val	Mayn		lector	468	-		
7 9-1	771 -				18	Valle	dem	- 1	10-	25-	18	1	

J. Maiorano

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BEST REMOVAL INC

page 1

PAGE 02/04

State of New Jersey motification of assestos abatement (Pursuant to NJAC 8:60 and 12:120) PAGOE-100 Name of Building Owner/Operator (2) Date of Notification (1) 25 18 Type Noticetion SPAI cib 10 Agency Notifed NOV :-All initial O EPA City, Stelle, Zip Gode EL DOL ☐ Amended NO PERMIPERO Amendment # NOEM BERGEN Of Emergency (including Name of Contact SE DON (mathemation)

Carrestetion MS SPARACIO D DCA FACILITY INFORMATION Numb of Facility Where Absternant is Taking Place (3) Type of eathy (4) MS. PRITA SPARACIO D Sicho ! (N-42) ☐ gubo apter 6 (Other than K-12) AT District C.e. private & commercial buildings. Street Address hons s, etc.) Squeto teat 1945 P of Floors CRY (5) . .. NORTH BERGEN 18.20. 2 County Code (7) (STATE USE ONLY) Current Use (From it being demolished) County (6) HUDSON Herris of Maniforting Farn Hired by Suliding Owner ADCM No. Hame of Abeterneed Con motor (8) Best Remova Inc Otrest Address Ellest Address 450 South R ver St City, State, Zis Code Hackensack, N.J. 07601 Project Manager for Monitoring Parts Talephone No. Jeense Ho. Talephone No. 201-329-744 1 00388 Steel Date (19) Name of DEMA Monto: **Acheduled Completion Date (11)** 10/29/18 10/30/18 Omega Envi:onmental Occupancy Status During Abstrament (Check only one) Street Address 280 Huyle: 3t D Facility Closed/Vecerled During Entire Pariod of Abstament D Abstament Partitioning Oblaids of Normal Facility Hours of Other - Describe: \$1.50 4H. TO \$1.60 PM City, State, Zip Code S. Hackensack , N.J. 07606 Boops of Work (Check all that apply) O Full Countain Mark with Negative Proseste Renevation O Demeltion 題至3報如至3日 -Civini-Engine na - Civinibag P rescure Q ≥ 160 = 67 ≥ 260 € O Hon-Exemp at (*) and Non-Frieble Procedure APublishmen ls Leceton Type Nomally Location of Description of Lined Solely by Containing Material (ACM) Assesses Consulting Material: LC(V) Encaptedate Melmenanos/ Custoslis! TO HE ARATED (i.e., Sharmal systems brouks on, authorize, VAT, or other miscellaneous) Repair (Spacing Staff? SF or LF) (13) (12) No NUA BASEMENT THOUGH SYSTEM IN 30 M 70 M GO LF Name of Registered Wester Hauter NJOEP Waste Hauler Cubic Yards of Ne is of Registered Landill Best Removal Inc ID No. 2-/207 M: nerva Enterprises .LLC 17109 Disposel Date Cit Shake 10/30/18 Hackensack , N.J. 07601 aynesburg, Oh, 44688 Completed by * Do not use this form for asbestos licensura acompted addivises. 10/25/18

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

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Date of Notification (1)					me of Build	ing Owner/Operato	5 Exc+	WATE	A16-	-	ריים דעניל					
Agencies Notified	Type Notificati	on		Str	eet Addres	s			LICEN	oil C	S.	- 13	=			
□ BPA	initial initial			-		274 1	MAIGN	IRA	12 6	(1)						
M DOL	Amended Amendmen	t #		City	y, State, Zip	Code	.1	C = 0.	(~ .	_					
№ рон	☐ Emergency	(includ	ing	<u>_</u>		CAPE										
DCA	justification Cancellation			Na	me of Conta	SAME		Telep	hone Num	ber						
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Name of Facility Where	Abatament is Tal	ing Dla	ce (3)		ACILITY IN	FORMATION	Type of Facili	tv (4)								
	ESIDEN		ce (3)			School (K-										
Street Address	VC 310 V V			Subchapter 8 (Other than K-12) Other (i.e., private & commercial buildings,												
City (5)	- WILDI		_				homes, et Square Feet		Floors	В	ldg. A	Age				
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County (6) CIAPE	MAY)			E ONLY)	(7) (STATE	Current Use (ACIA I		shed)						
Name of Monitoring Firm	Hired by Building	Owne	Г	ASC	M No.	Name of Abatem	ent Contractor	(9)								
(8)	JA					K	Ltuco	IN					_			
Street Address	1					Street Address	9 5.	SPRU	CE b	Aug.	5					
City, State, Zip Code			3,54 Sec. 115 Sec. 11			City, State, Zip Code WAPIT SHAPE N. J 0805Z										
Project Manager for Moni	itoring Eirm		T Tel	ephone	e No	Telephone No.	License No.									
- Project Mariager for Mori	toring riiiii		-	Сргюга		856-779-0472 01371										
Start Date (10) Scheduled Completion D						Name of OSHA N	Monitor I/A /	ıΛ								
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☑ Facility Closed/Vacate				ement		Control of the Contro										
Abatement Performed Other - Describe:						City, State, Zip Code										
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