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

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Date of Notification (1	) ,		Na	me c	of Bui	Iding Ov	wner / Operator ability Transfe	(2) er		I INOV	- 3 4	.017		巴	1		
	10-17-17				Addre		ability Transit										
	ype Notifica	tion	16	50 F	loe F	os Peres F	Road, Suite 30	6		ASBESTO	S CON	TROI	- &				
⊠ EPA	<b>A</b> 1.33-1		Cit	V St	ote &	Zip Co	de			LIC	ENSIN	à	77100.50				
☐ DEP	Initial		CII	y, ot	uic d	Miccol	ıri 63131							The state of the s			
□ DOL	Amen				of Co		111 00 10 1			1	Talanha	no NI					
□ DOH		gency	1000000												3		
☐ DCA	Canc	ellation			Pee		DATATION										
				FAC	ILII	YINFO	RMATION Type of Facility	, (A)									
Name of Facility Whe	ere Abateme	ent is Taking Pla	ice (3)				School (K-										
Building #8, Perth	Amboy 1	160, LLC.					Subchapte		her than	K-12)							
Street Address							Other (i.e.	privato	& com	mercial huildin	nas hon	ies e	etc.)				
1160 State Street									of Floor	ro	Bldg. Ag	100,	,				
							Square Feet	7.				C					
City (5)		County (6)	Cour	nty C	ode (	7)	NA				NA				-		
		Middlesex	NA				Current Use (F	Prior if b	eing de	molished)							
Perth Amboy		Wilduidoox					Vacant/None						1 4		1		
the state of the state of the	Cirm Hirad h	v Building Own	er (8)		IASC	M No.	Name of Abatement Contractor (9) Enterprise Network Resolutions Contracting, LLC										
Name of Monitoring I		y building Own	01 (0)				Enterprise N	letwor'	k Reso	lutions Con	tractin	g, L	LC				
01 1111							Street Address										
Street Address							874 Piney He	ollow F	Road, I	PO Box 70							
21 27 0-1				- 8		City, State & Z											
City, State & Zip Coo						Winslow, N.			1								
	roject Manager for Monitoring Firm						Telephone Nu			License							
Project Manager for	Teleph	10110	110,		609-567-0600 01263												
	Scheduled Con	anletion	Dat	e (11	)	Name of OSHA Mon tor											
Scheduled Start Dat	e (10)	Scrieduled Con	2-28-	18	C (1.	,	<b>EMSL</b> Analy										
10-27-17			The state of the s				Street Addres										
Occupancy Status D	od Magaza	During Entire P	eriod o	/ f Aha	ateme	ent	200 Route 1		rth	10 20 2							
X Facility Clos	ed/vacated	outside of Norma	al Hou	re _	7am t	o 3pm	City, State & Z										
	гетогтеа С	utside of Norma	ai 110u	10	, am	. С СР	Cinnaminso										
Describe:		Abetement															
		Abatement					Object.										
Scope of Work (Che	eck all that a	ppiy)							ull Con	tainment with	Negativ	e Pre	essu	ıre			
				Ren	ovati	on		₩ N	/lini-End	closure							
X ≥3 sf or ≥3 lf			$\overline{\Box}$		nolitio				Glove Ba	ag Procedures	S						
X ≥160 sf ≥26	O If		X	Dei	HOHU	711			Non-Exe	empted and N	on-Friat	le Pr	oce	dure	е		
			la la l	ocati	on	1	Description	Married Inc.		Amount		bater					
	ocation of	#:		nally l			Asbestos-Con	taining		(Specify							
	tos-Containi	ng	100000	olely h			Material (A			SF or LF)	) ;	0 _	_	Encapsulate	En		
	erial (ACM)				ce or		(i.e., thermal s	ystems			9	Repair	0	ap	CIS		
	BE ABATED n Facility		Custo		Staff?	1	insulation, surfac	cing, VA	T		1 5	Removal	2.	Suls	Enclsoure		
11	(13)		Yes	(12) No	N/A		or other miscell	aneous	)			-		ate	Ф		
	(,0)		res	140	14//					25 222 - 5	×	1	7	7	П		
Roof (Upper & Lo	ower Leve	ls)			X		k Tar Material			35,000 s. f.	×		+++	=+	믐		
Building Exterior	r		ПП		X	Tran	site Siding Pa	nels		15,000 s. f.		_	<del>-</del>	=+	Η		
Building Interior			T		X	6 in.	Pipe Insulatio	n & E	bows	500 l. f.	>	<del>\</del>    -	<del>  </del>	#	뉘		
Dulluling Interior			T	F							_	- 나는	411	4	님		
			H	Ħ									4	4	닏		
			17	H											Ш		
		- IN	IDEE	Waste	Cubic Yards	Name	of Reg	istered Landfi	li								
Name of Registered				ID No.	of Waste			1222									
D IIIMinata 9 Do		0.000	1435		60	Saler	m Cou	nty Landfill									
Bull Waste & Re					Disposal Date	City, S	State			/	6						
City, State							2-28-18	Allov	vay_Na	w Jersey		500					
Berlin, NJ					41.				1	//	Da	te					
Completed By (Prin	nt or Type)				tle	3 4	Signature			//	1.00	-27-1	7				
Theodore S. Bud	dzynski			P	resid	ient	/	//	1			45500 6	000				
i neodore 5. budzynski									/								
					//		900										

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	Ch	eck I	Vo_	45	36			
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ic		irpo	MHB V	_	3	2017		IJ

Date of Notification (1)	Name of Building Owner/Operator (2)  PA of NY & NJ, Newark Liberty International Airport 7 - 3 2017									- 1				
October 30, 2017				PA	of NY &	NJ, Newark L	iberty Interna	ational Airpoh	ÐV -	3	20	17		
Agency Notified	Type I	Notification				Address			1000				1	1
□ EPA	☑ Initi	31			241	Erie St	reet			N. KONG	a. allow	TA A STOR		
Not equied per Sale Reg. 10 2004	□ Am			İ	City, S	State, Zip	Code		ASBE	STOS	CON	VTF	OL	. &
⊠ DOL		endment #	2020		Jers	ey City	, NJ 07310			LIOLIN	1011	G	-	
<b>⊠</b> DOH		ergency (includir ification)	ng .		Name	of Conta	ct		Telephone Nun	nber				
□ DCA		ncellation			Ralph	Campion	e, Facility Superviso	or, Asbestos OPS						
					FACI	LITY INF	ORMATION							
Name of Facility Where A	bateme	nt is Taking Plac	ce (3	)				Type of Facility	(4)			-	-	
Newark Liberty Inte														
Street Address					-			School (K-12	8 (Other than K-12)					
Bidges N57, N58, N59 &	Untilit	ies - FSA Demo	litio	n & Fai	hart R	d Fuell	ine Removal	Other (i.e. pr	rivate & commercia	ıgs,				
City (5)	Oritime	ics - i on beine	illio	ii oc Lai	naith	u., r uer t	ine nemovar	homes, etc.) Square Feet	# of Floors	loors Bldg.				
Newark								l i	Underground	1		;		
DESCRIPTION OF THE PROPERTY OF						0 1 /=		N/A	Fuel Lines 50+/-					
County (6)					ONLY)		) (STATE USE		rlor if being demolished)					
Essex					(7.007.07		1		ed Fuel Lines					
Name of Monitoring Firm I	Hired b	y Building Owne	r	ASCM	No.		The state of the s	nent Contractor (9	· *					
PA of NY & NJ								toration Co.,	Inc.					
Street Address							Street Address							
241 Erie Street, Room 236							223 Randolp							
City, State, Zip Code							City, State, Zip C							
Jersey City, NJ 073							Clifton, NJ (							
Project Manager for Monito	oring F	irm		elephor	and the second s				License No.					
Ralph Campione			_						00120					
Start Date (10)		Scheduled Co			te (11)									
November 13, 2017		March 20,					EMSL Analy	tical, Inc.						
Occupancy Status During	Abaten	nent (Check only	one	)			Street Address							
☑ Facility Closed/Vacated	During	Entire Period of	f Aba	tement			200 Route 1							
☐ Abatement Performed C ☐ Other - Describe:	)utside	of Normal Facili	ty Ho	ours			City, State, Zip C		2000					
Scope of Work (Check all t	that an	als/					Cinnaminso	n, NJ 08077-2	2892					_
V	ınaı apı	лу)					☐ Full (	Containment with	Negative Pressure	е				
<ul> <li>≥ 3 sf or ≥ 3 lf</li> <li>≥ 160 sf or ≥ 260 lf</li> </ul>					☐ Ren ☑ Dem	ovation	<del></del>	Enclosure						
△ 2 100 St 01 2 200 H					M Delli	Ontion	⊠ Non-	ebag Procedure Exempted (*) and	Non-Friable Proc	edure				
			1	s Locati	on						A	bate		nt
				Normal								Ту	pe	$\vdash$
Location Asbestos-Containing		al (ACM)		ed Sole		Ashe	Description of stos Containing Ma		Amount				ш	
TO BE ABA	ATED	,		aintena Custodi			, thermal systems	insulation,	(Specify		Re	В	nca	Enc
IN Facili (13)	ty			Staff?			surfacing, VAT other miscellane		SF or LF)		Removal	Repair	Encapsulate	Enclosure
(10)				(12)	,		Other miscenarie	ious)			val	₹	late	Ir'e
			Yes	No	N/A									
Along Earhart Road	I				X	14" OD	Tar & Tar Paper Pip	e Insulation	96	0 In ft	X			
Along Earhart Road						12" OD	Tar & Tar Paper Pip	e Insulation	2,08	0 In ft	X			
Along Earhart Road						18" OD	Tar & Tar Paper Pip	e Insulation	22,50	0 In ft	X			
· ·									1960/19 <b>*</b> (655)					
Name of Registered Waste Hauler NJDEP W					aste H	auler	Cubic Yards of	Name of Ragist	tered Landfill					
Jimmy Byrne ID No. 19551							Waste 1571	Minerva En	nterprises, Inc					
City, State							Disposal Date	City, State			_		-	
1199 Randall Avenue, Bronx, NY 10474							11/13/2017 - 03/31/2018	Waynesbu	rg, OH					
Completed by Title						Signature	In MY /1	1//	Date					
G. Roger Woodman Project Manager							MILI	11/11/11/11	~	10/30	/20	17		

PAID									Г	_		0		- P	rint [	
Ch 2337		NOTII	FICATIO	State of Ne N OF ASB It to NJAC	ESTOS	ABATE	MEN	Т		D)	[5]	C				
Date of Notification (1) 10/30/17				of Building		Operato	r (2)				N	10V	<del>-</del> 3	20	17	
Agencies Notified Type Notificat  EPA Initial	ion			Address _afayette	Ave.				$\dagger$		ASBE	STC	OS CI	ONT	ROL	
DEP Amende  DOL Amendm	ent #			tate, Zip Co thorne, N		06						LIC	EINS	ING		
□ DCA     □ Emerger     □ justificati     □ Cancella		g	Name	of Contact ph Dello					Te	lephon	e Nur	mber				
Name of Facility Where Abatement is Ta	kina Dlago	(2)	FAC	CILITY INFO	ORMAT	ION										
Private House	iking Place (	(3)					Тур	e of Facility	200							
Street Address							×	School (K- Subchap e Other (i.€. etc.)	r 8 (Oth	er than & comr	n K-12 mercia	2) al bui	ldings	, hom	ies,	
City (5) Hawthorne							Squ	are Feet	# 0	f Floors	S	E	Bldg.	Age		
County (6) Passaic				Code (7) USE ONLY)	)		Curr	ent Use (Pr	or if being demolished)							
Name of Monitoring Firm Hired by Buildi Competent Supervisor	ng Owner (8	3)	ASCI	M No.				atement Co								
Street Address		V2=				Street 205		ess 6 West 3	uite 14							
City, State, Zip Code			City, State, Zip Code Totowa, NJ 07512					<u> </u>								
Project Manager for Monitoring Firm			Telepho	one No.		Teleph	none N			Licen 0115		ο.				
Start Date (10) 11/11/17	Schedul 11/18/		mpletion	Date (11)		Name	Name of OSHA Monitor Same as above									
Occupancy Status During Abatement (Cl	neck Only O	ne)	Street Address													
Facility Closed/Vacated During Enti     Abatement Performed Outside of N     Other – Describe:	re Period of ormal Facility	Abater y Hour	ment s			City, S	tate, Z	Zip Code								
Scope of Work (Check All That Apply)																
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demoli				×	Mi Gl	III Contain no ni-Enclost re ovebag Prod on-Exempted	e cedure					0		
Location of	1	s Locat Normal	lly		Do	scription							Abate	emen pe	1	
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Ma	ed Sole aintena todial ( (12)	nce/		os Con thermal surfa	taining M systems cing, VA niscellan	lateria insul T, or	ation,	(S	Amount Specify F or LF)		Removal	Repair	Encapsulate	Enclosure	
Basement	Yes	No	N/A		D:										è	
Dasement			X		Pipe	Insulat	ion		25	0 LF		X		X		
Name of Registered Waste Hauler		N	JDEP W	/aste	Cubic	Yarde		Name of I	Regieto	red Lar	dfill					
Academy Construction Inc.		Н	lauler ID 34422		of Was			GROW	11.23		iuliff					
City, State Totowa, NJ						sal Date		City, State								
Completed by Filip Geleski	Title Supe	erviso	r		S	ignature (	£,	1, 27		1	Date	e /30/1	7			

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	State of New Jersey
(Kla437	NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)

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	NOV - 3 2017
	ASBESTOS CONTROL &

CK Ca	101		(1 4	i Suurit t	O NOAO O	.00 0110				_111	-111-	NOV	_ (	20	17	
Date of Notification (1)		1		Building O rt Dole					"							
11/31/17 Agencies Notified	ype Notification		-	Robe Street Ad		Privati	е попп	е		+	AS	BEST	25.0	ONTE	301	
	_		lì	oti eet Ad	101633						AS	LI	CENS	SING	100	
EPA DEP	Initial Amended			City, Stat	e, Zip Cod	le				Economic						
DOL	Amendment #		-	Barne	gat Light	NJ 08	3006									
☑ DOH	justification)	iciualing	- 1	Name of						Tele	nhone N	umber				
DCA [	Cancellation			Robert		DILLET	011									
Name of Facility Where Ab	atement is Taking	Place (3)		FACIL	ITY INFO	RMAII	ON	Туре	e of Facility [4]	)						
Robert Dole Priva		, (-)						П	School (K-12	)						
Street Address									Subchapte 8 Other (i.e. ori	(Othe	r than K-	·12)	dinge	homo		
								X	etc.)	vate o	Comme				5,	
City (5)									are Feet		Floors		Bldg. /	Age		
Barnegat Light NJ 08	3006								00+	1		1	35+			
County (6)				County C	code (7) ISE ONLY)				ent Use (Pr or use	if beir	ng demoli	isnea)				
Ocean  Name of Monitoring Firm H	lired by Ruilding C	wner (2)	1	ASCM			Name	0.00	atement Cont	ractor	(9)					
Name of Monitoring Firm F	med by building C	Wilei (0)		AGGIVI	.10.		Pern			turiacrot (a)						
Street Address							Street	Addr	ess							
							PO E	Box :								
City, State, Zip Code	N. 2002-191					20	Zip Code									
									e No. License No.							
Project Manager for Monito	oring Firm			Telephor	ne No.		Teleph 856-		NO. -9800		00727					
Start Date (10)	T	Scheduled	Com	noletion [	Date (11)		500		SHA Monitor				V			
11/13/17		11/17/17		Same												
Occupancy Status During	Abatement (Check	Only One	)				Street	Addr	ess							
Facility Closed/Vacate Abatement Performed	ed During Entire F d Outside of Norm	eriod of Ab al Facility F	atem lours	ent			City, S	tate,	Zip Code					i i	7-14-15-1	
Other – Describe:						_										
Scope of Work (Check All	That Apply)						_	-								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			nova moliti				E	N G	ull Containme lini-Enclosure llovebag Proc	edure						
							<u> </u>	N	lon-Exempted	(*) an	d Non-Fri	iable Pr		re tement		
		100000	ocati	100										ype		
Location of Asbestos-Containing N		Used	Sole		Ashest		scription		ial (ACM)	А	mount			T		
TO BE ABA	TED	Main Custo				therma	I system	s insu	ulation,	(5	Specify or LF)	Ren	Re	Encapsulate	Enclosure	
In Facility (13)	/		(12)				miscellar			31	OI LI )	Remova	Repair	osula	osur	
		Yes	No	N/A								-		ate	0	
Exterior Si	dina		-	X		Exte	erior Si	dina		11	00 SF	x	1			
Exterior of	uirig	+		-												
Name of Registered Waste	e Hauler		0.000	JDEP W			Yards		Name of F	Registe	ered Land	dfill				
United Containers				Hauler ID No. of 22459 3			of Waste 3 G.R.O.W.S.									
City, State	Dis				sal Date											
Elm NJ					11/			Morrisville PA 19067								
Completed by Title				Sig			Signatur	е	Date 11/31/17							
Anthony T Perna	uent					_	1			1 170	7.1					

PAID CK 31484

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	Parison .	EP	GI	M	ß

		MERCK SHARP & DOHME CORP.									U W								
Date of Notification (1)				Street Address															
10 / 30 /17 Agencies Notified Type Notific	otion			126 E	t Addre	ess Oln ave	NUE, P.O. BO	X 2000, RY	28-414		NOV	- :	3 201						
, tgo, to ee t						Zip Code			1		1101								
	Notification ded Notific			RAHV	NAY, N	NEW JER	SEY 07065			1			ONITE						
	llation							Telenhor	a Alumbo		BES	ICEN	CONTR						
X DOH On Ho			0.710		e of Co	ntact IOHNSON	ı	I I DIE HAAR	ID IGIBITIDE	31	-								
DCA EMER	RGENCY N	NOTIFI					•												
	Takina I	Naco (		CILITY IN	IFORM	ATION	Type of Faci	lity (4)		- 3-2-27									
Name of Facility Where Abatement is	i aking r	riace (	3)				School	(K-12)											
MERCK SHARP & DOHME CORPORA	ATION						Subcha	pter 8 (Othe	r than K-	12)		oto							
WERGR STIART & BOTTIME GOTTE								e. private &	Floors	blags.	Bldg.	Age	<i>)</i>						
Street Address							Square Fee		3		74								
126 EAST LINCOLN AVENUE - BUILD		10-21-		Coun	ity Coc	le (7)	Current Use	(Prior if bein	r if being demolished)										
City (5) Coun						ONLY)	RESEARCH	LABORATO	DRY AND	OFFI	CE FA	CILI							
Name of Monitoring Firm Hired by B		wner (	8)		AS	CM No.	Name of Ab	atemert Co	ntractor	(9)	201								
ENVIRONMETAL HEALTH INVESTIG	ATIONS,	INC.				104	PAR ENVIRO		CORPO	KAII	NIC								
Street Address							Street Address 313 SPOOK ROCK ROAD												
655 WEST SHORE TRAIL								City, State, Zip Cod 3											
City, State, Zip Code SPARTA,				SUFFERN, N	NEW YORK														
Project Manager for Monitoring Firm	Number			Telephone Number License Number															
WILLIAM S. KERBEL, CIH		200000000000000000000000000000000000000	729-56				845-369-750	1900	1101										
Expected State Date (10)	Sch			tion Date		/40	Name of OSHA Monitor  AMERISCI LABORATORIES INC #11480												
11 / 13 /17 Month Day Year	l M	1 Ionth	1	Day	Y														
Occupancy Status During Abatement	(Check on	ly one	)				Street Addre												
Facility Closed/Vacated Du	irina Entire	e Perio	d of A	batement	n	728	117 EAST 3	OTH STREE	= 1										
Abatement Performed Outs	side of No IDAY-FRI	rmal Fa	acility	Hours - D	escribe	2:	City, State,	Zip Coce											
X Other - Describe: MON	IDAY-FRI	DATT	AIVI - J	1.191		2		NEW YORK		ORK 1	10016								
Scope of Work (Check all that apply)							ainment with N	Negativa Pre	essure										
Demolition	X Rer	novatio	n		-	Mini End	g Procedure												
>3SF OR LF X >160 SF OR 260 LF					X		ble Procedure												
X >160 SF OR 260 LF Location of		s Loca	tion		Descri	iption of A	sbestos-		mount		batem								
Asbestos-containing	no	rmally			Contair	ning Mate Thermal s	rial (ACM)	4,000	mount pecify	REM	REP	ENC	ENC						
Material (ACM)	Mc	solely aint/Cu					cing, VAT,		or LF)	MOVAL	PAIR	APS	000						
TO BE ABATED in Facility (13)	IVI	Staff (			or oth	er misce	laneous)			P	1	CAPSULE	CLOSURE						
in rading (10)	Ye	s No	N/A	1						+	+	III	m						
ROOF-PERIMETER PARAPET			X	PARAPE	ET CAF	CAULK		5 SF		X	+	-	$\vdash$						
			×	PARAPE	ET WAI	LL TAR		680 SF	F	X									
ROOF-PARAPET WALL																			
		-	+																
00		+																	
1		-				W-2.110-													
9		-	-							1									
		IDED.	Manta	Cubic Y	ards of	Waste	e Name of Registered Landfill												
Name of Registered Waste Hauler		JDEP V auler ID		Cubic Y	20		LYCOMING COUNTY RESOURCE MANAGEMENT SE						NT SE						
FREEHOLD CARTAGE, INC. 825 HIGHWAY 33		159		447 ALEXANDER DRIVE/ROUTE 15															
City State					Disposal Date City, State 11/13/17-01/15/2018 MONTGOMERY PA 17752 ;						4								
FREEHOLD, NEW JERSEY	Date - 17 2						1,												
Completed by (Print or Type)	Title	TOR O	F OPF	OPERATIONS Signature Signature						17									
BENJAMIN SANCHEZ	DINEO	. 0110	. 01		THE REAL PROPERTY.			The state of the s		1	1	ERATIONS / / S							

A TOTAL RECEIVE	ED 10/3	30/201	7 03:54PM 2	013297440	BEST F	REMOV4	AL II	NC	
30 2017 15:31 NJ Asbestos Conf	trol 609.0	633,066	4	page 1		E	C	E	IVEF
10/30/2017 01:58PM 20132	97440		В	EST REMOVAL INC	, [[U		PAG		14/84
V/1331						Ν,	1014		
F4300				y e		4 11	IUV	-3	2017
EMERGENCY	NOT	MFICATIO	State of New Josep ON OF ASSESTOS	ABATEMENT		7.0	er parasis		
Date of Notification (1)			n in NJAC 8:50 an		ì	ASB	ESTO	OS CO	ONTROL &
10-30-17			f Building Owner/O		Part Property		7	I INO	NG
Agexicias Notified Type Notification		Street A	DOLNI	F12		TU			
□ EPA 🖾 Initial					1 10/25 11/2		ig.		
G DEP G Amended F DOL Amended Amendment #			are, zip Coda	NJ 0790	-		a see est		
W DOH Emergency (interpretation)	sluding	Name o	Contact	19 0 178	Talephone Numb	380			
☐ DCA ☐ Cancellation		K.	DONNE	5					
Name of Pacificy Where Abatement is Taking Pie	ce (3)	FAC	LITY INFORMA	TION Type of Facility	(4)				
K. Dogwood				□ School (K	.12)				
Street Address		197		Subchapte	r 8 (Other than X-12) private & commercial t	niiklines.	hnmas	am l	
City (3)				Square Feet	# o Floors		Age	( esc.)	
Summit			-74	3900	3		o y	æ 5	
Coursey (6) NION		County	Code (7) USE ONEY	Current Use (Pr	or if bein ; demolished)		/		
Name of Monitoring Firm Hires by Building Our	per (8)	1	M No.	RP5126	ACE				
				Best Removal					
Street Address				Street Address					ĺ
City, State, Zip Cods		· Commercial and the second		450 South Riv	er Street				
Project Manager for Monitoring Firm				Hackensack, N.					2
Lights Manufel to Mouthaing tills		Telepho	ne No.	Telephone No. 201-329-744	License No.				
Stan Date (10)	Schaduled Co			Name of OSHA Monitor					
Cocupancy Status During Abateromi (Check Only	11-	2-17	7	Omega Enviro	nmentil				
Pandity Closed/Vanated During Entite Parior	100001000000			Street Address 280 Huyler St	rest				
Abatement Performed Outside of Normal Fa	ellity Hours	14		City, State, Zip Code					
Scope of Work (Check All That Apply)		THE STATE OF THE S		South Hacken	sack, NJ 07606				
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□ ≥160 af a ≥260 if	D Demo			36 Mini-Enclosur	·e	DU PRE			
	O-			Clovebag Proc     Non-Exempte	d (*) and Von-Prisble P	racedure			
Y	Is Loc Name						sternen Type	π	
Location of Asbastus-Containing Material (ACM)	Used So Mainter	lety by	Asbeston Cont	scription of sining Material (ACM)	Amount		1	T	
In Facility	Custodia (12	Staff?	(i.c. thermal syste	ems insulation, surfacing.	(Specify SF or LF)	Repair	(kon	Enclosuse	
(13)		· -	other i	miscellaneous)	,,	ound Jam	Encapedate	38380	
2 AND FLOOR BATH REMOVEDING	Yas No						1"		
2 THE FLOOR BATH RENOVATION		<u> </u>	THERMAL !	USULATION	15 LF	×	-		
		+		THE STATE OF THE S			-	-	
		+				- -	+	H	
Name of Registered Wasts Hauler		NIDEP W		Yards Name of	Registere à Landfill				
Best Removal Inc		Haulet ID 1710	1 2	te		wier- 1	110		
Ciry, State		1/19	Dispus		Ainverva Enterp	11305, 1	للقن		
Hackensack, NJ 07601	Titla		11-2	The second secon	nesburg, OH 44	688			
CVUIDING LY	2 15100			C 1995, and c 1995.	Ph	-	-	-	

Robert Veldran

Estimator

10-30-17

DATE									Г		_	0		P	int F	2rm	
CK 233%	N	22.0	ATION		Jersey STOS ABAT 60 and 12:1					0	E	C	15		V L		
Date of Notification (1) 10/30/17				f Building O Magallar	wner/Operate	or (2	2)		$\neg$		1	407	- (	3 20	)17		
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EPA Initial Amended		C	ity. Sta	ate, Zip Cod	e	205-1					S INC.	LI(	CENS	SING	-	_	
X DOL Amendmen				a, NJ 075													
□ Emergency justification DCA     □ Cancellation		N	ame o	f Contact Magallan					Tel	enhone	a Ni in	nhor			0.000		
			a constant	LITY INFO													
Name of Facility Where Abatement is Takin Private House	ng Place (3)	NE.						Facility (	500 <b>5</b>								
Street Address							Su × Oti	bchapter her (i.€. p	8 (Oth				dings	, hom	es,		
City (5) Totowa						5	etc Square		# of	Floors	S	E	Bldg. A	Age			
County (6) Passaic				Code (7) USE ONLY)		C	Current	ent Use (Prior if being demolished)									
Name of Monitoring Firm Hired by Building Competent Supervisor	Owner (8)		ASCN	I No.	I .			ment Cor									
Street Address					et Address												
				205	R	t. 46 V	6 West Suite 14										
City, State, Zip Code				100000000000000000000000000000000000000		te, Zip a, NJ	Code 07512										
Project Manager for Monitoring Firm		Te	elephoi	ne No.			ne No. 32-424	14		Licen 011	ise No	).					
Start Date (10) 11/09/17	Scheduled		letion [	Date (11)	3,000	T0.8075300		Monitor									
Occupancy Status During Abatement (Chec	11/16/1					ouncesou:	as ab	ove									
	ā.		Street Address														
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe:	Period of Al nal Facility I	oatemer Hours	nt		City,	Stat	te, Zip (	Code						1000			
Scope of Work (Check All That Apply)																	
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	Is I	ocation									11000		7477 Tarabasa	ement			
Location of	No	ormally			Descriptio	n of	f						T <sub>)</sub>	ре			
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Main Custo	Solely itenance idial Sta (12)	e/	(i.e. th	s Containing ermal systen surfacing, V	taining Material (ACM) systems insulation, cing, VAT, or miscellaneous)			(S	mount pecify or LF)		Remova	Repair	Encapsulate	Enclosure		
P	Yes	No	N/A												Ф		
Basement		X		Pipe insula	atio	on		60	) LF		X		Х				
No.																	
Name of Registered Waste Hauler Academy Construction Inc.		Hau	EP Waler ID 422	No.	Cubic Yards of Waste			Name of F			ndfill						
City, State Totowa, NJ				Disposal Date	e	- 1	City, State										
Completed by					e												
Filip Geleski	rvisor Signature Till Paller						Phr	/	100000	/30/	17						

Ch S	267		NO	TIFICAT	TION OF .	f New Jer ASBESTO JAC 8:60	SARATI	EMENT		٥٧.	3_	201	7
Date of Notification	10/30/2017			Nan Key	ne of Build	ding Owner	r/Operato	or(2)	ASBE	STOS	CO	VIB(	2
Agencies Notified  CI EPA	Type Notificat S Initial	оп		Stre	et Address Broad S	7		<del></del>		LIGE	1991	80	3
図 DEP	☐ Amended ☐ Amendme ☐ Emergency	nt#_		City,	State, Zir	Code							
☑ DOH □ DOA	justification)  □ Cancella		3	Nam	e of Cont ony Rapo	w Jersey act Ila	07735	<u> </u>	Telephona	Viimh	1115 1137 2137		-
Name of Facility Whe	ore Abstement is Ts	king Place	15)			NFORMA	TION	,					
Keyport High Scho	ol							Type of Faci				102	Đ
351 Broad Street	1							School (	K-12) ster 8 (Other than he b. private & common	(-12) orciel b	ullaing	g≤, ha	)/
Keyport, New Jerse County (8)	by 07735							Square Feet 20,000	# of Floors		Bldg	. Age	
Monmouth				COUNT	ty Cade (7	(K)		Current Use	Prior if being demo	liahed)			2
Name of Monitoring F Environmental Desi	im Hired by Buildingh, Inc	g Owner (8	8)	AS	CM No.		Name Lilich	of Abatement ( Corporation					
Street Address 5434 King Ave					);		Street	Address CBride Ave					
City, State, Zip Code Pennsauken, NJ 08							City, St	Inte, Zip Code land Fark, Ne	u lores:				
Project Manager for M	onloring Firm			Teleph 858-5	none No 15-9518		Telephi	one No. 25-8400	License	No.			
Start Date (10) 10/31/2017		Schedu 11/01/2	led Co 2017		n Date (1		Name	OSHA Monit	01104				
Occupancy Status Dur		ck Only O	ne)				Streat A	Address	aboratories, LLC			6. C*	
Facility Closed/Vaca	sted During Entite F	eriod of At	batem	ent 's			City, Sta	Route 22 Wes	t			T 25	100
		mai Facilit	31100					- NIII07000					
Scope of Wark (Check	3pm start	mai Facilit	y 1 100:				Union	n, NJ 07083					
☑ Other - Describe:	3pm start	30 1	Renava	etion			Union	Full Contai Mini-Encio Glovebea f	rocedure	e Presi	* 10		•
Scope of Work (Check  33 of or 23 if 2150 of or 2260 if	3pm start All That Apply)		Renova Demoli	etion tion	1	Pool	Unior	Full Contai Mini-Enclo Glovebeg f Non-Examp	AUIS	e Presi	rcicedt Abat	amen	t
Scope of Work (Check  ≥3 of or ≥3 if ≥150 of or ≥260 if	an of Material (ACM)  ATED	Is Use	Renova Demoli	ation tion tion tiy bly by fical Staff?	Asbe (i.e	stos Conta thermal : surfac	Union	Full Contai Mini-Enclo Glovebeg f Non-Examp terial (ACM) noulation, or	luis locadure	e Press	Abat Ty	amen /pe	- 1
Scope of Work (Check  ≥3 of or ≥3 if ≥150 of or ≥250 if  Locatio  Asbestos-Containing  TO BE AB  in Faci  (13)	an of Material (ACM)  ATED	Is Use	Local No No	ation tion tion tiy bly by fical Staff?	(1.8	stos Conta , thermal : surfac other m	eription of control of the control o	Full Contai Mini-Enclo Glovebeg f Non-Examp terial (ACM) noulation, or	rosedure ted (*) and Non-Fri Amount (Specify	e Presi	rcicedt Abat	amen	
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CX-HIO	1	NO.	TIFICA	State of New Jo NTION OF ASSEST	OS AF AT	ENENT	UIA FA	X		
Date of Notification (1)	<u></u> }-			me of Building Own	er/Ope at	or (2)	ECEI	V		
Agencies Notified Type Notificat  EPA Initial  DEP Amended		***************************************	Str	eef Address	LOG R		NOV - 3	2017		U
A DOL Amendm Emergen justificatio Cancellat	oy (includia n)	ig	1	ASSAIC ne of Confect	NO ECO		ASBESTOS CON			-
Name of Facility Where Abatement is Tal	ing Place	(3)	\F	ACLITY INFORMA	TON	Type of Fac	Sity (4)	Par- + + + + + + + + + + + + + + + + + + +	dhaannaan	<del>01</del>
Street Address						School  Subcha  Other ()	(K-12) apter 8 (Other than i.e. private & comm	K-12) ercfaf f	de la company	ngs,
Cally (6) PASSAIC N	Silv.	(	- habitappine man	055		Square Feet	2			g.A
Name of Monitoring Firm Hired by Building	Comer 19		(STA)	ty Code (7) TEUSEONS Y)		···	(Prior if being demo	Rehed -	)	-
Stroit Address	Owner (o	)	AS	CM No.	INN	ATECH	Confractor (9)			
City, State, Zip Code	Mark Marijan Audya Panganigia ya dilagaia.				14.0	Address . OUX sie, Zip Code	814			· · · · · · · · · · · · · · · · · · ·
Project Manager for Monitoring Firm	- and Order to the Annal Appendix of		Telepi	none No.	(II)	Bridg	License	885 Ma	7	-
Start Date (10)	Schedule	nd Gom	pletto	n Date (11)	1-132	238x7	500 1008		-	majiriya jira
10  36  17 Occupancy Status During Abatement (Chec	11	120				ATECO	IN			
Facility Closed/Vacated During Entire F  Abatement Performed Outside of Norm  Other — Describe:	eriod of A	batem	ent		City, 1 test	Sox 81	a para para di sala di Siri da La Sala da Sala		and the state of the state of	
Scope of Work (Check All That Apply)	V		and the second second		<u>OID</u>	RNIGE	380 CIN	,57		polantenera
A 23 ef or ≥3 # □ ≥160 ef or ≥260 #	A Re	novati melilip	n n		P. C.	Mini-Enclosu Glovebao Pro				ire
Location of	No	ocation mally			atotion of			-	Abah	of experiences
Asbestos-Contahung Material (ACM) <u>IO BE ABATED</u> In Facility (13)	Malri Custos	Solely tenanci fiel Sta 12)	er .	Asbestoe Contai (i.e. thermal s	ining Mate	sulation, r	Amount (Specify SF or LF)	Removal	Repair	entaline de printe por
Bacret II	Yes	No	N/A	000			: 150.15			G
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by State Bridge N.D. 68	857	***********		17:73	H17-	City, State	suitle tit	1		
EARLOS ALYEIDA	M <sub>IS</sub>	SENT		Sylva	Party ()	Horely	2. 10	25	Confession	-

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

m.	E	C	E		$\mathbb{V}$	E	M
		<del>10</del> 7			2017		
	ASB	EST	os c	CON	ITRO	L&	

								NOV	2 00			Ш
Date of Notification (1)	N	ame of Buildi	ing Owne	r/Operator (2)				TYOV	0 21	///	L	2
1 0 / 3 0 / 1 7		Monica Ber	rdnik									
Agencies Notified Type Notificati	on St	reet Address	3				AS	BESTOS C	ONT	ROL	&	T
DEP Initial							AND DESCRIPTION OF THE PARTY OF		JING			
Amendr	nent C	ity, State, Zip	Code									
DOL Amendment #		Clifton, NJ	J 07102									
DOH Emergency justification)		ame of Conta	ict		- No. of the last		Teleph	one Number				
DCA Cancella	1.1	Monica Be	erdnik									
			FACII	LITY INFORM	ATION							
Name of facility where abatement is	s taking pla	ce (3)					Type of Facility	y (4) ool (K - 12)				
Residential							=	chapter 8 (O	ther th	an K-	12)	
Street Address							☑ Othe	r (Private/Co	omme		8	
								s./Homes, et		Die	la As	
	1.0	h. (C)					Square Feet 1,300 SF	# of Floor	s	60	lg. Ag	ge.
City (5)	Coun	ty (6)			100000000000000000000000000000000000000	nty Code (7) e use only)	Current Use		n dem		d)	
Wayne	Pass	saic			(0.0.		Vacant Buil		y ucin	0113110	u)	
Name of Monitoring Firm Hired by	Bldg. Owne	r (8)	T	ASCM No.		Name of Abatement	ontractor (9)					
N/A						Paragon Contract	ing, Inc.					
Street Address					=	Street Address						
						590 River Rd.		CANALES CONTRACTOR	entenno	80000AS	an Company of the	
City, State, Zip Code						City, State, Zip Code						
						Clifton, NJ 0701	4		Missele			
Project Manager for Monitoring Firm	i .	Phor	ne Numb	er		Telephone Number (973) 614-1600		License 00748	Numi	er		
						Name of OSHA Moni	or	007.10				
Scheduled Start Date (10)	Sched	. Completion	Date (11	)		Paragon Contrac						
10/31/2017	11/07	7/2017				Street Address						
Occupancy Status During Abatemen						590 River Rd.						
Facility closed/vacated during Abatement performed outside						City, State, Zip Code						
Describe:	or morritar					Clifton, NJ 0701	1					
Other-Describe:		Audie Park III amount		en e		Cinton, NJ 0701	4					
Scope of Work (check all that apply		-			M -	ull Containment w/neg	ativa progrum	Glove		d.		
	Renovatio					uli Containment whee Iini-enclosure		empted (")				dura
> <u>3</u> sf or > <u>3</u> lf	≥160 sf or		1 11		LJ "	imi-enciosure	IN INOII-EX	empted ( )	I R	D		T
Location of		n normally us enance/custo		1			Amoun	+	е	e	E n	E
asbestos-containing material to be	staff(12)			material		sbestos-containing	(Specif		m	p	c a	n c
abated in facility (13)	Yes	No	N/A		A. U. S.		LF)		v e	i	р	L
Interior			X	Drywall			3,000 SF		$\boxtimes$			
Basement			X	VAT & Ma			650 SF					14
Exterior			X	Door/Wind	The second second second	The second secon	400 LF			Ц	Ц	ᆜ
Exterior Attached Garage			Χ	Roofing/Fl	ashing		450 SF			Щ	닏	부
				FI-V-1-	(A/e = : =	TO	Landell			Ш	Ш	
Registered Waste Hauler Paragon Contracting, Inc.	NJD1 221	EP Hauler ID I 61	200	ubic Yards of 10 cyds	vvaste	Name of Registered GROWS/Tullyto						
City, State			isposal D			City, State		No. of the last of				
Clifton, NJ 07014			TBD			Tullstown, PA						
Completed by (Print or Type)	Title			Signature	7	1/2.		Date	00:-			0.03000 110 0
Goran Lazevski	Presiden	it		//	/			10/30/	2017			

Oct 30 2017 15:28 NJ /	Asbestos	Control (	509,633,0	664	page 1		F	<u></u>	E	7 П	) // F
16/ <del>38/2</del> 617 11:4	2 973	6149955		Pr	ARAGON			<u></u>	E	827	
TAIL (	1/11-	75		State	of N.)	-	117			-	
Paregon Jobs	141	17)	No (Purs	tification of Ash	estos Abatement 50-7 and 12:120-7)		册- 1	NOV 10 D		3 20	017
								BEST	-	75.17	DA
Date of Notification (1) [ 10 / 13 10 ] / 11 17		Name o	a Building (	Owner/Operator (2)			HO!			SING	
Agencies Notified   Type N	ptification	Moni	ca Berdni	k	1	1.	7	1/	7	-	
Z EPA	nkiai	Street A	ddress	1				1/_	S PENE	The state of	-
LI DEP IT A	undatione at	101				MAR	VERAM	370	100		
DOL Amendm		11	te, Zip Coo	*		Sound Hills Commen					-
DOH Smer	leuch (inché	Name of	on, NJ 071	02	,						
DCA Ustric	apen) Incellation	11		2		. 17	relephone Nu	mber	-		· ·
		Mon!	ca Barda	- Contract		!					
Name of facility when a			F/	CILITY INFORMAT	TON		1000	DEPLOYED NO.		-	ne Yaran
Name of facility where abaten	nant is laking	g pisca (3)				Type of I	Facility (4)	annual de la constantina	ALTO SECON	Alegania (	
Residential			_				School (K.	10000			
Street Address			and the second of the second	and the second of the second of the second			Subchapter	8 (Othe	e than	K-12	)
					DOM: NO.	L	Other (Priva Bidgs./Home	es, etc.	merci	al	
City (5)	76	conty (8)		T	cunty Code (7)	1 200 F		Floors		Bidg.	Age
Wayne	1.			10	State use only)	1,300 S	F 02 Use (Prior If I		60		end early
Name of Monitoring Firm Hirec	by Bidd. O	assaic	of the state of the state of			1/acant	Building	seluå a	emons	ned)	
N/A	,	wher (a)		ASCM No.	Name of Abatement		(9)	NICKTON STATE		Doleton.	
Strast Address	The state of the s		en e	, post war and the same of the	Paragon Contract Street Address	ing inc.					
					590 River Rd.			- The state of the			B PAPER CONT
City, State, Zip Code			THE RESERVE OF THE PARTY.	51-12-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	City, State, Zip Code					Roman	Note the latest the la
Project Manager for Monitoring	i dela				Clifton, NJ 0701	4					
- Bar in Melatain H	4111	15	hone Num	ber	Telephone Number	Marketta	Licer	sa Nun	rber		THE REAL PROPERTY.
Scheduled Start Date (10)	ISon	ed. Comple	In Paris V	wind contract of the section of the	(973) 614-1600 Name of OSHA Monit	SAN DEVINE	007	48	The State	-	
10/31/2017	1		POR LIZZE (1	1)	Paragon Contract						-
Occupancy Status During Abater	Tani (Chark	07/2017	STATE STATE OF THE		Sireet Address	Marie Marie	er en la communication de	) 5 p (			ADDEDDAY.
Cacmity closed/vacated sur	THE SHIPS AS	siend at at a	ement.		590 River Rd.						
Describe;	ide of norms	al facility hou	173-		City, State, Zip Code			had washing		area rea	
Other-Describe:					Clifton, NJ 07014						
Scope of Work (check all that as	RANGE OF THE PARTY				Department of the Control of the Con	CHARGE PROPERTY.				ALIENSANE.	- Marie Mari
Π.	Ranovat	27.11.6.0		×	Full Containment winegs	tive pressu	re 🗌 Glov	mhan n	racad	I FFR	
STATE OF THE PARTY	2 ≥150 sf a				Mini-encideure		Exempled ( "				atube
Location of asbestos-containing	by main	on normally	used solely locial	1		-		K	R	E	Contract of the last
malerial to be abated in facility (13)	staff(12)	7	-	Description of material (ACM)	sbestos-containing	Amo	unt cify SF or	9	8 0	n	E
	Yes	Na	N/A			LF)	wy ur ui	0 4	F 89	a	D
Interior			X	Drywali	General Constitution of the Constitution of th	12 000 0	Č.	e	1	Þ	
Basement Exterior				VAT & Mastic		3 000 SI 650 SI	THE RESERVE OF THE PARTY OF THE	NA.	4		
Exterior Attached Garage				Door/Window C		400 L	STORES IN COLUMN TO SERVE		H		
				Roofing/Flashing		450 SI	COCCUPATION AND DESCRIPTION OF THE PERSON OF		Ħ	+	1
Registered Waste Hauler	מנא	EP Hauter II		SIGNA LE COLE L CAS	2000000	SACTOR INSCRIPANCES			d	<b>=</b>	
Paragon Contracting, Inc.	221	61	41	cyds	GROWS/Tullytown	ndfil		-			-
Clifton, NJ 07014	soev.	R	Disposal De	ite	City, State	Malana malanana		CONTRACTOR OF THE PARTY OF THE	- Constant		-
Completed by (Print or Type)	Title		TBD	Sanature	Tullytown, PA	distance of the same	Water Control of the				
Goran Lazevski	President					14	Data			র ১৯০০ বর্ণ	
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Date of Notification (1)   1   10       2   14     1   17     Agencies Notified   Type Notificat   EPA   Initial   DEP   Amended	ion P	ort Auti	nority of ess Trade Co	NY & NJ emer, 150 Gre		ch Street, 19th l	loor.	WARE	ASBE	STC	ENS	ONTI ING	RCL &
DOL Amendment#:			Zip Code					5					
DOH (including	Nan	New Yo	rk, NY 1	0007	-	State Spinish		Talank	ne Numb			-	A) .
Justification)								t minbro	Sus Minus	-			
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	- 100		FAC	LITY INFORM	ATION	4							625
Port Authority of NY & NJ Street Address		e (3)	Territoria de la constanta de	<del>.</del>	10 to 100 and	——————————————————————————————————————	=   T	Subt	(4) col (K - 12 chepter 8 ( r (Private/ s/Hornes,	Other		(-12)	
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Name of Monitoring Firm Hired by	sidg. Owner (	8)		ASCM No.		Name of Abstan	ent Con	trictor (9)		The Section	des estates	Line State of the last	
Port Authority of NY & NJ	to a place of a link of the	ordet		And the second	THE REAL PROPERTY.	D&S Restore	tion, In	¢			Marine S.		
Street Address				Contract of the Contract of th		Street Address							
241 Eric Street City, State, Zip Code			Society - Feb		-	20 Californi City, State, Zip C		tion of the same o	A Company	dening	corp.		ADDRESS OF THE PARTY.
Jersey City, NJ 07310								(3)					
Project Manager for Munitoring Firm		[Ph	one Numb		-	Paterson, N Telephone Numb	and district the last of the l		License	Miles	- AAT		
	£			177. U		973-345-8			U. Distriction	00159			
Uday Mehta Start Date (10)	School C		1-595-48 in Date (1			Name of OSHA	distribution of the		Shirt and the same of the same	No. of Concession, Name of Street, or other party of the Concession, Name of Street, or other pa			
			n Come (1	17		D& S Resto	ration,	Iric.		William Co.			
10/25/17 Cesupancy Status During Abstemen	1/31/18		on a distribution		-	Street Address			20000	Theory and the			
Facility closed/vecated during a Abstement performed outside Describe: NORMAL R	entire period of normal fac	of abates	ment. a-		_	20 California City, State, Zip C Paterson, N.	ode	Settle en					
Scope of Work (check all that apply		7 600						Cintainment	w/nezative	e bres	EU Ch		_
>3 af or >3 ff \	Renovation						Marine .	-d nclosura			- 3		
≥ 160 af or ≥250 H	Cempiltion							e tag proced -L xampted (*		en e ha			
Location of asbestoe-containing material (sem) to be	is location in by maintens staff(12)	omelly u nos/cust	ised solely odlal	1	n of a	sbeates-containin		Amount (Specify		KeEo	Rep	Enc	Eco
absted in facility (13)	Yes	No	N/A					LF)		٧	1	p	L
George Washington Bridge		X		transite cond	luit d	uct bank		3 )0 lf	-	12	1	h	
Exterior Grade Roadway					o postane			Za Barrier Warren	o to have been been been been been been been be	뒴	古	H	
77/79 Existing Helix to								SEE DESCRIPTION OF THE PERSON	S COMPANY CO.	10	厅		T
Palisade Parkway		and the second second		T.							口		
		Carlotte September											
Registered Waste Hauter Two Brothers Contracting	NJUEP 28191	Hauler II		ubic Yarda of W	(e site	Orand Centre							
City, State		ALCOHOLD TO THE	Disposal D	The state of the s	-	City, State		-					
Totowa, NJ	10000000		various	The second secon		Pen Argyl, P	A	This course					
Completed by (Print or Type)  Bogdan Joldzic	Title President			Signature		and the same of th			Dale	/ - F			
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TO A TED								L	ri:	IIIL FC
CKIIDI	NO		State of New Jerse TION OF ASBESTOS ant to NJAC 8:60 an	ABATE		DE	G [	<b>E</b> [	$\mathbb{V}$	E
Date of Notification (1) 10/26/2017		1	ne of Building Owner/	100	r (2)		07	- 3	2017	
Agencies Notified Type Notification	n	Stre	et Address			+				-
EPA Initial Amended Amendmer	nt#		, State, Zip Code DRTH ARLINGTO	ON NI		ASBE	STOS	S CO	NTRO NG	L&
□ Emergency justification     □ DCA     □ Cancellation	1)	Nam	ne of Contact HN WOJTAL	J14 140.		Telephone Nu	mber			
		F	ACILITY INFORMAT	ION						
Name of Facility Where Abatement is Takin PRIVATE	ing Place (3)				Type of Facility (4	4)				
Street Address			-		School (K-1. Subchapter Other (i.e. p	2) 8 (Other than K-1 rivate & commerc	2) ial buil	dings	, home	∋s,
City (5) NORTH ARLINGTON NJ.					Square Fee 2,500 SF.	# of Floors	E	Bldg. A		
County (6)			nty Code (7) TE USE ONLY)		Current Use (Pric	or if being demolis A	hed)			
Name of Monitoring Firm Hired by Building  A  A  A  A	Owner (8)	AS	SCM No.	3	of Abatemen Con RTH EAST ENV		L LL(	Э.		
Street Address					Address 5 51 ST,					
City, State, Zip Code					State, Zip Cod : RTH BERG EN I	NJ. 07047				
Project Manager for Monitoring Firm		Tele	phone No.		none No. 776- 0642	License N 01300	lo.			
Start Date (10)	Scheduled	Completi	ion Date (11)	Name	of OSHA Monitor					_
11/04/2017	11/04/20			ENV	IRO PROBE IN	IC.				
Occupancy Status During Abatement (Che	ck Only One)				Address					
Facility Closed/Vacated During Entire Abatement Performed Outside of Non					LIBERTY S.T.					
Other – Describe:					UCHEN N.J.					
Scope of Work (Check All That Apply)  ≥3 sf or ≥3 if ≥160 sf or ≥260 if	1000000	novation nolition		×××	Mini-Enclosure Glovebag Proc				re	
Location of	Nor	cation mally	De	scription	of				ement /pe	
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Mainte Custod	Solely by enance/ lial Staff? 12)	Asbestos Cont (i.e. thermal surfa	taining M	laterial (ACM) s insulation, T, or	Amount (Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure
		No N/	Α				<u> </u>		ate	'e
BASEMENT		X	PIPE II	NSULA	TION	92 LF	Х			
			- Comments							-
Name of Registered Waste Hauler		MIDE	Waste Cubic	Varde	Nom. of F	Registered Landfill				

**BRONX NY** WAYNERBURG, OHIO TBD Completed by Title Signature CARLOS ESQUIVEL SAFETY MANAGER

19951

Hauler ID No.

Cubic Yards

Disposal Date

of Waste

TBD

Name of Registered Landfill

City, State

MINERVA ENTERPRISE INC.

Date

10/26/2017

City, State

TRI STATE ASSOCC

THILL LOHILL

PATD														Prin	nt For
CK 1040	N		CATION	ate of New OF ASBE to NJAC 8	STOS A						E C	[		$\mathbb{V}$	E
Date of Notification (1) 10/30/2017		- 1		Building C Broggs		perator	(2)			Ш	NOV	-	3 7	2017	
Agencies Notified Type Notification  EPA X Initial			Street Ad	ddress					-	AS	BEST		CON		L&
DEP Amended Amendment		_		te, Zip Coo d NJ 070					-	-	THE TOTAL PRINT OF A		YOHY		
Emergency ( justification)  DCA  Cancellation	including		Name of Lois	Contact					Tel	ephone	Numb	er			
Name of Facility Where Abatement is Taking	g Place (3	)	FACII	LITY INFO	RMATIC	ON	Туре	of Facility	(4)						
Lois's Residence Street Address							×	School (K- Subcharte Other (i.e.	r 8 (Oth			buildi	ngs,	home	s,
City (5) Garfield								etc.) re Feet	# 0	f Floors	3	Blo	dg. Aq	ge	
County (6) Bergen			County (	Code (7) USE ONLY)		_	Curre	nt Use (Pr	ior if be	ing dem	nolished	d)			
Name of Monitoring Firm Hired by Building (	Owner (8)		ASCN	No.		MKD	Prop	tement Co erty Mai			_C				
Street Address							/an F	Riper Ave	)						
City, State, Zip Code						Clifto	n, NJ	ip Code 07011							
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph 201-8				Licen 0133	ise No. 36				
Start Date (10) 11/11/2017	11/30/2	2017	npletion I	Date (11)				HA Monitor							
Occupancy Status During Abatement (Chec  Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe:	Period of A	Abaten	nent s			Street City, S		ip Code							
Scope of Work (Check All That Apply)    ≥3 sf or ≥3 lf   ≥160 sf or ≥260 lf		Renova Demolii				×	Min	Il Containn ni-Enclosur ovebag Pro n-Exempte	re ocedure					e	
Location of	1	Locat	lly		Des	cription	of					-1	Abate Ty	ment pe	
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Ma	d Sole intena todial ( (12)	nce/		tos Conta thermal surfac other m	systems ing, VA	insula T, or		(	Amount Specify F or LF		Removal	Repair	Encapsulate	Enclosure
Basement	Yes	No X	N/A		Pipe	insula	tion			176 lf		Х		е	
Daschient					1 100										
Name of Registered Waste Hauler TBD	1	F	NJDEP W Hauler ID		Cubic of Was			Name o	10 L1 10 L1 10 TA L 10 CO						
City, State			1		Dispos	al Date		City, Sta Melvill		11747	7				
Completed by	Title Proje	ect Ma	anager		S	ignature	110	De-			Date 10/		017		



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

Check No. 4534

Date of Matification (4.)			( )		Nama	of Duildie	a Owner/Operator	(0)		IM E	C		1	1	E
Date of Notification (1)							ng Owner/Operator		-41-	IIUI				_	
October 27, 2017	T N	- Nf N		-		Address	NJ, Newark L	iberty intern	atio	narAirpo	-				_
Agency Notified	Type N	otification			0.00 MARKE		-				NOV	- 3	20	17	
□ EPA	☑ Initia	** co m		-		ling 12								21/3/11	_
DOL No equired our State Pleg 10-2004	☐ Ame	nded endment #			- 3	tate, Zip				ASI	BESTOS	2.00	AITE	001	_
And a second sec		rgency (including		-		of Contac	07114		T =	Hephone Nu	LICE	NSI	VG	{UL	. &
☑ DOH		fication)					202		16	<del>arcpriorie in</del> t	H110 8 free	om meino	SOTOMA	illia greene	Carmen
□ DCA	□ Can	cellation				h Cam			_[						_
					FACI	LITY INF	ORMATION								
Name of Facility Where Al								Type of Fac lity	/ (4)						
Newark Liberty Inte	ernatio	onal Airport -	WC	No.	03			☐ School (K-1							
Street Address								☐ Subchap er ☑ Other (i.ε. p				inac			
South Bridge N39								homes, etc.		e & commerc	iai bullu	iliys,			
City (5)								Square Fee:	_	of Floors	Bldg	g. Age			
Newark								4,158	1		50	+/-			
County (6)					County	Code (7	) (STATE USE	Current Use (F	rori	f being demo	olished)				$\neg$
Essex					ONLY)			Bridge							
Name of Monitoring Firm I	Hired by	Building Owner		ASCM	No.		Name of Abaten	nent Contractor (	9)						
A of NY & NJ				N/A			B&N&K Res	toration Co.	. Inc	·.					
Street Address							Street Address		,				0		$\dashv$
241 Erie Street, Roo	om 23	6					223 Randol	oh Avenue							
City, State, Zip Code	0111 20						City, State, Zip (								$\dashv$
Jersey City, NJ 073	10						Clifton, NJ (								
Project Manager for Monite		rm	Te	lephor	ne No.		Telephone No.		Li	cense No.					-
Ralph Campione					4-689	8	973-478-468	1	0	0120					
Start Date (10)		Scheduled Com					Name of OSHA	-	1.						$\dashv$
November 08, 2017		December 3			500 X 11 10 X			vironmental	Serv	ices. L.L	.C.				
Occupancy Status During			100				Street Address			,					
							464 Valley E	Brook Avenu	е						
□ Facility Closed/Vacated     □ Abatement Performed Closed	During	Entire Period of A	Abate	ement			City, State, Zip (								
☐ Other - Describe:	Zutoruo						1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	NJ 07071-19	98						
Scope of Work (Check all	that app	oly)				-									$\neg$
<b>⊠</b> ≥ 3 sf or ≥ 3 lf					☐ Rend	ovation		Containment viti Enclosure	n Neg	ative Pressu	ıre				
□ ≥ 160 sf or ≥ 260 lf					⊠ Dem		☐ Glov	ebag Procedure			190				
							⊠ Non-	Exempted (*) an	d No	n-Friable Pro	ocedure	Ι.Δ	bate	mar	
				Locati	-							^	Typ		IL
Location	of			lormall d Solel	,		Description	of							
Asbestos-Containing		al (ACM)		ntena			stos Containing M			Amount	12	77		Ē	ш
TO BE ABA			С	ustodi Staff?	200C	(i.e	., thermal systems surfacing, VA			(Specify SF or LF		lem	Rep	caps	nclo
(13)	,			(12)			other miscellane					Removal	Repair	Encapsulate	Enclosure
		-		· · · · ·	1							=		te	O
			'es	No	N/A						00.1			-	-
Bridge Parapet Wal	1				X	Caull	king				66 In 1	πX		_	-
Name of Registered Waste	e Haule	r		DEP W No.	/aste H	auler	Cubic Yards of Waste	Name of Regis	stere	d Landfill					
Jimmy Byrne				NO. 9551			waste < 5	Minerva E	nter	prises, Ir	ic.				
City, State							Disposal Date/	City, State							-
1199 Randall Avenu	ie Br	onx. NY 1047	4				11/08/2017 /	Waynesbu	ıra	ОН					
Completed by	.0, 21	Title					12/31/2017/ Signature/	/ // //	31		Date				$\dashv$
Aleksandar Kuridza		Project Mar	age	er			IMM	1		_	10/2	7/20	17		

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N		NOV	_	3	2017			1

Date of Notification (1)				Name o	of Building	Owner/	Operator	(2)	-	+	7-				
10-19-2017				Josh	Babbel						ASBE	STOS	s co	NTR	OL &
Agencies Notified	Type Notification			Street A	Address							LICE	NSI	VG.	
× EPA × DEP × DOL	Initial Amended Amendmen				ate, Zip Co Brunswid		08816			***************************************					
▼ DOH DCA	Emergency justification Cancellation	i -			of Contact Babbel					Tel	ephone Nu	mher.	_		
				FAC	ILITY INFO	ORMAT	ION								
Name of Facility Where A	Abatement is Takir	ng Place (3	)					Тур	e of Facility (4						
Street Address								×	School (K-12 Subchap er 8 Other (i.e. pr etc.)	(Oth			dings	, hom	es,
City (5) East Brunswick NJ	08816							Squ N/A	are Feet	# o	f Floors A		Bldg. /	\ge	
County (6) Middlesex					Code (7) USE ONLY	,			rent Use (Prior		ng demolisl	ned)			
Name of Monitoring Firm Standard Environm		Owner (8)		ASC	M No.		1		atement Cont		(9)				
Street Address	entai						Street		ontracting L	LC					
2108 Fulton Ave, S	uite 2A						POE								1
City, State, Zip Code Brooklyn NY 11233									Zip Code d Park NJ (	1742	<u></u>				
Project Manager for Mon			Т	Telepho	ne No.		Teleph			31-72	License N	0.			
Kayode Adefisoye									6298		01266				
Start Date (10) 10-20-2017		Schedule 20-25-2			Date (11)		THE PROPERTY OF		SHA Monitor ontracting L	LC					
Occupancy Status During							Street PO E								
Facility Closed/Vaca     Abatement Performer	ited During Entire ad Outside of Norr	Period of A nal Facility	bater Hour	ment s					734 Zip Code			-			
Other – Describe: _									D pARK nj	0742	24				
Scope of Work (Check Al ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	I That Apply)	ESTRACE	enova	FR 1147 F. B. 176			×	M	ull Contain ner ini-Enclosure lovebag Proce	dure	•				
		T			1	-		1 No	on-Exemp ed	(*) and	Non-Friab	Te Pro	000000000000	ement	
Location	of	N	Locat orma	lly		De	scription	of						/ре	
Asbestos-Containing <u>TO BE ABA</u> In Facilii (13)	TED	Mair	ntena	ely by ance/ Staff?		tos Cont thermal surfa		fateria s insu T, or		(S	mount specify or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A										Ф	
Baseme	ent			X	F	PIPE II	NSULA	TIO	N	1	5 LF	X			
Name of Registered Was	te Hauler		IN	JDEP W	aste	Cubic	Yards		Name of R	egiste	red Landfill	1			
Amax Contracing LL				Hauler ID 1036184		of Was			Fairless	- 3					
City, State Woodland Park NJ 0	7424					Dispos	sal Date 9-2017	7	City, State	lo DA					
Completed by	1747	Title					ignature	11	Morrisvill	E PA	Da	te			$\dashv$
Tome Maslarkov		Projec	et Ma	anager				0	2-		2	)-19-	2017		



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CK 635			FICATIO Pursuan	tate of New J N OF ASBES t to NJAC 8:6	TOS ABATE 0 and 12:12	20)	IT			)y -			Ent Fo
Date of Notification (1) 10-25-2017				of Building Ow Winkelste	70.	r (2)							
Agencies Notified Type Notifica	ition			Address	111				ASBES	STOS	CON	TRO	- &
X EPA X Initial										LICE	ISIN	G	
➤ DEP	VITTI AND	İ		ate, Zip Code			-						
Emerge	nent # ncy (including	_	The second second	away NJ 0	7866								
DOH justifica	tion)			of Contact Winkelste	in			Tel	lephone	Numhe	r		
BOA Cancen	auon			ILITY INFOR									
Name of Facility Where Abatement is 1	aking Place (	(3)		ALTT IN OIL	WIATION.	Ту	oe of Facil ty	(4)					
Private Dwelling							School (K-						1
Street Address						×	Subchapte Other (i. s.	er 8 (Oth	er than k	(-12) ercial b	uildin	re hor	mes
City (5)							etc.)						1100,
Rockaway NJ 07866						N/	uare Feet A	# 0 N/	f Floors A		N/A	. Age	
County (6)			County	Code (7)			rrent Use (Pi			olished)			
Morris			(STATE	USE ONLY) _		10/200	ivate Dwe		· · · · · · · · · · · · · · · · · · ·	•			
Name of Monitoring Firm Hired by Build	ling Owner (8	)	ASCI	M No.			batement Co		(9)				
Standard Environmental Street Address							ontractir g	LLC					
2108 Fulton Ave, Suite 2A					Street		ress ( 734						
City, State, Zip Code							Zip Code						
Brooklyn NY 11233					Woo	odlar	nd Park N.	J 0742	4				
Project Manager for Monitoring Firm			Telepho		Telepi				License				
Kayode Adefisoye Start Date (10)	Schodul	lod Cor		41-7673			-6298		01266	<u> </u>			
11-09-2017	11-19-			Date (11)			SHA Moni o Ontracting						
Occupancy Status During Abatement (C	Check Only O	ne)	-		Street								
Facility Closed/Vacated During En	tire Period of	Abater	ment		PO	вох	734						
Abatement Performed Outside of I Other – Describe:	Normal Facility	y Hour	S		77/87/2		Zip Code						
Scope of Work (Check All That Apply)					VVoc	odlar	D pARK	nj 0/42	24				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demoli			×	N	ull Containm fini-Enclos un flovebag Fro lon-Exempte	e cedure				ure	
	ls	Locat	ion								Ab	ateme	nt
Location of	1100	Normal ed Sole			Description			10,00		-		Туре	$\overline{}$
Asbestos-Containing Material (ACM TO BE ABATED	Ma	intena todial	nce/		Containing Normal systems			1000	mount Specify	7	, ,	E	四
In Facility (13)	Cus	(12)			urfacing, VA ner miscellar			SF	or LF)	Kemova	Kepair	Encapsulate	Enclosure
* **	Yes	No	N/A		ioi imooowai	10000	,			à	.   =	late	ure
Basement	1.00		X		VAT			80	00 SF	X	+	+	+
						-					+	+	++
											+	+	-
			-				-				+	-	-
Name of Registered Waste Hauler		N	JDEP W	/aste   Cu	ubic Yards		Name of	Registe	red Land	Ifill			1
Amax Contracing LLC		1	lauler ID 036184	1137.753	Waste CY		Fairles			2000			
City, State				Di	sposal Date		City, S a						
Woodland Park NJ 07424 Completed by	Title			11	I-16-2017	1	Morris	ville PA		-			
Tome Maslarkov		ect Ma	anager		Signature	11	len		1 1	Date 10-25	-201	7	
			30.		1/	6		- 2				6.6%	

(n) (	X_		NOT			BESTO	sey S'ABATEMEN and 12:120)	NT			E	C	<b>E</b> [	$\mathbb{V}$
ate of Notification (1) 9/31/2017				Name	e of Buildir tclair Stat	ng Owner e Unive	r/Operator (2) rsity				chec	k#150	1442	201
gencies Notified	Type Notification	n			t Address					1111	14	U¥		201
EPA					rmal Ave					_	ASBE	CTO	0.00	AITO
DEP DOL	☐ Amended Amendmer	nt#		City, Mont	State, Zip clair, NJ	Code 07043					Mode		ENSI	
DOH IL DCA	Emergency (justification)	(including			of Contac				Tel	ephone A	lumber			
Hickory	L Cancellatio	11			CILITY IN		TION					-		
ame of Facility Where ontclair State Univ	e Abatement is Taki ersity, College Ha	ng Place	(3)		IOILITT III	TONINA	Type of Fa	acility (4)			•			
reet Address Normal Ave	1						☐ Subcl	iool*(K-12) hapter 8 (C (i.e. privat	Other than I	K-12) ercial buil	ldings,	home	s, etc.	)
ty (5) ontclair	Mental and the second s						Square Fe 30,000	eet	# of	Floors	T	Bldg. 50+	Age	
Sunty (6)				Count (STAT	y Code (7) E USE ONL	Y)	Current Us	se (Prior if Un	being dem	olished)				
ame of Monitoring Fir etail Associates, In	m Hired by Building C	Owner (8	3)	ASO	CM No.		Name of Al Lilich Corp	batement ( poration	Contractor	(9)				
reet Address 0 Grand Ave						-	Street Addr 606 McBri				-			-
ty, State, Zip Code iglewood, NJ 0763	1					-	City, State, Woodland	Zip Code I Park, Ne	w Jersey			***************		
oject Manager for Mo adine Bello	nitoring Firm				none No 69-6078		Telephone 973-225-8			License 01104	No.	*********		1040
art Date (10) /10/17		01/10/2	2018	ompletio	n Date (11	)	Name of OS Iris Enviro	SHA Moniton nmental L	or _aborator	ies, LLC			114 1 14 1	
cupancy Status Durin	ng Abatement (Ched	ck Only O	ne)				Street Addr							
Abatement Perform Other – Describe:	ned Outside of Norn	Period of nal Facilit	Abate y Hou	ement rs			2333 Rout City, State, Union, N	Zip Code	st				<del></del>	
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Date of Notification (1) 10/28/2017				Building O s Institut				,		NOV	-3	20	17	
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➤ DOH Emerg	gency (including cation) ellation		me of (	Contact					Tele	ephone Nu	ımber			
			FACIL	ITY INFO	RMATIC	N			00			27		
Name of Facility Where Abatement is School	Taking Place (3)						Тур	e of Facili y ( School (<-1						
Street Address 1 Castle Point On Hudson								Subcharter Other (i.e. p etc.)				dings,	home	s,
City (5) Hoboken	52		-				Squ N/A	ıare Feet	# of N/A	Floors		ldg. A	ge	
County (6) Hudson				ode (7) SE ONLY)				rent Use ( <sup>2</sup> ri hool	or if bei	ng demolis	shed)			
Name of Monitoring Firm Hired by Bu TTI Environmental	ilding Owner (8)	1.35	ASCM 0003	No.				patement Cor atement, Ir		(9)				
Street Address 1253 North Church Street						Street 11 R		ress ngren Ave	nue					
City, State, Zip Code Moorestown, NJ 08057								Zip Code NJ 07512						
Project Manager for Monitoring Firm Jim Guilardi			ephon 9-31	e No. 4-1683		Teleph 973-		No. -8685		License 01311	No.			
Start Date (10) 11/11/2017	Scheduled ( 11/12/201		etion D	ate (11)				SHA Monitor atement Ir	ıc.					
Occupancy Status During Abatement	(Check Only One)					Street								
Facility Closed/Vacated During Abatement Performed Outside of Other – Describe: Occupied			t			City, S	State,	Zip Code NJ 075 2	nue					
Scope of Work (Check All That Apply	7)													
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>	× Ren	ovation nolition				X	1	Full Containm Mini-Enclosur Glovebag Pro	e cedure	•				
						-	1	Non-Exem ate	d (*) an	d Non-Fria	able Pro			
		cation											ement rpe	
Location of Asbestos-Containing Material (Adams	CM) Used S Mainte Custod	enance	<i>i</i>		os Cont hermal	system cing, VA	Mater is ins AT, or	r	(5	mount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
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4th Floor		^		5	Jiay U	ii iii eb	,1001	9		3 01	A	-		
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Name of Registered Waste Hauler D&S Abatement, Inc.		100000000000000000000000000000000000000	EP Wiler ID 96	TO STATE OF THE ST	Cubic of Was TBD			0.0000000000000000000000000000000000000		ered Land gement				
City, State Totowa, NJ					Dispos TBD	al Date	9	City, Sta Morris		PA				
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Date of Notification (1) 10/28/2017		18950		Building Ov Sanagusti		erator	(2)				UV	3 2	017	-
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DCA Cancellation				anagust		N								
Name of Facility Where Abatement is Taking House	Place (3)							Facilit / (4) chool (F12 ubchap er 8	) 3 (Othe	er than K-1	12)			
Street Address							Square	ther (i.€. pri c.)	ivate 8	Floors	cial build	ings, l		5,
City (5) Union							N/A		N/A	١.	N	/A		
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Name of Monitoring Firm Hired by Building O N/A	wner (8)		ASCM	No.		D&S	Abate	ment Cont ment, Inc		(9)				
Street Address						11 R		ren Aven	ue					
City, State, Zip Code						Toto		07512						
Project Manager for Monitoring Firm			Telephon	ne No.		973-	none No. 345-86	885		License 01311	No.			
	Schedule		pletion D	Date (11)		D&S	Abate	A Moni or ment, Inc	<b>3</b> .					
Occupancy Status During Abatement (Check						7.5	Address	s ren Aven	ue					
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norma Other – Describe: Occupied	eriod of A al Facility	Hours	ent		_	City, S	State, Zip							
Scope of Work (Check All That Apply)							7					W-000		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	lament .	Renovat Demoliti				2	Mini Glov	Containme -Enclosure vebag Proc -Exempted	edure				e	
	100	Locati	26511									Abate	ement	
Location of Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Use Ma	Normall ed Sole iintenar todial S (12)	ly by nce/ staff?	Asbesto (i.e. t	os Conta thermal surfac	system	Material ns insula	(ACM) tion,	(	Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
December 1	Yes	No X	N/A		nine	insula	ation			30 LF	X			
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Name of Registered Waste Hauler D&S Abatement, Inc.		H	JDEP W lauler ID 0996	20000000	Cubic of Was TBD	Yards ste		Waste	Mana	ered Land gement				
City, State Totowa, NJ					Dispos TBD	sal Dat	e /// .	City, Stat Mor isv		PA				
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Date of Notification (1) 10/28/17				Name o	f Building ( Evans	Owner/C	Operator	(2)	Th.	EGE		$\overline{\mathbb{V}}$	E	ī	
Agencies Notified  EPA DEP DOL	Type Notification    Initial   Amended   Amendment				ddress ate, Zip Co , NJ 070				M	NOV ·	- 3 2	01	7		
× DOH DCA	<ul><li>Emergency justification)</li><li>Cancellation</li></ul>			Name o	f Contact					asbesto	SICON	TR(	OL &	B-motes	
Name of Facility Where A home Street Address  City (5) Union County (6) Union Name of Monitoring Firm  Street Address  City, State, Zip Code  Project Manager for Monitoring Start Date (10) 10/30/17	batement is Takin	g Place (3)		County (STATE) ASCM	ne No.		Name ABS Street PO E City, S Glen Teleph 973-	School Sulvers Square I 2100 Current single of Abaten Enviror Address 30x 483	Use (Prior lamily hor ent Contramental State of	# of Floors 2 if being demome actor (9) Services,	nercial k	B 7	ldg. A		es.
Occupancy Status During  Facility Closed/Vaca Abatement Performe Other Describe: b  Scope of Work (Check All  ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	ted During Entire F d Outside of Norm asement	Period of At al Facility I	oaten	tion				Mini-E		t with Negati	ive Pres	ssur	e		
		10000000	.ocati					☑ Non-E	empted (	*) and Non-F	Friable f		edure Abate Ty	men	t
Location Asbestos-Containing N TO BE ABA In Facilit (13)	Material (ACM) TED	Used Main Custo	Sole itenar	ly by nce/		os Cont thermal surfac		Material (A s insulation T, or		Amount (Specify SF or LF)		Removal	Repair	Encapsulate	Enclosure
baseme	nt			Х		pipe	insula	tion		60 LF	×				
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City, State Freehold, NJ		Treat				TBD	al Date	N	ity, State Vorrisville	e, PA	**				
Completed by A. Scott Higgins		Presid	lent			S	ignature	1			Date 10/2	8/1	7		

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Date of Notification (1) 10/30/17					boro 79, L			-1								
Agencies Notified	Type Notification		-	Street Ad						E (	E			E	7	
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▼ DOL	Emergency (			Name of		003	,	19	<del>-  U - U </del> -	Tele	V - 3	unfber	7-	-11	1)	
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Name of Facility Where A	Abatement is Taking	g Place (3)		I AOIL				Type of	Facility (4	) [	ICENS	NG		<u> </u>		
El at Marlboro 79								Sc	hool (K-12	2)				MARIE DE LO	CHARMAN	
Street Address									ibchapter her (i.e. pi	8 (Othe	r than K-	12) cial bu	ildir	nas h	ome	s.
103 South Main Str	eet							et	c.)							
City (5)					ALW:			Square	Feet	A STORY	Floors		Bld 77	g, Ag	le	
Marlboro							- 1	2100	L (Dale	1 1/			11			
County (6)				County C	Code (7) ISE ONLY)				Use (Prio			snea)				
Monmouth		- /0\			20 000			Warner Co. Co.	ment Con							
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCM	NO.				nmental			C				
							Street A									
Street Address							РО В	ox 48	3, 4 E G	ate Dr	ive					
City, State, Zip Code							City, Sta	ate, Zip	Code							
Gity, Gtate, Zip Gode							Glenv	vood,	NJ 074	18						
Project Manager for Mon	itoring Firm			Telephor	ne No.		Telepho				License	No.				
The Paragraph Court of the Cour							973-7				703					_
Start Date (10)		Schedule		pletion [	Date (11)		Name o	of OSH	A Monitor							
10/31/17		11/20/1					<u> </u>									
Occupancy Status Durin	g Abatement (Ched	ck Only One	э)				Street A	Address	5							
Facility Closed/Vac	ated During Entire	Period of A	batem	ient			City, St	ata Zir	Code				4.00.00			
Abatement Perform Other – Describe:	ned Outside of Norr	nai Facility	nouis			-0	City, St	ato, zip	Codo							
Scope of Work (Check A						-	J									
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Location Asbestos-Containing			d Sole			s Co	ntaining M	aterial			mount				Eu	[T]
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(13)			(12)				r miscellan				1915/26 (M)	2	200	air	Encapsulate	Enclosure
		Yes	No	N/A											te	1
Interi	or			Х		V	vall pane	ls		1:	20 LF	X				
				Х			wall tiles	3			182 SF	×			_	-
				Х		du	ict cover	ing		-	2 SF	X				
,				Х		0.5 0.5	e insula	tion		400	5 LF	X				
Name of Registered Wa	iste Hauler		0.0	NJDEP W Hauler ID		E-1010	ic Yards /aste		Name of	1072						
Freehold Cartage				5939		ТВІ	D		Weste		ks Land	dfill				-
City. State							oosal Date		City, Sta		۸					
Freehold, NJ						TBI		2	Birdsb	010, P	A	Date				
Completed by		Title	doot				Signature		1	_		10/3	0/1	7		
A. Scott Higgins		Pres	iuent					11		_		. 0/ 0	0,			

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gencies Notified	Type Notification		Stre 15	et Addre E Uwo	sss chlan Ave	enue, Sui	te 404		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	3 20	7	#
EPA DEP DOL	Initial Amended Amendment #		City	State, ton, P	Zip Code A 19341				I NUV -	. 3 50.	1/	lancas:
DOL DOH	Emergency (in justification)	cluding		ne of Co	ntact				Leichtone van	DUILON		
DCA	Cancellation				Y INFORM	ATION	T-2	(E - 111h (4)	CONTRACTOR PROPERTY.		N. Horaldon	
ame of Facility Where McDonald's treet Address	Abatement is Taking	Place (3)					SSS	the (i.e. priva	Other than K-12 ste & commerci	2) al buildin	gs, ho	mes,
3048 Harding Hig	hway						е	tc.) e Feet	# of Floors	0.000	. Age	
ity (5) Mays Landing							4,200		1	65		
County (6)			Co (ST	unty Co	de (7) E ONLY) _		fast	food restau		ned)		
Atlantic Name of Monitoring Fi	rm Hired by Building C	owner (8)	1	ASCM N	No.	Nam AB	e of Abat S Envir	ement Contra conmental S	ctor (9) Services, LL(	0		
Street Address			-			PC		83, 4 E Gat	e Drive			
City, State, Zip Code							State, Z enwood	ip Code I, NJ 07418				
Project Manager for N	Monitoring Firm	1	Te	elephone	ę No.		phone N 3-764-2		License 703	No.		
Start Date (10) 11/2/17		Scheduled		letion D	ate (11)	Nar	ne of OS	HA Monitor				
Occupancy Status Du	uring Abatement (Chec	k Only One	e)			Stre	et Addre	SS				
Ed = - III ClasedA	Vacated During Entire ormed Outside of Norr	Period of A	bateme	nt		City	/, State, Z	Zip Code				
Scope of Work (Chec ≥3 sf or ≥3 lf ≥160 sf or ≥260	ck All That Apply)		enovati emolitic				M	ini-Enclosure	nt with Negative edure (*) and Non-Fri	iable Pro		emen
			Locatio			Descrip	ation of			-	Ту	oe
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	Roof Roof			X			ar		200 SF	Х		
	Nooi											
Name of Registered			F	IJDEP V laufer ID		Cubic Ya of Waste TBD			Registered Lar n Berks Lan			
						Disposal	Date	City, Stat	e oro, PA			
City, State Freehold NJ						TBD	nature	Dirushi	J10, 1 A	Date		

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Date of Notification (1)  10 / 20 /	17				ng Owner/Operator Valley Regional (				A	SBE	LIC	OS (
Agencies Notified Type Notificato  ⊠ EPA ☑ Initial	20			Address	Main Street				./	7.7		
⊠ nol,wn □ Amended  ⊠ DOH Amendment				Stale, Zip			-		/		$\dashv$	
DCA Siza-8) Emergency justification	(includ	ng	Nan	enningto se of Contr nomas O			1	lephone Nur	noa-r		(1)	=
			F	ACILITY	NFORMATION							
Name of Fedility Where Abelement is Tak Hopewell Central High School Strool Address	ing Pla	œ (3)				Type of Feck!  School (K-1)  Subchapter	12)	har than K-1	2)			
259 Penning(on-Titusville Road		tale le				Other (i.e.,	prive	s and commi	rcial t	aulidi,	חסם.	
City (5) Pennington						5quare Fect 50,000	1	of Floors 2	E	70	Age	
County (8) Mercer			Co.	inty Code	(MISTATE USE ONLY)	Curient Use (P	rior	being demai	ahed)			
Name of Montoring Firm Hired by Building PARS Environmental, Inc.	Owne	(8)	ASCI	ΛNo,	Name of Abetem	eni Contractor (9 onmental, LLC						
Street Address 500 Horizon Drive, Suite 540					Street Address 623 Cutler A	71416122	/**   */.e					
City Stete, Ep Code Robbinsville, NJ 88691			300.2		City, State, Zip C	oda						
roject Managar for Monitoring Firm		Ter	ephone	No.	Talephone No	7 770 0002	TL	cense No.				
Firez Jan				0-7277	858-755-0099			00842				
				nter (11) 17	Name of OSHA A EMSL Analyt							
Occupancy Status During Asstoment (Che Facility Closed/Vacated During Entire P	ck enly excd o	ane) (Abats	ment		Street Address 200 Route 13							
Abatement Performed Outside of Normal Time of AbetementAMF	al Facili	ty Hou	re - Da	saribe AM	City, Shele, Zip Co	ide						
cope of Work (Chack all that apply)	1 70											
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		s Local Name						<b>1</b>	7	Blarr	ont 1	ype
	Um M;	od Soli intens dodiai (12)	nca/	Alba (I,q	Description o stos Containing Ma thermal systems i surfacing, VAT,	erial (ACM) Neulation, or		Amount (Specify IF of LF)	Remail	Repair	Excapquiste	Enclosure
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Aspesios-Containing Material (ACM) TO BE ABATED	Yes	No		1	Dies		- Altini	52 LF	Ø		0	П
Asbetos-Containing Material (ACM) TO BE ABATED IN Facility (13)		No	П	Camen	ripe		-					
Aspestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Yes	-	0	Cemen					-	A STATE OF THE STA		
Aspestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Yes	Ø		Camen								
Aspestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Yes			Cemen								-
AEDREIOS-CONTENTINE MOTOR (ACM)  TO BE ABATED  IN Facility	Y			Vaelo ) No.	Cubic Yards of Waste	Name of Regist GROWS No						

Oct 30 2017 15:34 NJ Asbestos Control 609,633,0664





Data of NatiSpation (4)		•			/		ZK=	E	-	51	3
Date of Notification (1) 10/31/17		٨	lame of Build	ing Owner/Operat	or (2)		引置	G	=		V
Agencies Notified Type Notificat				truction Corp			ノノー				
EPA Initial	on	1. 6	treet Address 14 Cordier					NOV	-	3	201
		C	ity, State, Zip	Code		14	1			-	
	ent #_ cy (including	_   I	rvington, N	IJ		_		no. such ma	2 diame		re thinks
DOH justification	n)	N	ame of Conta	act		Telep	hone Nu	EST.	OS	CON	HR
☐ DCA ☐ Cancellat	ion		Joe Spinell	0		L	w. was	LI	ICE	VSIN	G
Name of Facility Where Abatement is Ta	l-i Di (0	,	FACILITY I	NFORMATION							-
Residential House	king Place (3	)			Type of Facility	(4)					
Street Address					School (IC	-12)					
oli oct Addi ess					Subchapt Other (i.e.	er 8 (Other	than K-12	2)		66	
City (5)					etc.)	private & c	commerci	al bui	ilding	s, ho	me
Wayne					Square Feet	# of F	loors	T	Bldg.	Age	_
County (6)					2,500	2			50+		
Passaic		Co	ounty Code (7	7)	Current Use (F	rior if being	demolish	ed)			
					Residentia						
Name of Monitoring Firm Hired by Buildin	g Owner (8)	1	ASCM No.		of Abatement Co		)				
Street Address			n/a	Har	mony Contrac	ting Inc					
n/a					t Address						
City, State, Zip Code					Palisade Ave						
n/a					State, Zip Code						
roject Manager for Monitoring Firm		T-1			field, NJ 07026	5					
1/a		n/	ephone No.		hone No.	4 72	icense No				
tart Date (10)	Scheduler	1	a etion Date (11		460.6026		1255				
11/9/17	11/28/1	7 Comple	stion Date (1)		of OSHA Monitor						
ccupancy Status During Abatement (Che	ck Only One	)			mony Contract	ing inc					
Facility Closed/Vacated During Entire					Palisade Ave						
Apatement Performed Outside of Nor	mal Facility F	atement lours			tate, Zip Code						
Other - Describe: Demolition					ield, NJ 0702	2					
cope of Work (Check Ali That Apply)				Gui.	1010, 140 0702	,					
≥3 sf or ≥3 lf		novation		×	Full Contains	ont with Ma					
≥160 sf or ≥260 lf	X Der	molition			Full Containn Mini-Enclosu	9	gative Pro	essur	e		
				F	Glovebag Pro	cedure		_	9		
	lel	ocation		- Etoni	Non-Exempte	a (*) and No	on-Frable				
Location of		mally			50 <b>.0</b> 0					emen /pe	I
Asbestos-Containing Material (ACM)		Solely by enance/		Description stos Containing M	ot laterial (ACM)	Amou	int		·	T	Г
TO BE ABATED In Facility		lial Staff	/: -	thermal systems	insulation.	(Spec	ify	R	71	Enc	1
(13)	(	12)		surfacing, VA* other miscelland		SF or I	LF)	Remova	Repair	aps	
	Yes 1	No N	/A					va	Ħ.	Encapsulate	1
Interior											
IIIEIIOI		,	C Dr	ywall Joint Co	mpound	5,500	SF ,	2			
-				2000 3.00							
								1			
							-	-		-	
me of Registered Waste Hauler		NJDE	P Waste	Cubic Yards	Nome of	Domint 11	22 450				
rmony Contracting Inc		Hauler	ID No.	of Waste		Registered L					
		0330	58	TBD	GROW	S Landfill					
/, State	( particular particula			Disposal Date	City, State				-		_
urfield, NJ				TBD	Morrisvi	lle, PA					
mpleted by a Caporino	Title			Signature	`		Date				-
a Caponito	Secreta	ry		Lina Co	yaero		10/3	1/1	7		



		(	Pursuar	t to NJA	C 8:60 an	d 12:12	0)		CK	#	13	30	8
Date of Notification (1) 10/30/17			Name BCS	of Building	g Owner/	Operator	(2)			E G	F	1 7	
Agencies Notified Type Not	ification		Street	Address				1	<del>                                     </del>	4 6	<u> </u>	11 /	<u> </u>
■ EPA 🗵 Initia	al		146	Poplar S	St			- 1	15				
DEP Ame	ended		City, S	tate, Zip C	Code			1	11 11	NOV	- ;	3 20	117
	endment #		Ridg	efield Pa	ark, NJ				пП	1101	,	0 20	11.1
	ergency (including fication)	g	Name	of Contac	t			T	elephone	Number			
DCA Can	cellation								A	SBEST	os c	ONT	ROL
Nome of Facility Valls and a			FAC	CILITY IN	FORMAT	ION				L	CEN	SING	emman
Name of Facility Where Abatement Residential Building	is Taking Place	(3)					Type of Facility (4						
Street Address							School (K-12 Subchapter 8		her than k	( 12)			
105 Brunswick Ave							Other (i. a. pr	ivate	& comme	ercial bu	ilding	s, hom	es,
City (5)					-75,50		etc.) Square Feet	# /	of Floors		Bldg.	Δπα	
Jersey City							2500	3	540000000000000000000000000000000000000		50+	Age	
County (6)		1	County	Code (7)			Current Use (Prior	-		olished	007		
Hudson				USE ONL			Residential Bu						
Name of Monitoring Firm Hired by B	Building Owner (8	3)	ASC	M No.		Name	of Abatement Contr		-				
n/a			n/a				nony Contractin						
Street Address							Address	-	10-50				
n/a						360	Palisade Ave						
City, State, Zip Code						City, S	tate, Zip Code	- 250	V				
n/a						10.55	eld, NJ 07026						
Project Manager for Monitoring Firm			Telepho	one No.		Teleph	one No.		License	e No.			
n/a			n/a			9734	60.6026		01258	5			
Start Date (10)	Schedul	led Cor	mpletion	Date (11)		Name	of OSHA Monitor		1				
11/8/17	11/28					Harm	nony Contracting	g In	С				
Occupancy Status During Abatemer	it (Check Only O	ne)				Street	Address						
Facility Closed/Vacated During	Entire Period of	Abaten	nent			360 I	Palisade Ave						
Abatement Performed Outside Other – Describe: Demolition	of Normal Facility	y Hour	3		ĺ		ate, Zip Code						
						Garfi	eld, NJ 070 26	Section.					
Scope of Work (Check All That Apply	y)												
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	PRODUCTION .	Renova					Full Contair men	t with	n Negative	e Press	ure		
2100 St 01 2260 If	×	Demolit	ion			H	Mini-Enclos are Glovebag Proces	4					
						×	Non-Exempted (			iable Pr	ocedu	re	
	Is	Locati	on									ement	
Location of	1	Vormal	ly		Dos	cription	of				Ty	/ре	
Asbestos-Containing Material (A		ed Sole intenar		Asbes			aterial (ACM)	А	mount			E	
TO BE ABATED In Facility		todial S			thermal:	systems	insulation,	(5	Specify	Re	Z	nca	En
(13)		(12)				ing, VAT		SF	or LF)	Remova	Repair	apsı	Enclosure
en er en	Yes	No	N/A		2 /9/. ///	Journalia				val	=	Encapsulate	ure
Roof	103	110			Doofi	a Mat	riol	0.5	00.05				
11001			X		NUUIII	ng Mate	iidi	20	00 SF	X			1
										-			
										-			
Name of Registered Waste Hauler		N	JDEP W	aste	Cubic Y	/ards	Name of Re	aiste	red I and	fill			
Harmony Contracting Inc		H	auler ID		of Wast		GROWS						
Dity, State		0	33058		TBD		598800 500 000 000	Lai	idilli				
Sarfield, NJ					Disposa	al Date	City, State	-					
Completed by					TBD		Morrisville	e, P					
ina Caporino	Title	otor:			100.0	gnature	e		4.5	Date			
па бароппо	Secr	elary			11	nna C	and rede			10/30/	17		

PAID CK 1291	1		ICATIO	tate of Ne N OF ASE t to NJAC	BESTOS	ABATE		IT		0	E	C I	E		-	int E
Date of Notification (1) 11/1/17				of Building Petrillo	Owner/0	Operator	r (2)		1		N	07	- (	3 20	)17	╫
Agencies Notified  Type Notification  Type Notification  Initial Amended Amendmen			City, St	Address ate, Zip C							ASBE			ONT	ROL	&
■ DOH justification) ■ DCA Cancellation	(including		Name o	of Contact Petrillo		<u> </u>				Tele	phone	Numi	per			
			FAC	ILITY INF	ORMATI	ON				_						
Name of Facility Where Abatement is Takin Residential Home	ng Place (3	3)					Тур	oe of Fac lit	:5::: a:							
Street Address							×	Subchap Other (.e	ter 8	(Otherate &	er than comm	K-12) iercial	buil	dings	, hom	es,
City (5) Emerson							Squ 27	etc.) uare Feet 50		# of 3	Floors			3ldg. /		
County (6) Bergen				Code (7) USE ONLY	)			rrent Use (I			ig dem	olishe				
Name of Monitoring Firm Hired by Building Project Manager	Owner (8)		ASC	M No.				batement C			(9)					
Street Address						Street 280		ress fidland A	ve.							
City, State, Zip Code								Zip Code	J 076	663						
Project Manager for Monitoring Firm			Telepho	one No.		Teleph 201-		No. -3184			Licens 0130			<del></del>		
Start Date (10) 11/1/17	Schedule 11/5/17		npletion	Date (11)		Name	of Os	SHA Monito	or							
Occupancy Status During Abatement (Chec	k Only On	e)				Street	Addr	ess								
Facility Closed/Vacated During Entire   Abatement Performed Outside of Norm Other – Describe: 8 A.M. to 4 P.M.	Period of A nal Facility	baten Hours	nent			City, S	tate,	Zip Cod€					_			
Scope of Work (Check All That Apply)																
≥3 sf or ≥3 if ≥160 sf or ≥260 if	( minute)	enova emolit				×	M G	ull Conta n lini-Enclosi lovebag Pi lon-Exemp	ure roced	ure						
Location of	400	Locati	7.015		_				T	<i>y</i> 41.14	.,,,,,,,	lubic		75503-574	ement	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mai	d Sole ntenar odial S (12)	nce/		tos Conta thermal surfac		lateria s insu T, or			(Sp	nount pecify or LF)		Remova	Repair	Encapsulate	Enclosure
1st Fl	Yes	No	N/A										2		late	ıre
19111		X				VAT				370	) SF	X				
Name of Registered Waste Hauler All Stages Abatement		H	DEP Wauler ID 36592	No.	Cubic \ of Was 2 CU			Name of					an	dfil		
City, State Saddle Brook, NJ					Dispos	al Date		City, St.		PA						
Completed by Richard Cristofol	Title Presid	dent			Si	gnature	A)	1//	//	3	T	Date	/17			

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

CML# 3284

CV 328L	f		NOT						TOS AE		EMENT (	M	L#	30	20	٦		
Date of Notification (1)	/	17							ner/Opera		2)	ſ	<u></u>	E	D [	<b>E</b> [	N	7 [3
Agencies Notified Typ	e Notifica	ation			Stre	et Add	iress			_		-	WF		9 1		1 0	
	Initial	20011			Decention 200	West		Stre	eet			- 1						
	Amended					State						-	ШШ	- NC	<b>V</b>	<del>-</del> 3	20	17—
	Amendme	15				ayonr			002			- 1						
	Emergen justification		cluding	3	-	ne of C						Tele	phone	Nambe	STO	s cc	NTF	ROL 8
	Cancellat				А	lex Ba	aylor					-		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	۱,	ENS	NG	
			22 11					FOF	RMATION	1		i						
Name of Facility Where Abate	ment is T	Taking	Place	(3)	•	NOIL!	. ,			_	Type of Facility	(4)						21.
Verizon Bayonne Centr											School (K-12	1000						
Street Address											Subchapter 8				- C I.	9.0	120	
2 West 29th Street											Other (i.e , proposed homes, etc.)		and cor	nmerci	ai bu	llaing	S,	
City (5)											Square Feet		f Floors	;	Blo	ig. A	ge	
Bayonne											26,052	3	1			F-50		
County (6)		and leaves to			Co	unty C	ode (7	)(STA	TE USE ON	LY)	Current Use (Pri	or if b	eing de	molishe	ed)			
Hudson											Verizon Con	nmur	nicatio	ns				
Name of Monitoring Firm Hired	d by Build	ding C	wner (	(8)	ASC	M No.		Nai	me of Abat	eme	ent Contractor (9)						07.64	
USA Environmental Ma	nageme	ent						Е	BRISTOL	EN	VIRONMENTAL	_, INC	<b>.</b>					
Street Address								Stre	eet Addres	S								
8436 Enterprise Ave								1	123 BEA	VE	R STREET							
City, State, Zip Code								City	y, State, Zi	р Сс	ode							
Philadelphia, PA, 19153	3							Е	BRISTOL,	PA	19007							
Project Manager for Monitoring	g Firm			Te	lephon	e No.		Tel	ephone No	).		Lic	ense N	0.				
Mark Jenkins				:	215-36	55-581	10	2	15-788-6	040	I (	0	0509					
Start Date (10)					letion [		parente p	100000	me of OSH									
11 /15 /17	7	1	1_/	_2	23_ /	17	_	В	BRISTOL	EN	VIRONMEN AI	_, INC	;					
Occupancy Status During Aba								Stre	eet Addres	s								
☐ Facility Closed/Vacated Du	1000							1	123 BEA	VE	R STREET							
Abatement Performed Outs Time of Abatement:							9	City	y, State, Zi	р Сс	ode							
			W <u>3.00</u>	i ivi-	2.00A	VI		В	BRISTOL,	PA	19007							
Scope of Work (Check all that	apply)									Cont	tainment with Neg	otivo l	Drocour	•				
≥3 sf or ≥3 lf			⊠ Re	nova	ation				☐ Mini-	Enc	losure	alive	riessui	C				
≥160 sf or ≥260 lf			☐ De	moli	tion						g Procedure mpted (*) and No	- Erial	ala Dra	andiira				
		-	le	Loc	ation	1		i i i i i i i i i		Exe	mpted (*) and No	II-FIIdi	Die Prod	cedure	Λh	tom	ont To	100
Location of				Norm					Description	on o	ıf			-			ent Ty	
Asbestos-Containing Mater		1)			olely by nance/		Asbes	stos	Containing	Ma	terial (ACM)		Amount	3 1	Removal	Repair	Encapsulate	Enclosure
TO BE ABATED IN Facility					I Staff?	,	(i.e.		ermal syste surfacing, \				Specify F or LF		оча	air	sde	nso
(13)				(12	2)				her miscell				i Oi Li	<i>'</i>	-		ılate	ře
1.20 97			Yes	No	o N/A	Α					80.						· · ·	
Basement AC Equipment	Room					VA	AT / M	lasti	С			(	550 SF	18	$\boxtimes$			
			П													П	П	
			=				110000000											
		700000																
																Ш	Ш	Ш
Name of Registered Waste Ha SERVICE TRANSPORT		, INC	<b>:</b> .			Wast ID No	100	Cub	oic Yards o ste	f	Name of Regis							
City, State	10.5				209	00		Dis	posal Date		City, State			U.S. E.				
NEW CASTLE, DE								Т	BD		WAYNE3B	URG,	ОН					
Completed By (Print or Type)		Title		777110	V				Signature	3				Date				
Dillan DeCaro		Es	stima	tor					Dill	an	DeCaro	19	L	11	-1	- (	7	



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

Check # 25630

Date of Notification (1)		I Nissa	t D : 11-11	0 10	(0)	INE	C	E							
10/31/2017		Nam	ie of Buildii	ng Owner/Operato											
Agencies Notified   Type Notified		Stro	et Address		J Bower				_						
	ation	Sile	et Audiess	ž.,		1111111	101	- 3	20	17					
☐ DEP ☐ Amended	d	City	State, Zip	Code					=	_					
M DOL Amendm			Otate, Zip			- ASDI	CTO	0.00	A COMP						
■ DOH	icy (including		e of Conta		'alls, N	J 07-7 2 4ASBESTOS CONTROL									
DCA Cancella	tion														
				tha Bower	<u>s</u>										
Name of Equility Where Abeter 1	F 1: 51		CILITY IN	FORMATION											
Name of Facility Where Abatement is					Type of Fa silit										
	ntial_				School K-	12) r 8 (Other than K-1	2)								
Street Address					Other (i. a	private & commerc	2) ial bui	ildinas							
City (E)					homes, etc	<b>:</b> .)									
City (5)					Square Fe∈t	# of Floors	E	Bldg. A	ge						
- Red Ban	k, NJ (				_1800	_ 2	-   -	75		_					
County (6)				7) (STATE	Current Use (F	rior if being demol	shed)								
No.			E ONLY)												
Name of Monitoring Firm Hired by Build (8)	ding Owner	ASCN	No.	Name of Abatem			8580								
MIECS		_		Stev	ens Environ	mental Servic	es, I	nc.							
Street Address	2.43			Street Address											
PO Box	341					Box 322									
City, State, Zip Code	NIT 00515		2000	City, State, Zip Code Allentown, NJ 08501											
Crosswicks,	NJ 08212				Allentow	n, NJ 08501				_					
Project Manager for Monitoring Firm		Telephone		Telephone No.		License Ne-									
Bill Weisgarber		(609) 29		(609) 25		(	049	3		_					
511.1	Scheduled Co	mpletion Da	ate (11)	Name of OSHA N											
_11/11/2017	11/30/	2017		-	N	IECS									
Occupancy Status During Abatement (				Street Address	50.										
Facility Closed/Vacated During Entir	e Period of A	batement				Box 341									
☐ Abatement Performed Outside of No ☐ Other - Describe:	ormal Facility	Hours		City, State, Zip C											
Alleranda Allera					Crossw cl	cs, NJ 08515									
Scope of Work (Check all that apply)				FT Full Con	to in man and with the					- 200					
≥3 sf or ≥3 lf	<b>X</b> XRen	ovation		Mini-End	tainment with Ne losure	egative Pressure									
≥160 sf or ≥260 lf		nolition		Gloveba	g Procedure										
	lelo	cation		Non-Exe	impted (*) and N	on-Friable Procedu	1								
		mally					*	Abaten Type							
Location of		Solely by enance/		Description of			-	- 76-							
Asbestos-Containing Material (ACM)  TO BE ABATED		todial		os Containing Mate thermal systems in		Amount (Specify	_		m	m					
IN Facility	1000000	aff?	(	surfacing, VAT,	or	SF or LF)	Remova	Repair	Encapsulate	Enclosure					
(13)	(	12)		other miscellaneo	us)		ova	bair	sula	DSUI					
	Yes	No N/A					_		ate	(D)					
Garage	_ X		mhos	mal Dina	Inqui				-						
Garage	_ ^		- Tilei	mal Pipe	TIIDUI.	<u>84 lf</u>	X		-						
				-											
Name of Registered Waste Hauler		NJDEP V Hauler ID		Cubic Yards of Waste	Name of Ragi	stered Landfill			10000						
Stevens Environmental Serv	ices, Inc.	182	292	2.		Fairless Land	lfill								
City, State				Disposal Date	City, State /	7				_					
Allentown	ı, NJ			11/30/17	1/10/	Morrisville,	PA								
	Title			Signature //	1111	Date				=					
Mahlon E. Stevens	Pro	ject Man	ager	/// /	H = I = I			2		- 4					

PAID			Notifi	State		J s Abatement		DECEIVED								
D&S Proj. #: 17-302						0 and 12:120)		NOV - 3								
Date of Notification (1)    1   0   /   3   0   /   1   7    Agencies Notified	tion -	jose fune Street Addre	s	ner/Operator (2	)		AS	ASBESTOS CONTROL & LICENSING								
Amendment #  DOL  Emergency (including justification  DCA  Cancellatio		roseland Name of Co jose fun	l, nj 0706 ntact	8			Telephon	phone Number								
		jose ran	0.000000	ILITY INFORM	IATIO											
Name of facility where abatement jose funes Street Address	is taking p	lace (3)	PAC	JETTY INFORM			Subch Other (	(4) ol (K - 12) apter 8 (Othe (Private/Comr/Homes, etc. # of Floors	mercial	-12) dg. Aç	ne -					
City (5)	Cou	inty (6)			10000000	inty Code (7)										
roseland	ess	ex			,010	ac use only)	Current Use (P	nor it being de	emolisne	a)						
Name of Monitoring Firm Hired by	Bldg. Owr	ier (8)		ASCM No.		Name of Abatemen	nt Contractor (9)									
							RATION, INC.									
Street Address						Street Address	• 0-000									
City, State, Zip Code					_	20 California 2 City, State, Zip Cod										
only, orato, zip oodo						Paterson, NJ (										
Project Manager for Monitoring Firm	1	Ph	one Numb	per	_	Telephone Number	Z. A. I. S. T. G.	License Nur	mber							
		Pat   10		10TAN		973-345-802		0116								
Start Date (10)	Sche	d. Completio	on Date (1	1)	_	Name of OSHA Mo										
11/03/17	11/1			- 6		D & S Restora	tion, Inc.									
Occupancy Status During Abateme						Street Address	r									
Facility closed/vacated during Abatement performed outside Describe: Other-Describe: NORMAL F	entire per of normal	iod of abate			_	20 California A City, State, Zip Cod	le									
Scope of Work (check all that appl						Paterson, NJ (										
≥3 sf or >3 lf	Renovati Demolitio						Full Containment w Mini-enclosure Glo rebag procedur Non-Exempted (*)	re		dure						
Location of asbestos-containing material (acm) to be abated in facility (13)		n normally tenance/cust	todial			sbestos-containing	Amount (Specify S LF)	0	1 5 1	E n c a	E n c					
* 1: 2:	165	No	N/A				77.2	v e	l r	р	_					
basement		L X		PIPE INSU		ON										
basement		LX_		transite boa	rd				110							
									1111	닏						
										뷔	H					
Registered Waste Hauler	INID	EP Hauler I	] L D#   C	ubic Yards of V	Vaste	Name of Registere	ad La idfill				Ш					
D & S RESTORATION, INC.		506		2 yds	, 2016		I, RESOURCE RE	COVERY								
City, State PATERSON, NJ 07503			Disposal D	ate		City, State TULLYTOWN										
Completed by (Print or Type)	Title		0	Signature		1		Date								
BOGDAN JOLDZIC	PRESID	ENT						10/30/17								

Oct 30 2017 15:29 NJ Asbe	estos Cont	rol 609,633	3,06	64		page 1		MEGELVE								
10/30/2017 11:89AM	9733458	359			D&S	RESTORATIO			)	PAGE	E	2/84				
PAID DAS Proj. #: 17-303	-11				estos	Abatement and 12:120)	\$" <sub>1</sub> .*\		NOV - 3 2017  - 10 DAY  Ligensing							
Data of Notification (1)	I I Nam	a of Aulidina (	LUMA	r/Operator (2)			00	<u> </u>	DAY	L	IGEN	1817	3			
1 10 /13 10 /11 17	- 11	e funes	Anna 1110	n/Operator (2)					, ]		1					
Agencies Notified   Type Notificalis		Add tess		Tues and the second			Ut.	1.	111		-					
DEP								1	/ !							
DOL Amendmant#:	Water	State, Zip Cod					KANE	PARP	101 101	i.						
DOH Emergency		seland, nj 07 of Contact	058				. 17 % 341	DATE OF THE PERSON NAMED IN	e Number	_		and the state of	_			
DCA Justification)	11	se funes							•		-					
Cat (Cay) (a) (Cay)			ACI	LITY INFORM	ATION			4		Approximation						
Name of facility where abatement is	taking place		- 1011			# C	Тур	of Facility (	4)	-			-			
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onse: vadušė						20 Californi	a Ave.									
City, State, Zip Code	The state of the s	MISSISSIM HOLLOW CO.	9050			City, State, Zip C	ode					and but				
Project Manager for Monitoring Firm	or the common terror	Fhone N			-	Paterson, N. Telephone Numb			License	Mure	a.	a-tawa	manus.			
t industrianagat in vicintoning talls		t- (replaint)	MIT OW	.1		973-345-8	020			1169			DESCRIPTION AND ADDRESS OF THE PARTY OF THE			
Start Date (10)	Sched, Co	ampiellon Dele	a (11	)	-	Name of OSHA				Mary Control	Section 140					
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Occupancy Status During Abatemen			Massaga			20 California	Contract to the same of	- Postwo Tokko		****		0.703	THE REAL PROPERTY.			
Facility classd/vacated during  Abatement performed outside						City, State. Zip C	<b>49</b>									
Describe: NORMAL H	OURS				_	Paterson, N	J 07503	_								
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Registered Waste Haules  D & S RESTORATION, INC.	NJDEP 13506	Hauler ID#	100000	ubio Varda of	Wasto	Name of Ragias			COVE	v						
City, State	13300	Dispo	o lea	eta		City, State		JACEK	COYEN	· ·	y-	-	STATE OF THE PERSON NAMED IN			
PATERSON, NJ 07503		11/0	)4/1	7 Signature		TULLYTO	WN, PA	and Communication of the Commu	15-4-	reed to	2-3-2794		Maryen.			
Completed by (Print or Type) BOGDAN JOLDZIC	Title PRESIDEN	IT		Gignature					Date   10/30	/17						
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PAID									,				Prii	nt Fo						
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Date of Notification (1) 10/30/2017				Building ( prague	Owner/O	perator	(2)		14	L N	07	- 3	2017	7						
	otification		Street Ad																	
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	mendment # mergency (including	_	Allenda	ale, NJ (	7401															
	stification)		Name of	Contact					Telephone Number											
DCA C	ancellation		John										_							
Name of Facility Mileson Abotomo	nt in Taking Dlane (2	1	FACIL	ITY INFO	RMATIC	NC	Typ	oe of Facilit / (4)												
Name of Facility Where Abateme John's Residence	nicis raking Place (3	)						School (F-12	)											
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City (5) Allendale					35-2.1		Sq	uare Feet	# of	Floors	E	Bldg. A	ge							
County (6)			County C	ode (7)			Cu	rrent Use (Prior	if bei	ng demolis	hed)									
Bergen				V==						(0)										
Name of Monitoring Firm Hired by	y Building Owner (8)		ASCM	No.				batement Controperty Maint												
Street Address			10		Street		ress Riper Ave													
City, State, Zip Code								Zip Code												
							NJ 07011													
Project Manager for Monitoring F		Telephor	ne No.		Teleph 201-		No. -9008		License N 01336	10.										
Start Date (10) 11/02/2017	Schedule 11/15/2		pletion [	Date (11)		Name	of C	SHA Monit or												
Occupancy Status During Abaten	nent (Check Only Or	ne)				Street	Add	ress												
Facility Closed/Vacated Dura Abatement Performed Outsi Other – Describe:	ing Entire Period of A	Abatem				City, S	State	, Zip Code												
Scope of Work (Check All That A	poly)							4					-							
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>	× F	Renova Demoliti				×		Full Contair men Mini-Enclosure Glovebag Proce	dure											
								Non-Exempted	(*) an	d Non-Fria	ble Pro		e ement							
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Location of Asbestos-Containing Material	(ACM) Use	d Sole	ly by	Ashes		scription		rial (ACM)	А	mount			т.							
TO BE ABATED	IVIa	intenar todial S	(2007/2004)		thermal	system	s ins	ulation,	(5	Specify	Re	R.	Encapsulate	Enclosure						
In Facility (13)	J	(12)	,,,,,,,			cing, VA			Sh	or LF)	Remova	Repair	psul	losu						
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City, State					sal Date	1	City, State													
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Darko Raloski	anager								0/30/	0/30/2017										



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Date of Notification (1)					Name	of Building	n Owr	ner/Operator (	2)		brain.	) E		<b>E</b>	-\//	든	In		
11 /	02 /	17				tander E			-/				<u> </u>						
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DCA (NJAC 5:23-8)			ding	+		of Contac			_		Telephone Number								
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Name of Facility Where A	Abatement is T	aking Pl	ace (3	3)					T	ype of Facili y (4	4)						-		
Santander Bank			N							School (K-12)									
Street Address		Ž.						2 = 15				Other than K-12)							
1 Union Square										Other (i.e., printing homes, etc.)	vate	e and con	nmerc	ial bui	lding	·,			
City (5)									S	quare Feet	#	of Floors		Bld	g. Ag	e			
Elizabeth, NJ 07201	1									2,000		2		4	5				
County (6)					Coun	ty Code (7	)(STA	TE USE ONLY)	С	urrent Use (Prio	or if	being der	nolish	ed)					
Union																			
Name of Monitoring Firm	Hired by Build	1	SCM	No.	Nan	ne of Abateme	ent	Contractor (9)											
Hillmann Consultin	ng		6225	2	J,	VN Restorat	tio	n Inc											
Street Address				Stre	et Address														
1600 Route 22 East			4	7 Foster Ro	ad	I													
City, State, Zip Code	-3-2-3-1-27,2	City	, State, Zip Co	ode	е						Time								
Union NJ 07083		Staten Island NY 10309																	
Project Manager for Mon	itoring Firm			Telep	ohone I	No.	Tele	ephone No.			L	icense No	Э.						
Tammy Lomax				90	8-577	-6171	7	18-605-6256	3			00774							
Start Date (10)	S	chedule	d Cor	nplet	ion Dat	te (11)	Nan	ne of OSHA N	/lor	nitor									
11 /03 /	17	11	_ / _	17	_ / _	17	Т	estor Tech											
Occupancy Status During	g Abatement (0	Check or	nly on	e)			Stre	et Address											
□ Facility Closed/Vacate							1	0 59 Jackso	n.	Avenue									
Abatement Performed							City	, State, Zip Co	ode	e									
Time of Abatement: 9	9:00 AM-6:00	-IM/	_PM	_		_AM	L	IC NY 11101											
Scope of Work (Check al	II that apply)																		
		×	Reno	ovatio	nn.			☐ Full Con		nment with Nega	ativ	e Pressur	е						
□ ≥160 sf or ≥260 lf		_	Dem					⊠ Gloveba	g F	Procedure									
8787								☐ Non-Exe	emp	pted (*) and Non	ı-Fr	iable Prod	cedure	T -					
1				ocati rmal				Description						Abatement		nt Ty	rpe		
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(1.5)		Y	es	No	N/A											e			
Basement Boiler Roo	om		] [			Pipe In	suali	tion and Fitt	tin	gs.		96 LF							
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Newark Carting				500000	auler II	No.	Was	ste		IESI	- A.I.S.								
City, State					NJ-56	6	10 Disposal Date City, State							-					
Newark, NJ								11/07/17 Bethlehem,PA											
	ivne	Title								/ /			Dat	Δ					
Completed By (Print or T Ralph Barnhardt	Ahe)	Title Project Manager						Signature	MM 11-02-201						7				
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Sirent Address							School (K-1)	19					
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Elizabeth, NJ 07301							Square Fee: 2.000	# of Flogra	8	ildg. A	ge		
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Union						·		ei ii baiuñ dallio	ianed)				
Name of Monitoring Firm Hired by Hillmann Consulting	Building	Owner	(\$)	ASCN		Name of Absten	nent Contractor (8)			_			
Street Address			-	622	52	JVN Reaton	ation inc	<u> </u>					
1600 Routs 22 East						Street Address 47 Postar Re	204						
City, State, Zip Code Union NJ 07083						City, State, Zip C					_		
Project Manager for Monitoring Fig				-		Staten Islan							
Temmy Lomex	111			ephone	No. 7-6171	Telaphone No.		License No.				-	
Sien Date (10)	School	duled (	Sample	allan Da	te (11)	718-805-828 Name of OSHA		00774					
/		11	1 _1	7 /	17	Testor Tech							
Occupancy Status During Abatem	eni (Chec	k anly	one)			Street Address							
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Time of Abaiement: 9:00 AM-	:00PM/_	- MGIN	>M	zz - Dei	_AM	City, State, Zip C				_	_		
Scope of Work (Check all that app						LIG NY 1110	1						
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IN Facility		Çus	todini (12)	Staff?	(1,0	smeleys lamierit TAY gniosing. VAT	. 61	(Spealty SF or LF)	Regnoval	Repair	Encapsulate	Enchasure	
(10)		Yes	No	1	1	other missellans	ous)	or or Ery	E		gebu	6	
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Newark, NJ						11/07/17	Bethishem,	PA					
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<sup>\*</sup> Do not use this form for asbestos licensure exampted activilles.



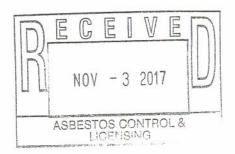
### STATE OF NEW JERSEY

NOTIFICATION OF ASBESTOS ABATEMENT (PURSUANT TO NJAC 8:60-7 AND 12:120-7 Date of Notification (1) Name of Building Owner / Operator (2) RUSSO DEVELOPMENT INC. 06 20 17 Street Address Type of Notification Agencies Notified 570 COMMERCE BLVD **EPA** Initial City, State, Zip Code NOV - 32017 DEP Amended CARLSTADT, NJ 07072 DOH Amendment # 1 Name of Contact Telephone Number Emergency w/ justification DOMINICK TUCCI DOL OS CONTROL & Cancellation FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) FORMER MERCK UNION School (K-12) Subchapter 8 (Other than K-12) Street Address 1011 MORRIS AVE V Other (I.e., private & cmmercial bldgs., homes, etc.) City (5) # Of Floors **Building Age** County (6) County Code (7) Square Feet UNION UNION 6,500 Current Use (Prior if being den olished) 40 + OFFICE / PRODUCTION Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM NO FHI NORTHSTAR CONTRACTING CROUP, INC. Street Address Street Address 655 WEST SHORE TRAIL City, State, Zip Code 32 Williams Parkway SPARTA, NJ 07871 City, State, Zip Code Project Mngr. For Monitoring Firm Telephone Number WILLIAM KIERBIL 973-729-5649 East Hanover, NJ 07936 Sheduled Start Date (10) Sched. Completetion Date (11) Telephone Number License Number 00860 973-884-8682 Occupancy Status During Abatement (Check Only 1) Name of OSHA Monitor NORTHSTAR CONTRACTING GROUP, INC. Facility Closed/Vacated During Entire Period of Abatement Street Address Abatement Performed Outside of Normal Facility Hours - Describe: 32 Williams Parkway City, State, Zip Code Other - Describe: 7:00 AM-3:30 PM East Hanover, NJ 07936 Scope of Work (Check All That Apply) Demolition Renovation Full Containment with Negative Pressure >3sf or >3lf Mini - Enclosure >160 sf or >260 If Glovebag Procedure Non-Exempted (\*) and Non-Friable Procedure Location of Is Description of Abatement Type Asbestos Containing Location Asbestos - Containing Normally Material (ACM) Amount E R N Ε C C TO BE ABATED Used (I.e., thermal systems (Specify M 0 P SF or LF in Facility Solely insulation, surfacing, VAT, or other miscellaneous) V A 0 (13)by Main-S S tenance/ A R 11 U Custodial L Staff (12) YES NO N/A VAT MASTIC 90 SF 1 U7 LAB TOP 12 SF 7 U7 ROOFING 1 400 SF 1 TANK INSULATION 435 SF 1 Name of Registered Waste Hauler NJDEP Wastel Cubic Name of Registered Landfill **NEWARK CARTING** Hauler ID No. Yards I.E.S.I. 4509 of Waste City, State Disposal City. State NEWARK, NJ Date BETHLEHEM, PA 18105 Completed by (Print or Type) Signature Date

Project Manager

11/02/17

Location of	ls	Description of		Abatem	ent Type	545.55	1200.00
Asbestos Containing	Location	Asbestos - Containing		R		E	E
3	Normally	Material (ACM)	Amount	E	R	N	N
TO BE ABATED	Used	(I.e., thermal systems	(Specif/	M	E	C	C
in Facility	Solely	insulation, surfacing, VAT,	SF or LIF)	0	P	A	L
(13)	by Main-	or other miscellaneous)	500000000000000000000000000000000000000	V	A	P	0
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	Custodial			L	R	U	U
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	YES NO N/A						
U7	THIRIT	PIPE & FITTING INSULATION	302 LF	V			
				V			



D&S Proj. #: 17-305  Date of Notification (1)  1 10   / 2   5   / 1   7    Agencies Notified Type Notification  EPA Initial Amended	the		(Pursuading Owner	ant to NJAC	estos 8:60	s Abatement and 12:120)	Don't book	CE 10V - ;	3 20 ONT	)17 ROL	<b>5</b>					
DEP Amended  Amendment #:  Emergency (including justification)  DCA Cancellation	mi Name	llford, of Cont	ip Code nj 08848 act roogan	3			Telephone	Telephone Number								
			7-1000 Cont.	LITY INFORM	ATION											
Name of facility where abatement is to the estated of wieder Street Address	aking place (	3)					Subcha  Other (I  Bldgs./I	(K - 12) apter 8 (Ot	mme c.	rcial	-12) dg. Aç	ge				
City (5)	County (6					nty Code (7) te use only)	Current Use (Prior if being demolished)									
millford	hunterd	2000000				Name of Abatamant	t Contractor (9)									
Name of Monitoring Firm Hired by Bld	g. Owner (8)	)		ASCM No.												
Street Address  City, State, Zip Code					_	D & S RESTOR Street Address  20 California A City, State, Zip Code	ve									
Project Manager for Monitoring Firm		Pho	one Numbe	er	_	Paterson, NJ 07 Telephone Number 973-345-8020		License I	Numb	er						
Start Date (10)	Sched. Co	mpletion	n Date (11	)	_	Name of OSHA Mor D & S Restorat										
11/08/17	11/30/17					Street Address	ioi , me.			-						
Occupancy Status During Abatement ( Facility closed/vacated during en Abatement performed outside of Describe: NORMAL HOL	tire period o normal facili	f abaten				20 California A City, State, Zip Code Paterson, NJ 07										
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basement		X		chimney thi	mble	packing	6 sq ft		$\boxtimes$			ᄪ				
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Registered Waste Hauler	NJDEP H	lauler ID	100	ubic Yards of V	Vaste	Name of Registered			<u></u> Ц	Ц	Ш	Ш				
D & S RESTORATION, INC.  City, State PATERSON, NJ 07503	13506		2 Disposal D 11/09/1	7		TULLYTOWN, City, State TULLYTOWN	RESOURCE RE		Y			_				
BOGDAN JOLDZIC P	tle RESIDEN		or ashesto	Signature	empter	activities		Date 10/25/1	7							