HITROUED BY: State of New Jersey TOM Voorhees, DOL NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 10 31 18 Verizon Communications Agencies Notified Type Notification Street Address ☐ EPA 1206 Wesley Ave □ DOLWD ☐ Amended City, State, Zip Code **⊠** DOH Amendment #_ Ocean City, NJ 08226 ☐ DCA (NJAC 5:23-8) justification) Name of Contact Telephone Number □ Cancellation **Brian Tilton** 215 640 4563 **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Verizon Ocean City C.O. ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) Street Address

1206 Wesley Ave							homes, etc.	rivate and comm	ercial b	uildin	gs,	
City (5)							Square Feet	# of Floors	В	ldg. A	ge	
Ocean City							15,230	2		+-50		
County (6)	-			Cou	nty Code (7)(STATE USE ONLY)	Current Use (Pr	ior if being demo	ished)	5.4		
Cape May County						44	Verizon	3	1040000			
Name of Monitoring Firm Hired by Bu	ilding (Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)					-
USA Environmental						BRISTOL EN	VIRONMENTA	L, INC.				
Street Address						Street Address				_	- 107	
8436 Enterprise Ave						1123 BEAVE	R STREET					
City, State, Zip Code						City, State, Zip Co	ode					
Philadelphia, PA 19153						BRISTOL, PA	19007					
Project Manager for Monitoring Firm			Tele	phone	No.	Telephone No.		License No.			_	
Mark Jenkins			2	15-365	5-5870	215-788-6040		00509				
Start Date (10)	Sched	duled C	Comple	tion Da	ate (11)	Name of OSHA M	lonitor					
11 /1 /18		11/	3	/	18	BRISTOL EN	VIRONMENTA	L, INC				
Occupancy Status During Abatement	(Chec	k only	one)			Street Address				-		
☐ Facility Closed/Vacated During En	tire Pe	riod of	Abate	ment		1123 BEAVER	RSTREET					
Abatement Performed Outside of I	Normal	Facilit	y Hou	rs - Des	scribe	City, State, Zip Co						-
Time of Abatement:AM	PI	M/ <u>5:00</u>)PM- <u>2</u>	:00AM		BRISTOL, PA						
Scope of Work (Check all that apply)										_	-	
		⊠ D.		12.72			ainment with Neg	gative Pressure				
☐ ≥160 sf or ≥260 lf			enovati			☐ Mini-Encl						
						☐ Non-Exer	mpted (*) and No	n-Friable Proced	ure			
			Locat						Ab	atem	ent T	ype
Location of Asbestos-Containing Material (AC	N.A.)		Norma ed Sole			Description of			Z	B	m	m
TO BE ABATED	IVI)	Ma	intena	nce/		estos Containing Mat e., thermal systems i		Amount (Specify	Remova	Repair	nca	nclo
IN Facility		Cus	todial (12)	Staff?		surfacing, VAT,	or	SF or LF)	oval	1 5	Encapsulate	Enclosure
(13)		Yes	No.	NI/A	+	other miscellaned	ous)				late	е
Page was till till the till till the till till till till till till till til				N/A								
Basement HSB Area					VAT/Ma	astic		70 SF				
										П	П	П
Name of Registered Waste Hauler			N	JDEP	Waste	Cubic Yards of	Name of Regis	tered Landfill				
SERVICE TRANSPORT GROU	P, INC	.		auler II 20990	D No.	Waste	MINERVA					
City, State				20000	,	Disposal Date	City, State					
YARDLEY, PA						TBD	WAYNESB	URG. OH				
Completed By (Print or Type)	Title					Signature			ate		_	
Dillan DeCaro	Es	stima	tor			Dilla	· Dolan	10 -	10 -	21-	10	/
SB-41 ANIRACO						1 wan	1 Decar	0/0~ /	U	>(10	
AN 13 DD 8053	* 1	Do not	use th	is form	for asbest	tos licensure exempt	ted activities.					

APPROVED BY:

TOM VOOTHEES, DOL NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)

OM Voorhees,	PO C	AI	NO	TIF	ICA (Pu	TIO rsua	N OF AS	SBE	ESTOS ABA 8:60 and 5:1	TEMENT 6)	Chh:	#	30	16	2
Date of Notification (1)	31 /		8_						Owner/Operator versity-Office	(2) of Design and	I Construction	; (C		L	17
	Type Notif	ication			-		et Address					410		-	
						20	00 Elm Dr	r.				NO	V -	5	2018
☑ DOLWD [Amend		ı		1	City,	State, Zip	Coc	de						
	Amendr ⊠ Emerge			-			inceton,				1 1				
(NJAC 5:23-8)	justifica		iciuali	ng	ŀ		e of Conta				Telephone Nun	- 1	1	244	e i + _{is}
	Cancell	- 13					bert Ort		i		609-258-18		44.05.013		
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Name of Facility Where Aba	atement is	Takin	g Plac	ce (3	3)	1,7	CILITI	MIC	JRIVIATION	Type of Facility	(4)				
Princeton University-			•	1	,					School (K-12	10000				
Street Address										☐ Subchapter	8 (Other than K-1)	2)			
Chapel Drive										Other (i.e., p	rivate and comme	rcial t	uildir	ıgs,	
City (5)										homes, etc.)		- 1-			
Princeton										Square Feet	# of Floors		Bldg. /	Age	
County (6)			V. 100 S. 100			Cou	inty Code (71/0	TATE USE ONLY)	Current Head De			70		
MERCER						000	inty Code (1)(0)	TATE USE CIVET)		ior if being demoli	shed)			
Name of Monitoring Firm Hi	red by Bui	ldina (Owner	(8)	ΙΔ	SCN	1 No	N	lama of Abata	Office/Class					- 111000
TTI Environmental Inc		g 、	3111101	(0)	1	000				ent Contractor (9)					
Street Address						000	03	_		VIRONMENTA	L, INC.				
1253 North Church Ro					1	treet Address 1123 BEAVER	CTDEET								
City, State, Zip Code		-	-				ity, State, Zip Co								
Moorestown, NJ 0805	7							1							
Project Manager for Monitor				IT	elen	hone	No	-	BRISTOL, PA	19007	T				
Michael Keehn	3			Ι.			5-8800	1	215-788-6040		License No.				
Start Date (10)		Sched	luled (Com			ate (11)	_	ame of OSHA M		00509				
	18	_1	1_ /	_	1		18			VIRONMENTAL	_, INC.				
Occupancy Status During At								St	reet Address					-	
☐ Facility Closed/Vacated ☐ ☐ Abatement Performed Out	Juring Ent	ire Per	riod of	Aba	teme	ent			1123 BEAVER	RSTREET					
Time of Abatement: 8:00	AM-5:30	PM/	racilit	iy Ho M-	ours	- Des	scribe		ty, State, Zip Co						
Scope of Work (Check all that				_					BRISTOL, PA	19007					
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 	ас арріу)		⊠ Re			l.				Procedure	ative Pressure	re			
					cation							7	atem	ent T	vne
Location of Asbestos-Containing Mat	erial (ACN	n\			nally olely		A - L -		Description of			10000	_		1
TO BE ABATE		")	Ma	inte	nanc	e/	Asbe (i.e	stos the	Containing Material systems in	erial (ACM)	Amount (Specify	Removal	Repair	Encapsulate	Enclosure
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City, State								Dis	posal Date	City, State					
BRISTOL, PA 19007										Co-cold and Cold and	AIRLESS HILLS, PA				
Completed By (Print or Type)		Title						-	Signature		Dat	e	-		
Brian Scafiro		Es	timat	or					Brian	Scelin	0/m /	0-	31	-18	-

ASB-41 BS 18/47

CM# 3461

Date of Notification (1)					Name o	of Building	Owner/Operator (2)		7	P.0	[24 [4]			
	31 / _	18					nmunications	1	DEGE	Ĺ.	V.				
Agencies Notified	Type Notificat	ion			Street /	Address							1		
□ EPA	⊠ Initial				2501	Church	Road	1 1 2	NOV -	5	2018		1 -6		
⊠ DOLWD	Amended Amendmer	at #			City, St	ate, Zip C	ode				2-73115		Bayman .		
☑ DOH □ DCA	☐ Emergency	the state of the s	ina		Che	rry Hill, I	NJ 08002		Language						
(NJAC 5:23-8)	justification		mig		Name o	of Contact			Telephone Number	r	1	2 14 14 1			
1000	☐ Cancellation	on			Cha	rles Mes	sing		917-992-1356						
					FAC	ILITY IN	FORMATION								
Name of Facility Where A	batement is Ta	king Pla	ace (3)				Type of Facility	(4)						
Verizon Cherry Hill				50				School (K-12	2)						
Street Address								Subchapter 8	(Other than K-12)	نياط اما	ldina				
2501 Church Road								homes, etc.)	rivate and commerci	ai bui	iuing:	>,			
City (5)								Square Feet	# of Floors	Blo	lg. Ag	e			
Cherry Hill								20,051	2	1	50	900			
County (6)				-	Count	v Code (7)(STATE USE ONLY)		ior if being demolish	ed)					
Camden					Journ	y code (r	(O11112 002 01121)	Verizon	or it comig comonen	/					
Name of Monitoring Firm	Hirod by Ruildi	na Own	or /8	\ T	ASCM N	do.	Name of Ahatem	ent Contractor (9)							
TTI Environmental	miled by Buildi	ng Own	ei (o	'	ASCIVIT	NO.	The same and the s	VIRONMENTA							
		<u> </u>					Street Address	VIICONINILIVIA	L, 1140.						
Street Address 1253 North Church	Ctuant						1123 BEAVE	DOTDEET							
	Street														
City, State, Zip Code Moorestown N.I. 08057							City, State, Zip C								
Moorestown NJ 08057							BRISTOL, PA	19007							
Project Manager for Moni	itoring Firm				phone N		Telephone No.		License No.						
Kris Smith					09-313-		215-788-6040		00509						
Start Date (10)		chedule					Name of OSHA								
	18	11	_ /	- 20	_ / _	18	BRISTOLEN	IVIRONMENTA	L, INC						
Occupancy Status During							Street Address								
☐ Facility Closed/Vacate							1123 BEAVE	R STREET							
Abatement Performed						cribe	City, State, Zip C	ode							
Time of Abatement: _	AIVI	PIVI/ <u>5</u>	.00	1VI- <u>Z</u>	.00Alvi		BRISTOL, PA	A 19007							
Scope of Work (Check al	I that apply)									451116					
≥3 sf or ≥3 lf		M	Ren	ovat	ion			itainment with Ne	gative Pressure						
□ ≥160 sf or ≥260 lf				noliti			☐ Gloveba	g Procedure							
							☐ Non-Exe	empted (*) and No	on-Friable Procedure	1					
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Location		. 1 .		orma	ely by	Acho	Description stos Containing M		Amount	Re	Re	En	En		
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(13)		~	es	No	N/A		other miscellane	eous)				te			
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Name of Registered Was		, INC.		1 1 2 2	NJDEP N Hauler II 2099 0	No.	Cubic Yards of Waste		stered Landfill LANDFILL						
City, State		-XX	27 20		20000		Disposal Date	City, State							
Yardley, PA					TBD	WAYNESI	BURG, OH								
Completed By (Print or T	vpe)	Title					Signature		Da		e - 199				
Dillan DeCaro Estimator							Dilla	ne DeCar	10/m/	0 -	3/	-/0	P		

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 11 02 18 Hopewell Valley Regional School District Agencies Notified Type Notification Street Address ☐ Initial 425 South Main Street **⊠** DOLWD □ Amended City, State, Zip Code **⊠** DOH Amendment #1 Pennington, NJ 08534 ☐ DCA ☐ Emergency (including (NJAC 5:23-8) justification) Name of Contact Telephone Number ☐ Cancellation Thomas Quinn 609-915-2294 FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Commercial ☐ School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e., private and commercial buildings, 275 South Main Street homes, etc.) City (5) Square Feet # of Floors Bldg. Age Pennington County (6) County Code (7)(STATE USE ONLY) | Current Use (Prior if being demolished) Mercer Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) **Bio Terra Solutions** ALL PRO MANAGEMENT LLC Street Address Street Address P.O. Box 1224 27 Outwater Lane City, State, Zip Code City, State, Zip Code Union, NJ Garfield, NJ 07026 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Rick Eustaquio 973-494-3762 973-928-4888 1188 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor <u>11</u> / <u>05</u> / 18 11 / 30 / 18 ALL PRO MANAGEMENT LLC Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 27 Outwater Lane Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: ____ AM-PM/3:30PM-12:00AM Garfield, NJ 07026 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ≥3 sf or ≥3 lf □ Renovation ≥160 sf or ≥260 lf □ Demolition Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Normally Abatement Type Location of Description of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Removal Enclosure Amount Maintenance/ TO BE ABATED (i.e., thermal systems insulation, Custodial Staff? (Specify IN Facility surfacing, VAT, or SF or LF) (13)(12)other miscellaneous) Yes No N/A Exterior X Caulking 110 Windows X П Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Century Waste, LLC Hauler ID No. Waste G.R.O.W.S. North Landfill/Fairless Landfill 32797 As Needed City, State Disposal Date City, State Elizabeth, NJ TBD Morrisville, PA Completed By (Print or Type) Title Signature Date Allen Monchik Project Manager Allen Monchik 11/2/18

Date of Notification (1)				Man	(D ") "	_		(%)						-
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⊠ EPA □	ype Notifica Initial Amended			100000000000000000000000000000000000000	et Address 25 South		n Street		- E	EATS			Vala	<u></u>
⊠ DOH	Amendme			City,	State, Zip	Cod	le		the state of the s	-	Great A		-	
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Name of Facility Where Aba	tement is Ta	aking Pla	ce (3)	.,	COLLITT II	WI C	NULLAIM	Time of Facility	(4)					-1255-2
Commercial			00 (0)	1:				Type of Facility						
Street Address			_					School (K-12	2) 8 (Other than	K-12)				
275 South Main Street	t							Other (i.e., p	rivate and co	mmerc	ial b	uilding	js,	
City (5)								homes, etc.)			1 -			
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Name of Monitoring Firm Hir	ed by Buildi	ina Owne	r (8)	ASCN	1 No	LNI	ama of Abatama							
Bio Terra Solutions			. (0)	71001	1110.			ent Contractor (9)						
Street Address						-	treet Address	NAGEMENT	LC					
P.O. Box 1224						132	27 Outwater I	reactions.						
City, State, Zip Code							ity, State, Zip Co							
Union, NJ						1 .	alikama ka jina							
Project Manager for Monitorin	na Firm		Te	elephone	No	_	Garfield, NJ	07026						
Rick Eustaquio				973-494			973-928-4888		License N	0.				
Start Date (10)	Sc	cheduled				-	ame of OSHA M		1188					
10 /24 /1	18			30 /				OTILOT NAGEMENT LL	C					
Occupancy Status During Ab	atement (Cl					-		NAGEWENT L						
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Time of Abatement:	AM	_PM/	PI	M	_AM	1000	ty, State, Zip Co Garfield, NJ (
Scope of Work (Check all that	t apply)											-		
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TO BE ABATED IN Facility	2			nance/	(i.e.	., the	ermal systems ir	nsulation,	(Specify		Removal	Repair	icap	Clos
(13)			(12				surfacing, VAT, ther miscellaneo		SF or LF)	val		Encapsulate	Enclosure
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Name of Registered Waste Ha	auler			NJDEP V	Nasto I	C	hio Varda	N== 25						
Century Waste, LLC	44101			Hauler I		Wa	bic Yards of	Name of Registe						
City, State				32797		A	s Needed	G.R.O.W.S.	North Land	dfill/Fa	iirle	ss L	andf	ill
Elizabeth, NJ							posal Date	City, State						
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Completed By (Print or Type)	T	itle					Signature			Date			137	
Allen Monchik	nager		Allen Monchik 10/15/18											
SB-41						_			State of the state	10/	U	10		- 1

Date of Notification (1) 1 0 1/3 1 1 1 1				Not		te of			INE	CE	M		F
Date of Notification (1) S Name of Building Owner(Operator (2) Steph musolino Street Address Stree	D&S Proj. #: 18-222		TRA E	(Pursuant to NJAC 8:60 and 12:120)									
Date of Notification (1) B 1.10 1/3 1 1 B Name of Building Owner(Operator (2) Scheduling Name of Building Owner(Operator (2) Scheduling	(K 137)		PAI	11月				,	A contract of the contract of	NOV - 5	2018		
Agencies Notified Sept Notification Sept Notification Initial Amended Amendment # Sept Notification Initial Amendment # Sept Notification Initial Amendment # Sept Notification Initial In	Date of Notification (1)		Name of	Building O	wner/Operator ((2)				MOA 2	2016	, and	horsel
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City, State, Zip Code County (6) Count		cation	Street Add	dress				-	and the second second	halle the same		er operation	-, 1
Marie of Contact School (K-12) School (K-12) School (K-12) Street Address School (K-12) Street Address Street			011										
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DCA	DOH (including				840	-		-					
Name of facility where abatement is taking place (3) ioseph musolino Street Address City (5) metuchen Name of Monitoring Firm Hired by Bidg. Owner (8) Street Address City State, Zip Code Project Manager for Monitoring Firm Phone Number	I DCA I			300000000	v:				Teleph	one Number			
Street Address Superior S		1011	<u> јеверн</u>			MATIC	OM .				_		
School (K - 12) Subchapte 8 (Other than K-12) Other (Private/Commercial Bidgs/Homes, etc.	Name of facility where abatemer	nt is taking	place (3)	- 10	CILIT INFOR	VIATIO	JIN	_	In	40			
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Mare of Monitoring Firm Hired by Bildg. Owner (8) Street Address City, State, Zip Code Project Manager for Monitoring Firm Phone Number Project Manager for Monitoring Firm Phone Number Project Manager for Monitoring Firm Phone Number Start Date (10) 11/14/18 Title Pacific City, State, Zip Code Paterson, NJ 07503 Telephone Number Telephone Number 11/30/18 Occupancy Status During Abatement (Cheek only one) As Restoration, Inc. Street Address 20 California Ave. City, State, Zip Code Paterson, NJ 07503 Telephone Number 11/30/18 Occupancy Status During Abatement performed outside of normal facility hours- Describe: Other-Describe: NORMAL HOURS Scope of Work (check all that apply) 2 sf or 2 sf Renovation I coation of asbestos-containing paterial (acm) to be abated in facility (13) Amount of asbestos-containing material (acm) to be abated in facility (13) PASEMENT PIPE INSULATION Name of Abatement Contractor (9) D& S RESTORATION, INC. Street Address 20 California Ave. City, State, Zip Code Paterson, NJ 07503 Paterson, NJ 07503 Full Containment winegative pressure Mini-enclosure Glovebag procedure Non-Exempted (*) and Non-friable procedure by maintenance/custodial staff(12) yes No N/A PIPE INSULATION 110 I ft R R E E E E E E E E E E E E E E E E E		00	unity (0)						Current Use (Dries if hairs d	<u> _</u>	h a al\	
Street Address City, State, Zip Code Project Manager for Monitoring Firm Phone Number Project Manager for Monitoring Firm Phone Number Project Manager for Monitoring Firm Phone Number Start Date (10) Sched. Completion Date (11) 11/14/18 11/30/18 Occupancy Status During Abatement (Check only one) Facility closed/vacated during entire period of abatement. Abatement performed outside of normal facility hours- Describe: NORMAL HOURS Scope of Work (check all that apply) Sope of Work (check all that apply) Sop of Work (check all that apply) Sop of Work (check all that ap							,		Current Ose (Prior it being a	emolis	nea)	
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Project Manager for Monitoring Firm	Street Address					_	D & S REST	OR	ATION, INC.				
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Completed by Corey Stankovic	Title CEO			Sigr	nature	Harkon	·		ate 0/31/	2018	3	

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GMP Contracting 1518 South Washington Ave. Piscataway, New Jersey

Pre- Demolition Asbestos M@pection2018 October 12, 2018 EHI Project#: 1308-7671

Material	Location	Approximate Quantity
9"x9" Blue Floor Tile	In Rear Bedroom & Closet, Hall Closet	50 Square Feet (SF)
9"x9" Light Gray Floor Tile	In Rear Bedroom & Closet, Hall Closet In Front Bedroom & Closet	120 SF
9"x9" Gray/Green Floor Tile	In Front Bedroom & Closet , Living Room Closet	75 SF
l'x1' Floor Tile - White Marble Pattern	2 nd Floor South (Small) Bedoom	125 SF
Cement Board (Transite) Siding - Green	Under Vinyl Siding Of House Sides Of Garage 2 nd Floor North (Large) Bedroom Closet Stack Of Loose Shingles On Floor	1650 SF
Transite Drain Pipe	Behind Garage On Ground	5 Linear Feet (Presumed)

NOTE: Quantities are approximate. NA/PS = Not Analyzed Positive Stop

6.0 Conclusion

The asbestos containing materials must be removed prior to disturbance resulting from demolition or renovation work. Any contractor hired to perform abatement of the identified asbestos containing materials must be licensed to do so by the State Of New Jersey.

Report and Survey By:		
	Charles Hoffman	
	Project Manager	

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ATLANTIC CARTING

Hauler ID No.

Title

PRESIDENT

of Waste TDB

Name of Registered Landfill **GRAND CENTRAL**

Disposal Date

City, State TDB PEN ARGYL ,PA 18072

Signature.

Date 10/28/18

City, State

PEN ARGYL

Completed by

LUIS ARCILA

ASB-41 (R-06-08)

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Name of Maniforing Firm					ASCM	No.	Name of Abatem)	1		_	_	•
Managoment & Env	riro. Cons	ulting	Servi	ces			Shade Enviro				;				
Street Address							Street Address		-		<u> </u>			-	
PO Box 341							623 Cutler A								
City, State, Zip Code Chesterfield, NJ 08	C+ E						City, State, Zip C								•
Project Manager for Mon-				Tele	phone	M-	Maple Shade	, NJ DE	52				20.	-	
Bill Weisgarbor	WATERIA L MART			1 :	•	-4070	555-755-0099			1,000,000	ense No. 0842				
Stort Dale (10)		School	uled C			ID (11)	Nems of OSHA N			- 0	1042				•
10 / 31 /	18				_ / .		EMSL Analyt		١,		!				
Occupancy Status During						-	Street Address		CONTRACTOR CONTRACTOR		-	_	-	_	
Facility Clased/Vacete	d Ourling Er	illro Per	riad of	Abatas	nent		200 Route 13	0 Nort				-			
Abstement Performed Time of Abstement:	Outside of	Norma! Pi	Fecilit ni	y Hour PM-	e - Das	acride And	City, State, Zip Co			-				-	
Scope of Work (Chock all							Cinnaminsor	, NJ DI	377						
	mai appiy)						Pull Cont	ainmen	with Ne	antive A	tossura				
 ≥3 sf or ≥3 if ≥160 ef or ≥260 if 				ngvati molitic			Mini-End	esure							
							☐ Gloveday	moted (I and N	on-Fried	le Proce	dure			
Lander				Local Norma							į	A	atem	ent	
Location Asbestos-Conteining I	Material (AC	(M)	Use	ed Sote	ly by	Asba	Description o stos Containing Ma	terial (2	>M)	,	mount	7	Repair	1	-
IO BE ASA				todial i		(i,c	thermal systems surrecing, VAT,	reulat (١,	0	Specify F or LF)	Removal	Pair	1	
. (13)	•		_	(12)		1	other miscollano	005)		-	r or Lr)	2		8-mcapacitate	
· · · · · · · · · · · · · · · · · · ·			Yes	No	N/A										
Basement				8		Floor T	ile			6	43 SF	×			
	- William										-			E	
				0				P professional vi				10	0	-	
								,					THE REAL PROPERTY.	E	
Name of Registered Was	m Haulet	_		-	JOEP (Naste	Cubic Yards of	Nari	of Regi	stered t	endfill			1	•
Freehold Cartage					autor IC		Waste		rions L						
City, State					15938	<u> </u>	Disposal Date	City.			-				,
Freehold, NJ		+					11/02/2018		Prisivi il	, PA					
Completed By (Print or Ty	pe)	THE					Signature		_			Date			,
Christina Lynch		1	100 C			Speration	ns OpenIS	A STATE OF		-	1	10/30		2/3	

* Do not uso this form for eshestos licensure exempted ac villes.

CV_52	30		NOT			TION		BES	Jersey STOS ABA 3:60 and 5:				G E				State of the state
Date of Notification (1) 10 /	30 /	18	***************************************				of Buildin		vner/Operato	r (2)	The control of the co	N.	DV c	5	204	8	
Agencies Notified	Type Notific	ation					t Address					/ Rene	3/75S	CON		Lâ	
⊠ DOLWD	Amended				F	City, S	State, Zip	Code	2	*** **********************************	1		hel's 24	Control of the Contro	.10 - 11.2 - 11.11		2
☑ DOH □ DCA	│ Amendm │		cluding	- a		Wo	odbury	Heig	hts, NJ 080	097							
(NJAC 5:23-8)	justificati	ion)		3		Name	of Conta	ct				Telephone	Numb	er			
	☐ Cancella	tion	min similar i .	2000000		Gai	ry Perro	ne				-					
						FA	CILITY II	VFO	RMATION								
Name of Facility Where A	batement is	Taking	Place	(3)		(100m) (100m) (117			THE SECTION AND ADDRESS OF THE PARTY OF THE	T	Type of Facility	(4)					
Residence		area (committee) no min									School (K-12		- 12 401				
Street Address											Subchapter 8 Other (i.e., polynomes, etc.)	rivate and co			ilding	js,	
City (5)				20000000						15	Square Feet	# of Floo	rs	Ble	dg. A	ge	
Woodbury Heights			M 117 PL 279 1184								1,400	3		1	30		
County (6)						Cour	nty Code (7)(STA	ATE USE ONLY) (Current Use (Pri	ior if being d	emolis	ned)		60	
Gloucester											Residence						
Name of Monitoring Firm	THE STATE OF THE S				100000	SCM	No.	1			t Contractor (9)						
Management & Env	iro. Consul	lting S	Servi	ces		-0.00		1	Shade Envi	iror	mental, LLC						
Street Address	PO Box 341								reet Address								
								323 Cutler /									
City, State, Zip Code Chesterfield, NJ 085	515						1 60	y, State, Zip Vlaple Sha c									
Project Manager for Moni	toring Firm			Te	elep	hone	No.		lephone No.			License I	No.			-	
Bill Weisgarber					609	-298	-4070	8	356-755-009	99		00842					
Start Date (10) 11 / 09 /	0.000.00	Schedu 1					te (11)		me of OSHA EMSL Analy						5)		
Occupancy Status During	Abatement (Check	only o	one)				Str	eet Address			·			-		
□ Facility Closed/Vacate								2	200 Route 1	130	North						
Abatement Performed								Cit	y, State, Zip	Cod	e						
Time of Abatement:	AM	PIV	1/	P	IVI		AM	(Cinnaminso	on,	NJ 08077						
Scope of Work (Check all	that apply)					0-11-0-10	***************************************	*		nto:	nmont with Non	etius Desse					
≥3 sf or ≥3 lf≥160 sf or ≥260 lf			⊠ Re □ De						☐ Mini-Er ☐ Gloveb	nclo: ag l	nment with Neg sure Procedure pted (*) and Nor			9			
		T	ls	Loc	catio	n	1								atem	ent T	уре
Location			Use	Norn					Description					R	Z.	Ш	Ш
Asbestos-Containing N TO BE ABA		1)	Ma	inte	nand	ce/			Containing N ermal system:			Amour (Speci		Removal	Repair	ıcar	Clos
IN Facilit	y		Cust	todia (1)		aff?		5	surfacing, VA	Т, о	r	SF or L		val	7	Encapsulate	Enclosure
(13)			Yes	N	T	N/A		ot	her miscellan	neou	is)					ate	
Kitchen					-		Floor T	ile				135 S	F				
			П	П				110111						П			П
								COMMUNICATION OF						片			
Name of Registered Wast	e Hauler		Ц_			L DED V	Vaste	T C	oic Yards of	-т	Name of Danie	torod I and	11		Ц	Ш	Ш
Freehold Cartage	e naulei				Hai	JEP v uler IE 5939	No.	Wa 1	ste		Name of Regist Fairless La		H:				
City, State						0000			posal Date		City, State						
Freehold, NJ								1	1/12/2018		Morrisville,	PA					
Completed By (Print or Ty	pe)	Title						I	Signature		× \		TDat				
Christina Lynch	MIA 18 A NASARAN AND AND A 7 A NASARAN	Vie	ce Pr	esi	den	t of C	Operatio	ns	Ons	مار		>	10	130	1	§)	

State of New Jersey

			S	tate	of N	ew Jerse	ey S ARAT	FMENT	-				
- h (1/	NO	TIFICA	TION	1 OF	AS	AC 8:60	and 5:1	EMENT	PR	o E I W			_
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10000			Name	e of B	Buildir	ng Owner/	Operator	(Z)				A STATE OF THE STA	
Date of Notification (1)	31 / 18		Le	wis	& Xi	omara G	onzalez		111 111 N	OV - 5 201	8	1	
10 /	31		Stree	et Ado	dress				HARA W	OV V		1	
Agencies Notified	Type Notification								<u> </u>	200000000000000000000000000000000000000			
⊠ EPA	☐ Initial ☑ Amended		City	State	e, Zip	Code	-10-0		1 733		1.11		
☑ DOLWD	Amendment #1		B	rowr	s M	ills, NJ 0	8015			phone Number			
⊠ DOH	☐ Emergency (include	ding		ne of					Tele	phone Number			
☐ DCA (NJAC 5:23-8)	justification)					nzalez		CSWW.SIIIS SAAD					
(145/10/0121	☐ Cancellation					INFORM	MATION					-	
			F	ACIL	_111	INI OIN		Type o	of Facility (4)				
Name of Facility Where	Abatement is Taking P	lace (3)						☐ Sc	hool (K-12)	or than K-12)			
Residence								- Su ⊠ Ot	bchapter 8 (Oth	e and commercia	I building	js,	
Street Address								ho	mes, etc.)				-
Street Address	197 200-1-0-30							Squar	re Feet #	of Floors	Bldg. A	ge	
City (E)								1.0	000	2			-
City (5) Browns Mills						de (7)(STAT	TE LISE ON	Y) Curre	ent Use (Prior if	being demolishe	ed)		
			C	Count	y Co	de (1)(31A1	[00L 0		sidence				
County (6) Burlington						Alon	no of Ahai		entractor (9).				
Name of Monitoring Fir	m Hired by Building Ov	wner (8)	AS	CM N	10.	INai	hada Er	vironme	ental, LLC	999 (#1980) (#1980 <u>) - 1</u>			1-21-2-2
Name of Monitoring 1 is	lygiene Associates	, Inc.					eet Addres						
	199.0					Stre	eet Addres	r Avenu	е				
Street Address 359 Dresher Roa	4						y, State, Z						
	u					Cit	y, State, 2	ade, NJ	08052				
City, State, Zip Code	144									License No.			
Horsham, PA 190	Vanitoring Firm		Telep				lephone N			00842			
Project Manager for N				5-768			856-755-		OF.				
Larry Nagelberg	Scheo	Juled Co	mpleti	on Da	ate (1			HA Monit					
Start Date (10)		11/	12	/	18	3		nalytical	, 1116.				
10 / 30	the second secon		100			S	treet Addr	ess					
Occupancy Status Di	uring Abatement (Chec	ariod of A	haten	nent				ite 130 N					
□ Facility Closed/Value	cated During Entire Po	I Facility	Hours	s - De	scrib		ity, State,	Zip Code					
☐ Abatement Perfor	nt: AMF	M/	_PM-		_AM	1	Cinnam	inson, N	IJ 08077				
Time of Abateme	III								ment with Neg	ative Pressure			
Scope of Work (Che	ck all that apply)						- N	lini-Enclos	ure				
≥3 sf or ≥3 lf		⊠ Re	novati	ion			∃g	lovebag P	rocedure	n-Friable Proced	ure		
□ ≥160 sf or ≥260	f	□ De	molitic	OIT				lon-Exemp	oted (*) and No	11-1 110011	Aba	ateme	nt Typ
		7 1	Loca	tion							_D	R	m
			Norma	ally		10.4007-200700710	Desc	ription of	rial (ACM)	Amount	Removal	Repair	Encapsul
Loc	cation of lining Material (ACM)	Us	ed Sol	lely by	y	Asbest	thermal S	vstems III	Sulation,	(Specify SF or LF)	oval	7	Encapsulate
TO B	E ABATED	Cu	stodia	I Staff	f?	(1.0.,	surfaci	ng. VAI, C)[31 01 21 7			ate
IN	Facility		(12				other mi	scellaneo	us)			_	
	(13)	Yes	No	o N	I/A					62 SF			
			×			Sheetro	ck & Joi	nt Como	ouna				П
Laundry Room			-									-	一
			40										14
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A .			TE	1 1			44		10	gistered Landfill			Walter Co.
				- 1		Monto	Cubic Y	ards of	Name of Ke	gisterou Lunio			
				N.IF	DEP !	vasie				Landfill			
Name of Register	ed Waste Hauler				ıler II	O No.	Waste		Fairless	Landfill			
Name of Register Freehold Car	ed Waste Hauler tage			Hau	DEP \ uler II 5939	O No.			City, State				
Freehold Car	ed Waste Hauler tage			Hau	ıler II	O No.	Waste 1 Dispose						
Freehold Car City, State	tage			Hau	ıler II	O No.	Waste 1 Dispose	al Date 2/2018	City, State		Date		
Freehold Car	tage	Title		Hau 1	iler II 5939	O No.	Waste 1 Dispose 11/1:	al Date	City, State			31/	nd

NOCK		NC				SBESTOS ABA AC 8:60 and 5:1		NEG	Es.	G	P.7	
Date of Notification (1)	1_/_	18		1000000		ng Owner/Operator f Princeton	(2) / Job #1801-52	52 Check # NOV				i
Agencies Notified T	pe Notificatio	n		Stre	et Address			NOV	-	5 2	018	_ [
⊠ EPA □] Initial					F Princeton Unive	ersity F A Mad	Millan Bldg				į
	Amended			_	, State, Zip		orony En a mac	/ January Brug.	F 7 0	1 14	±	- 142
☑ DHSS ☑ DCA	Amendment			1 30	rinceton,			F-1	11	11		* (4.)
(NJAC 5:23-8)	Emergency (justification)		ng		ne of Contac	The second of th		Telephone Num	hor		(B) Ta3	_
	Cancellation				obert Orte			609-258-184				
				11010				003-230-104				
Name of Facility Where Abat	ement is Taki	na Plac	ne (3)	- г/	ACILII I II	NFORMATION	T of F 104	740				
Princeton University -				50 6R	-6D PG	•	Type of Facility School (K-12)					
Street Address	· mootono i	-ibiui	y 1 110	30 00	-0D G	1		2) 8 (Other than K-12)			
One Washington Road	i						Other (i.e., p	rivate and comme		uildir	igs,	
City (5)		11-5-1					homes, etc.)					
Princeton							Square Feet	# of Floors	B	Bldg. A	Age	
County (6)		-		Cou	inti Cada /7	NOTATE HOE ONLY	1,000,000	8		72		
Mercer				Col	inty Code (/)(STATE USE ONLY)		ior if being demolis	hed)			
Name of Monitoring Firm Hire	d by Building	Ourne	. (0)	ACCA	4.51-	In car	University L					
TTI Environmental	d by building	Owner	(0)	ASCN 000		Name of Abateme						
Street Address				000	103	AbateTech, II	1C.					
1253 North Church Stre	not					Street Address						
City, State, Zip Code						30 Maple Ave						
Moorestown, NJ 08057						City, State, Zip Co						
Project Manager for Monitorin			1		NI	Lumberton, N	IJ 08048					
Michael R. Keehn	y riiiii			ephone		Telephone No.		License No.				
Start Date (10)	Coho	dulad (0-8800 X	609-265-2107		00529				(av.e)
2_ / _21 / 18	V. V. V.				ate (11) 18	Name of OSHA M	A STATE OF THE STA					
				_ ′		EMSL Analyti	cal					
Occupancy Status During Aba						Street Address						
☐ Facility Closed/Vacated Du ☐ Abatement Performed Outs	ring Entire Pe	riod of	Abate	ment	:	200 Route 130						
Time of Abatement:	AM- P	raciii M/	y Hou PM	rs - Des -	AM	City, State, Zip Co						
					2	Cinnaminson,	NJ 08077					
Scope of Work (Check all that	apply)					M Full Contr	inmont with No.	ethan Danasaa				
≥3 sf or ≥3 lf		⊠ Re	enovat	ion		☐ Mini-Encle	ainment with Neg	ative Pressure				
≥160 sf or ≥260 lf		☐ De	emoliti	on			Procedure					
			1		T	☐ Non-Exen	npted (*) and Nor	-Friable Procedure	_			
Location of		1	Local Norma			D	1		Ab	_	ent T	_
Asbestos-Containing Mater	ial (ACM)	Use	ed Sole	ely by	Asbes	Description of tos Containing Mate		Amount	Re	Repair	回	Enclosure
TO BE ABATED		4180	intena todial			thermal systems in	sulation,	(Specify	Removal	pair	cap	clos
IN Facility (13)		000	(12)	otun .		surfacing, VAT, other miscellaneo		SF or LF)	a		Encapsulate	ure
		Yes	No	N/A							te	
Phases 6B-6D- Levels 1 &	2				Pipe Ins	ulation		1,145 LF				
Phases 6B-6D- Levels 1 &	2					e & Mastic		3,775 SF		П		
Phases 6B-6D- Levels 1 &	2				Acoustic	cal Ceiling Plaste	er	5,395 SF				
Phases 6B-6D- Levels 1 &	2					eiling tiles	-	56				
Name of Registered Waste Har				JDEP V		Cubic Yards of	Name of Registe			Ц	ш	ш
AbateTech, Inc.			170000	auler ID	No.	Waste	G.R.O.W.S.					
City, State				18750		Nichocal Data	\.	Landin	-041			
Lumberton, NJ						Disposal Date	City, State	24				
Completed By (Print or Type)	722			_/		11/2/18	Tullytown, F					
Gwendolyn Trumbetti	Title			/		Signature	No A	Date		. ,	0	
5-3-4-3-3-4-3-4-1-4-3-3-4-4-3-4-4-3-4-3-4	0	perati	ons (Coordi	nator		IVV()	[() 13	1-1	Q	
ASB-41						N						

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT 140 NIAC 8:60 and 5:16)

Date of Notification (1)			Na	me of Ruildi	ng Owner/Operator	(2)				111	177
	18	2				⁽²⁾ / Job #1801-52	52 Oheck	# 5 20	18		JII.
Agencies Notified Type Notif	fication		Stre	eet Address				0 20		1 5	1
☑ EPA ☐ Initial			Т	rustees o	f Princeton Unive	ersity F.A. Mac	Millan Bldd	4			
☑ DOLWD ☑ Amend			_	, State, Zip		orey En a mae					
	lment # <u>5</u>			rinceton,			**************************************		2 - 1 (A ₄)		
□ DCA □ Emerge (NJAC 5:23-8) □ justification	ency (inclu	ding		ne of Conta			Telephone	Number			
☐ Cancel			100000000000000000000000000000000000000	obert Orte	77:		609-258				
1-	2000117		_				009-250	0-1041			
Name of Equility Where Abstract is	Tables Di	(0)	F.	ACILITY II	NFORMATION						
Name of Facility Where Abatement is	11.00					Type of Facility					
Princeton University – Firesto Street Address	one Libra	iry Pha	ase 6E	-6D PG	2	School (K-12		K 12)			
						Other (i.e., p	rivate and co	mmercial	buildin	gs,	
One Washington Road						homes, etc.)					
City (5)						Square Feet	# of Floors	s I	Bldg. A	ige	
Princeton						1,000,000	8		72		
County (6)			Co	unty Code (7	7)(STATE USE ONLY)	Current Use (Pr		molished)			
Mercer						University L	Y				
Name of Monitoring Firm Hired by Bu	ilding Own	er (8)	ASC	ЛNo.	Name of Abateme	ent Contractor (9)					
TTI Environmental			000	003	AbateTech, In	ic.					
Street Address					Street Address						
1253 North Church Street					30 Maple Ave	. PO Box 25					
City, State, Zip Code					City, State, Zip Co	de					
Moorestown, NJ 08057					Lumberton, N	J 08048					
Project Manager for Monitoring Firm		Tel	ephone	No.	Telephone No.		License N	0.			
Michael R. Keehn		8	56-84	0-8800 X	609-265-2107		00529				
	Scheduled	Compl	etion D	ate (11)	Name of OSHA M	onitor					
2/_21_/_18_	11	1 _ 2	2/	18	EMSL Analyti	cal					
Occupancy Status During Abatement	(Check onl	y one)			Street Address						
☐ Facility Closed/Vacated During Ent	ire Period	of Abate	ement		200 Route 130) North					
Abatement Performed Outside of N	lormal Fac	lity Hou	ırs - De	scribe	City, State, Zip Co	de					
Time of Abatement:AM	PM/	PM	l	_AM	Cinnaminson						
Scope of Work (Check all that apply)				-							_
	Ε.					ainment with Neg	ative Pressur	e			
≥3 sf or ≥3 lf≥160 sf or ≥260 lf		Renovat Demoliti			☐ Mini-Enclo						
	ш.	Ciriona	OII			npted (*) and Nor	-Friable Prod	edure			
		Is Loca	tion						patem	ent T	vne
Location of		Norma			Description of				_		
Asbestos-Containing Material (ACN TO BE ABATED		sed Sol faintena			stos Containing Mate		Amount	1 -	Repair	inca	Enclosure
IN Facility	101 0 00202	stodial	Staff?	(i.e.	, thermal systems in surfacing, VAT,		(Specify SF or LF)	ova	H.	psu	nso
(13)		(12)	_	1	other miscellaneo		01 01 11	, =		Encapsulate	ē
	Yes	No.	N/A							10	
Phases 6B-6D- Levels 1 & 2				Transite	Panels		56 SF				
Phases 6B-6D- Levels 1 & 2				Radiato	r enclsure liner		48 SF				
1 st Fl. Office Area Columns 13G	& 🗆			Sprayed	on Fireproofing		40 SF				
1st Fl. Office Area Columns 13G	& 🗆			Pipe ins	ulation		30 LF		1		
Name of Registered Waste Hauler		N	JDEP 1		Cubic Yards of	Name of Registe					_
AbateTech, Inc.		H	lauler II		Waste	G.R.O.W.S.					
City, State			18750		Disposal Data	1					
Lumberton, NJ					Disposal Date	City, State	2.4				
Completed By (Print or Type)	7.0					Tullytown, I	A				
Gwendolyn Trumbetti	Title			X	Signature	NX		Date		0	
The state of the s	Opera	uons (oord	inator	TT/M	/ Y//		10-	317	8	
SB-41 IAY 11	* Do no	t uso th	ie form	for achaeto	s licancura avamate	nd activities					
						NA - 10 00 00 00 00 00 00 00 00 00 00 00 00					

MAY 11

Date of Notification (1)					N	ame of Buildi	ng Owner/Operat	tor (2)		-20074		24.2	-
	31 /		18			Trustees o	f Princeton	1	Job #1801-525	2 Check	ÐV -	5 20)18	1
	Type Not	ificatio	n		_	reet Address		_	<u>i</u>					- 1
	☐ Initial					Trustees o	f Princeton Un	ive	rsity E.A. Maci	Millan Bldg			·	- E1
1 -					_	ty, State, Zip					to the same	2.0		
⊠ DHSS	Amend			2010/05/07		Princeton,				a a digraph to company	prometers en	14213-111-1		
☐ DCA (NJAC 5:23-8)	☐ Emerg justific	ency ((includ	ing		me of Conta				T=		- (5.5.5)		
	☐ Cance				2000					Telephone N				
-	_ oance	ilation			_	Robert Orte				609-258-	1841			
Name of Facility Where Aba	atement i	c Toki	na Dla	22 (2)		FACILITY II	NFORMATION		_					
Princeton University								- 1	Type of Facility (
Street Address	- riiest	one i	Librar	y Pha	ase b	B-6D PG	2		☐ School (K-12) ☐ Subchapter 8	Other then	(12)			
									Other (i.e., pri	ivate and com	mercial	buildir	nas.	
One Washington Roa	la .								homes, etc.)				5 - ,	
City (5)									Square Feet	# of Floors		Bldg.	Age	
Princeton									1,000,000	8		72		
County (6)					C	ounty Code (7)(STATE USE ONL)	7)	Current Use (Pric	or if being den	nolished)		
Mercer									University Li	brary				
Name of Monitoring Firm Hir	red by Bu	ilding	Owner	(8)	ASC	M No.	Name of Abate	mer	nt Contractor (9)	-				
TTI Environmental					00	0003	AbateTech	, In	c.					
Street Address							Street Address							
1253 North Church St	reet						30 Maple A	ve.	PO Box 25					
City, State, Zip Code		118					City, State, Zip							
Moorestown, NJ 08057	7						Lumberton							
Project Manager for Monitori	ing Firm			Te	lephor	e No.	Telephone No.	,	7 00040	License No.				
Michael R. Keehn	J			0.000		10-8800 X	609-265-210	7		00529	•			
Start Date (10)		Scher	duled (Date (11)	Name of OSHA		nitar	00529			*****	
_2 / _21 / _1						18	EMSL Analy							
Occupancy Status During Ab	atement						Street Address	,						
☐ Facility Closed/Vacated D					ment			20	NI a sette					
☐ Abatement Performed Ou	itside of N	lormal	l Facilit	v Hou	rs - D	escribe	200 Route 1							
Time of Abatement:	AM	PI	M/	PN		_AM	City, State, Zip (
Scope of Work (Check all tha	t apply)								and the second s					
☐ ≥3 sf or >3 lf			M D	enovat	ion		☐ Full Co	ntai	nment with Negat	tive Pressure				
≥160 sf or ≥260 lf				moliti	1000		☐ Mini-En							
							☐ Non-Ex	emp	pted (*) and Non-	Friable Proce	dure			
			10000	Loca								patem	ent T	vpe
Location of				Norma	ally ely by	400 700 700 700	Description					_		T
Asbestos-Containing Mate TO BE ABATED		Л)		intena			tos Containing M			Amount	em	Repair	nca	ncl
IN Facility	_			todial	Staff?	(1.6.,	thermal systems surfacing, VA			(Specify SF or LF)	Remova	≝.	squ	Enclosure
(13)				(12)	1	_	other miscellan			01 01 11)	-		Encapsulate	Гe
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200														
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lame of Registered Waste Ha	aulor		Ц			10/	0.1: 1/ 1 6	٠,					Ш	
AbateTech, Inc.	aulei			1 1 2 2 2	auler	ID No.	Cubic Yards of Waste	-1	Name of Register G.R.O.W.S. L					
City, State					1875		40 Pienosal Data	4,		.unum				
Lumberton, NJ						- /	Disposal Date 11/2//18	1	City, State Tullytown, PA	A				
Completed By (Print or Type)		Title				4	Signature		A		Data			
Gwendolyn Trumbetti		772004		ons (Coore	linator	Oignature /	M	$\Lambda / I)$		Date ID -	7.	18	
D 44				J. 13 (-5010	iatoi <		IV	VU		10	31	10	

ASB-41 MAY 11

* Do not use this form for ashestes licensum avameted activities

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1)					No	mo of Duildi	0	(0)			1	11 :	
	31 /	18	<u> </u>				ng Owner/Operator blic Schools / J		cNeck#5	2018			
Agencies Notified	Type Noti	ification	727		_	eet Address							
	☐ Initial				1	01 North 3	3rd Street	L			0.0		
☑ DOLWD						, State, Zip		I_{ij}			1 193		
☑ DHSS		dment #§	-			fillville, NJ			and the second				
DCA (NJAC 5:23-8)	☐ Emerg justific		cludi	ng		ne of Contac			1=				
(10/10/0.20/0)	☐ Cance					ob Ryan	a.		Telephone Nu				
		nation		200					609-858-53	95			
Name of Engility M/h At					F	ACILITY IN	NFORMATION						
Name of Facility Where Al		s laking	Plac	ce (3)				Type of Facility	(4)				
Millville Senior High	School							School (K-12)				
Street Address								Subchapter 8	(Other than K-1	2)	huildir	200	
200 North Wade Blvd	d.							homes, etc.)	ivate and commi	Ciciai	Dullati	igs,	
City (5)								Square Feet	# of Floors		Bldg.	Age	
Millville								200,000	2		50+	-	
County (6)					Co	unty Code (7)(STATE USE ONLY)	Current Use (Pri	or if being demol	ished)			-
Cumberland								Education			8		
Name of Monitoring Firm H					ASC	Λ No.	Name of Abateme	ent Contractor (9)				A Land	
Brinkerhoff Environn	nental Se	ervices	, Inc	.	00	100	AbateTech, Ir						
Street Address							Street Address						
1805 Atlantic Avenue	9						30 Maple Ave	PO Box 25					
City, State, Zip Code	V			7.70			City, State, Zip Co						
Manasquan, NJ 0873	6					-	- Lumberton, N						
Project Manager for Monito	ring Firm	77.		Tet	éphone	No	Telephone No.	00040	Lineman Nin				
Gary W. Fleming			/			3-2225	609-265-2107		License No.				
Start Date (10)		Schedu	led C	10000		7,0000000000000000000000000000000000000	Name of OSHA Me		00529				
4/_2_/_						18	EMSL Analyti						
Occupancy Status During A	bátement	(Check o	only	one)			Street Address						
☐ Facility Closed/Vacated I	During Ent	ire Perio	d of	Abate	ment		200 Route 130	North					
Abatement Performed O	utside of N	Iormal F	acilit	v Hou	rs - De	scribe	City, State, Zip Coo						
Time of Abatement: 7AN	1-3:30 PM/	3:30PN	1-12	AM			Cinnaminson,						
Scope of Work (Check all th	at apply)	-							2				
≥3 sf or ≥3 lf			Re	novati	ion		☐ Full Conta	inment with Nega	tive Pressure				
≥160 sf or ≥260 If				molitic			Glovebag	Procedure					
			22.0				Non-Exem Non-Exem	pted (*) and Non-	Friable Procedu	re			
Location of				Locat Iorma						Ab	atem	ent T	уре
Asbestos-Containing Mat	terial (ACN	0		d Sole		Ashast	Description of os Containing Mate	orial (ACM)		D.	D.	m	m
TO BE ABATE				intena	0.7000.700		thermal systems in		Amount (Specify	Remova	Repair	Encapsulate	Enclosure
IN Facility (13)			Cust	(12)	Staff?		surfacing, VAT, o	or	SF or LF)	Va.	-	lusc	Sur
(10)		1	es	No	N/A	1	other miscellaneou	us)				ate	(D
See Attached				П		See Attac	shad				-	_	
						See Allac	Jileu		See Attached				빌
				hits and							Ш	Ш	
			-										
Name of Registered Waste H	louis -												
	lauler			1,551,55	JDEP V auler ID		Cubic Yards of	Name of Register					
AbateTech, Inc.					18750		Vaste 12	G.R.O.W.S. L	andfill.				
Lumberton, NJ						[City, State					
completed By (Print or Type)		TH		-			12/31/18	Tullytown, P.	A				
Gwendolyn Trumbetti		Title	ra4: -	.n. 0			Signature	NN	Dat	e	21	1 (7
		Upe	ratio	ons C	oordi	nator	1 00/	11	1	1)	21	-1)	(

CV.10755		NO				SBESTOS AB AC 8:60 and 5						
Date of Notification (1)	PA	I	7	No	ma of Duildi	0 10		rs/ Job #1805	5313	Chec	k/#1	075
Agencies Notified Type No	tification				eet Address			HENT	er allegan	and a second		15
☑ EPA ☑ Initial				1	00 Wilson	Avenue	And the second s	The state of the s			Party Commen	and and
☑ DOLWD ☐ Amen				_	, State, Zip	The part of the same of the sa	1 1	# '		300	3	-//
☐ DCA ☐ Emerg	dment #_		_	1000	ewark, NJ		3	Manual Company			10	No.
	cation)	Cluali	ig		ne of Contac		-	Telephone N	imher	Ki.	and Farms	-94-04
☐ Cance	ellation			A	lex Ajith		47.7.1	716-536-6	Commence of the	4 4 6	W.H.	ો
					V. (0.000.000	FORMATION		710-000-0	H-LU	- C. S. C. S	A congruence	- Stylen acco
Name of Facility Where Abatement	is Taking	Plac	e (3)		ACILITI	ALCKING LION	Type of Facilit	24 (4)				
PVSC	9		- (-/				School (K-	F) 1005				
Street Address							Subchapte	r 8 (Other than K-	-12)			
600 Wilson Avenue							Other (i.e.,	private and comr	nercial	buildir	ngs,	
City (5)							homes, etc		- 1,	21-1-	^	
Newark, NJ							Square reet	# of Floors	1	3ldg. /	Age	
County (6)	1170-0			Cor	inty Code /7)(STATE USE ONLY	Current Hea /	Dring if hains, days	- I' - I I			
Essex				000	unity Code (/	NOTATE USE ONLY	Plant	Prior if being dem	olisnea)			
Name of Monitoring Firm Hired by Br	uilding O	wner	(8)	ASCN	1 No	Name of Abeter		N				
AECOM	anding O	wiici	(0)	AOON	// NO.	AbateTech.	nent Contractor (9	3)				
Street Address			U-year				Inc.					
30 Knightsbridge Road Suite	520					Street Address						
City, State, Zip Code	020						re. PO Box 25					
Piscataway, NJ 08854						City, State, Zip (
Project Manager for Monitoring Firm			To	lonhono	Ma	Lumberton,	NJ 08048				2	
Mark Connors				lephone	4-3606	Telephone No.	~	License No.				
Start Date (10)	Schodu	lod C	1		ate (11)	609-265-210	<u> </u>	00529				
<u>11</u> / <u>12</u> / <u>18</u>				26 /		Name of OSHA	100000000000000000000000000000000000000					
Occupancy Status During Abatement	(Check	only o	one)			Street Address				_		
☐ Facility Closed/Vacated During En	tire Perio	od of	Abate	ement		200 Route 1:	30 North					
Abatement Performed Outside of I	Normal F	acility	γ Ηοι	ırs - Des	scribe	City, State, Zip C						
Time of Abatement:AM	PM/		_PN	l	_AM	Cinnaminso						
Scope of Work (Check all that apply) ☐ ≥3 sf or ≥3 If ☐ ≥160 sf or ≥260 If		☑ Rei ☑ Dei	novai moliti			☐ Mini-End	ntainment with Ne closure g Procedure empted (*) and No		ure			
			Loca						1 30	atem	ent T	vne
Location of	V40		lorma	ally elv bv	029 ax	Description			10.50	_	T	-
Asbestos-Containing Material (ACI TO BE ABATED	VI)			ance/		tos Containing Ma thermal systems		Amount	Removal	Repair	Encapsulate	Enclosure
IN Facility		Cust		Staff?	(1.6.,	surfacing, VAT		(Specify SF or LF)	ova	Ĭ₩.	ıpsu	unso
(13)		res	(12) No	N/A	-	other miscellane	eous)		-		ilate	e e
Exterior Roof				N/A	Transite	Board		1,440 SF				
		5						1,440 01				
		-		-						Ш		
										П	П	
Name of Registered Waste Hauler			1000	JDEP V		Cubic Yards of	Name of Regis	tered Landfill				-
AbateTech, Inc.			Н	18750	TOP CALCULATE TO THE TOP CALCU	Vaste	G.R.O.W.S					
City, State				10/30		40 Disposal Date	City, State		_			
Lumberton, NJ						11/26/18	Tullytown,	PA				
Completed By (Print or Type)	Title	-				Signature	A.	D	ate .	1	0	
Gwendolyn Trumbetti	Ope	ratio	ns (Coordi	nator	(A.	WIX	1/	ate	11	X	

State of New Jersey

State of New Sersey
NOTIFICATION OF ASBESTOS ABATEMENT
(= 11.40 0.00 and 5.46)

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NOU				8							5 9 5	2 L/ 3	2 13	711	Till
Date of Notification (1)		- Sarreit					Jwne	er/Operator (2	.) 1810- 5400	Ch	eck #10710			1	
11 /	_1/	18			PSE	:&G		/ JOD #	1010- 5400		NOV -	- 5 20	19		4
Agencies Notified	Type Notificat	ion			Street A	Address				11 11	1404	5 40	.0	12-	
⊠ EPA	☐ Initial				4000	Hadley F	Road	I						1	
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☐ DCA	☐ Emergency		luding	H		of Contact				T	elephone Nun	nber			
(NJAC 5:23-8)	justification					Doming	1100				201-206-09	98			- 1
	☐ Cancellation	П	object				_								\neg
					FAC	ILITY INF	ORN	MATION	- /-	724 (4)					-
Name of Facility Where A	batement is Ta	king	Place	(3)					Type of Fac						
PSE&G Metuchen S	Switchyard								School (K-12) ster 8 (0	Other than K-1	2)			
Street Address									Other (i.	e., priva	ate and comme	ercial bui	ldings	i.	
234 Pierson									homes,	etc.)					
City (5)		-							Square Fee	t	# of Floors	Bld	g. Ag	е	
Edison, NJ															
County (6)			_		Count	v Code (7)(5	STATE	USE ONLY)	Current Use	(Prior	if being demol	lished)			
						, (//		T0/10/10/10/10/10/10/10/10/10/10/10/10/10	Switchy	ard					
Middlesex	I I'm a bu Duildi	O	upor /s	2) /	SCM N	Jo I	Name	e of Abateme	ent Contracto	or (9)					
Name of Monitoring Firm		ng O	wilei (d	, ,	(JOIN I	10.		ateTech, I							
Health & Safety Ser	rvices							t Address	10.						
Street Address						,		Maple Ave	DO Boy	25					
PO Box 365															\neg
City, State, Zip Code				and the state of t	St. Carlotte party management			State, Zip Co							
Berlin, NJ 08009	,	and the same of th					200	mberton, N	NJ 08048		1 ·				-
Project Manager for Mon	itoring Firm			Telep	hone N	No.		ohonè No.			License No.				
Jim Proctor				60	9-839-			9-265-2107			00529				_
Start Date (10)	S	chedu	led Co	mplet	ion Dat	e (11)	Nam	e of OSHA N	lonitor						
11 / 5/1	18				_ / _		11000000	/ISL/Analyt	ical						-
Occupancy Status During	Abatement (C	heck	only o	ne)		-	- Marrie	ef Address							
☐ Facility Closed/Vacate	ed During Entire	e Peri	iod of A	Abaten	nent	Anna San San San San San San San San San		0 Route 13							_
☐ Abatement Performed	Outside of No	rmal-	Facility			cribe		State, Zip Co							
Time of Abatement:	AM	PIV	I/	_PM-		AM	Ci	nnaminsor	n, NJ 08077	7					
Scope of Work (Check a	I that apply)	60120						Π F # 0	Lainea ant with	h Nogat	tive Pressure				
E			⊠ Rei	novatio	nn.			Mini-End		INCYA	ave i ressure				
≥3 sf or ≥3 lf			Dei					☐ Gloveba	a Procedure						
								Non-Exe Non-Exe	mpted (*) ar	d Non-	Friable Proced		es a mesa.		
				Locati								Ab	ateme		
Location	of			Iormal d Sole				Description of	of		Amount	Re	Repair	Encapsulate	Enclosure
Asbestos-Containing)		intena		Asbes	tos C	containing Ma mal systems	insulation.		(Specify	Removal	pair	cap	dos
TO BE ABA			Cust	odial	Staff?	(1.0.,	SL	urfacing, VAT	, or		SF or LF)	<u>a</u>		sula	ure
(13)	icy			(12)	_		oth	er miscellane	eous)					te	
X 201 AX			Yes	No	N/A								-		
Control House					\boxtimes	Transite	Foo	or Panels		_	85 SF				
Control House						Roof Fla	shir	ng			120 LF				
														Ш	
Name of Registered Wa	eta Haular				JDEP \	Naste	Cub	ic Yards of	Name of	Registe	ered Landfill				
AbateTech, Inc.	Sie Haulei			1720	lauler II 18750	O No.	Was		G.R.C	.W.S.	Landfill				
City, State					10100			osal Date	City, Sta						
Lumberton, NJ							11	1/16/18	Tullyt	own, F	PA				
	[uno)	Title				1		Signature				Date ,	t	0	
Completed By (Print or				ione	Coord	inator		($m\Lambda/2$	ľ		Date	i /	10	
Gwendolyn Trumb	etti	1	heigi	CIIO	Jooru			7	VVV			050, 35			

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Date of Notification (1) 11 /	1 /	18				e of Buildin rizon	ng Ov	wner/Operator (2	2)		4-4	- A	198	12.00
Agencies Notified	Type Notific	ation			Stree	t Address				HON HO	/-	5 2	2018	
⊠ EPA					100.000	messa casactasis	ntac	omery Place,	Lower Level					-
□ DOLWD	☐ Amende	T. 10				State, Zip (and the second s	201101 20101	ASSEST			+24.0	
□ DHSS	Amendm					tsburgh,				P.O.L.O.	L.EA	341	1177 1	- Ct
DCA (NJAC 5:23-8)	☐ Emerger justificati		iciuain	3	-	of Contac				Telephone Numb	er	A Restriction of	PRESIDENT	1000000
**************************************	☐ Cancella				An	thony Po	orta			412-633-402				
					FA	CILITY IN	NFO	RMATION						
Name of Facility Where A	Abatement is	Takin	g Place	(3)			-		Type of Facility ((4)			-	-11
Verizon Cedarville	C.O.								School (K-12	0.000				
Street Address							-		Subchapter 8	(Other than K-12)				
89 Maple Avenue									homes, etc.)	ivate and commerc	cial bi	nildiné	gs,	
City (5)									Square Feet	# of Floors	В	dg. A	ge	
Cedarville												J	-	
County (6)			1.50.11-2		Cour	nty Code (7	7)(ST	ATE USE ONLY)	Current Use (Pri	or if being demolis	hed)			
Cumberland									Office					
Name of Monitoring Firm	Hired by Buil	ding (Owner	(8)	ASCM	No.	Na	ame of Abateme	nt Contractor (9)			-	-	
USA Environmenta	l Managem	ent					1	BRISTOL EN	VIRONMENTAL	., INC.				
Street Address							Str	reet Address			Silles (S			
8436 Enterprise Ave	е							1123 BEAVER	RSTREET					
City, State, Zip Code							Cit	ty, State, Zip Co	ode					
Philadelphia, PA 19							E	BRISTOL, PA	19007					
Project Manager for Moni	toring Firm			Tele	phone	No.	Те	lephone No.		License No.				
Mark Jenkins					15-365		2	215-788-6040		00509				
Start Date (10)					tion Da		20,000	me of OSHA M						
		-			/	18	_ E	BRISTOL EN	/IRONMENTAL	., INC.				
Occupancy Status During							100,000	reet Address						
☐ Facility Closed/Vacate ☐ Abatement Performed						ariba		1123 BEAVER						
Time of Abatement:						cribe	1 222	y, State, Zip Co						
			************				-	BRISTOL, PA	19007					
Scope of Work (Check all ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	тпат арріу)		⊠ Re	novat molitic	77 C. C.			☐ Mini-Encl	Procedure	ative Pressure				
			Is	Locat	ion	1	10-51	L Non-Exer	inpled () and Nor	i-Friable Procedure	1			
Location				Vorma				Description of	:			atem		T
Asbestos-Containing N TO BE ABA		1)		d Sole intena				Containing Mat		Amount	Removal	Repair	nca	Enclosure
IN Facilit			Cus	100000000000000000000000000000000000000	Staff?	(1.6		ermal systems in surfacing, VAT,		(Specify SF or LF)	ova	ar.	sde	nso
(13)			Vaa	(12)	N1/A	-		ther miscellaned		,	-		Encapsulate	9
1 st Floor Generator Re	oom		Yes	No 🖂	N/A	Floor til	le ai	nd mastic		160 SF		П	П	П
1st Floor Outside Gen	erator Rooi	m		\boxtimes	П	Floor til	le ai	nd mastic		14 SF				
1st Floor New General						700		nd mastic		200 SF		П		
1st Floor generator ro	om		П	\boxtimes		Vibratio	on C	loth		2 SF				H
Name of Registered Wast					JDEP V		-	bic Yards of	Name of Regist			ш	ш	
SERVICE TRANSPO		P, INC). 	24 99	auler II 20990	O No.	Wa	aste	MINERVA L					
City, State YARDLEY, PA 1906	7						Dis	posal Date	City, State WAYNESBU	JRG, OH 44688	4			
Completed By (Print or Ty Brian Scafiro	pe)	Title	stimat	tor				Signature	Calina	Date /	e /	1 -	18	

(12) Poi	2 PA	NOT		NOITA	OF ASE	ew Jersey BESTOS ABAT C 8:60 and 5:16			region compared to a	or r		
104 67	· A A		١٠.٠					<u> </u>		4 1	a i	1 1
Date of Notification (1)	1 / 1	8			of Building izon	Owner/Operator (2	2)	1.			The same and	
Agencies Notified	Type Notification	n		Street	Address			NOV =	5 20	18		.0
⊠ EPA	Initial Initial			15	East Mon	tgomery Place,	Lower Level					
□ DOLWD	☐ Amended			City, S	State, Zip C	ode		A			1	
□ DHSS	Amendment			Pitt	sburgh, l	PA 15212		1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -			4.5	
DCA (NJAC 5:23-8)	Emergency (including	l	Name	of Contact	<u> </u>		Telephone Numb	per			- 10
(110/10/0.20/0)	☐ Cancellation			Ant	hony Po	rta		412-633-402	1			
				FΔ	CILITY IN	FORMATION						
Name of Facility Where A	Abatement is Taki	ng Place	(3)				Type of Facility ((4)				
Verizon Cedarville			1.57				School (K-12					
Street Address		_						Other than K-12		Idinaa		
89 Maple Avenue							homes, etc.)	rivate and commer	ciai buli	angs	1	
City (5)				-			Square Feet	# of Floors	Bld	g. Age	е	
Cedarville							parameter Secretaria de Comencia de Come	(1) 1 (1) 2 (1) 2 (2) 2				
County (6)				Cour	nty Code (7)(STATE USE ONLY)	Current Use (Pri	or if being demolis	shed)			
Cumberland					, (.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Office	•				
Name of Monitoring Firm	Hired by Building	Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
USA Environmenta			(0)				VIRONMENTAL					
Street Address	. managomon		-			Street Address						
8436 Enterprise Av	re					1123 BEAVE	R STREET					
City, State, Zip Code						City, State, Zip C						
Philadelphia, PA 19	9153					BRISTOL, PA						
Project Manager for Mon			Tel	ephone	No.	Telephone No.		License No.				-
Mark Jenkins	moning i min		1	15-365		215-788-6040)	00509				
Start Date (10)	Sch	eduled C				Name of OSHA N	Monitor					
11 /26 /	7.00004		March 1997	0_/		BRISTOL EN	VIRONMENTA	L, INC.				
Occupancy Status Durin						Street Address						
☐ Facility Closed/Vacat						1123 BEAVE	The same and the s					
Abatement Performed Time of Abatement:						City, State, Zip C						
		-1001.000			8	BRISTOL, PA	4 19007				-	_
Scope of Work (Check a	Il that apply)					⊠ Full Con	tainment with Neo	gative Pressure				
≥3 sf or ≥3 lf		Second .	enova			☐ Mini-End	closure	,				
≥160 sf or ≥260 lf			emolit	ion		☐ Gloveba	g Procedure	n-Friable Procedu	ire			
			s Loca	ation		☐ 14011-EXE	empted () and 140	ni-i nable i roccuo	1	ateme	ent Ty	vne
Location	n of		Norm	ally		Description	of					
Asbestos-Containing	Material (ACM)			lely by ance/		estos Containing Ma		Amount	Removal	Repair	nca	Enclosure
TO BE AB		5.000		I Staff?	(i.e	e., thermal systems surfacing, VAT		(Specify SF or LF)	ova	≝.	psu	nso
(13)			(12	2)		other miscellane		0. 0. 2. /	_		Encapsulate	e
100		Yes	No	N/A			21-				10	
1st Floor Electrical A	rea		\boxtimes		Floort	ile and mastic		65 SF	\boxtimes			
	0.41		lп								П	Г
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							28			Ш	Ш	L
Name of Registered Wa	ste Hauler		1	NJDEP	Waste	Cubic Yards of	Name of Regi	stered Landfill				
SERVICE TRANSP	ORT GROUP,	INC.	1	Hauler		Waste	MINERVA	LANDFILL				
City, State		(C) (C) (C) (C) (C)		2099	U	Disposal Date	City, State					
YARDLEY, PA								BURG, OH 4468	8			
Completed By (Print or	Type)	Γitle				Signature			ate			
Brian Scafiro	. , , , ,	Estima	ator			Rain	n Scal	110/m	11-	-/-	-/8	*
ASB-41 P C 1 P 1 7 1						1)40	1 3 00-1		ιι	1		_

ASB-41 BS 18126

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

()()()	16		(Pu	rsuant	to NJAC	8:60 and 5:16)	•	退息	L. Y.			
Date of Notification (1)	7 /				A	Owner/Operator (2)			- 5 20	10		
/	31 / _	18				munications			NOV -	5 20	10	1	
Agencies Notified	Type Notifica	ition		Street A		<u></u>		1					1
☐ EPA					Church	aller A second		-	- LANGE 1877		100 h	Ċ.	- :
⊠ DOLWD		ent # <u>1-11/1/</u>	18		ate, Zip Co								400
☑ DOH ☐ DCA	☐ Emergend		_	- Constitution		IJ 08002		1.00	Talanhana Num	hor			-
(NJAC 5:23-8)	justification			0.000000	of Contact				Telephone Num 917-992-135				
28/2007 2000 POUS-109	☐ Cancellat	ion		Chai	les Mes	sing			917-992-130	00		-	-
				FAC	ILITY IN	FORMATION							_
Name of Facility Where	Abatement is T	Taking Place	(3)				Type of Fac		ł)				
Verizon Cherry Hill	C.O.						School of Subchar	K-12)	(Other than K-12	2)			
Street Address							Other (i.	e., priv	vate and comme	rcial bui	dings		
2501 Church Road							homes,	oscolospoja il	T., (5)	DIA	~ ^~		_
City (5)							Square Fee	et	# of Floors	10 8	g. Age -50		
Cherry Hill							20,051	(D :	2		-50		
County (6)				Count	y Code (7	(STATE USE ONLY)	100.000.000.000.000.000.000.000		or if being demoli	snea)			
Camden							Verizon						_
Name of Monitoring Firm	Hired by Buil	ding Owner	(8)	ASCM I	No.	Name of Abatem			INC				
TTI Environmental						BRISTOL EN	VIRONME	NIAL	., INC.				
Street Address						Street Address							
1253 North Church	Street					1123 BEAVE							
City, State, Zip Code						City, State, Zip C							
Moorestown NJ 08	8057					BRISTOL, PA	19007		Lissana No			-	-
Project Manager for Mon	nitoring Firm			ephone		Telephone No.			License No.				
Kris Smith				09-313		215-788-604			00509				-
Start Date (10)	1	Scheduled (Name of OSHA		NTAL	INC				
	18	11	2	2_ / _	18	BRISTOL EN	IVIRONIVIE	NIAL	_, INC				
Occupancy Status Durin	ng Abatement	(Check only	one)			Street Address		<u> </u>					
☐ Facility Closed/Vaca	ted During Ent	tire Period of	Abate	ement		1123 BEAVE		Ē.					
	ed Outside of N	Normal Facili	ty Hou	urs - Des	cribe	City, State, Zip C							
Time of Abatement:	AIVI	PIVI/ <u>5.0</u>	<u>U</u> F IVI-2	2.00AW		BRISTOL, P	A 19007						
Scope of Work (Check	all that apply)					⊠ Full Co	ntainment wi	th Nec	gative Pressure				
≥3 sf or ≥3 lf		⊠R	enova	ation		☐ Mini-En	closure						
□ ≥160 sf or ≥260 lf			emoli	tion		☐ Gloveb	ag Procedur	e Ind No	n-Friable Proced	dure			
			s Loc	otion	Ι		criptod () c				atem	ent Ty	уре
I a series			Norm			Description	of				-		
Location Asbestos-Containin		.((/()		olely by	Asb	estos Containing N	laterial (ACN	1)	Amount	Removal	Repair	Encapsulate	Enclosure
TO BE A	BATED	I IV		nance/ al Staff?	(i.	e., thermal system surfacing, VA	s insulation, Tor		(Specify SF or LF)	oval	=	nsc	sure
IN Fac			(12			other miscellar	eous)		American Institution (In			ate	
(10	,	Yes	N	o N/A							_		
Frame Area			П		VAT O	nly			40 SF				Ш
Traine 7 ii ou			T		1								
				100	-							П	П
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Name of Registered W	aste Hauler			NJDEP		Cubic Yards of	100		stered Landfill				
SERVICE TRANS		UP, INC.		Hauler 2099		Waste	MINE	:RVA	LANDFILL				
City, State				2000	-	Disposal Date	City, St						
Yardley, PA						TBD	WAY	NES	BURG, OH				
Completed By (Print or	r Type)	Title				Signature)	_	100	Date	,	1 [
Dillan DeCaro	75-7	Estin	ator			Diel	an De	an	10/9h	11-	1-1	8	

CMU# 3461

Date of Notification (1)				N	lame of	Building (Owner/Operator (2	2)						1
10 /	31 / 1	8			Verizo	on Comn	nunications							
Agencies Notified	Type Notificatio	n	-	s	treet A	ddress								
	☑ Initial	600			2501	Church I	Road							
DOLWD Q230	☐ Amended			C	ity, Sta	te, Zip Co	de							
DOH9336	Amendment				Cherr	y Hill, N	J 08002							
☐ DCA	Emergency (justification)		g	N	lame of	Contact	-		Telephone Num	ber				
(NJAC 5:23-8)	☐ Cancellation				Charl	es Mess	ing		917-992-135	6				
				1	FACI	LITY INF	ORMATION							
Name of Facility Where	Abatement is Tak	ing Plac	e (3)					Type of Facility	(4)					
Verizon Cherry Hill			- (-)					School (K-1						
Street Address	0.0.							☐ Subchapter	8 (Other than K-12 rivate and comme	rcial b	uildi	ngs.		
2501 Church Road								homes, etc.					Ď.	
								Square Feet	# of Floors	В	ldg.	Age		
City (5) Cherry Hill								20,051	2		+-{	50		
County (6)					County	Code (7)(STATE USE ONLY)	Current Use (P	rior if being demoli	ished)				
Camden					•			Verizon						
Name of Monitoring Firm	Hired by Ruildin	a Owne	r (8)	TA	SCM N	0.	Name of Abateme	ent Contractor (9)					
TTI Environmental		g Owno	(0)					VIRONMENTA						
				_			Street Address			7.1				
Street Address 1253 North Church	Street				20		1123 BEAVE	R STREET						
	1 30 661						City, State, Zip C	ode						
City, State, Zip Code Moorestown NJ 08	2057						BRISTOL, PA	19007						
Project Manager for Mor			Te	lep	hone N	0.	Telephone No.		License No.			3.5		
Kris Smith	intorning i iiiii				9-313-		215-788-6040)	00509					
Start Date (10)	Sc	heduled	- 1			111/2/10/10/11	Name of OSHA	Monitor			725			
11 / 15 /	1,000	11				Walliam Color	BRISTOL EN	IVIRONMENT	AL, INC					
					100000		Street Address	CALIFORNIA DE LA CALIFO						
Occupancy Status Durin	ng Abatement (Ci	Period	of Aha	ten	nent		1123 BEAVE	R STREET						
☐ Facility Closed/vaca	ed Outside of Nor	mal Fac	ility Ho	urs	- Desc	ribe	City, State, Zip C							
Time of Abatement:	AM	PM/5:	00PM	2:0	00AM		BRISTOL, PA							
Scope of Work (Check	50 TO 100		-	_					20 1525					
Scope of Work (Check	all triat apply)								egative Pressure					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renov Demol				☐ Mini-En ☐ Gloveba	ciosure ag Procedure						
∐ ≥160 st or ≥260 if			Demo	itio			☐ Non-Ex	empted (*) and I	Non-Friable Proced					
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Locatio	n of	١.	Norr Ised S				Description stos Containing M	of	Amount	3	D	Re	Enc	Enc
Asbestos-Containin			Mainte			Asbe:	stos Containing iv ., thermal systems	s insulation,	(Specify	3	Pamoval	Repair	Encapsulate	Enclosure
TO BE AS		C	ustodi		Staff?	(surfacing, VA	T, or	SF or LF)	1	2		sula	ure
(13		-		2)	1 1/0		other miscellan	eous)					e	
		Y	es n	10	N/A				40.05		3		П	
Frame Area]_	\boxtimes	VAT Or	nly	100-400-00-00-00-00-00-00-00-00-00-00-00-	40 SF	-	7			
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			J L	_			Cubic Yards of	Name of Do	gistered Landfill		-	_		
Name of Registered W					IJDEP \ lauler II		Waste	The second secon	A LANDFILL					
SERVICE TRANS	PORT GROUP	, INC.		1	20990				A LANDI ILL					
City, State							Disposal Date	City, State	EDUDO OU					
Yardley, PA							TBD	WAYNE	SBURG, OH	D :				
Completed By (Print or	Type)	Title				100	Signature	\wedge \circ	100	Date /	, r.	-1	-1	P
Dillan DeCaro		Esti	mato	r			Dull	en DeCe	noly	10	1-2	>(10	1

CK# 1145 PAID

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

							111	111				11	1 - 11
Date of Notification (1) 11/03/2018		0-1900-000	of Building (Houstor		Operator	(2)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		NOV	- 5	2018	and the second first	11
Agencies Notified Type Notification			Address					- 1				- 1	- 84
□ EPA		Street	Address					1.				-8.	
DEP Amended		City, St	ate, Zip Cod	de			(-)	1-14-			1	T	_
X DOL Amendment #		Berg	enfield, N	J 0762	21								
Emergency (ir justification)	ncluding	-	of Contact					Tel	ephone N	Jumber			
DCA Cancellation		Carl						1 101	opilono i	101111001			
		FAC	ILITY INFO	RMATI	ON			1 -					
Name of Facility Where Abatement is Taking	Place (3)					Туре	of Facility	(4)					_
Private home						П	School (K-1	12)					
Street Address						П	Subchapter		er than K	-12)			
						×	Other (i.e. p	orivate a	& comme	rcial bu	ildings	, hom	es,
City (5)						Sau	etc.) are Feet	# 0	f Floors		Bldg.	Δαρ	
Bergenfield						- oqui		" 0	1110013		Diag.	nge	
County (6)		County	Code (7)			Curr	ent Use (Pri	or if bei	na demol	lished)			
Bergen		(STATE	USE ONLY)										
Name of Monitoring Firm Hired by Building O	wner (8)	ASC	M No.		Name	of Aba	atement Cor	ntractor	(9)		-		
							Safety LI		(-)				
Street Address					Street								-
					8 Cr	osby	Ave						
City, State, Zip Code					2807.1-2-		Zip Code						
							, NJ 0750	2					
Project Manager for Monitoring Firm		Telepho	one No.		Teleph				License	No			
					973-				01332				
Start Date (10)	Scheduled C	completion	Date (11)				HA Monitor		01002				
1 1 1 1 2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2	11/16/201	575			sam								
Occupancy Status During Abatement (Check	Only One)				Street								
Facility Closed/Vacated During Entire Pe		ement											
Abatement Performed Outside of Norma	I Facility Ho	urs		1	City, S	tate. 2	ip Code						
Other – Describe: normal hours				_		070000000000000000000000000000000000000							
Scope of Work (Check All That Apply)	_										-		
≥3 sf or ≥3 if	X Pone	vation				1 -	II O 4 - 1						
≥ 160 sf or ≥260 lf		olition			×		II Containm		Negative	e Press	ure		
					L	GI	ovebag Pro	cedure					
			Т			l No	n-Exempte	d (*) an	d Non-Fri	able Pr			
	Is Loc											ement ype	t
Location of Asbestos-Containing Material (ACM)	Norn Used Se				scription					-	т.	ype	
TO BE ABATED	Mainte	nance/			aining N systems		I (ACM)		mount Specify	71		回	m
In Facility	Custodia (1)		(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		cing, VA		adon,		or LF)	(em	Repair	cap	nclc
(13)	(1)	-/		other m	niscellar	reous)				Remova	air	Encapsulate	Enclosure
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Basement		х		Flo	oor tile	S		20	90 SF	x	1	x	
									70 01		-	^	-
		_	-										
Name of Registered Waste Hauler		NJDEP V Hauler ID	100701-70707070	Cubic '			Name of	Registe	red Land	fill	-	1	
Removal Safety LLC		003700		of Was	sie		GROW	S No	th				
City, State				Dispos	al Date		City, Stat	e					
Paterson, NJ				TBD			Morris		Α				
Completed by	Title			Si	ignature	7,	11	ĵ		Date	1000		
Lasko Veskov	Preside	nt		à	Copl	0	Less	icr		11/03	/201	3	

(Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 11 02 18 County of Passaic Agencies Notified Type Notification Street Address **EPA** ☐ Initial 401 Grand Street **⊠** DOLWD City, State, Zip Code **⊠** DHSS Amendment #2 Paterson, NJ 07505 ☐ DCA ☐ Emergency (including (NJAC 5:23-8) justification) Name of Contact Telephone Number ☐ Cancellation Andrew Thompson (973) 881-4424 **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Passsaic County Courthouse Annex Building School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e., private and commercial buildings, 63 Hamilton Street homes, etc.) City (5) Square Feet # of Floors Bldg. Age Paterson 40,000 4 127 yrs County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Passsaic Vacant Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Langan 00099 Superior Abatement Inc Street Address Street Address 300 Kimball Drive 2 Henderson Drive City, State, Zip Code City, State, Zip Code Parsippany, NJ 07054 West Caldwell, NJ 07006 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Vijay Patel (973) 560-4900 (973) 808-1616 00411 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor __07__ / _23 / 18 02 / 05 / 19 Superior Abatement Inc. Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 2 Henderson Drive Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: _AM-3:30PM/11:30PM-___AM West Caldwell, NJ 07006 Scope of Work (Check all that apply) ≥3 sf or ≥3 lf □ Renovation ≥160 sf or ≥260 lf ☐ Demolition Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Used Solely by Asbestos-Containing Material (ACM) Removal Encapsulate Enclosure Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED (i.e., thermal systems insulation, (Specify Custodial Staff? IN Facility surfacing, VAT, or SF or LF) (13)(12)other miscellaneous) Yes No N/A Ground, 1st, 2nd Floors \boxtimes Wall and Ceiling Plaster 1,800 SF \boxtimes Attic Areas \boxtimes Pipe Insulation 100 LF X 2nd, 3rd floor, Attic Areas X Wall and Ceiling Plaster 17,300 SF \boxtimes 2nd, 3rd floor, Attic Areas X Contaminated Ceiling Pane/Board 3,600 SF Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. Service Transport Group, Inc. Waste Minerva Landfill SW2117 400 City, State Disposal Date City, State New Castle, DE Various Waynesburgh, OH Completed By (Print or Type) Title Signature Date Nick Petrovski President

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

Second Type Notification Initial Street Address A91 Grand Street A92 Grand Street A91 Grand St					(Purs	uant to N	JAC 8:60 and 5	:16)		210	1.7	-	001
Agendes Notified Type Notified Type Notified Street Address Stre	Date of Notification (1)		-		N	ame of Bulk	ding Owner/Operato	r (2)	11111	NU	γ.	<u> </u>	2018
Second Street Second Stree	9 / 11	1_	18										
State Stat	·		on		St	reet Addres	s						-
September Sept					1.	401 Grand	Street						
Paterson, NJ 07805 Name of Facility Where Abstement is Telephone Number Geral Ball Address Stock Addre	257 LA116		Date J		CI	ty, State, Zi	o Code						
Name of Facility Where Abstement Is Telding Place (3) Passasalc Country Courthouse Annex Building Type of Facility (4) School (6-(12)				lina		댓 맛이 맛이 됐							
Andrew Thompson FACILITY INFORMATION Name of Facility Where Abstement is Taking Place (3) Passasalc Country Courrhouse Annex Building Street Address 63 Hamilton Street County Code (7)(STATE USE ONL*) County (6) Paterson County (7) County Code (7)(STATE USE ONL*) County (7) County (8) Passasalc County (9) Passasalc County (9) Passasalc County (9) County Code (7)(STATE USE ONL*) Countret Use (Prior if being demolished) Vacant Name of Monitoring Firm Hired by Building Owner (8) ASCM No. County (9) Superior Abstement Contractor (9) Superior Abstement Inc Street Address 300 Kimball Drive City, State, 2p Code Parsippany, NJ 97054 Project Manager for Monitoring Firm Telephone No. (973) 580-4900 City, State, 2p Code Parsippany, NJ 97054 Project Manager for Monitoring Firm Telephone No. (973) 580-4900 City, State, 2p Code Parsippany, NJ 97054 Project Manager for Monitoring Firm Telephone No. (973) 580-4900 City, State, 2p Code Parsippany, NJ 97054 Project Manager for Monitoring Firm Telephone No. (973) 580-4900 City, State, 2p Code Parsippany, NJ 97068 Project Manager for Monitoring Firm Telephone No. (973) 580-4900 City, State, 2p Code Parsippany, NJ 97068 Project Manager for Monitoring Firm Telephone No. (973) 580-4900 City, State, 2p Code Wast Caldwell, NJ 97006 Parsippany, NJ 97068 Project Manager for Monitoring Firm Telephone No. (973) 580-4900 City, State, 2p Code Wast Caldwell, NJ 97006 Parsippany, NJ 97008 Parsippany, NJ 97008 Parsippany, NJ 97008 P	(NJAC 5:23-8) justii	fication)		an 124					Talant				
Name of Facility Where Absternent is Taiding Piace (3) Passasalc Country Courrhouse Annex Building School (N-12) School (N-12) School (N-12) School (N-12) School (N-12) School (N-12) Subchapter 8 (Dire than K-12) Other than K-12) Other than K-12 Other than K	☐ Cano	cellation	1		1	Andrew Ti	hompson						
Name of Facility Where Abstement is Tating Place (3)									(813)	007-447	24		
Passasic County Courthouse Annex Bulliding Street Address 63 Hamilton Street City (5) Paterson County (6) Passasic County (7) Passasic County (7) Passasic County (7) Passasic County (8) Passasic County (8) Passasic County Code (7) STATE USE ONLY) Passasic County (8) Passasic County Code (7) STATE USE ONLY) Passasic Coll, Siste, Zp Code Parsippany, NJ 07064 Telephone No. (673) SSA 146 Couperoy Sistes During Abstracent (Check only one) 1 1 1 05 1 18 Couperoy Sistes During Abstracent (Check only one) 11 1 05 1 18 Couperoy Sistes During Abstracent (Check only one) 12 and one of State During Abstracent (Check only one) 13 af or 23 if 2 fill of or 2260 if Passasic Coestion of Asbeston-Containing Meterial (ACM) 10 State Address Coestion of	Name of Facility Where Abatemen	t is Taki	ing Pla	ice (3)		***************************************	HOI CHAMAITOR	Time of Facility	- (4)				
Subcharplane (Clove than K-12) Subcharplane (Clove than K-12) Subcharplane (Clove (Parterson	Passsaic County Courthou	se Anr	nex B	uildir	ng								
City (5) Paterson County (6) Paterson Square Feet 6 of Floors 6 of Floor	Street Address				_			── Subchapte	R 8 (Other the	n K-12)			
Paterson County (6) Passasic County (7) Passasic Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Langan Name of Monitoring Firm Hired by Building Owner (8) Langan Name of Monitoring Firm Hired by Building Owner (8) Langan Streat Address 300 KImball Drive City, State, Zip Code Parelippany, NJ 07054 Policet Manager for Monitoring Firm Vijay Patel Start Dete (10) 07 / 23 / 18 Scheduled Completion Data (11) 10 / 05 / 18 Scheduled Completion Data (11) 11 / 05 / 18 Superior Abatement Inc Streat Address 2 Henderson Drive City, State, Zip Code West Caldwell, NJ 07008 Very State, Sign Code West Caldwell, NJ 07008 Very State Very State Very St								Uther (Le.,	Drivate and c	commerc	ial bu	ıllding	s,
County (6) Passasaic Name of Monitoring Firm Hired by Building Owner (8) Langam O0099 Street Address 300 Kimbail Drive City, State, 216 Code Parelippany, NJ 97054 Pocuparcy Status During Absternant (Check only one) Street Address 2 Henderson Drive City, State, 216 Code Parelippany, NJ 97054 Pocuparcy Status During Absternant (Check only one) Street Address 2 Henderson Drive City, State, 216 Code Parelippany, NJ 97054 Pocuparcy Status During Absternant (Check only one) Stant Date (10) O7 / 23 / 18 Scheduled Completion Date (11) O7 / 23 / 18 Scheduled Completion Date (12) O0411 Scheduled Completion No. Situation of Ode (11) O05 / 18 Scheduled Completion No. Scheduled Non-Frieble Pressure Mini-Enclosure Mi	• • • •										7=	50.0	
County Code (7)(STATE USE ONLY) Vacant									1	ors			
Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abstament Contractor (9)					Co	ounty Code	(7)(STATE USE ONLY)			dom all I		127 y	75
Name of Monitoring Firm Hired by Building Owner (8) ASCM No. 00099 Superior Abatement Inc									non a possig (Demonsh	9 a)		
Street Address 300 KImball Drive 2 Henderson Drive City, State, Zip Code Parelippany, NJ 07054 Parelippany, NJ 07064 Parelippany, NJ 07054 Parelippany, NJ 07068 Parelippany, NJ 07054 Parelippany, NJ 07068 Parelippany, NJ 07068 Parelippany, NJ 07054 Parelippany, NJ 07068 Parelippany, N		Building	Owne	r (8)	ASC	M No.	Name of Abatem		9)				
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City, State, Zip Code													
Parsippany, NJ 07054 Project Manager for Monitoring Firm Vijay Patel Start Date (10) 07 / 23 / 18 11 / 05 / 18 Scheduled Completion Date (11) 11 / 05 / 18 Superior Abatement Inc Supe							2 Henderson	Drive					
Telephone No. 1			2300				City, State, Zip C	ode					
Telephone No. Telephone No. (973) 580-4800 (973) 888-1616 (973)							West Caldwa	II, NJ 07008					
Start Date (10)				Te	ephon	e No.			License I	No			
Documency Status During Abatement (Check only one)	The state of the s						(973) 808-161	6					
Street Address Stre		Sched	duled (Compl	etion D	ate (11)	Name of OSHA N	lonitor					-
Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement _AMPMAM			11_	/ _0	5 /	18	Superior Aba	tement Inc					
Abstement Performed Outside of Normal Facility Hours - Describe Time of Abstement _ AMPM/PMAM	Occupancy Status During Abatemen	t (Checi	k only	one)			Street Address						
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Scope of Work (Check all that apply) Scope of Work (C	Time of Absternent: AM-	Normal PM/	Facili	y Hou	rs - De	scribe	City, State, Zip Co	de					
≥3 sf or ≥3 if							Wast Caldwe	I, NJ 07006					
Demolition Description of North-Exempted (*) and North-Friable Procedure Abatement Typ Description of Asbestoe Containing Material (ACM) Amount (Specify SF or LF) North-Exempted (*) and North-Friable Procedure Abatement Typ Asbestoe Containing Material (ACM) Amount (Specify SF or LF) North-Exempted (*) and North-Friable Procedure North-Exempted (*) and North-Exempted	cope of Work (Check all that apply)										_	_	
Location of Asbestos-Containing Material (ACM) Asbestos-Containing Material (ACM) IN Facility (13) Containment) 2 nd , 3 rd & Attics Custodial Staff? (12) Yes No N/A Containment) 2 nd , 3 rd & Attics Custodial Staff? (12) Yes No N/A Containment) 2 nd , 3 rd & Attics Custodial Staff? (12) Yes No N/A Containment) 2 nd , 3 rd & Attics Custodial Staff? (12) Yes No N/A Containment) 2 nd , 3 rd & Attics Custodial Staff? (12) Yes No N/A Containment) 2 nd , 3 rd & Attics Custodial Staff? (12) Yes No N/A Pipe Insulation 100 LF Custodial Staff. (Specify SF or LF) Custodial Staff. Custodial Staff. (Specify SF or LF) Custodial Staff. (Specify SF or LF) Custodial Staff. Custodial Staff. Custodial Staff. (Specify SF or LF) Custodial Staff. Custodial Staff. Custodial Staff. (Specify SF or LF) Custodial Staff. Custodial Sta]≥3 sfor≥3 lf ☑≥160 sfor≥260 lf						⊠ Mini-Enci	osure Procedure					
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Maintenance Custodial Staff? (12) Yes No N/A N/A		M I					Description of			_			
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ttic Areas			Yes	-	N/A		other miscellaneo	us)			-	law	8
Add, 3rd floor, Attic Areas Ind., 3					\boxtimes					I	7/1	1/	1/
Id., 3 rd floor, Attic Areas Id., 3 rd floor, Attic Areas						Pipe Ins	ulation		100 LF	_	_	_	-
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me of Registered Waste Hauler Service Transport Group, Inc Sw2117 Sw2117 Disposal Date Various Wagnesburgh, OH Title President NJDEP Waste Hauler ID No. SW2117 Disposal Date Various City, State Waynesburgh, OH Date 9-1/-18						Contami	nated Ceiling Pa	ne/Board	3,600 SE		-		_
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New Castle, DE Impleted By (Print or Type) Itick Petrovski President Various Waynesburgh, OH Signature 9-1/-18					31121								
mpleted By (Print or Type) Title Signature Date 9-1/-18	lew Castle, DE							- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	ch OH				
Fresident President 9-1/-18	npleted By (Print or Type)	Title					1-	- Jiloouui	811, 011				
41 / 1/1-18	lick Petrovski	Pre	sider	ıt				/ ///				, .	0
							1/1/1	- 1/18/2	rn'	17-	11	-/6	5

State of NJ

Notification of Asbestos Abatement

NIAC 8:60-7 and 12:120-

B & G proj. #:	2018-225	_ P	AIR				and 12:120-7)	j - 13	Check#	9330	7 V f	7 52		
U 7 9	000							111	计信息	7 17 1	, 17	Ü-	, 1	
Date of Notification		N	ame of Bui	ilding Owne	er/Operator (2)				VIIII	distribution of the second	20.00	10 10		A STATE OF THE PARTY OF THE PAR
11 11 1/10 12]/[1]8]	- 11	Northwe	st Berger	n County Ut	tilities	Authority		111	=	204			1
Agencies Notified	Type Notification	on S	treet Addre	ss				111	III NO	V 5	201	Ö	April	41
☐ EPA ☐ DEP	▼ Initial		9511	koff Aven	ue									
X DOL	Amendm		ity, State, 2 Waldwid	Zip Code ck, NJ 07	463				Paratic			, C 	? ~~	
X DOH		N	ame of Cor	ntact					Telephone	Number				
☐ DCA	Cancella	ition	James	Rotundo					201-447	7-2660				
			+5	FACI	LITY INFORM	ATION								
Name of facility wh	nere abatement is	s taking pla	ice (3)					Туре	of Facility (4)					
Sludge Handl	er Building W	WTP							School Subchar	(K - 12) pter 8 (Ot	her th	an K-	12)	
Street Address	ENVE				49				Other (P	rivate/Co lomes, etc	mmer	cial		
30 Authority I	Drive							Squa		of Floors		Bld	g. Ag	e
City (5)		Cour	ity (6)			P. 10227010.00	nty Code (7) te use only)	-	ent Use (Prid	or if boins	dem	oliebo	d)	_
Waldwick		Bei	rgen			(Sta	te use only)		ent use (Prio ste water i	_			u)	
Name of Monitorin	ng Firm Hired by F	Bldg Owne	er (8)		ASCM No.	-	Name of Abatement	1		ti catino	ne pi	4110	_	
N/A	.5	g	(-/		, 10 0 111 1 101		B & G Restorat							
Street Address						-	Street Address	1011, 111	0.			-		
Street Address							105 Ryerson R	Road						
City, State, Zip Coo	ie					-	City, State, Zip Code				THE REAL PROPERTY.		-	
							Lincoln Park,	NJ 070	035					
Project Manager fo	r Monitoring Firm		Ph	none Numb	er		Telephone Number (973)696-686	9		License I	Numb 378	er		
Scheduled Start Da	ate (10)	Sched	I. Completi	on Date (11	1)	_	Name of OSHA Mon B & G Restorat		C					
11/13/2018		11/	14/2018				Street Address						-	
Occupancy Status	During Abatemer	nt (Check o	only one)				105 Ryerson R	load			and the second			
	ed/vacated during erformed outside						City, State, Zip Code							
Describe: Other-Descr	ihe:						Lincoln Park, N	J 070	35				-	3
Scope of Work (c		y)												-
☐ Demolition	X	Renovation	on				Full Containment w/ne	gative p	ressure	Gloveb	ag pr	ocedu	ire	
	f 🔲	≥160 sf or	≥260 If			X	Mini-enclosure			Non-fri	able p	roce	dure	
Location of				used solely	/						R	R	E	E
asbestos-co		by maint staff(12)	enance/cus	stodial			asbestos-containing		Amount (Specify SI	F or	m	p	n	n
material to b abated in fac			N-	T	material	(ACM)			LF)	- 01	0 V	a	a	C
	, (,	Yes	No	N/A							е	r	р	<u> </u>
area across slu	idge pumps			X	elbows/fit	tings	(wrap & cut)		quantity:	13	X	Ц	Щ	1
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						-					님	ᆜ	닏	14
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Registered Waste B & G Restora			EP Hauler 19563	ID# C	cubic Yards of 2	Waste	Name of Registered Grand Ce							ě.
City, State		<u></u> L		Disposal D	Date		City, State	***************************************					-	
Lincoln Park,				.	1/14/2018		Pen Argyle	e, PA		Data			+	_
Completed by (Pri Gordana Luna		Title Secreta	ary/Treas	urer	Signature		Gordana Luna			Date 11/02	2/201	18		

Check # 25723

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

	and the state of t				,			grant and a second section become	Water State of the last	Naghawa a san	**********	Te at engineering		
Date of Notification (1) 11/3/2018				Name (of Building Ov	wner/Op		udolph		M	C	S	Į.	N/F
Agencies Notified Typ	e Notification	1		Street	Address									
DEP	Amended		ŀ	City, St	ate, Zip Code						NO	/ -	5 2	018
⊠ DOL □			- L				Ewing,	NJ 08628	1	į.				
DOH DCA	justification)			Name o	of Contact Ken Rud	dolph		1	Te	lephone Nu	mber	134		
Name of Eacility Whore Abete	mont in Tabi	DI (0)		FAC	ILITY INFOR	OITAM								
		ng Place (3)					T	pe of Facility School (K-	-12)					
							×		er 8 (Oth private	ner than K-1 & commerc	2) ial bui	ldings	, hom	es,
	J 08628						So	uare Feet 2500	# 0	of Floors 1		Bldg. 7	Age)+/-	
County (6) Mercer					Code (7) USE ONLY)		- Cı	ırrent Use (Pı	ior if be	ing demolis	hed)			
	by Building	Owner (8)		ASC	M No.		Name of A Stevens	batement Co Environm	ntractor ental S	(9) Services,	Inc.			
Street Address PO Box 341							Street Add							
City, State, Zip Code Crosswicks,	NJ 08515							, Zip Code vn, NJ 085	01					
Project Manager for Monitoring Bill Weisgarber	Firm			Telepho (609)	ne No. 298-4070		Telephone			License N	lo.			
Start Date (10) 11/13/2018					Date (11)	1		SHA Monitor	0					
Occupancy Status During Abat	ement (Chec	k Only One))				Street Add	ress						
Facility Closed/Vacated D	uring Entire I	Period of Ab	ateme	ent		1000	РО Вох	")(크)						
Abatement Performed Ou Other – Describe: 8 am- 4	tside of Norm pm	nal Facility H	lours					, Zip Code field, NJ 08	3515					
Scope of Work (Check All That	Apply)						200-200							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf							H;	Full Containm Mini-Enclosur Glovebag Pro	e cedure					
		lala						Non-Exempte	u (*) and	i Non-Friab		Abate		
Location of		Nor	rmally	,		Dogge	iption of					Ту	pe	
Asbestos-Containing Materi	al (ACM)				Asbestos	Contair	ing Mater	ial (ACM)	А	mount			ш	
In Facility		Custod	lial St		S	surfacin	stems ins g, VAT, or cellaneou			pecify or LF)	Remova	Repair	Encapsulate	Enclosure
		Yes 1	No	N/A							1000		te	(D
Basement Furnace F	Room	X			Т	ransite	e Panels	3	12	20 sf	Х			
Name of Registered Waste Hau	ler			DEP W		ubic Ya	rds	Name of	Registe	red Landfill				
Stevens Environmental Se	ervices		12070000	uler ID I 18292		Waste 1 c		Fairless	Land					
City, State Allentown, NJ					Di	isposal 11/16	Date 5/2018	City, State Morrisv		4/				
Completed by Mahlon E. Stevens		Title Pro	ject	Mana	ger	Sign	ature	11	1/	Dat		3/201	8	

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

Check # 25722

20/00	。		t to NJAC 8:60		<u></u>					147	TP.
Date of Notification (1) 11/3/2018		Name	of Building Owr	er/Operato	r (2) Halpin		×<1	(F.C.)	# # 1 Fe	*	
Agencies Notified Type Notif	ication	Street /	Address		Поприи	1	N N	07	_ F	2018	}
X EPA X Initia		City Ct	7: 0-1				1	O 1		2010	,
	ndment #	City, St	ate, Zip Code	Millb	urn, NJ 070	41	10.00		1.47		
DOH justifi	gency (including cation)	Name o	of Contact Brian Halp			Tel	lephone Nu	mber		* * * * * * in it.	in a
DCA Cand	ellation	FAC	ILITY INFORM				, 1	d r			
Name of Facility Where Abatement i Residentia		TAG	ALITY IN ORD	ATION	Type of Faci	lity (4)					
Street Address	al				School Subcha		er than K-1	2)			
							& commerc		dings	, home	es,
City (5) Millburn, NJ 0	7041				Square Feet 2200		f Floors	E	Bldg. A	Age +/-	
County (6)			Code (7)		Current Use			hed)			
Union Name of Monitoring Firm Hired by Br	silding Ossacz (9)	1000	USE ONLY) _								
MECS	iliding Owner (8)	ASCI	M No.		of Abatement ens Enviror			Inc.			
Street Address PO Box 341					Address Box 322						
City, State, Zip Code					State, Zip Code	1					
Crosswicks, NJ 0	8515				ntown, NJ 0						
Project Manager for Monitoring Firm Bill Weisgarber		Telepho (609)	one No. 298-4070	100000000000000000000000000000000000000	none No. 259-9688		License N 00493	10.			
Start Date (10) 11/12/2018	Scheduled C			100000000000000000000000000000000000000	of OSHA Mon	itor					
Occupancy Status During Abatemen		23/2018		MEC	Address						
Facility Closed/Vacated During	Entire Period of Abat	ement		1,000,000,000,000	30x 341						
Abatement Performed Outside of Other – Describe: 8 am- 4pm	of Normal Facility Ho	urs			itate, Zip Code sterfield, NJ						
Scope of Work (Check All That Apply)										
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	parameter .	vation olition		×	Mini-Enclo Glovebag	sure Procedure	Negative I				
	Is Loc	ation			u Non-Exem	pted (*) and	d Non-Friat	le Pro	1200	e ement	
Location of	Norm	aily		Description					Ту	ре	
Asbestos-Containing Material (AC <u>TO BE ABATED</u>	(M) Mainter Custodia	nance/			faterial (ACM) s insulation,	1 10000	mount Specify	R	777	Enc	ᄪ
In Facility (13)	(12			ırfacing, VA er miscellar		SF	or LF)	Remova	Repair	Encapsulate	Enclosure
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Basement	X		Therm	al Pipe In	sulation	2	35 If	Х			
								-			
Name of Registered Waste Hauler		NJDEP W		bic Yards	Name	of Registe	red Landfill				
Stevens Environmental Service	es	Hauler ID 18292		Naste 2 cu	Fairl	ess Land	fill				
City, State Allentown, NJ			1.0.2732	posal Date 11/23/201	City, 6	state isville,/P/	Α				
Completed by Mahlon E. Stevens	Title Proj	ect Mana	ager	Signature	WI		Da	7.0	3/20	18	

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

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	_ JPANU							Ť.			1.0	12	34,14		
Date of Notification (1) 10/24/2018					of Building		Operator (r (2)			2	120 1			
Agencies Notified	Type Notification			Street A		<u> </u>					NON -	5 2	018	- 11	-11
				Ollock	1001000										
EPA DEP	Initial Amended		ľ	City, Sta	ate, Zip Co	ode				7			44 1 4		
☑ DOL	Amendment #				AIC NJ.		5								
☑ DOH	Emergency (in justification)	ncluding	'	Name o	f Contact					Tele	phone Nun	ber			
DCA	Cancellation			MRIN	AL MIT	RA					1.00				
Name of Facility Where	Abstement is Taking	Diago (2)	FAC	ILITY INF	ORMAT	TION	I		(4)					
PRIVATE	Abatement is Taking	riace (3)						of Facility	18 B					
Street Address									School (K- Subchapte		r than K-12)			
								図(Other (i.e.		commercia		dings,	home	es,
City (5)					7				etc.) re Feet	# of I	Floors	B	ldg. A	ae	
PASSAICNJ. 0705	5							2,20		2			9	go	
County (6)					Code (7)			Curre	nt Use (Pr	ior if being	g demolish	ed)			
PASSAIC					USE ONLY)			N/A						
Name of Monitoring Firm N/A	Hired by Building O	wner (8)	ASCN	Л No.		748.0765,78		tement Co		9) MENTAL	LLC).		
Street Address						12	Street	Addres	SS	11					
							1126	5 51	ST						
City, State, Zip Code	ity, State, Zip Code								ip Code		2000				
D :- 111								ERGEN							
Project Manager for Mon	itoring Firm			Telepho	ne No.			776			License No).			
Start Date (10)		Schodul	ed Con	nolation	Date (11)				IA Monitor		01300				
10/26/2018		10/26/		ibienon	Date (11)		1				LABOR	OTA	RIFS	·	
Occupancy Status During								Addres							
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Abatement Perform	ed Outside of Norma	I Facility	y Hours	icht			City, S	tate, Zi	p Code						
Other – Describe:					-	<u></u>	UNIC	LN NC	J.						
Scope of Work (Check A	4 1450							_							
≥3 sf or ≥3 lf		X	Renova	tion				Full			Negative Pr	essui	e		
≥160 sf or ≥260 lf			Demolit	on			×	Min Glo	i-Enclosur vebag Pro						
											Non-Friabl	e Pro	cedur	е	
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Location Asbestos-Containing			Normal ed Sole		A - h		escription		4.01.0		92		. ,	pc	
TO BE ABA	ATED	Ma	intenar	nce/			ntaining M Il systems			C 600000	ount ecify	Z.		Enc	m
In Facili (13)	ity	Cus	todial S (12)	idii?		surfa	acing, VA miscellan	T, or			or LF)	Remova	Repair	aps	Enclosure
(10)		.,	·	T		outer	mscenan	ieous)				val	Ŧ	Encapsulate	ure
D.105145		Yes	No	N/A										· ·	
BASEME			X				NSULA				LF.	Х			
BASEME	=N1		X		Furna	ice Pa	per cell	l insul	ation	28	SF.	Х			
Name of Registered Was	te Hauler	100	JDEP W			Yards		Name of	Registere	ed Landfill					
TRI STATE			1000	auler ID 9951	NO.	of Wa			MINER	RVA EN	TERPRIS	SE IN	VC.		
City, State				95050A		-	sal Date		City, Stat	te					
BRONX NY.						TBI			11700		G OHIO				
Completed by		Title					Signature	to	11	m	Dat	е			
CARLOS ESQUIVE		MAN	IAGE	3				0 Ell.	innyan	yes?	10.	26/2	2018		

nt Check#13317

State of New Jersey - Notification of Asbestos Abatement (Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

GAC Project # 060-182 Date of Notification (1) Name of Building Owner/Operator (2) October 30, 2018 RUTGERS, THE STATE UNIVERSITY OF NJ Agencies Notified Notification Type Street Address ENVIRONMENTAL HEALTH & SAFETY DEPT (REHS) 74 STREET 1603, BLDG 4116, LIVINGSTON CAMPUS ☑Initial Notification ☐ EPA ■ Amended Notification # ☐ DCA □ Emergency (including City, State, Zip Code X DOL PISCATAWAY, NJ 08854 justification) ☑ DEP- No Longer REQUIRED □Cancelled Name of Contact Telephone Number X DOH MICHAEL F. SMITH, ENV. 848-445-2550 **HEALTH & SAFETY** FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) MARTIN HALL, BLDG# 6006 ☐ School (K-12) Subchapter 8 (other than K-12) Street Address Other (i.e. private & commercial buildings, homes, etc.) **COOK CAMPUS** Sq. Feet: N/A # of Floors: 4 Bldg. Age: 80+ years County (6) County Code (7) Current Use (prior if being demolished): ACADEMIC **NEW BRUNSWICK** MIDDLESEX (State Use Only) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Contractor (9) ATC 00098 GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address Street Address 3 TERRI LANE 511 MAIN STREET City, State, Zip Code City State, ZipCode BURLINGTON, NJ 08016 BUTLER, NJ 07405 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number BRIAN R. KEARNEY 609-386-8800 973-492-0477 00840 Scheduled Start Date (10) Name of OSHA Monitor Scheduled Completion Date (11) 11/09/18 11/12/18 ENVIROVISION, INC. Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 20-21 WARGARAW ROAD, BLDG# 35E ■Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code Describe: FAIRLAWN, NJ 07410 IX Other- Describe: Schedule: 5PM - 5AM Daily (24 HOURS & WEEKENDS AS NEEDED) Scope of Work (Check all that apply) ☐Full Containment with Negative Pressure \ge 3 sf or >3 lf **X** Renovation ™ Mini-Enclosure □≥ 160 sf or ≥ 260 lf ■ Demolition ☐ Glove bag Procedure / Wrap & Cut ☐ Non-Exempted (*) and Non-Friable Procedure Location of Asbestos-Containing Is Location Normally Used Description of Asbestos Containing Material Amount Abatement Type Material (ACM) in Facility (13) Solely by Maint./Custodial (ACM) (i.e. thermal systems insulation, surfacing, (Specify SF Staff? (12) Remove Repair Encap VAT, or other miscell.) or LF) Enclose YES NO NA Room 109 23 Surfacing Plaster 12 SF X Name of Reg. Waste Hauler NJDEP Waste Hauler ID # Name of Registered Landfill Cubic Yards of Waste: 5 CY See Hauler Below #1 & 2 See Below G.R.O.W.S. North Landfill Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 Disposal Date City, State NJDEP # 12561 100 New Ford Mill Rd. Morrisville, Pa Hauler #2) Newark Carting, Inc., Newark, NJ 04509 11/12/2018 19067 NJ DEP# 4509 215-736-1700 Completed by (Print or Type) RAYMOND C. PEDALINO SENIOR PROJECT Raymond C. Pedalino October 30, 2018 MANAGER

ID A TE	Pb			ON OF ASB					0	10 ~	10	10		
Date of Notification (1)			Namo	of Building	Outpor	/0	- (0)		CA	WI	W	10	, cle	
10/24/2018			Thor	mas C. Po	owner	roperato ci	r (2)					m		
Agencies Notified Type Notificati	on			Address	otriosi	XI.		111		-	1 1			
☐ EPA ☑ Initial							4							
DEP Amended Amended Amendm				State, Zip Co			1	M ALL	NOV	/ - F	201	8		
Emergen	ent # cy (includir	ng		way, NJ, (07065	j			1101	, .	201	0	1	
DOH justification DCA Cancellat	n)			of Contact	. 4 1			Te	License No. 01355 ratories h Negative Pressure d Non-Friable Procedure Abatement Type Amount Specify For LF) Removal Removal Findapsulate OULF X Pred Landfill dfill					
Caricellat	ion			nas C. Po						1	- 4			
Name of Facility Where Abatement is Ta	king Place	(3)	FAC	CILITY INFO	ORMAT	ION	Type of Facility	(11)		-0.5	1 -2			
Residential Property							-							
Street Address	-						School (K		ner than	K-12)				
							Other (i.e.	private	& comm	nercial l	uildin	gs, hon	nes,	
City (5)							etc.) Square Feet	# 6	of Elegen		Dide	Λα0		
Rahway							1,796	2	71 110015		14/40			
County (6)			County	Code (7)					ing dem	olished				
Union			(STATE	USE ONLY)			(i		ing dem	ionarico	,			
Name of Monitoring Firm Hired by Buildin	g Owner (8)	ASC	M No.		Name	of Abatement Co	ontracto	r (9)					
							vic Contractin		(0)					
Street Address							Address	J						
						240	South 5th St.							
City, State, Zip Code						City, S	tate, Zip Code							
						Eliza	beth, NJ, 072	206						
Project Manager for Monitoring Firm			Telepho	one No.		Teleph	none No.		Licens	se No.				
						908-	906-4123		0135	5				
Start Date (10)			37603	Date (11)			of OSHA Monitor							
11/02/2018	11/09		}			170.000.000	nvironmental	Labor	atories	5				
Occupancy Status During Abatement (Ch							Address							
Facility Closed/Vacated During Entire	e Period of	Abater	ment				Route 22 We	est						
Abatement Performed Outside of No Other – Describe: OCCUPIED	rmai Facili	ty Hour	S				tate, Zip Code							
Scope of Work (Check All That Apply)						Unio	n, NJ, 07083							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demoli				X	Full Containm	ent with	Negativ	e Pres	sure			
		Demon	uon			×	Mini-Enclosur Glovebag Pro							
							Non-Exempte		d Non-F	riable F	roced	ıre		
		s Locat											t	
Location of		Normal ed Sole			Des	scription	of			-		ype	_	
Asbestos-Containing Material (ACM) TO BE ABATED	Ma	aintena	nce/	Asbesto	os Conta	aining M	aterial (ACM) insulation,				,	m	m	
In Facility	Cus	stodial 5 (12)			surfac	cing, VA7	Γ, or			1	Rep	cap	nclo	
(13)		(12)			other m	niscellan	eous)		serson 20002 €	O V d	pair	sula	osur	
	Yes	No	N/A							-		ite	e	
Basement			X		Pipe	Insulat	ion	6	OLF	- X				
									<u> </u>		+	-		
											-			
Name of Registered Waste Hauler		N	JDEP W	/aste	Cubic \	Varda	None	D1-1		1CII				
Danvic Contracting LLC		Н	lauler ID		of Was			60		atill				
		3	7574		2		Fairles	s Land	till					
City, State					Dispos	al Date	City, Stat					gs, homes 3. Age 30 ure externent Type Encapsulate		
Elizabeth, New Jersey					TBD	^	Morrisv	ille, PA	A					
Completed by	Title				Si	gnature		1		Date				
Jeymy Donneys	Own	er				1	LI DU	/	1	10/24	/2018	3		

10/24/2018

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

TO A TER

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

	ALL			(Pursua	ant to NJAC 8	3:60 and 12:1	120)		NOA	b.	4	11	7(1
Date of Notification (1) 10/24/2018					e of Building (ari Zurla	Owner/Opera	tor (2)						77
Agencies Notified	ype Notification	on		Stree	t Address	Address ate, Zip Code Illen, NJ, 08812 Telephone Number							
EPA DEB							Ī.			r	2010		
DEP DOL	Amended Amendme	nt#	Street Address City, State, Zip Code Dunellen, NJ, 08812 Name of Contact Shari Zurla FACILITY INFORMATION (3) Type of Facility (4) School (K-12) Subchapter 8 (Other than K-1 Subchapter 9 (Other than K-1 Subchapter							- 5	2U16	-	1-
	Emergenc	y (includi	ng)8812	1	1					4
DOH DCA	justification Cancellation			92.55			5	Te	lephone	Numbe	er		
	_					DMATION			- Mar - 15 F - 149	(to 10 - t	4		144 C
Name of Facility Where Aba	atement is Tak	ing Place	(3)	- 17	CILIT INFO	RIVIATION	Type of Facilit	v (4)					
Residential Property													
Street Address City (5)							Subchap Other (i.e	ter 8 (Oth	er than h & comme	(-12) ercial b	uilding	js, ho	mes
Dunellen							The second secon	# of	f Floors		Bldg.	Age	
County (6)							3,200	2				202719	
Middlesex	11 5 00			(STATE	E USE ONLY)		Current Use (F	rior if bei	ng demo	lished)			
Name of Monitoring Firm Hir	ed by Building	Owner (8)	ASC	CM No.				(9)				
Street Address								ig LLC					
ou occ / tauress													
City, State, Zip Code								ē.					
,,								200					
Project Manager for Monitori	Manager for Monitoring Firm				one No		The Property of the State of th	206					
					one ivo.								
Start Date (10)		Schedu	lled Co	mpletion	Date (11)			- 1	01333				
11/03/2018		11/09	/2018			P. C.			atories				
Occupancy Status During Ab	atement (Ched	ck Only C	ne)	11111-12-12-1									
Facility Closed/Vacated	During Entire	Period of	Abater	nent		2333	Route 22 We	est					
Abatement Performed C Other – Describe: OCC	outside of Norm	nal Facili	ty Hour	S		City, S	State, Zip Code				od en la fina		
						Unic	on, NJ, 07083						
Scope of Work (Check All The	at Apply)	-				689						200	
X ≥3 sf or ≥3 lf≥160 sf or ≥260 lf		-					Mini-Enclosur Glovebag Pro	e cedure					
		Is	Locat	on				a () and	14071-1 116	DIE FI			nt
Location of						Description	of						
Asbestos-Containing Mate	erial (ACM)	Ma	intena	nce/	Asbestos	Containing M	laterial (ACM)					т	
In Facility		Cus		Staff?	(i.e. trie	urfacing, VA	T, or			Ren	Re	nca	Enc
(13)			(12)					0. 0	J. L.)	SVOL	pair	lusc	nso
		Yes	No	N/A						1 20		ate	re
Basement				Х	F	Pipe Insula	ton	10	LF	X			\vdash
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ame of Registered Waste Ha	uler			JDEP W		ibic Yards	Name of I	Registere	d Landfil	1			
anvic Contracting LLC			10000000	uler ID I 574	No. of		1						
ity, State lizabeth, New Jersey							the control of the co						
ompleted by		Title				_ /	IVIOFFISV	ille, PA					
eymy Donneys		Owne	er			Signature	() · ()		1000		2040		

CK5307	PAI		NOTIFI (I	State of New J CATION OF ASBES Pursuant to NJAC 8:6	TOSARA	TEWENT 20)				2	b.,,,
Date of Notification (1)	10/30/19			Name of Building Own		A 0.4.			N	OV -	5 21
Agencies Notified	Type Notification			Ling la	nd C	7 01	ulsen (16			
, EPA	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		3	Street Address 200	7	7th S	treet	i	To have		. v 15 (
可 EPA 可 DEP 可 DOL	Amended Amendment #		C	City, State, Zip Code	/		JILE+	1000	4. 1. 10 ₁₇ t t	or or the tark in	
Z DOH	☐ Emergency (incl justification)	luding	- N	ame of Contact	1 15/	e CM	ty N	5 0	82	34	
□ DCA	☐ Cancellation			Fiank		G) Te	lephone No	umber	51	172
Name of Facility Where Aba	atement is Taking Place	(3)		FACILITY INFORM	IATION	Type of Fa	cilin/(4)	-	910	16	//
Street Address	IdeSi.	denit				☐ School	ol (K-12)				
				•		☐ Subch	napter 8 (Other (i.e. private &	than K-12 commercia) al build	inss. ho	mes, etc
City (5) Stone	Harbor					Square Feet		Floors		Bldg. Ag	
County (6)	(WI GOT		Cos	inty Code (7)		Current Lica	(Prior if being	J. 17.3			
Name of Monitoring Firm Hir	and by Puilding Owner	(0)	(ST)	ATE USE ONLY)				aemoiisne	a)		
	on of parinting Owner	(8)	A	ISCM No.	Name o		Contractor (9)	1)			17
Street Address					Street A	ומטובטטין	<u>Ahideine</u> (-bu7 1	111271	10
City, State, Zip Code)			Z Di Zl ate, Zip Code	1126/5:	n M	يو		
roject Manager for Monitoring	g Firm		1	,	1:12	LUKE	> NJ	T Eist	0)	<u></u>	
			Letep	hone No.	Telephon	ne No.	1916	icense No	275		
tart Date (IC,	115 1	V1/19	npletion	Date (11)		OSHA Monit					
ccupancy Status Buring Abate Facility Closed/Vacated Dr					Street Ad	dress					
Abatement Performed Outs Other - Describe:	side of Normal Facility	Hours	ι		City, State	e, Zip Code					
ope of Work (Check All That :	Apply)										
≥3 sfor≥3 lf ≥160 sfor≥260 lf		- Renova Demolii				Mini-Enclosu Glovebag Pro	cedure				
		Is Locati	OD			Non-Exempte	ed (*) and Non-	Friable Pro	- 10 AV	eztemen	
Location of Asbestos-Containing Materia	ii (ACM) U	Normali sed Solel	y y by	Asbestos Contain	ripuon oi	-141000		-	1	Туре	
In Facility (13)		Maintenan Istodial Si (12)		(i.e. thermal system	ing wateri is insulation AT, or scellaneous	ı, surfacing	Amoun (Specif SF or Li		Removal	Encapsulate	Enclosure
	Yes	No	NA		**************************************					dute	ure
outs'a			/	Siden			7,000 5	£ 1	1		\Box
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of Registered Waste Hauler		NJE	EP Was	ste Cubic Yard	İs	Name of P	egistered Land	511			
NI DE LLC	_		ler ID N 1847	of Waste		LUM	1. 6	7			
State DE HACO	4.1		-11	Disposal Da		City, State,	ot l'A Uracin	P.=			
leted by Jeph T Hill	. Title	ne de	n^{L}	Signat	7	11-	7 200 1	**		2/18	/
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										and the second	Market Market	metalestra t	*****	entwo-
C 35207	PA	TON	TIFIC (P	ATIO	State of N N OF AS nt to NJ	RE	Jersey STOS ABA 8:60 and 5:1	TEMENT						ann (
Date of Notification (1)							wner/Operator	(2)		NOV-	- 5	20	18	100
	18			Cr	ivelli Cor	nstr	uction			3	5)	6.	
Agencies Notified	cation			1	et Address				Letu		N 1 10	Total	V., C	Ĉ1
□ DOLWD □ Amende				_	State, Zip		N., Suite D		A 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		6 m - 141	- 1-y-2	16-154	2 200
□ DOH Amendr			-	1			e NJ 08751							
DCA Emerge (NJAC 5:23-8) ustifica		cludin	g		e of Conta		10 00/01		Telephone	Numbe	or.			
Cancella				100000000000000000000000000000000000000	anine				732-793					
				FA	CILITY	NFO	RMATION						9	-00-
Name of Facility Where Abatement is	Taking	Place	e (3)					Type of Facility	(4)					
Residence								School (K-12		urgers Western				
Street Address								Subchapter 8	8 (Other than rivate and con	K-12) nmerci	al bu	iilding	S	
City (5)								homes, etc.)					· ·	
Lavallette								Square Feet	# of Floors	3		dg. A	ge	
County (6)				Cou	nty Code /	71/07	ATE USE ONLY)	1500 sf	1			65		
Ocean				Cou	nty Code (1)(31	ATE USE ONLY)	Current Use (Pri	or if being dei	molish	ed)			
Name of Monitoring Firm Hired by Bui	Iding C	wner	(8)	ASCM	No.	Na	ame of Abatem	ent Contractor (9)						
N/A	- 3					1		ntracting, Inc.						
Street Address						_	reet Address	3,			-			
							1889 Route 9	9, Unit 61						
City, State, Zip Code							ty, State, Zip C							
Decine the second second						_		New Jersey 08	755					
Project Manager for Monitoring Firm			Tele	ephone	No.		lephone No.		License No	0.				
Start Date (10)	School	ulad C	comple	tion De	ate (11)		732-349-9932		00624					
<u>11</u> / <u>16</u> / <u>18</u>				9/		100000	eme of OSHA N E.M.S.L. Ana							
Occupancy Status During Abatement							reet Address	.,,		-11-7-0				
Facility Closed/Vacated During Ent	ire Per	iod of	Abate	ment		1	1056 Stelton							
Abatement Performed Outside of N	lormal	Facility	y Hou	rs - Des		Cit	y, State, Zip Co	ode						
Time of Abatement:AM	PIV	1/	_PIVI		AM	F	Piscataway, I	New Jersey 088	854					
Scope of Work (Check all that apply)							Ппп			220				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 		□ Re ⊠ De	novat	33333			☐ Mini-End	tainment with Neg closure g Procedure mpted (*) and Nor						
L			Loca				THE PERSON NAMED OF THE PARTY O				Aba	ateme	nt Ty	ре
Location of Asbestos-Containing Material (ACM	/I)	Use	d Sol	ely by	Asbe	stos	Description of Containing Ma		Amount		Re	Re	E	En
TO BE ABATED IN Facility			intena todial	nce/ Staff?		, the	ermal systems	insulation,	(Specify		Removal	Repair	caps	Enclosure
(13)			(12)			ot	surfacing, VAT, ther miscellane	ous)	SF or LF))	<u>a</u>		Encapsulate	ure
		Yes	No	N/A									Ф	
exterior					asbesto	os s	iding		1350 sf		\boxtimes			
Name of Registered Waste Hauler				JDEP V		1 300	bic Yards of	Name of Regist	tered Landfill					
Guardian Contracting, Inc.				auler II 20223		Wa 3	ste	T.R.R.F.						
City, State						Dis	posal Date	City, State						
Toms River, New Jersey	,					1	1/19/18	Tullytown,	Pennsylvan	iia				
Completed By (Print or Type) Nicholas Fernicola	Title					1	Signature		11	Date	j	j		
Micholas Fernicola	Pro	oject	Man	ager				12	1	10	13	0/1	3	

12	ATD				TOS ABATEMENT						
Date of Notification	(1)	(Fulst			7 and 12:120-7 Owner/Operator			(23 E	17	and the same	I .
10/31/2018			Jesse W				FEG			ti-	
Agencies Notified	Type Notifi	cation	Street Addre	ess			The state of				111
[]EPA	[X]Initia	L					1101	, _ F	20	18	
[x]DEP	Notifi	cation	City, State,	. Zip	Code		MO/	1 -		10	
[X]DOL	[]Amended			_	gh,NJ,0884	14		-			
[X] DOH	Notifi	cation	Name of Cont	117	, , , , , , , , , , , ,		1			1	
	[x]EMERGEN	ICY	Jesse W			Telepho	one Number			4	
[]DCA	[]Cancel]	ation	Desse M	lepp							
			FACII	LITY I	NFORMATION						
Name of Facility Whe	re Abatemen	t is Taki	ng Place (3)			Type of Faci	lity (4)				
Jesse Webb						[]School	(K-12)				
Street Addres							pter 8 (Other				
							(i.e., privat buildings, ho				
*						Square Feet	# of Floor		ldg.		
City (5			(6)Essex		nty Code (7)	-					
Hillsborough		SOMER	RSET	(STA	ATE USE ONLY)	Current Use	(Prior if bei	ng de	moli	shed	.)
Name of Monitoring Fi	in binal b	D (111)	la a a								
Owner (8)	rim nired by	Bullain	g ASCM No.		Name of Abate						
N/A Street Address					1 P. Co. Storman South Control of the	ANAGEMENT	, inc.				
Street Address					Street Address						
City, State, Zip Code						topher St					
city, state, zip code	3				City, State, 2		140				
Project Manager for M	famitania - F	: [m -				r, NJ 070	142				
rioject Manager for M	ionitoring F	Irm Te.	lephone Numbe /z	r	Telephone Numb (973)744			cense		ber	
Scheduled Start Date	(10) Sah		(9)(25)	111				0037	Τ		
10-31-18		1-1-18	letion Date (1000000	Name of OSHA N N/A	fonitor					
Month Day Yes	ar M	onth I	Dav Year	ll	N/A						
Occupancy Status Duri	ng Abatemen	t (Check	only one)		Street Address	1					
[X]Facility Close of Abatement											
[]Abatement Per: Hours - Descr:	formed Outsi	de of No	rmal Facility	Y	City, State, Z	ip Code					
[]other - Descri	ibe: «Other (ccupancy	Descript»								
Scope of Work (Check											-
[7]\2 af am \	2.16					Containment wi	th Negative	Press	ure		
[X]≥3 sf or ≥ []≥160 sf or			X]Renovation]Demolition			Enclosure					
	_					ciable Procedu	ire				
Location	of		Is ocation		Description	o of		Aba	teme		
Asbestos-Cont		N	ormally Used		Asbestos-Cont		Amount	R	R	E	E N
Material (A TO BE ABAT	- N		Solely y Main-		Material (A		(Specify	E	E	CA	C
In Facili		t	enance/		i.e., thermal ulation, surfa		SF or LF)	O A	A	PS	OS
(13)		Sta	aff (12)		r other miscel	70. U.S. 1994. T ERROLL SHOOLES (1994. 1994.	22,	A	R	T T	U R
Basement		Yes	No N/A	Gro	ound Floor	~ 777 m	215 05	77	-		_E_
			Α .	GIC	Julia F1001	VAI	215 Sf	X			
								_			
Name of Registered Was	ste Hauler	N.T	DEP Waste	Cuhi	.c Yards	Name of next	otoms 3 T T	1			
AZTECH MANAGE		IC. Ha	uler ID No.	100000000000000000000000000000000000000	aste 1.5	Tri-St	stered Landf:	ΓŢŢ			
City, State		1	7040	D	1 D-:-						
Montclair, NJ	07042			10000	osal Date	City, State	V 10474				
					7 10	Bronx N	1 104/4				
Completed By (Print or	2000 B	tle			Signature	,	1/	Date			
Constantine Vi	vian Pi	reside	nt		/ /51	starta 1	111.2	10/31	L/201	.8	

Check # 16417

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Date of Notification			(Pursu	ant to	ON OF A	SBESTOS ABATEME :60-7 and 12:12	ENT					
10/31/2018				Freduce (or purita	ing Owner/Oper	ator (2)					
Agonei				Cha	rles	and Laure	n Abode	1 [G	F		1 /7 /Fig.
[]EPA	Type Notif		on	Street	Addres	g					1 1	y E.
	[X]Initia Notif							Hråi	1	U,	~	i
[]DEP			on	City,	State, 2	Zip Code			NOV		20	10
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	[]Cancel	latio	n j	Abode	9		•			wed .		erana mani
Name of Facility Wher	e Ahatemon				FACILIT	Y INFORMATION						
Charles and La	uren Ah	ode	Takin	g Place	e (3)		Type of	Facility (4)				
Street Addres		oue					11	chool (K-12)				
Street Addres							[]Su	bchapter 8 (0)	her t	han	K-12	1
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CITY (5		Coun	+ 10	_		-25	Square F	ial buildings,		2011		
Montclair		Coun	су (6) Essex		ounty Code (7)		eet # of Fl	oors	Blo	lg. A	ge
		Ess	OV		10.	STATE USE ONLY)	Current t	Use (Prior if	heine	4	1: 1	
Name of Monitoring Fir Owner (8)	m hired by	Buil	ding	ASCM :	No	TL	1.1		being	demo	olish	ied)
N/A	·			ASCM ,	NO.	Name of Abat	ement Contr	cactor (9)				
Street Address						AZTECH	MANAGEM	ENT, Inc.				
The second secon		-				Street Addre						
City, State, Zip Code						86 Chri		St.				
						City, State,	Zip Code					
Project Manager for Mon	itoring Fi	7770	mala.			Montcla:		7042				
	g ri		N/A	hone N	umber	Telephone Num			Licen	SO N	ımbas	
Scheduled Start Date (1	O) School					(973)744	1-8800		003		ште	-
11 12 18		1. Con	14		te (11)	Name of OSHA	Monitor					
Month Day Year	1	700	-		.8 ear	N/A						
Occupancy Status During [X] Facility Closed/ of Abatement	Abatement	(Chec	k onl	y one)	aL	Street Address						
of Abatement	racated Du	ring .	Entir	e Perio	od	dece addres	S					
[]Abatement Perfor Hours - Describe	med Outside	e of 1	Norma	L Facil	lity	City State						
[]other - Describe	:«Other Occ	Desci	ript»		-	City, State, 2	Zip Code					
cope of Work (Check all	that apply	ur)	y Des	CLIPEX	<u>></u>							
		¥ /				f 1m 11						
[X]≥3 sf or ≥3 1 []≥160 sf or ≥2	15 260 lf		[X]Re	novati	on	[X]Mini-E	Containment Enclosure	with Negative	Pres	sure		
-			[]ne	moliti	on	[X]Glovel	ag Procedu	ce				
Location of			Is Locat	ion		[]Non-Fr	ciable Proce	edure				
Asbestos-Contain:	ing	j	Norma.	Lly		Description	of		Ab	atem	ent :	
Material (ACM) TO BE ABATED		١.	Sole:	У		Asbestos-Conta Material (A	aining	Amount	R	R	E	E
In Facility		1	By Ma: tenand	e/	(i.e., thermal	systeme	(Specify	E	777	CA	C
(13)		St	ustod caff	ial (12)	lnst	llation, surfac	cing. VAT	SF or LF)	V	A	PS	o s
asement		Yes	No	N/A		other miscell	aneous)		A	R	U	U R
				X	Pipe	Insulation	n	20 LF	-	-	-	E
							AND THE RESERVE OF THE PERSON	- 0 TE	X			
me of Registered Waste												
AZTECH MANAGEMEN	Hauler	NJ	DEP W	aste		c Yards	Name of Reg	ristered Landfi				
y, State	-, INC.	1	7040	ID No.	of Wa	aste .5	Tri- S	tate	TT			
ontclair, NJ 070	40				Dispo	osal Date	City, State				10.	
	42				11	/15/18			-			
pleted By (Print or Typ	e) Title						-LOILA,	NY, 10474				
nstantine Vivia	n Pres	ide	n+			Signature) /	//	ate	_		
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						1 1000	moul	1100			_	

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BEST REMOVAL INC

CIL 4812 PAGE 02/04

Emergency h	O HEAT	:			DY OF ASSES	STOS ABATE		a A	we 4	7/2		1 (1)	l.	7 [%]
Date of Notethinston (1) 10-25-18 Asymptot Notethin 15	ypo Notification				HALPE WALPE		2)			10L - NOV	1	0 E	201	3
EPA COM	Amended . Amendement Etemperaty () justification)	petind se		AE.	RSEY COOK		NI	<u> </u>	305T	LA NUMB				7/
				FAC	LITY INFO	MATION				-	or order		_	
A . HALPERN	erent is Talting P	Taos (3)					Type of	wiity (4)			-		
Street Address							D But	stroper i	2) E (Other shur rivate & eass	K-12) stratujal (الملنيح	ngs, ho	200444,	etc.)
JERGEV CT	TY						Square F		# of Flo	OFS.		00		5
HUDSON				County	Code (7) USE ONGS)		RPS	m (Frior	UCE -	nolished)			1-	-
Person of Manufacture Person River	el by Building O	House (B)	-	ABC	M No.	Name	of Abelega	E Conte	lector (9)	7	-			\neg
Barest Address					-		Address							\dashv
City, States, Zip Code						Cay, S	teda, Zip C	26	ver S		<u>t</u>			\dashv
Project Manager for Mealtonin	Fen.		T	Talopho	ne No.	Telaple	one No.		NJ 07	601 cames No.			-	\dashv
Scott Date (20)		Schole	od/Core	p lototen D	man (1))	201-	TOSHA)	446		003A	8		-	
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Agencies Notified Type Notification		1 3	Street Ad	Idress ox 1013				The second of th		11 11 11				10	
□ EPA □ Initial □ Amended □ Amendment #_				e, Zip Cod		iton, N	IJ 07	676	-,				EX.		
➤ Emergency (included)	luding	1 89	Name of							phone N					
DCA Cancellation				s Jones			ma.o.o.		973	3-227-2	2251				
Name of Facility Where Abatement is Taking F Residential	Place (3)		FACIL	ITY INFO	RMAII	JN	Туре	e of Facility (4	Āli m						
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Name of Monitoring Firm Hired by Building Ow	mer (8)		ASCM	No.				atement Con nvironment			LLC	;			
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Project Manager for Monitoring Firm		1	Γelephor	ne No.		Teleph 201-		No. 8855		License 01174		•			
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Abatement Performed Outside of Normal Other – Describe:	Facility	Hours			_			Zip Code ity, NJ 073	04						
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)

CK 4824

Date of Notification (1)	1		N	ame of	Building	Owner/Operator	(2) = P. M==	AN EG	E []	7	
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□ DCA	☐ Cancellation			7	S. V	ERMEER		L _			3
				FACIL	ITY INFO	ORMATION					
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rt	's, MAMIA Ve	ERM	EEI	2			School (K-12				
Street Address							☐ Subchapter 8	(Other than K-12)			
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			2.				homes, etc.) Square Feet	# of Floors	Bldg. Age	-	
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Street Address				100		7	200	2200			
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City, State, Zip Code						City, State, Zip C					
	(2)					Hackensa	ack, N.J	. 07601			
Project Manager for Mo	nitorina Firm	Tel	ephon	e No.		Telephone No.		License No.			
, roject manager ier			•			201-329-	-7444 .	00388			
Start Date (10)	Scheduled C	omoletic	on Date	(11)		Name of OSHA	Monitor				
11/12		131		- ()			Environm	ental			
			0			Street Address	311 4 2 2 0 31111	011001			
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Scope of Work (Check	all that apply)							·			
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21 ≥ 3 sf or ≥ 3 lf □ ≥ 160 sf or ≥ 260 lf				Dem		J⊠ Glov	ebag Procedure		50		
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See Address Contact				HOWARD	LAUTEN	Operator	(2) maga	The Tanasasasas	NOV	- 5	2018		The Principles
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HUDSON Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) ALL SOLUTIONS CONTRACTING INC Street Address Street Address Street Address 24 CHURCH ST City, State, Zip Code License No. 201 873-9418 U1301 Name of CSHA Monitor 11/02/2018 Start Date (10) 11/02/2018 ALL SOLUTIONS CONTRACTING INC Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Under — Describe: BASEMENT EMPTY 7:30AM TO 3:30 PM Stope of Work (Check All That Apply) 23 st or 23 if 23 st or 23 if 24 CHURCH ST City, State, Zip Code ELMWOOD, NJ 07407 Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Normally Used Solely by Maintenancy Custodial Staff? (12) Yes No N/A BASEMENT Normally Used Solely by Maintenancy Custodial Staff? (12) Yes No N/A PIPE INSULATION 95 SF x X Name of Registered Landfill GRAND CENTRAL Disposal Date TDB Order Describe Gravity State Name of Registered Landfill GRAND CENTRAL Disposal Date Disposal Date Disposal Date DESCRIPTION OF ARGYL PA 18072	KEARNY NJ 07032							28 E	of Floors				S
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Project Manager for Monitoring Firm Telephone No. Telephone No. 201 873-9418 Name of OSHA Monitor 11/02/2018 Scheduled Completion Date (11) 11/03/2018 Name of OSHA Monitor ALL SOLUTIONS CONTRACTING INC Street Address 24 CHURCH ST Scope of Work (Check All That Apply) 23 sf or 23 if 24 sf or 22 if 25 sf or 2260 if Renovation Demolition Demolition Demolition Is Location of Asbestos-Containing Material (ACM) 10 Secretary (13) Asbestos-Containing Material (ACM) 10 Secretary (13) Page 10 Secretary (13) Normally 1						100000000000000000000000000000000000000							
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Date of Notification (1) 10/28/2018 CHECK	< #0076				of Building		Operator	r (2)		N	OV - 5	201	3		1
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Name of Facility Where	Abatement is Takir	ig Place (3)					Туре	of Facility	(4)					
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City (5) TEANECK ,NJ 076	66								re Feet	# 0	f Floors	1000	Bldg. /	Age EARS	S
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Street Address							Street	Addre	SS	CONT		G INC			
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Project Manager for Mon	itoring Firm			Telepho	ne No.			873 9			License N 01301	No.			
Start Date (10) 10/30/2018		Schedu 10/31/		mpletion	Date (11)				HA Monitor		RACTIN	G INC			
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)

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Scope of Work (Check all that apply) Z 3 sf or ≥ 3 lf □≥ 160 sf or ≥ 250 lf □≥ 160 sf														-
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT MO#24776111507 (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 10 31 / Nancy Rundquist Agencies Notified Type Notification Street Address X EPA ✓ Initial **⋈** DOLWD Amended X DHSS Amendment # Chatham, NJ 07928 ☐ DCA ☐ Emergency (including (NJAC 5:23-8) justification) Name of Contact Telephone Number Cancellation Kate Friday **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) Private house Subchapter 8 (Other than K-1 2) Street Address Other (i.e., private and commercial buildings, homes, etc.) City (5) Square Feet # of Floors Bldg. Age Chatham, NJ 07928 County (6) County Code (7) (STATE USE ONLY) Current Use (Prior if being demolished) Morris Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Gr Tech LLC Street Address Street Address 576 Valley Rd #283 City, State, Zip Code City, State, Zip Code Wayne, NJ 07470 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 973-638-1777 01127 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor __11__ / __10__ / __18 Envirovision Consultants, Inc Occupancy Status During Abatement (Check only one) Street Address ☑ Facility Closed/Vacated During Entire Period of Abatement 20-21 Wagaraw Road, Bldg .# 35E Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: ____AM-__PM/ PM___AM Fair Lawn, NJ 07410 Scope of Work (Check all that apply) Clean up and decontamination with negative pressure Full Containment with Negative Pressure >3 sf or >3 lf > 160 sf or >260 lf Renovation Mini-Enclosure Glovebag Procedure Tent with Negative Pressure Demolition Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Used Solely by Removal Repair Asbestos-Containing Material (ACM) Encapsulate Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED (i.e., thermal systems insulation, (Specify Custodial Staff? IN Facility surfacing, VAT, or SIF or LF) (12)(13)other miscellaneous) Yes No N/A X Basement Pipe insulation X 650 LF П X Garage X Pipe insulation 75 LF П \times Crawl space Pipe insulation X 130 LF П Attic \times \boxtimes Pipe insulation 45 LF Name of Registered Waste Hauler NJDEP Waste Hauler ID No. | Cubic Yards of Waste | Name of Registered Landfill Gr Tech LLC 0033785 TBD T.R.R.F. Inc City. State Disposal Date City, State Wayne, NJ 07470 TBD Tullytown, PA Completed By (Print or Type) Title Signature Date entic Wenad N.Jevtic Owner 10/31/18

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PROJECT COORDINATOR

Completed by VIVECA RAMOS

Date

10/30/2018

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

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Date of Notification (1) 10/30/2018					f Building IDVIEW				NY	Action Comments	NOV	_ r	2018	3	
Agencies Notified EPA	Type Notification Initial			Street A	ddress MARKE	T STR	EET		5				WEIGH.)
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☑ DOH □ DCA	Emergency justification) Cancellation		ĺ		f Contact					0.000	lephone I		Y X	180 - 40	-
				FACI	LITY INF	ORMAT	ION	F-11-11-1							
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Street Address							Street	Addr	Section of the section of						
City, State, Zip Code									Zip Code A, NJ 0751	12			7270000		
Project Manager for Monit	oring Firm		I	Telephor	ne No.		Teleph	none l			License				
Start Date (10) 11/3/2018		Scheduled		mpletion [Date (11)		Name	of OS	SHA Monitor S (9) ABO	\/E	0043	-			
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Facility Closed/Vacat Abatement Performe Other – Describe:	ed During Entire F	Period of Ab	aten	nent s					Zip Code				***********		
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Name of Registered Waste	Hauler		N	JDEP Wa	aste	Cubic	Yards		Name of I	Renista	ered Land	fill			
TWO BROTHERS CO			Н	lauler ID I 8743		of Was			WASTE				G.R.O	D.W.	S.
City, State TOTOWA, NJ						Dispos 11/5/2	sal Date 20/18		City, State		LE. PA				
Completed by VIVECA RAMOS		Title PROJE	ЕСТ	COOR	DINAT	s	ighature	000	P	2	- 1	Date 10/30/	2018	,	
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2) Date of Notification (1) 10/30/2018 Ashland Incorporated Agencies Notified Notification Type Street Address - 5 2018 500 Hercules Road (X) EPA) Initial Notification City, State, Zip Code (X) Amended () DEP Wilmington, DE 19805 Amendment # 1 (X) DOL (X) DOH) Emergency (including Name of Contact Tel. Number () DCA justification) Edward Meeks Cancellation **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Former Drew Chemical Facility () School (K-12) () Subchapter 8 (other than K-12) Street Address (X) Other (i.e. private & commercial buildings, 1000 Harrison Ave homes, etc. City (5) # of Floors Square Feet Bldg. Age Kearny, NJ 07032 County (6) Current Use (Prior if being demolished) County Code (7) (STATE Hudson USE ONLY) Name of Monitoring Firm Hired by Bldg. Owner Name of Contractor (9) ASCM No. CID CONSTRUCTION SERVICES, LLC Street Address Street Address 300-2 State Route 17 South - Suite #3 City, State, Zip Code City State, Zip Code Lodi, NJ 07644 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number 01191 "A" (973)685-9791 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 11/02/18 11/22/2019 Occupancy Status During Abatement (Check only one) Street Address City, State, Zip Code (X) Facility Closed/Vacated During Entire Period of Abatement () Abatement Performed Outside of Normal Facility Hours () Other - Describe: Source of Work (Check all that apply) () Full Containment with Negative Pressure $(X) \ge 3 \text{ sf or } \ge 3 \text{ lf}$ () Renovation () Mini-Enclosure (X) ≥ 160 sf or ≥ 260 lf (X) Demolition () Glove bag Procedure (X) Non-Exempted (*) and Non-Friable Procedure Abatement Type Is Location Normally Location of Asbestos-Containing Material Used Solely by Description of Asbestos Encapsulate Amount Enclosure Maintenance/ Containing Material (ACM) (i.e. (ACM) Remova Repair (Specify TO BE ABATED Custodial Staff? (12) thermal systems insulation, SF or LF) surfacing, VAT, or other in Facility miscellaneous) (13)Yes No N/A Building 721 - Roof Area X Roof Material 4928 SF X Name of Reg. Landfill Name of Reg. Waste Hauler NJDEP Waste Hauler ID Cubic Yards of Waste Cid Construction Services, LLC # 32905 TBD 110 Sand Company Landfill City, State Disposal Date City, State

TBD

Signature-

Melville, NY

Date

10/30/2018

Garfield, NJ

Completed by

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Title

Project Manager

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

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Date of Notification (1) October 29, 2018			Name Berg	of Buildir en Com	g Owner/ nmunity	Operato Colleg	r (2) e				ר חר	110	
Agencies Notified Type Notification	1		Street	Address Paramu					NO'	/ -	` (1	18	The Company of the Co
X DEP X Amended Amendmen				State, Zip mus, N.					7 3 3 3				
DOH Emergency justification Cancellation)	ng	Name	of Contac	et				elephone N 73-376-6				
			FAC	CILITY IN	FORMAT	ION			0-070-0	7110			
Name of Facility Where Abatement is Taki Bergen Community College, Third Street Address	ng Place Floor,	(3) Office					Type of Facilit	(-12)	sie linter	10/2011			
400 Paramus Road							Other (i.e	ter 8 (Oth . private	ner than K	-12) rcial bu	ildings	, hon	nes,
City (5) Paramus							etc.) Square Feet	# 0	of Floors	T	Bldg.	Age	
County (6) Bergen				Code (7)			Current Use (F	Prior if be	ing demol	ished)			
Name of Monitoring Firm Hired by Building Hillman Consulting LLC	Owner (8	3)	ASC	M No.			of Abatement C o Inc	ontractor	r (9)				
Street Address 1600 Route 22 East, Suite 107						Street	Address Main Street,	#261					
City, State, Zip Code Union, NJ 07083						City, S	state, Zip Code eysville, PA 1	With the second					
Project Manager for Monitoring Firm Vojlislav Tesic			Telepho			Teleph	none No.	9430	License	No.			
Start Date (10)	Schedu	led Co	mpletion	88-7800 Date (11			400-8711 of OSHA Monito	or	01373				
11/12/2018	12/03	/2018					eider Labora		Global In	C.			
Occupancy Status During Abatement (Chec	Period of	Ahater	ment				Address West Cary S	Street					
Abatement Performed Outside of Norm Other – Describe: Occupied building	nal Facilit	y Hour	'S			City, S	tate, Zip Code						
Scope of Work (Check All That Apply)						KICIII	mond, VA 23	220					
≥3 sf or ≥3 lf x ≥160 sf or ≥260 lf	Processor 1	Renova Demoli				×	Full Containr Mini-Enclosu Glovebag Pr Non-Exempt	re ocedure				e.	
	1	s Locat Norma									Abate	ement	t
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	ed Sole aintena todial (12)	ely by nce/	Asbes (i.e	tos Conta thermal surfac	aining Masser Systems ing, VAT iscelland	aterial (ACM) insulation, Γ, or	(S	mount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
S327; S327 A-F & S335; S335 A-B	Yes	No	N/A							-		ate	œ.
0321, 0321 A-F & 0330, 0330 A-B		Х			Joint (Compo	und	4,8	30SF	X			
Name of Registered Waste Hauler		N	JDEP W	aste	Cubic Y	'ards	Name of	Register-	ed Landfill				
Century Waste Services LLC		H	auler ID	No.	of Wast		Fairles						
City, State Elizabeth, NJ					Disposa	I Date	City, Stat						_
Completed by Carol Bradford	Title Presid	dent			Sig	nature				1000	040		\dashv
					1	ala	& Dred	10-ca	1 10	/29/2	018		

X53740	543	PAI	NOTI	FICATION Pursuant	N OF ASE to NJAC	BESTOS	ABATE	MENT 0)			EC		n	W	E
Date of Notification (1) 10/29/2018					f Building Sange		Operator	r (2)			NO.	/ -	5 2	012	Cities change of
Agencies Notified	Type Notification			Street A	ddress					*	1 NOV	18)_()	nig-	11
X EPA	× Initial			011 01	1 7 0				j		1		M. Carrier		da.o.
X EPA X DEP X DOL	Amended Amendment	#			ate, Zip C Caldwe		7006				Franklings.	io. Ent		17.1.	ά
× DOH	Emergency justification)				f Contact	20.00000-000000				Tel	ephone Nu	mber	· · · · · · · · ·	775 to 10	
DCA [Cancellation			Andre	Sange	orge				-		· i., c.,			
Name of Facility (Africa)		m1 /0		FACI	LITY INF	ORMAT	ION								
Name of Facility Where Ab House	atement is Takir	ig Place (3)					Туре	of Facility (4)					
Street Address								X C	School (K-1 Subchapter Other (i.e. p etc.)	8 (Oth	er than K-1 & commerci	2) al buil	dings	, hom	es,
City (5) West Caldwell									e Feet	# o N//	f Floors	11,540	Bldg. A	Age	
County (6) Essex					Code (7) USE ONLY)		Curre	nt Use (Prid se	or if bei	ng demolisi	ned)			
Name of Monitoring Firm H N/A	lired by Building	Owner (8)		ASCN	/ No.				ement Con ement, In		(9)				
Street Address								Addres	s Iren Aver	nue					
City, State, Zip Code								State, Zi wa, N	p Code J 07512						
Project Manager for Monito	oring Firm			Telephor	ne No.		50000000000000000000000000000000000000	none No 345-86			License N 01311	0.			
Start Date (10) 11/07/2018		Schedule 11/08/2		mpletion [Date (11)		1,000,000,000		A Monitor ement, In	C.					
Occupancy Status During A	Abatement (Chec	k Only On	e)					Addres	Z. (1)						
Facility Closed/Vacate	ed During Entire I	Period of A	bater	ment			5150 -550		ren Aven	iue					
Abatement Performed Other – Describe: Oct	cupied	nai Facility	Hour	S				tate, Zij wa, N	p Code J 07512						
Scope of Work (Check All 7	That Apply)														
X ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		- Description	enova emoli				×	Mini Glov	i-Enclosure vebag Proc	edure	Negative F				
		Is	Locat	tion					ZNOMPLOG	7 411	4 11011 1 1100	10.10		ement	t
Location of		2000	orma	lly ely by		De	scription	of					Ту	ре	
Asbestos-Containing M <u>TO BE ABAT</u> In Facility (13)	ED	Maii	ntena					s insulat T, or		(8	mount specify or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A								-		ate	e.
Basemen	nt		X			Pipe	Insula	tion		1	2 LF	Х			
			11 173 -7									_			
Name of Registered Waste	Hauler		155.55	JDEP War		Cubic of Was					red Landfill	1000000			
D&S Abatement, Inc.			10238	0996	47	TBD			Waste N	/lanag	gement of	PA			
City, State Totowa, NJ						Dispos TBD	sal Date		City, State Morrisvi		Ą				
Completed by Ned Joksimovic		Title Projec	ct Ma	anager		S	ignature		M		Da 10	te /29/2	2018		

00Ch	N		CATIO	tate of Ne N OF ASB t to NJAC	ESTOS	ABATE	0)	FED UR1							ON
Date of Notification (1) 11/1/2018				of Building rk Main					15) E		E		W	E
Agencies Notified Type Notification		- 1		Address eral Squ	are					3					
EPA Initial Amended Amendment :	4	h	City, St	ate, Zip Co	ode				15	4	NOV	- ;	5 2	018	4
Emergency (i				rk, NJ 07	7102				Te	ерідоди	e Numt	er			
DCA Cancellation			John I		DESAT	1011			97	3-693	3-5326	18 (EN:	OM	AO	&
Name of Facility Where Abatement is Taking Newark Main Post Office	Place (3)		FAG	ILITY INFO	JRMAI	ION	Туре	of Facility	(4)						
Street Address 2 Federal Square								School (K- Subchapte Other (i.e.	er 8 (Oth			buildi	ngs,	home	ès,
City (5) Newark, NJ 07102			110-110				Squar 500,0		# 0	f Floors	S	Blo	dg. Aq	ge	
County (6) Essex				Code (7) USE ONLY)				nt Use (Pr				4)			
Name of Monitoring Firm Hired by Building O Hillmann Consulting	wner (8)		ASCN	И No.			of Abat	ement Co	ntractor		1003				
Street Address 1600 Route 22 East, Suite #107						Street	Addres	(0)							
City, State, Zip Code Union, NJ 07083							tate, Zip	Code 15632							
Project Manager for Monitoring Firm Mark Perlmutter			elepho	ne No. 38-7800		0.0000000000000000000000000000000000000	one No 325-33			Licen: 0112	se No. 21				
Start Date (10)	Scheduled	Com	pletion	Date (11)			of OSH	A Monitor	6						
Occupancy Status During Abatement (Check	75 750 16015						Address	Dr., Sui	to 200	(hran	sch off	ico)			
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe: work area will be contri	I Facility F	Hours				City, St	tate, Zip			(bran	ICIT OII	100)			
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		novati molitic				×	Mini- Glov	Containm Enclosur ebag Pro Exempte	e cedure						
	75.00	ocatio			7.0.000		11011	Exemple	4 () 411	4 110111	Tidalic	17.00	bater Typ		
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Main Custo	tenand	by ce/		os Conta hermai surfac	cription aining M systems ting, VAT tiscellane	aterial (insulati F, or		(S	mount Specify or LF)		Flemova	Ť	Encapsulate	Enclosure
	Yes	No	N/A											ate	roi .
5th Flr - U.S. Marshals Service Area			X		Wa	allboard	<u>d</u>			48	S	F			-
													-		
Name of Registered Waste Hauler		920 (200)	DEP W uler ID	10 CH	Cubic `of Was		1	Name of			ndfill				
N.E.T.S., Inc.		110			1 YD			Alliance		fill					
City, State Hazleton, PA					Dispos 11/30/			City, State Taylor,							
Completed by Jessica Wolfe	Title Admini	strati	ve Su	pport	Si	gnature	ol Ca	11	Sel	'e	Date //	///	18		

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

CH 7308

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8600 and 12:120)

1)	E	C	E		PHINT	Eorm)
3						
		NOV	_	5	2018	

Date of Notification (1) 10/31/18					of Building line Con			r (2)			1	1107			LUI	
Agencies Notified	Type Notification			Street A	Address			-016			AS	N. 5) (•	i Gr	<u>Nii in</u>	CALL E
EPA DEP DOL	Initial Amended Amendment			City, Sta	ate, Zip C	ode							Ø36144		Y (47)	
X DOH □ DCA	Emergency justification) Cancellation				f Contact line Con		on			1	ephone 1 2-330-2		г			
Name of Facility Where Al	hatamant is Takin	a Place /2	2)	FAC	ILITY INF	ORMAT	ION	Tve	pe of Facility (4	0						
39 Congress Street	vatement is Takin	g Made (3))					П	School (K-12	25						
Street Address 39 Congress Street								×	Subchapter Other (i.e. pretc.)				uilo	lings,	home	es,
City (5) Lakewood								Sq	uare Feet	# 01	f Floors		В	ldg. A	ge	
County (6) Ocean				County (STATE	Code (7) USE ONLY)			rrent Use (Prio ome	r if bei	ng demo	lished				
Name of Monitoring Firm I	Hired by Building	Owner (8)		ASC	√l No.				batement Con AD PROFE							
Street Address							Street 6 W		ress E DOVE CC	URT	i					
City, State, Zip Code									, Zip Code OOD, NJ 08	3701						
Project Manager for Monito	oring Firm			Telepho	ne No.		Teleph 732-		No -9078		License 1200	No.				
Start Date (10) 11/11/18		Schedule 11/16/1		mpletion	Date (11)		1 2 CONTRACTOR		S-IA Monitor AD PROFES	SSIO	NALS					
Occupancy Status During	Abatement (Chec	k Only On	ie)				Street			UDT	8					
Facility Closed/Vacate Abatement Performed Other – Describe:							City, S	tate.	Zip Code OOD, NJ 08				_			1000
Scope of Work (Check All	That Apply)				-								-			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		The second second	lenova emoli				X		Full Containme Mini-Enclosure Glovebag Proce Non-Exempted	edure	-				a a	
		Is	Locat	ion						<u> </u>				Abate	ment	
Location of			lorma d Sole				scription				and the state of t	-	1	Ту	pe	
Asbestos-Containing M TO BE ABAT In Facility (13)	ED	Mai Cust	intena odial ((12)	nce/ Staff?		thermal surfa	systems cing, VA niscellar	s ins		(8	mount specify or LF)	Nomoval	Domousi	Repair	Encapsulate	Enclosure
EVIEDIO	ND.	Yes	No	N/A			151110				0005	_	4			
EXTERIO)K						SIDING	i		25	00SF	X				
Name of Registered Waste	Hauler		171	JDEP W		£ 0.0000000	Yards		Name of R	Registe	red Land	Ifill				
NEWARK CARTING			14 (2.5)	lauler ID 4509	No.	of Wa			IESI	800	,					
City, State NEWARK, NJ						11/16	sal Date 1/18		City, State BETHLE		l PA					
Completed by JOSEPH PERLSTEIN		Title OWN	ER			S	ignature)				Date 10/31	/1	8		

(h) O'ASW		NOT	State of New Jors FICATION OF ASBES 103 Pursuant to NUAC 8:60 7 ar	ABA (HMEN) (12:120-7)		2)	<u>E</u>	G		J
0.000			Name of Building O	wher/Operator (2))			_	004
Date of Notification (1)				OT IIVIL COTT.			1	- 1	101	- 5	201
10 / 31 /18 Agencies Notified Type Notifica	tion		Street Address 126 E. LINCOLN AVI	ENUE PO BOX 20	000 RY28-414						
			City, State, Zip Code		300, 11120 111	-		accorde Wil	- Dept. (1)	-	0.1.7.5
DEP X Amend	Notification ded Notifica	tion #1	RAHWAY, NEW JEF	RSEY 07065				ASE	LST Li	on er Seikt	11.0
X DOL Cancel			Name of Contact		Telephone Num	her	Om Stoller	-	-	-	dation" o
X DOH On Hol	ia GENCY NC	TIFICATIO		V	732-594-7746	DOI					0 2
DCAEWEIT	GENOT NO	7111 1071110	FACILITY INFORMA	The state of the s					_		
Name of Facility Where Abatement is Ta	aking Place	(3)	1 AGIETT IN GITINA	Type of Facility	(4)						
Name of Lacinty Theorems		500		School (K-		1123					
MERCK SHARP & DOHME CORPORATI	ION			Subchapte X Other (ie. p	r 8 (Other than K private & commcl.	·12) bldgs.,	hom	es, et	c.)		
Street Address				Square Feet	# of Floors				g. Age 71	3	
126 EAST LINCOLN AVENUE - BUILDIN			0	98,230 Current Use (Pric	7	shed)			7.1		
City (5) County			County Code (7) (STATE USE ONLY)	COMMERCIAL	or it being demoii	sneu)					
Name of Monitoring Firm Hired by Build	dina Owne	r (8)	ASCM No.	Name of Abater	nent Contractor	(9)					
ENVIRONMETAL HEALTH INVESTIGAT	IONS, INC.	(0)	17	PAR ENVIRONN	MENTAL CORPO	RATION	V				
Street Address				Street Address	OK DOAD						
655 WEST SHORE TRAIL				313 SPOOK RO City, State, Zip C				-			
City, State, Zip Code SPARTA, N	NEW IERS	EV 07871		SUFFERN, NEW							
Project Manager for Monitoring Firm		Telephone	Number	Telephone Numb	oer Lice	nse Nur	nber				
WILLIAM S. KERBEL, CIH	1	973-729-56		845-369-7500	460						
Expected State Date (10)	Sched	d. Complet	ion Date (11)	Name of OSHA		6					
11 / 1 /18		6 /	30 /19 Day Year	AMERISCI LABO	DRATORIES INC		#11	480			
Month Day Year Occupancy Status During Abatement (Che	Mor		Day Year	Street Address							
Occupancy Status During Abatement (One	ECK OITY OIT	٠,	6		OTDEET						
IX I Hacility Closed/Vacated During	g Entire Per	riod of Abat	ement	117 EAST 30TH	SIREEI						
X Facility Closed/Vacated During Abatement Performed Outside	e of Normal	Facility Ho	urs - Describe:								
Abatement Performed Outside	g Entire Per e of Normal DAY - FRIDA	Facility Ho	urs - Describe:	City, State, Zip C	Code	NEW Y	ORK	1001	6		
Abatement Performed Outside X Other - Describe: MOND	e of Normal	Facility Ho	urs - Describe: 30 AM	City, State, Zip C	ode NEW YORK,					A VAC	UUM
Abatement Performed Outside	e of Normal	Facility Hol AY 6PM-1:3	urs - Describe: 30 AM Full Cont Mini-Enc	City, State, Zip C ainment with Negal los,	ode NEW YORK,					A VAC	UUM
Abatement Performed Outside X Other - Describe: MOND Scope of Work (Check all that apply) Demolition X >3SF OR LF	e of Normal DAY - FRIDA	Facility Hol AY 6PM-1:3	urs - Describe: IO AM Full Cont Mini-Enc Gloveba	City, State, Zip C ainment with Negal los, g Procedure	ode NEW YORK,					A VAC	UUM
Abatement Performed Outside X Other - Describe: MOND Scope of Work (Check all that apply) Demolition X >3SF OR LF >160 SF OR 260 LF	e of Normal DAY - FRIDA	Facility Hol AY 6PM-1:3 vation	urs - Describe: O AM Full Cont Mini-Enc Gloveba; Non-Fria	City, State, Zip C ainment with Negal los, g Procedure ble Procedure	ode NEW YORK,		WET	WIPI	E HEP	1040 S 4 Dec 446	:uuM
Abatement Performed Outside X Other - Describe: MOND Scope of Work (Check all that apply) Demolition X >3SF OR LF >160 SF OR 260 LF Location of	e of Normal DAY - FRIDA X Renov	Facility Hol AY 6PM-1:3 vation	urs - Describe: IO AM Full Cont Mini-Enc Gloveba; Non-Fria Description of A	City, State, Zip City,	ode NEW YORK,	X	WET	WIPI Abate	E HEP	1040 S 4 Dec 446	:UUM
Abatement Performed Outside X Other - Describe: MOND Scope of Work (Check all that apply) Demolition X >3SF OR LF >160 SF OR 260 LF Location of Asbestos-containing	e of Normal DAY - FRIDA X Renov	Facility Hor AY 6PM-1:3 vation Location hally used	urs - Describe: O AM Full Cont Mini-Enc Gloveba; Non-Fria	City, State, Zip Clainment with Negal los, g Procedure ble Procedure usbestos- rial (ACM)	Code NEW YORK, tive Pressure	X	WET	WIPI Abate	E HEP	1040 S 4 Dec 446	:UUM
Abatement Performed Outside X Other - Describe: MOND Scope of Work (Check all that apply) Demolition X >3SF OR LF >160 SF OR 260 LF Location of	e of Normal DAY - FRID X Renov	Facility Hol AY 6PM-1:3 vation	urs - Describe: In AM Full Continue Gloveba; Non-Friation Description of A Containing Mate (ie. Thermal sinsulation, surface)	City, State, Zip Colored City, State, Zip C	Code NEW YORK, ive Pressure	X	WET	WIPI Abate	E HEP	1040 S 4 Dec 446	:UUM
Abatement Performed Outside X Other - Describe: MOND Scope of Work (Check all that apply) Demolition X >3SF OR LF >160 SF OR 260 LF Location of Asbestos-containing Material (ACM)	x Renov Is I norm so Main Si	Facility Hol AY 6PM-1:3 vation Location nally used olely by t/Custodial taff (12)	urs - Describe: IO AM Full Continue Gloveba; Non-Fria Description of A Containing Mate (ie. Thermal s	City, State, Zip Colored City, State, Zip C	NEW YORK, vive Pressure Amount (Specify		WET	WIPI	E HEP	1040 S 4 Dec 446	:UUM
Abatement Performed Outside X Other - Describe: MOND Scope of Work (Check all that apply) Demolition X >3SF OR LF >160 SF OR 260 LF Location of Asbestos-containing Material (ACM) TO BE ABATED in Facility (13)	e of Normal DAY - FRID X Renov Is I norm so Main	Facility Hot AY 6PM-1:3 vation Location nally used blely by t/Custodial taff (12) No N/A	Full Cont Mini-Enc Gloveba; Non-Fria Description of A Containing Mate (ie. Thermal s insulation, surfar	City, State, Zip Colored City, State, Zip C	Amount (Specify SF or LF)	X CONTROL	WET	WIPI Abate	E HEP	1040 S 4 Dec 446	:UUM
Abatement Performed Outside X Other - Describe: MOND Scope of Work (Check all that apply) Demolition X >3SF OR LF >160 SF OR 260 LF Location of Asbestos-containing Material (ACM) TO BE ABATED in Facility (13) 3RD FLOOR ROOM 305	x Renov Is I norm so Main Si	Facility Hol AY 6PM-1:3 vation Location nally used blely by t/Custodial taff (12) No N/A X	Full Cont Mini-Enc Glovebay Non-Fria Description of A Containing Mate (ie. Thermal s insulation, surfar or other miscel	City, State, Zip Colored City, State, Zip C	NEW YORK, vive Pressure Amount (Specify	X	WET	WIPI Abate	E HEP	1040 S 4 Dec 446	:UUM
Abatement Performed Outside X Other - Describe: MOND Scope of Work (Check all that apply) Demolition X >3SF OR LF >160 SF OR 260 LF Location of Asbestos-containing Material (ACM) TO BE ABATED in Facility (13) 3RD FLOOR ROOM 305 3RD FLOOR ROOM 303	x Renov Is I norm so Main Si	Facility Hol AY 6PM-1:3 vation Location nally used blely by t/Custodial taff (12) No N/A X X	Full Cont Mini-Enc Gloveba; Non-Fria Description of A Containing Mate (ie. Thermal s insulation, surfar or other miscel	City, State, Zip Colored City, State, Zip C	Amount (Specify SF or LF)	X DUST CONTROL X X	WET	WIPI Abate	E HEP	1040 S 4 Dec 446	:UUM
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Abatement Performed Outside X Other - Describe: MOND Scope of Work (Check all that apply) Demolition X >3SF OR LF >160 SF OR 260 LF Location of Asbestos-containing Material (ACM) TO BE ABATED in Facility (13) 3RD FLOOR ROOM 305 3RD FLOOR ROOM 303 3RD FLOOR ROOM 304 3RD FLOOR ROOM 319 3RD FLOOR ROOM 320	x Renov Is I norm so Main Si	Facility Hol AY 6PM-1:3 vation Location nally used object by ty	Full Cont Mini-Enc Gloveba; Non-Fria Description of A Containing Mate (ie. Thermal) insulation, surfar or other miscel FIRE PROOFING DUST	City, State, Zip Colored City, State, Zip C	Amount (Specify SF or LF)	X DUST CONTROL X X X X	WET	WIPI Abate	E HEP	1040 S 4 Dec 446	:UUM
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Agencies Notified Type Notificat	tion			126	E. LINCOLN AV	ENUE, P.O. BOX	2000, RY28-414						
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MERCK SHARP & DOHME CORPORATION	ON						er 8 (Other than I						
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ENVIRONMETAL HEALTH INVESTIGATI	ONS, IN	C.			17	PAR ENVIRON	MENTAL CORP	ORATI	ON				
Street Address						Street Address	01/ 00/ 0						
655 WEST SHORE TRAIL City, State, Zip Code						313 SPOOK RC City, State, Zip (21.500.000.000.000.000.000.000.000.000.00						
SPARTA, NE	EW JER	SEY 0	7871			SUFFERN, NEV							
Project Manager for Monitoring Firm				Number		Telephone Num	a real contraction of the second of	ense Ni	umbe	er			
WILLIAM S. KERBEL, CIH		973-7	729-56	349		845-369-7500	460						
Expected State Date (10)	Sche	d. Co	mple	tion Date (11)	Name of OSHA							
11 / 1 /18		6	1	30		AMERISCI LAB	ORATORIES IN	C	#	11480			
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B & G proj. #. 2018-220

Gordana Luna

Secretary/Treasurer

State of N Notification of Asbestos Abatement (Pursuant to NJAC 8:30-7 and 12-720-7)

(Pursuant to NJ Check # 9327 EXTRA FOOTAGE ADDED Date of Notification (1) Name of Building Owner/Operator (2) 1 10 1/13 11 1/11 18 Claude Esposito Agencies Notified Type Notification Street Address NOV - 5 2018 ☐ EPA Initial DEP City, State, Zip Code Amendment X DOL ASSESTOS CON Oxford, NJ 07863 X DOH Name of Contact Telephone Number Cancellation ☐ DCA Claude Esposito FACILITY INFORMATION Name of facility where abatement is taking place (3) Type of Facility (4) School (K - 12) Claude Esposito Subchapter 8 (Other than K-12) Street Address M Other (Private/Commercial Bldgs./Homes, etc. Square Feet # of Floors Bldg. Age City (5) County (6) County Code (7) (State use only) Current Use (Prior if being demolished) Oxford Waren Name of Monitoring Firm Hired by Bldg. Owner (8) Name of Abatement Contractor (9) ASCM No. Environmental Health Investigations, Inc. B & G Restoration, Inc. Street Address Street Address 105 Ryerson Road 655 West Shore Trail City, State, Zip Code City, State, Zip Code Sparta, NJ 07871 Lincoln Park, NJ 07035 Project Manager for Monitoring Firm Telephone Number Phone Number License Number (973)696-6869 00378 William Kerbel 973-610-2634 Name of OSHA Monitor Scheduled Start Date (10) Sched, Completion Date (11) B & G Restoration, Inc. 10/30/2018 11/09/2018 Street Address Occupancy Status During Abatement (Check only one) 105 Ryerson Road Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: LincolnPark, NJ 07035 Other-Describe: Scope of Work (check all that apply) Demolition Renovation Full Containment w/negative pressure Glovebag procedure Mini-enclosure >3 sf or >3 lf ≥160 sf or ≥260 lf Non-friable procedure Is location normally used solely Location of E by maintenance/custodial e asbestos-containing п Amount Description of asbestos-containing n staff(12) m p C material to be (Specify SF or material (ACM) C 0 2 abated in facility (13) a LF) Yes No N/A p Attic vermiculite 552 sf X 2nd floor × 950 sf contaminated sheetrock X kitchen area VAT (no mastic) 375 sf 🚓 🤺 -Registered Waste Hauler NJDEP Hauler ID# Cubic Yards of Waste | Name of Registered Landfill B & G Restoration, Inc. 19563 Tullytown Resource & Recovery Center City, State Disposal Date City, State Lincoln Park, NJ 10/30/18 - 11/09/18 Tullytown, PA Completed by (Print or Type) Signature Title

Cierdana Luna

10/31/2018

State of N.I.

Notification of Asbestos Abatement 2018-220 B & G proj. #: (Pursuant to NJAC 8:60-7 and 12:120-7) Check # 9309 **EMERGENCY** Date of Notification (1) Name of Building Owner/Operator (2) 1 10 1/12 19 1/11 18 1 Claude Esposito Agencies Notified Type Notification Street Address ☐ EPA NOV - 5 2018 Initial ☐ DEP City, State, Zip Code DOL Amendment Oxford, NJ 07863 X DOH Name of Contact Telephone Number Cancellation ☐ DCA Claude Esposito FACILITY INFORMATION Name of facility where abatement is taking place (3) Type of Facility (4) School (K - 12) Claude Esposito Subchapter 8 (Other than K-12) Street Address M Other (Private/Commercial Bldgs./Homes, etc. Square Feet # of Floors Bldg. Age City (5) County (6) County Code (7) (State use only) Current Use (Prior if being demolished) Oxford Waren Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Abatement Contractor (9) Environmental Health Investigations, Inc. B & G Restoration, Inc. Street Address Street Address 655 West Shore Trail 105 Ryerson Road City, State, Zip Code City, State, Zip Code Sparta, NJ 07871 Lincoln Park, NJ 07035 Project Manager for Monitoring Firm Phone Number Telephone Number License Number William Kerbel 973-610-2634 (973)696-6869 00378 Scheduled Start Date (10) Name of OSHA Monitor Sched. Completion Date (11) B & G Restoration, Inc. 10/30/2018 11/09/2018 Street Address Occupancy Status During Abatement (Check only one) 105 Ryerson Road Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Other-Describe: LincolnPark, NJ 07035 Scope of Work (check all that apply) Demolition ■ Renovation Full Containment w/negative pressure Glovebag procedure >3 sf or >3 if ≥160 sf or ≥260 lf Mini-enclosure Non-friable procedure Is location normally used solely Location of by maintenance/custodial asbestos-containing Description of asbestos-containing Amount staff(12) material to be m p material (ACM) (Specify SF or C abated in facility (13) 0 C Yes a No N/A 2 L Attic vermiculite 552 sf X 2nd floor contaminated sheetrock 950 sf X kitchen area x VAT (no mastic) 150 sf Registered Waste Hauler Cubic Yards of Waste NJDEP Hauler ID# Name of Registered Landfill B & G Restoration, Inc. Tullytown Resource & Recovery Center

Disposal Date

10/30/18 - 11/09/18

Signature

Tullytown, PA

10/29/2018

Gordana Luna

City, State

Lincoln Park, NJ

Gordana Luna

Completed by (Print or Type)

Title

Secretary/Treasurer

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Date of Notification (1)				Name	of Building	Owner/Operator (2)	I NOV	- 5	20	18	
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Agencies Notified EPA	Type Notifica			Street	Address			ASBEST	OS C		ROL.	P. 254
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(NJAC 5:23-8)	justification				of Contac			Telephone Numb	per			
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PO Box 341						623 Cutler A	venue					
City, State, Zip Code						City, State, Zip C	ode					
Chesterfield, NJ 08	515					Maple Shade						
Project Manager for Mon			Tele	phone	No.	Telephone No.		License No.				
Bill Weisgarber	3		60	9-298	-4070	856-755-0099	9	00842				
Start Date (10)	S	Scheduled C	omple	tion Da	te (11)	Name of OSHA	Monitor					
11 /12 /					18	EMSL Analy	tical, Inc.					
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Completed By (Print or T	ype)	Title		624	2	Signature	1		ate			
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Jan 17 2000 12:10AM NJ Asbestos Control 609.633.0664 page 1

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Street Address						Street Address	g, 1110.					
1889 Rte. 9, Unit 61						1889 Route 9	Unit 61					
City, State, Zip Code						City, State, Zip Co						
Toms River, New Jersey 087							New Jersey 087					
Project Manager for Monitoring Firm	1		Te	elephon	e No.	Telephone No.	New Jersey 087					
Nicholas Fernicola			11		9-9932	732-349-9932		License No.				
tart Date (10)	Sched	uled (Pate (11)	Name of OSHA M		00624				
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cope of Work (Check all that apply)						Piscataway, N	ew Jersey 0885	i4				
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Agencies Notified	Type Notificat	tion				\ddress				LICENSI	√G	- 7		
⊠ EPA	☐ Initial ☐ Amended				51050000000000000000000000000000000000	Edison R	NAME OF TAXABLE PARTY.	01	19	nal had ch	Lit	3	5/4	0
□ DOLWD □ DOH □	Amendme	nt#			- 777	ate, Zip Co								
□ DCA	☐ Emergence		ding	1		and the second	ong, NJ 07849			T. I				
(NJAC 5:23-8)	justificatio	n)		8		of Contact rew Smit	:h			973-663-1680				
					FΔC	II ITY INI	FORMATION							
Name of Facility Where A	Abatement is T	aking P	Place ((3)	170		Ortho Circuit	Type of Fac	ility (4	1)				
Warehouse	Abatomont is 1	aiting i	1400	/				School (
Street Address		10						Subchap	oter 8	(Other than K-12)	انبيط ام	dinas		
	2							Momes,		vate and commercia	ai Duii	ungs	,	
200 Badger Avenue	9							Square Fee	-	# of Floors	Bld	g. Ag	е	
City (5) Newark).	2500 sf		1	1	00		
					Count	v Code (7)	(STATE USE ONLY)		e (Pric	or if being demolishe	ed)			
County (6)					Count	y code (r)	(OTATE GOE GIVET)	Wareho						
Essex Name of Monitoring Firm	Lirod by Duild	ling Ou	mar (8	2)	ASCM N	Jo.	Name of Abateme							
Guardian Contracti		ing Ow	niei (c	" ['	1001111		Guardian Co							
	ilig, ilic.						Street Address	.,						
Street Address	,						1889 Route 9	Unit 61						
1889 Rte. 9, Unit 61	<u> </u>						City, State, Zip Co				7			
City, State, Zip Code	07001 00755						Toms River,		v 087	755				
Toms River, New J Project Manager for Mon	with the same of the same			Tala	phone N	do.	Telephone No.		,	License No.			-	
Nicholas Fernicola					2-349-		732-349-9932)		00624				
		Chadu	lad Co		tion Dat		Name of OSHA N							
Start Date (10) 11 / 02 /					_ / _		E.M.S.L. Ana							
Occupancy Status During	g Abatement (Check	only o	ne)			Street Address							
☐ Facility Closed/Vacate					ment		1056 Stelton							
Abatement Performed	d Outside of No	ormal F	acility	Hour	s - Des	cribe	City, State, Zip C	ode						
Time of Abatement:	AM	PM/		_PIVI-		4IVI	Piscataway,	New Jerse	y 088	354				
Scope of Work (Check a	III that apply)						□ Eull Con	tainment with	h Nen	ative Pressure				
☐ >3 sf or >3 lf		Γ	Re	novati	on		☐ Mini-End	closure		ative i lessure				
≥160 sf or ≥260 lf			☑ Der				☐ Gloveba	g Procedure	nd No	n-Friable Procedure				
							☐ NOII-EXE	empled () ar	10 140	II-I Hable I Toccourc		ateme	ent T	VDA
	2000 f 0		(2000)	Locat Iorma			Description	of			_			T
Location Asbestos-Containing		1)	Use	d Sole	ely by		stos Containing Ma	aterial (ACM)		Amount	Removal	Repair	Encapsulate	Enclosure
TO BE AB	ATED	'		intena	ince/ Staff?	(i.e	e., thermal systems			(Specify SF or LF)	GVO	air.	sde	uso
IN Faci	•		Cusi	(12)		ė.	surfacing, VAT	88 10 KH		SF OI LF)	=		ulate	Ге
(13)			Yes	No	N/A			/					CD	
basement						asbest	os pipe insulati	on		600 If	\boxtimes			
			П											
				П								П	П	П
					12						П			
						Nanta	Cubic Yards of	Name of	Regis	stered Landfill	1-			
Name of Registered Wa Guardian Contract					NJDEP N Hauler II	D No.	Waste	T.R.R.		stered Latidiii				
					20223	3	3 Disposal Date	City, Stat	te					
City, State Toms River, New C	lersev						11/06/18	100		Pennsylvania				
		Title					Signature	1		Dat	te /	- 1		
Completed By (Print or Nicholas Fernicola) John Carlotte		Mar	ager		Signature	_ /	,	1	, /	, /	18	1
Nicholas Ferricola	a		ojeci	inai	agei			1-1-		1 1	1	11		

\cap	H300	304 NO	OTIFI)	Purş	ant t	F ASB	ESTOS ABATI 8:60 and 5:16)	DE C	E			7 7 7
Dat	e of Notification (1)						Owner/Operator (2)	NOV.	5-5	/20	18	
	11 / _	01 / 18	-		JRD C	constru	ction, Inc.	10	7 -				-
Age	encies Notified	Type Notification		St	reet Ac	dress			ASBESTO			aoi.	84
	EPA					e Road				TAS	ING.		
	DOLWD	Amended Amendment #		100000		te, Zip Co							
	DOH DCA	☐ Emergency (inclu	iding				, NJ 07727		Telephone Number				
	(NJAC 5:23-8)	justification)		N		Contact DeGenr			732-919-3292				
		☐ Cancellation				46.40.400.500.500	FORMATION						
			N /	٥١	FACI	_II Y INI	FORWATION	Type of Facility (4	•)				
		Abatement is Taking F	riace (3	9)				☐ School (K-12)					
	Residence							Subchapter 8	(Other than K-12) vate and commercia	l build	dings	,	
St	eet Address							homes, etc.)					
0:	(5)							Square Feet	# of Floors	2000	g. Age -	Э	
1000	ty (5) Brick							1100 sf	1	6)		
	ounty (6)				County	Code (7)	(STATE USE ONLY)		or if being demolishe	a)			
	Ocean							Residence					
Na	ame of Monitoring Firr	m Hired by Building Ov	vner (8) A	SCM N	0.		ntracting, Inc.					
							Street Address	muacting, mo.					
St	reet Address						1889 Route 9						
С	ty, State, Zip Code						City, State, Zip C Toms River,	ode New Jersey 087	755				
_	roject Manager for Mo	onitoring Firm		Telep	none N	0.	Telephone No.		License No.				
P	roject Manager for Mc	Millioning 1 iiiii					732-349-993		00624		775		
S	tart Date (10)	Schedu	led Co	mpletio	on Date	(11)	Name of OSHA						
	11 / 15_	/18	1_ /	_16	_ / _	18	E.M.S.L. Ana	alytical					_
0	ccupancy Status Duri	ing Abatement (Check	only o	ne)			Street Address						
	7 Facility Closed/Vaca	ated During Entire Peri	od of A	batem	ent		1056 Stelton						
	7 Abstament Perform	ed Outside of Normal I	racility	Hours	- Desc	M	City, State, Zip C	New Jersey 08	854				
0	cope of Work (Check							ntainment with Neg					
		,		novatio	n		☐ Mini-En	closure	gativo i roscu.				
] ≥3 sf or ≥3 lf] ≥160 sf or ≥260 lf		⊠ Der				☐ Gloveb ☐ Non-Ex	ag Procedure empted (*) and No	n-Friable Procedure)			
			ls	Locati	on					Ab	ateme	ent Ty	/pe
	Locati	on of	١	Vormal	у		Description	of	Amount	Rer	Repair	Enc	Enc
	Asbestos-Containir	ng Material (ACM)		d Sole intenar		Asbe (i.	estos Containing N e., thermal system	s insulation,	(Specify	Removal	air	apsi	Enclosure
	<u>TO BE A</u> IN Fa	The second secon	Cust	odial S (12)	staff?		surfacing, VA other miscellar	T, or	SF or LF)	<u>=</u>		Encapsulate	re
	(13	3)	Yes	No	N/A		Other Illiscellar	.0000/				,,,	
-					П	asbest	tos siding		1100 sf	\boxtimes			
	yterior			KY			_					_	1

Completed By (Print or Type) Nicholas Fernicola

Name of Registered Waste Hauler

Guardian Contracting, Inc.

Toms River, New Jersey

exterior

City, State

ASB-41 **JAN 13**

Cubic Yards of

Disposal Date

11/16/18

Signature

Waste

3

Project Manager

NJDEP Waste

Hauler ID No.

20223

Date

Name of Registered Landfill

Tullytown, Pennsylvania

T.R.R.F.

City, State

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

1435305	NOTI		ursuant	OF ASE	BESTOS ABAT C 8:50 and 5:16	5)	E C NOV		20:	/ E	D ST II
Date of Notification (1)	_				Owner/Operator (2		1	_	7	36	-
	8		Ame	eritrust R	Residential Servi	ces, LLC	1 1000	5	30	1)	_
Agencies Notified Type Notification	1		10.000.000.000.000.000.00	Address			Protest St	AKI	ING.	14.31.	Ó.
☑ EPA☑ Initial☑ Amended					ree Road NE Su	ite 1500		-	instructions	+	4-4-
☑ DOLWD☑ Amended☑ Amendment	#			ate, Zip C						15	
□ DCA □ Emergency (-			nta, GA			1=				
(NJAC 5:23-8) justification)			14.112.1111.12.1	of Contact			Telephone Numb				
☐ Cancellation				/ Hagopi			917-586-2559	,		00711	
8			FAC	ILITY IN	FORMATION						
Name of Facility Where Abatement is Taki	ng Place	(3)				Type of Facility (35				
Residence						☐ School (K-12) 3 (Other than K-12)				
Street Address						Other (i.e., pr homes, etc.)	rivate and commerc	cial bu	ildings	S,	
City (5)						Square Feet	# of Floors	Blo	ig. Ag	je	
East Brunswick						2000 sf	1	7	70		
County (6)			Count	ty Code (7)(STATE USE ONLY)	Current Use (Pri	or if being demolish	ned)			
Middlesex						Residence					
Name of Monitoring Firm Hired by Building	Owner (8)	ASCM N	No.	Name of Abateme	ent Contractor (9)	}				
Guardian Contracting, Inc.					Guardian Co	ntracting, Inc.					
Street Address					Street Address						
1889 Rte. 9, Unit 61					1889 Route 9	, Unit 61					
City, State, Zip Code					City, State, Zip Co						
Toms River, New Jersey 08755						New Jersey 08					
Project Manager for Monitoring Firm		2000	ephone N		Telephone No.		License No.				
Nicholas Fernicola		1	32-349-		732-349-9932		00624				
Start Date (10) Sch 11 / 14 / 18	eduled C	7//	etion Dat 6 / _		Name of OSHA M E.M.S.L. Ana						
Occupancy Status During Abatement (Che	eck only o	ne)			Street Address						
☐ Facility Closed/Vacated During Entire F			ement		1056 Stelton						
☐ Abatement Performed Outside of Norm	al Facility	у Ноц	irs - Desc		City, State, Zip Co	ode					
Time of Abatement:AM	PM/	_PM	1/	ΑM		New Jersey 08	854				
Scope of Work (Check all that apply) □ ≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf	⊠ Re	nova			☐ Mini-End ☐ Gloveba	g Procedure	gative Pressure				
		Loca			_			Ab	ateme	ent Ty	/pe
Location of Asbestos-Containing Material (ACM)		Norm d So	ally lely by	Acho	Description of stos Containing Ma		Amount	Rei	Repair	Enc	Enc
TO BE ABATED	Ma	inten	ance/		., thermal systems	insulation,	(Specify	Removal	pair	Encapsulate	Enclosure
IN Facility	Cus	todia (12	l Staff?)		surfacing, VAT other miscellane		SF or LF)	<u>m</u>		ulat	Ге
(13)	Yes	No	N/A	İ	other misochane	.043)				O	
attic				asbesto	os containing ce	eiling	240 sf	\boxtimes			
basement		\boxtimes		asbesto	os floor tile		420 sf	\boxtimes			
attic				asbesto	os floor tile		434 sf	\boxtimes			
Name of Registered Waste Hauler Guardian Contracting, Inc.			NJDEP V Hauler II	No.	Cubic Yards of Waste	Name of Regis	stered Landfill	-1			
City, State			20223	5	3 Disposal Date	City, State	7				
Toms River, New Jersey					11/16/18		, Pennsylvania				

Toms River, New Jersey

Title

Project Manager

Completed By (Print or Type)

Nicholas Fernicola

Signature

Date

11

8

M (M		NO	(Pui	ATION O	of New C F ASBES NJAC 8:6	TOS A 30 and	12:120)			E C		5	2018		Control of the contro
Date of Notification (1)			1	lame of B NJ Depa	Building Ov artment	vner/O of Tra	perator Inspor	⁽²⁾ tation		4	110					
	e Notification			Street Add	iress od Stree	et					BIERA	TOS JUCI		in in in	71. G	
X EPA X DEP X DOL	Initial Amended Amendment	#1			, Zip Code Ile, PA 1		XV		in			and the same	E 5			
DOH DCA	Emergency (justification) Cancellation	including	1 0	Name of C Chris Ha							phone No 7-790-10		S			
				FACILI	TY INFOR	RMATIO	NC			`						_
Name of Facility Where Abate NJDOT Mainline Appro Street Address Structure # 1120-150 I-	ach Bridge		&R (Canal a	and Rout	te 175	5	Solve O	f Facility (4 chool (K-12 ubchapter (ther (i.e. pr	2) B (Othe	er than K-	12) cial bu	ıildir	igs, h	omes	
City (5)	.95 Over No	ute 29, D	CATA	Janai, c	ina rioa			Square	tc.) e Feet	# of	Floors		Bld	g. Ag	е	
County (6) Mercer				County Co	ode (7) SE ONLY)		_	Curren	t Use (Prio e	r if bei	ng demoli	ished)				
Name of Monitoring Firm Hire Criterion Laboratories,	ed by Building	Owner (8)		ASCM	No.		Name Dian	of Abate	ement Cont Iuntbach	tractor Cons	(9) truction	Cor	٥.			
Street Address								Address E Luze	s erne Stre	et, Ur	nid D					
400 Street Road								State, Zip								
City, State, Zip Code Bensalem, Pa 19020				T	- Na		Phila	adelphi hone No	a, PA 19	124	License	No.				
Project Manager for Monitorion Steven A. Vena, CIH	ng Firm Project Man			Telephon 215-24	4-1300		215-	739-8			00646					
Start Date (10) 11/26/2018		Scheduled 10/15/2		npletion D	ate (11)		Sam	ne as a	bove							
Occupancy Status During Ab	atement (Che	ck Only One	e)				Street	Addres	S							
Facility Closed/Vacated Abatement Performed Cother – Describe:	During Entire Outside of Norr	Period of A mal Facility	batem Hours	nent)	City, S	State, Zi	p Code							
Scope of Work (Check All Th	nat Apply)						-									
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Tanana .	enova emolit					Full Min	Containme i-Enclosure vebag Prod	e cedure						
								× Nor	n-Exempted	d (*) ar	d Non-Fr	iable I			ment	
		277,00	Locati				景型	7.22						Ту		
Location of Asbestos-Containing Ma TO BE ABATE In Facility (13)	terial (ACM) ED	Used Mai	d Sole ntena	ely by	Asbest (i.e.	os Cor therma surfa	I systen acing, V	Material ns insula	(ACM) ation,	(Amount Specify F or LF)		Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A							10.05	1			· ·	
Median			X				37.5	cement			10 SF 40 SF	X	-			
Southboun	id		X					ement			80 Sf					
Northboun	d		X		8" wi	de ro	ofing o	cement	t joint		00 31	X				
I S State of Monto	Haulor		11	NJDEP W	/aste	Cubi	c Yards		Name of	Regis	tered Lan	dfill				
Name of Registered Waste Waste Management	naulei		1	Hauler ID 7279		of W	aste		Fairles	s Hills						
City, State							osal Dai eeded		City, Sta Morris		PA					
Tom River, NJ Completed by		Title					Signatu					Date				
Wayne Huntbach		Proje	ect M	anager			//	1				11/	1/18	5		

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

NO OFFERENCE NO.

DECEIVE

NOV - 5 2018

Federal N	otification of Asb	estos Ab	atement (F	ursu	ant to NJAC 8:60-7 ar	nd 12:12	0-7)		
Date of Notification		Nam	e of Buildin	g Ow	ner/Operator		And the Park of th		-
1 0 3	1 1		ANTIC HEA		ASt		OS CONTAC ENSING		
Agencies Notified Type	-6 N - 1/6 - 1/	-					L	f \	ALICE TELES
X USEPA	of Notification Initial		et Address						
X DEP	Amended	aa B	EAUVIOR A	AVEN	IUE				
X DOL X	Amendment #1	City	State, Zip (20do					
	Emergency		MIT, NJ 0						
х рон	Cancelation	Journ	111111, 145 0	7901					
DCA	Garioolation	Nam	e of Contac	f		1-	Telephone Num	hor	
			o or comuc			- 1	reteptione Mult	ibei	
		Salva	atore DeFra	nco			908-522-2195		
		FACIL	ITY INFOR	MAT	ION				
Name of Facility Where Abat	ement is Taking P	lace			Type of Facility				A THE STATE OF THE
					() School (K-12)				
Newton Medical Center	-				() Sub-Chapter 8				
Street Address				1	(X) Other (I.e. priva	ate & Cor	mmercial		
475 High Charat					buildings, homes	s, etc.)			
175 High Street	To	10 .		SF	of Bldg.	11/2	‡ Floor		Age of Bldg
City	County	County		-		000000		13	
Newton, NJ 07860		State us	se Only	Cu	rrent Use (prior if being	demolis	hed)		
Name of Monitoring Firm Hire	d by Building Our	1	IACCM No	INI	Al 1 O				The state of the s
or morntoring Filli file	a by building OWn	iei	ASCINI NO	. INa	me of Abatment Contra	ector			
Partner Engineering and Scie	nce			AC	M CONSULTING COR	D			
Street Address	1100				eet Address	r.			
				Jou	eer Address				
611 Industrial Way West				215	0 STANLEY TERRAC	F			
City, State, Zip Code				_	y, State, Zip Code				
				1-1,	, , otaloj zip oddo				
Eatontown, NJ 07724				UN	ION, NJ 07083				
Project Manager for Monitoring	g Firm T	elephone	No.	Tel	ephone Number	IL	icense Number		
						-			
TO BE DETERMINED		E DETER		908	-687-1008		0057	5	
Scheduled Start Date	Scheduled Comp	letion Da	te	Nar	ne of OSHA Monitor				
44 5 0040									
11 5 2018 Month Day Year		2018			SL ANALYTICAL				
Occupancy Status During Aba	Month Day	Year		Stre	eet Address				
Facility Closed/Vacated	During Entire Deri	ily One)		207	MEST SSTUREN				
Abatement Outside Norr	nal Facility House	od of Aba	tement		WEST 38TH STREET				
Describe: 2PM - 10PM	nai i aciiity riouis			City	, State, Zip Code				
Other - Describe:				NEV	W YORK, NY 10118				
				'	V 1014, 141 10116				
Scope of Work (Checl Only Or	ne)		Abatement	Meth	nod				
Demolition	80		Χ		Containment with Nega	ative Pres	ssure		
>3sf or >3lf					-Enclosure				
≥ 160sf or ≥ 260lf				Glov	ebag Procedure				
Renovation					-Friable Procedure				
			on Normally		Describtion of	Ar	mount to be	Abat	ement Type
ocation of ACM Facility	L		Custodial S		ACM to be		emoved		
-151		Yes	NO	N/A	Removed		pecify SF/LF)	Rem	Rep.
st Floor Steam HX MER					PIPE INSULATION	29	OLF	X	
								1	
								1	
lame of Registered Waste Ha		NJDEF	Waste ID	No.	Cubic Yds waste	Na	ame of Register	ed Lar	dfill
RI-STATE TRANSFER ASSO	C., INC.		SW1896		TBD	M	NERVA ENTER		
ity, State			al Date		City, State of Register	ed Landf			
RONX, NY		TBD			WAYNESBURG, OHIO	0,			
completed By (Print or Type)		Title			Signature	/	1 -		Date
nita Smolar		GENER	RAL MANA	GER	Gueta	low	10/31/201		

18/22/2018

Federal Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-1 Date of Notification Name of Building Owner/Operator ASSESTOR CONTROL & LIGHTERS 1 0 2 ATLANTIC HEALTHCARE SYSTEMS Agencies Notified Type of Notification Street Address USEPA Initial 99 BEAUVIOR AVENUE X DEP Amended X DOL Amendment #1 City, State, Zip Code Emergency SUMMIT, NJ 07901 X DOH Cancelation DCA Name of Contact Telephone Number Salvatore DeFranco 908-522-2195 FACILITY INFORMATION Name of Facility Where Abatement is Taking Place Type of Facility () School (K-12) Newton Medical Center) Sub-Chapter 8 (Other than K-12) Street Address (X) Other (I.e. private & Commercial buildings, homes, etc.) 175 High Street SF of Bldg. # Floor Age of Bldg. City County County Code 1000000 13 State use Only Current Use (prior if being demolished) Newton, NJ 07860 Name of Monitoring Firm Hired by Building Owner ASCM No. Name of Abatment Contractor Partner Engineering and Science ACM CONSULTING CORP. Street Address Street Address 611 Industrial Way West 2150 STANLEY TERRACE City, State, Zip Code City, State, Zip Code Eatontown, NJ 07724 UNION, NJ 07083 Project Manager for Monitoring Firm Telephone No. Telephone Number License Number TO BE DETERMINED TO BE DETERMINED 908-687-1008 00575 Scheduled Start Date Scheduled Completion Date Name of OSHA Monitor 2018 11 2018 EMSL ANALYTICAL Month Day Year Month Day Year Street Address Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement 307 WEST 38TH STREET Abatement Outside Normal Facility Hours City, State, Zip Code Χ Describe: 3PM - 11PM Other - Describe: NEW YORK, NY 10118 Scope of Work (Checl Only One) Abatement Method Demolition Full Containment with Negative Pressure >3sf or >3lf Mini-Enclosure ≥ 160sf or ≥ 260lf X Glovebag Procedure Renovation Non-Friable Procedure Is Location Normally Describtion of Amount to be Abatement Type Location of ACM Facility Used by Custodial Staff ACM to be Removed Yes NO N/A Removed (Specify SF/LF) Rem. Rep. 1st Floor Steam HX MER PIPE INSULATION 290LF Name of Registered Waste Hauler NJDEP Waste ID No. Cubic Yds waste Name of Registered Landfill TRI-STATE TRANSFER ASSOC., INC. SW1896 MINERVA ENTERPRISES, INC City, State Disposal Date City, State of Registered Landfill BRONX, NY TBD WAYNESBURG, OHIO Completed By (Print or Type) Title Signature Date Anita Smolar GENERAL MANAGER

no ch		NOTI	FICATIO	State of N ON OF AS nt to NJA	BESTOS	ABATE	MENT 0)		EG		\mathbb{V}	Ē	
Date of Notification (1) 10/31/2018			Name PSE	of Buildin G	g Owner	Operator	(2)		NOV	- 5	2018	3	
Agencies Notified Type Notification				Address ark Plaz	za								
DEP X Amended Amendmen				State, Zip oark, NJ					ASBESTO LIC	in <u>C</u> n ENUI	v3 -	71. fg.	
X DOH justification DCA Cancellatio		ig .	Name	of Contac	ot				elephone N 348-200-6			ale.	
				CILITY IN		ION			40-200-0	940			
Name of Facility Where Abatement is Takin PSE&G Street Address	ng Place	(3)					Type of Facilit	(-12)					
340 CHESTNUT STREET							Other (i.e etc.)	. private	ther than K- e & comme	cial bu			nes,
City (5) NEWARK							Square Feet 9160	2	of Floors		Bldg. 89 Y		
County (6) ESSEX				Code (7)			Current Use (F SUBSTATIO		eing demol	shed)			
Name of Monitoring Firm Hired by Building ENVIRONMENTAL TACTICS	Owner (8	3)	004	M No. 5			of Abatement C QUE SYSTEM			CA IN	C.		
Street Address 64 BROAD STREET						27772	Address VHITEHEAD	AVE.					
City, State, Zip Code MATAWAN, NJ 07747							tate, Zip Code TH RIVER, N	1J 088	82				
Project Manager for Monitoring Firm TOM GEIGER			Telepho 732-2	one No. 90-2217	7	Teleph	one No. 132-8350		License 01111	No.			
Start Date (10) 11/5/2018	Schedu 11/27		mpletion	Date (11))		of OSHA Monito		AMERIO	CA IN	 С.		
Occupancy Status During Abatement (Chec Facility Closed/Vacated During Entire R		00000	nont				Address VHITEHEAD	AVE.					
Abatement Performed Outside of Norm Other – Describe: NECESSARY OPER	al Facilit	v Hours	S			City, St	ate, Zip Code TH RIVER, N		82				
Scope of Work (Check All That Apply)													
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	Renova Demolit				×	Full Containn Mini-Enclosu Glovebag Pro Non-Exempte	re ocedure				-0	
	1.00	s Locati Normal									Abat	ement	t
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	ed Sole aintenar todial S (12)	ly by nce/	Asbes (i.e.	stos Cont thermal surfac	scription of aining Ma systems bing, VAT niscellane	aterial (ACM) insulation, , or	A (S	Removal	Repair	Encapsulate	Enclosure	
	Yes	No	N/A							<u>a</u>	-	late	Ire
BASEMENT		X			ACM C			8	00 LF	Х			
		Х		В	OILER	INSULA	ATION	3	0 SF	X			
b										-			
Name of Registered Waste Hauler			JDEP W		Cubic \		Name of	Registe	ered Landfill				
VEOLIA City State			auler ID 06313		lo. of Waste								
City, State FLANDERS, NJ					Disposa TBD	al Date	City, Stat MORRI		E, PA				61
Completed by CAROL RAIMO	GR.	R. Signature Date 10/31/2018											

								AND COURSE OF STREET		44.4.		Prin
				ON OF A	New Jers SBESTOS IC 8:60 ar	ABATE		DE	B.	<u>[. ·]</u>	7 6	The state of the s
Date of Notification (1)			Name		ng Owner/	Operator	(2)	NO NO)V - 5	20	18	
Agencies Notified Type Notificati	CD.			Address				and III		, 20	10	le-re-
I	011	38.	8		DADI	> y	PLAZA	1005				_
DEP Amended	ß			State, Zip	Code /	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	1166	ACOLO	7050	ONT	101 8	À
× DOL Amendme	ent# 🕯			EW		_	177	27/01	ters - specieta	an and	1912/101	4
DOH justification	cy (includii on)	ng		of Conta	ct	`` ;		Telephor	ne Numb	er		-
DCA Cancellat	ion			AT	FORMAT		arlo.		3-8		- 7	34
Name of Facility Where Abatement is Ta	king Place	(3)	FA	CILITIN	PURMAI	ION	Type of Facilit	y (4)				1
PSE4G Street Address							School (H					
340 CHEST	NUT	5	Tet	ET			Subchap Other (i.e	ter 8 (Other tha e. private & com	n K-12) mercial I	buildin	gs, ho	mes,
City (5) NEULARK			~~	<u> </u>			Square Feet 9/60	# of Floor	rs	Bldg	. Age	
County (6)				Code (7)				Prior if being de	molished)	9 4	RS
ESSEX Name of Monitoring Firm Hired by Buildin	~ 0)	Name of the last o		.1)		Sa	BSTAT	T, 01	U		
ENVIRONMENTAL TACTICS	g Owner (۵)	004	M.No.* 45			of Abatement C UE SYSTEM		RICA I	NC		
Street Address 64 BROAD STREET						Street	Address VHITEHEAD					+
City, State, Zip Code MATAWAN, NJ 07747					8	City, St	tate, Zip Code					+
Project Manager for Monitoring Firm			Telenh	one No.			TH RIVER, None No.					
TOM GEIGER Start Date (10),			732-2	90-221		732-4	132-8350	011	nse No. 11			
11/5/18	/	1/_	mpletion	Date (11)		of OSHA Monito		RICA IN	JC		
Occupancy Status During Abatement (Che			17	70		Street A	Address					
Facility Closed/Vacated During Entire Abatement Performed Outside of Not	mal Facili	ty Haven		0		Contraction of the Contraction o	VHITEHEAD ate, Zip Code	AVE.				
Other - Describe: Managada Scope of Work (Check All That Apply)	y apr	arlo	s a	ny			TH RIVER, N	J 08882				
X ≥3 sf or ≥3 lf	X	Danau				X						
≥160 sf or ≥260 lf		Renova Demolit	ion				Mini-Enclosus	nent with Negat re	ive Pres	sure		
							Glovebag Pro	cedure ed (*) and Non-l	Friable D	roond	150	
	ls Is	s Locati	on				- And The Co	did Noti-	TIGUIS F		temer	nt.
Location of		Normal			Des	cription o	of.				уре	
Asbestos-Containing Material (ACM) TO BE ABATED	Ma	ed Sole aintenar	iy by ice/	Asbes	stos Conta	ining.Ma	terial (ACM)	Amount		1	m	
In Facility	Cus	todial S	Staff?	(I.e	tnermai s surfaci	systems i ing, VAT,	insulation, or	(Specify SF or LF)	Ker R	' R	nca	Enc
(13)		(12)	1		other m	iscellane	ous)	0, 0, 2,	Kemova	Repair	Encapsulate	Enclosure
BASEMENT	Yes	No X	N/A	1 0 0				6			िंह	e
DISEMEN!		/		_			SOCK	800 4			-	1
				100	LER	IN	SulATION	30 S	FX	1		
	1								-	-	-	
lame of Registered Waste Hauler			JDEP W		Cubic Y		Name of	Registered Lan	dfill			
VEOLIA		1	auler ID 3063,	CONTRACT	of Wast		ENIDIE					
City, State	حام	100	1000		Disposa	I Date	City, Stat				70	
FLANDERS, N.	-					BD	MORRI	SVILLE, PA	<u> </u>			
AROL RAIMO	Title OFFI	CE M	GR.		Sig	nature	12.0 ×	2, 1	Date 10	921	1,	2

K # 9254														Print
		NOT	IFICATI (Pursua	State of ON OF A int to NJ	SBEST	rsey OS ABATE and 12:12	EMENT	г		E	G [5,1	\mathbb{V}	
Date of Notification (1) 10/23/18			Name		ing Own	er/Operator	r (2)			N	OV -	- 5	2018	3
Agencies Notified Type Notificatio Type Notificatio X EPA DEP Amended			8	t Address O State, Zip	PAR	KK	OlA	ZA		ACDT:	New Mer	(CO)		
DOL Amendmen Emergency justification DCA Cancellatio	/ (includi	ng	Name	of Conta	act	K, DEC				hone N			73	349
Name of Facility Where Abatement is Taki	ng Place	(3)	FA	CILITY	NFORM	ATION	Туре	of Facility						- 4
Street Address 340 CHESTA City (5)	uT	- 5	TRE	ET			×	School (K Subchapte Other (i.e. etc.)	-12) er 8 (Other t private & co	han K- ommer	12) cial bu	ilding	s, hor	nes,
NEWARK County (6)							Squa	re Feet	# of Flo	oors		Bldg.	Age	
ESSEX Name of Monitoring Firm Hired by Building	Owner ((8)	(STATE	Code (7 USE ON CM No.		Name		Sa	rior if being of BST/Sontractor (9)	1-T;		1		
ENVIRONMENTAL TACTICS Street Address			004	45		UNIC	QUE S	SYSTEM	IS OF AM	IERIC	A IN	С		
64 BROAD STREET				· ec		396 V	NHIT	EHEAD p Code	AVE.					
MATAWAN, NJ 07747 roject Manager for Monitoring Firm OM GEIGER				one No.			TH R	IVER, N	J 08882	cense N	Vo.			
tart Date (10)	Schedu	ıled Cor		90-221 Date (1			of OSH	A Monitor	0	1111			21-21-21-2	
ccupancy Status During Abatement (Chec	k Only C	//o	77/	18		UNIQ Street A			S OF AM	ERIC	A INC	D.		
Facility Closed/Vacated During Entire I Abatement Performed Outside of Norm Other – Describe:	nal Facilit	ty Hours		nly		City, Sta	ate, Zip				_	-		-
cope of Work (Check All That Apply) 1 ≥3 sf or ≥3 if				/		3001	I I KI	VER, N.	08882					
. ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit				X	Mini- Glov	-Enclosure rebag Prod						
Location of		s Location	у		D	escription o			Y Y aria ivo	ir-i iidu	10	Abate	ement pe	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	ed Solel aintenar stodial S (12)	ice/	Asbe (i.e	stos Cor therma surf	ntaining Ma il systems i acing, VAT, miscellane	iterial (insulati , or	ACM)	Amour (Special SF or L	fy	Removal	Repair	Encapsulate	Enclosure
BASEMENT	Yes	No ×	N/A				The State of				/al	ir .	ılate	ure
MISEMEN						CABIE R IN			30		X			
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me of Registered Waste Hauler STE MANAGEMENT		Ha	DEP Water ID I		of Wa	Yards ste		Name of R	legistered L	andfill				
, State ZABETH, NJ						sal Date	(City, State	SVILLE, P	Δ				
mpleted by ROL RAIMO	Title OFFI	CE MC	GR.		5	ignature	2.	04)	Date	10/9		/	

CK # 109



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te of Notification (1) 0/31/18			Nam NJ	ne of Build Departr	ing Owner/Op ment of Tra	erator (nsport	ation		ioh i				
encies Notified	Type Notification		Stre	eet Addres 0 Wood	s Street				ASELST.	OS COM GERSIN	JRO G	£. 6i	
EPA DEP	Initial Amended Amendment #		City	, State, Z								-	
DOH	Emergency (in justification) Cancellation	cluding	Nar	me of Con nris Harr	tact				Telephone Nur 267-790-104	nber 47			
DCA				FACILITY	INFORMATION	NC	Type of F	acility (4)					\neg
ame of Facility Where IJDOT Mainline A treet Address Structure # 1120-1	approach Bridge		R Ca	anal, and	d Route 17	5	Scho	ool (K-12) chapter 8 er (i.e. priv	(Other than K-1 vate & commerc	iai bullulri			
	150 I-95 Over 100	110 20, 20	<u>.</u>				Square F		# of Floors	Bldg	ı. Age	ê	
ity (5)				-b. Cod	0 (7)		Current U	Jse (Prior	if being demolis	hed)			
County (6)			(5)	ounty Cod	ONLY)		Bridge						
Mercer Name of Monitoring Fir Criterion Laborato	rm Hired by Building C	Owner (8)	1	ASCM No).	Dian		nent Contr ntbach (cactor (9) Construction	Corp.			
Street Address 400 Street Road	mos, mos					500			et, Unid D				
City, State, Zip Code						City,	State, Zip (adelphia	Code , PA 191	124				
Bensalem, Pa 19 Project Manager for M			Te	elephone	No.	Telep	hone No.		License 00646	No.			
Steven A. Vena,	CIH Project Man	ager	100	215-244-		215-739-8166 00646 Name of OSHA Monitor							
Start Date (10)		10/15/20	19N	JDOT N	lainline Apr	Sar	ne as ab	ove					
Occupancy Status Du	uring Abatement (Che	ck Only One)				Stree	et Address						- 1 2
Abatement Perfo	/acated During Entire	Period of Ab	ateme	ent		City.	State, Zip	Code					
Other - Describe	e:	tiai i dointy .	10010										
Other – Describe Scope of Work (Chec ≥3 sf or ≥3 lf ≥160 sf or ≥260	e: ck All That Apply)	× Re	novat	tion			Mini	-Enclosure	cedure	riable Pro	cedur	е	
Other – Describe Scope of Work (Check ≥3 sf or ≥3 lf	e: ck All That Apply)	× Re	novat	tion			Mini	-Enclosure	е	riable Pro	cedur Abate	e ement /pe	t
Other - Describe Scope of Work (Check ≥ 3 sf or ≥3 lf ≥ 160 sf or ≥260 Loca Asbestos-Contain TO BE	e: ck All That Apply)	Is I N Used Mair	ocation or mall	tion on ly ly by nce/ Staff?	Asbestos C (i.e. therr	Descript ontainin nal syster	Mini- Glov Non	-Enclosure rebag Pro- -Exempte (ACM)	e cedure	riable Pro	cedur Abate	ement	T
Other - Describe Scope of Work (Check ≥ 3 sf or ≥3 lf ≥ 160 sf or ≥260 Loca Asbestos-Contain TO BE	e:	Is I N Used Mair	ocation and solution and soluti	tion on ly ly by nce/ Staff?	Asbestos C (i.e. therr su oth	Descript ontainin nal syste irfacing, er misce	Mini-Glov Non ion of g Material ems insula VAT, or illaneous)	-Enclosure rebag Pro- -Exempte (ACM) tion,	e cedure d (*) and Non-F	riable Pro	Abate Ty	ement /pe	T
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Other - Describe Scope of Work (Check ≥ 3 sf or ≥ 3 lf ≥ 160 sf or ≥ 260 Loc Asbestos-Contai TO BE In I	et :	Is I N Used Mair Custo	ocaticormalli Sole International	tion ion ly ly by nce/ Staff?	Asbestos C (i.e. therr su oth 8" wide 8" wide 8" wide Vaste No. 20	Descript ontainin nal systematic proofing roofing roofing ubic Yar Waste	Mininglow Non ion of g Material ems insula VAT, or allaneous) cement cement g cement	Enclosure rebag Pro- Exempte (ACM) tion, joint i joint Name of Fairle	Amount (Specify SF or LF) 10 SF 40 SF 80 Sf of Registered Lass Hills	Removal X X	Abate Ty	ement /pe	T
Other - Describe Scope of Work (Check ≥ 3 sf or ≥ 3 lf ≥ 160 sf or ≥ 260 Loc Asbestos-Contai TO BE In I North Name of Registered	et :	Is I N Used Mair Custo	ocaticormalli Sole International	tion ion ly ly by nce/ Staff? N/A NJDEP W Hauler ID	Asbestos C (i.e. therr su oth 8" wide 8" wide 8" wide Vaste No. D	Descript ontainin nal systematic proofing roofing roofing waste) isposal I is need	Mininglow Non ion of g Material ems insula VAT, or ellaneous) cement g cement g cement	-Enclosure/rebag ProExempte (ACM) tion, joint joint joint City, St.	Amount (Specify SF or LF) 10 SF 40 SF 80 Sf of Registered Lass Hills	Removal X X	Abate Ty Repair	ement /pe	T



State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7)

PAID CHECK	NOTIFICATION	ate of New Jer OF ASBESTO NJAC 8:60-7	OS ABATEMENT and 12:120-7)	13	CEIVE						
Date of Notification (1)		Building Own	AMENDN ner / Operator (2)	NHN #	OV 5 2018						
10/26/18	THE POR	T AUTHOR	TY OF NEW YORK	& NEW JERS	EY						
Agencies Type Notification Notified	Street Add	Iress		ASSES	STOS CONTROL & LICENCING						
BPA DEP DOL DOH DOH Cancellation	cation City, State JERSEY C Name of C	ontact	310	Language	Telephone Number						
DCA		H CAMPIO Y INFORM			973-624-6898						
Name of Facility Where Abatement is Ta TERMINAL "A" – CONNECTOR A-3 – Street Address	king Place (3)		oe of Facility (4) School (K-12)								
NEWARK LIBERTY INTERNATIONAL	AIRPORT		Subchapter 8 (Other		uildings, homes, etc.						
3 BREWSTER ROAD			uare Feet # of F		Bldg. Age						
City (5) County (6)	County Code		1,100,000	3	70+						
NEWARK ESSEX			Current Use (Prior if being demolished) COMMERICAL - AIRPORT								
Name of Monitoring Firm Hired by Buildin	ng Owner (8) ASC		ne of Abatement Cor								
ATC ASSOCIATES	98		CONTRACTING, IN	VC.							
Street Address 104 E. 25TH STREET - 10 TH FLOOR		Street Address 160 CLAY STREET									
City, State & Zip Code NEW YORK 10010			, State & Zip Code OOKLYN, NY 11222								
Project Manager for Monitoring Firm PATRICK SISK	Telephone Num 212-353-8280		License	Number 00511							
Scheduled Start Date (10) Scheduled (11/05/2018	Completion Date (11/04/2019										
Occupancy Status During Abatement (CI Facility Closed/Vacated During Er Abatement	neck only one)	y one) Street Address iod of 10 59 JACKSON AVENUE									
 ✓ Abatement Performed Outside of Describe: MONDAY – FRIDAY 7 ✓ Other - Describe: 	Normal Facility Ho :00 PM – 5:00 AM		, State & Zip Code NG ISLAND CITY, N	Y 11101							
Scope of Work (Check all that apply) ☐ Demolition ☐ Renov ☐ Large Project ☐ Quantity is ≥ 3 SF or ≥ 3 LF ACM ☐ Quantity is ≥ 160 SF or ≥ 260 LF			Full Containme Mini-Enclosure Glovebag Proc Other: MINI C	edure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> in Facility (13)	Is Location Normally Used Solely by Maintenance or Custodial Staff? (12)	Asbe Material (ACI insulati	escription of stos-Containing I) (i.e., thermal systems on, surfacing, VAT er miscellaneous)	Amount (Specify Square Feet or Linear Feet)	Abatement Type (Specify: Removal, Repair, Encapsulation or Enclosure)						
TERMINAL A – CONNECTOR A-3 SPACE A20B	NO		PROOFING	9 SF	MINI						
Name of Registered Waste Hauler #1 JIMMY BYRNE T/A JIMMY BYRNE TRUCKING	NJDEP Waste H		Cu. Yds. of Waste	Name of Reg CUMBERLAN LANDFILL	CONTAINMENT istered Landfill #1 ND COUNTY						
City, State 559 TIFFANY STREET, BRONX, NY 104	74		Disposal Date TBD	City, State 620 NEWVILI NEWBURGH							
Completed By (Print or Type) Richie Smith ASB-41 JUN 95 G4667	ct Executive		Signature And	M	Date 10/26/18						