# State of New Jersey 1110-4394 NOTIFICATION OF ASBESTOS ABATEMENT Check # 3440 (Pursuant to N.J.A.C. 8:60 and 12:120)

No chrok	iont	(i u						,		NOV - 7 2011  NOV - 7 2011  Telephone Nur ASBESTUS LON LICENSIM  Commercial buildings, homes, etc. loors Bldg. Age  demolished)  actor (9)  License Number 00529  Containment with Negative Press Enclosure Bag Procedures Exempted and Non-Friable Proce Amount (Specify SF or LF)  Remova  Repair  344 SF  Date	Milding.			
Date of Notification	(1)		Na	ame (	of Bu	uilding C	wner / Operator	(2)	INE	O E I	W B	Parket	17	
	10/31/11	1		reet /		rgy Ser	vice	-	1531		1 151	11	11	
Agencies Notified	Type Notifica	ation				son Av	e.	3	11 111	.,		111	11	_
⊠ EPA □ DEP	☐ Initial		Ci	ty, St	ate	& Zip C	ode		п П ис	IV - 7 20	)11	IJ,		
Ø DOL		nded #1					07962-1911	# 1		Ţ.	lanhan	o Niu	mha	-
Ø DOH	100 miles	gency	1000			ontact		1.1	ASB.	100 Jun 2012	ерпоп	e Nu	ibei	
DCA	Cano	ellation	W	layn	e Jo	nes		3) L		LICENSING	<u> </u>	100	1_	
				FAC	ILI	TY INF	ORMATION	1	Charles and place	Participation of the last			_	
Name of Facility W	here Abateme	ent is Taking Pla	ace (3)				Type of Facilit	ty (4)	and the second property of the second	State Stranger	for and discounting	·		
JCP&L/First Ene	ergy	**************************************					School (K	(-12)	tharthan K 1	3/	lakitir terreterin addy	parenteb	MALE.	
Street Address								ter 8 (U	a & commerc	ے، ial buildings	home	s. et	c.)	
147 Route 31 No	orth						Other (i.e Square Feet		of Floors	Blo	la. Age			
5.00		,				(7)	Square Feet	1	F 01 1 10015		3 3			
City (5)		County (6)	Cou	nty C	oae	(1)	Current Use /	Prior if	heina demoli	shed)				
Flemington		Hunterdon					Utility Build		boning dome.	/				
					TAG	CM No.			Contractor (9	))			1000	
Name of Monitoring	g Firm Hired b	y Building Own	er (8)		AS	CIVI NO.	AbateTech,		Oomingoto. (e	,				
1 Source Safety	& Health						Street Addres					1		
Street Address	. A Cuié	- 130					PO Box 25			14-18-1-1				
140 South Villag	ede Ave. Suit	E 130					City, State & 2	Zip Cod	le					
City, State & Zip C Exton, PA 1934	1						Lumberton,		048	Ir to a see Nie	mbar		-	_
Project Manager fo	or Monitoring	Firm	Telepl				Telephone Nu			License INL		q		
Brian Hovendor	1		610-5				609-265-210		itor		0002			
Scheduled Start D	ate (10)	Scheduled Cor	npletio	n Dat	te (1	1)	Name of OSI EMSL Analy		ILOI					
10/31/	11		11/8/	1111111111	_	<i>j</i>	Street Address					Sea The Co		
Occupancy Status	During Abate	ement (Check of During Entire P	nly one	f-Ati	atem	nent	108 Haddor							
	osed/vacated	outside of Norm	al Hou	irs –	2(011		City, State &		de					
			ai i ioc				Westmont,							
Describe.	3:30 PM to ccupied During	Abatement												
Scope of Work (C	heck all that a	apply)							5 11 Ozzatalon	mont with No	antive	Pres	SULE	
Scope of Work (o	ricon an irrar s	·FF-37									syative	1100	Juio	
≥3 sf or ≥3	3 If		$\boxtimes$		nova						Telephone Number on Negative Pressures Non-Friable Procest Abatement Process Abateme			
≥160 sf ≥2	260 If			Der	nolit	ion		K	Non-Exempt	ed and Non	-Friable	Pro	cedu	re
				U revenue			Descriptio		TTOTT EXOTIPE					
	Location of		Norn	Locat		d	Asbestos-Cor	ntaining		(Specify				
	estos-Containi aterial (ACM)			olely		<u> </u>	Material (A	(CM)		SF or LF)	gs, homes, etc.)  Idg. Age  Negative Pressure Abatemen  Removal  Date	Enc	m	
	BE ABATED		Main	tenar	nce o	or	(i.e., thermal s	systems	-			aps	clos	
	in Facility	-	Custo			f?	insulation, surfa or other miscel	laneous	3)		oval	mes, etc.) age  er 529  ive Pressu  able Proce Abatement  Removal	Encapsulate	Enclosure
	(13)		Yes	(12) No	N/	Δ	Of Other Hiscor	na roou	,				æ	
			163		1	1	Floor tile &	Mastic		344 SF				
Basement Laui	ndry Room		H		╁╞		11001 1110 0	maon						
			H	H	┼┾	$\dashv -$								
			++	H	忭	-								
			H	H	++	-								
			片	H	十	1								
Name of Register	red Waste Ha	uler		N	JDE	P Waste	Cubic Yards	Name	e of Register	ed Landfill				
Name of Register	eu wasie na	uici		Н		r ID No.	of Waste		= 1					
AbateTech, Inc					18	3750	12	- A 75 - 12 - 12 - 12 - 12 - 12 - 12 - 12 - 1	F Landfill			-		
City, State				*			Disposal Date 11/8/11		State /town, PA					
Lumberton, NJ				Ti	tle		Signature				A CONTRACTOR OF THE PARTY OF TH			
Completed By (P Gwen Trumbetti	init or Type)					. Coord		1			10/3	31/1	1	

State of New Jersey

1109-4387

4		NOTI	FICA	110	N O	- AS	RESTOS AF	SAIL	INFINE	7 P @	e n	0.0		
Sent se		(P	ursu	ant	to <u>N</u>	.J.A.	<u>C.</u> 8:60 and	12:1	20)	) EC		$\mathbb{V}_{-}$		n
Date of Notification							Owner / Operato	or (2)		]			7	$\Pi$
	11/1/1			THE RESERVE AND PARTY AND PARTY.		THE R. P. LEWIS CO., LANSING, MICH.	ersity		<u>: Ш</u>	LII NOV	- 7 2	011		11
Agencies Notified	Type No	tification			t Addr		naatan Univer	i4. E	A ARLAN	illan Blda				er, Smead
⊠ EPA   □ DEP		itial			State 8		nceton Univer	SILY E	.A. Waciv	ASBESTO	C CONTO	01.4		
□ DOL		mended #1					18544			LIC	ENSING	UL &		
Ø DOH	1	mergency			of Co		10044		g 1 santitus		Teleph	one	Num	per
DOH     DCA		ancellation			ert Or		P.E.		Contracting to	Fire madeuts, a militar	6	8-1		
							ORMATION	-		10 to 10 to 10 to	-		GRICE ,	or regis
Name of Facility Wh	nere Abat	ement is Taking F	lace (				Type of Facil	lity (4)						
Princeton Univer	sity – Fi	restone Library					School (							
Street Address									Other than	and the same of th				
One Washington	Road						- Lunard	-		nercial buildir			etc.)	
							Square Feet		# of Floor	s	Bldg. A	ge		
City (5)		County (6)	Co	unty (	Code (	(7)								
Princeton		Mercer					Current Use			molished)				
		>					University			-22-1				
Name of Monitoring	Firm Hire	d by Building Ow	ner (8)	0)	ASC	M No			t Contracto	or (9)				
ATC Associates,	Inc.		41.000		- Locare		AbateTech							
Street Address							Street Addre							
Bromley Corpora		er 3 Terri Lane,	Suite	12			PO Box 25		. d a					
City, State & Zip Co							City, State & Lumberton							
Burlington, NJ 08 Project Manager for		a Firm	Tolor	hone	Numb	ner	Telephone N			License I	Vumber			-
Mike Keehn	MOHITOH	ig riiii		386-8		Jei	609-265-21			Licerise	005			
Scheduled Start Dat	2000 March 2000	Scheduled Co	mpletio	on Da			Name of OSI	НА Мо						
10/17/11	The second second		12/3				EMSL Anal							
Occupancy Status D	During Ab	atement (Check o	nly on	e) of Alva	, ,	nt	Street Addres	315						
		ed During Entire F d Outside of Norm			aterne	IIL	City, State &							
Describe:	Репогте	d Outside of North	ai no	urs			Westmont,							
	uniod Dur	ing Abatement					westinont,	NO U	100					
Scope of Work (Che	AND RESIDENCE OF THE PARTY OF THE			-									10.00	
Scope of Work (Cite	ck all tila	(арріу)						$\boxtimes$	Full Conta	inment with h	Vegative	Pre	ssure	)
☐ ≥3 sf or ≥3 lf	f		$\boxtimes$	Ren	ovatio	n		П	Mini-Enclo		_			
≥160 sf ≥260			Ħ	Den	nolition	n		П	Glove Bag	Procedures				
								П	Non-Exem	pted and No	n-Friabl	e Pro	cedu	ire
Lo	cation of			Locati			Description			Amount	Ab	atem	ent T	уре
	os-Contai			nally l			Asbestos-Con		1	(Specify		Г	Τ	
	erial (ACN			olely b			Material (A) (i.e., thermal s			SF or LF)	Z.	-	Enc	_ <u>_</u>
	BE ABATE	<u>:D</u>		tenan odial S			insulation, surfac				Remova	Repair	aps	2
	(13)		Ousid	(12)	Juli .		or other miscell				oval	=	Encapsulate	Sul
	( /		Yes	No	N/A								te	
Work Area #1 & #	2 Level	Δ	П	П	$\boxtimes$		Floor tile & N	Mastic		40,000 SF		П	П	Г
Work Area #1 & #			Ħ	Ħ	X		Pipe/Fitting Ins			4,500 LF		H	Ħ	广
Work Area #1 & #			H	Ħ	X		int Compound			8,500 SF		Ħ	Ħ	F
Work Area #3 Lev			Ħ	Ħ	X		Pipe/Fitting Ins			100 LF		Ħ	H	T
Work Area #4 Lev			H	H	X		Floor tile & N			1,780 SF	Ø	H	H	F
Work Area #1 Lev			H	Ħ	X		Floor tile & N			1,063 SF	N	Ħ	H	一
Name of Registered		auler		NJ	DEP V	Vaste	Cubic Yards			ered Landfill	1 2 3		الا	
				1000000000	uler ID 1875	No.	of Waste		F Landfill					
AbateTech, Inc.					1070	U		City,						
City, State Lumberton, NJ							Disposal Date 12/30/11		state rtown, PA					
Completed By (Print	or Type)			Title			Signature	1 A			Date			
Gwen Trumbetti				Op	ps. Co	ord.	(m/	14			11/1	/11		

State of New Jersey 1103-4272
NOTIFICATION OF ASBESTOS ABATEMENT

No helter	(	(Pu	Name of Building Owner / Operator (2)   Robert Wood Johnson Hospital   Street Address   One Robert Wood Johnson Place   City, State & Zip Code   New Brunswick, NJ 08901   Name of Contact   Geiser Fajardo   Ge										
Date of Notification	(1)		N	lame	of Bui	lding (	Owner / Operator	(2)	6 6 1	W-15			
Agencies Notified  EPA  DEP  DOL  DOH  DCA	Type Notific	Name of Building Owner / Operator (2)		ne N	umber	North Control							
				FAC	ILIT	Y INF	ORMATION	in the same of the		and the state of the	MATERICAN .		
Robert Wood Jo Street Address	hnson Hos	pital	ace (3	7777777777			Type of Facili School (k	<-12) ter 8 (Other tha e. private & com	mercial building	gs, hom	es, e	tc.)	
City (5) New Brunswick		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Cou	unty C	ode (	7)	Current Use (						
Name of Monitoring Omega Environ Street Address 280 Huylar Street	mental	by Building Owne	er (8)		ASC	M No.	Name of Abate AbateTech, Street Address	Inc.	tor (9)				
City, State & Zip C South Hackensa	ode ack, NJ 0760	06	Talan	hann	Alumh	201	Lumberton,	NJ 08048	License N	umber			
Geiser Fajardo Scheduled Start D	ate (10)	Scheduled Çom	201-4	<b>189-8</b> on Dat	400		609-265-210 Name of OSH	AA Monitor		0052	9		-
Facility Clo Abatement Describe:	During Abate osed/Vacated t Performed C 5 PM - 1:30 cupied During	During Entire Per Outside of Norma O AM Abatement	eriog	SOATE	ateme	nt	108 Haddor City, State &	n Ave. Zip Code NJ 18108  Full Con		egative	Pres	ssure	_
<ul><li>≥3 sf or ≥3</li><li>≥160 sf ≥2</li></ul>								Glove Ba	ag Procedures empted and Nor				
Asbe Ma	aterial (ACM) BE ABATED in Facility		Norn Se Main Custo	nally Lolely tenan tenan odial S (12)	Jsed by ce or Staff?		Asbestos-Con Material (A (i.e., thermal s insulation, surface	taining CM) ystems cing, VAT	(Specify	Removal	Repair	ent Typ Encapsulate	PE
Central Sterile I	Jnit			10000		Viny				Ø			
Central Sterile I	Jnit						Floor tile & I	Wastic	3,723 SF				
Name of Registere AbateTech, Inc.		ıler		1000000	uler II	D No.	of Waste			一百	Ō		
City, State Lumberton, NJ						T. T.	Disposal Date 12/30/11		PA	ID-1			
Completed By (Pri Gwen Trumb				Of	fice		Signature	A		11/1			

Fax:

State of NJ of Ashestos Abatement

B & G proj. #:	2011-218	_	1 19	Votifica Irsuant	tion of Asbe to NJAC B:	60-7 ar	nd 12:120	)-7)	F-Gheck #					er endighe
Виорен		7							A CONTRACTOR	(in 15		1	5	Party 1
Date of Notification					(Operator (2)			NJ Dept of	Health & Senio	n envices				
111/10/3	]/[_[		on Taon	mino	-	-		VIVA	3 III Time	(4V 153 0	MA)	111	7	力门
Agencies Notified	Type Notification	Stree	t Address		#			Date: 17	3 III Time:	7:4-7	M	11	1	
☐ EPA	Initial .	19	Cutler D	rive						w. D	_	_	-	
DEP			State, Zip	Code					ASE	BESTOS COM LICENSIM	(IRO)	3		
Ø DOL	Amendmen	t M	orris Plai	ns, NJ (	7950			į L		Market Name of the last	γίj ,		A. Amida	_
⊠ DOH			of Contac						Telephone	Martine	deres e	·		
☐ DCA	Cancellatio	n R	obert Tac	rmino				New y						
				FACI	ITY INFORMA	MOITA			5F-114.74				-	
Name of facility w	here abatement is to	aking place	(3)					l ty	on of Facility (4	(K - 12)				
		5778							<u>_</u>	pter 8 (Oth	er the	n K-1	2)	
Robert Taomni	no	-							Other (	Private/Con	mer			
Street Address				*						domes, etc.		W17	- 4:	
19 Cutler Driv	4							S	quare Feet	# of Floors		DIO:	g. Ag	e
		County	(6)				y Code (7)	_			_L	D. /	13	
City (5)						(State	use only)		urrent Use (Presidential	for if being	demo	lished	1)	
Morris Plains	NJ 07950	Mom				115	Iama of Aha	sternant Con			-			
Name of Monitor	ng Firm Hired by Bk	lg. Owner (	8)		ASCM No.	11"								
n√a								storation, I	nc.					
Street Address			- 1/2				treet Addre							
500011155								son Road						
City, State, Zip Co	ode					C	ity, State, Z		222					
Didi Contain to								Park, NJ 07	035	I License N	umah	\		
Project Manager	for Monitoring Firm		Pho	ne Numb	er	-   T	elaphone N			0378	UIIID	51		
Project manager .			1			11	973-696	THE REAL PROPERTY.	15-	03/6	_	_		
		Ischan	Completion	Date (1	1)			HA Monitor						
Scheduled Start C	]≱te (1∪)	Geneu,	COMPIE			11,	B & G R	estoration,	inc.		- Marie			
11/10/11		11/11/					• • • • • • • • • • • • • • • • • • • •							
Occupancy Statu	s During Abatement	(Check on	ly one)					rson Road		-				
M Contilly class	ed/vacated during 6	entire period	of abaten	nent.		119	City, State. Z	Cip Code						
Abatement Describe:	performed outside	of normal is	iculty hours				T 1 1-	Park, NJ 07	7035					
Other-Des	cribe:					-11	Lincoln	Fair, NO			=			
	(check all that apply)	)						es assessment and	national designation of the second	<b>-</b>				
☐ Demolition		Renovation	r			∑ Fi	uli Containm	ent w/negati	ve pressuré	Gloveb				
_		160 sf or ≥				□м	ini-enclasur	e		☐ Non-fri				-
>3 sf or >3	2"	Is location		sed sole	lyl						R	R	E O	E
Location o	of	by mainter	nance/cust	odial		tion of as	bestos-con	taining '	Amount (Specify	SE or	m	р	C	n
asbestos- material to	containing be	staff(12)		T-	materie	(ACM)	•		LF)	35-01	Q V	a	а	L
	facility (13)	Yes	No	N/A							e	ı.	р	
				1	TVAT&N	lastic			630 sf		Ø			
basement														
	A		M72 -		-		**							
			1	#	+									
					-									
			D.V-13	10#	Cubic Yards o	Waste	Name of R	Registered Le	ndfill					
Registered Was	te Hauler	195	P Hauler   63	10#	7 yards		Tullytov	yn Resourc	e & Recover	y Center				
B & G Restor	(auton, Inc.			Disposal			City, Stat		SANDARY E					
City, State Lincoln Pack	N1 07025			11/14			Tullyto	wn, PA			_			
		Title			Signature		Gindona			Date				
Completed by (		Treasure	er .				Gordona	Luna		11/3/2	111	_		-

### State of NJ Notification of Asbestos Abatement

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

Check # 4868 2011-218 B & G proj. #: Name of Building Owner/Operator (2) Date of Notification (1) 1 1 / 0 3 / 1 1 Robert Taormino NOV - 7 2011 Type Notification Street Address Agencies Notified ☐ EPA 19 Cutler Drive Initial M City, State, Zip Code DEP ASBESTOS CONTROL & Amendment Morris Plains, NJ 07950 DOL. Telephone Number Name of Contact DOH Cancellation Robert Taormino DCA FACILITY INFORMATION Type of Facility (4) School (K - 12) Name of facility where abatement is taking place (3) Subchapter 8 (Other than K-12) Other (Private/Commercial Robert Taormino Bldgs./Homes, etc. Street Address Bldg. Age Square Feet | # of Floors 19 Cutler Drive County Code (7) Current Use (Prior if being demolished) County (6) City (5) (State use only) residential Morris Name of Abatement Contractor (9) Morris Plains, NJ 07950 Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. B & G Restoration, Inc. Street Address Street Address 105 Ryerson Road City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035 License Number Telephone Number Phone Number 0378 Project Manager for Monitoring Firm 973-696-6869 Name of OSHA Monitor Sched. Completion Date (11) B & G Restoration, Inc. Scheduled Start Date (10) Street Address 11/11/2011 11/10/11 105 Ryerson Road Occupancy Status During Abatement (Check only one) City, State, Zip Code Facility closed/vacated during entire period of abatement. Abatement performed outside of normal facility hours-Lincoln Park, NJ 07035 Describe: Other-Describe: Glovebag procedure Scope of Work (check all that apply) ☑ Full Containment w/negative pressure □ Renovation Non-friable procedure Demolition Mini-enclosure ≥160 sf or ≥260 lf Ε  $\boxtimes$  >3 sf or >3 lf n Is location normally used solely n Amount m C by maintenance/custodial Description of asbestos-containing (Specify SF or Location of a a asbestos-containing staff(12) material (ACM) LF) material to be N/A abated in facility (13) No 630 sf VAT & Mastic basement Name of Registered Landfill Cubic Yards of Waste Tullytown Resource & Recovery Center NJDEP Hauler ID# Registered Waste Hauler 7 yards 19563 B & G Restoration, Inc. City, State Disposal Date Tullytown, PA City, State 11/14/11 1. Dark NI 07035 Date

Robert J. Taormino 19 Cutler Dr. Morris Plains, NJ 07950 November 3, 2011

B&G Restoration Inc. 105 Ryerson Road Lincoln Park, NJ 07035

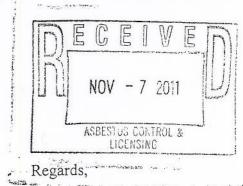
Dear B&G Restoration:

I would like to request a waiver to the 10-day wait period for removal of the asbestos tile in our basement because of time constraints that we are currently under. We have been looking into waterproofing our basement since the flooding from hurricane Irene, and we have been given a "special discount" from Mid-Atlantic Waterproofing as long as we use their only open date of November 14, 2011 for this. They indicate that the job will take approximately 2 days. Since your first open date is on November 15, that would pose a problem since I believe it would be best to have the asbestos properly removed before Mid-Atlantic starts jack-hammering our basement floor.

Therefore, if you can schedule us for November 10, I believe these dates will work out fine. Please

let me know if our request for waiver is accepted.

Thanks very much for your help with this.



Robert J. Taormino

			c0063	30664		7	ro:919736	5965929	more and the little	P.2/	2 2		
1-2011 09:49 From:ASBES	TOS				1 20		and the same and and		والمارين والمارين والمارين	-		7	
					- Ahal	anient.	, proper	No. of Street,	277 5	TE I	They'	/	
		Notific	to NJA	AC 8 60	7 and	32 120-1	DOL	-cital	]8A8[		111	$\parallel$	
2011-218		(1.012011)					DUL	The state of the s		7	11		
) of other			/Cannon	tar (2)		1		1	Al	1000	1/1	扒	
o of Notification (1)			enOperu	(31 (5)		1	I /NO	V Ph	01/2 A	<u> 101</u>		- /	
11 1/10 13 1/11 11	Robert	Taormino	AMPLY - WITH			-	1-17	OV M					
Prome Notified Type Notification	Street Add	rocs				1	1	DIADI	Wage	<del>20+</del>		<b>=</b>	
· ·	19 Cut	ler Drive	-	-	-		WAIVE	KIAIN	BIGGO	JINO			
□ DFP						9 1	-11		CHARLEST CO. C.	- WALLEY		-	
DOL     Amendment	Morri	s Plains, N	1 07950			(OL WORLD	MUNICIPAL STATE OF	relephone	S INTERNIOR				
23 00H	Name of	Contact					<b>)</b>	T 3 5 1 5					
Cancelintion	Robe	at Taormin	0						tet de la				
LI DCA	ل	FA	CILITY IN	NFORMAT	JON			o of Encility	(4)				
							\             \	Sphor	1 (1/ 15)				
Name of facility where abatement is tak	ing place (3)							Subch	apter & (O	lifer than	K•12)		
						-		Other Pides	(Private/Co	C.			
							50	mare Feet	# of Floor	=	Bidg. A	ge	
									(C			ar in	<b>e</b> 7
Name of Outlider Original Super Notification   Name of Duttider Original Super Notification   Name of Duttider Original Super Notification   Name of Duttider Original Super Notification   Name of Outlider Original Super Notification   Name of National Super Name of Outlider Outlider Original Super Outlider Original Super Name of Outlider Outlider Original Super Outlider Original Super Name of Outlider Outlider Original Super Name Outlider	g demolis	inad)											
C.ty (5)							1 1	esidential					E
Diame N1 07950	Morris	No. of the latest of the lates	1 000	CRE NO	TIN	ame of Ab	patement Con	tractor (9)					
MOTTS Plants, the Hired by Bid	g. Owner (8)		AS	CARLING		B&GR	estoration,	inc.					,
328				774- A	5	treet Addr	229						_
						105 Rye	rson Road					500550	
		- x			- 6	ity. Stato.	Sib Code	100					
State of Notification of Asherston Abatement (Plans Abatement Control Notification of Asherston Road City, State of Manifer Hamilton plans from Parties of State of Manifer Hamilton Park, NJ 07950    Name of State of Notification (1)	/()33 ::::::::::::::::::::::::::::::::			ſ									
		Phone	Number			Telephone	184.6869		0378	<u>}</u>	_		- W-
Project Manager for Montioring Firm					}	Name of	OSHA Monitor	- nate					
	Techar C	ompletion D	ate (11)	W		B&G	Restoration	, Inc.					
Scheduled Start Date (10)	1					Street Ad	dress						
11/10/11	11/11/2	(011				105 R	yerson Rosc						
	nt (Check only	y one) or shaterne	n1.		1	City, State	e. Zip Code						
Facility closed/vacated during	of normal fa	cility hours-					L. Bart NI	07035					
Abatement performed odding	-					Linco	oln Fack, 143						
Mar Describe							ast w/ne/1	UZ2910 Avits	re □ GI	onapsa b	ropadu	FÖ	
State of N.  State of N.  State of N.  Notification of Asbeston Abastonian Abastonian (Purasizert In NIACR 8 67 and 12 (2011)  Page 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	un-friable												
To 919 43 Front RESERTOS   To 919 43 Security   T	1	1000	E.										
State of N  State of N  Notification of Asbedtos Abacterised  Notifica	m	p	•	l in									
Sale of No.   State				l a	a	L							
Septiment   Sept		15	-	+									
State of N.   Total 1991 (1991	-10	##	計	怙									
Sole of N. Montes and Association of	1												
Act   1   1911	10												
A G yet) # 2 From: RESESTOS   Science   Scie	TO	T											
				-									
A STATE OF THE PARTY OF THE PAR			74 17	Cubic Yerd	a of VVa	ste Nam	e of Rogistere	d Landfill	covery Ce	nter			
Registered Waste Houler	NJI	DEP Hauler I 9563	LAF	7 yards		Tul	Contra Kesi	outer of the					
R & G Restoration, Inc.		=	Disposal	Date		City	illumun PA	<b>(</b>				*	
E-N. State			11/14/	/11			HIY COMPLEX X Y	- times			11		
Lincoln Park, NJ 07033	Tile			Signat	ήιφ	Gun	Sana Luna			1 (/ 1; /1/)		2222	
Completed by (Print or Type)		rer			-								
( *OTOHUN LIHM	William												

# State of New Jersey 1110-4405 NOTIFICATION OF ASBESTOS ABATEMENT Check #3501 (Pursuant to N.J.A.C. 8:60 and 12:120)

te of Notification (	10104144		State o	of New Jers	wner / Operator (2 sey Division of F	roperty la	anagement	G. 0 0.11	W	111	-	$\neg$
	10/31/11		Street A	Address	4	7((,]//		-011	11/	リ١		
encies Notified	Type Notification	ı	PO Bo			112-11		<u> 7011 </u>	-1-		1	$\dashv$
☑ EPA				ate & Zip Co	ode	111 111 3	MOA	(7)	1		1	
7 DEP	☐ Initial ☐ Amended		City, St	n, NJ 0862	5-0034	3 17 m	V-00-10-10-10-10-10-10-10-10-10-10-10-10-	, in the same				-
DOL	☐ Amended	1	Trento	10, 143 0002	23-000-4	i l		Telepho	ne	Num	per	
☑ DOH		су		of Contact		2. /	ASBESTUS L	<b>309-29</b>	2-7			1
DCA DCA	<ul><li>☐ Emergen</li><li>☐ Cancellat</li></ul>	tion	Georg	ette Bunch	1	§ . \	1,100	2007 3				-
			FAC	ILITY INFO	RMATION		and the second second	Charl.	_		_	
- f Engility \A/I	here Abatement i	is Taking Pla			Type of Facility (	4)						
J Executive Sta	ata House				School (K-1	2) (Other the	n K 12)					
J Executive Sta	ite riouse				Subchapter	8 (Other the	an N-12)	nae hon	nes	etc.	)	
reet Address						rivate & con	nmercial buildi	Dida A	70			-
25 West State S	Street				Square Feet	# of Flo	ors	Bldg. Ag	ge.			
	Cc	ounty (6)	County C	ode (7)			l'abad\				-	
ity (5)	A Comment				Current Use (Pr	ior if being d	emolisnea)					
renton	IAI	ercer			State House E	Building						_
				ASCM No.		ment Contra	ctor (9)					
ame of Monitoring	g Firm Hired by B	Building Owne	er (8)	ASCIVI NO.	AbateTech, In	ic.						_
SA Environme	ntal				Street Address							
treet Address												
44 West State	Straat				PO Box 25	Cada			100			
44 West State	odo				City, State & Zip	1100048						
ity, State & Zip C	000				Lumberton, N	13 08046	Licons	Numbe	r			
renton, NJ 086	118		Telephone	Number	Telephone Num	nber	Licerise		529			
roject Manager fo	or Monitoring Firm	a l	609-656-8	3101	609-265-2107			000	323		_	_
Villiam Weisga	rber				Name of OSHA	Monitor						
Scheduled Start D		heduled Con	npletion Da	le (11)		ical			_			_
Scheduled Start D	11		11/2/11	ie (11)	<b>EMSL</b> Analyt							_
Scheduled Start D 11/1/1	11	ent (Chack or	11/2/11		EMSL Analyt Street Address		4,					
Scheduled Start D 11/1/1 Decupancy Status	During Abateme	ent (Check or Iring Entire P	11/2/11 nly one) eriod of Ab	atement	Street Address 108 Haddon	Ave.						
Scheduled Start D 11/1/1 Decupancy Status Facility Cle	During Abateme	ent (Check or Iring Entire P	11/2/11 nly one) eriod of Ab	atement	Street Address 108 Haddon City, State & Zi	Ave. p Code						
Scheduled Start D 11/1/1 Decupancy Status Facility Clo Abatemen	S During Abateme osed/Vacated Du at Performed Outs	ent (Check or Iring Entire P	11/2/11 nly one) eriod of Ab	atement	Street Address 108 Haddon	Ave. p Code						
Scheduled Start D 11/1/1  Decupancy Status Facility Clo Abatemen Describe:	S During Abateme osed/Vacated Du nt Performed Outs 5 PM Start	ent (Check or Iring Entire P side of Norma	11/2/11 nly one) eriod of Ab	atement	Street Address 108 Haddon City, State & Zi	Ave. p Code						
Scheduled Start D 11/1/1 Decupancy Status Facility Cle Abatemen Describe: Facility Oc	s During Abateme osed/Vacated Du nt Performed Outs 5 PM Start ccupied During Al	ent (Check or uring Entire P side of Norma batement	11/2/11 nly one) eriod of Ab	atement	Street Address 108 Haddon City, State & Zi	Ave. p Code IJ 08108		h Nogati	ive F	Oracs	ure	
Scheduled Start D 11/1/1 Decupancy Status Facility Cle Abatemen Describe: Facility Oc	s During Abateme osed/Vacated Du nt Performed Outs 5 PM Start ccupied During Al	ent (Check or uring Entire P side of Norma batement	11/2/11 nly one) eriod of Ab	atement	Street Address 108 Haddon City, State & Zi	Ave. ip Code IJ 08108	ontainment wit	h Negati	ive F	Press	ure	
Scheduled Start D 11/1/1 Decupancy Status Facility Cle Abatemen Describe: Facility Oc	S During Abateme osed/Vacated Du nt Performed Outs 5 PM Start	ent (Check or uring Entire P side of Norma batement	11/2/11 hly one) eriod of Ab al Hours –	atement	Street Address 108 Haddon City, State & Zi Westmont, N	Ave. ip Code IJ 08108  Full Co	nclosure		ive F	Press	ure	
Scheduled Start D 11/1/1 Decupancy Status Facility Cle Abatemen Describe: Facility Oc Scope of Work (C	s During Abateme osed/Vacated Du at Performed Outs 5 PM Start occupied During Al Check all that appli	ent (Check or uring Entire P side of Norma batement	11/2/11 hly one) eriod of Ab al Hours –	atement	Street Address 108 Haddon City, State & Zi Westmont, N	Ave. ip Code IJ 08108  Full Co	nclosure Ran Procedur	es				
Scheduled Start D 11/1/1  Occupancy Status Facility Clo Abatemen Describe: Facility Oc Scope of Work (C	s During Abateme osed/Vacated Du nt Performed Outs 5 PM Start ccupied During Al Check all that appl	ent (Check or uring Entire P side of Norma batement	11/2/11 hly one) eriod of Ab al Hours –	atement	Street Address 108 Haddon City, State & Zi Westmont, N	Ave. ip Code IJ 08108  Full Co	nclosure Ran Procedur	es Non-Fria	ble	Proc	edur	re
Scheduled Start D 11/1/1 Decupancy Status Facility Cle Abatemen Describe: Facility Oc Scope of Work (C	s During Abateme osed/Vacated Du nt Performed Outs 5 PM Start ccupied During Al Check all that appl	ent (Check or uring Entire P side of Norma batement	11/2/11 hly one) eriod of Ab al Hours –	atement	Street Address 108 Haddon City, State & Zi Westmont, N	Ave. ip Code IJ 08108  Full Co Mini-E Glove Non-E	nclosure Bag Procedur xempted and Amour	res Non-Fria	ble	Proc		re
Scheduled Start D 11/1/1  Occupancy Status Facility Clo Abatemen Describe: Facility Oc Scope of Work (C	s During Abateme osed/Vacated Du nt Performed Outs 5 PM Start ccupied During Al Check all that appl 3 If 260 If	ent (Check or uring Entire P side of Norma batement	11/2/11 hly one) eriod of Ab al Hours –  Re De	novation molition	Street Address 108 Haddon City, State & Zi Westmont, N	Ave. ip Code IJ 08108  Full Co Mini-E Glove Non-E	nclosure Bag Procedur xempted and Amour (Specif	res Non-Fria nt /	ble	Proc	edur	re
Scheduled Start D 11/1/1  Decupancy Status Facility Cle Abatemen Describe: Facility Oc Scope of Work (C	s During Abateme osed/Vacated Du nt Performed Outs 5 PM Start ccupied During Al Check all that appl 3 If 260 If Location of	ent (Check or uring Entire P side of Norma batement	11/2/11 hly one) eriod of Ab al Hours –  Re De  Is Loca Normally	novation molition ution	Street Address 108 Haddon City, State & Zi Westmont, N  Description Asbestos-Conta	Ave. ip Code IJ 08108  Full Co Mini-E Glove Non-E of aining	nclosure Bag Procedur xempted and Amour	res Non-Fria nt /	able Abat	Proc	edur	re
Scheduled Start D 11/1/1  Decupancy Status Facility Cle Abatemen Describe: Facility Oc Scope of Work (C	s During Abateme osed/Vacated Du nt Performed Outs 5 PM Start ccupied During Al Check all that appl 3 If 260 If Location of estos-Containing Material (ACM)	ent (Check or uring Entire P side of Norma batement	11/2/11 hly one) eriod of Ab al Hours –  Re De  Is Loca Normally Solely	novation molition Used	EMSL Analytics Street Address 108 Haddon City, State & Zi Westmont, N  Description Asbestos-Conta Material (AC)	Ave. p Code IJ 08108  Full Co Mini-E Glove Non-E of aining	nclosure Bag Procedur xempted and Amour (Specif	res Non-Fria nt /	able Abat	Proc	edur	re
Scheduled Start D 11/1/1  Decupancy Status Facility Cle Abatemen Describe: Facility Oc Scope of Work (C	s During Abateme osed/Vacated Du nt Performed Outs 5 PM Start ccupied During Al Check all that appl 3 If 260 If Location of estos-Containing Material (ACM)	ent (Check or uring Entire P side of Norma batement	Inly one) eriod of Ab al Hours –  Re De  Is Loca Normally Solely Maintena	novation molition Used by nce or	EMSL Analytics Street Address 108 Haddon City, State & Zi Westmont, N  Description Asbestos-Conta Material (AC) (i.e., thermal sy	Ave. p Code IJ 08108  Full Co Mini-E Glove Non-E of aining M) estems	nclosure Bag Procedur xempted and Amour (Specif	res Non-Fria nt /	able Abat	Proc	edur	re
Scheduled Start D 11/1/1  Decupancy Status Facility Cle Abatemen Describe: Facility Oc Scope of Work (C	s During Abateme osed/Vacated Du nt Performed Outs 5 PM Start ccupied During Al Check all that appl 3 If 260 If Location of estos-Containing	ent (Check or uring Entire P side of Norma batement	Inly one) eriod of Ab al Hours —  Re De  Is Loca Normally Solely Maintena Custodial	novation molition ution Used by nce or Staff?	EMSL Analytics Street Address 108 Haddon City, State & Zi Westmont, N  Description Asbestos-Conta Material (AC (i.e., thermal sy insulation, surface	Ave. p Code IJ 08108  Full Co Mini-E Glove Non-E of aining M) estems ing, VAT	nclosure Bag Procedur xempted and Amour (Specif	res Non-Fria nt /	ble	Proc	edur	re
Scheduled Start D 11/1/1  Decupancy Status Facility Cle Abatemen Describe: Facility Oc Scope of Work (C	s During Abateme osed/Vacated Du nt Performed Outs 5 PM Start ccupied During Al Check all that appl 3 If 260 If Location of estos-Containing Material (ACM) O BE ABATED	ent (Check or uring Entire P side of Norma batement	Inly one) eriod of Ab al Hours —  Re De  Is Loca Normally Solely Maintena Custodial (12	novation molition used by nce or Staff?	EMSL Analytics Street Address 108 Haddon City, State & Zi Westmont, N  Description Asbestos-Conta Material (AC) (i.e., thermal sy	Ave. p Code IJ 08108  Full Co Mini-E Glove Non-E of aining M) estems ing, VAT	nclosure Bag Procedur xempted and Amour (Specif	res Non-Fria nt /	able Abat	Proc	edur	re
Scheduled Start D 11/1/1  Decupancy Status Facility Cle Abatemen Describe: Facility Oc Scope of Work (C  ≥3 sf or ≥ ≥160 sf ≥  Asbe	s During Abateme osed/Vacated During Abateme osed/Vacated During All the Performed Outs 5 PM Start ocupied During All theck all that application of estos-Containing Material (ACM) O BE ABATED in Facility (13)	ent (Check or uring Entire P side of Norma batement	Inly one) eriod of Ab al Hours —  Re De  Is Loca Normally Solely Maintena Custodial (12 Yes No	novation molition used by nce or Staff?	EMSL Analytics Street Address 108 Haddon City, State & Zi Westmont, N  Description Asbestos-Conta Material (AC (i.e., thermal sy insulation, surfaci or other miscella	Ave. ip Code IJ 08108  Full Co Mini-E Glove Non-E of aining M) estems ing, VAT aneous)	nclosure Bag Procedur xempted and Amour (Specif	Non-Fria	able Abat	Proc	edur	re
Scheduled Start D 11/1/1  Decupancy Status Facility Cle Abatemen Describe: Facility Oc Scope of Work (C  ≥3 sf or ≥ ≥160 sf ≥  Asbe	s During Abateme osed/Vacated During Abateme osed/Vacated During All the Performed Outs 5 PM Start ocupied During All theck all that application of estos-Containing Material (ACM) O BE ABATED in Facility (13)	ent (Check or uring Entire P side of Norma batement	Inly one) eriod of Ab al Hours —  Re De  Is Loca Normally Solely Maintena Custodial (12	novation molition used by nce or Staff?	EMSL Analytics Street Address 108 Haddon City, State & Zi Westmont, N  Description Asbestos-Conta Material (AC (i.e., thermal sy insulation, surface	Ave. ip Code IJ 08108  Full Co Mini-E Glove Non-E of aining M) estems ing, VAT aneous)	Anclosure Bag Procedure Exempted and Amour (Specif	Non-Fria	Abat	Proc	edur	re
Scheduled Start D 11/1/1  Decupancy Status Facility Cle Abatemen Describe: Facility Oc Scope of Work (C  ≥3 sf or ≥ ≥160 sf ≥  Asbe	s During Abateme osed/Vacated During Abateme osed/Vacated During All theck all that application of estos-Containing Material (ACM) O BE ABATED in Facility	ent (Check or uring Entire P side of Norma batement	Inly one) eriod of Ab al Hours —  Re De  Is Loca Normally Solely Maintena Custodial (12 Yes No	novation molition used by nce or Staff?	EMSL Analytics Street Address 108 Haddon City, State & Zi Westmont, N  Description Asbestos-Conta Material (AC (i.e., thermal sy insulation, surfaci or other miscella	Ave. ip Code IJ 08108  Full Co Mini-E Glove Non-E of aining M) estems ing, VAT aneous)	Anclosure Bag Procedure Exempted and Amour (Specif	Non-Fria	Abat	Proc	edur	re
Scheduled Start D 11/1/1  Decupancy Status Facility Cle Abatemen Describe: Facility Oc Scope of Work (C  ≥3 sf or ≥ ≥160 sf ≥  Asbe	s During Abateme osed/Vacated During Abateme osed/Vacated During All the Performed Outs 5 PM Start ocupied During All theck all that application of estos-Containing Material (ACM) O BE ABATED in Facility (13)	ent (Check or uring Entire P side of Norma batement	Inly one) eriod of Ab al Hours —  Re De  Is Loca Normally Solely Maintena Custodial (12 Yes No	novation molition used by nce or Staff?	EMSL Analytics Street Address 108 Haddon City, State & Zi Westmont, N  Description Asbestos-Conta Material (AC (i.e., thermal sy insulation, surfaci or other miscella	Ave. ip Code IJ 08108  Full Co Mini-E Glove Non-E of aining M) estems ing, VAT aneous)	Anclosure Bag Procedure Exempted and Amour (Specif	Non-Fria	Abat	Proc	edur	re
Scheduled Start D 11/1/1  Decupancy Status Facility Cle Abatemen Describe: Facility Oc Scope of Work (C  ≥3 sf or ≥ ≥160 sf ≥  Asbe	s During Abateme osed/Vacated During Abateme osed/Vacated During All the Performed Outs 5 PM Start ocupied During All theck all that application of estos-Containing Material (ACM) O BE ABATED in Facility (13)	ent (Check or uring Entire P side of Norma batement	Inly one) eriod of Ab al Hours —  Re De  Is Loca Normally Solely Maintena Custodial (12 Yes No	novation molition used by nce or Staff?	EMSL Analytics Street Address 108 Haddon City, State & Zi Westmont, N  Description Asbestos-Conta Material (AC (i.e., thermal sy insulation, surfaci or other miscella	Ave. ip Code IJ 08108  Full Co Mini-E Glove Non-E of aining M) estems ing, VAT aneous)	Anclosure Bag Procedure Exempted and Amour (Specif	Non-Fria	Abat	Proc	edur	re
Scheduled Start D 11/1/1  Occupancy Status Facility Cle Abatemen Describe: Facility Occ Scope of Work (C	s During Abateme osed/Vacated During Abateme osed/Vacated During All the Performed Outs 5 PM Start ocupied During All theck all that application of estos-Containing Material (ACM) O BE ABATED in Facility (13)	ent (Check or uring Entire P side of Norma batement	Inly one) eriod of Ab al Hours —  Re De  Is Loca Normally Solely Maintena Custodial (12 Yes No	novation molition used by nce or Staff?	EMSL Analytics Street Address 108 Haddon City, State & Zi Westmont, N  Description Asbestos-Conta Material (AC (i.e., thermal sy insulation, surfaci or other miscella	Ave. ip Code IJ 08108  Full Co Mini-E Glove Non-E of aining M) estems ing, VAT aneous)	Anclosure Bag Procedure Exempted and Amour (Specif	Non-Fria	Abat	Proc	edur	re
Scheduled Start D 11/1/1  Decupancy Status Facility Cle Abatemen Describe: Facility Oc Scope of Work (C  ≥3 sf or ≥ ≥160 sf ≥  Asbe	s During Abateme osed/Vacated During Abateme osed/Vacated During All the Performed Outs 5 PM Start ocupied During All theck all that application of estos-Containing Material (ACM) O BE ABATED in Facility (13)	ent (Check or uring Entire P side of Norma batement	Inly one) eriod of Ab al Hours —  Re De  Is Loca Normally Solely Maintena Custodial (12 Yes No	novation molition used by nce or Staff?	EMSL Analytics Street Address 108 Haddon City, State & Zi Westmont, N  Description Asbestos-Conta Material (AC (i.e., thermal sy insulation, surfaci or other miscella	Ave. ip Code IJ 08108  Full Co Mini-E Glove Non-E of aining M) estems ing, VAT aneous)	Anclosure Bag Procedure Exempted and Amour (Specif	Non-Fria	Abat	Proc	edur	re
Scheduled Start D 11/1/1  Decupancy Status Facility Cle Abatemen Describe: Facility Oc Scope of Work (C  ≥3 sf or ≥ ≥160 sf ≥  Asbe	s During Abateme osed/Vacated During Abateme osed/Vacated During All the Performed Outs 5 PM Start ocupied During All theck all that application of estos-Containing Material (ACM) O BE ABATED in Facility (13)	ent (Check or uring Entire P side of Norma batement	Inly one) eriod of Ab al Hours –  Is Loca Normally Solely Maintena Custodial (12 Yes No	novation molition Used by nce or Staff?	Description Asbestos-Conta Material (AC (i.e., thermal sy insulation, surface or other miscella	Ave. ip Code IJ 08108  Full Co Mini-E Glove Non-E of aining M) estems ing, VAT aneous)	Amoure Exempted and Amour (Specific SF or Legentre)	Non-Friant / fy F)	Abat	Proc	edur	re
Scheduled Start D 11/1/1  Decupancy Status Facility Cle Abatemen Describe: Facility Oc Scope of Work (C  ≥3 sf or ≥ ≥160 sf ≥  Asbe M To	s During Abateme osed/Vacated During Abateme osed/Vacated During All the Performed Outs 5 PM Start ocupied During All theck all that application of estos-Containing Material (ACM) O BE ABATED in Facility (13)	ent (Check or uring Entire P side of Norma batement lly)	Inly one) eriod of Ab al Hours –  Is Local Normally Solely Maintena Custodial (12 Yes No	novation molition  Used by nce or Staff?  N/A  NJDEP Was	EMSL Analyte Street Address 108 Haddon City, State & Zi Westmont, N  Description Asbestos-Conte Material (AC (i.e., thermal sy insulation, surfact or other miscella  Pipe Insula	Ave. ip Code IJ 08108  Full Co Mini-E Glove Non-E of aining M) estems ing, VAT aneous)	Anclosure Bag Procedure Exempted and Amour (Specif	Non-Friant / fy F)	Abat	Proc	edur	re
Scheduled Start D 11/1/1  Decupancy Status Facility Cle Abatemen Describe: Facility Oc Scope of Work (C  ≥3 sf or ≥ ≥160 sf ≥  Asbe M To	s During Abateme osed/Vacated During Abateme osed/Vacated During All the Performed Outs 5 PM Start ocupied During All theck all that application of estos-Containing Material (ACM) O BE ABATED in Facility (13)	ent (Check or uring Entire P side of Norma batement lly)	Inly one) eriod of Ab al Hours –  Is Local Normally Solely Maintena Custodial (12 Yes No	novation molition  Used by nce or Staff?  N/A  NJDEP Was Hauler ID No	Description Asbestos-Conte Material (AC (i.e., thermal sy insulation, surface or other miscella  Pipe Insula  te Cubic Yards of Waste	Ave. p Code IJ 08108  Full Co Mini-E Glove Non-E of aining M) rstems ing, VAT aneous)  tion	Amour (Specific SF or L	Non-Friant / fy F)	Abat	Proc	edur	re
Scheduled Start D 11/1/1  Doccupancy Status	s During Abateme osed/Vacated Durit Performed Outs 5 PM Start ocupied During Alcheck all that appl 3 If 260 If  Location of estos-Containing Material (ACM) O BE ABATED in Facility (13)  t to Governor's E	ent (Check or uring Entire P side of Norma batement lly)	Inly one) eriod of Ab al Hours –  Is Local Normally Solely Maintena Custodial (12 Yes No	novation molition  Used by nce or Staff?  N/A  NJDEP Was	Description Asbestos-Cont. Material (AC (i.e., thermal sy insulation, surfaci or other miscella  Pipe Insula  Cubic Yards of Waste 2	Ave. p Code IJ 08108  Full Co Mini-E Glove Non-E of aining EM) rstems ing, VAT aneous)  tion  Name of R TRRF Lai	Amoure Exempted and Amour (Specific SF or Legistered Lange)	Non-Friant / fy F)	Abat	Proc	edur	re
Scheduled Start D 11/1/1  Doccupancy Status	s During Abateme osed/Vacated Durit Performed Outs 5 PM Start ocupied During Alcheck all that appl 3 If 260 If  Location of estos-Containing Material (ACM) O BE ABATED in Facility (13)  t to Governor's E	ent (Check or uring Entire P side of Norma batement lly)	Inly one) eriod of Ab al Hours –  Is Local Normally Solely Maintena Custodial (12 Yes No	novation molition  Used by nce or Staff?  N/A  NJDEP Was Hauler ID No	Description Asbestos-Cont. Material (AC (i.e., thermal sy insulation, surfact or other miscella  Pipe Insula  Cubic Yards of Waste 2  Disposal Date	Ave. p Code IJ 08108  Full Company Mini-Empty Glove Non-Empty Non-Empty Mini-Empty Mini-	Amoure Exempted and Amour (Specific SF or Legistered Landard)	Non-Friant / fy F)	Abat	Proc	edur	re
Scheduled Start D 11/1/1  Doccupancy Status Facility Clo Abatemen Describe: Facility Oc Scope of Work (Co ≥3 sf or ≥ ≥160 sf ≥  Asbo N To  Tunnel adjacent  Name of Registe  AbateTech, In City, State	s During Abateme osed/Vacated During Abateme osed/Vacated During All the Performed Outs 5 PM Start ocupied During All Check all that application of estos-Containing Material (ACM) O BE ABATED in Facility (13)  It to Governor's Exercise Waste Haule oc.	ent (Check or uring Entire P side of Norma batement lly)	Inly one) eriod of Ab al Hours –  Is Local Normally Solely Maintena Custodial (12 Yes No	novation molition  Ition Used by nce or Staff?  N/A  NJDEP Was Hauler ID No	Description Asbestos-Conte Material (AC (i.e., thermal sy insulation, surfact or other miscella  Pipe Insula  Cubic Yards of Waste 2  Disposal Date 11/2/11	Ave. p Code IJ 08108  Full Co Mini-E Glove Non-E of aining EM) rstems ing, VAT aneous)  tion  Name of R TRRF Lai	Amoure Exempted and Amour (Specific SF or Legistered Landard)	Non-Friant / fy / F)	Abar Removal	Proc	edur	re
Scheduled Start D 11/1/1  Doccupancy Status	s During Abateme osed/Vacated Durit Performed Outs 5 PM Start ocupied During Alcheck all that application of estos-Containing Material (ACM) O BE ABATED in Facility (13)  t to Governor's Exercise Waste Haule oc.	ent (Check or uring Entire P side of Norma batement lly)	Inly one) eriod of Ab al Hours –  Is Loca Normally Solely Maintena Custodial (12 Yes No	novation molition  Ition Used by nce or Staff?  N/A  NJDEP Was Hauler ID No	Description Asbestos-Conte Material (AC (i.e., thermal sy insulation, surface or other miscella  Pipe Insula  Pipe Insula  Cubic Yards of Waste 2  Disposal Date 11/2/11  Signature	Ave. p Code IJ 08108  Full Company Mini-Empty Glove Non-Empty Non-Empty Mini-Empty Mini-	Amoure Exempted and Amour (Specific SF or Legistered Landard)	Non-Friant / fy / F)	Abar Removal	Proc	edur nt Ty Encapsulate	re



### State of New Jersey

CHRIS CHRISTIE Governor

KIM GUADAGNO Li. Governor DEPARTMENT OF TREASURY
DIVISION OF PROPERTY MANAGEMENT & CONSTRUCTION
P O Box 034
TRENTON NJ 08625-0034

ANDREW P. SIDAMON-ERISTOFF
State Treasurer
STEVEN SUTKIN
Director

October 31, 2011

Mr. Tom Voorhees New Jersey Department Labor Asbestos Control & Licensing 1 John Fitch Plaza, 3<sup>rd</sup> floor Trenton, NJ 08625-0949

RE: Request for Waiver of 10-Day Notification

Dear Mr. Voorhees:

A steam leak developed at the Executive State House, 125 West State Street, Trenton, NJ, in the tunnel adjacent to the Governors entrance in the State Police section. The steam leak is located directly above asbestos containing pipe. This leak is preventing the proper repair of the steam line and the inability to maintain heating temperatures within the Executive State House.

By way of this letter, the New Jersey Department of the Treasury, Division of Property Management and Construction (Treasury) is requesting a waiver of the 10 day notification to allow us to begin the asbestos removal on Tuesday, November 1, 2011. This waiver will allow Treasury to make the necessary repairs to the steam line and resume heating to the impacted space as soon as practicable.

Thank you for your assistance in this matter, please do not hesitate to call me at (609)-633-2127 if you have any questions.

Georgette E. Bunch, Environmental Scientist 1

Sincerely

CC: J. Duggan, USA Environmental

W. Weisgarber, USA Environmental

J. Carpentar, AbateTech, Inc.

G. Bocage

D. Millstein

R. Flodmand

J. Osborn

N. Piwonski

I. Morris

State of New Jersey 1110-4394
NOTIFICATION OF ASBESTOS ABATEMENT Check #-3440
(Pursuant to N.J.A.C. 8:60 and 12:120)

No ck	sent	(Fu	ısu	anı	TO IA	.J.A.	<u>c.</u> 0.0	o anu	14.1			with Negative Presend Non-Friable Process of the Pr	75	in.			
Date of Notification (	(1)							Operato	r (2)								
	11/4/11 Type Notifica	ation		Stree	t Addr						NOV	- 7	2011			$\!$	-
⊠ EPA □ DEP	☐ Initial		- 1			on A			- 5				CV12		Plant.	1	
Ø DOL		nded #2		-			07962-	1911	Į.	1 '	ASPESTOS	Paris	-	!			
Ø DOH	11(0-50)	gency				ntact			P. Carlot	L	LICE	NSTE	epho	ne N	lum	be	r
DCA	Cano	ellation		Wayı	ne Jo	nes			į.	- L	The state of the s	-		18/19	10		Ě
				FA	CILIT	Y INF	ORMA'	TION	?-la_	7							
Name of Facility Wh	ere Abateme	ent is Taking Pla	ace (3	3)		X-2		of Facili									
JCP&L/First Ener	gy				3500-107			School (I		Other tha	n K-12)						
Street Address	41-											dinas.	hom	es.	etc.	)	
147 Route 31 Nor	tn							are Feet	». p	# of Floo							
City (5)		County (6)	TCo	unty	Code	(7)	- 1			1							
Flemington		Hunterdon		•			Curre	ent Use (	Prior i	f being de	emolished)						
i leithington							Utili	ty Build	ling								
Name of Monitoring	Firm Hired b	y Building Own	er (8)		ASC	CM No				t Contract	tor (9)						
1 Source Safety 8						Э.		teTech,							_	0.00	
Street Address		400						et Addres Box 25	SS								
City, State & Zip Coo		3 130						State &	Zip Co	de							
Exton, PA 19341	Je							berton					11 2000 2011				
Project Manager for	Monitoring F	irm			Num	ber	1 Long 10 10 10 10 10 10 10 10 10 10 10 10 10	ohone N			Licens						
Brian Hovendon				524-				265-210		7		-	0052	9	_	_	
Scheduled Start Dat 10/31/11		Scheduled Con	ipletic		te (11	)	2 1500 250 15000	e of OSF L Analy									
Occupancy Status D	uring Abate	ment (Check or	ly on	0)			Stree	et Addres	SS				100000				-
Facility Clos	ed/Vacated l	During Entire P	eriod	of Ab		ent		Haddor							_		200
		utside of Norma	al Ho	urs –				State &									
Describe:							wes	tmont,	NJ U	3108							
Facility Occu					-07250							-					
Scope of Work (One	ok all that ap	SP.177										th Neg	ative	Pre	ssu	re	
≥3 sf or ≥3 lf	1		$\boxtimes$		novati				Ц	Mini-Enc							
≥160 sf ≥260	) If			Der	molitio	n					ng Procedur		riahle	Pro	CEC	dur	Ω.
			lo	Locat	ion	1	D	escription	⊠ n of	NOII-EXE	Amoun				_		
	cation of os-Containin	a l			Used		Asbes	stos-Con	taining	3	(Specif	y			T	T	
	erial (ACM)		S	olely	by			terial (A		3	SF or LI	F)	æ	_	Ę	Fnc	Щ
	E ABATED				nce or Staff?		(i.e., the	hermal s on, surfac	ystem:	S AT			emo	Зер	à	SOR	Enclosure
"	Facility (13)		Cust	(12)	Otan:			r miscell					val	H.	i i	Encapsulate	ure
			Yes	No	N/A										-	D	
Basement Laund	ry Room	200		$\boxtimes$			Floor	tile & f	Mastic		344 SF	F	$\boxtimes$		I	Ш	
													H	片	1	411	님
				Н	1				Conven				H	H	十	44	님
			H	H	H				-				H	H	누	<del>     </del>	片
			H	H	H				-				H	H	十	卄	ᅥ
Name of Registered	Waste Haul	er		IN.	JDEP I	Waste	Cubic \	Yards	Nam	e of Regis	stered Land	fill	رب			7 ] [	_
	114010 1144	110, 7		17,6355	auler II	D No.	of Was		TDD	Flandfi	:11						
AbateTech, Inc.			-		187	50		12		F Landfi State					_		_
City, State Lumberton, NJ								al Date 30/11		State ytown, P	Α						
Completed By (Print	or Type)			Tit	le		Signatu	ıre ,	-	*		[	Date		- //		
Gwen Trumbetti				Op	ps. C	oord.		rut					11/4	/11			

State of New Jersey

1111-4407

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:120) Name of Building Owner / Operator (2) Date of Notification (1) Robert Wood Johnson Hospital 11/3/11 Street Address Type Notification Agencies Notified One Robert Wood Johnson Place **EPA**  $\boxtimes$ City, State & Zip Code Initial DEP Amended # New Brunswick, NJ 08901  $\boxtimes$ DOL Telephone Numbe Name of Contact Emergency DOH Cancellation Geiser Fajardo DCA - - with the service **FACILITY INFORMATION** Marian Strange Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Robert Wood Johnson Hospital Subchapter 8 (Other than K-12) Street Address Other (i.e. private & commercial buildings, homes, etc.) One Robert Wood Johnson Place Bldg. Age Square Feet # of Floors County Code (7) County (6) City (5) Current Use (Prior if being demolished) Middlesex New Brunswick Hospital Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. AbateTech, Inc. Omega Environmental Street Address Street Address PO Box 25 280 Huylar Street City, State & Zip Code City, State & Zip Code Lumberton, NJ 08048 South Hackensack, NJ 07606 License Number Telephone Number Project Manager for Monitoring Firm Telephone Number 00529 201-489-8400 609-265-2107 Geiser Fajardo Name of OSHA Monitor Scheduled Completion Date (11) Scheduled Start Date (10) **EMSL** Analytical 12/5/11 11/21/11 Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 108 Haddon Ave. City, State & Zip Code Abatement Performed Outside of Normal Hours -Westmont, NJ 08108 Describe: Facility Occupied During Abatement Scope of Work (Check all that apply) Full Containment with Negative Pressure Mini-Enclosure Renovation ≥3 sf or ≥3 If Glove Bag Procedures Demolition ≥160 sf ≥260 lf Non-Exempted and Non-Friable Procedure Abatement Type Amount Description of Is Location Location of (Specify Asbestos-Containing Normally Used Asbestos-Containing SF or LF) Material (ACM) Encapsulate Material (ACM) Solely by Remova Repair (i.e., thermal systems TO BE ABATED Maintenance or insulation, surfacing, VAT Custodial Staff? in Facility or other miscellaneous) (13)(12)Yes No N/A Pipe Insulation 95 LF Mechanical/Air Handler Room(3) Containments 43 total X Mechanical/Air Handler Room(3) Containments Fittings N.IDEP Waste Cubic Yards Name of Registered Landfill Name of Registered Waste Hauler Hauler ID No. of Waste TRRF Landfill 18750 AbateTech, Inc. Disposal Date City, State City, State Tullytown, PA 12/5/11 Lumberton, NJ Date Title Signature Completed By (Print or Type) 11/3/11 Office Gwen Trumbetti

Coord.

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

P & G proi #: 2011-220		(Pursuant to	NJAC 8:	60-7 and 1	2:120-7)	Check#	4863	a -			_
B & G proj. #: 2011-220					1000		7個所	$\overline{1}$			
ate of Notification (1)	Name of Bu	uilding Owner/C	Operator (2)		Im	ECE!		11 _			
1 1 / 0 4 / 1 1 1	Connie I	DeGennaro			4-11-11-						
Agencies Notified Type Notification					Ilmi	MOV - 7 2	011	11			
T EDA	85 Mine	erva Avenue			1 111 111	NOV - / 6		1			-
DEP Initial	City, State				4,41	-		ì			
□ Amendme			16		1	LONGES SE FENT	VOI &	1		_	-
DOL   LI AMERICAN	Name of C	orne, NJ 0750	,0		5.5	Telephone	Number				
⊠ DOH	Water Server Server	ontact .			-	in States in Section 1	0402				
☐ DCA ☐ Cancellat	on Connic	e DeGennaro									74
		FACILI	TY INFORM	NOITAN	Francisco de la Section de la Constitución de la Co	Type of Facility (4	1)				_
	taking place (3)					Type of Facility (4	(K - 12)				
Name of facility where abatement is	taking place (e)					☐ Subcha	pter 8 (Other	r than	K-12	)	
G : DeCennaro						☑ Other (	Private/Comr	nercia	al		
Connie DeGennaro					1	Bldgs./	Homes, etc.		_	A 00	_
Street Address						Square Feet	# of Floors		Bldg.	Age	
85 Minerva Avenue				County C	ode (7)			_L_	abad)		
City (5)	County (6)			(State use		Current Use (P	rior if being d	emoiis	sneu)		
0.13 (=1						residential			-		-
Hawthorne, NJ 07506	Passaic		ASCM No.	Nam	ne of Abatemen	t Contractor (9)					
Name of Monitoring Firm Hired by	Bldg. Owner (8)		AGOM TO	l R	& G Restorat	ion, Inc.			_		_
A CONTRACTOR OF THE CONTRACTOR	The second second			Stre	et Address						
n/a Street Address				A Section of	)5 Ryerson R	oad					_
Silectification					State, Zip Cod						
City, State, Zip Code					incoln Park,						_
City, State, 219					ephone Numbe	r	License N	umbe	г		
Project Manager for Monitoring Fire	n	Phone Numb	er		973-696-6869		0378				_
Project Manager for Monttoring					me of OSHA M			Section 2012			
	ISahad Com	pletion Date (1	1)		& G Restor				110		
Scheduled Start Date (10)	Sched. Com	piction bate (	,		eet Address	ation,					
11/14/11	11/14/201				05 Ryerson I	Road					_
Status During Abatem	ent (Check only on	ne)		-	y, State, Zip Co	ode					
Fig. 1	in entire period of a	abatement		Cit	y, State, Zip Co	ide					
Abatement performed outside	le of normal facility	y hours-			Lincoln Park.	NI 07035					
Describe:				_    .	Lincoln Park.	, 143 07033					
Other-Describe:							☐ Gloveb	aa nr	ncedu	re	
Scope of Work (check all that ap				☐ Full	Containment w	/negative pressure					
☐ Demolition ☐	1970			Min	-enclosure		☐ Non-fri	-			_
≥3 sf or ≥3 lf	] ≥160 sf or ≥260							e e	R	E	E
	Is location nor	mally used sole	ely		estos containin	Amoun		m	p	c	n
Location of asbestos-containing	by maintenand staff(12)	ce/custoular	Desc	cription of asb erial (ACM)	estos-containin		y SF or	0	a	a	L
material to be				mai (AOIVI)		LF)		v e	r	Р	
abated in facility (13)	Yes	No N/A				30 lf		X			I
775 - 36 3.50 vivin		X	pipe ins	sulation		30 11		T			TE
basement boiler room								計	IT	口	TE
			٦					計	厅	厅	TE
	-		1					耑	計	厅	tr
								111	1-	1-	1-
	1112501	Hauler ID#	Cubic Yard	s of Waste	Name of Regis	tered Landfill	ery Center				
Registered Waste Hauler	19563	IAUICI IDII	1 yard			Resource & Recov	cry comor				
B & G Restoration, Inc.		Disposa			City, State	24					
City, State		11/14			Tullytown,	PA					_

11/15/11

T Signature

0

Date

City, State Lincoln Park, NJ 07035

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

			Notifica	ation of A	Spesius r	nd '	12:120	)-7)		1. 4.196	2		_	
		(	Pursuant	to NJAC	c 8:60-7 a	nu	14.1-		Gh Ch	eck-#-486	1			-
- 0oi #·	2011-219	,						111 11	= 16 ts	, II W	IS III			
B & G proj. #:	7775-47-SS				Andrews Topics			MUlic			- 11 11	i i		
		Name of Bu	Iding Owne	er/Operator	r (2)			limil			1 1	-		-
Date of Notification	1								NOV	= 1 Z.U	T July			
1111/1014	1/11111 11	Fiona &	Scott Bea	lty		× 1		10 14	1401				-var-	
1-11-1/10-1-	Type Notification	Street Addre	ess				1 -							
Agencies Notified	1	16 Broo	kside Roa	d			- 1	1	ASEEST!	is CONTRO	L &			
□ EPA		City, State,	Zin Code				3	İ	L	CENSING				_
☐ DEP		City, State,		2040			Š	J	Te	ephone Nu	ımber	-1		
DOL.	Amendment	Mapley	vood, NJ	37040					30,74.0	out of the state o	Arm. 1		ê	
⊠ DOL		Name of C	ontact				344	* 192 *		75-513-0	1007			=
M DOH	Cancellation			eattv	- CONTROL OF THE CONT									
☐ DCA	L Cancellation	Fiona	& Scott B		ATION									
L DOX			FA	CILITY INF	FORMATION	`		-T	Type of F	acility (4)	( 12)			
								- 1			K - 12)	V 1	2)	
	where abatement is takin	g place (3)						1		Subchap	ter 8 (Other	tnan N-	2)	
Name of facility	Where abatom									Other (Pr	rivate/Comm	ercial		
								1	1. 2	Bldas./Ho	omes, etc.		g. Ag	e
Fiona & Scot	ll Dealty							1	Square	Feet #	of Floors	l Bio	g. 1 .5	
Street Address		183			STATE OF THE PARTY				1					
	4				TC	ount	y Code	(7)	Curro	nt Use (Pri	or if being de	emolishe	ed)	
16 Brooksid	ic Road	County (6)			(S	State	use on	ly)	reside	ential				
City (5)									Testus	or (9)				
		Essex				TIN	Name o	f Abateme	nt Contract	Ji (0)				
Maplewoo	d, NJ 07040 itoring Firm Hired by Bldg	Owner (8)		ASC	M No.	11	D & (	G Restora	tion, Inc.					
Name of Moni	itoring Firm Hirea by Blog	•				-11-	Ctroot 6	Address						
						11	Street		oad	Control of the Control				
n/a	· c						105	Ryerson F	do					
Street Addres	13					=   [	City, Sta	ate, Zip Co	ue	-				
						11	Line	coln Park	NJ 0703	)	License N	umber		
City, State, Zi	p Code					-	Teleph	one Numb	er		0378			
			Phone	Number			97	3-696-686	9		1 43			
Droject Mana	ger for Monitoring Firm						Namo	of OSHA	Monitor					
Project		Vi-tonio Villa		1 (41)		-	Name	C Resto	ration, In	c				
	(10)	Sched. Co	mpletion D	ate (11)			Bo	Address						
Scheduled S	Start Date (10)	1	111						Dood				====	
/1 4/1 1		11/14/20	)11				10:	5 Ryerson	Road					
11/14/11	Status During Abatement	(Check only	one)			1	City.	State, Zip	Code					
Occupancy	Status During Abatement ty closed/vacated during	entire period	of abateme	ent.		1								
	ty closed/vacated during of the comment performed outside	of normal fac	ility nours-			-	Li	incoln Par	k, NJ 070	133				
Desc.	ement performe						= الم						. 4	
[] Otho	- Describe:								- Inogativi	e pressure	☑ Glove	bag pro	ceaui	е
	Work (check all that apply	()					Full C	ontainmen	t w/negativ	-	☐ Non-	friable p	roced	ure
Scope of	molition 🔯	Renovation				X	Mini-e	enclosure				TRI	R	E
☐ Den	Home:	≥160 sf or ≥									No.	е	е	n
⊠ >3 :	sfor>3 If	Is location	normally III	sed solely					nina	Amou	int SE or	m	p	C
		Is location	normany of	odial	Descript	tion (	of asbes	stos-contai	mig	(Spec	cify SF or	O V	a	a p
Loc	cation of pestos-containing	staff(12)			material	(AC	CM)			LF		e_	r	1
	torial to be		No	N/A				774		10.16		X		
ab	ated in facility (13)	Yes	No		<u> </u>	latio	n .			18 lf				
		-		IX	pipe insul	ialio	-			6 lf		-   片	T	TI
baseme	ent			X	pipe insul	iatio	)(1					႕님	卡	情
baseme	ent boiler room											ᆜᆜ	부	岩
Dascine				4	1					-		$- \Box$		
										J				
					Cubic Yards	of W	Vaste II	Name of R	egistered L	anuilli	overy Cent	er		
		INIT	EP Hauler	ID#	Cubic Tarus	J1 V V		Tullytov	n Resour	ce a rec	overy Cent			
Registe	red Waste Hauler	19	563		1 yard	-	-	City, State	3					
B&(	G Restoration, Inc.			Disposal	Date			Tullyto	wn, PA_		T Da	te		
200	tate			11/15/		_			1000			/4/201	1	
City, Si	alm Dark NJ 07035			1	T Signatur	e	(	0.1	Yuna		1 1 1	141201	-	

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) MR PETRAZZUOLO Type Notification Agencies Notified 673 MABIE ST. EPA Initial City, State, Zip Code DEP Amended NEW MILFURD, NJ DOL Amendment # Telephone Number SING Emergency (including Name of Contact DOH justification) UINNY Cancellation DCA FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) PETRAZZUOLO School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e. private & commercial buildings, homes, 673 MABIE ST etc.) # of Floors Bldg. Age Square Feet 2 56 NEW MILFURA 1650 Current Use (Prior if being demolished) County (6) BERE-EN County Code (7) (STATE USE ONLY) RES. Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. A. Mac Contracting Inc. Street Address Street Address 105 Lowell Road City, State, Zip Code City, State, Zip Code Glen Rock, NJ 07452 Telephone No. License No. Project Manager for Monitoring Firm Telephone No. 00156 A 201-262-5841 Name of OSHA Monitor Scheduled Completion Date (11) Omega Environmental Services Inc. 11/38/11 11/30/11 Street Address Occupancy Status During Abatement (Check Only One) 280 Huyler Street Facility Closed/Vacated During Entire Period of Abatement City, State, Zip Code Abatement Performed Outside of Normal Facility Hours Other - Describe: Hackensack, NJ 07606 Scope of Work (Check All That Apply) Full Containment with Negative Pressure ≥3 sf or ≥3 If Renovation Mini-Enclosure ≥160 sf or ≥260 lf Demolition Glovebag Procedure Non-Exempted (\*) and Non-Friable Procedure Abatement Is Location Туре Normally Description of Location of Used Solely by Amount Asbestos Containing Material (ACM) Asbestos-Containing Material (ACM) Maintenance/ (Specify Remova (i.e. thermal systems insulation, TO BE ABATED Custodial Staff? SF or LF) surfacing, VAT, or In Facility (12)other miscellaneous) (13)Yes No N/A VAT IMASTIC 450SF BASEMENT X Name of Registered Landfill Cubic Yards NJDEP Waste Name of Registered Waste Hauler of Waste 2 Hauler ID No. Cumberland County Landfill DJM Transport Inc. 29681 City, State Disposal Date City, State Newburg, PA 17242 11/28/1100 Kearny, New Jersey Date Completed by Title R. McDonald President

		NO	TIFICA (Pursi	TION OF	f New Jers ASBESTO JAC 8:60 a	SABAT	EMENT (	Check#	27	44	s 	<u>~</u>
Date of Notification (1)			Nan	me of Build	ding Owne	r/Operate	or (2)	me C	尼		7	IE IE
Agencies Notified Type Notificati	on			et Addres							_	
EPA 🗵 Initial			1 2	204	SOLL	195	COURT	IIIII NOI	,	7 00		1
DEP Amended Amendment Emergence	ent#	<u> </u>	City,	, State, Zij 21 <i>06</i> £	o Code	ルフ	0745			<u> </u>	111_	-
DOH justification Cancellat	n)	airig		e of Cont			$ \dagger$ L	March of The State	Num	ber ()	&	1
Name of Facility Where Abatement is Ta	king Diag	(2)	F	ACILITY	NFORMAT	TION			in language			-
VIMBA	ding i lac	Je (3)					Type of Facil	ty (4)			and the	
Streel Address 204 SOLLAS COUR	27						Subchar	ter 8 (Other than	K-12) iercial	buildin	as. h	nome
City (5) RINGEWOOD							Square Feet	# of Floors		Bldg	a. Ag	
County (6) BEREEN			Coun (STAT	ty Code (7 E USE ON	(Y)		Current Use (I	Prior if being dem	olished		€	
Name of Monitoring Firm Hired by Building	Owner	(8)		CM No.		Name						
Street Address	_					A. M	ac Contracti	ng Inc.				
City, State, Zip Code						City, St	ate, Zip Code	7452				-
Project Manager for Monitoring Firm			Teleph	one No.		Telepho	one No.	License				
Start Date (10) /	1	111	ompletion	n Date (11	)	Name o	f OSHA Monito	r				
Occupancy Status During Abatement (Che	ck Only (	One)	1			-			mc.			
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe:	Period o	f Abate ity Hou	ment rs									
Scope of Work (Check All That Apply)					_			7606				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Course	Renovi Demoli				X	Mini-Enclosure Glovebag Pro-	e cedure			ъ	
Location of		s Locat Norma								Abate	emer	nt
Asbestos-Containing Material (ACM)  TO BE ABATED  In Facility  (13)	Us	ed Sole aintena stodial S (12)	ly by nce/	Asbes (i.e.	tos Contair thermal sy surfacin	stems in g, VAT,	ABATEMENT d 12:120)  Poperator (2)  S COMET NOV - 7  NOV		e Encapsulate	Enclosure		
	Yes	No	N/A		other mis	cellaneo	us)		NOV - 7  Telephone Number:  (4)  (4)  (5)  8 (Other than K-12) rivate & commercial build formulate & co	pair	sulate	sure
FAMILY ROOM			X	U	IAT			1753F	X			_
ame of Decisions of U.S.									-	+		
me of Registered Waste Hauler JM Transport Inc.		Ha	DEP Wa Juler ID N 1681	iste Vo.	Cubic Yar of Waste	rds /	21		andfil			
y, State earny, New Jersey					Disposal/C	Date	City, State		andill	l 		-
mpleted by McDonald	Title				//////////////////////////////////////	200	Newburg					

# NOTIFICATION OF ASBESTOS ABATEMENT

		(P			AC 8:60 and			111	1			$-\frac{111}{111}$	ח
e of Notification (1)	/ //		G	ABR	ding Owner/O	perator (2	2) 5 5 0 C I A	15	MON -	7 20	011		1
ncies Notified Type No	tification			S /	17	Sou	71+	THE ASSESSED	W2RE2109	ONTR	ói &		-
DEF Am	ial nended nendment #		City,	State, Z	ip Code	んナ	07	352	LICEN Telephone Number	12111.0		<del></del>	7
DOL Em	nergency (includ tification)	ing		e of Cor	ntact			New Apple	GGSS	410		*	
DCA	ncellation				INFORMAT	ION	Type of Fa	cility (4)					
me of Facility Where Abatemer	nt is Taking Plac	e (3)					Scho Subc	ol (K-12)	Other than K-12) ate & commercial b	uilding	s, ho	mes,	
eet Address 506 COLONIAL	ROAD						etc.) Square Fe	et	# of Floors	Bldg.			
Y (5) PRANKLIN LAKE	ذ						800	- (Drior i	f being demolished		_		
ounty (6)			Cou (ST.	Inty Cod	e (7) ONLY)		GAI	1165	DEMIO				_
GERGEN ame of Monitoring Firm Hired b	y Building Owne	er (8)	1	ASCM N	0.	Name A. N	of Abateme	acting I	nc.				
treet Address						Street 105	Address Lowell R	oad					_
ity, State, Zip Code			ne (225) (15			City, S	State, Zip C n Rock, N	ode IJ 0745	2				
Project Manager for Monitoring	Firm		Te	lephone	No.	Telep	hone No. -262-584		License No. 00156 A				
		heduled	Comd	letion Da	ite (11)		100114	Monitor	tal Services Inc				
Start Date (10) /2/2/	11	12	151	1(		Stree	t Address		tai oo.			-11	į
Occupancy Status During Abate	ement (Check O	nly One)	ateme	nt			Huyler S			• -	;		
Facility Closed/Vacated Down Abatement Performed Out	Iside of Normal	Facility F	lours			City,	State, Zip ( ckensack	, NJ 07	606	-			
Scope of Work (Check All That	Apply)	Accorded to	novatio				Mini-l	Enclosure					
≥160 sf or ≥260 lf		De De	Honne	<i>n</i> (			X Non-	bag Proc xempted	edure (*) and Non-Friable	e Proc	edure	ement	_
(7)										,	Huale		
		Is l	ocatio	on						-	Ту		
Location of Asbestos-Containing Mate TO BE ABATED In Facility (13)	rial (ACM)	Used Mair	ocation ormally I Solely otenan odial S (12)	y by ce/	S	Descripti Containing mal syste urfacing, ' ner miscel	g Material (/ ems insulati VAT, or	ACM) on,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	
Asbestos-Containing Mate TO BE ABATED In Facility	rial (ACM)	Used Mair	ormally Solely ntenan odial S	y by ce/ taff?	(i.e. ther s oth	Containing mal syste urfacing, \ ner miscel	g Material (A ems insulati VAT, or Ilaneous)	ACM) on,	Amount (Specify SF or LF)	Removal			
Asbestos-Containing Mate TO BE ABATED In Facility (13)	2	Used Mair Custo	ormally I Solely ntenan odial S (12)	y by ce/ taff?	(i.e. ther s oth	Containing mal syste urfacing, ' her miscel	Material (Ams insulation VAT, or Ilaneous)	ACM) on,	Amount (Specify	Removal			
Asbestos-Containing Mate <u>TO BE ABATED</u> In Facility (13)	2	Used Mair Custo	ormally I Solely ntenan odial S (12)	y by ce/ taff?	(i.e. ther s oth	Containing mal syste urfacing, \ ner miscel	Material (Ams insulation VAT, or Ilaneous)	ACM) on,	Amount (Specify SF or LF)	Removal			
Asbestos-Containing Mate TO BE ABATED In Facility (13)	2	Used Mair Custo	ormally I Solely ntenan odial S (12)	y by ce/ taff?	(i.e. ther	Containing mal syste urfacing, the miscel Rudf	Material (Jens insulativAT, or Ilaneous)	on,	Amount (Specify SF or LF)  600 SF  250 SF	Removal X	Repair	Encapsulate	
Asbestos-Containing Mate TO BE ABATED In Facility (13)  OUTSIDE CANAGE WAS	LC	Used Mair Custo	ormally I Solely Intenanodial S (12)	y by ce/ taff?	(i.e. ther s oth	Containing mal syste urfacing, the miscel Court Trans.	Material (coms insulativAT, or laneous)	Name of	Amount (Specify SF or LF)  600 SF  250 SF  Registered Landfill  PA BETH LE	Removal XX	Repair	Encapsulate	
Asbestos-Containing Mate TO BE ABATED In Facility (13)  OUTSIDE CARAGE WAS  Name of Registered Waste F ROUIC TRANS	lauler PORT	Used Mair Custo	ormally I Solely Intenanodial S (12)	y by cel taff?  N/A  X  JJDEP V tauler ID	(i.e. ther s oth	Containing mal syste urfacing, in mal syste urfacing, in miscel containing mal system is contained in the containing mal system in the containing mal system is contained in the containing mal system	Material ( ms insulati VAT, or Ilaneous)	Name of	Amount (Specify SF or LF)  600 SF  250 SF  Registered Landfil  PA BETH LE	Removal XX	Repair A	Encapsulate	
Asbestos-Containing Mate TO BE ABATED In Facility (13)  OUTSIDE CANAGE WAS  Name of Registered Waste H ROUIC TRANS	lauler PORT	No Used Main Custo	ormally I Solely Intenanodial S (12)	y by cel taff?  N/A  X  JJDEP V lauler ID 2-0.7	(i.e. ther s oth	Containing mal syste urfacing. Valuer miscel Court Trans.	Material (coms insulativAT, or laneous)	Name of IESI	Amount (Specify SF or LF)  600 SF  250 SF  Registered Landfil  PA BETH LE	Removal XX	Repair A	Encapsulate	

### 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) KATHLEEN BONELLI 2011 Street Address Type Notification ИОИ Agencies Notified 25 STORY COURT Initial **EPA** City, State, Zip Code ASBESTOS CONTROL & Amended DEP 07002 BAYONNE Amendment # DOL Emergency (including Telephone Number Name of Contact justification) X DOH KATHLEEN Cancellation DCA **FACILITY INFORMATION** Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) BOUELLI School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e. private & commercial buildings, homes, 25 STORY COURT etc.) # of Floors Bldg. Age Square Feet City (5) 2 56 1650 BAYONNE Current Use (Prior if being demolished) County Code (7) County (6) (STATE USE ONLY) HUDSON Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. A. Mac Contracting Inc. Street Address Street Address 105 Lowell Road City, State, Zip Code City, State, Zip Code Glen Rock, NJ 07452 Telephone No. License No. Project Manager for Monitoring Firm Telephone No. 00156 A 201-262-5841 Name of OSHA Monitor Scheduled Completion Date (11) Start Date (10)/ Omega Environmental Services Inc. 11/15/11 Occupancy Status During Abatement (Check Only One) Street Address 280 Huyler Street Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Hackensack, NJ 07606 Other - Describe: Scope of Work (Check All That Apply) Full Containment with Negative Pressure Renovation ≥3 sf or ≥3 lf Mini-Enclosure Demolition ≥160 sf or ≥260 lf Glovebag Procedure Non-Exempted (\*) and Non-Friable Procedure Abatement Is Location Type Normally Description of Location of Used Solely by Asbestos Containing Material (ACM) Amount Asbestos-Containing Material (ACM) Maintenance/ (Specify (i.e. thermal systems insulation, Removal TO BE ABATED Custodial Staff? surfacing, VAT, or SF or LF) In Facility (12)other miscellaneous) N/A Yes No 160 Lt PIPE BASEMENT 22 SF VAT BASEMENT BATH ROUM Name of Registered Landfill NJDEP Waste Cubic Yards Name of Registered Waste Hauler Hauler ID No. of Waste Cumberland County Landfill DJM Transport Inc. 29681 City, State Disposal Date City, State Newburg, PA 17242 Kearny, New Jersey Title Completed by President R. McDonald

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

		NOT	FICAT	State of New Jer ION OF ASBESTO am to NJAC 8:50	S ABA	TEMENT	Check #7	70	子子	<u> </u>	
Date of Notification (1)			Vaw	e of Building Cyme 337 ALT	er/Opera	tor (2)	In E	<b>D</b>	1	Alt	PR
Agendes Notified Type Notificati	an		Stree	Address		——————————————————————————————————————	THIT	IV.I	or o	f Hea	业
EPA DEP Amended Arrendme	ent at		City,	337 ALT State Zip Coce YCKUFF			= 111 W/1	NO)	11/	(5	igna
DOH justification Cancellati	u)		FR	e of Contact AWK EIUS			Telephone N	lunib	er []	CHI CONTRACT	3
Name of Fedility Where Abatement Is Tal	ing Place	≥ (3)	FA	CILITY INFORMA	TION	Type of Facility	(4)	JANA KA			-
HOUSE / DEMO		317 SUSA				School (K	1.				
Steet Address 771 CHARNWOOD	DR	IVE	ALTON VV			Subchapt	er 8 (Other than k- private & comme	-12) ciel b	ui!din	ps.ho	ורזכ
City (5) WYCKOFF						Square Feet	# of Floors		Bidg کی	. Age	ì
County (6)  DERCEN			County (STATE	y Code (7) E USE ONLY7		Current Use (P	ior if being demon	shed)			
Name of Monitoring Firm Hired by Building	Owner (	(8)	ASC	M No.	Name A, N	e of Abatement C:	miractor (9)	CI			
Street Address		·	<u> </u>		Street	Address	3				
City, State, Zip Code				~~		Lowell Road					
<u> </u>						Rock; NJ 67	452				
Project Manager for Monitoring Firm			Teleph	one No.		none No. -262-5841	Ucense I 00156				
Start Diete (10)	11/	7/11	pletion	Dale (11)		of OSHA Manitor ega Environme	ental Services I	nc.			
Occupancy Status During Abatement (Che Facility Closed/Vacated During Entire	Period of	Ahalem	ent			Address Huyler Street					~
Abatement Performed Outside of Non Other - Describe:	nel Facili	ty Hours				late, Zip Code (ensack, NJ 0	7606			el/1-ev//	
cope of Work (Check All That Apply)					1100						-
3. 23 sfor 23 lf 2 2160 sfor 2260 lf		Renovati Demolitic		•	XI TX	Mini-Enclosure Glovebag Prod				0	
Location of		s Lecetio Normally		Des	cription (				Abak		t
Asbestos-Containing Materiat (ACM) TO BE ABATED In Facility (13)	Ma	ed Saleiy eintenand todiet St (12)	e/	Asbestos Conta (i.e. thermal : surfac	sining Ma	atedat (ACM) insulation, . or	Amount (Specify SF or LF)	Remova	Repair	Encapsulate	
0.5.5	Yes	No ;	N/A							31.0	,
BASEMENT			X:	VA	τ		40050	X			
	-										
		- i								4	
me of Registered Wasle Haule:	لــــــــــــــــــــــــــــــــــــــ	: ittle	EP Vita	aste   Cubic Y	erde	N'ema of D	egistered Landfül				
IM Transport Inc.			ler ID N			(:	egistered Candill and County La	ndfil			
y. State amy, New Jersey				Disposa 1//+/	/Date	City, State	, PA 17242			- 9	_
npleted by McDonald	Tille Presi	dent			· ·	n Dall	✓ Dele	1/2	1/1	,	_

November 4, 2011

Mr. Paul C. Horner

New Jersey Department of Health P. O. Box 369 Trenton, NJ 08625

Dear Mr. Horner;

During the demolition permit application we needed an environmental survey. The survey revealed the presence of asbestos flooring in the basement.

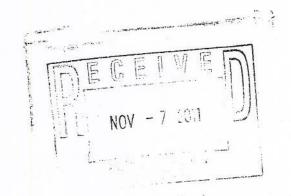
We request that the ten day notification for asbestos removal be waived.

We need A. Mac Contracting to remove asbestos so that we can proceed with demolition. The equipment is on site and we are ready to start demolition. We need to get the new house closed in so we can work through the winter. A. Mac is licensed for the asbestos work.

Job Site:

337 Altwood Road LLC 771 Charnwood Drive Wyckoff, NJ 07481

Sincerely; Frank Giussre



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

Kearny, New Completed by	lersey	Title				Signa		1/11			ate /	#/1	)	
Name of Registere DJM Transpor City, State	t Inc.			NJDEP V Hauler ID 29681	) No.	Oubic Yards of Waste 3 Displosal Di		Cumi	perla	PA 17242	andi	ill		_
		-			-			Name	of Reg	istered Landfill	<u></u>			
BUSCINE									-					1
BASEMER	/T ·	165		×	VA	T/M	ASTI	C	-	800 SF	X	-	-	+
Asbestos-Conta	cation of sing Material (ACM) E ABATED Facility (13)	Use Mai	Location Loc	ly ly by nce/ Staff?	(i.e. the	Description Containing Imal syster Surfacing, V Ther miscelling	Material ms insula AT, or aneous)	non,	1	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	
Scope of Work (Che  ≥3 sf or ≥3 lf  ≥160 sf or ≥260			enovat emoliti				Mini	-Enclosur	Э.,	th Negative Pre e nd Non-Friable	Proc	edure Abate	100	N N N N N N N N N N N N N N N N N N N
Facility Closed/ Abatement Period Other – Describ		riod of At	pateme	ent	* -	City S		Code k, NJ 0			essure		•	_
Start Date (10)		11	118	711		Street	Address		nai C	Services Inc.				
Project Manager for N	Nonitoring Firm	scheduled		elephone		201-	262-58	Manitor	ntal S	00156 A				_
City, State, Zip Code	· 7. v.					Glen	Rock,	NJ 0745	52	License No.				_
Street Address			. !			105 L	Address _owell f tate, Zip (							_
lame of Monitoring Fi	rm Hired by Building Own	ner (8)	1	ASCM No	o.	A. Ma	ac Cont	ent Contr racting	inc.					
County (6) BERGEN			Co (ST	unty Cod	e (7) ONLY)			126						
Ireet Address  15 BELMO  ity (5)  GLEV RO	INT KOMA					1	Square F	-0		Floors  2 g demolished)	S S	0.000		-
VINCENT	1						School Subo	ool (K-12) chapter 8 er (i.e. priv	other ate &	than K-12) commercial bu	ildings		nes,	-
DCA	Cancellation  Abatement is Taking Pla	ice (3)	F	ACILITY	INFORMAT			acility (4)						
DOL	Amendment # Emergency (inclu justification)	ding	Nam	ne of Con	tact			PORTURE TELES	1	hone Number	70	6.4	7:-	-
EPA DEP	Initial Amended		City,	State, Zi	p Code ROCK	1	, 5	074	52	LICENSIN			u1 ~	-
encies Notified	Type Notification		Stree	1R + I	ing Owner/O m R S s 3ELMON	TR	OAD			Rabearda coli	TOL	- a	1	-
e of Notification (1)	/ . / .	4	Nami	e or build	ing Owner/O	HINCH	ENT	1 111 1	1	NOV - 7	LUI		مسلب	2

<sup>•</sup> Do not use this form for asbestos licensure exempted activities.

1928				TION OF A	New Jersey SBESTOS ABATE C 8:60 and 12:1			CE		W	E	
Date of Notification (1) 11/03/11					ding Owner/Operat - Chugach Indu		1	NOV -	7 :	2011		
Agencies Notified Type No				reet Addres ldg # B30			L	ASRESTOS O				
DEP Amer				y, State, Zi catinny A	Code rsenal, NJ 0780	06		LICENS	V			
DOH justifi	cation) ellation	ng	Na	me of Cont		- 1	Te	elcohone Nu	mber			
			F		NFORMATION							
Name of Facility Where Abatement U.S. Army Reserve Center	is Taking Plac	ce (3)				Type of Faci	lity (4)					
Street Address						School (F		ther than K-1	21			
Bldg # B225						Other (i.e	., privat			uildin	gs,	
City (5) Picatinny Arsenal						Square Feet 2,500 SF	Transfer to the second	of Floors		B!dg 60+	.Age	
County (6) Morris			Co	unty Code E ONLY)	(7) (STATE	Current Use		being demol	ished	)	-	
Name of Monitoring Firm Hired by B	uilding Owner	_		M No.	Name of Abaten	Office Buil					_	
(8) J & S Environmental Serv			N/A			I Construction		n				
Street Address					Street Address			-				_
2333 Rt 22 West					1360 Clifton,		/IB Su	ite 218				
City, State, Zip Code Union, NJ 07083			D.		Clifton, NJ (							
Project Manager for Monitoring Firm Sherry Galsomino		1000	8-206	e No. 5-0073	Telephone No. 973-389-008	89	200	cense No. 00693				
Start Date (10)	Scheduled C	ompl	etion D	ate (11)	Name of OSHA N		- 1		20		_	=
11/18/2011	11/20/20				DIA General	Construction	n, Inc					_
Occupancy Status During Abatemen    Facility Closed/Vacated During Er			mont		Street Address 1360 Clifton,	Avonuo Di	AD Cu	ito 210				
Abatement Performed Outside of Other - Describe:	Normal Facility	у Ног	ırs		City, State, Zip C	ode	VID SU	ille 210	-			=
Scope of Work (Check all that apply)												_
>3 sf or >3 lf >160 sf or >260 lf	⊠ Re	novat emol	0000		Mini-End Govebag	g Procedure						
	No	ocatio	1		IXI Non-Ex	empted (*) and	Non-F	riable Proce	10000000	Abate Ty		ı
Location of Asbestos-Containing Material (ACM	Used ) Main	Sole! tenan		Asbest	Description of os Containing Mate	erial (ACM)	A	mount	-			
TO BE ABATED IN Facility	F-9000	stodia taff?	ıl	(i.e.,	thermal systems in surfacing, VAT, of			pecify or LF)	Re	Z.	Enca	Enc
(13)		(12)		-	other miscellaneou		01	or Er j	Removal	Repair	Encapsulate	Enclosure
Room with hood	Yes	No	N/A	T	D 1		1.05				u	
Room with nood			X	Transite	Panel		1 SF		X		_	
	=									-	-	
The state of the s										-	$\dashv$	-
Name of Registered Waste Hauler		100000	JDEP \	0.000	Cubic Yards	Name of Regi	stered L	andfill				$\neg$
Service Transport Group		- H	10970	No.	of Waste 1/8	Minerva La	ndfill					
City, State New Castle, DE					Disposal Date 11/20/2011	City, State Waynesbur	g, OH	44688				
Completed By	Title				Signature	1	3, 5,1	Date	-	-		=
Crutarth Jagad	President				13	~~~		11/3/20	11_			

### 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) U.S. Army - Chugach Industries Inc 11/03/11 Type Notification Street Address Agencies Notified Bldg # B30 Initial EPA DEP City, State, Zip Code Amended DEP AGELL BIRENSINGUL & DOL Amendment #\_ Picatinny Arsenal, NJ 07806 Emergency (including Telephone Number Name of Contact DOH DCA justification) Cancellation Jane Lisa (Owner's Rep) FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) U.S. Army Reserve Center Subchapter 8 (Other than K-1 2) Street Address Other (i.e., private & commercial buildings, homes, etc.) Bldg # B3208 # of Floors Bldg. Age Square Feet City (5) 4,500 SF 60 +Picatinny Arsenal Current Use (Prior if being demolished) County Code (7) (STATE USE ONLY) County (6) Office Building Morris Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner ASCM No. DIA General Construction, Inc. (8) J & S Environmental Services N/A Street Address Street Address 1360 Clifton, Avenue, PMB Suite 218 2333 Rt 22 West City, State, Zip Code City, State, Zip Code Clifton, NJ 07012 Union, NJ 07083 License No. Telephone No. Project Manager for Monitoring Firm Telephone No. 00693 973-389-0089 908-206-0073 Sherry Galsomino Name of OSHA Monitor Scheduled Completion Date (11) Start Date (10) DIA General Construction, Inc. 11/21/2011 11/19/2011 Street Address Occupancy Status During Abatement (Check only one) 1360 Clifton, Avenue, PMB Suite 218 Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Clifton, NJ 07012 Other - Describe: Scope of Work (Check all that apply) Full Containment with Negative Pressure Mini-Enclosure Renovation >3 sf or >3 If Govebag Procedure Demolition >160 sf or >260 lf Non-Exempted (\*) and Non-Friable Procedure Abatement Is Location Type Normally Description of Used Solely by Location of Asbestos Containing Material (ACM) Amount Maintenance/ Asbestos-Containing Material (ACM) Encapsulate (Specify (i.e., thermal systems insulation, Remova Repair Custodial TO BE ABATED SF or LF) surfacing, VAT, or staff? IN Facility other miscellaneous) (12)(13)N/A No 300 SF Floor tiles/Mastic Modular Testing Chamber Name of Registered Landfill Cubic Yards NJDEP Waste Name of Registered Waste Hauler Hauler ID No. of Waste Minerva Landfill Service Transport Group Disposal Date City, State City, State Waynesburg, OH 44688 11/21/2011 New Castle, DE Date Signature Title Completed By 11/3/2011 President Krutarth Jagad

Salah Ting

1928				Pursi	ATI( Jan	t to NJAC	BEST 0 8:60	OS ABATE and 12:12	20) interior		) E C E		V	居	
Date of Notification (1) 11/03/2	1							ner/Operato gach Indu		hal k	INOV	1 4	2011	ĺ	Led
Agencies Notified	Type Notific	cation		5	Stree	et Address g # B30		gaon maa		100	ASBESTOS (	ONTR	OL &		
DEP DOL	Amende Amendr	nent #		-	City,	State, Zip		l, NJ 0780	6	٠.,	LICENTER TOPS OF	SIMA	· .	-	
☑ DOH ☐ DCA	justifica Cancella		ing	1	lam	e of Conta Lisa (Ov	act		3.2.2.	2-4-2	Telephone Nun	nber		· · · · ·	·
					FA	CILITY IN	FORM	TATION							
Name of Facility Where A		Taking Pla	ce (3)	)					Type of Fa	(K-12	2)				
Street Address Bldg # B221B									Other (	i.e., p , etc.)	B (Other than K-1 rivate & commerc		lding	S,	
City (5) Picatinny Arsenal									Square Fe 2,500 SF	:	# of Floors	_ 6	3ldg. 50+	Age	
County (6) Morris						inty Code ONLY)			Office Bu	ildir		ished)			
Name of Monitoring Firm (8) J& S Environme			r ——		/A	No.	DI	A Genera	ment Contractal Construc						
Street Address 2333 Rt 22 West							136			РМЕ	Suite 218		-		
City, State, Zip Code Union, NJ 07083							CI	, State, Zip ( ifton, NJ							
Project Manager for Mon Sherry Galsomino	itoring Firm			eleph 08-2		No. -0073	97	ephone No. '3-389-00							
Start Date (10) 11/18/2011		Scheduled 11/20/2		oletio	n Da	ate (11)		ne of OSHA A Genera	Monitor I Construc	tion,	Inc.				
Occupancy Status During							377.75	et Address	A	DNAC	Cuito 210				
Facility Closed/Vacate Abatement Performed Other - Describe:					ent		City	, State, Zip ( fton, NJ 0	Code	PIVIE	3 Suite 218				_
Scope of Work (Check al	I that apply)						CII	11011, 143 0	1012						_
>3 sf or >3 lf ≥160 sf or ≥260 lf			Renova Demo	ation olitio	n			Mini-En Goveba	closure ag Procedure		ative Pressure	Q. 30.			
			Loca					] Non-E	xempted (*) a	and N	Ion-Friable Proce	_	Abate Ty		
Asbestos-Containing Ma TO BE ABAT IN Facility (13)	aterial (ACM)	Ma	ed Sol aintena Custod staff (12)	ance/ dial ?		Asbesi (i.e.,	tos Co , therm surf	Description of ontaining Mar nal systems in facing, VAT, r miscellaned	terial (ACM) nsulation, , or		Amount (Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure
2 11 2:		Yes	No		I/A	Dino/El	how	Inculation		-	7 SF	<u> </u>		œ.	
Small room adjacent t	о епігапсе	-		X				Insulation Insulation			8 LF	X			
Hallway		_	-	X	-	Pipe/Ei	bow.	msuration				1		-	
		-	-	-						+		+			
Name of Registered Was	te Hauler		1	NJD	EP \	Vaste	Cubi	ic Yards	Name of I	Regist	tered Landfill	-			
Service Transport Gr				Haule 209	er ID 970	) No.	1	osal Date	Minerva City, State		ndfill				_
City, State New Castle, DE							3000	20/2011	A CONTRACTOR OF THE PARTY OF TH		, OH 44688				
Completed By Krutarth Jagad		Title Presider	nt					Signature ;	1_~>	I	Date 11/3/2	011			
		-	-						7						

THE BUILDING WHEN A MARKET WAS A PROPERTY OF State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) HESS CORPORATION Date of Notification (1) Street Address NOV 2011 21 /11 1 HESS PLAZA Type Notification Agencies Notified City, State, Zip Code Initial Notification EPA WOODBRIDGE, NEW JERSEY 07095 ASBESTUS CONTROL & Amended Notification DEP Cancellation Hermann DOL Telephone Number Name of Contact On Hold DOH DAVID CERULO **EMERGENCY NOTIFICATION** DCA FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Subchapter 8 (Other than K-12) Other (ie. private & commcl. bldgs., homes, etc.) HESS PLAZA Bldg. Age # of Floors Square Feet 42 Street Address 187,000 1 HESS PLAZA Current Use (Prior if being demolished) County Code (7) County (6) City (5) COMMERCIAL OFFICE (STATE USE ONLY) MIDDLESEX WOODBRIDGE Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. PAR ENVIRONMENTAL CORPORATION 17 HILLMANN ENVIRONMENTAL Street Address 313 SPOOK ROCK ROAD Street Address 1600 ROUTE 22 City, State, Zip Code City, State, Zip Code SUFFERN, NEW YORK 10901 UNION, NEW JERSEY 07083 License Number Telephone Number Telephone Number Project Manager for Monitoring Firm 845-369-7500 908-377-5644 MIKE NEHLSEN Name of OSHA Monitor Sched. Completion Date (11) Expected State Date (10) QUALITY ENVIRONMENTAL 12 30/ /11 6/ Year Day Month Year Day Month Street Address Occupancy Status During Abatement (Check only one) 1376 ROUTE 9 W Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe: City, State, Zip Code MON. - FRI. 6:00 PM - 2:30 AM WAPPINGERS FALLS, NY 12590 Other - Describe: Full Containment with Negative Pressure Scope of Work (Check all that apply) Mini-Enclos, Renovation Demolition Glovebag Procedure >3SF OR LF Non-Friable Procedure Abatement Type >160 SF OR Description of Asbestos Is Location ENCAPSULE ENCLOSURE Location of Containing Material (ACM) Amount REMOVAL normally used Asbestos-containing (Specify (ie. Thermal systems solely by Material (ACM) SF or LF) insulation, surfacing, VAT, Maint/Custodial TO BE ABATED or other miscellaneous) Staff (12) in Facility (13) Yes No N/A 8,005 SF VAT & MASTIC X 3RD FLOOR - ENTIRE 75 LF PIPE FITTINGS X 3RD FLOOR - ENTIRE X 12,180 SF JOINT COMPOUND X 3RD FLOOR - ENTIRE 495 SF COVE BASE MASTIC X 3RD FLOOR - ENTIRE X 25 SF TAR 3RD FLOOR - ENTIRE X 8,005 SF VAT & MASTIC X 2ND FLOOR- ENTIRE 495 SF X COVE BASE MASTIC X 2ND FLOOR- ENTIRE 12,180 SF JOINT COMPOUND X 2ND FLOOR- ENTIRE 25 SF X TAR X X 2ND FLOOR- ENTIRE 380 LF PIPE FITTINGS INSULATION X 2ND FLOOR- ENTIRE 12,425 SF X VAT & MASTIC X PLAZA-ENTIRE 495 SF X COVE BASE MASTIC X PLAZA-ENTIRE X 18,820 SF JOINT COMPOUND PLAZA-ENTIRE 7,275 SF ACCOUSTICAL PLASTER ١x X PLAZA-ENTIRE 25 SF TAR PLAZA-ENTIRE 200 LF X PIPE FITTINGS INSULATION X PLAZA-ENTIRE X 665 SF DUCT INSULATION 1ST FLOOR-MECHANICAL ROOM X X PIPE FITTINGS INSULATION 207 LF 1ST FLOOR-MECHANICAL ROOM X 4 SF VIBRATION CLOTH 1ST FLOOR-MECHANICAL ROOM X 10 SF GASKETS 1ST FLOOR-MECHANICAL ROOM X 45 LF PIPE FITTINGS INSULATION IX 1ST FLOOR -BOILER ROOM 240 SF X DUCT INSULATION 1ST FLOOR-BOILER ROOM X 3,000 SF VAT & MASTIC 1ST FLOOR - CAFETERIA 5,700 SF X JOINT COMPOUND 1ST FLOOR- CAFETERIA X 175 SF COVE BASE MASTIC 1ST FLOOR - CAFETERIA 25 LF X PIPE INSULATION X Name of Registered Landfill 1ST FLOOR - CAFETERIA Cubic Yards of Waste NJDEP Waste Name of Registered Waste Hauler GROWS LANDFILL

Hauler ID No.

DILITEANSPORT IIC

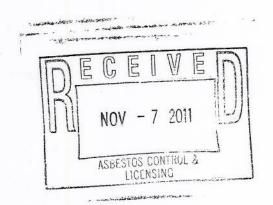
*	26981	1	1			
City, State KEARNEY, NEW JERSEY		Disposal Date 6/23/11-05/15/2012	City State MODERISVILLE, PA	Date /	151	111
Completed by (Print or Type) BENJAMIN SANCHEZ	Title DIRECTOR OF OPE	ERATIONS Signature	788	6	121	///



A TOTAL WALL State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) 017 Name of Building Owner/Operator (2) HESS CORPORATION Date of Notification (1) Street Address -5 /11 NOV 1 HESS PLAZA Type Notification Agencies Notified City, State, Zip Code Initial Notification **EPA** WOODBRIDGE, NEW JERSEY 07095 STOS CONTROL Amended Notification DEP Cancellation LICENSING DOL Telephorie Number Name of Contact On Hold DOH DAVID CERULO EMERGENCY NOTIFICATION DCA FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Subchapter 8 (Other than K-12) Other (ie. private & commcl. bldgs., homes, etc.) HESS PLAZA Bldg. Age # of Floors Square Feet 42 Street Address 187,000 13 1 HESS PLAZA Current Use (Prior if being demolished) County Code (7) County (6) City (5) COMMERCIAL OFFICE (STATE USE ONLY) MIDDLESEX WOODBRIDGE Name of Abatement Contractor (9) ASCM No. Name of Monitoring Firm Hired by Building Owner (8) PAR ENVIRONMENTAL CORPORATION 17 HILLMANN ENVIRONMENTAL Street Address Street Address 313 SPOOK ROCK ROAD 1600 ROUTE 22 City, State, Zip Code City, State, Zip Code SUFFERN, NEW YORK 10901 UNION, NEW JERSEY 07083 License Number Telephone Number Telephone Number Project Manager for Monitoring Firm 845-369-7500 908-377-5644 MIKE NEHLSEN Name of OSHA Monitor Sched, Completion Date (11) Expected State Date (10) QUALITY ENVIRONMENTAL 12 30/ 5/ 22 / Year Month Year Day Month Street Address Occupancy Status During Abatement (Check only one) 1376 ROUTE 9 W Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe: City, State, Zip Code MON. - FRI. 6:00 PM - 4:00 AM WAPPINGERS FALLS, NY 12590 Other - Describe: Full Containment with Negative Pressure Scope of Work (Check all that apply) Mini-Enclo: . Renovation Demolition Glovebag Procedure >3SF OR LF Non-Friable Procedure Abatement Type >160 SF OR Description of Asbestos Is Location ENCLOSURE Amount Location of REMOVAL Containing Material (ACM) VCAPSULE normally used Asbestos-containing (Specify (ie. Thermal systems solely by Material (ACM) SF or LF) insulation, surfacing, VAT, Maint/Custodial TO BE ABATED or other miscellaneous) Staff (12) in Facility (13) Yes No N/A X 8,005 SF VAT & MASTIC 3RD FLOOR - ENTIRE X 75 LF PIPE FITTINGS X X 3RD FLOOR - ENTIRE 12,180 SF JOINT COMPOUND X 3RD FLOOR - ENTIRE 495 SF COVE BASE MASTIC X 3RD FLOOR - ENTIRE 25 SF X TAR X X 3RD FLOOR - ENTIRE 8,005 SF VAT & MASTIC X 2ND FLOOR- ENTIRE 495 SF COVE BASE MASTIC 2ND FLOOR- ENTIRE X 12,180 SF JOINT COMPOUND X X 2ND FLOOR- ENTIRE 25 SF X TAR 2ND FLOOR- ENTIRE 380 LF PIPE FITTINGS INSULATION X 2ND FLOOR- ENTIRE 12,425 SF VAT & MASTIC X X 495 SF PLAZA-ENTIRE COVE BASE MASTIC X PLAZA-ENTIRE 18,820 SF JOINT COMPOUND 7,275 SF X PLAZA-ENTIRE ACCOUSTICAL PLASTER X X PLAZA-ENTIRE 25 SF TAR PLAZA-ENTIRE 200 LF PIPE FITTINGS INSULATION X PLAZA-ENTIRE 665 SF DUCT INSULATION 1ST FLOOR-MECHANICAL ROOM IX PIPE FITTINGS INSULATION 207 LF 1ST FLOOR-MECHANICAL ROOM X 4 SF VIBRATION CLOTH 1ST FLOOR-MECHANICAL ROOM X 10 SF GASKETS 1ST FLOOR-MECHANICAL ROOM X 45 LF PIPE FITTINGS INSULATION X 1ST FLOOR -BOILER ROOM X 240 SF DUCT INSULATION 1ST FLOOR-BOILER ROOM X 3,000 SF VAT & MASTIC X 1ST FLOOR - CAFETERIA X 5,700 SF JOINT COMPOUND X X 1ST FLOOR- CAFETERIA 175 SF COVE BASE MASTIC 1ST FLOOR - CAFETERIA 25 LF PIPE INSULATION 1ST FLOOR - CAFETERIA Name of Registered Landfill Cubic Yards of Waste NJDEP Waste

Name of Registered Waste Hauler

JUM TRANSPORT, LLC	Hauler ID No. 26981	1	GROWS LANDFILL	
City, State		Disposal Date 6/22/11-05/15/2012	City, State MORRISVILLE, PA	10/0/11
KEARNEY, NEW JERSEY Complicted by (Print or Type) BENJAMIN SANCHEZ	Title DIRECTOR OF OPE	RATIONS Signature		6/8/11



State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT nant to NJAC 8:60-7 and 12,122-7 (Pursuant to NJAC 8:60-7 and 12:120-7) Date of Notification (1) 11 /11 Street Address Agencies Notified Type Notification 1 HESS PLAZA FPA Initial Notification City, State, Zip Code DEP Amended Notification #10 WOODBRIDGE, NEW JERSEY 07095 DOL Cancellation DOH On Hold Name of Contact Telephone Number DCA EMERGENCY NOTIFICATION DAVID CERULO FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) HESS PLAZA Subchapter 8 (Other than K-12) Other (ie. private & commcl. bldgs., homes, etc.) Street Address Souare Feet # of Floors Bldg. Age 1 HESS PLAZA 187,000 13 42 City (5) County (6) County Code (7) Current Use (Prior if being demolished) WOODBRIDGE MIDDLESEX (STATE USE ONLY) COMMERCIAL OFFICE Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) HILLMANN ENVIRONMENTAL 17 PAR ENVIRONMENTAL CORPORATION Street Address Street Address 1600 ROUTE 22 313 SPOOK ROCK ROAD City, State, Zip Code City, State, Zip Code UNION, NEW JERSEY 07083 SUFFERN, NEW YORK 10901 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number MIKE NEHLSEN 908-377-5644 845-369-7500 Expected State Date (10) Sched. Completion Date (11) Name of OSHA Monitor 11 / 7/ /11 5/ 12 QUALITY ENVIRONMENTAL Month Day Year Month Day Year Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 1376 ROUTE 9 W Abatement Performed Outside of Normal Facility Hours - Describe: Other - Describe: MON. - FRI. 6 PM - 2:30 AM City, State, Zip Code WAPPINGERS FALLS, NY 12590 Scope of Work (Check all that apply) Full Containment with Negative Pressure Demolition X Renovation Mini-Enclos, >3SF OR LF Glovebag Procedure >160 SF OR Non-Friable Procedure Location of Is Location Description of Asbestos-Abatement Type Asbestos-containing normally used Containing Material (ACM) Amount REPAIR ENCAPSULE ENCLOSURE REMOVAL Material (ACM) solely by (ie. Thermal systems (Specify TO BE ABATED Maint/Custodial insulation, surfacing, VAT, SF or LF) in Facility (13) Staff (12) or other miscellaneous) Yes No N/A 3RD FLOOR - ENTIRE VAT & MASTIC 8.005 SF 3RD FLOOR - ENTIRE PIPE FITTINGS X 75 LF X 3RD FLOOR - ENTIRE X JOINT COMPOUND 12,180 SF X 3RD FLOOR - ENTIRE X COVE BASE MASTIC 495 SF X 3RD FLOOR - ENTIRE X TAR 25 SF 2ND FLOOR- ENTIRE X VAT & MASTIC 8,005 SF X 2ND FLOOR- ENTIRE X COVE BASE MASTIC 495 SF X 2ND FLOOR- ENTIRE JOINT COMPOUND 12,180 SF X 2ND FLOOR- ENTIRE X TAR 25 SF X 2ND FLOOR- ENTIRE X PIPE FITTINGS INSULATION 380 LF PLAZA-ENTIRE X VAT & MASTIC 12,425 SF X PLAZA-ENTIRE COVE BASE MASTIC X 495 SF X PLAZA-ENTIRE JOINT COMPOUND 18,820 SF X PLAZA-ENTIRE X ACCOUSTICAL PLASTER 7,275 SF X PLAZA-ENTIRE X TAR 25 SF X PLAZA-ENTIRE X PIPE FITTINGS INSULATION 200 LF X 1ST FLOOR-MECHANICAL ROOM X DUCT INSULATION 665 SF X 1ST FLOOR-MECHANICAL ROOM PIPE FITTINGS INSULATION 207 LF X 1ST FLOOR-MECHANICAL ROOM X VIBRATION CLOTH 4 SF X 1ST FLOOR-MECHANICAL ROOM X GASKETS 10 SF X 1ST FLOOR -BOILER ROOM X PIPE FITTINGS INSULATION 45 LF X 1ST FLOOR-BOILER ROOM DUCT INSULATION X 240 SF X 1ST FLOOR - CAFETERIA X VAT & MASTIC 3,000 SF X 1ST FLOOR- CAFETERIA JOINT COMPOUND 5,700 SF X 1ST FLOOR - CAFETERIA X COVE BASE MASTIC 175 SF X 1ST FLOOR - CAFETERIA X PIPE INSULATION 25 LF 13TH FLOOR - MER ROOM **DUCT INSULATION** X 770 SF X 1ST FLOOR HALLWAY DIDE EITTINGS

1ST FLOOR STORAGE ROOM	ſ		X	PIPE FITTINGS	13	LF	X		
1ST FLOOR STORAGE ROOM			X	VAT & MASTIC	30	00 SF	X		
Name of Registered Waste Hauler DJM TRANSPORT , LLC		NJDEP I Hauler II 269	D No.	Cubic Yards of Waste	Name of Registered GROWS LANDFILL				
City, State KEARNEY, NEW JERSEY	Syn Laurence			10.20.11.00.10.20.11.	City, State MORRISVILLE, PA			1	1.1
Completed by (Print or Type) BENJAMIN SANCHEZ	Title DIREC	CTOR O	F OPE	RATIONS Signature	X	C	ate //	141	///

type - Started and my damento State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60 and 12:120) D&S Proj. #: MS 11-446 Name of Building Owner/Operator (2) Date of Notification (1) 1 1 1/0 3 1/11 11 NOV - 72011 DANNY'S PUB Type Notification Agencies Notified Street Address Initial ] EPA 54 SPEEDWELL AVENUE Amended DEP City, State, Zip Code Amendment #: DOL M Emergency MORRISTOWN, NJ 07960 (including M DOH Telephone Number Name of Contact justification) ☐ DCA DAN COLLINS Cancellation **FACILITY INFORMATION** Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) DAN COLLINS Subchapter 8 (Other than K-12) Other (Private/Commercial Street Address Bldgs./Homes, etc. 54 SPEEDWELL AVENUE Square Feet # of Floors County (6) County Code (7) City (5) (State use only) **MORRIS** MORRISTOWN Name of Monitoring Firm Hired by Bldg. Owner (8) Name of Abatement Contractor (9) ASCM No. D & S RESTORATION, INC. Street Address Street Address 20 California Ave. City, State, Zip Code City, State, Zip Code Paterson, NJ 07503 Telephone Number Project Manager for Monitoring Firm Phone Number 00159 973-345-8020 Name of OSHA Monitor Sched. Completion Date (11) Start Date (10) D & S Restoration, Inc. Street Address 11/05/11 11/11/11 Occupancy Status During Abatement (Check only one) 20 California Avenue Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Paterson, NJ 07503

Bldg. Age Current Use (Prior if being demolished) License Number Other-Describe: NORMAL HOURS Full Containment w/negative pressure Scope of Work (check all that apply) Mini-enclosure  $\times$  >3 sf or >3 lf Glovebag procedure ≥160 sf or ≥260 lf Demolition Non-Exempted (\*) and Non-friable procedure R Is location normally used solely E E Location of by maintenance/custodial n Amount Description of asbestos-containing n asbestos-containing m staff(12) C (Specify SF or material (ACM) material (acm) to be 0 a LF) abated in facility (13) Yes No N/A p PIPE INSULATION 30 L FT M BASEMENT 35 SQ FT **BOILER INSULATION** BASEMENT BOILER Cubic Yards of Waste Name of Registered Landfill NJDEP Hauler ID# Registered Waste Hauler TULLYTOWN, RESOURCE RECOVERY 13506 1 YD D & S RESTORATION, INC. Disposal Date City, State City, State 11/07/11 TULLYTOWN, PA PATERSON, NJ 07503

Date: 1/ 1 3 1 1/

D & S Restoration, Inc. 20 California Avenue Paterson, N.I 07503

Worksite			s et
Address:	54	Speedwell Ar	M indi
007.003		Of EVALUETT DE	< // WILLIGHTONY.

"- ... Com it ividy Concern:

I am the owner of the above referenced Worksite address. The furnace located in my basement is inoperative and needs to be replaced ASAP in order to heat the house.

The furnace is insulated with asbestos material. The asbestos needs to be removed prior to installation of the new furnace.

I understand that various Federal and State Agencies require written 10-day notification prior to starting any asbestos abatement work, and that it may be possible to start the asbestos abatement work sooner than the 10 day period in the event of an emergency.

Since I currently do not have heat in my house, I feel that the asbestos abatement work should be given immediate attention.

Please accept this letter as a request to commence with asbestos abatement acitivities as soon as possible and upon receiving approval to do so by the applicable Federal and State Agencies having jurisdiction.

If you have any questions or comments, please do not hesitate to contact me at the following telephone number:

Very truly yours,

Printed Name of owner

| On- ( ) | Signature of owner

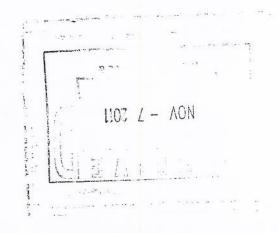


				Fax:		Nov 3 2011 02	2:43pm Pu	<i>3</i> 1/UL	) 1		
سد ایم پر دستان در		Si	tate of NJ								
Das Proj. #: MS 11-446	Notifi	11 45	Achaetas	Abatem	ent	NA Dont of Washin	.augn		7.0	•	
100 Chee Sold	(Pursu	uant to N	JAC 8:60	and 12:	120.)	NJ Dont of Health	& Senior S	ervice	25		
D&S Proj. #: MS 11-446					Die	Na Dept. of Health		20	1		
	Name of Building Ow	ner/Onera	tor (2)			I Trelor	Stures -	A			
pate of Notification (1)		non opera			- I have	Dam 11 6311	Timon	<i>U</i> 1			
1 11 1/10 [3]/[-1-1-1	DANNYSPUB			-		NOV - 7 2	2011				
Agencies Notified Type Notification	Street Address		(TD			1107 / 2	.UII IL.				ä
EPA Initial Amended	54 SPBEDWELL	LAVEN	40								
DEP Amendment #:	City, State, Zlp Code	} 	200			AND CONT	KOL (8		0		i.
DOL Emergency	MORRISTOW	N, NJ 07	300		brown	Telephone Nun	1061	السننية وعدد	ŀ		
ora cou (including	Name of Contact										_
Inattipaso(i)	DAN COLLIN	IS									
☐ DCA ☐ Cancelledon			VFORMATIC	N							-
						Type of Facility (4) School (K	- 12)				
Name of facility where abatement is taking	g płace (3)					Subchapter	8 (Other th	an K-	12)		
						KN Other (Privi	ate/Comme	rcial			
DAN COLLINS						Bldgs./Hon	yes, etc.		ig. A	ge	-
Street Address						Square Feet # of	LICOLE		-0	<b>4</b> 50	
54 SPEEDWELL AVENUE			10	County Cod	ie (7)	Current Usa (Prior	t haing der	olish	ed)		_
City (6).	County (6)		10	State use (	only)	Current Use (Prior	II Dellig don		H.55.53		_
	MORRIS				of Abatement	ontractor (9)	C				
MORRISTOWN	MURRIS (8)	AS	CM Nu.	Name	of Abatement	THOM INC					
Name of Monitoring Firm Hired by Bidg.	Daniel (4)			D8	SRESTOR	(TION, INC.			-		
	THE PARTY OF THE P			1 1	Address	***					
Street Address					California A	/c.		*			
				City, S	State, Zip Code			20-000-0-000			
City, State, Zip Code	3			- Y	aleison, NJ 07	303	icense Nur				
mil 200	Phone	Number	-112	Tele	phone Number 973-345-8020		0015	<u>Q</u>			
Project Manager for Monitoring Firm				Non	ne of OSHA Mor	itor					
THE STATE OF THE S	Eched. Completion	Data (11)	4	I	& S Restora	ion, inc.		- V-10-10-1		-	
Start Date (10)				Stre	et Address						
11/05/11	11/11/11			2	O California A	venuc			-		
During Absterment	Check only one)	nf.		City	State, Zip Cod	e					
		rin.									
Ahatement performed outside of	Homor iv-			<u> </u>	Paterson, NJ	7503	( a mather De	nenti	6		
Describe: NORMAL HO  Other-Describe: NORMAL HO	URS					Full Containment w	Wedana b	GG DW.	1		
Scope of Work (chack all that apply)					12	Mini-enclosure Glovebag procedu	re				
>3 sf or >3 lf	Renovation				Ĭ	Glovebag procedu	and Non-fit	able p	R	dura	
[ ≥ 160 sf or ≥260 lf [ ] [	Demolition						1	8	e l	E	E
	is location normally us by maintenance/cust	agial Seg solely	Donaliti	ion of asbe	estos-containing	Amount (Specify S	SF or	m o	pa	C	C
ashestos-containing	staff(12)		material	(ACM)		LF)		v	1	p	1
material (acm) to be abated in facility (13)	Yes No	N/A						e X	-	m	1
abated in facility (15)	165		PIPE INS	ULATIO	N	30 L FT	1	-	片	片	忻
BASEMENT	X		BOILER	INSULA'	MON	35 SQ FT		X	금	븕	TH
BASEMENT BOILER	X	-	TO IDEA				-		=	H	情
ACC OTTO		-	-					1	1	H	1
			4		1,051				111	1	
		10%	Cubio Yarde	of Wasta	Name of Regist	ered Landfill VN, RESOURCE F	ECOVER	Y			
Registered Waste Hauler	NJDEP Hauler 13506		1 YD		TULLYTOV	AN' KEROOKCE I				-	
D&SRESTORATION, INC.	10000	Disposal	Dato		City, State	WN PA					
City, State	1	11/07/	11		TULLYTO	1111,111	Date			-1	
PATERSON, NJ 07503 Completed by (Print or Type)	Title	1	Signature				11/03	/11	maracas		
TI III IN THE TOTAL	PRESIDENT										

							Selicone	**************************************	Jan.	o energy Services	#4:#45# (1734	-		Transport Miles	esi-esi
r .*					State of New Jersey	ADATEMENT	A total Sec	· [F	~	P	(A)	E3	0		
". No che	ck		TON	Pursua	TION OF ASBESTOS ant to NJAC 8:60-7 and	12:120-7)	2)	$\parallel$		K	وا	15	#	₩-[	5
					Name of Building Ov HESS CORPORATIO	yner/Operator (	4) 3		3						7
te of Notification (1)					Street Address	·	- 1	-H	+	A	OV		7	0044	
8 / 22 /11 encies Notified Type Notific	eation		7.		1 HESS PLAZA		7.000	14	Ц	IN	UV	-	/	2011	
		on			City, State, Zip Code		3	1	$\neg$						
	Notification		1		WOODBRIDGE, NEV	V JERSEY 0709	5	1		ASE	BEST	OS CC	NTE	80L &	ل
I DEI	ellation						Tole	phone	New			BENSI		OL &	
Y DOH X On Ho			COAT	ION	Name of Contact DAVID CERULO		1000	priorie			al wine	un ion	-		
DCA EMER	RGENCY	NOTI	FICAT	ION	FACILITY INFORMAT	ION	The sales		-	-					
nme of Facility Where Abatement is	Taking P	lace	3)		1 AGILITT II II GI III II	Type of Facil	ity (4)								
ime of Pacificy Where Abatement to						School		>4L 4	L V	(12)					
ESS PLAZA						Subcha X Other (i	oter 8 (0	otner to	man N	(-12) I. bidas	., hor	nes, e	tc.)	- 20 04 2	
						Square Fee		of Flo		T		Bld	g. A	ge	
reet Address						187,000		13	-				42		_
HESS PLAZA	nty (6)			T	County Code (7)	Current Use (			demo	lished)					
OODBRIDGE MIDE	DLESEX			1	(STATE USE ONLY)	Name of Aba	temor	Cont	racto	r (9)					
ame of Monitoring Firm Hired by Bu	uilding O	wner	(8)		ASCM No.	PAR ENVIRO	NMEN	TAL CO	ORPC	RATIC	N				
LLMANN ENVIRONMENTAL						Street Addres	s				58.3(5).	1000			
reet Address						313 SPOOK	ROCK		CONTRACT.						
ty, State, Zip Code	**************************************		TC 150			City, State, Z	p Code	DV 40	001						
UNION,	NEW JEF	RSEY	07083			SUFFERN, N		IKK 10	Lice	ense Nu	umbe	r			
roject Manager for Monitoring Firm		1 6785	lephor		nber	845-369-750			460		T-111.16280-0				
IKE NEHLSEN	16		8-377-		Date (11)	Name of OSI		itor			mh=>	CATALITY			
xpected State Date (10)	50	:nea.	5 /	ienon	30/ 12	QUALITY EN	IVIRON	MENT	AL						
Month Day Year		Month	1		Day Year	Street Addres			-						
Decupancy Status During Abatement ( Facility Closed/Vacated Du	Check on	ly one	)			1376 ROUTE									
Demolition >3SF OR LF	XR	enova	tion		X Mini-End X Gloveba					1					
X >160 SF OR					Man Eric										
Location of		1-1-	antion			able Procedure	$\overline{}$		-	T				t Type	5556
Achaetae-containing			cation		Non-Fria  Description of A  Containing Mate	Asbestos-	T	Amo		RE	R	回	m		
Asbestos-containing Material (ACM)		norma sol	illy use ely by	ed	Description of A Containing Mate (ie. Thermal s	Asbestos- erial (ACM) systems		(Spe	cify	REMOV	REPAIR	回	m		
Material (ACM) TO BE ABATED		norma sol vlaint/0	illy use ely by Custod	ed	Description of A Containing Mate (ie. Thermal s insulation, surfa	Asbestos- erial (ACM) systems cing, VAT,			cify	REMOVAL	REPAIR	回	m		
Material (ACM)	N	norma sol vlaint/0	ally use ely by Custod ff (12)	ial	Description of A Containing Mate (ie. Thermal s	Asbestos- erial (ACM) systems cing, VAT,		(Spe	cify	REMOVAL	REPAIR				
Material (ACM) TO BE ABATED	N	norma sol vlaint/0 Sta	ally use ely by Custod ff (12) lo N/	ial	Description of A Containing Mate (ie. Thermal s insulation, surfa or other misce	Asbestos- erial (ACM) systems cing, VAT,		(Spe SF or	cify LF)	EMOVAL	REPAIR	回	m		
Material (ACM) TO BE ABATED in Facility (13)  BRD FLOOR - ENTIRE	N	norma sol vlaint/0 Sta	ally use ely by Custod ff (12) lo N/	ial /A	Description of A Containing Mate (ie. Thermal s insulation, surfa or other misce	Asbestos- erial (ACM) systems cing, VAT,		(Spe	cify LF)	REMOVAL X X	REPAIR	回	m		-
Material (ACM) TO BE ABATED in Facility (13)  3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE	N	norma sol vlaint/0 Sta	ally use ely by Custod ff (12) lo N/	ial /A VA	Description of A Containing Mate (ie. Thermal s insulation, surfa or other misce	Asbestos- erial (ACM) systems cing, VAT,	75 12	(Spe SF or 005 SF LF	cify LF)	EMOVAL X X X	REPAIR	回	m		
Material (ACM) TO BE ABATED in Facility (13)  BRD FLOOR - ENTIRE BRD FLOOR - ENTIRE BRD FLOOR - ENTIRE	N	norma sol vlaint/0 Sta	ally use ely by Custod ff (12) lo N/	ial VA PII	Description of A Containing Mate (ie. Thermal s insulation, surfa or other misce	Asbestos- erial (ACM) systems cing, VAT,	75 12 49	(Spe SF or 005 SF LF 1,180 S	cify LF)	EMOVAL X X X	REPAIR	回	m		
Material (ACM) TO BE ABATED in Facility (13)  BRD FLOOR - ENTIRE	N	norma sol vlaint/0 Sta	ally use ely by Custod ff (12) o N/ X X X X	ial VA PII JC	Description of A Containing Mate (ie. Thermal s insulation, surfa or other misce  AT & MASTIC PE FITTINGS DINT COMPOUND DVE BASE MASTIC AR	Asbestos- erial (ACM) systems cing, VAT,	75 12 49 25	(Spe SF or 005 SF LF 1,180 S SF SF	cify LF)	EMOVAL X X X X X X	REPAIR	回	m		
Material (ACM) TO BE ABATED in Facility (13)  3RD FLOOR - ENTIRE 2ND FLOOR - ENTIRE	N	norma sol vlaint/0 Sta	ally use ely by Custod ff (12) lo N/ X X X X X X X	ial VA PII JC CC TA	Description of A Containing Mate (ie. Thermal s insulation, surfa or other misce  AT & MASTIC PE FITTINGS DINT COMPOUND DIVE BASE MASTIC  AR AT & MASTIC	Asbestos- erial (ACM) systems cing, VAT,	75 12 49 25 8,	(Spe SF or 005 SF LF 1,180 S	cify LF)	X X X X X X X X X	REPAIR	回	m		
Material (ACM) TO BE ABATED in Facility (13)  3RD FLOOR - ENTIRE 2ND FLOOR - ENTIRE 2ND FLOOR - ENTIRE 2ND FLOOR - ENTIRE 2ND FLOOR - ENTIRE	N	norma sol vlaint/0 Sta	ally use ely by Custod ff (12) lo N/ X X X X X X X X	A VA PIII JC	Description of A Containing Mate (ie. Thermal s insulation, surfa or other misce  AT & MASTIC PE FITTINGS DINT COMPOUND DVE BASE MASTIC AR	Asbestos- erial (ACM) systems cing, VAT,	75 12 49 25 8,	(Spe SF or 005 SF LF ,180 S 5 SF 005 SF 2,180 S	LF)	X X X X X X X X X X X X X X X X X X X	REPAIR	回	m		
Material (ACM) TO BE ABATED in Facility (13)  3RD FLOOR - ENTIRE 2ND FLOOR - ENTIRE	N	norma sol vlaint/0 Sta	ally use ely by Custod ff (12) lo N/ X X X X X X X	VA PIII JCC TA CCC TA TA TO	Description of A Containing Mate (ie. Thermal s insulation, surfa or other misce  AT & MASTIC  PE FITTINGS DINT COMPOUND  DOVE BASE MASTIC  AR AT & MASTIC  OVE BASE MASTIC  OVE BASE MASTIC  DINT COMPOUND  AR	able Procedure Asbestos- rial (ACM) systems cing, VAT, Illaneous)	75 12 49 25 8, 49	(Spe SF or 005 SF 1,180 S 5 SF 005 SF 2,180 S 5 SF	LF)	EMOVAL X X X X X X X X X X X X X X X X X X X	REPAIR	回	m		
Material (ACM) TO BE ABATED in Facility (13)  3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE 2ND FLOOR - ENTIRE	N	norma sol vlaint/0 Sta	ally use ety by Custod ff (12) lo N/ X X X X X X X X X X X X X X	VA VA PIII JC CC TA CCC TA CCC TA PIC CCC TA PIC	Description of A Containing Mate (ie. Thermal s insulation, surfa or other misce  AT & MASTIC  PE FITTINGS DINT COMPOUND  DOVE BASE MASTIC  AR AT & MASTIC  OVE BASE MASTIC	able Procedure Asbestos- rial (ACM) systems cing, VAT, Illaneous)	75 12 49 25 8, 49 12 25 33	(Spe SF or 005 SF 1,180 S 5 SF 005 SF 0,180 S 5 SF 3 SF	cify LF)	X X X X X X X X X X X X X X X X X X X	REPAIR	回	m		
Material (ACM) TO BE ABATED in Facility (13)  3RD FLOOR - ENTIRE 2ND FLOOR - ENTIRE	N	norma sol vlaint/0 Sta	ally use ety by Custod ff (12) lo N/ X X X X X X X X X X X X X X X X X X	VA PIII JC CC TA CCC TA CC TA CCC TA CC TA	Description of A Containing Mate (ie. Thermal s insulation, surfa or other misce  AT & MASTIC PE FITTINGS DINT COMPOUND DVE BASE MASTIC AR AT & MASTIC DINT COMPOUND DAR PE FITTINGS INSULA AT & MASTIC	able Procedure Asbestos- rial (ACM) systems cing, VAT, Illaneous)	75 12 49 25 8, 49 12 25 33	(Spe SF or 005 SF 1,180 S 5 SF 005 SF 2,180 S 5 SF	cify LF)	EMOVAL X X X X X X X X X X X X X X X X X X X	REPAIR	回	m		
Material (ACM) TO BE ABATED in Facility (13)  3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE 2ND FLOOR - ENTIRE PLAZA-ENTIRE	N	norma sol vlaint/0 Sta	ally use ely by Custod ff (12) lo N/ X X X X X X X X X X X X X X X X X X	VA	Description of A Containing Mate (ie. Thermal s insulation, surfa or other misce)  AT & MASTIC PE FITTINGS DINT COMPOUND DOVE BASE MASTIC DINT COMPOUND DAR DEFITTINGS INSULA AT & MASTIC DOVE BASE MASTIC DINT COMPOUND DAR DEFITTINGS INSULA DINT COMPOUND DOVE BASE MASTIC DINT COMPOUND	Asbestos- rial (ACM) systems cing, VAT, Illaneous)	75 12 49 25 8, 49 12 25 34 12 44	(Spec SF or	cify LF)	X X X X X X X X X X X X X X X X X X X	REPAIR	回	m		
Material (ACM) TO BE ABATED in Facility (13)  3RD FLOOR - ENTIRE 2ND FLOOR - ENTIRE	N	norma sol vlaint/0 Sta	ally use ety by Custod ff (12) lo N/ X X X X X X X X X X X X X X X X X X	VAPILITATION OF THE PROPERTY O	Description of A Containing Mate (ie. Thermal s insulation, surfa or other misce  AT & MASTIC  PE FITTINGS DINT COMPOUND  DVE BASE MASTIC  DINT COMPOUND  AR  DINT COMPOUND  AR  PE FITTINGS INSULA  AT & MASTIC  OVE BASE MASTIC	Asbestos- rial (ACM) systems cing, VAT, Illaneous)	75 12 49 25 8, 45 12 25 38 12 44 11 7	(Spec SF or	cify LF)	X X X X X X X X X X X X X X X X X X X	REPAIR	回	m		
Material (ACM) TO BE ABATED in Facility (13)  3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE 2ND F	N Y	norma sol vlaint/0 Sta	Lilly useely by Custod ff (12) Custo	VAPIII JCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCC	Description of A Containing Mate (ie. Thermal sinsulation, surfa or other misce)  AT & MASTIC PE FITTINGS DINT COMPOUND DOVE BASE MASTIC OVE BASE MASTIC DINT COMPOUND AR PEFITTINGS INSULA AT & MASTIC OVE BASE MASTIC DINT COMPOUND COUSTICAL PLASTAR	Asbestos- rial (ACM) systems cing, VAT, Illaneous)  ATION	75 12 49 25 8, 45 12 25 33 12 44 11 7	(Spe SF or S	cify LF)	X X X X X X X X X X X X X X X X X X X	REPAIR	回	m		
Material (ACM) TO BE ABATED in Facility (13)  3RD FLOOR - ENTIRE 2ND FLOOR - ENTIRE PLAZA-ENTIRE	N Y	norma sol vlaint/0 Sta	Lilly usee ely by Custod ff (12) Cus	VA	Description of A Containing Mate (ie. Thermal sinsulation, surfa or other misce)  AT & MASTIC PE FITTINGS DINT COMPOUND DOVE BASE MASTIC OVE BASE MASTIC DINT COMPOUND AR PE FITTINGS INSULA AR STATE & MASTIC OVE BASE MASTIC DOVE BASE MASTIC DINT COMPOUND AR INSULA AR	Asbestos- rial (ACM) systems cing, VAT, Illaneous)  ATION	755 122 459 255 8, 459 122 259 333 124 451 117 7	(Spec SF or	cify LF)	X X X X X X X X X X X X X X X X X X X	REPAIR	回	m		
Material (ACM) TO BE ABATED in Facility (13)  3RD FLOOR - ENTIRE 2ND FLOOR - ENTIRE PLAZA-ENTIRE	N Y	norma sol vlaint/0 Sta	In the second se	VA	Description of A Containing Mate (ie. Thermal sinsulation, surfa or other misce)  AT & MASTIC PE FITTINGS DINT COMPOUND DOVE BASE MASTIC DINT COMPOUND DAR AT & MASTIC DINT COMPOUND DAR AT & MASTIC DINT COMPOUND DAR DOVE BASE MASTIC DINT COMPOUND DOVE BASE MASTIC DINT COMPOUND COUSTICAL PLAST AR IPE FITTINGS INSULA DINT COMPOUND COUSTICAL PLAST DIPE FITTINGS INSULA DIPETITINGS INSUL	Asbestos- rial (ACM) systems cing, VAT, llaneous)  ATION	755 122 459 255 8, 451 122 333 113 441 177 221 266 22	(Spe SF or S	cify LF)	X X X X X X X X X X X X X X X X X X X	REPAIR	回	m		
Material (ACM) TO BE ABATED in Facility (13)  3RD FLOOR - ENTIRE 2ND FLOOR - ENTIRE PLAZA-ENTIRE 1ST FLOOR-MECHANICAL ROOM 1ST FLOOR-MECHANICAL ROOM	N Y	norma sol vlaint/0 Sta	In the second se	VA	Description of A Containing Mate (ie. Thermal sinsulation, surfa or other misce)  AT & MASTIC PE FITTINGS DINT COMPOUND DOVE BASE MASTIC OVE BASE MASTIC DINT COMPOUND AR PE FITTINGS INSULA AR STATE & MASTIC OVE BASE MASTIC DOVE BASE MASTIC DINT COMPOUND AR INSULA AR	Asbestos- rial (ACM) systems cing, VAT, llaneous)  ATION	755 122 495 255 8, 495 12 255 334 11 77 22 26 66 22	(Spe SF or SF	cify LF)	X X X X X X X X X X X X X X X X X X X	REPAIR	回	m		
Material (ACM) TO BE ABATED in Facility (13)  3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE 2ND FLOOR - ENTIRE PLAZA-ENTIRE	Y	norma sol vlaint/0 Sta	In the second se	VA	Description of A Containing Mate (ie. Thermal s insulation, surfa or other misce)  AT & MASTIC  PE FITTINGS DINT COMPOUND  DOVE BASE MASTIC  OVE BASE MASTIC  O	Asbestos- rial (ACM) systems cing, VAT, illaneous)  ATION  ER  TION	755 122 489 258 8, 459 122 259 349 117 77 222 22 26 66 22 44	(Spe SF or SF	cify LF)	X X X X X X X X X X X X X X X X X X X	REPAIR	回	m		
Material (ACM) TO BE ABATED in Facility (13)  3RD FLOOR - ENTIRE 2ND FLOOR - ENTIRE PLAZA-ENTIRE 1ST FLOOR-MECHANICAL ROOM	Y	norma sol vlaint/0 Sta	Illy useely by Custodd ff (12)  Custodd ff (12)  XX  XX  XX  XX  XX  XX  XX  XX  XX	VA	Description of A Containing Mate (ie. Thermal s insulation, surfa or other misce)  AT & MASTIC  PE FITTINGS DINT COMPOUND  DOVE BASE MASTIC  OVE BASE MASTIC  O	Asbestos- rial (ACM) systems cing, VAT, illaneous)  ATION  ER  TION	755 122 489 258 8, 485 1225 334 127 77 222 66 224 1144	(Spe SF or SF	cify LF)	X X X X X X X X X X X X X X X X X X X	REPAIR	回	m		
Material (ACM) TO BE ABATED in Facility (13)  3RD FLOOR - ENTIRE 2ND FLOOR - ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE 1ST FLOOR-MECHANICAL ROOM 1ST FLOOR-MECHANICAL ROOM 1ST FLOOR-MECHANICAL ROOM 1ST FLOOR - BOILER ROOM 1ST FLOOR - BOILER ROOM 1ST FLOOR - BOILER ROOM	Y	norma sol vlaint/0 Sta	In the second se	VA	Description of A Containing Mate (ie. Thermal sinsulation, surfa or other misce)  AT & MASTIC  PE FITTINGS DINT COMPOUND  DOVE BASE MASTIC  OVE BASE MASTIC  OV	Asbestos- rial (ACM) systems cing, VAT, illaneous)  ATION  ER  TION	75 12 49 25 8, 45 12 25 33 11 77 22 26 66 22 44 11 44 25 33 45 45 45 45 45 45 45 45 45 45 45 45 45	(Spe SF or S	cify LF)	X X X X X X X X X X X X X X X X X X X	REPAIR	回	m		
Material (ACM) TO BE ABATED in Facility (13)  3RD FLOOR - ENTIRE 2ND FLOOR - ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE 1ST FLOOR-MECHANICAL ROOM 1ST FLOOR-MECHANICAL ROOM 1ST FLOOR - BOILER ROOM	Y	norma sol vlaint/0 Sta	In the second se	VA PIII JCC CC TTA VA CC JCC JCC JCC VA CC CC VC CC VC CC CC CC CC CC CC CC CC	Description of A Containing Mate (ie. Thermal s insulation, surfa or other misce)  AT & MASTIC  PE FITTINGS DINT COMPOUND  DOVE BASE MASTIC  OVE INSULATION  OVE BASE MASTIC  OVE INSULATION  OVER INSULATION  OVE	Asbestos- rial (ACM) systems cing, VAT, illaneous)  ATION  ER  TION	75 12 49 25 8, 45 12 25 33 11 44 17 7 22 2 2 4 4 11 4 4 4 2 5 6 6 6 6 6 6 7 7 7 8 7 8 7 8 7 8 7 8 7 8	(Spe SF or S	cify LF)	X X X X X X X X X X X X X X X X X X X	REPAIR	回	m		
Material (ACM) TO BE ABATED in Facility (13)  3RD FLOOR - ENTIRE 2ND FLOOR - ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE 1ST FLOOR-MECHANICAL ROOM 1ST FLOOR-MECHANICAL ROOM 1ST FLOOR-MECHANICAL ROOM 1ST FLOOR-BOILER ROOM 1ST FLOOR-BOILER ROOM	Y	norma sol vlaint/0 Sta	In the second se	VAPILITATION OF THE PROPERTY O	Description of A Containing Mate (ie. Thermal s insulation, surfa or other misce)  AT & MASTIC  PE FITTINGS DINT COMPOUND  DOVE BASE MASTIC  OVE BASE MASTIC	Asbestos- rial (ACM) systems cing, VAT, illaneous)  ATION  ER  TION	755 122 489 258 8, 449 124 125 127 127 127 127 127 127 127 127 127 127	(Spe SF or S	cify LF)	X X X X X X X X X X X X X X X X X X X	REPAIR	回	m		

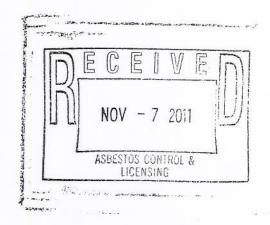
Name of Registered Waste Hauler ,DJM TRANSPORT , LLC		NJDEP Waste Hauler ID No. 26981	Cubic Yards of Waste	Name of Registered Landfill GROWS LANDFILL	
City, State KEARNEY, NEW JERSEY			Disposal Date 6/23/11-05/15/2012	MORRISVILLE, PA	8/27/11
Completed by (Print or Type) BENJAMIN SANCHEZ	Title	e RECTOR OF OPE	RATIONS Signature	<u>y</u> )	0/00/11

V



					ار الله معالمة المعالمة المعالم	برميام شعا با	A STREET	and the second	eiricht t	architecture in the
·			State of New Jersey	BATEMENT	erve (f)					
- Hu check		NOTIFIC (Pur	suant to NJAC 8:60-7 and	12:120-7)	- IP II	i TE	11	14.6	1 = 1	1,000
			Name of Building Ow HESS CORPORATION	ner/Operator (2)				<u>''</u>		
Date of Notification (1)			Street Address		Inil					
10 / 14 /11  Agencies Notified Type Noti	fication		1 HESS PLAZA		111 111 NO	٦V_	- 7	20	1	11/11
Agonolog . Terms			City, State, Zip Code	i i	14 4	01				
DEP Am	al Notification ended Notification		WOODBRIDGE, NEW	8			2 221			
X 100r 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	cellation #0		Name of Contact	9	Telephone Numb	er III	ENSIN	iray. IG		11
	Hold #9 ERGENCY NOTIF	ICATION		3 4	12-150-6-52					
DCA EM	ENGENOTIO		FACILITY INFORMATI	0,,	no and the Property	) . tow-min.jo	Charle high con	***		
Name of Facility Where Abatement	is Taking Place (3	()		Type of Facility						
Name of Facility Where Abatement		<u> </u>		School (K-1		12)				
HESS PLAZA				Subchapter	8 (Other than K- rivate & commcl.	bldas.	, home	s, etc	c.)	
HESS FORE				Square Feet	# of Floors			Bldg	. Age	
Street Address				187,000	13			4	12	
1 HESS PLAZA	1.76		County Code (7)	Current Use (Pri	or if being demolis	shed)	- W			
City (5)	unty (6) DDLESEX		(STATE USE ONLY)	COMMERCIAL C	OFFICE	10:				
WOODBRIDGE MIII Name of Monitoring Firm Hired by		B)	ASCM No.	Name of Abater	ment Contractor	(9) 24TIC	N			
Name of Monitoring Fifth Afred by HILLMANN ENVIRONMENTAL		160	17		MENTAL CORPOR	VIIIC		0.000		
Street Address				Street Address 313 SPOOK RO	CK ROAD					
1600 ROUTE 22				City, State, Zip C	Code					
City State Zin Code	NEW IEDSEY	7083		SUFFERN, NEV	V YORK 10901			-		
UNIO	N, NEW JERSEY	ephone N	Number	Telephone Num	ber Licer	nse Nu	ımber			
Project Manager for Monitoring Firm		3-377-56		845-369-7500	460				-	
MIKE NEHLSEN Expected State Date (10)			on Date (11)	Name of OSHA	Monitor					
6 / 23 / /1	1	5 /	30/ 12	QUALITY ENVI	KONMENTAL					
Month Day Year			Day Year	Street Address						
Occupancy Status During Abatemen	t (Check only one)	d of Ahai	tement	1376 ROUTE 9	W					
	utcide of Normal F	acility mu	urs - Describe.			-				
X Other - Describe: M	ION FRI. 6 PM -	2:30 AM	SAT. & SUN 7AM-3:30PM	City, State, Zip	WAPPINGERS	FALI	S, NY	1259	0	
Cinci Description				l tainment with Nega						
Scope of Work (Check all that apply	)	ina	Mini-Enc							
Demolition	X Renovat	ion		g Procedure						
>3SF OR LF × >160 SF OR				ble Procedure		T	Δ	hate	ment	Туре
X >160 SF OR		cation	Description of A	Asbestos-	Amount	R				1
Asbestos-containing		lly used	Containing Mate (ie. Thermal s	systems	(Specify	REMO	REPAI	ENCAP	ENCLO	
Material (ACM)		ly by Sustodial		cing, VAT,	SF or LF)	100	Ŕ	PSI	SS	
TO BE ABATED		f (12)	or other misce	llaneous)		1		SULE	SURE	
in Facility (13)	Yes N	o N/A				+	1			
					8,005 SF	x				
3RD FLOOR - ENTIRE		X	VAT & MASTIC PIPE FITTINGS		75 LF	X				
3RD FLOOR - ENTIRE		X	JOINT COMPOUND		12,180 SF	Х	-	-	-	
3RD FLOOR - ENTIRE	-++	- x	COVE BASE MASTIC		495 SF	X	-	-	-	
3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE		X	TAR		25 SF 8.005 SF	X	-	1	+	
2ND FLOOR- ENTIRE		X	VAT & MASTIC		495 SF	x	1			
2ND FLOOR- ENTIRE		X	JOINT COMPOUND		12,180 SF	X				
2ND FLOOR- ENTIRE		X	TAR		25 SF	Х				
2ND FLOOR- ENTIRE		X	PIPE FITTINGS INSULA	ATION	380 LF	X	-	-	+	
2ND FLOOR- ENTIRE		X	VAT & MASTIC		12,425 SF	X	-	+	+	
PLAZA-ENTIRE PLAZA-ENTIRE	-++	Х	COVE BASE MASTIC		495 SF 18.820 SF	X	-	+	1	
PLAZA-ENTIRE PLAZA-ENTIRE		Х	JOINT COMPOUND	FD	7,275 SF	X			T	
PLAZA-ENTIRE		X	ACCOUSTICAL PLAST	LK	25 SF	X				
PLAZA-ENTIRE		X	PIPE FITTINGS INSULA	TION	200 LF	X	-	-	+	
PLAZA-ENTIRE	NA I	- x	DUCT INSULATION		665 SF	X	+-	+	+	
1ST FLOOR-MECHANICAL ROO 1ST FLOOR-MECHANICAL ROO	M	X_	PIPE FITTINGS INSULA	TION	207 LF	X	+	+	+	
1ST FLOOR-MECHANICAL ROO	М	Х	VIBRATION CLOTH		4 SF	x	+			
1ST FLOOR-MECHANICAL ROO	М	X	GASKETS PIPE FITTINGS INSULA	TION	45 LF	X		I		
1ST FLOOR -BOILER ROOM		X	DUCT INSULATION		240 SF	X			1	
1ST FLOOR-BOILER ROOM		X	VAT & MASTIC		3,000 SF	X	-	-	-	
1ST FLOOR - CAFETERIA		X	JOINT COMPOUND		5,700 SF	X	-	+	-	
1ST FLOOR- CAFETERIA 1ST FLOOR - CAFETERIA		X	COVE BASE MASTIC		175 SF 25 LF	X	-	+	-	
1ST FLOOR - CAFETERIA		Х	PIPE INSULATION		770 SF	X		I		
		The state of the s	and the street of the street o		TATE OF THE PARTY	10000		-	- N 10 CO CO	

ds of Waste Name of R ROWS L Date City, State 5/15/2012 MCRRISV Signature	ANDFILL  JLŁE, PA	Date /	0/14/11
1 GROWS L	ANDFILL		
Name of P	egistered Landfill		
		X	
		$\frac{x}{x}$	
	INGS INGS STIC	STIC 300 SF	NGS 13 LF X   X   X   X   X   X   X   X   X   X



State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) HESS CORPORATION Date of Notification (1) Street Address /11 1 HESS PLAZA Type Notification Agencies Notified City, State, Zip Code NOV - 72011 Initial Notification EPA WOODBRIDGE, NEW JERSEY 07095 Amended Notification #8 DEP DOL Cancellation X Telephone Number Name of Contact On Hold DOH ASBESTOS CONTROL & DAVID CERULO EMERGENCY NOTIFICATION DCA LICENSING FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Subchapter 8 (Other than K-12) HESS PLAZA Other (ie. private & commcl. bldgs., homes, etc.) Bldg. Age # of Floors Square Feet Street Address 42 187,000 1 HESS PLAZA Current Use (Prior if being demolished) County Code (7) County (6) City (5) COMMERCIAL OFFICE (STATE USE ONLY) MIDDLESEX WOODBRIDGE Name of Abatement Contractor (9) ASCM No. Name of Monitoring Firm Hired by Building Owner (8) PAR ENVIRONMENTAL CORPORATION 17 HILLMANN ENVIRONMENTAL Street Address Street Address 313 SPOOK ROCK ROAD 1600 ROUTE 22 City, State, Zip Code City, State, Zip Code SUFFERN, NEW YORK 10901 UNION, NEW JERSEY 07083 License Number Telephone Number Telephone Number Project Manager for Monitoring Firm 460 845-369-7500 908-377-5644 MIKE NEHLSEN Name of OSHA Monitor Sched. Completion Date (11) Expected State Date (10) QUALITY ENVIRONMENTAL 12 30/ 5/ 23 / 6/ Year Day Day Year Month Month Street Address Occupancy Status During Abatement (Check only one) 1376 ROUTE 9 W Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe: City, State, Zip Code MON. - FRI. 6 PM - 2:30 AM SAT. & SUN 7AM-3:30PM WAPPINGERS FALLS, NY 12590 Full Containment with Negative Pressure Scope of Work (Check all that apply) Mini-Enclo:, Renovation Demolition Glovebag Procedure >3SF OR LF Non-Friable Procedure >160 SF OR Abatement Type Description of Asbestos-Is Location Location of Amount ENCLOS ENCAPSULE Containing Material (ACM) normally used REMOVAL Asbestos-containing (Specify (ie. Thermal systems solely by Material (ACM) insulation, surfacing, VAT, SF or LF) Maint/Custodial TO BE ABATED or other miscellaneous) Staff (12) RE in Facility (13) Yes No N/A 8,005 SF VAT & MASTIC 3RD FLOOR - ENTIRE 75 LF X PIPE FITTINGS 3RD FLOOR - ENTIRE 12,180 SF X X JOINT COMPOUND 3RD FLOOR - ENTIRE 495 SF COVE BASE MASTIC X 3RD FLOOR - ENTIRE 25 SF X TAR X 3RD FLOOR - ENTIRE 8,005 SF X VAT & MASTIC X 2ND FLOOR- ENTIRE 495 SF X COVE BASE MASTIC 2ND FLOOR- ENTIRE 12,180 SF X JOINT COMPOUND 2ND FLOOR- ENTIRE 25 SF X 2ND FLOOR- ENTIRE PIPE FITTINGS INSULATION X 380 LF 2ND FLOOR- ENTIRE 12,425 SF X VAT & MASTIC X PLAZA-ENTIRE 495 SF X COVE BASE MASTIC X PLAZA-ENTIRE JOINT COMPOUND 18,820 SF X PLAZA-ENTIRE 7,275 SF X ACCOUSTICAL PLASTER X PLAZA-ENTIRE 25 SF X PLAZA-ENTIRE X PIPE FITTINGS INSULATION 200 LF X PLAZA-ENTIRE 665 SF X DUCT INSULATION X 1ST FLOOR-MECHANICAL ROOM PIPE FITTINGS INSULATION 207 LF X X 1ST FLOOR-MECHANICAL ROOM X 4 SF VIBRATION CLOTH 1ST FLOOR-MECHANICAL ROOM X 10 SF X GASKETS X 1ST FLOOR-MECHANICAL ROOM PIPE FITTINGS INSULATION 45 LF X X 1ST FLOOR -BOILER ROOM 240 SF X DUCT INSULATION 1ST FLOOR-BOILER ROOM X X 3,000 SF VAT & MASTIC X 1ST FLOOR - CAFETERIA JOINT COMPOUND 5,700 SF X 1ST FLOOR- CAFETERIA 175 SF X COVE BASE MASTIC 1ST FLOOR - CAFETERIA 25 LF X PIPE INSULATION 1ST FLOOR - CAFETERIA

DUCT INSULATION

13TH FLOOR - MER ROOM

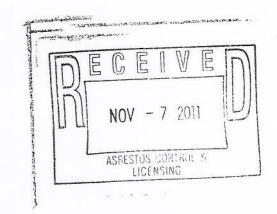
770 SF

Completed by (Print or Type) BENJAMIN SANCHEZ	Title		R OF OPE	RATIONS	010			1/ 3	-g "1
City, State KEARNEY, NEW JERSEY	ty, State EARNEY, NEW JERSEY				MORRISVILL		Date	9/	20/11
Name of Registered Waste Hauler DJM TRANSPORT , LLC	=	Haule	P Waste er ID No. 26981	Cubic Yards of Waste  1  Disposal Date	GROWS LAN	istered Landfill IDFILL			
1ST FLOOR STORAGE ROOM		-		VAI dimens					
1ST FLOOR STORAGE ROOM		-		VAT & MASTIC		300 SF	X		
1ST FLOOR HALLWAY		-		PIPE FITTINGS		13 LF	X		
4			TV	PIPE FITTINGS		20 LF	X		



					3.3	Arren	, ra,	· epes	refere	=110 <del>=</del> 120	Takana Maria
			State of New Jer	sey	F	7 周	商	HS	fi	n n	TES PARKE
" No chede		NOTIFIC (Pur	CATION OF ASBESTO suant to NJAC 8:60-7	and 12:120-7)		見	G	里		<u>W</u> _	III I
			Name of Building HESS CORPORAT	Owner/Operator (2)		1					
ate of Notification (1)			Street Address	1011			WOV	/ <u>=</u>	7	201	
9 / 26 /11  pencies Notified Type Notificati	ion		1 HESS PLAZA				NOV		-	201	2000
Jones 1 7	otification		City, State, Zip Coo	de	5.	1_	00604		-		
	d Notification	#7	WOODBRIDGE, N	IEW JERSEY 07095	i	7	4325		TINITS	HOLG	&
X DOL Cancella			Name of Contact		Telephoni	Namb	er				
X DOH On Hold	ENCY NOTIFI	CATION			732 760 0	152		-	<b>3</b> 34 14	ar baya	rada, terras,
			FACILITY INFORM	Type of Facility	· ///	w : M := 10 A	• •		3 ,4 19	-	Val. () (3
ame of Facility Where Abatement is Ta	iking Place (3	)		School (K							
				Subchapte	er 8 (Other	than K-	12)	hom	oc ot	٠)	
IESS PLAZA				X Other (ie. Square Feet	private & co		blags.,	nom	Bldg	. Age	,
treet Address				187,000	13		ì		4	42	
HESS PLAZA   County	(6)	T	County Code (7)	Current Use (Pr	rior if being	demolis	shed)				
VOODBRIDGE MIDDLE	ESEX		(STATE USE ONLY		OFFICE	ractor	(9)				
lame of Monitoring Firm Hired by Build	ding Owner (8	3)	ASCM No	PAR ENVIRON	MENTAL C	ORPOR	RATIO	٧			
HILLMANN ENVIRONMENTAL	115.77			Street Address							
Street Address 600 ROUTE 22				313 SPOOK RO			-				
Shy State Zin Code		7003		City, State, Zip SUFFERN, NE	W YORK 1	0901					
UNION, NE	EW JERSEY 0	7083 ephone N	Number	Telephone Nur		Licen	se Nu	nber	S.7.198_9		
Project Manager for Monitoring Firm	908	-377-564	14	845-369-7500		460					
Expected State Date (10)			on Date (11)	Name of OSHA QUALITY ENV	Nonitor	AL					
6 / 23 / /11	3	5 /	· · · · · · · · · · · · · · · · · · ·	N 2/4						and the same	
_	Month		Day Ye	ar							
Month Day Year	Month neck only one)		Day	Street Address							
Month Day Year  Occupancy Status During Abatement (Ch Facility Closed/Vacated Durin Abatement Performed Outsid X Other - Describe: MON.  Scope of Work (Check all that apply)	neck only one) ng Entire Period e of Normal Fa - FRI. 6:00 PM	acility Ho 1 - 2:30 A	tement surs - Describe: M Full C	Street Address 1376 ROUTE ! City, State, Zip Containment with Neg Enclo:	9 W Code WAPPI		FALL	S, NY	1259	10	
Month Day Year  Occupancy Status During Abatement (Ch Facility Closed/Vacated Durin Abatement Performed Outsid X Other - Describe: MON.  Scope of Work (Check all that apply) Demolition 33F OR LF X >160 SF OR	neck only one) ng Entire Period e of Normal Fe - FRI. 6:00 PM	on	tement surs - Describe: M Full C Mini- X Glov Non-	Street Address 1376 ROUTE ! City, State, Zip Containment with Nec	9 W Code WAPP! gative Press	sure	T		Abate	ment	Type
Month Day Year  Occupancy Status During Abatement (Ch Facility Closed/Vacated Durin Abatement Performed Outsid X Other - Describe: MON.  Scope of Work (Check all that apply) Demolition >3SF OR LF	neck only one) ng Entire Period e of Normal Fa - FRI. 6:00 PM  X Renovati  Is Loc normall	on eation by used	tement burs - Describe: WM  Full C Mini- X Glov Non- Description Containing N	Street Address 1376 ROUTE !  City, State, Zip  Containment with Neg Enclor, ebag Procedure Friable Procedure of Asbestos- faterial (ACM)	9 W O Code WAPP! gative Press		77		Abatei I m	ment	Туре
Month Day Year  Occupancy Status During Abatement (Ch Facility Closed/Vacated Durin Abatement Performed Outsid: X Other - Describe: MON.  Scope of Work (Check all that apply) Demolition >3SF OR LF X >160 SF OR Location of Asbestos-containing Material (ACM)	leck only one) ag Entire Period e of Normal Fa - FRI. 6:00 PM  X Renovati  Is Loc normall solel	on eation by used by by	tement ours - Describe:  M Full C Mini- X Glov Non- Description Containing N (ie. Therm insulation, st	Street Address 1376 ROUTE !  City, State, Zip  Containment with Neg Enclor, Enclor, Friable Procedure Friable Procedure of Asbestos- laterial (ACM) all systems urfacing, VAT,	9 W O Code WAPPI gative Press	ount	77		Abatei I m	ment	Туре
Month Day Year  Occupancy Status During Abatement (Ch Facility Closed/Vacated Durin Abatement Performed Outsid X Other - Describe: MON.  Scope of Work (Check all that apply) Demolition >3SF OR LF X >160 SF OR  Location of Asbestos-containing	leck only one)  log Entire Period  e of Normal Fa  - FRI. 6:00 PM  X Renovati  Is Loc normall solel Maint/C: Staff	on  action by used by by ustodial (12)	tement ours - Describe:  M Full C Mini- X Glov Non- Description Containing N (ie. Therm insulation, st	Street Address 1376 ROUTE ! City, State, Zip Containment with Neg Enclor, ebag Procedure Friable Procedure of Asbestos- laterial (ACM) nal systems	9 W O Code WAPPI gative Press	ount ecify	T		Abate	ment	Туре
Month Day Year  Occupancy Status During Abatement (Ch Facility Closed/Vacated Durin Abatement Performed Outsid: X Other - Describe: MON.  Scope of Work (Check all that apply) Demolition >3SF OR LF X >160 SF OR Location of Asbestos-containing Material (ACM) TO BE ABATED	leck only one) ag Entire Period e of Normal Fa - FRI. 6:00 PM  X Renovati  Is Loc normall solel Maint/Ci	on  action by used by by ustodial (12)	tement ours - Describe:  M Full C Mini- X Glov Non- Description Containing N (ie. Therm insulation, st	Street Address 1376 ROUTE !  City, State, Zip  Containment with Neg Enclor, Enclor, Friable Procedure Friable Procedure of Asbestos- laterial (ACM) all systems urfacing, VAT,	O Code WAPPI gative Press	ount ecify r LF)	REMOVAL		Abatei I m	ment	Туре
Month Day Year Occupancy Status During Abatement (Ch Facility Closed/Vacated Durin Abatement Performed Outsid X Other - Describe: MON. Scope of Work (Check all that apply) Demolition >3SF OR LF X >160 SF OR Location of Asbestos-containing Material (ACM) TO BE ABATED in Facility (13)	leck only one)  log Entire Period  e of Normal Fa  - FRI. 6:00 PM  X Renovati  Is Loc normall solel Maint/C: Staff	on action by used by by ustodial (12) N/A	Full C Mini- X Glov Non- Description Containing N (ie. Therm insulation, st or other min	Street Address 1376 ROUTE !  City, State, Zip  Containment with Neg Enclor, Enclor, Friable Procedure Friable Procedure of Asbestos- laterial (ACM) all systems urfacing, VAT,	O Code WAPPI gative Press	ount ecify r LF)	REMOVAL X		Abatei I m	ment	Туре
Month Day Year  Decupancy Status During Abatement (Ch Facility Closed/Vacated Durin Abatement Performed Outsid X Other - Describe: MON.  Scope of Work (Check all that apply) Demolition >3SF OR LF X >160 SF OR Location of Asbestos-containing Material (ACM) TO BE ABATED in Facility (13)  3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE	leck only one)  log Entire Period  e of Normal Fa  - FRI. 6:00 PM  X Renovati  Is Loc normall solel Maint/C: Staff	on  action by used by by ustodial (12)  N/A  X  X	rement  Surs - Describe:  Surs - Describe:  Mini-  X Glov  Non-  Description  Containing N  (ie. Therm insulation, st or other minulation, st or other minulation)  VAT & MASTIC  PIPE FITTINGS	Street Address 1376 ROUTE !  City, State, Zip  Containment with Neg Enclor, Enclor, Friable Procedure Friable Procedure of Asbestos- laterial (ACM) all systems urfacing, VAT,	O Code WAPPI gative Press	ount ecify r LF)	REMOVAL X X		Abatei	ment	Туре
Month Day Year  Occupancy Status During Abatement (Ch Facility Closed/Vacated Durin Abatement Performed Outsid X Other - Describe: MON.  Scope of Work (Check all that apply) Demolition >3SF OR LF X >160 SF OR Location of Asbestos-containing Material (ACM) TO BE ABATED in Facility (13)  3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE	leck only one)  log Entire Period  e of Normal Fa  - FRI. 6:00 PM  X Renovati  Is Loc normall solel Maint/C: Staff	on action by used by by ustodial (12) N/A	Full C Mini- X Glov Non- Description Containing N (ie. Therm insulation, st or other min	Street Address 1376 ROUTE !  City, State, Zip  Containment with Neg Enclor , ebag Procedure Friable Procedure of Asbestos- faterial (ACM) mal systems urfacing, VAT, scellaneous)	O Code WAPPI gative Press  Am (Sp SF company)  8,005 S 75 LF 12,180 495 SF	ount ecify r LF)	REMOVAL X X X X		Abatei	ment	Туре
Month Day Year  Occupancy Status During Abatement (Ch Facility Closed/Vacated Durin Abatement Performed Outsid X Other - Describe: MON.  Scope of Work (Check all that apply) Demolition >3SF OR LF X >160 SF OR Location of Asbestos-containing Material (ACM) TO BE ABATED in Facility (13)  3RD FLOOR - ENTIRE	leck only one)  log Entire Period  e of Normal Fa  - FRI. 6:00 PM  X Renovati  Is Loc normall solel Maint/C: Staff	on  action by used by by ustodial (12)  N/A  X  X  X	TAR  Tell Cover BASE MASTIC TOTAL TAR	Street Address 1376 ROUTE !  City, State, Zip  Containment with Neg Enclor , ebag Procedure Friable Procedure of Asbestos- faterial (ACM) mal systems urfacing, VAT, scellaneous)	O Code WAPPI gative Press  Am (Sp SF co  8,005 S 75 LF 12,180 495 SF	ount ecify r LF)	REMOVAL X X		Abatei	ment	Туре
Month Day Year Occupancy Status During Abatement (Ch Facility Closed/Vacated Durin Abatement Performed Outsid: X Other - Describe: MON. Scope of Work (Check all that apply) Demolition >3SF OR LF X >160 SF OR Location of Asbestos-containing Material (ACM) TO BE ABATED in Facility (13)  3RD FLOOR - ENTIRE	leck only one)  log Entire Period  e of Normal Fa  - FRI. 6:00 PM  X Renovati  Is Loc normall solel Maint/C: Staff	on  action by used by by ustodial (12)  N/A  X  X  X  X	lement lours - Describe:  WM  Full (  Mini-  X Glov  Non-  Description  Containing N  (ie. Therm insulation, so or other minimal or other mini	Street Address 1376 ROUTE !  City, State, Zip  Containment with Neg Enclor , ebag Procedure Friable Procedure of Asbestos- taterial (ACM) hal systems urfacing, VAT, scellaneous)	O Code WAPPI gative Press  Am (Sp SF co  8,005 S 75 LF 12,180 495 SF 8,005 S 495 SF	ount ecify r LF)	REMOVAL X X X X X X X X X X X X X X X X X X X		Abatei	ment	Туре
Month Day Year Occupancy Status During Abatement (Ch Facility Closed/Vacated Durin Abatement Performed Outsid X Other - Describe: MON. Scope of Work (Check all that apply) Demolition >3SF OR LF X >160 SF OR Location of Asbestos-containing Material (ACM) TO BE ABATED in Facility (13)  3RD FLOOR - ENTIRE 2ND FLOOR - ENTIRE	leck only one)  log Entire Period  e of Normal Fa  - FRI. 6:00 PM  X Renovati  Is Loc normall solel Maint/C: Staff	on  action by used by by ustodial (12)  N/A  X  X  X	TAR  Tell Cover BASE MASTIC TOTAL TAR	Street Address 1376 ROUTE !  City, State, Zip  Containment with Neg Enclor , ebag Procedure Friable Procedure of Asbestos- taterial (ACM) hal systems urfacing, VAT, scellaneous)	Am (Sp SF c 8,005 S 75 LF 12,180 495 SF 25 SF 8,005 S 495 SF	ount ecify r LF)	REMOVAL X X X X X X X X X X X X X X X X X X X		Abatei	ment	Туре
Month Day Year  Occupancy Status During Abatement (Ch Facility Closed/Vacated Durin Abatement Performed Outsid X Other - Describe: MON.  Scope of Work (Check all that apply) Demolition >3SF OR LF X >160 SF OR Location of Asbestos-containing Material (ACM) TO BE ABATED in Facility (13)  3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE 2ND FLOOR - ENTIRE	leck only one)  log Entire Period  e of Normal Fa  - FRI. 6:00 PM  X Renovati  Is Loc normall solel Maint/C: Staff	on  action by used by by ustodial (12)  N/A  X  X  X  X  X  X	TAR  VAT & MASTIC  PIPE FITTINGS  JOINT COMPOUND  COVE BASE MASTIC  JOINT COMPOUND  TAR	Street Address 1376 ROUTE !  City, State, Zip  Containment with Neg Enclor, ebag Procedure Friable Procedure of Asbestos- laterial (ACM) all systems urfacing, VAT, scellaneous)	O Code WAPPI gative Press  Am (Sp SF co  8,005 S 75 LF 12,180 495 SF 8,005 S 495 SF	ount ecify r LF)	REMOVAL X X X X X X X X X X X X X X X X X X X		Abatei	ment	Type
Month Day Year Occupancy Status During Abatement (Ch Facility Closed/Vacated Durin Abatement Performed Outsid X Other - Describe: MON.  Scope of Work (Check all that apply) Demolition >3SF OR LF X >160 SF OR  Location of Asbestos-containing Material (ACM) TO BE ABATED in Facility (13)  3RD FLOOR - ENTIRE 2ND FLOOR - ENTIRE	leck only one)  log Entire Period  e of Normal Fa  - FRI. 6:00 PM  X Renovati  Is Loc normall solel Maint/C: Staff	on  action by used by by ustodial (12)  N/A  X  X  X  X  X  X  X	TAR  VAT & MASTIC  PIPE FITTINGS  JOINT COMPOUND  COVE BASE MASTIC  JOINT COMPOUND  TAR  PIPE FITTINGS INSI	Street Address 1376 ROUTE !  City, State, Zip  Containment with Neg Enclor, ebag Procedure Friable Procedure of Asbestos- laterial (ACM) all systems urfacing, VAT, scellaneous)	9 W  O Code WAPPI gative Press  Am (Sp SF c)  8,005 S 75 LF 12,180 495 SF 8,005 S 495 SF 12,180 25 SF 12,180 25 SF 12,180 12,425	ount ecify r LF)  F  SF  SF	REMOVAL X X X X X X X X X X X X X X X X X X X		Abatei	ment	Туре
Month Day Year Occupancy Status During Abatement (Ch Facility Closed/Vacated Durin Abatement Performed Outsid X Other - Describe: MON.  Scope of Work (Check all that apply) Demolition >3SF OR LF X >160 SF OR  Location of Asbestos-containing Material (ACM) TO BE ABATED in Facility (13)  3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE 2ND FLOOR - ENTIRE	leck only one)  log Entire Period  e of Normal Fa  - FRI. 6:00 PM  X Renovati  Is Loc normall solel Maint/C: Staff	on  action by used by by ustodial (12)  N/A  X  X  X  X  X  X	TAR VAT & MASTIC COVE BASE MASTIC JOINT COMPOUND TAR VAT & MASTIC COVE BASE MASTIC	Street Address 1376 ROUTE !  City, State, Zip  Containment with Neg  Enclor, ebag Procedure  Friable Procedure  of Asbestos- laterial (ACM) hal systems  urfacing, VAT, scellaneous)	9 W  O Code WAPPI gative Press  Am (Sp SF c)  8,005 S 75 LF 12,180 495 SF 8,005 S 495 SF 12,180 25 SF 12,180 25 SF 12,180 495 SF	ount ecify r LF)  F  SF  SF	REMOVAL X X X X X X X X X X X X X X X X X X X		Abatei	ment	Туре
Month Day Year  Occupancy Status During Abatement (Ch Facility Closed/Vacated Durin Abatement Performed Outsid: X Other - Describe: MON.  Scope of Work (Check all that apply) Demolition >3SF OR LF X >160 SF OR Location of Asbestos-containing Material (ACM) TO BE ABATED in Facility (13)  3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE 2ND FLOOR - ENTIRE	leck only one)  log Entire Period  e of Normal Fa  - FRI. 6:00 PM  X Renovati  Is Loc normall solel Maint/C: Staff	on sation by used by by sustodial (12) by N/A X X X X X X X X X X X X X X X X X X X	TAR VAT & MASTIC COVE BASE MASTIC JOINT COMPOUND TAR PIPE FITTINGS INSI VAT & MASTIC COVE BASE MASTIC COVE BASE MASTIC COVE BASE MASTIC JOINT COMPOUND TAR PIPE FITTINGS INSI VAT & MASTIC COVE BASE MASTIC COVE BASE MASTIC	Street Address 1376 ROUTE !  City, State, Zip  Containment with Neg  Enclor, ebag Procedure  Friable Procedure  of Asbestos- daterial (ACM) hal systems urfacing, VAT, scellaneous)	9 W  O Code WAPPI gative Press  Am (Sp SF c)  8,005 S 75 LF 12,180 495 SF 8,005 S 495 SF 12,180 25 SF 12,180 25 SF 12,180 12,425	ount ecify r LF)  F  SF  SF  SF	REMOVAL X X X X X X X X X X X X X X X X X X X		Abatei	ment	Type
Month Day Year  Decupancy Status During Abatement (Ch Facility Closed/Vacated Durin Abatement Performed Outsid: X Other - Describe: MON.  Scope of Work (Check all that apply) Demolition >3SF OR LF X >160 SF OR  Location of Asbestos-containing Material (ACM) TO BE ABATED in Facility (13)  3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE 2ND FLOOR - ENTIRE	leck only one)  log Entire Period  e of Normal Fa  - FRI. 6:00 PM  X Renovati  Is Loc normall solel Maint/C: Staff	on sation by used by by sustodial (12) by N/A X X X X X X X X X X X X X X X X X X X	TAR  VAT & MASTIC PIPE FITTINGS JOINT COMPOUND TAR PIPE FITTINGS INSI VAT & MASTIC COVE BASE MASTIC JOINT COMPOUND TAR PIPE FITTINGS INSI VAT & MASTIC COVE BASE MASTIC JOINT COMPOUND TAR PIPE FITTINGS INSI VAT & MASTIC COVE BASE MASTIC JOINT COMPOUND TAR PIPE FITTINGS INSI VAT & MASTIC COVE BASE MASTIC JOINT COMPOUND TAR PIPE FITTINGS INSI VAT & MASTIC COVE BASE MASTIC JOINT COMPOUND ACCOUSTICAL PL	Street Address 1376 ROUTE !  City, State, Zip  Containment with Neg Enclo: , ebag Procedure Friable Procedure of Asbestos- daterial (ACM) mal systems urfacing, VAT, scellaneous)  ULATION  CASTER	9 W  O Code WAPPl gative Press  Am (Sp SF c)  8,005 S 75 LF 12,180 495 SF 25 SF 12,180 25 SF 12,180 25 SF 12,180 25 SF 12,25 495 SF 18,820 7,275 S 25 SF	sure  pount ecify r LF)  F  SF  SF  SF	REMOVAL X X X X X X X X X X X X X X X X X X X		Abatei	ment	Type
Month Day Year  Docupancy Status During Abatement (Checupancy Status During Abatement (Checupancy Status During Abatement (Checupancy Status During Abatement (Checupancy Status During Abatement Performed Outside X Other - Describe: MON.  Scope of Work (Check all that apply)  Demolition 335F OR LF 1616 X 160 SF OR 1616 X 160 SF	leck only one)  log Entire Period  e of Normal Fa  - FRI. 6:00 PM  X Renovati  Is Loc normall solel Maint/C: Staff	on sation by used by by sustodial (12) by N/A X X X X X X X X X X X X X X X X X X X	TAR PIPE FITTINGS INSI  VAT & MASTIC COVE BASE MASTIC JOINT COMPOUND TAR PIPE FITTINGS INSI VAT & MASTIC PIPE FITTINGS INSI VAT & MASTIC COVE BASE MASTIC JOINT COMPOUND TAR PIPE FITTINGS INSI VAT & MASTIC COVE BASE MASTIC JOINT COMPOUND TAR PIPE FITTINGS INSI VAT & MASTIC COVE BASE MASTIC JOINT COMPOUND TAR PIPE FITTINGS INSI VAT & MASTIC COVE BASE MASTIC JOINT COMPOUND ACCOUSTICAL PL TAR PIPE FITTINGS INSI	Street Address 1376 ROUTE !  City, State, Zip  Containment with Neg Enclo: , ebag Procedure Friable Procedure of Asbestos- daterial (ACM) mal systems urfacing, VAT, scellaneous)  ULATION  CASTER	9 W  O Code WAPPl gative Press  Am (Sp SF co  8,005 S 75 LF 12,180 495 SF 25 SF 8,005 S 12,180 25 SF 12,180 25 SF 12,180 25 SF 18,820 7,275 S 25 SF 200 LF	ount ecify r LF)  F  SF  SF  SF	REMOVAL X X X X X X X X X X X X X X X X X X X		Abatei I m	ment	Type
Month Day Year  Occupancy Status During Abatement (Ch Facility Closed/Vacated Durin Abatement Performed Outsid: X Other - Describe: MON.  Scope of Work (Check all that apply) Demolition >3SF OR LF X >160 SF OR Location of Asbestos-containing Material (ACM) TO BE ABATED in Facility (13)  3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE 2ND FLOOR - ENTIRE 3ND FLOOR	leck only one)  log Entire Period  e of Normal Fa  - FRI. 6:00 PM  X Renovati  Is Loc normall solel Maint/C: Staff	on sation by used by by sustodial (12) N/A X X X X X X X X X X X X X X X X X X X	TAR  VAT & MASTIC PIPE FITTINGS JOINT COMPOUND TAR PIPE FITTINGS INSI VAT & MASTIC COVE BASE MASTIC JOINT COMPOUND TAR PIPE FITTINGS INSI VAT & MASTIC COVE BASE MASTIC JOINT COMPOUND TAR PIPE FITTINGS INSI VAT & MASTIC COVE BASE MASTIC COVE BASE MASTIC LOUNT COMPOUND TAR PIPE FITTINGS INSI VAT & MASTIC COVE BASE MASTIC COVE BASE MASTIC LOUNT COMPOUND TAR PIPE FITTINGS INSI LOUNT COMPOUND ACCOUSTICAL PLI TAR PIPE FITTINGS INSI DUCT INSULATION	Street Address 1376 ROUTE !  City, State, Zip  Containment with Neg Enclor , ebag Procedure Friable Procedure of Asbestos- faterial (ACM) mal systems urfacing, VAT, scellaneous)  ULATION  CASTER  JLATION	9 W  O Code WAPPl gative Press  Am (Sp SF c)  8,005 S 75 LF 12,180 495 SF 25 SF 12,180 25 SF 12,180 25 SF 12,180 25 SF 12,25 495 SF 18,820 7,275 S 25 SF	ount ecify r LF)  F  SF  SF  SF	REMOVAL X X X X X X X X X X X X X X X X X X X		Abatei I m	ment	Туре
Month Day Year  Occupancy Status During Abatement (Ch Facility Closed/Vacated Durin Abatement Performed Outsid: X Other - Describe: MON.  Scope of Work (Check all that apply) Demolition >3SF OR LF X >160 SF OR Location of Asbestos-containing Material (ACM) TO BE ABATED in Facility (13)  3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE 2ND FLOOR - ENTIRE 3ND FLOOR	leck only one)  log Entire Period  e of Normal Fa  - FRI. 6:00 PM  X Renovati  Is Loc normall solel Maint/C: Staff	on sation by used by by ustodial (12) N/A X X X X X X X X X X X X X X X X X X X	TAR PIPE FITTINGS INSI  VAT & MASTIC COVE BASE MASTIC JOINT COMPOUND TAR PIPE FITTINGS INSI VAT & MASTIC PIPE FITTINGS INSI VAT & MASTIC COVE BASE MASTIC JOINT COMPOUND TAR PIPE FITTINGS INSI VAT & MASTIC COVE BASE MASTIC JOINT COMPOUND TAR PIPE FITTINGS INSI VAT & MASTIC COVE BASE MASTIC JOINT COMPOUND TAR PIPE FITTINGS INSI VAT & MASTIC COVE BASE MASTIC JOINT COMPOUND ACCOUSTICAL PL TAR PIPE FITTINGS INSI	Street Address 1376 ROUTE !  City, State, Zip  Containment with Neg Enclor , ebag Procedure Friable Procedure of Asbestos- faterial (ACM) mal systems urfacing, VAT, scellaneous)  ULATION  DASTER  JLATION  JLATION	9 W  O Code WAPPI gative Press  Am (Sp SF of code)  8,005 S  75 LF  12,180  495 SF  25 SF  8,005 S  495 SF  12,425  495 SF  18,820  7,275 S  25 SF  200 LF  665 SF  207 LF  4 SF	ount ecify r LF)  F  SF  SF  SF	REMOVAL X X X X X X X X X X X X X X X X X X X		Abatei I m	ment	Type
Month Day Year Occupancy Status During Abatement (Ch Facility Closed/Vacated Durin Abatement Performed Outsid X Other - Describe: MON.  Scope of Work (Check all that apply) Demolition >3SF OR LF X >160 SF OR Location of Asbestos-containing Material (ACM) TO BE ABATED in Facility (13)  3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE 2ND FLOOR - ENTIRE 3ND FLOOR -	leck only one)  log Entire Period  e of Normal Fa  - FRI. 6:00 PM  X Renovati  Is Loc normall solel Maint/C: Staff	on action by used by by ustodial (12)  X  X  X  X  X  X  X  X  X  X  X  X  X	TAR PIPE FITTINGS INSI VAT & MASTIC COVE BASE MASTIC JOINT COMPOUND TAR PIPE FITTINGS INSI VAT & MASTIC COVE BASE MASTIC JOINT COMPOUND TAR PIPE FITTINGS INSI VAT & MASTIC COVE BASE MASTIC JOINT COMPOUND TAR PIPE FITTINGS INSI VAT & MASTIC COVE BASE MASTIC COVE BASE MASTIC JOINT COMPOUND TAR PIPE FITTINGS INSI VAT & MASTIC COVE BASE MASTIC JOINT COMPOUND ACCOUSTICAL PL TAR PIPE FITTINGS INSI VIBRATION CLOTH GASKETS	Street Address 1376 ROUTE ! City, State, Zip Containment with Neg Enclor, ebag Procedure Friable Procedure of Asbestos- laterial (ACM) hal systems urfacing, VAT, scellaneous)  ULATION  ASTER  ULATION  ULATION	9 W  O Code WAPPI gative Press  Am (Sp SF of code)  8,005 S  75 LF 12,180 495 SF 12,180 25 SF 12,180 25 SF 12,425 495 SF 18,820 7,275 S 25 SF 200 LF 665 SF 207 LF 4 SF 10 SF	ount ecify r LF)  F  SF  SF  SF	REMOVAL X X X X X X X X X X X X X X X X X X X		Abatei I m	ment	Type
Month Day Year Occupancy Status During Abatement (Ch Facility Closed/Vacated Durin Abatement Performed Outsid X Other - Describe: MON.  Scope of Work (Check all that apply) Demolition >3SF OR LF X >160 SF OR  Location of Asbestos-containing Material (ACM) TO BE ABATED in Facility (13)  3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE 2ND FLOOR -	leck only one)  log Entire Period  e of Normal Fa  - FRI. 6:00 PM  X Renovati  Is Loc normall solel Maint/C: Staff	on sation by used by by ustodial (12)    X	TAR PIPE FITTINGS INSI VAT & MASTIC COVE BASE MASTIC JOINT COMPOUND TAR PIPE FITTINGS INSI VAT & MASTIC COVE BASE MASTIC JOINT COMPOUND TAR PIPE FITTINGS INSI VAT & MASTIC COVE BASE MASTIC COVE BASE MASTIC JOINT COMPOUND TAR PIPE FITTINGS INSI VAT & MASTIC COVE BASE MASTIC COVE BASE MASTIC COVE BASE MASTIC JOINT COMPOUND TAR PIPE FITTINGS INSI VAT & MASTIC COVE BASE MASTIC COVE BASE MASTIC COVE BASE MASTIC JOINT COMPOUND ACCOUSTICAL PL TAR PIPE FITTINGS INSI VIBRATION CLOTH GASKETS PIPE FITTINGS INSI	Street Address 1376 ROUTE !  City, State, Zip  Containment with Neg Enclor, ebag Procedure Friable Procedure of Asbestos- laterial (ACM) hal systems urfacing, VAT, scellaneous)  ULATION  ULATION  ULATION  ULATION	9 W  O Code WAPPI gative Press  Am (Sp SF of code)  8,005 S  75 LF  12,180  495 SF  25 SF  8,005 S  495 SF  12,425  495 SF  18,820  7,275 S  25 SF  200 LF  665 SF  207 LF  4 SF	ount ecify r LF)  F  SF  SF  SF	REMOVAL X X X X X X X X X X X X X X X X X X X		Abatei I m	ment	Type
Month Day Year Occupancy Status During Abatement (Ch Facility Closed/Vacated Durin Abatement Performed Outsid X Other - Describe: MON.  Scope of Work (Check all that apply) Demolition >3SF OR LF X >160 SF OR Location of Asbestos-containing Material (ACM) TO BE ABATED in Facility (13)  3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE 2ND FLOOR - ENTIRE 3RD FLOOR -	leck only one)  log Entire Period  e of Normal Fa  - FRI. 6:00 PM  X Renovati  Is Loc normall solel Maint/C: Staff	on action by used by by ustodial (12)  X  X  X  X  X  X  X  X  X  X  X  X  X	TAR  PIPE FITTINGS INSI  VAT & MASTIC  COVE BASE MASTIC  COVE BASE MASTIC  JOINT COMPOUND  TAR  PIPE FITTINGS INSI  VAT & MASTIC  COVE BASE MASTIC  COVE BASE MASTIC  TAR  PIPE FITTINGS INSI  VAT & MASTIC  COVE BASE MASTIC  COVE BASE MASTIC  TAR  PIPE FITTINGS INSI  VAT & MASTIC  COVE BASE MASTIC  COVE BASE MASTIC  COVE BASE MASTIC  JOINT COMPOUND  ACCOUSTICAL  PLE  TAR  PIPE FITTINGS INSI  JOINT COMPOUND  ACCOUSTICAL  TAR  PIPE FITTINGS INSI  DUCT INSULATION  VIBRATION CLOTH  GASKETS  PIPE FITTINGS INSI  DUCT INSULATION  VAT & MASTIC	Street Address 1376 ROUTE !  City, State, Zip Containment with Neg Enclor, eebag Procedure Friable Procedure of Asbestos- laterial (ACM) ala systems urfacing, VAT, scellaneous)  ULATION  DASTER  JLATION  ULATION  ULATION	9 W  O Code WAPPI gative Press  Am (Sp SF c  8,005 S 75 LF  12,180  495 SF  8,005 S  495 SF  12,180  25 SF  12,425  495 SF  200 LF  665 SF  200 LF  665 SF  10 SF	ount ecify r LF)  F  SF  SF  SF  SF	REMOVAL X X X X X X X X X X X X X X X X X X X		Abatei I m	ment	Type
Month Day Year  Occupancy Status During Abatement (Ch Facility Closed/Vacated Durin Abatement Performed Outsid X Other - Describe: MON.  Scope of Work (Check all that apply) Demolition >3SF OR LF X >160 SF OR Location of Asbestos-containing Material (ACM) TO BE ABATED in Facility (13)  3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE 2ND FLOOR-ENTIRE 2ND FLOOR-ENTIRE 2ND FLOOR-ENTIRE 2ND FLOOR-ENTIRE PLAZA-ENTIRE PLAZA	leck only one)  log Entire Period  e of Normal Fa  - FRI. 6:00 PM  X Renovati  Is Loc normall solel Maint/C: Staff	on sation by used by by ustodial (12) N/A X X X X X X X X X X X X X X X X X X X	TAR  VAT & MASTIC  COVE BASE MASTIC  COVE BASE MASTIC  JOINT COMPOUND  ACCOUSTICAL  JOINT COMPOUND  ACCOUSTICAL  JOINT COMPOUND  ACCOUSTICAL  PIPE FITTINGS INSI  JOINT COMPOUND  ACCOUSTICAL  TAR  PIPE FITTINGS INSI  JOINT COMPOUND  ACCOUSTICAL  PLE  TAR  PIPE FITTINGS INSI  JOINT COMPOUND  ACCOUSTICAL  PLE  TAR  PIPE FITTINGS INSI  JOINT COMPOUND  ACCOUSTICAL  TAR  PIPE FITTINGS INSI  JOINT COMPOUND  ACCOUSTICAL  TAR  PIPE FITTINGS INSI  DUCT INSULATION  VIBRATION CLOTH  GASKETS  PIPE FITTINGS INSI  JUBRATION CLOTH  GASKETS  PIPE FITTINGS INSI  DUCT INSULATION  VAT & MASTIC  JOINT COMPOUND	Street Address 1376 ROUTE !  City, State, Zip  Containment with Neg Enclor, eebog Procedure Friable Procedure of Asbestos- laterial (ACM) all systems urfacing, VAT, scellaneous)  ULATION  ULATION  ULATION  ULATION	9 W  O Code WAPPI gative Press  Am (Sp SF c  8,005 S 75 LF  12,180  495 SF  8,005 S  495 SF  12,180  25 SF  200 LF  665 SF  207 LF  4 SF  10 SF  45 LF  240 SI  3,000  5,700	ount ecify r LF)  F  SF  SF  SF  SF  SF  SF  SF  SF	REMOVAL X X X X X X X X X X X X X X X X X X X		Abatei I m	ment	Type
Month Day Year  Occupancy Status During Abatement (Ch Facility Closed/Vacated Durin Abatement Performed Outsid X Other - Describe: MON.  Scope of Work (Check all that apply) Demolition >3SF OR LF X >160 SF OR Location of Asbestos-containing Material (ACM) TO BE ABATED in Facility (13)  3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE 2ND FLOOR - ENTIRE 3RD FLOOR -	leck only one)  log Entire Period  e of Normal Fa  - FRI. 6:00 PM  X Renovati  Is Loc normall solel Maint/C: Staff	on sation by used by by ustodial (12) N/A X X X X X X X X X X X X X X X X X X X	TAR  PIPE FITTINGS INSI  VAT & MASTIC  COVE BASE MASTIC  COVE BASE MASTIC  JOINT COMPOUND  TAR  PIPE FITTINGS INSI  VAT & MASTIC  COVE BASE MASTIC  COVE BASE MASTIC  TAR  PIPE FITTINGS INSI  VAT & MASTIC  COVE BASE MASTIC  COVE BASE MASTIC  TAR  PIPE FITTINGS INSI  VAT & MASTIC  COVE BASE MASTIC  COVE BASE MASTIC  COVE BASE MASTIC  JOINT COMPOUND  ACCOUSTICAL  PLE  TAR  PIPE FITTINGS INSI  JOINT COMPOUND  ACCOUSTICAL  TAR  PIPE FITTINGS INSI  DUCT INSULATION  VIBRATION CLOTH  GASKETS  PIPE FITTINGS INSI  DUCT INSULATION  VAT & MASTIC	Street Address 1376 ROUTE !  City, State, Zip  Containment with Neg Enclor, eebog Procedure Friable Procedure of Asbestos- laterial (ACM) all systems urfacing, VAT, scellaneous)  ULATION  ULATION  ULATION  ULATION	9 W  O Code WAPPI gative Press  Am (Sp SF c  8,005 S 75 LF  12,180  495 SF  8,005 S  495 SF  12,180  25 SF  12,425  495 SF  200 LF  665 SF  200 LF  665 SF  10 SF	ount ecify r LF)  F  SF  SF  SF  SF  SF  SF  SF  SF	REMOVAL X X X X X X X X X X X X X X X X X X X		Abatei I m	ment	Type

1ST FLOOR HALLWAY		T X	PIPE FITTINGS	20 LF	X	
1ST FLOOR STORAGE ROOM		1 x	PIPE FITTINGS	13 LF	X	
1ST FLOOR STORAGE ROOM		X	VAT & MASTIC	300 SF	X	
IST FLOOR STORAGE RESIL						
Name of Registered Waste Hauler DJM TRANSPORT , LLC		DEP Waste uler ID No. 26981		Name of Registered Landfill BROWS LANDFILL		
City, State KEARNEY, NEW JERSEY			11/1	Dity, SALE, PA	Date	2/2/11
Completed by (Print or Type) BENJAMIN SANCHEZ	Title DIRECTO	OR OF OPE	RATIONS Signature	KA	Suito	1/26/4



为1000年的**和**第1000年的第二人 The state of the s No check State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) HESS CORPORATION Date of Notification (1) 2011 Street Address /11 1 HESS PLAZA Type Notification Agencies Notified City, State, Zip Code Initial Notification EPA WOODBRIDGE, NEW JERSEY 07095 ASHEATOS COMTADLE Amended Notification #6 DEP Cancellation DOL MOEST NO Telephone Number Name of Contact On Hold DOH **EMERGENCY NOTIFICATION** DAVID CERULO DCA FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Subchapter 8 (Other than K-12) HESS PLAZA Other (ie. private & commcl. bldgs., homes, etc.) Bldg. Age Square Feet # of Floors Street Address 187,000 13 1 HESS PLAZA Current Use (Prior if being demolished) County Code (7) County (6) City (5) COMMERCIAL OFFICE (STATE USE ONLY) MIDDLESEX WOODBRIDGE Name of Abatement Contractor (9) ASCM No. Name of Monitoring Firm Hired by Building Owner (8) PAR ENVIRONMENTAL CORPORATION 17 HILLMANN ENVIRONMENTAL Street Address Street Address 313 SPOOK ROCK ROAD 1600 ROUTE 22 City, State, Zip Code City, State, Zip Code SUFFERN, NEW YORK 10901 UNION, NEW JERSEY 07083 License Number Telephone Number Telephone Number Project Manager for Monitoring Firm 460 845-369-7500 908-377-5644 MIKE NEHLSEN Name of OSHA Monitor Sched. Completion Date (11) Expected State Date (10) QUALITY ENVIRONMENTAL 12 5 / 23 / 6/ Year Day Month Day Year Month Street Address Occupancy Status During Abatement (Check only one) 1376 ROUTE 9 W Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe: City, State, Zip Code MON. - FRI. 6:00 PM - 2:30 AM WAPPINGERS FALLS, NY 12590 Other - Describe: Full Containment with Negative Pressure Scope of Work (Check all that apply) Mini-Enclo:, Renovation Demolition Glovebag Procedure >3SF OR LF Non-Friable Procedure >160 SF OR Abatement Type X Description of Asbestos-Is Location Location of ENCAPSULE Amount Containing Material (ACM) REMOVAL normally used Asbestos-containing (Specify (ie. Thermal systems solely by Material (ACM) OSURE SF or LF) insulation, surfacing, VAT, Maint/Custodial TO BE ABATED or other miscellaneous) Staff (12) in Facility (13) Yes No N/A 8.005 SF VAT & MASTIC 3RD FLOOR - ENTIRE 75 LF X PIPE FITTINGS X 3RD FLOOR - ENTIRE X 12,180 SF JOINT COMPOUND X 3RD FLOOR - ENTIRE 495 SF COVE BASE MASTIC 3RD FLOOR - ENTIRE X 25 SF TAR X 3RD FLOOR - ENTIRE 8,005 SF X VAT & MASTIC 2ND FLOOR- ENTIRE 495 SF X COVE BASE MASTIC 2ND FLOOR- ENTIRE X 12,180 SF JOINT COMPOUND X 2ND FLOOR- ENTIRE 25 SF TAR 2ND FLOOR- ENTIRE X 380 LF PIPE FITTINGS INSULATION 2ND FLOOR- ENTIRE X 12,425 SF VAT & MASTIC X PLAZA-ENTIRE 495 SF X COVE BASE MASTIC PLAZA-ENTIRE 18,820 SF IX JOINT COMPOUND X PLAZA-ENTIRE 7,275 SF ACCOUSTICAL PLASTER X PLAZA-ENTIRE 25 SF PLAZA-ENTIRE X 200 LF PIPE FITTINGS INSULATION X PLAZA-ENTIRE X 665 SF DUCT INSULATION X 1ST FLOOR-MECHANICAL ROOM 207 LF X PIPE FITTINGS INSULATION X 1ST FLOOR-MECHANICAL ROOM X 4 SF VIBRATION CLOTH 1ST FLOOR-MECHANICAL ROOM X 10 SF X GASKETS X 1ST FLOOR-MECHANICAL ROOM X 45 LF PIPE FITTINGS INSULATION 1ST FLOOR -BOILER ROOM X 240 SF DUCT INSULATION X 1ST FLOOR-BOILER ROOM X 3 000 SF VAT & MASTIC X 1ST FLOOR - CAFETERIA 5,700 SF X JOINT COMPOUND X 1ST FLOOR- CAFETERIA 175 SF X COVE BASE MASTIC 1ST FLOOR - CAFETERIA X 25 LF PIPE INSULATION

DUCT INSULATION

X

X

770 SF

1ST FLOOR - CAFETERIA

ATTICIOND MED BOOM

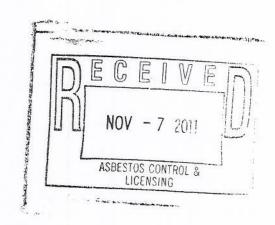
Name of Registered Waste Hauler	7	NJDEP Waste Hauler ID No. 26981	Cubic Ya	rds of Waste 1	Name of Registered Landfill GROWS LANDFILL	
City, State KEARNEY, NEW JERSEY			Disposal 6/23/11-0	Date 5/15/2012	MORE SVILLE, PA	111
Completed by (Print or Type) BENJAMIN SANCHEZ	Title	e RECTOR OF OPEI	RATIONS	Signature	Date	9-9-11



were the confidence of the first light was the

・・たく物質は物できつい .. M. Shock State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) Date of Notification (1) HESS CORPORATION /11 Street Address 201 Agencies Notified Type Notification 1 HESS PLAZA EPA Initial Notification City, State, Zip Code DEP Amended Notification #5 WOODBRIDGE, NEW JERSEY 07095 ASSESTOS CONTROL & DOL Cancellation LICENSING DOH On Hold Name of Contact alephone Numbe **EMERGENCY NOTIFICATION** DAVID CERULO DCA **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) HESS PLAZA Subchapter 8 (Other than K-12) Other (ie. private & commcl. bldgs., homes, etc.) Street Address Square Feet # of Floors Bldg. Age 1 HESS PLAZA 187,000 13 42 City (5) County (6) County Code (7) Current Use (Prior if being demolished) WOODBRIDGE MIDDLESEX (STATE USE ONLY) COMMERCIAL OFFICE Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) HILLMANN ENVIRONMENTAL 17 PAR ENVIRONMENTAL CORPORATION Street Address Street Address 1600 ROUTE 22 313 SPOOK ROCK ROAD City, State, Zip Code City, State, Zip Code UNION, NEW JERSEY 07083 SUFFERN, NEW YORK 10901 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number MIKE NEHLSEN 908-377-5644 845-369-7500 460 Expected State Date (10) Sched. Completion Date (11) Name of OSHA Monitor QUALITY ENVIRONMENTAL 6/ 23 / /11 5/ 30/ 12 Day Month Year Month Day Year Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 1376 ROUTE 9 W Abatement Performed Outside of Normal Facility Hours - Describe: MON. - FRI, 6:00 PM - 2:30 AM City, State, Zip Code WAPPINGERS FALLS, NY 12590 Scope of Work (Check all that apply) Full Containment with Negative Pressure Demolition Renovation Mini-Enclos. >3SF OR LF Glovebag Procedure 160 SF OR Non-Friable Procedure Location of Is Location Description of Asbestos-Abatement Type Asbestos-containing normally used Containing Material (ACM) Amount ENCAPSULE ENCLOSE REMOVAL Material (ACM) solely by (ie. Thermal systems (Specify TO BE ABATED Maint/Custodial insulation, surfacing, VAT, SF or LF) in Facility (13) Staff (12) or other miscellaneous) Yes No N/A 3RD FLOOR - ENTIRE VAT & MASTIC 8,005 SF 3RD FLOOR - ENTIRE X PIPE FITTINGS 75 LF X 3RD FLOOR - ENTIRE JOINT COMPOUND 12,180 SF X X 3RD FLOOR - ENTIRE COVE BASE MASTIC 495 SF X 3RD FLOOR - ENTIRE X 25 SF X TAR 2ND FLOOR- ENTIRE 8,005 SF X VAT & MASTIC X 2ND FLOOR- ENTIRE X COVE BASE MASTIC 495 SF X 2ND FLOOR- ENTIRE JOINT COMPOUND 12,180 SF X X 2ND FLOOR- ENTIRE 25 SF TAR PIPE FITTINGS INSULATION 2ND FLOOR- ENTIRE 380 LF X X PLAZA-ENTIRE X VAT & MASTIC 12,425 SF X PLAZA-ENTIRE COVE BASE MASTIC 495 SF X X PLAZA-ENTIRE JOINT COMPOUND 18.820 SF X X PLAZA-ENTIRE ACCOUSTICAL PLASTER 7,275 SF PLAZA-ENTIRE TAR 25 SF X PIPE FITTINGS INSULATION PLAZA-ENTIRE X 200 LF X 1ST FLOOR-MECHANICAL ROOM X DUCT INSULATION 665 SF X 1ST FLOOR-MECHANICAL ROOM PIPE FITTINGS INSULATION X 207 LF X 1ST FLOOR-MECHANICAL ROOM VIBRATION CLOTH 4 SF X X 1ST FLOOR-MECHANICAL ROOM 10 SF X GASKETS 1ST FLOOR -BOILER ROOM PIPE FITTINGS INSULATION X 45 LF X 1ST FLOOR-BOILER ROOM X DUCT INSULATION 240 SF Х 1ST FLOOR - CAFETERIA VAT & MASTIC 3,000 SF X X 1ST FLOOR- CAFETERIA X JOINT COMPOUND 5,700 SF X 1ST FLOOR - CAFETERIA COVE BASE MASTIC 175 SF X X 1ST FLOOR - CAFETERIA PIPE INSULATION 25 LF 13TH FLOOR - MER ROOM X DUCT INSULATION 770 SF X

Name of Registered Waste Hauler DJM TRANSPORT, LLC	NJDEP Waste Hauler ID No. 26981		Name of Registered Landfill GROWS LANDFILL	
City, State KEARNEY, NEW JERSEY		Disposal Date 6/23/11-05/15/2012	MORRISVILLE, PA	13/11
Completed by (Print or Type) BENJAMIN SANCHEZ	Title DIRECTOR OF OF	Signature PERATIONS	17/10	125/11



and the second s State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) (M) Name of Building Owner/Operator (2) 110 Date of Notification (1) HESS CORPORATION /11 Street Address Agencies Notified Type Notification 1 HESS PLAZA NOV EPA Initial Notification City, State, Zip Code DEP WOODBRIDGE, NEW JERSEY 07095 Amended Notification #3 DOL Cancellation DOH On Hold Name of Contact Telephone Number LICENSING DCA **EMERGENCY NOTIFICATION** DAVID CERULO **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) HESS PLAZA Subchapter 8 (Other than K-12) Other (ie. private & commcl. bldgs., homes, etc.) Street Address Square Feet # of Floors Bldg. Age 1 HESS PLAZA 187,000 13 42 City (5) County Code (7) Current Use (Prior if being demolished) County (6) WOODBRIDGE MIDDLESEX (STATE USE ONLY) COMMERCIAL OFFICE Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) HILLMANN ENVIRONMENTAL PAR ENVIRONMENTAL CORPORATION 17 Street Address Street Address 1600 ROUTE 22 313 SPOOK ROCK ROAD City, State, Zip Code City, State, Zip Code UNION, NEW JERSEY 07083 SUFFERN, NEW YORK 10901 Project Manager for Monitoring Firm Telephone Number License Number Telephone Number MIKE NEHLSEN 845-369-7500 908-377-5644 460 Expected State Date (10) Sched, Completion Date (11) Name of OSHA Monitor QUALITY ENVIRONMENTAL 23 / 5 / 30/ 12 Day Month Day Year Month Year Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 1376 ROUTE 9 W Abatement Performed Outside of Normal Facility Hours - Describe: Other - Describe: MON. - FRI. 6:00 PM - 2:30 AM City, State, Zip Code WAPPINGERS FALLS, NY 12590 Scope of Work (Check all that apply) Full Containment with Negative Pressure Demolition X Renovation Mini-Enclos >3SF OR LF Glovebag Procedure >160 SF OR Non-Friable Procedure Location of Is Location Description of Asbestos-Abatement Type Asbestos-containing normally used Containing Material (ACM) Amount ENCLOSURE ENCAPSULE REMOVAL Material (ACM) solely by (ie. Thermal systems (Specify insulation, surfacing, VAT, TO BE ABATED Maint/Custodial SF or LF) in Facility (13) Staff (12) or other miscellaneous) Yes No N/A 3RD FLOOR - ENTIRE VAT & MASTIC 8,005 SF 3RD FLOOR - ENTIRE X PIPE FITTINGS 75 LF X 3RD FLOOR - ENTIRE JOINT COMPOUND X 12,180 SF X 3RD FLOOR - ENTIRE COVE BASE MASTIC X 495 SF X 3RD FLOOR - ENTIRE 25 SF X TAR IX 2ND FLOOR- ENTIRE VAT & MASTIC 8,005 SF X 2ND FLOOR- ENTIRE COVE BASE MASTIC X 495 SF 2ND FLOOR- ENTIRE JOINT COMPOUND X 12,180 SF X 2ND FLOOR- ENTIRE 25 SF X X

PIPE FITTINGS INSULATION

ACCOUSTICAL PLASTER

PIPE FITTINGS INSULATION

PIPE FITTINGS INSULATION

PIPE FITTINGS INSULATION

VAT & MASTIC

COVE BASE MASTIC

JOINT COMPOUND

DUCT INSULATION

VIBRATION CLOTH

DUCT INSULATION

JOINT COMPOUND

COVE BASE MASTIC

PIPE INSULATION

DUCT INSULATION

VAT & MASTIC

X

X

X

X

X

X

X

X

X

X

X

X

X

X

TAR

GASKETS

380 I F

495 SF

25 SF

200 LF

665 SF

207 LF

4 SF

10 SF

45 LF

240 SF

3,000 SF

5,700 SF

175 SF

25 LF

770 SF

12,425 SF

18,820 SF

7,275 SF

X

X

X

X

X

X

X

X

X

IX

X

X

X

X

X

2ND FLOOR- ENTIRE

PLAZA-ENTIRE

PLAZA-ENTIRE

PLAZA-ENTIRE

PLAZA-ENTIRE

PLAZA-ENTIRE

PLAZA-ENTIRE

1ST FLOOR-MECHANICAL ROOM

1ST FLOOR-MECHANICAL ROOM

1ST FLOOR-MECHANICAL ROOM

1ST FLOOR-MECHANICAL ROOM

1ST FLOOR -BOILER ROOM

1ST FLOOR-BOILER ROOM

1ST FLOOR - CAFETERIA

1ST FLOOR- CAFETERIA

1ST FLOOR - CAFETERIA

1ST FLOOR - CAFETERIA

13TH FLOOR - MER ROOM

NJDEP Was Hauler NJDEP Was Hauler ID No 26981		auler ID No.	Cubic Yard	is of Waste 1		e of Registered Landfill DWS LANDFILL	
City, State KEARNEY, NEW JERSEY			Disposal D 6/23/11-05		CHA	SIGNE RISVILLE, PA	1 111
Completed by (Print or Type) BENJAMIN SANCHEZ	Title DIREC	TOR OF OPER		Signature	X	Date 1	122111



2495

STATE OF NEW JERSEY
NOTIFICATION OF ASBESTOS ABATEMENT

Date of Notification (1)		(PURSUA	NT TO N	IJAC 8:60-7 AND 12:	120-7	7)		
$\frac{9}{2} / \frac{2}{2} / \frac{2}{2}$	11 -		HOFF	of Building Owner / MAN LAROCHE	11	3/T		
Agencies Notified Type	e of Notification			Address	- 111	111	101/ 7 0	1111
☑ EPA	Initial			NGSLAND AVENUE	( ][]	LUI N	10V - 7 2	011   レ/
DEP	✓ Amended			tate, Zip Code	ž.			į.
☑ DOH	Amendm	To prove Milesonia		Y, NJ 07110		L	Prince Berg, etc. 1,55	
DOL DOL		ent #_3 cy w/ justification		of Contact	1	Teleph	one Number	)L &
	☐ Cancellat	ion	BEHRA	AM IRANI	#	0-	7G	
	_ ouncellat		1000		X Co.		A STATE OF THE PARTY AS	
		F	ACILITY	INFORMATION	particles .			1.00
Name of Facility Where A	hatament in Tal-	- DI (b)				DESTRUCTION OF		
HOFFMAN LAROCHE	batement is Tak	ing Place (3)		Type of Facility (	(4)			N. W. Commercial
TOTAL MENT DISTORAL								
Street Address					ol (K-12)			
340 KINGSLAND AVENUE				☐ Subch	apter 8 (Othe	r than K-1	12)	
	•			Other	(I.e., private	& cmmerc	ial	
City (5) Cou	nty (6)	County Code	(7)		, homes, etc.		-	
NUTLEY ESS		County Code	,7)	Square Feet	# Of Floo	ors	Building Ag	
				74,000		2	1	100+
				Current Use (Price	or if being dei	nolished)		
Name of Monitoring Firm	Hirad by Blda C	Numar (9)	40011	OFFICE/RESEAR				
Totornig i iiii	ea by blug. C	Wilei (0)	ASUM	NO Name of Abateme	ent Contracto	r (9)		
ENVIRONMENTAL HEALT	H INVESTIGATIO	NS PAGE		I.VII.E				
Street Address	EOTIGATIC			LVI Environmental	Services Inc.			
55 WEST SHORE TRAIL				Street Address				
ity, State, Zip Code								
SPARTA, NJ 07871		199		462 Getty Avenue			*100	
Project Mngr. For Monitor	Fi	7-7		City, State, Zip Co	ode			
ILL KERBEL	ing Firm	Telephone Nur	nber					
ILL KERBEL	10: : :	973-729-5649		Clifton, NJ 07011				
10 / 03 / 4		mpletetion Date (11	OTE CONTRACT	Telephone Number	er	License	Number	
10 / _03 / _1	1 12		11	-				
Occupancy Status Dusing	A	/ /		973-772-3660			00117	
Ccupancy Status During Facility Closed/	Abatement (Che Vacated During I	ck Only 1)		Name of OSHA Mo				
Abatement	vacated During I	intire Period of		LVI Environmental	Services Inc.			
	ormed Outside -	f Normal Facility		Street Address		5000 50		
Hours - Describ	offiled Outside o	:30PM - MON - FRI						131
Other - Describe	: 7:00AM - 3:	.SUPINI - INIUN - FRI		462 Getty Avenue		Approximate the second		
- Curer - Describe	7.00ANI - 3.	SUPIVI - SAT		City, State, Zip Co	de			
cope of Work (Check All	That Apply)			Clifton, NJ 07011				
sopo oi ttoik (olicok Ali	mat Apply)							
☐ Demolition		Renovation		Full Contact		2		
≥3sf or≥3lf	ت	Renovation		Full Containment	with Negative	Pressure		
≥160 sf or ≥260	f			Mini - Enclosure				
			D	Glovebag Procedu				
				Non-Exempted (*)	and Non-Fria	ole Proced	dure	
Location of	ls	T	Descript	tion of				
Asbestos Containing	Location			Containing	1 1	Abatemer		-
Material (ACM)	Normally		Material		Amount	R	E	E
TO BE ABATED	Used			l systems	Amount	E	RN	N
in Facility	Solely	insulat	ion sur	facing, VAT,	(Specify SF or LF)	M	E C	C
(13)	by Main-			ellaneous)	SF OF LF	0		L
2.0 %	tenance/	0, 00		ancous <sub>j</sub>		v I	A P	0
	Custodial				1 1	A	I S	s
	Staff (12)				1 1	- 1	R U	U
	YES NO N/A			<del></del>	1		<u> </u>	R
E ATTACHED			- 199		+			1 -
					+			
					+			
		T			+	-		
me of Registered Waste I	lauler	NJDEP Waste Cu	thic	Name of Registered	Londéill			
OWNER			ards	BY OWNER	Landilli			
None and the second			Waste	DI OWNER				
, State	- X			City. State				
97			ite	ony. State				
		Da						
npleted by (Print or Type		Title		Te S				
TER DEMEROPOULOS		PRESIDENT		Signature	1 1		Date	
		LICIDENT		1/2/	alila	01.13	): V	
	AND THE PROPERTY OF LINES OF				-11011	VIII	( L. )	11/05/44

	1			<u> </u>				50 V 10 V	
BLDG 105 BSMT	-	D		PIPE	900 LF	্য			
BLDG 105 1ST FLOOR	ᅥH	17		PIPE	610 LF	- I	H		H
BLDG 105 1ST FLOOR	一百	N	755	WATERPROOFING	1600 SF	N		一片十	一百
BLDG 105 1ST FLOOR	一十	17	H	VAT/MASTIC	1500 SF	N		The last	T T
SLDG 105 BSMT	ᅥ片	N	H	VAT/MASTIC	3025 SF	7		n	
SLDG 105 2ND FLOOR	TH	7	ñ	PIPE	150 LF	N			
SLDG 105 2ND FLOOR	一十一	V	Ħ	WATERPROOFING	4000 SF	V			
BLDG 105 EXTERIOR	一百	7	П	WINDOW CAULK	1500 LF	7			
SLDG 105 EXTERIOR		7	Ī	ROOF TAR	850 SF	7			
BLDG 121 EXTERIOR		V		ROOF TAR	1850 SF	V			
BLDG 121 EXTERIOR		1		ROOF TAR	150 SF	V			
BLDG 105 - LC ROOF		1		FLASHING/TAR	150 SF	7			
BLDG 105 - WEST ROOF		1		FLASHING/TAR	315 SF	V			
SLDG 105 - FAÇADE		V		EXPANSION JOINT	300 SF	7			

## NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60-12:120)

Date of Notification (1)	Name of Building Owner/Operator (2)												
Annual Control of the	1/4/2011				Rite	Aid Corporati	on "	m) E	(C)   E     )	W E	T		
Agencies Notified	Type No	otification	<u>on</u>		Street	Address		U			711	111	
(X) EPA	( ) Init				30	Hunter Lane		m1					
( ) DEP	(X) Am				City, S	State, Zip Code	2		NOV - 7	2011	1	7//	
(X) DOL	() Em		ent #_ 3	ding	Car	np Hill, PA 170	01	U U	IAOA	_011	1,000	1	
(X) DOH		tificatio		urig	Name	of Contact			Tel. N	lumber	1	1	
() DCA	( ) Cano				Ka	ren Shriner	1		SBESTOD TO	an asu		i	
**		00000110000			FACILITY IN	FORMATION	2 1	P	LICENSING			+	_
Name of Facility Where Abate	ement is T	Taking	Place (3			Type of Faci	lity (4)	-	CANADA SILVER		AL PARKET		
Rite Aid Surplus #34914 & #3	and the second second			7.		( ) School (I	(-12) °		12)				, ,
Street Address				1122		(X) Other (i	nrivate	& comme	rcial buildings, h	omee	ato	6 10 100	R
90-98 Broad Street						(xy outer (iii	o. piivato	a comme	olai ballalliga, i	iomes,	510.		
City (5)						Sq. Feet	# of F	loors	Bldg. Age		-		
Elizabeth, NJ 07201						10000	2		25+/-				
County (6)		Col	inty Coc	le (7) (S7	TATE	Current Use			370 TO 100 TO 10				
Union			E ONLY		AIL	The second secon	ercial Buil	Marie Contract of the Contract	olished)				
Name of Monitoring Firm Hire	d by	ASCM	No.		Name of C	Contractor (9)		Take I sales				_	
Bldg. Owner (8)		CHASTIC CONTRACT				Response, In	C.						
Watterson Environmental Gro	up					, , , , , , , , , , , , , , , , , ,							
Street Address			- Ultra		Stree	t Address	AUSTIN CO.						
169 Main Street, Suite 103						echnology Lar	ne						
City, State, Zip Code							Activity						
					1 20.000	State, Zip Code	2						
Matawan, NJ 07747						rt, PA 15632							
Project Manager for Monitorin	g Firm		ephone I			hone No.	Licens	e No.					
Peter Thompson			-583-30			325-3330	01121				2000		
Start Date (10)	Sched	duled C	ompletio	on Date (		ame of OSHA Monitor							
11/14/2011	12/01/	/2011			Watte	Watterson Environmental Group							
Occupancy Status During Aba			only one	)	Stree	t Address							-
(X ) Facility Closed/Vacated D	es and bytes by	18.4 28.72	V 25 72 20 34	70 m		lain Street, Su	ite 103						
( ) Abatement Performed Out	side of No	ormal F	acility H	ours	City,	State, Zip Code	9						-
Describe:					174405247		=:						
( ) Other Describe:		_			Mata	wan, NJ 07747							
Source of Work (Check all tha	t apply)												
( ) ≥3 sf or ≥3 lf (X) ≥160 sf or ≥260 lf			Renova Demoliti			(X) Full Cont () Mini-Encl () Glovebag () Non-Exer	osure Procedu	ıre	ive Pressure	ure			
												ement	
Location of Asbestos-Containing Mater (ACM) TO BE ABATED IN Facility (13)	rial	Us M	s Location Normall ed Solel aintenan Custodia Staff? (12)	y y by nce/ al	(i.e. them	Description tos Containing nal systems ins T, or other mis	Material sulation, s	surfacing,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
Basement & First Floor		Yes	No X	N/A	Plaster Ba	ase Coat			1500 SF	X	_		
Sub Floor Drain under 1st Flr.	lointo		×						6 LF	\ \ \ \ \ \ \	_		
Basement, 1 <sup>st</sup> FIr, 2 <sup>nd</sup> FIr Sales			X		Plaster Fi Floor Tile				4150 SF	X			
Name of Reg. Waste Hauler	STATE OF THE PARTY	2 Wast	e Hauler	ID#		ards of Waste	Ti	Name of R	eg. Landfill	1,			
Circle Rubbish	HODE		8816	. <u></u>	Gubic 18		1	Tullytown L	andfill				
City, State						Disp. Date			State				
inden, New Jersey						212/01			town, PA				
Completed by (Print or Type) Jessica Busch	Title	Admir	istrative	Support	2	Signature	ca B	ruck		<u>ate</u> 11/	04/20	11	
SB-41						0			······································				-

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

				(Pursuar	it to NJAC 8:60-7 and 12	2:120-7)	1 11	NEC	E	11 11/1	匠	
Date of Notification (1) [ 11 ] ( 03] / [ 11 ]					Jame of Building Owner Ioffmann-LaRoche	Operator (2	) (	们	-	U \9	5	
Agencies Notified ( ) EPA	Type l		ation		treet Address 40 Kingsland Street		Parameter C	U NOV	_	7 201	1	
( ) DEP (x ) DOL (x ) DOH	N	Initial Iotifica mende			City, State, Zip Code Nutley, NJ 07110			ASBEST L	OS C	ONTROL SING	<u> </u>	
( ) DCA		lotifica ancella			Name of Contact  Cd Gorka		Telepl	hone Number	and the second	ila,,	23 10	'
				FA	CILITY INFORMATIO	N	1				9.5	11 11 Martine No.
Name of Facility Where Abateme Building 46 Street Address	ent is ta	king P	lace (3)	)		{	( )Other (i	(K-12) oter 8 (other t i.e.,private &	com	er-		
"same as above"							cial bi	uildings, hom	es, et	ic.)		
City (5)	100	County Essex	(6)		unty Code (7) ATE USE ONLY)			# of Floors 2 Prior if being		dg. Age		
Name of Monitoring Firm Hired b Owner (8) Owner EHS Dept. o			ASCM	No.	Name of Abatement	Contractor (		d shop SAVE Inc.				
Street Address	-	-			Street Address 2'	7 West Stre	et			·		_
340 Kingsland	<u>(655</u>	West S	Shore T	r.)	City State 7:- Code						_	
City, State, Zip Code Nutley, NJ (Sparta, NJ)					City, State, Zip Code Bloomfield	d, NJ 07003	3					
Project Manager for Monitoring F			one Nur	nber	Telephone Number			ense Number	35	57		
Scheduled Start Date (10) Sch [11]/[17]/[11] [	729-56 red.Cor 11]/[ fonth	npletic [17 / [	n Date 11 ] Yea		(973) 680-0088 Name of OSHA Mon	itor						
Occupancy Status During Abatem [ ] Facility Closed/Vacated Du	ent (C	heck o	nly one		Street Address							
of Abatement  [ ] Abatement Performed Outsi  Hours - Describe:			Facility	y	City, State, Zip Code	forth, as		10.0000				
[ x ] Other - Describe: 7 am - Scope of Work (Check all that ap			Contain	mont w	th Magnitive Pressure w/	remote chou	Ver					
[ ] Demolition [ x] $\geq$ 3 sf or $\geq$ 3 lf [ ] $\geq$ 160 sf or $\geq$ 260 lf	)Piy)[	] ruii	[x]	Renova:	tion	[ x ] Mini (x )Glove	-Enclosure bag Proce	dure				
		Is			N 250 30 B 2					Abateme		
	E t	Used Solely By Mai tenance Custodi Staff (1	n- e/ al 2)		Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, Va or other miscellaneous	S AT,	(Spe	ount ecify or F)	R E M O V A L	R E P A I R	E N C A P S U L	E N C L O S U R
2 <sup>nd</sup> floor hallway	Yes	No	NA	Ceilin	g tile glue		18 sf	X	ζ			Е
				-								
Name of Registered Waste Haule Waste Management	2 80.00		Waste : 04597	Hauler	Cubic Yards of Waste		Registered wn Resou	l Landfill rce Recovery	y &	Grand (	Central	
City, State Morrisville P.	A				Disposal Date	City, Star	te Tully	town, PA, I			1	
Completed By (Print or Type)  Sharan Hendee			Title	11000	Signatur	Te /	/	Dat	te 1	1/3/11		

18205

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

				13	0.0	 (Selection)	He.
1	C,	113	123		W	11	1
111 11	ibs	(3)	1				1
1154						1	ı

The second secon

			Name of Building Owner/Operator (2)									-		
Date of Notification (1)					Building Owner County Ju			.	II N	0V -	7 2	01.		Land.
11/01/11	Y =		- Section	Washington and a second		SCICE	COMPT	[] [	7 14		• -			
Agencies Notified	Type Notification		100.000	neet Ad	dress izabethto	- Dla								
□ EPA	☐ Initial					WII FIA	Za F		AS	201239	ONTE	OL 8		
D DEP DOL	Amended Amendment #	2			e, Zip Code beth, NJ	07202	į			LICEN	SING			
E DOC	☐ Emergency (ir				Contact		- 9	and details	Teleph	nna-Num	her			
Ø DOH □ DCA	justification)  □ Cancellation		1000		Grafas		1	vangesende.	1		115	P .	., -	
□ DCA	LI Cancellation				ITY INFORMA	TION								
Name of Facility Where	Abatement is Taking	Place (3)	_	TACIL	ITT IN ORMA		Type of	Facility (4	)					
Union County J							□ Sc	hool (K-12	1)					
Street Address				Yes even			□ Su	bchapter 8	Other t	er than K-12)				
10 Elizabethton	wn						□ Oti		rivate & commercia		l build	ings,	nome	s,
City (5)			_				Square		# of Fl	oors	s Bidg. Age		- 5000	
Elizabeth														
County (6)					ode (7)		Current	Use (Prior	r if being	demolishe	ed)			
Union			(5)	TATE U	SE ONLY)									
Name of Monitoring Firm	n Hired by Building O	wner (8)	1	ASCM	No.	Name	of Abate	ment Cont	ractor (9)		-			
Birdsall Serv						Env	rironme	ental C	ontra	ctors,	Inc			
Street Address				-		Stree	t Address					100000000		
65 Jackson Dr	ive					23	35 Watchung Avenue							
City, State, Zip Code							State, Zip							2.19000027
Cranford, NJ	07016					We	st Ora	nge, N	J 0705	2				
Project Manager for Mor	nitoring Firm			lephon			hone No.		1000	icense No	).			
Kevin Burns			908	-497	-8900ex62	1 3 / 3	-243-9		(	0559				
Start Date (10)		Scheduled		etion D	Date (11)		of OSHA			020				
11/14/11		11/17/	11			Lor	Long Island Analytical							
Occupancy Status Durin	ng Abatement (Check	Only One)					reet Address 110 Colin Drive							
☐ Facility Closed/Vac	cated During Entire P	eriod of Aba	atemer	nt										
<ul> <li>□ Abatement Perform</li> <li>□ Other – Describe:</li> </ul>	ned Outside of Norma Occupied /	al Facility H 7 am - 3 : 3	ours Opm				<b>State, Zip</b> Lbrook,	Code , NY 11	741				8	
Scope of Work (Check A	All That Apply)													
□ ≥3 sf or ≥3 lf		⊠ Rer	novatio	n				Cantainma	0.100.00					
						3	☐ Full (	Polifamilie	ent with N	egative P	ressur	e		
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>			nolition				☐ Mini-	Enclosure		egative P	ressur	e		
1982 P							☐ Mini- ☐ Glov	Enclosure ebag Proc	edure				a	
		□ Der	nolitio	n T			☐ Mini- ☐ Glov	Enclosure	edure		e Prod	œdun Abate	men	t
□ ≥160 sf or ≥260 lf		□ Der		n T		ı	□ Mini- □ Glov ☑ Non-	Enclosure ebag Proc	edure		e Prod	œdun Abate		t
□ ≥160 sf or ≥260 if		Is Lo	nolition ocation rmally Solely	n 1 by	Asbestos Co	Descriptio	□ Mini- □ Glov ☑ Non-	Enclosure ebag Proc Exempted	edure	lon-Friab	e Prod	œdun Abate	meni pe	
□ ≥160 sf or ≥260 lf  Locatio Asbestos-Containing TO BE AB	g Material (ACM) BATED	Is Lo	ocation rmally Solely tenance	n by e/	Asbestos Co (i.e. therm	Descriptio ontaining nal system	☐ Mini- ☐ Glow ☑ Non- n of Material (	Enclosure ebag Proc Exempted ACM)	edure (*) and N Amo	ount ecify	e Prod	edun Abate Ty	meni pe	
Locatio Asbestos-Containing TO BE AB In Fact	g Material (ACM) BATED lility	Is Lo No Used S Maint Custod	ocation rmally Solely tenance	n by e/	Asbestos Co (i.e. therm sur	Descriptio	☐ Mini- ☐ Glow ☐ Non- on of Material ( ns insulati	Enclosure ebag Proc Exempted ACM)	edure (*) and N Amo	lon-Friab	e Prod	edun Abate Ty	meni pe	
□ ≥160 sf or ≥260 lf  Locatio Asbestos-Containing TO BE AB	g Material (ACM) BATED lility	Is Lo Non Used ! Maint Custod	ocation rmally Solely tenanc dial Sta (12)	by	Asbestos Co (i.e. therm sur	Description on taining all system facing, V	☐ Mini- ☐ Glow ☐ Non- on of Material ( ns insulati	Enclosure ebag Proc Exempted ACM)	edure (*) and N Amo	ount ecify	e Prod	œdun Abate	men	
Locatio Asbestos-Containing TO BE AB In Fact (13)	g Material (ACM) BATED Hility )	Is Lo Non Used ! Maint Custod	ocation rmally Solely lenance	n by e/	Asbestos Co (i.e. therm sur othe	Description ontaining all system facing, Vir miscella	☐ Mini- ☐ Glow ☑ Non- In of Material (. Ins insulati AT, or aneous)	Enclosure ebag Proc Exempted ACM)	edure (*) and f  Amo (Spe	ount ecify r LF)	e Proo	edun Abate Ty	meni pe	
Locatio Asbestos-Containing TO BE AB In Fact	g Material (ACM) BATED Hility )	Is Lo Non Used ! Maint Custod	ocation rmally Solely tenanc dial Sta (12)	by	Asbestos Co (i.e. therm sur	Description ontaining all system facing, Vir miscella	☐ Mini- ☐ Glow ☑ Non- In of Material (. Ins insulati AT, or aneous)	Enclosure ebag Proc Exempted ACM)	edure (*) and f  Amo (Spe	ount ecify	e Prod	edun Abate Ty	meni pe	Enclosure
Locatio Asbestos-Containing TO BE AB In Fact (13)	g Material (ACM) BATED Hility )	Is Lo Non Used ! Maint Custod	ocation rmally Solely tenanc dial Sta (12)	by e/ aff?	Asbestos Co (i.e. therm sur othe	Description ontaining all system facing, Vir miscella	☐ Mini- ☐ Glow ☑ Non- In of Material (. Ins insulati AT, or aneous)	Enclosure ebag Proc Exempted ACM)	edure (*) and f  Amo (Spe	ount ecify r LF)	e Proo	edun Abate Ty	meni pe	Γ
Locatio Asbestos-Containing TO BE AB In Fact (13)	g Material (ACM) BATED Hility )	Is Lo Non Used ! Maint Custod	ocation rmally Solely tenanc dial Sta (12)	by e/ aff?	Asbestos Co (i.e. therm sum other	Description ontaining all system facing, Vir miscella	☐ Mini- ☐ Glow ☑ Non- In of Material (. Ins insulati AT, or aneous)	Enclosure ebag Proc Exempted ACM)	edure (*) and f  Amo (Spe	ount ecify r LF)	e Proo	edun Abate Ty	meni pe	Γ
Locatio Asbestos-Containing TO BE AB In Fact (13)	g Material (ACM) BATED Hility )	Is Lo Non Used ! Maint Custod	ocation rmally Solely tenanc dial Sta (12)	by e/ aff?	Asbestos Co (i.e. therm sum other	Description ontaining all system facing, Vir miscella	☐ Mini- ☐ Glow ☑ Non- In of Material (. Ins insulati AT, or aneous)	Enclosure ebag Proc Exempted ACM)	edure (*) and f  Amo (Spe	ount ecify r LF)	e Proo	edun Abate Ty	meni pe	Γ
Locatio Asbestos-Containing TO BE AB In Fact (13)  Women's Detent	g Material (ACM) BATED solidity ) tion Ceneter	Is Lo Non Used ! Maint Custod	notition ocation rmally Solely tenanodial Sta (12)	by e/ aff? N/A	Asbestos Co (i.e. therm sum other Transite	Description ontaining all system facing, Vir miscella	Mini- Glow Non- n of Material ( ns insulati AT, or aneous) s in w	Enclosure ebag Proc Exempted ACM) ion,	Amo (Spe SF o	ount edity r LF) anels	e Prod Removal	Abate Ty Repair	men pe Encapsulate	Γ
Locatio Asbestos-Containing TO BE AE In Fact (13)  Women 's Detent	g Material (ACM) BATED Illity  tion Ceneter	Is Lo Non Used ! Maint Custod	nolition ocation rmally Solely lenance dial Sta (12) No	by e/ aff?  N/A  N/A  DEP Wuler ID	Asbestos Co (i.e. therm sur othe  Transite frames.	Description on taining all system facing, Vr miscellar panel	Mini-Glow Non- on of Material ( ns insulatinat, or aneous) s in w	Enclosure ebag Proc Exempted ACM) ion, indow	Amo (Spe SF o	ount edity r LF) anels	e Prod Removal	Abate Ty Repair	men pe Encapsulate	Γ
Locatio Asbestos-Containing TO BE AB In Fac (13)  Women's Detent	g Material (ACM) BATED Illity  tion Ceneter	Is Lo Non Used ! Maint Custod	nolition ocation rmally Solely lenance dial Sta (12) No	by e/ aff? N/A N/A	Asbestos Co (i.e. therm sur othe  Transite frames.	Description ontaining all system facing, Var miscellar panel	Mini-Glow Non- on of Material (institution in sinsulation AT, or aneous)  s in w	Enclosure ebag Proc Exempted  ACM) ion, indow  Name of Fullyto	Amo (Spe SF o	ount edity r LF) anels	e Prod Removal	Abate Ty Repair	men pe Encapsulate	
Locatio Asbestos-Containing TO BE AB In Fact (13)  Women's Detent  Name of Registered Wa Circle Rubbish City, State	g Material (ACM) BATED Illity  tion Ceneter	Is Lo Non Used ! Maint Custod	nolition ocation rmally Solely lenance dial Sta (12) No	by e/ aff?  N/A  N/A  DEP Wuler ID	Asbestos Co (i.e. therm sur othe  Transite frames.	Description ontaining all system facing, Vr miscellar panel	Mini-Glow Non- on of Material (institution in sinsulation AT, or aneous)  s in w	Enclosure ebag Proc Exempted  ACM) ion, indow  Name of Fullyto acilit City, State	Amore (Spenser) Amore SF o	ount edity r LF) anels	Reco	Repair Over	emenipe Encapsulate	Γ
Locatio Asbestos-Containing TO BE AB In Fact (13) Women's Detent  Name of Registered Wa Circle Rubbish	g Material (ACM) BATED Illity  tion Ceneter	Is Lo Non Used ! Maint Custod	nolition ocation rmally Solely lenance dial Sta (12) No	by e/ aff?  N/A  N/A  DEP Wuler ID	Asbestos Co (i.e. therm sur othe  Transite frames.	Description ontaining all system facing, Var miscellar panel	Mini-Glow Non- on of Material ( ns insulatinat, or aneous) s in w	Enclosure ebag Proc Exempted  ACM) ion, indow  Name of Fullyto acilit City, State	Amore (Spenser) Amore SF o	ount edity r LF) anels	Rec Rec	Repair Over	emenipe Encapsulate	Γ

State of NJ
Notification of Asbestos Abatement

D&S Proj. #: MS 11-443	-	(Pursuan	t to NJAC	8:60 an	d 12:120)	· district Parties Linear		1						
						一种"图》和(	1 1 1	111			THUMP.			
Date of Notification (1)	Name of	Building Owner/	Operator (2)		THU DE	to the siture 2 said	[28] AIPCO		i					
1 1 / 0 2 / 1 1		ONNER			1100	(sigifalbio)	911	1)	1		DIG.			
Agencies Notified Type Notification	Street Ac	idress	* *AMESTICAL		Date:	II Solf Time	9129		1					
EPA Initial Amended	628 E	MBREE CRES	SCENT			21	n many later -		1		RSD4_			
DEP Amendment #:	City, Sta	te, Zip Code	2011		1	COESTOS CO								
DOL Emergency			7090		1	M. Constitution of the Con		-	-		entrante.			
DOH (Including justification)	Name of	Contact			} L	Letebrione	- Partition							
☐ DCA ☐ Cancellation	1.0	CONNER		-2.	-			_	_					
		FACIL	ITY INFORMA	ATION	1.00		25							
Name of facility where abatement is t	aking place (3)					Type of Facility (	() (D)		B11-30-30-14-0					
A STANDARD CONTRACTOR OF THE STANDARD CONTRACTOR				*		1 1 1		than	K-11	21				
J. O'CONNER										•1				
Street Address						Bldgs./	Facility (4) School (K-12) Subchapter 8 (Other than K-10 other (Private/Commorcial Bldgs./Homes, etc. Feet # of Floors Bldgs./Homes, etc. Feet # of Floors Bldgs./Homes Number (W159)  License Number (W159)  License Number (W159)  Amount # R R R R R R R R R R R R R R R R R R							
628 EMBREE CRESCENT						Square Feet	# of Floors		Blag	. Age	ł.			
City (5)	County (6)				Code (7)	Ouropt Head C	ier if being de		shed	)				
THE COUNTY IN	INTON	County (6)  UNION  Wher (8)  ASCM No.  Phone Number  Ched. Completion Date (11)  1/11/11  sek only one)  period of abatement:  mal facility hours-  ovation  cation normally used solely  neintenance/custodia/ (12)  BS No N/A  PIPE INSULAT  NJDEP Hauler ID# Cubic Yards of Waste  13506  Disposal Date  11/03/11  Signature		(SIMIR)	tise carry y	CDI(etti Ose (i	IOI II DOING GO							
WESTFIELD  Name of Monitoring Firm Hired by 8	-		ASCM No.	IN	amo of Abetemen	t Contractor (9)				9				
is an in the same of the same	6	approve			D & SRESTO	RATION, INC.								
Street Address	***************************************		***************************************	5	treet Address									
					20 California	THE RESERVE THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.			diameter.	-	Description			
City, State, Zip Cods				Ci	ty, State, Zip Cod									
			* 		Paterson, NJ	AND DESCRIPTION OF THE PARTY OF	I Joanca Nu	mhe		·				
Project Manager for Monitoring Flrm	*	Phone Number	er		elephone Number 973-345-802									
					Jame of OSHA Me									
Start Data (10)	Sched, Con	npletion Date (11	1 .		D & S Restor			-	-	-1	- corn			
11/02/11	11/11/11		120-0	5	treet Address									
Occupancy Status During Abatement			*		20 California									
Facility closed/vacated during Abatement performed outside Describe:	entire period of of normal facilit	abatement: y hours-			ity, State, Zip Coo									
Other-Describe: 12:00 PM				_	Paterson, NJ									
Scope of Work (check all that apply	1)				[	Full Containment Mini-enclosure	w/negative pre	258U	re					
$\boxtimes$ >3 sf or >3 if	Ranovation				Ę	Glovebag proced	ure							
≥180 af or ≥260 lf	Domolition					Non-Exempted (*	) and Non-fria		_		·			
Location of	Is location nor	mally used solely	1		20.50.000.00.000.0000.0000.0000.0000.00	amount	1		2000	E	=			
asbestos-containing material (acm) to be	staff(12)				bestos-containing		SF or		p	Ĉ B	n			
abated in facility (13)	Yes	No N/A	111000	. ( ,		LP)	1	٧	ī	p	L			
		-	DIPE INS	III ATIO	N	111 L FT		<u> </u>	H	П	$\vdash$			
BASEMENT			7	CLACATO				fit		Ħ	同			
								7						
							1							
Registered Waste Hauler		thurs, in t		f Waste	Name of Registe	rod Landfill	ECOVED3	TDV						
D & S RESTORATION, INC.	13506					N, RESOURCE I	LECUVERY							
City, State PATBRSON, NJ 07503					Oity, State TULLYTOW	/N PA								
Completed by (Print or Type)	l Title	111031			LULLION	AN, LEA	Date	-		-				
BOGDAN JOLDZIC	PRESIDEN	Т					11/02/1	1						
ASB-41			tos licensure	exempted	activities.									

Date: // / 201/
D & S Restoration, Inc.
20 California Avenue
Paterson, NJ 07503



Worksite Address:

028 Embree Cresant

westfull

To Whom It May Concern:

I am the owner of the above referenced Worksite address. The furnace located in my basement is inoperative and needs to be replaced ASAP in order to heat the house.

The furnace is insulated with asbestos material. The asbestos needs to be removed prior to installation of the new furnace.

I understand that various Federal and State Agencies require written 10-day notification prior to starting any asbestos abatement work, and that it may be possible to start the asbestos abatement work sooner than the 10 day period in the event of an emergency.

Since I currently do not have heat in my house, I feel that the asbestos abatement work should be given immediate attention.

Please accept this letter as a request to commence with asbestos abatement acitivities as soon as possible and upon receiving approval to do so by the applicable Federal and State Agencies having jurisdiction.

If you have any questions or comments, please do not hesitate to contact me at the following telephone number:

Very truly yours,

Printed Name of owner

Signature of owner

# State of NJ Notification of Asbestos Abatement (Pursuant to N.IAC 8:60 and 12:120)

D&S Proj. #: MS 11-443	-	(Pursu	ant to	NJAC 8	3:60 and	1 12:120)	a net del politico de con pa	# 0	ひろ	99	13	5	_		
Date of Notification (1)	J. O'CO	Building Own	er/Ope	erator (2)		F	C.	EIVE	I I I	- (			_		
Agencies Notified   Type Notification   Initial   Amended		dress MBREE CR e, Zip Code	ESCI	ENT			NOV	7 2011	lame?						
Amendment #:  DOL  Emergency (including	_	FIELD, N.	J 0709	00		2.4.1	ASBES	Telephone N	umber				_		
DOH (Including justification)		CONNER						10.1			24		_		
		FAC	CILITY	INFORMA	TION	Commence of the second		2 1 5							
Name of facility where abatement is ta	king place (3)						Тур	e of Facility (4) School (K		er than	n K-12	2)			
J. O'CONNER								Other (Pri	vate/Com						
Street Address 628 EMBREE CRESCENT							Sc	Bldgs./Ho	mes, etc. of Floors	T	Bldg	. Age			
City (5)	County (6)					Code (7) use only)	C	urrent Use (Prior	if being	demol	ished	)	_		
WESTFIELD	UNION				- 1 TAG	ame of Abatemer	at Cont	ractor (9)					_		
Name of Monitoring Firm Hired by Blo	dg. Owner (8)		AS	CM No.		D & S RESTO							_		
Street Address			-			20 California	rnia Ave.								
City, State, Zip Code						y, State, Zip Coo Paterson, NJ	07503		icense N	lumbo	· ·		_		
Project Manager for Monitoring Firm		Phone Nur	mber			973-345-802	20			00159					
Start Date (10)	Sched. Com	pletion Date	(11)		N	ame of OSHA M D & S Restor		Inc.							
	11/11/11				S	treet Address	utross,								
11/02/11 Occupancy Status During Abatement		ne)				20 California	Avent	ie							
Facility closed/vacated during e	entire period of	abatement.			_	ity, State, Zip Co Paterson, NJ		2							
Describe: 12:00 PM					-11	Paterson, NJ		Containment w/r	negative	ressi	ıre				
Scope of Work (check all that apply $>3$ sf or $>3$ If	Renovation			**			Min	i-enclosure vebag procedure n-Exempted (*) a	è			dure			
≥160 sf or ≥260 lf Location of asbestos-containing	Is location nor by maintenance	mally used so ce/custodial	olely	Descript	tion of as	bestos-containing		Amount (Specify SF		R e m	R e p	E n c	E n c		
material (acm) to be abated in facility (13)	staff(12) Yes	No N	/A	material	(ACM)			ĹF)	1 72%	o v e	a i r	a p	L		
BASEMENT		X		PIPE INS	ULATIO	N		111 L FT			님		님		
			=												
			=								닏	님	붜		
			=									Ш			
Registered Waste Hauler D & S RESTORATION, INC.		Hauler ID#	2	oic Yards o YDS	f Waste		ered La	andfill ESOURCE RE	COVE	Y_					
City, State PATERSON, NJ 07503			sal Da 03/11			City, State TULLYTO	WN, P	Α	Date						
Completed by (Print or Type) BOGDAN JOLDZIC	Title PRESIDEN	Т		Signature		Lastivities			11/02	/11					
	* Do not use th	is form for as	sbestos	licensure	exempted	activities.									

Fax: Nov Z ZU11 10:14am P001/001

State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60 and 12:120) D&S Prol. #: MR 11-444 **使到时代自由的** Name of Building Owner/Operator (2) Date of Notification (1) 1 11 1/10 12 1/11 11 RONALD GONZALEZ Type Notification Agencies Notified Street Address Initial EPA 618 VARSITY ROAD Amended DEP City, State, Zip Code Amendment #: ASSES DOL SO. ORANGE, NJ 07079 M Emergency Telephone Number (including Name of Contact DOI! Justification) 201-741-8039 ☐ DGA RONALD GONZALES Cancellation FACILITY INFORMATION Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) Subchapter 8 (Other than K-12) RONALD GONZALEZ Other (Private/Commercial Street Address Bldgs./Homes, etc. # of Floors Bldg. Age Square Feet SIR VARSITY ROAD County Code (7) County (6) City (5) Current Uco (Prior if being demolished) (State use only) ESSEX SO. ORANGE Name of Abetomont Contractor (9) ASCM No. Name of Monitoring Firm Hired by Bidg. Owner (8) D & S RESTORATION, INC. Street Address Street Address 20 California Ave. City, State, Zip Code City, State, Zip Code Paterson, NJ 07503 Licanse Number Telephone Number Phone Number Project Manager for Monitoring Firm 00159 973-345-8020 Name of OSHA Monitor Sched. Completion Date (11) Start Date (10) D & S Restoration, Inc. Street Address 11/07/11 11/18/11 20 California Avenue Occupancy Status During Abatement (Check only one) City, State, Zip Code Facility closed/vacated during entire period of abatement Abatement performed outside of normal facility hours-Describe: Patersun, NJ 07503 Other-Describe: NORMAL HOURS Full Containment w/negative pressure Scope of Work (check all that apply) Mini-enclosure Renovation >3 sf or >3 If Glovebag procedure Non-Exempted (\*) and Non-friable procedure Demolition ≥160 sf or ≥260 lf R E is location normally used solely F. C п Location of by maintenance/custodial Amount n Description of asbestos-containing m P asbestos-containing (Spedfy SF or staff(12) C 0 material (ACM) a a material (acm) to be 1 V abated in facility (13) P Yes No N/A R X 20 L FT PIPE INSULATION BASEMENT X BOILER INSULATION 30 SQ FT BASEMENT BOILER Name of Registered Landfill Cubic Yards of Waste Registered Waste Hauler NJOEP Hauler ID TULLYTOWN, RESOURCE RECOVERY D & S RESTORATION, INC. 13506 1 YD Disposal Date City, State TULLYTOWN, PA 11/08/11 PATERSON, NJ 07503 Date Signature Completed by (Print or Type) Tite 11/02/11

Do not use this form for asbestos licensure exempted activities.

PRESIDENT

BOGDAN JOLDZIC

ASB-41

Date: 10 | 3 |

D & S Restoration, Inc. 20 California Avenuo Paterson, NJ 07503



618 VARSITY RD., South Orange, N. J. 07079 Worksite

To Whom If May Concern:

I am the owner of the above referenced Worksite address. The furnace located in my hasement is inoperative and needs to be replaced ASAP in order to heat the house.

The furnace is insulated with asbestos material. The asbestos needs to be removed prior to installation of the new furnace.

1 understand that various Federal and State Agencies require written 10-day notification prior to starting any asbestos abatement work, and that it may be possible to start the asbestos abatement work sooner than the 10 day period in the event of an emergency.

Since I currently do not have heat in my house, I feel that the asbestos abatement work should be given immediate attention.

Please accept this letter as a request to commence with asbestos abatement acitivities as soon as possible and upon receiving approval to do so by the applicable Federal and State Agencies having jurisdiction.

If you have any questions or comments, please do not hesitate to contact me at the following telephone number:

Very truly yours,

State of NJ

					State of	NJ	Abatama	int					201	en er vester	NEOR .
			1	Notification	on of Asber to NJAC 8	5:60 :	and 12:12	20) -~	gantin - Marin	man Lancongary Mila	and more and	per year		7	
D&S Proj. #: MS 11-44	44		(	Puisuaiii	10 140/10 0	,.00 (	arra (=::-		TO BE	11/1	53	19		L,	
									ALTER S	A P	FIN	TE.	WITTEN TO	11	_
Date of Notification (1)		Name	e of Buildir	ng Owner/O	perator (2)			8 A		15 6		1 152	4		
$\frac{1}{1} \frac{1}{1} \frac{1}{1} \frac{0}{12} \frac{2}{1} \frac{1}{1} \frac{1}{1}$	J	RO	NALD C	ONZALI	EZ			***	least,	<u> </u>			4		_
Agencies Notified Type Not	tification	Stree	t Address							NOV	- 7 2	011	7	$J^+$	
EPA Initial	od	61	8 VARSI	TY ROA	D				Lul.						_
DEP Amendme		City,	State, Zip	Code				**		ASREST	OS CONTR	OL K	4-45		
DOL	COLUMN A DATE	S	O. ORAN	IGE, NJ 0	7079			)		1.1	PENSING				
DOH (includ	ing		e of Conta						barranto-	Telephone	Number				
justifica		ll R	ONALD	GONZAI	LES			Special	Iz ·	<b>4</b> 01.741	8030			-	
Cance	llation	11	OTTIES			TION									
				FACILI	Y INFORMA	TION		T	Type	e of Facility (4)					_
Name of facility where abater	ment is tak	ing place	(3)						1,750	School	(K - 12)				
RONALD GONZALEZ											oter 8 (Oth			2)	
							16			Other (P	rivate/Colomes, etc	mmerci	ial		
Street Address									Sai		of Floors		Bldg	Age	
618 VARSITY ROAD						Carr	nty Code (7	7)	Joqu	adio i doi					
City (5)	7	County	(6)				ite use only		Cu	rrent Use (Pri	or if being	demol	ished		77.5
-a an inter		ESSE	X												_
SO. ORANGE  Name of Monitoring Firm Hir	ed by Bldo	0.000			ASCM No.	7	Name of A	Abatement	Contra	actor (9)					
Name of Monitoring 1 in 1 in	00 0, 0							RESTOR	ATIC	N, INC.					
Street Address							Street Add	dress							
Street Address								lifornia A					_		
City, State, Zip Code							City, State								
Oity, Otato, 2.p 3011								son, NJ 0	7503		License	Numbe	r		
Project Manager for Monitori	ng Firm		Pho	ne Numbe				e Number 345-8020	1			)159	,1		
1 Tojoot managa	-50						34	OSHA Mo						78.0	
Start Date (10)		Sched.	Completio	n Date (11)				S Restora		nc.					
Start Date (10)							Street Ad		tion, i						
11/07/11		11/18/						lifornia A	venu	e					
Occupancy Status During Ab	during en	tire perior	d of abater	ment.		1		e, Zip Cod							
Abatement performed	outside of	normal fa	cility hour	s-											
Describe: NOI  Other-Describe: NOI	MAI HO	IRS				_	Pater	rson, NJ (							-
Other-Describe:	-t anniu									Containment v	/negative	pressi	ure		
Scope of Work (check all the same states are same same same same same same same sam		enovation	,					Ž.	Mini-	enclosure ebag procedu	ro				
	~ ~							2	Non	-Exempted (*)	and Non-	friable	proce	dure	
≥160 sf or ≥260 lf		emolition		used solely								R	R	E	E
Location of		s location by mainte	nance/cus	todial	Descript	tion of	asbestos-c	containing		Amount (Specify	SE or	m	p	n C	n
asbestos-containing material (acm) to be		staff(12)		т—	material					LF)	SF UI	0	a	a p	L
abated in facility (13)		Yes	No	N/A								e	r	P	
				1	PIPE INS	ULA	TION			20 L FT			닏	닏	님
BASEMENT				#	BOILER					30 SQ FT			닏		片
BASEMENT BOILER				-								ᆚᆜ	ᆜ	ᆜ	님
				-								40		닏	片
				╬═										Ш	
		TNUD	P Hauler	ID# TO	ubic Yards o	f Was	te Name	of Registe	red La	ndfill	COVE	DV			
Registered Waste Hauler D & S RESTORATION	N, INC.	135	506		YD		TUL		N, RE	SOURCE R	ECOVE	1/ 1	-		
City, State				Disposal [			City, S	State LLYTOW	N P	1					
PATERSON, NJ 075				11/08/1	Signature		_   101	LLITOW	11,11		Date				
Completed by (Print or Type)										11/0	2/11				
BOGDAN JOLDZIC		P. L.A.	a this form	for ashest	os licensure	exem	oted activitie	es.							

						Fax:		فده به دیدی د در پ	Nov 2 2011	08:19am P0	0/10	01		
D&S Proj. #		-	. DD.2.0	Jotificat	State of Asb to NJAC	estos i	Abat and 1	2:120) _5_	NJ Dept. of	APPROVES Health & Sel	) nior S	ervice	38	
Date of Nollfication (	1)	Nam	e of Buildin	g Owner/	Operator (2)				) Bogg	(aidnature)	19:	38		
1 11 1/16 12		NO	ORTH JER	SEYD	EVELOPM	fenta	LCE	ENTER		II W IC	-	HF		_
Agencies Notified	Type Notification		t Address	TO THE PARTY OF TH					111					
☐ EPA ·	Amended :	16	9 MINNIS	SINK R	OAD			14	NOV -	7 2011	11 1	#		
DEP	Amendment #:	City,	State, Zip (	Code				j l			Nasas	1		
DOL .	Emergency ·		OTOWA,						Telephon LICENS	Number		+	********	Hann.
□ DCA	(including Justification)		e of Contac		TER				LIGENS	ING		<u></u>		
	Cancellation	. 11 - 2	, LE CE CO		ITY INFORM	MATION			Name of the state	-				
		-leina piane	(3)						Type of Facility (	4) 1 (K - 12)				
Name of facility wh									- Land	apter & (Othe	r than	ı K-12	2)	
HEALTH CAR	E CENTER BA	SEMENT	RECREA	TION	ROOM		_		12 Other	(Private/Com	morci	al		
Street Address									Bidgs	Homes, etc.			Age	
169 MINNISIN	IK ROAD								Square Feet	# of Floors		pau,	, Ado	
City (5)		County	(6)					ode (7) e only)	Current Use (P	rior if being o	iemol	bed	Ĭ	
AWOTOT		PASS					1 10-1-1	is of Abatement	Contractor (9)					<b>SF</b>
Name of Monitorin	ig Firm Hired by B	dg. Owner	(8)		ASGM No.			& S RESTOR						
Act Supravious				l			Stre	et Address		<u> </u>				-
Street Address								O California A	ve.					-
City, State, Zip Co	de				C THE STATE OF THE		1	State, Zip Coda	A CONTRACTOR OF THE CONTRACTOR					
Dity; Otto: AIP	7.7							Paterson, NJ 07	503	License N	umbe	AT .		-
Project Manager f	or Monitoring Firm		Pho	ne Numb	ber		Tele	ephone Number 973-345-8020			159			
							Nai	me of OSHA Mor	*** ***					
Start Date (10)		Eched.	Completion	n Date (1	1)		1	A S Restorat				and the same of		-
11/02/11		11/06	/11					et Address						
Occupancy Status	During Abatemer	t (Check of	nly one)				1 1	0 California A	The second second second					
Facility clos	ed/vacated during performed outside	entire perio	od of abaten	nont.			City	r, State, Zip Code						
Dogodho:		or normal	doney noor					Paterson, NJ 0	7503					
	: (Z: 00 PM)						11-		Full Containment	t w/negative	press	ure		
Scope of Work (  >3 sf or >3	check all that appl							X	Mini-enclosure					
Samuel State State	<del></del>	Renovation						×	Glovebag proced Non-Exempted	ture (*) and Non-f	riable	bloce	dure	
· □ ≥160 sf or	>260 IT [_]		n normally i	used sole	N/			h-	1,110.		R	R	E	TE
Locatión o asbestos-c		by mainte	enance/cus	todial		ription o	f asbe	stos-containing	Amoun (Specif		m	. p	C	ľ
material (a	cm) to be	staff(12)	T	T	— mate	rial (ACI			LF)	y 31 0.	Q V	a	a D	1
abared in 1	acility (13)	Yes	No	N/A							6	1	-	+
BASEMENT	REC ROOM		X		PIPE	ISULA	TIOI	N.	<g ft<="" l="" td=""><td></td><td>N N</td><td>片</td><td>H</td><td>卄</td></g>		N N	片	H	卄
					<u> </u>						H	H	1	卡
											卄	卅	H	tr
						**					H	片	m	ti
			EP Hauler	10"	Cubic Yard	s of Was	ste II	Name of Register	ed Landfill		-[][	10	lana.d	1,-
D & S RESTO	ORATION, INC		506	Diapose	1 YD			TULLYTOWN City, State	RESOURCE	RECOVER	У			
City, State PATERSON	NI 07503	*		ызрезе	n Date		1	TULLYTOW	N, PA					
Completed by (F		Title		1	Signatu	ira.		No.	<u> </u>	Date	1			
BOGDAN J		PRESI	DENT					*		11/01	/11		-	
ASB-41		* Do not u	se this form	for asb	astos licensu	re exem	pted a	activities.						



NOV - 7 2011

CHRIS CHRISTIE GOVERNOR

KIM GUADAGNO LT. GOVERNOR DEPARTMENT OF HUMAN SERVICES

DIVISION OF DEVELOPMENTAL DISABILITIES
PO BOX 726

TRENTON, NJ 08625-0726 Visit us on the web at:

www.state.nj.us/humanservices/ddd

Dawn Apgar
Deputy Commissioner

Jennifer Velez

COMMISSIONER

TEL. (609) 631-2200

Husam E. Abdallah Chief Executive Officer

> TEL. (973) 256-1700 P.O. BOX 169 TOTOWA, NJ 07511

01 November 2011

D&S Restoration, Inc. 20 California Ave. Paterson, NJ 07503

Subject: Health Care Ctr. Basement break room

Dear NJDOL

I, Steven Slaughter (Engineer in Charge of Maintenance) am requesting an emergency abatement of 6 linear feet of ACM pipe insulation in break room ceiling to allow for steam leak repair. The bldg is currently without heat until repairs are completed.

Sincerely Yours

Steven J. Slaughter Engineer in Charge of

Maintenance 1

File

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

4003941

D&S Proj. #: MS 11-441	(1	oursuant to	0 140/10 0		, income consolida-	#	UU		n. Lugar	A1/24		
	Name of Buildin	a Owner/Op	erator (2)			(	e a enjestigen en e		some.	-		
Date of Notification (1)	NORTH JEF	CEV DEV	EL OPME	NTAL CE	ENTER	) E	C F		B	+	_	-
1 1 1/10 2 1/11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	NORTH JER Street Address	(SEY DEV	ELOI ME			VI						
Agencies Notified Type Notification  EPA Initial		anuz no A	VD.			111				1	_	_
H Amended	169 MINNI		ND .			Uj I	<u> 404 – </u>	7 2011	العدوا ا			
DEP Amendment #:	City, State, Zip								1	+		_
☑ DOL ☑ Emergency	TOTOWA,					T	elephone I	Jumber &		Ì		
DOH (including justification)			TD.		L		9731890	1513				_
DCA Cancellation	STEVE SI					4 18 4179	AND PROPERTY.	(Barristandry The I				
		FACILIT'	Y INFORMA	TION	Walter orders	Type of	Facility (4)					_
Name of facility where abatement is taki	ng place (3)					Type or	School	(K - 12)				
Name of facility where abatement is an	TO DECEMBE	ATION DO	OM				Subchar	pter 8 (Other	than h	(-12)		
HEALTH CARE CENTER BASE	MENT RECKE	A HON KC	OIVI			. 🗵	Other (F	Private/Comm Homes, etc.	nercial			
Street Address						Square		of Floors	TE	Bldg. A	\ge	_
169 MINNISINK ROAD									_ _			_
City (5)	County (6)			County C	e only)	Curre	nt Use (Pr	ior if being de	emolis	ned)		
City (3)												-
TOTOWA	PASSAIC		ASCM No.		me of Abatement							
Name of Monitoring Firm Hired by Bldg	J. Owner (o)			D	& S RESTOR	ATION	, INC.					_
					eet Address							
Street Address					20 California A							
				100	, State, Zip Code							
City, State, Zip Code					Paterson, NJ 0	/503		License N	umber			
Project Manager for Monitoring Firm	Ph	none Numbe	r	Te	973-345-8020	)		001	59			_
Project Manager for Monitoring 1				Ns	ame of OSHA Mo							
	Sched. Completi	on Date (11)	)		D & S Restora	tion, Inc	o					
Start Date (10)	2000000			St	reet Address							
11/02/11	11/06/11 (Chack only one)				20 California A						===	==
Occupancy Status During Abatement	ntire neriou ui avai	ement.		Ci	ty, State, Zip Cod	ie						
Facility closed/vacated during en	f normal facility hou	urs-			- NI (	07503						
Describe: 12:00 PM				_	Paterson, NJ	75.00	antainmen	t w/negative p	pressu	re		
Describe: 12: 00 PM  Other-Describe: 12: 00 PM					L		nclosure					
Scope of Work (check all that apply) $\ge 3$ sf or $\ge 3$ If	Renovation					5 01-110	had proced	dure	riable	nroce	dure	
M.34	Demolition					Non-l	exempted	(*) and Non-f	R	R	E	E
≥160 sf or ≥260 lf	Is location normal	ly used solel	у				Amoun	t	e m	e p	n c	n
Location of	by maintenance/c	ustodial	Desc	ription of as	bestos-containing		(Specif	fy SF or	0	a	а	L
asbestos-containing material (acm) to be	staff(12)		- mate	rial (ACM)			LF)		v e	r	р	L
abated in facility (13)	Yes No	N/A		TOTAL A TOTAL	ON		<6 L FT		X		旦	TĒ
BASEMENT REC ROOM			PIPE	NSULATION CONTRACTOR	011						닏	1
DASEMENT TOO TO			<u> </u>						10	닏	붜	+
			-						44	분	ዙ	+
			4						ᆚᆜ			Tr
		Jan ID# T	Cubic Yard	s of Waste	Name of Regist	ered Lar	dfill	RECOVE	RY			
Registered Waste Hauler	NJDEP Hau 13506	ier iu#	1 YD		TULLYTOV	VN KES	OURCE	ICCO V DI				
D & S RESTORATION, INC.	15500	Disposa	l Date		City, State TULLYTO	WN PA						_
City, State PATERSON, NJ 07503					TULLYTO	1111, 17		Date				
Completed by (Print or Type)	Title		Signat	ure				11/0	1/11			_
BOGDAN JOLDZIC	PRESIDENT	form for asbe	estos licens	ure exempte	ed activities.							

Notification of Asbestos Abatement (Pursuant to NJAC 8:60 and 12:120) D&S Proj. #: MS 11-445 Name of Building Owner/Operator (2) Date of Notification (1) |1| |1| / |0| |2| / |1| |1|LAWRENCE JADLOCKI Agencies Notified Type Notification Street Address NOV - 72011 | Initial **EPA** 682 RIVER ROAD Amended DEP City, State, Zip Code Amendment #: DOL HILLSBOROUGH, J Emergency Telephone Number (including DOH Name of Contact justification) DCA DCA LAWRENCE JADLOCKI Cancellation **FACILITY INFORMATION** Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) Subchapter 8 (Other than K-12) LAWRENCE JADLOCKI Other (Private/Commercial Street Address Bldgs./Homes, etc. # of Floors Bldg. Age Square Feet 682 RIVER ROAD County Code (7) County (6) City (5) (State use only) Current Use (Prior if being demolished) SOMERSET HILLSBOROUGH Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. D & S RESTORATION, INC. Street Address Street Address 20 California Ave. City, State, Zip Code City, State, Zip Code Paterson, NJ 07503 License Number Telephone Number Phone Number Project Manager for Monitoring Firm 00159 973-345-8020 Name of OSHA Monitor Sched. Completion Date (11) Start Date (10) D & S Restoration, Inc. Street Address 11/28/11 11/14/11 Occupancy Status During Abatement (Check only one) 20 California Avenue Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Other-Describe: NORMAL HOURS Paterson, NJ 07503 Full Containment w/negative pressure Scope of Work (check all that apply) Mini-enclosure >3 sf or >3 If Glovebag procedure Demolition Non-Exempted (\*) and Non-friable procedure >160 sf or >260 lf Is location normally used solely E е Location of n by maintenance/custodial Amount Description of asbestos-containing m asbestos-containing p C (Specify SF or staff(12) C material (ACM) material (acm) to be a a ٧ abated in facility (13) Yes No N/A p 230 L FT PIPE INSULATION BASEMENT X PIPE INSULATION 26 L FT BASEMENT CRAWL SPACE X 30 SQ FT WATER TANK INSULATION BASEMENT Name of Registered Landfill Cubic Yards of Waste NJDEP Hauler ID# Registered Waste Hauler TULLYTOWN, RESOURCE RECOVERY 13506 3 YD D & S RESTORATION, INC. City, State Disposal Date City, State TULLYTOWN, PA 11/15/11 PATERSON, NJ 07503 Date Signature Completed by (Print or Type) Title

**BOGDAN JOLDZIC** 

PRESIDENT

Do not use this form for asbestos licensure exempted activities.

11/02/11

State of Ivu

					Fax:		Nov	2 2011	09:03am	P001/00	1	
UZ. EVI . ("DD)			S	state of I	41		Γ		SECHONE!	g)*		
		Notific		& Achne!	ine Abate	ement		J Dent. of	lealth & Se	nior Serv	rices	
a		(Purst	ant to f	AJAC 8:	60 and 1	2:120)	= a	2 11 11	(signature)	71	-1	-
D&S Proj. #: MS 11-442							EG	Date:	20161	me: 6	13	3
	I Name of	Bullding Own	ner/Opera	tor (2)		1111		Dere - 2 ale	11	111		
ate of Notification (1)		DA WOMA				1 IID	HOA	7 -20	H L	7		
1 11 1/10 12 / 1 11	Street A		NO.	and the last of th	7	1 11 1	1401		1	Ì		
gencies Notified Type Notification		ARLINGTO	N AVE	NUE		1.		the CONTR	1L &			
Amended	City St	ate, Zip Code	-				ASBLE	TOS CONTRI LICENSING	and the second sections of the second			
Amendment w.	Contract of	SEY CITY,					-	Telephone l	Number			
DOL Emergency	Name o	Contact						SELLOON	9655			
justification)	11	NDA WOM	MACK			V-CT-V-C					-	
DCA Gancellation	WA			INFORMA	TION							
			ACILITY	INFORTION !			Type	Facility (4)	(K - 12)			
Name of facility where abatement is tak	ing place (3	3)					1	] School	pter 8 (Oth	er than K	-12)	
					*			A Other /F	dvate/Con	nmercial		
WANDA WOMACK							11	Bldgs./I	tomes, etc		ldg. Ag	ae
Street Address							Squa	re Feet	of Floors	1	iog. · ·	J.
143 ARLINGTON AVENUE	-	71			County	Code (7)		ont Usa (Pr	for If heing	demolist	ned)	
City (5)	County (	<b>D</b> }			(State u	se only)	Cur	ONT USE (F)	101 113			
	HUDS	ON				ins of Abaten	nent Contra	ctor (9)				
JERSEY CITY  Name of Monitoring Firm Hirad by Bld			A.S	SCM No.	I NE	& S REST	OR A TIO	N. INC.			THE REAL PROPERTY.	
Name of Monitoring Fatter in So		171	l_			rect Address	OICH 110.	.,				
The state of the s	-				1100	20 Californ	a Ave.					-
Street Address					- 6	y, State, Zip C						
City, State, Zip Code	-					Paterson, N		-	-	Mbar		
City, Subs, Est		AND TO SERVICE OF SERV				alephone Num	ber		License	Number 0159		
Project Manager for Monitoring Firm		Phone	Number		11	973-345-	8020					-
T TOO SE THE C					- I	lame of OSH/	Monitor	<b>5</b> 0				
Start Date (10)	Sched.	Completion	Safe (1 t)			D & S Res	COTATION, I		- 1 AV	distance of the last of the la		
	11/11/	/11				20 Californ		ε				
11/03/11 Occupancy Status During Abatemen	t (Check on	ily one)			1	City, State, Zip	Codc					
			nt.									
Abatement performed outside	Of Homes	Stilley House				Paterson,	NJ 07503					
Describe: NORMAL H	IOURS						☐ Full	Containmer	it whegstiv	e pressu	re	
Good of Work (check all that appl	እ)						TOTAL CO.	enclosure	dure			
⊠ >3 sf or >3 lf	Renovatio						No	rebag proce -Exempted	(*) and No	n-friable	Proced	E
≥160 sf or ≥260 lf	Demolition	n N	and anight	1						c	0	n
Location of	by maint	on normally us enance/custo	dial	Desc	cription of a	sbestos-conta	aning	Amou (Spac	ify SF or	o	p	c
asbestos-containing material (acm) to be	staff(12)	<del></del>		mate	arial (ACM)			LF)		v e	1	Р
abated in facility (13)	Yes	No	N/A					4 L FT		1 X		
	-	1		PIPE I	NSULAI	IÜN		4 L F 1		TI		
BASEMENT	-							-				
##	-	1						-				П
And the second s	-			1				-				
			1			Warma of D	egistered L	andfill				•
Registered Waste Hauler		DEP Hauler	D#		ds of Wast	TULLY	TOWN, R	ESOURC	E RECOV	/ERY		
D & S RESTORATION, IN		3506		1 YD		City, Stat	6					
City State			Disposal 11/04/	/11		TULLY	TOWN,	PA		***		
PATERSON, NJ 07503			111041	Signa	ture	_			Da	/02/11		
PATEROUN, 113 01300									1 1 1	· Wall A L		-
Completed by (Print or Type) BOGDAN JOLDZIC	Title	IDENT				ted activities.						

#### Kuusela

From: Wanda Womack [womackwanda44@yahoo.com]

Sent: Tuesday, November 01, 2011 4:08 PM

To: Kuusela

Subject: Re: 143 arlington avenue

To Whom It May Concern

1,2011

November

I Wanda Womack Live at 143 Arlington Ave, Jersey City NJ 07305. I have absestos in my home and have No Heat in my home. I need to have the absestos removed immedialetly because I have children in my home and Im living there with no heat. I need immedialely attention Please so I can have heat and the absestos has to be removed.

Thank you , Ms Wanda Womack

From: Kuusela <residential@ds-restoration.com>

To: womackwanda44@yahoo.com

Sent: Tuesday, November 1, 2011 4:37 PM

Subject: 143 arlington avenue



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

#003912

D&S Proj. #: MS 11-442		(Fuisc	idili io				7	the commons	ant of the State o	11					
	1111	Building Owr	ner/Oper	ator (2)		-	TE:	TE	CF	1.14:	E.	100			
Date of Notification (1)		DA WOMA				L			(O) 15				1	17	
1   1   / 1 0   2   / 1 1 1      Agencies Notified   Type Notification	Street Ac		CK				and the state of t	167		- 7 20	11		] ;		
Agencies Notified   Type Notification   Initial		RLINGTO	N AVE	ENUE	2				NON.	1 10		1		-	ē
Amended	City. Sta	te, Zip Code					4	1		and the second second second		j			
Amendment #:		SEY CITY,							Telephone	Number		-			i.
(including		Contact					į L			Care and a second			>		
DOH (including justification)	WA.	NDA WOM	<b>IACK</b>					_ar i Major	ALL VIEW						•
☐ DCA ☐ Cancellation	11			INFORMA	TION		T-MANUTE.	a.K 160				_			-
	(0)							Type o	f Facility (	4) I (K - 12)					
Name of facility where abatement is tak	ing place (3)	)						1 7		apter 8 (C		an K	-12)		
WANDA WOMACK									7 Other	(Private/C	omme	rcial			
Street Address								Carro		/Homes, e		В	dg. A	ge	121
															_
143 ARLINGTON AVENUE	County (6	)			County (State i			Curre	ent Use (F	rior if beir	ng dem	nolish	ed)		
City (5)		>> T													-
JERSEY CITY	HUDSO		TAS	SCM No.			of Abatemen								
Name of Monitoring Firm Hired by Bld	g. Owner (o)				.	D 8	S RESTOR	MOITAS	I, INC.						_
					S		Address	\ TIO							
Street Address							California A State, Zip Cod								
City, State, Zip Code							aterson, NJ								_
City, State, 215 3323			V. mbor			Teler	hone Numbe			Licen	se Nun 0015				
Project Manager for Monitoring Firm		Phone	Number		- 11	(	973-345-802	.0			0013		-		_
		L-fin D	ote (11)			Nam	ne of OSHA M  & S Restor	onitor ation Tr	nc.						
Start Date (10)	Sched. C	ompletion Da	ale (11)		11	Stre	et Address	ation, n							
11/03/11	11/11/1	1					0 California	Avenue							_
Out to During Abatement	(Check only	y one) of abatemer	nt.		11		State, Zip Co								
Cocupancy Status During Abatement  Facility closed/vacated during  Abatement performed outside			7.70				277	07503							
Describe: NOPMAL H	OURS				_	-	Paterson, NJ	0/303	Containme	nt w/nega	tive pr	essul	e		
Describe:NORMAL H	/)							Mini-	enclosure						
Scope of Work (check all that apply >3 sf or >3 if	Renovation	ı						E	ebag prod -Exempte	odure	Non-fria	able p	roce	dure	
	Demolition							∐ Non	-Exemple	u ( ) and i	1	'`	1	-	E
≥160 sf or ≥260 lf	T le location	normally use	ed solely				etes containir		Amou	int		e m	e p	n c	n
Location of asbestos-containing	by mainte staff(12)	nance/custoo		Desc	ription of a rial (ACM	asbe I)	estos-containir	9	(Spe	cify SF or		0 V	a i	a p	L
material (acm) to be abated in facility (13)	Yes	No	N/A									e 🛛	-	· T	
abated in facility (19)	100			I PIPE IN	NSULA"	TIO	N		4 L FT			씕	片	片	E
BASEMENT		-A		1								片	百	宣	T
												Ī			E
	-														
	-			]	To activity	to T	Name of Regi	stered La	andfill			37			
Registered Waste Hauler		EP Hauler II	D#	Cubic Yard	is of was	ie	Name of Regi TULLYTO	WN, RJ	ESOUR(	CE RECO	OVER	Y		_	
D & S RESTORATION, INC	C. 13	506	Disposal				City, State								
City State			11/04	/11			TULLYTO	JWN, P	A		Date				
PATERSON, NJ 07503	Title			Signat	ure						11/02/	/11			_
Completed by (Print or Type) ROGDAN JOLDZIC	PRESI	DENT		aton licons	ure exem	pted	activities.								

24534

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

STEVENS	Environmental
SEBUICE	SITIO
C Heret	- 并84534

Date of Notification (1	) 11/3/11			Name	of Buildin	g Owner/Operator	r (2) Hakeem Ade'	bayo![D]_E	6	B		1
Agencies Notified	Type Notification	1	+	Street	Address	0	M1 Darleslavi	Avalili		4 214	-1.	
EPA DEP DOL	Initial Amended Amendment		.	City, S	state, Zip C	Code	Frenton, NJ 0	117/1	<i>10</i> 7	-7	20	III
MOH DCA	☐ Emergency (injustification) ☐ Cancellation		-	Name	of Contac		Diser	Telephone Numb	oer	528	870	
	1			FAC		ORMATION		Marie Constitution of the	Single and	encontract of		7
Name of Facility When		ng Place sidence					Type of Facility  School (K-1	(4)	000 200	Par-		
Street Address	941 Be	rkelev	Ave				Other (i.e., phomes, etc.	orivate & commerci	al buil	dings		
City (5)							Square Feet	# of Floors	В	ldg. A	ge	
County (6)	Mercer	renton			nty Code (	7) (STATE	Current Use (P	rior if being demolis Residence	shed)			
Name of Monitoring F	irm Hired by Building	Owner	Ŧ	ASCM	No.		ment Contractor (9	9)	T.			
(8)	MECS					Street Address		mental Service	es, II	ic.		=
Street Address	PO Box 34	11			PO Box 322							
City, State, Zip Code			,	City, State, Zip Code Allentown, NJ 08501								
	Crosswick, NJ	08313	Tolo	phone	No	Telephone No.	Allelitow	License No.			-	_
Project Manager for M	weisgarber Jr				8-4070		59-9688		049	3		_
Start Date (10)	Sch	eduled Co	_	tion Da		Name of OSHA		IECS				
11/14/11 Occupancy Status Do	uring Abatement (Ch			11		Street Address						
☐ Facility Closed/Va	cated During Entire F	Period of	Abate	atement PO Box 341								
☐ Abatement Perform ☑ Other - Describe:	ned Outside of Norm 8AM - 4:30PM	nal Facility	y Hou	City, State, Zip Code Crosswicks, NJ 08515								
Scope of Work (Chec ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			novati molitic			☐ Mini-Er ☑ Gloveb	ontainment with Ne nclosure pag Procedure xempted (*) and N	egative Pressure on-Friable Procedu	ıre			
			ocatio						1	Abate Ty		
Asbestos-Containir TO BE A IN Fac						Description of tos Containing Ma thermal systems surfacing, VAT other miscellane	aterial (ACM) insulation, Γ, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	
bases	No	N/A		pipe insulation 30 LF x								
Name of Registered	Waste Hauler			NUDEP I		Cubic Yards of Waste		istered Landfill	1			
					292	2 CU		R.R.F., Inc. I	Land	fill	-	_
City, State Allentown, NJ						Disposal Date 11/15/11	City, State	/ Tullytown,	PA	207		
Completed By	Ti	tle	oi = -	+ 1/	20022	Signature	19/	Date		3/11		
Mahlon E.	Stevens	Pr	ojec	t Mar	lager				11/.	7111		=

Check 520117

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 7:26-2.12)

		CONTRACT TO A VALUE OF THE						10) 1	= (C)	IS II	[]/]	P	-
Date of Notification (1) 10/25/11		21			Name of Bu SP Industrie		r/Operator (2	K	- (-)-	Us		511	
Agencies Notified		Notification			Street Addre		ε		NOV	- 7	2011		ij
(X ) EPA (X ) DOL (X ) DOH ( ) DCA		( ) Initial N (X) Amend ( ) Cancell	ed Certific	ation	City, State, 2 Warminster,			L	ASPEST(	OS JON JENSIN	TROL &	_	
( ) = 5.1				-	Name of Cor Lee Royal	ntact	) 	Tel. I	Number	THE RESERVE AND DESCRIPTION OF THE PERSON NAMED IN	-		
				FACILITY	NFORMATION		F-15-2-15	LEGIND	2 100				_
Name of Facility Where Ab	patement is	Taking Place	(3)	TAGILITY	Type of Faci ( ) School (F	(-12)							
Street Address 1298 Northwest Blvd.					( ) Subchapt ( X ) Other (i		than K-12) commercial	bldgs., h	omes, e	tc.			
					Sq. Feet 270	000	# of Floo	rs 1					
City (5) Vineland	County (6) Cumberlan	nd		Code (7) Jse Only)	Bldg. Age 60	)+ (prior if bein	ng demolished	d) Manuf	ecturina				
Name of Manitaring Firm	lired by Plde	Ouros (9)	ACCIAL	ula .	- Current Ose	(phor ii bein							_
Name of Monitoring Firm H TRC Environmental Corp		. Owner (o)	ASCM	<u>NO.</u>			Name of O			diation	ı, LP		
Street Address 57 E. Willow Street	Environmental Corp.  t Address Willow Street  State, Zip Code Jirn, NJ 07041  ct Manager for Monitoring Firm Telepl				Street Addres 404 N. Berry								
City, State, Zip Code Millburn, NJ 07041					City State, Zi Brea, CA 92			-					
Project Manager for Monito Steve Tappert	oring Firm	Telephone 973-564-60			Telephone N 484-480-893	-		<u>Licen</u> 01058	se Numb	ber			
Scheduled Start Date (10) 11/08/2011		Scheduled 01/13/2012		n Date (11)	Name of OSI EMSL Analyt								
Occupancy Status During A (X ) Facility Closed/Vacate ( ) Abatement Performed	d During En	tire Period of	Abatemen	t	Street Address								
Describe Vacant Bldg. To E Storage					City, State, Zi Westmont, N.								
Other – Describe Source of Work (Check all t	that apply)				L							-	0.000
(X) Demolition () Renova (X) Large Proj. (>160 SF or (X) Full Containment with N	>260 LF AC	CM) ( )M Proj.	. (>25<160 Mini-Enclo	) SF or >10 <260	LF ACM) ( j		. (<25 SF or	<10 LF A	CM)				
Location of Asbestos- Containing Material (ACM)	Is Loca in Solely	ation Normally by Maint./Cus	Used	Description of thermal syster	ACM (i.e. ms insulation,		Specify SF o	r LF)	Abate	ment T	уре		
Facility (13)	Staff? YES	(12) NO	NA	surfacing, VAT miscell.)	, or other				Rem.	Rep.	Encap	Enclos	se
Machine Shop	1123	INO	X	Fire proofing		3400 SF			X	1	T	7	_
Throughout			X	Window/Door	Caulk	2020 LF			X			+	
Office			X	VAT/Mastic		2600 SF			X				
Corridor			X	VAT/Mastic		900 SF			X				
Men's Room			X	Linoleum		200 SF			X				
Furnaces (3)			X	Furnace Insula	ation	450 SF			X				
Name of Reg. Waste Haule Service Transport Group, In	ne of Reg. Waste Hauler vice Transport Group, Inc.  NJDEP Waste Hauler ID # 20990				Cubic Yards o			Name G.R.C	of Reg. D.W.S. L	Landfill andfill	]		
City, State New Castle, DE	rice Transport Group, Inc. 20990 State						Disp. Date 11/03/11		<u>C</u>	City, Sta			
Completed by (Print or Type Mark Griffin	State Castle, DE  pleted by (Print or Type)  Title			ager	Signature	1	, ARD	<u>Date</u> 11/03/					
mark Grinn		1.0	oject Mana	.901	Unit	Drik	ئىنىڭ	11/03/					

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

	1)	•	Name	e of Buildin	ng Owner/Operato	r (2)	U Щ <del>-NOV -</del>	-12	011	TES VI	
T-707070 100000 10000 1000				Mendez	ALE DO STANCO DE DA CONTRACTO DE SENTENCIO.	cromb/feli					
	: Type Notification		7.7557756	t Address			ASPESSES	ODE 18	. &		<del>-</del>
			229 S	tewart A	Avenue	Web.	10%	MOING			
M EPA	DEP DOL Amended Amendment # Emergency (including justification) DOH DCA Cancellation  Ime of Facility Where Abatement is Taking Playate home reet Address  Discovery Stewart Avenue By (5)  arny, NJ 07032 Bunty (6)  IdSon Ime of Monitoring Firm Hired by Building Ownereet Address  By, State, Zip Code  Diect Manager for Monitoring Firm  Interpretation  To Be Abated  Interpretation  Interpretation  Location of Asbestos-Containing Material (ACM)  TO BE ABATED IN Facility (13)  Interpretation  I			State, Zip			11 - 12 - 12 - 12 - 12 - 12 - 12 - 12 -				
M DOL	V		Kearr	ny, NJ 0	7032	×.					
	☐ Emergency (includi	ng	-	e of Conta			Telephone Numbe	er			700
∑ DOH				Mendez		1	5 01 9 0 0 0 E 2 2				
- DCA	- Cancellation				FORMATION					_	
	2/2011  Incy Notified Type Notification  PA Solutial Amended Amendment # Emergency (inclusive process)  POCA Cancellation  Ince of Facility Where Abatement is Taking in the home are Address  Stewart Avenue  (5)  Imp, NJ 07032  Inty (6)  Indication Cancellation  Taking in the home are Address  Stewart Avenue  (5)  Inny, NJ 07032  Inty (6)  Indication Cancellation  Taking in the home are Address  Stewart Avenue  (5)  Inny, NJ 07032  Inty (6)  Indication Cancellation  Taking in the home are Address  Stewart Avenue  (5)  Inny, NJ 07032  Inty (6)  Indication Cancellation  Taking in the home are Address  Stewart Avenue  (5)  Inny, NJ 07032  Inty (6)  Indication Cancellation  Taking in the Hired by Building Over and Interpretation  In Date (10) Scheduled  In Date (10) Sc	00 (2)		ZILITI IN	OKWATION	Type of Facil	ity (4)				
	ere Abatement is Taking Pla	ce (3)									
Private home						School (K-	1 2) er 8 (Other than K-1 2)				
Street Address							private & commercial b	ouildings			
229 Stewart Aven	iue					nomes, et	A STATE OF THE PARTY AND ADDRESS OF THE PARTY	Did- A			-,-
City (5)						Square Feet	# of Floors	Bldg. A	je		
Kearny, NJ 07032	2										
County (6)			1.0000000000000000000000000000000000000		7) (STATE USE	Current Use	(Prior if being demolish	ed)		-0.000	2230
			ONLY	()							
Hudson		(a) A	SCM No.		Name of Abate	ment Contractor	(9)		0.00000.7174		
Name of Monitoring	Firm Hired by Building Owne	er(8)			Gr Tech LLC						
Street Address					Street Address				(100)		
Street Address					576 Valley Ro	d #283					
City State 7in Code					City, State. Zip		A VAND AND AND AND AND AND AND AND AND AND			1000	
City, State, Zip Code					I .						
0	Masitarina Firm	i Tole	phone No.		Wayne, NJ 07	7470	: License No.				-
Project Manager for	Wonttoring Firm	1616	prione No.		1 100	7	01127				
5 5	Cahadulad C	<u> </u>	Doto (11)	·	973-638-1777 Name of OSHA		01127				- 122
		Jiipielloi	Date (11)	,			no				
11/11/2011					Envirovision Street Address	Consultants,	TIC				
Occupancy Status D	Juring Abatement (Check on	y one)				Dood Did	lα # 24 A				
☒ Facility Closed/Va	acated During Entire Period	of Abater	ment		20-21 Wagara City, State, Zip		g .# 34A			-	
		lity Hour	S								
					Fair Lawn, N.	J 0 /4 I 0					
Scope of Work (Che	ck all that apply)				☐ Full	Containment w	ith Negative Pressure				
				novation	5000 M 1000 M	i-Enclosure					
☐ ≥160 sf or >260	lf		⊔ De	molition		vebag Procedur i-Exempted (*) a	e and Non-Friable Proced	lure			
				T					Abat		ent
			ocation rmally				İ		T <u>y</u>	ype	-
		Used	Solely by		Description		Amount	i	-	m	
			tenance/		stos Containing M ., thermal systems		(Specify	7	7 20	Encapsulate	100
			stodial taff?	1	surfacing, VA	T, or	SF or LF)	Remova	Repair	sde	Eliciosule
	(13)		12)		other miscellan	eous)		Val	air.	late	0
				* 1					1	10	
		Yes	No N/A		aulation		.45 LF	+x	+	+	÷
Basement			X	Pipe in	sulation				1	÷	+
							-		<del>+</del>	1	i
				1					+	-	1
							†				
Name of Registered	Waste Hauler	NJD8	EP Waste	Hauler	Cubic Yards of Waste	Name of Reg	g stered Landfill				
Gr Tech LLC		0033	785			T.R.R.F. Ir	ic				
City, State					Disposal Date	City, State					
	ity, State ayne, NJ 07470				•/	Tullytown,	PA				
Completed by	ty, State ayne, NJ 07470 ompleted by Title				Signature /	1	- Water Street, Add in white to the Contract of the Contract o	ate	-		
57.5 - 57.5 - 50.0					Ho	he 1/2	200 11	/02/20	11		
N.Jevtic	Owner * Do not	use this	form for as	spestos lic	censure empted	activities.					