Check#1763

-				Nomo	f Building (Owner/Operator (2	1					-
Date of Notification (1)	06 13			INAIIIE U	i building c	Switerrope ator (2					1.1	
					Rogers			110				
Agencies Notified	Type Notification			Street A	ddress			NUV	1 3	2013		
□ EPA	Initial 1				Arlington			1				
X DOLWD	Amended Amendment #			City, St	ate, Zip Co	de		Mark X	1 1000	# 0,E		
□ DCA	Emergency (incl	uding	I	East Or	ange, NJ	07017	1				1 de	
(NJAC 5:23-8)	justification)	gon ig		Name o	of Contact			Telephone Numi	ber			
,	Cancellation		1	Beverly	Rogers		2					
						ORMATION			1.0	20	74	
Name of Facility Where	Abatement is Taking	Place (3)	- 111			Type of Facility (4)	LELVO A			
	, 129 to 110 to 1 military	· · · · · · · · · · · · · · · · · · ·	~ /			(A)	School (K-12)				1
Private house Street Address		-						(Other than K-1 2		J:		
							homes, etc.)	rivate and commer	ciai duli	aings	1	
309 N. Arlington Ave	nue						Square Feet	# of Floors	Bid	g. Age	e	_
City (5)	_						oquai o i uui		253255	5		
East Orange, NJ 0701	7		-	County	Codo (7) (9	STATE USE ONLY)	Current Use (Pri	or if being demolis	shed)	-76.0	W = 100	-
County (6)				County	/ Code (/) (3	STATE USE ONET	Content des (i ii	or is bonning connoun	5.100)			
Essex Name of Monitoring Firm	- Oland by Building O	woor /S	N T		1-	Name of Abateme	nt Contractor (9)					_
Name of Monitoring Fire	n Hired by Building O	wiiei (c	, ,	ASCM N			ent Contractor (9)					
						Gr Tech LLC						
Street Address						Street Address						
+						576 Valley Rd #						
City, State, Zip Code				15		City, State, Zip Co	ode					
5.		5 55 - 2				Wayne, NJ 0747	70	1000				
Project Manager for Mo	nitoring Firm .		Tele	phone t	No.	Telephone No.		License No.				
					1,5,17-5,14	973-638-1777		01127				
Start Date (10)				tion Dat		Name of OSHA N	Monitor					
11 / 15	/ 13 1	1 /	16	_ / _	13	Envirovision Co	onsultants.Inc					
Occupancy Status Durin	ng Abatement (Check	only o	ne)			Street Address						
				ment		20-21 Wagaraw	Road Bldg #	34A				
Abatement Performe	ed Outside of Normal	Facility	Hour	s - Des	cribe [City, State, Zip C		J				
Time of Abatement:	AMPN	Λ/	PM_		AM	Fair Lawn, NJ 0						
Scope of Work (Check a	all that apply)			-				nation with negativ	ve press	ure		-
1						Full Con	itainment with Ne					
>3 sf or >3 lf > 160 sf or >260 lf		X Rei	novati molitic			Mini-End Gloveba	closure	Tent with Negativ	e Press	ure		
150 SI OI 2200 II			HOHUK	311	-	Non-Exe	empted (*) and No	on-Friable Proced	ure	-1		
		Is	Loca	tion-					-	ateme	ent Ty	ype
Location	on of	1	Vorma	lly		Description	of		-	_		
Asbestos-Containin	[프라마이크리아크리아크리스 프라마이크리아크리아크리아크리아크리아크리아크리아크리아크리아크리아크리아크리아크리아크		d Sole intens	ely by		stos Containing Ma		Amount	Removal	Repair	nce	Enclosure
TO BE AI				Staff?	(i.e.	, thermal systems surfacing, VAT		(Specify SIF or LF)	JOY 3	air	psu	unsc
(13			(12)			other miscellane		J. 3. 2. 4	1 20		Encapsulate	0
	2	Yes	No	N/A			12.0				V.	
2		П	П	X	Pipe insu	lation		240 LF	X			П
Basement				08355	Pipe mst	пацоп		240 LI	+=		_	
	100	Ш	Ш								Ш	
		П	П	П								
	76			1						Im	П	П
		Ш_		DEB DE L	Meules IS 41	Oubin Vando -5161	ato Nama of Dan	istared Landfill			ليا	
Name of Registered W	aste Hauler		N.	IUEP IVast	e Hauler ID No.	Cupic Yards of Was	ste Name of Reg					
Gr Tech LLC				00337	35	TBD	T.R.R.F. Inc					
City, State					AN EG	Disposal Date	City, State					
Wayne, NJ 07470		100				TBD · ·	Tullytown, I	PA				
Completed By (Print or	r Type) Titl	e							Date			
Land of the Ave Average	2001 1000	m 0=		00	68	Ż.	Pendic Nes	nad 1	1/06/2	013		
N.Jevtic ASB-41	. JOW	ner	-				99		2, 20, 2			
The state of the s	(C) (A)											

Date of Notification (1)			Name	of Building	Owner/Operator (2)			-		
10 / 23 /	13				de Nemours						
Agencies Notified Type Notific	ation	-	Street	Address	-		01 1 3 -2013		-	_	+
☐ EPA ☐ Initial			250	Cheese	quake Road					8	
☑ DOLWD ☑ Amende	The state of the s	146	City, S	State, Zip C	ode			t			_
The state of the s	ent #1-11/4		Par	lin, NJ 08	3859	I for	oh -			7	
DCA Emerger (NJAC 5:23-8)	ncy (including ion)	9		of Contac			Telephone Numb	er		-	
☐ Cancella			Nic	hol Reinl	hold			٥.			
					FORMATION			W.		-	
Name of Facility Where Abatement is	Taking Place	(3)			- Ortina Hore	Type of Facility	(4)		=		
DuPont Parlin Facility Exterior						School (K-12					
Street Address						☐ Subchapter 8	(Other than K-12)				
250 Cheesequake Road						Other (i.e., p homes, etc.)	rivate and commerc	cial bu	uilding	S,	
City (5)						Square Feet	# of Floors	Tei	dg. A	70	
Parlin						Oquale i ect	W 011 10015	100	ug. A	Je.	
County (6)			Cour	nty Code (7)(STATE USE ONLY)	Current Hee /Dr	ior if being demolisi	hod)			
Middlesex			000.	ny 0000 (i	MOTATE OSE ONET	Exterior	ioi ii being demons	ieu)			
Name of Monitoring Firm Hired by Buil	ding Owner	/8\ T	ASCM	No	Nome of Abetem						
Pennoni Associates Inc.	ding Owner	(6)	AGCIVI	140.	Name of Abatem						
Street Address						VIRONMENTA	L, INC.				
515 Grove St #1B					Street Address	D 070557					
					1123 BEAVE						
City, State, Zip Code					City, State, Zip C						
Haddon Heights, NJ 08035		1 = 1		NI-	BRISTOL, PA	19007	T				
Project Manager for Monitoring Firm		P. Sand	phone		Telephone No.	• 22	License No.				
Tom Adams	Cabadalad C	4	56-656		215-788-6040		00509				
The second secon	Scheduled C				Name of OSHA N	(1) TO 10 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)					
//	11 /			13		VIRONMENTA	L, INC.				
Occupancy Status During Abatement (0000 1000 044		Street Address			- 22			
☐ Facility Closed/Vacated During Ent					1123 BEAVE		_				
Abatement Performed Outside of N Time of Abatement: 7AMPI				cribe	City, State, Zip Co						
					BRISTOL, PA	19007				240-11	
Scope of Work (Check all that apply)					□ Eull Cont	tainmant with No.	nativa Dranava				
≥3 sf or ≥3 lf	. ⊠ Re	enovat	ion		⊠ Mini-Enc	tainment with Neg losure	Jalive Pressure				
☐ ≥160 sf or ≥260 lf	☐ De	emoliti	on		☐ Gloveba						
		1	···	т	∐ Non-Exe	mpted (*) and No	n-Friable Procedur	_			
Location of	100	Loca Norma		1	Description			Ab	atem	ent T	ype
Asbestos-Containing Material (ACM	(I) Use	ed Sole	ely by	Asbe	Description o stos Containing Ma		Amount	Removal	Repair	E	E
TO BE ABATED	IVIa	intena	ince/ Staff?		., thermal systems	insulation,	(Specify	l g	pair	cap	Enclosure
IN Facility (13)	043	(12)			surfacing, VAT, other miscellane		SF or LF)	<u>a</u>		Encapsulate	le le
(1.5)	Yes	No	N/A	1	otrici misociiane	ous,				ê	
Bldg 2015 Exterior Lines			$\dagger \Box$	Pine Ins	sulation		29 LF	×			
Didg 2010 Zatorier Zaries			+=	1 100 1111			20 21	-	블	-	
									Ш		
Name of Registered Waste Hauler		11/200	JDEP \		Cubic Yards of	Name of Regis	tered Landfill	1			
Bristol Environmental Inc			lauler II 18706	Males in course in	Waste 5	GROWS La	andfill	32			
City, State					Disposal Date	City, State					
Bristol, PA					11/5/2013	Morrisville	, PA 19067				
Completed By (Print or Type)	Title				Signature	0	Dat	e /	-		
Gino Pizzigoni	Estima	tor			Hins 1	union	Dal Dal	11/4	1/1	3	

Agencies Notified EPA DOLWD DHSS DCA (NJAC 5:23-8)		-11/5/	13	Street A 250 City, St	luPont d Address Cheeseq	Owner/Operator (2 le Nemours luake Road		HOW .	W]
Agencies Notified Type EPA SOLWD SOL	pe Notification Initial Amended Amendment #2 Emergency (indiginatification) Cancellation	-11/5/	13	Street A	Address Cheeseq	<u> </u>		No. 4	U	5		1
□ EPA □ □ DOLWD □ □ DHSS □ DCA (NJAC 5:23-8) □ □ Name of Facility Where Abate DuPont Parlin Facility □ Street Address 250 Cheesequake Road	Initial Amended Amendment #2 Emergency (incident justification) Cancellation		13	250 (City, St	Cheeseq	uake Road		Nov. •				
DOLWD DHSS DCA (NJAC 5:23-8) Name of Facility Where Abate DuPont Parlin Facility I Street Address 250 Cheesequake Road	Amended Amendment #2 Emergency (incipatification) Cancellation		13	City, St		uake Road		Maria de la compansión				
Name of Facility Where Abate DuPont Parlin Facility I Street Address 250 Cheesequake Road	Amendment #2 Emergency (indigustification) Cancellation		13		-t- 7:- C			NOV 1 3 2	115		- 1	
DCA (NJAC 5:23-8) Name of Facility Where Abate DuPont Parlin Facility I Street Address 250 Cheesequake Road	Emergency (inc justification) Cancellation				20 3.57			J 21	//3		. 1	
Name of Facility Where Abate DuPont Parlin Facility I Street Address 250 Cheesequake Road	justification) Cancellation ement is Taking		1	Parli	n, NJ 08	859	Ş _{ar} ı				ļ	
Name of Facility Where Abate DuPont Parlin Facility I Street Address 250 Cheesequake Road	ement is Taking		- 1	Name o	of Contact		1 1 1	Telephone Number	er		PAR-201	
DuPont Parlin Facility I Street Address 250 Cheesequake Road				Nich	ol Reinh	old					i	
DuPont Parlin Facility I Street Address 250 Cheesequake Road				FAC	ILITY IN	FORMATION			25		~~ud	
DuPont Parlin Facility I Street Address 250 Cheesequake Road		Place	(3)				Type of Facility (4	1)				
Street Address 250 Cheesequake Road	Exterior at Bl						School (K-12)					
250 Cheesequake Road			000000					(Other than K-12) vate and commerc	ial bui	Idina		
	d						homes, etc.)	vate and commerc	iai Dui	ungs	۰,	
				= 0.00			Square Feet	# of Floors	Bld	g. Ag	e	
Parlin										5 5		
7,100				Count	v Code (7)	(STATE USE ONLY)	Current Use (Pric	r if being demolish	ed)			
County (6)				Count	y Code (1)	(OTATE OOL ONET)	Exterior	in boing demons	Jou			
Middlesex	d b. D. Ildian C)	0\	ASCM N	lo.	Name of Abateme						
Name of Monitoring Firm Hire		wner (b)	ASCIVI I	NO.	and the second s	(1) 25/251 	INC				
Pennoni Associates In	c.						VIRONMENTAL	., 1140.				
Street Address						Street Address	OTOFFE					
515 Grove St #1B						1123 BEAVE				E 2000		
City, State, Zip Code						City, State, Zip C						
Haddon Heights, NJ 08					At .	BRISTOL, PA	19007					
Project Manager for Monitoring	ng Firm		100000000000000000000000000000000000000	phone N		Telephone No.		License No.				
Tom Adams			-	56-656-		215-788-6040		00509				
Start Date (10)				tion Dat		Name of OSHA N						
11 /04 /1	3 1	1_/	06	<u> </u>	13	BRISTOL EN	VIRONMENTAL	., INC.				
Occupancy Status During Ab	atement (Check	c only c	ne)			Street Address		*				
☐ Facility Closed/Vacated D	uring Entire Pe	riod of	Abate	ment		1123 BEAVE	R STREET					
☐ Abatement Performed Ou				rs - Desc	cribe	City, State, Zip C	ode					
Time of Abatement: 7AM-	PM/ <u>4</u> PN	Λ- <u></u>	_AM			BRISTOL, PA	19007					
Scope of Work (Check all tha	t apply)					The second secon						-
100							tainment with Neg	ative Pressure				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		⊠ Re ☐ De				Mini-End Gloveba	closure g Procedure					
☐ ≥100 St 0t ≥200 II			ii ioiiti	J11				n-Friable Procedur	е			
		Is	Loca	tion					Aba	ateme	ent T	ype
Location of			Norma			Description	27.5		D	ZJ	ш	П
Asbestos-Containing Mat			intena	ely by ance/		stos Containing Ma		Amount (Specify	em	Repair	nca	ncic
TO BE ABATE! IN Facility	<u> </u>			Staff?	(1.6	surfacing, VAT		SF or LF)	Removal	=	Encapsulate	Enclosure
(13)			(12)			other miscellane		1980 A. S.			late	Ф
		Yes	No	N/A								
Bldg 2015 Exterior Lines	3		\boxtimes		Pipe In	sulation		29 LF				
										П		
		-										-
Name of Registered Waste H	lauler		1	NJDEP V	Vaste	Cubic Yards of	Name of Regis	tered Landfill				
Bristol Environmental			H	Hauler II		Waste	GROWS La					
				18706	i	5 Disposal Date	City, State					-
City, State						11/5/2013	Morrisville	DA 10067				
Bristol, PA						0.0000	MOUSVIIIE			-,-		
Completed By (Print or Type)	110	-				Signature	0	. / . Da	te //	1,	2	
Gino Pizzigoni	E	stima	tor			Lino	Typeson	1-12	11/5	110	^	
Gino Pizzigoni	E	stima	tor			Lino	Typigon	/je	11/5	//0	×	

CLOSE

5 . AN 05 .:	(4)					0.00 and		· 	Projec	t Com	ple	te //	15
Date of Notification	10/28/13					Owner / Operato ersey Departm		f Human	Services		1		
Agencies Notified EPA DEP	Type Notific	al	Stre P.C	eet A O. B y, St	Address ox 700, 2 ate & Zip	222 South War			Mar 15	7513		•	
□ DOL □ DCA	⊠ Eme	ended R#3-11/5/1 ergency cellation	Na	me d	on, NJ 08 of Contact larlan				24	Telepho	ne M	li rmh	 B
				FAC	ILITY IN	FORMATION				•			
Name of Facility W Woodbridge Dev Street Address				<u> </u>		Type of Facil	K-12)	(Other tha	n K 12\	3124-238 -660- 80			
1289 Rahway Av	enue					Other (i.	e. priv	ate & com	mercial buildi			etc.)	
0:/ (5)		County (6)	Cours	C.	nda (7)	Square Feet		# of Floo	and the same of th	Bldg. Ag			
City (5)		County (6)	Coun	ty C	ode (7)	N/A	/Dries		N/A		N/A	1	
Avenel		Middlesex				Current Use		0.000	emoiisnea)				
1	- Cines Ulinad	by Building Own	- (9)		ASCM No	Various Se Name of Aba			(O)				
Name of Monitoring			1 (0)		ASCIVI NO	Bristol Env							
Street Address	onnection	mo.				Street Addre		ircittat, II				_	
120 North Warre	n Street					1123 Beave		eet					
City, State & Zip Co	ode	2000				City, State &							
Frenton, NJ 086						Bristol, PA							
Project Manager fo Brian Holbig	r Monitoring		Telepho 309-39		Number 200	Telephone N (215)788-60		٢	License 00509	Number			
Scheduled Start Da		Scheduled Comp			(11)	Name of OS							
10/29/13 (Rev #1			N HOL	LD		Bristol Env		nental In	c.				
Occupancy Status	During Abate	ement (Check onl	y one)	۸ ا ـ ما		Street Addre							
		During Entire Pe				1123 Beave					_		
		Outside of Normal	Hours	5 - /	am to 3pn		355						
	8:00 AM -	A:30 PM Abatement 7:00	- 3·30	r.		Bristol, PA	1900	1					
Facility Occ Scope of Work (Ch			- 3.50										
≥3 sf or ≥3		PP1))	⊠ F	Reno	vation			Full Conf Mini-Enc	tainment with	Negative	Pre	ssure)
☐ ≥160 sf ≥26			-		olition		X		g Procedures	S			
			_				Ħ		mpted and No		e Pro	cedu	ıre
L	ocation of	T	Is Lo			Descriptio			Amount			ent T	
	tos-Containii	ng	Normal			Asbestos-Cor		g	(Specify				T.
	terial (ACM) BE ABATED		Sole Mainter			Material (A (i.e., thermal s			SF or LF)	مِ	-	Enc	Ī
	n Facility	22	Custodi		3 20000000	insulation, surfa				Remova	Repair	aps	Liidaddid
· •	(13)		(1	2)	N/A	or other miscel				val	1	Encapsulate	0
Rickwell betwee	n Cottages	#2 & #3		X		Pipe insula			30 LF				
Rev #1-Add'l. Sc	ope of Wo	rk same area		X		Pipe Insula	ation		20 LF		Щ		
				Щ									
											\Box		I
											\Box		I
						72.11.11	1						
lame of Registered		ler		Hau	ler ID No.	Description of the property of	10000	240 3000000000 0 .40	stered Landfil	I			
Service Transpo	rt inc.			209	90	1 Cu YD		erva Lan	atill				
City, State						Disposal Date 10/7/11		State nesburg	, OH				
ompleted By (Prin	t or Type)			Title		Signature	-	,		Date			
Gino Pizzigon					ject nager	Signature Line Line	sco.	oail-	d	11/	5/13	3	

Cl #2511

Date of Notification (1)			1	Name (of Buildin	ng Owner/Operator	(2)		-			
10 / 23	13			E.I. (duPont	de Nemours	(-/	NOV 1	2	99		
Agencies Notified Type Not	ification		- 5	Street /	Address			1101	J	2/ 1/	_	
☐ EPA ☑ Initial						equake Road						
☑ DOLWD 8107 ☐ Amen			10		ate, Zip			7-27				
	dment #		-		in, NJ 0			in the second				
(NJAC 5:23-8) justific	gency (includent	ling	-		of Contac	C101747477		T E 1				
☐ Canα			- 1		ol Rein	55 S		Telephone Nam	har			
	****			FAC	ILITY II	NFORMATION						
Name of Facility Where Abatement	is Taking Pla	ace (3	3)			TO THE PART OF	Type of Facility	(4)				
DuPont Parlin Facility Exter	iot at Bldg	2015	5				School (K-12					
Street Address							Subchapter 8	(Other than K-12)			
250 Cheesequake Road							Other (i.e., pr homes, etc.)	ivate and comme	rcial t	buildin	ıgs,	
City (5)							Square Feet	# of Floors				
Parlin							Square reet	# Of Floors	E	3ldg. /	Age	
County (6)			-1	Count	v Code (7)(STATE USE ONLY)	Current Hea /Dri					
Middlesex					, 0000 (MOTATE DOE ONET	Exterior	or if being demolis	shed)			
Name of Monitoring Firm Hired by B	uilding Own	er (8)	TAS	SCM N	lo.	Name of Abateme						
Pennoni Associates Inc.							VIRONMENTAL	1010				
Street Address						Street Address	VIRONMENTAL	., INC.				
515 Grove St #1B						1123 BEAVE	POTECT					
City, State, Zip Code		-				City, State, Zip Co		•				
Haddon Heights, NJ 08035						BRISTOL, PA						
Project Manager for Monitoring Firm		TT	eleph	one No	0	Telephone No.	18007	1				
Tom Adams				-656-2		215-788-6040		License No.				
Start Date (10)	Scheduled	Com				Name of OSHA M		00509			1.000-10-4	
11 / 04 / 13				/								
Occupancy Status During Abatemen	1						VIRONMENTAL	., INC.				
Facility Closed/Vacated During E	2000 Brown and Carrier Control of Control of	110-40000000000000000000000000000000000				Street Address		8-90			10.1p +1.	
☐ Abatement Performed Outside of						1123 BEAVER						
Time of Abatement: 7AM	PM/4PM-	A	M	Descri	ioe	City, State, Zip Co					_	
2104 d. (Ob - d 1104 - 4 1)						BRISTOL, PA	19007					
Scope of Work (Check all that apply)						TI Full Cont						_
⊠ ≥3 sf or ≥3 M		Renov				Mini-Enck	ainment with Nega	tive Pressure				
☐ ≥160 sf or ≥260 lf		Demoi	lition			☑ Glovebag	Procedure					
		la I ac	cation			☐ Non-Exer	npted (°) and Non	-Friable Procedure	В			
Location of			nally			B			Ab	atem	ent T	уре
Asbestos-Containing Material (AC	(M) U	sed S	olely b	ру	Asbes	Description of stos Containing Mate		Amount	Z	Z	m	m
TO BE ABATED			nance al Staf			, thermal systems in	sulation.	(Specify	Removal	Repair	ह	Clo
IN Facility (13)	"	(1)				surfacing, VAT,		SF or LF)	Val	-	Encapsulate	Enclosure
(10)	Yes	N	ON	I/A		other miscellaneo	us)				ate	
Bldg 2015 Exterior Lines		×	-	-	ine Ine	ulation			_			_
Diag 2010			+	-	ipe iiie			29 LF	×			
		岩	-	_								
		+=										
and the second second second												
Name of Registered Waste Hauler Bristol Environmental Inc				P Was		Cubic Yards of Waste	Name of Registe					
				706		5	GROWS Lan	dfill				
City, State						Disposal Date	City, State					
Bristol, PA	Tiale					11/5/2013	Morrisville, I	PA 19067				
Completed By (Print or Type)	Title					Signature	0	/ · Date			7	

Date of Notification (1) 11/06/13				e of Building nelius Cra		erator	(2)			5 4 4			!	
Agencies Notified	Type Notification			et Address Hamilton S	Street		4.1		NUTS I	1 2 201	5		•	
EPA DEP DOL	Initial Amended Amendment		57.000	State, Zip Co dison, NJ (0				1	
DOH DCA	Emergency (i justification) Cancellation	ncluding	Cor	e of Contact nelius Cra	wford			,	Tele	phone Num	ber		. 1	
			F	ACILITY INF	ORMATIC	N								-
Name of Facility Where Residential Proper		Place (3)						of Facility (4 School (K-12	2)	er than K-12				
Street Address 106 Woodland Ave	nue						×	Other (i.e. p	rivate 8	commercia	l buildi			۶,
City (5) Madison	1						2,20		2	Floors	50	lg. Ag +	е	
County (6) Morris				nty Code (7)						ng demolish	ed)			
Name of Monitoring Firm	n Hired by Building (Owner (8)	A	SCM No.				tement Con Contractin						
Street Address							Addres Sarge	ss ant Aven	ue			6		
City, State, Zip Code								ip Code I 07013						
Project Manager for Mo	nitoring Firm		Tele	ephone No.			none N 689-6			License N 01099	0.			
Start Date (10) 11/16/13		Scheduled 11/16/13		tion Date (11	1)			HA Monitor onmental	Labo	ratories L	LC			
Occupancy Status Duri	ng Abatement (Chec	k Only One)					Addre							
Facility Closed/Va Abatement Perform Other – Describe:	cated During Entire med Outside of Norr	Period of Aba nal Facility H	atement ours			City, S	State, Z	te 22 We ip Code 07081	ST					
Scope of Work (Check														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	All History)		novation nolition	ı			Mi Gi	ni-Enclosur ovebag Pro	e cedure	n Negative F			a	
			ocation					ni-Exemple	u () ai	id 14011-1 Hat	1	Abate	ment	
Locati Asbestos-Containir <u>TO BE A</u> In Fai	ng Material (ACM) BATED cility	Used : Maint Custoo	rmally Solely betenance dial Staf (12)	/ \ \ (i	estos Con e. thermal. surfa		Materians insul AT, or	ation,	(Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A									Œ	
Gara	age			X	Duc	t Insul	ation		2	20 SF	Х			
Name of Registered W Pyramid Contracting			100000000	EP Waste ler ID No. 13	Oubic of Wa	: Yards iste		G.R.O		tered Landfi , Inc.	I			
City, State Clifton, New Jerse			020			sal Dat	e 1	City, Sta		Penasylva	ınia			
Completed by Dimo Golcev		Title Presid	ent			Signate	I I N	14	D		ate 1/06/	13		
ASB-41 (R-06-08)	-				6	Do.	not use	this form fo	or asbe	stos licensu	re exe	mpted	activ	rities.

CK# 3145

Date of Notification (1) 11/06/13		0			uilding O s Craw		perator	(2)	2						
Agencies Notified	Type Notification		100000000000000000000000000000000000000	eet Addi 3 Hami	ress Iton St	reet					· · · · · · · · · · · · · · · · · · ·	(8)	1 .	15.5	10
EPA DEP DOL	Initial Amended Amendment	#			, Zip Coo , NJ 07				2		1		1 3		10
DOH DCA	Emergency (i justification) Cancellation	ncluding	1000	me of C orneliu	ontact s Craw	/ford	10			Tele	phone Num	ber			
	E Canconation			FACILI	TY INFO	RMATI	ON	-							
Name of Facility Where Residential Propert		Place (3)						Пз	of Facility (4 School (K-1	2)					
Street Address 106 Woodland Ave	nue							×	Subchapter Other (i.e. p etc.)	rivate 8	er than K-12 commercia	l build	870(4)		s,
City (5) Madison								Squar 2,200	e Feet O +	# of 2	Floors	100000	dg. Ag)+	ge	
County (6) Morris				ounty Co	de (7) E ONLY)			Curre	nt Use (Prid	or if beir	ng demolish	ed)			
Name of Monitoring Firm	Hired by Building (Owner (8)	1	ASCM N	No.				tement Cor ontractin		*	5)		A TOTAL	
Street Address		48					Street	Addres							
City, State, Zip Code	-						City, S	state, Zi	ip Code 07013			-			
Project Manager for Mo	nitoring Firm		Te	elephone	No.		Telepl	none No	0.		License N 01099	0.		*****	
Start Date (10)		Scheduled		letion Da	ate (11)	- X	Name		HA Monitor						
11/16/13 Occupancy Status Durir	ng Abatement (Chec	11/16/13 k Only One)						Addres		Labo	ratories L	LC	7.		
Facility Closed/Vac	cated During Entire I	Period of Ab	ateme	nt			City, S	State, Z	ip Code	st	****				V-1-1-1-1
							Unic	n, NJ	07081					000000	
Scope of Work (Check A ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	All That Apply)	Second 1 1 40 1	novatio molitio					Mir Glo	ni-Enclosur ovebag Pro	e cedure	n Negative F			a	
			ocation	n					ri-Exemple	u () an	u Non-Friat	le Fio	Abate		t
Locatio Asbestos-Containin TO BE AF In Fac (13	g Material (ACM) BATED ility	Used Maint Custo	Solely tenand	e/		tos Con therma surfa		Material ns insula AT, or		(5	mount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
	189	Yes	No	N/A										TO .	-
Gara	ge			X		Duc	t Insul	ation		2	20 SF	X			
Name of Registered Wa	aste Hauler			DEP Wa			Yards		Name of	Registe	ered Landfil				
Pyramid Contractin	g Corp.			uler ID N 613	NO.	of Wa			G.R.O.	27	Inc.				
City, State Clifton, New Jersey	o					11/1	1	7	City, Sta Morrie		ennsylva				
Completed by Dimo Golcev		Title Presid	ent				Signatu	w	14	le		ate 1/06/	13		
ASB-41 (R-06-08)						0	, Do I	not use	this form fo	or asbes	stos licensu	e exer	npted	activ	ities.

o .	1.	-	000 000
1 1	1	21	44
(1	- 17	1	/ /

ate of Notification (1)	9		Nan	ne of Bui son C.	lding Owne McCrear	er/Operat Y	tor (2)			T .		ų į	1	
	Type Notification			et Addre	ss Iyn Road	1								
EPA DEP DOL	Initial Amended Amendment #		City	y, State, Z ummit, Î	Zip Code NJ 0790				Telephone		3 2	JIŞ	,	
DOH DCA	Emergency (ir justification) Cancellation	ncluding	Ali		McCrea		1000		Alannana					4
		Di (2)		FACILIT	Y INFORM	IATION	Type of	Facility (4))					\neg
Name of Facility Where A Residential Property Street Address	batement is Taking	Place (3)					Sc Sc	hool (K-12		K-12) nercial b	uilding	gs, ho	mes,	
16 Liewellyn Road						-	Square	:.)	# of Floors		75-1-00	. Age		
City (5) Summit					1- (7)		2,100	+	2 or if being der	nolished	50+			-
County (6)			Co (S	ounty Coo	de(/) EONLY)_		- Current	000 (1						
Union Name of Monitoring Firm	Hired by Building (Owner (8)	\perp	ASCM N	lo.	Na P	ame of Abate yramid Co	ment Con ontracting	tractor (9) g Corp.					
Street Address							treet Address 63 Sargea		iue					Hr E
City, State, Zip Code				-		C	ity, State, Zip Clifton, NJ	Code 07013						
Project Manager for Mor	itoring Firm		T	elephone	No.		elephone No 973-689-62		Lice 010	nse No. 199				
Start Date (10)		Scheduled		pletion Da	ate (11)	N	lame of OSH J&S Enviro	A Monitor onmenta	l Laborato	ries LL	С		-	
11/06/13 Occupancy Status Durin	a Abatement (Che	- CARLLES AND AND ADDRESS AND					treet Addres		et					
F - Why Classed \/ 20	ated During Entire	Period of At	atem	ent			2333 Route City, State, Zi		SI					
Abatement Perform Other – Describe:		mai i aciity i					Union, NJ						- <u> </u>	-
Scope of Work (Check / ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	All That Apply)	Beatless.	enovat emoliti				× Mir	i-Enclosu	nent with Neg re ocedure ed (*) and No				e	
		Is	Locati	ion			140	II-Exemps					ment	
Locatic Asbestos-Containin <u>TO BE A</u> In Face (13	g Material (ACM) BATED cility	Used Mai	ormal d Sole ntenai odial S (12)	ly ly by nce/ Staff?	Asbesto (i.e. t	os Contai thermal s surfaci	ription of ining Materia ystems insuli ng, VAT, or scellaneous)	ation,	Amou (Spec SF or	ify	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A		Dina	Insulation		6 L	F	X	-		-
Baser	ment		-	X		Pipe	Ilisulation							
							- <u>.</u>							-
Name of Registered W	lacte Hauler			NJDEP V	Vaste	Cubic `		Name	of Registered	d Landfill				
Pyramid Contraction				Hauler ID 32613	No.	of Was			O.W.S., Inc	o. ———	<u> </u>			
City, State Clifton, New Jerse	у					11/06		City, S Morri	isville, Pen		nia			
	10	Title				S	ignature / /	1	/ //		ate 1/06/	112		

		NOT	(Pursu	ant to I	NJAC 8:6	0 and 12:120)			(1	tt	31	4
Date of Notification (1)					uilding Ow . McCre	ner/Operator ary	(2)							
Agencies Notified	Type Notification			et Addr	ess ellyn Roa	ad		-79	10	15	7, 1			3
EPA DEP DOL	Initial Amended Amendment	#	City	, State,	Zip Code NJ 079	· · · · · · · · · · · · · · · · · · ·		,		NOV	1 2			7/
DOH DCA	Emergency justification) Cancellation	(including	0.00	ne of Co	ontact . McCre	ary			Teleph	none Nue		113		
DCA			F	FACILIT	TY INFOR	MATION						1		
Name of Facility Where A Residential Propert		g Place (3)					Пз	Facility (4 chool (K-12 ubchapter (2)	than K-12	.			40
Street Address 16 Llewellyn Road							X O	ther (i.e. pr	rivate & c	commercia	l buildir	ngs, h	omes	,
City (5) Summit							Square 2,100		# of F	loors	50	lg. Ag +	е	
County (6) Union	27-1			unty Co	de (7) E ONLY)		Curren	t Use (Prio	or if being	demolish	ed)			
Name of Monitoring Firm	n Hired by Building	Owner (8)	۲,	ASCM N	No.			ement Con						
Street Address							t Address		9 00.7.		-			
							Sargea State, Zip	ant Aven	ue		- 9			
City, State, Zip Code						Clift	on, NJ	07013			-			_
Project Manager for Mo	nitoring Firm		Те	lephone	e No.	AV. 1.500-0104	hone No -689-62			License N 01099	0.			
Start Date (10) 11/06/13		Scheduled 11/06/13		etion Da	ate (11)			A Monitor onmental		atories L	LC			
Occupancy Status Duri	ng Abatement (Che	eck Only One))	3			t Addres	s e 22 Wes	et					
Facility Closed/Val Abatement Perform Other – Describe:	ned Outside of Nor	Period of Ab mal Facility F	atemer lours	nt		City,	State, Zi	p Code						
Scope of Work (Check				-00.00		- 0111	011, 140							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Executed .	novatio				× Mir × Glo	Containm i-Enclosure vebag Pro	re cedure					
		le I	ocation	. T			No.	n-Exempte	d (*) and	Non-Filat		Abate	ment)
Location Asbestos-Containing TO BE A In Far (13	ng Material (ACM) BATED cility	No Used Main Custo	Solely tenancedial Sta (12)	by æ/	Asbest (i.e.	Descriptions Containing thermal system surfacing, Vother miscell	Material ms insula /AT, or	(ACM) ation,	(S	nount pecify or LF)	Removal	Repair	e Encapsulate	Enclosure
	20	Yes	No	N/A							-		Ö	
Baser	ment			X		Pipe Insu	lation		6	LF	X			\vdash
			I NI	DEP W	lacto	Cubic Yards		Name of	f Registe	red Landfi	II			
Name of Registered W Pyramid Contracting			Ha	uler ID 613		of Waste		G.R.O	.W.S.,					
City, State Clifton, New Jerse	у					Disposal Da 11/06/13	ate A	City, Sta Morris		ennsylva	ania			
Completed by		Title	2000			Signat	Gre /	1/	11	49	ate 1/06/	13	- 393	

CLOSE

		(Pur	sua	nt	to	N.J	<u>.A.C.</u>	8:60 and 12	2:120)	Proj	ect Co	mplete	11/4	5/13
Date of Notification	(1) 10/28/13		N	amo	e of	Build f Nev	ding Ov w Jers	vner / Operator (sey Departmen	2) t of Human	4	E 197			
Agencies Notified EPA DEP	Type Notifica	tion	S	tree	et Ad Bo	ddres	ss	South Warrer	Street		o 0313			-
⊠ DOL	Amen	ded R#3-11/5/1:				n, N.	J 0862 tact	5		<u> </u>	Tele	phone Nu	nber	-
□ DCA		ellation	P			arlar						``		
			-/0		ACI	LITY	INFO	RMATION Type of Facility	(A)				-	\dashv
Name of Facility W Woodbridge Dev	here Abateme velopmental	- Exterior Gr	ce (3	ds				School (K-	12) r 8 (Other tha	n K-12)				
Street Address 1289 Rahway Av	reniie							Other (i.e.	private & com	mercial b	uildings,	homes, etc	:.)	
1205 Rallway Av	Ciluo				3			Square Feet	# of Floo		Bldg	ı. Age N/A		
City (5)		County (6)	Co	unty	/ Co	de (7	7)	N/A Current Use (P		N/A molished	4)	NIA		\dashv
Avenel		Middlesex						Various Serv		5,11101101101	-,			
Name of Monitoring	a Firm Hired b	v Building Owne	er (8)			ASC	M No.	Name of Abate	ment Contrac	tor (9)				
Environmental	Connection	inc.	. ,					Bristol Envir		nc				-
Street Address								Street Address 1123 Beaver						
120 North Warre	en Street				-			City, State & Z						
City, State & Zip C Trenton, NJ 086	ode 608							Bristol, PA 1	9007					_
Project Manager for Brian Holbig	or Monitoring F		Telep 609-			Numb 200	er	Telephone Nur (215)788-604	10		ense Nur 509	nber		
Scheduled Start D 10/29/13 (Rev #		Scheduled Com	pletic			(11)		Name of OSH/ Bristol Envir		nc.				
O Status	During Abate	ment (Check on During Entire Pe	ly on	e) of A	Abat	teme	nt	Street Address 1123 Beaver						
	seg/vacateu	outside of Norma	ıl Ho	ours	-7	am to	3pm	City, State & Z						
Describe:	8:00 AM -	4:30 PM Abatement 7:0						Bristol, PA 1	9007					
Scope of Work (C	heck all that a	pply)							☐ Full Cor	ntainmen	t with Ne	gative Pres	sure	
≥3 sf or ≥3	k If		\boxtimes	F	Rend	ovatio	on		Mini-En	closure		The state of the s		
≥3 sf or ≥3 ≥160 sf ≥2				0)em	olitio	n			ag Proce		Triable Dree	sodu.	ro
								Description			nount	Friable Pro		
	Location of estos-Containi	na		Loc		on Ised		Asbestos-Cont		(Sp	ecify	/ todato		
	aterial (ACM)	lig	5	Sole	ly b	y		Material (AC		SF	or LF)	20 70	Encapsulate	B
	BE ABATED	1				ce or staff?		(i.e., thermal sy insulation, surfac	rstems ina. VAT			Remova	apsı	Enclsoure
	in Facility (13)		Cus		2)	naii:		or other miscella	aneous)			<u>a</u>	Jate	ure
	(10)		Yes	1000	10	N/A								
Rickwell betwe	en Cottages	#2 & #3			X			Pipe insula			LF DLF		H	H
Rev #1-Add'l. S	cope of Wo	rk same area		10	X_	H		Pipe Insula	tion	20	J LF	님님	H	H
			H	+	4	H	+			1				
			片	╁	┽	H	+							
			H	廿	Ť	Ħ								
Name of Register	ed Waste Ha	uler					Waste D No.	Cubic Yards of Waste	Name of Reg		_andfill			
Service Transp	ort Inc.				20	990		1 Cu YD Disposal Date	Minerva La City, State	andfill				
City, State New Castle, DE					1			10/7/11	Waynesbu	rg, OH		Date		-
Completed By (P	rint or Type)				Tit	le ojec	f	Signature O	٠, ,	1-1		11/5/13	3	
Gino Pizzigo	oni				10000	anag		Line Pag	gegory	N			-0	

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

GAC Project # 060-13											
Date of Notification (1)	~~ 7 2	042			Name of Building Owner/C RUTGERS, THE ST			ITY OF	N I		
Novemb	er /, z					AILUI	AIA LIZ	11 1 01	140		1-2 ter
Agencies Notified		Notification			Street Address			- U.S.		117	73
XEPA		Initial	Votifica	tion	ENVIRONMENTAL H	HEALTH	H & SAF	ETY D	EPT.		
X DCA		□Amende	d Notif	ication	27 ROAD 1, BLDG 4	086. LI	VINGST	ON CA	MPUS	5	
		STORY AND STORY OF THE STORY OF			City, State, Zip Code	,		Locus of	1		
⊠ DOL	9960	□ Emerg		ncluaing		0054			10	3.452	
■ DEP- No Longer REQUIRE	D	justific	ation)		PISCATAWAY, NJ 0	8854				17.54	
X DOH		☐ Cance	lled		Name of Contact		Telep	hone Nu	mber		8
		_ 0000			MICHAEL SMITH, EI	NV.	-	-	_		
	- 1				HEALTH & SAFETY						
				EAOU ITY ING						_	
				FACILITY INF							
Name of Facility Where Abateme	ent is Tal	king Place (3)		241	Type of Facility (4)						
WAKSMAN HALL, BLD	G# 35	73			☐ School (K-12)						
					Subchapter 8 (other that	n K-12)					
Street Address					X Other (i.e. private & con	nmercial b	uildinas h	omes, etc	:.)		
BUSCH CAMPUS							: 4 Bldg			ars	
			10.	0 - 1 - (7)	Sq. Teet. N/A	01110013	s. T Diag	. Ago.	00. yc	213	
	ounty (6			Code (7)			" *0				
PISCATAWAY	MIDD	LESEX	(State)	Jse Only)	Current Use (prior if being	demolish	ied): AC	ADEMIC			
Name of Monitoring Firm Hired b	v Blda (Owner (8)	ASCM	No.	Name of Contractor (9)						
Cardno ATC	, Diag.	3441.01	0098								
Cardio ATC			0030	10	GREENWOOD ABAT	EMENT	CONSI	II TANT	SINC		
					Street Address		00.100		0 ,		
Street Address					Street Address						
3 TERRI LANE					260 MAIN STREET						
					268 MAIN STREET						
City, State, Zip Code				1000	City State, ZipCode						
BURLINGTON, NJ 080	116				BUTLER, NJ 07405						
Project Manager for Monitoring		Telephone N	lumbor		Telephone Number		Licer	se Numb	er	- 27110	
	1000				Telephone (value)		Lioui	oc rvanio	<u> </u>		
BRIAN KEARNY		609-386	-0000		973-492-0477		008	40			
				B : (11)			000	40			
Scheduled Start Date (10)		Scheduled (n Date (11)	Name of OSHA Monitor					40	
11.20/13		12/02/13			1						
					ENVIROVISION, INC	•					
Occupancy Status During Aba	tement (Check only o	ne)		Street Address						
☐Facility Closed/Vacated Dur	ina Enti	re Period of A	batemen	t							
☐Abatement Performed Outs	ide of N	ormal Facility	Hours -		20-21 WARGARAW F	ROAD	~				
Describe	ide oi ivi	officer a during	i ioui s -		City, State, Zip Code						
		E-00 DM	F-00 A								
☑Other – Describe: Shift H	ours:	5:00 PM -	5:00 A	IAI							
					FAIRLAWN, NJ						
Scope of Work (Check all that a	oply)				10000						
	Transcript St.				X	Full Cor	ntainment	with Neg	ative Pr	essure	
□ >2.4cm>2	ıc			▼Renovation							
≥ 3 sf or ≥ 3				Name of the last o							
≥ 160 sf or ≥	260			Demolition			ag Proced				
		2.00		Annual Control of the		lon-Exem	npted (*) a				re
Location of Asbestos-Containing		ocation Norma			pestos Containing Material		nount	Abaten	nent Typ	<u>e</u>	
Material (ACM) in Facility (13)	Sole	ly by Maint./C	ustodial		nal systems insulation, surfacio		pecify SF	Domesia	Donnie	Encon	Englace
	Staf	f? (12)		VAT, or other mis	cell.)	or	LF)	Kelliove	Repair	спсар 1	LIICIUSE
	YE	s no	NA								
MER 405	X			TSI-Duct Ins	ulation	30	0 SF	X			
			†								
						-		+	+	+	-
Name of Reg. Waste Hauler	1-2	NJDEP Was	ste Haule	rID#	Cubic Yards of Waste:	5 CY		e of Regis			
See Hauler Below #1 & 2		See Belov	v				G.R	.o.w.s.	North	Landf	ill
Access to the control of the control									011 01		
Hauler #1) Greenwood Abatem	ent Con	sultants, Inc	- Butler,	NJ 07405		Disposal			City, Sta		
NJDEP # 12561						12/02/	13		100 Nev		
Hauler #2) S TG - 58 Pyles Lan	ie, New (Castle, De 197	20						Rd. Mor	risville,	ra
NJ DEP# SW211									19067	1700	
							I Date		215-736	-1700	
Completed by (Print or Type)	100000	<u>Title</u>			Signature		Date			001-	
RAYMOND C. PEDALII	ON	SENIOR P	ROJE	CT	Raymand C. Per	deline		Novem	iber 7	2013	,
		MANAGE			ragmana C. Tea	www.					

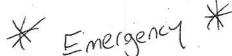
State of New Jersey - Notification of Asbestos Abatement (Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

GAC Project # 060-13 Name of Building Owner/Operator (2) Date of Notification (1) RUTGERS, THE STATE UNIVERSITY OF NJ November 7, 2013 Notification Type Agencies Notified Street Address ENVIRONMENTAL HEALTH & SAFETY DEPT. ☑ Initial Notification **X**EPA 27 ROAD 1, BLDG 4086, LIVINGSTON CAMPUS ☐ Amended Notification X DCA X DOL ■ Emergency (including City, State, Zip Code CULT PISCATAWAY, NJ 08854 X DEP- No Longer REQUIRED justification) Name of Contact Telephone Number X DOH □ Cancelled MICHAEL SMITH, ENV. **HEALTH & SAFETY FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) ☐ School (K-12) RU GYM, BLDG# 3097 Subchapter 8 (other than K-12) Street Address Other (i.e. private & commercial buildings, homes, etc.) **COLLEGE AVENUE CAMPUS** # of Floors: 4 Bldg. Age: 80+ years Sq. Feet: N/A County (6) County Code (7) City (5) (State Use Only) **MIDDLESEX** Current Use (prior if being demolished): ACADEMIC **NEW BRUNSWICK** Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Contractor (9) 0098 Cardno ATC GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address Street Address 3 TERRI LANE **268 MAIN STREET** City State, ZipCode City, State, Zip Code **BUTLER, NJ 07405** BURLINGTON, NJ 08016 Project Manager for Monitoring Firm Telephone Number License Number Telephone Number **BRIAN KEARNY** 609-386-8800 00840 973-492-0477 Name of OSHA Monitor Scheduled Start Date (10) Scheduled Completion Date (11) 12/16/13 12/02/13 ENVIROVISION, INC. Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 20-21 WARGARAW ROAD ☐ Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code Describe ☑Other - Describe: Shift Hours: 5:00 PM - 5:00 AM FAIRLAWN, NJ Scope of Work (Check all that apply) Full Containment with Negative Pressure ■ Renovation Mini-Enclosure ≥ 3 sf or ≥ 3 lf ■ Demolition Glovebag Procedure > 160 sf or > 260 ■ Non-Exempted (*) and Non-Friable Procedure Abatement Type Description of Asbestos Containing Material Amount Is Location Normally Used Location of Asbestos-Containing (Specify SF Material (ACM) in Facility (13) Solely by Maint./Custodial (ACM) (i.e. thermal systems insulation, surfacing, Remove Repair Encap Enclose VAT, or other miscell.) or LF) Staff? (12) NO NA YES 400 SF X MER CHASE 051A X TSI-Duct Insulation 20 LF X MER CHASE 051A X TSI-Pipe Insulation Name of Registered Landfill NJDEP Waste Hauler ID # Name of Reg. Waste Hauler 5 CY Cubic Yards of Waste: G.R.O.W.S. North Landfill See Hauler Below #1 & 2 See Below Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 Disposal Date City, State 12/16/13 100 New Ford Mill NJDEP # 12561 Rd. Morrisville, Pa Hauler #2) S TG - 58 Pyles Lane, New Castle, De 19720 19067 NJ DEP # SW2117 215-736-1700 Date Signature Completed by (Print or Type) SENIOR PROJECT Raymand C. Pedalino November 7, 2013 RAYMOND C. PEDALINO MANAGER

* EN	nergency?	OTIFICATI (Pursua	ON OF ant to N	JAC 8:	Jersey STOS ABAT 60 and 12:1		<u>ch</u>		370					
of Notification (1)		Nam Wil	ne of Bu Ilaim H	ilding O ławk F	wner/Opera Private Ho	tor (2) me				100	J - , / .	1,3		ï
3/13	Type Notification	Stre	et Addr	ess								-	1	
cies Notified			7 4t Av	Zin Co	ode					NOV 1 ~			1	
EPA	Initial Amended	M	t Empl	hraim	NJ 08059				Telepho	one Number				
DEP DOL	Amendment #	g Na	ame of C	Contact				2					1	
DOH	justification) Cancellation	В	ill .	ITV INF	ORMATION	V	Type of F	acility (4)				7	1	
DCA	Name of the last o	(3)	FACIL	311.110				10/ 15	1	V 12)		5000	-	
me of Facility Where	Abatement is Taking Place ate Home	. (-)					Sub Oth	chapter	(Other livate & c	than K-12) commercial bu	ildings, ho	mes,		
illaim Hawk I III	ale Home						etc.)		loors	Bldg. Ag	е		
reet Address 07 4t Ave	18 <u></u>						Square 1000+		2	1	35+		\dashv	
							Current	Use (Pri	or if bein	g demolished))		1	
Ity (5) It Emphraim NJ	08059		County	Code (7) NLY)									
County (6)	-			M No.		Name	of Abate	ment Co	ntractor	(3)		•		1
Ocean	Firm Hired by Building Own	er (8)	ASC		١		naco In							
N/A						PO	Box 32	.9						1
Street Address						City	, State, Zi est Berli	p Code	8091					4
City, State, Zip Cod	e						ephone N			License No).			1
			Tele	phone N	No.	85	6-753-9	9800		00727				-
Project Manager fo	r Monitoring Firm			Det	10 (11)	Na	me of OS	HA Mon	itor					_
(40)		Scheduled	Comple	tion Dai	(e (11)	S	ame							
Start Date (10) 11/7/13		11/8/13				St	reet Addr	ess						-
Occupancy Status	During Abatement (Check	pariod of Ab	atemen	ıt		10	ity, State,	Zip Cod	е					
Facility Clos	ed/Vacated During Entire Performed Outside of Norm cribe: home owner will be because of Norm	al Facility h	Hours											
Abatement	cribe: home owner will be r	101110				7	- [r. II Con	tainment	with Negative	Pressure)		
Scope of Work (Check All That Apply)	□ P	enovatio	on on			F	seini Ln	ansule				e	
Version AS to the second	Nf.		emolitio	n			×	Gloveba Non-Ex	g Procedempted (dure *) and Non-Fr	iable Prod	Abate	ment	
≥3 sf or ≥3 ≥160 sf or	≥260 II				Γ					20		Ту	pe	Т
		Is	Location Normall	on,		Des	cription o	f	CAA:	Amount	\		E	1
	Location of	110	ed Sole	ly by	Asbesto	os Cont	aining Ma	insulation	n,	(Specify SF or LF)	Removal	Repair	Encapsulate	
Asbestos-	Location of Containing Material (ACM) TO BE ABATED	Cu	aintenai stodial	Staff?	(1.6.		cing, VAT		1	1 5 4 1580 (414)	val	1	late	1
	In Facility		(12)		4	other	Historian	5005.00055N				+-	+-	+
1	(13)	Yes	No	N/A	-	Flo	or Tile o	nly		400 Sf	×	+	+	-
				X						4		+	+	-
	Basement											+	+	_
														_
			1			Cut	oic Yards			of Registered I	Landfill			
	Waste Hauler			NJDE	P Waste er ID No.	of \	Naste		G.R.C	D.W.				_
Name of Re	egistered Waste Hauler			2245	9	2 Dis	sposal Da	te	City, S	tate isville PA 19	9067			
United Co						11	/8/13		Morri	SVIIIE PA 1	Date			
City, State			Title				Signat	ure			11/	6/13		_
Elm NJ														

Date of Notification (1) 11/7/13				Building Cres Born					115	-					
Agencies Notified Type Notification	1	1 -	treet Ad 500 B	dress ranch Pi	ike					NOV	13	7	, Ed		-
EPA Initial Amended Amendment #				e, Zip Coo ninson N		77		ì	A.S.				7.		
Emergency (ir justification) DCA Emergency (ir justification) Cancellation	cluding	250	ame of	Contact					Tele	ephone N	lumb	er			
	D. (0)		FACIL	ITY INFO	RMATIC	N	-	£ = -104 . / 4							
Name of Facility Where Abatement is Taking Office next to Church	Place (3)						□ s	of Facility (4 chool (K-12	2)						
Street Address 2500 Branch Pike						7	図。	ubchapter of ther (i.e. protect)	8 (Otherivate &	er than K	-12) rcial l	buildi	ngs,	home	s,
City (5) Cinnaminson NJ 08077							Square 1000-	e Feet	# of 2	Floors		35	dg. A	ge	
County (6) Burlington				ode (7) SE ONLY)		_	Currer	nt Use (Prio	r if bei	ng demol	lished	i)			
Name of Monitoring Firm Hired by Building ON/A	wner (8)		ASCM	No.			of Abate aco In	ement Con	tractor	(9)					
Street Address							Address 3ox 32								
City, State, Zip Code							state, Zip t Berlir	Code NJ 080	91						
Project Manager for Monitoring Firm		Т	elephor	ne No.			none No 753-98			License 00727					
Start Date (10) 11/20/13	Scheduled		pletion [Date (11)		Name		A Monitor	-						2500
Occupancy Status During Abatement (Check	Only One					Street	Addres	S							
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other – Describe:	eriod of Ab	ateme	ent		_	City, S	State, Zij	p Code							
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 lf ≥ 160 sf or ≥260 lf	10000	novati molitic	1000				Min Glo	Containme i-Enclosure vebag Prod i-Exempted	e edure					a.	
	T 10.1	ocatio					- ,,,,,		. () =				Abate	ment	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Main Custo	rmally Solely tenan	y by ce/		tos Cont thermal surfa		Material is insula AT, or		(Amount Specify F or LF)		Remova	Repair	e Encapsulate	Enclosure
	Yes	No	N/A									Alec S.M.		Te	
Kitchen area		9	х		F	loor til	е		3	50 Sf		x			
									-2	-	+				-
						-									
Name of Registered Waste Hauler		100000	JDEP Wauler ID	77 (1-5) (1-5)	Cubic of Wa	Yards		Name of	100	ered Lan	dfill				
United Containers			2459	NO.	3	escon.		G.R.O.							
City, State Elm NJ					11/27	sal Date 7/13	=	City, Stat Morrisv		A 1906	7				
Completed by Anthony T Perna	Title Presid	ent		11.000	5	Signatur	el		_		Date 11/	9 7/13	3	47250000	





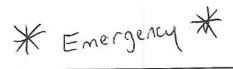
CK 3708

	J							CK		9		-		
Date of Notification (1) 11/7/13					luilding Ow Ile Stiebl				7	W.				
Agencies Notified	Type Notification		0.000	reet Add			+		7V 1 5	EVER I				
EPA DEP	Initial Amended Amendment #		Ci	ty, State	, Zip Code wkin NJ	0805	.0	(5.1	1 2			4.6		
DOL DOH DCA	Emergency (ir justification)		Na	ame of C	Contact		7		Telephon	e Numb	er			
☐ DCA	Cancellation				TY INFOR	MATIC	ON		İ					\dashv
Name of Facility Where Gabrielle StiebPriv	Abatement is Taking rate Home	Place (3)		TAGIL	TI III OI		Туре	of Facility (4) School (K-12)					
Street Address 60 Andrew Dr	9						×	Subchapter 8 Other (i.e. pri etc.)	Other that ivate & com	n K-12) mercial	buildi	ngs, h	omes	3,
City (5) Manahawkin NJ 08	8050							re Feet	# of Floor	rs	35	lg. Ag +	е	
County (6) Ocean			C	ounty C	ode (7) SE ONLY)		Curre — Hom	ent Use (Prio	r if being de	molishe	ed)			
Name of Monitoring Firm	m Hired by Building C	Wner (8)	1	ASCM	No.		Name of Aba Pernaco I		ractor (9)			•		
N/A Street Address							Street Addre	ss					-	
City, State, Zip Code							City, State, Z	Zip Code			-	<u> </u>	22/90/10/1	\dashv
Project Manager for Mo	nitoring Firm		Τī	elephon	e No.		West Berl	lin NJ 0809		ense No				_
	Tillotting t it				, ,		856-753-9 Name of OS		007	727				\dashv
Start Date (10) 11/11/13		Schedule 11/18/1	3	pietion L	Jate (11)		Same							
Occupancy Status Duri	ng Abatement (Chec	k Only One	≥)				Street Addre	ess						
Facility Closed/Va Abatement Perform Other – Describe:	cated During Entire F med Outside of Norm	Period of A nal Facility	bateme Hours	ent	- History	_	City, State, 2	Zip Code	3.					
Scope of Work (Check	All That Apply)			•		v								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	enova t emoliti				☐ M G	ull Containme ini-Enclosure lovebag Proc on-Exempted	e cedure				a	
						_	IN IN	OII-EXEMPLE	1 / and No	III IIGD	_		ment	t
	- *		Location lormall									Ту	ре	
Locati Asbestos-Containir TO BE A In Fa (13)	ng Material (ACM) BATED cility	Use Mai	d Solel ntenar odial S (12)	y by nce/	Asbest (i.e.	os Cor therma surfa	escription of staining Material systems insu acing, VAT, or miscellaneous	lation,	Amou (Spec SF or I	ify	Removal	Repair	Encapsulate	Enclosure
exterior	siding	100		X		ext	erior siding		1200	sf	x			
kitch				х	is a	F	Floor tile		200	Sf				
		_		-										-
Name of Registered W	/aste Hauler		100000	JDEP V		100000000000000000000000000000000000000	c Yards	Name of	Registered	Landfil	1			1
United Containers			6.555	lauler ID 2459	No.	of W		G.R.O.						
City, State Elm NJ		27					osal Date 8/13	City, Sta Morris	te ville PA 19	9067		711		
Completed by		Title					Signature				ate	_		
Anthony T Perna		Pres	ident				(1			1	1/7/1	ა 		



* Emergency *

Emergence	1	.,,	(Pu	rsuant to	NJAC 8:0	60 and	12:120)	PE.	37	04				
Date of Notification (1) 11/7/13					Building Ov Krivanec										\neg
_ 1.	Type Notification			Street Add	dress each Hav	ven W	est Bl	vd	1		5 4	Į.			
EPA DEP DOL	Initial Amended Amendment #				e, Zip Code awkin NJ		50		(1	1				
M DOH DCA	Emergency (in justification) Cancellation	ncluding	-	Name of 0	Contact					Tele	phone Nur	nber			
				FACIL	ITY INFOR	RMATIC	NC						_		
Name of Facility Where Al Darly Krivanec Priv								☐ Sc	Facility (4 chool (K-12	2)					
Street Address 1143 Beach Haven	West Blvd							X O	ubchapter ther (i.e. pi c.)				ings, l	nome	š,
City (5) Manahawkin NJ 080	950							Square 1000-	Feet	# of 1	Floors	35 35	dg. Aq	je	
County (6) Ocean				County C	ode (7) SE ONLY)	·	_	Curren	t Use (Pric	or if beir	ng demolis	hed)			
Name of Monitoring Firm N/A	Hired by Building (Owner (8)		ASCM	No.			of Abate	ement Con	tractor	(9)				
Street Address								Address 3ox 32			3-1				
City, State, Zip Code								State, Zip	Code NJ 080	91					
Project Manager for Moni	toring Firm	an life-		Telephor	ne No.		Telep	hone No 753-98			License N	No.			
Start Date (10)		Schedule	ed Con	npletion [Date (11)				A Monitor		00121				
11/11/13		11/18/1	3	•			Sam								
Occupancy Status During							Street	Address	S						
Facility Closed/Vaca Abatement Performe Other – Describe: _	ated During Entire F ed Outside of Norm	Period of A nal Facility	Hours	nent S			City, S	State, Zip	Code						
Scope of Work (Check A	Il That Apply)			4:		q		_					83***		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	Renova Demoli	33	ð.			Min Glo	Containm i-Enclosure vebag Pro	e cedure					
							<u>E</u>	Nor	-Exempte	d (*) an	d Non-Fria	ble Pro		e ement	
	6		Locat			De	scriptio	- of						ре	
Location Asbestos-Containing TO BE AB, In Facil (13)	Material (ACM) ATED ity	Use Ma	d Sole	ely by ince/ Staff?	Asbest (i.e.	os Con therma surfa	taining	Material ns insula AT, or	(ACM) tion,	(5	mount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
exterior	aiding	100		X		exte	erior si	idina		9	000 sf	×	-		
exterior s	iding			1	-										
	eta Unidas		<u> </u>	NJDEP W	Vacto	Cubi	c Yards		Name of	Regist	ered Landi	<u>l</u>			
Name of Registered Was United Containers	ste Hauler			Hauler ID 22459		of Wa			G.R.O.		cicu Landi				
City, State Elm NJ							osal Dat 8/13	е	City, Sta Morris		A 19067				
Completed by Anthony T Perna	9	Title Pres	ident	:			Signatu	re-		_		Date 11/7/1	3		



3.6	7 - 15	
	29	
370	2 1	11.
,	£1 112.00	100

Date of Notification (1) 11/7/13					uilding Ow Hammil						MAY 1				
Agencies Notified	Type Notification		1	reet Add 41 eas	ress t Hudson	Driv	/e					- 3 4	UI		
EPA DEP DOL	Initial Amended Amendment		Ci	ty, State ittle Eg	, Zip Code g harbor	NJ (08070					, .			
DOH DCA	Emergency (i justification) Cancellation	ncluding		ame of C en	Contact	V				Tele	ohone Num	ber			
			_	FACILI	TY INFOR	MATI	ON	T	F==!!h+ (4)						-
Name of Facility Where A Kenneth Hammill P	Abatement is Taking rivate Home	g Place (3)						☐ Sc	Facility (4))	- 4h 1/ d2				
Street Address 141 east Hudson D	rive				81			☐ Su Otl etc	ner (i.e. pri	ivate &	r than K-12 commercia) al buildir	ngs, t	omes	i,
City (5) Little Egg harbor No	J 08070							Square 1000+		# of 1	Floors	35	lg. Ag +	e	
County (6) Ocean	9.2	62	C	ounty Co	ode (7) SE ONLY)			Current		r if beir	ng demolish	ed)			
Name of Monitoring Firm	Hired by Building	Owner (8)	1	ASCM	No.			of Abate	ment Cont	ractor	(9)				
N/A Street Address					•		Street	Address							\neg
City, State, Zip Code				-				30x 329 state, Zip		-					_
			-1-	alashan	o No			t Berlin	NJ 080	91	License N	lo.			_
Project Manager for Mon	nitoring Firm			elephon	Α.		856-	753-98	00		00727				
Start Date (10) 11/11/13		Scheduled 11/18/13		pletion D	Date (11)		Name Sam		A Monitor						
Occupancy Status Durin	ng Abatement (Che	ck Only One)	1			20%	Street	Address	3						
Facility Closed/Vac Abatement Perform Other – Describe:	cated During Entire ned Outside of Non	Period of Ab mal Facility F	atemo	ent		_	City, S	State, Zip	Code	10					
Scope of Work (Check	All That Apply)		4		. 6			-							
≥3 sf or ≥3 if ≥160 sf or ≥260 if		(1)	novat moliti					Mini Glov	-Enclosure vebag Prod	e cedure	n Negative			e	
			(4)					14011	PLACINIPIE	4 () 41	140111114		1975 A	ement	
	•		ocation of the contract of the			_							Ty	ре	
Asbestos-Containin TO BE Al In Fac (13	g Material (ACM) BATED cility	Used Mair Custo	Solei tenar	ly by nce/	Asbest (i.e.	os Co therm sur	escription ntaining al syster facing, V miscella	Material ns insula AT, or	(ACM) tion,	(Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
exterior	sidina	100		x		ex	terior s	iding	7.	1	200 sf	x			
- CALCINE	o.cg		-	x		_			9						
															-
N (D intend W	lasta Unular		TN	JDEP V	Vaste	Cub	ic Yards		Name of	Regis	tered Landi	<u> </u>	_		
Name of Registered W United Containers	aste nautei			lauler ID 2459		B 5 10 10 10 10 10 10 10 10 10 10 10 10 10	Vaste		G.R.O						
City, State Elm NJ							oosal Da 18/13	te	City, Sta Morris		A 19067				
Completed by Anthony T Perna		Title Presid	dent				Signate	ife?			100	Date 11/7/1	3		

* Emergency *

1 ENES C	(1	Pursi	uant to N	JAC 8:60	and 12	2:120)	CK	37	0				_
rate of Notification (1)		Ri	ck & Pa	lding Owne tti Smith	er/Ope	rator (2)					(7)		1
gencies Notified Type Notificatio	n		eet Addre B east 66						1.6	1 2		1	
EPA Initial Amended Amendme	nt#	Cit	y, State, Z	Zip Code ach NJ 0	8008		N.						
A Ciliergeno	y (including n)	Na	me of Co					Telephone	e Numbe	r	19		
DOH justificatio Cancellati	on	1	ick	Y INFORM	ATION	· ·					_		
Name of Facility Where Abatement is Tal	king Place (3)	_	PACILIT	TINFORM	ATIO	Type of	Facility (4)						
Rick & Patti Smith						Su	thool (K-12) bchapter 8) (Other that ivate & com	n K-12)	wilding	ne ho	mes	
Street Address 13 east 66th st						et Square	c.)	# of Floor			. Age		
City (5) Brant Beach NJ 08008						1000-	۲	2	- eliebas	35+	1		
		C	ounty Co	de (7) E ONLY)		- Home	€	r if being de	molished				
Name of Monitoring Firm Hired by Buildi	ng Owner (8)	7	ASCM N	lo.		Name of Abate Pernaco In		tractor (9)			•		
N/A Street Address						Street Address							
City, State, Zip Code		_			-	City, State, Zi	Code	01					
		TT	Telephone	No.	-+	West Berlin		Lic	ense No.			_	
Project Manager for Monitoring Firm						856-753-98 Name of OSF	800	00	727			_	
Start Date (10) 11/11/13	Scheduled 11/18/13		pletion Da	ate (11)		Same	IA WOINCO						
Occupancy Status During Abatement (Check Only One))				Street Addres	SS						
Facility Closed/Vacated During Er Abatement Performed Outside of Other – Describe:	tire Period of Ab	atem	ent		_	City, State, Z	ip Code						
Scope of Work (Check All That Apply)		-	*		÷								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	The state of the s	enova emolit				Mi	ni-Enclosur	nent with Ne re ocedure ed (*) and N				S	
						△ NO	n-Exemple	and () and N	OII-I Habi	1	Abate	ment	
	ls l	Locat orma	iop,								Ту	ре	_
Location of Asbestos-Containing Material (ACI TO BE ABATED In Facility (13)	M) Used	d Sole	ely by ince/ Staff?	Asbesto (i.e. t	os Con therma surfa	escription of taining Materia I systems insu- acing, VAT, or miscellaneous	lation,	Amo (Spe SF or	cify	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A					200	0 ef	x	-		-
exterior siding			x		exte	erior siding		200	0 51	 			-
		-	-	-						1			T
			+										
Name of Registered Waste Hauler			NJDEP V		Cubi of W	c Yards	15.000000000000000000000000000000000000	of Registere	d Landfil	I			
United Containers			Hauler ID 22459	NO.	3		G.R.C).W.S.					
City, State						osal Date 8/13	Morri:	sville PA					
Completed by Anthony T Perna	Title Pres	iden	nt			Signature	(10075	ate 1/7/1	3		
Antinony i Fema					-1								





CK 3705

Name of Building Owner/Operator (2) Rick Fekula Private Home	nes,
September Street Address Square Feet For Floors Square Feet For Floors Square Feet For Floors Square Feet S	nes,
Initial DDA DPA D	nes,
DOH DCA Justification) Justification Rick Facility Where Abatement is Taking Place (3) Rick Fekula Private Home Street Address Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) Other (Le, private & commercial buildings, ho etc.) Street Address Turkerton Beach NJ 08070 County (6) County Code (7) (STATE USE ONLY) Home Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Permaco Inc. N/A Street Address City, State, Zip Code	nes,
DOH DCA	nes,
Name of Facility Where Abatement is Taking Place (3) Rick Fekula Private Home Street Address 141 Flamingo Ave City (5) Turkerton Beach NJ 08070 County (6) Cocan Name of Monitoring Firm Hired by Building Owner (8) N/A Street Address City, State, Zip Code	ies,
Name of Faculty Writere Audrense it is Taking Flace (9) Rick Fekula Private Home Street Address 141 Flarmingo Ave City (5) Turkerton Beach NJ 08070 County (6) Ocean Name of Monitoring Firm Hired by Building Owner (8) N/A Street Address City, State, Zip Code City, State, Zip Code Project Manager for Monitoring Firm Telephone No. Start Date (10) 11/11/13 Coccupancy Status During Abatement (Check Only One) Street Address City, State, Zip Code Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other – Describe: School (K-12) Subchapter 8 (Other than K-12) Subchapter 8 (Other file and the total indicate and the subchapter 8 (Other file and the total indicate and the subchapter 8 (Other file and the subchapter 8 (Other than K-12) Subchapter 8 (Other file and the subchapter 9 (Other file and the subchapter 8 (Other file and the subchapter 9 (Other file and the subchapt	nes,
City (5) Turkerton Beach NJ 08070 County (6) Ocean Name of Monitoring Firm Hired by Building Owner (8) N/A Street Address City, State, Zip Code City, State, Zip Code City, State, Zip Code Project Manager for Monitoring Firm Telephone No. Start Date (10) 11/11/13 Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Exempted (*) and Non-Exem	les,
City (5) Turkerton Beach NJ 08070 County (6) Ocean Name of Monitoring Firm Hired by Building Owner (8) N/A Street Address City, State, Zip Code City, State, Zip Code City, State, Zip Code Project Manager for Monitoring Firm Telephone No. Street Address PO Box 329 City, State, Zip Code West Berlin NJ 08091 Telephone No. 856-753-9800 City, Start Date (10) 11/11/13 Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other – Describe: Scope of Work (Check All That Apply) Step of 23 If 1000+	
County (6) Ocean County Code (7)	
Name of Monitoring Firm Hired by Building Owner (8) N/A Street Address City, State, Zip Code City, State, Zip Code Project Manager for Monitoring Firm Telephone No. Street Address PO Box 329 City, State, Zip Code West Berlin NJ 08091 Telephone No. 856-753-9800 Start Date (10) 11/11/13 Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other - Describe: Scope of Work (Check All That Apply) ≥ 3 sf or ≥3 lf ≥ 160 sf or ≥260 lf Name of Abatement Contractor (9) Pernaco Inc. Name of Abatement Contractor (9) Name of Osha Monitor (11) Name of Osha	
Street Address Street Address City, State, Zip Code City, State, Zip Code City, State, Zip Code West Berlin NJ 08091 Telephone No. Telephone No. Start Date (10) 11/11/13 Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other – Describe: Scope of Work (Check All That Apply) Renovation Demolition Street Address City, State, Zip Code City, State, Zip Code Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure	
City, State, Zip Code City, State, Zip Code West Berlin NJ 08091 Telephone No. Start Date (10) 11/11/13 Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other – Describe: Scope of Work (Check All That Apply) Street Address City, State, Zip Code City, State, Zip Code City, State, Zip Code Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure	
Project Manager for Monitoring Firm Telephone No. Start Date (10) 11/11/13 Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other − Describe: Scope of Work (Check All That Apply) Scope of Work (Check All That Apply) Renovation Demolition Telephone No. Telephone No. 856-753-9800 Name of OSHA Monitor Same Street Address City, State, Zip Code Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure	
Project Manager for Monitoring Firm Telephone No. 856-753-9800 00727	
Start Date (10) 11/11/13 Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other – Describe: Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Renovation Demolition Street Address City, State, Zip Code Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure	
Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other – Describe: Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Renovation Demolition Street Address City, State, Zip Code Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure	
Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other – Describe: Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Renovation Demolition City, State, Zip Code Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure	
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Renovation Demolition Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Demolition Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure	
Abate	
Location of Asbestos-Containing Material (ACM) In Facility (13) Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12) Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Amount (Specify SF or LF)	Encapsulate
Yes No N/A exterior siding 1200 sf x	1
exterior siding X exterior siding	
Name of Registered Waste Hauler Name of Registered Landfill Name of Registered Landfill Name of Registered Landfill Of Waste G.R.O.W.S.	
United Containers 22459 3	
City, State City, State City, State City, State City, State City, State Morrisville PA 19067	
Completed by Anthony T Perna Title President Signature 11/7/13	

NOTIFICATION (Pursuant

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

3707

Date of Notification (1)	FIN	· J	-			Building O						11.5	12		- 12	
11/7/13 Agencies Notified	Type	Notification	-		Geralo	d Walters	Priv	ate Ho	me	511		NOV	1 0	n.n.	5	
	-			1 -		ry Alice						NOV	13			
EPA DEP DOL	A A	nitial .mended .mendment #				e, Zip Cod awkin No		50								
DOH DCA	ju	mergency (i ustification) ancellation	ncluding	14 102	ame of Gerald	Contact					Tele	phone Nu	mber			
Name of Facility Where	Ahatèm	ent is Taking	Place (3)		FACIL	ITY INFO	RMAT	ION	Type o	of Facility (4)			10.7		
Gerald Walters Pr			11 1800 (0)							chool (K-12						
Street Address 100 Mary Alice		0							X O	ubchapter 8 other (i.e. pr	3 (Otherivate 8	er than K-1 commerc	2) ial build	dings,	home	es,
City (5)	-								Square	tc.) e Feet	# of	Floors	В	ldg. A	ge	
Manahawkin NJ 08	8050							8	1000-		1			5+	328	
County (6) Ocean					County C	code (7) SE ONLY)			Home	nt Use (Prio e	r if bei	ng demolis	shed)			
Name of Monitoring Firm N/A	n Hired I	by Building C	Owner (8)		ASCM	No.			of Abate naco In	ement Conf	tractor	(9)		,	0	
Street Address		£0							Address Box 32	-						
City, State, Zip Code								500000000000000000000000000000000000000	State, Zip		04					
Project Manager for Mo	nitoring	Eirm		17	elephor	ne No			hone No	n NJ 0809	91	License I	No.			
Project Manager for Mo.	riitorii ig	,			Сісріїої	,			753-98			00727				
Start Date (10) 11/11/13			Schedule 11/18/1		pletion [Date (11)		Name Sam		IA Monitor						
Occupancy Status Durir	ng Abate	ement (Chec	k Only On	e)				Stree	t Addres	s						
Facility Closed/Vac Abatement Perform Other – Describe:	ned Out	uring Entire F side of Norm	Period of A nal Facility	batem Hours	ent			City,	State, Zi	p Code						
Scope of Work (Check	All That	Apply)			٠.		*		-							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf				tenovat Jemoliti					Min Glo	Containme	e cedure	4.			re.	
			l le	Location	nn.	I			inoi	n-Exempted	1 () al	u Non-i ne	J I	Aba	emen	ıt
Location	on of		N	Normall d Solel	ý			escriptio					\vdash	T	уре	1
Asbestos-Containin TO BE Af In Fac (13	BATED	al (ACM)	Ma Cust	intenar todial S (12)	ice/ staff?		therm sur				(Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
exterior	siding		Yes	No	N/A X		ey	terior s	idina		1	000 sf	×	+		+
exterior	Siding		-		<u> </u>			101101 0	idii ig	-			+	+	1	
			+			-							+	+		
														T	1	
Name of Registered Wa	aste Hau	uler			JDEP V auler ID		90000	ic Yards Vaste		1805 MANAGES	our Sie	ered Land	fill			
United Containers					2459	NO.	3	vasie		G.R.O.	W.S.					
City, State Elm NJ								osal Dat 18/13	e	City, Stat Morrisv		A 19067				
Completed by Anthony T Perna			Title Presi	ident				Signato	rse	1		100	Date 1 1/7/ 1	3		

		notii i)	PICATION	Lote of New Jures N.O.F. ASBESTON N.O.F. ASBESTON N.O.F. ASBESTON	AHAYE	MENT (DOL	10	111	1	
Uste of Notification (1) November 6, 2013			Name	Huilding Owner	Operator	(2)	1 4 24 2	1	1	1	10
Agencies Notified Type Notification			- 3	dil School Pul	olio per	iobla Ghei	H# 8177		1	ل	
				Turnersville R	bad		WAIVE	3 15	PRO	VE)
DEP Amended Amended Amendment		_		ste, Zip Cede 1III, NJ 08021			MAINE	HAL	110		_
DOH Junification)	including			Contact D'Donnell			Tulenhan	o Numbe	d		
			FAC	LITY INFORMAT	ION				_		
Name of Facility Where Abelement is Taking Overbrook High School	Place (9)				Type of Facility	(4)				
Street Address 1200 Turnerville Road						Other (Lo.	12) or 8 (Other than private & com	n K-12) mercial b	ų idings	, hami	ens.
City (ā) Pine Mili			*****			Square Feet 5,000	2 of Floor	is.	Bidg.	Ago	
County (6) Camden			COUNTY	Code (7)		Current Use (Pr School	or if boing de	molishad)			74
Haino of Monitoring Firm Hired by Building C Epic Environmental	mar (6)		ABC	No.		of Absternant Co					
Street Address 1930 Brown Road	0.70					Address Culler Ave.		•			
City, Sinte, Zip Code Nawfield, NJ 08344					120000000000000000000000000000000000000	e Shade, NJ	08052				
Project Manager for Maniforing Firm Jim Eberts				5-1077	12.000000000000000000000000000000000000	755-0099	Licer 008	nue No. 42			
November 7, 2013	Novem	ber 1	nigialion 1, 201	Date (11) 3	Name EMS	of OSHA Monillai			2		
Decupancy Status During Absternant (Chock P	2. 3. 3	- 1				Address Haddon Avo					
Abatament Performed Oinside of Normal Other - Describe:	ni Facility	Houn	5		7.35	lata, Zip Code Imont, New J	emey OR1	DB.			
Scope of Work (Check All That Apply).								,			-
23 of or 23 2 2 60 st or 2260		le nove le moli				Mini-Enclosur Glovebag Pro				·	
		Local							Abet	emant	
Agostos-Contening Material (ACM) 10 BE ADATED 10 Fedility (13)	Dag Ma	d Sole of Sole intonu odial 5 (12)	מל על עלו מינה/	Asbeston Con (i.o. thermol ourte		laterial (ACM) insulation, T. er	Amount (Specily 8F or LF	13	T	Encapsulate	Enclosure
Gym/F122/Main Off./Print Shop	Yes	Иn	NIA	,						鱼	ব্য
Gym/F122/Main Off./Art Room	-	×	-	Plpe Fillin			11 LF)ac	-		
Gymr 1 221Main Chijari Room		×		Pipe Fittir	igs (Gl	ove-Beg)	7 LF	300	K		_
Name of Registrat Westo Heuler		T N	JDEP W	nela I Cubi	Yards		District to be				
reshold		н	auler IU 2263			Change of the San San	Regisioned Le Landfill	nayu			
City, State Aount Holly, New Jersey 08060					/2013	Oily, State					
Completed by	Title	- Ilan	Mana		lonature			Dete 11/8/2	•		_

ASB-41 (R-08-06)

[&]quot;Do not use this form for assessos accusaire exampled activities.

	of Notification (1) 04/2013						Building C REYES		perator	(2)	5	1112			-		
Ager	ncies Notified	Туре	Notification		1	Street Add	dress .OUIS S	TREE	т.	93.e		i, La	W, C	1	4. 1	1	
×	EPA DEP DOL	日	Initial Amended Amendment				e, Zip Coo RET N.		•		. 1.	. 1	10V 1 g	201	3		
×	DOH DCA	×	Emergency (justification) Cancellation	including		Name of 0	Contact REYES	3				Tele	phone Num	ber			ì
						FACIL	ITY INFO	RMATIC	ON		<u></u>				- ;		
PR	ne of Facility Where IVATE	Abate	ment is Taking	g Place (3)		HE 5-10/1-					of Facility (4 School (K-1	2)				304 G	
	et Address 15 LOUIS ST.					27				N C	Other (i.e. petc.)		r than K-12 commercia	l build	- 57/A	200	s,
City	⁽⁵⁾ RTERET N.J.										e Feet 500	# of	Floors 1	B	dg. Aı 85		
Cou	nty (6)					County C	ode (7) SE ONLY)		_	Curre	nt Use (Pric	or if bein	ng demolish	ed)			
Nam	ne of Monitoring Firm	Hire	d by Building (Owner (8)		ASCM	No.				tement Con QUALITY		(9) ISTRUCT	ION	LLC		
Stre	et Address			,		i				Addres AN O	s RDEN PL	- •					
City	, State, Zip Code										p Code SACK N.J	. 0760)1				
Proj N/A	ect Manager for Mor	nitorin	g Firm			Telephon	ie No.			one No -708-			License No 01135	D .		711	
	t Date (10) /06/2013			Schedule 11/07/2		npletion D	Date (11)				A Monitor Probe	Ι,	nc,				
	upancy Status Durir								Street	Addres	berty	,			1517		
×	Facility Closed/Vac Abatement Perform Other – Describe:	ated I	Ouring Entire I utside of Norm	Period of A nal Facility	baten Hours	nent S			City, S	tate, Z	p Code						
Sco	pe of Work (Check /	All Tha	at Apply)						ries	CCN	en N.	3 , Q	8240				_
×	≥3 sf or ≥3 lf ≥160 sf or ≥260 lf				enova emolit					Mir Glo	ni-Enclosure ovebag Prod	e cedure	Negative P			.	
				Is	Locat	ion				I NO	II-Exemple	1 () and	1 NOII-FIIAD	1	Abate	ment	:
	Locatio Asbestos-Containing <u>TO BE AE</u> In Fac (13)	Mate SATED SIIITY		Use Mai	lormal d Sole intena odial s (12)	lly ely by nce/		tos Cont thermal surfa		Material s insula T, or		(8	mount specify or LF)	Remova	Ty Repair	e Encapsulate	Enclosure
		2411		Yes	No	N/A										ite	· O
	BASEN	ENT			Х			PIPE II	NSUL	ATION	١	5	0 LF	Х			
	-			+		+				-				-			
				+						0.00.463.0				\vdash			
	ne of Registered Wa	1	NJDEP W Hauler ID		Cubic of Wa	Yards		The companies of the sales		ered Landfill				-			
	ARON QUALITY		033967		TBI	D				NTERPRI	SE I	NC.					
HA	, State CKENSACK N.J							TB			City, Stat			110			
	npleted by RLOS ESQUIV	EL	*	SAFE	ETY I	MANAG	BER		Signatur	e wife	enfo	EJ/	1 Da	ite 1/04/2	2013		
ASB	3-41 (R-06-08)								/* Do n	ot use	this form fo	r asbes	tos licensur	e exer	npted	activi	ities.

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

Date of Notification (1)		_	N:	me of	Building	Owner/C	Operator (2)	- 11	1 12 12 1		_	eck i	+ /3)19	-
	11/5/13		N	ew J	ersey	Turnpi	ke Authority	11.		. 9. 19			ſ		
Agencies Notified	Type of No	otificati			ddress			1.7	41		-	1	i		
[] EPA	[X] Initia	ı.	P	O Bo	x 5042	2		7.7	-, NOV 1	3 2019					
[] DEP		cation	C:	h. Cto	te, Zip Co	odo			<u> </u>	9 4445		1	-		-
[X] DOL	F1 A				oridge,		095	1	7			1			
[X] DOH	[] Amen								T = 1	- , - ,	-	1			
[] DCA			1000		Contact				Telephone Nur			1			
[] BOX	[] Cance	ellation	C	hris	Rossi						x ₄ .	-d			
				-	F	ACILITY	INFORMATION								
Name of Facility When	e Abatement	t is Ta	king Plac	ce (3)				Type of Fac	and (K 17)						
NJT Interchange	e 8A Facil	lity] Su	bchapter 8 (Other her (i.e. private ar	than K-12)	al bui	Idina	10		
Street Address								x Ot	mer (i.e. private ar mes, etc.)	ia commercia	ai bui	iumę	j 5,		
NJ Turnpike Inte	erchange	A8						C	t # of Floo	ro D	ldg. A	۸۵۵	_	_	_
011(5)			County	(6)		Cour	nty Code (7)	Square Fee	2		iug. 7 50	-ye			
City (5) Monroe Townsh	in	- 1	Middle			(STA	ATE USE ONLY)		(Prior if being de	molished)			S. III.S.		
	TO 17 YEAR OF THE 2						T 81	offices	r (O)				_		
Name of Monitoring Fi				r A	SCM No		Name of Abatem		rironmental S	envices I	nc				
Whitman	Compan	ies, i	nc.		0110		Street Address	Jupiter Lin	il Offitte Rai C	CI VICCO, I	110.	-		_	_
Street Address 7 Pleasant Hill F	hens							3 Lynn Cou	ırt						
City, State, Zip Code	\Uau	-					City, State, Zip C							0.000	
Cranford, NJ 08	512							Lincoln Pa	rk, NJ 07035	5					
Project Manager for M		m	Telep	hone	Number		Telephone Num			License	Num			_	
Kevin Lovely					-5858			973-709-0	200			00	85	2	
Scheduled Start Date		Sche			Date (11)		Name of OSHA			harataria	- I	10			
11/18/	2012			25/1	3			J & S ENV	ronmental La	aboratorie	5, L	.LC	30	_	_
Occupancy Status Du [] Facility Close	ring Abateme	ent (Cl	heck only Entire Pe	y one) eriod o	f Abatem	ent	Street Address	2333 Route	22\/						
[] Facility Close [] Abatement Pe	erformed Out	tside o	f Norma	Facili	ty Hours	-	City, State, Zip C		5 22 4 4					-	_
Desc			4					Union, NJ	07083						
[x] Other – Desc	1		iiir										100		_
Scope of Work (Check	k all that app	ly)						[]	Full Containment	with Negativ	e Pre	essu	re		
[] Demolition					[x]	Renova	tion	[x]	Mini - Enclosure						
[x] ≥3 sf or ≥3 lf								[x] [x]	Glovebag Proce Non – Friable Pr						
[] ≥160 sf or ≥2	260 lf							[^]	Tron Thable 11			Aba	tem	nen	t
				Locat			Desc	cription of			1.7	Тур		icii	
Locatio	n of			Solely			Asbestos	- Containing		Amount		R	R		E
Asbestos – C					e/Cus			rial (ACM) rmal systems		(Specify SF or LF)		E M	E	N	N
Material (TO BE AB			todi	al Staf	1 (12)			surfacing, VAT	,	0. 0. 1.		0	A	A	Ĺ
In Fac							or other m	niscellaneous)			- 1	V	1	P	0
(13))		Yes	No	N/A				The State of			A L	R	S	S
Boiler room			X			TSI				9 LF	-	х			
Boiler room			×				vrap & cut			25 LF		X			
		7.2													
Name of Registered V			10 2020	DEP \		5.000	bic Yards	55.00	Registered Landfil	I					
Jupiter Environn	nental Se	ervice	-0	uler II 04782	J NO.	01	Waste 1	Milnerva	a Landfill						
City, State					-	Dis	sposal Date	City, State				83			_
Lincoln Park, No	J						/29/13	Wayne	sburg, OH						
Completed By (Print of			Title				Signature			Date	14.0				
Pane Repic			Gen	eral	Manag	jer				11/5	/13				

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMEN (Pursuant to NJAC 8:60-7 and 12:120-7)

•	NJ De	APP of Healt				vices	P over
	Date:	باللا	3	rime.	- 1/3	4)	7318
		MO/	1	3	2013		
	3						

ane Repic	Gen	eral	Manag	er	1	11/5/13								
incoln Park, NJ ompleted By (Print or T	(9 qy	Title			1.	posal Date 1/18/13 Signature	Cily, State Waynesburg, OH							
ame of Registered War upiter Environme ity, State	ental Service	s Ha	DEP (uler (1 04782		Of	bic Yards Waste 1	Minerva	agletered Landfill Landfill						
1844		- mate-						111-111111-0	u			-	+	
fain Floor	7 (100)	X		-	TSI - p	pipe "wrap & cut"	74200		8 LF		X		ŭ	
Location Asbestos — Co Material (A <u>TO BE ABA</u> In Facilit (13)	Mair		by ce/Cus ff (12) N/A		Asbestos -	Containing I (ACM) al systems riacing, VAT,		(Spe	ount ealfy r LF)	REMO>4	REPAI			
[) ≥160 sf or ≥26		No		Used	/	Descri	Glovebag Proce Non – Friable Pr	dure rocedure	Abatement Type					
Scope of Work (Check [] Demoittion [x] ≥3 sf or ≥3 if	all that apply)		(1)	1]	Renova	ition	[] [X] []	Full Containmer Mini - Enclosur	в	egative	Pres	ure		
[] Abatement Pe Descri	I/Vacated During formed Outside ibe: be: <u>partially_vaca</u>	Entire I of Norm	Perlod	of Ahate	ment s -	Street Address 2 City, State, Zip Co	333 Rout	∋ 22 W	7	- The second		~~		
Scheduled Start Date (11/6/13	3	11	/11/		1)	Name of OSHA N	Nonitor	ironmental L	abora	torles			- Fee	
Project Manager for Mi Kevin Lovely	onlioning Firm	73	2-39	e Numbe	3	Telephone Numb	_incoln Pa er 973-709-0	ark, NJ 0703 1200		onse N	Number 00852			
7 Pleasant Hill R City, State, Zip Code Cranford, NJ 089	111111111111111111111111111111111111111					City, State, Zlp C								
Whitman Compa	7	-		WA		Street Address		vironmental	Servic	es, Ir	ic.			
Name of Monitoring Fi	rm Hired by Build	Pass ling Ow	5577	ASCM		TATE USE ONLY) Name of Abatem	Office/dom	or (9)						
City (6) Totowa	PARTECINA	Count		***************************************		ounty Code (7)	10000 1					je		
Environmental E Street Address 169 Minnisink R	*********	oc					SS OF	chool (K-12) ubchapter 8 (Oth ther (i.e. private : omes, etc.)	er than h and com	(~12) mercial	bulld	ings	i,	
Name of Facility When	re Abatement is T	aking P	lace (3)	FACILI	TY INFORMATION	Type of Fa	cility (4)						
	[] Cancellati	on	Ste	en Sla										
[X] DOH	Notification			e of Cont		WAS .	- Pro-	Telephone N	lumber					
[X] DOL	[x] Emergend [] Amended			State, ži owa, N		1		*						
[] EPA [] DEP	[] Initial Notification	on -		Minni		pad			VOV 1	3 2	2013			
Agencies Notified	Type of Notific	ation	Stree	t Addres	5	Total Land						П		
Date of Notification (11/5/13		Nam	e of Bullo	Ing Own	er/Operator (2) velopmental Ce	Date: 11(4(13rime: 1124)							

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.IAC 8:60-7 and 12:120-7)

(Pursuant to NJAC 8:60-7 and 12:120-7) Check # 7318 Name of Building Owner/Operator (2) Date of Notification (1) North Jersey Developmental Center 11/5/13 Type of Notification Street Address Agencies Notified 169 Minnisink Road [] EPA Initial Notification DEP [] City, State, Zip Code Emergency DOL Totowa, NJ 07511 Amended DOH Notification [X] Telephone Number Name of Contact [] DCA [] Cancellation Steven Slaughter **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12)
Subchapter 8 (Other than K-12)
Other (i.e. private and commercial buildings, homes, etc.) Environmental Building, NJDC Street Address 169 Minnisink Road Square Feet # of Floors Bldg. Age 10000 ~ 70 County (6) County Code (7) City (5) (STATE USE ONLY) Current Use (Prior if being demolished) Passaic Totowa Office/dorm Name of Abatement Contractor (9) ASCM No. Name of Monitoring Firm Hired by Building Owner Jupiter Environmental Services, Inc. Whitman Companies, Inc. Street Address Street Address 3 Lynn Court 7 Pleasant Hill Road City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035 Cranford, NJ 08512 License Number Telephone Number Telephone Number Project Manager for Monitoring Firm 00852 732-390-5858 973-709-0200 Kevin Lovely Scheduled Start Date (10) Sched. Completion Date (11) Name of OSHA Monitor J & S Environmental Laboratories, LLC 11/11/13 11/6/13 Street Address Occupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement 2333 Route 22 W [x] Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code Describe: Union, NJ 07083 Other - Describe: partially vacated Scope of Work (Check all that apply) Full Containment with Negative Pressure [X] Mini - Enclosure Demolition Renovation [] Glovebag Procedure [] ≥3 sf or ≥3 If [x] Non - Friable Procedure ≥160 sf or ≥260 lf [] Abatement Is Location Normally Used Description of Type Asbestos - Containing Amount R R E E Solely by Location of Maintenance/Cus (Specify E E Material (ACM) N N Asbestos - Containing P todial Staff (12) (i.e., thermal systems SF or LF) M C C Material (ACM) insulation, surfacing, VAT, 0 A A TO BE ABATED P or other miscellaneous) V 1 0 In Facility A R S S N/A (13)Yes No U 8 LF X Main Floor X TSI - pipe "wrap & cut" Name of Registered Landfill NJDEP Waste Cubic Yards Name of Registered Waste Hauler Hauler ID No. Of Waste Minerva Landfill Jupiter Environmental Services 04782 Disposal Date City, State City, State Waynesburg, OH 11/18/13 Lincoln Park, NJ Date Signature Completed By (Print or Type)

General Manager

11/5/13

Pane Repic

Date of Notification (1)				Nam	e of Buildin	g Owner/Operator (2)							
	23 / 1:	3				de Nemours	2)	NOV 1	3	713				
□ EPA	ype Notification Initial Amended			25		quake Road								
☑ DHSS 8144	Amendment to		211		State, Zip						_			
□ DCA □	Emergency (i	ncludin	g		rlin, NJ 0									
(NJAC 5:23-8)	justification) Cancellation			1	e of Contac chol Rein			Telephone Numb	per					
Name of Facility Where Aba	atement is Takin	n Dian	(3)		CILITY	NFORMATION	-							
DuPont Parlin Facility		- 0.0 to 10.0 to 10.0 to					Type of Facility (4 School (K-12)					Similar		
Street Address							Subchapter 8	(Other than K-12)						
250 Cheesequake Ro	ad						homes, etc.)	vate and commen	cial b	uildin	gs,			
City (5)							Square Feet	# of Floors	TB	idg. A	oe .			
Parlin								W UT PIOORS B						
County (6) Middlesex				Cou	inty Code (7)(STATE USE ONLY)	Current Use (Prio	r if being demolis	hed)	-				
Name of Monitoring Firm Hi	red by Building	Owner	(8)	ASCN	No.	Name of Abateme								
Pennoni Associates I	nc.						VIRONMENTAL	IMC						
Street Address						Street Address		, 1000.			_			
515 Grove St #1B						1123 BEAVE	ER STREET							
City, State, Zip Code				_		City, State, Zip Co						_		
Haddon Heights, NJ 0	8035					BRISTOL, PA								
Project Manager for Monitor			Tele	phone	No.	Telephone No.		License No.						
Tom Adams			8	56-65(5-2875	215-788-6040		00509						
Start Date (10)	Schei	duled C			ate (11)	Name of OSHA M		00303						
11 / 04 / _	CHANGE TO THE COLUMN TWO IS NOT THE COLUMN TWIND TWO IS NOT THE COLUMN TWO IS NOT THE COLUMN TWO IS NOT THE CO				13	A STATE OF THE PARTY OF THE PAR	/IRONMENTAL,	INC						
Occupancy Status During At						Street Address								
☐ Facility Closed/Vacated [ment		1123 BEAVER	RTPECT							
Abatement Performed Ou	utside of Norma	l Facilit	y Hou		scribe	City, State, Zip Co								
Time of Abatement: 7AM	PM/4PI	W	_AM			BRISTOL, PA								
Scope of Work (Check all tha	at apply)	-				DIGIOL, PA	19007							
⊠ ≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf		⊠ Re		ES MILLETTOODUG										
		Is	Local	ion		- HOWEAU	inpres () and redis-	Procedure	_	-4				
Location of			lorma d Sok			Description of			_	atem	_	-		
Asbestos-Containing Mat TO BE ABATE		Ma	u sok intena	nce/		stos Containing Mat		Amount	Removal	Repair	Encapsulate	Enclosure		
IN Facility	2	Cus	odial	Staff?	(1.6	 thermal systems is surfacing, VAT, 		(Specify SF or LF)	SVO	air.	aps	losu		
(13)			(12)		-	other miscellaned		SI OI LF)	=		ulat	5		
		Yes	No	N/A							6			
3ldg 2015 Exterior Lines	3		×		Pipe Ins	ulation		29 LF	×					
						11 11 - 12 - 13 - 14 - 15 - 15 - 15 - 15 - 15 - 15 - 15								
ame of Registered Waste H	auler		2000	JDEP I		Cubic Yards of	Name of Registe	red Landfill	_		_	_		
Bristol Environmental	Inc		- 1000	auler II 18706	A C C C C C C C C C C C C C C C C C C C	Waste 5	GROWS Landfill							
ity, State				10100		Disposal Date	City, State							
Bristol, PA						11/5/2013	Morrisville, F	PA 19067						
completed By (Print or Type)	Title		W 18			Signature	0	/ · Date	. /		1			

Date of Notification (1)				1	Name of	Building	Owner/Operator (2)		11					
10 /	23 / _	13			E.I. duPont de Nemours										
Agencies Notified	Type Notification	n	_	1	Street A	ddress		in N	UV TO BUSH						
□ EPA					250 C	heeseq	uake Road								
☑ DOLWD		4.	41414	. 1	City, Sta	ate, Zip Co	ode			_ 1					
☑ DHSS	Amendment		CHARLES TO	3	Parli	n, NJ 08	859	₩÷							
☐ DCA (NJAC 5:23-8)	☐ Emergency justification)		ung		Name o	f Contact		Telephone Number							
(1437-0-3.20-0)	☐ Cancellation				Nich	ol Reinh	old								
					FACI	LITY IN	FORMATION								
Name of Facility Where	Abatement is Tal	king Pl	ace (3)				Type of Facility ((4)				-15-5		
DuPont Parlin Fac								School (K-12		2)					
Street Address								Other (i.e., pr	3 (Other than K-12 rivate and comme	ercial buil	dings	,			
250 Cheesequake	Road							homes, etc.)							
City (5)								Square Feet	# of Floors	Bld	g. Ag	е			
Parlin															
County (6)					County	y Code (7)	(STATE USE ONLY)	Current Use (Pr	ior if being demol	ished)					
Middlesex								Exterior							
Name of Monitoring Firm	n Hired by Buildir	ng Owi	ner (8) /	ASCM N	lo.	Name of Abatem								
Pennoni Associate							BRISTOL EN	VIRONMENTA	L, INC.						
Street Address							Street Address								
515 Grove St #1B							1123 BEAVE	R STREET					_		
City, State, Zip Code					521 - 255 1750		City, State, Zip C								
Haddon Heights, I	NJ 08035						BRISTOL, PA	A 19007							
Project Manager for Mo		1000		Tele	phone N	10.	Telephone No.		License No.						
Tom Adams				85	6-656-	2875	215-788-604)	00509						
Start Date (10)	Sc	chedule	ed Co	mple	tion Date	e (11)	Name of OSHA								
11 / 04	/13	_11	_ /	05	_ / _	13	BRISTOL EN	IVIRONMENTA	L, INC.			e upor en g			
Occupancy Status Durin	ng Abatement (C	heck o	nly o	ne)	-to cert	60-2702m 14-2	Street Address								
☐ Facility Closed/Vaca	ted During Entire	Perio	d of A	bater	ment		1123 BEAVE	R STREET							
☐ Abatement Performe	ed Outside of Nor	rmal Fa	acility	Hour	s - Desc	cribe	City, State, Zip C	ode							
Time of Abatement:	7AMPM/	4PM-		_AM		200000000000000000000000000000000000000	BRISTOL, P	A 19007				· ·			
Scope of Work (Check	all that apply)						T Full Con	ntainment with Ne	native Pressure						
57 . 0 . 5 . 4 . 2 H		Б	₹ Rer	ovati	on		⊠ Mini-En	ative riessuic							
≥3 sf or ≥3 if ≥160 sf or ≥260 if			Der				Gloveba	ag Procedure	Friehle Beren	4					
							∐ Non-Ex	Exempted (*) and Non-Friable Procedure Abatement Typ							
				Locat	0.7 - 1.00			-4		-	_	_	-		
Location Asbestos-Containing		. 1			ely by	Ashe	Description stos Containing M		Amount	Ren	Repair	Enc	Enc		
Aspestos-Containing	BATED		72701055		nce/ Staff?		e., thermal systems	insulation,	(Specify	Removal	a.	aps	Enclosure		
IN Fac			Cust	(12)			surfacing, VA other miscellan		SF or LF)	<u> </u>		Encapsulate	- F		
(13))		Yes	No	N/A	1		,				6			
THE PASS EMPRIOR	Lines	-		×		Pipe In	sulation		29 LF	×					
Bldg 2015 Exterior	Lilles			PATE NO.		1.00			 						
		!							-		12	- -	+		
Name of Registered Wa	aste Hauler	L			NJDEP N	Waste	Cubic Yards of	Name of Reg	istered Landfill		1				
Bristol Environme				100	lauler II	D No.	Waste	GROWS							
	J. 1001 1110				18706	5	5 Disposal Date	City, State							
City, State							11/5/2013	7.0	le, PA 19067						
Bristol, PA							10:-1			Date	, ,		- 1		
Completed By (Print or	Type)	Title			ts.		Signature	Pi.	. 1.0	11/	4/1	3			
Gino Pizzigoni		Es	tima	or		- VT025 - 42 - 1	Deas	Pizzigoni /jl 11/4/13							

Date of Notification (1)			Name	of Building	Owner/Operator (2	2)	[2] /30 1/2°	me and					
10 /23 / _	13		E.I. duPont de Nemours										
Agencies Notified Type Notifica	ition		Street Address										
☐ EPA ☐ Initial			250	Cheesed	quake Road	i i	NOV 1 -				i		
☑ DOLWD ☑ Amended		.m	City, S	tate, Zip C	ode		111111	2013	7				
☐ DHSS Amendme		- 10	Commission of	in, NJ 08						- 1			
DCA Emergence		ng		of Contact			Telephone N	umber	-				
(NJAC 5:23-8) justification Cancellat			39/22/100	Nichol Reinhold									
Cancellat	IUII				FORMATION		L.			- horsel			
Name of Facility Where Abatement is T	aking Pla	ce (3)	rac	ALII I IN	PORIVIATION	Type of Facility ((4)						
DuPont Parlin Facility Exterior						☐ School (K-12)						
Street Address						☐ Subchapter 8☑ Other (i.e., pr			uildin	10			
250 Cheesequake Road						homes, etc.)		merciari	rananı	,			
City (5)						Square Feet	# of Floors	T F	Bldg. A	ge			
Parlin									3				
		- 500 E	Coun	ty Code /7)(STATE USE ONLY)	Current Use (Pri	or if being dem	nolished)					
County (6) Middlesex			Coun	ty Code (/	NOTATE OSE ONET)	Exterior	or it being dell	iolisticu)					
Name of Monitoring Firm Hired by Build	dina Owne	er (8)	ASCM	No.	Name of Abateme						-		
Pennoni Associates Inc.	g O	(0)				VIRONMENTAI							
					Street Address	·VIIIILIVIA	-,						
Street Address						DOTDEET							
515 Grove St #1B					1123 BEAVE								
City, State, Zip Code					City, State, Zip Co								
Haddon Heights, NJ 08035					BRISTOL, PA	TANK TANK SANSAN TANK TANK TANK TANK TANK TANK TANK TA							
Project Manager for Monitoring Firm			ephone l		Telephone No.		License No						
Tom Adams			56-656	77,515.55	215-788-6040		00509						
The state of the s	Scheduled				Name of OSHA M	lonitor							
11 /04 /13	11	/ _0	6_/_	13	BRISTOL EN	VIRONMENTA	L, INC.						
Occupancy Status During Abatement (Check onl	y one)			Street Address								
☐ Facility Closed/Vacated During Entire	re Period	of Abate	ement		1123 BEAVE	R STREET							
☐ Abatement Performed Outside of No	ormal Fac	ility Hou	rs - Des	cribe	City, State, Zip Co	ode							
Time of Abatement: 7AMPN	// <u>4</u> РМ	AM			BRISTOL, PA								
Scope of Work (Check all that apply)					JIL-S								
	F7 .	_				tainment with Neg	gative Pressure	•					
 ≥3 sf or ≥3 if ≥160 sf or ≥260 if 		Renova Demoliti				losure g Procedure							
	ш	Jerriont	J.11			mpted (*) and No	n-Friable Proc	edure					
		Is Loca	ation			- in-			Abatement Typ				
Location of		Norma			Description of	of	5) SH	-		1	· ·		
Asbestos-Containing Material (ACM		sed So			stos Containing Ma	iterial (ACM)	Amount	<u>É</u>	Repair	nc	nc		
TO BE ABATED	10.00	Mainten ustodial		(i.e	e., thermal systems		(Specify		a-	aps	Enclosure		
IN Facility (13)		(12	SOCIOLO MANO		surfacing, VAT other miscellane	ous)	SF or LF)	, <u> </u>	-	Encapsulate	Гe		
(,	Ye		1 1 1 2 2 2 2 2			/				O			
Bldg 2015 Exterior Lines				Pipe Ins	sulation		29 LF	D E					
										+=			
Name of Registered Waste Hauler		1 23	NJDEP		Cubic Yards of	Name of Regis	stered Landfill			•			
Bristol Environmental Inc		1	Hauler II		Waste	GROWS L	andfill						
City, State			18706		5 Disposal Date	City, State							
Bristol, PA					11/5/2013		, PA 19067						
CH-1800000 MES B. TEL MANN	T:41-					1	,	D-4-	,				
Completed By (Print or Type)	Title				Signature	0.	Date ///2						
Cima Dissignani			Line Tymanu Iil 11/5/12										
Gino Pizzigoni	Estin	nator		5.¥	Lino	Typigon	1/jl	11/	5//	X			

Date of Notification (1)				Name of	Building	Owner/O	norotor	(2)		Mel		19	tl	0	1.		
11/6/13					Muller	Owner/O	perator	(2)	Ú	1	NOV	1 -					
Agencies Notified	Type Notification			Street A	^{ddress} Vyando	tte Trail			,	7	131.7.7	/ 3	2013				
EPA DEP	Initial Amended		-		te, Zip Co					× + 2		-0.74 A			\dashv		
▼ DOL	Amendment Emergency		_ [Westfi	eld, NJ	07090			-			S SW			Ť		
⊠ DOH DCA	justification) Cancellation	,		Name of Contact Chuck Muller							ephone *	\l 1			- 1		
					LITY INFO	ORMATIC	ON										
Name of Facility Where A	Abatement is Takin	g Place (3	3)					Туре	of Facility	(4)		N. 100 P.					
Street Address							-		School (K- Subchapte		er than K	(-12)			-		
1050 Wyandotte Tra	ail							×	Other (i.e. etc.)				ilding	s, hom	ies,		
City (5) Westfield	2						Square Feet		f Floors		Bldg. 55	Age					
County (6) Union				County (Code (7) JSE ONLY	າ	2000 2 55 Current Use (Prior if being demolished)										
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCM		·	Name	of Aba	atement Co	ntracto	(9)						
							ronmenta			LC							
Street Address								Addre									
City, State, Zip Code							Zip Code										
Project Manager for Mon		Telepho	no No			hone N	l, NJ 074	118	Literatur								
Project Manager to Monitoring Pilm					ile No.			583-8			License 703	e No.					
Start Date (10) 11/15/13		Schedule 11/25/		npletion I	Date (11)		Name		HA Monitor								
Occupancy Status During		-			Addre	ss											
Facility Closed/Vaca Abatement Perform Other – Describe:	ed Outside of Norn	Period of Anal Facility	Abatem	nent	City, State, Zip Code												
Scope of Work (Check A																	
23 sf or ≥3 lf	FP 37	☐ F	Renova	vation					II Containm	ent witl	n Negativ	e Press	ure				
× ≥160 sf or ≥260 lf			emolit	lition					Mini-Enclosure Glovebag Procedure								
									n-Exempte			iable P	37.530	7.67			
		100	Locati			200	2002							Abatement Type			
Location Asbestos-Containing	Material (ACM)	Use	d Sole	ly by		tos Conta		Materia		A	mount			Tm			
TO BE ABA In Facili			todial S		(i.e.	thermal s surfac	system ing, VA		ation,		Specify F or LF)	Kemova	Repair	ncap	Enclosure		
(13)			(12)			other m	iscellar	neous)			01	oval	air	Encapsulate	sure		
1		Yes	No	N/A										Ф			
supply o	luct	-		X		sup	ply du	ıct		1	5 SF		X				
		+		-								-	-		-		
		-		-						-			+-	-			
Name of Registered Was	te Hauler		1	J JDEP W		Cubic \			Name of	Registe	ered Land	dfill			_		
			Н	lauler ID	No.	of Was	te										
City, State						Disposal Date City, S			City, Sta	tate							
Completed by		Title		113		Si	gnature	9 0			- T	Date					
Andrew Scott Higgin	S			d	IN		\		11/6/	13							

State of New Jersey - Notification of Asbestos Abatement (Pursuant to N.J.A.C. 8:60-7 and 12:120.7)

GAC Project # 060-13					N (D 1111 O - 10	S	(0)	V.7 1-2	11 11	1,11	4.1			
Date of Notification (1) November	4 20	13			Name of Building Owner/Operator (2) RUTGERS, THE STATE UNIVERSITY OF NJ									
Agencies Notified EPA DCA DOL DEP- No Longer REQUIRED DOH	1	Notification Initial N Amende Emerge justification	Notificat d Notifi ency (in ation)	cation	Street Address ENVIRONMENTAL HEALTH & SAFETY DEPT. 27 ROAD 1, BLDG 4086, LIVINGSTON CAMPUS City, State, Zip Code PISCATAWAY, NJ 08854 Name of Contact MICHAEL SMITH, ENV.									
					HEALTH & SAFETY	777								
				FACILITY INF	ORMATION									
Name of Facility Where Abatement RECORDS HALL, BLDG#					Type of Facility (4) School (K-12) Subchapter 8 (other than K-12)									
Street Address COLLEGE AVENUE CAM	COLLEGE AVENUE CAMPUS							omes, etc . Age:		ırs				
	nty (6) IIDDL	ESEX		Code (7) Jse Only)	Current Use (prior if being	demolish	ned): AC	ADEMIC						
Name of Monitoring Firm Hired by E Cardno ATC	Bldg. Ow	vner (8)	ASCM 1		Name of Contractor (9) GREENWOOD ABAT	EMENT	CONSI	II TANT	S INC					
Street Address					Street Address	CIAIC 14	CONS	LIAN	3, 1140	•				
3 TERRI LANE					268 MAIN STREET									
City, State, Zip Code		'n		City State, ZipCode BUTLER, NJ 07405										
BURLINGTON, NJ 0801 Project Manager for Monitoring Firm	Telephone N		Telephone Number		Licer	nse Numb	er	7-11-10						
BRIAN KEARNY	100	973-492-0477		008	40									
Scheduled Start Date (10) 11/15/13		Scheduled 0 11/16/13	Completion	n Date (11)	Name of OSHA Monitor 1 ENVIROVISION, INC									
Occupancy Status During Abater	nent (C	heck only o	ne)		Street Address	•								
☐Facility Closed/Vacated During	Entire	Period of A	batemen	t	20-21 WARGARAW ROAD									
☐Abatement Performed Outside Describe	of Nor	mal Facility	Hours -		City, State, Zip Code									
Other - Describe: Shift Hou	urs: 6:	:00 PM -	5:00 A	M										
					FAIRLAWN, NJ									
Scope of Work (Check all that appl	у)			-										
[E]				Renovation	Full Containment with Negative Pressure Mini-Enclosure									
≥ 3 sf or ≥ 3 lf ≥ 160 sf or ≥ 260	1			☐ Demolition	The state of the s									
			5 411				npted (*) a				re			
Location of Asbestos-Containing Material (ACM) in Facility (13)		ation Norma by Maint./C		Description of Asl (ACM) (i.e. therm	bestos Containing Material nal systems insulation, surfaci		mount pecify SF		nent Type					
Waterial (ACW) in Facility (10)	Staff?	(12)		VAT, or other mis		or	LF)	Remove	Repair	Encap I	Enclose			
Corridor 160	YES	NO X	NA	CEILING TIL	FS	24	4 SF	X	T	F				
Contact 100				02.2										
Name of Reg. Waste Hauler See Hauler Below #1 & 2		NJDEP Was		r ID #	Cubic Yards of Waste:	5 CY		e of Regis			ill			
Hauler #1) Greenwood Abatemen NJDEP # 12561 Hauler #2) S TG - 58 Pyles Lane, NJ DEP # SW2117	11/16/13 100 Rd.					y, <u>State</u> D New Ford Mill . Morrisville, Pa D67 5-736-1700								
Completed by (Print or Type) RAYMOND C. PEDALING	Signature Raymand C. Pedalins Date November 4, 2013													