## STATE OF NEW JERSEY NOTIFICATION OF ASBESTOS ABATEMENT (PURSUANT TO NJAC 8:60-7 AND 12:120-7

Wik 2287

Date of Notification	n (1)		1	Name of Bu	uilding Owr	ner / Oper	rator (2)				
09 / 02	/_ 14				nternational				er pia		
/	/			Street Add				Land V &	arm lead		
Agencies Notified	Type of Not	ification		2211 Route							
<ul><li>✓ EPA</li><li>DEP</li></ul>	L-1	nitial		City, State,	Zip Code	77410	soes finy	12 14	3:50	)	
☐ DEP	1	mended	- E		ew Jersey, (	37410	2 - 1 F - 1 V	Telephon	o Numb	or	
☑ DOH DOL	- 52	mendment #_		Name of Co			1	elebiloti	e Numbe	51	
☑ DOL	5000	mergency w/	ustification	JOHN LISS	1		MINESI	0000			
		Cancellation		CILITY INF	ORMATION	J	ASBES)	ULNU	Nu		
			EA	CILITINI	OKIMATIO	•	استا نونها				
Name of Facility V	/hore A hateme	nt is Taking P	ace (3)		Type of Fac	cility (4)					
Mondelez Internation		ni is raking i	(0)	- 1							
Worldciez Internatio	71101					School (K	(-12)				
Street Address						Subchapt	er 8 (Other t	than K-12	.)		
2211 Route 208				1			., private & o	cmmercia	tl		
	**						omes, etc.)		Duitalia	~ A ~ ~	
City (5)	County (6)		County Code (	7)	Square Fee		# Of Floors	5	Buildin	y Age	
Fairlawn	Bergen			-	1,000		being dem	olished)	ł	40 -	+
								Jiisiieu <sub>/</sub>		40	
		- BU - B	(0)		Bakery/WAI	KLITUUS					
Name of Monitoring	ng Firm Hired b	by Bldg. Owne	r (8)	ASCM NO							
AET					NORTHSTA	AR CONT	RACTING G	ROUP, IN	C.	¥	
AET					Street Add	and the same of th					
Street Address 907 Doolittle Drive	Pri										
City, State, Zip Co	ode		12		32 Williams	Parkway					
Bridgewater, NJ 08					City, State,	Zip Code	е			7	
Project Mngr. For		m	Telephone Nui	mber							
Eric Houseknecth	morniong		908-218-1108		East Hanov	er, NJ 07	936				
Sheduled Start Da	ate (10)	Sched. Comple	etetion Date (1	1)	Telephone	Number		License	Number		8
09 // 16	1	_12 /	30 /	14						00000	
//	_/				973-884					00860	
Occupancy Status	s During Abate	ment (Check C	Only 1)		Name of O				ıc		
☐ Facility	Closed/Vacate	ed During Enti	re Period of				RACTING G	ROUP, IN	ic.		
Abaten			1 - 377		Street Add	ress					
	nent Performed	Outside of No	ormal Facility		32 Williams	Parkway					
	- Describe:	7:00 004 3:30	DM	3	City, State						
☑ Other -	Describe	7.00 AW - 5.50	101		East Hanov						
Scope of Work (C	heck All That A	Apply)									
Scope of work (C	neok All That?	·PP-3/									
☐ Demoli	ition	4	Renovation				ith Negative	Pressur	е		
☐ ≥3sf or	>3If			$\overline{\checkmark}$	Mini - Encl						
☑ ≥160 st	f or ≥260 If			✓	Glovebag	Procedur	e 1 N :-	ble Deco	o du ro		
10 March 10				<b>V</b>	Non-Exem	pted (*) a	nd Non-Fria	ble Proce	suure		
				Descript	on of		1	Ahateme	ent Type		
Locatio		Is Location	٨٥	Descript sbestos - C				R	1	ΙE	ΙE
Asbestos Co	ontaining	Normally	As	Material			Amount	E	R	N	N
TO BE A	ATED	Used	a.	e., therma			(Specify	M	E	C	C
in Faci		Solely			facing, VAT	•,	SF or LF)	0	P	A	L
(13)		by Main-			ellaneous)			l v	Α	P	0
(13)	Sec.	tenance/	= 2000		re-ent			A	1.1	S	S
		Custodial	E 10					L	R	Ü	U R
	<u> </u>	Staff (12)							+	+-	- K
		YES NO N/A							+	+	
							-		1 1	1	
SEE ATTACHED									+++	1	
		니니니					-	1 -	+++	+ +	TH
			N IDED W	Cubic	Name of F	Penistero	d Landfill				- I have
Name of Register		ier	NJDEP Waste Hauler ID No.		I.E.S.I.	Cylolei e	a Lanuilli				
NEWARK CARTIN	NG			of Waste	1.2.0.1.						
City State			4508	Disposal	City. State	9		0.000			
City, State			₩17	Date	BETHLEH		8105				
NEWARK, NJ	10										
Completed by (P	rint or Typel		Title	-		Signatu	re (			Date	a ar
Completed by (F	01 17 1901					1	71 -1	VII	VI	y	44140144
Stove Stiles			Project Manag	er		12		264			11/12/14

Location of	T-	ls		Description of		Abateme	ent Type		
Asbestos Containing  TO BE ABATED in Facility (13)	by te	ocationmodelication ocation oc	ally d ly iin- ce/ dial 12)	Asbestos - Containing Material (ACM) (I.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	R E M O V A L	R E P A I R	E N C A P S U L	E N C L O S U R
	YES	-	N/A						
BAKERY - 2ND FLOOR		4		DUCT INSULATION	1,025 SF	1			
BAKERY - 2ND FLOOR		V		GASKET	1500 SF	7			
BAKERY - 2ND FLOOR		4		TRANSITE	80 SF	7			
BAKERY - 2ND FLOOR		V		WIRING	3,000 LF	1			
BAKERY - 2ND FLOOR		V		PIPE & FITTING INSULATION	4,265 LF	J			
BAKERY - 1ST FLOOR		V		PIPE & FITTING INSULATION	175 LF	<b>V</b>			
STAIRWELL #1		4		PIPE & FITTING INSULATION	10 LF	<b>V</b>			
STAIRWELL #2		V		PIPE & FITTING INSULATION	20 LF	7			
ND FLOOR PAINT SHOP		V		VAT & MASTIC	1050 SF	7			
IST FLOOR SHOP AREA		V		DUCT INSULATION	200 SF	J			
IST FLOOR SHOP AREA		4		PIPE & FITTING INSULATION	150 LF	J			
BAKERY - 2ND FLOOR		V		PIPE & FITTING INSULATION	2 LF	J			
BAKERY COLUMN M-5		V		PIPE & FITTING INSULATION	16 LF	V			
BAKERY COLUMN M-7		V		PIPE & FITTING INSULATION	16 LF	1			
ADIES ANNEX		4		VAT & MASTIC	2400 SF	1			
COLUMN P-23		J		PIPE & FITTING INSULATION	20 LF	V		To	
BAKERY DRAIN LINES		V		PIPE & FITTING INSULATION	130 LF	V			
BAKERY RACK CORRIDOR		V		PIPE & FITTING INSULATION	270 LF	V			
SPIRAL COOLER AREA		1		PIPE & FITTING INSULATION	300 LF	V			
BAKERY WATER LINE		V		PIPE & FITTING INSULATION	8 LF	V			
BAKERY DRAIN LINES		7	П	PIPE & FITTING INSULATION	190 LF	<b>V</b>			
ND FLOOR SUGAR WAFER		V		VIBRATION CLOTHES	20 SF	V			
West of the second seco		T					TIT	TI	
		П	T					1 1	
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	H	H	H			T	TH	1 1	H
	1 1	H	H					1 1	

(K DUS 683

D&S Proj. #: 2014-461

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

RECEIVED

			22					
Date of Notification (1)	Name of Building Owne	er/Operator (2)		2014 NOV	13 AM ;	3: 60	)	
Agencies Notified   Type Notificati	GEORGE EASLEY	Υ						
EPA Initial	Street Address			ASSEST & LI	OS CONT	RO		
DEP Amended	7 THREE GABLE	ROAD		& LII	PENSINO	;	58	
Amendment #:	City, State, Zip Code							
DOL Emergency	MORRIS TWP., N	NJ 07950						
DOH (including justification)	Name of Contact			Telephone No	umber			
DCA Cancellation	GEORGE EASLE	EY						
		LITY INFORMAT	ION					
Name of facility where abatement is	s taking place (3)			Type of Facility (4)	2 50-20			
	3,(-/		4	School (K	12)			
GEORGE EASLEY					er 8 (Other th		12)	
Street Address				Other (Priv Bldgs./Hor	ate/Commer	cial		
7 THREE GABLE ROAD			14		f Floors	Bld	g. A	ge
City (5)	County (6)		County Code (7)					
Record Co.			(State use only)	Current Use (Prior	if being demo	olishe	d)	
MORRIS TWP.	MORRIS		T I November of Albertan and	Contractor (0)				
Name of Monitoring Firm Hired by	Bldg. Owner (8)	ASCM No.	Name of Abatement					
			D & S RESTOR	ATION, INC.				
Street Address			Street Address					
			20 California A					-
City, State, Zip Code			City, State, Zip Code					
	12		Paterson, NJ 0'		cense Numb	or	_	
Project Manager for Monitoring Firm	Phone Numb	er	Telephone Number 973-345-8020		01169	CI		
			Name of OSHA Mor		01107			
Start Date (10)	Sched. Completion Date (1	1)	D & S Restorat					
11/24/14	12/10/14		Street Address					
Occupancy Status During Abatemer			20 California A	venue				
Facility closed/vacated during			City, State, Zip Code					
Abatement performed outside	of normal facility hours-							
Describe: NORMAL F	IOURS		Paterson, NJ 0	7503			_	
Scope of Work (check all that apply				Full Containment w/ne	gative press	ure		
$\square > \underline{3} \text{ sf or } > \underline{3} \text{ If}$	Renovation			Mini-enclosure				
≥ 160 sf or ≥260 lf   □	Demolition		×	Glovebag procedure Non-Exempted (*) and	d Non-friable	proce	dure	e
	Is location normally used solely	y		on Exempled ( ) and	I R	R	E	T
Location of asbestos-containing	by maintenance/custodial		of asbestos-containing	Amount	e m	e p	n	E n
material (acm) to be	staff(12)	material (A		(Specify SF of LF)	or o	a	a	C
abated in facility (13)	Yes No N/A			1 /	v e	i r	р	1
BASEMENT BOILER & SHOP		DUCT INSU	LAITON	460 SQ FT				
BASEMENT & CRAWL SPACE		PIPE INSUL		740 L FT	X			
		1						
Registered Waste Hauler		Cubic Yards of W						
D & S RESTORATION, INC.		12 YDS		, RESOURCE REC	OVERY		_	
City, State	Disposal [		City, State	T.DA				
PATERSON, NJ 07503	11/26/1		TULLYTOWN		Date			
Completed by (Print or Type) BOGDAN JOLDZIC	Title PRESIDENT	Signature			11/07/14			
ASR-41	* Do not use this form for asbest	tos licensure exe	mpted activities.					

CK-005684

State of NJ

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

D&3 Proj. #: 2014-462

RECEIVED

		1 (0)					-	
Date of Notification (1)  1 1 1   /   0   7   /   1   4	PAUL MEDIN	Owner/Operator (2) NA		ACH MOA	13 AM 3:	69		
Agencies Notified Type Notificati	Street Address 58 BREMON	D STREET		ASSESI	OS CONTR	ROL		
DEP Amendment #:	0: 0: 1 7: 0			## First Control of the Control of t	0-1101110			
M DOI	BELLEVILL							
□ Emergency     (including	Name of Contact	E, NJ 0/109		Telephone	Number	at head		
justification)	Name of Contact							
DCA Cancellation	PAUL MEDI	NA			` <u> </u>			
		FACILITY INFORM	ATION	.00				
Name of facility where abatement is	s taking place (3)		7	Type of Facility (4				
PAUL MEDINA		1997		_ Subcha	(K - 12) opter 8 (Other th		12)	
Street Address					Private/Commer	cial		
SO DDEMOND OFFICE					Homes, etc.	Bld	g. Ag	je
58 BREMOND STREET	T 000000000000000000000000000000000000		County Code (7)	- Square reet	701110013	1000	99	10000
City (5)	County (6)		County Code (7) (State use only)	Current Use (Pri	ior if boing dem	oliche	4)	
	FCCEV		(State use orny)	Current Ose (Pi	of it being demi	טווטו וכי	4)	
BELLEVILLE	ESSEX	A COM No	Name of Abateme	ent Contractor (9)				
Name of Monitoring Firm Hired by	Bldg. Owner (8)	ASCM No.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		*			
				ORATION, INC.				
Street Address			Street Address					
			20 California	Ave.				
City, State, Zip Code			City, State, Zip Co	de				
•			Paterson, NJ	07503				5000000
Project Manager for Monitoring Firm	n Phone I	Number	Telephone Number		License Numb	er		
1 Tojoot Managor To: Merinesing . W.			973-345-80	20	01169			
			Name of OSHA N	Monitor				
Start Date (10)	Sched. Completion Da	ate (11)	D & S Restor	ration, Inc.				
11/17/14	12/19/14		Street Address					
Occupancy Status During Abateme			20 California	Avenue				
Facility closed/vacated during		t	City, State, Zip Co					
Abatement performed outside	e of normal facility hours-							
Describe: NORMAL F	POLIES		Paterson, NJ	07503				
				Full Containment w	Inogativa proce	uro		
Scope of Work (check all that appl				Mini-enclosure	megative press	ure		
$\boxtimes$ >3 sf or >3 lf	Renovation			Glovebag procedu	re			
≥160 sf or ≥260 lf	Demolition			Non-Exempted (*)		proce	dure	
Location of	Is location normally used	solely			Re	R	Е	E
asbestos-containing	by maintenance/custodia	ll Descrip	tion of asbestos-containing	g Amount	m	e p	n	n
material (acm) to be	staff(12)	material		(Specify S	SF or o	a	a	C
abated in facility (13)	Yes No	N/A			v e	i	р	-
DAGENGENIE		DIDE INS	ULATION	100 L FT	×		П	
BASEMENT		THEIRS	OLI III OI V			$\overline{\Box}$	F	厅
						H	片	十一
					<del>   -     -     -   -</del>	H	片	+=
						님	님	片
							Ш	
Registered Waste Hauler	NJDEP Hauler ID#	Cubic Yards of			COVEDY			
D & S RESTORATION, INC.		1 yd		VN, RESOURCE RE	CUVERY		-	-
City, State		oosal Date	City, State	XDI DA				
PATERSON, NJ 07503		1/18/14	TULLYTOV	WN, PA	T Deta		-	
Completed by (Print or Type)	Title	Signature			Date	1		
BOGDAN JOLDZIC	PRESIDENT				11/07/ 2014	+		
ASB-41	* Do not use this form for a	asbestos licensure	exempted activities.					

#### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

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

				(Pur	suant	to NJA	C 8:60 an	nd 5:16	)	RF	CEL	15	e1 p+=	
Date of Notification (1)  11 /	10 /	14	ta:	-8			Owner/Op		2)	RE 2014 ROY	13 1	B.a	. D	
Agencies Notified	Type Notific				Street /	Address		-	A15000100	Table 6	10 /	n.	ji iy	0
☑ EPA	☐ Initial			1			ve., Ste. 2	276		ASAFQI & LI	AC C	31.1-		
☑ DOLWD					City, St	ate, Zip C	ode			811	CENS	374 1810	HU	L
☑ DOH ☐ DCA	☐ Emerger		dina		Den	ville, NJ	07834					FVC		
(NJAC 5:23-8)	justificati	ion)	_			of Contact Barnish				Telephone Nu	ımber			
					FAC	II ITY IN	FORMAT	ION						-
Name of Facility Where	Abatement is	Taking Pl	ace (	(3)	- 1 70	ALIT III	i Ortimati		Type of Facility (4	.)		-	-	
Commercial Building		, ag		-/					School (K-12)					
Street Address	9							-	Subchapter 8	Other than K-	-12)	.:1.41:		
100 Ford Road									Other (i.e., privalent)	ate and comr	nerciai b	uliali	igs,	
City (5)								-	Square Feet	# of Floors	В	ldg.	Age	
Denville										1				
County (6)					Coun	ty Code (7	)(STATE USE	ONLY)	Current Use (Prio	r if being dem	olished)			-
Morris								2						
Name of Monitoring Firm	Hired by Buil	Iding Owr	ner (8	3) /	ASCM I	No.	Name of /	Abateme	ent Contractor (9)		-	200 M		-
Bio Terra Solutions							ALL P	RO MA	NAGEMENT LL	С				
Street Address							Street Ad	dress						
P.O. Box 1224							27 Out	twater	Lane					
City, State, Zip Code							City, State	e, Zip C	ode					
Union, NJ							Garfie	ld, NJ	07026					
Project Manager for Mon	itoring Firm			Tele	phone I	Vo.	Telephon	e No.		License No.		. 11		W.
Rick Eustaquio				97	3-494-	-3762	973-92	28-4888	<b>S</b>	1188				
Start Date (10)	1.1	Schedule	ed Co	mplet	tion Dat	te (11)	Name of	and the second						
11 /14 /	_14_	11	_ /	28	_ / _	14	ALL P	RO MA	NAGEMENT LL	С	-127			
Occupancy Status Durin	g Abatement	(Check or	niy o	ne)			Street Ad	dress						
□ Facility Closed/Vacate							27 Out	twater	Lane					
Abatement Performed Time of Abatement:							City, State							
						- IVI	Garfie	ld, NJ	07026					
Scope of Work (Check a  □ ≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf	II that apply)		Rer Der	novatio nolitio	on on			Mini-End Gloveba	tainment with Nega losure g Procedure empted (*) and Nor					
	a a			Locat		18					_ A	bate	ment	Туре
Location Asbestos-Containing TO BE AB IN Faci	Material (AC <u>ATED</u> lity	101)	Use Mai	lormal d Sole ntena odial ( (12)	ly by		stos Conta e., thermal s	systems ing, VAT	aterial (ACM) insulation, , or	Amount (Specify SF or LF)	Removal	Nepall	Encapsulate	Enclosure
(13)		``	es/	No	N/A	1	Other III	130chaire	,003)				9	
West Wing 1st Floor						ACM P	ipe Insula	ation		485 LF	×			
1 <sup>st</sup> Floor						VAT				2100 SF				
2 <sup>nd</sup> Floor			]		Ø	VAT				2500 SF	×	1 [		
												1   [		
Name of Registered Wa	ste Hauler		10/6; 	N	JDEP '	Waste	Cubic Ya	rds of	Name of Regis	tered Landfill				
Newark Carting				Н	lauler II 04509		Waste As Ne		IESI Landfi	ll				
City, State							Disposal	Date	City, State	DA				
Newark, NJ		75.3					TBD		Bethlehem	, PA				
Completed By (Print or	Гуре)	Title		100			Sign	nature	h h		Date	)		
Allen Monchik		Pro	ject	Man	ager		[()	W	21		li/i	0	15	

ASB-41 JAN 13

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

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

Date of Notification (1)					Name	of Building	Owner/Operator (2	2)	MELEIV		}		
10/22	1	14	- 104		Jeff	Barnish	c/o WP Realty						
Agencies Notified Type N	otificat	tion			Street	Address		20	H NUV 13 A	4 3:	6n		
⊠ EPA ⊠ Init				1	400	Morris A	ve., Ste. 276				70		
☑ DOLWD ☐ Am				-	City, S	tate, Zip C	ode	Æ	SESIOS CO	iaiTr	101		
	endme					ville, NJ			& LICENS	LLC	UL		
☐ DCA ☐ Em (NJAC 5:23-8) ☐ jus	ergenc ificatio		luding	}	2	of Contact			Telephone Numb				17,221
(NSAC 3.23-8)						Barnish	3		, , , , , , , , , , , , , , , , , , , ,				
					FAC	CILITY IN	FORMATION			-			
Name of Facility Where Abateme	nt is Ta	aking	Place	(3)				Type of Facility	(4)		- 1		
Commercial Building								School (K-12					
Street Address									(Other than K-12)		ldina		
100 Ford Road								homes, etc.)	ivate and commer	ciai bu	liding	5,	
City (5)								Square Feet	# of Floors	Blo	lg. Ag	e	-
Denville													
County (6)					Coun	ty Code (7	)(STATE USE ONLY)	Current Use (Pri	or if being demolis	hed)			
Morris							NO.						
Name of Monitoring Firm Hired b	y Build	ing O	wner (	8)	ASCM	No.	Name of Abateme	ent Contractor (9)		-			
Bio Terra Solutions							ALL PRO MA	NAGEMENT L	LC				
Street Address						0	Street Address					100011	
P.O. Box 1224							27 Outwater I	Lane					
City, State, Zip Code							City, State, Zip Co	ode		79			
Union, NJ						,	Garfield, NJ	07026			- 2555		
Project Manager for Monitoring F	irm			Tele	phone	No.	Telephone No.		License No.				
Rick Eustaquio					3-494		973-928-4888		1188				
Start Date (10)				100	tion Da		Name of OSHA M	lonitor					
		_ 1	1/	17	_ / _	14	ALL PRO MA	NAGEMENT L	LC				
Occupancy Status During Abater	nent (C	Check	only o	ne)			Street Address						
☐ Facility Closed/Vacated Durin	2						27 Outwater	Lane					
Abatement Performed Outsid							City, State, Zip Co	ode					
Time of Abatement:A			u			CIVI	Garfield, NJ	07026		10.3			
Scope of Work (Check all that ap	ply)						□ Full Cont	ainment with Neg	ative Pressure				
≥3 sf or ≥3 lf			⊠ Re				Mini-Enc	losure	gative i ressure				
≥160 sf or ≥260 lf			☐ De	molitic	n			Procedure	n-Friable Procedur	-Δ			
		— т	le	Locat	ion	I	□ Non-Exe	mpted ( ) and No	II-Filable Flocedul	1	ateme	ont Ti	WDO
Location of				lorma			Description of	f		-		n 5	-
Asbestos-Containing Materia	(ACM)	)		d Sole			stos Containing Ma	terial (ACM)	Amount	en	Repair	Enc.	inc
TO BE ABATED IN Facility				intena lodial		(i.e	., thermal systems surfacing, VAT		(Specify SF or LF)	Removal	2	aps	Enclosure
(13)				(12)			other miscellane		01 01 11)	=		Encapsulate	9
			Yes	No	N/A					_		-	
West Wing 1st Floor					$\boxtimes$	ACM P	pe Insulation		485 LF	$\boxtimes$		$\boxtimes$	$\boxtimes$
				П									
		-	_		la l						П		
Name of Posistared Wests Head	or.				JDEP 1	Naste	Cubic Yards of	Name of Regis	stered Landfill	1			
Name of Registered Waste Haul	21			55537	lauler II		Waste	IESI Landf					
Newark Carting					04509	)	As Needed						
City, State							Disposal Date	City, State	. DA				
Newark, NJ							TBD	Bethlehem					
Completed By (Print or Type)		Title					Signature	//	Da	o/z	1	11	
Allen Monchik		Pr	oject	Man	ager	49012500		~W~		UL	-	( - V	

ASB-41 JAN 13

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

CK 1813

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

Date of No	tification (1)				-	Name	of Building	Owner/Operator (2	2)	The same to				
	11 /	10 /	14			Bor	ough of I	Viiddlesex		EN NOV 13	AM	3: b	7	
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#### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

Check#2047 (Pursuant to NJAC 8:60 and 5:16) RECEIVED Date of Notification (1) Name of Building Owner/Operator (2) 10 11 14 2014 MDV 13 AM 12: 52 John Diaz Agencies Notified Type Notification Street Address ☐ EPA X Initial 440 Conrad Road X DOLWD ASSESTOS CONTROL Amended City, State, Zip Code X DHSS Amendment # ] DCA Englewood, NJ 07631 Emergency (including (NJAC 5:23-8) justification) Name of Contact Telephone Number Cancellation John Diaz FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Private house School (K-12)
Subchapter 8 (Other than K-1 2) School (K-12) Street Address Other (i.e., private and commercial buildings. 440 Conrad Road homes, etc.) City (5) Square Feet # of Floors Bldg. Age Englewood, NJ 07631 County (6) County Code (7) (STATE USE ONLY) | Current Use (Prior if being demolished) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Gr Tech LLC Street Address Street Address 576 Valley Rd #283 City, State, Zip Code City, State, Zip Code Wayne, NJ 07470 Project Manager for Monitoring Firm Telephone No. Telephone No License No. 973-638-1777 01127 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor \_\_11\_\_/\_\_20\_\_/\_\_14 Envirovision Consultants,Inc Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 20-21 Wagaraw Road, Bldg .# 35 E Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: \_\_\_\_AM-\_ PM/ PM\_ AM Fair Lawn, NJ 07410 Scope of Work (Check all that apply) Clean up and decontamination with negative pressure Full Containment with Negative Pressure >3 sf or >3 lf 2 160 sf or 2260 lf ■ Renovation Mini-Enclosure Demolition Glovebag Procedure Tent with Negative Pressure Non-Exempted (\*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Asbestos-Containing Material (ACM) Used Solely by Repair Encapsulate Asbestos Containing Material (ACM) Remova Amount TO BE ABATED Maintenance/ (i.e., thermal systems insulation. (Specify Custodial Staff? IN Facility surfacing, VAT, or SIF or LF) (12)(13)other miscellaneous) Yes No N/A Basement X Pipe insulation X 220 LF Li Name of Registered Waste Hauler NUDEP Waste Hauler ID No. | Cubic Yards of Waste | Name of Registered Landfill Gr Tech LLC 0033785 TBD ' T.R.R.F. Inc City State Disposal Date City State Wayne, NJ 07470 TBD Tullytown, PA Completed By (Print or Type) Title Signature Date N.Jevtic Owner 11/10/2014 ASB-41 MAY 11 Do not use this form for asbestos licensure exempted activities.

#### State of New Jersey

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Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire Per Abatement Performed Outside of Normal Time of Abatement: Alving Per Scope of Work (Check all that apply)  >3 sf or >3 if > 160 sf or >260 lf  Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)  Basement Second floor  Name of Registered Waste Hauler Gr Tech LLC City, State Wayne, NJ 07470 Completed By (Print or Type)	I / conly one riod of Al Facility I M/ Net Ren Den Net Mail Cust	12 e) eatement of the control of the	Description A	(11) Name of OSHA Envirovision of Street Address 20-21 Wagara City, State, Zif Pair Lawn, N Clea Full of Mini- Glov Non- Asbestos Containing (i.e., thermal system other misosa Pipe insulation Pipe insulation  Pipe insulation  Reflavor ib No. Cubic Yards of TBD Disposal D TBD	A Monitor Consult aw Road Code I 0741 In up an Contain Enclose ebag Pr Exempt Idea of g Materi ems inse VAT, or illaneout of Weste	tants, Inc  ad, Bldg # :  O decontamil ment with Ne ire reced (*) and N  ulation.  N  Name of Re T.R.R.P. Ir  City, State	Amount (Specify SIF or LF)	dure Aba Removal	atema	Encapsulate [] []	

#### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 5:16) MO#22011448331 RECEIVED

Date of Notification (1)			IN	lame of	Building C	wner/Op	erator (2)		there i V trans to				
	14		D	enise I	Busby			JAM SENY	3 AM 12: 5	g			
Agencies Notified Typ	e Notification			Street A				COTA MOA	O MITIE O	9			
	nitial		10	09 Mai	rtens Ave			A STOREST	AC OCUEBO	,			
	Amended				ate, Zip Co			Abdebi	es contro	L.		-000-000	
X DHSS	Amendment #_	377 3377						& LI	CENSING				
	Emergency (in	cluding			, NJ 0710 f Contact	76			Telephone Numb	oer -	-		-
(130) 10 0.20 0)	justification)								1				
	Cancellation		L	enise									-
				FACI	ILITY INF	ORMAT					1		-
Name of Facility Where Abate	ment is Taking	g Place (3	3)					Type of Facility (					
Private house								School (K-12)	) (Other than K-1 2	1			
Street Address								M Other (i.e., pr	ivate and commer	, cial build	dings.		
								homes, etc.)					
109 Martens Ave								Square Feet	# of Floors	Bidg	, Age		
so the supplementation of the supplementation													
Newark, NJ 07108 County (6)				County	Code (7) (	STATE US	E ONLY)	Current Use (Pri	or if being demoli	shed)			
Essex													
Name of Monitoring Firm Hire	ed by Building	Owner (8	) [	SCM N	10.	Name of	Abateme	ent Contractor (9)					
						Gr Tech	LLC						
Street Address						Street A	ddress						
						576 Val	ley Rd#	283					
City, State, Zip Code							ate, Zip Co						
City, State, Zip Code													
			T 1		1-	Telepho	NJ 0747	70	License No.			-	
Project Manager for Monitori	ng Firm		Tele	phone N					A Second Sandara				
						973-638			01127				- 1-
Start Date (10)	100 CO	eduled Co				Name o	f OSHA N	Monitor					
11 /19 /	14	11 /	_ 20	/ _	14	Envirov	ision Co	onsultants,Inc					_
Occupancy Status During At	atement (Che	ck only o	ne)		- 0.000	Street A	ddress						
☐ Facility Closed/Vacated	ouring Entire P	eriod of	Abate	ment		20-21 V	Vagaraw	Road, Bldg .#	35 E				
Abatement Performed Or	itside of Norm	al Facility	Hour	s - Des	cribe		ate, Zip C						
Time of Abatement:	AM	PM/	PM_		AM	Fair I a	wn, NJ 0	7410					
Scope of Work (Check all the	t apply)					T dir Da	Clean u	p and decontami	nation with negati	ve press	ure	-	
Scope of Work (Check all the	асарріў)					Н	Full Con	ntainment with Ne					
≥3 sf or >3 lf			novati				Mini-End	closure	Tent with Negativ	e Press	ure		
≥ 160 sf or ≥260 lf		De	molitic	חכ		M	Gloveba Non-Ex	ag Procedure L  emoted (*) and N	on-Friable Proced	ure	u.c		
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		2002	Locat				. 1200	-		ADI			yp:
Location of	havial (ACRA)		viorma d Sole		^ch=		escription	aterial (ACM)	Amount	Removal	Repair	E	CHOMOGNO
Asbestos-Containing Ma TO BE ABATE			intens		(i.e	e., therma	systems	insulation,	(Specify	mo	pai	aps	1
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(13)		-	(12)	-	-	other	miscellan	eous)				क	
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Basement				X	Pipe ins	ulation			70 LF			Ш	1 7
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	11 122		14	IDED Work	te Hanier ID No	Cubic V	ands of Wa	ste Name of Reg	sistered Landfill		-	1.0	-
Name of Registered Waste	Hauler												
Gr Tech LLC .				00337	85	TB		T.R.R.F. Inc	·				_
City, State						Dispos	al Date	City, State					
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Wayne, NJ 07470 Completed By (Print or Typ	a)	Titie					ignature	0		Date			
I completed by LETINE OF LVD	c)						-	1.1 8 . 1	7 /		word out		
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(K1422

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

RECEIVED

Date of Notification (1) 10-30-2014			N: C	ame of B esar T	uilding O	wner/Ope Luz Ma	rator (2 ria de	2) e la Ro	sa Torre	19 A	DV 13	AM	- <del>U</del>		
Agencies Notified	Type Notification														
EPA DEP DOL	Initial Amended Amendment	#	C	ity, State	el Circle , Zip Cod ange, N	е	2		<u> </u>	<u>\$₩</u>	STOS LICEN	COM	RO	L,	
☑ DOH DCA	Emergency justification) Cancellation		N	ame of C	1000			10		Tele	phone Nu	mher			
			_	FACILI	TY INFO	RMATION		T	Facility (4)						
Name of Facility When Residential Street Address	e Abatement is Takir	ng Place (3)			41			Sc Su	hool (K-12 bchapter 8	) 3 (Othe					
15 Korwel Circle								○ Ot etc     ○ etc     ○ ot     ○ etc     ○ ot     ○ ot	her (i.e. pri :.)	vate 8	commerc	ial build	ings,	home	S,
City (5) West Orange, NJ	07052			54	,			Square 2588		# of 2	Floors		dg. A 3+	ge	
County (6) Essex				County Co	ode (7) SE ONLY)			Current	Use (Prior	if bei	ng demolis	shed)			
Name of Monitoring Fi	rm Hired by Building	Owner (8)		ASCM	No.				ment Cont onmenta			LC			
Street Address						1335		Address /irginia	Avenue						
City, State, Zip Code						10000		ate, Zip y City,	Code NJ 070	52					
Project Manager for M	onitoring Firm		T	elephon	e No.	1		one No.			License 01174	No.			
Start Date (10) 10-31-2014		Scheduled		pletion D	ate (11)	100		of OSHA	A Monitor		. 429		127-12		
Occupancy Status Du	ring Abatement (Che	eck Only One	)				Street	Address							
▼ Facility Closed/V	acated During Entire	ateme	ent		_	City, S	tate, Zip	Code							
Scope of Work (Chec	k All That Apply)				-										
≥3 sf or ≥3 lf × ≥160 sf or ≥260	f	novat moliti				×	Mini- Glov	Containme Enclosure ebag Proc Exempted	edure				e		
		le l	o o o ti o					1 14011	Lxcmpted	( ) ai	id 14011 1 11	JUNE 1 10		emen	t
Loca	tion of	No	ocation	y		Desc	cription	of				-	T	ре	_
Asbestos-Contain TO BE	ing Material (ACM) ABATED acility (3)	Mair Custo	Solel ntenan odial S (12)	ice/		os Conta thermal s surfaci other mi	ining N ystems ng, VA	Material ( s insulat T, or		(	Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A						40			_		_
Gym	room		X				VAT				40 SF	x		_	
Storag	e room		X				VAT				10 SF	×			
laundi	y room		Χ				VAT			4	40 SF	X			
	ter room		Χ				VAT				10 SF	X			
Name of Registered Name of Registered Name of Registered Name		_C	Н	JDEP W auler ID 34889	No.	Cubic Y of Wast				**************************************	ered Land North La				
City, State Jersey City, NJ						Disposa 10-31-			City, Stat Morrisv		PA				
Completed by		Title		-	- 11 - 10 - 10 - 10 - 10 - 10 - 10 - 10		gnalur	1	- CONTIGUE	1		Date			
Liliana Pedraza	City, NJ ted by Title					1		cer	whe	70		10-30	201	4	



RECEIVED State of New Jersey

NOTIFICATION OF ASSESTOS ABATEMENT
(Pursuant to NJAC 8:80 and 12:120)

RECEIVE	(Pc	CATION I	OF ASBESTOS NJAC 8:60 ar	ABATE! d 12:120	MENT I)	CH	(HIDO	12	5		
11-10-2014		City of	Building Owner/ Paterson	Operator	(2)	Na Spent	APPROVED		ruire	. [	
Agencles Notified Type Notification CON	INUL		arket Street			Pau	1 1 7 811 -	1-10			
DEP CArrieded Amendment #			ь, Zip Code on, NJ 07502	2 '		Date:	10/14	e: [[	1:40	PA	h
Emergency (includi	ing -	Name of	Contact	,			Telephone Nur	nber			_
		FACIL	ITY INFORMAT	TON				1			
Name of Facility Where Abatement is Taking Place House for Demo	e (3)				Union	Facility (4) had (K-12)				2000	201110
Street Address 7 Godwin Ave.					Su Ott	ner (i.e. pm	(Other than K-12 rate & commerci	2) al build	dinga,	home	3,
City (5) Paterson					Square 1,500		# of Floors	27.24	ldg. A	ge	
County (6)		County C		*	Current		if being demolish	1 1 3		-	
Passaic Name of Monitoring Firm Hired by Building Owner		N 51313100		1 10	Churc						
n/a	(6)	ASCM n/a	No.	Lozr	ilca Ma	nent Contr nagemer			=		
Street Address				22 7	Address roy Ln			No.		2	
City, State, Zip Code n/a					itate, Zip oln Pari	Code c, NJ 070	)35 දි	) (1)	resign	5	1 (m
Project Manager for Monitoring Firm		Telephon n/a	ė No.	Telepi	706-79	1	Ucense N	and or		<u>-</u>	
	duied Con		Pate (11)		of OSHA			20		ربر	,
	14-2014			10 0000		падетег	nt Corp	78			٠
Occupancy Status During Abatement (Chack Only	One)			Street	Address	•		25.25	;	<u></u>	-
Facility Closed/Vacated During Entire Period				1	roy Ln						
Facility Closed/Vacated During Entire Period Abatement Performed Outside of Normal Pac Other - Deporibe: Surned Building Abandoned	cility Hours	3			state, Zip	Code . k, NJ 070	105		2	·t-	
Scope of Work (Check Ali That Apply)				Line	AURI FAI	NI NO UN	700				
23 sf or ≥3 lf ≥ 160 sf or ≥260 lf	Renova Demoli				Mini-	Enclosure abag Proce	it with Negative I dure (*) and Non-Friel			ū	
	is-Locat Norma	000000								emant Ps	
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Name of Registered Waste Hauler Rovic Transport	.   1	JDEP W Haular ID 10331 37	No. of V	lc Yards laste		Name of R	agistered Landīl	1			:
City, State Riverdale, NJ		/000 (3/		osal Date	9	Olly, State					e e
Completed by	tie Secretary	<u> </u>	- I I I	Signa (in	re AAA			1-10	201		

Sady

Emergency

Print Form

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

Date of Notification (1)	er (8)	720	Street Ad City, State  Number of FAGIL  County Coun	dress  OF HILL  E, Zip Code  PL OTTUR  Confact  Frank  Confact  Frank  Confact  Frank  No.	Name Ace Stree 95 h City, Colt	Type of Facility ( School (K-1 Subchapter Other (i.e. petc.) Square freet  Current Use (Pri 120 School (R-1 Address Montrose Road State, Zip Code Is Neck, N.J. 07 Indone No.	Telephone No.  Telephone No.  (4)  8 (Other than K- private & commer  or if being termoli  (L)  miractor (9)  Inc.	EST (	SEN	home	12
DEP DOL DOL DOH DOA DOA Name of Facility Where Abatement is Taking Pla Low Cod and Cambe Street Address City (5) Name of Monitoring Firm Hired by Building Cwns Street Address City, State, Zip Code Project Manager for Monitoring Firm Start Date (10) Sch Cocupancy Status During Abatement (Check On	er (8)	Page 2	County Costate ASCM	DF HIII e. Zip Code VE D TUPE Contact Frank CO CU  Code (7) SE ONLY)  No.	Name Ace Stree 95 h City, Colt	Type of Facility ( School (K-1 Subchapter Other (i.e. p etc.) Square ficet // Current Use (Pri 12.0 S. e of Abatement Con Insulation Co., it Address Montrose Road State, Zip Code its Neck, N.J. 07 whone No.	Telephone No.  4) 2) 8 (Other than K- private & commer- or if being itemolic CL (2) mractor (9) Inc.	12) clai build	SEN lings,	CON SIN	12
DEP DOL Amended Amendment # Emergency (incluing justification)  Name of Facility Where Abatement is Taking Plate (10)  City (5)  Name of Monitoring Firm Hired by Building Owns  Street Address  City, State, Zip Code  Project Manager for Monitoring Firm  Start Date (10)  Start Date (10)  Cocupancy Status During Abatement (Check On	er (8)	Page 2	Nume of FACIL  County C	e, Zip Code VE O TUPE Contact Frank LITY INFORMA CODE (7) SE ONLY) No.	Name Ace Stree 95 h City, Colt	Type of Facility ( School (K-1 Subchapter Other (i.e. p etc.) Square ficet // Current Use (Pri 12.0 S. e of Abatement Con Insulation Co., it Address Montrose Road State, Zip Code its Neck, N.J. 07 whone No.	Telephone No.  4)  8 (Other than K- private & commer  # of Fleors  or if being termoli  CL (2)  mractor (9)  Inc.	12) clei build (Bi shed)	lings,	home	10
DOL DOH DCA  Regency (incluing stiffication)  Name of Facility Where Abatement is Taking Pla  Street Address  City (5)  Name of Monitoring Firm Hired by Building Owns  Street Address  City, State, Zip Code  Project Manager for Monitoring Firm  Start Date (10)  Cocupancy Status During Abatement (Check On	er (8)	Page 2	Nume of FACIL  County C (STATE U)  ASCM	Corract  Corract  Corract  Correct  Code (T)  SE ONLY)  No.	Name Ace Stree 95 h City, Colt	Type of Facility ( School (K-1 Subchapter Other (i.e. p etc.) Square ficet  Current Use (Pri 12.0 School (R-1 20.1 Address Montrose Road State, Zip Code Is Neck, N.J. 07 Indone No.	4) 2) 8 (Other than K- private & commer  # of Floors  or if being ifemoli CLC  mractor (9) Inc.	12) clei build (Bi shed)	lings,	home	10
DOH DCA Emergency (incluing justification)  Name of Facility Where Abatement is Taking Pla  Low Code and Cambo  Street Address  City (5)  Name of Monitoring Firm Hired by Building Cwms  Street Address  City, State, Zip Code  Project Manager for Monitoring Firm  Start Date (10)  Sch  Cocupancy Status During Abatement (Check On	er (8)	Page 2	County Co	CORRECT FCOK  ITY INFORMA  CO (1)  SE ONLY)  No.	Name Ace Stree 95 h City, Colt	Type of Facility ( School (K-1 Subchapter Other (i.e. p etc.) Square ficet  Current Use (Pri 12.0 School (R-1 20.1 Address Montrose Road State, Zip Code Is Neck, N.J. 07 Indone No.	4) 2) 8 (Other than K- private & commer  # of Floors  or if being ifemoli CLC  mractor (9) Inc.	12) clei build (Bi shed)	lings,	home	
Name of Facility Where Abatement is Taking Pla  Low Cod and Cambe  Street Address  County (6)  Name of Monitoring Firm Hired by Building Cwns  Street Address  City, State, Zip Code  Project Manager for Monitoring Firm  Start Date (10)  Low Cancellation  Street Address  Street Address  City, State, Zip Code  Project Manager for Monitoring Firm  Start Date (10)  Cocupancy Status During Abatement (Check On	er (8)	Page 2	County Co	ITY INFORMA  C? ()  Second (7)  SE ONLY)  No.	Name Ace Stree 95 h City, i Colt	School (K-1 Subchapter Other (i.e. p etc.) Square ficet  Current Use (Pri 120 School (Roder Consulation Co., Address Montrose Road State, Zip Code Is Neck, N.J. 07 Indone No.	4) 2) 8 (Other than K- private & commer  # of Floors  or if being ifemoli CLC  mractor (9) Inc.	12) clei build (Bi shed)	lings,	home	10
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County (6)  Name of Monitoring Firm Hired by Building Cwins  Street Address  City, State, Zip Code  Project Manager for Monitoring Firm  Start Date (10)  I Sch  Occupancy Status During Abatement (Check On	heduler	d Com	ASCM Telephor	No.	Ace Street 95 h City, 5 Colt	20 School Process Proc	dh (Q mrector (9) , Inc.	shed)			
Name of Monitoring Firm Hired by Building Owns Street Address  City, State, Zip Code  Project Manager for Monitoring Firm  Start Date (10) Sch	heduler	d Com	ASCM Telephor	No.	Ace Street 95 h City, 5 Colt	20 School Process Proc	dh (Q mrector (9) , Inc.			La. Gampaile	
Name of Monitoring Firm Hired by Building Cwns Street Address  City, State, Zip Code  Project Manager for Monitoring Firm  Start Date (10) Sch	heduler	d Com	Telephor ng etion E	ne No.	Ace Street 95 h City, 5 Colt	e of Abatement Cor Insulation Co., I Address Montrose Road State, Zip Code is Neck, N.J. 07 thone No.	mtractor (9) , Inc.				
Street Address  City, State, Zip Code  Project Manager for Monitoring Firm  Start Date (10) Sch  UND Sch  Occupancy Status During Abatement (Check On	heduler	d Com	np ellon D		Street 95 h City, t Colt	t Address Montrose Road State, Zip Code is Neck, N.J. 07 Hone No.	7722	NA			
City, State, Zip Code  Project Manager for Monitoring Firm  Start Date (10) Sch  Cocupancy Status During Abatement (Check On	lt.	d Com	np ellon D		95 h City, S Colt	Montrose Road State, Zip Code is Neck, N.J. 07 shone No.	7722				
Project Manager for Monitoring Firm  Start Pate (10) Sch  Cocupancy Status During Abatement (Check On	lt.	d Com	np ellon D		City, S Colt	State, Zip Code is Neck, N.J. 07 hone No.	7722	b.			
Project Manager for Monitoring Firm  Start Pate (10) Sch  Cocupancy Status During Abatement (Check On	lt.	d Com	np ellon D		Colt	hone No.					
Start Date (10) Sch Occupancy Status During Abatement (Check On	lt.	d Com	np ellon D		Telep	hone No.		No			
Start Date (10) Sch Occupancy Status During Abatement (Check On	lt.	d Com	np ellon D		1		License	B.4-			- 32
Occupancy Status During Abatement (Check On	lt.	1		2=1= (4.4)		-294-1757	00029	NO.			
	II One	11.7	4 2 2	Jate (11)	Name	of OSHA Monitor					
	nty One	1.1	114								
Facility Closed Algorited During Fatire Paris	, OIR	e)			Stres	t Address	*				
LI FACINITY CHOSEUL VACARED DUNING EARLY FORD	od of A	batem	ne:it								
Abatement Performed Outside of Normal Front Other - Describe:	acility	Hours			City,	State, Zip Code					
	7				1		·			-	····
Scope of Work (Check All That Apply)	<del>-</del>				J	7					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova emoliti				Mini-Enclosur	ent with Negative	Pressu	re		
(F-100 10 10 10 10 10 10 10 10 10 10 10 10	-					Glovebag Pro					
			1			Non-Exempte	d (*) and Non-Fri			ement	-
		Locati	t			100				/pe	
Location of		d Sole	- 1		Descriptio	n of Material (ACM)	Amount		T		
Asbestos-Containing Material (ACM) TO BE ABATED		ntenar				ns insulation,	(Specify	20	75	E	m
In Facility	Cusic	odial S (12)	stan r		facing, V		SF or LF)	Remova	Repair	apsi	Enclosure
(13)	. T		T	onle	HISOGHA	ereousy		val	₹.	Encapsulate	an an
	Yes	No	N/A								
inside				Shect	-106	4	2017	1 /2			
			1 . 1	4							
	T		$\Gamma = 1$								
	-+		+						-	-	
Name of Registered Waste Hauler		TN	JEEP W	aste Cub	ic Yards	Name of	Registered Land	60	<u> </u>	لــــــــــــــــــــــــــــــــــــــ	
Ace Insulation Co., Inc.		H	laurer ID 2086		faste	3 Chrins	<del></del>	1111			
City, State Colts Neck, New Jersey				Disp	osal Date	City, Star Easjon		* 4			
	Title	12.	. SIL	1	Signatur	re /		Date/	Ť		
Bree McGuire	Secre	etary	T. easu	rer		TRUNX		11/7	11	1	
					1.00	1		11	-	-	

ASB-41 (R-06-08)

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

	MO	(Pure	uant b	NJAC 8:60 and	12:120	))		t		RE	CE		/ =		
Date of Notification (1)		Name of Building Owner/Operator (2)  St. eet Address  St. eet Address													
gencies Notified Type Notification  Z EPA Initial			DA tee	dress Har	12	nl	vay	Sur	الالما	o <del>rnu</del> √ } <del>itFe</del> n	13	Al	1		
DEP Amended Amendment # Emergency (in		- [	17	s, Zip Code · [aurel	, L	RW	Jers	e1-1	J 0	IDO  SELICENSING  DE Number					
DOH justification) DCA Cancellation		N.	Del	Contact WW				Gele	phone N	umber					
ame of Escility Where Abatement is Taking	Place (3)		FACIL	Try informati	ON	Туре с	of Facility (4	)							
reet Address 702 Pt 206						S	chool (K-12 lubchapter l other (i.e. pr tc.)	8 (Othe			dings,	home	15,		
a (a) The processes			-			Square		# of	Floors		idg. A				
H. 11sborough				code (7) SE ONLY)		Currer	nt Use (Prio								
ame of Monitoring Firm Hired by Building O	wner (8)		ASCM	No.	TO PROPERTY.		ement Cont tion Co.,	tractor	42						
reet Address			. ———		10000000	t Addres Montro:	s se Road						-		
ty, State, Zip Code					10000	State, Zij s Neck	Code c, N.J. 07	722							
oject Manager for Monitoring Firm		Te	ephor	e No.	10000000	hone No -294-1			G0029						
11/19/2014	Scheduled	221	C) C	Date (11)			A Monitor		ner-Zudrich von Williams						
Coupancy Status During Abatement (Check Facility Closed/Vacated During Entire Po Abatement Performed Outside of Normal	ericd of At	bateme	nt			t Addres			-						
Other – Describe: Am –  cope of Work (Check All That Apply)  ≥3 sf or ≥3 if ≥160 sf or ≥260 if	√ Re	novatio			A		Containme i-Endosure		Negative	e Pressu	re				
	65 -						vebag Proc n-Exempted		Non-Fri	able Pro	cedur	e			
Location of	No	Location ormally Solely			scriptio			Tag			Abate	pe			
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mair Custo	ntenance dial Str (12)	·e/			ns insula AT, or		(5	nount pacify (# LF)	Removal	Repair	Encapsulate	Enclosure		
basement	Yes	No	N/A	flext				Qu	NA	1		6			
DOM: N				+100	-	StrC		<del>2</del>		7					
ame of Registered Waste Hauler ce Insulation Co., Inc.		Ho	DEP Wuler ID		Yards ste	2	Name of F Chrins		réd Land	ifil	L				
ty, State olts Neck, New Jersey				Dispo	Sal Date	ASS 84	City, State								
ompleted by ree McGuire	retary (reasurer Signature Date 10/14														

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

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

RECEIVED

Date of Notification (1)	Name o	Building Owner/Ope						
11/10/14	()	nristine	Loves	2014 NOV 13	AH	1:1	al.	70
Agencies Notified Type Notification	Street A		- 1 1 0.10				4	
☐ EPA ☐ Initial		24 (605) Ite, Zip Code	OUD IT HUC	#3ESTOS	CON	1 图	ar-	
DEP Amended Amendment #		100 - by	the.	& LICE	NSIN	G	- <u>-</u>	
Emergency (including	1 1	Contact		Telephone Num	ber			
DOH justification) Cancellation	1	1154.08.		7				
DCA Cancellation		LITY INFORMATION	V	17.00	******	2011202		3500
Name of Facility Where Abatement is Taking Place (3)			Type of Facility (4	)				
Loures Residence	vari kesvene suza		School (K-12	2)				
Street Address			Subchapter &	Other than K-12 ivate & commercia	i) al buildin	igs, h	omes	<b>5</b> ,
224 Roosaelt Ac			etc.)					_
City (5)			Square Feet	# of Floors	Bla	g. Age	9	
Aun-bithi-sea			1000	r if being demolish	(20)	<u> </u>		
County (6)	(STATE	Code (7) USE ONLY)	- 1705.do		ieu)			
Monuth	LASC	M No.	Name of Abatement Con					_
Name of Monitoring Firm Hired by Building Owner (8)	700		Ace Insulation Co.,					
Street Address			Street Address					
Street Address			95 Montrose Road					
City, State, Zip Code			City, State, Zip Code					
C.IJ			Colts Neck, N.J. 07					
Project Manager for Monitoring Firm	Teleph	one No.	Telephone No.	License N	0.			
			732-294-1757	00029				_
Start Date (10) Scheduled (		Date (11)	Name of OSHA Monitor					
11/19/14 11/72	114		Street Address					
Occupancy Status During Abatement (Check Only One)			Og est / tiski see					
Facility Closed/Vacated During Entire Period of Aba	atement ours	-	City, State, Zip Code					
Other - Describe:			V					
Scope of Work (Check All That Apply)			1					(E)
	novation			ent with Negative F	Pressure	€		
≥ 25 of 1 = 5 iii ≥ 160 sf or ≥ 260 lf	nolition	1	Mini-Enclosure Glovebag Prod					
T			Non-Exempted	i (*) and Non-Friat				
ls Lo	ocation		-		1	Abater Typ		
No.	rmally		cription of			7		
Asbestos-Containing Material (ACM)	Solely by tenance/	Asbestos Conta	nining Material (ACM) systems insulation,	(Specify	ZP.	20	Enc	
In English	dial Staff? (12)	surfac	ing, VAT, or	SF or LF)	Remova	Repair	sde	Engosure
(13)	(12)	other m	iscellaneous)		val	=	Encapsulate	ale.
Yes	No NA						10	
namnt	V	0.000	winer as	160 (F	1			
Dudi		1 1 Pres	0					
			<i>y</i>					
		-			1			
Solder I Weste House	INIDEE	Waste Cubic	Yards Name of	Registered Landfi	ill			
Name of Registered Waste Hauter	Hauler	D No. of Was						
Company of the Compan	12086		0					
Ace Insulation Co., Inc.		Disnos	al Date   City, Sta	le				
City, State								
City, State Colts Neck, New Jersey		11/3	AIM Bethle	hem, PA	ate			
City, State Colts Neck, New Jersey Completed by	tary Trea	11/3		hem, PA	Pate 1110	10	<u> </u>	

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

#### RECEIVED

te of Notification (1) 11/9/1	4		Ra	ndy H	ogenbir	vner/Operator ( k			13 AM  :			=	
encies Notified	Type Notification		Stre	et Add	ress ock Driv	ve.	#\$BE	ST	OS CONTR	<u> </u>		_	
EPA	IXI Initial	1	100000		Zip Code		- 6	LH	ENSING			1	1
DEP	Amended Amendment #		La	noka I	Harbor,	NJ 08734					_	=	1
DOL	Emergency (incluing justification)	ıding			Contact			Tel	ephone Number				
DOH DCA	Cancellation		Rai	ady Ho	gerbirk						_		1
DOA						RMATION							4
	e Abatement is Taking I	Place (3)					Type of Facility School (K-1)	(4) 2)					1
ame of Facility Where esidence	e Apalement is raining						Esubabantar	810	ther than K-12)				1
treet Address							Other (i.e., I	privat	e 8 commercial b	uilding	s,		
34 Walnut Creek	Lane						homes, etc Square Feet	#	of Floors	Bldg.			
ity (s)							19	_ 2		30yr	S		_
oms River, NJ 08	3753		T (	County	Code(7)	(STATE	Current Use (F	Prior i	f being demolishe	ed)			
ounty (6)			1	JSE ON	LY)	10000	Residence	(0)			_		-
cean Manitaring F	irm Hired by Building O	wner	AS	CM No.			ment Contractor (	(9)					
iame of Monitoring F			_			AEi2, LLC		_					
Street Address						Street Address 300 S. Lenol							=
					-	City State, Z	ip Code						
City, State, Zip Code						Maple Shade	e, NJ 08052				_		=
	Maring Firm	TT	elepi	none No	=	Telephone No.	2012		License No. 00689			Mariana	
Project Manager fo	or Monitoring Firm	1	0.04			609-481-21		- 1					-
Start Date (10)	Sched	duled Com	pletio	on Date	(11)	Name of OSH	A Monitor						_
11/10/14	11/23					AEi2, LLC Street Addre	98						
Otation C	ouring Abatement (Che	ck only on	e)			300 Lenola					_		_
Olasad/\/	located During Entire F	erioa oi A	Date	ment	}	City State 7ir	Code						
Abatement Performant Other - Describe	rmed Outside of Norma	ii Facility i	,00,1			Maple Sha	de, NJ 08032					_	=
Scope of Work (Che							Containment with	h Neg	gative Pressure				
Scope of Work (Che	CK all true uppry	N Ban	watio	nn.		Mini-	Enclosure rebag Procedure						
≥3 sf or ≥3 lf	) If	X Rend Dem	olitio	n .		I Glov	-Exempted (*) an	d No	n-Friable Proced	ure			_
∑≥160 sf or ≥260	) 11		oatic	n T		La Non				A	bateı Typ	nent e	
		ls Lo Nor	mally			Description	on of			$\vdash$		Z	
			Solel	y by	Asbes	too Containing	Material (ACM)		Amount (Specify	R	R	n c	
Loca	ation of	Used S	enan	cel I		Stos Containing	me includion	- 1	(0000)	m	p	a P s	
Ashestos-Contain	ing Material (ACM)	Maint	enan todia	ce/	(i.e.	thermal syste	/AT. or		SF or LF)	0		u 1	
Asbestos-Contain TO BE IN F	ning Material (ACM) ABATED Facility	Maint Cus St	enan stodia aff?	ce/	(i.e.	thermal syste surfacing, \ other miscell	/Al, or		SF or LF)	o v a	i		1
Asbestos-Contain TO BE IN F	ing Material (ACM) ABATED	Maint Cus St	enan todia		(i.e.	, thermal syste	/Al, or	8	SF or LF)	v	i	t	1
Asbestos-Contain TO BE IN F	ning Material (ACM) ABATED Facility	Maint Cus St	enan stodia aff?	N/A	(i.e.	, thermal syste surfacing, \ other miscell	/Al, or	F	SF or LF)	v a	i		1
Asbestos-Contain TO BE IN F	ning Material (ACM) ABATED Facility	Maint Cus St	enan stodia aff? 12)		Siding	, thermal syste surfacing, \ other miscell	/Al, or	8		v a 1	i	t	1
Asbestos-Contair TO BE IN F	ning Material (ACM) ABATED Facility	Maint Cus St	enan stodia aff? 12)	N/A	(i.e.	, thermal syste surfacing, \ other miscell	/Al, or	£.		v a 1	i	t	1
Asbestos-Contair TO BE IN F	ning Material (ACM) ABATED Facility	Maint Cus St	enan stodia aff? 12)	N/A	(i.e.	, thermal syste surfacing, \ other miscell	(AI, or aneous)	E .	1800 SF	v a 1	ir	t	1
Asbestos-Contair TO BE IN F	ing Material (ACM)  ABATED Facility (13)	Maint Cus St	enan stodia aff? 12)	N/A X	Siding	, thermal syste surfacing, \ other miscell	/AI, or aneous)	Reg		v a 1	ir	t	
Asbestos-Contair TO BE IN F	ing Material (ACM)  ABATED Facility (13)	Maint Cus St	enan stodia aff? 12)	N/A	Siding	, thermal syste surfacing, \ other miscell	/AI, or aneous)	Reg	1800 SF	v a 1	i	t	
Asbestos-Contain TO BE IN F	ing Material (ACM)  ABATED Facility (13)	Maint Cus St	enanstodia raff? 12)	N/A X	Siding Waste D No.	cubic Yard of Waste	s Name of TBD		1800 SF	v a 1	ir	t	
Asbestos-Contair TO BE IN F  Exterior  Name of Register AEi2, LLC City, State	ed Waste Hauler	Maint Cus St	enanstodia raff? 12)	N/A X NJDEP	Siding Waste D No.	, thermal syste surfacing, \ other miscell	s Name of TBD		1800 SF	v a 1	i	t	
Asbestos-Contair TO BE IN F  Exterior  Name of Register AEi2, LLC City, State Maple Shade,	ed Waste Hauler	Maint Cus St	enanstodia raff? 12)	N/A X NJDEP	Siding Waste D No.	Cubic Yard of Waste	s Name of TBD City, Sta	ate	1800 SF	x a 1	ir	t	
Asbestos-Contair TO BE IN F  Exterior  Name of Register AEi2, LLC City, State	ed Waste Hauler	Maint Cus St	No	N/A X NJDEP Hauler I 21376	Siding Waste D No.	Cubic Yard of Waste  1 Disposal D TBD	s Name of TBD ate City, Sta	ate	1800 SF	x a 1	ir	t	

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

"OPEN"
NOTIFICATION

Date of Notification (1)		Name of Building Owner/Operator (2)										
1/1/14		P.S.E.G. 2514 KDV 13 AM										
Agencies Notified Type Notification  EPA Initial		Address HADLEY ROA D					i 8					
DEP Amended Amendment	#_ <b>2</b> SOUT	ate, Zip Code 「H PLAINFIELD,	NJ 07080	& LICE)	(10) (10)	TR	QL.					
□ Emergency (     □ justification)     □ DCA    □ Cancellation	Name o	of Contact	LLIAN	Telephone Num	nber							
Gancellation	40,	ILITY INFORMATIO		-		-	-	_				
Name of Facility Where Abatement is Takin	g Place (3)			Type of Facility (4)								
Street Address	1H 18			School (K-12) Subchapter 8 (Other than K-12)								
100 GRE	EN 57	· .	Other (i.e. p	rivate & commercia	al build	lings,	home	es,				
			Square Feet	# of Floors	В	ldg. A	ge					
County (6)	County	Code (7)	Current Use (Pri	or if being demolish	ed)		A					
BERGE	EN STATE	USE ONLY)	_	NIA	,							
Name of Monitoring Firm Hired by Building ENVIRONMENTAL TACTICS	Owner (8) ASCI 004		Name of Abatement Cor UNIQUE SYSTEM									
Street Address 64 BROAD STREET			Street Address 396 WHITEHEAD	AVE.								
City, State, Zip Code MATAWAN, NJ 07747			City, State, Zip Code SOUTH RIVER, N.	1,0000								
Project Manager for Monitoring Firm	Telepho	one No.	Telephone No.	License N	0.							
TOM GEIGER			732-432-8350	01111								
Start Date (10)	Scheduled Completion		Name of OSHA Monitor UNIQUE SYSTEM:	S OF AMERICA								
Occupancy Status During Abatement (Chec		1	Street Address 396 WHITEHEAD	AVE								
Facility Closed/Vacated During Entire I Abatement Performed Outside of Norn	Period of Abatement nal Facility Hours		City, State, Zip Code	AVE.								
Abatement Performed Outside of Norm Other – Describe:	es		SOUTH RIVER, N.	08882								
Scope of Work (Check All That Apply)	57											
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Renovation Demolition		Mini-Enclosure Glovebag Prod	cedure								
	la Location	T	Non-Exempted	d (*) and Non-Friab	1	Abate	de manicipa					
Location of	Is Location Normally	Desc	cription of			Ту	ре					
Asbestos-Containing Material (ACM) TO BE ABATED	Used Solely by Maintenance/		ining Material (ACM) ystems insulation,	Amount (Specify	R		Enc	щ				
In Facility (13)	Custodial Staff? (12)	surfaci	ng, VAT, or scellaneous)	SF or LF)	Remova	Repair	Encapsulate	Enclosure				
	Yes No N/A				al	-	late	ıге				
OUT DOORS	×	ACM P:	e Somastie	60 LF	X							
Name of Registered Waste Hauler	NJDEP V Hauler ID	일어(1) (1) 10 전에 가는 10 전에 있는 1		Registered Landfill								
WASTE MANAGEMENT	1125	APAX	S GROW	S NORTH								
City, State ELIZABETH, NJ	,	Disposa	Date City, Stat	e SVILLE, PA								
Completed by CAROL RAIMO	Title OFFICE MGR.		mature A	ma Da	te/	7/	1,4	7				

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

OF ASSESTOR ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

Date of Notification (1)				of Building Own				ICN	t	V	* {	110	
10/9/14	P.S.E.G.												
Agencies Notified Type Notification  EPA D Initial		10,000		Address HADLEY RO	DAD					T			
DEP Amended Amendment	#	5		tate, Zip Code TH PLAINFIE	LD. NJ.	. 0708	30					-	
DOH Emergency justification)  DCA Cancellation		1	ame	of Contact	MAR			Telepho	one Nun	iber	,		
Name of Facility Where Abatement is Takin	g Place (3	3)	FAC	ILITY INFORM	ATION		e of Facility	(A)					
Street Address							School (K-						
M H 18 - 100 City (5)	GR	ee n	j	57,			Subchapte Other (i.e. etc.)	r 8 (Other the private & cor	an K-12 mmercia	l buil	dings	, hom	es,
TETERBORD						113	are Feet	# of Floo		1	Bldg. AJ	Age	
County (6) BEGEN		(S		Code (7) USE ONLY)		Curr	ent Use (Pri	ior if being de	emolish	ed)		· · ·	
Name of Monitoring Firm Hired by Building ( ENVIRONMENTAL TACTICS	Owner (8)			M No. 45			atement Co SYSTEM	ntractor (9) S OF AME	ERICA		20		
Street Address 64 BROAD STREET				-		t Addre	ESS TEHEAD :	AVE.					
City, State, Zip Code MATAWAN, NJ 07747							Zip Code RIVER, N.						
Project Manager for Monitoring Firm TOM GEIGER		1000000	9 75	ne No. 92-2217	Telep	hone N -432-8	io.	Lice	ense No				-
Start Date (10)	Schedule	d Compl	etion	Date (11)	Name	of OS	HA Monitor	S OF AME					
Occupancy Status During Abatement (Check					Street	t Addre	SS						
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other - Describe: 2 4 1 2 4	al Facility	batemer Hours	nt		City, S	State, Z	EHEAD A			-			
Scope of Work (Check All That Apply)					1 200	JIHH	CIVER, NJ	08882					
≥3 sf or ≥3 if ≥1:60 sf or ≥2:60 if		anovatio emolition			14	Mili Gid	ni-Enclosure ovebag Prod						
	234	Location				ا (۱۹۵	ri-Exempled	( ) and Non	r naut		Abate	meni	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility	Used Mair Custo	ormally I Solely t ntenance odial Staf	1	Asbestos Co (Le. therm		viaterial s insula		Amouni (Specify	y	Rei	Ty	1	Enc
(13)	Yes	(12) No	N/A		miscellar			SF or LF	-)	Removal	Repair	Encapsulate	Endosure
OUTDOORS		X	- N	ACM !	1,15	So	14 AS7 i.e.	156	F	1			
		and the second			•					9			
Name of Registered Waste Hauler		NID	EP W	aste   Cubi	c Yards		Name of F	To giplosed L	no d'Ell			and the	
WASTE MANAGEMENT		1	er ID	No. of W			S 00 100000	Registered La S NORTH	andnii				
City, State ELIZABETH, NJ			yrh(33)	Disp	osal Date	100	City, State	SVILLE, P.	Α	-			
Completed by CAROL RAIMO	Title OFFIC	E MGI	——— 7.		Signature		0 1	0		5/	ja j	1/4	1

D	-
UPIDE	Form

CK# 5612			NOTIF	TUALIGNIA	e of New OF ASBES		ATEMENT	σ Λ				
Date of Notification (1)			(P		NUAC 8:	60 and 12	2:120)	OPEN		AL	7	1
Agencies Notified Type No.				Name of B P.S.E.G.	uilding Ov	vner/Oper	ator (2)		-	. B.E		
I I - J J - J J J J	ification		T	Street Add	ress							
DEP A Initia				4000 HA								
DOL Ame	nded ndment#			City, State,	Zip Code							
X DOH L Eme	rgency (in	cluding		SOUTH	PLAINF	ELD. N.	J. 07080					
I DCA JUSTIT	cation)	9	[i	Name of Co	intact							
	ellation			Joh	# R 1	MA.	ROTTE	Teleph	חרש אח	mher		
Name of Facility Where Abatement is	E Takina I	71		FACILITY	Y INFORM	ATION	<u> 20112</u>					
	s raking i	riace (3	1)				Type of Fac	riliby (A)				
Street Address					201 Sept National Confession (1997)		_	100 504				
MH 18-10	A 1	e 1		9			Subchi	(K-12) apter 8 (Other th				14000000
City (5)		-RE	FER	U 5	1.		ĭ Other (	i.e. private & cor	an K-12 nmercia	2) albuild	dinac	been
- IEIEP ROA							Square Feet					
County (6)	seri.						N/A	1 0. 1 100		В	ldg. A	ge
DE GEN			Co	ounty Code TATE USE O	(7)		Current Use	Prior if being de	A		WI	13
Name of Monitoring Firm Hired by Buil			TALY)		1	. nor il being de	molish	ed)		No.		
THE PACIFICS	1	ASCM No.		Name	of Abatement	Contractor (2)						
Street Address				0045		UNI	QUE SYSTE	EMS OF AME	DICA			
64 BROAD STREET						Street	Address	- AIVIE	RICA		_	
City, State, Zip Code		· ·				396	WHITEHEAL	) AVE				
MATAWAN, NJ 07747						City, S	itate, Zip Code					
Project Manager for Monitoring Firm						SOU	TH RIVER, i	V.I 08882				
. OW GEIGER			Tele	phone No.		Teleph	оле №.					
Start Date (10)	Saba	dul- d	132	2-292-221	17	732-4	32-8350		se No.			
7/17/14	Julie	imiea (	omplet	tion Date (1	1)		of OSHA Monito	1 0	1111			
Occupancy Status During Abatement (C	heck Only	001	13	114		UNIQ	UE SYSTEM	IS OF AMER	100			
- Facility Closed Avenue						Street A	ddress		ICA			
Abatement Performed Outside of N Other – Describe:	ormal Fac	of Abat	ement			396 M	/HITEHEAD	AVE.				
	ers		J12		1	City, Sta	ite, Zip Code					
cope of Work (Check All That Apply)						SOUT	H RIVER, N.	J 08882				
≥3 sf or ≥3 lf	<b>'</b>	D	Y-01-10-00									
≥160 sf or ≥260 lf	Ħ	Renov					Full Containm	ent with Negative			-	
							Mini-Enclosure	ent with Negative	e Press	иге		
							Glovebag Prod	cedure				
Location of		Is Local	tion					d (*) and Non-Fri	able Pr			
ASDESTOS-Containing Material (A Can	Us	Norma sed Sole	elv by		Desc	ription of	- 1	7			temer	nt
TO BE ABATED In Facility	M	aintena	nce/	Asbes	ios Contai	ning Mate	riel (cons	Amount		1	ype	_
(13)	1	stodial ( (12)	stan?	(1.5.	architel St	/stems ins ng, VAT, o	acide line	(Specify	R	_	9	m
	1	1	T -		other mis	cellaneou	IS)	SF or LF)	Removal	Repair	cap	nclo
OUTDOORS	Yes	No	N/A				1		ıva	목	Encapsulate	Enclosure
LAI DOOKS		X		AGA	, D.	0 6	-				6	(2)
				1 6 11 - 10	1 [1]	5	omastie	156F	X			
									13		-	
	+								1 1		_	
e of Registered Waste Hauler	1											
FIGURE FINISH		NJ	DEP W	aste	Cubic Yar	de	12					
STE MANAGEMENT		I Ha	uler ID I		of Waste	ua	Name of Re	gistered Landfill	-			
STE MANAGEMENT		1.10	125									- 1
STE MANAGEMENT State		1	125	6	3/1/2 c	2	GROWS					1
STE MANAGEMENT State [ABETH, NJ		11	125	6	Disposal D	ate	GROWS					
STE MANAGEMENT State CABETH, NJ Dieted by OL RAIMO	Title	11	125	6	3/1/2 c	ate A		NORTH				-

CK 14545

Davis	F
	Form

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

		1			11773				Ш	-111		
Date of Notification (1) 11/07/2014		Name of Building Owner/Operator (2) MRY Associates LLC NOV 1 3 2014										
Agencies Notified Type Notification		Street A	ddress pringfield Av	onuo					_			
EPA Initial Amended			ate, Zip Code	enue		ASSESTOS LICE	NSING	BOL.	<u> </u>	-		
X DOL Amendment #			nit, NJ 07901		E. San	LIOL	CVIIICVII.					
Emergency (ir justification)  DCA  Emergency (ir justification)  Cancellation	cluding		f Contact			Telephone I	Number					
DCA Cancellation			Yeager									
Name of Facility Where Abatement is Taking	Place (3)	FAC	ILITY INFORM	ATION	Type of Facility (	4)	_			$\dashv$		
Glass Works					School (K-1							
Street Address					Subchapter	8 (Other than k		huildings hamas				
7 Bank Street			***************************************		etc.)			cial buildings, hom				
City (5) Summit					Square Feet 2240	# of Floors	E	Bldg. A	ge			
County (6)		County	Code (7)		Current Use (Price			-				
Union			USE ONLY)		,	-						
Name of Monitoring Firm Hired by Building O	wner (8)	ASCI	M No.		of Abatement Con							
n/a Street Address					Metro Corpor	ation		-		_		
Street Address					137 McBride A	venue						
City, State, Zip Code					State, Zip Code	-						
					rson, NJ 0750							
Project Manager for Monitoring Firm		Telepho	one No.	100000000000000000000000000000000000000	none No. 742-5030	00809	nse No. 109					
	Scheduled 0 11/09/201		Date (11)		of OSHA Monitor Metro Corpor	ation			97			
Occupancy Status During Abatement (Check	Only One)				Address							
Facility Closed/Vacated During Entire Pe					137 McBride A	venue						
Abatement Performed Outside of Normal Other – Describe:	II Facility Ho	ours		100 Page 100	state, Zip Code rson, NJ 0750	1						
Scope of Work (Check All That Apply)												
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		ovation iolition		2	Mini-Enclosure Glovebag Prod							
	lelo	cation				1 ( ) and Non-1	III III III III III III III III III II	Abate	100			
Location of	Norr	nally		Description	of		_	Ту	pe			
Asbestos-Containing Material (ACM) TO BE ABATED	Mainte	olely by nance/			Material (ACM) s insulation,	Amount (Specify	20		Enc	ш		
In Facility		al Staff? 2)	SU	rfacing, VA	T, or	SF or LF)	Removal	Repair	Encapsulate	Enclosure		
(13)	Yes N	lo N/A	- Oth	er miscellar	leous)		¥ <u>al</u>	=	ılate	Le		
Descript hailer race	Tes IN	170		na laasila	tion	COLF		$\vdash$		_		
Basement boiler room		X		pe Insula iler insula		60lf	x	1	X			
Basement Boiler room		X	DO	ner insur	auon	30sf	x		Х			
								$\vdash$		$\dashv$		
Name of Registered Waste Hauler		NJDEP V Hauler ID		bic Yards Waste	Name of	Registered Lan	dfill			$\neg$		
MTM Metro Corporation		26552	15	vasic	Grows							
City, State Paterson, NJ 07501				posal Date /10/2014	City, State Tullytov							
Completed by	Title	<del>200 - 100 - 12</del>		Signature Date					$\neg$			
Elizabeth Maslarkov	s Admin	strator	Eliz	Elizabeth Maslarkov 11/07/2014								

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

Date of Notification (1) NOV. 10, 2014		Name of MICHA	Building Own	er/Operator	(2)		7 E I	\\\]\\\]		
Agencies Notified Type Notification	on	Street Ad		100 No. 00 No. 0			OV 13	2014	1	
EPA Initial Amended Amendment	ent #		e, Zip Code KEN, NJ 0	7030		ASBE	STOS CO	เกลด์	j	
DOH justification Cancellat		Name of MICHA	Contact AEL HIGGI	NS	<u>.</u>	Telephon	e <b>W</b> umber	VG		
Name of Facility Where Abatement is Ta	king Place (3)	FACIL	ITY INFORM	ATION	Type of Facility (	4)	į.		-	
Street Address 9 MC LAREN STREET		22	-		Other (i.e. p	2) 8 (Other that orivate & com		dings,	home	es,
City (5) RED BANK					Square Feet 1500 SF	# of Floor 2	rs E	3ldg. A 100 Y		
County (6) MONMOUTH	*	County C	Code (7) ISE ONLY)		Current Use (Prior if being demolished) RESIDENCE					
Name of Monitoring Firm Hired by Buildin N/A	ng Owner (8)	ASCM	l No.		of Abatement Cor shing Touch As		atement (	Corp.	, Inc	
Street Address					Address Broadway, Un	it A				
City, State, Zip Code			27	City, S Lon	State, Zip Code g Branch, NJ 0	7740				
Project Manager for Monitoring Firm N/A		Telephor	ne No.		Telephone No. License No. 732.222.8372 00040					
Start Date (10) 11/24/14	Scheduled C 11/24/14	ompletion [	Date (11)	Name N/A	of OSHA Monitor		1195			
Occupancy Status During Abatement (C  Facility Closed/Vacated During Ent Abatement Performed Outside of N Other – Describe:	ire Period of Abat				Address State, Zip Code					
Scope of Work (Check All That Apply)	200									
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	THE REAL PROPERTY.	ovation olition			Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	e cedure			9	
	Is Loc	ation			Non-Exemple	d ( ) and Nor	i-Friable Fi	Abat	emen	t
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Norn	nally olely by nance/ al Staff? 2)	(i.e. the		Material (ACM) ns insulation, AT, or	Amour (Specif SF or L	fy R	Repair	e Encapsulate	Enclosure
BASEMENT		Х		TSI		7 LF	Х			
Name of Registered Waste Hauler Finishing Touch Asbestos Abate	ment Corp., I	NJDEP W Hauler ID 12058	No. o	Cubic Yards of Waste 5 cy	GROV	Registered L VS NORTH		ILL		
City, State Long Branch, NJ 07740				Disposal Date 1/15/14	e City, Sta Morris	te ville, PA				
Completed by Joseph P. Miller  Title Presider				Signature Date 11/10/14						

2014-210		Notificati (Pursuant 1	ion of AB	of NJ bestos Ab 8:60-7 and RGENCY	atemañ d 12:12(	)-7)	DOI Cnee	10 k # 6911	DAY	JV 1	100	2014
© prej. 8: 20 14-210	,		-		ACCOUNT. NO.		سنا آ	11	1	205	doi	JRO
A Lateragian (1)	Name of B	uilding Qwnair	Operator (	(2)		1.	Jan 1	Mal	ASE		-	<u> 13</u>
Notification (1)	Bayon	e Board of	Education	on			IM	1/1/	וחחחו	IED.		
ma Notified   Type Notification	Street Add					1	WAIV	FRAF	, LKO	i Lu		le-
1 ma	669 A	venue A										
DEP E Initial	Cly, State	, Zip Code	200			736-32-4			- LAN		-4	-
Amendment	Bayo	uus' Ma ou	002	-	-		Tele	shone Nur	lioai			
	Name of	Contact					1			-		
DOH Concellation	Leo	smith & Sc	OR NOISI	1				100	-			_
DCA	and the second	FAC	ILITY INFO	ORMATION			ype of Fe	oliky (4) School (K	- 12)			
to and in both	ino sigos (3)					11		SQUOOL (14	- a / Catholic	than K-	12)	
me of facility where abatement is tak	فمدهم اساسا	ion hida. N	ON SUB	8			person /	Subchapte Other (Priv	THE PARTY OF THE	nercial	- (1005)	
me of facility where abandunced by the series of Education -	dministra	IDIT DING. IV				11	1	日間もなってい	Sheet and	Ble	ig. Age	-
trest Address					3		Square F		(Flaora			
569 Avenue A				Col	unty Code	m	Cument	Use (Prior	if being d	omolish	<del>5</del> 4)	
City (B)	County (5)			(512	ate use or		school	-non su	8			-
	Hudson		1001	ANIO	Name	Abetement	Contractor	(8)		*		
Bayonne Rame of Monitoring Firm Hired by Bi	g. Owner (8)		ASCN	iA	B&	G Restorat	ion, inc.		-			
UIS Same of Mountains A.			1		Change	Adding.						
						Ryerson F			-			
Sirest Address			-		City. S	ate. Zip Code ncoin Park.	NJ 0703	35				
City, Siess, Zip Code					L	one Number	100 01		License			
		Phone N	lumber		1 (	373)896-00	88.		UU	378		
Project Manager for Mentioring Firm					Nam	of OSHA Mo	nitor					
	School.	ompletion Di	ite (11)		8	& G Reston	a sidili	- CO.	And the passes			
Scheduled Start Date (10)	11/08	/2014			10	S Ryanson	Road					
0ccupancy Status During Abeliance	nt (Check on	y ona)			City.	State, Zip Co	de .					
Occupancy Status During Abetimic  Facility closed/vecated during	entire perior	d abatemen	K.		1 1	incoinPark.		35				- 44
The Appropriate Property of the Party of the	of homes	some frame			- 11 -	(UCOTUL BIA						Complete
Describe:				-		onteinment w	neosites i	prossure	- CIO	abag pro	opedun	
Scope of Wark (check all that app	siy) ] Renevatio	n			- Full C	enclosure			Non	-Ariobio i	PROOF!	and i
E Darrottion	1 wenter	>260 19			☐ MIN	Gilaiagai.	T			e	e	n
□ >3 st or >3 il	- 41 -	- management Life	ed solely		ed multi	stor-containin	ig	Amoun (Specif	y SF or	m	P	e n
Location of as best of containing	by mains	SUBUCOLURA A	MINE CONTRACTOR	Describa	(ACM)			(P)	* /U-01/	V e	1	P .
	Yes	No	N/A					150 80	n.	K	口	Ο.
abated in facility (13)	100		-	VAT & m	astic			100.00			旦	1
Board meeting room							-				1	1
		1			· Constitution of the	A COLUMN TO THE REAL PROPERTY.			-		-	1
											1 lead	
				Ubic Yards o	/ Whiste	Name of Reg	town Re	grill Source	Recov	ery Ce	nter	
Registered Waste Havier	N.	DEP Hauter	Dir.	1	200	TURY	town re	20010				
Registereston Inc.		1000	Disposal D 11/10/2	pate		Tully	town, PA	1	T P	ate		
B & G Restoration, Inc.			14421117	1114	terreto and the	1	THE RESERVE OF THE PERSON NAMED IN		1 5	- 4 10 m 18	b b a	
City, State Lincoln Park, NJ	15-2		1111012	Signature		Gudna S	Pump			11/07/2	2014	

State of NJ

2014-210

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

B & G proj. #:	2014-210	_	(Pur	suant t	EMERG		110 12.120 7)		Check#	6911			-	_
Date of Notification	(1)	Name	of Building	Owner/	Operator (2)				- L-Coffo Pal	3.05°R%		٦		
11 11 /10 16					Education			<u></u>		Cosing Co	rnice	25		- taley
Agencies Notified	Type Notification	Street	Address		1			lea nebe	, <u>y</u>		<u>-</u>	-1		
☐ EPA	区 Initial	669	Avenue	A					tsiquat		- Suite	Non-		-
☐ DEP			tate, Zip C					Date:	11 They	Time: LD	***	1		
E DOL	Amendme	1	yanne, N		12				Telephone	Number		-	-	-
MOD M	Cancellati	!!	of Contact						TOIOPIIOITO					
DCA	LI Concellati	Le	o Smith	& Scot	t-Nolan				<u> </u>			-		_
				FACILI	TY INFORMA	ATION								
Name of facility wi	nere abatement is	taking place (	3)			-	•	Тура	of Facility (4 x School	(K - 12)				
	rd of Education			a NON	I SUB 8					pter 8 (Oth	er.tha	, in K-1	2)	
	(0 0) Educado	i-adj minode	anort pro	9.110,	-				other (F	Hvate/Con	MOR		7	
Street Address	Λ .							11	Bldgs./F	iomes, atc.		Bido	. Age	
		County (6				Colle	ty Code (7)	- Squa	, la Leer L	r DI I-IDOLS				
City (5) ·		County (s					use only)	Cun	rent Use (Pri	or if being	demo	lished	)	
Bayonne		Hudso			-				ool-non s	ub 8	_		<u> </u>	-
Name of Monitori	ng Firm Hired by E	ldg. Owner (8	)		ASCM No.		Name of Abateme							•
n/a	i i				N/A	_	B & G Resto Street Address	ration, Ir	IC.	<u> </u>				
Street Address							105 Ryerson	n Road						- 10
City, State, Zip Co.	da					-	City, State, Zip Co							
ony,, -,	,			Orr			Lincoln Par		035	Licanse N	- Inne	GAP COR		<u> </u>
Project Managor fo	or Monitoring Firm		Phon	e Numbe	r		Telephone Numb (973)696-6	3869		003				_
Scheduled Start D	ate (10)	Sched, Co	noiseign	Date (11		-	Name of OSHA N B & G Resto		nc.		9			
11/7/2014	7	11/08/2		-			Street Address	40			THE REAL PROPERTY.	THE PARTY NAMED IN		
Occupancy Status	During Abatamer	t (Check only	one)				105 Ryerson			-				_
Facility close	ed/vacated during performed outside	entire period of of normal faci	of abatems lity hours	ent	1.50		City, State, Zip Co	ode .						
Describa:				100	<del></del>	_	LincolnPark	, NJ 070	35				. 4.	<u>.                                    </u>
Other-Desc	check all that apply	7)										-		
Demolition	П	Renovation				□ F	uli Containment v	ulnegative	pressure	Gloveb	ag ph	ocedu	Ţe.	
☐ >3 af or >3	r 🛭	≥160 of or ≥26	50 tf				fini-endosure			Non-fri	able p	roce	ture	
Location of		Is location or	ornally us	ed solely			The state of the s				8	R	E :	E
asbestos-p	ontaining	by maintena staff(12)	nos/gusto	3161	Descrip material		sbestos-containin	g	Amount (Specify 5	SF or	u.	þ	c a	Ċ U
material to abated in fa		Yes	No	N/A	11101010	ربونټ) ا		- 1	LF)		٧	· i	Þ	L
5	-			×	VAT & m	astle			150 saft		İ	白		
Board meeting	room ·		The state of the s		VAL GI	Collo								
				7										旦
										-	片	片		1
					ubic Yards o	Meda	Name of Regist	pred land	50	-			<u>.</u>	Income
Registered Waste B & G Restor	ation. Inc.		Hauler ID 563	#	1	( andoth	Tullyte	wn Res	ource & R	ecovery	Cen	ter_		_
City, State			D	isposal I			City, State	wn, PA						
Lincoln Park				1/10/2	Signature					Date				
Completed by (P) Gordana Lur		Title Secretary	Treasur	er	- Alemani		Gindona La	-16#		11/07	//20	14	-	

# State of NJ of Aspestos Abatement

B & G proj. #:	2014-210		Notificat (Pursuant	to NJ	f Asbes AC 8:60 MERGE	)-7 and	atement d 12:120-7)	DE	Check#	·				-
Date of Notification	(1)	I I Name of F	uilding Owner	Opera	ator (2)		# 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		NOV 1	3 2014		刀		
			ne Board of					i				4		-
Agencies Notified	Type Notification	Street Add						AS	BESTOS C	IONTROL	_l :			
Agencies Notified	520		venue A				į		LICEN	SING		=		-
☐ DEP	★ Initial	7.7	, Zip Code											
DOL DOL	☐ Amendment	Bayor	nne, NJ 070	02					Telephone	Number		-		none.
		Name of C							Telephone	Mulliper				
	☐ Cancellation	100	Smith & Sco	tt No	lan				<u></u>			=		_
DCA					NFORMA	TION								
			FACII	-11 4 11	VEORIVIA			Туре	of Facility (4	1)				
Name of facility wi	here abatement is tal	king place (3)							× School	(K - 12)			e e	
Bayonne Boa	ard of Education-	administrati	on bldg. NO	N SL	JB 8			_	Subcha	apter 8 (Othe Private/Com	r than	K-12	)	
	and or Education						81		Other (Bldgs./	Homes, etc.				
Street Address	٨						4	Squ		# of Floors	T	Bldg.	Age	
669 Avenue	A .	County (6)				Count	y Code (7)	-				1 - 1		
City (5)		County (0)				(State	use only)		rrent Use (P		emolis	snea)		
Bayonne		Hudson	2027				lame of Abaten		hool-non s	SUD 0				===
Name of Monitor	ing Firm Hired by Bld	g. Owner (8)			CM No.									
n/a				1	N/A		B & G Rest Street Address	oration, i	IIC.					
Street Address					1973		105 Ryers	on Road				11		District Co.
Succernation							ity, State, Zip (							
City, State, Zip Co	ode		11				Lincoln P	ark, NJ 0	7035					
1200			Phone Num	her			Telephone Num	ber		License N		r		
Project Manager	for Monitoring Firm		Filone Num	20.			(973)696				70			
		To L. J. Con	pletion Date (	11)			Name of OSHA	Monitor	Inc	- 8				
Scheduled Start	Date (10)			,			Street Address		1110.					
11/7/2014		11/08/20					105 Ryers			55				
Occupancy Statu	s During Abatement	(Check only of	ne)				City, State, Zip							•
Facility clo	sed/vacated during e t performed outside of	ntire period of if normal facilit	y hours-						7005					
Describe:							LincolnPa	rk, NJ 07	7035					
Other-Des										_				
500 may 1	(check all that apply)	Renovation				□ F	ull Containmen	it w/negativ	e pressure	Gloveb				
Demolitio		160 sf or ≥260	ı If				Mini-enclosure			Non-fr	able F	R	E	г
>3 sf or >	3 If 🔀 🗵	le location no	mally used so	lely							е	е	n	E n
Location	of	by maintenan	ce/custodial		Descrip	tion of a	asbestos-contai	ning	Amoun (Specif		m I	p	c	C
material t	-containing to be	staff(12)			materia	il (ACM)			LF)		v e	i	р	L
abated in	facility (13)	Yes	No N/A						150 sq	ft	X	亡		
Board meeting	na room		×		VAT & n	nastic			130 30					
Board meeting									-					
				_	-		and the same							11
				#										
			Hauler ID#	1 Cub	oic Yards	of Wast	Name of Re	gistered La	andfill	Pacayan	Cer	iter		400000000000000000000000000000000000000
Registered Wa	ste Hauler toration, Inc.		563		1		Tul	The second line was a second line with the second	esource &	Recovery	061			in a standard
	oration, mo.		Dispos	al Dat	te		City, State Tull	ytown, P.	Α	W ph spin	- 40	11		¥
City, State Lincoln Pa	irk, NJ			0/201	Signature					Date				
Completed by	(Print or Type)	Title Secretary/	Treasurer		Jignature	D)	Gordana S	Luna		11/0	7/20	174		
Gordana L	_una	Secretary	Treasurer											

B& G proj. #: 2014-210

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

	-		774		EMER	GEN	CY	Chack	# 6911				_
Date of Notification	1 (1)	111	Vame of Bu	rilding Own	er/Operator (2)	١							
1111/10 16	1/11/14	- 11.			of Education		Γ	Alien	NOWED	``			
Agencies Notified	Type Notifical	ion S	ireet Addn				The state of the s	d Dept. p. Hould	. ę. <del>Coni</del> c	L Core	rices!	_	
☐ EPA	initial		669 Ave	enue A				(sig	nature)		-		
☐ DEP			ity, State,					Date: 4174		10.	. 57		
E DOT	Amend	ment	Bayonr	ie, NJ 07	002		L		7.			107 1215 Stares	
₩ рон	Cancell	11-	ame of Co.	ntact	0			Telepho	ne Numbe	ar			
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Street Address				,					apter 8 ( (Private/C			-14)	
669 Avenue	Α .							Square Feet	/Homes,		RI	dg. A	70
City (5) ·		Cou	rity (6)			Cou	nty Code (7)	odanie i cer	WIN LIN	/L3			90
Bayonne		Hu	dson			(Sta	te use only)	Current Use (F		ng den	rollehe	od)	-
Name of Monitorin	or Firm Hired his		20020-0000019-00		ASCM No.	L.,	Name of Abatement	school-non	sub 8	_		• •	
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City, State, Zip Coo	ig .	71					City, State, Zip Code	1107025					
Project Manager for	r Montorion Fire	1	ia i	one Numb	AP.	_	Lincoln Park, I	42 01032	Tucanse	Attern	WEAP .		- Table
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Scheduled Start Da	ite (10)	Scher	. Completi	on Date (1	1)		Name of OSHA Moni						
11/7/2014			08/2014		TO THE		B & G Restorati	on, Inc.					<u> </u>
Occupancy Status I	During Abateme					-	105 Ryerson Re	oad					0.00
Facility closes	d/vacated during	entire peri	od of abate	ment.	2 EEE	Ă.	City, State, Zip Code	<del></del>					
Describe:	erformed outside	of normal	facility hou	TE <sub>r</sub>		_	LincolnPark, N.						
Scope of Work (ch						_	Lincome at N. 14	07035				- 4	<u>:-</u>
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Registered Waste H B & G Restorat			P Hauler I 19563		ubic Yards of V	VASIC	Name of Registered Tullytown	andfill Resource & Re	coverv	Cent	er		
City, State Lincoln Park, N	17			Disposal D 11/10/20			City, State Tullytown, i						
Completed by (Print	or Type)	Title			Signature	=			Date		90	. 'Y	
Gordana Luna	-	Secreta	ry/Treasu	irer			Gordona Lina	The second second second	11/0	7/201	4		

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Print Form

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

Date of Notification (1) November 10, 201	4				Building Owner/C		(2)	Ghe	ck # N	/ <sub>A</sub> 1	3 2	014		
Agencies Notified  EPA DEP DOL	Type Notification  Initial  Amended  Amendment	# 1	6	City, Stat	dress untain Avenue e, Zip Code ton, NJ 08016		3ox 428		ASBES	TOS (	F 16 67	7		
DOH DCA	Emergency justification) Cancellation	(including	1	Name of				Te	lephone	Numb	er			
Name of Facility Where Burlington Townsh Street Address 610 Fountain Aver	ip High School	g Place (3)		FACIL	ITY INFORMATI	ON	Subc	ol (K-12) hapter 8 (Otl r (i.e. private			buildi	ngs,	nome	S,
City (5) Burlington, NJ 080	116	, 2					Square Fe 10,000	eet # 2	of Floors		10	dg. Ag 00	ge	
County (6) Burlington				County C	code (7) SE ONLY)		Current U School	se (Prior if be	eing dem	olishe	d)			
Name of Monitoring Fire Epic Environmenta		Owner (8)		ASCM	No.			ent Contracto nmental, L						erri Monto
Street Address 1930 Brown Road				I			Address Cutler Av	enue						
City, State, Zip Code Newfield, NJ 0834	4						State, Zip Co le Shade,	ode NJ 08052	2					
Project Manager for Mo Jim Eberts	onitoring Firm			Felephor 856-20	ne No. 5-1077		hone No. 755-0099	)	Licen 0084	se No. 12				
Start Date (10) November 4, 2014	1	Scheduled					of OSHA M SL Labora				,			
Occupancy Status Duri  Facility Closed/Va Abatement Perfor Other – Describe:	cated During Entire med Outside of Norr	Period of Al	oatem	ent		200 City, 5	Address Route 13 State, Zip Chaminson		7					
Scope of Work (Check ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	All That Apply)	- 10	enovat emoliti				Mini-Er Gloveb	ntainment winclosure ag Procedure empted (*) a	e				9	
			ocati									A	ment	
Location Asbestos-Containin TO BE A In Fac (13	ng Material (ACM) BATED cility	Used	ormali Solei ntenar odial S (12)	y by nce/	Asbestos Con (i.e. therma surfa		Material (AC ns insulation AT, or	,	Amount (Specify SF or LF		Removal	Repair	Encapsulate	Enclosure
Lobby C	Corrider		XXX	-	Trar	site Pa	anels		54 SF		Х			
Name of Registered W	aste Hauler		Н	JDEP W auler ID		Yards aste	11.	ame of Regis			nity	land		
Freehold Cartage City, State			15	5939	5 Dispo	sal Date		ity, State	100 00	niiiiu	inty	Lain		
Freehold, NJ Completed by		Title			11/1.	2/2014 Stoppatur	В	irdsboro, I	PA	Date		2014		
Christina Lynch		Opera	LIOII	s Mana	iyei	AVV	2 00	$\leq$	-	- 1 "	1 312	. O 1 T		

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

						AC 8:60 and		MEG		1		n in
Date of Notification (1						Owner / Operato	or (2)		Check #	92	38	
Agencies Notified	Type Notifica			_	of America Address			HI LI NO		201	4	H
□EPA □DEP				609 Li	vingston A	venue		ASEES	T 3,00	177	ROL 8	J š
⊠dol ⊠doh	Initial Amer			2330000 (3	tate & Zip ( runswick,				HULPION	16		
DCA		ellation	8	Name Dino N	of Contact lappi				Teleph	one	Numb	oer
				FA	CILITY IN	FORMATIO	N		-			
Name of Facility Whe Bank of America	re Abatement i	s Taking F	Place (3)			Type of Fa	acility (4) ool (K-12)		×			
Street Address 609 Livingston Aven	ue					Subc	chapter 8 (Other that er (i.e., private &		ldings, h	ome	, etc.	)
City (5)				-		Square Fe	eet # of F		Bldg. A	ge	56	-
New Brunswick		*					se (Prior if being de					
County (6) Middlesex		US	ounty Code	e (7)								
Name of Monitoring F Environmental Testin Street Address	irm Hired by B ng Consultan	uilding Ow ts, LLC	ner (8)		ASCM N	Synatech,		tor (9)				
413 North Black Hors	72.72 TABLE IN PART					Street Add 829 Radio	Road					
City, State & Zip Code Runnemede, NJ 080							& Zip Code Harbor, NJ 0808	7				
Project Manager for M Howard Zenobi				lephone N 6-482-131		Telephone 609-296-6	Number		Number 00	317		
Scheduled Start Date November 10,		Scheduled	Completi	on Date (1ber 10, 20		Name of C Synatech,	OSHA Monitor					
Occupancy Status Du		t (Check o	only one)			Street Add	Iress					
Abatement P Other – Desc	erformed Outs ribe:	ide of Norr				City, State	& Zip Code Harbor, NJ 0808	7				
Scope of Work (Check	pied During Ab				N E							
≥3 sf or ≥ 50 lf ≥160 sf or ≥260				Renovation Demolition Norma	n		Mini-Enclosure Glovebag Proc		ole Proced			t Type
Asbestos-Contain TO BE		ACM)	Solely b	y Mainten dial Staff	ance or	Asbestos Materi	s-Containing al (ACM) mal systems	Amount (Spe SF or LF	ecify	T	ment	Туре
	13)		Yes	No	N/A	insulation, s	surfacing, VAT iscellaneous)		Zellova		Repair	Enclosure
Lobby					X	Floor Tile & Le	veling Compound	140 SF	X	$\dagger$	+	+
Name of Registered V	Vaste Hauler		NJDEP V Hauler ID		Cubic Ya	rds of Waste	Name of Regi	stered Landfill				
Synatech, Inc. City, State				429	3 Disposal	Date	Grows Landf City, State	ill			-	
Little Egg Harbor, NJ	08087				Decembe	er 11, 2014	Morrisville, P	A				
Completed By		Title		10	Signature			Date				
Diane Aloia		Executiv	e Admini	strator	1 Qu	ine lelon	~	November 10, 2	2014			

CK 3338

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

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County (6)	*					53.555										1
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Street Address						0.000	06 McBrid		ue							
PO Box 385		<del></del>				City	, State, Zip Voodland	Code	low lores	v 0742	4					
City, State, Zip Code									LEAN DOLLO	Lice	nse No.				16.	
Oceanville, Nev	v Jersey 08231		Tele	phoni	e No.		ephone No.									
Project Manager for	Monitoring Firm		Tale)	phoni 19-65	e No. 32-183	3 9	73-225-84	.00			1104			-		4
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Project Manager for John Smoyer  Start Date (10)  11 / 14  Occupancy Status Facility Closed Abatement Perf Time of Abatem AM- Scope of Work (Cr. >3 sf or >3 if. >160 sf or >26  Asbestos-Cor	Monitoring Firm  /	(Check only ine Period Chormal Faci 30AM, Sa AM)	Renova Demolii  Is Loc Norm Used S Mainte Custodi  (1)	9-65 illon C interment ints - C intro - C intr	by by by N/A	Asbest	process of the proces	A Monito comment see 22 W p Code ew Jer's Contains -Enclost vebag P -Exemp tion of ng Mater terns ins , VAT, o ellaneou	rest respondent with the reprocedure ted (*) and related (ACM) sulation, in the respondent responde	atories	Pressur able Pro Amoun (Specif SF or L	e cedure it fy F)	Removal 🛛 🗆			Enclosure
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Project Manager for John Smoyer  Start Date (10)  11 / 14  Occupancy Status Facility Closed Abatement Perf Time of Abatem AM- Scope of Work (Cr. >3 sf or >3 if. >160 sf or >26  Asbestos-Cor	Monitoring Firm  /	Check only ire Period of Normal Faci 30AM, Sa	Renova Demoliil  Is Loc Norm Used S Mainte Custodi  (1)	9-65 illon Control of the control of	by by aff?	Asbest (I.e.,	pros-225-84 ame of OSH/ USS Environteet Address 2333 Rout ity, State, Zi Union, Ne  Full Glov Nor  Descriptos Containing thermal sys surfacing other misc	A Monitor onments to 22 W p Code by Jer's Contains - Enclost vebag Programment of my Materian ins , VAT, o ellaneous sulation sulations	rest rey 07083 ment with 1 ure rocedure ted (*) and rial (ACM) sulation, ur	atories Negative	Pressur able Pro Amour (Specifi SF or L	e cedure	Removal 🛛 🗆			Fuciosure
Project Manager for John Smoyer  Start Date (10)  11 / 14  Occupancy Status  Facility Closed  Abatement Port Time of Abaten AM-PM/ Scope of Work (CI  >3 sf or >3 lf  >160 sf or >26  Asbestos-Cor TO  Bathrooms B	Monitoring Firm  / 14  During Abatement ( Vacated During Entrormed Outside of Name of Party PM- Deck all that apply)  O If  Occation of Intalning Material (AC BE ABATED IN Facility (13)  1-B6	CM)	Renova Demolii Is Loc Norm Used S Mainte Custodi ('es' N	9-65 illon Common illon Common illon Common illon Common illon Common illon Common illon i	by b	Asbest (l.e.,	T Cubic Yar	A Monitor onments to 22 W p Code by Jer's Contains - Enclost vebag Programment of my Materian ins , VAT, o ellaneous sulation sulations	rest  ey 07083  ment with fure rocedure ted (*) and  rial (ACM) sulation, ir is)	atories Non-Fri	Pressur able Pro Amour (Specifis For L 360 S	e cedure	Removal 🛛 🗆			Fuciosure
Project Manager for John Smoyer  Start Date (10)  11 / 14  Occupancy Status Facility Closed/ Abatement Performe of Abatem AM- PM/ Scope of Work (Ci	Monitoring Firm  /	CM)	Renova Demolii Is Loc Norm Used S Mainte Custodi ('es' N	9-65 illon Common illon Common illon Common illon Common illon Common illon Common illon i	by by aff?  N/A  DESCRIBENT N/	Asbest (I.e.,	Topology and Description Coubic Yard Waste	A Monitor on men's te 22 W p Code ew Jer's Contains -Enclose webs P -Exemp tion of mg Mater terms in terms in terms in terms in the contains of the contains o	rest rey 07083 ment with 1 ure rocedure ted (*) and rial (ACM) sulation, or use of G.R.C.	atories Negative Non-Frii	Pressur able Pro Amour (Specifis For L 360 S	e cedure	Removal 🛛 🗆			Fuciosure
Project Manager for John Smoyer  Start Date (10)  11	Monitoring Firm  /	CM)	Renova Demolii Is Loc Norm Used S Mainte Custodi ('es' N	9-65 illon Common illon Common illon Common illon Common illon Common illon Common illon i	by b	Asbest (I.e.,	Descriptos Coubic Yang Waste 5	A Monitor on men's te 22 W p Code ew Jer's Contains - Enclose vebag P tion of mg Mater terms ins , VAT, o ellaneou sulation day of	tal Labor fest  ey 07083  ment with 1 ure rocedure ted (*) and rial (ACM) sulation, ir us)  Name of G.R.C	atories  Non-Fri  Registel  O.W.S L	Inc. Pressur able Pro Amour (Specif SF or L 360 S	e cedure	Removal 🛛 🗆 🗆			Enclosure
Project Manager for John Smoyer  Start Date (10)  11 / 14  Occupancy Status Facility Closed Abatement Perf Time of Abatem AM- PM/ Scope of Work (Ci >3 sf or >3 if >160 sf or >26  Asbestos-Cor TO  Bathrooms	Monitoring Firm  /	Check only ire Period of Normal Faci 30AM, Sa	Renova Demolii Is Loc Norm Used S Mainte Custodi ('es' N	9-65 illon Common illon Common illon Common illon Common illon Common illon Common illon i	by by aff?  N/A  DESCRIBENT N/	Asbest (I.e.,	Topology and Description Coubic Yard Waste	A Monitor on men's te 22 W p Code ew Jer's Contains - Enclose vebag P tion of mg Mater terms ins , VAT, o ellaneou sulation day of	tal Labor fest  ey 07083  ment with 1 ure rocedure ted (*) and rial (ACM) sulation, ir us)  Name of G.R.C	atories Negative Non-Frii	Inc. Pressur able Pro Amour (Specif SF or L 360 S	e cedure it fy F)	Removal 🛛 🗆 🗆			Enclosure
Project Manager for John Smoyer  Start Date (10)  11 / 14  Occupancy Status  Facility Closed  Abatement Perf Time of Abaten  AM- Scope of Work (CI  >3 sf or >3 lf  >160 sf or >26  Asbestos-Cor TO  Name of Regist Lilich Corp  City, State Woodland	Monitoring Firm  /	Check only ire Period of Normal Faci 30AM, Sa	Renova Demolii	9-65 illon Common illon Common illon Common illon Common illon Common illon Common illon i	by by aff?  N/A  DESCRIBENT N/	Asbest (I.e.,	Tourish Cubic Yarr Waste Disposal I	A Monitor on men's te 22 W p Code ew Jer's Contains - Enclose vebag P tion of mg Mater terms ins , VAT, o ellaneou sulation day of	tal Labor fest  ey 07083  ment with 1 ure rocedure ted (*) and rial (ACM) sulation, ir us)  Name of G.R.C	atories  Non-Fri  Registel  O.W.S L	Inc. Pressur able Pro Amour (Specif SF or L 360 S	e cedure it fy F)	Removal 🛛 🗆 🗆			e Enclosure

ASB-41 MAY 11

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

CK1423

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

Print Form

te of Notification (1)	)			e of Build ie Kopc		r/Operator	(2)	115		NOV 1	3 20	14		7
encies Notified	Type Notification		1,50,100,000,000	et Addres 5 Fulton	s Avenue	•				5013100	CON	TROI	 _ &	-
EPA DEP DOL	Initial Amended Amendment #		City	, State, Z rsey Cit	ip Code y, NJ 07	305					NSIN	<u> </u>		
DOH	Emergency (in justification)  Cancellation	ncluding		ne of Cor sie Kopo					Telep	hone Number	er 			
DCA	L) Carloonation		F	ACILITY	INFORM.	ATION		777 (4)						-
Residential treet Address	ere Abatement is Taking	Place (3)					Sub Sub	ool (K-12) chapter 8 er (i.e. pri	(Othe	r than K-12) commercial	building	js, ho	mes,	
885 Fulton Aven							Square F		# of	Floors	Bidg 65+	. Age		
lersey City, NJ	07305		T Co	ounty Cod	e (7)		40.000.000	Jse (Prior	1	ng demolishe	d)			
county (6) Hudson					ONLY) _									
	Firm Hired by Building (	Owner (8)		ASCM No	0.	Gre		nent Cont onmenta	ractor al Ser	vices, LL(	2			
Street Address						Stree 235	et Address Virginia	Avenue	)					
City, State, Zip Cod	e					City, Jer	State, Zip sey City,	Code NJ 070	52					
Project Manager for	r Monitoring Firm		Te	elephone	No.		phone No. 1-333-88	55		License No 01174	). 			
Start Date (10)		Scheduled		oletion Da	te (11)		ne of OSHA me as ab							
11-4-2014	During Abatement (Che	Water constanting				Stre	et Address	8						
Ed = III Class	d/Vacated During Entire erformed Outside of Nor	Period of Ab	ateme	ent		City	, State, Zip	Code						
Scope of Work (Ch ≥3 sf or ≥3 lf × ≥160 sf or ≥2	neck All That Apply)	The second second	enovat				× Mini	-Enclosur	re ocedure	th Negative F e nd Non-Frial			e	
		le l	ocatio	on			14011	<u> </u>				Abate Ty	ment	
Asbestos-Con TO	ocation of taining Material (ACM) BE ABATED In Facility (13)	N Used Mair	ormall Solei ntenar odial S (12)	ly ly by nce/	Asbesto (i.e. t	s Containir		(ACM) tion,	59	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Lincipagio
		Yes	No	N/A		nine ins	sulation		-	90 LF	x			+
В	asement		X			pipe ins	Sulation							ļ
						e.			-			-	-	+
Name of Registe	red Waste Hauler			NJDEP W Hauler ID		Cubic Ya				istered Land S. North La			-	
Green Enviror	nmental Services, L	LC	1 1	034889		2 Disposal		City, S	tate		atrum	-3000 - 30		_
City, State Jersey City, N	IJ	**				11-4-20	)14	Morri	sville	·	Date .			
		Title				Sign	ature	11			11-3-			

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

rate of Notification (1)			e of Bui .E.G.	Iding Owne	r/Operat	or (2)	201	4 NOV 13 AP		7		
gencies Notified Type Notification  Type Notification  Initial		400		ess OLEY RC Zip Code	DA D			BESTAS CO & LICENSI	UTR			4
DEP Amended Amendment #_ Emergency (incl	2 udina	so	UTH F	PLAINFIE				Telephone Number				4
DOH justification justification		J	of Co	N K	12 ATION	LiA	N				1	_
Name of Facility Where Abatement is Taking P	lace (3)		nece .	1 110 0 111			of Facility (4) School (K=12)					
Street Address	1	25				×	Subchapter 8 Other (i.e. priv	(Other than K-12) rate & commercial b	ouilding	s, ho	mes,	_
Street Address  295 BERGE  City (5)	N-/	UR	NR	RE	A.A.Y.		etc.) are Feet	# of Floors		Age / A		
RIDGEFIELD	1			de (7) E ONLY)		Curre	ent Use (Prior	if being demolished		.,-		
Rame of Monitoring Firm Hired by Building Ow	mer (8)	T P	SCM N		Na	ame of Ab	atement Contr					
ENVIRONMENTAL TACTICS Street Address			0045		C+	root Addre	988					
64 BROAD-STREET					Ci	tv. State,	Zip Code	VE				$\dashv$
City, State, Zip Code MATAWAN, NJ 07747		I Tel	lephone	No.	Te	elephone	RIVER, NJ	License No.				
Project Manager for Monitoring Firm TOM GEIGER	Scheduled	73	32-292	2-2217	- N	32-432- ame of O	SHA Monitor	01111				
9/19/14	121	31	//	4	L	JNIQUE	SYSTEMS	OF AMERICA				
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire Pe	eriod of Ab	atemer	nt		3	396 WH	TEHEAD A	VE.				
Abatement Performed Outside of Norma Other – Describe: 047 Soc R	il racility r	Hours			- ]	SOUTH	RIVER, NJ	08882				
Scope of Work (Check All That Apply)  ≥3 sf or ≥3 If ≥160 sf or ≥260 If		enovatio emolitio				H	Mini-Enclosure	ent with Negative P cedure d (*) and Non-Friab			e	
	le l	ocatio	n			<u> </u>	Non-Exemple	1,74	1	Abate Ty	ment	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	N Used Mai	ormally Solely ntenano odial St (12)	by ce/	(i.e. t	s Contai hermal s surfaci	ription of ining Mate ystems in ng, VAT, o scellaneo	DΓ	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
, , ,	Yes	No	N/A		-A	0	61-	15 LF	- ×			-
outbooks		<u>×</u>		ACM	Pipe	500	mastic	13 61				F
						-			+			
Name of Registered Waste Hauler			JDEP V		Cubic '			f Registered Landfi	H			
WASTE MANAGEMENT			lauler II 1125	) No.	of Was	49	City, St.	VS NORTH				
City, State ELIZABETH, NJ					1	BS	MORE	RISVILLE, PA	Date /	· ,	1	
Completed by CAROL RAIMO	Title OFF	ICE N	/IGR.		2	are	ella	ina	11/.	7/	19	1

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

OFEN NOTIFICATION

Date of Notification (1),	Name of Br P.S.E.G.	uilding Owner/Operator	(2)				
Agencies Notified Type Notification	Street Addi	ress DLEY ROAD					
EPA [ ] Initial Amended Amendment	City, State,		07080				
DOH Emergency (in justification)  DCA Cancellation	Jo I	HN MAR	oTTE	Telephone Num	h-		
Name of Facility Where Abatement is Taking  PSEAG  Street Address  MHASS - 495	Place (3)	T. and A. C.	図 Other (i.e. priva	Other than K-12 ate & commercia		ngs, i	nomes,
City (5) RIDGEFIELD	PARKEN 1	uenpire	etc.) Square Feet	# of Floors		dg. Ag	
County (6) BEGEN	County God (STATE USE	E ONLY)	Current Use (Prior if		1	T	6.4
Name of Wonitoring Firm Hired by Building C ENVIRONMENTAL TACTICS	wner (8) ASCM N 0045	UNIC	of Abatement Contra QUE SYSTEMS C				
Street Address 64 BROAD STREET		396	Address WHITEHEAD AV	E.			
City, State, Zip Code MATAWAN, NJ 07747		sou	state, Zip Code ITH RIVER, NJ 08	3882			
Project Manager for Monitoring Firm TOM GEIGER	Telephane   732-292-	-2217 732-	none No. 432–8350	License No			
7/17/14	Scheduled Completion Dat		of OSHA Monitor QUE SYSTEMS C	OF AMERICA			1
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire P	A 100 A		Address WHITEHEAD AVI	Ε.			
Abatement Performed Outside of Normal Other – Describe: 247 basef	al Facility Hours		itate, Zip Code TH RIVER, NJ 08	8882			
Scope of Work (Check All That Apply)  ≥3 sf or ≥3 if ≥160 sf or ≥260 if	Renovation Demolition		Full Containment Mini-Enclosure Glovebag Procede Non-Exempted (*)	ure			2 17 17 17 17 17 17 17 17 17 17 17 17 17
	ls Location Normally			-		bater Typ	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Hood Calaly by	Description Asbestos Containing M (i.e. thermal systems surfacing, VA other miscellar	faterial (ACM) s insulation. T, or	Amount (Specify SF or LF)	Removal	Repair	Enclosure
	Yes No N/A	Ŷ.				_	ਕ   <sup>5</sup>
OUTDOORS		acm Pips	Samastia	15 G	X		100 000 000 000 000 000 000 000 000 000
						-	
Name of Registered Waste Hauler WASTE MANAGEMENT	NJDEP Was Hauler ID No 1125	The state of the s	GROWS N	gislered Landfill NORTH		j	
City, State ELIZABETH, NJ	1	Disposal Date	City, State	ILLE, PA			
Completed by CAROL RAIMO	OFFICE MGR.	Signature		Date /	0/	91	14

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

Date of Notification (1)	1		Name P.S.E	of Building	Owner	/Operato	or (2)						
Agencies Notified T	ype Notification		Street	Address	ACT N	·		-					
☐ EPA □	Initial			HADLE		4D							
DEP DOL	Amended Amendment#		City, S	tate, Zip C TH PLA	ode	D NI	07090						
⊠ DOH	Emergency (includi	ing		of Contac	A LINE OF THE PARTY OF THE PART	D, NJ.	07080	Tele	abasa N				
DGA	justification)  Cancellation		~	OHN		145	LOTTE	i ele	phone N	umber		-	
			FAC	CILITY IN	ORMAT	HON NOIL	0110		W 80	e-			
Name of Facility Where Abo	atement is Taking Place	e (3)					Type of Facility	(4)					
Street Address	6						School (K-						2020174010
	200 10	4 6	٦ , س	70	1 A 1		Subchapte Other (i.e.	r 8 (Othe private &	r than K- commer	·12) cial bui	ildinas	: hom	nes.
0111111	295 BE	266	30	1 ch R	UP.I	(E	etc.) Square Feet						
RIDGE !	FIELD PA	Pek	/				N/A		Floors J/A		Bldg.	Age / /	,
Odditty (d)		1 1001	County	Code (7)	W.		Current Use (Pr			ished)	-	1 1	
	EN			USE ONL	y)			N/A					
Name of Monitoring Firm Hi ENVIRONMENTAL TA	red by Building Owner	(8)	4	M No. 045		Name	of Abatement Co	ntractor (	9)		1/2-111		
Street Address			1 00	J43		1	QUE SYSTEM	15 OF A	WERIC	JA ———			
64 BROAD STREET							WHITEHEAD .	AVF					
City, State, Zip Code							State, Zip Code		_	-			
MATAWAN, NJ 07747							JTH RIVER, N.	J 08882	2				
Project Manager for Monitor TOM GEIGER	ing Firm	•		one No. 192-2217			hone No. -432-8350		License				
Start Date (10)	Sched	uled Cor		Date (11)		1	of OSHA Monitor		011	11			
9/17/19	7 1	0/		14			QUE SYSTEM		MERIC	A			
Occupancy Status During Al	2	One)		•		100000000000000000000000000000000000000	Address						
Facility Closed/Vacated Abatement Performed	During Entire Period of	f Abaten	nent			the same of the	WHITEHEAD A	AVE.					
Other - Describe: 2	ut beeks	illy Hours	S				State, Zip Code JTH RIVER, N.	1 00000					
Scope of Work (Check All Tr	nat Apply)			-		1 300	THE RIVER, NO	00002					
≥3 sf or ≥3 lf	圆	Renova	ition			Ε	Full Containme	ent with h	lensii.c	Drocon			
≥160 sf or ≥260 lf		Demolit	ion			-	Mini-Enclosure	3	vegauve	1 16330	10		
							Glovebag Prod Non-Exempted	cedure d (*) and	Non-Fria	ble Pro	cedu	'e	
		Is Locati								1	Abat	emen	t
Location of Asbestos-Containing Mai	rerial (ACM) Us	Normal sed Sole		0-1		scription				-	13	pe	1
TO BE ABATE	D IV	laintenar Istodial S					iaterial (ACM) s insulation,		ount ecify	73	_	En	m
In Facility (13)		(12)	ACTIL:			cing, VA niscellar			r LÉ)	Removal	Repair	sclet	Enclosure
	Yes	No	N/A		Othor I	inocenai	leddaj			val	=	Encapsulate	ure
outbooks	1 00000	X	1	100		1 4 2			, 62	100	_		
_ DAI DOOKS		10		ACI	TI P	#5	Somastie	/	5	X			
		+											
		-											
Name of Registered Waste H	auler	1 61	IDED ::	(nair									
WASTE MANAGEMEN		H	JDEP W auler ID	100 CT - 100 CT   100	Oubic of Was	-	Name of F	11.11.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.					
City. State		1	125	(A)	APPS				Н				
ELIZABETH, NJ					and the state of t	al Date	City, State		D				
Completed by	Title					13 Dignature							
CAROL RÁIMO		ICE M	GR.		3	Guarale	ech La	0	2) 0	ite 9/	6	10	
						- Elita	16	1860	-	1 10	3,1	17	e 1

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

					1 7				111	Ш		
Date of Notification (1) 11/7/2014 Check #2694		The second secon	Building Owner Builders	/Operator	(2)	NOV	1 3 2	014				
Agencies Notified Type Notifica	ition	Street Ad 545 Ne	dress w Jersey 17	#2005		ASBESTO	e con	IOST	8			
DEP Amende  DOL Amende	ment #		e, Zip Code vood, NJ 074	150		LIC	ENSING	3				
Emerge justificat		Name of Mr Sok	Contact ol Lumaj		Co.	Telephan- *	lb a.a					
			ITY INFORMA	TION		1				-		
Name of Facility Where Abatement is T Residence	Taking Place (3)	T A GIL			Type of Facility (4							
Street Address 221 Brookside Avenue			The state of the s		Subchapter of Other (i.e. pr	2) 8 (Other than K rivate & comme		lings,	home	es,		
City (5) Cresskill, NJ 07626					etc.) Square Feet 2,000	# of Floors	91 368	ldg. A	ge			
County (6)		County C	Code (7)		Current Use (Prio Residence							
BERGEN  Name of Monitoring Firm Hired by Build	ding Owner (8)	ASCM		tractor (9)				_				
N/A Street Address					Services Corpor	ation						
			426 69th Street  City, State, Zip Code									
City, State, Zip Code			3									
Project Manager for Monitoring Firm		Telephor	ne No.		hone No. 295-1700	License No. 01074						
Start Date (10) 11/17/2014	Scheduled C	-	Date (11)	0.000	of OSHA Monitor							
Occupancy Status During Abatement (	Check Only One)		THE THE STATE OF T	Street	Address	Ove						
Facility Closed/Vacated During Ending Abatement Performed Outside of Other – Describe: Start at 7:30 Al	Normal Facility Hor			City, S	State, Zip Code				-			
Scope of Work (Check All That Apply)	West   We											
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	The second secon	vation olition			Full Containme Mini-Enclosure Glovebag Prod Non-Exempted	edure			e			
	Is Loc				THOM Examples	( ) and Henri		Abate	navarra da	į		
Location of	Norm Used So			Descriptio				Τ,				
Asbestos-Containing Material (ACI TO BE ABATED In Facility (13)	Maintel Custodia (1: Yes N	nance/ al Staff? 2)	(i.e. therm			Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure		
Exterior	163 14	X	Tr	ansite s	iding	2,700 SF	x					
Name of Registered Waste Hauler		NJDEP W		oic Yards	Name of	Registered Lan	dfill					
Freehold Carting		Hauler ID 15939	tbd			S North Lan	dfill					
City, State Freehold, NJ			Dis tbd	posal Dat	e City, State							
Completed by Gina Salvador Title Office Ma				Signatu	e Blue	es	Date 11/7/2	014	17			