State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (2011) A Compared to NJAC 8:60 and 5:16)

Date of Notification (1)	24 /	12	20098		Nam Pr	e of Buildir inceton U	ig Ow J nive	ner/Operator (2 ersity-Office	or dealthyand	Construction					
Agencies Notified	Type Notifica	ation			Stree	t Address			LICEN	PH 10: 30					-
⊠ EPA			040		20	0 Elm Dr.			* STITE	2. 22					
☑ DOLWD °					City.	State, Zip	Code		& LICE!	CONTRA		_			
□ DHSS	Amendme	1000			1	inceton,		3544	- OTA	SINGHAL					
□ DCA (NJAC 5:23-8)	☐ Emergend justification		luding	l.		e of Conta				Telephone Nu	mber			191	
(NJAC 5.25-6)	☐ Cancellat	3 3 7 5				bert Orte				100000000000000000000000000000000000000					
				- 10-44	1			RMATION							
Name of Facility Where A	Abatement is T	aking	Place	(3)			12.0		Type of Facility	(4)		_			
Princeton Universit									School (K-12						
Street Address									Subchapter 8						
Washington Rd.									Other (i.e., p homes, etc.)		nercial	bui	lding	s,	
City (5)									Square Feet	# of Floors		Bld	g. Ag	ge	
Princeton															
County (6)					Cou	nty Code (7)(STA	TE USE ONLY)	Current Use (Pr	ior if being demo	olished)			
MERCER						370	500 BBW			878					
Name of Monitoring Firm	Hired by Build	ling O	wner (8)	ASCN	No.	Na	me of Abateme	ent Contractor (9)	Name of the second					
ATC Associates Inc	3.				000	98	E	BRISTOL EN	VIRONMENTA	L, INC.					
Street Address		1200-030	7			*****	Str	eet Address				22.00			
3 Terri Lane							1	123 BEAVE	R STREET						
City, State, Zip Code								y, State, Zip Co							
Burlington,NJ 0801				T= .				BRISTOL, PA	19007	·					
Project Manager for Moni Michael Keehn	itoring Firm			0.00	ephone	No. 6-8800	1000	ephone No. 215-788-6040		License No. 00509					
Start Date (10)	To	chadi	ulad C			ate (11)	-	me of OSHA M		00303					-
8 / 13 /						12			VIRONMENTA	L, INC.					
Occupancy Status During		Check	only o	ne)			3200	eet Address							
☐ Facility Closed/Vacate	하다. 이 경우당 그 그리는 열광				ement		1	123 BEAVE	R STREET						
☐ Abatement Performed			27000000000	Contraction of the contraction o		scribe		y, State, Zip Co							
Time of Abatement: 7	:00AM- <u>3:30</u> F	M/	PI	M	AN	1	E	BRISTOL, PA	19007						
Scope of Work (Check all	that apply)							M F.: II C	ainment with Neo	nativa Desagues					
☐ ≥3 sf or ≥3 lf			⊠ Re	nova	tion			☐ Mini-Enc		gative Pressure					
⊠ ≥160 sf or ≥260 lf			De					Glovebag	g Procedure						
								☐ Non-Exe	mpted (*) and No	n-Friable Proced		_			
1			2.000	Loca				Description of			-			ent T	-
Location Asbestos-Containing	27.5	0	Use	d So	ely by	Asb	estos	Containing Ma	0.10	Amount	3	Pamoval	Repair	띩	Enclosure
TO BE ABA	TED	'			ance/ Staff?		e., the	ermal systems	insulation,	(Specify	3	[]	air	aps	Sol
IN Facili	ty		Cus	(12				surfacing, VAT, her miscellane		SF or LF)	2	2		Encapsulate	īe
(13)		Ī	Yes	No		7	Ü.	ilei illiscellarie	ous)					e	
Basement - Mens & V	Vomens			\boxtimes		Pipe &	Fitti	ngs		35 LF	D	3			
	Restrooms	5		×		Asbes	tos D	Debris on Ce	iling	240 SF	D	3			
]			
]			
Name of Registered Was	te Hauler					Waste	Cul	bic Yards of	Name of Regis	stered Landfill					
SERVICE TRANSPO		INC		1	Hauler 2099	ID No.	Wa	ste	G.R.O.W.S	. LANDFILL					
City, State		-h 535-28					Dis	posal Date	City, State	17					
NEW CASTLE, DE									MORRISVI	LLE, PA 1906	7				
Completed By (Print or T)	ype)	Title						Signature			Date	/	/	e e e	-
Brian Scafiro		Es	tima	tor				Brian	Scopiro,	12	111	18	1/10	2	- 35

ASB-41 MAY 11 BS/2076

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

| E MONDAY 11/12/12 SITE ** * OFF

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

Date of Notification (1)					(P				:60 and 5:10	. 27	#2372					
20 Em Dr. 20 E	Date of Notification (1)					Name	e of Building	g Ow	ner/Operator (2)	PEHE	1.)				
20 Em Dr. 20 E		24 /	12	400		Pri	nceton U	Inive	rsity-Office	of Design and	Constructio	n				
20 Em Dr. 20 E			ation			Stree	t Address			- 1101	TH PMID	: 35				
Name of Facility Where Absternent is Taking Piaco (3)				1					£.	ASHFET	ne sh.					
Name of Facility Where Abatement is Taking Piace (3)	Liver and the second se		T	44101	42	City,	State, Zip C	Code		211	COMIT	701				
Name of Facility Where Abatement is Taking Piace (3)	1000-00					Pri	nceton, N	30 LP	3544	C LI	PENSING	200				
Steel Address		justificati	ion)	uuiiig		Name	of Contac	t								
Name of Facility Where Abatement is Taking Place (3)	W.e.	☐ Cancella	tion			Ro	bert Orte	ga				3				
School (K-12) Street Address						FA	CILITY IN	FOR	RMATION							
Subchapter 8 (Other han K-12) Clay (5) Clay (6)				Place	(3)					Type of Facility	(4)					
Other (i.e., private and commercial buildings, homes, etc.) City (5) Princeton Square Feet # of Floors Bidg. Age	Princeton University	y-Jadwin H	lall													
Mashington Rd.	Street Address						// No-sum/Wild 2 +1-202						l bi	ilding	10	
Princeton County (6) MERCER County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) MERCER Name of Monitoring Firm Hired by Building Owner (8) ASCM No. 00098 BRISTOL ENVIRONMENTAL, INC. Street Address Street Address 1123 BEAVER STREET Street Address Street Address 1123 BEAVER STREET Street Address Street Addres	Washington Rd.													a.	,,,	
County (6) MERCER MERCER Mare of Monitoring Firm Hired by Building Owner (8) ACC Associates Inc. Street Address 3 Terri Lane City, State, Zip Code Burlington, NJ 08016 Burlington, NJ 08016 Street Address 3 1 12 3 BEAVER STREET City, State, Zip Code Burlington, NJ 08016 Burlington, NJ 08016 Street Address 3 1 12 3 1 12 12 24 / 12 BRISTOL, PA 19007 Cocupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement Performed Outside of Normal Facility Close Status During Abatement (Check only one) Asbestos-Containing Material (ACM) IO BE ABATED IN Facility (13) Yes No N/A Throughout 2 nd floor Throughout 2 nd floor Floor II and Status During Abatement (Check Only one) Place of Normal Value (Check all that apply) Floor tile and mastic 29,017 SF Orle) Plaster Abatement Procedure Plaster Non-Exempted (*) and Non-Friable Procedure Abatement Procedure Abat	City (5)	Wallians .						XXXXX-2		Square Feet	# of Floors		Bl	dg. A	ge	
MERCER Name of Monitoring Firm Hired by Building Owner (8)																
Name of Monitoring Firm Hired by Building Owner (8) ASCM No. 00098 ATC Associates Inc. Street Address 3 Terri Lane 1123 BEAVER STREET City, State, Zip Code Burlington, NJ 08016 Project Manager for Monitoring Firm Michael Keehn Michael Keehn Start Date (10) Scheduled Completion Date (11) Name of SHA Monitor B / 13 / 12	County (6)					Cou	nty Code (7	7)(STA	TE USE ONLY)	Current Use (Pri	or if being dem	nolishe	d)	37,27		Section
ATC Associates Inc.								West in Titl								
Street Address Street Address 1123 BEAVER STREET	All the state of t	•	ding Ov	vner (3)	0.0000000000000000000000000000000000000		1		30.5						
3 Terri Lane						000	98	В	RISTOL EN	VIRONMENTA	L, INC.					
City, State, Zip Code Burlington,NJ 08016 Project Manager for Monitoring Firm Michael Keehn Start Date (10) 8 / 13 / 12 Scheduled Completion Date (11) 12 / 24 / 12 Scheduled Completion Date (11) 15 / 12 / 24 / 12 Scheduled Completion Date (11) 16 / 18 / 13 / 12 Scheduled Completion Date (11) 17 / 12 / 24 / 12 Scheduled Completion Date (11) 18 / 10 / 12 / 12 / 12 Scheduled Completion Date (11) 19 / 12 / 12 / 12 Scheduled Completion Date (11) 19 / 12 / 12 Scheduled Completion Date (11) 19 / 12 / 12 Scheduled Completion Date (11) 19 / 12 / 12 Scheduled Completion Date (11) 19 / 12 / 12 Scheduled Completion Date (11) 19 / 12 / 12 Scheduled Completion Date (11) 19 / 12 / 12 Scheduled Completion Date (11) 19 / 12 / 12 Scheduled Completion Date (11) 19 / 12 / 12 Scheduled Completion Date (11) 19 / 12 / 12 Street Address Street Address Street Address 11 / 12 / 12 Street Address 11 / 12 / 12 / 12 Street Address 11 / 12 / 12 / 12 Street Address 11 / 12 / 12 / 12 Street Address 11 / 12 / 12 / 12 Street Address 11 / 12 / 12 / 12 Street Address 11 / 12 / 12 / 12 Street Address 11 / 12 / 12 / 12 Street Address 11 / 12 / 12 / 12 Street Address 11 / 12 / 12 / 12 Street Address 11 / 12 / 12 / 12 Street Address 11 / 12 / 12 / 12 Street Address 11 / 12 / 12 / 12 Street Address 11 / 12 / 12 / 12 Street Address 11 / 12 / 12 / 12 Street Address Street A																
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Michael Keehn									VI. A. L.	19007						
Start Date (10) Scheduled Completion Date (11) Some of OSHA Monitor		oring Firm			0.0							•				
B					0						00509					
Occupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement **T:00AM-3:30PM** PMAM** Amount City, State, Zip Code BRISTOL, PA 19007** Scope of Work (Check all that apply) PMAM** Safe or ≥3 if Renovation Demolition Demolition Part of Normally Demolition Demolition Demolition Normally Description of Asbestos-Containing Material (ACM) Normally City, State Signature	The contract of the contract o										a success					
Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: 7:00AM-3:30PW PM PM AM PM					-	4_ / .	12			VIRONMENTAL	_, INC.					
Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: 7:00AM-3:30PM/ PM- AM								2850								72
Time of Abatement: 7:00 AM-3:30 PM PMAM BRISTOL, PA 19007 Scope of Work (Check all that apply) Scope of Work (Check all that apply Procedure Scope of Work (Check all that apply Procedure Scope of Work (Check all that apply) Scope of Work (Check all that apply Procedure Scope of Work (Chec							oribo									
Scope of Work (Check all that apply) Start	Time of Abatement: 7:	00AM-3:30F	PM/	PN	1- -	AM		1	50 50 TO							
Sand or ≥3 if								В	RISTOL, PA	19007						
Saf or ≥3 fr Saf or ≥3 fr Demolition Description of Non-Exempted (*) and Non-Friable Procedure	Scope of Work (Check all	tnat apply)							⊠ Full Cont	ainment with Neg	ative Pressure	re:				
Non-Exempted (*) and Non-Friable Procedure Location of Asbestos-Containing Material (ACM) Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A									☐ Mini-Encl	osure	u					
Sample Location of Asbestos-Containing Material (ACM) Location of Asbestos Containing Material (ACM) Amount (Specify Maintenance/Custodial Staff? (12) Yes No N/A Throughout 2 nd floor	≥160 sf or ≥260 if		L	_ Den	noliti	ion					n-Friable Proce	dura				
Location of Asbestos-Containing Material (ACM) Asbestos-Containing Material (ACM) IO BE ABATED IN Facility (13) Throughout 2 nd floor Throughout 2 nd floor Throughout 2 nd floor Elevator lobby 2 nd floor Elevator lobby 2 nd floor Elevator Registered Waste Hauler SERVICE TRANSPORT GROUP INC City, State NEW CASTLE, DE Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Ploor tile and mastic Pipe Saddles Floor tile and mastic 29,017 SF Pipe Saddles 59 LF Plaster 482 SF Plaster Name of Registered Waste Hauler SERVICE TRANSPORT GROUP INC Signature Disposal Date City, State NEW CASTLE, DE Normally Used Solely by Maintenance/ Custodial Staff? (12) Pescription of Asbestos Containing Material (ACM) (Specify SF or LF) Pipe Saddles 29,017 SF Pipe Saddles 59 LF Plaster 482 SF Plaster Cubic Yards of Waste G.R.O.W.S. LANDFILL Disposal Date City, State NEW CASTLE, DE Completed By (Print or Type) Brian Scafiro Signature Figure Saddles Signature Signature Date Signature Plaster Signature Date Signature Date Signature Plaster Date Signature Date Signature Date	9		T	Is	Loca	ition	T		L HOIT EXC	inpice () and ite	1-1 Habie 1 1000	Judie	Δh	atom	ant T	VDO
Throughout 2 nd floor									Description of	f		-	_			_
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Throughout 2 nd floor	The stand of			-	_	13.75	-					1		_		
Elevator lobby 2 nd floor				-	2000											
Exterior soffits 2 nd floor Name of Registered Waste Hauler SERVICE TRANSPORT GROUP INC City, State NEW CASTLE, DE Completed By (Print or Type) Brian Scafiro Plaster NJDEP Waste Hauler ID No. 20990 Cubic Yards of Waste Cubic Yards of Waste Cubic Yards of Waste Cubic Yards of Waste City, State Disposal Date City, State MORRISVILLE, PA 19067 Signature Date 11/8/13				_				ddle	S			-				
Name of Registered Waste Hauler SERVICE TRANSPORT GROUP INC City, State NEW CASTLE, DE Completed By (Print or Type) Brian Scafiro NJDEP Waste Hauler ID No. 20990 Cubic Yards of Waste Cubic Yards of Waste Cubic Yards of Waste Cubic Yards of Waste G.R.O.W.S. LANDFILL City, State MORRISVILLE, PA 19067 Signature Avan Scafiro Date 11/8/13			-	-	-							-		_		
SERVICE TRANSPORT GROUP INC Hauler ID No. 20990 Waste G.R.O.W.S. LANDFILL													X	Ш	Ш	Ш
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Completed By (Print or Type) Brian Scafiro Title Estimator Signature Date 11/8/12	5.5							5,50	July Date		LE, PA 1906	67				
Brian Scafiro Estimator Prian Scafiro / gl 11/8/12	Completed By (Print or Typ	oe)	Title		-				Signature	, ,	3.		1	,		
			Est	imato	or	<u> </u>			Dian x	Scefiro /	el l		/	8/1	12	

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

	24 /	12		I N	ame of Bu	Iding Owner/Operator	(2) (1) (1) (2) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1					
Agencies Notified ☑ EPA ☑ DOLWD ☑ DHSS	Type Notif		8/0/40		reet Addre 200 Elm ty, State, Z	ss A 235 S Dr. & L	TUS COH	TROL	on			_
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(NJAC 5:23-8)	justifica	ition)	ung		me of Cor			1=:::				
<u> </u>	☐ Cancell	ation			Robert O			Telephone N	umbei	•		
						INFORMATION						
Name of Facility Where	Abatement is	Taking P	lace (3	1)	ACILITY	INFORMATION	1					
Princeton Univers	ity-Jadwin I	Hall		,			Type of Facil		83-24			
Street Address			-				School (K	(-12) er 8 (Other than K-	40)			
Washington Rd.							U Other (i.e.	, private and comp	nercia	l build	dinas	
City (5)							nomes, et	(C.)			90	•
Princeton							Square Feet	# of Floors		Bldg	. Age	•
County (6)		-3		To	Junty Code	/7\/07475 (105 0)						
MERCER				0.	ounty Code	(7)(STATE USE ONLY)	Current Use (Prior if being demo	olished	i)		
Name of Monitoring Firm	Hired by Buil	ding Own	er (8)	ASC	M No.	INDER CO.						
ATC Associates Inc	3.	3 3.00	(0)		M No.	Name of Abateme						_
Street Address				00		BRISTOL EN	VIRONMENT	AL, INC.				
3 Terri Lane						Street Address			S			
City, State, Zip Code						1123 BEAVE						
Burlington,NJ 0801	6					City, State, Zip Co						-
Project Manager for Moni			1+	Nort	- 11	BRISTOL, PA	19007					
Michael Keehn				elephon		Telephone No.		License No.				-
Start Date (10)	Te	cheduled			6-8800	215-788-6040		00509				
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8 / 13 /	12					Name of OSHA Me						
8 / 13 /	12	_12	1 _2			BRISTOL ENV		AL, INC.				
Occupancy Status During Facility Closed/Vacated	Abatement (C	12 Check only	y one)	24 /	12	Street Address	/IRONMENTA	AL, INC.				
Occupancy Status During Facility Closed/Vacated Abatement Performed	Abatement (C d During Entire Outside of No.	12 Check only Period of	y one) of Abat	ement		Street Address 1123 BEAVER	/IRONMENTA	AL, INC.				
Occupancy Status During	Abatement (C d During Entire Outside of No.	12 Check only Period of	y one) of Abat	ement		Street Address 1123 BEAVER City, State, Zip Coo	STREET	AL, INC.				
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Cocupancy Status During Facility Closed/Vacated Abatement Performed Time of Abatement: 7: Cope of Work (Check all of 3 sf or >3 lf >160 sf or >260 lf	Abatement (Cd During Entire Outside of No 00AM-3:30Pl		y one) of Abat lity Hol PM Renova Demolit	ement urs - De AM		Street Address 1123 BEAVER City, State, Zip Coo BRISTOL, PA	STREET de 19007 inment with Nessure Procedure					
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* 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)

7 / 24	/	12			Princet	uilding Owner/Oper	ator ((2)	. 77	PA	110	87		
	e Notificati				- inceto	uilding Owner/Oper	fice	of Design a	nd Constr	ruction	n/U:	38		
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☑ DCA	Emergency	(incl	uding	•	Princeto	n, NJ 08544								
(NUMC 5:23-8)	ustification)		T	Name of Co				1700					
	Cancellation	n			Robert C	rtega			leleph	one Nu	ımbe	r	0	
Name of Facility Where Abater	ment is Tak	cina P	lace /	3)	FACILITY	Y INFORMATION	1				7			_
Princeton University-Ja	dwin Hall		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,			T	Type of Facili	ty (4)					-
Street Address		-						School (K-	-12)					
Washington Rd.								Subchapte	r 8 (Other ti	han K-1	12)	201		
City (5)								Other (i.e., homes, etc	c.)	comm	ercia	l buil	dings	5,
Princeton					9(=3)		1	Square Feet	# of FI	oors		DIda	- A-	_
County (6)													. Age	е
MERCER					County Code	e (7)(STATE USE ONL	7) (Current Use (F	Prior if heing	dome	liaha	-		_
Name of Monitoring Firm Hired	by Buildin-	^	01/01							, 4611101	13116	4)		
ATC Associates Inc.	of Dunaing	Own	er (8)		CM No.	Name of Abate	men	t Contractor (9	9)					
Street Address					0098	BRISTOL	ENVI	RONMENTA	AL. INC					
3 Terri Lane						Street Address	_							
City, State, Zip Code						1123 BEAV	ER:	STREET						
					leves here	City, State, Zip								
Burlington,NJ 08016		-200		-		BRISTOL,								
Project Manager for Monitoring F Michael Keehn	ırm				ne No.	Telephone No.			I incer	- N-				_
		T		609-3	86-8800		-		License	NO.				
Charl Date (40)						215-788-604	40		0000	•				
	Sched	duled	Comp	letion	Date (11)	215-788-604 Name of OSHA		itor	0050	9				_
ON HOLD	. _:	12_	Comp	letion 24		Name of OSHA	Mon			9				_
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Deccupancy Status During Abatem Facility Closed/Vacated During Abatement Performed Outside Time of Abatement: 7:00AM-3 Scope of Work (Check all that app ≥3 sf or ≥3 lf ≤160 sf or ≥260 lf Location of Asbestos-Containing Material (IOBE ABATED IN Facility	nent (Check g Entire Pe e of Normal 3:30 PM/ oly)	I2 k only iriod c Facil R D Use Ma Cus Yes	enova emolitics Local Normal (12) No S	tion ally ely by ance/ Staff?	Asber (i.e Plaster Plaster No.)	Name of OSHA BRISTOL E Street Address 1123 BEAVE City, State, Zip O BRISTOL, P. Full Cor Mini-End Gloveba Non-Exe Description of stos Containing Mat, thermal systems surfacing, VAT other miscellane e and mastic ddles Cubic Yards of Waste Disposal Date	Mon NVIF	RONMENTA TREET OOO7 ment with Neg ire occedure ed (*) and Nor ation, I (ACM) lation,	Amoun (Specif SF or Li 29,017 S 59 LF 482 SF 32 SF red Landfill	ure ocedure it y F)	Removal 🛛 🕅	Repair	Encapsulate	7
Cocupancy Status During Abatem Facility Closed/Vacated During Abatement Performed Outside Time of Abatement: 7:00AM- Cope of Work (Check all that app 23 sf or ≥3 lf 2160 sf or ≥260 lf Location of Asbestos-Containing Material (TO BE ABATED IN Facility (13) LINGUIST (13) ACCUPATION OF THE PROPERTY	nent (Check g Entire Pe e of Normal 3:30PM/ Dly) ACM)	I2 k only iriod c Facil R D Use Ma Cus Yes	comp /	tion ally ely by ance/ Staff?	Asber (i.e Plaster Plaster No.)	Name of OSHA BRISTOL E Street Address 1123 BEAVE City, State, Zip O BRISTOL, P. Street Address 1123 BEAVE City, State, Zip O BRISTOL, P. Description of Stos Containing Manual Systems Surfacing, VAT other miscellane e and mastic ddles Cubic Yards of Waste	Mon NVIF	RONMENTA STREET 0007 ment with Neg ire occedure ed (*) and Nor I (ACM) ation, me of Register S.R.O.W.S. L. 7, State IORRISVILL	Amoun (Specif SF or Li 29,017 S 59 LF 482 SF 32 SF red Landfill	ure ocedure it y F)	Removal 🛛 🕅 🖂	Repair	Encapsulate	

RECEIVED State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT 14 PHOL # 2326
(Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1)	1904	15000			Name of Bi	uilding Owner to	A jor	MIGNE	671	7	2	0
7 / 2	4/	12			Princeto	on University	erator (2)	DE SHOLD CONTRACTOR	-			
Agencies Notified Tv	pe Notific	ation			Ctroot A d I		office of Desi	du sup opparted	tion			
X EPA 32/Y	Initial				Street Addr	ess		WAS INT	-			
☑ DOLWD 5287 ☐ ☐ DHSS 5225	Amende	ď		L		O1.						
	Amendm	ent #_		- 1	City, State,							
41114	Emerger justificati	cy (inc	luding	L	Princeto	n, NJ 08544		* (1)				
1	Cancella	on)			Name of Co			Tolomba				
					Robert C	rtega		Telephone	Numb	er		5,615
Name of Facility Where Above					FACILITY	INFORMATIO	M					
Name of Facility Where Abate Princeton University Ja	ment is 7	aking i	Place	(3)				F 1914				
Street Address	dwin H	all						Facility (4)				
							☐ School	ol (K-12) hapter 8 (Other than				
Washington Rd.							Li Other	(i.e., private and cor	K-12)	al bu	114:	
City (5)								-,	raner CI	ai Du	liaing	s,
Princeton							Square F	eet # of Floors		TBI	lg. Ag	10
County (6)				To	County Code	/7VCTATE LIBER					g	~
MERCER					- conty Coul	(I)(STATE USE OF	VLY) Current U	se (Prior if being der	nolishe	d)		
Name of Monitoring Firm Hired	by Buildi	ng Ow	ner (A)		CM No.					-/		
ATC Associates Inc.	one T ara en 1944 an Tal		. (0)			Name of Aba	tement Contrac	tor (9)				
Street Address					8600	BRISTOL	ENVIRONME	NTAL, INC				
3 Terri Lane						Street Addres	s					
City, State, Zip Code						1123 BEA	VER STREET	•				2500
Burlington, NJ 08016						City, State, Zi						
Project Manager for Monitoring F	-					BRISTOL,						
Michael Keehn	-irm		1	elepho		Telephone No						
				609-3	86-8800	215-788-60		License No.			_	
tart Date (10)	Sch	eduled	Com	pletion	Date (11)	Name of OSH		00509				12
8 / 7 / 12	. _	12	/	24	_12					_		
ccupancy Status During Abaten	nent (Che	ck onl	v one			DIGIOLI	ENVIRONMEN	ITAL, INC.				
Facility Closed/Vacated During	Entire D	orian .				Street Address						
Abatement Performed ()utside	of Alarm	-1 F					ER STREET					
Time of Abatement: 7:00AM-	3:30PM/		PM	AI	A	City, State, Zip						
ope of Work (Check all that app	(v)					BRISTOL,	A 19007					
A.A.	.97											
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		⊠ R	enova	ition		⊠ Full Co	ntainment with	Negative Pressure				
≥ 100 St 01 ≥200 II			emoli	tion			ociosure ag Procedure					
						☐ Non-Ex	empted (*) and	Non-Friable Procedu				
Location of			s Loca Norm				. (/	Tiable Procedi				
Asbestos-Containing Material (ACM)	Us	ed So	lely by	1	Description	of		Ab	atem	ent T	ype
TO BE ABATED		Ma	inten	ance/	Asbes	tos Containing M	aterial /A Cta	Amount	20	R	m	П
IN Facility (13)		Cus		Staff?	(1.6.	thermal systems surfacing, VAT	insulation,	(Specify	Removal	Repair	Ca	Enclosure
(15)		V	(12)		-	other miscelland	, or eous)	SF or LF)	Na.	=	Encapsulate	Sur
and and a		Yes	No	N/A	Lances		,000,				late	9
oughout 2 nd floor			\boxtimes		Floor tile	and mastic			1			
oughout 2 nd floor			×					29,017 SF				П
ator lobby 2 nd floor				+	Pipe Sad	dies		59 LF	Ø			一
					Plaster			 	+	븨	븨	Ш
rior soffits 2 nd floor			\boxtimes		Plaster			482 SF	X			
of Registered Waste Hauler				JDEP V		V. b. 1.		32 SF	Ø			
ISTOL ENVIRONMENTAL,	INC.		H	auler ID		ubic Yards of Vaste	Name of Regi	stered Landfill				<u></u>
State	The second second			18706		- 5516	G.R.O.W.S	. LANDFILL				
STOL, PA 19007					D	isposal Date	City, State					
		10 B			- 1	various en la social de la seconda de la sec			S-0-1			
eted By (Print or Type)	Title					Signature	OKKISVI	LLE, PA 19067				
n Scafiro												

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

				(F	ursua	nt to NJA	C	8:60 ar	nd 5:10	6)	2012 N	1-3	70	20 20		
Date of Notification (1)					Nam	e of Buildin	g O	wner/Op	erator ((2)	-,	140.4 ·		15	7	
	8 /	12				ustess of	Pri	inceton	Unive	ersity	2812 A	יי עמ	174	- lares	IJ	
Agencies Notified	Type Notific	cation			10000000	t Address						-14	P	410	-	
☐ EPA ☑ DOLWD	☐ Initial		i		E./	A. MacMil	lan	Buildi	ng		A SEEF	770		0.	0	
☑ DOLWD	☐ Amende Amendn	-			City,	State, Zip (Code	е			2	105	Con	irm	200	
□ DCA	☐ Emerge	ncy (in		9		nceton, N		08544			& Telepho	.ICEN	SIA	i i A	01	
(NJAC 5:23-8)	justificat Cancella					e of Contact bert Orte	-				Telepho	ne Numi	oer	-		
			3			CILITY IN		DMATI	ON							
Name of Facility Where A	batement is	Taking	Place	(3)		CILITI	iro	KIVIATI	ON	Type of Facility	(4)				0.00	
Vacant Residential		, and	, , , , , , ,	, (0)						Type of Facility ☐ School (K-1)	0.5.45					
Street Address										Subchapter		an K-12)			
138-140 Alexander	24									Other (i.e., p	rivate and			uildin	gs,	
City (5)	J.									homes, etc.						
Princeton										Square Feet	# of Flo	ors	В	ldg. A	ge	
County (6)			-	23 15.5	Cou	nty Code (7	Vet	ATELIOE	ONLA	2,200	_	d = == = 1! =		50+		
MERCER					Cou	nty Code (/)(31.	AIE USE	ONLY)	Current Use (Pr	nor it being	aemolis	nea)			
Name of Monitoring Firm	Hired by Buil	ding C	wner ((8)	ASCM	No.	Na	ame of A	bateme	ent Contractor (9))		-			
Pennoni Associates	, Inc.						1			VIRONMENTA						
Street Address							St	reet Add	Iress				-			
515 Grove St., Suite	1B							1123 B	EAVER	R STREET						
City, State, Zip Code				1911			Cit	ty, State	, Zip Co	ode						
Haddon Heights, NJ							I	BRISTO	DL, PA	19007						
Project Manager for Monit	oring Firm			1	ephone		Те	lephone	No.		License	No.				
Alan Lloyd				1	56-547			215-788			0050	9				
Start Date (10)	0.80.00					ite (11)	1	ame of O			2.10					
/				1.5		12	E	BRISTO	DL EN	VIRONMENTA	L, INC.					
Occupancy Status During						10000	Str	reet Add	ress			370 to 100				
☐ Facility Closed/Vacated	During Enti	re Per	iod of	Abate	ement		1	1123 BI	EAVER	RSTREET						
Abatement Performed Time of Abatement: 7:	Outside of N	ormal	Facility	/ Hou	rs - Des AM	3.6.25	Cit	y, State,	Zip Co	de			- 110-			
				VI			E	BRISTO)L, PA	19007						
Scope of Work (Check all	that apply)							Mr.	.11.0	-1 M. M. N.						
≥3 sf or ≥3 lf			☐ Rei	novat	ion			⊠ M	ini-Encl	ainment with Neg osure	gative Pres	sure				
≥160 sf or ≥260 lf			□ Der	moliti	on					Procedure	2202000000000000					
			le	Loca	tion			⊠ No	on-Exen	npted (*) and No	n-Friable P	rocedur	_			
Location o	f	.		lorma				Descri	ption of	,			Ab	atem	ent T	ype
Asbestos-Containing M		1)			ely by	Asbes	stos	Contain	ing Mat	erial (ACM)	Amo	unt	Re	Re	m m	m m
TO BE ABAT IN Facility					ance/ Staff?	(i.e.	, the	ermal sy	stems in	nsulation,	(Spec		Removal	Repair	cap	clos
(13)		L		(12)				surfacing ther miso			SF or	LF)	à		Encapsulate	Enclosure
	<u> </u>		Yes	No	N/A		•		Jonanico	,43)					te	
Exterior				\boxtimes		Transite	sh	ingles			4,050	SF				
Thoughout				\boxtimes		Window	ca	ulking			345	_F	×			
Basement				\boxtimes		Flue Pag	kir	ng			1 S	=	×			
2 nd floor bathroom				\boxtimes		Joint co	mp	ound			249 5	SF				
Name of Registered Waste	Hauler			100	JDEP V	200000		bic Yard	s of	Name of Regis	tered Land	fill		-		_
BRISTOL ENVIRONM	IENTAL, IN	IC.		1	18706	0.0000000000000000000000000000000000000	Wa	ste		G.R.O.W.S	NORTH	LANDF	ILL			
City, State					1		Dis	posal Da	ate	City, State						
BRISTOL, PA 19007										MORRISVII	LLE, PA 1	9067				
Completed By (Print or Typ	e)	Title					1.	Signat	ure	1 1	7.	Dat	e /	7	_	1.
Brian Scafiro		Es	timat	or			- 17	Br	ian	Scafiro	/je	11	1/8	//	7	8

ASB-41 MAY 11 B512112

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

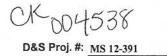
State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

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

Date of Notification (1)					Nan	ne of Buildir	ng O	wner/Operator	(2)	LIVED				
	_ / _	12	_		T	ustees of	Pri	nceton Unive	ersity	ENVED 4 PM 10: 38				
	Notific	ation			Stre	et Address			COLS MAN	4 PMID. Se				
⊠ EPA ⊠ Ini	22				E	A MacMil	lan	Building	4	36	7			
[] [] - [- [nendé	50			1.000	State, Zip			PSESTO	S CONTROL NSING			ŧ	
	nendm		-	•		inceton, I			& LICH	Wall ROL				
☑ DCA	nergen stificati	icy (ir ion)	iciuain	g	-	e of Contac				Telephone Nur	mher			
	incella					bert Orte	550			Tolephone Nul	Tibei			
					F	CILITY I	NFO	RMATION		1				
Name of Facility Where Abatem			53						Type of Facility	(4)				
Princeton University-87 F	rosp	ect S	t. Co	mpu	ter Bu	ilding			School (K-1	2)				
Street Address										8 (Other than K-1 private and comm		سالمان.		
87 Prospect St									homes, etc.		erciai b	uliqin	gs,	
City (5)									Square Feet	# of Floors	В	ldg. A	ge	
Princeton									30,000	3		50+		
County (6)		Co	unty Code (7)(ST	ATE USE ONLY)	Current Use (Pr	rior if being demo	lished)						
MERCER								87						
Name of Monitoring Firm Hired b	(8)	ASC	l No.	Na	ame of Abateme	ent Contractor (9))							
Pennoni Assoicates, Inc.		00	02		BRISTOL EN	VIRONMENTA	L, INC.							
Street Address				St	reet Address									
515 Grove St., Suite 1B					1123 BEAVE									
City, State, Zip Code	Haddon Heights, NJ 08035 Project Manager for Monitoring Firm							ty, State, Zip Co					832-03	
	Te	lephone	No.	-	BRISTOL, PA	19007	License No.							
Alan Lloyd				1		7-0505	100000	215-788-6040	1	00509				
Start Date (10)	15	Sched	uled C	omp	letion D	ate (11)		me of OSHA M	*					<u> </u>
11 /26 /12						_12	1 3 7		VIRONMENTA	L, INC.		20		
Occupancy Status During Abater				000000000000000000000000000000000000000			Str	reet Address					-	_
☐ Facility Closed/Vacated Durin								1123 BEAVER	R STREET					
Abatement Performed Outsid Time of Abatement: 7:00AM	y Hoi	urs - De A		Cit	y, State, Zip Co	ode								
Scope of Work (Check all that ap						IVI		BRISTOL, PA	19007					
3. On the state of	(Fig)							□ Full Cont	ainment with Neg	gative Pressure				
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf			Re De De De Re De Re De Re Re					☐ Mini-Encl	osure	3.3				
ZZ 2100 31 01 2200 11				HIOIII	1011			☐ Glovebag ☐ Non-Exer	g Procedure mpted (*) and No	n-Friable Proced	ure			
				Loca	CONTROL DESIGNATION						Ab	atem	ent T	уре
Location of	/A ON 4			Norm	ally lely by		4	Description of				_	_	
Asbestos-Containing Material TO BE ABATED	(ACM)			ance/	Asbe	stos	Containing Matermal systems i	terial (ACM)	Amount	B B	Repair	nca	ncl
IN Facility			Cust		Staff?	(1.0	.,	surfacing, VAT,	or	(Specify SF or LF)	Removal	=	psu	Enclosure
(13)			V	(12	1	4		her miscellaned			-		Encapsulate	G,
Passers Passer COOP		-	Yes	No	-	+						_		
Basement Room G20B						Firepro	ofin	g		1589 SF				
					\Box									
Name of Registered Waste Haule					NJDEP		2000	oic Yards of	Name of Regis	tered Landfill				
BRISTOL ENVIRONMENT	AL, IN	IC.			Hauler I	2000 Carlot Arrange	Wa	ste	G.R.O.W.S	. NORTH LAND	FILL			0
City, State				10			Dis	posal Date	City, State					
BRISTOL, PA 19007									MORRISVI	LLE, PA 19067				
Completed By (Print or Type)	`.,	Title				2,		Signature	1 3	1 · 1 D	ate /	j.		
Brian Scafiro		Es	timat	or		× °		Brian	Scefero	1-gl .	11/8	110	2	

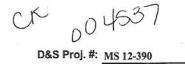
ASB-41 BS 12113

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



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

			Name of	D. ildia a C		=/O====to= (O)				7017 Um	/ 11.	OR	nn.	7.0		
Date of Notification (1 $1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1$.				r/Operator (2)				2012 NO	V 14	rr	10.	63		
	Type Notificati	on		ERS UN	IVE	RSITY				43853	:1115	77	a tu	751		
	Initial		Street Ad			- 1			- (21	İCE	WSI.	ME	W.		
I I DEF	Amended	- 11		SEX STE		T	- Parity									
DOL F	Amendment #:			e, Zip Cod												
	Emergency			ARK, NJ	07	7102			-					-		
□ DOH □ DOH	(including justification)		Name of	Contact						Telepho	ne Nur	nber				
☐ DCA ☐	Cancellation		MICI	HAEL SN	ИΤІ	H		(1-5)								
				F	ACIL	ITY INFORM	ATION	11					<i>3</i>			
Name of facility when	re abatement is	s taking p	lace (3)	2000					T	ype of Facility	(4)	400			-	
HOUSE										Scho	ool (K - :hapter		her th	an K	-12)	
Street Address											r (Priva			rcial		
43 ESSEX STRE	EET								5	Square Feet	# of F	Floors	3	BI	dg. A	ge
City (5)		Co	unty (6)			***************************************		nty Code (7)	_							
NEWARK		E	SSEX				(Stat	te use only)		Current Use (Prior if	being	dem	olishe	ed)	
Name of Monitoring	Firm Hired by I		CV CV CV III JI CV		T	ASCM No.		Name of Abatement	t Cor	tractor (9)						
CARDNO ATC						00098		D & S RESTOR	RAT	ION. INC.						
Street Address					_		-11	Street Address					_			
3 TERRI LANE								20 California A	ve.							
City, State, Zip Code								City, State, Zip Code	9							
BURLINGTON,	NJ 08016					4		Paterson, NJ 0	7503	3						
Project Manager for M				Phone N	umbe	er	-11	Telephone Number			Lice	ense	Numb	er		
BRIAN KEARNI	ξV			609-273	3-80	50		973-345-8020	0			01	169			
Start Date (10)		Sch	ed. Comp	letion Date	100		-1	Name of OSHA Mor		-						
		12/	14/12					D & S Restorat	tion,	Inc.						
11/20/12 Occupancy Status Du	uring Abatemer		14/12	1												
Facility closed/	- A TO THE PROPERTY OF THE PRO	Manager and Section	CONTRACTOR CONTRACTOR					20 California A City, State, Zip Code		ue						
Abatement per								Oity, State, Zip Code	-							
Describe: Other-Describe	NORMAL H	IOURS		-			-11	Paterson, NJ 0	7503	3						
Scope of Work (che										Containment	w/neg	ative	nress	III		
>3 sf or >3 lf		Renova	tion						=	i-enclosure	mnoge			u. 0		
≥160 sf or ≥260	□	Demolit								vebag proced						
△ ≥160 SI 0I ≥20	0 If 🔀			-11	-1-1-				Nor	n-Exempted (*) and N	Von-f	riable R	Proce		-
Location of asbestos-conta	aining			ally used s custodial	olely	I con series	on of a	sbestos-containing		Amount			е	e	E n	E
material (acm)	to be	staff(12	2)			material (spesios-containing		(Specify			m o	p a	c a	n
abated in facili	ty (13)	Yes	No) N	Ά					LF)			V	i	p	L
ENTIRE HOUSE						ENTIRE H	OUSE	E & ALL DEBRIS	-	entire hou	se	-	e	ń		+
ENTIRE HOUSE			╬		=	EITTHE		J W HOD DEDICE	_	- CHILLIC HOU				뉴	片	╁┼
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			#	=					-				금	H	H	H
	- the		+	===	=								Ħ	Ħ	片	十一
Registered Waste Ha		JLINJ	DEP Hau	ıler ID#	С	ubic Yards of \	Vaste	Name of Registere	d La	ndfill		_				1=
D & S RESTORA			3506			50 YDS		TULLYTOWN			ECO	VER	Y			
City, State		74	*	Dispos				City, State					3			
PATERSON, NJ				VA.	KIO	US DATES		TULLYTOWN	, PA	1	15					
Completed by (Print of BOGDAN JOLD		Title PRESI	DENT			Signature					Da	ite /05/1	2		2	
				orm for ask	esto	s licensure ex	emnter	d activities			11	, 03/1				
ASB-41		55 1100	1113 11	10. 031												



ASB-41

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

REAL

									へんした	IVE	ስ			
Date of Notification (1)	N	ame of Build	ding Owne	er/Operator (2)			2017	NOV 14					
$\frac{1}{1}$ $\frac{1}{1}$ $\frac{1}{1}$	/112	11.	JOHN BR	UNO			7		1104 14	PM In:	30			
Agencies Notified	Type Notification	on Si	treet Addres	s			7	心の対	ESTOS O LICENS	(40			
	Amended	- 11	80 VIRGI	NIA AV	ENUE			E	LICEN	UNTR	91 _			
	Amendment #:	C	ity, State, Zi	p Code					- ITC	THE	Ta.			
⊠ DOL [Emergency	-11	CLIFTON	I, NJ 070	011									
☑ DOH	(including justification)	Na	ame of Cont	act					Telephor	e Numbe	1			
☐ DCA	Cancellation		JOHN B	RUNO										
				FACI	LITY INFORM	ATION						e socie	0.5400.000	
Name of facility whe	ere abatement is	taking pla	ice (3)					Тур	e of Facility	(4) ol (K - 12)				
JOHN BRUNO										apter 8 (C		an K	.12)	
Street Address								11		(Private/C			,	
									Bldgs.	/Homes, e	tc.		I . A	
80 VIRGINIA A	VENUE		. (0)					Sq	uare Feet	# of Floo	rs	BI	dg. A	ge
City (5)		Cour	nty (6)			0.35638300	nty Code (7) te use only)	-	urrent Use (P	rior if bein	a dem	oliehe	nd)	
CLIFTON		PAS	SSAIC			(0.0	,,		i) seo manu	nor ii beli	ig dem	Oliono	.u,	
Name of Monitoring	Firm Hired by E				ASCM No.		Name of Abatemen	nt Contr	actor (9)				-	
							D & S RESTO	RATIO	ON, INC.					
Street Address							Street Address							
							20 California	Ave.						
City, State, Zip Code							City, State, Zip Cod	le			27,			f0
							Paterson, NJ			ā.				
Project Manager for I	Monitoring Firm		Pho	ne Numb	er		Telephone Number			License		er	32.	
							973-345-802			1	1169			-
Start Date (10)		Sched	d. Completion	n Date (1	1)	_	Name of OSHA Mo		no					
11/16/12		11/30	0/12				Street Address	auon, 1	nc.			_		
Occupancy Status D	uring Abatemen						20 California	Avenue	e					
Facility closed/	vacated during	entire perio	od of abaten	nent.			City, State, Zip Coo							
Abatement per	formed outside	of normal	facility hours	5-										
Describe: Other-Describe	e: NORMAL H	OURS				_	Paterson, NJ	07503						
Scope of Work (che							<u> </u>	Full C	containment v	w/negative	press	ure		
\boxtimes >3 sf or >3 lf	×	Renovation	on .					_	enclosure					
☐ >160 sf or ≥26		Demolition	n				1		ebag procedu Exempted (*)		-friable	proc	edure	<u> </u>
		Is locatio	n normally u	sed solely	/				p ()		R	R	E	E
Location of asbestos-cont	aining	by mainte	enance/custo		200	on of a	sbestos-containing		Amount		e m	e p	n	n
material (acm) abated in facili		staff(12)			material	(ACM)			(Specify:	SF or	0	a	a	L
abated in facili	ity (13)	Yes	No	N/A					a diseasts		e	r	р	
basement			X		PIPE INSU	JLAT	ION		100 L FT			Ш		
											10			14
											10	빋		山
											-12	닏	닏	井
						.,			Tell			Ш	Ш	
Registered Waste Ha	auler		ËP Hauler II 506	2000	Cubic Yards of \ 1 YD	Waste	Name of Register TULLYTOWN			ECOVE	RY			
City, State				Disposal I			City, State					(4)		
PATERSON, NJ	07503	- 202		11/17/1			TULLYTOW	N, PA						
Completed by (Print		Title			Signature		i			Date 11/06	/12			
BOGDAN JOLD		PRESID					J - 12 12 -			11/06	/12		-	
ASR-41		Do not us	e this form f	or asbest	os licensure ex	empte	d activities.							

CK 22484

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

WECEIAED

1					Name of B	uilding C	wner/Ope	rator (2)					
Date of Notification (1)					Home Pro	opertie	s, LP	2012	NON ?	14 P	M IO:	iL	
11/08/2012					Street Add	ress							
Agencies Notified		Notification	ype		25 Comm	nerce D	rive	A 47	EST	70 00	1190	751	
	*	(X)Initial No	tification	,	City, State	. Zip Coo	de		2 110	JO UU	MIKI	9L.	
(X) EPA	- 1	() Amended	Notification	1	Cranford				& LIC	(CM3)	NG		_
(X) DOL	- 1	() Cancelle	d		Name of C	ontact			Phone	(American)			1
(X) DOH () DCA		, ,			Craig Ma	rschke							
() BOX				FACILITY IN							-		
		-Line Diego /	2)	FACILITY IN	Type of Fa	cility (4)							
Name of Facility Where Ab	atement is 1	aking Place (6722		() School	(K-12)							
Lakeview Apartments	- Building	iler House	, 0, 7, 0, G (Storage F	(mom)	() Cubaba	ntor Q /o	ther than	K-12)		t- \			1
	North Bo	lier nouse	(Storage I		(X) Other	(i.e. priv	ate & com	mercial bldg	s., nome	es, etc.)			
Street Address	- t #O Dlask	204)					OF /4-4-	al 8 Building	ne) No	of Floo	rs: 2		
96 E Lakeview Ave (L	Ot #3 BIOCK	204)	County Co	de (7)	Sq. Feet:	60,000	SF (tota	al o Bullully	13/ 140	011.00			
City (5)	County (6)		(State Use		Bldg. Age	. 49 100	re						1
Leonia	Union		(State Use	, 0,,	Blag. Age	co (prior	if being d	emolished)	Residen	tial Apa	rtment	S	
					Current	se (prior			1				
			ACCM No				TI	lame of Cor	tractor (9)			
Name of Monitoring Firm	nvironmental Health Investigations, Inc reet Address 55 West ShoreTrail ity, State, Zip Code parta, NJ 07871 roject Manager for Monitoring Firm Telephone Number						1 5	Superior Ab	atement	, Inc.			
Environmental Health	reet Address 55 West ShoreTrail ty, State, Zip Code parta, NJ 07871 oject Manager for Monitoring Firm O Von Doehren Telephone Number (973) 729-5649												
Street Address	reet Address 5 West ShoreTrail Ty, State, Zip Code Darta, NJ 07871 Oject Manager for Monitoring Firm O Von Doehren Cheduled Start Date (10) O 140 Telephone Number (973) 729-5649 Scheduled Completion Date (10)						ve, Ste A						
655 West ShoreTrail	seet Address 5 West ShoreTrail y, State, Zip Code arta, NJ 07871 oject Manager for Monitoring Firm Von Doehren Telephone Number (973) 729-5649 heduled Start Date (10) Scheduled Completion Date (de						
City, State, Zip Code	ty, State, Zip Code parta, NJ 07871 oject Manager for Monitoring Firm O Von Doehren Telephone Number (973) 729-5649 Scheduled Start Date (10) Scheduled Completion Date (12/21/2012						J 07006						
Sparta, NJ 07871		Talanhana	Number		Telephon					Numbe	er		
Project Manager for Moni	toring Firm	relephone	E640		(973) 808	-1616		1	00411				
JP Von Doehren		(9/3) /29	-30-49							_			
- i i i i Ot- + Data (10	\	Scheduled	Completion	Date (11)	Name of	OSHA M	Ionitor						
Scheduled Start Date (10)				Superior	Abatem	nent, Inc.						
Ossumency Status During	Abatement (Check only o	ne)		Street Ad	Idress	- C4- A						
() Engility Closed \/acate	ad During Ent	ire Period Oi /	ADALEITIETT		2 Hender	rson Dri	ve, Ste. A						
1 1 At -t and Dorformor	Outcide of N	lormal Facility	Hours -			7:- 0	- do						
(W.) Other Deporths: Mi	ark will be no	ertormed Wh	ile bullulliy	is occupied.	City, Stat West Ca	e, Zip Ci	00e						
Construction barriers w	ill be placed	to isolate th	e work area	is from the	west Ca	iaweii, i	49 01000						
Occupied portion of the	building.												
Source of Work (Check a	II that apply)												
									0.000000				
() Demolition (X) Re (X) Large Proj. (>160 SF		M2 () (MAA	Proj. (>25<1	60 SF or >10 <	260 LF ACM	() (N	Minor Pro	j. (<25 SF o	r <10 LF	ACM)	f Don	a aval	
(X) Large Proj. (>160 SF (X) Full Containment wi	th Negative P	Pressure ()	() Mini-Encl				Non-friab	le Procedure	e for Asb	estos R	oor Ren	novai.	
(X) Full Containment Wi	ntaining le	Location Non	mally Used				Amount	(Specify SF	or LF)	Abatei	ment i y	pe	
Location of Asbestos-Co Material (ACM) in Facility		olely by Maint	/Custodial	systems insu	lation, surfa	cing,							
Material (ACM) in Facility	(13) 51	taff? (12)	en e	VAT, or other	r miscell.)					Rem.	Rep.	Encap	Enclose
1 1		IA YES	NO_				0.000			X	Τ—	T	T
Crawl Spaces and Stor		X		Air Cell Pipe	Insulation	č.	9,020	LI		_ ^			1
Rooms				Elbows	lan Dakela		1,755	SF		X		1	
Crawl Spaces and Stor	age	x		Pipe Insulat	ion Debris		1,733						
Rooms				Floor Tile			165 9	SF		Х			
SW Storage Room - be	hind	Т х		Floor Tile				West .					
Boiler Room				-									
			+	-					1			-	
				 									
*Please see attached											1 161		
Detail Breakdown		LNUDERW	/aste Hauler	ID#	Cubic Y	ards of V	Vaste		Name	of Reg.	Landfil	10	
Name of Reg. Waste Ha	uler	SW2117	aste i lautei	10 11	200				Mine	rva Lar	ndfill		
Service Transport Gro	up, inc.	3442117							 		_		
011 0111						Disp. I			0000	Minerv	o Dood		
City, State						12/21/	2012						
New Castle, DE	ew Castle, DE									esburg	n, OH	74000	
O I I I I I I I I I I I I I I I I I I I	moleted by (Print or Type) Title							11	Date	/2012			
Completed by (Print or Nick Petrovski	i ype)	Presiden	it		Signatu				11/08	12012			
MICK PELIOVSKI					1	11/1		Zun.				-1-3-2-1-4	
2					In	118		C:\WOF	RD\MYD	OCS\AS	BESTO	S 9/1	8/00
				10				C.WVO	CO WINT D				

State of NJ Notification of Asbestos Abatement

B & G proj. #: 2012-191

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

							MEV	tion I V time find				_	
Date of Notification (1)		- 11	Name of	Building Own	er/Operator (2))			2				
111/09/1			Jet Av	iation Teter	boro, L.P.		2012 NOV 1	4 PM 10: 6	9				9
Agencies Notified Ty	pe Notificat	ion	Street Ad				A SOUTH STATE	o coures	ul .				
□ DEP	Initial		112 C	harles A. Li	ndburgh Driv	/e	ASSESTE & LIC	CHSING 100 COULUE	FL. (
	1 Amendr		City, Stat	e, Zip Code			SC 7.10	CHCLICA		***************************************			
☑ DOL ☐	1 Amend		_	oro, NJ 070	508							-	
☑ DOH	Cancella		Name of	Contact				Telephor	ne Numbe	r			
☐ DCA ☐	_ Cancella	1001	Steph	en Mosca									
				FAC	ILITY INFORM	IATIOI	N			A			
Name of facility where	abatement i	s taking p	lace (3)					Type of Facility	(4)				
Jet Aviation Teterbo	oro Airpor								ol (K - 12)			<i>(</i> 40)	
Street Address	olo Alipoi					-			apter 8 (0 (Private/0				
	4 0202	g gr gan	89 4 7 89					Bldgs.	/Homes, e	etc.			
Building 121 Charl	es A. Lind					-		Square Feet	# of Floo	rs	В	ldg. A	ge
City (5)		Col	inty (6)				unty Code (7) ate use only)	Current Use (P	rior if hair	na dos	nolich	od\	_
Teterboro, NJ 0760	08	Be	rgen			, (0,	ato doo omy/	private airpor		ig der	nonsn	eu)	
Name of Monitoring Fire				Edino-possessio	ASCM No.	1	Name of Abatement C			****			
Ahera Consultants					0057		B & G Restoration	, Inc.					
Street Address							Street Address		30 WW				
P.O. Box 385							105 Ryerson Road	11		i de la composition della comp			
City, State, Zip Code							City, State, Zip Code						
Oceanville, NJ 0822	the same of the sa	_					Lincoln Park, NJ	07035					
Project Manager for Mor	nitoring Firm			Phone Numb	er		Telephone Number		License	Num	ber	300005550	244
Domenic D'Errico				609-652-18	Hugh-Con		973-696-6869 Name of OSHA Monito		0378	_	-		
Scheduled Start Date (10	0)	Sche	d. Compl	etion Date (1	1)		B & G Restoration	173					
11/26/12		01/1	1/13				Street Address	i, inc.		-			-
Occupancy Status During	g Abatemer	t (Check	only one)				105 Ryerson Road	l					
Facility closed/vac							City, State, Zip Code						
Describe:	occupied						Lincoln Park, NJ	07035	alian and				
Scope of Work (check a	all that apply	·)		****			<u></u>						
Demolition	\boxtimes	Renovati	on			⊠ F	Full Containment w/nega	tive pressure	Glove	oag pr	oced	ure	
$\square > 3 \text{ sf or } > 3 \text{ lf}$	\boxtimes	≥160 sf or	≥260 If				Mini-enclosure		Non-fr	iable	proce	dure	
Location of				lly used solely	/			T		R	R	Е	E
asbestos-containir	ng	by maint staff(12)	enance/c	ustodiai			sbestos-containing	Amount	F	e m	e p	n	n
material to be abated in facility (1	13)	Yes	No	N/A	material (ACM)		(Specify S	r or	0	a	a	C
		103	140	IN/A						е	r	р	
Ofc suite & break are					sheetrock/jo	-	The state of the s	5000 sf		M			
Ofc suite & break are				X	pipe fittings			137 fittings		X	ᆜ		Ш
Office suite entrepes	a			X	floor tile &			1700 sf		X	부	부	H
Office suite entrance					transite wal			80 sf			屵	片	屵
Office suite entrance Registered Waste Hauler		INID	EP Haule	r ID# I C	floor tile & ubic Yards of V		Name of Registered La	50 sq		X		Ц	Ш
B & G Restoration, In			563	STATE OF THE STATE	60 yards	14310	Tullytown Resource		Center				
City, State				Disposal D	ate	-	City, State						
Lincoln Park, NJ 070				11/26/1	2-1/11/13		Tullytown, PA	*					
Completed by (Print or Tr Gordana Luna	ype)	Title Treasure	or		Signature		Gordana Luna		Date 11/09/	12		C/S-	
CIUIUGIIA LUIIA		LIGASUIT	U1						1 1/114/	17.			

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

Chec	k # 1716	
Page	GEIVE	m

Noneck		N		CATION	OF ASBI	ESTOS	ABATE		Pa	heck ge E	# 1716 &E 1	Vr	m			
Date of Notification (1) 11-09-2012	***************************************				Building range S				2012	אחא,	14 p	W	S. Jan			
Agencies Notified	Type Notification			Street Ad 715 Pa	ddress ark Ave		1,000					rrn	A 100 12	6		
EPA DEP DOL	Initial Amended Amendment	#1			te, Zip Co range, l)17	& LICENSING								
☑ DOH ☑ DCA	Emergency justification) Cancellation			Name of Dr. Mo	Contact					Tel	ephone N	lumb	er			
				FACIL	LITY INFO	DRMATI	ON	-								
Name of Facility Where Gordon Parks Acad		g Place (3)	Type of Facility (4) School (K-12)												
Street Address 98 Greenwood Ave	nue							Ħ	Subchapter Other (i.e. p etc.)				ouilo	lings,	hom	es,
City (5) East Orange									re Feet	3	f Floors			ldg. A 0+	ge	
County (6) Essex		the same to the		County C	Code (7) ISE ONLY)		Curre	ent Use (Pri	or if bei	ng demo	lished	1)			
Name of Monitoring Firm Whitman	Hired by Building	Owner (8)		0011				of Aba Group	tement Cor , Inc	tractor	(9)					
Street Address 116 Tices Lane, Ur	nit B-1							Addres Hamb	ss ourg Turn	pike		21240		9.349.C.299.3		
City, State, Zip Code East Brunswick, NJ	, 08816								ip Code dale, NJ C	7403			٥			
Project Manager for Mor Kevin Lovely	nitoring Firm	Telephone No. Telephone No. License No. 732-390-5858 201-710-9725 01084							2-00	1222	1.000					
Start Date (10) 11-21-2012 after 1	om		heduled Completion Date (11) Name of OSHA Monitor GL Group, Inc					es								
Occupancy Status Durin	g Abatement (Ched	k Only On	e)	·				Addres			A 12 L. (- 1 - 1 - 1)					
Facility Closed/Vac Abatement Perform Other – Describe:							City, S	State, Z	ourg Turn ip Code							
	v=						Bloo	mingo	dale, NJ (7403						
Scope of Work (Check A ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	il That Apply)	-	enova emolit				×	Mir	I Containme ni-Enclosure ovebag Prod n-Exempted	e cedure	•				e	
			Locati												ement pe	
Location Asbestos-Containing <u>TO BE AB</u> In Faci (13)	Material (ACM) ATED lity	Use Ma	lormal d Sole intena odial S (12)	ly by nce/		tos Cont thermal surfa		Material s insula T, or		(5	mount Specify For LF)		Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A							11				te	U.
Boiler R	oom	X			Во	lier #1	pipe ir	nsulat	ion	2	50 LF	х				
Boiler R	oom	X			1	Bolier #	#1 brea	achin	g	6	80SF	×				
Boiler R	oom	X				Bolie	r#1 bi	ricks		2 cı	u yards	X				
Name of Danistand Ma	ta Havias		EN	LIDEDIA		Cubic	Vorde		Nome of	Dogista	rod Land	£11				
Name of Registered Was GL Group, Inc	ste Hauler		Н	IJDEP W lauler ID 033034	No.	of Was			Name of Grows	Registe	red Land	1111				
City, State Bloomingdale, NJ						Dispos TBD	sal Date		City, State Morrisv		A					
Completed by Elena Solakov		Title Presi	dent			S	Signature		DA	ئن		Date 11-0	9-2	012		

CK 1571

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

Date of Notification (Nan	ne of Buil	ding Owner/Operat	or (2)	2010 1101				
	13-12				Joi	THE GEOI	06 (2)	2012 NOV 14	PH 9:	57		
Agency Notified	Type Notification	1		Stre	el Addres	is COT	20 100	Em satte and				
MEPA STOCK	M Initial				3:	38 CE	DAR S	LICENS	ONTE	105		
D DOL	Amended Amendment	#		City	, State, Zi	p Code		& LICENS	ING			
™ DOH	C Emergency (in			-		OUTH A	MBOY	NJ.08	819			
Ø DCA	justification) Cancellation				ne of Cont			Telephone Nur	mber			
						GEORGIO	U			No.		
Name of Facility When	e Abatement is Takir	n Place (3	· -	FA	CILITY IN	FORMATION						
							Type of Facil	ity (4)				
Street Address	DENTIAL	400	نے کرا	!		-	☐ School (K-	12)				
338	C5020		_				Subchapte	er 8 (Other than K-12 private & commerci	2) al buildi			
City (5)	CEDAR	27	<u>-</u> _				homes, et	c.)	ai bulluli	ngs,		
Caura	1 Amas			_	v c-	424	Square Feet	# of Floors	Bldg	. Age		0.004.1
County (6)	1 AmBo	2 /	עש		08	8 17	1800 ±	2	5	50	+	
				ONL	ly Code (7) (STATE USE	Current Use (Prior if being demol	ished)			
M / DD Name of Monitoring Fir	m Hired by Ruilding	Dunas T	400	M No.			RES	POINCE				
					_	Name of Abater						
Street Address	THERE'S	INC.	- 6	09		UNIPR	O INC					
64 BROA	0 S-					Sireet Address						
64 BROA City, State, Zip Code	201.					City, State, Zip (ARKUS	AVE.				
Project Manager for Mo	NT 07	747				The second of the second second second		- 11-	A	_	_	
Project Manager for Mo	onitoring Firm	Te	leph	one No.		Telephone No.	BRIDGE	License No.	070	245	5_	
THOMAS P. Q	=1Ger	73	2.5	80.7	2/7	732-7	26.3111					
Start Date (10)	Schedule	d Completi	on D	ate (11)		Name of OSHA	Monitor	006	10		7	
11 - 28 - 12 Occupancy Status Durin	111-	30-	12	_		1		etics, INC				
Occupancy Status Durir	ng Abatement (Check	only one)		1/2/2		Street Address	NO. IA	CICS, MC				_
Facility Closed√Vacat	ed During Entire Peri	od of Abate	emen	t		GY B/A	POAD ST					
Abatement Performed Other - Describe:	d Outside of Normal F	acility Hou	irs			City, State, Zip C	ode	'				
cope of Work (Check a	ill that apply)					MATAL	SAN NI	0774	,			
#2 3 sf or ≥ 3 lf	инат орргуу					© Full C	Ontainment with	Negative Pressure			-	
2 ≥ 160 sf or ≥ 260 lf	•			Ø Ren □ Den	ovation	U MINE	cnclosure	Negative Pressure	10		12	
					iomion	☐ Glove ☐ Non-E	bag Procedure	d Non-Friable Proce	12 4 0000000			
			.ocat				J. Picci / Juli	u Worl-F Hable Proce	dure	Abai	teme	nt
Locatio		Used	ormal Sole	ly ly by		Description of	. 1	12			уре	
Asbestos-Containing TO BE AB		Main	tena	ice/	Asbes	tos Containing Mal	lerial (ACM)	Amount			_	
IN Fac	ility	100	stodi	al	(i.e.,	thermal systems in surfacing, VAT,	nsulation	(Specify		R R	200	En
(13))		(12)			other miscellaned	ous)	SF or LF)	1	Remova	Encapsulate	Enclosure
		Yes	No	N/A					1	₽ ¬	ate	re
BASEMENT	-	1		×	1	11-						
2ND FLOOT						AT + MA	STIC	354 SF)	4		
		 	-	*		LAT + MA	STIC	80 SF		×		
		+++	-								П	
me of Registered Wast	e Hauler	NJDE	PW	aste Ha	uler	Cubic Yards of	N====					
1/-10-1)	ID No).		C-1000000000000000000000000000000000000	Waste	Name of Regist	ered Landfill				
MEWARK C	APRING, INC	- 4	15	09		10	GRAME	10)				
4/7.41	417					Disposal Date	City, State	nuc,				-
MEWARK mpleted by	7777					1.30.12 1	YORRICI	ILLE PA				
PAVIDT. TOLC	HIN PRES	= 1				Signature	-/	Told: PA	ate		_	-
341		t use this	lorm	0	1	Day	nd Ti	18th	11-1	3.1	2	
	IIC	. 000 11115	OHILL	OF ASDE	SINC licar	TOURS ON STATE			6593	5000 90		- 1

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No check	BERREMB	ER – M	-ICATION OF	RD COPY ASSESTOS ABA NJAC 7:28-2.1	TEMENT	2012 NC		V = 0) 2H190 T	YAX	
Date of Notification (1) 11/12/12					lding Owner/(Orfer Hor (2)	LICENS	UNIRO	1/2	1
Agondes Notified (X) EPA	Notification () Initial No			Stroot Addres 4801 S. Woo	od Avenue		100	Vary		
(X)DOH ()DCA	() Cancelle		aton	City State 2 Lindon, NJ (07038	[W/	AIVER	APP	KUV.	
				Name of Cor Bob Keiser	elael S	e etanilai ir ie	L.Tal Num	ihor		
15 15 16 NO NO		-	FACILITY	INFORMATION						
Name of Faolity Where Abet Citgo Tramley Terminal	ement is Taking Place (ত্র			(-12) er 8 (other tha					
Street Address 2000 Marshes Dook Road					e. private & c		- E	ee, etc.		
City (5)	DUILLY (5)	County C	odn (7)	Sq. Feet 10	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	# of Flo	ors <u>1</u>			*
Linden	nion	(State Us	se Only)	Bldg. Age 50 Current Use	+/ (prior if being	demolished)	Oil Terms	กล!		
Name of Monitoring From Historian ATC Associates	d by Bldg, Owner (8)	ASCM N	ο,			Name p. Co NCM Derno	entractor (9)	emediation	, LP	57
Street Address 3 Torri Lane				Street Address 404 N. Berry			0			
City, State, Zio Coda Burlington, NJ 08016				City State ZI Brea, CA 920		1240	4 411			
Project Managor for Monitoring John Lutz	Telephone N 609-386-880			Telephone No 484-480-8931		= =	Licenso N 01056	lumber		-
Spheduled Start Date (10) 11/07/12	Scheduled 0 11/30/12	unplation	Date (11)	Name of OSI- EMSL Analyti	A Monitor					-
Occupancy Status During Aba (X) Facility Closed Vaccotod I	atement (Check only one	a)		Street Addran	<u> </u>					
() Abatement Performed Out				107 Haddon A	222		· ·			
DescribeNon Business Ho	ours_Facility Effected by	Hurricane	Sandy	City. Stote, Zi Westmont, N.						
Other - Describe Source of Work (Check All tha	tapply)									
() Demolition (X) Renova (X) Large Proj. (>160 SF or > (X) Full Containment with Ne	260 LF ACM) ()M Proj			60 LF ACM) () Minor Proj.	(<25 SF or <	-10 LF ACM	1)		
Location of Asbestos- Containing Material (ACM) in Facility (13)	is Location Normally Solely by Maint/Cust Staff? (12)	Lised	Description of thermal system surfacing, VA	ACM (i.e. ms insulation.		pocity SF or	LF) A	ontement T	ADE	
Tremicy Terminal	YES NO	NA X	Miscell.) VAT/Mastic		800 SF		R. X	m. Rao.	Eocao I	Englose
							1		-	
Name of Reg. Wagte Heuler	NJDEP Wast	e Hauler ID) #	Cubic Yarda of	f Wasta	T	Name of R	eg. Landfill		
Service Transport Group City, State	20990			30		Disp. Date	Minerva	City, Str		
Auton, PA				(DX	1	1/30/12			boro, OH	
Completed by (Print or Typa) Richard P. Semega, Jr.	<u>Title</u> Pro	ject Manag	ger	Signature			Date 11/12/12			

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P	DOL + 10 1)	HY
[.	1 TOOPHU	.

	REMEMBER - MA	IL IN HARD (-2817 NOV COPY	PM STATE
	L		430 51	O' CONTROL C. I
Notification of Demo	lition or Renovation	(continued)	& 1	CENSING
X. Description of Planned	Domolition or Renovation Wo	rk and Methods	to be Used:	Removal of VAT and Macila
Acquiated work area, hep	ə filtration equipment, solvent	z, wat material, a	and double bag	WAIVER APPI
			1	
			; ;	r.
XI. Description of Engine	aring Controls and Work Pract	res to be lied	to Control Fran	release of Asharday at the
Demolition or Renovation material and double bag.	Sile: Regulated work area,	wet removal med	hads, HEPA fil	hallon equipment, solvents, wet
XII. Waste Transportor#1	Service Transport Groun	the State of the State of State		
Address: 58 Pyles Lame	COLUMN TANIONNEL CHOOP			
Cfor Now Castle	County: New Gaette		State: DE	Zlp: 19720
Contact Randy Dridges	7		Talephones #7	
Waste Transporter#2 S	ome as #1		The second second second	
Address				
Ĉrty	County	***	8 to fc:	zip
Cónluzk			Telephono	
XIII. Waste Disposel Sito	Minerva Landfill		EPA Certificat	ion Heinbert: 90704984
Address: 8009 Minerva Road				
City: Wayneoburg	County		State: OH	ZU: 44508
onbet:			Telephone: 33	
XIV. If the Domolition was	Ordered by a Government Age	ency, Please Iden	tify the Agency	Below:
varno		Tino		
ulhority				
bate of Order (INNUDIDAY)		Dato Ordore	d to Begin (MM/DD/	מרו
W. For Emergency Renova	tions:			
ATE and HOUR of Emotschey: (MN egoription of SUDDEN, UNDERSCT		(MH:MN)		
	f Unsafe conditions, or a sectors digrup	tion of Industrial occur	utions	
va been plant of Process Table Aspestoe Material Be len generator	res to be roundled, Pulverized (nt that Unexpects or Roduced to Pe	ed Asbestos iç owder Sagr e gs	Found, or that Previously Non- te area, wet metriels, post signs,
re parala ma pellinilini	ual, Trained in the Provisions or Renovation, and that Eviden of for Inspection During Normal	Co IEDIATES ROAL	ired Translag h	TE Room Accommillioned his
	(Strate	בונים בול וועות או שוני	7) //	Da(e) 11-12-12
All, I Cortly that the Above			/ 	000 11-12-12
	/23.md	M.	1	

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

Agencies Notified (X) EPA (X) DOL (X) DOL (X) DOH () DCA (X) DOH () DCA (X) Amended Certification () Cancelled (X) Amended Certification () City. State. Zip Code Linden, NJ 07036 (City. State. Zip Code Linden, NJ 07036 (Dai
(X) DOL (X) DOH () DCA (X) DOH () DCA (X) DOH () DCA (X) Amended Certification () Cancelled (X) DOH () DCA (X) DOH () DCA (X) Amended Certification () Cancelled (X) Amended Certification () Cancelled (X) Amended Certification () Cancelled (X) DOH () DCA (X) DOH () DCA (X) DOH () Contact (Bob Keiser FACILITY INFORMATION Type of Facility (4) () School (K-12) () Subchapter 8 (other than K-12) (X) Other (i.e. private & commercial bldgs., homes, etc. Sq. Feet 1000 # of Floors 1 City (5) Linden City (5) Linden County (6) Union County Code (7) (State Use Only) Bldg. Age 50+/- Current Use (prior if being demolished) Name of Contractor (9) NCM Demolition and Remediation, LF Street Address Street Address	ROL.
Street Address Street Address	
Name of Facility Where Abatement is Taking Place (3) Citgo Tremley Terminal Street Address 2000 Marshes Dock Road City (5) Linden County (6) Union County (6) Union County Code (7) (State Use Only) Name of Monitoring Firm Hired by Bldg. Owner (8) ATC Associates Type of Facility (4) () School (K-12) () Subchapter 8 (other than K-12) (X) Other (i.e. private & commercial bldgs., homes, etc. Sq. Feet1000# of Floors _1 Bldg. Age 50+/ Current Use (prior if being demolished)Oil Terminal Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Street Address Street Address	
Name of Facility Where Abatement is Taking Place (3) Citgo Tremley Terminal Street Address 2000 Marshes Dock Road City (5) Linden County (6) Union County (6) Union County Code (7) (State Use Only) Name of Monitoring Firm Hired by Bldg. Owner (8) ATC Associates Type of Facility (4) () School (K-12) () Subchapter 8 (other than K-12) (X) Other (i.e. private & commercial bldgs., homes, etc. Sq. Feet1000# of Floors _1 Bldg. Age 50+/ Current Use (prior if being demolished)Oil Terminal Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Street Address Street Address	
Street Address 2000 Marshes Dock Road City (5) Linden County (6) Union County (6) Union County (6) Union County Code (7) (State Use Only) Bldg. Age 50+/- Current Use (prior if being demolished) Name of Monitoring Firm Hired by Bldg. Owner (8) ATC Associates Street Address Street Address Street Address	
City (5) Linden County (6) Union County Code (7) (State Use Only) Bldg. Age 50+/ Current Use (prior if being demolished) Oil Terminal Name of Monitoring Firm Hired by Bldg. Owner (8) ATC Associates Street Address Street Address	
Name of Monitoring Firm Hired by Bldg. Owner (8) ATC Associates Street Address Street Address Name of Contractor (9) NCM Demolition and Remediation, LF	
<u> </u>	-
8	
City, State, Zip Code Burlington, NJ 08016 City State, Zip Code Brea, CA 92821	
Project Manager for Monitoring Firm John Lutz Telephone Number 609-386-8800 Telephone Number 484-480-8931 License Number 01066	
Scheduled Start Date (10) 11/07/12 Scheduled Completion Date (11) 11/30/12 Name of OSHA Monitor EMSL Analytical	¢.
Occupancy Status During Abatement (Check only one) (X) Facility Closed/Vacated During Entire Period of Abatement () Abatement Performed Outside of Normal Facility Hours - 107 Haddon Ave	
DescribeNon Business Hours_Facility Effected by Hurricane Sandy City, State, Zip Code Westmont, NJ 08108	-
Other – Describe	
Source of Work (Check all that apply)	
() Demolition (X) Renovation (X) Large Proj. (>160 SF or >260 LF ACM) ()M Proj. (>25<160 SF or >10 <260 LF ACM) () Minor Proj. (<25 SF or <10 LF ACM) (X) Full Containment with Negative Pressure () Mini-Enclosure () Glovebag Procedure	
Location of Asbestos- Containing Material (ACM) in Facility (13) Is Location Normally Used Solely by Maint./Custodial Staff? (12) Is Location Normally Used Solely by Maint./Custodial Staff? (12) Description of ACM (i.e. Amount (Specify SF or LF) thermal systems insulation, surfacing, VAT, or other	
YES NO NA miscell.) Rem. Rep. Er Tremley Terminal X VAT/Mastic 800 SF X X	ncap Enclose
Name of Reg. Waste Hauler Service Transport Group Name of Reg. Waste Hauler ID # 20990 Service Transport Group Name of Reg. Landfill Minerva	
City, State Aston, PA Disp. Date 11/30/12 City, State Waynesbor	o, OH
Completed by (Print or Type) Richard P. Semega, Jr. Title Project Manager Signature 11/12/12	

X. Description of Planned D Regulated work area, hepa i	emolition or Renovation Wo filtration equipment, solven	ork and Methods to ts, wet material, and	be Used: I double bag.	Removal of VA	TENOWastis PI
i.	į.	7		A	ESTOS CONT & LICENSING
XI. Description of Engineeri Demolition or Renovation S material and double bag.	ng Controls and Work Practite: Regulated work area,	lices to be Used to 0 wet removal metho	Control Emm ds, HEPA filt	isions of Asbes tration equipme	stos at the nt, solvents, wet
XII. Waste Transporter#1 Se	ervice Transport Group				
Address: 58 Pyles Lane					
City: New Castle	County: New Castle		State: DE	Zip: 19720	
Contact: Randy Bridges	pound; man occur		Telephone: 87		
Waste Transporter#2 Sar	me as #1		Tromphone. 01	. 555-5555	
Address					
City	County		State	Zip	
Contact	1		Telephone	Trih	
XIII. Waste Disposal Site Mi	inerva Landfill			log Number 204046	194
Address: 8955 Minerva Road			LEFA Certificati	tion Number: P01049	704
City: Waynesburg	County:		State: OH	Zip: 44688	
Contact:	1		Telephone: 33		
(IV. If the Demolition was Or	rdered by a Government An	ency. Please Identit			
lame		Title	y are Agency	, Delow.	
authority		1.410			
ate of Order (MM/DD/YY)	3	Date Ordered t	to Begin (MM/DD/	ΥΥ)	
(V. For Emergency Renovati	ions:				
ATE and HOUR of Emergency: (MM/E		(HH:MM)			
xplanation of how the Event caused ι	unsafe conditions, or a serious disru	ption of industrial operati	ons		
(VI. Description of Procedure Fiable Asbestos Material Bec lert generator	es to Be Followed in the Eve comes Crumbled, Pulverized	ent that Unexpected I or Reduced to Pov	1 Asbestos is wder Segrega	Found, or that ate area, wet ma	Previously Non- trials, post signs,
VII. I Certify that an Individu	Renovation, and that Evide for Inspection During Norm	ence that the Requir	red Training I (Required one (1))	has Been Accor	mplished by
viii. I Ceruly that the Above	Information is Correct	R			

Notification of Demolition or Renovation.....(continued)

S20395

HEMEMBER - MAIL IN HARD CORY 2 HOV IV. PM 9:51

(Pureuant to N.J.A.C. 7:26-2.12)

To:6102693393

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Date of Nothication (1) 11/12/12	(4	Citgo Petrol		(2)	ENSI	Line	Wa	al-	
Agencies Notified		Netification	Туре		Street Addr		i d	MAA	11-3	APF	31(1)	VLL
(X)EPA		(X) Inutal N	otification		4801 S. Wo	oungvA bo	. 4					
(X)DOL (X)DOH		() Amendi () Candell	ed Certiflo		City, State, Linden, NJ	Z <u>lo Codo</u> 07036	AT LUE	т, н. в.	a 5	I.	,00.20-5	and mental Co
()DCA					Name of Co Bob Keisor	ntact		Iel. N	umber			- "
		<u> </u>	<u></u>	EACH 19V	NFORMATION			1				
Name of Facility Where A	batement is T	sking Place i	(3)	PACICITI	Type of Fac					-		
Citgo Docks Building		7,111-19			() School (I							
					() Subchap				allera men			
Stroot Address 4801 S Wood Avenue					(X) Other (.e. private &	commarcial b	iogs., no	നുട്ടു വവ			
4001 O 11004 Aveilde	N				Su. Feet _1	104	# of Flo	ors_2				
City (8) Linden	County (6) Union		County (Stain L	Code (7) lee Only)	Bidg, Age 50		g demokshed)	Oll Ten	minal			
Name of Monitoring Firm	Hired by Bidg	Owner (8)	ASCM	Vo.	T Garage March	(prior ii doi)	Name of Co					
ATC Associates							NCM Demo	litlon and	Remedi	ation, L	_ק	
Street Address			L		Stroot Addre	25						
3 Terri Lane					404 N. Berry							
City. State. Zip Code					City State, Z	inCode						· Parameter
Burlington, NJ 08016					Brea, CA 92							
Project Manager for Month	oring Firm	Telephone	Number		Telephone N	umbar		Liconal	e Numbe	r		
John Lutz		509-386-B8	00	4	484-480-893	1	•	01065		40		
							_				_	
Scheduled Start Date (10)		Bcheduled (Completion	Date (11)	Name of QS					,,,		
11/13/12		11/30/12			EMSL Analy	ical						
Occupancy Status During	Abatament (C	heek only on	<u>ല</u>		Street Addre	22						
(X) Facility Closed/Vacat				t	40711-44	۸.						
() Abatement Performed	Outside of No	ساما ١-قالانان	Hours -		107 Hoddon	-						-
DascribeNon Business	Hours_Padli	ly Effected by	/ Humicano	Sandy	City, Stale, Z Westmont, N							
Other - Doocribe				-								
Source of Work (Check all	thal apply)											
() Demolition (X) Ren	noilsvor											
(X) Large Proj. (>160 SF							oj. (<25 SF or	<10 LF A	(CM)			
(X) Full Containment with Location of Asbestos-		lion Normality		Description of	ACM (i.e.		Specify SF or	(F) T	Abatem	ent Typ	×0	
Containing Material (ACM)		y Malnt/Cus		thermal system		1 ~	openi, si a		Lioquani	111	M	
Facility (13)	Staff? (surfacing, VA	r, or other			- 1	D	T 1	Com !	/
Deal - Dealder	YES	NO NO	NA NA	miscell)		870 SF			Rem.	Eco.	From	DEIDER
Docks Building Docks Building		+	X	VAT/Mastic Transite Hood		40 SF			x			
Dacks Building	+	+	^	Transite Floor		40.07			^	-		
Name of Reg. Waste Hauld	er l	NUDEP Was	le Hauler I	D#	Cubic Yards o	of Wnnte			PROG. LE	ndfill		
Survice Transport Group		20990			30		Diao, Date	Minorv		v. State	-	
CIty State Aston, PA				1	n l	11/30/12		Wa	ynoobo	oro, OH		
Completed by (Print or Typ	(6)	Title			Signatura	y	T	Data				
Richard P. Sernega, Jr.			oject Mana	no par	1	()		Data 11/12/13	2			
22	- 1				100	11						



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KEMEMBEH	(— WAIL IN HARD	: 23 ·	ZOIZ NOV I	THE PROPERTY	Me
Notification of Demoli	tion of Donoveller	The second second	h was a ro	C CHARLE	
			2 LICH	FUCINO	
X, Dozaription of Planned D Regulated work area, hepa	namoiuon or kenovati Altration equipment, 60	on Work and Methods Divents, wet material,	and double bas	Removaror VA	- OVE
XI. Description of Engineeri	ing Controls and Wade	Protions to be Unad	6-4-6-6	Island of Ashau	TO THE REAL PROPERTY.
Demolition or Renovation S material and double bag.	ite: Regulated work	Practices to be used STG2, wet removal me	thods, HEPA fil	tation oquipmen	os at the if, solvents, we
XII. Waste Transporter#1 Se	ervice Transport Group				
Address: 58 Pylon Lane		-			
City: New Casdo	County: New C:	estle	State: DC	Zip: 19720	
Control: Randy Daldgee			Telephone 6		
Woste Transporteritz Sai	me as #1		-444113112		
Address	10 43 FT				
City	Country				
Contact	Centra		Sinto	ZID	
		Control of the Assessed	Telephono		
(III. Waste Disposal Site M.	nerva Lanariii		CRA Certifica	Don Number P010100	4
ddress: 8957 Minorva Road					
th: Mayneaburg	County:		3tate: OH	Zip: 44000	
ou#011			Telephone: 3		
CIV. If the Demolition was Of	dered by a Governmen	Agency, Ploave Ide	mily the Ageno	y Below:	
ame		Title	·		
utitoday					
ate of Order (MM/DD/YY)		Date Oreas	ed to Degin (MWDD)	m	
V. For Emergency Renovati					
ATE and HOUR of Emergancy: (MM/C		(HHIMM)			
colanation of how the Event coursed a	,	disruption of industrial epe	Tations		
VI. Doscription of Procedure	es in He Followed In the	Lucas that Upoyne	lad Ash attack		
lable Asbautos Material Boo ert conarator	omes Crumbice, Pulve	rized or Reduced to F	Powdor Segregi	ate area, wet matri	ials, post signa,
Al. I Certify that an individual te During the Demolition or is Person will be Available f	Renovation, and that E	videocu Mal inc Real	ulred Training l S (Required one (1))	ian Been Accomi	Will be On- ollahed by
VIII. I Cortify that the Above I	nlormation is Correct	By			
The second secon		(Strange of County Office)	"/	Date) 11-12-12	

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

					· ·			C	F. 11	Sies ber		
Date of Notification (1) 11/12/12					Name of Build Citgo Petroleu			Tho				
Agencies Notified (X) EPA		Notification (X) Initial N	A015405	í	Street Addres 4801 S. Wood			NOV 1				
(X)DOL (X)DOH ()DCA		() Amende () Cancelle	ed Certifica		City, State, Zin Linden, NJ 07		453	ESTO.	s co Ensi	NTRO NG	L	
		ar T			Name of Cont Bob Keiser	act	, '	Tol Ni			2	
				FACILITY IN	IFORMATION					with south		
Name of Facility Where Abatement is Taking Place (3) Citgo Docks Building					Type of Facility (4) () School (K-12) () Subchapter 8 (other than K-12)							
Street Address 4801 S Wood Avenue				(X) Other (i.e	e. private &	commercial b	350 W	nes, etc	.			
City (5) Linden	County (6) Union		County ((State Us		Bldg. Age 50+ Current Use (p	·/			minal			
Name of Monitoring Firm F	dired by Dida	Oumar (9)	ASCM N		Carrent OSC (onor ir being	Name of Co					
ATC Associates	illed by blug.	Owner (o)	ASCIVIN	<u>o.</u>			NCM Demo			diation,	_P	
Street Address 3 Terri Lane					Street Address 404 N. Berry S							
City, State, Zip Code Burlington, NJ 08016					City State, Zip Brea, CA 928					- 111		
Project Manager for Monitor John Lutz	oring Firm	Telephone 609-386-88						License 01066	e Numb	<u>er</u>		
Scheduled Start Date (10) 11/13/12	1	Scheduled 9 11/30/12	Completion	Date (11)	Name of OSHA EMSL Analytic					কু		
Occupancy Status During (X) Facility Closed/Vacate () Abatement Performed (ed During Ent	ire Period of	Abatement		Street Address 107 Haddon Ave							
DescribeNon Business				Sandy	City, State, Zip Code Westmont, NJ 08108							
Other – Describe												
Source of Work (Check all	that apply)											
() Demolition (X) Ren (X) Large Proj. (>160 SF (X) Full Containment with	or >260 LF A	CM) ()M Pr	oj. (>25<16 Mini-Enclo	60 SF or >10 <26	60 LF ACM) (ovebag Procedur		oj. (<25 SF or	<10 LF A	ACM)			
Location of Asbestos- Containing Material (ACM) Facility (13)	Is Loca	tion Normally by Maint./Cus	Used	Description of thermal system surfacing, VAT	ACM (i.e. ns insulation,		Specify SF or	LF)	Abater	nent Ty	<u>oe</u>	
	YES	NO	NA	miscell.)	,				Rem.	Rep.	Encap	Enclose
Docks Building			Χ	VAT/Mastic		870 SF			X			
Docks Building			X	Transite Hood		40 SF			Χ			
Name of Reg. Waste Haule		NIDEDW	to Llauder I	D.#	Cubi- V1	11/0-1-		N	(D:	Law Jen		
Service Transport Group	31	NJDEP Was 20990		<u>U#</u>	Cubic Yards of	vvaste		Name of Miner		Landfill		
City, State Aston, PA	ty, State				A	n	Disp. Date 11/30/12	William	<u>C</u>	city, Stat Vaynest	<u>e</u> oro, OH	
Completed by (Print or Typ Richard P. Semega, Jr.	e)	<u>Title</u> Pr	oject Mana	iger	Signature			<u>Date</u> 11/12/1	2			
					1							

Notification of Demolition or	Ponovation			- WED
				2812
X. Description of Planned Demolitio Regulated work area, hepa filtration	n or kenovation work and	d Methods to b	double bee	Removald VAT and Mastic.
Tregulated Werk area, nepa madaon	equipment, solvents, we	material, and	double bay	6 . ar
*	, i			ESTOS COM
				& LICENSING
XI. Description of Engineering Conti			ond or Linn	noiono di Addestes di tire
Demolition or Renovation Site: Rematerial and double bag.	egulated work area, wet re	emoval method	is, HEPA fil	tration equipment, solvents, wet
material and double bag.				
XII. Waste Transporter#1 Service Tr	ansport Group			
Address: 58 Pyles Lane	шторот отопр			
City: New Castle	County: New Castle		State: DE	Zip: 19720
Contact: Randy Bridges	County. New Castle		Telephone: 8	
Waste Transporter#2 Same as #1			relephone. o	77-333-333
Address				
City	County		State	Zip
Contact	Journy		Telephone	jzip
XIII. Waste Disposal Site Minerva L.	andfill			tion Number: P0104984
Address: 8955 Minerva Road			EFA Certificat	tion Number: P0104984
City: Waynesburg	County:		State: OH	Zip: 44688
Contact:	Tooliny.		Telephone: 33	
XIV. If the Demolition was Ordered b	v a Government Agency	Please Identify	No.	
Name	y a Government Agency,	Title	tile Agenc	у Бегом.
Authority		Title		
Date of Order (MM/DD/YY)		Date Ordered to	Begin /MM/DD	WY)
XV. For Emergency Renovations:		Take Oldered to	Dog (IIIIII) DD.	,
DATE and HOUR of Emergency: (MM/DD/YY)		(HH:MM)	4	- · · · · · · · · · · · · · · · · · · ·
Description of SUDDEN, UNEXPECTED EVENT		(TITLIANA)		
Explanation of how the Event caused unsafe con	ditions, or a serious disruption of	industrial operatio	ns	
XVI. Description of Procedures to Be	Followed in the Event tha	at Unexpected	Asbestos is	Found, or that Previously Non-
Fiable Asbestos Material Becomes C	rumbled, Pulverized or Re	educed to Pow	der Segreg	ate area, wet matrials, post signs,
alert generator				

XVII. I Certify that an Individual, Train	ned in the Provisions of th	is Regulation	(40CFR, Pa	rt 61, Subpart M) Will be On-
Site During the Demolition or Renova	tion, and that Evidence	tat the Require	ed Training	has Been Accomplished by
this Person will be Available for Inspe	ection During Normal Bu	nness Hours (F	Required one (1)	year after promulgation).
	1	71		
	(Signature	równe (Operator)		(Date) 11-12-12
XVIII. I Certify that the Above Informa	tion is Correct	_ 1		
		7		
	`)	M		. 5/ 1
	1	MI		
	(Signature o	f winek/Operator)		(Date) 11-12-12