Nov 15 11 03:39p	Aztech REMEMBER –		IARD C	OPY	973744	8892		p.2		
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	NOT	IFICATION	OF ASBI	ESTOS ABATEMENT 0-7 and 12:120-7	A	englighten. Fertil	Checi	k #E	9865.	tidaer.
Date of Motification	m (I)			g Owner/Operator		D0L	IND	AY		
11/15/11		Ginge	er Ga	rrett		DUL			1	-
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[]DEP	Notification	City, Sta				Tail	South	/		
[E] DOL	[]Amended			, NJ 07111	h 1.,		DOL	201	ハロリ	1
HOC(X)	Notification	Name of C		,	W	1	MALL	101		
[]DCA	(X) EMERGENCY			arrett	Petrepi	one Number	-			
and the second s	[]Cancellation		,			THE PARTY		***************************************	galactic (n. f. j. n.)	- illian
77 ave		FA	CILITY	INFORMATION						
Private	ere Abatement is Taki	ng Place	(3)		Type of Fac	llity (4)				
					[]3choo.					
Street Address	A the second				[]Subch	spier 8 (Oth) (i.e., priss	ar than	1 K-	12)	
115 Elmwood	Avenue				cial	buildings,	tomes. Fre # :	etc	. }	
City (5)	County	(6)	Trans		Square Foot	# of Flo	ors b	lóg.	Age	
Izvington	Ess			unty Code (7) TATE USE ONLY)	2100	, 2		85		
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Name of Mountoring F Owner (8)	ire hired by Buildin	g ASCM No	<u>-</u>	Name of Abates		100000000			- and the original of	-
N/A		67		AZTECH M	anagemen	r, Inc.				
Street Address		·		Street Address	:					********
				86 Chris	topher S	t.				
City, State, Eip Cod	32			Montclai:		342			**************************************	
Project Manager for	14	ephone Nur A	mber	Telephone Numb		Į.	icense		ber	
Scheduled Start Date		etion Date	a (11)	Mame of OSHA M	oni tor		*************			ra mena
11/16/11 Month Day Yes	11/17/1	1		N/A						
Occupancy Status Dur	ing Abatement (Check	only one)		Street Address						
[X]Facility Clos	ed/Vacated During En	tire Paric	d	Screet Address						
[]Abatement Per	formed Outside of No.	rmal Facil	ity	City, State, 2	in Codo	!				
Hours - Descr	ibe: «OffHours Description: «Other Occupancy	ot.»			ep code	İ				
cope of Work (Check		Jesca III (X								
(K)≥3 sf or : []≥160 sf or	>3 1£ [x]Renovatio]Demolitic		[]Mlmi-En [X]Gloveba	ag Procedure		Pressi	ire		
Location	net To	Is	1	I Juon Pil	lable Proced		Aba	teme	nt %y	pe
Asbestos-Cont	aining No	rmally Used		Description Asbestos-Conta			R		E	E E
Haterial (ACM) S	olely		Material (A)	CM)	Amount (Specify	H	R	0	C
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(3.3)	Sta	ff (12)		r other miscell			y y	R	U	UR
Basement	Yes	No N/A	Dir	o Thomas		10 20				E
THE STREET ST. S. STREET, ST.		<u>^</u>	Erb	e Insulation	on	18 lf	X			
TOTAL CONTRACTOR AND			-							
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NJDEP Waste Hauler ID No. 17040 Name of Registered Waste Hauler Cubic Yards Name of Registered Landfill AZTECH MANAGEMENT, INC. of Waste .5 G.R.O.W.S. City, State Disposal Date City, State Montclair, NJ 07042 11/18/11 Morrisville, PA 19067

Completed By (Frint or Type) Constantine Vivian

Title President

Signature

Date 11/15/11

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

(l #2175

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Date of Notification (1)	8 / 11		F		f Building ers Univ	Owner/Operator (2 ersity)			A e-smillimer		
Agencies Notified EPA	Type Notification	,,,	-	-	ddress Road 1 E	31dg 4036	418			(d. herita)	********	
図 DOLWD 図 DHSS			11		ate, Zip C ataway,	ode NJ 08854			on on a land			
☑ DCA (NJAC 5.23-8)	Emergency (inc iustification)	luding	1	Name o	f Contact			Telephone Numb	er			
(BUNC SEED)	☐ Cancellation		İ	Mike	Smith							ALTA OF
				FAC	LITY IN	FORMATION						
Mains of Engiley Whan	e Abatement is Taking	Place (31				Type of Facility	(4)				
Armitage Hall	# PROGRESSION IS TORNING	, mee (School (K-12)				
Sireet Address	- No. 2012 - A. 10 - A. 10 - A. 10 - A. 10 - A. 10 - A. 10 - A. 10 - A. 10 - A. 10 - A. 10 - A. 10 - A. 10 - A	1 -C					Subchapter to	(Other than K-12) rivate and commer	cial buil	dings		
311 N. 5 th Street I	514a 703E					-	homes, etc.)		•	•		
- Linear Service Commission of the Commission of	mined anna	en versentd 1978					Square Feet	# of Floors	Bld	g. Ag	9	
City (5)							46000	4	3	0+		
Camden	and the selection of the second secon	***		Count	v Code /7	YSTATE USE ONLY)	Current Use (Pr	or if being demolis	hed)		A-4-4-	
County (6) Camden					(r		University			. Open en		
	irm Hired by Building O	aupor /s	N 14	ASCM	Vo.	Name of Abateme	ent Contractor (9))		NO CONTRACTOR OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TO PERSON NAME	Ç	
	RITH FIREG DY Editioning C	wile: (c	'	0009			VIRONMENTA					
ATC	alexistant P		L		•	Street Address	AND THE STREET, STREET	ar affalteren gilde han en		_A.c. (#/####**	Settle (S. L.) 11 's	er ener- a-
Street Address 3 Terri Lane						1123 BEAVE	R STREET					
***************************************						City, State, Zip C	Market Street	CONTRACTOR OF THE PARTY OF THE		- Automotive Miles	Charles 1	
City, State, Zip Code Burlington Town	abin M I 09046					BRISTOL, PA						
- 1 T			Tele	phone i	Vo.	Telephone No.	-	License No.	(Montanes inc			ADMIC MI
Project Manager for N	полионну ган			9-386-		215-788-6040)	00509				
Brian Kearney	Sched	ulen Cr				Name of OSHA					A PARTY	W. 3
Start Date (10) 11 / 22		1 /					VIRONMENTA	L, INC.				
						Street Address			- Comment			Engel Pi Since
	iring Abatement (Check			mont		1123 BEAVE	R STREET					
☐ Facility Closed/Val	cated During Entire Pe med Outside of Normal	Fig Of A	Hour	nem s - Des	cribe	City, State, Zip C		and the second s				mary Market
Time of Abatemen	nt:AMP	VI/5:00	PM-5:	00AM		BRISTOL, PA						
						Little Control				and the second second second		
Scope of Work (Chec ≥3 of or ≥3 If	k all that apply)	⊠ Re	novati	on		☐ Mini-En	a Procedure					
⊠ ≥160 sf or ≥260 lf			HUMAN	211		☐ Non-Ex	empted (*) and N	on-Friable Procedu		-		
The same transfer of the same same state of the same same same same same same same sam	and the second of the second second second second second second second second	ls	Local	ion					Ab	-	ont T	Abe
Asbestos-Contain TO BE IN F	tion of ling Material (ACM) <u>ABATED</u> acility 13)	Uşe Ma	intena todial (12)	ely by ince/ Staff?	Asb (i.	Description estos Containing M e., thermal systems surfacing, VA other miscellan	aterial (ACM) insulation, I, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	COSOSTIE
	NAMED FROM	Yes	No	N/A	ļ			PE1.#1,000	grap.	1	- Frank	-
Offices 349-356	REVAL		Ø		accou	atical texture ce	iling finish		M		L	L
Offices 349-356	REVIT		Ø		floor ti	le		REA . 1,000				
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Name of Registered V	Waste Hauler SPORT GROUP, IN		ħ	NUDEP lauler l	D No.	Cubic Yards of Waste 30 Cu Yds		istered Landfill LANDFILL				P. 18-9-1
City, State NEW CASTLE, I			!_	2099	×	Disposal Date 11/29/11	City, State WAYNES	BURG, OH 4466	13			
Completed By (Print Gino Pizzigoni	or Type) Titl	e Genera	ıl Mai	nager		Signature	Pigniso	ri/Al	ate ////////////////////////////////////	5/	1	Marco
				-			-00 g		7	,		ental.

MAY 11 G- 7 1/3/1

^{*} 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)

CR# 2172

Date of Notification (1)	8 /	11				of Buildin gers Uni	g Owner/Operator (iversity	?)	at Balling St., and A. N. in P. B. Markey is governmented			TT 6.7 cm	nave scane
Agencies Notified ⊠ EPA 0643 ⊠ DOLWD 7406	Type Notifica ⊠ Initial ☐ Amended	1			#27	Address Road 1	Bldg 4085					مارده ومارد	
Ø DHSS 0345	Amendm						NJ 08854						
Ø DCA 0/47	☐ Emergen justification		luding	5		of Contac			Telephone Num	oer			···
(NJAG 5:23-8)	Cancellat	635 (1 5 11)			ALC 1-10 10	e Smith			COURTON PART				
						WIL BORN ALITY A.			1.1				e-masses.
and the second s				(6)	FA	CILITY	FORMATION	r					****
Name of Facility Where A Armitage Hall	patement is i	1 aking i	Place	: (3)			SECTION IN CO. THE CO. THE CO.	Type of Facility School (K-1 Subchanter		Y			
Street Address 311 N. 5th Street Bld	g 7036								private and comme		ilding)\$. 	
City (5)								Square Feet	# of Floors	1	dg. A	ge	
Camden								46000	4	1	30+		
County (6) Camden	Marie of the Printer				Cour	nty Code (7)(STATE USE ONLY)	Current Use (P University	rior if being demolis	hed)		6	
Name of Monitoring Firm	fired by Build	ding Ov	wher	(8)	ASCM	No.	Name of Abatem	ent Contractor (9)}				
ATC					0009	98	BRISTOL EN	VIRONMENTA	AL, INC.				
Street Address							Street Address						- negete
3 Terri Lane							1123 BEAVE	RSTREET					
City, State, Zip Code							City, State, Zip Ci	ode	************				-
Burlington Townshi	p, NJ 0801	6					BRISTOL, PA	19007					
Project Manager for Monif	oring Firm			Tele	ephone	No.	Telephone No.		License No.				principle of pages, a
Brian Kearney				6	09-386	-8800	215-788-6040	1	00509				
Start Date (10)					etion Da		Name of OSHA N BRISTOL EN	Ionitor VIRONMENTA	L, INC.			i il ari salar kalifa	-
Occupancy Status During							Street Address		and the control of th		ALL MOTOR		
☐ Facility Closed/Vacate					ment		1123 BEAVE	R STREET					
Abatement Performed Time of Abatement:	Outside of N	ormal F	acilit	y Hou	rs - Des	oribe	City, State, Zip Co BRISTOL, PA						MR-4
Scope of Work (Check all	that annied						21/101/02/17	13001					
Scope of Work (Check an	mat apply)	-		novat moliti			☐ Mini-End	losure g Procedure	egative Pressure on-Friable Procedu	re			
		T	is	Loca	tion	Γ				Ab	atem	ent T	ADS
Location of Asbestos-Containing for TO BE ABA IN Facility (13)	laterial (ACM TED	1)	Use Ma	intena	ely by ance/ Staff?		Description of estos Containing Ma a., thermal systems surfacing, VAT other miscellane	terial (ACM) insulation, , or	Amount (Specify SF or LF)	Removel	Repair	Encapsulate	Enclosure
			Yes	No	N/A							***	
Offices 312-318 & 349				×		+	tical texture ceil	ing finish	2,000	X			
Offices 312-318 & 349	-356			M		floor til	le		2,000	Ø			

No. of the last of					10					10		m	
Name of Registered Waste SERVICE TRANSPO				1	IJDEP I lauler II 2099(O No.	Cubic Yards of Waste 30 Cu Yds Disposal Date	MINERVA City, State	stered Landfill LANDFILL				
City, State							11/29/11	WAYNES	BURG, OH 44688	1			
City, State NEW CASTLE, DE 19	720						11/23/11		anial an adding	•			

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

B & G proj. #: 2011-231 (Pursuant to NJAC 8:60-7

Check # 4892

				cine	rgency	Table 12 for the first of the f	A 11 A 11 A 12 A 12	-	AFFE VILENZA Y	-
Date of Notification (1)	Name	of Building Ow	ner/Operator (2)					
Agencies Notified	/ L ¹ L ¹ L Type Notifica	- Contract	Bowers				The second standard processing states to the responsibility of			************
☐ EPA	-	110000	Address							
☐ DEP	<u>⊠</u> f Initial	i north	Willowdale /	lvenue			and the second second second		Comment of the	Made see a
⊠ DOL	Amend	ment	ntclair, NJ 07	042						
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☐ DCA	Cancel		in Bowers					>_	The second bearing	ar anna Pilota (mo
And the second s	teriblisium (the transport Cities (tra	The same and the s	FAC	CILITY INFORM	ATION	amainte sous sectiment de montre se confidence de montre se confidence de montre se confidence de montre se co	on, and have the source of the		Mint Company	Marketine and
Name of facility when	re abatement	is taking place (3)		among and a color of the color	Type of Facility				
John Bowers						1	ot (K - 12) napter 8 (Othe	er tha	n K-12	2)
Street Address	MATERIAL SECTION OF THE SECTION OF T	CHICAGO CHICAG	SERVICE CONTRACTOR AND AND AND AND AND AND AND AND AND AND			☐ Other	(Private/Com			
111 Willowdale	Avenue					Square Feet	/Hornes, etc. # of Floors	T	Bldg.	Age
City (5)	E ANTONIO TERMINAL SE PRESENTAL ANTONIO SE SERVICIO DE	County (6)		County Code (7)			-	A	
Montelair, NJ 07	7040	Essex		*	(State use only)	Current Use (F	rior if being d	emol	ished)	
Name of Monitoring	man to the second secon			ASCM No.	Name of Abatem	ent Contractor (9)			NAME OF THE	MENTS OF SEC.
n/a					B & G Restor	ation, Inc.				
Street Address	-				Street Address		ner an ny sarahatan na kaominina dia pambanana mandhi in amin' Principal dia mandhi ang mandhi ang mandhi ang mandhi ang mandhi ang mandhi ang mandhi ang mandhi ang mandhi a Principal dia mandhi ang mandhi ang mandhi ang mandhi ang mandhi ang mandhi ang mandhi ang mandhi ang mandhi a			CHILDREN AND A
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City, State, Zip Code					City, State, Zip Co					
Project Manager for M	Aprillaring Fire		Phone Num	hor	Lincoln Park Telephone Number	THE RESIDENCE OF THE PARTY OF T	Tuoense Nu	mha		TO THE WAY
r toject Manager for N	AOIRO III G I KA	1)	I TIQUE INGUIA	ÒĒ1	973-696-686		0378	111001		
Scheduled Start Date	(10)	Isched Cor	npletion Date (1	1)	Name of OSHA N	Ionitor				
	1.0)				B & G Restor	ation, Inc.		140 PM6.44		reconstruction
0ccupancy Status Du	rino Ahateme	11/18/201			Street Address	D !				
Facility closed/v	The state of the s				City, State, Zip Co			120		ENGTH-074-037
		of normal facilit		9	on, dals, ap de					
Other-Describe	:				Lincoln Park,	NJ 07035	Freeh harbors Freehold Mill Mill Cold Science London	o sender sam	-	r-u calori iladristia
Scope of Work (chec	ck all that appl	у)							No. No. No. of Control of	
Demolition	\boxtimes	Renovation			Full Containment wi	inegative pressure	☑ Glovebag	ргос	edure	
⊠ >3 sf or >3 lf		≥160 sf or ≥260			Mini-enclosure		Non-friab	e pro	cedur	e
Location of		is location non by maintenance	maily used sole	1	5 55 25 VE 1 200VE		6		E	2 2
asbestos-conta material to be	ening .	staff(12)		Descripti material	on of asbestos-containing (ACM)	Amount (Specify 5	For o) c	10
abated in facility	y (13)	Yes	No N/A		, , , , , , , , , , , , , , , , , , , ,	(LF)	V		a p	L
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	Co. a market and a second									
										ШП
Registered Waste Hau B & G Restoration		19563		Cubic Yards of \ 1 yard		red Landfill source & Recovery	Center			
City, State			Disposal I	The street of the state of the	City, State	The state of the s	THE PERSON NAMED IN COLUMN TWO	********	u-tomer m-man	aller and the second second second
Lincoln Park, NJ			11/18/2		Tullytown, P	1		March Int.		
Completed by (Print o	гТуре)	Title		Signature	Cordona Suni	•	Date	,		



November 14, 2011

B & G RESTORATION INC. 105 Ryerson Ave. Lincoln Park, N.J. 07035

To whom it may concern;

My Crown heating boiler is broken and requires replacement. PSE & G will not replace the unit until the asbestos insulation is removed from the pipes. After receiving a number of estimates for the removal and disposal of the asbestos I have decided to hire your firm. Because my current heating unit is not functional I require your services as soon as possible. Please advise me of the earliest date we can schedule this asbestos abatement project.

Sincerely, John C. Bowers Sr.

Signature

John C. Bours Sr

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT Check # 3503 (Pursuant to N.J.A.C. 8:60 and 12:120)

1108-4358

MAIN HARL & MAIN 10-75-11 11-55-17-4 --

Date of Notification	# C						Owner /		or (2)							
A	11/15/11					are He	alth Sys	tems				*********	to the same of the same of the same of the same of the same of the same of the same of the same of the same of	COPON ANN ARE	ettere.m	
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□ DOH		rgency				Contact					T	Telep	hor	ie N	urnb	er
DEP DOL DOH DOA		cellation	F	atric	ck '	Walsh						DB	(A)	130		•
	L			FA	CIL	ITY IN	FORMA	TION				MATERIAL STREET	UK-WE	-	The same	ESSA-MARIN
Name of Facility Wi	nere Abatem	ent is Taking F	Place (3					of Faci	ity (4)				e anna	STREENES	*******	EN ES VEN GACEN
AtlantiCare Regi								School (
Street Address										Other than K-						
1925 Pacific Ave	<u> </u>						-			ate & commerc					tc.)	
							Sque	re Feet		# of Floors	E	ildg.	Age	3		
City (5)		County (6)	Col	inty (Cod	e (7)			/D : .	ļ						
Atlantic City		Atlantic								f being demol	shed)					
en and a supplemental and a supp		1			1.	20111		ical Ce							-	-
Name of Monitoring		by Building Ow	ner (8)		A	SCM N		e of Aba eTech		t Contractor (9))					
TTI Environment				-				t Addre								
1253 North Chur	ch Street						3	30x 25								
City, State & Zip Co					- 500		City,	State &	Zip Co	odę						
Moorestown, NJ			00/00/00/00/00/2017					berton								
Project Manager for	· Monitoring	Firm	Telep					hone N			License N			_		
Jim Guilardi		OPTIMALISMAZI IN A SHARIFFARING WARRING	856-8		-			265-21		<u></u>		00	52	9	-ACMI	h.mirenoide.
Scheduled Start Da 11/18/1		Scheduled Co	mpletio 11/21		te (11)		of OS								
Occupancy Status		ment (Check o						t Addre								de samene
Facility Clos	sed/Vacated	During Entire i	eriod o	of Aba	ater	nent		Haddo								
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No. of the state o	2 PM Star						Wes	tmont,	NJ 08	3108						
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⊠ ≥160 sf ≥26			n	Den	noli	tion			Ħ	Glove Bag Pr	ocedures					
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	terial (ACM) BE ABATED		Maint	olely I		or		terial (A nermal s		. `	SF or LF)		20	773	in c	m
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AbateTech, Inc.						3750		2	TRR	F Landfill						
City, State		"/**an-distanting					Disposa	al Date		State						•+
Lumberton, NJ								1/11		rtown, PA						
Completed By (Prin	t or Type)			Titl			Signatu	re .			and the second section of the section is	Da	ie.		and the co	
Gwen Trumbetti				Op	ps.	Coord	10	AA	-			11	11	5/1	ì	
to a commence and a substitute of the substitute			-				X	PC>CY						-		

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

PROFESSION INTO THE

CR#2172

Dais of Motification (1)		/ 1					ing Owner/Operator niversity	(2)	SOLEMENT Street was - commerce or company	- des ses manque			No.
Agencies Notified ⊠ EPA 0 L 43 ⊠ DOLVVD \$406	Type Not ⊠ Initial ☐ Amen	ided			1#	eet Addres 27 Road 7, State, Zig	1 Bidg 4086			******			
☑ DHSS 0 345		dment #	-	_	1		y, NJ 08854						
(NUAC 5:23-8)	Emerg justific	gency (ir cation)	nciud	ng	-	ne of Cont			Telephone Nur	mber			100
	☐ Cance	THE PERSON NAMED IN COLUMN			N	like Smit	n		Charles (Marie Marie				
A COLUMN TO SERVERY				10 mm 20 mm	F	ACILITY	INFORMATION	W. Company					
Name of Facility Where	Abatement	is Takin	g Pia	ce (3)				Type of Facility	(4)			•	-
Armitage Hall								School (K-1	2)				
Street Address 311 N. 5 th Street Bi	dg 7036	7,427							8 (Other than K-1 private and comm		buildir	1 9 3,	
City (5)							***************************************	Square Feet	# of Floors		3ldg.	Age	
Camden								46000	4		304	7	
County (6)			-	4	Co	unty Code	(7)(STATE USE ONLY)	Current Use (P	rior if being demo	Wshed)	#79/\$de-Name -		-
Camden								University					
Name of Monitoring Firm	Hired by B	uilding (Owne	r (8)	ASC	M No.	Name of Abateme	ent Contractor (9)		********		100
ATC					00	098	BRISTOL EN	VIRONMENTA	L, INC.				
Street Address					774		Street Address						-
3 Terri Lane						F2	1123 BEAVE	R STREET					
City, State, Zip Code							City, State, Zip Co	ode		anie citabitate	-		
Burlington Townsh							BRISTOL, PA	19007					
Project Manager for Moni	itoring Firm			1	lephon		Telephone No.		License No.	Photo: Name of Street, or other	nin on mingregal		-
Brian Kearney Start Date (10)		100				0088-8	215-788-6040		00509				
11 / 22 /	11					ate (11)	Name of OSHA M BRISTOL EN		L, INC.			-	
Occupancy Status During Facility Closed/Vacate					mont		Street Address	A Children per perspe	and the second second second second		TY BUTTON		-
Abatement Performed	Outside of	Normal	Facil	ity Hou	ırs - De	escribe	1123 BEAVER City, State, Zip Co		· · · · · · · · · · · · · · · · · · ·	-			
Time of Abatement:	AM	PA	N <u>5:0</u>	QPM-5	:00AN	A	BRISTOL, PA						
Scope of Work (Check all	that apply)						DIGIOE, FA	13007	************				
⊇3 sf or ≥3 lf ≥160 sf or ≥260 lf			-	enovat emoliti			☐ Mini-Encl ☐ Glovebag	Procedure	gative Pressure	sre-			
A STATE OF THE PARTY OF THE PAR				s Loca		1					oaten	ent 7	-
Location of Asbestos-Containing A	The state of the s	(8.8)		Norma ed Sol			Description of				-	T	1 100
TO BE ABAT	TED	WI)	M	sinten;	ance/	Asbe	estos Containing Mat , thermal systems in	enal (ACM)	Amount (Specify	Removal	Repair	Encapsulate	-
IN Facility	¥		Cus	todial (12)			surfacing, VAT,	or	SF or LF)	3	15	ned	-
(13)		ŀ	Yes	No	T N/A		other miscellaneo	us)			-	Ste	The state of the
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ffices 312-318 & 349						Waste	Cubic Yards of	Name of Regist	ered Landfill				÷
offices 312-318 & 349-	: Hauler				JDEP lauler l	D No.	Waste	Name of Regist					4.
offices 312-318 & 349- ame of Registered Waste SERVICE TRANSPO	: Hauler				NDEP	D No.	Waste 30 Cu Yds	MINERVA I		10			
offices 312-318 & 349- ame of Registered Waste SERVICE TRANSPOL by, State	Hauler RT GROU				JDEP lauler l	D No.	Waste	MINERVA I	ANDFILL				.i.,
offices 312-318 & 349- ame of Registered Waste SERVICE TRANSPORT By, State NEW CASTLE, DE 19	: Hauler RT GROU				JDEP lauler l	D No.	Waste 30 Cu Yds Disposal Date 11/29/11	MINERVA I	ANDFILL URG, OH 44688				4.
Offices 312-318 & 349- Offices 312-318 & 349- ame of Registered Waste SERVICE TRANSPOL ity, State NEW CASTLE, DE 19 completed By (Print or Typ) Gino Pizzigoni	: Hauler RT GROU	IP, INC			JOEP lauler I 2099	D No.	Waste 30 Cu Yds Disposal Date	MINERVA I	ANDFILL) te	8/1		

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

Date of Notification (1) 11 15 111					ing Owner/Operator (
10 1/ 25 /	11		St	ate of No	ew Jersey- Dept o	of the Treasury	³ ropery Man	agem	ent		
Agencies Natried Type Netifical	lor.		Stree	at Address)	Company of the Section	and a second control of the second control of the	THE PARTY NAMED IN	Philas Services	**************************************	***
☑ EFA ☑ Initial	1/12	1,1	PC	Box 03	A						
□ DEF □ DCA (NJAC 5:16) □ Amended Amended Amended	- Manuel .	5	City,	State, Zip	Code .	THE COLUMN TWO IS NOT THE OWNER. THE COLUMN TWO		*************			
DHSS Generation		10	Tr	enton, N	J 08625-0034						
DCA justification (NJAC 5:23-8) Cancellation	1)	3	Nam	e of Conta	ect		Telephone Nur	nber			
			FA	CILITY	NFORMATION						PA SECURIO
Name of Facility Where Abatement is Ta	king Plac	m (3)				Type of Facility	1				-
Ancora Psychiatric Hospital	ing rac	(C)									
Street Address			;			School (K-13) Subchapter N	Other than K-1	2)			
301 Spring Garden Rd						Other (i.e., p	ate & commerc	dal bud	dings	•	
Gily (5)		-,				homes, etc.) Square Feet	# of Floors	E	lag. A		Salvanee a
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-		1	10								
BIII Wiessgarber							00847				
Start Date (10) Sc 	heduled C	Comple i7	etion Da	ite (11) 12	Name of OSHA M	oniter					
Occupancy Status During Abatement (Cr	eck only	one)			Street Address						
☐ Facility Closed/Vacated During Entire	Period of	Abate	ement		1121 N. Bethl	ehem Pike - Su	e 60				
					City, State, Zip Co	de		C10 0			
Time of Abatement: 7:00AMF	M/5:00F	M	АМ								
Scope of Work (Check all that apply)						•••••					
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63 1.00 or to 52.00 ii	□ 00	.	00				Friable Procedu	ne			
						1		Ab	atem	ent T	ype
Location of								1-	T	1	Τ
Asbestos-Containing Material (ACM)							Amount	l ê	ép	2	Enclosure
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(13)	-	(12)	. ,			ous)		-		al al a	6
	Yes	No	N/A							(li)	
Exterior - Roof - Larch Hall			Ø	White	Painted tar paper	sealant	2520 SF				
Exterior Roof-Birch Hall			8	White	Painted tar paper	sealant	2524 SF	183			
			15				***************************************	ī		П	
					***************************************	-			-		
					·	<u></u> L.			lan.	Ш	Ц
Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill STG Hauler ID No. Waste 1.70 Minerva Laur If III											
City, State	and the second second		77220		Disposal Date	City, State		-		-44000-00	
New Castle, DE					1/7/12	Waynesburg	OH 44688				
Completed By /Print or Type:	ille				Signature,	7,	I.D.	ote ,		1	
Nammonton, NJ 08037											
		Vlana	ger		Alsetie	00-1/1X	cor 1	0/2	5	1/11	

Controlled

1121 N. Bethlehem Pike, Suite 60 Sprin; House, Pa. 19477

(215) 542-7000 Fax + .15) 542-5635

Environmental Systems, Inc

November 15, 2001

VIA Fax to 609-633-0564

NJ Dept of Labor & Workforce Development Attn: Tom Voorhees Asbestos Control and Licensing Section 1 John Fitch Plaza, 3rd Floor Trenton, NJ 08625-0949

RE: Revised Notification-Ancora Psych Hospital - Larch Hall- Birch Hill

Dear Mr. Voorhees:

Per our phone conversation this morning I am faxing to you the amended notification for Ancora Psych Hospital — Birch and Larch Hall.

This amended version does not change the scope of work it adds on / has the additional information at the base of the notification completing the Cubic Yard; of waste – (120 Cubic Yards) and a Disposal Date of 1/7/12.

We are completing this information per the request of the inspector esterday afternoon.

Hard copy will follow in Mail.

Respectfully,

Susan Erney Controlled Environmental Systems Controlledenviro@aol.com



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

ch# 18127

Date of N	Notification (1)	11		-			Name of E	Building Owner	/ Opera	ator (2)	STANCE OF LEGICAL	W Lade Con	STATE OF THE PARTY.		A CONTRACTOR OF THE PARTY OF TH
	/ /						Street Ad	dress							
1		e of No					8 Hambur								
Image: section of the content of the	DEP		Initial Amen					e, Zip Code NJ 07457							
	DOH	Common total	Amen				Name of 0	Contact			Telepho	ne N	umb	er	
	DOL DCA	H	Emer			/ justification	Alex Bayl	or			Mar.		9		
						F	ACILITY IN	FORMATION			ACTURAÇÃO ASSOCIAÇÃO				
	Facility Where A	batem	ent is	Tak	ing F	Place (3)		Type of Facility	(4)		ANIF DI LI				
Verizon								1 () () ()	ool (K-						
Street Ac	ddress							The state of the s	700 P	r 8 (Other private &					
8 Hambu	rg Turnpike				a dise			D. C.		nes, etc.)	ommer or	ai .			
City (5)	Cou	unty (6)				County Code	(7)	Square Feet 60,000		# Of Floor	s	Bu	ildin	g Age	
Riverdale	Mor	ris						Current Use (P	rior if b	eing dem	olished)	50-	-		
								Telecommunica				_			
Name of	Monitoring Firm	Hired	by Blo	dg. (Own	er (8)	ASCM NO	Name of Abate			(9)				
TTI Envir	ronmental Incorp	porated	i					Slavco Construc	ction In	c.					
Street Ac	idress th Church Street							Street Address							
	te, Zip Code				-			164 Getty Aveni	ue						
Mooresto	wn, NJ 08057							City, State, Zip	Code						
Project N Harold Ba	Ingr. For Monito	oring Fi	rm			Telephone Nu 908-812-6742	mber	Clifton, NJ 070	11						
	d Start Date (10)		Sche	d. C	omp	letetion Date (1	11)	Telephone Nun	nber	Store in State Con-	License	Num	ber		
	/ _14 /_	11	-	12	- /	<u> 31</u> /		973-478-484	48		00724				
Occupan	ncy Status Durin	g Abate	ment	(Ch	eck	Only 1)		Name of OSHA		or			-		
	Facility Closed							Slavco Construc		c.					
	Abatement Abatement Pe	rforme	d Outs	side	of N	ormanl Facility	,	Street Address 164 Getty Avenu							
₽	Hours - Descri	7		10.6	-			City, State, Zip	******						
	RO	OM/AR	EA VA	CAN		URING REMOV	/AL	Clifton, NJ 070							
Scope of	f Work (Check A	II That	Apply)											
	Demolition			~		Renovation	$\overline{\mathcal{Q}}$	Full Containme		n Negative	Pressur	е			
	≥3sf or_≥3lf ≥160 sf or ≥26	o If					H	Mini - Enclosur Glovebag Proc							
	_100 01 01 <u></u>	•						Non-Exempted		d Non-Fria	ble Proce	edure	3		
<u> </u>	Location of	-		Is			Descript	ion of			Abateme	ent T	vpe		
Asb	estos Containin	g	Lo	catio	on	As	sbestos - C	ontaining			R		1000	E	E
	Material (ACM)		1000000	rma		,,	Material	30.00		Amount (Specify	E M	R		N C	N
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	t Stair Landing		-	7		VAT & Mastic				42 SF	V	╀-			
Electrical	Room wer Room		H	7	4	VAT & Mastic				147 SF 446 SF	\ \ \	╁	H	+	+ +
Diesel Po	WGI INOUIT					VAT G Mastic				1,001					
Name of	Registered Was	te Haul	ler	200		NJDEP Waste	Cubic Yards	Name of Regist	tered L	andfill.					
Slavco Co	onstruction Inc.					18508	of Waste	G.R.O.W.S. Nor	rth Land	dfill					
City, Stat	te					1	1	City. State							
Clifton, N.	J						Date TBD	Morrisville, PA		90					
Complete	ed by (Print or T	ype)				Title			ature	4-32	~~			Date	
Vivian Jur	rcevic					Administrative	Assistant	1.2%	, A.	m M	1	ž ÷	<i>,</i> =,	1 10	0/28/11



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

Date of Notification (1) November 10,2011			Name of I)wner/Op	perator (2)							
Agencies Notified Type Notification			Street Ad		nnike									
X EPA Initial X DEP X Amended Amendment #_	1	_	City, State Riverda	e, Zip Co	de	y 0745	7							
☐ Emergency (initial plane) ☐ DOH justification) ☐ DCA ☐ Cancellation	cluding		Name of o		r				Tele	ephone Nur	mber			
			FACIL	ITY INFO	RMATIC	NC	T	-						
Name of Facility Where Abatement is Taking F	Place (3)						_	of Facility (4						
Street Address							□ 8	School (K-12 Subchapter	8 (Othe	er than K-1	2)			
8 Hamburg Turnpike								Other (i.e. pretc.)	rivate &	k commerci	al build	lings,	nome	es,
City (5) Riverdale							Squar 6000	e Feet 0	# of 3	Floors		ldg. <i>A</i> 0+	.ge	
County (6) Morris			County C (STATE U				Curre	nt Use (Prio	r if bei	ng demolis	ned)			
Name of Monitoring Firm Hired by Building Ov TTI ENVIRONMENTAL	vner (8)		ASCM	No.				ement Cont		(9)				
Street Address						Street /						-		
1253 NORTH CHURCH STREET City, State, Zip Code	15					City, St	ate, Zi	p Code						-
Moorestown,NJ 08057			Telephon	e No		Clifto	3)	w Jersey	0701	1-1802 License N	lo.		-	
Project Manager for Monitoring Firm Harold Baldwin			908-81	2-6742		973-4	78-4	848		00724				
			mpletion E 31st.,20					IA Monitor nstruction	ı Inc.			(4		
Occupancy Status During Abatement (Check	Only One	e)				Street .				¥				
Facility Closed/Vacated During Entire Pe	riod of A	bater	ment			164 (p Code						
Abatement Performed Outside of Norma Other – Describe: 8:00 AM-4:30Pm	1 Facility	Hour	8		_]			w Jersey	0701	1-1802				
Scope of Work (Check All That Apply)	_		301			ΙΨ	1 -							
≥3 sf or ≥3 lf x ≥160 sf or ≥260 lf		enov emol					Mir Glo	I Containme ni-Enclosure vebag Proc n-Exempted	edure				'e	
	Ι						1100	II-Excilipted	() un	0 11011 1 110	T	Abat	emen	t
Location of	N	Loca Iorma	ally		Des	scription	of						/ре Т	1
Asbestos-Containing Material (ACM)			ely by ance/		tos Cont thermal					mount Specify	N N		Enc	g.
TO BE ABATED In Facility	Cust	odial (12)	Staff?	(1.0.	surfac	cing, VA	T, or			or LF)	Remova	Repair	Encapsulate	Enclosure
(13)	Yes	No	N/A		otner n	niscellar	ieous)				/al	=	ilate	Jre
BASEMENT STAIR LANDING		X			VAT	& MAS	STIC)	42sf	x			
ELECTRICAL ROOM		X			VAT	& MAS	STIC		1	47sf	x			
DIESEL POWER ROOM		X			VAT	& MAS	STIC			146sf	x	_	_	
										1146	x			
Name of Registered Waste Hauler		111111111111111111111111111111111111111	NJDEP W Hauler ID		of Was	Yards ste		G.R.O.	30	ered Landfi andfill	ı			
Slavco Construction Inc.	,	1	18508		TBD					.arraini		755		
City, State Clifton, New Jersey 07011-1802					TBD	sal Date		City, State Morrisv		a. 19067				
Completed by Vivian D. Jurcevic	Title	n ^	ssistanc	۵	S	Signature		M	iléi	1.	ate 1/10/	11		

	The state of the s	NOTI	FICAT Pursu	TION OF	ASBEST	OS AB	3ATEM 2:120)	THAI	CK	22	62 1-W	尼丁	10000	1	
Date of Notification (1)			Nar Ge	ne of Bu	ilding Owi	ner/Ope	erator (esider	(2) nce	弘		3 (I \(\frac{1}{2}\)	51			
Agencies Notified	Type Notification		132777	eet Addr Orake \		4			LI N	OV	1 5 2011	ļļ.			
× EPA × DEP × DOL	Initial Amended Amendment #				Zip Code ver NJ 0				LASb		CHROL &				
DOH DCA	Emergency (indigustification) Cancellation	cluding	80000	me of Co eorge	ontact		,	A A	ing or experience of the		phone Numb	oer			
				FACILIT	Y INFOR	MATIO	N		Facility (4)			بريان موجد	Section of the second		\dashv
Name of Facility Where George J Badame	Abatement is Taking F / Residence	Place (3)	2010-1-100-					Sc St	chool (K-12)	(Othe	r than K-12)	11. 31.41.4	h		
Street Address 4 Drake Way								Square	c.)		commercia		g. Ag		1
City (5) Toms River NJ 08	753							1000+		2	ng demolish	35-	+		
County (6) Ocean			(S		E ONLY)			Resid	lence						
Name of Monitoring Fir	m Hired by Building Ov	wner (8)		ASCM N	۷o. •		Pern	aco In		ractor	(9)				
Street Address							PO	Address Box 32	9						
City, State, Zip Code							City, S Wes	State, Zip st Berlin	Code NJ 0809	91					
Project Manager for M	onitoring Firm		Te	elephone	e No.			hone No -753-98			License N 00727	0.			
Start Date (10)		Scheduled 12/1/11	Comp	letion D	ate (11)			of OSH	A Monitor C.						
	ing Abatement (Check	Only One)						t Addres Box 32						000	
Facility Closed/Vi Abatement Perfo Other – Describe	acated During Entire P rmed Outside of Norma :	eriod of Ab al Facility F	ateme lours	nt		_	City,	State, Zi		91					
Scope of Work (Check ≥3 sf or ≥3 lf ≥160 sf or ≥260 l		Re De	novati	on	**			Mir	ni-Énclosure	e cedure	n Negative I			е	
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Asbestos-Contain TO BE In F	tion of ing Material (ACM) <u>ABATED</u> acility 13)	Used Mair Custo	ormally Solely ntenan odial S (12)	y by ce/ taff?	Asbest (i.e.	os Con therma surfa	I syste	on of Materia ms insula /AT, or laneous)	ation,	(Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
Exterio	or Siding	Yes	No	N/A X		Exte	erior S	Siding		2	100 SF	x			
Extend	of Olding											+	_		-
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Name of Registered	Waste Hauler			JDEP V auler ID		Cubi of W	c Yard	s	110000000000000000000000000000000000000		tered Landf	ill			
United Container				2459		2	osal Da	ate	G.R.O	ite					
City, State Elm NJ						12/1	/11		Morris	ville F	PA 19067	Date			
Completed by Anthony T Perna		Title Presi	dent				Signat	l		_	4.7	11/10/	11	- 54	

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

#3194

Date of Notification (1)		Name	e of Building Ov	mer/Operator	r (2)	, ,		T	
11-10-11		15.5	SEBAST	TIEN	**	<i>*</i>		1	Ì
Agendes Notified Type Notification			t Address	2	2.0				
D. EPA Initial			-106		.D				
□ DEP □ Amended			State, Zip Code		т . ¬	k . a			
DOL Amendment Emergency				N N	I 07				
DOH justification)	-		e of Contact			Telephone Num	Der MA	77	93
☐ DCA ☐ Cancellation	1	15.	SEBAS	1160		Hierous	me	11	7.7
Name of Facility Where Abatement is Takir	ng Place (3)	- FA	ACILITY INFOR	MATION	Type of Facility (4)			
S. SEBASTIEN			S =		☐ School (K-1			- 0	
Street Address	`	• •			☐ Subchapter	8 (Other than K-12))		
7-10 RIVER RE	0	0.0 0.0		W.		rivate & commercia	l buildi	ngs, ho	mes,
City (5)					etc.) Square Feet	# of Floors	Blo	lg. Age	
FAIRLAWN	٠			15	2000	7		0)	IRC
County (6)		Coun	ty Code (7)			or if being demolishe		-/	102
BERGEN	K 25	(STAT	TÈ USE ONLY)	 .	RESIDE		- 70		
Name of Monitoring Firm Hired by Building	Owner (8)	AS	CM No.	Name	of Abatement Cor				
- A				Bes	t Removal	Inc ·			
Street Address				1	Address	•		,	
					O South B	River St	82		
City, State, Zip Code					State, Zip Code				-
Project Manager for Monitoring Firm		T=:				,N.J. 07		•	•
		1 etep	hone No.	201	hone No. -329-7444	License No 0038		2	
Start Date (10)			on Date (11)		of OSHA Monitor	onmental S	erv	ice	s
Occupancy Status During Abatement (Chec		00			Address				
☐ Facility Closed/Vacated During Entire	Period of Aha	tement		280	Huyler	St _		27	
☐ Abatement Performed Outside of Norm	nal Eacility Ho	ens en	20	City, S	State, Zip Code				
Other - Describe: 8AM	5 pm			Sou	th Hacker	sack ,N.J	. 0	760	6
Scope of Work (Check All That Apply)					· · · · · ·				
23 sf or ≥3 lf	A 1997 1997 1997	ovation				ent with Negative Pr	essure	· .	
☐ ≥160 sf or ≥260 lf	· Den	olition			Mini-Enclosure Glovebag Proc				į
	*					(*) and Non-Friable	Proce	dure	
	Is Lo	cation					Α	bateme	ent
Location of		nally lolely by		Description				Туре	$\overline{}$
Asbestos-Containing Material (ACM) TO BE ABATED	Mainte	nance/		Containing Name of the Containing Name of the	Material (ACM)	Amount (Specify	2	_ 9	1 6
in Facility	■ 10 100 100 100 100 100 100 100 100 100	al Staff? 2)		sunfacing, VA	T, or	SF or LF)	Removal	Repair	Se Se
(13)	L	- /	04	her miscellar	neous)		Wa	Repair	Enclosure
	Yes N	lo N/A						. 6	
BASEMENT		X	THERM	AL IN	SMITION	90 LF	X		
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	+	+-	+				-+	+	+
Jame of Degistered Marte Lleuber		NJDEP	NA/Ambri I O	, this Varia	I Name of	Pagistage d Lander			1
Name of Registered Waste Hauter DJM Transport , Inc		Hauler I		ubic Yards Waste	1	Registered Landfill		7	. م د ـ
		2239		y0	Cumbe	rland Cou	nty	ьал	10.1
City, State	22000		Ď	isposal Date		-			. 1
South Kearny N.J.				1.22-	210112	urgh PA,		4.2	
Completed by	Title			Signature		Date	30	^	1/
R. VELDRAN	Estin	ator		IRY	eldran	1.1	-10	0-1	1

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

		110			nt to NJAC 8:60	and 12:12	20)			Gradustas North Contract	debesed injective The	152.4. 4	o , j
Date of Notification (1)	ovember 9, 201	11			Name of Building	Owner/Ope Disant	rator (2) is Contracting		CEL	WC	图	sit)
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Project Manager for Moni	toring Firm		Telephone N	Number			ne Number 9-9932		License N 00624	umber			
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Nicholas Fer	micola	Proj	ect Manage	1	1 1/1	Will	In						

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2) Date of Notification (1) Fran Menard November 9, 2011 Agencies Notified Type of Notification Street Address 1 5 2011 138 Hillcrest Road [x] EPA [x]Initial Notification Amended Notification] DEP City, State, Zip Code Amendment # [x] DOL Flemington, NJ 08822 ASDESTOS GUNTAGO Emergency (including [x] DOH justification) Name of Contact Telephone Number] DCA Cancellation Fran Menard FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (k-12) Residence Subchapter 8 (other than k-12) Street Address [x]Other (i.e., private & commercial buildings, 805 Laurel Blvd. homes, etc.) # of Floors Bldg. Age County (6) County Code (7) Square feet City 60 (STATE USE ONLY) 1000sf Current Use (Prior if being demolished) Lanoka Harbor Ocean Residence Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Guardian Contracting, Inc. N/A Street Address Street Address 1889 Route 9, Unit 61 City, State, Zip Code City, State, Zip Code Toms River, New Jersey 08755-1271 License Number Telephone Number Telephone Number Project Manager for Monitoring Firm 00624 732-349-9932 Name of OSHA Monitor Scheduled Completion Date (11) Scheduled Start Date (10) E.M.S.L. Analytical 11/23/11 11/28/11 Street Address Occupancy Status During Abatement (Check only one) 1056 Stelton Road Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe Piscataway, New Jersey 08854 Full Containment with Negative Pressure Scope of Work (Check all that apply) 1 Mini-Enclosure] Glovebag Procedure ſ Renovation >3 sf or ≥3 lf Non-Exempted (*) and Non-Friable Procedure [x] Demolition [x]≥160 sf or ≥260 lf [X] Abatement Type Description of Is Location Amount Asbestos-Containing Normally used E N N Location of E (Specify SF Solely by Material (ACM) P C C Asbestos-Containing Material (ACM) M or LF) Maintenance/Custodial (i.e., thermal systems L A TO BE ABATED 0 P 0 insulation, surfacing, Staff in facility V S S VAT, or (12)(13)U U A other miscellaneous) R N/A YES NO F X 800 sf X Asbestos siding Exterior Name of Registered Landfill Cubic Yards of Waste NJDEP Waste Hauler ID No. Name of Registered Waste Hauler T.R.R.F. 20223 Guardian Contracting, Inc. Disposal Date City, State City, State Tullytown Pennsylvania 11/29/11 Toms River, New Jersey Date Title Completed by (Print or Type) 11/9/2011 Project Manager Nicholas Fernicola

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

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State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12/120) Name of Building Owner / Operator Date of Notification (1) NOV 1 5 2011 11/6/2011 Don Wallar Agencies Notified Type Notification Street Address 2 Buckingham Avenue X **EPA** ASBESTOS CONTROL & Initial City, State & Zip Code DEP LICENSING Amended Trenton, NJ DOL M Telephone Number Name of Contact DOH Emergency Cancellation Don Wallar DCA **FACILITY INFORMATION** Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Residence Subchapter 8 (Other than K-12) Street Address Other (i.e. private & commercial buildings, homes, etc.) 2 Buckingham Avenue # of Floors Bldg. Age Square Feet 60 County Code (7) 2000 County (6) City (5) Current Use (Prior if being demolished) Mercer Trenton Residence Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. ALPHA ENVIRONMENTAL Street Address Street Address 2129 Rt 33 City, State & Zip Code City, State & Zip Code Hamilton, NJ License Number Telephone Number Telephone Number Project Manager for Monitoring Firm 01091 215-295-1004 Name of OSHA Monitor Scheduled Completion Date (11) Scheduled Start Date (10) **EMSL** Analytical 11/18/11 11/16/11 Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 107 Haddon Avenue Abatement Performed Outside of Normal Hours - 7am to 3pm City, State & Zip Code Westmont, NJ 08108 Describe: Facility Occupied During Abatement Scope of Work (Check all that apply) Full Containment with Negative Pressure Mini-Enclosure Renovation ≥3 sf or ≥3 If Glove Bag Procedures Demolition ≥160 sf ≥260 lf Non-Exempted and Non-Friable Procedure Abatement Type Amount Description of Is Location Location of (Specify Asbestos-Containing Normally Used Asbestos-Containing SF or LF) Material (ACM) Material (ACM) Solely by Remo TO BE ABATED Mainteriarice or ice thermal systems in Facility Custodial Staff? insulation, surfacing, VAT νa 1 ulate (13)(12)or other miscellaneous) ure Yes No N/A M Pipe Insulation Basement 150If \boxtimes \boxtimes Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste ALPHA ENVIRONMENTAL 0033330 1cubic Grows Landfill City, State Disposal Date City, State Trenton 11/24/11 Morrisville, PA Completed By (Print or Type) Title Signature Date

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11/6/11

Rod Richardson

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

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☑ DOH DCA	Emergency (in justification) Cancellation	ncluding		ame of C			J. L	Ad	Telephone Numb	er	.į		
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Mc Cabe Environm				00110			Street Addre	ss					
464 Valley Brook / City, State, Zip Code							City, State, Z West New	ip Code					
Lyndhurst NJ 070				Telephon			Telephone No. License No. 201-758-7158 001144						
John Chiquiello Start Date (10)		Scheduled	d Com				Name of OS	HA Monitor	I Laboratories	LLC			
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^{*} Do not use this form for asbestos licensure exempted activities.

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Print Form

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) Name of Building Owner/Operator (2) Date of Notification (1) 2011 Irene Russo MOA 14 / 11 11 / Street Address Agencies Notified Type Notification 108 N. Wilson Ave ASBESTOS CONTROL & ☐ Amended **⊠** DEP LICENSIN City, State, Zip Code □ DCA (NJAC 5:16) Amendment # Margate, NJ 08024 Emergency (including □ DHSS Telephone Number Name of Contact ☐ DCA justification) (NJAC 5:23-8) ☐ Cancellation Michael Fox FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Irene Russo Subchapter 8 (Other than K-12) Street Address Other (i.e., private & commercial buildings, 108 N. Wilson Ave homes, etc.) # of Floors Square Feet Bldg. Age City (5) 25 2000 Margate, NJ 08024 Current Use (Prior if being demolished) County Code (7)(STATE USE ONLY) County (6) Residence Atlantic Name of Abatement Contractor (9) ASCM No. Name of Monitoring Firm Hired by Building Owner (8) Controlled Environmental Systems 9012015 **US** Enviromental Street Address Street Address 1121 N. Bethlehem Pike - Suite 60 1222 Wilder St City, State, Zip Code City, State, Zip Code Spring House, PA 19477 Phila, PA 19147 Telephone No. Telephone No. License No Project Manager for Monitoring Firm 00847 215-542-7000 215 868 5502 Gartou Cavitella Name of OSHA Monitor Scheduled Completion Date (11) Start Date (10) CES 11 / 15 / 11 11 / 15 / 11 Street Address Occupancy Status During Abatement (Check only one) 1121 N. Bethlehem Pike - Suite 60 □ Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: 7:00AM-3:00PM/____PM-__ Spring House, PA 19477 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ≥3 sf or ≥3 lf
 ≥160 sf or ≥260 lf □ Renovation Demolition ■ Non-Exempted (*) and Non-Friable Procedure Abatement Type Is Location Normally Description of Location of Used Solely by Encapsulate Remova Amount Asbestos Containing Material (ACM) Asbestos-Containing Material (ACM) Maintenance/ (Specify (i.e., thermal systems insulation, surfacing, TO BE ABATED Custodial Staff? SF or LF) VAT, or IN Facility (12)other miscellaneous) (13)Yes No N/A 30 \boxtimes \boxtimes Pipe Wrap Crawl Space

П Name of Registered Landfill NJDEP Waste Cubic Yards of Name of Registered Waste Hauler Hauler ID No. Waste Conestoga Landfill Allied Waste-Republic Services 348394 Disposal Date City, State City, State 420 Quarry Rd, Morgantown, PA 19543 Telford PA Signature Date

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Office Manager

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Completed By (Print or Type)
Patricia Visco

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

Controlled

1121 N. Bethlehem Pike, Suite 60 Spring House, Pa. 19477

Environmental Systems, Inc

(215) 542-7000 Fax (215) 542-5635

November 14, 2001

VIA Fax to 609-633-0664

NJ Dept of Labor & Workforce Development Attn: Tom Voorhees Asbestos Control and Licensing Section 1 John Fitch Plaza, 3rd Floor Trenton, NJ 08625-0949

RE: EMERGENCY NJ Asbestos Notification for the Russo Residence

Dear Mr. Voorhees:

I am faxing to you a request for approval of an Emergency Asbestos Notification for the Russo Residence. Location of the property is 108 Wilson Ave – Margate, NJ.

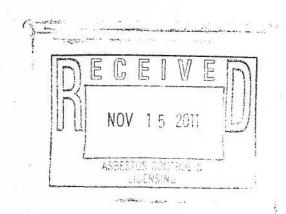
The house is going to Settlement and the Asbestos needs to be removed ASAP.

The Contractor doing the property renovations ahs requested this work occur tomorrow.

I am enclosing a \$200 check #6821 with the original notification, which will be sent via UPS today.

Respectfully,

Michael Fox Controlled Environmental Systems Controlledenviro@aol.com



IDS SERVICES, INC 7200 Merion Trace Upper Darby, PA 19082

11/14/2011

New Jersey Department of Labor Mr. Thomas Voorhees P. O. Box 949 Trenton, New Jersey 08625-0949 Office: (609) 633-3760

RE: WAIVER OF 10 DAY ASBESTOS NOTIFICATION

TYPE: RESIDENTIAL PROPERTY

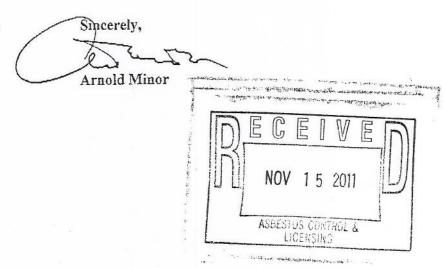
OWNER: Irene Russo

108 N. Wilson Avenue

Margate, New Jersey 08402

Dear Mr. Voorhees,

We are asking for a waiver of the 10 Day Notification for the Removal of Asbestos found during a home inspection in the crawl space area at the above location. The property is being sold and settlement is scheduled for November 18, 2011. We are asking for this waiver due to that if the property cannot settle, there will be a major loss of funding and penalties. We have hired Controlled Environmental Systems to abate the property. We would appreciate your help Obtaining this waiver.



West 1

ASB-41

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

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Date of Notification (1) 11/14/2011						Name of Building Owner/Operator (2) Rite Aid Corporation									
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Linden, New Jersey						Signature :	-			Date					
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State of NJ

Notification of Asbestos Abatement (Pursuant to NJAC 8:60 and 12:120) D&S Proj. #: MS 11-460 Name of Building Owner/Operator (2) Date of Notification (1) $\frac{1}{1} \frac{1}{1} \frac{1}$ MARY ANN O'SULLIVAN Type Notification Agencies Notified U Street Address Li **EPA** 601 SOUTH AVENUE Amended DEP ASSESTOS CONTROL & City, State, Zip Code Amendment #: LICENSING X DOL GARWOOD, NJ Emergency Telephone Number (including Name of Contact □ DOH justification) MARY ANN O'SULLIVAN ☐ DCA Cancellation **FACILITY INFORMATION** Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) Subchapter 8 (Other than K-12) MARY ANN O'SULLIVAN Other (Private/Commercial Street Address Bldgs./Homes, etc. Bldg. Age Square Feet # of Floors 601 SOUTH AVENUE County Code (7) County (6) City (5) Current Use (Prior if being demolished) (State use only) UNION GARWOOD Name of Abatement Contractor (9) ASCM No. Name of Monitoring Firm Hired by Bldg. Owner (8) D & S RESTORATION, INC. Street Address Street Address 20 California Ave. City, State, Zip Code City, State, Zip Code Paterson, NJ 07503 License Number Telephone Number Phone Number Project Manager for Monitoring Firm 00159 973-345-8020 Name of OSHA Monitor Sched. Completion Date (11) Start Date (10) D & S Restoration, Inc. Street Address 11/30/11 11/21/11 Occupancy Status During Abatement (Check only one) 20 California Avenue Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Other-Describe: NORMAL HOURS Paterson, NJ 07503 Full Containment w/negative pressure Scope of Work (check all that apply) Mini-enclosure
Glovebag proce \boxtimes >3 sf or >3 If Renovation Glovebag procedure Non-Exempted (*) and Non-friable procedure Demolition >160 sf or ≥260 lf R E Is location normally used solely E е e Location of n by maintenance/custodial Amount Description of asbestos-containing n m p asbestos-containing C (Specify SF or staff(12) C material (ACM) 0 a material (acm) to be а abated in facility (13) N/A Yes No Ø 62 L FT PIPE INSULATION BASEMENT X 50 SQ FT **BOILER INSULATION** BASEMENT BOILER Name of Registered Landfill Cubic Yards of Waste NJDEP Hauler ID# Registered Waste Hauler TULLYTOWN, RESOURCE RECOVERY 2 YDS D & S RESTORATION, INC. 13506 City, State Disposal Date City, State TULLYTOWN, PA 11/22/11 PATERSON, NJ 07503 Date Signature Completed by (Print or Type) Title 11/11/11

PRESIDENT

BOGDAN IOLDZIC

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State of NJ Notification of Asbestos Abatement

D&S Proj.	#: MS 11-457			(Pursua	ant to NJAC	8:60	and 12:120)	sangaray ind soy can a Parities garage		reminiscopiem and	ranta og r de lugar			
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City, State PATERSON, NJ 07503			Disposal D 11/15/1			City, State TULLYTOWN	, PA					
Completed by (Print or Type)	Title			Signature				I D	ate			

Kuusela

From: Nita Duncan [mrsduncan01@yahoo.com]

Sent: Monday, November 07, 2011 5:02 PM

To: residential@ds-restoration.com

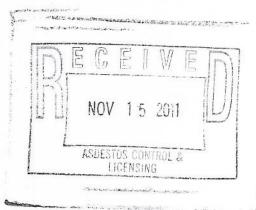
Subject: Diaz Residence

To Whom It May Concern:

Our furnace is no longer working and needs to be replaced immediately. The contractor that will be replacing the furnace understands the health hazards of asbestos and will not do any work unless the asbestos in and around the furnace area is removed completely. Can you please wave the ten day notice to the state as we are in need of heat and have to have this work completed quickly?

Please Advise,

Nithalena Duncan Roman L. Diaz Residence 33 Lexington Avenue Montclair, NJ 07042



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State of NJ Notification of Asbestos Abatement

(Pursuant to NJAC 8:60 and 12:120) D&S Proj. #: MS 11-459 L Us Name of Building Owner/Operator (2) Date of Notification (1) |1| |1| ||1| |0| ||1| |1|ROSEANN MCDONOUGH Type Notification Agencies Notified NOV 1 5 2011 Street Address | Initial EPA 294 WALON AVENUE Amended DEP City, State, Zip Code ASBESTOS CONTROL & Amendment #: X DOL SO. ORANGE, NJ 07079 Emergency Telephone Number (including Name of Contact DOH. justification) and the second of the second ROSEANN MCDONOUGH DCA Cancellation **FACILITY INFORMATION** Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) Subchapter 8 (Other than K-12) ROSEANN MCDONOUGH Other (Private/Commercial Street Address Bldgs./Homes, etc. Bldg. Age Square Feet # of Floors 294 WALTON AVENUE County Code (7) County (6) City (5) (State use only) Current Use (Prior if being demolished) ESSEX SO. ORANGE Name of Abatement Contractor (9) ASCM No. Name of Monitoring Firm Hired by Bldg. Owner (8) D & S RESTORATION, INC. Street Address Street Address 20 California Ave. City, State, Zip Code City, State, Zip Code Paterson, NJ 07503 License Number Telephone Number Phone Number Project Manager for Monitoring Firm 00159 973-345-8020 Name of OSHA Monitor Sched. Completion Date (11) Start Date (10) D & S Restoration, Inc. Street Address 11/30/11 11/21/11 20 California Avenue Occupancy Status During Abatement (Check only one) City, State, Zip Code Facility closed/vacated during entire period of abatement. Abatement performed outside of normal facility hours-Describe: Paterson, NJ 07503 Other-Describe: NORMAL HOURS Full Containment w/negative pressure Scope of Work (check all that apply) Mini-enclosure □ Renovation > 3 sf or > 3 lf Glovebag procedure Non-Exempted (*) and Non-friable procedure Demolition >160 sf or >260 lf R E Is location normally used solely E e е n Location of by maintenance/custodial Amount n Description of asbestos-containing m p C asbestos-containing (Specify SF or staff(12) 0 C material (ACM) a material (acm) to be LF) L V abated in facility (13) D Yes No N/A Ø 75 L FT PIPE INSULATION BASEMENT Name of Registered Landfill Cubic Yards of Waste NJDEP Hauler ID# Registered Waste Hauler TULLYTOWN, RESOURCE RECOVERY 13506 1 YD D & S RESTORATION, INC. Disposal Date City, State City, State 11/22/11 TULLYTOWN, PA PATERSON, NJ 07503 Date Signature Completed by (Print or Type) Title 11/10/11

State of NJ

Notification of Asbestos Abatement

(Pursuant to NJAC 8:60 and 12:120) D&S Proj. #: MS 11-456 0年配用1111111 Name of Building Owner/Operator (2) Date of Notification (1) 1 1 1/0 9 1/11 1 RICHARD HAUCK Agencies Notified Type Notification Street Address TIUS POT WON ☐ Initial EPA 429 HENRY STREET Amended DEP City, State, Zip Code Amendment #: ASSESTOS CONTROL & DOL LICENSING M Emergency ROSELLE PARK, NJ 07204 (including DOH. Name of Contact Telephone Number justification) ☐ DCA RICHARD HAUCK Cancellation **FACILITY INFORMATION** Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) RICHARD HAUCK Subchapter 8 (Other than K-12) Street Address Other (Private/Commercial Bldgs./Homes, etc. **429 HENRY STREET** # of Floors Bldg. Age Square Feet County (6) City (5) County Code (7) (State use only) Current Use (Prior if being demolished) UNION ROSELLE PARK Name of Monitoring Firm Hired by Bldg. Owner (8) Name of Abatement Contractor (9) ASCM No. D & S RESTORATION, INC. Street Address Street Address 20 California Ave. City, State, Zip Code City, State, Zip Code Paterson, NJ 07503 Project Manager for Monitoring Firm Phone Number Telephone Number License Number 973-345-8020 00159 Name of OSHA Monitor Start Date (10) Sched. Completion Date (11) D & S Restoration, Inc. Street Address 11/16/11 11/17/11 Occupancy Status During Abatement (Check only one) 20 California Avenue Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Other-Describe: NORMAL HOURS Paterson, NJ 07503 Scope of Work (check all that apply) Full Containment w/negative pressure Mini-enclosure > 3 sf or > 3 lf □ Renovation Glovebag procedure Demolition ≥160 sf or ≥260 lf Non-Exempted (*) and Non-friable procedure Is location normally used solely E Location of E е by maintenance/custodial e Amount asbestos-containing Description of asbestos-containing m staff(12) p C (Specify SF or material (acm) to be material (ACM) C 0 a а abated in facility (13) Yes No N/A **BOILER INSULATION** 30 SQ FT BASEMENT BOILER Cubic Yards of Waste Name of Registered Landfill Registered Waste Hauler NJDEP Hauler ID# TULLYTOWN, RESOURCE RECOVERY D & S RESTORATION, INC. 13506 1 YD Disposal Date City, State City, State 11/17/11 PATERSON, NJ 07503 TULLYTOWN, PA Signature Completed by (Print or Type) Date

Title

Date: 10 / 29 / 11

D & S Restoration, Inc. 20 California Avenue Patersori, NJ 07503

Worksite 429 Hang JT Rottle Park

To Whom It May Concern:

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

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

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

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

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

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

Very truly yours,

Printed Name of owner

Signature of owner

2:37

NOV 1 5 2011

ASBESTOS CONTROL 8
LICENSTAG

00 00 00 Proj. #: MS 11-456	•	8			sestos Abatement 8:60 and 12:120)		011 10:51am API Section		
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Registered Waste Hauler	NJDE	P Hauler IC	# Ci	ibic Yards of W	aste I Name	of Registe	ned la	004111				
D & S RESTORATION, INC.	1350)G	3	YDŞ		LYTOW	N, RE	SOURCE REC	OVERY			
City, State PATERSON, NJ 07503			Disposal Da 11/16/11		City, 9		DI D					
Completed by (Print or Type)	Title			Signature		LYTOW	N, PA		D.J.	-	******	
BOGDAN JOLDZIC	PRESIDE	NT						. 10	Data			

Kuusela

From:

Rob [rrras2000@yahoo.com]

Sent:

Thursday, November 10, 2011 9:01 AM

To:

Kuusela

Subject: Re: 38 GREYLOCK

To Whom it may concern:



I am asking that the 10 day waiting period be waived. The asbestos was disturbed due to storm and flood damage and the town has ordered me to remediate it ASAP.

Thank you,

Robert Rasczyk

Owner of 38 Greylock Ave. Belleville, NJ 07109



Sent from my iPhone

On Nov 9, 2011, at 3:17 PM, Kuusela < residential@ds-restoration.com > wrote:

<38greylock.doc>

State of NJ Notification of Asbestos Abatement

(Pursuant to NJAC 8:60 and 12:120) D&S Proj. #: MS 11-458 Name of Building Owner/Operator (2) Date of Notification (1) 1 1 /1 0 / 1 1 ROBERT RASCZYK Type Notification Agencies Notified Street Address Initial T EPA 675 JAROLEMON AVENUE Amended DEP ASBESTOS CONTROL & City, State, Zip Code Amendment #: LICENSING \boxtimes DOL BELLEVILL, NJ 07109 M Emergency -Telephone Number (including Name of Contact DOH justification) ROBERT RASCZYK ☐ DCA Cancellation FACILITY INFORMATION Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) Subchapter 8 (Other than K-12) ROBERT RASCZYK Other (Private/Commercial Street Address Bldgs./Homes, etc. Bldg. Age # of Floors Square Feet 38 GREYLOCK AVENUE County Code (7) County (6) City (5) Current Use (Prior if being demolished) (State use only) ESSEX BELLEVILLE Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. D & S RESTORATION, INC. Street Address Street Address 20 California Ave. City, State, Zip Code City, State, Zip Code Paterson, NJ 07503 License Number Telephone Number Phone Number Project Manager for Monitoring Firm 00159 973-345-8020 Name of OSHA Monitor Sched. Completion Date (11) Start Date (10) D & S Restoration, Inc. Street Address 11/25/11 11/15/11 20 California Avenue Occupancy Status During Abatement (Check only one) City, State, Zip Code Facility closed/vacated during entire period of abatement. Abatement performed outside of normal facility hours-Describe: Paterson, NJ 07503 Other-Describe: NORMAL HOURS Full Containment w/negative pressure Scope of Work (check all that apply) Mini-enclosure >3 sf or >3 If Renovation Glovebag procedure Non-Exempted (*) and Non-friable procedure Demolition ≥160 sf or ≥260 lf E Is location normally used solely E e n Location of by maintenance/custodial Amount n m Description of asbestos-containing p C asbestos-containing (Specify SF or staff(12) C 0 material (ACM) а material (acm) to be LF) p abated in facility (13) N/A No Yes 220 L FT PIPE INSULATION BASEMENT Name of Registered Landfill Cubic Yards of Waste NJDEP Hauler ID# TULLYTOWN, RESOURCE RECOVERY Registered Waste Hauler 3 YDS 13506 D & S RESTORATION, INC. City, State Disposal Date TULLYTOWN, PA 11/16/11 PATERSON, NJ 07503 Date Signature Completed by (Print or Type) Title

11/10/11

neck 3183

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)(NOV 1 5 20	11	,11		
	11			Wel	s Fargo			HOY 15 ZU	11	lane	/	
Agencies Notified	ation				Address Philadel	phia Avenue		ASBESTOS CONTROL LICENSINO	8	1.004	W. Contractor of	
☑ DOLWD ☐ Amende			İ	City, S	tate, Zip C	ode	-			- Consideration		
□ DHSS Amendm		luding		Egg	Harbor	City, NJ	2	Lord Children transcription of the company	krosvetaga v		12	
DCA Emerger justificat		lualing	1	Name	of Contact		and inflation accounting the layer of the	Telephone Numb	er	×		7.00
Cancella			- 1	Den	ise L. Ha	tcher		TITLE HES-011				
				FAC	ILITY IN	FORMATION			- 192200			
Name of Facility Where Abatement is	Taking	Place	(3)				Type of Facility	(4)		100000		
Wells Fargo Bank	<i></i>						School (K-12)				
Street Address							☐ Subchapter 8	(Other than K-12) rivate and commer	cial bu	ilding	s,	
201 Philadelphia Ave							homes, etc.)			Ŭ		
City (5)				***************************************			Square Feet	# of Floors	Blo	ig. Ag	je	
Egg Harbor City, NJ							4000	1	1	30		
County (6)				Coun	ty Code (7	(STATE USE ONLY)	Current Use (Pri	or if being demolis	hed)			
Atlantic												
Name of Monitoring Firm Hired by Bu	lding O	wner (8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
AET			***	0002	1	Alliance Envi	ironmental Sys	stems			THE ACCUSES	
Street Address						Street Address						
28 N. Pennell Road						550 East Uni	on Street					
City, State, Zip Code						City, State, Zip Co	ode					
Media, PA 19063						West Cheste	r, PA 129382					
Project Manager for Monitoring Firm			Tele	phone	No.	Telephone No.		License No.				-(0 51.0
Eric Housekenecht			0.000		9-6238	610-701-9000)	00508				
Start Date (10)	Sched	uled C	,	tion Da		Name of OSHA N	Monitor					
11 / 26 / 11				_ / _		AET						
Occupancy Status During Abatement	(Check	only	one)	-		Street Address					0.000.000	
☐ Facility Closed/Vacated During En	tire Per	riod of	Abate	ment		28 N. Pennel	l Road					
Abatement Performed Outside of	Normal	Facility	y Hour	s - Des	cribe	City, State, Zip Co	ode				300	
Time of Abatement: 8AMF	PM/ <u>4:30</u>	<u> </u>		AM		Media, PA 19	063					
Scope of Work (Check all that apply)						D	tainment with No.	native Pressure				
*		M De	novat	ion		☐ Full Con	tainment with Neg	gative Flessure				
≥3 sf or ≥3 lf≥160 sf or ≥260 lf		De	molitic	on		☐ Gloveba	a Procedure	E D				
						⊠ Non-Exe	empted (*) and No	n-Friable Procedu		atem	T	
		1	Loca Norma			5			-	_		T
Location of	- R # \		ed Sole		Ashe	Description of stos Containing Ma		Amount	Removal	Repair	nc	Enclosure
Asbestos-Containing Material (AC TO BE ABATED	ivij	Ma	intena	ince/	(i.e	e., thermal systems	insulation,	(Specify	VOV	a:	aps	OSI
IN Facility		Cus	todial (12)			surfacing, VAT other miscellane		SF or LF)	1 =		Encapsulate	6
(13)		Yes	No	N/A	1	Other miscenario	,003)				(D	
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			In									
Name of Registered Waste Hauler			1	JDEP I		Cubic Yards of	Name of Regis	stered Landfill			700	
N.E.T.S.			. 1	Hauler II		Waste	BFI Imperi	al				
				18947		50 Disposal Date	City, State					
City, State Hazelton, PA						TBD	Imperial, F	PA			,	
Completed By (Print or Type)	Title					Signature	6)	Da	ate /	-/		
John Heemer	10000000	stima	tor			10	Lanc		1./	9/1	1	
			7000.534			1/1			1	1	-	
ASB-41 MAY 11	*	Do no	t use t	his form	for asbes	tos licensufe exem	pted activities.					