	PATD				SBESTOS ABATEMENT:60-7 and 12:120-7	,					
Date of Notification	1 (1)				ling Owner/Operator		ME		E [\mathbb{V}	E
11/10/2017			Nata	lie	Gregorio				5 1	/4/	15
Agencies Notified	Type Notificat	ion	Street A	Addres	s						
[]EPA	[X]Initial						ШШ	V)/	17	201	7
[]DEP	Notificat	ion	City, S	tate,	Zip Code						
[X]DOL	[]Amended		Eliz	abet	h,NJ,07208		ASE	E TO	8.00	MTR	01 8
[X]DOH	Notificat		Name of	Conta	ct	Telco			ENSI	VG	UL a
[]DCA	[X] EMERGENCY		Nata	lie	Gregorio	!~		18			
A 2	[]Cancellati	on.				T.					
					TY INFORMATION						
Name of Facility Whe		s Takin	ng Place	(3)		Type of Facil					
Natalie Gregor	110					[]School	(K-12) oter 8 (Other	1 : 81	K-12	2)	
Street Address						[X]Other	(i.e., privat	le o			1
							homes, etc.				
City (5)	lCc	ounty (6)		County Code (7)	Square Feet	# of Floor	is [1	.dg.	Age	
Elizabeth		nion	0,		(STATE USE ONLY)	Current Use	(Prior if bei	n r d n	molis	shed)
							2				<u> </u>
Name of Monitoring F	irm hired by Bu	ilding	ASCM	No.	Name of Abate	ment Contracto	or (9)				
Owner (8) N/A					AZTECH M	ANAGEMENT	, Inc.				
Street Address					Street Address	S		-			
					86 Chris	topher St					
City, State, Zip Code	e				City, State,						
					Montclai	r, NJ 070	42				
Project Manager for 1	Monitoring Firm		ephone l	Number			Li	CHSI		oer	
		N/	A		(973) 744	-8800))37	1		
Scheduled Start Date			etion Da			Monitor					
11- 10- 17				17	N/A						
Month Day Ye	ear Mont ing Abatement (Year e)	Street Address	3					
[X]Facility Clos of Abatement	ed/Vacated Dur	ing Ent	tire Per	iod							
[]Abatement Per		of Nor	cmal Fac	ility	City, State, 2	Zip Code					
Hours - Descr []other - Descr	ibe: «OffHours I			t»							
Scope of Work (Check			Deberry						N. V.		-
scope of work (check	all that apply					Containment wi	th Negative	P : 8 31	ire		
[X]≥3 sf or []>160 sf o		-]Renova]Demoli			Enclosure -bag Procedure	à				
1 12100 01 0	- 1-00			3 6	[]Non-F	riable Procedu	re	-13		- 1. 77	
Location	of		Is cation		Description	n of		-	teme	E	E
Asbestos-Con			ormally Used		Asbestos-Cont	100000000000 - 20	Amount	F	RE	N C	C
Material (TO BE ABA			Solely intenand	ce/	Material ((i.e., thermal		(Specify SF or	1	PA	A P	O
In Facil:			stodial		insulation, surfa	acing, VAT,	LF)	V.	I	S	S
(13)		Yes	No N	I/A	or other miscel	llaneous)		1	R	L	R E
Basement			X	В	oiler Insula	tion	8 SF	2.5			
200000000000000000000000000000000000000				P	ipe Insulation	on	18 LF	11			
					*						
Name of Registered Wa	aste Hauler	NJ	DEP Wast	te	Cubic Yards	Name of Regi					
AZTECH MANAGE			uler ID	No.	of Waste 1.0	Minerva	Enterpr	ise	INC	2	
City, State		1	, 0 2 0		Disposal Date	City, State					
Montclair, NJ	07042				11/14/17	Waynesb	urg, Ohi	. ⊃ 4 4	688	3	
					Signature	4-/-		D 3 50			
Completed By (Print of Constantine Vi		: side:	n t		V-1-0-	tati	f.		0/201	L7	
COURTWILLTINE AT	LVIAII FIE	Jace			1_000	Tar Time	1000				

Date of Notification (1)	NICIN	NO.	TIFICAT		New Jersey	TEMENT	ASBE S (CONTROL & LENSING Telaphone Number Sility (4) (K-12) (K-1						
Date of Notification (1)	111)(1						100	7)	3 (; []	\mathbb{V}	己
1		,		Nam	ne of Building	Owner/Operator	(2)	3					
Agencies Notified	Date of Notification (1)			MER	RCK SHARP &	DOHME CORP.			Ato	11	- 7	0047	
EPA							-	L	N		1	2017	
DEP X Annended Notification	Agencies Notified Type Notificat	ion		126	E. LINCOLN A	/ENUE, P.O. BC	X 2000, RY2	8-414					
DEP X Amended Notification		tification		City,	State, Zip Cod	е		AS	SBE	5 08	COI	NTRO	8
Mare of Contact			on :	#1 RAH	IWAY, NEW JE	RSEY 07065							
DCA											- In-entition in		en e
FACILITY INFORMATION Type of Facility (4) School (K-12) Subcipator 8 Other than K-12) Subcipator 8 Other than K-12 Subcipator 8 Other 1 Subcipator 8 Other 9 Other 1 Subcipator 8 Other 9			TEICATI			N. I	Telephone	Numb	er				
Name of Facility Where Abatement is Taking Place (3)	DCAEMERG	ENCY NOT				N							
School (K-12) Subchapter 8 Other than K-12 Subchapter 8	Name of Facility Where Abotement is T	aldes Dies		ACILITY II	NFORMATION	T=							
Subchapter 8. ODHME CORPORATION	Name of Facility where Abatement is I	aking Plac	e (3)										
Street Address Square Feet % of Floors \$ 0 0 0 0 0 0 0 0 0	MERCK SHARP & DOHME CORPORATI	ON						han V	10)				
Street Address	WERCK STARF & DONNE CORFORATI	ON								. 10	100	otc)	
126 EAST LINCOLN AVENUE - BUILDING 80N	Street Address								Ting	-			
RAHWAY	126 EAST LINCOLN AVENUE - BUILDIN	G 80N											
RAHWAY	City (5) County	(6)		Cour	nty Code (7)	Current Use (F	Prior if being o	demolis	shed	- 272			
ENVIRONMETAL HEALTH INVESTIGATIONS, INC. 104 PAR ENVIRONMENTAL CORPORATION	0 0 0 0 I	9.00								ICE I	ACIL	1	
Street Address Stre			50.00		ASCM No.	Name of Aba	tement Contr	actor	(9)				
State Stat	and the second and th	ONS, INC.			104	PAR ENVIRO	NMENTAL CO	ORPO	RATI	O V			
City, State, Zip Code SPARTA, NEW JERSEY 07871 Project Manager for Monitoring Firm Ielephone Number WILLIAM S. KERBEL, CIH 973-729-5849 845-389-7500 1101 Sched. Completion Date (11) 11/ 6 (17) Month Day Year Occupancy Status During Abatement (Check only one) X Facility Closed/Avacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe: X Other - Describe: MONDAY - FRIDAY 7AM-3:30 PM Scope of Work (Check all that apply) Demolition X 335 OR LF Location of Asbestos-containing Material (ACM) TO BE ABATED Mariful (13) Yes No N/A PENTHOUSE-NORTHEAST CORNER X PIPE FITTING INSULATION AMERISCI LABORA, TORIES INC F 1480 Street Address City, State, Zip Code) NEW YCRK, NEW YORK 10 / 6 NEW YCRK, NEW YO	3 1 4 L 3 1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2						Va						
SPARTA, NEW JERSEY 07871 Project Manager for Monitoring Firm Telephone Number Telephone Number Osha Monitor AMERISCI LABOR-TORIES INC # 1480 **MERISCI LABOR-TORIES INC # 1480 **MERISCI LABOR-TORIES INC # 1480 **MERISCI LABOR-TORIES INC # 1780 **Telephone Number Telephone Number Telepho													
Project Manager for Monitoring Firm Telephone Number Stage Sade		*/ IEDOE\/	07074			500 00 0							
WILLIAM S. KERBEL, CIH				NI. saala aa									
Expected State Date (10) 11 / 6 / 17						Anna San San San San San San San San San				U 1 16	17		
11 / 6 /17					(44)			11101			-		
Month Day Year Month Day Year Occupancy Status During Abatement (Check only one) X Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe: X Other - Describe: MONDAY - FRIDAY 7AM-3:30 PM Scope of Work (Check all that apply) Demolition X Penovation X Renovation X Scope of Work (Check all that apply) Demolition X Possible For Season Location of Asbestos-containing normally used Material (ACM) Asbestos-containing Material (ACM) TO BE ABATED In Facility (13) Staff (12) Yes No NA PENTHOUSE-NORTHEAST CORNER X PIPE FITTING INSULATION AST FLOOR CORRIDOR B X PIPE INSULATION A SIMPLE I		1	17.50		2 (2)			S INIC		¥	1/180		
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City, State, Zip Code NEW YORK 10 6						117 EAST 307	HSTREET						
Scope of Work (Check all that apply) Demolition X					scribe:								
Scope of Work (Check all that apply) Demolition X	X Other - Describe: MONDA	r -FRIDAY	/AIVI-3:3	30 PM				W VO	DV 1	0 1 6			
Demolition X >3SF OR LF >160 SF OR 260 LF X Glovebag Procedure X Glovebag Procedure X Non-Friable Pro	Scope of Work (Check all that apply)				Full Cont				IXIX II	0 1 0			
Second		Renovati	on				9	3(7)					
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Material (ACM) TO BE ABATED in Facility (13) PENTHOUSE-NORTHEAST CORNER PENTHOUSE-EXTERIOR LOUVER X PIPE FITTING INSULATION X PIPE FITTING INSULATION 2 LF: X 1ST FLOOR CORRIDOR B X PIPE FITTING INSULATION 2 LF: X 1ST FLOOR CORRIDOR B X PIPE FITTING INSULATION 2 LF: X 1ST FLOOR CORRIDOR B X DUCT SEAM CAULK 2 SIF X 1ST FLOOR CORRIDOR B X PIPE INSULATION 4 LF: X INDEP Waste Hauler ID No. 1 LYCOMING COUNTY RESOURCE MAIN 3 SIMENT SE BEST HIGHWAY 33 City, State FREEHOLD, NEW JERSEY Completed by (Print or Type) Title Signature PATTY (Specify SF or LF) SF or LF) SF or LF) SF or LF) R COBE THE Maint/Custodial Staff (12) NAT, or other miscellaneous) SF or LF) SF or LF SF or LF) SF or LF								.	_	a e m	-		
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	FREEHOLD, NEW JERSEY						Y , PA 17752	l.	_				
BENIAMIN SANCHEZ DIRECTOR OF OPERATIONS					Signature	1188/		De/le/	1/2	1	17		

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Para (National)		(Pursua	nt to NJAC	8:60-7 and 12: ne of Building (120-7) Owner/Operato	r (2)	71									
Date of Notification (1)				MEI	RCK SHARP & [DOHME CORP.	- Paris annual	F	13	L 3 D	7.7						
10 / 23 /17									13.	1;	$-\mathbb{W}$						
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		icatio	n	RAH	WAY, NEW JE	RSEY 07065	111	7 V	(1)	1	7 2017 CONTROL 8 Mes, etc.) Age AGILI 1480						
	24202247				Street Address 126 E. LINCOLN AVENUE, P.O. BOX 2000. Note: The private and a common of the part of the private and a common of the part o												
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tame of Fusinity Where Abatement is	aking	riace	e (3)														
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55 WEST SHORE TRAIL							5.4										
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SPARTA, NE	tate, Zip Code SPARTA, NEW JERSEY 07871)1									
Project Manager for Monitoring Firm		Tele	phone	Number		Telephone Nu	mber	License	i lu i	⊃€ r							
VILLIAM S. KERBEL, CIH						845-369-7500		1101									
Expected State Date (10)	Sch	ed. C	omple	tion Date	(11)	Name of OSH	A Monitor			-							
252 St. 100 St	100		2 /			AMERISCI LA	BORATORIES	INC		# 148	0						
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Abatement Performed Outside	of Norr	mal F	acility	Hours - De	scribe:												
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PA						ASBESTOS A $\!$				12+	=	31	574						
D					Na	me of Buildin	ng O	wner/Operator	(2)		2) Idi s i i mes, etc.) E d J. Age 78 Iec) OF FI : ACILI OAT () # 1480 K () 6								
Date of Notification (1)					ME	RCK SHARP	& D(OHME CORP.		III),	<u>[</u>]	9							
11 / 13 Agencies Notified Ty	/17	10-0				eet Address				13									
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DCA	EMERG	ENCY	NOT	IFICA		TRICIA JOHN		ı	Trefebriorie 14	umber		LIC	ENSING						
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Name of Facility Where Abat	ement is T	aking	Place	e (3)				Type of Facili	ity (4)			_	$\overline{}$						
								School (I											
MERCK SHARP & DOHME CO	ORPORATI	ON							ter 8 (Other tha										
Street Address							-					_							
70 EAST LINCOLN AVENUE -	BUILDING	70						Square Feet 20,727	# of Floors	5	E		e						
City (5)	County				Соц	nty Code (7)	\dashv		Prior if being der	nolisho		- 10							
RAHWAY	UNION				100 march 200 miles (100 miles (1	E USE ONLY						ACI							
		(8)		ASCM No			ement Contrac	Control of the Control											
	INC.			104		PAR ENVIROR	NMENTAL COR	PORA	1)										
	me of Monitoring Firm Hired by Building Owner (8) VIRONMETAL HEALTH INVESTIGATIONS, INC. eet Address 5 WEST SHORE TRAIL y, State, Zip Code SPARTA, NEW JERSEY 078 piect Manager for Monitoring Firm							Street Address											
					-	313 SPOOK R													
	ARTA. NEV	V JFR	SFY	07871			- 1	City, State, Zip	W YORK 1090	1									
Project Manager for Monitoring		. 0211	_		Number		_	Telephone Nur			Niv	24.5							
WILLIAM S. KERBEL, CIH			-	-729-5			- 1	845-369-7500	A3555	101	i i i	Jei							
Expected State Date (10)		Sch	ed. C	omple	tion Date	(11)	_	Name of OSHA	175	101		-							
11 / 27	/17			1	_ 30			AMERISCI LA	BORATORIES I	NC		# 148	0						
Month Day \ Occupancy Status During Abat	rear		onth		Day	Yea	_	01											
X Facility Closed/Vaca					batemeni		- 10	Street Address 117 EAST 30T											
Abatement Performs	ed Outside	of Nor	nal F	acility	Hours - De	escribe:		=											
X Other - Describe:	MONDAY	-FRI	DAY 7	7AM-3	:30 PM		(City, State, Zip											
Scope of Work (Check all that a	annly)								W YORK, NEW	YORK	()	6							
Demolition	X X	Reno	ovatio	in		Mini En			ative Pressure										
X >3SF OR LF	100	_						rocedure											
>160 SF OR 260	LF						3500	Procedure											
Location of Asbestos-containing		100000000000000000000000000000000000000	Loca			Description of				Α	1)6 (6	ment 7	ype						
Material (ACM)	l	17000000000	nally olely		C	ontaining Mate (ie. Thermal		7. MO O C. CONT. DOM: C.	Amount	R	0	m	m Z						
TO BE ABATED				todial	in	sulation, surfa			(Specify SF or LF)	REMOVAL	2	CAF	[은]						
in Facility (13)		_	taff (1	12)		or other misce			0. 0. 2.)	A	0	USc	USU						
		Yes	No	N/A				**				F	굒						
IST FLOOR -THROUGHOUT				Х	VAT / MAS	STIC			50 sf	X									
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						V 10 7 - 10 - 10 - 10 - 10 - 10 - 10 - 10				4		-							
											A STATE OF THE STA								
Name of Registered Waste Hau	ler	NJDE			Cubic Yard	ds of Waste		lame of Regist		-160040-11-1									
REEHOLD CARTAGE, INC. 25 HIGHWAY 33		Haule	er ID I 15939			4					0 N 7	SEME!	NT SE						
City, State			10835		Disposal D)ate		47 ALEXANDE	R DRIVE/ROU	IE 15									
REEHOLD, NEW JERSEY				- 1	11/27/17-1			MY, STATE	PA 17752										
Completed by (Print or Type)	Title					Signature	//	111		te,/	7:	1	AGE 88 ACILI INTERPRESENT SE						
ALLANDAL CANOLICZ	Inin-	OTOF				/	/	V X	1	11		011							

State of New Jersey

Ch 5990	o PA	MO		ICATION	ate of Nev I OF ASB to NJAC	ESTOS	ABATE				<u>C</u>		V			
Date of Notification (1) 11/13/2017					f Building a Mirab		Operator	(2)		Ц	NOA	7	20	17		7
Agencies Notified	Type Notification		\neg	Street A	ddress					1	BEST()		NIT	ROI.	2	
× EPA × DEP × DOL	Initial Amended Amendment		_		ite, Zip Co n, NJ 07					AC	LIC	15	NG			
× DOH DCA	Emergency justification) Cancellation				f Contact a Mirab	elli				Tel	lephone N	l inte	er_			-=
Name of Facility Where Al	natement is Takin	n Place (3	8)	FACI	LITY INFO	ORMATI	ON	Type	of Facility (4)						
House	Datement is Takir	g i lace (c	,)						School (K-1							
Street Address									Subchapter Other (i.e. p	8 (Oth			uildi	ngs, l	nome	es,
City (5) Linden									e Feet	# o N//	f Floors A	-	Blo N/	dg. Ag	е	
County (6) Union				County (Code (7) USE ONLY)		Curre	nt Use (Priese	or if be	ing dem il	; e)			
Name of Monitoring Firm I	Hired by Building	Owner (8)	ii A	ASCM	l No.				teme <mark>n:</mark> Cor ement, In		(9)					
Street Address								Addres	ss gren Aver	nue						
City, State, Zip Code				- H21				p Code J 07512								
Project Manager for Monito	oring Firm			Telephor	ne No.		- 17	none No 345-86			Licens 8)).				
Start Date (10) 11/24/2017		Schedule 11/25/2		npletion (Date (11)				IA Monitor ement, In	С.						
Occupancy Status During	Abatement (Chec	k Only Or	ne)					Addres	s Iren Aver	2110						
Facility Closed/Vacate Abatement Performed Other – Describe: Oct	d Outside of Norn						City, S	tate, Zi	p Code J 07512	iue						
Scope of Work (Check All	That Apply)			muse			1010	wa, iv	001012			-				_
≥3 sf or ≥3 lf≥160 sf or ≥260 lf		- Inches	Renova Demolit				×	Min Glo	Containme i-Enclosure vebag Prod n-Exempted	e edure						
		Is	Locat	ion										bater		
Location of Asbestos-Containing N Asbestos-Containing N TO BE ABAT In Facility	Material (ACM)	Use Ma	Normal d Sole intena todial s (12)	ly by nce/		tos Cont thermal surfa	systems cing, VA	faterial s insula T, or		(5	mount Specify or LF)		Remova	Typ	_ω Encapsulate	Enclosure
(13)		Yes	No	N/A		other n	niscellan	neous)					Na l	air	ulate	sure
Basemer	nt		Х			Pipe	Insula	tion		1	40 LF		7			
Name of Registered Waste	Hauler	I N	JDEP W	aste	Cubic	Yards		Name of I	Renista	ered I an 1						
D&S Abatement, Inc.	V.O.C. Sell V. V. V. Sell Sell V. S. Sell V. Sell Sell V. V. Sell Sell V. V. Sell Sell Sell Sell Sell Sell Sell Sel								Waste I				Α		All personal districts	
City, State Totowa, NJ						TBD	al Date		City, State Morrisvi		A					
Completed by Ned Joksimovic		ct Ma	anager		S	ignature	-	PAS			[ae	3/20	017			

Print Form



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

			(Pt	ırsuant t	to NJAC 8	3:60 and 12:	120)	CKH	125	52)				
Date of Notification (1)						Owner/Opera	ator (2)	Tr	-		()	F	7 П	V//
Nov 14, 2017					lders LL	C				N).		(2	5	<u> </u>	<u> </u>
Agencies Notified	Type Notification			Street Ac						2					
☐ EPA	× Initial			The state of the state of	ss Ave.	de					— -	17	1	7 01	117
DEP	Amended Amendment	#	12		te, Zip Coo				11		ı	11	1	1 21)1/
X DOL	Emergency (_		rest, NJ	0/62/			Talan		Nimal				
DOH DCA	justification)			Name of	Contact				reier	none	Nu al		OS (CONT	RO
DCA	Cancellation			EACH	ITV INEO	RMATION			-			- E	CEN	SING	
Name of Facility Where A	batement is Taking	p Place (3)	FACIL	LITTINFO	RIVIATION	T7	Type of Facility (4)	bean		Imperioran Mile	1 10	-		
Residental House for		,						School (K-12)							
Street Address								Subchapter 8	(Other						
39 Country Club Ro	ad						E	Other (i.e. privetc.)	vate &	comm	ierc al	b til	lings,	home	S,
City (5)							5	Square Feet	# of F	loors	_	Ē	dg. A	ge	
Tenafly								2000	2			Ę	0+		
County (6)				County C				Current Use (Prior	if being	g dem	iolis ie	1 -			
Bergen				(STATE U	ISE ONLY)			Unoccupied He	ouse						
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCM	l No.	Na	me of	Abatement Contra	actor (9	3)					
n/a				n/a		H	larmo	ony Contracting	g						
Street Address						Str	reet A	ddress				-			
n/a						3	60 P	alisade Ave.							
City, State, Zip Code						Cit	y, Sta	te, Zip Code		-1000				C-III	
n/a						G	arfie	ld, NJ 07026							
Project Manager for Moni	toring Firm		0	Telephor	ne No.	Tel	lepho	ne No.	- 11		se No				
n/a				n/a		9	73-4	60-6026		012	55				
Start Date (10)		Schedule	d Con	npletion [Date (11)			OSHA Monitor				-011			
11/24/2017		11/27/2	2017	7				ony Contracting	g						
Occupancy Status During	Abatement (Chec	k Only On	e)					ddress							
Facility Closed/Vaca							(5.00.00)	alisade Ave							
Abatement Performe Other – Describe:	ed Outside of Norm	nal Facility	Hours				-	te, Zip Code							
_						_ G	arfie	eld, NJ 07026							
Scope of Work (Check Al	I That Apply)	-													
× ≥3 sf or ≥3 lf			enova				H	Full Containmen Mini-Enclosure	t with I	Vegrat	ive l'r	# 3L	'e		
2160 sf or ≥260 lf		X D	emolit	ion				Glovebag Proce	dure						
							X	Non-Exempted ((*) and	Non-	Frial le	rc			
		Is	Locati	on										ement pe	
Location	of		lormal d Sole			Descrip							1		V=C035
Asbestos-Containing TO BE ABA			intena			tos Containir thermal syst		terial (ACM)		nount		3	_	Enc	Щ
In Facili		Cust	odial 8 (12)	Staff?	(1.0.	surfacing,	, VAT	, or		or LF			Repair	aps	Enclosure
(13)			(12)	,		other misce	ellane	ous)				į	Bi-	Encapsulate	sure
		Yes	No	N/A								c fu		е	
2nd Floor (Closet	Х				VA	ΑT		50	SF		;			
Baseme	ent	Х				VA	ΑT		100	SF		;			
Name of Registered Was	te Hauler		1.00010	JDEP W		Cubic Yard	ds	Name of R	egister	ed La	ndfi				
Harmony Contractin	g		1	lauler ID 33058	No.	of Waste TBD		GROWS	S Land	dfill					
City, State						Disposal D	Date	City, State					10		
Garfield, NJ						TBD		Morrisvil	lle PA	190	67				
Completed by		Title				Signa	ature (1		Dat				
E. Cirovic		Secr	etary			1	('	PAATAI	-)		No	V	4, 20)17	

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Purchant to N.IAC 8:60 and 12:120)

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	MOK	. cf.	20 <u>17</u>)	

			•	to NJAC 5:00 an					. 1.7	4 (
Date of Notification (1)			Name of	Building Owner/O	perator (2)		ASBEST	(): 2)	NTRO	b&	_
	117			SON HY	RBOI	21/2	COND	CHIDIDI	3	60		
Agencies Notified EPA DEP DOL DOH DCA Name of Facility Where A		ncluding	City, Sta E 1 Name of Ms. 5	Idress 1203 te, Zip Code GE WATT Contact SANDY OR LITY INFORMA	RIVER.	NJ. Type of	Pacility (4)	Telephone Ni	in d	One at somewhat	mo sopratio	MINISTER STATE OF THE STATE OF
Street Address	RUER	RD		5		D Ot	her (i.e. pris	rate & commerc	i dərik ir	gs, hor	nes, etc	c.)
City (5) E 0 6 E 1		100	County	Code (7)			000	# of Floors 22 f being demolish		196		
	RGEN			USE ONLY)		1	Act 1	CONDO	e. (2			
Name of Monitoring Firm		wner (8)	ASC	M No.	Bes	t Rei	nent Contrac					
Street Address					1.5.755	Address Sout	h Riv	er Str				
City, State, Zip Code			-		City, S	State, Zip (Code	J 07601				
Project Manager for Monit	toring Firm		Telepho	Pela cea	Teleph 2.01	none No.	-7444	License 0.0	V .			
Start Date (10)	7	Scheduled Co	mpletion D	ate (11)	1	of OSHA						
Occupancy Status During			2911		Street	ga Er Address	IVITOI	mental				
☐ Facility Closed/Vaca☐ Abatement Performe☐ Other – Describe:	ted During Entire Per	iod of Abateme			City, S	State, Zip (reet sack, N.	. (. 6	506		
Scope of Work (Check All	That Apply)				Jood	CII IIC	CKEIIS	ack, III		200		
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			vation olition]	☐ Mini ☐ Glov	-Enclosure ebag Proced	t with Negative lure *) and Non-Fria		lure		
		Is Lo	cation								ement pe	
Locatio Asbestos-Containing TO BE AB In Faci (13)	Material (ACM) ATED lity	Used S Mainte Custodi	nally olely by enance/ al Staff? 2)	Asbestos Co (i.e. thermal sy	Description ontaining N estems insu VAT, or er miscella	Material (A ulation, sur r	CM) rfacing,	Amount (Specify SF or LF)	15	Repair	Encapsulate	Enclosure
	1	Yes N	lo N/A									
STORAGE ME	A/POOL		×	SPRAY	0N L	laten	iac	2700	5:75			
Name of Registered Waste Best Removal City, State			NJDEP V Hauler II	0 No. of V	Vaste So oosal Date			egistered Landf va Ente		ses	٠, ا	LLC
Hackensack, Completed by	NJ 07601	Title			12/2' Signatur	2/17		shurg,	<u>(] _ 4</u>	468	18	
J. Maiorano		Esti	mator		<u> </u>	10	wo re			1/14	117	
4SR-41 (R-06-08)						Do not	use this for	n for asbestos lie	er i re ex	empte	d activi	ities.

PAID

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

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man (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	NOV	-	7-	2017	,	
ASP	EST	77	2)	3 VTRC	119	

Date of Notification (1)				Nam	e of Build	ng Owner/Operator	(2)	H NOV-	7-1	2017		U
11 /	14 /	17		17 17 35 5		ontracting, LLC	(2)		-	31	14	
Agencies Notified	Type Notificat	tion		Stree	et Address			ASBEST()	1 bi to score		1 2	
⊠ EPA				31	3 Halyar	d Road		LI(;	ISIN	G		CHARDWAN
☑ DOLWD	Amended Amendmen	nt #		City,	State, Zip	Code						
□ DCA	☐ Emergency	_	-	Or	tley Bea	ch, NJ 08751						
(NJAC 5:23-8)	justification	n)	19	Nam	e of Conta	ict		Telephon				
	☐ Cancellation	on		Fr	ank Disa	ntis						
				FA	CILITY	NFORMATION		•				
Name of Facility Where A	batement is Ta	king Plac	e (3)				Type of Facility		Section .			
Residence							School (K-12					
Street Address							Subchapter 8 Other (i.e., proposed)	rivate and com	2 3 3 3 1 b	ouildin	gs,	
City (5)							Square Fee:	# of Floors	F	Bldg. A	\ne	
Seaside Heights							1600 sf	1		65	,go	
County (6)				Cou	nty Code	(7)(STATE USE ONLY)	Current Use (Pri	or if being den d	1 1 d)			
Ocean							Residence					
Name of Monitoring Firm I	Hired by Buildir	ng Owner	(8)	ASCM	No.	Name of Abatem	ent Contractor (9)					
N/A						Guardian Co	ontracting, Inc.					
Street Address						Street Address						
						1889 Route 9	9, Unit 61					
City, State, Zip Code						City, State, Zip C	ode					
5						Toms River,	New Jersey 087	755				
Project Manager for Monitor	oring Firm		Tel	ephone	No.	Telephone No.		License No				
Start Date (10)						732-349-9932		00624				
		heduled C			17 17	Name of OSHA N E.M.S.L. Ana						
Occupancy Status During						Street Address						
☐ Facility Closed/Vacated	During Entire	Period of	Abate	ment		1056 Stelton						
Abatement Performed (Outside of Norn	nal Facilit	y Hou	rs - Des	cribe	City, State, Zip Co	ode					
Time of Abatement:		_PIVI/	PIVI		AM	Piscataway,	New Jersey 088	54				
Scope of Work (Check all t	hat apply)					П г С			-			
≥3 sf or ≥3 lf≥160 sf or ≥260 lf			enovat emoliti			☐ Mini-End	tainment with Nega closure g Procedure mpted (*) and Non		i na			
		1100	Loca						-	patem	ent T	vpe
Location of Asbestos-Containing M			Norma ed Sol			Description of			-	_		
TO BE ABAT		Ma	intena	ince/	Asbe (i.e	stos Containing Ma e., thermal systems	terial (ACM)	Amount (Specify	Removal	Repair	nca	nclo
IN Facility		Cus	todial (12)	Staff?		surfacing, VAT,	, or	SF or LF)	a	=	Encapsulate	Enclosure
(13)		Yes	No	N/A		other miscellane	ous)				late	Ф
exterior					asbest	os siding		1600 sf				
										П	П	П
									17	П	П	
		П	П	П				-				
Name of Registered Waste	Hauler		N	JDEP V	Vaste	Cubic Yards of	Name of Registe	ered Landfill			ш	ш
Guardian Contracting	g, Inc.		Н	auler IE 20223	No.	Waste 3	T.R.R.F.	orea carionii				
City, State						Disposal Date	City, State		-			
Toms River, New Jers	sey					11/29/17		ennsylvania				
Completed By (Print or Type	Completed By (Print or Type) Title						1		1 7		1	
Nicholas Fernicola		Project	Mana	ager		Signature	7- 1.	1	1,/	1111	/,-	
SB-41				-			1 111	-1	- 1	17/	1	1



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

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										100		7 0	0.47	- 11
Date of Notification (1)				wner/Operator	(2)	111	111	1	1 2	11/	1			
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	Votification	1		Stree	et Address				ASE		OSC	CONT	ROL	8
☐ EPA ☐ Init				Ro	oute 206					11	CEN	SING		
	ended endment :	Ħ		City,	State, Zip	Cod	е							
	ergency (i		-	Hi	llsboroug	gh, I	NJ 08844							
	tification)	riciaan	9	Nam	e of Conta	ct			Telephone	I in I	b ir			
☐ Car	ncellation			Pa	ula Rycy	k			-					
				FA	CILITY II	NFC	RMATION						70	
Name of Facility Where Abateme	nt is Takir	ng Plac	e (3)					Type of Facility	(4)					
Residence				- 12				School (K-1						
Street Address								☐ Subchapter ☐ Other (i.e., phomes, etc.	private and cor	tir er	cal b	uildin	gs,	
City (5)								Square Feet	# of Floors		T _R	ldg. A	70	
Franklin Park								2000	2			60 60	ye	
County (6)		19.5		Cou	nty Code (7)(ST	ATE USE ONLY)	Current Use (Pr	rior if being der	וו ורו				
Sussex								Residence			2			
Name of Monitoring Firm Hired by	/ Building	Owner	(8)	ASCN	l No.	Na	ame of Abateme	ent Contractor (9))					
Guardian Contracting, Inc							Guardian Co	ntracting, Inc.						
Street Address						St	reet Address							
1889 Rte. 9, Unit 61							1889 Route 9	, Unit 61						
City, State, Zip Code						Ci	ty, State, Zip Co	ode						-
Toms River, New Jersey 0							Toms River, I	New Jersey 08	3755					
Project Manager for Monitoring Fi	rm		Te	lephone	No.	Te	elephone No.		License No					
Nicholas Fernicola			1	732-349	9-9932		732-349-9932		00624					
Start Date (10)	100000000000000000000000000000000000000			letion Da		Na	ame of OSHA M	lonitor						- 87
11 /24 /17				27_ /	17	1	E.M.S.L. Anal	lytical						
Occupancy Status During Abatem						Str	reet Address							
☐ Facility Closed/Vacated During	Entire Pe	eriod of	Abat	ement			1056 Stelton							
Abatement Performed Outside	of Norma	I Facilit	y Ho	urs - De:	scribe	Cit	ty, State, Zip Co	ode			-			-77
Time of Abatement:AN		IVI/	PIV	1	_AM	F	Piscataway, N	New Jersey 08	854					
Scope of Work (Check all that app	ely)					d.								
≥3 sf or ≥3 lf		⊠ Re	nova	tion			☐ Full Cont	ainment with Neg	gative Pressure	f				
≥160 sf or ≥260 lf		☐ De	molit	ion				Procedure						
		I la	1		Т		☐ Non-Exer	mpted (*) and No	n-Friable Proc) €C U €	3			
Location of			Loca Norm				Dannistic				Ab	ateme	ent Ty	ре
Asbestos-Containing Material (ACM)	Use	d So	lely by	Asbe	stos	Description of Containing Mat		Amount		Re	Re	E	En
TO BE ABATED				ance/ Staff?		., the	ermal systems i	nsulation,	(Specify		Removal	Repair	сар	clos
IN Facility (13)		000	(12	() mora-mora-mora-			surfacing, VAT, ther miscellaned		SF or LF)	J	'al	- 25	Encapsulate	Enclosure
		Yes	No	N/A		0.	mor misocharico	543)					te	
basement			\boxtimes		asbesto	s p	ipe insulation	n	60 If					П
												П	П	П
											\exists			
	П			100					H					
Name of Registered Waste Hauler	NJDEP I		Cul	bic Yards of	Name of Regis	tered Landfill			ш		ш			
Guardian Contracting, Inc.	Hauler II	O No.	Wa	ste	T.R.R.F.	tered Landilli								
City, State				20223	5	Dis	posal Date	City, State			_			
Toms River, New Jersey				1/28/17	Control of Assessment Control	Pennsylvan	2							
Completed By (Print or Type)			_	Signature	13.17	Janay			,	,				
Nicholas Fernicola	Title	roject	Man	ager			Signature		1	E a e	11	1, ,	/	
		-,550		-901				7			11	114	11-)

1,105/17 Carlson Family Foundation Inc.										_					Prir	nt F
amounts (6) general Manager for Monitoring Firm Telephone No. Telephone N	10 CK		l Ì		ICATION ursuant	OF ASBE to NJAC 8	STOS ABAT 3:60 and 12:1	20)			E	D [\mathbb{V}		7
Street Address ame of Facility Where Abstement is Taking Place (3) Paramus County (5) Bergen Monitoring Firm Hired by Building Owner (8) Wy State (1) Street Address (1) Street Address (1) Subchapter 8 (Other than K-12) Subchapter 9 (Other than K	Date of Notification (1)										NO	V 1	7	011	7	
BFA	11/05/17						y Foundation	on	Inc.	I'd box	.,,			.01	1	1
Dep	Agencies Notified	Type Notification	1				100					STATEMENT !		Moreon	THE REAL PROPERTY.	1
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ame of Monitoring Firm Hired by Building Owner (8) ASCM No. Stammark Solutions, LLC Street Address 28 Edsall Drive City, State, Zip Code Sussex, NJ 07461 Telephone No. 973-997-1650 O1309 art Date (10) Scheduled Completion Date (11) 11/30/17 Street Address Street Address Street Address Street Address 117 East 30th Street City, State, Zip Code Sussex, NJ 07461 Tourish Renovation Date (11) Street Address 117 East 30th Street City, State, Zip Code New York, NY 10016 Tourish Renovation Date (11) Location of Asbestos-Containing Material (ACM) In Eacility In Eacility (12) Yes No N/A Please see attached X Please see attached X Please see attached X Please see attached City, State City, State City, State City State City, State City State City,																
Stanmark Solutions, LLC Street Address Street Address 28 Edall Drive tty, State, Zip Code City, State, Zip Code Sussex, NJ 07461 Telephone No. 973-997-1650 01309 art Date (10) (10/5/17 11/30/17 Coupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other — Describe: City, State, Zip Code Name of OSHA Monitor AmeriSci Street Address 117 East 30th Street City, State, Zip Code New York, NY 10016 Street Address 117 East 30th Street City, State, Zip Code New York, NY 10016 The Coupancy Status During Abatement (Check Only One) Street Address 117 East 30th Street City, State, Zip Code New York, NY 10016 The Coupancy Status During Abatement (Check Only One) Street Address 117 East 30th Street City, State, Zip Code New York, NY 10016 The Coupancy Status During Abatement (Check Only One) Street Address 117 East 30th Street City, State, Zip Code New York, NY 10016 The Coupancy Status During Abatement (Check Only One) Street Address 117 East 30th Street City, State, Zip Code New York, NY 10016 The Coupancy Status During Abatement (Check Only One) Street Address 117 East 30th Street City, State, Zip Code New York, NY 10016 The Coupancy Status During Abatement (Check Only One) Street Address 117 East 30th Street City, State, Zip Code New York, NY 10016 The Coupancy Status During Abatement (Check Only One) Street Address 117 East 30th Street City, State, Zip Code New York, NY 10016 The Coupancy Status During Abatement (Check Only One) Street Address 117 East 30th Street City, State One Coupancy City, State One Completion One Com	•	Hired by Building	Owner (8)	1	ASCM	1 No.	Nam									
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Sussex, NJ 07461	ou doi / ida/doo															
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973-997-1650 01309	Project Manager for Mon	itoring Firm		T	Telephor	ne No.		DO FOUR ASSOCIATION DO NOT HOR WAS A MARKET TO THE PROPERTY OF						-		
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Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code New York, NY 10016	10/05/17		1 69 9				An	ner	iSci							
Facility Closed vacated Dutside of Normal Facility Hours Other – Describe: City, State, Zip Code New York, NY 100 16 Pull Containment with Negative Pre 35 3 and All State, Zip Code New York, NY 100 16 City, State, Zip Code New York, NY 100 16 City, State, Zip Code New York, NY 100 16 City, State, Zip Code New York, NY 100 16 City, State, Zip Code New York, NY 100 16 Normally Used Solely by Minin-Enclosure Slovebag Procedure Non-Exempter (*) and Non-Friable 2 2 e lure Non-Ex	Occupancy Status During	g Abatement (Che	ck Only Or	ne)			Stree	et A	ddress							_
Abatement Performed Outside of Normal Facility Hours Other – Describe: City, State, Zip Code New York, NY 10016	_				nent		11	7 E	ast 30th Str	eet						
Sope of Work (Check All That Apply) 23 sf or ≥3 lf ≥160 sf or ≥260 lf	Abatement Perform	ed Outside of Norr					City,	, Sta	ate, Zip Code							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Other - Describe: _						- Ne	ew '	York, NY 10	016						
≥160 sf or ≥260 lf	Scope of Work (Check A	Il That Apply)						22-22 2-214 112 23-23								
Location of Asbestos-Containing Material (ACM) Asbestos-Containing Material (ACM) TO BE ABATED Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Please see attached								Mini-Enclosure X Glovebag Procedure								
Location of Asbestos-Containing Material (ACM) Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Yes No N/A Please see attached X Please see a			ls	Locat	ion								4			
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Yes No N/A Please see attached X Please see attached X Please see attached Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Yes No N/A Please see attached X Please see attached Cubic Yards of Waste Hauler ID No. 190713 Table Place Title Signature Asbestos Containing Material (ACM) (Specify SF or LF) Abbestos C	Location	ı of		Norma	lly		Description	on c	of			-		Тур	9	
Please see attached X Please see attached Name of Registered Landfill G.R.O.W.S. G.R.O.W.S. Disposal Date On completion Morrisville, PA Date	Asbestos-Containing	Material (ACM)					os Containing	у Ма	aterial (ACM)	600		١.	_		m	ш
Please see attached X Please see attached Name of Registered Landfill G.R.O.W.S. G.R.O.W.S. Disposal Date On completion Morrisville, PA Date			0.000	todial S	Staff?	(I.e. 1							am .	7	cap	nclo
Please see attached X Please see attached Name of Registered Landfill G.R.O.W.S. G.R.O.W.S. Disposal Date On completion Morrisville, PA Date		-		(12)									OVA		sula	Sur
Please see attached x Please see attached c Please see attached x Please see attached x Please see attached x Please see attached c Please see attached x Please see attached c			Yes	No	N/A										te	Ф
ame of Registered Waste Hauler Itlantic Carting Itlantic	Planca and a	attachad	10.550	1035600		loaco con	attached						-	-	_	
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Hauler ID No. 190713 of Waste 200 G.R.O.W.S.																
tlantic Carting 190713 200 G.R.O.W.S. ty, State Disposal Date On completion Morrisville, PA pompleted by Title Signature Date	lame of Registered Was	te Hauler		1000		\$100 A COOK		5	Name o	f Regist	ered Land	dfill				
ty, State Zayne, NJ Disposal Date Octy, State On completion Morrisville, PA Date Disposal Date Octy, State On completion Morrisville, PA Date	Atlantic Carting	1,333		No.			G.R.C	D.W.S.								
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Location of ACM	장이에 있는 아이들이 없는 아이들이 있다면 하는 것 같아 아이들이 아르네요 아이는 나를 다 그 것이다.	Description of ACM	THE RESERVE THE PARTY OF THE PA	Rein val	Management in the same and the
To be abated in facility	Used solely by Maintenance		ASBE:	LIGHTS	NTROL &
Restaurant	no	Pipe insulation	50 L.F.	Z . m	* 34 - 200 - 1 () = - 34(% of m
Restaurant	no	Floor tiles	750 S.F.	Σ.	- 94
Throughout the Hotel	no	Floor Tiles	1,500 S.F.	> .	
Hotel- 1st Floor boiler room	n no	Boiler insulation	250 L.F.	>	
Hotel-1 st Floor dining area	no	Mastic	250 S.F.	> 1	
Hotel – Roof	no	Roofing material	12,800 S.F.	21	
Hotel – Roof	no	Flashing	5,000 S.F.	15	
Hotel – Roof	no	Flashing on vent	280 S.F.	15	

CHID47 PA	AID		ICATIO	tate of New Je N OF ASBEST t to NJAC 8:60	OS ABATE		т	DE	()		W ^P	
Date of Notification (1) 11/11/2017				of Building Own e Cruz	er/Operato	r (2)			1HH	1 /	2017	
Agencies Notified Type Notificatio EPA DEP Amended Amendmen			City, St	Address ate, Zip Code erford, NJ 07	070			ASI	B B 1 C S	S CON ENSIN	NTRO G	L&
□ Emergence □ justification □ DCA □ Cancellation	1)	,		of Contact)	Telephone	y V ir ib s	r		
			FAC	ILITY INFORM	ATION					-		
Name of Facility Where Abatement is Tak Jessie's Residence	ing Place (3)				Тур	e of Facility (4	T/A 47.27				
Street Address						×	Subchapter	8 (Other than rivate & comm		uildings	s, hom	es,
City (5) Rutherford						Squ	are Feet	# of Floors	5	Bldg.	Age	
County (6) Bergen				Code (7) USE ONLY)		Cun	rent Use (Pric	or if being den	ncli F∋c)			
Name of Monitoring Firm Hired by Building	Owner (8)	ASCI	M No.	100000000000000000000000000000000000000		patement Con perty Main		_()			
Street Address				**************************************	Street 105		ess Riper Ave					
City, State, Zip Code							Zip Cod€ IJ 07011					
Project Manager for Monitoring Firm			Telepho	one No.	Telepi 201-		No. 9008	Licen 0133	s ; i .			
Start Date (10) 11/25/2017	Schedul 12/25/		mpletion	Date (11)	Name	of OS	SHA Monitor					
Occupancy Status During Abatement (Che	ck Only O	ne)			Street	Street Address						
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe:	Period of mal Facility	Abater y Hour	ment s		City, S	State,	Zip Code					
Scope of Work (Check All That Apply)												
≥3 sf or ≥3 lf≥160 sf or ≥260 lf		Renova Demoli			×	Full Containment with Negative 3 as sure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-File 3 12 Procedure						
	0.9	Locat						() (Abat	emen	i.
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	Norma ed Sole iintena todial ((12)	ely by nce/	Description ontaining Nal system: rfacing, VA er miscellar	Materia s insu .T, or	lation,	Amount (Specify SF or LF)	0		Encapsulate	Enclosure	
	Yes	No	N/A								ate	ď
Basement		X		Pi	pe insula	tion		24 In ft				
Name of Registered Waste Hauler		H	J IJDEP W lauler ID BD	No. of V	oic Yards Vaste		2000-00-00-00-00-00-00-00-00-00-00-00-00	Registered Lar			1	
City, State			TBD 1YD Disposal									
Completed by Darko Raloski	Title	oct Ma	nager		Signature	110	Mer .	ALL S CETT	5 it :	12017		

	5	State of N	ew Jer	sey - Notific	cation of As	sbestos Aba	emen	E C		VE	M
Ch300	0	PA	Pursi	uant to <u>N.J.A.C</u>	. 8:60-7 and 1	2:120-7)		NU/	1	2017	
Date of Notification (1)						ding Owner/Oper	nor (2)	1101			
November 14, 2017					Mrs. Kelle	y Manahan					
Agencies Notified		Notification			Street Addres	S	F	SBEST	ros (C	NTROL &	
		Init	al Notif	fication			150	L	IC = \ 31	VG.	
XEPA		□Amend	ed Certi	fication	City, State, Zi	p Code	RACCE CONTROL DE CONTR	A CHARLES AND A STREET	-	ENGINEE AND DESCRIPTION OF THE PARTY OF THE	A CONTRACTOR OF THE PARTY OF TH
DCA		⊠ Emerg	gency (including	Short Hil	ls. NJ					
x DOL			cation)	J	Name of Cont			Teleph	nor e	iber_	
X DEP x DOH		□ Cance			Kelley Mana		-				
X DOIT				FACILITY INF	ORMATION	-				,	
Name of Facility Where Abate	ement is Ta	king Place (3)		77101277777	Type of Facility	(4)					
Residence					School (K-1						
						8 (other than K-12)				
Street Address	1					i.e. private & com		ildinas	hon e	(c.)	
		en:				nknown #0					rs
<u>City (5)</u>	County (6	3)		Code (7)	04.7 001.	111111111 <u>11 0</u>	1 10010		131 7 1 5	oo you.	ŭ
Short Hills			State	Use Only)	Current Use (prior if being den	olished)				
					(prior ii aciiig acii		50			
Name of Monitoring Firm Hire	d by Blda	Owner (8)	ASCM	No	Name of Contr	actor (9)					
Sky Environmental		<u> </u>	ZICOW	110.	I Italia or Control	00.0.701					
Sky Environmental	, IIIC.				GREENWO	OD ABATEM	ENT CO	ONSUL	TANTS	, INC.	
Street Address					Street Address						
140 Boulevard					200 0000 HONORODO H						
					511 MAIN S						
City, State, Zip Code					City State, Zipo	SC 10 Y C 10 V					
Mountain Lakes, NJ					Butler, NJ						
Project Manager for Monitorin	g Firm	Telephone N	<u>Number</u>		Telephone Nur	<u>mber</u>		License	<u>e N u 1 e</u>		
I sawid Charashavalo	120	072 500	4004		973-492-04	77		00840	0		
Leonid Shereshevsky	у	973.588. Scheduled (- D-t- (44)		21.2		00040	J	*	
Scheduled Start Date (10) November 15, 2017		Novemb			Name of OSHA	A MONITOR					
November 15, 2017		Novemb	er 17, 2	2017	EMSL inc.						
Occupancy Status During A	batement	(Check only o	ne)		Street Address						
Facility Closed/Vacate				ment	-						
Abatement Performed					1056 Stelle	on Road					
Describe					City, State, Zip	Code					
Other - Describe: Va	cant										
					Piscatawa	y, NJ 08854					
Source of Work (Check all that	it apply)										
						x Fi	III Conta	inment	wtl le	gative Pre	ssure
≥ 3 sf or ≥ 3 lt	f			Renovation		Mi	ni-Enclo	sure			
$\square \ge 160 \text{ sf or } \ge 2$	260			Demolition		Glo	vebag P	rocedure	е		
										riable Pro	cedure
Location of Asbestos-Containi	500 E 500 E	ocation Norma		Description of Ast		#100 000 000 0 000 00 000 000 000 000 00	Amoun		At a : 16	nt Type	
Material (ACM) in Facility (13)		ely by Maint./Ci ff? (12)	ustodiai	(ACM) (i.e. therm VAT, or other mis		ation, surracing,	(Specification or LF)	y SF	Reny	Repair Encar	Enclose
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71110			_	· · · · · · · · · · · · · · · · · · ·	ouiui.oii				_		
Name of Reg. Waste Hauler		NJDEP Was	te Hauler	ID#	Cubic Yards o	f Waste		Name o	of lie i ite	red Landfill	
See Hauler Below # 1 & :	2	See Below			Subio Turas c	5			ow fi .er	22121223	
								G.R.O).V1.3		
Hanley #1) Crosmused	A hatam	ant Canavilt	- m4- I-	- Dudley N.L.	7405	Disposal Date				y, State	
Hauler #1) Greenwood NJ DEP # 12			ants, in	c. – Butter, NJ t	17405	November	17 20	7		ute 2. Box	68
Hauler #2) Newark Carti			0.4500	NI DEP # 10551		November	., 20		В	dgeport, W	VA
maulei #4) Newark Caru	ng, me. –	Hewalk, NJ	04307, 1	10 DEL # 19331					36	4-842-2784	83
Completed by (Print or Type)		Title			Signature			Date			
Marin Graure		SENIOR P	RO IEC	T.		49		-	mh	4, 2017	
ami oraaro	10.0	MANAGER			Marin	Graure				, 2017	

MANAGER

From:GPEENWOOD	ABATMENT		19734	920133	11/14	1/2017 1	114			H -CO
E 30 (t)								NE	()	
	State of	New J	ersey - Noti	fication of	Asbestos Ab	atemen		7		
CK300	0 P	APur	suant to N.J.A.	<u>C</u> . 8:60-7 and	d 12:120-7)		咖	- 4	No)	172
Date of No(ification (1) November 14, 2017					ilding Owner/Ope					7
Agencies Notified	Notifica	ion Type		Street Addr	lley Manahan	+	NO	V Abs	Eg	FOON
	(X)	nitial No	tification		202.5		ACTUAL ATTORNESS		TIN:	NSINO
XEPA DCA			tification	City State					==:	
x DOL			(including	Short H		\perp \vee	ANE	RAP	PFII	/ED
X DEP		ification))	Name of Co Kelley Mar		-	planhor	- A I b -		-
x DOH	200	icelled	FACILITYII	VFORMATION	15(16))					
Name of Facility Where Abateme	nt is Taxing Place	(3)	120,011111	Type of Faci	lity (4)					
Residence				School (K	(-12)					
Street Address					er 8 (other than K-1					
				Olher Control	(i.e. private & com	mercial bui	tings, hor	nes, etc.)		
Short Hills	ounty (6)		ly Code (7) Use Only)	Sq. reet.	Unknown # c	of Floors:	S RIQU	Age:	50 18 3	5
anort milis		(2) Tale	OSE OUIA)	Current Use	(prior if being der	molished):				
Jeme of Maniforine Fire III	Bld- O	1.05		\						
Name of Monitorina Firm Hired by Sky Environmental, It		ASCN	n No.	Name of Con	tractor (9)					
	uc.			GREENW	OOD ABATEM	ENT CO	NSULTA	ANTS I	NC.	
Street Address 140 Boulevard				Street Addres	55					-
140 Boulevard				511 MAIN	STREET					
City, State, Zip Code				City State Zi						
Mountain Lakes, NJ 070				Butler, NJ						
Project Manager for Monitoring Fir	m Telephon	e Number		Telephone No	umber	1	zense Nu	ımber		
eonid Shereshevsky	973.58			973-492-04	477		00840			
cheduled Start Date (10)			on Date (11)	Name of OSH	A Monitor		7240			1
November 15, 2017	Novem	ber 17,	2017	EMSL inc.						
ccupancy Status During Abate	ment (Check only	or.e)		Street Addres						-
Facility Closed/Vacated D	uring Entire Perio	d of Abate	ment	1						
Abatement Performed Out Describe	Iside of Normal F	acility Hou	rs -	City, State, Zi						-
Other - Describe: Vacan	it			One State 2	D Code					
				Piscatawa	y, NJ 08854					
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ource of work Toneck all that app	714.1					II Cantala				Section 1
							The sit Adiri	u usaban	A5 1.1 .	11.8
≥ 3 sf or ≥ 3 If			Renovation			ill Contain				
≥ 3 sfor ≥ 3 if □≥ 160 sfor ≥ 260			Renovation Demolition		Mir Glo	ni-Endosui vebag Prod	edure			
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D≥ 160 sf or ≥ 260 ocation of Asbestos-Containing	Is Location Norm		Demolition Description of As	bestos Contairin	Mir Glo Nor g Material	ni-Enclosur vebag Prod n-Exempted Amount	edure (*) and h	Von-Friat Lement Tv		id ire
D≥ 160 sf or ≥ 260 ocation of Asbestos-Containing	Solely by Maint./ Staff? (12)	Custodial	Demolition	bestos Contairin nal systems insul	Mir Glo Nor g Material	ni-Endosui vebag Prod n-Exempted	cedure (*) and I		YDE	
D≥ 160 sf or ≥ 260 coation of Asbastos-Containing aterial (ACM) in Facility (13)	Solely by Maint.		Demolition Description of As (ACM) (i.e. then VAT, or other mis	bestos Contairin nal systems insul ccell.)	Mir Glo Nor g Material	ni-Endosur vebag Prod n-Exempted Amount (Specify S or LF)	edure (*) and 1 Aba Rem	lement To	YDE	
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ocation of Asbestos-Containing faterial (ACM) in Facility (13) Attic ame of Reg. Waste Hauler	Solely by Maint./ Staff? (12) YES NO	NA R	Demolition Description of As (ACM) (i.e. then VAT, pr other mis Vermiculite	bestos Contairin nal systems insul ccell.)	Min Glo Nor g Material ation, surfacing,	ni-Enclosur vebag Prod n-Exempled Amount (Specify S or LF) 230 sf	dure (*) and 1 Aba Rem	lement To	YDE C L	
D≥ 160 sf or ≥ 260 ocation of Asbestos-Containing laterial (ACM) in Facility (13) Attic ame of Reg. Waste Hauler ee Hauler Below # 1 & 2	Solely by Maint./ Staff? (12) YES NO NJDEP W. See Beld	NA IXI	Demolition Description of As (ACM) (i.e. then VAT, prother mis Vermiculite	bestos Contairin nal systems insul ccell.) Insulation	Min Glor Nor g Material ation, surfacing, of Waste: 5	ni-Enclosur vebag Prod n-Exempted Amount (Specify S or Lf) 230 sf	Aba Rem a ne of Re a adownii	lement To	YDE HIECI	
	Solely by Maint./ Staff? (12) YES NO NUDEP W See Belo terment Consu	NA NA Ste Hauler	Demolition Description of As (ACM) (i.e. then VAT, or other mis Vermiculite 10 #	bestos Contairin nal systems insul ccell.) Insulation	Min Glo Nor g Material ation, surfacing, of Waste:	ni-Enclosur vebag Prod n-Exempted Amount (Specify S or Lf) 230 sf	Aba Rem a ne of Re a adownii	gistered ! City St Route 2	Lan fi	E close
ocation of Asbestos-Containing laterial (ACM) in Facility (13) Attic ame of Reg. Waste Hauler ee Hauler Below # 1 & 2 Auler #1) Greenwood Aba NJ DEP # 12561 auler #2) Newark Carting, I	Solely by Maint./ Staff? (12) YES NO NUDEP W See Beto terment Consu NY DEP # nc Newark, N	NA NA Sto Hauler W Itants, In-	Demolition Description of As (ACM) (i.e. then VAT, or other mis Vermiculite 10 # c Butler, NJ (NJ DEP # 19551	bestos Contairin nal systems insul ccell.) Insulation	Min Glor Nor g Material ation, surfacing, of Waste: 5	vebag Productive Barbara Productive Barbara Productive Barbara Productive Barbara Productive Barbara Productive Barbara Barbar	edure (*) and 1 Aba Rem a ne of Re adowfill R O.W.	gistered II Landfill S City. St Route: Bridger	Lan fi	E close
ocation of Asbestos-Containing laterial (ACM) in Facility (13) Attic ame of Reg. Waste Hauler ee Hauler Below # 1 & 2 (auler #1) Greenwood Aba NJ DEP # 12561	Solely by Maint./ Staff? (12) YES NO NJDEP W See Belo tement Consu NY DEP # nc Newark, N	NA Ste Hauler W Itants, In- PROJEC	Demolition Description of As (ACM) (i.e. then VAT, or other mis Vermiculite 10 # c Butler, NJ (NJ DEP # 19551	bestos Contairin nal systems insul ccell.) Insulation Cubic Yards o	Min Glor Nor g Material ation, surfacing, of Waste: 5	ni-Enclosur vebag Proc -Exempter Amount (Specify S or L f) 230 sf N M G	Aba Rem a ne of Re a adownii	gistered I I Landfil S City St Route 2 Bridger 304-84	Lan fi	E close

PAID	S	state of N	ew Jers (Pursu	sey - Notifi	cation of Asbestos	Abate	ipent [# /2 / E	M
GAC Project # 060-17	MIZ	1411	(1 4104	111011111	2.0.00 / und 12.120 //	1					
Date of Notification (1)					Name of Building Owner	/Operator	(2)	NO.	17.00		
	nber 13,	2017			Name of Building Owner RUTGERS, THE S	TATEL	NIVER	SHOTO	F NJ ZL	ΠI	
Agencies Notified		Notification			Street Address						meteor
TT = 0 .		⊠Initial I	Notificat	ion	ENVIRONMENTAL	HEAL-	TH & S	AF : 6	DEPT.	(REHS	-
⊠ EPA		☐ Amend	ded Notif	fication#	74 STREET 1603, I	BLDGA	116, A	VAT A I	C19, 813	RAPES	s I
☑ DCA		☐ Emerg	gency (ir	ncluding	City, State, Zip Code	-			NSING		
⊠ DOL		justific	cation)		PISCATAWAY, NJ	08854					
DEP- No Longer REQUIF	RED	□ Cancel	lled		Name of Contact		Tel	ept o 🥡	umber		
⊠ DOH					MICHAEL F. SMITH	H, ENV.					
					HEALTH & SAFET	Y					
				FACILITY IN	FORMATION						
Name of Facility Where Abater					Type of Facility (4)						
NEWARK POWER PL	ANI, BL	LDG# /261	I		School (K-12)						
Street Address					Subchapter 8 (other that						
295 NORFOLK STREE	T RBH	SNEWAR	KCAM	PIIS	Other (i.e. private & con						
200 HOR OLK OTKER	-1,11011	ONLWAN	ii OAiii	1 00	Sq. Feet: N/A	for Floor	rs: 2 Bl	dg. 🕹 📑 🧎	80+ ye	ears	
City (5)	County (6)	•		Code (7)	Comment Head for in the in-	and a second the	L	•	20040		
NEWARK	ES	SEX	(State U	se Only)	Current Use (prior if bein	ig demolis	snea): P	owir - a	i it		
Name of Monitoring Firm Hired		Owner (8)	ASCM N	10.	Name of Contractor (9)						
ATC Group Services	LLC		00098	3							
2					GREENWOOD ABA	TEMEN.	T CONS	ULIFI	TS, INC	: .	
Street Address					Street Address						
3 TERRI LANE					268 MAIN STREET						
0. 0. 7. 0											
City, State, Zip Code	00046				City State, ZipCode						
	08016	Talaahaaa	Lumban		BUTLER, NJ 07405				-		
Project Manager for Monitoring BRIAN R. KEARNEY	Pillin	Telephone N 609-386-			Telephone Number		Lice	nse Nu n	er		
DICIAN IN REALINET		009-300	-0000		973-492-0477		008	840			
Scheduled Start Date (10)		Scheduled C	Completion	Date (11)	Name of OSHA Monitor		1000		•		
12/08/17		02/05/201	18		ENVIROVISION, INC	C.					
Occupancy Status During Ab					Street Address						
☐ Facility Closed/Vacated Du					20-21 WARGARAW	ROAD,	BLDG#	35 E			
■ Abatement Performed Out					0:1-0:1-7:-0-1						
Describe: Schedule: 4PM -	5AM Da	ily (24 HOU	RS & W	EEKENDS	City, State, Zip Code FAIRLAWN, NJ 074	10					
AS NEEDED)					PAIRLAVIN, NJ 0/4	10					
▼ Facility Occupied During A	Abatement	t									
Average and the second											
Scope of Work (Check all that a	apply)										
П. о. / о.:				IDIO .				it w th	jative Pre	essure	
□≥ 3 sf or ≥ 3 lf	00.15			Renovation		☐ Mini-E					
$\boxtimes \ge 160 \text{ sf or } \ge 2$	11 00			■ Demolition					Vap & Cu		
Location of Asbestos-Containing	a a a	cation Normali		D					n-Friable		ure
Material (ACM) in Facility (13)		y by Maint./Cu			pestos Containing Material al systems insulation, surfaci		nount pecify SF	71 81 8	ent Type	1	
	Staff?			VAT, or other mis	cell.)		LF)	₹€ 1 ½	Repair I	Encap En	close
	YES	NO	NA								
GF1 - Boiler #3	X		_	Boiler Packi	ng (TSI)	An	00 SF	+=		Г	
GF1 - Boiler #3	X	+						<u>X</u>	-	\vdash	
J. 1 DOMOT #0	161	-	-	Pipe Insulati	011 (131)	12	0 LF	∔ ≛		\vdash	
Name of Rea Mest- Haut-		NIDED W	h= 1.1= .1	D.#			1.:				
Name of Reg. Waste Hauler See Hauler Below #1 & 2	, 1	NJDEP Wast		U#	Cubic Yards of Waste:	40 CY			tered Lar		
						the state of the s	G.R	V . 3	. North L	.anatiii	
Hauler #1) Greenwood Abatem	nent Consu	ıltants, Inc	Butler, NJ	07405		Disposal	Date		City, State		
NJDEP # 12561		. N. I. O. 4700							100 New		
Hauler #2) Newark Carting, In NJ DEP # 4509	ic., Newark	c, 15J 04509				02/05/	2018		Rd. Morri 19067	sville, P	a
110 DET # 4505									215-736-	1700	
Completed by (Print or Type)	Тті	tle			Signature		Date		-		
RAYMOND C. PEDALII		ENIOR PR	ROJECT	r		7,,			13, 20	17	
		IANIACED			Raymond C. Pe	dalino	140	01111	10, 20	1.1	

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

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		1	7	2017		
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Date of Notification (1)		_		Nomo	of Duildin	~ 0	mar/Onesates /	2)	-14-6	nds:	1		20	1/_	
11 / 14 /	17			A CONTRACTOR OF THE PARTY OF TH	unty of E		ner/Operator (2)							
						3367	`			ASB	1 : 6	20	ONTE	201 8	
Agencies Notified Type Notific ☐ EPA ☐ Initial	cation			CARRESTO	Address		42			7100		ENS		المال	
☑ DOLWD ☐ Amende	d			58/57/5	Bloomf	100000			le source o	Olim uper male ou		personne			
☑ DOH Amendm					State, Zip (
☐ DCA ☐ Emerger		uding			ona, NJ		14								
(NJAC 5:23-8) justificat		81/51		3 95000	of Contac	Z			Telephor	ne Num	€ .				
Cancella	ition			Ras	sheed Yu	suf			_						
				FAG	CILITY IN	IFOF	RMATION								
Name of Facility Where Abatement is	Taking F	Place (3)					Type of Facility (4	4)						
Commercial								School (K-12)	(OII II						
Street Address								☐ Subchapter 8 ☐ Other (i.e., pri	(Other that vate and o	omme	ור וו ור	Idino	18		
50 Grove Avenue								homes, etc.)			J. L. J.	non ig	σ,		
City (5)								Square Feet	# of Flo	ors	3	lg. A	ge		
Cedar Grove															
County (6)				Coun	ty Code (7	de (7)(STATE USE ONLY) Current Use (Frior if being demolis n									
Essex															
Name of Monitoring Firm Hired by Buil	ding Ow	mer (8)		ASCM	No.	Name of Abatement Contractor (9)									
Bio Terra Solutions				0615	995	ALL PRO MANAGEMENT LLC									
Street Address						Street Address									
P.O. Box 1224								Lane							
City, State, Zip Code					City, State, Zip Code										
Union, NJ						G	arfield, NJ (7026							
Project Manager for Monitoring Firm			Tele	phone I	No.	Tele	Telephone No. License No.								
Rick Eustaquio				3-494		9	73-928-4888		1188						
	Schedul		25			Nar	e of OSHA Monitor								
		- 10		_ / -	17	A	LL PRO MA	NAGEMENT LL	С						
Occupancy Status During Abatement (5.00			Stre	eet Address								
☐ Facility Closed/Vacated During Enti						2	7 Outwater I	_ane							
Abatement Performed Outside of N Time of Abatement:AM	ormal Fa	acility I	lour	s - Des	cribe	City	, State, Zip Co	ode							
			FIVI-		AIVI	G	arfield, NJ (7026							
Scope of Work (Check all that apply)							D- " 0 '				-				
☐ ≥3 sf or ≥3 lf		7 Rend	vatio	on			☐ Full Cont	ainment with Nega losure	itive Press	sure					
≥160 sf or ≥260 lf	×	Dem	olitio	n			⊠ Glovebag	Procedure							
		1-1					Non-Exe	mpted (*) and Non-	-Friable P	rocedu	7				
Location of			ocati rmal				Description				ı ıb	teme	ent Typ	pe	
Asbestos-Containing Material (ACN	A)	Used	Sole	ly by	Asbe	stos (Description o Containing Ma		Amou	unt	1	Re	E	E I	
TO BE ABATED		Main				., the	rmal systems i	nsulation,	(Spec	cify	1 8	Repair	cap	Enclosure	
IN Facility (13)			(12)	Main:			urfacing, VAT, ner miscellane		SF or	LF)	1.		Encapsulate	ure	
X7	,	Yes	No	N/A		O.I.	ici illiocolario	040)					te		
Basement				\boxtimes	Off Whi	te In	sulation		190	LF	[]				
Kitchen- 1st Floor	[\boxtimes	VAT				216	SF	Tij				
1st Floor Hallway			_	\boxtimes	VAT				1,000	SF	111	П		\exists	
	7						[] [] []								
Name of Registered Waste Hauler											stered Landfill				
All Pro Management, LLC					No.	Was	ste						en l		
City, State					0034860 As Needed G.R.O.W.S. North Disposal Date City, State					th Landfill / Fairless L df IESI Landfill					
Garfield, NJ							BD								
ing and the production of the state of the s						'		Morrisville, PA/	Bethlehem,			i e			
Completed By (Print or Type) Allen Monchik	Title	ject N					Signature	n.,		Da					
ASB-41	ıdna	iger			Allen	Monches	3	_ 1	1111	17					

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

Check # 25635

			,	ruisu	ant to NJ/	AC 8:60 and 5:16	5)		(1)	FI	1 1/1
Date of Notification (1)	/14/2017			Nar	me of Buildi	ng Owner/Operato			: 42		<u>I</u> W
				_			olzer				
Agencies Notified EPA	Type Notificati	on		Stre	eet Address			Rd.	OV	17	201
DEP DOL	☐ Amended			City	, State, Zip	Code		Ka.	:==		
	Amendmen Emergency		na				ceton, N.	J 08540	STO	200	NITO
☑ DOH □ DCA	justification	1)	9	Nan	ne of Conta			J 08540;	100	ENSI	MIK
	☐ Cancellation	1			Pete	r Holzer					No.
				F		FORMATION		_			-,
Name of Facility Where	Abatement is Tak	king Pla	ce (3)				Type of Facilit	v (4)			
	Reside	entia	al_		· · · · · · · · · · · · · · · · · · ·		School (K-	T 150 200			
Street Address							☐ Subchapte	r 8 (Other than k	. 2		
				-			homes, etc	private & comr 16	ri ia bu	uildings	S,
City (5)			S0755-2557				Square Feet	# of Floor	- T	Bldg. A	\ae
Prin	ceton, N	IJ 08	354)			3000	2		80	.5-
County (6)				Co	unty Code (7) (STATE	Current Use (F	Prior if being de m	s ed)	
Merce	r				E ÓNLY)						
Name of Monitoring Firm (8)		g Owner		ASC	A No.		nent Contractor (
Street Address	MECS						ens Environ	mental Ser v	ce.,]	nc.	
Street Address	DO Don 2	41				Street Address	AVE 152 5200			-700	
City, State, Zip Code	PO Box 3	41				-		Box 322			
	osswicks, NJ	0851	5			City, State, Zip C) IX 00 56 t			
Project Manager for Mon		0051		ephone	NIO.	Talaahaaa Na	Allentow	n, NJ 08501	:		
Bill Wei			0.00		98-4070	Telephone No. (609) 25	0 0600	License N -	0.40		
Start Date (10)		eduled (_		ate (11)	Name of OSHA N			049	13	
_11/28/2017	1	/01/			ate (11)	Name of OSHA II		ECS			
Occupancy Status During		eck only	one)	. /		Street Address	141	======	:==		
Facility Closed/Vacate	d During Entire P	Period of	Abate	ment			PO F	341 Box 341			
Abatement Performed			ty Hou	rs		City, State, Zip Co		======	:==	_	
Other - Describe:	8am 4	mq					Crosswick	s, NJ 085 5			
Scope of Work (Check all	that apply)								:==		
∑≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enovat emolitic			☐ Mini-Enc XX Gloveba	g Procedure	gative Pressur			
			ocatio							Abaten	nent
Location of		The company of the Co	ormally Solel			Description of				Тур	
Asbestos-Containing Ma	aterial (ACM)	Mair	ntenan	ce/	Asbesto	s Containing Mate	erial (ACM)	Amount		П	
TO BE ABATE IN Facility	: <u>D</u>	1000	ustodia Staff?	H	(i.e., t	hermal systems in surfacing, VAT, of	sulation,	(Specify SF or LF)	D	الما	Enc
(13)			(12)			other miscellaneou	rs)	SF OF LF)	Remova	Repair	Encapsulate
		Yes	No	N/A					<u>v</u>		ilate
Basement			X		Ther	nal Pinc		20 lf			-
Crawl Space	ce		Х		Therm			90 fl	<u> </u>		+
						a Lipe		30 11 -	- 41		+
								<u> </u>	-		+
Name of Registered Waste				JDEP V		Cubic Yards	Name of Regis	tered Landfill			
Stevens Environme	ental Service:	s, Inc.	_ 113	auler ID 182	92	of Waste 2		Fairless Lan	151		
City , State						Disposal Date	City, State	7			
	Allentown, N	11				12/1/2017		Morrisvill:	1.7		
Completed By Mahlon E. Steve	Title		7.63			Signature	7 / /	Date	:==		
				Mana					4/1		

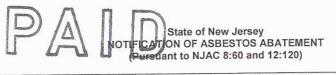
PATT					St	tate of Ne	ew Jersey		Check # 1	637						
14001	2-1		N		CATIO	N OF ASE	BESTOS ÁBATE C 8:60 and 5:16									
U/1200									IN E	2		W	E			
Date of Notification (1)	14/201	17			Name	e of Buildin	g Owner/Operato S	ohr								
Agencies Notified	Type Noti		1		Stree	t Address				7	7	201	7			
EPA DEP	Initial Amend	lad			-				age _				_			
⊠ DOL	Amend	iment #		_	City,	State, Zip (IN 500	07040 AS3	TOS	CO	VITRO	21 8			
⊠ DOH	☐ Emerg	cation)	ncluding	1	Name	e of Contac		oou, Nu	Telephone A #	是是	NSI	IG	<u> </u>			
□ DCA	☐ Cance	llation				Kirk	Sohr		1 1111111111111111111111111111111111111							
					FA	CILITY INF	ORMATION									
Name of Facility Where A			.					Type of Facili								
Street Address	Resi	den	tial	-		•			pter 8 (Other than I - 2)							
								Other (i.e., homes, etc.	private & commer							
City (5)	20							Square Feet	# of Floors	В	ldg. A	ge	\neg			
	aplewo	od,	NJ	070		-t · O - d - /	7) (07475	2400		: 9	5		_			
County (6) Essex						ONLY)	7) (STATE	Prior if being den o	1 (a)							
Name of Monitoring Firm	Hired by Bu	uilding	Owner	\equiv	ASCM	No.	Name of Abater	eatement Contractor (9)								
	MECS						Stevens Environmental Services Inc.									
Street Address	PO Bo	ov 3/1	1				Street Address PO Box 322									
City, State, Zip Code	100	UA 34	1				City, State, Zip (State, Zip Code								
Cro	osswicks		08515					Allentown, NJ 0850								
Project Manager for Mon	post of the second	111		- WO - 200	phone		Telephone No.	The state of the s								
Bill Wei	isgarber	Sche	duled C			8-4070 te (11)	Name of OSHA	59-9688 Monitor) - 9:	5		_			
_11/28/2017			2/1			(11)	Traine or oot at	/IECS								
Occupancy Status During	g Abatemer	nt (Che	ck only	one)			Street Address	200		:==						
☐ Facility Closed/Vacate ☐ Abatement Performed							City, State, Zip C	Box 341	:==			_				
☑ Other - Describe:	8am -			y i loui	3		City, State, Zip C		ks, NJ 08515							
Scope of Work (Check al		- I-	7111		1011112					:==			\dashv			
23 sf or ≥3 lf 2160 sf or ≥260 lf			XX Re	novati molitio			Full Col Mini-En Gloveb	10.9								
				ocatio						Д	bater					
Location o			Used	Solely	by		Description o			-	Тур		\dashv			
Asbestos-Containing M TO BE ABAT		VI)	Cı	tenani stodia			os Containing Ma thermal systems i	insulation,	Amount (Specify	D	71	Enc	m			
IN Facility (13)			1	taff? (12)			surfacing, VAT, other miscellane		SF or LF)	Remova	Repair	Encapsulate	Enclosure			
			Yes	No	N/A					<u>n</u>		ate	Te			
Basement				-		Pine	Insulati	on	130 lf.			\dashv	-			
nasement		X						- <u>4</u> -			-					
									<u> </u>							
						Vaste No.	Cubic Yards of Waste	Name of Feg	istered Landfill							
Stevens Environmental Services, Inc.						.92	2 Disposal Date	City/, State	Fairless Lar				_			
Allentown, NJ							12/1/201/	4 7	/Morrisvill 2	PA						
Completed By Title							Signature	/ // /	Date	-			-			
Mahlon E. Stev	vens		Pre	oject	Man	ager			11/1	1/17						
SB-41 AR 00		* D	o not us	e this	form f	or asbesto	saicensure exem	pted-activities.								

PATI		NC	State of New Jersey Check # 1:636 NOTIFICATION OF ASBESTOS ABATEMENT											
CK 1002	40	140				0 and 5:16					п	D. G. C.		
Date of Notification (1)	N/		TI	Jame of Bui	ldina Ow	ner/Operato	r (2)		<u>p</u>	E	1	V E		
	14/2017			tarrie or Da	iding Ow		Dietrich							
Agencies Notified	Type Notificati	ion	8	Street Addre	ess		DECOTTO!		= IIIV	1	7 2	017		
EPA EPA	Initial		_					1 [7]	HILLY	1	1 2	017		
DEP DOL	Amended Amendmer	nt#		City, State, Z	ip Code									
⊠ DOH	☐ Emergency	(including	_			Tre	nton, NJ	08618 A	S3:11	OS C	ONT	ROL 8		
DCA DCA	justification Cancellation		l N	lame of Cor	27/2007/2007/2	5522 5.09		Telephone N	m al E 💆	SEIA!	SING			
						ietri	<u>ch</u>	\$ 						
Name of Facility Where	Abstement is To	kina Dlaga	(2)	FACILITY	INFORM	ATION	T (F)							
rvaine or r admity vinere	Resid	-					Type of Facili							
Street Address	RODIA	circia.		Per Land			Subchapte	er 8 (Other than K	(- 12)					
							Other (i.e., homes, et	private & comme	er di li du	ldings	,			
City (5)		U					Square Feet	# of Floors		lidg. A	qe	-		
	Trento	n, NJ	086	18			35.00	2		100				
County (6)				County Cod		TATE	ic is id			_				
Merc			_	USE ONLY										
Name of Monitoring Firm (8)		g Owner	AS	SCM No.	Nam	ne of Abater	ices L	0.000						
Street Address	MECS													
Street Address	PO Box 3	841			Stre	et Address	PO	Pov 222						
City, State, Zip Code	1 O DOX 3	7-7-1			- -	PO Box 322 City, State, Zip Code								
	osswicks, N	J 08515			J.i.y,	vn, NJ 08501								
Project Manager for Mon	nitoring Firm		Teleph	one No.	Tele	phone No.		License No.				=		
Bill We	isgarber		(609)	298-407	0	(609) 25	59-9688		2) 19	3				
Start Date (10)	Sch	neduled Co	mpletio	n Date (11)	Nam	e of OSHA	icheritore.							
11/28/201	7	12/1/	2017	7		et Address		1ECS						
Occupancy Status Durin	700	- 3	355											
Facility Closed/Vacate Abatement Performed				ent	==:=			_						
	8am - 4		riouro		City,	State, Zip C		ks, NJ 0851.	5					
Scope of Work (Check a		- E												
XX≥3 sf or ≥3 lf		1577 Dan				Full Cor	ntainment with Ne	egative Pressure						
≥160 sf or ≥260 lf		XX Ren Dem	ovation			Mini-End	ciosure ag Procedure							
		1 1.1.				Non-Exe	empted (*) and N	on-Friable Proce						
			cation mally						J	Abater Typ				
Location of Asbestos-Containing M			solely by			escription of				.,,,	$\overline{}$	-		
TO BE ABAT	ED	Cus	todial	1		ntaining Mat al systems i		Amount (Specify	z	_	Enc	m		
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Name of Registered Was				EP Waste er ID No.	of Wa	Yards	Name of Reg	istered Landfill						
Stevens Environm	nental Servic	es, Inc.		18292	200000000	2	ļ	Fairless La	nd [[]					
City, State	A 11	NII			sal Date	City, State	/)							
Completed By	Allentown,				1/2017		Morrisville	2.] . L			_			
Mahlon E. Stev	vens		ect M	lanager	5	ignature	1 1	Date 1.1	1.1) (mg				
		110	IV						t	1				

PAID CLOODS Date of Notification (1)			ATION (uant to	NJA	ESTOS C 8:60	ersey B ABATEMENT O and 12:120) ner/Operator (2)		E C	7	201		
11-10-17	Nation Control		Chemo	ours Co		neiroperator (2)		1	DE MINISTER			
Agencies Notified	Notification Type		Rt 130	Address	5			ASBE S	ENS!	NTR NG	OL	&
Y EPA 区 DEP X DOL	Initial x Amended Amendment # Emergency (Include	dina		tate, Zip ⁄ater , N		3			Va temporery			
☑ DOH ☐ DCA	Justification) Cancellation	inig		of Conta Iurphy				Tele p 1	na Nu	mber		
			FAG	CILITY I	NFOR	MATION						8-1
Name of Facility Where A	batement is Taking Pla	ce (3) C	hamber	works F	Plant		Type of Faci		_			
Street Address Rt 130 South							School (h	ter 8 (other 1 e. private a	ar K-1	2) cial bu	iildii	ngs,
City (5) Deepwater					1		Square Feet 150000		(File	Bli 67		Age
County (6) Salem			1123.00		ounty C	ode (7) (STATE .Y)	130000 200	(prior if b ii	demo	lished)	
Name of Monitoring Firm I Harvard Environmen		3)	ASCM	No.		e of Contractor (9) nty Environmen	Wearhouse		All The			
Street Address 760 Pulaski Highway	8				Stree	t Address New Churchma						
City, State, Zip Code New Castle, DE 1972						State, Zip Code Castle, DE 197	720					
Project Manager for Monitor Wesley Morrison	oring Firm		one No. 326-23	333		hone Number) 322-8946		Lice is 3 00573	V mbe	er		
Scheduled Start Date 11/27/17	Scheduled Cor 04/15/18				Name	of OSHA Monitor nty Environmen	tal		-			
Occupancy Status During	Abatement (Check only	one)			Street	t Address New Churchma			_			
Facility Closed/Vacated Abatement Performed (Other – Describe:	During Entire Period o Outside of Normal Facil	f Abater ity Hour	ment s -		City, S	State, Zip Code Castle, DE 197			-			
Scope of Work (Check all t	hat apply)				11011	200000000 200			-			
$X \ge 3$ sf or ≥ 3 lf \square ≥ 160 sf or ≥ 260 lf				Rend		☐ Mini-Enclos	nent with Nega sure Glov pted (*) and No	ebag Pro :€ 1	r	Э		
			s Locati							Ab	ate Typ	ment
Location Asbestos-Containing TO BE AB IN Facility	g Material (ACM) <u>ATED</u>	Us M:	Normali ed Solel aintenar Custodia Staff? (12)	y by nce/		Description of estos Containing Ma e. thermal systems surfacing, VAT other miscellane	aterial (ACM) insulation, , or	An o ii (Ste : SF >r L	¥	Removal	Repair	Enclosure
		Yes	No	N/A								
Wearhouse			X		Roofi	ng Material and fla	shings	59,000 if 6,400 s		X	-	
			X		Floor	tile and mastic		11,000 if		X		
			X			Compound insulation		13,000 it	_	X	-	
			X		Fire d	oors		1,500 st		X		
Name of Reg. Waste Haule S & J tRANSPORT	er .	20,000	DEP Wa No.0321		ıler	Cubic Yards of Waste	Name of Re Constoge					
City, State Woodstown , NJ						Disposal Date TBA	City, State Morgantow	n , PA				
Completed by Charles Flowers	Title PM					Signature	Flan.	ue.	Cate	10-1	17	

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Re-Noth P			CATION	ate of New OF ASBE to NJAC 8	STOS	ABATE		т	Research Co.			חחחו		\mathbb{V}	
Date of Notification (1)				Building C					111	111	NO/	1	7	2017	
11/14/17		_			ricia	Bonann	ıı Pr	ivate Home	14	4				2011	
Agencies Notified Type Notification			Street A	ddress					-		sarboek m	81 20	Discourse		
⊠ EPA ⊠ Initial		-	City Sta	te, Zip Coo					+	ASB	ES (E K	ON	TRO	L &
DEP Amended DOL Amendmen	t#			ite, zip coo i Haven l		N.1 080	กล		la cons	THE PERSON NAMED IN	L I	E P	SIIV	3	-
Emergency	(including	- F		Contact	unt	140 000			Tal	anhona N	lum e	-			
□ DOH justification □ DCA □ Cancellation			Loren												
			FACI	LITY INFO	RMA	TION							2		$\overline{}$
Name of Facility Where Abatement is Takin							Тур	oe of Facility (4)							
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Street Address					-		X	Subchapter 3 Other (i.e. pri etc.)				it is	gs,	home	s,
City (5)								uare Feet	1000	f Floors			g. Ag	ge	
Beach Haven Park NJ 08008			0	Deale (Th)00+	2				+		
County (6) Ocean			County (Code (7) USE ONLY)				rrent Use (Prior ouse	ir bei	ng demol	iishe d				
Name of Monitoring Firm Hired by Building	Owner (8)		ASCN	(®)		Mama		batement Conir	antor	(0)					
N/A	OWINE (0)		AGUIV	1 140.		100000000000000000000000000000000000000		o Inc.	actor	(3)					
Street Address		57,00				Street	17.750.000				-		-		_
								329							
City, State, Zip Code								Zip Code erlin NJ 0809)1	·		-			
Project Manager for Monitoring Firm		T	Telepho	ne No.		Telepi	CONTRACTOR			License	e No		-	o 100	
2000 6660 66			100			1000 50		3-9800		00727	7				
Start Date (10)			npletion l	Date (11)				SHA Monitor			4.030m 13m		in the		
11/23/17 Occupancy Status During Abatement (Che	11/30/					Sarr									_
	8	65				Street	Add	ress		3					
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe:						City, S	State,	, Zip Code				-			
Scope of Work (Check All That Apply)															-
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova emolit						Full Containmer Mini-Enclosure Glovebag Proce Non-Exempted	dure					9	
	Is	Locati	ion									/		ment	
Location of Asbestos-Containing Material (ACM)	Use	lormal d Sole ntena	ly by		os Co		Viater	rial (ACM)	Α	mount	-	Ī	Ту		
TO BE ABATED In Facility (13)	5225000		Staff?	(i.e.	surf	al system acing, VA miscellar	T, o	r		Specify F or LF)		1	Repair	Encapsulate	Enclosure
(1.5)	Yes	No	N/A					,				1		late	ire
Exterior Siding			х		Ext	erior Si	ding)	19	000 SF					
						i i									
Name of Registered Waste Hauler			JDEP W			c Yards		Name of R	egiste	ered Land	lint				
United Roll Off		7.1	lauler ID 22459	No.	4	aste		G.R.O.							
City, State					15-1307.55	osal Date	2	City, State		A 4000	7				
Elm NJ	Till				11/	30/17 Signatur	_	Morrisvi	ile P	H 1900					
Completed by Anthony T Perna	Title Pres	dent				Signatur	1				Dat :		7		
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+2838 P/	ITON [Pursuant	ate of New Jers OF ASBESTOS to NJAC 8:60 a	S ABATEN nd 12:120)	DEI	E	7	V [3
Date of Notification (1)		Name of	Building Owner	/Operator	(2) A-		1	7 20)17	
Agencies Notified Type Notification		Street A	ddress	174		ASRI:	730	TIAO	POI	0
☐ EPA ☐ Initial ☐ Amended			te, Zip Code			ASBI :	3 ENS	SING	nor.	CL
X DOL Amendment #		N. J.	Contact O	ale 11	MOI	Telephone III	ber			e, 173
DOH justification) DCA Cancellation		Eric Pl	1.77			Telephone W				
Name of Facility Where Abatement is Taking	Place (3)	FACI	LITY INFORMA	TION	Type of Facility	(4)	-			-
Traine or a daily trible ributerion is a sum of					School (K-	12)				
Street Address			-		Other (i.e. etc.)	r 8 (Other than F - 2 private & common i	l build			s,
City (5) [DVallete			V		Square Feet	# of Floors	d	dg. Aq	ge 1	
County (6)		County (Code (7) USE ONLY)		Han		()€			
Name of Monitoring Firm Hired by Building C	Owner (8)	ASCN	/I No.		of Abatement Co Industries Inc					
Street Address				-	Address Box 915					
City, State, Zip Code					tate, Zip Code c, New Jersey	08723				
Project Manager for Monitoring Firm		Telepho	ne No.	Teleph	none No.)899-7499	Licens 3	1.		3.00	
Start Date (10)	Scheduled C	ompletion	Date (11)		of OSHA Monitor					
Occupancy Status During Abatement (Check	k Only One)	11	1	Street	Address					
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe:	Period of Abat	ement urs		City, S	tate, Zip Code		-			
Scope of Work (Check All That Apply)					/					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		ovation olition		É	Mini-Enclosu	cedure				
	Is Loc			L	☐ Non-Exempte	ed (*) and Non-F ri		Abate	ement	
Location of	Nom Used So	nally		Description			-	Ту	ре	
Asbestos-Containing Material (ACM) <u>TO BE ABATED</u>	Mainte	nance/	(i.e. thern	nal system	Material (ACM) s insulation,	Amount (Specify SF or LF)	Ren	Re	Encapsulate	1
In Facility (13)	(1			rfacing, VA er miscellar		Si oi Li j	Removal	Repair	sulat	10000
	Yes N	o N/A	B 00:		-1.	1000	18	_	ro	L
			appes	10>5	My M	SUUSI	10	-		
Name of Decistored Wests Houles		NJDEP V	Vaste Cut	bic Yards	Name o	f Registered Lar d i				L
Name of Registered Waste Hauler Brick Industries Inc.		Hauler ID		Naste 2	1	VS Inc.				
City, State Brick, New Jersey			Dis	posal Date	City Sta	ate				
Completed by	Title		111	Signature	1 /1		te	1/1-	7	
Eric Plackis	Preside	nt			ME		11	1/1	1	



Ц	T-7 Tho	(Put	suant to	NJAC 8:60	and 12:120)))		CK	# ()5	269	54
Date of Notification (1) 11/02/17		73900	lame of B ∕I&T Ba	Building Owne Ink	er/Operator	(2)		ME	()			7 🖪
Agencies Notified Type Notif	cation		treet Add		ivo 4th E	loor						
				hower Dr	ive, 4th F	1001		- - 	4(1-	1	7 20	17
DEP X Amer X DOL Amer	ided idment #_01			s, NJ 0765	52							
Emer	gency (including cation)	38	lame of C					Telephones	8 8 5	- 0	ONTR	01 &
	ellation	ľ	Markey Astronom	or T. Fisch								
Name of Facility Where Abatement i	s Taking Place (3)		FACILI	TY INFORM	ATION	Tvp	e of Facility (4)				
M&T Bank	o raking r tado (o)						School (K-12					
Street Address	-						Subchapter 8	g (Other than K-1	1 !)	lino	ıs hom	es.
532 Ocean Avenue						×	etc.)					
City (5) Jersey City						2,0	uare Feet)00 +	# of Floors 2		0 +	. Age -	
County (6) Hudson			County Co STATE US	ode (7) SE ONLY)		Cui	rrent Use (Prio	r if being demolis	S 16 3			
Name of Monitoring Firm Hired by B	uilding Owner (8)		ASCM	No.	Name J.R.	of A Cor	batement Cont ntracting & E	tractor (9) Environmenta	l C c n	sult	ing, Ir	ıc.
Street Address					Stree 114		ress oute 23					
City, State, Zip Code					20000000000		, Zip Code NJ 07470					
Project Manager for Monitoring Firm	1	T	Telephon	e No.	Telep 973		No. -9200	License 00408	1 lc	7		
Start Date (10) 11/13/17	Scheduled		pletion D	ate (11)			SHA Moniter	ultants, Inc.				
Occupancy Status During Abateme					Stree							
Facility Closed/Vacated During	Entire Period of Al	oatem	ent					ad, Bldg. #35	il			
Abatement Performed Outside Other – Describe:	of Normal Facility I	Hours			1 200		, Zip Code vn, NJ 0741	0				
Scope of Work (Check All That App	ly)					_						
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		enova emolit			Ì	×	Mini-Enclosure				dure	
		4:					NOT-EXCTIP OF	2 () and 11011111			oateme	nt
Location of	N	Locati ormal	ly		Description	on of				Т	Туре	
Asbestos-Containing Material (A TO BE ABATED In Facility (13)	ACM) Mair	d Sole ntena odial s (12)	nce/	(i.e. the	Containing rmal syster surfacing, V her miscell	ms in: /AT, c	sulation, or	Amount (Specify SF or LF)	Kellioval		Encapsulate Repair	Enclosure
	Yes	No	N/A					Selection steriliza				
Boiler Room			X		Pipe Insu			55 LF				
Basement			X	F	Pipe Insu	latio	n	210 LF	:			
			Х	Therma	al System	ns In	sulation	40 SF	:	+		-
							l N	Registered Land	4 (1)			
Name of Registered Waste Hauler J.R. Contracting & Environm	ental Consul., I	}	NJDEP W Hauler ID 7819	No. o	Cubic Yards of Waste 0		The second second second	Central Land				
City, State Wayne, New Jersey		mad		0	Disposal Da	ite	City/Star	te gyl, Pennsylv	or in			
Completed by Jerry Bijelonic	Title Proje	ct M	anager		Signati	ure	1		D: E:	/17	7	

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Date of Notification (1)				ing Owner/Ope Sanzari, Inc)	Ш	H NOV	- 7	7 2	017	
Agencies Notified Type Not		Str	eet Address					ASBEST	()(CONT S NG	ROL	&
DEP Am	ended endment #		y, State, Zip ackensacl	Code k, NJ 07601	1					NG	P*************************************	rower, n
DOH just	ergency (including ification) ncellation	R	me of Conta omane Ol	ivier		- a	l Tele	ephone Num	e			
			FACILITY II	NFORMATION	N T	ype of Facility (4)						
Name of Facility Where Abatemen Former NJ State Police Bui						School (K-12)	er than K-12)				
Street Address 300 Half Mile Rd.						Other (i.e. pri etc.)	ivate 8	& commercial	l b il	lir gs, l		٠,
City (5) Red Bank						Square Feet	10.000			u j. Aş		180
County (6) Monmouth		(S	ounty Code (TATE USE OF	NLY)	-	Current Use (Prior						
Name of Monitoring Firm Hired by N/A	Building Owner (8)		ASCM No.			Abatement Cort Contracting LL		(9)				
Street Address					Street A 522 7t							
City, State, Zip Code						te, Zip Code City NJ 07087	7					
Project Manager for Monitoring Fir	m	Te	elephone No		Telepho 201 21	ne No. 16-9603		License No 01206				
Start Date (10) 11-23-17	Scheduled	S	letion Date ((, ,)		OSHA Monitor Contracting LI	_C					
Occupancy Status During Abatem					Street A 522 7t							
Facility Closed/Vacated Durin Abatement Performed Outsion Other – Describe:	ng Entire Period of Ab le of Normal Facility I	Hours	nt			te, Zip Code City NJ 0708	7			21322		
Scope of Work (Check All That Ap					П	Full Containme	nt wit	h Negative P	1 21 5	re		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		novatio			-	Mini-Enclosure Glovebag Prod Non-Exempted	edure				e	
	1 1-1					Tron Exempte	7		-	bate	ement	
Location of Asbestos-Containing Material TO BE ABATED In Facility (13)	(ACM) No Used Mair	ocation ormally Solely ntenance odial Sta (12)	by As	sbestos Conta (i.e. thermal s surfaci	cription on aining Ma systems ing, VAT iscellance	aterial (ACM) insulation, , or	(Amount Specify F or LF)	Dammai	Repair	e Encapsulate	Litoroadio
	Yes	No	N/A		\			20.05		-	e	
1st Floor / HVAC Roo	om	Х			VAT			30 SF	<u>}</u>			-
1st Floor / Foyer		х			/lastic			00 SF	<u>.</u>			
Exterior		X		Wi	indows		3	3 each	Σ.			
Name of Registered Waste Haule Delfa Contracting LLC	r		DEP Waste uler ID No. 35240	Cubic of Was	ite	Tullytov	vn R	tered Landfill esource R		rery F	acili	ty
City, State Union City, NJ					al Date 27-17	City, Stat Tullytov		PA				
Completed by Jaime Delgado	Title Proi.	Mana	ger.	Si	ignature	B Ran	211	Da 11	e 1- :	- 7		

Print Form

Date of Notification (1)								5:16)		15=	- 3	P	E	ПГ
	/	17		1	Name of Bu		ner/Operat	or (2)		11.	7-5	U	15	
Agencies Notified Type N				- V	Villiam Le	Baron				111	1			
☑ EPA ☑ Initia	al			,	Street Addre	ess				-111-		NOV	17	20
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□ DCA □ Ema	ndmen	t #			City, State, 2					-	. m		THE PERSON	day other
/NIAC FOR BY	rgency fication	(incli	ıding	0	ceanport, lame of Cor	NJ 0775	7					ESTO	S CC ENSI	NTF
Cano				- 1						Teleph	E Num	her	mean management	VG
		-			illiam Lel									
Name of Facility Where Abatement	t is Tak	ing D	000 (FACILITY	INFOR	MATION						_	
Private house	· ·· · · · · ·	mg F	ace (.	5)				Type of Fa	cility (4) -	·			
Street Address								☐ School	(K-12)					
								- Subcha	pter 8 (Other tha	· 2	ì		
City (5)								Other (in homes,	.e., priv	ate and c	n ir ier	cial bui	ldings	,
Oceanport, NJ 07757								Square Fee		# of Flic	:	DIa	- 1	
County (6)				10								1	g. Ag	Đ
Monmouth				10	ounty Code (7) (STATE	USE ONLY)	Curren: Use	e (Prior	if being c	a ar liel	ned)		
Name of Monitoring Firm Hired by B	uildina	Own	er (8)		CM No.					8	101	icuj		
	9		21 (0)	ASC	M No.	Name	of Abatem	ent Contracto	r (9)		-			
Street Address						Gr Te	ch LLC							
						Street	Address					_		
City, State, Zip Code						576 V	alley Rd	[‡] 283						
						City, S	State, Zip C	ode						
Project Manager for Monitoring Firm			TT	lephon	- 11	Wayn	e, NJ 074	70						
			1,0	nepnon	ie No.	1	one No.		I	License N	·			
Start Date (10)	Sched	fuled	Comp	lotion f	Date (11)	973-63	8-1777		1-	1127				
	1	1	1 5	26	17	Name	of OSHA N	onitor		-		-		_
Occupancy Status During Abatament	101 1	2015/11/10/2019				Enviro	vision Co	nsultants,Inc	•					
ES GOILLY CIUSED/Vacated D						Street .	Address	, and						
Abatement Performed Outside of N	Vormal	Facil	tv Hoi	irs - Da	soriba	20-21	Wagaraw	Road, Bldg	# 35E					
	PN	Λ/	PM		AM	City, St	ate, Zip Co	de de	II JJL					
Scope of Work (Check all that apply)				All and the second		Fair La	wn, NJ 07	410						
X >3 sf or >3 If							Clean up	and decentar	nination	with ne a	Ve pr	accura		
≥ 160 sf or ≥260 If		₩ R	enovat	ion		A	Mini-Enclo		legative	Pressure	, or pr	COSUIE		
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		Is	Loca	tion	T		Non-Exem	pted (*) and N	Von-Fria	able Prc o	C Jr 3	essure		
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TO BE ABATED	")	Ma	d Sole intena	nce/	Asbes	itos Conta	cription of lining Mate	rial (ACM)						-
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ime of Registered Waste Hauler				_	Hauler ID No. (Cubic Yard	of Wastall	lama of t						
ame of Registered Waste Hauler Tech LLC			NJDE	P Waste		Cubic Yards		Name of Fegis	stered L	andfill	.] [
ame of Registered Waste Hauler Tech LLC y, State			NJDE	_	5	TBD	Т	R.R.F. Inc	stered L	andfill	.] [
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State of New Jersey

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chi:t# 3059

rsuant to N.J.A.C. 8:60-7 and 12:120-7) GAC Project # 060-17 Date of Notification (1) Name of Building Owner/Operator (2) October 13, 2017 RUTGERS, THE STATE UNIVERSIT / (F NJ Agencies Notified Notification Type Street Address ENVIRONMENTAL HEALTH & SAFE F / EPT? 2017 ☑Initial Notification ☐ EPA 27 ROAD 1, BLDG 4086, LIVING\$TO N : AMPUS ☐ Amended Notification # ☐ DCA □ Emergency (including City, State, Zip Code X DOL ASI E TOS CONTROL & justification) PISCATAWAY, NJ 08854 ☑ DEP- No Longer REQUIRED Name of Contact □ Cancelled X DOH MICHAEL SMITH, ENV. **HEALTH & SAFETY** FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) VAN NEST HALL, BLDG# 3001 ☐ School (K-12) ☐Subchapter 8 (other than K-12) Street Address Other (i.e. private & commercial buildings, homes ← c
) COLLEGE AVENUE CAMPUS Sq. Feet: N/A # of Floors: 1 Bldg. / c: 80+ years City (5) County (6) County Code (7) Current Use (prior if being demolished): ACAD = 1 2 **NEW BRUNSWICK** (State Use Only) MIDDLESEX Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Contractor (9) ATC 0098 GREENWOOD ABATEMENT CONSULTY 115, INC. Street Address Street Address 3 TERRI LANE 268 MAIN STREET City, State, Zip Code City State, ZipCode BURLINGTON, NJ 08016 BUTLER, NJ 07405 Project Manager for Monitoring Firm Telephone Number Telephone Number License I IL 1 DE **BRIAN KEARNY** 609-386-8800 973-492-0477 00840 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 11/24/17 11/27/17 ENVIROVISION, INC. Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 20-21 WARGARAW ROAD ☐ Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code Describe XOther - Describe: Schedule: 8AM - 5AM (24 HOURS & WEEKENDS AS NEEDED) FAIRLAWN, NJ Scope of Work (Check all that apply) □Full Containment with N ∋ a ive Pressure X > 3 sf or > 3 lf □ Renovation Mini-Enclosure □ > 160 sf or > 260 lf ☐ Demolition ☐ Glove bag Procedure / / a) & Cut Non-Exempted (*) at d Non-Friable Procedure Location of Asbestos-Containing Is Location Normally Used Description of Asbestos Containing Material Amount A x nent Type Material (ACM) in Facility (13) Solely by Maint./Custodial (ACM) (i.e. thermal systems insulation, surfacing, (Specify SF Staff? (12) VAT, or other miscell.) Rin : e Repair Encap Enclose or LF) YES NO NA 1st Floor Restrooms X VAT 340 SF ΔĪ Name of Reg. Waste Hauler NJDEP Waste Hauler ID # Name of & stered Landfill 10 CY Cubic Yards of Waste: See Hauler Below #1 & 2 See Below G.R.O.V / North Landfill Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 Disposal Date City, State NJDEP # 12561 100 New Ford Mill Hauler #2) Newark Carting, Inc., Newark, NJ 04509 Fd. Morrisville, Pa 11/27/2017 NJ DEP # 4509 11067 215-736-1700 Completed by (Print or Type) Signature Date RAYMOND C. PEDALINO SENIOR PROJECT October 13 2017 Raymond C. Pedalino MANAGER

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Name of Facility Where Abatement is Taki	ng Place (3)	FAC	ILITY INF	ORMAT	ION	Type of Faci	lity (4)					
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Name of Monitoring Firm Hired by Building	Owner (8)		ASCI	M No.		Brick	of Abatement Industries		(9)				
Street Address							Address Box 915						
City, State, Zip Code						City, S	tate, Zip Code		3				
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph	none No.)899-7499		License V	1,			
Start Date (10)	12	15	npletion	Date (11)		Name	of OSHA Mon	itor					
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Abatement Performed Outside of Norr Other – Describe:	nal Facility	Hours	5			City, S	tate, Zip Code						
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City, State Brick, New Jersey					Dispos	sal Date	City, S	State					_
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Name of Monitoring Firm Hired by Building C ENVIRONMENTAL TACTICS)wner (8)	ASCI 0045	M No. '				batement SYST			(9) AMERI	1				
Street Address 64 BROAD ST.			•			Street /		ress ITEHE <i>A</i>	VA C	Έ.				1990011		
City, State, Zip Code MATAWAN, NJ 07747				**				Zip Code RIVER		888	2					
Project Manager for Monitoring Firm TOM GEIGER			Telepho	one No. 90-2217		Teleph	one				License I	N : -				
Start Date (10) 2/4/17		led Con		Date (11)		Name o	of O	SHA Mor		OF A	AMERIC					
Occupancy Status During Abatement (Check	Only O	ne)		/		Street A	Addr									
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City, State ELIZABETH, NJ				1 000	sposa 13	al Date		City, 8		/ILL	E, PA	-				
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City, State, Zip Code MATAWAN, NJ 07747				*				Zip Code RIVER, N	J 0888	32					
Project Manager for Monitoring Firm TOM GEIGER		1 1	Telepho 732-29	ne No. 90-2217		Teleph 732-				Licens 0111					
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