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

Mrs.				(F	ursua	nt to NJ	AC 8:60 and 5:10	5)	MEAR	1			
Date of Notification (1)	55/0	2000 - 1000-					g Owner/Operator (2)	FISH	lyt	: ()		0.00
11 / _	14 /	12		Til.	Ca	mpbell S	oup		2812 NOV				
Agencies Notified	Type Notific	cation			Stree	t Address	1		2812 NOV 20	AM	7: i	o	
⊠ EPA	☐ Initial				1 (Campbell	Place		lara-			0	
⊠ DOLWD	⊠ Amende	5.70333	102	10.	City,	State, Zip	Code	•	& LICEN	CONT	RO	,	- 1
☑ DHSS	Amendn		-		Ca	mden, N	J		& LICEN.	SING	116	i.	
(NJAC 5:23-8)	justificat		ciudini	3	Nam	e of Contac	ot .		Telephone Num	ber	_	(I)	
	☐ Cancella	ation			Ch	ris Scho	en						
6						CILITY	NFORMATION		8				
Name of Facility Where	Abatement is	Taking	Place	(3)				Type of Facility	(4)	- 1000		A	
Former Sears				,				☐ School (K-12					
Street Address								☐ Subchapter 8	(Other than K-12				
1300 Admiral Wilse	on Blvd							Other (i.e., p homes, etc.)	rivate and comme	rcial bu	ilding	js,	
City (5)								Square Feet	# of Floors	Ble	dg. A	ne	
Camden								200000	3	1	100	gc	
County (6)					Cor	inty Code (7)(STATE USE ONLY)		ior if being demolis				
Camden						inty code (I NOTHIE GOL GILLY	Manufacturi		onou			
Name of Monitoring Firm	Hired by Bui	ilding C	wner	(8)	ASCN	1 No	Name of Ahatem	ent Contractor (9)			_		
Langen Engineers		ilding C	VANICI	(0)	000			ironmental Sys					
Street Address							Street Address	ironinional Oye					
River Drive Center	1 4 th Floor						550 East Uni	on Street					
City, State, Zip Code	1, 4 11001			- 124			City, State, Zip Co					-	_
Elmwood Park, NJ	07407						West Cheste						
Project Manager for Mor				To	elephone	No	Telephone No.	1, FA 19302	License No.				
Vijay Patel	illoring Firm				•	4-6900	610-701-9000	1	00508				
Start Date (10)	-	Cahad	ulad C			ate (11)	Name of OSHA N		00308				
10 / 29 /	a common to					12	AET	normor :				2	
Occupancy Status Durin	g Abatement	(Check	only	one)			Street Address	±1		***			
	ed During Ent	tire Per	iod of	Abat	tement		28 N. Pennel	Road					
☐ Abatement Performe							City, State, Zip Co	ode					
Time of Abatement:	:00AM-3:30	PM/	P	М	AN	ı	Media, PA 19	063					
Scope of Work (Check a	Il that apply)												
≥3 sf or ≥3 lf			□Re	.no.//	ation		☐ Full Con	tainment with Neg	gative Pressure				
≥3 \$1 01 ≥3 11 ≥160 sf or ≥260 lf			⊠ De					g Procedure					
				200000000					n-Friable Procedu	re			
					ation					Ab	atem	ent T	ype
Location					nally olely by	Anh	Description of estos Containing Ma		Amount	R	Re	Ш	四四
Asbestos-Containing TO BE AB/		VI)	Ma	inter	nance/		e., thermal systems		(Specify	Removal	Repair	cap	Enclosure
IN Facil			Cus	todia (12	al Staff?		surfacing, VAT	, or	SF or LF)	<u>a</u>		Encapsulate	ure
(13)			Yes	No	T	-	other miscellane	ous)				हिं	
1 st & 2 nd Floor							sulation		4000 LF				
Mech Rooom						+	on cloth		35 SF				
Windows, Doors, mi	rrors					misc. g	lue, caulk		1,850 SF	×			
electric room, elevat	or room					Brake	pad, transite, ebo	ony board	122 SF	Ø			
Name of Registered Was	ste Hauler			-	NJDEP		Cubic Yards of	Name of Regis	tered Landfill				-
THE STREET STREET, INC. 10 HOUSE STREET, INC. 10 HOUSE STREET, INC. 10 HOUSE STREET, INC. 10 HOUSE STREET, INC.					Hauler		Waste 25	Allied BFI	Imperial				
N.E.T.S.					1894		Disposal Date	City, State			-0.80		
							TBD	Imperial, P	'Α			,	
City, State Hazelton, PA	ype)	Title					TBD Signature	Imperial, P		ate /	_	/	
City, State	уре)		stima	tor			<u> </u>	Imperial, P		ate /	1/	/ / つ	<

State of New Jersey (Pursuant to NJAC 8:60 and 5:16)

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Date of Notification (1)	24 /	12			1 200	of Building	g Owner/Operator (oup		REC 2012 NOV 20		1 2	D	
Agencies Notified	Type Notifica		Į.			Address ampbell	Place ·	.9	STOS	COL	7:	i g	C.
☑ DOLWD ☑ DHSS ☐ DCA	Amended Amendm	ent #@		A1135 A11		State, Zip C nden, NJ			" LICEN	3111	TRI	91.	
(NJAC 5:23-8)	justificati	on)	•			of Contac			Telephone Numb	oer		何多	
10.00					FA	CILITY IN	IFORMATION				000,000		-000
Name of Facility When Former Sears Street Address 1300 Admiral Wil		「aking	¥ .	(3)				Other (i.e., p	2) 8 (Other than K-12) rivate and commer		uilding	gs,	
City (5) Camden	SON BIVO							homes, etc.) Square Feet 200000	# of Floors	1	dg. A	ge	
County (6) Camden					Cour	nty Code (7)(STATE USE ONLY)		ior if being demolis				
Name of Monitoring Fin	rm Hired by Build	ding O	wner (8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
Langen Engineer	s				0009	99	Alliance Envi	ironmental Sys	stems				
Street Address River Drive Cente	er 1. 4 th Floor						Street Address 550 East Unio	on Street					8:
City, State, Zip Code	.,				-		City, State, Zip Co						
Elmwood Park, N							West Chester		8				
Project Manager for Mo Vijay Patel	onitoring Firm				phone)1-794		Telephone No. 610-701-9000		License No. 00508				
Start Date (10)				33	tion Da	te (11)	Name of OSHA M	lonitor					
Occupancy Status Duri	ing Abatement (0	Check	only o	ne)			Street Address				72-13-25		
☐ Facility Closed/Vaca☐ Abatement PerformTime of Abatement	ed Outside of No	ormal F	Facility	Hour	s - Des	cribe	28 N. Pennel City, State, Zip Co Media, PA 19	ode					A 1.5
Scope of Work (Check	all that apply)					<u> </u>	-						
≥3 sf or ≥3 lf≥160 sf or ≥260 lf			☐ Rei ☑ Dei				Mini-Enc Glovebage Glovebag	g Procedure	pative Pressure n-Friable Procedur	e			
				Locat						Ab	atem	ent T	уре
Location Asbestos-Containin TO BE AI IN Fac (13	ng Material (ACM BATED cility)	Use Mai	intena	ely by		Description of stos Containing Ma ., thermal systems surfacing, VAT, other miscellane	iterial (ACM) insulation, , or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
1 st & 2 nd Floor	*		Tes		N/A	pipe ins	sulation		4000 LF				
Mech Rooom		\dashv				Vibratio			35 SF				
Windows, Doors, m	nirrors				\boxtimes	misc. g	lue, caulk		1,850 SF				
electric room, eleva	ator room					Brake p	ad, transite, ebo	ony board	122 SF				
Name of Registered W N.E.T.S.	aste Hauler			10.50	JDEP V lauler II 18947	O No.	Cubic Yards of Waste 25	Name of Regis					
City, State Hazelton, PA		700000			.3371	Se a C	Disposal Date TBD	City, State Imperial, P	A				
Completed By (Print or John Heemer	Type)	Title Es	timat	or			Signature	n C.44	enun Da	- 1	24	11.)

ASB-41 **MAY 11**

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

State of New Jersey FICATION OF ASBESTOS ABATEMEN

(Pursuant to NJAC 8:60 and 5:16) **層中CEIVE** Date of Notification (1) Name of Building Owner/Operator (2) 10 19 / 12 Campbell Soup 2112 HOV 20 AM 7: 18 Type Notification Street Address Agencies Notified ☐ Initial ☑ EPA 1 Campbell Place A SESTOS CONTROL ☑ DOLWD City, State, Zip Code Amendment #001 & LICENSING **⊠** DHSS Camden, NJ ☐ Emergency (including) □ DCA justification) Name of Contact Telephone Number (NJAC 5:23-8) ☐ Cancellation Chris Schoen **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Former Sears School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings. 1300 Admiral Wilson Blvd homes, etc.) Square Feet # of Floors City (5) Bldg. Age 200000 3 Camden 100 County Code (7)(STATE USE ONLY) | Current Use (Prior if being demolished) County (6) Camden Manufacturing Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) 00099 Alliance Environmental Systems Langen Engineers Street Address Street Address River Drive Center 1, 4th Floor 550 East Union Street City, State, Zip Code City, State, Zip Code Elmwood Park, NJ 07407 West Chester, PA 19382 Telephone No. License No. Project Manager for Monitoring Firm Telephone No. 201-794-6900 610-701-9000 00508 Viiav Patel Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor _10_ / _23_ / _12 11 / 9 / 12 AET Occupancy Status During Abatement (Check only one) Street Address □ Facility Closed/Vacated During Entire Period of Abatement 28 N. Pennel Road ☐ Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: 7:00AM-3:30PM/___PM-__AM Media, PA 19063 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure ≥3 sf or ≥3 lf ☐ Renovation ☐ Demolition Mini-Enclosure ≥160 sf or ≥260 lf Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Description of Location of Enclosure Removal Repair Encapsulate Used Solely by Asbestos Containing Material (ACM) Amount Asbestos-Containing Material (ACM) Maintenance/ (i.e., thermal systems insulation, (Specify TO BE ABATED **Custodial Staff?** surfacing, VAT, or SF or LF) IN Facility (12)other miscellaneous) (13)Yes No N/A 1st & 2nd Floor \boxtimes pipe insulation 4000 LF X Vibration cloth 35 SF M П П П \boxtimes Mech Rooom 1.850 SF X M misc. glue, caulk Windows, Doors, mirrors 122 SF X X Brake pad, transite, ebony board electric room, elevator room Cubic Yards of Name of Registered Landfill Name of Registered Waste Hauler NJDEP Waste Hauler ID No. Waste Allied BFI Imperial N.E.T.S. 18947 25 Disposal Date City, State City, State TBD Imperial, PA Hazelton, PA Signatur Completed By (Print or Type) Title Estimator

ASB-41 **MAY 11**

John Heemer

* Do not use this form for asbestos licens refexempted activities.

State of New Jersey NO . FICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)

Mech Rooom □ □ ☑ Vibration cloth 35 SF ☑ □	S. Len	5	P
DHSS			
DHSS	4 7.		_
DHSS	. /:	i	i
Chris Schoen	/Tm		
Chris Schoen	3 16	1	_
Chris Schoen		44	No.
Name of Facility Where Abatement is Taking Place (3) Former Sears Type of Facility (4) School (K-12) Street Address Street Address Square Feet Place (1), private and commercial building homes, etc.) County (6) County (6) County (6) Camden Ca	3	の物	37
School (K-12) Subchapter 8 (Other than K-12) Other (I.e., private and commercial buildin homes, etc.) Other (I.e., private and commercial buildin homes and private and control of National Assets (I.e., private and control of Private and Control of Streat Address Other (I.e., private and control of National Assets (I.e., private and control o			
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1300 Admiral Wilson Blvd	ings,		
County (6)	1760		
County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Manufacturing			
Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Langen Engineers Alliance Environmental Systems	0		_
Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Langen Engineers			
Street Address River Drive Center 1, 4 th Floor City, State, Zip Code Elmwood Park, NJ 07407 Project Manager for Monitoring Firm Ross Caldwell Start Date (10) 10 / 23 / 12			
Street Address Str			
Street Address State During Abatement (Check only one) Demolition Demolition Demolition Demolition Demolition Demolition Description of Abstessos-Containing Material (ACM) TO BE ABATIED IN Facility (13) To BE ABATIED IN Facility (13) To Be Abatien In Facility (14) In Facility (15) In Faci			
City, State, Zip Code Elmwood Park, NJ 07407 City, State, Zip Code Project Manager for Monitoring Firm Telephone No. 201-794-6900 610-701-9000 License No. Ross Caldwell Scheduled Completion Date (11) Name of OSHA Monitor AET Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor AET Occupancy Status During Abatement (Check only one) Street Address 28 N. Pennel Road Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: 7:00AM-3:30PMPMAM PMAM Street Address Scope of Work (Check all that apply) Renovation Demolition Full Containment with Negative Pressure Stage of Vork (Check all that apply) Renovation Demolition Street Address Asbestos-Containing Material (ACM) Normally Used Solely by Maintenance/ Custodial Staff? (12) Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Abate Assessor (I.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Abate Assessor (I.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Applied Type II Assessor (I.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Assessor (I.e., thermal systems insulation, surfacing, VAT, o			
Elmwood Park, NJ 07407 Project Manager for Monitoring Firm Ross Caldwell Start Date (10) Scheduled Completion Date (11) 10 / 23 / 12			
Project Manager for Monitoring Firm Ross Caldwell Start Date (10) 10			
Start Date (10)		2000	
Start Date (10) Start Date (10) 10			
10			
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe ☐ Time of Abatement: 7:00AM-3:30PWPMAMAMAM			
Second Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: 7:00AM-3:30PW/ PM- AM		-015161	102
Second Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: 7:00AM-3:30PW/ PM- AM			
Time of Abatement: 7:00AM-3:30PM PMAM Media, PA 19063 Scope of Work (Check all that apply) Sope of Work (Check all that apply) Full Containment with Negative Pressure Mini-Enclosure Mon-Exempted (*) and Non-Friable Procedure Location of Asbestos-Containing Material (ACM) Amount Minitenance / Custodial Staff? (12) Maintenance / Custodial Staff? (12) Yes No N/A 1st & 2nd Floor Mech Rooom Minitenance / Custodial Staff? (12) Minitenance / Custodial Staff? (13) Minitenance / Custodial Staff? (14) Minitenance / Custodial Staff? (14) Minitenance / Custodial Staff? (15) Minitenance / Custodial			
Scope of Work (Check all that apply) □ ≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf □ Demolition □ Description of Asbestos Containing Material (ACM)			
Sample			
□ ≥3 sf or ≥3 lf □ Renovation □ Mini-Enclosure □ ≥160 sf or ≥260 lf □ Demolition □ Glovebag Procedure □ School of Asbestos-Containing Material (ACM) Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12) Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Amount (Specify SF or LF) 1st & 2nd Floor □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □			
Demolition De			
Is Location Normally Used Solely by Maintenance / Custodial Staff? (12) Yes No N/A N/A N/A N/A N/A N/A N/A			
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) 1st & 2 nd Floor Mech Rooom Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Pipe insulation Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Pipe insulation 4000 LF Mech Rooom Vibration cloth 35 SF		. T.	F
Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) Yes No N/A Specify Service of the miscellaneous Custodial Staff? (12) Yes No N/A Specify Service of the miscellaneous Custodial Staff? Specify Service of the miscel			Ť
Custodial Staff? (12) SF or LF) Mech Rooom Custodial Staff? (12) Search	Rep I	inc	
(12) (13) (12) (12) (12) (13) (12) (12) (13) (12) (12) (13) (12) (12) (13) (12) (13) (12) (13) (13) (13) (13) (14)	air abs	ans	1
Yes No N/A 1st & 2 nd Floor □□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□	Repair	ulat	
1st & 2nd Floor □ □ □ pipe insulation 4000 LF □ □ Mech Rooom □ □ □ Vibration cloth 35 SF □ □	0	D	
Mech Rooom ☐ ☐ ☑ Vibration cloth 35 SF ☑ ☐			
Medi Recoil			-
Windows, Doors, mirrors	5	Ы	1
Williams, Boole, Illiams, Boole, 122 SE	TIT	7	1
electric fooiii, elevator fooiii			1
Hauler ID No. Waste Allied BFI Imperial			
City, State 25 Disposal Date City, State			
Hazelton, PA TBD Imperial, PA		,	-
Completed By (Print or Type) Title Signature Date	_/	1,-	_
John Heemer Estimator	//	/	
ASB-41 * 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)

Cha Cre		ı	NOTI		ATION	OF AS	lew Jersey BESTOS ABAT AC 8:60 and 5:16		2812 NOV	SOR	/1.		
Date of Notification (1)							g Owner/Operator (2)	28/2 NOV	10-		D	
11 /	14 /	12			Ard	lagh Gla	ss Inc.	-	50m.	<0 ,	AM >	Lauren	
Agencies Notified ☑ EPA	Type Notifica	ation				Address E. Jack	son St., Suite 28	00	& ELIC	S CO	NTO	िंह	t
☑ DOLWD	☐ Amended				City, S	State, Zip	Code			ENS/	16	17	
☑ DHSS ☑ DCA	Amendme	-	dudina		Tan	npa, FL	33602			2.53	4	FA	
(NJAC 5:23-8)	justification	on)	g			of Contac			Telephone N	lumber		Ver	0.
	☐ Cancellati	ion			Hele	en P. Re	velas				7		21
					FAC	CILITY IN	NFORMATION						
Name of Facility Where A Ardagh Glass (form					er Corp	o.)	_	Type of Facility (School (K-12) Subchapter 8)	(-12)			
Street Address 83 Griffith St.								Other (i.e., pr homes, etc.)			buildin	gs,	
City (5)		U.						Square Feet	# of Floors		Bldg. A	ge	
Salem												6 MO - 550	2
County (6)				9-1	Coun	ity Code (7)(STATE USE ONLY)	Current Use (Prid					
Salem		A8011 L. 000-04						Glass Conta	iner Manufa	cturing]		
Name of Monitoring Firm	Hired by Build	ding O	wner (8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
n/a							n/a Street Address	100					
Street Address													
City, State, Zip Code							City, State, Zip Co	ode					
Project Manager for Mon	itoring Firm			Tel	ephone l	No.	Telephone No.	9	License No				
Start Date (10)	S	Schedi	uled Co	ompl	etion Dat	te (11)	Name of OSHA M	Monitor				21	
11 /26 /					6_/_	12	n/a						
Occupancy Status During				D-Synmen			Street Address						
☐ Facility Closed/Vacate ☐ Abatement Performed Time of Abatement: _	Outside of No	ormal l	Facility	/ Hou	ırs - Des		City, State, Zip Co	ode					
Scope of Work (Check al	I that apply)	_					☐ Full Cont	tainment with Neg	ative Pressure				
≥3 sf or ≥3 lf≥160 sf or ≥260 lf			⊠ Rer □ Der				☐ Mini-End ☐ Gloveba						
				Loca	10 TO TO 10					1	batem	ent T	уре
Location Asbestos-Containing TO BE ABA IN Facili (13)	Material (ACM ATED	1)	Use Mai	inten	lely by ance/ Staff?		Description of estos Containing Ma e., thermal systems surfacing, VAT other miscellane	insulation, , or	Amount (Specify SF or LF)	Zeilova	Repair	Encapsulate	Enclosure
(10)			Yes	No	N/A	1						Ф	
n/a	. 11												
No asbestos containi	ing material												
disturbed or removed	d.												
									=		-		
Name of Registered Was	te Hauler				NJDEP V Hauler ID		Cubic Yards of Waste	Name of Regis	tered Landfill				
City, State							Disposal Date	City, State					
Completed By (Print or Ty	vne)	Title		1000			Signature	1		Date			
Helen P. Revelas			IS Su	pen	/isor		16 P	Ris	9	41/12	Ha		4

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

CK 23/5.12

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) Date of Notification (1) NOVARTIS PHARMACUETICALS CORPORATION 11 19 112 Street Address Agencies Notified Type Notification 1 HEALTH PLAZA **IEPA** Initial Notification City, State, Zip Code DEP Amended Notification #3 EAST HANOVER, NEW JERSEY 07936 DOL Cancellation DOH On Hold Name of Contact DCA **EMERGENCY NOTIFICATION** PETER GEANNAKOPOULOS FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) NOVARTIS -EAST HANOVER Subchapter 8 (Other than K-12) Other (ie. private & commcl. bldgs., homes, etc.) Street Address Square Feet # of Floors Bldg. Age 1 HEALTH PLAZA 50,000 4 48 City (5) County (6) Current Use (Prior if being demolished) County Code (7) EAST HAOVER (STATE USE ONLY) MORRIS VACANT Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) HILLMAN ENVIRONMENTAL PAR ENVIRONMENTAL CORPORATION 17 Street Address Street Address 1600 ROUTE 22 EAST 313 SPOOK ROCK ROAD City, State, Zip Code City, State, Zip Code UNION, NEW JERSEY 07083 SUFFERN, NEW YORK 10901 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number MICHAEL NEHLSEN 908-688-7800 845-369-7500 460 Expected State Date (10) Sched. Completion Date (11) Name of OSHA Monitor 11/ /12 2/ 30 /13 QUALITY ENVIRONMENTAL Day Month Year Month Day Year Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 1376 ROUTE 9 Abatement Performed Outside of Normal Facility Hours - Describe: Other - Describe: WEDNESDAY 2PM-11PM City, State, Zip Code FRI., SAT., SUN.-7AM-3:30PM/4PM-12AM WAPPINGERS FALLS, NEW YORK 10016 Scope of Work (Check all that apply) Full Containment with Negative Pressure Demolition Mini-Enclo Renovation >3SF OR LF Glovebag Procedure >160 SF OR 260 LF Non-Friable Procedure Location of Is Location Description of Asbestos-Abatement Type Containing Material (ACM) Asbestos-containing normally used Amount REPAIR ENCAPSUL ENCLOSUR REMOVAL Material (ACM) solely by (ie. Thermal systems (Specify TO BE ABATED Maint/Custodial insulation, surfacing, VAT, SF or LF) in Facility (13) Staff (12) or other miscellaneous) Yes No N/A 1ST FLOOR- MEZZANINE SPRAY ON FIREPROOFING 6,500 SF 1ST FLOOR- MEZZANINE FLOOR TILE X 8,500 SF MER ROOM - 2ND FLOOR FIREPPROOFING 660 SF X

699 WASHINGTON STREET
City, State
HACKETTWON, NEW JERSEY 07840
Completed by (Print or Type)
BENJAMIN SANCHEZ

GLOBAL WASTE INDUSTRIES INC.

Name of Registered Waste Hauler

Disposal Date 10/16/12 - 02/30/2013 |Signature

Cubic Yards of Waste

150

N.IDFP Waste

22147

DIRECTOR OF OPERATIONS

Hauler ID No.

Name of Registered Landfill MINERVA ENTERPRISES LLC 8955 MINERVA ROAD S.E. Zitul State

WAXNESBURG, OHIO 44688

Date

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) Date of Notification (1) NOVARTIS PHARMACUETICALS CORPORATION 11 /12 Street Address Agencies Notified Type Notification 1 HEALTH PLAZA City, State, Zip Code EPA Initial Notification DEP EAST HANOVER, NEW JERSEY 07936 Amended Notification DOL Cancellation DOH On Hold Name of Contact DCA **EMERGENCY NOTIFICATION** PETER GEANNAKOPOULOS FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) NOVARTIS -EAST HANOVER Subchapter 8 (Other than K-12) Other (ie. private & commol. bldgs., homes, etc.) Street Address # of Floors Square Feet Bldg. Age 1 HEALTH PLAZA 50,000 4 City (5) County Code (7) Current Use (Prior if being demolished) County (6) (STATE USE ONLY) EAST HAOVER VACANT MORRIS Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) HILLMAN ENVIRONMENTAL 17 PAR ENVIRONMENTAL CORPORATION Street Address Street Address 1600 ROUTE 22 EAST 313 SPOOK ROCK ROAD City, State, Zip Code City, State, Zip Code UNION, NEW JERSEY 07083 SUFFERN, NEW YORK 10901 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number MICHAEL NEHLSEN 908-688-7800 845-369-7500 460 Expected State Date (10) Sched, Completion Date (11) Name of OSHA Monitor 10 / 16 /12 /13 QUALITY ENVIRONMENTAL 1/ 31 Day Month Month Year Year Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 1376 ROUTE 9 Abatement Performed Outside of Normal Facility Hours - Describe: Other - Describe: MONDAY - FRIDAY 4 PM - 12:30 AM City, State, Zip Code SATURDAY 12 PM-8 PM WAPPINGERS FALLS, NEW YORK 10016 Scope of Work (Check all that apply) Full Containment with Negative Pressure Demolition Renovation Mini-Enclor, >3SF OR LF Glovebag Procedure >160 SF OR Non-Friable Procedure Location of Is Location Description of Asbestos Abatement Type Containing Material (ACM) Asbestos-containing normally used Amount REMOVAL ENCAPSU ENCLOSUR Material (ACM) solely by (ie. Thermal systems (Specify TO BE ABATED Maint/Custodial insulation, surfacing, VAT, SF or LF) in Facility (13) Staff (12) or other miscellaneous) Yes No N/A 1ST FLOOR- MEZZANINE SPRAY ON FIREPROOFING 6,500 SF 1ST FLOOR- MEZZANINE X FLOOR TILE 8,500 SF Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Waste Name of Registered Landfill GLOBAL WASTE INDUSTRIES INC. Hauler ID No. 100 MINERVA ENTERPRISES LLC 699 WASHINGTON STREET 22147 8956 MINERYA ROAD S.E. City, State Disposal Date HACKETTWON, NEW JERSEY 07840 NESBURG, OHIO 44688 10/16/12 - 01/31/2013 Completed by (Print or Type) Signature Date BENJAMIN SANCHEZ DIRECTOR OF OPERATIONS

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) Date of Notification (1) NOVARTIS PHARMACUETICALS CORPORATION 11 /12 Street Address 2012 NOV 20 AM 7:49 Agencies Notified Type Notification 1 HEALTH PLAZA City, State, Zip Code
EAST HANOVER, NEW JERSEY 07936

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NSING **EPA** Initial Notification DEP Amended Notification \$1 Cancellation DOL DOH On Hold DCA EMERGENCY NOTIFICATION NSING FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) NOVARTIS -EAST HANOVER Subchapter 8 (Other than K-12) Other (ie. private & commol. bldgs., homes, etc.) Street Address Square Feet # of Floors Bldg. Age 1 HEALTH PLAZA 50.000 4 48 City (5) County (6) County Code (7) Current Use (Prior if being demolished) (STATE USE ONLY) EAST HAOVER MORRIS VACANT Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) HILLMAN ENVIRONMENTAL 17 PAR ENVIRONMENTAL CORPORATION Street Address Street Address 1600 ROUTE 22 EAST 313 SPOOK ROCK ROAD City, State, Zip Code City, State, Zip Code UNION, NEW JERSEY 07083 SUFFERN, NEW YORK 10901 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number MICHAEL NEHLSEN 908-688-7800 845-369-7500 460 Expected State Date (10) Sched. Completion Date (11) Name of OSHA Monitor 10 / 16 /12 1/ 31 /13 QUALITY ENVIRONMENTAL Month Day Year Month Year Day Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 1376 ROUTE 9 Abatement Performed Outside of Normal Facility Hours - Describe: Other - Describe: MONDAY - FRIDAY 4 PM - 12:30 AM City, State, Zip Code SATURDAY 12 PM-8 PM WAPPINGERS FALLS, NEW YORK 10016 Scope of Work (Check all that apply) Full Containment with Negative Pressure Demolition Mini-Enclo Renovation >3SF OR LF Glovebag Procedure >160 SF OR 260 LF Non-Friable Procedure Location of Is Location Description of Asbestos-Abatement Type Asbestos-containing Containing Material (ACM) normally used Amount ENCL REPAIR ENCAPSU REMOVAL solely by Material (ACM) (ie. Thermal systems (Specify TO BE ABATED Maint/Custodia insulation, surfacing, VAT, SF or LF) SO in Facility (13) Staff (12) or other miscellaneous) 듔 Yes No N/A 1ST FLOOR- MEZZANINE SPRAY ON FIREPROOFING 6, 500 SF 1ST FLOOR- MEZZANINE FLOOR TILE 8,500 SF X Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Waste Name of Registered Landfill GLOBAL WASTE INDUSTRIES INC. Hauler ID No. 100 MINERVA ENTERPRISES LLC 699 WASHINGTON STREET 22147 8955 MINERVA ROAD S.E. City, State City, State Disposal Date HACKETTWON, NEW JERSEY 07840 10/16/12 - 01/31/2013 Completed by (Print or Type) Date

BENJAMIN SANCHEZ

DIRECTOR OF OPERATIONS

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) Date of Notification (1) NOVARTIS PHARMACUETICALS CORPORATION Street Address 10 /12 2812 NOV 20 AM 7: 49 Agencies Notified Type Notification 1 HEALTH PLAZA Initial Notification City, State, Zip Code EPA DEP Amended Notification EAST HANOVER, NEW JERSEY 07936 Telephone Number OS CUNTROL DOL Cancellation DOH On Hold Name of Contact ICENSING EMERGENCY NOTIFICATION PETER GEANNAKOPOULOS DCA FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) NOVARTIS -EAST HANOVER Subchapter 8 (Other than K-12) Other (ie. private & commcl. bldgs., homes, etc.) Street Address Square Feet # of Floors Bldg. Age 1 HEALTH PLAZA 50.000 County Code (7) City (5) County (6) Current Use (Prior if being demolished) EAST HAOVER MORRIS (STATE USE ONLY) VACANT Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) HILLMAN ENVIRONMENTAL 17 PAR ENVIRONMENTAL CORPORATION Street Address Street Address 1600 ROUTE 22 EAST 313 SPOOK ROCK ROAD City, State, Zip Code City, State, Zip Code UNION, NEW JERSEY 07083 SUFFERN, NEW YORK 10901 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number MICHAEL NEHLSEN 908-688-7800 845-369-7500 460 Expected State Date (10) Sched. Completion Date (11) Name of OSHA Monitor 10 / QUALITY ENVIRONMENTAL /13 Month Day Year Month Day Year Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 1376 ROUTE 9 Abatement Performed Outside of Normal Facility Hours - Describe: Other - Describe: MONDAY - FRIDAY 4 PM - 12:30 AM City, State, Zip Code WAPPINGERS FALLS, NEW YORK 10016 Scope of Work (Check all that apply) Full Containment with Negative Pressure Demolition Renovation Mini-Enclor >3SF OR LF Glovebag Procedure >160 SF OR 260 LF Non-Friable Procedure Location of Is Location Description of Asbestos-Abatement Type Asbestos-containing Containing Material (ACM) normally used Amount ENCAPSUL **ENCLOSUR** REMOVAL Material (ACM) solely by (ie. Thermal systems (Specify TO BE ABATED Maint/Custodial insulation, surfacing, VAT, SF or LF) in Facility (13) Staff (12) or other miscellaneous) Yes No N/A 1ST FLOOR- MEZZANINE SPRAY ON FIREPROOFING 6, 500 SF 1ST FLOOR- MEZZANINE FLOOR TILE 8,500 SF Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Waste Name of Registered Landfill GLOBAL WASTE INDUSTRIES INC. Hauler ID No. MINERVA ENTERPRISES LLC 699 WASHINGTON STREET 22147 8955 MINERVA ROAD S.E. City, State Disposal Date City, State HACKETTWON, NEW JERSEY 07840 OHIO 44688 10/16/12 - 01/31/2013 WAYNESE Completed by (Print or Type) BENJAMIN SANCHEZ Signature Date

DIRECTOR OF OPERATIONS

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) MERCK SHARP & DOHME CORPORATION Date of Notification (1) Street Address /12 126 E. LINCOLN AVENUE, P.O. BOX 2000, RY28-414 Type Notification Agencies Notified 2012 NOV 20 AM 7: 47 City, State, Zip Code Initial Notification **EPA** RAHWAY, NEW JERSEY 07065 Amended Notification #4 DEP Cancellation DOL Tølenhone Number Name of Contact On Hold DOH MARY BETH BAKER **EMERGENCY NOTIFICATION** DCA FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Subchapter 8 (Other than K-12) MERCK SHARP & DOHME CORPORATION Other (ie. private & commcl. bldgs., homes, etc.) Bldg. Age # of Floors Square Feet Street Address 1,500 126 EAST LINCOLN AVENUE Current Use (Prior if being demolished) 500,000 GALLON FUEL OIL TANK T 100 County Code (7) County (6) City (5) (STATE USE ONLY) UNION RAHWAY Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. PAR ENVIRONMENTAL CORPORATION ENVIRONMETAL HEALTH INVESTIGATIONS, INC. 17 Street Address Street Address 313 SPOOK ROCK ROAD 655 WEST SHORE TRAIL City, State, Zip Code City, State, Zip Code SUFFERN, NEW YORK 10901 SPARTA, NEW JERSEY 07871 Telephone Number License Number Project Manager for Monitoring Firm Telephone Number 845-369-7500 WILLIAM S. KERBEL, CIH 973-729-5649 Name of OSHA Monitor Sched. Completion Date (11) Expected State Date (10) AMERISCI LABORATORIES INC #11480 /12 11 / /12 11/ 19 Year Month Day Month Year Street Address Occupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement 117 EAST 30TH STREET Abatement Performed Outside of Normal Facility Hours - Describe: Other - Describe MON-SAT, 7AM-3:30PM City, State, Zip Code NEW YORK, NEW YORK 10016 Full Containment with Negative Pressure Scope of Work (Check all that apply) X Renovation Mini-Enclo: Demolition Glovebag Procedure >3SF OR LF 260 LF Non-Friable Procedure >160 SF OR Abatement Type Description of Asbestos-Location of Is Location ENCL REPAIR Amount ENCAPSUL Containing Material (ACM) normally used REMOVAL Asbestos-containing (ie. Thermal systems (Specify solely by Material (ACM) LOSUR SF or LF) insulation, surfacing, VAT, Maint/Custodial TO BE ABATED or other miscellaneous) Staff (12) in Facility (13) Yes No N/A 1,500 SF BUILT UP ROOFING ROOF - T100 TANK X

Cubic Yards of Waste

Signature

Disposal Date

11/9-11/26/12

N.IDEP Waste

Hauler ID No.

15939

DIRECTOR OF OPERATIONS

Name of Registered Waste Hauler

FREEHOLD CARTAGE, INC.

FREEHOLD, NEW JERSEY

BENJAMIN SANCHEZ

Completed by (Print or Type)

825 HIGHWAY 33

City, State

Name of Registered Landfill

Olty/State MONTGOMERY, PA 17752

447 AVEXANDER DRIVE/ROUTE 15

LYCOMING COUNTY RESOURCE MANAGEMENT SERVICES

Date

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X Facility Closed/Vacated Abatement Performed Other - Describe MON-Scope of Work (Check all that approximate Page 1975) Scope of Work (Check all that approximate Page 1975) Demolition	ent (Check onld During Entire Outside of No -SAT. 7AM-3:3 Oly) X Re -F	y one) Period o mal Facil OPM Is Location Is Location Is Location Is Location Solely b aint/Custs Staff (12 S No	on sed y odial 2) N/A	Full C Mini-E Glove X Non-F Description of Containing Ma (ie. Thermal insulation, su or other mis	City, State, Zip containment with Neg nclo , bag Procedure riable Procedure of Asbestos- sterial (ACM) al systems fracing, VAT, cellaneous)	Amount (Specify SF or LF)	REMOVAL	REPAIR	Abate	ENOLOSUR	
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X Facility Closed/Vacated Abatement Performed Other - Describe MON- Scope of Work (Check all that app Demolition >3SF OR LF X >160 SF OR 260 L Location of Asbestos-containing Material (ACM) TO BE ABATED in Facility (13) ROOF - T100 TANK Name of Registered Waste Hau FREEHOLD CARTAGE, INC.	ent (Check onld During Entire Outside of No SAT. 7AM-3:3 Oly) X Reserved Reserved	y one) Period o mal Facil OPM Is Location Is Location Is Location Is Location Staff (12 IS No I	on sed y odial 2) N/A E	Full C Mini-E Glove X Non-F Description of Containing Ma (ie. Thermal insulation, sure or other mis BUILT UP ROOFING Cubic Yards of Waste 100	City, State, Zip City, State, Zip containment with Neg nclo , bag Procedure riable Procedure of Asbestos- terial (ACM) al systems facing, VAT, cellaneous) Name of Reg LYCOMING (447 ALEXAN	Amount (Specify SF or LF) 1,500 SF 1,500 SF	REMOVAL	REPAIR	Abate	ENOLOSUR	
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2012 NOV 20 AM 7:47

A SOESTOS CONTROL State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) MERCK SHARP & DOHME CORPORATION Date of Notification (1) Street Address 126 E. LINCOLN AVENUE, P.O. BOX 2000, RY28-414 /12 10 Type Notification Agencies Notified City, State, Zip Code Initial Notification RAHWAY, NEW JERSEY 07065 EPA Amended Notification DEP Cancellation Telephone Number DOL On Hold #2 EMERGENCY NOTIFICATION Name of Contact DOH MARY BETH BAKER DCA FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Subchapter 8 (Other than K-12) Other (ie. private & commol. bldgs., homes, etc.) MERCK SHARP & DOHME CORPORATION # of Floors Bldg. Age Square Feet N/A Street Address 126 EAST LINCOLN AVENUE Current Use (Prior if being demolished) County Code (7) 500,000 GALLON FUEL OIL TANK T 100 County (6) (STATE USE ONLY) City (5) UNION Name of Abatement Contractor (9) RAHWAY Name of Monitoring Firm Hired by Building Owner (8) ASCM No. PAR ENVIRONMENTAL CORPORATION 17 ENVIRONMETAL HEALTH INVESTIGATIONS, INC. Street Address 313 SPOOK ROCK ROAD Street Address 655 WEST SHORE TRAIL City, State, Zip Code SUFFERN, NEW YORK 10901 City, State, Zip Code SPARTA, NEW JERSEY 07871 License Number Telephone Number Telephone Number Project Manager for Monitoring Firm 845-369-7500 973-729-5649 WILLIAM S. KERBEL, CIH Name of OSHA Monitor Sched. Completion Date (11) #11480 AMERISCI LABORATORIES INC Expected State Date (10) /12 11/ 15 /12 10 / Year Day Month Day Year Street Address Month

Mini-Enclo:

Description of Asbestos-

Containing Material (ACM)

(ie. Thermal systems

insulation, surfacing, VAT,

or other miscellaneous)

BUILT UP ROOFING

Cubic Yards of Waste

Signature

Disposal Date 10/26-11/15/12

Glovebag Procedure

Non-Friable Procedure

117 EAST 30TH STREET

NEW YORK, NEW YORK 10016

REPAIR RVOMB

Amount

(Specify

SF or LF)

Name of Registered Landfill

City, State/ MONTGOMERY, PA 17752

447 ALEXANDER DRIVE/ROUTE 15

1,500 SF

LYCOMING COUNTY RESOURCE MANAGEMENT SERVICES

Date

Abatement Type

ENCLOSUR ENCAPSUL

City, State, Zip Code

Full Containment with Negative Pressure

Occupancy Status During Abatement (Check only one)

Scope of Work (Check all that apply)

>160 SF OR

Location of

Asbestos-containing

Material (ACM)

TO BE ABATED

in Facility (13)

Name of Registered Waste Hauler

FREEHOLD CARTAGE, INC.

FREEHOLD, NEW JERSEY

Completed by (Print or Type)

BENJAMIN SANCHEZ

825 HIGHWAY 33

City, State

Demolition >3SF OR LF

ROOF - T100 TANK

Other - Describe MON-SAT, 7AM-3:30PM

260 LF

Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe:

X Renovation

Is Location

normally used

solely by

Vlaint/Custodial

Staff (12)

NJDEP Waste Hauler ID No.

15939

DIRECTOR OF OPERATIONS

Title

Yes No

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) MERCK SHARP & DOHME CORPORATION Date of Notification (1) Street Address /12 10 126 E. LINCOLN AVENUE, P.O. BOX 2000, RY28-414 Type Notification Agencies Notified City, State, Zip Code Initial Notification FPA RAHWAY, NEW JERSEY 07065 Amended Notification #1 DEP Cancellation DOL Name of Contact DOH On Hold EMERGENCY NOTIFICATION MARY BETH BAKER DCA **FACILITY INFORMATION** Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Subchapter 8 (Other than K-12) MERCK SHARP & DOHME CORPORATION Other (ie. private & commol. bldgs., homes, etc.)
uare Feet # of Floors Bldg. A Bldg. Age Square Feet Street Address 59 1,500 N/A 126 EAST LINCOLN AVENUE Current Use (Prior if being demolished) County Code (7) County (6) City (5) 500,000 GALLON FUEL OIL TANK T 100 (STATE USE ONLY) RAHWAY UNION ASCM No Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) PAR ENVIRONMENTAL CORPORATION ENVIRONMETAL HEALTH INVESTIGATIONS, INC. 17 Street Address Street Address 313 SPOOK ROCK ROAD 655 WEST SHORE TRAIL City, State, Zip Code City, State, Zip Code SUFFERN, NEW YORK 10901 SPARTA, NEW JERSEY 07871 License Number Telephone Number Project Manager for Monitoring Firm Telephone Number 845-369-7500 973-729-5649 WILLIAM S. KERBEL, CIH Name of OSHA Monitor Sched. Completion Date (11) Expected State Date (10) AMERISCI LABORATORIES INC #11480 /12 /12 11/ 15 10 / Day Year Day Year Month Month Occupancy Status During Abatement (Check only one) Street Address 117 EAST 30TH STREET Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe: Other - Describe MON-SAT. 7AM-3:30PM City, State, Zip Code NEW YORK, NEW YORK 10016 Full Containment with Negative Pressure Scope of Work (Check all that apply) Mini-Enclor X Renovation Demolition Glovebag Procedure >3SF OR LF Non-Friable Procedure 260 LF >160 SF OR Abatement Type Is Location Description of Asbestos Location of Containing Material (ACM) ENCLOSUR Amount REPAIR Ashestos-containing normally used REMOVA NCAPSUL (Specify (ie. Thermal systems solely by Material (ACM) SF or LF) insulation, surfacing, VAT, TO BE ABATED Maint/Custodial or other miscellaneous) Staff (12) in Facility (13) Yes No NA 1,500 SF BUILT UP ROOFING ROOF - T100 TANK Name of Registered Landfill Cubic Yards of Waste Name of Registered Waste Hauler NJDEP Waste LYCOMING COUNTY RESOURCE MANAGEMENT SERVICES Hauler ID No. FREEHOLD CARTAGE, INC.

15939

DIRECTOR OF OPERATIONS

Title

Disposal Date

10/26-11/15/12

Signature

825 HIGHWAY 33

FREEHOLD, NEW JERSEY

Completed by (Print or Type) BENJAMIN SANCHEZ

City, State

447 ALEXANDER DRIVE/ROUTE 15

Date

10-17-17

Gity State MONTGOMERY, PA 17752

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) MERCK SHARP & DOHME CORPORATION Date of Notification (1) 2812 HOV 20 AM 7: 67 Street Address /12 10 16 126 E. LINCOLN AVENUE, P.O. BOX 2000, RY28-414 Agencies Notified Type Notification City, State, Zip Code A SESTOS CONTROL Initial Notification **EPA** RAHWAY, NEW JERSEY 07065 Amended Notification DEP & LICENSING DOL Cancellation Name of Contact DOH On Hold **EMERGENCY NOTIFICATION** MARY BETH BAKER DCA FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Subchapter 8 (Other than K-12) MERCK SHARP & DOHME CORPORATION Other (ie. private & commcl. bldgs., home etc.) # of Floors Bldg. Age Square Feet Street Address 126 EAST LINCOLN AVENUE N/A 1.500 County Code (7) Current Use (Prior if being demolished) City (5) County (6) 500,000 GALLON FUEL OIL TANK T 100 UNION (STATE USE ONLY) RAHWAY ASCM No. Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ENVIRONMETAL HEALTH INVESTIGATIONS, INC. PAR ENVIRONMENTAL CORPORATION Street Address Street Address 313 SPOOK ROCK ROAD 655 WEST SHORE TRAIL City, State, Zip Code City, State, Zip Code SUFFERN, NEW YORK 10901 SPARTA, NEW JERSEY 07871 Telephone Number Telephone Number License Number Project Manager for Monitoring Firm 973-729-5649 845-369-7500 460 WILLIAM S. KERBEL, CIH Name of OSHA Monitor Sched. Completion Date (11) Expected State Date (10) AMERISCI LABORATORIES INC #11480 10 / /12 11/ 15 /12 Month Month Day Year Year Street Address Occupancy Status During Abatement (Check only one) 117 EAST 30TH STREET Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe: MONDAY - FRIDAY 7AM-3:30 PM City, State, Zip Code Other - Describe: NEW YORK, NEW YORK 10016 Full Containment with Negative Pressure Scope of Work (Check all that apply) X Renovation Mini-Enclo: Demolition SSF OR LF Glovebag Procedure 260 LF >160 SF OR Non-Friable Procedure Location of Description of Asbestos-Abatement Type Is Location Containing Material (ACM) Amount Asbestos-containing normally used REPAIR ENCAPSUL **ENCLOSUR** REMOVAL (ie. Thermal systems solely by (Specify Material (ACM) Maint/Custodial insulation, surfacing, VAT, SF or LF) TO BE ABATED Staff (12) or other miscellaneous) in Facility (13) Yes No N/A 1,500 SF ROOF - T100 TANK X ASBESTOS CONTAINING EXTERIOR PAINT ON TANK Name of Registered Landfill Cubic Yards of Waste N.IDEP Waste Name of Registered Waste Hauler LYCOMING COUNTY RESOURCE MANAGEMENT SERVICES FREEHOLD CARTAGE, INC. Hauler ID No. 100 447 ALEXANDER DRIVE/ROUTE 15 825 HIGHWAY 33 15939 Disposal Date City, State City, State MONTGOMERY, PA 17752 FREEHOLD, NEW JERSEY 10/26-11/15/12 Date Completed by (Print or Type) Signato

DIRECTOR OF OPERATIONS

BENJAMIN SANCHEZ