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Agencies Notified	Type Notification			Street A	ddress									-	
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Name of Monitoring Firm N/A	Hired by Building	Owner (8)		ASCN	1 No.				tement Con		100				
Street Address							(E)(1)(E)(1)	Addres	s KLIN STR	REET					
City, State, Zip Code							10.777		p Code N,NJ,07	524					
Project Manager for Moni	toring Firm			Telephor	ne No.		* 1	none N -333-5			License 01274	No.			
Start Date (10) 11-21-2016		Schedule 11-22-		npletion I	Date (11)				IA Monitor	Γ LLC					
Occupancy Status During	Abatement (Chec	k Only Or	ne)					Addres							
Facility Closed/Vaca Abatement Performe Other – Describe: C	ed Outside of Norn	Period of Anal Facility	Abatem Hours	ent			City, S	State, Z	CLIN STR p Code DN,NJ.07					-	
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City, State BRONX,NY						TBD	sal Date		City, Stat 900 MI		A RD V		ESB	URG	OF
Completed by VICTOR ESPIRITU		Title PRO	JECT	MANE	EGER	S	ignatur		111) /		ate 11-11-	2016	6	

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

CHECK # 23517

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Date of Notification (1) 11-16-16					Building C		perator	(2))_E	G	E		\mathbb{V}	
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☐ DCA	Cancellation		′	Amy Ta		DMATI	ON					1157	1.14	<u>:1M</u>	3	
Name of Facility Where	Abatement is Takin	g Place (3)		FACIL	LITY INFO	RMAII	UN	Туре	of Facility (4)						
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Street Address	lics, inc						Street	Addres	SS	11101	оо.р.			- 7.70		
64 Broad Street City, State, Zip Code									Street p Code						_	
Matawan, NJ 0774	7						Carls	stadt,	NJ 07072							
Project Manager for Mor Tom Geiger	nitoring Firm			elephor (732) 2	ne No. 290-2217	7		none No 939-6			Licens 00756					
Start Date (10) 11-04-16(1)11-18-1	16	Scheduled						of OSH n-Air Ir	HA Monitor							
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Other – Describe:		iai r acility i	10013			_			d City, N	Y 111	01					
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TO BE AB In Faci		Custo	dial S (12)	taff?	(i.e.	surfa	cing, VA	AT, or	ation,		or LF)		Removal	Repair	Encapsulate	Enclosure
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Building 1: Gr	ound Floor	100	110	X			VAT	PRINCE		3,0	000SF		х			
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ATC, Inc. / JBT (500	ATC, Inc. / JBT (50071)						ste		Minerva	Ente	erprise	S				
City, State Shirley, NY / Bronx,	NY				Dispos TBD	sal Date	2	City, State Waynes		, OH 4	4688))				
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Richard Doran		Projec	JL IVIA	nager			M	//	OF	00						

Date of Notification (1) 11/15/16				of Building O		perator	(2)		The second secon		, (- 1	3		售
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County (6) Bergen				Code (7) USE ONLY)	-	_		ent Use (Pri			olish	ed)			
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Street Address						Street 1141		70.70 N							
City, State, Zip Code						22000		ip Code J 07470							
Project Manager for Monitoring Firm		Telepho	ne No.		Teleph 973-6				Licens 0040).				
		npletion	Date (11)				HA Monitor ion Cons	ultants	s, Inc.						
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Land of	1977015	_ocati			_			<i>a</i>					Abate	ement pe	
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J.R. Contracting & Environmental Co	JDEP W auler ID 7819	No.	Cubic ` of Was 10			Name of I	AM 15-15 51								
City, State Wayne, New Jersey	ity, State							City, State Pen Arg		nnsylv	/ani	а а			
Completed by Jerry Bijelonic	Title Projec	t Ma	nager		S	gnature	/	1	/		Date 11/	e 15/1	6		

Date of Notification (1) 11/15/16				of Building			(2)				G		000	信
Agencies Notified Type Notification EPA Initial			Street A	Address rospect	Aven	ue, Suite	e 100)	A CONTRACTOR OF THE PARTY OF TH		NOV	2 1	2016	6
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□ DOH □ DCA □ DCA □ Emergency (i justification) □ Cancellation	ncluding			f Contact ex Kalos					Teleó	hone N	lumber	MOII CO	NTR VG	OL 8
Name of Facility Where Abatement is Taking	DI (0		FAC	ILITY INFO	RMA	TION	_	.=						
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Street Address							×	Subchapter Other (i.e. p etc.)				ldings	, hom	es,
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Street Address						Street 1141		ss te 23						
City, State, Zip Code								Zip Code J 07470					100	
Project Manager for Monitoring Firm		Telepho	ne No.		Teleph 973-6			5.0	icense 0408	No.				
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Facility Closed/Vacated During Entire Per Abatement Performed Outside of Normal	eriod of A	baten	nent					garaw Ro	ad, Bld	g. #35	iΕ			
Other – Describe:			7-11-17		-	Fair I	Lawn	, NJ 0741	0					
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Boiler Room	Yes	No	N/A X		Pine	e Insula	tion		350	l F	X			
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Name of Registered Waste Hauler	N	JDEP W	aste	Cubic	Yards		Name of F	Registered	d Landf	<u> </u>				
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City, State Wayne, New Jersey					Dispo	sal Date		City, State Pen Arg		nsylva	ania			
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Name of Monitoring Firm	Hired by Building	Owner (8)	ASCI	M No.				batement Cor vironmenta	ntractor (9) I Services,	LLC				
Street Address							Street PO E		ress 483, 4 E G	ate Drive					
City, State, Zip Code								Zip Code od, NJ 074	18						
Project Manager for Mon	itoring Firm		Telepho	one No.		Teleph 973-		No. -2276	Licer 703	nse No	•				
Start Date (10) 11/24/16		Schedul 12/20/		mpletion	Date (11)		Name	of O	SHA Monitor	*					
Occupancy Status During Facility Closed/Vaca				ment		2.5	Street	Addr	ress						
Abatement Perform X Other – Describe: b	ed Outside of Norm	al Facilit	y Hour	S		_	City, S	tate,	Zip Code	1					
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baseme	ent	Yes	No	N/A X		pip	e insulat	tion		100 LF		x			
Name of Registered Was	te Hauler		POL032	IJDEP W	(2000 CONT. W. C.)		c Yards		Name of F	Registered La	ndfill				
Freehold Cartage			lauler ID 5939	No.	of W)		Westerr	n Berks Lar		- 0.0				
City, State Freehold, NJ						Disp	osal Date)		City, State Birdsbo						
Completed by A. Scott Higgins		Title Presi	dent				Signature	1	1-		Date 11/		6		

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT Check#2647 (Pursuant to NJAC 8:60 and 5:16) Name of Building Owner/Operator (2) Date of Notification (1) 16 / 16 11 Ada Rodrigez Type Notification Street Address Agencies Notified ASBESTOS CONTROL & ☐ EPA M Initial LICENSING Amended **⊠** DOLWD City, State, Zip Code Amendment # X DHSS Hillside, NJ 07205 ☐ Emergency (including DCA Telephone Number Name of Contact justification) (NJAC 5:23-8) Cancellation Ada Rodrigez FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Private house Subchapter 8 (Other than K-1 2) Street Address Other (i.e., private and commercial buildings, homes, etc.) # of Floors Bldg. Age Square Feet City (5) Hillside, NJ 07205 County Code (7) (STATE USE ONLY) | Current Use (Prior if being demolished) County (6) Union Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Gr Tech LLC Street Address Street Address 576 Valley Rd #283 City, State, Zip Code City, State, Zip Code Wayne, NJ 07470 License No. Telephone No. Project Manager for Monitoring Firm Telephone No. 01127 973-638-1777 Scheduled Completion Date (11) Name of OSHA Monitor Start Date (10) 11 / 25 / 16 11 / 26 / 16 Envirovision Consultants, Inc Street Address Occupancy Status During Abatement (Check only one) 20-21 Wagaraw Road, Bldg .# 35E Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: AM- PM/ PM_ AM Fair Lawn, NJ 07410 Clean up and decontamination with negative pressure Scope of Work (Check all that apply) Full Containment with Negative Pressure Mini-Enclosure >3 sf or >3 lf > 160 sf or >260 lf ■ Renovation Glovebag Procedure Tent with Negative Pressure Non-Exempted (*) and Non-Friable Procedure Demolition Abatement Type Is Location Normally Description of Repair Location of Encapsulate Remova Used Solely by Asbestos-Containing Material (ACM) Amount Asbestos Containing Material (ACM) Maintenance/ (i.e., thermal systems insulation, (Specify TO BE ABATED Custodial Staff? SIF or LF) IN Facility surfacing, VAT, or (12)other miscellaneous) (13)No N/A Yes X X 10 SF Duct insulation-encapsulation Basement П NJDEP Waste Hauler ID No. | Cubic Yards of Waste | Name of Registered Landfill Name of Registered Waste Hauler T.R.R.F. Inc 0033785 TBD Gr Tech LLC City, State Disposal Date City, State Tullytown, PA TBD Wayne, NJ 07470 Date Title Completed By (Print or Type) Signature eutic Wenad 11/16/16 Owner N.Jevtic

CK # 159	2			CATIO	tate of New Jerse N OF ASBESTOS t to NJAC 8:60 an	ABATE		R	EG			7 -	int F
Date of Notification (1)				Name o	of Building Owner/0	Operator	r (2)	The state of the s	- NOV	21	20	10	7452 7452
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PENNSAUL	7								2		16	YA	es.
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ENVIRONMENTAL TACT	ICS	QUE SYSTEM			Ĵ								
Street Address 64 BROAD STREET	ENTAL TACTICS 0045 UNIQUE S STREET 396 WHIT												
City, State, Zip Code MATAWAN, NJ 07747							State, Zip Code ITH RIVER, N	J 0888	2				
Project Manager for Monitoring F TOM GEIGER	irm			Telepho 732-2	one No. 90-2217		nonė No. 432-8350		License No 01111).			
Start Date (10)		Schedu	_ /	pletion	Date (11)		of OSHA Monito		AMERICA				
Occupancy Status During Abater	ment (Check	Only O	ne)	, , ,			Address		31	-			
Facility Closed/Vacated Dur	ing Entire Po	eriod of	Abatem	ent			WHITEHEAD	AVE.					
Abatement Performed Outsi	essary	Pacilit	y Hours	ers o	aly_		tate, Zip Code ITH RIVER, N	J 0 <mark>8</mark> 88	2				
Scope of Work (Check All That A ≥3 sf or ≥3 If ≥160 sf or ≥260 If	pply) '		Renovat Demoliti		/		Full Containn Mini-Enclosur Glovebag Pro Non-Exempte	re ocedure			1000 pt	8	
			s Location								Abate		
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., , , , , ,	,,				IKANS, TE	1/001	R PANGIS	6	30 SF	X			
		-											

NJDEP Waste

Hauler ID No.

1125

OFFICE MGR

Cubic Yards

App & 2.0 Disposal Date

TBD

Signature

of Waste

Completed by

City, State

ELIZABETH, NJ

CAROL RAIMO

Name of Registered Waste Hauler

WASTE MANAGEMENT

Date

Name of Registered Landfill

GROWS NORTH

MORRISVILLE, PA

City, State

State of New Jersey

		NC	TIFIC (Pur	ATION C	OF ASBES NJAC 8:6	TOS ABATE 0 and 12:12	EMENT 20)		TR				
Date of Notification (1) 11/14/16			N F	ame of E	Building Ow Wheeler	ner/Operato Real Esta	r (2) te De	velopment (Corp.	MOV	2	1 2	016
Agencies Notified	Type Notification		11.0	treet Add					ASI	BEST)S (CON	TROL
× EPA	× Initial				tage Rd.							SINC	
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SAUDINE STATE OF THE STATE OF T	Emergency (i			lame of 0					Telephone N	1			
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				FACIL	ITY INFOR	MATION		.= 10: //					
Name of Facility Where	Abatement is Taking	Place (3)					Тур	e of Facility (4					
Warehouse							- H	School (K-12 Subchapter 8	(Other than K	(-12)			
Street Address							×	Other (i.e. pr	ivate & comme	rcial bu	lding	s, hom	nes,
2 Mark Rd.							Sar	etc.) Jare Feet	# of Floors		Bldg	Age	
City (5) Kenilworth								,000	1		50+		
County (6)				County C	ode (7)		Cur	rent Use (Prio	r if being demo	lished)			
Union			(STATE U	SE ONLY)			arehouse					
Name of Monitoring Firm	Hired by Building (Owner (8)		ASCM	No.	The State of the S		batement Cont					
N/A				10.00			200000	ervices Inc.					
Street Address							et Add	ole Ave.					
								Zip Code			-		
City, State, Zip Code								on, NJ 0705	57				
Project Manager for Mor	nitorina Firm			Telephon	e No.	Tele	phone	No.	Licens				
Project Manager for Mon	morning i min					86	2-221	-9092	0110	7			
Start Date (10)		Schedule	d Com	pletion D	Date (11)	1.55		SHA Monitor					
11/28/16		12/28/1	954)					Nalodka					
Occupancy Status Durin	ng Abatement (Chec	k Only On	e)			1 50	et Add	ress ple Ave.					
Facility Closed/Vac	ated During Entire F	Period of A	batem	ent			335	, Zip Code					
Other – Describe:	ned Outside of Norm	iai raciiity	Hours	# 		0.7305		ton, NJ 070	57				
Scope of Work (Check /	All That Apply)							•					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		- Comment	enova emoliti					Full Containme Mini-Enclosure Glovebag Prod Non-Exempted	edure			dure	
		la	Locati	on	(= - \(\) = = (ateme	ent
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Asbestos-Containing	g Material (ACM)		d Sole intenar		Asbesto	os Containin hermal syste	g Mate	erial (ACM)	Amount (Specify	9		F Enc	7 9
TO BE AB		Cust	odial S (12)	Staff?	(1.6.)	surfacing,	VAT, c	or	SF or LF)	Normova	-	Repair	Enclosure
(13) -		(12)			other misce	llaneou	(SL		2	2	ir	ure
		Yes	No	N/A									
roc	of			*		roof f	ield		17,000sf	*			
windo	windows					window	caulk	(2,200lf.				
Name of Registered Wa	aste Hauler		N	JDEP W	/aste	Cubic Yard	ls	Name of	Registered La	ndfill		-	
Newark Carting Inc	1000	lauler ID 5409	No.	of Waste		GROW							
City, State						Disposal D 12/28/16		City, Stat	te ∕ille, PA				
Newark, NJ		Title				Signa				Date	-	-	
Completed by Leslaw Nalodka		883336	ident			J.g. Id	/	Nak	/	11/1	4/16	3	

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Date of Notification (1)					120000000000000000000000000000000000000			vner/Operato	or (2	2)		W.	21	20	10	140
	15 /	16	_		Fir	st Baptis	t Ch	urch			July 4					Ì
Agencies Notified EPA	Type Notific	cation			1000 A 10 SAN	t Address High St	reet				ASBE	STOS LICE	3 C	ONT	TRO	L &
⊠ DOLWD	Amende					State, Zip (E.I.J.				
☑ DOH ☐ DCA	Amendn				Cra	anford, N	J 07	016								
(NJAC 5:23-8)	justificat	tion)	oluding	9	Name	of Contac	t				Telephone N	lumber	7			
	☐ Cancella	ation			Do	ctor Dod	ger									
					FA	CILITY IN	IFO	RMATION								
Name of Facility Where A	Abatement is	Takin	Place	(3)						Type of Facility (4	4)					
First Baptist Churc	h									School (K-12)		(40)				
Street Address 100 High Street										☐ Subchapter 8 ☑ Other (i.e., pri homes, etc.)			l bu	ilding	s,	
City (5)					- 110					Square Feet	# of Floors	-	Blo	dg. Ag	ge	_
Cranford										5,000	3		7	70		
County (6)				-	Cour	nty Code (7)(STA	ATE USE ONL	Y)	Current Use (Pric	or if being den	nolishe	d)			
Union										Church						
Name of Monitoring Firm		-			ASCM	No.	Na	me of Abate	me	ent Contractor (9)						
Mgmt. & Environme	ental Consu	ılting	Servi	ces			5	Shade Env	riro	nmental, LLC						
Street Address							100000	eet Address								1
PO Box 341								23 Cutler								
City, State, Zip Code							1000	y, State, Zip								
Chesterfield, NJ 08				T = .			1			NJ 08052	1					
Project Manager for Moni	toring Firm			1 10000	phone		1 2	ephone No.		(1)	License No	ŧ.				
Bill Weisgarber Start Date (10)		Cahad	ulad C	1 1000		-4070		356-755-00	ASSESSED.		00842					-
11 / 25 /					ilon Da	te (11) 16		me of OSHA EMSL Anal		Ver Ver ette						
Occupancy Status During	Abatement (No.				eet Address					-			
☐ Facility Closed/Vacate				(%)	nent		200	00 Route		North						
☐ Abatement Performed	Outside of N	ormal	Facility	y Hour	s - Des		200	y, State, Zip					1000			
Time of Abatement:	AM	PN	Λ/	_PM-		AM	1 - 6			, NJ 08077						
Scope of Work (Check all	that apply)										. 5			7.7		
≥3 sf or ≥3 lf			⊠ Re	novati	on			☐ Mini-E		ainment with Nega osure	tive Pressure	ğ				
≥160 sf or ≥260 lf			☐ De	molitio	n			☐ Glovel	bag	Procedure	Criable Deser					
			le	Locat	on			□ Non-E	xen	npted (*) and Non-	-Friable Proce		Λ l= a		ent Ty	
Location	of		١	Vormal	ly			Description	n of			-	-	-	1	
Asbestos-Containing N		1)		d Sole intena				Containing N	Vlat	erial (ACM)	Amount		Removal	Repair	Encapsulate	Enclosure
TO BE ABA' IN Facilit				odial S		(I.e		rmal system surfacing, VA			(Specify SF or LF)		ova	¥	nsdı	osur
(13)				(12)		1		her miscella					-		late	6
			Yes	No	N/A											
Ceiling				\boxtimes		Spray-C	n Ir	sulation	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		6 SF		\boxtimes			
j.									[
]							
								- A					5			
Name of Registered Wast	e Hauler			2823	JDEP V			ic Yards of		Name of Registe	ered Landfill					
Freehold Cartage				H	auler IE 15939	5 / 1.	Was	ste		Cumberland	County La	ndfill				
City, State								osal Date		City, State			-			
Freehold, NJ						1	1/28/2016		Newburg, PA	A						
Completed By (Print or Ty	pe)	Title						Signature				Date	-			
Christina Lynch		Vi	ce Pre	eside	nt of C	Operation	ıs	(mos	10	2		11/3	51	10		
22.00								V 10 1	0				-/	. 7		

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	-	#OV	2	a de la companya de l	2016		
Ā	SB	ESTO			NTR	OL 8	ž

Date of Notification (1)	*			Name of	Building ()wner/	Operator	(2)			11:	100	19/	21	201	6
11/16/16					atterson					2	1200					
Agencies Notified	Type Notification			Street Ad	ddress					1	421	RES	TOS	500	NTF	201
▼ EPA	× Initial										701			MSI		.02
DEP	Amended				te, Zip Co							THE PERSON NAMED IN				
X DOL	Amendment Emergency		117		ottom N	J 080	800			,						
X DOH	justification)				Contact					Tel	ephone i	Numb	er			
DCA	Cancellation			Mike	ITV INCO	DMAT	TION						- 4			
Name of Facility Where	Abatement is Takin	g Place (3)		FACIL	LITY INFO	RIVIA	ION	Туре	of Facility (4	1)						
Sue Patterson Priva								П	School (K-1)	2)						
Street Address				- XIII					Subchapter	8 (Oth						
									Other (i.e. poetc.)	rivate 8	& comme	ercial	DUIIO	ings,	nome	s,
City (5)									re Feet	100000	f Floors		14.555	dg. A	ge	
Ship Bottom NJ 080	008							1000		1				5+		
County (6)				County C	Code (7) ISE ONLY)			Curre	nt Use (Pric	r if bei	ng demo	olishe	d)			
Ocean	. I lise d by Duilding	0				1821111	Nome		tement Con	trootor	(0)					
Name of Monitoring Firm N/A	Hirea by Building	Owner (8)		ASCM	INO.		1	aco Ir		liacioi	(9)					
Street Address							4 3 3 3 3 3 3	Addres		-		50-084				-
5.0 50t / taul 555								30x 32								
City, State, Zip Code							City, S	state, Zi	p Code							
							Wes	t Berli	n NJ 080	91						
Project Manager for Mor	itoring Firm			Telephor	ne No.		1 20	none No			Licens					
								753-9			00727					
Start Date (10) 11/29/16		Schedule 12/5/16		pletion [Date (11)		Name Sam		A Monitor							
	a Abstament (Char						3.50.560100	Addres				2				
Occupancy Status Durin							Street	Addres	55							
Facility Closed/Vac Abatement Perform							City S	state. Zi	p Code							-
Other - Describe:				% 		_	0.1,7, 0	,	F							
Scope of Work (Check A	II That Apply)															
≥3 sf or ≥3 lf		☐ R	enova	tion				Full	I Containme	ent with	n Negativ	ve Pre	essur	е		
× ≥160 sf or ≥260 lf		× D	emolit	ion			-		ni-Enclosure vebag Prod							
							×		n-Exempted		d Non-F	riable	Pro	cedure	9	
		ls	Locati	on										Abate Ty	ment	
Location	n of		ormal d Sole				escription					ŀ		Гy	pe	
Asbestos-Containing			ntenai				ntaining N al system			76.50	mount Specify		ZJ		En	ш
TO BE AB. In Facil		Cust	odial 9 (12)	Staff?	(1.6.	surf	acing, VA	T, or	1011,		or LF)	1	Remova	Repair	aps	Enclosure
(13)			(12)	1		other	miscellar	neous)					val	air	Encapsulate	sure
		Yes	No	N/A											Ф	
bottom of	house			Х		Tra	nsite Bo	oard		6	00 SF		x			
												1	1200			
Name of Registered Was	ste Hauler		IN	JDEP W	/aste	Cubi	c Yards		Name of I	Registe	ered Lan	dfill				
United Roll Off	oto i idaici		Н	auler ID		of W			G.R.O.\							
			2	2459		2 Dian	anal D. I									
City, State Elm NJ				12/5	osal Date /16		City, State Morrisv		A 1906	7						
Completed by		Title				5,000,000	Signature	e _			1	Date	2			
Anthony T Perna		Presi	dent				1	0				11/		6		
								_								



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MOV 2 1 2016 1			MINW	2	6	2016	

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Date of Notification (1) 11/16/16					f Building					A THE PERSON NAMED IN COLUMN 1	L					
Agencies Notified	Type Notification			Street A	ddress					The same of the sa	ASE	BEST	OS OF	CC	NTF NG	HOL
EPA DEP DOL	Initial Amended Amendment				ate, Zip Co nawkin N		50			es-						
Ĭ DOH	Emergency justification)			Name o	f Contact					Teler	phone !	Numbe	r _			
☐ DCA	Cancellation			Secretary Co.	LITY INFO	ORMAT	ION		-	-			217 1429			
Name of Facility Where Charles Tortorella		g Place (3	3)					-	of Facility (4							
Street Address								×	Subchapter Other (i.e. pretc.)	8 (Other			uildi	ings,	home	es,
City (5) Manahawkin NJ 08	050							Squa 1000	re Feet 0 +	# of F	loors		BI6 35	dg. A	ge	
County (6) Ocean					Code (7) USE ONLY)			Curre	ent Use (Prio ne	or if being	g demo	lished)				
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCN	Л No.			of Aba	itement Con	tractor (9	9)					
Street Address								Addres								
City, State, Zip Code									ip Code in NJ 0809	91						
Project Manager for Mon	itoring Firm			Telepho	ne No.		100000000000000000000000000000000000000	none N 753-9			License					
Start Date (10) 11/29/16		Schedule 12/5/16		pletion	Date (11)		Name Sam		HA Monitor							
Occupancy Status During	g Abatement (Chec	k Only Or	ne)				Street	Addres	ss							
Facility Closed/Vaca Abatement Perform Other – Describe:	ed Outside of Norn						City, S	tate, Z	ip Code							
Scope of Work (Check A	II That Apply)															
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		-	Renova Demoliti				×	Mir Glo	Il Containme ni-Enclosure ovebag Proc n-Exempted	edure					9	
		Is	Locati	on						1)				bate	ment	
Location Asbestos-Containing			Vormall d Solel		Ashasi		scription taining M		(ACM)	۸۳۰	ount			Ту		
TO BE ABA In Facili (13)	ATED	- 277.77	intenar todial S (12) No			thermal surfa	systems cing, VA miscellar	s insula T, or		(Sp	ecify or LF)	Vellional	Domesia	Repair	Encapsulate	Enclosure
Exterior S	iding			х		Exte	rior Sid	ding		190	0 SF	x	1			
								10,27					1			
													+			
Name of Registered Was	te Hauler		200	JDEP Wauler ID	3570D	Cubic of Wa	Yards ste		Name of F		ed Land	Ifill				
United Roll Off			5550	2459	00/07/5/2/2	4	0.00000		G.R.O.V							
City, State Elm NJ						Dispo: 12/5/	sal Date 16		City, State Morrisvil		19067	7				
Completed by Anthony T Perna		Title Presi	dent			5	ignature	0				Date 11/16	5/16	6		
								_			11					



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

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		MAH	6	4	BALE	
(2)		NOV	6		CAIA	1 - march

Date of Notification (1) 11/15/16					Name of Build Paulsboro Re		Operator (2)	-	VV (4 1 64	10	-
Agencies Notified		Notification	Туре		Street Addres		Jany	i				-
() EDA		/V) 1=:4:=1 N1	-41641		800 Billingspo	ort Rd	4 1000	ASBE		CONT		.
() EPA () DEP		(X) Initial No.		on	City, State, Zir	n Code	1		TICE	MSING		
(X) DOL		() Cancelle		***	Paulsboro, NJ							
(X) DOH								Tol M	00.04			
() DCA					Name of Cont Ravi Jarecha	act		I TALK	141 331			
				FACILITY IN	FORMATION							
Name of Facility Where Ab		aking Place (3)		Type of Facilit							
Paulsboro Refining Compa	ny				() School (K- () Subchapte		han K-12)					
Street Address							commercial bld	lgs., hor	nes, etc) .		
800 Billingsport Rd					Sa Feet N/A		# of Floor	e N/	Δ			
City (5)	County (6)		County C	Code (7)	oq. r ccc <u>tviza</u>		# 011 1001	3	1	-		
Paulsboro	Gloucester		(State Us		Bldg. Age_N			0:1.0				
Name of Monitoring Firm H	irod by Dida	Owner (9)	ASCM N		Current Use (p	orior it bein	g demolished)_ Name of Co					-
	iled by blug	. Owner (o)	ASCIVIN	<u>0.</u>			Mansfield In					
Street Address					Street Address 800 Billingspo							
					City State, Zip Paulsboro, NJ							
Project Manager for Monito	ring Firm	Telephone I	Number		Telephone Nu			Licens	e Numb	per		
					856-224-4392			00857				
Scheduled Start Date (10)		Scheduled (Completion	Date (11)	Name of OSH							
11/29/16 Occupancy Status During A	hatament (12/15/16	2)		Mansfiedl Indu							
() Facility Closed/Vacated () Abatement Performed (During Entir	e Period of A	batement		800 Billingspo							
					City, State, Zip							
(X) Other – Describe – Rer area	noval of ACI	/ within restric	cted work a	irea in outside	Paulsboro NJ	08066						
Source of Work (Check all	hat apply)											
(X) Demolition (X) Reno	vation											
() Large Proj. (160 SF or > () Full Containment with No	260 LF ACN) (X) SM Proj	. >25<160		LF ACM) () M Glovebag Proc		<25 SF or <10	LF ACI	M)			
Location of Asbestos-		ation Normally		Description of			Specify SF or	LF)	Abate	ment Typ	<u></u>	
Containing Material (ACM)		by Maint./Cus	stodial	thermal system					(State of the sta			
Facility (13)	Staff? _YES	(12) NO	NA	surfacing, VAT misc.)	, or other				Rem.	Rep.	Encap I	Enclose
	- 177											
Pipe in Rack Between Fire House and CT #4		X		TSI		Approx 2	00 LF		Х			
	_											
Name of Reg. Waste Haule	<u>r</u>	NJDEP Was	te Hauler I	D#	Cubic Yards of	f Waste		ACCRECATE VALUE OF THE PARTY OF		Landfill		
Waste Management, Inc.		17273			2 CY			Glouce	ester Co	ounty Lan	dfill	
City, State							Disp. Date			City, Stat		
South Harrison, NJ							Various			South Ha	rrison, N	1 J
Completed by (Print or Type	<u>e)</u>	<u>Title</u>			Signature			<u>Date</u>				
ANDREW GREEN		MANAGER	– KA Indus	trial Services	11	. 11		11/151	6			
					Mal	MA	eor					
					Site Ø	perations S	Supervisor					
					/							

Mail to: NJDEP-DSHW-BRRTP 401 E. State St., PO 414

Trenton, NJ 08625-0414

Telephone 609-984-6620

C:\WORD\MYDOCS\ASBESTOS 9/18/00



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

					Name of Duildi	0	Operator (2)	111	NOV	212	010	1 1 2 1
Date of Notification (1) 11/7/16					Name of Buildi Paulsboro Refi	ining Owner/C	any	Lo.		- 1		1 research
Agencies Notified		Notification	Type		Street Address		Tr.	Ĺ				-
(V) EDA		(X) Initial No	atification		800 Billingspor	rt Rd		ASB		S CON		હે
(X) EPA () DEP		() Amended		on	City, State, Zip	Code				F-1/1 2 11114	3	
(X) DOL		() Cancelle	ed		Paulsboro, NJ							
(X) DOH					N1			Tel. No	ımhar			
() DCA					Name of Conta Ravi Jarecha	act	ı	. IELLIN	imoer	_		
				FACILITY IN	FORMATION					30		
Name of Facility Where Ab	atement is T	aking Place (3)		Type of Facility	According to the second						
Paulsboro Refining Compa	any				() School (K-1 () Subchapter		an K 12)					
Street Address			STORE OF STREET		(X) Other (i.e.	private & c	ommercial bld	gs., hon	nes, etc) .		
800 Billingsport Rd												
					Sq. Feet N/A		# of Floor:	sN/A	4	-		
City (5) Paulsboro	County (6) Gloucester		County C (State Us		Bldg. Age N/	'A						
Paulsboro	Gloucester		Totale 03	ic Omy)	Current Use (p		demolished)_	Oil Re	finery			
Name of Monitoring Firm H	lired by Bldg.	Owner (8)	ASCM No	0.			Name of Cor					
ATC Associates, Inc.					Street Address		Mansfield In	dustrial,	Inc.			
Street Address 3 Terri Lane, Suite 4					26 Colonial Av							
Burlington, NJ 08016					City State, Zipo							
					Woodbury NJ			Licono	e Numl	201		
Project Manager for Monitor John Lutz	oring Firm	Telephone 609-386-88			Telephone Nur 856-224-4392			00857		<u> </u>		
JOHN LUIZ		000 000 00										
Scheduled Start Date (10)		Scheduled (Completion	Date (11)	Name of OSH							
11/21/16 Occupancy Status During	Abatament (12/23/16	۵)		Mansfield Indu Street Address							
() Facility Closed/Vacated () Abatement Performed	During Entir	e Period of A	batement		26 Colonial Av							
					City, State, Zip							
(X) Other – Describe – Rel area	moval of ACN	M within restri	cted work a	rea in outside	Woodbury NJ	08096						
Source of Work (Check all	that apply)											
Course of Work Torreas an	triat appriy											
(X) Demolition (X) Rend	ovation	V (V) CM Dec	>0E <100	CE >10 -260	I E A CMA () N	linor Droi (<25 SF or <10	IFACI	(//)			
() Large Proj. (160 SF or 2 (X) Full Containment with	Negative Pre	ssure - FGDU	. >25<160 ·	-Enclosure (X) Glovebag Pr	ocedure -	TBA	LI MOI	*.,			
Location of Asbestos-	Is Loca	ation Normally	/ Used	Description of	ACM (i.e.	Amount (Specify SF or	LF)	Abate	ement Typ	<u>se</u>	
Containing Material (ACM)		by Maint./Cus	stodial	thermal system surfacing, VAT	ns insulation,							
Facility (13)	Staff? _YES	(12) NO	NA	misc.)	, or other				Rem.	Rep.	Encap F	Enclose
				701		Approx 1,	750 SE		X	1		
TSI ON C-201 Tower at NI	HT	X		TSI		Approx 1,	,750 5F		^			
Pipe up side of C201Towe	r-	X		TSI		Approx 20	00 LF		Х			
NHT TSI ON D-1 at NHT		X		TSI		Approx 4	50 SF		X	1		
131 ON D-1 at NH1				101		7.100.01						
Name of Reg. Waste Haul	er	NJDEP Was	ste Hauler I	D#	Cubic Yards of	f Waste		Name	of Reg	Landfill	-len	
Waste Management, Inc.		17273			4 CY			Glouce	ester Co	ounty Lar	atili	
City, State							Disp. Date			City, Stat		
South Harrison, NJ							Various			South Ha	rrison, N	11
Completed by (Print or Type	ne)	Title			Signature			Date				
Completed by (Chill of Ty)	, <u>,</u>				1 1	,		il vocasionaria	•			
ANDREW GREEN		MANAGER	– KA Indus	strial Services	(Inl	4 M.	00.	11/7/1	6			
Q.					- Mill	perations S	Supervisor					
						Peranone	4					
					/							

Mail to: NJDEP-DSHW-BRRTP 401 E. State St., PO 414

BRRTP Telephone 609-984-6620

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E	C	E		\mathbb{V}	E	M	
	NOV	2	Personal	201	1	199	7

Date of Notification (1)			Name	of Bu	ildina	Owner / Operato	r (2)	1	ASBESTOS	CONT	ROL	&	+
	11/8/2016			200		nolitic		. (2)		LICE	NSING			_
	Type Notifica	ation			t Addr			***************************************						
					30x 42									
DEP DEP						& Zip C								
⊠ DOL	Amer						a, NJ 07717				T-11			
□ DOH □ DCA		gency ellation			of Co					_	Teleph	one N	IIImn	ar .
Прох		Challon											-	
					CILIT	Y INF	ORMATION							
Name of Facility Whe Residence	ere Abateme	ent is Taking Pl	ace (3)			Type of Facil School (
Street Address			1.00			70	☐ Subchap							
										nmercial building			etc.)	
							Square Feet	#	of Floo	ors	Bldg. A			
City (5)		County (6)	Co	ounty (Code	(7)	1200			1		80		
Spring Lake		Monmouth					Current Use	(Prior if b	being de	emolished)				
					1.00		Residence			(0)				
Name of Monitoring F	-irm Hired b	y Building Own	er (8)	ASC	M No.								
Street Address							Alpha Envi		itai 5e	rvices				
Street Address							PO Box 829							
City, State & Zip Cod	le						City, State &		e		- 1			
,							Trenton, N.							
Project Manager for N	Monitoring F	irm	Tele	phone	Numl	per	Telephone N 609-847-29			License	Number 012			
Scheduled Start Date	(10)	Scheduled Con	npleti	on Da	te (11)	Name of OSI		or				-	
11/17/2016		11/20/2016	.p.oc	011 00	(0	EMSL Anal							
Occupancy Status Du	uring Abater	nent (Check or	nly on	e)			Street Addres	-						
		During Entire P					107 Haddoi							
	erformed Ou	utside of Norma	al Ho	urs –	7am to	o 3pm								
Describe:		A1					Westmont,	NJ 081	08					
Scope of Work (Chec									-110000					
				_						tainment with I	Negativ	e Pres	sure	
≥3 sf or ≥3 lf	16				novatio				lini-End					
≥160 sf ≥260	IT		\boxtimes	Der	nolitio	n				ag Procedures				
									lon-Exe	mpted and No				
	cation of s-Containing	_		Locat mally			Description Asbestos-Con			Amount (Specify	Ab	atem	ent I	ype
	rial (ACM)	9		colely			Material (A			SF or LF)			ш	_
TO BE	E ABATED			itenar	-		(i.e., thermal s	ystems			Remova	Re	Encapsulate	Enclsoure
	Facility		Cust		Staff?	i	insulation, surfac				Nov	Repair	psul	sou
	(13)		Yes	(12) No	N/A		or other miscell	aneous)			20	1	ate	re
Exterior				×	П		Siding	ı		800sf		\vdash	П	П
				-						00051				_
Name of Registered \	Waste Haule	er			DEP \	Vaste	Cubic Yards of Waste	Name o	of Regi	stered Landfill		1		
ALPHA ENVIRON	WENTAL			100000	0333		3	Grows	s Land	Ifill				
City, State							Disposal Date	City, St	tate					
Trenton, NJ							Various	Morris	sville,	PA				
Completed By (Print of	or Type)			Tit			Signature		A CORPORT DESCRIPTION OF THE PERSON OF THE P	mana de Silva de Legación de Calabrillo	Date			
Rod Richardson					oject anage		Rod Rich	ardso	m		11/	8/20	16	
				11914	andut	71	~				1			1

CHOSELL 100. 9662 Print Form

			(1	ursuant	to NJAC	8:60 an	d 12:120	J)			11-15	3 C) L	= U	U	15
Date of Notification (1) 11/16/2016	- :				of Building				, LLC	And the particular of the state		NC	V	2 1	201	6
Agencies Notified EPA DEP	Type Notification Initial Amended				Address rystal Av ate, Zip Co					lad	AS	BES		500		
X DOL	Amended Amendment		_		ind, NJ (710			NSI		IOL (
DOH DCA	Emergency justification) Cancellation	**************************************	Ì		f Contact t LaMas	stro				Tel	ephone	Num	ber			
	_				ILITY INF		ION									-
Name of Facility Where A Corning Pharmaceur				Transite	e Pipe (0	Outside	e)	Тур	e of Facility (195 196						
Street Address 563 Crystal Avenue							*	×	School (K-1 Subchapter Other (i.e. p etc.)	8 (Oth				dings	home	es,
City (5) Vineland		01						Squ N/A	are Feet	17371357	f Floors itside		38	ldg. A	\ge	
County (6) Cumberland					Code (7) USE ONLY)			rent Use (Prio		ng dem	olishe	d)			
Name of Monitoring Firm I EHS Environmental,		Owner (8)		ASC	ЛNo.				atement Con Environmer			s, Ind	 C.			
Street Address 411 Southgate Court	t						Street 42 R		ess Road							
City, State, Zip Code Mickelton, NJ 08056									Zip Code ville, PA 19	460						
Project Manager for Monit Jack Carney	oring Firm			Telepho 856 22	ne No. 24-0080		Teleph 610 9		No. 4332		Licens 0083	se No.	55 56			
Start Date (10) 11/28/2016		Scheduled 11/29/20		npletion	Date (11)		310000000000000000000000000000000000000	Service Control	SHA Monitor Environmer	ital S	ervice	s, Ind).			
Occupancy Status During	Abatement (Chec	k Only One)				Street									
Facility Closed/Vacat Abatement Performe Other – Describe: W	d Outside of Norm	al Facility H	Hours	nent		2-22	City, S	tate,	Road Zip Code rille, PA 19	460		4				
Scope of Work (Check All	That Apply)							1008300	***************************************							
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Asbestos-Containing N TO BE ABAT In Facility (13)	ΓED	Main Custo	tenai	nce/		thermal surfa	systems systems cing, VA niscellan	insu T, or		(S	mount specify or LF)		Removal	Repair	Encapsulate	Enclosure
Trench Outside	Bldg 106	163	140	X		Trai	nsite Pi	ipe		11	5 LF		K		N-817	
Name of Registered Waste	Hauler		10000	JDEP W		Cubic	Yards		Name of F	Registe	red Lar	ndfill				-
Neuber Environmenta	Services, Inc		2000	auler ID 035969		of Was ~ 3 C	ste u. Yds.		Cumber	land (Count	y Imp	rov	. Au	th.	
City, State Phoenixville, PA						Dispos 11/20	al Date		City, State Millville,							
Completed by Patrick Larney		Title Project	t Ma	nager		tS	ignature.	-	Du	~~	1	Date		016		
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Date of Notification (1)		/	N			g Owner/Operator		The land			7.7.70	1
\(\left(\frac{11}{2} \right) \) \(\left(\frac{1}{2} \right) \	16			So	uth Jerse	ey Gas / Job #1	610-5079 Chec	k #8679	TOO	>C\A 1	TOO	_
Agencies Notified Type Notific	ation		S	Street	Address			ASBES	LICEN			_ Čt
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☑ DOLWD / ☑ Amended	1		C	City, S	State, Zip (Code						
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DCA Emergen (NJAC 5:23-8) justificati	cy (includi on)	ng	N	_	of Contac	t		Telephone No	umber			-
☐ Cancellat				Pat	rick Carr	1000 1						
				FA	CILITY IN	IFORMATION		1				
Name of Facility Where Abatement is 7	Taking Pla	ce (3)	- 17				Type of Facility	(4)				
South Jersey Gas							☐ School (K-12					
Street Address								8 (Other than K-				
111 N Franklin Blvd.							homes, etc.	orivate and comr	nerciai	oullair	igs,	
City (5)							Square Feet	# of Floors	1	Bldg.	Age	
Pleasantville, NJ 08232											150	
County (6)				Cour	ty Code (7)(STATE USE ONLY)	Current Use (Pr	rior if being dem	olished)			
Atlantic			1			12 23	Former MG	P Site				
Name of Monitoring Firm Hired by Build	ding Owne	r (8)	AS	SCM	No.	Name of Abatem	ent Contractor (9))				
Health & Safety Services						AbateTech, I	nc.					
Street Address						Street Address						
PO Box 365						30 Maple Ave	e. PO Box 25					
City, State, Zip Code		2011				City, State, Zip C	ode					
Berlin, NJ 08009						Lumberton,	NJ 08048					
Project Manager for Monitoring Firm		Te	leph	one	No.	Telephone No.		License No.				
Jim Proctor			609-	839	-2432	609-265-2107	7	00529				
Start Date (10)	Scheduled	Comp	letio	n Da	te (11)	Name of OSHA N	Monitor					
11 /2 /16	(11	/ _:	30	1	16_	EMSL Analyt	ical					
Occupancy Status During Abatement (0	Check only	one)				Street Address						
☐ Facility Closed/Vacated During Entir						200 Route 13	0 North					
Abatement Performed Outside of No						City, State, Zip C	ode					
Time of Abatement:AM	PM/	P	VI		AM	Cinnaminsor	n, NJ 08077					
Scope of Work (Check all that apply)												
≥3 sf or ≥3 If	Пв	enova	ation			☐ Full Con	tainment with Neg	gative Pressure				
≥160 sf or ≥260 lf		emoli				☐ Gloveba	g Procedure					
						Non-Exe	mpted (*) and No	n-Friable Proce	dure			
7 8		s Loc Norm		1		_			A	baten	nent T	уре
Location of Asbestos-Containing Material (ACM	Us	ed So		by	Ashe	Description of stos Containing Ma		Amount	Re	Re	四四	E
TO BE ABATED	N	ainter				., thermal systems		(Specify	Removal	Repair	cap	Enclosure
IN Facility (13)	Cu	stodia (12		Π?		surfacing, VAT		SF or LF)	\a		Encapsulate	ure
(13)	Yes			N/A		other miscellane	ous)				ite	
Exterior			-		Transite	e Siding		1,260 SF				
Exterior			-		19000	v Glazing		39 LF			H	
Exterior					Door Se					+	H	
LATERIOI		20.00	. 20		D001 36	alanı		4 LF			片	
Name of Desistered Wests Heat												
Name of Registered Waste Hauler AbateTech, Inc.					Vaste No.	Cubic Yards of Waste	Name of Regis					
City, State			18	3750		Disposal Data		w.rwmii				
Lumberton, NJ					(Disposal Date	City, State Atlantic Ci	tv N.I				
Programme was responsible to the contract of t	Tial -				(Atlantic Ci	-				
Completed By (Print or Type) Gwendolyn Trumbetti	Title	lies	C-	o melit	not	Signature	MAT		Date	10	11:	
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Date of Notification (1)					Name	of Buildin	a Ou	ner/Operator (2)	HILL MOV	1	70	0	1 /4
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Agencies Notified	Type Notific	ation			A WALLEST CO.	Address		-0.00000000		LK	DENS	SINC		
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□ DCA	☐ Emergen		5.00	9		som, NJ								
(NJAC 5:23-8)	justificati					of Contac	67.			Telephone Numl	per			
	☐ Cancella	tion			Pat	rick Carr	•							
					FA	CILITY IN	IFO	RMATION						
Name of Facility Where A	batement is 7	Γaking	Place	(3)					Type of Facility ((4)				
Former SJ Gas- Blo	ock 387 Lot	1							School (K-12					
Street Address									Subchapter 8	(Other than K-12) (ivate and commer) rial hi	ilding	2	
304 Turnpike Road									homes, etc.)		ciai be	andn ig	3,	
City (5)									Square Feet	# of Floors	BI	dg. A	ge	
Atlantic City, NJ														
County (6)					Cour	nty Code (7)(STA	ATE USE ONLY)	Current Use (Pri	or if being demolis	hed)			
Atlantic									Former SJ C	Gas Site				
Name of Monitoring Firm	Hired by Build	ding O	wner ((8)	ASCM	No.	Na	me of Abateme	ent Contractor (9)					
Health & Safety Ser	vices			110,500			1	AbateTech, I	nc.					
Street Address							Str	eet Address	33,000					
PO Box 365							3	30 Maple Ave	e. PO Box 25					
City, State, Zip Code								y, State, Zip Co						
Berlin, NJ 08009								umberton, N						
Project Manager for Moni	torina Firm			Tele	phone	No.		ephone No.		License No.				
Jim Proctor	3				9-839			09-265-2107		00529				
Start Date (10)	15	Schedu	uled C	omple	tion Da	te (11)	Na	me of OSHA M	lonitor					-
10 / 10 /	20000000					16	Amingda.	MSL Analyt						
Occupancy Status During							_	eet Address	TO TO TO THE PARTY OF THE PARTY					
☐ Facility Closed/Vacate					ment		I COMPANIE O	00 Route 13	0 North					
☐ Abatement Performed						cribe		y, State, Zip Co						
Time of Abatement:							1000000	innaminson						
Scope of Work (Check all	that apply)					- V		ZIIII GIIII IOOII	, 110 00077					_
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≥3 sf or ≥3 lf≥160 sf or ≥260 lf			Re					☐ Mini-Enc						
△ ≥100 SI OI ≥200 II			⊠ De	HIOHUG	211					n-Friable Procedui	e			
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Location				Norma				Description o	f			-		
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TO BE ABA				todial		(I.e		ermal systems i surfacing, VAT,		(Specify SF or LF)	Removal	=	Encapsulate	Enclosure
(13)	*			(12)	_			her miscellane			-		late	G.
			Yes	No	N/A									
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AbateTech, Inc.				H	18750		Wa 4	ste 0	A.C.U.A. La	andfill				
City, State					10130			posal Date	City, State					
Lumberton, NJ								2/30/16	Atlantic Cit	ty, NJ				
Completed By (Print or Ty	pe)	Title						Signature		Da	te			
Gwendolyn Trumbe	16 N	100	perati	ons (Coordi	inator		Signature	mot		IN I	71	lii	1
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Date of Notification (1)					Nam	e of Buildir	ng O	wner/Operator	(2))	ILL NOV	2	1 21	716	7,4		
	28 /	16			So	uth Jers	ey C	Gas / Job #1	60	9-5068 Chec	k #8613				1		
Agencies Notified	Type Notifi	cation			Stree	et Address					ASBEST	080	ON	TRO	18		
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(NJAC 5:23-8)	justifica	tion)	Ciudin	g	Name	e of Conta	ct				Telephone Number						
(A)	☐ Cancella	ation			Pa	trick Car	r										
					FA	CILITY II	NFO	RMATION			1						
Name of Facility Where	Abatement is	Taking	Place	e (3)					-	Type of Facility	(4)						
Former SJ Gas- BI	ock 387 Lo	t 5 & 6	3	2.03					1.0	School (K-12							
Street Address											8 (Other than K-12		22722				
300/302 Turnpike F	Road								L	∠ Otner (i.e., p homes, etc.)	rivate and comme	rcial b	uildin	gs,			
City (5)									15	Square Feet	# of Floors	В	ldg. A	ae			
Atlantic City, NJ														.3-			
County (6)					Cou	nty Code (7)(ST	ATE USE ONLY)	(Current Use (Pr	ior if being demoli	shed)					
Atlantic									Former SJ (
Name of Monitoring Firm	Hired by Bui	lding C	wner	(8)	ASCM	No.	Na	ame of Abatem	nen	t Contractor (9)					_		
Health & Safety Se					AbateTech, Inc.												
Street Address							St	reet Address	- 20								
PO Box 365								30 Maple Av	e.	PO Box 25							
City, State, Zip Code							Ci	ty, State, Zip C									
Berlin, NJ 08009							1	Lumberton, I	NJ	08048							
Project Manager for Mon	itoring Firm			Tele	phone	No.	Те	lephone No.			License No.				- 10000		
Jim Proctor						-2432	(609-265-2107	7		00529						
Start Date (10)						ite (11)	Na	me of OSHA N	Mor	nitor							
10 /10 /	16	_ 1:	2_/	_ 30	_ / .	16	I	EMSL Analyt	tic	al							
Occupancy Status During							Str	reet Address									
Facility Closed/Vacate							1	200 Route 13	30	North							
Abatement Performed Time of Abatement: _	Outside of N	ormal l	Facility 1/	y Hour	s - Des	cribe	Cit	y, State, Zip Co	ode	е							
						, Nivi	(Cinnaminsor	n, l	NJ 08077							
Scope of Work (Check all	that apply)							M Eull Con	to:	nanant with Nan							
≥3 sf or ≥3 lf			☐ Re	novati	on			☐ Mini-Enc	clos	nment with Neg sure	ative Pressure						
≥160 sf or ≥260 lf			⊠ De	molitic	n				g F	Procedure							
			I.	1					emp	oted (*) and No	n-Friable Procedu	re					
Location	of			Locat Iorma				Description of	- 6			Ab	atem	ent T	уре		
Asbestos-Containing I	Material (ACM	1)	Use	d Sole	ly by	Asbe	stos	Containing Ma		rial (ACM)	Amount	Rer	Repair	Enc	Enc		
TO BE ABA IN Facilit				intena odial S	(A.S. 136)	(i.e		ermal systems			(Specify	Removal	oair	aps	Enclosure		
(13)	.y		867797350	(12)				surfacing, VAT, ther miscellane			SF or LF)	<u>m</u>		Encapsulate	Jre		
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Name of Registered Wast	e Hauler			177.053	DEP V		138N S22	oic Yards of		Name of Regist	ered Landfill		-				
Abdic room, mo.					auler ID 18750		Wa 4	ste 0	A.C.U.A. Landfill								
City, State					.0700			posal Date	-	City, State		1000					
Lumberton, NJ							1	2/30/16		Atlantic Cit	y, <mark>N</mark> J						
Completed By (Print or Ty	pe)	Title						Signature			Da	te .					
Gwendolyn Trumbet	tti	Ор	erati	ons C	oordi	nator		m	ΛT		IA	11	Mi	1			
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b #160	09-5 <mark>0</mark> 68 Check#	8614	ı		
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Facility					
	8 (Other than K-12) private and commer		uildin	gs,	
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Use (P	rior if being demolis	hed)			
	Gas Site				
actor (9)				
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and No	on-Friable Procedure	1			
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M)	Amount (Specify SF or LF)	Removal	Repair	ncapsulate	Enclosure
				late	(D)
d	See attached				
	stered Landfill				
ate	anunn				
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Date of Notification (1)		Name of Building Owner/Operator (2) Robert R. Jr. & Colleen Boselli / Job #1609-5068 Check #8614										
		16		R	obert R. J	r. & Colleen Bos	elli / Job #160	9-5068 Check			ITO	01
	Notificati	on			et Address				ICEN			JL:
☐ EPA ☐ Init	iai iended			1		lelbourne Ave.						
	endmen	t #1			State, Zip (
	ergency	(includir	ıg		entnor, NJ							
A.X	tification	F. 1		100000000000000000000000000000000000000	e of Contac	273		Telephone Num	ber			
L Cal	ncellatio	n		Pa	trick Carr	r		1	-			
				FA	CILITY IN	NFORMATION						
Name of Facility Where Abateme		-	e (3)				Type of Facility	(4)				
Former SJ Gas- Block 387	Lot 9	& 10					School (K-12					
Street Address								8 (Other than K-12 rivate and comme		uildin	as	
2420/2424 Sunset Avenue							homes, etc.)				5-,	
City (5)							Square Feet	# of Floors	В	ldg. A	ge	
Atlantic City, NJ												
County (6)				Cou	inty Code (7	7)(STATE USE ONLY)	Current Use (Pri	ior if being demolis	shed)			
Atlantic							Former SJ (Gas Site				
Name of Monitoring Firm Hired by	y Buildin	g Owner	(8)	ASCN	1 No.	Name of Abateme	ent Contractor (9)					
Health & Safety Services						AbateTech, I	nc.					
Street Address						Street Address						
PO Box 365						30 Maple Ave	e. PO Box 25					
City, State, Zip Code					City, State, Zip Co	ode			3000			
Berlin, NJ 08009						Lumberton, N	J 08048					
Project Manager for Monitoring Fi	rm		Tele	ephone	No.	Telephone No.		License No.				
Jim Proctor			6	09-83	9-2432	609-265-2107		00529				
Start Date (10)	Sch	neduled (Comple	etion D	ate (11)	Name of OSHA M	lonitor					
10 /10 /16		12_	3(_ /	16	EMSL Analyti	ical					
Occupancy Status During Abatem	nent (Ch	eck only	one)			Street Address						
☐ Facility Closed/Vacated During						200 Route 13	0 North					
Abatement Performed Outside						City, State, Zip Co	ode					
Time of Abatement:AN	1	_PM/	PM		_AM	Cinnaminson	, NJ 08077					
Scope of Work (Check all that app	oly)											
☐ ≥3 sf or >3 lf		Пв	enovat	ion			ainment with Neg	ative Pressure				
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Location of Asbestos-Containing Material	(ACM)		Norma ed Sole	100 M	Acho	Description o		A	Re	Re	Щ	四四
TO BE ABATED	(ACIVI)	Ma	aintena	ince/		stos Containing Mai		Amount (Specify	Remova	Repair	lcap	Enclosure
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(13)		Yes	No	N/A	-	other miscellane	ous)				ate	1
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AbateTech, Inc.	,			lauler I	Waste D No.	Cubic Yards of Waste	Name of Regist					
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City, State						Disposal Date	City, State	220				
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Completed By (Print or Type)	Т	itle				Signature	00	Da	te	ì	1	,
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NOCE			(Operator (2		East, Pr	1	0 1	0.0	110		
Date of Notification (1)	16 / _ 1	6			SE&		WHEI	/ Job #16	611-5082 Ch	eck	NOV	21	21	010	1.	nem d
Agencies Notified	Type Notification	1		Stre	eet Ad	Idress				And the last of th	ASBESTO	000	701	TRO	1 8	
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(NJAC 5:23-8)	justification)			50000000		Marone										
	☐ Cancellation				100		0014	ATION								
				F	ACIL	ITY INF	OKIVI	ATION	Type of Facilit	v (4)		-				
Name of Facility Where	Abatement is Taki	ing Place	(3)						School (K-							
PSE&G Control Ho									Cubchante	r 2 10	ther than K-12	2)				
Street Address									Other (i.e.,	priva	te and comme	rcial b	uildi	ngs,		
747 Main Street									homes, etc			10	Ida	۸۵۵		\dashv
City (5)									Square Feet	1	# of Floors	-	nag.	Age		
Belleville, NJ 0710	9															\dashv
				С	ounty	Code (7)(STATE	USE ONLY)	1		if being demoli	ished)				
County (6)									Control H	ouse)					
Camden	. I lised by Duildin	a Owner (8)	ASC	CM No	0.	Name	of Abatem	ent Contractor	(9)						
Name of Monitoring Firm		g Owner (,	,,,,,	~		Aba	ateTech, I	nc.							
Health & Safety Se	ervices							Address								
Street Address									e. PO Box 25	;						
PO Box 365				_				State, Zip C								
City, State, Zip Code								mberton,								
Berlin, NJ 08009			1					hone No.	110 000 10		License No.					
Project Manager for Mo	nitoring Firm	1000	1		one N	0.		9-265-210	7		00529					
James Proctor			1 8		452-			of OSHA								
Start Date (10) 11 / 14		heduled C		letior 30		16) EN	ISL Analy								
Occupancy Status Duri		neck only	one)	parent pare		and the same of th		t Address								
☐ Facility Closed/Vaca	ted During Entire	Period of	Abat	eme	nt			0 Route 1								_
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Time of Abatement:	AM	_PM/	_P	VI	A	M	Ci	nnaminso	n, NJ 08077							
Scope of Work (Check	all that apply)							====	ntainment with	Nogo	tive Pressure					
Scope of Work (Orioda)				-41				☐ Full Co	ntamment with	ivega	(10000.0					
≥3 sf or ≥3 lf		⊠ Re	enova emoli					Clayob	an Procedure		- : !! D	dura				
≥160 sf or ≥260 lf			,,,,,					☐ Non-Ex	empted (*) and	Non-	-Friable Proces	uuie	A I	L	ent Ty	ma
		100	s Loc		257							-				
Location	on of		Norned S					Description	of laterial (ACM)		Amount	1	Removal	Repair	Encapsulate	Enclosure
Asbestos-Containin	g Material (ACM)		eu o ainte			Asbe (i.e	ther	mal system	s insulation,		(Specify		707	air	aps	USO
TO BE A			stodi	al St		(SL	urfacing, VA	T, or		SF or LF)	1	<u>n</u>		ulat	e
(13				2)			oth	er miscellar	neous)						O	
		Yes	N	lo	N/A					-	20.05			П	П	П
Exterior Windows						Stucco	ř.				30 SF			Ш		
LAterior villaging				1											Ш	Ш
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				3 1										П	Ш	
Name of Registered W	Jaste Hauler		1			Waste	1075017300	ic Yards of			ered Landfill					
The state of the s	rable i faulei			На	uler II	D No.	Was	ste	G.R.O.	W.S.	Landfill					
AbateTech, Inc.			_	1	18750	0	Dist	oosal Date	City, State	9						
City, State								1/30/16	Tullyto		PA					
Lumberton, NJ	=3.5767						1					Date	1		Agen	7
Completed By (Print o	r Type)	Title						Signature					11/	16	11	6
Gwendolyn Trum		Opera	ation	ns C	oord	linator		In	MI				1		500	

ASB-41 MAY 11

Gwendolyn Trumbetti

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

Operations Coordinator

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) 11/18/2016 Merchantville Pennsauken Water Commission Agencies Notified Type Notification Street Address ASBESTOS CONTROL & 6751 Westfield Avenue LICENSING XXX **EPA** Initial City, State, Zip Code DEP Amended DOL Amendment # Pennsauken, NJ 08110 Emergency (including Name of Contact Telephone Number DOH justification) DCA Cancellation Chris Kuchera **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Merchantville Pennsauken Water Commission School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e. private & commercial buildings, homes, X 4400 Frosthoffer Avenue etc.) City (5) # of Floors Square Feet Bldg. Age Pennsauken 392 62 County Code (7) (STATE USE ONLY) County (6) Current Use (Prior if being demolished) Camden Water pump house Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) **Environmental Testing Consultants** Silt Asbestos Abatement LLC n/a Street Address Street Address 413 N. Black Horse Pike 1800 Federal Street City, State, Zip Code City, State, Zip Code Runnemede, NJ 08078 Camden, NJ 08105 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Howard Zenobi 856 482 1311 856 630 3288 01303 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 12/03/2016 12/04/2016 Self monitor Occupancy Status During Abatement (Check Only One) Street Address Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: Scope of Work (Check All That Apply) ≥3 sf or ≥3 If Renovation Full Containment with Negative Pressure ≥160 sf or ≥260 lf Demolition Mini-Enclosure Glovebag Procedure \overline{X} Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Type

Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	Normall ed Sole sintenar todial S (12)	y by nce/		Description of tos Containing Mater thermal systems ins surfacing, VAT, or other miscellaneous	ulation,	Amount (Specify SF or LF)	Removal x	Encapsulate	Enclosure	
	Yes	No	N/A			%		<u>a</u>	7	late	lre
Pump house	x			ther	mal systems inst	ılation	6 LF	х			
	-							-			
	-										
Name of Registered Waste Hauler		10000	JDEP W	7076	Cubic Yards	Name of	Registered Landfi	11			
Robinson Waste Disposal		1000	auler ID 7304	No.	of Waste	Grows	Landfill				
City, State Voorhees, NJ		'			Disposal Date 12/05/16	City, Stat Morris	e ville, PA				
Completed by Jeff Yekenchik	Title Own	er			Signature	1	100		201	6	
	-					~ /VV					-

B & G proj. #: 2016-167

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

*** SUB chapter 8 ***

Check # 8116 2 1 2016

3					*** SUE	B chap	ter 8 ***		Check	(# 8110	0 2	1	201b	_				
Date of Notification (1)		-11	Name o	of Building O	wner/Operato	or (2)			1					1				
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	otification		Street A							1	OCA	10336	0					
☐ EPA 🕱 II	nitial			lain Street														
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▼ DOH		1		Contact					Telepho	ne Numb	Ar			-				
□ DCA □ Ca	ancellatio	n	Tho	mas Herits	s & Dennis	Quinl	an			110 1101110		•						
				FA	CILITY INFO	RMATI	ON											
Name of facility where abater	ment is ta	iking p	place (3)					Тур	e of Facility	(4)	-							
Staats House (Sub 8)									\equiv	ol (K - 12	*	41	K 40)					
Street Address						-		-		napter 8 ((Private/								
Von Steuben Lane								Sa		/Homes,	etc.		Bldg. A	Ane				
City (5)		Cot	unty (6)				ounty Code (7)			70.7300.750								
South Bound Brook		So	omerse	t		(5	tate use only)	1 1 2	Current Use (Prior if being demolished) house school district owns									
Name of Monitoring Firm Hire	-				ASCM No).	Name of Abaten				-							
RK Occupational & E	nvironm	nenta	l Analy	sis .	0090													
Street Address							Street Address											
401 ST. James Ave							105 Ryerso											
City, State, Zip Code Phillipsburgh, NJ 088	65						City, State, Zip C Lincoln Pa		7035									
Project Manager for Monitoring	Firm			Phone Num	ber		Telephone Numb			License	Num	ber	-					
Jonathan Gilbert				908-454-6	316		(973)696-6	8869			0378	2005.00						
Scheduled Start Date (10)		Sche	d. Comp	letion Date (*	11)		Name of OSHA											
11/29/2016		11/	29/201	6			B & G Resto	pration, i	nc.									
Occupancy Status During Abate	ement (C	heck	only one)			105 Ryerson	n Road										
Facility closed/vacated du	uring enti	re per	iod of ab	atement.			City, State, Zip C	ode					-					
Abatement performed out Describe:	tside of n	ormai	facility h	ours-			1: 15	111070										
Other-Describe:							LincolnPark	, NJ 070	35									
Scope of Work (check all that a																		
	_	novatio					Full Containment w	/negative	oressure [Glove	bag pr	oced	ure					
			≥260 If		,	X	Mini-enclosure			Non-fi	riable	proce	dure					
Location of asbestos-containing				lly used solel custodial	1				A		R	R	E	E				
material to be	stat	ff(12)				ption of a	asbestos-containing		Amount (Specify S	For	m	p	С	n				
abated in facility (13)	Y	es	No	N/A					LF)		V	i	a p	Ĺ				
Kitchen				X	pipe insu	ulation			35 If		e	5						
]													
Posiato vad Woods Haules																		
Registered Waste Hauler B & G Restoration, Inc.			EP Haule 19563	eriD# C	ubic Yards o	i vvaste			ı ırce & Re	COVERV	Cent	er		- Car - Carl				
City, State Lincoln Park, NJ				Disposal D			City, State Tullytow			COVCIY	Jeni	01						
Completed by (Print or Type)	Title			_	Signature					Date			<u>v</u>					
Gordana Luna			y/Trea	surer			Gordana Luni	7		11/18	/201	6						

Choiner	F NEW JERSEY	DEPARTMEN	NT OF	LABOR NOTIFICATION OF ASI	BESTOS ABATEI	WENT		F	[FA]			
Date of Notification (1) 11/15/2016				Name of Building Owner/Operator Mack Cali Realty		W 2		6	And the second state of th			
Agencies Notified () USEPA	Type of Notific			Street Address 210 Hudson Street	hal La	V	1 201		The second second			
(X) NJDEP (X) NJDOL (X) DOH	() Amend		ina	City, State, Zip Code Jersey City, NJ 07311	ASDEGI		SING	IOL &	To the second control of the second			
() DCA	justific () Cance	ation)	9	Name of Contact Jim Dyal		Tel.	Number	_				
		F	FACILIT	Y INFORMATION								
Name of Facility Where Abatems Harborside Financial Ce		(3)		Type of Facility (4) () School (K-12) () Subchapter 8 (other than h	(-12)							
Street Address 34 Exchange Place				(X) Other (i.e. private & comm	ercial bldgs., hon			90				
<u>City (5)</u>	County (6)	County Code (State Use O		Sq. Feet: 761,200 # c	f Floors 9	В	ldg. Age	<u> </u>				
Jersey City	Hudson			Our ent ose (ii being demonstr	eu).							
Name of Monitoring Firm Hired by Matrix New World Engi		ASCM No. N/A		Name of Contractor (9) Industrial Safety & Envir	onmental Solu	tions	s, Inc.					
Street Address 26 Columbia Tpk. Sed	cond Floor			Street Address 3300 Hudson Avenue								
City, State, Zip Code Florham Park, NJ 079	932			City State. ZipCode Union City, NJ 07087								
Project Manager for Monitoring F	Firm Telephone I	Number		Telephone Number		Li	cense N	umber				
Gavin Gilmore	973.240.	1800		(201)325-0055		0	1124					
Scheduled Start Date (10) 11/16/2016	12/15/20	Completion Date 16	<u>= (11)</u>	Name of OSHA Monitor ISES, Inc.								
Occupancy Status During Abater (X) Facility Closed/Vacated Du (X) Abatement Performed Outs	ring Entire Period	of Abatement		Street Address 3300 Hudson Avenue								
(X) Other - Describe: work area is in floor curr				City. State. Zip Code Union City, NJ 07087								
Source of Work (Check all that a	pply) () Demolition	1	(X) Renovation								
() Minor Project (< 25 SF () Small Project (>25 <16 (X) Large Project (>160 SF	30 SF or >10 <26	0 LF ACM)		(X) Full Containment with () Mini-Enclosure with N (X) Glove-bag Procedure () Non-Exempted (*) an	egative Pressure and Wrap and cu	ut prod						
Location of Asbestos- Containing Material (ACM)	Is Location No Solely by Mair			Description of ACM i.e. thermal systems insulation,	Amount (Specify SF or LF)		Abatem	ent Type	е			
To be Abated in Facility (13)	Custodial S			cing, VAT, or other miscellaneous.)	OF GEE	R e	R	Enc	E n			
	YES NO	N/A				o v a l	p a i r	a p s u l a t e	c l o s u r e			
3rd floor	X		TSI pi	ре	~ 8 LFT	Х						
3rd floor	X		mastic	and associated cork on ceiling	~ 21000 SFT	Х						

3rd floor		X		mastic on cinder	~ 700 SQ FT	X						
3rd floor		х		mastic on south v	valls	~1300 SQ FT	X					
Name of Reg. Waste Hauler #1 Newark Carting		NJDEP Was 04509	ste Haule	r ID #	Cubic Yards of Waste ~ 140	Name of Reg. La Grand Centra 1963 Pen Arg	I Sani					
City, State 369 Raymond Blvd., Newark, 1	NJ 07105			Disp. Date 12/01/2016		City, State Pen Argyl, PA 18072						
Name of Reg. Waste Hauler #2 Atlas Disposal Options, Ir		NJDEP Was 50452	ite Hauler	r ID#	Cubic Yards of Waste 100	Name of Reg. La Grand Centra 1963 Pen Arg	I Sani					
City. State 311 East Blackwell Street, D	over, NJ	07801		Disp. Date 12/01/2016		<u>City. State</u> Pen Argyl, PA 18072						
Completed by (Print or Type) David Camacho	Title Project	t Supervis	sor	Signature	10 moin	Date 11/15/2016						





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	NOV	21	2016	

Date of Notification (1) 11-18-16		Name of Building Owner/Operator (2) Cooper Lanning Square Renaissance School Facilities, Inc.											
Agencies Notified Type Notification			Street A			-100		ASBEST	OS C	SING	ROL	_ &	
EPA Initial Amended Amendment #			- T-11	te, Zip Code en, NJ 08103	and the same								
Emergency (in justification) DCA Emergency (in justification) Cancellation	cluding	100		Contact Millman			Tel	ephone Nur	nber				
			FACI	LITY INFORMAT	ION								
Name of Facility Where Abatement is Taking Kipp Cooper Norcross Academy at						Type of Facility (-	2)						
Street Address 740 Chestnut St.						Subchapter Other (i.e. p etc.)				dings,	home	s,	
City (5) Camden						Square Feet 200,000	# o	Floors		ldg. A /-50	7.0		
County (6) Camden				Code (7) JSE ONLY)		Current Use (Prio	or if bei	ng demolish	ned)				
Name of Monitoring Firm Hired by Building Of Brinkerhoff Environmental		ASCN	I No.		of Abatement Cor per Environme			nc.					
Street Address 1805 Atlantic Avenue				100000000000000000000000000000000000000	Address I Fraley Street		80						
City, State, Zip Code Manasquan, NJ 08076	City, State, Zip Code					State, Zip Code iladelphia, PA 19137							
Project Manager for Monitoring Firm Gary Fleming			Telephor	ne No. 23-2225	Telepl	none No. 533-5155		License N	0.				
Start Date (10)	Schedule	ed Com	NAME OF THE PARTY	Date (11)	Name	of OSHA Monitor kerhoff Environ	ment						
Occupancy Status During Abatement (Check						Address	11110110						
Facility Closed/Vacated During Entire Pe			ent			5 Atlantic Aven	ue						
Abatement Performed Outside of Normal Other – Describe:					52.0	State, Zip Code asquan, NJ 08	076						
Scope of Work (Check All That Apply)													
≥3 sf or ≥3 lf x ≥160 sf or ≥260 lf		Renova Demoliti				Full Containment Mini-Enclosure Glovebag Production Non-Exempted	e cedure				'e		
	lo lo	Locati	on.				<u> </u>			172 A A - 5 - 5 - 5	ement	t	
Location of	2000	Location Normall		n _e	scription	n of				Ту	/ре		
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	d Solel intenar todial S (12)	ice/	Asbestos Con (i.e. therma surfa	taining I	Material (ACM) s insulation, AT, or	(5	mount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure	
1st floor	163	INO	X	VAT	and M	astic	(300sf	Х				
3rd and 4th floor (7 separate areas)			х	VAT	and M	astic		63sf	х				
under radiators -9 sf ea. area								C					
Name of Registered Waste Hauler		l NI	JDEP W	/aste Cubic	Yards	Name of	Regist	ered Landfil					
				No. of Wa									
City, State Newark, DE				Dispo	sal Date	City, Stat							
Completed by Title				of Operations Signature Date						6			