CKSTUD		NOT		TION	OF AS	ew Jersey BESTOS ABAT AC 8:60 and 5:10			G E		W 201	
Date of Notification (1)						g Owner/Operator (1 407020-				enan (. 11)
/14	/16	<u> </u>		US	Coast G	Suard / Job	#1610-5073 C	heck #8762BE	STOS	CO MOU	NIH	
Agencies Notified Type N ⊠ EPA □ Initi	lotification al				Address	d Training Cente	r					
⊠ DOLWD ⊠ Am					State, Zip (-1					
	endment #					NJ 08204						
	ergency (ir ification)	ncluding	3		of Contac			Telephone Num	ber			
	cellation			Mik	e Martin			-				
				FA		FORMATION						
Name of Facility Where Abateme	nt is Takin	g Place	(3)				Type of Facility	(4)				
USCG GSK Building #204							School (K-12		20			
Street Address							Subchapter 8	8 (Other than K-12 rivate and comme	2) ercial bu	ilding	19	
1 Munroe Avenue							homes, etc.)				0,	
City (5)							Square Feet	# of Floors	Bl	dg. A	ge	
Cape May												
County (6)				Cour	ity Code (7)(STATE USE ONLY)	Constraint and a state of the second s	ior if being demoli	shed)			
Cape May							Training Ce					
lame of Monitoring Firm Hired by	/ Building (Owner	(8)	ASCM	No.	Name of Abateme						
Health & Safety Services						AbateTech, I	nc.					
Street Address						Street Address						
PO Box 365						30 Maple Ave						
City, State, Zip Code						City, State, Zip Co						
Berlin, NJ 08009			1			Lumberton, I	NJ 08048	Linenee Me				
Project Manager for Monitoring Fi	rm			phone		Telephone No. 609-265-2107	,	License No. 00529				
Jim Proctor		1 1 1 0		9-839		Name of OSHA M		00529				
Start Date (10) 10 / 20 / 16		duled C 11 /				EMSL Analyt						
				_	10	Street Address						
Decupancy Status During Abatem				ment		200 Route 13	0 North					
Abatement Performed Outside					cribe	City, State, Zip Co					- 075	
Time of Abatement:AN						Cinnaminsor						
Scope of Work (Check all that ap	oly)					I Full Con	tainment with Neg	gative Pressure				
] ≥3 sf or ≥3 lf ⊠ ≥160 sf or ≥260 lf			novati molitic			⊠ Mini-Enc ⊠ Gloveba	g Procedure					
						Non-Exe	mpted (*) and No	n-Friable Procedu				
1			Locat Norma			Deservation				atem	1	
Location of Asbestos-Containing Material	(ACM)	Use	d Sole	ly by	Asbe	Description o stos Containing Ma		Amount	Removal	Repair	Enc	Enclosure
TO BE ABATED			intena todial \$		(i.e	e., thermal systems		(Specify SF or LF)	IOVa	air	apsu	osu
IN Facility (13)			(12)			surfacing, VAT other miscellane		OF OF LF)	=		Encapsulate	ſe
		Yes	No	N/A			82. 					
Exterior					Transit	e	S	230 SF				
Rooms					Floor ti	le & Mastic		600 SF				
Rooms					Carpet			400 SF				
Rooms				\square	Pipe Fit	ttings		12 LF	\square			
lame of Registered Waste Haule	r		100.002	JDEP		Cubic Yards of	Name of Regis					
AbateTech, Inc.			H	auler II 18750		Waste 20	G.R.O.W.S	. Landfill				
City, State						Disposal Date	City, State					
Lumberton, NJ						11/30/16	Tullytown,	PA				
Completed By (Print or Type)	Title	Э				Signature	n.K	D	ate	11	1	110
Gwendolyn Trumbetti	0	perati	ons (Coord	inator		rny		11		1	1
CD 44							1					

ASB-41

<u>USCG-GSK Bldg. –</u>	Notific	ation			NOV 2 1 2016 <u>PAGE 2 OF 2</u> ASBESTOS CONTROL &
Location of Asbestos-Containing Material (ACM)	Solely	tion Normally by Maintenan todial Staff? (1	ce or	Description of Asbestos-Containing Material (ACM) (i.e., thermal systems	Amount Abatement Type NG (Specify SF or LF)
TO BE ABATED in Facility (13)	Yes	No	N/A	insulation, surfacing, VAT or other miscellaneous)	SF or LF) Repair Removal
Front 3 Rooms				Pipe Insulation Fitting	68 LF
Front 3 Rooms				1	

KRIRN

City, State

Completed

ASB-41

State of New Jersey

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CKOUDO	J	NOT				BESTOS ABAT C 8:60 and 5:10			NOV	2	1 21	316		
Date of Notification (1) /11	I / 16	6		a second concerns) Owner/Operator (Lourdes Health		o #1611-508/4 SCh						
⊠ EPA	pe Notification Initial			160		n Avenue				ENS	onfwic			
⊠ DOLWD □ ⊠ DHSS	Amended Amendment #				state, Zip C									
	Emergency (in		g	-	nden, NJ			Talaakana Numb						
(NJAC 5:23-8)	justification)				of Contact			Telephone Numb	Jei					
	Cancellation													
Name of Facility Where Abat	amont is Takin	a Diaco	(2)	FAG	JILI Y IN	FORMATION	Type of Facility	(4)						
Our lady of Lourdes M			(3)				School (K-1							
Street Address	eulear oenite						Subchapter	8 (Other than K-12)	8 (Other than K-12)					
1600 Haddon Avenue							homes, etc.	private and commer	cial bu	liaing	js,			
City (5)							Square Feet	# of Floors	Bl	dg. Ag	ge			
Camden										51 5	9A			
County (6)				Cour	ty Code (7)	(STATE USE ONLY)	Current Use (P	rior if being demolis	hed)					
Camden							Hospital							
Name of Monitoring Firm Hire	ed by Building (Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9))						
TTI Environmental			5			AbateTech, Inc.								
Street Address						Street Address								
Street Address Street Address 1253 North Church Street 30 Maple Ave. PO Box 25														
City, State, Zip Code						City, State, Zip Co								
Moorestown, NJ 08057						Lumberton, I	NJ 08048							
Project Manager for Monitoria	ıg Firm		1 1 1 2 2	ephone		Telephone No.		License No.						
Jim Guilardi					i6-840-8800 609-265-2107 00529									
Start Date (10)					ion Date (11) Name of OSHA Monitor / 16 EMSL Analytical							-		
/					10	EMSL Analyt	ICal							
Occupancy Status During Ab Facility Closed/Vacated D				mont		Street Address 200 Route 13	0 North							
Abatement Performed Ou					cribe	City, State, Zip Co	and the second and the							
Time of Abatement:						Cinnaminsor								
Scope of Work (Check all tha	t apply)						,							
⊠ ≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf		⊠ Re □ De	enova emolit			⊠ Mini-Enc ⊠ Gloveba	losure g Procedure	egative Pressure on-Friable Procedu	re					
		le	Loca	tion			inpled () and N		_	atem	ent T	vne		
Location of		1	Norma	ally		Description of	of			1	1			
Asbestos-Containing Mate <u>TO BE ABATEI</u> IN Facility (13)		Ma	inten	ely by ance/ Staff?		stos Containing Ma , thermal systems surfacing, VAT other miscellane	iterial (ACM) insulation, , or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure		
(10)		Yes	No	N/A							U			
Stairwell behind Morgue					Pipe Ins	sulation		50 LF						
							•							
Name of Registered Waste H	auler				Vaste	Cubic Yards of	Name of Regi	istered Landfill				_		
AbateTech, Inc.	GUIUT			Hauler II	No.	Waste	G.R.O.W.S							
·····, ·····				18750		15								

City, State

Tullytown, PA

Date

1)

Disposal Date

11/15/16

Signature

Lumberton, NJ	
ompleted By (Print or Type)	Title
Gwendolyn Trumbetti	Operations Coordinator
B-41	

NOCK		NOTI		ATION	OF ASE	ew Jersey BESTOS ABAT C 8:60 and 5:16		NO NO	E 1 2	1 2	₩ 2016			
Date of Notification (1)						g Owner/Operator (2								
11/	17 / 16	6		Fee	deral Avi	ation Administra	ation/ Job #160	615020/Check#	8608 CEN	SIN	gi 11 (c G	11.2%		
Agencies Notified	Type Notification			Street	Address			Street of the second se						
EPA	Initial					cal Center								
	Amended Amendment #	4			State, Zip C			_						
	Emergency (in			and the second		International Ai	rport, NJ 0840				-			
(NJAC 5:23-8)	justification)				of Contact	t		Telephone Numb	er					
	Cancellation			Pet										
	1. 1	- Dissa	(2)	FAG	CILITY IN	FORMATION	Type of Facility ((4)						
Name of Facility Where A		ig Place	(3)				School (K-12)							
William J. Hughes T Street Address	ech Center						Subchapter 8	(Other than K-12)						
							Other (i.e., pr homes, etc.)	ivate and commerce	ial bu	ilding	s,			
Hangar B301							Square Feet	# of Floors	Blo	lg. Ag	je			
City (5)							oquale i oot			0.013	1977 B			
Atlantic City County (6)				Cour	ty Code /7)(STATE USE ONLY)	Current Use (Pri	or if being demolish	ned)					
Atlantic						,	Technical C							
Name of Monitoring Firm	Hired by Building	Owner (8)	ASCM	No.	Name of Abateme	ent Contractor (9)			1.00				
TTI Environmental	rinea of Dananig		-/	AbateTech, Inc.										
Street Address				Street Address										
1253 North CHurch	Street					30 Maple Ave	e. PO Box 25							
City, State, Zip Code				City, State, Zip Code										
Moorestown, NJ 08	057			Lumberton, NJ 08048										
Project Manager for Moni	toring Firm		Tel	lephone No. License No.										
Jim Guilardi		/	1	09-314		609-265-2107		00529						
Start Date (10) 8 / 29 /	1		0.00	etion Date (11) Name of OSHA Monitor D/16EMSL Analytical										
Occupancy Status During	(]													
Facility Closed/Vacate				ement		200 Route 13	0 North							
Abatement Performed Time of Abatement:	Outside of Norma	al Facility	y Hou	irs - Des	cribe AM	City, State, Zip Co Cinnaminsor								
Scope of Work (Check all	that apply)													
 □ ≥3 sf or ≥3 lf ⊠ ≥160 sf or ≥260 lf 		⊠ Re □ De		70/7/0		☐ Mini-Enc	g Procedure	ative Pressure n-Friable Procedur	e					
		e	Loca	ation						atem	ent Ty	/pe		
Location Asbestos-Containing I <u>TO BE ABA</u> IN Facilit (13)	Material (ACM) <u>TED</u>	N Use Ma Cusi	Norm d So inten todial (12	ally lely by ance/ I Staff?)		Description of stos Containing Ma e., thermal systems surfacing, VAT other miscellane	iterial (ACM) insulation, , or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure		
Exterior		Yes	No No		Roof Fl	lashing		410 SF						
				_				115 SF						
Exterior														
Interior				Floor tile & Mastic Roof Mastic										
Exterior						Cubic Yards of								
Name of Registered Was AbateTech, Inc.	te Hauler		- 12	Hauler ID No. Waste Atlantic Count Utilities Authority										
				1875	0	Disposal Date	City, State			2				
City, State Lumberton, NJ				2		12/30/16		or Township, NJ	0823	4				
Completed By (Print or Ty	/pe) Tit	le			~	Signature					,			
Gwendolyn Trumbe		Operati	ions	Coord	inator	m	it		te / i//	7/	16			
ASB-41							-							

NOCL		ΝΟΤΙ		ATION	OF AS	lew Jersey BESTOS ABAT AC 8:60 and 5:1		DE C No	E / 2	1 2	V 2016	
Date of Notification (1)						g Owner/Operator (
11 /	17 / _1	6		Fe	deral Av	iation Administr	ation / Job #	1606-5020 Cher				E2
Agencies Notified	Type Notification	n		Stree	t Address			L	CEN	SIM	<u>G</u>	-
EPA	Initial			FA	A Techni	ical Center						
	Amended Amendment	#3		City,	State, Zip	Code						
	Emergency (Atl	antic City	y International A	irport, NJ 084	05				
(NJAC 5:23-8)	justification)			Name	e of Contac	at .	12 - 4 2 - 2007 2007 - 4407 1, 147 7 - 141 240 1	Telephone Numb	ber		-	
	Cancellation			Pet	ter			-			-	
				FA	CILITY IN	FORMATION						
Name of Facility Where A		ng Place	(3)				Type of Facility	• •				
William J. Hughes	Tech Center						School (K-1)	2) 8 (Other than K-12)				
Street Address								private and commercial		uilding	gs,	
Hangar B301							homes, etc.)			100723	
City (5)							Square Feet	# of Floors	BI	dg. A	ge	
Atlantic City							0	day 16 holes at 100	h a -D			
County (6) Atlantic				Cour	nty Code (7	7)(STATE USE ONLY)		rior if being demolis	ned)			
Name of Monitoring Firm	Lized by Duilding	0	<u>, </u>	ACOM	Ne	Norse of Abotem	Technical C					
TTI Environmental	Filed by Building	Owner (a	"	ASCM	NO.	Name of Abateme AbateTech, In)				
Street Address						Street Address	nc.					
1253 North CHurch	Street					30 Maple Ave	PO Box 25					
City, State, Zip Code	Olicer					City, State, Zip Co						
Moorestown, NJ 08	057					Lumberton, N						
Project Manager for Monit			Tele	phone	No.	Telephone No.	10 000 10	License No.				
Jim Guilardi					-1683	609-265-2107	•2	00529				
Start Date (10)	Sche	duled Co	mple	tion Da	te (11)	Name of OSHA M	lonitor			111112		
8_ /29_ /	/	12 /				EM\$L Analyt	ical					
Occupancy Status During	Abatement (Cheo	ck only or	ne)			Street Address						
Facility Closed/Vacate		No. of Concession, name		ment		200 Route 13	0 North					
Abatement Performed						City, State, Zip Co	ode					
Time of Abatement:	AMP	PM/	_PM-		AM	Cinnaminson	, NJ 08077					
Scope of Work (Check all	that apply)											
☐ ≥3 sf or ≥3 lf		🛛 Ren	ovati	on		☐ Full Cont	ainment with Ne	gative Pressure				
⊠ ≥160 sf or ≥260 lf		Den				🗍 Glovebag	g Procedure					
		1			1	Non-Exe	mpted (*) and No	on-Friable Procedure	1			
Location	of	1.	.ocat orma			Description o	f			1	ent T	
Asbestos-Containing N	Material (ACM)	Used	Sole	ly by		stos Containing Ma	terial (ACM)	Amount	Remova	Repair	Encapsulate	Enclosure
TO BE ABA IN Facility			itena idial 3	Staff?	(i.e	., thermal systems i surfacing, VAT,		(Specify SF or LF)	lova	air	apsu	osu
(13)	y		(12)			other miscellane		OF OF ELY	-		Ilate	6
		Yes	No	N/A								
6 Locations			\boxtimes		Roof FI	ashing		4 SF (24 SF	\boxtimes			
								man				
News (D. 1)							New CD 1	tered to serve				
Name of Registered Waste	e Hauler			JDEP V auler ID		Cubic Yards of Waste	Name of Regis		heri			
AbateTech, Inc.				18750		16		ount Utilities Aut	norn	LY		
City, State					/	Disposal Date	City, State		0000			
Lumberton, NJ		1			(12/30/16	Egg Harbo	or Township, NJ		4		
Completed By (Print or Typ						Signature	F	Dat	e /,-	. 1.		
Gwendolyn Trumbet		Operatio	ns C	oordi	nator	1 cpul	X	10	[] [///	6	
SB-41						/1						

11 10 16 PSE&G / Job #1611-5082 Check #868 #SEES TOS CON TROLED INTERCED Street Address 30 OUVD Amended <	CKSLES	3.1		Purs	ION uant	OF ASE to NJA	w Jersey BESTOS ABAT C 8:60 and 5:16	5)		°, E ₩ 2		V 2016	
Bips, Amendment # DOLMO Discrete 400 Hadley Road 400 Hadley Road OCA Discrete Charles Discrete 400 Hadley Road Telephone Number OCA Discrete Discrete Contact Telephone Number OCA Discrete Discrete Tope of Facility (A) Telephone Number Discrete Discrete Discrete Discrete PSE&Control House Discrete Discrete Discrete Stret Address Discrete Discrete Discrete PD Box 365 Discrete Discrete Discrete Discrete Discrete Discrete Discrete Discrete Discrete Discrete Discrete Stret Address Discrete Discrete Discrete Discrete Discrete Discrete Discrete Discrete Discrete Discrete	Date of Notification (1)	10 / 16		N			Owner/Operator (2 Job #1	²⁾ 611-5082 Chec	k #8681ASBES	TOS			DL &
DOLVD Annended Annended Annended OCA City, Stea, 2/p Code South Plainfield, N J 07080 NAC 5.23.6) Emergency (ncluding) justification) Telephone Number OCA Cancellation FACILITY INFORMATION Name of Cattors South Plainfield, N J 07080 Street Address School (Kr.12) Variance of Facility (Mare Abalement is Taking Place (S) School (Kr.12) Street Address South Plainfield, N J 07080 Street Address South Plainfield, N J 07108 South Year Abalement is Taking Place (S) South Plainfield, N J 07108 Carm den County Code (7)(STATE USE 0M.17) Carm den South Plainfield School (Kr.12) South Plainfield N Street Address South Plainfield School (Kr.12) South Plainfield N Street Address South Plainfield N School (Kr.12) Carm den County Code (7)(STATE USE 0M.17) Countrol House Street Address South Plainfield N School (Kr.12) Countrol House Street Address South Plainfield N School (Kr.10) Countrol House Countrol House Street Address South Plainfield N School (Kr	5			S			Deed						
Diss Amendment # Disk / product Telephone Number DicA South Plainfield, NJ 07080 Name of Contact Telephone Number NAC 5:23-61 Disk / product FACILITY INFORMATION Telephone Number PSE&C Concellation Greg Marone FACILITY INFORMATION Type of Facility (4) PSE&C Concellation Status Product Status Product Status Product Street Adatement is Taking Place (3) PSE&C Concellation Status Product Status Product Street Adatement Contractor (6) Status Product Status Product Status Product Status Product Street Adatess Street Adatess Status Product Status		The second s											_
DCA (NLAC 5:23-8) Demogency (including publication) Name of Context Org Marone Telephone Number Amount of Facility (NLAC 5:23-8) Cancellation Type of Facility (4) School (K-12) Issee Address School (K-12) School (K-12) School (K-12) Issee Address School (K-12) School (K-12) Bidschapter 8 (Other than K-12) Street Address Square Feet # of Floors Bidg. Age Belleville, NJ 07109 County Code (7)(STATE USE ONLY) Current Use (Prior If being demolibred) Control House Camden County Code (7)(STATE USE ONLY) Current Use (Prior If being demolibred) Edition (11) Street Address Street Address Street Address Street Address Street Address Street Address Street Address Street Address <td>300000</td> <td></td> <td></td> <td>1</td> <td>1000</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	300000			1	1000								
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FACILITY INFORMATION Type of Facility (4) Type of Facility (4) School (K) House Type of Facility (4) School (K) House Type of Facility (4) School (K) House Total Colspan="2">Colspan="2"				ľ									
ame of Facility Where Abatement is Taking Place (3) Type of Facility (4) PSE&C Control House Subbander 8 (Nota) real Address Subbander 8 (Nota) 747 Main Street Subbander 8 (Nota) real Address Square Feet # of Floors Belleville, NJ 07109 County Code (7)(STATE USE 0ML?) Current Use (Prior If being demolished) Camden County Code (7)(STATE USE 0ML?) Current Use (Prior If being demolished) Camden Street Address 30 Maple Ave. PO Box 25 Freet Address 30 Maple Ave. PO Box 25 0529 Trate Address 30 Maple Ave. PO Box 25 0529 Street Address 30 Maple Ave. PO Box 25 0529 Trate Address 30 Maple Ave. PO Box 25 0529 Trate Address 30 Maple Ave. PO Box 25 0529 Trate Address 30 Maple Ave. PO Box 25 0529 James Proctor 856-452. 699-255-2107 00529 James Proctor Street Address 200 Route 130 North 0529 Cobequery Status During Abatement (Chack only one) Street Address 200 Route 130 North 0529 Abatement Erdormed Outside of Normal Faelity Hours - Describe													
PSE&G Control House School (K-12) School (K-12) School (K-12) TAT Main Street School (K-12) School (K-12) School (K-12) TAT Main Street Square Feet of Floors Bidg, Age Bidg, Age County Code (7)(STATE USE ONL?) Current Use (Prior if being demolished) Control House Canden County Code (7)(STATE USE ONL?) Current Use (Prior if being demolished) Control House Canden County Code (7)(STATE USE ONL?) Current Use (Prior if being demolished) Control House Canden County Code (7)(STATE USE ONL?) Current Use (Prior if being demolished) Control House Canden Street Address Street Address Street Address Street Address PO Box 365 30 Maple Ave. PO Box 25 Other Use Prior Street Address James Proctor 856-452 609-265-2107 00529 James Proctor Street Address 200 Router 130 North Street Address Cocupancy Status During Abatement (Check only one) Street Address 200 Router 130 North Street Address Street Address 200 Router 130 North Street	Iame of Facility Where Ab	atement is Takin	o Place (3))	1 AU			Type of Facility (4)				
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homes, etc.) homes, etc.) Square Feet # of Floors Bilg. Age Square Feet # of Floors Bilg. Age Square Feet # of Floors Bilg. Age Current Use (Phor if being demolished) Control House Current Use (Phor if being demolished) Control House Street Address Street Address Street Address Street Address Street Address Street Address Street Address Code Code Lucense No. Street Address Code Street Address Code Street Address Code Street Address 200 Route 130 North Code Contrainment with Negative Pressure Improvement with Negative Pressure Improvement With Negative Pressure Improvement With Negative Pressure <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>Subchapter 8</td> <td>(Other than K-12)</td> <td>cial bui</td> <td>Idings</td> <td>З,</td> <td></td>								Subchapter 8	(Other than K-12)	cial bui	Idings	З,	
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Belleville, NJ 07109 County Code (7)(STATE USE 0NLY) Current Use (Prior if being demolshed) Camden County Code (7)(STATE USE 0NLY) Current Use (Prior if being demolshed) Control House Lame of Monitoring Firm Hired by Building Owner (6) ASCM No. Name of Abatement Contractor (9) AbateTech, Inc. Health & Safety Services Street Address 30 Maple Ave. PO Box 25								Square Feet	# of Floors	Bld	g. Ag	е	
County (6) County Code (7)(STATE USE ONLY) Current Use (Point / being demolished) Camden Control House Imme of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Health & Safety Services Street Address Street Address PO Box 365 Street Address Otherse PO Box 365 City, State, Zip Code License No. Bardin, NJ 08009 BS 452- 609-265-2107 Yoject Manager for Monitoring Firm Telephone No. 609-265-2107 James Proctor BS 452- 609-265-2107 State Date (10) 11 / 16 / 16													
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Gwendolyn Trumbetti Operations Coordinator	Gwendolyn Trumbel	ti	Operatio	ns C	oord	inator	0	Am		11/	10	11	D

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Date of Notification (1) 11 /	17 /	16				of Buildin Luke's H	g Owner/Operator (lospital	2)			(OV 2	2 i	2016				
Agencies Notified			-			Address											
	Type Notifica	auon				Rosebe	rry St		16	ASBE	LICE			OLA			
⊠ DOLWD	Amended	ł				State, Zip (L	LIVE	ra Qin	44	-			
DHSS	Amendme	ent # <u>2</u>			1		, NJ 08865										
DCA			uding		1000	of Contac			T	elephone Nun	nher						
(NJAC 5:23-8)	justificatio					l Ruhf	~		-								
Name of Facility Where A	Abatamant is T	Toking E	Placa	(3)	FA		FORMATION	Type of Fa	cility (A)								
St. Luke's Hospital		akiiy r	lace	(3)				School	1292 (J. 1897)								
Street Address								🗌 Subcha	pter 8 (C	ther than K-1	2)						
185 Roseberry St.								Other (i homes,		te and comme	ercial bu	ilding	js,				
City (5)								Square Fee		# of Floors	BI	dg. A	ne				
Phillipsburg, NJ 08	865							100.000		2 41+							
County (6)					Cour	ty Code /	7)(STATE USE ONLY)			f being demol							
Warren						ity 0000 (i		Hospita		(i tiol il bolling contenency)							
Name of Monitoring Firm	Hired by Build	ding Ow	vner (8)	ASCM	No	Name of Abatem										
Pennonni Assoc.	Thick by band	ang on	mor (0)	NA		Alliance Env			ms							
Street Address					10.1		Street Address										
515 Grove St.							550 East Uni	on St.									
City, State, Zip Code							City, State, Zip C	odun di kongenera					-				
Haddon Heights, N							West Cheste	2									
Project Manager for Mon				Te	ephone	No.	Telephone No.		License No.				_				
Tom Adams	itoning i inn				56-547		610-701-9000		00508								
Start Date (10)	S	Schedul	led Co		etion Da	22.42.42.42.	Name of OSHA M										
9 / 12 /					3 /		AET										
Occupancy Status During							Street Address										
Facility Closed/Vacate					ement		28 N. Pennel										
Abatement Performed						cribe	City, State, Zip C										
Time of Abatement: 7							Media, PA 19										
Scope of Work (Check al	I that apply)																
	(that apply)	-	_		120			tainment wit	h Negati	ve Pressure							
			Rer Der				Mini-En Gloveba	closure la Procedure									
		-		110 III	ion					riable Proced	ure						
50 U.S.					ation		024				Ab	atem	ent T	уре			
Location	27.1	1		lorm d So	ally lely by	Acho	Description estos Containing Ma		、	Amount	Re	Re	<u> </u>	Щ			
Asbestos-Containing <u>TO BE ABA</u>		"	Mai	inten	ance/		e., thermal systems	insulation,	/	(Specify	Removal	Repair	Encapsulate	Enclosure			
IN Facili	ity		Cust	odia (12	Staff?		surfacing, VAT			SF or LF)	val	· ·	sula	sure			
(13)			Yes	No	1		other miscellane	eous)					ate				
1st Floor Sub Dhases						VAT &	Mastic			5140 SF							
1 11001 Oub Fliases							mastro		-	0140 01				-			
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Name of Registered Was	te Hauler	L		1	NJDEP	Vaste						_					
Richard Burns & Co					Hauler I	D No.	Waste	and the second	이 이가 선생님 아이킹	s Commun	ity Lar	ndfill					
City, State					1995	0	40 Disposal Date	City, Stat									
Phila., PA							TBD		boro, P <i>i</i>	۵							
	(20)	Title						Dirusi	110,11		Date		-				
Completed By (Print or T Mark H. Griffin	уре)	Title	timat	0.5			Signature	A	H			2	1				
Mark n. Grillin		Est	unat	.01					//		11/1	1	16	>			

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Date of Notification (1) 11/19/16				Building O Delucca		perator	(2)		j Li i	100	2	1 2	Ulb		
Agencies Notified Type Notification			Street A	ddress					l	ASBEST	DS C	ON	180		
EPA Initial Amended		H	City Sta	te, Zip Co	de		5			LI	DENS	NNG			
X DOL Amendment				Haledon		7508									
DOH justification) DCA Cancellation	A 2002			Contact Delucca					Tele	ephone Num	nber				
			FACI	LITY INFO	ORMATI	ON	-								
Name of Facility Where Abatement is Takin Residential Home	ig Place (3)					Тур	e of Facility (4							
Street Address							H	School (K-12 Subchapter	8 (Othe	er than K-12)				
							×	Other (i.e. pretc.)						S,	
City (5) North Haledon							220	2000 - Contra Co	2	f Floors	6	ldg. A 5+/-	ge		
County (6) Bergen		County Code (7) (STATE USE ONLY) Current Use (Prior if being demolis Residential Home							ng demolish	ed)					
Name of Monitoring Firm Hired by Building Competent Supervisor	Owner (8)		ASCN	1 No.				es Abateme		(9)					
Street Address		Street Address 280 N. Midland Ave.													
City, State, Zip Code			City, State, Zip Code Saddle Brook, NJ 07663												
Project Manager for Monitoring Firm			Telephone No. Telephone No 201-600-31							License No 01305	D.				
Start Date (10) 11/29/16	Schedule		Completion Date (11) Name of OSHA Monitor												
Occupancy Status During Abatement (Chee	ck Only Or														
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe: <u>8 A.M to 4 P.M</u>	Period of A nal Facility	fAbatement													
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit				×	N G	lini-Enclosure Glovebag Proc	ntainment with Negative Pressure nclosure ag Procedure empted (*) and Non-Friable Procedure						
	1.	1						ion-Exempled	1 () an	u Non-Friad			ement		
Location of	1	Locati Normal	ly		De	scription	of				-	Ту	pe		
Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Ma	d Sole intena todial S (12)	nce/	y by Asbestos Cont ice/ (i.e. thermal			s insu T, or	ulation,	(\$	mount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure	
	Yes	No	N/A				0						e		
Basement		x				VAT			30	00 SF	x				
Name of Registered Waste Hauler			JDEP V	Vaste	Cubic	Yards		Name of	Registe	ered Landfill					
Newark Carting		F	lauler ID 4509		10000000000000000000000000000000000000										
City, State Newark, NJ					Dispo TBD	sal Date		City, State Bethleh		PA					
Completed by Richard Cristofol	Title Presi	ident				Signature	1	A	>	Da	te /19/1	16			
			1.01.01			401	-	1/							

D&S Proj. #: <u>16-346</u>	90			sbest	NJ os Abatement 60 and 12:120)		EC	2	1 2	V 016	
Date of Notification (1)	Name	of Building Ow	vner/Operator (2	2)							
Agencies Notified Type Notific		e davidow Address					ASBEST(L &
EPA Initial	Street	Address									
Amendment	#: City, S	tate, Zip Code									
DOL Emergence		l Bank, NJ 0	7701								
DOH (including justification	Name	of Contact				Teleph	one Numbe	r			-
DCA Cancellati		se davidow									
		FAG	CILITY INFORM	IATIO	N						
Name of facility where abatemen	t is taking place (3)				Type of Facility	/ (4)				
alyse davidow							pol (K - 12)				
Street Address						A second s	hapter 8 (C r (Private/C				
						Bldgs	s./Homes, e	tc.			
City (5)	County (6)			L Co	unty Code (7)	Square Feet	# of Floor	S	E	lldg. A	ge
					ate use only)	Current Use (Prior if bein	q der	nolist	ied)	
Red Bank Name of Monitoring Firm Hired by	(Bldg, Owner (8)	th	1 4001411	L_							
	Bidg. Owner (0)		ASCM No.		Name of Abatement						
Street Address				_	D & S RESTOR Street Address	ATION, INC.					
					20 California A	ve.					
City, State, Zip Code				_	City, State, Zip Code						
Project Manager for Monitoring Fire	~				Paterson, NJ 07	7503					
r roject manager for morntoring r in	11	Phone Numb	ber		Telephone Number 973-345-8020		License	Num I 169			
Start Date (10)	Sched, Com	pletion Date (1	1)	_	Name of OSHA Mon	itor		107			
11-18-16	11-30-16				D & S Restorati	on, Inc.					
Occupancy Status During Abateme		e)		_	Street Address 20 California Av						
Facility closed/vacated during	g entire period of a	batement.			City, State, Zip Code						
Abatement performed outside Describe:	-	hours-									
Conter-Describe: NORMAL I Scope of Work (check all that appl				-	Paterson, NJ 07	503					
\ge > <u>3</u> sf or > <u>3</u> lf						Full Containment Mini-enclosure Glovebag procedu		press	sure		
$2160 \text{ sf or } \ge 260 \text{ lf}$	Demolition					Non-Exempted (*		riable	proc	edure	
Location of asbestos-containing	Is location normaby maintenance		and manager		- h t	Amount		R e	R e	E n	E
material (acm) to be abated in facility (13)	staff(12)		material (A		sbestos-containing	(Specify	SF or	m o	p a	с	n c
abated in facility (15)	Yes No	N/A	5			LF)		v e	i	a p	L
basement			PIPE INSUI	LATI	ON	20 l ft		Ň	\Box		
				-							
Registered Waste Hauler D & S RESTORATION, INC.	NJDEP Hau 13506	2014 - 21-2015 - 10-201	ubic Yards of W yd.	/aste	Name of Registered TULLYTOWN, I		ECOVERY	<u> </u>			
City, State PATERSON, NJ 07503		Disposal D 11/21/10			City, State						
Completed by (Print or Type)	Title		o Signature		TULLYTOWN,	PA	Date				
BOGDAN JOLDZIC	PRESIDENT			1.4			11/14/2	2016			

Nov 14 2016 04:49PM NJ	Asbestos	s Control	609.63	3.0664		page 1						
11/14/2016 11:46/	4M 973:	3458050			D	&S RESTORATIO		6 (GPAG		a2)/	
DES Proj. #: 16.346)		Notif (Purs	State Ication of As uant to NJA	bes	NJ tos Abstement 80 and 12:120)			0v :	<u>2</u> 1	201	
Date of Natification (1) 111/11/11/116 Agencies Notified Type Notifica		Name of By alyse day	idow	nei/Operator (2	?)			1	V	lec NSI		
DEP Amendment & Amendment & Emergency	-	City, State, J Red Bax	Zip Code	7701				· [
DOH (including justification DCA Cancellation		alyse da					Telephon	a Numbi	10			~
			FAC	ILITY INFORM	ATIC	DN .						
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		0.0					Bidgs./	Homes,	stc.			
City (5)	Cou	nty (6)				unty Code (7) tata use only)	- Square Feet Current Use (Pr				g. Age	
Red Bank Name of Monkoring Firm Hired by	mo	nmouth							ull amore	merre		
reams of monacing Pirm Filted by	Bidg. Own	er (8)		ASCM No.		Name of Abstemen	10.1					
Street Address					_	D & S RESTOR		ł.				-
City, State, Zip Code					_	20 California / City, State, Zip Cod	8				-	-
Project Manager for Monitoring Firm	1	Phi	one Numb	ier	-	Paterson, NJ 0 Telephone Number 973-345-8021			Numbe	PT		
Start Date (10)	Schee	Completio	n Dala (1	ŋ :	-	Name of OSHA Mo	the second se					
11-18-16	11-30					D & S Restors	tion, Inc.					
Occupancy Status During Abeternat	nt (Check o	nly one)			-	Street Address 20 California A	Hamina					
 Facility closed/vacated during Abatement performed outside Describe: 						City, State, Zip Cod	And a second					
DO Other-Describe: NORMAL H					-	Paterson, NJ 0	7503					12
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City, Sunta PATERSON, NJ 07503		the second s	11/21/1	ate		City, State TULLYTOWN	, <u>RESOURCE RE</u>	COAR				
Completed by (Print or Typa) BOGDAN JOLDZIC	Title PRESID	ENT		Signature'		TOUDITOWN	<u></u>	Date 11/14	/ 2016	-	adore ogs	-
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Street Address	N THE FORM AND AND ADDRESS OF A DESCRIPTION					Subchapt	er 8 (Oth	ner ihan K-1			
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BEFERS.						K	ESA	NTIAL	×		With T.S.
Name of Monitoring Firm Hired by B	uilding Owner (8	\$) 	ASCN	I No.		of Abatement C \C Contractin		r (9)			
Street Address					\$	Address Vreeland Ave					
City, State, Zip Code					4	tate, Zip Code and Park, NJ					
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Project Manager for Monitoring Firm		Te	elephor	ne No.	Telept	tone No. 262-5841	and the set of the set	License I 00156	Vo.		
Start Date (10)	Schedul	Te lęd Comp	-		Telept (201) Name	one No. 262-5841 of OSHA Monito ga Environmo		00156	No.		_
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Date of Notification 1) 11 17 16 Agencies Notified 1	ype Notification				Building Öwner	2		a	ASBEST) <u>L </u> {
EPA DEP DOL XX DOL XX DOH DCA	Initial Amended Amendment Emergency justification) Cancellation	(including	[H INAME OF		JE GZZC	N :		7 506	CEN imber	2114	-	4
Name of Facility Where Ab	atamant in Takin	o Olaca (*	1	FACI	LITY INFORMA	TION	Type	of Facility	4)				
Street Address	WE	nana ir	*;					School (K-1 Subchapter		ial buil	dings 3Ida. /		85
City (5) HOWTHOR	3(4							106	2	e.	+ (100	
County (6)	<u></u>		1	County (Code (7) ISE ONLY)		Curri	int Use (Pri	or if being demotis	ned)			
Vassuic Name of Monitoring Firm H	ired by Building	Owner (8)		ASCN				itement Col ontracting			t W Taylord (
Street Address			inden Simon	<u></u>			t Addre	ss and Ave.					
City, State, Zip Code				Of the state of the second	ата ала ала ала ала ала ала ала ала ала	City, S	State, 2	and Ave. ip Code ark, NJ					
Project Manager for Monito	ring Firm		A DESCRIPTION OF THE PARTY OF T	Telepho		(201	hone N)262-	5841	License I 00156	No.			
Start Date (10) 11/28/16 Occupancy Status During J	Abalement (Cher	12	10/14		Date (11)	Ome			ntal Services				
Facility Closed/Vacate Abatement Performed Other – Describe:	d During Entire I	Period of /	Abaten	nent N		280 City, 3	Huyle State, 2	ir St. ip Code	7000			-	
Scope of Work (Check All	That Apply)					Hac	kensa	ick, NJ 07	1000	anan jara da kapan	a - 10 - 10 and		
≥3 sf or 23 H ≥160 sf or 2260 If			Renova Demolit				GI GI	ni-Enclosuri ovebag Pro				ġ.	
			Locati									emen /pe	2
Location o Asbestos-Containing M <u>TO BE ABAT</u> In Facility (13)	ateriai (ACM) <u>ED</u>	Use Ma	Vormal od Sole intenar todial 5 (12) No	ly by nce/	Asbestos Co (i.e. therm surf		Vateria Is inaul NT. or	ation.	Amount (Speaify SF or LF)	Removal	Repair	Encapsulate	Enclosure
BASEMONT					Pipe	ins	ivea	11020	GOLF	1	-		
999 999 99				1	an a					÷			
lame of Registered Waste lewark Carting , Inc.	Hauler		H	JDEP Wi auler ID I 1509		c Yards oste l		province of the server	Registered Landfil Bethlehem La		Cor	е <u>.</u>	
ity, State ewark, NJ	an ann an Anna an Anna Anna Anna Anna A		<u>L</u> `	ne no internet provinsion		pai Daje		City, Stat					
Completed by		Title				28/1 Signature		Bethleh		ale	1		
oseph Vocaturo		Vice	Presid	dent				Vorst	T	11/	17)	16	

B & G proj. #:	2016-165		(pestos	Abatement and 12:120-7)	-	1 DE	E C # 8114	2	<u> </u>	/ E	
Date of Notification (1	1)	1	Name of Buil	lding Own	er/Operator (2))								
111/16			Justin Bo	oose					AS	SBEST		21110		. &
Agencies Notified	Type Notificat	ion	Street Addres	SS					L	CR	21	202.80		
	X Initial													
	Amenda		City, State, Z Glen Ric		07020									
DOH			lame of Con		07026				Telephor	ne Numbe	r			otonosti-
-	Cancella	11							Telepher		1			
			Justin B	oose										
				FAC	ILITY INFORM	ATION								
Name of facility when	re abatement i	s taking pl	ace (3)					Тур	e of Facility	(4) bl (K - 12))			
Justin Boose									=	apter 8 (0		han K	(-12)	
Street Address									X Other	(Private/C	omme			
								Sa	Bidgs.	/Homes, e # of Floo		B	ldg. Ag	je
City (5)		Cou	nty (6)			Cou	nty Code (7)							
Glen Ridge, N	107028	Es	sex			(Stat	te use only)	1.055	rrent Use (P	rior if beir	ng den	nolish	ed)	
Name of Monitoring I					ASCM No.		Name of Abatemen		sidential					
Nume of Montoning .		5.03. 0	- (-)		n/a		B & G Restora							
Street Address							Street Address							
							105 Ryerson							
City, State, Zip Code							City, State, Zip Code Lincoln Park		7035					
Project Manager for N	Anitoring Firm		[Ph	one Numb	Ner.		Telephone Number		1055	License	Num	ber		
Project Manager for W	ionitoning Fini		1	one Num			(973)696-68				0378	Sector -		
Scheduled Start Date	(10)	Schee	d. Completio	n Date (1	1)		Name of OSHA Mo				A122			
11/30/2016		12/	01/2016				B & G Restora	ation, I	nc.					
Occupancy Status Du	ring Abatemer	nt (Check of	only one)	on a surprise of a surface line			105 Ryerson I	Road						
Facility closed/v	acated during	entire per	iod of abater	ment.			City, State, Zip Code	e	1997 (19 <mark>6</mark> - 1999)					
Abatement perf Describe:		of normal	facility hours	S-		_	LincolnPark, N	11070	35					
Other-Describe						-		10 070	155					
Scope of Work (chec						ΧF	ull Containment w/n	oantiwo	processo	Glove	h	record	150	
_	X	Renovatio					lini-enclosure	eyauve	pressure			proce		
✗ > <u>3</u> sf or > <u>3</u> If		≥160 sf or	n normally u	ised solely	/						TR	R	E	
Location of asbestos-conta	ining	by maint	enance/cust			on of as	sbestos-containing		Amount		e m	ep	n c	E n
material to be abated in facility	v (13)	staff(12)	[material ((ACM)	999 - 11 - 94 - 17 - 24 - 18 - 19 - 19 - 19 - 19 - 19 - 19 - 19		(Specify S LF)	SF or	o v	a	a	CL
abated in facility	y (10)	Yes	No	N/A							е	r	p.	
basement (10 loc	ations)			X	thin duct i	nsulat	ion		12 sf		X			
basèment				X	duct sean	ns			10 sf		X	H		
]						븕	H	片	H
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Registered Waste Hau			EP Hauler I	D# C	ubic Yards of V	Naste	Name of Registere	d Landf	511					
B & G Restoratio			19563		1			n Reso	ource & Re	ecovery	Cen	ter		
City, State Lincoln Park, NJ				Disposal E 12/0)1/2016		City, State Tullytown	, PA						
Completed by (Print o		Title			Signature		<u></u>			Date				
Gordana Luna		Secreta	ry/Treasu	rer			Gordana Luna			11/1	6/201	16		

B & G proj. #:	2016-16	6				bes	NJ tos Abatement)-7 and 12:120-7)		Class	D k# 81			1 0	VET
Date of Notification			Nicole Street Add	Rinklin	vner/Operator (2)			1) The and Tanana Community	ASE			CON SINC	TROL &
DOL DOH	Amer	ndment	1000000	lair, NJ C		-		T	elenh	one Num	ber			
DCA	Canc	ellation	Nicole	Rinklin		_		1						
				FAG	CILITY INFORM	ATIC	N		<i>(</i> ,				943	
Name of facility whe	ere abatemer	t is taking	place (3)					Type of	Scho	y (4) bol (K - 1 chapter 8		r than	K-12)	
Street Address								X	Othe	r (Private s./Homes	e/Comr s, etc.			
City (5)		Co	unty (6)				ounty Code (7)	Square					Bldg. /	Age
Montclair, NJ (ssex			(S	tate use only)	reside	ntial	Prior if be	eing de	molis	hed)	<u> </u>
Name of Monitoring	Firm Hired b	y Bldg. Ow	ner (8)		ASCM No.		Name of Abatement C	Contractor	(9)					
Street Address					n/a	_	B & G Restoration	on, Inc.	4					
City State 2: Cada							105 Ryerson Ro	oad			2			
City, State, Zip Code							City, State, Zip Code Lincoln Park, N	J 07035	;					
Project Manager for N	Nonitoring Fir	m	P	none Numb	ber	_	Telephone Number (973)696-6869)	•		se Num 00378			
Scheduled Start Date	(10)	Sche	d. Completi	on Date (1	1)	-	Name of OSHA Monito B & G Restoratio							
11/28/2016			29/2016				Street Address	on, inc.	-					-
Occupancy Status Du							105 Ryerson Ro	ad						
Facility closed/v Abatement perfo	ormed outside	entire per e of normal	facility hou	rs-			City, State, Zip Code			0				
Other-Describe:		and the second second				-	LincolnPark, NJ	07035						
Scope of Work (check Demolition	k ali that appi	y) Renovation 2160 sf or			I	-	Full Containment w/nega Mini-enclosure	ative press	ure I		ebag p friable			
Location of asbestos-contain material to be	ning	Is locatio	n normally i enance/cust		Description	of a	sbestos-containing		ount	:	Rem	R e p	E n c	E
abated in facility	(13)	Yes	No	N/A	material (A	CIMI)		LF)	ecify S	or or	o v	a i	a p	c L
main & laundry roo	and the second se			X	pipe insulati	ion		38 If			e	Ь		
crawl space & ma	in room			×	<u>thin duct</u>			23 s	f		X			
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						_								
Registered Waste Haul B & G Restoration	er 1, Inc.	NJDI	EP Hauler II 19563		ibic Yards of Wa 1	ste	Name of Registered La Tullytown Re	andfill	& Ro	COVOR				
City, State Lincoln Park, NJ			Ľ	Disposal Da 11/29	ate 9/2016		City, State Tullytown, PA			covery	Cent	ei		
Completed by (Print or Gordana Luna	Type)	Title Secretar	y/Treasu	Signature	Gordana Luna Date 11/16/2016									

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

Chk 3(23

Date of Notification (1)						ng Owner/Operator			<i>9</i> [2 1	\overline{N}	7 E
11 /18	/1	6		Pr	inceton l	Univertsity - Offic	e of Design an	d Construction	ŋ	<u> </u>	V	
	e Notification	ı		Stree	et Address	5		IN				
	Initial			20	0 Elm Dr			NO NO)V	21	20	16
	Amended Amendment a	#		City,	State, Zip	Code			2.4	6 E	LU	tor
	Emergency (i		-	Pr	inceton,	NJ 08544						
	justification)	inolaalii	9	Nam	e of Conta	ct		Telephone Num	oer)	SICC	NNT	ROL
	Cancellation			Ro	bert Orte	ego				NSI	NG	
				FA	CILITY II	NFORMATION						
Name of Facility Where Abate							Type of Facility (4)				
Princeton University- E	ingineering	Quad	rang	le			School (K-12)					
Street Address							Subchapter 8	(Other than K-12))			
Olden St							homes, etc.)	ivate and commer	cial c	ouildin	igs,	
City (5)							Square Feet	# of Floors	E	Bldg. /	Aae	
Princeton							•				.9*	
County (6)				Cou	nty Code (7)(STATE USE ONLY)	Current Use (Pric	or if being demolis	hed)			
MERCER							0.5%					
Name of Monitoring Firm Hired	d by Building	Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
ATC Associates Inc.							VIRONMENTAL	, INC.				
Street Address						Street Address		Tanga Parana			1003	
Bromley Corporate Cen	ter-Three T	Terri L	ane			1123 BEAVE	R STREET					
City, State, Zip Code						City, State, Zip Co	ode					
Burlington, NJ 08016						BRISTOL, PA						
Project Manager for Monitoring	g Firm		Tele	ephone	No.	Telephone No.		License No.				
Michael Keehn				19	6-8800	215-788-6040		00509				
Start Date (10)	Sche	duled C	omple	tion Da	ate (11)	Name of OSHA M	onitor					
11 /29 /16		11 /			22.14	BRISTOL EN	VIRONMENTAL	, INC.				
Occupancy Status During Abai	tement (Chec	k only	one)			Street Address						
Facility Closed/Vacated Du	ring Entire Pe	eriod of	Abate	ment		1123 BEAVER	R STREET					
Abatement Performed Outs	ide of Norma	l Facilit	y Hou	rs - Des	scribe	City, State, Zip Co	de					
Time of Abatement:	AM- <u>3:30</u> PM	/	PM- <u>1</u>	2:30AM	N	BRISTOL, PA						
Scope of Work (Check all that	apply)										. 110	
⊠ <u>></u> 3 sf or >3 lf		🖾 Re	novati	ion			ainment with Nega	tive Pressure				
] ≥160 sf or ≥260 lf			molitic			☐ Mini-Encl ⊠ Glovebag	Procedure					
					1		mpted (*) and Non-	Friable Procedure	9			
			Locat						Ab	patem	ent T	уре
Location of Asbestos-Containing Mater	ial (ACM)	Use	d Sole	ely by	Acho	Description of stos Containing Mat		Amaguna (Re	Re	Щ	Щ
TO BE ABATED		Ma	intena	nce/		stos Containing Mat ., thermal systems i		Amount (Specify	Removal	Repair	Icar	1clo
IN Facility		Cus	todial (12)	Staff?		surfacing, VAT,	or	SF or LF)	val	-	Encapsulate	Enclosure
(13)		Yes	No	N/A	-	other miscellaned	ous)				ate	
laintenance Shop closet					Pipe Fit	tings		9 LF				
				-	i ipe i n			J LL				
ame of Registered Waste Hau	uler	1	N	JDEP	Vaste	Cubic Yards of	Name of Registe	red Landfill				
BRISTOL ENVIRONMEN	TAL, INC.			auler II	D No.	Waste		NORTH LANDF	ILL			
ity, State		.		18706)	Disposal Date	City, State					
BRISTOL, PA 19007						Elopoodi Date		LE, PA 19067				
ompleted By (Print or Type)	Title					Circuit	MONTOVILI					
Brian Scafiro	1.556905	; stimat				Signature	D. 1	Date		10	11	
B-41 0		Sund	.0			Buan	Scafiro	190 1	(-1	18-	16	

ASB-41 MAY 11 BS16140

Unk. Siai

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

Date of Notification (1) 11/18/2016								Owner / Operato		2)	ME	G			V I	
Agencies Notified	Type Notific						ress				1 St					
EPA								EAN ROAD				SECV	0	1 0	016	
DEP	🛛 Initia			1.			& Zip C					56 (7	2	1 4	UIU	
DOL	Ame							NT NJ 08742				1= 1				
DOH		rgency cellation		1.1.1.1							ASB	Tele	pho	ne h	http	er-a
		ellation			11121313	- 10.820 V V	YLOR	8						511.27		<u> </u>
					FAC	CILI	FY INF	ORMATION								
Name of Facility Wh		•	lace	(3)				Type of Facil								
POINT PLEASAN	I CENTRA	L OFFICE						School (14 (0)					
Street Address										8 (Other than ivate & comn		ingo	hom	~~ ~	ote)	
1032-1034 OCEA	N KUAD							Square Feet		# of Floor		Bldg		_	stc.)	
City (5)		County (6)		oun	ty C	ode	(7)	21800		# 0111001	2	Biug	. Ayı	6		
POINT PLEASAN	T	OCEAN		Jun	Ly C	oue	(r)			or if being der						
PUINT PLEASAN	1	OCEAN						COMMUNIC			nonsneu)					
Name of Monitoring	Firm Hirod h	Ruilding Own	20r (8	1		IAC	CM No.				or (0)					_
USA ENVIRONM						140		BRISTOL								
Street Address		THOULINE IT	,			-		Street Addres								
8436 ENTERPRIS	SE AVE							1123 BEAV		STREET						
City, State & Zip Co	de							City, State &	Zip	Code						
PHILADELPHIA F	and the second se							BRISTOL, F								
Project Manager for	Monitoring F	irm	Tele				ber	Telephone N		er	License					
MARK JENKINS			215					215-788-604	1000			0	050	9		
Scheduled Start Dat		Scheduled Cor						Name of OSH BRISTOL E								
NOVEMBER 2 Occupancy Status E		NOVE		_	29,	2010	0	Street Addres	the second second		AL INC					
Facility Clos	ed/Vacated I	During Entire P	Period	of /	Aba	teme	ent	1123 BEAV		STREET						
		utside of Norm						City, State &								
Describe:							10)	BRISTOL, F								
Facility Occu	upied During	Abatement (74	AM -3	:30	PM)										
Scope of Work (Che	eck all that ap	oply)							_							
			5-7								inment with	Nega	ative	Pres	ssure	
≥3 sf or ≥3 lt			M			ovati			\square	Mini-Enclo						
≥160 sf ≥260	JIT			L	Jem	olitic	n		Н		Procedures		iabla	Dro	codu	-
	cation of		le	Loc	catio	on	-	Description		NOII-Exeri	Amount				ent T	
	os-Containin	a				Ised		Asbestos-Con		ing	(Specify	-	Tiba			ypc
Mate	erial (ACM)			Sole				Material (A			SF or LF)		7		Ш	m
	BE ABATED		Mai					(i.e., thermal s				S	lem	Repair	cap	ncls
11	1 Facility (13)		Cus		ai 3 2)	lall?		nsulation, surfact or other miscell					Remova	air	Encapsulate	Enclsoure
	()		Yes	_		N/A							_		te	CD
BASEMENT MEC	HANICAL E	EQUIP RM.		Г				VAT/MAS	TIC		26 SF		\boxtimes			
				T	1											
				Ī												
Name of Registered	Waste Haul	er						Cubic Yards	Na	me of Regist	ered Landfil	1				
						390	D No.	of Waste 1	MI	NERVA LAI						
SERVICE TRANSPORT GROUP, INC. 209 City, State								Disposal Date	-	y, State						
NEW CASTLE, DE 19720								TBD		AYNESBUR	G, OH 446	888				
							Title Signature Date									
PATRICK T. DeC				Estimator Patrick T. DeCard / Jul 11/18/16												
								PAMICE	_ [, pla	w/ yu	-				
											. /					

2000							1	ME	G	F		/ Pri	t Form
CKIOM		IFICATION	ate of New . I OF ASBES to NJAC 8:0	STOS ABAT			gan mpomoto da tito a como		101	2 1	20	16	
Date of Notification (1) 11/18/2016		100 Contraction 100 Contractio 100 Contraction 100 Contraction 100 Contraction 100 Contraction	f Building Ov nantville P	and the second			Commi	ssion					
Agencies Notified Type Notification		Street A	ddress Westfield	Avenue				ASBE					. &
X EPA Initial X DEP Amended X DOL Amendment	щ	City, Sta	ate, Zip Code	9			i.						
X DOL Amendment X DOH justification)			sauken, N f Contact	J 08110				Telephon	e Num	nhar	e est		
DCA Cancellation			Kuchera	MATION									
Name of Facility Where Abatement is Taking	g Place (3)	FAC	LITY INFOR	MATION	1.	Туре с	of Facility (4)					
Merchantville Pennsauken Water	Commissio	n			[chool (K-1						
Street Address								8 (Other than private & com			dings,	home	s,
4400 Frosthoffer Avenue City (5)					1		tc.)	# of Floor			lldg. A		
Pennsauken					- 1	2978		1	3		52	90	
County (6) Camden			Code (7) USE ONLY)				nt Use (Pri er pump	or if being der house	molish	ed)			
Name of Monitoring Firm Hired by Building		ASC	/ No.		me o	f Abate	ement Cor	ntractor (9)					
Environmental Testing Consultants	S	n/a Silt Asbes Street Addres						ement LLC					
413 N. Black Horse Pike							s eral Stree	et					
City, State, Zip Code							o Code						
Runnemede, NJ 08078							VJ 0810						
Project Manager for Monitoring Firm Howard Zenobi		Telepho 856 4	ne No. 82 1311			one No 30 32		Dice 013	nse No 303) .			
Start Date (10) 12/03/2016	Scheduled (12/04/20		Date (11)		Name of OSHA Monitor Self monitor								
Occupancy Status During Abatement (Chec						ddress							
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe:				City	, Sta	ate, Zip	o Code						
Scope of Work (Check All That Apply)													
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		ovation Iolition			X	Mini Glov	i-Enclosure vebag Proe	cedure					
	lala	cation				NON	I-Exemple	d (*) and Non	-rnabi	PIO	Abate		
Location of	Norr	mally		Descript	tion c	of				-	Ту	pe	
Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Mainte Custodi	olely by enance/ al Staff? 2)	(i.e. th	s Containin nermal syste surfacing, other misce	ems i VAT	insulat , or		Amoun (Specify SF or LF	1	Removal	Repair	Encapsulate	Enclosure
	Yes N	lo N/A										e	
Pump house	x		therm	al systen	ns ir	nsula	tion	32 LF		x			
	+												
	+	_											
Name of Registered Waste Hauler		NJDEP V	/aste	Cubic Yard	s		Name of	Registered La	andfill				
Robinson Waste Disposal		Hauler ID 17304		of Waste 1				Landfill					
City, State				Disposal Da 12/05/16			City, Stat						
Voorhees, NJ Completed by	Title	12/05/16 Morrisville, PA											
Jeff Yekenchik	Owner	2 2 2 2 3 2 3 2 3 2 3 2 3 2 3 2 3 2 3 2					1		1.0.0		201	6	

CVSM.	б N	OTIFI (State of New Jersey FICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)							IJ		
Date of Notification (1)	18 / 16			ame of NJTA	Building C	wner/Operator (2 / Job #1611-50) 86 Check #87	75 NOV	21	201	6	P
	Type Notification			treet Ad				ASBEST	OS CC	NTF	ROL	8
🖾 EPA	🛛 Initial				ox 5042				CENSI	NG		-
	Amended Amendment #		C		e, Zip Coo							
DHSS	Emergency (incl	udina				NJ 07095		Telephone Numh	er			-
DCA (NJAC 5:23-8)	justification)	uuuug	N		Contact							
(145/10 0.20 0)	Cancellation			John	Hall							-
				FACI	ITY INF	ORMATION						_
Name of Facility Where Al	hatement is Taking	Place (3)				Type of Facility ((4)				
	Datement io Talang	(-	·				School (K-12) Other then K 12	`			
Interhcange #5							Subchapter &	(Other than K-12) rivate and commer	, cial build	lings,		
Street Address							homes, etc.)					
Milepost 44							Square Feet	# of Floors	Bldg	. Age		
City (5)							1.0					
Burlington				Quest	Cada (7)/	STATE USE ONLY)	Current Use (Pr	ior if being demolis	shed)			
County (6)				County	Code (/)(STATE USE UNEI	ounoin our (* ·					
Burlington						Name of Abatem	ant Contractor (9)					
Name of Monitoring Firm	Hired by Building O	wner (8)	A	SCM N	0.							
Saban Engineering						AbateTech, I	nc.					_
Street Address						Street Address	DO D 05					
201 Stuyvesant Ave	enue						e. PO Box 25					-
City, State, Zip Code						City, State, Zip C						
Lyndhurst, NJ 0707	'1					Lumberton,	NJ 08048					
Project Manager for Mon			Telep	hone N	0.	Telephone No.		License No.				
Stephen Pharai	lioning third		20	1-299-7	7705	609-265-210		00529				
	Sched	uled Co				Name of OSHA	Monitor					
Start Date (10) 11 / 28 /		<u>1</u> /				EMSL Analy	tical					
			5			Street Address						
Occupancy Status During	g Abatement (Check	ind of A	hotor	ant		200 Route 1	30 North					
Facility Closed/Vacate Abatement Performed	ed During Entire Per	Facility	Hours	s - Desc	ribe	City, State, Zip C						
Time of Abatement:	AM- PN	1 аошту Л/	PM-	A	M	Cinnaminso	n. NJ 08077					
Scope of Work (Check a	II that apply)					🗌 Full Co	ntainment with Ne	egative Pressure				
⊠ ≥3 sf or ≥3 lf		🛛 Rer	novatio	on		Mini-Er	nclosure ag Procedure					
☐ ≥160 sf or ≥260 lf		Der	nolitio	n		Non-Ex	empted (*) and N	Ion-Friable Proced	ure			
		1	Lengt	-		23.100.1			Ab	ateme	ent Ty	уре
			Locati Iormal			Description	of		R	Re	Щ	Щ
Location Asbestos-Containing		Use	d Sole	ly by	Asbe	stos Containing N	Aaterial (ACM)	Amount (Specify	Removal	Repair	Encapsulate	Enclosure
Aspestos-Containing TO BE AB			intena	nce/ Staff?	(i.e	e., thermal system surfacing, VA	s insulation,	SF or LF)	oval	-	luso	sure
IN Faci	lity	Cusi	(12)	Starr		other miscellar	neous)				ate	
(13)		Yes	No	N/A	1					-		
			-		Double	layer floor tile	& mastic	60 SF				
Equipment					Double	ayor noor inc						
							i.					
							E-SI					
		-	-									
					Macha	Cubic Yards of	Name of Re	gistered Landfill				
Name of Registered Wa	aste Hauler			JDEP Hauler I		Waste		.S. Landfill				
AbateTech, Inc.			1	1875		12	a section and a section of the					
City, State						Disposal Date	City, State	m DA				
Lumberton, NJ						11/29/16	Tullytow	п, га	Data			-
Completed By (Print or	Type) Tit	le				Signature			Date	110	1.	1.
Gwendolyn Trum	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		ions	Coord	linator	Cr	MA		()	12	11	6
Gwendoryn nunn						A						

CKS	173		NOT			ON		BE	Jersey STOS ABA ⁻ 3:60 and 5:1		REC			M] [[F
Date of Notification (1)					Na	ame	of Buildin	g Ov	wner/Operator	(2)	III NO)	1	20	16		2
/	18 /	16	i			NJT	ΓA	1	Job #1611-5	086 Check #8	773						
Agencies Notified	Type Notific	cation			St	reet	Address				ASBES	TOS	CC	NT	ROL	8	
EPA	Initial					PO	Box 504	2				ICEN					_
	Amende Amendr				Ci	ty, S	State, Zip (Code	9								
	Emerger			a	1	Wo	odbridge	e, N.	J 07095								
(NJAC 5:23-8)	justificat	tion)		0	Na	ame	of Contac	t			Telephone N	umber					
	Cancella	ation				Joh	n Hall										
						FAC	CILITY IN	IFO	RMATION								
Name of Facility Where	Abatement is	Taking	g Place	e (3)						Type of Facility	(4)						1
Interhcange #4										School (K-12		10)					
Street Address										Other (i.e., p	8 (Other than K private and com	-12) mercia	l bu	ilding	IS.		
Milepost 34.6, NJ-7	3									homes, etc.							
City (5)										Square Feet	# of Floors		Blo	lg. A	ge		1
Camden																	
County (6)					C	oun	ity Code (7	7)(ST/	ATE USE ONLY)	Current Use (Pr	ior if being dem	olishe	d)				1
Camden																	
Name of Monitoring Firm	Hired by Buil	lding C	Dwner	(8)	ASC	CMI	No.	Na	me of Abatem	ent Contractor (9))						1
Saban Engineering								1	AbateTech, I	nc.							
Street Address								Str	reet Address								1
201 Stuyvesant Ave	enue							3	30 Maple Ave	e. PO Box 25							
City, State, Zip Code								Cit	y, State, Zip Co	ode							
Lyndhurst, NJ 0707								L	_umberton, I	NJ 08048							
Project Manager for Mon	itoring Firm			1.000	elepho			Te	lephone No.		License No.	1		and from a second			
Stephen Pharai				1			-7705		309-265-2107		00529				00000		Y
Start Date (10) 11 / 28 /							te (11) 16		me of OSHA N								
						' _	10		EMSL Analyt	ICal							
Occupancy Status During	and the second second second							10100	eet Address								
Facility Closed/Vacate Abatement Performed							oribo		200 Route 13								
Time of Abatement:	_AM	PN			M-		AM	1.000	y, State, Zip Co								
Coore of Work (Charle of								C	Cinnaminsor	i, NJ 08077							
Scope of Work (Check al	i that apply)								T Full Cont	ainment with Neg	ative Pressure						
$\square \ge 3 \text{ sf or } \ge 3 \text{ lf}$									Mini-Enc	losure							
⊠ ≥160 sf or ≥260 lf			De De	emoli	tion				Glovebag	g Procedure mpted (*) and No	n-Friable Proce	dure					
			ls	Loc	ation				Read				Aba	teme	ent Ty	vpe	
Location	of	204		Norm			10.00		Description o	f			-				
Asbestos-Containing I TO BE ABA		1)			blely b				Containing Ma ermal systems		Amount (Specify		Removal	Repair	Encapsulate	Enclosure	
IN Facilit			Cus		I Staff	f?	(1.0		surfacing, VAT,		SF or LF)		Val	۳.	lnsd	sure	
(13)				(12				ot	her miscellane	ous)					ate	Û	
T L			Yes	No	-	/A a	B 11		<i>a</i>		750.05	5		_			
Throughout							Double	laye	er floor tile &	mastic	750 SF	-					
												L			Ц		
]						[
]						0					
Name of Registered Wast	te Hauler				NJDE			100000	oic Yards of	Name of Regis	tered Landfill						
AbateTech, Inc.					Haule 187	r ID 750	Second State of the	Wa 1	ste 6	G.R.O.W.S	. Landfill						
City, State				1	101	50			posal Date	City, State							
Lumberton, NJ								1	2/2/16	Tullytown,	PA						
Completed By (Print or Ty	vpe)	Title							Signature	V		Date		725-2-	1		
Gwendolyn Trumbe	tti	O	perati	ions	Coo	rdir	nator		(m	M		l	1/	18	111	0	
								_	1 1	Page The second second			-11				

CK8T	74	I	NOT		ATIO	N OF A	New Jersey SBESTOS ABA JAC 8:60 and 5:1				[V	
Date of Notification (1) 11 /	18 /	16				e of Build I TA	ing Owner/Operator (/ Job #1611-5	(2) 086 Check #8		∀ 2	1 2	016	T
Agencies Notified	Type Notific		-			t Address			ASBEST	OSC	ON	TRO	1 &
⊠ EPA	Initial	ation) Box 50	Stars.			ICEN			
🖾 DOLWD	Amende				City,	State, Zip	Code						
	Amendm Emerger				100.000		ge, NJ 07095						
(NJAC 5:23-8)	justificati		Juania	9	Nam	e of Conta	act		Telephone Num	ber			
	Cancella	ition			Jo	hn Hall			-				
					FA	CILITY	INFORMATION						
Name of Facility Where A	Abatement is	Taking	Place	9 (3)				Type of Facility					
Interhcange #7A								School (K-12	<u>2)</u> 8 (Other than K-12	2)			
Street Address								Other (i.e., p	rivate and comme	rcial b	uilding	gs,	
Milepost 60 I-195								homes, etc.)	-		Inter A		
City (5) Allentown								Square Feet	# of Floors	B	ldg. A	ge	
County (6)					Cou	ntv Code	(7)(STATE USE ONLY)	Current Lise (Pr	ior if being demoli	shed)			
Monmouth						, 0000	(. Northie one offer)	Sanone Obe (F1	ier in soning domon				
Name of Monitoring Firm	Hired by Buil	ding O	wner ((8)	ASCN	No.	Name of Abatem	ent Contractor (9)					
Saban Engineering		0	AbateTech, Inc.										
Street Address							Street Address						
201 Stuyvesant Ave	enue						30 Maple Ave	e. PO Box 25					
City, State, Zip Code							City, State, Zip Co	ode					
Lyndhurst, NJ 0707							Lumberton, I	NJ 08048					
Project Manager for Moni	itoring Firm			10000	lephone		Telephone No.	1	License No.				
Stephen Pharai				1	201-299		609-265-2107		00529				
Start Date (10)						ate (11)	Name of OSHA M						
					9_/	10	EMSL Analyt	Ical					
Occupancy Status During			1990 - 1997		omont		Street Address	0 North					
Facility Closed/Vacate Abatement Performed	이번 전 것이 없는 것을 통하는 것이 없다. 것을					scribe	200 Route 13						
Time of Abatement:				_PN	- Contract Contraction	AM	City, State, Zip Co Cinnaminsor						
Scope of Work (Check all	that apply)						onnamioor	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					_
		,						tainment with Neg	gative Pressure				
☐ ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			⊠ Re □ De				Mini-Enc Glovebag	g Procedure					
									n-Friable Procedu	1			
Location	of			Loca			Description o	,£		-		ent T	
Asbestos-Containing N		1)	Use	d So	lely by		estos Containing Ma	terial (ACM)	Amount	Removal	Repair	Encapsulate	Enclosure
<u>TO BE ABA</u> IN Facilit					ance/ Staff?	(i	e., thermal systems surfacing, VAT,		(Specify SF or LF)	lova	air	apsu	osu
(13)	.,			(12	-		other miscellane		0.0167	-		ilate	9
			Yes	No	N/A								
Throughout					\square	Floor	tile & mastic		950 SF	\square			
	S												
Name of Registered Wast	e Hauler			-	NJDEP	Waste	Cubic Yards of	Name of Regis	tered Landfill				
AbateTech, Inc.					Hauler I	D No.	Waste	G.R.O.W.S					
City, State					1875	0	20 Disposal Date	City, State					
Lumberton, NJ							12/9/16	Tullytown,	PA				
Completed By (Print or Ty	rpe)	Title					Signature		Da	ite i	3		
Gwendolyn Trumbel			erati	ons	Coord	inator	X X	MM		tili	811	10	
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