State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2) Date of Notification (1) William Gardner 11/14/2018/ Street Address Agencies Notified Type Notification × **EPA** Initial City, State, Zip Code DEP Amended Maplewood, NJ 07040 × Amendment # DOL Emergency (including Name of Contact Telephone Number DOH justification) William Gardner Cancellation DCA FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) House School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e. private & commercial buildings, homes, × etc.) # of Floors Bldg. Age Square Feet City (5) N/A N/A N/A Maplewood Current Use (Prior if being demolished) County Code (7) County (6) (STATE USE ONLY) House Essex Name of Abatement Contractor (9) ASCM No. Name of Monitoring Firm Hired by Building Owner (8) D&S Abatement, INc. Street Address Street Address 11 Rosengren Avenue City, State, Zip Code City, State, Zip Code Totowa, NJ, 07512 Telephone No. Telephone No. License No. Project Manager for Monitoring Firm 973-345-8685 01311 Name of OSHA Monitor Start Date (10) Scheduled Completion Date (11) D&S Abatement, Inc. 11/27/2018 11/26/2018 Occupancy Status During Abatement (Check Only One) Street Address 11 Rosengren Avenue Facility Closed/Vacated During Entire Period of Abatement City, State, Zip Code Abatement Performed Outside of Normal Facility Hours Other - Describe: occupied Totowa, NJ, 07512 Scope of Work (Check All That Apply) Full Containment with Negative Pressure ≥3 sf or ≥3 lf Renovation × Demolition Mini-Enclosure ≥160 sf or ≥260 lf X Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Type Normally Description of Location of Used Solely by Asbestos Containing Material (ACM) Amount Asbestos-Containing Material (ACM) Encapsulate Maintenance/ (i.e. thermal systems insulation, (Specify Removal TO BE ABATED Repair Custodial Staff? surfacing, VAT, or SF or LF) In Facility (12)other miscellaneous) (13)Yes No N/A 125 LF X Pipe Insulation Basement NJDEP Waste Cubic Yards Name of Registered Landfill Name of Registered Waste Hauler

of Waste

Disposal Date

Signature

TBD

TBD

Hauler ID No.

20996

Project Manager

Title

Date

11/14/2018

Waste Management of PA

City, State

Morrisville, PA

Ned Joksimovic

City, State

Totowa, NJ

Completed by

D&S Abatement, Inc.

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

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

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Date of Notification (1) 11/14/2018 Check #3281			of Building ed Heart		perator (2)		NOV 2	1 0	010		
Agencies Notified Type Notification	n	Street	Address					NUV Z	1 4	2018		
EPA Initial Amended			Bayview / ate, Zip Co	200 120 July 100			7	****			an ²	
DOL Amendme	nt # y (including		y City, N		5		*	1				
DOH justification Cancellation	n)	Name o	of Contact				100000	ephone Nu 1-410-81				
Cancellati)II		ILITY INFO	OPMATIC	NA.		20	1-4 10-0 1	24			
Name of Facility Where Abatement is Tak	ing Place (3)	1 40	ILIT INIT	DRWATIC		ype of Facility (4)					_
Sacred Heart School					D	School (K-1	2)					
Street Address						Subchapter	8 (Othe					
183 Bayview Avenue						Other (i.e. p etc.)	rivate 8	& commerci	al buil	dings,	home	es,
City (5) Jersey City			100000000000000000000000000000000000000			quare Feet 0,000	# of	Floors	1000	Bldg. A	ge	
County (6)		County	Code (7)			Current Use (Pric	100	ng demolisi		- O		
HUDSON			USE ONLY,		_ 8	School						
Name of Monitoring Firm Hired by Building N/A	g Owner (8)	ASCI	M No.			Abatement Con rvices Corp	itractor	(9)				
Street Address					Street Ac 426 69	ddress oth Street						
City, State, Zip Code						e, Zip Code berg, NJ 070	93					
Project Manager for Monitoring Firm		Telepho	one No.	\neg	Telephor	3.5.28		License N	0.			
Start Date (10)	Scheduled	Completion	Date (11)			OSHA Monitor		9.00.				
11/14/2018	11/15/20	18				as above						
Occupancy Status During Abatement (Ch	- 5				Street Ad	Idress						
Facility Closed/Vacated During Entire Abatement Performed Outside of No Other – Describe: Starting at 4 PM	Period of Aba rmal Facility Ho	atement ours			City, Stat	e, Zip Code						-
Scope of Work (Check All That Apply)												
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		cation								Abate	ment pe	į
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Gina Betances	Office N	Manager				Lluas-		1	1/14/	2018		

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Date of Notification 11/15/18	(1)			Name o Diana		Owner/Operator (2)				1601				
Agencies Notified EPA	Type Notification Initial			Street A									8	-
□ DEP ☑ DOL	Amended Amendmen	t#			te, Zip Co nfield. N	de NJ 07003								13
⊠ DOH	Emergency justification	(including	=		f Contact				Telephone Number	NOV 2 1	20	18		
□ DCA	☐ Cancelation				FA	CILITY INFORMAT	ION		1				-	
	ere Abatement is Taking f	Place (3)					Туре о	of Facility (4)					7	
Residence					18			School (K-1	ility (4) hool (K-12) bchapter 8 (Other than K-12) her (i.e. private & Commercial buildings, homes, etc.) t # of Floors		9			
Street Address										7	ies, e	tc.)		
City (5) Bloomfield, NJ	07003						Square 3,872		# of Floors					
County (6) Essex					County C	Code (7) JSE ONLY)	Curren	2.5	ing demolished)					
Name of Monitoring	Firm Hired by Building O	wner (8)	901			ASCM No.	Name	of Abatement C	ontractor (9)					
							Unice	orn Contrac	ting Corp.		76			
Street Address								Address						
								/illow Way						_
City, State, Zip Code							1	dland Dock	NI 07424					
Project Manager fo	Monitoring Firm				Telepho	ne No	1000	one No.	143 07424	License No.		a company		_
Project Manager 10	WOINCOINIG THAT				Гегерио		and in	333-9176		The second second second				
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Occupancy Status Di	uring Abatement (Check C	Only One)					Street	Address						
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The same of the sa	nt Performed Outsid		Facility I	Hours			1000000	ate, Zip Code						
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Completed by	and the second s		Title					Signature	// 1	1	1	5		
Zhivko Nikolov			Presid	ent				1 /A	1/1		11/	15/1	8	



Chech 4840

Date of Notification (1)			Name	of Building Owner	Operator (2)	negri	101				
11-14-18			17		DKA				(i)	1777		8.
Agencies Notified Type Notificatio	n		Street	Address					. 9		42	
☐ EPA ■ Initial												
DEP				otate, Zip Code					NOV	7	1 2	018
				RADELL	_, N	J 070	649					2007
□ DCA justification □ Cancellation	1)		-	of Contact				ephone Nur	nber			
La Carcenano	п		4	000	ICA				_			
Name of Facility Where Abatement is Taking	Place (3)		PAC	ILITY INFORM	ATION	Type of Facility	(4)			** ***		
J. BUDKA							1.5					
Street Address						☐ School (K-		than K-12)				
				* * .		Other (i.e.	private &	commercia	build	ings, l	iomes,	, etc.)
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ORADELL						2400	" -	7		- 1		25
County (6)	18-10-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-		County	Code (7)		Current Use (Pri	or if being	demolishe	1)	16	yr	
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Name of Monitoring Firm Hired by Building (Owner (8)		ASC	M No.	Name	of Abatement Con						
Street Address				77	Bes	t Remova	l In	2				
3400					Street	Address			11			
City, State, Zip Code					450	South R	iver	Stree	et			
					City, S	tate, Zip Code						
Project Manager for Monitoring Firm	70	-	Telepho	na No	Hack	censack,	NJ (7601				
			retepito	110.110.		one No.		License No				
Start Date (10)	Scheduled	Com	pletion D	Pate (11)	201 -	329-7442 of OSHA Monitor		0038	8			
11-27-18	11-	- 2		18	lane.							
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- Common Odeside of Normal	Facility Hou	ITS.			City, St	ate, Zip Code						
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TO BE ABATED In Facility	Custo	ntenar	taff?	(i.e. thermal sys	tems insula	tion, surfacing		ount ecify	R		En	m
(13)		(12)		other	VAT, or miscellane	one) .		r LF)	Remova	Repair	Encapsulate	Enclosure
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lackensack, NJ 07601					al Date	City, State				20000		
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Joseph Vocaturo	, Vice	Presk	dent	No office and the second		b. Von	e ala	ري		11/1	4/18		

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Date of Notification (1) 11/19/2018									Γerminals	- Eag	le Point			., %	
Agencies Notified X EPA		1		The first contract of the		Route	130				1	101	2 1	2018	3
EPA DEP DOL	Amended Amendmen			Total Environmental Solutions Street Address 1005 St Georges Lane City, State, Zip Code Landenburg, PA 19350 Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Cation mally colety by mance/ al Staff? 2) Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Street Address 1005 St Georges Lane City, State, Zip Code Landenburg, PA 19350 Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Type Though a line of the procedure Republic of the procedure Aspectify SF or LF) SF or LF) Though a line of the procedure o											
DOH DCA	justification)	9	E 2000		rn	Marketing & Terminals - Eagle Point Facility te 130 NOV 2 1 2018 Telephone Number 856-853-3155 ATION Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) MA Current Use (Prior if being demolished) Oil Refinery Name of Abatement Contractor (9) Brand Energy Services LLC Street Address 740 Veterans Drive City, State, Zip Code Swedesboro, NJ 08085 Telephone No. 856-467-2850 Na License No. 01009 Name of OSHA Monitor Total Environmental Solutions Street Address 1005 St Georges Lane City, State, Zip Code Landenburg, PA 19350 Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Description of ontaining Material (ACM) Amount all systems insulation, (Specify Removed Procedure) Non-Exempted (*) and Non-Friable Procedure Description of ontaining Material (ACM) Amount All systems insulation, (Specify Removed Procedure) Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and No								
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City, State, Zip Code Landenburg, Pa 19	350									8085					
Project Manager for Mon Ed Igelesias	itoring Firm						Teleph	none N	lo.			No.			
Start Date (10) 11/20/2018*				mpletion			Name	of OS	HA Monitor						
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TO BE ABA In Facili	ATED	Ma Cusi	intena todial ((12)	nce/ Staff?		therma surfa	al systems acing, VA	insula F, or		(S	pecify	Removal	Repair	Encapsulat	Enclosure
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City, State Camden NJ								ş			n, NJ				
Completed by Charles J Perri		Title Proje	ct Ma	nager			Signature	0					2018		
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) MERCK SHARP & DOHME CORP. Date of Notification (1) Street Address /18 10 126 E. LINCOLN AVENUE, P.O. BOX 2000, RY28-414 Type Notification Agencies Notified City, State, Zip Code Initial Notification RAHWAY, NEW JERSEY 07065 Amended Notification DEP DOL Cancellation Telephone Number On Hold Name of Contact DOH EMERGENCY NOTIFICATION PATRICIA JOHNSON 732-594-7746 DCA **FACILITY INFORMATION** Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Subchapter 8 (Other than K-12) MERCK SHARP & DOHME CORPORATION Other (ie. private & commcl. bldgs., homes, etc.) # of Floors Bldg. Age Square Feet Street Address 39.400 2 126 EAST LINCOLN AVENUE - BUILDING 80 M Current Use (Prior if being demolished) County Code (7) County (6) City (5) RESEARCH LABORATORY AND OFFICE FACILI (STATE USE ONLY) UNION RAHWAY Name of Abatement Contractor (9) ASCM No. Name of Monitoring Firm Hired by Building Owner (8) PAR ENVIRONMENTAL CORPORATION ENVIRONMETAL HEALTH INVESTIGATIONS, INC. 104 Street Address Street Address 313 SPOOK ROCK ROAD 655 WEST SHORE TRAIL City, State, Zip Code City, State, Zip Code SUFFERN, NEW YORK 10901 SPARTA, NEW JERSEY 07871 License Number Telephone Number Telephone Number Project Manager for Monitoring Firm 845-369-7500 1101 973-729-5649 WILLIAM S. KERBEL, CIH Name of OSHA Monitor Sched. Completion Date (11) Expected State Date (10) AMERISCI LABORATORIES INC #11480 /19 5 / 30 /18 10 / Year Day Year Day Month Street Address Occupancy Status During Abatement (Check only one) 117 EAST 30TH STREET Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe: City, State, Zip Code MONDAY -FRIDAY 7AM-3:30 PM Other - Describe: NEW YORK, NEW YORK 10016 Full Containment with Negative Pressure Scope of Work (Check all that apply) Mini Enclo, Renovation Demolition Glovebag Procedure >3SF OR LF Non-Friable Procedure >160 SF OR 260 LF Abatement Type Description of Asbestos-Location of Is Location Amount **ENCAPSUL ENCLOSUR** Containing Material (ACM) normally used REMOVAL REPAIR Asbestos-containing (Specify (ie. Thermal systems solely by Material (ACM) insulation, surfacing, VAT, SF or LF) Maint/Custodial TO BE ABATED or other miscellaneous) Staff (12) in Facility (13) Yes No N/A 1.100 SF **ROOR TAR & FLASHING** ROOF LOWER EAST/WEST SIDE

Cubic Yards of Waste

Signature

Disposal Date

10/22-5/30/19

NJDEP Waste

15939

DIRECTOR OF OPERATIONS

Hauler ID No.

Name of Registered Waste Hauler

FREEHOLD CARTAGE, INC.

FREEHOLD, NEW JERSEY

BENJAMIN SANCHEZ

Completed by (Print or Type)

825 HIGHWAY 33

City, State

Name of Registered Landfill

MONTGOMERY, PA 17752

City, State

447 ALEXANDER DRIVE/ROUTE 15

LYCOMING COUNTY RESOURCE MANAGEMENT SE

Date

State of New Jersey

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A DOLL On Ho	ellation					of Contact		Telephone N 732-594-774	Number 16		- 1		
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DCA EMERCENCY NOTIFICATION PATRICIA JOHNSON 732-594-7746					Nar	me of	Contact		Telephone Num	ber .			
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Name of Monitoring Firm Hired by Building Owner (8) ENVIRONMETAL HEALTH INVESTIGATIONS. INC. Street Address 855 WEST SHORE TRAIL City, State, 21p Gode SPARTA, NEW JERSEY 07871 Project Manager for Monitoring Firm WILLIAM S. KERBEL, CIH 973-729-5649 Superson, New Jersey 07871 Sched. Completion Date (11) 101 102 110 101 102 110 101 102 110 101 102 110 101 101												EACII	.
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Scope of Work (Check all that apply) Demolition 33SF OR LF X >160 SF OR 260 LF Location of Asbestos-containing Material (ACM) TO BE ABATED in Facility (13) ROOF LOWER EAST/WEST SIDE Name of Registered Waste Hauler FREEHOLD CARTAGE, INC. 825 HIGHWAY 33 Name of Registered Waste Hauler FREEHOLD CARTAGE, INC. 825 HIGHWAY 33 Name of Registered Waste Hauler FREEHOLD CARTAGE, INC. 825 HIGHWAY 33 Name of Registered Waste Hauler FREEHOLD CARTAGE, INC. 825 HIGHWAY 33 Name of Registered Waste Hauler FREEHOLD NEW JERSEY Disposal Date Full Containment with Negative Pressure Mini Enclo, Mini Enclo, Mini Enclo, Glovebag Procedure X Non-Friable Procedure X Non-	outer bosonies. Inc	NOAT -I IN		AIVI-C	.50 1 101					ORK	10016		
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FREEHOLD CARTAGE, INC. 825 HIGHWAY 33 City, State FREEHOLD, NEW JERSEY Completed by (Print or Type) Hauler ID No. 20 LYCOMING COUNTY RESOURCE MANAGEMENT SE 447 ALEXANDER DRIVE/ROUTE 15 Disposal Date 10/22-5/30/19 MONTGOMERY , PA 17752 Date // / / / / / / / / / / / / / / / / /													
FREEHOLD CARTAGE, INC. 825 HIGHWAY 33 City, State FREEHOLD, NEW JERSEY Completed by (Print or Type) Hauler ID No. 20 LYCOMING COUNTY RESOURCE MANAGEMENT SE 447 ALEXANDER DRIVE/ROUTE 15 Disposal Date 10/22-5/30/19 MONTGOMERY , PA 17752 Date // / / / / / / / / / / / / / / / / /											1		
FREEHOLD CARTAGE, INC. 825 HIGHWAY 33 City, State FREEHOLD, NEW JERSEY Completed by (Print or Type) Hauler ID No. 20 LYCOMING COUNTY RESOURCE MANAGEMENT SE 447 ALEXANDER DRIVE/ROUTE 15 Disposal Date 10/22-5/30/19 MONTGOMERY , PA 17752 Date // / / / / / / / / / / / / / / / / /			+							+	+	+	\vdash
FREEHOLD CARTAGE, INC. 825 HIGHWAY 33 City, State FREEHOLD, NEW JERSEY Completed by (Print or Type) Hauler ID No. 20 LYCOMING COUNTY RESOURCE MANAGEMENT SE 447 ALEXANDER DRIVE/ROUTE 15 Disposal Date 10/22-5/30/19 MONTGOMERY , PA 17752 Date // / / / / / / / / / / / / / / / / /			-	-					-	+	+-	+	\vdash
FREEHOLD CARTAGE, INC. 825 HIGHWAY 33 City, State FREEHOLD, NEW JERSEY Completed by (Print or Type) Hauler ID No. 20 LYCOMING COUNTY RESOURCE MANAGEMENT SE 447 ALEXANDER DRIVE/ROUTE 15 Disposal Date 10/22-5/30/19 MONTGOMERY , PA 17752 Date // / / / / / / / / / / / / / / / / /			_										
FREEHOLD CARTAGE, INC. 825 HIGHWAY 33 City, State FREEHOLD, NEW JERSEY Completed by (Print or Type) Hauler ID No. 20 LYCOMING COUNTY RESOURCE MANAGEMENT SE 447 ALEXANDER DRIVE/ROUTE 15 Disposal Date 10/22-5/30/19 MONTGOMERY , PA 17752 Date // / / / / / / / / / / / / / / / / /													
FREEHOLD CARTAGE, INC. 825 HIGHWAY 33 City, State FREEHOLD, NEW JERSEY Completed by (Print or Type) Hauler ID No. 15939 LYCOMING COUNTY RESOURCE MANAGEMENT SE 447 ALEXANDER DRIVE/ROUTE 15 Disposal Date 10/22-5/30/19 Disposal Date 10/22-5/30/19 Figure Signature Date 10/21/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/	Name of Registered Waste Hauler	NJD	EP W	aste	Cubic Ya	rds of	Waste	Name of Regist	ered Landfill				
City, State FREEHOLD, NEW JERSEY Completed by (Print or Type) Disposal Date City, State MONTGOMERY, PA 17752 Date // / / / / / / / / / / / / / / / / /		Hau				20		LYCOMING CO	UNTY RESOUR	CE M	ANAG	EMEN	IT SE
FREEHOLD, NEW JERSEY 10/22-5/30/19 MONTGOMERY, PA 17752 Completed by (Print or Type) Title Signature			1593	9	Diserrat	Dat-			ER DRIVE/ROUT	E 15			
Completed by (Print or Type) Title Signature / Date / / / / / / /							/	MONTCOMED	V DA 17750		/		,
BENJAMIN SANCHEZ DIRECTOR OF OPERATIONS ////	Completed by (Print or Type)	Title			10122-013		ature /	AINOIN GOINER		e / f	1/1	01	10
			R OF	OPE	RATIONS		///	111	Jac	16	11	1/	M

PAND

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60-7 and 12:120-7)

UC 32938

)	ALL	NOTIFIC Pur	suant t	O N	JAC 8:60-7 and 12:120- Name of Building Own	7) er/Operator (2)	010	医疗) [2	3)	•
				1	Name of Building Own HACKENSACK UNIVER	RSITY MEDICAL	CENTER	iā. Y	7.1	2 12 - 12 - 1		
ate of Notification (1)							The state of the s				- 1	
/ 15	/18			\dashv	Street Address 30 PROSPECT AVENU	JE		210	71/	21	2018	3
gencies Notified T	ype Notification				Ti- Codo		¥1	IAE	JV	()=		
Gendles Notified	Unitial Notification	on			City, State, Zip Code HACKENSACK, NEW	JERSEY 07601	8	1				
DEP E	Amended Notif	ication		- 9			Telephone Num	nber	¥ * * *		1 81	
X DOL	Cancellation On Hold				Name of Contact		551-996-3778			e to:	11	= 170
X DOH	EMERGENCY	NOTIF	ICATIO	NC	DONALD FARRELL					_		
DCA			FA	ACIL	ITY INFORMATION	Type of Facility	(4)					
lame of Facility Where Ab	atement is Taking	Place	(3)			School (K-		K-12)				1
					53	Subchapte Other (ie.	private & commi	ici. biuge	s., ho	mes,	etc.)	1
HACKENSACK UNIVERSI	TY MEDICAL CENT					Square Feet	# 01 F10015			g. Age 80	3	1
						200 000	5	-liebod)		00		1
Street Address 30 PROSPECT AVENUE				_	County Code (7)	Current Use (P	rior if being dem	10lisheu)	,			1
City (5)	County (6)				(STATE USE ONLY)	HOSPITAL	ement Contrac	tor (9)	5550			1
HACKENSACK	BERGEN Building	Owner	r (8)	_	ASCM No.	PAR ENVIRON	MENTAL COR	PORAT	ION			+
HACKENSACK Name of Monitoring Firm LANGAN ENGINEERING	& ENVIRONMENT	AL	85 A		99	Totroot Address						
Street Address						313 SPOOK R	Code					
300 KIMBALL DRIVE				_		City, State, Zip)1		405		\dashv
City, State, Zip Code	PARSIPPANY, NEV	V JERS	EY 07	054	- Law	Telephone Nu	mber	LICELISC	Numi	per		
Project Manager for Monit	toring Firm	116	iehiloi	10	-24.072-3070P	945-369-7500		1101	-			-
VIJAY PATEL	Personal Continuos de la	97	3-560-	498	on Date (11)	Name of OSH	IA Monitor VIRONMENTAI	L.				1
Expected State Date (10		Sched.	5 /	пен	30	QUALITYEN	VIHORWELLT					\dashv
11 /	.0	Monti	n		Day Year	Street Addres	SS					- 1
Month Day Occupancy Status During	Abatement (Check	c only o	ne)	ε Δh:	atement	1376 ROUTE	9					\dashv
X Facility Close	u/ Vacated - toids of	Norma	I Facil	ity H	lours - Describe:	City, State, Z	ip Code		V 40	-00		
Abatement P	SHOULER CRISING T	riday 7	am -3:	30pr	n	1 V	VAPPINGENI	ALLS, N	Y 12:	390		
X Other - Descr					Full Co	ntainment with N	legative Pressu	ie				
Scope of Work (Check a	all that apply)	Renov	ation		Mini-Er	oag Procedure						
Demolition	7.5	I tone.			V Non-Fi	iable Procedure			Abo	atome	ent Typ	oe .
>3SF OR LF X >160 SF OR	260 LF				Description of	Asbestos-	Amou	int :		D	四	甲
Locatio	n of	Is L	ocatio	n ed	Containing Ma	terial (ACIVI)	(Spec	ify	REMOVAL	REPAIR	ENCAPSUL	ENCLOSUR
Asbestos-co	ontaining	SC	lely by	,	(ie. Therma	systems	SF or	LF)	8	Ħ	PS	SO
Material TO BE A	(ACM)	Maint	/Custo	odial	insulation, sur or other miso	ellaneous)	1	1	2		12	R
in Facili	v (13)	St	aff (12	N/A	Of Other miles			-	.,			
1111 40111	., ()	Yes	-		LAT & MASTIC		2,100 SF		X	-	\vdash	
3RD FLOOR MAIN BL	JILDING	1	1	X	VAT & MASTIC		4,000 SF		X	-	+	+
3HD FLOOR WAIN DO	BASEMENT			X	VAT & MASTIC		740 SF		X_		1	1
ST. JOHNS BUILDING	DAGENERY.			X	GLUE & CEILING TIL	E	1,40 0.					-
ST. JOHNS BUILDING	G BASEMENT	+	1						T	T		
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Name of Registered	Waste Hauler	NJI	DEP W	/aste	e Cubic Yards of Wast	e Name of GRAND	Registered Lan CENTRAL SAN	IITARY L	LAND	FILL		
Name of Registered NEWARK CARTING		NJI Ha	DEP W	/aste	80	GRAND	CENTRAL SAN		LAND	FILL		
369 RAYMOND BLV	D.	NJI Ha	DEP W	/aste No.	Disposal Date	City, Sta	CENTRAL SAN			FILL	15	1
MEMARK CARTING	D. RSEY 07105	На	uler ID	No.	80	City, Sta	CENTRAL SAN	IP, PA		FILL	15	1

P	AID	NO.	TIFIC	State of	of New	Jersey	TEMENIT	1	\1Z		-	0		-3
Date of Notification (1)	L M, M to z		Pursu	ant to NJA	AC 8:60 ame of	-7 and 12: Building (120-7) Owner/Opera	itor (2	<u> </u>	/3	2	9	5,	
\$5.00x	143720				ERIZON	-							12	
Agencies Notified Type	/18				reet Ad						1,27	-73)	122	9,
	oe Notificati			111	VERIZO	N WAY			7		11.5	1.7	: 27	
DEP X	Initial No Amended Cancella	1 Notification	on #1	Cit	ty, State ASKING	, Zip Code RIDGE, N	e IJ 07920				,	MOI	1 2	1 0
X DOH DCA	On Hold EMERGE	NCY NOT	IFICA	TION CH	me of (Contact MESSING			Telephone 908-559-20		er	NU		- 20
News of Facility 199				FACILITY	INFOR	MATION						-	100	5 (52 (44
Name of Facility Where Abate VERIZON	ement is Ta	iking Place	e (3)				Type of Fa	ol (K-1		K	40\	10		
							X Other	(ie. n	rivate & cor	nan K- mmel	hlda	e hr	mac	oto \
Street Address 216 LEXINGTON AVENUE							Square Fe 29,255	eet	# of Floo	ors	Diag	Bld	g. Ag	e etc.)
City (5) LAKEWOOD	OCEAN					ONLY)	Current Use COMMERC	(Prio	or if being d	lemolis	shed)		
Name of Monitoring Firm Hire TTI ENVIRONMENTAL Street Address	ed by Build	ing Owner	r (8)		AS	SCM No. 3	Name of All PAR ENVIR	oatem RONM	ent Contra	ORPOR	(9) RATI	ON		
1253 NORTH CHURCH STREE City, State, Zip Code	ΕT						Street Address 313 SPOOK	ROC						
	OORESTO						City, State, SUFFERN,	NEW	YORK 109	901				
KRISTOPHER SMITH	CIIIII			e Number			Telephone N		er	Licen	se N	umbe	er	
Expected State Date (10)			-313-8	etion Date	/44)		845-369-750			1101				
11 / 13	/18 'ear		3 /	3		/19	Name of OS QUALITY E	NVIR	fonitor ONMENTA	L				
Occupancy Status During Abate	ment (Che	ck only one	1)	Day		Year	Street Addre	200						
X Facility Closed/Vaca Abatement Performe	ted During I d Outside o	Entire Period of Normal F	od of A	Hours - D	escribe	:	1376 ROUT							
X Other - Describe:	MONDAY	- FRIDAY	5 PM	-1:30 AM			City, State, 2 WAP	Zip Co PING	ode ERS FALL,	. NEW	YO	RK 12	2590	
Scope of Work (Check all that a Demolition >3SF OR LF X >160 SF OR 260	X]Renovatio	n		X	Mini Enclo Glovebag	inment with N	legati	ve Pressure	е				
Location of		Is Loca			Descrip	tion of Asi	pestos-	T			Ah	atem	ent T	vne
Asbestos-containing		normally				ng Materia		- 1	Amount		II II	B	m	m
Material (ACM) TO BE ABATED		solely Maint/Cus	by			nermal sys			(Specify	/	<u> </u>	EP/	Ó	2
in Facility (13)		Staff (1	12) N/A			n, surfacir r miscellar			SF or LF)	EMOVAL	REPAIR	APSUL	NCLOSUR
BASEMENT			х	VAT & MA	ASTIC			1-	72 CE					-
ADDITION TO SCOPE:				711 0 1017	.0110			17	73 SF	- 1	<			\vdash
BASEMENT			x	VAT & MA	ASTIC			200	00 SE	1	$\overline{}$			\vdash
					.0.10			120	20 SF)	-			\vdash
					_			+						

Cubic Yards of Waste

Disposal Date 11/13-3/30/18

20

Signature

Name of Registered Landfill GRAND CENTRAL SANITARY LANDFILL

Date

City, State PLAMERELD TOWNSHIP, PA

Name of Registered Waste Hauler NEWARK CARTING 369 RAYMOND BLVD. City, State NEWARK, NJ 07105 Completed by (Print or Type) BENJAMIN SANCHEZ

NJDEP Waste

Hauler ID No.

913

Title
DIRECTOR OF OPERATIONS

Date of Notification (1)					(Purs	suant to I	NJAC 8:	60-7 and 12	ATEMENT 2:120-7)			32	8	53	>
Agencies Notified Type Notification Street Address VERIZON WAY VERIZON VERIZ	Date of Notification (1)						Name (of Building	Owner/Opera	tor (2)					
Type Notification Type Notification DEP Not Notification September 1	10 / 26	/18										******	1 (177-1)	1000min 2200	C #1 / A#
EPA DEP X DOL	Agencies Notified Type	Notifica	tion			10						7.1	:	3 1	i.
DEP DOL Cancellation On Hold O		Initial N	otifica	tion					1.		6	41 5			1225
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Telephone Number Septender	X DOL	Cancella	ation				D. 101111	id HibaL,	140 07920				A	INV.	7
ame of Facility Where Abatement is Taking Place (3) ERIZON ERIZON ERIZON FACILITY INFORMATION FACILITY INFORMATION Type of Facility (4) School (K-12) School (K-12)							Name o	f Contact		ITel	ephone N	umber	- 1/	IU V	/
Ame of Facility Where Abatement is Taking Place (3) ERIZON Type of Facility (4) School (K-12) Scho	L DCA	IMERG	ENC	NO	TIFIC				G	908	3-559-200	1			
School (K-12) Subchapter 8 (Other than K-12) Subchapter 8 (O	ame of Facility Where Abateme	ent is T	akino	Plac	20 (3)	FACILI	TY INFO	PRMATION					(, , ,		- 1
Treet Address 16 LEXINGTON AVENUE Treet Address)C (O)				School	ility (4) (K-12)		1	e e	1	1
Treet Address A	ERIZON										Other tha	n K-12	1		
Seminary									_X Other (ie. priva	ite & comi	ncl. ble	dgs., t	omes.	etc
County (6) OCEAN ? (County Code (7) COTRAL USE (Prior if being demolished) OCEAN ? (STATE USE ONLY) COMMERCIAL IENVIRONMENTAL rest Address 33 NORTH CHURCH STREET ISTOPHER SMITH OPECH Address SIN ORTH CHURCH STREET ISTOPHER SMITH OPECH ADDRESS OF SIN ORTHOR INTO THE	6 LEXINGTON AVENUE								Square Fe	et	# of Floors	5	BI	dg. Ag	е
in the contraction of the contra		ounty	(6)			1 0	Ounty (20do (7)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					50	
Second S	KEWOOD	CEAN			7	(ST	TATE US	SE ONLY)	COMMERCIAL COMPERCIAL COMPETANT COMPET	(Prior if	being der	nolishe	ed)	20 - 100 - 100	
Serial Address 33 NORTH CHURCH STREET 33 NORTH CHURCH STREET 33 SPOOK ROCK ROAD City, State, Zip Code MOORESTOWN, NJ 08057 SUFFERN, NEW YORK 10901 STOPHER SMITH 609-313-8218 Sched. Completion Date (11) 11 / 13 /18 Month Day Year Month Day Year Supposed State Date (10) 11 / 13 /18 Month Day Year Supposed Work (Lobes dal that apply) Demolition Sor OR LF 313 SPOOK ROCK ROAD City, State, Zip Code SUFFERN, NEW YORK 10901 Telephone Number Hickory 110 Jane of GSHA Monitor QUALITY ENVIRONMENTAL Street Address 1376 ROUTE 9 Street Address 1376 ROUTE 9 City State, Zip Code WARPINGERS FALL, NEW YORK 12590 City State, Zip Code WARPINGERS FALL, NEW YORK 12590 City State, Zip Code WARPINGERS FALL, NEW YORK 12590 City State, Zip Code WARPINGERS FALL, NEW YORK 12590 City State, Zip Code WARPINGERS FALL, NEW YORK 12590 City State, Zip Code WARPINGERS FALL, NEW YORK 12590 Containing Material (ACM) Abatement Percedure Location of Abbasios-containing Material (ACM) TO BE ABATED In Facility (13) Staff (12) Yes No N/A SEMENT NAME COLO STATE OF A SPANCE STAT	me of Monitoring Firm Hired I	oy Build	ding (wne	r (8)	,					t Contra	tor (0)			
Street Address 313 SPOOK ROCK ROAD MOORESTOWN, NJ 08057 SUFFERN, NEW YORK 10901 Telephone Number 609-313-8218 Sched. Completion Date (11) 11 / Day Year Month Day Year Street Address 1376 ROUTE 9 City, State, Zip Code 345-369-7500 11101 Name of OSHA Monitor QUALITY ENVIRONMENTAL Street Address 1376 ROUTE 9 City, State, Zip Code WAPPINGERS FALL, NEW YORK 12590 City, State, Zip Code WAPPINGERS FALL, NEW YORK 12590 Mappingers FALL, NEW YORK 12590 City, State, Zip Code WAPPINGERS FALL, NEW YORK 12590 City, State, Zip Code WAPPINGERS FALL, NEW YORK 12590 Mappingers FALL, NEW YORK 12590 City, State, Zip Code WAPPINGERS FALL, NEW YORK 12590 City, State, Zip Code WAPPINGERS FALL, NEW YORK 12590 City, State, Zip Code WAPPINGERS FALL, NEW YORK 12590 City, State, Zip Code WAPPINGERS FALL, NEW YORK 12590 City, State, Zip Code WAPPINGERS FALL, NEW YORK 12590 City, State, Zip Code WAPPINGERS FALL, NEW YORK 12590 City, State, Zip Code WAPPINGERS FALL, NEW YORK 12590 City, State, Zip Code WAPPINGERS FALL, NEW YORK 12590 City, State, Zip Code WAPPINGERS FALL, NEW YORK 12590 City, State, Zip Code WAPPINGERS FALL, NEW YORK 12590 City, State, Zip Code WAPPINGERS FALL, NEW YORK 12590 City, State, Zip Code WAPPINGERS FALL, NEW YORK 12590 City, State, Zip Code WAPPINGERS FALL, NEW YORK 12590 City, State, Zip Code WAPPINGERS FALL, NEW YORK 12590 City, State, Zip Code WAPPINGERS FALL, NEW YORK 12590 City, State, Zip Code WAPPINGERS FALL, NEW YORK 12590 City, State, Zip Code WAPPINGERS FALL, NEW YORK 12590 City,	LENVIRONMENTAL				52 EX				PAR ENVIRO	ONMEN	TAL COR	FOR (a)	TION		
y, State, Zip Code MOORESTOWN, NJ 08057 Diect Manager for Monitoring Firm Telephone Number SUFFERN, NEW YORK 10901 Telephone Number Solest Manager for Monitoring Firm Telephone Number Solest Manager for Monitoring Firm Telephone Number Solest State Date (10) 11									Street Addre	SS		· OTTA	TION		
MOORESTOWN, NJ 08057 Steel	y, State, Zip Code		-		-				313 SPOOK	ROCK	ROAD				
Telephone Number Telephone Number StropHers MITH Go9-313-8218 StopHers MITH Go9-3	MOC	REST	NWC	NJ 0	8057				City, State, Z	ip Code					
ISTOPHER SMITH 609-313-8218 845-369-7500 1101	oject Manager for Monitoring Firr	n				ne Numb	er		Telephone N	IEW YC			N		
Sched. Completion Date (11) 3 / 18 Month Day Year Sched. Completion Date (11) 3 / 18 Month Day Year Status During Abatement (Check only one) X Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe: MONDAY - FRIDAY 5 PM-1:30 AM City, State, Zip Code WAPPINGERS FALL, NEW YORK 12590 WAPPINGERS FALL, NEW YORK 125	ISTOPHER SMITH	No.					esot.		.50		100		Numb	er	
Month Day Year Street Address 1376 ROUTE 9 Street Address 1376 ROUTE 9 Street Address 1376 ROUTE 9 City, State, Zip Code WAPPINGERS FALL, NEW YORK 12590 Demolition WAPPINGERS FALL, NEW YORK 12590 Demolition WAPPINGERS FALL, NEW YORK 12590 Asbestos-containing Material (ACM) Maint/Custodial in Facility (13) TO BE ABATED Maint/Custodial Staff (12) Yes No N/A SEMENT X VAT & MASTIC 173 SF X VAT & MASTIC 173 SF X VAT & Mame of Registered Landfill GRAND CENTRAL SANITARY LANDFILL Name of Registered Landfill GRAND CENTRAL SANITARY LANDFILL Name of Registered Landfill GRAND CENTRAL SANITARY LANDFILL Disposal Date 11/13-3/30/18	44 /		Sch	ed. (Comp		ate (11)				tor.	101			
Cupancy Status During Abatement (Check only one) X Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe: Other - Describe: MONDAY - FRIDAY 5 PM-1:30 AM Full Containment with Negative Pressure A State Address 1376 ROUTE 9 City, State, Zip Code WAPPINGERS FALL, NEW YORK 12590 Other - Describe: MONDAY - FRIDAY 5 PM-1:30 AM Other - Describe: MONDAY - FRIDAY 5 PM-1:30 AM Other - Describe: MAPPINGERS FALL, NEW YORK 12590 Other - Describe: MAPPINGERS F	4		1		3 /	_	877-75		QUALITY EN	VIRON	MENTAL				
Abatement Performed Outside of Normal Facility Hours - Describe: Other - Describe: MONDAY - FRIDAY 5 PM-1:30 AM Other - Desc	cupancy Status During Abateme	ent (Che	ck on	v on	2)	-		Year							
Adatement Performed Outside of Normal Facility Hours - Describe: Other - Describe: MONDAY - FRIDAY 5 PM-1:30 AM Other - Desc	A Facility Closed/Vacated	During	Entire	Pari	and of	Abateme	nt		Street Addres	s					
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Mappingers Fall, New York 12590 Mapp	Other - Describe: Me	ONDAY	' - FR	DAY	5 PM	1-1:30 AN	1		City, State, Zi	p Code				_	
Demolition Sash OR LF X Mini Enclo Glovebag Procedure Non-Friable Procedure	ope of Work (Check all that apply	(4)						_	WAPP	INGER:	S FALL, N	EW Y	ORK 1	2590	
SSF OR LF X >160 SF OR 260 LF Location of Asbestos-containing Material (ACM) TO BE ABATED in Facility (13) SEMENT NJDEP Waste Hauler NARK CARTING RAYMOND BLVD. State VARK NJ 07105 Disposal Date Glovebag Procedure Non-Friable Procedure No	Demolition		7Ren	ovatio	on.			Full Conta	inment with Ne	gative I	ressure				
Location of Asbestos-containing Material (ACM) TO BE ABATED in Facility (13) SEMENT Non-Friable Procedure Non-Friable Procedure				o roccii	211		^	Glovebag	Procedure						
Asbestos-containing Material (ACM) Asbestos-containing Material (ACM) TO BE ABATED in Facility (13) SEMENT Is Location normally used solely by Maint/Custodial Staff (12) Yes No N/A VAT & MASTIC IT3 SF X Abatement Type Containing Material (ACM) (ie. Thermal systems insulation, surfacing, VAT, or other miscellaneous) SEMENT X VAT & MASTIC IT3 SF X Abatement Type Containing Material (ACM) (ie. Thermal systems insulation, surfacing, VAT, or other miscellaneous) SF or LF) Abatement Type CONTAINING SF or LF) NAMOND BLVD. State VARK CARTING RAYMOND BLVD. Disposal Date 1/1/13-3/30/18 Disposal Date 1/1/13-3/30/18 Disposal Date 1/1/13-3/30/18	X >160 SF OR 260 LF							Non-Friab	le Procedure						
Material (ACM) TO BE ABATED in Facility (13) SEMENT X VAT & MASTIC Containing Material (ACM) (ie. Thermal systems insulation, surfacing, VAT, or other miscellaneous) X VAT & MASTIC 173 SF X VAT & MASTIC 173 SF X VAT & MASTIC Name of Registered Landfill GRAND CENTRAL SANITARY LANDFILL State (ARK, NJ 07105 Pleted by (Print or Time) Disposal Date 11/13-3/30/18 Containing Material (ACM) (ie. Thermal systems insulation, surfacing, VAT, or other miscellaneous) NAMOUNT (Specify SF or LF) NAMOUNT (Specify SP or LF) NA							Descr			1		T .	1 1	-	
Solely by Maint/Custodial Staff (12) Yes No N/A SEMENT X VAT & MASTIC 173 SF X VAT & MASTIC 173 SF X VAT & MASTIC 173 SF X VAT & MASTIC 173 SF X Disposal Date 1/13-3/30/18 Disposal Date 1/13-3/30/18 City State Cubic State Club S				200			Contai	ning Materia	al (ACM)		Amount		T TO	nent I	
Staff (12) Yes No N/A SEMENT X VAT & MASTIC 173 SF X Disposal Date 11/13-3/30/18 Staff (12) Yes No N/A VAT & MASTIC 173 SF X VAT & MASTIC 173 SF X Disposal Date 11/13-3/30/18 PLANT FLOW SHIP. PA	TO BE ABATED						(ie.	Thermal sys	stems			Ē	F	Z	N
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT MO#25131065310 (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 15 / 18 Katrin Reed Agencies Notified Type Notification Street Address X EPA X Initial DOLWD Amended X DHSS City, State, Zip Code Amendment # ☐ DCA ☐ Emergency (including Union, NJ 07083 (NJAC 5:23-8) justification) Name of Contact Telephone Number Cancellation Katrin Reed FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Private house Street Address School (K-12) Subchapter 8 (Other than K-1 2) Other (i.e., private and commercial buildings, City (5) homes, etc.) Union, NJ 07083 Square Feet # of Floors Bldg. Age County (6) County Code (7) (STATE USE ONLY) | Current Use (Prior if being demolished) Union Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Gr Tech LLC Street Address Street Address 576 Valley Rd #283 City, State, Zip Code City, State, Zip Code Project Manager for Monitoring Firm Wayne, NJ 07470 Telephone No. Telephone No. License No. Start Date (10) 973-638-1777 Scheduled Completion Date (11) 01127 Name of OSHA Monitor 11 / 28 / 18 Occupancy Status During Abatement (Check only one) Envirovision Consultants,Inc ☐ Facility Closed/Vacated During Entire Period of Abatement Street Address Abatement Performed Outside of Normal Facility Hours - Describe 20-21 Wagaraw Road, Bldg .# 35E Time of Abatement: AM- PM/ PM_ AM City, State, Zip Code Scope of Work (Check all that apply) Fair Lawn, NJ 07410 Clean up and decontamination with negative pressure >3 sf or >3 lf > 160 sf or >260 lf Full Containment with Negative Pressure ■ Renovation Mini-Enclosure Demolition Glovebag Procedure Tent with Negative Pressure Non-Exempted (*) and Non-Friable Procedure Is Location Location of Normally Abatement Type Asbestos-Containing Material (ACM) Used Solely by Description of Asbestos Containing Material (ACM) TO BE ABATED Repair Maintenance/ Remova Encapsulate Amount (i.e., thermal systems insulation, IN Facility Custodial Staff? (Specify surfacing, VAT, or (13)(12)SIF or LF) other miscellaneous) Yes No N/A Basement X Pipe insulation 200 LF Basement X X VAT -floor tiles 40 SF X П Name of Registered Waste Hauler NDEP Waste Hauler ID No. | Cubic Yards of Waste | Name of Registered Landfill Gr Tech LLC 0033785 City, State TBD T.R.R.F. Inc Disposal Date City, State Wayne, NJ 07470 Completed By (Print or Type) TBD Tullytown, PA Title Signature N.Jevtic Date Owner Tewic Wenad ASB-41

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Name of Registered Waste	Hauler		1,000	NJDEP W			Yards		Name of Re	egister	ed Lan	dfill				
Danvic Contracting LLC	С			Hauler ID 37574	No.	of Wa	ste		Fairless	Land	fill					
City, State							sal Date		City, State							
Elizabeth, NJ						TBD			Morrisvill	e, PA	Ą					
Completed by		Title				5	Signature			1		Date		-		
Jeymy Donneys		Own	er				//	DUR	J&L	-1		10/2	9/20	18		

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AMAC

PAGE 02/03

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

B & G proj. #:

2018-240

PAID

(Pursuant to NJAC 8:60-7 and 12:120-7)

Check # 9374

Date of Notification	(1)	N	ame of Build	ing Owne	r/Operator (2)				17 F			n +2	
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Agencies Notified	Type Notification	on St	reet Address	3					NO14 0	1 00	10		
☐ EPA	X Initial		230 Fairfi	eld Roa	d				NOV ?	! 20	18		2.0
DEP DOL	☐ Amendm		ty, State, Zir Fairfield,		04				As n = 8		a		
₩ DOH		I Na	me of Conta			-		Telepho	ne Number			-	-
□ DCA	Cancella	- 11							882-2700		20		
		U	Joe Cate					913-0	002-2100	X 200	30		
				FACII	LITY INFORM	ATION		I = 1 = 111					
Name of facility wh	nere abatement is	taking pla	ce (3)					Type of Facility	(4) ool (K - 12)				
Police Headq	uaters							⋉ Subo	hapter 8 (O			12)	
Street Address									r (Private/C s./Homes, e		Clai		
230 Fairfield	Road							Square Feet	# of Floor	s	Blo	ig. Ag	ge
City (5)		Coun	ty (6)				ty Code (7) e use only)	Current Use (Daine if hair	a dom	olicho	d)	
Fairfield		Ess	ex			(State	s use only)	police head		g dem	DIISHE	uj	
Name of Monitorin	g Firm Hired by E	Bldg. Owne	r (8)		ASCM No.	11	Name of Abatement (
	ronmental Se				00120		B & G Restorati	on, Inc.					
Street Address							Street Address						
280 Huyler S	Street						105 Ryerson R	oad					
City, State, Zip Coo South Hacke	le ensack, NJ 07	606					City, State, Zip Code Lincoln Park, I	NJ 07035					
Project Manager fo	r Monitoring Firm	i i	Pho	ne Numb	er	-	Telephone Number	<u> </u>	License		er		
Stan Blackm	nan		20	1-489-8	3700	- 11	(973)696-6869			378			
Scheduled Start Da	ate (10)	Sched	. Completion	Date (11	1)		Name of OSHA Moni B & G Restorat						
12/01/2018		12/0	4/2018			-	Street Address						
Occupancy Status	During Abatemen	t (Check o	nly one)				105 Ryerson R	oad		<i>X</i>			
Facility close	d/vacated during	entire perio	od of abaten	nent.		1	City, State, Zip Code						-031111-27
Describe:	erformed outside	or normal	acility nours	-		_	LincolnPark, N.	1 07035					
Other-Descri						-11			0				
Scope of Work (cl	heck all that apply					2000	rap & cut ull Containment w/neg	ativo proceuro	⋉ Glove	haa nr	ocadı	ıra	
▶ Demolition ▶ ■ Demolition ■ Demo	ᆜ	Renovatio						Jauve pressure		riable i			
>3 sf or >3 lf	f X	≥160 sf or				× M	lini-enclosure			TR	R	E	1
Location of	ataining	by mainte	n normally usenance/custo	sed solely odial	1	on of or	bestos-containing	Amount		е	е	n	E n
asbestos-co material to b	e	staff(12)			material (besios-containing	(Specify LF)	SF or	o m	p a	a	C
abated in fac	cility (13)	Yes	No	N/A						v e	i r	р	
Cellar/Boiler R	oom			×	pipe insul	ation		200 lf		×			
										10	Щ		빝
										井	片	ዙ	#
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:		INIE	EP Hauler II	# 10	Lubic Yards of	Waste	Name of Registered	Landfill		-111	Ш		10
Registered Waste B & G Restora			19563	Disposal D	5 yds		Grand Central		AND DESCRIPTION OF THE PARTY OF				1
City, State Lincoln Park,	NJ			12/03	3/18		Pen Argyl, PA		15:			,	<u> </u>
Completed by (Prin		Title	nu/Trans	ror	Signature	(Gordana Luna		Date 11/1	9/20	18		
Gordana Luna	a	Secreta	ry/Treasu	iei			0		1-171	0120			

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

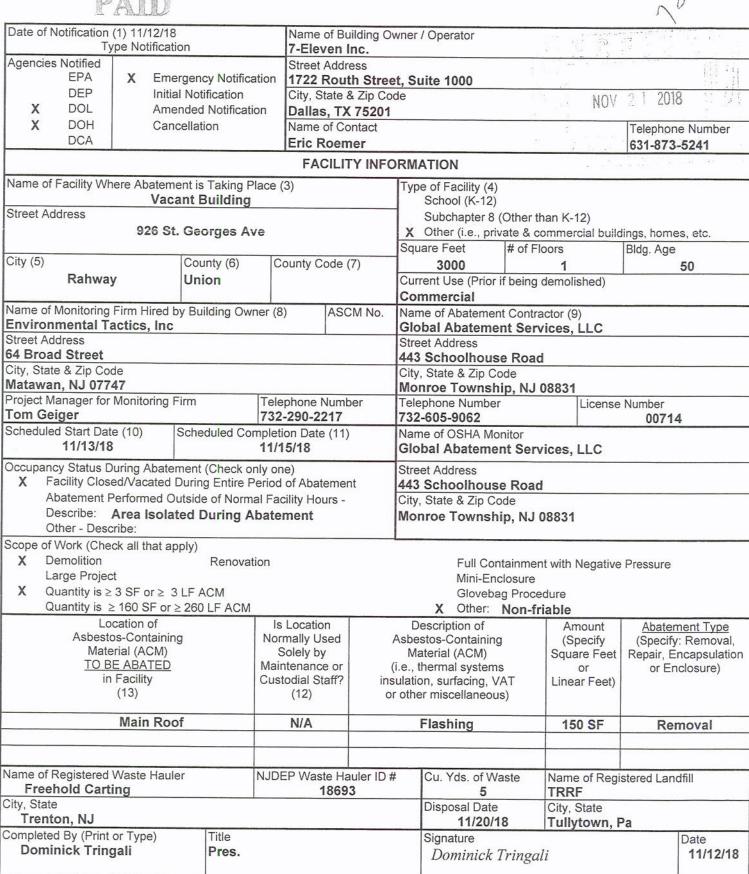
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Date of Notification	(1)	IIN	lame of Ri	ilding Own	ner/Operator (2)			100	A 22	1			62.01
11 11 1/11 19	1/11 18 1	11"	John A		iei/Operator (2)								
Agencies Notified	Type Notificat							1. 4.1				= 116	
EPA	Type Notificat	IOII S	treet Addr	ess								11	1
	X Initial							N	OV 2.1	20	18		15
☐ DEP	1		ity, State,	Zip Code									
X DOL	☐ Amendr	ment	Pompto	on Plains	, NJ 07444								
₩ DOH		l N	ame of Co	ntact				Telephon	e Number				
_	☐ Cancella	78 P						1	1				
☐ DCA			John A	Park									
				FAC	ILITY INFORM	ATION							
Name of facility wh	nere abatement i	s taking pla	ace (3)					Type of Facility (Vertainus.		
John A Park									I (K - 12)			4.00	
Chroat Address								100.000	apter 8 (Oth			12)	
Street Address									Private/Con Homes, etc		rciai		
									# of Floors	П	Blo	ig. Ag	ge
City (5)		Cou	nty (6)			Cou	nty Code (7)						
Domnton Die	ina NI 0744	4 8/10	rris			(Sta	te use only)	Current Use (Pr	ior if being	dem	olishe	d)	
Pompton Pla	CANAL PROCESS CONTRACTOR							Residential	(e)			9	
Name of Monitorin	g Firm Hired by	Bldg. Own	er (8)		ASCM No.		Name of Abatement (Contractor (9)					
					n/a		B & G Restorati	on, Inc.					
Street Address							Street Address						
							105 Ryerson R	oad					
City, State, Zip Cod	е						City, State, Zip Code		3000				
							Lincoln Park, I	NJ 07035					
Project Manager for	Monitoring Firm	1	Р	hone Numl	per		Telephone Number		License N		er		
							(973)696-6869	9	003	78			
Scheduled Start Da	te (10)	ISched	. Complet	ion Date (1	1)		Name of OSHA Moni				23.5		
12/01/2018	(10)		02/2018	· · · · · · · · · · · · · · · · · · ·	20. 6 7		B & G Restorati	on, Inc.					
							Street Address	73					
Occupancy Status I							105 Ryerson Ro	oad					
	d/vacated during						City, State, Zip Code						
Describe:	erformed outside	or normal	racility not	Irs-				1.07005					
Other-Describ	be:					_	Lincoln Park, N	J 07035				-	
Scope of Work (ch	eck all that apply	y)					***************************************						
Demolition	X	Renovation	on			X F	ull Containment w/neg	ative pressure	☐ Gloveba	g pr	ocedu	ire	
 ≥3 sf or ≥3 f		≥160 sf or	>260 If			Пм	fini-enclosure	Ī	Non-fria	ble i	oroce	dure	
				used solel	VI					R	R	E	1
Location of asbestos-con	staining		enance/cus					Amount	4	е	е	n	E
material to be		staff(12)			material (sbestos-containing	(Specify S	For	m o	р	С	n
abated in fac	ility (13)	Yes	No	N/A				LF)		v	a i	a p	L
enclosed porch				X	VAT (no n	nactio	1	145 of		e X	r	_	1
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Donotara Wast	loulor	L	EDI:	10# 12	Subio Varda at	Monte	INome of Devictor 1	Landeli			Ш	Ц	
Registered Waste F B & G Restorat			EP Hauler 19563		Cubic Yards of \ 2	vaste	MATERIAL PROPERTY AND ADDRESS OF THE PARTY AND	ntral Landfill					
City, State Lincoln Park, N	۸J			Disposal I	Date 03/2018		City, State Pen Argyle	, PA				ų.	
Completed by (Prin		Title		L	Signature		l ————		Date	-		-	
Gordana Luna			ry/Treas	urer		(Gordana Luna		11/19/	201	8		755
						-							

Date of Notification (1)	0/2018			Name o	of Building	Owner/	Operator	(2) Nea	CSII							
Agencies Notified	Type Notification		-	Street A	Address			1400	000							
X EPA	× Initial															
DEP X DOL	Amended Amendmen		_ [City, Sta	ate, Zip C	ode	Ewi	ng, N	IJ 08638							
Ĭ DOH	x Emergency justification				f Contact					Tel	ephone	Numb	er			
☐ DCA	Cancellation	1			ntonio N									ALC: C		
Name of Facility Where	Abatement is Takir	ng Place (3)	\	FAC	ILITY INF	ORMAT	ION	Type	of Facility (4)						
	Residential							П	School (K-1	0000A						
Street Address								X	Subchapter Other (i.e. p etc.)	8 (Oth	er than & comm	K-12) ercial	build	lings	hom	es,
City (5)	wing, NJ 08638								re Feet	# 01	f Floors	2	В	ldg. A		
County (6)	.wing, 140 00000	,	\neg	County	Code (7)			Curre	1800 ent Use (Prid	or if bei	1 na dem	olished	<u> </u>	50	+/-	
Mercer					USE ONLY)							M			
Name of Monitoring Firm MEC		Owner (8)		ASCN	ИNo.				atement Con nvironme			s. Ind	C.			
Street Address PO Box	341						Street PO E	Addre	SS			•				
City, State, Zip Code	dala NI 00545						City, S	tate, Z	ip Code							
Project Manager for Mor	vicks, NJ 08515))	1	Telepho	ne No.		Allen		, NJ 0850	1	Licens	e No				
Bill Weisgarber				(609)	298-407		609 2	259-9	688		0049					
Start Date (10) 12/3/2018			2/14	npletion /2018	Date (11)		Name MEC		HA Monitor							
Occupancy Status Durin	g Abatement (Che	k Only One)				Street								- 150	
X Facility Closed/Vac Abatement Perform	ated During Entire	Period of Ab	aten	nent			PO B		ip Code							
Other – Describe:		narr domity r	Tours			_			eld, NJ 08	515						
Scope of Work (Check A	All That Apply)			(2)			Tu-	1								
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		_	nova				Ê	Mir Glo	I Containme ni-Enclosure ovebag Proc	edure						
		la I						J No	n-Exempted	(*) and	Non-F	riable I			e ement	
Location	n of	No	ocati rmal	ly		De	scription	of						Ту		
Asbestos-Containing TO BE AB	Material (ACM)	Used Main				tos Con	taining M	laterial			mount				ш	_
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		+ +											-			
Name of Registered Was	ste Hauler		N	JDEP W	aste	Cubic	Yards		Name of F	Registe	red Lan	dfill				
Stevens Environmen				auler ID 18292	No.	of Was			Fairless							
City, State Allentown, NJ							sal Date /14/201	8	City, State Morrisvil		V					
Completed by		Title				25070	ignature	. 1		-,.,		Date	-			
Mahlon E. Stevens		Pr	ojec	t Mana	iger		1	V	\perp	/_		11	/20)/20	18	

Date	of Notification (1)					Building Own		or (2)					111100			11:
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Agen	cies Notified	Type Notification		S	treet Ad	dress							40	10		
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females.	DEP DOL	Amended Amendment	#			set, NJ 08	8873									24
		Emergency (Contact				Tele	ephone N	lumbe	er			
	DOH DCA	justification) Cancellation			Asraph											
_		_				ITY INFORM	IATION			, =						
		Abatement is Taking	Place (3)					T	ype of Facility (4	1)						
The Alexander	ate home								School (K-12			40)				
Stree	t Address							×	Subchapter Other (i.e. p				ouildi	ngs, l	nome	s,
0.1	5)								etc.)		Floors			lg. Ag		
City (nerset							5	quare Feet	# 01	Floors		DIC	ıg. Aç	je	
	ty (6)			10	County C	ode (7)		-	urrent Use (Pric	r if bei	ng demol	ished)		-	
	nerset					SE ONLY) _			unom 000 (1 no	,	ng domoi		,			
		Hired by Building (Owner (8)	_	ASCM	No.	Nan	ne of	Abatement Con	tractor	(9)	_				
			. ,				1 1000000		val Safety LL							
Stree	t Address						Stre	et Ad	Idress							
							8 (Cros	by Ave							
City,	State, Zip Code						1		e, Zip Code							
									on, NJ 0750	2						
Proje	ect Manager for Mor	nitoring Firm		1	Telephor	ne No.			ne No.		License					
01.1	5 : (10)		01.11	10		2 1 (44)	- 200	New New	00-8711		01332		-11/242			
	Date (10) (27/2018		Schedule		pletion L	Date (11)			OSHA Monitor as (9)							
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		ated During Entire I ned Outside of Norn			ent		City	, Stat	te, Zip Code							
	Other - Describe:			2006965222			'									
Scop	e of Work (Check A	All That Apply)														
	≥3 sf or ≥3 lf		× R	enovat	ion			×	Full Containme		n Negativ	e Pre	ssur	е		
×	≥160 sf or ≥260 lf		□ D	emoliti	on			Н	Mini-Enclosure Glovebag Prod	511						
									Non-Exempte	d (*) ar	d Non-Fr	riable	Proc	edur	e	
			ls	Location	on									Abate Ty	ment	
	Locatio			lormall d Solel		W 02 M	Descript					-		1 y	pe	\vdash
P	Asbestos-Containing TO BE AB			ntenar		Asbestos	Containin	g Mai	terial (ACM) nsulation,		Amount Specify		Z	1	Enc	ш
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											1.61					
-																
Non	ne of Registered Wa	esta Hauler		LNI	JDEP W	/aste /	Cubic Yard	de	Name of	Regiet	ered Lan	dfill				
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	moval Safety LL	.0		0	03700		5				<i>n</i> u i					
1 50	State						Disposal D	ate	City, Sta	te						
	erson, NJ		T:41				TBD Signs	de con-	1,,,			Det				
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^{*} Do not use this form for asbestos licensure exempted activities.





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Date of Notification (1)				Name	of Buildin	g Owner/Operator (2)					41
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Agencies Notified Type Not	fication			Street	Address			NOV	Cu ·	20	10	
⊠ EPA				2 nd	& Broad	Street						ľ
☑ DOLWD ☐ Amen ☑ DOH Amen	ded dment # <u>1</u>	-11/1	5/12	City, S	State, Zip (Code		A. Denis	-			-
□ DCA □ Emerg				Sw	edesboro	o, NJ 08085						252
	ation)	Juding	,	Name	of Contac	t		Telephone Numb	er	+		
Cance				Bria	an Tilton			2156404563				
				FA	CILITY IN	IFORMATION						
Name of Facility Where Abatement	is Taking	Place	(3)				Type of Facility	(4)				
Verizon Swedesboro C.O.							☐ School (K-12					
Street Address						-		8 (Other than K-12)				
2 nd and Broad Street							homes, etc.)	rivate and commerc	iai bu	ilaing	s,	
City (5)							Square Feet	# of Floors	RI	dg. A	ne.	
Swedesboro							5,398	2	4	+-50	ge	
County (6)				Cour	tu Codo /7)(STATE USE ONLY)			- 1 - 3	-50		
Gloucester				Cour	ity Code (7)(STATE USE ONLY)	t .	ior if being demolish	ied)			
	11.11. 0		0) 1	10011		1	Verizon					
Name of Monitoring Firm Hired by E		12	8)	ASCM	No.	Name of Abateme						
USA Environmental Manage	ment in	С					VIRONMENTA	L, INC.				
Street Address						Street Address	(a = ==================================					
8436 Enterprise Ave						1123 BEAVE	R STREET					
City, State, Zip Code						City, State, Zip Co	ode					
Philadelphia, PA 19153						BRISTOL, PA	19007	87				
Project Manager for Monitoring Firm	110/20		Tele	phone	No.	Telephone No.		License No.				
Mark Jenkins			2	15 365	5870	215-788-6040		00509				
Start Date (10)	Schedu	uled C	omple	tion Da	te (11)	Name of OSHA M	lonitor					_
11 /13 /18		-	-0.000	40.		BRISTOL EN	VIRONMENTA	L, INC				
Occupancy Status During Abatemen						Street Address						
☐ Facility Closed/Vacated During E						1123 BEAVE	R STREET					
Abatement Performed Outside o	Normal	Facility	/ Hou	s - Des	cribe	City, State, Zip Co	ode				SCSIIIL	
Time of Abatement:AM		V <u>5:00</u>	PIVI- <u>Z</u>	:UUAM		BRISTOL, PA	19007					, o
Scope of Work (Check all that apply)					⊠ Full Conf	tainment with Neg	nativo Proceuro				
≥3 sf or ≥3 If		⊠ Re	novat	ion		☐ Mini-Enc		gative i lessure				
⊠ ≥160 sf or ≥260 lf		☐ De	moliti	on		☐ Glovebag	g Procedure					
						☐ Non-Exe	mpted (*) and No	on-Friable Procedure	_			
I and the set			Loca Norma						Ab	atem	ent T	ype
Location of Asbestos-Containing Material (A	CM)			ely by	Ashe	Description o stos Containing Ma		Amount	Re	Re	E	E
TO BE ABATED	,		intena			., thermal systems		(Specify	Removal	Repair	cap	clos
IN Facility	- 1	Cust	(12)	Staff?	ALXA-FELT	surfacing, VAT	, or	SF or LF)	Val		Encapsulate	Enclosure
(13)	1	Yes	No	N/A	1	other miscellane	ous)				ate	
Generator Room			П		VAT/Ma	stic		270 SF		П	П	
		П	П								-	
		ш	Ш	-					Ш	Ш	Ш	
Name of Registered Waste Hauler			1	JDEP I	Naste	Cubic Yards of	Name of Regis	stered Landfill	1			
SERVICE TRANSPORT GRO	UP, INC	: .		lauler II 20990		Waste	MINERVA	LANDFILL				
City, State						Disposal Date	City, State		0=1-1-1			
YARDLEY, PA						TBD	WAYNESE	BURG, OH				
Completed By (Print or Type)	Title	-				Signature		Dat	e	,	,	
Dillan DeCaro	Es	stimat	tor			Dilla	- 19eC	es / is	11/	151	18	-

Chr #3460

Date of Notification (1)				Nar	ne of Buildi	ng Owner/Operator	(2)	1.1 No 1.7				
	18					vedesboro C.O.	(-)		÷			
Agencies Notified Type Notif	ication			Stre	et Address				•		- 03	
⊠ EPA 9243 ☐ Initial				2	nd & Broad	Street		1101/ 0	1 20	10		
DOLWDQ 250 □ Amend					, State, Zip	A CONTRACTOR OF THE PARTY OF TH		NOV 3	1 21	118	1.	
DOH9205 Amend	renteres de la constitución de l		_		T	o, NJ 08085						
DCA Emerge justification		cludir	ıg		ne of Conta							
Cancel			ES	0.0000000000000000000000000000000000000	rian Tiltor			Telephone Num 2156404563				
				F	ACILITY II	NFORMATION						
Name of Facility Where Abatement is	Taking	Plac	e (3)				Type of Facility (4)				_
Verizon Swedesboro C.O.							School (K-12)	7.5				
Street Address							Subchapter 8	(Other than K-12	2)	8		
2 nd and Broad Street							Other (i.e., pr homes, etc.)	ivate and comme	rcial b	uildin	gs,	
City (5)							Square Feet	# of Floors	E	Ildg. A	Age	
Swedesboro							5,398	2		+-50	0.72	
County (6)				Co	unty Code (7)(STATE USE ONLY)	Current Use (Price	or if being demoli	shed)	_		_
Gloucester							Verizon	5				
Name of Monitoring Firm Hired by Bu	ilding C	wner	(8)	ASCI	/I No.	Name of Abateme	ent Contractor (9)					
USA Environmental Managem	ent In	IC					VIRONMENTAL	INC				
Street Address						Street Address	TITOTTILL	, 1140.				
8436 Enterprise Ave						1123 BEAVE	CTDEET					
City, State, Zip Code												
Philadelphia, PA 19153						City, State, Zip Co						
Project Manager for Monitoring Firm			1			BRISTOL, PA	19007	Separati				
Mark Jenkins				ephone		Telephone No.		License No.				
	0-1-1	1 10	1		5 5870	215-788-6040		00509				
11 /13 /18					ate (11) 18	Name of OSHA M BRISTOL EN	onitor VIRONMENTAL	, INC			(a) (a)	
Occupancy Status During Abatement	(Check	only o	one)			Street Address						
☐ Facility Closed/Vacated During Ent				ment		1123 BEAVER	STREET					
Abatement Performed Outside of N	lormal I	Facilit	y Hou	rs - De	scribe	City, State, Zip Co						
Time of Abatement:AM	PM	/ <u>5:00</u>	PM- <u>2</u>	00AM	ř.	BRISTOL, PA						
Scope of Work (Check all that apply)						design of the second						_
≥3 sf or ≥3 lf	1	⊠ Re	novat	on			ainment with Nega	tive Pressure				
≥160 sf or ≥260 lf		☐ De				☐ Glovebag	Procedure					
						☐ Non-Exer	npted (*) and Non-	Friable Procedur	е			
			Locat						Ab	atem	ent T	vne
Location of Asbestos-Containing Material (ACN			lorma d Sole			Description of				_		
TO BE ABATED	ⁿ⁾	Mai	intena	nce/		stos Containing Mat , thermal systems in		Amount	Removal	Repair	nc	Enclosure
IN Facility		Cust	odial	Staff?	(,,,,,,	surfacing, VAT,		(Specify SF or LF)	SVO	ai-	sde	OSL
(13)	-		(12)	1	-	other miscellaneo		or or Er y	=		Encapsulate	6
		Yes	No	N/A							Œ	
Generator Room				\boxtimes	VAT/Mas	stic		270 SF		П		
		П										
									1			
Name of Decision 1981												
Name of Registered Waste Hauler			0.0000	JDEP I		Cubic Yards of	Name of Registe	red Landfill				
SERVICE TRANSPORT GROUP	, INC.		In	auler II 20990	50001111710	Waste	MINERVA LA	NDFILL				
City, State						Disposal Date	City, State		- 14 / 15 -			
YARDLEY, PA						TBD	WAYNESBU	RG. OH				
Completed By (Print or Type)	Title			-		Signature		Dat	0			
Dillan DeCaro	1000000	imat	or			Dillar	DeCaro	One 10	e)	30	-//	P

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1000					(aunt to n	UA	0.00 and 5:	10)	9				
Date of Notification (1)			200		N	ame of Build	ding	Owner/Operator	(2)	, i	77.04 17.04	1		
	26 /	1	8			Lakehurs	t Sc	hool District		[14 - 14 N.7		10		
Agencies Notified	Type Notif	fication	n		S	treet Addres	s							- 1
57	Initial					301 Unior	Av	'e			2.1	21	110	
☑ DOLWD □						ity, State, Zi				NOV	£.	21)18	
	Amend Emerge	ment	# <u>1-11</u>	/16/1	Ö	Lakehurst								
(NJAC 5:23-8)	justifica	ation)	includi	ng	_	ame of Cont	77.			Talashaa N		41	31	
	Cancell				10000	Mr. Loren		orina		Telephone Nu		* .		
								ORMATION		732-657-57	741			
Name of Facility Where Aba	atement is	Takir	ng Plac	ce (3)		FACILITY	INF	URIVIATION	T					
Lakehurst Elementar	v Schoo	I	.5	00 (0)					Type of Facilit					
Street Address									School (K-	12) r 8 (Other than K-1	2)			
301 Union Ave									☐ Other (i.e.,	private and comm	ercial b	ouildi	ngs,	
City (5)							_		homes, etc	:.)			12 W	
Lakehurst									Square Feet	# of Floors	E	Bldg.	Age	
County (6)						ounty Code	/7\/0	STATE USE ONLY)			- 170			
Ocean						ounty code	(1)(0	TATE USE UNLY)	Current Use (F	Prior if being demo	lished)			
Name of Monitoring Firm Hi	red by Bui	ildina	Owner	(8)	IASO	CM No.	1.6	lome of Abeter						
TTI Environmental Inc		9	Omici	(0)	7.00	JIVI INO.	1	Name of Abateme						
Street Address							1		VIRONMENTA	AL, INC.				
1253 N Church St							5	Street Address						
City, State, Zip Code		-					1	1123 BEAVE						
Moorestown, NJ 0805	7						10	City, State, Zip Co			SI 420 HE A			
Project Manager for Monitor		70 C		To	lonho	no Na	-	BRISTOL, PA	19007					
Mike Keehn	9					ne No. 86-8800	1	elephone No.		License No.				
Start Date (10)	· · ·	School	dulad (- 1		Date (11)	1.	215-788-6040		00509				
11/13/	18					/ 18	N	lame of OSHA M						
Occupancy Status During Ab					-	10		BRISTOL EN	VIRONMENTA	L, INC.				
Facility Closed/Vacated D	Datement (Cnec	K only	one)			S	treet Address						
Abatement Performed Ou	uning ⊏nu itside of N	lormal	Facilit	Abat	ement			1123 BEAVER						
I ime of Abatement: 7:00	AM-3:30	PM/	P	.у 110 М-	uis - L A	M		ity, State, Zip Co						
Scope of Work (Check all that				-				BRISTOL, PA	19007					
	at apply)													-
⊇ ≥3 sf or ≥3 lf			⊠ Re	nova	tion			☐ Mini-Encl	ainment with Ne	gative Pressure				
⊠ ≥160 sf or ≥260 lf			☐ De	molit	ion			☐ Glovebag	Procedure					
		-	1-1-	1				Non-Exer	npted (*) and No	n-Friable Procedu	ire			
Location of				Loca Norm				D			Ab	atem	ent 7	ype
Asbestos-Containing Mate	erial (ACN	1)	Use	d So	lely by	Asbe	estos	Description of Containing Mat	erial (ACM)	A == 0 t	R	R	Ш	П
TO BE ABATED IN Facility	2				ance/	li (i c	e., th	ermal systems in	nsulation,	Amount (Specify	Removal	Repair	nca	ncio
(13)			000	(12	22		_	surfacing, VAT,	or	SF or LF)	va	=	Encapsulate	Enclosure
F			Yes	No	N/A	A	U	ther miscellaneo	us)				ate	0
Rooms 1-9, Custodial of	fice &			\boxtimes	П	Floor #	ilo o	and mastic			+			_
Rooms 1-9, Custodial of	fice &				$+$ $\overline{-}$			ind mastic		8,358 SF				
orrodor	noc d			\boxtimes		Glue de	ots			450 SF				
Rooms 12-15 & 17-21						Floor ti	le a	nd mastic	9	6,550 SF		П		
coms 23-30, Server Rm	, Conf R	lm			In	Floor ti	le a	nd mastic			-		1	-
ame of Registered Waste Ha	auler					Waste		bic Yards of	Name of Deci	9,970 SF		Ш	Ш	L
SERVICE TRANSPORT	GROUP	, INC		11/2	Hauler	ID No.		aste	Name of Regis				100	
ity, State		<i></i>			2099	90	Di	nesel D. I		LANDFILL				
NEW CASTLE, DE 1972	20						DIS	sposal Date	City, State					
ompleted By (Print or Type)		Ti41-							WAYNESB	URG, OH 44688	3			
Brian Scafiro		Title	4i 1					Signature	1 0.	1 · Da	te /	1	_	
R-41		ES	timat	OF				Gron x	Scofino 1	d 1	1/16	11	8	

Pa 2

Date of Notification (1)	10			Na		ding Owner/Operate						
10/	26 /	18				t School District						
Agencies Notified	Type Notificati			_				E 70	(22)	· ~		
⊠ EPA	☑ Initial	On		11	eet Addres 801 Unior		r : ;	<u> </u>				- 1
☑ DHSS	Amended Amendmen	+ #4 44	1461	Cit	y, State, Zi	p Code		118				
	Emergency justification	(includ	ing	L	akehurs	t, NJ 08733		NOV	2.1	2018		
	Cancellation				me of Cont		18 30	Telephone N	lumber			
		<u>. </u>			fr. Loren		<u> </u>	732-657-	5741			
Name of Facility Where Aba				F	ACILITY	INFORMATION	100	96 - 12(7.0			
Lakehurst Elementary	Cobool	ing Pla	ce (3)				Type of Facility	(4)			40 0	=
Street Address	3011001						School (K-1:	2)				
301 Union Ave							Subchapter	8 (Other than K	(-12)			
City (5)							Other (i.e., p)	mercial	buildi	ngs,	
Lakehurst							Square Feet	# of Floors		Bldg.	Δσο	_
										Diag.	nge	
County (6) Ocean				Co	unty Code	(7)(STATE USE ONLY	Current Use (Pr	ior if being dem	olished	1		
								io. ii boilig dell	iolisileu	,		
Name of Monitoring Firm Hir	ed by Building	Owne	r (8)	ASCI	M No.	Name of Abater	ment Contractor (9)					
TTI Environmental Inc	•						NVIRONMENTA					
Street Address		00-01-0				Street Address	. TOTAL TAI	L, INC.				
1253 N Church St						1123 BEAVE	FR STREET					
City, State, Zip Code						City, State, Zip (
Moorestown, NJ 08057						BRISTOL, P						
Project Manager for Monitorin	ng Firm		Te	lephone	No.	Telephone No.	A 13007	1				
Mike Keehn					6-8800	215-788-604	0	License No.				The Section
tart Date (10)	Sche	duled (ate (11)	Name of OSHA	(7);	00509				
11 /13 /1				4 /			NOTITO NVIRONMENTAL	INIO				
Occupancy Status During Aba	atement (Che	ck only	one)				ANKOMMENTAL	, INC.				
J Facility Closed/Vacated Dia	uring Entire P	eriod of	Abat	ement		Street Address						
Abatement Performed Out	side of Norma	I Facili	hy Hou	iro Do	scribe	1123 BEAVE						
Time of Abatement: 7:00	M- <u>3:30</u> PM/_	P	M	AM		City, State, Zip C						
cope of Work (Check all that	apply)					BRISTOL, PA	A 19007					
] ≥3 sf or ≥3 lf	,	12.				☐ Full Con	tainment with Nega	4 D				_
2 ≥3 \$1 \$1 ≥3 \$1 2 ≥160 \$f or ≥260 \$f		⊠ Re	enova	ion		☐ Mini-End	closure	tive Pressure				
		☐ De	moliti	on		Gloveba	g Procedure					
		Is	Loca	tion		⊠ Non-Exe	empted (*) and Non-	-Friable Proced	lure			
Location of		1	Norma	ally		Description of	ve .		At	atem	ent 7	Гур
Asbestos-Containing Mate TO BE ABATED	rial (ACM)	Use	ed Sol intena	ely by	Asbe	stos Containing Ma	iterial (ACM)	Amount	Re	R	ш	1
IN Facility		Cus	todial	Staff?	(i.e	., thermal systems	insulation.	(Specify	Remova	Repair	ncar	
(13)		V-	(12)	1		surfacing, VAT other miscellane	ous)	SF or LF)	Val	-	Encapsulate	
ooms 23-30, Server Rm,	Conf Rm	Yes	No	N/A	01 -						te	
Carridar					Glue Do	ots		710 SF				1
												[
me of Registered Mary									П			Г
me of Registered Waste Ha			100	JDEP V		Cubic Yards of	Name of Registe	red Landfill			П	1
SERVICE TRANSPORT	GROUP, INC) .	H	auler ID 20990	2	Waste	MINERVA LA					
y, State				20330		Disposal Date						
						-Francisco	City, State					
IEW CASTLE, DE 19720					- 1		MAVEITOR	00 011	_			
NEW CASTLE, DE 19720	Title					Signature	WAYNESBU	RG, OH 4468	8			

Pg. 1

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

Chut 3459

Date of Notification (1)	, , ,			Na	ame of Build	ing Owner/Operator	(2)				_	
	26 / _	18				School District	(-)				ń.	
Agencies Notified ⊠ EPA 9267 ⊠ DOLWD 928 \	Type Notificati ☑ Initial ☐ Amended	on			reet Address 301 Union				- 1			
DHSS 9274	Amendmen	t#		1	y, State, Zip			MON	1 0	1 2	018	-
I □ DCA	☐ Emergency	(includ	ling	-		NJ 08733		1473		1	VIO	
(NJAC 5:23-8)	justification Cancellation				me of Conta		10	Telephone Nur	mber			
	Li Cancellation	n ———	_		/ir. Loren i			732-657-57	41			
Name of Facility VAII Al				F	ACILITY I	NFORMATION						
Name of Facility Where Al		king Pla	ace (3)			<u></u>	Type of Facility					575.00
Lakehurst Elementa Street Address	ry School						School (K-12)				
301 Union Ave							Subchapter 8	(Other than K-1 ivate and comm	2) ercial	huildi	nac	
City (5)							nomes, etc.)	and commi	Ciolai	Dunai	nys,	
Lakehurst							Square Feet	# of Floors		Bldg.	Age	
County (6)				10								
Ocean				100	ounty Code (7)(STATE USE ONLY)	Current Use (Pri	or if being demol	ished))		
Name of Monitoring Firm H		Owne	er (8)	ASC	M No.	Name of Abateme	ent Contractor (9)			-		
TTI Environmental In	c.					BRISTOL EN	VIRONMENTAL	, INC.				
Street Address						Street Address						
1253 N Church St						1123 BEAVE	R STREET					
City, State, Zip Code						City, State, Zip Co	ode			-		
Moorestown, NJ 0805						BRISTOL, PA	19007					
Project Manager for Monito Mike Keehn	ring Firm		1.0	lephon		Telephone No.		License No.				
Start Date (10)	101				6-8800	215-788-6040		00509				
11 /13 /					Date (11)	Name of OSHA M						
				4_ /	18	BRISTOL ENV	/IRONMENTAL	, INC.				
Occupancy Status During A Facility Closed/Vacated I	During Entire D	ck only	one)			Street Address						
Abatement Performed O	utside of Norma	eriod o	t Abate	ement	scribo	1123 BEAVER						
Time of Abatement: 7:00	DAM-3:30PM/	F	PM	AN	A	City, State, Zip Co						
cope of Work (Check all the	at apply)	-				BRISTOL, PA	19007					
] ≥3 sf or >3 if		5 5	2000	•	20	☐ Full Conta	inment with Nega	tive Pressure				
2 ≥160 sf or ≥260 lf		⊠ R	enovat emoliti	ion on		☐ Mini-Enclo	osure					
			511101111	011		☐ Glovebag ☒ Non-Exen	Procedure opted (*) and Non-	Friable Procedu	ro			
		1	s Loca				T		_	patem	ort 7	
Location of Asbestos-Containing Mat	erial (ACM)		Norma ed Sole		0-1	Description of				1	Г	Ť
TO BE ABATE	D	Ma	aintena	nce/	Asbes (i.e.	tos Containing Mate thermal systems in	erial (ACM)	Amount	em	Repair	nca	Firefootie
IN Facility (13)		Cus	todial (12)	Staff?		surfacing, VAT, o	or	(Specify SF or LF)	Remova	¥.	sde	0
(10)		Yes	No	N/A	1	other miscellaneou	us)	N Le STIAN I SERVICITION	-		Encapsulate	0
ooms 1-9, Custodial of	fice &				Floor tile	and mastic		8,358 SF	N			-
ooms 1-9, Custodial of	fice &				Glue dot			450 SF				1
ooms 12-15 & 17-21					Floor tile	and mastic		6,550 SF				L
ooms 23-30, Server Rm	, Conf Rm	П		П	-	and mastic		- 10 • 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		Ш	П	L
Corridor ime of Registered Waste H	auler			JDEP 1	1		N (5)	9,970 SF				
SERVICE TRANSPORT		.	H	auler II	O No.	Cubic Yards of Waste	Name of Register					
y, State	,			20990		Diamens! D!	MINERVA LA	NUFILL				
NEW CASTLE, DE 1972	20				1	Disposal Date	City, State					
mpleted By (Print or Type)	V-5						WAYNESBUR	RG, OH 44688				
Brian Scafiro	Title		12:00			Signature	0 15	On Date	100			
	E	sumat	or			Brian.	Scapero 1	AL 10	1-2	6-1	18	
1-41 B.S.18140	Es	stimat	or		2 3	Brian	S'cofiro/	D 10) -d	6-1	18	2

Pg. 2

Date of Notification (1)				1	Name of Bu	ilding Owner/Opera	for (2)		7 1	475		
	_ / _	18	_			st School Distric						
Agencies Notified Typ	e Notifica	ation	-	-	Street Addre			NO.	W S	1 2	019	
⊠ EPA ⊠ I	nitial				301 Unio		80	140	4	-	UIU.	
	mended			-								
	mendme			10	ity, State, 2				1			
DCA DCA	mergen	cy (inclu	ding	_		st, NJ 08733						
	ustification			N	ame of Cor			Telephone N	umber			_
	ancenat	ion				r Fuhring		732-657-5	741			
Name of Facility Where Abater					FACILITY	INFORMATION						_
Lakehurst Elementary S	nent is i	aking P	ace (3)			Type of Facility					_
Street Address	CHOOL						School (K-	12)				
301 Union Ave							Other (i.e.	8 (Other than K- private and comm	12)			
							homes, etc	.)	nerciai	Duildi	ngs,	
City (5)							Square Feet	# of Floors	1	Bldg.	Λαο	_
Lakehurst								611 10013		Diug.	Age	5
County (6)				10	County Code	(7)(STATE USE ONL	Y) Current Use (P	rior if boing days				_
Ocean							, - S	in being demo	nsned)		
Name of Monitoring Firm Hired	by Buildi	ng Own	er (8)	AS	CM No.	Name of Abote	ment Contractor (9	1				
TTI Environmental Inc.				1.0								
Street Address							NVIRONMENTA	L, INC.				
1253 N Church St						Street Address						_
City, State, Zip Code							ER STREET					
Moorestown, NJ 08057						City, State, Zip					(00)	-
Project Manager for Monitoring F						BRISTOL, I	PA 19007					
Mike Keehn	ırm		- 1		ne No.	Telephone No.	7	License No.				_
					86-8800	215-788-60	40	00509				
Start Date (10)	Sc				Date (11)	Name of OSHA	Monitor					_
					/18	BRISTOL E	NVIRONMENTA	L. INC.				
Occupancy Status During Abater	nent (Ch	eck only	one)			Street Address						
Facility Closed/Vacated Durin	g Entire	Period o	f Abat	ement		1123 BEAV	FR STREET					
Abatement Performed Outside	of Norr	nal Faci	ity Ho	urs - D	escribe	City, State, Zip						
Time of Abatement: 7:00AM-	3:30PM	/	PM	A	M	BRISTOL, P						
cope of Work (Check all that ap	oly)					DINISTOL, P	A 19007					
(2.d)	37					☐ Full Co	ntainment with Neg	otive Danner				
] ≥3 sf or ≥3 lf] ≥160 sf or ≥260 lf			enova				closure	auve Pressure				
2 - 100 31 01 - 200 11			emolit	ion		Gloveb	ag Procedure					
		1	s Loca	otion		⊠ Non-Ex	empted (*) and Nor	n-Friable Procedu	ıre			
Location of			Norm			D''			At	atem	ent T	Гу
Asbestos-Containing Material	(ACM)	Us	ed So	lely by	Asb	Description estos Containing M	of aterial (ACM)	A	Z	Z	m	T
TO BE ABATED			ainten	ance/ Staff?	1 (i	e., thermal systems	insulation.	Amount (Specify	l am	Repair	nca	1
IN Facility (13)		00	(12)			surfacing, VA	T, or	SF or LF)	Removal	=	psu	
		Yes	No	N/A		other miscellan	eous)				Encapsulate	
ooms 23-30, Server Rm, Co	nf Rm				-	-4-						
Corridor		-		1-	Glue D	OIS		710 SF				
									П	П		+
									1		7	+
				-								
			14		1							I
me of Registered Wasta Havi-					Waste ID No.	Cubic Yards of	Name of Registe	ered Landfill				Γ,
				duiti	INU.	Waste	MINERVA L	ANDFILL				
ERVICE TRANSPORT GR		IC.	1"		0		1					
ERVICE TRANSPORT GR		IC.		2099	0	Disposal Date	City, State			_	_	_
ERVICE TRANSPORT GROW, State		IC.			0	Disposal Date	City, State WAYNESBI	IRG OH MAGO				
me of Registered Waste Hauler SERVICE TRANSPORT GRO y, State JEW CASTLE, DE 19720 mpleted By (Print or Type)					0	10 00000000000		IRG, OH 44688	1			
SERVICE TRANSPORT GRO 7, State SEW CASTLE, DE 19720	OUP, IN				0	Disposal Date Signature		Da Da				

	KA		011					3:60 and 5:1		har k	4	- ^)4	7	7
Date of Notification (1)					Name	e of Buildin	ng Ow	vner/Operator	(2)	HECK	71		1		V
11 /	16 /	18	•						al Associates,	LLC			il e	-	1 1
Agencies Notified	Type Notific	cation			Stree	t Address				-171					
☑ EPA ☑ DOLWD	☐ Initial				5 F	owell La	ane		it.					1	
☑ DOLWD	Amende Amendn				City,	State, Zip	Code		7	N	OV 2	1 2	018		1 /
DCA	☐ Emerger		dina		Co	llingswo	od, N	NJ 08108							-
(NJAC 5:23-8)	justificat	tion)	9		Name	of Contac	ct			Telephone	Number		8		
	☐ Cancella	ation	50000		Ge	offrey Lo	ong			856-662	-1730			, i t	
					FA	CILITY IN	NFOF	RMATION				-	11 50		80.
Name of Facility Where A	Abatement is	Taking Pl	ace	(3)					Type of Facility (4	4)					
									School (K-12)						
Street Address									Subchapter 8	(Other than	K-12)				
									Other (i.e., pri homes, etc.)	vate and cor	nmercial	build	lings,		
City (5)									Square Feet	# of Floors	;]	Bldg	. Age		
Clinton									6600	2		13	una Te		
County (6)					Cour	nty Code (7	7)(STA	TE USE ONLY)	Current Use (Pric	or if being de	molished	1)			
Hunterdon									residential p						
Name of Monitoring Firm			er (8	3)	ASCM	No.	Nai	me of Abateme	ent Contractor (9)				-		-
Atlas Environmenta	al Inspectio	ons					P	lymouth En	vironmental Co	., Inc.					
Street Address								eet Address							
PO Box 11645							9	23 Haws Av	е						
City, State, Zip Code		- 37	-7-				City	y, State, Zip Co	ode						
Philadelphia, PA 19	116						N	lorristown, I	PA 19401						
Project Manager for Moni	toring Firm			Tele	phone	No.	Tel	ephone No.		License No	0.				
Jason Dua				26	7-784	-4693	6	10-239-9920	8	00398					
Start Date (10)		Schedule	d Co	mple	tion Da	te (11)	Nar	me of OSHA N	lonitor						-
12 /3 /	18	12	1	31	/ _	18	P	lymouth En	vironmental Co	., Inc					
Occupancy Status During	Abatement (Check on	ly or	ne)				eet Address							-
□ Facility Closed/Vacate					nent			23 Haws Av	e						
☐ Abatement Performed	Outside of N	ormal Fac	cility	Hour	s - Des	cribe	- 100	, State, Zip Co							-
Time of Abatement: 7:	:00AM- <u>3:30</u>	PM/	_PM	1	AM			lorristown, F							
Scope of Work (Check all	that apply)								7 10401						
	11.27	_						☐ Full Cont	ainment with Nega	tive Pressur	е				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 				ovationolitio				Mini-Enc	losure						
		ш	Dell	TOITUO	11			⊠ Gloveba ⊠ Non-Exe	mpted (*) and Non-	-Friable Proc	edure				
				Locati							-	Abate	ement	Tvr	ne
Location				ormal Sole				Description o			-				
Asbestos-Containing N TO BE ABA		/1/		ntena	, ,			Containing Ma rmal systems i		Amount		Removal	Renair	200	Enclosure
IN Facilit		0		dial S	Staff?	(1.6		urfacing, VAT,		(Specify SF or LF) 3	200	ii Pou	2	INSC
(13)		-		(12)			oth	ner miscellane	ous)			_	Renair	2	е
		Ye		No	N/A										
Basement						-		ion and deb	ris	10LF					
Basement Exterior					\boxtimes	fue pac				4SF	5	3 [ПГ	7	П
1st floor						floor til				2 000 SF		_	7 -	7	
2 nd floor						nine ins				1001 F			_ _	4	
ASE SECTIONS	-11- 1			Ц		pipe ins				100LF					
Name of Registered Wast	e Hauler			1000	JDEP V auler ID		Cub	oic Yards of	Name of Registe						
Freehold Cartage					15939		5(Fairless Lar	dfill					
City, State								oosal Date	City, State						
Freehold, NJ							12	2/31/18	Morrisville,	PA					
Completed By (Print or Ty	pe)	Title						Signature			Date	,	,		
James M. Kelly		Vice	Pre	side	nt				The second secon		11	/16	118	>	

Check#3210

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Date of Notification (1)				Name	of Building	Owner	Operator (2)					
	1	_	(Chris V	Valdes				NOV	21 2	2018	į.	
	tification			Street	Address							- 4	
☐ EPA ☐ Initia									L. at expo-				
☑ DOLWD ☐ Amer ☑ DHSS Amer	nded ndment #		1	City, S	tate, Zip C	ode				101 ₁₋₃	217	35.63	
	rgency (inc	dudina	1	North :	Bergen, N	J 0704	17						
	fication)	,,uu,,,,g			of Contact				Telephone Nur	mber			
☐ Cano	cellation		(Chris \	Valdes				N				
				FAC	CILITY IN	FORM	ATION		<u> </u>				
Name of Facility Where Abatemen	t is Taking	Place (3)			-32500		Type of Facility	(4)				
Private house								School (K-12					
Street Address				-					3 (Other than K-1 rivate and comm		ildina	<u> </u>	
								homes, etc.)		El Clai Du	Hullig	5.	
City (5)	-							Square Feet	# of Floors	Bl	dg. Ag	ge	
North Bergen, NJ 07047													
County (6)				Count	y Code (7) (STATE (JSE ONLY)	Current Use (Pr	ior if being demo	lished)			
Hudson													
Name of Monitoring Firm Hired by	Building C	wner (8) /	ASCM I	No.	Name	of Abateme	nt Contractor (9))				
						Gr Te	ch LLC						
Street Address							Address						
						576 V	alley Rd #	283					
City. State, Zip Code					***************************************		State, Zip Co						
						Wayn	e, NJ 0747	0					
Project Manager for Monitoring Fir	rm		Tele	phone I	No.	Teleph	none No.		License No.				
						973-63	38-1777		01127				
Start Date (10)		uled Co	mplet	ion Dat	te (11)	Name	of OSHA M	onitor					
11 / 26 / 18	I	1 /	27	/ _	18	Enviro	vision Co	nsultants,Inc					
Occupancy Status During Abatem	ent (Check	only or	ne)			-	Address						
□ Facility Closed/Vacated During						20-21	Wagaraw	Road, Bldg .#	35E				
Abatement Performed Outside Time of Abatement:AM	of Normal	Facility	Hour	s - Des	cribe		State, Zip Co						
Time of Abatement.	·	VII			AIVI	Fair L	awn, NJ 0'	7410					
Scope of Work (Check all that app	oly)						d i		nation with negat	ive pres	sure		S
		⊠ Rer	novati	on		-	Mini-Enc	tainment with Ne Iosure					
☐ ≥ 160 sf or ≥260 lf			nolitic			X	Glovebag	g Procedure	Tent with Negati	ive Press	sure		
							Non-Exe	mpted (*) and Ne	on-Friable Proced		1		
Location of		100	Locat Iormal			-	laasistiss s	e.		Ab	atem	ent T	ype
Asbestos-Containing Material	(ACM)	Use	d Sole	ely by	Asbe		lescription on ntaining Ma	terial (ACM)	Amount	Re	Repair	En	Enc
TO BE ABATED		100,000	ntena	nce/ Staff?		., therm	al systems	insulation,	(Specify	Removal	pa.	ap	Enclosure
IN Facility (13)		Cust	(12)	Stall			facing, VAT, miscellane		SIF or LF)	à	7	Encapsulate	ure
(10)		Yes	No	N/A		Other	imocenane	ous)				6	
5		П П	П	×	p:	1			100 1 5	\boxtimes			1
Basement					Pipe inst	liation			100 LF				느
		Ш								$\sqcup \sqcup$	Ш		Ш
		П	П	П									
Name of Registered Waste Haule	r		Nur	1	Hauler ID No.	Cubic '	Yards of Wast	e Name of Regi	stered Landfill				
1072								2					
Gr Tech LLC City, State			(003378	50		BD sal Date	T.R.R.F. Inc					
						50000000000000000000000000000000000000			87				
Wayne, NJ 07470	700					1	BD	Tullytown, F		Det			
Completed By (Print or Type)	Title	5				18	Signature	ewic Wend	0	Date			
N.Jevtic	Ow	ner						ewic Wend	rd	11/16/1	8		
ASB-41							//						

Date of Notification (1) 11/14/2018	1 1		Nan	ne of Building O	wner/Operato			<i>V.</i>	. 12	- '.	177
Agencies Notified Type Notifica	tion			rbara Sexton				NOV 2	1	2018	1
EPA Initial				et Address				NUV Z		2016	-
- Fmerger	ed nent # ncy (includ	lina	City,	State, Zip Code ona, NJ 0704	14		Lan	11.24		6	
DOH justificat Cancella	ion)	mig		e of Contact bara Sexton			Teleph	one Numb			
Name of Facility Where Abatement is Ta	=.		F	ACILITY INFOR	MATION						
House	aking Place	e (3)				Type of Facilit	y (4)				
Street Address						School (k Subchap Other (i.e	<-12) ter 8 (Other the private & co	nan K-12)	wildin	ias ha	maa
City (5) Verona						Square Feet	# of Flo			g. Age	
County (6) Essex			Count (STAT	ty Code (7) E USE ONLY)		N/A Current Use (F	N/A Prior if being d	emolished	N/A	١	
Name of Monitoring Firm Hired by Buildin N/A	ng Owner ((8)		CM No.	Name	of Abatement C	ontractor (9)				
Street Address						Abatement,	Inc.				
City, State, Zip Code					11 R	Address Osengren Ave	enue				
Project Manager for Monitoring Firm			N.		City, St Totov	ate, Zip Code va, NJ 07512			7 + 25 - <u>2</u>		
0.7.0				ione No.	Telepho			ense No.			
Start Date (10) 11/29/2018	11/30	/2018	ompletion	Date (11)	Name o	of OSHA Monitor Abatement, In	-				
Occupancy Status During Abatement (Ch					Street A		IC.				
Facility Closed/Vacated During Entire Abatement Performed Outside of No. Other – Describe: occupied	Period of	Abate ty Hou	ement rs		11 Ro	sengren Ave	nue				
Scope of Work (Check All That Apply)					Totow	a, NJ 07512					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renov Demol			×	Full Containm Mini-Enclosure Glovebag Prod	e cedure				
		Locat				Non-Exempted	(*) and Non-	Friable Pr			
Location of Asbestos-Containing Material (ACM)	Use	Norma ed Sole	ely by	Ashastas C.	escription of	r				temen ype	-
TO BE ABATED In Facility (13)		intena todial ((12)		sur	al systems ir facing, VAT, miscellaned	nsulation, or	Amount (Specify SF or LF)	Z.	Repair	Encapsulate	Enclosure
Door	Yes	No	N/A					20	=	ilate	ure
Basement		X		Pip	e insulatio	n	90 LF	Х			
ame of Registered Waste Hauler		1.0									
&S Abatement, Inc.		H	JDEP Wa auler ID I 1996		e Yards aste	Lancas and a second	egistered Lar lanagemen				
y, State towa, NJ 07512				Dispo	sal Date	City, State		IL OI PA			
mpleted by d Joksimovic	Title	+ 11-		TBD	Signature	Morrisvill	e, PA	Date			
25 MARCHAN (1995)	Projec	i iviai	nager			5/10/		11/14/2	018		

Date of Notification (1) 11/14/2018/	是 是 是 是	U"		Name of Rob H	Building iggins	Owner/C	Operator	(2)		NOV	21 /	018			
Agencies Notified Ty	pe Notification			Street A	ddress		10111	3	- 1	NO:		UIO		1	
X EPA X DEP X DOL	Amended				te, Zip Co				*				Tr.	_	
Total Control	Amendment Emergency				Rock, NJ Contact	0/452				Tolo	phone Nu	mhor	164		
DOH DCA	justification) Cancellation		100	Rob H						1 166	priorie Nu	mber			
				FACI	LITY INFO	ORMATI	ON								
Name of Facility Where Aba House	tement is Takin	g Place (3)							of Facility (4	NS					
Street Address									School (K-1. Subchapter		er than K-1	2)			
									Other (i.e. p	rivate &	commerc	ial buil	dings,	home	es,
City (5) Glen Rock									e Feet	# of N/A	Floors		ldg. A	ge	
County (6) Bergen				County (Code (7) JSE ONLY)			Curre	nt Use (Prid se	or if beir	ng demolis	hed)			
Name of Monitoring Firm Hir N/A	red by Building (Owner (8)		ASCM	l No.				ement Con ement, IN		(9)				
Street Address				1			Street 11 R		s gren Aver	nue					
City, State, Zip Code									p Code J, 07512						
Project Manager for Monitor	ing Firm		Telephor	ne No.		Teleph 973-3	one No 345-86			License I	No.				
Start Date (10) 11/28/2018		Scheduled		npletion (Date (11)				IA Monitor ement, In	C.					
Occupancy Status During Al	batement (Chec	k Only One)				Street	Addres	S						
Facility Closed/Vacated Abatement Performed	Outside of Norm	Period of Ab	atem	ent					ren Aver	nue					
Scope of Work (Check All Ti	ıpied								J, 07512						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	пат Арргу)	-	nova moliti				×	Min Glo	Containme i-Enclosure vebag Prod i-Exempted	edure	ñ			e	
		ls L	ocati	on									Abate	ement	t
Location of Asbestos-Containing Ma <u>TO BE ABATE</u> In Facility (13)		Used Main Custo	tenar	ly by nce/		tos Cont thermal surfa	scription taining M systems cing, VA niscellan	laterial s insula T, or		(S	mount pecify or LF)	Remova	Repair	e Encapsulate	Enclosure
		Yes	No	N/A								=		ate	O.
Basement	:		Х			Pipe	Insula	tion		11	5 LF	Х			
Name of Registered Waste I	Hauler		9200	JDEP W		Cubic of Wa	Yards		Name of	Registe	red Landfi	II			-
D&S Abatement, Inc.)996	140.	TBD			Waste I		gement o	of PA				
City, State Totowa, NJ			WE -			Dispo: TBD	sal Date		City, State Morrisv		A				
Completed by Ned Joksimovic		t Ma	nager		S	Signature	7	R		100.73	ate 1/14/:	2018			

Date of Notification (1)			IN				12).		(Check #	# 16	01				
November 15, 2018					ne of Buil P. Morgai	ding Ow	ner / Operato	32									
Agencies Notified Type Notification					et Addres	SS				enomen ouge pomormics		1, 4					
□EPA □DEP					1 Polaris		ay	14.	ECHILL								
DOL	Init			City	State &	Zip Code	e	# 5 t 1 # 5 t 1	77	11014 C 1	0010			11			
⊠DOH □DCA	Am	ended endment #	#		umbus, (10	b b		NOV 2 1	2018			ė į			
	L Ca	ncellation		1 2000	ne of Conf			į	1		Telepho	ne N	umb	oer			
					k Tavere				1-1	Les.	516-574	-630	9				
Name of Facility Whe	re Abatemen	t is Taking	Dlace (3)		ACILIT	Y INFO	RMATION	**									
Chase Bank	. o r ioutorrior	r is raking	r lace (5)				Type of Fac	cility (4) of (K-12)									
Street Address	350							apter 8 (Other th	nan K-12)								
15 Bowling Green P				○ Other	comme	commercial buildings, home, etc.)											
City (5)							Square Fee	et # of	of Floors Bldg. Age								
Lake Hopatcong							Current Use	e (Prior if being o	1 50 Years								
County (C)							Bank	e (Filor ii beilig c	iemolisne	a)							
County (6) Morris County			County Co USE ONLY	de (7)													
Name of Monitoring F	irm Hired by	Building O	wner (8)		ASCN	/ No.	Name of Ah	atement Contra	otor (0)								
Apex Companies, LL Street Address	.C						Synatech, I Street Addre	nc.	ctor (9)								
Street Address 120D Wilbur Place																	
City, State & Zip Code						829 Radio Road City, State & Zip Code											
Bohemia, NY 11716							Little Egg F	larbor, NJ 0808	87								
Project Manager for Monitoring Firm Telepho Steve Cotrone 631-567					Number		Telephone Number License Number										
Scheduled Start Date (10) Scheduled Completion D					(11)			SHA Monitor 00817									
November 30, Occupancy Status Dur		nt (Check	Decen	nber 30, 2	2018		Synatech, I	nc.									
☐ Facility Close	d/ <u>Vacated</u> Du	iring Entire	Period of	Abateme	ent		Street Addre										
Abatement Pe		side of Nor	rmal Hour	S	City, State & Zip Code												
Facility Occup	ied During A						Little Egg H	larbor, NJ 0808	37								
Scope of Work (Check	all that apply	')											_				
□ >2 of If								Full Containme	ent with N	egative Pres	sure						
≥3 sf or ≥ lf ≥160 sf or ≥260	ı£		H	Renovat			\boxtimes	Mini-Enclosure)	•							
Z 2100 \$1 01 2200	II		Ш	Demolition	on			Glovebag Prod	cedure								
Loca	tion of		Ila I anat	an Massa	-11. 11. 1			Non-Exempted	d(*) and N	lon-Friable F	rocedu	re					
Asbestos-Contain	ing Material (ACM)	Solely b	y Mainte	ally Used nance or		Descript Asbestos-C		Amo	Amount (Specify			Abatement Type				
	ABATED acility			dial Staff			Material	(ACM)		SF or LF)							
	3)						(i.e., therma nsulation, sur	ll systems					т	Г			
							or other misc	cellaneous)			Re	Z	nca	Enc			
											Removal	Repair	psu	Enclosure			
			Yes	No	N/A						l a	4	Encapsulate	ıге			
Sales Area					Х		Carpet N	Mastic	-	725 SF	X		- 1	┰			
ales Area					х		Floor Tile ar			725 SF X							
IVAC Room					Х		Pipe Insu	ulation	10 LF	X							
lame of Registered Wa	aste Hauler		NJDEP \		Cubic \	ards of	Waste Name of Registered Landfill						_	1			
ynatech, Inc.				429	12		Fairless Hills										
ity, State		-			Disposa	al Date	City, State										
ittle Egg Harbor, NJ	08087				Januar	y 2, 201	۵	Morrisvill									
ompleted By		Title			Signatu		19 Morrisville, PA Date										
iane Aloia	e Aloia Exec. Administrator					ane	7 /11	1076.									
		LACC. AG	mmstrat	UI	100	conc	1. 111	V 60 -	Novemb	er 15 2018							

Date of Notification (1)	# 2202				of Building		Operator	(2)			NOV	2 1	2010				
11/15/18 Check # 3282 Agencies Notified Type Notification			_	Street A	obert Die	ску				1	MOA	a0 //	2018				
EPA EPA									¥7	.,,							
DEP DOL	Amendmen	t #		City, State, Zip Code Bayonne, NJ 07002													
DOH DCA	Emergency justification) Cancellation			Name o	f Contact ei			Telephone Number									
Towned .					ILITY INFO	DRMATI	ION										
Name of Facility Where Mr Robert Dicky	Abatement is Takir	g Place (3)						Туре	of Facility (4))							
Street Address									School (K-12		th 1/	40)					
	1							网	Subchapter 8 Other (i.e. pri etc.)				ldings	hom	es,		
City (5) Bayonne, NJ						e Feet	# of	Floors		Bldg. Age 40+							
County (6) HUDSON					Code (7)			Current Use (Prior if being demolished) Residence									
Name of Monitoring Firm Hired by Building Owner (8)					A No.	2011	Name		tement Contr	actor	(9)						
N/A									es Corpora								
Street Address								et Address 6 69th Street									
City, State, Zip Code								State, Zip Code ttenberg, NJ 07093									
Project Manager for Monitoring Firm				Telephone No. Tele			Teleph	phone No. License No.									
Start Date (10) Scheduled Co								01-295-1700 01074 me of OSHA Monitor									
11/26/18 11/27/18									me as above								
Occupancy Status During Abatement (Check Only One)					Street				t Address								
Facility Closed/Vacated During Entire Period of Abatement Performed Outside of Normal Facility Ho Other – Describe: Starting at 8:30 PM				nent			City, S	State, Zip Code									
Scope of Work (Check A	II That Apply)									-							
≥3 sf or ≥3 lf ⇒160 sf or ≥260 lf ⇒Renova							X	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure									
ls Lo				ion		-	1401	i-Exempted () and	Aba				atement			
Location		No	ormal	ally Descripti			scription	iption of					Type				
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Used So Mainter Custodia (1)			tena	ance/ (i.e. ther				Material (ACM) is insulation, AT, or		Amount (Specify SF or LF)		Remova	Repair	Encapsulate	Enclosure		
		Yes	No	N/A								=		ate	e e		
Garage			X		Pipe Insula			ation			5 LF	х					
Name of Registered Waste Hauler				JDEP W	EP Waste Cubic Yards				ds Name of Registered Landfill								
Tri-State Transfer Assoc.			0.02	Hauler ID No. of Waste 19551 TBD				Minerva Enterprises, Inc									
City, State Bronx, NY				Disposal Date				e City, State Waynesburg, OH									
Completed by		Title			Signature				00'								
Gina Betances Office Ma												11/15/	2018				

Dale of Notification (1)	L PA	AII	гоч	(Pursus	ion of A ant to NJ	New Jere SBESTO AC 8:60 a	8 ABATI nd 12:12	20)	vi 1		D. I	- 10 ₀	UAN)		1 m. 1	
10/12/2018					e of Bulld n Lamb	iemvÓ gní	/Operato	ir (2)			Andrew Terreston		40	1	.4	
Agencies Notified T	ype Nollficatio	п			t Address						111111	-	- 12			
EPA .	Initial								-		_	+1	1	1		
DEP DOL	Amended Amendme	は世			State, Zip				+	1110		10	£			
Z DOH	Emergency	(includit	ng		of Conta	h, NJ 08	844			Vil	NER	M.P.	W	10		
DCA [i Lamb	act				1	enorique	Numbe	r		minute				
Name of Facility Where Abar	tomant la Tale	- Di	100	FA	CILITY	NFORMAT	rion		- 						_	
Private	maureuris 18Ki	ng Piece	(3)						of Facility	511.5728						
Street Address					-			F	School (F Suhohap	(-12) ter 8 (OH	her then	(C-12)				
								团	Other (I.e	. private	& comm	erclal b	ullding	e, ho	me	
City (5) Hillsborough								Squ	re i set	# (of Floors		Bldg,	Age		
County (6)				Count	y Code (7	r\		-								
Somerset				(STAT	e use on	ín		االات	int Jse (F	nor If be	ung dam	olished)				
Name of Monitoring Firm Hire	ASC	CM No.		Name	of Ab itement Contractor (9)											
Street Address					C Strvices Corp.											
2017/22/202							Street 1485		te 23 Sc	with 4	444			-	-	
City, State, Zip Code	-								3p Code	Julii, #	111					
Droings Manager (as Alaska)							Wayı	ne, i	J (17470	1						
Project Manager for Monitoring Firm					one No.		Teleph								2011	
Start Date (10) Scheduled Con					Date (11	1)			50-)752 01253 FOE HA Monitor							
10/13/2018		10/16	/2015				oVision Consultants									
Occupancy Status During Abs			50				Street /									
Facility Closed/Vacated I Abatement Performed Or	During Entire I	eriod of	Abater	กรถเ					garaw R	oad						
Other - Describe:		TOT I GOING	y 1 10 U1-						îp ()ode 1. NJ 074	40						
Scope of Work (Check All The	t Apply)						1 6211 2		1,110 01-	-10					-	
≥3 sfor≥3 lf ≥160 sfor≥260 lf	-		Renova				X	M I	II Containm nl-Enclosur ovebag Pro n-Exempte	cedure	100			**		
			Locati Normal										Abatement Type			
Ashestos-Containing Material (ACM) Used Sole					Asba	Des stos Conta	cription o	of ateri I	(ACM)	A+	mount	-	Τ.,		T	
TO BE ABATED			intena todial s		(i.e	a. tharmal:	systems ing, VAT	inst ation.		(Spacify SF or LF)		공	R	E C	1	
(13)			(12)			other m	iscellane	, QI		57	or LF)	Remova	Repair	Елкаряшаце	CL FOOM MAN	
ALIEN THE PARTY OF		Yes	No	N/A								=		ate	9	
Kitchen, Hall, Laur	ndry			X		1	/AT			4(OGsf	X				
											Vac-					
15												1				
ame of Registered Waste Hau	Jidr			JDEP W auler ID		Cubic Y		_ 1	Name of	Register	ed Landi	ill	اــــــا			
S C Services Corp.		- N		36309		J. TFEIG	<u> </u>		TRRF	220						
ty, State /ayna, NJ 07470						Disposs	Date	- 1	City, State							
						1			-itallytou	vn, PA						
ompleted by		Title				I Ch	nature	<u> </u>				ata	,		-	