STATE OF NEW JERSEY
NOTIFICATION OF ASBESTOS ABATEMENT
(PURSUANT TO NJAC 8:60-7 AND 12:120-7

OL Check 0793

Name of Building Owner / Operator (2) Date of Notification (1) Verizon 13 Street Address Type of Notification 100 Greenwood Avenue Agencies Notified City, State, Zip Code **EPA** Initial 4 Jenkintown, PA. 19046 DEP Amended Telephone Number Name of Contact Amendment # DOH 301-583-0048 Emergency w/ justification Alex Baylor DOL Cancellation DCA FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) Verizon Ewing CO School (K-12) Subchapter 8 (Other than K-12) Street Address 4 Other (I.e., private & cmmercial 777 Parkway bldgs., homes, etc.) **Building Age** # Of Floors Square Feet County Code (7) County (6) City (5) 2 N/A Trenton Mercer Current Use (Prior if being demolished) ASCM NO Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) ESIS Health, Safety and Environmental LVI Environmental Services Inc. Street Address Street Address 436 Walnut Street 32 Williams Parkway City, State, Zip Code City, State, Zip Code Philadelphia, PA 19106 Telephone Number Project Mngr. For Monitoring Firm East Hanover NJ. 07936 215.640.5320 Frank Westfall License Number Telephone Number Sched. Completetion Date (11) Sheduled Start Date (10) 13 973-772-3660 00117 Name of OSHA Monitor Occupancy Status During Abatement (Check Only 1) Facility Closed/Vacated During Entire Period of LVI Environmental Services 1 Street Address Abatement Abatement Performed Outside of Normal Facility 32 Williams Parkway Hours - Describe: City, State, Zip Code Other - Describe: MON-FRI. J East Hanover, NJ. 07936 7:00AM-3:30PM Scope of Work (Check All That Apply) Full Containment with Negative Pressure Renovation Demolition v Mini - Enclosure >3sf or >3lf Glovebag Procedure ≥160 sf or ≥260 lf 1 1 Non-Exempted (\*) and Non-Friable Procedure Abatement Type Description of Is Location of R Asbestos - Containing Location Asbestos Containing N Amount E Material (ACM) Normally Material (ACM) C c M E (Specify (i.e., thermal systems TO BE ABATED Used 0 SF or LF) Solely insulation, surfacing, VAT, in Facility P 0 V A by Mainor other miscellaneous) (13)S s A 1 tenance/ U L R Custodial Staff (12) YES NO N/A 1,430SF 1 ✓ Roof Flashing Roof 7 7 Name of Registered Landfill NJDEP Waste Cubic Name of Registered Waste Hauler Minerva Landfill Hauler ID No. Yards Service Transport Group SW2117 of Waste 58 Pyles Lane City. State Disposal City, State 8955 Minerva Poad Date New Castle, DE. Waynesburg, OH. 44688 12/9/2013 Signature Completed by (Print or Type) Title Project Manager Terrylyn lannece 11/22/13 STATE OF NEW JERSEY
NOTIFICATION OF ASBESTOS ABATEMENT
(PURSUANT TO NJAC 8:60-7 AND 12:120-7

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City, State					100				32 Williams	s Parkway								
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Project Mr	gr. For M	onitoring Fi	irm			Te	elephone Nur	nber										
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✓	Facility C	losed/Vacat	ted Du	ring	En	tire	Period of		LVI Enviro	nmental S	ervices							
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STATE OF NEW JERSEY
NOTIFICATION OF ASBESTOS ABATEMENT DOL Checket 07933
Date of Notification (1)

				Name of B		nor / Oper	ntor (2)				
Date of Notification (				Name of bi	ullaing Ow	nei / Oper	101 (2)				
$\frac{11}{22}$			L.	Street Add	roce						
/ /	Type of No	atification		100 Green		110					- 1
Agencies Notified		Initial	L.	City, State,		-					
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		Amendment #		Name of C				Telephon	e Numbe	er	1 1
☑ DOH		Emergency w/		Alex Baylo				301-583-0			1
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		Cancellation	FA	CILITY INF	ORMATION	V .				2 -	nnia -
				CILITI IN	OKINATIO	•			MDA	2 5	(11.10)
Name of Facility Who	oro Abatom	ent is Taking P	lace (3)		Type of Fac	cility (4)					
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Street Address					O'Tecurio D		r 8 (Other	than K-12	2)		
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July Builgs Ave						bldgs., ho					
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					Current Us	e (Prior if	being dem	olished)	Ĭ		- 1
Name of Monitoring	Firm Hired	by Bldg. Owne	er (8)	ASCM NO	Name of A	batement (	Contractor	(9)			
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City, State, Zip Code					32 William	and the second name of the second					
Philadelphia, PA 191					City, State,	Zip Code					
Project Mngr. For M	onitoring F	irm	Telephone Nur	mber							- 1
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Occupancy Status D	uring Abat	ement (Check	Only 1)		Name of O						1
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Hours - D		MON-FRI.			City, State						
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Completed by (Print	or type)		Project Manag	ner.		7 //				Date	
Terrylyn lannece			Froject Manag	Jei		(1)	an	111			11/22/13

Date of Notification (1) 10/22/13						wner/O	perator (	(2)	= 3		11					
Agencies Notified	Type Notification			Street Ad	dress er Road,	Suite	200			NOV	2 5	2018			- 1	
EPA DEP DOL	Initial Amended Amendment		- 0	City, Stat	e, Zip Code t, NJ 079	е									+	
☑ DOH □ DCA	Emergency (i justification) Cancellation	ncluding	- 2	Name of David C	Contact Clark						ohone Nu -273-24					
		W.		FACIL	ITY INFO	RMATIC	NC	_	CE 100 /4							
Name of Facility Where Warehouse	Abatement is Taking	Place (3)						☐ s	f Facility (4 chool (K-12 ubchapter	2)	r than K-	12)				
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City (5) Secaucus								Square 70,00		# of I	Floors		50	lg. Ag +-	ge	
County (6) Hudson				County C	Code (7) ISE ONLY)				t Use (Prio house	r if bein	g demoli	shed)				
Name of Monitoring Firr	n Hired by Building (	Owner (8)		ASCM	l No.				ement Con							
N/A Street Address							divini	Address		710, EL				_		
							27 E	dsall D	rive					,,,		
City, State, Zip Code							10 (5) (5) (10) (10)	tate, Zip ex, Nu	Code J 07461							
Project Manager for Mo					ne No.			one No 864-20			License 01137	No.			1 / 1 m l m l m	
Start Date (10) 10/10/13	0/10/13 11/10/1				Date (11)		Name Ame		A Monitor							
Occupancy Status Durin	ng Abatement (Chec	k Only One	)				100000000000000000000000000000000000000	Address					-18			
Abatement Perform							City, S	tate, Zip		100 to Dec 21						
Other – Describe:							New	York,	NY 100	16						
Scope of Work (Check ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Ан тпат Арріу)		enova emolit				×	Min Glo	Containme i-Enclosure vebag Prod	e cedure	•					
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City, State New Haven, CT							sal Date ompleti	2.0	City, Stat Morrisv		A	0.0011.202				
Completed by Marko Stankovic	Completed by Title					1	Signatur	e Ko	Slaw	KEU	6	Date 10/2	2/1	3		

<sup>\*</sup> Do not use this form for asbestos licensure exempted activities.

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

2013-97H B & G proj. #:

Check # 6284

Type of Facility (A)	Date of Notification (1)	Name	of Building Own	er/Operator (2)								
PA	1 1 1 1 2 10 1 1 1 3 1											
New Brunswick, NJ 08901   New Brunswick   New Brunswick   New Brunswick   New Brunswick   NJ 08901   New Brunswick   NJ 08901   New Brunswick, NJ	X EPA X Initial	110000		et								
DCA				NJ 08901		/	NOV 21	) ZD5				
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Name of facility where abatement is taking place (3)   Vacant Building   Vacant Bu	☐ DCA ☐ Cancel	lation Me	erissa Buczny	<i>'</i>			732-24	9-2220		نـ ـ		
Vacant Building   Street Address   Gounty Code (7)   Street Address   Gounty Code (7)   Street Address   Gounty Code (7)   State use only)   State Use (Prior if being demolished)   Street Address   Gounty Code (7)   State use only)   State Use (Prior if being demolished)   Street Address   Gounty Code (7)   State Use (Prior if being demolished)   Street Address   Gounty Code (7)   State Use (Prior if being demolished)   State Use (Prior if being demolish			FAC	ILITY INFORMA	ATION							
Vacant Building    Subchapter 8 (Other than K-12)   Subchapter 8 (Other than K-12)   Street Address 46 College Avenue   County (6)   County Code (7)   Square Feet   \$6 of Floors   Blig. Age   Current Use   Prior if being demolished)   residential housing   Square Feet   \$6 of Floors   Blig. Age   Current Use   Prior if being demolished)   residential housing   Square Feet   \$6 of Floors   Blig. Age   Current Use   Prior if being demolished)   residential housing   Square Feet   \$6 of Floors   Blig. Age   Current Use   Prior if being demolished)   residential housing   Square Feet   \$6 of Floors   Blig. Age   Current Use   Prior if being demolished)   residential housing   Square Feet   \$6 of Floors   Blig. Age   Current Use   Prior if being demolished)   residential housing   Square Feet   \$6 of Floors   Blig. Age   Current Use   Prior if being demolished)   residential housing   Square Feet   \$6 of Floors   Blig. Age   Current Use   Prior if being demolished)   residential housing   Square Feet   \$6 of Floors   Blig. Age   Current Use   Prior if being demolished)   residential housing   Square Feet   \$6 of Floors   Blig. Age   Current Use   Prior if being demolished)   residential housing   Square Feet   \$6 of Floors   Blig. Age   Current Use   Prior if being demolished)   residential housing   Square Feet   \$6 of Floors   Blig. Age   Current Use   Prior if being demolished)   residential housing   Square Feet   \$6 of Floors   Blig. Age   Current Use   Prior if being demolished)   residential housing   Square Feet   \$6 of Floors   Blig. Age   Current Use   Prior if being demolished)   residential housing   Square Feet   \$6 of Floors   Square Feet   \$6 of Floors   Blig. Age   Current Use   Prior if being demolished)   residential housing   Square Feet   \$6 of Floors   Blig. Age   Current Use   Prior if being demolished   Square Feet   \$6 of Floors   Square Feet   \$6 of	Name of facility where abatement	is taking place (3	3)			T	Type of Facility	4)				
AB College Avenue    County (6)		20 (CONTRACTOR)					Subch	apter 8 (Oth			2)	
County (6)   Cou	Street Address								merc	ial		
New Brunswick, NJ 08901 Middlesex (State use only) Current Use (Prior if being demolished) residential housing  Name of Monitoring Firm Hired by Bidg. Owner (8) The Louis Berger Group, Inc.  Street Address 412 Mount Kemble Avenue City, State, Zip Code Morristown, NJ 07960 Trigly Manager for Monitoring Firm Craig Napolitano Craig Napolitano Craig Napolitano Scheduled Start Date (10) 12/05/2013 Scheduled Start Date (10) 12/05/2013 Scheduled Start Date (10) 12/05/2013 Scheduled Start Date (or or o	46 College Avenue								T	Bldg	g. Ag	зе
Name of Monitoring Firm Hired by Bidg. Owner (8) The Louis Berger Group, Inc.  Street Address 412 Mount Kemble Avenue  City, State, Zip Code Morristown, NJ 07960  Project Manager for Monitoring Firm Craig Napolitano  Scheduled Start Date (10) 12/05/2013  Coupanoy Status During Abstement (Check only one)  Scheduled Start During Abstement (Check only one)  Scheduled Start During Abstement (Check only one)  Scheduled Very Check all thet apply)  Demolition  Power (Check all thet apply)  Demolition  Report of Start	City (5)	County (6	)						_L	17 1	1)	
The Louis Berger Group, Inc.  Street Address 412 Mount Kemble Avenue  City, State, Zip Code Morristown, NJ 07960  Project Manager for Monitoring Firm Craig Napolitano  Scheduled Start Date (10) 12/05/2013  Cocupancy Status During Abatement (Check only one)  F Facility closed/vacated during entire period of abatement. Abatement performed outside of normal facility hours- Describe:  Other-Describe:  Other-Describe:  Scope of Work (check all that apply)  E Demonition Renovation Renovation Size Address 105 Ryerson Road City, State, Zip Code Lincoln Park, NJ 07035  Telephone Number (973)696-6869 Name of OSHA Monitor B & G Restoration, Inc. Street Address 105 Ryerson Road City, State, Zip Code Lincoln Park, NJ 07035  Telephone Number (973)696-6869 Name of OSHA Monitor B & G Restoration, Inc. Street Address 105 Ryerson Road City, State, Zip Code Lincoln Park, NJ 07035  Telephone Number (973)696-6869 Name of OSHA Monitor B & G Restoration, Inc. Street Address 105 Ryerson Road City, State, Zip Code Lincoln Park, NJ 07035  Telephone Number (973)696-6869 Name of OSHA Monitor B & G Restoration, Inc. Street Address 105 Ryerson Road City, State, Zip Code Lincoln Park, NJ 07035  Telephone Number (973)696-6869 Name of OSHA Monitor B & G Restoration, Inc. Street Address 105 Ryerson Road City, State, Zip Code Lincoln Park, NJ 07035  Telephone Number (973)696-6869 Name of OSHA Monitor B & G Restoration, Inc. Street Address 105 Ryerson Road City, State Lincoln Park, NJ 07035  Telephone Number (973)696-6869 Name of OSHA Monitor B & G Restoration, Inc. Street Address 105 Ryerson Road City, State Lincoln Park, NJ 07035  Telephone Number (973)696-6869 Name of OSHA Monitor B & G Restoration, Inc. Street Address 105 Ryerson Road City, State Lincoln Park, NJ 07035  Telephone Number (973)696-6869 Name of OSHA Monitor B & G Restoration, Inc. Street Address 105 Ryerson Road City, State Lincoln Park, NJ 07035  Telephone Number (973)696-6869 Name of OSHA Monitor (Name of OSHA Monitor Name of OSHA Monitor Name of OSHA Monitor Name of OSHA Moni					(Stat		residential h		iemo	lisned	1)	
Street Address 412 Mount Kemble Avenue  City. State, Zip Code Morristown, NJ 07960  Project Manager for Monitoring Firm Craig Napolitano  Scheduled Start Date (10) 12/05/2013  12/05/2013  Sched. Complete ton Date (11) 12/05/2013  Scheduled Start Date (10) 12/0				ASCM No.								
A12 Mount Kemble Avenue  City, State, Zip Code Morristown, NJ 07960  Project Manager for Monitoring Firm Craig Napolitano  Scheduled Start Date (10) 12/05/2013  Cocupancy Status During Abatement (Check only one)  If racility closed/vacated during entire period of abatement.  Abatement performed outside of normal facility hours- Describe: Other-Describe: Scope of Work (check all that apply)  Demolition  Renovation  See A TTACHED SHEET  Number (973)696-8869  Name of CSHA Monitor  B & G Restoration, Inc.  Street Address 105 Ryerson Road  City, State, Zip Code Lincoln Park, NJ 07035  Telephone Number (973)696-8869  Name of CSHA Monitor  B & G Restoration, Inc.  Street Address 105 Ryerson Road  City, State, Zip Code Lincoln Park, NJ 07035  Telephone Number (973)696-8869  Nome of SHA Monitor  B & G Restoration, Inc.  Street Address 105 Ryerson Road  City, State, Zip Code Lincoln Park, NJ 07035  Telephone Number (973)696-8869  Name of CSHA Monitor  B & G Restoration, Inc.  Street Address 105 Ryerson Road  City, State, Zip Code Lincoln Park, NJ 07035  Telephone Number (973)696-8869  Name of SHA Monitor  B & G Restoration, Inc.  Street Address 105 Ryerson Road  City, State, Zip Code Lincoln Park, NJ 07035  Telephone Number (973)696-8869  Name of CSHA Monitor  B & G Restoration, Inc.  Street Address 105 Ryerson Road  City, State, Zip Code Lincoln Park, NJ 07035  Telephone Number (973)696-8869  Name of SHA Monitor  B & G Restoration, Inc.  Street Address 105 Ryerson Road  City, State, Zip Code Lincoln Park, NJ 07035  Telephone Number (973)696-8869  Name of SHA Monitor  Tull Voun Resource & Recovery Center  City, State Tull Voun		, INC.			-41		on, Inc.				-	
City, State, Zip Code Morristown, NJ 07960  Project Manager for Monitoring Firm Craig Napolitano  Scheduled Start Date (10) 12/05/2013  Cocupancy Status During Abatement (Check only one)  If racility closed/vacated during entire period of abatement. Abatement performed outside of normal facility hours- Describe: Other-Describe: Scope of Work (check all that apply)  Demolition  Renovation  Renovation  Resolution of asbestos-containing material to be abated in facility (13)  SEE ATTACHED SHEET  Registered Waste Hauler  B & G Restoration, Inc.  Street Address 105 Ryerson Road  City, State, Zip Code Lincoln Park, NJ 07035  Telephone Number (973)696-8669  Name of CSHA Monitor  B & G Restoration, Inc.  Street Address 105 Ryerson Road  City, State, Zip Code LincolnPark, NJ 07035  City, State, Zip Code Lincoln Park, NJ 07035  Telephone Number (973)696-8669  Name of CSHA Monitor  B & G Restoration, Inc.  Street Address 105 Ryerson Road  City, State, Zip Code LincolnPark, NJ 07035  Telephone Number (973)696-8669  Name of CSHA Monitor  B & G Restoration, Inc.  Street Address 105 Ryerson Road  City, State, Zip Code Lincoln Park, NJ 07035  Telephone Number (973)696-8669  Name of CSHA Monitor  B & G Restoration, Inc.  Street Address 105 Ryerson Road  City, State, Zip Code Lincoln Park, NJ 07035  Telephone Number (973)696-8669  Name of CSHA Monitor  B & G Restoration, Inc.  Street Address 105 Ryerson Road  City, State, Zip Code Lincoln Park, NJ 07035  Telephone Number (973)696-8669  Name of CSHA Monitor  B & G Restoration, Inc.  Street Address 105 Ryerson Road  City, State, Zip Code Lincoln Park, NJ 07035  Telephone Number (973)696-8669  Name of City State, Zip Code Lincoln Park, NJ 07035  Tullytown Resource & Recovery Center  City, State Tullytown, PA  Completed Waste Hauler Tullytown, PA  Completed by (Pint or Type)  Title  School Park NJ 07035  Telephone Number (973)696-8669  Name of CSHA Monitor  Describer  Lincoln Park NJ 07035  Telephone Number (973)696-869  Name of CSHA Monitor  B & G Restoration, Inc.  Street Address		nue					oad		X			
Project Manager for Monitoring Firm Craig Napolitano  Scheduled Start Date (10)  12/05/2013  Occupancy Status During Abatement (Check only one)  Facility closed/wacated during entire period of abatement. Abatement performed outside of normal facility hours- Describe: Other-Describe: Scope of Work (check all that apply)  Formulation of asbestos-containing material to be abated in facility (13)  SEE ATTACHED SHEET  Phone Number (973/698-6869) Name of OSHA Monitor  B & G Restoration, Inc.  Street Address 105 Ryerson Road  City, State, Zip Code  LincolnPark, NJ 07035  City, State   Describer   Mini-enclosure  Mini-enclosure  Pull Containment w/negative pressure Mini-enclosure  Non-friable procedure  Non-friable procedure  Non-friable procedure  SEE ATTACHED SHEET  No N/A  SEE ATTACHED SHEET  No N/A  Name of Registered Landfill Tull/town Resource & Recovery Center  City, State Tullytown Resource & Recovery Center  City, State Tullytown, PA  Completed by (Print or Type) Title  Signature  Tilephone Number (973/698-6869) Name of OSHA Monitor  B & G Restoration, Inc.  Street Address 105 Ryerson Road  City, State LincolnPark, NJ 07035  License Number (973/698-6869) Name of OSHA Monitor  B & G Restoration, Inc.  Street Address 105 Ryerson Road  City, State LincolnPark, NJ 07035  License Number (973/698-6869) Name of OSHA Monitor  B & G Restoration, Inc.  Tullytown Resource & Recovery Center City, State Tullytown, PA  Completed by (Print or Type) Title	City, State, Zip Code											-
Craig Napolitano   973-407-1000     (973)696-6869   00378					_		NJ 07035	II isansa M	umba		_	
Scheduled Start Date (10)  12/05/2013  Occupancy Status During Abatement (Check only one)  Facility closed/vacated during entire period of abatement.  Abatement performed outside of normal facility hours- Describe:  Scope of Work (check all that apply)  Demolition  Renovation  Full Containment w/negative pressure  Scope of Work (check all that apply)  Demolition  Society of the scope of Work (check all that apply)  Location of asbestos-containing material to be abated in facility (13)  SEE ATTACHED SHEET  Name of OSHA Monitor  B & G Restoration, Inc.  Street Address  105 Ryerson Road  City, State, Zip Code  LincolnPark, NJ 07035  Glovebag procedure  Mini-enclosure  Mini-enclosure  Non-friable procedure  Description of asbestos-containing material to be abated in facility (13)  SEE ATTACHED SHEET  Name of OSHA Monitor  B & G Restoration, Inc.  Street Address  105 Ryerson Road  City, State, Zip Code  LincolnPark, NJ 07035  City, State  Lincoln Park, NJ 07035  Description of asbestos-containing material (ACM)  Name of OSHA Monitor  B & G Restoration, Inc.  Street Address  105 Ryerson Road  City, State, Zip Code  LincolnPark, NJ 07035  Description of asbestos-containing material (ACM)  Non-friable procedure  Registered Waste Hauler  B & G Restoration, Inc.  Name of OSHA Monitor  B & G Restoration, Inc.  Name of OSHA Monitor  B & G Restoration, Inc.  Name of OSHA Monitor  Street Address  105 Ryerson Road  City, State  LincolnPark, NJ 07035  Non-friable procedure  Registered Landiil  Tullytown Resource & Recovery Center  City, State  Lincoln Park, NJ 07035  Description of asbestor-containing material (ACM)  Name of Registered Landiil  Tullytown, PA  Date  Tullytown, PA  Date		m		TO TO CO.			).	1		ж		
12/05/2013   12/31/2013   12/31/2013   12/31/2013   Size Address   105 Ryerson Road   City, State, Zip Code		ICahad Ca										-
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Facility closed/vacated during entire period of abatement.   Abatement performed outside of normal facility hours- Describe:   City, State, Zip Code			200, 313				nad					
Abatement performed outside of normal facility hours- Describe: Other-Describe: Scope of Work (check all that apply)    Demolition						2050A 5 // C			_			
Scope of Work (check all that apply)    Demolition	Abatement performed outside Describe:	le of normal facili	ty hours-		-		07035					
Description		nlv)									- 1	
Location of asbestos-containing material to be abated in facility (13)  SEE ATTACHED SHEET  Registered Waste Hauler B & G Restoration, Inc.  NJDEP Hauler ID# Cubic Yards of Waste Lincoln Park, NJ  Completed by (Print or Type)  Title  Signature  Location of asbestos-containing material (ACM)  Description of asbestos-containing material (ACM)  Description of asbestos-containing material (ACM)  Description of asbestos-containing material (ACM)  Amount (Specify SF or LF)  Description of asbestos-containing material (ACM)  NAMOUNT (Specify SF or LF)  Description of asbestos-containing material (ACM)  NAMOUNT (Specify SF or LF)  Description of asbestos-containing material (ACM)  NAMOUNT (Specify SF or LF)  Description of asbestos-containing material (ACM)  NAMOUNT (Specify SF or LF)  Description of asbestos-containing material (ACM)  NAMOUNT (Specify SF or LF)  Description of asbestos-containing material (ACM)  NAMOUNT (Specify SF or LF)  Description of asbestos-containing material (ACM)  NAMOUNT (Specify SF or LF)  Description of asbestos-containing material (ACM)  NAMOUNT (Specify SF or LF)  Description of asbestos-containing material (ACM)  NAMOUNT (Specify SF or LF)  Description of asbestos-containing material (ACM)  NAMOUNT (Specify SF or LF)  Description of asbestos-containing material (ACM)  NAMOUNT (Specify SF or LF)  Description of asbestos-containing material (ACM)  NAMOUNT (Specify SF or LF)  Description of asbestos-containing material (ACM)  NAMOUNT (Specify SF or LF)  NAMOUNT (Specify	<u> </u>	Renovation				201001 CE4						
Location of asbestos-containing material to be abated in facility (13)  SEE ATTACHED SHEET  Registered Waste Hauler B & G Restoration, Inc.  Description of asbestos-containing material (ACM)  Amount (Specify SF or L P P L P P P P P P P P P P P P P P P	>3 sf or >3 if				N N	lini-enclosure						
Abated in facility (13)  Yes  No  N/A  N/A  N/A  SEE ATTACHED SHEET  SEE ATTACHED SHEET  No  N/A  N/A  N/A  N/A  N/A  SEE ATTACHED SHEET  No  N/A  SEE ATTACHED SHEET  No  N/A  N/A  SEE ATTACHED SHEET  No  No  No  No  No  No  No  No  No  N	asbestos-containing	by maintenand		Description		sbestos-containing		SE or	e m		n c	135000
Registered Waste Hauler B & G Restoration, Inc.    NJDEP Hauler ID#   Cubic Yards of Waste   Name of Registered Landfill   Tullytown Resource & Recovery Center		Yes	No N/A	material (	AONI		ĹF)	- 1	V	i r		Ĺ
B & G Restoration, Inc.  19563  10  Tullytown Resource & Recovery Center  City, State Lincoln Park, NJ  Disposal Date 12/05/13 - 12/31/13  Completed by (Print or Type)  Title  Signature  Date	SEE ATTACHED SHEET							[	믝	밁		昌
B & G Restoration, Inc.  19563  10  Tullytown Resource & Recovery Center  City, State Lincoln Park, NJ  Disposal Date 12/05/13 - 12/31/13  Completed by (Print or Type)  Title  Signature  Date									╬	井	<u>  ,</u>	ዙ
B & G Restoration, Inc.  19563  10  Tullytown Resource & Recovery Center  City, State Lincoln Park, NJ  Disposal Date 12/05/13 - 12/31/13  Completed by (Print or Type)  Title  Signature  Date							-		╡╫	러	H.	卅
B & G Restoration, Inc. 19563 10 Tullytown Resource & Recovery Center  City, State Lincoln Park, NJ Disposal Date Lincoln Park, NJ Title  Signature  City, State Tullytown, PA  Date					-				418	計	H	后
City, State Lincoln Park, NJ  Completed by (Print or Type)  Title  Disposal Date 12/05/13 - 12/31/13  City, State Tullytown, PA  Date					Vaste			15	= 1-			
Lincoln Park, NJ  Completed by (Print or Type)  Title  Tullytown, PA  Date		1956			-		esource & Red	covery Ce	nter		-	
Completed by (Print or Type) Title Signature Q Q	City, State Lincoln Park, NJ				1/13	Tullytown, I	PA					
			reasurer	Signature	(	Gordana Luna			/201	3		

Tel: (973) 696-6869 Fax: (973) 696-5929 Toll Free: (800) 941-0414 bgresto@optonline.net www.bgrestoration.com

NOV 25

November 20, 2013

Re: One page attachment to 10-day notification for asbestos removal at 46 College Avenue, New Brunswick, NJ 08901.

Start date: 12/05/2013

The following materials shall be abated:

Location of asbestos- containing material to be abated in facility	Is location normally used solely by maintenance / custodial staff	Description of ACM	Amount (LF or SF)	Remove	Repair
BSMT & crawl space	NO	Pipe insulation & Assoc. mudded joints	200 LF	X	
Basement	NO	Scratch coat on brick furnace	400 SF	X	
Basement	NO	Compressed board above furnace	50 SF	X	
1 <sup>st</sup> & 2 <sup>nd</sup> fl. restrooms	NO	12x12 floor tile	72 SF	X	
2 <sup>nd</sup> fl. restroom outside break room	NO	Tub & wall caulking	2 SF	X	
1 <sup>st</sup> fl. Office 104, 104A & 104B	NO	Floor tile & mastic	168 SF	X	

Date of Notification (1)	20 /	13		N		of Buildin	ng Owner/Operator (	2)				
				_								
Agencies Notified	Type Notific	cation		S		t Address						0.00
☑ DOLWD	☐ Amende	ed			N. I. CALL		nd Avenue		***			
☑ DOH	Amendm			0	1.270	State, Zip						111
☐ DCA	☐ Emerger		ding			tley, NJ	227	4.				
(NJAC 5:23-8)	justificat	0.300		N		of Conta	Committee of the commit		Telephone Nur	mber ]	1	
	☐ Cancella	ation			Ma	tthew So	chrieks		201-694-57	74	1	
					FA	CILITY II	NFORMATION	N	9V 25 one		1	
Name of Facility Where	Abatement is	Taking Pl	ace (3	)				Type of Facility	(4)	5	1	
House								School (K-12	)		i	
Street Address								☐ Subchapter 8 ☐ Other (i.e., pr	(Other than K-1	2)		
183 Vreeland Aven	iue							homes, etc.)	ivate and comm	erciai buli	aings,	
City (5)					A 10 10 1			Square Feet	# of Floors	Bldd	g. Age	
Nutley									Des 9920 - 0000 - 0000		,	
County (6)		_			Cour	nty Code (	7)(STATE USE ONLY)	Current Use (Pri	or if being demo	lished)		_
Essex								3		,		
Name of Monitoring Firm	Hired by Buil	Iding Own	er (8)	AS	SCM	No.	Name of Abateme	ent Contractor (9)				
Bio Terra Solution	s			1 10000000				NAGEMENT L				
Street Address							Street Address					
P.O. Box 1224							27 Outwater	ane				
City, State, Zip Code							City, State, Zip Co					
Union, NJ							Garfield, NJ					
Project Manager for Mor	itoring Firm		TT	eleph	000	No		07020	Tr			
Rick Eustaquio	intoring r iiiii		'			-3762	Telephone No.		License No.			
Start Date (10)		Schedule	4.00==				973-928-4888		1188			
			_ / _				Name of OSHA M	onitor NAGEMENT LI	_C			
Occupancy Status Durin	g Abatement (		46 2				Street Address			-		
☐ Facility Closed/Vacat					ent		27 Outwater I	220				
☐ Abatement Performed	d Outside of N	ormal Fac	cility H	ours -	Des	cribe	City, State, Zip Co	7-34-54-54-54-54-54-54-54-54-54-54-54-54-54				
Time of Abatement: _	AM	PM/	P	PM		AM	Garfield, NJ					
Scope of Work (Check a	Il that apply)		·	- 01-10-1			Garriera, 145	07020				
,	alacappiy)						☐ Full Cont	ainment with Neg	ative Pressure			
<ul> <li>≥3 sf or ≥3 If</li> <li>≥160 sf or ≥260 If</li> </ul>			Renov				☐ Mini-Encl	osure				
☐ ≥100 St 01 ≥200 II		Ш	Demo	lition			☐ Glovebag	Procedure npted (*) and Nor	Eriable Broods	uro.		
			ls Lo	cation	1			inpled ( ) and Noi	i-Filable Procedi			
Location	of		Non	mally			Description of	f I			ement	1
Asbestos-Containing			Jsed S Mainte				estos Containing Mat	terial (ACM)	Amount	Removal	Repair	Enclosure
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(13)	.,		(1	2)			other miscellane		SF or LF)	<u>a</u>	Encapsulate	. le
		Ye	es N	1 01	N/A						6	8
Basement					X	ACM P	ipe Insulation	11	60LF			1
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				] [					-		7/	ПП
Name of Registered Was	te Hauler			NJD	EP V	Vaste	Cubic Yards of	Name of Regist	ered Landfill			
ALL PRO MANAGE	MENT LLC			1-2000000000000000000000000000000000000		No.	Waste	IESI Landfi				
City, State		<u> </u>		00	348	UO	As Needed Disposal Date	City, State				
Garfield, NJ							TBD		DΛ			
25-3623634332523636 <b>7</b> -15-2636	una)	Tial -						Bethlehem,				
Zvonko Veskov	ype)	Title	al.				Signature	1/1-1	D	ate /	. /	1,0
		Presi	dent	1			1 11	ual		11/2	0/	15
ASB-41 IAN 13		* 0	not une	Able	·	· ·			1	1	-/-	

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

D&S Proj. #: 2013-448

BOGDAN JOLDZIC	PRESID Do not us		n to asbest	os licensure e	xompte	d activities.			1-1-2		-		
Completed by (Print or Type)	Title	ENTE		Signature					Date 11/2				
PATERSON, NJ 07503			11/25/1	3		TULLYTO	VN, P.	Α					
City, State	L		Disposal D	The second secon		City, State							
Registered Waste Hauler D & S RESTORATION, INC.	NJDE 135	P Hauler 06		ubic Yards of yd	vvaste	Name of Register TULLYTOW			RECOVE	ERY			
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BASEMENT			+	11121110					-	ᆖ	F	ī	Ħ
DACEMENT			-	PIPE INSU	JLATI	ON		95 L FT		ă			
abated in facility (13)	Yes	No	N/A					LF)		v e	i	p	L
material (acm) to be	staff(12)			material		anestos-contairiin	9	(Specify		m o	p a	c a	c
Location of asbestos-containing	by mainte	nance/cus	stodial	I	ion of a	sbestos-containing	a	Amount		e	е	n	E n
	E300/4900 (03000 (150000 (1		used solely	/		-	L NO	- Landinbred	) and INO	R	R	E	_
≥160 sf or ≥260 lf	Demolition							vebag proced n-Exempted (		n-friahle	proc	edure	
$\boxtimes$ >3 sf or >3 lf	Renovation	n						ni-enclosure					
Scope of Work (check all that apply								Containment	w/negativ	e press	ure		
Other-Describe: NORMAL H	OURS				_	Paterson, NJ	0750	3					_
Abatement performed outside Describe:		acility hou	Irs-			132000		•					
Facility closed/vacated during	entire perio	d of abate	ement.			City, State, Zip Co	ode					RC5-11	
Occupancy Status During Abatemen						20 California	Aven	ue					
11/21/1313	11/30					Street Address							
Start Date (10)	Scried.	Completi	on Date (11	,		D & S Restor	ration,	Inc.					
Cted Date (10)	ISchool	Completi	on Date (11	1		Name of OSHA N	/lonitor						
,						973-345-80	20			01169		3,500	
Project Manager for Monitoring Firm		Ph	none Numbe	er		Telephone Number	er			e Numb	er		
(Ex) (0 ))						Paterson, NJ	07503	3					
City, State, Zip Code						City, State, Zip Co	ode		Least o				
50 (400 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$						20 California	Ave.						
Street Address						Street Address							
						D & S RESTO	ORAT.	ION, INC.	er cerenyii			(1)	
Name of Monitoring Firm Hired by E	Bldg. Owner	(8)		ASCM No.		Name of Abateme	ent Cor	ntractor (9)					
HILLSIDE	ESS						Ц.						
5 10					(Stat	e use only)		Current Use (	Prior if bei	ng dem	olishe	ed)	er = == 10
City (5)	Count	y (6)			L	nty Code (7)	7 I_						
258 WILLIAMSON AVENU	E						.    5	Square Feet	# of Floo	ors	Blo	lg. Ag	е
Street Address									./Homes,		oidi		
MARY SMILEY							4		hapter 8 (0 (Private/0			12)	
72									ol (K - 12)			40)	
Name of facility where abatement is	taking plac	e (3)					Ty	pe of Facility	(4)				
			FACIL	ITY INFORM	ATION								<u> </u>
☐ DCA ☐ Cancellation		MARY	SMILEY					<u> 9/3-9</u>	26-3431		-		_
justification)						05.040 D D							
□ DOH     □ Emergency (including)	11 -	me of Cor	DE, NJ 07	203				Telepho	ne Numbe	r	+1 2	re culture	
Amendment #:		2000 1000	12	205		***							
☐ DEP ☐ Amended	1	y, State, Z		AVENUE			1401	5 1 11		_			
EPA Initial	110			N AVENUE			MOI	/ 2.5 30	10				
Agencies Notified   Type Notification		eet Addre		-									
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Date of Notification (1)	Na	me of Bui	Iding Owne	r/Operator (2)	The reverse				* -	-			

COMMINICATION NA 47

20 2012 (WED) 14 - 52

DAGE

ASE-41

To: NJ Dept. of Labor, NJ Dept. of Health

RE: 258 Williamson avenue, Hillside, New Jersey

The boiler is to be replaced and the pipes are insulated with asbestos at the above referenced address which need to be removed as soon as possible. The plumber is concern about the health hazard that asbestos can create if it is not removed properly.

I would like to request a waiver of the ten day notification period because the plumber is concern about workers exposure to asbestos and might create a health hazard to everyone.

Your consideration is highly appreciated.

Sincerely,

Mary Smiley, Homeowner

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

D&S Proj. #: 2013-449

						* * * .					
Date of Notification (1)	Name of Bu	ilding Owne	er/Operator (2)	1						,	
1 1 /2 0 /1 3		FURMAN									
Agencies Notified Type Notificati	on Street Addre	ess				Nou a					
_	9 WALK	ER AVEN	NUE			NOV 2	5 2013				
DEP Amendment #:	City, State,	Zip Code	000			4					
DOL Emergency		STOWN,	NJ 07960								
DOH (including	Name of Co					Telephone	Number				
justification)	TAMES	FURMAN	J			973-455	-0793	7.00			
Cancellation	JAMES						0,75				_
18		FACIL	LITY INFORM	AHON			43	_			
Name of facility where abatement is	s taking place (3)					Type of Facility (4	+) (K - 12)				
JAMES FURMAN						=	apter 8 (Ot	her th	an K-	12)	
Street Address						Other (	Private/Co	mmer		,	
						Bldgs./	Homes, etc	c.			
9 WALKER AVENUE						Square Feet	# of Floors	•	Bio	lg. Ag	je
City (5)	County (6)				nty Code (7)				Color	-1\	
MODDICTOWN	MORRIS			(Stat	e use only)	Current Use (Pr	ior if being	aem	JIISNE	u)	
MORRISTOWN,  Name of Monitoring Firm Hired by I		<del></del>	ASCM No.	11	Name of Abatement C	Contractor (9)					
Name of Monitoring 1 in 1 ined by 1	siag. Owner (o)		ACCIVITIO.		D & S RESTORA						
Otrack Address					Street Address	TION, INC.			_		
Street Address					20 California Av	P					
City, State, Zip Code					City, State, Zip Code			-			
Oity, State, 2ip Code					Paterson, NJ 075	503					
Project Manager for Monitoring Firm	IP	hone Numbe	er		Telephone Number	703	License I	Numb	er	_	
r rojoot managor ioi moimormig i min					973-345-8020		01	169	20.00		- 14
0 2	Sched. Complete	ion Data /11	<b>\</b>	-1	Name of OSHA Monit	or					
Start Date (10)	Scried, Complete	ion Date (11	1		D & S Restoration	on, Inc.					
11/21/13	11/28/13			_	Street Address						
Occupancy Status During Abatemer					20 California Ave	enue					
Facility closed/vacated during Abatement performed outside	entire period of abate	ement. irs-			City, State, Zip Code						
— Danauiba.		113		-11	D . NI 076						
Other-Describe: NORMAL H				<u> </u>	Paterson, NJ 075					_	
Scope of Work (check all that apply						full Containment w	/negative	press	ure		
$\boxtimes$ >3 sf or >3 lf	Renovation					Mini-enclosure Blovebag procedu	re				
≥160 sf or ≥260 lf	Demolition					Non-Exempted (*)		riable	proce	edure	)
Location of	Is location normally		/					Re	R	Е	E
asbestos-containing	by maintenance/custaff(12)	stodial			sbestos-containing	Amount (Specify S	Eor	m	р	n	n
material (acm) to be abated in facility (13)	200		material	(ACM)		(Specify S	or or	0	a	а	C
	Yes No	N/A						е	r	р	
BASEMENT	X		PIPE INSU	ЛАТІ	ON	34 L FT		X			
					10						
Registered Waste Hauler	NJDEP Hauler		ubic Yards of	Waste	Name of Registered		2001	37			
D & S RESTORATION, INC.	13506		l yd		TULLYTOWN,	RESOURCE RI	ECOVER	Υ . Υ		-	
City, State		Disposal D			City, State	DA					
PATERSON, NJ 07503	\ <del></del>	11/22/1	Signature		TULLYTOWN,	1 A	Date				
Completed by (Print or Type) EOGDAN JCLDZIC	Title PRESIDENT		- griatoro				11/20/	13			
100 dt	* Do not us a this form	o 'or asbesto	us licensure ex	kempte	o activities.			_			

Notification of Asbestos Abatement (Pursuant to NJAC 8:60 and 12:120)

	570 U		2 1	(AV	Nakowed			10-4
	Name of Building Ov	mer/Operator (2)		A Dept of he	AND & Senior Serv	ices		
Date of Notification (1)				1844	signature)			
1 1 /(2 0 //1 13 ) Agendes Notified   Type Notification	JAMES FURMA	AN		Date: 11 30		OAL	n	
Agencies Notified Type Notification		VOIE TO TOO			TANO STATE	=1,	11	
□ DEP □ Amended	9 WALKER AV			NOV	2 5 2013	1		
Amendment #:	City, State, Zip Code				5710			
DOL Emergency	MORRISTOW	N, NI 0/960		Telepho	one Number			
DOH (including )		(\$ <b>.</b> *0)		073.4	55-0793			
DCA Cancellation	JAMES FURM	IAN	<u> </u>	9/3-4	55-6175			-
· · · · · · · · · · · · · · · · · · ·	F	ACILITY INFORM	ATION					
Name of facility where abatement is t	aking place (3)			Type of Facility	y (4) ool (K - 12)			
		E		1 1 1	chapter 8 (Other II	han K-1	12)	
JAMES FURMAN				□ IXI Othe	er (Private/Comme	rcial		
Street Address				Pidg -	s./Homes, etc.	BIA	g. Age	
9 WALKER AVENUE	·		<u> </u>	Square Feet	# of Floors	Life	B. u.S.	
Ofty (5)	County (6)		County Code (7)	O week bloo	(Prior if being den	nolishe	d)	
-1.3 (-)			(State use only)	Curient Ose	(Lim a pour a go	(VIII-1,1-	-,	
MORRISTOWN,	MORRIS	ASCM No.	I Name of Aba	tement Contractor (9)		ALCOHOLD THE		
Name of Monitoring Firm Hired by B	dg. Owner (8)	ASCININO.		STORATION, INC.		17.2.22		
			Street Address					
Street Address	49		20 Califo	rnia Ave.				
			City, State, Zi					
City, State, Zip Code			Paterson	NJ 07503		***		
Project Manager for Monitoring Firm	Phone N	lumber	Telephone N	umber	License Nun			
FLOJECT METITAGE TO MOTIFICATE A			973-34:	With the same of t	0116	"	-	
Start Date (10)	Sched, Completion Da	te (17)	Name of QS					
	r s	0.00 ARCH 2780	Street Addre	estoration, Inc.			-	
11/21/13	11/28/13	-		rnia Avenue			ľ.	
Occupancy Status During Abatemen Facility closed/vacated during	r (Check only one)	£.	City, State 2	ALAMAN TO THE REAL PROPERTY OF THE PERSON OF	months (EEEE	ALCOHOL:		
Abatement performed outside	of normal facility hours-		1 3,					
Describe: NORMAL H			Paterson	, NJ 07503				
Scope of Work (check all that apply					ent w/negative pre	ssure		
Scope of Work (check all that apply	Penovation			Mini-enclosure				
☐ ≥160 at or ≥280 if	Demolition			Glovebag prod	cedure id (*) and Non-frial	ble pro	cedure	3
	Is location normally used	solely	1		F	R	E	E
Location of asbestos-containing	by maintenance/custodia		otion of asbestos-cont	aining Amo		n p	n	n
material (aom) to be	staff(12)	- materia	al (AOM)	LF)	olfy SF or		a	L
abated in facility (13)	Yes No	N/A	j [		, e	· ·	P	
BASEMENT	X	PIPE IN	SULATION	34 L F1			10	1
						ᆗ누	내닏	부
					إ	414	HH	+
n *						ᆗ늗	片는	+
			dawaga IN	Day of the second land second		پال		
Registered Waste Hauser D & S RESTORATION, INC.	NJDEP Hauler ID# 13506	Oubic Yards	or vvaste Iname of F	Registered Landfill TOWN, RESOURC	E RECOVERY			
	The second of th	posal Date	Ofty, Stat	THE PROPERTY OF THE PARTY OF TH				
City, State PATERSON, NJ 07503		1/22/13		CTOWN, PA	physic - special control	خديس.	<del></del>	ATTENDANCE OF
Completed by (Print or Type)	Title	Signature		11	Date			
BOGDAN JOLDZIC	PRESIDENT !					) 	er un a	THE PER
ASR.41	* Do not use link form 'ar	asbestu: licensure	axempted activities:	0.00				

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

D&S Proj. #: 2013-447

Date of Notification			Name of B	uilding Own	er/Operator (2)	)			100					
1 1 1/2 0			MARIA	SANDBE	RG					NOV .	2 5	2013		
Agencies Notified EPA	Type Notificat	lion	treet Addr									- 4 10		
☐ DEP	Amended		237 PAS	SSAIC AV	ENUE								1	[
	Amendment #:	:   <sup>[</sup>	ity, State,	Zip Code										į
☑ DOL	☐ Emergency		HASBI	ROUCK H	EIGHTS, NJ									
☑ DOH	(including justification)	N	ame of Co	ntact					Telepho	ne Numbe	r			
☐ DCA	Cancellation	- 11	MARIA	A SANDB	ERG				201-6	15-7703				
				FAC	LITY INFORM	ATION	1							
Name of facility wh	nere abatement	is taking pla	ace (3)					Туре	f Facility	(4)				
MARIA SAND	RFRG									ool (K - 12)				
Street Address	DERCO					-			<b>Othe</b>	hapter 8 (0 r (Private/0	omme		-12)	
237 PASSAIC	ANZENITE									s./Homes,				
	AVENUE	I Cour	nty (6)					Squai	e Feet	# of Floo	rs	BI	dg. A	ge
City (5)		Cour	ity (6)			100000000000000000000000000000000000000	inty Code (7) ite use only)	-		Prior if beir	1		/\	
HASBROUCK	K HEIGHTS	BE	RGEN			(0,0	ac use only)	Curre	ent Use (	Prior it beir	ig aen	iolisn	ea)	
Name of Monitorin	g Firm Hired by	Bldg. Owne	er (8)		ASCM No.		Name of Abatement	Contract	or (9)					
							D & S RESTORA	ATION	INC.					
Street Address							Street Address							
					9.		20 California Av	ve.						
City, State, Zip Cod	е						City, State, Zip Code							
							Paterson, NJ 07	503						
Project Manager for	Monitoring Firm	า	P	hone Numb	er		Telephone Number			License				
							973-345-8020				1169			
Start Date (10)		Sched	I. Complet	ion Date (1	1)		Name of OSHA Moni							
11/30/1313		12/16	5/13				D & S Restoration Street Address	on, Inc.	-					
Occupancy Status [	During Abatemer	nt (Check o	nly one)				20 California Av	enne						
	d/vacated during						City, State, Zip Code	Chac						
Abatement pe	erformed outside	of normal	facility hou	ırs-										
Other-Describ	oe: NORMAL H	IOURS				_	Paterson, NJ 07.	503						
Scope of Work (ch			<del></del>						ainment	w/negative	press	ure		
> 3  sf or  > 3  If	×	Renovatio	on.				=	Mini-enc			μ.σσ.			
≥160 sf or ≥2		Demolition						Gloveba			1247 - 1755		80.	
				used solely	7			Non-Exe	mpted (	) and Non	friable IR	Proc	_	<del></del>
Location of asbestos-con	Itaining		enance/cus				TECHNOLOGY CONTRACTOR		Amount		e	e	E n	E
material (acm	n) to be	staff(12)			material (		sbestos-containing		(Specify	SF or	m	p	С	n
abated in faci	ility (13)	Yes	No	N/A	188500000000000000000000000000000000000				LF)		v	a i	a p	L
BASEMENT				-	PIPE INSU	רד א דו	ON	75 1	FT		e	4	-	₩
BASEMENT			X	#	FIFE INSC	LAII	ION	13.	2 F I		- A	片	ዙ	牌
					-						╬	片	片	쓔
				-							#	片	片	H
				-		-		-			+	님	牌	屵
Registered Waste H	auler	INUDE	P Hauler	ID# I C	ubic Yards of \	Nasto	Name of Registered	Landfill			<u>. L</u>	Ш		Щ
D & S RESTOR.		135			yd	*asit	TULLYTOWN,		JRCE R	ECOVE	RY			
City, State				Disposal D		-	City, State							
PATERSON, N.	J 07503			12/02/1	3		TULLYTOWN,	PA						
Completed by (Print		Title			Signature				-747	Date				
BOGDAN JOLI	DZIC	PRESID								1/20	/1320	13		
ASR-41		Do Jus	e this form	for asbesto	s licensure ex	emple	d activities.							

#### B & G proj. #: 2013-233

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

\*\*\*\*\* FMFRGENCY \*\*\*\*\*

Check #6281

			10	LIVILITO	JEIN	<u> </u>						
Date of Notification (1)	Na	me of Build	ng Owne	r/Operator (2)								
1 1 1 / 2 0 / 1 3		Albert Sofi	а									
Agencies Notified Type Notificat	tion Str	eet Address										
☐ EPA  Initial		526 Twin	Oaks R	oad								====,
☐ DEP ☐	Ci	ty, State, Zip	Code									
DOL Amend	ment	Union, N.	07083									
DOH .	Na	me of Conta	ict		No. 1		Telephon	e Number				
DCA Cancell	lation	Albert So	fia				908-34	17-7437	2	5 4	Ü	
			FACIL	ITY INFORMA	ATION							
Name of facility where abatement	is taking pla	ce (3)				T	ype of Facility	(4) ol (K - 12)		8)		•
Albert Sofia							=	apter 8 (O	ther th	an K-	12)	
Street Address							Other	(Private/Co	mme		N.	
526 Twin Oaks Road								/Homes, e		Blo	lg. Ag	e
City (5)	Coun	ty (6)			Cour	nty Code (7)						
Union							Current Use (P	rior if bein	g dem	olishe	d)	
		Union				the second secon	residential					_
Name of Monitoring Firm Hired by	Bldg. Owne	r (8)		ASCM No.		Name of Abatement Co						
N/A					_	B & G Restoration, Street Address	Inc.					
Street Address												
Other State Vin Code						105 Ryerson Road City, State, Zip Code					-	
City, State, Zip Code					. 11	Lincoln Park, NJ 0	7035					
Project Manager for Monitoring Fire	m	Pho	ne Numbe	er		Telephone Number	7033	License	Numb	er		
Project Manager for Monitoring 1 in		1,				973-696-6869		0378				
Scheduled Start Date (10)	Isched	Completion	Date (11	1		Name of OSHA Monitor		35.00				
		22/2013		,		B & G Restoration	, Inc.					
11/21/2013					_	Street Address						
Occupancy Status During Abateme			ont.			105 Ryerson Road						
Facility closed/vacated durin Abatement performed outsid Describe:	e of normal	acility hours	-			City, State, Zip Code						
Other-Describe:					- 11	Lincoln Park, NJ 0				_		_
Scope of Work (check all that app	oly)				_			<u> wrap</u>			_	
☐ Demolition ☑	Renovatio	n				ull Containment w/negat	tive pressure	Glove	CONTRACTOR OF			
	≥160 sf or	≥260 If			N	Mini-enclosure		☐ Non-f				
Location of		normally us		1	2-12	1			e R	R	E n	E
asbestos-containing	staff(12)	mance/cusic	Julai	Description material		sbestos-containing	Amount (Specify	SF or	m	р	С	n
material to be abated in facility (13)	Yes	No	N/A	material	(ACIVI)		ĹF)		v e	i	a p	L
basement boiler room	X	pipe insula			92 lf		Ø					
main room & closet			X	pipe insula			10 lf			Щ	Ц	片
laundry room			X	pipe insula	ation		54 If			닏	닏	닏
									붜	片	片	H
				- Vanda V	Mests	Name of Desistered I	andfill		. Ц		Ш	Ш
Registered Waste Hauler B & G Restoration, Inc.	NJD 195	EP Hauler ID	)# C	ubic Yards of 2 yards		Name of Registered L Tullytown Resource	ce & Recover	y Center				
City, State			Disposal D			City, State						
Lincoln Park, NJ 07035			11/22/2			Tullytown, PA						
Completed by (Print or Type)	Title			Signature	i i	Gordana Luna		Date	1/204	2		
Gordana Luna	Secretar	y/Treasure	r			Januaria Servica		11/20	11201	J		

## State of NJ

B & G proj. #: 2013-233

Notification of Asbestos Abatement (Pursuant to NJAC 8:50-7 and 12:120-7)

B & G proj. #:	2010-200		V	***	** EMER	GEN	CY *****	Check	#6281				
Date of Notification	1/113	]  /	Albert So	fia	er/Operator (2)			NO Dept of Heal	ROVED th & Senic	or Sei	vices		
Agencies Notified EPA	Type Notification		eet Addres 526 Twin		toad			انام دانا	gnature)	list.	o A	h	
DEP DOL	Amendm		y, State, Z Union, N					Date: [[RU]]	Time:	-	., .	1	~~
DOH DCA	. Cancella	1 1	me of Card Albert S	c-steeps				Telephon 908-34	e Number 7-7437				1
, , , , , , , , , , , , , , , , , , ,				FACI	LITY INFORM	ATION	· · · · · · · · · · · · · · · · · · ·			1	,,,,,,		i
Name of facility when Albert Sofia	ere abatement is	taking pla	œ (3)	The sub-state	- W			Subch	4) l (K - 12) apter 8 (Ot Private/Co			12)	
526 Twin Oak	s Road							Bidgs./	Homes, et	ic.		g. Ac	<b>3</b> 0
City (5) Union		Coun	η (e)	n		000000700	nty Code (7) e vac only)	Current Use (P					
Name of Monitorin	g Firm Hired by E N/A	Bidg. Owne			ASCM No.		Name of Abatement (						
Street Address							Street Address  105 Ryerson Ron City, State, Zip Code	d .					
City, State, Zip Cod	e			¥ ¥ 2	1		Lincoln Park, NJ	07035					
Project Manager for	Monitoring Firm		Ph	one Numb	er .		Telephone Number 973-696-6869	01054 5 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	License 0378	Numb	er		
Scheduled Start Da 11/21/2013	te (10)	18/2/32	Completion 22/2013	n Date (1	1)		Name of OSHA Mont B & G Restoration Street Address						
Occupancy Status  Facility close  Abatement po		entire perk	od of abate	ment. 3-			105 Ryerson Roz City, State, Zip Code	d					-
Describe: Other-Descri	be;					$= \square$	Lincoln Park, NJ	07035				-	_
Scope of Work (ch Demolition >3 sf or >3 if		) Renovatio ≥160 sf or					uli Containment w/neg fini-enclosure	NAME OF TAXABLE PARTY OF TAXABLE AND ADDRESS OF TAXABLE PARTY.	☐ Wrap ☑ Glovet ☐ Non-fr	eg þí	ocedu		
Location of aspestos-con material to be abated in fac-	ntaining	is location	nomially induction				sbostos-containing	Amount (Specify S LF)	SF or	Remove	Repa-L	E n c a p	E n c L
basement boile	THE REAL PROPERTY AND ADDRESS OF THE PERSON NAMED AND ADDRESS			X	pipe insula			92 If 10 If					무
main room & c	oset		7	X	pipe insula			54 lf		N	片	片	卄
Lauriury (OOII)							Company of the compan	78-2-					回
Registered Waste F B & G Restorati		NJD: 195	P Hauler I 63		ubic Yards of 2 yards		Name of Registered Tullytown Resou		Center	<u>                                      </u>	<u>.</u>	<u></u>	<u>   </u>
City, State Lincoln Park, N				Disposal 1 11/22/			City, State Tullytown, PA						· .
Completed by (Prin		Titio Secretary	y/Treasure	er	Signature		Gordana Lona		Date 11/20	/201	3		

Date of Notification (1)	11/20/2013			e of Buildin	g Owner/Op	erator (2	2)				
Agencies Notified	Notification Ty	pe		et Address							
1 102_220		N.CO.		Osborne 7	Terrace						
()EPA ()DEP	( ) Initial Notifi	cation 11/12/13	City	State, Zip (	Code	-					
(X) DOL	(X) Amended Amendmen	nt 44 4		ark, NJ 07							
(X) DOH											
() DCA	( ) Emergency		The Control of the Co	e of Contac	t .	-		Tel. Nu	ımber		
() DOA	justification ( ) Cancellatio		Robe	ert				(908)4		)3	
Nome of Facility M/h	- 41-4		FACI	LITY INFO	RMATION					-	
Name of Facility When	e Abatement is	Taking Place	e (3)			Туре	of Facility (4)				
Newark Residence							chool (K-12)		•		
Street Address						( ) Su	ibchapter 8 (other ther (i.e. private 8	than K-1	2)	اطنعه	
167 Osborn Terrance -	- Basement						omes, etc.	COMMEN	Jai Du	iluli ig	jS,
City (5)						Sauer	e Feet # of	Floors	Diele	- ^-	
Newark						Oquai	* 01	FIOOIS	Diag	g. Ag	е
County (6)			Count	y Code (7)	(STATE	Currer	nt Use (Prior if be	ing demo	lished)		
Essex			USE	ONLY)							
Name of Monitoring Fir	m Hired by Bld	g. Owner	ASCN	No.	Name of 0	Contracto	or (9)				-
(8) GL Environmental Serv	rices				CID ® CO	NO 110					
Street Address					CID & SO Street Add		,				-
PO Box 753042					365 River						
City, State, Zip Code Bronx, NY 10475					City State, Garfield, N						
Project Manager for Mo	onitoring Firm	Telephone	Numbe	r	Telephone	Numbe	er	License	Numb	er	
Greg Brown		(347)307-1	145		(973)685-9	9791		01191			
Scheduled Start Date (	10)	Scheduled (11)	Comple	tion Date	Name of C	SHA M	onitor				
	N HOLD	11/28	3/2013		Testor Tec	:h					
Occupancy Status Duri	ng Abatement (	Check only o	one)		Street Add						
					10-59 Jack	roon Avra					
(X) Facility Closed/Vaca	ated During Ent	ire Period of	Abateme	ent	City, State						
( ) Abatement Performe ( ) Other – Describe:		ormal Facility	y Hours		Long Island						
Source of Work (Check	all that apply)				Long lolari	u Oity, 14	11 11101				
00 > 0 - f > 0 !f					() Full	Contain	ment with Negati	ve Pressi	ıre		
(X) ≥ 3 sf or ≥ 3 lf		(X) Renova			() Min	i-Enclos	ure		0.000		
( ) ≥ 160 sf or ≥ 260 lf		( ) Demoliti	ion				Procedure				
					() Nor	1-Exemp	ted (*) and Non-F	riable Pro	ocedur	е	
Location of	le	Location No	mally					Ab	ateme	nt Ty	ре
Asbestos-Containing	Material	Used Solely		Decor	iption of Asb	octos			T	Г	Г
(ACM)		Maintenand			g Material (A		Amount	-		四	m
TO BE ABATE		ustodial Staff			systems ins			l é	2	CB	nc
in Facility		actorial Ctan	: (12)		ing, VAT, or		SF or LF)	Remova	Repair	sq	og
(13)					iscellaneous			Va	\=	Encapsulate	Enclosure
	Ye	es No	N/A		iisociiai leous	?) 				te	
Basement			Х	P	ipe Insulatio	n	120 LF	X			
-1											
Name of Dec 18/2-1-11	viles 1	UDEST									
Name of Reg. Waste Ha	uler   N	JDEP Waste	e Hauler	ID Cubi	c Yards of V	Vaste	Name of Reg. La	ndfill			
CID & SONS, LLC		3290	05		TBD		G.R.O.W.S., Was	ste Manag	gemen	t	
City, State Garfield, NJ			* ***	Disp	osal Date TBD		City, State Morrisville, PA				
Completed by	Title			Signature	4.00.00.00	COA	A AF A I	Data			
Roque Schipilliti Jr	Proje	ect Manager			1200	70	All In	Date 11	120120	13	

			NOTI:	Picatio Pumuan	NOFASSE to MJAC R	901509 8708 ABATEM :60 and 12:120)	ET D	OL -	10.04	MNI	HOI
Date of Notification (	(1)	R46		Name	of Bulldin	d Owner/Open					
Agencies Notified	Notification				n Powell			منند	9 2013		
					x Address Osbornė 1	Terrace		MM	VVV		
() EPA () DEP	() Initial N	iouncaus Iod	M reses	City,	State, Zip (	Code		7110			-
(X) DOL	Ameno	iment#		New	ark, NJ 07	112	1 WAT	VER A	<b>IPPRO</b>		
(X) DOH ( ) DCA	( ) Emerge	ntion)	ghi but	Name	of Contac	t		-	Tel. Nu	mber	-
	( ) Cancel	lation							(908)43	35-640	3
Name of Facility Who	ore Abateme	nt is Tak	ing Place	(3)	LITY INFO		Type of Facility	(43)			0.7
Newark Residence							School (K-1	2/10/2	NO.	2.5	
Street Address					-		) Subchapter	S (other			
						Į į	X) Other (i.s. p	S edevine	commen	lal bu	iding
167 Osborn Terranci	e - Basement						homes, etc	2.			
City (5) Newark						8	Square Feet	# of	Floors	Bldg	. Ag
County (6)				Count	y Code (7)	(STATE C	Zurrent Use (P.	rior if bel	ng demai	lahed)	
Eesex				USE	ONLY)				B -+141491		
Name of Monitoring F	im Hired by	Bldg. D	Wher	ASCM	No.	Name of Car	fractor (9)				_
(8) GL Environmental &	ervices					CED & SONS	LUC				
Street Address						Street Addre		-		-	_
PO Box 753042						365 River Dr	ive				
City, State, Zip Code Bronk, NY 10475						City State, Zi Garfield, NJ		a ne - Air	1		
Project Manager for I Grag Brown	Nonitoring Fi		lephone 47)307-1		7	Telephone N (973)885-976			License 01191		rer
Scheduled Start Date	(10)			Comple	tion Date	Name of OSI	HA Monitor				
44reaments JOB	IN HOLD	(1		V2013		Testor Tech					
Occupancy Status Di						Street Addres	88				
				•		48.50	_ •				
(X) Facility Closed/Va	cated During	Entire F	Period of	Abatem	ent	10-59 Jackso City, State, Z					
( ) Abatement Perfor ( ) Other – Describe:	med Oublide	of Norm	al Fecility	y Hours	Section 1		Dity, NY 11101				
Source of Work (Che	ck all that ap	oly)		*			Card Card Card Card Card Card Card Card		1 1020		_
(X) ≥ 3 of or ≥ 3 if		A.	Renova	Her			ontainment wit	th Negeri	wa Pressu	ire	
(∧) ≥ 3 51 51 E 3 11 () ≥ 160 afor≥ 260 i	F		Demoit			( ) Mini-E	inclosure bag Procedum	R			
		, ,					brempted (*) ar		riable Pro	ocedu	9
Location o	g	le l es	ation No	me liv					Abo	steme	ntTy
		Us	ed Solely	by	Descr	iption of Asbes	ntos .				F
Asbestos-Containin	1루() 하다 하고 있다. (1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1		aintenani		Containin	Material (AC	M) (I.e. 2	amount Specify	20	20	Encapaulati
(ACM)	0 100 FID.		eten Skoff	7 (12)	thermal	systems insuli	muon, I 🚓	or LF)	Remova	Repair	1
(ACM) TO BE ABAT		Custo			manufacture.	alma LIAT and			1 3	1	1 %
(ACM)				MA		cing, VAT, or of niscellaneous)	1.00	**************************************	=		
(ACM) TO BE ABAT in Facility (13)		Yes	No	N/A	п	niscellaneous)		0015		-	18
(ACM) TO BE ABAT in Facility				N/A X	п			20 LF	X		8
(ACM) TO BE ABAT in Facility (13)					п	niscellaneous)		20 LF			
(ACM) TO BE ABAT in Facility (13)		Yes		X	P	niscellaneous)	1		×		8
(ACM) TO BE ABAT in Facility (13)  Basement		Yes	No EP Wash	X e Hauler	P	iscellaneous) ipe Insulation	ate Name of	Reg. La	×	gemen	
(ACM) TO BE ABAT In Facility (13)  Basement  Name of Reg. Waste CID & SONS, LLC City, State		Yes	No	X e Hauler	P Cub	riscellaneous)  Tipe Insulation  Ic Yards of Wa  TBD  100001 Date	ate Name of G.R.O.W	Reg. La	NOTIN .	gemen	
(ACM) TO BE ARAT IN Facility (13)  Basement  Name of Reg. Waste CID & SONS, LLC		Yes	No EP Wash	X e Hauler	P Cub	in Yards of Wa TBD Hosel Date TBD	ate Name of G.R.O.W	Reg. La /.S., Wisi to	NOTIN .	gemen	

#### State of New Jersey

#### NOTIFICATION OF ASBESTOS ABATEMENT

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

Date of Notification (1)  November 21, 20	013	Name of Building	Owner/Ope R A V	rator (2) an Winkle Constru	ction, LLC	231	2	7	· ;:
[ ] DEP [ ] Ame [x ] DOL Ame [x ] DOH [ ] Eme [ ] DCA justic	ation al Notification anded Notification andment #  rgency (including fication) cellation	Street Address  City, State, Zip Co  Name of Contact  Rober		squan, NJ 08736	elephone Number		3 <b>3</b> 3		
	EA	 CILITY INFORM	TATION!		000000000000000000000000000000000000000		-		- 1
Name of Facility Where Abatement is Takin Building		CILITY INFORM	LATION	Type of Facility (4)	School (k-12) Subchapter 8 (ot	her that	n k12)	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	1
Street Address 77 Kent Place Blv	vd.			[ X]	Other (i.e., priva homes, etc.)			ial buil	dings,
City	County (6)	County Code (7) (STATE USE ONL	Y)	Square feet 4163	# of Floors 1		. Age 1	13	
Summit	Union			Current Use (Prior if Building	g .	1)			
Name of Monitoring Firm Hired by Building Guardian Contrac		ASCM No.			<sup>(9)</sup> n Contracting,	Inc.			
Street Address 1889 Rte. 9, Unit	61		Street A		oute 9, Unit 61				
City, State, Zip Code Toms River, NJ 0		Cuntar Section 1	City, Sta	te, Zip Code	iver, New Jers	ev 081	755-1	271	
Project Manager for Monitoring Firm Nicholas Fernicola	Telephone Numbe 732-349-9932	er	Telephor	ne Number	License N 00624		100 1.	271	
Scheduled Start Date (10) 12/04/2013	Scheduled Completed 12/06/2013	etion Date (11)		OSHA Monitor	. Analytical				
Occupancy Status During Abatement (Check X) Facility Closed/Vacat			Street Ad	ddress 1056 Sto te, Zip Code	elton Road	y 088	54		
Scope of Work (Check all that apply)			[ ]	Full Containment Mini-Enclosure	10.00	essure			
[X] >3 sf or ≥3 lf [] ≥160 sf or ≥260 lf	5	vation olition	[X]	Glovebag Procedu Non-Exempted (*)		Procedu	ire		
	T i	T				Abat	ement	Туре	
Location of - Asbestos-Containing Material (ACM)  TO BE ABATED in facility  (13)	Is Location Normally used Solely by Maintenance/Custodia Staff (12) YES NO N/A	Asi I (i.e ins	Description bestos-Con Material (A ., thermal ulation, su VAT, of ther miscella	ntaining ACM) systems rfacing, or	Amount (Specify SF or LF)	R E M O V A L	R E P A I R	E N C A P S U L E	E N C L O S U R E
basement	X	pipe insulation	n		70lf	X			
Name of Registered Waste Hauler Guardian Contracting, Inc.	NJDEP Waste Haule 20223	1	ards of Was	T.R.R.F.	ed Landfill				
City, State Toms River, New Jersey		osal Date 07/2013	City, St	<sup>ate</sup> own, Pennsylvania					
Completed by (Print or Type) Nicholas Fernicola	Title Project Manager	Signature	01	-21		Date 11/2	21/20	13	

NOV 2 5 2013

Date Received

#### DEMOLITION / RENOVATION NOTIFICATION

Operato	r Project #:	Postmark:		Notificati	on:	أدي	ş
I.	TYPE OF NOTIFICATION (O- Original R- Revised C-	- Cancelled):	0	II.	IS ASBESTOS PRESENT? (Y	es/No):	Y
III.	FACILITY INFORMATION (identify owner, removal contra	ractor and oth	er operator)				
	OWNER NAME: Michael Zaczyk			200			
	Address: 77 Kent Place Blvd.						
	City: Summit State:	NJ		Zip:	07901		
	Contact: Robert VanWinkle			Tel:	732-443-7059		
	REMOVAL CONTRACTOR: Guardian Co	ontracting, l	Inc.		NJ License: 00624	4	
	Address: 1889 Route	9, Unit 61					
	City: Toms River State:	New J	ersey	Zip:	08755		
	Contact: Nicholas Fer	rnicola		Tel:	732-349-9932		
	OTHER OPERATOR (if different)				NJ License:		
	Address:						
0.00	City: State:			Zip:			
	Contact:			Tel:			
IV.	TYPE OF OPERATION (D - Demo O - Ordered Demo	R - Renovation	on E-Emergency	Renovation):	D		
V.	FACILITY DESCRIPTION (Including building name, num	ber and floor	or room number)				
	Building Name: Building						
	Address: 77 Kent Place Blvd.						
	City: Summit State:	: NJ		County:	Union		
	Site Location: Basement						
	Building Size: 4163 # of F	Floors:	1	Age in Y	ears: 113		
	Present Use: Building		Prior Use:	Building			
VI.	PROCEDURE, INCLUDING ANALYTICAL METHOD, I  IS MATERIAL ASSUMED TO BE ASBEST®?	F APPROPRI	ATE, USED TO DI	ETECT THE PR	ESENCE OF ASBESTOS MAT	ERIAL:	
VII.	APPROXIMATE AMOUNT OF ASBESTOS INCLUDING  1. Regulated ACM to be removed  2. Category I ACM not removed	3:	RACM To Be		LOCATION	Asbesto Not	friable s Material To Be noved
	Category II ACM not removed		Removed			Cat I	Cat II
	Pipes (Linear feet): 70 lf	Pipe ii	nsulation		basement		
	Surface Area (Square feet):		-				
	RACM Off Facility Component (Cubic feet):						
VIII.	SCHEDULE DATES ASBESTOS REMOVAL (MM/DD/YY)	) Start:	12/0	4/2013	Complete: 12	/06/2013	

NOTIFICATION OF DEMOLITION AND RENOVATION (continued)

X.	DESCRIPTION OF PLANNED DEMOLITIC	ON OR RENOVATION W	ORK, AND METHOD(S)	TO BE USED	
xi.	DESCRIPTION OF WORK PRACTICES AN AND RENOVATION SITE:	ND ENGINEERING CON	TRÔLS TO BE USED TO F	PREVENT EMISSIONS (	OF ASBESTOS AT THE DEMOLITION
	Removal to take place using negative pressure glove with a surfactant/water mix. All waste to bedouble t surfaces where removal took place. All materials to	pagged, sealed and affixed with	appropriate warning labels and	placed in closed/locked conta	niner for disposal. Encapslation of all
xii.	WASTE TRANSPORTER #1 Name: (	Guardian Contracting	, Inc.	(4)	
	Address: 1	889 Route 9, Unit 61			
	City: Toms River	State:	New Jersey	Zip:	08755
	Contact Person:	Nicholas Fernicola			
	WASTE TRANSPORTER #2 Name:				
	Address:	M 354 (3 1 1 )			
	City:	State:		Zip:	
	Contact Person:		*		
xiii.	WASTE DISPOSAL SITE Name: T	C.R.R.F.			
	Location: E	Bordentown Road			
	City: Tullytown	State:	Pennsylvania	Zip:	19007
	Telephone:215-943-9732		Permit #: 1	.01494	
xiv.	IF DEMOLITION ORDERED BY A GOVER	NMENT AGENCY, PLE	ASE IDENTIFY THE AGE	NCY BELOW AND ATT	ACH COPY OF ORDER
	Name:		Title:		
	Authority:				
	Date of Order (MM/DD/YY):		Date Ordered to Begin	(MM/DD/YY):	
xv.	FOR EMERGENCY RENOVATIONS				
_	Date and Hour of Emergency (MM/DD/YY):				
	Description of the Sudden, Unexpected Event				
8	Explanation of how the event caused unsafe c	onditions or would cause	equipment damage or an unr	reasonable financial burde	en
xvi.	DESCRIPTION OF PROCEDURES TO BE F ASBESTOS MATERIAL BECOMES CRUM				OR PREVIOUSLY NONFRIABLE
xvii.	I CERTIFY THAT AN INDIVIDUAL TRAIN THE DEMOLITION OR RENOVATION AN AVAILABLE FOR INSPECTION DURING I	D EVIDENCE THAT TH	E REQUIRED TRAINING I	HAS BEEN ACCOMPLI	PART M) WILL BE ONSITE DURIN SHED BY THIS PERSON WILL BE
	Nicholas Fernicola / Project Mana (Printed Name/Title)	ger	(Signature of Owner/C	Pperator)	November 21, 2013 (Date)
xviii.	I CERTIFY THAT THE ABOVE INFORMAT	TION IS CORRECT.	1	1	
	Nicholas Fernicola / Project Mana (Printed Name/Title)	ger	(Signature of Owner/C	Operator)	November 21, 2013 (Date)

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

71	2013	UZ:4011	r or meaning of mor	UGI 81003
		1	(Eignature)	230/
	Chec	k #628	5 1/10:	

B & G proj. \$: 2013-232		(Pursuant to	NJAC 8:60 EMERG	0-7 and 12 ENCY ***	±120-7)		Check #62	66		1,111.		-
tate of Notification (1)	Name of B	uilding Owner/Op a Starks	perator (2)		,	9781					1	_
111/12/11/113	Street Add			Copy of the Copy o				- 22			1	
agencies Notified Type Notification	62 Bet	kshire Place			The same of the sa	-						-
C DEP Initial	CAv. State	Zip Code					4011 2	5 2C	13		1	
DOL Amendmer	t Irving	ton, NJ 07111				-	Telephone h	ledinu	_			
	Name of C					- 1	973-372-	5707		:: :		<u></u>
DOH Cancellatio	n Augu	sta Starks				<del></del>	1				4	
. 🔲 DOX		FACILIT	ry informa	MOITA		Type	of Facility (4)					
I show ont in	aking place (3)			372	1	1 1	School	[ ] = 1 = /		. W.4*	21	
Nume of facility where abatement is t	energy Press 1						Subchap	nter 8 (C ekonte (C	wher wa commerc	al	41	
Augusta Starks						1	PhidesJH	iomes,	erc.		. Age	_
Street Address						Squ	are Feet	of Plac	olfa	David	1. Agra	
62 Berkshire Place	County (6)			County Co	ode (7)	-	ment Use (Pri	or If bei	ng demo	lished	)	
City (5)		Essex		(State usu	- 1	rea	idential_		The state of the s		-	
Irvington	1		ASCM No.	Nan	ne of Abatemor	t Contra	ictor (9)					
Name of Monitoring Firm Hired by E	Mgg Owner (b)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	·   B	& G Restora	tion, la	C.			_		
N/A	The same of the sa				et Address							
Street Address				1	05 Ryerson R , State, Zip Coo	da						
City, Strike, Zip Code					Lincoln Park,		35		C Pro-	_		
26	10	Phone Numb	iel.	Tel	ephone Numbe	ar .		Ucen 037	se Num 8	<b>1</b> 51		
Project Manager for Monitoring Firm	ń	Lucid Menus	,		973-696-686 me of OSHA N	9 Janifor	-	1 357	_			
	TSohad Cr	replation Date (1	1)	No.	B&G Restor	mion, l	nc.					-
Scheduled Start Date (10)	11/23			S	reat Address	Waster or						
11/22/2013	100	-			105 Ryerson	Road				===	-	
Occupancy Status During Abelicans Facility closed/vscated during	g emira period (	of abatement.		Ci	ty, State, Zip C	ade.						
Absternant perionned ousk	je of normal fed	My hours-			Lincoln Pari	L NU OT	7035					
Describe:									मक्क क्ट व			
Scope of Work (check all that ap	ply) A Renovation			☐ Ful	l Containment v	n/nogati	Ae bussance		lovebag ion-trisbi			2.7
☐ Demolition	] ≥160 af or ≥2	60 ff	87		ni-enciosure			<u> </u>	R	-		700
≥3 ×3 ×3 ×3 ff	La landing P	omnaliv udač sti	ely				Amoun	ıt	0		n	n
Location of esbestes-containing	by maintenu staff(12)	anca/custodial	Des	cription of asi erial (ACM)	bestos-containt	TAB	(Specif	y SF or	. 19		8	
material to be abated in facility (13)	Yes	No · NA				X = 5 = 5 1 = - 7 1 <u>= -</u>			6	نا		1
apared in racons (1-2)	100	Y	lalpe in	sulation			60 lf	_		4	卄	忙
basement										ijĖ	<u> </u>	110
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		To Marriage II yet	T Gubic Yes	ds of Waste	Name of Reg	intered l	andfill	ueru Ca	enter	•	-7.3	
Registered Waste Hauter	195	P Hauler ID# 63	1 1	rards	Tullytown City, State	Resour	ce & Roso					
B & G R. storation, Inc.		Dispos	sel Dale 25/2013		Tullytown	L PA			73-45	_		
Lincoln Park, NJ 07035	- Francis		Signa	twe	Gordana S				Date 11/21/	2013		
Completed by (Print or Type)	Title Secretar	y/Treasurer			Journal -							

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

Check #6286

B & G proj. #:	2013-232	(Pu	***** EME	RGENCY '	****	0	شار بر	7
Harmon III	(1)	Name of Buildin	ng Owner/Operator	(2)				
Date of Notification	1.31	Augusta St	arks					
1111/1211	]/	Ctroot Address						
Agencies Notified	Type Notification	62 Berksh	ire Place			WON 5	- 70/3	
☐ EPA	Initial	City, State, Zin	Code			7.001.7	2	
☐ DEP		City, State, Zi	NJ 07111			I Telepho	ne Number	
DOL.	Amendment Amendment	Irvington	, 140 07 11.			073-3	72-5707	
الكا		Name of Cont	act			9150		
DOH	Cancellation	Augusta	Starks					
☐ DCA		<u> </u>	FACILITY INF	ORMATION		Type of Facilit	y (4)	
						I I I Scr	001 (17 - 1-/	u V 12\
106	where abatement is tak	ting place (3)				Sub	chapter 8 (Other	er than N-121
Name of facility	Wileic Garage					Oth	er (Private/Con	nmerciai
Augusta St	arks					Bld	gs./Homes, etc	Bldg. Age
Street Address						Square Fee	# 01 170015	
Street Address	iro Place				y Code (7)		- is hair a	demolished)
62 Berkshi	IIE F IGOO	County (6)		Count	use only)	Current Us	e (Prior if being	
City (5)		1		1 3		residenti	al	
Irvington		Es	sex		Name of Abat	ement Contractor (9)		
HAIII Bro.		da Owner (8)	ASC	M No.	D.C. Das	storation, Inc.		
Name of Mon	itoring Firm Hired by BI	ag. Owner (=/			Street Addres	Storation		
110	N/A						4	
Street Addres	e e				105 Ryers	Code		
Street Addres					City, State, Zi	ip Code		
	Code				Lincoln	Park, NJ 07035	License	e Number
City, State, Z	ip Code				Telephone N	lumber	0378	
	Haring Firm		Phone Number	1	973-696	5-6869		
Project Mana	ager for Monitoring Firm				Name of OS	SHA Monitor		
		To had Com	pletion Date (11)		B&GF	Restoration, Inc.		
Cahadulad S	Start Date (10)				Street Addr	ress		
0 10	1042	11/23/2			105 Rys	erson Road		
11/22/2		ent (Check only or	ne)		City, State,	Zip Code		36
Occupancy	Status During Abatement closed/vacated during a performed outside	a entire period of	abatement.					
Facil	ity closed/vacated durin ement performed outsic	le of normal facilit	y hours-		Lincol	n Park, NJ 07035		0. aut
□ Ahat	ement performed outers cribe:				Limet			rap & cut
T other	or Describe:					nment w/negative pre	ssure G	ovebag procedure
	Work (check all that ap	ply)			Full Contain	nment whogather	ΠN	on-friable procedure
Scope of	molition	110110		5	Mini-enclos	sure		RREE
(TAC 4.5)	Tionas.	7 - 400 ef or >26	0 If			The state of the s		le le lu lu
<u>₩</u> > <u>3</u>	sf or >3 If L		rmally used solely		of asbestos-c	containing	Amount (Specify SF or	m p c c
	cation of	by maintena	nce/custodial	Description material (A	CM)		LF)	VIIP
26	hestos-containing	staff(12)		material ()	J,			
	aterial to be pated in facility (13)	Yes	No N/A			60	If	
ab	pated in facility (10)		- X	pipe insulati	on			
				1				
basen	nent			1				
				-				
W						-		
		-		Cubic Yards of	Naste   Name	e of Registered Land	nii Recovery C	enter
=====		INIDE	P Haulei IDII	Cubic Yards of 1 yards	Tul	lytown Resource c	C Recovery e	
Registe	ered Waste Hauler	195	63		City	State		
В&	G Restoration, Inc.		Disnosa	Date	Tu	ıllytown, PA		Date
	14-40		11/2	5/2013		. 0		11/21/2013
T in	coln Park, NJ 07033	Tillo		Signature	Gore	dana Luna		
Com	pleted by (Print or Type)	Title	y/Treasurer					
Go	rdana Luna	Secretar						
30								

Augusta Starks
62 Berkshire Place
Irvington, NJ 07111
973-372-5707

November 21, 2013

#### B & G Restoration

105 Ryerson Road Lincoln Park, NJ 07035 Attn: Goran Vucenovic

I need asbestos insulation removed from my pipes as soon as possible. Once the insulation is removed I can then have my new boiler installed. Please have the approval process expedited at once as I am without heat.

Thank you for all of your help!

Sincerely,

Augusta Starks

Augusta Starks

#### State of New Jersey - Notification of Asbestos Abatement (Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

GAC Project # 060-13 Date of Notification (1) Name of Building Owner/Operator (2) November 7, 2013 RUTGERS, THE STATE UNIVERSITY OF NJ Agencies Notified Notification Type Street Address **X**EPA ☒ Initial Notification ENVIRONMENTAL HEALTH & SAFETY DEPT. X DCA ☐Amended Notification 27 ROAD 1, BLDG 4086, LIVINGSTON CAMPUS X DOL ■ Emergency (including City, State, Zip Code X DEP- No Longer REQUIRED justification) PISCATAWAY, NJ 08854 X DOH Name of Contact Cancelled Telephone Number MICHAEL SMITH, ENV. 848-445-2550 **HEALTH & SAFETY FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) WAKSMAN HALL, BLDG# 3573 School (K-12) ■ Subchapter 8 (other than K-12) Street Address Other (i.e. private & commercial buildings, homes, etc.) **BUSCH CAMPUS** Sq. Feet: N/A # of Floors: 4 Bldg. Age: 80+ years City (5) County (6) County Code (7) **PISCATAWAY** (State Use Only) **MIDDLESEX** Current Use (prior if being demolished): ACADEMIC Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Contractor (9) Cardno ATC 0098 GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address Street Address 3 TERRI LANE **268 MAIN STREET** City, State, Zip Code City State, ZipCode BURLINGTON, NJ 08016 BUTLER, NJ 07405 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number **BRIAN KEARNY** 609-386-8800 973-492-0477 00840 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 11.20/13 12/02/13 ENVIROVISION, INC. Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 20-21 WARGARAW ROAD ☐ Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code Describe ☑Other – Describe: Shift Hours: 5:00 PM – 5:00 AM FAIRLAWN, NJ Scope of Work (Check all that apply) Full Containment with Negative Pressure ≥ 3 sf or ≥ 3 lf ■ Renovation Mini-Enclosure **X** ≥ 160 sf or ≥ 260 Demolition П Glovebag Procedure ■ Non-Exempted (\*) and Non-Friable Procedure Location of Asbestos-Containing Is Location Normally Used Description of Asbestos Containing Material Amount Abatement Type Material (ACM) in Facility (13) (ACM) (i.e. thermal systems insulation, surfacing, Solely by Maint./Custodial (Specify SF Staff? (12) Remove Repair Encap Enclose VAT, or other miscell.) or LF) NO NA YES **MER 405** X TSI-Duct Insulation 300 SF X Name of Reg. Waste Hauler NJDEP Waste Hauler ID # Name of Registered Landfill 5 CY Cubic Yards of Waste: See Hauler Below #1 & 2 See Below G.R.O.W.S. North Landfill Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405

Disposal Date

12/02/13

Reymand C. Pedalino

City. State

19067 215-736-1700

November 7, 2013

100 New Ford Mill

Rd. Morrisville, Pa

SENIOR PROJECT

MANAGER

NJDEP # 12561

Completed by (Print or Type) RAYMOND C. PEDALINO

NJ DEP # SW2117

Hauler #2) S TG - 58 Pyles Lane, New Castle, De 19720

### State of New Jersey - Notification of Asbestos Abatement (Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

GAC Project # 060-13 Date of Notification (1) Name of Building Owner/Operator (2) November 7, 2013 RUTGERS, THE STATE UNIVERSITY OF NJ Agencies Notified Notification Type Street Address **X**EPA ☑ Initial Notification **ENVIRONMENTAL HEALTH & SAFETY DEPT.** X DCA ■Amended Notification 27 ROAD 1, BLDG 4086, LIVINGSTON CAMPUS X DOL ■ Emergency (including) City, State, Zip Code ■ DEP- No Longer REQUIRED PISCATAWAY, NJ 08854 justification) X DOH Cancelled Name of Contact Telephone Number MICHAEL SMITH, ENV. 848-445-2550 **HEALTH & SAFETY FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) WAKSMAN HALL, BLDG# 3573 ☐ School (K-12) ■ Subchapter 8 (other than K-12) Street Address Other (i.e. private & commercial buildings, homes, etc.) **BUSCH CAMPUS** Sq. Feet: N/A # of Floors: 4 Bldg. Age: 80+ years City (5) County (6) County Code (7) PISCATAWAY **MIDDLESEX** (State Use Only) Current Use (prior if being demolished): ACADEMIC Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Contractor (9) Cardno ATC 0098 GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address Street Address 3 TERRI LANE **268 MAIN STREET** City, State, Zip Code City State, ZipCode BURLINGTON, NJ 08016 BUTLER, NJ 07405 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number **BRIAN KEARNY** 609-386-8800 973-492-0477 00840 Scheduled Start Date (10) Name of OSHA Monitor Scheduled Completion Date (11) 11.20/13 12/02/13 ENVIROVISION, INC. Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement ■Abatement Performed Outside of Normal Facility Hours -20-21 WARGARAW ROAD Describe City, State, Zip Code Other - Describe: Shift Hours: 5:00 PM - 5:00 AM FAIRLAWN, NJ Scope of Work (Check all that apply) Full Containment with Negative Pressure  $\ge 3 \text{ sf or } \ge 3 \text{ lf}$ ▼Renovation Mini-Enclosure ≥ 160 sf or ≥ 260 Demolition Glovebag Procedure ■ Non-Exempted (\*) and Non-Friable Procedure Location of Asbestos-Containing Is Location Normally Used Description of Asbestos Containing Material Amount Abatement Type Material (ACM) in Facility (13) Solely by Maint./Custodial (ACM) (i.e. thermal systems insulation, surfacing, (Specify SF Staff? (12) VAT, or other miscell.) or LF) Remove Repair Encap Enclose YES NO NA **MER 405** X TSI-Duct Insulation 300 SF X Name of Reg. Waste Hauler NJDEP Waste Hauler ID # Name of Registered Landfill 5 CY Cubic Yards of Waste: See Hauler Below #1 & 2 See Below G.R.O.W.S. North Landfill Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 Disposal Date City, State NJDEP # 12561 100 New Ford Mill 12/02/13 Hauler #2) STG - 58 Pyles Lane, New Castle, De 19720 Rd. Morrisville, Pa NJ DEP # SW2117 19067 215-736-1700 Completed by (Print or Type) Title Date RAYMOND C. PEDALINO SENIOR PROJECT Reymend C. Pedalino November 7, 2013 MANAGER

6601	Print Form
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Agendes Notified   Type Notification   Initial   Amended   Amend	Date of Notification (1)		-			Building Cocese C			(2)							
Tritial Amended		Type Notification		+	Street Ad	dress	Des La Verrania						-			e i
Amended Amen					171 Cli	fton Ave	Э.				i.i.c	V 2 =	0010			- 1
Amendment #   Name of Contact   Name of Facility Where Abatement is Taking Place (3)   Street Address   St	EPA DEB	500000000000000000000000000000000000000		-	City, Stat	e, Zip Co	de				101	2 5			-	
DOH	X DEP	100 NOON OF STREET STREET	#	- 1		722 82										
Many Ellen Logan   201-417-1189	Name and the second sec		(including								Tele	ephone Num	ber	-		_
Name of Facility Where Abatement is Taking Place (3)   Our Lady of Mercy Academy   Street Address   Square Feet   4 of Floors   Big. Age   60   Other (i.e. private & commercial buildings, homes, stephage 18 (Other than K-12)   Other (i.e. private & commercial buildings, homes, stephage 18 (Other than K-12)   Other (i.e. private & commercial buildings, homes, stephage 18 (Other than K-12)   Other (i.e. private & commercial buildings, homes, stephage 18 (Other than K-12)   Other (i.e. private & commercial buildings, homes, stephage 18 (Other than K-12)   Other (i.e. private & commercial buildings, homes, stephage 18 (Other than K-12)   Other (i.e. private & commercial buildings, homes, stephage 18 (Other Hank K-12)   Other (i.e. private & commercial buildings, homes, stephage 18 (Other Hank K-12)   Other (i.e. private & commercial buildings, homes, stephage 18 (Other Hank K-12)   Other (i.e. private & commercial buildings, homes, stephage 18 (Other Hank K-12)   Other (i.e. private & commercial buildings, homes, stephage 18 (Other Hank K-12)   Other (i.e. private & commercial buildings, homes, stephage 18 (Other Hank K-12)   Other (i.e. private & commercial buildings, homes, stephage 18 (Other Hank K-12)   Other (i.e. private & commercial buildings, homes, stephage 18 (Other Hank K-12)   Other (i.e. private & commercial buildings, homes, stephage 18 (Other Hank K-12)   Other (i.e. private & commercial buildings, homes, stephage 18 (Other Hank K-12)   Other (i.e. private & commercial buildings, homes, stephage 18 (Other Hank K-12)   Other (i.e. private & commercial buildings, homes, stephage 18 (Other Hank K-12)   Other (i.e. private & commercial buildings, homes, stephage 19 (Other Hank K-12)   Other (i.e. private & commercial buildings, homes, stephage 19 (Other Hank K-12)   Other (i.e. private & commercial buildings, homes, stephage 19 (Other Hank K-12)   Other (i.e. private & commercial buildings, homes, stephage 19 (Other Hank K-12)   Other (i.e. private & commercial buildings, homes, stephage 19 (Other Hank	DOH						nan				316-3336					r.
Name of Facility Where Absterment is Taking Place (3)	X DCA	Caricellation			Name of the state	ACAMA SANG	MCROPOL _	ON	-							1
School (K-12)   Subchapter 8 (Other than K-12)   Subchapter 8 (O	Name of Eacility Where	Abatement is Takin	n Place (3)	- 77.5	FACIL	II T INFO	KWATI	ON	Type	e of Facility (4)						
Subchapter 8 (Other Hank ALZ)			g 1 1000 (0)							35,45, 0						1
Other (i.e. private & commercial buildings, homes, etc.)		- roadoniy							H			er than K-12	1			
Square Feet									H					dings,	home	es,
County (6)   School   County Code (7)   Courrent Use (Prior if being demolished)   School   County Code (7)   Courrent Use (Prior if being demolished)   School   County Code (7)   Courrent Use (Prior if being demolished)   School   County Code (7)	25 Fremont Ave.	3.0							ப				1 22			
County (6) Bergen    County Code (7)   STATE USE ONLY)	City (5)								72 (41/47)			Floors			ge	
School	Park Ridge								40,	000	1		6	0		
Name of Monitoring Firm Hired by Building Owner (8)	County (6)										if bei	ng demolish	ed)			
Enviro Vision Consultants Inc.   00079   Lesco Services Inc.	Bergen				(STATE U	SE ONLY)			Scl	hool						
Enviro Vision Consultants Inc.   00079   Lesco Services Inc.	Name of Monitoring Fire	m Hired by Building	Owner (8)		ASCM	No.		Name	of Ab	atement Contr	actor	(9)				
20-21 Wagaraw Rd.  2156 Maple Ave.  City, State, Zip Code Fair Lawn,NJ 07410  Project Manager for Monitoring Firm Guillermo Morales  Start Date (10) Start Date (10) 11/22/13  Cocupancy Status During Abatement (Check Only One)  Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other – Describle:  Start Date (10) 11/22/13  Cocupancy Status During Abatement (Check Only One)  Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other – Describle:  Street Address 156 Maple Ave.  City, State, Zip Code Wallington, NJ 07057  Scope of Work (Check All That Apply)  Street Address 156 Maple Ave.  City, State, Zip Code Wallington, NJ 07057  Scope of Work (Check All That Apply)  Street Address 156 Maple Ave.  City, State, Zip Code Wallington, NJ 07057  Full Containment with Negative Pressure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure  Abatement Type  Ab					0007	9		Lesc	o Se	ervices Inc.						
20-21 Wagaraw Rd.	Street Address							Street	Addr	ess						
City, State, Zip Code           Fair Lawn,NJ 07410         City, State, Zip Code           Wallington, NJ 07057           Telephone No. 973-636-9145         State Date (10) 973-406-7341         License No. 01107           Start Date (10) 1/1/22/13         Scheduled Completion Date (11) 1/127/13         Name of OSHA Monitor Leslaw Nalodka           Docupancy Status During Abatement (Check Only One)         Street Address           Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours         Street Address           Other - Describe:         Street Address           Scope of Work (Check All That Apply)         Renovation Demolition           Street Address         Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure		d						156	Мар	le Ave.						
Fair Lawn,NJ 07410  Project Manager for Monitoring Firm Guillermo Morales    Telephone No. 973-636-9145   973-406-7341   01107											-				_	_
Project Manager for Monitoring Firm Guillermo Morales  Telephone No. 973-636-9145  973-406-7341  Name of OSHA Monitor Leslaw Nalodka  Street Address 156 Maple Ave.  City, State, Zip Code Wallington, NJ 07057  Telephone No. 973-406-7341  Name of OSHA Monitor Leslaw Nalodka  Street Address 156 Maple Ave.  City, State, Zip Code Wallington, NJ 07057  Telephone No. 973-406-7341  Name of OSHA Monitor Leslaw Nalodka  Street Address 156 Maple Ave.  City, State, Zip Code Wallington, NJ 07057  Full Containment with Negative Pressure Mini-Enclosure M		10						1000000 miles			7					
Start Date (10)				_	Talanhan	o No		200 00000000	_		•	Liconco N		-		
Start Date (10) 11/22/13 Scheduled Completion Date (11) 11/27/13 Scheduled Completion								100000000000000000000000000000000000000					0.			
11/22/13  Cocupancy Status During Abatement (Check Only One)  Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours  City, State, Zip Code Wallington, NJ 07057  Scope of Work (Check All That Apply)  Sco												01107			er ( = 57e	
Street Address   156 Maple Ave.   156			53.50		npletion E	Date (11)										
Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours  Other – Describe:    City, State, Zip Code Wallington, NJ 07057    City, State   City, Sta																
Abatement Performed Outside of Normal Facility Hours  City, State, Zip Code Wallington, NJ 07057  Full Containment with Negative Pressure Minini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Exempted (*) and Non-Exempted (*) and Non-Exempted (*)	Occupancy Status Duri	ng Abatement (Che	ck Only One	)												
Abatement Performed Outside of Normal Facility Hours Other – Describe:  Scope of Work (Check All That Apply)  ≥ 3 sf or ≥3 lf ≥ 160 sf or ≥260 lf  Pemolition    Secope of Work (Check All That Apply)	Facility Closed/Va	cated During Entire	Period of Al	atem	nent			156	Мар	le Ave.						
Scope of Work (Check All That Apply)    Scope of Work (Check All That Apply)   Scope of Work (Check All That Apply)   Scope of Work (Check All That Apply)   Scope of Work (Check All That Apply)   Scope of Work (Check All That Apply)   Scope of Work (Check All That Apply)   Scope of Work (Check All That Apply)   Scope of Work (Check All That Apply)   Scope of Work (Check All That Apply)   Scope of Work (Check All That Apply)   Scope of Work (Check All That Apply)   Scope of Work (Check All That Apply)   Scope of Work (Check All That Apply)   Scope of Work (Check All That Apply)   Scope of Work (Check All That Apply)   Scope of Work (Check All That Apply)   Winit-Enclosure   Glovebag Procedure   Non-Exempted (*) and Non-Friable Procedure   Abbestos-Containing Material (ACM) (Specify SF or LF)   Scope of Work (Check All That Apply)   Scope of Work (Check All That Ap	Abatement Perform	med Outside of Norr	nal Facility I	Hours	;			City, S	State,	Zip Code	500					
E ≥3 sf or ≥3 if ≥160 sf or ≥260 lf    S   Renovation   Demolition   Procedure   Procedure   Non-Exempted (*) and Non-Friable Procedure   Non-Exempted (*) and Non-Exempted (*) and Non-Friable Procedure   Non-Exempted (*) and Non-Exempte	Other – Describe:							Wall	lingto	on, NJ 0705	7					
Demolition   Description of Abbettern   Type   Description of Abbettern   Description   Desc	Scope of Work (Check	All That Apply)	37/25-													
Demolition   Description of Abbettern   Type   Description of Abbettern   Description   Desc	X >3 ef or >3 lf		X Re	nova	tion			×	S F	ull Containmer	nt with	Negative F	ressu	re		
Non-Exempted (*) and Non-Friable Procedure			-						N	lini-Enclosure						
Substitute   Containing Material (ACM)   Asbestos-Containing Material (ACM)   Used Solely by Maintenance/ Custodial Staff? (12)   Yes   No   N/A      Boiler Room   *     Disposal Date   Normally Used Solely by Maintenance/ Custodial Staff? (12)   To BE ABATED   In Facility (13)   Yes   No   N/A      Room   *     Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)   SF or LF			10 mm					-								
Location of Asbestos-Containing Material (ACM) Normally Used Solely by Maintenance/ Custodial Staff? (12)  Yes No N/A  Boiler Room * pipe insulation 90 sf. * Noward Carting Inc.  Name of Registered Waste Hauler Newark Carting Inc.  Newark NJ  Normally Used Solely by Maintenance/ Custodial Staff? (12)  Yes No N/A  Page No N/A  Absestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Page No N/A  Amount (Specify SF or LF)  Page No N/A  Pa			1					L	_I N	on-Exempted	(^) an	d Non-Friab	le Pro			
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)  Yes No N/A  Boiler Room  * pipe insulation  * boiler insulation  * boiler insulation  Name of Registered Waste Hauler  Newark Carting Inc.  Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  ** pipe insulation  * boiler insulation  * boiler insulation  Name of Registered Landfill  GROWS  **  **  **  **  **  **  **  **  **			A660		(T)(1000-											ι
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)  Yes No N/A  Boiler Room  * pipe insulation  Boiler Room  * boiler insulation  Name of Registered Waste Hauler Newark Carting Inc.  Name of Registered Waste Hauler Newark NJ  Name of Registered Waste Hauler Name of Registered Waste Hauler Newark NJ  Name of Registered Landfill GROWS  City, State Newark NJ  Name of Registered Landfill GROWS	Locatio	on of					De	scription	n of				_	Τ.	1	
Boiler Room * pipe insulation 105 lf. *  Boiler Room * boiler insulation 90 sf. *  Name of Registered Waste Hauler Newark Carting Inc.  Name of Registered Waste Hauler Newark NJ  Name of Registered Landfill GROWS  Disposal Date 11/27/13  Name of Registered Landfill GROWS													J 70		ᄪ	ш
Boiler Room * pipe insulation 105 lf. *  Boiler Room * boiler insulation 90 sf. *  Name of Registered Waste Hauler Newark Carting Inc.  Name of Registered Waste Hauler Newark NJ  Name of Registered Landfill GROWS  Disposal Date 11/27/13  Name of Registered Landfill GROWS			Custo		Staff?	(i.e.							em	Re	cap	nclo
Boiler Room * pipe insulation 105 lf. *  Boiler Room * boiler insulation 90 sf. *  Name of Registered Waste Hauler Newark Carting Inc.  Name of Registered Waste Hauler Newark NJ  Name of Registered Landfill GROWS  Disposal Date 11/27/13  Name of Registered Landfill GROWS	100000000000000000000000000000000000000	200		(12)								18582-920 <b>8</b>	SVO	pair	sul	SUI
Boiler Room * pipe insulation 105 lf. *  Boiler Room * boiler insulation 90 sf. *  Name of Registered Waste Hauler Newark Carting Inc.  Name of Registered Landfill Object Of Waste Hauler ID No. Object Of Waste Size Of Waste Object Of Waste Size Of Waste Object Of Waste	50' ))		Ves	No	N/A								=	1 23	ate	G.
Boiler Room * boiler insulation 90 sf. *  Name of Registered Waste Hauler Newark Carting Inc.  Name of Registered Landfill Of Waste Hauler ID No. O5409  Disposal Date 11/27/13  Morrisville PA	,			140	18025						-		+-	-		
Name of Registered Waste Hauler Newark Carting Inc.  Name of Registered Waste Hauler Newark Carting Inc.  Name of Registered Landfill Of Waste Hauler ID No. O5409  Disposal Date 11/27/13  Morrisville PA	Boiler F	Room	*				pipe	insula	ition		1	05 lf.	*			
Name of Registered Waste Hauler Newark Carting Inc.  Name of Registered Landfill Hauler ID No. 05409  Disposal Date Newark NJ  Disposal Date 11/27/13  Morrisville PA	Boiler F	Room	*				boile	r insula	ation	P.	9	90 sf.	*			
Newark Carting Inc.    Hauler ID No. 05409   O5409   O			+						-				-	+-	-	
Newark Carting Inc.    Hauler ID No. 05409   O5409   O							_						-	-	-	
Newark Carting Inc.    Hauler ID No. 05409   O5409   O																
Newark Carting Inc.  05409 3 GROWS  City, State Newark NJ Disposal Date 11/27/13 Morrisville PA	Name of Registered Wa	aste Hauler								Name of R	egiste	ered Landfill		30-1-56-		\$C
City, State Newark NJ  Disposal Date 11/27/13  City, State Morrisville PA	Harry San			1 0.00		No.	10 mg 20 mg	iste		GROWS	3					
Newark NJ 11/27/13 Morrisville PA		•		0	5409											
1000									•							
Completed by Leslaw Nalodka  Title President  Signature  11/19 /!3	Newark NJ		N				100000000000000000000000000000000000000			Morrisvi	ie P					
Leslaw Nalodka President 11/19 //3	10 10 10 10 10 10 10 10 10 10 10 10 10 1		255	GS 520			1	Signatur	е	111				".		
	Leslaw Nalodka		Presid	ient		200		1		INN	_		1/19	/!3		

Date of Notification (1) 11/08/2013				ne of Buildir YNE A. S		Operator	(2)		7			•	
Agencies Notified	Type Notification	i		et Address 5 - RAILR		rF				_			
EPA  DEP  DOL	Initial Amended Amendmen		City	, State, Zip ST RUTH	Code	100				-	-		***
☑ DOH DCA	Emergency justification Cancellatio	)		ne of Contac YNE SOL			st -		phone Nu 1.270.84				
			F	ACILITY IN	FORMATI	ON				-			
Name of Facility Where PRIVATE	Abatement is Taki	ng Place (3)	)		G-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1		Type of Facility  School (K-						
Street Address 275 - RAILROAD A	VE.		(45)) (45))				Subchapte Other (i.e. etc.)	er 8 (Othe	er than K-1	(2) cial bui	ldings	, hom	nes,
City (5) EAST RUTHERFO	RD N.J.						Square Feet 2, 500		Floors		Bldg.		
County (6)				nty Code (7 TE USE ONL			Current Use (Pr			shed)		6	
Name of Monitoring Firm	Hired by Building	Owner (8)	AS	SCM No.		Name o	of Abatement Co	ontractor	(9) ISTRUO	TION			
Street Address						Street A	Address		SIRUC	TION	LLC	<i>.</i>	
City, State, Zip Code						City, Sta	N ORDEN F ate, Zip Code						
Project Manager for Mon	itoring Firm		Telep	phone No.		Telepho	ENSACK N.	J. 0760	1 License N	No.			
Start Date (10)		Schedule	d Completi	on Date (11	1)		08.4270 f OSHA Monitor		01135				
11/18/2013 Occupancy Status During	Abstament (Cha	11/19/2	013		.,	EMSL	ANALYTICA						
Facility Closed/Vaca	ated During Entire	Period of Al	batement			Street A	ddress EST 38TH S	TR.					
Other - Describe: _		nal Facility	Hours		[		ite, Zip Code YORK N.Y.	10018	3 ·				
Scope of Work (Check A	li That Apply)												
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		(CONTRACT)	enovation emolition			××	Full Containm Mini-Enclosur Glovebag Pro	e cedure					
		ls L	ocation	T			Non-Exempte	u (*) and	Non-Friat	le Pro	10000 12	emen	t
Location		No	ormally Solely by		Des	cription o	ıf					ре	
Asbestos-Containing TO BE ABA In Facili (13)	TED	Main Custo	tenance/ dial Staff? (12)	(i.€	estos Conta e. thermal s surfaci	aining Ma	terial (ACM) nsulation, or	(Sp	nount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
BASEME	NIT	165		<del>^</del> -	DIDE IN					_		Ф	
BAGLIVIE	INI		X		PIPE IN	ISULAT	ION	158	3 LF.	Х			
Name of Design													
Name of Registered Wast SHARON QUALITY		ON LLC.	NJDEP Hauler 00339		of Wast	te	F		ed Landfill TERPRI		INC.		
City, State HACKENSACK N.J.		-			Disposa	al Date	City, State		G OHI			-	$\dashv$
Completed by CARLOS ESQUIVEL		Title SAFET	Y MANA	AGER	'Sig	gnature Die	0/	60	Da		012		
ASB-41 (R-06-08)		1			7		use this form for	asbesto				activit	ties.

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

Date of Notification (1) Nov 20, 2013					sullaing Owne ssil, LLC	(2) Operator				
Agencies Notified		Noneth 19	<b>-</b>	\						
THE PARTY OF THE P		Notificatio	u 1 NDe	Street A	idress					
(X) EPA		(Y) Initi-1	NI-ALC4'	80 Park	Plaza					
(X) DEP		(A) Initial	Notification			_				
(X) DOL		Amend	ded Certification	City, Sta	te, Zip Code	7 3	7			
(X) DOH		( ) Cance	lied	Newark	NJ 07102-41	no.			3¥	
(X) DCA						,	1			
		·		Name of	Contact		1-:			
				Domenia	Fiorino 5	010	Tel. Nur	nber		
Non			FACILIT	TY INFORMATION	ON THE PROPERTY OF	1113	(732) 62	0-5205		
Name of Facility Where	Abatement is	s Taking Place	(3)				i .			
ESSEX GENERATING	Station		127	Type of F	acility (4)					
				( ) School	ol (K-12)	Sec. 1				
Street Address				( ) Subcl	napter 8 (other	than K-12)				
155 Raymond Blvd				(X) Other	(i.e. private &	commercial blo	das., home	s etc		
City (5)	County (6	)	Count	Sq. Feet	_1,000,000		# of Floor	c 2		
Newark	Essex	1	County Code (7)	1.0000000000000000000000000000000000000			, 51 1 1001.	<b>0</b>		
			(State Use Only)	Bldg. Age	65					
Name of Monitoring Firm	Hired by Pla	da Oum - (0)	100	Current U	se (prior if bei	ng demolished)	Flectric C			
1 1111	III CO DY BIC	y. Owner (8)	ASCM No.			Nome (C	LIGOLITIC G	enerati	ing Stat	tion
						Name of Co	ontractor (9)	)		27/2
Street Address						Absolut Ac	e Inc.			
				Street A 1	den e e					
				Street Add	ress					
City, State, Zip Code				PO BOX 2	£95					
org, State, ZIP Code										
				City State,	ZipCode					
Project Manage		220		FLORHAM	PARK, NJ 0	7932			NEW CONTRACTOR	
Project Manager for Moni	toring Firm	Telephone N	lumbor			. 002				
	The state of the s		AGITIDE!	Telephone	Number					
Cab-11 15		1		(973) 410-	9217		License N	umber		
cheduled Start Date (10)	)	Schoduled	Completion Date (11)	,		- 1	00225			
Dec 5, 2013		ochequied (	ompletion Date (11)							
		Don A no.	Piscon Date [11]	Name of O	CLIA NA					
		1 000 4, 2014		Name of O	SHA Monitor					
Occupancy Status During	Ahatemast '	Dec 4, 2014		Name of O	SHA Monitor					
Occupancy Status During ) Facility Closed/Vacated	Abatement (	Check only one		MECS						
Occupancy Status During ) Facility Closed/Vacated ) Abatement Performed	Abatement ((	Check only one		Street Addr	ess					
) Abatement Performed	Abatement (0 During Entir Outside of No	Check only one		MECS	ess					
Occupancy Status During ) Facility Closed/Vacated ) Abatement Performed escribe	Abatement (0 d During Entir Outside of No	Check only one		Street Addr 5 Linwood	ess Ct					
) Abatement Performed escribe	Outside of No	Check only one re Period of Abormal Facility H	atement ours -	Street Addr 5 Linwood	ess Ct					
) Abatement Performed escribe	Outside of No	Check only one re Period of Abormal Facility H	atement ours -	Street Addr 5 Linwood	ess Ct					
) Abatement Performed ( escribe	Outside of No	Check only one re Period of Abormal Facility H	atement ours -	Street Addr 5 Linwood	ess Ct					
) Abatement Performed ( escribe	Outside of No	Check only one re Period of Abormal Facility H	atement ours -	Street Addr 5 Linwood	ess Ct					
) Abatement Performed escribe	Outside of No	Check only one re Period of Abormal Facility H	atement ours -	Street Addr 5 Linwood	ess Ct					
) Abatement Performed escribe	Outside of No	Check only one re Period of Abormal Facility H	atement lours -	Street Addr 5 Linwood City, State, Hamilton, M	ess Ct					
Abatement Performed escribe ther – Describe Two Shi purce of Work (Check all to Demolition (X) Renoved	Outside of No  fts, 12 hours  that apply)  vation	Check only one re Period of Abormal Facility H	atement lours -	Street Addr 5 Linwood City, State, Hamilton, M	ess Ct					
Abatement Performed escribe ther – Describe Two Shi purce of Work (Check all to Demolition (X) Renoved	Outside of No  fts, 12 hours  that apply)  vation	Check only one re Period of Abormal Facility H	atement lours -	Street Addr 5 Linwood City, State, Hamilton, M	ess Ct					
Abatement Performed escribe ther – Describe Two Shi purce of Work (Check all to Demolition (X) Renoved	fts, 12 hours that apply) vation >260 LF ACI	Check only one re Period of Abormal Facility H	atement lours - or plant coverage (>25<160 SF or >10 <2	Street Addr 5 Linwood City, State, Hamilton, N	ess Ct Zip Code JJ 08690					
Abatement Performed  escribe ther – Describe Two Shi  purce of Work (Check all to Demolition (%) Renove Large Proj. (>160 For Full Containment with Notation of Asheston	fts, 12 hours  that apply)  vation  >260 LF ACM egative Press	Check only one re Period of Abormal Facility H	atement ours -  r plant coverage  (>25<160 SF or >10 <25 fini-Enclosure (X )	Street Addr 5 Linwood City, State, Hamilton, N	ess Ct Zip Code JJ 08690	j. (<25 SF or	015			
Abatement Performed (escribe	fts, 12 hours that apply) vation >260 LF ACP legative Press	Check only one re Period of Abormal Facility Hormal Facility H	atement ours -  r plant coverage  (>25<160 SF or >10 <2 fini-Enclosure (X) sed Description of	Street Addr 5 Linwood City, State, Hamilton, N	ess Ct Zip Code J 08690	i. (<25 SF or <1	0 LF ACM)			
Abatement Performed escribe ther – Describe Two Shi purce of Work (Check all to Demolition (X) Renoved	fts, 12 hours  that apply)  vation  >260 LF ACP  egative Prese  Is Location  Solely by	Check only one re Period of Abormal Facility Hormal Facility Maint (Control of the Control	atement ours -  r plant coverage  (>25<160 SF or >10 <2 fini-Enclosure (X) sed Description of	Street Addr 5 Linwood City, State, Hamilton, N	ess Ct Zip Code J 08690	i. (<25 SF or <1	0 LF ACM)			
Abatement Performed (escribe ther – Describe Two Shipmer of Work (Check all the Demolition (**) Renovable Large Proj. (>160 SF or Full Containment with Notation of Asbestos-Intaining Material (ACM) in the Station of Intaining Material (ACM)	fts, 12 hours  that apply)  vation  >260 LF ACP egative Press Is Location Solely by Staff? (1.	Check only one re Period of Abormal Facility Hormal Facility H	atement ours -  r plant coverage  (>25<160 SF or >10 <2 fini-Enclosure (X) sed Description of thermal system	Street Addr 5 Linwood City, State, Hamilton, N	ess Ct Zip Code J 08690	i. (<25 SF or <1			Type	
Abatement Performed (sescribe ther – Describe Two Shiperce of Work (Check all the Demolition (**) Renovation (**) Renovation (**) Renovation of Asbestos-nationing Material (ACM) in the Company of the C	fts, 12 hours  that apply)  vation  >260 LF ACM egative Press Solely by Staff? (1.	Check only one re Period of Abormal Facility Hormal Facility Maint (Control of the Control	atement ours -  r plant coverage  (>25<160 SF or >10 <2 fini-Enclosure (X ) sed dial Description of thermal syster surfacing (VA)	Street Addr 5 Linwood City, State, Hamilton, N	ess Ct Zip Code J 08690	j. (<25 SF or <1 pecify SF or LF		ement.	Туре	
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Date of Notification (1)		Name of Building Owner/Operator (2)	
11/18	2013	4A	1 1 1 1 1 1
Agencies Notified	Type Notrication	Street Address	
☐ EPA BOLWD	☐ Initial ☐ Amended	City State 700 Dosts	0 = 0019
<b>≥</b> DCH	Amendment #	City. State. Zip Code	4 5 4010
DCA	X i mergency including	Passaic N.J. Ologa	
(NJAC 5 23-8)	<ul> <li>justification)</li> <li>☐ Cancellation</li> </ul>	Name of Contact	nber
		Adolfo Fernandez	
Name of Facility Where	Abatement is Taking Place (5	FACILITY INFORMATION	
_Priva-	te	Type of Facility (4) □ School (K-12)	
Street Address	_	☐ Subchapter 8 (Other than K 12	21
20/22 1	Broadway	Ave. Softer (i.e. private and comme homes etc.)	rcial buildings,
Passa	シャナイクカ	Square Feet 09 # of Floors	Bldg Age
County (6)	16 10.3 10/20	6,000	102
		County Code (1:87ATE USE CMLY) Current Use (Prior if being demolis	shed)
Name of Mondoring Fire	m Hired by Building Owner (5).	ASCM No Name of Abatement Contractor (9)	
N/A		Sharon Quality Constru	10 0.
Street Address		1.0 COL 130 31627	uction LLC
City. State. Zip Code		22 Van Orden Di	-00
ory, cross, Zip Code		City State Zip Code	- CACLE
Project Manager for Mor	nitorina Firm Ti	eleptione No Telephone No. 1	07601
020 NEON NO. CONT.		Literse No.	
Start Date (10)	Scheduled Comp	201 - 708 - 4270 0113 Dietion Date (11) Name of OSHA Monitor	5
11 / 19		6 3019	
Occupancy Status Dunn	g Abatement (Check only one)	Siraci Aristona	· INC
Abstract Sortement	ed During Entire Period of Abar	terrent 200 · · · · · · · · · · · ·	
Tane of Abatement _	fi Outside of Normal Facility (10 AM-PN: PN	M- AM City State. Zip Code	
Scope of Work (Check a		New York. N.Y. 10	81OC
	1000	TT Full Contours and All V	
D≳3 slot ≥3 lf M≥160 slot ≥260 lf	☐ Ronova <b>X</b> Demolif	Li Milli EACIOSIFO	
	ZS Domesii	tion ☐ Glovebag Procedure  Non Exempted (*) and Non Enable Procedure	ęwi
	Is Local	such	- 1- 1
Location Asbestos Conteneso	Material (ACM) Used Sc	blefy by Ashocias Carlon of	Abetement Type
TO BE ABA	VTED Mainten V Gustodiai	Charte If e. Inermal systems insulation (Special	Enclosure Encapsulate Repair Removel
(13)	(12	curinoma (16)	Dugi is a
	Yes No	N-A	<b>5</b>
· Floor (Rear Kita	hen, Bed rooms X	a ceiling, wall Plasfer 1,500,50	620 FT C.3 FT
and Floor (Rear Kit	1 11411	7 (41)	
	Shen Belmons	Ceiling wall Plaster 1,50059.	<b>X</b> D D D
		Control of the Contro	
lame of Registered Wast		WDEP Waste Cubic Yards of Name of Daniel	
Sharm our	P: + . Co	lauler (D No Waste - Waste	
ity State	and an .	003967 TBD Minerva Inter	prise Inc.
Hackens	lack N.J.	Oxy, State	7
ompleted By (Print or Ty)	pe) Title	TBD Waynesburg	hio
Corlos -Es	squivel Salet	The san Color of Contact of Contact	1
F-41 N 13	3	7 7 11.	-18-5013
e /2	* £to not use th	his form for asbestos licendure assembled horautical	

Date of Notification (1) November 20, 2013	3		Name of Building Owner/Operator (2) Straga Brothers Inc. Check # 6197														
Agencies Notified		Notification			Street Ad						-						$\neg$
					PO Box	< 216							23				
EPA DEP DOL		Initial Amended Amendment				e, Zip Cod oro, NJ		- ; -									
		Emergency (justification)	including		Name of	Contact		12				phone N					
DOH DCA		Cancellation			Dennis	Straga				, i	856	5-881-7	7960				
					FACIL	ITY INFO											
Name of Facility Where Bayside State Priso		ment is Takin	g Place (3	)		NUV	25 2	.VIO	Type of Facility (4)  School (K-12) Subchapter 8 (Other than K-12)								
Street Address 4293 Route 47					1		· ·	Other (i.e. private & commercial buildings, homes,								s,	
City (5) Leesburg										e Feet	# of	Floors		10 10	dg. Ag	je	
County (6) Cumberland		-			County C	code (7) ISE ONLY)			Current Use (Prior if being demolished)  Prison								
Name of Monitoring Firm	n Hired	by Building	Owner (8)		ASCM No. Name					ement Con	tractor	(9)					-
TTI Environmental				(						vironment	al, Ll	.C					_
Street Address 1253 North Church	Stre	et							Addres Cutler	20							
City, State, Zip Code Moorestown, NJ 08	8057							City, State, Zip Code Maple Shade, NJ 08052									
Project Manager for Mo Michael Stocku	ect Manager for Monitoring Firm							Telephone No. License No. (856)755-0099 00842									
Start Date (10)			Schedule			0-8800 Date (11)	-+	,		A Monitor							$\neg$
December 2, 2013			Decem		3, 2013	3		EMS									
Occupancy Status Durin	ng Aba	tement (Che	ck Only Or	ne)			* 1		i Addres Haddo	s on Ave							
Facility Closed/Vac Abatement Perform	med O	utside of Norr	nal Facility	Hours	ours City, S					p Code			#				-
Other – Describe:	Work	being perform	ed in vaca	nt area	s of the b	uilding	_	Wes	Westmont, New Jersey 08108								
Scope of Work (Check	All Tha	t Apply)						X Full Containment with Negative Pressure									
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf					ovation polition				Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure								
						1		L	Nor	n-Exempted	i (*) an	d Non-F	riable				
				Locat												ment pe	
Location Asbestos-Containin		sial (ACM)		Norma ed Sole		Ashps		criptio		(ACM)	4	mount	1			. П	
TO BE A	BATED		10000000	intena todial			thermal	system	ns insula		(	Specify		Rei	R	inca	Enc
In Fac (13			000	(12)	Otali.		other m	ing, V iscella			5	F or LF)		Remova	Repair	Encapsulate	Enclosure
(10	,		Yes	No	N/A									<u>a</u>		ate	Te
Maintenanc	e Bui	lding		XXX			Cem	ent B	oard		1,	332 SF		Х			
		•															
					-												
Name of Registered W	aste H	auler		$\perp$	NJDEP W	Vaste	Cubic	Yards		Name of	Regist	ered Lar	ndfill				
Freehold			ta		Hauler ID 2253	No.	of Was	ste		Grows		fill					6
City, State Mount Holly, New C	Jerse	y 08060		Disposal Date 12-13-13													
Completed by			Title				18	ignatu	re	Ra			Dat		2040		
Christina Lynch			Offic	e Ma	nager			11/1	11/20/2013								

CK# 2167

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Date of Notification (1)	3527		I of t		AVITIET/O	perator (2	12-94	(C)								
Agencies Notified Type Notification		+ 5	Street Ad	dress	1 1	JULI	<u> </u>									
in the second		į	$\supset$	390	R	ive	5, de	Terraco								
EPA Initial Amended		(	ty State	e, Zip Co	de	<u>,                                    </u>										
DOL Amendment #		- L	V	9911	1	<u> </u>	0873									
DOH justification)	acturing	1	Vi.me of					Telephone Num	1	25	50	`				
DCA Cancellation			V	U INFO	DARATI	ON:		732 Ca	<u> </u>	<u></u>	00	<b>A</b>				
Name of Facility Where Abatement is Taking	Place (3)		PACIL	III INFC	) 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		Type of Facility	(4)								
Vacant Reside						]	School (K-									
Street Address			-			Appendix		r 8 (Other than K-12) private & commercia		inns	home	24				
114 10- AVE			elc.)													
City (5)		_				# of Floors	: 8	dg. A	1							
Spring Lance The	ight	2	C Unity C	nde (7)			Current Use (Po	ior if being demolish	(he	ں ر	<u></u>					
County (8)	J		S ATE U	Rosidar												
Name of Monitoring Firm Hired by Building O	wner (8)		ASCM	No.		Name o	f Abatement Co									
			1			Ace II	nsulation Co.	, Inc.								
Street Address						Street A										
		95 Montrose Road  City, State, Zip Code														
City, State, Zip Code				7700	22											
Project Manager for Monitoring Firm							olts Neck, N.J. 07722  epinone No. License No.									
Project Manager for Monitoring Firm		Telephon	143.			94-1757	00029									
Start Date (10)	Schedule	d Con	it stion C	)ate (11)		Name o	CSHA Monitor			-						
12/3/13	12	6	13								1 09					
Occupancy Status During Abatement (Check	Only On	e)	. •			Street A	ddress	*								
Facility Closed/Vacated During Entire P	eriod of A	batem	ent			City Ch	alo. Zin Code									
Abatement Performed Outside of Normal Other - Describe:	O-	Pr	2			City, St	ate, Zip Code	5								
Scope of Work (Check All That Apply)		-				L			-		*****					
1750 ≥3 sf or ≥3 if	M R	enova	tica				Full Contains	nent with Negative P	ressit	re						
2350 of 2260 H	1	emoliti				R	Mini-Enclosus	re	, 0001							
							Glovebag Pro Non-Exempte	ocedure ed (*) and Non-Friabl	le Pro	oedur	e					
	Is	Locati	Cit						1	Abat	ement	i				
Location of	l N	iormali d Sole	ly 1			scription :			-	T)	pe	т				
Asbestos-Containing Material (ACM) TO BE ABATED	Mai	ntenar	nc-/				sterial (ACM) insulation,	Amount (Specify	20	i _	E.	i m				
In Facility	Cust	odial 5 (12)	it.:#?	,,,,,	surfa	cing, VAT	, or	SF of LF)	Romoval	Repair	aps	Enclosure				
(13)			1 —		otner	nisc <b>el</b> lane	eous)	:	lev lev	, #	Encapsulate	Sune				
	Yes	No	N/A					ļ		<u> </u>	œ.					
170,6505			14	Die	eco	500		455,64	V							
				r'1			1	0		L		i				
Name of Registered Waste Hauler	<u></u>	1000	JOEP W		LONG TON STREET	Yards	Name o	Fegistered Landfill	J	L	L					
Ace insulation Co., Inc.			aller ID 20186	No	of Wa	sie	IESE									
City, State				-	Dispo	sal Date	City, Sta	itu								
Colts Neck, New Jersey					12	10/1		hem, Pa								
Completed by Title						ignature	· · · · · · · · · · · · · · · · · · ·	, Da	te	.\						
George Wuest	Presi	dent				9	renges	Ward 1	113	71	13	)				
						a			1	100000	\$ 6 DE-19-3-3					

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A Sondy Rela	ted	NOTIFI (P	CATION	OF ASBES	TOS ABATI	EMENT 20)	OKH	21	10	7			
Date of Notification (1)				F Bullding Ov	Maro	•	(13	<u> </u>	<u></u>	<u>.                                    </u>			
Agencies Notified Type Notification		$\exists$	Street A								$\frac{1}{1}$		
EPA Initial Amended		-	City, Sta	ate, Zip Code		Street				1.1			
DOL Amendment Emergency		_	TO		ove	New	, Jersez	1	- 5				
DOH justification)  Cancellation				of Contact	Telephone Nur	Number 25, 2015							
				ILITY INFOR	MATION	1 129294 7200							
Name of Facility Where Abatement is Takin	g Place (	3) 7				Type of Facility (4)							
Street Address Cattus Str	ee	+				School (K-12) Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, etc.)							
Toms Rice (51)	vert	υn .	Sect	407)		Square Feet # of Floors Bidg. Age							
County (6)				Code (7) USE ONLY)		Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building	Owner (8)	)	ASC	M No.	Nam	e of Abatement Co	Contractor (9)						
Street Address			· · · · · · · · · · · · · · · · · · ·	Stree	et Address								
City, State, Zip Code				City,	Montrose Road								
Project Manager for Monitoring Firm		Telepho	ne No.		ts Neck, N.J. (	)7722 ! License N							
C) + D - 1- ((0)				732	-294-1757	00029	U.						
Start Date (10) Occupancy Status During Abatement (Chec	11/20	3/1		Date (11)		e of OSHA Monito	or						
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe:	Period of	Abaten	ent			State, Zip Code							
Scope of Work (Check All That Apply)	1 1												
≥3 sf or ≥3 if ≥160 sf or ≥260 if		Renova Demoliti				Mini-Enclosu Glovebag Pr				e			
Location of		Locati						1	Abate				
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Use Ma	ed Sole intenar todial S (12)	ly by nce/	(i.e. the	Description Containing ermal system surfacing, V ther miscella	Material (ACM) ns insulation, AT, or	Amount (Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure		
	Yes	No	N/A		-			5	,	ate	ге		
00+doors	-		4	Sid	ing		14005/ft	X					
				. W	Nisyl		U				_		
										_			
Name of Registered Waste Hauler Ace Insulation Co., Inc.		H	JDEP W		ubic Yards f Waste	Name o Grows	f Registered Landfill				$\dashv$		
City, State	172	Disposel Date City, State						_					
Colts Neck, New Jersey Completed by			Signature		own, Pa	0.1	<del></del>						
eorge Wuest President						Leon & We		12	o li	3			

# Check #

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

Date of Notification (1) 11/20/2013				Name of Building Owner/Operator (2)  New Jersey State Firemen's Association											
Agencies Notified	Type Notification			Street Add	dress alloping	Hill R	oad				1.01	2 5	201	3	
EPA DEP DOL	Initial Amended Amendment	#			e, Zip Coo		}		- 5		5/1			<u> </u>	
<b>⋈</b> DOH	Emergency ( justification)	including	1000	Name of		lich SI	<u>-</u>			100000000000000000000000000000000000000	phone Nun				-
DCA	Cancellation			1770	H. Hef					300	-020-107	1			
Name of Facility Where	Abatement is Taking	n Place (3)		FACIL	ITY INFO	RMAII	ON T	Type o	of Facility (4	4)	-				
New Jersey Fireme								_	chool (K-12						
Street Address 50 Evergreen Place	9							×	ther (i.e. p	er 8 (Other than K-12) private & commercial buildings, homes,					
City (5)	-							Square	tc.) e Feet	# of	Floors	BI	dg. A	ge	
East Orange									0,000 2 55 +						
County (6) Essex				County Code (7) (STATE USE ONLY)					nt Use (Prio er Office			ed)		25	
Name of Monitoring Firm	n Hired by Building	Owner (8)		ASCM N/A	No.		THE PROPERTY AND ADDRESS.		ement Con Haz Ma						
Street Address			*********		Street /		s t Street								
City, State, Zip Code					City, St Pater		Code NJ 07504	ı							
Project Manager for Mo	17	Telephone No.			Telephone No. 973-345-0022			License No. 00507							
Start Date (10) December 3, 2013		pletion D	Date (11)		The Taleston Co.	of OSH	A Monitor								
Occupancy Status Durin				0, 2010		-	Street			W					
Abatement Perform Other – Describe:		Period of A nal Facility	batem Hours	ent			City, St	tate, Zi	p Code						
Scope of Work (Check / ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	ні Шас <i>др</i> іу)		enovat emoliti				× × ×	Min	Containme i-Enclosure vebag Prod i-Exempted	edure				e	
	****		Location											ement	
Locatic Asbestos-Containin <u>TO BE AB</u> In Fac (13	g Material (ACM) BATED ility	Used Mai	intenar	Asbestos (i.e. the			scription taining M systems cing, VA niscellan	laterial s insula T, or		Amount (Specify SF or LF		Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A										fe	LU.
Basen	nent		Х			Pipe	Insula	tion		24	10 LF	x			225-2
1st FI	oor		Х			Pipe	Insula	tion		25	55 LF	x		3.0	
1st FI	oor		Х			Floor	Tile/M	astic		5,7	75 SF	x			
2nd Floor							Tile/M	astic			50 SF	x			
Name of Registered Wa East Coast Haz Ma		٠, ,	Н	JDEP Wauler ID J 419		of Wa	Yards ste 50		Approximation at Approx		red Landfil North Inc				
City, State Paterson, NJ 07504	1	23	!				sal Date 3/2013		City, Stat Morrisv		Á				
Completed by James E. Unger		Title Proje	ct Ma	nager	21	1 8	Signature	en (	1/1/			ate 1/20/2	2013		77 DOV.
ASB-41 (R-06-08)						1	* Do no	ot use t	his form for	asbes	tos licensur	e exer	npted	activ	ities.

Date of Notification (1) 11/21/13		Name of Building Owner/Operator (2) CHRIS														
	e Notification		1 - 300000000000000000000000000000000000	et Address 25 OCEAN	C DR			1/2		NOV	2.5	2.	Л3		4	
EPA X DEP DOL	Initial Amended Amendment #			, State, Zip Co MS RIVER		8753		1	+							
DOH DCA	Emergency (ir justification) Cancellation	iciualing	201013131	ne of Contact RIS						phone 1 -644-3						
			F	ACILITY INF	ORMA	TION										
Name of Facility Where Abate Street Address	ement is Taking	Place (3)					H	of Facility (4 School (K-12 Subchapter 8	) 3 (Othe							
3125 OCEANIC DR							×	Other (i.e. pr etc.)	ivate &	comme	ercial b	ouild	ings,	home	es,	
City (5) TOMS RIVER				17			Squa	are Feet	# of	Floors		BI	dg. A	ge	1000000	
County (6) OCEAN			County Code (7) (STATE USE ONLY)				Current Use (Prior if being demolished)									
Name of Monitoring Firm Hire	d by Building O	wner (8)	A	SCM No.				atement Cont								
Street Address						1111523737937433	Addre	DOVE CO	URT							
City, State, Zip Code								y, State, Zip Code AKEWOOD, NJ 08701								
Project Manager for Monitorin		The second secon				hone N	lo.		Licens 1200	e No.						
Start Date (10) 12/02/13		Scheduled ( 12/02/13	Complet	tion Date (11)		100000000000000000000000000000000000000		HA Monitor D PROFES	10122	NALS						
Occupancy Status During Aba	atement (Check	Only One)				Street	Addre	ess	982					_		
Facility Closed/Vacated Abatement Performed O	During Entire Poutside of Norma	eriod of Aba	tement 6 WHITE DOVE COURT  City, State, Zip Code													
Other – Describe:		, , , , , , , , , , , , , , , , , , , ,			_			OD, NJ 08	3701							
Scope of Work (Check All Tha	at Apply)	F-71				г	_									
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			ovation olition			Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure										
		V 22 02	XOR			Ľ	21 NO	on-Exempted	(*) and	Non-F	riable		213	e ement		
		N 20000000	cation nally		150	10 10						9		pe		
Location of Asbestos-Containing Mate TO BE ABATEL In Facility		Used S Mainte Custodi	olely by nance/ al Staff	ASDE	tos Co therm	escription intaining I al system facing, V	Materia Is insu		(S	nount pecify or LF)		Remova	Repair	Encapsulate	Enclosure	
(13)		(1	2)		othe	miscella	neous)	)				oval	bair	sulat	sure	
		Yes N	lo N	I/A										е		
					FL	OOR TI	LES		56	6 SF	Σ	7				
Name of Registered Waste H NEWARK CARTING	auler			EP Waste er ID No. 19	100000000000000000000000000000000000000	ic Yards /aste		Name of F	Registe	red Lan	dfill					
City, State NEWARK, NJ			Disposal Date				Date City, State BETHLEHEM PA									
Completed by JOSEPH PERLSTEIN	Title Signature Date 11/21/13															

ch # 1519

	Ivan	Building	Owner / Operator	(2)			1	-3	_	7				
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ation	1/20/2006													
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				a, NJ 0//1/			T.							
rgency cellation						2	1.0	7			er			
	F	ACII	ITY INF	ORMATION										
ent is Taking Place					ty (4)									
				Subchap	ter 8 (Other ti	han K-12)								
				Square Feet	# of FI	oors	Bldg	J. Age	•					
County (6)	Count	ty Coo	de (7).	2000		2	*		80					
Mercer				Current Use (Prior if being demolished)										
by Building Owner	(8)	P	ASCM No.						724					
		Alpha Environmental Services												
*					N. 1				9					
Firm Te	elepho	ne N	umber	609-847-2956 01091										
	etion [	Date	(11)				M as							
During Entire Perio Outside of Normal I	od of A			107 Haddon City, State & 2	Ave. Zip Code	2) %								
Abatement														
pply)									_					
	_				Mini-E Glove	nclosure Bag Proced	ures							
	Is Loc	cation	1	Description										
ng N				Asbestos-Conf	taining	(Spec	cify				1			
1						SF or	LF)	ام		Ē	m			
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Ye			N/A							te	•			
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Name of Registered Waste Hauler  ALPHA ENVIRONMENTAL				of Waste			ndfill	e i serieni			***			
		0003	3330	Maria Carata San Cara Cara	Programme and Committee of the Committee	ndfill	1 - 1	96.						
E ma - come a	¥ # 18.			Disposal Date	City, State		99 HH 85 F							
1 1 58 300				Various	Morrisville	e, PA	F4 4 - 50		1.02					
Completed By (Print or Type) Rod Richardson				D / D: / / 11/15/2013										
	ation I ended orgency cellation  County (6)  Mercer  by Building Owner  Scheduled Completion (Check only During Entire Periouside of Normal Abatement (pply)  I g Abatement (pply)  I g M C G	ation Street PO I City anded Averagency Cellation Fra  Ent is Taking Place (3)  County (6) Count Mercer  By Building Owner (8)  Scheduled Completion 12/3//2013  Ement (Check only one) During Entire Period of Autside of Normal Hours Abatement (Poly)  Abatement Poly)  I S Loo Normal Sole Mainter Custodic (1)  Yes N	Auton Indeed Street Air PO Box City, Standed Avon box Name of Frank L FACII ent is Taking Place (3)    County (6)	Lurch Demolitication Street Address PO Box 42 City, State & Zip C Avon by the Sea Name of Contact Frank Lurch  FACILITY INF ent is Taking Place (3)  County (6) Mercer  Telephone Number  Scheduled Completion Date (11) 12/3//2013 Ement (Check only one) During Entire Period of Abatement Outside of Normal Hours – 7am to 3pm  Abatement Telephone Number  Scheduled Completion Date (11) 12/3//2013 Ement (Check only one) During Entire Period of Abatement Outside of Normal Hours – 7am to 3pm  Abatement Telephone Number  Scheduled Completion Date (11) 12/3//2013 Ement (Check only one) During Entire Period of Abatement Outside of Normal Hours – 7am to 3pm  Abatement Telephone Number  Scheduled Completion Date (11) 12/3//2013 Ement (Check only one) During Entire Period of Abatement Outside of Normal Hours – 7am to 3pm  Abatement Telephone Number  Scheduled Completion Date (11) 12/3//2013 Ement (Check only one) During Entire Period of Abatement Outside of Normal Hours – 7am to 3pm  Abatement Telephone Number  Scheduled Completion Date (11) 12/3//2013 Ement (Check only one) During Entire Period of Abatement Outside of Normal Hours – 7am to 3pm  Abatement Telephone Number  Scheduled Completion Date (11) 12/3//2013 Ement (Check only one) During Entire Period of Abatement Outside of Normal Hours – 7am to 3pm  Abatement Telephone Number  Scheduled Completion Date (11) 12/3//2013 Ement (Check only one) During Entire Period of Abatement Outside of Normal Hours – 7am to 3pm  Abatement Telephone Number  Scheduled Completion Date (11) 12/3//2013 Ement (Check only one) During Entire Period of Abatement Outside of Normal Hours – 7am to 3pm  Abatement Telephone Number  FINAL Telephone Number  Ement (Check only one)  Outside of Normal Hours – 7am to 3pm  Abatement Telephone Number  Scheduled Completion Date (11)  Abatement Telephone Number  Tel	Lurch Demolition  ation  Street Address PO Box 42  City, State & Zip Code Avon by the Sea, NJ 07717  Name of Contact Frank Lurch  FACILITY INFORMATION  ent is Taking Place (3)  Type of Facility School (N School (N Square Feet 2000 Current Use (Residential Dy Building Owner (8)  ASCM No.  Name of Abat Alpha Envir Street Address 20 Canary V City, State & 2 Hamilton, N Telephone Number Firm Telephone Number Telephone Number Firm Telephone Number Scheduled Completion Date (11) 12/31/2013 EMSL Analy EMSL Analy Street Address 107 Haddon City, State & 2 Westmont,  Abatement Poly)  Renovation Demolition  Demolition  Renovation Demolition  Renovation Demolition  Description  Asbestos-Cont Material (AC City, State & 2 Westmont,  Siding Pipe Insulation (N Siding Pipe Insulation (N Siding Pipe Insulation (N Signature Project  Various  Title Project  Signature Project  Pole  Various	Lurch Demolition  ation  Street Address PO Box 42  City, State & Zip Code Avon by the Sea, NJ 07717  Name of Contact Frank Lurch  FACILITY INFORMATION  ent is Taking Place (3)  Type of Facility (4) School (K-12) Subchapter 8 (Other ti Other (i.e. private & cx Square Feet # of Fi Other fice private & cx Square Feet # of Fi Other fice private & cx Square Feet # of Fi Other fice private & cx Square Feet # of Fi Other fice private & cx Square Feet # of Fi Other fice private & cx Square Feet # of Fi Other fice private & cx Square Feet # of Fi Other fice private & cx Square Feet # of Fi Other fice private & cx Square Feet # of Fi Other fice private	Lurch Demolition  Street Address PO Box 42  City, State & Zip Code Avon by the Sea, NJ 07717  Name of Contact Frank Lurch  FACILITY INFORMATION  ent is Taking Place (3)  Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) Other (i.e. private & commercial bit Square Feet # of Floors  County (6) Mercer  County (6) Mercer  County (8) ASCM No.  ASCM No.  ASCM No.  Name of Abatement Contractor (9) Alpha Environmental Services Street Address 20 Canary Way City, State & Zip Code Hamilton, NJ 08690  Firm Telephone Number Firm Telephone Number Go9-847-2956 Scheduled Completion Date (11) 12/3//2013  ment (Check only one) During Entire Period of Abatement Outside of Normal Hours – 7am to 3pm  Abatement  Poly)  Renovation Demolition  Renovation Demolition Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous)  Pipe Insulation (wrap&Cut) Itie  Name of Registered Lar Mini-Enclosure Glove Bag Proced Non-Exempted an Mon-Exempted an Siding Pipe Insulation (wrap&Cut)  Disposal Date Various  Name of Registered Lar Morrisville, PA  Title Project  Project  Project  Poly  Name of Registered Lar Morrisville, PA	Lurch Demolition	Lurch Demolition   Street Address   PO Box 42   NOV   State & Zip Code	Lurch Demolition  Street Address PO Box 42 Index Avon by the Sea, NJ 07717  Name of Contact Frank Lurch Frank Fran	Lurch Demolition  Street Address PO Box 42 Inded Avon by the Sea, NJ 07717  Name of Contact Frank Lurch Frank Lurch Inded Avon by the Sea, NJ 07717  Name of Contact Frank Lurch FACILITY INFORMATION ent is Taking Place (3)  Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) Subchapter 8 (Other than K-12) Subchapter 8 (Other than K-12) Square Feet # of Floors Bidg. Age 2000 Current Use (Prior if being demolished) Residential by Building Owner (8)  ASCM No. Name of Abatement Contractor (9) Alpha Environmental Services Street Address 20 Canary Way City, State & Zip Code Hamilton, NJ 08590 Firm Telephone Number 609-847-2956 Scheduled Completion Date (11) 12/23//2013 ment (Check only one) During Entire Period of Abatement Contractor Street Address 17 Haddon Ave. City, State & Zip Code Westmont, NJ 08108  Full Containment with Negative Pressure Minit-Enclosure Glove Bag Procedures Non-Exempted and Non-Friable Procedu Westmont, NJ 08108  Full Containment with Negative Pressure insulation, surfacing, NAT Or other miscellaneous)  Pipe Insulation (wrap&Cut) Siding Pipe Insulation (wrap&Cut) Siding Name of Registered Landfill Hauler ID No. Of Waste Various  Morrisville, PA  Title Signature Date 11/15/2013			

Check 8785

Date of Notification (1)		Name o	of Building Owner	/Operator /	2)	75 7				
11-20	1-13		Linda		35e++	<b>&gt;</b>   #0 =				13
Agencies Notified Type Notification  □ EPA ■ Initial		Street A	-	Peac	htreel	VoRoado	)	4		
DEP GAMENDED Amended Amendme	nt #	City, Sta	ate, Zip Code	. )	iater,		88	~		
DOH justificatio		1.	of Contact	9		Telephone Nu	mber		-	_
Name of Facility Where Abatement is Tal			ILITY INFORMA			908-6	2 1 9	- d	MI	2
Single fami	-	elli	'nG		Type of Facility  School (K-				10000	
Street Address 7 Peacht	•	o a c	A )	-	Subchapte Other (i.e.	r 8 (Other than K-1 private & commerc	2) ial buil	dings	home	es,
City (5) Bridgewate			807		etc.) Square Feet	# of Floors		Bldg. A	\ge	
County (6)	er IVS	County	Code (7) USE ONLY)		Current Use (Pr	for if being demolis	hed)	65	t	
Name of Monitoring Firm Hired by Buildin		ASC		Name o	f Abatement Co	ntractor (9)		-		
Street Address	egies		MA	Street A	5T 29.	chnolog	ie	5	In	16
P.O. Box 3 City, State, Zip Code	37			P	O. Box	337				
New Equat	N2	80	533	Ne	ate, Zip Code	TUN + AT	0	8	53	3
Project Manager for Monitoring Firm	a	Telepho	ne No. 758-3365	Telepho	one No. 330	License N	lo.	39	4	
Start Date (10)	Scheduled Co	mpletion	Date (11)	Name o	f OSHA Monitor		-	<u>ح</u> ا		
Occupancy Status During Abatement (Ch	eck Only One)			Street A	ddress	1 in 10 to gies		nc		
Facility Closed/Vacated During Entir  Abatement Performed Outside of No	e Period of Abate ormal Facility Hou	ement			O. Box	337				
Other – Describe:  Scope of Work (Check All That Apply)					w Egypt	UJ CU	285	53	3	
≥ ≥3 sf or ≥3 lf	☐ Renov	/ation			Full Containm	ent with Negative I	Pressu	re		
□ ≥160 sf or ≥260 lf	☐ Demo	lition		2	Mini-Enclosur Glovebag Pro	e cedure				
	T		I		Non-Exempte	d (*) and Non-Friat	ole Pro	174.35.55		
Location of	Is Loca Norma	71777		occrintian a					ement pe	6. 1
Asbestos-Containing Material (ACM)	Used Sol Mainten		Asbestos Co		iterial (ACM)	Amount			Е	
TO BE ABATED In Facility	Custodial	Staff?		al systems i acing, VAT		(Specify SF or LF)	Remova	Re	ncap	Encl
(13)	(12	, 	other	miscellane	ous)		oval	Repair	Encapsulate	Enclosure
	Yes No	N/A							te	
Basement	X	-	Pipe 7	insul	ation	50 LF	X			
		1								
Name of Registered Waste Hauler	100	NJDEP W Hauler ID	300 Sept 75 A 1707 S 17	c Yards		Registered Landfill				
EPC Technologii		170	00	osal Date	City, Stat	te Manage	nen	40	E P	A
New Egypt Completed by	NJ		19	-3-13		ir visuille f	PA			
Steve Schenker	Presic	len+		Signature	Sol.	Da	ite .	90	- j	3

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

Date of Notification (1)				. 7	Nome	f Duilding	0	01-	(0)	UN	ا ر	) (			3 ,**	~ \	
11/21/13					Mike I	of Building Masucc	i (Priva	operato ate Ho	r (2) me)	4.5	#37						
Agencies Notified  EPA	Тур	e Notification			Street A	Address orth Cap	tains D	r					_ 0	^+2		1	
DEP DOL		Initial Amended Amendment	#			ate, Zip C		08070				₩6 <del>/ 3</del>	<u> </u>	્રા			
DOH DCA		Emergency justification) Cancellation		1		of Contact						ephone N 9-549-0					
					FAC	ILITY INF	ORMAT	ION					071				
Name of Facility Where Mike Masucci ( Priv	Abate vate	ement is Takir Home)	ig Place (	3)					Тур	e of Facility School (K-	• •						
Street Address 17 North Captains	Dr								×	Subchapte Other (i.e. etc.)	r 8 (Oth	er than K- & comme	-12) rcial bu	ilding	s, hom	ies,	
City (5) little Egg Harbor N.	J 080	070							Squ 100	are Feet	# 0	Floors		Bldg. 35+	Age		
County (6) Ocean						Code (7) USE ONL	n	CALL	Curr	rent Use (Pri	ior if bei	ng demol	- 1				
Name of Monitoring Firm N/A	n Hire	d by Building	Owner (8	)	ASC	M No.			10000000	atement Co	ntractor	(9)					
Street Address								Street		ess						-	
City, State, Zip Code							W	City, S	State, 2	Zip Code	204		-				
Project Manager for Mor			Telepho	ne No.		Telepi	hone N		J91 	License	No.						
Start Date (10)			mpletion	Date (11)				9800 SHA Monitor		00727				_			
11/22/13			11/24/					Sam	e	TE .		30727					
Occupancy Status During  Facility Closed/Vaca Abatement Perform Other – Describe:	ated [	During Entire I	Period of	Abater	ment s			Street City, S		ess Zip Code							
Scope of Work (Check A	II Tha	t Apply)				-E-Marin - Total							***************************************				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		,		Renova Demoli				×	Mi Gl	ull Containm ini-Enclosure lovebag Pro- on-Exempte	e cedure						
			Is	Locat	ion					DIT-EXEMPLE	u ( ) and	1 NOII-FII	DIE PI	200	temen		
			1	Vorma	lly		Des	scription	of					_ 1	уре		
TO BE ABA	Asbestos-Containing Material (ACM)  TO BE ABATED In Facility  Used S Mainte Custodi					Asbes (i.e.	stos Cont thermal surfac	Description of Containing Material (ACM ermal systems insulation, surfacing, VAT, or ther miscellaneous)			(S	mount pecify or LF)	Removal	Repair	Encapsulate	Enclosure	
Evtorior	Yes													_	0		
Exteriors	Exterior siding						Exte	rior sic	ding		10	00Sf	x	-	-		
							W		_								
Name of Registered Was	to Lle	ular		1.0													
United containers					IJDEP W lauler ID 2459	(5)(5)(5)(5)(5)	of Was			Name of G.R.O.		ed Landf	ill				
City, State Elm NJ								al Date		City, State		19067	,				
Completed by Anthony T Perna Title Presidel								ignature	1	INIOITISV	ine r A	0	ate 1/21/	13			

D&S Proj. #: 2013-443

	State of NJ		
Notification	of Asbestos	Aba	tement
(Pursuant to	NJAC 8:60	and	12:120)

D&S Proj. #: 2013-443			tion of Asbe		Abatement nd 12:120)		RED.	04			4.0	
Bas Floj. #. 2013-443	_ `				**************************************	191	, CE	140.			-	
	Name of Buildin	a Owner	Operator (2)			-6/3	NOT DE	-55				
Date of Notification (1)  1 1   1   9   1   3	Hudson City					ASAR	~ <0 /	M 2.				
Agencies Notified   Type Notification		Savings	Dalik			8	11050	0/0/	-	-	-	
☐ EPA ☑ Initial	80 West Cen	ntury Po	hed			- (	· ICENCUL	1720				
DEP Amended	City, State, Zip (		au				-10	3 2				
Amendment #:_  Emergency	Paramus, N.		2									
DOH (including	Name of Contac						Telephon	e Number				-
justification)  DCA  Cancellation	George Siol	los										
		FACILI	ITY INFORMA	ATION								
Name of facility where abatement is	taking place (3)					Ту	pe of Facility (	4)				
								I (K - 12)	e e e	14	40)	
Hudson City Savings Bank		_		-50		-		- 15 · · · · · · · · · · · · · · · · · ·			12)	
Street Address								Homes, et				
411 greenmount avenue						S	quare Feet	# of Floors		Bld	g. Ag	е
City (5)	County (6)				y Code (7) use only)	-	Current Use (P	rior if being	demo	olishe	d)	_
cliffside Park	BERGEN			(	,,		Alton ooo (i	nor ii oonig			-,	
Name of Monitoring Firm Hired by E	3ldg. Owner (8)		ASCM No.	11	lame of Abatem	ent Con	tractor (9)					
					D & S REST	ORATI	ON, INC.					
Street Address				5	treet Address							
					20 Californi				r 8 (Other than K-12) ate/Commercial les, etc. Floors Bldg. Age  f being demolished)  Dense Number 01169  Gative pressure  I Non-friable procedure  R R R E R E R R R E R R R R R R R R R			
City, State, Zip Code					ity, State, Zip C							
· ·				_  _	Paterson, N			Hicense	Numb	or		
Project Manager for Monitoring Firm	Phone	e Numbe	r		elephone Numb 973-345-80					ÇI.		
				<u> </u>	Name of OSHA							
Start Date (10)	Sched. Completion [	Date (11)			D & S Resto		Inc.				<u> </u>	
11/29/1313	12/16/13				Street Address							
Occupancy Status During Abatemen		97			20 California		ie					
Facility closed/vacated during Abatement performed outside	entire period of abateme	ent.			City, State, Zip C	ode						
- December				_	Paterson, N	T 07502						
Other-Describe: NORMAL H					Paterson, N			/				_
Scope of Work (check all that apply						=	Containment i-enclosure	w/negative	press	ure		
≥ 3 sf or >3 lf	Renovation					Glov	vebag procedu					
≥160 sf or ≥260 lf	Demolition					☐ Nor	n-Exempted (*	and Non-			_	
Location of	Is location normally use by maintenance/custod						Amount		е		7.5	E
asbestos-containing material (acm) to be	staff(12)		Description material (		bestos-containir	ng	(Specify	SF or		p a	6000	C
abated in facility (13)	Yes No	N/A		,			LF)		v	i		L
DAGENGENE			PIPE INSU	Π ΔΤΙ	ATION 240 l ft					ń	П	
BASEMENT		=	THERIOC	Lilli			21011		Ħ	$\overline{\Box}$	Ħ	
									Ħ	百	Ī	一
Registered Waste Hauler	NJDEP Hauler ID#		ubic Yards of \	Waste	Name of Regis			naar				
D & S RESTORATION, INC.	13506		yds		TULLYTO	WN, RE	SOURCE R	ECOVER	Y			
City, State	1000	sposal Di 12/02/13			City, State	WN D	1					
PATERSON, NJ (7 503	Title	2/02/1	Signature	<i>=</i> -			·	Date	LTTE			-
Completed by Frint or Type	TRESIDENT								/13			
SB.4*	Lo noi us a this form to	asbesto	ic licer sure in	mpted	antivities							

CK 005383 D&S Proj. #: 2013-441

State of NJ	
Notification of Asbestos Al	batement
(Pursuant to NJAC 8:60 an	d 12:120)

D&S Proj. #: 2013-441	_	(Pursu	8:60	and 12:120)		REC	En.		54			
Date of Notification (1)	Name of	Building Own	er/Operator (2)			د ا	13 NOV	-14	ED			
1 1 / 1 8 / 1 3	FELIC	CE RUBENS	STEIN				01 52	PM .				
Agencies Notified   Type Notification   Type N	Street Ad					رن- د. د	REC 13 NOV 25 25 LICEN	CONTR	· 54			
DEP Amendment #:		te, Zip Code					-17.	SING"	ી			
DOL Emergency	Uppe	r Montclair,	NJ 07043							,		
DOH (including justification)	Name of	Contact					Telephone	e Number				
DCA Cancellation	FELI	CE RUBEN	ISTEIN									
		FAC	ILITY INFORM.	ATION		-						
Name of facility where abatement is	taking place (3)					Туре	of Facility (4	1) (K - 12)				
FELICE RUBENSTEIN								apter 8 (O			12)	
Street Address								Private/Co Homes, e		cial		
197 INWOOD AVENUE						Squ		# of Floor		Blo	lg. A	ge
City (5)	County (6)				nty Code (7)	_		to a Maria		aliah a	٦/	
Upper Montclair	ESSEX	1		(Stat	e use only)	Cui	rrent Use (Pr	for it being	g aemo	olisne	a)	
Name of Monitoring Firm Hired by E	ldg. Owner (8)		ASCM No.		Name of Abatemen	t Contra	ctor (9)	******				
				_	D & S RESTOR	RATIO	N, INC.					
Street Address					Street Address	A vo						
City, State, Zip Code					20 California A City, State, Zip Code						-	
Oily, State, Zip Code					Paterson, NJ 0							
Project Manager for Monitoring Firm		Phone Num	ber	-	Telephone Number			License		er		
					973-345-8020			0	1169			
Start Date (10)	Sched. Comp	oletion Date (1	11)		Name of OSHA Mo D & S Restora		ic.					
12/05/1313	12/16/13				Street Address							
Occupancy Status During Abatemen					20 California A							
Facility closed/vacated during Abatement performed outside	entire period of a of normal facility	batement. hours-			City, State, Zip Cod	le						
Describe: NORMAL H				_	Paterson, NJ 0	07503						
Scope of Work (check all that apply							ontainment w	/negative	press	ure		
	Renovation						nclosure					
≥160 sf or ≥260 lf	Demolition				<u> </u>		cag procedur exempted (*)		friable	proc	edure	9
Location of	Is location norm by maintenance		ly						H e	R	E n	E
asbestos-containing material (acm) to be	staff(12)	/odstodiai	Descripti material		sbestos-containing		Amount (Specify S	SF or	m o	p a	С	n
abated in facility (13)	Yes N	o N/A	- material	(	1,		LF)		v e	i	a p	L.
BASEMENT			PIPE INSU	JLATI	ON	1	70 L FT		×			
									早	ᆜ	旦	111
									岩	屵	牌	#
Registered Waste Hauler	NJDEP Hai	uler ID# 1	Cubic Yards of	Waste	Name of Registere	ed Land	fill		.]니		Ш	
D & S RESTORATION, INC.	13506		2 yds		TULLYTOWN			ECOVE	RY			
City, State		Disposal 12/06/			City, State TULLYTOW	N DA						
PATERSON, NJ 07503  Completed by (Print or Type)	Title		Signature		TOLLTION	14, I A		Date			_	
BOGDAN JOLDZIC	PRESIDENT				7235	11/18	3/2013	3				
ASB-41	Do not use this	xempte	d activities.	1971 (P. 1982)								

D&S Proj. #: 2013-440

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

D&S Proj. #: 2013-440	_		2001 DATE   TANK   TANK		CONTRACTOR IN	and 12:120)		RI COLOR	ECF	/			
		lama of D	ildina Oum	or/Operator (2)				3/2	~ .	YE	1		
Date of Notification (1)    1   1   /   1   8   /   1   3				er/Operator (2) . ROBERTS				Asian	25 <sub>F.</sub>	4 ~			
Agencies Notified Type Notificati	on S	treet Addre		VIENII IE		39		8 6/0	J' Crie	Ų.	5//		
DEP Amended	1	ity, State,	WOOD A	VENUE				-107	10/100	THU	7	_	
DOL Amendment #:	-	•	WOOD, N	T 07450						- (	•		
DOH Emergency (including	l N	ame of Co		J 07430	-			T-1 '					-
justification)			YN BEC	VED									
Cancellation	II	WAKIL		LITY INFORM	ATION		-	_					
Name of facility where abatement is	s taking pla	ace (3)					Ту	pe of Facility (4				Min .	
ЛМ & BARBARA ROBERTS	3						П	=	(K - 12)	thar th	on K	10)	
Street Address	,						11	Other (	apter 8 (C Private/C			-12)	
657 LINWOOD AVENUE								Bldgs./l	Homes, e	tc.		dg. A	ge
City (5)	Cour	nty (6)			Cou	nty Code (7)		quare reet	# 01 1 1001	٠	٥,	-g. / ·	90
RIDGEWOOD	DE	RGEN			100000	te use only)	0	urrent Use (Pr	ior if bein	g dem	olishe	ed)	
Name of Monitoring Firm Hired by B		2125214725333523	Т	ASCM No.		Name of Abatemer	nt Cont	ractor (9)					
,	J					D & S RESTO	RATI	ON, INC.					
Street Address					-	Street Address		,					
						20 California	CONTROL OF THE PARTY OF T						
City, State, Zip Code						City, State, Zip Cod	de						
						Paterson, NJ (							
Project Manager for Monitoring Firm		P	hone Numb	er		Telephone Number			License		er		
						973-345-802 Name of OSHA Mo				1169			
Start Date (10)	Sched	. Complet	ion Date (11	1)		D & S Restora		Inc					
12/09/13	12/20	0/13				Street Address	ution, .	ino.			-		
Occupancy Status During Abatemen						20 California A	Avenu	e					
Facility closed/vacated during Abatement performed outside						City, State, Zip Coo	de	1					
Describe: NORMAL H	OURS		-		_	Paterson, NJ (	07503						
Scope of Work (check all that apply							] Full (	Containment w	/negative	press	ure		
$\boxtimes$ >3 sf or >3 lf	Renovation	on				Ē	_	enclosure					
≥160 sf or ≥260 lf	Demolition	n				F		ebag procedur -Exempted (*)		friable	proc	edure	9
Location of			used solely	/						R	R	E	E
asbestos-containing	staff(12)	enance/cu	stodial			sbestos-containing		Amount (Specify S	E or	m	e p	n	,n
material (acm) to be abated in facility (13)	Yes	No	N/A	material	(ACM)		- 1	LF)	r Oi	0	a	a	L
a 8 727		X	13/73	n=====						е	ŗ.	р	<del>_</del>
BASEMENT	-	PIPE INSU	LAT	ION		41 LFT			부	님	##		
										ዙ	屵	H	╫
			-		_					14	片	H	╫┼
										片	H	片	卄
Registered Waste Hauler	INID	EP Hauler	ID# I C	ubic Yards of	Waste	Name of Register	red Lan	dfill		_ا_ا	Ш	<u> </u>	
D & S RESTORATION, INC.	135			YD		TULLYTOWN			COVE	RY			
City, State			Disposal D			City, State							
PATERSON, NJ 07503			12/10/1			TULLYTOW	N, PA		1-				
Completed by (Print or Type) BOGDAN JOLDZIC	Title PRESID	ENT		Signature					Date 11/18	/2012			
ASB-41	os licensure ex	empte	d activities.			1.1/10	2013						
. n. n. t. 7. t													

## D&S Proj. #: 2013-445

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

RECEIVED

J					701300			_	_	-
Date of Notification (1)	Name of Building Owner	Operator (2)			COLSTON & LICEN	Pil o				
1 1 /1 9 / 1 3	linda beckelman					117 3: 6				
Agencies Notified Type Notification  EPA Initial	Street Address				23/08	CTILIT				
_	8 remer avenue				G LICEN	SHELKOL				
DEP Amendment #:	City, State, Zip Code									
DOL Emergency	SPRINGFIELD, NJ	J 07081								-
DOH (including	Name of Contact				Telephon	ne Number				
justification)	1' - 1 - h - alsalmon				•					
DCA Cancellation	linda beckelman									
	FACIL	ITY INFORMA	TION		Te (Feelile)	(4)				
Name of facility where abatement is	taking place (3)			1	Type of Facility School	ol (K - 12)				
V. I. I. J. L. L.						napter 8 (Other	er tha	n K-1	2)	
linda beckelman						(Private/Com			(9/05.)	
Street Address						./Homes, etc.	_	Dia	~ ^ ^	
8 remer avenue					Square Feet	# of Floors		BIO	g. Ag	le.
City (5)	County (6)			y Code (7)	0 11100 (	Dries if boing	<u></u>	licho	4/	_
	IDHOM		(State	use only)	Current Use (F	nor it being (	Jen 10	noi ie	*/	
SPRINGFIELD	UNION	ASCM No.	IIN	lame of Abatement	Contractor (9)					
Name of Monitoring Firm Hired by B	lag. Owner (8)	ASCIVI NO.	11	D & S RESTOR						
				treet Address	ATION, INC.				_	
Street Address			"	20 California A	VA.					
			_	ity, State, Zip Code			_	-	_	-
City, State, Zip Code										
				Paterson, NJ 0' elephone Number	1303	License N	umbe	er		
Project Manager for Monitoring Firm	Phone Number	er	11.	973-345-8020	)	011				
а			_	Name of OSHA Mor						
Start Date (10)	Sched. Completion Date (11	)		D & S Restorat						
12/03/1313	12/12/13		5	Street Address						
Occupancy Status During Abatemen	it (Check only one)			20 California A	venue					
☐ Facility closed/vacated during	entire period of abatement.			city, State, Zip Code	9					
Abatement performed outside	of normal facility hours-									
Describe:NORMAL H	OURS		_	Paterson, NJ 0	7503					
Scope of Work (check all that apply					Full Containment	w/negative p	ress	ure	-0.500-0	
	Renovation				Mini-enclosure	Lorenzo				
□ >160 sf or ≥260 lf	Demolition			ř	Glovebag proced Non-Exempted (		iable	proce	edure	Э
	Is location normally used solely	/					R	R	E	Е
Location of asbestos-containing	by maintenance/custodial		on of as	bestos-containing	Amount		e m	e p	n	n
material (acm) to be	staff(12)	material (		•	(Specify LF)	SFor	0	a	a	C
abated in facility (13)	Yes No N/A						v e	r	р	
	X	PIPE INSU	LATIC	ON	88 1 ft		X			
BASEMENT BOILER, rec. rms. crawl space										
		1								
Registered Waste Hauler	NJDEP Hauler ID#	Cubic Yards of	Waste	Name of Register	ed Landfill					
D & S RESTORATION, INC.	13506	1 yds		TULLYTOWN	N, RESOURCE	RECOVER	Y	- order		
City, State	Disposal D			City, State						
PATERSON, N. 07503	12/04/1		-==	TULLYTOW	N. PA		=-			==
Completed by 'Print or Type)	Titlu	Signature				Date   11/19/	201	1		
LOGDANICI DZIC	PRESIDENT = = = =	<u>L</u>		Lootiviti a		11/19/			=	
	*Don't use this form for a spect	tos liner sure ex	ארי ייויי, נ	activities.						

## State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

		NOT	(Pur	ATION suant	OF ASB	w Jersey ESTOS ABATEI C 8:60 and 5:16	)	eed Study	1 4	PE,	35 CE	4 !!!		
Date of Notification (1)	/22/13			Name	of Building	g Owner/Operato Institu	(2) ite for Advanc	ed Study	NO.	P 2.4				
Agencies Notified	Type Notification		+	Street	Address			200	310		7	7 3		
EPA DEP	Initial						Einstein Driv	ve Ç	1/2	<del>2.</del> C		=		
DEP DOL	Amended Amendment #_ Emergency (in-	cluding		City, St	tate, Zip C		rinceton, NJ 08	8540	~ C	43,	WA.	ROI		
DOH DCA	justification)  Cancellation			Name	of Contac T	t ony Bordeiri								
		- 1010223-1-		FAC		ORMATION						1		
Name of Facility Where	Abatement is Taking	Place (	(3)				Type of Facility							
	Maintenan	ice Bu	ildir	ıg			School (K-12	?) 3 (Other than K-12)	)					
Street Address	Einste	in Dri	ve_	5			Other (i.e., pi	rivate & commercia	l build					
City (5)	Drin	ceton					Square Feet 5,000	# of Floors	Blo	dg. A	ge O			
County (6)	FIII	CCOII	-			7) (STATE Current Use (Prior if being demolished)								
N	Mercer				ÓNLY)			aintenance Sh	ops			_		
Name of Monitoring Firm		Owner		e of Abatement Contractor (9) Stevens Environmental Services, Inc.										
(8)	MECS					Street Address		nemai service	ь, ш	U.		=		
Street Address	PO Box 34	1					PO E	322 Sox 322				_		
City, State, Zip Code	rosswicks, NJ	08515				City, State, Zip	Code Allentow	n, NJ 08501						
Project Manager for Mo		1	No. 2Parento	phone	No.	Telephone No.		License No.				_		
	eisgarver Jr.				8-4070	(609) 259-9688 00493								
Start Date (10)	Schee	duled Co	and the same		ite (11)	Name of OSHA Monitor MECS								
12/6/13			2/16/	13		MECS Street Address								
Occupancy Status Duri				ment		Street Address		341 Sox						
Abatement Performe	ed Outside of Norma	I Facility	Hour	rs		City, State, Zip	Code	2000/2004/2007/2007/2007						
Other - Describe:	5pm Friday Sa	turday	s on	ly			Crosswick	cs, NJ 08515						
Scope of Work (Check  ≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf	all that apply)	Rei Der	novati molitio	on n		☐ Mini-E	ontainment with Ne nclosure bag Procedure xempted (*) and No		re					
			ocatio						10	Abate Typ	ment oe			
Location		Used	Solely	y by		Description		A		. ,,				
Asbestos-Containing TO BE ABA		200000000000000000000000000000000000000	tenan stodia			stos Containing M ., thermal systems		Amount (Specify	Rer	Repair	Enc	Enc		
IN Facili		S	taff? (12)		(3.	surfacing, VA other miscellan	T, or	SF or LF)	Removal	air	Encapsulate	Enclosure		
(13)			211111111111111111111111111111111111111	N/A		Other miscellan	oous,		=		ulate	ਰੋ		
		Yes	No	-		mi in		120 15	0.0					
Shop A	reas			×		Thermal P	ping	130_lf	×					
									-	-	-	$\Box$		
Name of Registered W	aste Hauler		TN	NJDEP	Waste	Cubic Yards	Name of Red	istered Landfill				$\vdash$		
Stevens Enviror		es Inc	1 1	lauler II	D No.	of Waste 3 CU		T.R.R.F. Ir	ıc.					
City, State	miemai Service	os me.	-   -	18.	292	Disposal Date	City, State	1.10.10.1.1				-		
	Allentown, NJ	08501				12/16/13	- h) //	Tullytown, l	PA.					
Completed By	Title	е	oice	+ 1/10-	nager	Signature	1//	Date	11/2	2/1	3			

ASB-41 MAR 00

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

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

10 check		NO.				BESTOS ABA AC 8:60 and 5:1		F	En.	50		
Date of Notification (1)	19 /	13				ng Owner/Operator		#5742 #57 #5742 #5740;	"2~	15	50	
Agencies Notified	Type Notification	n		Stree	et Address		•	45	<u>&lt;5</u>	Gr.		
⊠ EPA	☐ Initial			64	0 East W	ood Street		ران کھے		J.	•	
□ DOLWD		12			State, Zip			- 4/6%	3 C. 11.		(1)	
☑ DHSS	_ Amendment	_		100000	nleand, N			76/	TO JOY	An		
DCA	☐ Emergency		ng		e of Contac	CALCOLO CONTROL CONTRO		1+.	100	19		
(NJAC 5:23-8)	justification)  Cancellation				s Foster							
	L Caricellation			1								
				FA	CILITY	NFORMATION			1			
Name of Facility Where	Abatement is Tak	ing Plac	e (3)				Type of Facility					
V.M.E.U							School (K-1	2)				
Street Address		7,532.0					Other (i.e. r	8 (Other than K private and com	12) mercial h	uildin	ae	
519 Quince Street	)						homes, etc.		merciai D	ullulli	ys,	
City (5)							Square Feet	# of Floors	В	ldg. A	lae	
Vineland										J	9	
County (6)				Cou	nty Code (	7)(STATE USE ONLY)	Current Use (P	rior if being dem	nolished)			
Cumberland					,	Α	Utility	nor in boiling don	iolioliouj			
Name of Monitoring Firm	Hired by Building	Owner	(8)	ASCM	l No	Name of Abatem		<u> </u>				
NA		, 0	(0)	710011	1110.	AbateTech, I		,				
Street Address						Street Address	no.					
Officer Address							DO D 0=					
City Ctata Zia Oada						30 Maple Ave						
City, State, Zip Code						City, State, Zip C						
						Lumberton, I	NJ 08048					
Project Manager for Moni	toring Firm		Tele	ephone	No.	Telephone No.		License No.				
						609-265-2107	7	00529				
Start Date (10)	AND AND ADDRESS OF THE PARTY OF	eduled (				Name of OSHA N	Monitor					
11 /18 /	13	11	2	2_/	_13_/	EMSL Analyt	ical					
Occupancy Status During	Abatement (Che	ck only	one)	_		Street Address		1.00			-	-211-01
☐ Facility Closed/Vacate	A STATE OF THE PARTY OF THE PAR			ment		200 Route 13	0 North					
☐ Abatement Performed					scribe	City, State, Zip Co						
Time of Abatement:	AM	PM/	PM		AM	Cinnaminsor						
Scope of Work (Check all	that apply)					Cimalinison	1, NJ 00077					
Scope of Work (Check all	tilat apply)					☐ Full Cont	tainment with Neg	native Pressure				
≥3 sf or ≥3 lf			enovat			☐ Mini-End	losure	gative i ressure				
≥160 sf or ≥260 lf		∐ D∈	emolitic	on		Gloveba	g Procedure	227 22 23				
		1 7			Т	⊠ Non-Exe	mpted (*) and No	n-Friable Proce				
Location	of		s Locat Norma			<b>D</b>			Ab	atem	ent T	уре
Asbestos-Containing N			ed Sole		Ashe	Description o stos Containing Ma	terial (ACM)	Amount	Re	Re	四	m
TO BE ABA			aintena		(i.e	., thermal systems	insulation,	(Specify	Removal	Repair	Encapsulate	Enclosure
IN Facilit	y	Cus	todial (12)	Stail?		surfacing, VAT,		SF or LF)	<u>a</u>	,	lus	l su
(13)		Yes	No	N/A	1	other miscellane	ous)				ate	
F. A. day		1000000	1000000		_							
Exterior					Transite	9		100 LF				
						200 St. 1				П	П	П
										=	1	1
		1		+=-						Ш	Ш	
200						2						
Name of Registered Waste	e Hauler		1 257/6	JDEP V	SEC. 10. 10. 10. 10. 10. 10. 10. 10. 10. 10	Cubic Yards of	Name of Regis	tered Landfill				_
AbateTech, Inc.			H	auler II 18750		Waste 12	G.R.O.W.S	. Landfill				
City, State				10/00		Disposal Date	City, State					-
Lumberton, NJ						11/22/13	Tullytown,	ΡΔ				
Completed By (Print or Ty	oe) Tit	lo.				30.10.7160.00.00.00	i diry towit,		5.			
Gwendolyn Trumbet				· · · ·		Signature	1		Date /	al	12	
Gwendolyn Trumbet	u (	Operati	ons (	oordi	nator		MA		u/l	1/	1 -	

ASB-41 MAY 11

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

Notack

# State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:126)

1310-4699 Check #

	200							- '	Flin				
Date of Notification	(1) 11/20/13			Name	of B	uilding	Owner / Operator	r (2)	. FED				
Agencies Notified	Type Notific	cation		Stree	t Add	OIIIIII	unications	Call Miles	5	***		-	
EPA	Type Noun	cation		100 (	Greei	ทพดดเ	Ave.		FH 3: 30				
☐ DEP	☐ Initia	al		City,	State	& Zip (	ode	30(3/1/2				- 1,100	
⊠ DOL	⊠ Ame	ended #3	- 1			The state of the s	19046	& LIVE	LONTEO,				
□ DOH	☐ Eme	ergency				ontact		1,0,5	GIAG - VL	Telenho	no N	umh	or
DCA		cellation		Alex	Bayl	or			CONTROL I				
				FΔ	CILIT	TY INF	ORMATION						
Name of Facility Wh	nere Abatem	nent is Taking P	lace (		CILI	1 1141	Type of Facili	tv (4)					
Verizon- Rutherfo		ioni io raiding i	.000 (	-,			School (F						
Street Address								ter 8 (Other th	an K-12)				
30-40 Orient Way	,								nmercial buildin	gs, hom	ies, e	etc.)	
•							Square Feet	# of Flo		Bldg. Ag			
City (5)		County (6)	Co	unty	Code	(7)				0 0	E206		
Rutherford		Bergen		•			Current Use (	Prior if being o	lemolished)				
		5					Offices		,				
Name of Monitoring	Firm Hired	by Building Own	ner (8)		AS	CM No	Name of Abat	tement Contra	ctor (9)		-	3501-21	
USA Environmen							AbateTech,		( - /				
Street Address				William !			Street Addres	ss					
8436 Enterprise /							PO Box 25						
City, State & Zip Co							City, State & 2						
Philadelphia, PA			T				Lumberton,						
Project Manager for Mark Jenkins	Monitoring	Firm	215-		Num	ber	Telephone Nu		License N		20		
Scheduled Start Dat	to (10)	Scheduled Cor				1)	609-265-210 Name of OSH			0052	19		-
11/4/13		Scrieduled Col	11/2		ile () i	)	EMSL Analy						
Occupancy Status D		ement (Check o		-	/-	-	Street Addres						
		During Entire			ateme	ent	108 Haddon	100					
		Outside of Norm	-				City, State & 2	AND					
Describe:							Westmont,						
Facility Occ	upied During	g Abatement					,						
Scope of Work (Che	eck all that a	apply)							10 60 100 100 100				
	20		_	722					ntainment with N	Negative	Pres	ssure	)
≥3 sf or ≥3 lf			$\bowtie$		novati	37017		Mini-En					
≥160 sf ≥260	O If		Ш	Der	molitic	on			ag Procedures				
7 -			1-			_	B		empted and Nor				
	ocation of os-Containi	na		Locat	Used		Description Asbestos-Cont		Amount (Specify	Aba	atem	ent I	ype
	erial (ACM)	ng .		olely			Material (AC		SF or LF)	R.		m	_
<u>TO E</u>	BE ABATED		Main	tenar	ice or		(i.e., thermal sy			Removal	Z.	nca	Enc
ir	Facility		Custo		Staff?	1	insulation, surfactor or other miscella			Val	Repair	Encapsulate	Enclosure
	(13)		Yes	(12) No	N/A	-	or other midden	ancous,			~	late	Ē
Small Roof			T	140			Doof floor		4 400 05				
Large Roof			H	Η		+	Roof flash Roof Caulk		1,100 SF		H	H	H
Large Rooi				Roof Caulk	ung	320 SF	-	H	H	H			
			H	H	ዙ	-				$\dashv \vdash$	H	H	H
			H	H	H	1-2-				⊢⊢	H	H	H
			H	H	H	-				$\dashv \vdash$	H	H	H
Name of Registered	Waste Hau	ıler		N.	IDEP	Waste	Cubic Yards	Name of Reg	istered Landfill				
ramo or regiotoroa	rradio riac					D No.	of Waste	rame or reg	istorea Landilli				
AbateTech, Inc					187	50	6	TRRF Land	fill				
City, State							Disposal Date City, State						
Lumberton, NJ				Tit			11/29/13 Tullytown, PA						
Completed By (Print		Signature Date											
Gwen Trumbetti			coord.	11/20/13									

No areal

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

1310-4706 Check #5740 RECELL

Date of Notification							Owner / Operato	r (2)	47/3	108 25 P.	FE	n		_			
Aganaiaa Natified	11/20/13					The state of the s	unications		- 4.	10 × 30 3		_					
Agencies Notified EPA	Type Notif	ication	1 2			dress enwood	I Ava		<b>~</b> 55%,	F	7 2						
□ DEP	☐ Init	ial	-			& Zip (			<del>2</del> 7	7°74 5 0 V v	0, 2	77					
□ DOL	=	ended #3					19046		- 4,	CELCUA	<i>*</i> .	341					
	12000					Contact	19046			- K/807/12	/.An.						
□ DOH     □ DCA		ergency ncellation	6.63	Alex													
W-0-10	556536					20000	ORMATION										
Name of Facility Wh	nere Abater	ment is Taking P	lace (3			1111111	Type of Facili	ity (4)									
Verizon- Woodbr		noncio raming i		-,			School (										
Street Address				****					Other than K-	12)							
138 Main Street							- Bernard		ite & commer		s hom	es e	tc)				
Too Main Oli Cot							Square Feet		# of Floors		dg. Ag		10.7				
City (5)		County (6)	ICo	unty	Code	2 (7)	- Oquare i cor		W 011 10013		ug. Agi						
		Middlesex	100	unity	Oout	- (1)	Current Use (	(Drior i	hoina domol	ichod)							
Woodbridge		wildalesex					Offices	(11011	being demoi	isileu)							
Name of Monitoring	Firm Hired	by Building Ow	aer (8)	)	Δ	SCM No		tomon	Contractor (	2)	North Park		-				
ESIS	i iiii i iiied	by ballaring Owl	101 (0)		1	JCIVI NO	AbateTech,		CONTRACTOR (S	7)							
Street Address							Street Address										
10 Exchange Pla	ce, 13 <sup>th</sup> Fl	oor					PO Box 25										
City, State & Zip Co	de						City, State & .	Zip Co	de								
Jersey City, NJ 0	7302					1-115-00-00-00-00-00-00-00-00-00-00-00-00-00	Lumberton	Lumberton, NJ 08048									
Project Manager for	Monitoring	Firm	Telep			mber	Telephone No			License No	ımber						
Brian Kingsbury			201=		_		609-265-210				0052	9					
Scheduled Start Dat		Scheduled Co			ite (1	4)	Name of OSH		nitor			115,12					
11/4/13		100	12/6			)	EMSL Analy					/2/55):	151-53				
Occupancy Status D	Ouring Abat	ement (Check o d During Entire F	nly one	e) of Ats	atom	nent .	Street Addres										
		Outside of Norm			aten	ient	City, State & 2					-					
Describe:	enomieu	Outside of North	ai no	uis				하시기 취상이 가장되었다.									
	unied Durin	g Abatement					Westmont,	NJ UQ	100								
Scope of Work (Che			-	Comments	100												
Coope of Work (one	JON UII LIIUL	црріў)						П	Full Containn	nent with Ne	gative	Pres	sure	ي ا			
≥3 sf or ≥3 li	f		$\boxtimes$	Rei	nova	tion		Ħ	Mini-Enclosu		9-11-0			100			
☐ ≥160 sf ≥26			Ħ		molit			H	Glove Bag Pr								
								M	Non-Exempte		Friable	Pro	cedu	ire			
Lo	cation of		Is	Locat	tion	T	Description	ı of		Amount	Aba						
Asbest	os-Contain	ing		nally		t	Asbestos-Cont	taining		(Specify				7,			
	erial (ACM)			olely			Material (AC			SF or LF)	Re		Ш	ш			
	BE ABATED	2	Main				(i.e., thermal sy insulation, surface		VT.		Remova	Re	cap	ncl			
ır	Facility		Custo			?	or other miscella				<u>a</u>	Repair	Encapsulate	Enclosure			
	(13)		Yes	(12) No	N/A	Δ			<b>'</b>			7	ate	9			
Roof			П	П			Roof Seal	ant		20 SF		П					
Roof			Ħ	Ħ			Coping Stone		k	120 LF		H	H	H			
Roof			Ħ	Ħ			Vent Caulk		IX.	26 LF		H	H	H			
			Ħ	Ħ	th	1	VOIIL Guuii	ung		20 LI		片	H	H			
			H	H		1					ᅢH	片	H	H			
			H	Ħ	tF						H	片	H	H			
Name of Registered	Waste Ha	uler		N.	IDEF	Waste	Cubic Yards	Name	of Registere	d Landfill							
rtamo or rtogictoroa	114010 114					ID No.	of Waste	- Tallic	or registere	a Landiii							
AbateTech, Inc				economic and a seconomic and a		750	6	TRR	F Landfill								
City, State							Disposal Date City, State										
Lumberton, NJ	22						12/6/13 Tullytown, PA										
Completed By (Print or Type) Title							Signature				Date						
Gwen Trumbetti	o×(o(1) − 32)	Opps. Coord. 11/20/13															

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

Date of Notification (1)					Name	of Building	Own	er/Operator (2	2) 313 No.						
	20 /	13	_		Wes	st-Ward F	harr	meceutical	河湖湖河	% #1319-4717	Chec	k #57	83		
Agencies Notified	Type Notifica	tion			Street	Address			ASUESTOS & LICET	J. (1)					
☑ EPA					2 Es	sterbrook	(Lan	ne	20100	CONTRA.					
□ DOLWD	☐ Amended				City, S	tate, Zip C	ode		- R LICEI	YSTUCAUL			1.00		
⊠ DHSS	Amendme		udina	8	Che	rry Hill, I	NJ 08	3034							
☐ DCA (NJAC 5:23-8)	☐ Emergeno justificatio		uaing		Name	of Contact			100 March 100 Ma	Telephone Num	har				
(	☐ Cancellati				Joh	n Reber									
					FAC	CILITY IN	FOR	MATION							
Name of Facility Where A	Abatement is T	aking F	Place	(3)					Type of Facility	(4)					
West-Ward Pharma	aceuticals								School (K-12		2)				
Street Address						-2.1152				B (Other than K-12 rivate and comme		ildina	S.		
2 Esterbrook Lane									homes, etc.)						
City (5)									Square Feet	# of Floors	Blo	dg. Ag	je		
Cherry Hill															
County (6)					Coun	ty Code (7)	)(STAT	TE USE ONLY)	Current Use (Pr	ior if being demoli	ished)				
Camden									Office						
Name of Monitoring Firm	Hired by Build	ling Ov	vner (	8)	ASCM	No.	Nan	ne of Abateme	ent Contractor (9)						
1 Source Safety & I	Health			2.00			Α	bateTech, li	nc.						
Street Address							Stre	et Address							
140 South Village A					30	Maple Ave	e. PO Box 25								
City, State, Zip Code							City	, State, Zip Co	ode						
Exton, PA 19341						9	L	umberton, N	NJ 08048						
Project Manager for Mon	itoring Firm			Tele	phone	No.	Tele	phone No.		License No.					
Brian Hovendon				61	0-524	-5525	60	09-265-2107		00529					
Start Date (10)	S	chedu	led C	omple	tion Da	te (11)	Nan	ne of OSHA M	lonitor						
_12 / _4 /	_13_	12	_ /	11	_ /	13	E	MSL Analyt	ical						
Occupancy Status During	g Abatement (0	Check	only c	ne)			Stre	et Address							
☐ Facility Closed/Vacate	ed During Entir	e Perio	od of	Abate	ment		10	08 Haddon	Ave.						
Abatement Performed Time of Abatement: 7						cribe		, State, Zip Co							
							W	estmont, N	J 08108						
Scope of Work (Check a	ii that apply)							☑ Full Con	tainment with Neg	gative Pressure					
≥3 sf or ≥3 lf			- CONTRACTOR	novati				☐ Mini-End	losure						
≥160 sf or ≥260 lf		L	De	molitio	on				g Procedure moted (*) and No	n-Friable Proced	ure				
		1	ls	Locat	ion		2111		()		1	atem	ent T	ype	
Location				Norma				Description of	173		-	-		-	
Asbestos-Containing		)		d Sole intena		Asbe	stos (	Containing Ma rmal systems	iterial (ACM)	Amount	em.	Repair	nca	nclo	
TO BE ABA				todial	Staff?	(1.6		urfacing, VAT		(Specify SF or LF)	Removal	=	Encapsulate	Enclosure	
(13)		_		(12)	1			er miscellane					late	Ф	
			Yes	No	N/A										
Production Area						Floor ti	le &	Ероху		3,500 SF					
Production Area			$\boxtimes$	Mastic	(NF)			3,500 SF							
								3							
Name of Registered Was	ste Hauler			10000	JDEP I		251000	ic Yards of	Name of Regis						
AbateTech, Inc.					18750		Was	2	TRRF Lan	dfill					
City, State								osal Date	City, State	2000					
Lumberton, NJ							12	2/11/13	Tullytown,	, PA					
Completed By (Print or T	ype)	Title						Signature /	7 1/		ate	1			
Gwendolyn Trumbe	etti	Ор	erati	ons	Coord	inator	1812	(	just	11/20/13					

OF THE

## State of New Jersey NOTIFICATION OF ASSESTOS ASATEMENT (Pursuant to NJAC 8:60 and 5:16)

RECEIVED

Date of Noticetion (5)	Nome of Go	ove Cwiter Operator (2)	(3)	13mm YER
11/18 2013		w. sanco		SHOW 25 PM 1539
Agencies Notified Type North	TURNUT STEEL RUSSIE	55	lminodo	LICENSING ROL
☐ EPA	24 [	Broadway	Ave.	LICE CON.
<b>≱</b> 509 Ameno	Color State 2	st Cade	000	13/45 101
CDDCA <b>X</b> i maga mwac ngala) jetifica	Bacy raicheding FQS HI07) Name of Con	Saic Ave	. 0 10 55	
☐ Cance		amin Kam	Telephone )	NUMBER
	FACILITY	INFORMATION	1111000	
Name of Fusitiv Where Adelented is	Falura Place (1)		of Facility (4)	to make the spread of the body of the second
Private Stort Address	Mark Address of the property of the second o		hou (K-12) buteplar 8 (Other Back	K 45)
24- Broadu	vay Ave.	- X (A	ther if y provide and con there etc. ;	atiercial buildings,
285 30 ·		has being the control of the second management of the second seco	e Feet # of Floors	Bing Age
Passaic N.			2 000	106
7 on 41 (3	remails expe	FIRST TREESTANCES	nt Usa (Pred if being der	NDWS/HBO1
Name of Mandoring First Hired by Bu	iding Cransi (s) - ASCA No	Name of Abstement Cod	yes	described ( and the second of
Street Address NA	±	Sharen Qu	ality Const	truction LLC.
The many well the state of		Street Address	73	
City, State Zip Ceda		LARE THE STATE OF THE PARTY		Place
		Hackenso	ACK NT.	07601
Project Manager for Shouldons, From	Telephone Mo	Telephone Mo	The Dec 1972	0/601
Start Date (10)				
11 19 2013	Standard Completion Date (11)	Name of OSAA Monitor	A 1 -	
Orsupacy Status Curing Abatement		EMSL, ANI	ALYTICAL.	INC.
X Facility Clinser(Vacated During Ent	bre Petial of Abatement	307-west. 3	othist.	
[] Austrinord Perturbed Outside or A Trace of Adultation	iomailaculpillums (Inscrinc PulPulau	Fify State Zp Code		
Scope at Work -Check all that apply)	Control Contro	New yor	K. N.Y. 10	018
Descent	F	El fast consumen	wat Namitye Pressus	
<b>X</b> _160 cl ar _200 f	C konovaton XDsmolition	☐ Mare Enclosure ☐ Glovebeg Pruced		
the first community to the property of the second section of the section of the second section of the section of the second section of the s	10.1.00.00.00	X Nort Lichtated	1 Stat New Langue Fron	days:
Location of	is Location Numbally	Descapion of		Altengrie of Type
Astrosios Contenting Material (ACI) <u>70</u> 85 ABATED	The second secon	restes Codianau Material (A		Party (Market)
We consider	Gustonal Stativ "	<ul> <li>Tremel systems insulation surfacing VAT, or</li> </ul>	D (Spacety Si orij)	For located For agreedate Respons
en e	Yes No NA	Other trasse/pressus)		
Ground Floor	I X II Ros	efing Material	2 000	V 17: 73 F7
(out door)		efing Material	3,000	<u>XDDD</u>
The second secon			- 1 - 1 comment of the second	
CONTROL OF THE PARTY OF THE PAR			Section between pages 100 to the Company of the Standard and Standard Stand	LILII
Varge of Registered (Veste Healer	N.CEP Waste	Cubir Yards of - Martia	of Recistered Landill	
Sharon quality (	0. 003967	TRD US	nskild T	8
Dity State	993.07	Disposal Date City, s	DEIVY EM	ELDITOR INC
Hackensack	N. 2.	TBP W	zy nesbura	ohin
Completed By (Print or Type)	7 5 10 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5	Signature	non J	Cate
Courtos -Esquira	Safety Mama	ger Clerifi	Till)	11-18-2013
Pa 12	* Lie not use that from the name	etra las encolores de comente de come	T 4	



## CK 3133

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

Date of Notification (1) 11/21/13		Name of Building Owner/Operator (2)  NJ Transite  Street Address 1 Penn Plaza East  City State Zin Code												
Agencies Notified Type Notification		1 -	reet Add Penn I	ress Plaza Ea	st	•	TJ NO	1 25 p	H 1.0.					
☐ DEP ☐ Amended ☐ Amendment # ☐ Emergency (in		N		, Zip Code NJ 0710		<b>€</b> 3	ets,	03 CO	W Telephone	Numbe	er .			
DOH justification)  Cancellation			Russel S	Samaroo		200000		-1401.	.,		•			
Name of Facility Where Abatement is Taking	Place (3)		FACILI	TY INFOR	MATIC	ON -	Type of	Facility (4)			-			
Radburn Station Street Address					- 22		X Su	hool (K-12)	) (Other than vate & comm	K-12)	huildir	nas h	omes	8
intersection of Pollitt Dr and Fairlaw City (5)	n NJ						etc	).) <u> </u>	# of Floors		Blo	g. Ag		10
Fairlawn NJ 07410		T 6	County Co	ada (7)			1000+		1 if being dem	nolished	35	+		
County (6) Bergin				SE ONLY)		_		2022 - 10522	5355		-/			
Name of Monitoring Firm Hired by Building O TTI Environmental	wner (8)		ASCM 00003			Name o		ment Cont	ractor (9)			•		
Street Address 1253 North Church St						Street A					<b>3</b>			
City, State, Zip Code Moorestown NJ 08057					City, State, Zip Code West Berlin NJ									
Project Manager for Monitoring Firm  James Garlardi							Elephone No. License No. 00727							
Start Date (10) 12/3/13	Scheduled 12/4/13	Com	pletion D	ate (11)		Name o		A Monitor						
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe: after 8 pm	eriod of Ab	atem	ent			Street /	Address ate, Zip				-			
Scope of Work (Check All That Apply)  ≥3 sf or ≥3 lf		novat		i.	¢	-		Containme	ent with Nega	itive Pr	essur	e		
≥160 sf or ≥260 lf		HOM	1011				Glov	ebag Proc		-Friable	e Proc	edur	)	
	Is L	ocatio	on								Abatement Type			
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Main Custo	tenar	ly by		os Cor therma surfa	escription ntaining M al systems acing, VA miscellar	laterial s insulat T, or			y	Removal	Repair	Encapsulate	Enclosure
Lobby Clean up Behind Benches	163		x	Mi	scella	aneous	Mater	ial	2 lf					
2000) 0.000.000						70			•					
														+
Name of Registered Waste Hauler		IN	JDEP W	/aste	Cubi	ic Yards		Name of	Registered L	andfill		<u></u>		
Pernaco Inc	Hauler ID No. of W			672,173,153,0	f Waste									
City, State West Berlin NJ	-	Disposal Dis				osal Date								
Completed by Anthony T Perna					Signatur	Date 11/21/13								

### State of New Jersey TIFICATION OF ASBESTOS ABATEME (Pursuant to NJAC 8:60 and 12:120)

Date of Notification (					wner / Operator (2	) 4/3 in	PECE, Che	<u> </u>	0.12	.0			
	ovember 18, 2013		_		e Parks Commiss	ion ''''(	76 > C	}					
Agencies Notified	Type Notification		Street	Address		\$ 3Ar .	CO PAG.						
⊠EPA			Alpine	Approach R	oad	25/	0. 19						
DEP			1			- 4/0	FLOORY "						
DOL	Initial		Name of Building Owner / Operator (2) Palisades Interstate Parks Commission  Street Address  Alpine Approach Road  City, State & Zip Code Alpine, NJ 07620										
Masu.	Amended		Alpine	, NJ 07620			15 %						
⊠рон Поон	Amendment	#											
□DCA	Cancellation			of Contact oph Szeglin			17-1	K	- NI	ha	•		
			FA	CILITY INF	ORMATION								
	ere Abatement is Takin	g Place (3)			Type of Facility					712-			
Headquarters Buildi	ing				School (K								
Street Address					Subchapt	er 8 (Other than	K-12)						
Alpine Approach Ro	oad				mmercial buildings	, hon	ne, e	tc.)					
					Square Feet	# of Floo	ors Bldg	g. Age					
City (5)					2,000		1		55				
Alpine				Current Use (Prior if being demolished) Garage									
County (6) Bergen		County Cod USE ONLY											
	irm Hired by Building			ASCM No.	Name of Abate	ment Contractor	r (9)			_			
PM Environmental	min rimou by Danding	5 mioi (6)		, toom to.	Synatech, Inc								
Street Address				The second second	Street Address								
170 Changebridge F					829 Radio Road City, State & Zip Code								
City, State & Zip Cod Montvale, NJ 07045					Little Egg Harbor, NJ 08087								
Project Manager for M		Te	elephone I	Number	Telephone Number License Number								
William Mener	·		3-479-64		609-296-6916 00817								
Scheduled Start Date December 7,		led Complet Janu	ion Date ( ary 6, 201		Name of OSH/ Synatech, Inc					11.12			
	uring Abatement (Chec ed/Vacated During Ent		Abateme	nt	Street Address 829 Radio Ros								
i <u>Bari</u> pro H <sup>ari</sup> prov	Performed Outside of N	lormal Hour	s		City, State & Z								
Other - Des		10010010010 0.0000011	79		Little Egg Har								
Facility Occu	upied During Abatemer	nt				,							
Scope of Work (Chec													
Coope of Work (Once	ok all that apply)				П.	Ot-!	to the New Co. D						
≥3 sf or ≥ 50 lf		M	Renovati	on		-uii Containmeni Viini-Enclosure	t with Negative Press	ure					
≥160 sf or ≥26		H	Demolitic										
€7 5100 31 01 520	,		Domonac			Glovebag Proced							
100	cation of	le Locat	ion Norma	ally Llead	Description		*) and Non-Friable Pr	-		a = 4 7	Tumo		
(0) W. Fr. Switz	ining Material (ACM)		y Mainter		Asbestos-Co		Amount (Specify	Au	atem	ent	ype		
TO BE	EABATED		odial Staff		Material (A	CM)	SF or LF)						
	Facility				(i.e., thermal					m			
	(13)				insulation, surfa or other misce			Re	D D	ng	ΙË		
					or ourier misos	ianoouo,		Removal	Repair	bsi	S		
		Yes	No	N/A	w-			Val	Ŧ	Encapsulate	Enclosure		
Steam Lines in Base	ement	-		x	Pipe Fittings/li	nsulation	40 LF	X	_	-	4		
Lobby				X	Floor Tile and	200123000000 A V 200	400 SF	x					
-								1^					
Name of Registered	Waste Hauler	NJDEP Hauler I		Cubic Yard	s of Waste	Name of Regist	ered Landfill						
Synatech, Inc.		100000000000000000000000000000000000000	7429	4		Grows Landfill							
City, State				Disposal D	ate	City, State					-5112		
					(022/2/2								
Little Egg Harbor, N					ry 7, 2014 Morrisville, PA								
Completed By	Title			Signature	Date Date								
Diane Aloia	Frec	utive Admin	ietrator	1 1/10	1/1/n.	November 18, 2013	13						

### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

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

Check # 9128

Date of Notification (1)			20, 2013	Name of Building Owner / Operator (2) Palisades Interstate Parks Commission Street Address  Alpine Approach Road											
Agencies Notified	Type Notification			Street A	ddress	urks commod	ACY OF								
EPA	Type Notification			Alpine A	Approach Roa	<b>ీ</b> 5్ర	25 PM	1:37							
DEP						હ્	Theston	*/							
DOL	☐ Initial ☐ Amende	ed		15 Sept. 1 - 20.	ite & Zip Code NJ 07620		TO SHOWING	ROL							
⊠рон	Amend	ment # <u>1</u>	<u>-</u>					Tole	phone	Nur	her	-			
DCA	Cancell	ation			f Contact ph Szeglin			Treic	priorie	14011	ibei				
				FAC	ILITY INFO	RMATION									
Name of Facility When Headquarters Buildin		Taking F	Place (3)			Type of Facilit						- 1			
Street Address	5				-	Subchap	ter 8 (Other than k	(-12)				- 1			
Alpine Approach Ro	ad					Other (i.	.e., private & cor	nmercial buildings	, home	e, etc	2.)				
						Square Feet	# of Floor	rs Bldg	. Age	-					
City (5)						2,000		1		55		$\dashv$			
Alpine				Garage	Prior if being demo	olisnea)				$\dashv$					
County (6) Bergen			ounty Code SE ONLY_	(7)											
Name of Monitoring F	irm Hired by Bui				ASCM No.	Name of Abat Synatech, Inc	ement Contractor	(9)							
PM Environmental Street Address				_		Street Addres									
Street Address 170 Changebridge R	load, Building C	5-4				829 Radio Ro									
City, State & Zip Code						City, State & 2									
Montvale, NJ 07045	Assitation Firm		Told	phone N	umher	Telephone Nu	rbor, NJ 08087 umber	License Numb	per			$\neg$			
Project Manager for N William Mener	Monitoring Firm		- 0.000000	-479-647		609-296-6916			00817						
Scheduled Start Date December 6,	(/	chedule	d Completio Janua	n Date (1 ry 6, 2014		Name of OSH Synatech, In									
Occupancy Status Du		(Check o	only one) Period of A	batemen	t	Street Address 829 Radio Road									
	Performed Outsid					City, State &	Zip Code					$\neg$			
Abatement F		10 01 1101	mai maio			57(10)	arbor, NJ 08087								
B S C	upied During Aba	tement				A STATE OF THE STA	(9)								
Scope of Work (Chec				-											
								with Negative Press	ure			- 1			
≥3 sf or ≥ 50 lf			=	Renovatio		-	Mini-Enclosure	190000							
≥160 sf or ≥26	60 If			Demolitio	n	×	Glovebag Proced		alala Deceadura						
			1			Descript		) and Non-Friable Pr		ateme	ent T	vne			
Loc Asbestos-Conta	cation of	CM)		on Norma Mainten		Asbestos-C		Amount (Specify	1	210111	J. 11.	,,,,			
	E ABATED	J,		dial Staff		Material	(ACM)	SF or LF)	<u></u>		_				
IN	Facility					(i.e., therma insulation, sur			_		9	m			
	(13)			- 1		or other misc			er	Re	cap	ncle			
									Removal	Repair	Encapsulate	Enclosure			
			Yes	No	N/A				=		at e	G,			
Steam Lines in Bas	ement				х	Pipe Fittings	/Insulation	40 LF	X						
Lobby					Х	Floor Tile a	nd Mastic	400 SF	_ X						
			NUDERN	N	Cubic Yards	of Masta	Name of Regist	ered Landfill							
Name of Registered	NJDEP V Hauler ID	No.		or vvaste											
Synatech, Inc.	27	429	Disposal Da	te	Grows Landfill City, State										
- S.	City, State														
Little Egg Harbor, N Completed By	4J U8087	Title			January 7, Signature	ture Date									
Completed by				2.041200		ni allo	7.	Amended		nber	20, 2	2013			
Diane Alois	tive Admini	strator	1000	we all	-	November 18, 2013	£								

\* Emergency \*

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

7 2 1		(Pu	rsuant to	NJAC 8:	60 and	12:120	)	C#	2	398	2.				
Date of Notification (1) 11/20/13				Building O Gnade				<u> </u>	29/	398	12/	YE	'n		
Agencies Notified Type Notification			Street Ad	dress New Yo	ork Av	e.		4	95.27	1.64	5 PA	1,			
EPA Initial Amended Amendment #				e, Zip Cod each Tw		08008	}	*	E	0105 LICE	CON	<del>/•</del>	15		
Emergency (in justification)  DCA  Emergency (in justification)  Cancellation	cluding	N	Name of G			*	S		1	0711	. 4,2			$\neg$	
	Titude Control		FACIL	ITY INFO	RMATI	ON			-						
Name of Facility Where Abatement is Taking William Gnade (Private Home)	Place (3)		•				Тур	e of Facility (4 School (K-12	1.00						
Street Address 22 East New York Ave.						4	×	Subchapter Other (i.e. p	8 (Othe	er than K-1	12) cial build	dings,	home	s,	
City (5)								etc.) uare Feet	11	Floors	- N (100)	ldg. A	ge	$\dashv$	
Long Beach Twp. NJ 08008 County (6)			County C	ode (7)			0.000	00+ rrent Use (Pric	2 or if bei	na demoli:		5+		$\dashv$	
Ocean			STATE U	SE ONLY)			Но	me		9340					
Name of Monitoring Firm Hired by Building O N/A	wner (8)		ASCM	No.		Name Pern		batement Con Inc.	tractor	(9)					
Street Address			-	20.00		Street PO E				200					
City, State, Zip Code		-	City, State, Zip Code West Berlin NJ 08091												
Project Manager for Monitoring Firm	т.	Telephor	ne No.		Telepi				License	No.			-		
			١.				-9800		00727						
	Schedule 11/22/1		npletion [	Date (11)		Name Sam		SHA Monitor							
Occupancy Status During Abatement (Check	Only One	e)		***		Street	Add	ress					HI.		
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norma Other Describe:	eriod of A al Facility	batem Hours	atement ours City, 5					ty, State, Zip Code							
Scope of Work (Check All That Apply)		,	'4c &												
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova emolit	4			Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure									
	Ι							Non-Exemple	u (*) ar	id Non-Fil	able Pit	1000	ement	1	
Location of	l N	Locati Iormal	ly		De	escription	n of	2%			-	T	/pe	-	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility	Mai	d Sole intenal odial S	nce/		therma surfa	l system acing, V	ns in: AT, c		(	Amount Specify F or LF)	Remova	Repair	Encapsulate	Enclosure	
(13)	Yes	(12) No	N/A		other	miscella	neo	ıs)			val	air	ulate	sure	
Exterior Siding	103	140	X		Exte	erior S	idin	g ,	24	100 SF	x				
,											-	+	-	-	
Name of Registered Waste Hauler		IN	JDEP W	Vaste	Cubi	c Yards		Name of	Regist	ered Land	ifill	<u> </u>	<u></u>		
United Containers	10000	Hauler ID No. 22459			aste		G.R.O.								
City, State Elm NJ								ty, State orrisville PA 19067							
Completed by Anthony T Perna	ed by Title					Signature Dat				Date 11/20	ate 1/20/13				

### NOTIFICATION OF ASBESTOS ABATEMENT

State of New Jersey
ON OF ASBESTOS ABATEMENT
Int to NJAC 8:60 and 12:120)

Name of Building Owner/Operator (2)

MS. JENNIFEYZ KAZANJIAN

Address (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) 20/13 Type Notification Agency Notified 43 McKillE Ca failtial O EPA City, State, Zip Code DEP DOL □ Amended 07628 Amendment # Trance. ☐ Emergency (including Name of Contact E DOH justification) MS. KAZANJIAN DOCA D Cancellation **FACILITY INFORMATION** Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) MS. KAZANJIAN School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e. private & commercial buildings, MCKINGY AUE homes, etc.) Square Feet # of Floors Bldg. Age City (5) 684RS 1700 County Code (7) (STATE USE Current Use (Prior if being demolished) County (6) ONLY) RESIDEN CE BERGEN. Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner ASCM No. Best Removal Inc Street Address Street Address 450 S.River St City, State, Zip Code City, State, Zip Code Hackensack, N.J. 07601 License No. Telephone No. Project Manager for Monitoring Firm Telephone No. 00388 201-329-7444 Scheduled Completion Date (11) Name of OSHA Monitor Start Date (10) Omega Environmental Inc 12/2/13 12/3/13 Street Address Occupancy Status During Abatement (Check only one) 280 Huyler St ☐ Facility Closed/Vacated During Entire Period of Abatement City, State, Zip Code Abatement Performed Outside of Normal Facility Hours South Hackensack, N.J. 07606 MOther-Describe: 8 MM TO 5 PM Scope of Work (Check all that apply) E Full Containment with Negative Pressure **Renovation** ☑ Mini-Enclosure □≥3sfor≥3lf ■ Demolition ☐ Glovebag Procedure Ø ≥ 160 sf or ≥ 260 lf ☐ Non-Exempted (\*) and Non-Friable Procedure **Abatement** ls Location Type Normally Used Solely by Description of Location of Enclosure Encapsulate Asbestos Containing Material (ACM) Amount Containing Material (ACM) Maintenance/ Remove (i.e., thermal systems insulation, (Specify TO BE ABATED Custodial SF or LF) surfacing, VAT, or IN Facility SHOP other miscellaneous) (13) (12)N/A 800 SF BASELENT Y VAT Name of Registered Landfill Name of Registered Waste Hauler NJDEP Waste Hauler Cubic Yards of ID No. Best Removal Inc Minerva Enterprises 30/2 17109 Disposal Date City, State City, State Waynesburg , Oh 12/3/13 Hackensack, N.J. 07601 Date Completed by Signature

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

Estimator

J. Maiorano

ASB-41

'o~

20 18

Check # 10040

NOTIFICATION OF ASBESTOS ANATEMENT (Pursuant to NJAC-8:50-7 and 12:120-7)

Name of Building Owner/Operator

Date of Notification	m (1)	Name	or Bull	ing Owner/Operator	(2)	201	10	-				
11-8-13		La	rney	Rutledge		DOL - 10 DAY						
Agencies Notified	Type Notification	Stree	t Addres	on Street	)					7		
[ ]EPA	[X] Initial	37	Fult	on Street			7	·				
[ ]DEP	Notification	City,	State.	Zip Gode		ا اسلا	1-9 (110					
[X] DOL	[]Amended	Ea	st Or	ange, NJ, 07017	e, NJ, 07017							
[X] DOH	Notification		Name of Contact									
VEX.13	[ ]EMERGENCY			Rutledge								
[ ]DCA	[]Cancellation											
			FACIL	ITY INFORMATION								
	here Abatement is T	aking Pl	ace (3)		Type of Facil:	ity (4)						
Same as above	е				[ ]School							
Street Addres						ter 8 (Other :						
Street Audies						aildings, home						
		2127H 154 F40			Square Feet	# of Floors	Bld	g. Æ	ge			
City (5	Coun	ty (6) Es	sex	County Code (7) (STATE USE ONLY)	1800	1		3				
				(STATE USE CALE)	Current Use ()	Prior if being	des	olis	hed)			
Name of Monitoring Owner (8)	Fire hired by Buil	ding AS	CM No.		ment Contracto							
N/A					Management	, 1110.						
Street Address				Street Addres								
					stopher St	•						
City, State, Zip C	ode			City, State,		40						
					ir, NJ 070							
Project Managar fo	r Monitoring Fire		ne Numbe			1	ense 037:		er			
		N/A		(973) 74	4-8800		057.	<u> </u>				
Scheduled Start Da					Monitor							
11-10-13	Name	-11-13		N/A								
Month Day	Year Month muring Abatement (Ch	Day eck only	Year	Street Address	95 7		-	-		-		
[X] Facility C	Losed/Vacated Durin	gEntire	Period									
of Abatem	ent Performed Outside o	f Normal	Facilit	City, State,	Zip Code							
Hours - Des	scribe: «Officurs De	script*		2								
	scribe: «Other Occup	ancy Des	cript»		- 1							
Scope of Work (Che	ck all that apply)			וויפו ז	Containment wi	th Negative P	ressu	re				
[X]>3 sf o	or ≥3 lf	[X]Rea	novation	[ ]Mini	-Enclosure							
[ ]>160 st	or >260 lf	[ ]De	molition		ebag Procedure Friable Procedu	170						
		Is		[ ]=0	2120020 220000		Aba	tere				
Locati	STEEL CONTROL OF THE	Norma	lly	Descripti		Amount	R		E	E		
Asbestos-C Materia	Contract Con	Use Sole	Iy	Asbestos-Co Material		(Specify	E	E	C A P	L		
TO RE		By Ma tenan	ice/	(i.e., therma insulation, sur	CONTRACTOR	SF or LF)	0	A	S	GWOHU		
In Fac		Staff		or other misc			A L	R	L U	R		
		Xes No				10.16	527	-	<u> </u> -	E		
Boiler Room			X	Pipe Insula	tion	12 lf	X		-			
							-	<u> </u>	_			
								1				
Name of Registered			Waste	Cubic Yards of Waste 1		istered Landfi	11					
AZTECE MANA	GEMENT, INC.	1704	E ID No.	DI Waste I	G.R.O.W.	5.		200000				
City, State				Disposal Date	City, State			- 100				
Montclair, N	IJ 07042			11-12-13	Morrisvi	lle, PA 1	1906	1				
				Signatur			ate	_				
Completed By (Print Constantine		ident			1	Ī	11-8					
COMPTONICATION	1-1-60				11460							
				- Comments								

Name of Registerod Waste Hauler   NUDER Waste Hauler ID No. 17040	Cubic Yards of Waste 1.	Name of Registered Landfill G.R.O.W.S.
City, State Montclair, NJ 07042	Disposal Date 11-18-13	City, State Morrisville, PA 19067
Completed By (Print or Type) Title Constantine Vivian President	Signature	Date 11-13-13

Ne	et .				ICATION	of New OF ASBE to NJAC 8	STOS A	BATE			۶	RE MAYOR	CE	14			
	e of Notification (1) /19/2013				Name of NJ De	Building ( partment	owner/O t of Mil	perator itary a	(2) nd V	eteran Affa	airs	THOP	25	مرو	-1	,	
	encies Notified	Type Notifica	ation		Street A						ر ک <sup>ی</sup> ا	E 3/0.	s na	19 /	: 3	5	
×	EPA DEP DOL	Amend Amend	ment #002		10.00 mm - 10.00 mm	Street Address 101 Eggert Crossing Road City, State, Zip Code Lawrenceville, NJ 08648											
×	DOH DCA	justifica Cancell		'		Contact Clemmer	nson			74			**	7,10000			
					FACI	LITY INFO	RMATI	NC	-	. C.F 1114 . //	()						
	ne of Facility Where National Guard			(3)					Typ	e of Facility (4							
	eet Address	Training oc							H	School (K-1: Subchapter	8 (Othe	er than K-1	2)				
770	0 Camp Drive								×	Other (i.e. pretc.)	rivate 8	k commerc	ial build	lings,	home	s,	
	/ (5) ea Girt								5.0	are Feet	# of	Floors	1100000	ldg. A	ge		
100000					County	Code (7)				rent Use (Pric		na demolis	10.00		-		
Mo	unty (6) onmouth					USE ONLY)	/		offi	ces							
	me of Monitoring Firn hitman Co.	n Hired by Buil	3)	ASCN	/ No.				atement Con Environmer			ces, Inc.					
-	eet Address Pleasant Hill Roa	ıd			1			Street 42 R		ess Road							
	y, State, Zip Code anbury, NJ 0851	2								Zip Code ville, PA 19	460						
Pro	evin Lovely		Telepho	ne No. 90-5858		Telepi 610-		No. -4332		License I	No.						
Sta	irt Date (10) 0/30/2013			uled Co /2013		Date (11)				SHA Monitor Environmer	ntal S	ervices.	Inc.				
1	cupancy Status Durir	ng Abatement						Street					11.17.1				
X	Facility Closed/Vac				ment			41 R	idge	Road							
Ē	Abatement Perform Other – Describe:	ned Outside of	f Normal Facil	ity Hour	rs					Zip Code ville, PA 19	460						
Sco	ope of Work (Check A	All That Apply)											-				
×	≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renov Demol				2	N	full Containme /lini-Enclosure Blovebag Prod lon-Exempted	e edure				e		
				ls Loca	ition									Abate	emen		
	Locatio	n of	V.	Norma	ally			scription		5 2007500750070000				13	/pe		
	Asbestos-Containing TO BE AB In Fact (13)	BATED ility	(N)	sed Sol faintena istodial (12)	ance/ Staff?	Asbestos Containir (i.e. thermal syst surfacing,					(5	mount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure	
		alla a tar	Yes	No			floor til	0 004	maa	tic	22	,140 sf	X	-			
	throughout buil			-	X			e and site si		SUC		6,700	Y				
	throughout buil	aing exterio	or		^		lian	SILE SI	ullig			0,700					
Na	me of Registered Wa	ste Hauler			NJDEP V		707001010000	Yards		Name of	Registe	ered Landf	ill				
Sa	mboney Ent./Car	nevale Disp	posal		Hauler ID 17297	No.	of Wa	ste		Cumbe	rland	County I	Landfi	II			
	y, State lliamstown, NJ				Disposal Date 12/13			9	City, Stat Millville		0						
Co	mpleted by frey A. LaRiviere		Title V.P				5	Signatur	e				ate 11/19/2	2013			
								1	1								