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City, State, Zip Code Moorestown, NJ 08057							tate, Zip Coo stadt, NJ 0							
Project Manager for Monitoring Firm Kris Smith			Telepho (609)	one No. 313-8218			one No. 939-6565		License 00756					
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Project Manager for Mor	nitoring Firm		1	Telepho	ne No.	T	elepho	one No. 332 4244		License 01379				
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Street Address 311 CROWN POINT ROAD							>	School (K Subchapte Other (i.e. etc.)	er 8	Other than ate & com	n K-1: merci	2) al bui	ldings	, hon	nes,
City (5) THOROFARE								uare Feet 00		# of Floor	S		3ldg 50+	Age	
County (6) GLOUCESTER			County (STATE	Code (7)) .Y)		Cur	rent Use (P ESIDENT	rior i	f being der	nolish	ned)			
Name of Monitoring Firm Hired by Building ACER ASSOC.	Owner (8)		ASC	M No.		Name ASS	of Al	eatement Co	ontra RON	ctor (9) IMENTA	LSE	ERVI	CES	INC).
Street Address 1012 INDUSTRIAL DRIVE						Street 570		ess MS RUN			*				
City, State, Zip Code WEST BERLIN NJ 08091								Zip Code A HILL No	J 08	062				7	
Project Manager for Monitoring Firm MATT DEPALMA			Telepho 856-8	one No. 809-120	2	Teleph 610-		No. -4676		Licen 0114		0.			
Start Date (10) 11/22/2019	Scheduled 11/23/20	019	npletion	Date (11)	Name of EMS		SHA Monitor	r					-	
Occupancy Status During Abatement (Chec	k Only One)				Street	Addre	ess							+
Facility Closed/Vacated During Entire I Abatement Performed Outside of Norm Other – Describe: OUTSIDE ABATEM	Period of Ab nal Facility H IENT	atem	ent			City, St	tate, 2	130 NOR	10011032	2077		N.			
Scope of Work (Check All That Apply)					-	CIMI	VAIV	INSON N	IJ O	3077					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		nova moliti				y	M Gl	ull Containm ini-Enclosur ovebag Pro	e cedu	ire					
	ls Lo	ocatio	on				1 140	on-Exempte	a (*)	and Non-F	-riable		Abate		
Location of	No	rmall	y		Des	cription	of						Ту		
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used 3 Maint Custod	enan	ice/	Asbes (i.e	stos Conta thermal surfac	aining Ma	ateria insul , or	ation,		Amount (Specify SF or LF)		Remova	Repair	Encapsulate	Enclosure
OUTSIDE STORAGE VARR	Yes I	No	N/A		3.5							<u>n</u>		ate	Ге
OUTSIDE STORAGE YARD			Х		PIPE IN	ISULA ⁻	TIOI	V		25 LF		Х			
Name of Registered Waste Hauler		l NI	DEDIV												
ASSURED ENVIRONMENTAL SER	VICES	Ha	DEP Water ID I 034895	No.	of Was			The state of the s		stered Lan LANDFII					
City, State MULLICA HILL NJ					Disposa 11/23/		_	City, State		URG, O	Н				
Completed by RON SWANSON	Title GENER	RAL	MANA	GER	Sig	gnature	auc	epho	CUF	2011	Date	20/2	019		

Nov 20 2019 04:18PM NJ Asbestos Control 60	P 09,633,0664		11/20/2019 age 1		D (2) 1 D (7 (-1) =
	State of New PIFICATION OF ASBES (Pursuant to NJAC 8:	TAS ABAR	EMENT		BEIVE
Date of Notification (1) 11/20/2019 Agencies Notified Type Notification	Name of Building Ov HA DEHART &	unar/On and	1 5	1001-10	785 6 2019 L
Agencies Notified Type Notification EPA DEP DOL Amended Amendment #	Street Address 311 CROWN PC		D	ASBES	STOS/GOVITROL &
DOH Emergency (Including justification) Cancellation	Name of Contact PHILIP CLIFFOR			Telephone Num	nbar, / D
Name of Facility Where Abatement is Taking Place (3) COMMERCIAL Street Address 311 CROWN POINT ROAD City (5) THOROFARE	FACILITY INFORM	MATION	Type of Facility (4 School (K-1) Subchapter (i.e. pr other (i.e. pr oth) Squere Fact	(Other than K 40	I buildings, homes,
County (6) GLOUCESTER	County Code (7) (STATE USE ONLY)		Current Use (Prior RESIDENTIAL	f home density.	Bidg. Ags 50+
Name of Monitoring Firm Hired by Building Owner (8) ACER ASSOC. Street Address	ASCM No.	700	of Abelement Contro		
1012 INDUSTRIAL DRIVE City, State, Zip Code WEST BERLIN NJ 08091	18	570 C	LEMS RUN		
Project Manager for Monitoring Firm MATT DEPALMA Stert Date (10)	Telephone No. 856-809-1202	Telepho 610-3	04-4676	Ucense No. 01145	
Occupancy Status Guring Abstament (Check Only One)		Street A			
Abatement Performed Outside of Normal Facility Hours Other - Describe: OUTSIDE ABATEMENT Scope of Work (Check All That Apply)		City, Stat	e, Zip Code MINSON NJ O	5077	

N

Description of

Asbestos Containing Material (ACM)

(i.e. thermal systems insulation,

surfacing, VAT. or other miscellaneous)

PIPE INSULATION

Cubic Yards

Disposal Date 11/23/2019

Signatu/e

of Wasta

Mini-Enclosure Glovebag Procedure

Renovation

Demolition

le Location Normally Used Solely by

Maintenance

Custodial Statt?

(12)

No

N/A

X

NJDEP Waste

Hauler ID No. 0034895

TING GENERAL MANAGER

Yes

City, State MULLICA HILL NJ

≥3 af or ≥3 #

≥1 50 af or ≥250 If

Location of

Aspestos-Containing Malerial (ACM)

TO BE ABATED

In Facility

(13)

OUTSIDE STORAGE YARD

ASSURED ENVIRONMENTAL SERVICES

Name of Registered Waste Hauler

Name of Registered Landfill

MINERVA LANDFILL

City, State WAYNESBURG, OH

WOUDOW

Full Containment with Negative Pressure

Non-Exempled (*) and Non-Frisble Procedure

Amount

(Specify SF or LF)

25 LF

Abatament

Тура

Encapsulate Enclosury

Repair

Removal

X

Date 11/20/2019

Gordana Luna

Notification of Asbestos Abatement NJAC 8:60-7 and 12:120-7)

Check # 9748 Date of Notification (1) Name of Building Owner/Operator (2) C 1111/1151/11191 Bridgewater-Raritan Regional School Agencies Notified Type Notification Sidelivadoress EPA X Initial Wade Administration Bldg., 836 Newmans Lane NOV 26 2019 DEP City, State, Zip Code X DOL Amendment Bridgewater, NJ 08807 Telephone Number NSING X DOH Name of Contact Cancellation ☐ DCA Peter F. Starrs 908-685-2777 x3212 **FACILITY INFORMATION** Name of facility where abatement is taking place (3) Type of Facility (4) School (K - 12) Hillside Intermediate School - O&M Subchapter 8 (Other than K-12) Street Address Other (Private/Commercial Bldgs./Homes, etc. 844 Brown Road Square Feet # of Floors Bldg. Age City (5) County (6) County Code (7) (State use only) Current Use (Prior if being demolished) Bridgewater Somerset Name of Monitoring Firm Hired by Bldg. Owner (8) Name of Abatement Contractor (9) ASCM No. AHERA Consultants 0057 B & G Restoration, Inc. Street Address Street Address 105 Ryerson Road P.O. Box 385 City, State, Zip Code City, State, Zip Code Oceanville, NJ 08231-0385 Lincoln Park, NJ 07035 Telephone Number License Number Project Manager for Monitoring Firm Phone Number (973)696-6869 00378 609-652-1833 John Smoyer Name of OSHA Monitor Sched. Completion Date (11) Scheduled Start Date (10) B & G Restoration, Inc. 11/15/2019 11/17/2019 Street Address Occupancy Status During Abatement (Check only one) 105 Ryerson Road Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: LincolnPark, NJ 07035 Other-Describe: Scope of Work (check all that apply) Demolition Full Containment w/negative pressure Glovebag procedure X Renovation Mini-enclosure Non-friable procedure >3 sf or >3 lf ≥160 sf or ≥260 lf Is location normally used solely Location of E e by maintenance/custodial Amount asbestos-containing Description of asbestos-containing n m staff(12) p C (Specify SF or material to be material (ACM) C 0 a LF) abated in facility (13) L Yes No N/A e Rooms#105,107,111,113 Decontaminate & Hepa Vacuum 10,300 sqft X wet wiping surbaces X 201, 202, 203, 204, 205 X X 206 (library & sub rooms) × X 2nd fl library hallway X Ceiling tites bagged 2
DICY ds or waste Name of Registered Landfill X 200 bags and connected breezway Registered Waste Hauler NJDEP Hauler ID# Grand Central Landfill 19563 B & G Restoration, Inc. City, State Morrisville, PA City, State Disposal Date Pen Argayl, PA 11/18/2019 Lincoln Park, NJ Signature Date Completed by (Print or Type) Secretary/Treasurer

11/15/2019

K1688	P	. 1	CATION ursuant i		STOS AI 60 and	BATEM 12:120)	4	Control of American Statement Control of Con		G E			int F
Date of Notification (1) 11/19/2019 TNV/(03)	13	100	Name of William	Building C	wner/Op	erator (2	2)	1	1 12	-			- Innoverse
Agencies Notified Type Notification Fig. 1. Type Notification I have not provided a second of the control of	1			te, Zip Coo				the time	ASBE	STOS	CONT	ROL 8	<u> </u>
X DOL Amendmen Emergency justification DCA Cancellation	(including			t, NJ 077 Contact Lee	738				Talanhone	a Niimha	ar		
Name of Facility Where Apatement is Takir	ng Place (3)	FACIL	LITY INFO	RMATIO		Type of	Facility (4)				
House						E	Sci	hool (K-12	2)				
Street Address						1.	Oth etc	ner (i.e. pr .)	3 (Other than ivate & comn	K-12) nercial b	uilding	s, hom	es,
Dity (5) Lincroft						12	Square 2450		# of Floors		40+	Age	
County (6) Monmouth			County C (STATE L	Code (7) USE ONLY)	_			Use (Prior Reside	r if being den ence	nolished)		
Name of Monitoring Firm Hired by Building N/A	Owner (8)		ASCM	l No.				ment Cont ıction, L	Secretary Control of the Control of				
Street A.ddress					1	Street A 63 Lea		Stocking	Path				
ity, Slate, Zip Code						City, Sta Linco		Code , NJ 070	035				
Project Manager for Monitoring Firm			Telephor	ne No.		Telepho 862-26		33	Licen 0130	ise No. 06	\		
Start Date (10) 12/16/2019	Schedule 12/17/2		npletion [Date (11)	1			Monitor Iction LL	-C				
Occupancy Status During Abatement (Che					94.3	Street A		Stocking	Path				
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe:					-	City, Sta	ita, Zip i						
Scope of Wortt (Check All That Apply) ≥8 of or ≥3 tf ≥160 of or ≥260 tf	Company of the Compan	Renova Demolit					Mini-E Glove	Enclosure bag Proce	nt with Negatedure (*) and Non-			ure	
Location of	1	Locati Iormal	ly		Desc	cription o	หา้					atemen Type	it
Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13)	Ma	d Sole intenar todial S (12)	nce/		os Contai thermal s	ining Ma systems ng, VAT	iterial (A Insulatio , or		Amount (Specify SF or LF	3 10 10 10 10 10 10 10 10 10 10 10 10 10	Removal	Encapsulate	Enclosure
	Yes	Nc	N/A						100.05				-
First Floor			X		Lin	oleum			400 SF	X	+	X	+
Name of Registered Waste Hauler		l N	JDEP W	/aste	Cubic Y	'ards		Vame of R	Registered La	ndfill		1	
lari Construction, LLC	<u> </u>	Н	auler ID 37 53 5	No.	of Waste 20 CY	е	(G.R.O.V	V.S				
Dity, State incola Park, NJ					Disposa TBD	al Date		City, State Morrisvil	le, PA 190	067			50,000
Completed by gor Jezdimirovik	Title P.Ma	ınage	ĩ		Sig	gnature		7		Date 11/1	9/20	19	

Inv Keida		NOTI (FICATIO	tate of N N OF AS It to NJA	BESTOS	ARATE	MEN (0)		HE(CK#1	784	ļ.		
Date of Notification (1) 11/18/2019			Name MAF	of Buildin	a Owner/	Operato	r (2)			E C	El	W	E	In
Agencies Notified Type Notification		-		Address					M					
EPA Initial Amended			City, S	tate, Zip (Code					NOV	26	2019		IJ
DOL Amendmen Emergency		<u> </u>	BUR	LINGTO	ON NJ (08016				O Ph in character		Total Control		
DOH justification) Cancellation	,	9		of Contac GARET		ING			Te	SBESTO lephone N	imber	HTRC	L &	and the second
Name of Facility Where Abatement is Takir	ng Place ((3)	FAC	ILITY IN	FORMAT	ION	Tun	o of Facility	7					
RESIDENTIAL							Т	e of Facility School (K						
Street Address							7	Subchapte Other (i.e.	er 8 (Oth	er than K-	I2) cial bu	ildings	, hon	nes,
City (5) BURLINGTON							Squ 130	etc.) are Feet 30	# 0	f Floors		Bldg.		
County (6) BURLINGTON				Code (7)			Curi	ent Use (P	rior if be	ing demolis	shed)			
Name of Monitoring Firm Hired by Building ACER ASSOC.	Owner (8)	ASCI	M No.		Name	of Ab	atement Co	ontractor	(9) =NTALS	FR\/	ICES	INIC	
Street Address 1012 INDUSTRIAL DRIVE						Street	Addre		TOTAIN	_INTAL O	LIIV	IOLO	IIVC	,.
City, State, Zip Code WEST BERLIN NJ 08091						City, S	tate, 2	Zip Code A HILL No	1 0806	2				
Project Manager for Monitoring Firm MATT DEPALMA			Telepho	ne No.	2	Teleph	one N		, 0000	License N	No.			
Start Date (10)	Schedul	ed Cor		Date (11)			15/15/11	4676 HA Monitor		01145				
11/19/2019 Occupancy Status During Abatement (Chec	11/22/	2019				EMS		. u v ivioriitor		**				
Facility Closed/Vacated During Entire F			nont			Street 200		ss 30 NOR	ТН					
Abatement Performed Outside of Norm Other – Describe: RESIDENTIAL-BAS	al Facility SEMENT	VACAT	ED DUF	RING WO	RK	City, S	tate, Z	ip Code	1.1 0807	77				
Scope of Work (Check All That Apply)						0.11	77 (17)		0007					
≥3 sf or ≥3 if ≥160 sf or ≥260 if		Renova Demolit				~	Mi Gl	II Containm ni-Enclosur ovebag Pro	e cedure					
	Is	Locati	ion] No	n-Exempte	d (*) and	Non-Friat	le Pro	Tarak Make	e ement	20 1
Location of	1	Normal d Sole	ly			scription							ре	
Asbestos-Containing Material (ACM) TO BE ABATED	Ma	intenar todial S	nce/	Asbes (i.e.	tos Cont	systems	insula	(ACM) ation,		mount pecify	Z.		Enc	щ
In Facility (13)		(12)	Aur.		surfac other m	ing, VA	Γ, or eous)		SF	or LF)	Remova	Repair	Encapsulate	Enclosure
DACEMENT	Yes	No	N/A			76.					<u>a</u>		ate	Ге
BASEMENT			X		PIPE IN	ISULA	TION	1	14	0 LF	Х			
Name of Registered Waste Hauler		1 50	IDED W			, .							-	
ASSURED ENVIRONMENTAL SER	VICES	Ha	JDEP Wauler ID I 034895	No.	of Was	10-10-1-1		I como o acros successor		ed Landfill NDFILL				
City, State MULLICA HILL NJ					Disposa 11/22		_	City, State WAYNE	e ESBUF	RG, OH				
Completed by RON SWANSON	Title GEN	ERAL	MANA	AGER	Si	gnature	Kass	ephi	CM O 9	/ Da	te /18/2	2019		

CK001481	N	OTIF (P	Ursuanii	t to NJAC	ESTOS 8:60 an	ABATEMENT d12:120)	Transmission of the second sec) EGI		\mathbb{W}	E	
Date of Notification (1) 11/19/2019	3//		Name o Cherry	of Building Hill Publ	Owner/ ic Scho	Operator (2)/ ools	Check	No.148\0V	26	2019)	
Agencies Notified Type Notification □ EPA ☑ Initial	<i>y</i> /			noldo Ter			- Annual Control	ASBESTO			S_1C	
☑ DEP			Cherry	ate, Zip-Co Hill, New		y 08034	lane.	LICI	ENSIN	G		company
☑ DOH justification) ☐ DCA ☐ Cancellation	noluding		Name o	of Contact				Telephone Num	ber			
Name of Facility Where Abatement is Taki	as Dlass (2)		FAC	ILITY INFO	ORMAT		:::L. (4)					
Cherry Hill High School East	ng Place (3)					Type of Fac						
Street Address 1750 Kresson Road							pter 8 (Other the distance of	nan K-12) mmercial buildin	gs, hom	nes, e	tc.)	
City (5) Cherry Hill, New Jersey 08003						Square Fee 15000	t	# of Floors 1	Bld 50-	g. Ag	е	
County (6) Camden				Code (7) USE ONLY		Current Use High Scho	e (Prior if being	demolished)	-			
Name of Monitoring Firm Hired by Building TTI Environmental, Inc.	Owner (8)		ASC	M No.		Name of Ab	atement Contra oration	actor (9)				
Street Address 1253 N. Church Street						Street Addre						
City, State, Zip Code Moorestown, New Jersey 08057				***		City, State, 2 Totowa, Ne	Zip Code ew Jersey 075	512				
Project Manager for Monitoring Firm James A. Guilardi			Telepho 840-88			Telephone N 973-225-84		License No 01104).			
Start Date (10) 11/29/2019	Scheduler 12/04/20		npletion	Date (11)		Name of OS Iris Environ	HA Monitor Imental Labor	ratories, LLC				
Occupancy Status During Abatement (Che	ck Only One	e)				Street Addre	77.77					
 ☑ Facility Closed/Vacated During Entire ☐ Abatement Performed Outside of Norm ☐ Other – Describe: 	Period of Ab nal Facility H	atem	ent			City, State, 2 Union, NJ	Zip Code					
Scope of Work (Check All That Apply)						1						-
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 		enova emolit				☐ Mi	ini-Enclosure ove Bag Proce	with Negative Pridure / Limited Co	ntainm		Ten	t
Location of	1000000	Locat				Description of		Amount (Specify SF of LF)	А	bater Typ		in and an analysis of the second
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mair Custo	(12)	nce/ Staff?		mal sys	ntaining Materi stems insulation VAT, or ser miscellaneo	ial (ACM) (i.e. n, surfacing,		Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A							_		_
Cherry Hill East		X		Door Fra	ne Caul	k		300 LF	Х			-
Name of Registered Waste Hauler		1.0350	IJDEP V		Cubic of Wa	: Yards	Name of Re	gistered Landfill				
Lilich Corporation			18724		5	1. 1197177	Fairless La	andfill		25.0-25		
City, State Totowa, New Jersey					12/04	sal Date 4/2019	City, State Morrisville,	PA				
Completed by Adriana Olejarova	Title Pres	siden	t		\$	Signature	0-00	Dat 11	e 1/19/20	019		

CK24567	NO	OTIFI (Pi	CATION	of ASB OF ASB to NOAC	STOS	ABATE	NEN O)	NT	Dr	<u>s</u>					7 7	
Date of Notification (1) 11/21/2019	99	- 4		Building (PORATIO	N	1	40V	2 6	20	19		
Agencies Notified Type Notification EPA X Initial		- 1	Street A	ddress OX 326				and the state of t		ASB	ESTO	OS CO	ONT	ROL	&	
DEP Amended X DOL Amendment #		- 1		te, Zip Co FIELD, I		061		boo	esoliteimen	name of the last	Est C		Parks 20,000			
Emergency (ir justification) DCA Emergency (ir justification) Cancellation	ncluding	- 1		Contact ATEH	ORTU	A					phone					
			FACII	LITY INFO	RMATI	ON										
Name of Facility Where Abatement is Taking SP #6 - GALLOPING HILL SHOPPI		NTE	R				Ту	pe of Facili								
Street Address 1350 GALLOPING HILL ROAD						(4	×	Subchap	ter 8					ings,	home	es,
City (5) UNION							Sq	quare Feet		# of	Floors		BI	dg. A	ge	
County (6) UNION			County C	Code (7) ISE ONLY)			Cu	ırrent Use (Prior i	f bein	g dem	olishe	ed)			
Name of Monitoring Firm Hired by Building Or PENNONI ASSOCIATES, INC.	wner (8)		ASCM	No.				Abatement (ROTHER				TING	6, IN	C.		
Street Address 515 GROVE STREET, SUITE B						Street 11 V	2000	dress ELAND A	VEN	IUE						
City, State, Zip Code HADDON HEIGHTS, NJ 08035						858		e, Zip Code VA, NJ 07	512							
Project Manager for Monitoring Firm RALPH COPPOLA			Telephor 856-54	ne No. 7-0505		Teleph 973-		e No. 6-8700			Licens 0049		•			
[TO TO TO THE POST OF THE POS	Scheduled 12/11/20		npletion [Date (11)		1.1.5.1.1.2.1.1.2.1.1.1.1.1.1.1.1.1.1.1.		SHA Monit AS (9) AE		=						
Occupancy Status During Abatement (Check	Only One)				Street	Add	dress								
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe: OCCUPIED						City, S	tate	, Zip Code								
Scope of Work (Check All That Apply)		V-2-1											1000		F37777	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		nova moliti				××××		Full Contair Mini-Enclos Glovebag F Non-Exemp	ure roced	ure						
	lal	ocati	on			- Book	_	NOII-EXEIN	leu () ariu	14011-1	Tiable		Abate		
Location of	No	rmali	iy		Des	scription	of							Ту	pe	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Main Custo	tenar	nce/		thermal surfac		s ins	rial (ACM) sulation, or us)		(Sp	nount pecify or LF)		Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A												9	
SEE ATTACHED		5 85														
									+		-	- /	-	-		-
									+		_					
Name of Registered Waste Hauler		T N	JDEP W	aste	Cubic	Yards		Name	of Re	aister	ed Lar	ndfill				
TWO BROTHERS CONTRACTING		Н	auler ID 8743	70707	of Was			100000000000000000000000000000000000000			AGE		IT G	.R.O	.W.S	5.
City, State TOTOWA, NJ						sal Date 1/2019		City, S MOF		VILL	E, P	Α				
Completed by VIVECA RAMOS	Title PROJI	ECT	COOF	RDINATO		Signature	e	e A	Jan.	1	,	Date 11/		019		

Print Form

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L 24508		NOTIF	CATION	tate of New N-OF ASBES TO NJAC 8:	Jersey STOS ABATE 60 and 12:12	MENT 0)		DE	C E		\mathbb{V}	
Date of Notification (1) 11/21/2019 IV-10	30	3			wner/Operato		RATION		NOV 2	2 6	2019	1
Agencies Notified Type Notification			Street A	Address BOX 326				100	ESTOS	001	ITDA	1 2
EPA Initial Amended			City, Sta	ate, Zip Code				ASD		MSIN		L OX
DOL Amendment Emergency		_		NFIELD, N	IJ 07061	10						
DOH justification) DCA Cancellation	*			of Contact IK ATEHO	RTUA			Telephone 908-226-		r		
Name of Facility Where Abatement is Takin	n Place (3)	FAC	ILITY INFOR	RMATION	Type	of Facility (4					
SP #7 - FORMER RADIO SHACK		5)				-	School (K-12					
Street Address 1006 US HIGHWAY 46							Subchapter	8 (Other than livate & comm		uilding	s, hom	es,
City (5) CLIFTON		1	1970	0/3			re Feet	# of Floors	8 1	Bldg.	Age	
County (6) PASSAIC				Code (7) USE ONLY)		Curre	nt Use (Prio	r if being demo	olished)	l		
Name of Monitoring Firm Hired by Building N/A	Owner (8)	ASCN	M No.			tement Cont	ractor (9) CONTRACT	ΓING, I	NC.		
Street Address						Addres	s AND AVE	ENUE	55/2			
City, State, Zip Code						State, Zi OWA,	p Code NJ 07512	2				
Project Manager for Monitoring Firm			Telepho	ne No.	Telepl	hone No -956-8	Э.	Licens				
Start Date (10) 12/2/2019	Schedul		mpletion	Date (11)	Name	of OSH	IA Monitor (9) ABO\		, , ,			
Occupancy Status During Abatement (Chec						Addres						
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe: VACANT	Period of all Facility	Abater y Hour	ment s	15 E.	City, S	State, Zij	p Code					
Scope of Work (Check All That Apply)												
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	- Commenced	Renova Demoli			×	Min Glo	i-Enclosure vebag Proce	nt with Negative dure (*) and Non-F			Ire.	
	Is	Locat	ion		_		ZXOIIIPIOG	() and Horris	Tiable 1	Aba	temen	t
Location of Asbestos-Containing Material (ACM)	Use	Norma ed Sole	ly by	Ashastas	Description s Containing N		(ACM)	Amount	-	Τ'	уре	
TO BE ABATED In Facility (13)	() () () ()	intena todial (12)		(i.e. th	ermal systems surfacing, VA other miscellar	s insula T, or	tion,	(Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A								ate	.e
GROUND FL STORE/SALES		Х		-	TILE & MAS	STIC		2,000 SF	X			
AREA												
GROUND FL STORAGE AREA		X		TSI	PIPE INSU	LATIC	N	20 LF	Х			
ame of Registered Waste Hauler		I	JDEP W	/aste (Cubic Yards		Name of R	egistered Lan	dfill			
WO BROTHERS CONTRACTING	ì	F	lauler ID 8743	No.	of Waste			MANAGEN		G.R.	O.W.	S.
ity, State OTOWA, NJ			0140		20 Disposal Date 12/11/2019	2	City, State					
Completed by	Title			/	Signature		WIORKIS	SVILLE, PA	Date			
/IVECA RAMOS	101110000	IECT	COOF	DINATO			M		11/21	1201)	

ir Tech LLC City. State	Title		MIL	03378	Hauler ID No.	Cubic Yerds TBD Disposel D TBD Signe	less lure	Name of Regi T.R.R.F. Inc City, State Tullytown, P	A	Pate		- Company	
it Tech LLC City. State Vayne, NJ 07470	720		MIL	03378	Hauter ID No.	TBD Disposal D	ela	T.R.R.F. Inc City, State			,	- Francisco	
Name of Registered Waste Hauler St Tech LLC City, State		lead	MIL	03378	Hawer ID No.	TBD		T.R.R.F. Inc			-	- Constant	
er Tech LLC		lead	MIL	EP Waste	Hawer ID No.		1				1	femal	
Name of Registered Waste Hauler		lead		EP Waste	Hauter ID No I	Ciple Vant	mg \A(=====	N	The same of the sa		- Demand	franci	Transact 1
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					Pipe insu	TRESOLI			10 LF	Ø			
asement-family room				×	1				10 LF	×			
rawl space		Yes	No	N/A	Pipe insu			*			_	He	
(13)		_	(12)			surfacil	g, VAT.	pr	SIF or LF)	Removal	ap.r	Excaps visio	Endosure
TO BE ABATED		M	ainteni Kodiai	ince/	Aaba:	alos Conta) ., thermal s	ning Mate yatama in	erial (ACM) sulation	Amount (Specity	Ren	Repair	ENC	End
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[.no al 0. [\$200]].			emoliti	an		20	Siaveben	Procedure T	Tent with Negati	ve Pres	eure		
>3 sf or >3 if ≥ 160 sf or ≥250 if		Z R	enova	lon		3	Futl Conte Vini-Encid	M ANW THOMPIE	inetion with negationalist production with negative Pressure	ve bres	sure		-
Scope of Work (Check all that apply)	-		_	-	The state of the s	Fatr Law	n, NJ 07	410	inetion with negati				
Line of Separational of The Line	F	M	PM	HE - U.	G M	City, Stat	e, Zip Co	de					
Facility Closed/Vecated During E Abatement Performed Outside of Time of Abatement	Meumi	I Committee	Abat	ement	nadha	20-21 W	agerew]	Road, Bldg.	4 35E			4	
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11 / 21 / 19	1 _	11	1 2	2 /	19	1							
Start Date (10)	Sche	duled	Compl	etion D	ate (11)	973-356 Name of	3511 OSHA M	Deiler	01127				
			10	Ahuaut	140.	Telephor		-	License No.			_	
Project Manager for Monitoring Firm			TA	lephoni	, NA	Wayne,	NJ 0747	0					
se, sile Sone		2	,			City, Sto	hs, Zip Co	ode			77		
City, State, Zip Code						575 Val		257					
Street Address					-	Gr Tech							
		- 1111	. (0)	ASCI	n Ng.			ent Contractor	(9)				
Name of Monitoring Firm Hired by E	uildina	Owne	r (0)			5755				iw(resim⊈)			
Easex				Co	unty Gode (7	(STATE US	E ONLY)	Current Use	Prior if being dem	ollaham			
Newark, NJ 07112 County (6)			520.1						# of Floors		Bidg.	Aga	
City (6)			-	-				Square Feet	(G.)				
	According to the							I A Other (i.e.	. private and com	nercial	bulldi	ngs.	
Street Address								School (K	or B //Uhaniban M				
Private house	IN INK	IIB LIW	ice (3)					Type of Feat					
Name of Facility Where Abatement	is Tol	na Bi-	Ph (5)	, F	ACILITY	INFORMA	TION		-		-	_	
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(NJAC 5:23-8) usti	cetion)			Na	ne of Cons	ict			Telephone N	1. Dal			
DDCA Seme	ndment rgency	(includ	ine	1	varic, NJ (· 11., \ ; . \ ;				1
Ø DOLWD ☐ Ame		al .	97	City	y, State, Zi	Code		127	ARAPIN AIR	·(:0)	75.5	ì	
☐ EPA ☑ Initia	ı	***		DIT.	eet Addres	3			7-4	1/			+
Agencies Notified Type No	1	-		Vir	ginia Lew	is				1			
11/20	1	19		- 1	me of Bull o		Operator	(2)	Comment Comments and Comments	LIC	ENS	ING	The state of the s
Date of Notification (1)									ALE	ESTA	SO		
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Date of Notification (1)	21 /	19		Sand.	Service .	Owner/Operator (ighway, LLC	2)	NOV	2 6	2019)	
Agencies Notified EPA	Type Notifica	tion			Address W. Kings	s Highway	and the state of t	load issue			Upraga Salasar	
□ DOLWD	☐ Amended				tate, Zip C		1	ASBESTO.	S CO ENSIA	VIAC)L &	
☑ DOH	Amendme		9	h 25944	mawr, N		į.	LIUI	2140H	HONON-ZHIP/AT	-	
DCA (NJAC 5:23-8)	☐ Emergence justificatio	n)	9	Name	of Contact			Telephone Numb				
	☐ Cancellati	on.		Joh	n Krinis			610-365-1640				
				FAC	CILITY IN	FORMATION						
Name of Facility Where A	batement is Ta	aking Place	(3)				Type of Facility	* *				
Vacant Building							School (K-12) 3 (Other than K-12)				
Street Address	vov.							rivate and commerc	ial bu	lding	s,	
141 W. Kings Highy	vay						Square Feet	# of Floors	Blo	lg. Ag	ie.	-
City (5) Bellmawr							10.000	1		8		
				Coun	ty Codo 17)(STATE USE ONLY)		ior if being demolish				-
County (6) Camden				Coun	ity Code (/	NOTATE OOL ONET	CONTRACTOR STATE OF THE PARTY O	mercial Buildin				
Name of Monitoring Firm	Hirad by Build	ing Owner	(8)	ASCM	No	Name of Abateme			9			\neg
Atlas Environmenta			(6)	AGGIVI	NO.		onmental, LLC					
Street Address	ii iiispectioi	15				Street Address	Jimenai, LLO					-
PO Box 11645						623 Cutler Av	venue					-
						City, State, Zip Co		×				-
City, State, Zip Code	116					Maple Shade						
Phialdelphia, PA 19			Tolo	phone	No	Telephone No.	, 140 00002	License No.				-
Project Manager for Mon Jason Dua	itoring Firm			57-784		856-755-0099	1	00842				
		cheduled (Name of OSHA N		00012				
Start Date (10)/		12	S			EMSL Analyt						
Occupancy Status During	Abatement (C	check only	one)			Street Address						
☐ Facility Closed/Vacate	ed During Entir	e Period of	Abate	ment		200 Route 13	0 North					
☐ Abatement Performed						City, State, Zip Co	ode					
Time of Abatement: _	AM	PM/	PM-		AM	Cinnaminsor	n, NJ 08077					
Scope of Work (Check all ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	I that apply)		enovati emolitic			☐ Mini-End ☐ Gloveba	g Procedure	gative Pressure	e			
		1	s Locat	ion		Z Hon Zao			T	ateme	ent Ty	/pe
Location	of		Norma	lly		Description of	of		-			
Asbestos-Containing		#	ed Sole aintena			stos Containing Ma ., thermal systems		Amount (Specify	Removal	Repair	Encapsulate	Enclosure
TO BE ABA		1	stodial		(i.e	surfacing, VAT		SF or LF)	oval	=	nsd	Sur
(13)	7		(12)	Г.	-	other miscellane					late	Ф
		Yes	No	N/A	F1 -	11 1 BH 4! -		450 65				
Liquor Storage Roon	1					ile and Mastic		150 SF				
Throughout					<u> </u>	sulation		223 LF 3,900 SF				
Main Room					Ceiling				-			
Vestibule					Floor T			6 SF		Ш	Ш	Ш
Name of Registered Was	te Hauler		100	IJDEP I lauler II		Cubic Yards of Waste	Name of Regis					
Freehold Cartage				15939	9	60 Disposal Date						
City, State						Disposal Date 12/24/2019	City, State Morrisville	ΡΔ				
Freehold, NJ						The state of the s	WOTTSVILLE		to			
Completed By (Print or T Christina Fay	ype)	Title Vice P	resid	ent of	Operatio	Signature	21.1	Da	te 12	10	1	

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Date of Notification (1)	21 /	19			95.55		G10	ner/Operator		11	MOV	2 5	20	10	And the second second	
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Agencies Notified EPA	Type Notific	ation				t Address		Chunch Cuit		200					-	
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(NJAC 5:23-8)	justificati				100000000000000000000000000000000000000	of Contac	500	•00.00			Telephone N					
	☐ Cancellat	tion			Jol	hn McLau	ıghi	ın			732-542-0	1334				
					FA	CILITY IN	IFOI	RMATION				= 200				
Name of Facility Where A	Abatement is 1	Taking	Place	(3)						Type of Facility ☐ School (K-12)						
Street Address			<u> </u>						\dashv	☐ Subchapter 8	(Other than K					
180 NJ 35										Other (i.e., p homes, etc.)		mercial	builo	lings,		
City (5)										Square Feet	# of Floors		Bldg	. Age		
Eatontown										1,500,000	2		59	E.		
County (6)					Cou	nty Code (7	7)(STA	ATE USE ONLY,)	Current Use (Pr	ior if being dem	olished)			
Monmouth									1	Commercia	I					
Name of Monitoring Firm	Hired by Build	ding O	wner	(8)	ASCM	No.	Na	me of Abater	ne	ent Contractor (9)						
Batta Environmenta	al Associate	es, Ind	c.				5	Shade Envi	ro	nmental, LLC						
Street Address							Str	eet Address								
6 Garfield Way							6	23 Cutler A	٩v	renue						
City, State, Zip Code							Cit	y, State, Zip (Со	ode						
Newark, DE 19713							N	/laple Shad	le,	NJ 08052						
Project Manager for Moni	toring Firm			Tel	ephone	No.	Tel	ephone No.			License No.					
Steve Woronicak						-3376	8	56-755-009	9		00842					
Start Date (10)09 /30 /	5-6-86				etion Da	19 19		me of OSHA MSL Analy					14			
Occupancy Status During	Abatement (6	Check	only o	ne)			Str	eet Address								
☐ Facility Closed/Vacate	d During Entir	re Peri	iod of	Abate	ment		2	00 Route 1	30	0 North						
Abatement Performed Time of Abatement:							7	y, State, Zip (Sinnaminso								
Scope of Work (Check all	that apply)										entire Denner					
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			⊠ Re □ De	novat moliti				☐ Mini-En	ncl	ainment with Neg osure procedure mpted (*) and No		dure				
				Loca									Abate	emen	Тур	ре
Location		.		Norma	illy ely by	Anha		Description			Amount		0 :	ם ת	Π	ш
Asbestos-Containing N TO BE ABA		'	Ma	inten	ance/			Containing Marmal systems			(Specify	To a contract of the contract		Renair	2	Enclosure
IN Facilit	у		Cus	todial (12)	Staff?			surfacing, VA			SF or LF)	2	5	, ,	2	sure
(13)		t	Yes	No	N/A		ot	her miscellan	iec	ous)				1	b	
Towns Square Area 1	Exterior Ro	oof				Roof Fi	eld,	Flashing, 0	Cu	ırb Flashing	20,000 SF	: [2	3 [] [
] [
FU-19] [
			П										7 [7 [7	
Name of Registered Wast	e Hauler				JDEP	Waste	Cul	oic Yards of		Name of Regis	tered Landfill					
Freehold Cartage				ŀ	lauler II 1593		Wa	ste 0		Fairless La						
City, State								posal Date		City, State	2007			12-1		
Freehold, NJ							1	1/21/2019		Morrisville	, PA					
Completed By (Print or Ty	rpe)	Title						Signature	_	<u> </u>		Date				
Christina Fay		Vie	ce Pr	esid	ent of	Operation	ns	Chel	a	Hay		11/6	21-	19		

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Date of Notification (1)	Markall In	V-1171					g Owner/Operator (1111	NOV	26	201	Q	
/	21 /	19			Ne	w Jersey	Turnpike Autho	rity	1101	_ 0	L0 #	•	
Agencies Notified	Type Notific	ation			Stree	t Address			A Commence	Teplamalarman		Victoria de la constante de la	
⊠ EPA	☐ Initial	125			581	Main St	reet		ASBESTO	OS COI SEMSIN		OL &	
☑ DOLWD		277	,		City,	State, Zip (Code	- Larrange	1.1 \.	21_17Q11 **********************************	V CI	V-VSCIIII-	and the same of th
☑ DOH ☑ DCA	Amendm Emerger		TI.	~	Wo	odbridge	e, NJ 07095						
(NJAC 5:23-8)	justificati	ion)	Gidding	A	Name	of Contac	t		Telephone N	Number			
	☐ Cancella	1000			Eri	c Babek			732-259-				
					FA	CILITY IN	IFORMATION						
Name of Facility Where A	Abatement is	Taking	Place	(3)				Type of Facility (4)				
Toms River Toll Bu	ilding							School (K-12)					
Street Address				***				Subchapter 8 Other (i.e., pri			l buil	dingo	
GSP Mile Marker 83	3.4 North							homes, etc.)	ivate and com	imercia	Duli	aings,	
City (5)								Square Feet	# of Floors		Bldg	g. Age	
Toms River								1,200	1		5		
County (6)					Cour	nty Code (7)(STATE USE ONLY)	Current Use (Price	or if being den	nolishe	d)		
Ocean							2.5	Toll Building			1000		
Name of Monitoring Firm	Hired by Buil	ding C)wner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
McCabe Environme	ntal Servic	es, L	LC		001	18	Shade Enviro	nmental, LLC					
Street Address							Street Address						
464 Valley Brook Av	venue						623 Cutler Av	renue					
City, State, Zip Code							City, State, Zip Co	ode				-	
Lyndhurst, NJ 0707	1						Maple Shade						
Project Manager for Moni	toring Firm			Tele	phone	No.	Telephone No.		License No).	-		
Jarred Panecki				20	1-438	-4839	856-755-0099		00842				
Start Date (10)	15	Sched	uled C	omple	tion Da	ite (11)	Name of OSHA M	onitor					
10 /24 /	19	_1	1_ /	_ 29	_ /	19	EMSL Analyti	ical, Inc.					
Occupancy Status During	Abatement (Check	only o	one)			Street Address			-			
☐ Facility Closed/Vacate							200 Route 13	0 North					
Abatement Performed							City, State, Zip Co	ode					
Time of Abatement:		PN	1/10:0	OPM-	5:00AN	Л	Cinnaminson	, NJ 08077					
Scope of Work (Check all	that apply)						⊠ Full Cont	ainment with Nega	ativo Drogovra				
≥3 sf or ≥3 If			-	novati			☐ Mini-Encl		ative Flessule	7			
≥160 sf or ≥260 lf			☐ De	molitic	n		Glovebag		F: 11 B				
			le	Locat	ion	T	☐ Non-Exer	mpted (*) and Non	-Friable Proce				
Location	of			Vorma			Description of	f		-	-		t Type
Asbestos-Containing I	Material (ACN	1)		d Sole		Asbe	stos Containing Mat	terial (ACM)	Amount		Ren	Repair	Enc
TO BE ABA				intena todial		(i.e	., thermal systems i surfacing, VAT,		(Specify		Removal	air	Enclosure
(13)	У			(12)			other miscellaned	ous)	SF or LF)		<u>a</u>	1	Enclosure Encapsulate
18000089			Yes	No	N/A			,					D
Locker Room and Hal	llway					Floor Ti	ile		175 SF				
Lunch Room and Bac	k Hallway			\boxtimes		Floor Ti	ile		225 SF				
										[
										1			
Name of Registered Wast	e Hauler			100	JDEP \		Cubic Yards of	Name of Registe	ered Landfill				
Freehold Cartage	<u> </u>			H	auler II 15939		Waste 30	Fairless Lar	ndfill				
City, State							Disposal Date	City, State					
Freehold, NJ							11/29/2019	Morrisville,	PA				
Completed By (Print or Ty	pe)	Title					Signature	,)		Date			
Christina Fay		Vi	ce Pr	eside	nt of (Operation	ns Auto	Hay		11	21.	19	

VICODOI State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8 60 and 12:120) Check # 2314 / 2348 Name of Building Owner / Operator (2) J. P. Morgan Chase November 22, 2019 November 6, 2019 Street Address Agencies Notified Type Notification NOV 26 2019 EPA 1111 Polaris Parkway DEP ASBESTOS CONTROL & LICENSING DOL City, State & Zip Code Initial Columbus, OH 43240 Amended X X DOH Amendment #1 (corrected) DCA Telephone Number Cancellation Name of Contact Bruno Trindade - JLL for JPMorgan Chase 929-275-5318 **FACILITY INFORMATION** Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Chase Bank Subchapter 8 (Other than K-12) Street Address X Other (i.e., private & commercial buildings, home, etc.) 370 Essex Street # of Floors Bldg. Age Square Feet 50 Years 4,000 City (5) Current Use (Prior if being demolished) Lodi Bank County Code (7) County (6) USE ONLY Bergen ASCM No. Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) Synatech, Inc. Apex Companies, LLC Street Address Street Address 120D Wilbur Place 829 Radio Road City, State & Zip Code City, State & Zip Code Little Egg Harbor, NJ 08087 Bohemia, NY 11716 Telephone Number Telephone Number License Number Project Manager for Monitoring Firm 00817 Steve Cotrone 631-567-1777 609-296-6916 Name of OSHA Monitor Scheduled Start Date (10) Scheduled Completion Date (11) December 18, 2019 Synatech, Inc. November 23, 2019 Street Address Occupancy Status During Abatement (Check only one) 829 Radio Road Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Hours City, State & Zip Code Little Egg Harbor, NJ 08087 Other - Describe: Facility Occupied During Abatement (not near or in the work area) X Scope of Work (Check all that apply) Full Containment with Negative Pressure >3 sf or > If Renovation Mini-Enclosure ≥160 sf or ≥260 lf Demolition Glovebag Procedure Non-Exempted(*) and Non-Friable Procedure Abatement Type Is Location Normally Used Description of Location of Amount (Specify SF Asbestos-Containing Material (ACM) Solely by Maintenance or Asbestos-Containing Custodial Staff? (12) Material (ACM) or LF) TO BE ABATED (i.e., thermal systems IN Facility Encapsulate insulation, surfacing, VAT Enclosure (13)Remova Repair or other miscellaneous) N/A Yes No X White Caulk 325 SF X **Exterior Soffit** Cubic Yards of Waste Name of Registered Landfill Name of Registered Waste Hauler NJDEP Waste Hauler ID No. Fairless Hills Synatech, Inc. City, State Disposal Date City, State

December 19, 2019

Signature

Little Egg Harbor, NJ 08087

Title

Exec. Administrator

Completed By

Diane Aloia

Morrisville, PA

Date

November 22, 2019

November 6, 2019

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

		(Pursua	nt to N	JAC 8:60 and 12	:120)	> P P E	Check#2	314	123	348
Date of Notification (1)	November 21, 201 vember 6, 2019	19		of Buildin Morgan C	g Owner / Operator (2)), 5 6 5	5 1 0			
Agencies Notified	Type Notification		_	Address					•		\prod
□EPA □DEP			11111	Polaris P	arkway		lant.	2 6 2019			
⊠DOL	Initial			tate & Zip		autorité de	ASSESTO	S CONTR	OL &		
⊠DOH	Amended Amendment	# 1	Colun	nbus, OH	1 43240	and the second	LIC	ENSING	was the same	a consistor	
DCA	Cancellation		Name	of Contac	et .			Telephon	e Nun	nber	
			Bruno	Trindade	e – JLL for JPMorga	n Chase		929-275-5			
			FAC	CILITY	INFORMATION		_/				
Name of Facility Where Chase Bank	Abatement is Taking	g Place (3)			Type of Facili	ty (4) K-12)	/	344 3-44 3-44 3-44 3-44 3-44 3-44 3-44	-0101		
Street Address					=	oter 8 (Other than	K-12)				
370 Essex Street					I —	i.e., private & co		lings, hom	e, etc	c.)	
					Square Feet	# of Flo		Bldg. Age			
City (5) Lodi					Current Use (Prior if being dem	1 nolished)	50	Year	s	
County (6) Bergen		County Code	: (7)		Jank /						
Name of Monitoring Fir Apex Companies, LLC				ASCM		tement Contractor	(9)				
Street Address					Synatech, In Street Addres						
120D Wilbur Place					829 Radio Ro	oad					
City, State & Zip Code Bohemia, NY 11716					City, State & Little Egg Ha	Zip Code rbor, NJ 08087					
Project Manager for Mo Steve Cotrone	onitoring Firm		ephone N		Telephone No	umber	License I				
Scheduled Start Date (November 21,		led Completio	1-567-177 on Date (1 per 18, 20	11) /	609-296-6916 Name of OSH	IA Monitor		00817			
Occupancy Status Duri		k only one)		/ /	Synatech, In Street Addres	s					
	rformed Outside of N		Datemen	1	829 Radio Ro City, State & 2					-	
Other – Descri		+ (+	. : ./	(_)		rbor, NJ 08087					
Scope of Work (Check	ied During Abatemen	t (not near o	r in the w	ork area)						
Scope of Work (Crieck	all triat apply)		N.			Full Containment	with Negative D	roccuro			
$ \ge 3 \text{ sf or } \ge 1 f $		/DI	, Renovatio	n	H	Mini-Enclosure	with Negative P	lessuie			
≥160 sf or ≥260	lf	/ 🗖 i	Demolition	า	П	Glovebag Proced	dure				
		/			\boxtimes	Non-Exempted(*) and Non-Friabl	e Procedur	е		
	tion of ing Material (ACM)		on Norma Mainten		Descripti		A		ateme	nt T	уре
	ABATED	7000 7000	dial Staff?		Asbestos-Co Material (Amount (Specif or LF)	y SF			
	acility				(i.e., thermal					ш	
(1	3)			- 1	insulation, surf or other misce			Re	20	Encapsulate	Enclosure
			- 1					Remova	Repair	psu	losu
		Yes	No	N/A				<u>a</u>	~	ate	Гe
Exterior Soffit	/			х	White C	aulk	325 SF	X	\dashv	_	T
					Time o	uun	020 01				
Name of Desisters 234	-ata Ulavila	NUDER		10.11	/	N (5					
Name of Registered Wa	aste mauler	NJDEP V Hauler ID		Cubic Y	ards of Waste	Name of Registe	erea Lanafill				
Synatech, Inc.	-		429	2		Fairless Hills					
City, State				Disposa	al Date	City, State					
Little Egg Harbor, NJ	08087			Decem	ber 19, 2019	Morrisville, PA					
Completed By	Title			Cianatu	ro -		Date	- 04 - 05 - 15			
Diane Aloia	Exec.	Administrate	or	*	cani allo	2	Novembe November 6, 20	r 21, 2019 19			

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

		(Pursua	nt to N	JAC 8:60	and	12:120)		F C 6	heck # 2	2313	T	7
Date of Notification (1)	November 14, 20 vember 6, 2019	19		of Buildir Norgan (ng Owner / (Chase	Operato	or (2)						The state of the s
Agencies Notified	Type Notification			Address				The second secon	NOV '	2 6 20	10		Ш
□EPA □DEP			11111	Polaris F	arkway				NUV	_ 0 20	(accessors	-	
⊠DOL			City, S	tate & Zi	o Code				ASSESTO	S CUNTI SNSHIG	TUL	X	
⊠рон	Amended	й	Colun	nbus, Ol	1 43240			- Description of the second	and all proposed many and the control of	1101111	construction of	and the second	
DCA	Amendment Cancellation		Name	of Conta	nt .					Telephone	a Mur	ahar	
_	Cancellation	•				JPMoi	rgan Chase			929-275-5		inci	
			FAC	CILITY	INFORM	ATIO	N						
Name of Facility When	e Abatement is Takin	g Place (3)			Тур		acility (4)						
Chase Bank							ool (K-12)						
Street Address							chapter 8 (Oth						
370 Essex Street							er (i.e., priva				e, et	c.)	
City (5)					Sq	are Fe		# of Floors	В	Bldg. Age	V		
Lodi					Cui	rent Us	se (Prior if bei	ing demolish	ed)	50	Yea	rs	
County (6) Bergen		County Code	(7)										
Name of Monitoring Fin Apex Companies, LL				ASCM		ne of A	Abatement Co	ntractor (9)					
Street Address			10-10-1			et Ado						-	
120D Wilbur Place							Road						
City, State & Zip Code Bohemia, NY 11716							& Zip Code Harbor, NJ	08087					
Project Manager for Mo	onitoring Firm	100000	lephone N		2000000	- 4	Number		License Nu				
Steve Cotrone Scheduled Start Date (uled Completio		1)	Nai		OSHA Monitor			00817			\neg
ON HOLD Occupancy Status Dur	the same of the sa		ber 18, 20)19		natech			-1100-2111-2112				_
	d/ <u>Vacated</u> During En		Abatemen	t	100.000	Radio	Road						
	erformed Outside of N	Normal Hours					& Zip Code				7. 144	- 500	
Other – Descr						le Egg	Harbor, NJ	08087					
Scope of Work (Check	ied During Abatemer	nt (not near o	r in the w	ork area	1)					****			-
ocope of Work (Check	all triat apply)						☐ Full Conta	ainment with	Negative Pre	ssure			
			Renovatio	n			Mini-Encl		1109441701170	000.0			
≥160 sf or ≥260	If		Demolition	1			Glovebag	Procedure					
							Non-Exe	mpted(*) and	Non-Friable	Procedur	е		
	tion of		on Norma				ription of				ateme	nt T	уре
	ing Material (ACM) ABATED		y Mainten dial Staff?		A:		s-Containing ial (ACM)	Am	ount (Specify or LF)	SF			
	acility	l ousto	diai Otali :	(12)	(i.e		mal systems	İ	OI L:)			_	
(13)						surfacing, VA			괴	_	Enc	m
			- 1		ord	ther m	iscellaneous)			em	Repair	aps	Clo
		Yes	No	N/A						Removal	a:	Encapsulate	Enclosure
		163	NO									ē	to
Exterior Soffit		//		Х		Whit	e Caulk		325 LF	X			
Name of Desisters 114	aata Haula-	NIDED	Nachs	Tours v	(auda -£\2)	-1-	N (Desistent	l and Ell				\Box
Name of Registered W	aste Hauler	NJDEP V Hauler ID		Cubic ,	ards of Wa	ste	Name of	Registered	Landfill				
Synatech, Inc.			429	2			Fairless	Hills					
City, State				Dispos	al Date		City, Sta	te	***************************************				
Little Egg Harbor, NJ	08087			Decem	ber 19, 201	9	Morrisvi	ille PA					
Completed By	Title			Signati		1	/ Inicities	Date					
Diane Aloia	Evan	. Administrat	or	1/	Mari	111	rue_	Maria	November 6				
Dialic Alvia	Exec	. Aumminstide	UI	1/00	000	4010	,	INOVE	muci o. Zuli	No. of the last of			-

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

											(U) 15	Check #	2314	1	
Date of Notification (1)	ovember 6, 20	019			of Buildi Morgan		er / Operator	(2)	IIK	101					
Agencies Notified	Type Notifica	The state of the s	-	_	t Address				1111		10V 28	2019		1	4
□EPA □DEP					Polaris I		1		had b	ASB	ESTOS C	ONTR)1, &		
DOL	Initia				State & Zi					participation in the Second		21:43 			10 -10
⊠DOH	Ame Ame	naea ndment#		Colu	mbus, O	H 43240	1								
DCA	Cano	ellation		Name	of Conta	ct						Telepho	ne Nu	mbe	r
				Brund	Trindad	de – JLL	for JPMorga	an Chase				929-275	-5318		
				FA	CILITY	INFO	RMATION								
Name of Facility Where Chase Bank	e Abatement i	s Taking P	Place (3)				Type of Faci								
Street Address					-110			apter 8 (Oth	ner than	K-12)					
370 Essex Street						ñ		(i.e., priva			cial buildin	ngs, hor	ne, e	tc.)	
							Square Feet		# of Flo			Bldg. Age			
City (5) Lodi							4,00			1			0 Yea	rs	
Loui							Current Use Bank	(Prior if be	ing den	nolished)				
County (6) Bergen			ounty Cod												
Name of Monitoring Fir	m Hired by Bi				ASCM	No.	Name of Aba	atement Co	ntracto	r (9)				_	-
Apex Companies, LLC							Synatech, Ir			. (0)					
Street Address 120D Wilbur Place							Street Addre 829 Radio R								
City, State & Zip Code							City, State &								
Bohemia, NY 11716	.,						Little Egg H		08087						
Project Manager for Mo Steve Cotrone	nitoring Firm			lephone I 1-567-17			Telephone N 609-296-691				License N	umber 008	7		
Scheduled Start Date (Scheduled	Completi	on Date (11)		Name of OS	West of the Control o							
November 18, Occupancy Status Duri		(Charles		ber 18, 2	019		Synatech, Ir								
Facility Closed	Macated Dur	ing Entire	Period of	Abatemer	nt		Street Addre 829 Radio R	7							
Abatement Pe							City, State &	Zip Code						72.	\neg
Other - Descri							Little Egg H	arbor, NJ	08087						
Facility Occup			ot near o	or in the v	vork area	1)									
Scope of Work (Check	all that apply)							•							
□ >2 of occ 16								1		t with Ne	egative Pre	ssure			- 1
 ≥3 sf or ≥ lf ≥160 sf or ≥260 	If		=	Renovation Demolition			<u> </u>	Mini-Encl							
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Asbestos-Containi		ACM)	Solely b	y Mainter	nance or		Asbestos-C	ontaining		Amour	nt (Specify				,,,,
	ABATED acility		Custo	dial Staff	? (12) !		Material (i.e., therma				or LF)	-	_		-
	3)						nsulation, sur	facing, VA				l 20	_	Enc	m l
							or other misc	ellaneous)				Removal	Repair	aps	nclo
			Yes	No	N/A							oval	a-	Encapsulate	Enclosure
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Exterior Soffit					Х		White 0	Caulk			325 LF	X			
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Name of Registered Wa	aste Hauler		NJDEP V		Cubic \	ards of	Waste	Name of	Regist	ered La	ndfill				\vdash
Synatech, Inc.			Hauler ID	No. 429	2			Fairless	Hille						
City, State				720	Dispos	al Date		City, Sta							
	00007						2010								
Little Egg Harbor, NJ Completed By	00007	Title			Signatu	iber 19, ire	2019	Morrisvi		Date					
		569 10 0				Vane	Ala	~			2 200				
Diane Aloia		rxec. Ad	ministrat	or	1	vune	- VIVI			Novemb	per 6, 2019				

(Pursuant to NJAC 8:60-7 and 12:120 Name of Building Owner / Operator (2) Date of Notification 11/14/19 Murray Construction AgenciesNotified Type of Notification Street Address NOV 26 2019 X Emergency Notification **EPA** 374 Millburn Ave DEP Initial Notification City, State & Zip Code ASBESTOS CONTROL & DOL Amended Notification Millburn, NJ 07041 X Telephone Number Cancellation Name of Contact X DOH 973-376-7650 DCA Michael Nachtome **FACILITY INFORMATION** Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) Vacant Office School (K-12) Street Address Subchapter 8 (Other than K-12) 387 Millburn Ave X Other (i.e., private & commercial buildings, homes, etc. Square Feet Bldg. Age # of Floors 60+ City (5) County (6) County Code (7) 5000 Millburn Current Use (Prior if being demolished) Essex Commercial Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Global Abatement Services, LLC N/A **Environmental Tactics** Street Address Street Address 443 Schoolhouse Road 64 Broad Street City, State & Zip Code City, State & Zip Code Monroe Township, NJ 08831 Matawan, NJ 07716 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number 732-290-2217 732-605-9062 00714 Tom Geiger Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor Global Abatement Services, LLC 11/15/19 11/18/19 Occupancy Status During Abatement (Check only one) Street Address 443 Schoolhouse Road Facility Closed/Vacated During Entire Period of Abatement City, State & Zip Code X Abatement Performed Outside of Normal Facility Hours -Monroe Township, NJ 08831 Describe: After 5pm Other - Describe: Scope of Work (Check all that apply) X Full Containment with Negative Pressure X Renovation Demolition Large Project Mini-Enclosure Glovebag Quantity is ≥ 3 SF or ≥ 3 LF ACM Other: Non-friable X Quantity is ≥ 160 SF or ≥ 260 LF ACM Abatement Type Is Location Description of Amount Location of (Specify: Removal, Normally Used Asbestos-Containing (Specify Asbestos-Containing Solely by Material (ACM) Square Feet or Repair, Material (ACM) Linear Feet) Encapsulation or (i.e., thermal systems TO BE ABATED Maintenance or insulation, surfacing, VAT Enclosure) in Facility Custodial Staff? or other miscellaneous) (13)(12)1st floor Contaminated ceiling tile 400SF Removal N/A clean up Cu. Yds. of Waste Name of Registered Landfill NJDEP Waste Hauler ID # Name of Registered Waste Hauler **Cumberland County** 18693 10 Freehold Cartage City, State Disposal Date City, State 11/18/19 Newburg, PA Freehold, NJ Date Signature Completed By (Print or Type) Title 11/14/19 President Dominick Tringali Dominick Tringali

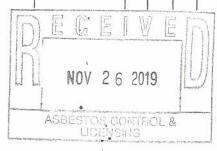
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT

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Date of Notification (1)	161 22 3	1019	N	ame of E	Building Owner/O	perator (2)	Par	DOK				
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□ EPA □ DEP	Initial Amended	1 2	o, To	ity, State	e, Zip Code		,)	15.15	_	-		
DOL	Amendment #		- L			ato	n tou	(U [N]		11	24	
DOH DCA	justification) □ Cancellation		N		South (Pope	K	Telenhone Num	iner			l
Name of Facility Where	Abatement is Taking	Place (3)		FACIL	ITY INFORMATION		ype of Facility (4	<u>+</u>)	-25.36			-
Sing	k fam	ily	C-	Wc	llias		School (K-1)	2)	î.			
Street Address	2.	, ,		1)	Z		8 (Other than K-12 rivate & commercia		ngs, i	nomes	i,
City (5)	1	J	NJ	_	770.	S	quare Feet	# of Floors	- 1	dg. Ag		
County (6)	ontown	7	TC	ounty C		С	urrent Use (Pric	or if being demolish	-	50	τ-	\dashv
	mouth	waar (9)	(5	ASCM	SE ONLY)	Name of	Abatement Con	tractor (9)				_
Name of Monitoring Firm	in Hirea by Building O	wrier (o)	B	ASCIVI	N/A	TValle of	CONTRACT CONTRACT	haoleg	ies	9	In	6
Street Address	an 2	17				Street Ad	Idress	337	•			
City, State, Zip Code		A/T		100	522	City Stat	e, Zip Code	TIA 10	A	36	21	2
Project Manager for Mo	nith ring Firm	NO	<u>₹</u>	elephon	e No.	Telephor	ne No.	License N	0.	A) 🥪 u	
Steve S	chenkea) a			758-3365	_	58-336 OSHA Monitor	5 OK) :	14	1	_
Start Date (10) Dec 3	The second secon	Schedule		2 C		Name of		hnologies	I	ıc		
Occupancy Status Durin	ng Abatement (Check			01.400		Street Ac		337				
Facility Closed/Vac Abatement Perfort Other – Describe:	ned Outside of Norma			ent		City, Sta	te, Zip Code	(1~-		~ ~		
Scope of Work (Check	All That Apply)					1000	u Egypt	NJ (70~	<u></u>	5	
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Location Asbestos-Containing		Used	ormally Solely ntenan	y by	Asbestos Con		terial (ACM)	Amount			En	Ш
TO BE Al		1	odial Si (12)	Sept. 19		cing, VAT,	, ог	(Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
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Family [)en	100	×		Floor	Tile	<u> </u>	300 SF	X			
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Name of Registered W	aste Hauler		100000	JDEP W		c Yards	Name of	Registered Landfi	II .			
	chnologie	Ş	H	auler ID 170	00	-	Was	te Manage	men	to	F F	A
City. State	Cust.	NJ	8		H 25	osal Date	City, Sta	ite	PA			
City, State Wew E Completed by	-31/6 L	Title	. n			Signature	50.0		ate	,)	7, 2	AIG
Steve Sch	en her	HRE	Sid	ent) les	estally che	or l	1 VOI	1 2/1	۲, ۵	017

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		1 1	1	State of N	lew Jers	ev I								
Project#	7	ÑÓT	IFICATI (Pursua	State of N ON OF AS nt to NJA	BESTOS C 8:60 a	ABATE nd 12:12	MEN (0)	IT	Chec	·操件) 47	60	5 2	019	_
Date of Notification (1)			Name	of Buildin	o Owner	/Onersto	r (2)							
11/22/2019								d \/oto==	ns Affair ^S	DECTO	10.0	01/10	100	nterena C
Agencies Notified Type Notificatio	n		Street	Address	OIIL OI	ivillical y	and	u vetera	ns Anair	110	EN	SHIVE	nui	_ O
☐ EPA ☐ Initial			101 E	Eggert (Crossin	g Rd		8		Medicania e de la composition de la co	***************************************	r sinsk kesk	William View	menutu
DEP Amended Amendmen			City, S	State, Zip (Code							-		
Emergency	nt# (includir	na		ence, N		-8								
DOH justification)	.5	1	of Contac	zt .				Teleph	none Nur	nber			
Cancellatio	n		Ed S	11111111					(732)	974-4	394			
Name of Facility Where Abatement is Taki	ng Place	(3)	FA	CILITY IN	FORMAT	TION	Tur	e of Facilit	. (4)					_
National Guard Dining Hall Build	lina 11						131		t NAS					
Street Address	3						H	School (K Subchap	(-12) ter 8 (Other t	han K-12	2)			
100 Camp Drive								Other (i.e	. private & co	ommercia	al bui	ldings	s, hon	nes
City (5)							Squ	etc.) lare Feet	# of Flo	oors	Т	Bldg.	Age	_
Sea Girt, NJ 08750							21,	000	1		- 1	0	, igc	
County (6)				Code (7)					rior if being	demolish	ed)	-		
Monmouth				USE ONL	. (۲)	_	Din	ing Hall						
Name of Monitoring Firm Hired by Building	Owner (3)	2.200	M No.	T.				ontractor (9)					
JSA Environmental Managemer Street Address	it, inc.		001	12				toration	LLC					
44 West State St						Street								
City, State, Zip Code								side Rd						
renton, NJ 08618	(0)			80		100		Zip Code	200					
Project Manager for Monitoring Firm			Teleph	one No.		Teleph		NJ 07		cense No				_
Villiam Weisgarber,Jr.				656-810	01	973-9			100	358).			
Start Date (10)	Schedu	led Co	mpletion	Date (11))			SHA Monito	r	330	_		_	_
2/02/2019	12/18/	2019						oration L						
Occupancy Status During Abatement (Chec	k Only O	ne)				Street								_
Facility Closed/Vacated During Entire	Period of	Abater	ment			72 Bro	ooks	side Rd						
Abatement Performed Outside of Norr Other – Describe:	nal Facilit	y Hour	8					Zip Code						
Scope of Work (Check All That Apply)						Rando	olph	NJ 078	369					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demoli					M	ull Containn ini-Enclosu lovebag Pro		gative Pr	essu	re		
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Location of Asbestos-Containing Material (ACM)		Norma ed Sole		1	Des	scription	of					T	/pe	_
TO BE ABATED		aintena todial		Asbes (i.e.	tos Cont thermal	aining Ma systems	ateria insul	il (ACM) ation.	Amou (Spec		70		<u>n</u>	1
In Facility (13)	000	(12)	otali :		surfac	cing, VAT	, or		SF or L		Remova	Repair	caps	11010
₩ &	Yes	NI-	NI/A	1	outer II	niscellane	eous)				DVa	air	Encapsulate	Eliciosule
t floor - toilets, shower area	res	No X	N/A	nana-	nine f	Hina		0	102 : =				Ĉ	
t floor- Kitchen area	1		+					& cut	100 LF		, X			
chen area	+	×	-					freezer			×			
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loor ame of Registered Waste Hauler		×		door ca					340 LF		×			
			JDEP Wauler ID		Cubic of Was			Name of	Registered I	andfill	_			
ewark Carting			4509		TBD			G.R.O.	W.S					
ity, State Newark, NJ						al Date		City, Stat	te					_
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kica Mrda	Presid	tent			- 1					1	Domen			

	Normal	ly	Description of					t
M	aintenar	nce/	(i.e. thermal systems insulation, surfacing, VAT, or	erial (ACM) sulation, (Specify or us) Amount (Specify SF or LF)	Repa	Encapsu	Enclosure	
Yes	No	N/A			la la	=	ilate	ure
1	x		Light Pad Insulation	1 05	-	-		
+	 	-		1 35	Х			
-	x		Duct vibration joint cloth	32 SF	x			
	Us M Cus	Normal Used Sole Maintenar Custodial S (12)	Yes No N/A	Normally Used Solely by Maintenance/ Custodial Staff? (12) Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A X Light Pad Insulation 1 SF	Normally Used Solely by Maintenance/ Custodiat Staff? (12) Yes No N/A No N/A Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Amount (Specify SF or LF) SF or LF) Output Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Yes No N/A X Light Pad Insulation 1 SF X	Normally Used Solely by Maintenance/ Custodiat Staff? (12) Yes No N/A No N/A No N	Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A X Light Pad Insulation X X X X X X X X X

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Date of Notification (1)					-) Name	of Buildin	a Ow	ner/Oper	ator (2)		H NO	126	20	19	-	4
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□ DCA	☐ Emergen		7.000 100	- a		Spr	ing Lake	, NJ	07762									
(NJAC 5:23-8)	justificati	on)		3		Name	of Contac	t					Telephone	Numb	er			
	☐ Cancellat	tion				Ric	hard Hyd	de					732-76	2-736	5			
						FA	CILITY IN	IFO	RMATIO	N						-11		
Name of Facility Where A	batement is 1	Γakinο	Place	e (3)							Type of I	- 20 1						
Residence											Scho) (Other thar	K 121				
Street Address							00-	70	1		Other	r (i.e., pr	ivate and co	mmer	cial bu	ilding	S,	
City (5)							00	10	140			es, etc.)	1		1-1			
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County (6)	-	-	Cour	ty Code (7	1/27/	TE LISE OF	NI VI	100000	lee (Dri	or if being d	omolio		65					
Monmouth		Ooui	ity oode (i	ДОТ	17 L OOL O	VL 1)	Resid		or it being u	emons	ieu)							
Name of Monitoring Firm	A	SCM	No.	Na	me of Aba	ateme	ent Contra											
N/A							ntracting											
Street Address		Street Address																
				1	889 Rou	ute 9	, Unit 61				8							
City, State, Zip Code				City	y, State, Z	Zip Co	ode											
								Т	oms Riv	ver, l	New Jers	sey 087	755					
Project Manager for Moni	toring Firm			T	elep	hone	No.	Tel	ephone N	lo.			License I	No.				
								7	32-349-	9932	6		00624					
Start Date (10)	2000 101						te (11)		me of OS									
12 /02 /		. 50	2_/	.07		_ / _	19	E	.M.S.L.	Anal	ytical							OI .
Occupancy Status During									eet Addre	11/16			7.5					
☐ Facility Closed/Vacate☐ Abatement Performed							cribe		056 Stel			¥8				1525.0		
Time of Abatement: _	AM	PN	Λ/	P	M	- Describe City, State, Zip Code AM Piscataway, New Jersey 08854												
Scope of Work (Check all	that apply)	- 2		- 1				Г	iscalaw	ay, i	vew Jers	sey uso	104					
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Date of Notification (1) 11 / 22 /19 Name of Building Owner/Operator (2) RIVERVIEW MEDICAL CENTER Street Address	Inv 16016	/ N	OTIF	ICAT	State of New Jersey ION OF ASBESTOS ABA	ATEMEN	T		3	48	66	,			
Date of Notification (1) 2	UIV . Ceory		(Pu	ırsuan	NJAG-8:60-Fand-12	120-47	\		P.		10/	E			
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DEP X Amended Notification 1 ASSESTOS CONTROL & ASSESTOS CONTROL & Name of Contact Teleghone Number Contact Contac	EPA Initial No	tification	n		City, State, Zip Coo	le									
Name of Facility Where Abatement Is Taking Place (3) FACILITY INFORMATION School (K-12) Subchapter 8 (Other than K-12) Sub		d Notific	ation	1	RED BANK, NEW	JERSEY			-	non-managed and a	-				
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Name of Facility Where Abatement is Taking Place (3) REVERVIEW MEDICAL CENTER Sirvest Address Asserting Place (3) Report (7) Sirvest Address Asserting Place (3) Report (7) Sirvest Address Asserting Place (8) MATAWAN, NEW JERSEY 07747 Floject Manager for Monitoring Firm Flelephone Number Telephone Number Asserting Place (8) Sirvest Address Asserting Procedure A		-1101/1	OTIF	10 A T		NO. OF THE OWNER OWNER OF THE OWNER OW									
Name of Monitoring Firm Hrod by Building Owner (8) EXPECTED MATAWAN, NEW JERSEY 07747 Project Manager for Monitoring Firm Telephone Number THOMAS GEIGER EXpected State Date (10) School Company State Sta	DCAEMERGE	ENCYN	IOTIF		A. C.			732-430-2009				_			
School (K-12) Subchapter & (Other fhan K-12) Schopater & (Other fine, private & commol. bidgs., homes, etc.) Street Address 1 RIVERVIEW PLAZA-2ND FLOOR City (S) County (G) City (S) County (G) County Code (7) County Code (7					ACILITY INFORMATION		of Facility	(4)				-			
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	RIVERVIEW MEDICAL CENTER								(-12)						
Siguare Feet # of Floors 65 City (5) County (6) County Code (7) Current Use (Prior if being demolished) Pharm. Lab. Name of Monitoring Firm Hired by Building Owner (8) ASCM No. ENVIRONMENTAL TACTICS Street Address 64 BROAD STREET City, State, Zip Code MATAWAN, NEW JERSEY 07747 Project Manager for Monitoring Firm THOMAS GEIGER County Code (7) Current Use (Prior if being demolished) Pharm. Lab. HOSPITAL CORPORATION Street Address 313 SPOOK ROCK ROAD City, State, Zip Code SUFFERN, NEW YORK 1090 SUFFERN, NEW YORK 1090 SUFFERN, NEW YORK 1091 1/ 30/ 20 Month Day Year Month Da										s., hor	nes, e	tc.)			
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City, State, Zip Code MATAWAN, NEW JERSEY 07747 Project Manager for Monitoring Firm THOMAS GEIGER								CK BOAD				- 1			
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Telephone Number Telephone N	MATAWAN, NE	W JEF	RSEY	07747	7										
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				ACILITY IN	VFOR	MATION										
Name of Facility Where Abatement RIVERVIEW MEDICAL CENTER	is Taking	Place	(3)				Sui	hool (K- bchapte			se ho	mos	oto)			
Street Address							Square		# of Floors	T		g. Age				
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Name of Monitoring Firm Hired by E ENVIRONMENTAL TACTICS	Building C	wner	(8)		AS	SCM No. 17			ment Contractor MENTAL CORPO		ION					
Street Address							Street Ad									
64 BROAD STREET City, State, Zip Code								CK ROAD								
MATAWAN	. NEW JE	RSEY	0774	7			City, Sta	V YORK 10901								
Project Manager for Monitoring Firm	•			Number			Telephor			ense N	lumbe	er	\neg			
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Scope of Work (Check all that apply)	ring Entire side of Nor IDAY - FR	Perio	od of A acility 7AM-3	Hours - De	scribe	e: Criticals w Mini-Enclo	ith Negati	te, Zip (GERS FALLS, NE	EW Y	ORK 1	2590				
>3SF OR LF						Glovebag	Procedure						1			
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Location of Asbestos-containing Material (ACM) TO BE ABATED in Facility (13)	noi Mai	Locatemally solely nt/Cus Staff (1	used by stodial	Co in	ontain (ie. T sulatio	ption of As ing Materia hermal sys on, surfacir er miscella	al (ACM) stems ng, VAT,		Amount (Specify SF or LF)	REMOVAL	REPAIR	ENCAPSUL	PENCLOSUR			
2ND FLOOR SOUTHWEST CORRIDO	OR		X	VAT & MA	STIC	¥			776 SF	X						
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Name of Registered Waste Hauler NEWARK CARTING		EP W ler ID 913	No.	Cubic Yard	120	Waste	GRAND	CENTR	ered Landfill IAL SANITARY L	ANDF	ILL					
City, State NEWARK, NJ 07105				Disposal D 11/25/19-0		2020	City, Stat	2	WNSHIP, PA							
Completed by (Print or Type) BENJAMIN SANCHEZ	Title DIRECTO	R OF	OPE		Signa		I LAINING	XX	Date Date	9//	-10	-1	9			

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) Date of Notification (1) MERCK SHARP & DOHME CORP. NOV 2 6 2019 /19 Street Address Agencies Notified Type Notification 126 E. LINCOLN AVENUE, P.O. BOX 2000, RY28-414 **EPA** Initial Notification City, State, Zip Code LICENSING DEP Amended Notification #1 RAHWAY, NEW JERSEY 07065 DOL Cancellation DOH On Hold Name of Contact Telephone Number DCA **EMERGENCY NOTIFICATION** KINNARI PATEL 732-594-6352 **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) MERCK SHARP & DOHME Subchapter 8 (Other than K-12) Other (ie. private & commcl. bldgs., homes, etc.) Street Address # of Floors Square Feet Bldg. Age, 57 126 EAST LINCOLN AVENUE - BUILDING 80 N 40.000 1 City (5) County (6) County Code (7) Current Use (Prior if being demolished) RAHWAY UNION (STATE USE ONLY) RESEARCH LABORATORY AND OFFICE FACILI Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) ENVIRONMETAL HEALTH INVESTIGATIONS, INC. PAR ENVIRONMENTAL CORPORATION 104 Street Address Street Address 655 WEST SHORE TRAIL 313 SPOOK ROCK ROAD City, State, Zip Code City, State, Zip Code SPARTA, NEW JERSEY 07871 SUFFERN, NEW YORK 10901 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number WILLIAM S. KERBEL, CIH 973-729-5649 845-369-7500 1101 Expected State Date (10) Name of OSHA Monitor Sched. Completion Date (11) 11 / 19 /19 11 / 22 /19 AMERISCI LABORATORIES INC #11480 Day Year Day Month Month Year Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 117 EAST 30TH STREET Abatement Performed Outside of Normal Facility Hours - Describe: Other - Describe: MONDAY -FRIDAY 7AM-3:30 PM City, State, Zip Code NEW YORK, NEW YORK 10016 Scope of Work (Check all that apply) Full Containment with Negative Pressure Demolition Renovation Mini Enclo, >3SF OR LF Glovebag Procedure >160 SF OR Non-Friable Procedure Location of Is Location Description of Asbestos-Abatement Type Asbestos-containing normally used Containing Material (ACM) Amount ENCLOSUR REPAIR ENCAPSUL REMOVAL (ie. Thermal systems Material (ACM) solely by (Specify TO BE ABATED Maint/Custodial insulation, surfacing, VAT, SF or LF) in Facility (13) Staff (12) or other miscellaneous) Yes No N/A X 1ST FLOOR ROOM C57, C51B, C61E, VAT & MASTIC 12 SF C65 NJDEP Waste Name of Registered Waste Hauler Cubic Yards of Waste Name of Registered Landfill

FREEHOLD CARTAGE, INC.

FREEHOLD, NEW JERSEY

Completed by (Print or Type)

BENJAMIN SANCHEZ

825 HIGHWAY 33

City, State

Hauler ID No.

Title

15939

DIRECTOR OF OPERATIONS

Disposal Date

11/19-1/30/20

Signature

LYCOMING COUNTY RESOURCE MANAGEMENT SE

447 ALEXANDER DRIVE/ROUTE 15

(TGOMERY , PA 17752

City State

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MERCK SHARP & DOHME								Subchapte	er 8 (Other than K	(-12)						
MENOR OF BUILDING							X	Other (ie. p	orivate & commol	l. bldg	s., hor	nes, e	tc.)			
Street Address							Sc	uare Feet	# of Floors	T		. Age				
126 EAST LINCOLN AVENU	E - BUILDING	80 N						40,000	1			7				
City (5)	County (6)				de (7)			ior if being demol			317312735				
RAHWAY	UNION			(STATE		ONLY)			BORATORY AN		ICE F	ACILI				
Name of Monitoring Firm H	lired by Buildi	ng Owner	(8)		AS	SCM No.			ment Contractor		ON					
ENVIRONMETAL HEALTH I	NVESTIGATIO	NS, INC.				104			MENTAL CORPO	JHAII	ON					
Street Address								et Address SPOOK RC	OCK BOAD							
655 WEST SHORE TRAIL								, State, Zip				75.7	_			
City, State, Zip Code	SPARTA, NEW	JERSEY	07871				SUF	FERN. NEV	EW YORK 10901							
Project Manager for Monitori			Number				phone Num		ense N	lumbe	r					
WILLIAM S. KERBEL, CIH	ing i iiiii	973-					-369-7500	110	1							
Expected State Date (10)		Sched. C	VI-17-17-10-00-00	-7.XX-00	(11)			ne of OSHA								
11 / 19	/19		/	30		/20			ORATORIES IN	0	#1	1480				
Month Day	Year	Month		Day	**	Year										
Occupancy Status During Ab	atement (Che	ck only one	:)				100000000000000000000000000000000000000	et Address								
X Facility Closed/Va	acated During I	Entire Perio	od of Ab	atement			117	EAST 30TH	STREET							
Abatement Perfor					escribe	9:	City	, State, Zip	Code				-			
X Other - Describe:	MONDAY	-FRIDAY	AIVI-3:	30 PIVI		V YORK, NEW Y	ORK	10016								
Scope of Work (Check all the	at apply)					Full Conta	I ainme		ative Pressure							
Demolition	Х	Renovatio	n		X	Mini Encl										
x >3SF OR LF						Glovebag	Proc	edure								
>160 SF OR 2	260 LF					Non-Friat	ole Pr	ocedure								
Location of		Is Loca	tion			iption of As			58 S	A	batem					
Asbestos-contair	ning	normally	used	C		ning Materi			Amount	R	REPAIR	E	E			
Material (ACM		solely				Thermal sy			(Specify	REMOV	PA	CA	5			
TO BE ABATE		Maint/Cu				on, surfaci	_		SF or LF)	IŠ	E	PS	SO			
in Facility (13))	Staff (or oth	er miscella	aneou	is)		1		ENCAPSUL	ENCLOSUR			
		Yes No	N/A				-		-	+	+	-	-			
1ST FLOOR ROOM C57, C	51B, C61E,			VAT & MA	ASTIC				12 SF	X	_	_				
855.277				5,4												
C65		++-	+-				_			1						
									-	+	+-	-	-			
								шилине из								
			+-						 		1	T				
<u>Variation of the same of the </u>								100000000000000000000000000000000000000	-	+	-	-	-			
Name of Registered Waste	Hauler	NJDEP V	Vaste	Cubic Yar	rds of	Waste	Nar	ne of Regist	tered Landfill		001631570667-4					
FREEHOLD CARTAGE, INC		Hauler ID	No.		5				OUNTY RESOUR		ANAG	EME	NT SE			
825 HIGHWAY 33		1593							ER DRIVE/ROUT	E 15						
City, State	St.			Disposal			City	, State	V DA 47750							
FREEHOLD, NEW JERSEY				11/19-1/3		oture	MAIN	IN / GOIVIER	Y , PA 17752 Da	te						
Completed by (Print or Type BENJAMIN SANCHEZ	Title	e ECTOR O	F OPF	RATIONS	Sign	ature /	/	\wedge / \setminus	,	il	-7	-19	F.			
DEMONING SAMONEZ	IDIN	20.01.0				10		1 1/			-	-				

Completed By (Print or Type) Constantine Vivian

Title President Bronx, NY, 10474

Signature

Date 11/23/2019

149 Midland Boulevard

							Γ	ME	C I	E	7	// Pr	int Fo	
CK2192	1	NOTIF (P	ICATION	ate of Nev OF ASBI to NJAC	v Jersey ESTOS ABA 8:60 and 12:1	EMEI 20)	NT		NOV		20	110		
Date of Notification (1) 11-14-19	44			f Building Builders	Owner/Operal	tor (2)	8		MUV	C) (113		
Agencies Notified Type Notification EPA Initial			Street A	ddress Iden Ct.		ASBESTOS CONTROL & LIGENSING								
DEP Amended Amendment			100000000000000000000000000000000000000	ate, Zip Co n, NJ 088							+			
Emergency justification) DCA Cancellation				f Contact ndo Luis			Telephone Number (908) 296-3758							
			FAC	ILITY INFO	RMATION									
Name of Facility Where Abatement is Takir Private Home	ng Place (3	3)				Ту	pe of Facility (4							
Street Address							Subchapter	8 (Other tha		build	dings,	home	es,	
City (5) Elizabeth						Sq	etc.) quare Feet	# of Floo	ors	В	ldg. A	ge		
County (6) Union				Code (7) USE ONLY)		Cu	ırrent Use (Prid	or if being de	emolishe	d)				
Name of Monitoring Firm Hired by Building N/A	Owner (8)		ASCN	ЛNo.			Abatement Con ontracting L	CONTRACTOR CONTRACTOR						
Street Address					dress ast Grand St	d St.								
City, State, Zip Code							e, Zip Code th, NJ 07201	1	-1					
Project Manager for Monitoring Firm			Telepho	ne No.	1000000	phone	e No. 6-9603	1000000	ense No. 206					
Start Date (10) 11-15-19	Schedule 11-16-		npletion	Date (11)			OSHA Monitor ontracting L	LC						
Occupancy Status During Abatement (Chec	ck Only Or	ne)			1000	et Ado								
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe:					City	State	ast Grand St , Zip Code						-	
Scope of Work (Check All That Apply)						Elizabeth, NJ 07201								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit				Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure								
Location of		Locat			Danadati	\$20000 CONTRACTOR STATE 1900			- Triduic	Abatem Type		ment		
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	d Sole intena todial ((12)	nce/		Descripti tos Containing thermal syste surfacing, \ other miscel	Mate ms ins /AT, o	sulation,	Amous (Speci SF or L	fy	Removal	Repair	Encapsulate	Enclosure	
	Yes	No	N/A							_		ate	e)	
Basement	Basement					lation	n	10 LF	F :	K				
Name of Registered Waste Hauler		IN	IJDEP W	/aste	Cubic Yards	3	Name of F	Registered I	Landfill					
Delfa Contracting LLC	H	lauler ID 35240		of Waste 1	Vaste Tullytown Resource Recovery Fa				acili	ly				
City, State Elizabeth, NJ					Disposal Da 11-19-19		City, State Tullytow							
Completed by Jaime Delgado	Title Proj.	Mana	ager.		Signate	pnature Date 11-14-19								

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

Inv/10332

(Pursuant to/NJAC \$ 60 and 12:120)

CIC 8035

Date of Notification (1)		- Car	5	Name of	Building 6	Dwnet/Ope	erato	r (2)									
November 2	, 2019	Ton.	4	2 FP	UL	NRG I	Ren	na, LLC	MEC	E	n n	/ IE					
Acception Notified I To CALL	~			/				,	101 6	E	UV	15	In				
Agencies Notified Type of Noti				Street Ac	idress	101.01		. ,,,	13								
	itial Notific					121 C	han	npion Way		_	0 020200						
	mended No			City, Stat	te, Zip Coo	ie			UL NOV	26	201	9—	11-1				
				2000 4 (\$100000		Canonsburg, PA 15317											
	nergency (i stification)	nciuding						-									
I DCA	incellation			Name of				1	Telephone Sumberos CONTROL &								
[] ~	arcenation				Peter E	3. Gallaro	dy	L	724-597-8025\G								
			FACII	ITY IN	FORMA	TION							-				
Name of Facility Where Abatement is	Taking Plac	e (3)	111011	211 1 1111	Oldvin	11014	Т	ype of Facility (4)									
Former JCP8			ilbert G	eneratin	σ Station	,		γρε 01 1 acinty (4)									
				, on or arm	S Station			L J		ool (k-12) schapter 8 (other than k-12)							
Street Address					~	7/		[x]	Other (i.e., priva								
415 Riegelsv	lle Road			128	X47	\ \ \		[x]	buildings, home		Jiiiiiei	iai					
City	Coun	tv (6)		County Co	nde (7)		8	quare feet	# of Floors		g. Age						
@1 *	00000	· j (v)		(STATE U		Y)	3	240,000 sf	5	Biu)+/-					
Riegelsville	War	ren						urrent Use (Prior if	_	n n	00	11/-					
8	,,,,,,,	On			•				Steam Plant	9							
Name of Monitoring Firm Hired by Bu	Iding Own	er (8)		ASCM No)	Name of	Aba	atement Contractor									
Environment				0045		1144110 01	1100		Abatement Ser	vices	LLC						
Street Address				00.10		Street Ad	ddres		ribatoment ber	11005	, DDC						
64 Broad Str	et								noolhouse Road	d							
City, State, Zip Code						City, Stat	te. Z										
Matawan, NJ	07747					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Township, NJ	0883	1						
Project Manager for Monitoring Firm		Telephone	Number			Telephone Number License Number											
Tom Geiger		732-290-	2217		- 1	732-60:			00714								
Scheduled Start Date (10)		Scheduled (Completio	on Date (1)	1)	Name of	OSI	HA Monitor									
12/2/19		12/7/1	9					Enviror	nmental Tactics	s, Inc.							
Occupancy Status During Abatement (Street Ad	ddres	SS									
[] Facility Closed/	acated Dur	ing Entire Pe	eriod of A	batement				64 Broa	nd Street								
[] Abatement Perfo	rmed Outsi	de of Norma	l Facility	Hours		City Stat	h. 7	in Code									
[X] Other – Describe	Exterio	or				City, Stat	ie, Z	0.7 D (-0.00 000-004	n, NJ 07747								
Cleanup								Matawa	III, NJ 07747								
Scope of Work (Check all that apply)						[]		Full Containme	ent with Negative I	ressure	е						
						[]		Mini-Enclosure	:								
[] >3 sf or ≥3 lf		[X]	Renova	ation		[]		Glovebag Proce	edure								
[X] ≥160 sf or ≥260	f	[]] Den	nolition		[]	X]	(Other) Exterio	r Debris Clean-up								
	T						_										
										Abat	ement	Гуре					
a a a		Is Location				Description				R	R	Е	Е				
Location of	l N	lormally us				estos-Con			Amount	E	E	N	N				
Asbestos-Containing Material	1	Solely by				aterial (A			(Specify SF	М	P	С	C				
(ACM) TO BE ABATED	Main	tenance/Cu Staff	stodial			thermal s			or LF)	0	A	Α	L				
in facility					ınsu	lation, sur		ing,		v	I	P	0				
(13)		(12)			atha	VAT, or r miscella				F & 1	R	S U	S				
(13)	YES	NO	N/A		otile	i illiscella	шео	ous)	†	A		L	R				
	ILS	NO	N/A							L		E	E				
Exterior grounds			X	Paint c	hips				1,000 SF	X			\vdash				
					1				1,000 01		_		+-				
		-															
					No. of Particular Con-												
Name of Registered Waste Hauler	Hauler I	D No.	Cubic Yar	ds of Waste	e T	Name of Register	ed Landfill										
Freehold Carting			3693	AND THE RESERVE AND ADDRESS OF THE PARTY OF	1			GROWS	A STATE OF THE STA								
City, State			Disposa	al Date		City, Sta	ite										
Trenton, NJ			12/10/			Morrisville, PA											
Completed by (Print or Type)	Title	141 (144,000)		Signatur	e					Date							
Dominick Tringali	iber	Domi	nich T	ringali	Ĺ			11/2	21/19								
	u anhanta	. 1:	. 50	1													

10.14	10002	2														
Inv#	TO A T) N	OTIF		TION		BEST	OS ABAT		NEC		W		1.00		
JC 1894	FAI			(Pui	rsuani	to NJA	C 8:6	0 and 5:16) 115	N.			1			
Date of Notification (1)	22 /	19	_					er/Operator (2 Developm	2.1	Nov	4 6 8	2019		A STATE OF THE STA		
Agencies Notified ☑ EPA	Type Notifica	tion				reet Address 2 Broad Street, Suite 305										
□ DOLWD	☐ Amended			-		tate, Zip C				Marin Company Services Self-	FRANCE CONTRACTOR		factor at			
⊠ DOH	Amendme		udina.	1		omfield, I		003								
DCA (NJAC 5:23-8)	☐ Emergeno justificatio		aing	t		of Contact				Telephone Nu	umber			\neg		
* Decourse sections as *	☐ Cancellati				War	ren Spra	ke			908-670-5	711					
					FAC	ILITY IN	FOR	MATION								
Name of Facility Where A	Abatement is T	aking P	Place ((3)	1 1011120110		1941-1942		Type of Facility	(4)						
Commercial									School (K-12							
Street Address 6 loom held 610-612 Avenue									☐ Subchapter 3 ☐ Other (i.e., p homes, etc.)	rivate and comr	-12) mercial bu	ildings	S ,			
City (5) -									Square Feet	# of Floors	BI	dg. Ag	е			
Bloomfield, NJ																
County (6)					Count	ty Code (7)	(STAT	E USE ONLY)	Current Use (Pr	ior if being dem	olished)					
Essex																
Name of Monitoring Firm	Hired by Build	ing Ow	mer (8	3) /	ASCM N	No.	Nam	e of Abateme	ent Contractor (9)							
Mark Jovic Consult	ing LLC						AL	L PRO MA	NAGEMENT LLC							
Street Address							60500	et Address								
87 Main Street, Sui	te A						4855	Outwater I								
City, State, Zip Code	7005							State, Zip Co								
Lincoln Park, NJ 0				T-1-				rfield, NJ	07026	111						
Project Manager for Mon Mark Jovic	itoring Firm				phone 1 3-650-		and a	ohone No. 3-928-4888		License No.	•3					
Start Date (10)	To	chedule	ed Co				100	e of OSHA M		1100				_		
12/02/	19	01	_ /	06	_ / _	Section 2	-		NAGEMENT L	LC						
Occupancy Status During								et Address								
□ Facility Closed/Vacate □ Abatement Performed						oribo	10,000	Outwater I								
Time of Abatement: _							327	State, Zip Co arfield, NJ								
Scope of Work (Check a	I that apply)							П г. II О	Lainers and width Nin							
☐ ≥3 sf or ≥3 if ☑ ≥160 sf or ≥260 if		-	☐ Rer					☐ Mini-Enc ☐ Glovebag	g Procedure							
			le	Locat	ion			M Non-Exe	mpted (*) and No	n-Friable Proce			ont To			
Location	of		N	ormal	lly			Description of	of			ateme		1		
Asbestos-Containing		1)		d Sole ntena	ely by	Asbe	stos C	ontaining Ma	iterial (ACM)	Amount	Removal	Repair	Encapsulate	Enclosure		
TO BE ABA		İ		odial S	Staff?	(i.e		mal systems irfacing, VAT		(Specify SF or LF)	ova	Ŧ	psu	Sur		
(13)		-	Yes	(12)	NI/A		oth	er miscellane	ous)				late	e		
Lower Roof	No	N/A	Flashin	g Sea	aler		170 LF									
Upper Roof		1				Flashin	a Se	aler		280 LF						
Basement					Insulation		6 LF		+-							
				7								1				
Name of Registered Was	eta Haules				JDEP \	Masta	Cubi	ic Yards of	Name of Dog	stered Landfill			П			
Century Waste, LL				1000	lauler II		Was	te	Fairless L							
City, State					32797	7		s Needed osal Date	City, State	with the same				_		
Elizabeth, NJ							1000000	BD	Morrisville	e PA						
Completed By (Print or	Tyno)	Title					1	Signature	MOTTISVIII	-,	Date					
Allen Monchik	1he)		oiect	Man	ager				Marchi	6	11/22	/10				

Inv# 110	292						, white					Pri	nt F
UK837	PAID		ATION	ate of New Jerse I OF ASBESTOS to NJAC 8:60 and	ABATE		The second of th		GI		W	E	Secretary of the second
Date of Notification (1) 11/22/2019				f Building Owner/C eline Babernits		(2)	A CASA	2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	VOV	2 6	2019)	
Agencies Notified Type Noti		St	reet A	ddress				1	 Ero:			· · · · · · · · · · · · · · · · · · ·	
DEP Ame	nded ndment #			ate, Zip Code tainside,NJ,070	092		i securit		LICE	Kell	G.	ora Co	na 1754
✓ DOH justif	rgency (including ication) cellation			f Contact Goydish				Teleph	none Nu	mber			
Name of Facility Where Abatement	in Toking Diago (0)		FACI	LITY INFORMATI	ON	-							
Private House	is raking Place (3))					Facility (4	5					
Street Address						St	chool (K-1) ubchapter ther (i.e. p	8 (Other t			dings	home	es,
City (5) Mountainside	The state of the s					Square N/A		# of FI	oors		Bldg. A	Age	
County (6) UNION				Code (7) USE ONLY)			Use (Prio		demolis	hed)			
Name of Monitoring Firm Hired by B N/A	uilding Owner (8)	T	ASCN	I No.	Name EHV	of Abate V ABAT	ment Con EMENT	tractor (9) LLC					
Street Address						Address	IN STR	EET					
City, State, Zip Code						tate, Zip ERSON	Code I,NJ,075	524					
Project Manager for Monitoring Firm	1	Те	lepho	ne No.		one No. 333-51	44	100000	icense N 1274	lo.			
Start Date (10) 12/03/2019	Schedule 12/04/2		etion I	Date (11)		of OSHA ABAT	Monitor EMENT	LLC					
Occupancy Status During Abatemen	nt (Check Only One	e)				Address							
Facility Closed/Vacated During Abatement Performed Outside	Entire Period of All of Normal Facility	batemer Hours	nt		City, S	tate, Zip			12000	11			
Other – Describe: Scope of Work (Check All That Appl					PAT	ERSON	I,NJ,075	524					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	✓ Re	enovatio emolition			¥	Mini- Glove	Containme Enclosure ebag Proc Exempted	edure				e	
		Location										ement pe	
Location of Asbestos-Containing Material (A	CM) Used	ormally Solely I		Des Asbestos Cont	scription		ACM)	Amo	unt	-	Ι΄,		
TO BE ABATED In Facility (13)	Mair	ntenance odial Star (12)		(i.e. thermal surface		s insulatio T, or		(Spec	cify	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A							1		ate	е
Basement		х		Pipe	Insulat	ion		60 L	F	Х			
										-			
										-			

NJDEP Waste Hauler ID No. 0037095

Title Project Manager

Cubic Yards

Disposal Date TBD

Signature

of Waste N/A

Completed by Victor Espiritu

City, State PATERSON,NJ

Name of Registered Waste Hauler

EHW ABATEMENT LLC

Date 11/22/2019

Name of Registered Landfill

TRI STATE transfer

City, State Bronx,NY

IN#	-1629		NOTI	FICATIO	state of New	STOS	ABATE	MENT	-		EC	E		P	int-E
Date of Notification (1)	O PAI				of Building C				PARCE OF THE PARCE	particular and the	NOV	2 6	201	0	The Property of the Control of the C
11/22/2019 Agencies Notified	Tona Nadisani			N.J.I.	Т			- ,-/	Library, m.	Ì		V	-0	v	i la
	Type Notification	1			Address ersity Heig	ghts			Total Control of the control of the	/	SAESTO UC	S OL ENSI	INTR	ÖŁ	t A
DEP DOL	Amended Amendmen				tate, Zip Coo ark,NJ,071						Control to the second or second		A STATE OF THE	***********	
DOH DCA	Emergency justification Cancellatio)	3		of Contact Miller						lephone Nu 73-596-55				
Name of English Where	Abote	5/	•	FAC	ILITY INFO	RMAT	ION								
Name of Facility Where Tiernan Hall	Abatement is Taki	ng Place ((3)					Туре	of Facility						
Street Address 161 Warren Street									School (K- Subchapte Other (i.e. etc.)	er 8 (Oth	er than K-1 & commerc	2) ial bui	ldings	hom	es,
City (5) Newark						*******			are Feet	# o	f Floors A		Bldg. A	ge	
County (6) Essex					Code (7) USE ONLY)			Curre	ent Use (P	rior if bei	ing demolis	hed)			
Name of Monitoring Firm N/A	Hired by Building	Owner (8)	ASCI	M No.		Name EHV	of Aba	atement Co	ontractor IT LLC	(9)				
Street Address							Street	Addre							
City, State, Zip Code							City, S	tate, Z	Zip Code DN,NJ,07						
Project Manager for Mor	nitoring Firm			Telepho	one No.		Teleph			7524	License N	0	-		
Start Date (10)		Schedul	ed Co	moletion	Date (11)		973-	333-5		-	01274	· · · · · · · · · · · · · · · · · · ·			
12/02/2019 Occupancy Status During	a Abatamant (Char	12/03/	2019				EHW	/ ABA	TEMEN						
Facility Closed/Vac	ated During Entire	Period of	Δhator	nent			Street 89 F		ss KLIN STI	REET					
Abatement Perform Other – Describe:		nal Facility	y Hour	s		_ [ip Code DN,NJ,07	7524					
Scope of Work (Check A	ll That Apply)														
≥3 sf or ≥3 if ≥160 sf or ≥260 if			Renova Demoli	ation tion				Mir	ni-Enclosur ovebag Pro	re cedure	Negative F				
		Is	Locat	ion			Laines	110	LACITIFIC	u () and	a reon-i riab	1	Abate	ment	
Location Asbestos-Containing	of Material (ACM)	Use	Norma ed Sole	ly by	Ashasta	Des	cription	of	(4.04.0)		rescription of a	-	Ту	oe	
TO BE AB/ In Facili (13)	ATED		intena todial ((12)			ermal : surfac	systems sing, VAT siscelland	insula T, or	(ACIVI)	(S	nount pecify or LF)	Remova	Repair	Encapsulate	Enclosure
ROOM 3	320	Yes	No	N/A	TE	RANS	ITE PA	NFI		ΔΙ	OSF	X		ê	Φ
												Α			-
Name of Registered Was EHW ABATEMENT I			H	JDEP W lauler ID 037095	No.	Cubic Yof Was					red Landfill RANSFE	ll R			
City, State PATERSON,NJ						Dispose TBD	al Date	/	City, Stat			-			
Completed by Victor Espiritu		Title Proje	ct Ma	anager		Sig	ghature	le	11/	M	Dat 11	e /22/2	019		-

Inv# 16220)													Pr	int F
CK2423 PAI			ICATIO		w Jersey ESTOS AE 8:60 and 1			т		E (E		V		S U.S.
Date of Notification (1) 11/22/19				of Building a Parhar	Owner/Ope	erator	(2)		A COLUMN TO THE PARTY OF THE PA	N(OV 2	6	20	19	20100000
Agencies Notified Type Notification	1			Address							-	V		16.	-
EPA Initial Amended Amendment		_		ate, Zip Co Orange,	ode NJ 0701	7			Control of tests	7.00E	ETOS LIGE			407/	1245 14 124
DOH justification DCA Cancellatio)	İ		of Contact a Parhar	m				Te	lephone					
			FAC	ILITY INFO	ORMATION	V					===-				
Name of Facility Where Abatement is Taki Residential Home	ng Place (3)					Тур	e of Facility							
Street Address							×	School (K- Subchapte Other (i.e. etc.)	r 8 (Oth	er than h & comme	K-12) ercial b	uildir	ngs,	home	es,
City (5) East Orange							Squ 170	are Feet	# 0	f Floors			g. A +/-	ge	
County (6) Essex				Code (7) USE ONLY)	_		rent Use (Pr sidential I		ing demo	olished)			
Name of Monitoring Firm Hired by Building Project Manager	Owner (8)		ASC	M No.				atement Co s Abatem		(9)					
Street Address					0.00	Street 280		ess lidland Av	re.						
City, State, Zip Code					1000	1949 mm 1940		Zip Code Brook, NJ	07663						
Project Manager for Monitoring Firm			Telepho	one No.		eleph		No. 3184		Licens 0130					
Start Date (10) 11/24/19	Schedul 11/26/		mpletion	Date (11)	N	lame	of OS	SHA Monitor							
Occupancy Status During Abatement (Che	ck Only O	ne)			S	Street	Addre	ess							
Facility Closed/Vacated During Entire Abatement Performed Outside of Non Other – Describe:					C	City, S	tate,	Zip Code				<u> </u>			
Scope of Work (Check All That Apply)															_
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demoli				×	M G	ull Containm ini-Enclosur lovebag Pro on-Exempte	e cedure						
	Is	Locat	ion				,,	on Exemple	d () an	u Non-i	Table I			ment	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	Normal ed Sole intena todial ((12)	ely by nce/		Descritos Contain thermal sy surfacing other mise	ning M stems g, VA	lateria s insu T, or	lation,	(5	mount Specify or LF)	Noniova,	Domo	Typ	e Encapsulate	Enclosure
(4-10-4-1)	Yes	No	N/A								2	2	7	late	re
Basement		Х			Pipe	Wra	р		1	9 LF	X				
												+	+		
												1			
lame of Registered Waste Hauler Il Stages Abatement		H	IJDEP W lauler ID 036592	No.	Cubic Ya of Waste 1 YD			Name of Grand	71101771 - 12200			and	fill		
Sity, State Saddle Brook, NJ					Disposal TBD	Date		City, Sta		A					
Completed by	Title				Sign	nature			//		Date				

Richard Cristofol

President

11/22/19

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CK42(00 P/	AJD)		ICATION	N OF ASB	ESTO	SABATE		NT		E C		Ŵ	En La	The state of the s
Date of Notification (1) 11/21/19				Name o	of Building PMC	Owne	r/Operator	r (2)	0 p 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		NOV	26	2019		
Agencies Notified EPA	Type Notification			Street A	Address est State	St.,	9th Floo	or	Real Property of the Control of the	į,	to you was an a		- u.v/ a.		130%
DEP X DOL	Initial Amended Amendment	:#		City, Sta	ate, Zip Co	ode			- E	- Li	LK	28.730 ÆKSI		18 /4 - 18-16 m	A -124 m -
DOH DCA	Emergency justification) Cancellation			Name o	of Contact a Bruno					100	lephone 1		8	-	
					ILITY INF		TION			- 00	75-455-0	0140			
Name of Facility Where A	Abatement is Takir	g Place (3)			LLI I IIVI	OIMIA	HON	Ty	pe of Facility	(4)			11000000		-
Former Residence,	BLUE ACRES	DEMOLI	TIOI	N				Г	School (K-	12)					
Street Address 1644 Essex Street								×	Subchapte	r 8 (Oth	er than K & comme	(-12) ercial bu	ıilding	s, hom	ies,
City (5) Rahway, NJ 07065								10000	uare Feet 800	2 '	f Floors 1/2		Bidg. 50+	Age	
County (6) Union County					Code (7) USE ONLY)		Cı	rrent Use (Proandoned,	ior if be	ing demo	lished)		(4) S ₂	118825
Name of Monitoring Firm n/a	Hired by Building	Owner (8)		ASCN	M No.	11		of A	Abatement Co zi Group, II	ntractor					
Street Address							Street	Add	7.00						
City, State, Zip Code							City, S	State	, Zip Code n, NJ 0740						
Project Manager for Monit	toring Firm		T	Telepho	ne No.		Teleph	none	No.		License		- 13111		
Start Date (10) 11/22/19		Scheduled		pletion !	Date (11)		Name	of C	SHA Monitor		01228	-			
VI 10 (10 10 10 10 10 10 10 10 10 10 10 10 10 1	Ab etc t (Ob	11/25/19							zi Group, Ir	ic.					
Occupancy Status During		are constituted because					Street 135 k	2000	ress nelon Road						
Facility Closed/Vaca Abatement Performe Other – Describe:	ted During Entire I ed Outside of Norm	Period of Ab	atem	ent			City, S	tate	, Zip Code n, NJ 0740					-	
Scope of Work (Check All	That Apply)					-	Killit	CIOI	1, 140 0740						
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		_	novat moliti				×		Full Containm Mini-Enclosur Glovebag Pro	e cedure					
		lal	ocatio				111	-	Non-Exempte	d (*) an	a Non-Fri	able Pi	245 070 400	re emen	
Location	of	17 SACTOR SACTOR	rmall	500		D	escription	o f						уре	`]
Asbestos-Containing N	Material (ACM)	Used Main			Asbest	tos Co	ntaining M	late	rial (ACM)	А	mount			Е	
TO BE ABA		Custo	dial S	200000	(i.e.	therma	al systems acing, VA	ins T. o	ulation,		Specify or LF)	Ren	Re	ncar	Encl
(13)		-	(12) No	N/A			miscellan				or Er)	Removal	Repair	Encapsulate	Enclosure
Entire House (RAC	CM) per spec			X	0	ther	miscella	nec	ous	16	00 LF	X			
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Yannuzzi Group, Inc.			Ha	auler ID 467	1677 Co.T. Co.	of Wa			Blyth La		ieu Laiiu	1111			
City, State Kinnelon, NJ			Children of the			Dispo 11/2	osal Date 5/19		City, Stat New Ph		hia, PA				
Completed by Rafael Nunez		Title Project	Mai	nager			Signature		Jany	<u>.</u>		Date 11/21	19		

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

TWA 1000	PAID	NOT	ificatio	State of New ON OF ASBE nt to NJAC 8:	STOS ABATI	EMENT	, pe	4551	Ch	ieck #	12	314
Date of Notification;(1)			M	of Building O	wner/Operato	ir (2)	Carlot Herry Assessment	DEC) [<u>W</u> .	
Agencies Notified Type	Notification Initial		Street	Address /	MACAI		ur	BLUDIO	V 2	6	2019	
DOL D	Amended Amendment # Emergency (includi justification)	ng	N	State, Zip Code Of Contact		TO	7430	Telephone Nu	108		(, (C.)	<u>. j</u>
DCA DCA	Cancellation			AUTER	_ 0.		1.	973-4	umbe K-	C-12-	3-4-	
Name of Facility (Many Alex)			FA	CILITY INFOR	MATION	The state of the s		115-11	9	5.30		
Name of Facility Where Abaten	nent is Taking Place	(3)				Туре	of Facility (4)		- Contraction			
Street Address 555 MACAG						X S	ichool (K-12) Subchapter 8 Other (i.e. priv tc.)	(Other than K-1 rate & commerc	i2) dal bu	ulldings	s, hom	es,
MAHWAH		-			·	120	Feet)	# of Floors		Bidg.	Age	
County (6) BBNGSU			County (STATE	Code (7) USE ONLY)		Curren	nt Use (Prior i	f being demolis	hed)			
Name of Monitoring Firm Hired	by Building Owner (8)	ASC	M No.	Name A. M	of Abate ac Cor	ement Contra	ctor (9) C.			-	
Street Address						Address Vreeia	nd Ave.	***************************************			**********	\neg
City, State, Zip Code					City, S	tate, Zip		32				-
Project Manager for Monitoring	Firm .		Telepho	one No.	Teleph	one No.		License N	lo.	-		\dashv
Start Date (10) / / > / > / / 9	Schedu	Jed Cor	mpletion	Date (11)	Name	of OSH/	A Monitor	Servicer In		-	-	\dashv
Occupancy Status During Abate	ment (Check Only C	One)			-	Address		1 OCI AICEL III	U.	-		
Facility Closed/Vacated Du Abatement Performed Outs	ring Entire Period of	Abaten	nent		280 H	luyler	Street	ALCONO SYNTHESIS OF THE				
Other - Describe:		ty riour	5			tate, Zip ensacl	Code k, NJ 0760	6			*****************************	
Scope of Work (Check All That A ≥3 sf or ≥3 if ≥160 sf or ≥260 if		Renova	itlon			Full C	Containment	with Negative P	mee	ım.		\neg
2 5 100 St 01 2200 IT		Demolit	ion			Wini-	Enclosure ebag Procedu					
		s Locati	on			140(1-	Exempled ()	BIN NOTHTHED	I Pro		ement	
Location of	F 0.000	Normal ed Sole	ly ly hy		Description	of					pe	
Asbestos-Containing Materia TO BE ABATED In Facility (13)	Cus	aintensi stodial 8 (12)	nce/	(I.e. the	Containing Manal systems mai systems urfacing, VAT ter miscelland	aterial (A insulatio : or	AGM) on,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
LOCKER ROOMS	Yes	No	N/A	Cit	16 DOT	- (-					ř	e e
OUTSIDE WINDOW	2		X	-	92126	-dance makes better	-	435 SF 1400 ZF	-			_
									1		+	-
Name of Registered Waste Haule	10	1	I I I									
lewark Carting Inc.	п	H	JDEP W auler ID 509		Vaste	1		stered Landfill tral Sanitary	Lan	dfill		
City, State Newark, NJ 07105		100			Sposal Date	-	City, State			eristi		-
Completed by R. McDonald	Title Pres	ident			Signature	B	en Argyl,	PA 08072	e /	j	<u> </u>	-
					1	A 20 8	a. and	1	110	-1/1	7	

State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7) RESUME 11/25/2019

Date of Notification (1) 1 1 1 2 2 7 1 9	D & G p(0]. #.	-	PAJ			RESUME '	11/25/2	019	Leader	Check #	9758		Minney or years		error options
1 1 2 2 1 3	Date of Notification	(1)	115	15 11		-10(2)			# d 114	STE	GE	1	W	- L	100
□ DEP □ Initial □ DEP □ Amendment □ DEP			1.1			r/Operator (2)			una di Sees esa ano anto esaasi/arristin		Moral inconstruc	est and	100000	Anna and a	ALL OF THE LOCAL
DEP DOL	~ 1	_	on Str	eet Address					manufacture and the second	li N	OV 2 (5 20)19	A CONTRACTOR OF THE PERSON OF	
DOL Cancellation Name of Contact Deborah Little	☐ DEP	initial initial	Ci	v State Zin	Code					1200000000	and the same	Persona.		1	-
Deborah Little FACILITY INFORMATION	X DOL	★ Amendm	4 1			2					LICENS	ONI Myo	ROL.	Se .	
Deborah Little	₩ DOH			me of Conta	ict					Telephone I	Number				
Name of facility where abatement is taking place (3) Deborah Little	☐ DCA	Cancella	tion	Deborah	Little										
Deborah Little Street Address Street Address County (6)					FACI	LITY INFORM	ATION								
Subchapter 8 (Other than K-12) Subchapter 8 (Other than K-12) Subchapter 8 (Other than K-12) Subchapter 8 (Other than K-12) Other (Private/Commercial Bidgs./Homes, etc.	Name of facility wi	here abatement is	taking plac	ce (3)		****			Type of			Directive.			
Street Address	Deborah Little	Э							-	=	100	nar th	an K_1	2)	
Singal, Armone, etc. Square Feet # of Floors Bidg. Age Curry (State use only) County Code (7) (State use only) County Code (7) (State use only) Current Use (Prior if being demolished) residential County Code (7) Code (7) County Code (7) Code (Street Address													-1	
County (6) County (7) County (8) County (8) County Code (7) Current Use (Prior if being demolished) residential									Squar				Bidg	. Age	e
Name of Monitoring Firm Hired by Bidg. Owner (6) ASCM No. Name of Monitoring Firm Hired by Bidg. Owner (6) ASCM No. Street Address B & G Restoration, Inc.	City (5)		Count	y (6)			Count	y Code (7)							
Name of Monitoring Firm Hired by Bidg. Owner (8) Street Address City, State, Zip Code City, State, Zip Code City, State, Zip Code City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035 Telephone Number Scheduled Start Date (10) 11/25/2019 Cocupancy Status During Abatement (Check only one) Describe: Other-Describe: Demolition Facility closed/vacated during entrie period of abatement. Abatement performed outside of normal facility hours- Describe: Demolition Facility closed/vacated ultrid entrie period of abatement. Location of sabestos-containing material to be abated in facility (13) Described in facility (14) Described in facility (15) Described in facility (16) Described in facility (17) Described in facility (18) Described in facility (18) Described in facility (19) Described in facility (Kearny, NJ (7032	Hud	son			(State	use only)			r if being	demo	olished	1)	
Street Address Street Address 105 Ryses no Road 105 Ryses n	Name of Monitorin	ng Firm Hired by E	Bidg. Owne	r (8)		ASCM No.	111	Name of Abatement							_
Topy, State, Zip Code City, State, Zip Code			1 7 2			20 53 22 4 - 2022 - 2022		B & G Restorat	tion, Inc						
City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035 Telephone Number Scheduled Start Date (10) 11/25/2019 11/26/2019 Cocupancy Status During Abatement (Check only one) Facility closed/vacated during entire period of abatement. Abatement performed outside of normal facility hours- Describe: 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 Lincoln Park, NJ 07035 Telephone Number (973)696-6869 Name of OSHA Monitor B & G Restoration, Inc. Street Address Lincoln Park, NJ 07035 Telephone Number (973)696-6869 Name of OSHA Monitor B & G Restoration, Inc. Street Address Lincoln Park, NJ 07035 Telephone Number (973)696-6869 Name of OSHA Monitor B & G Restoration, Inc. Street Address Lincoln Park, NJ 07035 Telephone Number (973)696-6869 Name of OSHA Monitor Street Address Name of OSHA Monitor Street Address Name of OSHA Monitor Street Address Lincoln Park, NJ 07035 Telephone Number (973)696-6869 Name of OSHA Monitor Street Address Name of OSHA Monitor Street Address Name of OSHA Monitor Street Address Name of OSHA Monitor Street Address Name of OSHA Monitor Street Address Name of OSHA Monitor Street Address Name of OSHA Monitor Street Address Name of OSHA Monitor Non-friable procedure Description of asbestos-containing Mariel (ACM)	Street Address						7		Road						
Completed Manager for Monitoring Firm	City, State, Zip Coo	de								Service Services		SUGARA P		-	-
Scheduled Start Date (10) 11/25/2019 Cocupancy Status During Abatement (Check only one) Facility closed/vacated during entire period of abatement. Abatement performed outside of normal facility hours- Describe: Other-Describe: Other-Describe: Location of asbestos-containing material to be abated in facility (13) Description of asbestos-containing material to be abated in facility (13) Description of asbestos-containing material to be abated in facility (13) Description of asbestos-containing material to be abated in facility (13) Description of asbestos-containing material to be abated in facility (13) Description of asbestos-containing material to be abated in facility (13) Description of asbestos-containing material to be abated in facility (13) Description of asbestos-containing material (ACM) Description of asbestos-containing material to be abated in facility (13) Description of asbestos-containing material (ACM) Description of asbestos-containin								Lincoln Park,	NJ 070						
Scheduled Start Date (10) 11/25/2019 11/25/2019 11/25/2019 11/26/2019 Cocupancy Status During Abatement (Check only one) Facility closed/vacated during entire period of abatement.	Project Manager fo	or Monitoring Firm		Pho	ne Numb	er		이 경우를 하는 것이 없었다. 이 경우를 하는 것이 없는 것이 없는 것이 없는 것이다.	39				er		
11/25/2019 11/26/2019 Cocupancy Status During Abatement (Check only one) Facility closed/vacated during entire period of abatement. Abatement performed outside of normal facility hours-Describe: City, State, Zip Code Lincoln Park, NJ 07035 City, State City, State Completed by (Print or Type) Title Signature Completed by (Print or Type) Title Signature	Scheduled Start D	ate (10)	Sched	Completion	Date (1	1)	ī								
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) Demolition Full Containment w/negative pressure Full Containment w/negative p					- 17.72	25%			tion, inc	,					_
Abatement performed outside of normal facility hours—Describe: ☐ Cither-Describe: ☐ Cother-Describe: ☐ Demolition	Occupancy Status	During Abatemer	nt (Check o	nly one)				105 Ryerson F	Road					000	
Cither-Describe: Scope of Work (check all that apply) □ Demolition □ Renovation □ Full Containment w/negative pressure □ Non-friable procedure □ Non-friable procedur								City, State, Zip Code	•						
Scope of Work (check all that apply) Demolition Renovation Solution of asbestos-containing material to be abated in facility (13) Description of asbestos-containing material to be abated on facility (13) Description of asbestos-containing material (ACM) Specify SF or 0 a a c C C C LF) Description of asbestos-containing material (ACM) Description of asbestos-containing material (ACM) Specify SF or 0 a a c C C C LF) Description of asbestos-containing material (ACM) Specify SF or 0 a a c C C C C LF) Description of asbestos-containing material (ACM) Specify SF or 0 a a c C C C C C C C C C C C C C C C C C		ribe:						Lincoln Park, I	NJ 0703	5					
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aspestos-containing material to be abated in facility (13) Description of aspestos-containing material to be abated in facility (13) Yes No N/A A N/A N										A		14888			1000
abated in facility (13) Yes No N/A Dippe insulation 200 If			1		,			bestos-containing			or	100000000			200
Registered Waste Hauler B & G Restoration, Inc. Disposal Date Lincoln Park, NJ Disposal Date Lincoln Park, NJ Disposal Date Signature Date Date Date Completed by (Print or Type) Title Signature Control of the pipe insulation 200 lf			Yes	No	N/A		Ç/			LF)		٧	i		L
Registered Waste Hauler B & G Restoration, Inc. Disposal Date Lincoln Park, NJ Disposal Date Disposal D	basement				X	pipe insu	lation		2	.00 If		-			
B & G Restoration, Inc. 19563 2 1/2 Grand Central Landfill City, State Lincoln Park, NJ Disposal Date 11/26/2019 Completed by (Print or Type) Title Signature Date								- CUSCAL							
B & G Restoration, Inc. 19563 2 1/2 Grand Central Landfill City, State Lincoln Park, NJ Disposal Date 11/26/2019 Completed by (Print or Type) Title Signature Date												무		<u> </u>	님
B & G Restoration, Inc. 19563 2 1/2 Grand Central Landfill City, State Lincoln Park, NJ Disposal Date 11/26/2019 Completed by (Print or Type) Title Signature Date												片	H	片	H
B & G Restoration, Inc. 19563 2 1/2 Grand Central Landfill City, State Lincoln Park, NJ Disposal Date 11/26/2019 Completed by (Print or Type) Title Signature Date	Pagistared Waste	Hauler	INID	P Hauler II	# 10	Lubic Yards of	Waste	Name of Registere	d Landfill					Ц,	1
Lincoln Park, NJ 11/26/2019 Pen Argyl, PA Completed by (Print or Type) Title Signature O Date	B & G Restor	ation, Inc.		19563		2 1/2		Grand Centra							
Completed by (Print or Type) Title Signature C , CO Date	City, State Lincoln Park,	NJ	•	I	Disposal 1	Date 1/26/2019								v	
	Completed by (Pr	int or Type)		rv/Treasu	rer	Signature	(Gordana Luna				2/20	19		

B & G proj. #: 2019-243

State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7) ON HOLD until further notice Check # N/A

			7	UN	HOLD unt	il furthe	er notice	Check	# IN/A				
Date of Notification	1 (1)	IIN	ame of Build	ling Owne	er/Operator (2))		FRE	r a n	7	مناها دعاده او کارا	garantan yayan Militan ya	7
1 10 1/12 15	1/1191		Deborah I		**			IN EG	EIV		5		4.100
Agencies Notified	Type Notification	on St	reet Address	ŝ							The state of the s		
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☐ DEP	and the second second second second	C	ty, State, Zi	o Code				1	. V CU1	7	1	^	
X DOL	Amendn		Kearny, I		2			la and any	en amerikana ngapo Mga pagang ngapo	No real	s, d	100	
₩ DOH	1	Na	me of Cont	act					e Number		-		
☐ DCA	☐ Cancella	tion	Deborah	Little					- 4 4 . 4		Mark and a second	Y	
	<u> </u>		Deboran										
				FACI	LITY INFORM	IATION		TT	74)				
Name of facility w	here abatement is	s taking pla	ce (3)					Type of Facility (4) I (K - 12)				
Deborah Little	9	Nac						Subch	apter 8 (Othe	er th	an K-	12)	
Street Address							-		(Private/Com	mer	cial		
									# of Floors	Т	Bld	g. Ag	je
City (5)		Cour	ty (6)			Coun	ty Code (7)				1.0-0900		
Kearny, NJ (17032	Hu	dson			(State	e use only)	Current Use (P	rior if being d	emo	olishe	d)	
					400MW		Name of Abatement	residential		_			_
Name of Monitoring	ng Film Hiled by I	siag. Owne	1 (0)		ASCM No.								
Street Address							B & G Restora Street Address	tion, inc.					_
Street Address							105 Ryerson	Road					
City, State, Zip Coo	de						City, State, Zip Code	9					
							Lincoln Park,	NJ 07035					
Project Manager fo	or Monitoring Firm	V	Pho	ne Numb	er		Telephone Number		License Nu		er		
						-	(973)696-686 Name of OSHA Mo		0037	0	_		
Scheduled Start Da	ate (10)	Sched	. Completion	n Date (1	1)		B & G Restora						
ON HOLD	大	12/3	31/2019		armit aminorale		Street Address						
Occupancy Status	During Abatemer	nt (Check o	nly one)				105 Ryerson F	Road					
	ed/vacated during					11	City, State, Zip Code	e					
Abatement p Describe:	erformed outside	of normal	facility hours	š-	- AND THE COLUMN STATE OF		Lianala David	N.I.0700E					
Other-Descr	ibe:					_	Lincoln Park,	NJ U7U35					
Scope of Work (c	heck all that apply	4)				□ w	rap & cut						
Demolition	X	Renovation	n			☐ F	ull Containment w/ne	egative pressure		g pro	ocedu	re	
\times >3 sf or >3	f 🔲	≥160 sf or	≥260 If			X M	lini-enclosure		☐ Non-friat	ole p	госе	lure	
Location of			n normally u		/			NS.		R	R	E	E
asbestos-co		staff(12)	enance/cust	Julai			sbestos-containing	Amount (Specify	SE or	m	p	C	n
material to babated in fa		Yes	No	N/A	material	(ACM)		LF)		0	a	a	C
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Registered Waste	Hauler		EP Hauler II	D# C	ubic Yards of 2 1/2		Name of Registere		(-				
B & G Restora	auon, Inc.		19563	Disposal I			Grand Centra City, State	ai Landiiii		-			
Lincoln Park,	NJ			1:	2/31/2019		Pen Argyl, PA	A			0.03363	,	v
Completed by (Pri		Title			Signature		Gordana Luna		Date	00			
Gordana Lun	а	Secreta	ry/Treasu	rer			Jordana Zuna	5	10/25/	201	9		



	· 6							Check #	# 9764				
Date of Notification	1 (1)	I I Nam	e of Ruild	ing Own	er/Operator (2)								
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Agencies Notified	Type Notificat		et Address							1 11	7	111	
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☐ DCA		R	Rob Edga	ar			- i	Service Laboratory and the Company of the Company o				Secure 1	
				FACI	LITY INFORM	ATION							
Name of facility wh	here abatement i	s taking place	(3)					Type of Facility (4	4) (K - 12)				1-13-X
Rob Edgar								=	apter 8 (Oth	ner th	an K	-12)	
Street Address								Other (Private/Cor	nmer		,	
									Homes, etc	:. ————————————————————————————————————	Ble	dg. Ag	e
City (5)		County	(6)			Cour	nty Code (7)	oquate r cet	# 011 10010			33	
Somerville, N	V.I 07924	Some	rset			(Stat	te use only)	Current Use (Pr	ior if being	dem	olishe	ed)	
Name of Monitorin					ASCM No.	<u> </u>	Name of Abatement	residential					_
realite of Montena	ig i iiii i iii ca by	Diag. Office (-,		ACCIVITIO.		B & G Restorati						
Street Address						$= \parallel$	Street Address			-			
							105 Ryerson R	oad					
City, State, Zip Coo	le						City, State, Zip Code Lincoln Park,	11.07025					
Project Manager fo	r Monitorina Firm		Phor	ne Numb	er		Telephone Number	43 07033	License N	lumb	er		_
Project Manager 10	i Monttoning i ini		1 1101	ic ivains			(973)696-686	9	003				
Scheduled Start Da	ate (10)	Sched. C	ompletion	Date (1	1)		Name of OSHA Moni						Scarce III.
12/06/2019	, ,	12/09/	2019				B & G Restorat	ion, Inc.					
Occupancy Status	During Abatemer	nt (Check only	one)				105 Ryerson R	oad					
X Facility close	d/vacated during	entire period	of abatem				City, State, Zip Code						
Abatement p Describe:	erformed outside	of normal fac	lity hours-	•		_	Lincoln Park, N	1.07035					
Other-Descri								0.000			_		-
Scope of Work (ch Demolition	neck all that apply	y) Renovation					rap & cut ull Containment w/neo	native pressure	Gloveba	a nr	ncedi	IFA	
>3 sf or >3 lf	- Indiana	>160 sf or >26	SO IF			_	lini-enclosure	jauve pressure [Non-fria	77.13			
		Is location no		ed solely	/			<u>`</u>		R	R	E	-
Location of asbestos-cor		by maintena staff(12)			Descripti		sbestos-containing	Amount		e m	e p	n	n
material to be abated in face		Yes	No	N/A	material	(ACM)		(Specify S LF)	r or	0 V	a	a p	L
-b					1 transita h	oord		12 of		e	-	П	
above the boile	er			X	transite be	Jaiu		12 sf 50 lf		X	一	X	H
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3													
						AI.	T						
Registered Waste I B & G Restora			Hauler ID	# 0	ubic Yards of 2	vvaste	Name of Registered Grand Central						
City, State Lincoln Park,				isposal I	Date 2/09/2019		City, State Pen Argyl, PA						
Completed by (Prir		Title			Signature		L		Date			<u> </u>	
Gordana Luna		Secretary/	Treasur	er		(Gordana Luna		11/22	/201	9		

Tau 1102 M			192							_		
INV# 16307	ID		ICATIO	N OF ASE	ew Jersey BESTOS / C 8:60 and	ABATEN	2 2 1 7 4	EGEL	V			and the contract of the contra
Date of Notification (1) 11-22-19					Owner/C			NOV 2 6	2019	And the party of t		The second secon
Agencies Notified Type Notification				Address			a lad ted	1	2010		r seaso.	
EPA Initial Amended		-		ate, Zip C	DESFOR	RD RO	AD	ASBESTOS CO		1 6		i i
➤ DOL Amendmen			(5)	NE, PA			- November of the sales	LICENSIF	10		L.S. of Miller said	
DOH Emergency justification)	8 8	,		of Contact				Telephone Nu				
DCA Cancellation	1			SMITH	ORMATIO	ON		215-356-71	57			
Name of Facility Where Abatement is Takir	g Place (3)	1 70	ILIT I IN	ORMATI	JIN	Type of Facility	(4)				
ENTERPRISE Street Address							School (K		21			
125 N. BLACKHORSE PIKE							Other (i.e.	er 8 (Other than K-1: private & commerci		dings,	hom	es,
City (5)							etc.) Square Feet	# of Floors	Е	ldg. A	ge	
BELLMAWR County (6)				=.	W-		7800	1		/-50		
CAMDEN			(STATE	Code (7) USE ONL)	n	_	VACANT	rior if being demolish	ned)			
Name of Monitoring Firm Hired by Building VERTEX COMPANIES	Owner (8)	ASC	M No.			of Abatement Co PER ENVIRO	ontractor (9) ONMENTAL SEF	RVIC	ΞS		
Street Address 700 TURNER WAY							Address FRALEY ST	REET				
City, State, Zip Code ASTON, PA 19014							ate, Zip Code ADELPHIA, I	PA 19137				
Project Manager for Monitoring Firm			Telepho			Telepho	Commence of the second second	License N	0.			
DON HEIM Start Date (10)	Cabadul			87-0402 Date (11)			33-5155	01166				
12-2-19	12-16-		ipietion	Date (11)			of OSHA Monito					
Occupancy Status During Abatement (Chec	- 8					Street A		2 2				
Facility Closed/Vacated During Entire Abatement Performed Outside of Norm Other – Describe:	Period of nal Facility	Abatem y Hours	ent			City, St	URNER WA					
Scope of Work (Check All That Apply)					_	AST	DN, PA 1901	4				
≥3 sf or ≥3 If ≥160 sf or ≥260 If	-	Renova Demoliti				×××	Mini-Enclosu Glovebag Pro				2	
	Is	Location	on					7 4114 11611 1144		Abat	emen	t
Location of		Normalled Solel				cription (1699		Ty	/pe	
Asbestos-Containing Material (ACM) <u>TO BE ABATED</u>	Ma	intenar todial S	ice/		. thermal s	systems	aterial (ACM) insulation,	Amount (Specify	Re	70	Enc	Ē
In Facility (13)	000	(12)	tuir.			ing, VAT iscellane		SF or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A						<u>n</u>		ate	ге
ROOF			X	FLASI	HING/SI	LVER	FLASHING	430SF	Х			
main floor			х		VAT AN	ID MA	STIC	5,000SF	Х			
MECHANICAL ROOM			Х		VAT AN	ID MA	STIC	40	Х			
OVERHANG			X		TRA	ANSITI		1400	Х			
Name of Registered Waste Hauler		103.55	JDEP Wauler ID		Cubic \		Same and the	Registered Landfill	N.			
SERVICE TRANSPORT GROUP							MINE					
City, State YARDLEY, PA					Dispos	Date	City, Sta	ate DN, OH				
Completed by JENNIFER NIVEN	Title	OF O	PERA	TIONS	Si	gnature			ite,	2	,	B
THE STATE OF THE S	DIIX.		LIVA	TIONS	4	1	<i>J</i>	/	10	1	1	
ASB-41 (R-06-08)						* Do not	use this form for	or asbestos licensur	e exer	npted	activ	ities.

In # 16306												P	rint F
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Date of Notification (1) 11/20/2019	Shuffie C			of Building					NOV	2 5	201	D).	
Agencies Notified Type Notification				Address	GOILAS	ssociai	ion		\$40 A	£ J	ZVI	3	La
EPA Initial				berty Co		oad		***************************************	ZSAEST	08.00	SATE	OL.	ul M
X EPA Initial X DEP X Amended X DOL Amendment	#			tate, Zip C ty Corn		7938		-description		DENS	hiQ_	فالدافة المستقرات	4.50
DOH Emergency (justification) DCA Cancellation	ncluding			of Contact		77000		Te	lephone N	umber			
DCA Cancellation				Tedaldo				5	16-754*9	9463			
Name of Facility Where Abatement is Taking	Place (3	3)	FAC	ILITY INF	-ORMAT	ION	Type of Facili	ty (4)					
Street Address				<i>3</i>)			School (I Subchap Other (i.e etc.)	ter 8 (Oth	ner than K- & commer	12) cial bui	ldings	hom	ies,
City (5) Bernard Township Fair	HII	1/5	_	0	79	3/	Square Feet 1400	# 0	of Floors		Bldg. <i>A</i> 95	\ge	
County (6) Somerset			County	Code (7)	n	<i>-</i> / (Current Use (I		ing demoli		80		
Name of Monitoring Firm Hired by Building C	wner (8)		ASC	M No.		Name	of Abatement 0	Contracto	r (9)				
Envirovision Street Address							ia Contracti	ng, Inc					
20-21 Wagaraw Road							Address Clifton Ave	nue Un	it 365				
City, State, Zip Code Fair Lawn, NJ 07410						City, S	tate, Zip Code on, NJ 07012						
Project Manager for Monitoring Firm		-	Telepho	one No.			one No.	-	License	No.		_	
TBD Start Date (10)	0-11-1	10		36-914		104.50	450-9500		01036				
12/2/2019	12/2/2		npletion	Date (11)	,		of OSHA Monit ia Contractir						
Occupancy Status During Abatement (Check	Only On	e)				Street	Address						
Facility Closed/Vacated During Entire Po Abatement Performed Outside of Norma Other – Describe:	eriod of A al Facility	bater Hour	nent s				Clifton Ave	nue Uni	t 365		.91 		
Scope of Work (Check All That Apply)					_	Clifto	on, NJ 07012	2					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	DESCRIPTION OF THE PARTY OF THE	enova emolii				×		ure rocedure	-				
	0,555,50	Locati								1	Abate	men	t
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Mai	ormal d Sole ntena odial S (12)	ly by nce/		tos Conta thermal surfac		aterial (ACM) insulation, Γ, or	(5	mount Specify or LF)	Remova	Ty Repair	e Encapsulate	Enclosure
	Yes	No	N/A							-		ē	0
Attic		X			Ver	rmiculit	е	10	00 SF	K			
									*				
									**				
Name of Registered Waste Hauler		N	JDEP W	/aste	Cubic \	Yards	Name o	of Registe	red Landfil				
Atlantic Carting LTD		Н	auler ID J641	A707	of Was				al Sanita		ndfill		
City, State		1	00-11	-		al Date	City, St	er constructions		,	2002-201/001		
Wayne, NJ	71.1				TBD	A	Pen A	Argyl, P					
Completed by Adam Vurchio	Title Admii	nistra	ator		Si	griature				ate 1/20/:	2010		
ASB-41 (R-06-08)						Do not	use this form for	or asbest				activit	ies.

IN# 1(0317 PA)		NO.	TIFICAT (Pursu	TION OF ASBESTO ant to NJAC 8:60	SABAT	EMENT 20)	jō,	V'-H	_	/_	, -	,
Date of Notification (1) 11/22/2019			Nam	ne of Building Owne	er/Operato	or (2)	<u></u>	5 7		2	6	
A			Fre	ederick Stewart	роган	J. (2)	l yes	TE	P	E	1 1/	7 E
Agencies Notified Type Notificat	on		Stree	et Address			114	# 15 	6	5	I W	E
EPA X Initial Amended							Service of the servic					
DOL Amended Amendm			City,	State, Zip Code			111	ili A	iOV	26	201	0
Emergen	cy (includ	ling		sey City, NJ 07	307		1 ==			U	ZUI:	J
DCA justification Cancellate	n)		7 20 20 20 20 20 20 20 20 20 20 20 20 20	e of Contact			Te	elephone	Numbe	er	Line by Carron S	er descara d
			Fre					- A - A -			12:11	OLA
Name of Facility Where Abatement is Ta Private home	king Plac	e (3)	FA	ACILITY INFORMA	TION	Type of Facili		and a death and	<u>,</u> ∀ <u></u>	August 1		
Street Address							15 50050					
Street Address		Cartings to				School (Subchap	K-12)	ner than K	40)			
City (E)						Other (i.e	e. private	& comme	rcial b	uildin	as ho	mes
City (5) Jersey City						etc.) Square Feet		of Floors				
County (6)						Oquare 1 eet	# 0	Floors		Bldg	. Age	
Hudson			Count	y Code (7)		Current Use (F	Prior if he	ing demo	iohod)	1		
Name of Monitoring Firm Hired by Building			(STATE	E USE ONLY)			1101 11 00	ing demo	isneu)			
Building 1 mm 1 med by Building) Owner	(8)	ASC	CM No.	Name	of Abatement C	ontractor	(9)				
Street Address					Rem	oval Safety	LLC	. ,				
					10-000000000000000000000000000000000000	Address						
City, State, Zip Code						osby Ave						
						tate, Zip Code						
Project Manager for Monitoring Firm			Telenh	one No.		rson, NJ 075	02					
			· olopii	0110 140.		one No. 400-8711		License				
Start Date (10)	Schedu	uled Cor	mpletion	Date (11)		of OSHA Monito		01332				
12/02/2019	12/12	2/2019		(,		as (9)	r					
Occupancy Status During Abatement (Che					Street A							
Facility Closed/Vacated During Entire	Period of	Abaten	nent			1441033						
Abatement Performed Outside of Norm Other – Describe: 8:00am - 4:30pm	nal Facili	ty Hours	3		City, Sta	ate, Zip Code						
Scope of Work (Check All That Apply)												
≥3 sf or ≥3 lf					//··	100	//			-		
≥160 sf or ≥260 lf	M	Renova Demoliti	tion			Full Containm	ent with I	Negative	Droom			
		Demoill	on		×	WIIII-Enclosur	'e	vogative	16880	ii e		
				1		Glovebag Pro Non-Exempte	cedure d (*) and	Non-Frial	ole Dro	ood		
1		Location							1	2000 (32	emen	t
Location of Asbestos-Containing Material (ACM)	Use	Normali ed Solel	y v bv	Des	cription o	f					/ре	•
TO BE ABATED	Ma	intenan todial S	ce/	Asbestos Conta (i.e. thermal s	aining Mat	terial (ACM)		ount			Е	
In Facility (13)	Cus	(12)	lair?	surfaci	ing, VAT.	or	(Sp	ecify or LF)	Removal	R	Encapsulate	Enclosure
30.8				other m	iscellaned	ous)	0, 0	,,	nova	Repair	nsd	losu
Don	Yes	No	N/A						<u>m</u>		ate	re
Basement			х	Pipe i	nsulatio	n	139	LF				\vdash
							100		Х		Х	
			-									
Name of Registered Waste Hauler		N.II	DEP Wa	ete Cubi V								
Removal Safety, LLC		Hai	uler ID N	No. Cubic Y		Name of F	Registere	d Landfill				
City, State		00:	37007			Fairless	3					
Paterson, NJ				Disposal	Date	City, State						
Completed by	Title			TBD	<u> </u>	Morrisvi						
Lasko Veskov	Presid	dent			nature	1/1		Dat	е			
	. 1031	GOIIL		$ \triangle$	Mil	Leston		11	/22/2	019		

101#10	\mathcal{X})						r	enerement et		uragios»		-	-Pr	int-Fe
CK 2413 PAI	D		ICATION	ate of Ne I OF ASB to NJAC	ESTOS	ABATE		T	DE	EQ			\mathbb{V}		The second secon
Date of Notification (1) 11/21/19				f Building Hanlon		perator	(2)	17 17 17 17 17 17 17 17 17 17 17 17 17 1		NC)V :	2.5	2019)	1
Agencies Notified Type Notification Type Notification Initial Amended			Street A	ddress	ode			and the second s	ĺ	Aspet	LICE	\$ CO	MIR	DL 6	Å
X DOL Amendment X Emergency	(including	-	Hillsda	ale, NJ (T ₆	elephone	Num	her			
DOH justification) DCA Cancellation			Marie	Hanlon					1 2	Siephone		-			
Name of Facility Where Abatement is Takin	g Place (3	3)	FACI	LITY INFO	ORMATI	ON	Тур	e of Facility	(4)						
Residential Home		7.8						School (K	-12)						
Street Address							×	Subchapte Other (i.e. etc.)					lings,	home	es,
City (5) Hillsdale							17	uare Feet 00	2	of Floors		6	ldg. A	ge	
County (6) Bergen			County (Code (7) USE ONLY			Re	rrent Use (P esidential	Home		olish	ed)			
Name of Monitoring Firm Hired by Building Project Manager	Owner (8)		ASCN	l No.		All S	tage	batement Co es Abaten		or (9)					
Street Address						Street 280		ress ⁄Iidland A	ve.						
City, State, Zip Code								Zip Code Brook, NJ	07663	3					
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph	none			Licen 0130					-
Start Date (10) 11/25/19	Schedule 11/27/		npletion I	Date (11)		Name	of O	SHA Monito	r						
Occupancy Status During Abatement (Chec	k Only Or	ne)				Street	Addı	ress	-						
Facility Closed/Vacated During Entire I Abatement Performed Outside of Norm Other – Describe: 8 A.M to 4 P.M	Period of A	Abatem Hours	nent		_	City, S	itate,	Zip Code							
Scope of Work (Check All That Apply)							100								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit				×	N C	ull Containr Ini-Enclosu Blovebag Pro Ion-Exempto	ire ocedure)					
Location of	1	Locati	ly		Des	scription		ton-Exempt	T / ai	10 14011-1	Habit		Abate Typ	ment	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	d Sole intenar todial S (12)	nce/		tos Cont thermal surfac	aining M	fater s insu T, or		(Amount Specify F or LF)		Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A									_		ate	roi .
Basement	-	X			00000	e Wra	•		-	23 LF		X			
Garage		Х			Pip	e Wra	ар			14 LF		X			
Name of Registered Waste Hauler		l ki	JDEP W	asto	Cubic	Varda		l Nome -	f De alai	ored I -	a den				
All Stages Abatement		Н	auler ID 036592	No.	of Was					ered Lar ral San		Lan	dfill		
City, State Saddle Brook, NJ					Dispos TBD	al Date		City, Sta Pen A		PA					
Completed by Richard Cristofol	Title Pres	ident			S	ignature			/	>	Date 11	e /21/1	9		

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

Chh# 3656

Date of Notification (1)	0 = 2 11				Nama	of Duilding	a Owner/Operator /	(2)					
11 /	20 /	10					g Owner/Operator (<i>[]</i> []	// fi	2 P	more of a
V 		19) ·		Pri	nceton U	niversity-Office	of Design and	Construction			9 9	
Agencies Notified	Type Notifica	ation			100000000000000000000000000000000000000	t Address						Designation of the last of the	Comments Comments
☐ EPA ☐ DOLWD	☐ Initial				200	Elm Dr.		The state of the s	MOV 2	~ AA	46	arate a	A STATE OF THE PERSON NAMED IN
☑ DHSS	Amended				City, S	State, Zip C	Code	11) (.	NOV 2	0 20	19	11.	الاستا
□ DCA	☐ Emergen		dina		Pri	nceton, N	IJ 08544	1					
(NJAC 5:23-8)	justification		anig	- 4	Name	of Contac	t	1	Telephone Num	ber	Fall of	76	
	☐ Cancellat	tion			Ro	bert Orte	go	•	609-258-184		1000	U.	
					FA	CILITY IN	IFORMATION	TO STANSON DE	The state of the s	CA MANAGEMENT	(Palis pir a tuli)	Marcall Area	1000
Name of Facility Where	Abatement is T	aking Pla	ace (3)				Type of Facility (4	4)				
Princeton Univers	sity-Jadwin H	all						School (K-12)					
Street Address								Subchapter 8	(Other than K-12				
Washington Road	İ							Other (i.e., pri	ivate and comme	rcial bu	ilding	JS,	
City (5)								Square Feet	# of Floors	DI	da A	ao.	
Princeton								Square Feet	# OI FIGOIS		dg. A 70	ge	
County (6)					Cour	nty Code (7)(STATE USE ONLY)	Current Use (Price	or if being demolis	shed)		uniya	118
MERCER								Office/Class	rooms				
Name of Monitoring Fire	m Hired by Build	ding Own	er (8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
TTI Environmenta	l Inc						BRISTOL EN	VIRONMENTAL	., INC.				
Street Address			1-20-				Street Address						
1253 North Churc	h Rd						1123 BEAVE	R STREET					
City, State, Zip Code							City, State, Zip C	ode					Z SHI U
Moorestown, NJ 0	8057						BRISTOL, PA						
Project Manager for Mo			T	Tele	phone	No.	Telephone No.		License No.				
Michael Keehn					<u>.</u>	-8800	215-788-6040)	00509				
Start Date (10)	15	Scheduled	d Cor				Name of OSHA M		00000				
12 / 2	THE PROPERTY AND ADDRESS OF THE PARTY OF THE	12					Control control and the control of t	VIRONMENTAL	INC				
							The second second second	VIKONWENTAL	., INC.				
Occupancy Status Durin					200000		Street Address						
☐ Facility Closed/Vaca☐ Abatement Performe						arib a	1123 BEAVE						
Time of Abatement:	7:00AM-6:30F	ormai Fac PM/	PM	Hour -	s - Des	cribe	City, State, Zip Co						
		1411					BRISTOL, PA	19007					
Scope of Work (Check a	all that apply)						□ Full Con	tainmant with Near	ativa Dragavisa				47
		\boxtimes	Ren	ovati	on		☐ Mini-End	tainment with Nega	alive Pressure				
≥160 sf or ≥260 lf			Dem				Gloveba	g Procedure					
			1000000				Non-Exe	mpted (*) and Non	n-Friable Procedu	re			
Landia	5			ocat rma			6			Ab	atem	ent T	ype
Locatio Asbestos-Containing		D L			ly by	Ashe	Description of stos Containing Ma		Amount	Re	Repair	E	En
TO BE AB	BATED				nce/		., thermal systems		(Specify	Removal	pair	cap	Enclosure
IN Fac				diai : (12)	Staff?	8	surfacing, VAT		SF or LF)	a	1	Encapsulate	ure
(13)		Ye		No	N/A	1	other miscellane	ous)				ate	
Room B-39						Mastic			400 SF				
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				_		Mastic			400 01		H		H
				<u> </u>						ᆜ	닏		닏
				Ц_			CONTRACTOR OF THE CONTRACTOR O				Ш		
Name of Registered Wa BRISTOL ENVIRO		IC.		1 1 1 1 1 1 1	JDEP I auler II	O No.	Cubic Yards of Waste	Name of Regist				MILITERY	X
City, State					18706	3	Disposal Date	City, State					
BRISTOL, PA 1900	07						Disposal Date	FAIRLESS I	HILLS, PA				
Completed By (Print or	Type)	Title					Signature			ate			
Brian Scafiro		Estin	nato	r			BANGA	Scolino	192	11-	20	-/1	9



State of NJ Notification of Asbestos Abatement B & G proj. #: 2019-257 (Pursuant to NJAC 8:60-7 and 12:120-7)

	E CALL	P.				Chec	k # 9755				_
Date of Notification (1)	Name o	of Building Own	ner/Operator (2)			CE		WI	5	Con 1
$\frac{ 1 ^{1} ^{2} ^{1} ^{1} ^{9} }{ 1 ^{1} ^{9} }$	- 11	Lucas				IIVE	9 5	()	U I	=	Percentage of the state of the
Agencies Notified Type Notification EPA DEP Initial	Offeet					And Andreas	NOV 2	6 2 (719	TELEGRAPHICA PROGRAM	
▼ DOL		ate, Zip Code nardsville, N	IJ 07924			Age	ESTOS O	W. D. M.	transa tari	- 1	And Page 10
₩ DOH		Contact					ne Number			OR .	
DCA Cancellati	on Ann	Lucas									
		FAC	ILITY INFORM	IATIO	N						
Name of facility where abatement is t	aking place (3)					Type of Facility					
Ann Lucas							ooi (K - 12)		han V	12)	
Street Address						F2 \$000 (00)	hapter 8 (O (Private/C			12)	
							# of Floor	tc.		dg. A	70
City (5)	County (6)				unty Code (7)	Square reet	# 01 11001	5	Dic	.y. A	ge
Bernardsville, NJ 07924	Somerse	et		(Sta	ate use only)	Current Use (Prior if bein	g den	nolishe	d)	
Name of Monitoring Firm Hired by Blo	dg. Owner (8)		ASCM No.	-	Name of Abatement (
					B & G Restorati	on, Inc.					
Street Address					Street Address 105 Ryerson R	nad					
City, State, Zip Code				-	City, State, Zip Code						
					Lincoln Park, N	NJ 07035					
Project Manager for Monitoring Firm		Phone Numb	per		Telephone Number (973)696-6869	a '	License		per		
0.1.1.0.10.10.10.	101.10				Name of OSHA Monit		00	378	-		
Scheduled Start Date (10) 12/02/2019	12/03/20	oletion Date (1	1)		B & G Restorati						
Occupancy Status During Abatement (107.0		_	Street Address 105 Ryerson Ro	ad					
X Facility closed/vacated during er	ntire period of a	batement.			City, State, Zip Code	Jau					
Abatement performed outside of Describe:	normal facility	hours-				V10224112411					
Other-Describe:	VC2179-Typ/1-111-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-				Lincoln Park, N.	J 07035					-
Scope of Work (check all that apply) Demolition					vrap & cut		_				
	enovation			_	full Containment w/neg Mini-enclosure	ative pressure	Gloveb	100			
	60 sf or ≥260 lf		/	<u></u>	wini-endosure		☐ Non-fr	R	R	E	T
asbestos-containing b	y maintenance. taff(12)			on of a	sbestos-containing	Amount		e m	e p	n	E n
material to be abated in facility (13)	Yes No	N/A	material (·	(Specify LF)	SF or	0	a	c a	C
#10 oido boiles 0 leveles	103		1 = 1 = 1 = 1	-4!				е	-	р	
#18 side boiler & laundry room #20 side boiler & laundry room		X	pipe insula			52 lf 36 lf		X	H	片	ዙ
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					San a Contract Contra			Ī			
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Registered Waste Hauler B & G Restoration, Inc.	NJDEP Hau 19563		ubic Yards of V 2	Vaste	Name of Registered I Grand Central I						
City, State Lincoln Park, NJ		Disposal D	ate 2/03/2019		City, State Pen Argyl, PA						
	itle ecretary/Tre	asurer	Signature		Gordana Luna		Date 11/21	/201	9		

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KOUIZ PAI			CATION	tate of Ne N OF ASB to NJAC	ESTOS	ABATE			C	E	<u> </u> <u> </u>	/ <u>[c</u>	The second second	O'CONTRACTOR OF THE CONTRACTOR	The state of the s	
Date of Notification (1)	No.		Name o	f Building	Owner/0	Operato	r (2)		NO	V 2	6 20	19	ti de	ا المسلم		
11/21/19			Alan F	Rubenst	tein								The Parket			
Agencies Notified Type Notificatio	n		Street A	Address				1 73	GAES	TOS C	ONT	30L	and Ga			
➤ EPA										ICEN				charte at Joseph	-	
DEP Amended Amendment	n+ ++ 1			ate, Zip Co				- market the and an area								
× Emergency		-		eck, NJ												
DOH justification				f Contact e Ruber					Tel	ephone	Numb	er				
Cancellatio	711		The Sent Still Co.	ILITY INF	and a second	ON									_	
Name of Facility Where Abatement is Tak	ing Place (3	3)	1 70	CITT IN	UNIMA	ON	Туре	of Facility (4)							
Residential Home							П	School (K-1	2)							
Street Address								Subchapter	8 (Oth			s m um			2020	
							×	Other (i.e. p etc.)	rivate	& comn	nercial	bullali	ngs,	nome	es,	
City (5)					2.040			are Feet	330,000	f Floors	i	100000	Bldg. Age 65+/-			
Teaneck			0				310		2			1000	+/-			
County (6) Bergen				Code (7) <i>USE ONL</i> Y	2			ent Use (Prio sidential H		ng dem	nolished	d)				
Name of Monitoring Firm Hired by Building	Owner (2)		ASCN			Nom	10000000			(0)	153					
Project Manager	OWITEL (0)		MOUN	a INO.				atement Con s Abateme		(9)						
Street Address							t Addre									
								idland Ave) .							
City, State, Zip Code				10.		City, S	State, 2	Zip Code								
						Sad	dle B	rook, NJ 0	7663							
Project Manager for Monitoring Firm			Telepho	ne No.		22.50	hone N				se No.					
						201	-600-	3184		0130)5					
Start Date (10) 11/22/19	Schedule 11/25/		npletion	Date (11)		Name	of OS	HA Monitor								
Occupancy Status During Abatement (Che		17-17-51				Street	Addre	ec								
Facility Closed/Vacated During Entire		-31 5 21	nont			Otroo	ridare	.00								
Abatement Performed Outside of Nor Other – Describe: 8 A.M to 4 P.M						City, S	State, Z	Zip Code								
Scope of Work (Check All That Apply)													- 7.77			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	Renova Demoli				2	Mi	III Containme ni-Enclosure ovebag Proc	B	Negati	ive Pre	ssure				
								n-Exempted		d Non-F	riable	Proce	dure	9		
	0.0	Locat	8.25									Α		ment		
Location of		Normal d Sole		****		scription			10.00		-		Ту	ne	_	
Asbestos-Containing Material (ACM) TO BE ABATED	Ma	intena	nce/		tos Cont thermal			I (ACM) ation.		mount Specify		π l	_	Enc	П	
In Facility	Cus	todial ((12)	Staff?	, , , , ,	surfa	cing, VA	AT, or			or LF)		Remova	Repair	aps	Enclosure	
(13)					otner r	niscella	neous)					val	air	Encapsulate	sure	
	Yes	No	N/A											Œ		
Basement		Х				VAT			52	21 SF	×					
Name of Registered Waste Hauler		IN	JDEP W	/aste	Cubic	Yards		Name of F	Renista	red I ar	ndfill					
All Stages Abatement		H	lauler ID	No.	of Was			Grand (1000			and	fill			
City, State		10	036592	4	4 YD	al Data					J				-	
Saddle Brook, NJ					TBD	sal Date		City, State Pen Arg		Ą						
Completed by	Title				S	ignatur	e //	// /			Date	-1-10			_	
Richard Cristofol	Pres	ident					111	1-/-	/	>	200000000000000000000000000000000000000	1/19	9			

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Date of Notification (1)	2					ng Owner/Operator	(2)	N		L/	100	
//	19	_		To	ny Mulla	arkey / Job #	#1911-2519 C	nk #2154	0 0			Control of the Contro
Agencies Notified Type Notifi	cation	-3		Stre	et Address			I III WUV	2.6	2019	-	
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☐ Amenda ☐ DHSS Amenda				City,	State, Zip	Code		ASSESTOS	COA	13.0	1 1	-
☐ DCA ☐ Emerge		ıdina		Ke	arny, NJ	07032	-	LICE	VSIN	3	F-01	
(NJAC 5:23-8) justifica	tion)			Nam	e of Conta	ct		Telephone Num	ber	CONTRACT AND ADDRESS OF	ones.	41.0 May and the
☐ Cancell	ation			То	ny Mulla	rkey		I				
No. of the second				FA	CILITY	NFORMATION						
Name of Facility Where Abatement is	Taking F	lace	(3)				Type of Facility	(4)				
Residential Property							School (K-1	2)				
Street Address							☐ Subchapter	8 (Other than K-12 private and comme	?) rcial h	uildin	ae	
City (5)							homes, etc.)	rciai b	unan	ys,	
City (5)							Square Feet	# of Floors	В	ldg. A	Age	
Kearny County (6)							+/- 1500 SF	2		192	5	
Hudson				Cou	nty Code (7)(STATE USE ONLY)	Current Use (P	rior if being demolis	shed)			
Name of Monitoring Firm Hired by Bui	Lii						Residential					
Finog Environmental	laing Ow	ner (8	5)	ASCM	No.	Name of Abateme	기를 위한 선생님이 있는 기병 시장 중 전환 시간 사람들이 없다면 하는 것이 없다면 하는데 하는데 하는데 하는데 하는데 하는데 하는데 하는데 하는데 하는데					
Street Address							d Mold Service	es, Corp.				
617 Stokes Road #4-318						Street Address						
City, State, Zip Code						1835 Underw						
Medford NJ 08055						City, State, Zip Co						
Project Manager for Monitoring Firm		Т	Tolo	phone	No	Delran, NJ 08	3075					
Rebecca Rubnitz					NO. 3-9994	Telephone No.		License No.				
	Schedule	d Co				609-702-0400 Name of OSHA M		00862				
12/3/19	12		3		19	EMSL Analyti						
Occupancy Status During Abatement (Check or	ly on	ie)	*		Street Address						_
Facility Closed/Vacated During Enti	ire Period	of A	bater	nent		200 U.S. Rout	te 130 North					
Abatement Performed Outside of N	ormal Fa	cility I	Hour	s - Des	cribe	City, State, Zip Co					-	
Time of Abatement:AM	PM/_		PM-		AM	Cinnaminson						
Scope of Work (Check all that apply)			-				Supering Color Colors (Colors Colors					-
≥3 sf or ≥3 If	\boxtimes	Reno	ovatio	n		☐ Full Conta	ainment with Neg	ative Pressure				
☐ ≥160 sf or ≥260 lf		Dem					Procedure					
					T	☐ Non-Exer	npted (*) and No	n-Friable Procedur	e			
Location of			ocati						Ab	atem	ent T	уре
Asbestos-Containing Material (ACM	1) (Jsed	Sole	ly by	Asbe	Description of stos Containing Mat		Amount	Re	Re	m	m .
TO BE ABATED		Main		nce/ staff?	(i.e	., thermal systems in	nsulation,	(Specify	Removal	Repair	cap	Enclosure
IN Facility (13)			(12)	nan:		surfacing, VAT, other miscellaneo		SF or LF)	val.	7	Encapsulate	sure
3 - 2	Ye	es	No	N/A	1	other miscellaneo	ius)				ate	
Basement		Г			Pine Inc	sulation		20.1.5	K7			
		-	_		1 ipe iii	Sulation		20 LF		Ш	Ш	Ш
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Name of Registered Waste Hauler			N.	DEP V	Vaste	Cubic Yards of	Name of Regist	ered Landfill			ш	
Waste Management			4 1 1 1 1 1 2 2	uler IE		Waste	Grand Cen					
City, State	-0.22-012			17273	0	5 Disposal Date	City, State					
Lafayette, NJ						12/3/19	Penn Argyl	e. PA				
Completed By (Print or Type)	Title					Signature	// //					
Kaysi Gruner	Offic	e As	sista	ant		1/1/	1/1	Dat	11	1.		
SB-41 AY 11	5530035 0000 0000				10 m	- FILL			141	11	1_	

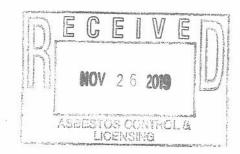
Page 1 of 2 CK 2155	PA	nv=	NO.	TIFIC	CATIO	N OF AS	New Jersey SBESTOS ABA AC 8:60 and 5:1	TEMENT	E C E	201	7 6	Constitution of the consti	The state of the s
Date of Notification (1)					Nam	ne of Buildin	ng Owner/Operator	(2)	3.01 2 0	684	#	11-	
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(NJAC 5:23-8)	justifica		noidan	ig	Nam	e of Contac	ct		Telephone Num	ber			
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					FA	CILITY II	NFORMATION					97000	
Name of Facility Where A	batement is	Takin	g Plac	e (3)				Type of Facility	(4)				
Forest Hall								School (K-12					
Street Address						1,000			3 (Other than K-12 rivate and comme		حالمان،		
509 Lakeland Road								homes, etc.)		rciai di	ullain	gs,	
City (5)	a a	W)						Square Feet	# of Floors	BI	dg. A	ge	
Blackwood								12000	2		60		
County (6)					Cou	inty Code (7	7)(STATE USE ONLY)	Current Use (Pri	or if being demolis	shed)			
Camden								Commercial					
Name of Monitoring Firm I		lding (Owner	(8)	ASCN	l No.		ent Contractor (9)					
Pennoni Associates							Asbestos an	d Mold Service	s, Corp.				
Street Address							Street Address	18 5					
515 Grove Street							1835 Underw		59				
City, State, Zip Code							City, State, Zip Co						
Haddon Heights, NJ Project Manager for Monito				1-			Delran, NJ 08	3075					
Brian Clark	oring Firm				ephone		Telephone No.		License No.				
Start Date (10)		Coboo	lulad C			7-0505 ate (11)	609-702-0400		00862				
11/30/					etion Da		Name of OSHA M	initian					
Occupancy Status During						19	EMSL Analyt	icai, inc.					
☐ Facility Closed/Vacated					mont		Street Address						
Abatement Performed (Outside of N	ormal	Facilit	v Hou	rs - Des	scribe	200 U.S. Rour City, State, Zip Co						
Time of Abatement:	AM _r		1_/\	· RIV		AM	Cinnaminson						
Scope of Work (Check all t	hat apply)	ZML	TIM	111	YVVY	1	Cililatiiiisoii	, NJ 00077					
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			10000	Loca						Ab	atem	ent T	уре
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(10)			Yes	No	N/A	1	other miscellaned	ous)				ate	
SEE ATTACHED SCOP	E			П		ATTACI	HED						
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Name of Registered Waste	Hauler			127	JDEP !	300000	Cubic Yards of	Name of Regist	ered Landfill				
Waste Management				1	lauler II 17273	-3-00 Y-02 H	Waste 5	Grand Cent	ral				
City, State			-24-70-1				Disposal Date	City, State					
Lafayette, NJ							12/5/19	Penn Argyle	e, PA				
Completed By (Print or Type	e)	Title			-		Signature		Dat	e	V.0010		
Kaysi Gruner		01	ffice /	Assis	tant		195/	1		1-2	1-1	9	



1910-2509-1 Chu # 2155

PAGE 2 of 2

Forrest Hall 509 Lakeland Road Blackwood, NJ



SCOPE OF WORK

- AMS proposes to provide tent enclosure for waste/debris pile on first floor, including air filtration devices
- AMS proposes to remove and dispose of approximately 3 CY of asbestos pipe insulation waste/debris
- AMS proposes to provide tent enclosure for floor tile and mastic area on second floor totaling approximately 200 SF
- AMS proposes to remove and dispose of approximately 200 SF of floor tile and mastic on second floor
- AMS proposes to provide tent enclosure for waste/debris pile in basement, including air filtration devices
- AMS proposes to remove and dispose of approximately 3 cy of asbestos pipe insulation waste /debris
- AMS proposes to remove and dispose of approximately 22 elbows/fittings with asbestos insulation, in the basement, utilizing wrap and cut
- AMS proposes to wet wipe and/or HEPA vacuum both ends of first and second floor including utilizing air filtration devices

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Date of Notification (1) November 22, 2019				of Building aic Valle					NOV	2 6	20	019	
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EPA Initial DEP	1			ate, Zip C					ABBEST LK	JENSI JENSI			
Emergency (justification) DCA Cancellation	ncluding	1		of Contact Amodio					Telephone 973-340		ır		
El Surocidadi				ILITY INF		ON			0,000	1000			
Name of Facility Where Abatement is Taking Main Pump Station	Place (3)					Type of Fa	cility (4)	,				
Street Address 800 Union Boulevard	2-1-1-2-1-2-1	W/12 = E-(12)				-	Subc	ol (K-12) hapter 8 r (i.e. priv	(Other than	K-12) ercial b	uildir	ngs, hor	nes,
City (5) Totowa							Square Fe 15,000	et	# of Floors		Bld 10	g. Age	
County (6) Passaic				Code (7))				if being dem	olished			
Name of Monitoring Firm Hired by Building C	wner (8)		ASCI	M No.			of Abateme	nt Contra					
Atlantic Environmental Solutions Street Address					Will that the same of the same		ax Corpo	ration		,	_		
5 Marine View Plaza City, State, Zip Code				- mail		1117015-1200	oster Stre		floor				
Hoboken NJ 07030							tate, Zip Co ngton NJ						
Project Manager for Monitoring Firm Michael Novak		100	Telepho 201-87	ne No. 76-9400		2 000 CERT - 100 CE	one No. 309-1122		Licens 0136				
	Scheduk (pril			Date (11) 0		Name tbd	of OSHA M	onitor					
Occupancy Status During Abatement (Check						Street	Address						
Facility Closed/Vacated During Entire Pondatement Performed Outside of Normal Other – Describe: vacated for construction	I Facility	Hours	nent			City, S	tate, Zip Co	de					
Scope of Work (Check All That Apply)						-							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	tenova emolit				×	Mini-End Gloveba	closure g Proced	with Negation				
0.2		Locati					7,000		7 0.10 110111	T T		bateme Type	nt
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Mai	lormali d Sole intenar odial S (12)	ly by nce/		tos Cont thermal surfac		aterial (ACI insulation, T, or		Amount (Specify SF or LF)	Nemova	0	Encapsulate	Enclosure
	Yes	No	N/A							1 =	-	ate	6
Exterior windows			х	misce	ellaneo	us - gla	ass glazin	g 3	37 window	s x			
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POR AND AND AND AND AND AND AND AND AND AND										+	+	+	
Name of Registered Waste Hauler Century Waste		H	JDEP W auler ID 2797		Cubic of Was	0.00	Of Acres 1	ne of Re irless L	gistered Lan andfill	dfill			
City, State 623 Dowd Ave, Elizabeth NJ					157	al Date		, State	Ford Mill	Road			
Completed by Kielczewski Slawomir	Title CEO				1 / 1	ignature			weish	Dete		/2019	9

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Date of Notification (1)						Nam	e of Buildi	ing O	wner/Operator	(2)	X	- Carrowa	Monagenerou		CONTRA	1	
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Agencies Notified	Type Notifi	ication	1			Stree	et Address	5		100	111	MOA		b_2	119	- }!	الماسة المستد
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Our Lady of Lourde		i Gitti	ig i lac	JE (J).					Type of Facili School (K-	35. JH)					
Street Address										─ Subchapte	er 8 (Other than	K-12)			
1600 Haddon Avenu	ıe									Other (i.e., homes, et	priv	ate and co	mmer	cial b	uildin	gs,	
City (5)										Square Feet	0.,	# of Floor	S	В	ldg. A	ge	
Camden										>50,000		7			30+	3 "	
County (6)						Cou	nty Code ((7)(ST	ATE USE ONLY)	Current Use (Prior	if being de	emolis	hed)			
Camden																	
Name of Monitoring Firm		Iding (Owner	(8)	A	SCM	No.			ent Contractor (9)						
Vertex Environment	tal								Delta/BJDS,	Inc							
Street Address 700 Turner Way, Sui	ita 105							\$2,500	reet Address								
City, State, Zip Code	ite 105								1345 Industr								
Aston, Pa 19014									ty, State, Zip C								
Project Manager for Monit	oring Firm			T	eleph	none	No		Southampto	n Pa 18966							
Don Heim	omig i iiii						-8902		lephone No. 215 322-2900	1		License N 00783	lo.				
Start Date (10)		Sched	duled (te (11)		me of OSHA N			00763					
9 / 26 /							19		Criterion	normor							
Occupancy Status During	Abatement (-		7	eet Address								
☑ Facility Closed/Vacated	d During Ent	ire Pe	riod of	Aba	teme	ent			100 Street Ro	oad							
Abatement Performed Time of Abatement: 7A	Outside of N		Facili	ty Ho	ours -	Des	cribe		y, State, Zip Co		_=00			-			
W.	and Bu	W/	5)	1- <u>7</u> Al	M D	200	(Bensalem Pa								
Scope of Work (Check all	that apply)	十	-110			(+		M = " = "	Mary 100 (100 (100 (100 (100 (100 (100 (100							
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		_	⊠ Re	enov					☐ Mini-End	tainment with Ne closure g Procedure empted (*) and N				9			
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Location o Asbestos-Containing M		1)	Use	ed So	olely	by	Ashe	etne	Description of Containing Ma			Amount					-
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Name of Registered Waste	Hauler				NJD	EP V	Vaste	Cub	oic Yards of	Name of Regi	istere	ed Landfill		ш	ш	ш	Ш
Service Transport Gr	oup						No.	Wa		Minerva L							
City, State					20	990		Dist	posal Date	City, State							
58 Pyles Lane New C	astle DE									Waynesbu	urg,	Ohio					
Completed By (Print or Typ	e)	Title							Signature ,		7		Date	3			
Christine Del Viscio		As	sst. A	dmi	nist	rato	r		amata	- DO	1/	Even.	11	-2	2-2	30	9

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- /s/#LB	IS LOCATION	ATION	DESCRIPTION OF	AMOUNT	REMOVAL	REPAIR	ENCAPSULATE	ENCLOSURE
ASBESTOS-CONTAINING	NORMALLY	LLY	ASBESTOS CONTAING MATERIAL (ACM)	SPECIFY				
st often	USED SOLEY BY	Y BY	(IE, THERMAL SYSTEMS INSULATION SURFACING, VAT, OR	SF OR LF				
NOV	E) STODIAL	STAFF?	OTHER MISCELLANEOUS)					
Cellar	ILEO	NO IN/A						
Hallway	×		Pipe Insulation fiberglass seam mastic	50 Ea			×	
Hallway adjacent M elevator	×		Pipe Insulation	45 LF	×			
Lab/hall adjacent Bye office	×		Pipe Insulation	35 LF	×			
David Bye Office	×		Pipe Insulation	100 LF	×			
Hallway adjacent boiler room	×		Pipe Insulation	100 LF	×			
Room C-33	×		Residual debris on fittings	5 ea	×			
Transition hallway from	×		Pipe Insulation	50 LF			Α .	
main to north wing								
Hallway north at electric rm	×		Seam mastic on Fiberglass pipe insulation	200 ea			×	
Sterile processing offic	×		12" tan floor tilee	240 SF	×			
Basement Level					1			
EP Lab 1	×		Pipe Insulation(penetration	1 LF	×			
Material management	×		12" tan floor tile w/mastic	145 SF	×			
Main Bldg 1st Fl Wellness Room (Future IDP)	n (Future	IDP)			1			
Wellness Room above ceiling	×		Pipe Insulation	15 LF	×			
North Wing 2nd Floor Social Work Office (Furture IDP)	ork Office	(Furt	re IDP)					
North social work office throughout	×		12 X 12 Beige Floor Tile	150 SF	×			
Main Bldg 4th Floor Room 401 Consultation Room (Future IDP)	Consultat	tion Ro	om (Future IDP)					
Room 401 consultation room t/o	×		Mastic a/w non-ACM 12"x 12"	220 SF	×			
Main Building 7th Floor Room 701 (Future IDP	701 (Futu	re IDP)			1			I
Room 701 Throughout	×		Pipe Insulation (Above Ceiling Tile	40 LF	×			
Room 416	×		Floor tile and mastic	180 SF	×			

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMEN (Pursuant to NJAC 8:60 and 5:16) Date of Notification (Name of Building Owner/Operator (2) 2019 12 1 19 Virtua Agencies Notified Type Notification Street Address ASBESTOS CONTR**OLA ⊠** EPA ☐ Initial 20 Stow Rd ☑ DOLWD City, State, Zip Code ☑ DOH Amendment #1 Marlton NJ 08053 □ DCA ☐ Emergency (including (NJAC 5:23-8) Name of Contact justification) Telephone Number ☐ Cancellation Pat Giordano 856 355-0923 **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Our Lady of Lourdes-School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, 1600 Haddon Avenue homes, etc.) City (5) Square Feet # of Floors Bldg. Age Camden >50,000 30+ County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Camden Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Vertex Environmental Delta/BJDS. Inc Street Address Street Address 700 Turner Way, Suite 105 1345 Industrial Blvd City, State, Zip Code City, State, Zip Code Aston, Pa 19014 Southampton Pa 18966 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Don Heim 610 558-8902 215 322-2900 00783 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor __9__ / __26 / 19 11 / 30 / 19 Criterion Occupancy Status During Abatement (Check only one) Street Address □ Facility Closed/Vacated During Entire Period of Abatement 400 Street Road ☐ Abatement Performed Outside of Normal Facility Hours, - Describe City, State, Zip Code Time of Abatement: ____AM-3PM/ PM-6AM Bensalem Pa 19020 Scope of Work (Check all that apply) Full Containment with Negative Pressure ≥3 sf or ≥3 lf □ Renovation
 □ Demolition ☐ Mini-Enclosure ≥160 sf or ≥260 if ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Used Solely by Asbestos-Containing Material (ACM) Repair Remova Encapsulate Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED (i.e., thermal systems insulation, (Specify Custodial Staff? IN Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A \boxtimes Please See Attach П П X Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. Service Transport Group Waste Minerva Landfill 20990 City, State Disposal Date City, State 58 Pyles Lane New Castle DE Waynesburg, Ohio Completed By (Print or Type) Signature Date Christine Del Viscio Asst. Administrator 26/2019

LOCATION OF ASBESTOS-CONTAINING	IS LOCATION NORMALLY	ASBESTOS CONTAING MATERIAL (ACM)	AMOUNT	REMOVAL REPAIR	-	ENCAPSULATE	ENCLOSURE	
MATERIAL (ACM) <u>TO BE ABATED</u> IN FACILITY	USED SOLEY BY MAINTENANCE/ CUSTODIAL STAFF?	(IE, THERIN SURFACING OTHER MIS	SF OR LF		THE REPORTED VIOLENCE THE MANAGEMENT	n maen valet A. Storm Burguer V Edd (1994 ST Albert		
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Lab/hall adjacent Bye office	×	Pipe Insulation	35 LF	×	-			
David Bye Office	×	Pipe Insulation	100 LF	×				
Hallway adjacent boiler room	×	Pipe Insulation	100 LF	×		Consumer of the last of the la	AND DESCRIPTION OF THE PERSON NAMED IN	
Room C-33	×	Residual debris on fittings	5 ea	×				
Transition hallway from	×	Pipe Insulation	50 LF			The second second	-	
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Material management	×	12" tan floor tile w/mastic	145 SF	×		The second secon		
Main Bldg 1st Fl Wellness Room (Future IDP)	m (Future IDP)				L			
Wellness Room above ceiling	×	Pipe Insulation	15 LF	×	-			
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State of New Jersey

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Date of Notification (1)	12 /	19		95500	ne of Buildir	ng Owner/Operator	(2)		[V]	5	The second	THE PERSON NAMED IN
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⊠ EPA	Initial	uon		1	et Address		1		119	16		
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DCA (NJAC 5:23-8)	☐ Emergenc	y (includin	g		arlton NJ				THE WATER	Make the same		
(NOAC 3.23-6)	justification Cancellation				e of Contac			Telephone Num	ber			
		711			t Giordar			856 355-092	13			
Name of Eacility Whose A	hatamant: T			FA	ACILITY II	VFORMATION						
Name of Facility Where A Our Lady of Lourde	oatement is Ta	iking Place	€ (3)				Type of Facility					
Street Address	5*						School (K-12)				
1600 Haddon Avenu							☐ Subchapter 8	Other than K-12)	uildin	~~	
City (5)							homes, etc.)	reace and comme	Clai D	ulialitiç	JS,	
Camden							Square Feet	# of Floors	В	ldg. A	ge	
County (6)							>50,000	7		30+	7.00	
Camden				Cou	nty Code (7	7)(STATE USE ONLY)	Current Use (Pri	or if being demolis	shed)			
	E											
Name of Monitoring Firm I Vertex Environment		ig Owner ((8)	ASCM	No.		ent Contractor (9)					
Street Address	a1					Delta/BJDS,	Inc					
	400				#=	Street Address					-	
700 Turner Way, Sui City, State, Zip Code	te 105					1345 Industri						
Aston, Pa 19014						City, State, Zip Co	ode					-
						Southamptor	n Pa 18966					
Project Manager for Monito Don Heim	oring Firm			phone		Telephone No.		License No.				
					-8902	215 322-2900		00783				
Start Date (10)	Sch	neduled Co				Name of OSHA N	fonitor	1				
9 / 26 /	-			<u> </u>	19	Criterion						
Occupancy Status During	Abatement (Ch	eck only o	ne)			Street Address						_
Facility Closed/Vacated	During Entire	Period of A	Abater	nent		400 Street Ro	pad					
Abatement Performed (Time of Abatement: <u>7</u> A	Outside of Norm	nal Facility	Hour	s - Des	cribe	City, State, Zip Co	ode					
		PIVI-	_AM			Bensalem Pa						
Scope of Work (Check all t	nat apply)											- 72
≥3 sf or ≥3 if		⊠ Rer	novati	20		☐ Full Cont	ainment with Nega	ative Pressure				
≥160 sf or ≥260 lf			nolitio			☐ Mini-Encl						
						☐ Non-Exer	mpted (*) and Non	-Friable Procedur	e			
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Asbestos-Containing Ma			Sole		Ashaa	Description of	f			T		
TO BE ABATI	<u>ED</u>		ntenai		(i.e.	stos Containing Mai , thermal systems i	terial (ACM)	Amount (Specify	Remova	Repair	Encapsulate	Enclosure
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Christine Del Viscio		Asst. Ad	mini	strato	r	Man	T	n /		2 -	SA	,01
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19	S LOCATION	DESCRIPTION OF	TNUOMA	REMOVAL	REPAIR E	ENCAPSULATE ENCLOSURE
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L	MAINTENANCE/	SURFACING, VAT, OR		NAME OF THE OWNER, OWNER, OWNE		MOS grives
Nov	CUSTODIAL STAFF?	OTHER MISCELLANEOUS)		NO SERVICE	- Colony more	
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David Bye Office	×	Pipe Insulation	100 LF	×		A STATE OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED ADDRESS OF THE PERSON NAMED ADDRESS OF THE PERSON NAMED ADDRESS OF THE PERSON NAMED ADDRESS OF THE PERSON NAMED ADDRESS OF THE PERSON NAMED ADDRESS OF THE PERSON NAMED ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED ADDRESS OF THE PERSON NAMED ADDRESS OF THE PERSON NAMED ADDRESS OF THE PERSON NAMED ADDRESS OF THE PERSON NAMED ADDRESS OF THE PERSON NAMED ADDRESS OF THE PERSON
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Wellness Room above ceiling	×	Pipe Insulation	15 LF	X	Statute Second Section 1	THE PERSON NAMED IN THE PE
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