EDS17-292



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

Page 1 of 1 Check # 3367

Date of Notification (1)				Building C			(2)		In	E	C	E			
11/21/2017		Orang Street A	e Public	School	ols			III				<u>u</u> ,			
	otification	- 1		_{aaress} ncoln Av	e						INV	2 -	7 20	117	
DEP A	itial nended nendment #			ite, Zip Coo e, NJ 07					14 4	Î	4U V	-		111	
X DOH ju	nergency (including stification)	- 1	Name of A. Jam	Contact					Tele	phone	Nom	ber C	ONT	ROL	&
X DCA		ORMATION													
Name of Facility Where Abateme Heywood Avenue Elemen)	TAGE	LITTINIC	INMAII	ON		of Facility (
Street Address 421 Heywood Avenue		Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes,													
City (5) Orange								etc.) Square Feet # of Floors Bldg. Age 20,000 + 2 50+							
County (6) Essex		Code (7) JSE ONLY)			Current Use (Prior if being demolished) School										
Name of Monitoring Firm Hired by Westchester Environment		ASCN 0012	2. (19. 19. 19. 19. 19. 19. 19. 19. 19. 19.			ame of Abatement Contractor (9) GL Group, Inc									
Street Address 1248 Wrights Lane			Street Address 140 Hamburg Tpke												
City, State, Zip Code West Chester, PA 19380		City, State, Zip Code Bloomingdale, NJ 07403													
Project Manager for Monitoring F Philip Conteh		Telephone No. 610-431-7545				elephone No. License No. 201)710-9725 01084									
Start Date (10) 11-22-2017 at 12.30 pm	mpletion Date (11) Name of OSHA Monitor GL Group, Inc						ır.								
Occupancy Status During Abaten	Street Address														
Facility Closed/Vacated Duri Abatement Performed Outsi Other – Describe:	ng Entire Period of A de of Normal Facility	batem Hours	ent			140 Hamburg Tpke City, State, Zip Code Bloomingdale, NJ 07403									
Scope of Work (Check All That A	nlv)					DIOO	iiiiigu	iale, No C	77403						\dashv
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure												
	Locati	on								Abatement					
Location of	lormall d Solel	у			Description of Containing Material (ACM) mal systems insulation, urfacing, VAT, or ler miscellaneous)			Amount (Specify SF or LF)			Туре				
Asbestos-Containing Material TO BE ABATED In Facility (13)	ntenar odial S (12)	ice/ taff?		thermal surfa							Removal	Repair	Encapsulate	Enclosure	
Dellas Dessa	Yes	No	N/A	D:	no Fit	ting In	aulatia	n	00.15			X		1	
Boiler Room	X					ting In			20 lf			X		-	
Crawl space	X			FI	pe rit	ung m	ng Insulation			80 If					
												-			
Name of Registered Waste Haule	I N	NJDEP Waste Cubic Yards					Name of Registered Landfill								
GL Group, Inc	Н	Hauler ID No. of Waste TBD													
City, State Bloomingdale, NJ					Dispos TBD	Osal Date City, State Waynesburg, OH									
Completed by Title Elena Solakov President							Signature Date 11/21/17								

JDOL Asbestos F	Page 2 of 4			2017	-11-22 13	3:58:57	(GMT)			[D	E (G		om:/E	Ici			
EDS17-292	PAID		моті)	FICATIO	State of Ne N OF ASE It to NJAC	BESTOS	ABATE	MENT	, I	ise)	of 1 # 1345	עם	2.7.	on	S _a lata			
Date of Notification 11/21/2017	Name of Building Owner/Operator (2) Orange Public Schools					10 10 10 10 10 10 10 10 10 10 10 10 10 1												
Agencies Notified		Address		ASBESTOS CONTROL														
EPA EPA		incoln A	LV 0						LICE	NSI	lĢ_	-						
EPA DEP IS DOL	Initial Amended			City. S	tete, Zip C	ode			+	1:								
	Amendme Emergenc	nt# y (indudir	ng .	Oran	ge, NJ 0	7050					_	Y		أ				
₩ DOH B DOA	Justification Cancallation	1)	· - -	A. Ja	of Contact Mes				MINITEDIONE Number									
Nome of Facility (a)				FAC	ILITY INF	ORMATI	ON		<u> </u>									
Name of Facility Who Helywood Avenu	ere Abalement is Tak	ing Place	(3)					Type	of Fecility	(4)								
Street Address 421 Heywood A		ngoi				_		X U	School (K- Subchapie	er B (Oth	erthan K	(-12)						
City (5)	101100							100	Other (I.a. etc.)	-		KCNN P	uilding	s, hon	ne:			
Orange						re Feet 000 +	#0	f Floors	Bidg, Age 50+									
County (6) Essex	County	Code (7) USE DNLY	<u> </u>	1	Curre	ant Use (Pr	1.00	ng dema	lished)									
Name of Monitoring (ASC	M No.		Name	Sch of Aba	ntractor	actor (9)											
Westchester Env	0012	00127 GL Group, Inc																
1248 Wrights La									as Surg Tpke	9								
West Chester, PA 19380							City, St	City, State, Zip Code Bloomingdale, NJ 07403										
Project Manager for N Philip Conteh	Telepho 610-4	one No. 31-7545		o. 9725	License No.													
Start Date (10) 11-22-2017 at 12	mpletion	Date (11)		Name o	of OSI	SHA Monitor												
Occupancy Status Du		ck Only O	(ans)	at 3.30	pm		rp, Inc											
Facility Closed/V	scaled During Entire	Period of	Abatar	nent s			-	lamb	urg Tpke	,								
Other - Describe Scope of Work (Check	·								P Code Iale, NJ (07403								
23 sf or ≥3 (f ≥160 af or ≥260)			Renova Demoli					Min	Containm I-Enclosure vebag Pro- I-Exemples	edura				70				
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Locat			Normai ed Sole				ription o						Type					
Asbestos-Containt	BATED (ACM)	Me	Intena	nce/	Asbest	os Conia thermal s	ining Ma	aterial	(ACM)		noun!	1 -		lī1				
In Fa	dity	Cus	todiai S (12)	Siaff?	(1.0.1	surfact	ng, VAT	, 07	PORT.		pecify or LF)	Ren	Repair	C.	1			
(1:	3)	Yas	No	N/A		other m	sce Itane	(200			esett N	Removal	pair	Encapsulate	and attended and			
Boiler		X			Pi	pe Fittie	ng Insu	ulatio	n	2	20 H		-					
Crawl:	space	X				pe Fittir				80 H		x						
		-																
lame of Registered W	aste Hauler		M	JOHN W	sate	Cubic- 16	ard a		Alm	3								
L Group, Inc	7.71		H	auler (D) 33034	No.	Cubic Y of Waste TBD			Name of I		ed Landh	rl						
Cily, State Bloomingdale, NJ						Disposa TBD	Date	+	City, State									
		Tilla							Waynes	purg, (9				
Completed by Title Fresident President					Sign				Elever Stutte 11/21/17									

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

State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60 and 12:120) D&S Proj. #: 17-322 2 7 2017 Name of Building Owner/Operator (2) Date of Notification (1) ASBESTOS CONTROL & $\frac{1}{1} \frac{1}{1} \frac{1}{1} \frac{7}{1} \frac{1}{1}$ phyllis cerrato Agencies Notified Type Notification Street Address 🛛 Initial ☐ EPA Amended DEP City, State, Zip Code Amendment #: DOL montclair, nj 07042 Emergency Telephone Number (including Name of Contact DOH justification) DCA jack Cancellation **FACILITY INFORMATION** Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) Subchapter 8 (Other than K-12) phyllis cerrato Other (Private/Commercial Street Address Bldgs./Homes, etc. # of Floors Bldg. Age Square Feet County Code (7) County (6) City (5) Current Use (Prior if being demolished) (State use only) montclair Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. D & S RESTORATION, INC. Street Address Street Address 20 California Ave. City, State, Zip Code City, State, Zip Code Paterson, NJ 07503 License Number Telephone Number Phone Number Project Manager for Monitoring Firm 01169 973-345-8020 Name of OSHA Monitor Sched. Completion Date (11) Start Date (10) D & S Restoration, Inc. Street Address 12/15/17 11/28/17 Occupancy Status During Abatement (Check only one) 20 California Avenue City, State, Zip Code Facility closed/vacated during entire period of abatement. Abatement performed outside of normal facility hours-Paterson, NJ 07503 Other-Describe: NORMAL HOURS Full Containment w/negative pressure Scope of Work (check all that apply) Mini-enclosure \times >3 sf or >3 lf Renovation Glovebag procedure Non-Exempted (*) and Non-friable procedure ≥160 sf or ≥260 lf Demolition Is location normally used solely E e Location of е n by maintenance/custodial Amount Description of asbestos-containing m p asbestos-containing C (Specify SF or staff(12) C 0 material (acm) to be material (ACM) a а LF) ٧ abated in facility (13) Yes No N/A 1101ft X PIPE INSULATION basement Name of Registered Landfill Cubic Yards of Waste NJDEP Hauler ID# Registered Waste Hauler TULLYTOWN, RESOURCE RECOVERY D & S RESTORATION, INC. 13506 2 yds Disposal Date City, State

TULLYTOWN, PA

Date

11/17/2017

BOGDAN JOLDZIC PRESIDENT

Title

PATERSON, NJ 07503

Completed by (Print or Type)

11/29/17

Signature

D&S Proj. #: 17-321		AID			pesto	J s Abatement and 12:120)	DE	CE	<u> </u>	V [
Date of Notification (1) 1	3	ame of Bui gerald inf reet Addre)			STOS (CONT	TALLES OF THE PARTY OF THE PART	8.	1			
DEP Amended Amendment # Emergency (including justification) DCA Cancellation	Na	ty, State, Z westfield me of Con gerald in	r											
Name of facility where abatement gerald infantino Street Address	s taking plac	ce (3)	FACI	LITY INFORM	MOITA	N	Subch Other	(4) I (K - 12) apter 8 (C (Private/C (Homes, 6)	Other to comme	ercial	-12)			
City (5) westfield	Count	1				inty Code (7)	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Street Address City, State, Zip Code	Blag. Owner	(8)		ASCM No.		D & S RESTOR Street Address 20 California A City, State, Zip Code Paterson, NJ 07	ATION, INC.							
Project Manager for Monitoring Firm Start Date (10)			one Numbe			Telephone Number 973-345-8020 Name of OSHA Monitor D & S Restoration, Inc.								
12/05/17 Occupancy Status During Abatemer Facility closed/vacated during Abatement performed outside Describe: Other-Describe: NORMAL H	entire period of normal fa	_	Street Address 20 California Avenue City, State, Zip Code Paterson, NJ 07503											
Scope of Work (check all that apply	Renovation Demolition						Full Containment w Mini-enclosure Glovebag procedur Non-Exempted (*)	re	friable	proce	edure			
Location of asbestos-containing material (acm) to be abated in facility (13)	Is location by mainten staff(12) Yes			5000 BY WA		sbestos-containing	Amount (Specify S LF)	For	Remove	Repa	Encap	E n c L		
basement		X		PIPE INSUI	LATI	ON	65 l ft							
Registered Waste Hauler D & S RESTORATION, INC. City, State PATERSON, NJ 07503	NJDEF 1350		10000		Vaste	Name of Registered TULLYTOWN, City, State TULLYTOWN	RESOURCE RE	COVER	<u> </u> Ц					
Completed by (Print or Type) BOGDAN JOLDZIC	Title PRESIDE Do not use			Signature	mpted		3 * 4 \$	Date 12/17/	2017			_		

Ch 532608535	- I,)		CATION	ate of Ne I OF ASB to NJAC	ESTOS	ABATE					7 5		W L			
Date of Notification (1) 11/25/2017			Name of Building Owner/Operator (2) Energy Transfer Partners							NO	V 2	/ 21	917			
Agencies Notified Type Notification									ASBESTOS CONTROL &							
X EPA X Initial Amended Amendment	ш			ate, Zip Co		000			LICENSING							
Mendment Emergency justification)		-		ille, Nev	v Jerse	ey 080	Tal	lanka *!								
DCA Cancellation			Steve Dipper FACILITY INFORMATION													
Name of Facility Where Abatement is Takin	LITYINF	ORMATI	ON	Туре	e of Facility (4	4)										
Energy Transfer Partners Eagle Po Street Address Route 295 & Route 130		School (K-12) Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes,														
City (5) Westville				etc.) are Feet Acres	# 0	f Floors	E	Bldg. A	Age							
County (6) Gloucester	County Code (7) (STATE USE ONLY)					Current Use (Prior if being demolished) Storage Facility / Terminal										
Name of Monitoring Firm Hired by Building (Total Environmental Solutions		ASCN N/A	To construction		(market)	of Ab	atement Con ergy Servi	ontractor (9)								
Street Address 1005 Saint Georges Lane	15			Street	Addre	88										
City, State, Zip Code Landenberg, PA 19350		City, State, Zip Code Swedesboro, NJ 08085														
Project Manager for Monitoring Firm Ed Igelesias	ne No. 14-4217		Teleph 856-	none N	10.	License No. 01009										
Start Date (10) 12/13/2017	art Date (10) Scheduled Completion Date (11)							Name of OSHA Monitor Total Environmental Solutions								
Occupancy Status During Abatement (Chec		Street Address 1005 Saint Georges Lane														
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe: Regulated Area will the	HEIR I					Zip Code										
Scope of Work (Check All That Apply)						Lanc	ieribe	ery, FA 19	330					\dashv		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf									Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure							
	1000	Locati							() () (<u> </u>		Abatement Type				
Location of Asbestos-Containing Material (ACM)	Use	lormal d Sole intenar	ly by	Asbes		scription aining M	n of Material (ACM)		Amount			1 9				
TO BE ABATED In Facility (13)	12 and 2, 10 and	odial S (12)	100 100 100 100	(i.e.	surfac	hermal systems insulation, surfacing, VAT, or other miscellaneous)			(Specify SF or LF)		Remova	Repair	Encapsulate	Enclosure		
	Yes No										X		ite	Ф		
Site Wide	X				Pipe Insulation					50 LF						
														-		
2 particular de marcola de marcola de marcola esta de marcola de marcola de marcola de marcola de marcola de m				aste No.	Cubic of Was 60	Macte			Registered Landfill ster County Solid Waste Complx							
City, State Camden, New Jersey					Dispos	al Date		City, State Swedes	boro, New Jersey							
Completed by Chester Tocco		S	Signature Date 11/2						25/2017							