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<b>⊠</b> DOH	Emergency justification	(including		Name	of Contac	t				Telephone	Numbe	r		
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Health & Safety Se	rvices							Enterpris		(0)				
Street Address								Address					_	
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City, State, Zip Code							10 September	tate, Zip C	ASSITATION OF THE A					
Berlin, NJ 08009									Township,	N.I 0823	84			
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≥160 sf or ≥260 lf		-	enova emolit				Н	Full Cor Mini-En	ntainment w	ith Negativ	e Press	ure		
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Date of Notification (1) 11/23/2018				Name	of Buildin	g Owi	ner/Operato	or (2)							
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Abandoned Flood I	House														
Street Address								Subch	ol (K-12)	Other than	K-12)				
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City (5)								etc.)				2022			- 2
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Name of Monitoring Firm	Hired by Building	Owner (8	3)	LASC	M No.		Namo	of Abatemer				<u> </u>			
Health & Safety Se	rvices	,	,	1.00				Enterprise		xor (9)					
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PO Box 365								3 Delilah R	load						
City, State, Zip Code							300.000	State, Zip Coo							
Berlin, NJ 08009								Harbor To		NIO	0.4				
Project Manager for Moni	toring Firm			Telepho	one No			one No.	wilsilip,						
James Proctor					452-131	1	11 537 537	567-1250		Licens 0117					
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11/26/18		7 - 7 - 7	uli		30 0			th & Safet		es Inc					
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Other – Describe: v								n, NJ 0800							
Scope of Work (Check All	That Apply)											<u> </u>			
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≥160 sf or ≥260 lf			Demoli					Mini-Encl	osure	nui Negativ	e Pres	Sur	е		
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City, State				JUUZZ(			osal Date		2000						
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Eric Keys		OM					Signature				Date 11/23	3/20	018		
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Date of Notification (1) 11/23/2018					of Buildin						•	27222 E		- 1:
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DCA	justification Cancellation	n) on			am Byst				1 28	elephone N				
					CILITY IN		TION		- (	609)433	-2001			
Name of Facility Where	Abatement is Tak	ing Place (3	3)			ORMA	ION	Type of Facili	ty (4)					
Abandoned Flood	House							School (						
Street Address								Subchap	ter 8 (Ot	her than K	-12)			
144 Bayview Road								Other (i.e etc.)	e. private	& comme	rcial bu	uilding	s, hor	nes,
City (5)								Square Feet	#	of Floors		Bldg.	Age	
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PO Box 365								Address						
City, State, Zip Code								Delilah Roa	ad					
Berlin, NJ 08009								ate, Zip Code	l-:- N	11.0000				
Project Manager for Mon	itoring Firm		T	Telepho	one No		Telepho	Harbor Town	isnip, i					
James Proctor			1		452-131	1		567-1250		License 01172				
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							Berlir	n, NJ 08009						
Scope of Work (Check Al	I That Apply)	_												
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Date of Notification (1) 11/23/2018				Name	of Buildin	g Owner/	Operator	(2)	_	)				
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☐ DCA	☐ Cancellatio	n			am Byst				(6	609)433-2	2001			
Name of Facility Where	Abatement is Taki	ng Place (3	)	FAC	ILITY INI	FORMAT	ION	Type of Facilit	v (4)					
Abandoned Flood	House		•					_						
Street Address								School (F	<-12) ter 8 (Oth	ner than K-	12)			
146 Bayview Road								Other (i.e	. private	& commerce	cial bu	ildings	, hom	nes,
City (5)								etc.) Square Feet	# 0	of Floors		Bldg.	Age	
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PO Box 365								<sup>Address</sup> Delilah Roa	d					
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Project Manager for Mon	itoring Firm		T	Telepho	ne No.			one No.	.op, 1	License N	Vo.			
James Proctor				(856)	452-131	1	100000000000000000000000000000000000000	567-1250		01172				
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Cumberland  Name of Monitoring Firm	Hired by Building	Owner (8)			USE ONL	n	_	Hous	sing De	emed L	Jnsafe	50			
Health & Safety Se		Owner (6	,	ASCI	M No.				ement Co Orises,	ontractor (	(9)				
Street Address PO Box 365							Street	Address	S						
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Project Manager for Mon James Proctor	itoring Firm			Telepho	ne No. 452-131	14	1 2000 State	one No 567-12			License				
Start Date (10)		Schedul	ed Cor		Date (11)				A Monito	r	01172		-		
ulzuli8		3/10	1/19		Ø 8		Heal	th & S	afety S	ervices,	, Inc.				
Occupancy Status During Facility Closed/Vaca				aont.				Address Box 36							
Abatement Performe  Other – Describe:	ed Outside of Norr	mal Facility	Hours	ient S			City, St	tate, Zip	Code						
Scope of Work (Check Al	l That Apply)						Berii	n, NJ (	08009						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demolit				X	Mini- Glov	Enclosu					°e	
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Eric Keys		OM				6	uib	1				1/23/	2018		

#### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) 11/23/2018 Division of Property Management and Construction Agencies Notified Type Notification Street Address 33 West State Street **EPA** Initial DEP Amended City, State, Zip Code DOL Amendment # Trenton, NJ 08625 Emergency (including Name of Contact DOH justification) Telephone Number DCA Cancellation William Byster (609)433-2001 **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Abandoned Flood House School (K-12) Street Address Subchapter 8 (Other than K-12) 150 & 152 Bayview Road X Other (i.e. private & commercial buildings, homes, etc.) City (5) Square Feet # of Floors Bldg. Age Downe Township Varies Varies 30 +County (6) County Code (7) Current Use (Prior if being demolished) (STATE USE ONLY) Cumberland Housing Deemed Unsafe Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Health & Safety Services Site Enterprises, Inc. Street Address Street Address PO Box 365 6626 Delilah Road City, State, Zip Code City, State, Zip Code Berlin, NJ 08009 Egg Harbor Township, NJ 08234 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. James Proctor (856) 452 - 1311 609-567-1250 01172 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 11/26/18 Health & Safety Services, Inc. Occupancy Status During Abatement (Check Only One) Street Address Facility Closed/Vacated During Entire Period of Abatement PO Box 365 Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: vacant Berlin, NJ 08009 Scope of Work (Check All That Apply)

≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf	-	Renova Demolit				/lini-Enclosu Blovebag Pro				re	
Location of		Normal	ly		Description of				Abat	emen /pe	t
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Houses Deemed Unsafe			Х	Н	ouses Deemed Un	safe	200 yd per re	s X			
Name of Registered Waste Hauler Site Enterprises Inc.		Ha	JDEP Wa auler ID 1 035220	No.	Cubic Yards of Waste 20 cy	Name of CCIA	Registered Landf	II			
City, State Egg Harbor Township, NJ	20.000000000000000000000000000000000000				Disposal Date 31,41,9	City, Star Rosen	te hayn, NJ 0835	2			
Completed by Eric Keys	Title OM				Signature			ate 1/23/2	2018		

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Date of Notification (1) 11/23/2018	1			Name o	of Building	Owner/o	Operato	r (2)	nt and C	onetru	otion 45	VD M	2) -			I i
Agencies Notified	Type Notification			Street A	Address	орону	wana	gerriei	it and c	JOHSHU	CHOIT (III	OVVII	2) ]	21	)18	- [1
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<u> Всх</u>	Cancellatio	1			m Byste		ION			(6	09)433	-200	1			
Name of Facility Where		ng Place (3)		FAC	ILIT INF	ORIVIATI	ION	Туре	of Facility	(4)						
Abandoned Flood	House								School (K	100 0						
Street Address	220 2								Subchapte	er 8 (Oth	er than K	(-12)				
154 & 156 Bayviev	v Road								Other (i.e. etc.)	private a	& comme	ercial b	uild	ings	hom	es,
City (5)  Downe Township								33	re Feet		f Floors			dg. A	ge	
County (6)				2	01- (7)			Vari			ries		3000	0+		
Cumberland			(	STATE	Code (7) USE ONLY	)			nt Use (P sing De			lished	)			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCN	Λ No.		Name		tement Co							
Health & Safety Se							The second second second		prises, I		(3)					
Street Address								Addres								
PO Box 365							6626	3 Delil	ah Road	d						
City, State, Zip Code Berlin, NJ 08009									p Code							
Project Manager for Mon	itoring Firm		T	elepho	no No				or Town	ship, N						
James Proctor	morning i min		100	100	152-131	1	100000000000000000000000000000000000000	one No 567-1			License 01172					
Start Date (10)		Scheduled		2		N/2	10000000	CARLESTEE ST	IA Monitor	r	01172	_				
11/24/18		3/14/	91				Heal	lth & S	Safety S	ervices	s, Inc.					
Occupancy Status During	g Abatement (Chec	k Only One)	)					Addres								
Facility Closed/Vac	ated During Entire	Period of Ab	ateme	ent				36 36								
Abatement Perform  Other – Describe:	ed Outside of Norr vacant	nai Facility H	iours					tate, Zi								
Scope of Work (Check A	Il That Apply)						berii	n, NJ	08009				_			
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(13)			12)			other m	niscellan	eous)				0 40		pair	Encapsulate	Enclosure
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Name of Registered Was	te Hauler		NJI	DEP W	aste	Cubic \	Yards		Name of	Register	red Land	fill	_			
Site Enterprises Inc.				uler ID I		of Was	te		CCIA	riogicioi	ou Lund					
City, State	·		00	35220		20 cy				10						
Egg Harbor Townshi	ip, NJ					Disposi			City, Stat	te hayn, N	V.I 0834	52				
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Eric Keys		OM				1	142	ano				11/23	3/20	018		
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<b>⊠</b> DOL	Amendmen	nt #		10,000	ton, NJ									
DOH DCA	Emergency justification	(including	9		of Contact				Te	lephone N	lumber			
☐ DCA	☐ Cancellatio			Willia	am Byste	er				609)433-				
Name of Facility Mile	AL			FAC	CILITY INF	FORMATI	ON							
Name of Facility Where A Abandoned Flood	Abatement is Taki	ng Place (	(3)					Type of Facility	(4)					
Street Address	nouse							School (K	-12)					
158 Bayview Road								Subchapte Other (i.e.	er 8 (Oth	ner than K-	12)	ا ما ا م		
City (5)								Other (i.e. etc.)	private	& Comme	Ciai bu	liulings	s, non	ies,
Downe Township								Square Feet		of Floors		Bldg.	Age	
County (6)		- W						Varies		aries		30+		
Cumberland					Code (7)	Y)		Current Use (P			shed)			
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Health & Safety Se		Owner (o	)	ASC	M No.			of Abatement Co		r (9)				
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PO Box 365								Address Delilah Roa	٦					
City, State, Zip Code									u 					
Berlin, NJ 08009								tate, Zip Code Harbor Town	chin N	11 0000	r			
Project Manager for Moni	toring Firm			Telepho	one No			one No.	Silip, i	License				
James Proctor					452-131	1		567-1250		01172	NO.			
Start Date (10)		Schedul	ed Co		Date (11)		conserve i	of OSHA Monito	r	01172				
11/26/18		3/10	-	- 0. <b>*</b> 0 9 von - 0.				th & Safety S		s. Inc.				
Occupancy Status During	Abatement (Ched	ck Only O	ne)		2021 12 2000			Address		-,				
Facility Closed/Vaca	ted During Entire	Period of	Abater	nent			PO E	lox 365						
Abatement Performe	ed Outside of Norr	nal Facility	y Hour	S			City, St	ate, Zip Code						
								n, NJ 08009						
Scope of Work (Check All	That Apply)													
23 sf or ≥3 lf		☐ F	Renova	ation				Full Containm	nent with	Negative	Pressi	ire		
≥160 sf or ≥260 lf		X	Demoli	tion			Н	Mini-Enclosus	re					
							X	Glovebag Pro Non-Exempte		d Non-Fria	ble Pro	cedu	ъ	
		Is	Locat	ion					( / 4		1		ement	t
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TO BE ABA In Facilit		1	todial S		(i.e.		systems ing, VAT	insulation,	100	pecify	Rei	R	nca	Enc
(13)			(12)			other m			Si	or LF)	Remova	Repair	Encapsulate	Enclosure
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Name of Registered Wast	e Hauler		N	JDEP W	/aste	Cubic Y	'ards	Name of	Registe	red Landfil	1			
Site Enterprises Inc.				auler ID		of Wast	e	CCIA	riogioto	roa Lanam				
City, State			0	035220	)	20 cy								
City, State Egg Harbor Township	o NII					Disposa		City, Stat			_			
Completed by	J, INU	Title				3/14/		Hosen	nayn, l	NJ 0835				
Eric Keys		OM				Sig	nature	ha			ate 1/23/	2012		
Secretary Secretary Secretary		_ CIVI				1	li	M			11201	_010		

Date of Notification (1) 11/23/2018					of Buildin				0-1-1			1	1-	100
Agencies Notified	Type Notification	n		Street	Address Vest Sta			gement and	Constru	NO	MÇ		018	
X EPA X DEP X DOL	Initial Amended Amendmer Emergency			City, S Tren	tate, Zip ( ton, NJ	Code 08625				· · · · · · · · · · · · · · · · · · ·				1/2
☑ DOH DCA	justification Cancellatio	)		Willia	of Contac am Byst	er			100	lephone Nu 309)433-2		1421		
Name of Facility Where Abandoned Flood I Street Address 160 Bayview Road City (5) Downe Township County (6) Cumberland Name of Monitoring Firm Health & Safety Sel Street Address PO Box 365 City, State, Zip Code	House  Hired by Building			County (STATE	Code (7)		Name Site Street 6626	Type of Facili School (I Subchap Other (i.e etc.) Square Feet Varies Current Use (I Housing D of Abatement C Enterprises, Address Delilah Roa tate, Zip Code	K-12) tter 8 (Other 8) # o Va Prior if be eemed Contractor Inc.	Unsafe	ial bu	ilding: Bldg. 30+		nes,
Berlin, NJ 08009  Project Manager for Moni James Proctor	toring Firm		T	Telepho (856)	one No. 452-131	1	Egg Teleph	Harbor Town one No. 567-1250	nship, N	IJ 08234 License N 01172	0.			
Start Date (10)  Cocupancy Status During  Facility Closed/Vaca Abatement Performe Other – Describe: V	ted During Entire ed Outside of Norn acant	Slug ck Only On Period of A	l (9 e)	ment	Date (11)		Heal Street PO E City, Si	of OSHA Monitor th & Safety S Address Box 365 tate, Zip Code n, NJ 08009		<u></u>				
Scope of Work (Check All ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	That Apply)		enova emoli				I X	Full Contains Mini-Enclosu Glovebag Pr Non-Exempt	ire ocedure				6	
Location of Asbestos-Containing M		N	Locat ormal	lly	Ashaa		scription	of				Abate	ement /pe	
TO BE ABA In Facility (13)	TED	100000000000000000000000000000000000000	ntena odial ( (12) No	nce/ Staff?		thermal surfac		aterial (ACM) insulation, , or eous)	(S	mount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
Houses Deeme	d Unsafe			X	Но	uses D	eemed	Unsafe	200 ye	d per res	Х			
Name of Registered Waste Site Enterprises Inc.	e Hauler		Н	JDEP W auler ID 035220	No.	Cubic \ of Was		Name o	f Register	ed Landfill				
City, State Egg Harbor Township	), NJ					Disposi		City, Sta Roser		J 08352				
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Date of Notification (1)									1.1	ن <del>با</del>		D 1		
11/23/2018					of Buildir sion of I			r (2) gement and	Constri	iction (D	PMC	1		
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⊠ EPA	☑ Initial			33 V	Vest Sta	ate Stre	et							- 12
X EPA X DEP X DOL	☐ Amended			City, S	State, Zip	Code			3	v m · · ·	174 174	= 04		
⊠ DOL	Amendment Emergency			Tren	nton, NJ	08625								
<b>⊠</b> DOH	justification	1)	9	Name	of Contac	ct			ΙΤε	elephone N	umbe	13.15	-	
DCA	Cancellatio	n		Willi	am Bys	ter			1	609)433-				
Name of Facility Where	Abstament in Tale	- Di	(0)	FA	CILITY IN	FORMAT	TION							÷
Abandoned Flood I	Abatement is Taki	ng Place	(3)					Type of Facilit	y (4)					
Street Address	louse							School (F	<-12)					
162 Bayview Road								Subchap	ter 8 (Otl	ner than K-	12)		1111.7 <b>4</b> 700.000 K	
City (5)								Other (i.e etc.)	. private	& commer	ciai bi	iliaing:	s, nor	nes,
Downe Township								Square Feet	# 0	of Floors		Bldg.	Age	
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Name of Monitoring Firm	Hirad by Building	Outres (0						Housing De						
Health & Safety Ser	rvices	Owner (8	)	ASC	M No.			of Abatement C		r (9)				
Street Address	VICC3							Enterprises,	Inc.					
PO Box 365								Address						
City, State, Zip Code								6 Delilah Roa	ıa	-				
Berlin, NJ 08009								tate, Zip Code	N	110000				
Project Manager for Moni	toring Firm			Telepho	one No			Harbor Town	isnip, i	-				
James Proctor	3				452-13	11		one No. 567-1250		License	No.			
Start Date (10)		Schedul	ed Co		Date (11			of OSHA Monito	-	01172				
11/26/18		3/14				,		th & Safety S		e Inc				
Occupancy Status During	Abatement (Chec	ck Only Or	ne)					Address	oci vice.	5, 1116.				
Facility Closed/Vacat	ed During Entire	Period of	Abater	ment			110000000000000000000000000000000000000	30x 365						
Abatement Performe	d Outside of Norn	nal Facility	Hour	S				tate, Zip Code						
								n, NJ 08009						
Scope of Work (Check All	That Apply)													
23 sf or ≥3 lf		□ F	Renova	ation				Full Containr	nent with	Nogativa	7			
≥160 sf or ≥260 lf		$\times$	emoli	tion				Mini-Enclosu	re	ivegative	ressi	ire		
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		le.	Locat	ion			<u> </u>	Non-Exempte	ed (*) and	i Non-Friat	le Pro	1200	-	
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											+			$\vdash$
Name of Registered Waste	Hauler		N	JDEP W	aste	Cubic \	/ards	None	Dogist					
Site Enterprises Inc.			1 2000	auler ID		of Was			Register	ed Landfill				
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City, State	NI.					Disposa		City, Star	te					-
Egg Harbor Township	, NJ					3/14/	19	Rosen	hayn, N	NJ 08352				
Completed by Eric Keys		Title				Sig	gnature			Da				
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Date of Notification (1) 11/23/2018					of Building ion of P				ent and C	onstru	ction (D	PMC)		15.	
Agencies Notified  EPA DEP DOL	Type Notificatio	n		Street / 33 W	Address est Stat	e Stree						2 7			
DOL	Amended Amendmen				ate, Zip C on, NJ (				**						
⊠ DOH	Emergence justification	y (including			of Contact					Te	lephone N	umber			
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Name of Facility Where	Abatement is Tak	ing Place (3	)	FAC	ILITY INF	ORMAT	ION	T	f F - : 101	(4)					
Abandoned Flood I	House	119 1 1400 (0	,					l l At	oe of Facility						
Street Address								H	School (K- Subchapte	er 8 (Oth	er than K-	12)			
164 Bayview Road								X	Other (i.e. etc.)	private	& commer	cial bu	ildings	, hom	ies,
City (5)								1000	uare Feet	1000000	f Floors		Bldg.	Age	
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Cumberland				(STATE	Code (7) USE ONLY	)			rent Use (Pousing De			shed)			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASC	И No.		Name		patement Co						
Health & Safety Se									erprises, I		(5)				
Street Address							Street	Addr	ess						
PO Box 365 City, State, Zip Code									elilah Road	d					
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Project Manager for Mon	itoring Firm		1	Telepho	ne No.		Teleph			sriip, iv	License				
James Proctor					152-131	1			-1250		01172	NO.			
Start Date (10)		Schedule			Date (11)		Name	of OS	SHA Monitor						
11/26/18	Ab - t t (Ob -	3/14	119						Safety S	ervices	s, Inc.				
Occupancy Status During							Street /								
Facility Closed/Vaca Abatement Performe	ed Outside of Non	Period of A mal Facility	bater Hour	nent s			10,3500		Zip Code						
X Other – Describe: v	vacant					_	1		J 08009						
Scope of Work (Check Al	l That Apply)														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enova				×	M G	ull Containm lini-Enclosur lovebag Pro	e cedure					
		1						I N	on-Exempte	d (*) and	Non-Fria	ble Pro	1000	e ement	
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TO BE ABA In Facilit		Custo		40000 million	(ı.e.	thermal	systems cing, VA7	insu Γ, or	lation,		pecify or LF)	Remova	Repair	Encapsulate	Enclosure
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Houses Deeme	ed Unsafe			X	Ho	uses D	eemed	Un	safe	200 y	d per res	X			
Name of Registered Wast	e Hauler		N	JDEP W	aste	Cubic	Yards		Name of	Registe	red Landfil				
Site Enterprises Inc.			100000	auler ID   035220	\$3501F65	of Was	ste		CCIA	registe	ca Lanam	<u> </u>			
City, State				000220		-	al Date		City, Stat	e					-
Egg Harbor Township	o, NJ				),	3/4/			3499		NJ 0835	2			
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Eric Keys		OM				(	ul.	A	0		1	1/23/	2018		

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Date of Notification (1) 11/23/2018				Name	of Buildin	ng Own	er/Operato	r (2)			· · · · · · · · · · · · · · · · · · ·	100		i.e
Agencies Notified	Type Notificatio	n		Chros	Address	roper	Ty Mana	gement and	Constru	uction (F	PMC	<del>)</del> 20	10	
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DCA	Cancellatio				am Bys				100	elephone 1 309)433				
Name of the same					CILITY IN		ATION		- (	003)433	-200			
Name of Facility Where A Abandoned Flood F	Abatement is Taki	ng Place (	3)					Type of Facili	ty (4)					
Street Address	nouse							School (	K-12)					
181 Bayview Road								Subchap	ter 8 (Oth	ner than K	-12)			
City (5)						10		Other (i.e etc.)	e. private	& comme	rcial bi	ilding	s, hor	nes,
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Health & Safety Ser	vices	Owner (8)		ASC	M No.			of Abatement C		(9)				
Street Address	1,000							Enterprises,	Inc.					
PO Box 365							F-04-04-04-04-04-04-04-04-04-04-04-04-04-	Address Delilah Roa						
City, State, Zip Code														
Berlin, NJ 08009								tate, Zip Code Harbor Towi	achin A	110000	4			
Project Manager for Monit	oring Firm		T	Telepho	one No.			one No.	isilip, iv	License	-			
James Proctor					452-13 <sup>-</sup>	11	100000000000000000000000000000000000000	567-1250		01172	INO.			
Start Date (10)		Schedule	d Co	mpletion	Date (11	)		of OSHA Monito	or	01172	-		-	
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Occupancy Status During				1 50000				Address		**				
Facility Closed/Vacate	ed During Entire I	Period of A	bater	nent			PO B	ox 365						
Abatement Performed  Other – Describe: _va	d Outside of Norn acant	nal Facility	Hour	S				ate, Zip Code						
Scope of Work (Check All						_	Berlin	n, NJ 08009						
23 sf or ≥3 lf	тпат Арріу)													
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Houses Deemed	l Unsafe			X	Но	uses l	Deemed	Unsafe	200 v	d per res	X			
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Egg Harbor Township,	NJ					3/19	lis	Rosen	hayn, N	J 08352	2			
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Nome of Carille 188				FAC	ILITY IN	FORMAT	ION								
Name of Facility Where		ng Place (3	)					Туре	of Facility	(4)					
Abandoned Flood	House							П	School (K	-12)					
Street Address									Subchapte	er 8 (Ot	her than k	(-12)			
246 E Nantuxent D	r							X	Other (i.e.	private	& comme	ercial b	uilding	s, hon	nes,
City (5)								_	etc.)	1 4			511	•	
Downe Township								10000000	re Feet		of Floors		327	Age	
County (6)				0 1	0 1 (77)			Var			aries		30+	88	
Cumberland					Code (7) USE ONL	v)			ent Use (P						
				OTAIL	USL ONL	''			using De						
Name of Monitoring Firm		Owner (8)		ASCI	M No.		Name	of Aba	tement Co	ontracto	r (9)				
Health & Safety Se	rvices						Site	Ente	rprises, l	Inc.					
Street Address							Street	Addre	ss	20000000			- 6315		
PO Box 365							662	6 Deli	lah Road	d					
City, State, Zip Code							0		ip Code				-		
Berlin, NJ 08009							Charles and the control of the contr			ohin M	110000	,			
Project Manager for Mon	itorina Firm			Telepho	na Na				or Town	Ship, i					
James Proctor	noring r iiiii					4	3.0	none N			License				
Start Date (10)		0 1 1 1			452-131		1	-567-1			01172	2			
		Schedule	D.		Date (11)				HA Monitor	,					
11/26/18		3/14	119				Hea	Ith & S	Safety S	ervice	s, Inc.				
Occupancy Status During	Abatement (Chec	k Only One	2)				Street	Addres	SS						
Facility Closed/Vaca	ted During Entire	Period of Al	oaten	nent			PO E	Box 3	65						
Abatement Performe	ed Outside of Norn	nal Facility	Hours	S			City, S	tate, Zi	p Code				-		
X Other – Describe: \(\triangle \)	/acant								08009						
Scope of Work (Check Al	That Apply)							,	00000			-			
≥3 sf or ≥3 lf	1,51,51,55,51							1							
≥160 sf or ≥260 lf			nova				<b>—</b>	Ful	Containm	nent with	n Negative	Press	sure		
			HIOH	.1011				50 SAN CRAS	i-Enclosur vebag Pro						
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		ls I	ocat	ion								T		temen	t
Location	of	#Y 10-2315	ormal			Doo		- 5					1	уре	
Asbestos-Containing I		Used			Ashes	tos Conta	cription		(ACM)		mount				
TO BE ABA	TED	Main Custo		36.7 T339	(i.e.	thermal	systems	insula	tion.	100	Specify	٦		E	ш
In Facilit	У	300000000000000000000000000000000000000	ulai 3 (12)	olan?		surfac	ing, VA	T, or			or LF)	em	\ ep	àp	Clo
(13)			(/			other m	iscellan	eous)				Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A								=		ate	0
Houses Deeme	d Unsafe			X	Ца	uaaa D		111		000		-	+	+	-
TIOGOGO DOCTIO	d Offsale			^	по	uses D	eemed	Uns	are	200 y	/d per re	s X			
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		+											-		
N (D															
Name of Registered Wast	e Hauler		250	JDEP W		Cubic \			Name of	Registe	red Landi	ill		_	-
Site Enterprises Inc.			100.300	auler ID		of Was	te		CCIA						
City, State			0	035220	)	20 cy									
	o N.I.					Disposa			City, Stat		50 Legal 30 Section 2				
Egg Harbor Township	U, NJ					Blul			Roseni	hayn,	NJ 0835	52			
Completed by		Title				Sig	gnature	1				ate		er en	S-11:21-2
Eric Keys		OM				1	lil	20				11/23	/201	3	
		-				- 4	100	to expressed of							



Date of Notification (1) 11/23/2018	8				of Building			r (2) gement and C	onstruction (	DPM	C)		594 st	
Agencies Notified  X EPA	Type Notification  Initial			Street A	Address est Stat	e Stree		goment and o		)V 2		201	8	
X EPA X DEP X DOL	Amended Amendment  Emergency		_	Trent	ate, Zip C on, NJ (	08625			an s e Anno	- E				
DOH DCA	justification)  Cancellation	morading			of Contact m Byste				Telephone (609)433					2
Name of Facility Where Abandoned Flood		g Place (3	)	FAC	ILITY INF	ORMAT	ION	Type of Facility	(4)					
Street Address 250 E Nantuxent D								Other (i.e.	12) er 8 (Other than I private & comm	K-12) ercial	buil	dings	hom	es,
City (5) Downe Township								Square Feet Varies	# of Floors Varies			ldg. <i>F</i>	\ge	
County (6) Cumberland					Code (7) USE ONLY	)			for if being demo		1)	10-11-		
Name of Monitoring Firm Health & Safety Se		Owner (8)		ASC	И No.		100	of Abatement Co Enterprises, I	1.00					
Street Address PO Box 365							Street	Address 6 Delilah Road	· 2					
City, State, Zip Code Berlin, NJ 08009							-	tate, Zip Code Harbor Town	ship. NJ 0823	34				
Project Manager for Mor James Proctor	itoring Firm			Telepho (856)4	ne No. 452-131	1	Teleph	none No. 567-1250	Licens 0117	e No.				
Start Date (10)		Schedule			Date (11)		selfilian meni	of OSHA Monitor						
Occupancy Status During Facility Closed/Vac		Only On	e)				Street	Address Box 365						
Abatement Perform  Other – Describe:	ed Outside of Norm	al Facility	Hours	6			City, S	tate, Zip Code n, NJ 08009						
Scope of Work (Check A	ll That Apply)							11, 140 00000					1000	
≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf			enova emolit				×	Mini-Enclosur Glovebag Pro					e	
Lassiisa	- 6	1100000000	Locati ormal			192						Abate	ment pe	
Location Asbestos-Containing TO BE AB/ In Facil (13)	Material (ACM) ATED	Used Mai	d Sole ntenar odial S (12)	ly by nce/	Asbes (i.e.	tos Cont thermal surfac	scription caining M systems cing, VA niscellan	laterial (ACM) s insulation, T, or	Amount (Specify SF or LF)		Removal	Repair	Encapsulate	Enclosure
Houses Deem	ed Unsafe			Х	Но	uses D	eemed	d Unsafe	200 yd per r	es 2	ζ.			
										-				
Name of Registered Was	te Hauler		N	JDEP W	aste /	Cubic	Yards	Name of	Registered Land	dfill				
Site Enterprises Inc.			100	auler ID 035220		of Was 20 cy	,	CCIA						
City, State Egg Harbor Townsh	ip, NJ					Dispos 3/14	sal Date \ાલ	City, Stat Rosen	e hayn, NJ 083	52				
Completed by Eric Keys		Title OM				S	ignature	The second secon		Date	3/2	2018		

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Data of Natification (4)				_					1					
Date of Notification (1) 11/23/2018							Operator (	2) ement and (	Constru	ction	PMC	7 20	18	
Agencies Notified	Type Notification	1			Address					0110111(0				
X EPA	□			33 W	/est Sta	te Stree	et .							
DEP	Initial Amended				tate, Zip (									
X EPA X DEP X DOL	Amendmen	t#			ton, NJ					1,				4
	★ Emergency				of Contac									
DOH DCA	justification Cancellatio			C25000000000000000000000000000000000000					8,650	lephone N				
<u> </u>	Caricellatio				am Byst				(6	09)433-	2001			
Name of Facility Where	Abatement is Taki	ng Place (	3)	FAC	ILITY IN	FORMAT		Type of Facility	v (4)					
Abandoned Flood I	House						Г							
Street Address								School (K Subchapt	(-12) er 8 (Oth	er than K	12\			
114 Bayview Road								Other (i.e	. private	& commer	cial bu	ildings	, hom	nes,
City (5)							9	etc.) Square Feet	# 0	f Floors		Bldg.	۸۵۵	
Downe Township							1000	Varies	1 21	ries		30+	nge	
County (6)				County	Code (7)			Current Use (P			- h - d\	JUT		
Cumberland					USE ONL	Y)		Housing De			snea)			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASC	M No.			Abatement C						
Health & Safety Se		(-)		7.00	WI IVO.			nterprises,		(9)				
Street Address							Street Ad							
PO Box 365								Delilah Roa	d					
City, State, Zip Code							500000000000000000000000000000000000000	te, Zip Code	u					
Berlin, NJ 08009								arbor Town	shin N	1 0823/				
Project Manager for Moni	toring Firm			Telepho	ne No		Telephor		isriip, N	License				
James Proctor					452-131	1		67-1250		01172	NO.			
Start Date (10)		Schedule	ed Cor		Date (11)			OSHA Monito	-	01172				200
11/26/18		3/14/			- 40 (1.1)			& Safety S	740	Inc				
Occupancy Status During	Abatement (Chec	k Only Or	e)				Street Ad		OI VIOCO	, 1110.				
Facility Closed/Vaca		· · · · · · · · · · · · · · · · · · ·	00/8/0	arana ke			PO Bo							
Abatement Performe	ed Outside of Norn	nal Facility	Hour	nent s				e, Zip Code						
Other - Describe: v	racant							NJ 08009						
Scope of Work (Check All	That Apply)						Denin,	140 00009						
≥3 sf or ≥3 If		П		4:				2 8 2						
≥160 sf or ≥260 lf		_	enova emoli				Н	Full Containn Mini-Enclosus	nent with	Negative	Pressu	ire		
<del></del>		<u> </u>						Glovebag Pro						
							X	Non-Exempte		Non-Fria	ble Pro	cedur	е	
			Locat									Abate		
Location	7.		lormal d Sole			Des	scription of					Ту	ре	
Asbestos-Containing N TO BE ABA			ntena		Asbes	tos Conta	aining Mate	erial (ACM)	Ar	nount			m	
In Facilit		Cust	odial S	Staff?	(i.e.		systems in		1 3000	pecify	Rer	ZD.	nca	Enc
(13)			(12)				niscellaneo		SF	or LF)	Remova	Repair	psu	Enclosure
		Yes	No	N/A							<u>a</u>	1	Encapsulate	ıге
Houses Deeme	al I la a a fa	-		SAME OF SAME										
nouses Deeme	d Unsale			X	Но	uses D	eemed L	Insafe	200 yo	d per res	X			
					277									-
		1						_			-			
Name of Registered Waste	e Hauler		N	JDEP W	aste	Cubic	Yards	Name of	Register	ed Landfil				
Site Enterprises Inc.			Н	auler ID	No.	of Was	te		register	eu Lanuill				
			0	035220	)	20 cy		CCIA						
City, State	. NII					Dispos		City, Stat						
Egg Harbor Township	), NJ					3/14	lig	Rosen	hayn, N	JJ 08352	2			
Completed by		Title				Şi	gnature				ite			
Eric Keys		OM					ub	0		1	1/23/	2018		

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

NOCL		N	OTIFICATI (Pursua	ON OF ASE	BESTOS A	BATEME 12:120)	ENT						
Date of Notification (1) 11-26-18				e of Building STOL MY			)			1 T	5 I	ar i	
Agencies Notified  EPA	Type Notification	1		t Address QUIBB DF	RIVE				3000		-40 s gr-		
X EPA X DEP X DOL	Amended Amendmen Emergency		_ NEV	State, Zip Co V BRUNS	SWICK, N	NJ 0890	)3	NO\	1-2	7 20	118	11.	1
X DOH X DCA	justification Cancellatio	)	PHII	of Contact L DESPIR	RITO			Telepho 732-2				S.A.	D 4
Name of Facility Where BRISTOL MYERS	Abatement is Taki	ng Place (3)	FA	CILITY INF	ORMATIO		ype of Facility (	4)					
Street Address 1 SQUIBB DRIVE	000100 - 000					×		8 (Other tha	an K-1 nmerc	2) ial bui	dings	, hom	ies,
City (5) NEW BRUNSWICK	<					- 1	quare Feet 0,000	# of Floo	ors	1/25	3ldg. /		
County (6) MIDDLESEX			County (STATE	y Code (7) E <i>USE ONLY</i> )	)		urrent Use (Prio						
Name of Monitoring Firm EHI	Hired by Building	Owner (8)	ASC	CM No.			Abatement Con		SEF	RVIC	ES.	INC.	
Street Address 655 WEST SHORE	TRAIL				S	Street Ad							
City, State, Zip Code SPARTA, NJ 07871							e, Zip Code DELPHIA, PA	A 19137					
Project Manager for Mon BILL KERBER	itoring Firm			one No. 729-5649	Т	elephone 215-53	e No.		nse N	0.			
Start Date (10) 11-28-18		Scheduled 3-31-19		n Date (11)	4.02		SHA Monitor	Z					
Occupancy Status During  Facility Closed/Vaca Abatement Performe	ited During Entire	Period of Aba	atement		S 2	treet Add	lress RALEY STR						
Other – Describe: _		iai Facility H	ours				, Zip Code DELPHIA, PA	A 19137					
Scope of Work (Check All ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	That Apply)		ovation nolition			×	Full Containme Mini-Enclosure Glovebag Proc Non-Exempted	edure				9	
Location		Non	cation mally		Descri	ption of		1) 4114 11011	riido	1	Abate		
Asbestos-Containing I TO BE ABA In Facilit (13)	TED	Mainte Custodi	Solely by enance/ al Staff? 2)	(i.e. t	os Containi thermal sys surfacing other misc	ing Mater stems ins g, VAT, o	ulation, r	Amoun (Specify SF or LF	/	Remova	Repair	Encapsulate	Enclosure
		Yes N	lo N/A	**SEE	ATTAC	HED S	HEET**			=	20	ate	e)
								X					
Name of Registered Waste													
HORIZON DISPOSA		x	NJDEP W Hauler ID		Cubic Yard of Waste	ds		egistered La		/S L/	AND	FILL	
City, State FRENTON, NJ					Disposal D	Date	City, State	SS HILLS					
Completed by IENNIFER NIVEN		Title DIR. OF	OPERA	TIONS	Signa	ature	2	-	Dat	e -26-1	18		
prompt to the same and the same and the same					1	1			1				

(15050 PAI	D		CATIO	tate of New Jerse N OF ASBESTOS to NJAC 8:60 an	ABATE		The state of the s		a 15	7 2 2		int-l
Date of Notification (1) NOVEMBER 23, 2018			Name o	of Building Owner/ STINE RAAB	Operator	(2)		N(	OV 2	2 7	2018	
Agencies Notified  Type Notification  EPA  DEP  Amended  Amendmen				ate, Zip Code			1	AME.	igori Lecu		1	1. 4
DOH Amendmen Emergency justification)  DCA Cancellatior	(including	-	Name o	K, NJ 08723 f Contact SITINE RAAB			Te	elephone N	umber	i		
				LITY INFORMAT								
Name of Facility Where Abatement is Takir RAABE PROPERTY  Street Address	ig Place (3)	)				Subch Subch	cility (4) ol (K-12) napter 8 (Otl (i.e. private	ner than K- & commer	12) cial bu	ildings	s, hom	es,
City (5) BRICK						etc.) Square Fee 1441	et # 0	of Floors		Bldg		
County (6) OCEAN				Code (7) USE ONLY)		Current Us RESIDE	e (Prior if be	ing demoli	shed)			
Name of Monitoring Firm Hired by Building N/A	Owner (8)		ASCN	I No.	Name Finis	of Abatemer shing Touc	nt Contracto ch Asbesto	r (9) os Abater	ment	Corp	., Inc	
Street Address						Address hompson	Street					
City, State, Zip Code						tate, Zip Coo t Long Bra		7764				
Project Manager for Monitoring Firm N/A			Telepho	ne No.		one No. 222.8372		License 00040	No.			
Start Date (10) DEC.3, 2018	Scheduled DEC.8,			Date (11)	Name N/A	of OSHA Mo	onitor					
Occupancy Status During Abatement (Chec Facility Closed/Vacated During Entire I Abatement Performed Outside of Norn Other – Describe:	Period of Al	batem	ent			Address	ie					
Scope of Work (Check All That Apply)												
≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf		enovat			×	Mini-Encl Glovebag	ainment with losure g Procedure mpted (*) an				re	
Location of	No	ocatio	4	Dec	scription					Abat	ement /pe	
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Main Custo	(12)	ce/ taff?	Asbestos Cont (i.e. thermal surface	aining M	aterial (ACN insulation, , or	(8	smount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
all walls & ceilings	Yes	No	N/A X	ioint	compo	und		800sf	-	-	e	- 100 A
living room, hall and bedroom 2			X		x9 vat	unu			Х	-		
bedroom 1							_	550sf	X	-		
bathroom 2	1,		X		x12vat			10 sf	X	-		
DatifiCOTT		- 1	X	12x12	var & m	INSTIC	1 2	10 sf	1 00	1		

ASB-41 (R-06-08)

Completed by JOSEPH P. MILLER

Name of Registered Waste Hauler

City, State WEST LONG BRANCH, NJ 07764

Finishing Touch Asbestos Abatement Corp.,ir

40 sf

Date

11/23/18

Name of Registered Landfill

FAIRLESS LANDFILL

MORRISVILLE, PA

City, State

12x12 vat & mastic

Signature

Cubic Yards of Waste

Disposal Date

12/8/18

5су

NJDEP Waste Hauler ID No.

12058

Title

**PRESIDENT** 

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

MAN	2	7	20	290
MOA	4	7	21	110
	-7			2 1

35445	PAI	D				BESTOS ABAT AC 8:60 and 5:1	6.1		. 7		- 7	San Andrews
Date of Notification (1)	21 /	18			of Buildin	g Owner/Operator ( sidential	2)	NOV 2	<del>. / -</del>	2018	/ <	<u> </u>
Agencies Notified	Type Notifica	ation		Street	Address			Formula 1		, (	1	-
⊠ DOLWD	Amended	I		Oit.	No. 1 7: 1	3 1	**	And the first	le serie	v.1	i Roma	<sub>- 1</sub>
⊠ DOH	Amendme		2000	- 1200	State, Zip (							
☐ DCA	☐ Emergen	cy (includ	ing		negat, N							
(NJAC 5:23-8)	justification Cancellat				of Contac	T.		Telephone Numb	er			
	Caricellat	1011		Vic								
Name of Facility Where	Abatament is T	okina Dla	22 (3)	FA	CILITYIN	FORMATION	I					
Residence	Abatement is i	aking Pia	ce (3)				Type of Facility (4 ☐ School (K-12)	1)				
Street Address							Subchapter 8	(Other than K-12)				
Oli CCI Addiess							Other (i.e., pri	vate and commerc	ial bu	ilding	s,	
City (5)			0242472-525				homes, etc.)	# of Elean	DI	d = 0		
Beach Haven West							Square Feet 850 sf	# of Floors		dg. A	ge	
County (6)				Cour	ty Code (7	(STATE USE ONLY)	ARTERIOR STORY		- 1	00		
Ocean				0001	ity oodo (i	NOTHIE GOT ONE T	Residence	i ii beilig delilolisi	ieu)			
Name of Monitoring Firm	Hired by Build	ling Owne	er (8)	ASCM	No.	Name of Abatem						
N/A		3	(-)				ntracting, Inc.					
Street Address						Street Address	na aoang, mo.					_
						1889 Route 9	). Unit 61					
City, State, Zip Code						City, State, Zip C						
							New Jersey 087	55				
Project Manager for Mon	itoring Firm		Tele	ephone	No.	Telephone No.		License No.				
						732-349-9932	2	00624				
Start Date (10)	S	cheduled	Comple	etion Da	te (11)	Name of OSHA N	Monitor					
12 /03 /	18	_12	/ _ 0	4_/	18	E.M.S.L. Ana	lytical					
Occupancy Status During	g Abatement (0	Check onl	y one)			Street Address				-		
☐ Facility Closed/Vacate						1056 Stelton						
Abatement Performed Time of Abatement: _						City, State, Zip Co	ode New Jersey 088	54				
Scope of Work (Check a	Il that apply)					· ioouturuy,	now delect dee	-		-		_
☐ >3 sf or >3 lf	3/3 5/3/		n				tainment with Nega	tive Pressure				
\(\sum_{\geq} \geq_{160} \text{ sf or } \geq_{260} \text{ lf}			Renovat Demoliti			☐ Mini-End	dosure g Procedure					
							mpted (*) and Non	-Friable Procedure	9			
			Is Loca Norma						Ab	atem	ent T	уре
Location Asbestos-Containing		, U	sed Sol		Asha	Description of stos Containing Ma		Amount	Re	Re	En	п
TO BE ABA	ATED	.   1	Maintena			, thermal systems	insulation,	(Specify	Removal	Repair	cap	Enclosure
IN Facil (13)	ity		ustodial (12)	-	20	surfacing, VAT other miscellane		SF or LF)	val		Encapsulate	ure
(13)		Ye		_		outer miscellane	ous)				ite	
exterior					asbesto	os siding		850 sf				T
						(5)						1
			Comment.	-						=	1	+=
											Ш	1
N						T =						
Name of Registered Was Guardian Contracti			1.00	Hauler II	O No.	Cubic Yards of Waste	Name of Registe T.R.R.F.	ered Landfill				
City, State				20223	)	3 Disposal Date	City, State			0	-	
Toms River, New J	ersey					12/04/18		Pennsylvania				
Completed By (Print or T		Title				Signature	1	Dat	e	1		
Nicholas Fernicola	561 6		ct Man	ager		S.g. diano	_//	1	Ĭ		8	
20			J	9°1			1 te	, (	121	11	3	

#### PAID

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

CK# 1945

Agendes Notified   Type Notification   Type	Date of Notification (1)	- I to the second			Building Ow					11.		6		7 1		2.2
September   Pack   Pa							Jucation				-		414-11-1			
Paramoted   Dep   Dep   Paramoted   Dep	Agencies Notified Type Notification	n														
DOL	EPA 🖾 Initial		1.							1111	+	NOV	2	<del>- 21</del>	<del>)18</del> -	-#
DOH	DEP Amended	nt #									1					17
DOH	Emergend		1			700				Tele	nhone	Numb	er		-	100
Name of Facility Where Abstement is Taking Place (3) School Street Address Indian Hills High School City (5) Oakland County (6) Passaic Name of Monitoring Firm Hired by Building Owner (8) Aero Environmental Street Address Street Address 300 Palisacide Ave City, State, Zip Code Stuceasuring, NJ 07876 Project Manager for Monitoring Firm Mike Berta Start Date (10) 12/06/18 Passaic Associated (10) 12/06/18 Project Manager for Monitoring Firm Telephone No. 973-920-9061 Project Manager for Monitoring Firm Start Date (10) 12/06/18 Passaic Associated Project Monitoring Firm Telephone No. 973-920-9061 Project Manager for Monitoring Firm Project Manager for Monitoring Firm Telephone No. 973-920-9061 Project Manager for Monitoring Firm Projec		n)								1010		5 Sec.				. 53
Name of Facility Where Abstement is Taking Place (3) School Street Address Indian Hills High School County (6) Oakland County (7) Oakland County (8) Passaic Name of Monitoring Firm Hired by Building Owner (8) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Monitoring Firm Hired by Building Owner (8) Name of Monitoring Firm Hired by Building Owner (8) Name of Monitoring Firm Hired by Building Owner (8) Name of Monitoring Firm Hired by Building Owner (8) Name of Monitoring Firm No. Street Address 275 Route 10 East City, State, Zip Code Succasunna, NJ 07876 Street Address Street Address 380 Palisade Ave City, State, Zip Code Gardfield, NJ 07026 Street Address Street Add	DCA Cancellati	on				u a c test	0.01								-	
School Syreet Address Indian Hills High School  City (S) Oakland County (Oath (County Code (T) County Code (T) County Code (T) County (Oath (T		dan Diana (2)		FACIL	ITY INFOR	MAII	ON	Type of	Facility (4	)						$\neg$
Section   Sect	100	ding Place (3)														
Section   Sect								X Sc	hooi (K-12	() 8 (Othe	er than k	<-12)				
Section   Sect							Aditio	T Ot	her (i.e. pr	ivate 8	comm	ercial	buildi	ngs, ł	omes	5,
County (6)	Indian Hills High School					Parlant District		etc					T 51-	- A -		
County (6)	City (5)									0.75	Floors				18	1
School   Passaic   Street Address   Stree	Oakland									31			1	J+ 		
Passaic Name of Monitoring Firm Hired by Building Owner (8) Aero Environmental Street Address 380 Pallisade Ave Street Address 380 Pallisade Ave City, State, Zip Code Garfield, NJ 07026 Project Manager for Monitoring Firm Mike Berta Start Date (10) Scheduled Completion Date (11) 12/11/18 Occupancy Status During Abatement (Check Only One) Street Address 380 Pallisade Ave City, State, Zip Code Garfield, NJ 07026 Project Manager for Monitoring Firm Mike Berta Start Date (10) Scheduled Completion Date (11) 12/11/18 Occupancy Status During Abatement (Check Only One) Street Address 380 Pallisade Ave City, State, Zip Code Garfield, NJ 07026 Project Manager for Monitoring Firm Mike Berta Start Date (10) Scheduled Completion Date (11) 12/11/18 Occupancy Status During Abatement (Check Only One) Street Address 275 Route 10 East City, State, Zip Code Succasunna, NJ 07876 Scope of Work (Check All That Apply) Street Address 275 Route 10 East City, State, Zip Code Succasunna, NJ 07876 Scope of Work (Check All That Apply) Street Address 275 Route 10 East City, State, Zip Code Succasunna, NJ 07876 Scope of Work (Check All That Apply) Street Address 275 Route 10 East City, State, Zip Code Succasunna, NJ 07876 Scope of Work (Check All That Apply) Street Address 275 Route 10 East City, State, Zip Code Succasunna, NJ 07876 Scope of Work (Check All That Apply) Street Address Street Address 275 Route 10 East City, State, Zip Code Succasunna, NJ 07876 Scope of Work (Check All That Apply) Street Address S	County (6)					2013				r if bei	ng demo	olishe	d)			
Aro Environmental    Name of Registered Waste Hauler Harmony Contracting Inc   Name of Registered Waste Hauler Inc   Name of Registered Waste Hauler Harmony Contracting Inc   Name of Registered Waste Hauler Harmony Contracting Inc   Name of Registered Waste Hauler Harmony Contracting Inc   Name of Registered Waste Harmony Contracting Inc   Name of Registered Wa	Passaic		1 (3	SIAIEU	SE UNLT				Billion was to we							
Aero Environmental n/a Harmony Contracting Inc  Street Address 380 Pallsade Ave  City, State, Zip Code Succasunna, NJ 07876  Project Manager for Monitoring Firm 793-920-9061 973460.6026 01255  Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 12/10/18  Start Date (10) Scheduled Completion Date (11) Name of County Status During Abatement (Check Only One)  Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other - Describe 13/47/180 Scheduled Completion  Scope of Work (Check All That Apply)  Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor Name of OSHA Monito	Name of Monitoring Firm Hired by Buildir	g Owner (8)		ASCM	No.		1									
275 Route 10 East  City, State, Zip Code Succasunna, NJ 07876  Project Manager for Monitoring Firm Mike Berta  Start Date (10) Scheduled Completion Date (11) 12/10/18  Coupancy Status During Absterment (Check Only One)  Facility Closed/Vacated During Entire Period of Absterment Absterment Performed Outside of Normal Facility Hours Other - Describer: STARTING AT 5:00em  Asbestos-Containing Material (ACM) In Facility (13)  Utility Closed 065 in  Name of Registered Waste Hauler Harmony Contracting INc  City, State  Name of Registered Waste Hauler Harmony Contracting INc  Telephone No. Telephone No. Telephone No. Telephone No. 1761ephone No. 1773-920-9081  Name of Registered Waste Hauler Harmony Contracting INc  Title  Signature  Date  Oity, State City, State City, State Cubic Yards Of Waste Guevalog  Name of Registered Landfill GROWS Landfill  GROWS Landfill  City, State Garfield, NJ Completed by Title  Signature  Date  Oity, State Signature Date  Oity,				n/a			Harm	ony C	ontracti	ng Inc	)					
City, State, Zip Code   City, State, Zip Code   Garfield, NJ 07026   City, State, Zip Code   City,	Street Address						Street A	ddress			10					
Succasunna, NJ 07876  Project Manager for Monitoring Firm	275 Route 10 East						360 P	alisac	evA et					rocalica		
Succasunna, NJ 07876  Project Manager for Monitoring Firm    Telephone No.   973-920-9061   Telephone No.   973-480.6026   01255     Start Date (10)   Scheduled Completion Date (11)   Aero Enrivironmental     12/11/18   12/11/18   Start Date (10)   12/11/18     Cocupancy Status During Abatement (Check Only One)   Street Address   275 Route 10 East     Facility Closed/Asacted During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours     Other - Describe: STARTING AT 5:00em   Street Address     23 or a3 lf   ≥ 160 sf or ≥260 lf   Renovation   Demoitton     Start Date (10)   Street Address   275 Route 10 East     City, State, Zip Code   Succasunna, NJ 07876     Succasunna, NJ 07876     Succasunna, NJ 07876   Succasunna, NJ 07876     Succasunna, NJ 07876   Succasunna, NJ 07876     Succasunna, NJ 07876   Succasunna, NJ 07876     Succasunna, NJ 07876   Succasunna, NJ 07876     Succasunna, NJ 07876   Succasunna, NJ 07876     Succasunna, NJ 07876   Succasunna, NJ 07876     Succasunna, NJ 07876   Succasunna, NJ 07876     Succasunna, NJ 07876   Succasunna, NJ 07876     Succasunna, NJ 07876   Succasunna, NJ 07876   Succasunna, NJ 07876     Succasunna, NJ 07876   Succasunna, NJ 07876   Succasunna, NJ 07876     Succasunna, NJ 07876   Succasunna, NJ 07876   Succasunna, NJ 07876     Succasunna, NJ 07876   Succasunna, NJ 07876   Succasunna, NJ 07876     Succasunna, NJ 07876   Succasunna,	City, State, Zip Code						City, Sta	ate, Zip	Code							
Project Manager for Monitoring Firm  Mike Berta  Start Date (10) 12/06/18  Occupancy Status During Abatement (Check Only One)  Facility Closed/Agacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other – Describe: STARTING AT 5:00em  Scope of Work (Check All That Apply)  Say of or ≥3 if  Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)  Utility Closed Vost of Sin  Stairwell Boys Team Room  Name of Registered Waste Hauler Harmony Contracting INc  Ciry, State  Renovation Demoition  Telephone Nc. 973-920-9061  Streat Address 275 Route 10 East City, State Completed by City City City City City City City Cit							Garfie	eld, N	J 07026							
Milke Berta   973-920-9081   973480.6026   01255	Secretary and the secretary an		TT	elephon	e No.		Telepho	ne No.			Licens	se No				
Start Date (10) 12/06/18 Cocupancy Status During Abatement (Check Only One)  Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other - Describe: STARTING AT 5:00pm  Scope of Work (Check All That Apply)  Scope of Work (Check All That Apply)  Asbestos-Containing Material (ACM) 10 BE ABATED In Facility (13)  Utility Closed 105 in  Stairwell Boys Team Room  Name of Registered Waste Hauler Harmony Contracting INc  Name of Registered Waste Hauler Harmony Contracting INc  Scheduled Completion Date (11) Aero Environmental  Aero Environmental Aero Environmental Aero Environmental Aero Environmental Aero Environmental Aero Environmental Aero Environmental Aero Environmental Aero Environmental Aero Environmental Aero Environmental Aero Environmental Aero Environmental Aero Environmental Aero Environmental City, State, Zip Code Succasunna, NJ 07876  Succasunna, NJ 07876  Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Asbestos Containing Material (ACM) (specify (s				973-92	20-9061		9734	60.60	26		0125	55				
12/11/18  Occupancy Status During Abatement (Check Only One)  Teacility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other - Describe: STARTING AT 5:00pm  Scope of Work (Check All That Apply)  ≥ 3 of or ≥ 3 if ≥ 150 of or ≥ 250 if  Location of Asbestos-Containing Material (ACM) In Facility (13)  Location of Asbestos-Containing Material (ACM) In Facility (13)  Utility Closed 065 in  Stainwell Boys Team Room  Name of Registered Waste Hauler Harmony Contracting linc  City, State Garfield, NJ  Completed by  Title  Street Address 275 Route 10 East City, State 275 Route 10 East City, State, Zip Code Succasunna, NJ 07876  Street Address 275 Route 10 East City, State, Zip Code Succasunna, NJ 07876  Street Address 275 Route 10 East City, State, Zip Code Succasunna, NJ 07876  Street Address 275 Route 10 East City, State, Zip Code Succasunna, NJ 07876  Street Address 275 Route 10 East City, State, Zip Code Succasunna, NJ 07876  Street Address 275 Route 10 East City, State, Zip Code Succasunna, NJ 07876  Store Address 275 Route 10 East City, State, Zip Code Succasunna, NJ 07876  Scope of Work (Check All That Apply)  Street Address 275 Route 10 East City, State, Zip Code Succasunna, NJ 07876  Scope of Work (Check All That Apply)  Street Address 275 Route 10 East City, State, Zip Code Succasunna, NJ 07876  Scope of Work (Check All That Apply)  Street Address 275 Route 10 East City, State, Zip Code Succasunna, NJ 07876  Scope of Work (Check All That Apply)  Street Address 275 Route 10 East City, State, Zip Code Succasunna, NJ 07876  Scope of Work (Check All That Apply)  Street Address 275 Route 10 East City, State, Zip Code Succasunna, NJ 07876  Scope of Work (Check All That Apply)  Street Address 275 Route 10 East City, State, Zip Code Succasunna, NJ 0787  Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (') and Non-Friable Procedure Non-Exem		Scheduled	Com	pletion D	Date (11)		Name o	f OSHA	Monitor							
Occupancy Status During Abatement (Check Only One)  Facility Closed/Vacated During Entire Period of Abatement Abatement Period medical City, State, Zip Code Cother - Describe: STARTING AT 5:000m  Scope of Work (Check All That Apply)  ≥ 3 sf or ≥ 3 if ≥ 150 sf or ≥ 250 if  Location of Abatement Period of Period of Abatement Period of							Aero	Enviro	onmenta	l						
Facility Closed/Vacated During Entire Period of Absternent Abatement Performed Outside of Normal Facility Hours Other – Describe: STARTING AT 5:00pm  Scope of Work (Check All That Apply)    23 sf or 23 lf   2180 sf or 2260 lf   2180 sf or 2		M. 10.000 NO.					Street A	Address								
Abatement Performed Outside of Normal Facility Hours Other - Describe: STARTING AT 5:000m  Scope of Work (Check All That Apply)  ≥ 3 sf or ≥ 3 lf ≥ 160 sf or ≥ 260 lf  Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)  Utility Closet 065 in  Very No N/A  Utility Closet 065 in  Stairwell Boys Team Room  Name of Registered Waste Hauler Harmony Contracting INc  City, State Succasunna, NJ 07876  Succasunna, NJ 07876  Full Containment with Negative Pressure Mini-Enclosure Glovebage Procedure Non-Exempted (*) and Non-Friable Procedure Nabestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  SF or LF)  Page In In Containment with Negative Pressure Mini-Enclosure Glovebage Procedure Non-Exempted (*) and Non-Friable Procedure Nabestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  SF or LF)  Page In In Containment with Negative Pressure Mini-Enclosure Glovebage Procedure Non-Exempted (*) and Non-Friable Procedure Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  SF or LF)  Page In In Containment with Negative Pressure Mini-Enclosure Glovebage Procedure Non-Exempted (*) and Non-Friable Procedure Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  SF or LF)  Page In In Complete Systems insulation, surfacing VAT, or other miscellaneous  SF or LF)  Asbestos Containing Material (ACM)  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous  SF or LF)  Page In In Containment with Negative Pressure  In Complete Systems insulation, surfacing VAT, or other miscellaneous  SF or LF)  Asbestos Containing Material (ACM)  Asbestos Containing Material (ACM)  Asbestos							275 F	Route	10 East							
Scope of Work (Check All That Apply)  ≥ 3 sf or ≥ 3 if ≥ 160 sf or ≥ 260 if    Pull Containment with Negative Pressure Mini-Enclosure Glovebag Procedure   Normally Used Solely by Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)    Utility Closet 065 in   X Pipe Insulation   X Pipe Insulat	Facility Closed/Vacated During Entire Abatement Performed Outside of N	re Period of Ab ormal Facility H	lours	ent			City, St	ate, Zip	Code							
Scope of Work (Check All That Apply)    Signature   Scope of Work (Check All That Apply)   Signature   Scope of Work (Check All That Apply)   Signature   Signatu	Other - Describe: STARTING AT 5:	maOn					1000000			7876						
Stairwell Boys Team Room   Stairwell Boys Team Room   Name of Registered Waste Hauler   Harmony Contracting INc   Name of Registered Waste Hauler   Harmony Contracting INc   Completed by   Title   Signature	Soons of Work (Chack All That Apply)															
Demolition    Signature   Demolition   Demolition   Demolition   Demolition   Demolition   Demolition   Demolition   Demolition   Mini-Enclosure Glovebag Procedure   Non-Exempted (*) and Non-Friable Procedure   Abatement Type   Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, Surfacing, VAT, or other miscellaneous)   SF or LF   Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, SF or LF   Description of Asbestos Containing Material (ACM) (Specify (SP or LF)   Description of Asbestos Containing Material (ACM) (Specify (SP or LF)   SF or LF   Description of Asbestos Containing Material (ACM) (Specify (SP or LF)   Description of Asbestos Containing Material (ACM) (Specify (SP or LF)   Description of Asbestos Containing Material (ACM) (Specify (SP or LF)   Description of Asbestos Containing Material (ACM) (Specify (SP or LF)   Description of Asbestos Containing Material (ACM) (Specify (SP or LF)   Description of Asbestos Containing Material (ACM) (Specify (SP or LF)   Description of Asbestos Containing Material (ACM) (Specify (SP or LF)   Description of Asbestos Containing Material (ACM) (Specify (SP or LF)   Description of Asbestos Containing Material (ACM) (Specify (SP or LF)   Description of Asbestos Containing Material (ACM) (Specify (SP or LF)   Description of Asbestos Containing Material (ACM) (Specify (SP or LF)   Description of Asbestos Containing Material (ACM) (Specify (SP or LF)   Description of Asbestos Containing Material (ACM) (Specify (SP or LF)   Description of Asbestos Containing Material (ACM) (Specify (SP or LF)   Description of Asbestos Containing Material (ACM) (Specify (SP or LF)   Description of Asbestos Containing Material (ACM) (Specify (SP or LF)   Description of Asbestos Containing Material (ACM) (Sp	1	manus	34				Summer of the su	Cull	Containm	ant with	Negati	ive Pr	essur	6		
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)  Ves No N/A  Utility Closet 065 in  Stairwell Boys Team Room  Name of Registered Waste Hauler Harmony Contracting INc  City, State Garfield, NJ  Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12)  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Amount (Specify SF or LF)  Republic In Figure In Stairwell Boys Team Room  Name of Registered Waste Hauler Harmony Contracting INc  Name of Registered Landfill GROWS Landfill  City, State Garfield, NJ  Completed by  Title  Signature  Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Amount (Specify SF or LF)  Republic In Figure  Abatement Type  Abatement Type  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Figure  Abatement Type  Abatement Type  Abatement Type  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Figure  Abatement Type  Abatemen	X   ≥3 sf or ≥3 lf	De Re					Carrier E House	Mini			1110921	.,				
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)  Ves No N/A  Utility Closet 065 in  Stairwell Boys Team Room  Name of Registered Waste Hauler Harmony Contracting INc  City, State Garfield, NJ  Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12)  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Amount (Specify SF or LF)  Republic In Figure In Stairwell Boys Team Room  Name of Registered Waste Hauler Harmony Contracting INc  Name of Registered Landfill GROWS Landfill  City, State Garfield, NJ  Completed by  Title  Signature  Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Amount (Specify SF or LF)  Republic In Figure  Abatement Type  Abatement Type  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Figure  Abatement Type  Abatement Type  Abatement Type  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Figure  Abatement Type  Abatemen	2100 \$101 2200 11			01.			X	Glov	ebag Prod	cedure			- D			
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)  Ves No N/A  Utility Closet 065 in  Stairwell Boys Team Room  Name of Registered Waste Hauler Harmony Contracting INc  City, State Garfield, NJ  Completed by  Is Location Normally Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Post Stairwell Boys Team Room  Is Location Normally Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Prope Insulation  Type  Type  Type  Type  Togethy Ser of LP)  Registered Landfill  Togethy Ser of LP  Registered Landfill  The Signature  Date								Non	-Exempted	d (*) an	d Non-	riabi				
Location of Asbestos-Containing Material (ACM)   Seed Solely by Maintenance (Custodial Staff? (12)   Yes   No   N/A		ls L	ocati	on										2000		
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)  Yes No N/A  Utility Closet 065 in  Stairwell Boys Team Room  Name of Registered Waste Hauler Harmony Contracting INc  City, State Garfield, NJ  Completed by  Title  Asbestos Containing Material (ACM) Maintenance/ Custodial Staff? (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Asbestos Containing Material (ACM) (Specify Specify Spe	Location of					D	escription	of								
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Utility Closet 065 in X Pipe Insulation 7.5 LF <  Stairwell Boys Team Room  Name of Registered Waste Hauler Harmony Contracting INc Name of Registered Landfill O33085 TBD Sisposal Date Garfield, NJ  Completed by Title Signature Date		Yes	No	N/A											6	
Stairwell Boys Team Room  Name of Registered Waste Hauler Harmony Contracting INc  City, State Garfield, NJ  Completed by  Title  NJDEP Waste Hauler ID No. 033085  Cubic Yerds of Waste GROWS Landfill GROWS Landfill City, State Morrisville, PA  Signature  Date						D:-	- 1	Alam			7515					
Name of Registered Waste Hauler Harmony Contracting INc  City, State Garfield, NJ  Completed by  NJDEP Waste Hauler ID No. 033085  Cubic Yards of Waste Hauler ID No. 033085  Cubic Yards Of Waste Gards GROWS Landfill GROWS Landfill City, State Morrisville, PA  Signature  Date	Utility Closet 065 in			×		PIP	e insuia	tion			.5 LF		Κ.		-	-
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Harmony Contracting INC  O33085  TBD  GROWS Landtill  City, State  Garfield, NJ  Completed by  Title  O33085  TBD  GROWS Landtill  City, State  City, State  Morrisville, PA  Date	For the state of															
City, State Garfield, NJ Completed by Title Disposal Date TBD Morrisville, PA Date	Harmony Contracting INc				1000000000				GHOV	VS La	indilli					
Garfield, NJ  Completed by  Title  TBD  Morrisville, PA  Date	City State					Disp	osal Date		City, Sta	te						
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E. Cirovic Secretary & Cinaria 11/23/18		Title				1	Signature	)				C 14 TSSE				
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Date of Notification (1)	1			Nam	e of Buildir	ng Owner/Operator	(2)	N	07	27	201	8
	23/	18				Custom Builder		3	5.6	1.5	1	
Agencies Notified	Type Notifi	cation		Stree	et Address			j;	1			
⊠ EPA ⊠ DOLWD	⊠ Initial			25	9 Monmo	outh Road		· · · · · · · · · · · · · · · · · · ·	,	40.00		
⊠ DOH	Amenda Amenda	777		City,	State, Zip	Code			112 1 12			
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(NJAC 5:23-8)	justifica		19	Nam	e of Contac	ot		Telephone Num	her			
	☐ Cancell	ation		Во	b Hankin	IS		732-300-123				
				FA	CILITY	NFORMATION		102 000 120				
Name of Facility Where	e Abatement is	Taking Plac	e (3)	.,	(OILITTII	II ORMATION	Type of Facility	(4)				
Residence							School (K-1	7.00				
Street Address							Subchapter	8 (Other than K-12	)			
							Other (i.e., p	private and comme	rcial b	uildin	gs,	
City (5)							homes, etc.	·				
Allenhurst							Square Feet	# of Floors	В	ldg. A	\ge	
County (6)				Cou	inty Code /	7)(STATE USE ONLY)	1200 sf	1		70		
Monmouth				000	inty Code (	(STATE USE UNLY)		rior if being demolis	shed)			
	m Hired by Rui	Iding Owner	/0\	ASCM	l Ma	The contract	Residence					
	389 Rte. 9, Unit 61 , State, Zip Code				I NO.	Name of Abatem		51				
Street Address							ntracting, Inc.	<u> </u>			750.00	
	889 Rte. 9, Unit 61 7, State, Zip Code foms River, New Jersey 08755					Street Address						-1357
						1889 Route 9						
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Nicholas Fernicol				ephone		Telephone No.		License No.				
Start Date (10)		0 1 1 1 1 1			9-9932	732-349-9932		00624				
		Scheduled C				Name of OSHA N						
		12		<u> </u>	18	E.M.S.L. Ana	lytical					
Occupancy Status Durin						Street Address						
☐ Facility Closed/Vaca	ted During Ent	ire Period of	Abate	ment		1056 Stelton						
Abatement Performe Time of Abatement:	Outside of N	lormal Facilit	y Hou	rs - Des	scribe	City, State, Zip Co	ode					
		PIVI/	—PIVI		_AIVI	Piscataway, I	New Jersey 08	854				
Scope of Work (Check a	all that apply)			7722			-					
$\boxtimes$ $\geq$ 3 sf or $\geq$ 3 lf $\square$ $\geq$ 160 sf or $\geq$ 260 lf			enovat emoliti			☐ Mini-Enc	g Procedure					
		l le	Loca	tion	T	□ Non-Exe	mpted (*) and No	n-Friable Procedur	1			
Location	n of		Norma			Description o	e .		At	atem	ent T	уре
Asbestos-Containing	Material (ACN	n) Use	d Sol		Asbe	stos Containing Ma		Amount	Re	Re	Ē	E
TO BE AB IN Faci		1000	intena todial	Staff?	(i.e	, thermal systems	insulation,	(Specify	Removal	Repair	Encapsulate	Enclosure
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3,00 - SE		Yes	No	N/A	1	out of Thiodoliano	ous)				ite	
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			П	П					1		-	1
Name of Registered Wa	ste Hauler		_	JDEP \	Naste	Cubic Yards of	Name of Regis	torod Landell	Ш		ш	Ш
Guardian Contract	ing, Inc.			auler II	O No.	Waste 3	T.R.R.F.	stered Landini				
City, State			-		20	Disposal Date	City, State					_
Toms River, New J	ersey					12/06/18	3.0	Pennsylvania				
Completed By (Print or T	уре)	Title				Signature	1	A Dat	0 1			_
Nicholas Fernicola		Project	Man	ager		-3.4.0	1	/	e	, ,	1,0	
SB-41						V )	1111	1	1	1 5	110	

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Date of Notification (1) 11/20/2018			Name of Bill La	of Building ( asala	Owner/	Operator	(2)		NO	V 2	7 2	)18	the state of the s
Agencies Notified Type Notification			Street /	Address				12.5	140	¥ 2	4 4	110	
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Emergency (		-		of Contact	470			1 7					
DOH justification)  DCA Cancellation			Bill La					l le	lephone i	Number			
			FAC	ILITY INFO	RMAT	ION		1					
Name of Facility Where Abatement is Taking House	Place (3	3)					Type of Facility	(4)					
Street Address							School (K-	12)					
oli del Address							Subchapte Other (i.e.	r 8 (Oth orivate	er than K & comme	(-12) ercial bu	ildina	s. hom	ies.
City (5)							etc.)					20	1/8
Wayne							Square Feet N/A	N//	f Floors A		Bldg. N/A	Age	
County (6) Passaic			County (STATE	Code (7) USE ONLY)			Current Use (Pri House	or if be	ing demo	lished)			
Name of Monitoring Firm Hired by Building C N/A	wner (8)		ASCI	M No.		Name D&S	of Abatement Con Abatement, Ir	ntractor	(9)				
Street Address						Street	Address						
City, State, Zip Code							osengren Ave	nue					
							tate, Zip Code va, NJ 07512						
Project Manager for Monitoring Firm			Telepho	ne No.			one No. 345-8685		License 01311				
Start Date (10) 11/30/2018	Schedule		npletion	Date (11)		10 (22 of 12	of OSHA Monitor						
Occupancy Status During Abatement (Check							Abatement, In	C.					
Facility Closed/Vacated During Entire P	eriod of A	batem	ent			11 R	sengren Aver	nue					
Abatement Performed Outside of Normal Other – Describe: occupied	al Facility	Hours			_		ate, Zip Code va, NJ 07512						
Scope of Work (Check All That Apply)													
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova emoliti				×	Full Containme Mini-Enclosure Glovebag Prod	edure					
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Location of	1963.03	Location			-							emen ype	ı
Asbestos-Containing Material (ACM)		d Solel		Asbesto		scription aining M	ot aterial (ACM)	А	mount			T <sub>m</sub>	
TO BE ABATED In Facility	0.0000000000000000000000000000000000000	odial S		(i.e. ti		systems	insulation,		pecify or LF)	Rer	R	Encapsulate	Enc
(13)		(12)				niscellan		Si	OI LF)	Removal	Repair	psul	Enclosure
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Basement		Х				VAT		47	'0 SF	Х			
						-30000							
Name of Registered Waste Hauler			JDEP Wauler ID	500	Cubic '		Name of F	Registe	red Land	fill			
D&S Abatement, Inc.			996	2002337	TBD	il G	Waste N	Manag	jement	of PA			
City, State Totowa, NJ 07512	2				Dispos TBD	al Date	City, State Morrisvi		A				
Completed by	Title					gnature	~2-N	/ /		Date			_
Ned Joksimovic	Projec	t Ma	nager			-	STI			11/20/	2018		

#### State of NJ Notification of Asbestos Abatement D&S Proj. #: 18-251 (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) 1 1 1/2 0 1/1 18 1 jaime j. raskulinecz Agencies Notified Type Notification Street Address ☐ EPA Initial Amended DEP City, State, Zip Code Amendment #: X DOL M Emergency west orange, nj 07052 (including DOH. Name of Contact Telephone Number justification) ☐ DCA Cancellation jaime j. raskulinecz **FACILITY INFORMATION** Name of facility where abatement is taking place (3) Type of Facility (4) School (K - 12) jaime j. raskulinecz Subchapter 8 (Other than K-12) Street Address Other (Private/Commercial Bldgs./Homes, etc. Bldg. Age Square Feet # of Floors City (5) County (6) County Code (7) (State use only) Current Use (Prior if being demolished) west orange essex Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Abatement Contractor (9) D & S RESTORATION, INC. Street Address Street Address 20 California Ave. City, State, Zip Code City, State, Zip Code Paterson, NJ 07503 Project Manager for Monitoring Firm Phone Number Telephone Number License Number 973-345-8020 01169 Start Date (10) Name of OSHA Monitor Sched. Completion Date (11) D & S Restoration, Inc. 11/21/1818 Street Address Occupancy Status During Abatement (Check only one) 20 California Avenue Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Other-Describe: NORMAL HOURS Paterson, NJ 07503 Scope of Work (check all that apply) Full Containment w/negative pressure $\times$ >3 sf or >3 If Renovation Mini-enclosure Glovebag procedure ≥160 sf or ≥260 lf Demolition Non-Exempted (\*) and Non-friable procedure Is location normally used solely Location of by maintenance/custodial Ε asbestos-containing е Description of asbestos-containing n Amount staff(12) n material (acm) to be m C material (ACM) (Specify SF or abated in facility (13) 0 C a а Yes LF) No N/A p BASEMENT PIPE INSULATION 100-110 lft Registered Waste Hauler NJDEP Hauler ID# Cubic Yards of Waste Name of Registered Landfill D & S RESTORATION, INC. 13506 TULLYTOWN, RESOURCE RECOVERY City, State Disposal Date City, State PATERSON, NJ 07503 11/22/18 TULLYTOWN, PA Completed by (Print or Type) Title Signature Date **BOGDAN JOLDZIC** PRESIDENT 11/20/2018 Do not use this form for asbestos licensure exempted activities. ASB-41

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Troibin 1	A		(Pursu	ant to N	ASBESTO JAC 8:60 a	S ABAT and 12:1:	EMENT 20)		: 119		, <u>i</u>		
Date of Notification (1) 11-19-18				ne of Build	ding Owne				NOV	2	7 3	2018	
Agencies Notified Type Notificati	on		Stre	et Addres 00 Hadle									
DEP Amended Amendment	ent#		City,	State, Zip									. ći
DOH Emergence justification Cancellati	n)	ing		e of Conta	act			Teleph 908-3			r		
Name of Facility Where Abatement is Tal	ring Dlas	- (0)	F	ACILITY I	NFORMA	TION		900-3	19-1	126			
Sand Hill Substation	ang Placi	e (3)					Type of Facilit	y (4)					
Street Address 184 Harts Lane							X Other (i.e	<-12) ter 8 (Other the private & co	nan K-1 mmerc	2) ial bi	uilding	gs, ho	mes
City (5) East Brunswick							etc.) Square Feet N/A	# of Flo			Bldg	. Age	
County (6) Middlesex			Count (STAT	ty Code (7	7) (LY)		Current Use (F	Prior if being d	emolis	hed)	N/A	9	
Name of Monitoring Firm Hired by Building N/A	Owner (	(8)		CM No.		Name	of Abatement C	ontractor (9)					
Street Address N/A			1 1 1/2	•		Street	Address	ital Service	s, Inc	•			
City, State, Zip Code N/A				<u> </u>		City, S	ld Dock Rd tate, Zip Code						
Project Manager for Monitoring Firm N/A			Teleph N/A	none No.		Teleph	ank, NY 1198 one No.		ense Ne	0.			
Start Date (10) 11-30-18	Schedu 12-17	uled Co		n Date (11	1)	Name o	024-8111 of OSHA Monitor						
Occupancy Status During Abatement (Che							Environment	al Services	s, Inc.				
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr	Period of	A 1 4 -	ment			17 Old	Address d Dock Rd						
Other - Describe: Electrical circuit cab	inet	ly Hour	S				ate, Zip Code ank, NY 1198	30					
Scope of Work (Check All That Apply)  ≥3 sf or ≥3 If										-			
≥160 sf or ≥260 lf		Renova Demoli				×	Full Containm Mini-Enclosure Glovebag Pro	e cedure					
	Is	s Locati	on				Non-Exempte	d (*) and Non-	-Friable	Pro	97.87		
Location of Asbestos-Containing Material (ACM)	Use	Normal ed Sole	ly by	Asbes	Des	cription o	f terial (ACM)		-			emen /pe	T
TO BE ABATED In Facility (13)	Cus	intenar todial S (12)	ice/ Staff?	(i.e	thermal s. surfaci	systems in ng, VAT, scellane	nsulation, or	Amount (Specify SF or LF		Removal	Repair	Encapsulate	Enclosure
Control II	Yes	No	N/A							/al	Ŧ	late	ure
Control House			X	Non-fr	riable tra	nsite fl	por panels	38 SF	2	ζ.			
Name of Registered Waste Hauler		1							$\dashv$	-			
Vaste Management		Ha	IDEP W Juler ID 273		Cubic Yaste TBD		Name of F	Registered Lar	ndfill				
City, State Elizabeth, NJ 07201					Disposal TBD	Date	City, State						
Completed by Raymond Tutiven	Title Super	visor				ature	IVIOTTISVII	le, PA 1906	Date				

State of New Jersey

CC 207	7 PA	III				BESTOS 8:60 and					යා ලේ	7	F)		
Date of Notification (1) 11/23/2018						Owner/C				27 17		coverne sem			
	Type Metification					roperty	Manag	geme	nt and C	onstruction	(PPI	MC)	201	8	
Agencies Notified	Type Notification			Street A		te Stree	t								1
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X DEP X DOL	Amendmen			5.000	on, NJ					9 20	<u>L</u> a				5
☑ DOH	Emergency justification)		1		f Contact			*		Telephon	e Nur	nber			
DCA	Cancellation			Willia	m Byste	er				(609)4					
AL				FAC	ILITY INF	ORMATI	ON								
Name of Facility Where Abandoned Flood		ng Place (	3)					Туре	of Facility	(4)					
Street Address	nouse								School (K-						
34 Paris Road								$\overline{\boxtimes}$		r 8 (Other that private & com			dings,	hom	es,
City (5)					Squa	re Feet	# of Floor	S	E	Bldg. A	Age				
Lawrence Townshi	р							Var	25	Varies			30+		
County (6)				County	Code (7) USE ONL	n			and the same of th	ior if being de		ed)			
Cumberland						,			8.77	emed Unsa	fe				
Name of Monitoring Firm Health & Safety Se		Owner (8)		ASC	ЛNo.				atement Co rprises, I	ntractor (9) nc.					
Street Address							Street					- 1			
PO Box 365							6626	6 Deli	ilah Road	d					
City, State, Zip Code									ip Code						
Berlin, NJ 08009							47797			ship, NJ 08	234				
Project Manager for Mon James Proctor	itoring Firm			Telepho	ne No. 152-131	4	Teleph				nse No	<b>)</b> .			
Start Date (10)								09-567-1250 01172							
11/26/18		314		ripietion	Date (11)					ervices, Inc					
Occupancy Status During															
Facility Closed/Vaca				nont			Street /								
Abatement Perform	ed Outside of Norn	nal Facility	Hours	S		1			ip Code						
Other - Describe:	vacant	-				- 1			08009						
Scope of Work (Check A	ll That Apply)														
≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf			Renova Demoli					Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure							
							X	No	n-Exempte	d (*) and Non-	Friabl	e Pro	cedur	е	
		37/2	Locat										Abate	ment pe	t
Location		100000000000000000000000000000000000000	Normal d Sole				cription						1 9	pe	
Asbestos-Containing TO BE ABA	ATED		intena todial S			stos Conta . thermal:				Amount (Specify		<sub>Z</sub>		Enc	m
In Facili (13)	ty	Cus	(12)	otali!			ing, VAT			SF or LF	)	Remova	Repair	aps	Enclosure
(10)		Yes	• • •	T		other in	nscenario	eous)				val	=	Encapsulate	ure
			No	N/A											
Houses Deemed Unsafe				X	Но	uses D	eemed	Uns	afe	200 yd per	res	X			
Name of Registered Was			5300	IJDEP W lauler ID		Cubic \ of Was				Registered La	ndfill				
Site Enterprises Inc.				035220		20 cy		CCIA							
City, State	in NII					September 2	al Date	The state of the s							
Egg Harbor Townshi	ip, NJ	T:0				3/14/19			Hosen	hayn, NJ 08	_				
Completed by Eric Keys		Title OM		Signature					Date 11/23/2018						
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Date of Notification (1) 11/23/2018	AIA				of Buildin	ng Owner	r/Operato	r (2)		<u>. 4 5</u>	155		14.5			
	Type Notification			Divis	sion of I	Propert	y Mana	gement and	Cons	truction (I	OPMC	;)				
		1	Address Vest Sta	ate Stre	et		NOV	27	201	8	11.5					
■ DEP     ■ DEP	Amended				tate, Zip											
	Amendme  X Emergence	nt # y (including	-	Tren	iton, NJ											
<b>⊠</b> DOH	justification	1)			of Contac		Telephone	Numbe	r							
☐ DCA	Cancellation	on			am Bys					(609)433	-2001					
Name of Facility Where Al	batement is Tak	ing Place (3	)	FAC	CILITY IN	FORMA	TION	Town of Facilities	1 (1)							
Abandoned Flood H	ouse		/					Type of Facil								
Street Address							School (K-12) Subchapter 8 (Other than K-12)									
116 Bayview Road								Other (i.	e. priva	te & comme	ercial b	uilding	s, hor	nes.		
City (5)						-		etc.) Square Feet								
Downe Township								Varies	1,70	of Floors		Bldg.				
County (6)	County (6)								Varies Varies  Current Use (Prior if being de				30+			
Cumberland		(STATE	Code (7)	.y)		Housing D										
Name of Monitoring Firm H	lired by Building	Owner (8)		ASC	M No.		Name	of Abatement (								
Health & Safety Serv	vices							Enterprises,		.0. (0)						
Street Address								Address								
PO Box 365							6626	Delilah Roa	ad	Í						
City, State, Zip Code																
Berlin, NJ 08009							Egg	Harbor Tow	nship,	NJ 0823	4					
Project Manager for Monitor  James Proctor	oring Firm			Telepho		server i		phone No. License No.								
Start Date (10)					452-13			-567-1250 01172								
. A	1	npletion	Date (11	)		e of OSHA Monitor										
Occupancy Status During Abatement (Check Only One)								alth & Safety Services, Inc.								
-				100000000000000000000000000000000000000	et Address Box 365											
Facility Closed/Vacate Abatement Performed	Outside of Nor	Period of Almal Facility I	oatem Hours	nent												
Other - Describe: vac	cant	man r dollity i	iouis	,			1 120.00	ate, Zip Code								
Scope of Work (Check All T	hat Apply)						Deni	n, NJ 08009								
≥3 sf or ≥3 lf		П	nova	tion												
≥160 sf or ≥260 lf		-	moliti					Mini-Enclose	ment wi	t with Negative Pressure						
						X	Glovebag Pr	ocedur	е							
								Non-Exempt	ted (*) a	nd Non-Fria	able Pr	72454-1-225	2000			
Location of		6000	ocation ocation									Abatemen Type				
Asbestos-Containing Ma		Used	Solel	y by	Ashes	Des	scription	of aterial (ACM)		Amount		1	Γ			
TO BE ABATE	ED	- TOO DO AND A	Maintenance/ Custodial Staff?			. thermal	systems	insulation,	ation, (Sp		Z	_	Enc	m		
In Facility (13)			(12)			surfac	cing, VAT niscellane	, or	SFo		Remova	Repair	aps	Enclosure		
		Yes	No	N/A		outer it	nsochane	ous)			val	≝	Encapsulate	ure		
Uniona D		165	NO										O			
Houses Deemed	Unsafe	X			Но	uses D	eemed	Unsafe	200	yd per re	SX					
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Name of Registered Waste I	egistered Waste Hauler					Cubic `	Varde	Name -	ered I If				<u> </u>			
				IDEP W auler ID	No.	of Was			i Kegist	ered Landfi	H					
95/8			00	35220	)	20 cy		CCIA								
City, State	N. I						al Date	City, Sta	ite							
Egg Harbor Township,	IVJ	T =-				3/14	19	Rosenhayn, NJ 08352								
Completed by Eric Keys		Title				Si	gnature									
Life Reys	Keys OM						Cuil	20	1	1/23/	2018					

#### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) 11/23/2018 Division of Property Management and Construction (DPMC) Agencies Notified Type Notification Street Address NOV 2018 33 West State Street XXX **EPA** Initial DEP Amended City, State, Zip Code DOL Amendment # Trenton, NJ 08625 Emergency (including Name of Contact DOH justification) Telephone Number DCA Cancellation William Byster (609)433-2001 FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Abandoned Flood House School (K-12) Street Address Subchapter 8 (Other than K-12) 118 & 120 Bayview Road Other (i.e. private & commercial buildings, homes, X etc.) City (5) Square Feet # of Floors Bldg. Age Downe Township Varies Varies 30 +County (6) County Code (7) Current Use (Prior if being demolished) Cumberland (STATE USE ONLY) Housing Deemed Unsafe Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Health & Safety Services Site Enterprises, Inc. Street Address Street Address PO Box 365 6626 Delilah Road City, State, Zip Code City, State, Zip Code Berlin, NJ 08009 Egg Harbor Township, NJ 08234 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. James Proctor (856) 452 - 1311 609-567-1250 01172 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 11/26/18 Health & Safety Services, Inc. Occupancy Status During Abatement (Check Only One) Street Address Facility Closed/Vacated During Entire Period of Abatement PO Box 365 Abatement Performed Outside of Normal Facility Hours City, State, Zip Code X Other - Describe: vacant Berlin, NJ 08009 Scope of Work (Check All That Apply) ≥3 sf or ≥3 If Renovation Full Containment with Negative Pressure X ≥160 sf or ≥260 lf Demolition Mini-Enclosure Glovebag Procedure Non-Exempted (\*) and Non-Friable Procedure Is Location Abatement

Asbestos-Containing Material (ACM)		ed Sole			Description of		Туре					
TO BE ABATED In Facility (13)	Ma	aintenai stodial S (12)	nce/	Asb (i.	estos Containing Mate e. thermal systems in surfacing, VAT, o other miscellaneo	Amount (Specify SF or LF)	Removal	Repai	Encapsulate	Enclos		
	Yes	No	N/A					<u>a</u>	7	late	ıre	
Houses Deemed Unsafe			Х	Н	ouses Deemed L	200 yd per res	Х					
	-	1										
Name of Registered Waste Hauler		N.	JDEP W	aste	Cubic Yards	Name o	f Registered Landfill					
Site Enterprises Inc.			Hauler ID   0035220		of Waste 20 cv	CCIA						
014 01 1											- 1	

Title

OM

Disposal Date

Signature

3114/19

Completed by

Eric Keys

City, State

Egg Harbor Township, NJ

Date

11/23/2018

Rosenhayn, NJ 08352

City, State

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Date of Notification (1) 11/23/2018				10.100000000000000000000000000000000000		g Owner/0	11.00	1000					_		111							
						roperty	Manag	gem	ent and C	Construction	n (MDA)	ME)	/ 2	018								
	7,70							Street Address 33 West State Street														
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X Er	nendment #_ nergency (inc	Trenton, NJ 08625							and the second of the second o													
DOH jus	stification)				of Contac	-		Telephone Number														
П роч	ancellation				m Byst					(609)	133-2	001										
Name of Facility Where Abatement Abandoned Flood House	nt is Taking P	lace (3	)	FAC	ILITY IN	ORMAT	ON	Тур	pe of Facility	0.000000 0.000000												
Street Address								H	School (K- Subchapte	-12) er 8 (Other tha	an K-11	21										
122 Bayview Road								X	Other (i.e.	private & cor	nmerci	al bui	ldings	, hom	es,							
City (5)								7777	etc.) uare Feet	# of Flor	ore		Slda	Δαο								
Downe Township								170	aries					Bldg. Age 30+								
County (6)			Code (7)					rior if being de			= K# ()											
Cumberland				1.00	USE ONL	r)		Ho	ousing De	emed Unsa		36										
Name of Monitoring Firm Hired by Health & Safety Services		ASCI		ne of Abatement Contractor (9) e Enterprises, Inc.																		
Street Address						t Address																
PO Box 365					6626	26 Delilah Road																
City, State, Zip Code				111 12-111-111			City, S	y, State, Zip Code														
Berlin, NJ 08009					- 1		Egg	Egg Harbor Township, NJ 08234														
Project Manager for Monitoring Fir James Proctor		Telepho (856)	1	Teleph		No. -1250		ense No	0.													
Start Date (10)							609-567-1250 01172 Name of OSHA Monitor															
11/210/18		3/14		750				Health & Safety Services, Inc.														
Occupancy Status During Abatem	ent (Check Or	nly One	3)				Street															
Facility Closed/Vacated Durin	g Entire Perio	d of Al	oaten	nent			PO E	Box :	365													
Abatement Performed Outsid  Other – Describe: vacant	e of Normal F	acility I	Hours	S		_		State, Zip Code rlin, NJ 08009														
Scope of Work (Check All That Ap	ply)						Dem	11, 11	10 00009													
≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf			enova				×	M G	lini-Enclosur lovebag Pro					e								
		Is L	ocati	ion										ement								
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Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)  Used S Mainte Custod				nce/		thermal s surfac	taining Material (ACM) systems insulation, cing, VAT, or niscellaneous)			Amount (Specify SF or LF)		Remova	Repair	Encapsulate	Enclosure							
	,	res	No	N/A								<u>m</u>		ate	ē							
Houses Deemed Unsafe				Х	Но	uses De	Deemed Unsafe			200 yd per res		Х										
Name of Registered Waste Hauler			N	JDEP W	aste	Cubic Y	'ards		Name of	Registered La	andfill											
Site Enterprises Inc.			Н	auler ID 035220	No.	of Wast			CCIA	rvedisteten F	anuilli											
City, State Egg Harbor Township, NJ						Disposa			City, State	e hayn, NJ 0	9250											
Completed by	Т	itle				3/4/p			HUSEIII	iayii, NJ U												
Eric Keys		Signature						Date 11/23/2018														