## CX 2863

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

REREBUSUS

Date of Notification (1) 11/24/12				Building Ow Hill Fire S	ner/Operato		12 11011							
Agencies Notified Type Notification		S	treet Ad				12 NOV 2							
EPA Initial Amended Amendment				e, Zip Code utherford	NJ 07073	** ( <u>)</u>	& LICI	indif	∀G	ACRES W				
Emergency (i justification)  DCA  Emergency (i justification)  Cancellation	nciuaing	1000		s Lemano				Tolon	hana Ni	umher —		1116-3-		
Name of Facility Where Abatement is Taking Carlton Hill Fire Station	Place (3)		FACIL	ITY INFOR	MATION	☐ s	of Facility (4 chool (K-12	2)						
Street Address 107 Carlton Avenue						o et	ubchapter 8 ther (i.e. pr tc.)	ivate & c	commer	cial bui				s,
City (5) East Rutherford NJ 07073				ē.		Square 1000-	+ -	# of F		;	Bldg 35	g. Ag +	je	
County (6) Bergen		6		SE ONLY)	· · · · · · · · · · · · · · · · · · ·		nt Use (Prio			ished)				
Name of Monitoring Firm Hired by Building C Envirovision	Owner (8)		ASCM 00079		Per	naco In		ractor (9	9)			•		
Street Address 20-21 Wagaraw Rd Bldg 34A	4			8		et Address Box 32								
City, State, Zip Code Fair Lawn NJ 07410						State, Zip est Berlir	Code NJ 0809							
Project Manager for Monitoring Firm Guillermo M Morales			Telephon 973-63	ne No. 6-9145	100	phone No 3-753-98			License 00727					
Start Date (10) 12/10/12	Schedule 12/14/1		pletion [	Date (11)	Nam Sai		A Monitor							
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire I Abatement Performed Outside of Norm Other – Describe:	Period of A	batem	ent			et Addres				<u>Verifice</u>	23-35			
Scope of Work (Check All That Apply)						_	1							
≥3 sf or ≥3 lf ≥ 160 sf or ≥260 lf		enova emoliti				Min Glo	Containme i-Enclosure vebag Prod n-Exempted	e edure	200				•	
		Locati											ment	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Mai	lormali d Sole intenar odial S (12)	ly by nce/	(i.e. th	Description Descri	g Material ems insula VAT, or		(Sp	nount pecify or LF)	Kemoval	,	Repair	Encapsulate	Enclosure
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Basement	х			F	loor Tile	/ Mastic		22	0 SF	×	4			
	-		-								+			
Name of Registered Waste Hauler Pernaco Inc	1	H	I IJDEP W lauler ID 1787	No.	Cubic Yard of Waste 3	s	Name of G.R.O.	1000	ed Land	dfill		2.91121.52	72	
City, State W Berlin NJ					Disposal Di 12/14/12	ate	City, Stat Morrisv		1906	7				
Completed by Anthony T Perna	Title Presi	ident			Signa	ture			1	Date 11/24	1/1	2		

City. State		D G I	10			Signatu	ire .	1/0.	Da	11/23	/12		
Name of Registered	o INC,	:	H	JOEP W. auter 10 1	No.	Cubic Yards of Waste	_   _	C, N	9, C, M.U	, A,			=
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Scope of Work (Chec ≥3 sf or ≥3 lf ≥160 sf or ≥260 li		Dem	cation			Mini-	Enclosure		on-Friable Proce	dure	bater Typ		
Abatement Perform Other - Describe:	med Outside of Norma	Facility F	10urs						gative Pressure				Ξ
Occupancy Status Di	uring Abatement (Che	1100 01 / -		ent		Street Addres 3 6 City, State, Zip	95,		.vu= d vc		-	==	=
itant Date (10)	5 17	uled Com	11	n Date (1	11)	0 0	SEPH		Enn			•	=
roject Manager for M		ı l'			_	Name of OSH		` ,				===	_
ity, State, Zip Code		<del></del> -	alanh	one No.	-	Talanhone No.	PLES		License No.				-
treet Address	*				-	O: Ctale 7in	Code	270 - 71		, 08 05	- 7		-
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l Dr C-	m Hired by Building O	wner		CM No.	T	Name of Abate	ment Contr	actor (9)	С,				_
ounty (6) a			To	ounty Co	ode (7) Y)	STATE		VAG	r if being demoli	sneu)			_
7 <del>7</del> (5)	11-15 Pce	C 19	LY				Square		# of Floors				
110	-5117 4 MC G	Transaction of the second	15	Lui	=== !		Da Other	(i.e., prives, etc.)	(Other than K-12 rate & commerci	al building			
me of Facility Where	Abatement is Taking	Place (3)					Type of F	N (K-12)					
DCA	Cancellation		F			RMATION							
рон	Emergency (inclination)  Cancellation	uding	Nar	me of Co	ontact	EDUAR			Telephone Numb	er			
EPA DEP DOL	Amended Amendment #		City	State.	Zip Co	16 19LF (1)	TY N	1-	Carolina	115	L.		-
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Date of Notification (	(1) lovember 21, 2012			of Buildir	ng Owner / Operator							
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	1		Dino N		INFORMATION	i		<u>i_</u>				
Name of English W/h	ere Abatement is Takir	na Dinan (2)	FA	CILITY	INFORMATION							
Bank of America	ere Abatement is Takir	ig Place (3)			Type of Fac	I (K-12)						
Street Address						apter 8 (Othe						
21 Park Place					-			cial building			tc.)	
City (5)					Square Fee		of Floors 2 + baser		g. Age	49		
Englewood						(Prior if bein				49		
					Bank		3	- A				
County (6) Bergen		County Code				4.						
	Firm Hired by Building ting Consultants, LLC			ASCM	No. Name of Ab	atement Con	tractor (9)	36				
Street Address					Street Addr	ess .	Masking and an allow	31777			- 7.5	
One Mall Drive, Sui City, State & Zip Coo					829 Radio							
Cherry Hill, NJ 080					City, State &	S ZIP Code Harbor, NJ 0	8087					
Project Manager for Howard Zenobi	Monitoring Firm		lephone 1 6-482-13		Telephone I 609-296-69	Number		License Num	ber 0081	7		
Scheduled Start Date		uled Completi	on Date (	11)	Name of OS	SHA Monitor			0001			
	uring Abatement (Chec	ck only one)	ber 23, 2	2007	Synatech, I Street Addre	ess						
	sed/Vacated During En Performed Outside of N			nt	829 Radio I							
Abatement Other – Des		Normal Hours	)		City, State 8	s zip Code Harbor, NJ 0	9097					
1000-6-0000	upled During Abateme	nt			Little Egg i	Tarbor, NO 0	0007					
Scope of Work (Che								- Anne consecuent		VI SOURCE		.189_753
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≥3 sf or ≥ 50 lf ≥160 sf or ≥26		P	Renovation Demolition		P	Mini-Enclos						
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Lo	cation of	Is Locati	on Norma	ally Used	l Descrir	otion of	ipieu( ) anu i	Non-Friable Pr	_	atem	ent T	vne
Asbestos-Conta	aining Material (ACM)	Solely b	y Mainter	nance or	Asbestos-	Containing		ount (Specify				,,,,
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		1 2 2	4		or other mis	cellaneous)			Remova	Repair	cap	nclo
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Little Egg Harbor, N			-		ber 26, 2012	Morrisvill			wv			
Completed By	Title			Signati		_ 1	Date		N.			
Diane Aloia	Evec	itive Admini	strator	IAY	11hre (11/1	10	Novom	hor 21 2012				

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	al	(Pu	rsual	nt to A	JAC 8	:60 and 1	2:12	20)		(8/2 NO	<i>y</i>		٧	CD
Date of Notification (1)			N	ame of		Owner/Open	rator (a	2) (	,	s	,5	8 1	4	_
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Agency Notified	Type Notification		S	treet Ad	(1)	ninu'	ä	Τ :		& L/C	Fu	COL	1	- <b>7</b>
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D DEP DOL	Amended Amendment#		1	500	Th	BINE	R	N13.	0000	7		-	4	
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DOH	☐ Cencellation			70	0	III .			,				1	
		(0)	15		TY INFO	RMATION	$\neg$	Type of Facility	(4)				7	
Name of Facility Where A	batement is Taking Place	3 (3)	113*				- 1	☐ School (K-12	)				1	
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Street Address	DER NO.							/ homes, etc.)					4	
	DER NID.						1	Square Feet	# of Floors	Bldg. Ac	12		-	
City (5)		10-10-10-10-1				-	_	Compat Use (P)	nor if being dem		_		4	
County (6)			0	County (	Code (7)	(STATE US	=	Current Ose (F	RESIDE			7.		
Hidden	EX		SCM			Name of A	batem	ent Contractor (						
Name of Monitoring Firm	Hired by Bullding Owner	^	WOUNT !			NOUP							4	
(8)						Street Add		AT-1000000	:.					
Street Address	**					City, State	202	(814		20.0				-
City, State, Zip Code	•						30	IDGE	NO.05	385+				ii.
	II - Firm	Tel	ephon	e No.		Telephone	No.		License No.	3.0				
Project Manager for Mor	morng run.	1.0	ор			732) {		8x7500	0080	36 .	_			
Start Date (10)	Scheduled Go	mpletic	on Dat	e (11)		Name of C	SHA	Monitor IA	9.C					
11/20/11		30 1	2			Street Arid	( <del>-    (</del>	<del>2017   1</del>	0.0					1
Occupancy Status Durin	ng Abatement (Check only	(onle)			į.	PO. 1	30	X 814						1
Facility Closed/Vacat	ed During Entire Period o d Outside of Normal Facil	f Abate ity Hou	ement IIS			City, State	Zig!	Code	80 :CIU	257-		*		
☐ Other - Describe:	OGGSUS CE TOURISME					01D	0							1
Scope of Work (Check	all that apply)	.;.		,		)	(Full	Containment will Enclosure	th Negative Pres	SUITE		(32)		
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CARDS AME	ADA INE	5 ( C	his for	m for as	sbestos	licensure ex	empt	ed activities.						
ASB-41	DOIR				7									

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

GAC Project # 060-12 Client Project # Name of Building Owner/Operator (2) RUTGERS, THE STATE UNIVERSIT Date of Notification (1) November 21, 2012 Street Address ENVIRONMENTAL HEALTH & SAFETY Notification Type Agencies Notified IX Initial Notification 27 ROAD 1, BLDG 4086, LIVINGSTON CAMP ☐ EPA ■Amended Notification D DCA City, State, Zip Code ■ Emergency (including X DOL PISCATAWAY, NJ 08854 justification) DEP- No Longer REQUIRED Telephone Number Name of Contact □ Cancelled X DOH MICHAEL SMITH, ENV. **HEALTH & SAFETY** FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) 12 LAFAYETTE STREET, BLDG# 3171 ■ Subchapter 8 (other than K-12) X Other (i.e. private & commercial buildings, homes, etc.) Street Address # of Floors: 3 Bldg. Age: 80+ years **COLLEGE AVENUE CAMPUS** Sq. Feet: N/A County Code (7) County (6) Current Use (prior if being demolished): ACADEMIC City (5) (State Use Only) **MIDDLESEX** NEW BRUNSWICK Name of Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. GREENWOOD ABATEMENT CONSULTANTS, INC. 0098 ATC ASSOCIATES Street Address Street Address 3 TERRI LANE 268 MAIN STREET City State, ZipCode City, State, Zip Code BUTLER, NJ 07405 BURLINGTON, NJ 08016 License Number Telephone Number Telephone Number Project Manager for Monitoring Firm 609-386-8800 00840 **BRIAN KEARNY** 973-492-0477 Name of OSHA Monitor Scheduled Completion Date (11) Scheduled Start Date (10) 12/03/12 ENVIROVISION, INC. 11/30/12 Street Address Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement 20-21 WARGARAW ROAD ■ Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code Describe ☑Other - Describe: Shift Hours: 4:00 PM FRI - 5:00 AM MON FAIRLAWN, NJ Full Containment with Negative Pressure Scope of Work (Check all that apply) Mini-Enclosure ▼Renovation ≥ 3 sf or ≥ 3 lf Glovebag Procedure Demolition Non-Exempted (\*) and Non-Friable Procedure ≥ 160 sf or ≥ 260 Abatement Type Description of Asbestos Containing Material Amount Is Location Normally Used (Specify SF Location of Asbestos-Containing (ACM) (i.e. thermal systems insulation, surfacing, Remove Repair Encap Enclose Solely by Maint./Custodial Material (ACM) in Facility (13) or LF) VAT, or other miscell.) Staff? (12) NO NA YES 140 SF X VAT X Room 106 Name of Registered Landfill 5 CY NJDEP Waste Hauler ID # Cubic Yards of Waste: G.R.O.W.S. North Landfill Name of Reg. Waste Hauler See Below See Hauler Below #1 & 2 City, State Disposal Date Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 100 New Ford Mill 12/03/12 Rd. Morrisville, Pa NJDEP # 12561 19067 Hauler #2) Horizon Disposal Services, Inc., Trenton, NJ 08611 215-736-1700 NJ DEP# 22612 Date November 21, 2012 Reymand C. Pedalino Completed by (Print or Type) SENIOR PROJECT RAYMOND C. PEDALINO MANAGER

Check # 21518

Date of Notification (1)				Т			Owner/Operator (2	2) (2)	CEIVE	D			
11 / _	21 /	12	_		Ullm	an Famil	y Partnership						
Agencies Notified	Type Notificati	on		$\dashv$	Street A	Address		COIZN	OV 28 AM 7:	51			
⊠ EPA					3900	Millenia	Blvd.	1		o;			
DEP	☐ Amended		89	+	City, St	ate, Zip Co	ode	- Jac.	LICENSING Telephone Number	101	D. D. Co.		
<ul><li>☑ DCA (NJAC 5:16)</li><li>☑ DHSS</li></ul>	Amendmen		ıdina		Orla	ndo, FI 3	2839	ě	LICENSING	UL.			
□ DCA	☐ Emergency justification		iding	-	Name o	of Contact			Telephone Numbe	r			1
(NJAC 5:23-8)	☐ Cancellatio	n			Thor	nas Bau	er	1					
					FAC	ILITY INF	ORMATION						
Name of Facility Where	Abatement is Ta	king P	Place (3	)	- Participant			Type of Facility (4	1)				
Former State Farm			Š					School (K-12)	1				
Street Address								Subchapter 8	(Other than K-12) vate & commercial	buildi	nas.		
1750 Route 23								homes, etc.)	vate a commercial		·3-,		
City (5)			4 11 15 5				<u></u>	Square Feet	# of Floors	Bld	g. Ag	е	
Wayne								100,000	1		0+		
County (6)				51167	Count	y Code (7)	(STATE USE ONLY)	Current Use (Price	or if being demolishe	ed)			
Passaic								Vacant					
Name of Monitoring Firm	Hired by Buildi	ng Ow	ner (8)	17	ASCM N	No.		ent Contractor (9)					
R.A. West Associa			3.5				Diamond Hu	ntbach Constru	ction Corporation	on			
Street Address	•						Street Address	7					
2865 South Eagle I	Road #359						500 East Luz	erne Street					
City, State, Zip Code							City, State, Zip C	ode					
Newtown, PA 1894	.0						Philadelphia	, PA 19124					
Project Manager for Mor				Tele	phone N	No.	Telephone No.	11	License No.				
Bob West	572a III			21	5-860-	5026	215-739-8166	3	00646				
Start Date (10)	S	chedul	led Cor	nple	tion Dat	e (11)	Name of OSHA N	/lonitor					
12 /06 /	12	01	_ /	27	_ / _	13	SAME AS AE	BOVE					
Occupancy Status Durin	g Abatement (C	heck o	only on	e)		-	Street Address	77					
☐ Facility Closed/Vacat					ment								
Abatement Performe					s - Des	cribe	City, State, Zip C	ode					
Scope of Work (Check a	all that anniv)												
Scope of Work (Officer a	iii tiiat appiy)	_						tainment with Neg	ative Pressure				
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>			☐ Ren ☑ Dem				Mini-End     Gloveba	a Procedure					
△ ≥100 SI 01 ≥200 II		2	Z Den		<u> </u>		⊠ Non-Exe	empted (*) and No	n-Friable Procedure				
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Location				rma Sole	ely by	Asha	Description stos Containing M		Amount	교	교	m	m
Asbestos-Containing TO BE AB		,			ince/	(i.e., the	mal systems insu	lation, surfacing,	(Specify	Removal	Repair	cap	Enclosure
IN Faci	lity			dial (12)	Staff?	***********	VAT, or		SF or LF)	\sigma	,	Encapsulate	sure
(13)			Yes	No	N/A	1	other miscellan	eous)				ite	
Thoughout Building	9			$\boxtimes$		Black F	loor Mastic		61,000 SF	$\boxtimes$			
Window Sills				$\boxtimes$		Transit	e Window Sills	500 TS 5 1	300 LF	$\boxtimes$			
Boiler				$\boxtimes$		Flue Br	reeching		250 SF	$\boxtimes$			
Boiler				$\boxtimes$		Boiler (	Gasket on two b	ooliers	84 LF	$\boxtimes$			
Name of Registered Wa	iste Hauler			I	NJDEP \	Waste	Cubic Yards of	Name of Regis	tered Landfill				
Diamond Huntbac		on		F	lauler II		Waste	Minerva					
City, State			0 10		19689	1	n/a Disposal Date	City, State					
Philadelphia, PA 1	9124						n/a		rg, OH 44688				
Completed By (Print or		Title					Signature	)	Da Da	te		1	
Charles Imbimbo	· 3pc/	200419000	oject l	Vlan	ager		1//	11,11	Sh	///	21	/12	_
Charles inibilibo							- In	2/ Del			/		

Date of Notification (1)			T	Name	of Building	Owner/Operator (2	2)	ED	()	10		
11/21	/12	2		Ulln	nan Fami	Owner/Operator (2	2 NOV 28 44	_				
Agencies Notified Typ	e Notification			Street	Address	4	- AM	7:51	H0X			11128
	nitial				) Millenia	a Blvd.	ESTOS CON ELICENSINO					
	Amended	i		Cîty, S	tate, Zip C	ode d	LICENSUN	TROI				
	Amendment # Emergency (i			Orla	ndo, FI 3	32839	- Lusing	}				1)
□ DCA	ustification)			Name	of Contact			Telephone Number	er			13
(NJAC 5:23-8)	Cancellation			Tho	mas Bau	er						
				FAC	ILITY IN	FORMATION	2					
Name of Facility Where Abate	ment is Takin	o Place	(3)				Type of Facility (4	3)			34 000413	
Former State Farm Buil		3	1-7				☐ School (K-12)	••• (				
Street Address				-			Subchapter 8	(Other than K-12)				
1750 Route 23							Other (i.e., privalent homes, etc.)	vate & commercial	build	ngs,		
City (5)				1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -			Square Feet	# of Floors	Blo	lg. Ag	je	
Wayne							100,000	1	4	0+		
County (6)	-			Coun	ty Code (7)	(STATE USE ONLY)	Current Use (Prio	r if being demolish	ed)			
Passaic							Vacant					
Name of Monitoring Firm Hire	d by Building	Owner (	8)	ASCM	No.	Name of Abateme	ent Contractor (9)	et .				
R.A. West Associates, I	nv.					Diamond Hur	ntbach Constru	ction Corporati	on			
Street Address			_			Street Address					Marine 1	
2865 South Eagle Road	#359					500 East Luze	erne Street					
City, State, Zip Code		7773				City, State, Zip Co	ode					
Newtown, PA 18940						Philadelphia,	PA 19124					
Project Manager for Monitorin	g Firm		Tele	phone I	No.	Telephone No.		License No.				
Bob West	•		1	5-860		215-739-8166		00646				
Start Date (10)	Sche	duled C	omplet	ion Da	te (11)	Name of OSHA M	lonitor		0.000	0-10-0		
12 / 06 / 12		01 /	1971			SAME AS AB	OVE	15				
Occupancy Status During Aba						Street Address			-	-		
□ Facility Closed/Vacated Du				nent		Oli CCL / Lauricos						(8)
☐ Abatement Performed Outs					cribe	City, State, Zip Co	nde			W: 14		-
Time of Abatement: 7AM-	5PM/P	M	_AM			Oity, Gtate, Zip Ge	,40					
Scope of Work (Check all that	annly)			_		L						
Scope of Work (Officer all that	apply)						ainment with Nega	ative Pressure				
☐ ≥3 sf or ≥3 lf			novati			Mini-Enc     Clavebox     Clavebox						
≥160 sf or ≥260 lf		☑ De	molitio	n		Glovebag     Non-Exe		-Friable Procedure	•			
		0.00	Locat	- 1000 m						atem	ent T	ype
Location of		444	Normal d Sole	The state of the s		Description o			71	71	Ш	ш
Asbestos-Containing Mate TO BE ABATED			intena		Asbe	stos Containing Ma rmal systems insula	terial (ACM)	Amount (Specify	(em	Repair	nce	ncl
IN Facility		Cust	todial S	Staff?	(1.6., 1116	VAT, or	ation, sandonig,	SF or LF)	Removal	₩	psu	Enclosure
(13)			(12)		1	other miscellane	ous)		_		Encapsulate	ď
	XX 181	Yes	No	N/A				300 SF	M			
Boiler					Boiler L							
Tank						sulation on one	tank	200 SF				
Roof					Roof FI	ashing		900 SF		Ц		
			$\boxtimes$				F			Ш	Ш	
Name of Registered Waste Ha	auler		1982	JDEP \		Cubic Yards of	Name of Regist	ered Landfill				
Diamond Huntbach Cor	nstruction	ñ	Н	auler II 19689		Waste n/a	Minerva		181			
City, State		4980		9		Disposal Date	City, State					
Philadelphia, PA 19124	7 -					n/a		g, OH 44688				
Completed By (Print or Type)	Tit	93				Signature	11/1/	) A Dat		1	-	
Charles Imbimbo		Project	Mana	ager		11/2	C/11/16	75/1 1/1	12	11	12	

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te of Notification (1) /21/2012		Bo	me of Build prough o	ding Owner of Wood-F	Ridge	(2)	C 0 1	2 NOV	28 A	M 7:	50		-
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DOH justification) Cancellation		A	llen Barr				2 1						
			FACILITY	/ INFORMA	ATION	Type of	Facility (4)			N=0			
ame of Facility Where Abatement is Taking P Vood-Ridge Intermediate School	ace (3)					ĭ Sch	nool (K-12) ochapter 8 ner (i.e. priv	Other that	an K-12) nmercial	building	gs, ho	mes,	
reet Address 51 1st Street						l etc	.)				. Age		_
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ity (5) Vood-Ridge				I- (7)		10,000	Use (Prior		emolishe				-
county (6)		C	ounty Cod	e (/) EONLY) _		Middle	School						_
Bergen	ner (8)	4	ASCM N	0.	Nam	e of Abate	ment Contr	actor (9)					
lame of Monitoring Firm Hired by Building Ow Environmentral Connection, Inc.	1101 (0)		0030				ruction C	orp					_
Street Address					Stree	Address	16 Suite	15					
120 North Warren Street						State, Zip							
City, State, Zip Code					Tot	owa, NJ	07512		10000				
Trenton, New Jersey 08608		17	Telephone	No.	Tele	phone No.	B Vorans		cense No	).			
Project Manager for Monitoring Firm Roland C. Jones			212-952			3-339-97		0	1034				_
Ot - + Data (10)	Scheduled	Com	pletion Da	ate (11)	Nam	ne of OSH	A Monitor struction (	Corp					
11/26/2012	11/29/20					et Address							
Occupancy Status During Abatement (Check	Only One	)			20:	5 Route	46 Suite	15					
Facility Closed/Vacated During Entire P	eriod of Al	atem	ent		City	, State, Zij	Code						
Abatement Performed Outside of Normal     Other – Describe: from 4pm to 12am	al Facility	Hours	,			towa, N							
Scope of Work (Check All That Apply)		_							3800 772	2 998			
anaza d <sup>a</sup>	X R	enova	ition			× Full	Containme	ent with N	legative F	ressur	е		
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TO BE ABATED In Facility	Cust		Staff?	9.50	surfacing	VAT, or		SF	or LF)	Remova	Repair	Encapsulate	1
(13)		(12)	$\overline{}$		other misc	ellarieous)		Ü)s		25.		ate	-
	Yes	No			D&M Wa	II plaster		20.	5 SF	x		x	T
Multiple locations, hallway, gym, cl	#	X			fittings -			38	3 LF	x			T
Teachers room, hallway, office		X		131	VAT/r			12	8 SF	x			T
8 Classrooms, 16SF each		X			VALA								T
8			NJDEP V	Vaste	Cubic Ya	rds	Name o	f Registe	red Land	fill			_
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Newark Carting			04509		Disposal	Date	City, Sta						_
City, State					11/29/2		Morris	eville,					_
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Date of Notification (1)			- 1		Building C	)wner/	Operator			50 2 00000	,				7	
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Agencies Notified	Type Notification			Street Ad 216 Rd	ddress oute 206	Suit	e 7									
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L BOX	- Carlocilation				LITY INFO	RMAT	ION	-								
Name of Facility Where	Abatement is Takin	g Place (3)							of Facility (4 School (K-1	2)		(40)				
Street Address 216 Route 206								×	Subchapter Other (i.e. potc.)	rivate	& comme					es,
City (5) Hillsborough								Squar 4375	e Feet	# 0	f Floors		BI 24	dg. A 1	ge	
County (6) Somerset	<del></del>			County (	Code (7) ISE ONLY)	_		Curre	nt Use (Prio	r if be	ing demo	lished	i)			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCM	l No.				tement Con onmental			LC				
Street Address	<del></del>							Addres Gate D	s Drive, PO	Box	483			3110		
City, State, Zip Code									p Code , NJ 074	18						
Project Manager for Mor	nitoring Firm		T	Telephor	ne No.			none No 583-8		E (e)	License 703	e No.				
Start Date (10) 12/7/12		Scheduled 12/17/12		pletion [	Date (11)		Name	of OSH	A Monitor							
Occupancy Status Durin	g Abatement (Che		+				Street	Addres	ss			- Boot				
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Freehold Cartage		4	Н	lauler ID 5939		of W 10			GROW	SNL						
City, State Freehold, NJ			22 1			Disp TBD			City, State Morrisv		A					
Completed by Andrew Scott Higgin	าร	Title Presio	lent	8			Signature	e (1)				11/2		2		

#### State of New Jersey

CICH MESSIVED NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) MS. MALGARET HERBURADES AM 7:49 Name of Building Owner/Operator (2) Date of Notification (1) 23/12 Type Notification Agency Notified Street Address 27 WICKERS ST 2 Initial O EPA City, State, Zio Code ☐ Amended E DOL Amendment # CLIFTON. NJ. 07015 Emergency (including Name of Contact ELDOH .. justification) D DCA ☐ Cancellation HS. DEBRA HOLDOUAN FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) MS. MARGARET HERBRANDT School (K-12) Street Address ☐ Subchapter 8 (Other than K-12) D'Other (i.e. private & commercial buildings, WICKERS homes, etc.) City (5) · . # of Floors Square Feet Bidg. Age 65 years 2000 County (6) County Code (7) (STATE USE Current Use (Prior if being demolished) ONLY) RESIDENCE Name of Monitoring Firm Hired by Building Owner ASCM No. Name of Abatement Contractor (9) Best Removal Inc Street Address Street Address 450 S.River St City, State, Zip Code City, State, Zip Code Hackensack, N.J. 07601 Project Manager for Monitoring Firm License No. Telephone No. Telephone No. 00388 201-329-7444 Scheduled Completion Date (11) Start Date (10) Name of OSHA Monitor Omega Environmental Inc 12/5/12 12/6/12 Occupancy Status During Abatement (Check only one) Street Address 280 Huyler St D Facility Closed/Vacated During Entire Period of Abatement D Abatement Performed Outside of Normal Facility Hours D Other - Describe: >>>> TO SPH City, State, Zip Code South Hackensack, N.J. 07606 Scope of Work (Check all that apply) EFull Containment with Negative Pressure Renovation **□≥3**sfor≥3f ☐ Mini-Enclosure Z ≥ 160 af or ≥ 260 if □ Demolition ☐ Glovebag Procedure U Non-Exempted (\*) and Non-Friable Procedure Abatement Is Location Type Normally Location of Used Solely by Description of Containing Material (ACM) os Containing Material (ACM) Amount Maintonanno Encapsulate TO BE ABATED Removal (i.e., thermal systems insulation, (Specify Custodial IN Facility surfacing, VAT, or SF or LF) Staff? (13) other miscellaneous) (12) No NA BASELLEN VAT 750 SF BASELLENT 100 LF THERMS INSUMITION Name of Registered Waste Hauler Name of Registered Landfill NJDEP Waste Hauler Cubic Yards of Waste ID No. . Best Removal Inc 3.50 Minerva Enterprises 17109 City, State Disposal Date City, State Hackensack, N.J. 07601 Waynesburg , Oh

Completed by

J. Maiorano

Title

Estimator

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

Signature

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11

Date of Notification (1)	1/23/12				0	Owner/Operator	(2)	2012 NOV 28	AM -	7		
Agency Notified	Type Notification	;	SI	reet A	ddress	NIECEX	ECC=~	TOVIDO	111 /	4	8	
DEPA DEP BYTOL	2 Initial D Amended Amendment #		C	ity, Sta	ite, Zip C	obo.	08830	TRADIOS O	ING	OL		
DOH	☐ Emergency (including justification)☐ Cancellation	g	N.	ame o	CAT (	uck MU	RPHY	Telephone Num	ber		-	
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BASF Street Address	Abatement is Taking Place ESEY ESSE		PIC	· · · ·	•		ET Other (i.e. pri homes, etc.)	) i (Other than K-12) ivate & commercia	building			
City (5) -	25.40						Square Feet	# of Floors	Bidg. A	•		,
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County (6)				OUNTY WLY)		(STATE USE		ior if being demoli				
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Street Address						Street Address	n: C+					
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City, State, Zip Code	05					Hacken	sack N.	J. 07601				
SLARTA	NJ 0787	1 70	ephone	- Ma		Telephone No.	Back, Iv	License No.		_		
		le	ерпопк	# NO.			7444 -					
JEAN-PAUL JON	Scheduled C	- malati	on Date	(11)		Name of OSHA	Monitor					
Start Date (10)		7 ,	/12			Omega En	vironmen	tal Inc				
Occurancy Status Duri	ng Abatement (Check on		1,5			Street Address						
	•1					280 Huy	ler St					
☐ Facility Closed/Vacal ☐ Abatement Performe ☐ Other — Describe:	ted During Entire Period of Outside of Normal Fac	ity Hou	rs ··			City, State, Zip C	Code [ackensac	k, N.J.	07606	5		
Scope of Work (Check: D≥3 sf or ≥ 3 if D≥160 sf or ≥ 260 if	all that apply)		-		ovation notition	2 Full 2 Mini	Containment with Enclosure	Negative Pressur	e ,			
		ls	Locatio	en .		8				Ab	aten Typ	
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Name of Registered W Best Remov		ID	DEP W No. 710		fauler .		Minerv	stered Land	ises			
	nsack, N.J.	076	01			Disposal Date Signature //	City, State Waynes	burg , Oh	Date .	<u> </u>	_	
J. Maiorano						- 1/	nicrona		11/.	23	13	<u>ک</u>

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#### Size of New Joney NOTIFICATION OF ABBESTOR ABATEMENT (Products to PLACE 1225 one 12722)

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Credited Manager for Monstering Firm	- Wa	Telephone No. WASHES AP APPROVI										
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\* Do not use this form for authorites franceine exempted beliefess.

Date of Notification (1) November 23, 201		Name o	f Building	Owner/O	Operator (	bight 28	1 1/ 400	() Check # !	5506					
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DOH DCA	Emergency justification) Cancellation			30.00	f Contact ullivan				Te	ephone Nu	mber			
	-				LITY INF	ORMAT	ION							
Name of Facility Where Residence	Abatement is Takir	ng Place (3	)		214			Type of Facility	1965 30		0			
Street Address 223 40th Street								Other (i.e.	er 8 (Oth	er than K-1: & commerci		dings	, hom	ies,
City (5) Sea Isle City								etc.) Square Feet 2600	# o	f Floors		31dg.	Age	
County (6) Cape May					Code (7) USE ONLY	"		Current Use (P Residence	rior if be	ing demolish	ned)			
Name of Monitoring Firm	ASCN	/ No.			f Abatement Co Environme									
Street Address PO Box 341	~		Street A		,			1						
City, State, Zip Code Chesterfield, NJ 08		•	City, Sta	State, Zip Code le Shade, NJ 08052										
Project Manager for Monitoring Firm Teleph Bill Weisgarber 609-2							Telepho		00002	License N 00842	0.			
Start Date (10) November 26, 201	Date (11)		Name of	f OSHA Monito	r	00042								
Occupancy Status Durin		Decem		2, 201			EMSL							
Name 200		O A STATES	230		247		Street A	addon Ave					*	
Facility Closed/Vac Abatement Perform Other – Describe:	ned Outside of Norr	Period of A nal Facility	Hours	nent			City, Sta	te, Zip Code nont, New J	loreov	09109	77	· Marie		
Scope of Work (Check A	All That Apply)						vvestii	TIOTIL, INGW	остосу	00100				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	or ≥3 If × Renovation						×	Full Containn Mini-Enclosu Glovebag Pro Non-Exempte	re ocedure				<b>-</b> 0	
		le	Locat	on				TYOH Exemple	T	a reon-i nab	T		emen	t
Location	n of	l N	lormal	ly	7	Des	scription o	f				T	/ре	
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility  Used S Mainte Custodi			ntena	nce/		tos Cor-t thermal surfac	aining Ma systems i cing, VAT,	ing Material (ACM) stems insulation, g, VAT, or cellaneous)		mount specify or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A							=		ite	G.
Throughout F				XXX		Tile a	and Mas	tic	57	00 SF	XXX			
Exteri	or			XXX			Siding		27	00 SF	XXX			
Throughout F	Residence			XXX		Sh	eetrock		60	00 SF	XXX			
<sub>Ex</sub> Exteri			********	XXX		k/Glazi	ng / Ro	of sealer	380S	F / 70SF	XXX			
Name of Registered Was	ste Hauler		10000	JDEP W auler ID		Cubic of Was	750	1 55		red Landfill		B00-6		
Freehold Cartage				2253		40	100 TO		Landfi					
City, State Mount Holly, New Je	ersey 08060	4					al Date -2012	City, Sta Tullyto	ite wn, PA	١.				
Completed by William Lynch		Title Owne	r			S	ignature	- J-0	lun	Da No	te ov. 23	3, 20	12	
			_			- gre		714	410				-	

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Removal	Repair	delinedecu	Ercipaure	-	
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Date of Notification (1) November 23, 2012		Name	of Build	Ing Owner Contral P	Operator	WOV &	AM	Dhaok	# 550	7			
N DOH X Eme	ol endod endment (t	nρ	Street Address 300 Madison Ave  Cily, State Zip Code Morristown, NJ 07962  Name of Contact Ken Sullivan									ED.	-
Name of Facility Where Abalament	callation		The second second		nformati	ON I	A. Grander	2 · · · · · · · · · · · · · · · · · · ·	T.,			Dec Bee !	Mark.
Residence	a roward ridge	1(31				Ī	Type of Facil						
Street Address 223 40th Street				87.1119			Subcha W Other (I.	oter & (Ot	her ilien K & coriime		ullding	gs. ho	กาอส
City (5) See Isle City		_		- 37W-11-1		Square Feet 2500	7#0	I Floors	$\neg$	Bldg 80	Age		
Cape May			County (STATE	Cede (7	,)		Current Use (		ing demol	izhed)			
Name of Monitoring Firm Hirad by B MECS	(0)	ASC	M No		Nome of	of Abatoment ( B Environm	Contractor ental Li	(9)					
Street Address PO Box 341		-			Street 4								
City State Zip Code Chesterfield, NJ 08515				Cily, State Zip Godc Maple Shade, NJ 08052									
Project Manager for Monitoring Firm RIII Weisgarber	$\neg$	Tolephi 609-2	one No 98-407	0	Telepho	phone No.   Linense Mo -755-0099   00842							
Start Dale (10) November 26, 2012	3chedi Dece	iled Cor mber 2	noletion 2, 201	Date (11	1)		OSHA Monit	or				<del></del> .	20
Occupancy Status During Abatement	Chuck Only C	ng)		_		Street A	ddress	-			-	-	-
Facility Closed/Vacated During Abatement Performed Outside of Other – Describe:	Intro Period of Mount Facili	Abstent N Hours	nont :	•		City, Sto	eddon Ave te, Zip Code	<u> </u>					_
Scope of Work (Check All That Apply	, — =					Westn	nont, New	Jersey	08108			. <u> </u>	
≥3 sf or ≥3 if ≥160 sf in ≥260 if	X	Renova Demolii				X	Full Contains Mint-Enclosu Glevebeg Pro Non-Exempte	re Ocedure				re.	
	ds.	1 nontic	חכ					1		T	Abal	emen	1
Location of Norma Asbestos-Containing Material (ACM) TO the ABATED In Fedlity Used Sal				Normally Sed Solely by Asimtenance/ (i.e. thorms surface) (12)			erial (ACM) Isulation or	Amount (Specify SF or LF)		Removal	Repair	Encapsulate	Erciogure
7hannahan David	Yas	No	N/A							] ==	_	200	8
Throughout Residence Exterior	-	-	XXX		Tile and		ic	570	0 SF	XXX			
Throughout Residence	_   _		XXX			ling			USF	XXX			
Lyleries			XXX			trock			0 SF	XXX			
name of Registered Woste Hauter		ILN	DEP WE	sie	Cubic Yar				170SF	XXX			
reehold Cartage ity, sum lount Holly, New Jersay 08061			253		40 Disposal 0 12-22-20		Grows City, Stat Tullytov						
ampleted by	Tille				Signa					and a second			

NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60-7 and 12:120-7)
(PC C F I V F D

	0/12					perator (2) Education	2812 Nov	••					
[] EPA []	of Notification	n Stre	eet A	ddress ley Ro		-		<b>28 AM 7: น</b> ปร coมาลอ					
	Notification Emergency Amended Notification	Mo	ontc		J 07042	2	& LI	OS CONTR <del>O</del> CENSING					
IXI DCA				Contact				Telephone Nur	mber				
[1]	Cancellation	Le	n S	apona				1					
					FACILITY	INFORMATION	T			t)			
Name of Facility Where Abat Montclair High School		ng Place	e (3)				Type of Fac	nool (K-12)	rthon V 12)				
Street Address	Л .						X St	bchapter 8 (Other ner (i.e. private an	d commercia	l build	ings		
100 Chestnut St.							no	mes, etc.)			-0		
7777								ldg. Aq 80	ge				
City (5)		ounty (6	1999			ty Code (7) TE USE ONLY)	150000 Current Use	(Prior if being de		00			
Montclair							educational						
Name of Monitoring Firm Hir		Owner		SCM No	).	Name of Abaten			onvisos I	no			
Detail Associates, Inc 00							Jupiter Env	ironmental S	ervices, i	nc.			
Street Address 300 Grand Ave.						Street Address	3 Lynn Cou	ırt					
City, State, Zip Code						City, State, Zip C		ar C					
Englewood, NJ 0763				Lincoln Park, NJ 07035									
Project Manager for Monitoring Firm Telephone Number						Telephone Num	ber		License				
Stephen J.				-6708			973-709-0	200		(	800	52	
Scheduled Start Date (10) 11/21/12	Sched.	Comple 11/2		Date (11 2	)	Name of OSHA		ronmental La	aboratorie	s, LL	.C		
Occupancy Status During Ab [x] Facility Closed/Vac [] Abatement Performe	ated During E	ntire Pe	riod c	of Abater	ment		2333 Route	e 22 W					
[] Abatement Performe Describe: [] Other – Describe:	ed Outside of I	Norman	i aciiii	y riouis		City, State, Zip C	Code Union, NJ	07083					
Scope of Work (Check all that  [] Demolition  [x] ≥3 sf or ≥3 lf  [] ≥160 sf or ≥260 lf	at apply)	11.		[]	Renovation	on	[] [x] [x]	Full Containment Mini – Enclosure Glovebag Proced Non – Friable Pr	dure	e Pres	sure	1	
11		- Is I	Locat	ion							bate	eme	ent
			nally l				ription of - Containing		Amount	1	Type R R E I		
Location of Asbestos – Containing			olely l	e/Cus			rial (ACM)		(Specify	E	E	N	I N
Material (ACM) todial Staff (12)					(i.e., ther	ā.	SF or LF)			83	C		
TO BE ABATED In Facility							surfacing, VAT niscellaneous)	'		V		F	
(13)		Yes	No	N/A						I L			S
Crawlspace		х			Pipe ins	ulation		1	150 LF	X		Ľ	
Hallway by Rm. 17 x Pipe ins									6 LF	×		_	
										-	+	$\vdash$	-
Name of Registered Waste I Jupiter Environment		Hau	DEP Vuler ID		100000000000000000000000000000000000000	ic Yards Vaste 3		legistered Landfill Landfill		D-11		1	
City, State Lincoln Park, NJ						/30/12	City, State	sburg, OH		2 18 EV		957	
Completed By (Print or Type Pane Repic	)	Title Gene	eral	Mana		Signature	20	4	Date 11/2	0/12		,,1	

	auler	TNI	DEP V	Vosto	IC	ubic. Yards	Namo	Registered Landf	ili.				
di					ļ				1	+	1	1	
						nsulation	6 LF	x					
Crawlspace		x	140	14/4	Pipe i	nsulation			1501F	L		ŭ	Ŭ
Location of Asbodos – Containt Meterial (ACM) TO BE ABATED In Facility (13)	Non S Maint	Locat mally locally enance al Staff	Used by ca/Cus		Desci Aspectos Materi (i.e., them insulation, s or other m	ns /AT	Amount (Specify SF or LF)	R E M O V	)ė	N C A P S	ENCLOS		
Scope of Work (Check all that  [] Demolition  [x] 23 of or 33 if  [] 2160 of or 2260 if	t apply)			[]	Rénov	ation	[ [ ]	Mini - Endosu	edure				
[x] Facility Closed/Vac     [] Abstement Performe	ated During El d Oulside of N	ntire P	ariod (	of Abato		City, State Zip C	Code	ute 22 W NJ 07083					_
Stephen J.   201-589-8708						Name of OSHA	973-709 Monitor	9-0200 nvironmental I	aboratories		285	52	
300 Grand Ave. City State, Zip Gode Englewood, NJ 0763 Project Manager for Monitoria		Tele	phone	Numbe	er -	City. State Zip C	Lincoln	Court Park, NJ 0703	35 License N				
Name of Monitoring Firm Him Detail Associates, Inc		ASCM N	40 J	Name of Abaten			Services, In	C.					
City (5) Montclair	11	ounty 55e				ounty Code (7) TATE USE ONLY)		Use (Prior if being	8	g Age	9		
Name of Facility Where Abort Montclair High School Street Address 100 Chestnut St.		ng Ple	ce (3)		FACILI	TY INFORMATION	Type of	Facility (4) School (K-12) Subchapter 8 (Otl Other (i.e. private homes, etc.)	ner than K-12) and commercial	buildir	ngs,		
[X] DCA	Cancellation	1037		Sapon	ara			Telephone r	Articles				
[X] DOL [X] [X] DOH	Antification Emergency Amended Notification	٨	illy, St Nonte	ste, Zip	Code & NJ 070	LIVERSIN		Telephone N	APPRO	NE NE			The Sales
Agencies Notified Type [   EPA   [ ]	0/12 of Notification	n S	Montaire of 7	clair ( Address allev F	Road Road	NEducation	R	NE NE	AM L		_	The Party and the County of th	TAL THOMAS
Date of Notification (1)		1.8	~	. (rur	ianguir to	TAGNATION 12	1ARD (	DOL -	- 10 DA	#\696	9		by marke - got
					31	ate of New Jersey		- 1					M