Chesh 2006

Date of Notification	(1)		IN	lame	of Buil	dina O	wner / Operator	(2)						
11/17/2016	(')						uction	7-6		w0v		201	6	
Agencies Notified	Type Notifica	ation			Addre									
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□ DOL	Amer Amer					n, NJ			1-11-1-11				ımho	-
☑ DOH □ DCA		gency ellation			of Cor						lephor			
☐ DCA	Canc	ellation	F		Wool					00	13-230			
					:ILIT	INFO	DRMATION							
Name of Facility Wh Residence	nere Abateme	ent is Taking Pl	ace (3)			Type of Facility School (K	-12)						
Street Address								er 8 (Other tha		n r .	1000000		- \	- 1
							Barrell	private & con					(C.)	
		T					Square Feet	# of Flo	ors	Bio	lg. Age			
City (5)		County (6)	Co	unty C	ode (7	7)	150		1			60÷		
Allentown		Monmouth					Current Use (F	Prior it being a	emolisnea)					
			/01		TAGO	1111	Shed		to= (0)			-		
Name of Monitoring	Firm Hired b	y Building Owr	rer (8)		ASC	M No.	Name of Abate Alpha Environ							
Street Address		- Harrison					Street Address		TVICES		-			
Street Address							PO Box 829							
City, State & Zip Co			City, State & Z											
only, onato a mip of							Trenton, NJ							
Project Manager for Monitoring Firm Telephone Num							Telephone Nu 609-847-295		Licer	ise Nu	mber 0122	2		
Scheduled Start Da	ite (10)	Scheduled Cor	npletic	n Dat	e (11)		Name of OSH	A Monitor						
11/27/20	16	11/30/2016					EMSL Analy	rtical						
Occupancy Status I	During Abate	ment (Check or	nly one	<u>)</u>			Street Addres	T-100						
		During Entire P					107 Haddon			-				
h	Performed O	utside of Norm	al Hol	Irs – I	am to	зрт	City, State & Z	•						
Describe:	cupied During	Abatament					Westmont, I	NJ 00 100						
Scope of Work (Ch								□ Full Cor	ntainment w	vith Ne	aative	Pres	sure	
≥3 sf or ≥3	lf			Ren	ovatio	n		Mini-En			3			- 1
2160 sf ≥26			\boxtimes		nolition			Glove E	ag Procedu	ures				
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1	ocation of		ls	Locati	on		Description		Amou			_	ent Ty	
	tos-Containin	ng		nally L			Asbestos-Cont	aining	(Spec					
	terial (ACM)			olely b			Material (AC		SF or	LF)	R	71	Enc	m
	BE ABATED			tenan		i	(i.e., thermal sy nsulation, surfac				Remova	Repair	Encapsulate	Enclsoure
	n Facility (13)		Cusi	(12)	olali:		or other miscella				oval	B.	ulat	oure
	()		Yes	No	N/A			**					0	
Exterior Shed	ů.			\boxtimes			Siding		120sf					
Name of Registered	d Waste Hau	ler			DEP V	Chi Kerri	Cubic Yards of Waste	Name of Reg	istered Lan	dfill				
Woolston					516		1	Grows Lan	dfill					
City, State							Disposal Date	City, State						
Bordentown, NJ		11					various	Morrisville,	PA					
Completed By (Prin	nt or Type)			Titl			Signature				Date	= 10	040	
Rod Richardson Project Manager							Rod Richardson				11/1	112	U16	
			r											

C1C3855

Date of Notification (1)			N	ame of	Building	Owner/Operator	(2)						
11/23	16			3	ARE	3A(LA) 4	1545K						
Agency Notified	Type Notification		S	treet Ad	ddress	2	4	-		-	_		
□ EPA	. ☑ Initial		-			- de							-
DEP DOL	☐ Amended Amendment#		C	ity, Sta	te, Zip C	ode .	15	07410	2.0				200
	☐ Emergency (inch	ading	N.	TA	Contad	AUR.	10 7	7410	ber		-		
D DON	justification) □ Cancellation		IN.			SHER			- 1	- 0			
DCA DCA	a cancepación					RMATION		110		18.1	FIL	AL S	
Name of Facility Where	Abstances in Toking	Dhim (3)		PACIL	III INCC	TON .	Type of Facility	(4)			_	_	
								202 S					
	s. ASHER	-					☐ School (K-12 ☐ Subchapter 8	(Other than K-12)					
Street Address	0				÷ ,		2 Other (i.e. pr	ivate & commercia	l building	s,			
0.1						 	homes, etc.) Square Feet		Bldg. A	ge			
City (5)					и,		1800.		19		3 4	9	
	LAUN		10	`	Codo (7)	(STATE USE		rior if being demolis		-	٠, ر		_
County (6)	101 = 10			MLY)	Code (7)	(SIAIL DOL		5,0EN					
Name of Monitoring Firm	RGEN	amor I A	SCM N	No.		Name of Ahaten	nent Contractor (9						-
(8)	n naed by busidary O	Wiles	SCWI I	чо.			moval In						
Street Address						Street Address	movar in				-		
Street Address				12			th River	S+				-	
City, State, Zip Code						City, State, Zip		50	9				
Ony, Outro, Esp Octo							ack, N.J	. 07601					
Project Manager for Mo	nitoring Firm	Tek	ephone	e No.		Telephone No.		License No.		- 373			
,			•			201-329	-7444 .	00388	18				
Start Date (10)	Scheduled	Completio	n Date	(11)		Name of OSHA	Monitor	177.000					3000
12/6/16	1	2/7/1	6			Omega :	Environm	ental					
Occupancy Status Durin	ng Abatement (Check	only one)				Street Address							
☐ Facility Closed/Vacat	ed During Entire Peri	od of Abate	ment	- 1			uyler St			HEVE-OF	-		_
☐ Abatement Performe	d Outside of Normal F	acility Hou	rs.	-		City, State, Zip		м т 0.7	606				
E Other - Describe: &		7:00	511			. 5. на	CKensack	,N.J. 07	000	-			
Scope of Work (Check	all that apply)							Negative Pressure	e				
22 ≥ 3 sf or ≥ 3 lf			5.55	⊇ Reno ⊒ Dem	ovation olition		-Enclosure rebag Procedure		1/2				
□ 2 160 St 01 2 200 H						□ Non	-Exempted (*) an	d Non-Friable Proc	edure				_
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Locat	ion of		ormally		:	Description	of				1	T	
Asbestos-Containi	ng Material (ACM)		l Solet ntenan			stos Containing M	laterial (ACM)	Amount	Ī	2	_	E	m
TO BE A		1 .	ustodia Staff?	al	(i.e	., thermal systems surfacing, VA		(Specify SF or LF)		Removal	Repair	8da	Enclosure
1	3)	į.	(12)		*:)	other miscellan				Val	=	Encapsulate	ure
1		Yes	No	N/A					Ī				
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Name of Registered Wa	acta Warriar	N FF	DED W	/aste H	autor	Cubic Yards of	Name of Regi	stered Landfill					-
Best Remo		ID		iaste ii	auri	Waste	_	a Enterpr			T.T	C	
Dest Rem	OVER THE		17:	109		207	HITHET A.	o purerbr	1262	,	111	10	
City, State						Disposal Date	City, State						
Hackensa	ck , N.J.	07601				12/7/16	Wayne	sburg, Oh		88			-
Completed by	Title					Signature	(lois 10)	ea l	Date			**	
J.Maiorand) Es	stimat	or			<u> </u>	(Out No			-			_

L# 173	1	N		CATIC	ON ASBE	ew Jersey ESTOS ABATEN 8:60 and 12:120			Vi			
Date of Notification (1)	16				of Buildir nown	ng Owner/Operator	(2)	504 2 E	251			4
Agencies Notified	Type Notificati	on		Stree	t Address							
EPA DEP	X Initial Amended			City 5	State, Zip	Code		7-30			_	
☑ DOL	Amendmen Emergency		-		lenwold,			1.05.15		_		
DOH DCA	justificator Cancellatio	n)			e of Con Gipe	tact		Telephone Numb	ег			
				FA	CILITY IN	FORMATION		\ 				
Name of Facility Where Residence	Abatement is Ta	king Place	(3)				Type of Facility School (K-1	2)				
Street Address							Other (i.e., phomes, etc.		build			
City (s) Lindenwold, NJ							Square Feet 1500 SF	# of Floors	50	dg. /) yrs		
County (6) Camden				Cou USE	nty Code ONLY)	(7) (STATE	Residence	rior if being demolis	ned)			
Name of Monitoring Firm (8)	n Hired by Buildir	ng Owner		ASCM	No.	Name of Abaten AEi2, LLC	nent Contractor (9	9)				
Street Address						Street Address 361 E. Flemin	ng Pike					
City, State, Zip Code						City, State, Zi Hammonton,	p Code					
Project Manager for M	Monitoring Firm		Tele	ephone	No.	Telephone No. 609-481-212		License No. 00689				
Start Date (10) 11/20/16	22 1 222	heduled C /20/16	omple	tion Da	ite (11)	Name of OSHA AEi2, LLC						
Occupancy Status Durin			one)			Street Address					7	_
Facility Closed/Vaca						361 E. Flem: City, State, Zip C Hammonton	Code					
Other - Describe: Scope of Work (Check a	all that apply)							egative Pressure			_	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Re De	enovat molitic	ion on		☐ Mini-En	closure ag Procedure	Ion-Friable Procedu	re			
	76-20	N	ocatio	у						bate Typ		
Location Asbestos-Containing N TO BE ABA IN Facility (13)	Naterial (ACM) TED	Mair Cu	Solei ntenan ustodia Staff? (12)	ice/ al		Description o tos Containing Mar , thermal systems surfacing, VAT other miscellane	terial (ACM) insulation, , or	Amount (Specify SF or LF)	R e m o v	R e p a i	N A D D D A D	E n c l o s u
		Yes	No	N/A				200 07	1	r	a t	, e
Exterior		-		X	Transit	e Shingles		900 SF	X			_
		-		-							-	-
		-		1		A ST THE RESIDENCE OF THE STATE OF						
Name of Registered Wa	ste Hauler		1	NJDEP I		Cubic Yards of Waste	Name of Reg	stered Landfill				-
City, State			-12	1376		Disposal Date TBD	City, State	,				
Hammonton, NJ Completed By	1.5	litle	.) /			Signature	72/	Date 11/21/10			_	
Wm. Minnick		Progran	ı Mg	I.		87/77	well !!	Th 11/21/10				

11/#220	Î	N	OTIF ()	ICATIO Pursuant	N OF A	SBESTOS ABA 2 8:60-7 and 12:12	TEMENT 0-7)	11		Ch#			
Date of Notification (1)	11/18/16	Nam NJ	e of E	Building C	Owner/O Devel	perator (2) Iopment Autho	ority	1.76	a E I	GII#			
Agencies Notified [x] EPA	Type of Notifica	Stree 36	et Ado	dress st State	C20 (0.00)			· W	nv 2 5	2015			
[] DEP [X] DOL [X] DOH	Notificatio [x] Amended Notificatio	Tre	ntor	e, Zip Con n, NJ 0	^{de} 18625-	-0990		ASEE Telephone Nu	eTC S C C		DL 8		
[x] DCA	[] emergence	Jar		Contact Sarac				973-50 7 -6					
Name of Facility When Building 691	re Abatement is T	Taking Place	(3)	F/	ACILITY	INFORMATION	1 V1 SII	ity (4) ool (K-12) bchapter 8 (Other er (i.e. private ar	er than K-12	2)	dinas		
Street Address 691 Highway 1							Square Feet	nes, etc.) # of Flo		Bldg. A			
City (5) North Brunswick		County (6)				nty Code (7) ATE USE ONLY)	Office/wareh		emolished)	~50			
Name of Monitoring F ATC Group Se			100000	SCM No. 0098				ironmental (Services	Inc.			
Street Address 3 Terri Lane, Sucity, State, Zip Code	3				_	City, State, Zip C	Code	ebridge Roa ., NJ 07058	ad, Suite	100			
Burlington, NJ C Project Manager for N John Lutz	Monitoring Firm	609-	479	Number -8512		Telephone Numb	ber 973-575-8		Licens	se Num	ber 00	852	2
Scheduled Start Date 11/30/16		hed. Comple 12/3	0/16				Monitor Iris Enviror	nmental Lab	oratorie	s, LL(<u> </u>		
[] Abatement P Des	sed/Vacated Durin erformed Outside cribe:	ng Entire Per e of Normal F	riod o	f Abatem y Hours -	nent _	City, State, Zip C	2333 Route ^{Code} Union, NJ					V 5350	
[] Other – Des	cribe: partially va	cant		-					4 (4) 81	-this D			2
[] Demolition [] ≥3 sf or ≥3 lf [x] ≥160 sf or ≥	f			[]	Renova	ation	įj	Full Containme Mini – Enclosur Glovebag Proce Non – Friable P	e edure	ative P	ressi	ле	
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<u>TO BE A</u> In Fa (13	cility	Yes	No	N/A			miscellaneous)				V A L	I R	P C S S U L
Main floor			Х		Drywa	III joint compound	d, duct insulat	ion, VAT	2100 SF		х		
						V-V-d-	Name of I	Registered Land	fill				
Name of Registered Jupiter Environ	Waste Hauler mental Serv	ices Hay		Waste D No.	Of	ubic Yards f Waste 30	Alliance	e Landfill					
City, State Pine Brook, NJ					1.1	isposal Date 2/15/16	City, State Taylor,		Da	ite			
Completed By (Print	or Type)	Title	orol	Mana	aor	Signature	1 1-	_		1/18/	16		

ASB-41

Pane Repic

Amendment #1, 11/10/16: Project start date is being postponed. Awaiting permit issuance. Amendment #2, 11/18/16: New start date has been set for 11/30/16.

General Manager

CIC 3845

Date of Notification (1)					Owner/Operator							
11/22/16			AND DESCRIPTION	participation of the last of t	5 GO	OCH	-				_	_
Agency Notified Type Notification		Stre	et Ado	dress		1 2	17807	N G G				1
□ EPA □ Initial		07	21-1	7.0	-4-		WAY	<u> </u>	THE	-	-	-
D DEP Amended Amendment#		City	, State	e, Zip C	TOMET	E0.111	NT.					
☐ Emergency (including	3	Non	no of (Contact		. 000	Telephone Num	ber	T	JL ć	X	\neg
DDOH justification) DCA Cancellation		I lear	10		300CH							
2 DOA 2 CONTROLLER		=/	(10	-	RMATION							
Name of Facility Where Abatement is Taking Place	e (3)		IOILI I	i inte	JAMATION .	Type of Facility	(4)					
Name of Pacinity Where Additional is Taking 1 and				_ II			31 - 34 31					
	<u></u>	9	. Óc			☐ School (K-12 ☐ Subchapter 8) 8 (Other than K-12					
Street Address				÷2 ,		DOther (i.e. pr	ivate & commercia	l building	gs,			
C*- (5)						homes, etc.) Square Feet	# of Floors	Bldg.	Age			\dashv
City (5) POMISTOW	1					2800.	A CONTRACTOR OF THE PROPERTY O	15	1	1		
		I Co	món C	ode (7)	(STATE USE		rior if being demoli	1 "		3		-
County (6)			LY)	oue (1)	(OIAIL GOL		ESI DEN CÉ					
Name of Monitoring Firm Hired by Building Owner	LAS	SCM No			Name of Abaten	nent Contractor (9						
(8)	1	JOIN 110	•			moval In	47.C					
Street Address					Street Address	HOVEL III	C					
Ouece Assertion			22		450 Sou	th River	St				11.	
City, State, Zip Code					City, State, Zip (00					
					Hackens	ack, N.J	. 07601					
Project Manager for Monitoring Firm	Tele	phone l	No.		Telephone No.		License No.					
					201-329	-7444 ·	00388					
Start Date (10) Scheduled Co.	mpletion	n Pate (11)		Name of OSHA		12000					
12/5/16 12/	6	116	>		Omega 1	Environm	ental					
Occupancy Status During Abatement (Check only	one)				Street Address	100 mg				-		
☐ Facility Closed/Vacated During Entire Period of	Abaten	nent	- 2			uyler St						_
☐ Abatement Performed Outside of Normal Facili	ty Hours	SPM-		-	City, State, Zip (N T O7	606				
Dother - Describe: 8: 00 NH (O)	. 50	111			. э. пас	CREIISack	,N.J. 07	000				-
Scope of Work (Check all that apply)							Negative Pressur	e				
≥ 3 sf or ≥ 3 lf □ ≥ 160 sf or ≥ 260 lf			Renov Demoi	ration lition		-Enclosure rebag Procedure		it.				
1 2 100 St 01 2 200 H					☐ Non-	-Exempted (*) an	d Non-Friable Proc	edure				
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Location of		rmally Solely b		÷	Description	of			П	T	T	
Asbestos-Containing Material (ACM)		tenance		Asbes	stos Containing M	aterial (ACM)	Amount		R	_	Eng	m
TO BE ABATED IN Facility		stodial		(i.e.	, thermal systems surfacing, VA		(Specify SF or LF)		Removal	Repair	808	Enclosure
(13)		(12)	Ì		other miscellan				val	=	Encapsulate	enne
	Yes	No I	WA				**			- 1		
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BASEMENT	-	-	(- 6	NAPLEIC	(100		1	7	1	-
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Name of Registered Waste Hauler	IND	EP Was	to Ha	uler	Cubic Yards of	Name of Regi	stered Landfill					
Best Removal Inc	ID N		re He	Ale:	Waste	Minery	a Enterpr	igae		T.T.	C	
		1710	9		2 1/20	7	- nucerbr	1262	,	ىدىد	U	
City, State					Disposal Date	City, State		72 22	102000			
Hackensack , N.J. 076	501				12/6/16	Wayne:	sburg, Oh		88			
Completed by Title					Signature	10.00	\circ	Date / //	/22	1	1	
J.Maiorano Esti	mat	or			1 XU	o-snou	3	/ //	20	71	0	

Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Yes No N/A Pipe Insulation Tunnel Name of Registered Waste Hauler Yannuzzi Group Asbestos-Containing Material (ACM) Custodial Staff? (12) Yes No N/A Transite Panels Fipe Insulation Wall Mastic Tunnel Name of Registered Landfill Grows Total Cubic Yards of Waste Hauler ID No. 17467 Disposal Date 11/30/16 City, State Morrisville PA Date 11/30/16 Signature Signature Signature Signature Signature Signature Signature Signature	E	E C		1				
Somerse Country Type Notification Type of Facility Noti								
Size Address County Code (7) Size Address County Code (7) Size Address County (8) Abardoen County (8) Aba	V	. KOV	2 8 2016					
ancies Notified Type Notification		- No.				7		
Employment Initial Animanded Anima				世		1		
Parameter Para	10	453EUT	CS FILM TAN	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		7		
DOL	one	Telepho	ne Number			1		
DOH	367	732-36	51-2020					
DOA								
Name of Facility Where Abatement is Taking Place (3) Former Anchor Glass Factory Street Address 145 CliffWood Ave Superior Anchor Glass Factory		y (4)						
Subchapiler's Option of Class Factory Subchapiler's Option of Current Use (Phor if being demolished) Abandoned Subchapiler's Option of Current Use (Phor if being demolished) Abandoned Subchapiler's Option of Current Use (Phor if being demolished) Abandoned Subchapiler's Option of Current Use (Phor if being demolished) Abandoned Subchapiler's Option of Current Use (Phor if being demolished) Abandoned Subchapiler's Option of Current Use (Phor if being demolished) Abandoned Subchapiler's Option of Current Use (Phor if being demolished) Abandoned Subchapiler's Option of Current Use (Phor if being demolished) Abandoned Subchapiler's Option of Current Use (Phor if being demolished) Abandoned Subchapiler's Option of Current Use (Phor if being demolished) Abandoned Subchapiler's Option of Current Use (Phor if being demolished) Subchapiler's Option of Current Use (Phor if being demolished) Abandoned Subchapiler's Option of Current Use (Phor if being demolished) Subchapiler's Option of Current Use (Phor if being demolished) Subchapiler's Option of Current Use (Phor if being demolished) Subchapiler's Option of Current Use (Phor if being demolished) Subchapiler's Option of Current Use (Phor if being demolished) Subchapiler's Option of Current Use (Phor if being demolished) Subchapiler's Option of Current Use (Phor if being demolished) Subchapiler's Option of Current Use (Phor if being demolished) Subchapiler's Option of Current Use (Phor if being demolished) Subchapiler's Option of Cur	tho	0\	han K-12)	10000				
Street Address 145 Cliff(wood Ave Street Address 145 Cliff(wood Ave Street Address County (6) Monmouth Name of Monitoring Firm Hired by Building Owner (8) Street Address City, 51 Street Address C	COL	iter 8 (Otnei i	ommercial building	ngs, nor	nes	۰,		
Street Address City, State, Zip Code City, State	=1-1	e, private	lears Blo	dg. Age	3			
City (5) Aberdeen Aberdeen County (6) Monmouth Name of Monitoring Firm Hired by Building Owner (8) Street Address City, State, Zip Code Project Manager for Monitoring Firm Telephone No. Street Address City, State, Zip Code Project Manager for Monitoring Firm Telephone No. Street Address City, State, Zip Code Project Manager for Monitoring Firm Telephone No. Street Address City, State, Zip Code Project Manager for Monitoring Firm Telephone No. Street Address City, State, Zip Code Project Manager for Monitoring Firm Telephone No. 908-218-0880 01228 Street Address City, State, Zip Code Project Manager for Monitoring Firm Telephone No. 908-218-0880 01228 Street Address City, State, Zip Code Street Address Street Address City, State, Zip Code Street Address	F100						1	
County (5) Aberdeen County (6) Monmouth Name of Monitoring Firm Hired by Building Owner (8) Street Address City, State, Zip Code Project Manager for Monitoring Firm Telephone No. Stant Date (10) 11/15/16 Stant Date (10) 11/15/16 Cocupancy Status During Abatement (Check Only One) Abatement Performed Outside of Normal Facility Hours Abatement Performed Outside of Normal Facility Hours Scope of Work (Check All That Apply) Each of or 250 If Basement Basement Basement Basement Name of Registered Waste Hauler Vannuzzi Grovestle Abate Monitor Vannuzzi Grovinomental Services City, State, Zip Code Kinnelon, NJ 07405 City, State, Zip Code Kinnelon, NJ 07405 City, State, Zip Code Kinnelon, NJ 07405 Street Address 135 Kinnelon Rd., Suite 102 Street Address 135 Kinnelon Rd. Street A			domolished)					
County (o) Abandoned County (o) Abandoned A	119	(Prior if being	J 001110111	12-1-1-12			1	
County (6) Monmouth Name of Monitoring Firm Hired by Building Owner (8) Street Address City. State, Zip Code Project Manager for Monitoring Firm Start Date (10) 11/19/16 Occupancy Status During Abatement (Check Only One) Abatement Performed Outside of Normal Facility Hours Abatement Performed Outside of Normal Facility Hours Containing Material (ACM) To Be ABATED In Facility To Combine Michael ACM) Abbestos Containing Material (ACM) Abbestos Containing Material (ACM) In Facility In Facil		eu						
Name of Monitoring Firm Hired by Building Owner (8)	(S)	t Contractor	Services				4	
Street Address Stre		Onnema					1	
Street Address City, State, Zip Code City, State City,							-	
City, State, Zip Code	_	Ra., Suite						1
City, State, Zip Code		nde			7-7-		_	1
City, State, Zip Code Project Manager for Monitoring Firm Telephone No. 908-218-9880 11/20/16 Start Date (10) 11/30/16 Start Date (10) 11/30/16 Cocupancy Status During Abatement (Check Only One) Street Address 135 Kinnelon Rd Suite 102 City, State, Zip Code Kinnelon, NJ 07405 Street Address 135 Kinnelon Rd Suite 102 City, State, Zip Code Kinnelon, NJ 07405 Street Address 135 Kinnelon Rd Suite 102 City, State, Zip Code Kinnelon, NJ 07405 Street Address 136 Kinnelon Rd Suite 102 City, State, Zip Code Kinnelon, NJ 07405 Street Address 136 Kinnelon Rd Suite 102 City, State, Zip Code Kinnelon, NJ 07405 Street Address 136 Kinnelon Rd Suite 102 City, State (City, State) Mini-Enclosure Glovebag Procedure Glovebag Procedure Non-Exempted (1) and Non-Frable Proced Mini-Enclosure Glovebag Procedure Non-Exempted (2) and Non-Frable Proced Mini-Enclosure Glovebag Procedure Non-Exempted (1) and Non-Frable Proced Mini-Enclosure G	-	07405	License No.					
Telephone No. Telephone No. Substitution Telephone No. Telephone No. Substitution Telephone No.	1		01228				_	_
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Facility Closed/Varacted Outside of Normal Facility Flour. Scope of Work (Check All That Apply)		Code					_	_
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John Mucha								

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Date of Notification (1)	11/22/16		N	ame of	Building Owner/C	110	(2)	bil EIMC	RA	65	LL	C
Agencies Notified	Type Notification		S	treet A	ddress	ARI.	小车					
☐ EPA ☐ DEP ☐ DOL	白 Initial Amended Amendment #		_	ity, Sta	ite, Zip Code	10		2 FJ 2tn5 -		29		
D DOH	☐ Emergency (in justification) ☐ Cancellation	cluding	N	HA	Contact-		L	Telephone Nur	mber 5\x	.) (29	3
Name of Facility Where A	Abatement is Taking	Place (3)		FACI	LITY INFORMATI	ION	Type of Facility					
Street Address					ŧ		School (K. Subchapte Other (i.e. etc.)	-12) er 8 (Other than K-1 private & commerci	2) al bullo	fings,	hom	es,
city (5). ELIZABET	h N.D.						Square Feet	# of Floors	В	ldg. A	ge 00	-
County (6)			C	County (Code (7) USE:ONLY)		Current Use (P	rior if being demolish	ned)			
Name of Monitoring Firm		wner (8)		ASCN	A No.	A STATE OF THE STA	of Abatement Co					
Street Address							Address	114				
City, State, Zip Code	· · · · · · · · · · · · · · · · · · ·					City, S	tate, Zip Code	E N.D. C	188	57	-	
Project Manager for Mon	itoring Firm		T	elepho	ne No.	Telept	DARKT	SOO DO) } } ()		
Start Date (10)	16	Scheduled	Comp	oletion	Date (11)		of OSHA Monito	in INC				
(a) Abatement Perform	Abatement (Check ated During Entire Pe ed Outside of Norma	eriod of Ab	ateme	nt .		P.1	Address tate, Zip Code	814 END.C	195	25.		
Other - Describe: _ Scope of Work (Check A	I That Apply)					(1)	1 6.010	E 1010. C	01		(
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Name of Registered Was	te Hauler 200H			DEP W	No. of Wa	4.	G.	Registered Lándfill				
City, State BRIDGE	N.O. 0	000	7		1121	sal Date	Ta Hom	BUILTE 1	1/	1.		
Completed by ARIUS AIME	EIDA	Title)	512	ES	T /s	Signature	Jalo A	mel- De	11	23	1/16	2

HD.332 #802

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E EPA	M Initial			2000	Pennin	gton Road		LIFTH.	2.5	20	18	
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(NJAC 5:23-8)	Cancellation			Ama	inda Rec	foati-	- 1	809-771-288	TENS	INC	-	-
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Name of Pacifity Where	Abmorrant is Takin	ng Pigge	(3)	17/1	74,777 114		Type of Facility	(4)				***
The Callege of New			(0)				School (K-12	3				
Street Address	(* e0,50) - 0,00.		-				Subchapter 8	(Other Ihan K-12)) relational	Idina		
2000 Pennington	2nnd						homes, etc.)		CIMI DUI	Jen 191	7	
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Marcer Name of Monkoring Fire	- Used by Building	Swner!	/6	ASCM	Na	Name of Abstern	ent Contractor (9)			_		
		Charles (١,	PAD CHILL			enmental, LLC					
USA Environment	e) elabelament				-	Street Address	-			-	-	-
Street Address						623 Cutler A	venus					
344 West State St	Le ex		-			City, State, Zip C	13.5					-
City, State, Zip Code						Maple Shade						
Trenton, NJ 08608			T = 1.	1	11-	Telephone No.	1 (10 0000	TLicense No	i	plant be	-	-
Project Manager for Mo	nitoring Firm		45535	phone i DB-686		858-755-0091	9	00842				
John Duggan	T of L	भवानत Ç	1			Name of OSHA)	-	-		
Start Date (10)	1.00	11 /				EMBL Analy						
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Occupancy Status Duri	ng Abatement (Che	sk only o	ons)				an March					
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Christina Lynch		VICE P	IREIG	RIII UI	-her eric	TAKOK		<u></u>	11/00		4	

ABE-41 JAN 13

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

Mode

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

Date of Notification	(1)			100				Ch	eck # 11159	9		
	eptember 20	0, 2016		IN:	ame of Bui ank of Am	lding Owner / O	perator (2)	-				
Agencies Notified	Type Notifi				reet Addre					107 D		
Пера										15 0		
DEP				17	0 Broad S	treet						
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	Init			10000	ty, State &							4-
⊠DOH		nended nendment	#	Re	ed Bank, N	J 07701						
LIDCA .		ncellation		Na	me of Con	tact			<u> </u>	5 (2.5)		0.16
	-				n Kalafsky					Telepho		
						Y INFORMA	ATION			908-625	-6900	
Name of Facility Wh	ere Abateme	ent is Taki	ing Place (3		TAGILIT							
Bank of America				- /			of Facility (4) School (K-12)					
Street Address							Subchapter 8 (C	Other than K-	12)			
170 Broad Street							Other (i.e., pri			nas hor	ma a	to)
City (E)						Squa	re Feet	# of Floors		ldg. Age		ic.)
City (5) Red Bank							6,000		1	nug. Age	112	
						Curre	ent Use (Prior if I	being demolis	shed)			
County (6) Monmouth			County Co USE ONLY	de (7)								
Name of Monitoring F	Firm Hired by	Building	Owner (8)		ASCI	M No. Name	e of Abatement (Control - 1 - 1 (0)				
New York Environm Street Address	nental				1,100,		tech, Inc.	Contractor (9)				
88 Harbor Road				527		Stree	t Address					
City, State & Zip Cod	e						Radio Road		2.4			
Port Washington, N	Y 11050					Little	State & Zip Code Egg Harbor, N.	0 1 00007				
Project Manager for N Michael Baudo	Monitoring Fi	rm	T	elephon	e Number	Telep	hone Number	00001	License Nu	mher		
Scheduled Start Date	(10)	Schodul		16-944-			96-6916			0081	7	
October 1, 2	016		ed Comple Dece	mber 1		Name	of OSHA Monit tech, Inc.	or				
Occupancy Status Du Facility Closed	ring Abatem	ent (Chec	k only one	1		Street	Address					
Abatement Pe	erformed Out	side of No	ormal House	re	Herit		adio Road					
Other - Descr	ibe:						State & Zip Code					
Facility Occup	ied During A	batement				Little	Egg Harbor, NJ	08087				
Scope of Work (Check												
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≥3 sf or ≥ 50 lf				Renova	ation				Negative Pres	sure		
≥160 sf or ≥260	O If			Demoli			Mini-End					
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	tion of	W-200722500000	Is Location	n Normally	Used Solely	De	escription of	empled() an	d Non-Friable P			- 4 T
Asbestos-Contain	ing Material ABATED	(ACM)	by Mainten	ance or Cu (12)	stodial Staff?	Asbes	stos-Containing	Am	ount (Specify S	F	ileme	nt Type
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	3)					(I.e., ti insulatio	nermal systems n, surfacing, VA	₋		R	Z Z	Enca
			Yes	No	N/A	or othe	r miscellaneous)			Removal	Repair	Enclosure
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ame of Registered W	looks I I I -											
and of Negistered W	asie Hauler		NJDEP \		Cubic '	Yards of Waste	Name o	f Registered	Landfill			
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26 5		1			Signatu	ne · ///		Date				
ıthetta Roots		Adminis	strative As	st.	1400	ane all	7.0	Conta	mbor 20 2040			

Check # 11159

NOTIFICATION OF ASBESTO
(Pursuant to NJAC 8:60

Date of Notification (1) November 23, 2016 Name of Building Owner / Operator (2) September 20, 2016 Bank of America Type Notification Agencies Notified Street Address EPA 170 Broad Street DEP XIDOL Initial City, State & Zip Code Amended Red Bank, NJ 07701 X DOH Amendment # 1 Cancellation Name of Contact Telephone Number Jim Kalafsky 908-625-6900 FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Bank of America School (K-12) Street Address Subchapter 8 (Other than K-12) 170 Broad Street Other (i.e., private & commercial buildings, home, etc.) Square Feet # of Floors Bldg. Age City (5) 6,000 112 Red Bank Current Use (Prior if being demolished) County (6) County Code (7) Monmouth USE ONLY Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) New York Environmental Synatech, Inc. Street Address Street Address 88 Harbor Road 829 Radio Road City, State & Zip Code City, State & Zip Code Port Washington, NY 11050 Little Egg Harbor, NJ 08087 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number Michael Baudo 516-944-9500 609-296-6916 00817 Scheduled Completion Date (11) Scheduled Start Date (10) Name of OSHA Monitor October 1, 2016 December 28, 2016 Synatech, Inc. Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 829 Radio Road Abatement Performed Outside of Normal Hours City, State & Zip Code Other - Describe: Little Egg Harbor, NJ 08087 Facility Occupied During Abatement Scope of Work (Check all that apply) Full Containment with Negative Pressure ≥3 sf or ≥ 50 lf Renovation Mini-Enclosure ≥160 sf or ≥260 lf Demolition Glovebag Procedure Non-Exempted(*) and Non-Friable Procedure Location of Is Location Normally Used Description of Abatement Type Asbestos-Containing Material (ACM) Solely by Maintenance or Asbestos-Containing Amount (Specify Custodial Staff? (12) Material (ACM) TO BE ABATED SF or LF) (i.e., thermal systems IN Facility Encapsulate insulation, surfacing, VAT (13)Enclosure Remova Repair or other miscellaneous) N/A Yes No Main Banking Area X Carpet Mastic 4.000 SF X Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Waste Name of Registered Landfill Hauler ID No. 27429 Synatech, Inc. 20 Grows Landfill City, State Disposal Date City, State Little Egg Harbor, NJ 08087 December 29, 2016 Morrisville, PA Completed By Signatûre Date November 23, 2016 Diane Aloia Executive Administrator September 20, 2016

PAGE 83/84

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☑ DOLAND	Amended			- Oile	24	Complete Common			1	ASSET	100	I.T	POL	-&
DHSS ·	Amandmer	it #	-		State, Zip					LY	11/21	7		_
DCA (NJAC 5:23-8)	Emergency justification	(includi	ពិត្ន	Glen	Ridge, N	J 07028			_ :					
(19874 9,24-6)	Cancellatio	4		_	e of Conta	C.				Telaphone Nu	mosr		-	_
	- Annadarin			TO A STATE OF	n Rogers									
Name of Facility Where A	N-h	. =:	100	F/	CILITY	NFORM,	KTION						_	
	CONTRACTOR TE	king Plac	te (3)						rpe of Facilit		- Allie	-		_
Private house Stree: Address					_			E	School (K-	12) 8 (Other than K-1				
orrest Address				0.513				16	Subchapte:	8 (Other than K-1 private and comm	2)	es ad talle		
G(ty (5)					2			1 1	hames, etc	r) Susam sur contail	FR C(출) [Mari Car	198,	
								Se	uere Fest	# of Floors	T	ildg.	Age	
Glen Ridge, NJ 07028 County (6)				-		_				-				
issex				Cau	nty Code (7)	(STATE L	SE ONLY	Ci	urren: Use [[rior if baing demo	(ished)			-
Name of MonHoring Firm	Rined by Rintal	of Character	781	140=						via cata via				
	timed of Daniell	ig Owbit	[4]	ASCA	I No.			GET	Contractor (9)			-	
Toet Address						Gr Tec								
							Address		-				_	
ity, State, Zip Code							Iley Rd #							
7,,p						1	ata. Zip C							
roject Manager for Monit	atina Firm		17-1	epháne		Wayne	NJ 0747	70						
			1,61	epnone	NO.	Teleph	5530		4 (License No.				
Itart Date (10)	TSel	beluber	Eamol	etien D	nte (55)	973-63	6-1777			01127				
11 / 22 /		11												
Occupancy Status During	Abatement (Ch	eck only	Ome)	-		Environ	Vision Co	250	itents, Inc					
Facility Closed/Vecater	During Entire	Barlad a	d Alberta	ment				223	W E				52,530	
Abetement Partnered	Distains of Nam	mmi Chatt	he blace	_ B	soribe	20-21 V	Vegeraw etc, Zip Co	Ro	ad, Blog .#	35E				
TIME OF ADELEGIANT;	Alti-	PM/	PM		AM									3(7)
cope of Work (Chack all)	hat apply)			-	-	Water Lie	Chan	741	U delector	nation was negation				
3 >3 of or =3 if		IP: o			d)	Н	Full Cont	aine	nent with Ne	rement wen degain Gelive Pressure	m pres	sure		
g >3 af cr >3 lf ≥ 160 af or ≥260 lf		R	enovat emoriti	חם ממ		岡	Min-End	losu	re-	240				
			_				Nou-Exer	g Ph mpt	ed (°) and H	Tant with Negativ	109 E 141831	sure		
Location o	,		e Local			- and the second		-			-) Sherr	T Ins	Turse
Asbestos-Containing M	eterial (ACM)	Use	Norme ed Sok	ala da Ma	A	De	scription of	4			Radme.	3	T	-
TO BE ABAT	EQ	Ma	intena Itodiai	incev	(1.6	atos Cont L. thermal	alreng Mat systems II	ieria hsui	I (ACM) stian.	Amount (Specify	18	Repair	20	man
IN Facility (13)		028	(12)	21811.		surfac	ing, VAT.	30		SIF OF LF	Removal	墨	Encapsulate	Chilogure
, where		Yes	No	N/A		other n	viacellane:	ous)			-		ale	49
tchen-first floor		1.625	I NAG	N/A	_						+	_		-
throom-second floor		1	片	-	Duct-wr					20 LF	Ø			C
throom-third floor			H	NA IN	Duct-wn			_		NOLF	8			
		-	12	×	Duct-wit	apoli cut				5 LF	M			
ame of Registered Waste	Harder		الل											
	LIGHIGL		KI	IEP Wast	Hauter ID No.	Cubio Yas	ds of Weste	N	one of Regis	itered Landfill				-
Tech LLC ty, State				03378	5	TBE		T.	R.R.F. Inc					
			onal Co nstant			Disposal	Date		ty, State			-		
ryne, NJ 07470						TBD		Tu	Bytown, P.	A.				
ompleted By (Print or Typ	5) T	#a				400	ratura	A		The second name of the second na	±1s			-
levtic														

TEGETVER

Date of Notification (1)	**(Na	ime of	Building	Owner/Operator	(2)					
-41/23	16	120		M.S	. M.	ARTHA	CABET	<u>S</u>				- 4
Agency Notified	Type Notification		St	reet A	ddress			1 MOV	246	UIU		-
D EDA	A Initial											
□ EPA □ DEP	☐ Amended		Ci	ty, Sta	te, Zip C	ode .	, 0		07/	0	1	Š.
A DOL	Amendment#			*	HASO	Brouck	HEIGH	ZN.Z	0 16	, 0	_	
A DOH	☐ Emergency (including iustification)	ng	Na		f Contact			Telephone Num	per	-0		
DCA	☐ Cancellation			H	5.7	. SENTIPA	tc					
	- 4		F	FACIL	ITY INFO	ORMATION						
Name of Facility Where	Abatement is Taking Pla	ace (3)	-		•		Type of Facility	(4)				
E-1	S. MARCHA		1=1	6			☐ School (K-12)	X				
	2. 11/11CCH14	CAC	, 0,	2,,,			☐ Subchapter 8	(Other than K-12)) .			
Street Address				G	- 4 ,	4	Other (i.e. pri	vate & commercia	i building	s,		
						<u>*</u>	homes, etc.) Square Feet	# of Floors	Bldg. A	Age		
City (5)			_		28		1800.	100000000000000000000000000000000000000		90	10)
. HASB	rouck HE	1004	TS							/	, _	_
County (6)					Code (7)	(STATE USE		ior if being demoli	Sneq)			
BER	LEN		0	NLY)	***			03N CE				
Name of Monitoring Fi	rm Hired by Building Own	er A	SCM N	lo.		Name of Abater	nent Contractor (9))				
(8)						Best Re	moval In	С				
Street Address						Street Address						
				**		450 Sou	th River	St				
City, State, Zip Code				-		City, State, Zip						
0.5,00.0,00	84					Hackens	ack, N.J	. 07601				
Project Manager for M	Ionitoring Firm	Tel	ephone	No.		Telephone No.		License No.				
/ toject manager for is						201-329	-7444 -	00388				
Start Date (10)	Scheduled 0	Completio	on Date	(11)		Name of OSHA						
1 1 1,	6 12		16	(,		Omega	Environm	ental	117			
101(1.	ring Abatement (Check or	1 4 1				Street Address						
				2	4	280 H	uyler St					
☐ Facility Closed/Vac	ated During Entire Period led Outside of Normal Far	of Abate	ement		*	City, State, Zip						
-21 Other - Describe:	8:02 AM TO	T:	20	PM				,N.J. 07	7606			
Scope of Work (Check		3 .	-	-		- ,44		•				
	k an that apply)		-	-			Containment with i-Enclosure	Negative Pressul	re			
22 2 3 sf or ≥ 3 lf □ ≥ 160 sf or ≥ 260 lf					ovation notition	_R-G16	vebag Procedure		**			
@ 2 100 St 01 2 200 ft						☐ Non	-Exempted (*) an	d Non-Friable Pro	cedure	AL	- 1	
		ls	Locatio	n						A	Tyr	men De
		N	ionnally	1		Description	-f				1	T
	ation of ning Material (ACM)		d Solely		Asbe	stos Containing N	faterial (ACM)	Amount		7		ᄪ
TO BE	ABATED	1	ustodia	35000	(i.e	thermal system	s insulation,	(Specify SF or LF)		Removal	Repair	Encapsulate
	Facility (13)	'	Staff?			surfacing, VA other miscellar		SI OI LI		OVA	N N	Bula
	(13)		(12)			02.01 11.00		83		-		6
		Yes	No	N/A								1
BASEM	ENT				THER	MAL SYSTER	Y INSULATION	82	LF	×		
3,10					1							
		+							**			
		+			-	98						-
Nome of Decisions of S	Nacta Haudar	I NI	DEP W	lacto I	dauler	Cubic Yards of	Name of Reg	stered Landfill				
Name of Registered	noval Inc		No.	este I	IGMC!				riens		ТТ	·C
Dest Kei	HOVAI IHC		171	109		242	Minerv.	a Enterpi	. I Ses	, ,	لاند	10
City, State						Disposal Date	City, State					
Hackensa	ack , N.J. 0	7601				12/8/16		sburg, Oh	1,446	88		
Completed by	Title	, 001				Signature	0	01	Date	,	1	
	1	timat	tor			1 1	Toionon	P	11/	2	3	16
J.Maiorar	10 150	TIIId	LUI		-hh 1	inamenta avanta	d activities				1	

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W = 4// 5L)		(Pur	suant to	NJAC 8:	60 and 1	2:120)	-	15 NO 15	2 4						
Date of Notification (1) 11-21-2016		100000		Building Ov uilders (erator (2	2)		ia OW	25	201	6			
Agencies Notified Type Notification		100000	treet Add	lress x Street	t			115					1		
EPA X Initial Amended Amendment				, Zip Code e Park, I		62			45 5 - 1 1				7		
X DOH justification) DCA Cancellation		1 333	ame of Connie	Contact Bihunial	k			Telephone Number 201-880-6174							
			FACILI	TY INFO	RMATIO										
Name of Facility Where Abatement is Takir Commercial Street Address	ig Place (3)						Type of Facilit School (Facility Subchap								
110 Market Street							Other (i.e etc.)	e, private	& commercia	al buildi			i,		
City (5) Saddle Brook, NJ 07663							Square Feet 5000+	2	of Floors	67	dg. Ag '+	je 			
County (6) Bergen			County Co STATE US	ode (7) SE ONLY)		_	Current Use (Prior if b	eing demolish	ed)					
Name of Monitoring Firm Hired by Building	Owner (8)							ement Contractor (9) ironmental Services,LLC							
Street Address					Address ⁄irginia Ave										
City, State, Zip Code	City, State, Zip Code						r, State, Zip Code rsey City, NJ 07304								
Project Manager for Monitoring Firm		-	Telephon	e No.		2.300	one No. 33-8855		License N 01174	0.					
Start Date (10) 11-22-2016	Scheduled		pletion D	ate (11)			of OSHA Moni as above	tor							
Occupancy Status During Abatement (Che	ck Only One	e)				Street	Address								
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe:	Period of Al	batem	ent		_	City, St	ate, Zip Code	l l							
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 lf ≥ 160 sf or ≥260 lf		enova emoliti	7070000			×	Mini-Enclo Glovebag	sure Procedu	rith Negative re and Non-Fria			e			
	le	Locati	on								Abate	ement			
Location of	N	ormal	ly		Des	cription	of				1)	ре Г			
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mai	d Sole ntenar odial S (12)	nce/		thermal surfac				Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure		
Roof	163	X	13075		Roofin	ng ma	terial	1	1300 SF	X					
1st Floor		X			1100111	VAT			200 SF	X					
Name of Registered Waste Hauler		1	JDEP W	Waste Cubic Yards Na				Name of Registered Landfill							
Green Environmental Services		2.23	lauler ID 034889		of Waste 7 G.r.o.w.s. North Landfill										
City, State Jersey City, NJ					1.0	sal Date 3-2016	200	State risville	, PA						
Completed by Liliana Serrano	Signature Date 11-21-2016						6								

MARK		NC			OF ASBES		ABATEME d 12:120)	NT									
Date of Notification (1)			1	Name of E	Building Ov	wner/C	Operator (2))									
100	hor 22 2016		1		ark, LLC			500									
Agencies Notified	ber 23, 2016 Type Notification		7,41-0760	Street Ade	The state of the s												
Agencies Notified	rype notinoation		1.55		Lawn A	VA											
EPA	Initial				e, Zip Code						-View - Vie						
DEP DOL	Amended Amendment #	_± 1			n NJ 074												
	Emergency (ii		-	Name of		+10			TelephoneNumber								
DOH	justification)								973-234-7026								
DCA	Cancellation		P		/lanager	TAME	ION	310-20	54-1020								
Name of Facility Where	Abatement is Taking	Place (3)		FACIL	III INFOI	NIVIA I		of Facility (4)					-			
former Cardolite		(-)					Г	School (K-12	2)								
Street Address				-/					Subchapter		han K-12)						
									Other (i.e. pr	ivate & c	ommercial	buildi	ngs,	nomes	3,		
500 Doremus								etc.) ire Feet	# of FI	oors	Blo	dg. Ag	ie .				
City (5)								oque		100000000000000000000000000000000000000	ГВО			BD			
Newark, NJ				Caunty	ada (7)			Curr	TBD ent Use (Prio			h)	- 11	טט	-		
County (6)				County C (STATE U	SE ONLY)			Juin	eni ose (i no			, ,					
Essex		(0)		10014	NI-		Name of	f Ah	atement Con		cility						
Name of Monitoring Firm	n Hired by Building (Owner (8)		ASCM	No.		the services				1						
AET, Inc.								Group, Ll	_C.								
Street Address						Street A			o== 00	_							
907 Doolittle Drive								HWY N,	STE 20	9							
City, State, Zip Code							, State, Zip Code										
Bridgewater, NJ 088	807						erry Hill, NJ 08034 elephone No. License No.										
Project Manager for Mor	nitoring Firm			Telephor	ne No.		22200 Hotel 2000 CO			100).					
Eric Houseknecht			((908) 218-1108 (973) 759 - 5000 00781													
Start Date (10)		Schedule	d Con	npletion [Date (11)		Name o	f OS	SHA Monitor								
10/30/	16			4/30/17	7	-			Group, L	LC.							
Occupancy Status Durin	ng Abatement (Chec	k Only On	e)														
Facility Closed/Vac	cated During Entire I	Period of A	baten	nent	STE 20	9			1950								
Abatement Perform	ned Outside of Norm	al Facility	Hours	lours City, State, Zip Code													
Other - Describe:		-		Cherry Hill, NJ 08034													
Scope of Work (Check /	All That Apply)					T		_									
≥3 sf or ≥3 lf		X R	enova	ation			\geq			ntainment with Negative Pressure							
≥160 sf or ≥260 lf			emolit	tion			K	Mini-Enclosure Glovebag Procedure									
							5	on-Friable	Proced	iure							
			4.30											ement	t		
		100	Locat lorma			_	N						Ту	ре			
Location Asbestos-Containing		Use	d Sole	ely by	Ashest		Description on taining Ma		al (ACM)	Am	ount			m			
TO BE A			intena			therm	al systems	insu	ılation,		ecify	Re	Z	Encapsulate	Enclosure		
In Fac		Cusi	(12)	Staff?	220		facing, VAT r miscellane			SF o	or LF)	Remova	Repair	psu	lost		
(13)					Ullie	i illiscenario	cous	"			val	Ħ	late	Гe		
		Yes	No	N/A													
Bld	1	X					Roofing	1		415	60 s/f	X					
		\rightarrow									0 s/f	X					
11							vessel					$\langle \cdot \rangle$					
Bld 2							pipe			4	05 lf			-	-		
11					vessel			35	5 s/f	X							
Name of Registered W	1	NJ DEP V	Vaste	48.755.75	ic Yards Name of Registered Landfill												
	1	Hauler ID		of V	Vaste	10			/ DEL /	000	MO	/ TD	DE				
Newark Carting / Sp								Cumberland Co./ BFI / GROWS / TRRF									
City, State				Dis	posal Date		City, Sta		e / Imperial / Morrisville, PA								
Newark, NJ			4/30						Newbur	g / Impe			ille,	PA			
Completed by					Signature		10/-	1	1 222	ate	_						
Michael Cooper	ent					11/23/16											

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

Date of Notification (1)		Name of Building Owner/Operator (2)																	
Nover	mber 15, 2016			Phoenix															
Agencies Notified	Type Notification			Street Ac	ddress														
⊠ EPA	Initial			333 Bro	ad Stre	et													
DEP	Amended			City, Stat	te, Zip Co	ode													
DOL	Amendment Emergency			Red Bar	nk, NJ (07701													
□ DOH	justification)	incidaling		Name of	Contact			TelephoneNumber											
☐ DCA	Cancellation			Project I	Manage	er		973-234-7026											
N		51 (6		FACIL	LITY INF	ORMATI	ON	_	of Facility (4										
Name of Facility Where	Abatement is Takin	g Place (3	3)					-)											
former Cardolite								School (K-12)											
Street Address								Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes,											
500 Doremus									etc.)							20208			
City (5)								100000000000000000000000000000000000000	re Feet	# 0	f Floors		В	ldg. A					
Newark, NJ								TBD TBD TBD Current Use (Prior if being demolished)											
County (6)				County C	Code (7) <i>ISE ONLY</i>	7		Curre	ent Use (Prio	r if be		16							
Essex							25.5				facility								
Name of Monitoring Fire	m Hired by Building	Owner (8)	E	ASCM	No.		1155000 VANO		tement Cont		(9)								
AET, Inc.									Group, Ll	_C.									
Street Address							0.0000000	Addres	767) 		-continues and								
	Doolittle Drive y, State, Zip Code						1500 Kings HWY N, STE 209 City, State, Zip Code												
September 1997 and the																			
	ewater, NJ 08807 ect Manager for Monitoring Firm						Cherry Hill, NJ 08034												
least flow of the state	ect Manager for Monitoring Firm Houseknecht				ne No.		Telephone No. License No. (973) 759 - 5000 00781												
Eric Houseknecht		0-1		(908) 21			1 1				00781								
Start Date (10)	40	Schedul	ea Co	mpletion [201		Market State of the State of th		HA Monitor	_									
10/30/ Occupancy Status Duri		k Only O	201	4/30/17			-		Group, LL	_C.			_						
				4500 Kinne I WARAN OTT 000															
	cated During Entire med Outside of Norn																		
Other - Describe:		iai i aciiit	y i iou				A 100 A 100 A												
Scope of Work (Check	All That Apply)						Cherry	y mill,	NJ 08034	ŀ.									
5-3	/ III That / Ippiy/	\square	_				Full Containment with Negative Pressure												
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		promoting.	Renov Demol				Mini-Enclosure												
			50,,,,				Glovebag Procedure												
			12					X No	n-Exempted	(*) and	Non-Fria	ble Pro		Solevinore:					
0		1000	s Loca	U111711111111												t			
Location		17.000	Norma	ally ely by			scription			100		-			T .				
Asbestos-Containin TO BE A		Ma	ainten	ance/			taining N I system		105				Z)		En	Ш			
In Fac	Control of the contro	Cus	todial (12	Staff?	(surfa	acing, VA	AT, or				1	P.M.	Rep	aps	nclo			
(13)		(12	,		other	miscellar	neous)					0 0 2	air	ulai	Enclosure			
		Yes	No	N/A	/10 m = =								-		е				
Bld	1	X					Roofin	a	7	4	150 s/f		/						
"		\rightarrow										_ <	\geqslant						
		$+ \langle \rangle$	-	+			vessel			,		\prec	\rightarrow	_	-	-			
Bld	Bld 2						pipe				405 lf	/	X			-			
"							vessel	sel 35 s/f											
-"- Name of Registered Waste Hauler				NJ DEP W Hauler ID			Yards		Name of F	Regist	ered Land	dfill				2			
Nowark Carting / Ca						of Wa			Cumborl	and (Co / DEI	/ 00		NC	/ TD	DE			
City, State	Darlan Environm	ciiidi		222	.33	Diene	TBD sal Date	,	City, State		t with Negative Pressure dure and Non-Friable Procedure Abateme Type Amount (Specify SF or LF) Amount (Specify SF or LF) Anoval Abateme Type Anoval Anoval Anoval Anoval Anoval Anoval An								
Newark, NJ							4/30/17		10,		nerial /	Morri	Pressure e Procedure Abatement Type Removal I GROWS / TRE						
Completed by		Title					Signature		INCMOUIG	1 1111	pendi /		SVI	ııc,					
Michael Cooper		Presid	dent				1	-1	//				116	3					
iviioriaci ocopci	MOIIL			1		[11/15/16													

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

		Location Normall		Description of		Abatement Type						
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	ed Solel intenar todial S (12)	y by nce/	Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Eliciosole			
	Yes	No	N/A	*				(D)				
Bld 2	X			roofing	6500 s/f	X			_			
_"	X			transite	3160 s/f	\times		_				
Bld 3	X			transite	880 s/f	X			_			
"	X			roofing	2900 s/f	X			L			
Bld 4	X			duct insul	850 s/f	X						
"	X			roofing	2500 s/f	X						
Bld 5	X			transite	480 s/f	X						
""	X			pipe	220 l/f	X						
Bld 6A	X			roofing	1715 s/f	X						
Bld 7	X			pipe	100 l/f	\times						
Bld 10	X		4	galbestos	3500 s/f	X						
Bld 12	X			transite	1075 s/f	X						
11	X			vessel	200 s/f	X						
"	X			pipe	215 l/f	X						
Bld 21	\overrightarrow{X}			pipe	230 l/f	X			T			
"-	\overrightarrow{X}			Vat/Mastic	200 s/f	X			T			
11	\Rightarrow			transite	100 s/f	X						
pipe rack	\Rightarrow			pipe	915 l/f	X	1		T			
misc	\Rightarrow			vessel	300 s/f	\overline{X}			Ť			
misc structures	\Rightarrow	-		transite	880 s/f	\overline{X}			T			
THISC Structures				transite	000 0/1							
									+			
		-				+						
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	-											
2									+			
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								-	1			
	-	-				-		+	1			
					le come entre e i con centre				4			

Location of		Location		Description of		Abatement Type						
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	ed Sole iintenar todial S (12)	ice/	Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure			
	Yes	No	N/A					Ф				
Bld 2	X			roofing	6500 s/f	X						
"	X			transite	3160 s/f	X						
Bld 3	X			transite	880 s/f	X						
"	X			roofing	2900 s/f	X						
Bld 4	X			duct insul	850 s/f	X						
"	X			roofing	2500 s/f	X						
Bld 5	X			transite	480 s/f	X						
"	X			pipe	220 l/f	X						
Bld 6A	X			roofing	1715 s/f	X						
Bld 7	X			pipe	100 l/f	X						
Bld 10	X			galbestos	3500 s/f	X						
Bld 12	X			transite	1075 s/f	\times						
"	X			vessel	200 s/f	\times						
"	X			pipe	215 l/f	X						
Bld 21	X			pipe	230 l/f	X						
"	X			Vat/Mastic	200 s/f	X						
	X			transite	100 s/f	X						
pipe rack	X			pipe	915 l/f	X						
misc	X			vessel	300 s/f	X						
misc structures	X			transite	880 s/f	X						
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

CK#1219	N			OF ASBE				15	Ē	C E		W	Ē	121	9.			
Date of Notification (1)			Name of	Building (Owner/O	perator ((2)		-									
November 23, 2016	3	3	aJ Fac	ilities											11			
Agencies Notified Type Notificat	ion		Street Ad	ddress				16.		NOV 2	210	201	b		211			
⊠ EPA		1	99 Gra	indview	Rd.													
DEP Amende	d		City, Sta	te, Zip Co	de	6			1					٦				
DOL Amendm		_ s	killmar	n, NJ 08	3558													
DOH Emerger justificati	ncy (including	-	The state of the s	Contact				1-th-position	Tele	phoneN	umbe	er			-			
DCA Cancella	200	P	roject	Manage	r				973-	641-17	36							
				LITY INFO		NC												
Name of Facility Where Abatement is T	aking Place (3)					Туре	of Facility (4))									
Skillman N&S Buildings								School (K-12)									
Street Address	-							Subchapter 8				11 41		h	_			
199 Grandview Rd.							Other (i.e. private & commercial build etc.)							dings, homes,				
City (5)							Squa	are Feet	# of	Floors		Blo	dg. A	ge				
Skillman, NJ																		
County (6)			County (Code (7)			Current Use (Prior if being demolished)											
Somerset			(STATE U	JSE ONLY)	s 	Somerset												
Name of Monitoring Firm Hired by Build	ling Owner (8)		ASCN	1 No.		Name	e of Abatement Contractor (9)											
	(-)					The MACK Group, LLC.												
AET, Inc. Street Address					Street Address													
00000 833 B W W									STE 2	na								
222 Church Road			_				Kings HWY N, STE 209 State, Zip Code											
City, State, Zip Code					arrant and an a street													
Bridgewater, NJ 08807			Telepho	no No		Teleph		NJ 08034		License	No.							
Project Manager for Monitoring Firm			000000000000000000000000000000000000000			000000000000000000000000000000000000000			,	00781	. 140.							
Project Manager Start Date (10)	Cahadul			18-1108 Date (11)		(973)		HA Monitor		30701								
\$ 25.	Scriedur	eu Con							0									
12/9/16	261-0-1-0		12/9/1	1		Street		Group, LL	.U.						-			
Occupancy Status During Abatement (Sneck Only Of	ie)				NEW CONTRACTOR			OTE O	00								
Facility Closed/Vacated During En								S HWY N, S	5152	.09								
Abatement Performed Outside of I Other - Describe:	vormai raciiity	/ Hours	5					Zip Code										
			Cherry Hill, NJ 08034															
Scope of Work (Check All That Apply)						F	∇											
≥3 sf or ≥3 lf	Contract Contract	Renova				Full Containment with Negative Pressure Mini-Enclosure												
≥160 sf or ≥260 lf	Ш.	Demoli	tion			ľ		lovebag Proc	edure									
							Non-Exempted (*) and Non-Friable Procedure											
	Is	Locat	ion									- 1		ement	ĺ			
Location of	250	Norma	200		De	scription	n of				-		1 y	ре				
Asbestos-Containing Material (ACM		ed Sole aintena			tos Cont	taining N	// ateri	al (ACM)		mount				ш	m			
TO BE ABATED		todial		(i.e	. thermal	I system icing, VA		lation,		pecify or LF)		Rer	Re	ncap	ncl			
In Facility (13)		(12)				miscellar)	31	OI LF)		Remova	Repair	Encapsulate	Enclosure			
				+								al	=	ate	ē			
	Yes	No	N/A	1														
R110A&B		X			VA	AT/Mas	stic		53	36 s/f		$\langle \rangle$						
R115, R118 & R122B, R109	9	X		Transit	e from 4	4 fume	hood	s & bases	46	64 s/f		X						
				- 1														
			1															
Name of Posistered Waste Hauler		1	NJ DEP V	Vaste	Cubic	Yards	ards Name of Registered Landfill											
Name of Registered Waste Hauler	1 2	Hauler ID		of Wa			, value of f	.ogioto	. Ju Land									
Newark Carting		45	09		10		GROWS	N La	ndfill									
City, State					Dispo	sal Date		City, State	9									
Newark, NJ				12/9/17	7	Morrisvill	e, PA	19067	7									
Completed by	Title					Signatur		1/2/	0	T	Date	1						
Michael Cooper	dent			PR 100	1//	-7.				11/2	3/16	3						

1219

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

CV # 93477374-1				to NJAC						\ E	G	F		747	E		
Date of Notification (1) 11/19/2016			Name of	f Building (Uillen	Owner/C	perator	(2)				(5)		Li		- and		
Agencies Notified Type Notification EPA Initial			Street A							5	NO	/ 2	Ŝ	2016			
DEP Amended Amendment #				ate, Zip Co wood, N		10				4.88	EST	03	GDI	Ţñ.	JLa		
Emergency (in justification)	cluding	- 1		f Contact		-			Tele	phone	Num	ber					
DCA Cancellation			Carl Q	Uillen LITY INFO	DESAT	ON											
Name of Facility Where Abatement is Taking House Street Address	Place (3)	FACI	LITTINFO	JRMATI	ON	Sch Sub	er (i.e. p									
City (5) Maplewood							Square I N/A	eet	# of N/A	Floors	3	Bidg. Age N/A					
County (6) Essex				Code (7) USE ONLY)			Current House		or if bei	ng den	nolish	ed)					
Name of Monitoring Firm Hired by Building ON N/A	wner (8)		ASCM No. Name of Abate D&S Abate						tement Contractor (9) ement, Inc.								
Street Address			Street Address 11 Rosengren Avenu														
City, State, Zip Code	ty, State, Zip Code							Code 07512									
Project Manager for Monitoring Firm			Telepho	ne No.			none No. 345-868	5		Licen 0131	se No						
	Schedul 12/02/		pletion	Date (11)			of OSHA Abatem		C.					Ar—ren			
Occupancy Status During Abatement (Check	Only O	ne)	Street Address														
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe: Occupied																	
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	Renovat Demoliti				×	Mini-E Glove	ontainme inclosure bag Proc	edure					dure			
Location of	1 23	Locatio	7		Des								Abate Ty	ment pe			
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	ed Solel intenan todial S (12)	y by ice/		tos Cont thermal surfac		faterial (A s insulatio T, or		(S	mount pecify or LF)		Removal	Repair	Encapsulate	Enclosure		
basement	100	X	18073		Pipe	insula	tion		7	5 LF		Х					
Name of Pogistered Wests Harden	l N	IDED 14	loots	Culti	Vord-	1.	lome -f.) nelst	- الم	nde"							
Name of Registered Waste Hauler D&S Abatement, Inc.		Ha	JDEP Waste Cubic Yards of Waste D996 TBD				1 0	lame of F Vaste N				PA					
City, State Totowa, NJ	1	Disposal Date City, State TBD 7 Tullytown															
Completed by Oliver Hegedis	ect Ma	nager		Signature Date 11/19/201					016	16							

# 225878	Garil		(Pu	rsuant t	o NJAC 8	:60 and	12:120)		12	E	3 E						
Date of Notification (1) 11/19/2016					Building C hangeux		perator	(2)		120								
Agencies Notified	Type Notification			Street Ad	idress						N	0 V 6	1 -	21	Jib			
EPA DEP DOL	Initial Amended Amendment #				e, Zip Coo field, NJ		1	l'		ASBESTOS CONTROL O								
DOH DCA	Emergency (in justification) Cancellation	iciuaing	160	Name of Jean C	Contact hangeu	x				L_Tele	ephone N	lumber						
				FACIL	ITY INFO	RMATI	ON											
Name of Facility Where House	Abatement is Taking	Place (3))					Туре	School (K-12 Subchapter	2)	or than V	12\						
Street Address								×	Other (i.e. pr	ivate &	& comme	rcial bu	ildi	ngs,	nome	s,		
City (5) Springfield	7							Squa N/A	are Feet	# of N/A	Floors		Blo N/	ig. Ag A	ge			
County (6) Union				County C	Code (7) ISE ONLY)			Curr	ent Use (Prio JSE	r if bei	ng demol	lished)						
Name of Monitoring Firm	m Hired by Building O	wner (8)		ASCM	l No.		Name of Abatement Contractor (9) D&S Abatement, Inc.											
Street Address							Street Address 11 Rosengren Avenue											
City, State, Zip Code							City, State, Zip Code Totowa, NJ 07512											
Project Manager for Mo	nitoring Firm			Telephor	ne No.		Land State of the	hone N	No. 8685		License 01311							
Start Date (10) 12/01/2016		Schedule		npletion [Date (11)				HA Monitor tement, Inc	C.								
Occupancy Status Durin		W-78-605					Street Address											
	cated During Entire P med Outside of Norma Occupied					_	11 Rosengren Avenue City, State, Zip Code Totowa, NJ 07512											
Scope of Work (Check. ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	All That Apply)		Renova Demolit	ion				M K G	ull Containme lini-Enclosure lovebag Prod on-Exempted	edure			Proc	edur	ement			
Location	on of	1	Locati Normal	lly	- 25	De	escription	n of						Ту	ре			
Asbestos-Containin <u>TO BE Al</u> In Fac (13	g Material (ACM) BATED cility	Ma	ed Sole intena todial ((12)	nce/		therma surfa	itaining l I system acing, V/ miscella	ns insu AT, or		(Amount Specify F or LF)	200	Removal	Repair	Encapsulate	Enclosure		
basen	nent	168	X	IN/A		Pine	e insula	ation			12 LF	2	ζ					
crawl s	10000000		X		Pipe insulation Pipe Insulation						20 LF		ζ					
75 miles (1974) (1974)																		
Name of Registered Wa	aste Hauler	NJDEP Waste									e of Registered Landfill							
D&S Abatement, In	IC.		20996 TE								gemen	t of P	A					
City, State Totowa, NJ						TBD	//											
Completed by Oliver Hegedis		Title Proje	ect Ma	anager	9		Signature Date 11/19/201					016	16					