104 0590 PA	ID		ATION O	of New J F ASBES NJAC 8:6	TOS A				000	EC	<u>E</u>			
Date of Notification (1) 11/17/2017	STANTA STANTA		lame of B	uilding Ow Vlackie	ner/Op	perator	(2)			NOV	2 9	20	17	P
Agencies Notified Type Notification		S	treet Add	ress						ASBEST				&
X EPA X Initial Amended Amendment #	ŧ			, Zip Code NJ 07083							ICENS	IING		
Emergency (i DOH DCA Cancellation	ncluding	100	Name of C						Tel	ephone Nur	mber			
			FACILI	TY INFOR	MATIC	NC								
Name of Facility Where Abatement is Taking House	Place (3)						Тур	School (K-12	2)		2)			
Street Address					*		×	Subchapter Other (i.e. pretc.)	ivate	& commerci	ial build			s,
City (5) Union							Squ N/A	uare Feet A	# c	f Floors A	Vid 5500	ldg. A	ge	
County (6) Union			County Co	ode (7) SE ONLY)				rrent Use (Pric	r if be	ing demolis	hed)			
Name of Monitoring Firm Hired by Building ON/A	Owner (8)	!_	ASCM	No.				batement Con atement, In		r (9)				
Street Address						Street 11 R		ress ngren Aver	nue					
City, State, Zip Code								Zip Code NJ 07512						
Project Manager for Monitoring Firm	-	T.	Telephon	e No.		Telepl 973-		No. -8685		License I	No.			
Start Date (10) 11/28/2017	Scheduled		npletion D	ate (11)				SHA Monitor atement, In	С.					
Occupancy Status During Abatement (Chec						Street								
Facility Closed/Vacated During Entire I Abatement Performed Outside of Norm Other – Describe: occupied	Period of A	batem	nent			City, S	State	engren Aver , Zip Code , NJ 07512	nue					
						100	Jwa	, 143 07312						
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova emolit					×	Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	e cedur	Э			ıre	
	le	Locat	ion					Non Exempte	- () -			Aba	temen	t
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Mai	lorma d Sole ntena	lly ely by nce/ Staff?	Asbesto (i.e. t	os Con therma surfa	escriptio Itaining I systen Iscing, V miscella	Mate ns in: AT, o	erial (ACM) sulation, or us)		Amount (Specify SF or LF)	Removal	Repair	e Encapsulate	Enclosure
	Yes	No	N/A									-	- 0	
Garage		X			Duc	t Insul	latio	n		45	X	-	+	
												-	-	
			-									-		
Name of Registered Waste Hauler		,	NJDEP W	laste	Cubic	c Yards		Name of	Regi	stered Land	fill			
D&S Abatement, Inc.		1	Hauler ID 20996	55076	of Wa	aste		Waste	Man	ifest of Pa				
City, State Totowa, NJ					Dispo	osal Da	te	City, Sta Morris		PA				
Completed by Ned Joksimovic	Title Proje	ect M	anager			Signatu	ıre	A			Date 11/17	/201	7	

Print Form



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

UKH 1169	A CAR	-			.00 0110		,		A	SBEST	os c	TAOS	ROL
Date of Notification (1) 11-22-17		- 1		Building O n Tower				ı, Inc				SING	
	Notification nitial		treet Add	_{dress} nston dr	ive								
DEP A	mended mendment #			e, Zip Cod e Park N		110							
× DOH	mergency (including ustification) Cancellation		lame of 0	Contact Lambro	s Mot	titis			Telephone N	lumber	1		
Name of Facility Where Abateme	ent is Taking Place (3)		FACIL	ITY INFO	RMATIO	ON	Type	of Facility (4)					
Winston Towers				411-31-				School (K-12)	1200 CON 10	ST217			
Street Address 300 Winston Drive, Unit 9	921						×	Subchapter 8 (Other (i.e. priva etc.)			dings,	home	es,
City (5) Cliffside Park NJ							Squa	re Feet	# of Floors	E	Bldg. A	ge	
County (6) Hudson			ounty Co	ode (7) SE ONLY)				ent Use (Prior i apartment	f being demo	ished)			
Name of Monitoring Firm Hired b	by Building Owner (8)		ASCM	No.				tement Contra rprises LLC					
Street Address						Street 28 Li	Addres						
City, State, Zip Code								ip Code ark NJ 0703	35				
Project Manager for Monitoring F	Firm	Т	elephon	e No.		Teleph 973-	one N 942-6		License 01129				
Start Date (10) 12-06-17	Scheduled 1-10-18	Comp	oletion D	ate (11)		Name Marc		HA Monitor Wila			7		
Occupancy Status During Abate	ment (Check Only One)					Street						10	
Facility Closed/Vacated Du Abatement Performed Outs Other – Describe:			ent			City, S	tate, Z	perland Ave); 				
Scope of Work (Check All That A	Apply)			- pr (- pr	_	Pate	rson	NJ 07502					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	× Rer	novati				×	Mir	Il Containment ni-Enclosure ovebag Proced n-Exempted (*	dure			e	
	Is Lo	ocatio	n	9:::			140	III-Exempted () and recirri	labic i re	Abat	ement	
Location of	Head	rmally Solely	200	A - l t-		scription		1/4000	Amount		1)	ре	П
Asbestos-Containing Materia TO BE ABATED In Facility (13)	Custoo	dial St 12)	aff?		hermal surfac	aining M systems cing, VA niscellar	s insula T, or		(Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
Ceiling apartment ι		No	N/A X		Ponc	corn-ce	ilina		1750 SF	X			
Celling apartment	arnt		^		ТОРС	.0111-00	annig		1700 01,				
Name of Registered Waste Hau	ler	- 1	DEP Wa	A STATE OF THE STA	Cubic of Was			Land Control Control Control	gistered Land			***************************************	
DYV ENterprises LLC		1 775	34140		10cy		2000		aist Manag	ment			
City, State Lincoln Park NJ					1-15-			City, State Tullytown	n NJ				
Completed by Dorian Carpio	Title Manag	er			S	Signature		af _		Date 11-22-	-17		

ahii Ma	NO		tate of New N OF ASBE	Jersey STOS ABATE	MEN	т		C	E	Pri	nt For
Date of Notification (1)				:60 and 12:12 wner/Operator	- 57 	710		NOV	2 9	20	17
11/24/17		Crow	n Home F	Remodeling	LLC						
Agencies Notified Type Notification			Address				AC	DECT	20.0	ONIT	201.8
☐ EPA 🗵 Initial		436 S	S. 5th Ave	•			AS	BEST	CENS	SING	HOL &
EPA Initial Amended			ate, Zip Cod			#	Marin and desiration of the last of the la	WINDS OF THE PERSON	-	VIII COLUMN	
DOL Amendment #		Highl	and Park,	NJ 08904							
DOH justification Cancellation	cluding		of Contact ael Ben-H	aim			Telephone N	umher			
		FAC	ILITY INFO	RMATION			1				
Name of Facility Where Abatement is Taking Private House	Place (3)				Тур	e of Facility (4 School (K-12					
Street Address				•	×	Subchapter 8 Other (i.e. pr) 3 (Other than K- ivate & commer	·12) rcial buil	dings,	home	es,
City (5) Highland Park					Squ	etc.) uare Feet	# of Floors	E	Bldg. A	Age	
County (6) Middlesex		County (STATE	Code (7) USE ONLY)		Cur	rent Use (Prior	r if being demol	ished)			
Name of Monitoring Firm Hired by Building On Competent Supervisor	wner (8)	ASC	M No.			batement Cont y Construct					
Street Address				Street							
				205	Rt.	46 West Sui	te 14				
City, State, Zip Code				2272-2311		Zip Code NJ 07512					
Project Manager for Monitoring Firm		Telepho	one No.	Telepi 973-		No. -4244	License 01155				
**************************************	Scheduled 12/13/17	Completion	Date (11)	100000000000000000000000000000000000000		SHA Monitor s above					
Occupancy Status During Abatement (Check	Only One)			Street	Addr	ess					
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe:	eriod of Aba I Facility He	itement ours		City, S	State,	Zip Code					
Scope of Work (Check All That Apply)											
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		ovation nolition		2	× 0	Mini-Enclosure Blovebag Proce	nt with Negative edure (*) and Non-Fri			°A	
l anation of	L. 1000.000	cation mally				Ton Exemptor	() and () ()		Abat	ement /pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used S Mainte Custod	Solely by enance/ ial Staff? 12)		Description os Containing N hermal system surfacing, V other miscella	Mater ns ins AT, or	ulation,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes I	No N/A									Ф
Basement		X		Pipe Insula	ation		80 LF	X		X	
Name of Devicts 1991 - 111		1,000		0.11.37							
Name of Registered Waste Hauler Academy Construction Inc.		NJDEP N Hauler III 034422	D No.	Cubic Yards of Waste 2		1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Registered Land S Landfill	TIII			
City, State				Disposal Date	9	City, State					
Totowa, NJ				TBD		Tullytow					
Completed by	Title	isor	1		e C	dis De		Date 11/24/			

U2#309	D P	ATI		CATION	ate of New Jei OF ASBESTO to NJAC 8:60	S ABATE			ECE		V		
Date of Notification (1) Nov-21-2017 Che	eck # 3090	4 34.4.2			f Building Ownered		(2)		NOV 2	9 2	017		
Agencies Notified	Type Notification			Street A								+	-
				234 N	Fariview Av	enue			SBESTOS	CON	TPOL	0	-
EPA DEP	Initial Amended		-	City, Sta	ite, Zip Code			1		NSING		CL.	-
▼ DOL	Amendment	#		0.50	nus, NJ 076	52			THE RESERVE OF	NAME OF TAXABLE PARTY.	THE REAL PROPERTY.		
	Emergency				Contact			To	lanhana Nu	nah a r			
DOH DCA	justification) Cancellation				ugene Field			16	lephone Nu	mber			
L DCA	Cancellation	1				the Line of the Control of the Contr							
Name of Facility Where	Ahatement is Takir	n Place (3	8)	FACI	LITY INFORM	ATION	Type of Fac	ility (A)				-	
Visitation Academy		ig i lace (c	"				- 200	iiity (4)					
							✓ School		**************************************				
Street Address									er than K-1 & commerc		dinas	homo	
222 N Fairview Ave	enue						etc.)	i.e. private	a commerc	iai bulk	uirigs,	HOHIE	, ,
City (5)							Square Feet	# 0	f Floors	В	ldg. A	ge	
Paramus							40,000	2		5	+0		
County (6)					Code (7)		Current Use	(Prior if be	ing demolis	hed)			
BERGEN				(STATE I	JSE ONLY)		School						
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCN	1 No.	Name	of Abatement	Contractor	(9)				
Omega Environme	ntal Services						Services Co		V-7				
Street Address							Address	-					
280 Hyuler Street						0.,00,	69th Street						
City, State, Zip Code							State, Zip Code						
South Hackensack	N I 07606					75/	enberg, NJ						
								07093	T				
Project Manager for Mon	itoring Firm			Telepho			none No.		License N	Vo.			
Alex Pallets					39-8700		295-1700		01074				
Start Date (10)				pletion I	Date (11)	1 10000000	of OSHA Mor	nitor	3754 - 577 postal - 0.455				
11/24/17		11/25/				San	e as above						
Occupancy Status Durin	g Abatement (Ched	k Only Or	ne)			Street	Address						
Facility Closed/Vac	ated During Entire	Period of	Abatem	ent					140				
Abatement Perform Other – Describe:	ed Outside of Norn	nal Facility	Hours		6	City, S	tate, Zip Code	9	**		40	9)	
Scope of Work (Check A	II That Apply)							-					
	п тпас Арріу)	1000				-	7						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Statement of the last of the l	Renova Demoliti			-	Full Conta		n Negative	Pressu	re		
= 100 31 01 = 200 11			emonu	1011				Procedure					
						2			d Non-Fria	ble Pro	cedure	9	
		Is	Locati	on							Abate		
Location	of	1	Vormall	у		Description	of				Тур	oe	
Asbestos-Containing	0.15.77	*113 (MISSES)	d Sole				naterial (ACM)) Д	mount			m	
TO BE AB		100	intenar todial S				s insulation,		Specify	Re	R	nca	Enc
In Facil	ity	J	(12)	itan:		rfacing, VA		SI	F or LF)	Remova	Repair	Encapsulate	Enclosure
(13)				1	Otn	er miscellar	neous)			Val	H.	ulat	ure
		Yes	No	N/A								Ф	- 22
Room #	109		X		C	eiling Pla	ster		6 SF		Х		
1.17.7.11.11	Variation .								- /		7.		
Name of Registered Was	te Hauler		N	JDEP W	aste Cu	bic Yards	Nam	e of Registe	ered Landfi	II .			
			1	auler ID	575.75	Vaste		4770					
Tri-State Transfer A	SSOC		19	9551	tbo	i	Min	erva Ente	erprises				
City, State					Dis	posal Date	City,	State					
Bronx, NY					tbo			ynesburg	, OH				
Completed by		Title				Signature		1		ate			
Gina Betances		Offic	e Mar	nager			DV110	al	12.00	1/21/	17		

MO#24499222110		1 E A G	TO		ATIO	N OF AS	BES	TOS A		EMENT		EC	E		\mathbb{V}	E
Date of Notification (1)		All								83	115					-
	24 / .	17	_			of Buildin		ier/Ope	rator (2)		NOV	/ 2	9 2	017	-
Agencies Notified	Type Notific	cation			-	t Address						Personal Security Security Security	ance analysis	OPOC MINAME S	Charles, same	_
☐ EPA ☑ DOLWD	Initial	- 1										ASBES!	OS	CON	TROL	_&
☑ DHSS	Amende Amendr				City,	State, Zip	Code			66	ETC.	L	ICEN	SINC	1	ACTION AND ADDRESS OF
DCA	☐ Emerger		udina		Midd	lesex, NJ	0884	6								
(NJAC 5:23-8)	justificat	tion)		,		of Contac					Teleph	one Numb	er			-
	☐ Cancella	ation			Dami	on Mayne	e				1		_			
					-	CILITY II		MATIC) N				-	-		
Name of Facility Where A	Abatement is	Taking F	Place	(3)					///	Type of Facility	(4)					
Private house										School (K-1	7.07					
Street Address							-	-		Subchapter	8 (Other th	nan K-1 2)				
										Other (i.e.,)	private and	d commer	cial bu	ilding	IS,	
City (5)										homes, etc.			1.5			
Middlesex, NJ 08846										Square Feet	# of F	ioors	BI	dg. A	ge	
County (6)			-		Cour	nty Code (7)	/STATE	FIISE	1 V 11AC	Current Use (P	rior if hain					
Middlesex					0001	ity code (1)	(OIAII	L 03E (NVLT)	Current Use (P	nor it bein	g demolis	nea)			
Name of Monitoring Firm	Hired by Bui	lding Ov	ner (8)	ASCM	No	Nam	oo of Al	notomo	ent Contractor (9	,					
	* **	J	3//5///3	-/	/ LOOIVI	140.	1			ent Contractor (9)					
Street Address					-		-	et Addr								
										202						
City, State, Zip Code							_	Valley State,					- Intels			
Project Manager for Mon	itoring Firm			Tel	ephone	No		ne, NJ phone		0	Licens	na Na				
					prioric	110.					800800000					
Start Date (10)		Schedul	ed C	omple	tion Da	ite (11)	_	638-17 ne of OS		onitor	01127			_		
12 /03 /		12	/	_ 04						nsultants,Inc						
Occupancy Status During	Abatement ((Check o	only c	ne)				et Addr								
☐ Abstament Desfarmed	ed During Ent	tire Perio	od of	Abate	ment		20-2	1 Wag	araw	Road, Bldg .#	35E					
Abatement Performed Time of Abatement:	AM-	Normal F PM/	acility	Hou / PM		scribe AM	City,	State,	Zip Co	ode						
7227						Alvi	Fair	Lawn,	NJ 0	7410						
Scope of Work (Check all	that apply)							CI	ean up	and decontamin	nation with	negative	press	ure		
>3 sf or >3 If ≥ 160 sf or >260 If		Б	Re	novat	ion		ŀ		II Cont ni-Encl	ainment with Ne	gative Pre	ssure				
≥ 160 sf or ≥260 lf		Ì		moliti				☑ GI	ovebad	Procedure [Tent with	Negative	Press	ure		
							L	No	in-Exer	mpted (*) and No	on-Friable	Procedur	е	10		
Location	of			Loca Norma				Б.		_			Ab	atem	ent Ty	ype
Asbestos-Containing I	Material (ACN	VI)	Use	d Sol	ely by	Asbe		Descrip		t erial (ACM)	Am	ount	R	R	m	四
TO BE ABA				intena	ince/ Staff?		e., ther	mal sys	stems i	nsulation,	100000	ecify	Remova	Repair	cap	Enclosure
(13)	Ly		ous	(12)	otan:			ırfacing er misc			SIF	or LF)	val	=	Encapsulate	sure
			Yes	No	N/A	1	Ollis	CI IIIISC	enane	ous)					ate	
Basement		1	7		×	D: .	,						57	_		
Jacoment		Pipe ins	ulatio	n			55 LF			Ш	Ш	Ш				
	Ш															
										П	П	П	П			
		ſ	7	П	П									_		
Name of Registered Was	te Hauler			NJ		 e Hauler ID No.	Cubic	: Yards c	of Waste	Name of Regis	stored La-	4fil		Ш	Ц	Ц
Gr Tech LLC					003378				, vvasit		stered Fau	ullii				
City, State	53	-	BD		T.R.R.F. Inc											
Commence of the Commence of th							1 18	osal Da	ite	City, State						
Wayne, NJ 07470 Completed By (Print or Ty	(ne)	Title					1	BD		Tullytown, P.	A					
DOMESTIC STATE OF THE STATE OF	(PC)	ritte						Signatu	//	1	1	Dat	te			
N.Jevtic		Owne	r						1/2	who wena	d	11/2	24/17	9		
TOTAL PROPERTY OF THE PROPERTY									11	THE RESERVE AND ADDRESS OF THE PARTY OF THE			_	_	_	

PAID

NOTIFICATION OF ASBESTOS ABATEM (Pursuant to NJAC 8:60 and 5:16)	,	
(* area are to rest of order and or ro)	Check: 11548	3

Date of Notification (1)					Name	e of Buildin	g Owner/Operator (2)		1 40			
	27 /	17			Cit	y of Cam	den		FR	E	n	7.77	P
Agencies Notified	Type Notific	ation			Stree	t Address			In EC	E	_U_	W	
⊠ EPA					PC	Box 951	20		1181			5000 eM=	The same of
□ DOLWD	☐ Amended					State, Zip (111111 1101	, 0	0 0	047	- 11
⊠ DOH	Amendm				1209	mden, N.			IT I NO!	2	9 6	017	11
DCA (NJAC 5:23-8)			cluding	3	1.1	of Contac			I Talanhan Numb				\perp
(110/10/3.25-0)	☐ Cancellar					nes Rizz			Telephone Numb	er_		TRO	1 2
										VIII.	NIIO	4.1	- 01
Name of Facility Where A	hatament is 7	Takine	Dless	(2)	FA	CILITYIN	FORMATION	-					
1815 FILMORE STR				(3)				Type of Facility					
Street Address	EEISIKU	CIU	(E					School (K-12	2) 8 (Other than K-12)				
1815 FILMORE STF	CET OTOU	OTU	-					Other (i.e., p	rivate and commerc	cial bu	ilding	JS,	
	KEET STRU	CIU	KE		= 75 447			homes, etc.				2	
City (5)								Square Feet	# of Floors	BI	dg. A	ge	
Camden								varies	varies	-1 '	50+		
County (6)					Cou	nty Code (7)(STATE USE ONLY)	Current Use (Pr	ior if being demolish	ned)			
CAMDEN									DEEMED UNSAF	E			
Name of Monitoring Firm	Hired by Build	ding C	wner ((8)	ASCM	No.	Name of Abateme	ent Contractor (9)	No.				
							Controlled Er	nvironmental	Systems				
Street Address							Street Address						
							1121 N. Bethl	ehem Pike - S	uite 60				
City, State, Zip Code							City, State, Zip Co	ode					
							Spring House	e, PA 19477					1
Project Manager for Monit	toring Firm			Te	ephone	No.	Telephone No.		License No.				
							215 542 7000		00847				
Start Date (10)	8	Sched	uled C	ompl	etion Da	te (11)	Name of OSHA M	lonitor					
11 /28 /	17	_ 1	/	_ 3	1_/	18	CES						
Occupancy Status During	Abatement (0	Check	only o	ne)			Street Address			2222			
□ Facility Closed/Vacate					ement			ehem Pike -Su	ite 60				
☐ Abatement Performed	Outside of No	ormal	Facility	/ Hou	ırs - Des	cribe	City, State, Zip Co						_
Time of Abatement: 7:	<u>00</u> AM- <u>5:00</u> F	PM/	PN	1	AM		Spring House						
Scope of Work (Check all	that apply)						opinig nouse	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			-		-
□ -2 of 2 if								ainment with Neg	gative Pressure				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			☐ Re	nova	500000000000000000000000000000000000000		☐ Mini-Encl	7,000					
			M Dei	HOIR	1011		☐ Glovebag ☒ Non-Exer		n-Friable Procedure	4			
			ls	Loca	ation					1	atem	ent T	vne
Location of				lorm			Description of	f					
Asbestos-Containing N		1)			lely by ance/		stos Containing Mat		Amount	em?	Repair	nc	ncl
TO BE ABAT IN Facility					Staff?	(i.e	., thermal systems in surfacing, VAT,	nsulation,	(Specify SF or LF)	Removal	ai.	sde	Enclosure
(13)			V/2002-37	(12	-		other miscellaned		01 01 11)	=		Encapsulate	6
			Yes	No	N/A							(D	
See Attached Notice of	of Hazard					See Att	ached Notice of	Hazard	200 YD per res				
										П	П	П	П
] [
Name of Registered Waste	n Haules		Ц	Ц.		Mante	Outin Value	IN A			Ш	Ш	Ш
Waste Management				115	NJDEP \ Hauler II		Cubic Yards of Waste	Name of Regis	tered Landfill				
	OI NJ				17273		200/residenc	GROWS					
City, State							Disposal Date	City, State					
Fairless Hills, PA							1/31/18	Tullytown	PA				
Completed By (Print or Ty	pe)	Title					Signature	αI	Date	9	j		
Patricia Visco		Of	fice N	lana	ger		Hotel	no 1/10	ner li	12	7/	()	
SR_41							TRRCCA	Car II AD	Circ 11	1			

CK102738	DA!		ICATION	ate of New NOF ASB to NJAC	ESTOS	ABATE		NT) <u>E</u>	G [V	
Date of Notification (1) 11/27/2017				f Building RA MED			(2)				NOV-	2-9	2017	7
Agencies Notified Type Notification X EPA Initial			Street A	ddress RVING A	VE					ASB	ESTO:	S CO	NTRO	DL &
DEP Amended Amendment		_		ate, Zip Co GETON					lanens					
▼ DOH			Name o	f Contact					Tel	lephone N	Number			
			FACI	LITY INFO	ORMAT	ION			W.					
Name of Facility Where Abatement is Takin INSPIRA MED. CTR CRISIS AREA Street Address)					Ту	pe of Facility School (K-	12)	11 14	10)			
333 IRVING AVE							×	etc.)	orivate	& comme	rcial bui			es,
City (5) BRIDGETON							>5	uare Feet 50,000	4	f Floors	1	Bldg. A 50+	Age	
County (6) CUMBERLAND				Code (7) USE ONLY		_		rrent Use (Pri EALTH CE			lished)			
Name of Monitoring Firm Hired by Building CRITERION LABS	Owner (8)		ASCN	l No.		\$100 PM 100 PM		batement Co B.J.D.S., IN		(9)				
Street Address 400 STREET ROAD						Street 1345		lress DUSTRIAL	BLV)				
City, State, Zip Code BENSALEM PA 19020						100000000000000000000000000000000000000		, Zip Code AMPTON F	PA 18	966				
Project Manager for Monitoring Firm ERIC WYSOCKI			Telephor 215 24	ne No. I4-1300		Teleph 215		No. -2900		License				
Start Date (10) 12-4-2017	Schedule		npletion I	Date (11)		Name EHS		SHA Monitor						
Occupancy Status During Abatement (Chec	k Only On	e)				Street	Add	ress					_	\dashv
Facility Closed/Vacated During Entire Facility Closed	Period of A	baten				411 S City, S	SO	JTH GATE , Zip Code		EE				
Scope of Work (Check All That Apply)						MICI	\LE	TON NJ 0	0000					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	announce .	enova emolit				×		Full Containm Mini-Enclosure Glovebag Pro- Non-Exempte	e cedure	ĕ			e	
Location of	200.00	Locati Iormal	0.000,007		Do	scription	of						ement pe	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mai	d Sole ntenar odial S (12)	nce/	Asbest (i.e.	tos Cont thermal surfac	aining N systems cing, VA niscellan	fater s ins T, o	r	(5	mount Specify or LF)	Removal	Repair	Encapsulate	Enclosure
CRISIS CENTER	res	X	IN/A	FLO	OR TIL	E ANI	O M	IASTIC	1	,410	X			
Name of Registered Waste Hauler		217	JDEP W	25.50	Cubic	Yards		Name of	Registe	red Land	fill			
SERVICE TRANSPORT			auler ID 0990	No.	of Was			MINER						
City, State 58 PYLES LANE, NEW CASTLE DI	E. 19720)			Dispos	al Date		City, Stat		RG, OH	1 4468	8		
Completed by CHRISTINE DEL VISCIO	Title	AD	MIN		S	ignature	1	- 1	b. 7.		Date	2017		

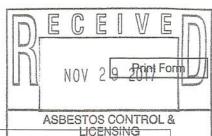
CK24	3 P	AI	NOT	IFICATIO	State of Ne ON OF ASE nt to NJAC	BESTO	SÁBATE	EMENT 0)	D	E	CE		\mathbb{V}	
Date of Notification (1) 11/21/2017					of Building Authority			r (2)		N	0V 2	9 1	2017	
Agencies Notified	Type Notification				Address	,			*5-01-001-00			utylan grouns		
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☑ DEP ☑ DOL	☐ Amended				State, Zip C				Leanne		LIVLI	VOIIV	<u> </u>	
	Amendmen Emergency		ıa .		ey City, N		310							
☑ DOH ☑ DCA	justification)		3		of Contact				Tele	phone I	Number			
	☐ Cancellation	1			y Mehta CILITY INF	00114	TION.			- Marie Control				
Name of Facility Where A	batement is Takir	g Place	(3)	FAC	SILIT INF	OHMA	IION	Type of Facilit	v (4)					and the
Port Jersey Marine	Terminal Build	ling 10	8					School (H						
Street Address								Subchapt	ter 8 (Other	than K	(-12)			
100 Port Terminal E	3IVd							Other (i.e etc.)	. private &	comme	rcial bu	ilding	s, hon	nes,
City (5) Bayonne								Square Feet	# of F	loors		Bldg.	Age	
County (6)								7800	1			75		
Hudson				(STATE	Code (7))		Current Use (F	rior if being	demo	lished)			
Name of Monitoring Firm	Hired by Building	Owner (8	3)		M No.	oi (ter	Nama	Industrial						
Port Authority of NY	& NJ		9	AGG	WINO.			of Abatement C tige Develop			loo			
Street Address							_	Address	ment Sei	vices	Inc			
241 Erie St								Lincoln Ave §	Suite 204					
City, State, Zip Code		V/12,						tate, Zip Code				61		
Jersey City, NY 073							Bron	x, NY 10454						
Project Manager for Monit Uday Mehta	oring Firm			Telepho			100000000000000000000000000000000000000	one No.	L	icense	No.			
Start Date (10)		Schodu	lod Co		95-4881			364-7166		01260	ľ.			
12/4/17		12/31		npietion	Date (11)			of OSHA Monito C. Saavedra						
Occupancy Status During	Abatement (Check		10.75					Address	i			2		
Facility Closed/Vacate Abatement Performed				nent				2 Union St, A	nt 519					
Abatement Performed Other – Describe:	d Outside of Norm	al Facilit	y Hour	S				ate, Zip Code	proro	-		_		
						_		ning, NY 113	55					
Scope of Work (Check All														
⊇ ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demoli				X) C) C)	Full Containn Mini-Enclosu Glovebag Pro Non-Exempte	re ocedure				·e	
			Locat									Abat	ement	t
Location o Asbestos-Containing M	f laterial (ACM)	0.0000000000000000000000000000000000000	Normal d Sole			Des	scription of	of				Ty	/pe	
TO BE ABAT	ED	Ma	intena todial S	nce/	Asbesto (i.e. t	os Cont hermal	aining Ma systems	iterial (ACM) insulation,	Amo (Spe		70		Ш	ш
In Facility (13)		Cus	(12)	otali?		surfac	cing, VAT	, or	SF or		Remova	Repair	caps	nclo
		Yes	No	N/A	8	outer it	niscellane	ous)			oval	air	Encapsulate	Enclosure
Switchgea	ar	Х			Elect	trical (Cable In	sulation	350	IF	X			
н		X					Transi		181		-			H
**		Х			P						X			
п		X			ь	-0.55 V	ray Tra		33 5		X			
Name of Registered Waste	Hauler	^	N	JDEP W	aste	Cubic Y	R Bakeli		200		X			
ATC			Н	auler ID I W2431	No.	of Was			Registered a Enterpi		II			
City, State Shirley, NY					1	Disposi		City, Stat	e sburg, O	Н				
Completed by		Title					gnature	vvayile	soury, O		ate			
Sanford Alper		Senio	or Pro	ject Ex	ecutive	-,					o/6/17	7		

OLO 14 155 Date of Notification (1)	PAI	P	Varion Name of	ate of Ne I OF ASB to NJAC	ESTOS 8:60 an	ABATE d 12:12	0)	·		E C		9 2		5
11/21/17			PSEG					MIX TO SEE THE SECOND S	lant.					100
Agencies Notified Type Notifica	ition		Street A 4000 h	ddress Hadley F	Road					ASBES	TOS (. &
DEP X Amende Amende	ment #1	11.5	- Company	ite, Zip Co Plainfie		7080			Lancorasson					DAY CO
DOH justificat		4.2		f Contact Neville				- 10 3 th - 10 th - 10 th	Te	enhone Nu	mber			
			FACI	LITY INFO	ORMAT	ION								
Name of Facility Where Abatement is T Bayway Switching Station	aking Place (3)						Туре	of Facility (School (K-1	200					
Street Address 602 Trenton Ave				-			×	Subchapter Other (i.e. p	8 (Oth			dings,	home	es,
City (5) Elizabeth NJ 07202							Squa N/A	etc.) are Feet	# o	f Floors	1 2 3 3	ildg. A	Age	
County (6) Union			County (Code (7) USE ONLY)			ent Use (Prio		ng demolis	hed)		- 400000	
Name of Monitoring Firm Hired by Build N/A	ling Owner (8)		ASCN N/A	I No.			of Aba	atement Con	tractor		C.	-		
Street Address N/A						Street	Addre							
City, State, Zip Code N/A						City, S	state, 2	Zip Code NY 11980						
Project Manager for Monitoring Firm N/A		340 0	Telephor N/A	ne No.		Teleph 631-	none N	lo.		License N	10.			
Start Date (10) 11/27/17	Scheduled 2/27/18	d Com	pletion [Date (11)		Name	of OS	HA Monitor rironmenta	l Ser					
Occupancy Status During Abatement (0	Check Only One	e)				Street	Addre	ess		V1000 1110.	OSI			
Facility Closed/Vacated During En Abatement Performed Outside of I Other – Describe: Electrical circuit	Normal Facility I	oatem Hours	ent			City, S	tate, Z	ck Road Zip Code						
Scope of Work (Check All That Apply)	- Cabillot				_	Yaph	nank	NY 11980)					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	- Inches	enovat emoliti				×	Mi Gl	III Containme ni-Enclosure ovebag Proc on-Exempted	edure				e	
Location of		ocatio			-				1,7 5			Abate	ement pe	
Asbestos-Containing Material (ACM TO BE ABATED In Facility (13)) Used Main Custo	Solel	y by ice/		tos Cont thermal surfa	scription taining N systems cing, VA niscellar	fateria s insul T, or		(5	mount Specify or LF)	Remova	Repair	Encapsulate	Enclosure
Electrical Switching Yard	Yes	No	N/A		т	ransite			21	0015	ļ		te	(D
Electrical Owitching Fard			X			Tarisite			31	00 LF	Х			
Name of Registered Waste Hauler Waste Management Services		Ha	JDEP Wauler ID 273		Cubic of Was TBD			Name of F		red Landfil				
City, State Elizabeth, NJ					Dispos TBD	sal Date		City, State Morrisvi		19067				
Completed by Amanda Vallone	Title Admin	One	Mana	ger	S	ignature	1	W.	11		ate	17	- X 10 Y	

Print Form

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CR#014184 :	PAI		ICATION	ate of Ne NOF ASB to NJAC	ESTOS A	BATE		•3		E C		<u> </u>	
Date of Notification (1) 11-22-17			Name o	f Building	Owner/O	perator	(2)			NOV	29	201	i
Agencies Notified Type Notification	la de la companya de		Street A	ddress Hadley F	Dd				A	SBEST			OL 8
EPA X Initial Amended				ate, Zip Co	V2-2000					LIC	CENS	ING	-
X DOL Amendmen				Plainfie									
➤ DOH justification) DCA Cancellation				f Contact Neville					Telephon	e Numbe	[
Nome of Equility Manage Abotement in Table	Di (6	2	FACI	LITY INFO	ORMATIC	N							
Name of Facility Where Abatement is Takin Bergen Switch B-1302	ng Place (3	5)					Туре	of Facility (4	1500 1800				
Street Address 1148 Hendricks Causeway							×	School (K-1: Subchapter Other (i.e. p	8 (Other than		uilding:	s, hom	es,
City (5) Ridgefield, NJ							Squa N/A	etc.) are Feet	# of Floor	'S	Bldg.	Age	
County (6) Bergen				Code (7) USE ONLY)			ent Use (Prio		molished)	-		
Name of Monitoring Firm Hired by Building N/A	Owner (8)		ASCN N/A	/ No.				atement Con rironmenta		, Inc.			
Street Address N/A						Street 17 O		ess ock Rd					
City, State, Zip Code N/A								Zip Code NY 11980)				
Project Manager for Monitoring Firm N/A			Telephon N/A			Teleph 631-			Licer 011	nse No. 36			
Start Date (10) 12-01-17	07-01-	18	npletion	Date (11)				HA Monitor ironmenta	l Services	, Inc.			
Occupancy Status During Abatement (Che			111111111111111111111111111111111111111			Street		ss ock Rd					
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe: Electrical circuit cab	nal Facility	Abatem Hours	nent			City, S	tate, Z	Zip Code NY 11980	·			AL	
Scope of Work (Check All That Apply)						тарі	iaiik,	N1 11900	,				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit				×	Mi Gl	ill Containme ni-Enclosure ovebag Proc on-Exempted	edure			Ire	
	2000	Locati	1120 P. Carlotte						() and ()	, masio i	Aba	temen ype	t
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	ed Sole intenar todial S (12)	ly by nce/		tos Conta thermal s surfaci other mi	ystems ng, VA	lateria s insul T, or	ation,	Amount (Specify SF or LF	/ 7	Repair	Encapsulate	Enclosure
	Yes	No	N/A									ate	.e
Switching yard			X			site p			160 LF				
Switching yard		X		Coal	tar w	rap		160 LF	x	-	-		
Name of Registered Waste Hauler		I NI	JDEP W	/acte	Cubic Y	arde.		Name of F	Registered La	andfill			
Waste Management		Н	lauler ID 7273		of Wast			Fairless		ai iuilii			
City, State Elizabeth, NJ 07201					Disposa TBD	al Date		City, State Morrisvi	le PA 190	67			
Completed by Amanda Vallone	Title Admi	n Ope	eration	s Manag		nature	1.	No	1.	Date 11-22	2-17		

CD# 33	155		NOT		ur	TION suar	nt to NJA	BES C 8	STOS ABAT :60 and 5:10	6)		N T			V	E	The state of the s
Date of Notification (1)	40	47						-	ner/Operator (2)	14	linel			201		Interior Control
/	16 / _	17				Wa	Iters Res	idei	ntial				53	1) 5	>	
Agencies Notified	Type Notifica	ation				Street	Address					ASBES	STOS	CO	VTR	DL 8	L
⊠ EPA											and the same of	Will was a source	LICE	VSIN	IG		OFFICE STREET
☑ DOLWD	☐ Amended Amendme	0.000				City, S	State, Zip 0	Code									
□ DCA	☐ Emergen		cluding	,		Bar	negat, N	J 08	005								
(NJAC 5:23-8)	justification	on)	Sidding	4		Name	of Contac	t			- 1	Telephone N	lumbe	r			
35 850	☐ Cancellat					Vic	tor				1		- HOA				
					-	FA	CILITY IN	IFOI	RMATION						-		
Name of Facility Where A	batement is T	aking	Place	(3)						Type of Fac	cility (4)					
Residence										☐ School (/					
Street Address										☐ Subchap	oter 8 (Other than K	(-12)				
											e., priv	ate and com	mercia	al bui	lding	S,	
City (5)										Square Fee	977	# of Floors		Blo	g. Ag	10	
Beach Haven										1500 sf	,,	1		1	5. A	,-	
County (6)						Cour	ty Code (7	VSTA	TE USE ONLY)	1990/00/00/00/00/00	. /Drior	if being den	aaliaha	1			
Ocean						Cour	ity Code (/)(017	TE OOL ONET)	Resider		ii beilig deli	IOIISHE	u)			
Name of Monitoring Firm	Hired by Ruile	ding C	wnor /	8)	ΤΔ	SCM	No	No	me of Abateme	0.0000000000000000000000000000000000000							
N/A	r in ca by banc	ing C	wilei (0)	^	SCIVI	INO.										
Street Address								_	Guardian Co	ntracting, i	nc.						
Street Address								23,000	eet Address								
City State 7in Code								-	889 Route 9	0							
City, State, Zip Code								18	y, State, Zip Co		72.2						
Decinat Manager 5 - Mar 1				1-					oms River, I	New Jerse	y 0875	55					
Project Manager for Monit	toring Firm			Te	lep	hone	No.		ephone No.			License No).				
01 15 1 110								1	32-349-9932			00624					
Start Date (10)11 /28 /	949944	Sched 1					te (11) 17	I JACONIII A	me of OSHA M E. M.S.L. Ana l								
Occupancy Status During	Abatement (0	Check	only o	ne)				Str	eet Address				70		-		-
□ Facility Closed/Vacate	d During Entir	e Per	iod of	Abat	em	ent		1	056 Stelton								
Abatement Performed		ormal	Facility			- Des	cribe	City	y, State, Zip Co	ode							
Time of Abatement:	AM	PN	1/	_PN	Λ- <u> </u>		AM	1	iscataway, N		0885	4					
Scope of Work (Check all	that apply)							1			,						
□ >2 -t> 2 K	R40 E00										Negat	tive Pressure	9				
≥3 sf or ≥3 lf≥160 sf or ≥260 lf			☐ Re ☑ De						☐ Mini-Encl	losure Procedure							
			Z 200	111011	LIOII				Non-Exer Non-Exer		d Non-	Friable Proc	edure				
			Is	Loc	atio	n							T	Aba	teme	ent T	vpe
Location				Norm d Sc					Description of				-	1			
Asbestos-Containing N TO BE ABA)		inter					Containing Mar ermal systems i			Amount		Remova	Repair	nca	Enclosure
IN Facilit			Cust			aff?	(1.6		surfacing, VAT,			(Specify SF or LF)		ova	=	psu	nsc
(13)			1000	(12		to allowed			her miscellane			, , , , ,		-		Encapsulate	, G
exterior-house			Yes	No	0	N/A	aabaata		idia a		-	4500 6					
					4		asbesto					1500 sf			Ш	Ш	Ш
exterior-garage					4		asbesto)S S	iding			700 sf					
Name of Registered Wast				- 1			Vaste	2705.6273	oic Yards of	Name of F	Registe	red Landfill					
Guardian Contractir	ng, Inc.					uler IE 20223		Wa 3		T.R.R.F							
City, State					_				posal Date	City, State							
Toms River, New Je	rsey							1	1/30/17	Tullyto	wn, P	ennsylvan	ia				
Completed By (Print or Ty	pe)	Title						-	Signature	$+\lambda$		d	Date	- 1		71	
Nicholas Fernicola		Pr	oject	Ma	naç	ger				1	2	1		(i)	16	//	17



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

('V# 0)	DAT	etras services		to NJAC					-	ACDI	TOTO	0.00	MITT	201.0
Date of Notification (1)	广门里	異原	Name o	f Building	Owner/0	Operator	(2)	-	+	ASBI		ENS		TOL
11-17-17				n Count				d	Tertiron		THE PERSON NAMED IN			NO EL COLOR DE LA COLOR DE
Agencies Notified Type Notification			Street A	ddress										
× EPA × Initial				ast Ridg		d ave								
X EPA X Initial Amended Amendment		- 1		ate, Zip Co										
x Emergency			20,000,000	nus NJ 0	7652				1					
		- 1		f Contact as Jodac	20				Tele	ephone Nu	mber			
DCA Cancellation				ILITY INFO		ON		5	<u> </u>		107			
Name of Facility Where Abatement is Takin The Academies	g Place (3)	K.	FAC	ILIT INFO	JKIVIATI	ON	-	of Facility (4						
Street Address								School (K-12 Subchapter 8		er than K-1	21			
200 Hackensack ave							×	Other (i.e. pretc.)				dings,	hom	es,
City (5) Hackensack NJ							Squa	re Feet	# of	f Floors	E	Bldg. A	lge	
County (6) Bergen				Code (7) USE ONLY)				ent Use (Prior hnical Sch		ng demolis	ned)	-selb-se		
Name of Monitoring Firm Hired by Building	Owner (8)		ASC	4 No	8 85	Name		tement Cont		/0)				
TTI Environmental Inc	Owner (o)		ASCI	vi ivo.				rprises LL		(9)				
Street Address							Addres							
1253 N. Church St						J. 100 7 100 5	isa La	5335454						
City, State, Zip Code Mooretown NJ 08057						0.000		ip Code ark NJ 070	35					
Project Manager for Monitoring Firm		Τ.	Telepho	ne No.		Teleph	none N	0.		License N	lo.			
Michael R Stocku				04-3969	-00	15000000	942-6	900m; 10		01129				
Start Date (10) 11-18-17	Schedule 11-18-1		pletion	Date (11)		Name	of OSI	HA Monitor						
Occupancy Status During Abatement (Chec	k Only One	e)		C TO THE	-	Street	Addres	SS						
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe:						City, S	state, Z	ip Code						
Scope of Work (Check All That Apply)														-
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Business.	enovat emoliti				×	Mir Glo	I Containment i-Enclosure ovebag Procen-Exempted	edure				Α.	
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Location of	N	Location ormall	у		De	scription	of					Ty	ре	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility	Mair	d Solel ntenar odial S (12)	nce/		tos Cont thermal	taining N systems cing, VA	Aaterial s insula		(8	mount Specify or LF)	Remova	Repair	Encapsulate	Enclosure
(13)	Yes	No	N/A		other r	niscellar	neous)				oval	air	sulate	sure
Gymnasium Storage room	100	-110	X	Mastic	(asscia	ated wi	th wo	od floor	1	8 SF	x			
Name of Registered Waste Hauler		N.	JDEP W	/aste		Yards		Name of R	tegiste	ered Landfil				Щ
DYV Enterprises LLC		100,500	auler ID 034140		of Wa	ste		TRRF W	/aist	Managm	ent			
City, State Lincoln Park NJ					Dispos 11-22	sal Date 2-17		City, State Tullytow						
Completed by	Title					Signature	1	1			ate	-		
Dorian Carpio	Mana	ger					(j)	1			1-17-	17		

区长半30	174	PAI		Sta ICATION ursuant I		ESTOS	ABATE		DE	G [<u> </u>	\mathbb{V}	E
Date of Notification (1)		A CA		Name of	Building	Owner/0	Operator	(2)	III ∐ N	01	2 9	201	7
Agencies Notified	Type Notification		-	Street Ac	Idress		,						
EPA	Initial		and the same of th	7	7 1	105	く '	St	ASBE				OL &
DEP	Amended		Ī	City, Stat	e Zip Co		١	15		LIU	ENSI	NG	
DOL	Amendment Emergency		}	(V	100	+(air						ं
⊠ DOH	justification)	•		Name of	Contact			1 1	Telenhone Nur	nber		-	
DCA	Cancellation	1	ĺ	1,	300	4							
N - 65 - 35 - 150	Abatamantia Takia	Di (12	FACI	LITY INF	ORMAT	ION	Tune of Equility	- (4)				-
Name of Facility Where		ig Place (3	3)					Type of Facility	5.7				
Street Address	6.10							School (K	-12) er 8 (Other than K-12	23			
13-15 Bu	Soft A	12					1	Other (i.e.	private & commercia		dings,	home	s,
O'LL ICI	141							etc.) Square Feet	# of Floors	1 8	ldg. A	ne	
Olen Pi	a- 1 For	FILLS	in	wh	5		6044		# 01 1 10013	-	7	+	1
County (6)	`	11	1	County (Current Use (P	rior if being demolish	ned)	J J	J	-
Munnuth				(STATE L		n		(25)	5003				
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCN	No.		Name	of Abatement C					
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Street Address							Street	Address	(-1.01)				
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City, State, Zip Code							City. S	tate. Zip Code	240 000				
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Project Manager for Mon	itoring Firm		-	Telephor	ne No.		Teleph	none No.	License N	0.	-		
			-				1733	+394175	> 1 00	\bigcirc	-		ı
Start Date (10)		Schedul	ed Co	mpletion [Date (11)		-	of OSHA Monito					
11/24/17	el	17		7/7									
Occupancy Status Durin	g Abatement (Che	ck Only Or	ne)				Street	Address					
Facility Closed/Vac Abatement Perform Other – Describe:	ed Outside of Nor	mal Facility	/ Hour				City, S	State, Zip Code					
Scope of Work (Check A	Il That Apply\	-									-	-	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demoli					Mini-Enclosu Glovebag Pr				9	THE RESIDENCE STREET STREET STREET STREET
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Sta	rt Date (10)		Schedul	ed Co	mpletion [Date (11)		Name	of OSHA Mon	itor					
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Occ	cupancy Status During	g Abatement (Che	ck Only Or	ne)				Street	Address						
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Name of Facility Where Abatement is Takir	n Place (3	2)	FAC	ILITY INF	ORMATI	ON	_						- 1		
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Street Address							П	School (K-12) Subchapter 8	(Oth	ner tha	an K-1	2)			
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City (5) Union City, NJ 07087								re Feet	# o	f Floo	ors	30	3ldg. /	Age	
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Name of Monitoring Firm Hired by Building	Owner (8)		ASCN	M No.		Name of Gree	of Aba	tement Contr	actor	(9)	20	C		2	
Street Address						Street	Addres			7 7 100	, LI				
City, State, Zip Code						City, St	tate, Z	ip Code y, NJ 0708	7						
Project Manager for Monitoring Firm		Т	Telepho	ne No.		Teleph			-	Lice	ense N	lo			
						201-3				011		10.			
Start Date (10) 11-25-2017	11-25-2	2017		Date (11)	Š	Name o		HA Monitor above			(20.2 - 12 1				
Occupancy Status During Abatement (Chec	k Only On	e)				Street A	Addres	SS			-				
Facility Closed/Vacated During Entire I Abatement Performed Outside of Norm Other – Describe:	Period of Anal Facility	Abaten Hours	nent s			City, St	ate, Zi	p Code		-					
Scope of Work (Check All That Apply)															
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Name of Registered Waste Hauler Green Environmental Services		1 1 1 1 1 1 1 1 1 1 1	IJDEP W lauler ID		of Was			Name of Re G.R.O.W.							
City, State Jersey City, NJ					Disposi			City, State Morrisville	. P	Δ	,				
Completed by Liliana Serrano	Title Office	Mar	nager			gnature		Jon	47	~	Da	te	0017		

Date of Notification (1) 11-21-2017 Agencies Notified Type Notification		NOT	Name Mich	State of New S ON OF ASBES at to NJAC 8:6 of Building Ov ael Moss Address	TOS ABATE 0 and 12:12	(0)			V 2	9 2	2017	
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Name of Facility Where Abatement is Tak Residential	ing Place	(3)	FAC	CILITY INFOR	MATION	Type of Facility (0.000					
Street Address City (5)						School (K-1 Subchapter Other (i.e. p	8 (Oth	ner than K- & commer	12) cial bu	ilding	s, hom	nes,
Weehawken NJ 07086						Square Feet 2280 SF		of Floors		Bldg.		
County (6) Hudson			County	Code (7) USE ONLY)		Current Use (Price	2 or if be	ing demoli	- 1	107+		
Name of Monitoring Firm Hired by Building	Owner (8)	ASCI									
Street Address					Gree	of Abatement Con n Environment	tractor al Se	(9) rvices, L	.LC			
						Address /irginia Avenue	2			1000		
City, State, Zip Code					City, S	tate, Zip Code						
Project Manager for Monitoring Firm		- 1	Telepho	ne No		y City, NJ 073	04	<u> </u>				
Start Date (40)						one No. 333-8855		License I	Vo.			
Start Date (10) 11-22-2017	Schedul 11-22-	ed Cor 2017	mpletion	Date (11)		of OSHA Monitor						
Occupancy Status During Abatement (Che						as above						
Facility Closed/Vacated During Entire Abatement Performed Outside of Non Other – Describe:	Period of a	Abater / Hour	ment s			ate, Zip Code						
Scope of Work (Check All That Apply)												
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TO BE ABATED In Facility (13)		odial S (12)		(i.e. there	mal systems irfacing, VAT er miscellane	insulation,	(S	pecify or LF)	Remova	Repair	Encapsulate	Enclosure
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Name of Registered Waste Hauler		N	JDEP Wa	aste Cui	oic Yards	I No.						
Green Environmental Services		H	auler ID 1	No. of V	Vaste	Name of Re G.r.o.w.s						
City, State Jersey City, NJ			000	Dis	oosal Date 22-2017	City, State Morrisville					-	
Completed by Liliana Serrano	Title		V251274 X2		Signature	()	U, FA	Da	te			
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Date of Notification (1)			Name o	f Building	Owner/	Operator	(2)	NOS	Hon	CHE N	OV 5	9 ,	2017	-
Agencies Notified Type Notification EPA Initial			Street A	ddress ate, Zip C	Vor	th.	M	upe	Av	ASBE	STOS	CON	ITRO G	L&
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Name of Facility Where Abatement is Takin	g Place (3)	FAC	ILITY INF	ORMAT	ION	Туре	of Facility	(4)			-		
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Name of Monitoring Firm Hired by Building (Owner (8))	ASCN	ЛNo.				atement Co Istries In		(9)				
Street Address						Street . P.O.								
City, State, Zip Code						1 - Children (1997)		ip Code w Jersey	08723					
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph (732)				License I	No.			
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	Yes	No	N/A	0.1									ate	6
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City, State Brick, New Jersey					Dispos	sal Date	7	City, Sta	te					
Completed by Eric Plackis	Title Pres	ident			1 5	Signature	4			D	ate 1	1/1	7	

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L box	Cancenauon				LITY INF	ODMAT	ION			_						
Name of Facility Where Ab	atement is Takin	g Place (3)	FAC	171111161	ORMAI	ION	Type	of Facility	(4)	-					
PRIVATE		38						-	School (K-							
Street Address								IT	Subchapte	r 8 (Oth	ner than	K-12)				
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Project Manager for Monito	ring Firm		T	Telepho	ne No.			hone N		140. 0	Licens	e No				
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11/13/2017		11/14/					ENV	IRO I	PROBE							
Occupancy Status During A	Abatement (Chec	k Only O	ne)		~		Street	Addre	ss							
Facility Closed/Vacate	d During Entire F	eriod of	Abaten	nent			108	LIBE	RTY ST.							
Abatement Performed Other – Describe:	Outside of Norm	al Facilit	y Hours	S			City, S	State, Z	ip Code							
							MET	TUCH	EN NJ.							
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Asbestos-Containing Ma TO BE ABATI		Ma	intena	nce/	Asbes	tos Con	taining N systems	/laterial	I (ACM)		mount Specify				Ē	m
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Name of Registered Waste	Hauler		l N	JDEP W	lasto	Cubic	Vorde		News	D		15"				
en e				lauler ID		of Wa	Yards ste		Name of					222		
TRI STATE ASSOCC	INC		_ 1	19951		TBD)		MINER	VA EN	VIERF	RISE	E IN	IC.		
City, State						1	sal Date		City, Stat							
BRONX NY.						TBE)		WAYN	ESBU	RG OF	HO.				
Completed by CARLOS ESQUIVEL		Title		4AA14)EC	S	ignature	12	2		19	Date				
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0/24 112	29 P	AT		ICATIO	tate of Ne N OF ASB to NJAC	ESTOS	ABATE			EG				
Date of Notification (1) 11/09/2017	-				of Building			(2)		NOV	2 9	201	7	世
Agencies Notified	Type Notification			Street A	Address								-	1
EPA DEP	☐ Initial									ASBEST			OL&	
DEP DOL	Amended Amendment	4			ate, Zip Co		040			LI	CENSI	ING		BEIGHT 1975
	Emergency (i		-		TCLAIR		042							
DOH DCA	justification) Cancellation			DAVE	of Contact				Tel	ephone Nu	ımber	-		
	Cancellation				- ILITY INF	ORMATI	ON							
Name of Facility Where	Abatement is Taking	Place (3)			<u> </u>		Type of Facilit	y (4)					
PRIVATE								School (I	<-12)					
Street Address										er than K-1 & commerc		dinas	hom	00
03. (5)								etc.)						cs,
City (5) MONTCLAIR NJ. 0	7042							Square Feet	# 0	f Floors	E	3ldg. /	Age	
County (6)	1042			County	Code (7)			2,800 Current Use (I	Orior if hai	2	had)	95		
BERGEN					USE ONLY	<i></i>		Current Ose (i	N/A	ng demons	ileu)			
Name of Monitoring Firm	Hired by Building C	wner (8))	ASC	M No.			of Abatement C		15195	L LL	Э.		
Street Address								Address 5 51 ST.						
City, State, Zip Code								tate, Zip Code						
								TH BERGE	N NJ. 07	7047				
Project Manager for Mon	itoring Firm			Telepho	ne No.			none No.		License N	Vo.			
Start Date (10)		Schedul	ed Con	nnletion	Date (11)			776-0642 of OSHA Monit	or	01300				
11/13/2017		11/14/		piction	Date (11)			IRO PROBE						
Occupancy Status During	g Abatement (Check	Only Or	ne)				Street	Address				-500		_
Facility Closed/Vaca	ated During Entire P	eriod of	Abatem	nent			108 L	LIBERTY ST	•					
Abatement Perform Other – Describe:	ed Outside of Norma	al Facility	y Hours	i				tate, Zip Code UCHEN NJ.						
Scope of Work (Check A	II That Apply)						IVIE	UCHEN NJ.						
≥3 sf or ≥3 lf		X	Renova	tion				1 Full Contain	mont with	Monetius	Draga			
≥160 sf or ≥260 lf		× F	Demolit	ion			×	Full Contain Mini-Enclos	ure	ivegative	Pressu	re		
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		le	Locati	on				a Holl Exchip	T Tank	a Non-i nai	1		ement	1
Location	of	1	Vormal	ly		Des	cription	of				Т	ре	,
Asbestos-Containing			ed Sole intenar			tos Conta	aining M	aterial (ACM)	67.50	mount			Ш	_
TO BE ABA In Facili		Cus	todial S	Staff?	(1.e.		systems ing, VA	insulation, T, or		pecify or LF)	Rem	Repair	псар	inclo
(13)			(12)				iscellan				Remova	pair	Encapsulate	Enclosure
		Yes	No	N/A									te	a l
BASEME	ENT		Х		Wra	o/Cut (F	Pipe In	sulation)	24	5 LF.	Х			
Name of Registered Was	te Hauler		100000	JDEP W		Cubic '		Name o	of Registe	red Landfil	1			
TRI STATE ASSOC	C INC			auler ID 9951	No.	of Was		MINE	RVA EN	NTERPR	ISE II	NC.		
City, State		217/2014					al Date	City, St		301				\dashv
BRONX NY.		_				TBD			YESBU	RG OHIO).	200	120	
Completed by CARLOS ESQUIVEL		Title		AAAIAC	יבט	Si	gnature	Band	nert (ate	20.15		
OANLOS ESQUIVEL	<u>-</u>	SAF		ANAG	PEK			1-	-//	1	1/09/2	2017		

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Date of Notification (1)		NOTI	usuan	tate of Ne N OF ASI t to NJAC	BESTOS 8:60 an	ABATE d 12:12	0)	т [C E	0_0	₩ -		
11/27/17			Rea k	Curzweil	y Owner/C	эрегасы	(2)		L	NOV 4	J	.017	CLUMBER OF THE	· Version
Agencies Notified Type Notification Type Notification Initial Amended	1			Address					AS	BESTOS	CON	TRO G	L &	1.600
DOL Amendmen				ate, Zip C aic, NJ (Lievo	AND DESCRIPTION OF THE PERSON	No. 2 September (Assert) - Marrie				
DOH justification) Cancellation)	1	Name o	of Contact Curzweil					Tel	ephone Nu	mber	-		
Name of Facility Where Abatement is Takir	ng Place (3)	FAC	ILITY INF	ORMATI	ON	Tur	e of Facility (- 4\					
Residential Home	ig i idoc (0)					П	School (K-1						
Street Address							×	Subchapter Other (i.e. p	8 (Oth			dings,	hom	es,
City (5) Passaic							182	are Feet 25	3	Floors	7	8ldg. A '0 +/-		
County (6) Passaic				Code (7) USE ONL	n			rent Use (Priesidential H		ng demolish	ned)			
Name of Monitoring Firm Hired by Building Project Manager	Owner (8))	ASCI	M No.				patement Cor es Abateme		(9)				
Street Address						Street 280		ess Iidland Ave).					
City, State, Zip Code								Zip Code Brook, NJ 0	7663					
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph	none			License N 01305	lo.			
Start Date (10) 12/7/17	Schedul 12/12/		npletion	Date (11)				SHA Monitor		0.000				
Occupancy Status During Abatement (Chec	ck Only O	ne)				Street	Addr	ess						
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe: 8 A.M to 4 P.M	Period of a	Abaten y Hours	nent 3			City, S	tate,	Zip Code						
Scope of Work (Check All That Apply)														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit				×	M	ull Containme lini-Enclosure llovebag Prod on-Exempted	edure	9778			9	
Location of	1	Locati Normal	ly		Des	cription			() ()	1101111102		Abate		
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	ed Sole intenar todial S (12)	nce/		stos Conta thermal surfac	aining M	lateria s insu T, or	lation,	(S	mount pecify or LF)	Remova	Repair	Encapsulate	Enclosure
Pagament	Yes	No	N/A								30		ate	гe
Basement		Х				VAT			33	3 SF	x			
Name of Registered Waste Hauler		N	JDEP W	/aste	Cubic `	Yards		Name of F	Registe	ed Landfill				
All Stages Abatement		1 2 2	auler ID 036592		of Was 2 CU			2 22 22 22 22 22 22 22 22 22 22 22 22 2		l Sanitary		dfill		
City, State Saddle Brook, NJ					Dispos TBD	al Date		City, State Pen Arg						
Completed by Richard Cristofol	Title Presi	dent			Si	gnature	1	1-4	1	Da 11	te /27/*	7		

CKDAD PA		NOTE	ICATION Ursuant	OF ASI	BESTOS 8:60 an	ABATE	MENT	D-	EC	7		V		M	
Date of Notification (1)					Owner/		r (2)		MO	V	20 2	117	1		
Agencies Notified Type Notification					MATE	4		In n	NO.	٧	2 9 21)11	L		
F71			Street A	adress						ं		V=			
EPA Initial Amended		-	City, Str	ate, Zip C	ode			-			S CONT		8,		
DOL Amendment #		_		LS DA		NJ	0:	1642		-10	ENSING	andre e	- Contract		
DOH Emergency (I	nciuaing		Name o	f Contac	1				TA	lan	hone Num	har			
DCA Cancellation			Rus	YN ,	MATE										
Name of Facility Where Abatement is Taking	Place /	5/	FACI	LITY IN	ORMAT	NOI	Tuna	-4 C UA		+				-	
ROSUN MATE RESIDENCE	i lace (-,						of Facility		-					
Street Address								School (K Subchapte	er 8 (Oth	161	han K-12)			
								Other (i.e. etc.)	private	8 0	commercia	bulle	lings,	home	38,
City (5)							Squa	re Feet		9 =	cors	В	ldg. A	ge	
HILLSDAZE County (6)			A	0 - 1 - 177				0 59. +		1		\perp			
			County (JOGO (1) JSE ONL	Y)						demolish	ed)			
REAGEN Name of Monitoring Firm Hired by Building O	wner (8)		ASCN	A No.		Name	of Abe	SI DE	~ CAE	- /0		-			
NT ABATEMENT SERVICES	LLC										VICES	, 4	LC		
Street Address			.1.			Street	Addres	8							_
City, State, Zip Code						41	WY	C16-064	A	VE					
City, State, Zip Code						City, S	State, Z	p Code							
Wyckoff, NJ 07481 Project Manager for Monitoring Firm			Telepho	ne No		Tolon	CKUF	KINJ	07						
			201-9		500	4		58	0		lcense No				
NICOLE INTRIAGO Start Date (10)	Schedule	ed Cor	mpletion i	Date (11))	Name	of OSH	IA Monito	r	4	0/2	70			-
12/05/17	121	051	,			/	R15	ENVI	RONN	7£	NTAL	LAB	OLA	TURI	185
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Other - Describe:	ii i acinty	noui	8			# O.T.		P Code NJ	071	10	- 2				
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≥3 sf or ≥3 if ≥160 sf or ≥280 if		tenova Semoli				2	Min	l-Enclosu vebag Pro	re ocedure		egative Pi			245	
		1 1				12	I NO!	-Exempte	ag (*) an	a r	Non-Friable		and the form	e ment	
Location of	1	Locat lorma	lly		De	scription	of						Ту		
Asbestos-Containing Material (ACM)		d Sole intena			stos Con	teining N	/laterial		A	mo	ount			П	
TO BE ABATED In Facility		odlel !	Staff?	(i.e	therma	systemicing, VA		tion,			ecify r LF)	Ren	Re	Encapsulate	Enclosure
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	Yes	No	N/A									_		ite	Ф
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SMALL BEDIESOM 15T FRANCE			X		TILE	5				8	Sa				
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Name of Registered Waste Hauler			JDEP W			Yards		Name of	Registe	re	d Landfill				\dashv
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NEWARK CARTING City, State			0450	7		sal Date		City, Sta	4.24	176	EHEM	11	AND	94	
369 RAYMOND BLUD, NEWAL	E, M	J	7/05			15/17		1 Bin	LEHEN		PA	1801	ک		1
Completed by	Title					ignature	12	1		1	Dat		/		
NICOLE INTRIAGO	Su	FERVI	SOR			1/	1000	W.tx	lago	3	11	/20	117		
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Date of Notification (1)		Name of Bi	NJAC 8:60 and	perator	(2)	112		_6		<u>V</u>
1// 7 / 7 Agencies Notified Type Notification		MIC HAE	e lenvoce	4 40	P KASTO CO	2	NOV	2	9 2	2017
S EPA Initial			WEBSTE.	2 0						
DEP Amended	Ī	City, State.	Zip Code			AS	BEST	OS (CON	THOLE
Emergency (in	cluding	Name of Co	ontect NJ	U	1060	L	L	CEN	SINC	i
DOH justification) DCA Cancellation		MICHAEL	CONNOLLY	ANT	Erso Corr	I resabudue Mu	прег		-	
lame of Facility Where Abstament is Taking I			YINFORMATI		Type of Facility (4)					1
MICHAEL CONNUCY AND ERSI					School (K-12)					
Street Address						/Other than K t	2).			
818 WEBSTER P.					Square Feet	# of Floors	11	g. Age		
FLAINMILD					650 cy ft			a a .		İ
ounty (6)	1	County Coo			Current Use (Prior	if being demolis	had)			
UNION		(STATE USE	ONLY)		RENOVATIO		4			_
Same of Monitoring Firm Hired by Building Ov	wner (8)	ASCM N	0		of Abatement Contra ABATEMENT			111		
NJ ABATZMENT SERVICES	, ,,			Street	Address		, ,			-
41 WYCKOFF AVE				C#1	WVCENT	AVE	-			-
City. State. Zip Code					CLUPS INV					
WYCKW+K NJ 07481 Project Manager for Monitoring Firm		Telephone		Telep	hone No.	License	NO			
NIWLE INTRIACO		201-91	62-6500 ite (11)	20	of OSHA Monitor	0 0129	4-			-
	Scheduled Co	28/17	ite (11)	//	15 ENVIRON	MENTAL L	A Re	CATT	LLE	\$
05 11/2 7/17 Occupancy Status During Abatement (Check	Only One)	20117		Cores	Address Cours					
Opposite organia				1 2	334 160072	(C W)	7 _	100		
CT	eriod of Abate	rment		Clay	State Zin Code			700		
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm	eriod of Abate	irs		City	State, Zip Code					
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other - Describe:	eriod of Abate	ement irs		City	State. ZIP Code	705.3				-
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other – Describe: Scope of Work (Check Arl That Apply)	eriod of Abate el Facility Hou	vetion		City	State, ZIP Code	905.3 ent with Negative		16		
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other - Describe:	eriod of Abate el Facility Hou			City	Full Containm	905.3 ent with Negative	Pressu	cedur	9	
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other – Describe: Scope of Work (Chack All That Apply)	Reno Deme	evetion plition		City	Full Containm	705_3	Pressu	Cedur	e ement	
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other – Describe: Scope of Work (Chack Arl That Apply) ≥3 sf or ≥3 if ≥160 ef or ≥260 if	Rend Demo	ivation pitton cation	C	City.	Full Conteinm Mini-Enclosure Glovabag Pro Non-Exemple	ent with Negative a cedure d (*) and Non-Fr	Pressu	Cedur	ment po	
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other – Describe: Scope of Work (Check Ail That Apply) 23 sf or 23 if 2160 sf or 2260 if Location of Ashestos Containing Material (ACM)	Reno Demo	eation cation maily olely by	Asbestos Co	City.	Full Conteinment Mini-Enclosure Glovabag Pro-Non-Exemple	ent with Negative a codure d (*) and Non-Fr	Pressu	Abair Ty	ment po	Endo
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Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other - Describe: Scope of Work (Check Ail That Apply) 23 sf or 23 if ≥180 sf or 2280 if Location of Asbestos-Containing Material (ACM) TO BE ARATED In Facility (13) 5 I DINO B ASEMENT Name of Registered Waste Hauler NEWALLY (ALTINIT City, State 36 9 Enymonia Guid, NEWALL City, State	Renor Demo	No N/A NJDEP V Hauler II 045	Asbestos Co	City. Ci	Full Conteinment Mini-Enclosure Glovabag Pro-Non-Exempte on of g Material (ACM) ama insulation. VAT. or ligneous) ds Name (1251) Date City. St. Insture	ent with Negative according to the control of the control of Registered La Se the control of the	Pressurable Pro	Abate Ty	p Encapsulate	Enclosure
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Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other - Describe: Scope of Work (Check Ail That Apply) 23 sf or 23 lf 2180 sf or 2280 lf Location of Asbestos-Containing Material (ACM) 10 BE ABATED In Facility (13) 51 PINE 34 PENFINE Name of Registered Waste Hauler NEWALLY (ALTINE Completed by Completed by	Renor Demo	No N/A NJDEP V Hauler II 045	Asbestos Co	City. Ci	Full Conteinment Mini-Enclosure Glovabag Pro-Non-Exempte on of g Material (ACM) ama insulation. VAT. or ligneous) ds Name (1251) Date City. St. Insture	ent with Negative according to the control of the control of Registered La Se the control of the	Pressurable Pro	Abate Ty	p Encapsulate	Endosure 7
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other - Describe: Scope of Work (Check Ail That Apply) 23 sf or 23 lf 2180 sf or 2280 lf Location of Asbestos-Containing Material (ACM) 10 BE ABATED In Facility (13) 51 PINE 34 PENFINE Name of Registered Waste Hauler NEWALLY (ALTINE Completed by Completed by	Renor Demo	No N/A NJDEP V Hauler II 045	Asbestos Co	City. Ci	Full Conteinment Mini-Enclosure Glovabag Pro-Non-Exempte on of g Material (ACM) ama insulation. VAT. or ligneous) ds Name (1251) Date City. St. Insture	ent with Negative according to the control of the control of Registered La Se the control of the	Pressurable Pro	Abate Ty	p Encapsulate	Enclosure 7
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other - Describe: Scope of Work (Check Ail That Apply) 23 sf or 23 lf 2160 ef or 2260 lf Location of Asbestos-Containing Material (ACM) 10 BE ABATED In Facility (13) 51 P1 N 6 B ASEM ENT Name of Registered Waste Hauler NEWACK (ALTINIT City, State 32 9 EAYMONIN FOND, NEWAC Completed by ILLUS SCIACU	Renor Demo	No N/A NJDEP V Hauler II 045	Asbestos Co	City. Ci	Full Conteinment Mini-Enclosure Glovabag Pro-Non-Exempte on of g Material (ACM) ama insulation. VAT. or ligneous) ds Name (1251) Date City. St. Insture	ent with Negative according to the control of the control of Registered La Se the control of the	Pressurable Pro	Abate Ty	p Encapsulate	Enclosure

CVECOBA	n	NOTIF	IGATION	OF ASBESTOS to NJAC 8:60 an	ABATEMENT								
CC JOIL DIV													
Date of Notification (1)	U	14		f Building Owner/	Operator (2)								
Agencies Notified Type Notification		-	Street A	EPH STEA	u.s.								
			Stiest F	(001688	U L NOV 2 9 2017 U/								
EPA X Initial Amended		}	City St	ate, Zip Code									
DOL Amendment	Ħ		10.2		0 1/3/ASDEST								
Emergency (— }	Name o	f Contact	, NJ 07631 ASBESTOS CONTROL &								
DOH Justification) Cancellation			Tos	EPH STRAN	Talapitone Number								
			FAC	LITY INFORMAT	ION								
Name of Facility Where Abatement is Taking Place (3)					Type of Facility (4)								
Street Address					School (K-12)								
Street Address					Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes,								
City (6)					etc.)								
ENECEMOOD CHY (6)					Square Feet # of Floors Bidg. Age								
County (6)			County	Code (7)	Current Use (Prior if being demolished)								
BERGEN			STATE	USE ONLY)	RESIDENCE								
Name of Monitoring Firm Hired by Building C	wner (8)		ASCN	f No.	Name of Abatement Contractor (9)								
NJ ABATEMENT SERVICE	5.4	C			NJ ASATEMENT SERVICES, LLC								
Street Address		-	***************************************		Street Address								
City, State, ZIp Code					City. State, Zip Code								
Lay State, 210 Code					City. State, Zip Code								
Wyckoff, NJ 07487 Project Manager for Monitoring Firm		- 1	Telepho	ne No	Telephone No. License No.								
NICULE INTRIAGO Start Date (10)	Schedule	ed Con	pletion	962-6500 Date (11)	Name of OSHA Monitor								
12/06/17- Occupancy Status During Absternant (Check	12	129/			IRIS ENVIRONMENTAR LABORATORIES								
Occupancy Status During Abatement (Check	Only Or	(0)			\$treet Address								
Facility Closed/Vacated During Entire P	erlod of A	batem	ent		City, State, Zip Code								
Abatement Performed Outside of Normal Other – Describe:	al Facility	Hours											
Scope of Work (Check All That Apply)					UNION, NJ 07083								
	п.												
≥3 of or ≥3 if ≥160 of or ≥260 if		lenova Islome			Full Containment with Negative Pressure Mini-Enclosure								
	pa.				Glovebag Procedure								
	Τ.				Non-Exempted (*) and Non-Friable Procedure Absternant								
Location of	7/7/	Locati	50000	D-	Type								
Asbestos-Containing Material (ACM)		d Solei			scription of laining Material (ACM)								
TO BE ABATED In Facility	100000000	intener odlal S	ACCESS OF	(I.e. thermal	systems insulation. (Specify 2 2 2 2								
(13)		(12)			elystems insulation. (Specify Removal Repair								
	Yes	No	N/A										
ist Con			1	C									
2nd Fronk			7		AND PLANEL WALLS V								
1 1 1			1		PLASTER WALS								
3rd FLOOR			/	CEILLING AN	D PUNSTER WAYLS								
Name of Registered Waste Hauler		1 100	JDEP Wauler ID		Yarda Name of Registered Landfill								
NEWARK CARTING			045		5 IESI BETAZEHEM LANDFILL								
City, State			0,0		pal Date City, State								
369 RAYMOND BLUD, NEWARK, N	J O	710	5	12/2									
Completed by	Title				ignature / / Date / /								
NICOLE INTRIATO	Su	PERVL	002		/ 1 cole /maican 11/20/17								
(T) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1													