						State of	Nev	v Jersey		Saleston Company			W/Server person	-		
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Date of Notification (1)		10.00			Nar	ne of Buildi	ina C	Owner/Operator	(2)							
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⊠ EPA	☐ Initial	27 89.			4	000 Hadle	y R	oad		ASB	EST	OS C	ONT	BOI		
⊠ DOLWD			.E		City	, State, Zip	Coc	le		P			ING			
☑ DHSS □ DCA	Amend Emerge				S	outh Plair	nfie	ld. NJ						(Contractive or Special		
(NJAC 5:23-8)	justifica	ation)	iciual	ng		ne of Conta				Telephone Number						
	Cancel				A	ndrew Pu	k			201-481-2415						
							_	DRIATION		201-401-241						
Name of Facility Where At	batement is	Takin	n Plan	ne (3)	Γ/	ACILIT I	NFC	RMATION	Type of Equilibrat	(4)						
PSE&G- Fernwood S			g i iac	JC (3)					Type of Facility (							
Street Address	Dabotatio								☐ School (K-12) ☐ Subchapter 8 (Other than K-12)							
959 Lower Ferry Roa	ad								Other (i.e., private and commercial buildings,							
City (5)		-							homes, etc.)	1			SEATON S			
Trenton, NJ 08628									Square Feet	# of Floors	В	ldg. A	ige			
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County (6)					Cou	inty Code (	7)(S1	ATE USE ONLY)		or if being demolis	shed)					
Mercer	1000						Utility									
Name of Monitoring Firm H	858	ilding (	Owner	(8)	ASCN	1 No.	N	ame of Abatem	ent Contractor (9)							
Health & Safety Serv	rices							AbateTech, I	nc.							
Street Address							St	reet Address								
PO Box 365							30 Maple Ave	e. PO Box 25								
City, State, Zip Code						Ci	ty, State, Zip Co	ode								
Berlin, NJ 08009							Lumberton, I	NJ 08048	37							
Project Manager for Monito			Tel	ephone	No.	Te	lephone No.		License No.							
Jim Proctor					1-8850	1	609-265-2107	55	00529	-						
Start Date (10)		Sched	uled C	Compl	etion Da	ate (11)	Na	me of OSHA N	lonitor							
_6 / _22 / _	18	_1	2_ /	1	4_/	18	1	EMSL Analyt	ical							
Occupancy Status During A	Abátement (	Check	only	one)			Str	reet Address	7.00							
☐ Facility Closed/Vacated	During Enti	ire Per	iod of	Abate	ment"		1	200 Route 13	0 North							
☐ Abatement Performed O	otside of N	ormal-	Facilit	y-Hou	rsDes	scribe		y, State, Zip Co	Code							
Time of Abatement:	AM	PN	1/	PM		_AM	1		n, NJ 08077							
Scope of Work (Check all th	nat apply)		-						,							
D >2 of or > 2 if			-						ainment with Nega	ative Pressure						
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>			⊠ Re □ De					☐ Mini-Encl								
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			Is	Loca	tion	N. 15-277-5-1			T		12	atem	ent Ty	vpe		
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Asbestos-Containing Ma TO BE ABATE		1)	Ma	inten	ely by ance/	Asbes	stos	Containing Mat	terial (ACM)	Amount	em	Repair	nca	nclo		
IN Facility	-0	1		todial	Staff?	(i.e.		ermal systems i surfacing, VAT,		(Specify SF or LF)	Remova	=	psu	Enclosure		
(13)		-		(12)	T	1		her miscellaned		0. 0. 2. /	-		Encapsulate	9		
			Yes	No	N/A								**			
Exterior East Side North						Caulk				5 SF						
Exterior East Side Sout	th end of				$\boxtimes$	Transite	Pa	nels		10 SF						
Exterior Roof						Roofing	Ma	terial		100 SF	$\boxtimes$					
Exterior						Transite	Co	nduit		450 LF	$\boxtimes$					
<u> </u>						Vaste O No.	Cut	oic Yards of	Name of Register							
VEOLIA							4	0		less Landfill						
City, State Flanders, NJ	1							posal Date 2/14/18	City, State Morrisville, I	PA						
Completed By (Print or Type	1	Title						Signature	PODE STOREGO CONTROL C							
Gwendolyn Trumbetti	<u></u>	2000	erati	one i	Coordi	nator		Signature .	Date 11-26-18				,			
200 H	Swendolyn Trumbetti Operations Coordinator								$\Lambda / \Lambda$		1	6-	13			

ASB-41 MAY 11 \* Do not use this form for asbestos licensure exempted activities.

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 11 27 18 1 Millville Public Schools / Job #1707-5179 Check #10795 Agencies Notified Type Notification Street Address ASBESTOS CONTROL & **⊠** EPA ☐ Initial 101 North 3rd Street LICENSING **⊠** DOLWD M Amended City, State, Zip Code ☑ DHSS Amendment #9 Millville, NJ 08332 □ DCA ☐ Emergency (including (NJAC 5:23-8) justification) Name of Contact Telephone Number ☐ Cancellation Bob Ryan 609-858-5395 **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Millville Senior High School School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, 200 North Wade Blvd. homes, etc.) City (5) Square Feet # of Floors Bldg. Age Millville 200,000 50+ County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Cumberland Education Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Brinkerhoff Environmental Services, Inc. 00100 AbateTech, Inc. Street Address Street Address 1805 Atlantic Avenue 30 Maple Ave. PO Box 25 City, State, Zip Code City, State, Zip Code Manasquan, NJ 08736 Lumberton, NJ 08048 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Gary W. Fleming 732-223-2225 609-265-2107 00529 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 4 / 2 / 18 12 / 31 / 18 **EMSL Analytical** Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 200 Route 130 North Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: 7AM-3:30PM/3:30PM-12AM Cinnaminson, NJ 08077 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure ≥3 sf or ≥3 lf □ Renovation ☐ Mini-Enclosure ≥160 sf or ≥260 If ☐ Demolition ☐ Glovebag Procedure Non-Exempted (\*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Used Solely by Encapsulate Removal Enclosure Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED (i.e., thermal systems insulation. (Specify Custodial Staff? IN Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A See Attached See Attached See Attached X П П П П П Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. Waste AbateTech, Inc. G.R.O.W.S. Landfill 18750 12 City, State Disposal Date City, State Lumberton, NJ 12/31/18 Tullytown, PA Completed By (Print or Type) Title Signature. Gwendolyn Trumbetti Operations Coordinator 11-27-18

### Scope of Work Cont.

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				ASBESTOS CON
Location of ACM	Used for Maint.	Description of ACM	Amount	Abatement Type
Room D105	NO	Transite Panels	9 SF	Removal
Room D104	NO	Transite Panels	9 SF	Removal
Room D103	NO	Transite Panels	10 SF	Removal
Room D103	NO	Cove Base Mastic	8 LF	Removal
Room D101	NO	Transite Panels	10 SF	Removal
Room D101	NO	Cove Base Mastic	8 LF	Removal
Room D102	NO	Transite Panels	19 SF	Removal
Room D102	NO	Cove Base Mastic	7 LF	Removal
Room D113/114	NO	Transite Panels	60 SF	Removal
Room D113/114	NO	Chalkboards & Mastic	50 SF	Removal
Room D113/114	NO	Transite Door Panels	30 SF	Removal
(2) Storage Rms. 8	& Hall NO	Floor tile & Mastic	150 SF	Removal
Throughout	NO	Door Caulk	10 SF	Removal
Auditorium	NO	Cement Panels	500 SF	Removal
Auditorium	NO	Roof Drain Fitting	1 each	Removal
Cafeteria	NO	White window glazing	2,436 LF	Removal
Cafeteria	NO	Transom Panels	30 SF	Removal
Cafeteria	NO	Window sills	228 SF	Removal
Cafeteria	NO	Floor tile & Mastic	550 SF	Removal
Cafeteria	NO	Fire Stop	9 SF	Removal
Cafeteria	NO	Interior Door Caulking	668 LF	Removal
Cafeteria	NO	Black Pipe wrap	300 LF	Removal
Cafeteria	NO	Caulk on block wall	10 LF	Removal
Cafeteria	NO	Door Caulking	50 LF	Removal
Cafeteria	NO	White window glazing	420 LF	Removal
D113/114	NO	Cove Base Mastic	640 LF	Removal

### Scope of Work Cont.

D.	ECEIVE	
APPARENTAL PROPERTY OF THE PRO	NOV 2 9 2018	
THE R. P. LEWIS CO., LANSING, MICH.	ASBESTOS CONTROL & LICENSING ement Type	T and statement of the statement

Location of ACM	Used for Maint.	Description of ACM	Amount	Abatement Type
D113/114	NO	Door Caulk	576 LF	Removal
D113/114	NO	Wall Caulk	180 LF	Removal
Auditorium	NO	Door Caulk	350 SF	Removal
Exterior	NO	Transite Debris	13,000 SF	Removal

CK5201	PA		NOT		ATION	OF AS	ew Jersey BESTOS ABA AC 8:60 and 5:				0.00	2018				
Date of Notification (1)					Name	of Buildin	g Owner/Operato	r (2	2)	J [] NOV	29	ZUIC	)	Lucas		
11/	27 /	18			Ter	raphase	Engineering		/-	ob #1811-2383 Chk. #5201						
Agencies Notified	Type Notific	ation			Street	Address				ASBESTO	s co	NTR	DL 8			
⊠ EPA	Initial				100	Canal F	Pointe Blvd., Suite 108									
	Amended	70.0				State, Zip							_	-		
□ DHSS	Amendm	The second second	100 100 100		1 S.		NJ 08540									
DCA (NJAC 5:23-8)	☐ Emergen justificati		cluding	]	_	of Contac				Telephone Number						
	☐ Cancellat				1 1000000000000000000000000000000000000	Connel				(609) 236-81						
							FORMATION			(000) 200 0	•		_			
Name of Facility Where Ab	atement is 1	Taking	Place	(3)	I A	CILITI	REORIVIATION	-	Type of Facility	(4)						
Terraphase Engineer		ranng	, 1 1000	(0)					School (K-12	*******						
Street Address	9							$\dashv$		) 3 (Other than K-12	)					
201 Old York Road										rivate and commer	cial bu	uilding	IS,			
City (5)								+	homes, etc.)		I DI	-l- A				
Bordentown									Square Feet	# of Floors		dg. A	ge			
County (6)				Cour	ty Codo /	)(STATE USE ONLY	1	2500 (+/-)	TBD		TBD					
Burlington					Cour	ity Code (i	NOTATE USE ONLY	7		or if being demolis						
Name of Monitoring Firm H	ired by Ruild	dina C	wner /	(8)	ASCM	No	Name of Abata		nt Contractor (9)	& Chicken Coo	þ					
Hillmann Environmer		unig C	wilei (	.0)	AGGIVI	NO.										
Street Address	ıtaı							na	nd Mold Services, Corp.							
1600 Route 22 East							Street Address	ъ.								
City, State, Zip Code			-				3859 Sylon	14.5-150	Control of the Contro							
Union, NJ 07083							City, State, Zip									
Project Manager for Monito	ring Eirm			Tal	ephone	Ma	Hainesport	, N	J 08036	T						
Mike Nehlsen	ing riin			Tel	ерпопе	INO.	Telephone No.	20		License No.						
Start Date (10)	Т	School	ulad C	omnle	etion Da	to (11)	009-702-040 Name of OSHA			00862						
_12 / _6 / _				3163	B / _		EMSL Analy									
Occupancy Status During A	batement (	Check	only o	ne)			Street Address				-			$\neg$		
☐ Facility Closed/Vacated							200 U.S. Ro	ut	e 130 North							
Abatement Performed O						cribe	City, State, Zip Code							$\neg$		
Time of Abatement:		PIV	/l/	_PIVI	_	AM	Cinnamins	on,	n, NJ 08077							
Scope of Work (Check all the	nat apply)							- 110	N-10 8 125 852 152 859							
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≥160 sf or ≥260 lf			☑ De				☐ Gloveb	ag	closure ag Procedure							
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Name of Registered Waste	Hauler		ш			Maata	Cubic Vanda of		None (Deci			ш	Ш	Ш		
Waste Management	iaulei			100	NJDEP \ Hauler II		Cubic Yards of Waste		Name of Regis							
						}	5		Grand Cen	ırdı						
City, State							Disposal Date		City, State	N / Control						
Lafayette, NJ							12/28/2018 Penn Argyle, PA									
Completed By (Print or Type) Title							Signature Date									
Kimberly A. Trumbett	i	Of	fice (	Coor	dinator	•	(ak)		1	-	1-2	7-	18			
SB-41							V/L3		M							

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Hillmann-O	hen	ltina	II	C		
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NOV 2 9 2018

The following areas have been inspected and were found to contain asbestos or assumed to be asbestos containing materials.

ASBESTOS CONTROL & LICENSING

### BASE BID 1: Asbestos Abatement

#### BID DOC BULLETS:

LOCATION	ASBESTOS-CONTAINING MATERIALS	QUANTITY		
First Floor Bathroom	Wall Tile Mastic	350 SF		
Kitchen	Wall Tile Mastic	150 SF		
Throughout Building	Joint Compound and Associated Wallboard	10,300 SF		
Throughout Building	Joint Compound and Associated Wallboard (Assumed to be concealed by wood paneling)	5,950 SF		
Building Exterior	Transite Siding	4,000 SF		
Chicken Coop	Transite Siding	60 SF		
Building Exterior	All Window Calking	415 LF		

Name of Contractor:	Signature:	
Printed Name:	Date:	

NOCE				NOTIFICA (PURSUA	TION OF	NEW JERS ASBESTOS A IAC 8:60-7 A		EC	E	VE	Section of the second				
Date of Notification (1	/ 18				Name of	Building Ov	vner / Opera	itor (2)	The second con-	MOV	/ 29 2	2018			
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EPA		Initial				te, Zip Code			ASBESTOS CONTROL &						
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☑ DOH ☑		Amend				Contact			Telepho	ne Numb	oer				
	<u> </u>	Cance	llation	w/ justification	MELISS	A MICHAELS			248-512	-3152					
					FACILITY	INFORMATIO	ON								
Name of Facility Wher FCA ENGLEWOOD CL	e Abatem IFFS	ent is T	Taking	Place (3)		Type of Fa									
Street Address						<b>-</b>    -	School (F		1027	120					
330 SYLVAN AVENUE							Subchap	ter 8 (Other	than K-1	2)					
						V	Other (I.e	., private & omes, etc.)	cmmerci	al					
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Street Address						Street Add	race						_		
55 Lane Road						32 Williams									
City, State, Zip Code			_			102 ************************************	3 I alkway								
Fairfield NJ 07004			City, State, Zip Code												
Project Mngr. For Mon	Project Mngr. For Monitoring Firm Telephone Number							East Hanover NJ 07936							
Ben Sallemi								Last Hallovel NS 07530							
Sheduled Start Date (1	0)	Sched.	Comr	oletetion Date (1	1)	Telephone	Number		11:00000	Marine			_		
_12 / 10 /	18	0:		28 /	19	973772366			License	Number					
//			/			373772300					00860				
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Abatement			•			Street Addr		oup mo					-		
☐ Abatement F	Performe	d Outsid	de of N	Normal Facility		32 Williams							- 1		
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Other - Desc	cribe:	8AM - 4	PM - N	ION - FRI		City, State,	Zin Code		-				-		
						East Hanover, NJ 07936									
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≥160 sf or ≥2	260 IT					Glovebag P							- 1		
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City, State 4509 of Waste															
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ASB-41							1 un	- /	1 50	1		11/28/	10		

#### STATE OF NEW JERSEY NOTIFICATION OF ASBESTOS ABATEMENT

	III.			NOTIFICA	ATION OF	F NEW JERS ASBESTOS A JAC 8:60-7 A	ABATEMEN	T,	DECEIVE					
Date of Notification (1	) / 18				Name of	Building Ov	vner / Opera	ator (2)					-	
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	Type of N		on			RYSLER DRIN							g ive Manage	
EPA DEP	H	Initial Amen	dod			te, Zip Code			With the same of t	ASSES	TOS CO	ONTROL	Q.	
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Name of Facility When FCA ENGLEWOOD CL	re Abatem IFFS	nent is 1	Taking	Place (3)		Type of Fa		( 40)						
Street Address			-			<b>- </b>	School (R		than K 1	2)				
340 SYLVAN AVENUE						Subchapter 8 (Other than K-12)  Other (I.e., private & cmmercial								
City (E)								omes, etc.)						
City (5) ENGLEWOOD CLIFF E	County (6	)		County Code	(7)	Square Fe		# Of Floor	rs	Buildin				
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						VACANT	e (Filor II b	eing demoi	isnea)	1				
Name of Monitoring Fi	lame of Monitoring Firm Hired by Bldg. Owner (8)  ASCM						batement Co	ontractor (9	1)				-	
GZA	T-					Northstar (	Contracting	Group Inc	,					
Street Address 55 Lane Road														
City, State, Zip Code						32 Williams	s Parkway							
Fairfield NJ 07004						City, State, Zip Code								
Project Mngr. For Mon	itorina Fi	irm		Telephone Nu	mher		ver NJ 0793	2						
Ben Sallemi				973 774 3311	iiiibci	Last Hallo	VEI 140 0/33	0						
Sheduled Start Date (1	,	Sched.	Com	oletetion Date (1	11)	Telephone	Number		License	Number			$\neg$	
$\frac{-12}{2} / \frac{03}{2} / \frac{12}{2}$	18	_0	2	/ <u>28</u> /	19	973772366	0							
Occupancy Status Dur	ing Abote	mant //	Charl.	0-1-4)						0	0860			
Facility Clos			SHA Monito											
Abatement	oran rada.	ica ban	ng Li	the reliod of		Street Add	ontracting G	roup inc					_	
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Hours - Des	cribe:					To Trimario	· unitivaly							
Other - Desc	cribe:	8AM - 4	PM - I	MON - FRI		City, State,				-			$\neg$	
Scope of Work (Check	All That	(vlaaA	-			East Hanover, NJ 07936								
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Demolition		V	]	Renovation	1	Full Contain	nment with	Negative P	ressure				- 1	
≥3sf or≥3lf     ≥160 sf or >2	260 15					Mini - Enclo	osure	-						
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						Non-Exemp	oted (*) and	Non-Friable	Procedu	ıre			- 1	
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Name of Registered Waste Hauler NJDEP Waste Cubic						Name of Re	gistered I a	ndfill					$\dashv$	
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Sib. Chat-					of Waste									
City, State NEWARK, NJ					Disposal	City. State				- 1-400				
TETTOTIN, INJ	**			1	Date	PEN ARGILI	E, PA							
Completed by (Print or Type)						Signature   Date							_	
Paul Mast				VICE PRESIDE	NT		1//	1	-)	1	Date			
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Agencies Notified	Type Notification			Street Ad	ddress ast Main	St					1407	2 3	4010			
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	Emergency (		_	Name of	2000 C.	07424	•			Tel	ephone Nu	ımber	NEW MINISTERS CONTRACTOR	Metabook		
DCA	Cancellation			Dave E	Burkart			(973) 256-6644								
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Name of Facility Where A Commercial Propert			3)					Type of Facility (4)  School (K-12)								
Street Address 20-21 Wagaraw Rd.								Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes,							es,	
City (5) Fair Lawn								Sq	etc.) uare Feet # of Floors Bldg.					ge		
County (6) Bergen				County C	Code (7) JSE ONLY			Cu	rrent Use (Pr	ior if bei	ng demolis	shed)				
Name of Monitoring Firm N/A	Hired by Building (	Owner (8)	I	ASCM	l No.				batement Co		(9)					
Street Address				2 2 2		Street 522	Add	ress								
City, State, Zip Code						City, S	State, Zip Code on City NJ 07087									
Project Manager for Monit		Telephor	ne No.		Teleph	hone			License 01206	No.		-				
Start Date (10)	mpletion [	Date (11)		N. SCALEGE C	26 11.70	SHA Monitor		01200								
11-21-18		11-30-	18	mpiction	Sate (11)		Delfa	a Co	ontracting l							
Occupancy Status During Facility Closed/Vaca	ted During Entire I	Period of	Abate	ement 522					ress St.							
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Delfa Contracting LL0	- 1	NJDEP Waste Hauler ID No. 35240  Cubic Yards of Waste 20							source F		ery F	acilit	y			
City, State Union City, NJ				Disposal Date 12-03-18				9	City, Sta Tullyto		Ą					
Completed by Jaime Delgado Title Proj. Manager.						5	Signature	e	THE STATE OF THE S		100	ate  1-20-	18			

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## State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

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	7.		(Pur	suant	to NJA	C 8:60 and 12:12	.0)	III III NO	V 2	0 2	018	100
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	L			FA		FORMATION		J				
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Name of Monitoring Firm (8)	I.A	OWING	_   _			K		INC		_		_
Street Address	1					Street Address	4 S. SP4	RUCE AU	-		73744	
City, State, Zip Code						City, State, Zip C	Code		1 00	05	7	
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Project Manager for Mon	itoring Firm		) e <del>re</del> p	hone l	<b>v</b> o.	856-77		# 0	37		_	_
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17-3-18	11-1	2-1	-	18		Street Address	10/14					=
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Abatement Performed  Other - Describe:	Outside of Norma	al Facility	/ Hours			City, State, Zip C						_
Scope of Work (Check al	I that apply)					□ Full Cor	ntainment with Ne	gative Pressure				
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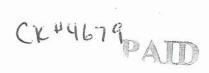
### State of New Jersey

NOV 2 9 2018

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) -18 OWTRACTOR ESTOS CONTROL & Type Notification Street Address Agencies Notified LICENSING Initial Amended City, State, Zip Code DOL. Amendment # Emergency (including DOH DCA justification) Name of Contact Cancellation FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) RESIDENCE School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e., private & commercial buildings. homes, etc.) Square Feet # of Floors City (5) Bldg. Age DWOOD CREST 500 County Code (7) (STATE Current Use (Prior if being demolished) County (6) USE ONLY) VA CLANIT Name of Abatement Contractor (9) ASCM No. Name of Monitoring Firm Hired by Building Owner KLEMCO Street Address Street Address City, State, Zip Code City, State, Zip Code 0805 MAPLE Telephone No. Telephone No. License No Project Manager for Monitoring Firm 856-779-0472 00444 Name of OSHA Monitor Scheduled Completion Date (11) Start Date (10) 17-3-18 Street Address Occupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: Scope of Work (Check all that apply) Full Containment with Negative Pressure Mini-Enclosure Renovation >3 sf or >3 ff Demotition Glovebag Procedure M≥160 sf or ≥260 ff Non-Exempted (\*) and Non-Friable Procedure Abatement Is Location Type Normally Used Solely by Description of Location of Maintenance/ Asbestos Containing Material (ACM) Amount Asbestos-Containing Material (ACM) Custodial (i.e., thermal systems insulation, (Specify TO BE ABATED Staff? surfacing, VAT, or SF or LF) IN Facility other miscellaneous) (12)(13)Yes No N/A RAN SIT 7501c DING Cubic Yards Name of Registered Landfill NJDEP Waste Name of Registered Waste Hauler To 900 Disposal Date City, State City. State JOODBINE MAPLE Signature Completed By

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Street Address						- 1		er 8 (Other than K-1 , private & commerc rc.)		Idings	5,					
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Name of Monitoring Firm Hi	red by Building	Owner		ASC	M No.		nent Contractor	(9)				- 150				
(8)	JA						KLEMCO INIC									
Street Address	7				· ·	Street Address	369 S. SPRUCE AVE									
City, State, Zip Code						City, State, Zip C	D Code									
ony, oute, ap oode						MAP	PLE SHADE NIT 08053									
Project Manager for Monitor	ing Firm		Tele	phone	No.	Telephone No.	_	License No.								
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Kumco	Inc		Ha	ules ID	No.	of Waste	C.	MC.W.	1).	A						
City, State	- PALL		-11	110		Disposal Date	City, State									
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Date of Notification (1) 11-23-18	1	× 40000		Name	of Buildin	g Owner		1 7	))	CE		V/ [						
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Name of Facility When	AL	7.1		FAC	CILITY IN	FORMAT	TION				_							
Name of Facility Where Private Home	Abatement is Taki	ng Place	(3)					Type of Facility	(4)									
Street Address								School (K	-12)									
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City (5)								etc.)					5)	105,				
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Name of Monitoring Fire	m Hired by Building	Owner (8	3)	ASC	M No.		Name	of Abatement Co	ontracto	r (9)								
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Street Address								Street Address										
City, State, Zip Code							100/00/00	522 7th St.										
Oity, State, Zip Code								tate, Zip Code	0.77									
Project Manager for Mo	nitorina Firm			Tolophe	ana Na			n City NJ 070	87									
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Start Date (10)		Schedu	led Co	mpletion	Date (11)	1		of OSHA Monito	-	01206								
12-03-18		12-05	-18		(, ,,	9.		Contracting										
Occupancy Status Durin	g Abatement (Ched	k Only O	ne)					Address										
Facility Closed/Vac	ated During Entire	Period of	Abate	ment			522 7	th St.										
Abatement Perform Other – Describe:	ned Outside of Norr	nal Facilit	y Hou	'S				ate, Zip Code										
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		Proj.	iviana	iger.			,	14		11	-23-1	8						

State of New Jersey Notification of Asbestos Abatement (Pursuant to N.J.A.C. 8:60-7 and 12:120-7) CK #28639 Name of Building Owner/Operator (2) Pine Hill Board of Education 11/26/18 EMERGENCY NOTIFICATION NOV 2 9 2018 Agencies Notified Notification Type Street Address 1003 Turnerville Road ☑ Initial Notification **⊠** EPA City, State, Zip Code ASBESTOS CONTROL & □ DCA ☐ Amended # Pine Hill, NJ 08021 Telephone Number X DOL Name of Contact ☐ DEP justification) Zipporah Daniels-Browne 856-783-6900 **⊠DOH** ☐ Cancelled President BOE **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) Overbrook Highschool ☐ Subchapter 8 (other than K-12) Street Address Other (i.e. private & commercial buildings., homes, etc.) 1200 Turnerville Road Sq. Feet: # of Floors:1 Bldg. Age: 1960's Current Use (prior if being demolished): School County Code (7) County (6) City (5) Pine Hill Camden (State Use Only) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Contractor (9) N/A Epic Environmental Services, LLC Panoramic Window & Door Systems, Inc. Street Address Street Address 712 Sergeantsville Road 1930 Brown Road City, State, Zip Code City State, Zip Code Newfield, NJ 08344 Stockton, NJ 08559 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number P (732)926-0900 James Eberts 01237 856-205-1077 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor IAQ GURU LLC 12/2/18 12/1/18 Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 87 Main Street Describe City, State, Zip Code □Other - Describe: Lincoln Park, NJ 07035 Source of Work (Check all that apply)  $\ge$  3 sf or  $\ge$  3 lf □ Renovation ☐ Mini-Enclosure □ > 160 sf or > 260 If □ Demolition ☐Glovebag Procedure ☑ Non-Friable Procedure Description of Asbestos Containing Material Abatement Type Location of Asbestos-Is Location Normally Amount Used Solely by (Specify SF or Containing Material (ACM) in (ACM) (i.e. thermal systems insulation, Remove Repair Encap Enclose surfacing, VAT, or other misc.) Maint./Custodial Staff? LF) Facility (13) (12)YES NO NA X Exterior of School X Transite panels above Visitors Doorway 20 SF X Name of Reg. Waste Hauler NJDEP Waste Hauler ID # Cubic Yards of Waste Name of Registered Landfill Chrin Brothers Sanitary Landfill 0036057 Panoramic Window & Door Sys Inc Disposal Date City, State Easton, PA

Signature

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Completed by (Print or Type)

Mark M Jovic

Title

Environmental Projects Manager

Date

11/26/18

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Name of Facility Where Abatement is Tak	ing Place	(3)	1.4	SILIT INFORMA	TION		-				
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Name of Monitoring Firm Hired by Building	Owner (	8)	ASC	M No.	Name	of Abatement Co					
Street Address						AR1	A1				
P.O. BOX 365	_				100000000000000000000000000000000000000	t Address					
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Project Manager for Monitoring Firm	-		/ Telepho	ano No		TERSON			UI		
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Occupancy Status During Abatement (Che	ck Only C	ne)	1/6	3		Address	10				
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) 11/26/18 Bayonne Economic Opportunity Foundation Agencies Notified Type Notification Street Address 555 Kennedy Boulevard **EPA** Initial ☑ DEP Amended City, State, Zip Code ASBESTOS CONTROL & X DOL Bayonne, New Jersey 07002 Amendment # 1 LICENSING Emergency (including Name of Contact DOH justification) Telephone Number X DCA Samantha Howard Cancellation 201-688-7271 FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) (Former) Holy Family Academy School (K-12) Street Address Subchapter 8 (Other than K-12) 239 Avenue A ☐ Other (i.e. private & commercial buildings, homes, etc.) City (5) Square Feet # of Floors Bldg. Age Bayonne, New Jersey 07002 30,000 50÷ County (6) County Code (7) Current Use (Prior if being demolished) Hudson (STATE USE ONLY) (Former) Holy Family Academy Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Matrix New World Engineering Lilich Corporation Street Address Street Address 26 Columbia Turnpike 606 McBride Ave City, State, Zip Code City, State, Zip Code Florham Park, New Jersey 07932 Woodland Park, New Jersey Project Manager for Monitoring Firm Telephone No Telephone No. License No. Gavin Gilmore 973-585-9040 973-225-8400 01104 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 12/07/2018 01/25/2019 Iris Environmental Laboratories, LLC Occupancy Status During Abatement (Check Only One) Street Address 2333 Route 22 West Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: Union, NJ 07083 Scope of Work (Check All That Apply) □ ≥3 sf or ≥3 lf X Renovation Full Containment with Negative Pressure ≥160 sf or ≥260 lf П Demolition Mini-Enclosure Glovebag Procedure / Limited Containment&Tent Non-Exempted (\*) and/or Non-Friable Procedure Is Location Abatement Normally Туре Location of Description of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Maintenance/ Amount TO BE ABATED Encapsulate (i.e. thermal systems insulation, (Specify Enclosure Custodial Staff? Removal Repair In Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No Exterior X Base Counter Flashing Caulk 215 LF X Exterior X Caulk to (round) Skylight Frame 114 LF Main/South Corridor X Ceiling Plaster (Full Containment) 725 SF Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste Lilich Corporation 18724 15 Fairless Landfill City, State Disposal Date Gity, State Woodland Park, New Jersey 12/ Morrisville, PA Completed by Title Signature Date Adriana Olejarova President 11/26/2018

County (6) Hudson  County Code (7) (STATE USE ONLY)  Name of Monitoring Firm Hired by Building Owner (8) Matrix New World Engineering  Street Address 26 Columbia Turnpike  City, State, Zip Code Florham Park, New Jersey 07932  Project Manager for Monitoring Firm Gavin Gilmore  County Code (7) (STATE USE ONLY)  ASCM No.  Name of Abatement Contractor (9) Lilich Corporation  Street Address 606 McBride Ave  City, State, Zip Code Woodland Park, New Jersey  Telephone No. 973-585-9040  Telephone No. 973-225-8400  License No. 01104	NTROL & NG		
□ EPA □ Initial □ Amended Amendment # □ Emergency (including justification) □ Cancellation □ Ca	nes, etc.)		
Street Address   County (6)   Hudson   County (7)   County (8)   AsCM No.   Name of Abatement Contractor (9)   Lilich Corporation   City, State, Zip Code (7)   City City, State, Zip Code (7)   City City, State, Zip Code (7)   City City, State, Zip Code	ig. Age		
Type of Facility (4)	ig. Age		
Subchapter 8 (Other than K-12)   Other (i.e. private & commercial buildings, hother (i.e. private & commercial building on (i.e. private & commercial building on (i.e. private & commercial building	ig. Age		
City (5) Elizabeth, New Jersey 07028  County (6) Hudson  County Code (7) (STATE USE ONLY)  Name of Monitoring Firm Hired by Building Owner (8) Matrix New World Engineering  Street Address 26 Columbia Turnpike  City, State, Zip Code Florham Park, New Jersey 07932  Project Manager for Monitoring Firm Gavin Gilmore  Square Feet 30,000  # of Floors 2  # of Floors 2  B 50  Current Use (Prior if being demolished) (Former) Holy Family Academic Contractor (9) Lilich Corporation  Street Address 606 McBride Ave  City, State, Zip Code Woodland Park, New Jersey  Telephone No 973-585-9040  Telephone No. 973-225-8400  License No. 01104	ig. Age		
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Florham Park, New Jersey 07932  Project Manager for Monitoring Firm Gavin Gilmore  Telephone No 973-585-9040  City, State, Zip Code Woodland Park, New Jersey  Telephone No. 973-225-8400  License No. 01104	78		
Gavin Gilmore 973-585-9040 973-225-8400 01104			
0/ 10			
Start Date (10) 12/07/2018  Scheduled Completion Date (11) 01/25/2019  Name of OSHA Monitor Iris Environmental Laboratories, LLC	ε,		
Occupancy Status During Abatement (Check Only One)  Street Address			
☑ Facility Closed/Vacated During Entire Period of Abatement       2333 Route 22 West         ☐ Abatement Performed Outside of Normal Facility Hours       City, State, Zip Code         ☐ Other – Describe:       Union Miles of Normal Facility Hours			
Scope of Work (Check All That Apply)			
□ ≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf □ Demolition □ Demolition □ Simple Containment with Negative Pressure □ Glovebag Procedure / Limited Containment □ Non-Exempted (*) and/or Non-Friable Pro	ent&Tent		
Is Location A Normally Provided to	atement Type		
Asbestos-Containing Material (ACM)  TO BE ABATED  In Facility  (13)  Asbestos Containing Material (ACM)  Maintenance/ Custodial Staff?  (12)  Asbestos Containing Material (ACM)  (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Amount  (Specify  SF or LF)	Enclosure Encapsulate		
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tterior V Caullate ( 200 Marie 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
lain/South Corridor X Caulk to (round) Skylight Frame 114 LF  X Ceiling Plaster (Full Containment) 725 SF			
lame of Registered Waste Hauler			
NJDEP Waste Hauler NJDEP Waste Hauler ID No. of Waste Hauler ID No. 18724 15 Fairless Landfill			
City, State Voodland Park, New Jersey  Disposal Date 12/ /18 City, State Morrisville, PA			
Adriana Olejarova  Title President  Signature Date 11/23/20	3.		

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	Date of Notification (1)	18,	Name	of Building Owner	Operator	(2) NOV 2	2018	1		
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	Project Manager for Monitaria go-irm		Telepho	ne No: <b>758-</b> 3365	Log	one No. <b>31</b> 158-334	License N	3	PP	
	Start Date (10)	Scheduled Cor	npletion	Date (11)		f OSHA Monitor	1		-	-
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	Other – Describe:	ar r dunity r roun				w Egypt	NJC	185	33	₹7×.
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Date of Notification (1) 11/25/2018			Name o	of Building	Owner/O		(2) pincott	- +	H	ASBE	ESTA	100	7	1
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Name of Monitoring Firm Hired by Building Ow MECS	nar (8		ASC				of Abatan				s. Inc			
Strael Address PO Box 341	$\dagger$				_	Street /	Address ox 322							_
City, State. Zip Code Crosswicks, NJ 08515	Cliy, State, Zip Allentown, I								01					
Project Manager for Monitoring Firm Bill Welsgarber		$\neg$	Telepho (609)	ne No. 298-401	70		one No. 69-968			Dicense 00493				
11/28/2018	Scheduled Completion Date (11) Name of Oct 11/27/2018 MECS							culter						
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City, State Allentown, NJ					11/	el Date 29/201		ly, Sta	ille, 17	A,				_
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Date of Notification (1) 11/25	2018			Name o	f Building Ow		or (2) Lippino	cott	American Trans	儿	. 9	T:	- U	U				
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011 (5)							×	etc.)					57000		25,			
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City, State, Zip Code						10000		Zip Code										
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Project Manager for Mon	toring Firm			Telepho	ne No.		phone N			Licens	se No.							
Bill Weisgarber				(609)	298-4070	609	259-9	9688		0049	3							
Start Date (10) 11/26/2018				npletion I	Date (11)	Nam ME		HA Monitor										
Occupancy Status During	Abatement (Chec	k Only On	ne)			Stree	et Addre	ess										
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Date of Notification	on (1)					Name of Building Owner/Operator (2) Paul Scappaguercio						KI		<u> </u>	<u>L</u>	Ш	<u> </u>	The second		
Agencies Notified	t	Туре	Notification			Street Address							-	VOV	2 9	20	18	Secretary and the second		
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☑ DOH DCA			justification) Cancellation		9	Name of Contact Paul Scappaguercio							Telephone Number							
Name of Facility Name	Where	Abater	ment is Takin	g Place	(3)	FAC	ILITY INF	ORMAT	ION	Type of I	acility (4)	)								
Street Address								144		Sub	ool (K-12) chapter 8 er (i.e. pri	(Othe	er tha & com	n K-12 merci	2) al buil	dings	, hom	es,		
City (5) Nutley									Square F N/A	are Feet # of Floor			rs	Bldg. Age N/A						
County (6) Bergen							Code (7) USE ONLY	)	Current U House	urrent Use (Prior if being demolished) ouse										
Name of Monitoria	ng Firn	Hired	by Building (	Owner (8	)	ASCI	M No.		Name D&S	ne of Abatement Contractor (9) S Abatement, Inc.										
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City, State, Zip Co	3120000						,81		State, Zip Code owa, NJ 07512								100			
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Start Date (10) 12/03/2018				Schedu 12/04/		npletion	Date (11)			of OSHA N										
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City, State Totowa, NJ 075	512					Disposal Date TBD				e City, State Morrisville, PA										
Completed by Ned Joksimovic	;			Title Proje	ct Ma	nager		S	ignature Date 11/23/					3/2018						

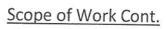
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(NJAC 5:23-8)		stification ancellation			1000				Telephone						
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Street Address								☐ Subchapter ☑ Other (i.e., p	8 (Other than	K-12)	والوالييط				
38 Sears Avenue								homes, etc.		IIIIerciai	bullali	ys,			
City (5)								Square Feet	# of Floors	; II	Bldg. A	Age			
Atlantic Highlands,	NJ.										J	.50			
County (6)					Cou	inty Code (	7)(STATE USE ONLY)	Current Use (Pr	ior if heing de	molished)					
Monmouth						, , , , , , ,	///	Substation	ior ii beilig de	monstica					
Name of Monitoring Firm	lired b	v Building	Owner	(8)	ASCN	1 No.	Name of Abateme	I.							
1 Source Safety & h			,	(-)	,		AbateTech, I								
Street Address							Street Address	mo.							
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City, State, Zip Code	uite i						30 Maple Ave								
Exton, PA 19341							City, State, Zip Co								
				T		NJ 08048									
Project Manager for Monit	iring F	ırm		1 52	ephone		Telephone No.		License No	٥.					
Brian Hovendon		101				1-5525	609-265-2107		00529						
Start Date (10)/	18		11			ate (11) 18	Name of OSHA M EMSL Analyti								
Occupancy Status During	baten	nent (Che	ck only	one)	U II U		Street Address						_		
☐ Facility Closed/Vacated	During	g Entire P	eriod of	Abate	ment		200 Route 13	0 North							
Abatement Performed	lutside	of Norma	al Facili	ty Hou	rs - Des	scribe	City, State, Zip Co	ode				77.55	-		
Time of Abatement:	AN	/IF	PM/	PM		_AM	Cinnaminson								
Scope of Work (Check all t	nat app	oly)							700 F25						
≥3 sf or ≥3 lf			⊠ Re	enovati	on	☐ Full Containment with Negative Pressure ☐ Mini-Enclosure									
☐ ≥160 sf or ≥260 lf				emolitic			☐ Glovebag	Procedure							
	_		Т.					mpted (*) and Nor	n-Friable Proc	edure					
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Name of Registered Waste	Jours				IDEDI	0111	01: 11: 1								
770	Hauler				JDEP V		Cubic Yards of Waste	Name of Regist							
AbateTech, Inc.					18750	3 (10 - 100 - 10 )	2	G.R.O.W.S.	Landfill						
City, State							Disposal Date	City, State							
Lumberton, NJ							11/30/18	Tullytown, I	PA						
Completed By (Print or Type	)	Title	9				Signature /	7		Date		9290	_		
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SB-41	Operations Coordinator								11-21-18						

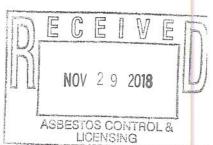
MOCIC	NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)												$\mathbb{V}$	E		
Date of Notification (1)	_				Nan	ne of Ruildi	ing C	Owner/Operator	(2)					_		
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⊠ DOĽWD	Amen				City,	State, Zip	Cod	le		ASBESTOS CONTROL &						
☑ DHSS ☑ DCA	☐ Emerg	dment #		_	Tr	enton, N	J 08	608			-Common		The Continue Control	CONTRACTOR NAME OF THE OWNER, THE		
(NJAC 5:23-8)		cation)	iciudii	ig	2000	e of Conta				Telephone Number						
	☐ Cance				Mi	ke Wilso	n			609-512-2345						
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Name of Facility Where A	batement	is Taking	g Plac	e (3)	- 17	COLLITT	INI C	MINIATION	Type of Facility	(4)						
Executive State Ho		,	9	· (•)					School (K-1)							
Street Address	1000								Subchapter	8 (Other than K-12						
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City (5)									homes, etc.	# of Floors	15	lala A				
Trenton, NJ									Square reet	# Of Floors	P	Bldg. Age				
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Mercer					000	inty Code (	1 )(01	ATE USE UNLT)	Current Ose (Pr	rior if being demolis	nea)					
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Langan Engineering	7.0	unung C	MITCI	(0)	ASCIV	I NO.	1		ent Contractor (9)							
Street Address							_	AbateTech, In reet Address	nc.							
300 Kimball Drive									DO D 25							
City, State, Zip Code		-						30 Maple Ave								
Parsippany, NJ 070	Δ						1	ty, State, Zip Co								
Project Manager for Monit				Tol	ephone	No	-	Lumberton, N	13 08048	11:						
Vijay Patel	July I min					)-4900		lephone No.		License No.						
Start Date (10)		- 1"				ate (11)	100	609-265-2107		00529						
11 /12 / .	18			5.0		18	100000	ime of OSHA M E <b>MSL Analyti</b>								
Occupancy Status During	Abatement	(Check	only o	one)		- 44	Str	eet Address								
☐ Facility Closed/Vacated							2	200 Route 130	0 North							
Abatement Performed	Outside of	Normal I	Facility	y Hou	rs - Des	scribe	Cit	y, State, Zip Co	de				-			
Time of Abatement:	AM	PN	1/	PM-		AM	(	Cinnaminson								
Scope of Work (Check all	hat apply)							Propriete IA Marie 1931 II State 1931 II A		11.5	- Constitution					
☐ >3 sf or >3 lf			⊠ p.						ative Pressure							
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Name of Registered Waste AbateTech, Inc.	Hauler	1		15.50	JDEP V auler ID	싫었다이라 연구.	Was	oic Yards of ste	Name of Regist G.R.O.W.S.							
City, State					18750		Dia:			Landin						
Lumberton, NJ								posal Date 2/14/18	City, State Tullytown,	PA						
Completed By (Print or Typ	<del>2</del> )	Title		- 11-5				Signature	4	Dat	e	33.51				
Gwendolyn Trumbett		Ор	eratio	ons C	Coordi	nator		C	n/0	1		110	-1	P		

State of New Jersey

ASB-41

\* Do not use this form for asbestos licensure exempted activities. **MAY 11** 





Location of ACM	Used for Maint.	Description of ACM	Amount	Abatement Type
Governor's ()ffice	NO	Plaster	1,250 SF	Removal
Governor's Office	NO	<b>Duct Insulation</b>	50 SF	Removal
Governor's ()ffice	NO	Vapor Barrier	150 SF	Removal
2 <sup>nd</sup> Floor	NO	Plaster	2,100 SF	Removal
2 <sup>nd</sup> Floor	NO	Duct Insulation	150 SF	Removal
2 <sup>nd</sup> Floor	NO	Vapor Barrier	150 SF	Removal
Building Entrance	NO	Plaster	1,900 SF	Removal
Exterior	NO	Roofing Material	600 SF	Removal
Throughout	NO	Window Caulk	200 LF	Removal

NOCK			NO	B	E (	9 [		V	7 E								
Date of Notification (1)	26	1 .	10		200000		ng Owner/Operator			C. NO	) [	2 9	201	8			
					11		f Spring Lake He	agnts / Job #18	11-5411	Cneck	#10	/60					
Agencies Notified  EPA	Type	Notificatio	n	/	-	et Address	on Avenue		1	ASBESTOS CONTROL 8							
□ DOLWD	⊠ An	nended		1		State, Zip				LICENSING							
☑ DHSS	5 - 5 - 5 - 5 - 5 - 5	nendment		1			762		1								
DCA (NUAC 5:22 8)	☐ En	nergency	(includi	ng	-	e of Conta	e Heights, NJ 07	102	Telephone Number								
(NJAC 5:23-8)		stification) incellation		,	05105000		7.7					732-229-4064					
		incellation				yan Kees	NFORMATION		132-2	29-406	4						
Name of Facility Where A	ateme	ent is Taki	ng Plac	e (3)	17	CILITI	NORMATION	Type of Facility (	4) /				-				
Spring Lake Heights				1				School (K-12)	Segue Page 1								
Street Address				1				☐ Subchapter 8	(Other tha	an K-12)	)						
550 Jersey Avenue				Ž.				Other (i.e., pr	ivate and	commer	cial b	uildin	gs,				
City (5)					V		0.200	homes, etc.)	14-5-1-		I D	l-l /					
Spring Lake					The same	المادة (المادة المادة		Square Feet	# of Flo	ors	В	ldg. A	ige				
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Monmouth						inty Code (	7)(STATE USE ONLY)			aemolis	ned)						
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Name of Monitoring Firm I	irea b	y Building	Owner	(8)	ASCN	I No.		ent Contractor (9)									
NA							AbateTech, I	nc.									
Street Address							Street Address										
							30 Maple Ave	e. PO Box 25									
City, State, Zip Code							City, State, Zip C	ode									
							Lumberton, I	NJ 08048									
Project Manager for Monito	ring F	irm		Tel	ephone	No.	Telephone No.		License	No.							
							609-265-2107		0052	9							
Start Date (10)			duled (	Comple	etion Da	ate (11)	Name of OSHA N	1onitor									
12 /3 / _																	
Occupancy Status During	baten	nent (Chec	ck only	one)			Street Address							22.11			
☐ Facility Closed/Vacated							200 Route 13	0 North									
Abatement Performed (	utside	of Norma	al Facilit	ty Hou	rs - Des	scribe	City, State, Zip Co	ode									
Time of Abatement:	AN	/IP	M/	PM		_AM	Cinnaminson	, NJ 08077									
Scope of Work (Check all t	at app	oly)															
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf				enovat emoliti			☐ Mini-Enc ☐ Glovebag				Э						
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Name of Registered Waste	Hauler			1.333	JDEP I		Cubic Yards of Waste	Name of Registe		ill							
AbateTech, Inc.				1	18750		25	G.R.O.W.S.	Landfill								
City, State							Disposal Date	City, State									
Lumberton, NJ							12/7/18	Tullytown, P	A								
Completed By (Print or Type	)	Title	9				Signature	· ·		Date	е		4				
Gwendolyn Trumbett	, S	c	perati	ons (	Coord	inator	(	21/10		11	-)	J -	8				
SB-41 MAY 11							os licensure exemp	) ted activities.		111		Ct.	9				

#### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) NOV 29 2018 11 26 / Borough of Spring Lake Heights / Job #1811-5411 18 Check #10792 Agencies Notified Type Notification Street Address ASBESTQS CONTROL & **⊠** EPA ☐ Initial 555 Brighton Avenue LICENSING **⊠** DOLWD City, State, Zip Code ☑ DHSS Amendment #1 Spring Lake Heights, NJ 07762 ☐ DCA ☐ Emergency (including Name of Contact (NJAC 5:23-8) justification) Telephone Number ☐ Cancellation Bryan Keeshan 732-229-4064 **FACILITY INFORMATION** Name of Facility Where A atement is Taking Place (3) Type of Facility (4) Spring Lake Heights Pump Staton ☐ School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, 506 6th Avenue homes, etc.) City (5) Square Feet # of Floors Bldg. Age Spring Lake County (6) County Code (7)(STATE USE ONLY) | Current Use (Prior if being demolished) Monmouth **Pump Station** Name of Monitoring Firm I ired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) AbateTech, Inc. Street Address Street Address 30 Maple Ave. PO Box 25 City, State, Zip Code City, State, Zip Code Lumberton, NJ 08048 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 609-265-2107 00529 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor \_\_12\_\_ / \_\_3\_\_ / \_\_18 \_\_12\_\_ / \_\_ 7 \_\_ / \_ 18 **EMSL Analytical** Occupancy Status During A batement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 200 Route 130 North ☐ Abatement Performed Cutside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: \_\_\_\_AM-\_\_\_PM/ PM- AM Cinnaminson, NJ 08077 Scope of Work (Check all to at apply) ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ⊠ Renovation ☐ Demolition ≥3 sf or ≥3 lf ≥160 sf or >260 lf Glovebag Procedure Non-Exempted (\*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Repair Used Solely by Remova Encapsulate Enclosure Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATE D (i.e., thermal systems insulation, (Specify Custodial Staff? IN Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A **Exterior Roof** П X Transite П 700 X П П П $\Box$ Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. Waste AbateTech, Inc. G.R.O.W.S. Landfill 18750 25 City, State City, State Disposal Date Lumberton, NJ 12/7/18 Tullytown, PA Completed By (Print or Type) Signaturé Gwendolyn Trumbetti **Operations Coordinator**

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

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Date of Notification (1)	26	, ,	18				ng Owner/Operator Regional Schoo		#1808-5359	)V 2 9 Check	20	18	Same Laboratory		
Agencies Notified  EPA DOLWD	Type N	Notificatio			Stre 52	et Address	town Road	ASBESTOS CONTROL & LICENSING							
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590 Nugentown Roa	d							Other (i.e., private and commercial buildings, homes, etc.)							
City (5) Little Egg Harbor, N	1							Square Feet	# of Floors	E	Bldg. A	Age			
County (6) Ocean						inty Code (	7)(STATE USE ONLY)	Current Use (Pr	ior if being der	nolished)					
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TTI Environmental	ned by	Building	Owner	(0)	ASCIV	I NO.		ent Contractor (9)	<del>)</del> )						
Street Address	-						AbateTech, I	nc.							
1253 North Church S	troot						Street Address 30 Maple Ave. PO Box 25								
City, State, Zip Code							City, State, Zip Code								
Moorestown, NJ 080	57														
Project Manager for Monito		m		Tol	ephone	No	Lumberton, I Telephone No.	NJ 00040	I License No						
Jim Guilardi	inig i ii		(		THE PERSON NAMED IN	0-8800	609-265-2107	,	License No 00529	r.					
Start Date (10)						ate (11)	Name of OSHA M		00529						
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Various Bathroom/Loc	er Ro	oms				Bathroo	om fixture caulk		600 LF						
Cafeteria				$\boxtimes$		Cove Ba	ase Mastic		400 LF						
Name of Registered Waste AbateTech, Inc.	Hauler				JDEP V auler ID		Cubic Yards of Waste	Name of Regist							
					18750		40	Fairless La	natiil						
City, State							Disposal Date	City, State	D.A.						
Lumberton, NJ		1					12/14/18	Tullytown,	PA						
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