NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:50 and 5:16)

Date of Notification (1)
11 / 23 / 11

Name of Building Owner/Operator (2)
Camden County Improvement Authority

Street Address
1909 Route 70 East, Suite 300

City, State, Zip Code
Cherry Hill, NJ 08003

Name of Contact
Jim Lex

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
Former W.T. Grants Complex

Street Address
130-230 White Horse Pike

City (5)
Clementon, NJ

County (6)
Camden

Name of Monitoring Firm Hired by Building Owner (8)
Environmental Resolutions, Inc.

Name of Abatement Contractor (9)
Diamond Huntbach Construction Corporation

Street Address
500 East Luzerne Street

City, State, Zip Code
Philadelphia, PA 19124

Project Manager for Monitoring Firm
Rick Lake

Telephone No.
856-235-7170

Start Date (10)
11 / 29 / 11

Scheduled Completion Date (11)
01 / 15 / 12

Occupancy Status During Abatement (Check only one)
Facility Closed/Vacated During Entire Period of Abatement

Scope of Work (Check all that apply)

Location of Asbestos-Containing Material (ACM)
TO BE ABATED
IN Facility

Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)
Yes ☐ No ☑ N/A ☐

Bldg. #1, Sales Area
Glue Dots ☐
Black & Grey Roofing Membrane ☑

Exterior Parapet Walls

Amount (Specify SF or LF)
2,000 SF

Description of Asbestos Containing Material (ACM)
(i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)

End Use of ACM (14)

Removal ☑
Encapsulate ☑

End Use of ACM (14)

Contact Person
Charles Imbimbo

Service Transport Group, Inc.

City, State
New Castle, DE 19720-

Disposal Date
City, State
Waynesburg, OH 44688

Complied By (Print or Type)
Charles Imbimbo

Title
Project Manager

Signature

Date
11/25/11

* Do not use this form for asbestos licensure exempted activities.
# NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 8:16)

<table>
<thead>
<tr>
<th>Date of Notification (1)</th>
<th>11 / 23 / 11</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agencies Notified</td>
<td>☐ EPA  ☑ DEP  ☑ DCA (NJAC 5:16)  ☑ DCA (NJAC 5:23-8)</td>
</tr>
<tr>
<td>Type Notification</td>
<td>☐ Initial  ☑ Amended  ☑ Amendment #1  ☐ Emergency (including justification)  ☑ Cancellation</td>
</tr>
<tr>
<td>Name of Building Owner/Operator (2)</td>
<td>Camden County Improvement Authority</td>
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<tr>
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<td>1909 Route 70 East, Suite 300</td>
</tr>
<tr>
<td>City, State, Zip Code</td>
<td>Cherry Hill, NJ 08003</td>
</tr>
<tr>
<td>Name of Contact</td>
<td>Jim Lex</td>
</tr>
</tbody>
</table>

### FACILITY INFORMATION

| Name of Facility Where Abatement is Taking Place (3) | Former W.T. Grants Complex |
| Street Address                                      | 130-230 White Horse Pike |
| City (5)                                            | Clementon, NJ |
| County (6)                                          | Camden |
| Name of Monitoring Firm Hired by Building Owner (8) | Environmental Resolutions, Inc. |
| Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) | |
| 1st Floor, Sales Area                               | Floor tile |
| 1st Floor, Sales Area                               | Floor tile |
| 1st Floor, Sales Area                               | Floor tile mastic |
| 1st Floor, Sales Area                               | Pipe joint fitting insulation |
| Name of Registered Waste Hauler Service Transport Group, Inc. | Minerva |
| Name of OSHA Monitor                                | SAME AS ABOVE |

### Scope of Work (Check all that apply)

- ☑ 2,000 sf or >2,500 sf
- ☑ 1,600 sf or >2,500 sf
- ☑ 1,000 sf or >1,500 sf
- ☑ 500 sf or >750 sf
- ☐ Abatement outside of normal facility hours
- ☑ Time of Abatement: AM - PM

### Location of Asbestos-Containing Material (ACM)

- Yes
- No
- N/A

### Description of Asbestos-Containing Material (ACM)

- Thermal systems insulation, surfacing, VAT, or other miscellaneous

### Amount (Specify SF or LF)

- 66,800 SF
- 19,100 SF
- 75,800 SF
- 10 LF

### Abatement Type

- ☑ Full Containment with Negative Pressure
- ☑ Mini-Enclosure
- ☑ Glovebag Procedure
- ☑ Non-Exempted (*) and Non-Friable Procedure

### Name of Registered Landfill

- Minerva

### City, State

- New Castle, DE 19720

### Telephone Number

- 856-235-7170

### Signature

- Charles Imbimbo

---

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**State of New Jersey**

**NOTIFICATION OF ASBESTOS ABATEMENT**

(Pursuant to NJAC 8:60 and 12:1920)

- **Date of Notification:** 11/23/11
- **Name of Building Owner/Operator:** Mike Brady
- **Agent(s) Notified:**
  - EPA
  - DEP
  - DOH
- **Type of Notification:** Initial
- **Street Address:** 136 Haverlock Avenue
- **City, State, Zip Code:** Woodbridge, NJ 07797
- **Name & Phone:** Mike 624-9821

**FACILITY INFORMATION**

- **Facility Where Abatement & Taking Place:**
  - Name: Brady
  - Street Address: 136 Haverlock Avenue
  - City: Woodbridge
  - County: Woodbridge
  - License No: 001309 A
  - Contractor: McCall Contracting Inc.
  - Street Address: 105 Lowell Rd
  - Glen Rock, NJ 07452

- **Asbestos Material(s):**
  - Type: ACM
  - Description: Asbestos Insulation
  - Location: 1st Floor

- **Scheduled Completion Date:** 11/25/11

- **Occupancy Status During Abatement:**
  - Yes

- **Facility Closed/Unoccupied During Entire Period of Abatement:**
  - Yes

- **Other - Describe:**
  - Renovation Description

- **Location of Asbestos-Containing Materials (ACM) TO BE ABATED:**
  - 1st Floor
  - Basements
  - 1st Floor

- **Amount (Specify SF or LF):**
  - 640 SF
  - 150 SF
  - 16 LF

- **Disposal Date:** 11/25/11

- **Cubic Yards of Waste:**
  - 0

- **Name of Registered Waste Hauler:** NUDC Waste Hauler ID No 29661
  - Name of Registered Landfill:
  - Cumberland County Landfill
  - City: Newburg, PA 17242

- **Signature:**
  - R. McDonald
  - Date: 11/33/11

*Do not use this form for asbestos license exempted activities.*
**NOTIFICATION OF ASBESTOS ABATEMENT**

(Pursuant to N.J.A.C. 8:56-7 and 12:120-7)

**Date of Notification (1):** 11-29-11

**Name of Building Owner/Operator (2):** VITO SAUGESS

**Street Address:** 3 SOUTH GATE ST

**City, State, Zip Code:** SPRINGFIELD N. J

**Name of Contact:** VITO SAUGESS

**Telephone Number:**

**Type of Facility (4):**
- [ ] School (K-12)
- [X] Subchapter B (Other than K-12)
- [X] Other (i.e., private & commercial buildings, homes, etc.)

**Square Feet:** 2,400

**# of Floors:** 2

**Bldg. Age:** 70

**Current Use (Prior if being demolished):** Residence

**Name of Facility Where Abatement is Taking Place (3):** PRIVATE

**Street Address:** 46 PARK AV

**City:** SUMMIT

**County:** UNION

**County Code:** (STATE USE ONLY)

**Name of Monitoring Firm hired by Building Owner (8):**

**ASCM No.:** 67

**Name of Abatement Contractor (9):** AZTECH MANAGEMENT, Inc.

**Street Address:** 86 Christopher St.

**City, State, Zip Code:** Montclair, NJ 07042

**Telephone Number:** (973) 744-8800

**License Number:** 00371

**Name of OSHA Monitor:** N/A

**Scheduled Start Date:** 12-5-2011

**Sched. Completion Date:** 12-6-2011

**Occupancy Status During Abatement (Check only one):**
- [X] Facility Closed/Vacated During Entire Period

**Description of Abatement Process:** Outside of Normal Facility Hours - Describes/OHours Describes

**Other Description:** Other Occupancy Describes

**Scope of Work (Check all that apply):**
- [ ] Abatement of asbestos-Containing Material
- [X] Pull Containment with Negative Pressure
- [X] Demolition
- [X] Non-Friable Procedure

**Description of Asbestos-Containing Material (ACM):**
- [ ] Pull Containment with Negative Pressure
- [X] Demolition
- [X] Non-Friable Procedure

**Location of Asbestos-Containing Material (ACM) TO BE ABATED:**

**Location Normally Used:***
- [ ] Scavenger
- [ ] By Maintenance/Custodial Staff

**Amount (Specify SF or LP):** 130 X

**Abatement Type:**

**Name of Registered Waste Hauler:** AZTECH MANAGEMENT, INC.

**Waste Hauler No.:** 17040

**Cubic Yards of Waste:** 1.3

**Name of Registered Landfill:** G.R.O.W.S.

**Disposal Date:** 12-7-2011

**City, State:** Morrisville, PA 19067

**Completed By (Print or Type):** Constantine Vivian

**Title:** President

**Signature:**

**Date:** 11-26-11
**State of New Jersey**
**NOTIFICATION OF ASBESTOS ABATEMENT**
(Pursuant to NJAC 8:60 and 12:120)

**Date of Notification (1):** 11/28/11

**Name of Building Owner/Operator (2):** PINELANDS CONSTRUCTION

**Address:**

<table>
<thead>
<tr>
<th>Agency Notified</th>
<th>Type Notification</th>
<th>Name of Abatement Contractor (9)</th>
</tr>
</thead>
<tbody>
<tr>
<td>DCA:</td>
<td>Initial</td>
<td>Klemco Inc.</td>
</tr>
<tr>
<td></td>
<td>Amended</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Amendment #</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Emergency (including justification)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Cancellation</td>
<td></td>
</tr>
</tbody>
</table>

**Street Address:** 300 77 TN ST

**City, State, Zip Code:** SEA ISLE CITY, N.J., 08243

**Name of Contact:** Paul Edward

**Telephone Number:**

**FACILITY INFORMATION**

<table>
<thead>
<tr>
<th>Field Description</th>
<th>Data</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Facility Where Abatement Is Taking Place (5)</td>
<td>RESIDENCE</td>
</tr>
<tr>
<td>Street Address</td>
<td>33 W, 1TH ST.</td>
</tr>
<tr>
<td>City</td>
<td>OCEAN CITY</td>
</tr>
<tr>
<td>County</td>
<td>CAMELBACK</td>
</tr>
<tr>
<td>Current Use (Prior to being demolished)</td>
<td>VACANT</td>
</tr>
<tr>
<td>Project Manager for Monitoring Firm</td>
<td>N/A</td>
</tr>
<tr>
<td>Scope of Work (Check all that apply)</td>
<td>Demolition</td>
</tr>
</tbody>
</table>

**Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13):**

<table>
<thead>
<tr>
<th>Material</th>
<th>Location</th>
<th>Is Location Used Solely by Maintenance/Custodial Staff? (12)</th>
<th>Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)</th>
<th>Amount (Specify SF or LF)</th>
<th>Abatement Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>SIDING</td>
<td>X</td>
<td>Yes</td>
<td>TRANSITE</td>
<td>3000 LF</td>
<td>X</td>
</tr>
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</table>

**Name of Registered Waste Hauler:** Klemco Inc.

**NDEP Waste Handler ID No:** 17904

**Completion:**

**Completed By:** Joseph Klemm

**Signature:**

**Date:** 11/28/11

*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)  

<table>
<thead>
<tr>
<th>Date of Notification (1)</th>
<th>Name of Building Owner/Operator (2)</th>
</tr>
</thead>
<tbody>
<tr>
<td>November / 28 / 2011</td>
<td>Temple Lutheran Church</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Agencies Notified</th>
<th>Type Notification</th>
</tr>
</thead>
<tbody>
<tr>
<td>[ ] EPA</td>
<td>□ Initial</td>
</tr>
<tr>
<td>[ ] DEP</td>
<td>□ Amended</td>
</tr>
<tr>
<td>[ ] DCA (NJAC 5:16)</td>
<td>□ Emergency (including justification)</td>
</tr>
<tr>
<td>[ ] DCA (NJAC 5:23-6)</td>
<td>□ Cancellation</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Street Address</th>
<th>City, State, Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>5714 Irving Drive</td>
<td>Pennsauken, NJ 08109</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Contact</th>
<th>Matt McDevitt</th>
</tr>
</thead>
</table>

**FACILITY INFORMATION**

<table>
<thead>
<tr>
<th>Name of Facility Where Abatement is Taking Place (3)</th>
<th>Type of Facility (4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Temple Lutheran Church</td>
<td>□ School (K-12)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Square Feet</th>
<th># of Floors</th>
<th>Bldg. Age</th>
</tr>
</thead>
<tbody>
<tr>
<td>25000</td>
<td>2</td>
<td>75</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>County Code (7) (STATE USE ONLY)</th>
<th>Current Use (Prior if being demolished)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Camden</td>
<td>Church</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Monitoring Firm Hired by Building Owner (8)</th>
<th>ASCM No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>ARCADIS, U.S., Inc</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Abatement Contractor (9)</th>
<th>Street Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shade Environmental, LLC</td>
<td>47 S. Lippincott Ave.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>City, State, Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Branchburg, NJ 08876</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>David F. Hlinski</th>
<th>Telephone No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>908-526-1000</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of OSHA Monitor</th>
</tr>
</thead>
<tbody>
<tr>
<td>EMSL</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Street Address</th>
<th>City, State, Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>107 Haddon Ave</td>
<td>Westmont, New Jersey 08108</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Occupancy Status During Abatement (Check only one)</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Facility Closed/Vacated During Entire Period of Abatement</td>
</tr>
<tr>
<td>□ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: AM--PM--PM--AM</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Scope of Work (Check all that apply)</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ 23 sf or 23-ft</td>
</tr>
<tr>
<td>□ 180 sf or 260 sq ft</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)</th>
<th>Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)</th>
<th>Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)</th>
<th>Amount (Specify SF or LF)</th>
<th>Abatement Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community Room</td>
<td>Yes</td>
<td>Acoustical Ceiling Plaster</td>
<td>2100SF</td>
<td>□ Full Containment with Negative Pressure</td>
</tr>
<tr>
<td>Narthex</td>
<td>No</td>
<td>Acoustical Ceiling Plaster</td>
<td>110 SF</td>
<td>□ Mini-Enclosure</td>
</tr>
<tr>
<td>Community Room</td>
<td>No</td>
<td>Asbestos Piping</td>
<td>200 LF</td>
<td>□ Glovebag Procedure</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Registered Waste Hauler</th>
<th>NJDEP Waste Hauler ID No.</th>
<th>Cubic Yards of Waste</th>
<th>Name of Registered Landfill</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jack Robinson Waste</td>
<td>12345</td>
<td>3.5</td>
<td>Grows Landfill</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>City, State</th>
<th>Disposal Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bellmawr, NJ</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Completed By (Print or Type)</th>
<th>Title</th>
<th>Signature</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>William Lynch</td>
<td>Vice President</td>
<td>[Signature]</td>
<td>Nov. 28, 2011</td>
</tr>
</tbody>
</table>

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### State of New Jersey
#### NOTIFICATION OF ASBESTOS ABATEMENT
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<td>□ DHSS</td>
<td>□ Cancellation</td>
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<tr>
<td>□ DCA (NJAC 5:23-8)</td>
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<tr>
<th>Name of Building Owner/Operator (2)</th>
<th>Temple Lutheran Church</th>
<th>Check # 4116</th>
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</thead>
<tbody>
<tr>
<td>Street Address</td>
<td>5714 Irving Drive</td>
<td></td>
</tr>
<tr>
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<td>Pennsauken, NJ 08109</td>
<td></td>
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#### FACILITY INFORMATION

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<th>Temple Lutheran Church</th>
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<tr>
<td>Street Address</td>
<td>5600 North Route 130</td>
</tr>
<tr>
<td>City (5)</td>
<td>Pennsauken</td>
</tr>
<tr>
<td>County (6)</td>
<td>Camden</td>
</tr>
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<td>Name of Monitoring Firm Hired by Building Owner (8)</td>
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<td>Shade Environmental, LLC</td>
</tr>
<tr>
<td>Street Address</td>
<td>47 S. Lippincott Ave.</td>
</tr>
<tr>
<td>City, State, Zip Code</td>
<td>Maple Shade, NJ 08052</td>
</tr>
<tr>
<td>Project Manager for Monitoring Firm</td>
<td>Dalvd F. Hillinski</td>
</tr>
<tr>
<td>Telephone No.</td>
<td>908-526-1000</td>
</tr>
<tr>
<td>Start Date (10)</td>
<td>November 15 2011</td>
</tr>
<tr>
<td>Scheduled Completion Date (11)</td>
<td>December 30 2011</td>
</tr>
<tr>
<td>Occupancy Status During Abatement (Check only one)</td>
<td>Facility Closed/Vacated During Entire Period of Abatement</td>
</tr>
<tr>
<td>□ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: AM-PM/PM-AM</td>
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<td>EMSL</td>
</tr>
<tr>
<td>Street Address</td>
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</tr>
<tr>
<td>City, State, Zip Code</td>
<td>Westmont, New Jersey 08108</td>
</tr>
</tbody>
</table>

#### Scope of Work (Check all that apply)

<table>
<thead>
<tr>
<th>□ ≥ 3 sf or ≥3 ft</th>
<th>□ ≤ 3 sf or ≤260 ft</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Renovation</td>
<td>□ Demolition</td>
</tr>
</tbody>
</table>

#### Location of Asbestos-Containing Material (ACM) TO BE ABATED IN FACILITY

<table>
<thead>
<tr>
<th>Location of Asbestos-Containing Material (ACM)</th>
<th>Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)</th>
<th>Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)</th>
<th>Amount (Specify SF or LF)</th>
<th>Abatement Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community Room</td>
<td>Yes/No/N/A</td>
<td>Acoustical Ceiling Plaster</td>
<td>2100SF</td>
<td></td>
</tr>
<tr>
<td>Narthex</td>
<td>□</td>
<td>Acoustical Ceiling Plaster</td>
<td>110 SF</td>
<td></td>
</tr>
</tbody>
</table>

#### Name of Registered Waste Hauler

<table>
<thead>
<tr>
<th>Name of Registered Waste Hauler</th>
<th>NJDEP Waste Hauler ID No.</th>
<th>Cubic Yards of Waste</th>
<th>Name of Registered Landfill</th>
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</thead>
<tbody>
<tr>
<td>Jack Robinson Waste</td>
<td>17304</td>
<td></td>
<td>Grows Landfill</td>
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#### Completed By (Print or Type)

<table>
<thead>
<tr>
<th>Completed By (Print or Type)</th>
<th>Title</th>
<th>Signature</th>
<th>Date</th>
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<tbody>
<tr>
<td>William Lynch</td>
<td>Vice President</td>
<td>[Signature]</td>
<td>Nov. 7, 2011</td>
</tr>
</tbody>
</table>

*Do not use this form for asbestos license exempted activities.*
**NOTIFICATION OF ASBESTOS ABATEMENT**

**State of New Jersey**

**Pursuant to NJAC 8:60 and 12:1706**

**Name of Building**

Michael Montemurro

**Address**

94 Washington Street

Berkley Heights, N.J. 07922

**Name of Contractor**

Michael Montemurro

**FACILITY INFORMATION**

**Name of Facility**

- asbestos abatement & testing
  - Type of Facility: 'K' Abatement
  - School (K-12)
  - Other (non-building)

**Private Home**

- Address: 94 Washington Street
- City: Berkley Heights
- State: N.J.
- Zip Code: 07922
- Number of Floors: 1

**Union**

- Name of Monitoring Firm: HDR
- Address: 676 Valley Rd, Suite 200, Wayne, N.J. 07470
- Telephone: 973-638-1777
- License No.: 01127

**Schedule Completion Date**

- Start Date: 11/26/2011
- Scheduled Completion Date: 11/27/2011

**Occupancy Status During Abatement**

- Property Closed/Unoccupied During Entire Period of Abatement
- Abatement Performed Outside of Normal Facility Hours
- Other: Deposition

**Location of Asbestos-Containing Material (ACM)

**High Risk**

- In Facility
- Location Normally Used: Education
- CMS: 1000
- ACM: 4000

**Low Risk**

- In Facility
- Location Normally Used: Education
- CMS: 2000
- ACM: 3000

**Abatement Type**

- Demolition
- Non-destructive
- Non-destructible

**Name of Registered Wholesaler**

- HDR Waste Inc. T.B.P.E., Inc.
- Address: 202-21 Waynes Road, Suite 34A, Fair Lawn, N.J. 07410

**Name of Owner**

- N.J. Owner
- Address: 94 Washington Street, Berkley Heights, N.J. 07922

**Date**

- 11/26/2011
**NOTIFICATION OF ASBESTOS ABATEMENT**

**State of New Jersey**

(Pursuant to NJAC 8:60-7 and 12:120-7)

**Date of Notification (1):** 11/21/11

**Name of Building Owner/Operator (2):** Laura Wolfe

**Street Address:** 37 Highland Road

**City, State, Zip Code:** Bloomfield, NJ 07003

**Name of Contact:** Laura Wolfe

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**FACILITY INFORMATION**

**Name of Facility Where Abatement is Taking Place (3):** Private

**Street Address:** 37 Highland Road

**City:** Bloomfield

**County:** Essex

**Type of Facility (4):** [ ] School (K-12)  [ ] Subchapter B (Other than K-12)  [ ] Other (i.e., private & commercial buildings, homes, etc.)

**Square Feet:** 1700

**# of Floors:** 2

**Bldg. Age:** 72

**Current Use (Prior if being demolished):** Residence

**Name of Abatement Contractor (9):** AZTECH MANAGEMENT, INC.

**Street Address:** 86 Christopher St.

**City, State, Zip Code:** Montclair, NJ 07042

**Telephone Number:** (973) 744-8800

**License Number:** 00371

**Name of OSHA Monitor:** N/A

**Street Address:**

**City, State, Zip Code:**

---

**Scheduled Start Date (10):** 12/1/11

**Scheduled Completion Date (11):** 12/2/11

**Month:** 12  **Day:** 1  **Year:** 2011

**Occupancy Status During Abatement (Check only one):**

[ ] Abatement Performed Outside of Normal Facility Hours  - Describe: N/A

[ ] Other - Describe: N/A

---

**Scope of Work (Check all that apply):**

[X] 23 sf or > 31 ft

[X] Renovation

[ ] Demolition

[ ] Full Containment with Negative Pressure

[ ] Mini-Enclosure

[ ] Glovebox Procedure

[ ] Non-Friable Procedure

---

**Location of Asbestos-Containing Material (ACM) TO BE ABATED IN FACILITY (13):**

**Is Location Normally Used:** Yes

**Location: 50%**  **Staff (12):**

**Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAC, or other miscellaneous):** Pipe Insulation

**Amount (Specify SF or LP):** 140 ft

**Abatement Type:** X

---

**Name of Registered Waste Hauler:** AZTECH MANAGEMENT, INC.

**Waste Hauler ID No.:** 17040

**Cubic Yards of Waste:** 1.5

**Name of Registered Landfill:** G.R.O.W.S.

**City, State:** Morrisville, PA 19067

**Disposition Date:** 12/5/11

**Completed By (Print or Type):** Constantine Vivian

**Title:** President

**Signature:**

**Date:** 11/21/11
**State of New Jersey**  
**NOTIFICATION OF ASBESTOS ABATEMENT**  
(Pursuant to NJAC 8:60-7 and 12:120-7)

**Date of Notification (1)**  
11/29/11

**Agencies Notified**  
- [X] EPA  
- [ ] DEP  
- X DOL  
- X DOH  
- [ ] DOA  
- [X] EMERGENCY NOTIFICATION

**Name of Building Owner/Operator (2)**  
VERTIS COMMUNICATIONS

**Address**  
250 WEST DRATHT STREET  
BALTIMORE, MARYLAND 21201

**Name of Contact**  
BRIAN SKELLY  
Telephone Number

**Name of Facility Where Abatement is Taking Place (3)**  
CRAIG ADHESIVES & COATINGS

**Street Address**  
72-82 WHEELER POINT ROAD

**City (5)**  
NEWARK  
**County (6)**  
NEWARK  
**County Code (7)**  
[STATE USE ONLY]

**Name of Monitoring Firm Hired by Building Owner (8)**  
HILLMANN ENVIRONMENTAL

**ASCM No.**  
17

**Type of Facility (4)**  
COMMERICAL

**Name of Abatement Contractor (9)**  
PAR ENVIRONMENTAL CORPORATION

**Street Address**  
313 SPOOK ROCK ROAD

**City, State, Zip Code**  
SUFFERN, NEW YORK 10901

**Project Manager for Monitoring Firm**  
MIKE NEHLSON

**Telephone Number**  
908-686-7600

**License Number**  
845-749-7500

**Expected State Date (10)**  
12/1/11

**Sched. Completion Date (11)**  
1/1/12

**Occupancy Status During Abatement (Check only one):**  
- [X] Facility Closed/Vacated During Entire Period of Abatement
- Abatement Performed Outside of Normal Facility Hours - Describe:
  - [X] MONDAY - FRIDAY 7AM-3:30 PM

**Scope of Work (Check all that apply):**  
- [X] Demolition
- [X] Renovation
- Full Containment with Negative Pressure
- Mini-Enclosure
- Glovebag Procedure
- Non-Friable Procedure

**Location of Asbestos-containing Material (ACM) TO BE ABATED in Facility (13):**

<table>
<thead>
<tr>
<th>Location</th>
<th>Description</th>
<th>Amount</th>
<th>Abatement Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>2ND FLOOR MAIL ROOM, LABORATORY</td>
<td>VAT</td>
<td>1000 SF</td>
<td>X</td>
</tr>
<tr>
<td>ROOF</td>
<td>ROOFING/FLASHING</td>
<td>2844 SF</td>
<td>X</td>
</tr>
<tr>
<td>2ND FLOOR RESTROOMS</td>
<td>CEILING TILE MASTIC</td>
<td>120 SF</td>
<td></td>
</tr>
<tr>
<td>2ND FLOOR LABORATORY</td>
<td>SHEETROCK COMPOUND</td>
<td>2584 SF</td>
<td>X</td>
</tr>
</tbody>
</table>

**Location normally used solely by Maint/Custodial Staff (12):**  
Yes: No N/A

**Name of Registered Waste Hauler**  
DJM TRANSPORT, LLC

**Hauler ID No.**  
26981

**Cubic Yards of Waste**  
120

**Name of Registered Landfill**  
GROWS LANDFILL

**City, State**  
KEARN, NEW JERSEY

**Disposal Date**  
11/29/11

**Completed by (Print or Type):**  
BENJAMIN SANCHEZ  
**Title:**  
DIRECTOR OF OPERATIONS

**Signature:**  
11/29/11