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

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Date of Notification (1) 09/27/2012	09/27/2012							entropy of a	·> ~ / / / / / / - / -	# - madSalvinde - PP	or ingrava				
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Emergency (in justification)	ncluding	ı	Name o	f Contact		-	T C	111 111	Tele	phone N	Numbe	er	111	111	
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			FAC	LITY INFO	DRMATI	ON	1 1	:1	-		***		- Long	#	
Name of Facility Where Abatement is Taking	Place (3)					Туре	of Facility (4	DECT					19	
Deltech Resin Co.								School (K-12) two	S CONTI ERSTRO	101 8		1	f.	
Street Address		377	17 17 17 18 1				IT S	Subchapter	Othe	r than K	-12)			1:	
49 Rutherford Street						v.	×	Other (i.e. pr	ivate &	comme	rcial b	uiid	ings,	Home	es,
City (5)								etc.) re Feet	# of	Floors				ge	
Newark							1340		3)+		
County (6)		T	County	Code (7)			Curre	nt Use (Prio	r if beir	na demo	lished)			-
Essex				USE ONLY,			Fact			.5		,			
Name of Monitoring Firm Hired by Building O	wner (8)		LASCI	/ No		Name		tement Cont	ractor	(9)				-	
Envirovision Consultants Inc.	(0)		0079					struction 8			n Inc	_			
Street Address	-						Addres								
20-21 Wagaraw Rd. Bldg. 34 A							Andreas and the same	46 Suite	3D						
City, State, Zip Code				-				p Code							-
Fair Lawn NJ 07410								07512						*	
Project Manager for Monitoring Firm			Telepho	no No			hone No			License	. No				•
Fred Larson				36 9145			256 70			00666					
	Cabadula	-d C	H-100-3-3-3-3	Date (11)		2004/2004/2		A Monitor							<u>.</u>
	10/14/1		npieuon	Date (11)		1		struction 8	Res	toratio	n Inc				
Occupancy Status During Abatement (Check							Addres		. 1103	toration	11110				
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Facility Closed/Vacated During Entire Po Abatement Performed Outside of Norma	eriod of A	bater	nent												
Other – Describe: Fri 4pm-11pm Sat 8ar	n-5pm Si	un 8ar	թ - 1pm					p Code J 07512							
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City, State				*****		sal Date		City, State			-				
Totowa NJ					10/15			Morrisvi							
Completed by .	Title				5	Signature	4/		1		Date				
Goran Kojic	Pres	ident				700	com to	hoy	ne	09/2	7/1	2			

a of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60 and 12:120) D&S Proj. #: MS 12-342 Name of Building Owner/Operator (2) Date of Notification (1) 10 19 1/12 16 1/11 12 1 ROBERT HEFFERNEN Agencies Notified Type Notification Street Address X Initial **EPA** 11-A BANCROFT PLACE Amended DEP City, State, Zip Code Amendment #: X DOL FAIR LAWN, NJ 07410 Emergency (including DOH. Name of Contact Telephone Number justification) DCA ROBERT HEFFERNEN Cancellation **FACILITY INFORMATION** Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) ROBERT HEFFERNEN Subchapter 8 (Other than K-12) Other (Private/Commercial Street Address Bldgs./Homes, etc. 11-A BANCROFT PLACE # of Floors Bldg. Age Square Feet City (5) County (6) County Code (7) (State use only) Current Use (Prior if being demolished) BERGEN FAIR LAWN Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. D & S RESTORATION, INC. Street Address Street Address 20 California Ave. City, State, Zip Code City, State, Zip Code Paterson, NJ 07503 Telephone Number License Number Project Manager for Monitoring Firm Phone Number 973-345-8020 01169 Name of OSHA Monitor Sched. Completion Date (11) Start Date (10) D & S Restoration, Inc. Street Address 10/16/12 10/26/12 Occupancy Status During Abatement (Check only one) 20 California Avenue Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Other-Describe: NORMAL HOURS Paterson, NJ 07503 Full Containment w/negative pressure Scope of Work (check all that apply) Mini-enclosure \times >3 sf or >3 If X Renovation Glovebag procedure >160 sf or ≥260 lf Demolition Non-Exempted (*) and Non-friable procedure E Is location normally used solely Location of e n by maintenance/custodial Amount Description of asbestos-containing asbestos-containing m p C staff(12) (Specify SF or material (acm) to be material (ACM) C 0 a a LF) abated in facility (13) Yes N/A V No p PIPE INSULATION 89 L FT X Basement BARE HEATING PIPES (reclean) 30 L FT Basement Cubic Yards of Waste Name of Registered Landfill NJDEP Hauler ID# Registered Waste Hauler TULLYTOWN, RESOURCE RECOVERY D & S RESTORATION, INC. 13506 1 yd Disposal Date City, State City, State 10/17/12 TULLYTOWN, PA PATERSON, NJ 07503 Signature Date Completed by (Print or Type) Title 09/26/12 PRESIDENT **BOGDAN JOLDZIC** Do not use this form for asbestos licensure exempted activities.

ASR-41

2967

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

RECEIVED 2017-2 AM 3 87

Date of Notification (1) 9-27-12	-		T	Name o	of Building	g Owner/Operator Energy Tr	enton, L	.P. 458	Esto	Si	20.	
Agency Notified	Type Notification	-			Address	31		6	LICE	N	201	¥7
			1.	3.20	Sout	h Warren	Street			.,4,	MI	G
XEPA	□ Initial ☑ Amended 1		-	City, SI	tate, Zip C	Code						
DOL	Amendment #			Tre	nton	, NJ 0860)8					
Ж рон	☐ Emergency (included)	ling	-	Name	of Contac	t		Telephone Nun	nber			
XDCA	justification) Cancellation			Sco	tt Ma	atthews						
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lame of Facility Where A	batement is Taking P	lace (3)					Type of Facility	(4)				
NJ Dept of Labo	2001년 (1861년) 1일		elopi	ment-	Pipe 7	funnel	☐ School (K-12	21				
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ity (5)				200000000000000000000000000000000000000	prothocenth 250 Se		Square Feet	# of Floors	Bldg.	700		
renton							7500	3	+/-	10	0	
ounty (6)			T	County	Code (7)	(STATE USE	Current Use (P	rior if being demol	lished)			-
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ame of Monitoring Firm	Hired by Building Own	ner /	ASCM	No.		Name of Abatem	nent Contractor (9					
Pars Envir								ental Ser	cvice	s,	I	no
Street Address				-	1/1	Street Address				-		
500 Horizon	Drive, Sui	te 5	540				aley Str	eet				
City, State, Zip Code						City, State, Zip C						
Robbinsvill	e, NJ 08691						phia, PA	19137				
roject Manager for Mon	Itoring Firm	Te	lephor	ne No.		Telephone No.		License No.				_
Bernie Brys		2.	15-1	755-	-2305	215-533-	-5155	00848				
tart Date (10)	Scheduled (Completi	ion Da	te (11)		Name of OSHA	Monitor					
10-1-12	10-5-1		me-shiriday				vironment	al	6			
Occupancy Status During	Abatement (Check o	nly one)				Street Address		- Company		-		
						500 Hori	zon Driv	re, Suite	540			
I Facility Closed/Vacate I Abatement Performed I Other – Describe:	d During Entire Period Outside of Normal Fa	of Abate	ement urs			City, State, Zip C Robinsvi	Code					
Scope of Work (Check at	that apply) *aha	teme	nt	nri	or to		10500					
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4 = 100 St Ot = 200 II		- /////						d Non-Friable Pro	cedure			
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Service Tran		ID	No.			Waste	A & L S	alvage				
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City, State						Disposal Date	City, State	011				
Morrisville						\supset	Libson,	OH .				
	Title			- 57		Signature ,	- 1		Date			
Completed by Jennifer Niv	ven Dir. o	f On	era	itio	ng l	11 1/1	1//	7/50	9-27	7 – 1	12	

NOTIFICATION OF ASBESTOS ABATEMENT Check# 1486 (Pursuant to NJAC 8:60 and 5:16) RECEIVED Date of Notification (1) Name of Building Owner/Operator (2) 09 27 / 12 2012 OCT -2 AM 5: 18 Bill Dantzler Type Notification Agencies Notified Street Address ☑ EPA ✓ Initial 84 Liewellyn Road **⊠** DOLWD Amended City, State, Zip Code Amendment # X DHSS Montclair, NJ 07042 Emergency (including □ DCA (NJAC 5:23-8) justification) Name of Contact Telephone Number ☐ Cancellation Bill Dantzler **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Private home School (K-12) Street Address Subchapter 8 (Othe: than K-12) Other (i.e., private and commercial buildings.) 84 Liewellyn Road homes, etc.) City (5) Square Feet # of Floors Bldg. Age Montclair, NJ 07042 County (6) County Code (7) (STATE USE ONLY) | Current Use (Prior if being demolished) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Gr Tech LLC Street Address Street Address 576 Valley Rd #283 City, State, Zip Code City, State, Zip Code Wayne, NJ 07470 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 973-638-1777 01127 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 10 / 06 / 12 10 / 14 / 12 Envirovision Consultants, Inc Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 20-21 Wagaraw Road, Bldg .# 34A Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: ____AM-____PM/ PM____AM Fair Lawn, NJ 07410 Scope of Work (Check all that apply) Full Containment with Negative Fressure >3 sf or >3 If Renovation Mini-Enclosure ⊠ ≥ 160 sf or ≥260 lf Demolition Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Used Solely by Asbestos-Containing Material (ACM) Repair Remova Encapsulate Asbestos Containing Material (ACM) Enclosure Amount Maintenance/ TO BE ABATED (i.e., thermal systems insulation, Custodial Staff? (Specify IN Facility surfacing, VAT, or SIF or LF) (12)(13)other miscellaneous) Yes No N/A Outside siding X Transite Siding 3,000 SF П Name of Registered Waste Hauler NUDEP Waste Hauler ID No. | Cubic Yards of Waste | Name of Registered Landfill Gr Tech LLC 0033785 TBD T.R.R.F. Inc City, State Disposal Date City, State Wayne, NJ 07470 TBD Tullytown, PA Completed By (Print or Type) Title Signature, Date

State of New Jersey

09/27/2012

Owner

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Date of Notification (1) September 25, 2012		1		Building Onael Kost			(2)	[] e	6dck	# 80041	2	الك		;
Agencies Notified Type Notification		1700	Street Ac	ddress and Road	4					s courtoi	- R	8	1	
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	cluding	1	Name of	Contact	e 5					ephone Nu	mber	WI	16	-
Cancellation				LITY INFO	RMATIC)N					- 11-0-			
Name of Facility Where Abatement is Taking F Residence	Place (3))	-				-	of Facility (4 school (K-1						
Street Address 130 Pond Road							S X	Subchapter Other (i.e. p	8 (Othe			dings,	home	es,
City (5) Freehold				e e,	1200		Square 2100	e Feet	# of	Floors	7	ldg. A O	ge	
County (6) Monmouth			County C	Code (7) ISE ONLY)		_		nt Use (Prid dence	or if bei	ng demolis	hed)			
Name of Monitoring Firm Hired by Building Ow MDG Environmental	ner (8)		ASCM	l No.				ement Con rironmen						
Street Address 1000 Maplewood Drive Suite 207				- 14		Street 47 S.		s ncott Ave	9					
City, State, Zip Code Maple Shade, NJ 08052						City, St Maple		code de, NJ (8052					
Project Manager for Monitoring Firm Tony Esposito			Telephor 856-75	ne No. 55-9300		Teleph 856-7	one No 755-00			License N 00842	No.	- Septiment		
	chedule		C (1000)	Date (11)		Name EMS		A Monitor						
Occupancy Status During Abatement (Check	Only On	e)				Street A		s on Ave					3/6526	
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Normal Other – Describe:	riod of A Facility	Nbatem Hours	ent	v.	_	City, S	tate, Zip		ersev	08108				
Scope of Work (Check All That Apply)	11000010													
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						×	Non	-Exempted	(*) an	d Non-Fria	ble Pro	cedur		
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Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	d Solel intenar todial S (12)	ice/				s insula T, or		(5	mount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A											
Basement			XXX		Pipe	Insula	tion		30	00 LF	xxx			
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					201	_	1000000							
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City, State Mount Holly, New Jersey 08060						al Date er 1, 2		City, State Tullytov		٨.	a-sa-a-			m-93
Completed by William Lynch	Title Owne	er			Si	ignature	· _ ·	9.L	en		ate Sept. 2	5, 20)12	

CONTRACTOR STREET, STORY

Print Form

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Date of Notification (1) September 25, 2012		Mic	of Building Owner chael Kostec		ASBESTO	Sheck #5084	5/5/	2012	2	
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DOH Justification) Cancellation			of Contact Dunham		***	Telephone Ni	ımhor		٠,	
Name of Facility Whore Abatement is Takin	a Place (3)	FAC	ILITY INFORMA		of Facility	//				_
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Sinct Address 1000 Maplewood Drive Suite 207				Street Address		ra ·				
City Sinte / p Code Maple Shade, NJ 08052				City. State. 2 Maple Sh		08052				\neg
Project Manager for Munitoring Firm Tony Esposito	-	Telepho 856-7	one No 55-9300	Telephone N 856-755-0	lo	00842	Va.			\neg
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tily State fount Holly New Jersey 08060		1		osal Date ober 1, 2012	City State Tullytov					•
Sompleted by Villiam Lynch	Title Owner			Signature		I Da	te ept. 2	5, 20	17	\exists

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^{*} Do not use this form for asbastos trochsure exempted activities

State of New Jercey
NOTIFICATION OF ASBESTOS ABATEMENT

Date of Notificial Property of Notificial Pro	7				(Pursi	uant to NJA	C 8:60 and 12:1	20)	U U OCT			_	<u>-//</u>
Asencies Molified Sepa)	9-21-1	12				ding Owner/Operat	varic de	entlot Fran	omic	291	lous	13
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DOH		☐ Emergence	nt#_ y (inch	ding				15 0	07102	<i>VI</i> -17	_	_	_
Name of Facility Where Abalement is Taking Piece (3) FOR MER ORGIS SITE BLOG JK Stronk Address Stronk Address Stronk Address Stronk Address Stronk Address Cay (5) Newarlk County (6) County		☐ POH ☐ justification	on)	×100-10400 - 00	N	ame of Cont	act o		Tolophona Nur	nber	_		_
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Sircol Address Source Foot Source Foo	1	Name of Facility Where Abatement is Ta	king P	lace (3)	PACILITY II	WE CRIMATION	Type of Fec	lity (4)				
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County (8) S. S								Square Foot	# of Floors	1			<u></u>
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Street Address AO - 21 WAGARAW Rd. Street Address AO - 21 WAGARAW Rd. City State, zip Codo FA 1R LAWN NJ Project Manager for Monitoring Firm Grulewap Movales 11-12 Scheduled Complotion Date (11) Scheduled Complotion Date (11) Abalement Performed Outside of Normal Facility Horus City Status	1		o Own	er			Nome of Abates			+4	eil	17	_
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City, State, Zip Code FAIR AWN NJ City State, Zip Code Key port Tolephone No.			0.		0	٨	Street Address						<u> </u>
FAIR LAWN Project Manager for Maniforing Firm Project Manager Project Manager Project Manager Project Manager Name of Rogistered Waste Hauter R & B Debris Project Manager Project Mana	H		15 A	W	_/\	d.			25 07.			_	
Guileme Morales 973-636-945 752-739-12eo 01095 Start Date (**IT) Scheduled Completion Date (11) Name of OSHA Monitor	L		N	J					No	0	77	3 :	5
Start Date "This procedure Completion Date (11) Occupancy Status June Localization Date (11) Other Facility Closed Vacated During Entire Period of Abatement Other Doscribe: Store Address 3.2.2 13 eers St. City, State, Zip Code Long brunch ND 01095 Store Address 3.2.2 13 eers St. City, State, Zip Code Long brunch ND 01095 State of 23 If Date of 280 If December of 280 If	ľ		_	- 3	10.50			20 124					
Cocyancy Status	1	- Parkers							010	95	_	_	_
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Abatement Performed Outside of Normal Fecility Hours City, State, Zip Code Long branch NU 01095				of Aba	2	-		_	-Cı		_		
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MAYNES PORT N.T. WAYNES burg OH 44688 Sompleted By John C. Mucha Project Manager Signature 11 11	City					-	Disposal Date		a CATERION	186	2		ᅱ
John C. Mucha Project Manager Signature Date 9/21/12	_		J.						Esburg. C) <u>H</u>	40	168	8
* Do not use this form for asbestos licensure exempted activities	ion		Pro	jec	+ /	langer	Signature	U:	Date 9	21	11	2	
	3-41	* Do	not us	o this	form f	or asbasios	licgnsure exempt	ed activities.	/	4			Η,

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.IAC 8:50 and 12:120)

CHECK # 19493

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Date of Notification (1) 09-20-12(1)09-27-12					f Building (dler Elev							E ((, E	1	W	E	n	
Agencies Notified	Type Notification			Street A 20 Wh	ddress ippany F	Road			8			00	`T -	2 '	2012			
	Initial Amended Amendment			City, Sta Morris	ate, Zip Co town	de			i	1	1	00	, 1		:0!2	The same of the sa	had f	
☑ DOH DCA	Emergency (i justification) Cancellation	ncluding			f Contact I Raffert	y	-			Ĺ	4	Å\$ek	ephone	Nim	har &			
					LITY INFO		ON		-			Semilar.	Complete States	out a contract				j
Name of Facility Where Ab	patement is Taking	Place (3)						Ty	_		ility (4))					·	at_vi
Street Address 20 Whippany Road					7-122			×		Subch	apter 8	(Othe	er than & comm	K-12 nercia) I build	lings,	home	es,
City (5) Morristown								S		re Fee	t	# of	Floors			ldg. A O yrs		
County (6) Morris					Code (7) USE ONLY)					nt Use		if bei	ng dem	olish	ed)			
Name of Monitoring Firm F TBD	lired by Building C	wner (8)		ASCN	I No.						t Contr							
Street Address							Street 200				et							
City, State, Zip Code							City, S Carls											
Project Manager for Monito	oring Firm	3*		Telepho	ne No.		Teleph 201-						Licens 0075					
Start Date (10) 10-01-12(1)Job on H	old	Scheduled 10-31-12		pletion	Date (11)		Name Ever				nitor							
Occupancy Status During /	Abatement (Check	Only One)				Street	Ad	dres	ss								
Facility Closed/Vacate Abatement Performed Other – Describe: Are	d Outside of Norm	eriod of Ab al Facility F	atem Joyrs	ent			City, S	State	e, Zi	p Cod						-20		
							Long	g Is	sian	d Cit	y, NY	111	01					
Scope of Work (Check All 2 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	гпат Арріу)		nova molit				×	3	Min Glo	i-Encl	osure Proce	dure	Negati				9	
		le I	ocati	on								7				2010 55	ement	
Location o	of	No	rmal	ly		De	scription	n of								Ту	ре	
Asbestos-Containing M <u>TO BE ABAT</u> In Facility (13)	Sole tenar dial S (12)			os Cont thermal surfa	aining N systems cing, VA niscellar	Mate s in AT, o	erial Isula or)	(S	mount Specify or LF)		Removal	Repair	Encapsulate	Enclosure		
2nd Floor: Wes	st Wing			x		Pip	e Fittin	nas	s			1:	20LF		x			
						, ,,		.90										
Name of Registered Waste	Hauler		999	JDEP W	1-1-1-1 VI	Cubic				Nam	e of R	egiste	red La	ndfill			3,000	
ATC, Inc. / TriState Tr	ransfer (50071)		auler ID 4310	NO.	of Was	ste sal Date)) /		erva State	Ente	rprise	s	E			
Shirley, NY / Bronx, N	Υ					TBD	Jai Dale	/	/	Wa	ynest	Surg	OH 4	468	8			
Completed by John Tancredi .		t Ma	nager		S	ignature	e		/	de	U		Dat 09-	e -27-1	12			

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

g a'			FICATION	OF AS	BESTOS A	ABATE		г.					<i>,</i>	24	The state of the s	
Date of Notification (1) 09/27/12					g Owner/C						6	E		×7(0/	
Agencies Notified Type Notification EPA Initial			Street A	ddress	ay, Suite		į.	1			OCT	п	2 2	012	1	1
DEP Amended X DOL Amendmen				ate, Zip (/ City, I	Code NJ 0730	4		1		L	Mark of the Parish of					- See
■ DOH justification DCA Cancellation				f Contac as Wilk				<u>' [</u>	· 1		lephon	e Nur	nber	UL 3		
Name of Facility Where Abatement is Takir	g Place (3)	FAC	LITY IN	FORMATI	ON	Type	e of Fac		- 44.00	e Waliotzapa	TOP LYSE	leterrary v. h	e e e cons	isto, an	
The Tower Building								School					Ten about	es de ser serve y	tuette sandra	Market of the
Street Address 4 Beacon Way							×	Subchi Other (etc.)						dings	, hom	ies,
City (5) Jersey City							3/1/2010	are Fee ,000 +		# c	f Floor	S	199	3ldg. <i>F</i> 50+	\ge	
County (6) Hudson County			(STATE	Code (7) USE ONL				ent Use	057		17202500	nolish	ed)			
Name of Monitoring Firm Hired by Building J&S Environmental Laboratories, I			ASCN	/I No.		Pyra	mid (atemen Contra								
Street Address 2333 Route 22 West							Sarg	eant A		ue				82		
City, State, Zip Code Union, NJ 07081								Zip Cod J 0701		4						
Project Manager for Monitoring Firm Sherill Gelsomino			Telephoi 908-20	6-0073		Teleph 973-6					Licer 0109	ise No 99) .			
Start Date (10) 10/08/12	01/31/	13	mpletion I	Date (11)			HA Mor		Labo	ratori	es Ll	LC			
Occupancy Status During Abatement (Chec			333			Street 2333		ess ite 22	Mas	+						
Facility Closed/Vacated During Entire Abatement Performed Outside of Nom Other – Describe:	Period of A nal Facility	Abater Hour	ment s	11		City, S	tate, Z	Zip Code J 0708	В							
Scope of Work (Check All That Apply)						011101	., .		•							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova emoli				×	Mi	II Conta ni-Enclo ovebag	osure Proce	edure						
	lo.	Loon	tion			×	1 No	n-Exen	npted	(*) an	d Non-	Friable	e Pro	cedure Abate		
Location of Asbestos-Containing Material (ACM)	l N	Locat Iorma d Sole	lly	Aaba		cription		1/4014							ре	\mathbf{H}
TO BE ABATED In Facility (13)	1 222	intena odial (12)	Staff?		stos Conta thermal s surfaci other m	systems ing, VA	insul T, or	ation,		(5	mount Specify or LF)		Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A				,						'al	7	late	Ге
" SEE PAGE 2 "																
Name of Registered Waste Hauler			JDEP W		Cubic Y	'ards		Name	of R	egiste	red Lar	ndfill				
Pyramid Contracting Corp.			lauler ID I 2613	No.	of Wast					/.S.,	lnc.	W-32 D				
City, State Clifton, New Jersey					Disposa	al Date	7	City,		9 , P	ennsy	lvani	a			
Completed by Dimo Golcev	Title Gene	ral M	langer		Sig	gnature	N	16	1	W.	1	Date 09/	27/1	2		
ASB-41 (R-06-08)					0.	Do not	t use t	historm	for a	sbest	os licer	sure	exem	pted a	activit	ies.

State of New Jersey Notification of Asbestos Abatement Continuation Sheet

					Page Z of ≥	-	J []	<u> </u>	15
Location of	1 22	Locat		Philips in the Laboratory	00	T -	Abat 2 T	ement	The second second
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	d Sole intena todial (12)	nce/ Staff:	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amounts (Specify	S Removal	(GMT)	Encapsulate	Enclosure
, E	Yes	No	N/A						
Floors 2,5,8,9,10,11,12,13,& 14		X		Linoleum	4,500 SF	X			
Permiter Risers, Ceiling Plenum on the 14th and 1st Floors, Throughout Basement Levels		x		Pipe Insulation	12,000 LF	х			
Floors B-1 and B-2		Х		ACM Debris	100 CF	X			
1st Floor South Stairwell Lobby and Southwest Room		х		VAT	600 SF	Х			
Southwest Hallway		Χ		ACM Debris	50 CF	Х			
2nd Floor Hallways		Χ		VAT	800 SF	X			
2nd Floor South Hallway Room & 3rd Floor Hallways		x		VAT	1,060 SF	Х			
Windows Throughout		Χ		Window Caulk and Glazing	741 EA	Х			
1st Floor South Stairwell Lobby		Χ		Fire Doors	2 EA	Χ			
1st Floor Main Lobby Ceiling and Fallen Debris on Ground		X		Textured Accoustical Plaster Outer Layer	550 SF	Х			
15th Floor North Side, associated with HVAC system electrical box		х		Electrical Wire Insulation	30 LF	Х			
Floor B-3		Х		Tank Insulation	85 SF	Х			
	\exists								
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	#		\pm					1	
	\dashv		\dashv						
	\dashv	\exists						\pm	

REMEMBER - MAIL IN HARD COPY State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT BY ASCM FIRM (Pursuant to N.J.A.C. 5:23-8.11(c)3.viii.)

OCT - 2 2012

ate of Notification (1) 09/27/	2012	Name of Buildin	g Owner / Operator (2) Kennedy Memorial	espital & L.M.	LE DESIGNATION OF THE PERSON O	AS CONTROL &
Type Notif	fication		pel Avenue West	A BAPPI	40777	essential, a sit .
An An	tial Notification nended Notification	City, State & Zip Cherry Hill	1	NJ 080	002 Telepi	none Number
□ Ca	ancellation	Name of Contac Sharon Pe	a leres			_
<u> </u>		FACILITY II	NFORMATION			
lame of Facility Where Abate Kennedy Memorial Hospit	ement is Taking Plac al	ce (3)	Type of Facility (4	i)) 8 (Other than K-12)		65
treet Address		•	Sunchapter of	(Other than 1 12)	er-cutteran and	
2201 Chapel Avenue Wes	st ·		Square Feet	# of Floors	Bldg.	
City (5)	County (6)	County Code (7)	250,000	5 or if being demolishe		
Cherry Hill	NJ .	Canden	Saled Use			
Name of Monitoring Firm Hire Health & Safety Services,	ed by Building Owne	er (8) ASCM 117	Resource Man	ent Contractor (9) agement Group, L	LC	
Street Address			Street Address 2115 Hamilton	Ave,Ste 202		
318 12th Street Dity, State & Zip Code	NJ 0	8037	City, State & Zip Trenton	Code	. 0	8619
Hammonton Project Manager for Monitoria	,,,,	Telephone Number		201	ense Numb	5
Jim Proctor Scheduled Start Date (10)	. 1	(609) 704-8850 pletion Date (11)	Name of OSHA			+
9 28 2012	9/20	1112	NA NA			_
Occupancy Status During Ab	patement (Check all	that apply) eriod of Abatement	Street Address NA			
Abatement Performe	ed Outside of Norma	I Hours - 7am to 3	Oity, State & Zip	Code		
Describe: 6:00PM t	to 2:00AM					
Facility Occupied Du Scope of Work (Check all the						
Full Containment			Description o	e Bag	er only	Enter only
Location o Asbestos-Conto	aining .	Is Location Normally Used Solely by	Ashestos-Contai Material (ACN	ning Square	e Footage	Lineal Footage
Material (AC TO BE ABAT		Maintenance or	(i.e., thermal sys)	tems	.	
in Facility (13)		Custodial Staff? (12)	insulation, surfacing or other miscelland	eous)		
		OYes ONo	Vester ceiling		20 sf	
Respiratory Supply Roor	[]	OYes ONO	700737 7771113		- sf	
	A	OYes ONo			sf sf	
-		OYes ONo			sf	
		OYes ONo			sf	-
		O Yes O No			sf	
		OYes ONO			sf.	- F4-
TOTALS		J. 55 J. 60		167,37	SF SF	1 0000
Completed By (Print or Typ	1		Signature	1/2	1	Date 09/27/12
Brian Haney	Presid	ear(1	> 1/2-	#	

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT BY ASCM FIRM (Pursuant to N.J.A.C. 5:23-8.11(c)3.viii.) OCT

OCT - 2 2012

		1	(5	0 /0	\	-			-
Date of Notification (1) 09/27/2012	2	Name o	of Building K	Owner / C Cennedy M	perator (2) Memorial Ho	spital	ASSESTOS C	CONTROL &	
Type Notification	on		Address 201 Chap	oel Avenu	e West	- Anneces	e e the estació medilo exula		Canada S.
	otification	100000000000000000000000000000000000000	ate & Zip	Code			22222	100	
the state of the s	ed Notification		erry Hill	1		NJ	08002	Telephone	Number
Cancell	ation		of Contact				. '	relephone	Number
			aron Pete		1011				
		FAC	ILITY IN	FORMAT					
Name of Facility Where Abatement	is Taking Plac	e (3)			of Facility (4) school (K-12)				
Kennedy Memorial Hospital					Subchapter 8	(Other than	K-12)		
Street Address					abonapto. o	(~	1.15.15.15.15.7	15900 - 6000	
2201 Chapel Avenue West				Squar	e Feet	# of Floor	rs B	Bldg. Age	- 34
City (5)	ounty (6)	County C	ode (7)		0000	5		52	
. 87	11	Cand	len		nt Use (Prior ect Use	if beina de	molished)		
Name of Monitoring Firm Hired by Health & Safety Services, LLC	Building Owner	(8)	ASCM N 117	o. Name Reso	of Abatemer ource Manag	nt Contract gement Gr	or (9) oup, LLC	13	TO VOICE OF THE PROPERTY OF TH
Street Address 318 12th Street				Street	t Address 5 Hamilton A				
City, State & Zip Code		2007			State & Zip C	ode	AL I	08619	
Hammonton N		3037		Tren			NJ License N		
Project Manager for Monitoring Fin		elephone (609) 704			hone Numbe 09) 977-615			185	
Jim Proctor Scheduled Start Date (10) Scheduled Start Date (10)	heduled Comp			The second secon	of OSHA Mo				
9 28 2012	9129	12		NA					
Occupancy Status During Abateme	ent (Check all th	hat apply)		100000000000000000000000000000000000000	t Address				
Facility Closed/Vacated Du Abatement Performed Out	iring Entire Per	lod of Aba	tement	MA City S	State & Zip C	ode			
Abatement Performed Out Describe: 6:00PM to 2:00		nours – 7	arri to spi	NA NA	otate d zip o	000			
Facility Occupied During A									
Scope of Work (Check all that app						-0.5			
Full Containment					Glove I	Bag	C-ton ank	T En	ter only
Location of	١,	Is Location Normally U	Control of the Contro		scription of tos-Containir	na l	Enter only Square Footag		al Footage
Asbestos-Containing Material (ACM)	- 1'	Solely b		Mat	terial (ACM)	-			
TO BE ABATED		Maintenand	ce or	(i.e., th	nermal system	ns			
in Facility	10	Custodial S (12)	Staff?	or other	n, surfacing, r miscellaneo	us)			
(13)		(12)		01 01110					
Respiratory Supply Room				ster ceilin	ig			sf	lf 'F
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TOTALS	-	, , , ,	-				20	SF	0 LF
Completed By (Print or Type)	Title				Signatura	11			Date
Brian Haney	Presider	nt			5	1/2	~b		09/27/12
						419	$-\mathcal{H}$		

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

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

9.07.7.012 Agencies Notified □ FPA □ Initial □ DEP □ Amended Amendment # □ DEP □ Amended Amendment # □ DOL									CHECK #22288	5	10	lla La	In
Agencies Notified □ EPA □ Initial □ DEP □ Amended Amendment # □ DEP □ Amended Amendment # □ DEP □ Amended Amendment # □ DEP □ DEP □ DEP □ Amended Amendment # □ DEP □ DEP □ DEP □ Amended Amendment # □ DEP □ DEP □ DEP □ Amended Amendment # □ DEP	Date of Notification (1)					Name of Bu	ilding Ow	ner/Operator (2)					
Separation	9/27/2012					HILTON R	REALTY	13					
DEP			ation			Street Addre	ess		III III OCT	- 2	201	2	1
DOL								ENTER, SUITE	400			272	-
DOH		X			100	City, State, 2	Zip Code		1	20.00			j
DCA	1000000 materials			ncludin	g	PRINCETO	ON, NJ 0	8540	11	CCMAL	4115	286 L	
FACILITY INFORMATION Tope of Facility (4) School (K-12) Subchapter 8 (Other than K-12) Subchapter 8 (Other Keath Address 1 Subchapter 8 (Other than K-12)						Name of Co	ntact			Tele	phone	-Num	ber
Name of Facility Where Abatement is Taking Place (3) #ILLTON REALTY 194 NASSAU STREET	☐ DCA	☐ Cancel	lation			DAIVD D'A	ANDREA	\	and the second second second				
HILTON REALTY 194 NASSAU STREET Subchapter 8 (Other than K-12) Subchapter 9 (Other than K-12) Subchapter 8 (Other than K-12) Subchapter 9 (Other than K-12						FACILITY IN	IFORMA	TION	Between the second of the second			1-2-1 = 1	100
Subchapter 8 (Other than K-12) Other (i.e., private & commercial buildings	Name of Facility Where	Abatement is T	aking F	Place (3	3)			_301,200	Type of Facility (4)				
PRINCETON,NJ Square Feet F of Floors Bidg. Age	HILTON REALTY								School (K-12)				
PRINCETON,NJ County County Code (7) (STATE USE ONLY) Current Use (Prior if being demolished) MERCER Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) CREAM RIDGE ENVIRONMENTAL INC. Street Address 15 BLACK FOREST ROAD City, State, Zip Code HAMILTON, NJ 98691 Project Manager for Monitoring Firm Telephone No. Start Date (10) Scheduled Completion Date (11) Start Date (10) Scheduled Completion Date (11) Paga/2012 Decupancy 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 HAMILTON, NJ 98691 License No. 609-890-7110 006676 Start Date (10) Start Date (10) Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor ABERTIFICH SERVICES Decupancy 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 LAVALLETTE, NJ 98735 Street Address 78 E. ATLANTIC WAY City, State, Zip Code LAVALLETTE, NJ 98735 Street Address 78 E. ATLANTIC WAY City, State, Zip Code LAVALLETTE, NJ 98735 Street Address 78 E. ATLANTIC WAY City, State, Zip Code LAVALLETTE, NJ 98735 Street Address 78 E. ATLANTIC WAY City, State, Zip Code LAVALLETTE, NJ 98735 Street Address 78 E. ATLANTIC WAY City, State, Zip Code LAVALLETTE, NJ 98735 Street Address 78 E. ATLANTIC WAY City, State, Zip Code LAVALLETTE, NJ 98735 Amount (Specify SF or Mon-Friable Procedure Mon-Enclosure Glovebag Procedure Mon-Enclosure Glovebag Procedure Non-Friable Procedure Mon-Enclosure Glovebag Procedure Non-Friable Procedure Mon-Enclosure Glovebag Procedure Non-Friable Procedure Mon-Enclosure Robert (1) Abatement Type Material (ACM) (10 BE ABATED In Mon-Friable Procedure Mon-Enclosure Glovebag Procedure Non-Friable Procedure Non-Friable Procedure Non-Friable Procedure Mon-Enclosure Robert (1) Abatement Type Abatemen									Subchapter 8 (Oth	er tha	n K-12	2)	
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County Code (7) (STATE USE ONLY) MERCER MERCER MERCER ASCM No. Name of Abatement Contractor (9) CREAM RIDGE ENVIRONMENTAL INC. Street Address 15 BLACK FOREST ROAD City, State, Zip Code City, State, Zip Code HAMILTON, NJ 08691 Telephone No. Cloephone No. Cl	DDINCETON NI		7 7	8-84					Square Feet	# of	Floors	Bldg	. Age
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CLEAN EARTH Hauler ID No. Waste 1 YD GROWS City, State Disposal Date 10/1/2012 MORRISVILLE, PA Completed By Title Signature Disposal Date 10/1/2012 MORRISVILLE, PA Date	3RD FLOOR		<u> </u>	X	_	NFVAT		11	200 SF	X			
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City, State Disposal Date OUTH KEARNY, NJ Disposal Date OVID 10/1/2012 MORRISVILLE, PA Completed By Title Signature OVID 10 Date	CLEAN FARTH					naulei ID NO.		Processors	CPOWS				
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DAVID D'ANDREA PRESIDENT NEUTA 1.1/1 LACE & 19/27/2012			1000 mm				Signator	e 11 11 1	0/20	Constitution.			
	DAVID D'ANDREA ASR-41		PRES	IDEN	T		1 Ch	ura f. L	Mille a	9/27/	2012		

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

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:120)

Job #: 1209-1679 Check #: 2848

Date of Notification (1) 9/26/12	2	Name Resid	of Building	Owner / Operat	tor (2)	EGEI	VEM	1
Agencies Notified Type Notified EPA	ication	Street	Address Rahway A				1	
DEP Init		City, S	State & Zip	Code		OCT - 2	2012 11-	$H \leftarrow$
	ended		field, NJ		Proof.	1	- Free comp.	
	nergency	The state of the s	of Contact			ASSESTOS CONT	Telephone N	umber
LI DCA	ncellation		lichael St		<u> </u>	LICENSING		
Name of Facility Where Abate	ment is Taking P	lace (3)	JILII Y IN	FORMATION	:!!4 (4)	Charles Survey 11 1.	weld yet a	
Residential Property	ment is raking i	iace (5)		Type of Fac		erionista en la composición de la composición del composición de la composición de l	as a Truly	Var. Make Michigan
Street Address					pter 8 (Other	than K-12\		
912 Rahway Avenue						commercial buildir	nas homes e	tc)
				Square Fee			Bldg. Age	10.7
City (5)	County (6)	County C	Code (7)	1,500 +-	4	2010/00/00 P	82 years	
Westfield	Union	0.00			(Prior if being	demolished)	or years	
				Residentia		,,		
Name of Monitoring Firm Hired	by Building Owr	ner (8)	ASCM No		atement Conti	ractor (9)		
Environmental Tactics		AC 1/2	0045			ervices, Corp.		
Street Address 64 Broad Street				Street Addre		*		
City, State & Zip Code				3859 Sylor				
Matawan, NJ 07747				City, State &				
Project Manager for Monitoring	Firm	Telephone	Number	Telephone N	t, NJ 08036	10.		
Tom Geiger		908-709-1		609-702-04		License 1		
Scheduled Start Date (10)	Scheduled Con			Name of OS			00862	
10/1/12	10/2/12		· (11)	EMSL Ana				
Occupancy Status During Abat	ement (Check or	nly one)		Street Addre		The state of the s		
Facility Closed/Vacated	During Entire P	eriod of Aba	tement	107 Haddo	n Ave.			
Abatement Performed	Outside of Norma	al Hours		City, State &	2.2.2.2.0.0.1.2.2.2.2.2.2.2.2.2.2.2.2.2.			
Describe:				Westmont,	NJ 08108			
Scope of Work (Check all that	apply)							
					☐ Full C	ontainment with N	Negative Pres	sure
≥3 sf or ≥3 lf		Rend	ovation			inclosure	- games	,
≥160 sf ≥260 lf		☐ Dem	olition		Glove	Bag Procedures		
					☐ Non-E	xempted and No	n-Friable Proc	edure
Location of Asbestos-Contain	ina	Is Location		Descriptio		Amount	Abateme	nt Type
Material (ACM)		Normally U Solely b		Asbestos-Cor Material (A		(Specify		
TO BE ABATE		Maintenand		(i.e., thermal s		SF or LF)	2 7	
in Facility		Custodial S	taff?	insulation, surfa			Repair	clso
(13)		(12)		or other miscel	laneous)		val H	Enclsoure Encapsulate
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Basement		님님		Insulation		150 LF	$\boxtimes \Box$	
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		님님						
Name of Registered Waste Ha	ıler		ED Wests	Cubic Yards	N	ļ <u>.</u>		
or registered vvaste Ha	4101		iler ID No.	of Waste	Name of Re	gistered Landfill		
Horizon Disposal		, idd	22612	5	GROWS			
City, State				Disposal Date	City, State			
Trenton, NJ				10/3/12	Morrisville	, PA		
Completed By (Print or Type)		Title		Signature /			Date	
Kim Trumbetti	B	Ad	min. (Key!			9/26/12	

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:120)

Job #: 1208-1673-1 Check #: NA

Date of Notification (*9/10/12							Owner / Operato				<u> </u>	__/			
Agencies Notified 1 EPA DEP	「ype Notific ☐ Initia			110	_	ı Wac	ker Drive	4 4 5 4		0	CT - 2	2012			
□ DOL		nded #2		CONTRACTOR.		& Zip (Į					1		
☑ DOH	The second second	rgency				ontact	500	-	+	ASE	ESTOS COL LIGENSIA	Telenik	ne N	lumh	er
☐ DCA	☐ Cano	cellation		Mr.	Joe J	ohnso	on		L		LIGENSE	Piopin	,,,,,		
				FΔ	CILI	TY INF	ORMATION	-	***	3 to my / 14	· Service S.				
Name of Facility Whe	ere Abatem	ent is Taking P	lace (3	3)	OILI		Type of Facil	lity (4)	• •	-					
Willowbrook Mall	Space #2	130	•	•		50=	School (
Street Address							☐ Subchap								
1400 Willowbrook	Mall										ial buildin			etc.)	
City (5)		County (6)	ICo	untv	Code	(7)	Square Feet		# of Flo	oors	1	Bldg. Ag	e		
Wayne		Passaic	100	uniy	Code	(7)	1520000 Current Use	(Drion	2	d = == = 1! =		14			
wayne		rassaic					Vacant Spa		ii being d	demons	snea)				
Name of Monitoring F	irm Hired b	y Building Ow	ner (8)		AS	CM No			t Contra	ctor (9)				_	
Criterion Laborato	ries		,				Asbestos a								
Street Address		40					Street Addres	ss		-					
3370 Progress Dri City, State & Zip Code		<u> </u>					3859 Sylon								
Bensalem, PA 190							City, State & Hainesport								
Project Manager for M		irm	Telep	hone	Num	ber	Telephone N				License N	lumber		1.75	
Mike Panapresso			215-	244-	1300	x26	609-702-040					008	32		
Scheduled Start Date 9/24/12	heduled Start Date (10) Scheduled Co. 24/12 9/26/12 cupancy Status During Abatement (Check o				ite (11)	Name of OSH EMSL Anal								
Martin Martin (Control Control		And the second s	nlv one	e)			Street Address								
Facility Close	d/Vacated I	During Entire F	Period	of Ab	ateme	ent	107 Haddor	505/0	•						
Abatement Pe	erformed O	utside of Norm	al Hou	rs			City, State &								
Describe: 2		ork					Westmont,	NJ 08	3108						
Scope of Work (Chec		anly)				Observation .						27-14			
Coope of Work (Once	ik all that ap)Piy)						П	Full Co	ntainme	ent with N	legative	Pres	ssure	<u>د</u>
≥3 sf or ≥3 lf			\boxtimes	Rer	novati	on		\boxtimes			sure Encl			Joure	•
≥160 sf ≥260	lf			Der	nolitio	n			Glove E	Bag Pro	cedures				
1	-t'f								Non-Ex	_	and Nor				
	ation of s-Containin	a		_ocat	lion Used		Description Asbestos-Con				mount Specify	Ab	atem	ent T	ype
Mater	ial (ACM)	5	S	olely	by		Material (A		5		F or LF)			ш	
	ABATED Facility				ce or		(i.e., thermal s				5 - 2-55-5 - 9-1-3-4- 3 55-5	Remova	Repair	Encapsulate	Enclsoure
	(13)		Cusic	(12)	Staff?		insulation, surfactor or other miscella					nova	pair	Sul	sour
			Yes	No	N/A		0. 01.10. 11.1000.11	uoou	0,			=		ate	O)
Stock Room & Res	stroom					Blac	k Mastic			560 S	F		П	П	\Box
					\boxtimes										
					\boxtimes							\boxtimes			
				Ц.	X	-									
			H	H	X			_	******				H	Ц	LL.
Name of Registered V	Vaste Haule	er		N.I	DEP	Waste	Cubic Yards	Name	e of Reg	istored	Landfill			Ш	
					uler II	D No.	of Waste		5	istereu	Lanum				
Horizon Disposal					226	12	5	GRO	CYLLY-DACKS				2021		
City, State Trenton, NJ							Disposal Date 9/26/12	City,		DA					
Completed By (Print of	r Tyne)			Tit	اما		Signature	INIOLI	risville,	PA		Date			
Kim Trumbetti	1,500)				dmir	ı. a	d _A	_	_			Date 9/24	/12		
							THE Y								2

State of New Jersey 1208-4540 NOTIFICATION OF ASBESTOS ABATEMENT Check # 4429 (Pursuant to N.J.A.C. 8:60 and 12:120)

Date of Notification			,	Nam	ne o	of Buil	lding	Owner / O	perate	(2) [IVE	15					
Aganaisa Natifical	9/20/12			rea	era	II AV	iatio	n Admini	strat	ion	1 13 13						
Agencies Notified EPA	Type Notific	ation		100		Addre	100.00	04	m		,						
DEP	│	ı ·						Center		OCT - 2	2012	17/1		_			
DOL		nded #2					Zip C		- 6-3		1	hate-made					
	The state of the s	rgency		Nom	inu	f Cor	ty int	ernation	ai Air	port, NJ 084	105						
□ DOH □ DCA		cellation		1		Bro				ASBESTOS CO		110	eleph	one	e Nu	umb	er
				DOI	Iaic	ם מ	וושכ	L.		LICENS	NO						
N 65 W 111				F	ACI	LITY	INF	ORMATI		Section of the second	- jan	(100)				_	
Name of Facility W	nere Abatem	ent is Taking Pla	ace ((3)				Type of				20 20 E					
William J. Hughe Street Address	s rech Cel	nter								(K-12)							
[] : [[[[[[[[[[[[[[[[[[oter 8 (Other t							
Building 306 TSI	Annex									e. private & co					s, et	tc.)	
City (E)		10. 1 (0)	10	-3.05	_			Square	Feet	# of F	loors	Ble	dg. A	ge			
City (5)		County (6)	C	ounty	Co	de (7	()										
Atlantic City		Atlantic						and the second second second		(Prior if being	demolished	1)					
No Cha :: :	-· · · · · · · · · · · · · · · · · · ·			-	_			Tech (
Name of Monitoring TTI Environment	Firm Hired b	by Building Owne	er (8)	1	ASC	M No.		of Aba	tement Contr	actor (9)						
Street Address	aı					-		Abate					110-2000				
1253 North Chur	ch Street							Street A		SS							
City, State & Zip Co				-		-				Zip Code							
Moorestown, NJ										, NJ 08048							
Project Manager for		irm I	Tele	phon	N/e	umbe	er	Telepho			Lice	nse Nu	mhar				
Jim Guilardi	n Guilardi						70.0	609-26			Lice	noc ivu	005				
	duled Start Date (10) Scheduled Cor									HA Monitor			000				
9/17/12			9/20	6/12		. /		EMSL									
Occupancy Status I	Ouring Abater	ment (Check onl	y on	e)				Street A									
Facility Clos	ed/Vacated I	During Entire Pe	riod	of At	oate	emehi	t	108 Ha	ddor	n Ave.							
	Performed O	utside of Norma	ŊΗġ	urs		/		City, Sta	ate &	Zip Code							
Describe:	g 05 <u>2</u> 6 9		· Santa			/		Westm	ont,	NJ 18108							
		Abatement :			_												
Scope of Work (Che	eck all that ap	oply)															
☐ ≥3 sf or ≥3 li				Do	201	ation					ontainment v	with Ne	gative	e P	ress	sure	
≥160 sf ≥26			\bowtie			lition	l:				nclosure						
23 - 100 01 - 20			ш	De	11101	iitiOii					Bag Proced			- 5			
Lo	cation of		Is	Loca	tion			Desc	ription		xempted an Amo						
Asbest	os-Containin	g		nally	7.57	200		Asbestos			(Spe		AD	ate	me	nt I	ype
	erial (ACM)			olely				Mater			SF or					ш	_
	E ABATED			tena				(i.e., ther				6)	Remova		교	Encapsulate	Enclosure
ır	Facility (13)	10	Just	odial		iff?		nsulation,					Non	'	Repair	nsd	losu
	(10)	,	Yes	(12) No		I/A		or other m	iisceiia	arieous)			<u>a</u>		7	late	<u>-</u>
Bldg. 301 - 2 nd F	loor Cafe		\Box	Ø	1	_	2V	lover Fle	o = 4:1 a	e & Mastic	0.400	05	N 2	+	-		
Diag. 501 - 2 1	loor care	terra	片		1	╡┼	21	ayer Floo	or tile	e & Wastic	2,400	SF		닏	41	닐	ᆜ
			片	H	╁	┽┼					1		井늬	╀	41		\perp
			H	H	┼	$\dashv \vdash$					1		ዙ	╀⊨	41	Щ	
			H	H	╁	$\dashv +$							ዙ	上	411		ᆜ
			H	H	++	┽┼							ዙ	H	411	4	ᆜ
Name of Registered	Waste Haule	- ,	Ш		IDE T	D \\/	aste	Cubic Yard	40	Nome of De	data wali da	-1611		L			Ш.
rame of regional	rradic riadic	51		1000		er ID i		of Waste	us	Name of Reg	gistered Lar	atili					
AbateTech, Inc.	100 miles (100 miles 100 miles					0		20		TRRF Land	lfill						
City, State				1		100		Disposal D)ate	City, State							
Lumberton, NJ	*							9/26/1		Tullytown,	PA						
Completed By (Print	mpleted By (Print or Type)							Signature					Date	_		-	
Gwen Trumbetti					tle ffic	e			1	. X			9/20				
					oor			\/	\mathcal{A}	\mathcal{M}							

State of New Jersey N FICATION OF ASBESTOS ABATEMEN (Pursuant to NJAC 8:60 and 12:120)

Date of Notification (1)		Nan	ne of Building	Owner / Operat	(0)	IN CO	7 1	T.O	(T)	
Se	eptember 19, 2012		JP N	Norgan Chase	e & Co.	or (2)	11 15 6	S U	V	15	In
Agencies Notified EPA DEP	Type Notification		Stre	et Address liamond Spri			ПО ост	- 2	2012		
DOL	Initial		City,	State & Zip C	ode						
⊠рон	Amended Amendment	#		ville, NJ 078			ASELSTOS LICE	CONTI	iÚL &		3
DCA	Cancellation		Nam	e of Contact	-		* * * * * * * * * * * * * * * * * * *	elepho	ne Ni	umbe	er
			Dam	iano Albanes	e e	h.,					
			F.	ACILITY IN	FORMATIO	N					
Name of Facility Whe JP Morgan Chase B	ere Abatement is Taking ank	Place (3)			Type of F		- 100 - 110 - 100				
Street Address						ool (K-12)	K 10)				
57 Diamond Spring	Road					chapter 8 (Other the	an K-12) commercial building	as bo		oto 1	
					Square Fe	eet # of F		dg. Age		HC.)	
City (5) Denville				A	6, Current U	500 se (Prior if being de	2		63	2	
County (6)		County Code	(7)		Bank						
Morris		USE ONLY	. ()								
Name of Monitoring F The Louis Berger Gr	irm Hired by Building O	wner (8)		ASCM No	. Name of A Synatech.	Abatement Contrac	tor (9)		-	3000	0.10
Street Address					Street Add						
412 Mount Kemble A City, State & Zip Code					829 Radio						
Morristown, NJ 079	60				Little Egg	& Zip Code Harbor, NJ 0808	7		10011000		
Project Manager for N Bruce Lockwood	Monitoring Firm	Tel	ephone 3-407-10	Number	Telephone	Number	License Nun	nber			
Scheduled Start Date	(10) Schedule	ed Completion			609-296-6	916 SHA Monitor		0081	7		
September 29	, 2012	Octob	er 15, 2		Synatech,						
Facility Close	ring Abatement (Check ed/Vacated During Entir	e Period of A			Street Add 829 Radio						
Abatement P	erformed Outside of No Sept. 29-30, Oct. 6-7, O	rmal Hours	(on 3 c	onsecutive	City, State	& Zip Code					
U Other – Desc	ribe: pied During Abatement		J12)		Little Egg	Harbor, NJ 0808	7.				
Scope of Work (Check											
scope of Work (officer	сан шасарруу										
$ \ge 3 \text{ sf or } \ge 50 \text{ If } $		⊠ F	Renovat	ion	Ļ	X Full Containme Mini-Enclosure	nt with Negative Press	sure			
≥160 sf or ≥260) If		Demolitic		Ĺ	Mini-Enclosure Glovebag Proc					
			A.F.		Ď		d(*) and Non-Friable P	ncedu	ro		
	ation of ning Material (ACM)	Is Location				ption of			ateme	ent T	vpe
TO BE	ABATED	Solely by Custoo	lial Staff			Containing al (ACM)	Amount (Specify SF or LF)				
	acility 13)				(i.e., therm	nal systems	J Grant				
,	,					urfacing, VAT scellaneous)		D	-77	Enca	ф
					VAX 5-10-041-001		1	Removal	Repair	apsi	Clo
		Yes	No	N/A				val	air	Encapsulate	Enclosure
Teller Area		+		x	Floor Tile	and Mastic	450.05				
/estibule		1		×		ompound	450 SF 200 SF	X			1
							200 37	X			
Name of Registered W	aste Hauler	NJDEP W		Cubic Yard:	s of Waste	Name of Regis	tered Landfill	1			
Synatech, Inc.		Hauler ID 274		35		Grows Landfil	i				
City, State	30142			Disposal Da	ite	City, State	 				
ittle Egg Harbor, NJ	08087			October 16	5. 2012	Morrisville, PA					
Completed By	Title			Signature	. /		Date				
Diane Aloia	Executiv	ve Administ	rator	Dia	ne lbom	۷.	September 19, 2012				
			na 900470000	1000	- 11100		Septemper 19, 2012				

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

Date of Notification (1) otember 27, 2	2012			e of Buildi organ Ch			erator	(2)) [GEI	V	3	n	$\int_{\mathbb{R}^{n}}$
Agencies Notified	Type Notifica	ition	9	Stree	t Address	S			1)CT - 2	2012			
□EPA □DEP □DOL	□ Initio	r.			amond S		oad					2	2012	-		
⊠DOH	☐ Initia	nded	2	200	State & Z				t	ĺ	AS	BESTOS COM LICENSIN	TROL &			
DCA		ndment #_ cellation	<u>1_</u>	Name	e of Conta	act	7.79					es es l'arrible d	-	ne Ni	ımbe	<u>J</u> er
				Dami	ano Alba	anese						k*				, ,x
				F#	CILITY	INFO	RMA	TION								
Name of Facility When JP Morgan Chase Ba	re Abatement Ink	is Taking I	Place (3)					of Fac School	ility (4) (K-12)							
Street Address	2 37								apter 8 (O	ther thai	n K-12)					
57 Diamond Spring F	Road											cial buildin	Control of the Contro		etc.)	
City (5)							Squa	re Feet 6,50		# of Flo	oors 2	В	idg. Age	63		
Denville							Curre	nt Use	(Prior if b	eing der	nolished	1)				
County (6) Morris		U	ounty Cod													
Name of Monitoring Fi The Louis Berger Gro		uilding Ow	vner (8)		ASCN	1 No.		of Aba	atement C	ontracto	or (9)					
Street Address							_	t Addre	t diversion of the second							
412 Mount Kemble A City. State & Zip Code	ty, State & Zip Code							Radio F	Road Zip Code							
Morristown, NJ 0796	0					Little	Egg H	arbor, NJ								
Project Manager for M Bruce Lockwood	onitoring Firm		elephone 73-407-10				hone N 96-691	lumber 6			License Nu	mber 0081	7			
Scheduled Start Date October 6, 2		Scheduled	d Complet		(11)		Name		HA Monito	or			0001	<u>. </u>		
Occupancy Status Dur Facility Close	ing Abatemen	t (Check o	only one)				Street	t Addre	ss					-	95	
Abatement Pe	erformed Outs	ide of Nor	mal Hour	s (on 3 c	onsecuti		Miles Control		Zip Code							
weekends: O Other – Descri	ribe:		l Oct. 20-2	21, 2012)			Little	Egg H	arbor, NJ	08087						
Scope of Work (Check										·				000		
				The beautiful mental from the				\boxtimes	Full Con	tainmer	t with N	egative Pres	ssure			
≥3 sf or ≥ 50 lf≥160 sf or ≥260	ıf		Ä	Renovati				\boxtimes	Mini-End							
23 2100 St 01 2200	s) 11			Demonto)II				Gloveba	T		lon-Friable F	Procedu			
	tion of		Is Locat	ion Norma	ally Used		D	escrip		simpled) and iv	or-r nable r	The second	atem	ent 7	Гуре
Asbestos-Contain TO BE	ing Material (/ ABATED	ACM)		y Mainter odial Staff				estos-C aterial	ontaining			unt (Specify F or LF)				
IN F	acility				. (/	١.	(i.e.,	therma	systems		"	, or Li ,	\vdash		- m	
(13)								facing, VA ellaneous				교	70	Encapsulate	g g
			Yes	No	N/A					î.			Remova	Repair	bsu	Enclosure
													2	=	ate	ле
Teller Area			х		Floor	Tile ar	nd Mastic			450 SF	X		H	Т		
Vestibule			x		Joi	int Con	pound			200 SF	$\exists x $					
ame of Registered Waste Hauler NJDEP W					Cubic Y	ards of	Waste		Name o	f Regist	ered Lar	ndfill	Ш			Щ
Synatech, Inc.									Grows	andfill						
City, State	, State					al Date			City, Sta	11-11-11-11-11-11-11-11-11-11-11-11-11-						
Little Egg Harbor, NJ	le Egg Harbor, NJ 08087					er 23, 20	12		Morrisv	ille. PA						İ
Completed By	0	Title		-	Signatu		0	/	7.1		Date					\neg
Diane Aloia		e Adminis	strator		Mine	J	- (á	lla-	.	eptemb	per 27, 2012	2				

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

								Check#	107	6	~	13
	eptember 25,	The second section is		Name St. Ti	of Buildin homas Mo	g Owner / Operator re Church	(2)	EGEI	WE		1	4
gencles Notified EPA DEP	Type Notifica	ation			t Address Sordon's (Corner Road		OCT -2	2012	The second secon]	!
⊠DOF □DEL		al		Cltv	State & Zip	Code	- 10 "	1		1		
⊠рон	Ame	anded andment #			ilapan, NJ			ASBESTOS CON	ITHOL &			
⊠DCA	Can	cellation		2000000	of Contac Morelli	it	t		elephor	e Nur	nber	r
				FA	CILITY	INFORMATION	- 					
Name of Facility Wh St. Thomas More C	ere Abatement hurch	is Taking	Place (3)			Type of Fact						
Street Address							(N-12) opter 8 (Other that	n V 40)				
186 Gordon's Corn	er Road					Other	(i.e., private & c	ommercial buildin	gs, hon	ne, el	lc.)	
Clty (5)						Square Feet 20,00		pors B	ldg. Age	60		
Manalapan						Current Use	(Prior if being der			- 00		
County (6) Monmouth	· · · · · · · · · · · · · · · · · · ·	U	ounty Cod	e (7)								
Name of Monitoring Birdsall Services G	Firm Hired by E roup, Inc.	Building Ov	vner (8)		ASCM	No. Name of Aba Synatech, in	atement Contracto	or (9)				
Street Address 65 Jackson Drive						Street Addre	70.75					
City, State & Zip Coo Cranford, NJ 07016	3					City, State &		,				
Project Manager for Kevin Burns	Monitoring Firm	1		elephone		Telephone N	lumber	License Nu				
Scheduled Start Date		Schedule	d Complet	8-497-89 ion Date	(11)	Name of OS	HA Monitor		0081	7		
October 5, Occupancy Status D	uring Abateme	nt (Check o	only one)	ber 8, 20		Synatech, Ir Street Addre	The state of the s					
Facility Clos	ed/Vacated Du Performed Out	uring Entire	Period of		ent	829 Radio R	load		-0			
Other - Des				3		City, State & Little Egg H	arbor, NJ 08087					
Scope of Work (Che											_	
≥3 sf or ≥ 50 lf ⊠ ≥160 sf or ≥26	50 If			Renovat Demoliti	on		Mini-Enclosure Glovebag Proce	nt with Negative Pre adure (*) and Non-Friable		re		
Asbestos-Conta	cation of lining Material	(ACM)	Solely b	y Mainte	ally Used nance or	Descrip Asbestos-C	tion of	Amount (Specifi	Ab	ateme	ent T	ype
	E ABATED Facility (13)		Custo	dial Staf	f? (12)	Material (i.e., therma	l systems	SF or LF)	-			
		Yes	No	N/A	insulation, sur or other misc			Removal	Repair	Encapsulate	Enclosure	
Basement					Х	Flue Pipe II	nsulation	8 LF	X	-	\dashv	
Basement					Х	Plpe Inst	ulation	36 LF	7^			
lame of Registered	Waste Hauler		NJDEP V		Cubic Y	ards of Waste	Name of Regis	tered Landfill				_
Synatech, Inc.				429	2		Grows Landfill	ı				
City, State				(*************************************	Disposa	Date	City, State	•	- 1300			
Ittle Egg Harbor, N	J 08087				October	9, 2012	Morrisville, PA					
Completed By		Title	160		Signatur	е 1		Date				
lane Aloia		Executiv	e Adminis	strator	1 Duc	me & allo		September 25, 201;	2			

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Check # 1076 (already sent)

Date of Notification (1	,		-1	75				neck # 10	1/6 (2	airea	ay:	sent)
	<i>)</i> ptember 25, 2012	2		ie of Building Thomas Moi	g Owner / Operator	(2)	J F 1	CFI	M	ß	Lane of	1
Agencies Notified	Type Notification			et Address			力	30) 15 11	7.7			11
□EPA □DEP			186	Gordon's C	orner Road			CT - 2	2012	1		The second part of the second pa
DOL	Initial		City.	State & Zip	Code		1					+
⊠рон	Amende Amendm		Man	alapan, NJ	07726		L_ASI	SESTUS CONT				
⊠DCA	Cancella	ition		e of Contact	t	L		Te	lepho	ne-Nu	ımbe	er'
			Ton	y Morelli		4	t to the second second.	rku da i i			,	
			F	ACILITY I	NFORMATION							
Name of Facility When St. Thomas More Ch	e Abatement is Ta urch	aking Place (3)			Type of Fac							
Street Address						apter 8 (Other tha	an K-12)					
186 Gordon's Corner	Road					(i.e., private &	10	ial building	s, hor	ne, e	tc.)	
					Square Feet		-		g. Age		/	
City (5) Manalapan					20,0		2			60		
						(Prior if being de Classroom	emolished)					
County (6) Monmouth		County Coo		100								
Name of Monitoring Fi	rm Hired by Buildi	USE ONLY		ASCM N	lo Nome of Abr	atement Contrac	to= (O)					
Birdsall Services Gro		ing Owner (b)		ASCIVITY	Synatech, I	atement Contrac nc.	tor (9)					
Street Address 65 Jackson Drive					Street Addre	ess						
City, State & Zip Code				589	829 Radio R City, State &						_	
Cranford, NJ 07016						arbor, NJ 0808	7					
Project Manager for Me Kevin Burns	onitoring Firm		elephone	Number 900	Telephone N 609-296-691	lumber		icense Num	ber 0081	7		
Scheduled Start Date (eduled Complet			Name of OS	HA Monitor				_		
Occupancy Status Dur	ing Abatement (C	heck only one)	ber 8, 20		Synatech, Ir Street Addre						_	
Facility Close	d/Vacated During erformed Outside	Entire Period of		ent	829 Radio R	load						
Abatement Pe	2007 N. 18 18 18 18 18 18 18 18 18 18 18 18 18	or Normal Hour	S		City, State &	Zip Code arbor, NJ 0808	7					
Facility Occup	ied During Abater	ment			Little Lgg II	arbor, 140 0000	•					
Scope of Work (Check	all that apply)											
5 7						Full Containme	ent with Ne	gative Pressi	ure			
≥3 sf or ≥ 50 lf	15	M	Renovat			Mini-Enclosure						
≥160 sf or ≥260	IT		Demoliti	on	\boxtimes							
Local	tion of	Ile I ocet	ion Morns	ally Used		Non-Exempted	d(*) and No	n-Friable Pro	-		-	
Asbestos-Contain	ing Material (ACM			nance or	Descript Asbestos-C		Amou	nt (Specify	Aba	atem	ent T	ype
	ABATED acility	Custo	odial Staf	f? (12)	Material (i.e., therma			or LF)	<u></u>			
	3)				insulation, sur				_		9	_
					or other misc	ellaneous)			er	Re	cap	ncl
		Yes	No	N/A					Removal	Repair	Encapsulate	Enclosure
Basement			100								æ	4
Basement				X	Flue Pipe Ir			8 LF	X			
Justinent				Х	Pipe Insu	ilation	3	86 LF	X			
Name of Registered Wa	ste Hauler	NJDEP V		Cubic Yar	rds of Waste	Name of Regis	stered Land	ffill				\dashv
Synatech, Inc.		Hauler III	No. 429	2		Ground and						
City, State				Disposal I	Date	Grows Landfil City, State			_	_	-	-
ittle Egg Harbor, NJ	08087					1	. 40					
Completed By	Title	9		October 9 Signature		Morrisville, PA						\blacksquare
lione Ale!-			0400004-000-00	LA	ie F. allo	.	Date					
iane Aloia	Exe	cutive Adminis	strator	1 NOVE	e 1. all	1	Septembe	r 25. 2012				- 1

	State of New Jersey	2439	MECEI	W
	NOTIFICATION OF ASBESTOS AB (Pursuant to NJAC 8:60 and 1	ATEMENT 2:120)	110	
•	Name of Building Owner Ope	erator (2)	OCT - 2	2012
Date of Notification (1)	Merck+ C	J. Millian.	+ + -	
Agencies Notified Type Notification	Street Address	Cincidn Loene	ASSES OS CON	
D Initial 9108/16	City State, Zip Code	1 Josep	D1003	ega. W. Was a wood
DEP M Amendment # 3	_ KANWOU.	Telephone Telephone	Number	
lustification)	Name of Contact Jerry Petti			
DOH Caricellation	FACILITY INFORMATIO	Type of Facility (4)		
Name of Facility Where Abatement is Taking Place	(3)	ra School (K-12)	K-12)	. :
Wordt + Co. The		Other (i.e. private & comm	nercial buildings, homes,	
Street Address	Liverit	etc.) # of Floors	Bldg. Age	
100000	sey 6705	+20,000 3 Current Use (Prior If being den	nolished)	
Kahwey Chun sit	County Code (7) (STATE USE ONLY)	current Use (Phor II point us.		
County (6)		Name of Abatement Contractor (9)	IN THE	
Name of Monitoring Firm Hired by Building	Th 0010+	The light out 201	10.02 pc	
Entironmental the	- 1	Street Address To South RIVER		1 18
Street Address	(aic	T City State, Zip Code 1	5 07601	
City State, Pip Code	0801	Tolonhone No. Lice	ON 48	
Project Manager for Monitoring Firm	Telephone No. 973-789-5649	12/3-10-00	011 7.0.	
1 Mam nerris	reduled Completion Date (11)	Name of OSHA Monitor		x.
Start Date (40)	11/92/12	Street Address		·
Durlan Abatament Citota O	nly One) - 2	City, State, Zip Gode		
Facility Closed/Vacated During Entire Pent	acility Hours	City, State, Lip Cour		1
Me Office Section 1		- Mile No	continue Pressure	
Scope of Work (Check All That Apply)	Renovation .	Full Containment with Ne		1
☐ ≥3 sf or ≥3 lf ≥1.60 sf or ≥260 lf	Demolition	Glovebag Procedure Non-Exempted (*) and N	on-Friable Procedure Abatement	**
	is Location		Type	
	Normally	Description of Containing Material (ACM) Containing Material (ACM) (Spe	ount B B B	
Location of Asbestos-Containing Material (ACM)	Maintenance/ (i.e. the	mai bystellie institution	Enclosure Enclosure Repair Removal	
TO BE ABATED In Facility	Custodial Statis	ner miscellaneous	2 7 B 8	
(13)	Yes No N/A		- 1	
	VA	TEMASTIC 43	0 . /	
STORAGE FOOMS	V VA	1 5 14 1	5 1	
Sw Corridor	VA VA	1) Mastic 8	àVIII	
Janitors Closet	NJDEP Waste	Cubic Yards Name of Register	ed Landill Che Resider	
Name of Registered Waste Hauler	Hauler ID No.	of Waste . Cycon	inforty users	ے . -
Freehold Castage		Disposal Date City, State	miy Pa 177	2
City State 1 1 1 (Car)	esey 01728	Signature	Date 1	x t
theyde	TTIlle AO	(Whenke AL	0108011	1.00

9-27-12		П	Charles	Easto	n	10311	The stable production of the same		N. (2004) (1.1.1.2)		
	Type Notificati	on s	treet Addres	ss	0		FORKER WALLY COME				Treford o
The same of the sa	[X]Initial		99 Well	ingtor	Avenue	e /		The sales of the sales of	A TORREST		
[]EPA	Notificat	ion	ity, State,				IE G F	1 10	E	Pro-	T
[]DEP	[]Amended	1	Short H.			· 114		LI U	حا	_ } }	111
[X] DOL	Notificat		4 4	830_	110	1117)	\}			11 1	Ш
[X] DOH	[]EMERGENCY	N	ame of Conta			Telephor	e Number	2.201	2	KL)	11
[]DCA	[]Cancellati	on	Charles	Lasto	on		!		•	Fourtee	
				ITY INFO	RMATION		* ASELSTOS		&		·
Name of Facility Whe Private	ere Abatement is	Taking	y Place (3)				School (K-1	.2)			
Street Address							Subchapter i.e., priva				(-12)
99 Wellington	Avenue					cial b	uildings, h				
City (5)	Co	unty (6	5)		Code (7)	Square Feet	# of Floo	ors Bl	dg.	Age	
Short Hills				(STATE	USE ONLY)	2100	3		80		
						Current Use (ing dem	olis	hed)	É
Name of Manitoring E	lism bised by Br	ildina	ASCM No.	lhtow	o of Abato	Residence ment Contracto					
Name of Monitoring F Owner (8)	rirm nired by Bu	illaing	67			MANAGEMENT					
N/A			0,		eet Addres		, 1110.				
Street Address						stopher St	•				
City, State, Zip Cod	le			11	y, State, Montclai	Zip Code Lr, NJ 070	42	Å.			
Project Manager for	Monitoring Firm	Tele	phone Numbe	Tel	ephone Num	ber	Į.	License	Numb	er	- 30 75
152		N/2	Ā		973) 744	1-8800		0037	1		
Scheduled Start Date		Comple	etion Date ((11) Nan	ne of OSHA	Monitor					
Month 10 Day 11 Y	,			0010	eet Addres						
Occupancy Status Dur [X] Facility Clos	ing Abatement (sed/Vacated Dur	Check c	only one)	Sti	eet Addres	s					
	Abatement Perfors - Describe:	rmed Ou	tside of No:	rmal Cit	y, State,	Zip Code					
[]other - Desc: Scope of Work (Check		r)					******				
Scope of Work (Check	arr chac appry	1	- 4		[]Full	Containment wi	th Negative	Pressu	ıre		
[X]≥3 sf or []≥160 sf o		1200	Renovation Demolition		[X]Glove	-Enclosure ebag Procedure Friable Procedu	ire				
			Is cation		250			Aba	teme		
Location Asbestos-Con Material TO BE AB: In Facil	ntaining (ACM) ATED	No S By te	rmally Used olely Main- nance/ stodial	(i.	Description Bestos-Con Material e., thermal ation, surf	taining (ACM)	Amount (Specify SF or LF)	O V	R E P A	ENCAPS	ENCHOS
(13)	_	Sta	ff (12)		ther misce			A	R	L	U R
Basement		Yes	No N/A	90s	f			x			E
basement			A	905	_						
					12						
Name of Registered WARAGE	manage recommendation of the comment	. Hau	DEP Waste aler ID No.	Cubic of Was	te	Name of Regi		ifill			
City, State Montclair, NJ	07042			The second second	15/201	City, State 2 Morrisvi	lle, PA	1906	57		
Completed By (Print Constantine V		sider	nt	3	Signature	1	-//-	Date 9-27			
HALLOWS TO THE TOTAL STREET						My fair face	140000				

(CHECK # 2449.)	(Pursuai	t to NJAC	8:60 and 12:13	0)	IIL	1	n n r	-11)1[3
Date of Notification (1) 9/27/12		Nar	ne of Buildir	BN RY'S	(5) EX	cayo	MARET -	2-2012	
Agencies Notified Type Notification polity)	City	Pinto Vin	274 IND Code NP = May		- William	AUDICOTUS (Target Vision (1)	
OOH Carcellaton		.	· _						4.
Name of Facility Where Abatement is Taking F	Place (3		YCITLA IM	FORMATION	D Sch	Facility (4)	Other than K-12)	James	╣,
Street Address 719 PACIFIC	AU	Er			Square	er (I.e., priv	VOI Floors.	Bigg Apr	
County (6) CAPE MAY	÷	Co	ounly Code (SE ONLY),	(1) (STATE		VAC	Whenhy demolish	-	
Name of Monitoring Firm Hired by Building Own (8)	ner .	ASC	₩ но.	Hame of Abater	100	1000			=
Street Address City, State, Zip Code				269 Cay, Suite, 219 Mn	Code		e Ave.	8052	
Project Manager for Monitoring Firm		Yelepho		Telephone No.	79 -0	472	004 C		=\.*
Sian pare (10)	only o	no)		Jos E Sveet Address	PKH		A UE .		
Facility Closed/Vacated During Entire Period Abatement Performed Outside of Normal F Other - Describe:	20 OI M	De terries	ni 				, N, 5;	0605Z	=
Scope of Work (Check all that apply)	Reg	novation notion		J-MM-	Enclosure		Persons blocks	we .	
Location of Asbesios-Containing Material (ACM) TO BE ABATED IN Facility	Is L No Used Main Cu	ocation maly Solely b Ignance stodial itali? (12)		Descripțior Destos Containing I .e., thermal system surfacing, Vi oțher miscalla	n of Material (A ns insulati AT, of	ACM)	Amouni (Specity SF & LF)	Removal	
3,147	Yes		N/A	TRANSIT!	<u> </u>		20000	. x	1.
SIDING									
Name of Registered Waste Hauler KLEMCO INC.	i	Ho	DEP Wasse Use D No. 7904	Cubic Yards of Waste 5 Osposal Oa		C,M	DBINE,	いんい	1
Conscience By TOSEPH KLEMM	,	805 244		Signatu	osin	LIGE	Dall	/27/	2

		N		CATION	ate of Ne OF ASB to NJAC	ESTOS	ABATE			EG	E (f.			n
Date of Notification (1) 09/25/12			T		Building S Regio					OCT	- 2	20	12		
Agencies Notified Typ	e Notification		- 1	Street A	ddress				1			2.0	12	- ita	4
X EPA	Initial				. 17 No		ite 800)	L	ASBEST	20 001	T.			- 1
EPA DEP DOL	Amended Amendment				te, Zip Co ford, No		0		L	Li	CENSING	3	- 6		
DOH DCA	Emergency justification)		100		Contact			N		Telephone	Numbe	er.	and and		
DCA	Cancellation				Perez	ODMATI	ON.						``		. 79
Name of Facility Where Abate	ement is Takin	g Place (3)		FAGI	LITY INFO	JKMAII	ON	Type of F	acility (4)						-
Trinitas Regional Medio	al Center							☐ Scho	ool (K-12)						
Street Address	An John Marie Land Communication of the Communicati				-			Sub	chapter 8	(Other than					
225 Williamson Street	S							etc.)		ate & comr	nercial c	oulia	ıngs,	nome	es,
City (5) Elizabeth								Square F-	00000	# of Floors	3	10000	dg. A)+-	ge	
County (6) Union	3				Code (7) JSE ONLY			Current U Medical		if being den	nolished)			
Name of Monitoring Firm Hire N/A	d by Building	Owner (8)		ASCM	No.			of Abateme							
Street Address							Street	Address dsall Driv					-		
City, State, Zip Code				Vicini Vice X		WO 80 - 0	City, S	state, Zip C	ode					-	
								ex, NJ 0	7461						
Project Manager for Monitorin	ig Firm			Telepho	ne No.			none No. 864-2022	2	Licer 0113	ise No. 37				
Start Date (10) 09/15/12		Scheduled 10/09/12			Pate (11)		Name Ame	of OSHA N riSci	1onitor						
Occupancy Status During Aba	atement (Chec	k Only One)					Address							-
Facility Closed/Vacated Abatement Performed O	utside of Norn	nal Facility I	Hours					East 30th							
Other - Describe: during	Sension revolution	nal busines	s hou	rs			New	York, N	10016						
Scope of Work (Check All Tha	at Apply)	_					-	-							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enova emoliti				×	Mini-Er Gloveb	closure ag Proced	t with Negar dure *) and Non-					
	****	le l	ocati	on			-	2 NOI-LX	empted) and Non-	Tilable I		Abate		
Location of		No	ormali	у		Des	scription	of			L		Ту	ре	
Asbestos-Containing Mate TO BE ABATED		Mair	Sole! tenar	nce/				Material (AC s insulation		Amount (Specify		, l		m m	т
In Facility	78	Custo	dial S (12)	staff?	(surfac	cing, VA	T, or	'	SF or LF)	Remova	Repair	aps	Enclosure
(13)		Yes	No	N/A		other n	niscellar	neous)				va.	air	Encapsulate	sure
7th floor North s	side	X	INU	N/A		loose	e floor	tiles	-	30 S.F.	×				
7th floor North s					arpets			120 S.F	. x						
	1 1							-			-				
	+							-		-+	\dashv				
Name of Registered Waste Ha	N.	JDEP W	aste	Cubic	Yards	T Na	me of Re	egistered La	ndfill				-		
Pro-Tech, LLC		н	auler ID 90713		of Was 6-7		1	inerva l							
City, State New Haven, CT	*				1/		sal Date		ty, State	urg, OH					
Completed by		Title	-				innahite		//		Date				
Marko Stankovic		Presid	lent				llan	m 11	21111	und	09/2	5/1	2		

Print Form

STATE OF NEW JERSEY NOTIFICATION OF ASBESTOS ABATEMENT (PURSUANT TO NJAC 8:60-7 AND 12:120-7

6306

			ANNU	AL NOTIFIC											
Date of Notification					Building Ow	ner / Ope	rator (2)	musers sign	19 . The	100 mm (100 mm)	1.可干:16.60	***CEEKS	orar -	11 VA
09 / 27	/12			Verizon						A			1	11	8
				Street Add	dress		3.	- 11.50							
Agencies Notified	Type of No	otification		37 Maple A			1 [arrest		っに		11.7	C i	Name of Street	
☑ EPA	4	Initial			, Zip Code				15 U	95	U	U	15	11	1
☑ DEP		Amended			, NJ 07960		- 1	(hast)							11
☑ DOH	1	Amendment #		Name of C	Contact			ITY	Telepho	ne Nu	mber	2)	100		
☑ DOL		Emergency w/	justification	Alex Baylo	r			11				2012	11	11	
☐ DCA		Cancellation						IJ,	aj _	-		in Vila	j.	Me and	
			F	ACILITY IN	FORMATIO	N	- 1		1 .				1		1 :
									L	P. C. P. P.	ACHT	7-1-1			
Name of Facility Wh	ere Abatem	ent is Taking P	lace (3)		Type of Fa	cility (4)	1		Foot	LICE	ASIM!				
Verizon						School (F	(12) L			*****					-
Street Address				- Internal	100000000000000000000000000000000000000			éhou é)	and the same				
Street Address						Subchapt Other (I.e									
37 Maple Avenue						bldgs., he			JIIIIII CI C	iai					
City (5)	County (6)		County Code	(7)	Square Fee	the same of the sa	# Of F			Buile	ding /	Age			
		4	County Couc	(,,	30.0			4			9	.90			
Morristown	Morris				Current Us	100/1000	fbeina	dem	olished)	60+					
					Telecommu										
Name of Monitoring	Firm Hired	by Bldg. Owne	r (8)	ASCM NO	Name of A			ctor	(9)						
		7.1	• •						5050						
USA Environmental M	anagement	inc.			Slavco Con	struction	IIIC.								
Street Address					Street Add	ress									
8436 Enterprise Aven					164 Getty A	Menue									
City, State, Zip Code							VIII VIII VIII VIII VIII VIII VIII VII								
Philadelphia, PA 191	53				City, State,	Zip Code	В								
Project Mngr. For M	onitoring Fi		Telephone Nu	mber	Clifton, NJ	07011									
Mark Jenkins			215-365-5810												
Sheduled Start Date		Sched. Compl	/	, .	Telephone	Number			License	Numb	er				
10 / 08	/12	12 /	<u> </u>	12_	973-478-48	48		1	00724						
0 000	1 1 1	/	/		N	CIIA Mass								_	-
Occupancy Status D		ement (Check t ted During Enti			Name of O Slavco Con										
Facility C		tea buring Enti	re Period of		Street Add	THE RESIDENCE AND ADDRESS OF THE PERSON NAMED IN COLUMN TWO IN COLUMN TO THE PERSON NAMED IN COL	IIIG.								
	Total control of the control	d Outside of N	ormal Facility												
Hours - D		u outside of it	· L		164 Getty A	Avenue									
73.039	_	7:00 am to 3:30)pm		City, State,	Zip Code	e								
-			, p		Clifton, NJ		- 70								
Scope of Work (Che	ck All That	Apply)				200 C				- 1000					
☐ Demolition	n	7	Renovation		Full Conta	inment w	ith Neg	ative	Pressu	re					
					Mini - Encl	35									
	r ≥260 If				Glovebag										
1					Non-Exem	pted (*) a	nd Non	-Fria	ble Prod	cedure					
Location of Asbestos Cont		ls Location		Descript sbestos - C			1		Abatem R	lent IV		E	Į.	_	
Material (AC		Normally	A	Material			Amo	unt	E	R		N	ľ		
TO BE ABAT		Used	, a	.e., therma			(Spe	C. C. C. C. C.	M	E	- 1	c		Š	
in Facility		Solely	insi	ilation sur	facing, VAT		SF or		0	P		Ā	. li		
(13)		by Main-			ellaneous)	,	10. 0.	/	Ιŏ	A		P		5	
(,		tenance/					1		A	1		S		3	
		Custodial					1		L	R		U		J	
		Staff (12)					1				32.2.2.3	L	F	₹	
		YES NO N/A		The second second									\Box		
Basement			Floor Tile & Ma	astic	All Market Street		2320	SF	V					[]
												[-	7	[]
]
												. [
Name of Registered	Waste Hau	iler	NJDEP Waste	6.6	Name of R	egistered	Landf	111							
Slavco Construction I	nc.		S18508	Yards	G.R.O.W.S	Landill									
			3.000	of Waste						-					
City, State				Disposal	City. State										
Clifton, NJ				Date TBD	Morrisville,	PA									
Completed by (Driet	or Tunal	-	Title	IBD		Qianat	•					Date			
Completed by (Print	or type)		TITLE			Signatur	0								
Vivian Jurcevic			Administrative	Assistant								Septe	ember	27, 2	2012

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

Check #1081

Date of Notification (1)	otember 28, 2012			of Building of America	Owner / Operator		C. Policy de	10	Π		
Agencies Notified EPA DEP	Type Notification	8	Street	Address st Blackwe	Algebra 1989	開始	OCT - 2 2012			Strike in Light	
☑DOL ☑DOH ☐DCA	Initial Amended Amendme	ent #	Dover,	tate & Zip (NJ 07801 of Contact	9 40	A.	SMESTOS CONTROL &	ephon	e Nu	mber	
			Dino N		24	in a second					
			FAC	CILITY IN	FORMATION	MARKETT STATE OF THE STATE OF T	- V - V - V - V - V - V - V - V - V - V			Phr:	
Name of Facility When Bank of America	e Abatement is Ta	aking Place (3)			Type of Facil	(K-12)	- K 40)				
Street Address 13 West Blackwell St	reet				10	pter 8 (Other than i.e., private & c	ommercial buildings	, hon	ne, e	tc.)	
City (E)					Square Feet 15,00	200	oors Bldg	, Age	111		
City (5) Dover			100			(Prior if being de	molished)		111		
County (6) Morris		County Code	(7)								
Name of Monitoring Fi Environmental Testir		ng Owner (8)		ASCM N	o. Name of Aba Synatech, In	tement Contracto	or (9)				
Street Address One Mall Drive, Suite											
City, State & Zip Code Cherry Hill, NJ 08002											
Project Manager for M Howard Zenobi			ephone N 5-482-131		Telephone N 609-296-691		License Numb	oer 0081	7		
Scheduled Start Date October 8, 2		eduled Completic	on Date (1 er 15, 201		Name of OSI Synatech, In						
Occupancy Status Dur	CONTRACTOR OF THE PARTY OF THE	heck only one)			Street Addres	SS					
Abatement P Other – Descri	erformed Outside ribe: pied During Abater		urs (from	10/9-10/1		Zip Code arbor, NJ 08087					
Scope of Work (Check	all that apply)					1					
≥3 sf or ≥ 50 lf≥160 sf or ≥260	If		Renovation Demolition			Mini-Enclosure Glovebag Proce	nt with Negative Pressi edure (*) and Non-Friable Pro		re		
Asbestos-Contair	ition of ning Material (ACM ABATED	1) Solely by	on Norma y Mainten dial Staff?	ance or	Descript Asbestos-C Material	ontaining	Amount (Specify SF or LF)	Aba	atem	ent T	уре
	acility 13)	Yes	No	N/A	(i.e., therma insulation, sur or other misc	facing, VAT		Removal	Repair	Encapsulate	Enclosure
Exterior, West side of Warren Street (from 1				x	Brown	caulk	300 LF	Х			П
Name of Registered W	aste Hauler	NJDEP V	Vaste	Cubic Ya	rds of Waste	Name of Regis	tered Landfill				Щ
Synatech, Inc.		Hauler ID		1.5		Grows Landfil					
City, State			7£3	Disposal	Date	City, State				_	\dashv
Little Egg Harbor, NJ	08087			October	16, 2012	Morrisville, PA	4				
Completed By	Titl	е	- 3141	Signature			Date				\neg
Diane Aloia	Exe	ecutive Adminis	trator	I VV	and allow		September 28, 2012				

	N		CATION		Jersey STOS ABAT 3:60 and 12:1		NT .	DECE		W			
Date of Notification (1) 09/28/12 CK:2276 \$200	• • • • • • • • • • • • • • • • • • • •				Owner/Operat aplewood	tor (2		OCT -	2 :	:012		IJ	
Agencies Notified Type No	s Notified Type Notification Street 574							- L ASSESTOS O	/NATE				
	ended	City, Stat	e, Zip Cod	de			t although	INU	UL S				
Em	endment # ergency (including	Maplev Name of		ew Jersey	070	40	Telephone Num						
	tification) ncellation			alavasi				1 Miletination					
Name of Facility Where Abatemen	t is Taking Place (3)		FACIL	ITY INFO	RMATION	ΤŢ	ype of Facility	(4)					
Township Civic House	tis taking thace (o)						School (K-	8 53					
Street Address 124 Dunnell Road				2)] Subchapte	r 8 (Other than K-12) private & commercia	l build	lings,	home	es,	
City (5) Maplewood, New Jersey 07	7040						quare Feet 0,000	# of Floors	1069	ldg. A 5+	ge		
County (6) Essex			County Code (7) (STATE USE ONLY)				Current Use (Prior if being demolished) Civic Center						
Name of Monitoring Firm Hired by Matrix New World Engineer							me of Abatement Contractor (9) ich Corporation						
Street Address	ing, inc.		1				dress						
26 Columbia Tpk				-10-10-10-10-10-10-10-10-10-10-10-10-10-	- Conserve		Bride Aven	ue 					
City, State, Zip Code Florham Park, New Jersey 07932							e, Zip Code and Park, N	ew Jersey 07424	1				
Project Manager for Monitoring Fir Gavin Gilmore		Telephon	e No. 0-1800	V 1 C 2002 V 2		ne No. 5-8400	License No 01104				-		
Start Date (10)	Scheduled	d Com			Nan	ne of	OSHA Monitor						
10/19/12 Occupancy Status During Abateme	10/22/1:						nvironmenta Idress	I Labs					
Facility Closed/Vacated Durin			ent		233	33 F	Route 22 We	est					
Abatement Performed Outsid Other – Describe: 7pm Start	e of Normal Facility	Hours	-		0.0000		e, Zip Code New Jerse	y 07083					
Scope of Work (Check All That Ap						F-71							
≥3 sf or ≥3 if ≥160 sf or ≥260 if		enovat emoliti				×	Mini-Enclosus Glovebag Pro	ocedure					
	led	ocatio	on				Non-Exemple	ed (*) and Non-Friable	-10	Abate	7		
Location of	N	ormall	у		Descripti					Ту	pe	_	
Asbestos-Containing Material (TO BE ABATED	Mair	Solel	nce/		os Containing thermal syste			Amount (Specify	70	70	Enc	m	
In Facility (13)	Custo	odial S (12)	Staff?		surfacing, other miscel	VAT,	or	SF or LF)	Remova	Repair	Encapsulate	Enclosure	
(10)	Yes	No	N/A		outer milesen		,0,		<u>a</u>		late	IГе	
Mens Room		X		Gy	psum Ceil	ling	Board	88 SF	х				
Mens Room		X			Wall Pla	aste		280	Х				
Mens Room		X			Pipe Insu	ulatio	on	10LF+6Fittings	Х				
Mens Room		Х		Ele	ctrical Wire	e Ins		1,100 LF	Х				
Name of Registered Waste Hauler		10000	JDEP Wa	2000	Cubic Yards of Waste	s		Registered Landfill					
Lilich Corporation			3724	10.	5			.W.S Landfill					
City, State Woodland Park, New Jersey	07424				Disposal Da 10/26/12	ate	City, Sta Morris	ite ville, Pennsylvan	ia				

Vice President

Signature

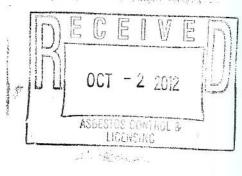
09/28/12

Completed by

Tatiana Kalenikova

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

Continuation of Notification Form...



Ladies Room X No N/A Ceiling Plaster 88 SF Ladies Room X Wall Plaster 304 SF
X Wall Plaster
Ladies Room X Pipe Insulation 25 LF + 6 Elbows
Ladies Room X Electrical Wire Insulation 100 LF

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

X	1.1	211
/ 1	19	
U	1/1	16
A44	U	50

Date of Notification (1)				Name	of Buildir	ng Owner/Operato	1 I man) IP G	A Property	the many	- Exp	el eres	Commence of the Commence of th
9	/26/2012			The Port Authority Of NY & NE								1800	_
Agency Notified	Type Notification		Street Address 241 Erie St. Room 236							_//	7)	1	
∐EPA □ DEP	☐ Initial ☐ Amended		H	City. S	State, Zip	: 111 111 000							+
DOL	Amendment #			,,			ersey City NJ	1 - 2	2012			///	
☑ DOH	Emergency (includ	ng	-	Name	of Contac		ersey Ofty 140	Telephone Num	ber	-1	Someone	4	
DCA						Uday Mehta	L	ASSESTAS OF				1	
				FAC	ILITY INF	ORMATION	}	The state of the s					
Name of Facility Where	Abatement is Taking Pla	ice (3)	Ž.				Type of Facility	(4)	140.4			-/	
P	A NJ/NY Elizabeti	n Mar	ine 1	ermi	nal		School (K-12		~				
Street Address							Subchapter 8	(Other than K-1 2)					in.
26 Cold	ony Road, Greenv	lle Ya	ard, 、	Jerse	y City N	IJ	homes, etc.)	ivate & commercial	buildin	igs,			
City (5)				0.0.0			Square Feet	# of Floors	Bldg.	Age	•		
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County (6)) (STATE USE	Current Use (Prlor if being demolished)						
5000000	Union			ONLY)			abandone	d				
Name of Monitoring Firm	n Hired by Building Own	er	ASCN	No.		Name of Abater	nent Contractor (9	9)					
(8) Port Author	ity Of NY & NJ					ABC	CONSTRUCTI	ON CONTRAC	TING	IN	C.		
Street Address		•				Street Address							
CONTROL OF THE PROPERTY OF THE	241 Erie St. Room	236						9th Avenue					
City, State, Zip Code	. 0: 11.07					City, State, Zip		NN 4440E					
	Jersey City NJ 07		olopho	no No		Telephone No.	Astoria	, NY 11105 License No.				_	
Project Manager for Monitoring Firm Telepho					1004		0.0504	100000000000000000000000000000000000000	4450				
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Start Date (1 0) Scheduled Completion Da 9/28/2012 3/28/201				. 2 .				NVIRONMEN	TAI				
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Abatement Performed	d Outside of Normal Fac					City, State, Zip	277.000.000 10.000.000.110.00						
Other - Describe:		*				1	LONG ISLANI	CITY, NY 1	1105				
Scope of Work (Check a	Il that apply)						Containment with	Negative Pressure	Y				
≥ 3 sf or ≥ 3 lf					novation	☐ Mini	-Enclosure	regulive i resourc					
✓ ≥160 sf or ≥ 260 lf				✓ Der	nolition	Glov	ebag Procedure	I Non-Friable Proc	edure				
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IN Fa			Staff?	•		surfacing, VAT other miscelland		SF or LF)		Removal	Repair	Encapsulate	Enclosure
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Name of Registered Wa		_ l	IDEP V No.	Vaste I	Hauler	Cubic Yards of Waste	Name of Regils	tered Landfill					
ABC CONSTRUCTI		G D		22280		40		Tullytown					
City, State	IC.					Disposal Date /	//City, State	Tullytown			-	-	\dashv
	Astoria, NY 111	15				10-15-2012	///	ullytown , PA	1900	7			
Completed by	Title	-	- 100			Signature A	7		Date				
STANKO KORONS	, manager	PRES	IDEN	IT.		, fle	lio		9-3	26-2	201	2	
ASB-41					sbestos lic	ensure exempted	activities.					_	

NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:16)

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(Other than K-1 vate and comm # of Floors 1 r if being demoid storage INC. License No. 00509	12) tercia	Bldg	. Age			
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BRISTOL ENVIRONMENTAL, INC. Street Address						
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)

9 /	13 / 1	2	575	Tr	uctoon o	Name of Building Owner/Operator (2)									
		1 "	usiees o	f Princeton Unive	ersity	1 00-				1					
Agencies Notified	Type Notification	n		Stree	et Address			$\frac{1}{1} = 0CT = 2$	- 6.5		÷	H			
□ EPA	⊠ Initial			E.	A. MacM	illian Building	1.1	1			į .	e d			
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□ DCA	Emergency (Pr	inceton,	NJ 08544	<u> </u>	LICIALIS		2		-			
(NJAC 5:23-8)	justification)	moludii	ıg	Nam	e of Conta	ct		Telephone Num	ber			J			
	☐ Cancellation			Ro	bert Orto	ega	Marine .	, ciopiione itam		-					
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Name of Facility Where A				-			Type of Facility	(4)				_			
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Street Address							Subchapter	8 (Other than K-12	2)						
Faculty Rd							homes, etc.)	rivate and comme	rcial b	uildin	igs,				
City (5)							Square Feet	# of Floors	TP	Ildg. A	Ane	_			
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MERCER							MRI Suite and storage								
Name of Monitoring Firm I	lired by Building	Owner	(8)	ASCM	No.	Name of Abateme									
ATC Associates, Inc				000	98		VIRONMENTA								
Street Address						Street Address		-,							
3 Terri Lane						1123 BEAVE	R STREET								
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Burlington, NJ 08010	6					BRISTOL, PA	19007								
Project Manager for Monito	oring Firm	712-111	Tel	ephone	No.	Telephone No.		License No.		-		_			
Michael R Keehn			6	09-386	-8800	215-788-6040		00509							
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Start Date (10)			<i></i>		98/08/08/09/09/09	Parameter Control (1914) 476	onitor VIRONMENTAL	L, INC.							
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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) 13 9 1 12 Trustees of Princeton University Agencies Notified Type Notification Street Address ☐ EPA M Initial E.A. MacMillian Building ☑ DOLWD City, State, Zip Code Amendment #2-9/26/12 ☑ DHSS Princeton, NJ 08544 ☐ Emergency (including ☐ DCA iustification) Name of Contact Telephone Number (NJAC 5:23-8) ☐ Cancellation Robert Ortega **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Princeton University-Elementary Particle Lab-Building 25 ☐ School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, Faculty Rd homes, etc.) City (5) Square Feet # of Floors Bldg. Age Princeton 11,000 60+ Current Use (Prior if being demolished) County (6) County Code (7)(STATE USE ONLY) MERCER MRI Suite and storage Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) 00098 ATC Associates, Inc. BRISTOL ENVIRONMENTAL, INC. Street Address Street Address 3 Terri Lane 1123 BEAVER STREET City, State, Zip Code City, State, Zip Code Burlington, NJ 08016 BRISTOL, PA 19007 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Michael R Keehn 609-386-8800 215-788-6040 00509 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 9 / 27 / 12 10 / 8 / 12 BRISTOL ENVIRONMENTAL, INC. Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 1123 BEAVER STREET Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: 7:00AM-3:30PM/ BRISTOL, PA 19007 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure ≥3 sf or ≥3 lf □ Renovation ☐ Mini-Enclosure ☐ Demolition ☐ Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Used Solely by Remova Encapsulate 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 1st Floor -Workarea NF #1 \boxtimes Floor tile 1400 SF \boxtimes 1st Floor- Workarea NF #1 \boxtimes Pipe Insulation X 20 LF 1St Floor- Workarea NF #2 X Floor tile 25 SF X 1st Floor- Workarea NF #1 П X Window glazing 25 LF X П П NJDEP Waste Cubic Yards of Name of Registered Waste Hauler Name of Registered Landfill Hauler ID No. Waste BRISTOL ENVIRONMENTAL, INC. G.R.O.W.S. NORTH LANDFILL 18706 City, State Disposal Date City, State BRISTOL, PA 19007 MORRISVILLE, PA 19067

MAY 11 BS 12093-A

Title

Estimator

Completed By (Print or Type)

Brian Scafiro

Signature

9/26/12

					Fax:		Sep 28	6 2012 11:52am P001/001 &PPROVED
		State of N	ow. To	mean Nati	ication of Asbestos		NN	Dept of Health & Senior Service
	•	state of A			C. 8:60-7 and 12:120-7		ent	(eignature) 11.54.m
GAC Project # 251-12-09					Z. 0.00 / Mild 12.120-/	4	Date	e 9 2/0/12 Time 46 R
Date of Notification (1)	har 26	2040			Name of Building Own) 1	The second control of the control of the second
Agencies Notified	iber 20	Notification	Tune		Street Address	TY \$	940-54-100 5 Electron	TO TO THE TENE
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☑ DOL ☑ DEP- No Longer REQUIE	HARAN	justific	ation	including attached)	City, State, Zip Code UNION, NJ 07083	The Control	Commencement	OCT - 2 2012
⊠ DOH		□Cance	led		Name of Contact MS. SUSAN KUPI Director, Office of En-		-	ASSISTES CONTROL &
				FACILITY IN	FORMATION		San Opposite	AND
Name of Facility Where Abeter CHILD STUDY INSTITE	UTE	king Place (3)			Type of Facility (4) School (K-12)	E.		
Street Address					Subchapter 8 (other th			
MAIN CAMPUS - 1000	MORE	ris aveni	JE		Sq. Feet: N/A	# of Floors:	idings, ho 1 Rida	Mes, etc.)
City (5) UNION	County (6	NON		y Code (7) Use Only)	Current Use (prior If bel		d): ACA	
Name of Maritoring Firm Hired	by Bidg.	Owner (8)	ASCN	No.	Name of Contractor (9)		3,	ODENI NOOSING
ודד			000		GREENWOOD ABA	TEMENT (CONSU	LTANTS, INC.
Street Address 1253 NORTH CHURCH	STRE	ET			Street Address 268 MAIN STREET			:
	008057	,			City State, ZipCode BUTLER, NJ 07405	1		
Project Manager for Monitoring JIM GUILARDI	Firm	7elaphone 1 856-840			Telephone Number		Licens	se Number
		Fax 856-			973-492-0477		0084	0
Scheduled Start Date (10) 09/26/12		Scheduled 0 09/28/12	complete	on Date (11)	Name of OSHA Monitor ENVIROVISION, IN			
Occupancy Status During Aba	tement (Check only o	ne)		Street Address	10,		
☐ Facility Closed/Vacated Du	iring Enti	re Period of A	bateme	nt				
Abatement Performed Out Describe	side of N	ormal Facility	Hours -		20-21 WARGARAW City, State, Zip Code	ROAD		
MOTHER - WORK AREA VAC DURATION OF ABATEMENT	CANT & I	ISOLATED F e: 8:00 AN	ROM BI 1 - 5:0	JILDING FOR 0 PM	FAIRLAWN, NJ			
Source of Work (Check all that a	(ylage							
S2≥3sfor≥3kf				Renovation				Negative Pressure
□ ≥ 160 sf or ≥ 26	O If			Demolition	<u> 225</u>	Mini-Enclosur Glovebag Pri	5	**
								d Non-Friable Procedure
Location of Asbestos-Containing Material (ACM) in Facility (13)	Sole	ly by Maint./Co (? (12)			bestos Containing Material nal systems insulation, surfac	Amou	nt ify SF	Abstement Type Remove Repair Encep Enclose
Room 101	1	E	100	TSI - Pipe In	sulation	<20	SF	
	1							
Name of Reg. Waste Hauler See Hauler Below #1 & 2		NUDEP Was See Below		ID#	Cubic Yards of Waste: 5 CY		G.R.C	of Registered Landfill - Bethlehem, PA) W.S. Landfill sville, PA
Notes: Hauler #1) Greenwo NJDEP # 12561 Hauler #2) Newark Carting, In NJ DEP # 4509			ents, Inc	. – Butler, NJ 07405		Disposal Ds 09/28/12		City, State 100 New Ford Mill Rd. Morrisville, Pa 19067 215-736-1700
Completed by (Print or Type) RAYMOND C. PEDALIN	10 3	ENIOR PI		T	Signature Raymand C. Peda	lino	Date Septe	ember 26, 2012
		MANAGER						

State of New Jersey - Notification of Asbestos Abatement (Pursuant to N.J.A.C. 8:60-7 and 12:120-7) GAC Project # 251-12-09 Name of Building Owner/Operator (2) Date of Notification (1) KEAN UNIVERSITY September 26, 2012 Street Address Notification Type Agencies Notified ENVIRONMENTAL SAFETY & HEALTH2 ■Initial Notification 1000 MORRIS AVENUE **DEPA** □Amended Certification ☐ DCA City, State, Zip Code ASBESTOS CONTROL & ⊠Emergency (including) UNION, NJ 07083 X DOL justification attached) Telephone Number Name of Contact ☑ DEP- No Longer REQUIRED □Cancelled MS. SUSAN KUPIEC X DOH Director, Office of Environmental Health & Safety **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) CHILD STUDY INSTITUTE Subchapter 8 (other than K-12) Street Address X Other (i.e. private & commercial buildings, homes, etc.) MAIN CAMPUS - 1000 MORRIS AVENUE # of Floors: 1 Bldg. Age: 60+ years Sa. Feet: N/A County Code (7) County (6) City (5) Current Use (prior if being demolished): ACADEMIC OFFICES / UNION (State Use Only) UNION STUDENT HOUSING Name of Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. 00003 TTI GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address Street Address 1253 NORTH CHURCH STREET **268 MAIN STREET** City State, ZipCode City, State, Zip Code **BUTLER, NJ 07405** MOORESTOWN, NJ 008057 License Number Telephone Number Project Manager for Monitoring Firm Telephone Number 856-840-8800 JIM GUILARDI 00840 973-492-0477 Fax 856-840-8815 Name of OSHA Monitor Scheduled Completion Date (11) Scheduled Start Date (10) 09/28/12 09/26/12 ENVIROVISION, INC. Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 20-21 WARGARAW ROAD ■ Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code ☑Other – WORK AREA VACANT & ISOLATED FROM BUILDING FOR DURATION OF ABATEMENT Describe: 8:00 AM - 5:00 PM FAIRLAWN, NJ Source of Work (Check all that apply) X Full Containment with Negative Pressure ■Mini-Enclosure X Renovation \times > 3 sf or > 3 lf ☐ Glovebag Procedure ☐ Demolition ≥ 160 sf or ≥ 260 lf ■ Non-Exempted (*) and Non-Friable Procedure Description of Asbestos Containing Material Amount Abatement Type Location of Asbestos-Containing Is Location Normally Used (ACM) (i.e. thermal systems insulation, surfacing, (Specify SF Solely by Maint./Custodial Material (ACM) in Facility (13) Remove Repair Encap Enclose or LF) VAT, or other miscell.) Staff? (12) NO NA YES X TSI - Pipe Insulation <20 SF X **Room 101** Name of Registered Landfill Cubic Yards of Waste: NJDEP Waste Hauler ID # Name of Reg. Waste Hauler IESI - Bethlehem, PA 5 CY See Below See Hauler Below #1 & 2 G.R.O.W.S. Landfill

NJ DEP# 4509 Completed by (Print or Type) Title Raymand C. Pedalino SENIOR PROJECT RAYMOND C. PEDALINO MANAGER

September 26, 2012

City, State

215-736-1700

100 New Ford Mill Rd.

Morrisville, Pa 19067

Morrisville, PA

Disposal Date

09/28/12

Notes:

NJDEP # 12561

Hauler #2) Newark Carting, Inc., Newark, NJ 04509

Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMEN
(Pursuant to N.J.A.C. 8:60 and 12:120)

G		V	EM
OCT	- 2	2012	

Date of Notification (1)					Owner / Operat	tor (2)	1-1	201 2	- ZUIZ	l had	
09/24/12					Glass, Inc.		AS	DESTOS CO		1	
Agencies Notified Type Notif	ication	dress			1 "	LICENSI	MIROL &		1		
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	ergency	Name	e of	Contact				12	Telephone	Numl	oer
	ncellation	C/O	Pati	rick Lai	ney					20	
			CIL	ITY INF	ORMATION						
Name of Facility Where Abates		ace (3)			Type of Fac						
Building 106, Tube Ally Co	old End				School						
Street Address							Other than K-				
537 Crystal Ave.							te & commer			, etc.)	
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					Manufactu	iring &	Warehouse)			
Name of Monitoring Firm Hired	by Building Owne	er (8)	A	SCM No			Contractor (9				
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Street Address					Street Addre		1.5				
9 South Main Street	National Control of the Control of t				1300 Indus	strial H	ighway				
City, State & Zip Code					City, State &						
Mullica Hill, NJ 08062					Southamp	ton, PA	18966				
Project Manager for Monitoring		Telephone			Telephone N	lumber		License N	Number	-100	
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Facility Closed/Vacated					1300 Indus						
Abatement Performed	Outside of Normal	Hours -	7am	to 3pm	City, State &	Zip Cod	de				
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≥160 sf ≥260 lf		☐ Der	noliti	ion			Glove Bag Pro				
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Patrick Larney			-	f Ops.	Signature (P		Date 09/24/12	i	
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	Initial		ty. State & Zij					PPROVE
D Deb	Amended	Vi	noland, NJ	08360		/ALA!	VER	20-75 - 139 K. A.
□ DCA □	Emergency Cancellation		ome of Contact O Patrick L				, eli**; . * ·	Telephone Num
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Sep 26 2012 09:46am P001/001

State of NJ

Notification of Asbesios Abatement D&S Proj. #: MS 12-343 (Pursuant to NJAC 8:60 and 12:120) APPROVED NA Dept. of Health, & Senior Services Date of Notification (1) Name of Building Owner/Operator (2) (signature) 6 10 19 1/12 15 1/11 12 1 TOM MINDEN Agencies Notified Type Notification Street Address Initial EPA Amended 72 LLOYD ROAD DEP City, State, Zip Code Amendment#: X DOL M Emergency MONTCLAIR, NJ 07042 X DOH (including Name of Contact Talophone Number justillication) DCA the Bryanskie was Cancellation TOM MINDEN **FACILITY INFORMATION** Name of facility where abatement is taking place (3) Type of Facility (4) School (K - 12) TOM MINDEN Subchapter 8 (Other than K-12) Street Address Other (Private/Commercial Bldgs./Homes, etc. 72 LLOYD ROAD Square Feet # of Floors Bidg. Age City (5) County (8) County Code (7) (State use only) Current I Ise (Prior if being demolished) MONTCLAIR ESSEX Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Abatement Contractor (9) D & S RESTORATION, INC. Street Address Street Address 20 California Ave. City, State, Zip Code City, State, Zip Code Paterson, NJ 07503 Project Menager for Monitoring Firm Phone Number Telephone Number License Number 973-345-8020 01169 Name of OSHA Monitor Start Date (10) Sched, Completion Date (11) D & S Restoration, Inc. 09/26/12 10/04/12 Street Address Occupancy Status During Abatement (Check only one) 20 California Avenue Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: M Other-Describe: NORMAL HOURS Paterson, NJ 07503 Scope of Work (check all that apply) Full Containment w/negative pressure ≥3 sf or >3 ff X Renovation Mini-enclosure 2150 sf or >260 lf Glovebag procedure Demolition Non-Exempted (*) and Non-friable procedure is location normally used sciety Location of E by maintenance/custorial asbestos-containing E A C Description of asbestos-containing staff(12) Amount n material (acm) to be m n material (ACM) (Specify SF or p C abated in facility (13) 0 Ġ You a No 15 a N/A V D -PORCH VERMICITITE 26 SQ FT X Registered Waste Hauler NJDEP Hauler ID# Cubic Yards of Waste Name of Registered Landfill D & S RESTORATION, INC. 13506 1 YD TULLYTOWN, RESOURCE RECOVERY Cltv. State Disposal Date City, State PATERSON, NJ 07503 09/27/12 TULLYTOWN, PA Completed by (Print or Type) Title Signature Date **BOGDAN JOLDZIC** PRESIDENT 09/25/12 A88-41 Do not use this form for pabeatoc licensure exempted activities.

Notification of Asbestos Abatement D&S Proj. #: MS 12-343 (Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2) Date of Notification (1) 0 19 1/12 15 1/11 12 TOM MINDEN Agencies Notified Type Notification Street Address EPA Initial 72 LLOYD ROAD Amended DEP City, State, Zip Code Amendment #: DOL **Emergency** MONTCLAIR, NJ 07042 ASBESTOS CONTRO (including DOH Name of Contact Telephone Number justification) ☐ DCA TOM MINDEN Cancellation **FACILITY INFORMATION** Name of facility where abatement is taking place (3) Type of Facility (4) School (K - 12) TOM MINDEN Subchapter 8 (Other than K-12) Street Address Other (Private/Commercial Bldgs./Homes, etc. 72 LLOYD ROAD Square Feet # of Floors Bldg. Age City (5) County (6) County Code (7) (State use only) Current Use (Prior if being demolished) MONTCLAIR **ESSEX** Name of Monitoring Firm Hired by Bldg. Owner (8) Name of Abatement Contractor (9) ASCM No. D & S RESTORATION, INC. Street Address Street Address 20 California Ave. City, State, Zip Code City, State, Zip Code Paterson, NJ 07503 Project Manager for Monitoring Firm Phone Number Telephone Number License Number 973-345-8020 01169 Name of OSHA Monitor Start Date (10) Sched. Completion Date (11) D & S Restoration, Inc. 09/26/12 Street Address Occupancy Status During Abatement (Check only one) 20 California Avenue Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Other-Describe: NORMAL HOURS Paterson, NJ 07503 Scope of Work (check all that apply) Full Containment w/negative pressure \times >3 sf or >3 lf Mini-enclosure Renovation Glovebag procedure ≥160 sf or ≥260 lf Demolition Non-Exempted (*) and Non-friable procedure Is location normally used solely Ε Location of E by maintenance/custodial е е asbestos-containing n Amount Description of asbestos-containing staff(12) n m material (acm) to be р (Specify SF or C material (ACM) C 0 a abated in facility (13) a Yes N/A No V р P PORCH VERMICULITE 26 SQ FT X Registered Waste Hauler NJDEP Hauler ID# Name of Registered Landfill D & S RESTORATION, INC. 13506 1 YD TULLYTOWN, RESOURCE RECOVERY City, State Disposal Date City, State PATERSON, NJ 07503 09/27/12 TULLYTOWN, PA Completed by (Print or Type) Signature Title Date **BOGDAN JOLDZIC** PRESIDENT 09/25/12

Do not use this form for asbestos licensure exempted activities.

ASB-41

State of NJ

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)

Data of Natification (4)				Maria	f D-:!-!!-	0	-(0)	1		U	15) []			
Date of Notification (1)	/11/12			Name of Building Owner/Operator (2) Trustees of Princeton University											
Agencies Notified	Type Notification	nn .	-	Stree	et Address	Trustee	3 OI I IIIICCIL	U LIVE OCT	-2	211	9	i las			
	☐ Initial	211		Olice	or riddress	E.A.	MacMillan	Building				la come			
EPA DEP	Amended	0	1	City,	State, Zip 0	The state of the s		ASBESTO	S C040	TEV-					
⊠ DOL	Amendment Emergency		-				rinceton, NJ	08544 LIC	ENSIN) HUL	Ö				
⊠ DOH	justification)	9	Name	e of Contac			Telephone.Nur	nber			_			
□ DCA	☐ Cancellation	1			Se	ean Gallagher	· ***		-8-001 -2203	Color Co	2				
				FA	CILITY IN	ORMATION					-				
Name of Facility Where	Abatement is Tak	ing Place	e (3)	Wei,Ere			Type of Facilit	y (4)							
	Exterior	Steam	Tun	nel			School (K-	12)							
Street Address							Subchapte	r 8 (Other than K-	12)	1.41					
	Roper	& Ivy	Lane	S			Other (i.e., private & commercial buildin homes, etc.)								
City (5)							Square Feet # of Floors Bldg								
	Prin	ceton,	NJ			NA									
County (6)					inty Code (7) (STATE	Current Use (F	Prior if being demo							
	Mercer							exterior tuni	nel						
Name of Monitoring Firm (8)		g Owner		ASCM	No.		nent Contractor (•						
	MECS						vens Environ	mental Service	ces, I	nc.		_			
Street Address	DO Day 2	11				Street Address	DO.	D - 222							
07. 04.4. 7. 0.4.	P.O. Box 3	941				PO Box 322									
City, State, Zip Code	rosswicks, NJ	10851	5			City, State, Zip C		vn, NJ 08501							
Project Manager for Mo		0051.	ane an uniconstant	phone	No	Telephone No.									
[-] - [-]	eisgarber Jr.		33333		8-4070	(609) 25	59-9688	200000000000000000000000000000000000000	0049	3					
Start Date (10)		eduled C	_			Name of OSHA Monitor									
7/23/12	00.1		1/30/		210 (11)	Name of Goriff		IECS							
Occupancy Status Durin	ng Abatement (Ch			12		Street Address						_			
☐ Facility Closed/Vacat				ment											
☐ Abatement Performe			y Hour	s		City, State, Zip C	ode					_			
Other - Describe:	7AM - 3:30P	<u>M</u>					Crosswic	ks, NJ 08515							
Scope of Work (Check a	all that apply)							V -0. 2022-041-2012-4-100-00-00-00-00-00-00-00-00-00-00-00-00			1000	_			
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IN Facility			Staff?		(surfacing, VAT,	or	SF or LF)	Removal	Repair	cap	Enclosure			
(13)		-	(12)			other miscellaned	ous)		/al		Encapsulate	ure			
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Stevens Environr		l ш.	Hauler ID No. of Waste												
City, State		182	292	30 CU Disposal Date	City Ideas	T.R.R.F., I	nc.	_		_					
Allentown, NJ						11/30/12 /	Citx, State	/T.,111t	DΑ						
Completed By Title						Signa(ty/e/	1 -	/Tullytown,	PA		_	_			
Mahlon E. Stevens Project M					ager	1/1/	/	Date	9/28	3/12					
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ASB-41 MAR 00

* 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)

Mahlon E. Stevens Project Manager 8/17/12	Date of Notification (1		Name of Building Owner/Operator (2)												
BPA Commended			tion		St	reet Address			-111-11!			_			
DOL	⊠ EPA	☐ Initial			_		E.A	. MacMilla	Building OC	T	2 2	712	1		
DOCH		Amendme			Ci	ty, State, Zip	Code	1	!		Ţ.	377	1		
DCA	⊠ DOH	iustificatio	y (includi on)	ing	Ns	me of Conta		rinceton, N		1 1 1 1			1		
Name of Facility Where Abatement is Taking Place (3) Exterior Steam Tunnel School (K-12)	☐ DCA							er 🦺	Telebrione iv	umper	10 _	. 0			
Exterior Steam Tunnel Street Address					1	FACILITY IN	FORMATION				-550	· Carrent	About.		
Street Address Roper & Ivy Lanes Subchapter & Ivy to the Hank K-12	Name of Facility Where		_		1						· rese	3	~~~		
Roper & Ivy Lanes	Street Address	Exterio	Stean	n Iu	nnel					(₋ 12)					
County (6) Princeton, NJ Square Feet NA # of Floors Bidg. Age	Olicet Address	Roper	& Ivv	Lan	es			Other (i.e	e., private & comm	ercial b	uildir	gs,			
Princeton, NJ County (6) Mercer County Code (7) (SFATE USE ONLY) Name of Monitoring Firm Hired by Building Owner (8) MECS Street Address P.O. Box 341 City, State, Zip Code Crosswicks, NJ 08515 Froject Manager for Monitoring Firm William Weisgarber JT (609) 298-4070 (609) 259-9688 City, State, Zip Code Crosswicks, NJ 08515 Froject Manager for Monitoring Firm William Weisgarber JT (609) 298-4070 (609) 259-9688 City, State, Zip Code Allentown, NJ 08501 Telephone No (609) 259-9688 City, State, Zip Code Allentown, NJ 08501 Telephone No (609) 259-9688 City, State, Zip Code Allentown, NJ 08501 Telephone No (609) 259-9688 City, State, Zip Code Crosswicks, NJ 08515 Street Address PO Box 322 City, State, Zip Code Allentown, NJ 08501 Telephone No (609) 259-9688 City, State, Zip Code Crosswicks, NJ 08501 Telephone No (609) 259-9688 City, State, Zip Code Crosswicks, NJ 08501 Telephone No (609) 259-9688 City, State, Zip Code Crosswicks, NJ 08501 City, State, Zip Code Crosswicks, NJ 08515 Street Address PO Box 341 City, State, Zip Code Crosswicks, NJ 08515 City, State, Zip Code Cit	City (5)										Bldo	. Age			
Mercer USE ÓNLY Exterior tunnel		Pri	nceton	, NJ		-		NA							
Name of Monitoring Firm Hired by Building Owner MECS Street Address		Mercer					(7) (STATE								
Street Address P.O. Box 341 City, State, Zip Code Crosswicks, NJ 08515 Froject Manager for Monitoring Firm William Wetsgarber Jr. Scheduled Completion Date (11) 7/23/12 9/28/12 Cocupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Cope of Work (Check all that apply) 23 st or 23 if M2:60 st or 2260 if Renovation Demolition Scope of Work (Check all that apply) IN Facility (13) Exterior tunnels located in roadway Name of Registered Waste Hauler Stevens Environmental Services Inc. Sitreet Address PO Box 322 City, State, Zip Code Allentown, NJ 08501 Telephone No (609) 259-9688 It censes No (609) 259-9688 O0493 Name of OSHA Monitor WECS Street Address PO Box 341 City, State, Zip Code Crosswicks, NJ 08515 Street Address PO Box 341 City, State, Zip Code Crosswicks, NJ 08515 Street Address PO Box 341 City, State, Zip Code Crosswicks, NJ 08515 Street Address PO Box 341 City, State, Zip Code Crosswicks, NJ 08515 Street Address PO Box 341 City, State, Zip Code Crosswicks, NJ 08515 Street Address PO Box 341 City, State, Zip Code Crosswicks, NJ 08515 City, State Cubic Yards of Waste Allentown, NJ Completed By Mahlon E. Stevens Street Address PO Box 341 City, State City, State Cubic Yards of Waste Allentown, NJ Completed By Cubic Address C		33 NO.	ng Owner	7	ASC	M No.		tement Contractor (9)							
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William Weisgarber Jr. (609) 298-4070 (609) 259-9688 00493	C		J 0851	5											
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Trick Street Address Street Address PO Box 341			andulad (_						004	93				
Street Address PO Box 341		30				Jale (11)	Name of OSHA		MECS						
Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Crosswicks, NJ 08515 Full Containment with Negative Pressure Mini-Enclosure Clouded Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Type Abatement Type Abatement Type Abatement Type Asbestos Containing Material (ACM) (Specify Ser of LF) Other miscellaneous) Non-Exempted (*) and Non-Friable Procedure Custodial Staff? (12) Yes No N/A Exterior tunnels located In roadway Non-Exempted (*) and Non-Friable Procedure Asbestos Containing Material (ACM) (Specify Ser of LF) Other miscellaneous) Non-Exempted (*) and Non-Friable Procedure Abatement Type Abatement Type Abatement Type Abatement Type Abatement Type Abatement Type Other miscellaneous) Full Containment with Negative Pressure Mini-Enclosure Mon-Exempted (*) and Non-Friable Procedure Abatement Type Abatement Type Abatement Type Abatement Type Abatement Type Abatement Type Other miscellaneous) Full Containment with Negative Pressure Mahlon E. Stevens Interested Landing City, State Other miscellaneous Abatement Type Abat		ng Abatement (Cl			1		Street Address								
Scope of Work (Check all that apply) □≥3 sf or ≥3 if □≥160 sf or ≥260 if □□ Demolition □□ Demolition □□ Demolition □□ Description of Asbestos-Containing Material (ACM) IN Facility (13) □□ Staff? (12) Yes No N/A □□ N/A □□ Staff? (12) Ves No N/A □□ Staff? (12) Ves No N/A □□ Staff? (12) Ves No N/A □□ Staff? (12) Non-Exempted (*) and Non-Friable Procedure □□ Non-Exempted (*) and Non-E															
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in roadway Name of Registered Waste Hauler Stevens Environmental Services Inc. Allentown, NJ Completed By Mahlon E. Stevens Project Manager NJDEP Waste Cubic Yards of Waste 3 CU T.R.R.F., Inc. Disposal Date 9/28/121 Signature Signature Signature Signature Name of Registered Landfill T.R.R.F., Inc. Disposal Date 9/28/121 Tullytown, PA Date 8/17/12	Exterior tunnel	s located			×		pipe insulation	on	600 LF	×					
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0/1//12	Completed By Title						47.1	+		IA	-		=		
	Mahlon E. Stevens Project Ma					ager	1/1/	/		8/17/	/12		_		

ASB-41 MAR 00

* 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) 2/11/12		T	Name of Building Owner/Operator (2) Trustees of Princeton University (2)										
Agencies Notified	Type Notification	on		Street Address				15		//-	5			
EPA EPA	Initial					MacMillan	7.7 1.17				7			
DEP	Amended Amendmen			City, State, Zip		rinceton, NJ	165 OCT	:	2 21	110	- 1			
⊠ DOH	☐ Emergency justification			Name of Conta		Iniceton, Nan	Telephone Nu		1_:	11/2	- 11			
DCA DCA	Cancellation				ean Gallaghe	r /	Tolophone 14	annoc:						
	1			FACILITY IN	FORMATION	8 .		DENS!	ΝG	-7/				
Name of Facility When	e Abatement is Tak	king Place	e (3)			Type of Facility	/ (4) · · · · · · · · · · · · · · · · · · ·	and the days	and depth of					
	Exterior	Steam	Tunn	el		School (K-1	2)							
Street Address	n	0 7 1	·				8 (Other than K private & comme		uilding	gs,				
07. (5)	Roper	& IVY I	Lanes			homes, etc Square Feet	.) # of Floors		Bldg.	A 00				
City (5)	Prin	ceton,	NI			NA	# 01 1 10015		Diug.	Age				
County (6)		ccton,	143	County Code (7) (STATE		rior if being dem	olished	i)					
	Mercer			USE ÓNLY)			exterior tur							
Name of Monitoring Fire	E	g Owner	TA	SCM No.	The state of the s	ment Contractor (9								
(8)	MECS				Stevens Environmental Services, Inc.									
Street Address	DO Pov 3	2.4.1			Street Address		30x 322							
City, State, Zip Code	P.O. Box 3	041			City, State, Zip		30X 32Z							
	Crosswicks, N.	08515	5		Ony, Otate, Zip	Allentown, NJ 08501								
Project Manager for M				hone No.	Telephone No									
William V	Veisgarber Jr.		(609) 298-4070	(609) 2	59-9688		0049	93					
Start Date (10)	Sch			on Date (11)	Name of OSHA		ECO							
7/23/12			/17/12	2	Ster at Address	M	ECS				_			
Occupancy Status Dur Facility Closed/Vaca				ent	Street Address	PO E	341 Sox 341							
Abatement Perform					City, State, Zip C									
Other - Describe:							s, NJ 08515							
Scope of Work (Check	all that apply)				Пело									
≥3 sf or ≥3 lf ★ ≥160 sf or ≥260 lf			novation molition	n	Mini-En	ntainment with Neg closure ag Procedure empted (*) and No	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	ure						
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Asbestos-Containing	Material (ACM)	Maint	tenance stodial	/ Asbest	os Containing Mat	terial (ACM)	Amount (Specify	Z.	R	m	ū			
<u>TO BE ABA</u> IN Facili		S	taff?	(i.e.,	thermal systems i surfacing, VAT,	or	SF or LF)	Remova	Repair	cap	Enclosure			
(13)			12)		other miscellaned	ous)		2		Encapsulate	l le			
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Exterior tunne	els located			x	pipe insulati	ion	600 LF	×						
in roady	way													
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Name of Registered Wa			14.04 (0.00	EP Waste ler ID No.	Cubic Yards of Waste	Name of Regist								
Stevens Environ	mental Service	es Inc.		18292	3 CU	1-/1	T.R.R.F., I	nc.			_			
City, State	Allantaria l	NTT.			Disposal Date	City, State	Tullystons	DΛ						
Completed By	Allentown, 1				8/17/12;	1 1/	Tullytown,	PA			=			
Mahlon E. Ste	ject N	1anager	1///		Date	7/11	/12							
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ASB-41 MAR 00

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

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT Check #4534 (Pursuant to N.J.A.C. 8:60 and 12:120)

1209-4551 E

Date of Notification (1)					Name of Building Owner / Operator (2)								F	-			
	9/26/12						Johnson Hosp				u u	_					
Agencies Notified	Type Notific	ation			t Add							- 11	111				
⊠ EPA				One	Robe	ert Wo	od Johnson F	Place		OCT -	2 2012		4				
DEP	☐ Initia					& Zip (u u				4				
□ DOL	The state of the s	nded #1					, NJ 08901	i			-						
□ DOH		rgency	- 1			ontact		į	A	SEESTOS C		one N	lumb	er			
☐ DCA	☐ Cano	cellation		Geis	er Fa	jardo				LICEN				j			
					CILIT	TY INF	ORMATION										
Name of Facility W			lace (3)			Type of Facility (4)										
Robert Wood Jo	hnson Hos	pital					School (
Street Address									Other than K-								
One Robert Woo	d Johnson	Place					Other (i. Square Feet		ate & commer	cial buildi			etc.)				
City (5)		County (6)	Co	untv	Code	(7)	Square Feet # of Floors Bldg. Age										
New Brunswick		Middlesex	100	unity	oouc	(1)	Current Use (Prior if heing demolished)										
Mew Didiiswick		MIGGIESEX	8				Current Use (Prior if being demolished) Hospital										
Name of Monitoring	Firm Hired h	y Building Ow	nor (9)		IAC	CM No		tomon	t Contractor (9	2)							
Omega Environn		by Building Ow	ner (o)		AS	CIVI INO			t Contractor (s	9)							
Street Address							AbateTech, Inc. Street Address										
280 Huylar Stree	t						PO Box 25										
City, State & Zip Co							City, State & Zip Code										
South Hackensa	South Hackensack, NJ 07606						Lumberton, NJ 08048										
					Num	ber	Telephone N		7	License	Number						
	Geiser Fajardo 20				3400		609-265-21				005	29					
Scheduled Start Da 9/26/12		Scheduled Co	mpletic 10 /5		te (11)	Name of OSI EMSL Anal										
Occupancy Status I	During Abate	ment (Check o	nly on	e)			Street Addre	-									
Facility Clos	sed/Vacated	During Entire F	Period	of Ab	ateme	ent	108 Haddo	n Ave	•								
		utside of Norm				_	City, State &	Zip Co	ode								
		AM, 9/27-10/1 7AM-12	2 Midnigh	it, 10/2	7AM-3:3	OPM	Westmont,	NJ 08	3108								
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"	n Facility (13)		Cust		Staff?		insulation, surface				Remova	Repair	Encapsulate	Enclosure			
	(13)		Yes	(12) No	N/A		or other miscell	aneou	s)		<u>n</u>	2	ate	6			
Tower Building 1st FI	oor Specials	9 Location	103			-	Linoleum &	NA4:				-		+			
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Name of Registered	l Waste Haul	er ,		IN.	DEP	Maste	Cubic Yards	Name	e of Registere	d Landfill			Ш				
Name of Registered Waste Hauler						D No.	of Waste	Ivaiii	e of Registere	u Lanuiii							
AbateTech, Inc.					187		15	TRR	F Landfill								
City, State Lumberton, NJ							Disposal Date 10/5/12		State		-						
				Title Sie													
Completed By (Print or Type) Gwen Trumbetti					oord.	Date 9/26/12					/12						

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:120)

1209-4551 E Check #4534

Date of Notification	(4)			Ter	SS VIVIOUS					- 1		15			E	In			
Date of Notification	9/25/12								er / Operate son Host										
Agencies Notified EPA	Type Notifica	ation		Stre	et A	Addre	ess						CT -	2 201)	HJ.	H		
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□ DOH		gency					ntact					no.	LICENS	Telepi	none	Num	ber		
☐ DCA	☐ Canc	ellation		Gei	ser	· Faj	ardo				400	JAME, CLARG	Marine .				J		
				F	AC	ILIT	Y INF	ORN	MATION	5.5	1 4 p. 00 s	P		1					
Name of Facility Wh	ere Abateme	nt is Taking P	lace	(3)				Ty	pe of Faci										
Robert Wood Joh Street Address	inson Hosp	oital							School		·								
One Robert Wood	noendol. h	Place						IF	Other (i.		Other tha			nan ha		-4- \			
		i idoc							quare Feet		# of Flo			Bldg. A		etc.)	A.		
City (5) '		County (6)	C	ounty	y Co	ode (7)	-	1		" OI 1 10	010		Diag. 7	ge				
New Brunswick		Middlesex		1.0			2170	Current Use (Prior if being demolished)											
								7.00	ospital										
Name of Monitoring		Building Owr	er (8	3)		ASC	M No												
Omega Environm Street Address	entai							AbateTech, Inc.											
280 Huylar Street								Street Address PO Box 25											
	City, State & Zip Code South Hackensack, N.I 07606								ty, State &	Zip Co	de					- 51			
South Hackensack, NJ 07606 Project Manager for Monitoring Firm Te							office:		Lumberton, NJ 08048										
				phor -489			er		lephone N 9-265-21			Į.	icense						
Scheduled Start Date (10) Scheduled Comple								_	me of OSI		nitor			005	29	_			
9/26/12	45 U.S.		10/	5/12		(/			MSL Anal		illoi								
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Describe: 5			al mo	ours				0.000	ty, State & estmont,										
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Name of Registered Waste Hauler				1550					Yards	Name	of Regis	stered	Landfill		1				
AbateTech, Inc.				H		er ID 875 (of Wa		TDD	E I on de								
City, State					- 19	0/00		Dieno	15 sal Date	City,	Landfi	111	100						
umberton, NJ									9/5/12		town, P	Α							
Completed By (Print o	r Type)				tle			%igna		10		70.0		Date					
Swen Trumbetti				0	ffice	e Co	ord.	1		ハル	KI.				9/25	/12			

State of New Jersey 1109-4387 NOTIFICATION OF ASBESTOS ABATEMENT Check (Pursuant to N.J.A.C. 8:60 and 12:120)

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Date of Notification (1) 9/27/12			Name of Building Owner / Operator (2) Princeton University											
Agencies Notified Type Notification	+3		et Add		cisity	111)			-		1			
Ĭ EPA					inceton Univer	Sity F A Ma	Millan Bldg				П			
☐ DEP ☐ Initial				& Zip		Sity Lind	OCT = 2	2012		100	4			
☑ DOL ☑ Amended #5		A			08544	: 111	4				1			
□ DOH □ Emergency				ontact			- T	elepho	Yno I	Juml	2			
DCA Cancellation				rtego			ASSESTOS AN	- GIGDIN	д те	VOI11				
		F/	/CILI	TY IN	FORMATION		3a	andre de La Carde	4,800	÷				
Name of Facility Where Abatement is Taking F Princeton University – Firestone Library	lace	(3)			Type of Facility (4) School (K-12)									
Street Address		-												
One Washington Road					Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, etc.)									
One washington Road					Square Feet			s, non dg. Ag		etc.)				
City (5) County (6)	C	ounty	Code	(7)	- oqualo i cot	77 0111	0013	ug. Ag	E					
Princeton Mercer		,		(-)	Current Use (Prior if being demolished)									
					University Library									
Name of Monitoring Firm Hired by Building Own	ner (8	()	IAS	CM No		tement Contra	actor (9)							
ATC Associates, Inc.	(*	,	1.0		AbateTech,		10101 (0)							
Street Address					Street Addres									
Bromley Corporate Center 3 Terri Lane,	Suite	e 12			PO Box 25									
City, State & Zip Code					City, State &									
Burlington, NJ 08016	I					Lumberton, NJ 08048								
Project Manager for Monitoring Firm Mike Keehn			e Num		Telephone No		License Nu		_					
Scheduled Start Date (10) Scheduled Con			8800		609-265-210			0052	9					
7/2/12		1/12	Mark Control of the C											
Occupancy Status During Abatement (Check of	nly òn	ne)	Street Address											
Facility Closed/Vacated During Entire P			ateme	ent	108 Haddor									
Abatement Performed Outside of Norm	al Ho				City, State & 2	Zip Code								
Describe:		• 2			Westmont,	NJ 08108								
Facility Occupied During Abatement														
Scope of Work (Check all that apply)						П г	-4-1		Г.		9			
≥3 sf or ≥3 lf	\square	Po	novati	on			ntainment with Ne	gative	Pre	ssure	à			
□ ≥160 sf ≥260 lf	\forall		molitic				closure							
	ш	De	HOILIC	ш			Bag Procedures	-1-1-1-	D					
Location of	le	Loca	lion	_	Description		empted and Non-I							
Asbestos-Containing			Used		Asbestos-Cont		Amount (Specify	ADa	tem	ent T	ype			
Material (ACM)		olely			Material (AC		SF or LF)			т	· _			
TO BE ABATED	Main	ntenar	nce or		(i.e., thermal sy	/stems	1	Re	Z,	nca	l ii			
in Facility	Cust		Staff?		insulation, surfac		*	Remova	Repair	psu	Enclosure			
(13)	Yes	(12) No	N/A	-	or other miscella	aneous)		a	=	Encapsulate	Тe			
Various Locations Throughout 1 st Floor					Pipe Insula	tion	20 LF (wrap & cut)							
4 th Floor Room 4-8-D	Ħ	H			Floor tile & N		72 SF		H	H	H			
1 st Floor Tech Services	H	H			Floor tile & N		160 SF		H	H	H			
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	Ħ	H	H	1				H	H	H	H			
Name of Registered Waste Hauler	7	N.	DEP	Waste	Cubic Yards	Name of Reg	istered Landfill				Ш			
-		9.500	uler II		of Waste	rtaine or rtog	otorou Larrann							
AbateTech, Inc.	187	50	10	TRRF Land	fill									
City, State Lumberton, NJ					Disposal Date City, State									
		Teer			10/31/12	Tullytown,								
Completed By (Print or Type) Gwen Trumbetti		Tit		oord.	Signature		1	Date						
	lot	ps. C	ooru.	()11	at-	£1	9/27	12		10				

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

Page 1 of 1

		(Pui	Suant t	O NJAC O	.00 and	12.120	'1	- 3		Check	# 12	26	182.Fo	THE AME	State of the state
Date of Notification (1) 9/26/2012		I F	lame of	Building C k Valley	wner/O	perator onal H	(2) igh So	chool Distr	C 6	0 6				7	1.1
Agencies Notified Type Notification EPA Initial			Street Ac 16 Ake	idress rs Aveni	ue	- Ag			0 C	т .					
DEP Amended X DOL Amendment #				e, Zip Coo le, NJ 0			and the second	11	UC	1 - 2	20	112			
Emergency (incl justification) DCA Emergency (incl justification) Cancellation	uding	1 8	lame of Bill Fah	Contact			5		.∏ e le	phone N	umb	er		1	
			FACIL	ITY INFO	RMATI	ON					-	-			
Name of Facility Where Abatement is Taking Pl Pascack Valley High School	ace (3)		07-2				Emmont .	of Facility (4) School (K-12			294S	100	- 1300 me .		وكرود
Street Address 200 Piermont Ave								Subchapter 8 Other (i.e. pri etc.)				ouildi	ngs,	home	s,
City (5) Hillsdale								re Feet	# of 2	Floors		Bid 40	dg. A(ge	
County (6) Bergen			County C	Code (7)			Curre	nt Use (Prior	if bein	g demoli	ished	1)			
Name of Monitoring Firm Hired by Building Owr Health & Safety Services Inc	ner (8)		ASCM 0011			Name of Abatement Contractor (9) GL Group, Inc									
Street Address 318 12th Street					Street Address 140 Hamburg Turnpike										
City, State, Zip Code Hammonton, NJ 08037						y, State, Zip Code loomingdale, NJ 07403									
Project Manager for Monitoring Firm Jim		elephor	ne No. 4-8850			none N 710-9			License 01084						
	chedule 0-8-12		pletion [Date (11)			of OSI Group	HA Monitor							
Occupancy Status During Abatement (Check O	nly On	e)				ss ourg Turnp	iko			-					
Facility Closed/Vacated During Entire Peri Abatement Performed Outside of Normal I Other – Describe:	iod of A Facility	batem Hours	ent			City, S	State, Z	ip Code			000	-			
						BIOC	mingo	dale, NJ 0	7403						
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	enovat emoliti					Mir Glo	II Containme ni-Enclosure ovebag Proce n-Exempted	edure					9	
	ls	Locatio	on								T		Abate	ment	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Mai	lormall d Solel intenar odial S (12)	y by ice/		tos Con therma surfa	Description of os Containing Material (ACM) thermal systems insulation, surfacing, VAT, or other miscellaneous)						Removal	Repair	e Encapsulate	Enclosure
15. 1	Yes	No	N/A								_				
Old Wood Shop		Х				Mastic	:		11	0 SF	- 1	X			
							-				+	10000			
											十				
Name of Registered Waste Hauler GL Group, Inc		H	JDEP W auler ID 033034	No.	Cubic of Wa	Yards iste		Name of F		red Land	dfill				
City, State Bloomingdale, NJ	-					sal Date	e	City, State Morrisvi		 A	_				
Completed by Title Elena Solakov Presiden				Signatur											

 ,, ,,,				Fax:	Sep 25	2012 04:14pı	n P00	1/00	1				
D20 D1 d		Noti	State of ification of Asber	stos Abetement		APPROVE			7				
D&S Proj. #: MS 12-341	-	(Pur	suant to NJAC 8	:60 and 12:120)	NA Rept. o	i dealth & Se			8				
Date of Notification (1)			069	406	The sale	(highature)	3.8		M				
10 19 1/12 15 1/11 12	11		wher/Operator (2)		Date:		9:						
Agencies Notified Type Notification	FRANCE Street Addre		ICKA		II and I		1	2	$\cap I$				
☐ EPA ☐ Initial ☐ Amended.	11		LDRIVE	4 0	UU OCT -2 2012								
Amendment #:	City, State, 2			- W- W-	 	2 4	172						
☑ DOH ☑ Emergency (Including	RAHWA			K.	ASBES	8708 7 00-			Ī				
DCA justification)	Name of Cor	0.0T0.T0.Z				urie Number			-				
Cancellation	PRANC	ES REI	DICKA	ξ _{116.7} .		fixe	_	_	5/44				
		FA	CILITY INFORMATI	ON			1	-					
Name of facility where abatement is ta	king place (3)		70.00		Type of Facility								
FRANCES REDICKA				ĺ		ool (K - 12)							
Street Address						hapter 8 (Other (Frivate/Con			2)				
2329 COLONIAL DRIVE					Bldgs	:/Homes, etc.							
City (5)	County (6)	la de la constantina	I C	ounty Code (7)	Square Feet	# of Floors		Bkig.	, Λg¢				
RAHWAY	UNION			tate use only)	Current Use (Prior if being o	emoils	hed)					
Name of Monitoring Firm Hirad by Bldg	Cwner (8)		ASCM No.	Name of Abatement	Contractor (8)								
				D&SRESTOR	100								
Street Address				Street Address				-					
City, State, Zip Code	Was made and the same and the s	·		20 California A	ve.								
	*			City, State, Zip Code	. 121				1277				
Project Manager for Monitoring Firm	Pho	ne Num	ber	Paterson, NJ 07	303	License Nu	Mhar.						
Start Date (10)				973-345-8020	200	0116		VVII.					
1. 1.5	Sched, Completion	Date (1	1)	Name of OSHA Mont									
Occupancy Status During Abatement (CI	10/04/12			Street Address	ou, nic.		-	Malacana					
i racility closed/vacated during entir	to medad of abstance	ent		20 California Av	enue								
Abatement performed outside of no Describe:	ormal facility hours-		1	City, Etate, Zip Code									
Other-Describe: NORMAL HOUR	S.			Paterson, NJ (7/2	503								
Scope of Work (check all that apply) >3 sf or >3 if				□ F	uli Containment w	/negative pre	REUTO						
Man Vell	ovation	*		M N	Alni-enclosure		, out a						
The same of the sa	ocation normally use	art polate			lovebag procedur lon-Exempted (*)	re and Non-friab	le proc	edure	9				
asbestos-containing by r	neintenance/custoc f(12)	Hai	la contraction of the contractio	sbestos-containing	Amount	R	R	E	E				
shated in facility (13)		N/A	material (ACM)	enderco-courpiutif.	(Specify S	For m	p	n	n				
Basement "		19/74			}	v	ľ	b	L				
			Boiler Insulation		40 SQ FT	X			10				
			-	2			П						
					_		#	片	14				
Registered Waste Hauler	N.IDEP Hauler ID#						1	片	卅				
D & S RESTURATION, INC.	13506		ible Yards of Weste YD	Namo of Registered L TULLYTOWN, R	andfill ESOTIRCE DE	COMPAN			T				
PATERSON, NJ 07503		9/27/12		City, State		YASYOO							
Completed by (Print or Type)		7/2/112	Signature	TULLYTOWN, P	A								
BOGDAN JOLDZIC PRE	SIDENT					Date 09/25/12							
ASB-41 Do no	ot use this form for	aspestos	reansure exempled	activities.		UNILDI LL		manua 🚤					

State of NJ Notification of Asbestos Abatement

(Pursuant to NJAC 8:60 and 12:120) D&S Proj. #: MS 12-341 Name of Building Owner/Operator (2) Date of Notification (1) |0|9|/|2|5|/|1|2|FRANCES REDICKA Agencies Notified Type Notification Street Address OCT ☐ EPA 1 Initial 2329 COLONIAL DRIVE Amended ☐ DEP City, State, Zip Code Amendment #: ASBESTOS CONTROL & DOL M Emergency RAHWAY, NJ LICENSING (including DOH. Name of Contact Telephone Number justification) Appropriate to the Section of the Se ☐ DCA FRANCES REDICKA Cancellation **FACILITY INFORMATION** Name of facility where abatement is taking place (3) Type of Facility (4) School (K - 12) FRANCES REDICKA Subchapter 8 (Other than K-12) Street Address Other (Private/Commercial Bldgs./Homes, etc. 2329 COLONIAL DRIVE Square Feet # of Floors Bldg. Age City (5) County (6) County Code (7) (State use only) Current Use (Prior if being demolished) UNION Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Abatement Contractor (9) D & S RESTORATION, INC. Street Address Street Address 20 California Ave. City, State, Zip Code City, State, Zip Code Paterson, NJ 07503 Project Manager for Monitoring Firm Phone Number Telephone Number License Number 973-345-8020 01169 Name of OSHA Monitor Start Date (10) Sched. Completion Date (11) D & S Restoration, Inc. 09/26/12 Street Address Occupancy Status During Abatement (Check only one) 20 California Avenue Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Other-Describe: NORMAL HOURS Paterson, NJ 07503 Scope of Work (check all that apply) Full Containment w/negative pressure >3 sf or >3 If Renovation Mini-enclosure X Glovebag procedure ≥160 sf or ≥260 lf Demolition Non-Exempted (*) and Non-friable procedure Is location normally used solely Location of E by maintenance/custodial E e asbestos-containing е Amount n Description of asbestos-containing staff(12) m material (acm) to be p C material (ACM) (Specify SF or abated in facility (13) 0 C a a Yes No N/A V p e Basement Boiler Insulation 40 SQ FT X Registered Waste Hauler NJDEP Hauler ID# Cubic Yards of Waste Name of Registered Landfill D & S RESTORATION, INC. 13506 1 YD TULLYTOWN, RESOURCE RECOVERY City, State Disposal Date City, State PATERSON, NJ 07503 09/27/12 TULLYTOWN, PA Completed by (Print or Type) Signature Title Date **BOGDAN JOLDZIC** PRESIDENT 09/25/12 Do not use this form for asbestos licensure exempted activities.

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