X-							(Operator (2)		. I.d.	CUE	IVE	: ()			
Pate of Notification (1)				Nam	e of Bu	ilding Ov	vner/Operator (2)					- Apr			
09 / 06	/ 12	_					neer District		2012	CT -4	AM	6.50			1
	lotification			Stre	et Addre	ess		(D ()	Boy59)	, , ,	PUS E	0. 33			
genoics reason							Luthet King Pl	. (F.O	ASAF	STOS	CON	TDOL			
A Am	ended			City	, State,	Zip Cod	e			LICEN	TSIM	I KUL			
X DO (NJAC 5:16)  Am	endment #1	cludina				lle, KY	40202		Te	elephone N	lumber		-		1
☑ DHSS ☐ ☐ Em	ergency (inc tification)	Cidding			ne of Co				1.5	210			2.92		1
DCA jus (NJAC 5:23-8)	ncellation					J. Dug					-				7
(No. to The )				F	ACILI	TY INFO	ORMATION								7
	t in Toking	a Place	(3)	7.				5397	of Facility (4)						
Name of Facility Where Abatem	ent is Taking	g r laoc	(0)						chool (K-12) ubchapter 8 (C	other than	K-12)				
FFR - Caven Point USAR								I X O	ther (i.e., priva	ate & comm	nercial l	buildings	3,		1
Street Address	Obanal A	lvo.						h	omes, etc.)			Bldg.			$\dashv$
Corner Caven Point Rd 8	Chapel A	AVC.						200000-1000	10.000	# of Floors	,	195			
City (5)								60	,000	2	malich	1.50	-		$\dashv$
Jersey City, NJ				10	County (	Code (7)(	STATE USE ONLY)		ent Use (Prior	if being de	Monsin	eu)			
County (6)				1	,00,			1 77	cant				-		-
Hudson		0	- (9)	TAS	CM No.		Name of Abatem	ent Co	ontractor (9)						
Name of Monitoring Firm Hired	by Building	Owner	(0)	10000000	00099		SMAC Corp.		300						_
Langan Engineering	& Envi	ronin	enta	T_,			Street Address	200							
Street Address						- 1	27 EAST 33	RD ST	REET					•	-
619 River Drive Center	sor						City, State, Zip (	Code							
City, State, Zip Code							PATERSON	NJ 0	7514		10000				_
Elmwood Park, NJ 0740	7		- [-	-lamb	none No		Telephone No.			License					
Project Manager for Monitorin	Firm			elepi	-398-4	544	973-345-405	55		01110	)				-
Vijay Patel							Name of OSHA		or						
Start Date (10)		reduled	Com	pletic	on Date	12	EMSL ANA	LYTIC	CAL, INC						
10 / 01 / 1	2 -				_	14	Street Address								
Otatus During Ah	tement (Ch	eck on	ly one	∍)	rece recy		1056 SHEL		AVE						
	uring Latire	PAHOU	UITA	CALOIL	ent	riha	City, State, Zip		-						
<ul> <li>☐ Facility Closed/Vacated D</li> <li>☐ Abatement Performed Out</li> </ul>	side of Norr	mal Fac	cility h	lours	- Desci	.M	PISCATAW	IAY N	J 08854						
Abatement Performed Out	_AM	_PIVI/_		–		10000 10000									
Scope of Work (Check all that	t apply)							ontain	ment with Neg	gative Pres	sure				
**		X	Ren	ovatio	on .			Enclosi	ure						
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>		Ë	Dem	olitio	n		⊠ Glove ⊠ Non-E	Exemp	ted (*) and No	n-Friable F	rocedu	ıre	-		
≥160 st or ≥200 ii							23					Aba	ateme	ent Ty	/pe
				_ocati ormal			Description	on of	\$40-40-00-00 TOOL			20	공	ᄪ	1
Location of			Used	Sole	ly by	Asb	· O-staining	Mater	ial (ACM)		ount ecify	Remova	Repair	Encapsulate	Elicioania
Asbestos-Containing Ma TO BE ABATE	terial (ACIVI)			ntena	nce/ Staff?	(i.e., th	estos Containing ermal systems in VAT, (	sulation	n, sunacing,		r LF)	<u>\sa</u>	,	sula	0
IN Facility	므		Cusio	(12)			other miscell	laneou	s)					ê	1
(13)		ļ.	Yes	No	N/A	1							-		-
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See Attached						-									E
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					-					100000					Tr
					UDER	Mosto	Cubic Yards	of	Name of Reg		ndfill				
Name of Registered Waste	Hauler				NJDEP Hauler	ID No.	Waste		Grows La						_
SMAC Corp					1859		80 Yards Disposal Dat	e	City, State						
City State				3200 kg			11/30/20		Morrisvil	le, PA					
27 E 33rd Street, Pat	erson, NJ	- 075	14				V 1000000000000000000000000000000000000					Date /	1	,	2502
		Title					Signatu	ire	G-		1	09/	19/2	201	9
Completed By (Print or Ty	,0,	1000	resid	ent			B	per	Good	wy		011	11-	.011	_
Borce Gjorsoski															

<sup>\*</sup> Do not use this form for asbestos licensure exempted activities.

Location of Asbestos-Containing Material(ACM)  TO BE ABATED In Facility (13)	Maintenarce	Asbestos Containing Material (ACM)  Asbestos Containing Material (ACM)  (i.e. thermal systems insulation, surfacing,  M 6: 5 VAT, or  other miscellaneous)  S CONTROL	Amount (Specify SF or LF)		Туре	nent Enclosure
BUILDING 115	Χ					
Throughout, associated with the		T	T	П	T	П
1 heating systems		Pipe Fitting Insulation	95LF	X	Х	X
2 Throughout	X	Floor Tile Mastic	6,000 SF	X	X	X
3 2nd Floor, Stairs (south)	X	Window Caulking	60 LF	Х		
		4				
BUILDING 115A				ПТ	T	П
1 Raised Cafeteria Corridor (2nd layer)	X	Floor Tile	3,690 SF	X	X	X
First Floor Classrooms and Hallway,		Class Tile	3,600SF	x	I,	x
2 Policy Academy Office (2nd layer)		Floor Tile Floor Tile	56 SF	x	X	
3 2nd Floor, Stair "D"	X	Floor Tile	56 SF	x	- ^  X	
4 1st Floor stairs, rear, left	X	<del> </del>		+	_	-
5 Raised Cafeteria Corridor (2nd layer)	X	Floor Tile Mastic	3,690 SF	Х	Х	X
First Floor Classrooms and Hallway, 6 Policy Academy Office (2nd layer)		Floor Tile Mastic	3,600 SF	X	X	x
	l x	Floor Tile Mastic	10,800 SF	X	X	+
7 2nd Floor, open area				+	- x	-
8 2nd floor offices	X	Floor Tile Mastic	2,100 SF	X	X	X
BUILDING 198						
1 Above Offices	l x	Pipe Insulation	310 LF	X	Х	Х
2 Boiler Room	X	Pipe Insulation	5 LF	x	Х	Х
3 Room 121B	X	Pipe Insulation	10 LF	x	Х	Х
4 Police Starage (South)	X	Pipe Insulation	2 LF	х	Х	X
5 Roof	_ X	Core Flashing	480 SF	х	1.	П
6 Office Area (2nd layer)	X	Floor Tile	1,000 SF	х	Х	Х
7 Room 121B	Х	Transite Panel	140 SF	х	T	П
	L					-
BUILDING 204		In term to the	TEFO LE	IVI	Tv	TVI
1 Open Area	X	Pipe and Fitting Insulation	550 LF	X	+ <u>x</u>	X
Above the ceiling in the south side	x	Pipe and Fitting Insulation	50 LF	X	X	x
2 corner office/ bathroom space 3 Main Boiler Room	X	Pipe and Fitting Insulation	75 LF	x	x	x
4 Main Boiler Room	X	Breeching Insulation	40 SF	x	X	-
5 Corner Office, Wall	X	Joint Compound	420 SF	x	X	-
Specifici Office, Wall	X	Vibration Damper Cloth	4 SF	x	-	x
6 Arms Boiler Room				_	+	$\forall$
6 Arms Boiler Room		Core Flashing	500 SF	X	1	1 1
6 Arms Boiler Room 7 Main Roof 8 Bathroom Walls	X	Core Flashing Wall Panel	500 SF 170 SF	X	X	X

2328

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

Date of Notification (1) 10/02/2012 #/				Building Ov VILLIAM			2)	7.	2012	OCT	-4	AH	7:	ΟI	
Agencies Notified Type Notification	N	24	treet Add	dress LIAM ST	REET				<b>\$</b> \$8	EST	0\$	COA	ITR	OI.	
EPA   Initial   Amended   Amendment #_   Emergency (inc justification)   Cancellation	cluding	_ N	NEWAF	e, Zip Code RK NJ 07 Contact archese						hone	CER	SIM	G	- La.	-
DCA Cancellation				ITY INFOR	BAATIO	NAI .			2			N- N-			
Name of Facility Where Abatement is Taking I Commercial Building Street Address	Place (3)		FACIL	II Y INFOR	RIVIATIO		Subo	ol (K-12 hapter 8	?) 3 (Othe	er than	K-12)	11 - 11			
1015 Broad Street		÷				I	Othe etc.)	r (i.e. pr			erciai			877	5,
City (5) Newark							Square Fe			Floors			dg. Ag	ge	
County (6)			County C	ode (7) SE ONLY)			Current U Comme		r if bei	ng dem	olishe	d)			
Essex	(Q)		ASCM				f Abateme	A CONTRACTOR	ractor	(9)					-
Name of Monitoring Firm Hired by Building Ov Sky Environmental Services Inc.	vner (o)	i.	ASCIVI	110.		Kielcz	ewski C								
Street Address 140 Boulevard						Street A 235 W	ddress Vatchun	g Ave							
City, State, Zip Code Mt. Lakes NJ 07046				1000			ate, Zip Co Orange		052						
Project Manager for Monitoring Firm Leonid Shereshevsky		5.	elephon 973-76	e No. 9-6946		Telepho 973-2	one No. 43-9872	2		Licens 0117					
	Scheduled 10/24/20		pletion D	ate (11)			of OSHA N Island A		cal			T.			
Occupancy Status During Abatement (Check	Only One	<del>)</del>				Street A									
Facility Closed/Vacated During Entire Pe	riod of Al	batem	ent			17 5030000	Colin Driv	1/4							
Abatement Performed Outside of Norma  Other – Describe: building operating duri	I Facility	Hours			_	100000000000000000000000000000000000000	ate, Zip C prook N		-1						
Scope of Work (Check All That Apply)	-3300						90 16								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enovat emoliti				×	Mini-Er Gloveb	ntainme nclosure ag Proc cempted	edure					e	
		7.			-		NOTE	Cempted	( ) an	u Holl	Habi		Abate	ement	
Location of Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	N Used Mai	Location or mail of Solel of Solel of Solel of Solel of Solel (12)	y y by ice/	(i.e. t	os Conta hermal surfac		aterial (A0 insulation T, or		(	mount Specify F or LF		Removal	Repair	e Encapsulate	Enclosure
4 - Floor North Doom	165	X.	IN/A		Wa	II Plast	er			100sf	-	x			
1st Floor North Room 1st Floor North Room		X		fl		e and r				,000s1	-	x		-	
		x				oor tile				,000s1		x			
1st Floor South Room		120				nastic				100sf		x		-	
1st Floor Throughout  Name of Registered Waste Hauler		X.	JDEP W	aste	Cubic		ΤÑ	ame of			ndfill				
Circle Rubbish		H	auler ID 3816	TO 10 10 10 10 10 10 10 10 10 10 10 10 10	of Was		D	ullytov	- F.			cility	'		
City, State Linden NJ					Dispos	sal Date		ity, Stat Iorisvi		1					
Completed by Slawomir Kielczewski	Title Presi	dent			S	ignature	elu	ensi	ŀ.		Da 10	te /02/2	2012	!	

Date of Notification (1) 10/02/2012 /CONTINU	ATION SHEE	T/ #	_		Building C VILLIAN		perator (2 <sub>.</sub> EET	)		2012	OCT -	-4 A	M 7	: 2	_
_  -	e Notification			Street Add	dress LIAM S	TREET	Г		er.	a sb	ESTO.	s cn	NTI	30:	
EPA X DEP X DOL	Initial Amended Amendment #_				e, Zip Coo RK NJ C						ESTO.	MSI	ig	IUL	
DOH DCA	Emergency (inc justification) Cancellation	cluding	- 34	Name of O	Contact archese	)				Tele	phone Nu	umber		,	
			_!_	FACIL	ITY INFO	RMATIC	ON								
Name of Facility Where Abate Commercial Building Street Address 1015 Broad Street	ement is Taking F	Place (3)		-				Sch	Facility (4) nool (K-12 ochapter 8 ner (i.e. pri	) 3 (Othe	er than K-	12) cial buil	dings	, hom	es
City (5) Newark							S	Square I		# of	Floors	E	ildg. /	Age	
County (6) Essex				County C	ode (7) SE ONLY)	3 <del>11031-</del>		Current Comm	Use (Prior ercial	r if beir	ng demoli	shed)			
		vner (8)		ASCM	No.				nent Cont Corpora		(9)				
Street Address 140 Boulevard							Street A		ng Ave						
City, State, Zip Code Mt. Lakes NJ 07046							City, Sta West (		Code e NJ 07	052					
Project Manager for Monitorion Leonid Shereshevsky	ect Manager for Monitoring Firm onid Shereshevsky				e No. 9-6946		Telepho 973-24	43-987			License 01171	No.			
Start Date (10) 10/11/2012	State, Zip Code Lakes NJ 07046  It Manager for Monitoring Firm  Inid Shereshevsky  Date (10)  1/2012  Dancy Status During Abatement (Check Or Facility Closed/Vacated During Entire Period Abatement Performed Outside of Normal Facility Closed/Vacated During Entire Period Abatement Performed Outside of Normal Facility Closed/Vacated During Entire Period Abatement Performed Outside of Normal Facility Closed/Vacated During Entire Period During Entire				Date (11)		Name of Long I		Monitor Analytic	al					
Occupancy Status During Ab	ty (6) ex ex of Monitoring Firm Hired by Building Owner Environmental Services Inc. et Address Boulevard State, Zip Code Lakes NJ 07046 et Manager for Monitoring Firm nid Shereshevsky  Date (10) 11/2012  Sche 10/2  spancy Status During Abatement (Check Only Facility Closed/Vacated During Entire Period Abatement Performed Outside of Normal Fa Other – Describe: building operating during be see of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf  Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)						Street A		20						
Abatement Performed (	Jutside of Norma	I Facility	Hours				City, Sta	ate, Zip		1					
	nat Apply)		<del>- i,</del>							281					-
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	,,,		tenova emoliti				×	Mini-l Glove	Containme Enclosure bag Proc Exempted	edure	15. 1			ıre	
							Land	14011-1	LACINIPIO	, Jun	<u> </u>		Aba	teme	n
Asbestos-Containing Ma TO BE ABATE In Facility		Use Ma	Locati Normal d Sole intenar todial S (12)	ly ly by nce/	Asbes (i.e.	tos Con thermal surfa	scription of taining Ma I systems icing, VAT miscellane	aterial (A insulation, or	ACM)	(5	mount Specify or LF)	Removal	Repair	Encapsulate	
- CONTINUATION	7	Yes	No	N/A		17							-	1 3	
2nd Floor South	Room		X				le and m	Secretary Secretary			300sf	×	_	1	
2nd Floor North West &	North Room	1	X				ster ceili				300sf	x	1	1	
2nd Floor South	Room		X				ster ceili				300sf	x	_	4	
2nd Floor Bath	room		X.				oping, in				65lf	x			
Name of Registered Waste I Circle Rubbish	Hauler		H	IJDEP W lauler ID 8816		Oubic of Wa	Yards iste		Name of I Tullytov	n who are well as			ty		
City, State Linden NJ	-					Dispo	sal Date		City, State Morisvil						
Completed by Slawomir Kielczewski		Title Pres	ident				Signature	len	wsh.			Date 10/02	/201	2	

(Pursuant to N.J.A.C. 8:60 and 12:1200 ECEIVER 235/

Date of Notification (1)	1	Nam	ne o	f Bu	ilding	Owner / Operate ion	or (2)							- 10-0
10/1/2012		Hes	s C	orp	orat	ion	7	VIZOCT.	-L AM 7		0			
Agencies Notified Type Notification									. 481 /	· UZ		-		1/25
DEP Initial	-				Plaz		- 4	SBESTO	S CONTI	001	Name of the Control			
☑ DOL ☐ Amended						J 07095	90	& LIC	ENSING	TUL				
□ DOH □ Emergency					ntact	0 0.000			onag	Te	lepho	ne N	lumb	oer
☐ DCA ☐ Cancellation		Joh	n F	hilb	oin					-				_
		F/	ACI	LIT	V INF	ORMATION						-	The second	
Name of Facility Where Abatement is Taking I	Place (3	3)				Type of Faci	lity (4)						_	
Hess Corporation						School (								
Street Address						☐ Subcha	pter 8 (	Other that	n K-12)					
Smith Street & Convery Boulevard						Other (i.						-	etc.)	
City (5)			_			Square Feet		# of Floo	rs	Bld	g. Ag	е		
City (5) County (6)	Col	unty	Со	de (	7)			<u></u>		$\bot$				
Perth Amboy Middlesex						Current Use		f being de	molished)					
Name of Monitoring Firm Hired by Building Ow	(ner (8)			180	M No	Boiler Roo  Name of Aba		t Contract	or (O)					
AET, Inc.	1101 (0)		ľ	100	IVI INO	Bristol Env								
Street Address		81205E-			-	Street Addre				- 10				
28 N. Pennell Road						1123 Beave	er Stre	et						
City, State & Zip Code						City, State &								
Media, PA 19063 Project Manager for Monitoring Firm	Telep	hon	o M	umb		Bristol, PA Telephone N			11:	- NI.				
Dave Turotsy	800-9				eı	(215)788-60			License 00509		nber			
Scheduled Start Date (10) Scheduled Co	1770			Battle Land		Name of OSI		nitor	00000			_	-	
10/11/2012	11/16/2	201		` ′		Bristol Env			<b>:</b> .					
Occupancy Status During Abatement (Check of	nly one	)				Street Addres	5.5							
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm				mer	ıt	1123 Beave								
Describe:	iai Hou	Irs –				City, State &								
Facility Occupied During Abatement: 8	:30 AM	- 3:	:30	РМ		Bristol, PA	19007	M.						
Scope of Work (Check all that apply)														
N	_								ainment with	ı Neg	ative	Pres	sure	•
<ul><li>≥3 sf or ≥3 lf</li><li>≥160 sf ≥260 lf</li></ul>	$\bowtie$			ation	•		$\boxtimes$	Mini-Encl						
	Ш	De	moi	ition					g Procedure		riabla	D		
Location of	Is I	oca	tion	Т		Description	n of	NOII-EXEI	npted and N Amount					ype
Asbestos-Containing	Norm	ally	Use			Asbestos-Con			(Specify		700	term	2111.1	ype
Material (ACM)		lely				Material (A			SF or LF				Ē	m
TO BE ABATED in Facility	Mainte			7.00	i	i.e., thermal synsulation, surfac					Remova	Repair	cap	nclo
(13)	house commence of	(12)				or other miscella			87		oval	air	Encapsula	Enclosure
	Yes	No	N	/A									é	
Boiler Room	$\boxtimes$					Pipe insula			141 LF					
Boiler Room				]		Elbows			2 EA		$\boxtimes$			
Boiler Room		Ц	1	4		Transite ce	iling		2,245 SF	:	Ш	Ц	$\boxtimes$	
	H	H	+	┽							H	Ц	님	닏
	+	H	╁┾	╬							님	片	井	H
Name of Registered Waste Hauler		N.	J L JDF	P W	aste	Cubic Yards	Name	of Regist	ered Landfil				Ш	Ш
			aule	r ID	No.	of Waste				Ť.				
Service Transport Inc.			20	0990	~	8	GRO	WS LAN	DFILL					
City, State New Castle, Delaware						Disposal Date 11/16/12	City, S	State RISVILL	E. PA					
Completed By (Print or Type)		Tit	le			Signature	2.			, [г	Date			
Gino Pizzigoni		100000	oje	ct		11. L	102	gone	/11	/ 12	0/1/	12		
TV 10000		Ma	ana	ger		, Curo 17	00	June 1	1					

Check # 799/ RECEIVED

Date of Notification (1)		N	Name of	f Building Ow	ner/Operato	1 (2) DEU 00 DEU 00 DEU 00 DEU 00	FT	2012 OCT	-1.			lag5
Agencies Notified Type Notification		- 5	Street A	ddress	, <del>y</del>	1/2000		Car-	4	AF	7:	<del>03</del>
EPA Initial		_	17	2 TA	PPAL	AUE.	9	SPEST	OS.	COA	ITD	01
DEP Amended Amendment		-   '	SE SE	LLEU/	LLE.	NJ 07	109	- 11	·EN	SIN	G	UL.
DOH Emergency (i	ncluding	N	AGILLIC O	Contact			Tel	enhone M	_t.			· .
DCA Cancellation		丄		HU	MATION							
Name of Facility Where Abatement is Taking	Place (3)		FACI	LITY INFOR	WATION	Type of Facility	y (4)			lisSilifabil		
PEUDOCT				***************************************		School (K		Ib 16 46				
Street Address 172 TAPPAN AUE.						Other (i.e		er than K-12 & commerci		dings,	hom	es,
City (5)						etc.) Square Feet	# 0	Floors	E	ildg. A	\ge	
BELLEVILLE						Jun		2		5	5	
County (6) ESSEX				Code (7) USE ONLY) _		Current Use (F	rior if bei	ng demolish	ed)			
Name of Monitoring Firm Hired by Building C	owner (8)		ASCN	No.		of Abatement C		(9)		100-50-		
Street Address						Mac Contracti	ng Inc.					
Street Address						t Address Lowell Road						
City, State, Zip Code						State, Zip Code	7450					
Project Manager for Monitoring Firm		T	elepho	ne No		n Rock, N.J. (	1/452	License N				
		1	оюрно			-262-5841		00156	<b>o</b> .			
Start Date (10) / 10 / 12	Scheduled LO	Com	1	Date (11)		of OSHA Monito ega Environm		ervices Ir	IC.			
Occupancy Status During Abatement (Check	Only One)	1				t Address				MARKET - 1	70 to 100	
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm			ent			Huyler Stree	τ					
Other – Describe:	ar r dollity ( )					ckensack, NJ	07606					
Scope of Work (Check All That Apply)												
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		novati				Full Contain Mini-Enclose Glovebag Pr	ment with	Negative P	ressu	re		
					Ī	Glovebag Pi Non-Exempt	ocedure	d Non-Friah	le Pro	redur	_	
	Is Lo	ocatio	n	33377		Non-Exchip	Cu ( ) an	a North Hab	1	Abat	emen	t
Location of		mally	/		Descriptio				-	Ty	pe	Т
Asbestos-Containing Material (ACM) TO BE ABATED	Maint	enan	ce/			Material (ACM) ns insulation,	13.00	mount Specify	R	73	Enc	m
In Facility (13)		12)	lalir		surfacing, Valler miscella		SF	or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A						a a	7	late	J.G
BASEMENT			X	1	PIFE		1	70 cf	X			
Name of Registered Waste Hauler Rovic Transport		Ha	IDEP W		ubic Yards f Waste			red Landfill Ilehem La	ndel	Co	-	
		20	785		o S			nenen La	mum		μ.	
City, State Riverdale, New Jersey 07457					isposal Date			PA 18015			10	
Completed by R. McDonald	Title Preside	ent			Signatur	Marx	s.	Da	te /		)	
13. MCDOIIaiu	1 169101	ont			//	-11-1 Van	n'	1	1	.11	_	-

Pg. 1 Ch# 2340EIVE

Date of Notification (1)							g Owner/Operator (	2)	2012 OC	. 1	1	VA	0
		12	30		VE	RIZON			-12 06	1-4	A	Ma	, _
Agencies Notified	Type Notific	ation			Street	Address			A SAEST			1	. 37
⊠ EPA		10		0	15 I	EAST MC	NTGOMERY PL	ACE	PA E	OS	Co		2
⊠ DOLWD	☐ Amended	S			City, S	tate, Zip C	Code			CEN	514	VIA	101
☐ DHSS	Amendm  Emergen		udina		PIT	TSBURG	H, PA 15212				VIA	6	
(NJAC 5:23-8)	justificati	ion)	uuiiig		Name	of Contac	t		Telephone Numb				
	☐ Cancella				AN	THONY F	PORTA						
					FAC	CILITY IN	IFORMATION			0.0000			
Name of Facility Where A	Abatement is	Taking F	Place	(3)				Type of Facility	(4)				
VERIZON NEWARK	CO							School (K-12					
Street Address								Subchapter 8	3 (Other than K-12) rivate and commerc	rial hu	ildina	•	
95 WILLIAM STREE	T							homes, etc.)		nui bu	g	٥,	
City (5)								Square Feet	# of Floors	Blo	lg. A	ge	
NEWARK, NJ													
County (6)					Coun	ity Code (7	)(STATE USE ONLY)		ior if being demolish	ned)			
ESSEX							,	COMMUNIC					
Name of Monitoring Firm				88.	ASCM	No.	Name of Abateme	a mari menangan kalungan kerangan beranggan beranggan beranggan beranggan beranggan beranggan beranggan berang					
USA ENVIRONMEN	TAL MANA	GEME	NT II	NC				VIRONMENTA	L, INC.		MUSSUM		
Street Address							Street Address						
8436 ENTERPRISE	AVENUE						1123 BEAVE						
City, State, Zip Code	40452						City, State, Zip Co						
PHILADELPHIA, PA Project Manager for Moni				Tolo	phone	No	BRISTOL, PA	19007	License No.		-0101-01		
MARK JENKINS	itoring Firm				5-365		215-788-6040		00509				
Start Date (10)	19	Schedul	led Co	200000	Service State of the State of t		Name of OSHA M		00303				
10 /15 /					/		REMARKS HOME TO STANFORD THE STANFORD STANFORD	VIRONMENTA	L, INC.				
Occupancy Status During		-					Street Address						
☐ Facility Closed/Vacate	ed During Enti	ire Perio	od of	Abater	nent		1123 BEAVER	RSTREET					
						cribe	City, State, Zip Co	ode					
Time of Abatement: 8	:00AM- <u>5:00</u> I	PM/	P	νι- <u> </u>	AM		BRISTOL, PA						
Scope of Work (Check all	I that apply)						П						
□ >3 sf or >3 lf		Б	⊠ Re	novati	on		☐ Full Cont	ainment with Neg	gative Pressure				
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>		Ē	De	molitio	n		☐ Glovebag	Procedure					
Secretaria de la companya del companya de la companya del companya de la companya							☐ Non-Exe	mpted (*) and No	n-Friable Procedure	T			
				Locat Iormal						Aba	atem	ent T	-
Location Asbestos-Containing		A)		d Sole		Ashe	Description o stos Containing Ma		Amount	Re	Repair	Ē	Enclosure
TO BE ABA	TED			intena odial S			., thermal systems i	insulation,	(Specify	Removal	oair	ap	clos
IN Facili (13)	ty		Cust	(12)	olan r		surfacing, VAT, other miscellane		SF or LF)	a a		Encapsulate	ure
(10)			Yes	No	N/A	1	Other miscellane	ous)	Φ			e e	
BASEMENT MECHAN	ICAL ROC	M [	X			PIPE IN	SULATION/FITT	INGS	200 LF				
5 <sup>TH</sup> FLOOR ROOM 55	1		$\boxtimes$			PIPE IN	SULATION/FITT	INGS	50 LF				
7 <sup>TH</sup> FLOOR ROOM 75	9		$\boxtimes$			PIPE N	SULATION/FITTI	NGS	40 LF				
7 <sup>TH</sup> FLOOR ROOM 76	4		$\boxtimes$			PIPE IN	SULATION/FITT	INGS	100 LF				
Name of Registered Was	te Hauler			1000	JDEP V		Cubic Yards of	Name of Regis	tered Landfill				
SERVICE TRANSPO	ORT GROU	P, INC.		Н	auler II 20990		Waste	MINERVA	LANDFILL				
City, State							Disposal Date	City, State	4			-	
NEW CASTLE, DE 1	19720							WAYNESB	URG, OH 44688				
Completed By (Print or Ty	ype)	Title	1				Signature	10 000	Dat		1		
PATRICK T. DeCAR	RO	ES	TIMA	TOR			Patrick:	A. De Car	ا المواه	19/1	11	8	
ASB-41 00 /1	185	aleste e	M 88	(2.7)			1 Web		0	contract of		. ( - E - E	

PO 12085

<sup>\*</sup> Do not use this form for asbestos licensure exempted activities.

Pg. 2

Date of Notification (1)			Nam	e of Buildi	ng Owner/Operator	(2)	20	100	0	7.	
	12		V	ERIZON			2012 OL	٠,	- Sales	16	81
Agencies Notified Type Notified	ation		Stre	et Address			450	/_	4		- 4
Image: Sepa in the property of	<b>.</b>	7			ONTGOMERY PL	ACE	3 3EST	_	4	4 >	
☐ DHSS Amenda			City,	State, Zip	Code		4/10	3	0.0		0)
□ DCA □ Emerger		na -	PI	TTSBUR	GH, PA 15212		-16	ENS	CA	70	. *
(NJAC 5:23-8) justificat	ion)	''9	Nam	e of Conta	ct		Telephone Num	ber	MG	AC	1
☐ Cancella	ition		1	YNOHT			L	*	1000		
Name of Facility Where Abatement is	Taking Pla	20 (3)	F/	CILITY	NFORMATION						
VERIZON NEWARK CO	raking Pla	Je (3)				Type of Facility	(#) (1 ft ) (1				
Street Address				+		☐ School (K-1:	د) 8 (Other than K-12	)			
95 WILLIAM STREET						Other (i.e., p	private and commer	cial b	uildin	gs,	
City (5)						Square Feet	# of Floors	I F	Ildg. A	lne.	
NEWARK, NJ						, , , , , , , , , , , , , , , , , , , ,	1. 01.1.10010	-	nug. /	ige	
County (6)			Cou	nty Code (	7)(STATE USE ONLY)	Current Use (Pr	rior if being demolis	hed)			-
ESSEX						COMMUNIC		Š			
Name of Monitoring Firm Hired by Buil			ASCN	No.	Name of Abateme	ent Contractor (9)					
USA ENVIRONMENTAL MANA	GEMENT	INC			BRISTOL EN	VIRONMENTA	L, INC.				
Street Address 8436 ENTERPRISE AVENUE					Street Address						
City, State, Zip Code		-			1123 BEAVER			450			
PHILADELPHIA, PA 19153					City, State, Zip Co BRISTOL, PA						
Project Manager for Monitoring Firm		Tele	phone	No.	Telephone No.	19007	License No.			-	
MARK JENKINS		550		5-5810	215-788-6040		00509				
Start Date (10)	Scheduled	Comple	tion Da	ate (11)	Name of OSHA M						
10 /15 /12	11	/ _2	/	12	BRISTOL ENV	/IRONMENTA	L, INC.				
Occupancy Status During Abatement (					Street Address						
☐ Facility Closed/Vacated During Enti	re Period o	Abate	ment		1123 BEAVER	STREET					
Abatement Performed Outside of No Time of Abatement: 8:00 AM-5:00 F	ormal Facili	ty Hou	's - Des	scribe	City, State, Zip Co	de					
		101			BRISTOL, PA	19007					
Scope of Work (Check all that apply)					☐ Full Contr	ainment with Neg	estive Deserve				
≥3 sf or ≥3 lf		enovat	2007		Mini-Encle     Mini-Encle	osure	alive Pressure				
≥160 sf or ≥260 If	□D	emolitio	n		☐ Glovebag	Procedure	n-Friable Procedure				
		Locat	ion	1	□ Non-Exem	ipted ( ) and Noi	n-Friable Procedure	_	-4		
Location of		Norma			Description of	1			atem		_
Asbestos-Containing Material (ACM TO BE ABATED	) os Ma	ed Sole aintena			stos Containing Mate		Amount	en	Repair	H	inc.
IN Facility	Cus	todial	Staff?	(i.e	., thermal systems in surfacing, VAT,		(Specify SF or LF)	Removal	ai-	apsı	Enclosure
(13)	Yes	(12) No	NI/A	-	other miscellaneo		0. 0. 1.	-		Encapsulate	6
8 <sup>TH</sup> FLOOR ROOM 851	Ies		N/A	DIDE IN	SULATION/FITTII	NCS	00.1.5	57	_	_	_
9 <sup>TH</sup> FLOOR ROOM 951					SULATION/FITTI		80 LF				
10 <sup>TH</sup> FLOOR ROOM 1051			H				80 LF				
				FIFEIN	SULATION/FITTII	NGS	80 LF		Ш	Ц	Ц
Name of Registered Waste Hauler				ļ., , , , ,							
SERVICE TRANSPORT GROUP	INC	100	JDEP V auler ID		Cubic Yards of Waste	Name of Regist					
City, State	, 1140.		20990			MINERVA L	ANDFILL		-00		
NEW CASTLE, DE 19720					Disposal Date	City, State					
Completed By (Print or Type)	Title					WAYNESBU	JRG, OH 44688				
PATRICK T. DeCARO	Title ESTIMA	TOP			Signature	n no	Date	,	1		
SB-41 0 0 12 A 75	EQ 1 11417	NOR			Patrick	1.00	aroff 1	0/1	/10	2	

(Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) 10-2-2012 **Tower Management** Agencies Notified Type Notification Street Address 680 Kinderkamack Road **EPA** Initial City, State, Zip Code DEP Amended × DOL Amendment # River Edge, NJ 07661 Emergency (including Name of Contact DOH justification) David DCA Cancellation FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Ivy Towers - Boiler Rooms School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, × 1-5 Howard Drive etc.) City (5) Square Feet # of Floors Bldg. Age 50+ Bergenfield Current Use (Prior if being demolished) County (6) County Code (7) (STATE USE ONLY) Bergen Apartments Name of Monitoring Firm Hired by Building Owner (8) Name of Abatement Contractor (9) ASCM No. n/a Jadar Contracting LLC n/a Street Address Street Address n/a 22 Troy Lane City, State, Zip Code City, State, Zip Code n/a Lincoln Park, NJ 07035 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. n/a 973-706-7950 01088 n/a Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 10-11-2012 Jadar Contracting LLC 11-15-2012 Occupancy Status During Abatement (Check Only One) Street Address 22 Troy Lane Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code × Other - Describe: 9 am - 5 pm Lincoln Park, NJ 07035 Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf Renovation Full Containment with Negative Pressure ≥160 sf or ≥260 lf Mini-Enclosure Demolition Glovebag Procedure Non-Exempted (\*) and Non-Friable Procedure Abatement Is Location Type Normally Location of Description of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Encapsulate Maintenance/ Enclosure TO BE ABATED (i.e. thermal systems insulation, (Specify Remova Custodial Staff? surfacing, VAT, or SF or LF) In Facility (12)other miscellaneous) (13)Yes No N/A \*PLEASE SEE ATTACHED \*PLEASE SEE ATTACHED NJDEP Waste Cubic Yards Name of Registered Landfill Name of Registered Waste Hauler Hauler ID No. of Waste **GROWS Landfill** Jadar Contracting LLC 0033137 TBD City, State Disposal Date City, State **TBD** Morrisville, PA 19067 Lincoln Park, NJ 07035 Completed by Signature Title Date 10-2-2012 Lillie Lazarevich Secretary



### RECEIVED

Jadar Contracting
New Jersey Dept. of Labor Lic# 01088
22 Troy Lane, Lincoln Park, NJ 07035
TEL (973) 706-7950 FAX (973) 706-7951
jadarcontracting@verizon.net

2012 OCT -4 AM 7: 33

ASBESTOS CONTROL

& LICENSING

Block 268, Lot 5 - All buildings are located on the same block and lot.

### Scope of work:

Boiler Room 1, (20 Howard Drive) Removal of 250 SF of Boiler Insulation

Boiler Room 2, (89 Liberty Street) Removal of 250 SF of Boiler Insulation

Boiler Room 3, (78-16 Marsi Lane) Removal of 300 SF of Boiler Insulation

Boiler Room 4, (87 Howard Drive)
Removal of 400 SF of Boiler and Bridging Insulation

Boiler Room 5, (54-60 Howard Drive)
Removal of 400 SF of Boiler and Bridging Insulation

\*All work will be conducted under full containment and negative air procedures.

REN Bagproj.#	1EMBER – MA 2012-189	AIL IN HA	ARD CO	Motificat ursuent t EME	State of ion of Asbe to NJAG-84 RGENC	stos /	Abatement ad 12:129-7) on Sub-8	******	Check#	5536 TOA		1	The second second	_
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10 18 1/11 16	1/11/21			City Uni		J   -	AU 1. DA	, [		- 00m	4	_		
Agencies Notified	Type Notification		et Address			STO	S CONTRO	1	OCT-1	1,2017	1			i.
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☐ DEP		40 00000	State, Zip	Code			1	: 1 L	1044	PPP	OV	FIJ	7	
☑ DÒL	Amendme	ent J	ersey City	, NJ 073	05			MA	VIEW Phone		-			
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☐ DCA	Cancellati	on   I	Darren Sp	itzkoff			4		<u>. L</u>					
		=		FACILI	TY INFORMA	ATION	ř	#*************************************					Str 1579-14	
			2 (3)					Тур	e of Facility (4	)		*03		
Name of facility w	here abatement is	taking plavi	= (2)							(K - 12)		V.	2)	
Rossey Hall (n	on sub 8)								Subcho	pier 8 (Oi rivate/Ce	ner um mmen	an Ne	-1	
Street Address									Bldgs./h	tomes, et	e.			
2030 John F K	ennedy Bouleva	rd			•			Sq	unre Feet	of Floor	, 1	Bld	J. Age	9
City (5)	, , , , , , , , , , , , , , , , , , , ,	Count	(B)				ty Code (7)	_		- 16		linha	0	
Oily (-)/						(State	use only)	Cu	rrent Use (Pr niversity (no	n sub 8)	) neur	ijisi iet	,,	
Jersey City, N	U 07305	Huds		-	ASCM No.	П	Name of Abatemer			17 000 -7	-			
Name of Monitori	ng Firm Hired by 8	idg, Owner	(8)	1	A STREET, CO.	- 11	B& G Restora							
McCabe Envir	ronmental	-			00118	ᅴ	Street Address	iidii, iii						
Street Address							105 Ryerson R	oad	0.50eV = 4-1/2007					
464 Valley Br	ook Avenue				g		ity, State, Zip Cod	le				-		
City, State, Zip Co						-	Lincoln Park,		135			1833		
Lyndhurst, NJ	or Manitoring Firm		I Pho	ne Numbe	ar .		Telephone Numbo	r		License	Numb	BL		
	or infollitoring 1 mm			1) 438-4			973-696-6869			0378				
James Ruff	C1- (18)	Sched		n Data (11			Name of OSHA M							
Scheduled Start C	apple (10)			,,,,,		-	B & G Restora	ition, li	IIC.				-	
10/1/2012		10/5/2				-	105 Ryerson F	hood						
Facility clos	s During Abatemen ed/vacated during performed outside	entire perfo	d of abate	ment. s-			City, State, Zip Co.	de		The second				
Describe:	ribe star job 9 30	pm				=11	Lincoln Park,	NJ 070	)35				-	
	oheck all that apply						• •			-				
Demolition		Renovation	π			2000	ult Containment w/	negative	bressure (	Glove				
≥3 sf or >3	if $\square$	-160 sf or	-260 If			⊠ v	fini-enclosure			Non-	riable p		_	1
Lucation of		Is location	normally i	used solely							a	R	E n	E
asbestoz-co	ontaining	by mainte staff(12)	mance/cus	todiai			sbestos-containing		Amount (Specify 5	F or	m	å L	α	G
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Spared III is	outy (10)	Yers	740	NA				_			e	ŕ	П	П
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Registered Wast	e nauter ation. Inc.	19:		19711	2 yards		Tullytown Re	source	& Recovery	Center		_		
City, State				Disposal I			City, State							
Lincoln Park	, NJ 07035			10/5/12			Tullytown, P			Date				- N
Completed by (F		litle			Signature		Gordana Lun	NOP .		10/1/	12			
Gordana Lun	ia	Treasure	ži		J						- 147-43.00			

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State of NJ

Notification of Asbestos Abatement

8 & G proj. #:	2012-189			Pursuan) TAT	FRATION OF N	3:60	and 12:120-7)	, m	Checi	¢ # 5536				
Data adMaticastica	/4)								-			_	_	
Date of Notification		N	ame of Bu	ilding Owne	r/Operator 🎢	112 01	T-4 AM 7:	NERDE	Pid soH to te	PHOTEU Ith & Conic	or Care	icpe		
10 18 1/116			New Jers	ey City U	niversity		1 4 AM 7:	34 700	1	13000	11	/ 1000		
Agencies Notified	Type Notificat	on S	reet Addre	989	AS	BF	The ob.		1. 10	ignature) .	11:5			
☐ DEP	M Initial	1 1	251 Wes	t Side Ave	nue	& [	TOS CONTR ICENSING	O Date:	000	Time:	1313	<u>rn</u>	- 1	
⊠ DOL	☐ Amenda			ity, NJ 07	205									
ноа 🔀		N	me of Co		303			-	Telepho	ne Numbe	F	_	-	- nelse
□ DCA	☐ Cancella	14												
			Darren	Spitzkoff			200				-			
				FACI	_FTY INFORM	MATION				7023010				333=(1
Name of facility wh	ere abatement i	s taking pla	ce (3)					Туре	of Facility Scho	(4) ol (K - 12	,			
Rossey Hall (no	n sub 8)								<b>≓</b>	hapter 8 (6		han K	-17)	
Street Address		•								(Private/C			-12)	
000011 776	1 5 1	,							Bldgs	/Homes,	eto,			
2039 John F Ke	mnedy Boulev	***	ty (6)			1 0		Squa	re Feet	# of Floo	rs	В	dg. A	ge
City (5)		Cour	ity (o)				nty Code (7) te use only)	Curr	nt Dec (	Prior if bei	- de		mat)	
Jersey City, NJ	07305	Hud	lson			,	,,	1		non sub 8		101134 I	cuj	
Name of Monitoring		Bldg. Owne	er (8)		ASCM No.	$\vdash$	Name of Abatemer	1					maintered t	
McCabe Enviro	nmental				00118		B & G Restoral	tion, Inc.						
Street Address				<del></del>	¥=====	$\exists$	Street Address							
.464 Valley Bro	ok Avenue						105 Ryerson R	oad						
City, State, Zip Code	e						City, State, Zip Cod	е						
Lyndhurst, NJ (			27.98.3. Y	DOM TO ANA	OPPORTUGAÇÃO		Lincoln Park,				~***			
Project Manager for	Monitoring Firm	3	P	ione Numbi	<u>e</u> r		Telephone Number			License 0378	Num	ber		
James Ruff			7 C	201) 438-4			973-696-6869 Name of OSHA Mo			03/8	-		-	
Scheduled Start Da	te (10)	Sched	. Completi	on Date (11	)		B & G Restora							
10/1/2012		10/5/	2012				Street Address			0.00				
Occupancy Status I	and become seeing and a second contraction of the second			38.00 - N - 3.00			105 Ryerson R	oad						
Facility closed  Abatement pe  Describe:	I/vacated during Informed outside						City, State, Zip Cod	ę		***			•	
Other-Descrit	e: start job 9:30	pm					Lincoln Park, l	NJ 07035						
Scope of Work (ch	eck all that appl	y)					****							
Demotition	$\boxtimes$	Renovatio	n			□F	uli Containment w/n	egative pr	essure	<b>⊠</b> Glove	bag pr	oced	ure	
<b>⊠</b> >3 sf or >3 lf		≥160 sFor	280 If			⊠ n	fini-enclosure			☐ Non-	riable	proce	dure	
Location of				used solely				T		~~	IK	R	E	Ε
asbestos-cont material to be	aining	staff(12)	nance/cus	andial			sbestos-containing	1	Amount	CE or	e m	p	G G	R
abated in facili	ity (13)	Yes	Na	N/A	material	(ACM)			(Specify LF)	SF or	O V	a	a	C L
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Registered Waste H	auler	[NJDE	P Hauler	ID# C	ibic Yards of	Waste	Name of Registers	d Landfill					IL.	hud
B & G Restoration	on, Inc.		63		yards		Tullytown Rese		tecover	y Center				
City, State Lincoln Park, N	J 07035			Disposal D 10/5/12	ate		City, State Tullytown, PA	6		10				
Completed by (Print	t or Type)	Title			Signatura		Gordona Suna			Date				-
Gordana Luna		Treasure	г		F-		Gordona Iuma			10/1/1	2	<u> </u>		

#### State of NJ

Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7) 2012-189 B & G proj. #: **EMERGENCY Non Sub 8** Date of Notification (1) Name of Building Owner/Operator (2) 0 8 / 1 6 / 1 2 New Jersey City University Agencies Notified Type Notification Street Address ☐ EPA X Initial 251 West Side Avenue DEP City, State, Zip Code Amendment DOL Jersey City, NJ 07305 DOH DOH Name of Contact Telephone Number Cancellation DCA Darren Spitzkoff **FACILITY INFORMATION** Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) Rossey Hall (non sub 8) Subchapter 8 (Other than K-12) Street Address Other (Private/Commercial Bldgs./Homes, etc. 2039 John F Kennedy Boulevard Bldg. Age Square Feet # of Floors County (6) City (5) County Code (7) (State use only) Current Use (Prior if being demolished) Hudson Jersey City, NJ 07305 University (non sub 8) Name of Monitoring Firm Hired by Bldg. Owner (8) Name of Abatement Contractor (9) ASCM No. 00118 B & G Restoration, Inc. McCabe Environmental Street Address Street Address 105 Ryerson Road 464 Valley Brook Avenue City, State, Zip Code City, State, Zip Code Lyndhurst, NJ 07071 Lincoln Park, NJ 07035 Project Manager for Monitoring Firm Telephone Number Phone Number License Number 973-696-6869 0378 James Ruff (201) 438-4839 Name of OSHA Monitor Scheduled Start Date (10) Sched. Completion Date (11) B & G Restoration, Inc. 10/5/2012 Street Address Occupancy Status During Abatement (Check only one) 105 Ryerson Road Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Other-Describe: start job 9:30pm Lincoln Park, NJ 07035 Scope of Work (check all that apply) Demolition Renovation ☐ Full Containment w/negative pressure ☑ Glovebag procedure  $\boxtimes$  >3 sf or >3 lf Mini-enclosure >160 sf or >260 lf ■ Non-friable procedure Is location normally used solely Location of by maintenance/custodial e e n asbestos-containing Amount Description of asbestos-containing m n staff(12) p C material to be (Specify SF or material (ACM) 0 a abated in facility (13) a Yes No N/A V e SEE ATTACHED LIST Registered Waste Hauler NJDEP Hauler ID# Cubic Yards of Waste Name of Registered Landfill B & G Restoration, Inc. 19563 2 yards Tullytown Resource & Recovery Center Disposal Date

City, State

Tullytown, PA

Gordana Luna

Date

10/1/12

10/5/12

Signature

City, State

Lincoln Park, NJ 07035

Completed by (Print or Type)

Gordana Luna

Title

Treasurer

RECEIVED

Project location:

ROSSEY HALL, New Jersey City University

AM 7: 35

Start date:

6th floor restroom:

Remove pipe fitting insulation from 2 fittings (pipe to remain)

Wrap & cut an estimated 35 If of insulated piping w/acm fittings

5<sup>th</sup> floor restroom:

Wrap & cut an est. 2 If of insulated piping w/acm fittings intact

at the floor drain located near ceiling

4<sup>th</sup> floor restroom:

Remove pipe fitting insulation from 2 fittings (pipe to remain)

Wrap & cut an est. 25 If of insulated piping w/acm fittings intact

3<sup>rd</sup> floor restrooms (2)

Wrap & cut an est. 2 If insulated piping w/acm fittings intact

At the floor drain located near ceiling at 2 bathrooms

2<sup>nd</sup> floor restroom:

Remove pipe fitting insulation from 2 fittings (pipe to remain)

Wrap & cut an estimated 25 If of insulated piping w/acm fittings

intact

Ground floor restroom: -

Remove pipe fitting insulation from 2 fittings (pipe to remain)

Ground floor custodian closet:

Remove pipe fitting insulation from 3 fittings (pipe to remain)

CHECK# 24935

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

Date of Notification (1)	/28/12			Name	of Buildin	g Owner/Operator	(2) ornelia Cumr	mings 2012 Nr	7	,		3 mg
Agencies Notified	Type Notific	cation		Stree	t Address		omena Cuilli			4	H	7: (
<b>⊠</b> EPA	☐ Initial						665 Rosedale	Rd SBFS	TO	· -		
DEP DOL	Amenda	nent #	<u>_</u>	City,	State, Zip (		inceton, NJ 0	TO GL	ICE	KS	ING	RC
M DOH □ DCA	justifica	tion)		Name	of Contac	t nelia Cummin	σς	Telephone Numb	er		-	
				FΔ		ORMATION	<u> </u>		_		=	_
Name of Facility Where	Abatement is	Taking Place	e (3)				Type of Facility	(4)				
							School (K-1	2) 8 (Other than K-12	n.			
Street Address	665	Rosedale	Roa	d				orivate & commercia		dings		
City (5)		Princeto	n				Square Feet 2800	# of Floors	В	ldg. A	lge	
County (6)		Timeeto	11	Cou	nty Code (	7) (STATE		rior if being demolis	hed)			
N	1000			USE	ONLY)			Residence				
Name of Monitoring Firm (8)		lding Owner		ASCM	No.		nent Contractor (9	nental Service	e Te	10		
Street Address	MECS					Street Address	ens Environ	memai Service	5, 11	IC.	_	
	P.O. Bo	x 341					PO I	30x 322				_
City, State, Zip Code	rosswicks	NI 0851	5			City, State, Zip C		n, NJ 08501	180000070			
Project Manager for Mo		113 0051	AND UNION	phone	No.	Telephone No.	Tinento	License No.				-
5. (0.752)		Jr.	0 000		8-4070		59-9688	0	049	3		
Start Date (10)					ite (11)	Name of OSHA		TCC			3010000	
10/2/12			10/4/	12			M	ECS				_
		30 30	3 37./.	ment		Street Address	P.O. 1	Box 341				
	ed Outside of N	Normal Facili				City, State, Zip C	ode	ks, NJ 08515				
Scope of Work (Check										_		_
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf						Mini-En Gloveba	ag Procedure	gative Pressure on-Friable Procedur	·e			
											ment	
Location	of	Used	Sole	y by		Description of				Тур	je I	_
Asbestos-Containing TO BE ABA		,			Asbes	tos Containing Ma thermal systems i	terial (ACM)	Amount (Specify	Re	Repair	Enc	Enc
IN Facilit			Staff?		(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	surfacing, VAT	or	SF or LF)	Remova	pair	Encapsulate	Enclosure
(13)		Yes	No	N/A		Other miscellane	Jusy		<u> </u>		ulate	Те
Attic	>			×	duct i	nsulation (wra	ap and cut)	60 LF	×			
Crawlsp	ace			×		Pipe Insulat	ion	20LF	×			
Crawlsp	ace					Duct Insula	tion	3SF	×			
Attic						uct Insulation		20LF	×			
Name of Registered Wa		ulassis.	1 +	JDEP Lauler ID	No.	Cubic Yards of Waste	Name of Regi		ال س	<b>211</b>		
City, State	mental Ser	vices inc.	÷L.	182	292	3 CU Disposal Date	City, State	R.F., Inc. L	andi	111		_
Oity, State	Allentov	vn, NJ				10/4/12	ony, State	Tullytown, l	PA			
Completed By		Title	nias	+ Ma-		Signature	M/)	Date	9/28	2/12		
Mahlon E. Sto	Initial Amended Amendment # Emergency (including justification) Cancellation  Amendment # Emergency (including justification) Cancellation  Amercer  665 Rosedale Romander  Princeton  Mercer  Firm Hired by Building Owner MECS  P.O. Box 341  Crosswicks, NJ 08515  Monitoring Firm Weisgarber Jr.  Scheduled Comp 2  10/4  During Abatement (Check only one) Cacated During Entire Period of Abatement Outside of Normal Facility Howeld Entire Period of Abatement Outside of Normal Facility Howeld Entire Period of Abatement Outside of Normal Facility Howeld Entire Period Outside of Normal Facility Howeld Entire Period Outside Outside of Normal Facility Howeld Entire Period Outside Ou				lager	-1/1/			1120	)/ 1 Z		

Date of Notification (1)		Na	me of Buildi	ing Owner/C	)norator (	(S)	Con.	进门	114		ED	
9/28/2012			rough of		perator (			017	4 0			
Agencies Notified Type Notificatio	n	- 1	eet Address				4531	27		7	a:	)
EPA Initial Amended			Cooke A			₹.	હ	LIOS	Cn	17.		
DOL Amendmen			y, State, Zip arteret NJ					- ICEN	SIN	R	<u>OL</u>	
DOH Emergency justification		Nai	me of Conta	ıct			Tei	ephone N	ımhei			
DCA Cancellation		Su	isanne Er	rickesen			1	opriorio (1	umber			
Name of Facility Where Abatement is Taki	ng Place (3)		FACILITY IN	NFORMATIO		Tuno of Facility	- (4)					
Private Property					١.	Type of Facility	2070-50					
Street Address				-		School (K. Subchapte	er 8 (Oth	er than K-	12)			
63 Cooke Ave						Other (i.e. etc.)	private 8	& commerc	cial bu	ilding	s, hor	nes,
City (5) Carteret						Square Feet	1000000	Floors	T	Bldg.	Age	1745-2
County (6)	<u> </u>	LCar	enter Onder (5			2500	2			+50		
Middlesex			inty Code (7 ATE USE ON		_   '	Current Use (Pr	rior if bei	ng demolis	shed)			
Name of Monitoring Firm Hired by Building	Owner (8)	I A	SCM No.	T	Name of	f Abatement Co	ontractor	(9)				-
n/a		n	/a		First P	hase Group	Inc	(0)				
Street Address					Street A							
City, State, Zip Code						2nd Street su	uite #16					
n/a						te, Zip Code New York No	J 07047	7				
Project Manager for Monitoring Firm		Tele	phone No.		Telephor		1	License N	No.	-		
n/a		n/a			201-75	58-7158		001144				
Start Date (10) 10-10-2012	Scheduled 10-17-20		ion Date (11			OSHA Monitor						
Occupancy Status During Abatement (Che		\$1.50 mg.			Street Ad	nvironmenta	Corp					
Facility Closed/Vacated During Entire	Period of Aba	atement				Route 22 We	st					
Abatement Performed Outside of Norr  Other – Describe: 8 Hours	nal Facility H	ours		-	City, Stat	te, Zip Code					_	
					Union	NJ 07083						
Scope of Work (Check All That Apply)  ≥3 sf or ≥3 lf	To   _											
≥ 160 sf or ≥260 lf	-	ovation nolition			Ê	Full Containm Mini-Enclosure	ent with	Negative F	ressu	ire		
	-					Glovebag Pro	cedure					
	Isto	cation				Non-Exempte	d (*) and	Non-Friat	le Pro		e emen	t
Location of	Nor	mally		Desc	ription of				L		/ре	
Asbestos-Containing Material (ACM) TO BE ABATED	Mainte	Solely by enance/	ASDE	estos Contai e. thermal sy	ning Mate	erial (ACM)		nount	_		ш	
In Facility		ial Staff? I2)	(1.0	surfacir	ng, VAT,	or		ecify or LF)	Removal	Repair	тсар	inclo
(13)			_	other mis	scellaneo	us)			oval	air	Encapsulate	Enclosure
1 of floor	Yes N	No N/				i	344.54		2		Ö	
1st floor		×		floor tile	and ma	stic	20	000	x	4		
		_										
						3					8	
Name of Registered Waste Hauler		NIDES	2 \\/o=t=	1000	and a							,
Asbestos Transportation Company		Hauler		Oubic Ya				ed Landfill				
City, State		24310				Minerva		orises				
City, State Shirley NJ 11967				Disposal	Date	City, State Waynes		H 1160	2			
Completed by	Title			Sign	nature	vvayiles	, buly C	Dat				
Edwin Precilla	Project I	Manag	er	9.	8	lu	12		28-20	12		
	-						1. 0					

				S	state of New Jers	· OV	T ==					rint l
				ICATIO	N OF ASBESTO	SABATE	EMENT (C)	DEIVED	CV	+	21	11
Date of Notification (1) 10/02/12				Name La To	of Building Owner orre Constructi	/Operato		7 44 7 -		_+1	$\alpha_{ll}$	00
	Notification Initial			Succi	Address Springfield Roa	ad 🌮	A SBESTO.	S CONTRO				
DEP DOL	Amended Amendment #_ Emergency (in				ate, Zip Code worth, NJ 070	33	- CILE	KSING	•			
X DOH	justification) Cancellation			Sarah	713			Telephone N	Number			
Name of Facility Where Abaten Residential Property Street Address 611 Springfield Road	nent is Taking I	Place (	3)	FAC	ELITY INFORMA	TION		` '		ilding	s, hon	nes,
City (5) Kenilworth							etc.) Square Feet 2,100+	# of Floors	T	Bldg. 50+	Age	
County (6) Union					Code (7) USE ONLY)		Current Use (Pr	ior if being demol	ished)			
Name of Monitoring Firm Hired	by Building Ow	vner (8	)	ASCI	M No.		of Abatement Co amid Contractir					vestilin es
Street Address							t Address Sargeant Aver	nue		<del> </del>		
City, State, Zip Code							State, Zip Code on, NJ 07013					
Project Manager for Monitoring				Telepho			hone No. 689-6281	License 01099	No.		*	
Start Date (10) 10/12/12	1	0/12/	12	npletion	Date (11)		of OSHA Monitor Environmenta		LLC			
Occupancy Status During Abate Facility Closed/Vacated Du	uring Entire Per	riod of	Abaten	nent			Address Route 22 We	st				
Facility Closed/Vacated Du Abatement Performed Outs Other – Describe:		Facility	y Hours			1000	state, Zip Code n, NJ 07081					100
Scope of Work (Check All That A ≥3 sf or ≥3 If ≥160 sf or ≥260 If	Apply)		Renova Demolit			×	Mini-Enclosure Glovebag Prod	7			re	
Location of			Locati Normal		Do	corintian				Abat	emen ype	t
Asbestos-Containing Materia TO BE ABATED In Facility (13)	al (ACM)	Use Ma	ed Sole intenar todial S (12)	ly by nce/	Asbestos Con (i.e. therma surfa		faterial (ACM) s insulation, T, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
Bacament	Yes					Inquila	4i a us	0015	ļ.		e e	(D

≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	Renova Demolit		×	Mini-Enclosure Glovebag Prod				re	
Location of		Locati Normal	ly	Description of				Abate	emen /pe	t
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	ed Sole aintenar stodial S (12)	nce/	Asbestos Containing Mate (i.e. thermal systems ins surfacing, VAT, o other miscellaneou	sulation,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A				<u>a</u>		ate	8
Basement			Х	Pipe Insulation	1	90 LF	х			
Name of Registered Waste Hauler Pyramid Contracting Corp.	1	H	JDEP Waller ID I		TO VOICE WEST SET OF	Registered Landfil	ı			
City, State Clifton, New Jersey				Disposal Date 10/12/12	City, State Morrisvi	H <del>o</del> , Pennsylva	nia			
Completed by Dimo Golcev	Title Gene	eral Ma	anger	Signature	16	1/ / //	ate 0/02/1	2		
ASB-41 (R-06-08)				Do not use	e this form for	asbestos licensur	e exem	pted a	activit	ies.

### NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7)

RECEIVE Pheck # 6912

				\$0,000,00						ا المرية ساة ا	-IAC	<b>⊈</b> hecl	(#6	912	2
Date of Notification (							perator (2)	or Affaira	2812	005					
	9/28/12					part	ment of Milita	ary Anans	2012	ULI -L	AM 7:	32			
Agencies Notified	Type of Notifica			Address		oooi	na Dood								
[] EPA	[X] Initial	1	UIE	ggen	S CI	OSSI	ng Road		ASB	ESTOS	CONT	וחכ			
[] DEP	Notification		ity St	ate, Zip	Code				PA &	LICE	KSING	IUL.			
[X] DOL	[] Amondod	- 50	9-100	encevi			8648		V D		MOING				
[X] DOH	[] Amended Notification		.avvi	JI IOC VI	iiic, i	140 0	0040								
[] DCA			lame o	of Conta	ct			*	Telepho	one Numb	per				
[] DOX	[] Cancellatio	n   V	Villia	m Mcl	Bride	е									
	4				EACI	ILITY	INFORMATION	200-10-2-10-20-20-20-20-20-20-20-20-20-20-20-20-20							
Name of Facility M/ha	ro Abatament in T	dring Dia	20 (2)		TACI	ILIT	INFORMATION	Type of Fa	noility (A)				_		
Name of Facility Whe	re Abatement is 1	aking Pia	Ce (3)					[] S	chool (K-12)	)					
Sea Girt NGTC									chool (K-12) ubchapter 8 other (i.e. pr	(Other th	nan K-12) commercia	l build	inas		
Street Address	0.50000000							[^] F	omes, etc.)	ivate and	COMMITTER	Duna	go	•	
381 Sea Girt Av	enue/							C F-	-4 14	of Floors	I pi	da Aa	_		
City (5)		County	(6)		- 13	Count	ty Code (7)	Square Fe	et #	of Floors		dg. Ag 50	е		
Sea Girt		Monn		1		(STA	TE USE ONLY)	Current Us	se (Prior if b	eing dem					
							OLD 18-25-19751 00-0	Offices, tra	aining center				50-0		
Name of Monitoring F	0.70		4.	ASCM N			Name of Abatem		100		5 70				
Whitman	Companies,	Inc.	(	0110				Jupiter En	vironme	ntal Se	rvices, li	nc.			
Street Address						7 [	Street Address								
7 Pleasant Hill I	Road					_		3 Lynn Co	urt						
City, State, Zip Code							City, State, Zip C								
Cranbury, NJ 08								Lincoln P	ark, NJ C	07035					
Project Manager for M	Nonitoring Firm			Numbe			Telephone Num				License 1				
Kevin Lovely				)-5858		_		973-709-	0200			0	08	52	
Scheduled Start Date 10/8/1		d. Comp 10/	letion 12/1		1)		Name of OSHA	Monitor J&S En∖	vironmen	tal Lab	oratories	s, LL	С		
Occupancy Status Du	uring Abatement (C				ment	11	Street Address	2333 Rou							,
	erformed Outside					1			LE ZZVV						
	cribe:			AND CARE O			City, State, Zip C		1 07002						
[x] Other – Des	cribe: partially vac	ated						Union, N.	07003						
Scope of Work (Chec	k all that apply)							VERN	000 0000 10		80 8808 <b>1</b> 860	555W			
[] Domolition					Don			[]			ith Negative	Press	ure		
<ul> <li>[ ] Demolition</li> <li>[x] ≥3 sf or ≥3 lf</li> </ul>				[]	Ken	novatio	on	[]	Mini – End Glovebag		e				
[x] ≥3 sf or ≥3 lf [] ≥160 sf or ≥2								[x]	Non – Fria						
.,		le	Locat	ion								A	oate	mer	nt
			mally				Desc	ription of					/ре		
Location		5	Solely	by				<ul> <li>Containing</li> </ul>			Amount	R			E
Asbestos – C				ce/Cus				al (ACM) mal systems			(Specify SF or LF)	E M	E P		C
Material ( TO BE A		todia	al Staf	1 (12)				urfacing, VA	Т		or or Liry	O	A	A	L
In Fac				T	1			iscellaneous)				V	li	P	ō
(13)		Yes	No	N/A								Α	R	S	S
												L	$\sqcup$	U	U
Mess hall hallway			X		VAT						00 SF	X	$\vdash$		
Bldg 35 – two lobbio	es		X		VAT	T mas	stic			2	40 SF	X	$\sqcup$		
													Ш		
Name of Registered V		1000	DEP V	CONTRACTOR OF THE PARTY OF THE			c Yards		Registered I						
Jupiter Environn	nental Service		uler IE )4782	) NO.		Of W	aste 3	Minerv	a Landfil	I					
City, State			, +1 02		-	Dien	osal Date	City, State	9			-			_
Lincoln Park, No	ı						12/12		sburg, O	Н					
Completed By (Print o		Title				101	Signature	11.05.10		••	Date				
Pane Repic		1000000	eral	Manag	ger			( .	_		9/28/	12			
. and reple		0011	J. UI	.viaila	901		1 17		(		5.257				

### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

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

Date of Notification (1) 10/02/12		Building Owne University	r/Operat	tor (2)	KE	CE	WE	n			
Month/Day/Year				Ameeton	Chitcisity		200				
Agency Notified	Type Notifica	tion		Street Ad	dress		20	<del>12 OCT</del>			
EPA	1337	tial		P.O. box				1.001	-4	AH 5	: ia
DEP		otifica	tion				Α.	200-			18
DCA	1	otmea endec	100000000	0.000	te, Zip Code		AS	BEST phone H	OS c	ONT.	
DOH			100		NJ 08543			& 1 H	-	UNII	30F
DOH	100	otifica ncella	(12/0/10/2)	Name of O			Tele	phone Ne	HINDEY J	ING	٠.
					TY INFORMA	TION					
Name of Facility Where Abat	tement is Takin	a Dlac	0 (3)	TACID	TT INTORNE	TION	UT				
Princeton University - 87 P			e (3)				Type of Facility (4) School (K1	2)			
2. meeton curveronty o/ 1	rospect - Room	107					x Subchapter		thon L	(12)	
Street Address							Other (i. e.				
Main Campus							buildings,			CI CIMI	
								Floors	Bldg.	Age	
City (5)	Cor	inty (	(6)		County Code	(7)	20000	4	50+	S-7	
Princeton					(STATE USE ON	LY)	Current Use (Prior if	being der	nolishe	d)	
Name of Monitoring Firm Hi	rad by Duilding	Own	o= (0)		ACCM N	IIs	University	(0)			
Pennoni Associates Inc	rea by Building	Own	er (8)		ASCM No.		e of Abatement Contract				
							ciated Specialty Contract	ing			
Street Address						2.0000000000000000000000000000000000000	t Address				
515 Grove Street Suite 1B						98 La	Crue Avenue				
City, State, Zip Code						City,	State, Zip Code				
Haddon Heights NJ							Mills, PA 19342				
Project Manager of Monitori	ng Firm			Telephone	Number	Telep	hone Number		Liceno	e Numb	er
Alan Lloyd				856-547-0	505		64-9622		1103		
Scheduled Start Date (10)		Sch	ed. Co	mpletion Date	e (11)	Name	of OSHA Monitor				
10/15/12				11/15/12			rion Labs				
Month/Day/Year				Ionth/Day/Ye	ar						
Occupancy Status During Ab	atement (Check	only	one)	1188		Street	t Address				
Facility Closed/Vacate						3370	Progresive Drive				
x Abatement Performed	Outside of Nor	mal F	acility			City,	State, Zip Code				
Hours - Describe:	7:00 AM - 7:00	) AM				Bensa	elem PA 19020				
Other - Describe:						Ш					
Scope of work (Check all that	apply)					X	Full Containment with	Negative	e Pressi	ire	
Demolition	,		x	Renovatio	n		Mini - Enclosure	· · · · · · · · · · · · · · · · · · ·	c I I Coor		
>3 sf or >3 if							Glovebag Procedure				
x >160 sf or >260 lf						x	Non-Friable Procedur				
		Is	-				Non-Friable Frocedur				_
Location of	1	ocatio	m	Doc	cription of			Ab	atemen I		Е
Asbestos - Containing	0.00	ocatio		11.055943140	os-Containing		Amount	R		E N	E N
Material (ACM)		Used	J		rial (ACM)		(Specify	E	R	C	C
TO BE ABATED		olely			ermal systems		SF or	M	E	A	L
In Facility		y Mair	n-	(489)	, surfacing, VA		LF)	0	P	P	o
(13)	400	nance			miscellaneous		Lif	v	A	S	s
, ,	200	ıstodi		or other	misceriancous	,		Å	l	U	U
	St	aff (12	2)					L	R	L	R
		No	N/A					11550	15.6	- mil	E
Basement room 107		x		floor masti	ic			x			
		+	+						_		
		+-	-								
			NJD	EP Waste	Cubic Yards		Name of Registered La	ındfill			
Name of Registered Waste Ha	uler			on ID No	of Waste						
	uler		Haul	er ID No.							
Horizon Disposal	uler		Haul	er ID No.		2	GROWS		and the second		
Horizon Disposal City, State	uler		Haul	er ID No.			GROWS City, State				
Horizon Disposal City, State	uler		Haul	er ID No.	2						
Name of Registered Waste Ha Horizon Disposal City, State Trenton NJ Completed By (Print or Type)			Title	er ID No.	Disposal Dat	e Signat	City, State Morrisville PA			Date	
Horizon Disposal City, State Frenton NJ			Title	ect Manager	Disposal Dat	e Signat	City, State Morrisville PA	L.		Date 100	1 - /

### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

8.		(	Pursuan	t to NJA	C 8:60 ar	nd 12:12	(0)	F	FO	٠				
Date of Notification (1) 10/1/12			Name of Joe V	of Buildin	g Owner/ / Reside	Operator	r (2)	2012 OL	'- (,,	EHY	ED			
Agencies Notified Type Notification	n			Address	Tar in Service Man			-012 U	7-6	+ AM			_	-
X EPA X Initial					asink [	Orive		Sare	<b>*</b> -	AIT	7: 36	,		
DEP Amended Amendme	nt#			tate, Zip	Code Irbor Tv	vn N I O	CA	& L	105	CONT	Δ-			
	y (including	3		of Contac		vp 140 0	70007		CEM	Sing	KOL	_		
DCA Cancellation			Joe	or ountai					1 16	терпо <b>же</b> г	Numbe	r		
Name of Easility Where Abote and in Til			FAC	ILITY IN	FORMAT	ION								
Name of Facility Where Abatement is Tak Joe Vincent / Residence	ing Place (	3)					Туре	of Facility (	4)					
Street Address		1000		-				School (K-1 Subchapter	2)	orthau l	(40)			
33 West Navasink Drive							붉	Other (i.e. p	orivate	& comme	(-12) ercial bi	uilding	s, hor	nes,
City (5)								etc.) e Feet	# 0	f Floors	- т	Blda	Age	
Little Egg Harbor Twp NJ 08087							1000		1			35+	rige	
County (6) Ocean			County (STATE	Code (7) USE ONL	Y)		Curre	nt Use (Pri	or if be	ing demo	lished)			
Name of Monitoring Firm Hired by Building	Owner (8)		ASC	M No.		Name	of Abat	ement Cor	tractor	(9)		-		
Street Address					<u> </u>	Pern	aco In	C						
Sireet Address							Addres 30x 32	_						
City, State, Zip Code			-				tate, Zi		_					
								n NJ 080	91					
Project Manager for Monitoring Firm			Telepho	ne No.			none No			License	e No.			
Start Date (40)	1					856-7	753-98	300		00727				
Start Date (10) 10/15/12	10/19/		mpletion	Date (11	)			A Monitor						
Occupancy Status During Abatement (Che	La Contraction (Contraction)					Same	Address							
Facility Closed/Vacated During Entire		10.0000	ment			Street	Address	5						
Abatement Performed Outside of Nor Other – Describe:	mal Facility	Hour	S			City, St	tate, Zip	Code						
Scope of Work (Check All That Apply)									07					
≥3 sf or ≥3 If		enova	ation				l son	Containme	nt with	Noostin	- D			
≥160 sf or ≥260 lf		emoli					Mini	<ul> <li>Enclosure</li> </ul>		negauve	e Press	ure		
						×	Glov Non-	ebag Proc Exempted	edure (*) and	d Non-Fri	able Pr	ocedi	ire	
		Locat									T	Aba	temen	nt
Location of Asbestos-Containing Material (ACM)		lorma d Sole			Des	scription	of				-		уре	_
TO BE ABATED		intena odial S		Asbe:	stos Cont . thermal	aining Ma systems	aterial ( insulat	ACM)		mount specify	72		E	_m
In Facility (13)	Just	(12)	Jan!			cing, VAT				or LF)	Remova	Repair	caps	Enclosure
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Floor tile			x		V. 1 11 . V. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	oor Tile				0 SF	x	+	-	-
	1								20		x	-	-	-
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Name of Registered Waste Hauler		I N	JDEP Wa	aste	Cubic `	Yards	- 1	Name of R	eniste	rod Landi	EII .	_		
United Containers		Н	auler ID I 2459		of Was	C. Land Contract of the Contra	1.	G.R.O.W	-	CU Ldii()				
City, State		_   24	-408		3 Disnos	al Date								
Elm NJ		¥			10/17/			City, State Morrisvil		19067				
Completed by	Title					gnature					Date			
Anthony T Perna	Presid	lent				/	0			1	0/4 /4	0		- 1

President

10/1/12

Date of Notification (1)			-	Mana	(D :: !:				20		15/	/~		
October 1, 2012					hael Ko		Operator O	12.00	Chec	<b>2</b> 2500	R.	E	0	
Agencies Notified	Type Notification	i		Street A	Address ond Ro	ad		P <sub>A</sub>	Check Check	ro.	AM	7: :		
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DOH DCA	Emergency justification Cancellatio	)	Ī		f Contact Dunhar			THE STREET	Te	lephone	Numbe	UL		
					ILITY INF		ION					1	-	
Name of Facility Where Residence Street Address	Abatement is Taki	ng Place (3)	)						I (K-12)					
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City (5) Freehold				***************************************				Square Fee 2100	t # c	of Floors		Bldg 70	Age	
County (6) Monmouth					Code (7) USE ONL			Current Use Residence		ing demo	olished)			
Name of Monitoring Fire MDG Environment		Owner (8)		ASCN	/ No.			of Abatement						
Street Address 1000 Maplewood I	Orive Suite 207	7					Street	Address Lippincott	*					
City, State, Zip Code Maple Shade, NJ	08052	90 <del></del>				T.	City, St	tate, Zip Code e Shade, N	e	,				
Project Manager for Mo Tony Esposito				Telephoi	ne No.	1	Teleph	one No. 755-0099	40 00002	License				
Start Date (10) September 27, 20	12	Schedule	d Con	npletion I			Name o	of OSHA Mor	nitor	00042	-			-
Occupancy Status Durin			0.000	2012			EMSI Street	Address						
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Scope of Work (Check A	All That Apply)								-			_		
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Completed by William Lynch		Title Owner				S	ignature	200	lun	2 1	Date Octob	er 1,	2012	
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Freehold							1	Square Feel 2100	1,100	Floors			g Ag	t
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1000 Maplewood Dr	ive Sulte 2	)7					Street / 47 S.	Address Lippincott A	VC.					-
ity Since / p Code Maple Shade, NJ 08	9052						City. St	atc. Zip Gode						
roject Manager for Munit				Tara	harri		Maple	Shade, NJ	08052					
ony Esposito					1000 No	00	Telepho	ne No 55-0099	1	LICENTE				
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RECENT YASE

Date of Notification (1)			Т	Name o	f Building	Owner/0	Operator	· (2)		FIVE	00	1		
10-1-2012					el Realty									
Agencies Notified	Type Notification		+	Street A	Address		1125-1025-	2012	OCT -	-4 AM 7	1: 41	9		
□ EPA	Initial			7002	D East						51400			
DEP	Amended		t	City, Sta	ate, Zip Co	ode		458	ESTO	S CONT	DO		200	
DOL	Amendment		_	Gutte	nburg, N	NJ 0709	93	48	& LIC	S CONT Ensing	NUL	•		
☑ DOH	Emergency justification)		Ī	Name o	f Contact		2	- 1/	Te	lephone Nur	nber			
DCA	Cancellation			Bobby	У				1		! 4			
				FAC	LITY INF	ORMATI	ION							-
Name of Facility Where		g Place (3)						Type of Facility	y (4)					
House - Abandon	ed for Demo							School (K	(-12)					
Street Address										ner than K-12				
223 Walker Street	t							Other (i.e etc.)	. private	& commerci	al buil	dings	, hom	es,
City (5)								Square Feet	# 0	of Floors	E	Bldg. /	Age	
Cliffside Park									3			50+		
County (6)					Code (7)			Current Use (F	rior if be	ing demolish	ned)			
Bergen				(STATE	USE ONLY	)		House						
Name of Monitoring Fire	m Hired by Building	Owner (8)		ASCN	/ No.		Name	of Abatement C	ontracto	r (9)			-	
n/a	et Address  State, Zip Code  ect Manager for Monitoring Firm  t Date (10)  -10-2012  Schedu  10-15  upancy Status During Abatement (Check Only Control of Section 1)  Facility Closed/Vacated During Entire Period of			n/a			Jada	ar Contracting	g, LLC	0.5				
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City, State, Zip Code	r, State, Zip Code a lect Manager for Monitoring Firm a						City, S	State, Zip Code	1					-
n/a							Linc	oln Park, NJ	07035					
Project Manager for Mo	nitoring Firm			Telepho	ne No.		Teleph	none No.		License N	0.			
n/a				n/a			973-	706-7950		01088				
Start Date (10)		Scheduled	Cor	npletion	Date (11)		Name	of OSHA Monito	or					.V-46-5
10-10-2012		10-15-2					Jada	ar Contracting	g, LLC					
Occupancy Status Duri	ng Abatement (Ched	k Only One	)				Street	Address						
Facility Closed/Va	cated During Entire	Period of Ab	aten	nent			22 T	roy Lane						
Abatement Perform	med Outside of Norm	nal Facility H	lours	5			City, S	tate, Zip Code						
Other – Describe:	9am - 5pm						Linc	oln Park, NJ	07035					
Scope of Work (Check	All That Apply)	***************************************												
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× ≥160 sf or ≥260 lf		× De	molit	ion			-	Mini-Enclosu						
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Name of Registered Wa	aste Hauler		IN	JDEP W	aste	Cubic	Yards	Name o	f Registe	ered Landfill	<u> </u>	L		
DJM Transport, LL			Н	auler ID		of Was			Earth					
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Date of Notification (1) 10-1-2012				f Building ty of Un	Owner/O ion	perato	r (2)	20	12 oc	· ·	E	Ó		
Agencies Notified Type Notification  EPA Initial	n		Street A 10 Eli		Town P	laza		45	BFCT	T-4 AM	7:	61		
DEP Amended Amendme				ate, Zip Co oeth, NJ				£0 .	& LIC	ENSIN	TRO	<u></u>		
□ Emergence     i justification     □ DCA     □ Cancellation	1)`		Name o David	f Contact					Tel	OS CON ENSING ephone Nur	nber			
			FACI	LITY INF	ORMATIC	NC			_1		-			-
Name of Facility Where Abatement is Tak Galloping Hills Service Yard	ing Place (	3)					_	of Facility School (K-						
Street Address 21 North 31st Street							×	Subchapte Other (i.e.	r 8 (Oth	er than K-12 & commerci		dings,	, home	es,
City (5) Kenilworth								etc.) re Feet	# 0	f Floors		lldg. <i>F</i>	\ge	
County (6) Union				Code (7) USE ONLY	j					ng demolish				
Name of Monitoring Firm Hired by Building	Owner (8		TASCA	4 No		Namo		tement Co			.00			
n/a	g Cwilci (o	,	n/a	1140.				ntracting		(9)				
Street Address			1				Addres	-	,					-
n/a							roy L							
City, State, Zip Code						City, S	State, Z	ip Code			577			
n/a						Linc	oln Pa	ark, NJ 0	7035					
Project Manager for Monitoring Firm			Telepho	ne No.		A CONTRACTOR	hone No			License N	0.			
n/a	T						-706-7			01088				
Start Date (10) 10-10-2012	Schedul 11-10			Date (11)				A Monitor						
Occupancy Status During Abatement (Che							Addres	ntracting	, LLC					
Facility Closed/Vacated During Entire		50.011400			1		roy La							
Abatement Performed Outside of No	mal Facility	Abatem y Hours	ient S		-		150	ip Code						
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Scope of Work (Check All That Apply)						176	72.							
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100	Is	Locati	on										ement	
Location of Asbestos-Containing Material (ACM)  TO BE ABATED In Facility  (13)	Use Ma Cus	Normali ed Sole iintenar todial S (12)	ly by nce/ staff?		Desc tos Conta thermal s surfaci other mi	ystem ng, VA	Material s insula T, or		(S	mount Specify For LF)	Removal	Repair	e Encapsulate	Enclosure
	Yes	No	N/A										(B)	
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Interior Break Room			X			VAT			10	00 SF	X			
Name of Designation of March 11		1777			T	,								
Name of Registered Waste Hauler	4 "	1)/(35463	JDEP Wauler ID		Cubic Y of Wast			20050dn 3	W17 08-0 D	red Landfill				
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City, State Kearny, NJ 07032					Disposa TBD	l Date		City, Stat		J				
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Lillie Lazarevich	Secr	etary			12	N	lie	the	ence	10	-1-2	012		

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	and co	- deli	oo Date	100	-	LARBAN	COLOS			10	Î
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	7 /				0600	EN Date	City, \$1310	RISULLES	PA	11	_
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Cancellaton				oni				
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					Cay, State, 20		1.6 /30%	
. 5-4-e 2.0 Code			50		21,000		E. N.J.C	50.12
SC. Manager to Montoring Firm		l elebtr	one No		Telephone No.	74-0472	License No	.i
	eduled Cor	wein	o Date I	<del>_</del>	Hame of OSHA		*	<del></del>
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Location of Material (ACM)	Main	enanci sloodal		Asbet	ios Containing h	e retained.	(Specil.	Home Co.
TO BE ABATED	S	18H?			sunscing. VA	(1, 0/	SFOLF	4
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Disposit Date

# Check # 7836

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

783 6			ICATIO	N OF ASB t to NJAC	ESTOS A	BATE			Inc. 2012	PE,	ce	11/	يو معج
Date of Notification (1) 9/28/2012			Name of	of Building son, Inc.	Owner/Op	perator v Telc	(2) ordiaTechr	nologies.	2012 (	מכר.		s ly	CU
Agencies Notified Type Notification			Street A	Address Felcordia					ASBF	STO	-4_	AM	7: 4
DEP X Amended Amendment		_		ate, Zip Co taway, N		4			ASBE.	LICE	S C	INC	ROL
□ Emergency (	ncludin			of Contact ric Fox	-	9-2-1		Te	lephone N	umber		UV	
Non- of Facility 186			FAC	ILITY INFO	ORMATIC	N				- 74 			
Name of Facility Where Abatement is Taking Telcordia Technologies, Inc.	Place (	(3)					Type of Faci	(7 30)A					
Street Address			779				School Subcha	(K-12) pter 8 (Otl	ner than K-	12)			
One Telcordia Drive (Bldg. 3)									& commer		ldings	, hom	ies,
City (5) Piscataway							Square Feet N/A	10 0	of Floors		Bldg.		+
County (6) Somerset				Code (7) USE ONLY	)		Current Use Communic		ing demoli	shed)			
Name of Monitoring Firm Hired by Building C Environmental Tactics, Inc.							of Abatement Coast Haz	Contracto Mat Rer	r (9)			-	
Street Address						Street	Address				5.500		
64 Broad Street City, State, Zip Code							E. 41 Street						
Matawan, NJ 07747							tate, Zip Code son, NJ 07						
Project Manager for Monitoring Firm Mr. Tom Geiger			Telepho			Teleph	one No.		License	No.		-	
	Schedu	led Con		90-2217 Date (11)			345-0022 of OSHA Mon	itor	00507				
September 14, 2012	Octob	er 30,	2012	Date (11)	- 1		same as ab						
Occupancy Status During Abatement (Check	Only O	ne)				Street	Address						
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other – Describe: Unoccupied Area (Me	al Facilit	y Hours	nent S		_	City, St	ate, Zip Code						
Scope of Work (Check All That Apply)													
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit				×	Full Contai Mini-Enclo Glovebag I Non-Exem	sure Procedure	07.0			A	
		s Locati									Abat	emen	t
Location of Asbestos-Containing Material (ACM)	Use	Normal ed Sole	ly by	Ashest		ription	of aterial (ACM)		mount		13	ре	
TO BE ABATED In Facility (13)		aintenar stodial S (12)				ystems ng, VA7	insulation, , or	(5	Specify or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A		,	50 50 70 50 50 50 50 50	,			/al	=	ılate	ure
Bldg. 3 Penthouse Mechanical Rm.	Х				Pipe Ir	nsulat	ion	2	50 LF	X			
Bldg. 3 Loading Dock	Х			5	Spray-or	n insu	lation	6	0 SF	X			
Name of Registered Waste Hauler		L	JDEP W	lasto	Cubic Ya	orde	New	-f.D.	41 /				
Newark Carting, Inc.	Н	auler ID 1222	1000	of Waste	200		0.0000000000000000000000000000000000000	red Landfil nem Land					
City, State Newark, NJ 07105					Disposal 10/20/2		City, S Bethl		A18015				
Completed by James E. Unger	Title Proje	ect Ma	nager			nature	_/_	1/2-	Da	ate /28/20	)12		

				-									
Date of Notification (1) 9/14/2012			Nam Eric	e of Build sson, I	ding Owner	r/Operato erly Tele	r (2) cordiaTe	2012 0 chnologie	G.7 inoly	AM	7		
Agencies Notified Type Notificatio	n		F1000000000000000000000000000000000000	t Addres				ASBF	TOO		1.4	3	
□ EPA     □ Initial     □ Amended     □ Amendment			City,	State, Zi	rdia Drive code v, NJ 088		-63	ASBES & L	ICEN	Cont Sing	ROL		
☐ Emergency justification Cancellation	)	ng	Name	of Cont Eric Fo	act	-			Telephor				
Name of Facility Manage Abstract in Table	Di	(0)	FA	CILITY	NFORMA	TION		777 775					
Name of Facility Where Abatement is Taki Telcordia Technologies, Inc.	ng Place	(3)					Type of F						
Street Address One Telcordia Drive (Bldg. 3)							Subo	ool (K-12) chapter 8 (C r (i.e. privat			uildin	gs, ho	mes,
City (5) Piscataway							Square Fe	eet #	of Floor	s	100000	. Age Years	
County (6) Somerset				y Code (7 E USE ON				se (Prior if b	eing den	nolished)			
Name of Monitoring Firm Hired by Building Environmental Tactics, Inc.	Owner (8	3)	ASC N/A	CM No.				nt Contract		la a			
Street Address			IN/A	·		Street A		z Mat Re	movai,	inc.			
64 Broad Street							. 41 Stre	et					
City, State, Zip Code Matawan, NJ 07747						1.1-2.2	ate, Zip Co son, NJ 0						8
Project Manager for Monitoring Firm Mr. Tom Geiger			one No. 90-221	7	Telepho 973-34	ne No. 45-0022		Licens 0050	se No. 7				
Start Date (10) September 14, 2012			mpletion 30, 20	Date (11	1)		OSHA Mo ame as a	200552		0			-
Occupancy Status During Abatement (Chec	k Only Or	ne)				Street A	ddress						
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe: Unoccupied Area (Me	al Facility	Abater / Hour	ment 's			City, Sta	te, Zip Cod	e					
Scope of Work (Check All That Apply)							_						
≥3 sf or ≥3 if ≥160 sf or ≥260 if		Renova Demoli			(	XX	Mini-Enclo Glovebag	Procedure			)	)	
	Γ.			Ι		W	Non-Exen	npted (*) an	d Non-Fr	riable Pro		re ement	
Location of	l N	Locat Iormal	lly		Doe	cription of		+				/ре	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mai	d Sole ntenai odial S (12)	nce/		stos Conta . thermal s surfaci	ining Mate	erial (ACM) sulation, or	(S	mount Specify or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A						7	VI I		te	w
Bldg. 3 Penthouse Mechanical Rm.	Х			3	Pipe I	nsulatio	n	25	0 LF	X			
Name of Registered Waste Hauler		I N.	JDEP Wa	aste	Cubic Ya	ards	Name	of Register	ed Landi	fill			
Newark Carting, Inc.		Ha	auler ID N 222	/	of Waste	S0100000000000000000000000000000000000	200000000000000000000000000000000000000	- Bethleh					
City, State lewark, NJ 07105	10 515 014 1 <b>3</b> 01				Disposal 9/30/20		City, S Bethl	itate ehem, P	A18015	i			
Completed by arnes E. Unger	Title Projec	t Mar	nager		Sigr	Lvn	4	14	1023	ate 1/14/20	12	A	
SB-41 (R-06-08)					/.	Do not use	e this form	for asbesto	s licensu	re exem <sub>l</sub>	oted a	ctivitie	es.

Check # 1806

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

RECEIVED 2012 000

8/31/2012			elcodia Technol		tor (2) nc. 452c	0 <del>67 - [</del>	MI	7: 4	3		
Agencies Notified Type Notificat  EPA Initial	ion	Or	eet Address ne Telcordia Dr	ive	ASBE	LICEA	CONT	ROL		r.	
DEP Amended Amendm	ent #		r, State, Zip Code scataway, NJ 0	8854	21		-1MG	1	7		
DOH justification Cancellate		1	ne of Contact Eric Fox			]	elephone	Numi	ber		
Name of Facility Where Abatement is Tal	king Place (3)		ACILITY INFORM	ATION	Type of Fac	ility (4)	10.70				
Telcordia Technologies, Inc. Street Address One Telcordia Drive (Bldg. 3)				-		(K-12) ipter 8 (Ot i.e. private			buildi	ngs, h	iom
City (5) Piscataway					Square Feet N/A		of Floors 4			g. Age Year	
County (6) Somerset			ty Code (7) E USE ONLY)		Current Use Communic		eing demo	olished	1)		
Name of Monitoring Firm Hired by Building Environmental Tactics, Inc.	Owner (8)	AS N/A	CM No.		of Abatement Coast Haz			nc.			
Street Address 64 Broad Street		L.		Street	Address E. 41 Street						
City, State, Zip Code Matawan, NJ 07747				City, S	tate, Zip Code	504					
Project Manager for Monitoring Firm Mr. Tom Geiger		75-55-50-55-50-55	one No. 290-2217	Teleph	one No. 45-0022		License 00507	No.			
Start Date (10) September 14, 2012	Scheduled C				of OSHA Monito						
Occupancy Status During Abatement (Chec			-	Street A	Address			-			
Facility Closed/Vacated During Entire I Abatement Performed Outside of Norm Other – Describe: Unoccupied Area (M	nal Facility Hor	ement urs		City, Sta	ite, Zip Code					-	
cope of Work (Check All That Apply)	× Reno	vation		×	Full Contains		Negative	Pressi	ure		
≥3 sf or ≥3 if ≥160 sf or ≥260 if	Demo	lition			Mini-Enclosu Glovebag Pro Non-Exempte	cedure	Non-Fria		cedu	re	
	Is Loca	ition				cedure	Non-Frial		Abat	re emen	ıt
		ation ally lely by ance/ Staff?	Asbestos Conta (i.e. thermal : surfac		Glovebag Pro Non-Exempte : erial (ACM) isulation, or	ed (*) and Am (Sp	Non-Frial ount ecify or LF)		Abat	emen ype	Т
Location of Asbestos-Containing Material (ACM)  TO BE ABATED In Facility  (13)	Is Loca Norm Used So Mainten Custodial (12)	ation ally lely by ance/ Staff?	Asbestos Conta (i.e. thermal : surfac other m	aining Mat systems in ing, VAT, iscellaneo	Glovebag Pro Non-Exempte erial (ACM) issulation, or us)	Am (Sp	ount ecify ir LF)	ble Pro	Abat T	emen	nt cicosore
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility	Is Loca Norm Used So Mainten Custodial (12)	ation ally ely by ance/ Staff?	Asbestos Conta (i.e. thermal : surfac other m	aining Mat systems in ing, VAT,	Glovebag Pro Non-Exempte erial (ACM) issulation, or us)	ed (*) and Am (Sp	ount ecify ir LF)	ble Pro	Abat T	emen ype	Т
Location of Asbestos-Containing Material (ACM)  TO BE ABATED In Facility  (13)	Is Loca Norm Used So Mainten Custodial (12)	ation ally ely by ance/ Staff?	Asbestos Conta (i.e. thermal : surfac other m	aining Mat systems in ing, VAT, iscellaneo	Glovebag Pro Non-Exempte erial (ACM) issulation, or us)	Am (Sp	ount ecify ir LF)	ble Pro	Abat T	emen ype	Т
Location of Asbestos-Containing Material (ACM)  TO BE ABATED In Facility  (13)	Is Loca Norm Used So Mainten Custodial (12) Yes No	ation ally ely by ance/ Staff?	Asbestos Conta (i.e. thermal :	aining Mat systems in ing, VAT, iscellaneo nsulatio	Glovebag Pro Non-Exempte erial (ACM) issulation, or us)	Am (Spi SF o	ount ecify or LF)	Removal	Abat T	emen ype	Т
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)  dg. 3 Penthouse Mechanical Rm.	Is Loca Norm Used So Mainten Custodial (12) Yes No	ation ally ely by ance/ Staff?  N/A  IJDEP Walauler ID N	Asbestos Conta (i.e. thermal :	aining Mat systems in ing, VAT, iscellaneo nsulatio	Glovebag Pro Non-Exempte  erial (ACM) issulation, or us)	Am (Sposse) 650	ount ecify or LF) LF	Removal	Abat T	emen ype	Т

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7)

Date of Notification	n (1)		Name of Bui	ilding	Owner/Operator	r (2)	P .				
10-1-12			Cheryl	Jone	s		REC	EIVE	- (1)		
Agencies Notified	Type Notific	ation	Street Add	ress		9					
[ ]EPA [ ]DEP	[X]Initial Notifie	cation	52 Renn	er A	ve Code		012 OCT -4	AM	7:4	4	
[X]DOF	[ ]Amended		C		, NJ 07003	3 4	SBESTOS	CONS		374	
[X]DOH	Notific	cation	Name of Cor		•	Telepho	ne Number	IMOS	RO		
[ ]DCA	[ ]EMERGENO	CY	Cheryl		es	reaggno	ne numbers;	UNITE			
	[ ]Cancella	tion			72	1		-		175010	
Name of Facility Who	are Thatemont	io Maki			INFORMATION	TE					
Same as above		15 Taki	ing Flace (5)	,		Type of Facil	37/2 B B				
Street Addres							pter 8 (Oth				
Street Addres							(i.e., priva buildings, l				
						Square Feet	# of Flo		ldg.	<u> </u>	
City (5		County	(6) Essex		nty Code (7) ATE USE ONLY)	1900	2		70		
				(01	ard odd ondry	Current Use	(Prior if be	eing de	moli	shec	i)
Name of Monitoring I	Firm hired by	Buildin	g ASCM No.		Name of Abate	ment Contracto	or (9)				
Owner (8) N/A					[1] 242 S.(2) L. L. L. G.	IANAGEMENT	5000 NEWS				
Street Address					Street Addres:	s				_	
					86 Chris	topher St					
City, State, Zip Cod	le				City, State,	Zip Code				-	
					Montclai	r, NJ 070	42				
Project Manager for	Monitoring Fi	rm Tel	lephone Numb	er	Telephone Numb		þ	License		ber	
Coheduled Cheek Date	(10)		SEC 1800		(973)744			0037	1		
Scheduled Start Date 10/13/12		a. Comp.	letion Date	(11)	Name of OSHA N N/A	Monitor					
Month Day Ye	ear Mo	nth I	oav Year		N/A						
Occupancy Status Dur [X]Facility Clos	ing Abatement	(Check	only one)		Street Address	3			-110/34/0		
of Abatemen	E			- 1							
[ ]Abatement Per Hours - Descr	ribe: «OffHours	de of No. B Descri	rmal Facilit pt»	ty	City, State, 2	Kip Code	Stan	-			
[ ]other - Descr	cibe: «Other Od	cupancy	Descript»								
Scope of Work (Check	all that app	ly)			(17)						
[X]≥3 sf or		[2	K]Renovation	ı		Containment wi Enclosure	th Negative	Pressu	ıre		
[ ] <u>&gt;</u> 160 sf o	r ≥260 lf	1	]Demolition	ı.		pag Procedure					
		T.	Is ocation		[ ]NOII-FI	riable Procedu	le .	Aba	teme	nt :	Type
Location Asbestos-Con	1 TO		ormally		Description Asbestos-Cont		Amount	R		E	E
Material	(ACM)		Used Solely		Material (A		(Specify	E	R	CA	C
TO BE ABA		te	y Main- enance/		(i.e., thermal ulation, surfa		SF or	o v	PA	PS	os
(13)		Sta	stodial aff (12)		r other miscel		LF)	A	R	U	UR
Basement		Yes	No N/A	Pine	Insulation	<b></b>	40 LF	х			E
Basement					er Insulat		24 SF	-			-
						22011	24 DE	-		_	-
Name of Registered W		- DECEMBER 1	DEP Waste	Cub:	ic Yards	Name of Regi	stered Land	fill	L		L
AZTECH MANAGE	EMENT, IN	C. Hay	uler ID No. 7040	of T	Waste 2.5	G.R.O.W.					
City, State				Disp	oosal Date	City, State					
Montclair, NJ	07042		5	10	0/16/12	Morrisvi.	lle,/PA	1906	7		
Completed By (Print o	or Type) Tit	le			Signature	1/1	·/	Do t			
Constantine Vi		eside	nt		Jana Care	T. / 1	/	Date 10/1/	12		
		222			1 1524	i juju j	16-				
					1	/					



		uilding Owne eCesare	er/Operator (	No.	14	ECE	IVE	D		
-   -   -   -   -   -   -   -   -   -	Street Add	ress side Ave.			2012 00	7-4	AM -			********
DOL Amendment # V		Zip Code ange NJ 0	7052	49	SHES	Tos c	ONT	- 44	,	
DOH justification)		eCesare		€7.4	TE	e bitorial is	ungber '	VOL.	•	
Name of Facility Where Abatement is Taking Place (3)	FACILIT	TY INFORMA		Type of Facil	ity (41)					
Residential				School	S-1000/018					
Street Address 15 Parkside Ave				Subcha	pter 8 (Oth .e. parivate			dings	, hom	es,
City (5)				Square Feet	3.6	f Floors	11.0	Bldg. /	Age	
West Orange NJ.				1596	1			921		
	County Co STATE US			Current Use Residentia		ing demol	ished)			
Name of Monitoring Firm Hired by Building Owner (8)	ASCM N	lo.	Name o	of Abatement	Contractor					
				n Environm	ental Se	rvices				
Street Address			1 2000000	Address ⁄irginia Ave	).					
City, State, Zip Code			1,500,000,000,000,000	ate, Zip Code y City NJ 0						
Project Manager for Monitoring Firm	elephone	No.		one No. 338855		License 01174	No.			
Start Date (10) Scheduled Comp 09-28-12 09-28-12	pletion Da	te (11)		of OSHA Mon as above	itor		o de antigo de la france			
Occupancy Status During Abatement (Check Only One)		W////	Street A	Address						.000007500
Facility Closed/Vacated During Entire Period of Abateme Abatement Performed Outside of Normal Facility Hours	ent		City, St	ate, Zip Code						
Other – Describe:										
Scope of Work (Check All That Apply)  X ≥3 sf or ≥3 if  Renovati			П	Full Contai		Monetina	Descen			
≥3 sf or ≥3 if Renovati ≥160 sf or ≥260 if Demolition	0.000		×	Mini-Enclo						
Is Locatio				Non-Exem	pieu () an	u MOITE	aule Fit		emen	t t
Location of Normally	,		Description of	of				Ty	уре	
Asbestos-Containing Material (ACM)  TO BE ABATED  Maintenand	ce/		ontaining Ma nal systems	aterial (ACM)		mount Specify	70		g	m
In Facility Custodial St	taff?	` su	rfacing, VAT er miscellane	, or		or LF)	Removal	Repair	Encapsulate	Endosure
(13) Yes No	N/A	Oute	H IIIISOEIIANE	eous)			Ya.	<del>-</del>	ulate	ure
Basement x	TWA	Pic	oe Insulati	ion.		34lf	×		-	-
							+		<u> </u>	-
					1		1			
						41.14	1			
The state of the s	IDEP Was		oic Yards	Name	of Registe	ered Landi	fill			
Tri atata Transfor Associata	IDEP Was Juler ID No 456		oic Yards Vaste		of Registe ervar Ente					
Tri atata Transfor Associata	uler ID No	o. of V 1 Dis		Mine City, S	erva Ente	rprises.				

ASB-41 (R-06-08)

<sup>\*</sup> 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)

RECEIVED

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Date of Notification (1)  09 /	26 /	12			A 119 87	of Buildin In Kearn	ig Owner/Operator (		או דיי	7. 6			
								2012 (	OCT -4 AM	1: 5.	3	.,	
Agencies Notified  ⊠ EPA	Type Notifica					Address 9 Main 9	Street		ESTOS CON		L		
☑ DOLWD ☐ DHSS	Amended Amendme	ent #_	-		1	State, Zip	Code 1 , NJ 08051	<b>%</b> 8	LICENSIN	G	Ć.		
DCA			cluding			of Contac			Tolophone Num	nhor			
(NJAC 5:23-8)	justification   Cancellat				100000000	n Kearn			Telephone Nun	nper			
				- 5-1-					i -				
Name of Facility Where A	Natament is T	Tokina	Dlaco	(2)	FA	CILITY	FORMATION	Time of Facility	(4)				
Kearney Assoc.	Abatement is i	aking	Place	(3)				Type of Facility  School (K-12					
Street Address		HISTORY OF THE STREET							B (Other than K-1)	2)			
2859 Main Street								Other (i.e., p homes, etc.)	rivate and comme	ercial b	uildin	gs,	
City (5)								Square Feet	# of Floors	В	dg. A	ge	
Manchuttua								40,000Sf	2 Floors		80 y	rs.	
County (6)			blecco-2-26		Cour	nty Code (	7)(STATE USE ONLY)	Current Use (Pr Garage	ior if being demol	ished)			
Name of Monitoring Firm	Hired by Build	ding O	wner (	8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
Here Tech, Inc.							Graham-Teci	n Environment	al Service, LLO	С.			
Street Address	treet Address 1879-I Old Cuthbert Road						Street Address						
	t Road	TINGS TO THE RE	955 C - 1 C - 1 D				14 Read Driv	e					
City, State, Zip Code							City, State, Zip Co						
Cherryhill							Sicklerville, I	NJ 08081					
Project Manager for Mon					ephone		Telephone No.		License No.				
Subash Rashia, PH					56-429		856-318-1341		01158				
Start Date (10) 09 /29 /	100 miles				etion Da		Name of OSHA M Graham-Tech	lonitor <mark>1 Environment</mark>	al Services, LL	.C.			
Occupancy Status During	Abatement (0	Check	only o	ne)			Street Address						
☐ Facility Closed/Vacate							14 Read Drive	e					
Abatement Performed Time of Abatement: 7						cribe	City, State, Zip Co Sicklerville, N		A construction of the second s				
Scope of Work (Check al	I that apply)												
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf			∏ Re ⊠ De				☐ Mini-Enc ☐ Glovebag			ure			
				Loca						Ab	atem	ent T	уре
Location Asbestos-Containing TO BE ABA IN Facili (13)	Material (ACM	1)	Use Ma	ntena	ely by ance/ Staff?	Asbe (i.e	Description o estos Containing Ma e., thermal systems i surfacing, VAT, other miscellane	terial (ACM) insulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
			Yes	No	N/A							e	
Outside Shingles				$\boxtimes$		Asbest	os Shingles		1450Sf				
				П		Was and You and	he-Yellow -			$\Box$	П	П	
Name of Registered Was	te Hauler			T	JDEP I	Naste	Cubic Yards of	Name of Regis	tered Landfill		_	_	
Graham-Tech Envir	onmental S	ervic	e, LL	۱ د	lauler II 00346		Waste	G.R.O.W. N	lorth Landfill 8	L Tully	towi	1	
City, State  14 Read Drive Sickl	erville, NJ 0	8081					Disposal Date	City, State 1513 Brode	entown Rd. Mo	rrisvil	le,P/	4	
Completed By (Print or Ty Willis Graham	/pe)	Title Ov	wner				Signature	ec	D	ate	26	17	
ACD 44		-											

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

State of New Jersey

9-28-12		· Mosenn of Chil	ding Owner Cremt	2005	12010	
		of restaura to Sign	Mana	BRE	wasta	WAH 7:49
Agency Notified Type Notification		Street Addre	118	5.4	\$358 TOA	/ /
DEP CAmended	•	City. State, 7	in Code	20012	15 JA	ROL
Amendment F		1 4	ong Port	- 100	J	OING .
Q DOH (Institution) Q DCA (Institution) Q Cancallation		Reams of Con		yer.	Telanhana No	miher .
			MFORMATION		-	
Name of Pacitity Where Abatement is Taking	Place (3)	100-		Type of Facil	(4)	
Street Address	· Gp	196		G School (K-	12) 18 (Other than K-1:	_
112 South 12:	th 5%	REET		D'Other (i.e.	private & commerci	al buildings.
Chy (5) Long mpt	VI			Square Feet		Bidg_Age .
County (6)	νψ	Gomety Coders	7) (STATE USE	Company Head	rior if being demol	
Coem		ONLY	Month's age	- Content rise (	- Ten R Denis Collice	ished)
Name of Mondoring Firm Hared by Building Or (5)	mer ASC	M No.	Name of Abatem			
Street Address			Street Beldmer	= 220		
			12	12. Bu	elingter .	Ave .
City, State, Zip Gude		4	City, State, Zip Co	Anco	NJ OSE	124
Project Manager for Manitoring Firm	Telepho	ne No.	Telephone No.	7 .	License No.	
Shart Dails (10) /0-/0-/7" Schadulad	Completion Da	ra (11)	834 829 Name of OSHA M	097/	0107	0
10/18-12 10.	-15-1	2 .	· retains of Oot 62 68			
Occupancy Status During Abatament (Chack or			Street Address		•	
Pacifity Closed/Vessind During Entire Period     Abatement Performed Outside of Normal Per	of Absternent Citiv Housi		City, State, Zip Go	10		
O Other - Describe; Scope of Work (Check all that apply)		_ : _				
Da Salara SE	- 1	Culternovation	" - O Fui Con	dahunent will l	Vogativo Presauro	
2 2 160 sf or 2 260 F	_	O Demoition	O Glovein	Procedure	Non-Filable Proced	
				1	mant a conduct & soldieles	UE/O 1
II.	is Locatio		_		•	Abatament
Location of Asimship Combining Manager (accum	Normalij Lined Solet	y lay	Description of	-	•	
Asbestos Confeining Material (ACM) TO BE ABATED	Normally Lined Solely Maintenand Custodia	y by asbesti	os Containing Mater hermal systems ins	iel (ACM)	Amount (Specify	Abatemant Type
Asbestos Conteining Material (ACM)	Normally Unsel-Selety Maintenance	y by asbesti	os Containing Mater	id (ACM)		Abatemant Type
Asbestos Comisining Material (ACM) TO BE ABATED IN Facility	Normally Unnel Solely Maintenann Gustodia Statt? (12)	y by Asbesh	os Containing Alaim fremsi systems ins suracing, VAT, or other missellancous	id (ACM)	(Specify	Abatament
Asbestos Comisining Material (ACM) TO BE ABATED IN Facility	Normally Unnel Solely Maintenann Gustodia Statt? (12)	y by Asbesh	os Containing Maiur hermal systems ins surfacing, VAT, or other miscellancous	id (ACM)	(Specify	Abatemant Type
Asbestos-Comisining Material (ACM) TO BE ABATEO IN Facility	Normally Unnel Solely Maintenann Gustodia Statt? (12)	y by Asbesh	os Containing Alaim fremsi systems ins suracing, VAT, or other missellancous	ind (ACAA) mission,	(Specify	Abatemant Type
Asbestos Conteining Material (ACM) TO BE ABATEO IN Facility (13)	Normally Unnel Solely Maintenann Gustodia Statt? (12)	y by Asbesh	os Containing Alaim fremsi systems ins suracing, VAT, or other missellancous	ind (ACAA) mission,	(Specify	Abatemant Type
Asbeston-Containing Material (ACM) TO BE ARATEO IN Facility (13)  COV (Ginupe  Name of Registered Waste Hatter	Normally Used Solety Maintenant Gusteld Shaff (72) Yes No	N/A Asbesto	ps Containing Maint hermal systems ins surfacing, VAT, or other reiscostaneous	fal (ACA) nision, i)	(Specify SF or LF)	Abatement Type  Enclosure  Repair  Removal
Asbasine Containing Material (ACM) TO BE ARATEO IN Facility (13)  OUT Ginape  Name of Registered Waste Hatter  T Zubinson Waste.	Normally Used Solety Malmtemann Gustodia Staff? (72) Yes Ma	N/A Asbesto	ins Containing Material institutions in surfacing, VAT, or other missedimnous MAT, or other missedimno	ad (ACA)  windon,  WA  WA  WA	(Specify SF or LF)	Abatement Type  Enclosure  Repair  Removal
Asbasion Containing Material (ACAI)  TO BE ABATED  IN Facility (13)  OUT Grupe  Name of Registered Waste Hatter  T Zoloinson Waste  Sell MANUR NS	Normally Used Solety Maintenant Gusteld Shaff (72) Yes No	y by ped Asbests (j.a., l	ins Containing Material institutions in surfacing, VAT, or other missedimnous MAT, or other missedimno	ad (ACA) vicion,  )  NG  mo of Registers  WM7	(Specify SF or LF)  700 %  rd Lundiff  0 F PA	Abatement Type  Enclosure  Repair  Removal
Asbestos Containing Material (ACM) TO BE ARATEO IN Facility (13)  OUT Ginape  Name of Registered Whate Hatter  T Whinson Waste.	Normally Used Solety Maintenant Gusteld Shaff (72) Yes No	N/A Asbesto	ps Containing Material instructing. WAT, or gither respondence to the SUDVI	ad (ACA) vicion,  )  NG  mo of Registers  WM7	(Specify SF or LF)	Abatement Type  Enclosure  Repair  Removal
Asbestos Conteining Materiel (ACA)  TO BE ABATED  IN Facility (13)  Name of Registered Waste Hatter  J Zobinson Waste.  Sty, Seeks  B. ell MALUR N.S.  Complained by Jos Hill Tallo VP  88-41  Do not y	Normally Used Solety Maintenanta Gustodin (172) Yes No	N/A Asbests  I (i.a., i.a., i.	pe Containing Manus hermal systems ins surfacing. VAT, or other respectance is the SUDVI with SUDVI with Subvi Banks of National Banks of Subvi Banks of Sub	and (ACAA) miniform,  AUS  The property of the	(Specify SF or LF)  700 %  rd Lundiff  0 F PA	Abatement Type  Enclosure  Repair  Removal
Asbestos Conteining Materiel (ACA)  TO BE ABATED  IN Facility (13)  Name of Registered Waste Hatter  J Zobinson Waste.  Sty, Seeks  B. ell MALUR N.S.  Complained by Jos Hill Tallo VP  88-41  Do not y	Normally Used Solety Maintenanta Gustodin (172) Yes No	N/A Asbests  I (i.a., i.a., i.	pe Containing Manus hermal systems ins surfacing. VAT, or other respectance is the SUDVI with SUDVI with Subvi Banks of National Banks of Subvi Banks of Sub	and (ACAA) miniform,  AUS  The property of the	(Specify SF or LF)  700 %  rd Lundiff  0 F PA	Abatement Type  Enclosure  Repair  Removal
Asbeston Containing Material (ACA)  TO BE ABATED  IN Facility (13)  OUT Charge  Name of Registered Waste Hatter  T Whomson Waste  Bell MAWR NS  Complained by Too Hill Title VP	Normally Used Solety Maintenanta Gustodin (172) Yes No	N/A Asbests  I (i.a., i.a., i.	pe Containing Manus hermal systems ins surfacing. VAT, or other respectance is the SUDVI with SUDVI with Subvi Banks of National Banks of Subvi Banks of Sub	and (ACAA) miniform,  AUS  The property of the	(Specify SF or LF)  700 %  rd Lundiff  0 F PA	Abatement Type  Enclosure  Repair  Removal

## 0K

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

Date of Notification (1)		/		Name o	of Building	Owner	Operator	(2)		LIYE	D	_			
10/1/12				Mat (	Corr / R	esiden	ce		דיות ל						
Agencies Notified	Type Notification	1			Address			2012	- 1001 -	4 AM 7	: 45		-		
⊠ EPA	× Initial			380 N	lorth 1st	t street									
DEP	☐ Amended		- 1		ate, Zip C				E310	CONT	ROI				+
⊠ DOL	Amendmen Emergency			Surf C	City NJ (	8008	#		or LICE	NSING		400			
☑ DOH	justification		1		of Contact					Telephor		nber			
☐ DCA	Cancellation	n		Mat											
Name of Facility Where Mat Corr/ Resider	Abatement is Takin	ng Place (	3)	FAC	ILITY INF	ORMAT	ION	(Control of the Control of the Contr	Facility (4)						
Street Address			- 100 cm						hool (K-12	) 3 (Other tha	n K 1	2)			
380 North 1st stree	t	20						X Ot	her (i.e. pri	ivate & com	merci	al buil	dings	, hom	es,
City (5)			-					Square		# of Floor	rs	T F	Bldg. A	Age	_
Surf City NJ 08008								1000		2			5+	.30	
County (6) Ocean					Code (7)	^				if being de	molish	ned)			
Name of Monitoring Firm	Ulead by Duilding	0 (0				'		House							
N/A	i mirea by Bullaing	Owner (8)	)	ASC	vi No.			of Abate aco Inc	ment Contr	ractor (9)					
Street Address								Address ox 329							2000.00
City, State, Zip Code	*						ate, Zip						_		
			Telepho					NJ 0809	1						
Project Manager for Mon	roject Manager for Monitoring Firm							one No. '53-980	00	Lice 007	nse N 27	0.			
Start Date (10) 10/12/12		Schedul 10/18/		mpletion	Date (11)			of OSHA	Monitor						
Occupancy Status During	Abatement (Che	1,000,000,000,000													
Facility Closed/Vaca Abatement Perform Other – Describe:	ated During Entire	Period of	Abaten	nent				Address ate, Zip	Code						
	U.T A					_									
Scope of Work (Check A	ii That Apply)	-					_								
≥3 sf or ≥3 if  ≥160 sf or ≥260 if		president .	Renova Demolif				×	Mini-E Glove	Enclosure bag Proce						
			20 00		Г			Non-E	exempted (	*) and Non-	-Friab				
Lagation			Locati Normal											ement pe	
Location Asbestos-Containing		Use	d Sole	ly by	Ashes		scription of taining Ma		CM)	Amount			T '		
<u>TO BE ABA</u> In Facili (13)	ATED	100.74	intenar todial S (12)			thermal surface	systems cing, VAT niscellane	insulatio , or		(Specify SF or LF	,	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A								<u> </u>		ate	re
Exterior S	iding			х		Exte	rior Sid	ing		2800 S	f	x			
												x			
Name of Registered Was	Name of Registered Waste Hauler						Vords	- 1.	Inma -(C	-1-1	- 16"				
United Containers	MARKET - MARKANON - DO MAY - STORE - S						Yards ste	-	ame of Re	egistered La .S.	ınatili				
City, State Elm NJ			2459		3 Dispos 10/18	al Date	C	ity, State			-				
Completed by		Tin-				100000000000000000000000000000000000000	22772		/IOITISVIII6	PA 190					
Anthony T Perna		Title Presi	dent			S	ignature	2			Dat 10	e /1/12			

CK 2786 \* Emergency \*

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

	ι .									2502	and the st	- 1	1	1)	3	
Date of Notification (1) 10/1/12	3					Owner/Ope Residen		(2)	2	2012	OCT -4	. Aa	4 •			
Agencies Notified	Type Notification			Street Ad 13 Eas		ersey A	ve									
EPA DEP DOL	Initial Amended Amendment	#			e, Zip Co Haven	de NJ 0800	08	*	(D	8 296	STOS LICE	CO. NSII	VI VI	RC	)L	
☑ DOH DCA	iustification) Cancellation			Name of Joe	Contact					Tele	ephone Nu	umber				
				FACIL	ITY INFO	ORMATIO	N		r= *** ***							
Name of Facility Where A Joe Mancini / Resid		g Place (3)			8				of Facility (4 School (K-12	2)		40)				
Street Address 13 East New Jersey	y Ave							×	Subchapter 8 Other (i.e. pr etc.)				ldin	igs, l	home	s,
City (5) Beach Haven NJ 0	8008							Squar 1000	e Feet +	# of 2	Floors		Bldg 35-	g. Aq +	ge	
County (6) Ocean				County C STATE U	ode (7) SE ONLY)		_	Curre	nt Use (Prio	r if bei	ng demoli	shed)				
Name of Monitoring Firm N/A	Hired by Building	Owner (8)		ASCM	No.			of Abat aco Ir	ement Cont	ractor	(9)					
Street Address					1 1		Addres			-f			30-			
City, State, Zip Code				-			4000000	CONTRACT TO SERVICE	p Code n NJ 0809	91		-				
Project Manager for Mon	nitoring Firm		1	Telephor	ie No.		Teleph	none No 753-9	).		License 00727	No.				
Start Date (10) 10/1/12		Schedule		pletion [	Date (11)			of OSH	IA Monitor							
Occupancy Status Durin	g Abatement (Che	1.51094.525						Addres	s							
Facility Closed/Vac Abatement Perform	ated During Entire	Period of A	batem	ent		-	City, S	state, Zi	p Code							
Other – Describe:						-										
Scope of Work (Check A	dl That Apply)		- Say - 1839			*	ļu.	7								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enova emoliti				×	Min Glo	Containme i-Enclosure vebag Proce n-Exempted	edure						
		le	Locati	on			L	1 1401	PEXEMPLE	( ) an	a NOTIFI TIE	T I		bate	ment	
Location	n of	l N	ormal	lý		Desc	ription	of					_	Ty	ре	
Asbestos-Containing TO BE AB	Material (ACM)		d Sole ntenar		Asbes	tos Contai	ining N	/laterial	(ACM)		mount Specify	7		_	Ē	Щ
In Faci	lity	Cust	odial S (12)	Staff?	(1.6.	surfacii	ng, VA	T, or	idon,		or LF)	Remova		Repair	Encapsulate	Enclosure
(13)		Yes	No	N/A		other mi	scellar	neous)		C		<u>a</u>		₹	ulate	ure
Exterior S	Siding			х		Exteri	or Si	ding		26	50 Sf	x	1			
60														See line		
						220-2507-1-11										
Name of Registered Wa	ste Hauler	100	JDEP W lauler ID		Cubic Y of Wast			Name of F		red Land	fill					
United Containers		1000	2459		3			G.R.O.V								
City, State Elm NJ						Disposa 10/2/12			City, State Morrisvi		19067					
Completed by	19,102.4%	Title				Sig	natur	90			1.0	Date 10/1/	12			
Anthony T Perna		Presi	uent					_			$\overline{}$	10/1/	12			



[= - 41 NF NF NF										100000	Lan June 3	1	1)	
Date of Notification (1)  09 /	24 /	12			1 1 1 1 1 1 1 1			wner/Operator ( tolomeo	2)	2012 OCT	-4/	IM :	1: 1. 6	•
Agencies Notified	Type Notific	ation			Stree	t Address				Appe			46	
⊠ EPA ⊠ DOLWD	☐ Initial	<u>.</u>			22	5 E Sum	mit /	Ave		ASBEST	OS CI	INT	וחם	
□ DHSS	☐ Amende Amendm	TT			City,	State, Zip	Code	е	8	& Lic	ENS	MC	MUL	
□ DCA	☐ Emerger			a a	Ha	ddonfiel	d, N	J 08033				340	¥./	
(NJAC 5:23-8)	justificati			9	Name	of Conta	ct			Telephone No	umber			
	☐ Cancella	tion			An	thony Di	Bar	tolomeo						
					FA	CILITY I	NFO	RMATION		J				
Name of Facility Where A	batement is	Taking	Place	(3)					Type of Facility	(4)				
Residence									School (K-12	2)				
Street Address				-			-		☐ Subchapter 8	(Other than K-				
44 Grill Rd									Other (i.e., p homes, etc.)		mercial	buildii	igs,	
City (5)									Square Feet	# of Floors	Ti	3ldg.	Age	
Haddonfield									2200Sf	3 Floors	-	77y	~	
County (6)	yah cu	W			Cou	nty Code	(7)(ST	TATE USE ONLY)	Current Use (Pr	ior if being dem	olished	1		
Camden									Residence					
Name of Monitoring Firm I	Hired by Buil	ding C	)wner	(8)	ASCM	No.	Na	ame of Abateme	ent Contractor (9)					
Environmental Mana	agement In	iterna	tiona	ıl				Graham-Tech	n Environment	al Service, LI	LC.			
Street Address	999WX30047994035546554655							treet Address						
204 E. Germantown	204 E. Germantown Pike							14 Read Driv	е					
City, State, Zip Code								ity, State, Zip Co	ode					
Norrition, P.A. 1940	1							Sicklerville, N	NJ 08081					
Project Manager for Monit	oring Firm			Tel	ephone	No.	Te	elephone No.		License No.			-	
Raymond J. Giodan	0			8	56-229	-5369		856-318-1341		01158				
Start Date (10)	15	Sched	uled C	ompl	etion Da	ate (11)	Na	ame of OSHA M	lonitor					
10 / 04 /	12	1	0_/	_ 0	8_/	12		Graham-Tech	n Environment	al Service, LI	LC.			
Occupancy Status During	Abatement (	Check	only	one)			St	reet Address						
☐ Facility Closed/Vacated					ement			14 Read Drive	e					
☐ Abatement Performed	Outside of No	ormal	Facilit	y Hou	rs - Des	scribe		ty, State, Zip Co						
Time of Abatement: 8A	M- <u>4:30</u> PM/		PM		AM			Sicklerville, N						
Scope of Work (Check all	that apply)		-										-	
П > 2 - 4 > 2 И									ainment with Neg	ative Pressure				
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf			Re     De     De     Re     De     Re     Re					Mini-Encl     Glovebage     Gloveba						
					011				mpted (*) and No	n-Friable Proce	dure			
				Loca					T		A	bater	nent 1	Гуре
Location of		.		Norma	ally ely by	1		Description o			7	I Z	m	m
Asbestos-Containing M TO BE ABAT		ן ני			ance/			Containing Ma ermal systems i		Amount (Specify	Kemova	Repair	nca	l G
IN Facility			Cus		Staff?	(		surfacing, VAT,	or	SF or LF)	Val	.   =	Encapsulate	Enclosure
(13)		-	Yes	(12) No	N/A	-	0	ther miscellane	ous)				ate	1 00
Basement						10/40	_						-	-
Dasement						HVAC	Duc	t Insulation		50lf		-		
					10_						_ _			
Name of Registered Waste	1 .	JDEP I		1 C C C C C C C C C C C C C C C C C C C	ibic Yards of aste	Name of Regis								
	Granant-Tech Environmental Service, EEC.									lorth Landfill	& Tull	ytow	'n	
City, State  14 Read Drive Sickle	***************************************							sposal Date	City, State	méassan Dal as	loru!-	:11-	<b>.</b> A	
	14 Read Drive Sicklerville, NJ 08081								1513 Brode	entown Rd. M	iorrisv	ille, l	*A	
Completed By (Print or Typ Willis Graham	oe)	Title Ov	vner					Signature	190		Date	120	-//	2

## OK 1393

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

Date of Notification (1) 09/21/2012			of Building Ow e Property	ner/Operator	(2) 2	012 OCT .	-4 AM 7	. 1. *				
Agencies Notified Type Notification  EPA Initial			Address Applegarth F	Road	AS	BEST	)S COUR-	49				
DEP Amended Amendment #			ate, Zip Code oe, NJ 0883		88	& LIC	S CONTR ENSING	₹OL				
Emergency (in justification)	cluding		of Contact			***************************************	Telephone I	Numbe	er			
DCA Cancellation			y Matarese						-			
Name of Facility Where Abatement is Taking Private property	Place (3)	FAC	ILITY INFOR	MATION		of Facility (4 School (K-12	2)					
Street Address 204 Applegarth Road					×		8 (Other than k rivate & comme		uild	ings,	home	s,
City (5) Monroe		Mosan Law W			Squar 1500	e Feet	# of Floors 2			dg. A 50	ge	
County (6) Micdlesex			Code (7) USE ONLY)		Curre	nt Use (Prio	r if being demo	olished	)			
Name of Monitoring Firm Hired by Building On N/A	wner (8)	ASC	M No.			tement Conf e Group I						
Street Address N/A					t Addres	s Street Sui	te #16					
City, State, Zip Code N/A				City,	State, Zi							
Project Manager for Monitoring Firm N/A		Telepho N/A	one No.	1 STATE	hone No -758-7		Licens 0114					
Start Date (10) 10/01/2012	Scheduled C	ompletion				A Monitor onmental	Inc					
Occupancy Status During Abatement (Check		100.	_		t Addres						Os U	
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe:				City,	State, Zi		t					
				- Unic	on, NJ	07083						
Scope of Work (Check All That Apply)  ≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf	Reno Demo	vation olition			Min Glo	i-Enclosure vebag Proc					e	
	Is Loc	ation	T		110	LXcmptou	( ) and (10			1777	ement	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Norm Used So Mainter Custodia (12	nally blely by nance/ il Staff?	(i.e. the	Descriptions Containing learned system surfacing, Vother miscella	Material ns insula AT, or		Amount (Specify SF or LF)		Removal	Repair	e Encapsulate	Enclosure
Pagament	Yes N		-	floor til			600 SF	- X	_			
Basement		X		flue pack			2 SF	× ×				
Basement		X	1	nue pack	ariy		2 31		•			
Name of Registered Waste Hauler		NJDEP \		Cubic Yards of Waste		Carrier and Artist and Artist	Registered Lan					
Asbestos Transportation Company	24310					Enterprises	S			-		
City, State Shirley, NJ 11967				Disposal Date	<b>5</b>	City, State Waynes	burg OH 44	1688				
Completed by Edwin Precilla	Title Project I	/lanage	r	Signatur	e			Date 9/21	/20	12		

RECEIVE MOSOL

Date of Notification (1)				Mana a	4 D 11 - 11	0	<del></del>	(0)		34.1	. 0	a Hi	60	61	6
October 1, 2012					f Building NAME			r (2)	2012 0	CT -	4 AM	<b>~</b> .	20		
Agencies Notified	Type Notification			Street A			20 to 1100		4.5			1:4	5		
X EPA	X Initial	Ł		718 T	eaneck	Road			ASBE.	STO	S COL				
X DEP X DOL	Amended Amendment		_		ate, Zip C eck, Nev		y 076	66	ASBE.	LICE	NSING	ROL	٠.		
DOH DCA	Emergency justification) Cancellation	**************************************			f Contact						lephone N	2	-		
				FAC	ILITY INF	ORMAT	ON		<del></del>	. 1	-				
Name of Facility Where A HOLY NAME HOSF		g Place (3)	X.						of Facility School (K-	5050					
Street Address 718 Teaneck Road							- 734	×	Subchapte Other (i.e.	r 8 (Oth	er than K- & commer	12) cial bu	ildings	, hom	es,
City (5)							-		etc.) ire Feet	T#0	f Floors	-	Bldg.	۸۵۵	
Teaneck,	- 144				· V			20,0	000	1			60+	Age	
County (6) Bergen					Code (7) USE ONLY	) <u> </u>			ent Use (Pri am Room		ing demoli	shed)			
Name of Monitoring Firm CSA	Hired by Building	Owner (8)		ASCN	/ No.				tement Co			780			
Street Address 26 Lorenzo Court	*						Street	Addre							
	ity, State, Zip Code								ip Code						
Matawan, New Jerse	Matawan, New Jersey 07747						200.0000		, NEW JE	RSE	Y 07011	-1802			
Project Manager for Monit Michael Chain	roject Manager for Monitoring Firm						17.50	hone No 478-4			License 00724	No.		E.	
Start Date (10) October 12,2012		Scheduled			Date (11)		200 200		HA Monitor	UCTI	ON INC				
Occupancy Status During	Abatement (Chec	k Only One	)					Addres							
Facility Closed/Vaca				ent			164	GETT	Y AVE.						
Abatement Performe  Other – Describe: 4:	ed Outside of Norm	al Facility I	lours			_			ip Code , NEW JE	RSE	/ 07011	1802			
Scope of Work (Check All	That Apply)						-	,			07011	1002			
≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf		-	nova					Min Glo	l Containm	e cedure					
		Τ						_ NOI	n-Exempte	1 ( ) and	a Non-Fria	ible Pro	The second	re emen	_
Location	-6	200000000000000000000000000000000000000	ocation of the control of the contro			_							1	/pe	•
Asbestos-Containing I		Used	Solel	y by	Asbes	tos Cont	scription aining N		(ACM)	Δ	mount			Ι_	
TO BE ABA	TED	Custo	tenar dial S		(i.e.	thermal	system	s insula	ation,	(S	pecify	يچ	70	Encapsulate	四
In Facilit (13)	У		(12)				cing, VA		- 1	SF	or LF)	Remova	Repair	sde	Enclosure
		Yes	No	N/A				.couc,				/al	1	ılate	ure
Outside Stea	m Pipe			х	Pip	e Insu	ation (	Clean-	-up	8	OLF	х			
		•					21-1-7-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1					_			
					-							+	$\vdash$	-	
												+	-		
Name of Registered Wast	Name of Registered Waste Hauler						Yards		Name of	Registe	red Landfi	1		_	
[ 1	Slavco Construction Inc.						te				ANDFIL				
City, State CLIFTON , NEW JER	SEY 07011-18				Dispos TBD	al Date		City, State		E. PA				$\dashv$	
Completed by		Title				Is	ignature				10	ate			
Vivian D. Jurcevic		Office	Mgr.			2	Jun	an	DA	ACL	110	ctobe	er 1,2	012	



(No.				FICATION OF AS ursuant to N.J.A			V.		$R_{\ell}$	ECEI	VER	
Date of Notification (1)  8/24/12					Name of Build BPG Develop			21	- 00	1 -1.		
Agencies Notified Notification			Туре		Street Addres 3815 West C		<b>a</b>	<b>4</b> )	EST	OS CO.	· /: 36	
(X)EPA ()DEP (X)DOL (X)DOH		() Initial Notification (X) Amended Notification Amendment # 2 () Emergency (including justification) () Cancellation			City, State, Zi Newtown Sq	p Code		<b>4</b> 0	« L/(	OS CON ENSIN	GROL	
) DCA					Name of Cont John Forde	Name of Contact John Forde						
				FACILITY IN	FORMATION			-	8:			
Name of Facility Where A	batement is T	aking Place (	3)		Type of Facili	ty (4)						
Vacant warehouse					( ) School (K-12)							
Street Address					( ) Subchapter 8 (other than K-12) (X) Other (i.e. private & commercial bldgs., homes, etc.							
23 Chestnut St.  ity (5)					Sq. Feet # of Floors1							
ity (5)			(State U									
Woodbury Heights	Gloucster	ucster			Bldg. Age50 Current Use (prior if being demolished) window and door manufacturer							
Name of Monitoring Firm ASCM No.					Name of Contractor (9)							
AET					Alliance Environmental Systems							
Street Address					Street Address 550 East Union Street							
28 N. Pennel Rd.  City, State, Zip Code  Modic, RA 19063					City State, ZipCode West Chester, PA 19382							
Media, PA 19063 Project Manager for Monitoring Firm Telephone Number					Telephone Number License Number							
Dave Turotsy		610-891-0114			610-701-9000 00508							
Scheduled Start Date (10)         Scheduled           9/10/12         10/31/12			Completion	Date (11)	Name of OSHA Monitor AET							
Occupancy Status During Abatement (Check only one) (X) Facility Closed/Vacated During Entire Period of Abatement ( ) Abatement Performed Outside of Normal Facility Hours -					Street Address 28 N. Pennel Rd.							
Describe			TIP-5000 C-30 (1900)		City, State, Zig Media, PA 190							
Other -					L							
Source of Work (Check all (X) Demolition () Rei (X) Large Proj. (>160 SF of () Full Containment with N	novation or >260 LF AC Negative Pres	sure () Mi	ni-Enclosu	re (X) Glove	bag Procedure							
Containing Material (ACM) in Solely I Facility (13) Staff? (		(12) surfacing, 1			ns insulation,		(Specify SF or		Abatement Type  Rem. Rep. Encap Enclose			
	YES	NO_	NA NA	miscell.)		<b></b>		1100		- Lilicap	Liiciose	
Above ceiling in office			Х	Pipe insulatio	n	200 LF		Х				
Roof of Maintenance Bldg.			X Roof (roof col Be removed di demolition)			II 2000 SF						
Perimeter windows		X Window glazing		g	210 SF			<				
Name of Reg. Waste Hauler		NJDEP Waste Hauler ID #\			Cubic Yards of Waste Na			Name of R	lame of Reg. Landfill			
N.E.T.S. / Miners	17235	7235			Approx. 10			BFI Imperial				
City, State				Disp. Date			City, State					
Hazelton, PA					1	/ TBD Impe				erial, PA		

Mail to: NJDEP-DSHW-BRRTP 401 E. State St., PO 414 Trenton, NJ 08625-0414

Completed by (Print or Type)

Robert Casciato

Telephone 609-984-6620

<u>Title</u>

President

C:\WORD\MYDOCS\ASBESTOS 9/18/00

10/01/12

**Date**