		117
OK	1050	

Date of Notification (1)	Name of Building Owner/Operator (2)														
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Agencies Notified	Type Notification			Street A						「厚暖塩	1	1	=	1111	
⊠ EPA	Initial			Charles	& Wat	ers Stre	ets			N L				111	
DEP DOL	Amended			City, Sta	ate, Zip C	ode			11-	31	176	2015		W	
□ DOL	Amendment Emergency (Glouces	ster City	y, NJ				11 001 -	- 4	2010	i		
DOH	justification)	morading		Name o	f Contact				12	-TelephoneNu	mber			1	
☐ DCA	Cancellation			Project	Manage	er						TR	DL &		
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Entropy of the second of the		g Place (.	3)					Type	of Facility (4	()					
Old GAF Boiler Plant Street Address									School (K-12						
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Waters St & NJ Ave								e e	etc.)			90	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
City (5)								Squar	e Feet	# of Floors		Bldg.	Age		
Gloucester City, NJ								-		4			115		
County (6)					Code (7) USE ONLY	-	1	Currer	nt Use (Prio	r if being demolis	hed)				
Camden										boiler plan	t				
Name of Monitoring Firm	Hired by Building	Owner (8)	1	ASCN	No.		Name	of Abat	ement Cont	ractor (9)					
AET, Inc.				0021			The M	IACK	Group, LL	_C					
Street Address							Street	Addres	s ·						
222 Church Road									HWY N, S	STE 209					
City, State, Zip Code							City, S	state, Zij	p Code						
Bridgewater, NJ 088							Cherry	/ Hill, I	NJ 08034						
Project Manager for Mon	itoring Firm			Telepho	ne No.		Teleph	none No		License N	lo.				
Eric Houseknecht				, ,	18-1108		(973)			00781	=0		00-10-1-		
Start Date (10)		Schedul	ed Cor				of OSH	A Monitor							
3/1/16				6/30/16	3		The M	MACK Group, LLC.							
Occupancy Status During	g Abatement (Chec	k Only O	ne)				Street	et Address Kings HWY N, STE 209							
Facility Closed/Vaca	ated During Entire F	Period of	Abater	ment						STE 209					
Abatement Performe Other - Describe:	ed Outside of Norm	al Facility	/ Hour	S		1	City, S	tate, Zip	o Code						
							Cherry	/ Hill, 1	NJ 08034						
Scope of Work (Check A	That Apply)						_	_							
≥3 sf or ≥3 lf		Total Control of the	Renova							nt with Negative F	ressu	ire			
≥160 sf or ≥260 lf			Demoli	tion			K		-Enclosure	adura					
				(2)				Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure					e		
		Is	Locat	ion								batement			
Location	of	The second second	Norma	20.7%	Description				on of			Т	/pe		
Asbestos-Containing	The state of the s	7/5 Y/655	d Sole intena			stos Conta	aining M	laterial		Amount			т	100	
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Newark / Freehold Ca	arting			222		Constitution and a second	TDB	(GROWS	TRRF / WM	/ Blu	e Ric	lae		
City, State						-	al Date		City, State				J-		
Newark / Freehold, NJ						6/30/16 Morrisville / Tullytown, PA									
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Steve King		V.P.					ري المام المسارية المسارية المام المام ا			2/1	5/16				

ASBESTOS INVENTORY SECTION 3.0

Charles and Waters Streets G-1 Holdings Company Gloucester City, NJ

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West Room by Main Entrance

Material

650 LF Small Diameter Block Pipe Insulation Large Diameter Block Pipe Insulation

Block Pipe Insulation Debris Heat Exchanger Material

Transite Electrical Panel

Block Insulation Debris **Boiler Insulation**

Room South of Main Entrance

Small Diameter Block Pipe Insulation

Boiler Door Packing Around Door Whiter Window Glaze

Large Diameter Block Pipe Insulation

Transite Electrical Panel

Large Diameter Block Pipe Insulation Boiler Insulation

Room North of Main Entrance

Small Diameter Block Pipe Insulation Boiler Door Packing around Door

White Window Glaze

Quantity

185 linear feet (LF)

2,400 square feet (SF) 180 SF

20 SF

3,240 SF

1,200 SF

450 SF

SSF

24 LF

20 LF

20 SF

300 SF

290 LF

780 SF

AS 9

20 LF

SECTION 3.0 ASBESTOS INVENTORY

ASBESTOS INVENTORY	G-1 Holdings Company Charles and Waters Streets Gloucester City, NJ	Material		Transite Electrical Panel	Block Insulation Debris	Air Cell Pipe Insulation (large)	Black Material A/W Large Metal Pipe		Small Diameter Block Pipe Insulation
		Location	1st Floor (cont.)	Room North of Main Entrance (cont.)				1st Floor Annex	Аппех

6,480 SF

50 SF

100 LF

10 SF

Onantity

2,250.SF

48 LF

Block Insulation Debris Large Diameter Block Pipe Insulation

Furnace Area

2nd Floor

410 LF

100 LF	150 SIF.)	75 T20 LF	% 460 LF	1013,200 SF	TS 21 10 10 10 10 10 10 10 10 10 10 10 10 10	700 SF	20 SF
White Window Glaze	Furnace Door Packing	Large Diameter Block Pipe Insulation	Small Diameter Block Pipe Insulation	Boiler Insulation	Boiler Valve Insulation	Duct Insulation	Boiler Door Packing

SECTION 3.0 ASBESTOS INVENTORY

G-1 Holdings Company Charles and Waters Streets Gloucester City, NJ

2nd Floor (cont.)

Location	Material	Quantity
or (cont.)		
Furnace Area (cont.)	Block Insulation Debris	2,990 SF
	Interior Furnace Door Insulation	50 SF
	Furnace Door Insulation Debris(Inside Oval Chambers)	12 SF
	Interior Boiler Insulation(Top hatch of Boiler #1)	120 SF
Coal and Bucket.System Area	Large Diameter Block Pipe Insulation	380 LF
5 0	Small Diameter Block Pipe Insulation	620 LF
	White Window Glaze	120 LF
	Tank Insulation	130 SF
	Block Insulation Debris	$3,200~\mathrm{SF}$
Mezzanine	Small Diameter Block Pipe Insulation	180 LF
	Block Insulation Debris	900 SF
	Window Glaze	JT 07
Turbine Area	Small Diameter Block Pipe Insulation	650 SF
	Large Diameter Block Pipe Insulation	200 L.F
	Tank Insulation (South of Turbines)	550 SF

400 SF

Interior Turbine Insulation

ASBESTOS INVENTORY SECTION 3.0

Charles and Waters Streets G-1 Holdings Company Gloucester City, NJ

Location

2nd Floor (cont.)

Turbine Area (cont.)

Material	Ouantity
Interior Wrapped Turbine Insulation	300 SF
Red Linoleum (Control Room and Bathroom)	200 SF
Tank Insulation (Above Annex)	1,200 SF
White Window Glaze	400 LF
Boiler Fan Duct Insulation	400 SF

Boiler Insulation Debris (Inside Oval Boiler Chambers) Contaminated Fiberglass Insulation(East of Boiler #2) Insulation Debris(Inside Top Hatch of Boiler #2) Block Pipe Insulation(In wall at Top NE Corner) Tank Insulation (South of Boiler #2) Boiler Door Insulation

Transite Debris Gasket Rope

300 SF 2,600 SF 400 SF 6,000 SF 6,000 SFR 30 SF 30 SF 30 LF 100 SF 50 SF 40 SF ISSF 4 SF 160 LF 150 SF

Boiler Valve Insulation

Boiler Insulation

Exterior

South Side of Building

SECTION 3.0 ASBESTOS INVENTORY

G-1 Holdings Company Charles and Waters Streets Gloucester City, NJ

Location	Material	Quantity
Exterior (cont.)		
South Side of Building (cont.)	Block Pipe Insulation Debris(Pipe Discharge Area)	5 SF
	Black Tar on Brick	4 SF
East Side of Building	Miscellaneous Insulation (Bottom of Coal Chute Tank)	12 SF
	White Door Packing	5 SF
	Transite Panels	400 SF
North Side of Building, East of Annex	Black Wall Tar	4 SF
Roof	Roof Field	9,000 SF
	Silver Flashing	800 LF
	Black Flashing	800 LF
Water Tank Area	White Paper Material	400 SF
	Black Tar Paper Material	300 SF
Tank Top Section	Black and Gray Tar Material	400 SF
1st Floor		
Room North of Main Entrance	Rope Gasket Material	SSF

SECTION 3.0 ASBESTOS INVENTORY

G-1 Holdings Company Charles and Waters Streets Gloucester City, NJ

Ouantity	200 SF	35 SF	3 Barrels	
	debris		barrels)	
Material	Block Pipe Insulation debris	Transite Panels	Block Pipe Insulation (in barrels)	
Location Location	Small Cinderblock Building			

Additional ACM (i.e. pipe insulation) may be found above hard ceilings and behind hard walls.



Quantities are approximated and to be used for budget purposes only.

Quantities of Block Insulation Debris include catwalks.

Additional Interior Turbine Insulation may be present in the two small turbines on the North wall of the Coal and Bucket system area.

		N			o NJAC 8					(10	CX	<			
Date of Notification (1)			1	Name of	Building C	wner/Op	erator ((2)		100		_		7	
March	n 03, 2016		G	-1 Hold	dings Co	mpany	,		Tuesday (F	@ 图 []	W	E	1		
Agencies Notified	Type Notification		_	Street Ad		12								111	
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DOL	Amendment		_ G	loucest	ter City,	NJ				001					
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DOH DCA	justification) Cancellation		Р	roject N	Manager	-							(a)	. 1	
			- 1.		ITY INFO		N								
Name of Facility Where A	batement is Taking	Place (3)						Туре	of Facility (4	1)					
Old GAF Boiler Plant								П	School (K-12	2)					
Street Address								П	Subchapter	8 (Other than k					
Water & Charles Stre	et			34.30						rivate & comme	ercial	build	ngs,	home	s,
City (5)	Cl								etc.) ire Feet	# of Floors		Bi	dg. A	ae	_
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Gloucester City, NJ County (6)		-		County C	ode (7)		-	Curre	ent Use (Pric	or if being demo	olishe	d)		10	
Camden					SE ONLY)					boiler pla		T-6			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCM	No		Name	of Aba	atement.Con		ant				-
	Timed by building	Owner (b)			140.	-									
AET, Inc. Street Address				0021			Street		Group, L						_
										CTE 200					
222 Church Road									HWY N,	STE 209		-			
City, State, Zip Code) :						500		Zip Code						
Bridgewater, NJ 0880			- 1.						NJ 08034	Licens	a Na			_	
Project Manager for Mon	itoring Firm			Telephor			Teleph								
Eric Houseknecht		0 1 1 1	- V		8-1108	((973)			00781					
Start Date (10)		Schedule			Date (11)		Name of OSHA Monitor The MACK Group, LLC.								
3/1/16			6/30/16	3					LC.						
Occupancy Status During	Abatement (Chec	k Only On	ie)				Street								
Facility Closed/Vac									HWY N,	STE 209					
Abatement Performe Other - Describe:	ed Outside of Norm	nal Facility	Hours						Zip Code						
Other-Describe: _							Cherry	/ Hill,	NJ 08034	4					
Scope of Work (Check A	I That Apply)							_							
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≥160 sf or ≥260 lf		\times	Demolit	ion					ini-Enclosure lovebag Prod						
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Newark / Freehold C	arting			222	.53		TDB			S / TRRF / W	VM /	Blue	Ric	ge	
City, State							sal Date		City, Stat						
Newark / Freehold, N	IJ					6	/30/16	3	Morrisvi	lle / Tullytow					
Completed by		Title				S	ignature			£	Date				
Steve King		V.P.									3/3/	16			

Date of Notification (1)				Name of	Building ()wner/(Operator (2)						-	
200	bor 20, 2016														
Agencies Notified	ber 29, 2016 Type Notification			Street Ad		лпраг	ıy								-
Agencies Notified	- Type Notification		1	Charles		r Stra	ote					- t			
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Name of Facility Where	Abatement is Takin	g Place (3)	1,4012		71 (141) (1			of Facility (SOCONTRI	7.1 %		1	
Old GAF Boiler Plant									School (K-9	SEST	SS CUNCTY RELIGING	-/			
Street Address								5	Subchapter	8_(Oth	er than K-12)				
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Gloucester City, NJ								20,000			Δ		177.5	15	
County (6)			-	County C	ode (7)			Curre	nt Use (Pri	or if be	ing demolishe	ed)		10	
Camden					SE ONLY)						oiler plant				
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCM	No.		Name	of Abat	tement Cor	11.01				7	
Criterian Labs							The M	ACK	Group, L	LC					
Street Address			-			7=	Street					-17-11-2		Section	
3370 Progress Drive	Suite J						1500 k	Cinas	HWY N,	STE	209				
City, State, Zip Code	, oute o								ip Code						
Bensalem, PA 19020)						200000000000000000000000000000000000000		NJ 0803	4					
Project Manager for Mon				Telephon	ne No.		Teleph				License No				
Project Manager			36	215.244			(973)				00781				
Start Date (10)		Schedule		The state of the s					A Monitor		1	220 120			
10/3/16	3			12/31/1	6		The M	ACK	Group, L	LC.					*
Occupancy Status Durin	750	ck Only Or						Street Address							
Facility Closed/Vac	ated During Entire	Period of	Δhater	ment			1500 k	(inas	HWY N,	STE	209				
Abatement Perform									ip Code						
Other - Describe:						_	Cherry	Hill,	NJ 0803	4					
Scope of Work (Check A	II That Apply)						,								
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≥160 sf or ≥260 lf		District Co.	Demoli					Mir	ni-Enclosure	е					
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Location Asbestos-Containing		Use	d Sole	ely by	Ashes		escription ntaining N		(ACM)	ļ ,	Amount			m	
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(13)			_			Other	miscenar	icous				val	=	Encapsulate	ЛГе
		Yes	No	N/A											
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Phase 1 - see attached Phase 2 - furnace					- NAME OF THE	furna	ice insu	lation	The same of the sa	8	000 s/f	X	-		
Phase 2 - turnace						100000000000000000000000000000000000000					000 s/f	X)		
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Spartan Environmental Enterprises, Inc							112.2		Minerva	Ente	rprises, LL	С			
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Donora, PA						12/31/16 Waynesburg, OH									
Completed by Title					Signature Date					05-10-3					
Steve King		V.P.				-		9/29/16							

	Is	Locatio	on v	Description of	The second secon			ement /pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	ed Solel intenan todial S (12)	y by ice/	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
And the second s	Yes	No	N/A	and the second s	D27			(D	
Phase 2 - Boiler	X			boiler insulation	9000 s/f	X			
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Date of Notification (1) 9/29/16		N	lame of E Division	Building (of Pro	Owner/Op perty M	erator lanage	(2) ement	& Const	ruction		V	, ,	
Agencies Notified Type Notification			treet Add		Street6	s, 9th I	Floor,	(P.O. Bo	x 034)	W		#1 #1	P.
EPA Initial Amended Amendment		_ C	ity, State Trenton	e, Zip Co , NJ 08	de								
Emergency (justification) DCA Cancellation	moluding	333	lame of 0						Telephone Nun	nher.			
DCA Cancellation			FACILI	ITY INFO	RMATIO	N							
Name of Facility Where Abatement is Takin Residential	g Place (3)							chool (K-12	SBESTOS CO LICENSII	↓G	L&	and the second second second	1
Street Address							X O	ubchapter other (i.e. pi tc.)	8 (Other than K-12 rivate & commerci	al build	lings,	home	es,
City (5) Woodbridge							Square 1,285	e Feet	# of Floors 2		dg. A 2 yrs		
County (6) Middlesex		(S	County Co	ode (7) SE ONLY)		-00%	Currer		r if being demolish	ied)			119987
Name of Monitoring Firm Hired by Building	Owner (8)		ASCM	No.				ement Con ontracting					
Street Address							Addres: Route	s 46, Suite	: 7A				
City, State, Zip Code							tate, Zip wa, Nu	Code J 07512	2 4 11 2 4 11 2				
Project Manager for Monitoring Firm		T	elephone	e No.			one No 333-91		License N 01232	0.			
Start Date (10) 10/17/16	Scheduled		pletion D	ate (11)				A Monitor n Consu	Itants, Inc.				
Occupancy Status During Abatement (Chec	k Only One)	7					Addres						
Facility Closed/Vacated During Entire Abatement Performed Outside of Norm Other – Describe:	Period of Ab	ateme	ent			City, S	tate, Zip		., Bldg. 35 E				
						I all	Lawii,	140 0741					
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		novati		7/4		×	Min Glo	i-Enclosure	ent with Negative F edure I (*) and Non-Friat			e	
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Int. Air Duct		Χ		V	Vhite Th	nerma	l Pape	er	33 SF	X			
Ext. 1st flr Rear & Sides		Χ			Grey	/ Tran	site		1,472 SF	X			
all sides under Aluminum									(6)	-			
			I I		T Outrie V	Varda		Name of	Registered Landfil	<u> </u>			
Name of Registered Waste Hauler Newark Carting, Inc.		Ha	JDEP Wa		Cubic \ of Was				vn Resource R		ery F	acili	ty
		04	509		5+ Dispos	al Date		City, Stat					
City, State Newark, NJ	1				TBD	ignature	~	Tullytov		ate			
Completed by Dimo Golcev	Title Genera	al Ma	anager	8	اد	ignatult		16	/ //	/29/16	5		
ASB-41 (R-06-08)				*.		- 65	ot use t	his form	asbestos licensui	e exer	npted	activi	ities.
								U					



ck 1549

Date of Notification (1)			ame of Bu									-	
9/29/16					perty N	/lanag	emen	t & Const	ruction				
Agencies Notified Type Notification			treet Addi 33 West		Street	6, 9th	Floor,	(P.O. Bo	x 034)				
EPA Initial Amended Amendment #			ity, State, renton,						EGEI	V		M	
Emergency (in justification) DCA Emergency (in justification) Cancellation	cluaing	4 (20)	lame of Co					113	Telephone Nur	nher 			
L DCA Cancellation			FACILIT	27.67	RMATI	ON			OCT - 4	2016		E	1
Name of Facility Where Abatement is Taking	Place (3)							of Facility (4					
Residential Street Address								School (K-1. Subchapter	8 (Other than K-12	2)/TRO)L &	to to the same	
							(etc.)	rivate & commerci				28.1
City (5) Woodbridge							1,92		# of Floors 2	1	ldg. A 15 yı		
County (6) Middlesex			ounty Coo				Curre		or if being demolish	ned)			
Name of Monitoring Firm Hired by Building Ov	vner (8)		ASCM N	lo.				tement Con					
Street Address	4 .						Addres	ss 46, Suite	2 7A				
City, State, Zip Code						City, S	State, Zi	p Code J 07512				57. (11.3%)	
Project Manager for Monitoring Firm		Т	elephone	No.		Teleph	none No	o.	License N	lo.			
	Scheduled	Comr	alation Da	te (11)		300000000000000000000000000000000000000	333-9	I / b IA Monitor	01232				
- 1 TO TO THE POST OF THE POST	11/4/16	CON	Jieuon Da	ie (11)		Envi	rovisio	on Consu	Itants, Inc.				
Occupancy Status During Abatement (Check							Addres		., Bldg. 35 E				
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe:	riod of Aba I Facility H	ateme ours	ent		_	City, S	state, Zi	p Code NJ 0741	2000				
Scope of Work (Check All That Apply)							_						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		novati nolitio	To a control of the c				Mir Glo	ni-Enclosure	edure				
		10.00				Ľ	≦ No	n-Exempted	d (*) and Non-Friat		Abate		t
Location of	Nor	catio mally	/		Des	scription	n of				Ту	ре	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used S Mainte Custod	enand	ce/		tos Cont thermal surfa	aining N	Material s insula NT, or		Amount (Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes 1	No	N/A									te	(b
Int. 1st & 2nd FIr Living Rm, Kitchen		X			Gre	y Plas	ster		4,546 SF	X			
Middle Rm, over stairwell, walls,				3.4 (1 2 - 1 - 1 - 1)									
ceiling tile & drywall													
Ext. Foundation		X				erproc	fing	Name of	825 SF Registered Landfil	X			
Name of Registered Waste Hauler		110000	IDEP Was auler ID N		of Wa	Yards ste		become one	vn Resource R		erv F	acili	itv
Newark Carting, Inc. City, State		04	509		15+ Dispos	sal Date)	City, Stat				11.37.27.27.27	
Newark, NJ					TBD		A	Tullytov	vn, PA	ate			
Completed by Dimo Golcev	Title Genera	al Ma	anager			Signatur		16		/29/16 	3		
ASB-41 (R-06-08)						·	ot use t	this form for	asbestos licensur	re exer	npted	activi	ities.



Date of Notification (1) 9/29/16		Nam-	e of Building (ision of Pro	Owner/Oper perty Ma	rator ((2) ement (& Const	ruction				
Agencies Notified Type Notification			et Address West State	Street6,	9th F	loor, (Р.О. Во	x 034)	E	17/		
EPA DEP Amended Amendment # Emergency (incl justification)	luding	Trei	State, Zip Co nton, NJ 08 e of Contact errara					-Telephone)Nur	nber			
DCA Cancellation			ACILITY INFO	DMATION		- 12			-		-	
Name of Facility Where Abatement is Taking P Residential Street Address	lace (3)		AGILITY INFO	JKWIA ITON		Sc	bchapter	STOS CONTR 2) LICENSING 8 (Other than K-12 rivate & commerci	2)	linas	home	25
						etc	:.)	# of Floors		ldg. A		
City (5) Woodbridge						Square 1,853		2	1	01 yı		
County (6) Middlesex		Cour (STA	nty Code (7) TE USE ONLY)			Current House	2.00	or if being demolish	ned)			
Name of Monitoring Firm Hired by Building Own	ner (8)	AS	SCM No.				ment Con ntracting	tractor (9) g Corp.				
Street Address			9	_		Address Route 4	6, Suite	e 7A				
City, State, Zip Code						tate, Zip wa, NJ						
Project Manager for Monitoring Firm		Telep	phone No.			one No.	76	License N 01232	lo.			
I N 12	cheduled C 0/8/16	completi	ion Date (11)				Monitor Consu	Itants, Inc.				
Occupancy Status During Abatement (Check C	only One)					Address		011 055		-383(-83	- 1.65	
Facility Closed/Vacated During Entire Peri Abatement Performed Outside of Normal Other – Describe:	iod of Abat Facility Ho	tement urs		C	ity, St	tate, Zip		., Bldg. 35 E				
Scope of Work (Check All That Apply)					OII I							
≥3 sf or ≥3 lf	1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	ovation olition			×	Mini- Glove	Enclosure	cedure			2	
		100				i Non-	Exempled	d (*) and Non-Friat	JIE F 10	Abate		t
	ls Loc Norn			Descri	intion	of				Ту	ре	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used S Mainte Custodia (1	olely by nance/ al Staff? 2)	? (i.e.	tos Contain thermal sy surfacing other miss	ing M stems g, VA	Material (A s insulation T, or		Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
			I/A					500 OF	1,,			
Int. Basement walls	<u> </u>	(Black wat	terpr	ooting		500 SF	X			
Name of Registered Waste Hauler		NJDE	P Waste	Cubic Ya	rds		Name of	Registered Landfil			-	
Newark Carting, Inc.		Haule 0450	er ID No. 9	of Waste				vn Resource R	Recov	ery F	acili	ty
City, State Newark, NJ				Disposal TBD		-	City, Stat Tullytov	vn, PA	,			
Completed by Dimo Golcev	Title General	l Mana	ager	Sigr	nature		10		ate /29/16	5		
ASB-41 (R-06-08)				*	Dof	use thi	s form for	asbestos licensur	re exer	npted	activi	ities.

6526 - NJ NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7)

Amended Non-Friable Notification / Check #: 6743

						ii										-
Date of Notification			Nam	e of	Buil	ding	Owner	/Operato	or							
0 9 / 2							ms, In	C					<u> </u>	11		7
Agencies Notified T	ype Notific	stion	Str	eet &	Addre	SS				P C						
[X] EPA	[]Initial				es St.		181			回道					11	_
(X) DEP	Notific	ation	Cit	у. S	tate,	Zip	Code			MULT		4 301	6	است		
⊠]DOF	(X) Amended Notific	ation	Ed	ison,	NJ 0	8818				1/2// 0	101			1		_
(×) DOH	[]Cancell		Nan	e of	Cont	act				Tele	phone	Number	-5(N	8		
[]DCA	[]Cancerr	acion	Joe	e Pas	squal	е				\		44	سي ق		-	
			-	FA	CILI	TY IN	FORMA	NOIT		1	الله	سنائ				
Name of Facility Whe	ere Abatemer	it is Ta	king	Plac	e (3)			Ty	pe of Facili	ty (4)					
IEV Health Systems	Inc. Main B	uilding						1		[]School	nter f	Othe	er th	an K	-12)	
JFK Health Systems,	IIIC IVIAIII D	ullullig								[]Other cial b	(i.e.	Driva	ate &	COM	mer-	
									Sc	quare Feet	# of	loors	Bld	g. A	ge	
65 James St.		County	(6)			Cour	nty Co	de (7)	_	50000	3		1 22	50	chad	_
CITY (3)						(ST	ATE US	E ONLY)		urrent Use (F	rior :	ir bei	ng be	MOTT		
Edison, NJ 08818 Name of Monitoring	Simm Wired	Middle	sex	ASCI	No.	1	Name	of Abate	eme	School nt Contractor	(9)			_		
Owner (8)	ETIM NITEG	or ball	-2.19	1												
S&S Environmental S	ciences, Inc.						Four	Strong B	Sullo	ders, Inc.						_
Street Address						1	1									
98 Sand Park Rd.	-						City	Sargeant . State.	Zi	p Code						
City, State, Zip Co						-		n, NJ 07								
Cedar Grove, NJ 070 Project Manager for	09 Monitoring	Firm T	Telep	hone	Numb	er	Tele	phone Nu	mbe	r		Licen	se Nu	mber		
Prakash Khaitan		1	973-8				973-	614-0377	7			00807	7			
Scheduled Start Dat	e (10) Sc	hed.Com	pleti	on D	ate	(11)	Name	of OSHA	Мо	nicor						
Month / Day / Occupancy Status Du	Year M	onth /	1 5	1/11	Year			Strong E		ders, Inc.						
[]Facility Close	d/Vacated D	uring E	ntire	Per	iod	Į	190	Sargeant	+ Δv	/enue						
of Abatement []Abatement Perf						y	City	. State.	Zi	p Code						
Hours - Descri	be:				-	-	Cliff	on, NJ 07	701	3						
Scope of Work (Chec					•		Cline		_							,
[]Demoliti	on		×	Renc	vati	on		[]Min []Glo	ni-E	Containment w Enclosure Dag Procedure riable Proced	:	egativ	e Pre	ssur	e	
			Τ.	Is	T								Abat	emen	t T	ype E
Locati	ion of		No	cation rmal!	Ly			escripti			Am	ount	RE	R	N C	N
Asbestos-G Materia	Containing 1 (ACM)		S	Used olely	Y		Me	stos-Cor	(AC	M)	(Sp	ecify F or	M	E	A P	1.
TO BE	ABATED			Main		i	nsulat	thermal	rfa	cing. VAT.		LF)	V A	Ā	s U	S
. (1				stod:			or o	other mis	sce	llaneous)			I L	Ř	L	R
				No	N/A	\ / A T			-		1,200	SF	X		•	E
Level 1 - Hallway			+	1	-	VAT					11,20		/			-
			-	_							+					-
				-							+		-	_	-	+
			1,	-			Cubi	c Yards		Name of Regi	stered	Landi	111			
Name of Registered	Waste Haul	er	H	aule	Wast r ID	No.	of W									
Four Strong Builder	s, Inc.		1	2609	9					G.R.O.W.S., I	nc.					
City. State							Disp	osal Dat	e	City. State						
Clifton, NJ										Tullytown, PA	١					
Completed By (Prin	t or Type)	Title		77777				Signatu	re	-11		1	D	ate		
Bilyana Kulakovska		Office	Admi	nistra	ator			10	1	Du		/	9	/28/	16	
ASB-41				-			~					/				200
JUN 95											1	00			G4	667

. Check # 884

MAY 11

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

pate of Notification (1)			N	lame of l	Building Ov	wner/Operator (2)						
	16			Acces	s Proper	ty Managemer	nt			FE	-		
	ation		S	Street Ad	dress			Finn E	5 E 1 W	5	M		
gencies Notified	20011			140 E.	Ridgewo	ood Aveneue		1111-15					
☑ DOLWD ☐ Amended	l		C		e, Zip Cod			TIENT	2011		UII		
ZI DHSS Amendme					us, NJ 0			111 111 (CT - 4 2016	0 11	-		
□ DCA		ding	N		Contact			TULIT	elephone Numbe	≥ Γ			
(NJAC 5:23-8) justification [Cancellai			1		andy Dick	kinson				11 %			
☐ Calicella	LIOII					ORMATION		ASS	LICENSING			1	
		1 /2	1	FACIL	III INC	JKINA HON	Tvr	pe of Facility (4)					
Name of Facility Where Abatement is	laking P	iace (3)					School (K-12)					
Caribbean House								Subchapter 8 (6	Other than K-12)	ial build	inae		
Street Address								homes, etc.)	ate and commerc	iai bullu	iliga,		
1375 River Road							Sa	uare Feet	# of Floors	Bldg	. Age		
City (5)								68.000	6	60	+ yr	s.	
Edgewater					0-4-7//	STATE USE ONLY		The state of the s	if being demolish	ned)			
County (6)				County	Code (/)(3	STATE USE ONLY)		Apartment Bu		100000			
Bergen	901-1-1-1					Name of Abatem		20 T 10 10 10 10 10 10 10 10 10 10 10 10 10	9				
Name of Monitoring Firm Hired by Bui	lding Ow	mer (8))	ASCM N	0.			Mat Removal	Inc				
N/A				N/A			iaz	Mat Kemova	, 1110.				
Street Address					1	Street Address	4.0	44					
						494 East 41s							
City, State, Zip Code						City, State, Zip C							
						Paterson, N.	J 07	7504	License No.				
Project Manager for Monitoring Firm			Tele	phone N	0.	Telephone No.							
						973-345-002			00507				_
Start Date (10)				tion Date	1	Name of OSHA							
9 / 30 / 16	10	_ /	5	/ _	16	Same as ab	ove						
Occupancy Status During Abatement	(Check	only or	ne)			Street Address							
☐ Facility Closed/Vacated During Er	ntire Peri	od of A	bate	ment									
Abatement Performed Outside of	Normal F	Facility	Hou	rs - Desc	cribe	City, State, Zip (Code	е					
Time of Abatement:AM	PM	1/	_PM	/	AM								_
Scope of Work (Check all that apply)				X-231		_		N	-ti Dressure				
Control and the control of the contr						☐ Full Co		nment with Neg	alive Pressure				
≥3 sf or ≥3 lf ≥3 sf or ≥3 lf		Rer Der Der Rer Der Rer Rer				☑ Glovet	an I	Procedure					
☐ ≥160 sf or ≥260 lf		_ 50.	11101111	0.11		☐ Non-E	xem	pted (*) and No	n-Friable Procedu	ıre			
		ls	Loca	ition		***				Aba	ateme	ent Ty	
Location of			Norma			Description	n of	(ACM)	Amount	Re	Repair	Enc	Enc
Asbestos-Containing Material (A	CM)			lely by ance/	Asbe	stos Containing I ., thermal system	viate es in	erial (ACIVI)	(Specify	Removal	pair	Encapsulate	Enclosure
TO BE ABATED IN Facility				Staff?	(1.6	surfacing, VA	AT, c	or	SF or LF)	/al		sula	0
(13)			(12)		other miscella	neo	us)				te	
		Yes	No	N/A						57			-
Basement Pump Room		\boxtimes			Pipe Ins	sulation			20 LF		П	Ш	E
Dagement amp ites				П									
	1.00257		-		-						П	П	T
The The Administration Epister 1915	W. Carlotter										1	-	-
												Ш	L
Name of Registered Waste Hauler	-			NJDEP	Waste	Cubic Yards of	Ī		stered Landfill		201 7		
East Coast Haz Mat Remova	al, Inc.			Hauler I	D No.	Waste 1		G.R.O.W.S	S., North W/M	of PA			
	.,			419		Disposal Date		City, State					
City, State						10-5-16		Morrisville	e, PA				
Paterson, NJ						Signature	/	///	//	Date			
Completed By (Print or Type)	Titl					/		1. 11/1	_	9-	25	,	1
James Unger	S	er. Est	tima	tor/Pro	ject Mgr.	/n	C Sec	2 4 1		/	× /	- 1	6
ASB-41		Do no	of use	this for	n for ashe	stos licensure ex	emp	nted activities.					
MAY 11		Do no	ot use	this for	II TOF aspes	SIOS MOGIISUIE EX	Jill	TOO GOLFILIOO.					

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

MO#19730019521		1	(Purs	uant :	to NJAC	8:60 and 5:16	6)						
Date of Notification (1)			N	ame of	Building O	wner/Operator ((2)						
	30 / 16		т :	oo W=	icht								
Agencies Notified	Type Notification			se Wr treet A	ddress								
☐ EPA			100				1		D 017 F2	Charles I			
☑ DOLWD	Amended		C	ity. Sta	ate, Zip Coo	de 111		5 6 1		F			
☑ DHSS	Amendment #			5400	own, NJ 0	11"	51						
□ DCA (NJAC 5:23-8)	Emergency (incli	uding			f Contact	7700	H	OCT I	Telephone Numi	oerill			
(NJAC 5.25-6)	Cancellation		I	ise Wr	ioht	1-1	4	001 7	4 /1116	븨			
			I.	0.00		ORMATION							
Name of Facility Where	Abatement is Taking F	Place (3)	170	E., , (141	O T T T T T T T T T T T T T T T T T T T	Туре	of Facility (4	AONTROL &				
	, toutomone to running .	1000 (7/			1	- FS	cheel (K-12)	SING				
Private house Street Address								Subchapter 8	(Other than K-1 2 vate and commer) rcial buil	dinas		
Street Address								nomes, etc.)	vate and commo	ciai buili	umgo	,	
City (5)							Squ	are Feet	# of Floors	Bldg	g. Ag	е	
Morristown, NJ 07960	n -												
County (6)	0			County	Code (7) (S	TATE USE ONLY)	Curi	rent Use (Prid	or if being demoli	shed)			
Morris													
Name of Monitoring Fire	m Hired by Building O	wner (8) A	SCM N	lo.	Name of Abatem	ment C	ontractor (9)					
					(Gr Tech LLC							
Street Address						Street Address							
				'//		76 Valley Rd							
City, State, Zip Code						City, State, Zip (
						Wayne, NJ 074	470		License No.				
Project Manager for Mo	onitoring Firm		Telep	hone N		Telephone No.							
			1.1	D-1		973-638-1777 Name of OSHA		2,5	01127				
Start Date (10)	/ 16 Sched				16								
				_ ' _		Envirovision C Street Address	Consu	itants,Inc					94 1
Occupancy Status Duri				nent			D	J DIJ 4'	250				
Abatement Perform					cribe	20-21 Wagarav City, State, Zip		ia, Blag .# .	33E				
Time of Abatement:	AMPM	A/	_PM		ΔAA	Fair Lawn, NJ		0					
Scope of Work (Check	all that anniv)		-		-	Clean	up and	d decontamir	ation with negati	ve press	ure		
	all that apply)	<u> </u>				Full Co	ontainr	nent with Neg	gative Pressure				
>3 sf or >3 lf > 160 sf or >260 lf		Re	novatio molitio	n n		Mini-E	han Pr	ocedure \Box	Tent with Negativ	ve Press	ure		
			momile			Glovet Non-E	xempt	ed (*) and No	n-Friable Proced	iure	ı		
		5000	Locati							Ab	1	ent T	ype
Locati Asbestos-Containir			Normal d Sole		Aches	Description stos Containing N		al (ACM)	Amount	Re	Repair	Enc	Enc
TO BE A		2000	intena			., thermal system	ns insu		(Specify	Removal	pair	aps	Enclosure
IN Fa	Company of the compan	Cus	todial ((12)	Stair?		surfacing, VA other miscella)	SIF or LF)	a		Encapsulate	e
(13	0)	·Voc	No	N/A	1	other impoona	2110000	/				CD	
		Yes	I I	X	Pipe inst	ulation			50 LF				
Basement				1000000							F		
First floor				\boxtimes	VAT flo	or tiles			120 SF		1	1	-
	<u> </u>									ᆜᆜ	1	Ш	1-
								to exercise to the second	=				L
Name of Registered V	Vaste Hauler		NJI	DEP Wast	e Hauler ID No.	Cubic Yards of W	Vaste 1	Name of Regi	stered Landfill				
Gr Tech LLC			(00337	85	TBD	1	R.R.F. Inc					
City, State	-					Disposal Date	1	City, State					
Wayne, NJ 07470	20.0					TBD	T	`ullytown, F	PA	عصير ترجي			
Completed By (Print of	or Type) Tit	е				Signature				Date			
N.Jevtic		ner				H	lac	Wenad	,	09/30/1	6	7.	5.5
ASB-41	1011			V 5 %									

Date of Notification (1) 9/29/16		Nai Ma	me of B aureer	uilding Ow n Cain P	ner/Oper rivate H	rator (2 Home	2)									
Agencies Notified . Type Notification		Str	eet Add	ress		15										
EPA Initial Amended Amendment #		Cit	y, State each H	, Zip Code łaven N) J 08008	3								pro-set c a re-		
Emergency (in justification) DCA Cancellation	cluding	M	me of C	n		120			Į.	Tele	phone N	umbe	r	-		
	Dines (2)		FACILI	TY INFOR	RMATION	1	Type	of Faci		007	- 4	201	î.		771	-
Name of Facility Where Abatement is Taking Maureen Cain Private Home Street Address	Place (3)							School	(K-12)	(Othe	er than K-	-12)		oc h	omes	
Oli Scr. / Idan God								etc.)	FIS	DED	5-100				1	_
City (5) Beach Haven NJ 08008							1000			2	Floors		35	g. Ag +	9	
County (6)		Co	ounty Co	ode (7) SE ONLY)				ent Use Ise &			ng demol	IISHEO	i)			
Ocean Name of Monitoring Firm Hired by Building O N/A	wner (8)	1	ASCM	No.		Name o			t Contr	actor	(9)					
Street Address					1 3	Street A										
City, State, Zip Code		-				City, St West				91						
Project Manager for Monitoring Firm		Te	elephon	e No.		Teleph 856-7					License 00727					
Start Date (10) 10/12/16	Scheduled 10/18/16		oletion D	Date (11)		Name o		SHA Mo	nitor							
Occupancy Status During Abatement (Check						Street	Addre	ess								
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe:	eriod of Ab	ateme	ent		_	City, S	tate,	Zip Co	de							
Scope of Work (Check All That Apply)							_									
≥3 sf or ≥3 lf x ≥160 sf or ≥260 lf	The same of the sa	novati				×	N G	lini-End	closure	edure	th Negative e nd Non-F					
	1						i N	IOII-EXE	mptec	() a	na reon r	TIGOR		Abate	ment	
	1	ocation or mally			Des	cription	n of							Ту	pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mair	Solel ntenan odial S (12)	ice/	Asbes (i.e.	tos Conta	aining N system sing, VA	Vlateri s insu AT, or	uiation,	M)		Amount (Specify SF or LF)		Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A								200 05				-	
Exterior Siding			Х	1	Exter	rior Si	ding	J		4	000 SF		x			
			-													
Name of Registered Waste Hauler			JDEP V		Cubic						stered La	ndfill				
United Roll off			lauler ID 2459	No.	of Was				.R.O.							
City, State Elm NJ					10/18			M	ty, Stat lorris	ille l	PA 190		to			
Completed by Anthony T Perna	Title Presi	dent			S	Signatu	Te Z	_				9/2	te 29/1	6		

S NOTIFICATION (Pursuant

tate of New Jersey N OF ASBESTOS ABATEMENT to NJAC 8:60 and 12:120)	Clerk	150
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Date of Notification (1) 9/29/16					Building O Stanley		perator (2)							
Agencies Notified EPA DEP DOL	Type Notification Initial Amended Amendment				dress e, Zip Cod NJ 078							<u> </u>		7	
× DOH □ DCA	iustification) Cancellation	0.58	1 27	Name of 0 Michael	Contact Stanley	/			11711	Tele	enhone Num	horn			
Name of Facility Where	Abatement is Takin	g Place (3)		FACIL	ITY INFO	RMATI	ON	Туре	of Facility (4)	TATAS CO	NTRE	DL &		
house Street Address				-					ther (i.e. pr		STOS CO LICENSI er than K-12 & commercia				s,
City (5) Sparta									tc.) e Feet	# 0	f Floors	6: 6:	dg. A 3	ge	
County (6) Sussex				County C	ode (7) SE ONLY)			Curre	nt Use (Prio	r if bei	ing demolish	ed)			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCM	No.				ement Cont onmental		(9) vices, LLC				
Street Address								Addres	s 33, 4 E Ga	ate D	rive				
City, State, Zip Code									p Code NJ 074	18					
Project Manager for Mon	nitoring Firm		-	Telephon	ne No.			one No 764-2			License N 703	0.			
Start Date (10) 10/8/16		Scheduled 11/8/16	Com	npletion D	Date (11)	9	Name	of OSH	A Monitor						
Occupancy Status Durin							Street	Addres	SS						
Abatement Perform Other – Describe:	cated During Entire ned Outside of Non basement	mal Facility I	Hours	ient	-	_	City, S	tate, Z	p Code						
Scope of Work (Check / ≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf	All That Apply)		enova				×	Mir	ni-Enclosure ovebag Prod	e cedure	h Negative f			e	
		ls l	ocati	ion									Abat	emen /pe	t
Location Asbestos-Containing TO BE AB In Fact (13	g Material (ACM) BATED illity	Used Mair	ormal Sole ntena odial S (12)	ly by		tos Con therma surfa	escription taining N I system acing, VA miscellar	//ateria s insula \T, or		(Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
1		Yes	No	N/A		nine	e insula	tion			60 LF	×	-	-	
basen	nent			X		bibe	HISUIC	ILIOIT			00 Li				
Name of Registered Wa	aste Hauler		11 60	JDEP W		Cubic of Wa	Yards				tered Landfi			1	
Freehold Cartage				Hauler ID 5939	INU,	TBD		-41			rks Landfi	II			
City, State Freehold NJ						TBD	osal Date		City, Stat			*			
Completed by A. Scott Higgins		Title Presid	dent				Signatur	e L	h	_		ate /29/1	6		

-1- .. - CKEVE HUVEUS>

WD DATE CHANGE

CHECK # 366

State of New Jersey Notification of Asbestos Abatement (Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

Date of Notification (1) 09/29/2016					Name of Building		perato	r (2)		
Agencies Notified					Street Address					
⊠ EPA □ DCA ☑ DOL		XAmeno	Votification		200 Route 17 South,Sui City, State, .Zip Code Mahwah, NJ 07430	ite#215				
⊠ DEP		O Cano		ncation	Name of Contact: Mike Chain		Telephor	e Numb	er	
⊠DOH				EACH ITY IN	FORMATION					
Name of Facility Where A	hatement is	Taking Pla	ce (3)	FACILITY IN	Type of Facility (4)					
ADPP Enterprises, Inc	34(011)311(10	i dating i To	30 (0)		☐ School (K-12) ☐ Subchapter 8 (other t	than K-12)				
Street Address 231 State Route 17 Sou	ıth				X Others (i.e. private & co	ommercial bu	ildings, hon	nes, etc.		
City (5)	County (6)		Cour	ty Code (7)	Sf 3800 Floors 2 .A		VT			-
Mahwah,NJ07450	Bergen			e Use Only)	Current Use (prior if being	g demolished				-
Name of Monitoring Firm	Hired by Bldd	. Owner (B) ASCI	M No.	Name of Contractor (9)					
CSA ,Inc.			2		BL Contracting .Inc	in di	OCT	- 4	2016	·! <u>L</u> /:
Street Address					Street Address					
45Marine Lane					5 Marguerite Lane			300		
City, State, Zip Cod Brick NJ08724					City State, Zip Code Towaco 07082		alian Pin	112	Ī.,	
Projec Manager for Monit Mike Chane	oring Firm	Telepho 732-921	ne Numbe 9223	<u>[</u>	<u>Telephone Number</u> 973-901-0153		<u>License 1</u> 01265	Number		
Scheduled Start Date (10) 10/08/16	!	Schedul 10/12/16		etion Date (11)	Name of OSHA Monitor BL Contracting Inc.					
Occupancy Status During				+	Street Address 5 Marguerite Lane					
Abatement Performed Describe					City, State, Zip Code					
□Other - Describe:					Towaco, NJ 07082					
Source of Work (Check al	that apply)								0	
 □ ≥ 3 sf or ≥ 3 ⊠ ≥ 160 sf or 				☐ Renovation ☑ Demolition	n □ Mi oGlo	n EXampted ni-Enclosure ove bag Proce Il Containmer	dure			
Location of Asbestos-	ls Lo	ocation No	mally		sbestos Containing Material	Amou		patemen	t Type	
Containing Material (ACM Facility (13)	(12)		I Staff?	(ACM) (i.e. then surfacing, VAT,	mal systems insulation, or other misc.)	(Spec or LF)	ify SF	move Re	pair Encap	Enclose
Roof	YE	5 NO	NA 🗵	Roof material		1,400	sf 🗵			\neg
Rooi										
Outside			X	Transite		200 st	X			
Name of Reg. Waste Hau Waste Management of Per		NJDEP 32604	Vaste Hau	ıler ID #	Cubic Yards of Waste 138 bags		Name of T.R.R.F	Register	ed Landf	<u>ill</u>
			C.			Disposal D	<u>ate</u>		<u>, State</u> ytown, P	A
Completed by (Print or Ty	<u>oe)</u>	Title			Signature (<u>Date</u>			
Nedo Vasilic		Preside	nt		4		0929/201	6		

State of NJ

8 & G proj. #: 2016-147A		(Pursuant	ian of Asbesto to NJAC 5:60- RGENCY 0&1	7 and 12:120-7) \/	Check#	8042	N. S. S. S. S.		
Date of Notification (1)	I I Name of 6	Building Owner	Operator (2)				7,		-
10 19 1/13 10 1/11 16			lewood Schoo	ol District	117/5	32.3	1		-
Agencies Natified Type Notification		and the same transfer			T 1 SF	0 34 3/	6		
EPA (P) Initial	525 A	cademy Stre	et	XXXX	101 (1)	1	A	-	1
☐ DEP	City, State	Zip Çede							1
☑ DOL ☐ Amendm	ent Maple	O LM , boows	7040		MANAGA	- Line	-1775	1	
MOD S	Name of C	Centact		*	Telephone	Minne	Sive	We imp	· Para
DCA Cencella	Willia	ım Kyle						_	-
The state of the s		FAOIL	ITY INFORMATIC	oN .		11	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Name of facility where abatement is	taking place (3)				Type of Facility (4	(K - 12)			
Administration Building, Info		nology Roon	n (non Sub 8)		Subcha	plar B (Other th		(2)	
Street Address		A /			Other (f	Private/Comme Homes, etc.	ncial		
525 Academy Street	() \$ 1	M	· lear	1-4P		a of Floors	Sid	g. Age	
City (5)	County (6)			ounty Code (7)	Current Use (Pr	in If helps den	nlisha	4)	
Maplewood	Essex		(0		Administration				Section 2
Name of Monitoring Firm Hired by a	siag, Owner (8)		ASCM No. 0057	Name of Apatement					10
AHERA Consultants			UU01	B & G Restore	gon, inc.				-134
Street Address P.O. Box 385				105 Ryerson	Road				
City, State, Zip Code				City, State, Zip Code					
Oceanville, NJ 08231				Lincoln Park					
Project Manager for Monitoring Flam		Phone Number		(973)696-68		Dicense Number 00378	per		
Eric Clarkson		609-652-1		Name of QSHA Mo	The second secon		en stellage	-	
Scheduled Start Date (10)	Sched, Comp	eletion Date (11)	B & G Restora			William V Town		
10/03/2016	10/21/201			Street Address		A			
Occupancy Status During Absterner	it (Check only one	:)		105 Ryerson				- modern	-
Facility closed/vacated during Abstement performed outside	entire period of a	batément. hours-		City, State, Zip Cod	•				
Describe:			-	LincolnPark, I	NJ 07035			-	
Scope of Work (check all that apply	n								
Demolition	Renovation			Full Containment win	agative pressure	Glovebag p			
□ >3 af or >3 ff	≥160 sf or ≥260 lf	a de la compansa del compansa de la compansa del compansa de la co		Mini-enclosure		Non-mable	proces	dure	-
Location of	b location norm by maintenance	ally used solely	Fig. 2000 1		Amount		8	E I	ε
zabastos-containing	staff(12)	innstant.	Description of material (AC	of a sbestos-containing	Amount (Specify \$	For o	p	0	0
material to be absted in facility (15)	Yes N	N/A	material (AC	(M)	LF)	¥	1	p ·	L
		The second second	celling debris	on floor	400 sf	8	廿	K	
Info Technology Room			THE RESERVE OF THE PERSON NAMED IN	an-up procedure)			一		
/ storage area			10000						
Registered Waste Hauler B & G Restoration, Inc.	NJDEP Her 19563		upio Yaida of Was	to Name of Registers Tullytow	ed Landfill n Resource & Re	ecovery Cer	iter	de de la constante	
City, State Lincoln Park, NJ		Disposal D 10/03	rate /16 - 10/24/16	City, State Tullytown	ı, PA				
Completed by (Print or Type)	Title		Signature	The State of the S	Control of the Contro	Date		and the second	PER PROPERTY
Gordana Luna	Secretary/Tre	PARLIET		Girdana Quas	-	09/30/20	16	And Secure	

Date of Notification (1) 9/29/16				Building				nent & Con	struc	ction	1)		1		
Agencies Notified Type Notification X EPA X Initial		1.8	Street A 33 We		Street	6, 9th	Flo	oor, (P.O. E	Box (034)					
DEP Amended DOL Amendment #				ite, Zip Co n, NJ 08				Organization of the control of the c	7	E C	a E	7 F	$\overline{\mathbb{W}}$	E.	1
Emergency (ir justification) DCA Emergency (ir justification) Cancellation	icidaling		Name of R. Fer	f Contact rara				Marine and the second of the s	N	Telephon	A Ni	mh -			-
_			FACI	LITY INFO	ORMATI	ON				00	T -	- 4	2016		1
Name of Facility Where Abatement is Taking Residential	Place (3)						Ту	pe of Facility School (K			, Adjustings, in	×		a second	REMANDARY
Street Address							×	Subchapte Other (i.e. etc.)							es,
City (5) Woodbridge								quare Feet 458		# of Floor 2	rs		ldg. A 00 y		
County (6) Middlesex				Code (7) JSE ONLY)				urrent Use (P ouse	rior if	being der	molisi	hed)			
Name of Monitoring Firm Hired by Building O	wner (8)		ASCN	1 No.				Abatement Co Contractir							
Street Address						Street 205 F	10000	dress ute 46, Sui	te 7/	A					
City, State, Zip Code								e, Zip Code , NJ 07512							
Project Manager for Monitoring Firm			Telephoi	ne No.		Teleph 973-		e No. 3-9176		Lice 012	nse N 32	lo.			
	Scheduled 10/28/16		pletion (Date (11)				OSHA Monito ision Cons		nts, Inc.					
Occupancy Status During Abatement (Check	Only One	2)				Street						m-ran			
Facility Closed/Vacated During Entire Per Abatement Performed Outside of Normal					9	City, S	tate	Vagaraw R e, Zip Code		31dg. 35	Е				
Other – Describe:						Fair	Lav	wn, NJ 074	10						
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enovat emoliti				×		Full Containr Mini-Enclosu Glovebag Pro Non-Exempte	re ocedu	ure					
								Non-Exemple		and Non	-i iiak	1111	Abate	on white-v	
I postion of	10000000	_ocatio	8		Day	scription	of						Ту	ре	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mair	Solel ntenan odial S (12)	ice/		tos Cont thermal surfac	aining N	Mate s ins T, c			Amount (Specify SF or LF	y	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A											Ф	
Int. 1st flr Kitchen Tile & Plywood		Χ		Ta	an Viny	/I Floor	r M	iddle		143 LF	=	X			
Int. 2nd flr Kit undrwd, vinyl & plyw		Χ		Green	Flr Tile	e & Ass	soc	c. Mastics		144 SF	=	X			
Ext. Siding All Sides		Χ			Gre	y Trans	site	9		1,591 S	SF.	X			
Ext. Rear Porch Roof		Χ		BI	ack Ro	ofing I	Ма	terial		150 SF	=	X			
Name of Registered Waste Hauler		120	JDEP W auler ID		Cubic of Was					istered La			on, E	ooili	+
Newark Carting, Inc. City, State		04	1509		5+ Dispos	sal Date	Á	City, Sta	390339/533	Resourc	ce n	ecove	ery r	acili	Ly
Newark, NJ					TBD		A-	Tullyto	wn	PA	g				
Completed by Dimo Golcev	Title Gener	al M	anagei	r	S	ignature		16	,)	M	100	ate '29/16	3		
ASB-41 (R-06-08)						o no	ot us	se this form fo	or ast	estos lice	ensur	e exen	npted	activi	ties.

State of New Jersey Notification of Asbestos Abatement Continuation Sheet

					,	Abatemen Type	t
Use Ma	d Sole intena todial	ely by nce/ Staff:	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation surfacing, VAT, or other miscellaneous)	SF or LF)	Removal	Repair G	Enclosure
Yes	No	N/A		001 -	1 201		11
	Х		Black Tar Paper	1,382-SF	-XIII	ROL &	- Annual Control
			Lancary and the same and the sa	LICEN	SING	maked reserving the self-th profession	1
		1000					
					\top		
					1		
	Use Ma	Norma Used Sole Maintena Custodial (12) Yes No	Custodial Staff: (12) Yes No N/A	Normally Used Solely by Maintenance/ Custodial Staff: (12) Pes No N/A Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation surfacing, VAT, or other miscellaneous)	Normally Used Solely by Maintenance/ Custodial Staff: (12) Pes No N/A X Black Tar Paper Description of Asbestos Containing Material (ACM) Amount: (Specify Surfacing, VAT, or other miscellaneous)	Is Location Normally Used Solely by Maintenance/ Custodial Staff: (12) Pes No N/A X Black Tar Paper Description of Asbestos Containing Material (ACM) Amount (Specify Surfacing, VAT, or other miscellaneous) OCT - 1 201	Is Location Normally Used Solely by Maintenance/ Custodial Staff: (12) Pes No N/A X Black Tar Paper Type Amount (Specify Specify Spain Of Asbestos Containing Material (ACM) (Specify Spain Of Amount Spain Of Asbestos Containing Material (ACM) (Specify Spain Of Amount Spain Of Asbestos Containing Material (ACM) (Specify Spain Of Amount Spain Of Asbestos Containing Material (ACM) (Specify Spain Of Amount Spain Of Asbestos Containing Material (ACM) (Specify Spain Of Amount Spain Of Asbestos Containing Material (ACM) (Specify Spain Of Amount Spain Of Asbestos Containing Material (ACM) (Specify Spain Of Amount Spain Of Asbestos Containing Material (ACM) (Specify Spain Of Amount Spain Of Asbestos Containing Material (ACM) (Specify Spain Of Amount Spain Of Asbestos Containing Material (ACM) (Specify Spain Of Amount Spain Of Asbestos Containing Material (ACM) (Specify Spain Of Amount Spain Of Asbestos Containing Material (ACM) (Specify Spain Of Amount Spain Of Asbestos Containing Material (ACM) (Specify Spain Of Amount Spain Of Asbestos Containing Material (ACM) (Specify Spain Of Amount Spain Of Asbestos Containing Material (ACM) (Specify Spain Of Amount Spain Of Asbestos Containing Material (ACM) (Specify Spain Of Amount Spain Of Asbestos Containing Material (ACM) (Specify Spain Of Amount Spain Of Asbestos Containing Material (ACM) (Specify Spain Of Amount Spain Of Asbestos Containing Material (ACM) (Specify Spain Of Asbestos Containing Material (ACM) (Specify Specify Spain Of Asbestos Containing Material (ACM) (Specify Spain Of Asbestos Containing Material (ACM) (Speci

Date of Notification (1)		Na Di	me of B	uilding Owi	ner/Op	perator (2 lanager	nent &	Constru	oction	<u> </u>			
9/29/16 Agencies Notified Type Notification	on	Str	eet Add										
▼ EPA □ DEP □ DOL □ Amended □ Amendment		Cit	ty, State	, Zip Code NJ 086			01, (
X DOH Emergence			me of C						Telephone Nu	mber			
DCA Cancellat	ION		4 50.00000-0000	TY INFORI	MATIC	ON			-				
Name of Facility Where Abatement is Ta	king Place (3)		171012					acility (4)		EL			
Residential							Sub	ool (K-12)	(Other than K=				
Street Address						1 1	Oth	er (i.e. pri	ate & commerc	cial buildi	ngs, h	omes	\$,
City (5)							Square F	eet oct	#_of_Floors\b		lg. Ag	е	
Woodbridge							117 171			- 1	yrs		
County (6)			ounty Co	ode (7) SE ONLY)			Current I House	Jse (Prior	if being demoli	(4_ &	+		
Middlesex Name of Monitoring Firm Hired by Buildi	ng Owner (8)	1	ASCM	No.	T	Name o	f Abaten	nent Contr	actor (9)				
Name of Monitoring Firm Filed by Buildi	rig Owner (o)							tracting	Corp.				
Street Address						Street A		6, Suite	7A				
City, State, Zip Code						City, St	ate, Zip (/a, NJ (Code					
Project Manager for Monitoring Firm		T	elephon	e No.	_		one No.		License	No.			
T TOJOGE Managor To							33-917 of OSHA		01232				
Start Date (10) 10/26/16	Scheduled 11/1/16		oletion D	ate (11)		Envir	ovision		ants, Inc.				
Occupancy Status During Abatement (C							Address Waqa	raw Rd.	, Bldg. 35 E				
Facility Closed/Vacated During En Abatement Performed Outside of I Other – Describe:	Normal Facility	bateme Hours	ent		_	City, St	ate, Zip						
Scope of Work (Check All That Apply)							_						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enovat emoliti				×	Mini-	Enclosure	nt with Negative edure (*) and Non-Fr			e	
							1 Non-	Exempled	() and Non-i	dolorio	Abate	emen	t
	22200	Location lormall	200000		D.	escription	of				Ту	ре	Т
Location of Asbestos-Containing Material (ACN TO BE ABATED In Facility (13)	(1) Used Mai	d Solel intenar odial S (12)	y by nce/	Asbesto (i.e. t	os Cor herma surfa	escription ntaining N al system acing, VA miscellar	faterial (s insulati T, or	ACM) on,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
1 A 300 F 11	Yes	No	N/A									Ф	
Int. Forced Air Vent		Χ				Therma			42 SF	X		-	
Int. Basement Floor		X		Red FI	oor T	Γile & A	ssoc. N	lastic	440 SF	X			-
Int. Basement Floor		Χ		White 9	x9 FI	Ir Tile &	Assoc	Mastic	440 SF	Х		-	
Ext. Wooden Windows		X			200	Vhite G	lazing		11 window	200			
Name of Registered Waste Hauler		10.00	JDEP V		0.000	ic Yards /aste			Registered Lan		ery l	Facil	lity
Newark Carting, Inc.		10000	4509	NO.	5+			- 6		Recov	СГУ	aui	ity
City, State Newark, NJ					Disp TBD	20		City, Stat		Date			- 52 / 0 / 0
Completed by Dimo Golcev	Title Gene	eral N	lanage	er		Signatur		1	1.10	8/29/1	6		
ASB-41 (R-06-08)						. D.C.	ouse th	nis form fo	r asbestos liger	nsure exe	mpte	d acti	vities

State of New Jersey Notification of Asbestos Abatement Continuation Sheet

	le l	_ocati	on					ement pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Mair	ormali I Sole ntenar odial (ly ly by nce/	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A	VAIL 14 - Transito	1,088 SF	X			
Ext. Siding		Х		White Transite	1,000 01	/\			
				patenties for the patenties of the paten	ECE		Ŋ		
					OCT -	4 2	116	3	W. Carlotte
					ASSESTOS LICEI			8	
						-			

Amended Non-Friable Notification / Check #: 6743

6526 - NJ NO-CK

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

Prakash Khaitan 973-857-7188 973-614-0377 97	er than K-12) the & commer- omes, etc.) Bldg. Age 50
Agencies Notified (X)EPA (X)DEP (X)DEP (X)Amended (X)DOR (I)Cancellation (I)C	er than K-12) the & commer- omes, etc.) Bldg. Age 50
Step	er than K-12) the & commer- omes, etc.) Bldg. Age 50
Notification Noti	er than K-12) the & commer- omes, etc.) Bldg. Age 50
Notification City, State, Zip Code County Code Cou	er than K-12) the & commer- omes, etc.) Bldg. Age 50
County Code (7) Subchapter 8 (Other (i.e., privacial building School (Figure Number Street Address	er than K-12) the & commer- omes, etc.) Bldg. Age 50
Name of Contact Joe Pasquale	Bldg. Age
School Same of Facility Where Abatement is Taking Place (3) Type of Facility (4) Mischool (K-12) Subchapter 8 (othe Street Address Square Feet	Bldg. Age
Name of Facility Where Abatement is Taking Place (3) JFK Health Systems, Inc Main Building Street Address 65 James St. City (5) County (6) County (7) (STATE USE ONLY) School (K-12) [Subchapter 8 (Othe [Jother (i.e., privalent of place	Bldg. Age
JFK Health Systems, Inc Main Building Street Address 65 James St. City (5) County (6) County (6) County (7) County (8) Middlesex Name of Monitoring Firm Hired by Building ASCM No. Owner (8) S&S Environmental Sciences, Inc. Street Address 98 Sand Park Rd. City. State. Zip Code Cedar Grove, NJ 07009 Froject Manager for Monitoring Firm Telephone Number Prakash Khaitan Scheduled Start Date (10) Sched. Completion Date (11) 1 1 0 4 1 6	Bldg. Age
JFK Health Systems, Inc Main Building Street Address 65 James St. City (5) County (6) County (6) County Code (7) (STATE USE ONLY) Square Feet # of Floors 50000 3 Current Use (Prior if bein School) Name of Monitoring Firm Aired by Building ASCM No. Owner (8) S&S Environmental Sciences, Inc. Street Address 98 Sand Park Rd. City. State. Zip Code Cedar Grove, NJ 07009 Froject Manager for Monitoring Firm Telephone Number Prakash Khaitan Scheduled Start Date (10) Sched.Completion Date (11) 1 1 1 0 4 / 1 6 1 1 1 1 5 / 1 6 Month / Day / Year	Bldg. Age
Street Address 65 James St. City (5) Edison, NJ 08818 Middlesex Name of Monitoring Firm Bired by Building AscM No. Owner (8) Sas Environmental Sciences, Inc. Street Address 98 Sand Park Rd. City, State. Zip Code Cedar Grove, NJ 07009 Project Manager for Monitoring Firm Telephone Number Prakash Khaitan Scheduled Start Date (10) Sched. Completion Date (11) Month / Day / Year Occupancy Status During Abatement (Check only one) [] Facility Closed/Vacated During Entire Period of Abatement [] Abatement Performed Outside of Normal Facility Hours - Describe: (Clifton, NJ 07013 Scope of Work (Check all that apply) [] Full Containment with Negative	Bldg. Age
65 James St. City (5) County (6) County Code (7) (STATE USE ONLY) Edison, NJ 08818 Niddlesex Name of Monitoring Firm Hired by Building ASCM No. Owner (8) S&S Environmental Sciences, Inc. Street Address 98 Sand Park Rd. City. State. Zip Code Cedar Grove, NJ 07009 Prakash Khaitan Prakash Khaitan Scheduled Start Date (10) Sched. Completion Date (11) 1	Bldg. Age
Edison, NJ 08818 Middlesex Name of Monitoring firm Hired by Building ASCM No. Owner (8) S&S Environmental Sciences, Inc. Street Address 98 Sand Park Rd. City. State. Zip Code Cedar Grove, NJ 07009 Froject Manager for Monitoring firm Telephone Number Prakash Khaitan Scheduled Start Date (10) Sched. Completion Date (11) 1	
Edison, NJ 08818 Name of Monitoring Firm Hired by Building ASCM No. Owner (8) S&S Environmental Sciences, Inc. Street Address 98 Sand Park Rd. City. State. Zip Code Cedar Grove, NJ 07009 Froject Manager for Monitoring Firm Telephone Number Prakash Khaitan Scheduled Start Date (10) Sched.completion Date (11) 1 1 1 1 5 1 6 1 1 1 1 5 1 6 1 1 1 1 6 1 1 1	ng demolished)
Name of Monitoring Firm Hired by Building ASCM No. S&S Environmental Sciences, Inc. Street Address 98 Sand Park Rd. City. State. Zip Code Cedar Grove, NJ 07009 Project Manager for Monitoring Firm Telephone Number Prakash Khaitan Prakash Khaitan Scheduled Start Date (10) Sched.Completion Date (11) 1 1 0 4 1 6	
S&S Environmental Sciences, Inc. Street Address 98 Sand Park Rd. City. State. Zip Code Cedar Grove, NJ 07009 Project Manager for Monitoring Firm Telephone Number Prakash Khaitan 973-857-7188 Scheduled Start Date (10) Sched. Completion Date (11) 1	
Street Address 98 Sand Park Rd. City. State. Zip Code Cedar Grove, NJ 07009 Project Manager for Monitoring Firm Telephone Number Prakash Khaitan 973-857-7188 Scheduled Start Date (10) Sched. Completion Date (11) 1	
98 Sand Park Rd. City. State. Zip Code Cedar Grove, NJ 07009 Project Manager for Monitoring Firm Telephone Number Prakash Khaitan 973-857-7188 Scheduled Start Date (10) Sched. Completion Date (11) 1	
Cedar Grove, NJ 07009 Project Manager for Monitoring Firm Telephone Number Prakash Khaitan Prakash Khaitan Scheduled Start Date (10) Sched.Completion Date (11) 1	
Cedar Grove, NJ 07009 Project Manager for Monitoring Firm Telephone Number Prakash Khaitan Prakash Khaitan 973-857-7188 973-614-0377 Name of OSHA Monitor 1 1 0 4 1 6	
Project Manager for Monitoring Firm Telephone Number Prakash Khaitan 973-857-7188 Scheduled Start Date (10) Sched.Completion Date (11) 1	
Prakash Khaitan Scheduled Start Date (10) 1	se Number
Scheduled Start Date (10) Sched.Completion Date (11) Name of OSHA Monitor 1 1 1 6	to.
Occupancy Status During Abatement (Check only one) []Facility Closed/Vacated During Entire Period of Abatement []Abatement Performed Outside of Normal Facility Hours - Describe: X]Other - Describe: Section closed	
[] Facility Closed/Vacated During Entire Period of Abatement [] Abatement Performed Outside of Normal Facility Hours - Describe: Section closed Clifton, NJ 07013 Scope of Work (Check all that apply) [] Full Containment with Negative	
of Abatement []Abatement Performed Outside of Normal Facility Hours - Describe: X Other - Describe: Section closed	
Hours - Describe: Clifton, NJ 07013	
Scope of Work (Check all that apply) []Full Containment with Negative	
[]rail Containment with magazine	
[]Demolition	: Pressure
Is Is	Abatement Type
Location of Normally Description of	R N N
Asbestos-Containing Used Asbestos-Containing Amount (Specify Material (ACM)	E R C C M E A I
TO BE ABATED by Main- (i.e., thermal systems SF or	O P P C C A S S A I U U
in Facility tenance/ Institution, Surfacing, Val. (13) Custodial or other miscellaneous) Staff(12)	LRLF
Yes No N/A	. E
Level 1 - Hallway VAT 1,200 SF	
Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landf: Hauler ID No. of Waste C.D.O.W.C. no.	111
Four Strong Builders, Inc. 12609 G.R.O.W.S., Inc. Disposal Date City. State	
City. State	
Clifton, NJ Completed By (Print or Type) Title	
Completed By (Print or Type) Title Signature	Date
Bilyana Kulakovska Office Administrator	Date
ASB-41 JUN 95	Date 9/28/16

State of NJ

8 & G proj. d: 2016-147A	-4	+4	Pursuant	tion of Asbest to NJAC 5:60- RGENCY 0&	-7 a	ind 12:120-7) (Ca	K-KCheck #	8042	19,000,00					
The Calcabing (4)		4		Openier (7)						χ_i^I	Ē	-		
Date of Notification (1)				Operator (2) Diewood Schol	ا ام	Dietrint	ATTE	- Se es a sibilita		1	7	-1		
0 19 1/13 10 1/11 16 Agencies Notification			management and and	NEWOOD GOTTO		SIDILIDA			. 7	_	-	00000		
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KOO KE		me of Cor	ntact		DIMENS		Telephoni	Number	- 11	37-75	, w.r			
☐ DCA ☐ Cancelle	ion	William	Kyle											
and the second s			FACIL	ITY INFORMATIO	NC									
Name of facility where abatement is	taking pla	ce (3)					Type of Facility (4) (K - 12)						
Administration Building, Info			logy Roor	n (non Sub 8))		Count	apter 8 (Oth	erth	an K-	12)			
Street Address			1					Private/Corr		cial				
525 Academy Street	$\mathcal{A}(\mathcal{A})$	a n	1 (1ear	7	-up]}		Homes, etc. # of Floors	T	Sid	g. Ag	18		
City (5)	Cour	ity (6)				ity Code (7)	Current Use (P	day 16 hadras	dem	olishe	-41	-		
Maplewood	Ess	séx -		(6			Administration			Albiro		o de la		
Name of Monitoring Firm Hired by a	idg, Owne	r (8)	1	ASCM No.	T	Name of Apotement C						02		
AHERA Consultants				0057	1	B & G Restoration	n, Inc.	-						
Street Address						105 Ryerson Ro	ad		7					
P.O. Box 385					2	City, State, Zip Code			-					
Oceanville, NJ 08231						Lincoln Park, N	J 07035							
Project Manager for Monkoring Flam			hone Numbe		1	Telephone Number (973)696-6869		License N		er				
Eric Clarkson	100000		609-652-1			Name of OSHA Monitor	The second secon			od die				
Scheduled Start Date (10)	Sched	I. Complet	ion Date (11)		B & G Restoration								
10/03/2016		21/2016				Street Address								
Occupancy Status During Absterner	it (Check o	inly one)			106 Ryerson Road						_			
Facility closed/vacated during Abstement performed outside	entire peri	od of sbat	ement. Urs-			City, State, Zip Code	1							
Describe:					-	LincolnPark, NJ	07035							
Scope of Work (check all that appl)	n)				غطد							-		
Demolition	Renovation	no] F	uli Containment winege	ative pressure	Glovebs	g pr	ocedu	176			
□ >3 afor>3 ff ☑	≥160 sf or	≥260 (f		2	JV	fini-enclosure		Non-Ins	ble p	1000	dure			
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asbastos-containing	staff(12)	enance/cu	STO CIVEN			sbestos-containing	Amount (Specify)	SF or	m	p	C	n		
material to be abated in facility (13)	Yes	No	N/A	material (AC	(NA)		LF)		9	4	8	Ľ		
	700	140		111111111111111111111111111111111111111			100 -1		6		12	+		
Info Technology Room			K	celling debris	Charles of the	Name and Address of the Owner, where the Party of the Owner, where the Party of the Owner, where the Owner, which is the Owner, which	400 sf		H	H		計		
/ storage area			-	1 O & M GIE	an	-up procedure)			1	F	F	H		
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Registered Waste Hauler		EP Haule	1D# C	UDIO YAIGA OF VVI	ato	Name of Registered	andfill							
B & G Restoration, Inc.		19563		20	pteies.	AND DESCRIPTION OF THE PERSON NAMED IN COLUMN 2 IS NOT THE PERSON	Resource & R	acovery C	en	er				
City, State Lincoln Park, NJ			Disposal D	rate /16 - 10/24/16		City, State Tullytown, F	PA	0220000						
Completed by (Print or Type)	Title Sig			Signature	-		The second second second	Date		-				
Gordana Luna		ry/Treas	turer			Giordona Luna		09/30/	201	8				

State of NJ

Notification of Asbestos Abatement Pursuant to NJAC 8:60-7 and 12:120-7) 2016-147A B & G proj. #: Check # 8042 EMERGENCY O&M clean-up *** Date of Notification (1) Name of Building Owner/Operator (2) 0 19 1/13 10 1/11 16 1 South Orange/Maplewood School District Agencies Notified Type Notification Street Address EPA 525 Academy Street Initial DEP City, State, Zip Code Amendment Maplewood, NJ 07040 DOL Telephone Number Name of Contact X DOH Cancellation William Kyle DCA FACILITY INFORMATION Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) Administration Building, Information Technology Room (non Sub 8) Subchapter 8 (Other than K-12) Other (Private/Commercial Street Address Bldgs./Homes, etc. C917-48 525 Academy Street Square Feet | # of Floors Bldg. Age County Code (7) County (6) City (5) Current Use (Prior if being demolished) (State use only) Essex Maplewood Administration Building Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. 0057 AHERA Consultants B & G Restoration, Inc. Street Address Street Address 105 Ryerson Road P.O. Box 385 City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035 Oceanville, NJ 08231 Telephone Number License Number Phone Number Project Manager for Monitoring Firm (973)696-6869 00378 609-652-1833 Eric Clarkson Name of OSHA Monitor Sched. Completion Date (11) Scheduled Start Date (10) B & G Restoration, Inc. 10/21/2016 Street Address 10/03/2016 105 Ryerson Road Occupancy Status During Abatement (Check only one) Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: LincolnPark, NJ 07035 Other-Describe: Scope of Work (check all that apply) Full Containment w/negative pressure Glovebag procedure Demolition | Renovation Non-friable procedure Mini-enclosure ¥ ≥160 sf or ≥260 lf >3 sf or >3 If Is location normally used solely E Location of 0 n by maintenance/custodial Amount Description of asbestos-containing m n asbestos-containing p C (Specify SF or staff(12) C 0 material to be material (ACM) a a LF) abated in facility (13) V p Yes No N/A X 400 sf ceiling debris on floor Info Technology Room (O & M clean-up procedure) / storage area Name of Registered Landfill Cubic Yards of Waste Registered Waste Hauler NJDEP Hauler ID# Tullytown Resource & Recovery Center 19563 20 B & G Restoration, Inc. Disposal Date City, State Tullytown, PA 10/03/16 - 10/24/16 Lincoln Park, NJ Signature Gordana Luna Completed by (Print or Type) 09/30/2016 Gordana Luna Secretary/Treasurer

		(Pur	suant	IO NJAC O				Operator (2)					-	
Date of Notification (1)						REET DE		Operator (2) Y LTD						
9 / 29 /16				Street							1000			-
Agencies Notified Type Noti	fication					RN AVEN		STE 202		(3)	R	1	1 1	2
EPA x Initia	al Notification	1		City, S	State,	Zip Code		1	而區	W	Line .			
DEP Ame	ended Notific	ation		MILB	JRN,	NEW JER	SEY	07041	1111				-40	111
X 300	cellation			Name	of Co	ntoot	_	1-	Telephone N	lumbe	F -	4	-016	
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Name of Facility Where Abatement	ie Taking P	lace (25000	CILITIN	FORIV	ATION	Type	e of Facility	(4)	4332	3143	- 191	NG _	
Name of Facility where Abatement	is raking r	iace (•)				7,	School (K-1	2)					
UNITED AIRLINES WAREHOUSE B	UILDING							Subchapter	8 (Other tha	an K-1	2)	Merces established	-0	
UNITED AIRLINES WARE 1000E	•1						X		rivate & com					c.)
Street Address								uare Feet	# of Floor	rs		Bldg.		
105-119 AVENUE I							1	13,900 Price (Price		molis	hed)		-	-
0.1.5 (0)	unty (6)			Coun	(7)		100000000000000000000000000000000000000	ent Use (РПС имЕRCIAL	or it being us	EIIIUIIS	neu)			
	SEX		9)	(STATE		CM No.		ne of Abaten	nent Contra	actor (9)			
Name of Monitoring Firm Hired by	Building O	wner (0)		70	98	PAR	RENVIRONA	MENTAL CO	RPOF	RATIC	N		
ATC GROUP SERVICES		-					1	et Address						
Street Address 104 EAST 25TH STREET							313	SPOOK RO	CK ROAD					
City, State, Zip Code								, State, Zip C						
NEW YO	RK, NEW Y							FERN, NEV			NI:	mhor		_
Project Manager for Monitoring Firm	3			Number				ephone Numb	per	Licen 1101	se inc	IIIIDEI		- 1
PATRICK SISK			353-82				75373774	-369-7500 ne of OSHA	Monitor	1101			_	-
Expected State Date (10)				tion Date		/16		ERISCI LAB		SINC		#1	1480	
10 / 10 /16 Month Day Year		12 onth	1	Day		Year	7	2111001212		or reconstruction				
Month Day Year Occupancy Status During Abatemer							100000000000000000000000000000000000000	eet Address						
X Facility Closed/Vacated I	During Entire	Period	d of Al	batement	. 2 556		117	EAST 30TH	STREET					
Abatement Performed O	utside of Nor	mal Fa	cility	Hours - De	scribe);	Cit	Ctata Zin (Code					
X Other - Describe:							City	, State, Zip (NEV	V YORK, NE	W YO	RK 1	0016		
Scope of Work (Check all that apply	1				x	Full Cont	i ainme	ent with Nega						
Demolition	X Ren	ovatio	n			Mini-Enc	lo,							
>3SF OR LF						Gloveba								
X >160 SF OR 260 LF						Non-Fria					\ \ \ \ \	atom	ent Ty	me
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Asbestos-containing Material (ACM)		solely				Thermal s			(Speci	fy	REMOVAL	EP/	Į Ć	Į Į
TO BE ABATED	1	nt/Cus		ir		on, surfac			SF or L	.F)	100	5	PS	SO
in Facility (13)		Staff (1	_		or oth	er miscell	aneou	us)			F		E	ENCLOSURE
	Yes	No	N/A										111	[1]
1st Floor -Office Area		-	Х	VAT					3,600 Sq. F		X	-	-	
Exterior		-	x	Window 0	Caulk				108 Sq. Ft.		X	-		
Exterior		_	Х	Door Cau	ilk				500 Sq. Ft.	-	X	-	-	
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		+-	+											
Name of Registered Waste Hauler	N.II	DEP V	/aste	Cubic Ya	rds of	Waste	Na	ame of Regis	tered Landfil	II				
GLOBAL WASTE INDUSTRIES		uler ID			40		GF	ROWS LAND	FILL/TULLY	/STOV	VN			
		2214					-	. 0						
City, State				Disposal			Cit	ty, State ORRISVELL	PA 19067/	TOLLY	(STO	WN.	PA	
HACKETTSTOW, NJ 07840	T-11			10/10-12	electronic property	nature /	/ IVI	//	, I A 190011	Date		2/-	77	11
Completed by (Print or Type)	Title	OR OF	OPE	RATIONS		lature /	1	$\langle X \rangle$			U	1/5	1/00	0

Date of Notification (1)			g Owner/Operato			W.					
9-30-2016	ST.	MAI	RTINS EF	15COPA	L CHURCK	-					
Agency Notified Type Notification	Street	Address							000000		
Q EPA @ initial	20	PA	RKWAY &	STREET							
□ DEP □ Amended					E A F	n na	P		7		
Amendment #	MA	YWOOL	DNJO	7607	LEGE	li V	E	1	111		
DOH justification)	Name	of Conta	ct .	111	Telephone Non	nber			H		
□ DCA □ Cancellation	17-	Pou	CH		1				111		
		ILITY INF	ORMATION		11 OCI -	4 2016			2		
Name of Facility Where Abatement is Taking Place (•		Type of Facility	ty (4)				1		
ST MARTINS EDISCOPAL . CH	IRCH.			School (K-	12)	ONTRO	11 2	9			
Street Address		9 955	;	☐ Subchapte	12) r 8 (Other than K-1) private & commercia	NG_					
29 PARKWAY STRUET			2	homes, etc.	rivae e constene 2)	al-Puncing	5,				
City (5)		- : ;		Square Feet	# of Floors	Bidg. A	\ge				
MAYWOOD			*	3000	. 2	56	· 1/1	25			
County (6)) (STATE USE	Current Use (Prior if being demol	ished)					
BERGEN	ONLY		325	CHURCH 1	NURSERY P	REK					
Name of Monitoring Firm Hired by Building Owner	ASCM No.			nent Contractor	(9)						
(8) OMEGA ENVIRODMENTAL SERVICE	5 0012	0		moval I	nc				N. Carlot		
Street Address			Street Address					3			
280 HUYLEK STREET			450 Sou	th River	r St						
SOUTH HACKENSHCK NJ	0760	26	City, State, Zip		J. 07601						
	Telephone No.		Telephone No.	ack, N.	License No.						
	201489 8		201-329	-7444 .	00388						
Start Date (10) Scheduled Comple			Name of OSHA	10 2030 6	1 00300			-			
10-12-16 10-13	-16		1	Environ	nental						
Occupancy Status During Abatement (Check only one	∌)		Street Address								
G Facility Closed/Vacated During Entire Period of Ab	atement										
Abatement Performed Outside of Normal Facility H Other - Describe: 8 A M 5 PM	OUES	S. Hackensack , N.J. 07606									
Scope of Work (Check all that apply)) 5. nac	ckensack	, N.J. U/	606					
@ ≥ 3 sf or ≥ 3 ff		**************************************			h Negative Pressur	e					
□ ≥ 160 sf or ≥ 260 F	Ren	notition .		Enclosure ebag Procedure		70					
		,			nd Non-Friable Proc	eduse					
	s Location						Abat	eme me	nt		
. Location of Us	Normally ed Solely by	1	Description of	⊃f		F	T		П		
ASDESIDS-CONTRINEIN MATERIAL (ACM)	aintenance/ Custodial		tos Containing Ma , thermal systems		Amount (Specify		Rephir	Enc	E		
IN Facility	Staff?	(200	surfacing, VAT	, or	SF or LF)	Taylor Bay	dep	aclac	1000		
(13)	(12)		other miscellane	eous)		Yal	= =	ulst	Enclosure		
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	JDEP Waste H	lauler	Cubic Yards of	Name of Regi	Stered Landill				\dashv		
Best Removal Inc	17109		Waste	Minerva	a Enterpr	ises	, LI	J.C	-		
City, State	11103		116 YO Disposal Date	City, Starte					_		
Hackensack , N.J. 07601						1,1,60	588				
Completed by Title	Signature Date						0		-		
R.VELDRAN Estima	tor		R. Valra	1		9-30	-16				
		nm for asbestos licensure exempted activities.									

State of New Jersey - Notification of Asbestos Abatement (Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

NO GAC Project # 060-16 Name of Building Owner/Operator (2) Date of Notification (1) RUTGERS, THE STATE UNIVERSITY OF NJ September 30, 2016 Street Address Notification Type Agencies Notified ENVIRONMENTAL HEALTH & SAFETY DEPT. ■Initial Notification 27 ROAD 1, BLDG 4086, LIVINGSTON CAMPUS ☑Amended Notification #2 -**□**EPA City, State, Zip Code new start and completion dates DCA PISCATAWAY, NJ 08854 X DOL ■ Emergency (including Telephone-Number DEP- No Longer REQUIRED Name of Contact justification) MICHAEL SMITH, ENV. X DOH □ Cancelled **HEALTH & SAFETY** FACILITY INFORMATION - 4 2016 Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) OCT ☐ School (K-12) SCHOOL DENTAL MEDICINE, BLDG# 7253 Subchapter 8 (other than K-12) Street Address Sq. Feet: N/A # of Floors: 4 Blog. Age., 60 tyears RBHS NEWARK CAMPUS County Code (7) City (5) County Current Use (prior if being demolished): ACADEMIC (State Use Only) (6)NEWARK **ESSEX** Name of Contractor (9) Name of Monitoring Firm Hired by Bldg. ASCM No. 0098 Owner (8) GREENWOOD ABATEMENT CONSULTANTS, INC. ATC Street Address Street Address 3 TERRI LANE 268 MAIN STREET City State, ZipCode City, State, Zip Code BUTLER, NJ 07405 BURLINGTON, NJ 08016 License Number Telephone Number Telephone Number Project Manager for Monitoring Firm 609-386-8800 **BRIAN KEARNY** 00840 973-492-0477 Name of OSHA Monitor Scheduled Completion Date (11) Scheduled Start Date (10) 10/31/16 10/07/16 ENVIROVISION, INC. Street Address Occupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement 20-21 WARGARAW ROAD City, State, Zip Code Describe XOther - Describe: Schedule: 5PM - 5AM (24 HOURS & WEEKENDS AS NEEDED) FAIRLAWN, NJ Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure ■ Mini-Enclosure ■ Renovation $\square > 3$ sf or ≥ 3 lf ☐ Glovebag Procedure / Wrap & Cut ■ Demolition ≥ 160 sf or ≥ 260 lf Non-Exempted (*) and Non-Friable Procedure Abatement Type Description of Asbestos Containing Material Amount Is Location Normally Used Location of Asbestos-Containing (Specify Solely by Maint./Custodial (ACM) (i.e. thermal systems insulation, surfacing, Material (ACM) in Facility (13) Remove Repair Encap Enclose SF or LF) VAT, or other miscell.) Staff? (12) YES NO NA X 14000 X VAT C-Level SF Name of Registered Landfill 15 CY NJDEP Waste Hauler ID # Name of Reg. Waste Hauler Cubic Yards of Waste: G.R.O.W.S. North Landfill See Below See Hauler Below #1 & 2 Disposal Date City, State Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 100 New Ford Mill Rd. 10/31/2016 NJDEP # 12561 Morrisville, Pa 19067 Hauler #2) Newark Carting, Inc., Newark, NJ 04509 215-736-1700 NJ DEP # 4509 Completed by (Print or Type) Raymond C. Pedalino September 30, 2016 SENIOR PROJECT MANAGER RAYMOND C. PEDALINO

State of New Jersey - Notification of Asbestos Abatement (Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

Name of Building Owner/Operator (2) GAC Project # 060-16 RUTGERS, THE STATE UNIVERSITY OF NJ Date of Notification (1) September 21, 2016 Street Address ENVIRONMENTAL HEALTH & SAFETY DEPT. Notification Type Agencies Notified ■Initial Notification 27 ROAD 1, BLDG 4086, LIVINGSTON CAMPUS ■ Amended Notification #1 -**DEPA** City, State, Zip Code new start & completion dates DDCA PISCATAWAY, NJ 08854 ■ Emergency (including X DOL Name of Contact ▼ DEP- No Longer REQUIRED iustification) MICHAEL SMITH, ENV □ Cancelled X DOH **HEALTH & SAFETY** FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) SCHOOL DENTAL MEDICINE, BLDG# 7253 Subchapter 8 (other than K-12) ☑ Other (i.e. private & commercial buildings, homes, etc.) # of Floors: 4 Bldg. Age: 60+ years & Street Address RBHS NEWARK CAMPUS Sq. Feet: N/A Current Use (prior if being demolished): ACADEMIC County Code (7) County (6) (State Use Only) **ESSEX** NEWARK Name of Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. GREENWOOD ABATEMENT CONSULTANTS, INC. 0098 ATC Street Address Street Address 268 MAIN STREET 3 TERRI LANE City State, ZipCode BUTLER, NJ 07405 City, State, Zip Code License Number BURLINGTON, NJ 08016 Telephone Number Telephone Number Project Manager for Monitoring Firm 00840 609-386-8800 **BRIAN KEARNY** 973-492-0477 Name of OSHA Monitor Scheduled Completion Date (11) Scheduled Start Date (10) 10/31/16 ENVIROVISION, INC. 09/30/16 Street Address Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement 20-21 WARGARAW ROAD ▼Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code Describe XOther - Describe: Schedule: 5PM - 5AM (24 HOURS & WEEKENDS AS NEEDED) FAIRLAWN, NJ Full Containment with Negative Pressure Scope of Work (Check all that apply) ■ Mini-Enclosure **⊠**Renovation ■ Glovebag Procedure / Wrap & Cut ≥ 3 sf or ≥ 3 lf Non-Exempted (*) and Non-Friable Procedure Demolition ≥ 160 sf or ≥ 260 lf Abatement Type Description of Asbestos Containing Material Amount is Location Normally Used (Specify SF (ACM) (i.e. thermal systems insulation, surfacing, Remove Repair Encap Enclose Location of Asbestos-Containing Solely by Maint./Custodial or LF) Material (ACM) in Facility (13) VAT, or other miscell.) Staff? (12) NA NO YES X 14000 SF VAT X C-Level Name of Registered Landfill 40 CY Cubic Yards of Waste: G.R.O.W.S. North Landfill NJDEP Waste Hauler ID # Name of Reg. Waste Hauler See Below See Hauler Below #1 & 2 City, State Disposal Date 100 New Ford Mill Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 10/31/2016 Rd. Morrisville, Pa NJDEP # 12561 19067 Hauler #2) Newark Carting, Inc., Newark, NJ 04509 215-736-1700 NJ DEP # 4509 Date Signature September 21, 2016 Raymand C. Pedalino Completed by (Print or Type) SENIOR PROJECT RAYMOND C. PEDALINO MANAGER

State of New Jersey - Notification of Asbestos Abatement (Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

GAC Project # 060-16					Name of Building Owner/Op	erator (2)		100			
Date of Notification (1)	h = = 0 0	046			RUTGERS, THE STA	TE UNIVE	ERSIT	Y OF	NJ		
Agencies Notified DEPA DDCA	nber 9, 2	Notification Notification Amende	otification	on cation #	Street Address ENVIRONMENTAL HI 27 ROAD 1, BLDG 40 City, State, Zip Code	EALTH & 86, LIVIN	SAFE	TY DE	EPT.		
X DOL	7000	justifica			PISCATAWAY, NJ 08	854	- 1 1	N.			
DEP- No Longer REQUIF	RED	□Cancell	Control of the second second		Name of Contact		Telepho	One M.		-	
⊠ DOH					MICHAEL SMITH, EN	<u>v.</u>		F 5	NA E		
				FACILITY INFO	HEALTH & SAFETY	TO E	10	15 1	10/ 11	-11	11
Name of Facility Where Abater	tie Teki	ing Place (3)		FACILITY INFO	Type of Facility (4)	111111111111111111111111111111111111111					
SCHOOL DENTAL ME	EDICINE,	BLDG# 7	253		School (K-12) Subchapter 8 (other than K	(-12)	OCT		2016		71
RBHS NEWARK CAM	PUS				Other (i.e. private & communication Sq. Feet: N/A # 0	f Floors: 4	Blda.	Aae:	60+ ye	ars	
City (5) NEWARK	County (6)	SEX		Code (7) Ise Only)	Current Use (prior if being of	demolished):	SPACAL	OS CC DEMIC)NTRUI	_ 0:	
Name of Monitoring Firm Hired	d by Bldg. C	wner (8)	ASCM 1 0098		Name of Contractor (9) GREENWOOD ABATE	MENT CC	NSUL	TANT	S, INC		
Street Address					Street Address						
3 TERRI LANE					268 MAIN STREET						
City, State, Zip Code BURLINGTON, NJ	08016				City State, ZipCode BUTLER, NJ 07405				36.01		
Project Manager for Monitorin	oject Manager for Monitoring Firm Telephone Number				Telephone Number		License	e Numbe	<u>er</u>		
BRIAN KEARNY	BRIAN KEARNY 609-386-8800				973-492-0477		0084	0			
Scheduled Start Date (10) 09/23/16	Scheduled Start Date (10) Scheduled Complete				Name of OSHA Monitor 1 ENVIROVISION, INC.						
Occupancy Status During A	batement (Check only o	ne)		Street Address						
□ Facility Closed/Vacated □ ■ Abatement Performed O	During Entiruutside of N	e Period of A ormal Facility	Hours -	t	20-21 WARGARAW R City, State, Zip Code	OAD					
Describe Other - Describe: Schedule: 5PM - 5AM (2)	4 HOURS	& WEEKE	NDS AS	S NEEDED)	FAIRLAWN, NJ						
Scope of Work (Check all that	t apply)				-			th Nissa	tive Drog	CUEO	
□≥ 3 sf or ≥ 3 l ⊠ ≥ 160 sf or	ıf			■ Renovation □ Demolition		Full Containn Mini-Enclosu Glovebag Pr Non-Exempte	re rocedur	e / Wraj	p & Cut -Friable l	Procedu	ure
Location of Asbestos-Contain Material (ACM) in Facility (13) Sole	ocation Norma ely by Maint./C f? (12)	illy Used Sustodial	Description of Ast (ACM) (i.e. therm VAT, or other mis	pestos Containing Material nal systems insulation, surfacin cell.)	Amoun (Specif or LF)		100	nent Typ		Enclose
	YES	s NO	NA					1221		_	Т
C-Level	C-Level					14000) SF	X			
										1011	
Name of Reg. Waste Hauler See Hauler Below #1 & 2 NJDEP Waste Hauler See Below				r ID#	Cubic Yards of Waste:	15 CY	G.R.	of Regi	stered La North	Landf	ill
Hauler #1) Greenwood Abatement Consultants, Inc. – Butler, NJ 07- NJDEP # 12561 Hauler #2) Newark Carting, Inc., Newark, NJ 04509 NJ DEP # 4509				NJ 07405		Disposal Da 10/24/201			City, Sta 100 Nev Rd. Mor 19067 215-736	Ford N	
Completed by (Print or Type) RAYMOND C. PEDALINO Title SENIOR PROJECT MANAGER				СТ	Raymand C. Pedalino September 9, 2016						

	1	NOTIF	ICAT			w Jersey BESTOS ABAT	EMENT						
			(Purs	suant	to NJA	C 8:60 and 5:16	5)	CK	3	37	70		
Date of Notification (1)			IN	Vame o	f Building	Owner/Operator (2	2)	0,0					
9 / _	30 / 16	_			ese of C								
Agencies Notified	Type Notification		5		ddress	0000							
				631 N	/larket S	Street			1 -				
□ DOLWD □	Amended		(City, Sta	ate, Zip C	ode			-				
⊠ DOH	Amendment #_			Cam	den, NJ	08102	linii						
☐ DCA (NJAC 5:23-8)	Emergency (inc justification)	Juding	1	Name o	f Contact			Telephone Number	er L	111			
(None 5.25-6)	☐ Cancellation			Pat V	Villiams	i	1 m 2						
	.1			FAC	LITY IN	FORMATION			_				
Name of Facility Where	Abatement is Taking	Place ((3)				Type of Facility	(4) 2 - Unit field (
Gate of Heaven Ce				g			School (K-1	DICENSING 2)					
Street Address							Subchapter	8 (Other than K-12) private and commerce	ial bui	Idinas	5		
300 West White Ho	orse Pike						homes, etc.			- 3			
City (5)	390020000000000000000000000000000000000						Square Feet	# of Floors	Bld	g. Ag	е		
Berlin							1,650	1	8	0			
County (6)				Count	y Code (7)(STATE USE ONLY)	Current Use (P	rior if being demolish	red)				
Camden							Maintenand	ce Building					
Name of Monitoring Fire	n Hired by Building C	wner (8	3) A	SCM N	lo.	Name of Abatem	ent Contractor (9	9)					
MDG Environmen						Shade Enviro	onmental, LLC			000			
Street Address						Street Address							
1000 Maplewood I	Drive, Suite 207					623 Cutler A	venue						
City, State, Zip Code						City, State, Zip C	City, State, Zip Code						
Maple Shade, NJ	08052					Maple Shade	ple Shade, NJ 08052						
Project Manager for Mo			Telep	hone N	10.	Telephone No.		License No.					
Chris Macri			85	6-755-	9300	856-755-0099	9	00842					
Start Date (10)	Sched	luled Co	omplet	ion Dat	e (11)	Name of OSHA	Monitor						
10 / 10	/ 161	10 /	21	_ / _	16	EMSL Analy	tical, Inc.						
Occupancy Status Duri	ng Abatement (Check	k only o	ne)			Street Address	- 300						
☐ Facility Closed/Vaca				nent		200 Route 13	30 North						
Abatement Performe	ed Outside of Normal	Facility	/ Hours	s - Desc	cribe	City, State, Zip C	ode						
Time of Abatement:	AMPI	W/	_PM	/	MA	Cinnaminso	n, NJ 08077						
Scope of Work (Check	all that apply)					_							
8/2008/98 -1 2 = 2 × 0 × 1/1 (%-2008/98) 0 × 200/2000 (0 × 2008/98)							ntainment with Ne	egative Pressure					
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			novatio molitio			☐ Gloveba	a Procedure						
M = 100 31 01 = 200 11						⊠ Non-Ex	empted (*) and N	on-Friable Procedur					
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Locati				22		Ab	atem	ent T	уре	
Locatio			Normal d Sole		A - 1	Description estos Containing M		Amount	Re	Rep	EX	Enc	
Asbestos-Containin		intena		ASD (i	estos Containing ivi e., thermal systems	s insulation,	(Specify	Removal	Repair	aps	Enclosure		
TO BE ABATED IN Facility Custodia					1,,	surfacing, VA	T, or	SF or LF)	/al		Encapsulate	ure	
(13)						other miscellaneous)					ē		
		Yes	No										
Exterior					Windo	w Glazing		1.5 SF					

1,650 SF \boxtimes Ceiling Panel Mastic 1st Floor Name of Registered Landfill Cubic Yards of NJDEP Waste Name of Registered Waste Hauler Hauler ID No. Waste Cumberland County Landfill

Floor Tile and Mastic

Freehold Cartage 15939 20 Disposal Date City, State City, State

Newburg, PA 10/21/2016 Freehold, NJ

 \boxtimes

Completed By (Print or Type) Title Operations Manager Christina Lynch

Signature

Date 913016

168 SF

1st Floor

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Check #: 6767

Initial Notification

		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,											
Date of Notification	on (1)		Name	of Build	ling	Owner/Operato	r (2)				-		
	8 / 1 6	1 11	City	of Hacke	nsac	k			API	7/7	E.	-	
Agencies Notified			Stre	et Addres	ss			IN G	GEL	- V	=		
(X)EPA			65 (Central Av	/enue	9		IKI					
	[X]Initial Notificat	ion		. State,					OCT - 4	2016		1	1
[X] DEP	[]Amended		Hac	kensack,	NJ 0	7601		14 4					
⊠lbor	Notificat	ion		of Cont			1	Telepi	one Number	SNTRO	DL &		-
(×) DOH	[]Cancella	ion	10/01	(DO					GISENS.	ING_			_
[]DCA			Way		TN TN	FORMATION			Carlot Face Comment				
Name of Facility W	Thoma Marement	is Tak	ing			1	Type of	Facilit	y (4)				
		10						School	tor B (Othe	er tha	n K-	12)	
Hackensack Cultura	al Arts Center						×	10that	i.e., priva	ate &	COMM	ICT	
Street Address						31	Square	Feet #	of Floors	Blag	. Ac	je	_
102 State St.			775		Coll	nty Code (7)	00000		2	80			_
City (5)	-	County	(0)		(ST	ATÉ USE ONLY)			ior if bei	ng der	HOLLS	·	
Hackensack		Bergen		1 - St. W		Name of Abat	Vacant	church	(9)				-
Name of Monitorin Owner (8)	g Firm Hired by	Build	ing	ASCM No.									
Whitman Companie	es Inc			00110		Four Strong E	Builders, I	nc.					-
Street Address	53, 1110.	ALC 48											
116 Tices Lane, Ur	nit B-1					180 Sargeant	Avenue	e					-
City, State, Zip	Code					-							
East Brunswick, N.	J 08816	ma Im	0 00	hone Numb	ner	Clifton, NJ 07	mber		Licer	ise Nu	mper	5	
Project Manager 1	or Monitoring					973-614-037			0080	7			
Kevin Lovely	(10) Isch	ed Comp	32-3	90-5858 on Date	(11)	Name of OSHA	Monitor						
						Four Strong	Ruilders	Inc					
Month / Day / Occupancy Status	Year Mc	nth /	Day	/ 1 6 Year		Street Addre	ess						
Occupancy Status	osed/Vacated Du	ring Er	ntire	Period		180 Sargean	t Avenue						
of Abatemen	t erformed Outsid	le of No	ormal	Facilit	y	City, State	. Zip Co	le"					
Hours - Des	cribe:	A1000 A1000 OC			_	Clifton, NJ 0	7013						
[]Other - Des		annly)							ith Negativ	e Pre	SSUI	e	
Scope of Work (C		155711	TX.]Renovati	ion	(X)Mi	ni-Enclo	sure	Ith Megacia		-		
[]Demol [X]>3 sf	or >3 1f			,		[]GL []No	ovebag P	rocedure e Proced	ure				
[]≥160	sf or >260 lf			Is		W-7881			T	Abat	emer	E E	P
				cation rmally		Descript				RE	D	N	
Loc Asbesto	ation of os-Containing			Used		Asbestos-Co Material	(ACM)		Amount (Specify	M	RE	C A P	
Mater	rial (ACM) SE ABATED		ъу	olely Main-		(i.e., thermainsulation, su	il system	S VAT.	SF or LF)	0	P	S	
in	acility (13)		Cu	nance/ stodial		or other mi	iscellane	ous)		A	I R	U	
2	(20)		Yes	aff(12) No N/A					50 LF	-	-	-	-
Boiler room & ad	iacent storage ro	oom	X		1 / / /	e insulation - W	Irap & Cu	t		1	-	V	-
Boiler room			IX		Boil	er insulation			80 SF	-	-	\triangle	+
Boilet 100111			1								-	-	+
									1 2 7 2 7 2 7 2 7 2 7 2 7 2 7 2 7 2 7 2	FILE			L
Name of Registe	red Waste Haule	er		NJDEP Was		Cubic Yards	Name	of Regis	stered Land	1111			
			- 1	12609				O.W.S., I	nc.				_
Four Strong Buil	ders, Inc.			12000		Disposal Da	te City	. State					
ordi. Scale	200						Tully	town, PA					_
Clifton, NJ Completed By (P	rint or Tune	Title				Signat		U		I	ate		
5.50-50-50			۱ - الم	iniatratar		1	SIA	Tur	1	5	9/28/	16	
Bilyana Kulakov	ska	Office	Aami	inistrator			100						
ASB-41 JUN 95							1241					G4	56

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Check #: 6767

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Date of Notification	(1)		Name	of B	uile	ling	Owner/Operato	or (2)						
0 9 / 2		_	City	of Ha	acke	nsac	k	-	<u>.</u>					
Agencies Notified T			Stre	et Ac	idre	ss	N.			5 D TP	The same of the sa	J		
[X] EPA			165	Centra	al Av	enue	÷	FIE	C E L	WE	2			_
(X) DEP	[X]Initial Notifica	tion	100	y, Sta					and the same of th		111	M		
X1DOF	[]Amended		Had	ckensa	ack.	NJ 0	7601	In .	OCT A	2016	111	<u>III.</u>		_
(X1DOH	Notifica	tion		e of				TU UI I	elephone	Number				
[]DCA	[]Cancella	tion	MA	iyne					_	المرادا				
[]DCA			IVVa		TTTT	TN TN	FORMATION	ASE	ESTUS US LICENS	JINTHÛL INIG	. 6			
Name of Facility Whe	are Ahatemen	is Ta	king				FORGETTON	Type of Fa						
								[]Sc	hool (K-1 bchapter	2) 8 (Otho	- th:	an K.	-12)	
Hackensack Cultural	Arts Center							1 10t	her (1.e.	. priva	ate &	COHI	uer -	
Street Address								Square Fee	al buildi t # of	Floors	Bld	g. Ag	je	-
102 State St.			-725			Cour	ty Code (7)	20000	2		80			
City (5)		County	(0)				ATE USE ONLY)	Current Us	e (Prior	if beir	ng de	molis	shed)
Hackensack		Berger	1				Name of Abate	Vacant chi	urch					-
Name of Monitoring Owner (8)	Firm Hired b	y Build	ling	ASCM	No.		Name of Abace	ement contr	.0000 1.7,					
Whitman Companies	Inc			0011	0		Four Strong B	Builders, Inc.						_
Street Address				-			Street Addres							
116 Tices Lane, Unit	B-1						180 Sargeant	Avenue						_
City. State. Zip Co	ode													
East Brunswick, NJ 0	8816	Pr I'	ralan	hone	Numb	er	Clifton, NJ 07	013-1935 mber		Licen	se Nu	mber		-
Project Manager for	Mourcorrud						973-614-0377			00807	7			
Kevin Lovely Scheduled Start Dat	red.Com		90-58 on Da		117	Name of OSHA	Monitor		1	-			_	
11 101/11 101/1	1 6 1	01/	1 4	1/11	16		Four Strong E							
Month / Day / Occupancy Status Du	iring Abatem	ent (Ch	eck c	nly o	ne)									
X)Facility Close of Abatement						. 1	180 Sargean	t Avenue					_	-
[]Abatement Fer Hours - Descri	ibe:	de of N	ormal	. racı	.111	<u> </u>	1							
[]Other - Descr.	ibe:					-	Clifton, NJ 07							
Scope of Work (Che	ck all that	apply)		1			[]Full	ll Containme	nt with N	legative	e Pre	SSUF	e	
[]Demolit [X]>3 sf o	r >3 1f		\times	Renov	/ati	on	f 1Glo	ovebag Proce	dure					
[]∑160 sf	o r >260 lf						[X]NOI	n-Friable F			Abat	emen	t Tr	7 D
			Loc	Is cation	n						R		E N	
	ion of Containing			rmally Used	Y		Descript Asbestos-Co	ntaining		mount pecify	E	R E	CA	
Materia				olely Main			Material (i.e., therma	1 systems		SF or	0	PA	P	
in Fac	ility		te	nance	/	i	nsulation. su or other mi	rfacing, VA	r.	LF)	A	I	U	
. (1	3)		St	aff(1	2)_						L	R	L	
Boiler room & adjac	ent storage ro	nom	X	100		Pipe	insulation - Wr	rap & Cut	50 L	_F	X			
Boiler room		X			Boile	er insulation		80 5	SF			X		
Doller 100111		1			/ 									
			+	1										
Name of Registered	Waste Haule	er		JDEP			Cubic Yards	Name of	Registere	d Landf	ill			-
				auler		NO.	of Waste	G.R.O.W	S. Inc.					
Four Strong Builder	rs, Inc.		11	2609			Disposal Dat		ate					_
otil. State	÷							Tullytown	n PA					
Clifton, NJ	the are Marie - V	Title					Signatu		1, 1 / 1	-1	ם	ate		-
Completed By (Pri	nt or Type)		28 27 -4				D	2) 41	w	1		1201	16	
Bilyana Kulakovska	Office /	ffice Administrator						9/28/16						
ASB-41 JUN 95										/			G46	5

Date of Notification (1)			Nam	e of Building	Owner/Operator (2	2)			1		
	30 1 16					ard of	Falur	AT	-: 0	\ \ \	,
	Type Notification	7	Stro	et Address	je Dos	\$4.0 01	- QUC	(-) (, -	,,,	-
Agencies Notified	I ype Notification				1:100)	IN Ave	niu=				
☑ DOLWD	☐ Amended		City	State, Zip Co	ode	170 7110	1090				
☑ ☑ DOH	Amendment #					0705	0				
DCA	Emergency (incli	uding	Nam	e of Confact	- , /V J	0705	Telephone N			= = =	
(NJAC 5:23-8)	☐ Cancellation							-11	نسنا	10	1
			[/~)	ACILITY IN	ORMATION	imes	16 19 19			111	11
Name of Facility Where	hatement is Taking	Place (3)	1.7	ACILIT I III	ORMATION	Type of Facility (4)	-		11	III
					15(400)	☐ School (K-1,2)	(Other than K-12)	2016		1	1
ROSA PARKS	/ CEMINA		AAL MA.	UNIT	y Juneo!	Subchapter 8	(Other)than K-12) vate and commercia	al build	linas	1	
369 mail	STEET			•		homes, etc.)				0	1
City (5)	U JIICE,					Square Feet	# of Floors S C	Bldg	Age		
						7 500	ASB LICENS	13	23		
Orange County (6)			Co	unty Code (7)	(STATE USE ONLY)		or if being demolishe				
	COUNTY					SCHOO	1				
E SSe X	Hired by Building Or	wner (8)	ASC	M No.	Name of Abateme	ent Contractor (9)		V X	,		
WEST CHEST			SE 100		K+A EN	vironmenT	AI CONTIA	CTO	781	ユル	sc.
Street Address	((())) () ()	Keret 7			Street Address		=		,		
307 NOT	TH WAIN	uT S	Tre	eT	20 LA	ode Ro	AP				
City, State, Zip Code					City, State, Zip C	ode					
West CHes	Tes, PA	193	80		mohut	ON, PA	19540				
FIGURE IVIALIAGE TO TVIOL	III.OHING I IIIII		CICPITO		Telephone No.	,	License No.	- 2			
Jew LyTT Start Date (10)	rell	6	16-4	31-7545	610-856-	-7700	0110				_
Start Date (10)	Sched	uled Com	pletion	Date (11)	Name of OSHA N						
10 1 11	16 10	<u>0</u> / _	14	16	CEI	LABS					
Occupancy Status Durin	ng Abatement (Check	only one)		Street Address		0				
☐ Facility Closed/Vaca					730 SE	MAYN	IArD				
Abatement Performe	d Outside of NormalAMPN	Facility H	ours - L PM-12:	Describe ⊅ÆAM	City, State, Zip C		n -//				
Time of Abatomont			9+m		CAry,	NC 2	1511				
Scope of Work (Check a	all that apply)				100	ntainment with Neg					
≥3 sf or ≥3 lf				Otm	Mini-En	closure					
≥160 sf or ≥260 lf		☐ Demo	olition		☐ Gloveba	ag Procedure empted (*) and Nor	n-Friable Procedure	•			
		ls Lo	cation					1928	ateme	nt Ty	/ре
Locatio	n of	No	mally		Description		20 204	R	R	m	Ψ.
Asbestos-Containing		100000000000000000000000000000000000000	Solely benance	, , ,,,,,,,	estos Containing M e., thermal systems		Amount (Specify	Remova	Repair	сар	Enclosure
TO BE AS		Custoo	lial Staf	(1.4)	surfacing, VA		SF or LF)	val	7	Encapsulate	sure
(13	C		12)		other miscellan	eous)				ate	veses
		Yes	No N	I/A				1			
157 Floor L	ANDING			THER	mal sysTem	es Insulation	5 LF		X	Ц	Ш
Boiler				\$ +110c	mal susTems	Insulation	3 LF		X		
			7 1	7 0		ulation	10 SF		Z		
Alarm			7		10.7		7 / 5	In	M	П	П
Electric			1115	J THER	MAI SYSTEM Cubic Yards of	Name of Regis	2 CF	1			
Name of Registered W	aste Hauler			EP Waste er ID No	Waste :/4	CHARLE GRADE DE CLUS CONTRACTOR		~ ~	- ,)		
K+A Ewvir City, State	CHMENTAL CO	NTEAC	195 C	10815	, ,	miner	-VA LAN	Dri	11	<u> </u>	
					Disposal Date		72	711			
MOLNTON Completed By (Print or	, TA				11-29-16	WAYNEL	Burg C	1 D			
					Signature	10] - :	30	- /	6
ANTHONY J	SANTACEIL	Op	RIS	TION	Und	Um 1/ C	2	1 -	50	,	
ACD 41		V			stos licensure exer	mated obtivities					

011	0001
CK	2921
W	11 10

										OV /	10		_				
Date of Notification (1) 9/27/2016 Che	eck # 2921		N (lame of	Building Ow N OF PEA	ner/Operat ACE HIGI	or (2) H SCHOO)L									
0,2,,2,,	Notification		10.7	Street A													
□ EPA 🗵	Initial			VEST INSCRESS	utherford				. (3)	F3 P D	n 52	page mg					
DEP DOL	Amended Amendment #_		11 6		ite, Zip Code Arlington,		1	In) L				JI		g_			
□ DOH	Emergency (inclustification)	duding	- 1 "		f Contact				Tele	phóne Numb							
DCA DCA	Cancellation			Rob			<u> </u>										
Name of Facility Where Abates	ment is Taking F	Place (3)	_	FACI	LITY INFOR	RMATION	Type of	Type of Facility (4)									
Queen of Peace High S		1200 (0)					⊠ Sc	School (K-12)8ESTOS CONTROL & Subchapter 8 (Other than K-12)									
Street Address							T Si	hchanter 8	3 (Othe	commercial			ömes	5,			
191 Rutherford Place							etc	c.)				g. Ag	1	-			
City (5)	0.4						Square 60,00		2	Floors	50		C				
North Arlington, NJ 070	31		1	County	Code (7)				1	ng demolishe	d)						
County (6) BERGEN				(STATE	USE ONLY)		School	ol		1960							
Name of Monitoring Firm Hire	d by Building Ov	vner (8)		ASC	M No.		me of Abate										
N/A							A Service	10	allon								
Street Address) ASTRONO	26 69th St										
City, State, Zip Code	Other State 7 in Code						y, State, Zip	Code									
City, State, Zip Code						G	uttenberg, NJ 07093										
Project Manager for Monitorin	Project Manager for Monitoring Firm						lephone No. 01-295-17			License No 01074).						
			10	1 - 41	Deta (11)		me of OSH			01074							
Start Date (10) October 10th - 2016		Oct 15-			Date (11)	2000	ame as a										
Occupancy Status During Ab		720273				Str	eet Address	3									
				nent													
Abatement Performed C	outside of Norma	al Facility	Hour	S		Cit	ty, State, Zip	Code									
									-								
Scope of Work (Check All Th	ат Арріу)		enova	ation			☐ Full	Containm	ent wit	h Negative P	ressur	e					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			emoli				L Min	i-Enclosur vebag Pro	е								
							Nor	-Exempte	d (*) a	nd Non-Friab	le Pro	cedur	е				
		ls	Loca	tion						Abate Ty	men pe	Į.					
Location of			lorma	ally ely by			Description of ontaining Material (ACM) Amount						Е	-			
Asbestos-Containing Ma TO BE ABATE	terial (ACM)	Mai	intena	ance/	Asbes (i.e.	thermal sys	stems insula	tion,		(Specify	Rei	Re	nca	Enci			
In Facility	_	Cust	odiai (12)	Staff?			g, VAT, or cellaneous)			SF or LF)	Remova	Repair	Encapsulate	Enclosure			
(13)		Yes	No	N/A	4	(3,20,7)					=		te	Ф			
Boiler Roor	n	X	140	130		Re-wr	ap pipe			5 LF		Х					
Crawl space		X				Re-wr	ap pipe			4 LF		Х					
	Kitchen Bathroom (men's)						on pipe			2 LF		Х					
Nitchen Dathioon	Kitchen bathroom (men 3)																
Name of Registered Waste			Waste	Cubic Ya				stered Landfi		(*)							
Freehold Carting		Hauler 15939	ID No.	of Waste				d Landfill									
City, State			Disposal	Date	City, Sta		2 ^ 4										
Freehold, NJ			TBD		Newb	urg, r		ate									
Completed by	onocc	or.	Sig	nature /	1811.	1111	,)9/27	/201	6							
Gina Betances		Οπιο	e M	lanage	31			NI	un								

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2) Date of Notification (1) CORPUS CHRISTI SCHOOL Check # 2922 9/28/2016 Street Address Type Notification Agencies Notified 215 Kipp Avenue Initial City, State, Zip Code FPA Amended Hansbrouck Heights, NJ 07604 DEP Amendment #_ Telephone Number DOL Emergency (including Name of Contact iustification) DOH Kevin Cancellation DCA FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Subchapter 8 (Other than K-12) Corpus Christi School Other (i.e. private & commercial buildings, homes, Street Address etc.)-215 Kipp Avenue Bldg. Age # of Floors Square Feet 50+ 60.000 Hasbrouck Heights, NJ 07604 Current Use (Prior if being demolished) County Code (7) School County (6) (STATE USE ONLY) Name of Abatement Contractor (9) BERGEN Name of Monitoring Firm Hired by Building Owner (8) ASCM No. **EA Services Corporation** N/A Street Address Street Address 426 69th Street City, State, Zip Code City, State, Zip Code Guttenberg, NJ 07093 License No. Telephone No. Telephone No. Project Manager for Monitoring Firm 01074 201-295-1700 Name of OSHA Monitor Scheduled Completion Date (11) Start Date (10) Same as above Oct 15-2016 October 10th - 2016 Street Address Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement City, State, Zip Code Abatement Performed Outside of Normal Facility Hours Other - Describe: Starting at 8 AM Scope of Work (Check All That Apply) Full Containment with Negative Pressure Renovation Mini-Enclosure ≥3 sf or ≥3 lf Demolition Glovebag Procedure ≥160 sf or ≥260 lf Non-Exempted (*) and Non-Friable Procedure Abatement Туре Is Location Normally Description of Amount Encapsulate Asbestos Containing Material (ACM) Enclosure Location of Used Solely by Remova (Specify Asbestos-Containing Material (ACM) (i.e. thermal systems insulation, Maintenance/ SF or LF) Custodial Staff? surfacing, VAT, or TO BE ABATED other miscellaneous) In Facility (12)(13)No N/A Yes 1 LF Pipe insulation Χ Basement Hallway 9 LF Re-seal insulation X Basement Library Closet Name of Registered Landfill Cubic Yards NJDEP Waste Name of Registered Waste Hauler Cumberland Landfill of Waste Hauler ID No. tbd 15939 Freehold Carting City, State Disposal Date

Date

09/27/2016

Newburg, PA

TBD

Title

Office Manager

Signature

Gina Betances

Freehold, NJ

Completed by

City, State

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

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Date of Notification (1) 9/29/16		Name of Building Owner/Operator (2) Garden State Episcopal Community Development Corp. Street Address													
Agencies Notified Type Notification			Street Add		e.		T	TEI	C. E		15				
EPA Initial Amended Amendment #		_ (City, State Jersey (, Zip Cod City, NJ	e 07304	1	1	DE	To and the	A 20°		1	1		
Emergency (i justification) DCA Emergency (i justification) Cancellation	ncluding	41.0	Name of C Carlos I		0				()Tele	phone Num		1,	- Comment		
T pey		-	FACILI	TY INFO	RMATIC	N		1= 1111	Arrive are 17		THEF		2	1	
Name of Facility Where Abatement is Taking Commercial Property	Place (3)							School (K-12 Subchapter	2) 8 (Othe	r than K-12)				
Street Address 184 Hobart Avenue							Other (i.e. private & commercial buildin etc.) Square Feet # of Floors Bldg							S,	
City (5) Bayonne							1,90	00+	2+		50				
County (6) Hudson			County Co	ode (7) SE ONLY)		_		ent Use (Prio			===				
Name of Monitoring Firm Hired by Building C	Owner (8)		ASCM	No.		Name Unice	of Ab orn C	atement Con Contracting	tractor Corp	(9)					
Street Address	Street Address							reet Address 05 Route 46, Suite 7A							
City, State, Zip Code						, State, Zip Code towa, NJ 07512									
Project Manager for Monitoring Firm		Telephon	e No.		Teleph 973-	none 1 333-	No. 9176		License No 01232	0.					
Start Date (10)	d Cor	npletion D	ate (11)		Name Envi	of OS rovis	SHA Monitor ion Consu	Itants,	, Inc.						
Occupancy Status During Abatement (Chec						Street 20-2	Addr 1 Wa	ess agaraw Rd	i., Bldg	g. 35 E					
Facility Closed/Vacated During Entire In Abatement Performed Outside of Norm Other – Describe:	Period of A nal Facility	Hour	nent s			City, S Fair	State, Law	Zip Code n, NJ 0741	10						
Scope of Work (Check All That Apply) ≥3 sf or ≥3 If ≥160 sf or ≥260 If	-	enova emoli				man lana	- N	ull Containme Ini-Enclosure Blovebag Prod	e cedure				e		
						Non-Exempted (*) and Non-Friable Proce						Abate	batement		
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Mai	intena	ely by ance/ Staff?	Asbes (i.e.	tos Con thermal surfa	escription taining l I system acing, V miscella	Mater ns insi AT, or	2	Amount (Specify SF or LF)		Removal	Ty Repair	e Encapsulate	Enclosure	
· ·	Yes	No	N/A						5.1	000 SF	X			-	
Roof			X	В	uilt-Up	Roof	Mate	erial	5,0	000 SF	^				
														-	
1 Designated Words Hauler			NJDEP V	Vaste		c Yards				ered Landfi		1			
Name of Registered Waste Hauler Unicorn Contracting Corp.			Hauler ID 0035844		of Wa					esource F	Recov	ery F	acili	ity	
City, State Totowa, NJ					TBD		1	City, Sta Tullyto	wn, P		ate				
Completed by	eral Manager Signature Date 9/27/16								16						

Date of Notification (1) 9/29/16			Name of Building Owner/Operator (2) Division of Property Management & Construction														
	Notification		S	treet Ado	- N.			r			F	part of the last o	7				
DEP DEP	nitial Amended Amendment #		C	ity, State	e, Zip Code	9			Abrana samua	U L II W	B	M					
N DOH □	Emergency (in ustification) Cancellation		1150	ame of 0					. 01	Telephone Nur	nber	IJ					
☐ DCA ☐	Caricellation			FACIL	ITY INFOR	MATIC	ON										
Name of Facility Where Abaten Residential	nent is Taking	Place (3)						Type of Facility (4) S CONTROL & School (K-12) NSING Subchapter 8 (Other than K-12)									
Street Address								Other (i.e. private & commercial buildings, homes, etc.)									
City (5) Woodbridge								Square f 1,824		# of Floors 2	13	ig. Ag 89 yr:					
County (6) Middlesex			(County C	ode (7) SE ONLY)			Current House		if being demolish	ned)						
Name of Monitoring Firm Hired	by Building O	wner (8)		ASCM	No.			of Abaten orn Con									
Street Address								Address Route 4	6, Suite	7A							
City, State, Zip Code	City, State, Zip Code							State, Zip (wa, NJ (
Project Manager for Monitoring	1	Telephor	ne No.		Telephone No. License No. 973-333-9176 01232												
Start Date (10) 10/10/16	d Com	pletion [Date (11)			of OSHA rovision		tants, Inc.									
Occupancy Status During Abar						Address	raw Rd	, Bldg. 35 E									
Facility Closed/Vacated D Abatement Performed Ou Other – Describe:	ouring Entire P stside of Norm	eriod of Al al Facility	batem Hours	ent		_	City, S	State, Zip Lawn, N	Code								
Scope of Work (Check All Tha	t Apply)				211111111111111												
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enovat emoliti					Mini-	Enclosure	edure			a				
		1					Non-Exempted (*) and Non-Friable Proces							t			
Location of Asbestos-Containing Mate	rial (ACM)	N Used	Locati Iormali d Sole ntenar	ly ly by		os Con	Description of s Containing Material (ACM) Amount hermal systems insulation, (Specify				R		pe Enc				
TO BE ABATED In Facility (13)		0.000	odial S (12)		(i.e.	surfa	cing, V	AT, or aneous)	011,	SF or LF)	Removal	Repair	Encapsulate	Enclosure			
		Yes	No	N/A						0.1.5	17						
Int. Basement Rea			Χ		Air	- January		nsulatio	n	2 LF 216 SF	X			-			
Int. 2nd Flr Kitchen v	inyl floor		X			120000000000000000000000000000000000000	18000	or Tile			X			-			
Ext. Siding (AL	.L)		X				y Trai			3,200 SF		-					
Ext. Roof			X					Rolled A		1,128.5 SF Registered Land	X						
Name of Registered Waste H. Newark Carting, Inc.	F	IJDEP V lauler ID 4509		of Wa	Yards aste			wn Resource		ery F	acil	ity					
City, State Newark, NJ						Dispo	sal Dat	te	City, Stat								
Completed by Dimo Golcev		Title Gene	eral N	1anage	er		Signatu	ire /	1/	/ /	Date 9/29/1	6					
ASB-41 (R-06-08)					d	pot use th	is form to	r asbestos licens	ure exe	mpted	l activ	rities.					

State of New Jersey Notification of Asbestos Abatement Continuation Sheet

	ls l	_ocati	on			Abatement Type							
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used	ormal I Sole ntenai odial ((12)	ly by nce/	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure				
Total VI ("Lis O Family)	Yes	No	N/A		22.65	X			-				
Int. 2nd Flr Vestibule & Family Room Closets		X		Brown Floor Tile & Assoc. Mastic	32 SF	^							
				. Contract	I G E	W							
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Date of Notification (1) 9/29/16		Name of Building Owner/Operator (2) Division of Property Management & Construction														
Agencies Notified Type Notification			reet Add 3 West		Street	6, 9th I	Floor	P.O. Bo	× 034)层	n W	IE	T	1			
EPA Initial Amended DEP Amended Amendment #				, Zip Cod , NJ 086				则是	<u> </u>			A STATE OF THE STA				
Emergency (ir justification) DCA Emergency (ir justification) Cancellation	icluding	100.53	ame of C						Telephor	ne _* Num	MAP 		2			
			FACILI	TY INFO	RMATIC	NC				- CHEFTO F				-		
Name of Facility Where Abatement is Taking Residential	Place (3)						Type of Facility (4) School (K-12) UCENSING Subchapter 8 (Other than K-12)									
Street Address							× Oi et Square	c.)	ivate & con		ercial buildings, homes Bldg. Age					
City (5) Woodbridge							968		40) yrs						
County (6) Middlesex			ounty Co	ode (7) SE ONLY)]	House	Э	r if being de	emonsin						
Name of Monitoring Firm Hired by Building O	wner (8)		ASCM N	No.		Unic	orn Co	ment Cont ntracting								
Street Address							Address Route	46, Suite	7A							
City, State, Zip Code							tate, Zip wa, NJ	Code 07512								
Project Manager for Monitoring Firm	Te	elephone	e No.			elephone No. License No. 01232										
Start Date (10)		oletion Da	ate (11)				Monitor Consul	tants, Inc	> .							
Occupancy Status During Abatement (Check	10/6/16 10/10/16 Occupancy Status During Abatement (Check Only One)					Street	Address		., Bldg. 3	000000						
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norma Other – Describe:	eriod of Aba al Facility H	ateme ours	ent			City, S	tate, Zip									
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		novati					Mini	-Enclosure ebag Proc					3			
	le Le	ocatio	n										Abatement Type			
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used : Maint Custoo	rmally Solely enan	by ce/	Asbest (i.e.	os Cont thermal surfa	scriptior taining N I system cing, VA niscella	Amou (Spec SF or I	ify	Removal	Repair	Encapsulate	Enclosure				
		No	N/A			. T	oito		2,168	SF	X					
Ext. Siding, under vinyl in front		X				y Tran	niculite		820 \$		X		-			
Ext. Underground Pool		X			suspec	ot ven	Illounte		020 (
		1.0	IDED W	-1-	Cubic	: Yards		Name of	Registered	Landfill						
Name of Registered Waste Hauler		Ha	IDEP Wa auler ID 1	No.	of Wa				vn Resou			ery F	acili	ity		
Newark Carting, Inc. City, State		04	509			sal Date	9	City, Stat	e							
Newark, NJ					TBD		200	Tullyto	wn, PA	# Da	ate					
Completed by Dimo Golcev	Genera	al Ma	anager			Signatur	///	1/	le		29/16	5				
ASB-41 (R-06-08)					.01	ot use th	as form of	r asbestos I	licensur	e exer	npted	activ	ities.			

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Date of Notification (1) 9/29/16		Di	vision	of Prope	er/Operato ty Manaç	r (2) gement &	& Constru	dtid	G E			三	
Agencies Notified Type Notification							P.O. Box	034))CT	7	016		7
X EPA Initial Amended Amendment # Am		Cit	y, State, enton,	Zip Code NJ 0862	.5				996			1	
Emergency (more	iding	Na	me of C	ontact				Teleplo	ne Numb	ier)		L &	
DOH justification) Cancellation				TY INFORM		79				-			
Name of Facility Where Abatement is Taking Pla Residential	ace (3)				(Other the	an K-12)	buildin	ac h	omas				
Street Address						Square		vate & cor			g. Ag		
City (5) Woodbridge						1,398			55	yrs			
County (6) Middlesex			ounty Co	ode (7) SE ONLY)		House	_		emonsne	.u)			
Name of Monitoring Firm Hired by Building Own	ner (8)		ASCM I	No.	Nam Un	ne of Abate icorn Co	ement Contr ntracting	Corp.					
Street Address					Stre 20	et Address 5 Route	s 46, Suite	7A					
City, State, Zip Code					City	, State, Zip towa, NJ							
Project Manager for Monitoring Firm	Т	elephon	e No.	Tele	Telephone No. License No. 973-333-9176 01232								
		I Comp	oletion D	ate (11)	Nar En	ne of OSH virovisio	A Monitor on Consult	tants, In	C.				
10/4/16 Toccupancy Status During Abatement (Check Control of Check Control	0/7/16 Only One)			Stre	et Addres							
Facility Closed/Vacated During Entire Per Abatement Performed Outside of Normal Other – Describe:	iod of At	ateme	ent		City	, State, Zi					3		
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	☐ Re ▼ De	enovat emoliti				× Mir	I Containme ni-Enclosure ovebag Proc n-Exempted	edure				e	
	ls l	Location	on								Abate	ement pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	N Used Mair	ormall Solel ntenar odial S (12)	y ly by nce/	Asbesto (i.e. t	Descrip os Containir hermal sys surfacing other misc	ng Materia tems insula , VAT, or	ation,	Amo (Spe SF o	ecify	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A	Off M/h	t vinyl tile	s red a	rav tiles	182	SF	X			
Int. Kitchen Flooring		X		1	id associa								
Ext. Foundation West side of house		X		BI	ack dowr	spout p	ipe	40	LF	Х	-		
Name of Registered Waste Hauler Newark Carting, Inc. City, State		1	NJDEP V Hauler ID 14509		Cubic Yar of Waste 1+ Disposal	yose)	Tullyto	Registere wn Res	ed Landf ource F	Recov	ery I	Facili	ty
Newark, NJ Completed by	Title	aral N	Manage	ər		TBD Tullytown, PA Signature Date 9/29/16							

Date of Notification (1) 9/29/16		Name of Building Owner/Operator (2) Division of Property Management & Construction															
Agencies Notified Type Notification		S	treet A	ddress				oor, (P.O.	1004	*******			-				
EPA Initial Amended Amendment #		C	ity, Sta	te, Zip Co n, NJ 08	de	0004 005075018	10. Sec.			E G		W	[E.				
Emergency (ii justification) DCA Emergency (ii justification) Cancellation	ncluding	11000	lame of	Contact rara					H	elephone N	lumb -						
			FACI	LITY INFO	DRMATI	ON	Type of Facility (4)										
Name of Facility Where Abatement is Taking Residential	Place (3)						1)		1								
Street Address											n K-12) ONTROL & imercial buildings, homes,						
City (5)				11.50			So	etc.) quare Feet	#	of Floors	E	Bldg. Age					
Woodbridge								1,458 2 100					rs				
County (6) Middlesex		(S	ounty (Code (7) JSE ONLY)			Н	urrent Use (F ouse		-	lished)						
Name of Monitoring Firm Hired by Building O		ASCN	1 No.				Abatement Contract										
Street Address					Street 205 I		dress ute 46, Su	iite 7A									
City, State, Zip Code							e, Zip Code , NJ 0751	2									
Project Manager for Monitoring Firm	Т	elephor	ne No.		Telephone No. License No. 973-333-9176 01232												
								OSHA Monit rision Con		ts, Inc.							
Occupancy Status During Abatement (Check	Only One)					Street											
Facility Closed/Vacated During Entire Po Abatement Performed Outside of Norma	eriod of Aba al Facility H	ateme ours	ent					Vagaraw F e, Zip Code	Ka., BI	dg. 35 E	2						
Other – Describe:						Fair	La	wn, NJ 07	410								
Scope of Work (Check All That Apply) ≥3 sf or ≥3 If ≥160 sf or ≥260 If		novati nolitio			×	<	Full Contain Mini-Enclos Glovebag P	ure rocedur	re								
	T					Tron Exemples () and non-master research											
Location of		catio mally			De	Description of						Abatement Type					
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used S Mainte Custod	enand	ce/		tos Cont thermal surfa	Description of os Containing Material (ACM) thermal systems insulation, surfacing, VAT, or other miscellaneous)					Remova	Repair	Encapsulate	Enclosure			
	Yes I	No	N/A										te	Ф			
Int. 1st flr Kitchen Tile & Plywood		X		Ta	an Viny	yl Floo	r N	liddle		143 LF	X						
Int. 2nd flr Kit undrwd, vinyl & plywas		X		Green	Flr Tile	e & As	so	c. Mastics		144 SF	X						
Ext. Siding All Sides		X			Gre	y Tran	site	Э	1	,591 SF	X						
Ext. Rear Porch Roof		X		BI	ack Ro	oofing	Ma	nterial		150 SF	X						
Name of Registered Waste Hauler	300,000	DEP W		Cubic of Wa	Yards ste		11107.1111.111		stered Land		-	,.					
Newark Carting, Inc. City, State		509		5+	sal Date		City, S		Resource	Recov	ery F	acılı	ty				
Newark, NJ					TBD	our paro	D.		own, F	PA							
Completed by Dimo Golcev	Title Genera	al Ma	anage	r	S	Signature	/	11	, l	/ 4 M	Date 9/29/16	3					
ASB-41 (R-06-08)					O no	ot u	se this form	for asbe	estos licens	sure exer	npted	activi	ties.				