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| Name of Reg. Waste Hauler Newark Carting NJDEP Waste Hauler ID # O4509 Cubic Yards of Waste Name of Reg. Landfill Grand Central Sanitation |
| 1963 Pen Argyl Road |
| City, State City, State |
| 369 Raymond Blvd., Newark, NJ 07105 09/30/2018 Pen Argyl, PA 18072 |
| Completed by (Print or Type) Title Signature Date |
| David Camacho Project Supervisor 17/1/1/1/1/19 09/15/2018 |
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| Name of Facility Where Abatem | ent is T | aking | Plac | e (3) | | | | Тур | e of Facilit | y (4) | | | | |
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| ENVIRONMETAL HEALTH INVE | STIGAT | IONS, | INC. | | | 1 | 104 | PAR | RENVIRON | MENTAL COR | PORA | TION | | |
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| 655 WEST SHORE TRAIL | | | | | | 1 | | 313 | SPOOK RO | OCK ROAD | | | | |
| City, State, Zip Code | TA NIE | | | | | | | City, | , State, Zip | Code | | | | |
| Project Manager for Monitoring Fi | TA, NE | /V JER | | | | | | SUF | FERN, NE | W YORK 1090 | 1 | | | |
| WILLIAM S. KERBEL, CIH | 1111 | | | | e Number | | | | phone Num | iber L | icense | Numb | er | |
| Expected State Date (10) | | Ic.h | | -729-5 | | (4.4) | | | 369-7500 | | 101 | | | |
| | 18 | Sch | | ompi | etion Date 30 | | /40 | | e of OSHA | | 100,000 | | | |
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| ame of Registered Waste Hauler | | NUIT | | | 0.11.11 | | | | | | | | | |
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| 8 / 16 | /18 | | | | | Stree | t Add | Iress | | | | 11111 | U | UI_ | - 5 | 2018 |
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| EPA DEP X DOL | Initial No Amende Cancella | ed Not ation | tion ificati | on | - [| City, S | State | , Zip Coo | de | EY 07065 | | | CDE. | in. | 100 | Time. |
| X DOH X DCA | On Hold | | / NOT | TIFICA | TION | Name PATR | of C | ontact JOHNS | NC | | | elephone No 2-594-7746 | | | | |
| Name of Facility Where Abar | | | | | FACILI | TY IN | FORM | MATION | 100 | | | | - | Z-16.13-13. | | |
| MERCK SHARP & DOHME C | | | Plac | e (3) | | | | | E | School (Subchap | K-12) ter 8 | (Other than | n K-12 | ?) | | |
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| 126 EAST LINCOLN AVENUE City (5) | | | P | | | | | | | 4,600 | | # 01 F1001S | | В | ldg. Aq 54 | ge |
| RAHWAY | County | * | | | C (ST | County FATE | USE | ONLY) | CI | urrent Use (F ESEARCH L | Prior in | f being den | nolish | ed) | | 1.1 |
| Name of Monitoring Firm Hir ENVIRONMETAL HEALTH IN | ed by Build | ding (| Owne | r (8) | | 1 | | CM No. | Na | ame of Abat | emer | nt Contract | or (9 | | | LI |
| Street Address | VEOTIOATI | ONS, | INC. | | | | | 104 | IP/ | AR ENVIRO | MEN | NTAL COR | PORA | TION | | |
| 655 WEST SHORE TRAIL | | | | | | | | | | reet Address 3 SPOOK R | | DOAD | | | | |
| City, State, Zip Code | | | | | | | | | Cit | ty, State, Zip | Code | RUAD | | | | |
| Project Manager for Monitoring | ARTA, NEV | V JEF | | | | | | | SU | JFFERN, NE | W Y | ORK 10901 | | | | - 1 |
| WILLIAM S. KERBEL, CIH | Firm | | 77 | | e Numbe | er | | | Te | lephone Nur | nber | | | Numl | per | |
| Expected State Date (10) | | 10-1 | | -729-5 | | | | | | 5-369-7500 | | 111 | 01 | | | |
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| City, State FREEHOLD, NEW JERSEY | | | | 1 | Disposal | | | | City/ | ALEXANDE State | R DR | IVE/ROUT | E 15 | -91 -== | | |
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| BENJAMIN SANCHEZ | | CTOF | OF | OPER | ATIONS | Sig | natur | · M | (X) | | | Date | 8/ | 16 | 11. | 8 |
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| | Hold IERGE | NCY | NOT | IFICA | | | Contact A JOHNS | ON | | Telephone N 732-594-774 | lumber | 737, 33 | 7.37 | 73.3 |
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| Street Address 126 EAST LINCOLN AVENUE - BUI | LDING | 80 P | | | | | | S | quare Feet | private & com # of Floor | mcl. blo | | dg. Ag | |
| City (5) | unty (6 | | | | Cour | nty C | ode (7) | Cur | 4,600 rent Use (Pr | ior if being de | molishe | ed) | 54 | |
| Name of Monitoring Firm Hired by ENVIRONMETAL HEALTH INVESTI | Buildi | ng O | wner | r (8) | (STAT | | SCM No. | Nan | SEARCH LA | BORATORY Ment Contract | AND Of | FFICE | FACI | LI |
| Street Address 655 WEST SHORE TRAIL | | 110, 1 | | | | | 104 | Stre | et Address SPOOK RO | MENTAL COF | RPORA | TION | | |
| City, State, Zip Code SPARTA | , NEW | JERS | SEY | 07871 | | | | City | , State, Zip | Code V YORK 1090 | . | | | |
| Project Manager for Monitoring Firm WILLIAM S. KERBEL, CIH | | | Tele | | e Number | | | Tele | phone Num | ber L | icense | Numb | er | |
| Expected State Date (10) 8 / 17 /18 | | Sche | d. C | | etion Date | | /18 | Nam | 369-7500 ne of OSHA | Monitor ORATORIES | 101 | | | |
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| Name of Registered Waste Hauler FREEHOLD CARTAGE, INC. 825 HIGHWAY 33 | | NJDE Haule | | No. | Cubic Yard | s of V 15 | Vaste | LYCC | e of Register | ed Landfill NTY RESOU R DRIVE/ROU | RCE M | ANAG | EMEN | IT SE |
| City, State FREEHOLD, NEW JERSEY | | | | | Disposal Da 8/16-10/13/ | | | City. | State GOMERY | | 1 | _ | | |
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| October 2, 2018 | | | | | Name of Building Owner Cinto's Corporation | | 4 | oci - | 5 20 | 10 | |
| Agencies Notified | | Notification | | ification | Street Address | | ACE | ESTOS | onia | Tagai i | J |
| X EPA | | □Amen | | | 27 Whitney Drive City, State, Zip Code | L | 7,1.1 | 11.000 | Martiner Ca | ***** | |
| DCA x DOL | | | | including | Milford, Ohio 45 | 150 | | | | | |
| X DEP x DOH | | ☐ Cano | ication) elled | | Name of Contact C/O Stev Kostage | | | .383.24 | | | |
| | | | | FACILITY IN | FORMATION | | | | | | |
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| Street Address | p., 5 a | | | | Subchapter 8 (other that | n K-12) | | | | | |
| 138 Ralph Street | | | | | Other (i.e. private & | | | | | oore | |
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| Bellville | Essex | • | (State | Use Only) | Current Use (prior if bein | g demolished |): | | | | |
| Name of Monitoring Firm Hire | d by Bldg. | Owner (8) | ASCN | 1 No. | Name of Contractor (9) | | | | | | |
| AECOM,Inc. | | | | | GREENWOOD ABA | TEMENT C | ONSU | LTANT | S. INC | :. | |
| Street Address | | 270 | | | Street Address | | | | , | | |
| 5925 Carnegie Boule | varu, S | unte 370 | | | 511 MAIN STREET | | | | | | |
| City, State, Zip Code Charlotte, North Card | olina 28 | 3209 | | | City State, ZipCode Butler, NJ 07405 | | | | | | |
| Project Manager for Monitorin | | Telephone | | | Telephone Number | | Licens | e Numbe | <u>r</u> | | |
| Steve Kostage | | 570.383 | 3.2469 | | 973-492-0477 | | 0084 | 0 | | | |
| Scheduled Start Date (10) October 18, 2018 | | Scheduled Novemi | | on Date (11) | Name of OSHA Monitor | | | | | | |
| | | | 3 | | EMSL inc. | | | | | | |
| Occupancy Status During A Status During A Facility Closed/Vac | | | | atement | Street Address | | | | | | |
| Abatement Performed Describe | d Outside | of Normal Fa | cility Hou | rs - | 1056 Stelton Road City, State, Zip Code | | | | | | |
| Other - Describe: | | | | | | 0.54 | | | | | |
| | | | | | Piscataway, NJ 08 | 854 | | | | | |
| Source of Work (Check all that | it apply) | | | | | | | | | | |
| ≥ 3 sf or ≥ 3 ls | f | | | Renovation | | Full Contain Mini-Enclo | | ith Negat | ive Pre | ssure | |
| □≥ 160 sf or ≥ 2 | | | | Demolition | | Glovebag F | rocedur | | | | |
| | | | | | | x Non-Exen Wrap & Cu | | and Nor | n-Friabl | e Proc | edure |
| Location of Asbestos-Contain Material (ACM) in Facility (13) | | ocation Normal | | | pestos Containing Material al systems insulation, surfac | Amour ing, (Speci | ST CONTRACT OF | Abateme | ent Type | 2 | |
| , | | ff? (12) | NA | VAT, or other mis | | or LF) | , | Remove | Repair I | Encap | Enclose |
| 1 st Floor Offices | | | X | VAT & Masti | С | 280 s | f | X | | | |
| 1 st Floor Warehouse | | | X | Rolled Sheet | t Flooring | 4,530 | sf | X | | | |
| Name of Reg. Waste Hauler | | NJDEP Wa | | r ID# | Cubic Yards of Waste: | | | of Registe | | ndfill | |
| See Hauler Below # 1 & | 2 | See Belo | W | | 40 | | Mead G.R.C | owfill La D.W.S | indtill | | |
| Hauler #1) Greenwood A | | | ants, Ind | . – Butler, NJ 07 | 7405 | Disposal Da | te | Ci | ity, Stat | | |
| NJ DEP # 12 Hauler #2) Newark Cartin | | | 04509, 1 | NJ DEP # 19551 | | Novembe | er 5,20 | Br | ridgepo | rt, WVA | |
| | - 024 (2009)\$\$\$ | | | | | | | 30 |)4-842- | 104 | |
| Completed by (Print or Type) | | <u>Title</u> | | | Signature | | Date | | | | |
| Marin Graure | | SENIOR F | | CT | Marin Grau | re | Octo | ober 2, | 2018 | | |

| PA | | TIFE | ATION | ate of New OF ASBE to NJAC 8: | STOS A | BATEM | ENT | | CK | - 47- | 76 | | 1 | 20 |
|--|--|--------------------|--------------------|-------------------------------------|----------------|-----------------------------|------------|------------------------|----------|---|--------|----------|-------------|-----------|
| | | (Fi | IISUZUL | to NJAC o. | .00 anu | 12.120) | | | | | F | П | N/I | E |
| Date of Notification (1) | | N | ame of | Building Ov | | | 5.0 | | | 1 5 6 | | | W | |
| 10/1/18 | | | MK. | VH | 1 wif | 1 | FIRT | H | 100 | 1 | | | | |
| Agencies Notified Type Notification | | S | treet Ad | dress | 0 | | _ ^ | , | | 00 | r - | 5 2 | 2018 | |
| □ EPA Initial | | | | | | | | | i i | Lb 00 | | J | -010 | |
| □ DEP □ Amended | | C | | e, Zip Code | | | | - | | | | | | |
| DOL Amendment #_ | udina | - L | | TEAN | 500 | <u> </u> | . 11. | ١. | | o bate | | | | 1, 13, |
| DOH justification) | dumg | N | lame of | | • | | | | Tele | phone Numbe | | | | . 1 |
| □ DCA □ Cancellation | | | | R. 41 | | | | | .10 | - | | | | |
| ST. IV. WIL. Abstract in Taking Plea | 2 (2) | | FACIL | ITY INFO | RMATI | | Type of I | Facility (4 |) | | | | | \neg |
| Name of Facility Where Abatement is Taking Place | | | | | | | | | | | | | | - 1 |
| Mr. Phillip | 411 | CTF | 1 | | | | □ Sul | ool (K-12 chapter 8 | (Other t | han K-12) | | | | 1 |
| Street Address | | | | | 15. | | Oth | er (i.e. pr | ivate & | commercial bu | ilding | s, hon | nes, etc | c.) |
| | | | | " | | | Square F | eet ' | 1 # of | Floors | T Blo | dg. Ag | e | \neg |
| City (5) | | | | | | | • | 00 | | 2 | | 9 | | - 1 |
| TEANECIC | | 10 | County C | ode (7) | | - | | | 1 | demolished) | 1, | - | | \neg |
| County (6) BENGEN | | | | SE ONLY) | _ | | Curroy. | 20 | SIA | ENE | | | | |
| | - (9) | | ASCM | I No. | | Name of | Abatem | ent Contra | | | | | | |
| Name of Monitoring Firm Hired by Building Own | EI (0) | | ASCIV | i No. | | | | | | | | | | |
| 2 | | | | | | Best Street A | | oval | Inc | | | | | |
| Street Address | | | | | | | | h Di | TOR | Stree | | | | |
| C: 0: 7: C-1: | | | | | | City, Sta | | | VET | DLICE | | | | |
| City, State, Zip Code | | | | | | | 55K W | | NT (| 7601_ | | | | |
| D. M. S. M. S. M. S. | | 11 | elephon | a No | | Telepho | | .cx, | 110 (| License No. | | | | |
| Project Manager for Monitoring Firm | | 1 | cichiion | C NO. | | | | | | 00200 |) | | | |
| 6 - 5 - (10) | cheduled | Compl | ation Do | to (11) | - 11.72.00 | 201 - Name of | 37.9- | /444 Monitor | | 00388 | 2 | | | |
| Start Date (10) 18 | Cricuuicu | | 13/ | | | | | | | 7 | | | | |
| Occupancy Status During Abatement (Check Only | One) | 707 | 13/ | 70 | | Omeg Street A | a En | viro | nmer | iral | | | | \neg |
| | | | | | | 280 | | | | | | | | |
| Facility Closed/Vacated During Entire Period | of Abate | ement | | | - 9 | | ate, Zip (| | CIC | | | 200 | | |
| Abatement Performed Outside of Normal Fa | 5:0 | solt | ١ | | | Sout | h Ha | cken | sacl | c, NJ (| 76 | 06 | | |
| Scope of Work (Check All That Apply) | | | | | | Dout | 11 110 | CRCII | bacı | , 110 | | <u> </u> | | |
| 0 00000 | - D | | 2022 | | | | Full (| 'ontainme | ent with | Negative Pres | ure | | | |
| ≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf | | enovati emoliti | | | | 4 | | Enclosure | | | | | | |
| | | | | | | 1 | Glove | bag Proc | edure | Non-Friable F | toced | ure | | |
| | | | | Т | | | NOR | Exempled | () and | 14011-1112010-1 | | | ement | |
| · · | 1277.0 | Location | | | | | | | | | | Ty | ре | |
| Location of | 0.0000000000000000000000000000000000000 | lormall d Solel | | Anhan | | escription of taining Ma | | CM) | | mount | | | | |
| Asbestos-Containing Material (ACM) TO BE ABATED | Ma | intenan | ice/ | | | ems insula | | | (| Specify | Re | R | Encapsulate | Enc |
| In Facility | Cust | odial S (12) | tan? | | | VAT, or miscellane | eone) | | SI | For LF) | Remova | Repair | psul | Enclosure |
| (13) | - | | | 1 | oulei | miscenan | cous | | | | al | | ate | re |
| | Yes | No | N/A | | | | | | | • | | _ | | |
| 1 Flood Ricer | | | X | THERM | LAL S+ | ostan i | ما دده | TION | 4 | F8LF | × | | | |
| 21564.04 | | | v | THEKMA | 1 528 | TEH IS | SUG | TION | 2 | OLF | X | | | |
| 1 FLOOR RÉSER BASEMENT BASEMENT | | | 1 | | VA | | | | | 8 SF | 70 | | | |
| BESSELENE | | | 1 | <u> </u> | VA | · · | | | | USF | / | | | \vdash |
| | | | | | | | , | | | - 1 1 1/211 | | | | |
| Name of Registered Waste Hauler | se M | 10070 | JDEP W auler ID | (65)(5)(5)(6)(4) | Cubic of Wa | Yards / | | Name of | Kegister | ed Landfill | | | | |
| D | | H | | | oi wa | 20/0 | 9 | Mino | rwa | Enter | ri | 500 | | T.T.C |
| Best Removal Inc City, State | | | 171 | 19 | Dispo | sal Date | | City, Star | | MILL CT | | ٠٠١٠٠ | , | |
| 0.000 F. 100 0.000 | | | | | | 1/15/1 | 8 | Wayn | eshi | ira. Ol | 1 4 | 468 | 8.8 | |
| Hackensack, NJ 07601 Completed by | Title | | | - | | Signatura | 0 | | | Da Da | | 1 1 | | |
| J. Maiorano | The state of the s | ima | tor | | | 1 | reto | שים מני | a | > | 10 | 11/ | 19 | |
| o. Harorano | ומנו | - 11110 | COL | - | | 1 | 11 | | | | - 1 | | | |
| 40D 41 /D 06 00) | | | | | | E | Do not | ise this fo | rm for a | sbestos licensi | ие ехе | empte | d activ | ities. |

CASET

6586 - NJ

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

Initial Notification Check #: 7267

| Date of Notification | 1000 | 1 | LWS | | E 5. | 2122 | | 8 | | | | | | | | | |
|---|--|---------------|-------------|--------------|-------|-------|-----------------|-----------------------|-------|---------------------|----------|---------------|---------------|--------------|------------|-----------------|-----------|
| 1 1 0 1/1 0 | | . 8 . | Me | ime (| טב אנ | 11101 | ing | Owner/Ope | erat | or (2) | | 1 | E (| | n | W | IE' |
| Agencies Notified | | | | | field | | | IS | | | | $ \cdot _r$ | ال كا. | 0 5 | | V | |
| (X)EPA | Type Notif. | 10401011 | | | | | | | | | | | | | | | - |
| (X) DEP | [X]Initia | al ication | 8 | Wes | t 40t | h Str | ree | t, 11th Flo | or` | | | 1 | 0(| 7 - | 5 2 | 018 | |
| X1DOL | 7 | | 11 | | | | | Code | | | | | | | | | |
| (X]DOH | []Amende Notif | cation | | | ork, | | |)18 | | | | | OCREO | TOO | cosi | V 1971 | |
| 47 04 04 04 04 04 04 04 04 04 04 04 04 04 | []Cancel | lation | Na | me o | of Co | ntac | et | _ | | | | ephon | e Num | per . | artificati | | |
| []DCA | | | M | arc l | Popo | witz | | | | | | 2) 697 | | | Mary 1974 | -1 1511 | VC 1.4.71 |
| | | | | | | | INI | FORMATION | | | | | | | | | |
| Name of Facility Wh | ere Abateme | ent is T | aking | Pla | ace (| 3) | | | | Type of | Faci. | lity (| 4) | | | | |
| Ridgefield Gardens | | | | | | | | | | Ę | School | ol (K- | 12) | thor | than | V. 1 | 21 |
| Street Address | | | | | | | | | - |) b | (]Other | (i.e | pr: | ivate | 8 00 | mme | r- |
| 952 Banta Place | | | | | | | | | | Square | Feet | # of | Floor | nome Es B | ldg. | Age | |
| City (5) | | Count | y (6) | | | | | ty Code (7 | | 200 | | | 2 | | 50 | | |
| Ridgefield, NJ 07657 | | Berge | n | | | (S | TA | TE USE ONI | .Y) | Current | | | | eing | demo) | ish. | ed) |
| Name of Monitoring | Firm Hired | by Buil | ding | ASC | M No | | TIE | Name of At | ate | Reside | ntial bu | uilding | 5 | | | | |
| Owner (8) | | | | | | | 11. | | | | | | | | | | |
| S&S Environmental S Street Address | sciences, Inc | ; <u> </u> | | L | | | - | our Stron | g Bi | uilders, li | nc. | | | prisone. | | | |
| 98 Sand Park Road | | | | | | | 11 | | | | | | | | | | |
| City, State, Zip Co | de | | | - | | | - | 180 Sarger | ant i | Avenue | 2 | | | | | | |
| Cedar Grove, NJ 070 | na | | | | | | 11 | | | | | | | | | | |
| Project Manager for | Monitoring | Firm | relep | hone | Num | ber | 1 | Clifton, NJ | | | | | Lice | ense | Vumbe | r | |
| Prakash Khaitan | | | 73-8 | | | | | 73-614-03 | 377 | | | | 0080 | 7 | | | |
| Scheduled Start Dat | | hed.Com | | | | | N | lame of OS | HA | Monitor | | | 10000 | | _ | | |
| 1 0 / 1 5 / 1 Occupancy Status Du | 8 1 1 1 1 1 1 1 | 0010 | 1 6 | 1/11 | 18 | 1 | ll _F | our Strong | a Ri | uilders Ir | nc | | | | | | |
| Occupancy Status Du | ring Abatem | ent (Che | eck o | nly | one) | | 3 | treet Add | res | 5 | 10. | | | | | - | _ |
| []Facility Close of Abatement | | | | | | | 11 | 80 Sargea | ant / | Avenue | | | | | | | |
| []Abatement Perf Hours - Descri | be: | | ormal | Fac | 1111 | У | 10 | ity. Stat | e, | Zip Code | - | | - | | | | |
| X]Other - Descri | be: Residential | buildings | | _ | | | 110 | Clifton, NJ | 070 | 113 | | | | | | | |
| Scope of Work (Chec | k all that | apply) | | | | | Ш | | | | | | | | | | |
| []Demoliti []>3 sf or | on \3 15 | | \bowtie | Reno | vati | on | | [X]M | 111 | Contain -Enclosu | re | | egativ | re Pr | essui | e | |
| X1∑160 sf | or >260 lf | | | | | | | ()N | lov- | ebag Pro Friable | Proced | ure | | | | | |
| | | | | Is | T | | | | - | | | 1 | | IAba | emen | t T | 7De |
| Locatio | | | Nort | atio mall | | | | Descrip | tio | n of | | | | R | | E | E |
| Asbestos-Co Material | (ACM) | | | sed lely | 1 | | A | sbestos-C Material | ont. | aining CM) | | | ount ecify | E | R E | CA | C T. |
| TO BE A | lity | | | Main | | ir | (i. | e. therm lation. s | al : | systems | TAT | S | or F) | 0 0 | PA | PS | 0 |
| . (13 |) | | | todi | 2) | | 0 | r other m | isc | ellaneou | s) | | -L / | A | IR | U | S |
| Building No. 15 16 17 1 | uilding No. 15,16,17,18 & 19 - Crawl Space | | | | | | | | | | | | | 1 | X | L | Ř E |
| Dallaling 140. 15, 16, 17, 16 | Space | \triangle | - | | ripe | ins | ulation | | | | 3,841 | LF | X | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | 4 | | | | | | | | | | | | | |
| Name of Registered V | dasta Hanla | | 1 37 77 | तन्त्र | Waste | | TON | h = 1 = 3 = | | | | | | | | | |
| | asce naute | • | | | ID N | | | bic Yards Waste | | Name of | Regis | tered | Landf | 111 | | 5:11 may - 21 - | |
| Newark Carting, Co. | | | 450 | 9 | | | | | | Grand C | entral | Sanita | ry Lar | ndfill | | | |
| 38 - S | | | | | | | Di. | sposal Da | te | City. S | tate | | | | | 2001-00 | |
| Newark, NJ | | | | | | | | | | Pan Arg | yl, PA | 18072 | | | | | |
| ompleted By (Print | or Type) | Title | Ville Seems | | | - | | Signati |)re | 7 | | | | Da | te | | |
| Bilyana Kulakovska | | Office Ad | lminis | trate | or | | | 1 |) of | 1 | | | | 110 |)/2/1 | R | |
| ASB-41 | | | - | | | | | | _// | - | | | | 110 | 11211 | | |

| no ch | | N | ITC | | ATION | | BE | Jersey STOS ABAT 3:60 and 5:1 | | EGE | | <u> </u> | | 1 | The contract of the contract o |
|--|----------------|---------------------------------------|---------|--------|---|---------------------|---------|-------------------------------------|---------------------|--|----------------|----------|----------|-------------|--|
| Date of Notification (1) 10 / | 02 / | 18 | | | 100000000000000000000000000000000000000 | | | wner/Operator (vision of Prop | 2) perty Manager | | 5 20 nstruc | | n | | - Control of the Cont |
| Agencies Notified EPA DOLWD | Type Notific | | | | | Address West Sta | ate S | Street, 9 th Flo | or | ASPESTOR | CONT or say | 7(.5) | 1 25 | | i |
| ☑ DOH | | | | | City, S | State, Zip | Code | 9 | | The same and the s | | | | | |
| □ DCA | ☐ Emergen | | dina | | Tre | nton, N. | J 086 | 625-0034 | | | | | | | |
| (NJAC 5:23-8) | justificati | | 9 | | Name | of Contac | ct | | | Telephone I | Numbe | r | | | |
| | ☐ Cancella | tion | | | Jos | eph Syp |) | | | 856-467- | 2800 | | | | |
| | | | | | FA | CILITY IN | NFO | RMATION | | · L | | | | | |
| Name of Facility Where Al | batement is 7 | Taking Pl | ace | (3) | | | | | Type of Facility | (4) | | 10. | | | |
| New Jersey State M | | 19. | | | | | | | School (K-1 | 1.0 | | | | | |
| Street Address | | | - | | | | - | | ☐ Subchapter | 8 (Other than I | | | | | |
| 205 West State Stree | et | | | | | | | | Other (i.e.,) | | nmercia | al bu | ilding | IS, | |
| City (5) | | | | | | | | | Square Feet | # of Floors | | Ble | dg. A | ge | |
| Trenton | | | | | | | | | 10,000 | 4 | | | 30 | J. 75.0 | |
| County (6) | | | | | Cour | ty Code (| 7)(ST | ATE USE ONLY) | Current Use (P | rior if being der | nolishe | d) | | | |
| Mercer | | | | | | R - Inch | 44.5 | | Museum | nor in boiling dor | | , | | | |
| Name of Monitoring Firm I | Hired by Build | dina Owr | er (8 | 3) T | ASCM | No | Na | ame of Ahateme | ent Contractor (9 |) | | | | | - |
| Brinkerhoff Environ | | | (| , | , 10 O III | | | | onmental, LLC | Ş | | | | | |
| Street Address | | | | | | | - | reet Address | | | | | | | |
| 1805 Atlantic Avenu | e | | | | | | 1000000 | 623 Cutler Av | (ODLIO | | | | | | |
| City, State, Zip Code | | | | | | | | ty, State, Zip Co | | | | | | | |
| Manasquan, NJ 0873 | 36 | | | | | | 1 | Maple Shade | | | | | | | |
| Project Manager for Monit | | | - | Tole | ephone | No | 1 | lephone No. | , 143 00032 | License No | | 7775557 | | | 1,500,000 |
| Gary Fleming | oring r iiiii | | | | 32-223 | | 17 6 | 856-755-0099 | | License No 00842 |). | | | | |
| Start Date (10) | | Schedule | 4.00 | | | | | me of OSHA M | | 00042 | | | | | A |
| 09 /24 / _ | 18 | 10 | _ / | 09 | 9_ / | | | EMSL Analyt | | | | | | | |
| Occupancy Status During | | | | 3.1700 | | | Str | reet Address | | | | | | | |
| ☐ Facility Closed/Vacated | | | | | | | 2 | 200 Route 13 | 0 North | | | | | | |
| Abatement Performed | | | | | | | Cit | y, State, Zip Co | ode | | | | | | |
| Time of Abatement: | AIVI | PIVI/_ | | -PIVI | | AW | (| Cinnaminson | , NJ 08077 | | | | | | |
| Scope of Work (Check all | that apply) | | | | | | - | | | 4 | | | | | |
| ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf | | | | novat | | | | ☐ Mini-Enc ☐ Glovebag | | | | | | | 8 |
| | | | | Local | | | | | | | | Ab | atem | ent T | уре |
| Location o | | | | orma | illy ely by | - | | Description o | | 9.29.9152-2-9.22-9.5 | | עג | 73 | <u>n</u> 1 | m |
| Asbestos-Containing M TO BE ABAT | | | | | ince/ | | | Containing Ma ermal systems i | | Amount (Specify | | Removal | Repair | Encapsulate | Enclosure |
| IN Facility | | | Custo | | Staff? | (1.0 | | surfacing, VAT, | | SF or LF | | val | = | nsc | sur |
| (13) | | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | | (12) | LAUGA | | ot | ther miscellane | ous) | 8.5 | | | | ate | CD |
| Elevator Mechanical R | Room | × (| es] | No | N/A | Elevato | or Dr | rum Brake Pa | ads | 2 SF | | | П | П | П |
| Elevator Mechanical R | loom. | - | - | | +=- | Inquilat | D | | | | - | | | _ | |
| Lievator Mechanical N | | | - | | 1 <u> </u> | Insulate | or P | aneis | | 60 SF | | | Ш | Ш | |
| | | | | | | | | | | | | | | | |
| | | |] | | | | | | | | | | | | |
| Name of Registered Waste Freehold Cartage | Hauler | | | 0.1375 | IJDEP V lauler ID 15939 | No. | 127 | bic Yards of aste | Name of Regi | | | | | | |
| City, State | | | | | 10000 | | | posal Date | City, State | | | | ec-selle | | |
| Freehold, NJ | | | | | | | 1 | 0/09/2018 | Morrisville | , PA | | | | | |
| Completed By (Print or Typ | oe) | Title | 1) | | | | L | Signature | | | Date | | | | |
| Christina Lynch | | Vice | Pre | side | ent of 0 | Operatio | ns | Most | 2 | | 10/ | 12 | 10 | | |

| | | Γ. | | A = | CONTRACTOR OF THE PARTY OF THE | | | | | | | . Pr | int F | |
|---|-------------------|-----------------------|--|---|---|---------------------|---|--------------------|-------------|-----------|-----------|-------------|------------|--|
| CK7058 | | NOTIF | TCATIO Pursuan | rate of New Jo N OF ASSEST TO NJAC 8:60 | OS ABATE | (0) | r [| EG | |] [| | | | |
| Date of Notification (1) 10/2/18 | | | | of Building Own | | | | ⊥ oc | -5 | 21 |)18 | | : / | |
| Agencies Notified Type Notification | 1 | | Thomas Bertussi Private Home Street Address | | | | | | | | | | | |
| | | | ACRESTED COSTROLE | | | | | | | | | | | |
| DEP Amended | | Ī | City, State, Zip Code | | | | | | | | | | | |
| DOL Amendmen | | _ | | h Haven NJ | 8008 | | | | - u-staut-s | | | | | |
| □ DOH justification □ DCA □ Cancellation |) | | Name of Contact Telephone Number | | | | | | | | | | | |
| | | | | ILITY INFORM | IATION | dia. | | | | | | | | |
| Name of Facility Where Abatement is Takin Thomas Bertussi Private Home | ng Place (| (3) | | | | Тур | e of Facility (| 4) | | | | | | |
| Street Address | | | School (K-12) Subchapter 8 (Other than K-12) | | | | | | | | | | | |
| Officer Address | | | | | X | Other (i.e. p | 8 (Other tha rivate & com | m K-12) | buile | dings | , hom | es, | | |
| City (5) | | | | etc.) Square Feet # of Floors | | | | | | Bldg. Age | | | | |
| Beach Haven NJ 08008 | | | 1000+ 2 | | | | | | | 100 | 35+ | .ge | | |
| County (6) | | | Code (7) | | 100000 | | or if being de | ng demolished) | | | | | | |
| | Ocean | | | | | | use | | | | | | | |
| Name of Monitoring Firm Hired by Building N/A | Owner (8 |) | ASCI | M No. | Name of Abatement Contractor (9) Pernaco Inc. | | | | | | | | 20 24 Dece | |
| Street Address | | | | Street | | | | | | | | | | |
| | | | PO Box 329 | | | | | | | | | | | |
| City, State, Zip Code | | City, State, Zip Code | | | | | | | | | 5-1-1-X | | | |
| Decinet Manager for Manifestor Fire | | | ., | | | rlin NJ 080 | | | | | | | | |
| Project Manager for Monitoring Firm | | Telepho | ne No. | Telepi 856 | | No. -9800 | Lice 007 | nse No. | | | | | | |
| Start Date (10) | npletion | Date (11) | | | SHA Monitor | 1007 | | - | | | | | | |
| 10/11/18 | 10/19/ | /18 | | | Sam | ne | | | | | | | | |
| Occupancy Status During Abatement (Che | | 2837. | | | Street | Addre | ess | | | | | | | |
| Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe: | Abaten y Hours | nent s | | City, State, Zip Code | | | | | | | | | | |
| Scope of Work (Check All That Apply) | | | | | | | | | | _ | | | | |
| ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf | | Renova Demolit | | | 2 | - Mi | ull Containme ini-Enclosure lovebag Proc on-Exempted | edure | | | | e | | |
| | ls | s Locati | ion . | | | | | | | | Abatement | | | |
| Location of | | Normal ed Sole | | | Description | | | Amount (Specify | | - | Ту | Туре | | |
| Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> | Ma | aintena stodial S | nce/ | (i.e. ther | Containing N mal system: | /lateria s insul | al (ACM) lation, | | | R | 71 | Enc | ᇤ | |
| In Facility (13) | Cus | (12) | olan r | | urfacing, VA er miscellar | | , | SF or LF | =) | Remova | Repair | Encapsulate | Enclosure | |
| 1 1237 | Yes | No | N/A | | | .0000, | ' | | | /al | = | late | лге | |
| Exterior Siding | 100 | 1,0 | | | xterior Sig | dina | | 2500 S | E | ., | | - | | |
| Exterior olding | | - | X | | VIGUOL 210 | aling | | 2300 3 | -+ | X | | | | |
| | - | | - | | | | | | | X | | | | |
| | - | - | - | | | | | | | | | | | |
| Name of Registered Waste Hauler | | N | JDEP W | laste Cu | bic Yards | | Name of E | tegistered La | andfill | | | | | |
| United Roll Off | | Н | auler ID | No. of | Waste | | G.R.O.\ | 0.70 | an (dilli) | | | | | |
| City, State | | 2 | 2459 | 5 Dis | sposal Date | | | | | | | | | |
| Elm NJ | | | | | /19/18 | | City, State Morrisvi | lle PA 190 | 067 | | | | | |
| Completed by | Title | | - | | Signature | , | 1 | | Date | - | | | | |
| Anthony T Perna | Dros | ident | | | / | 11 | | | 10/2 | 110 | , | | | |

| Chok | 19 | | NOT | TFIC | CATIO | NOF A | S BÀ | Jersey STOS ABA 8:60 and 5:4 | EMENT. | | E | 0 | 7 E | 7 |
|--------------------------------|----------------------|---|-----------|-------------|-------------------|----------------|--------------------|---|--------------------------------|--------------------|-----------|-----------|-------------|---------------|
| Date of Notification (1) 10 / | 01 / | 18 | | | 1910 | | | wner/Operator (ute of Techno | | 00 | CT -5 | 20 | 18 | |
| Agencies Notified EPA | Type Notific | cation | | | | et Address | | _ | | ASSES | 7000 | · | - 11. F | 1 |
| ☑ DOLWD | Amende | ed | | | | Castle P | | | | | 11:318 | 1115 | | |
| □ DOH | Amendm | nent #_ | | | | State, Zip | | | | | | | | |
| ⊠ DCA | ☐ Emerger | | cludin | g | | boken, | | 7030 | | | | | | |
| (NJAC 5:23-8) | justificat Cancella | | | | 7,000 | e of Conta | | | | Telephone I | | | | |
| | ☐ Cancella | ation | | | LI | sa Dema | rco | | | 718-986 | -4027 | | | |
| | | | | | F | CILITY | NFC | DRMATION | | | | | | -10.00 |
| Name of Facility Where A | Abatement is | Taking | Place | e (3) | | | | | Type of Facility | y (4) | | | | |
| Alexander House | | | | | | | | | School (K-1 | | | | | |
| Street Address | | 500000000000000000000000000000000000000 | 11-12-120 | | | | | | | 8 (Other than I | | | | |
| 1 Castle Point Terra | ace | | | | | | | | homes, etc | private and con | nmercial | buildi | ngs, | |
| City (5) | | | | | | | | | Square Feet | # of Floors | . 1 | Bldg. | Age | |
| Hoboken | | | | | | | | | 50,000 | 3 | | 140 | | |
| County (6) | | | | | Cou | inty Code | (7)/S7 | TATE USE ONLY) | | Prior if being der | molished | | | |
| Hudson | | | | | | , 0000 | (, Mo. | THE GOL ONLY | Academic | | Honshed | , | | |
| Name of Monitoring Firm | Hired by Buil | Idina O | wner | (8) | ASCN | / No | I NI | ame of Abatom | ent Contractor (9 | | | | | |
| TTI Environmental, | | unig O | WITCI | (0) | 000 | | | | | | | | | |
| Street Address | mo. | | | | 000 | 103 | _ | | onmental, LLC | <i>-</i> | | | | |
| | 4 | | | | | | - | treet Address | | | | | | |
| 1253 N. Church Stre | eet | | | | | | | 623 Cutler Av | | | | | | |
| City, State, Zip Code | 272027 | | | | | | Ci | ity, State, Zip Co | ode | | | | | |
| Moorestown, NJ 08 | | | | | | | | Maple Shade | , NJ 08052 | | | | | |
| Project Manager for Moni | toring Firm | | | Те | lephone | No. | Te | elephone No. | | License No | o. | - William | | |
| Jim Guilari | | | | 1 | 856-84 | 0-8800 | | 856-755-0099 | 1 | 00842 | | | | |
| Start Date (10) | | | uled C | | | ate (11) 18 | 1 | ame of OSHA M EMSL Analyt | | | | | | |
| Occupancy Status During | Abatement (| Check | only (| ne) | | | - | reet Address | | | | | | |
| □ Facility Closed/Vacate | | | | | ement | | | 200 Route 13 | 0 North | | | | | |
| Abatement Performed | | | | | | scribe | 1 | ty, State, Zip Co | | | | | | |
| Time of Abatement: | | | | | | | | | | | | | | |
| Scope of Work (Check all | that apply | - | | | | | | Cinnaminson | i, NJ 08077 | | | | | |
| | шат арріу) | | ⊠ Re | | | | | Full Cont Mini-Enc Mini-Enc | ainment with Ne | egative Pressure | е | | | |
| ≥160 sf or ≥260 lf | | | ∐ De | molit | tion | | | ☐ Glovebag | g Procedure mpted (*) and N | on Edable Bee | | | | |
| | | T | le | Loc | ation | Т | | M NOII-EXE | inpled () and N | T Trable Proc | | | | -A. Coronne 1 |
| Location | of | | | Norm | | | | Description o | £ | | 1 | - | nent T | ype |
| Asbestos-Containing N | | 1) | | | lely by | Asb | estos | Containing Ma | | Amount | 2 | Repair | Encapsulate | Enc |
| TO BE ABA | | | | | ance/ I Staff? | | e., th | ermal systems i | insulation, | (Specify | Kellloval | bair | ap | Enclosure |
| IN Facility (13) | у | | Ousi | (12 | | | | surfacing, VAT, | | SF or LF) |) [2] | - | sula | ure |
| (13) | | | Yes | No | | 1 | 0 | ther miscellane | ous) | | | | ite | |
| st and 2 nd Floors | | | | \boxtimes | | Floor | Γile a | and Mastic | | 280 SF | E | | | |
| lst Floor | | | | \boxtimes | \top | Ceiling | ı Pla | ster | | 56 SF | | | | П |
| st Floor | | - | | | | Pipe Ir | | | | | | - | 1 | |
| 11001 | | | | | + | Fibeli | isuia | | | <3 LF | | - | 1 | |
| I (D | | | | | | | | | - | | | | | |
| lame of Registered Waste | e Hauler | | | | NJDEP | | 253000 | ibic Yards of | Name of Regi | stered Landfill | | | | |
| Freehold Cartage | | | | | Hauler I 1593 | | | aste 5 | Fairless L | andfill | | | | |
| City, State | | | | | .000 | | THE REAL PROPERTY. | sposal Date | City, State | | | enles | | |
| Freehold, NJ | | | | | | | 100 | 10/26/2018 | Morrisville | e, PA | | | | |
| Completed By (Print or Ty | ne) | Title | | | | | Τ. | 1 | | -, | D-t- | | | |
| Christina Lynch | / | | ce Pr | esid | ent of | Operatio | ne | Signature | 1 | | Date | 1 |) | |
| | | V 10 | | colu | OIIL OI | operation | 113 | I (/ N) | | / | 101 | 11 | 7 | |

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

| 1 | | (1) | | П | Π Π | 5 000 |
|-----|----|-----|---|------|-------------|-------|
| 1 | 15 | (C) | | - 11 | W | 1 |
| 2 | 1 | (U) | | - 11 | 141 | IC |
| 11. | - | 0 | - | u | 1 | |

| Date of Notification (1) | | | | Nan | ne of Buildin | ng Owner/Operator | (2) | 00 | 7 _ | - | 1/140 | - 1 | | |
|--|--------------|---------|--------|---|---------------------------|--|-----------------------------------|---------------------|-------------|--------------|---------|------------------|--|--|
| 10 /2 | /1 | 8 | | | SE&G / | | (2) ‡ 1810-5388 Che | | 7 - | 5 4 | 2010 | Co. Constitution | | |
| Agencies Notified Type № EPA | Notification | n | | 0.0000000000000000000000000000000000000 | et Address | | | ASDES | resi Ion | GAN HILL | TRO | 1.8 | | |
| ☑ DOLWD ☐ Am | ended | | | _ | State, Zip | | | learn | - Carrie | Minus de l'A | ertete. | de Cala | | |
| | endment | | _ | | | | | | | | | | | |
| | ergency (| includi | ng | | outh Plain e of Contac | | | T = | | | | | | |
| | ification) | | | 1200 | | | | Telephone Num | | | | | | |
| Car | iceliation | | | | nristina M | | | 908-756-773 | 36 | | | | | |
| | | | | F/ | CILITY I | NFORMATION | | | | | | | | |
| Name of Facility Where Abateme | | | | | | | Type of Facility (4 | 4) | | | | | | |
| PSE&G- North Brunswick | Station | Contr | ol Ho | use | | | School (K-12) | | 200 | | | | | |
| Street Address | | | | | | | ☐ Subchapter 8 ☐ Other (i.e., pri | | | uildin | ae | | | |
| 301 Victory Blvd. | | | | | | | homes, etc.) | rate and committee | i Oldi D | ullulli | 90, | | | |
| City (5) | | | - 77, | | | | Square Feet | # of Floors | В | ldg. A | ge | | | |
| North Brunswick, NJ | | | | | | | | | | | | | | |
| County (6) | | | | Cou | nty Code (7 | (STATE USE ONLY) | Current Use (Prio | or if being demolis | shed) | | | | | |
| Middlesex | | | | | | | Control House | | | | | | | |
| Name of Monitoring Firm Hired by | Building | Owner | (8) | ASCN | No. | Name of Abateme | | | | | | | | |
| Health & Safety Services | | | 50.00 | | | AbateTech, In | | | | | | | | |
| Street Address | | | | Street Address | | 27 | | | | | | | | |
| PO Box 365 | | | | | | 30 Maple Ave | . PO Box 25 | | | | | | | |
| City, State, Zip Code | | | | | | City, State, Zip Co | | | | | | | | |
| Berlin, NJ 08009 | | | | | | Lumberton, N | | | | | | | | |
| Project Manager for Monitoring Fir | m | | Tele | phone | No | Telephone No. | 10 00040 | License No. | | | | | | |
| Jim Proctor | 7.55 | | -8850 | 609-265-2107 | | 00529 | | | | | | | | |
| Start Date (10) | Sched | duled (| | | ite (11) | Name of OSHA M | | 00323 | | _ | | - | | |
| 10 /11 /18 | | | | | 18 | EMSL Analyti | DF 550 | | | | | | | |
| Occupancy Status During Abateme | | | | | | | | | | | | | | |
| ☐ Facility Closed/Vacated During | | | | mont | | Street Address | 2 M | | | | | | | |
| ☐ Abatement Performed Outside | of Normal | Facilit | v Hou | s - Des | cribe | 200 Route 130 | | | | | | | | |
| Time of Abatement:AM- | PI | VI/ | _PM | | AM | City, State, Zip Co | | | | | | | | |
| Scope of Work (Check all that appl | | | | | | Cinnaminson | , NJ 08077 | | | | | | | |
| With the control of the second | у) | | | | | ☐ Full Conta | ainment with Nega | tive Pressure | | | | | | |
| ≥3 sf or ≥3 lf | | - | novati | | | ☐ Mini-Encle | osure | | | | | | | |
| ≥160 sf or ≥260 lf □ Demolition | | | | | | ☐ Glovebag | n-Friable Procedure | | | | | | | |
| | Locat | ion | | M Non-Exem | | | | | | | | | | |
| Location of | | 1 | Vorma | lly | | Description of | | | Abateme | | | | | |
| Asbestos-Containing Material (A | ACM) | | d Sole | | | stos Containing Mat | Amount | Ren | Repair | Enc | Enc | | | |
| TO BE ABATED IN Facility | | | todial | | (i.e. | thermal systems in surfacing, VAT, | | (Specify | Remova | air | aps | Enclosure | | |
| (13) | | (12) | | | other miscellaneo | ous) | SF or LF) | <u>m</u> | | Encapsulate | ire | | | |
| | | Yes | No | N/A | | | | | | | е | | | |
| Exterior | | | | \boxtimes | Roofing | Material | | 612 SF | | | | | | |
| Exterior | | | | | Perimete | er Roof Flashing | 1 | 104 LF | \boxtimes | | | | | |
| Exterior | | | | | Roof Pe | netration Flashir | ng | 20 LF | \boxtimes | | | | | |
| | | | | | -,27 | | | | | П | | П | | |
| Name of Registered Waste Hauler | | _ | | JDEP V | Vaste | Cubic Yards of | Name of Registe | red I andfill | | П | Ц | ᆜ | | |
| Environmental Transport Gr | oun IN | C | 130272 | auler IC | | Waste | Conestoga L | | | | | | | |
| City, State | p-, 114 | | | 00069 | | 40 Dianasal Data | | ı Landını | | | | | | |
| Flanders, NJ | | | | | | Disposal Date | City, State | | | | | | | |
| | | | | | | 10/19/18 | Morgantown | , PA | | | | | | |
| Completed By (Print or Type) | Title | | | | 7 90 | Signature | A A | Date | | | | | | |
| Gwendolyn Trumbetti | 0 | perati | ons C | oordi | nator | | VO | | 812 | 41 | 8 | | | |
| SB-41 | w.c. | 2 | 200 | | | 1)8 | 7 | | 10 | - [[| 9 | | | |

| Bun oh | | | D | State of New Je | sev | 7 | | (n) E (| CE | | W/ | Print I | | |
|--|---|---|--|---|------------|---|-----------------------------|------------------|-----------|-----------|-------------|-----------|--|--|
| BIVIU CK | | NOT | IFIGATIO | ON OF ASBEST | almla - | ЕИЕNТ 20) | - | | 774 | | | | | |
| Date of Notification (1) | -11-11-11-11-11-11-11-11-11-11-11-11-11 | | | of Building Own | | | | 0 | CT - | 5 2 | 019 | 1 | | |
| 8/21/2018 - REVISED 10/03/ | 2018 | | DBI I | DBI Projects | | | | | | | | | | |
| Agencies Notified Type Notification | 1 | | | Street Address ASPROGRAM | | | | | | | | | | |
| EPA Initial | | | 1261 | 1201 bloadway | | | | | | | | | | |
| ✓ DEP ✓ DOL Amended Amendmer | +# 2 | | | City, State, Zip Code | | | | | | | | | | |
| Emergency | (includir | ng | | New York, NY 10001 | | | | | | | | | | |
| V DOH justification Cancellatio |) | | The state of the s | of Contact | | /!!=== | | Telephone Number | | | | | | |
| Cancellatio | 1 | -11/2 | | Bennington | | | | 215-533 | 3-120 |) | | | | |
| Name of Facility Where Abatement is Takin | ng Place | (3) | | CILITY INFORMA | ATION | Type | of Facility | (4) | | | | | | |
| ormer Henry Bonsall Elemei | ntary S | Scho | ol | • | | 1 | - 25 | 2005 | | | | | | |
| Street Address | | | | | School (K- | 12) r 8 (Other than i | K-12) | | | | | | | |
| 1575 Mt. Ephraim Ave | | | | Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, ho | | | | | | nes, | | | | |
| City (5) | 40-08-0 | | | | | etc.) re Feet | # of Floors | | 1900 | | | | | |
| Camden, NJ | | | | Square Feet | | | | | | | | | | |
| County (6) Camden | | | County | Code (7) | | Curre | ent Use (Pri | or if being demo | olished) | | | | | |
| | | | | USE ONLY) | | Sch | ool | | / | | | | | |
| Name of Monitoring Firm Hired by Building Whitman | Owner (8 | 3) | 35000 | M No. | Name | Name of Abatement Contractor (9) | | | | | | | | |
| Street Address | | | 001 | 10 | Asso | ed Spec | ecialty Contracting | | | | | | | |
| Pleasant Hill Rd. | | Street Address 98 Lacrue Ave, Suite 110 | | | | | | | | | | | | |
| City, State, Zip Code | | | | | 98 L | acrue | e Ave, S | Suite 110 | | | | | | |
| Cranbury, NJ 08512 | | | | | City, S | State, Z | ip Code | 00.40 | | | | | | |
| Project Manager for Monitoring Firm | | | Telepho | ne No | Gien | none No | s, PA 19 | | | | | | | |
| Cevin T. Lovely | 90-5858 | 610- | | | License | | | | | | | | | |
| Start Date (10) | Schedu | led Co | | Date (11) | | | 9622 01103 HA Monitor | | | | | | | |
| /17/18 | 10/30 | /201 | 8 | (, | Crite | | | | | | | | | |
| Occupancy Status During Abatement (Chec | k Only O | ne) | | Street Address | | | | | | | | | | |
| Facility Closed/Vacated During Entire | Period of | Abate | ment | | 3370 | Prog | gress Dr | rive | | | | | | |
| Abatement Performed Outside of Norm Other – Describe: | nal Facilit | y Hour | S | | | 1 | | - | | | | | | |
| cope of Work (Check All That Apply) | | | | | Bens | alem | , PA 19 | 9020 | | | | | | |
| | - | | | | V | 7 | | | | | | | | |
| ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf | | Renova Demoli | ation | | V | Containme | ment with Negative Pressure | | | | | | | |
| | | Demon | don | | | | i-Enclosure vebag Proc | rocedure | | | | | | |
| | 1 | | | | | Non | -Exempted | (*) and Non-Fr | iable Pro | ocedu | re | | | |
| V | | s Locat Norma | | | | | | | | Abatement | | | | |
| Location of Asbestos-Containing Material (ACM) | Use | ed Sole | ely by | D Ashastas Ca | escription | of | | | - | Туре | | T | | |
| TO BE ABATED | | aintena stodial | | Asbestos Co (i.e. therma | al systems | iatenal insulai | (ACM) | Amount (Specify | 7 | | E | ш | | |
| In Facility (13) | | (12) | Otan: | surf | acing, VA | T, or | | SF or LF) | Removal | Repair | caps | nclo | | |
| | Voc | N- | T | otner | miscellan | eous) | - 1 | | oval | ar. | Encapsulate | Enclosure | | |
| BOILER ROOM | Yes | No | N/A X | Dell. | or Inc. I | | | 0.555 | | | te | | | |
| BOILER ROOM | | | | | er Insula | 2,840,000,000 | | 2,000 Sf | X | - | | | | |
| | - | | X | | e Insulat | | | 300 Lf | х | | | | | |
| BOILER ROOM | - | | X | Brea | ch Insula | ation | | 1,500 Sf | х | | | | | |
| amo of Posietes-114 | | | | | | | | | | | | | | |
| lame of Registered Waste Hauler | | | IJDEP W lauler ID | | Yards | | Name of R | legistered Land | fill | | | - | | |
| lilltop Environmental So | lutior | | 035966 | | aste | | Tulleytov | vn Resource | s Rec | oven | Lan | dfill | | |
| ity, State | | | | Disno | sal Date | Tulleytown Resources Recovery Landfill sal Date City, State | | | | | | | | |
| 585 McDaniel Drive, West Ch | ester, | PA | 19380 | | Require | ed | | wn, PA | | | | | | |
| ompleted by | Title | | | | Signature: | | ,,,, | | Date | | | | | |
| ack Tomasura | Sr. E | stim | ator | 1 | 11/11 | | A. NAA | a | 0 10 10 | 040 | | - 1 | | |