RECEIVEH978

Date * Notification (*)   2   7012		Name	of Buildin	ng Owner/Operator	(2)	CT -9 AM 10:					
		10	Address	HER WHI	JE COIL OF	1-9 AM In:	20			_	
	53	QQ	Address III	LOUIDALE	A DED -		< 3				
D EPA D Initial		City S	State Zip	Code	. 17M 30 F	TOS CONTR	וחי		_	-	-
DEP G Amended Amendment #		17	NTC (	ALD ALD	0.70	TOS CONTR	UL.				
☐ Emergency (includ	ing	Name	of Conta	d (C, (4)	. 0,0	Telenhone Numi	mark I	)	-	W.S.	-
Ja DOH , justification) Cancellation				TTER WHO	<=						
				ORMATION	<u></u>	_1				-	
Name of Facility Where Abatement is Taking Pl	ace (3)		•		Type of Facility	(4)					
12. SATTER WHI	TE				School (K-1)	2)					
Street Address			<del></del>		☐ Subchapter	8 (Other than K-12)					
89 WILLOW DALE 6	we				COther (i.e. p. homes, etc.	rivate & commercial )	buildir	igs,			
CAY (5) PONTICIAIN					Square Feet	# of Floors	Bldg.	-			
TONTCLAIN					.1800	2		14	RS	>	
County (6)				) (STATE USE		rior if being demolis	hed)	200			Į.
55550		ONLY	)	19	RESIDE		•		00000		
Name of Monitoring Firm Hired by Building Own	er ASC	M No.		Name of Abatem	ent Contractor (	9)		- 1000		5-20.900	
(8)					emoval I	nc					
Street Address		52		Street Address	Diron C+	*** ***					
City, State, Zip Code		2272		City, State, Zip C	River St	·					-
						J. 07601					
Project Manager for Monitoring Firm	Teleph	one No.		Telephone No.		License No.					
				201-329-		00388					
Start Date (10) Scheduled C		Date (11)	)	Name of OSHA							
10/2011	5/12			Omega En	vironmen	ital inc					
Occupancy Status During Abatement (Check or				Street Address 280 Huy	ler St						
☐ Facility Closed/Vacated During Entire Period ☐ Abatement Performed Outside of Normal Fac		nt		City, State, Zip C				-			$\dashv$
COther - Describe: 84m 5pm		123		South H	ackensac	k, N.J. 0	760	6			
Scope of Work (Check all that apply)						Negative Pressure					
D≥3sfor≥3lf			novation	Mini-	Enclosure	regative riessure					
M ≥ 160 sf or ≥ 260 lf		☐ De	molition		ebag Procedure	d Non-Friable Proce	dura				
	ls Loc	-tion	T	- Little	Exempled () and	a North Habite Floor	444	A	pater	ner	nt
	· Nonn	ally						Η,	Тур	e	$\dashv$
Location of Asbestos-Containing Material (ACM)	Used So Mainten		Acho	Description o stos Containing Ma		Amount			1	m	
TO BE ABATED	Custo			., thermal systems	insulation,	(Specify		Re	2		5
IN Facility (13)	10,783,000	?		surfacing, VAT other miscellane		SF or LF)		Not.	Repair	D84	Enclosure
	. (12	9	_	Outer massessance				의		8	9
<u> </u>	Yes No							Ш	_	4	Ц
BASEMENT		×	<u> </u>	YAT		_ 475 S		×	4	4	$\dashv$
BASE MENT		7	17 Her	emal insula	TION	60 -	F	X	4	4	4
		+	1-	F-10-15				Н	+	4	$\dashv$
										_	$\dashv$
Name of Registered Waste Hauler	ID No.	Waste	Hauter	Cubic Yards of Waste	Name of Regis	stered Landin					
Best Removal Inc	171	09		11/240.		Enterpri	ses				
City, State	07603			Disposal Date	City, State	ura Oh					
Hackensack, N.J.	0/601			10 25/12	waynesi	ourg , Oh					
Completed by Title J. Maiorano Estin	a + 0 =	e420-01-050	- <u> </u>	Signature		1	10/	2/	12		
				J. Maina			10/	1	, ,	_	
ASB-41 * Do no	use this fo	m for as	spestos lic	ensure exempted	activities.			100			





Date of Notification (1) 10/4/12	·			of Building eth Dona				KEC	El	AEI	)				
Agencies Notified Type Notification		- 1		Address ist Glous	ter		20	12 OCT -	9 /	IM IO:	28				
EPA Initial DEP Amended Amendment	#			ate, Zip Co ey Cedar		8008		BESTO	2.0	Our			- 7 18		
DOH Emergency (i justification)	ncluding	1	Name o	of Contact				& LICE	Na	ephbne	Num	her			
DCA Cancellation			Elizbe		ODMAT	ION						9			
Name of Facility Where Abatement is Taking	Place (3)		FAC	ILITY INF	ORMAI	ION	Туре	of Facility (4)	)				-		
Elizbeth Donald / Residence Street Address								School (K-12		- 1-001 - 1-1-100 (1-1-007 H.T.)					
14 East Glouster							X	Subchapter 8 Other (i.e. pri	vate	er than & comm	K-12) ercia	l I buil	dings	, hom	es,
City (5)								etc.) re Feet	# 0	f Floors		TE	Bldg. A	Age	
Harvey Cedars NJ 08008							1000	4363	2			3	5+	J-	
County (6) Ocean				Code (7) USE ONLY			Curre	nt Use (Prior se	if bei	ng dem	olishe	ed)			
Name of Monitoring Firm Hired by Building C	wner (8)		ASCI	M No.			of Abai	tement Contr	actor	(9)					
Street Address							Addres				_			- 1/2	
City State 7in Code							32 32								_
City, State, Zip Code								p Code n NJ 0809	1						
Project Manager for Monitoring Firm		T	Telepho	one No.		550000000000000000000000000000000000000	one No 753-9			Licens		2			des et ac
	Scheduled 10/23/12		pletion	Date (11)				IA Monitor					-		
Occupancy Status During Abatement (Check						Street	aco In								
Facility Closed/Vacated During Entire Po			ent			I noticological indicate	ox 32	(T)							
Abatement Performed Outside of Norma Other – Describe:	al Facility H	ours	A CONTRACTOR		_	12000	1,500	p Code n NJ 0809	1						*
Scope of Work (Check All That Apply)					-	******	Dem	11140 0009				_			
<ul><li>≥3 sf or ≥3 if</li><li>≥160 sf or ≥260 if</li></ul>	and the same of th	novati nolitic			**		Full	Containmen i-Enclosure	t with	Negativ	ve Pr	essu	re		
and the desired from the desired and the second						×	Glo	vebag Proce i-Exempted (		d Non-F	riable	Dro	codur		
	Is Lo	catio	n:				1101	I-Exempled (	) and	1 NOTE:	Table		Abate	ment	
Location of	Nor Used S	mairy	/		Des	scription	of				ŀ		Ту	ре	
Asbestos-Containing Material (ACM)  TO BE ABATED	Mainte	enan	ce/	Asbest (i.e.	tos Cont thermal	aining M systems	aterial insula	(ACM) tion,		mount pecify		R	711	Enc	m
In Facility (13)		12)	iaii:	i		cing, VAT niscellan				or LF)		Remova	Repair	Encapsulate	Enclosure
98	Yes 1	No	N/A	1								a	7	late	ıre
Exterior Siding			х		Exte	rior Sid	ling		29	75 SF		x			
		_					W-95				1				
Name of Registered Waste Hauler		I N.I	DEP W	/aste	Cubic	Yarde		Name of Re	niete	red Lan	dfill				
United Containers	Ha	uler ID 459		of Was			G.R.O.W		Lail	uiii					
City, State Elm NJ	0011540			Dispos	al Date		City, State								
					10/23	/12		Morrisville	PA	19067	7				1

2801

D. C.									-R!	=CI	EIA	= n				200 05000
Date of Notification (1) 10/4/12	2	*			f Building ( yzmans						**					
Agencies Notified	Type Notification			Street A	ddress Vest 5th	St			2012 00	CT - !	9 AM	10: §	6	72 247		
EPA DEP DOL	Initial Amended Amendment	t#			ite, Zip Co Sottom N		)8	i	ASBE	STOS	SCON	TRO	IL.			
DOH DCA	Emergency justification) Cancellation		F		f Contact				<u>&amp;</u>	Tel	ephone N	Gmbe	r O	à		
	Cariociidalor	<u> </u>			LITY INFO	DRMATI	ON					_			_	
Name of Facility Where A Joe Syzmanski / R		ng Place (3)							of Facility ( School (K-1	2)						
Street Address 347 West 5th St	æ							X	Subchapter Other (i.e. p etc.)				uild	ings,	home	es,
City (5) Ship Bottom NJ 080	008				-			Squa 1000	re Feet ) +	# o 2	f Floors			dg. A	ge	
County (6) Ocean	ON 15 C				Code (7) USE ONLY			Curre	nt Use (Pri	or if bei	ing demo	lished)				
Name of Monitoring Firm	n Hired by Building	Owner (8)		ASCN	/ No.		1000	of Aba aco Ir	tement Cor	ntractor	(9)					
Street Address				1				Addres			8:					
City, State, Zip Code									ip Code in NJ 080	91				9.2 HILL		
Project Manager for Mor	nitoring Firm		Telepho	ne No.		Teleph	none N 753-9	0.		License					-	
Start Date (10) 10/17/12	· · · · · · · · · · · · · · · · · · ·	d Con	pletion	Date (11)		Name		HA Monitor								
Occupancy Status Durin	g Abatement (Che							Addres				-				
			2500	ont				30x 32	75							
Facility Closed/Vac Abatement Perform Other – Describe:	ned Outside of Nor	mal Facility	Hours	ierit					ip Code in NJ 080	91						
Scope of Work (Check A	VII That Apply)		1/2												- 4-310	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	enova emolit			•	>	Mir	Il Containmoni-Enclosure ovebag Prod n-Exempted	e cedure					e	
		le	Locati	on										Abate	ement	t
Location		N	ormal Sole	lŷ			scription			٠		-	_	Ту	ре	
Asbestos-Containing TO BE AB In Facil	ATED	Maii	ntena odial S	nce/		thermal	taining N system cing, VA	s insula	I (ACM) ation,	(5	Amount Specify F or LF)		Remova	Repair	Encapsulate	Enclosure
(13)		Yes	(12) No	N/A			miscella			ι		1	levo	air	sulate	sure
Exterior 5	Siding	res	INO	X		Evto	rior Si	dina		2/	100 SF	x	$\dashv$			
Exteriors				<u>  ^</u>		EXIG	1101 31	uiriy				^	+			
												+	1			
					<u> </u>							$\dashv$				
Name of Registered Was	ste Hauler		100	JDEP V			Yards		Name of	Registe	ered Land	dfill				
United Containers							ste		G.R.O.	677		2 -				
City, State Elm NJ					Dispo 10/23	sal Date 3/12	)	City, Stat Morrisv		A 19067	7		358			
Completed by Anthony T Perna		Title Presid	dent			5	Signature	e 1	***************************************			Date 10/4/	/12			
							1	_							-	



CK 2502

Date of Notification (1) 10/4/12				Name Joe S	of Building	g Own	er/Operator Residence	r (2)		ECE	JV	ED			
Agencies Notified	Type Notification	1		Street	Address orth 11th				2012 00	T-9	AM	In: a			
EPA DEP DOL	Initial Amended Amendmer			City, S	State, Zip C	ode	8		AS8ES	TOS	CON	ITRO	·		
☑ DOH DCA	Emergency justification Cancellatio	)	ı		of Contact				<u>&amp; [</u>	Telep	hone	Numbe	Ca .		
Name of Facility and				FAC	CILITY INF	ORM	ATION						4119	/# Jan 11 11 11 11 11 11 11 11 11 11 11 11 11	-
Name of Facility Where A Joe Syzmanski / Re	batement is Taki sidence	ng Place (	3)					Туре	of Facility (4	1)					
Street Address 29 North 11th St	, , , , , , , , , , , , , , , , , , ,					-		×	School (K-12 Subchapter Other (i.e. pr	8 (Other	than k	(-12) ercial bu	uilding	s, hon	nes,
City (5) Surf City NJ 08008	<i>7</i> 7				-				etc.) re Feet ) +	# of F	loors	T	Bldg.	Age	
County (6) Ocean					Code (7)	0 _		30000	nt Use (Prio	1 .	demo	lished)	001		
Name of Monitoring Firm	Hired by Building	Owner (8)		ASC	M No.		Name		tement Cont	ractor (9	)				
n/a								aco Ir		autor (o	,				
Street Address								Addres Box 32							
City, State, Zip Code									p Code n NJ 0809	91				700	
Project Manager for Monit	oring Firm		Telepho	one No.			one No 753-98			icense					
Start Date (10) 10/19/12		Schedule	ed Cor	npletion	Date (11)				A Monitor				-		
Occupancy Status During	Ahatement (Cher	10/26/1						aco In							
U management of the control of the c		50 500	500					Addres	70						
Facility Closed/Vacat Abatement Performer Other – Describe:	d Outside of Norr	nal Facility	Hours	nent			City, St	tate, Zip	Code					-	
Scope of Work (Check All	That Apply)						west	Beriii	n NJ 0809	<del>/</del> 1					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enova emolit			28	×	Mini Glov	Containmer -Enclosure rebag Proce -Exempted	dure				re .	
		Is	Locati	op,									Abat	emen	t
Location of Asbestos-Containing M		l N	lormal d Sole	y			escription					-	<u></u>	уре	
TO BE ABAT In Facility	ED	Mai	ntenar odial S (12)	nce/		therm	ontaining Ma al systems facing, VAT	insulat		Amo (Spe SF or	cify	Remova	Repair	Encapsulate	Enclosure
(13)		Yes	No	N/A		othe	r miscellane	eous)		C		oval	pair	sulate	sure
Exterior Sic	ling			х		Ext	terior Sidi	ing		1400	SF	x	+		
						A-98-200									
Name of Registered Waste	Hauler		T NI	JDEP W	(nata	0.1									
United Containers	Tradici	Ha	auler ID 459	A CONTRACTOR OF THE PARTY OF TH	of W	c Yards aste	- 1	Name of Re G.R.O.W		Landf	ill				
City, State Elm NJ					Disp	osal Date		City, State Morrisville	e PA 10	9067		X 14 200 - 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3		$\dashv$	
Completed by		Title					Signature					ate	-		
Anthony T Perna		Presid	lent						34,000			0/4/12	2		

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

Date of Notification	1 (1)					ng Owner/Operator	(2)					
10-3-12						Note	RE	ECEIVE	ED			
Agencies Notified	Type Notifica	tion S	tree	t Addr	ess		X. (1.188.16.54)					- 10
[ ]EPA	[X]Initial		106	He.	lle	er Way	2012 00	T-9 AM	10: 26			
[ ]DEP	Notific	ation	ity,	State	, Zi	p Code			.0 69			
[X]DOL	[]Amended		Mor	itcl	air	, NJ	ASBES	STOS CON	TROL			
[X] DOH	Notific	energia i secondo	Tame	of Con	tact	:		LICENSIN	0			
[ ]DCA	[ ]EMERGENC	Y	Jin	n va	n N	iote				9		
	[ ]Cancella	tion										
					may solve be	INFORMATION						
Name of Facility Whe Same as above		is Takin	g Pla	ce (3)	)		Type of Faci					
Same as above							[ ]School	. (K-12) pter 8 (Oth	er than	K-12	1	
Street Addres						13,12,111,11	[X]Other	(i.e., priv	rate & c	ommer		
								buildings,	Assertation and the second			
City (E)		County 16	21	-	c	ounty Code (7)	Square Feet 2100	# of Flo		.dg. A 78	ge	
City (5)		County (6	וכ		15/5	STATE USE ONLY)	2100	٦		70		
		Essex			ě		Current Use	(Prior if b	eing de	nolish	ned)	,
		Looca										
Name of Monitoring E	Firm hired by	building	ASC	M No.			ment Contract			**		
Owner (8) N/A						AZTECH M	ianagemen'	r, Inc.				
Street Address						Street Addres	T 10 10 10 10 10 10 10 10 10 10 10 10 10					
						86 Chris	topher St	t.				
City, State, Zip Cod	ie					City, State,						
	ty, State, Zip Code					Montclai	r, NJ 070	042				
Project Manager for	Monitoring Fi	1000	-	e Numb	er	Telephone Num			License		er	
		N/		100		(973) 744	-8800		0037	1		
Scheduled Start Date		d. Comple		Date	(11)	1 10 10 10 10 10 10 10 10 10 10 10 10 10	Monitor					
10/16/12 Month Day Yo		)/19/13	Z av	Year		N/A						
Occupancy Status Dur	ring Abatement	(Check	only	one)		Street Addres	s					
[X] Facility Clo of Abatemen		uring Ent	ire I	Period								
[ ]Abatement Pe	rformed Outsid			acili	ty	City, State,	Zip Code			X		
Hours - Desc []other - Desc	ribe: «OffHour: ribe: «Other O		-	cipt»								
Scope of Work (Check					2000			W W 4 W 8 W 8 W 8 W 8 W 8 W 8 W 8 W 8 W			-	
		(1) <del>(1</del> ) (1)			180	[자보기주어 HHGMMA] . 8	Containment w	ith Negativ	e Pressi	ire		
[X]>3 sf or [ ]>160 sf or		17.00	7500	vation			Enclosure bag Procedure					
	2009 - Propose tools					[ ]Non-F	riable Proced	ure	155		- m	
Location	n of		Is			Description	on of		Aba	temen	E	E
Asbestos-Cor	ntaining		rmal! Used			Asbestos-Con	11.2.2.2.2.2.1.1.1.1.2. <del></del> 2	Amount	E	R	C	N C
Material TO BE AB	. 5000000 A 6744	By	olely Mair	i-		Material ( (i.e., thermal		(Specif	0	E	A P	O
In Facil	Lity	Cu	nance	al		insulation, surf	acing, VAT,	LF)	V	AI	SU	S
(13)		Yes	ff (	N/A	1	or other misce	Llaneous)		L	R	L	R
Basement				X	VAT			380	X			
								1				2
Name of Registered W		La Co	DEP W			Cubic Yards	Name of Reg		dfill		7 9	
AZTECH MANAG	EMENT, IN		11er 1040	ID No.	1	of Waste 3.0	G.R.O.W	.s.				
City, State		1			1	Disposal Date	City, State					
Montclair, NJ	07042					10/20/12	Morrisv:	ille, PA	1906	57		
Completed By (Print	pleted By (Print or Type) Title					Signature	) / /	+	Date			<u> </u>
Constantine V		esider	nt			7	17	/		3/1	2	
			eventiti <del>erandi</del>			ien	ujaya y	1000	/	-,-		



## RECEIVED

Date of Notification (1) October 2, 2012					Building Ow PROPER			(2)		2012	OCT -9	AM	in.	b E.	
Agencies Notified	Type Notification		7.00	Street A	ddress GRAND ST	TREE:	T SI	IITE 5B		Aco		V18 8	10:	10	
EPA DEP DOL	Initial Amended Amendment #		-	City, Sta	ite, Zip Code KEN, NEV				•	8	STOS	CON SIN	ITR G	OL.	
DOH DCA	Emergency (in justification) Cancellation	cluding	98		Contact atthew Tes	sta	7.			Tele	ephone Nur	nber			,
Name of Carille Mary	Abstament in Taking	Diago (2		FACI	LITY INFOR	MATIO	N	Tuno of	Engility /	4)					
Name of Facility Where HOBOKEN PARKII		Place (3	)					(MEN)	Facility (	V200					
Street Address 1415 Park Ave.	-							Su X Oth	her (i.e. p	8 (Othe	er than K-12 commercia		dings,	home	es,
City (5)							-	Square		# of	Floors	В	ldg. A	ge	-
Hoboken						×		40,000	)	6		10000	0+		
County (6) Hudson					Code (7) USE ONLY)		_	Current Garag		or if bei	ng demolish	ed)			
Name of Monitoring Firm				ASCN	No.			of Abater							
Street Address 26 LORENZO COU	JRT				***************************************	- 1		Address GETTY	AVE.						
City, State, Zip Code MATAWAN				*				tate, Zip		RSEY	′ 07011-1	802			
Project Manager for Mor Michael Chain	nitoring Firm		Telepho	ne No. 21-9223	-	Teleph	none No. 478-484			License N 00724					
Start Date (10)				Date (11)			of OSHA								
October 16,2012		Novem					SLA	vco co	ONSTR	UCTI	ON INC.				
Occupancy Status Durin	g Abatement (Check	Only Or	ne)					Address GETTY	۸\/E						
	ated During Entire Poned Outside of Norma						350	state, Zip				0.363			
Other – Describe:	7:00am-3:30pm Mono	lay - Frid	ay				953	93 E.M.		RSE	7 07011-1	802			
Scope of Work (Check A	All That Apply)	10000				-		_						-3477	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renovat Demoliti				×	Mini-E	Containme Enclosure bag Prod	•	Negative P	ressu	re		
		1						Non-E	Exempted	d (*) and	d Non-Friab	le Pro		e ement	
	2		Location Normall											pe	,
Location Asbestos-Containing		Use	ed Solel	y by		Contai		Material (A			mount			ш	_
TO BE AB In Faci		100000000000000000000000000000000000000	todial S			ermal sy surfacir		s insulation	on,		pecify or LF)	Remova	Repair	псар	Enclosure
(13)			(12)		۰	ther mis	scellar	neous)			50	oval	air	Encapsulate	sure
		Yes	No	N/A						7/301.53				е	
East Exterior Wall(F				Х	F	Roof T					00SF	x			
	South Side of Level F						or Til	×			5SF	х			
Roof		Х	Parapet 1				ingles	- 0000	00SF	х					
Roof(		JDEP W				Beam			0SF	x					
Processor and the same	Name of Registered Waste Hauler Slavco Construction Inc.						ards e	- 1			red Landfill				
										9000-90000000	ANDFILL				
City, State CLIFTON , NEW JE	RSEY 07011-18	02				Disposa ΓBD			City, Stat MORRI						
Completed by Vivian D. Jurcevic		Title Offic	e Mgr	ř		Sig	ynature WWW	ind	Qu	icu	ic Da	te ctobe	er 2,2	012	

## RECEIVED

#### CONTINUATION SHEET

2012 OCT -9 AM 10: 26

					ASBES	TOS	(III)	Page 2	of 2
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma // S	Used Solely baintenar Custodi Staff (12	nce al	Description of Asbestos-Containing Material (ACM) (i.e. thermal systems, insulation, surfacing, VAT, or other miscellaneous)	A SGES & L Amount (Specify SF or LF)	R E M O V A	R E P A	E N C A P S U	C L O S U R
Primarily the East Wall	Yes	No	N/A x	Window Caulking	20LF	L X	R	L	Е
Tilliany the Last vvan			^	villdow Cauking	ZULF	X			
· <del>3</del>									
-	+								
	+								
	$\perp$								
	-								
	+								

		***
Completed By: (Print or Type)	Title	Signature Date
Vivian D. Jurcevic	Office Mgr.	Veucan Stateur 10/2/2012

#### State of New Jersey

#### NOTIFICATION OF ASBESTOS ABATEMENT

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

								<b>A</b>					
Date of Notification (1) October 3, 201	2			Name of Bui	lding O	wner/Ope Tim H	rator (2) <b>/ Y</b> andy	ECE	IVER	2t	73	57	
Liver I constant	l Notific			Street Addre		6 Wats	2012 ( son Place	CT -9	AM 10: 15				
[x] DOL Ame	ndment #	tification # including		City, State, 2	Zip Cod	Manas	ASHE quan, Ng	SIDS	CONTROL YSING			į.	
I A I DON	ication) ellation			Name of Cor T	ntact im Ha			Î	elephone Number	0			
			FAC	ILITY INFO	ORMA	ATION							
Name of Facility Where Abatement is Takin Residence	g Place (	(3)					Type of F	acility (4)	School (k-12)		1.12)	,	
Street Address 316 Dellmuth Ave	enue							[x]	Subchapter 8 (or Other (i.e., privathomes, etc.)			cial bui	ldings,
City	Count	ty (6)		County Code (STATE USE		)	Square fee	sf	# of Floors		g. Age	50	
Ortley Beach	Ocea	ın					Current U	se (Prior if Resider	f beirg demolished	)			
Name of Monitoring Firm Hired by Building N/A	Owner	(8)		ASCM No.		Name of	Abatement	Contractor		Inc.			
Street Address		-1(0.000)			1	Street Ad	dress						***************************************
City, State, Zip Code					4	City, Stat	e, Zip Code		oute 9, Unit 61				- //
Project Manager for Monitoring Firm	Number			Telephon	e Number	Toms R	License N			271			
				732-34	9-9932		00624	vamoci					
Scheduled Start Date (10) 10/17/12	Scheduled Start Date (10) Scheduled Con 10/17/12 10/18/12						OSHA Mon		L. Analytical				
Occupancy Status During Abatement (Check  [ X ] Facility Closed/Vacate			od of Ab	atement		Street Ad	dress	1056 St	elton Road				
[ ] Abatement Performed					-	City Stat	e, Zip Code						
[ ] Other – Describe					-	City, Stat	c, zip code		way, New Jerse	y 088	54		
Scope of Work (Check all that apply)						[ ]			with Negative Pre	ssure			
[ ] >3 sf or ≥3 lf		[ ]	Renova	tion		[ ]		nclosure ag Procedi	ure				
[x] ≥160 sf or ≥260 lf		[x]	Demolit	ion		[x]			) and Non-Friable	Procedi	ıre		
									1	Abat	ement	Туре	
Location of		Is Location Normally us	7			escription stos-Con			Amount	R	R	Е	Е
Asbestos-Containing Material (ACM)	IN	Solely by				stos-Con iterial (A			(Specify SF	E	E P	N C	N C
TO BE ABATED	Main	tenance/Cu			(i.e.,	thermal s	ystems		or LF)	M O	Α	A	L
in facility (13)		Staff (12)			insula	ation, sur VAT, o				v	I R	P S	S
(13)		(12)			other	miscella				A		U	U
	YES	NO	N/A				- 5			L		L E	R E
Exterior	32	Asbestos	siding				750 sf	Х					
Name of Registered Waste Hauler	Lx	JDEP Waste	Lloular	ID No.   Cut	sic Vard	s of Waste	Name	of Pegister	red Landfill				
Guardian Contracting, Inc.	Guardian Contracting, Inc. 20223							R.F.	iva Danuliii				
City, State Toms River, New Jersey			Dispos 10/19			City, Sta	te wn, Penn	sylvania					
Completed by (Print or Type) Nicholas Fernicola	Title	ct Manage		Signature		101	1		1	Date	/2012	)	
Micholas Fernicola	Froje	ci ivialiage	1	$\perp \cdot \vee \downarrow$	10	101	10	1	/	10/3	72012	6	

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

### RECEIVED

Date of Notification (1)	******				f Building		perator	(2)				- 1,5			
10/03/12 CK:2280			_		rinkerhof	Π 			20120	CT -9	AMI	<u>η.</u> :	_		
Agencies Notified	Type Notification			Street A	oddress Estminste	er Roa	d		4 :		*****	0. (	6		
EPA DEP	X Initial Amended	Ť	-	107/200 2005/02	ate, Zip Co	10.000			ASHE	STOS	CON	TRE	1		
X DOL	Amendment		_ [		nit, New		07901	1	ASBE	LICEN	ISING	3	L.		
ĭ DOH	Emergency ( justification)	including	T		f Contact		*			Telepho	ne Nun	nber	V		
DCA	Cancellation				rinkerhof										
Name of Facility Where	Abatement is Taking	Place (3)	-	FAC	ILITY INFO	ORMATI	ON	Type of	Facility (4)						
Residence	•	, (-,							hool (K-12)						
Street Address								Su	bchapter 8	(Other th			106	63	
11 Westminster Ro	ad							× Oth	ner (i.e. pri	vate & co	mmerci	al buil	dings,	home	es,
City (5)	07004							Square		# of Flo	ors	1000	Ildg. A	ge	
Summit, New Jerse	ey 07901			0 1	O 1 (T)			10,000		2			5+		
County (6) Union					Code (7) <i>USE ONLY</i> )			Home	Use (Prior	if being d	emolish	ed)			
Name of Monitoring Firm		Owner (8)		ASC	M No.				ment Contr	actor (9)					
Environmental Des	ign Inc.				1100			Corpo	ration	2.505		III.			ti.
Street Address 5434 King Avenue,	Suite 101							Address McBride	Avenue	)		."			
City, State, Zip Code	James - 00400							state, Zip							
Pennsauken, New Project Manager for Mor				Telepho	ne No			diand P	ark, New		ense N				
Tim Gromen	intoring r inin			7.5	16-9516			225-840	00	100000	104	0.			
Start Date (10) 10/22/12	•	Scheduled 10/24/1		npletion	Date (11)			of OSHA Environ	Monitor mental L	abs		//	Wite Comment	37.	
Occupancy Status Durin	g Abatement (Check	Only One	e)					Address					25079302		
Facility Closed/Vac	ated During Entire P	eriod of A	batem	nent			2333	Route	22 West						
Abatement Perform  Other – Describe:	ned Outside of Norm Bam start	al Facility	Hours					state, Zip							
Scope of Work (Check A						_	Unio	n, New	Jersey 0	7083					
≥3 sf or ≥3 lf	ш тпат Арріу)	<b>▽</b> -						1							
≥3 St of ≥3 if × ≥160 sf or ≥260 if			enova emolit					Mini-F	ontainmen Enclosure	it with Neg	gative P	ressu	re		
				1/2	•		×		bag Proce exempted (		n-Friah	e Pro	cedur	A	
		le l	ocati	on				110171	-xompted (	y and ive	TI-T HOD	1	EAST SY	ement	
Location		N	ormal	ly		Des	scription	of				_	Ту	ре	
Asbestos-Containing TO BE AB	Material (ACM)	Mair	Sole otenar	nce/	Asbesi	tos Cont	aining N	Material (A	CM)	Amou				m	m
In Facil	lity	Custo	dial S (12)		(1.6.	surfa	cing, VA	T, or	",	(Spec SF or I		Remova	Repair	caps	Enclosure
(13)				T		other n	niscellar	neous)				oval	air	Encapsulate	sure
		Yes	No	N/A										ф	
Basem	ent		X		Ai	r Cell F	Pipe In	sulation		200 L	.F	X			
									1						
											-5				
Name of Registered Was	ste Hauler			JDEP W auler ID		Cubic of Was			Name of Re						
Lilich Corporation	A			3724		3			G.R.O.W	.S Land	ITIII				
City, State Woodland Park, Nev	v Jersey 07424			**	Dispos 10/26	sal Date /12		City, State Morrisvill	e, Penn	sylvar	ia				
Completed by		Title '			1		ignature	344 W		01	Da			/	
Tatiana Kalenikova:	٠.	Vice F	resid	dent		1	Take	Cerray	1al	012	10	/03/1	2		

#### RECEIVED

Date of Notification (1) 10/03/12 CK:2285	\$200		1	Name of	Building C	wner/O Board	perator of Ed	(2) ucatio	2012 OC	T _0	AM IO				
Agencies Notified	Type Notification			Street Ac	dress				-2012 00	1 - 3	ALI IO	• (1			$\dashv$
EPA DEP	× Initial	į.			dge Roa		i		ASBES	TOS	CONT	ROL			_
DEP × DOL	Amended Amendment	#			te, Zip Cod Arlington		Jerse		足	.ICE	NSING		A		
	Emergency (				Contact	-				Tele	phone Nu	7.6	9		
DOH DCA	Cancellation			Peggy	Zukatus	i						}			
75 34 346	AL -4	- DI (0)		FACI	LITY INFO	RMATI	ON	Time	f Facility /A	·					
Name of Facility Where A North Arlington Hig		g Place (3)						-	of Facility (4 School (K-12						
Street Address	***		-	**				S	Subchapter 8	(Othe					
222 Ridge Road								F	other (i.e. pr	ivate 8	commerc	ial build	ings,	nome	s,
City (5)		1						Square		# of 2	Floors	100000	dg. A	ge	
North Arlington, Ne	w Jersey 0703			County (	Code (7)			20,00	nt Use (Prio		na demolis		)T	0100.	
County (6) Bergen					JSE ONLY)			Scho		i ii beli	ig demons	ilea)			
Name of Monitoring Firm		Owner (8)		ASCN	l No.				ement Conf	ractor	(9)	<i>a</i> - '			
Birdsall Services G	roup								oration						
Street Address 65 Jackson Drive								Addres McBrid	s de Avenu	е		."			
City, State, Zip Code Cranford, New Jers	sev 07016		5,285					state, Zij	p Code Park, Ne	w Jer	sev 0742	24			
Project Manager for Mor				Telepho			Telepi	none No	).		License I				
Ralph Coppola					7-8900			225-84			01104				
Start Date (10) 11/08/12		Schedule 11/11/1		npletion	Date (11)				IA Monitor onmental	Labs		174	5505 -531 ym		
Occupancy Status Durin	ng Abatement (Che	k Only One	?)					Addres							
	cated During Entire ned Outside of Norr							State, Zi	e 22 Wes						
Other – Describe:		nai raciity	riours			_	Control of the contro		w Jersey	0708	3				
Scope of Work (Check /	All That Apply)						_								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enova emolit				2	Min	l Containme ii-Enclosure	Š.	Negative	Pressu	re		
							L		vebag Prod n-Exempted		d Non-Fria	ble Pro	cedur	е	
		Is	Locati	ion										ment	
Locatio			ormal Sole				scription			12			1	ре	
Asbestos-Containing TO BE AB		Mai	ntena	nce/		tos Cont thermal				(	mount Specify	₽ R	æ	Enca	E
In Fac		Cust	(12)	Staff?			cing, VA			SI	or LF)	Remova	Repair	Encapsulate	Endosure
(10)	,	Yes	No	N/A		27.000.755						<u> 80</u>	,	ate	6
Athletic Direc	ctors Office		X		Grey C	orruga	ted Ai	rCellP	ipelns	2	20 LF	х			
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Name of Registered Wa	aste Hauler			JDEP V			Yards		Name of	Regist	ered Landf	ill .			
Lilich Corporation			0.00	lauler ID 8724	No.	of Wa	ste		G.R.O.\	W.S I	andfill.	7			
City, State Woodland Park, Ne	w Jersey 0742	1 .			4.5	Dispo 11/13	sal Date 3/12	9	City, Stat Morrisv		ennsylva	ania			
Completed by		Title		ident		1	Signatur	e	e la	1		Date 10/03/	12		
Tatiana Kalenikova	0.00	Vice	ıés	uent		-V	ar	cor	e ile		un	10/00/			

						lew Jersey						
MO# 20142479878		NOT	IFICA (Pu	TION rsuar	OF AS	BESTOS ABAT AC 8:60 and 5:16	EMENT DECEN	/Fn				
Date of Notification (1)	03 / 12	!		Name	of Buildin	ng Owner/Operator (2	2)	£1				
Agencies Notified  EPA  DOLWD  DHSS  DCA (NJAC 5:23-8)	Type Notification Initial Amended Amendment # Emergency (ir justification) Cancellation		3	Street 105 E City, S Engle Name	State, Zip wood, N of Contac	e Avenue A5 Code J 07631	BESTOS C & LICENS	ONTROL	er			
					Rutiglian	NFORMATION		-				
Name of Facility Where Private home Street Address 05 E. Palisade Aven		g Place	(3)	TA .	OILIT I	NFORMATION		2) 8 (Other than K-1 2) private and commerc		ilding	JS,	
City (5) Englewood, NJ 07631 County (6)	Į.			Coun	ty Code (7)	) (STATE USE ONLY)	Square Feet Current Use (P	# o Floors		dg. A	ge	
Bergen Name of Monitoring Fire Street Address	m Hired by Building	Owner	(8)	ASCM	No.	Name of Abateme Gr Tech LLC Street Address	ent Contractor (9	))				
City, State, Zip Code			201722000			576 Valley Rd # City, State, Zip Co Wayne, NJ 0747	ode					
Project Manager for Mo Start Date (10)		duled C		phone		Telephone No. 973-638-1777 Name of OSHA M		License No. 01127				
10 / 12 Occupancy Status Durin  ☐ Facility Closed/Vaca ☐ Abatement Performe Time of Abatement:	ng Abatement (Checked During Entire Peter Outside of Norma	k only o	13 one) Abater y Hour	ment	12	Envirovision Co Street Address 20-21 Wagaraw City, State, Zip Co Fair Lawn, NJ 0	nsultants,Inc Road, Bldg .#	34A			m dia - pa	
Scope of Work (Check a  X >3 sf or >3 If  ≥ 160 sf or ≥260 If	all that apply)		enovatio			Full Cont Mini-Enc Glovebag	tainment with Ne losure g Procedure	gative Pressure	e			
Locatio Asbestos-Containing <u>TO BE AB</u> IN Faci (13)	Material (ACM) ATED lity	Use Ma	Normal Normal ed Sole intena todial (12)	ly ly by nce/		Description of estos Containing Mare, thermal systems is surfacing, VAT, other miscellane	of terial (ACM) nsulation, or	Amount (Specify SIF or LF)		ateme Repair	t Encapsulate	ype Enclosure
asement		Yes	No	N/A	Pine ins	ulation		55 I E	IXI		ф П	H

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		PROPERTY AND ADDRESS.	lan-
	10		No. of Contract of
ate			
0/03/20	12		
		ate 0/03/2012	

Date of Notification (	1) October 2, 20	)12			e of Build	ng Owner / Operator	(2)	EIAED ,	Sneck	#100	00	
Agencies Notified	Type Notific	- Carlot		_	et Address		2012 OCT -0	9 AM 10: 06				
□EPA □DEP □DOL □DOH □DCA	Ame	al ended endment # cellation	#	City, Sum	Springfiel State & Z mit, NJ 0 e of Conta	7901	ASBESTOS & LICE	CONTROL NSING	Telepho	ne N	umbe	er
	J					INFORMATION	- 100					
Name of Facility Who Bank of America	ere Abatement	is Taking	g Place (3)			Type of Fac						
Street Address 367 Springfield Ave City (5)	nue					Other Square Feet 60,0	apter 8 (Other that (i.e., private & c # of FI	commercial building	ngs, ho Bldg. Age	40,107		
Summit						Current Use Bank	(Prior if being de	molished)				
County (6) Union			County Cod									
Environmental Test Street Address	ne Mall Drive, Suite 404 ty, State & Zip Code					No. Name of Aba Synatech, Ir	atement Contract nc.	or (9)		_		
City, State & Zip Cod	е		100									
Cherry Hill, NJ 0800 Project Manager for N		1	Te	elephone	Number	Telephone N	umber	License Nu	ımber			
Howard Zenobi Scheduled Start Date	ed Complet	56-482-13		609-296-691		0081	7					
October 13,	2012		Octob	per 15, 20		Name of OS Synatech, In				200		
Occupancy Status Du Vacated Dur	iring Abatemei ing Entire Peri	nt (Check od of Aba	only one) atement			Street Addre	T. 7					
Other - Desc	Performed Ou cribe: pied During A			ours		City, State & Little Egg H	Zip Code arbor, NJ 08087	- A0000				
Scope of Work (Chec			0.00									
≥3 sf or ≥ 50 lf ≥160 sf or ≥260	O If			Renovati Demolition			Mini-Enclosure Glovebag Proce	nt with Negative Pre edure (*) and Non-Friable		re		
Asbestos-Contai TO BE IN F	ation of ning Material ( ABATED Facility 13)	ACM)	Solely b		ally Used nance or f? (12)	Descript Asbestos-C Material ( (i.e., thermal insulation, surf	ion of ontaining (ACM) systems	Amount (Specifi SF or LF)	Ab	atem	_	
	Yes	No	N/A	or other misc			Removal	Repair	Encapsulate	Enclosure		
Teller Area					х	Floor Tile and A	ssoc. Mastic	650 SF	X			П
Name of Registered Waste Hauler NJDEP Waste Hauler ID N 2742					Cubic Y	ards of Waste	Name of Regist					Н
City, State				Disposal Date City, State							$\dashv$	
ittle Egg Harbor, NJ 08087				October 16, 2012 Morrisville, PA						20		
mpleted By Title				V21 12	Signatu	. 1/11		Date	440			$\neg$
liane Aloia		Executi	ve Adminis	strator	1 /V	ani telepa		October 2, 2012				

Agencies Notified    Type Notification	Date of Notification (1)  October 03, 2012  Agencies Notified Type Notification					945 W/V		r/Operator	(2)	REC	EIV	ED				-
Dep   Dot	October 03, 2012  Agencies Notified Type Notification  EPA Initial Amended Amendment #1				The same of the sa	NAME OF STREET	naceu	itical Co								
Dep   Dot	Agencies Notified Type	Notification					.00		2012	OCT -C	AM	10. 6	~			
DOL				-							חאי	ال: زبا	5			
DOH			<b>#</b> 1						ASB	ESTNO	CON	TO -				8
Dock		Emergency (	including					o, NJ .		& LICE	NO O	IKO	<u>L</u>			
Name of Facility Where Abatement is Taking Place (3)  Jacobus Pharmaceutical Co.  Street Address  County Road 683  City (5)  Plainsboro Township, NJ  County (60  Middlesex  Name of Monitoring Firm Hired by Building Owner (8)  Sabre Health  Street Address  1500 Kings HWY N, STE 209  City, State, Zip Code  Cherry Hill, NJ 1, 80034  Project Manager for Monitoring Firm  Brent Altermose, Cith, CSP  Ashdement Performed Outside of Normal Facility Hours  Other Describe.  Asbestos-Containing Material (ACM)  To BE ABATED  In [23]  Yes No N/A  Maintenance Shop  Bathroom  Vestibule  Penthouse AC-5  Name of Registered Waste Hauler  No Describer Address  Scheduled Completion  Facility Closed/Nacated During Entire Period of Abatement Closek Only One  Bathroom  Vestibule  Penthouse AC-5  No N/A  No Describer Address  Scheduled Completion  Facility Closed/Nacated During Entire Period of Abatement Closek Only One  Abbestos-Containing Material (ACM)  To BE ABATED  In [23]  Yes No N/A  No N/A  Abbestos Containing Material (ACM)  To BE ABATED  In [24]  Yes No N/A  No N/A  Abbestos Containing Material (ACM)  To BE ABATED  In [25]  No Describer Address  No N/A  Abbestos Containing Material (ACM)  To BE ABATED  In [26]  No N/A  Abbestos Containing Material (ACM)  To BE ABATED  In [26]  No N/A  No N/A  No N/A  Abbestos Containing Material (ACM)  To BE ABATED  In [26]  No N/A  No N										-10[	ile Delak	<b>G</b> one i	A L			
Jacobus Pharmaceutical Co.   Sirest Address   Suchailty (Ners Abstement to Taking Place (3)   School (K-12)   Suchailty (12)   Suchailty (12	L BCA	EPA DEP DOL  DOH DOH DCA  DOH DCA  DOH DCA  Emergency (including justification) Cancellation  e of Facility Where Abatement is Taking Place (3 bus Pharmaceutical Co. et Address anty Road 683 (5) sboro Township, NJ anty (6) lesex e of Monitoring Firm Hired by Building Owner (8) e Health et Address  Zucksville Road State, Zip Code Dn, PA 18040 ect Manager for Monitoring Firm t Altemose, CIH, CSP Date (10)  Schedule 9/26/12 pancy Status During Abatement (Check Only One Facility Closed/Vacated During Entire Period of Abatement Performed Outside of Normal Facility Other - Describe: e of Work (Check All That Apply) ≥3 sf or ≥3 If					00111	TION					35			
Jacobus Pharmaceutical Co.  Street Address County Road 683 City (6) Plainsboro Township, NJ County Code (7) County (7) Middlesex Name of Monitoring Firm Hired by Building Owner (6) Sabre Health Street Address City, State, Zip Code City, State, Zip Code Coy, State, Zip Code Coverny-Hill, NJ 08034  Facility Coses/Macated Outing Enter Period of Abatement Apply  23 st or 23 if Facility Coses/Macated Outing Enter Period of Abatement Apply 23 st or 23 if Facility Coses/Macated Outing Enter Period of Abatement Coy, State, Zip Code Cherry Hill, NJ 08034  Facility Coses/Macated Outing Enter Period of Abatement Coy, State, Zip Code Cherry Hill, NJ 08034  Facility Coses/Macated Outing Enter Period of Abatement Coy, State, Zip Code Cherry Hill, NJ 08034  Facility Coses/Macated Outing Enter Period of Abatement Coy, State, Zip Code Cherry Hill, NJ 08034  Facility Coses/Macated Outing Enter Period of Abatement Coy, State, Zip Code Cherry Hill, NJ 08034  Facility Coses/Macated Outing Enter Period of Abatement Coy, State, Zip Code Cherry Hill, NJ 08034  Facility Coses/Macated Outing Enter Period of Abatement Coy, State, Zip Code Cherry Hill, NJ 08034  Facility Coses/Macated Outing Enter Period of Abatement Coy, State, Zip Code Cherry Hill, NJ 08034  Facility Coses/Macated Outing Enter Period of Abatement Coy, State Now-Exempted (1) and Non-Frable Procedure Non-Exempte	Name of Facility Where Abate	ment is Taking	Place (	3)	FAC	ILITY INF	ORMA	TION	Type of	Facility (4	`					
Street Address	1 400		ga.c. (.	-,							*22.					
County Road 683    City (5)   Square Feet   # of Floors   Bidg. Age	The state of the s	CO.										than k	(-12)			
County (8)														ding	s, hom	nes,
Plainsboro Township, NJ County (6) Middlesex Name of Monitoring Firm Hired by Building Owner (8) Sabre Health Street Address Street Address 1015 Zucksville Road City, State, Zip Code Easton, PA 18040 Project Manager for Monitoring Firm Protect Ma	A STATE OF THE STA								- etc	CONTRACTOR SOURCE	1 4 - 6 5			21.1		
County (6)   Current Use (Prior if being demolshed)   Pharmaceutical	0. 398								Square	reet	# 01 F	loors	2	Blag.	Age	
Middlesex Name of Monitoring Firm Hired by Building Owner (8) Sabre Health Street Address 1015 Zucksville Road City, State, Zip Code Easton, PA 18040 Project Manager for Monitoring Firm Street Address 1500 Kings HWY N, STE 209 City, State, Zip Code Caston, PA 18040 Project Manager for Monitoring Firm Street Address 1500 Kings HWY N, STE 209 City, State, Zip Code Cherry Hill, NJ 08034 Project Manager for Monitoring Firm Start Date (10) Scheduled Completion Date (11) 9/26/12 Cocupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Other - Describe: Other - Describe: Cherry Hill, NJ 08034  Fall Containment with Negative Pressure Mini-Enclosure City, State, Zip Code Cherry Hill, NJ 08034  Fall Containment with Negative Pressure Mini-Enclosure City, State, Zip Code Cherry Hill, NJ 08034  Fall Containment with Negative Pressure Mini-Enclosure City, State, Zip Code Cherry Hill, NJ 08034  Fall Containment with Negative Pressure Mini-Enclosure City, State, Zip Code Cherry Hill, NJ 08034  Fall Containment with Negative Pressure Mini-Enclosure City, State, Zip Code Cherry Hill, NJ 08034  Fall Containment with Negative Pressure Mini-Enclosure City, State, Zip Code Cherry Hill, NJ 08034  Fall Containment with Negative Pressure Mini-Enclosure City, State No. N/A  Asbestos Containing Material (ACM) (i.e. thermal systems insubation, surfacing, N/AT, or other miscellaneous)  Ababestos Containing Material (ACM) (i.e. thermal systems insubation, surfacing, N/AT, or other miscellaneous)  Facility (i.e. thermal systems insubation, surfacing, N/AT, or other miscellaneous)  Facility (i.e. thermal systems insubation, surfacing, N/AT, or other miscellaneous)  Facility (i.e. thermal systems insubation, surfacing, N/AT, or other miscellaneous)  Facility (i.e. thermal systems insubation, surfacing, N/AT, or other miscellaneous)  Facility (i.e. thermal systems insubation, surfacing, N/AT, or other miscellaneous)  Facility (i.e. thermal systems insubation, surfacing, N/AT, or other miscel	The second secon				0	0 - 1 - (7)					I					**
Name of Abatement Contractor (9)	5.10						7		Current	Use (Prior						
Sabre Health  Street Address  City, State, Zip Code  Easton, PA 18040  Cherry Hill, NJ 08034  Project Manager for Monitoring Firm  Telephone No.  Brent Altemose, CIH, CSP  Scheduled Completion Date (11)  Start Date (10)  Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours  Other-Describe:  State Address  Street Address  Telephone No.  Telephone No.  Ilicense No.  Jene No.  Street Address  Street Address  Ilicense No.  Jene Address  License No.  Jene No.  Jene Address  Street Address  Street Address  Jene No.  Jene Address  Jene No.  Jene No.  Jene Address  License No.  Jene No.  Jene Address  Jene No.  Jene No.  Jene Address  License No.  Jene No.  Jene Address  Jene No.  Jene No.  Jene No.  Jene Address  Jelephone No.  License No.  Jene No.  Jene No.  Jene No.  Jene No.  Jene No.  Jene Address  Jene No.  Jene		Lb. D. Ndland	2 (0)										utical	-03505		
Street Address   Street Address   1500 Kings HWY N, STE 209	200 DO 20	by Building (	owner (8)		ASCI	VI NO.		Carrier 546			2000	9)				
1500 Kings HWY N, STE 209	The state of the s	reet Address 15 Zucksville Road ty, State, Zip Code								roup, LL	С					
City, State, Zip Code Easton, PA 18040  Froject Manager for Monitoring Firm Brent Alternose, CIH, CSP Scheduled Completion Date (11) Start Date (10) Scheduled Completion Date (11) Name of 05HA Monitor The MACK Group, LLC.  Cocupancy Status During Abatement (Check Only One)  Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other-Describe: Cope of Work (Check All That Apply)  23 sf or ≥3 if ≥160 sf or ≥280 if  Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)  Maintenance Shop Bathroom Vestibule  Penthouse AC-5 Name of Registered Waste Hauler No. Elephone No. Telephone No. License No. Door Telephone No. License No. Decription of Asbestos Containing Material (ACM) Vestibule  No. N/A N/A  N/A Sebestos Containing Material (ACM) Vestibule  Penthouse AC-5 Name of Registered Landfill  N/A Sebestos Schalaing Material (ACM) Vestibule  N/A Sebestos Containing Material (ACM) Vestibule  N/A Sebestos Schalaing Material (ACM) Ves		unty Road 683 by (5) sinsboro Township, NJ bunty (6) ddlesex une of Monitoring Firm Hired by Building Owner (8) bore Health reet Address 15 Zucksville Road by, State, Zip Code ston, PA 18040 bject Manager for Monitoring Firm ent Alternose, CIH, CSP art Date (10) Schedule 9/26/12 cupancy Status During Abatement (Check Only On Facility Closed/Vacated During Entire Period of A Abatement Performed Outside of Normal Facility Other - Describe:  ope of Work (Check All That Apply) ≥3 sf or ≥3 If						20.000000000000000000000000000000000000				0.00				
Easton, PA 18040  Project Manager for Monitoring Firm  Brent Altemose, CIH, CSP  Start Date (10)  Start Date (10)  Scheduled Completion Date (11)  9/26/12  Cocupancy Status During Abatement (Check Only One)  Facility Closed/vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours  Cither - Describe:  Cocupancy Status During Abatement (Check Only One)  Facility Closed/vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours  City. State. Zip Code Cherry Hill, NJ 08034  Full Containment with Negative Pressure Solvebag Procedure  Mini-Enclosure Ciovebag Procedure  Non-Exempted (*) and Non-Friable Procedure  Location of Asbestos-Containing Material (ACM) Maintenance Coustodial Staff?  (13)  Maintenance Shop  Maintenance Shop  Maintenance Shop  Abatement Type  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Maintenance Shop  Maintenance Shop  Abatement Type  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Maintenance Shop  Penthouse AC-5  Name of Registered Maste Hauler  Normally Shop Shop Shop Shop Shop Shop Shop Shop		ty, State, Zip Code ston, PA 18040								The state of the s	STE 20	)9				
Project Manager for Monitoring Firm   Selephone No.   Selephone No.   God. 734.0127   (973) 759 - 5000   00781	The day of the Control of the Contro	reet Address 15 Zucksville Road ty, State, Zip Code ston, PA 18040 oject Manager for Monitoring Firm ent Altemose, CIH, CSP art Date (10)  9/26/12														
Brent Altemose, CIH, CSP		ty, State, Zip Code ston, PA 18040 oject Manager for Monitoring Firm ent Altemose, CIH, CSP art Date (10)  9/26/12								J 08034			0000000000			
Start Date (10)  9/26/12  Occupancy Status During Abatement (Check Only One)  Facility Closed/Vacated During Entire Period of Abatement Other - Describe:    Asign   Pacific		ston, PA 18040 oject Manager for Monitoring Firm ent Alternose, CIH, CSP art Date (10)  9/26/12								222			e No.			
9/26/12 12/31/12 The MACK Group, LLC.  Occupancy Status During Abatement (Check Only One)    Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours   Abatement Performed Outside of Normal Facility Hours		ent Altemose, CIH, CSP art Date (10) Schedule									0	0781				
Cocupancy Status During Abatement (Check Only One)    Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours	(SAVELED STREET	ent Altemose, CIH, CSP tart Date (10) Schedule 9/26/12						10000 00000								
Facility Closed/Vacated During Entire Period of Abatement Abatement Period of Normal Facility Hours    City, State, Zip Code   Cherry Hill, NJ 08034	THE PARTY OF THE P		12/31/1	12				roup, LL	C.				T.			
Abatement Performed Outside of Normal Facility Hours  City, State, Zip Code Cherry Hill, NJ 08034  Scope of Work (Check All That Apply)  ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf  Renovation Demolition  Abatement Type  Abatement Type  Abatement Type  Abatement Type  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, Surfacing, VAT. or other miscellaneous)  Renovation Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, Surfacing, VAT. or other miscellaneous)  Renovation Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, Surfacing, VAT. or other miscellaneous)  Renovation Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, Surfacing, VAT. or other miscellaneous)  Renovation Type  Abatement Type  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, Surfacing, VAT. or other miscellaneous)  Renovation Type  Abatement Type  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, Surfacing, VAT. or other miscellaneous)  Renovation Type  Abatement Type  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, Surfacing, VAT. or other miscellaneous  Renovation Type  Abatement Type  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, Surfacing, VAT. or other miscellaneous  Renovation Type  Abatement Type  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, Specify SF or LF)  Renovation Type  Abatement Type  Abatement Type  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, Specify SF or LF)  Renovation Type  Asbestos Containing Material Type  Asbestos Containing Material Type  Asbestos		9/26/12 Decupancy Status During Abatement (Check Only On						27000 7000		Photographic and the party of t	00 o contanto o 107-100					
Cherry Hill, NJ 08034   Scope of Work (Check All That Apply)   ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf											STE 20	9				
Cherry Hill, NJ 08034		tside of Norm	al Facility	/ Hour	S			Section and the section is the					23			
Renovation Demolition  Renovation Mini-Enclosure Glovebag Procedure  Non-Exempted (*) and Non-Friable Procedure  Abatement Type  Abatement Type  Abatement Type  Renovation Of Asbestos Containing Material (ACM) (Specify SF or LF)  Renovation Demolition								Cherry	y Hill, N	J 08034						
Demolition   Demolition   Demolition   Demolition   Mini-Enclosure Glovebag Procedure   Non-Exempted (*) and Non-Friable Procedure   Non-Exempted (*) and Non-Exempted (*) and Non-Exempted (*) and No	Scope of Work (Check All That	t Apply)		-				F	<b>5</b> 7							
Scotton of   Country   C			-					ŀ			nt with N	legativ	e Pressu	re		
Non-Exempted (*) and Non-Friable Procedure	2160 St of 2260 II		ш	Jemoli	tion						dure	ure				
Location of Asbestos-Containing Material (ACM) Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)  West No N/A  Maintenance Shop Bathroom Vestibule  Penthouse AC-5  Penthouse AC-5  Name of Registered Waste Hauler Newark Carting / Rovic City, State Newark / Riverdale, NJ  Completed by  Type  Type  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  For LF  Amount (Specify SF or LF)  Amount (Specify SF or LF)  Amount (Specify SF or LF)  For LF  For LF  Amount (Specify SF or LF)  For LF  Fo					100 100							on-Fria	ble Proce	dure		
Location of Asbestos-Containing Material (ACM)   Used Solely by Maintenance / Custodial Staff? (12)   Yes   No   N/A	12		Is	Locat	ion			• 1								nt
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)  Yes No N/A  Maintenance Shop  Bathroom Vestibule Penthouse AC-5  Penthouse AC-5  Name of Registered Waste Hauler Newark Carting / Rovic  City, State Newark / Riverdale, NJ  Completed by  Title  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  From Date In the Interval I	Location of			Norma	lly		D	escription	n of					,T	уре	
Maintenance Shop  Bathroom  Vestibule  Penthouse AC-5  Name of Registered Waste Hauler  Newark Carting / Rovic  City, State  Newark / Riverdale, NJ  Completed by  Title  Asbestos tile & mastic  900sf  -"-  500sf  Cubic Yards of Waste  Cubic Yards of Waste  Cubic Yards of Waste  Disposal Date  City, State  Newburg, PA  Date		25					tos Co	ntaining N	Material (A						m	_
Maintenance Shop  Bathroom  Vestibule  Penthouse AC-5  Name of Registered Waste Hauler  Newark Carting / Rovic  City, State  Newark / Riverdale, NJ  Completed by  Title  Asbestos tile & mastic  900sf  -"-  500sf  Cubic Yards of Waste  Cubic Yards of Waste  Cubic Yards of Waste  Disposal Date  City, State  Newburg, PA  Date			10			(i.e				on,	1000		Rer	D.	nca	Encl
Maintenance Shop  Bathroom  Vestibule  Penthouse AC-5  Name of Registered Waste Hauler  Newark Carting / Rovic  City, State  Newark / Riverdale, NJ  Completed by  Title  Asbestos tile & mastic  900sf  -"-  500sf  Cubic Yards of Waste  Cubic Yards of Waste  Cubic Yards of Waste  Disposal Date  City, State  Newburg, PA  Date				(12)							01 0	,	nov	pa	lusc	nso
Maintenance Shop  Bathroom  Vestibule  Penthouse AC-5  Name of Registered Waste Hauler  Newark Carting / Rovic  City, State  Newark / Riverdale, NJ  Completed by  Title  Asbestos tile & mastic  900sf  Cubic Stile & mastic  900sf  Cubic Store  500sf  Pipe  80 l/f  Name of Registered Landfill  Cubic Yards of Waste  Cubic Yards of Waste  Hauler ID No.  4509  15.3  Cumberland County Landfill  City, State  Newburg, PA  Signature  Date						1							<u>a</u>	7	ate	9
Bathroom  Vestibule  Penthouse AC-5  Name of Registered Waste Hauler  Newark Carting / Rovic  City, State  Newark / Riverdale, NJ  Completed by  Title  Signature  Joosf  Joosf  Jount Jou			Yes	No	N/A	-								-		+
Vestibule  Penthouse AC-5  Pipe  Name of Registered Waste Hauler  NJ DEP Waste Hauler ID No.  Newark Carting / Rovic  City, State  Newark / Riverdale, NJ  Completed by  Title  Pipe  RO I/f  Cubic Yards of Waste  Cubic Yards of Waste  15.3  Cumberland County Landfill  City, State  Newburg, PA  Date		ор	X	\	-	а	sbest		mastic		90	0sf	-X	,		-
Penthouse AC-5 Name of Registered Waste Hauler Newark Carting / Rovic City, State Newark / Riverdale, NJ Completed by  Pipe  NJ DEP Waste Hauler ID No. 4509  15.3 Cumberland County Landfill City, State Disposal Date 12/31/12 Newburg, PA  Date	Bathroom										50	0sf	-X	,	-	
Name of Registered Waste Hauler  NJ DEP Waste Hauler ID No.  Newark Carting / Rovic  City, State  Newark / Riverdale, NJ  Completed by  NJ DEP Waste Hauler ID No.  4509  15.3  Cumberland County Landfill  City, State  12/31/12  Newburg, PA  Date								"-			50	)sf	-X			
Newark Carting / Rovic  City, State  Newark / Riverdale, NJ  Completed by  Hauler ID No. 4509  15.3  Cumberland County Landfill  City, State  12/31/12  Newburg, PA  Signature  Date																
Newark Carting / Rovic 4509 15.3 Cumberland County Landfill City, State Disposal Date City, State Newark / Riverdale, NJ 12/31/12 Newburg, PA Completed by Title Signature Date	Name of Registered Waste Hauler						100000000000000000000000000000000000000	Cubic Yards Name of Registered Landfill								
City, State  Newark / Riverdale, NJ  Completed by  Disposal Date  12/31/12  Newburg, PA  Signature  Date							OT VV									
Completed by Title Signature Date	The state of the s			Constitution of the Consti	Disp											
Completed by Title Signature Date	Newark / Riverdale, NJ						0.0	12/31/12	2 N	ewburg.	PA					
Mike Cooper President 10/3/12	Completed by Title							Signature	the second secon	2			Date		_	
	Mike Cooper	**	Presid	lent			-	Ment	//-			1	0/3/12			

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

	Location of		Location Normall	y	Description of				emen /pe	t
Asb	estos-Contaíning Material (ACM) TO BE ABATED In Facility (13)	. Ma Cus	ed Solel intenan todial S (12)	ice/	Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	A HOS CAT	Yes	No	N/A					Ф	L
	Penthouse AC-5		X		Fittings	8	X	ť.		ļ
5) <del>-</del>	TankRoom/SteamRoom	X			Steam Pipe	8 Vf	$\perp X$			_
	_"_	X			6" LP Condensate Pipe	70 l/f	X			_
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Date of Notification (1)				Name o	of Building	Owner/	Operato	or (2)	)	-7	EC	EI	Vr	-		_
Septer		Jacobu	is Pharm	aceut	ical Co	ο.				- 6	A C	U				
Agencies Notified		-	Address			10.30	- 7	<b>0120</b>	CT -9	) ,		- 1750				
⊠ EPA	Initial		County	Road 68	83					. 3	A	M 10	: 65			
DEP	Amended	i		City, St	ate, Zip Co	de ;			A.	ישפני	ine	•				
IX DOL	Amendment Emergency		_	Plainsb	oro Tow	nship,	NJ			& [	ICF A	UU	NIF	108		
<b>⊠</b> DOH	justification)	morading		Name o	of Contact					Te	lephone	Nuc	₩ <mark>l</mark> @r			
☐ DCA	Cancellation			Tom S			***			_				V.		
Name of Facility Where	Abatement is Takin	n Place (	3)	FAC	ILITY INFO	ORMAT	ION	1 7	ype of Facility (	(4)						
Jacobus Pharmaceu		g i lace (	5)					1								
Street Address	iicai co.						-	╢	School (K-1 Subchapter		ner than	K-12	)			
County Bood 692									Other (i.e.					dings	, hom	ies,
County Road 683 City (5)								0	etc.) quare Feet	1 # 4	of Floors		T.	Old a	^	
Account of the Account	. N.I							3	quare reet	# (	1 10018		'	Bldg.	Age	
Plainsboro Township	), INJ			County	Code (7)			+	urrent Use (Pri	or if he	ing dom	olich	od)			
Middlesex				**************************************	USE ONLY)			"	unem ose (Fin		- T		,			
Name of Monitoring Firm	Hired by Building	Owner (8	)	ASCI	M No.		Name	e of	Abatement Cor	-	rmace	eutic	aı			
Sabre Health		o iiiioi (o	,	7.00.			100000000000000000000000000000000000000		CK Group, L		(3)					
Street Address									dress	LU						
1015 Zucksville Road	I 015 Zucksville Road City, State, Zip Code Easton, PA 18040						480 000		ngs HWY N,	STE	200					
	City, State, Zip Code Easton, PA 18040								e, Zip Code	OIL	203			-	S 12	
					1000		fill, NJ 0803	4								
Project Manager for Mon		Telepho	ne No.		Telep			•	Licens	se No	).					
Brent Altemose, CIH		866.734	4.0127		- Care-Con-2019/00/0		9 - 5000		0078							
Start Date (10)							OSHA Monitor		100.0	•						
9/26/12		10/26/12 The MACK Grou						LC.								
Occupancy Status During	g Abatement (Chec	k Only O	ne)	Street Address									**			
Facility Closed/Vac	ated During Entire F	Period of	Abatei	ment			1500	Kin	igs HWY N,	STE	209					
Abatement Performe							City,	State	e, Zip Code	-						
							Cherr	уН	lill, NJ 08034	4						
Scope of Work (Check Al	I That Appiy)															
≥3 sf or ≥3 lf		$\boxtimes$	Renova	ation			4	$\boxtimes$	Full Containme	ent with	n Negati	ive Pi	ressu	re		
≥160 sf or ≥260 lf			Demoli	tion				Mini-Enclosure Glovebag Procedure								
								U	Non-Exempted		Non-Fri	able l	Proce	dure		
		Is	Locat	ion											emen	t
Location	of		Norma			De	scription	n of						T	/pe	
Asbestos-Containing		**************************************	ed Sole iintena	100					erial (ACM)		mount				m	
TO BE ABA		Cus	todial	735.85 (0.05)	(i.e.		system cing, V		sulation, or		Specify F or LF)		Remova	Re	Encapsulate	Enclosure
(13)	•		(12)				niscella				o, <sub>L</sub> ,		VOU	Repair	Sula	osur
	2.00	Yes	No	N/A									<u>m</u>	7	ite	ď.
Maintanana	c Chan	165	NO	INA			- 4:1- (		4:_		200-1		$\vee$			-
Maintenance			as	spesto	s tile 8	s m	astic		900sf	_	$\Diamond$					
Bathroo	$\triangle$				"-				500sf		$\Delta$					
Vestibu	X				-"-				50sf		X					
Name of Registered Was	N	NJ DEP Waste				ards Name of Registered Landfill					l					
	H	lauler ID		of Was												
Newark Carting / Rov					Cumberland County Landfill											
City, State		Disposal Date														
Newark / Riverdale, N Completed by		10/26/12														
	lost			. 8	Signature Date			ā								
Mike Cooper		Presid	ent					-				9/12	112			

		(2)				٥٢		C	neck a	<b>#109</b>	93	
Date of Notification	(1) October 3, 2012				ng Owner / Operator nmunity Hospital	(2)	CEL	VED C				
Agencies Notified	Type Notification			t Address								
□EPA □DEP	EMERGENCY		727 1	North Bee	rs Street	ASBEST & LU	no					
⊠DOL			City,	State & Zi	p Code	& LIC	FNS	HOLKOL				
<b>⊠</b> DOH	Amended Amendme	nt #	Holm	idel, NJ 0	7733			nu di				
DCA	Cancellation		Name	e of Conta	ct				elepho	ne Ni	ımbı	er
									5.0p.1.0			
			F/	CILITY	INFORMATION			20-0-10-1				
Name of Facility Wh Bayshore Commun	ere Abatement is Tak	king Place (3)			Type of Facil						-	
Street Address	ity Hospital				School	pter 8 (Other tha	on K 12\					
727 North Beers St	reet					i.e., private &	The state of the principle		s hor	ne e	etc )	
					Square Feet				dg. Age			
City (5)				000000000000000000000000000000000000000	100,00	00	5		33.	60		
Holmdel					Current Use	(Prior if being de	emolishe	ed)				
County (6) Monmouth		County Co	de (7)									
Name of Monitoring	Firm Hired by Building		AND A SEC	ASCM		tement Contrac	tor (9)	***************************************				
Street Address					Synatech, In Street Addres	SS						_
City, State & Zip Coo	de				829 Radio Re City, State &							
ony, chare a zip coc						arbor, NJ 0808	7					
Project Manager for I	Monitoring Firm	,  1	elephone	Number	Telephone No 609-296-6916	umber	1	License Nun	nber 0081	7		
Scheduled Start Date 10/4/12		duled Comple	tion Date 10/5/12	(11)	Name of OSI- Synatech, In		***************************************			-		
	uring Abatement (Che sed/Vacated During E			ent	Street Addres	ss	- 7		***			
Abatement I Other – Des	Performed Outside of cribe:	Normal Hou	rs		City, State &	Zip Code arbor, NJ 0808	7					
	upied During Abatem	ent			Little Lyg rie		,					
Scope of Work (Ched	ck all that apply)				П	Full Containme	ent with N	legative Pres	euro.			
$\ge 3$ sf or $\ge$ If			Renovati			Mini-Enclosure		vogativo i 100	Juio			
≥160 sf or ≥26	60 If		Demolition	on	$\boxtimes$	Glovebag Proc	edure					
						Non-Exempted	(*) and I	Non-Friable P	rocedu	re		
	cation of ining Material (ACM)	Is Loca Solely	tion Norma by Mainter		Descripti Asbestos-Co		Ame	ount (Specify	Ab	atem	ent 7	Гуре
TO BE	E ABATED		odial Staff	? (12)	Material (	ACM)		SF or LF)	L			
	Facility (13)	1			(i.e., thermal insulation, surfa					8 - 03	ш	_
	**************************************				or other misce				Re	Re	S S	inc
							1		Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A					=		ate	<u> </u>
Boiler Room		Х			Valve/Fitting I	nsulation		8 LF	X			
		-	-				-		- 1			
Name of Registered V	Waste Hauler	NJDEP		Cubic Y	ards of Waste	Name of Regis	tered La	ındfill			H	
Synatech, Inc.		D No. 7429	<1									
City, State			< 1   Grows Landfill     Disposal Date   City, State									
ittle Egg Harbor, N.	1 08087											
Completed By	Title		October 9, 2012 Morrisville, PA Signature Date									
87.4			3 95 50		1 1 00							
Diane Aloia	Exec	utive Admin	istrator	1 60	une JULA		October	r 3. 2012				- 1

						R	t CE	IVED	C	heck t	#109	3	
Date of Notification (	(1) October 3, 2	0:13		Name	of Building	Owner / Operator	(2)						
Agencies Notified	Type Notific			Shoe	Nore Comm	unity Hospital	TO		APPBO	EN		$\neg$	
□EPA □DEP	EMERGEN			727 N	lorth Beers	MODE;	2016	CONTRA	signatur	Senior S	Bervic LA	es	
⊠ DOL	⊠ Initi	ial		City	State & Zip (	- &	LICEN	SING	5103/19	Pme:	150	14	
⊠рон	Am	bebrie	и		del, NJ 077:	~~0		· CING	)			-1	
DCA		andment for a collaboration	·	Name	of Contact					<del></del>		- ,-	
500-24-00-0-0-0-0-					o comac			14		Telepho	ne Nu	mbe	ər
				FA	CILITY IN	FORMATION							
Name of Facility Wh Bayshore Commun	ere Abstemen	it is Taking	Place (3)			Type of Faci							
Street Address				- 11-11-			1	ther than K-12	· .				
727 North Beers St	roet					☑ Other	ile., pri	vate & comme	•	gs, hor	ne, e	tc.)	
City (5)	~~~					Square Feet	1	# of Floors	В	ldg. Age			
Holmdel								being demollsh	ed)		60		
County (6)	<del></del>		County Coo	le (7)		NVA	-						
Monmouth		- 10	USE ONLY			1							
Name of Monitoring	Firm Hired by	Bullding O	wner (8)		ASCM No	Name of Aba Synatech, In		Contractor (9)			-	_	
Street Address						Street Addre	ss						
City, State & Zip Cox	ty, State & Zip Code					City, State &							
roject Manager for Monitoring Firm						Little Egg H							
	m	Te	elephane	Number	Tislephone N 609-296-691	umber		Llœnse Nu	mber 0081	<b></b>	-		
	Scheduled Start Date (10) Scheduled Comp				(11)	Name of OSI Synatech, In	Monit	tor		0001	<u>,                                     </u>		
Occupancy Status Di Facility Clos	uring Abateme ed/Vacated D	ent (Chack Uring Entir	only one)	10/5/12 Abateme	nt	Street Address	35			i			
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	upied During A	ton material				Little Egg Ha	irbor, N.	J 08087					
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Asbestos-Conta		(ACM)	Solely b	on Norma ry Mainter	ance or	Descripti Asbestes O	on of		ount (Specify	Ab	lem	nt T	уре
IN	Facility (13)		Custo	dial Staff	? (12)	Material ( (1.8., thermal insulation, surf or other misce	systems ading, V	AT	SF or LF)		- T	E DC	m
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ttle Egg Harbor, NJ 08087				October 9, 2012 Morrisville, PA									
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#### State of New Jersey - Notification of Asbestos Abatement

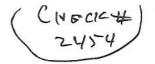
·			(Purs	uant to <u>N.J.A.C</u>	2. 8:60-7 and 12:120-7)			F	REC	EN	10-	
Date of Notification (1) October	3, 2012				Name of Building Owner The Valley Hospit		2)	20120	CT a	- 6	<del>CD</del>	
Agencies Notified  ☑ EPA  □ DCA  x DOL  ☑ DEP x DOH		Notification Initi	al Noti ency (i	fication	Street Address 223 North Van Die City, State, Zip Code Ridgewood, NJ Name of Contact William Stasiak	n Avenu	736 Tele	2012 0	I OS (ICEN)	AM CONT	ROL	
				FACILITY IN	FORMATION				-	-	83	
Name of Facility Where Abate The Valley Hospital Cheel 4 <sup>th</sup> Floor – Neu Street Address 223 North Van Dien A	ro/Orth		Areas		Type of Facility (4) School (K-12) Subchapter 8 (other that Other (i.e. private 8 Sq. Feet: Unknown	& commercia				+ yea	rs	
City (5) Ridgewood	County (6 Berger	i	County (State	V Code (7) Use Only)	Current Use (prior if bein	ig demolish	ed): Ho	spital				
Colden Corporation	Name of Monitoring Firm Hired by Bldg. Owner (8)  Colden Corporation  Street Address					TEMENT	CONS	ULTANT	S, INC			
Street Address 28 Washington Street	t		Street Address 268 MAIN STREET									
City, State, Zip Code Ballston Spa, NY 12020					City State, ZipCode Butler, NJ 07405							
Ballston Spa, NY 12020 Project Manager for Monitoring Firm Jim Miades 347.435.3561					Telephone Number   License Number   973-492-0477   00840							
Scheduled Start Date (10) October 19, 2012		Scheduled C			Name of OSHA Monitor EMSL inc.						7.00	
Occupancy Status During Ab Facility Closed/Vacate Abatement Performed Describe Other – Describe: Wee Phase 1- October 19, Phase 2- TBD	d During E Outside o	Check only or Entire Period of f Normal Faci riday-Saturda	ne) of Abater lity Hour ay-Sund	ment s -	Street Address  1056 Stelton Road City, State, Zip Code Piscataway, NJ 088	354			electrical and			
Phase 3- TBD Source of Work (Check all that												
≥ 3 sf or ≥ 3 lf □≥ 160 sf or ≥ 20  Location of Asbestos-Containir Material (ACM) in Facility (13)	ng Is Lo Solei Staff	cation Normall y by Maint./Cu ? (12) NO	stodial		bestos Containing Material nal systems insulation, surfac	X Full Cor Mini-End Glovebag Non-Exer ing, (Spe or Li	closure Procedented (*) unt cify SF	and Non-		Proced	ure	
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Name of Reg. Waste Hauler  NJDEP Waste Hauler ID#					Cubic Yards of Waste:			of Registe		dfill		
See Hauler Below # 1 & 2 See Below						30	Mea	dowfill La	andfill			
auler #1) Greenwood Abatement Consultants, Inc. – Butler, N. NJ DEP # 12561 auler #2) Newark Carting, Inc. – Newark, NJ 04509, NJ DEP # 195					7405	Octobe		012 R	ity, State oute 2, B ridgeport	ox 68		
					Signature Marin Graure		Date Oc	tober 3	04-842-2 , <b>2012</b>	784		

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City, State, Zip Code		Car San Za Code Hackensack	ŀ	601
Project Manager for Monitoring Firm	Telephone Ma.	Telephone No.	0038	
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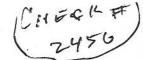
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### RECEIVED

#### State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:20/N.J.A.C. 7:26-2.12)

2012 OCT -9 4 9: 55

	otification (1):			ding Ov	vnér/Operator (2)	\$ 77	456 8	510:	SC	ONT	ROL	
10/01/12 Agencies	Type Notification		Addres		1				-11-	1140		(A)
Notified	Initial	4 74	ar Stree					ę				434
HEDA	☐ Amended			ip Code						į		
EPA DEP	Amendment#:		k, NJ 0									
X DOL	☐ Emergency	Name	of Con	tact:		Telephone	e Number:					
ACDOL.	(including	Benja	min Ola	igadeyo								
ACDOH.	justification)											
₩ DCA	☐ Cancellation				FACILITY INF	ORMATION						
			Palata a	DI(2		Type of Facility (4):						
Name of I	Facility Where A	batement is	laking	Place (3	):							
Street Ad	nue Elementary S	School				☐ School (K-12) ☐ Subchapter 8 (Other than K	-12)					
						Other (i.e., private & comm	ercial buildin	ngs, home	es, et	c.)		
186 14th		County (6):		Count	y Code (7):							
City/ (5): Newark				07103	) code (.).	Square Feet: 150,000	ħ	of Floo	ors:			
Newark		Esses	<	- SALDUNINA		Bldg. Age: 50						
						Current Use : School						
21 0	Monitoring Firm	Hinad by Du	ilding (	Jumer.	ASCM No.:	Name of Abatement Contr	ractor (9):					
Whitman		Hiled by Bu	numg (	JWHCI.	00110	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Control of the Control					
willitian					00110	Envirocare Enterprise	es, Inc.					
Street Ad	ldress:					Street Address:						
7 Pleasa	nt Hill Road					358 Broadway						
City, Stat	te, Zip Code:					City, State, Zip Code:						
						Newark, NJ 07104						
	y, NJ 08512	to de Dieno			Telephone No.:	Telephone No.:	License	No.:			-	
Kevin L	lanager for Moni	toring riiii.				3.0	100000000000000000000000000000000000000					
Kevin L	overy			-	(732)-390-5858	(973) 732-6225	01017					
Start Date				pletion	Date (11):	Name of OSHA Monitor:						
10/12/12		10/14/1				AmeriSci.						
Occupancy	y Status During Ab	atement (Chec	k only o	ne)		Street Address:						
A Facility	Closed/vacated Du	ring Entire Per	riod of A	batemen	t	117 East 30th Street						
Abatem	ent Performed Outs	side of Normal	Facility	Hours		City, State, Zip Code:						
Describe:							- Ava (1776-170-e)					
						New York, New York, 1	0016					
☐ Other Describe:												
	Work (Check all tha	at apply):					, , ,			ine D		
1550				- D			Containmen Enclosure	t with N	egat	ive Pro	essure	
$\square \ge 3 \text{ sf } \alpha$	or $\geq 3$ lf sf or $\geq 260$ lf		40	□ Reno		⊠ Glove	e hag Proce	dure				
×2 100 3	S1 01 ≥ 200 11					□ Non-I	exempted (*)	and No.				
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100	Location of		Vormal		A sheetos Co	Description of ntaining Material (ACM)		-	-	1	P-	
Asbestos	-Containing Mat		d Sole		(i.e., therm	nal systems insulation,		1	ж		H	III
G	(ACM)		intena Custodi		sur	facing, VAT, or	Amo		en	Re	ıca	ncl
TC	BE ABATED	;	Staff?		othe	r miscellaneous)	(Spec		Removal	Repair	Encapsulat	Enclosure
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Complet				Title:		0:	Da			CO MA		
Sam Ilou					ct Manager	gamme! Us of	10/	/01/12				
Jun 1100				,,,,								

# RECEIVED

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:20/N.J.A.C. 7:26-2.12)

2012 OCT -9 AM 9:55

Date of No 10-01-12	otification (1):	Atlant	of Build	ing Ow ion – I	mer/Oper: Hangar 3	(East, North	& Sout	h Sides) ASE	ESTOS DO	1:00		3	
Agencies	Type Notification	Street A	Address:					2.	ESTOS COA & LICENSIN	TRO	L.		
Notified EPA	☐ Initial ☐ Amended	City, S	dustrial tate, Zip	Code:					- OCHOIN	6	(8)		
DEP DOL	Amendment#:  □ Emergency (including justification)	Name	oro, NJ of Conta m Mulli	ict:				Telephone	Number:		-	ž	
□ DCA	□ Cancellation		- 100000		71.4	*** **** ******	ND 2 ( ) 7	EXON					
				(2)	FAC	CILITY INFO		ype of Facility (4):					
Name of F Hangar 3	acility Where Abate	ment is Taking	g Place (	(3):									9
Street Add								School (K-12) Subchapter 8 (Other the	ın K-12)				
	trial Avenue	ounty (6):		Coun	ity Code (	7):		Other (i.e., private & co	mmercial buildings	, homes	s, etc.)		
City/ (5): Teterboro	100000	ergen		0760		, ,.		quare Feet:	# of Floors:				
			et .				E	Bldg, Age Current Use : School					=
Name of A	Monitoring Firm Hire	d by Building	Owner	-	ASCM	No.:		Name of Abatement Cont	ractor (9):	-			
Whitman		or of Bunding	, 0 ,		00110		F	Envirocare Enterprises,	Inc.				
0	1							street Address:					
7 Pleasant	ress: t Hill Road												
010	- a: - a - I							58 Broadway, Suite 202 City, State, Zip Code:	2				-
	e, Zip Code:							Newark, NJ 07104					
	v, NY 08512	D'			Talanh	ana Na		elephone No.:	License No.:		-		
Project Ma Kevin Lov	anager for Monitorin vely	g Firm:				one No.: 390-5858	- 1	973)·732-6225	01017				
Start Date 10-15-12	(10):	Scheduled 10-30-12	Compl	etion D	Date (11):		1.3	Name of OSHA Monitor: AmeriSci					
	y Status During Aba							Street Address: 17 East 30 <sup>th</sup> Street					
<ul><li>□ Facility</li><li>⊡ Abateme</li><li>Describe:</li></ul>	Closed/vacated Duri ent Performed Outsid	de of Normal	Facility	Hours				City, State, Zip Code; New York, New York, 1	0016	110			
Other Describe:	Non fred Work (Check all that	le ven	oveil	du	my	firgent							
$\square \ge 3$ sf or		apply):	Ren	ovation nolition	n	n actu	ite	<ul> <li>☐ Mini-Enclosure</li> <li>☐ Glovebag Procedu</li> </ul>			able Pi	rocedu	re
		Is	Locatio	n							Abate		
Achesto	Location of os-Containing Materi		Vormally				escripti ntaining	on of Material (ACM)		-	1 y	pe	
	(ACM) O BE ABATED IN Facility (13)	Ma	d Solely intenancustodial Staff? (12)	ce/	•	(i.e., therm surf	nal syste facing, \	ms insulation, /AT, or laneous)	Amount (Specify SF or LF)	Removal	Repair	Encapsulat	Enclosure
		Yes	No	N/A									
1st & 2nd f	Noor		X .	-		Window Ca	ulking		600 LF	Х			
1st & 2nd f	Noor		X			Door caulki			80 LF	-			
Name of F Newark C		NJD 4506		Hauler ID No	).:	Cubic Yards of Waste:	Name of Registe Tullytown Re. F		dfill:				
City, State		Dispos	sal Dat	e:			City, State: Tullytown, PA						
Completed Sam Hour	d By:			Title Proj	: ect Mana	ger	Signa	rement floor	Date: 10-01-12				

Fax:

## State of New Jorgey NOTIFICATION OF ASBESTOS ABATEMENT

Date of Notification (1)   Type Notification   Type of Facility Where Abstraction   Type of Facility Wh		28		N				STOS AB/ 8:60 and 12		ENT CY	并	KR8	5			to become
Page			· · · · · · · · · · · · · · · · · · ·				_			(1)	API	PROVED		Ŧ	O	
County Case	Age	NO. PROPERTY AND ADMINISTRATION OF THE PARTY AND ADMINISTRATIO						enue		Tan	1 (16)	gitature)		19	: 52	3
Name of Facility Where Abstrance in Ending Place (3)   FACILITY INFORMATION   Telephona No.	E	DEP	Amended Amendment #		_ [					Date: Li	ग्रेशि	ESHAS	1011	1	ROL	
Type of Facility (Misra Abusement to Taking Place (3)   Type of Facility (4)   School (K-12)			justif(cation)	neiuting			Contact	***************************************			Teli	ephone Num	bel!	₹ <i>G</i>	6	T)
School (K-12) Strout Address 68-72 Franklin Place  City (6) Surmith County (Code (7) Surmith Carried Use (Prior if being demolished) Carrell Use (Prior if being						FACIL	ITY INFO	PRIMATION					1.5			
Since Address 68-72 Franklin Place County (6) Summit County (6) County Code (7) (67ATE Use (6M,Y) Car Dealership Car Dealership Name of Nontoning Firm Hired by Building Owner (8) ASCM No. n/a Jadar Contracting LLC Streat Address 1/2 Streat Address 1/2 Streat Address 22 Troy Lane Clay, State, Zip Code Lincoln Park, NJ 07035 Car Dealership County Code (7) Sust, Zip Code Lincoln Park, NJ 07035 Car Dealership County Code (7) Sust Zip Code Lincoln Park, NJ 07035 Car Dealership County Code (7) Sust Zip Code Lincoln Park, NJ 07035 Car Dealership County Code (8) Sust Date (10) Sust Date		1,20	0.7	Place (3	)					Type of Facility	(4)					
Chy (6) City (6) County (6) Count	_		ship for Demo						]							
Start Franklin Plate  Set of Floors   Sidura Feet   Set of Floors   Sidura Feet   Sof Floors   Soldy Age									11					linos	home	¥6.
Summit  County (6)  Unition  County (6)  Variety (7)  Var	68	3-72 Franklin Plat	oe						- 1	MC)	•			•		
Unition  Name of Monitoring Firm Hired by Building Owner (8)  Name of Monitoring Firm Hired by Building Owner (8)  Name of Abetement Contracting LLC  Streat Address  1/8  22 Troy Lane  City, State, Zip Code  1/8  City, State  1/8  City, State	2	200	757511	.775						Square Feet	# 07	f Floors	100		бe	
n/a Jadar Contracting LLC  Street Address 1/a  Street Address 1/a  City, State, Zip Code 1/a  Project Manager for Monthoring Firm 1/a  1/a  Telephona No. 1/a  1/a  1/a  Telephona No. 1/a  1/a  1/a  1/a  1/a  1/a  1/a  1/a	11							,	-	32		ng demolish	ed)			
1/4	7-9-20		Hired by Building C	wner (8)			No.	- 1				(9)		- 10		
City, State, Zip Code  1/2  Project Manager for Montioring Firm 1/3  Project Manager for Montioring Firm 1/4  Project Manager for Montioring Manager for Montior 1/4  Project Manager for Montioring Firm 1/4  Project Manager for Montioring Firm 1/4  Project Manager for Montioring Manager for Montioring Manager for Montioring Manager for Landing Manager for Lan	Str	eat Address						5	Irest A	√ddrees	_					
Completed by   Title   Completed by   Title   Completed by   Lincoln   Park, NJ 07035   Lincoln Park, NJ 07035   Lincol	n	a							22 Tr	oy Lane						
Project Manager for Monitoring Firm n/a  Start Date (10) Start Date (11) Scheduled Completion Date (11) Start Date (10) Scheduled Completion Date (11) Sc	Ch	, State, Zip Code	· · · · · · · · · · · · · · · · · · ·					C	City, Sta	ate, Zip Code						
N/a	n/	a						] 1	Linco	In Park, NJ (	7035					
Start Date (10)  10-4-2012    Scheduled Completion Date (11)   10-4-2012   Scheduled Completion Date (11)   10-4-2012   Scheduled Completion Date (11)   10-4-2012   Jadar Contracting   Streak Address   22 Troy Lane   City, State, Zip Code   Lincoln Park, NJ 07035   City, State   City, Sta	Pro	ject Manager for Mon	horing Firm			Telephor	ne No.	T	elepho	one No.	-	License No	D.			
10-4-2012  11-15-2012  Decupancy Status During Abatement (Check Only One)  Facility Closed/Vacatad During Entire Petrod of Abatement Abetement Performed Outside of Normal Facility Hours  Ofter ~ Describe. Sem - Sym  Scope of Work (Check All That Apply)  23 sf or ≥3 l'  2180 sf or ≥3 l'  2180 sf or ≥3 l'  Norm-Exempted (*) and Non-Frieble Procedure  Abatement  To Be disposed of as  House on Same Property  Name of Registered Wasta Hauter  Vannuzzi & Sons Demolition  Normality  Normality  Normality  Location  Asbestos Waste  Cubic Yords  of Waste  Hauter ID No.  17497  Table  Sysyttap  Disposal Date  City, State  Name of Registered Landfill  EST	ļ ņ/	a				n/a			973-7	706-7950		01088				
Occupancy Status During Absterment (Check Only One)  Fecility Closed/Vacated During Entire Petiod of Absternent Absternent Petformed Outside of Normal Facility Hours  Other ~ Describes Bern - Sprn  Scope of Work (Check All That Apply)  2 st or ×3 if 2 to sf or ×260 if Percedure  Location of Asbestos-Containing Meterial (ACM) To BE ABATED In Facility (13)  In Facility (13)  Entire Structures - Dealership & To be disposed of as Absestos Waste  Nome of Registered Waste Hauter Hauter Pannuzzi & Sons Demolition  Nome of Registered Waste Hauter Pannuzzi & Sons Demolition  Nome of Registered Waste Hauter Pannuzzi & Sons Demolition  Nome of Registered Waste Hauter Pannuzzi & Sons Demolition  Nome of Registered Waste Hauter Pannuzzi & Sons Demolition  Nome of Registered Waste Hauter Pannuzzi & Sons Demolition  Nome of Registered Waste Hauter Pannuzzi & Sons Demolition  Nome of Registered Waste Hauter Pannuzzi & Sons Demolition  Nome of Registered Waste Hauter Pannuzzi & Sons Demolition  Nome of Registered Waste Hauter Pannuzzi & Sons Demolition  Nome of Registered Waste Hauter Pannuzzi & Sons Demolition  Nome of Registered Waste Hauter Pannuzzi & Sons Demolition  Nome of Registered Waste Hauter Pannuzzi & Sons Demolition  Nome of Registered Waste Hauter Pannuzzi & Sons Demolition  Nome of Registered Waste Hauter Pannuzzi & Sons Demolition  Nome of Registered Waste Hauter Pannuzzi & Sons Demolition  Nome of Registered Waste Pannuzzi & Sons Demolition			T	Schedul	ed Cor	npletton I	Date (11)	N	lame o	OSHA Montan						
Facility Closed/Vacated During Entire Pastod of Abeternent Abeternent Performed Outside of Normal Facility Hours City, State, Zip Code Lincoln Park, NJ 07035  Scope of Work (Check All That Apply)  23 8f or x3 lf 2180 sf or x250 lf  Renovation Demolition  Is Location Normally Used Solety by Maintenance/ Custodies Statt? (12)  Yes No N/A  Entire Structures - Dealership & House on Same Property  Name of Registered Wasta Hauter Yannuzzi & Sons Demolition  Renovation Description of Abeternent Type  Abstructures  22 Troy Lane City, State, Zip Code Lincoln Park, NJ 07035  Full Containment with Negative Pressure Mint-Enclosure Glovebag Procedure  Abstructure  Mint-Enclosure Glovebag Procedure  Non-Exempted (*) and Non-Frieble Procedure  Abstructure  Abstructures  Abstructures  Abstructures  Abstructures  Abstructures  Abstructures  Abstructures  Abstructures  Custodies Statt? (12)  Yes No N/A  To be disposed of as  House on Same Property  Non-Exempted  Abstructure  Abstructure  Application  (Specify SF or LF)  The procedure  Abstructure  Active  Abstructure  Abstructure  Abstructure  Abstructure  Abstructure  Abstructure  Abstructure  Active  Abstructure  Abstructure  Abstructure  Active  Abstructure  Active  Abstructure  Active  Abstructure  Active  Abstructure  Abstructure  Active  Abstruct						!		1_			i i	-		_		
Abetement Performed Outside of Normal Facility Hours  City, State, Zip Code Lincoln Park, NJ 07035  Scope of Work (Check All That Apply)  23 st or x3 if 2180 st or x3 fir 218	Oc	cupancy Status Durin	g Abatement (Check	k Only Or	10)			1 -								
Scope of Work (Check All That Apply)  □ ≥3 of or ≥3 if □ ≥180 of or ≥260 if □ ≥260 if □ ≥260 of or ≥260 if □ ≥2																
Pull Containment with Negative Pressure   Procedure				ai Hacility	y Hour	3		1			7035					
Demolition    Mini-Enclosure Glovebeg Procedure   Mini-Enclosure Glovebeg Procedure   Mini-Enclosure Glovebeg Procedure   Mini-Enclosure Glovebeg Procedure   Mon-Exempted (*) and Non-Exempted (*) an	Soc	ope of Work (Check A	U That Apply)						_							
Location of Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)  Yes No N/A  Entire Structures - Dealership &  Nome of Registered Wasta Hauter Yennuzzi & Sons Demolition  Nome of Registered Wasta Hauter Yennuzzi & Sons Demolition  Is Location Normally Used Solety by Maintenance/Countries and Star? (12)  Yes No N/A  To be disposed of as  Abatement Type  Asbestos Containing Material (ACM) (I.e. thermal systems Insulation, auriscing, VAT, or other miscellaneous)  To be disposed of as  Abatement Type  Application of Asbestos Containing Material (ACM) (I.e. thermal systems Insulation, auriscing, VAT, or other miscellaneous)  To be disposed of as  Abatement Type  Abatement Type  Application of Asbestos Containing Material (ACM) (I.e. thermal systems Insulation, auriscing, VAT, or other miscellaneous)  To be disposed of as  Abatement Type  Application of Asbestos Containing Material (ACM) (I.e. thermal systems Insulation, auriscing, VAT, or other miscellaneous)  Se of U.E. thermal systems Insulation, auriscing, VAT, or other miscellaneous)  To be disposed of as  Abatement Type  Application of Asbestos Containing Material (ACM) (I.e. thermal systems Insulation, auriscing, VAT, or other miscellaneous)  Se of U.E. thermal systems Insulation, auriscing, VAT, or other miscellaneous)  To be disposed of as  Abatement Type  Abatemant Type  Application of Asbestos Containing Material (ACM) (I.e. thermal systems Insulation, auriscing, VAT, or other miscellaneous)  To be disposed of as  Abatemant Type  Abatemant					75370000000				Ė	Mini-Endosus Glovebag Pro	re ocedurs	-				
Location of Asbestos-Containing Meterial (ACM)  TO BE ABATED In Facility (13)  Yes No N/A  House on Same Property  Name of Registered Waste Hauler Yennuzzi & Sons Demolition  Nother Interest Containing Material (ACM) (Le. thermal systems insulation, auriacing, VAT, or other miscelleneous)  To be disposed of as  asbestos waste  Type  Type  Asbestos Containing Material (ACM) (Le. thermal systems insulation, auriacing, VAT, or other miscelleneous)  For LF  Type  Type  Type  Type  Type  Type  Type  Asbestos Containing Material (ACM) (Le. thermal systems insulation, auriacing, VAT, or other miscelleneous)  For LF  To be disposed of as  Asbestos waste  Name of Registered Waste Hauler  Yennuzzi & Sons Demolition  Name of Registered Waste Hauler  Type  T	-								103	Non-Exemple	(') an	g woll-rusp	Pro	STATE OF THE REAL PROPERTY.	25332201111	,
Asbestos-Consishing Malerial (ACM)  TO BE ABATED In Facility (13)  Yes No N/A  Name of Registered Wasta Hauter Yennuzzi & Sons Demolition  Name of Registered Wasta Hauter Yennuzzi & Sons Demolition  City, State Hillsborough, NJ  Completed by  Used Solety by Maintenance/Custodial Staff? (I.e. thermal systems Insulation, surfacing, VAT, or other miscellaneous)  Asbestos Contplining Material (ACM) (I.e. thermal systems Insulation, surfacing, VAT, or other miscellaneous)  SF or UF)  Page 1  Asbestos Contplining Material (ACM) (I.e. thermal systems Insulation, surfacing, VAT, or other miscellaneous)  SF or UF)  Page 1  Asbestos Contplining Material (ACM) (I.e. thermal systems Insulation, surfacing, VAT, or other miscellaneous)  SF or UF)  Page 1  Asbestos Contplining Material (ACM) (I.e. thermal systems Insulation, surfacing, VAT, or other miscellaneous)  SF or UF)  Page 1  Asbestos Contplining Material (ACM) (I.e. thermal systems Insulation, surfacing, VAT, or other miscellaneous)  SF or UF)  Page 1  Page 1  Page 1  Page 2  Page 2  Page 3  Page 3  Page 3  Page 3  Page 4  Pa				1000		1940 CO			75728	720						
To BE ABATED   In Facility (13)   Custodial Staff? (12)   Custodial Staff? (12)   Custodial Staff? (12)   Custodial Staff? (12)   Cother miscellaneous)   SF or LF   S	1						Anhor					iemest senë			-	
Finitive Structures - Dealership & To be disposed of as House on Same Property asbestos waster  Name of Registered Waste Hauter Yennuzzi & Sons Demolition  City, State Hillsborough, NJ  Completed by  Title  To be disposed of as  asbestos waster  Cubic Yerds of Waste TBD  Name of Registered Landfill IESI  Disposal Date City, State Bothlehem, PA  Date		TO BE AB	ATED					thermal sy	elems	Insulation,	(	Specify	3	70	<u>8</u>	Ē
Finitive Structures - Dealership & To be disposed of as House on Same Property asbestos waster  Name of Registered Waste Hauter Yennuzzi & Sons Demolition  City, State Hillsborough, NJ  Completed by  Title  To be disposed of as  asbestos waster  Cubic Yerds of Waste TBD  Name of Registered Landfill IESI  Disposal Date City, State Bothlehem, PA  Date				Cua							S	For LF)	3	epa	ğ	180
Entire Structures - Dealership & To be disposed of as  House on Same Property asbestos waste  Name of Registered Wasta Hauter Yennuzzi & Sons Demolition Number Hauter ID No. 17497 TBD IESI  City, State Hillsborough, NJ  Completed by Title Signature Date Date  Date		()		1	۲.,	1		Outer trus		,			3	7	9	=
House on Same Property  asbestos waste  Name of Registered Waste Hauter Yennuzzi & Sons Demolition  Name of Registered Waste Hauter ID No. 17497  TBD  City, State Hillsborough, NJ  Completed by  Tite  Signature  Date  Date	_			182	No	NA							-	_		-
Name of Registered Wasta Hauter Yennuzzi & Sons Demolition  City, State Hillsborough, NJ  Completed by  Number   Cubic Yerds of Waste   Cubic Yerds of Waste   TBD   TBD    Name of Registered Landful   IESI   IESI    Disposal Date   City, State   Bothlehem, PA   Date	E			-	-		T	<u>·</u>			-		-			
Yennuzzi & Sons Demolition Haular ID No. 17497 TBD IESI  City, State Hillsborough, NJ Title Signature Laborate  Disposal Date TBD Bothlehem, PA  Date	-	INPO IN Seriou	is riopeity	+	<del> </del>			asucsit	OG 400	(Andrews		_	-	-		
Yennuzzi & Sons Demolition Haular ID No. 17497 TBD IESI  City, State Hillsborough, NJ Title Signature Laborate  Disposal Date TBD Bothlehem, PA  Date	r				<u> </u>											
Yennuzzi & Sons Demolition 17497 TBD IESI  City, State Hillsborough, NJ Title Signature City, State  Bothlehem, PA  Completed by Title Signature Culty  Date	Na	me of Registered Wa	sta Hauter							Name o	Regish	ered Landfill				
Hillsborough, NJ  Completed by  Title  Signature  Late  Date			emolition		1		140,	TBD	*							
Completed by Title Signature Late Date				W455-10766					Date			DA				
Lillie Lazarevich Secretary 10-3-2012				1 800			150	LIBU C					_			
				1	retary	,		P	Ut	fac	n	1(		012		

# 1402

proj. #:

#### State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7)

							KECE	11/1			-
Date of Notification	101	11	Name of	Building Ov	vner/Opprator (2	2) .	00.	(VEI)			
110/10/2			-10	elia	Reyr	io(ds	2012 OCT -9	AM O. D.			
Agencies Notified  EPA	Type Notifical	tion	Street Add	dress			15000	411 4: 25		- 104	
DEP	Initial				ring B	rook Rai *	TOBESTOS (	ONTROL		-200	
☐ DOL	☐ Amend	ment		e, Zip Oode	own, a	J	ASBESTOS (	SING			
<b></b> Д ООН	_		Name of C	Contact				none Number			-
DCA	L Cancell	ation	Tu	lia	Reyno	Lds					550
			$\bigcirc$	FAC	CILITY INFORM	ATION					
Name of facility wh	nere abatement i	s taking p	lace (3)				Type of Facili				
House								1001 (K - 12)		V 48	
Street Address	prina	Boo	011	Del			1 Oth	ochapter 8 (Other or (Private/Comi gs./Homes, etc.			.)
City (5)			inty (6)	<u> </u>			Square Feet		Т	Bldg.	Age
Morrist	own		10111	r C		County Code (7) (State use only)	Current Use	(Prior if being de	emolis	had)	
Name of Monitoring				O	ASCM No.	I I Name of Analogo			-	-1007	
			- 1-6		AGOM/140.	Name of Abateme	Restoration (9)	on ll			
Street Address						Street Address	A			- 1417	
City, State, Zip Code							oksicle	ROI			
						City. State. Zip Cod	Cpsh, the	/			
Project Manager for I	Monitoring Firm	# :#w	10	hone Numb	per	Telephone Number	1 2000	License Nur	nber		-
Scheduled Start Date	(40)	75-1-			-	915 -453	5个人550	00113	3		
Schedules Staff Date	(10)	Sched	. Complet	ion Date (1	1)	Name of OSHA Mo	isonmen	tal			
Occupancy Status Du	uring Absternent	(Check o	nly one)			Street Address	-			i de l	
Facility closed/	vacated during e	ntire perio	od of abate	ement.		2333 R+ City, State, Zip Cod		]	The desired		
Describe:	formed outside o	of normal f	acility hou	Irs-		- Union, n		5			
Other-Describe Scope of Work (chec						- COMON, N	0 0/003	<i>y</i>			
Demoiltion		Renovation	n			П вито-и-		_/			
2 st or >3 If		160 sf or ≥				Full Containment w/ne Mini-enclosure	egative pressure	Glovebag p			
Location of	[	s location	normally	used solely				Non-friable	proce	dure	
asbestos-contai material to be	9	staff(12)	rance/cus	togiai	Description material (A	of asbestos-containing	Amount	e m	e	n	E
abated in facility	(13)	Yes	No	N/A	material (A	CIM)	(Specify:	SF or	a	c a	C
basement ra	ACTICICA				50 C	16005	soelb	le	1	P	1
							1.3000		ዙ	P	뭐
									H		卅
	-										
egistered Waste Haul	po latino	NIDE	Hauler II	Cu	bic Yards of We	iste Name of Registered	Landfill				
ity, State of O	1 NU 0	150	3378	Disposal Da	ite	G, R, O	. W.S				
ompleted by (Prifit or,				_TB		_ rully to	wn, PA				
Elvira M	ROA !	PRE	100	NIT	Signature EUU (1	a Mida		Date 10 - 2	-1	2.	

1601

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

## RECEIVED

Date of Notification (1) 10/02/2012				5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 -	of Buildinge A. Jor		ner/operator	r (2)	2012	OCT -	9 84 9	). F	•		
Agencies Notified Type	Notifica	ation		Stree	t Address arket Str				,						_
DOL An	nended nendme nergen	ent #_ cy (includir	ng	City, S	State, Zip lipsburg,	Code NJ (	)8865		0	e LILE	NSING		L.		_
	stificati ancellat			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	of Conta A, Jone					Telephon	e Number	•			_
<u> </u>			(0)	FAC	CILITY IN	FORM	IATION	T 7.	pe of Facility	(4)					
Name of Facility Where Abatem Private House	ent is i	aking Plac	e (3)						School (K-12	2)	K 1 0)				
Street Address 8 Market Street									Subchapter 8 Other (i.e., p homes, etc.)	rivate & c	ommercial	build	ings,		
City (5) Phillipsburg, NJ 08865								Sq	quare Feet	# of FI	oors	Blo	dg. A	ge	
County (6) Warren				Cou	nty Code	(7) (S	TATE	Cu	urrent Use (Pr	ior If bein	g demolish	ned)			
Name of Monitoring Firm Hired (8)	by Build	ding Owner		ASCM	No.		me of Abaten ck Restorat		Contractor (9) LLC	)					
Street Address						1.00000	eet Address Brookside								
City, State, Zip Code							y, State, Zip ( ndolph, NJ							obnos.	
Project Manager for Monitoring	Те	lephone	No.		ephone No. 3 933-2550	)		Licen 011	se No. 33						
Start Date (10) 10/13/12							me of OSHA S Environn				1				
Occupancy Status During Abate		(Check onl	y one)			- 270.00	eet Address 33 Rt 22 W								
Facility Closed/Vacated Duri						Cit	y, State, Zip (	Code						_	
Other - Describe: Scope of Work (Check all that a	(vlqq					Un	ion, NJ 070								_
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	FF:17		tenova emolit				Mini-En Gloveb	nclosu ag Pi	ment with Negure rocedure ted (*) and No			= 1			
			Locat										bate Ty	ment oe	
Location of Asbestos -Containing Material TO BE ABATED IN Facility (13)	(ACM)	Use Ma	ed Sole intena Custod Staff' (12)	ely by ince/ lial ?	Asbes (i.e.	stos C , ther su	Description of containing Ma mal systems rfacing, VAT er miscellane	aterial insula Γ, or	ation,	Amo (Spe SF or	cify	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A	TOL					230LF		77		H	-
basement area	X	+	TSI-					230LF		X		$\vdash$			
		1													
								_							
Name of Registered Waste Hau Nick Restoration LLC	iler			NJDEP Hauler II			bic Yards Waste	- 1 -	Name of Regi G.R.O.W.S	stered La	indtill				
City, State Randolph, NJ	Sity, State Randolph, NJ						sposal Date BD		City, State TulJytown.	Pa					
Completed By Elvira Mrda		Title Preside	nt			1-	Signature	7	Ucla		Date 10/02	/201	2		

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

RECEIVED

								- 1 - 34.0 (	Jul V	hem leet	Check	# 69	15	
Date of Notification (1)	10/3/12	35,253		Building n Cou		Operator (2)	20	12 000	-0 814					
	The second secon		-	ddress	ity			12 061	-9 AM	9:50			_	-
Agencies Notified	Type of Notificati	700		ewark	Ave	1								
[] EPA	[] Initial	"	) I N	CWant	110.		M	וכבוו	US CON	ATROL				
[] DEP	Notification	Ci	v. Sta	te, Zip C	ode			& LI	CENSIN	IG.				
[x] DOL	[] Emergency [x] Amended			City,		7306								
[x] DOH	Notification	No	me o	Contact				Teleph	one Numb	er				
[] DCA	Amend #6 [] Cancellation	1		iscart				O 500 A		7				
	11					TA INFORMATION		1.				-		<del></del>
			- (2)		ACILIT	YINFORMATION	Type of Fac	sility (4)						
Name of Facility When		ang Piac	æ (3)				[] Sc	hool (K-12	(Other th	nan K-12)				
Hudson County	Aumin. blug.	-					[] Sc x] St [] Ott	her (i.e. pr	ivate and c	nan K-12) commercia	l buildi	ngs,		
Street Address 595 Newark Ave	nue						no	mes, etc.	)					
393 Newalk Ave	ilue						Square Fee		of Floors		ldg. Ag	е		
City (5)		County				unty Code (7)	250000 Current Use	. v	13		50	- 74		_
Jersey City		Hudso	n		(S	TATE USE ONLY)	Office build		being derne	olisticaj		1352		
Name of Monitoring Fi	irm Hired by Buildir	g Owne	r A	SCM No		Name of Abatem	ent Contracto	r (9)						
Whitman Compa			(	0110			Jupiter Env	/ironme	ental Ser	rvices, I	nc.			
Street Address	33740.					Street Address								
7 Pleasant Hill F	Road						3 Lynn Cou	urt		- 10 - E-W - 1000 H-			-24	-
City, State, Zip Code	E40					City, State, Zip C	<sub>loge</sub> Lincoln Pa	rk NI	07035					
Cranbury, NJ 08	3512	Tolor	hono	Number		Telephone Numl		111, 140	07000	License	Numbe	er		-
Project Manager for M Kevin Lovely	ionitoring Firm			-5858	1		973-709-0	200				08	52	
Scheduled Start Date	(10) Sched		11.52.1107	Date (11)	$\dashv$	Name of OSHA	Monitor					1010		
1/20/1:			31/1			1	J & S Env	ironme	ntal Lab	oratorie	s, LL	C		_
Occupancy Status Du	ring Abatement (CI	neck only	one)			Street Address		00.141	•					
[] Facility Close	ed/Vacated During erformed Outside o	Entire Pe	eriod (	of Abatem	ent		2333 Rout	e 22 vv						
Desc		Homma	i acii	ty Hours		City, State, Zip C		07003						
[X] Other – Des	cribe: partially vaca	ted					Union, NJ	07005					185	
Scope of Work (Check	k all that apply)						[v]	Full Con	tainment w	vith Negativ	e Pres	Sure	0	
11 Demalities				[X]	Renov	vation	[x] [x]	Mini – E		nai Nogaai	01100	Juic		
[] Demolition [] ≥3 sf or ≥3 lf				[74]	1.0110		[]	Gloveba	g Procedu	re				
[x] ≥160 sf or ≥2	260 If						[x]	Non – F	riable Proc	cedure				
		2.27	Loca	110000000000000000000000000000000000000		Deed	winting of	10				bate ype	men	ıt
Locatio	n of		mally Solely				ription of - Containing			Amount	R	R		E
Asbestos – C				ce/Cus		Mater	rial (ACM)			(Specify	E	E	N	N
Material (	(ACM)	todi	al Sta	ff (12)			mal systems			SF or LF)	N C	0.00	C	C
TO BE A			_	-			surfacing, VAT niscellaneous)				ĺv		P	ō
In Fac (13		Yes	No	N/A		or other in	nocenario de j				A	1.0000	1000	S
					<u> </u>		//- he peror	od) *	- 3	3300 SF	L X	+	U	U
Various - CJP cour		-	X	-	Floor	er/spray-on ceiling	(to be scrap	eu)	500	200 SF	×	-		
Various – courtroor	ns, offices	+	<del>  ^-</del>	-	1 1001	tile	-							
		-			-									
Name of Registered V	Vaste Hauler	N.	IDEP	Waste	C	Cubic Yards	Name of I							
Jupiter Environr				D No.	0	Of Waste 10	Minerva	a Landi	ill					
			04782	-		Disposal Date	City, State	9				-		-
City, State Lincoln Park, N.	I					10/31/12	Wayne		OH					
Completed By (Print of		Title				Signature	) /	-		Date				
Pane Repic		Ger	eral	Manag	ger	A				10/3	/12			
10000000000000000000000000000000000000						172							-	

\*Note: Work to occur in phases. First phase is 190 SF of ceiling at CJP courtroom. Amend 1, 4/13/12: Phase 2 involves removal of 24 SF of ceiling at Room 406. Amend 2, 5/11/12: Phase 3 involves removal of 1100SF VAT. 6/8/12: Phase 4 involves removal of 400 SF plaster at CJP 107.

#### NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60-7 and 12:120-7) RECEIVED Check # 6914 Name of Building Owner/Operator (2) Date of Notification (1) **UMDNJ** 2012 OCT -9 AM 9: 54 10/3/12 Street Address Type of Notification Agencies Notified 30 Bergen Street [x] EPA ASBESTOS CONTROL & LICENSING Initial Notification DEP City, State, Zip Code [] [] Emergency Newark, NJ 07101 DOL Amended Telephone Number Notification DOH Name of Contact Amend #1 DCA [x] [] Cancellation Joseph Conway **FACILITY INFORMATION** Type of Facility (4) School (K-12)
Subchapter 8 (Other than K-12)
Other (i.e. private and commercial buildings, homes, etc.) Name of Facility Where Abatement is Taking Place (3) UMDNJ - Power Plant Street Address 295 Norfolk St. Bldg. Age # of Floors Square Feet ~ 70 20000 County Code (7) County (6) Current Use (Prior if being demolished) City (5) (STATE USE ONLY) Essex Newark Power plant Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner ASCM No. Jupiter Environmental Services, Inc. 00003 TTI Environmental, Inc. Street Address Street Address 3 Lynn Court 9 East Stow Road City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035 Marlton, NJ 08053 License Number Telephone Number Telephone Number Project Manager for Monitoring Firm 00852 973-709-0200 856-985-8800 Howard Baldwin Name of OSHA Monitor Sched. Completion Date (11) Scheduled Start Date (10) J & S Environmental Laboratories, LLC 12/31/12 4/23/12 Street Address Occupancy Status During Abatement (Check only one) 2333 Route 22 West Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code Describe: Union, NJ 07083 Other - Describe: partially vacated Scope of Work (Check all that apply) Full Containment with Negative Pressure [x] Mini - Enclosure [x] Renovation [] Demolition Glovebag Procedure [] [x] Non - Friable Procedure ≥3 sf or ≥3 lf [] ≥160 sf or ≥260 lf Abatement Is Location Type Description of Normally Used Amount R R E E Asbestos - Containing Solely by E N N (Specify Ε Location of Material (ACM) Maintenance/Cus C Asbestos - Containing C SF or LF) M P (i.e., thermal systems todial Staff (12) 0 A L Material (ACM) insulation, surfacing, VAT, P 0 TO BE ABATED ٧ or other miscellaneous) S S R Α In Facility N/A No Yes U (13)X 550 SF Header/valve insulation Power plant - basement & mezza. 300 LF X pipe insulation Power plant - basement & mezza. X Name of Registered Landfill NJDEP Waste Cubic Yards Name of Registered Waste Hauler Minerva Landfill Of Waste Hauler ID No. Jupiter Environmental Services 04782 Disposal Date City, State City, State Waynesburg, OH 10/31/12 Lincoln Park, NJ Date Signature Title Completed By (Print or Type) 10/3/12 General Manager Pane Repic

Amendment #1, 10/3/12: Quantity of pipe insulation has increased. One phase of the work is scheduled to start on 10/22/12 with anticipated completion about 10/31/12. It includes removal of 160LF (Subchapter 8 project) of pipe insulation from basement.

### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60-7 and 12:120-7) Prot original Check # 6716 Name of Building Owner/Operator (2) Date of Notification (1) 4/9/12 UMDNJ 2812 OCT -9 AM 9: 58 Type of Notification Street Address Agencies Notified 30 Bergen Street [x] EPA Initial ASSESTOS CONTROL [] DEP Notification City, State, Zip Code [] Emergency & LICENSING DOL Newark, NJ 07101 Amended Notification DOH [X] Telephone Number Name of Contact DCA [x] [] Cancellation Joseph Conway **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12)
Subchapter 8 (Other than K-12)
Other (i.e. private and commercial buildings, homes, etc.) UMDNJ - Power Plant Street Address 295 Norfolk St. Square Feet # of Floors Bldg. Age 20000 ~ 70 County Code (7) County (6) City (5) (STATE USE ONLY) Current Use (Prior if being demolished) Essex Newark Power plant ASCM No. Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner Jupiter Environmental Services, Inc. 00003 TTI Environmental, Inc. Street Address Street Address 3 Lynn Court 9 East Stow Road City, State, Zip Code City, State, Zip Code Marlton, NJ 08053 Lincoln Park, NJ 07035 Telephone Number License Number Telephone Number Project Manager for Monitoring Firm 973-709-0200 00852 856-985-8800 Howard Baldwin Name of OSHA Monitor Sched. Completion Date (11) Scheduled Start Date (10) J & S Environmental Laboratories, LLC 12/31/12 4/23/12 Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 2333 Route 22 West Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code Describe: Union, NJ 07083 Other - Describe: partially vacated Scope of Work (Check all that apply) Full Containment with Negative Pressure [x] Mini - Enclosure Renovation [x] 11 Demolition Glovebag Procedure [x] ≥3 sf or ≥3 If [] Non - Friable Procedure ≥160 sf or ≥260 lf Abatement Is Location Description of Type Normally Used Amount R E Solely by Asbestos - Containing R E Location of (Specify E E N Maintenance/Cus Material (ACM) N Asbestos - Containing SF or LF) M P C C todial Staff (12) (i.e., thermal systems Material (ACM) 0 Α insulation, surfacing, VAT, Α TO BE ABATED V P or other miscellaneous) In Facility S A R S N/A Yes No (13)550 SF X Header/valve insulation Power plant - basement & mezza. X 20 LF X х pipe insulation Power plant - basement & mezza. Name of Registered Landfill NJDEP Waste Cubic Yards Name of Registered Waste Hauler Hauler ID No. Of Waste Minerva Landfill Jupiter Environmental Services 04782 Disposal Date City, State City, State 5/15/12 + Waynesburg, OH Lincoln Park, NJ Date Signature Completed By (Print or Type) Title 4/9/12 General Manager Pane Repic

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

RECEIVED Check # 6916

Date of Notification (	(1)	- 2 - 4	Nam	ne o	f Buildir	ng Owr	ner/O	perator (2)				- 1 V Laz LA		(#)	591	3
	10/3/12		Ro	ma	n Aba					2012 OC	7-9	AM 9: 6				-
Agencies Notified [ ] EPA [ ] DEP	Type of No		72	Ric	ddress dgevie		err.	ĕ	17			CONTRO VSING				
[X] DOL	[] Amer				ate, Zip e, NJ		70			~ [	.10[]	ADING				
[X] DOH	Notifi	cation	Nam	ne of	f Contac	ct	97			Telephone	Numb	er			-	
[] DCA	[] Cance	ellation	Ro	ma	n Aba	ashki	n									
			1	īi.		FACIL	LITY	INFORMATION					*****		-	_
Name of Facility Who Residence	ere Abatemen	t is Taking	Place	(3)					Type of Fa	cility (4) chool (K-12) ubchapter 8 (C other (i.e. priva	ther th	an K-12) commercial	buildi	nas		
Street Address 72 Ridgeview	Γerr.								Square Fee	omes, etc.)	Floors		g. Age			
City (5)		Cou	nty (6)	1				ty Code (7)	2000	2		50	55			
Wayne		Pa	ssaid	;		(	STA	TE USE ONLY)	Current Us residence	e (Prior if bein	g dem	olished)				
Name of Monitoring	Firm Hired by	Building O	wner	A	SCM N	0.		Name of Abatem			al Se	rvices, Inc	o.			
Street Address							11	Street Address								
0" 01 1 7" 0 1							41		3 Lynn Co	urt	-					-
City, State, Zip Code	l.							City, State, Zip C	Lincoln Pa	ark NJ 070	035					
Project Manager for	Monitoring Fire	m T	elepho	one	Numbe	r		Telephone Num		•		License No		08	52	
Scheduled Start Date 1	e (10) 0/13/12	Sched. Co 10/18/		ion (	Date (1	1)		Name of OSHA	Monitor J & S Env	ironmenta	l Lab	oratories,	LLC			
Occupancy Status D	uring Abateme	ent (Check	only o	ne)	f Abata	mont	11	Street Address	2222 D	4- 22 \//00				1		
[] Abatement F	Performed Out scribe:	side of No						City, State, Zip C	2333 Rou <sup>Code</sup> Union, NJ						×	
	scribe: Partial						Ш	· · · · · · · · · · · · · · · · · · ·							5 B	
Scope of Work (Chec [] Demolition [] ≥3 sf or ≥3 li [x] ≥160 sf or ≥	f	у)			[]	Reno	ovatio	on	[x] [ ] [X]	Full Contain Mini – Enclos Glovebag Pr Non – Friab	ure ocedu	re	Press	sure		
			Is Lo					Door	ninting of				Ab Ty		mer	ıt
Locati Asbestos – Material <u>TO BE A</u> In Fa	IV.	todial	ely b	by e/Cus			Asbestos Mater (i.e., then insulation, s	ription of  — Containing ial (ACM) mal systems surfacing, VAT iscellaneous)			Amount (Specify SF or LF)	REMOVAL	REPAIR	N C A P	E N C L C S U	
Basement				Х	VA <sup>-</sup>	Т	****			6	00 SF	X		_		
	Name of Registered Waste Hauler Jupiter Env. Svc.							ic Yards /aste 3		Registered Lar a Landfill	ndfill					
City, State							osal Date	City, State								
Lincoln Park, N	1 70	tle			L	10/	31/12   Signature /	vvayne	sburg, OH		Date					
Completed By (Print Pane Repic			al I	Mana	ger		Signature	2 6	a		10/3/1	2				
ASB-41								. /			1.00					

**JUN 95** 

#### NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 7:26-2.12)

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211	UF	IVE
	-	VEL

Date of Notification (1) 10/1/2012						Name of Build Borough of Sw		Operator (2)	2012	OCT.	.0	1 9: 41 1 TROL	
Agencies Notified		Notification	Туре			Street Address	3		4		JAI	9: 4	0
<del>1000 000 000 000 000 000 000 000 000 00</del>		001 21 111				1500 Kings Hig	ghway		ASBE	STO	· •		9
() EPA () DEP		(X) Initial No () Amended		nn.		City, State, Zip	Code		6	1 100	2 CU	ITROI	
(X) DOL		( ) Cancelle		)II		Swedesboro, N				LICE	NSIN	C WOL	.
(X) DOH		( ) 54.155.15				Owcucsboro, i	10 00000					u ,	Ph.
() DCA						Name of Conta	act		Tel. No	umber		. 6	20-
						William Goody	vin						
				FACILI	TY IN	FORMATION							
Name of Facility Where At	patement is T	aking Place (	<u>3)</u>			Type of Facility							
Borough Hall						( ) School (K-1		on K 12)					
Street Address						(X) Other (i.e.	nrivate & c	commercial bld	as hon	nes etc			
1500 Kings Highway						(74) Guioi (	pintato a c	orranorolar ora	90., 1101.	,			
						Sq. Feet_~10,	000	# of F	loors	2.5			
City (5)	County (6)		County C		- 100								
Swedesboro	Gloucester		(State Us	se Only)		Bldg. Age 97			A alasia	istration	Dida		
		- 751				Current Use (p	rior it being				i blag	_	
Name of Monitoring Firm H	Hired by Bldg	. Owner (8)	ASCM N	<u>0.</u>				Name of Co					
Street Address					-	Street Address		I KA Industria	al Servic	es LLO			
Street Address						800 Billingspor							
						City State, Zipo	Code						
Project Manager for Monito	oring Eirm	Tolophono I	Mumbor			Paulsboro, NJ Telephone Nur			Licens	e Numb	er		
Project Manager for Monito	ject Manager for Monitoring Firm Telephone Number					856-224-4392	TIDEL		00857		<u>C1</u>		
						000 224 1002			00001				
Scheduled Start Date (10)		Scheduled (	Completion	Date (11)		Name of OSH	A Monitor						
10/20/2012		10/20/2012				K A Industrial	Services, L	LC					
Occupancy Status During						Street Address							
( ) Facility Closed/Vacated						800 Billingspor	t Rd						
(X) Abatement Performed	d Outside of I	Normal Facility	y Hours -			Oit Otata 7ia	Onda						
Other - Describe						City, State, Zip Paulsboro NJ							
Other Describe						r adisbolo No	30000						
Source of Work (Check all	that apply)										y	VIII. VIII.	
() Demolition (X) Renov									– .				
() Large Proj. (>160 SF or							Minor Proj	. (<25 SF or <	10 LF A	CM)			
(X) Full Containment with Location of Asbestos-		ation Normally		Description		bag Procedure	Amount (	Specify SF or	I F\	Ahate	ment Ty	ne	
Containing Material (ACM)		by Maint./Cus				ns insulation,	Amount	opening of or	_, ,	/ Louic	mone ry	<u> </u>	
Facility (13)	Staff?		, coului	surfacing						1			50V 20
	YES	NO	NA	misc.)						Rem.	Rep.	Encap E	<u>Enclose</u>
Various small areas on firs	st	X		VAT and	Masti	С	~150 SF			X			
floor													
											<del>                                     </del>	-	
Name of Reg. Waste Haul	er	N IDEP Was	te Hauler I	ID#	_	Cubic Yards of	Waste		Name	of Reg.	Landfill		
Name of Reg. Waste Hauler Waste Management, Inc.  NJDEP Waste Hauler 17273				<u> </u>		<1	110010				unty La	ndfill	
Tracto management, me									WATER SAME				
City, State								Disp. Date			City, Sta		
South Harrison, NJ								Various		5	South Ha	arrison, N	11
						0:		l	Data				
Completed by (Print or Type	<u>be)</u>	<u>Title</u>				Signature			<u>Date</u>				
ANDREW GREEN		MANAGER	- KAIS			11	1 1		10/1/2	012			
, A DINEYY OINELIY			.0.10			( I mal	MA	par					
						Site Ø	perations S	Supervisor					
						//							
						1		1					
						-4-11-12-2-2-2-2							

Mail to: NJDEP-DSHW-BRRTP 401 E. State St., PO 414 Trenton, NJ 08625-0414 Telephone 609-984-6620

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

MO 20252142898

Date of Notification (1) 10/4/12	4				f Building (		Operator	(2)	1 6 6	UE	AE	D		
Agencies Notified	Type Notification		$\dashv$	Street A				- 20	ll2 nr	7 0				
☐ EPA	× Initial		, [	801-8	17 Ceda		i			T-9 /	IM 9	: 54		
DEP DOL	Amended Amendment		_		ate, Zip Co on Nj 08			AS	BES	TOS CO	ONTI	201		
DOH DCA	Emergency justification)				f Contact	_			Te	ephone Nu	in ber		A	
X DCA	Cancellation				Guzma		TON				_	0	V	
Name of Facility Where	Abatement is Takir	g Place (3)		FACI	LITY INFO	DRIVIA	ION	Type of Facility	(4)			-05100		
Residential Street Address								School (K- Subchapte		er than K	12)			
801-817 Cedar St.								Other (i.e. etc.)				dings	home	es,
City (5) Riverton								Square Feet 1000	2	f Floors		3ldg. <i>1</i> 53	\ge	
County (6) Burlington	100000000000000000000000000000000000000				Code (7) USE ONLY)			Current Use (Pr	ior if be	ing demolis	shed)			
Name of Monitoring Firm	n Hired by Building	Owner (8)		ASCN	Л No.	-	Name	of Abatement Co	ntracto	(9)				
DVD Environmenta	ıl						- Caralana Maria	Corporation						
Street Address PO Box 2152								Address arnes St.						
City, State, Zip Code Cliffside Park, Nev	v Jersey 07010							tate, Zip Code son NJ 0750	1					
Project Manager for Mor Tim Donohoe			Telepho 212-26	ne No. 30-9818			one No. 236651		License 01117	No.				
Start Date (10) 10/13/12	Schedule 10/13/1		npletion	Date (11)		5325	of OSHA Monitor Corporation							
Occupancy Status Durin	g Abatement (Che							Address						
Facility Closed/Vac Abatement Perform								arnes St.						
Abatement Perform Other – Describe:	ned Outside of Norr	nal Facility	Hours					tate, Zip Code rson NJ 0750	1					
Scope of Work (Check A	All That Apply)	(4000)												
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enova emolit				3	Full Containm Mini-Enclosur Glovebag Pro	e cedure					
		Т.			Ι			Non-Exempte	d (*) ar	d Non-Fria	ble Pro		emen	t
Location	n of	N	Locati ormal	ly		De	escription	of					/ре	
Asbestos-Containing TO BE AB	Material (ACM)		d Sole			os Con	taining M	aterial (ACM)	1000	mount	_		Щ	ш
In Faci	lity	Custo	odial 8 (12)	Staff?	(i.e.	surfa	cing, VA			Specify F or LF)	Remova	Repair	caps	Enclosure
(13)		Ves	No	N/A		other	miscellan	eous)			val	air	Encapsulate	sure
Basme	Yes Basment					Pipe	e Insula	tion		8	Х		Х	
Name of Registered Wa	ste Hauler		IN	JDEP W	/aste	Cubic	Yards	Name of	Registe	ered Landfi				
L&C Europa Co Inc.			H	lauler ID 3125		of Wa		(1000km)	2010000 <del>0</del> 201000	erprises I				
City, State 9000 Minerva Rd.						Dispo 10/14	sal Date 4/12	City, Sta Wayne		ОН				
Completed by	Completed by Title						Signature	/ 1	7	D	ate			
Marjan Kasapinov		Presid	dent				5 (	(	150	£ 1	0/4/1	2		



SB-41 AY 11			7,04			os licensure exempt			1	-		_	
Completed By (Print or Type)  John Tardy  Title  Senior Project Mana						Signature	acly	Dat (	) S	5	2		
City, State Hackettstown, NJ						10/18/12	City, State Waynesbur	g, OH					
Global Waste Indus	tries Inc		-	NJ-22		Waste 3		terprises Inc					
Name of Registered Waste Hauler NJDEF						Cubic Yards of	Name of Regist						
					100								
								21				[	
Battery Room					VAT			400 SF				1	
IN Facility (13)		Yes				surfacing, VAT, other miscellaned		SF or LF)			sulate		
Location of Asbestos-Containing Material (ACM)  TO BE ABATED  No Used Maint			S Loca Norma ed Sola intena	ally ely by ance/		Description of bestos Containing Material (ACM) i.e., thermal systems insulation,		Amount (Specify	A Removal	Repair	ent Encapsulate	У	
Scope of Work (Check all that apply)  □ ≥3 sf or ≥3 If □ ≥160 sf or ≥260 If □ Demolition					<ul> <li>☐ Full Containment with Negative Pressure</li> <li>☐ Mini-Enclosure</li> <li>☐ Glovebag Procedure</li> <li>☑ Non-Exempted (*) and Non-Friable Procedure</li> </ul>								
Abatement Performed Outside of Normal Facility Hours - D Time of Abatement: 9AMAM  Constructive (Charles II that each)					scribe	City, State, Zip Code LIC, NY 11101							
☑ Facility Closed/Vacated During Entire Period of Abatement						10 59 Jackson Avenue							
10 /15 / Occupancy Status During		10 neck only		8_ /	12	Testor Tech Street Address	nan Matri						
Start Date (10) Scheduled Complet						Name of OSHA M	onitor					V	
					6-840-8800 718-605-		6 00774						
Project Manager for Monitoring Firm Telepho					No.	Telephone No.		License No.					
Moorestown, NJ						Staten Island							
City, State, Zip Code						47 Foster Ro						_	
Street Address 1253 North Church Street							Street Address					15.31	
TTI Environmental, Inc. 297					17	JVN Restoration Inc						_	
Name of Monitoring Firm Hired by Building Owner (8) ASCM						Name of Abatement Contractor (9)						-	
Bergen													
					nty Code (	7)(STATE USE ONLY) Current Use (Prior if being demolished)			40		_		
City (5) Fort Lee							Square Feet 25000	# of Floors	В	ldg. / 40	\ge		
502 Main Street						homes, etc.)							
Street Address						☐ Subchapter 8 (Other than K-12) ☐ Other (i.e., private and commercial buildings,							
Verizon						☐ School (K-12)							
Name of Facility Where	Abatement is Ta	aking Plac	e (3)				Type of Facility	(4)			- 6 - 6		
				FA	CILITY	NFORMATION				-		-	
(NJAC 5.25-6)	☐ Cancellation				ex Baylo	5.3		relephone (vui)					
					New York, NY 10036  Name of Contact  Telephone Number							_	
☑ DHSS Amendment #					City, State, Zip Code								
☑ EPA ☑ Initial ☑ DOLWD ☐ Amended						SESTOS CO	NTO	20.					
Agencies Notified Type Notification					Name of Building Owner/Operator (2)  Verizon  Street Address  1095 6 <sup>th</sup> Avenue  City, State, Zip Code  New York, NY 10036								
	05 / _	12		Ve	rizon		4	42 OCT -9 1	DM ,				
Date of Notification (1)				Nam	e of Buildi	ng Owner/Operator (	(2)	"LUE!	N Pro	D			
									1/1	- pre			