State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:46) WILL SCHOOL Check School School State of New Jersey

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Frank	Meyers
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Date of Notification (1)					Name	e of Buildin	ng O	wner/Operator (2))		2	1	<u> </u>	الراك
10 /	6/	14			NJ	Departn	nent	of Education	-9 PM 4:	773 Check	#				
	ype Notific	cation			Stree	t Address			- 9 Pm 4:	07					-
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	Amende				City,	State, Zip	Code	e P	US CONTR	ÛI		_	-	_	
DHSS □ DCA □	Amenda Emerge					nton, N.		625	TOS CONTR ICENSING						
(NJAC 5:23-8)	justifical		iciuain	9		of Conta				Telephone I	Number				
The state of the s	Cancella				All	wyn L. B	Bask	in							
100					FA	CILITY II	NFO	RMATION					110		
Name of Facility Where Aba	atement is	Taking	Place	(3)					Type of Facility	(4)	115-117-	-			-
Marie Katzenbach Sc	hool for	the D	eaf						School (K-12	373					
Street Address			75,200		70		-		Subchapter 8	Other than I	K-12)		2761		
320 Sullivan Way							68		Other (i.e., p homes, etc.)	rivate and con	nmercial	bui	lding	JS,	
City (5)			W			10.00			Square Feet	# of Floors		Bld	g. A	ae	
Trenton									=				-	J-	
County (6)					Cour	nty Code (7)(ST	ATE USE ONLY)	Current Use (Pr	ior if being der	nolished)	_		
Mercer									School	J		,			
Name of Monitoring Firm Hi	red by Bui	lding C	Owner	(8)	ASCM	No.	Na	ame of Abateme	ent Contractor (9)				_		
USA Environmental N	lanagem	ent, I	nc.					AbateTech, Ir							
Street Address							St	reet Address		300	-		- 32		
344 West State Street							;	30 Maple Ave	. PO Box 25						
City, State, Zip Code				-			-	ty, State, Zip Co							
Trenton, NJ 08618								Lumberton, N							
Project Manager for Monitor	ing Firm		-	Tel	ephone	No.	1	lephone No.		License No	D.				
William Weisgarber, J	lr.			6	09-656	-8101	(609-265-2107		00529					
Start Date (10)		Sched	uled C	ompl	etion Da	te (11)	Na	me of OSHA M	onitor			_			
10/_15_/_	14	1	0_/	_1	6 /	14	E	EMSL Analyti	cal						
Occupancy Status During Al	batement (Check	only	one)			Str	reet Address					_		
☐ Facility Closed/Vacated □					ement		100000	200 Route 130) North						
Abatement Performed Ou	utside of N	ormal	Facility	y Hou	ırs - Des	cribe	_	y, State, Zip Co					-		
Time of Abatement:	AM	PN	Λ/	_PM	١	AM	2000	Cinnaminson							
Scope of Work (Check all that	at apply)								,				_		
[2] >3 of or >2 If			N D.		i de la compania del compania del compania de la compania del compania de la compania de la compania del compania de la compania de la compania de la compania del compania				ainment with Neg	ative Pressure	Э				
\leq \geq 3 sf or \geq 3 lf \leq \geq 160 sf or \geq 260 lf			⊠ Re □ De	nova: moliti				☐ Mini-Encl	osure Procedure						
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				Loca							A	bat	teme	ent T	уре
Location of Asbestos-Containing Mat	torial (ACA	a.		lorma d Sol	ally ely by			Description of			2	3	Z	Ш	ш
TO BE ABATE		n)	Ma	intena	ance/			Containing Mat ermal systems in		Amount (Specify	Seriova		Repair	nca	nclo
IN Facility		1	Cust	odial (12)	Staff?	(5	surfacing, VAT,	or	SF or LF)	JV di		₹	Encapsulate	Enclosure
(13)			Yes	No	N/A		ot	her miscellaned	ous)					ate	a l
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Name of Registered Waste H	lauler			4.000	NJDEP V	Mark London	555555	oic Yards of	Name of Regist	ered Landfill		-	_		
AbateTech, Inc.					18750 tauler		Wa 1		G.R.O.W.S.	Landfill					
City, State					10100	4000		posal Date	City, State			-			-
Lumberton, NJ								0/16/14	Tullytown, I	PA					
Completed By (Print or Type)		Title		-				Signature	1		Date	,			\dashv
Jennifer Piraine		Or	erati	ons	Coordi	nator		(22	106		10	11	1	4	
CD 44		<u> </u>			-			Ly	IVVI		' /	0	11	1	

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

RECEIVED

Date of Notification (1)					Nam	e of Buildir	ng Owner/Operator (2)			•		-
9 /	30 /	14	4		Ne	wark Co	mmunity Health	Centers, Inc.14	[ab]#+206-	45pa_c	heçk	#	
Agencies Notified	Type Notif	fication			Stree	t Address		A . 1 . 2		le .	-		
⊠ EPA	☐ Initial				74	1 Broadv	vay	ASS	ESTOS C	ONTR	OL		
☑ DOLWD		100			City,	State, Zip	Code		LICEN,	SHING			
☑ DHSS	Amend					wark, NJ							
☐ DCA (NJAC 5:23-8)	☐ Emerge justifica		ncludin	g		e of Contac			Telephone I	Number			
(10,10,00,00)	☐ Cancel				0.0000000000000000000000000000000000000	siness C	5.7		releptione	Varioci			
					FA	CILITY II	NFORMATION			-			
Name of Facility Where				e (3)				Type of Facility	(4)			0	
Newark Communit	ty Health C	enter						School (K-12					
Street Address							-	☐ Subchapter 8 ☑ Other (i.e., p			منامانييط	~~	
741 Broadway								homes, etc.)		imerciai	Dullali	gs,	+1
City (5)								Square Feet	# of Floors	T	Bldg. /	Age	-
Newark				12				•				-3-	
County (6)	 				Cou	ntv Code (7)(STATE USE ONLY)	Current Use (Pri	or if being der	nolished)		-
Essex					5754 610303		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Health Cent			,		
Name of Monitoring Firm	n Hired by Bu	ildina (Owner	(8)	ASCM	No	Name of Abateme						
Environmental Co		-		(0)	7.10011		AbateTech, li	CACHE SCIOCHOLIMAN ENGINEERING IN COMPANY					
Street Address							Street Address						
120 North Warren	Street						I souther their termination	DO Pay 25					
City, State, Zip Code	Olicot						30 Maple Ave						
Trenton, NJ 08608													
Project Manager for Mor	itorina Eirm			17-1		N	Lumberton, N	IJ U8U48	1				
Ryan Broadwater	iitoring Filin				ephone		Telephone No.		License No).			
Start Date (10)		-				2-4200	609-265-2107		00529				
	14/	100			otion Da	ate (11) 14	Name of OSHA M EMSL Analyti	277777					
Occupancy Status Durin	g Abatement	(Chec	k only	one)-			Street Address						
☐ Facility Closed/Vacat	ed During En	tire Pe	riod of	Abate	ment		200 Route 13	0 North					
Abatement Performed							City, State, Zip Co	ode					-
Time of Abatement: 7	7:00AM-3:30	<u>)</u> PM/	P	M	AM		Cinnaminson						
Scope of Work (Check a	Il that apply)							,					
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 	12.75			enovat emoliti			☐ Full Cont ☐ Mini-Encl ☐ Glovebag	ainment with Neg osure Procedure	ative Pressure	Э			
						,		mpted (*) and Nor	n-Friable Proc	edure			
				Loca Norma						P	batem	ent T	Гуре
Location Asbestos-Containing		NA)		ed Sol		Acho	Description of stos Containing Mat		A	7	7 Z	四四	m
TO BE ABA	ATED	,	25000	intena			., thermal systems i		Amount (Specify	Kemoval	Repair	Encapsulate	Enclosure
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(13)			Yes	No	N/A	1	other miscellaned	ous)				ाँ वि	2.50
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		24					19						
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Name of Registered Was	te Hauler			_	JDEP \	Nasta	Cubic Yards of	Name of Regist	ered Londfill		77		
AbateTech, Inc.	.5 1 144101			1955	lauler I		Waste	G.R.O.W.S.					
					18750)	20		Lanunn			our rec	
City, State Lumberton, NJ							Disposal Date	City, State					
000000000000000000000000000000000000000							10/10/14	Tullytown, I	PA				
Completed By (Print or Ty	ype)	Title					Signature	- K		Date	122	1,.	1
Jennifer Piraine		0	perati	ons (Coordi	nator		\mathcal{M}		. 4	30	114	t
SB-41						200		71					
AY 11		* L	Do not	use th	is form	for asbest	os licensure exempt	ed activities.					

NO CK

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

Date of Notification (1)				Name	e of Buildin	g Owner/Operator (2)	1	40	TV	FI	7
10 / 1	/	14		Fe	ederal Av	iation Administra	ation / Job #1	1409-4815 CI	heck#			
	pe Notificatio	n		Stree	t Address		*	2017	-1 -9	PM	1.	na
	Initial			FA	A Techni	ical Center	944 ft	Action			4.	CO
	Amended			City.	State, Zip	Code		5 & L	TUS	COL	7 12	
☑ DHSS	Amendment	_				y International A	irport N I 0840	, & L	LICEN	CUM	IR	OL
	Emergency		ıg					J		21H	G_{-}	1673
(NJAC 5:23-8)	justification)				e of Contac	ot .		Telephone No	umber			
	Cancellation	00-2			b Cook							
Name of Facility Where Abat	ement is Tak	ing Plac	a (3)	FA	CILITY IN	NFORMATION	Type of Facility	(4)				
William J. Hughes Tec		ing i iac	C (0)				School (K-12	22/				
	ii Center					***************************************	Subchapter 8		-12)			
Street Address							Other (i.e., pr			uilding	js,	
Building #162						34	homes, etc.)			2.5	\$ 70	
City (5)							Square Feet	# of Floors	BI	dg. A	ge	
Atlantic City												
County (6)			80	Cou	nty Code (7)(STATE USE ONLY)	Current Use (Pri	or if being dem	olichad)	-		
Atlantic				Jood	my bode (INGTATE OOL ONLTY			olisileu)			
	ad but During	. 0	/0\ T	1000	N.	The state of	Technical C					
Name of Monitoring Firm Hire	23 837	Owner	(8)	ASCM		Name of Abateme						
Health & Safety Service	es			117		AbateTech, Ir	nc.					
Street Address						Street Address					,	
318 12 th Street						30 Maple Ave	. PO Box 25					
City, State, Zip Code						City, State, Zip Co				-		
Hammonton, NJ 08037												
			1			Lumberton, N	13 08048					
Project Manager for Monitorin	ng Firm		-	phone	-	Telephone No.		License No.				
Jim Proctor			6	09-704	-8850	609-265-2107		00529				
Start Date (10)		eduled (Comple	tion Da	ate (11)	Name of OSHA M	onitor					
_9 / _26 / _1	4 (-	10	/ _3		_14	EMSL Analyti	cal					
Occupancy Status During Ab	atement (Che	ck only	one)			Street Address	-110:				-11-11-11-1	
☐ Facility Closed/Vacated D				ment		200 Route 13	North					
Abatement Performed Out					scribe							
Time of Abatement:						City, State, Zip Co						
			_			Cinnaminson	, NJ 08077					
Scope of Work (Check all tha	t apply)										- 2	
☐ ≥3 sf or ≥3 lf		Мρ	enovat	on			ainment with Neg	ative Pressure				
≥160 sf or ≥260 lf			emolitic			☐ Mini-Encl	osure Procedure					
2				211			npted (*) and Nor	n-Friable Proce	dure			
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Location of		1.55	Norma			Description of			-	ateme		-
Asbestos-Containing Mate	erial (ACM)	Us	ed Sole	ely by	Ashe	estos Containing Mat		Amount	Re	Repair	Encapsulate	Enclosure
TO BE ABATED			aintena			e., thermal systems i	nsulation,	(Specify	Removal	pair	cap	clos
IN Facility		Cus	todial (12)	statt?		surfacing, VAT,		SF or LF)	ब	1	sula	enr.
(13)		7/	T .	T	-	other miscellaned	ous)				ate	
1 st Floor		Yes	No	N/A	-						_	_
		10		10	1111111111	e Panels		900 SF		Ш	Ц	
1 st Floor					Vibratio	on Damper Cloth		13 SF				
							an .					
Name of Registered Waste H	auler		N	JDEP \	Waste	Cubic Yards of	Name of Regist	ered Landfill				1
AbateTech, Inc.			H	auler II		Waste	G.R.O.W.S.					
				18750)	16						
City, State						Disposal Date	City, State					
Lumberton, NJ						10/31/14	Tuliytown,	PA				
Completed By (Print or Type)	Tit	le				Signature	h /		Date ,	1	i	
Gwendolyn Trumbetti		Operat	ions (Coordi	inator	(222 A	. 1	101	111	4	
ASB-41		- 63.41					(VVV)		101	11	1	
MAY 11		* Do not	use th	is form	for asbest	os licensure exempl) ted activities.		50			

NO CK

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



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Date of Notification (1) 9 /	29 /	14				g Owner/Operator (e of New Jersey		786 Check#				
Annaire Netice 4	TT N CC				V107.0			2014 007	~			
Agencies Notified ⊠ EPA	Type Notific	cation		100000000000000000000000000000000000000	t Address Box 771	8		2014 CCT -	9 PM	4:6	ĵ9	
□ DOLWD		ed						ASSESTOR	<u> </u>			-
☑ DHSS	Amendn	nent # <u>1</u>		1 2 3 7 2 2	State, Zip (ASDES 109 & LICE	COM	TRI	71	
☐ DCA		ncy (includir	ng		ing, NJ 0		NAME OF THE PERSON OF THE PERS	CE LICE	NSIN	Ġ	J L.	
(NJAC 5:23-8)	justificat	0.00		Name	of Contac	t		Telephone Nu	mber	4		
	☐ Cancella	ation		Am	anda Ra	dosti					-17	
				FA	CILITY IN	IFORMATION		1				
Name of Facility Where A				70 4 70			Type of Facility	27. 5				
The College of New	Jersey - R	коѕсое на	II Wes	ST.			School (K-1)	2) 8 (Other than K-1	12)			
Street Address								orivate and comm		ilding	15	
2000 Pennington Re	oad						homes, etc.		ioroiai bi	anding	,0,	
City (5)							Square Feet	# of Floors	BI	dg. A	ae	_
Ewing										-3	3-	
County (6)				Cour	nty Code (7)(STATE USE ONLY)	Current Use /Pr	rior if being demo	lichad)			
Mercer				Oou	ity Code (i	MOTATE OUL ONET)	College	nor it being derno	iisileu)			
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Name of Monitoring Firm		iding Owner	(g)	ASCM	NO.	Name of Abateme	, ,)				
USA Environmental	l					AbateTech, II	nc.					
Street Address						Street Address						
344 West State Stre	et					30 Maple Ave	. PO Box 25					
City, State, Zip Code	777					City, State, Zip Co	ode	***********				
Trenton, NJ 08618						Lumberton, N	IJ 08048					
Project Manager for Monit	toring Firm		Tele	phone	No.	Telephone No.		License No.				
William Weisgarber	1750		1		-8101	609-265-2107		00529				
vvniidiii vveisudi uei								00020				
		Schodulad	Section 1977									-
Start Date (10)08 /11 /		Scheduled 10	Comple		te (11)	Name of OSHA M	onitor					
Start Date (10)08/11/	14	10	Comple	tion Da	te (11)	Name of OSHA M EMSL Analyti	onitor					
Start Date (10) 08/11/ Occupancy Status During	14_ Abatement(10 (Check only	Comple / 31	etion Da	te (11)	Name of OSHA M EMSL Analyti Street Address	onitor cal					
Start Date (10) 08/	14Abatement(Comple / 31 one)	etion Da	te (11)	Name of OSHA M EMSL Analyti Street Address 200 Route 130	onitor cal 0 North					
Start Date (10) 08/			Comple / 31 one)— Abate ty Hour	ment rs - Des	te (11)	Name of OSHA M EMSL Analyti Street Address 200 Route 130 City, State, Zip Co	onitor cal 0 North					
Start Date (10) 08/11/ Occupancy Status During Facility Closed/Vacate Abatement Performed Time of Abatement:	Abatement (d During Enti Outside of N _AM		Comple / 31 one)— Abate ty Hour	ment rs - Des	te (11)	Name of OSHA M EMSL Analyti Street Address 200 Route 130	onitor cal 0 North					
Start Date (10) 08/	Abatement (d During Enti Outside of N _AM		Comple / 31 one)— Abate ty Hour	ment rs - Des	te (11)	Name of OSHA M EMSL Analyti Street Address 200 Route 130 City, State, Zip Co	onitor cal 0 North de , NJ 08077					
Start Date (10) 08/11/ Occupancy Status During Facility Closed/Vacated Abatement Performed Time of Abatement: Scope of Work (Check all	Abatement (d During Enti Outside of N _AM	10 (Check only ire Period of lormal Facility PM/	Comple / 31 .one)— F Abate ty Hour PM-	ment rs - Des	te (11)	Name of OSHA M EMSL Analyti Street Address 200 Route 130 City, State, Zip Co Cinnaminson	onitor cal North de , NJ 08077	gative Pressure				
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Start Date (10) 08/11/ Occupancy Status During Facility Closed/Vacated Abatement Performed	Abatement (d During Enti Outside of N AM- that apply)	10 (Check only, ire Period of lormal Facility PM/	Complet / 31 one) F Abate ty Hour PM- enovatiemolitics s Locate Norma	ment rs - Des	te (11) 14 cribe AM	Name of OSHA M EMSL Analyti Street Address 200 Route 130 City, State, Zip Co Cinnaminson Full Cont. Mini-Encl. Glovebag Non-Exer	onitor cal O North de , NJ 08077 ainment with Negosure procedure mpted (*) and No		Ab	ateme	-	
Start Date (10) 08/11/ Occupancy Status During Facility Closed/Vacated Abatement Performed Time of Abatement: Scope of Work (Check all ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing Materials	Abatement (d During Enti Outside of N AM- that apply) of Material (ACM	10 (Check only, ire Period of lormal Facility PM/	Complet / 31 one)— f Abate ty Hour PM- enovatite molitic s Locat Norma ed Sole	ment rs - Des	te (11) 14 cribe AM	Name of OSHA M EMSL Analyti Street Address 200 Route 130 City, State, Zip Co Cinnaminson Full Cont. Mini-Encl. Glovebag Non-Exer Description of stos Containing Mate	onitor cal O North de , NJ 08077 ainment with Negosure procedure mpted (*) and No	n-Friable Proced Amount	Ab		-	
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Start Date (10) 08/11/ Occupancy Status During Facility Closed/Vacated Abatement Performed Time of Abatement: Scope of Work (Check all ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing Materials	Abatement (d During Enti Outside of N AM- that apply) of Material (ACM TED	10 (Check only, ire Period of lormal Facility PM/	Complet / 31 one)— F Abate ty Hour PM- enovatic emolitic s Locat Norma ed Sole aintena	ment rs - Des	te (11) 14 cribe AM	Name of OSHA M EMSL Analyti Street Address 200 Route 130 City, State, Zip Co Cinnaminson Full Cont. Mini-Encl. Glovebag Non-Exer Description of stos Containing Mat., thermal systems is surfacing, VAT,	onitor cal O North de , NJ 08077 ainment with Negosure i Procedure mpted (*) and No ferial (ACM) nsulation, or	n-Friable Proced Amount	1		-	
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Pagencies Notified Separation Street Address Stre	Date of Notification (1)				Name	e of Buildin	g Owner/Operator (2)	ULIVE	المسأ			
	9 / 29 /	14	4		Th	e College	of New Jersey	/ Job #1407-47	86 Check#				
Mame of Facility Where Abatement is Taking Place (3)	Agencies Notified Type Not	ification	}		Stree	t Address		2814 CC	7-9 PH	ti (ig	-		
Amendment #1	⊠ EPA ☐ Initial				PO	Box 771	8						
DCA		Windows			City.	State, Zip (Code	Verse	STAS LUE	TRUL			
Cancellation Can			_					2	LICENSIN	G			
Cancellation			ncludin	g									
FACILITY INFORMATION Type of Facility (4) School (K-12)		San			9				A STATE OF STATE OF STATE OF STATE OF	iiiibei			
Name of Facility Where Abatement is Taking Place (3)		mation							0				
The College of New Jersey - Roscoe Hall West	Name of Facility Where Abatement	ie Takir	a Dlace	2 (3)	FA	CILITYIN	NFORMATION	Type of Engility	(4)				
Street Address					ct								
2000 Pennington Road		11030	Je Hai	11 446	S.L					12)			
County (6)								Other (i.e., pr	ivate and comm		uildin	gs,	
Ewing County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) College													
County (6) Mercer Merce	\$75,000 to							Square Feet	# of Floors	BI	dg. A	ge	
Mercer Name of Monitoring Firm Hired by Building Owner (8)							4						11100000
Name of Monitoring Film Hired by Building Owner (8)					Cou	nty Code (7	7)(STATE USE ONLY)	Current Use (Pri	or if being demo	olished)			
Street Address Str						222-							
Street Address 34 West State Street 34 West State Street 36 Maple Ave. PO Box 25	Name of Monitoring Firm Hired by B	uilding	Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
30 Maple Ave. PO Box 25	USA Environmental						AbateTech, In	nc.					
City, State, Zip Code Trenton, NJ 08618 Telephone No. G09-656-8101 G09-265-2107 G09-260-200 G09-200-200 G09-200-200 G09-200-200 G09-200-200 G09-200-200	Street Address						Street Address						
Trenton, NJ 08618	344 West State Street						30 Maple Ave	. PO Box 25					
Project Manager for Monitoring Firm William Weisgarber, Jr. Telephone No. 609-656-8101 609-265-2107 00529	City, State, Zip Code						City, State, Zip Co	ode					
William Weisgarber, Jr. S09-656-8101 609-265-2107 00529	Trenton, NJ 08618						Lumberton, N	J 08048					
William Weisgarber, Jr. S09-656-8101 609-265-2107 00529	Project Manager for Monitoring Firm			Tel	ephone	No.	Telephone No.		License No.				
Occupancy Status During Abatement (Check only one) □ Facility Closed/Vacated During Entire Period of Abatement □ Abatement Performed Outside of Normal Facility Hours - Describe □ Time of Abatement	William Weisgarber, Jr.			- N	a Barana		609-265-2107		00529				
08	Start Date (10)	Sche	duled (Compl	etion Da	ate (11)	Name of OSHA M	onitor					
Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement:AMPM/_PMAM City, State, Zip Code	08 /11 /14					33. 33	EMSL Analyt	ical					
Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement:AMPMPMAM PMAM PMAM City, State, Zip Code Cinnaminson, NJ 08077	Occupancy Status During Abatemer	t (Chec	k only	one)			Street Address						
Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement:AMIPM/PMAM		20	50	50	ement			0 North					
Scope of Work (Check all that apply)						scribe	and the state of t						
Scope of Work (Check all that apply) □ ≥3 sf or ≥3 if □ ≥160 sf or ≥260 if □ Demolition □ Demolition □ Description of □ Solely by □ Sole				•									
□ ≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf □ Demolition □ Description of	Scope of Work (Chock all that analy					25 25 4	Cilitaininson	, NJ 00077					
Solution Demolition Solution Demolition Solution Solu	Scope of Work (Check all that apply)	1					☐ Full Cont	ainment with Neg	ative Pressure				
Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) Basement Storage Area Ba								losure	daro i roccuro				
Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A	≥160 sf or ≥260 If		☐ De	emoliti	on				. r:-LL D				
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) Basement Storage Area			1	1.000	tion		⊠ Non-Exe	npted (") and Nor	1-Friable Proced		4		
Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) Basement Storage Area Security (12) Yes No N/A Security (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Security (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Security (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Security (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Security (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Security (ACM) (I.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Security (ACM) (I.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Security (ACM) (I.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Security (ACM) (I.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Security (I.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Security (I.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Security (I.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Security (I.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Security (I.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Security (I.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Security (I.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Security (I.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Security (I.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Security (I.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Security (I.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Security (I.e., thermal systems insulation)	Logotion of		155		553 (50) (50)		Description			-			ype
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Second State	TO BE ABATED	· · · y					., thermal systems i	nsulation,	(Specify	Nou	oair	caps	clos
Yes No N/A			Cus						SF or LF)	a		sula	ure
Basement Storage Area	(13)		Yes	T			other miscellane	Jusi				िल	
89 Windows Interior/Exterior	Basement Storage Area		-	1	-	Floor	ile and Mactic		1 335 85				
Rooms 132,106,133,108 & S1 & S3			1=			Textures 2000							
Name of Registered Waste Hauler AbateTech, Inc. City, State Lumberton, NJ Completed By (Print or Type) NJDEP Waste Hauler ID No. 18750 Name of Registered Landfill Waste 200 Cubic Yards of Waste G.R.O.W.S. Landfill G.R.O.W.S. Landfill City, State Tullytown, PA Date						1		ation	89 each	$\perp \Box$	-	-	
Name of Registered Waste Hauler AbateTech, Inc. City, State Lumberton, NJ Completed By (Print or Type) NJDEP Waste Hauler ID No. 18750 Disposal Date 10/31/14 Cubic Yards of Waste 200 City Waste 200 City, State Tullytown, PA Signature Date	Rooms 132,106,133,108 & S1 8	S3				Ceiling	Plaster		420 SF		\boxtimes	\boxtimes	
AbateTech, Inc. Hauler ID No. 18750 Waste 200 G.R.O.W.S. Landfill							3						
City, State Lumberton, NJ Completed By (Print or Type) Lumberton, NJ Disposal Date Lumberton, NJ Tullytown, PA Signature Date	Name of Registered Waste Hauler			199			The state of the s	Name of Regist	ered Landfill				
City, State Lumberton, NJ Completed By (Print or Type) Disposal Date 10/31/14 Tullytown, PA Date Date	AbateTech, Inc.			F				b					
Lumberton, NJ Completed By (Print or Type) Title Signature Date	City, State				18/50	,		City State					
Completed By (Print or Type) Title Signature Date	Maria Companya Cara da Cara Cara Cara Cara Cara Cara								ΡΔ				
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Gwendolyn Trumbetti Operations Coordinator 9/39/19		(10)			C "		Signature	t		Date 1	2	1,	.1
	We are the second of the secon	-	perat	ions	Coord	inator		M		4/	19	11	4
ASB-41 * Do not use this form for asbestos licensure exempted activities.		*	Do not	1100 +	hic form	for achoes	los licensum ava	ted activities		1		/	

6			NOTI		rsuan	t to NJA	C 8:60 and 5:10	5)		F		1	111	Pro-
Date of Notification (1) 10 / 3		14					o Owner/Operator (d Johnson Hosp	2) oital / Job #	20 1409-4826 A.C.	Che	米世	662,	DM	Er.
Agencies Notified Typ	oe Notific	cation			Street	Address			A,Og	i Po	*	- r	na -	4:
	Initial				One	Robert	Wood Johnson	Place	į	20	198	CC	TALT	
	Amende Amendr				City, S	tate, Zip C	Code			- L	ILE.	MSI		1
	Emerge		cluding		Nev	/ Brunsw	vick, NJ 08901					~ "	10	
	justifica		Juding		Name	of Contact	(Telephone N	lumbe	er	51 171		
	Cancella	ation			Fait	h Orsini								
				55	FAC	ILITY IN	FORMATION							
Name of Facility Where Abate	ement is	Taking	Place	(3)				Type of Facility (4)					_
Robert Wood Johnson					lwav			School (K-12)	. 53					
Street Address		7020	RIOTHERIN					☐ Subchapter 8						
One Robert Wood John	nson P	lace						Other (i.e., pr homes, etc.)	ivate and com	imerc	ial bu	ılaıng	s,	
City (5)	13011	1000				-		Square Feet	# of Floors		Blo	dg. Ag	10	_
New Brunswick								Oquale 1 cct	# 01 1 10013		15.	. 9.718	,-	
						t. 0 - 1 - 17	VOTATE LIGE ONLY	Comment Head (Dai	ar if hainer dan	naliah	247			_
County (6)					Coun	ty Code (/)(STATE USE ONLY)		or it being der	nolisn	ea)			
Middlesex	100							Hospital						_
Name of Monitoring Firm Hire	120	ilding O	wner ((8)	ASCM	No.	Name of Abateme							
Omega Environmental		_0.0	C1-10-				AbateTech, I	nc.						
Street Address							Street Address							
280 Huylar Street							30 Maple Ave	. PO Box 25						
City, State, Zip Code							City, State, Zip C	ode						
South Hackensack, NJ	07606						Lumberton, I	J 08048						
Project Manager for Monitorin	ng Firm			Tele	phone i	No.	Telephone No.		License No	ο,				
Geiser Fajardo														
Ocioci i ajaluu				20	1-489	-8700	609-265-2107		00529				•	
	1	Sched	uled C	1	CONT. ALEKS THE CO.		609-265-2107 Name of OSHA N		00529				•	_
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Date of Notification (1)			Name	of Building	Owner/Operator (2	2)	1 7 1-4				
	14		200000000000000000000000000000000000000	E&G		/ Job #2019-0	830 Check #66	663 : 150	,		
Agencies Notified Type Notifie	cation		Street	Address					600		
☑ EPA ☑ Initial			400	0 Hadley	Road	A.SBE	STOS CONT	DOL			
☐ DOLWD ☐ Amende	=200		City, S	State, Zip C	Code	Ě	LICENSING	HUL	-25		
☑ DHSS Amenda ☐ DCA ☐ Emerge	nent # ncy (including		Sou	uth Plain	field, NJ 07080						
(NJAC 5:23-8) justificar		9	Name	of Contac	t		Telephone Numb	per	id.		
☐ Cancella	ation		Mik	e Lucian	i						
			FA	CILITY IN	FORMATION						
Name of Facility Where Abatement is	Taking Place	(3)		E .		Type of Facility (4)				
PSE&G Englewood						School (K-12)					
Street Address							(Other than K-12) ivate and commer		ildino	ıs.	
207 North Dean Street						homes, etc.)					
City (5)						Square Feet	# of Floors	Bl	dg. A	ge	
Englewood											
County (6)			Cour	ty Code (7)(STATE USE ONLY)	Current Use (Pri	or if being demolis	hed)			
Bergen						Control Hou	se				
Name of Monitoring Firm Hired by Bu	ilding Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
NA					AbateTech, I	nc.					
Street Address					Street Address						
					30 Maple Ave	. PO Box 25					
City, State, Zip Code					City, State, Zip Co	ode					
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					Lumberton, N	J 08048					
Project Manager for Monitoring Firm		Tele	phone	No.	Telephone No.		License No.				
					609-265-2107		00529				
Start Date (10)	Scheduled C	comple	tion Da	te (11)	Name of OSHA M	lonitor				- 1	
10 / 20 / 14	_10_ /	21	<u> </u>	14	EMSL Analyt	ical					
Occupancy Status During Abatement	(Check only	one)			Street Address						
☐ Facility Closed/Vacated During En			ment		200 Route 13	0 North					
☐ Abatement Performed Outside of N				cribe	City, State, Zip Co						0
Time of Abatement:AM	PM/	PM-		AM	Cinnaminson						
Scope of Work (Check all that apply)						•					
						ainment with Neg	ative Pressure	71			
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 		enovati emolitic			☐ Mini-Enc	iosure g Procedure					
		J. T. O.II.C.			⊠ Non-Exe	mpted (*) and Nor	n-Friable Procedu	re			
		Locat			•			Ab	atem	ent T	уре
Location of	the second	Norma ed Sole			Description o			R	20	Щ	ш
Asbestos-Containing Material (AC TO BE ABATED		aintena			stos Containing Ma		Amount (Specify	Removal	Repair	cap	응
IN Facility	Cus	todial	Staff?	(surfacing, VAT,	or	SF or LF)	val	7	Encapsulate	Enclosure
(13)	V	(12)	NI/A	-	other miscellane	ous)				ate	
	Yes	No	N/A					-			
Roof				Roof G	lazing		150 SF		Ш	Ш	Ш
*1											
		+-						+-			
N				N/a abs	Cubia Vanda of	Nome of Davis	torod Landfill		ПП	Ш	Ш
Name of Registered Waste Hauler		100	IJDEP \ lauler II		Cubic Yards of Waste	Name of Regis					
Waste Management			1125		10	G.R.O.W.S.	Landill				
City, State	0111.64550 Beese - 1-14 Beese Beese	A-27/41			Disposal Date	City, State					
Camden, NJ					10/21/14	Tullytown,	PA				
Completed By (Print or Type)	Title				Signature		Da	. 1	1		
Gwendolyn Trumbetti	Operat	ions	Coord	inator	(A	MA		101	6/	14	
						WWW					100

ASB-41 MAY 11

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

RECEIVED

Date of Notification (1)					Name	of Buildir	ng Owner/Operator (2)		- 1	F 1	- 0	
	6/	14	_				f Princeton	/ Job #14	10-4824 (Chip	c <u>k</u> #66	64 0 _M		
Agencies Notified	Type Notif	fication			Street	Address					7	** Û	7
☑ EPA					Tru	stees of	Princeton Unive	ersity E.A. MacI	Willam Blog T	70 n	~		
☑ DOLWD	Amend	A STATE OF THE PARTY OF THE PAR			City, S	State, Zip	f Princeton Unive		& Lic	FMO	147	RO	
☑ DHSS		ment#			10 mm		NJ 08544		-10	L162	NG		•
☑ DCA (NJAC 5:23-8)	☐ Emerge justifica		uding			of Conta			Telephone Nur	nher			
(140/10/0.20-0)	Cancel						ego, P.E.						
							NFORMATION		1		-,		
Name of Facility Where A	batement is	s Taking I	Place (3)	17	OILITT II	IN ORWATION	Type of Facility	(A)				
Princeton Universit		2003	i idoc (٥,				School (K-12	2007/				
Street Address	y- Are in	Journ					-	Subchapter 8		2)			
McCormack Hall- Pi	rinceton l	Jniversi	ty Ma	in C	ampu	s		Other (i.e., pr homes, etc.)			uilding	gs,	
City (5)					-	-		Square Feet	# of Floors	В	dg. A	ge	
Princeton								1,000,000	5		85		
County (6)				-	Cour	ty Code (7)(STATE USE ONLY)	Current Use (Pri	or if being demol	lished)			
Mercer								Museum					
Name of Monitoring Firm	Hired by Bu	uilding Ov	vner (8) [ASCM	No.	Name of Abateme	ent Contractor (9)		.05			-
Cardno ATC	959		***		0009	98	AbateTech, I						
Street Address		1945					Street Address						
3 Terri Lane							30 Maple Ave	PO Box 25					
City, State, Zip Code							City, State, Zip Co						
Burlington, NJ 0801	6						Lumberton, N						
Project Manager for Monit				Tele	phone	No.	Telephone No.	10 000 10	License No.				
Michael R. Keehn					9-386		609-265-2107	,	00529				
Start Date (10)		Schedu	led Co				Name of OSHA M		00020				
10 / 20 /	14	2000000				14	EMSL Analyt						
Occupancy Status During							Street Address						
☐ Facility Closed/Vacate			THE STREET		ment		200 Route 13	0 North					
☐ Abatement Performed						cribe	City, State, Zip Co						
Time of Abatement:							Cinnaminson						
Scope of Work (Check all	that apply)						ME II O						
≥3 sf or ≥3 If		D	Ren	ovati	on		☐ Mini-Enc	tainment with Neg Josure	ative Pressure				
≥160 sf or ≥260 lf			Dem				☐ Glovebag	g Procedure					
							☐ Non-Exe	mpted (*) and No	n-Friable Proced	ure			
• *************************************	5 -			ocat						Ab	atem	ent T	ype
Location of Asbestos-Containing N		·M·	Used		•	Ach	Description o estos Containing Ma		Amount	Re	Re	ш	m
TO BE ABA		,,,,	Main				e., thermal systems		(Specify	Removal	Repair	cap	Clo
IN Facility	y		Custo	dial 3 (12)	Staff?		surfacing, VAT,	or	SF or LF)	Va.		Encapsulate	Enclosure
(13)			Yes	No	N/A		other miscellane	ous)				ate	
Work Area #1 Level A]		\boxtimes		Floor T	Tile & Mastic		2,270 SF				
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			_ '							ᆜᆜ		ш	ш
		L			Ш								
Name of Registered Waste	e Hauler			0.00	JDEP V		Cubic Yards of	Name of Regist					
AbateTech, Inc.				ПП	auler II 18750		Waste 40	G.R.O.W.S.	Landfill				
City, State					, , , , ,		Disposal Date	City, State					
Lumberton, NJ							11/2/14	Tullytown,	PA				
Completed By (Print or Ty	oe)	Title				-	Signature			ate		2 400	-
Gwendolyn Trumbet	30	Lateratories:	eratio	ns (oordi	nator		ant		in	,	11.1	
ASR-41					20141		- Cy	MI		10	CO	17	

(1/L 13 28

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

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REC	EIVED
-014 C CT -9	PM.
SUESTUS & LICEN	COMTROL

Date of Notification (1) 10/6/2014	= =				Building (³⁸ E3 & L	CT.	9	PM	1	~
Agencies Notified	Type Notification		1 1 2 2 2	treet Ac 237 SC	ddress DUTH S	TREE	T				GES BI	Tos	5 0	nei	7.	0;
EPA DEP DOL	Amended Amendment		11000		te, Zip Co		07960			5)		HUE	145	THO	1 196	PL.
ĭ DOH x DCA	Emergency (i justification) Cancellation	ncluding			Contact K HABB	——— А					enndae					
	1-			FACII	LITY INFO	RMAT	ION			-			MACON		_	
Name of Facility Where	Abatement is Taking	Place (3)						Type	of Facility (4	-)						
Street Address 4100 QUAKERBR	IDGE ROAD								School (K-12 Subchapter of Other (i.e. pr	8 (Oth			ouild	ings,	home	es,
City (5) LAWRENCEVILLE	E TOWNSHIP								etc.) re Feet 000	# of 2	Floors			dg. A	ge	
County (6) MERCER	ERCER ame of Monitoring Firm Hired by Building Owner (8)					2			nt Use (Prio			olished)			
	ame of Monitoring Firm Hired by Building Owner (8) IGER ENVIRONMENTAL					N/A BJR D					ne of Abatement Contractor (9) R DEVELOPMENT					
Street Address 234 20TH AVE	treet Address 234 20TH AVE					Stree					eet Address 7 SOUTH STREET					
City, State, Zip Code BRICK, NJ 08724			330			City, State, Zip Code MORRISTOWN, NJ 07960										
Project Manager for Mo	BRICK, NJ 08724 Project Manager for Monitoring Firm						Telephone No.					License No.				
Start Date (10) 10-20-14		Scheduled	I Comp	oletion [Date (11)		Name	of OSH	ALTON							
Occupancy Status Duri	ng Abatement (Check)					Addres	DARKET CHECKSON		-	-				
	cated During Entire P		88 	ant				20TH								
Abatement Perfor	med Outside of Norm			7111			City, S	State, Zip Code								
Other - Describe:							BRIC	CK, N.	K, NJ 08724							
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CK 24057

State of New Jersey (Pursuant to NJAC 8:60 and 5:16)

NOTIFICATION OF ASBESTOS ABATEMENT Name of Building Owner/Operator (2) Date of Notification (1) Hartz Mountain Industries, Inc. 06 14 10 Type Notification Street Address Agencies Notified 400 Plaza Drive ☐ EPA **⊠** DOLWD ☐ Amended City, State, Zip Code Amendment # □ DHSS Secaucus, NJ 07094 ☐ Emergency (including ☐ DCA Telephone Number Name of Contact (NJAC 5:23-8) justification) ☐ Cancellation Jason Timmons **FACILITY INFORMATION** Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Office Building No. 5 Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, 301 Broadway homes, etc.) Bldg. Age Square Feet # of Floors City (5) 50+ 162,000 2 Jersey City, NJ 07096 County Code (7)(STATE USE ONLY) | Current Use (Prior if being demolished) County (6) Commercial Hudson Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Superior Abatement Inc 00117 Health and Safety Street Address Street Address 2 Henderson Drive 318 12th Street City, State, Zip Code City, State, Zip Code West Caldwell, NJ 07006 Hammonton NJ 08037 License No. Telephone No. Project Manager for Monitoring Firm Telephone No. (973) 808-1616 00411 (609) 704-8850 Jim Proctor Name of OSHA Monitor Scheduled Completion Date (11) Start Date (10) 10 / 18 / 14 Superior Abatement Inc 10 / 16 / 14 Street Address Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement 2 Henderson Drive Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: AM-____PM/___ West Caldwell, NJ 07006 Scope of Work (Check all that apply) ☐ Mini-Enclosure
☐ Glovebag Procedure
☐ Non-Exempted (*) and Non-Friable Procedure ☐ >3 sf or >3 lf □ Renovation □ Demolition ≥160 sf or ≥260 lf Is Location Abatement Type Normally Description of Location of Remova Encapsulate Enclosure Used Solely by Amount Asbestos Containing Material (ACM) Asbestos-Containing Material (ACM) Maintenance/ (i.e., thermal systems insulation, (Specify TO BE ABATED Custodial Staff? SF or LF) surfacing, VAT, or IN Facility (12)other miscellaneous) (13)Yes N/A No 1,818 SF \boxtimes Floor Tile/Mastic 2nd Floor various areas X П Name of Registered Landfill NJDEP Waste Cubic Yards of Name of Registered Waste Hauler Hauler ID No. Waste Minerva Landfill Service Transport Group, Inc. SW2117 20 Disposal Date City, State City, State 10/18/14 Waynesburgh, OH New Castle, DE

ASB-41 **MAY 11**

Completed By (Print or Type)

Nick Petrovski

Title

President

Signature

Date

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

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State of New Jersey HOTHICATION OF ASBESTOS ABATEMENT

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

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Date of Notification (1) October 6, 2014					Building Owner/C ip of Hammo		(2)	Che	ck #	1544 CCT (9 PM		-ta	
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Street Address 411 Southgate Cou	urt. Suite E						t Address Cutler A	venue						
City, State, Zip Code Mickleton, NJ 0805							State, Zip Cole Shade		052		_			
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State of New Jersey
NOTIFICATION OF ASSESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

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, EMERGENCY (K 1671

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:68 and 12:120)

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City State	, NI					Disposal Da		1	/ Date	211	111		_
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Cherry Hill								re Feel	2	Floors	0.00	ilds. A	A ge	\exists
County (8) Camden		C	OUNTY O	Code (7) JOE ONL	7		Curr	int Use (Pr	ter if bei	ng demoli	ishes)			\neg
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Sireel Address 1253 N. Church Street	Was part of the same of			-		Street	Andre					-	-	\dashv
City, Style, Zip Cade Majorestown, NJ 08057			-			City, 51	ale, Z	lp Code ade, NJ (+		\dashv
Project Manager for Monitoring Film Dirn Gullerdi			slepho:	ne No.		Telephi 858-7	one N	٥,	dong	Closuse	No.	-		\dashv
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October 4, 2014 Scupping Abatement (Check	October Only One		14			Street /	Addra	9500					3	1014
Facility Closed/Vacated During Calife P Absternent Performed Cutside of Normal Other - Describe:	erios of A al Facility	bateme: Heura	ní					130 No	th		•		(点 (元) (三)	1
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NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:120)

Date of Notification							Owner / Operato		AF.	CE	11/	P =		-
Aganaias Natified	9/11/2014			_			MUNICATION	S		Diago	1 6)	
Agencies Notified EPA	Type Notifi	cation		Stree 216 I			N AVE		2014 ag	T-9	DM			
DEP	☐ Initi					& Zip			A . v		117	6:	96	
□ DOL □ DOL		ended R#2-10/3	3/14			OD N			ASBES	TAS -	ne	4-		
□ DOH □ DCA		ergency ncellation		Alex		ontact lor			ASBES & L	ICER!	SIN(ne(1)	lumb	er
				FA	CILI	TY INF	ORMATION							
Name of Facility W	here Abaten	nent is Taking P	lace	(3)			Type of Faci	lity (4)				_		
LAKEWOOD CE	NTRAL OF	FICE					School ((K-12)						
Street Address									ner than K-12)					
216 LEXINGTON	AVE								& commercial bu				etc.)	
City (5)		County (6)	10		C-1-	/ 7 \	Square Feet		of Floors	Bldg	ı. Ag	е		
LAKEWOOD		County (6)		ounty	Code	(1)	20000		3					
LAKEWOOD		OCEAN					The state of the s		eing demolished) ation center					
Name of Monitoring	Firm Hired	by Building Ow	ner (8	3)	AS	CM No	. Name of Aba	atement C	ontractor (9)		11/2	0		
USA Environme Street Address	ntal							DO NAME OF STREET	IMENTAL INC					
8436 ENTERPRIS	SE AVE						Street Addre		CET					
City, State & Zip Co		- 			1118		City, State &				-			
PHILADELPHIA I	PA 19153						BRISTOL,	PA 19007						
Project Manager for MARK JENKINS	Monitoring	Firm	188588877899	phone -365-		ber	Telephone N 215-788-60		Licen	se Num	ber .			
Scheduled Start Da		Scheduled Cor	mplet	ion Da	te (11		Name of OS	HA Monito			,,,,,	<u> </u>		
9/25/201 Occupancy Status I		10/3/2014 (P			COM	PLET			IMENTAL INC					
Facility Clos	sed/Vacated	During Entire F	niy or Period	ne) l of Ab	ateme	ent	Street Addre 1123 BEAV		FET					
		Outside of Norm					City, State &							
Describe:	5PM-1:30	AM				•	BRISTOL, I							
		g Abatement				0								
Scope of Work (Che	eck all that a	apply)						-						
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	ocation of		6-070	Locat	3005 N.C.	T	Descriptio		Amou					
	tos-Containi erial (ACM)	ng		mally			Asbestos-Cor		(Speci					
	BE ABATED			Solely ntenar			Material (A (i.e., thermal s		SF or L	.୮)	Re	æ	Encapsulate	Ē
	n Facility			todial			insulation, surface	cing, VAT			Remova	Repair	apsu	Enclsoure
	(13)		Van	(12)	N/A	4	or other miscell	laneous)			/al	=	ılate	ure
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Fan Equipment F	200m			+ $+$ $+$	H	+	Pipe Insula Duct Insula		78 LF 40 SF			H	H	H
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Name of Registered	Waste Hau	ller				Waste		Name of	Registered Lanc	Ifill				
SERVICE TRANS	DODT CD	OLID INC		100000000		D No.	of Waste	MINIED	VA LANDEILI	X.				
SERVICE TRANS City, State	OKI GK	OUF, INC.		20	990		Disposal Data	The second strategic strat	VA LANDFILL					
NEW CASTLE, D	E 19720						Disposal Date 10/2/2014	City, Sta	ite ESBURG, OH 4	4688				
Completed By (Print				Tit	le		Signature		r.		ate			
PATRICK T. DeC.	ARO			Es	tima	tor	Patrick	119	Can 1.0	7	10/	5/1	4	
DD 14040							1 wares	1.2	wa / Je		/	1'	v.C.0	
PD 14049									0					

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

Date of Notification	(1) 9/11/2014			Nam	e of	Building	Owner / Opera	tor (2))		~ /	00			
Agencies Notified	Type Notific	ation		Stree	A A	ddress	MUNICATION	\S_	2014 0	<u> </u>	PH	2: 66	· }		
	.,,,					KINGTO	N AVE								
☐ DEP		l				te & Zip			ASSE	STES	COR	TRO		-	
□ DOL		nded R#1-9/30/	14			OOD N					NSIL				
Ø DOH		rgency		Nam	e of	Contact					-	Teleph	one	Num	her
☐ DCA	☐ Cand	ellation		Alex	Ва	ylor									501
				FA	CIL	ITY IN	FORMATION								
Name of Facility Wh	ere Abatem	ent is Taking Pla	ace ((3)			Type of Fac				Т				
Street Address	I KAL OFF	ICE			_		School								
216 LEXINGTON	A\/E								(Other than						
Z TO LEXITO TOTA	WAT.								vate & com					etc.)	
City (5)		County (6)	To	ounty	Coo	lo (7)	Square Fee		# of Floor		E	Bldg. Ag	ge		
LAKEWOOD		OCEAN	100	Junty	COU	ie (7)	2000		<u></u>	3					
LAKEWOOD		OCEAN	1				Current Use				ed)				
Name of Monitoring	Firm Hired h	V Building Own	OF (8)	1	TA	SCM No	Verizon co								
USA Environmen		y building Own	ei (o)	A	SCIN NO					_				
Street Address							Street Addre		KOMMENI	AL IN	<u>. </u>		_		_
8436 ENTERPRIS	E AVE						1123 BEA		TREET						
City, State & Zip Coo	le						City, State 8			-	-			15.00	
PHILADELPHIA P							BRISTOL,								
Project Manager for	Monitoring F	200,0000				mber	Telephone N			Lic	ense N	lumber			-
MARK JENKINS				365-			215-788-60)40				005			
Scheduled Start Date 9/25/2014	e (10)	Scheduled Com		on Da 2014		11)	Name of OS			A					
Occupancy Status D							Street Addre		KONIVIENI	AL IN	ن				
Facility Close	ed/Vacated [During Entire Pe	eriod	of Ab	ater	nent	1123 BEAV		TDEET						
		tside of Norma					City, State &								
Describe:			1.55			· to opin	BRISTOL,	5000 December 1							
Facility Occu	pied During	Abatement					J. (1010L)		,001						
Scope of Work (Chec	ck all that ap	ply)													
								\boxtimes	Full Conta	inment	with N	egative	Pre	ssure	è
≥3 sf or ≥3 lf			\boxtimes			ition			Mini-Enclo						
≥160 sf ≥260	IT			Der	nolit	tion		\boxtimes	Glove Bag						
1	-tif							Ш	Non-Exem						
	ation of s-Containing			Locat nally l			Descriptio		_		ount	Aba	atem	ent T	ype
	rial (ACM)			olely l		۵	Asbestos-Cor Material (A		g		ecify r LF)			m	
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	Facility		Custo	odial S	Staff	f? i	nsulation, surfa					Remova	Repair	aps	CISC
	(13)	-	, ,	(12)	<u> </u>	_	or other miscel	laneou	ıs)			val	₩.	Encapsulate	Encisoure
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Boiler Room				Ц	1	Cem	entitious ceil		naterial	485	SF	\boxtimes			
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(In (D. internal)	V			<u> </u>	L	<u> </u>									
Name of Registered V	vaste Haule						Cubic Yards	Nam	e of Registe	ered La	ndfill				
SERVICE TRANSP	ORT GRO	JP. INC.		2,550,000	990	ID No.	of Waste	BAIN	ERVA LAN	וחבוו י					
City, State	01(1 01(0)	51 , 1110.		20.	550		Disposal Data	1		ADFILI	-				
NEW CASTLE, DE	19720						Disposal Date 10/2/2014		State YNESBUR	G. OH	44688	}			
Completed By (Print o			-	Title	e		Signature			_,		Date			
PATRICK T. DeCAP						ator		-	247	1		Date	/	1	,
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D 14049					-			1.	- care	/	T	/	/	V	<u> </u>

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

Ca 2701

Date of Notification (1)		Na	me of	Building	Owner / Opera	ator (2)					
9/11/2014		VE	RIZU	IN CON	MUNICATIO	NS					
Agencies Notified Type Notifica	ation	Str	eet Ac	dress						_	_
☐ DEP ☐ Initial		21	6 LEX	CINGTO	ON AVE						
☑ DOL 5339 ☐ Amer		Cit	y, Stat	e & Zip	Code						
	gency	No	MEVV	OOD N	41						
	ellation		ex Ba					Telepl	none	Num	iber
N (5 30 M)		F	ACIL	ITY IN	FORMATION						
Name of Facility Where Abateme	nt is Taking Pla	ce (3)			Type of Fa	cility (4)					
LAKEWOOD CENTRAL OFF Street Address	ICE				Schoo	l (K-12)					
216 LEXINGTON AVE					Subch	apter 8 (Other	than K-12)			17	
210 LEXING TON AVE					Other	(i.e. private &	commercial build	inas ho	mes	etc)	į.
City (5)	0	T		001 <u>-</u> 3:	Square Fee	et # of	Floors	Bldg. A		010.7	
LAKEWOOD	County (6)	Count	y Code	e (7)	2000	00	3	ug. /	90		
LAKEWOOD	OCEAN				Current Use	e (Prior if being	g demolished)				
Name of Monitoring Firm Hired by	D 711 0				Verizon c	ommunicati	on center				
USA Environmental	Building Owne	r (8)	A	SCM No	Name of At	patement Cont	ractor (9)				
Street Address					BRISTOL	ENVIRONM	ENTAL INC				
8436 ENTERPRISE AVE					Street Addr						
City, State & Zip Code					1123 BEA	VER STREE	T	220			
PHILADELPHIA PA 19153					City, State &	& Zip Code					
Project Manager for Monitoring Fil	rm IT	elephor	ne Nur	nher		PA 19007					
MARK JENKINS	2	215-365	5-5810)	Telephone I 215-788-6		License	Number			
Scheduled Start Date (10)	cheduled Comp				Name of OS			005	09		
9/25/2014	10	0/1/201		• /		ENVIRONMI	ENITAL INC				
Occupancy Status During Abatem	ent (Check only	one)			Street Addre		INTAL INC				
Facility Closed/Vacated Di	uring Entire Peri	iod of Al	bateme	ent		VER STREE	т				
Abatement Performed Out	side of Normal	Hours -	- 7am	to 3pm	City, State &		•				
Describe: 5PM-1:30AM					BRISTOL,	PA 19007					
Facility Occupied During A							29				
Scope of Work (Check all that app	ly)										
≥3 sf or ≥3 lf		∇ n.		Carron.		⊠ Full C	ontainment with I	Negative	Pres	sure	2
≥160 sf ≥260 lf	ř		enovati			☐ Mini-E	nclosure				
△ = 100 0 m = 200 m	L		emolitic	on			Bag Procedures				
Location of		Is Loca	tion			☐ Non-E	xempted and No	n-Friable	e Proc	edu	re
Asbestos-Containing	N	ormally			Descriptio	n of	Amount		ateme		
Material (ACM)		Solely			Asbestos-Cor Material (A	CM)	(Specify				ř-
TO BE ABATED	M	laintena	nce or		(i.e., thermal s	systems	SF or LF)	20	-	Enc	m
in Facility (13)	C	ustodial			nsulation, surface	cing, VAT		Remova	Repair	ap	Enclsoure
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and of Registered Waste Hautel		IN.	JDEP (Juler ([Cubic Yards of Waste	Name of Reg	istered Landfill				
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ty, State			-		Diamond D.	MINERVA L	ANDFILL				- 1
EW CASTLE, DE 19720					Disposal Date 10/2/2014	City, State	1100 011				
ompleted By (Print or Type)		Tit	le .			WAYNESB	URG, OH 4468	8			
ATRICK T. DeCARO		127	ie stimat	0.	Signature	O A		Date			
		-3		J.	Patrick A	Le leur		91	1/14	,	
					1.000.			1 //	11/14		

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State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) RECEIVED Name of Building Owner/Operator (2) 1500 TEANECK ROAD, LLC Date of Notification (1) 10/06/2014 2014 GET -9 PM 2: 12 Type Notification Agencies Notified Street Address 173 BRIDGE PLAZA NORTH ASSESTES CONTROL & LICENSING 区 **EPA** Initial City, State, Zip Code FORT LEE, NJ 07024 Ď DEP Amended O DOL Amendment # Emergency (including Name of Contact justification) X DOH JOSHUA SLEPIAN 52 DCA Cancellation **FACILITY INFORMATION** Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e. private & commercial buildings, homes, 1500 TEANECK ROAD etc.) Square Feet # of Floors Bldg. Age City (5) TEANECK 100,000 50+ County Code (7) Current Use (Prior if being demolished) County (6) NJ (STATE USE ONLY) VACANT (PRIOR USE COMMERCIAL) BERGEN Name of Monitoring Firm Hired by Building Owner (8) CONSULTING & TESTING SERVICES, INC ASCM No. Name of Abatement Contractor (9) 00109 PAL ENVIRONMENTAL SERVICES Street Address Street Address 237 WEST 35TH STREET SUITE 805 11-02 QUEENS PLAZA SOUTH City, State, Zip Code City, State, Zip Code NEW YORK, NY 10001 LONG ISLAND CITY, NY 11101 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 212-929-3451 718-349-0900 00853 FARHOOD SELAMIE Name of OSHA Monitor MARTIN MCREA Start Date (10) Scheduled Completion Date (11) 10/06/2014 12/16/2014 Street Address Occupancy Status During Abatement (Check Only One) 714 KENNEDY BLVD Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: BAYONNE, NJ 07002 Scope of Work (Check All That Apply) 酋 Full Containment with Negative Pressure ≥3 sf or ≥3 If Renovation ≥160 sf or ≥260 lf Demolition Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Type Normally Description of Location of Used Solely by Asbestos Containing Material (ACM) Amount Asbestos-Containing Material (ACM) Encapsulate Maintenance/ (i.e. thermal systems insulation, (Specify Remova TO BE ABATED Repair Custodial Staff? surfacing, VAT, or SF or LF) In Facility (12)other miscellaneous) (13)Yes No N/A SEE ATTACHED LIST NJDEP Waste Cubic Yards Name of Registered Landfill Name of Registered Waste Hauler Hauler ID No. of Waste ATC/TST 30 MINERVA ENTERPRISES 24310/19551 Disposal Date City, State City, State

WAYNESBURG, OH 44688

Date

10/06/2014

10/15/2014

ADMINISTRATIVE

Signature

Completed by

ANN ALT

SHIRLEY, NY 11967/BRONX, NY 10464

Date of Notification (1) 10/01/2014			lame of E				(2)	ECE	IVE	D				
Agencies Notified Type Notification			treet Add		LAZA	NORTH	2014	DCT -9	PH	2: 12)			
区 EPA ロ Initial		CF	ity, State	e, Zip Co EE , No	de J 0702	4	A 58	ESTOS	S CON	TRO	L			
□ Emergency justification □ Cancellation)	0.00	lame of (JOSHUA		IAN		,	& LICE	-Main	ili.	7			
Name of Facility Where Abatement is Taki	Diana (2)		FACIL	ITY INFO	DRMAT	ON		W. (4)						
Name of Facility Where Abatement is Taki	ig Place (3)						Type of Fa							
Street Address 1500 TEANECK ROAD							☐ School ☐ Subch ☐ Other etc.)	apter 8 (C				dings,	home	es,
City (5) TEANECK							Square Fee		f of Floo 3	rs	В	50+	77.0	
County (6) BERGEN		C (S	ounty Co	ode (7) SE ONLY	NJ		Current Use VACANT					L)		
Name of Monitoring Firm Hired by Building CONSULTING & TESTING SERVICES	Owner (8) , INC (C	rsi)	ASCM 00109	No.			of Abatemer ENVIRONM			ES				
Street Address 237 WEST 35TH STREET SUITE	305						Address 2 QUEENS	PLAZA	SOUTH		317-123			
City, State, Zip Code NEW YORK, NY 10001						City, S	tate, Zip Coo	le CITY, N	Y 111	01				
Project Manager for Monitoring Firm FARHOOD SELAMIE			elephone 212-92		Ĺ		none No. 349-0900		(C.5) (C.5) (C.5)	nse No 853				-10-7-9
Start Date (10) 10/06/2014	Scheduled 12/16/2		oletion Da	ate (11)			of OSHA Mo IN MCREA	nitor	- 1					
Occupancy Status During Abatement (Che	ck Only One)					Street	Address				72			
	Period of Aba	ateme	ent			714	KENNEDY I							
□ Other – Describe:	nar radiity rr				_	BAYO:	NNE, NJ	7002						
Scope of Work (Check All That Apply)				-		0 :								
□ ≥3 sf or ≥3 lf 茁 ≥160 sf or ≥260 lf		novatio					Mini-Enc Glovebag	ainment woosure Procedumpted (*)	re				e	
	Isla	cation	n									Abate		t
Location of	Nor	mally			De	scription	of					Ту	ре	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used S Maint Custod (enanc	ce/		tos Cont thermal surfa	taining N	faterial (ACN s insulation, T, or		Amoun (Specif SF or LI	y	Removal	Repair	Encapsulate	Enclosure
CDD AMERICAND A TOP	Yes	No	N/A						1				w	_
SEE ATTACHED LIST		_			•									_
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Name of Decistered Wests Health		1 11/1	DED 141							100				
Name of Registered Waste Hauler ATC/TST		Hau	DEP Wa uler ID N 310/19	lo.	of Was	Yards ste		ne of Regi NERVA E						
City, State SHIRLEY, NY 11967/BRONX, NY	10464	1				sal Date /2014		, State YNESBUR	RG, OH	4468	8			
Completed by ANN ALI	Title ADMINIS	STRA	TIVE		S	Signature	M	•		Date 09/0		2014		

NOKE

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT

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	100			3.		,,	10 0.00 and 3.10		A FILL	en				
Date of Notification (1)					Name	of Buildin	g Owner/Operator (2)	CEIVE	D				
	06/	14			Carol	Zigmont		7014 00	_					
Agencies Notified	Type Notifica	ation	-	-		t Address		CUIA DE	1-9 PH 2	: 11	.20			-
☐ EPA	☐ Initial				26 Pi	tt Street								
▼ DOLWD	Amended				13003000	State, Zip	Code	HOEES	OS CONT	ROI				- 72
☑ DHSS ☐ DCA	Amendme		dina		1000	nfield, N.		Œ L	F OS CONT ICENSING	OL	•			
(NJAC 5:23-8)	justificati		unig			of Contac			Telephone N				_	
		tion			Charl	es Holme	:S							
		- 522300					NFORMATION		1200 -			-		_
Name of Facility Where	Abatement is 1	Taking PI	ace (3)				Type of Facility	(4)	_				_
Private home								School (K-1	2)					
Street Address								Subchapter	8 (Other than K	-1 2)		.,		
26 Pitt Street								homes, etc	private and com	ımercı	al Di	ııldın	gs,	
City (5)							700	Square Feet	# of Floors		В	dg. A	\ge	
Bloomfield, NJ 07003														
County (6)			10.00		Cour	nty Code (7)	(STATE USE ONLY)	Current Use (P	rior if being den	nolish	ed)			
Essex	11: 1: =			-				***						
Name of Monitoring Firm	Hired by Build	ding Owr	ner (8)		ASCM	No.	Name of Abateme	ent Contractor (9))					
Street Address							Gr Tech LLC							
Street Address							Street Address							
City, State, Zip Code				-			576 Valley Rd #							
ony, orace, zip code							City, State, Zip Co							
Desired March	itoring Firm			Tolo	phone	No	Wayne, NJ 0747	70						
Project Manager for Mon														-
Project Manager for Mon				1010	phone	140.	Telephone No.		License No),				
		Schedule					973-638-1777		01127). 				
Start Date (10)		Schedule 10	d Cor	nple	tion Da	ate (11)	973-638-1777 Name of OSHA M							
Start Date (10)	_14	10	d Cor	npie	tion Da	ate (11)	973-638-1777 Name of OSHA M Envirovision Co							
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NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7)

Date of Notificat	ion (1)		100000000000000000000000000000000000000			ner/Operator	(2)	AC.	A 1-				
10-3-14			R	achel S	Simon	1		1 & State	しと	IV	EI)	
Agencies Notified	Type Notif		1	et Addres		Street		2014 OCT ASSEST	-0	Bu			
EX (Exercises)	1 ST ST	ication	Cit	y, State,	Zin Co	ide				re,	2:	8	
[]DEP	[]Amende	ed				J,07028		ASBESTI	9 S C	`A.	-		
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[X]DOH	[]EMERGE	NCY		achel :		,	rerephon	e number	11.00		200		
[]DCA	[]Cancel	Llation	-		J_11.01	•							
S			44	FACIL	ITY INE	FORMATION							
Name of Facility	Where Abateme	nt is Tak	ing E	Place (3)			Type of Facil:	ity (4)					
Same as abo	ve						[]School		44	7	- 10	·	
Street Addres								ter 8 (Othe i.e., priva					
								uildings, h					
							Square Feet	# of Floo	ors	Bld	g. I	ge	
City (5		County	(6) E	ssex		Y Code (7) E USE ONLY)		16.1			. 7	1	
					1		Current Use (Prior if De	ing	demo	OIIS	nea)	
Name of Monitorin	og Firm hired	by Buildi	ing	ASCM No.	IN	ame of Abate	ment Contracto	r (9)			17 (2) -1		_
Owner (8) N/A	ig Film illied	Dy Dulla				AZTECH N	MANAGEMENT						
Street Address					S	86 Chris	stopher St						
City, State, Zip	Code		100000			ity, State,							
					- 1	Montclai	Lr, NJ 070	42					
Project Manager f	for Monitoring		7 7 2 1 12 5 2	none Numbe	er T	elephone Num			Licer			er	
		þ	N/A			(973) 744	1-8800		00	371	L		
Scheduled Start I	Date (10) S		7	ion Date		ame of OSHA	Monitor						
10-15-1		10-			1	I/A							
Month Day Occupancy Status		Month ent (Che	Day ck on	Year Ly one)		Street Addres	ss		- 100				-
[X]Facility	Closed/Vacate	d During	Entir	e Period	- 11								
of Abate []Abatement	ment Performed Ou	tside of	Norma	l Facilit	y c	City, State,	Zip Code						
	escribe: «OffH escribe: «Othe												
Scope of Work (C)			icy De	SCLIPC"									
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	or ≥ 3 lf sf or ≥ 260 lf		-	enovation emolition			-Enclosure ebag Procedure						
[15100	SI OI <u>2</u> 200 II		. 12			7	Friable Procedu	ire					
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Name of Register	ed Waste Haule	er	NJDE	P Waste	Cub	ic Yards	Name of Reg	istered Lan	dfil	1			
AZTECH MAN		Figure 12 ready		er ID No.	of V	Waste 1.5	G.R.O.W.	S.					
City, State			1 / 0	-10	Dist	posal Date	City, State						-
Montclair,	NJ 07042				100000000000000000000000000000000000000	0-3-14	Morrisvi	lle, PA	1 19	906	7		
107											-		_
Completed By (Pr		Title	د			Signatur	e		100	ate .0-3-	-14		
Constantine	Vivian	Presi	den	-		[[] []	il ên-			5 5	**		

KEVEIYEL		(1-	ursuan	t to NJAC	8:60 and 1	2:120)	_ Che	cK-	中	OX	71	£	
Date of Notification (1)					Owner/Ope	erator (2)	-	APPRO			-		
10096/19 PM 2: 68	<u>:</u>		BCSI				N. Dept. of			Seru	lees		
Agencies Notified Type Notification				Address			Taul (I	Dare	7			
STAS CONTINUE	ì	<u> </u>		oplar St				(signatu	re)				
DECENSING _ Amendment				ate, Zip Co ofield Pa			Date: 10 1	0 14	Time:_	11:3	OA	n	
☑ DOH Sustification ☐ Cancellation	i		Name : Bobb	of Contact y		NECESSION IN		Teleph	one Nu	mber			
	1		FAC	ILITY INF	ORMATION	V							1
Name of Facility Where Abatement is Taking Residential Property	g Place (3)				יד	ype of Facility (4)					•	ě
Street Address 217 Grant Ave	i					-		(Other ti	nan K-1 Immerç	2) lel bui	idings	, harr	as,
City (5) Cliffside Park	:		, ,			10000	guare Feet 000	# of Flo	id (A	- 1	Bldg. 7	/Se	-
County (8) Bergen	i		County (STATE	Cede (7) USE ONLY	1		ument Use (Prior Residential Pri		aifomatis	100			
Name of Monitoring Firm Hired by Building O	Owner (8)	ASC	M No.	1	and the second second second second	Abatement Contr		-				
n/a'	i		n/a			Loznic	a Managemei	nt Corp					20
D/S			- 170		- 38	Street Ad 22 Tro					~		•
City, State, Zip Code	* :			*	C	City, Stat	e, Zip Code Park, NJ 070	735		2	2014 00		THE
Project Manager for Monitoring Firm	-1		Telepho	one No.		alephan	All the second of the second o		Po P		9		-
n/a			n/a				6.7950	0	1195	7	5		[
Start Data (10)	Schedul	led Cor	npletion	Date (11)			OSHA Monitor		F 1	0.			
10/07/14	10/11/					Loznica	a Managemer	nt Corp	7	3		3	
Occupancy Status During Abatement (Chec	k only o	ne)			1.0	treet Ad					2	9	
Facility Closed/Vacated During Entire F	eriod of	Abstan	nent		0.000	22 Tro y			ING	つニ		0	
Abotement Performed Outside of Norm Other - Describes:	al Facilit	y Houn	2				a, Zip Coda			Č	2	G	
Scope of Work (Check All That Apply)						Lincoln	Park, NJ 070	035		- 1			
Scape of Walk (Crisck All / Inst Apply) ≥3 of or ≥3 if ≥160 of or ≥260 if		Renova Demoili					Full Containmer Mini-Enclosure Glovabag Proce Non-Exempted (dure				·	
E 2		Locat									Abat		t
Location of Asbestos-Containing Mederiel (ACM) TO BE ABATED	Use	Normal ed Sole eintene	ly by		itos Contain			Ăma.	int	-	1)	pe m	Γ
In Facility (13)	Cus	todial 5 (12)	Staff?	(1.4.	thermal syn surfacing other miss	g, VAT, o	or i	(Spec SF or I	新 LF)	Remaya	Regair	ncapsulate	CICIONIE
	Yes	No	N/A				86			<u>-</u>	_	ale	. 6
Exterior	ļi_		×		Transite	Shing	e\$	2500	SF	x			
	 					7-				├	-	_	
	 	-	-							╄	-		-
Name of Registered Waste Hauter	٠.	- 1 51	JDEP V	Vacto	Cubic Ya	ndo.	I November 55		1 1000				<u> </u>
Loznica Management Corp	:	Н	ouler ID 03313	No.	of Waste		Renne of Re	ONE CONTRACTOR OF THE					
City, State Lincoln Park, NJ	:				Disposal	Date	City, State Morrisvilli	e, PA					i i
Completed by E. Cirovic	Title	etary				nature 1.			Da	186 1/06/	1,4	-	

RECEIVE	N		CATION	ate of New Jerse I OF ASBESTOS to NJAC 8:60 an	ABATE		Min		Toro.			
Date of Notification 410CT/-9 PM	2: ;3	Ţ		f Building Owner/O		(2)		ept, or Hear	PRON	Senio		-
Agencies Notified 5 E 3 Application	TROL			ddress	770			70%			Ser	Vices /
1	G		131	VREELAN	UO A	υ£, ^l	Date	10/3	7			3
EPA & Chief of N	+ 4#	1	City, Sta	ate, Zip Cade	. ,	20100			7/11	6:	_	1
IX Emergency		-		WA 11-5	· !	07605		,,,			-	=/_
DOH justification) Cancellation			700				Tele	phone Nurr	ber			:
Name of Facility Where Abatement is Takin	- Di (2)		FAC	ILITY INFORMAT	ION ·		-					
HUDAN	ig made (3)					Type of Facility (11158					1
Street Address	**********					School (K-1	(2) - B. (Olbo	r lhan 1/ 40				
131 URALUAN ANK			.,			Other (i.e. p	orivate &	commercia) I bullo	ilngs,	hom	es,
LEONIA NT			a			Square Feet		Floors)		ldg. A Gø	ac	
County (6) S BAN AN				Code (7) USE ONLY)		Current Use (Pri	STERON STREET	ig demolish	ed)		283	
Name of Monitoring Firm Hired by Building	Owner (8)		ASCI	No.		of Abatement Cor lac Contracting		(9)			•	
Street Address			.1	· · · · · · · · · · · · · · · · · · ·	Street	Address Lowell Road						<u> </u>
City. State, Zip Code				-	City, S	state, Zip Code n Rock, N.J. 07	450		-			
Project Manager for Monitoring Firm			Telepho	ma 6) u			402					
				24	201-	none No. -262–5841		License No 00156).			
Start Date (10) 10/3/19	Scheduler 10 6	114	pletion	Date (11)		of OSHA Monitor ga Environme	ntal Se	ervices In	c,			
Occupancy Status During Abatement (Che Facility Closed/Vacated During Entire						Address Huyler Street						
Facility Closed/Vacated During Entire Abatament Performed Outside of Norr Other - Describe:	nal Facility	Hours	HIK.		City, S	itate, Zip Code kensack, NJ 0	7606					
Scope of Work (Check All That Apply)	-				TRACE	Kerisack, No U.	1,000					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enoval				Full Containme Mini-Enclosure Glovebag Prod Non-Exempted	e cedure					
	is I	Location	on			Allaha	-1-1-1-1-1	-		Abate	ment	
Location of		ormali Sole			acription					Ту	þe	-
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mair	ntenar odial S (12)	ice/	surfa	taining M systems cing, VA miscellar	t Insulation, T. or	(8)	naunt pecify or LF)	Кетпоча	Repair	Encapsulate	Enclosura
	Yes	No	N/A						_		4	
CAAUL SPACE			25	PAPAR DE	MSC F.	L (45-NOCHE)		3054	X			
										-		
Name of Registered Waste Hauter		I N	JDEP W	laste Cubia	Yerds	Name of	Doniste	nd Landon				
Rovic Transport		H	auter ID 0785			\$ 33t		ed Landilli lehem La	ndfill	Cor	p. ;	
City, State Riverdale, New Jersey 07457		1		Dispo	Sal Date	City, State		A 18015				
Completed by R. McDonald	Tille Presid	dent	***		THE WAY			1 5-4	/3,	/14	=	
					1 411	11		1.0	101	''		j

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

Date of Notification	on (1)		The second second		A STATE OF THE PARTY OF THE PAR	Owner/Operator	: (2)	Ot	-0	6 1	f 0mg	•	
10-3-14			And	ires	Rec	oder		? f &	- 67		VE	D	
Agencies Notified	Type Notific	ation	Stree	t Addr	ess			00100-					
[]EPA	[X] Initial	ation				errace		2014 GC	7-9	9 F	PH 2	: : :	8
[]DEP	[]Amended			State				ASBES	Tas	2 61	Otto	/2.0	10
[X]DOL	Notific	ation	wes	st O	rang	e,NJ,07052	2	81	ICE	NO	ING	RU,	L.
[X]DOH	[]EMERGENO	v	SAME DATE:	of Con		•	Telepho	ne Number		ندد	HAG		
[]DCA	70 100000	255	And	ires	Rec	oder							
-	[]Cancella	ttion		ENCT.	TTTV	INFORMATION							
Name of Facility Wh	ere Abatement	is Taki	ng Pla			INFORMATION	Type of Facil	ity (4)					
Same as above							[]School						
								ter 8 (Oth	er tl	han	K-12)	ſ	
Street Addres				~			T 10 10 10 10 10 10 10 10 10 10 10 10 10	i.e., privouildings,				-	
							Square Feet	# of Flo	posteroneo.		dg. A		
City (5		County	(6) Ess	ex	Cou	inty Code (7)	Dquare reec	01 110	OLS		ug. A	ge	
		5			(SI	TATE USE ONLY)	Current Use	Prior if b	eing	dem	olish	ned)	uces es
								4 =					
Name of Monitoring	Firm hired by	Buildin	g ASC	M No.			ment Contracto						
Owner (8) N/A						AZTECH M	ianagement	, Inc.					
Street Address			1 10			Street Addres	_			- 120			
						86 Chris	stopher St	•					
City, State, Zip Co	ode					City, State,							
2 ♣ c						Montclai	r, NJ 070.	42					
Project Manager for	Monitoring F		lephon	e Numb	er	Telephone Num	ber		Lice	nse	Numb	er	
		N	/A			(973)744	1-8800		00	37	1		
Scheduled Start Dat	e (10) Sche	ed. Comp	letion	Date	(11)	Name of OSHA	Monitor						
10-13-14		10-16				N/A							
Month Day Cocupancy Status Du			Day	Year	:	Street Addres							
[X] Facility Clo	osed/Vacated D					Direct Address	•						
of Abatemen []Abatement Pe		de of No	rmal E	Facili	tv	City, State,	Zin Code						
Hours - Desc	cribe: «OffHour	s Descri	pt»		-4	City, State,	ZIP Code						
[]other - Desc			Desci	ript»									
Scope of Work (Chec	k all that app	oly)				ווילון [Containment wi	th Negative	e Pro	98811	Te		
[X]≥3 sf or			X]Reno				Enclosure	ar negacar					
[]≥160 sf	or ≥260 lf	1]Demo	lition	1		bag Procedure Triable Procedu	ire					
		Τ.	Is			, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				Aba	temen	t T	уре
Locatio Asbestos-Co			ocation or mall			Description Asbestos-Con		Amount		R		E	E
Material			Used			Material ((Specif	8	E	R E	CA	C
TO BE A			y Mair enance			(i.e., thermal		SF or		0	PA	PS	os
In Faci (13)	0	C	ustodi	al	ın	sulation, surface or other misce.	2. T. C.	LF)		A	I	U	U
		Yes	No	N/A						L		L	R E
Basement/Craw	vl Space			X	Pipe	e insulati	on	120 lf		X			
								(
Name of Registered			DEP W			bic Yards	Name of Regi		dfil:	1	\$		
AZTECH MANAG	EMENT, IN		7040		of	Waste 1.5	G.R.O.W.	S.					
City, State					Di	sposal Date	City, State	vancor					
Montclair, NJ	07042					LO-17-14	Morrisvi	lle, PA	19	06	7		
Completed By (Print	or Thron	-10				0:			-				
Constantine V	U. 1,0000000	tle ceside	n+			Signature			10000	ıte 0-3-	-14		
						()	Vijan						

(K 67767004128

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

Date of Notification (1) 9/22/14					Building O	wner/Opera	itor (2)) 701e d	ee C	EIV	ED			
Agencies Notified	Type Notification		1 87	Street Ad 53 Mini	dress sink Roa	ad	-	A dimen	##T =	9 PM	2: /5	î		
EPA DEP DOL	Amended Amendment				e, Zip Cod , NJ 075			4.9 <u>36</u> &	STOS	NSING B CON	TROL	•6		
DOH DCA	Emergency (justification) Cancellation	W- 20	1,100	Name of David E	Contact Egarian				Tele	ohone Nui	nber			
Name of Facility Where	Abatement is Takin	g Place (3)		FACIL	ITY INFO	RMATION	Т	ype of Facility (4	4)		8-10-2			
House Street Address 53 Minisink Road		*		(d)				School (K-1) Subchapter Other (i.e. p	8 (Othe			ings,	home	s,
City (5) Totowa							0.000	etc.) Square Feet N/A	# of N/A	Floors	17 19 19 19 19 19 19 19 19 19 19 19 19 19	dg. A	ge	
County (6) Pasaic	-			County C	ode (7) SE ONLY)			Current Use (Pric	or if bein	g demolis	hed)			
Name of Monitoring Fi N/A	rm Hired by Building	Owner (8)	-	ASCM	No.	100000		Abatement Con batement, In	Charles and Control of the Control	9)				
Street Address								^{ddress} sengren Aver	nue					
City, State, Zip Code								te, Zip Code a, NJ 07512						
Project Manager for M	onitoring Firm			Telephor	ne No.		750	ne No. 45-8685		License N #00675	lo.			
Start Date (10) 10/06/14		Scheduled 10/07/14		pletion [Date (11)	100000		OSHA Monitor Abatement, In	iC.					
Occupancy Status Du	ring Abatement (Checacated During Entire	50 S		ent		1700		^{ddress} sengren Aver	nue					,
	rmed Outside of Norr					10000	2000	ite, Zip Code a, NJ 07512						
Scope of Work (Check	(All That Apply)	Пр	enova	tion			П	Full Containme	ent with	Negative	Pressu	e.		
≥3 sf or ≥3 lf ≥160 sf or ≥260 l	f a	-	emoliti				×	Mini-Enclosure Glovebag Prod Non-Exempted	e cedure				е	
			ocati			*						Abate		
Asbestos-Containi <u>TO BE A</u> In Fa	ion of ng Material (ACM) ABATED acility 3)	Used Mair Custo	ormali Sole ntenar odial S (12)	ly by nce/		Descrip os Containir thermal syst surfacing other misce	ng Ma tems i , VAT	iterial (ACM) insulation, , or	(S	mount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
base	ment	Yes	X	INA		pipe ins	sulati	on	14	O LF	Х			
Name of Registered V			670	IJDEP W		Cubic Yar	ds	W page 2	1000 N. T. S.	red Landf				
D&S Abatement, I	nc.			20996		TBD	Onto	City, Stat	6	gement (DT PA			
City, State Totowa, NJ						Disposal D	Jale 	Tullyto		١.				
Completed by Deanna Brkusanir	1	Title Projec	Title Project Manager Signature Signature Project Manager Signature Project Manager											

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

MO#21901449150			(F	ursu;	ant to N.	JAC 8:60 and 5:	16)	Er	mergeno	у по	ifica	tion
Date of Notification (1)			-	Nan	ie of Bulld	ing Owner/Operator	(2)	APPHON			7	
10/	06 ,	14		1	iam Hick		NA	Deptoof Health &	Senior S	ervira	46	ě
Agencies Notified	Type Notificat	ion			et Addres			MAY COND	Men		"	
□ EPA	⊠ Initial		707	27 F	ast 43rd	Stroot		(6ignatur	(0)	(5)		
⊠ DOLWD	Amended Amendmen	الد + ۵			State, Zi		Da	10614	Time: 0	-18	MM	1
DCA	Emergend			1	onne, NJ						_	1
(NJAC 5:23-8)	justification	2)	·14	Nan	e of Cont	act		Talephone	Number			
	Cancellatio	מל		Will	iam Hick	:5		1	144010101			
				F.	ACILITY	INFORMATION				100		+-
Name of Facility Where A	batement is Ta	king Pla	(E) ec	-			Type of Fa	cility (4)	-			-
Private home Street Address							School	(K-12)				į
Parameter Section Control Control							- Subcha	pter 8 (Other than I	<-1 2)			-
27 East 43rd Street City (5)							pomes,	.e., private and cor	umercial	ibliud	ìΩs,	l
Name of the state				5.77			Square Fee		- T	Bidg.	Age	
Sayonne, NJ 07002 County (6)												
Hudson				Cor	inty Code () (STATE USE ONLY)	Current De	e (Prior if being de	molished)		-
Name of Monitoring Firm	Hirad by Buildin	ia Dwne	- 78)	ASCN	4 51-				. O		2014	-
			(0)	ASCI	NQ,	Name of Abatem	ient Contracto	ग (9)	Sola			
Straet Address		al and a service of				Gr Tech LLC Street Address			-0	Ś	130	. i
											1	1
City, State, Zip Code						576 Valley Rd	#283		Me		ف	
	18.					Wayne, NJ 074			500		7	
Project Manager for Monit	oring Firm	**************************************	Tef	ephone	No.	Telephone No.	70	License No		<u></u>	·	
	Ç.					973-638-1777			7	J		
Start Date (10)	Sc	heduled I	Compli	ofion D	ate (11)	Name of OSHA	Manitor	01127		2	CO	-
		10	/_0	8_/	14	_Envirovision Co						į
Occupancy Status During	Abaiement (Ch	eck only	one)			Street Address	Jasareanis, in					1
☐ Abatement Performed	Outside of Now	Period o	Abate	ment		20-21 Wagaraw	Road Blde	# 34 A	12			
Time of Abatement:	AM-	_PM/	ty Hou	rs - De	SCribe AM	City, State, Zip C	ode	-H J-TPL				
Scope of Work (Check all I						Fair Lawn, NJ 0	7410					1
⊠ >3 sf or >3 lf	wer at his					Clean u	p and deconte	minetion with nega	ative pres	sure	-	
△ > 51 or > 31 f ≥ 160 sf or > 260 ff		⊠ R	enovat emolitic	ion		ם ותוועו ו	Hosure	Negative Praesure				
		الما ليسلا	≑illOlitli	эn		Gloveba Non-Eve	g Procedure	Tent with Nega Non-Friable Proce	tive Pres	sura		
	Western IV		s Loca		1		mpled () and	Non-i-riable Proce	_		<u> </u>	
Location of Asbestos-Containing M	f aterial cacture	Uni	Norma ad Sole	lly alv iso	200000	Description of	of				ent T	ype
TO BE ABAT	ED	Ma	aintena	ince/	Asbe	estos Containing Ma e., thermal systems	terial (ACM)	Amount	Remova	Repair	Encapsulate	503
IN Facility (13)		Cus	todial (12)	Staff?	1	surfacing, VAT	pr	(Specify SiF or LF)	VQT)air	305	Enclosure
		Yes	No	I NUM	1	other miscellane	ous)		1 00		ulate	2
asement		T Tes		N/A	ļ	-					i	
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										F		
*								1		1	무	믬
lame of Registered Waste	Hauler		NJE	DEP Waste	Hayler 10 No	. Cubic Yards of Wast	e Name of P.	egistered Landfill	لبالسا	الا	إللا	إيلا
r Tech LLC				03378			1					
City, State				37376	Ÿ	TRD Disposal Date	T.R.R.F. In	IC CONTRACTOR OF THE PARTY OF T				
ayne, NJ 07470						100 1000 1000 000 000 000 000 000 000 0					į	
Completed By (Print or Typ	e) Ti	tia				TBD Signature	Tullytown,	, PA				
Jevtic	0	wner			20	Signature /	1. 6.	p 8	Date			
iB-41	10,					7/3	y be 16	engol	10/06/2)14		
GY 11		" Do no	1 220 17	nis form	for ashes	tos licansure etemni	ad antherin-					

(K 1648

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

Date of Notification	(1)		1	Name	e of Bu	ilding	Owner / Operator	(2) 20	14 OCT -9	PM	2: :	0		
	9/30/2014		9	Sam	Ollie		2-20-	20	11 001 - 5	1 17	7. 1	3		
Agencies Notified EPA	Type Notifica	ation			t Addr			A.S	SESTES	CON	TR()L		
☐ DEP			(City,	State 8	Zip C	ode		& LICE	MSIN	G			
□ DOL	☐ Ame	nded			bertvi		J							
□ DOH		gency	I	Nam	e of Co	ntact				Tele	epho	ne N	umh	2
☐ DCA	Cano	ellation		Sam	Ollie									
				FΔ	CILIT	YINE	ORMATION			-			1000	
Name of Facility W	here Abateme	ent is Taking Pl	ace (3		VILIT	1 1141	Type of Facilit	ty (4)			1000			
Residence		ancio rannigi.	٠, ٥٥٠	-,			School (K							
Street Address	,		11-2-3				Subchapt	ter 8 (Other tha	an K-12)					
1519 Rt 179								. private & cor	The state of the s	dings,	hom	es, e	tc.)	
							Square Feet	# of Flo			J. Age			
City (5)		County (6)	Co	unty	Code	(7)	2000		3		S 4336.,	+08		
Lambertville		Hunterdon				. ,		Prior if being d	2000					
Lamborevino		lancordon					Residence							
Name of Monitoring	Firm Hired b	v Building Owr	ner (8)		ASC	M No.		ement Contrac	ctor (9)					
Traine of mornioning	, , , , , , , , , , , , , , , , , , , ,	, banang ow	101 (0)		,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		IRONMENT						
Street Address							Street Addres							-
							2129 Rt 33							
City, State & Zip Co	ode						City, State & 2	Zip Code						
							Hamilton, N	J				040		
Project Manager for	r Monitoring F	irm	Telep	ohon	e Num	per	Telephone Nu		Licens					
							215-295-100	14			0122	2		
Scheduled Start Da		Scheduled Cor	npletio	on Da	ate (11)	Name of OSH							
10/8/201		10/9/2014					EMSL Analy	rtical						
Occupancy Status					una de companyo		Street Addres	_						
		During Entire P					107 Haddon							
	Performed O	utside of Norm	al Ho	urs –	- 7am t	o 3pm	City, State & 2	.95						
Describe:							Westmont,	NJ 08108						
	cupied During						. 1							
Scope of Work (Ch	eck all that ap	oply)						□ Full Cor	ntainment wit	th Noa	otivo	Dros	cura	
≥3 sf or ≥3	ıŧ			Po	novatio	22		Mini-En		urivey	alive	ries	Suic	
23 si 0i 23			A		molitio				Bag Procedur	20.				
)O 11			De	montio	11			173			_		1000
						-			empted and					
10%3	ocation of tos-Containin	~	50.000	Loca	Used		Description Asbestos-Conf		Amour (Specif		Aba	item	ent i	ype
	terial (ACM)	g		olely			Material (AC		SF or L				т	_
	BE ABATED				nce or		(i.e., thermal sy			,	Remova	R	Encapsulate	Enclsoure
i	n Facility		Cust		Staff?		insulation, surfac				Non	Repair	psu	Sou
	(13)			(12)			or other miscella	aneous)			a	-	late	9
			Yes	No								_		
Basement			Ш				Pipe Insula	tion	185lf			Ш	Ш	Ш
4.														-
				L		<u> </u>	18	I		CII				
Name of Registered	d Waste Haul	er		1000	JDEP		Cubic Yards of Waste	Name of Reg	istered Land	Tilli				
ALPHA ENVIROI	UMENTAL				03333		1cubic	Grows Lan	dfill					
City, State	AINITIAIAT			0	00000	-	Disposal Date	City, State	QIIII					
Oity, Glate							Disposai Date	ony, orace						
Trenton							Various	Morrisville,	PA					
Completed By (Prin	it or Type)			T	itle		Signature			1	Date			
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2464

Print Form

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

RECEIVED

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		NAME AND POST OF PERSONS ASSESSED.			No		inche No.		i cene	ec No.			
Project Manager to	thornoring Firm		11	e approve	1		-294-1757		C002				
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State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

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

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Date of Notification (1)	October 6, 201	4		e: "	Name	of Building	Owner/Oper Semin	ator (2) ole Construction	801.	21	VE 3	03/	7
Agencies Notified [X] EPA [DEP	1 5 5	l Notific	ation tification		Street .	Address	128 Ba	artlett Avenue	2014 007 -		M 2		
[x] DOL	Ame [x] Eme	ndment # rgency (i			City, S	tate, Zip Co		Creek, NJ 08092	ASSESTE & LICI	S C(ENS	DHTI	ROL	
[x] DOH [] DCA		fication) cellation			Name	of Contact Joyce	Corliss		Telepi 60°				į
<u> </u>	1,002			FAG	CILITY	INFORM	IATION						
Name of Facility Where R	Abatement is Taking esidence	Place (3)					Type of Facility (4)	School (k-12)				
Street Address	38 Fort Avenue							[] [x]	Subchapter 8 (of Other (i.e., priva		85		dings,
City		Count	ty (6)			Code (7) E USE ONL	ν)	Square feet 2000 sf	homes, etc.) # of Floors	Bld	g. Age		
Ortley Bea	ach	Ocea	ın		(011111	OUL ONL	.,	Current Use (Prior Reside	if being demolished)		60	
Name of Monitoring Firm	m Hired by Building	Owner (8	3)		ASCM	No.	Name of	Abatement Contracto		Inc			
Street Address			num.				Street Ad	dress	Route 9, Unit 61				
City, State, Zip Code	***************************************		=				City, State	e, Zip Code			755 1	271	
Project Manager for Mon	nitoring Firm		Telephone	Number			Telephone	Number	River, New Jers License N 00624			2/1	
Scheduled Start Date (10 10/7/1			Scheduled		ion Date (11)		OSHA Monitor	.L. Analytical				
Occupancy Status During)				Street Ad		rinary trous	5.00			
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^{*}Do not use this form for asbestos licensure exempted activities.

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

GAC Project # 060-14 Date of Notification (1) Name of Building Owner/Operator (2) October 6, 2014 RUTGERS, THE STATE UNIVERSITY OF NJ Agencies Notified Notification Type Street Address DEPA ☑ Initial Notification ENVIRONMENTAL HEALTH & SAFETY DEPT. DCA ☐ Amended Notification # 27 ROAD 1, BLDG 4086, LIVINGSTON CAMPUS X DOL ■ Emergency (including City, State, Zip Code X DEP- No Longer REQUIRED PISCATAWAY, NJ 08854 justification) X DOH Tolopha- " □ Cancelled Name of Contact MICHAEL SMITH, ENV. **HEALTH & SAFETY** FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) BLUMENTHAL HALL, BLDG# 7493 ☐ School (K-12) ☐ Subchapter 8 (other than K-12) Street Address X Other (i.e. private & commercial buildings, homes, etc.) **NEWARK CAMPUS** Sq. Feet: N/A # of Floors: 4 Bldg. Age: 80+ years City (5) County (6) County Code (7) NEWARK **ESSEX** (State Use Only) Current Use (prior if being demolished): ACADEMIC Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Contractor (9) Cardno ATC 0098 GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address Street Address 3 TERRI LANE 268 MAIN STREET City, State, Zip Code City State, ZipCode BURLINGTON, NJ 08016 BUTLER, NJ 07405 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number **BRIAN KEARNY** 609-386-8800 973-492-0477 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 10/17/14 10/20/14 ENVIROVISION, INC. Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 20-21 WARGARAW ROAD ☐ Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code Describe ☑Other - Describe: Shift Hours: 5:00 PM - 5:00 AM (24 hours as needed) FAIRLAWN, NJ Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure \square $\geq 3 \text{ sf or } \geq 3 \text{ lf}$ □ Renovation Mini-Enclosure ≥ 160 sf or ≥ 260 Demolition Glovebag Procedure ■ Non-Exempted (*) and Non-Friable Procedure Location of Asbestos-Containing Is Location Normally Used Description of Asbestos Containing Material Amount Abatement Type Material (ACM) in Facility (13) (ACM) (i.e. thermal systems insulation, surfacing, Solely by Maint./Custodial (Specify SF Remove Repair Encap Enclose Staff? (12) VAT, or other miscell.) or LF) YES NO NA Room 102L X VAT 300 SF X NJDEP Waste Hauler ID # Name of Reg. Waste Hauler Name of Registered Landfill Cubic Yards of Waste: 10 CY See Hauler Below #1 & 2 G.R.O.W.S. North Landfill See Below Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405, NJDEP # 28969 Disposal Date City, State 100 New Ford Mill 10/20/14 Rd. Morrisville, Pa Hauler #2) STG - P.O. 2132, Bristol, Pa 19007, & 58 Pyles Lane, New Castle, De 19720 19067 NJ DEP# 20990 215-736-1700 Completed by (Print or Type) Date RAYMOND C. PEDALINO SENIOR PROJECT October 6, 2014 Raymand C. Pedalins MANAGER

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

GAC Project # 060-14 Name of Building Owner/Operator (2) Date of Notification (1) October 3, 2014 RUTGERS, THE STATE UNIVERSITY OF NJ Agencies Notified Notification Type Street Address ☐ EPA ☑Initial Notification ENVIRONMENTAL HEALTH & SAFETY DEPT. DCA ☐Amended Notification # 27 ROAD 1, BLDG 4086, LIVINGSTON CAMPUS X DOL City, State, Zip Code □ Emergency (including PISCATAWAY, NJ 08854 X DEP- No Longer REQUIRED justification) Telephone Numb X DOH Name of Contact □ Cancelled MICHAEL SMITH, ENV. **HEALTH & SAFETY FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) **BECK HALL BLDG# 4145** School (K-12) ☐ Subchapter 8 (other than K-12) Street Address Other (i.e. private & commercial buildings, homes, etc.) LIVINGSTON CAMPUS Sq. Feet: N/A # of Floors: 3 Bldg. Age: 60+ years City (5) County Code (7) County (6) (State Use Only) **PISCATAWAY** Current Use (prior if being demolished): ACADEMIC **MIDDLESEX** Name of Monitoring Firm Hired by Bldg. Owner (8) Name of Contractor (9) ASCM No. ATC ASSOCIATES 0098 GREENWOOD ABATEMENT CONSULTANTS INC. Street Address Street Address 1 = City 3 TERRI LANE Solu M 268 MAIN STREET - U City, State, Zip Code City State, ZipCode - T BURLINGTON, NJ 08016 BUTLER, NJ 07405 License Number Project Manager for Monitoring Firm Telephone Number Telephone Number **BRIAN KEARNEY** 609-386-8800 00840 973-492-0477 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 10/17/14 10/20/14 ENVIROVISION, INC. Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 20-21 WARGARAW ROAD □ Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code ☑Other - Describe: Shift Hours: 5:00PM - 5:00AM FAIRLAWN, NJ Scope of Work (Check all that apply) Full Containment with Negative Pressure □ Renovation Mini-Enclosure -WRAP & CUT ≥ 3 sf or ≥ 3 lf □ > 160 sf or > 260 ☐ Demolition Glovebag Procedure ■ Non-Exempted (*) and Non-Friable Procedure Location of Asbestos-Containing Is Location Normally Used Description of Asbestos Containing Material Amount Abatement Type (Specify SF Solely by Maint./Custodial (ACM) (i.e. thermal systems insulation, surfacing, Material (ACM) in Facility (13) Remove Repair Encap Enclose Staff? (12) VAT, or other miscell.) or LF) YES NO MER 017 X TSI <9LF NJDEP Waste Hauler ID # Name of Registered Landfill Name of Reg. Waste Hauler Cubic Yards of Waste: 5 CY G.R.O.W.S. North Landfill See Hauler Below #1 & 2 See Below City, State 100 New Ford Mill Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 Disposal Date NJDEP # 28969 10/20/14 Rd. Morrisville, Pa Hauler #2) STG - 58 Pyles Lane, New Castle, De 19720 19067 NJ DEP # 20990 215-736-1700 Completed by (Print or Type) Date October 3, 2014 RAYMOND C. PEDALINO SENIOR PROJECT Raymand C. Pedalino MANAGER

CK 7000912

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

Date of Notification (1) Name of Building Owner/Operator (2) Paulsboro Refining Company 10/2/14 2014 CCT -9 PM 2: 20 Street Address Notification Type Agencies Notified 800 Billingsport Rd (X) Initial Notification () EPA ASSESTOS CONTROL () Amended Certification () DEP City, State, Zip Code (X) DOL () Cancelled Paulsboro, NJ 08066 & LICENSHIG (X) DOH () DCA Name of Contact Ravi Jarecha **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) () School (K-12) Paulsboro Refining Company () Subchapter 8 (other than K-12) (X) Other (i.e. private & commercial bldgs., homes, etc. Street Address 800 Billingsport Rd # of Floors N/A Sa. Feet N/A County Code (7) City (5) County (6) Bldg. Age N/A Paulsboro Gloucester (State Use Only) Current Use (prior if being demolished) Oil Refinery Name of Monitoring Firm Hired by Bldg, Owner (8) ASCM No. Name of Contractor (9) K A Industrial Services LLC KA Industrial Services, LLC. Street Address Street Address 800 Billingsport Rd 800 Billingsport Rd City State, ZipCode Paulsboro, NJ 08066 Paulsboro, NJ 08066 Telephone Number License Number Project Manager for Monitoring Firm Telephone Number 856-224-4392 00857 Scott Dechant 856-224-4385 Name of OSHA Monitor Scheduled Completion Date (11) Scheduled Start Date (10) K A Industrial Services, LLC 10/17/14 10/24/14 Street Address Occupancy Status During Abatement (Check only one) () Facility Closed/Vacated During Entire Period of Abatement 800 Billingsport Rd () Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code (X) Other - Describe - Removal of ACM within restricted work area in outside Paulsboro NJ 08066 areas Source of Work (Check all that apply) (X) Demolition () Renovation () Large Proj. (160 SF or >260 LF ACM) (X) SM Proj. >25<160 SF or >10 <260 LF ACM) () Minor Proj. (<25 SF or <10 LF ACM) () Full Containment with Negative Pressure (X) Mini-Enclosure (X) Glovebag Procedure Is Location Normally Used Abatement Type Location of Asbestos-Description of ACM (i.e. Amount (Specify SF or LF) thermal systems insulation, Containing Material (ACM) in Solely by Maint./Custodial surfacing, VAT, or other Facility (13) Staff? (12) Rep. Encap Enclose Rem NO misc.) YES Approx 100 LF X X Pipe Insulation PDA Pipe - Gas Line over Street and past cooling tower Cubic Yards of Waste Name of Reg. Landfill Name of Reg. Waste Hauler NJDEP Waste Hauler ID # Gloucester County Landfill 17273 < 1 CY Waste Management, Inc. Disp. Date City, State South Harrison, NJ Various South Harrison, NJ Signature **Date** Title Completed by (Print or Type) 10/2/14 ANDREW GREEN MANAGER - KA Industrial Services Site Operations Supervisor

Mail to: NJDE

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

C:\WORD\MYDOCS\ASBESTOS 9/18/00 (K13663

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

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Agencies Notified	Type Notification		Street Ad 25 Mai	dress n Stree	t	2014	OCT -	9 PM 2	לפ:			
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DOH DCA	Emergency (justification) Cancellation	including			е		& LTE	FRARA NA	nhor	20.		
	DEP DOL Amended Amendment # Emergency (including justification)	RMATION	1150 Line 1									
Former Manfroto		g Place (3)				Type of Facility School (K-	12)	er than K-1	2)			
	Avenue		, T			Other (i.e. etc.)	private 8	& commerci	al build			es,
City (5) Ramsey	*					Square Feet 35,000	# of	f Floors		ldg. A 60+yr		
County (6) Bergen						Current Use (P Warehouse	rior if bei	ng demolisi	hed)			
Name of Monitoring F N/A	irm Hired by Building (Owner (8)	ASCM	No.	Name Fini	of Abatement Co shing Touch A	ontractor sbesto	(9) s Abatem	nent C	orp.	,Inc.	3
Street Address			11			t Address Broadway, Ui	nit A					
City, State, Zip Code					City, S Lon	State, Zip Code g Branch, NJ	07740		-866			
Project Manager for N	Monitoring Firm		Telephon	ne No.		hone No. .222.8372		License N 00040	10.			
Start Date (10) OCT. 20, 2014				Date (11)	Name N/A	of OSHA Monito	r					
	uring Abatement (Chec	k Only One)			Stree	t Address						
Abatement Perfo	ormed Outside of Norm	nal Facility Ho			City,	State, Zip Code			2000			
Abatement Perfo	ormed Outside of Norm	nal Facility Ho			City,	State, Zip Code						
Abatement Performance Abatement Performance Other – Describe Scope of Work (Chect ≥3 sf or ≥3 lf	ormed Outside of Norm e: k All That Apply)	nal Facility Ho	ovation		City,	Full Contains Mini-Enclosu Glovebag Pr	re ocedure					
Abatement Performance Abatement Performance Other – Describe Scope of Work (Chect ≥3 sf or ≥3 lf	ormed Outside of Norm e: k All That Apply)	Renc Dem	ovation olition		City,	Full Containr	re ocedure				77	t
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Abatement Performance Abatement Performance Cother – Describe Scope of Work (Check ≥3 sf or ≥3 lf ≥160 sf or ≥260 Loca Asbestos-Contain TO BE In Formance (1) Warehouse	ormed Outside of Norme: k All That Apply) If tion of ing Material (ACM) ABATED acility 13) Main Floor	Rend Dem Is Loc Norr Used S Mainte Custodia (1) Yes N	ovation olition cation nally olely by nance/ al Staff? 2)	(i.e.	Descriptio tos Containing thermal systen surfacing, V. other miscella	Full Contains Mini-Enclosu Glovebag Pr Non-Exempt n of Material (ACM) ns insulation, AT, or neous)	A (S SF	mount Specify F or LF)	Removal x	cedur Abate Ty	emen /pe	T
Abatement Performance Abatement Performance Cother – Describe Scope of Work (Check ≥3 sf or ≥3 lf ≥160 sf or ≥260 Loca Asbestos-Contain TO BE In Formance (1) Warehouse	ormed Outside of Norme: ck All That Apply) If Ition of a control (ACM) ABATED acility 13) Main Floor Waste Hauler Asbestos Abateme	Rend Dem Is Loc Norr Used S Mainte Custodia (1) Yes N	ovation olition cation mally olely by nance/ al Staff? 2)	(i.e.	Description tos Containing thermal system surfacing, Vother miscellar VAT	Full Contains Mini-Enclosu Glovebag Pr Non-Exempt n of Material (ACM) ns insulation, AT, or ineous) Name of TRRF e City, St	A (S SF - 6,1	mount Specify F or LF) 628 sf	Removal x	cedur Abate Ty	emen /pe	T