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Agencies Notified	Type Notification			reet Add Shirle	dress y Lane						0 - 1			å	
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☐ DCA	Cancellation		1	om			ON						_		_
Name of Facility Where Arthomas Phelan Pr		Place (3)		FACIL	ITY INFOR	MAII	ON	☐ S	of Facility (4) chool (K-12 ubchapter 8) 3 (Othe	er than K-1	12)			
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City (5) Manahawkin NJ 08	091			3-0.0				Square 1000		# of	Floors	100	dg. A 5+	ge	
County (6) Ocean				ounty C	ode (7) SE ONLY)			Currer	nt Use (Prior	r if beir	ng demolis	shed)			
Name of Monitoring Firm	n Hired by Building C	wner (8)		ASCM	No.			of Abat aco In	ement Cont	ractor	(9)				
Street Address								Addres Box 32							
City, State, Zip Code		127.79						state, Zi t Berlii	p Code n NJ 0809	91					
Project Manager for Mo	nitoring Firm		T	elephor	ne No.			753-9			License 00727	No.			
Start Date (10) 10/16/13		Scheduled		pletion [Date (11)		Name Sam		IA Monitor						
Occupancy Status Durin	ng Abatement (Check						Street	Addres	s						
Facility Closed/Vac	cated During Entire F ned Outside of Norm	Period of A	batem	ent		_	City, S	State, Zi	p Code						
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City, State Elm NJ				(t)			osal Dat 22/13	е	City, Stat Morrisv		A 19067	7			
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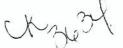
^{*} Do not use this form for asbestos licensure exempted activities.

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, ~	Name of Facility Where Abatement is Taking F	Place (3)		FACIL	TY INFORMATIO		of Facility (4)		•			\dashv
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6	Somerset	(0)	(3	ASCM	SE ONLY)	Name of Ab	atement Conti	actor (9)			_	\dashv
\vee	Name of Monitoring Firm Hired by Building Ov	- 0 -	.	ASCIVI	NA	FP	and the same of th	hoolog	ie S		En	
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10	P.O. Box 33	7				City State,	Box C	ץ עכ				
6	City, State, Zip Code	NZ	7	380	533	New		211 4e	0	35	3.	3
	Project Manager for Moralthril gr Firm		1	elephon		Telephone	No.	License No	9	a	U	
, <u>z</u>	Steve Schenker	b	6	09	758-3365		8-336 SHA Monitor	5 00) (1	_
3	Start Date (10)	Schedule	3/	13	ate (11)	_		mologies	\mathcal{I}	10		
8	Occupancy Status During Abatement (Check	Only On	e)			Street Addr	ess				- 189/2	
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10	☐ Abatement Performed Outside of Norma ☐ Other – Describe:	I Facility	Hours				Egypt	ALT	283	53	3	
Z.	Scope of Work (Check All That Apply)		•			1	- JAP!	700 0	/ 0 \			
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\circ	EPC Technologies	>		170		sąl Date/	City, Stat	е		٠ ٠	c 1	1
	City, State New Egypt	NJ			10	131/13		isville 1	PA		_	
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Project Manager for Month of gr inn	P		Telephon	- No. 7 <i>58-</i> 3365	Telephon	58-336	5 Licanus No	5.3	39	4	
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Street Address 11 Shirley Lane							X Of	ubchapter { ther (i.e. pr c.)	ivate &	con	nmercia	buildi	ings,	home	s,
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Street Address						200000000000000000000000000000000000000	Address 30x 329								
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Project Manager for Monitoring Firm		T	elephor	ie No.		1	none No 753-98				ense No 727).			
	Schedule 10/22/1		pletion [Date (11)		Name		A Monitor							
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Project Manager for Monitoring Firm	=======================================	T	Telephon	e No.		hone No -753-98			Licens 0072					
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CHECK # 1007

Date of Notification (1) 10-3-13					Owner / Operato			- 1	II.	i i	1	
Agencies Notified Type Notification				ress	Liability ITalis	olei -			***	4	. 1	
Ĭ EPA ″					s Rd., Suite 300	6			_			
☐ DEP ☐ Initial	C	City,	State	& Zip	Code	5 H W	001	i 0 201	3,		ĺ	
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☐ DOH ☐ Emergency	1 2012			contact		N.		Te	elenho	ne N	umb	er
☐ DCA ☐ Cancellation	F			ı, ELT		, (d)		ş				
		FA	CILI	TY INF	ORMATION					-A.B/P-V-	4	
Name of Facility Where Abatement is Taking P Building #15, former ASARCO facility	lace (3))			Type of Facil School (S = 11			
Street Address	- 100, 				☐ Subchap	oter 8 (Other th	nan K-12)					
1160 State Street					Other (i.e	e. private & co	mmercial	buildings	s, hom	es, e	tc.)	
					Square Feet	# of Fl	oors	Blo	ig. Ag	е		
City (5) County (6)	Cou	inty	Code	(7)	NA	=	NA	N/	4			
Perth Amboy Middlesex	NA				Current Use ((Prior if being	demolishe	ed)				
				1.	None							
Name of Monitoring Firm Hired by Building Own	ner (8)		AS	CM No	Mid Atlantic	tement Contra C Abatement						
Street Address					Street Addres PO Box 131							
City, State & Zip Code					City, State &							
() () () () () () () () () ()					Cherry Hill,							
Project Manager for Monitoring Firm	Teleph	none	Num	nber	Telephone Nu	umber	Lic	ense Nu				
Scheduled Start Date (10) Scheduled Cor	npletion	n Da	te (1	1)	609-567-095 Name of OSH				0118	7		
9-6-13 10-18-13	50				EMSL Analy		are tar					
Occupancy Status During Abatement (Check or Facility Closed/Vacated During Entire P	nly one) eriod o) f Aba	atem	ent	Street Addres			1 03 800				
Abatement Performed Outside of Normal	al Hou	rs –	7am	to 3pm								
Describe:					Westmont,							
☐ Facility Occupied During Abatement												
Scope of Work (Check all that apply)							19000001 00			2000		
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≥3 sf or ≥3 lf	Ц		ovati	43/00/0			nclosure		11.5			
≥160 sf ≥260 lf	\boxtimes	Den	nolitio	on			Bag Proce					
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(13)		No	N/A	1	or other miscella	aneous)			<u>a</u>	7	Encapsulate	īe
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Bull Waste & Recycling, LLC City, State				*	400 Disposal Data	G.R.O.W.S.						
1			8		Disposal Date	City, State	D.4					
Berlin, NJ					10-18-13	Morrisville,	PA		,			
Completed By (Print or Type) Theodore S. Budzynski		Titl		ar e	Signature				Date	42		
Theodore of Budzynski		Ge	ii. IVI	gr.				> 1	10-03	-13		
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		SACILITY I	HEORMATION			
		FACILITI	TO CIONATION	Type of Facility	721	
Name of Facility Where Abatement is	Taking Place (3)			1 /4/6		
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Ciry (5)				1000	<u> </u>	40+
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County (6)		USE CYLY	s (1) (317.1C	2/10	CANT	
CARE MAY						
Name Di Marionna Firm Hired by Bu	iding Owner	ASCAL No.	Name of Abater	reni Convego (9)	61	
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(8)			Sveel Address		- 1	
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City State Zip Code			MAR	DID CHAI	DEINJO	803 -
City 23te Db Cont			_		License No	
- Lineited St. Firm	. 101	ephone Ho	Telephone No.	79-047.2	0044	14
Project Manager for Monitoring Firm	\·\					
	Scheduled Compi	eipo Daie (11)	Harra of OSHA	Moning /	/	
Sian Date (10)	5000000000		Ins E	PKHLEM	~1	
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Emergency +

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

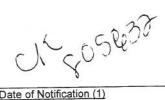
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Date of Notification (1) 10/7/13					Building Ov ino Priva			(2)								
Agencies Notified	Type Notification		1 12	Street Add 1275 M	dress ill Creek				i E		ĒŪ.	W			or seeking	
EPA DEP DOL	Initial Amended Amendment				e, Zip Code awkin No		50		11 "	nrt	10'	2012			TWO SEAL YORK	
ĭ DOH □ DCA	Emergency (i justification) Cancellation	ncluding	8	Name of (Contact	-		4000			phone N		-		ALTO MANAGEMENT	
				FACIL	ITY INFO	RMATIC	N				. I					
Name of Facility Where A	(A) (A)	Place (3)						☐ so	f Facility (4 chool (K-12	2)	Ŋ.				<u>.</u>	
Street Address 1275 Mill Creek								⊠ or et	ubchapter (ther (i.e. pr c.)	rivate &	comme					s,
City (5) Manahawkin NJ 08	050					70		Square 1000-		# of 1	Floors		35	lg. Aç +	je	
County (6) Ocean				County C	ode (7) SE ONLY)			Curren	t Use (Prio	r if beir	ng demol	lished)				
Name of Monitoring Firm N/A	n Hired by Building (Owner (8)		ASCM	No.		1000 mentales	of Abate aco Inc	ement Con	tractor	(9)					
Street Address		La .						Address 30x 32								
City, State, Zip Code							133776	tate, Zip t Berlin	Code NJ 080	91						
Project Manager for Mor	nitoring Firm		1	Telephon	ne No.		2000	none No 753-98			License 00727					
Start Date (10) 10/8/13		Schedule		npletion [Date (11)		Name Sam		A Monitor							
Occupancy Status Durin	og Abatement (Chec	ALLOW ALLOWS ALLOW A					Street	Address	S							
Facility Closed/Vac	cated During Entire I	Period of A	batem	nent			City, S	state, Zip	Code							
Scope of Work (Check A	All That Apply)	37 334														
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf	44.77		tenova emolit				2	Mini	Containme i-Enclosure vebag Prod i-Exempted	e cedure					e	
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Name of Registered Wa	aste Hauler		3.2	NJDEP W		Cubic of Wa	Yards		Name of		ered Lan	ndfill				
United Containers			1 1 1 1 1 1 1 1 1	Hauler ID 2459	NO.	3			G.R.O.							
City, State Elm NJ						10/9/	sal Date /13	9	City, Star Morris		A19067	7				
Completed by Anthony T Perna	<u>a.</u>	Title Pres	ident				Signatur	е	e			Date 10/7		3		





Date of Notification (1) 10/7/13				uilding Ow helan Pr											
Agencies Notified Type Notification			reet Ado		ivato	1101110	()		0	CT-	10	2013	}	-	
Parameter 1		A	Ruth L						98			Н			-
EPA Initial DEP Amended Amendment #_				, Zip Code wkin NJ		91			124			ý.			- Fabruaria
Emergency (inc	luding	Na	ame of C	Contact					Telep		e Numb	er		- SAMUA	-
DOH justification) Cancellation		T	om .												_
New of Facility Miles Abstract in Toking F	Place (3)		FACILI	TY INFOR	MATI	ON	Type of	Facility (4	1			-			-
Name of Facility Where Abatement is Taking F David Phelan Private Home	race (3)							chool (K-12							
Street Address					William =		☐ St	bchapter 8	(Other	tha	n K-12)	L.mat			
8 Ruth Lane							et	her (i.e. pr c.)					180801075		<u>'</u>
City (5)							Square 1000+		# of l	Floor	rs	35	lg. Ag	e	
Manahawkin NJ 08091				-d- (7)				t Use (Prio		a de	molishe		T		\dashv
County (6) Ocean			ounty Co	SE ONLY)			Home	Commission of the Commission o	i ii beiii	y uc	monsine	٠,			
Name of Monitoring Firm Hired by Building Ow	ner (8)		ASCM	No.	-	Name	of Abate	ment Con	tractor (9)					
N/A						Pern	aco Ind	D	16				٠		
Street Address							Address 3ox 329								
City State Zin Code							State, Zip	Y.				-	-		\dashv
City, State, Zip Code								NJ 080	91						
Project Manager for Monitoring Firm	*	T	elephon	e No.			none No 753-98			Lice	nse No 727	•			
7.170.7.707.707.3.707.4	Scheduled 0/22/13	300000000000000000000000000000000000000	oletion D	ate (11)		Name		A Monitor							
Occupancy Status During Abatement (Check	Only One)					Street	Address	3							
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe:	riod of Ab I Facility H	ateme	ent	-	<u></u>	City, S	State, Zip	Code							
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		novati molitic					Min Glov	Containmoi-Enclosure vebag Prod Exempted	e cedure						
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Location of	No	ocatio	y		D	escriptio	n of						Ту	pe	_
Asbestos-Containing Material (ACM)	Used Main	Solet			os Cor	ntaining	Material			mou	0.576	70		Ē	ш
TO BE ABATED In Facility	Custo		4000 V4000	(i.e. i	surf	acing, V		uon,		orl		Remova	Repair	Encapsulate	Enclosure
(13)		-			other	miscella	ineous)					val	=	ulate	ure
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Exterior Siding			X		Ext	erior S	iaing		12	00	5F	×	-		_
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United Containers		22	2459		3										
City, State Elm NJ						osal Dat 22/13	e	City, Sta Morris		A 19	9067				
Completed by Anthony T Perna	Title Presid	lent				Signatu	re ·	R			Da 10	ite)/7/1:	3		



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

Date of Notification (1) 9/26/2013					Name of Buildin Sunoco Partner	g Owner/C s Marketin	operator (2) g & Terminals	, L.P.	lla i	t" ji	W/ į	
Agencies Notified		Notification 7	Гуре		Street Address US Route 130 8			0				1:
(X) EPA		(X) Initial N				100 11 100 11 10 1011			<u>007</u>	100	013	
() DEP		() Amended () Cancelled		١	City, State, Zip (Westville, NJ 08						7.05	
(X) DOL (X) DOH		() Caricolic	u	1				Tel. Nur	nhor	-		
() DCA					Name of Contact Dorothy Rurak	<u> </u>		Jei. Nui	libei	Ψ.		
				FACILITY INF	ORMATION							minera al
Name of Facility Where Abs	atement is Ta g & Terminals	king Place (3 , L.P.	3)		Type of Facility () School (K-12) () Subchapter	2)	on K 12)					
Street Address					(X) Other (i.e.	orivate & c	ommercial bld	gs., hom	es, etc.			
US Route 130 & I-295					Sq. Feet_N/A		# of Floor	s N/A				
City (5) Westville	County (6) Gloucester		County Co (State Use		Bldg. AgeN/A	(Outside	demolished)_					
Name of Monitoring Firm H KA Industrial services, LLC	lired by Bldg.	Owner (8)	ASCM No	-			Name of Co K A Industria	ntractor (al Service	9) s LLC.			
Street Address 26 Colonial Ave					Street Address 800 Billingsport	t Rd						
City, State, Zip					City State, ZipC							
Woodbury Nj 08096 Project Manager for Monito	oring Firm T	Telephone I	Number		Telephone Nun				Numbe	er	08.0	
Scott Dechant		856-224-43	85		856-224-4392 Name of OSHA			00857				
Scheduled Start Date (10) 10/10/2013	eduled Start Date (10) Scheduled Completion Date (11)											
Occupancy Status During	Abatement (C	heck only on	ie)		Street Address							
() Facility Closed/Vacated () Abatement Performed	I During Entir Outside of No	e Period of A rmal Facility	batement Hours -					76-2-17				
(X) Other - Describe - Ext	erior abateme			stricted work	City, State, Zip	Code						
area, no other contractors Source of Work (Check all												
() Demolition (Y) Renov	ation		- 20		015 4 OM	Minor Dro	j. (<25 SF or <	10 I F A	CM)			
(X) Large Proj. (>160 SF () Full Containment ()	or >260 LF At Mini-Enclosu	CM)()SMPr re (X)G	oj. (>25<16 lovebag Pro	0 SF or >10 <26 ocedure	() ()							
Location of Asbestos-	Is Loca	ation Normall	y Used	Description of thermal system	ACM (i.e.	Amount	(Specify SF or	·LF)	Abater	nent Ty	<u>pe</u>	
Containing Material (ACM) Facility (13)) in Solely Staff?	by Maint./Cu (12)	stodial	surfacing, VAT	, or other	(Estimate	ed)		Rem.	Rep.	Encan	Enclose
17.78 88	YES	NO	NA	miscell.) Pipe Insulation	1 - TSI	~ 1,800	LF		X	TCD.	Litoup	1
4 pipelines in pipe rack ald Main Plant Rd east of form	ner	Х		ripe insulation	1-101	1,000						
Cat Unit		+	100									
											\vdash	-
Name of Reg. Waste Hau	ler	NJDEP Wa	ste Hauler I	ID#	Cubic Yards o			Name	of Reg.	Landfill	- 1611	
Waste Management, Inc.	<u></u>	17273			20 (estimated)			Glouce	ester Co			
<u>City, State</u> South Harrison, NJ		2		Disp. Date Various			City, Sta South H		NJ			
Completed by (Print or Ty	Completed by (Print or Type) Title							<u>Date</u>				
ANDREW GREEN	NDREW GREEN MANAGER - KAIS						1 111.	9/26/2	013			
2					Site &	perations	Supervisor					
							A-0.374041					
					\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \							

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

Date of Notification (1) 10/04/13 CK# 28	48 \$200				Building C eid Greis		Operator	(2)			ļ.	- 1				•
Agencies Notified	Type Notification		1.83	Street Ad 167 W	ddress ashingto	n Av	enue				0	CT	1 0	20	13	
DEP DOL	Initial Amended Amendment			City, Sta	te, Zip Coo New Je	de		-			زاا	U I		2		
DOH DCA	Emergency justification) Cancellation		100		Contact eid Greis	s				Tele	ephone	Numb	er	Ä		,,
				FACI	LITY INFO	RMAT	ION	-								
Name of Facility Where A Residence Street Address	Abatement is Takin	g Place (3)							of Facility (4 School (K-12 Subchapter	2)	ar than	K.12\				
167 Washington Av	enue							×	Other (i.e. poto)	rivate 8	comm	ercial	build	ings,	home	s,
City (5) Union, New Jersey	07083							Squar 2,250	e Feet)	# of	Floors			dg. A 5+	ge	
County (6) Union				County C	Code (7) JSE ONLY)			Currer	nt Use (Prio e	r if bei	ng dem	olishe	d)			
Name of Monitoring Firm N/A	Hired by Building	Owner (8)		ASCM	No.				ement Con oration	tractor	(9)		F-5132-45			
Street Address							Street	Addres		е						
City, State, Zip Code								State, Zi	p Code Park, Ne	w ler	sev 07	7424				
Project Manager for Mon	itoring Firm		1	Telephor	ne No.	-	Teleph	none No 225-84).	W OCI	Licens 0110	se No.				
Start Date (10) 10/14/13		Scheduled		pletion (Date (11)		Name	of OSH	A Monitor	Labs						
Occupancy Status During	Abatement (Chec	k Only One	2)				Street	Addres	s			·				-
Facility Closed/Vaca Abatement Perform Other – Describe: 9	ed Outside of Norn				87		City, S	State, Zi								_
Scope of Work (Check A						_	Unio	n, Nev	w Jersey	0708	3					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	и тпас Арріу)	-	enova emoliti				> >	Min Glo	Containme i-Enclosure vebag Proc n-Exempted	edure					e	
		ls l	ocati	on										Abate	ment	
Location			ormall Sole				escription					-		- I y	ре	
Asbestos-Containing <u>TO BE AB/</u> In Facili (13)	ATED		itenar	nce/		therma surf	ntaining Mal system acing, VA miscellar	s insula T, or		(5	mount Specify or LF)		Removal	Repair	Encapsulate	Enclosure
Baseme	ent	+ +	X	1		-	TSI			9	5 LF		X		Х	
	17778888888	1										-				
		+										-	-	-		
		1			(_				
Name of Registered Was	te Hauler			JDEP W		E-7402000000	c Yards		Name of F	Registe	red Lar	ndfill				
Lilich Corporation			auler ID 3724	No.	of W			G.R.O.V		andfill						
City, State Woodland Park, New	v Jersey 07424	. v		98			osal Date 8/13		City, State Morrisvi		ennsy	Ivani	а			
Completed by Tatiana Kalenikova		Title Vice F	resid	dent			Signature		Mel	Me	~	Date 10/0		3		