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Date of Notification (1)					Owner/Ope	erator (2)		I P has Left						
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Agencies Notified Type Notification			Street A		525250		2012 00	111	PM 2: 4	7					
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DOL Amendment		— <u> </u>	Peapac				& L	ICE!	KSING	48					
DOH justification)			Name of	Contact				Te	lephoneNun	n to a					
DCA Cancellation	1		Project	Manage	er			1, 17		****					
	DI (FACI	LITY INF	ORMATION	4	T	740							
Name of Facility Where Abatement is Takir		3)					Type of Facility	(4)							
American Cyanamid Superfund Site)						School (K-	Colored Company and Auran							
Street Address									ner than K-12 & commercia		dinas	home	29		
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County (6)			County (Current Use (Pr	ior if be	eing demolish	ed)		- 55			
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Name of Monitoring Firm Hired by Building	Owner (8))	ASCN	l No.	1	Name	of Abatement Co								
AET, Inc.			0021		T	he M	ACK Group, I	LC							
Street Address			0021				Address								
907 Doolittle Drive					11	500 K	ings HWY N	STE	209	52					
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Bridgewater, NJ 08807 Project Manager for Monitoring Firm			Telepho	no No			Hill, NJ 0803 one No.	04	License N	0					
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Eric Houseknecht	Cabadul		(908) 2°			-	759 - 5000 of OSHA Monitor		00781						
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10/15/2012	L	-	12/31/1	2			ACK Group, I	LC.					- 1		
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					C	herry	Hill, NJ 0803	34							
Scope of Work (Check All That Apply)	500					_	_								
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	10	s Loca Norma			700						Т	ype			
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Mike Cooper	Presid	dent			1	last,	//	~	10/	5/12					
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^{*} Do not use this form for asbestos licensure exempted activities.

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Date of Notification (1)			500000000000000000000000000000000000000		Owner/0	Operator (2)		-17 [المدأ				
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	ification)	,	FIRMANIA TO COM	of Contact				Tel	ephoneNu	mb	9			
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AET, Inc.			0021			100000000000000000000000000000000000000	CK Group, L		(-/					
Street Address			0021			Street Ac	The second secon	LU						
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Bridgewater, NJ 08807						100 (CANO)	Hill, NJ 0803	84						
Project Manager for Monitoring Fire	n		Telepho	ne No.		Telephon			License N	lo.				
Eric Houseknecht			(908) 2	18-1108		(973) 75	9 - 5000		00781					
Start Date (10)	Schedul			Date (11)			OSHA Monitor							
10/8/2012			12/31/1	12		The MA	CK Group, L	LC.						
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Mike Cooper	Presid	lent				1/2/1/		· ·	9/2	0/12				
		green files										_		

Date of Notification (1)	Name of Building Owner/Operator (2) Pfizer, Inc Street Address 100 US Highway 206															
September 04, 2012		l	Pfizer,	Inc			20	110 0 -		, o- (J					
Agencies Notified Type Notification			Street A	Address	9			IZ OCT	II P	M 2.						
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Somerset Name of Monitoring Firm Hired by Building	D		1001	4 NI=		_ : [Superfund Site								
	Jwner (8))	ASCN	II NO.			of Abatement Co		(9)							
AET, Inc. Street Address			0021				ACK Group,	o, LLC								
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907 Doolittle Drive							ings HWY N	, STE 2	209							
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Project Manager for Monitoring Firm		,	Telepho		9 800		ne No.		License I	No.						
Eric Houseknecht Start Date (10)	Cabadul			18-1108			59 - 5000		00781							
	Scriedui			Date (11)			f OSHA Monito									
September 21, 2012 Occupancy Status During Abatement (Chec	k Only O		ber 26	, 2012			ACK Group,	LLC.								
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Other - Describe:	ar r acint	y i louis	•				ate, Zip Code									
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Newark Carting / Rovic		450)9	3.00	3D	Cumber	land C	ounty La	andfill							
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^{*} Do not use this form for asbestos licensure exempted activities.



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□ DOH)			f Contact an Lync					Tel	ephone Nu	mber	(1)	
Name of Facility Where Abatement is Taki	na Diago (S		FACI	LITY INF	ORMAT	ION	T =						e Division	
Residence Street Address	ng Place (3	·)						of Facility (School (K-1	2)	er than K-1	2)			
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City (5) Haddon Heights					0.000		Squar 2400	e Feet	# o	f Floors		3ldg. / '5		
County (6) Camden				Code (7) USE ONL	n			nt Use (Prid dence	or if be	ing demolis	hed)			
Name of Monitoring Firm Hired by Building MECS	Owner (8)		ASCN	/ No.				ement Con vironmen						
Street Address PO Box 341							Addres . Lippi	s ncott Ave	 e					
City, State, Zip Code Chesterfield, NJ 08515							p Code de, NJ ()8052						
Project Manager for Monitoring Firm Bill Weisgarber			Telephoi 609-29	ne No. 98-4070)	0.000	none No 755-0			License N	lo.			
Start Date (10) October 20, 2012	Schedule			Date (11)		Name EMS		A Monitor						
Occupancy Status During Abatement (Che	ck Only On	ie)				Street	Addres	S						
Facility Closed/Vacated During Entire Abatement Performed Outside of Non Other – Describe:						City, S	tate, Zi							
Scope of Work (Check All That Apply)						West	tmont,	New Je	rsey	08108				
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Basement			ххх		Pipe	Insulat	tion		5	5 LF	xxx			
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Name of Decision differential		1												
Name of Registered Waste Hauler Freehold		Ha	JDEP Wauler ID I 2253		of Was			Name of F Grows L	S	red Lan dfill 				
City, State Mount Holly, New Jersey 08060	***************************************					al Date		City, State Tullytow),,		- 123
mpleted by Title liam Lynch Owner					Si	ignature		90	- 100 m	The	2000			



Date of Notification (1) 10/5/12					f Building ort Auth					RE(EI	VE	D			
Agencies Notified Type	Notification			Street A	ddress rie St. F	Room 2	236		2012	OCT	11	PH :	?: 4	4	S-118 (S-2)	2
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	justification) Cancellation		-		f Contact Campio					8 Fels	phone	Junta Bale	per	4)		
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County (6) Essex			T		Code (7) USE ONLY	,			ent Use (Prio			olishe	d)			
Name of Monitoring Firm Hired Port Authority of NY & N		Owner (8)		ASCN	No.			of Aba	tement Construction C	tractor ((9)	Inc.				
Street Address 241 Erie St. Room 236		1					Street	Addres								
City, State, Zip Code Jersey City, NJ 07310							City, S	tate, Z	ip Code Y 11105			100 400				
Project Manager for Monitoring	Firm			Telepho			Teleph	one N	0.		Licens					
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-Phase Between Column	Х	Fireproofing 3200 SF x														
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ABC Construction Contracting Inc. Hauler ID 22280					No.	of Was 40	ste		T.R.R.F.	Inc.				8	(5)	
City, State Astoria, NY 11105					E III	Dispos 12/1/	al Date		Gity, State		1900	7		84		
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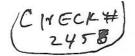
State of New Jersey - Notification of Asbestos Abatement (Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

RECEIVED GAC Project # 060-12 Client Project # Name of Building Owner/Operator (2) Date of Notification (1) RUTGERS, THE STATE UNIVERSITY PE NJ PH 2: 66 October 5, 2012 Street Address Notification Type Agencies Notified ENVIRONMENTAL HEALTH & SAFETY DEPT. ☑ Initial Notification 27 ROAD 1, BLDG 4086, LIVINGSTON CAMPUSITEDI EPA ☐ Amended Notification □ DCA City, State, Zip Code & LICENSING ■ Emergency (including) PISCATAWAY, NJ 08854 X DOL justification) Telephone Number Name of Contact ▼ DEP- No Longer REQUIRED □ Cancelled MIKE SMITH, ENV. HEALTH X DOH & SAFETY **FACILITY INFORMATION** Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) NANOPHYSICS LAB BLDG# 3571 ■ Subchapter 8 (other than K-12) Street Address ■ Other (i.e. private & commercial buildings, homes, etc.) **BUSCH CAMPUS** # of Floors: 2 Bldg. Age: 60+ years Sq. Feet: N/A County (6) County Code (7) City (5) Current Use (prior if being demolished): ACADEMIC (State Use Only) **MIDDLESEX PISCATAWAY** ASCM No. Name of Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) 0098 ATC ASSOCIATES GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address Street Address 3 TERRI LANE **268 MAIN STREET** City State, ZipCode City, State, Zip Code **BUTLER, NJ 07405 BURLINGTON, NJ 08016** License Number Telephone Number Project Manager for Monitoring Firm Telephone Number 609-386-8800 **BRIAN KEARNY** 00840 973-492-0477 Name of OSHA Monitor Scheduled Completion Date (11) Scheduled Start Date (10) 10/15/12 10/16/12 ENVIROVISION, INC. Street Address Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement 20-21 WARGARAW ROAD ☐ Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code Describe MOther - Describe: Shift Hours: 5:00 PM - 5:00 AM FAIRLAWN, NJ Scope of Work (Check all that apply) Full Containment with Negative Pressure Mini-Enclosure □ Renovation \ge 3 sf or \ge 3 lf X Glovebag Procedure Demolition ≥ 160 sf or ≥ 260 ■ Non-Exempted (*) and Non-Friable Procedure Abatement Type Amount Location of Asbestos-Containing Is Location Normally Used Description of Asbestos Containing Material (Specify SF Solely by Maint./Custodial (ACM) (i.e. thermal systems insulation, surfacing, Material (ACM) in Facility (13) Remove Repair Encap Enclose or LF) VAT, or other miscell.) Staff? (12) NO YES X 9 LF **PIPE FITTING INSULATION - TSI** 213 MER X

Name of Registered Landfill NJDEP Waste Hauler ID # 5 CY Cubic Yards of Waste: Name of Reg. Waste Hauler G.R.O.W.S. North Landfill See Hauler Below #1 & 2 See Below City, State Disposal Date Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 100 New Ford Mill 10/16/12 NJDEP # 12561 Rd. Morrisville, Pa Hauler #2) Newark Carting, Inc., Newark, NJ 04509 19067 NJ DEP# 4509 215-736-1700 Date

Completed by (Print or Type)
RAYMOND C. PEDALINO
RAYMOND C. PEDALINO
MANAGER

Signature
Raymand C. Pedalino
October 5, 2012



Date of Notification (1)) , ,		Nam	e of Buildir	ng Owner/Operator	(2)	· · · · ·	<u>- </u>	17_				
10	15/12			PINE	LANDS CO	DNSTRUCT	10 2012 OCT	-	DM	-	_		
Agencies Notified	Type Notification	1	Stre	et Address		C -		Π.	rn	Z:	43		
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Ø DEP	Amended		City.	State, Zip	Code		- MODES 1	157	NO.	TR	ni		
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¥.3	Emergency (i justification)	ncluding	Non	ne of Conta			Telephone Number	er		-			
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			FA	CILITY IN	FORMATION			00000					
78 % 110	Ab -tement in Takir	on Place /3				Type of Facility	(4)				٦		
Name of Facility When	e Abatement is Takii	ig riace (s	,			School (K-12							
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Street Address	4	V3					rivate & commercial	buildi	ngs,		-		
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City (5)		^				Square Feet	# OF FIGURE	100	9 9	•			
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			Co	unty Code	7) (STATE	Current Use (Pr	ior if being demolish	red)					
County (6)	N. A.		US	E ONLY)	April Approximated	VA	CANI				_		
LAPE			-		I Name of Abatem	nent Contractor (9)				\neg		
Name of Monitoring Fir	m Hjred by Building	Owner	ASC	vi NO.									
	N/A		.			EMCO IN	001				=		
Street Address					Street Address		- 1				1		
Stieet Modiess	-				369	S,SPRUC	E ZIVC,						
					Oir Otata Zin C	Code	370-37-30-31						
City, State, Zip Code					Mo	PLE SHA-	DEINIJI	000	25	<u> </u>	_		
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Project Manager for M	onitoring Firm	1.7	relephon	e No.	8-C/ -77	9-0472		14					
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Start Date (10)	Sche	duled Com	pletion [ate (11)	Name of OSHA	Monitor /					4		
10/17/12		0/24	/12		79:	SEPH KL	EMM						
10/11/11					Street Address					•			
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TO BE AB	SATED		odial ·	(1.€	surfacing, VAI	r or	SF or LF)	Removal	Repair	aps	Enclosure		
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City, State			41. 7		Disposal Date	l l s	OF RING	V.J	,				
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			10		Signature	n Kle	Date 10	15	1/2	6			
Completed By	100	V	IP		Joen	res Pale	m _ 10/				=		
JOSEPH	KLEMM -		/							202300			

10/4/12

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60-7 and 12:120-7) RECEIVED Date of Notification (1) Name of Building Owner/Operator (2) Jen Lifshitz 10/4/2012 2012 OCT 11 PM 2: 62 Type Notification Street Address Agencies Notified 320 Robin Rd. []EPA [X] Initial ASBESTUS CONTROL Notification City, State, Zip Code []DEP & LICENSING []Amended Englewood, NJ [X] DOL Notification Name of Contact Telephone Number [X] DOH []EMERGENCY Jen Lifshitz []DCA []Cancellation FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) Private []Type»]School (K-12) []Type»]Subchapter 8 (Other than K-12) Street Address [X]Other (i.e., private & commercial buildings, homes, etc.) 320 Robin Rd. # of Floors BLDG AGE Square Feet City (5) County Code (7) County (6) 75 (STATE USE ONLY) 2400 SF 2 Englewood Bergen Current Use (Prior if being demolished) Residence Name of Abatement Contractor (9) Name of Monitoring Firm hired by Building ASCM No. Owner (8) 67 AZTECH MANAGEMENT, Inc. N/A Street Address Street Address 86 Christopher St. City, State, Zip Code City, State, Zip Code Montclair, NJ 07042 Telephone Number License Number Project Manager for Monitoring Firm Telephone Number 00371 (973) 744-8800 N/A Name of OSHA Monitor Scheduled Start Date (10) Sched. Completion Date (11) N/A 10/15/12 10/16/12 Month 10 Day 15 Year 2012 Month 10 Day 16 Year 2012 Street Address Occupancy Status During Abatement (Check only one)
[X] Facility Closed/Vacated During Entire Period of Abatement City, State, Zip Code []Occupancy»]Abatement Performed Outside of Normal Facility Hours - Describe:]other - Describe: Scope of Work (Check all that apply) []Full Containment with Negative Pressure [X]>3 sf or >3 lf [X] Renovation []Mini-Enclosure []>160 sf or >260 lf []Demolition [X] Glovebag Procedure []Non-Friable Procedure Abatement Type Is Location Description of Location of E Normally NCAPSU NCLOSU Asbestos-Containing Asbestos-Containing Amount Used REPAIR MOV Material (ACM) (Specify Material (ACM) Solely (i.e., thermal systems By Main SF or TO BE ABATED tenance/ In Facility insulation, surfacing, VAT, LF) Custodial A (13)or other miscellaneous) Yes No N/A 160 LF Basement X X NJDEP Waste Name of Registered Landfill Name of Registered Waste Hauler Cubic Yards Hauler ID No. of Waste 1.5 AZTECH MANAGEMENT, INC. G.R.O.W.S. 7040 Disposal Date City, State City, State 10/17/2012 Morrisville, PA 19067 Montclair, NJ 07042 Completed By (Print or Type) Date Signature

Constantine Vivian

President



Date of Notification (1)					of Building (rator	(2)	112	UEIV	E)—		
10/4/2012	Total National				LENE CIO	OFFI		201	2 <u>0</u> 07	11 80				
Agencies Notified	Type Notification				Address UINCY A	VENUE			- 001	II PH	2:	41		
EPA DEP DOL	Initial Amended Amendment		_	City, St	tate, Zip Coo	de		AS	3EST	US CON CENSIA lephone Nu	TR	OL.		T.
DOH DCA	Emergency (justification) Cancellation	including			of Contact LENE CIO	OFFI		13	Te	lephone Nu	mber	(1))	
None of Facility Miles of		Di (0		FAC	ILITY INFO	RMATION								
Name of Facility Where A RESIDENCE	Abatement is Taking) Place (3)					Type of Facility School (K-	32 35					
Street Address 20 QUINCY AVENU	JE									er than K-1 & commerc		ldings	, hom	es,
City (5) KEARNY								Square Feet	# 0	f Floors		3ldg. <i>i</i>	\ge	
County (6) HUDSON					Code (7) USE ONLY)	-	-	Current Use (Pr	ior if be	ing demolis	hed)			
Name of Monitoring Firm N/A	Hired by Building (wner (8)		ASC	M No.	1		of Abatement Co		13. 15.	1G			
Street Address					1.000			Address RUTHERFOR	RD BL	√D.		7.0		
City, State, Zip Code		-21.99.0				1 232		ate, Zip Code TON, NJ 070	14					
Project Manager for Moni	toring Firm			Telepho	one No.	Te	eleph	one No. 956-8700		License N	lo.			
Start Date (10) 10/15/2012		Schedule		mpletion	Date (11)		< a	of OSHA Monitor						
Occupancy Status During	Abatement (Check	Only On	e)					Address						
Facility Closed/Vaca Abatement Performe Other – Describe:	ted During Entire Ped Outside of Norma	eriod of A al Facility	baten Hours	nent s		Cit	ty, St	ate, Zip Code				1		
Scope of Work (Check All	That Apply)		127											_
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	enova				×	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure						
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Asbestos-Containing N TO BE ABA In Facilit (13)	Material (ACM) TED		Sole ntena odial S (12)	nce/	(i.e. ti	os Containir hermal syst surfacing, other misce	ng Ma tems , VAT	aterial (ACM) insulation, , or	(5	mount Specify For LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A		***							e e	
BASEME		X		PIF	PE		2	0 LF	X					
Name of Registered Waste	e Hauler		2000	JDEP W	Cubic Yard	ds	Name of	Registe	red Landfill					
TWO BROTHERS C	ONTRACTING		Hauler ID No. of Waste 18743					WAST	E MAN	NAGEME	NT G	.R.C	.W.S	S.
City, State CLIFTON, NJ						Disposal D 10/18/20		City, Stat		-E. РА				
Completed by		Title				Signa)	Da	te			
VIVECA RAMOS		ETA	RY		1	XI	vecap	un	n 10	/4/20	12			

00 pas Proj. #: MS 12-355

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

00 D&S Proj. #: MS 12-355	_				best	os Abatement 0 and 12:120)			20.	PE	CE	IVEL
Date of Notification (1)	IIN	lame of Bu	ilding Own	er/Operator (2))				12 O	CT		
1 10 1/10 15 1/11 12		EARL SI	JLZBAC	HER				6	i .	١, ١	1	PM 2: E
Agencies Notified Type Notificat		treet Addre			6			23 (13E2	Inc	,	
☐ EPA		327 SO.	UNION A	AVENUE	- 3		- 4		& T	ICF	CO	NTPO.
Amendment #:	1	ity, State,		TIBITOE						<u> </u>	*2.H	AC WOL
		20. 1	ORD, NJ	07016								(
DOH (including	Na Na	ame of Co	-		-		Telepho	one Numb	er			
☐ DCA ☐ Cancellation		EARL S	ULZBAC	CHER								
- Carloonasor				ILITY INFORM	IATIO	N						
Name of facility where abatement i	e takina nla	ce (3)				·	Type of Facility	, (4)		_		
EARL SULZBACHER	s taking pla	ice (3)					Sch	ool (K - 12 chapter 8 (100000 0	han K	12)	
Street Address				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Othe	r (Private/ s./Homes,	Comme		-12)	
327 SO. UNION AVENUE							Square Feet	# of Flo		В	dg. A	ge
City (5)	Coun	ity (6)				unty Code (7)						
CRANFORD	UN	ION			(St	ate use only)	Current Use (Prior if bei	ng den	nolish	ed)	
Name of Monitoring Firm Hired by	Bldg. Owne	r (8)		ASCM No.		Name of Abatement	Contractor (9)					
						D & S RESTORA	ATION, INC.					
Street Address					_	Street Address				-		
						20 California Av	ve.					
City, State, Zip Code						City, State, Zip Code						
						Paterson, NJ 07	503					
Project Manager for Monitoring Firm	1	Ph	one Numb	er		Telephone Number		Licens				
, i						973-345-8020			01169			
Start Date (10)	Sched	. Completi	on Date (1	1)		Name of OSHA Moni						
11/05/12	11/16	5/12				D & S Restoration	on, Inc.	-				
Occupancy Status During Abatemen					_	20 California Av	enue					
Facility closed/vacated during Abatement performed outside	entire perio	od of abate				City, State, Zip Code	citac					
Describe:NORMAL F	IOURS				-	Paterson, NJ 07	503					
Scope of Work (check all that appl							Full Containment	w/negativ	e nress	ure		_ _
	Renovatio	n					Mini-enclosure	Willogaav	o prooc	Julio		
≥160 sf or ≥260 lf	Demolition						Glovebag proced					
			used solely	,			Non-Exempted (*) and Non	-friable	R	E	Г
Location of asbestos-containing	by mainte	nance/cus			on of	asbestos-containing	Amount		е	e	n	E
material (acm) to be	staff(12)		T	material ((Specify	SF or	m o	p a	c a	n c
abated in facility (13)	Yes	No	N/A				LF)		v e	i	p	L
Basement		X		PIPE INSU	LAT	ION	155 L FT		Ň			
Registered Waste Hauler D & S RESTORATION, INC.	NJDE 135	P Hauler I 06		ubic Yards of V 2 YDS	/Vaste	Name of Registered TULLYTOWN, I		ECOVE	RY			
City, State			Disposal D			City, State					1	
PATERSON, NJ 07503	Title		11/06/1	2 Signature		TULLYTOWN,	PA					
Completed by (Print or Type) BOGDAN JOLDZIC		Date 10/05	/12									
	PRESIDI		for ashesto	s licensure exe	emnte	d activities		10/03	112			

CK 604455

D&S Proj. #: MS 12-354

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

											AFI						
Date of Notification (1)		N	ame of B	uilding O	wn	er/Operator (2))		2012	ner i e	N4 6						
1 0 / 0 5 / 1 2		413	MICHE	LE CHI	LE	S-HICKMA	N-RE	ALTOR	C017	OCT II P	H 2:	39					
Agencies Notified Type Not	tification	Si	treet Add	ress					& Sir	RESTOC OF	74170	-		1			
DEP Amend	ed	11	44 ELM	WOOD	A	VENUE		¥:		ESTOS CO & LICENS	JNIR	DL.					
Amendme	ent #:	C	ity, State	Zip Code	е						HKG-	()					
DOL ☐ Emerge			MONT	CLAIR,	N	J 07042						Q D					
DOH (includi justifica		Na	ame of Co	ontact						Telephone	Numbe	r			-		
DCA Cancel	.50		MICHI	ELE CH	IL	ES-HICKMA	N-RI	EALTOR		1							
				FA	٩C	LITY INFORM	ATION	I				=					
Name of facility where abatem	nent is takir	ng pla	ce (3)						T	ype of Facility (4	1)						
MICHELE CHILES-HIC	KMAN-R	EAI	TOR								(K - 12)		. 15				
Street Address			71010		_				11		pter 8 (0 Private/0			(-12)			
44 ELMWOOD AVENU	me									Bldgs./l	Homes,	etc.					
City (5)		Coun	tu (6)		_		-		8	Square Feet	# of Floo	rs	В	ldg. /	Age		
City (5)		Coun	ty (6)					inty Code (7) ite use only)					_				
MONTCLAIR		ESS	EX				(516	ite use offiy)	119	Current Use (Pri	or if beir	ng dem	olish	ed)			
Name of Monitoring Firm Hire	d by Bldg. (Owne	r (8)		7	ASCM No.		Name of Abatemer	patement Contractor (9)								
								D & S RESTO	RAT	ION, INC.							
Street Address					_			Street Address									
								20 California						8			
City, State, Zip Code					War was			City, State, Zip Cod									
Project Manager for Menitering	Ciona		15	N N	_		_	Paterson, NJ (}							
Project Manager for Monitoring	Firm			hone Nu	mb	er		Telephone Number 973-345-802			License	Numb 1169	er				
Start Data (40)	10		000000	lan Dat	74.4			Name of OSHA Mo				1109					
Start Date (10)	5	cnea.	Complet	tion Date	(11)		D & S Restora		Inc.							
10/16/12		0/26	111111111111111111111111111111111111111					Street Address		HVB			_		- 1000		
Occupancy Status During Abate				X 7679				20 California A	venu	ıe							
Facility closed/vacated du Abatement performed ou								City, State, Zip Cod	е								
Describe:			acility flot	113-			_										
Other-Describe: NORM							-	Paterson, NJ 0)7503								
Scope of Work (check all that 3 sf or >3 If									=	Containment w/	negative	press	ure				
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≥160 sf or ≥260 lf	☐ Demo	olition	ĺ.							-Exempted (*) a		friable	proce	edure	9		
Location of			normally nance/cu	used sol	ely						×	R	R	Е	E		
asbestos-containing material (acm) to be	staff		iai ice/cu	3WGIBI				sbestos-containing		Amount (Specify SF	or	m	e p	n	n		
abated in facility (13)	Ye	s	No	N/A		material (ACIVI)			LF)	OI .	0 V	a	а	L		
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Dasement Chilving I	X_		4	CHIMNEY	PAC	KING	-	2 SQ FT		×	屵	부	부				
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		_			4				_			닖	님	무	#		
Registered Waste Hauler		NJDE	P Hauler	ID#	근	ubic Yards of V	Vaste	Name of Registere	d Lan	dfill			Ц	Ш			
D & S RESTORATION, IN	NC.	1350				YDS		TULLYTOWN			COVER	Y					
City, State				Disposa				City, State					-				
PATERSON, NJ 07503		10/17	/12			TULLYTOWN	I, PA										
Completed by (Print or Type) BOGDAN JOLDZIC	SIDE	NT			Signature					Date	10						
ASB-41				for asbe	_l	s licensure exe	mpted	activities.			10/05/	12					
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Emergency Notification & RECEIVED

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) 2012 OCT 11 P

Date of Notification (1)		Aa	e of Building Owner/Operato	or (2)	Jewan	H 2: 38	
Agency Notified Type Notification		Stree	Address	\\ \(\lambda_0\)	MA C	NTROL	7
DEP Amended DOL Amended	_	- 4	State, Zip Code	- FT	LICENSH	VG	ᅴ
Emergency (inclination)	uding		e of Contact		Tolonhama *1	(1)	_
DCA Cancellation		To	m McCul	8			
		FAC	ILITY INFORMATION.				7
Name of Facility Where Abatement is Taking				Type of Facility	(4)		
Street Address	lary	>_	chool	School (K-12			i
202 lafavette	5+				8 (Other than K-12 rivate & commercia		
Newak NJ			*****	Square Feet	# of Floors	Bldg. Age	
County (6) ESSEX		Count	y Code (7) (STATE USE)		rior if being demoli	shed)	-
Name of Monitoring Firm Hired by Building Ov	vner AS	CM No.	Name of Abater	ment Contractor (9			\dashv
(8) Mc Caze Envion	etal C	001	18 F. G	71582	+ Som	The	
Street Address 464 Valley Brook F	200 F		Street Address	32 nd			
City, State, Zip Code			City, State, Zip (Code			\dashv
Project Manager for Monitoring Firm	Tolon	hone No.	Telephone No	con, r	2.2		
Jim Ruff				5, 2222	License No.	0 21	
	Completion	Date (11)	Name of OSHA		Samo	0.21	\dashv
Occupancy Status During Abatement (Check of	1 6	-	Street Address		211/100	· · · · · · · · · · · · · · · · · · ·	\dashv
Facility Closed/Vacated During Entire Period Abatement Performed Outside of Normal Facultier – Describe:		ent	City, State, Zip (Code			_
Scope of Work (Check all that apply)			, 		***************************************		
≥ 3 sf or ≥ 3 if≥ 160 sf or ≥ 260 if			nolition	-Enclosure rebag Procedure	Negative Pressur		
	Is Loc	cation		70	- IVOIT-I Habit I Tot	Abateme	ent
Location of		nally olely by	Description	of		Type	
Asbestos-Containing Material (ACM) TO BE ABATED	Mainte	nance/ odial	Asbestos Containing M. (i.e., thermal systems		Amount (Specify	Enca Re	Enc
IN Facility (13)	Sta	iff?	surfacing, VAT	T, or	SF or LF)	Removal	closure
(13)	(1		Other miscenario	eous		a late	10
Boiler Room	Yes N	o N/A	Pier Insul	12+16	70 LF		\vdash
Daller Ham	10	+	Tipe yesa	٠٠١١٠	1051		\vdash
	1			İ			\Box
Name of Registered Waste Hauler	ID No.	Waste H	auler Cubic Yards of Waste	Name of Regis	stered Landfill		
Easten Waste			1010	LUSE	Land	10.11	
FIRE hold W	5		Disposal Date	City, State	Irtaur	~ PA	
Completed by Title Frank Gask	202.		Signature	X		10/3/12	-]
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								RECEIV				
Date of Notification (1)				Name	of Building	Owner/Operator (2	2) -	RECEIV	CU			
	04 / 12			Kathy	Ancone		2010	00-				
Agencies Notified	Type Notification				Address		7017	OCT II PM	2. 2	9		
⊠ EPA	Initial Initial											
⊠ DOLWD	Amended		1		ivision A		ASR	ESTOS CON LICENSIN	95 60			
☑ DHSS	Amendment #		1	esere est	State, Zip C		,	I ICENSUM	IROL			
DCA	☐ Emergency (in	cluding			ille, NJ 0			FILEKZIMI	G	<u> </u>		
(NJAC 5:23-8)	justification)			Name	of Contact	t		Telephone Nun	nber (19		
	☐ Cancellation			Kathy	Ancone				1			
		11				IFORMATION					-	_
Name of Facility Where A	Ahatement is Taking	r Place	(3)				Type of Facility	(4)				-
11	toatement is raining	g 1 1000	(0)				School (K-1					
Private home								8 (Other than K-1	2)			
Street Address								private and comme		ilding	S.	
108 Division Avenue							homes, etc.	*			2020	- 202000
City (5)							Square Feet	# of Floors	BI	dg. A	ge	
Belleville, NJ 07109												
County (6)			1000	Coun	ty Code (7)	(STATE USE ONLY)	Current Use (P	rior if being demol	ished)			-
Essex								*				
Name of Monitoring Firm	Hired by Building	Owner (8)	ASCM	No.	Name of Abateme	ent Contractor (9)				
						Gr Tech LLC	,	1				
Street Address						Street Address						
Otreet Address						THE PROPERTY AND THE PROPERTY OF THE PROPERTY						
						576 Valley Rd #		The sed would be a				
City, State, Zip Code						City, State, Zip Co	ode					
			222 - 150 - 152	200000		Wayne, NJ 0747	70					
Project Manager for Mon	itoring Firm		Tele	phone	No.	Telephone No.		License No.				
						973-638-1777		01127				
Start Date (10)	Sched	duled C	omple	tion Da	te (11)	Name of OSHA M	lonitor	101127				
10 / 13 /	A1111111111111111111111111111111111111	10 /				F		54				
Occupancy Status During						Envirovision Co Street Address	nsultants,Inc					
Facility Closed/Vacate		7.1		mant								
Abatement Performed					crihe	20-21 Wagaraw	Road, Bldg .#	34A				
Time of Abatement:	AM- P	M/	PM_	3 - DC3	AM	City, State, Zip Co	ode					
						Fair Lawn, NJ 0	7410		_			
Scope of Work (Check all	I that apply)											
▼ >3 sf or >3 If		⊠ Re	novati	on		Mini-Enc		egative Pressure				
>3 sf or >3 if > 160 sf or >260 if		De	molitic	n			g Procedure					
						Non-Exe	mpted (*) and N	on-Friab e Proced	ure			
		1 33	Locat						Ab	atem	ent T	ype
Location			Vorma			Description of			77	71	m	m
Asbestos-Containing I		2000000	d Sole intena			stos Containing Ma		Amount	Remova	Repair	inc	Enclosure
TO BE ABA		22- 60	odial		(i.e	thermal systems i		(Specify	Non	air	aps	losi
(13)	Ly		(12)			surfacing, VAT, other miscellane		SIF or LF)	a a		Encapsulate	Ге
,		Yes	No	N/A		ound, in occinant	000,				ਰ	
		163	NO			POLICE CONTRACTOR OF THE POLICE CONTRACTOR OF			-			
Basement			ш	\boxtimes	Pipe insu	ılation		100 LF	X	Ш	Ш	
Basement				\boxtimes	Boiler in	sulation		36 SF	X			
Decement		П		×	MAT EL	as Tiles			X			
Basement		닏		-	VAT Flo	oor Tiles		250 SF		Ш	П	Ш
Name of Registered Was	te Hauler	17.4	NJE	EP Waste	Hauler ID No.	Cubic Yards of Wast	e Name of Regi	stered Landfill	-			
Gr Tech LLC			0	03378	25	TBD	T.R.R.F. Inc					
City, State			1-	,03310	,,,	Disposal Date	City, State				-commercial	
500 500 500 500 500 500 500 500 500 500						10015-225	7.75.278					
Wayne, NJ 07470						TBD	Tullytown, P	Α -				
Completed By (Print or Ty	ype) Titl	е				Signature	1 1	D	ate			
N.Jevtic	Ow	ner			7	//ew	re Ven	10	0/04/20	12		
ASB-41							W. Constitution		0 1120	12		

MO# 20142479867

Date of Notification (1) 10/04/12 CK: 2286	3 \$200				of Building			(2) 20	12 OC	711	PM	2.	75		
Agencies Notified EPA DEP	Type Notification Initial			Street A 599 R	ddress iver Roa	ad		AS	BES	TOS (CON	TR	<u> </u>		
DEP DOL	Amended Amendment Emergency		_	North		n, New	/ Jerse	y 07090	a L	ICEN.	SINC	3	(4)		
□ DOH □ DCA	justification) Cancellation			Al Ko	_				Te	lephone	Numb	er			
Name of Facility Where Field House Electri	Abatement is Takin	g Place (3)		FAC	ILITY INF	ORMAT	ION	Type of Facility	(4)	- W 1/2 - 2 -					
Street Address 15 Page Avenue	our room			-				School (K-Subchapte Other (i.e. etc.)	er 8 (Oth	ner than & comm	K-12) iercial	buil	dings	, hom	ies,
City (5) Lyndhurst, New Jer	rsey 07071							Square Feet 3,000	# c	of Floors		1000	ldg. /	Age	
County (6) Bergen					Code (7) USE ONLY)		Current Use (Pr Field House	ior if be	ing dem	olishe	d)		*******	
Name of Monitoring Firm Detail Associates	Hired by Building	Owner (8)		ASCN	/ No.			of Abatement Con Corporation	ntracto	r (9)	a -				
Street Address 300 Grand Avenue								Address McBride Aven	ue					•	
City, State, Zip Code Englewood, New Je	ersey 07631				*			tate, Zip Code dland Park, N	ew Je	rsev 07	7424		0.000		-
Project Manager for Mor Anthony Valentine	itoring Firm			Telepho 201-56	ne No. 39-6708		Teleph	none No. 225-8400		Licens 0110	se No.				-
Start Date (10) 10/17/12	,	Scheduled 10/22/12		npletion	Date (11)		Name	of OSHA Monitor Environmenta		1	•				
Occupancy Status Durin		S (Street	Address Route 22 We			(_
Facility Closed/Vac: Abatement Perform Other – Describe:	ed Outside of Norm	eriod of Al	Hours	nent			City, S	tate, Zip Code n, New Jersey		3			Y.		
Scope of Work (Check A	ll That Apply)						-	,							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		PROPERTY.	nova molit	T07170.0			×	Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	e cedure						
	121		ocati							9 110111	, abic		Abate	emeni	
Location Asbestos-Containing TO BE ABA In Facil (13)	Material (ACM) ATED	Used Main Custo	Sole tenar dial S (12)	ly by nce/ staff?	Asbes (i.e.	tos Cont thermal surfac	scription aining M systems cing, VA niscellan	laterial (ACM) insulation, T, or	(5	mount Specify or LF)		Removal	Repair	Encapsulate	Enclosure
Electrical I	Room	Yes	No	N/A	Asbes	tosPin	e&Pine	FittingInsul	10	00 LF	x	_			
Electrical I	Room	X					Insula			50 SF	X				
		+											-		
Name of Registered Was Lilich Corporation	te Hauler		Н	JDEP W auler ID 3724		Cubic of Was		Name of G.R.C		red Land Landfil					
City, State Woodland Park, New	/ Jersey 07424				.,	Dispos 10/23	al Date /12	City, Stat Morrisv		ennsylv	vania		7841		\dashv
Completed by Tatiana Kalenikova:	*	Title Vice P	resid	dent		1	ignature		et	1	Date 10/0		2	7	

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

1355		NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)	RECEIVED	
Date of Notification (1) 09/28/12		Name of Building Owner/Operator (2) Advance Consulting	2012 OCT 11 2	
Agencies Notified	Type Notification	Street Address 230 Woodlands Drive	ASBESTOS CONTRACTOR	
EPA DEP DOL	Amended Amendment #	City, State, Zip Code Tuxedo, NY 10987	& LICENSING	
DOH DCA	Emergency (including justification)	Name of Contact Nick Michaels	Telephone Number	

	Emergency	(including	_								-018	6			
DOH DCA	justification Cancellatio	1	1000		f Contact /lichaels					Tele	enhone Nu	mber 1	63		
				FAC	ILITY INF	ORMAT	ION								
PRIVATE SCHOO Street Address 199 SCOLES AVE								×	School (K- Subchapte Other (i.e. etc.)	r 8 (Othe			dings	, hom	ies,
City (5) CLIFTON									re Feet	# of	Floors	1 (2)	3ldg. /	Age	
County (6) ESSEX					Code (7) USE ONLY)			ent Use (Pr VATE SC			hed)			
Name of Monitoring Firm N/A	Hired by Building	Owner (8)		ASC	/I No.		Stann	nark	tement Co Contrac						
Street Address							Street A	Isall	Drive						13/14/34
City, State, Zip Code									ip Code IJ 07461						
Project Manager for Mor	nitoring Firm				ne No.		Telepho 973-8	64-2	2022		License N 01137	lo.			
Start Date (10) 10/12/12		Scheduled 10/15/12		letion	Date (11)		Ameri		HA Monitor					errent -	
Cocupancy Status Durin Facility Closed/Vac Abatement Perform Other – Describe:	ated During Entire led Outside of Norr	Period of Aba	ateme	nt			City, Sta	ast 3 ate, Z	30th Stre		1				
Scope of Work (Check A							New	York	, NY 100	16					
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf	15	ALTERNATION .	novatio nolitio				×	Mir	II Containm ni-Enclosur n-Exempte	е				e	
Location	of	100 100	ocation			D-							Abat	emen pe	t
Asbestos-Containing TO BE AB In Facil (13)	Material (ACM) ATED	Custod	enanc	e <i>l</i>		tos Con thermal surfa	scription of taining Ma I systems cing, VAT miscellane	aterial insula , or		(S	nount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
			No	N/A										æ	
1st and 2nd	d Floor	X	-			FLO	OR TILI	ES		25	0 SF	X			
			1												
Name of Registered Was	te Hauler		NIF	EP W	aste	Cubic	Yards		Name of	Register	ed Landfill	<u> </u>			
PRO-TECH, LLC			Hau	ler ID 713		of Was	ste		MINER	VA LA	NDFILL				
City, State New Haven, CT							sal Date impletion	n	City, Stat		RGH, OH				
Completed by Marko Stankovic		Title Preside	ent			S	Signature Varia	10	fau	ula	Ø Da	te 1/28/1	2		



Date of Notification (1) 10-4-2012					Building (Operator	(2)			ME (E	V	E	D	
Agencies Notified	Type Notification		\dashv	Street A						2012	OCT	11	PM	2.		
EPA DEP X DOL	Initial Amended Amendment Emergency		_ [Ridgev	te, Zip Co wood NJ		50			ASB	ESTA	150	n	i ·	95 01	
DOH DCA	justification) Cancellation			100000000000000000000000000000000000000	Contact d Leath	erwoo	od.			iei	ephone	Man bi	IN	G		Þ
				FACI	LITY INFO	ORMAT	ION	-							A.	
Name of Facility Where A Residential Street Address	Abatement is Takin	g Place (3)						of Facility (School (K-1 Subchapter	, 2) 8 (Oth			a wana	aco-w s	V.37.30.40.20	
121 Doremus Ave									Other (i.e. p etc.)	irivate	& comme	ercial b	ouild	lings,	home	es,
City (5) Ridgewood NJ.	11								re Feet	# o 2	f Floors		10000	dg. A 910.	-	W.
County (6) Bergen					Code (7) USE ONLY	,		Сигте	ent Use (Prid	or if be	ing demo	olished)			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCN	/ No.	-12			tement Cor		0.00			D-11-1		
Street Address		***					Street	Addre	SS							-
City, State, Zip Code								_	ia ave. ip Code							-
Project Manager for Mor	nitorina Firm			Telepho	no No			ey Cit	-		Licens	e No				
Project Manager for Mor	illoring Film						201-	333-8	855		01174					
Start Date (10) 10-5-2012		Schedule 10-5-20		mpletion	Date (11)				HA Monitor Above.							
Occupancy Status Durin X Facility Closed/Vac Abatement Perform	ated During Entire	Period of A	Abater	ment	***			Addres	ip Code			\$2	1			
Other – Describe:	ed Outside of Nort	nai r aointy	rioui	•		_	Oity, c	otate, Z	ip code							
Scope of Work (Check A	II That Apply)	***************************************					<u></u>	_	190000000000000000000000000000000000000	-17						14.14
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		The state of the s	Renova Demoli				2	Mir	Il Containm ni-Enclosum ovebag Prod n-Exempted	e cedure					e	
			Locat												ement pe	t
Locatior Asbestos-Containing TO BE AB. In Facil (13)	Material (ACM) ATED ity	Use Ma Cusi	d Sole intena todial (12)	ely by ance/ Staff?		tos Co therma surf	escription ntaining N al system facing, VA miscella	Material s insula T, or		(3	mount Specify F or LF)		Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A												-
Crawl Space	Basement		X			Due	ct Insula	ation			20sf		X			
												+				
Name of Registered Was Tri-state Transfer As		H	NJDEP W Hauler ID 2A456		Cubi of W	c Yards aste		Name of Minerva	a Ente							
City, State Bronx NY							osal Date 5-2012		City, Stat Waynes		-ohio					
Completed by Tiffany Nunez.		Title Office	e Ma	nager			Signature	е				Date 10-4	-20)12.		

7842

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

								7	11900-				1.5		
Date of Notification (1) 10/5/2012	2.8				Building Persaud		perator	(2)	H2 OCT	11	PM 2: 3	5		-	
Agencies Notified	Type Notification			Street A				A	& LIC	0S C	ONTO	-		S	
EPA	× Initial	I.	-	SOCIO CAMADONI VOLI	den Ave	COLUMN TO COLUMN			& Lic	ENS	UNIRO	L_			
DEP X DOL	Amended Amendment	#			te, Zip Co City, N		5				1110	()			
▼ DOH	Emergency justification)	(including	_		Contact		.=-			Tel	ephone Nu	ALT-70-15			-
DCA	Cancellation				Persuad	t									
Name of Eccility MA	Abatamart is Talli	a Dia '0		FACI	LITY INFO	ORMATI	ON	T	of Coelling	4)					
Name of Facility Where Residence	Abatement is Takin	g Place (3)						of Facility (50					
Street Address			+						School (K-1 Subchapter		er than K-1	2)			
75 Linden Avenue								100	Other (i.e. petc.)	orivate a	& commerci	al buil	dings,	home	es,
City (5)								Squa	re Feet		f Floors	- 1	Bldg. A	ge	
Jersey City								2,80		2			0 +		
County (6) Hudson				County (Code (7) USE ONLY				ent Use (Prid idence	or if bei	ng demolisi	ned)			
Name of Monitoring Firm	n Hired by Building	Owner (8)		ASCN	1 No.		Name		tement Cor	ntractor	(9)				-
N/A	., ,	(0)		N/A	.,				st Haz Ma						
Street Address								Addre						100,000	
011 011 = 5									st Street						
City, State, Zip Code									ip Code NJ 07504	4					
Project Manager for Mor	nitoring Firm		Telephor	ne No.		Teleph 973-3	none N 345-0			License N 00507	lo.				
Start Date (10)		Schedule	ed Cor	npletion I	Date (11)		Name	of OSI	HA Monitor	*					
October 6, 2012		Octobe		2012			Sam	e as a	above	<u> </u>	-				
Occupancy Status Durin	g Abatement (Chec	k Only On	e)				Street	Addre	ss		ENGLAND DESCRIPTION				
Facility Closed/Vac Abatement Perform							City 9	tate 7	ip Code						
Other – Describe:			, iouis	•			Oity, O	riais, Z	ip Code						
Scope of Work (Check A	II That Apply)		-						The state of the s						
× ≥3 sf or ≥3 lf			enova					Fu	I Containme		Negative F	ressu	re		
≥160 sf or ≥260 lf			emoli	tion			×	Mir	ni-Enclosure ovebag Prod						
	2027	_							n-Exempted		d Non-Friat	le Pro	7		
			Locat Iorma										Abate Ty	emen pe	ι
Location Asbestos-Containing		Use	d Sole	ly by	Asbes	De: tos Cont	scription taining N		I (ACM)	А	mount		Γ	m	
TO BE AB	ATED		intena odial s	nce/ Staff?		thermal	systems	s insula		(5	Specify or LF)	Rer	Re	Encapsulate	Encl
In Faci (13)		2000000	(12)				cing, VA niscellar			31	UI LF)	Remova	Repair	psula	Enclosure
		Yes	No	N/A								=		ate	ď.
Basem	ent		X			Pipe	Insula	tion		60	0 L.F.	Х			
Basem	ent		X			Boile	r Insula	ation		3	5 SF	x			
												1			
120												1			
Name of Registered Wa	ste Hauler		1000	JDEP W	707070	Cubic			Name of	Registe	ered Landfil		_		Щ
East Coast Haz Mat	Removal, Inc.		11 1155	lauler ID	No.	of Wa		10575	G.R.O.	W.S. I	North Inc.				
City, State				3 110			sal Date		City, Stat	е ,				_	
Paterson, NJ 07504						10/8/		/	Morrisv	ille P	Α				
Completed by		Title	-4.57			S	Signatur		/ /	1	(1)	ate	140		
James E. Unger		Proje	ct Ma	anager			pr	w	9,0		_ 10	0/5/20	J12		
ASB-41 (R-06-08)						/	* Do no	ot use t	this form for	asbes	tos licensur	e exer	npted	activi	ties.

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

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

									R	Enz.				
Date of Notification (1)	October 5, 2012	2			Name of I	Building	Owner/Ope Kearn	rator (y Fed	2) leral Savings	ECEIVE	B	7.,	59	
Agencies Notified [x] EPA		l Notifi			Street Add	dress	614 K	earny	Avenue	TOS CONTI ICENSING	?: 54			
[] DEP [x] DOL [x] DOH	Amer	ndment	tification # including		City, State	e, Zip Co	ode Kearn	y, NJ	07032 & L	IUS CONTI ICENSING	ROL			
[] DCA	10 50 50	ication) ellation			Name of 0		nio Dimuz	zio	T	elephone Number	a)	1.		
	- L			FAC	CILITY IN	IFORN	IATION	4						
Name of Facility Where Ba	Abatement is Taking ank	g Place	(3)					Тур	e of Facility (4)	School (k-12) Subchapter 8 (of	her tha	ı k-12)		
Street Address	4 Kearny Avenu	ıe			1000				[x]	Other (i.e., priva			ial bui	ldings
City			nty (6)		County Co (STATE U		.Y)		are feet 5,000	# of Floors		g. Age	50	
Kearny	. Itiaal ka Daildia	Hud			ASCM No		Nome of	100000		being demolished g/warehouse/o				
Name of Monitoring Firm	n Hirea by Building uardian Contract				ASCIVI NO		Name of	Abate		in Contracting,	Inc.			
Street Address	889 Rte. 9, Unit	202					Street Ac			oute 9, Unit 61				
City, State, Zip Code	oms River, NJ 08	755					City, Sta	te, Zip		iver, New Jers	ev 08	755-1	271	
Project Manager for Mor		133	Telephone	Number	r		Telephoi	ne Nun		License N			2/1	
Nicholas Fer			732-349				732-34			00624				
Scheduled Start Date (10 10/06/1			Scheduled 10/7/1	21,32	tion Date (11	1)	Name of	OSHA	Monitor E.M.S.I	. Analytical				
Occupancy Status During				iod of A	batement		Street A	ddress		elton Road				E
	her – Describe	Outside	of Normal I	Facility I	Iours		City, Sta	te, Zip		way, New Jerse	y 088	354		
Scope of Work (Check a	ll that apply)						[]	F	ull Containment	with Negative Pre	ssure			
			r 1	-			[]		Mini-Enclosure					
	sf or ≥3 lf 60 sf or ≥260 lf		[x] []	Renov Demol			[x] []		Hovebag Procedu Von-Exempted (*	and Non-Friable	Proced	ure		
								NV.			Abat	ement	Туре	
Location Asbestos-Containing TO BE AB in facili (13)	Material (ACM) ATED		Is Locatic Normally u Solely by ntenance/C Staff (12) S NO	sed y		(i.e	Description bestos-Con Material (A c., thermal ulation, su VAT, o her miscells	ntainin ACM) systen rfacin or	ns g,	Amount (Specify SF or LF)	R E M O V A L	R E P A I R	E N C A P S U L E	E N C L O S U R E
Basement-Mechanic	al Room			X	Asbest	os pipe	insulatio	n		400 lf	X			
							125				14			
	te Hauler Contracting, Inc.		NJDEP Was	.0223		Cubic Y	ards of Was		Name of Registe T.R.R.F.	red Landfill				
City, State Toms River	r, New Jersey				sal Date 8/12		City, St Tullyt		Pennsylvania					
Completed by (Print or T Nicholas Fe	ype)	Title Proj	ect Manag		Signatur	e /	cho	P.	Fe		Date 10/:	5/2012	2	

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

Check# 1497		IVC)				C 8:60 and 5:16	EMEN (000				
Date of Notification (1)					Name	of Building	Owner/Operator (2	2)	RECEIVE OCT 11 PM 2	D			
10 /	05 /	12				-	owner operator (2012	200				
	Type Notifica					Address		5817 [ICT II PM 2	: 81			
Agencies Notified	I ppe Notifica	(!Of i						Acon		. 94			
⊠ DOLWD	Amended			ļ		lge Road. State, Zip C	ndo .	MORE	STOS COMT	Dai	ent and		
☑ DHSS	Amendme	nt #			5 FA 1025			ď.	STOS CONT LICENSING	KUL.			
DCA	☐ Emergend		ding	į		and, NJ 0'			Telephone Num	her () —		
(NJAC 5:23-8)	justificatio								Telephone Ham	DC: 6	,		
				i		Sweeney	FORMATION				-	-	
Name of Facility When	a Abatamant is T	akina Di	200	(3)	FA	CILITY	FORMATION	Type of Facility	(4)			-	
	e Abatement is i	aking Fi	ace	(3)				School (K-1					
Private home Street Address								Subchapter	8 (Other than K-1 2				
								Other (i.e.,) homes, etc.	private and comme	rcial bu	ilding	S,	
19 Ridge Road City (5)								Square Feet	# of Floors	BI	dg. A	ae	
Roseland, NJ 07068										1	-3	3-	
County (6)					Coun	ty Code (7)	(STATE USE ONLY)	Current Use (P	rior if being demoli	shed)			
Essex													
Name of Monitoring Fi	rm Hired by Build	ding Own	ner (8)	ASCM	No.	Name of Abatem	ent Contractor (9	9)	1.75			
							Gr Tech LLC						
Street Address		-					Street Address	F = 70 Pg				-	
							576 Valley Rd #	[‡] 283					
City, State, Zip Code							City, State, Zip C						
							Wayne, NJ 074	70					
Project Manager for M	lonitoring Firm			Tele	phone	No.	Telephone No.		License No.			- 40	
							973-638-1777		01127				
Start Date (10)		Schedule					Name of OSHA	Monitor					
10 / 14	/ 12	10	_ /	15		12	Envirovision Co	onsultants,Inc					
Occupancy Status Dur	ring Abatement (0	Check or	nly o	ne)			Street Address						
□ Facility Closed/Vac							20-21 Wagaraw	Road, Bldg .#	34A				
Abatement Perform	ned Outside of No - AM-	ormal Fa	cility	/ Hour PM	s - Des	scribe AM	City, State, Zip C	ode					
				_			Fair Lawn, NJ 0	7410	-				
Scope of Work (Check	all that apply)						☐ Full Con	tainment with Ne	anative Pressure				
		X		novati			Mini-End	closure	gative ressure				
☐ ≥ 160 sf or ≥260 lf			De	molitic	on			g Procedure	on-Friable Procedu	ire			
			Is	Locat	ion	T		inploa () and it	T		atom	ent T	
Locati	ion of		١	Norma	lly		Description	of			-		Ť
Asbestos-Containin		1)		d Sole intena			stos Containing Ma	aterial (ACM)	.Amount	Removal	Repair	Encapsulate	Enclosure
TO BE A		(Staff?	(1,€	e., thermal systems surfacing, VAT		(Specify SIF or LF)	NOL	air	sde	uso
(1:		_		(12)			other miscellane		City of Early	<u>m</u>		late	9
		Y	'es	No	N/A							ν.υ	
Basement					\boxtimes	Pipe ins	ulation		80 LF	X			
			7	П	ĪΠ					$\forall \Box$	П	П	П
					+=-	-				믐			H
					10	1				$\perp \!\!\! \perp$	Ш	Ш	Ш
]										
Name of Registered V	Vaste Hauler			NJ	DEP Wast	e Hauler ID No.	Cubic Yards of Was	te Name of Reg	stered Landfill				
Gr Tech LLC		No.		. (00337	85	TBD	T.R.R.F. Inc					
City, State							Disposal Date	City, State					
Wayne, NJ 07470							TBD	Tullytown, F	PA				
Completed By (Print o	r Type)	Title					Signatur	1 1	D	ate			
N.Jevtic	\$ ⁷	Owner	•				//ew	he Nen	10	/05/20	12		
ASB-41				7.7									

State of NJ

Notification of Asbestos Abatematic (Pursuant to NJAC 8:60-7 and 12:120-7) B & G proj. #: 2012-190 Date of Notification (1) Name of Building Owner/Operator (2) 1 10 / 0 5 / 1 12 Iron Workers Local No. 11 Type Notification Agencies Notified Street Address □ EPA Initial 402 Market Street DEP City, State, Zip Code DOL Amendment Perth Amboy, NJ 08861 Telephone Number DOH. Name of Contact Cancellation ☐ DCA William A Nagy Jr. **FACILITY INFORMATION** Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) Iron Workers Local No. 11 Subchapter 8 (Other than K-12) Other (Private/Commercial Street Address Bldgs./Homes, etc. 402 Market Street Bldg. Age Square Feet # of Floors County (6) County Code (7) City (5) (State use only) Current Use (Prior if being demolished) commercial building Middlesex Perth Amboy, NJ 08861 Name of Monitoring Firm Hired by Bldg. Owner (8) Name of Abatement Contractor (9) ASCM No. B & G Restoration, Inc. n/a Street Address Street Address 105 Ryerson Road City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035 Telephone Number License Number Project Manager for Monitoring Firm Phone Number 0378 973-696-6869 Name of OSHA Monitor Scheduled Start Date (10) Sched. Completion Date (11) B & G Restoration, Inc. 10/16/2012 Street Address Occupancy Status During Abatement (Check only one) 105 Ryerson Road Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Lincoln Park, NJ 07035 Other-Describe: Scope of Work (check all that apply) Demolition Renovation Full Containment w/negative pressure ☐ Glovebag procedure \boxtimes >3 sf or >3 If ■ Non-friable procedure ≥160 sf or ≥260 lf Is location normally used solely Location of by maintenance/custodial е e n Amount asbestos-containing Description of asbestos-containing m staff(12) р C (Specify SF or material to be material (ACM) C 0 a a abated in facility (13) LF) Yes No N/A 6 20 lf Ø pipe insulation mechanical room boiler insulation 25 sf mechanical room Registered Waste Hauler Cubic Yards of Waste Name of Registered Landfill NJDEP Hauler ID# B & G Restoration, Inc. 19563 2 yards Tullytown Resource & Recovery Center Disposal Date City, State City, State 10/19/12 Lincoln Park, NJ 07035 Tullytown, PA Completed by (Print or Type) Signature Date Title Ciordana Luna Gordana Luna Treasurer 10/5/2012

State of NJ

B & G proj. #: 2012-180

Notification of Asbestos Abdulling (Pursuant to NJAC 8:60-7 and 12:120-7)

RECEIV Check # 5552 Date of Notification (1) 2012 OCT 11 PM 2: 32 Name of Building Owner/Operator (2) 1 0 / 0 5 / 1 2 Etta Marshall Agencies Notified Type Notification & LICENSING Street Address ☐ EPA Initial 38 Gerard Avenue DEP City, State, Zip Code Amendment DOL Basking Ridge, NJ 07920 Telephone Number DOH. Name of Contact Cancellation ☐ DCA Etta Marshall **FACILITY INFORMATION** Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) Etta Marshall Subchapter 8 (Other than K-12) Other (Private/Commercial Street Address Bldgs./Homes, etc. Bldg. Age 38 Gerard Avenue Square Feet # of Floors County (6) City (5) County Code (7) (State use only) Current Use (Prior if being demolished) residential Somerset Basking Ridge, NJ 07920 Name of Monitoring Firm Hired by Bldg. Owner (8) Name of Abatement Contractor (9) ASCM No. B & G Restoration, Inc. n/a Street Address Street Address 105 Ryerson Road City, State, Zip Code City, State, Zip Code · Lincoln Park, NJ 07035 License Number Project Manager for Monitoring Firm Telephone Number Phone Number 0378 973-696-6869 Name of OSHA Monitor Scheduled Start Date (10) Sched. Completion Date (11) B & G Restoration, Inc. 10/18/2012 Street Address 10/18/2012 Occupancy Status During Abatement (Check only one) 105 Ryerson Road Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Lincoln Park, NJ 07035 Other-Describe: Scope of Work (check all that apply) Demolition ☐ Full Containment w/negative pressure Glovebag procedure Mini-enclosure ■ Non-friable procedure \times >3 sf or >3 If >160 sf or >260 lf Is location normally used solely E Location of e by maintenance/custodial е n asbestos-containing Amount Description of asbestos-containing m n staff(12) p C (Specify SF or material to be material (ACM) 0 a abated in facility (13) Yes No N/A ٧ e 60 lf X pipe insulation boiler room 45 lf X pool table room pipe insulation oil tank room 24 lf X pipe insulation 6 lf/33 lf Ø hallway/laundry room pipe insulation pipe insulation 40 lf 3rd floor attic guest room Cubic Yards of Waste Name of Registered Landfill Registered Waste Hauler NJDEP Hauler ID# 19563 B & G Restoration, Inc. 4 yards Tullytown Resource & Recovery Center Disposal Date City, State City, State 10/19/12 Lincoln Park, NJ 07035 Tullytown, PA Completed by (Print or Type) Signature Date Title Cordana Luna Gordana Luna 10/5/2012 Treasurer

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

B & G proj. #: 2012-20193

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Date of Notification	(1)	11	Name of	Building Owi	ner	Operator (2)		90.	. A.T.	U					
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				FAC	CILI	TY INFORM	ATION	· · · · · · · · · · · · · · · · · · ·	1						
Name of facility wh	nere abatement	s taking p	ace (3)						Type	of Facility (4) I (K - 12)			
Judy Esposito									[=	apter 8 (58	han k	(-12)	
Street Address						and the same of th				Other (Private/0	Comme		100	
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J., (5)			- 5.050A					te use only)	Curre	ent Use (P	rior if bei	ng den	nolish	ed)	
Montville, NJ			orris							ential					
Name of Monitorin	g Firm Hired by	Bldg. Own	er (8)		1	ASCM No.		Name of Abatement		or (9)	٠				
n/a					<u>_</u>		_	B & G Restoration	n, Inc.		- Sendandari				
Street Address								105 Ryerson Roa	d						
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o.,, o.e.o, _p								Lincoln Park, N.	1 07035						
Project Manager for	Monitoring Firm	1		Phone Numl	ber	1000	=	Telephone Number	0,000		License	Num	oer		
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Scheduled Start Da	te (10)	Sche	d. Comple	etion Date (1	11)			Name of OSHA Moni	76						
10/15/2012		10/1	5/2012					B & G Restoration	on, Inc.						
Occupancy Status I	During Abateme				della su		-	105 Ryerson Roa	hd						
								City, State, Zip Code	iu						
Abatement pe	erformed outside	of normal	facility ho	ours-											
Other-Describ	oe:						-	Lincoln Park, NJ	07035				-		
Scope of Work (ch	eck all that appl	/)			90										
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Registered Waste H			EP Haule			ic Yards of W	aste	Name of Registered			2 0		_		
B & G Restoration	on, Inc.		563	Disposal [yard		Tullytown Resour	rce & R	ecovery	Center			-	
City, State Lincoln Park, N.	J 07035			10/16/1		5		City, State Tullytown, PA							
Completed by (Print		Title		-1	_	Signature					Date				_
Gordana Luna		Treasure	r					Gordana Luna			10/5/2	012			



Date of Notification (1) 10/5/2012					f Building			(2)		2012 OC	711		- Amu		
Agencies Notified	Type Notification	4			ddress an Beure	en Roa	ad		S	SBES	The		1 2.	20	
EPA DEP DOL	Initial Amended Amendment	#			ate, Zip Co					SEES & L	CEN	coi Sin	VTR	OL.	
DOH DCA	Emergency justification) Cancellation	_	2-2217		f Contact iff Moodi	e				Telepho	ne Num	her		G 3)
	=			FACI	LITY INFO	RMATI	ON			Manage .					
Name of Facility Where A Residential	Abatement is Takir	ng Place (3)						Sch	acility (4) ool (K-12)						
Street Address 568 Van Beuren Ro	ad		11						er (i.e. priv	(Other that rate & con			dings,	hom	es,
City (5) Harding, NJ 07976								Square F 5,300		# of Floo			50 y	-	
County (6) Morris County					Code (7) USE ONLY)			Current U Resider		if being de	emolish	ed)			
Name of Monitoring Firm Health & Safety Ser		Owner (8)		ASCN 11				of Abatem Resource			Group	, LL	С		
Street Address 318 12th Street								Address Hamilto	n Ave, S	Ste 202					
City, State, Zip Code Hammonton, NJ 080	037	***************************************						tate, Zip C ton, NJ 0							
Project Manager for Moni Jim Proctor	itoring Firm				ne No. 04-8850		V. 10.577 (15.00 S. 10.00	one No. 977-6159	9	Lice 011	ense No 185).			
Start Date (10) 10/22/2012		Scheduled 10/31/20		etion l	Date (11)		A 400 MARKET TO SERVICE TO SERVIC	of OSHA N Environn		aborato	ries, L	LC			
Occupancy Status During	Abatement (Chec	k Only One)					Street	Address							
Facility Closed/Vaca Abatement Performe Other – Describe:	ated During Entire ed Outside of Norn	Period of Aba	atemer ours	nt			City, St	Route 2	ode						
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× .						000	VIAC								
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Date of Notification (1) 10/2/2012		Name of Plainfie	Building Owner	Operator	OS CONT	RMI aar		140	4	M
Agendes Notified Type Notification	I	Street Ad 920 Pa	idross rk Ave	& LI(ENSING	49	- 0 /(112	1	9
EPA Initial Amended Amendmer	t#		e, Zip Code Id, NJ 07060			WAIVER	APPI	30	VF	ח
DOH Justification Cancellatio		Name of Harold	Contact			Tolephone.	Number	لفندد		
		FACIL	ITY INFORMAT	ION	Ber ver			1 11		
Name of Feolity Where Abatement is Take Plainfield Cedarbrook K-8 Center					Type of Facil	10759/1/190				
Street Address 1049 Central Ave					Suboha Other (i	pter 8 (Other than e private & comm	K-12) ercial buil	dings,	homo	CS.
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County (6) Union		County C		,	Current Use	(Prior II being dem	olished)		Sate of	
Name of Monitoring Firm Hired by Building TTI Environmental Inc	Owner (8)	ASOM 00003			of Abatament Group, Inc	Contractor (9)				
Street Address 1253 North Church St					Address Hamburg Tu	ırnpike				
City, State Zip Code Moorestown, NJ 08057					faic, Zip Code mingdale. N		A.T.			
Project Manager for Monitoring Firm Mary Ellen Leotta	-	Telephon 856-84		970	one No)710-9725	Licent 0108				
Start Date (10) 10-06-2012	Scheduled 10-10-20	Completion D	Oale (11)	100000000000000000000000000000000000000	of OSHA Mon Group, Inc	itç=				
Occupancy Status During Abatement (Che					Address Hamburg 1	urnoike				
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Scope of Work (Check All That Apply) > 3 of or > 3 if > 160 of or > 260 if		ovetion			Mini-Enclo				n	
		cation						Abele	erneni Pe	'
Location of Asbestos-Containing Material (ACM) TO BE ARATED In Facility (13)	Used 8 Mains Custod	odely by enance/ ial Statt?	Asbestos Cor (i é therms aurit		daterial (ACM) s insulation i I . or	Amount (Specify SF or LF)	RAMINE	Rupar	Encapsulate	Envicacie
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							-	+		
Name of Registered Weale Houler GL Group, Inc.	1	NJDEP W: Hauler ID I D033034	No of Wi		Gro		ndtii)	1		ſ
City State Bloomingdale, NJ			Dispo TBD	sa Dak		State Isville, PA				
Completed by Michael B Solakov	P.M.	-		Signatur	ع. المانية المنظمير	<u></u>	Date 10/2/2	012	- 1200	100

CK 004449

D&S Proj. #: MS 12-353

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

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Date of Notification	$ 1 ^2$		1	ame of Bu LISA O'H		wne	er/Operator (2)	2		2012 00	711	PH 2			2
Agencies Notified EPA DEP	Type Notificat ☐ Initial ☐ Amended	ion			T SMI		STREET		4		ASBES & I	TOS CO	ONTR	e OI	į	
	Amendment #:		Ci	ty, State, 2	Zip Code	е						- FIND	MG	41		
DOL	☐ Emergency			WOODI	BRIDG	E,	NJ 07095		The second of th					d.	9	
□ DOH	(including justification)		Na	me of Cor	ntact						Telepho	ne Numb	er			
☐ DCA	Cancellation			LISA O'	'HARA											
	- Carlochador	·					LITY INFORM	ATION	l							
Name of facility wh	nere abatement i	s taking	plac	ce (3)						T	ype of Facility				-	
LISA O'HARA												ool (K - 12 hapter 8 (N	nan K	(-12)	
Street Address												r (Private/ s./Homes,		rcial	•	
313 EAST SM	ITH STREET									JГ	Square Feet	# of Floo	ors	В	dg. A	\ge
City (5)		C	ount	ty (6)	14-14-11			221000000	nty Code (7)	1 L						
WOODBRIDG				DLESE	X			(Sta	te use only)		Current Use (Prior if bei	ing dem	olish	ed)	
Name of Monitorin	g Firm Hired by	Bldg. O	wner	(8)		T	ASCM No.		Name of Abateme	nt Co	ntractor (9)					
						1			D & S RESTO	RAT	TON, INC.					
Street Address		XE-3-3-12							Street Address							
				11					20 California	Ave.						
City, State, Zip Cod	le								City, State, Zip Coo	de	15					
				- 1					Paterson, NJ	0750	3					
Project Manager for	r Monitoring Firm	1		Ph	none Nu	mbe	er		Telephone Numbe				e Numb	er		
									973-345-802				01169			
Start Date (10)		Sc	hed.	Completion	on Date	(11)	_	Name of OSHA M							
10/15/12		10)/26	/12					D & S Restor	ation	, Inc.					
Occupancy Status I	During Abatemer		1000	1077	-	4		_								
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Other-Descri	The second secon		W.			_			Paterson, NJ							
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Registered Waste F	lauler	L	10	P Hauler I	ID#		ubic Yards of \	Naste	Name of Register	ed I a	ndfill		_ ⊔_		ш	
D & S RESTOR			135(U ll	333	YD	rusto	TULLYTOWN			ECOVE	RY			
City, State					Disposa	_			City, State				erounit			
PATERSON, N	J 07503				10/16				TULLYTOW	N, PA	A					
Completed by (Prin BOGDAN JOL	t or Type)	Title PRES	IDI	ENT			Signature		1			Date 10/04	/12			
ASB-41					for asbe	sto	s licensure ex	empted	l activities.		-					

Uct 4 2012 11:44am PUU1/UU1 Fax: CK 604 State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60 and 12:120) D&S Proj. #: MS 12-352 Name of Building Owner/Operator (2) Date of Notification (1) AFPRONED 1 10 / 10 14 1/ 11 12 No Pept. of Hyalth & Senior Services VINA CATRICIONES Agencies Notified Type Notification Street Address Initial bnature) ☐ EPA Amended 174 LAKE STREET DEP City, State, Zip Code Amendment #: M DOL Emergency ENGLEWOOD, NJ (including × HÓO Varne of Contact Telephone Numbe justification) M DCA VINA CATRICIONES Cancellation FACILITY INFORMATION Type of Facility (4) Name of facility where abatement is taking place (3) School (K-12) VINA CATRICIONES Subchapter 8 (Other than K-12) Other (Private/Commercial Street Address Bldgs./Homes, etc. Bldg. Age Square Feet | # of Floors 174 LAKE STREET City (5) County (6) County Code (7) (State use only) Current Lise (Prior If holing damnlished) BERGEN **ENGLEWOOD** Name of Abatement Contractor (9) . Name of Monitoring Firm Hired by Bldg. Owner (2) ASCM No. D & S RESTORATION, INC. Street Address Street Address 20 California Ave. City, State, Zip Code City, State, Zip Code Paterson, NJ 07503 Talephone Number License Number Project Manager for Monitoring Firm Phone Number 01169 973-345-8020 Name of OSHA Monitor Start Date (10) Sched, Completion Date (11) D & S Restoration, Inc. Street Address 10/05/12 10/16/12 Occupancy Status During Abatement (Check only one) 20 California Avenue Facility closedvacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Other-Describe: NORMAL HOURS Paterson, NJ 07503 Full Containment winegative pressure Scope of Work (check all that apply) Mini-enclosure >3 sf or >3 if Renovation Glovebag procedure 2160 sf or ≥260 lf Demultion Non-Exempted (*) and Non-friable procedure is location normally used solely Ε Location of 0 by maintenance/custodial n Amount asbestos-containing Description of asbestos-containing m n p ¢ staff(12) (Specify SF or ¢ material (acm) to be meterial (ACM) 0 2 abated in facility (13) NIA Yes No 8 PIPE INSULATION 120 L.FT X Basement П Registered Wests Heuler Cubic Yards of Waste Name of Registered Landfill NUDEP Hauler 10# TULLYTOWN, RESOURCE RECOVERY D& S RESTORATION, INC. 13506 1 YD

1140

PRESIDENT

PATERSON, NJ 07503

Completed by (Print or Type)

BOGDAN JOLDZIC

438-41

Tenneal Date

10/08/12

Do not use this form for aspersos Hoensure exempted addivities.

Signature

City. State

TULLYTOWN, PA

10/04/12

D&S Proj. #: MS 12-352

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

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EPA	Date of Notification (1)				18 65	2)		11 130 Zie	PM 2.	• •			
Second Project Manager for Monitoring Firm		cation			ONES			Cora		13			
ENGLEWOOD, NJ Name of Contact Telephone Number Telephone Numbe	☐ EPA ☐ Initial							231US C	ÖNTD) I			
Second Project Manager for Monitoring Firm					EET		& LICENS	ING"	JL.				
ENGLEWOOD, NJ Name of facility where abatement is taking place (3) VINA CATRICIONES Street Address Type of Facility (4) School (K-12) School (K-12	M DOI 1		City, State	e, Zip Code						72			
Telephone Number Telephone Number Telephone Number	Emergend	су			NJ					-	1990	Zen was en a	
Cancellation	justification		Name of C	Contact				Telepho	ne Numbe	er			-
Name of facility where abatement is taking place (3) VINA CATRICIONES Street Address T74 LAKE STREET County (6) ENGLEWOOD BERGEN Name of Monitoring Firm Hired by Bidg. Owner (6) Sitest Address 20 California Ave. City, State, Zip Code Project Manager for Monitoring Firm Phone Number 20 California Ave. City, State, Zip Code Paterson, NJ 07503 Telephone Number 973-345-80230 T016/12 State (10) 10/05/12 10/16/12 State (not observed and state party) 20 California Ave. City, State, Zip Code Paterson, NJ 07503 Telephone Number 973-345-80230 Telephone Number 973-345-8	DCA Cancellat	ion	VINA	CATRICI	ONES							- NA OCT - 731	
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	ompleted by (Print or Type)		DAIT		Signature								
	ASB-41			for asbesto	s licensure exer	mpted	activities.		10/04/1	12			

D4 D&S Proj. #: MS 12-350

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

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Date of Notification (1)	2 .		Name of	Building Ov	vner/	Operator (2)				2012 00	יז י	7.			
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Agencies Notified Type I	Notification	on	Street Ad	dress	_				_	#2RES	Too				
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	cellation	- 11	MAR	THA LIE	BLIC	ЭН									
						Y INFORM	ATIO	N							
Name of facility where abate	ement is	taking p	lace (3)					· · · · · · · · · · · · · · · · · · ·		Type of English	(4)				
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WEST NEW YORK	and the second		JDSON				(31	ate use only)		Current Use (P	rior if bei	ing der	nolish	ned)	
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D&S Proj. #: MS 12-348

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

										-145				
Date of Notification				Building Ow	ner/Operator (2)			2012 OCT 11	PM	1 - 1. 4			
Agencies Notified	Type Notifica	ition	Street Add		ZINGER	-			4	6.11	1.41	_		
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				FAC	ILITY INFORM	IATIO	N							
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Project Manager for	Monitoring Firm	0		hone Numb			Paterson, NJ		03					
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				***************************************			Name of OSHA M		or.		71109			
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State of NJ
Notification of Asbestos Abatement
(Pursuant to NJAC 8:60 and 12:120)

D&S Proj. #: MS 12-349						os Abatement 0 and 12:120)	RE 2012 OCT ASSES	CEI	VEN					
Date of Notification (1)				ner/Operator (2)			ASSES LICE	// 6	(20)					
Agencies Notified Type Notific	ation		O CHRITT	ENDEN			TOBEC.		1:60					
EPA Initial		Street Ad				¥.	& 1103	Con	(3)					
☐ DEP ☐ Amended	- 11		GDEN AV	ENUE			-ICE	15/1/2	RAI					
DOL Amendment		City, State	e, Zip Code			3000		174						
Emergence	у	TEAN	IECK, NJ (7666					C)					
DOH (including justification	n)	Name of 0	Contact		11.0		Tele	phone N						
DCA Cancellation	on	DAVI	D CHRITT	TENDEN							_2122			
N			FAC	ILITY INFORMA	ATION	l								
Name of facility where abatement	t is taking p	olace (3)					Type of Fac							
DAVID CHRITTENDEN							=	chool (k						
Street Address									er 8 (Other			(
292 OGDEN AVENUE							В	dgs./Hor	vate/Comm					
City (5)	Cou	unty (6)				nty Code (7)	Square Fe	et #o	f Floors		Bldg. /	Age		
TEANECK		ERGEN			(Sta	te use only)	Current Us	e (Prior i	if being de	nolis	hed)			
Name of Monitoring Firm Hired by	Bldg. Own	ner (8)		ASCM No.	\top	Name of Abatemer	nt Contractor (9)				_			
Street Address						D & S RESTO	RATION, INC	2.						
oli oct / tudioss						Street Address 20 California	A 170	50-0						
City, State, Zip Code					-11	City, State, Zip Code	ASSESSMENT OF THE PARTY OF THE	-		_				
						Paterson, NJ 0	7503							
Project Manager for Monitoring Firm	n	F	Phone Numb	er	-	Telephone Number		Lic	cense Num	ber				
					-11	973-345-8020	0		01169)				
Start Date (10)	Sche	d. Comple	tion Date (11)	-	Name of OSHA Mo	200000000							
10/08/12	10/1	8/12			-	D & S Restora	tion, Inc.	_		_				
Occupancy Status During Abateme					-11	20 California A	venue							
Facility closed/vacated during Abatement performed outside	entire peri	iod of abat facility hor	ement. urs-			City, State, Zip Code				-				
Describe: NORMAL I	HOURS				-	Paterson, NJ 0	7503							
Scope of Work (check all that appl					Ш	1 41015011, 113 0		2		_				
≥3 sf or ≥3 lf	5.0	nn .					Full Containme Mini-enclosure		ative press	ure				
☐ ≥160 sf or ≥260 lf	Demolitio						the state of the s							
				r			Non-Exempted	(*) and I	Non-friable	proc	edure	<u> </u>		
Location of asbestos-containing		n normally enance/cu	used solely stodial						R	R	E	Е		
material (acm) to be	staff(12)			Description material (A)		bestos-containing	Amou	nt ify SF or	m	e p	n	n		
abated in facility (13)	Yes	No	N/A	material (At	CIVI)		LF)	ily SF OI	o v	a	а	C		
Basement			1	PIPE INSUL	ATIC)N	15 L FT		e	H	Р	 		
Basement				BARE HEAT			20 L FT			금	K	#		
Basement Boiler		X		Boiler Insulat	_		36 SQ F	,		片	H	#		
Basement		X		BARE HEAT	-	PIPES	60 L FT			븕	H	H-		
										Ħ	H	片		
egistered Waste Hauler D & S RESTORATION, INC.	NJDE 135	P Hauler		bic Yards of Wa YDS	ste	Name of Registered TULLYTOWN,		RECOV	/FRV		<u> </u>			
ity, State	_		Disposal Da		-	City, State	LUCOURCE	1000	LICI					
PATERSON, NJ 07503			10/09/12			TULLYTOWN,	, PA							
ompleted by (Print or Type)	Title			Signature Date										
BOGDAN JOLDZIC PRESIDENT * Do not use this form for asbest				licensure even	nted ·	activities		10/	/03/12					