						:60-7 and 12:11	(2)	YECE!					-
Date of Notificatio	te of Notification (1)					Owner/Operator	(2) 20.	CT 15 A	VE	m			
10/10/12				CK PC			20120	107 12	46.5	()		-	
Agencies Notified	Type Notifi	cation		et Addre		7	4	" 15 AI	411.	_			
[]EPA	[X] Initial		-				ASBES	TOS COA	11/2	દેદ_			
[]DEP		. 11		, State			& L	ICE COA	ITA-	2000			
[X]DOL	[]Amended	i cation	GL	EN RC	CK,	NJ 07452		CENSIN	740	L			
[X]DOH			Name	of Con	tact		Telephone	e Number	4				
[]DCA	[]EMERGE	NCA	NI	CK PC	OTO				W-4	•			
	[]Cancel	lation											
					LITY I	NFORMATION	Type of Facili	ter (A)					
Name of Facility Wh	nere Abatemen	t is Takin	g Pl	ace (3)					10)				
Private							[]Type»]: []Type»]: [X]Other (:	Subchapter i.e., priv	8 (0 ate &	COI	mer-	n K	-12
Street Address 97 GLEN AVE							cial b	uildings,	homes	, et	c.)		
City (5)		County (6)		Cou	nty Code (7)	Square Feet	# of Flo	ors	Bld 8		ge	
GLEN ROCK		Berge			(ST	ATE USE ONLY)	2800	2				(ber	
C							Current Use (I	e	eing	demo)115	ieu,	
Name of Monitoring	Firm hired b	y Building	J A	SCM No.			ment Contracto						
Owner (8)			6	7		AZTECH M	IANAGEMENT	, inc.					
N/A Street Address						Street Addres							
Street waters						11	topher St	•					
City, State, Zip C	ode			20.		City, State, Montclai	zip Code r, NJ 070	42					
Project Manager fo	r Monitoring	Firm Te	Lepho	one Numb	er	Telephone Num		100	Lice			er	
Project Manager 10	r monreoring	N/				(973) 744	1-8800		00	371			
Scheduled Start Da	te (10) So	ched. Comp.	letic	on Date	(11)	Name of OSHA	Monitor						
10/19/12	Section Sections (Section	10/20/1	12			N/A							
Month Day	Year		Day	Year		Street Addres	s						
Occupancy Status D [X] Facility Cl of Abateme	ent.					City, State,	Zip Code						
	ours - Descri	erformed (be:	utsi	de of N	formal								
[]other - Des Scope of Work (Che		apply)							ro Dro	00011	ro		
[X]>3 sf o		1		novatio molitio		[]Mini- [X]Glove	Containment wi Enclosure abag Procedure		/e PI	essu			
[12100 0.						[]Non-	Friable Procedu	ire		Aba	teme	nt !	Гуре
Locati	on of		Is Locat	cion		Descripti	on of					E	E
Asbestos-C	50 TEST (1971 - 63	1	Norma Use			Asbestos-Cor	ntaining	Amoun (Speci		R	R E	C	C
Materia		1	Sole By Ma			Material (i.e., therma		SF or	1000	M	PA	A P	D L
TO BE	cility	1 3	tenar		i	nsulation, sur	facing, VAT,	LF)		V	I	S	S
	3)	S	taff	(12)	-	or other misce	ellaneous)			L	R	L	R
		Yes	No	N/A	D	ipe		120 lf	Y-11-	X			
Basement			-		-	The							
			-					-		_			
			-	_	-			-					+
				Tre -1 -	1	ubic Yards	Name of Reg	istered La	ndfil	1	L -		1
Name of Registered AZTECH MANA		INC.		Waste er ID No 40	· o:	f Waste	G.R.O.W	.s.					
City, State Montclair, M	NJ 07042				D	10/22/12	City, State Morrisvi		A 1	906	7		
						10/504	2 / /		b	ate			
Completed By (Pri	CONTRACT CO	Title Presid	ent			Signatur	7//	_	153	10/1			

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Date of Notification (1)	111		of Building Owne	r/Operato	r (2)	KE	CFI	1/2	_	
10/10/12 (orus 19	19/12)	PSE8					CEI	Vt.	D	
Agencies Notified Type Notification X EPA Initial	-		Address CIRCLE AVE.			2012 OCT	15 A	Mı,		
EPA Initial Amended Amendment	± / ·		ate, Zip Code FON, NJ 0701	11		A SBEST	Da -	ш;	25	
Emergency (i		1	of Contact			I Tomobald	US CO	HIR	n	
DOH justification) Cancellation			G O'CONNEL	.L	9	1 Teleuwale	: MUUNDISI	10"	OL.	
		FAC	ILITY INFORMA	TION						
Name of Facility Where Abatement is Taking PSE&G	Place (3)		•		Type of Facility					
Street Address 25 EISENHOWER PARKWAY					School (K- Subchapte X Other (i.e.	12) r 8 (Other than private & comn	K-12)	Idinae	hom	00
					etc.)			-		cs,
City (5) ROSELAND					Square Feet APPX 8500	# of Floors		Bldg. A APP)	\ge (78	YES
County (6) ESSEX			Code (7) USE ONLY)		Current Use (Pr CONTROL I	ior if being dem	olished)			
Name of Monitoring Firm Hired by Building O ENVIRONMENTAL TACTICS	wner (8)	ASCI 0045	M No.		of Abatement Co		RICA IN			
Street Address				Street	Address		(10) (11)			
64 BROAD STREET City; State, Zip Code		1		13	WHITEHEAD State, Zip Code	AVE.				
MATAWAN, NJ 07747					TH RIVER, N	J 08882		•		
Project Manager for Monitoring Firm TOM GEIGER		Telepho 732-2	one No. 90-2217		none No. 432-8350	Licen:	se No. 11			
	Scheduled Co 10/28/2012		Date (11)		of OSHA Monitor		RICA INC	····		
Occupancy Status During Abatement (Check	Only One)	+			Address					-
Facility Closed/Vacated During Entire P					WHITEHEAD	AVE.				
Abatement Performed Outside of Normal Other – Describe:	al Facility Hou	rs			itate, Zip Code ITH RIVER, N	J 08882				
Scope of Work (Check All That Apply)		-								
≥3 sf or ≥3 if ≥160 sf or ≥260 if	Renov Demo	ation lition		×	Mini-Enclosur Glovebag Pro	cedure				
	Is Loca	t on	I		」 Non-Exempte	d (*) and Non-F	nable Pro	Abate		
Location of	Nom	ally		escription	of			Ту	ре	
Asbestos-Containing Material (ACM) TO BE ABATED	Used So Mainten	ance/	Asbestos Co	ntaining N	faterial (ACM) s insulation,	Amount (Specify	20		Ē	m
In Facility (13)	Custodial (12)		sur	acing, VA miscellar	T, or	SF or LF)	Remova	Repair	Encapsulate	Enclosure
(13)	Yes No	N/A	Other	misociiai	ieous)		l Sa	=	ulate	ure
2ND FLR. MENS LOCKER ROOM	X	1	THERMAL	SYSTEM	IS INSULAT	100 LF	$\frac{1}{x}$	-		
		1								
::										
Name of Registered Waste Hauler		NJDEP W	5 FE (10 TO 10 TO	c Yards	Name of	Registered Lan	dfill			
WASTE MANAGEMENT		1125	12		GROW					
City, State ELIZABETH, NJ			10/2	osal Date 9/2012		SVILLE, PA				
Completed by CAROL RAIMO	Title OFFICE I	MGR		Signature	ral La		Date 10//	. /	_	
J (J	J. 1	10	1	4	rac Xa	ino	//	011	d	

Date of Nationalise (4)			r			1		/	YEA				
Date of Notification (1) 10/9/2012			Name PSE	of Buildir &G	ig Owner	/Operato	r (2)	2010	TOS C	://	Er)	20 50
Agencies Notified Type Notification				Address				2015	CTIE	III	/10		
X EPA X Initial			150 (CIRCLE	AVE.				. 13	AMI	1		
DEP				tate, Zip				चेलेहर	Too		3	5	
DOL Amendment			CLIF	TOŅ, N	J 0701	1	* *	& i	US C	741-		-	
□ Emergency (□ justification)	ıncıuaing	3	Name	of Contac	t			I Te	lephone V	Limbel	Rai		
DOH justification) Cancellation			CRA	G O'CC	DNNEL	<u>L</u> .			TOS CO	and the first	-4		
			FAC	CILITY IN	FORMAT	TION				-1-27		-	
Name of Facility Where Abatement is Taking PSE&G	g Place (3)		•			Type of Facilit	y (4)					
				8			School (I	(-12)					
Street Address							Subchap	ter 8 (Ot	ner than K-	12)			
13 EISENHOWER PARKWAY							Other (i.e	e. private	& commer	cial bu	ilding	s, hon	ies,
City (5)							Square Feet	# (of Floors	Т	Bldg.	Age	
ROSELAND							APPX 8500		3		APP	X 78	YRS
County (6)				Code (7)			Current Use (F	Prior if be	ing demolis	shed)			E3
ESSEX		- 1	(STATE	USE ONL	n		CONTROL	HOUS	E	,			
Name of Monitoring Firm Hired by Building (Owner (8)	ASC	M No.		Name	of Abatement C	ontracto	r (9)		-		
ENVIRONMENTAL TACTICS			004	5			QUE SYSTE			A IN	C.		
Street Address						Street	Address						
64 BROAD STREET						396	WHITEHEAD	AVE.					
City, State, Zip Code						City, S	tate, Zip Code						-
MATAWAN, NJ 07747							TH RIVER, I	NJ 0888	32				
Project Manager for Monitoring Firm		T	Telepho	one No.			none No.	1000	License I	No		-	
TOM GEIGER			\$100 BOOM \$1000	90-221	7		432-8350		01111	¥0.			
Start Date (10)	Schedul	ed Cor	mpletion	Date (11)	Name	of OSHA Monito	١٢					
10/27/2012	10/28/				'	1	QUE SYSTEM		AMERIC	A IN	:		
Occupancy Status During Abatement (Check	Only O	ne)					Address					-	
Facility Closed/Vacated During Entire P	eriod of	Ahaton	nont			K554 THE STATE OF THE	WHITEHEAD	AVE.					
Abatement Performed Outside of Normal	al Facility	Hours	S				tate, Zip Code				-70		,
Other - Describe:							TH RIVER, N	J.1 0888	32				
Scope of Work (Check All That Apply)												1	
≥3 sf or ≥3 lf	X	Renova	ation			F	1			28			
≥3 sf or ≥3 lf≥160 sf or ≥260 lf	-	Demolit					Full Contains Mini-Enclosu	nent with	Negative	Pressi	ıre		
						×	Glovebag Pr	ocedure	1		52		- 20
****	Т —	-					Non-Exempt	ed (*) an	d Non-Frial	ble Pro	cedu	е	
	1 32	Locati		1							100000	emen	t
Location of		Normal d Sole			De	scription	of			-	T - 1	/pe	
Asbestos-Containing Material (ACM) TO BE ABATED	Ma	intena	nce/	Asbe	stos Cont	taining M	aterial (ACM) insulation,		mount specify	-		Щ	m
In Facility	Cus	todial 5 (12)	Staff?	(surfa	cing, VA	Γ, or		or LF)	l em	Repair	cap	l oc
(13)	L	(12)			other n	niscellan	eous)	1	*3	Remova	oair	Encapsulate	Enclosure
	Yes	No	N/A							-		ate	G)
2ND FLR. MENS LOCKER ROOM	Х		THER	MAL S	YSTEM	IS INSULAT	10	00 LF	x	+-		\vdash	
								- "			_		
			<u> </u>										
52.54				11									
					Y					1			
Name of Registered Waste Hauler		N.	JDEP W	/aste	Cubic '	Yards	Name of	Registe	red Landfill	1			\dashv
WASTE MANAGEMENT		11 2010	auler ID	No.	of Was		GROW						
City State			1125		12		CITON		DIAM'S LOCAL SECTION				:
City, State ELIZABETH, NJ						al Date	City, Sta		(L)	2000	50.00		
	-				10/29/		MORR	ISVILL	E, PA				
Completed by CAROL RAIMO	Title	>E 44	CD		Si	gnature	//	,	Da				
OAI (OL IVAIIVIO	OFFI	J⊏ IVI	GK.			C4	tal XC	in	10	/9/20	12		

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

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

Date of Notification	n (1)				-	wner/Operator	r ((2)	REI	0				
10/10/12			Har	vey (Gros	S			RE		1	EL)	
Agencies Notified	Type Notifica	ation		Addres					2012 OCT		-	-		
[]EPA	[X]Initial		113	18 K	ona	Ct.			- 001	15	AM I	1 : •	Po	
[]DEP	Notific	ation	City,	State,	Zip (Code			& LICE	_			0	
[X]DOL	[]Amended		Boy	nton	Bea	ch, FL	33	3437	2 110	SCO	MI	Da		
[X]DOH	Notific		Name o	f Conta	act	:		Telephon	ne Number	:NS/	Nis	NU	<u>L</u>	
[]DCA	[]EMERGENC			ly L							7 .			
[]DCA	[]Cancella	tion						-						
					ITY II	NFORMATION								
Name of Facility Wh		is Takir	ng Plac	ce (3)			T	Type of Facil	ity (4)					
Industrial Fe	rguson							[]School	45 83% (1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	+h		r_10	,	
Street Addres 2:	365 Rt 22	West					1		ter 8 (Other					
pereec mades =								cial b	uildings, l	homes	, е	tc.)		
		·			-1-		⊣ 1	quare Feet	# of Flo	ors	1	lg.	Age	
City (5 Union		County	(6) Esse	ЭX	5503663703	ty Code (7)	11	18,200	1			2		
						•	C	Current Use (Prior if be	eing	dem	olis	hed))
Name of Monitoring	Firm bired by	Buildin	T ASC	M No.	1	Name of Abate		ent Contracto	r (9)					
Owner (8)	ELLM HILLEG DY	Durrariy	9 1200	ii no.				NAGEMENT						
N/A Street Address						Street Addres				_				
Street Address							35	opher St						
City Chats Ris Co	a					City, State,			•					
City, State, Zip Co	ae							, NJ 070	42					
Project Manager for	Monitoring Fi	rm Fol	lenhone	Numbe	-	Telephone Num				Licen	80	Numb	or	
FIOJECT Manager IOI	MONITCOTTING FI	N/		, number	-	(973) 744				00				
Scheduled Start Dat	o (10) Saba	d. Compl	ASSESSED ASSESSED	Date (11)	Name of OSHA								
10/19/12	200 A 27 W 20 W)/22/1		Date (5701971 13	N/A	110	MIL COL						
			Day	Year										
Occupancy Status Du [X]Facility Clo	[전문] : [10] - [10] : [Street Addres	38				_			
of Abatemer	ıt	W 80 000										27 I - 37 - 20 - 20 - 20 - 20 - 20 - 20 - 20 - 2		
[]Abatement Pe	erformed Outsic			acility	7	City, State,	Zi	p Code						
[]other - Desc			the same that care	ipt»										
Scope of Work (Chec	k all that app	oly)				J	_							
[V] > 2 of a	. . 2 1 £	r	X] Reno	wation				ontainment wi nclosure	th Negativ	e Pre	ssu	re		
[X]≥3 sf or []≥160 sf		370]Demo					ag Procedure						
			Is			[]Non-I	Fri	iable Procedu	re	- 1:	Ahai	eme	nt T	Prme
Locatio	n of		ocatio			Description	on	of		f			E	E
Asbestos-Co			Used			Asbestos-Con Material		430 (J. (1991) 5 0	Amount		R E	RE	C M	C
Material TO BE A		B	Solely Main	-		(i.e., therma		10000000000000000000000000000000000000	(Specif	¥	M	PA	A P	O
In Faci	lity	Ct	enance	al		ulation, surf		460 N. 10 10 10 10 10 10 10 10 10 10 10 10 10	LF)		V A	I	S	S
(13)		Yes	aff (1 No	N/A	c	or other misce	€TT	.aneous)			L	R	L	R
Basement				X E	oil	er Insula	at	ion	140 sf	2	2			
													7.200	
Name of Registered	Waste Hauler		JDEP Wa		Cub	ic Yards		Name of Regi	stered Land	dfill				
AZTECH MANAG	EMENT, IN		7040		of	Waste 1.5		G.R.O.W.	S.					
City, State	2		. 0 2 0		Dis	posal Date	-	City, State		W/232/7	However, and	-	100	
Montclair, NJ	07042				10	/23/12		Morrisvi	lle, PA	19	06	7		
						10:		1,-1-1	7					
Completed By (Print Constantine V		eside	n t			Signatúre	. /	6 1. W	/ 	Da		10/	10	
COMP CONTENTS A	- A TON	.corue				1 1910	16	entre 11	When.	1	υ/.	10/	12	
78						1	1	/	(a) -					

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Date of Notification (1)	20 11 22	313			Building Ow ROSE O					2012	STOS	. A.				
10/1/2012 Agencies Notified	Type Notification	310		Street Add					4	SAF	0	-AF	++	. 3	4	
□ EPA	× Initial		1000		Street			=======================================		- &	STOS LICEN	COM	1	20.	_	
X DEP	Amended Amendment	*			, Zip Code , NJ 071				90		FICEN	SIN	Ġ,	(UL		
	Emergency (i		-	Name of (-	-				phone Nu		_			\neg
☑ DOH DCA	justification) Cancellation		F	ather .	Joseph K	(wiat	kowski		11000 11000				12			
		- TO (0)		FACIL	ITY INFOR	RMATI	ON	Type o	f Facility (4	1)					-	
Name of Facility Where A		Place (3)							chool (K-1							
Street Address								S	ubchapter	8 (Othe	er than K-1	12)	Idio	no h	omo	
13 Grey Street								et	ther (i.e. p c.)							,,
City (5)								Square 45,00		# of	Floors	21 5	Bldg 80+	. Ag	е	
Newark					-d- (7)			1 100 A 100 M	t Use (Pric	- 1.0	na demolis					
County (6) ESSEX				County C STATE U	SE ONLY)			Churc		JI II DOI	ng demon	onica)				
Name of Monitoring Firm	Hired by Building (Owner (8)		ASCM	No.				ement Con							
McCabe Environm	ental	,		00118	3		EA S	Service	s Corpo	ration						
Street Address	Venue							Address 69th S								
464 Valley Brook A City, State, Zip Code	wenue						City, 8	State, Zip	Code						-	
Lyndhurst, NJ 0707	71								, NJ 070)93	License	No				
Project Manager for Mon Jimm Ruff	nitoring Firm			Telephon 201-43	ie No. 8-4839		201-	hone No 295-17	700		01074	140.				
Start Date (10) 10/2/2012		Scheduled		pletion E	Date (11)				A Monitor s Corpo	ration						
Occupancy Status Durin	ng Abatement (Chec	k Only One	:)					Addres								
Facility Closed/Vac Abatement Perform	cated During Entire I	Period of Al	oatem	nent				e as al State, Zi	THE STATE OF THE S		•					-
The second results of							<u></u>						n.s			200
Scope of Work (Check	All That Apply)	X D	enova	tion				J Full	Containm	ent wit	n Negative	Press	ure			
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		Beginned	emolit	100000000000000000000000000000000000000				Min Glo	i-Enclosur vebag Pro n-Exempte	e cedure				dure		
		1-1		inn.					LXCIIIpto	7				bate	ment	
Locatio	on of	N	Locati ormal	lly		D	escriptio	n of				\vdash	Т	Ту	oe	
Asbestos-Containin	g Material (ACM)		l Sole		Asbest	os Cor	ntaining	Material ns insula	(ACM)	100	Amount Specify	2	,	_	Enc	9
TO BE A		Custo	odial ((12)	Staff?	(1.6.	surf	acing, V	AT, or			F or LF)	Keillova		Repair	Encapsulate	Enclosure
(13)			_		otner	miscella	aneous)				ā	1	=.	ilate	Тe
		Yes	No	N/A	D' 1	ا - ا ، ر ـ	lar			1	50 LF	x	+		-	
Baser		Х		Pipe In	isulai	lion				30 LI	^	+	_		-	
										-		-	+			-
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News of Baristons I W	acto Hauler		N	NUDEP W	/aste	Cubi	c Yards		Name of	f Regis	tered Land	dfill				
Name of Registered With			H	Hauler ID 5939		10000000	aste		290000 VIII		agement					
City, State PO Box 5010						Disp tbd	osal Da	te	City, Sta Tullyto		andfill					
Completed by		Title	. 1.1.	nager			Signatu	ire /	Pua		1	Date 10/1/	20	12		
Gina Salvador		Office	ivid	ilagei				4	fulle							

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140				(Pu	rsuan	t to NJA	C 8:60 and 5:1	6)	REAL				
Date of Notification (1)	****				Name	of Building	Owner/Operator (2)	TEM	15.1	۳,		
	09/_	12			Joh	n Kearn	ә у	201	RECENTION AM	4- f.	,d [‡]		
Agencies Notified	Γype Notifica	ation			Street	Address			- OLT 15 AM	11.			
	☐ Initial				285	9 Main S	treet	ASA	Fera	11:5	3		
	Amended Amended				City, S	State, Zip C	Code	7	E 105 Crisi	7-			
☐ DHSS	Amendme Emergene	0.777			Mai	nchuttua	, NJ 08051		LICENSING Telephone Num	(RO	L.		
(NJAC 5:23-8)	justification		iuuiiig		Name	of Contac	i	***************************************	Telephone Numi	ber			
	Cancellat	UU 5 5 5 7 1			Joh	n Kearn	ә у			*			
					FAG	CILITY IN	FORMATION						
Name of Facility Where Ab	atement is T	aking	Place	(3)				Type of Facility					
Kearney Assoc.								School (K-12	?) 8 (Other than K-12]	·			
Street Address									rivate and commer		uilding	JS,	
2859 Main Street								homes, etc.)					
City (5)								Square Feet	# of Floors		dg. A		
Mantua					10-	h 0 1 17	VOTATE LIGE OUT VA	40,000Sf	2 Floors		80 yı	s.	esencini
County (6)					Cour	ity Code (/)(STATE USE ONLY)		ior if being demolis	nea)			
Name of Monitoring Firm H	ired by Build	lina O	wner (8)	ASCM	No	Name of Abateme	Garage					
Here Tech, Inc.	ned by build	ing C	wiici (ا "	AGOIVI	140.		105	al Service, LLC	3			
Street Address							Street Address						
1879-I Old Cuthbert F	Road						14 Read Driv	е					
City, State, Zip Code		WWW-BL					City, State, Zip Co	ode					-0.00 0.00
Cherryhill							Sicklerville, I	NJ 08081					
Project Manager for Monito	ring Firm			Tele	phone	No.	Telephone No.		License No.				
Subash Rashia, PH.D)			8	6-429	-5200	856-318-1341		01158				
Start Date (10)						te (11)	Name of OSHA N	lonitor	E				
10 /13 / _	12	1(_ /	12	_ / _	12	Graham-Tech	n Environment	al Services, LL0	>.			
Occupancy Status During A	Abatement (0	Check	only o	ne)			Street Address						
☐ Facility Closed/Vacated						-commencer	14 Read Driv	е					
Abatement Performed C Time of Abatement: 7Al						cribe	City, State, Zip Co						
	E-907 (E-1500) 12-5						Sicklerville, I	NJ 08081					
Scope of Work (Check all the	hat apply)						☐ Full Conf	ainment with Nec	nativa Praesura				
≥3 sf or ≥3 lf			Re				☐ Mini-Enc	losure	gative i ressure				
☐ ≥160 sf or ≥260 lf			⊠ De	molitic	n			g Procedure	n-Friable Procedu	-			
		Т	ls	Locat	ion		23 11011 EXC	inplod () and ive	Trable 1 100cdd		atem	ent T	vne
Location of				lorma			Description of			-	_	_	T
Asbestos-Containing Ma)		a Soli intena	ely by nce/		stos Containing Ma ., thermal systems		Amount (Specify	Remova	Repair	nca	nck
IN Facility			Cust	3000 Days	Staff?	(1.6	surfacing, VAT,		SF or LF)	¥a	=	Encapsulate	Enclosure
(13)		-		(12)	T	-	other miscellane	ous)				late	e
			Yes	No	N/A				200 A CONTRACTOR OF THE SECOND	+_	-		
Inside Shingles				×		Asbest	os Shingles		400 Sf	M			
			П	П	lп					П	П	П	
Name of Registered Waste	Hauler			N	JDEP \		Cubic Yards of	Name of Regis	tered Landfill				
Graham-Tech Enviro	nmental S	ervic	e, LL(c	auler II		Waste	1	North Landfill &	Tully	tow	1	
City, State		-			00346		Disposal Date	City, State					-
14 Read Drive Sickle	rville, NJ 0	8081							entown Rd. Mor	risvil	le,P/	4	
Completed By (Print or Typ		Title	-				Signature	1 ()	Da				
Vernice Graham	,	33,63,63	eside	nt			Volizio	H. a.l.		 !0-	Q	11	2
							TUNE		V -	U	1	10	

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

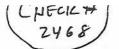
MO# 20142496541			(Purs	suant	to NJAC	8:60 and 5:16)		Or.				
Date of Notification (1)			N	lame o	f Building (Owner/Operator (2))	REC	EI	15	· /	
		-	N	larcell	o Nizzaro	lo		ASUESTO		F. C.	1)	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	e Notification		5	Street A	Address			TOP OCT I	5 A	4		
	Initial		2	095 W	estfield A	venue		A SIESTOS & LICE	11/	11/:	23	
27 202112	Amended Amendment #		(City, St	ate, Zip Co	de		25/03	Car	lr-		
V 01100	Emergency (incl	udina			Plains, N.	J 07076		& LICE	HSIN	IR	0L	
	justification)	•	1	Name o	of Contact			Telephone Num	per its	U		
	Cancellation		N	1arcel	lo Nizzaro	do		2				
				FAC	ILITY INF	ORMATION	*					
Name of Facility Where Abate	ment is Taking	Place (3)				Type of Facility					
Private home							School (K-12	?) 3 (Other than K-1 2	2)			
Street Address						w/	Other (i.e., p	rivate and comme	rcial bui	Iding	5,	
2095 Westfield Avenue							homes, etc.)					
City (5)							Square Feet	# of Floors	Blo	lg. Ag	je	
Scotch Plains, NJ 07076												
County (6)				County	y Code (7) (STATE USE ONLY)	Current Use (Pr	for if being demoli	snea)			
Union												
Name of Monitoring Firm Hire	d by Building O	wner (8	3) P	SCM	3236342	Name of Abateme	ent Contractor (9)					
						GrTech LLC						
Street Address						Street Address						
						576 Valley Rd #						
City. State, Zip Code						City, State, Zip Co						
			T = 1			Wayne, NJ 0747 Telephone No.	70	License No.				
Project Manager for Monitorin	ng Firm		leiep	hone i			•					
0: 10-1- (10)	Sched	uiod Ca	molet	ion Dat		973-638-1777 Name of OSHA N	Applitor	01127				
Start Date (10) 10 / 19 / 1	Q41-07	0 /			CONTRACTOR OF THE PROPERTY OF							
						Envirovision Co Street Address	onsultants,Inc					
Occupancy Status During Ab				nant	= 1		D 1 D11 #	244				
☐ Facility Closed/Vacated D ☐ Abatement Performed Out					cribe	20-21 Wagaraw City, State, Zip C		34A				
Time of Abatement:	_AMP		_PM_		AM							
Scope of Work (Check all tha	t annly)					Fair Lawn, NJ 0	7/410		-			
Scope of Work (Officer all the						Full Con	tainment with Ne	gative Pressure				
>3 sf or >3 lf > 160 sf or >260 lf		Re	novatio molitio	n		Mini-End Gloveba	closure ig Procedure					
☐ ≥ 160 St Of ≥200 II			montio			Non-Exe	empted (*) and N	on-Friable Proced	ure	£8		
	(a. 150, a) 245, may 10744		Locati			-04970			Ab	atem	ent T	ype
Location of			Normal d Sole			Description			Z	Z,	ш	m
Asbestos-Containing Mat TO BE ABATE			intena			stos Containing Ma ., thermal systems		Amount Specify	l ag	Repair	nca	nclo
IN Facility	<u></u>	Cust	todial S	Staff?	(1.0	surfacing, VAT		SIF or LF)	Removal	₹.	Encapsulate	Enclosure
(13)			(12)		-	other miscellane	eous)		_		ate	10
		Yes	No	N/A	ļ				(30)	-		-
Basement				\boxtimes	Pipe insu	ılation		20 LF	X	Ш	Ш	Ш
Basement				×	Boiler in	sulation		36 SF	X			
Dascinent			\Box							П	П	ĪП
		1	1	-	 					旨		
					<u></u>	7. 2						لا
Name of Registered Waste I	Hauler		NJE	EP Wasti	e Hauler ID No	Cubic Yards of Was	response for some					
Gr Tech LLC			10	03378	35	TBD	T.R.R.F. Inc			22.7007607		HIROX
City, State						Disposal Date	City, State					
Wayne, NJ 07470						TBD	Tullytown, I	PA				
Completed By (Print or Type) Title	е				Signature	1	2	Date			
N.Jevtic	Ow	ner				He.	he de	nad 1	0/10/2	012		
ASB-41					G 8			100000000000000000000000000000000000000		2.0	10-5-17-75	

UF & STERM 10-10-2012 29320FT IDENTI: HOD SON AVENUE PSIENGOSLOGOPHN I 0763/ N. ESTERMAN TEL DON N. ESTERMAN) 301 WEST HUDSON AVENUE 2 ENGLEWOOD 1200 BERGEN RESIDENCE ALC: No. Best Removal Inc APPROVED N Dept.mf Health & Senior Services 450 South River St 07601 Hackensack , B.J. 201-329-7444 00388 Omega Environmental Services 10-12-12 280 Huyler St 8 Am 5 PM South Mackensack H: J. 07606 werd i Ma-BASEMENT THERMALIUSULATION 58 SF BASEMENT THERMAL INSUCATION 1F HERE WHICH Best Removal Inc. 17109 Minerva Enterprises Loc Waynesburg; OH Hackensack, NJ Retinator 1.0-10-12

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Mich				(r	rursua	III to NJA	AC 6:60 and 5:16)	RECE				
Date of Notification (1)					Name	e of Buildin	g Owner/Operator ((2)	La Company	W		1	
	09 /	12	_		So	uth Jerse	y Port Corporat	ion	RECE 2012 OCT 15		- 1.5		
Agencies Notified	Type Notific	ation	-		Stree	t Address			15	ÂM I	1. 0		
⊠ EPA	☐ Initial				P.C	D. Box 12	9	1	& LICENS	!!	1.6	1	
□ DEP □ DCA (NJAC 5:16)		500			City,	State, Zip (Code		SI OS CI	DAT	Bo	me	-
DHSS	Amendm Emerger	-	ludina		Ca	mden, N.	J 08101		& LICENS	INC	KU		
DCA	justificati	on)	3		Name	of Contac	zt .		Telephone Numb	er			
(NJAC 5:23-8)	☐ Cancella	tion			Ha	nk D'And	Irea						
					FA	CILITY IN	FORMATION				-	32	
Name of Facility Where	Abatement is	Taking F	Place	(3)				Type of Facility	(4)	1			
Air Products Facili	ty							School (K-1	2)				
Street Address					-				8 (Other than K-12)		J:		
2710 Broadway								homes, etc.	orivate & commercia)	ii bull	ings	6	70
City (5)								Square Feet	# of Floors	В	dg. A	ge	
Camden					337 ESMI-			53,930	1		20+		
County (6)					Cou	nty Code (7	()(STATE USE ONLY)	Current Use (P	rior if being demolis	hed)	X		-933-11-1
Camden								Vacant Bui					
Name of Monitoring Firm			vner (8)	ASCM		Name of Abateme						
Horizon Environme	ental Group,	inc.			000	73	Diamond Hui	ntbach Constr	uction Corporati	ion			
Street Address							Street Address				W		
P.O. Box 316							500 East Luz						
City, State, Zip Code	•						City, State, Zip Co						
Thorofare, NJ 0808							Philadelphia,	PA 19124					
Project Manager for Mon Steve Lanigan	itoring Firm			250	ephone 56-848		Telephone No.		License No.				
Start Date (10)		Schodul	lad Co	1070		te (11)	215-739-8166 Name of OSHA M		00646				
10 /10 /						12	SAME AS AB						
Occupancy Status During				Posta									-
☐ Facility Closed/Vacate			200	0.5	ment		Street Address						
☐ Abatement Performed						scribe	City, State, Zip Co	do					
Time of Abatement: 7	AM- <u>5</u> PM/	PM		_AM			City, State, Zip Ct	ode					
Scope of Work (Check all	I that apply)		_								-Vierr		
		_					☐ Full Cont	ainment with Neg	gative Pressure				
$\square \ge 3$ sf or ≥ 3 If $\boxtimes \ge 160$ sf or ≥ 260 If			Rer Der				☐ Mini-Enc	losure Procedure					
						·			n-Friable Procedure	Э			
1 - 0				Loca: orma						Ab	atem	ent T	уре
Location Asbestos-Containing I		n	Used	Sole 1	ely by	Ashe	Description o stos Containing Ma		Amount	D	70	ш	т
TO BE ABA	TED	^		ntena odial	ince/ Staff?	(i.e., the	rmal systems insula	tion, surfacing,	(Specify	Remova	Repair	nca	ncic
IN Facilit (13)	ty			(12)	otun.		VAT, or other miscellane	ous)	SF or LF)	val	=	Encapsulate	Enclosure
		1	Yes	No	N/A		other miscenaries	Jusy				ate	(D
Whouse, Bck storage	Whouse, Bck storage & Office Bldg						ell Pipe Insulation	n & Fittings	70 Locations	\boxtimes			
Hallway		-				-	Floor tiles & mar		475 SF				H
Warehouse roof			51	\boxtimes		Black F	lashing		800 SF				П
Office area-Under Ca	rpet	Г		\boxtimes		9" X 9"	Floor tiles & mas	stic	2,400 SF	\boxtimes		$\overline{\Box}$	$\overline{\Box}$
Name of Registered Wast	3	- 1-			JDEP V		Cubic Yards of	Name of Regis			Ц	ш	Щ
Service Transport				Н	auler IE	No.	Waste	Minervia L					
City, State)	Service		A901		40 CY Disposal Date	City, State					
New Castle, DE							10/31/12	Waynesbu	ra. OH				
Completed By (Print or Ty	rpe)	Title	_					,	27 - 6				
Charles F. Imbimbo	100 00		ject l	Man	ager		Signature	V 1/1	Date	5/0	90	10	2
			,000		-g-,		(CAL	3 104	11/	1/0	17	110	-

NOTHICATION OF ASSESTOR ASATEMENT Creamant to Munication (1) Chock 4:50 and (12:12) Calcober 10, 2012 Name of Building Owner(Operator (2) Agencies Notified Page Notification E					Pursuan	N OF ASBESTO t to NJAC 8:60 a	nd 12:12	(0)		R	EC	F		L
DoL		*			The second second		/Operato		10	201200	27 ,	~	B 2	D
DoL					119 0	Oxford Road			4	SBES	Too	A	M //	: 21
Name of Facility Where Abatement is Taking Place (3) Residence Street Address	DEP X DOL	Amended Amendmen					8077	8		& L	CEA	COL	VIR	OL
Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (6,12)		justification)		g			***************************************		Tel	ephone N	umber		0	
Street Address 119 Oxford Road City (6) Cinnaminson County (6) Cinnaminson County (7) County (8) Street Address Street Addr	Name of Facility Where	Abatement is Takir	ng Place	(3)	FAC	ILITY INFORMA	TION	Type of Facility	(4)					
119 Oxford Road Section of Absternation State Justine Ju								School (K	-12)					
Square Feet Square	119 Oxford Road							X Other (i.e	er 8 (Oth private	er than K- & commerc	12) cial bu	ildings	s, hon	nes,
Surfington Residence Res	Cinnaminson					19		Square Feet	1	Floors			Age	
Street Address 1253 N. Chrurch Road City, State, Zip Code Moorestown, NJ 08057 Project Manager for Monitoring Firm Jim Guilardi Street Address 17 S. Lippincott Ave City, State, Zip Code Maple Shade, NJ 08052 Project Manager for Monitoring Firm Jim Guilardi Sa6-840-8800 Sa6-755-0099 Start Date (10) Cotober 24, 2012 October 24, 2012 Cocupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other - Describe: Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Westmont, New Jersey 08108 Scope of Work (Check All That Appty) 23 st or 23 if 24 State Stat	Burlington								rior if bei	ng demolis	shed)			
1253 N. Church Road 47 S. Lippincott Ave City, State, Zip Code Maple Shade, NJ 08052 Project Manager for Monitoring Firm Jim Guilardi Scheduled Compietion Date (11) October 24, 2012 City State, Zip Code Maple Shade, NJ 08052 Project Manager for Monitoring Firm Jim Guilardi Scheduled Compietion Date (11) October 24, 2012 Cocupancy Status During Abatement (Check Orly One) Cotober 24, 2012 Cocupancy Status During Abatement (Check Orly One) Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Westmont, New Jersey 08108 Scope of Work (Check All That Apply) ≥ 35 or ≥3 fr ≥ 160 sf or ≥260 if Renovation Demolition Scope of Work (Check All That Apply) ≥ 35 or ≥3 fr ≥ 160 sf or ≥260 if Size Address 107 Haddon Ave City, State, Zip Code Westmont, New Jersey 08108 Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Asbestos-Containing Material (ACM) 10 BE ABATED In Facility (12) Yes No N/A Basement Ceiling Attic Nume of Registered Landfill Grows Landfill Growpleted by Title Size (Lippino of Apple Code Maple Shade, NJ 08052 Disposal Date Tullytown, PA.	TTI	Hired by Building	Owner (8	3)	ASCI	M No.	Name	of Abatement C de Environme	ontractor ntal, LL	(9) .C				
City, State, Zip Code Maple Shade, NJ 08057 Project Manager for Monitoring Firm Jim Guilardi Start Date (10) October 24, 2012 Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other — Describe: Other — Describe: Scope of Work (Check All That Apply) Scope o		ad		1966-1960-1964										
Moorestown, NJ 08057 Maple Shade, NJ 08052 Telephone No. 856-840-8800 856-85-755-0099 Clicense No. 00842 Start Date (10)														
Sizer Date (10)		Water Commence							08052					
October 24, 2012 October 26, 2012 Description of Abatement With New Jersey 08108 Scope of Work (Check All That Apply) ≥ 3 sf or ≥ 3 ff ≥ 160 sf or ≥ 260 lf Location of Asbestos-Containing Material (ACM) In Facility (13) TO BE ABATED In Facility (13) Basement Ceiling Attic Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Absentos Sheeting Axxx Asbestos Sheeting Asbestos Sheet	Jim Guilardi	itoring Firm									No.			
Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other – Describe:						Date (11)		시간()() 보고 있는데 시설() [17] [17]	r					
Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Westmont, New Jersey 08108 Scope of Work (Check All That Apply) ≥ 3 sf or ≥3 lf ≥ 160 sf or ≥260 lf Senovation Demolition Security Sec	Occupancy Status During	Abatement (Chec												
Scope of Work (Check All That Apply) ≥ 3 sf or ≥3 lf ≥ 160 sf or ≥260 lf Secondarion Demolition Secondarion Demolition Secondarion Demolition Secondarion Secondario Second		ated During Entire I ed Outside of Nom	Period of nal Facilit	Abater y Hour	nent s							×		
≥3 sf or ≥3 if ≥160 sf or ≥260 if									ersey	08108				
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Basement Ceiling Attic Number of Registered Waste Hauler Nume of Registered Waste Hauler Treehold Nume of Registered Waste Hauler Nume of Registered Landfill Grows Landfill Grows Landfill City, State Nume of Registered Landfill Grows Landfill City, State Nume of Registered Landfill Nume of Registered Landfill Grows Landfill Signature Signature Signature Signature	Annual State of the State of th	I That Apply)	ाजा .	_			ाउ	1						
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Yes No N/A Basement Ceiling Attic Normally by Maintenance/ Custodial Staff? (12) Yes No N/A Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Sheeting SF or LF) Part of Material (ACM) (Specify SF or LF) Repair of Material (AC	≥ 160 sf or ≥260 lf							Mini-Enclosus Glovebag Pro	e cedure				·0	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Yes No N/A Basement Ceiling Attic Number of Registered Waste Hauler Freehold Number of Registered Waste Hauler Number of Registered Waste Number of Registered Landfill Grows Landfill City, State Number of Registered Landfill Grows Landfill City, State Number of Registered Landfill Number of Registered Landfill Number of Registered Landfill Grows Landfill Signature Signature Signature			100						, una	TVOIT TIGE	1	Abate	emen	t
Basement Ceiling	Asbestos-Containing	Material (ACM)	Use	ed Sole	ly by	Asbestos Con	taining M	aterial (ACM)	1316755			Ту		
Basement Ceiling	In Facili		Cus		Staff?	surfa	cing, VA	Γ, or	(S _j SF	ecify or LF)	Remova	Repair	ncapsul	Enclosu
Attic XXX Vermiculite 200 SF XXX Name of Registered Waste Hauler Preehold NJDEP Waste Hauler ID No. 22253 Registered Landfill City, State Mount Holly, New Jersey 08060 Title Signature Signature OSI XXX Vermiculite 200 SF XXX Name of Registered Landfill Grows Landfill City, State Tullytown, PA.			Yes	No	N/A						=		ate	re
Name of Registered Waste Hauler Freehold City, State Mount Holly, New Jersey 08060 Name of Registered Landfill City, State Disposal Date 10-26-12 Completed by Title Signature		Ceiling			XXX				8	SF	xxx			
Freehold City, State Mount Holly, New Jersey 08060 Hauler ID No. 22253 Of Waste 8 Disposal Date 10-26-12 Title City, State Tullytown, PA.	Attic		-		XXX	Ve	rmiculit	e	200) SF	xxx			
Freehold City, State Mount Holly, New Jersey 08060 Hauler ID No. 22253 Of Waste 8 Disposal Date 10-26-12 Title City, State Tullytown, PA.														
City, State Mount Holly, New Jersey 08060 Disposal Date 10-26-12 Tullytown, PA.		e Hauler		H	auler ID I	No. of Was		No seed	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -					
Completed by Title Signature		sey 08060				Dispos		City, Stat	е		llockedin -			
	Completed by		1000000	er			ignature			10		201	2	\dashv



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Date of Notification (1)	111/12			Name o	Bullding	Owner/Operator	(2) .41 mc=5	2012	CEIVE
Agencies Novined	Type Notification		-	Street	ddress	25 FRE		Aca.	105 CONTRACTOR
□ PA □ œP	☑ Jinital .		L	0. 0.	91.7			- 4000	417/1:
<u></u> ∞.	Amendment #			Cry, Su	ile, Zip C	we loops in	E, N, J	082781	ICS CON
□ рон	Emergency (in justification)	awing	H	Name o	Contac			Yelenhae Nimh	SENSIA FROM
<u> </u>	Cancellation				2150	FISHER			
	1			FACU	או צת	ORMATION			
Name of Facility Where	Abatement is Takin	Place (3)				Type of Facility	(4)	
	DENCE						School (K-12) I (Other than K-12	,
Street Address 16.2	64TH	7,						ivate & commerce	al buildings
Ciry (5) A			-				Square Feet	# of Floors	Bldg Age
	ALON						1000	1	40+
County (6)		200		County	Code (7) (STATE		or If being demotes	ined)
CAP	E MAY			USE C		1) - 7.1	Peul Coursaot (a)	CANT	
Name of Monitoring Firm	n Hired by Building	- Wher	1	SCHN	0	Name of Abatem	eur couragos (a)	ci	· i
(8)	///		ساء						-
Street Adoress						369 9	s. SPRU	CE AVE.	
			==	===		Cor State Zin C	ode		A 9 2 6 1
City, State. Zip Code			•				LE SHA	DE NOT	0800
Project Manager for Mo	onitoring Firm	T	Yeley	phone N	Q.	Yelephone No.	19-0472	License No	44
7.466		<u>``</u> .[Name of OSHA		-1 -00.	
Sian Date (10)		duled Co	mplet	ion Dali	: (11)	JOSE	PKALEM	М	
Occupancy Status Dun						Sueel Address	SPILUC	=10=	
Facility Closed/Vaca	ated During Entire Po	eriod of A	bater	ment		3695		E71.00	
Abatement Performs	ed Outside of Norma	d Facility	Hour	3		City, State, Tip	Code Cira	E, N, J,	18157
Other - Describe:						MAP	LE JAND	<u> </u>	0007 2
Scope of Work (Check	all that apply)					Full Co	ntainment with N	egative Pressure	
		Ren	novati	ion .		\(\sigma_{\sigma_{\circ}} \)	nclosure pag Procedure		_10.00.4
2160 51 01 2260 11		Ø 0.0€	nou so	x1		M Non-E	vembred (,) and y	Ion-Friable Proces	ADa.errer
		2007/01/20	ocalk						· rx
Location	0.01	Used	Sole	y by		Description stos Containing M	of atenal (ACM)	Amount	
Ashestos Containing	Material (ACM)	Mair	nenar ibola	nce/ al	ASDe (i.e	thermal system:	s insulation.	(Specify SF & LF)	Remov
TO BE AB	ATED		Staff?			sudating, VA	1,01 (eous)	3, 5 2. ,	Removal
(13)			(12)			2			- 5
*,		Yes	Но	N/A				12004	×
4.3.0	46			X		TRINSITU		10004	=
91011		1							= - ::
		-							= +
		-	-	1			- TE	egistered Landfill	
Name of Registered Y	Waste Hauler		T	NOEP	Waste .	Cubic Yards of Waste	Name of R	1, C, M.	0, 1.
Name of Registered V	o INC.			Hauler 1	04	5_			
			=1	- Committee		Disposal Date	City. State	DOINE	と、」
MOPLE SI	LADE, N.	5,0	80	52		Signatur		DBINE,	ie / /
Competed By	: 11	ide _^ .	. 1 . 1	11 0		319010	osept 15	erm _	3/11/01
JOSEPH K	LEMM_	0		ER	===	-1-A			

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Date of Notification (1) 10/10/12		I N	lame of /alley	Building C National	owner/C Bank	perator	2012	OCT 15		的					
Agencies Notified Type Notification	6.	1	treet Ad 1720 F	ddress Route 23 te, Zip Coo	North	ı é	SBE	STUS C LICENS	AH	11:12)				
DEP Amend Amend		_ \	Vayne	, NJ 07		200	&	LICEN	ONT	ROL					
✓ DOH justifica ☐ DCA Cancel	tion)	0.2222	lame of Dan Cl	Contact hin				•	्र पर्स	ephoné í	Numl	oer			
Name of Facility Where Abatement is house	Taking Place (3)		FACII	LITY INFO	RMATI	ON	Type S	School (K-12	*) 2)						
Street Address 6 Village Court							×	Subchapter Other (i.e. po etc.)	8 (Otherivate 8	comme	ercial	build	ings,	home	es,
City (5) New Vernon							1000		2	Floors		10	dg. A 00	ge	
County (6) Morris				Code (7) JSE ONLY)		2	Curre	nt Use (Prio	r if bei	ng demo	lishe	d)		78 - FORE	
Name of Monitoring Firm Hired by Buil	ding Owner (8)		ASCM	l No.				tement Con onmental			.C				
Street Address						(T) T) (T) (T) (T)	Addres	s Orive, PO	Box 4	483					
City, State, Zip Code			-10			City, S	itate, Zi	p Code , NJ 074							
Project Manager for Monitoring Firm	***************************************	Т	elephor	ne No.		Teleph	none No 583-8	o.		License 703	e No		distribution of the second		
Start Date (10) 10/29/12	I Comp	pletion (Date (11)		Name	of OSH	A Monitor								
Occupancy Status During Abatement	Check Only One)				Street	Addres	is							
Facility Closed/Vacated During E Abatement Performed Outside of Other – Describe:			ent		_	City, S	tate, Zi	p Code							
Scope of Work (Check All That Apply)								***************************************							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	novati				×	Min Glo	Containme i-Enclosure vebag Proc n-Exempted	edure					3	
	le l	ocatio	_				a NOI	I-Exempled	() all	u Non-i	IIabic		Abate	ment	
Location of Asbestos-Containing Material (ACI TO BE ABATED In Facility (13)	M) Used Mair	Solely tenandial St (12)	/ / by ce/		os Con thermal surfa	scription taining N system cing, VA niscellar	Material s insula T, or		(5	mount Specify F or LF)		Removai	Repair	e Encapsulate	Enclosure
<u></u>	Yes	No	N/A		c.			-	0/	00 CE				TO .	
roof		х		rootin	ng mate	eriais		80	00 SF	\dashv	х				
			-									_			
Name of Registered Waste Hauler			DEP W	/aste	Cubic	Yards		Name of F	Registe	ered Lan	dfill				
Freehold Cartage			uler ID 939	No.	of Wa			GROW	-70	andfill					
City, State Freehold NJ					Dispo TBD	sal Date		City, State Morrisvi		J					
Completed by Andrew Scott Higgins	ent			8	Signature	U	1			Date 10/	e 10/1	2			

19493;19539;19562

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

Date of Notification (1) (3)10-10-12	***		of Building (ndler Elev			(2) tion 20/2	דים	15 AM	EL)		
Agencies Notified Type Notification			Address hippany F	Road		Asa		15 AM	11:0	5		
EPA Initial DEP Amended Amendmen		City, S	tate, Zip Co stown		-	&	LICI	S CON SING	RO	<u>.</u>		
X DOH justification DCA Cancellation		Mr. B	of Contact ill Raffert				Tel	enhone Nii	mher	922		
Name of Facility Where Abatement is Takin	ng Place (3)	FAC	CILITY INFO	RMATIO	N	Type of Facility (4)					
Street Address 20 Whippany Road		12 11				School (K-1 Subchapter Other (i.e. p	2) 8 (Oth			dinas	. hom	es.
City (5) Morristown						etc.) Square Feet		Floors	E	Bldg. /	Age	
County (6) Morris			Code (7)			Current Use (Pri Commercial	or if bei	ng demolisi				
Name of Monitoring Firm Hired by Building TBD	Owner (8)	ASC	M No.			of Abatement Cor Icle Environm				*****		
Street Address						Address road Street						
City, State, Zip Code						ate, Zip Code tadt, NJ 07072	2					
Project Manager for Monitoring Firm		Teleph	one No.	10.1		one No. 39-6565		License N 00756	0.			
Start Date (10) (2)10-09-12	Scheduled (3)10-09-		Date (11)			of OSHA Monitor Air Inc.						
Occupancy Status During Abatement (Che	ck Only One)					Address						
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe: Area is vacant				0	City, Sta	Jackson Ave		01				
Scope of Work (Check All That Apply)					Long	Island City, N	1 111	01				_
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		ovation polition			×	Full Containmon Mini-Enclosure Glovebag Prod Non-Exempted	e cedure	128				
	Islo	cation				Non-Exemple	() and	1 NOII-F Hau	10		emen	t
Location of	Nor	mally olely by		Descr	ription o	of					/pe	-
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mainte Custodi (1	enance/ al Staff? 2)			ystems ng, VAT		(S	mount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
2nd Floor: West Wing		×		Pipe I	Fitting	js .	(3)	10LF	х			
Name of Registered Waste Hauler		NJDEP V	Nasto I	Cubic Ya	arde	Name of	Pogisto	red Landfill	<u> </u>			Щ
ATC, Inc. / TriState Transfer (5007)	1)	Hauler III 24310	FEET CO.	of Waste		Minerva						
City, State Shirley, NY / Bronx, NY		1		Disposal TBD	Date	City, State Waynes		OH 4468	8			
Completed by John Tancredi	Title Project	Managei		Sigr	nature 6	n / (a)		Da 10	te -10-	12		

RECEIVED # 2187

Date of Notification (1)		Т		f Building		Operator	(2)	20121	י ביונ	- * (110		0/
10/10/12				rine Car	lburg				101					
Agencies Notified Type Notification			Street A 63 Ivy					ASBE	STno	2000		9		
EPA Initial Amended Amendment		_		ate, Zip Co y, NJ 07				ASBE.	LICE	NSING	ROL			FEE-WA
□ Emergency (injustification) □ DCA □ Cancellation	ncluding			f Contact rine Car	lburg					ephone No				
	51 10		FACI	LITY INF	ORMAT	ION								
Name of Facility Where Abatement is Taking Private Residence	Place (3)						of Facility						
Street Address							П	School (K- Subchapte	r 8 (Oth					
63 Ivy Lane								Other (i.e. etc.)	private a	& commerc	cial bui	ldings	, hom	ies,
City (5) Tenafly				- Wisc			Squa 2,00	re Feet	# 0	f Floors		3ldg. / 50+	Age	
County (6)			County (Code (7)				ent Use (Pri		na demolis		+00		
Bergen				JSE ONLY)		Ounc	// O3C (1 1)	ioi ii bci	ng demons	sileu)			
Name of Monitoring Firm Hired by Building C	wner (8)		ASCN	1 No.				tement Co Contractir			S-1.50			
Street Address							Addre	ss eant Aver	nue					
City, State, Zip Code			-			City, S	tate, Z	ip Code						
								07013						
Project Manager for Monitoring Firm			Telephor	ne No.		Teleph 973-	one N 689-6			License I	No.			
Start Date (10) 10/20/12	Schedule 10/20/1		npletion I	Date (11)				HA Monitor onmenta		ratories,	LLC			
Occupancy Status During Abatement (Check	Only On	e)				Street		The second second						
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm						20005305355	en money en	e 22 We	st					
Abatement Performed Outside of Norm Other – Describe:	al Facility	Hours		(i)		0 (2000 0		ip Code 07081						
Scope of Work (Check All That Apply)	70.164	in Well								7.011				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	enova emolit				×	Mir Glo	l Containm ni-Enclosure ovebag Pro	e cedure					
	T			P * * * * * * * * * * * * * * * * * * *			No	n-Exempted	d (*) and	d Non-Fria	ble Pro	1000 m		
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Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mai	d Sole ntenar odial S (12)	nce/		tos Cont thermal surfac		laterial s insula T, or		(S	mount pecify or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A								_		ite	Ф
Basement			Х	Ther	mal Sy	stems	Insul	ation	7	5 SF	х			
											-			
		- 10000												
Name of Registered Waste Hauler			JDEP W		Cubic			Name of	Registe	red Landfil	r'			
Pyramid Contracting Corp.	_	1000	auler ID 2613	NO.	of Was	ste		G.R.O.\		nc.				
City, State Clifton, New Jersey					Dispos 10/20	al Date /12	n	City, State Morrisv		ennsylva	nia			
Completed by Dimo Golcev	Title	ral M	anger		S	ignature		1/	, D		ate 0/10/1	2		
ASB-41 (R-06-08)	*					000 no	t use th	nis form for	asbesto	/			activit	ties.

State of New Jersey

7		N			OF ASBE to NJAC 8						RE	C	EII	1 100	n
Date of Notification (1) 10/10/12 Ck:2298	\$200		100	Name of John	Building (Owner/C	perator	(2)			2012 OC	r		-	IJ
	Type Notification			Street A	ddress orth Lehi	iah Av	enue				4	15	A	411:	02
EPA DEP DOL	Initial Amended Amendment	#	Ė	City, Sta	te, Zip Co rd, New	de		6		2.1	ASBEST & LI	ÛS CE	CO	VTR	OL
⊠ DOH	Emergency justification)	(including			Contact					Tel	ephone Num	ber	13/	IG_	
☐ DCA	Cancellation	l 													
Name of Facility Where At Residence	patement is Takir	g Place (3)	,	FACI	LITY INFO	DRMAII	ON	parent .	of Facility (***	
Street Address 141 North Lehigh Av	enue								Subchapter	3 (Oth	er than K-12 & commercia		lings,	home	es,
City (5) Cranford, New Jerse	y 07016	"		****					re Feet	# 0	f Floors		ldg. A 5+	ge	
County (6) Middlesex	######################################				Code (7) USE ONLY)			Curre	Commenter of the second	or if bei	ing demolish	ed)			
Name of Monitoring Firm I	Hired by Building	Owner (8)		ASCN	1 No.				tement Cor oration	ntractor	(9)				
Street Address			2-90-0957	1				Addres McBri	ss de Avenu	ie		."			Ta edirect
City, State, Zip Code									ip Code Park, Ne	w Jei	rsey 0742	4 "			-
Project Manager for Monit	oring Firm			Telepho	ne No.			one No 225-8			License No).			
Start Date (10) 10/24/12	•	Schedule 10/25/1		pletion	Date (11)				HA Monitor onmental	Labs	1				******
Occupancy Status During	Abatement (Che	ck Only On	e)					Addres						-	
Facility Closed/Vacat		(0.0		ent			FI 7(0)2500.51		e 22 We	st					
Abatement Performe Other – Describe: 84	d Outside of Norr	nal Facility	Hours				U - 200 - 10		ip Code w Jersey	0708	3				
Scope of Work (Check All	That Apply)						1								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enova emolit				×	Mir Glo	ni-Enclosure ovebag Pro	e cedure	n Negative P			e	
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Location	of	N	lormal	ly		De	scription	of					Ту	ре	
Asbestos-Containing M <u>TO BE ABA'</u> In Facility (13)	Material (ACM) TED	Mai Cust	d Sole ntenar odial S (12)	nce/ Staff?		tos Con thermal surfa	taining M I systems cing, VA miscellar	faterial s insula T, or		(Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A									_		_
Baseme	nt		X			Pipe	Insula	tion			30 LF	Х			
			¥												
Name of Registered Wast	e Hauler		N	JDEP W	l /aste	Cubic	Yards	- Tar	Name of	Regist	ered Landfill				
Lilich Corporation			Н	auler ID 3724		of Wa	ste		G.R.O.	W.S L					
City, State Woodland Park, New	Jersey 07424		1,00,000		**	Dispo 10/29	sal Date 9/12		City, Stat Morrisv		ennsylvar	nia			

Signature.

Date

10/10/12

Completed by

Tatiana Kalenikova

Tifle

Vice President

(CHECK #)

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

		(Pursu	Jan (to	NJAC	5:60 an	9 13:130)	l Maria yang menangan sebagai	HE,	20		
Date of Nouhcation (1)	11/12		1				Operator (\sim	ME	1	E	7)
Agencies Notified	Type Novication		-	treetA					- 1077	5		$\stackrel{\checkmark}{\vdash}$
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□ DOH	justification)	W11-W	7		Contact				elephone Númbre	SINO	TOL	•
1 0 0 v	Cancellation			B	NUCE	Br	EUNI	0				J.
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: ame of Facility Where A	batement is Yaking	Place (3)					Type of Facility (4)			İ
0551	DENCE							School (K-12)	Other than K-12)	8		
Sireer Address	~~	4	1, 1					Q Other (I.e., priv	ale & commercia	pulang	٤.	
	TO THE STY	. ,						Square Feel	V of Floors	T Bidg		
C = 163								1000	. 2	1 40	7	
570	NE HORS	Ton				14.0	_	Current Use (Prior	M being demots	ned)		
County (6)				County	Code (7) (STAI	٤	SVAC	ANT			٠, .
Coding to	EMAY		_	USE O	-							
are of Marilonny Firm	Hired by Building O	AUG!	TA	SCH No)	Hame	L.Com	eni Convedor (9)				0
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Sueer Address				\$		30001	69 9	. SPRUC	E AVE.			
	1	===			=		sie. Zip C	od e		1105	_	
City State. Zp Code	•						MAP	LE SHAD	E N.J.	7007	==	<u> </u>
· · · · · · · · · · · · · · · · · · ·	logica Firm		Tolop	hone No).	Yeleph	ans No.	00 0477	004	14		
Pigeri Manager lor Mon		11						19-0472	1 - 1/2			
Sian Daie (10)	Schedu	100 CO	mpleli	on Date	(11)	Name	O OSHA H	OKALEM	M	•		
10/24/12		191	1	2				- (-)				
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TO C - 1 - Classed A/acal	ed During Entre Per	100 01 /	CO (a)	nent								,
Aparement Performer	Outside of Normal	Facility	Houn	5		City. S	tale, Ap C	E SHADE	E. N. J.	0805	12	V. 10-20-216-2
Ower - Describe: _												
Scope of Work (Check a	(lylde ren ill					(Full Co	ntainment with Nec	patre Pressure			
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2160 51 01 2260 11		₩ D00	nalitor	1			NOTE	xembled (,) and Ho	n-Frable Proces	We A	34:00	neri.
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		NK	AL PAINT			De	scription	ol	Amount			E
Location	01	Used	Soleh	cal	Asbe	- Inc Cor	M orinian	atenal (ACM)	(Specify	E	20	Era apsidah
Achesias Containing	Malenal (ACM)	C	as loodia	i	(i. ¢	thective	si systems sang, VA	MISORIIO.	SF & LF)	Removal	Ragam	8.
TO BE ABA	V V		Staff?			08001	miscellan	eous)		5	- 1	1.1
(13)	•		(12)				ģ.	31 5 0				1
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7171		_							-	_		- 61
		-							-	=-	1	T
		-	-	1				Y Maria Da	pistered Landfill	=		<u> </u>
	15.54	ــــــــــــــــــــــــــــــــــــــ	1	DOEP	Maste .		ic Yards	Name of Ne	, C , M .	Uis		٠.
name of Registered W	asie Maulei			179	2 100.	017	10010		,0,			
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MOPLEDIN	ADE'N	210	<u> </u>	===			Signalu	1100	100	0/11	1	12
Compeled By	. '''	* ~ 1	ע ע	ER	•		_	osip 1 St				==
THIST OH K	EMM_ -										55	52

· Do not use this form for asbestos licensure exempled activities.

There is a credit Print Form

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT For 2787
(Pursuant to NJAC 8:60 and 12:120)
USENTER This Notification

10/11/12			,	Name of Barba	of Building ara Dono	Owner/ caster /	Operator / Reside	(2) ence	2012-	The	ants	¢,				
Agencies Notified EPA	Type Notification	i		Street A	Address ast 5th	Street		Ą	2012 OC.	15	AMI	<u>. ()</u>				
DEP DOL	Amended Amendmen		[City, St Long	ate, Zip C Beach	ode Fownsh	nip NJ (0800	B& 1/0	OS CO	in.	Û			0.000	
☑ DOH DCA	instification Cancellatio)		Name o	of Contact Ira				-16	ARA	lenhand	Wumh	·er			
		2000		FAC	ILITY INF	ORMAT	ION		A							
Name of Facility Where Barbara Doncaster	Abatèment is Taki / Residence	ng Place (3)		-			Туре	of Facility School (K-	CONTRACT CON						
Street Address 129 East 5th Street			et.		8.4			×	Subchapte Other (i.e. etc.)	er 8 (Oth	er than & comm	K-12) ercial	buile	dings	, hom	es,
City (5) Long Beach Towns	hip NJ 08008							Squa 100	are Feet	# 0	f Floors			ldg. <i>A</i> 5+	Age	
County (6) Ocean			-		Code (7) USE ONLY	0			ent Use (Pr sidence	ior if be	ing dem	olished	d)			
Name of Monitoring Firm N/A	Hired by Building	Owner (8))	ASC	M No.		Name Pern		atement Co	ntractor	(9)					
Street Address							Street PO B							The same of		
City, State, Zip Code					,	HOTHER SO			ip Code in NJ 080	091				<u> </u>		
Project Manager for Mon	itoring Firm		T	Telepho	ne No.		Teleph 856-7	one N	lo.		Licens		NOC 12			
Start Date (10) 10/24/12		Schedul 11/2/1:		npletion	Date (11)			of OS	HA Monitor		0072			7.		
Occupancy Status During	Abstement (Che									233.2						-
Facility Closed/Vaca Abatement Perform Other – Describe:	ited During Entire	Period of	Abaten	nent			City, St		ip Code						0	
Scope of Work (Check A	I That Apply)															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	т так друу)	COLUMN TO SERVICE STATE OF THE PERSON NAMED IN COLUMN TO SERVICE STATE OF THE PERSON NAMED STATE OF THE PERSON NAMED STATE OF THE PERSON NAMED STATE OF THE PERSON NAM	Renova Demolit		4. (×	Mir	ll Containm ni-Enclosur ovebag Pro n-Exempte	e cedure					9	
		Is	Locati	qin.						- (/			1200	Abate	ment	
Location			Normal d Sole		i e	De	scription	of				-		Ту	ре	
Asbestos-Containing TO BE ABA In Facili (13)	TED `	Ma Cus	intenar todial S (12)	rice/ Staff?	Asbes (i.e.	thermal surfa	taining Masserms systems cing, VAT miscelland	ínsula r, or	(ACM) ation,	(S	mount specify or LF)		Removal	Repair	Encapsulate	Enclosure
Exterior C	idina	Yes	No	N/A		= .									rD	
Exterior S	laing		X		Exte	rior Sid	ing		18	00 SF	×		-			
Name of Registered Was	te Hauler		IN	JDEP W	/aste	Cubic	Yards		Name of	Pegista	red Lan	4611				_
United Containers			Н	auler ID 2459		of Was	E2002000000000000000000000000000000000		G.R.O.		. ou Laik	and				
City, State Elm NJ						Dispos 11/2/1	sal Date		City, Stat Morrisv		19067	 7			U	
Completed by Anthony T Perna		Title Presi	dent			S	ignature					Date	1/1	2		

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to N.J.A.C. 8:60 and 12:120)

										CE 110	war	Mr.			
Date of Notification	Company of the second s						Owner / Operator	r (2)		2012 OCT		FE			
Agencies Notified	10/1/2012 Type Notific	ation			Addre	orati	on			106/	5	4.		_	-
EPA	Type Nounc	alion	107			Plaza				SALL	A	19//	6.6		
☐ DEP		ı	1.3			Zip C			are the second	20105	O.	- 10	4.6		
☑ DOL		nded R#1-10/1					J 07095			& LICF	VOU!	VIR	Ω,		
☑ DOH □ DCA	☐ Eme	rgency				ntact					THE	epho	ne N	umb	er
☐ DCA		cellation	J	ohn	Phill	oin				SBESTOS & LICE	Longon	_			
				EAG	NI IT	VINE	ORMATION								-
Name of Facility Wh	aero Ahatam	ent is Taking D	lace (2)		JILI I	1 1141	Type of Facilit	ty (A)							9 - J.Y.
Hess Corporation		ent is raking r	iace (S	,			School (K								
Street Address							Subchapt	100	Other tha	n K-12)					
Smith Street & C	onverv Ro	ulevard					Other (i.e				dinas.	home	es. e	tc.)	
ommun otrect a o	onvery bo	aicvara					Square Feet		# of Floo		_	. Age		,	-
City (5)	***	County (6)	Cor	inty (Code (7)					15.08				
Perth Amboy		Middlesex			,000	. ,	Current Use (Prior i	if being de	emolished)					
Fertil Alliboy		Middlesex					Boiler Roon		. comig a	011101101100)					
Name of Monitoring	Firm Hired I	v Building Own	ner (8)	-	IASC	CM No			t Contrac	tor (9)					
AET, Inc.	i iiiii i iii ca i	by Dullaling Own	101 (0)		1,00) IVI 140	Bristol Envi								
Street Address							Street Addres		,					Albarrer)	
28 N. Pennell Ro	ad						1123 Beave	r Stre	eet						
City, State & Zip Co	de						City, State & 2	Zip Co	ode						
Media, PA 19063	}						Bristol, PA	19007	7						
Project Manager for	Monitoring	Firm	Telepl			oer	Telephone Nu			License		ber			
Dave Turotsy			800-9				(215)788-60			00509					
Scheduled Start Da		Scheduled Cor)	Name of OSH								
10/16/20			11/16/2				Bristol Envi		nental In	ic.					
Occupancy Status I							Street Addres	2/45-40V							
		During Entire P			ateme	nt	1123 Beave								
Describe:	Репогтеа С	outside of Norm	ai Hou	rs			City, State & Z								
	unied During	Abatement: 8:	30 AM	_ 3.3	n DM	É	Bristol, PA	1900	1						
Scope of Work (Che			30 AIN	- 0.0	70 1 101										
ocope of Work (on	JON OII LIIGE G	PP'37						П	Full Con	tainment with	n Neg	ative	Pres	sure	•
≥3 sf or ≥3 l	f		\boxtimes	Ren	ovatio	n		\boxtimes	Mini-End	closure					
≥160 sf ≥26	0 If			Den	nolitio	n		\boxtimes	Glove Ba	ag Procedure	25				
									Non-Exe	empted and N					
	ocation of			.ocati			Description		100	Amount		Aba	teme	ent T	ype
	tos-Containir	ng	Norm				Asbestos-Cont		3	(Specify SF or LF				m	
	erial (ACM) BE ABATED		Maint	olely b enan			Material (AC (i.e., thermal sy			SF 01 LF	'	R	æ	Encapsulate	Ē
	n Facility		Custo				insulation, surfac					Remova	Repair	sde	Enclosure
2008	(13)			(12)			or other miscella					<u> </u>	₹	ulat	ure
			Yes	No	N/A									Ф	
Boiler Room	W-810						Pipe insula	tion		141 LF		\boxtimes			
Boiler Room							Elbows			2 EA		\boxtimes			
Boiler Room		100010					Transite cei	iling		2,245 SI	F			\boxtimes	
						distant.		1.02%							
Name of Registered	Waste Hau	ler		100000		Vaste		Nam	e of Regi	stered Landfi	All				
	2.2			Ha	uler II		of Waste	000	NA/O I AI	NDELL					
Service Transpo	rt inc.			1_	2099	90	8		OWS LAI	NUTILL					
City, State							Disposal Date 11/16/12		State	I E DA					
New Castle, Dela				1				IAIOL	RRISVIL	LE, FA	Te	\a4-			
Completed By (Prin				Titl			Signature			1 0	1 -	oate 1 0/1 /	140		10
Gino Pizzigon	1				oject inage		Gino Ky	zego	oue,	1 K	1	UIT	12		
				1410	maye	-1	//	11 1	/	1					

Date of Notification (1)	Na	me of Build	ling Owner / Oper	ator (2)	120CT 15 18 10S CO	5 - 4, 17 - 5
Agencies Notified Type Notification	He	ss Corpo	ration		15	Am
Agencies Notified Type Notification		eet Addres		9.5	E LICENSIA	11/1: (in
☐ DEP ☐ Initial		e Hess P			8110S r	74
DOL 6350 Amended		/, State & Z			LICENSI	MIROL
☑ DOH 6381 ☐ Emergency	Nar	ne of Cont	, NJ 07095		.0//	AC OF
DCA Cancellation		hn Philbir				Telephone Number
			INFORMATION			1
Name of Facility Where Abatement is Takin	g Place (3)	ACILITY	Type of Fa			
Hess Corporation	3 - 1110 (0)		School	ol (K-12)		
Street Address				apter 8 (Other	than K 12\	
Smith Street & Convery Boulevard			⊠ Other	(i e private & c	nmmercial build	lings, homes, etc.)
			Square Fe	et # of F	loore	
City (5) County (6)	County	y Code (7)		7 011	10015	Bldg. Age
Perth Amboy Middlese			Current Us	e (Prior if being	demolished)	L
			Boiler Ro	om	(definionsfied)	
Name of Monitoring Firm Hired by Building (Owner (8)	ASCM		batement Contr	ractor (9)	
AET, Inc.			Bristol Er	vironmental	. Inc.	
Street Address 28 N. Pennell Road			Street Addr	ess	,	
City, State & Zip Code			1123 Beav			
Media, PA 19063			City, State	& Zip Code		
Project Manager for Monitoring Firm	Tolonhan	a Nimakaa	Bristol, P	A 19007		
Dave Turotsy	800-969	e Number	Telephone			Number
	Completion Da		(215)788-6		00509	
10/11/2012	11/16/201			SHA Monitor vironmental	lma	
Occupancy Status During Abatement (Check	only one)		Street Addre		inc.	
☐ Facility Closed/Vacated During Entire	Period of Al	patement	1123 Beav			
Abatement Performed Outside of Nor	rmal Hours -		City, State 8			
Describe:			Bristol, PA	19007		
Facility Occupied During Abatement: Scope of Work (Check all that apply)	8:30 AM - 3:	:30 PM				
scope of Work (Check all that apply)						
≥3 sf or ≥3 lf	⊠ Re	novation		Full Co	ntainment with f	Negative Pressure
≥160 sf ≥260 lf		molition			nclosure	
	 -	Marine Marine Control		네 <u>요요요</u>	Bag Procedures	
Location of	Is Locat	tion	Descriptio	on of		n-Friable Procedure
Asbestos-Containing	Normally		Asbestos-Cor	ntaining	Amount (Specify	Abatement Typ
Material (ACM) TO BE ABATED	Solely		Material (A	(CM)	SF or LF)	
in Facility	Maintenar Custodial		(i.e., thermal s	systems		R R R
(13)	(12)	Olail!	insulation, surfa or other miscel	cing, VAT		Encapsulate Repair Removal
	Yes No	N/A	or other misser	ianeous)		al Tate
oiler Room			Pipe insula	ation	141 LF	
oiler Room			Elbows		2 EA	
oiler Room			Transite ce		2,245 SF	
					2,240 01	
						
						
ame of Registered Waste Hauler		DEP Waste		Name of Reg	stered Landfill	
ervice Transport Inc.	Ha	uler ID No.				
ty, State		20990	8	GROWS LA	NDFILL	
ew Castle, Delaware			Disposal Date	City, State		
ompleted By (Print or Type)	Tra		11/16/12	MORRISVIL	LE, PA	
ino Pizzigoni	Title	e oject	Signature	o ·	. 1-0	Date
		nager	Sino 1	egzegon	- /-IX	10/1/12
	10101		1.	11/1 /	1 1	I)

fg. -

Date of Notification (1)					Name	of Buildin	g Ow	ner/Operator (2)	The I to	ET	}		
9 /	13 /	12			Tri	stees of	Prir	ceton Unive	ersity 2012	OCT 15 AM	1 had			
Agencies Notified	Type Notifica	ation			Stree	t Address	000111	*********		OCT 15 AP	In: s		_	
☐ EPA	Initial				E./	A. MacMil	lian	Building	ASD	ESTOS CUA LICENSIN	.0.	5		
☑ DOLWD		549%				State, Zip C			.08	59108 CTIA	TOO			-
⊠ DHSS	Amendm		0.7			nceton, N			٥	LICENSIN	CKE	L.		
DCA (NJAC 5:23-8)	☐ Emergen justification		cluding	1		of Contac	TOOK WY			Telephone Nun	U har			
(1407/0/3.20-0)	☐ Cancellat				100000000000000000000000000000000000000	bert Orte				reiephoni	_			
			-				<u> </u>	RMATION			-7			
Name of Facility Where A	batement is T	akino	Place	(3)		0.2			Type of Facility	(4)		-		
Princeton Universit		-			-Ruild	ina 25			School (K-12					
Street Address	,	.,			- Dune		-		☐ Subchapter 8	Other than K-1:				
Faculty Rd									Other (i.e., po homes, etc.)	rivate and comme	ercial b	uilding	js,	
City (5)									Square Feet	# of Floors	В	ldg. A	ge	
Princeton									11,000	1		60+	**************************************	
County (6)					Cou	nty Code (7)(STA	ATE USE ONLY)	Current Use (Pri	ior if being demol	ished)			
MERCER									MRI Suite a	nd storage				
Name of Monitoring Firm	Hired by Build	ding C	wner	(8)	ASCN	No.	Na	me of Abateme	ent Contractor (9)					
ATC Associates, Inc	3.				000	98	E	BRISTOL EN	VIRONMENTA	L, INC.				
Street Address							Str	eet Address						
3 Terri Lane							1	123 BEAVE	R STREET					
City, State, Zip Code							Cit	y, State, Zip Co	ode	-		8075		
Burlington, NJ 0801	6						E	BRISTOL, PA	19007					
Project Manager for Monit	toring Firm			Tel	ephone	No.	Tel	ephone No.		License No.				
Michael R Keehn				6	09-38	6-8800	2	15-788-6040	ĺ	00509				
Start Date (10)	8	Sched	uled C	ompl	etion D	ate (11)	Na	me of OSHA N	lonitor					
9 / 27 /	12	_1	0 /	_1	5_/	12	E	BRISTOL EN	VIRONMENTA	L, INC.				
Occupancy Status During	Abatement (Check	only	one)			Str	eet Address				-		
☐ Facility Closed/Vacate	d During Entir	re Per	iod of	Abate	ement		1	123 BEAVE	R STREET					
☐ Abatement Performed							Cit	y, State, Zip Co	ode			-		
Time of Abatement: 7:		M/	P	M	AN		E	BRISTOL, PA	19007					
Scope of Work (Check all	that apply)							□ Eull Cont	lainmant with Na	ostina Danasana				
≥3 sf or ≥3 lf			⊠ Re	nova	tion			☐ Mini-Enc	tainment with Neg losure	jative Pressure				
≥160 sf or ≥260 lf			☐ De	molit	ion				g Procedure					
						T		Non-Exe	mpted (*) and No	n-Friable Procedu				
Location	-f			Loca				Description of			At	atem	ent T	ype
Asbestos-Containing N)	Use	d So	lely by	Asbe	stos	Containing Ma	12.	Amount	Re	Repair	Ē	Ē
TO BE ABA			17/202000		ance/ Staff?		., the	ermal systems	insulation,	(Specify	Remova	air.	ä	Enclosure
IN Facility (13)	y		Ous	(12				surfacing, VAT, her miscellane		SF or LF)	<u>m</u>		Encapsulate	ure
(10)			Yes	No		1	Ů.	ner miscenarie	ous)				ē	
1 st Floor -Workarea		-		\boxtimes		PIPE IN	SUL	ATION - WR	RAP & CUT	420 LF	×			
						1								
		-										-	_	-
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N						<u> </u>	10.				\Box			
Name of Registered Waste BRISTOL ENVIRONI		IC.			NJDEP Hauler I	76955757	Wa	oic Yards of ste	Name of Regis	tered Landfill . NORTH LANE)EII I			
City, State					1870	6	Die	noon! Data			, ILL			
							DIS	posal Date	City, State	I E DA 4000=				
BRISTOL, PA 19007									MORKISVI	LLE, PA 19067				
Completed By (Print or Ty	pe)	Title						Signature	1 1	D	ate /	./	, 1	
Brian Scafiro	24	E	stima	tor				Drian	Scafere)	10/	"//	1	-

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Date of Notification (1)				-	LNIon	o of Duild	ine O		(0)		The Eng	14	Er	1
9/	13 /		!				250	wner/Operator inceton Unive		2012 OCT	15	AM.	io -	1,000
Agencies Notified EPA	Type Notific Initial	ation			0.0000000000000000000000000000000000000	et Address				ASBEST & LIC		-111	U: 5	9
⊠ DOLWD		d						n Building		855	os_c	Our	rr -	
☑ DHSS	Amendm		4-10/1	1/12		, State, Zip				of LI	ENS	INIC	NO.	L,
☐ DCA	☐ Emerger	ncy (in			Р	rinceton,		08544				1:10		
(NJAC 5:23-8)	justificati	0.000				ne of Cont				Telephone Nu	mber			
	☐ Cancella	tion			R	obert Or	tega							
					F	ACILITY	INFO	DRMATION				ALI CONTRACTOR		
Name of Facility Where A			CT. 11000-00						Type of Facility	(4)		in — 127.5		
Princeton Universit	y-Elementa	ry P	article	La	b-Buil	ding 25			School (K-12					
Street Address			-94 Wo-cer live						☐ Subchapter 8 ☐ Other (i.e., p	3 (Other than K-1	(2)	uildin		
Faculty Rd									homes, etc.)		erciai D	undin	ys,	
City (5)	27/2			10.10	2				Square Feet	# of Floors	В	ldg. A	ge	
Princeton									11,000	1		60+		
County (6)	e				Co	unty Code	(7)(ST	TATE USE ONLY)	Current Use (Pr	or if being demo	lished)	-		
MERCER									MRI Suite a	nd storage	·			
Name of Monitoring Firm	Hired by Buil	ding (Owner	(8)	ASCI	/I No.	N	ame of Abatem	ent Contractor (9)	·				
ATC Associates, Inc	c.				000	98		BRISTOL EN	VIRONMENTA	L, INC.				
Street Address							S	treet Address						
3 Terri Lane								1123 BEAVE	R STREET					
City, State, Zip Code							С	ity, State, Zip C	ode					
Burlington, NJ 0801	6							BRISTOL, PA	19007					
Project Manager for Monit	toring Firm			Te	lephon	e No.	Te	elephone No.		License No.				
Michael R Keehn				(609-38	6-8800		215-788-6040	i	00509				
Start Date (10)		Sched	uled C	omp	letion D	ate (11)	Na	ame of OSHA N	lonitor			171 191.		_
9/27/	12	1	0 /	_1	5_/	12		BRISTOL EN	VIRONMENTAL	_, INC.				
Occupancy Status During	Abatement (Check	only	one)			_	reet Address						
☐ Facility Closed/Vacate			-	200	ement		1	1123 BEAVE	R STREET					
☐ Abatement Performed	Outside of No	ormal	Facility	у Но	urs - De	scribe	1.55	ity, State, Zip Co						
Time of Abatement: 7:	00AM- <u>3:30</u> F	PM/	P	M	A	Л	- 1	BRISTOL, PA						
Scope of Work (Check all	that apply)							-						-
≥3 sf or ≥3 lf			⊠ Re	novo	tion				ainment with Neg	ative Pressure				
≥160 sf or ≥260 lf			De					☐ Mini-Enc						
									mpted (*) and Nor	n-Friable Proced	ure			
			10.000		ation						Ab	atem	ent T	уре
Location of Asbestos-Containing N		IN.		Norm	ally lely by			Description o			Z	70	ш	ш
TO BE ABA		')	Ma	inten	ance/	/i		Containing Ma ermal systems		Amount (Specify	Removal	Repair	nca	nc l
IN Facility			Cus	todia (12	Staff?			surfacing, VAT,	or	SF or LF)	val	=	Encapsulate	Enclosure
(13)			Yes	No	1	-	0	ther miscellane	ous)				ate	0
1 st Floor -Workarea Ni	F #1					Floor	tile			1400 SF				
1 st Floor- Workarea Ni				Pipe II	nsula	ation		20 LF						
1 St Floor- Workarea N	F #2	7.51.00		Ø		Floor	tile			25 SF				
1 st Floor- Workarea NI	F #1			Ø		Windo	w ql	azing		25 LF		П	П	П
Name of Registered Waste	e Hauler			T	NJDEP	Waste		ibic Yards of	Name of Regist					ᆜ
BRISTOL ENVIRONM	MENTAL, IN	IC.			Hauler 1870		Wa	aste		NORTH LAND	DFILL			
City, State							Dis	sposal Date	City, State					
BRISTOL, PA 19007									MORRISVIL	LE, PA 19067				
Completed By (Print or Type	Title	,					Signature	L		ate	,		\dashv	
Brian Scafiro		Es	stimat	or					Scolin	0	10/1	1/	12	

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	PE In	PECE Cris	PECE/V

9 /	13/		12					Owner/Operator Princeton Univ		45	& LIC		ð.	AM	0:5
Agencies Notified	Type Not	ificatio	n	_		eet Addres					& Lin	15	Co	4/ 5-	
☐ EPA	Initial						-	an Building			-, C	CA	15/1	10	ROI
☑ DOLWD ☑ DHSS	⊠ Amen		" 0 40		0:4	y, State, Zij					4	_		'Q	-
□ DCA	Amend Emerg					rinceton									
(NJAC 5:23-8)	justific			ng		me of Cont	_			Tolonhau					
April 10 Control of the Control of t	☐ Cance				F	obert Or	tea	a		Telephor	ie Numb	er			
							_	ORMATION		******	-				
Name of Facility Where	Abatement i	s Taki	no Plac	ce /3	·	ACILITY	IML	ORMATION	I =						
Princeton Univers	sitv-Elemen	tary	Partic	le I :	h-Rui	dina 25			Type of Facility	11 (10 (10 f)					5.50
Street Address	7					ullig 25	-		School (K-1	2)	n K 12\				
Faculty Rd									Other (i.e.,	private and o	commerc	ial	buildi	nas.	
City (5)				_					homes, etc	.)				3-1	
Princeton									Square Feet	# of Floo	ors	I	3ldg.	Age	
County (6)					10-		(m) (c)		11,000	1			60-	-	
MERCER					100	unty Code	(/)(8	STATE USE ONLY)	Company of the second s			ed)			
Name of Monitoring Fire	n Hirad by D	ildina	O	. (0)	1000		_		MRI Suite a		е				
ATC Associates, I		inding	Owner	(8)	C. C	M No.	1		ent Contractor (9						
Street Address	110.				00	098			VIRONMENTA	L, INC.					
3 Terri Lane							18	Street Address							
City, State, Zip Code								1123 BEAVE							
Burlington, NJ 080	146						0	City, State, Zip Co							
Project Manager for Mor								BRISTOL, PA	19007						
Michael R Keehn	illoring Firm			- 1	lephon		T	elephone No.		License	No.	10.			_
Start Date (10)		0.1				6-8800		215-788-6040		00509	9				
9 /27 /	12					ate (11)	N	lame of OSHA M							
						12	1	BRISTOL EN	VIRONMENTA	L, INC.					
Occupancy Status Durin							S	treet Address				-		-	
☐ Facility Closed/Vacate ☐ Abatement Performed	ed During En	tire Pe	riod of	Abat	ement	c 288		1123 BEAVER	RSTREET						
Time of Abatement: 7	1:00AM-3:30	vorma IPM/	i Facilit	y Ho M₋	urs - De	scribe	C	ity, State, Zip Co	ode						
				···-	^\			BRISTOL, PA	19007						
Scope of Work (Check al	il that apply)							_				-			
≥3 sf or ≥3 lf			⊠ Re	nova	tion			☐ Full Conta	ainment with Neg	ative Pressu	ıre				
≥160 sf or ≥260 lf			☐ De	molit	ion			☐ Glovebag	Procedure						
								Non-Exer	npted (*) and Nor	n-Friable Pro	cedure				(20)
Location	of		3928	Loca				100400 P1000 P0 P0	T			Ab	atem	ent T	vpe
Asbestos-Containing		VI)	Use	d So	lely by	Ashe	etne	Description of Containing Mat	orial (A CAA)	2	.	Oliver .	_	_	-
TO BE ABA			Ma	inten	ance/ Staff?	(i.e	., th	ermal systems in	nsulation.	Amoun (Specifi	it	Removal	Repair	nca	ncl
IN Facilit (13)	ty		Cus	(12				surfacing, VAT,	or	SF or LF	f)	Val	=	Encapsulate	Enclosure
	THE PERSON		Yes	No			0	ther miscellaneo	us)					late	e
1 st Floor -Workarea N				×		Floor ti	le			1400 S	F	X			П
1 st Floor- Workarea N						Pipe Ins	sula	ition		20 LF					
1 St Floor- Workarea N				\boxtimes		Floor til	е			25 SF	0	X		$\overline{\Box}$	
1 st Floor- Workarea N				\boxtimes		Window	gla	azing		25 LF		3	П	7	
Name of Registered Wast				I	JDEP I	Vaste		bic Yards of	Name of Registe	3.5		K	Ц		Ц
BRISTOL ENVIRON	MENTAL, IN	VC.		F	lauler II			ste	G.R.O.W.S.						
City, State					18706		Die	posal Date			MUPIL	_			
BRISTOL, PA 19007	BRISTOL, PA 19007							posai Dale	City, State	I F. BA 151					
	pleted By (Print or Type)							To:	MORRISVIL	LE, PA 190	J67				
Brian Scafiro			timat	or				Signature	0 1-		Date	/	/ -		
P 41				-				Brian &	esfero		10/	51	12		

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

RECEIVED

RECEIVED

Date of Notification (1)			7	Name of B	uilding Owner/Operate	or (2) A (2)	15 AND	348	<u> </u>		
	/12	_		Trustee	s of Princeton Un	iversity EST	in	59			
	Notification		-	Street Add	ress	£ 1/C	CONTO				
☐ EPA ☐ Ini				E.A. Ma	cMillian Building		-MSING M	UL.		No Paris Co	
	nended nendment # <u>2</u>	9/26/	-	City, State,							
□ DCA □ En	ergency (inc	luding	14		on, NJ 08544						
(NJAC 5:23-8) jus	tification)	g	1	Name of Co			16.		255-721-221		50
☐ Ca	ncellation			Robert (Ortega		relephone N	lumbe	r	-	
					Y INFORMATION						
Name of Facility Where Abateme	ent is Taking	Place	(3)			Type of Facility	4				
Princeton University-Elen	nentary Par	ticle	Lab-B	uilding 2	5	School (K-12					
Street Address						☐ Subchapter 8	(Other than K	-12)			
Faculty Rd						Use Other (i.e., pr	ivate and com	mercia	al build	lings,	
City (5)						homes, etc.) Square Feet				D: 1	
Princeton						11,000			-		
County (6)			10	County Coo	de (7)(STATE USE ONLY)				60	+	
MERCER			- 1			1	or it being dem	olishe	d)	New York	
Name of Monitoring Firm Hired by	Building Ow	ner (8)	AS	CM No.	Name of Abatem	nent Contractor (9)	u storage				
ATC Associates, Inc.			0	0098	BRISTOL EN	VIRONMENTAL	INC				
Street Address					Street Address	TOTAL	, INC.				
3 Terri Lane					1123 BEAVE	R STREET					
City, State, Zip Code					City, State, Zip C						
Burlington, NJ 08016					BRISTOL, PA						
Project Manager for Monitoring Fire	m	7	elepho	ne No.	Telephone No.		I inner N				
Michael R Keehn	a la			86-8800	215-788-6040)					
Start Date (10)	Schedule	d Com	pletion	Date (11)	Name of OSHA N		00509				
9 / 27 / 12	10	_ / _	8	/ _12		VIRONMENTAL,	INC				
Occupancy Status During Abateme	nt (Check on	ly one)		Street Address	THOMINE TAL,	INC.				
☐ Facility Closed/Vacated During	Entire Period	of Aba	itemeni	1	1123 BEAVE	PETDECT					2000
Abatement Performed Outside of Time of Abatement: 7:00AM-3:	f Normal Fac	cility H	ours - D	escribe	City, State, Zip Co						
		_PM	^	M	BRISTOL, PA						
Scope of Work (Check all that apply	')					13007					
☐ >3 sf or >3 lf	N	Renov	ation		☐ Full Cont	ainment with Negati	ve Pressure				
≥160 sf or ≥260 lf		Demol	100000000000		☐ Mini-Encl ☐ Glovebag	osure					
					☑ Non-Exer	npted (*) and Non-F	riable Dragad	12/2015			
Location of		Is Loc					Habie Frocedu	_			
Asbestos-Containing Material (A	CM) U	sed So	olely by	١	Description of			_	_	ent T	-
TO BE ABATED		Nainter	nance/	ASD	estos Containing Mate e., thermal systems in	erial (ACM)	Amount	Res	Reg	E	E
IN Facility (13)	"	1510012 (12	I Staff?	,	surfacing, VAT,	or	(Specify	# of Floors 1 60+ if being demolished) storage NC. Pressure Amount (Specify SF or LF) 25 SF	Sde	Enclosure	
()	Yes			1	other miscellaneo	us)	OI OI EF)	1 5		ulat	ure
st Floor -Workarea NF #1		×		+						0	
st Floor- Workarea NF #1		-		Floor			1400 SF				
St Floor- Workarea NF #2				_	sulation		20 LF		×		
* Floor- Workarea NF #1				Floor ti			25 SF	Ø			$\overline{\Box}$
				Windov	v glazing		25 LF	-	7	-	_
ame of Registered Waste Hauler		1	NJDEP	Waste	Cubic Yards of	Name of Registered			ш	\Box	믜
BRISTOL ENVIRONMENTAL,	INC.	'	1870		Waste			11.1			- 1
ty, State					Disposal Date	City, State		-			
BRISTOL, PA 19007				i		MORRISVILLE,	DA 40000				
impleted By (Print or Type)	Title				Signature		<u> </u>				
Brian Scafiro	Estima	tor			A.	la 1.	Date	/	/		\neg

RECEIVED

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

2012 OCT 15 AM 10: 59

Date of Notification (1)					1	NJAC 8:60 a	iiu o.	10)		Le C	-			
9 /	13/	12			Name of Bu	uilding Owner/Op	perator	(2)		A58	EST	05	Ca	
Agencies Notified	Type Notif		_		110Steet	s of Princetor	Univ	ersity		Q	LI	EN	SIA	4/
☐ EPA	☑ Initial	reation.			Street Addre								Oliv	U
⊠ DOLWD		ed			E.A. Mac	Millian Build	ina							
☑ DHSS	Amenda	ment #1	-9/18	/12	City, State, 2	Zip Code	-							
DCA (NJAC 5:23-8)	☐ Emerge	ncv (in	cluding		Princeto	n, NJ 08544							0	
	justifica	uon)		- 1	Name of Cor	ntact								
	'				Robert O				1	Telephon	e Nun	nber		
Name of Facility Where	Abatement is	Taking	Place	(3)	FACILITY	INFORMATIO	ON							_
Princeton Universit	ty-Elements	ary Pa	rticle	Lah-F	Building or			Type of Fac	ility (4	1)				
21.001.1001633					Junuing 25			School (K-12)					
Faculty Rd								Subchap	ter 8	Other that	n K-12)		
City (5)							- 1	Other (i.e homes, e	etc)	ate and co	omme	rcial b	uildin	gs,
Princeton							\neg	Square Feet	,	# of Floor			_	
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

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					Name of Building Owner/Operator (2) M. MARATEA 2020CT 15 AM 10: 5 to 51.3 RUERJALE ROAD ASSISSION CONTROL								
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			i .		Street Address 450 S.River St City, State, Zip Code Hackensack, N.J. 07601 Phone No. 201-329-7444 00388 In Date (11) Name of OSHA Monitor Omega Environmental Inc Street Address 280 Huyler St City, State, Zip Code South Hackensack, N.J. 07606 Pull Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Ocation Impaired to the mality Solely by Internance/ Stocial Street Address 280 Huyler St City, State, Zip Code South Hackensack, N.J. 07606 Abatement Type Cocation Impaired (*) and Non-Friable Procedure Ocation Impaired (*) and Non-Friable Procedure Ocation Impaired (*) Specify Impaired (*								
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* Do not use this form for asbestos licensure exemp

	October 12, 2012 otified Type Notification Initial Amended Amendment #9 Emergency (including justification) Cancellation Canc	(P	ursuant t	o NJAC	8:60 and 12:1	20)		RECE	11/1				
Date of Notification (1)	October 12, 2012 Is Notified Type Notification A A		Name of	Building	Owner/Operat	or (2)		A 90	AC	U			
	October 12, 2012 encies Notified EPA DEP DOL DOH DOH DOH DCA Type Notification Initial Amended Amendment #9 Emergency (includin justification) Cancellation me of Facility Where Abatement is Taking Place no Diagnostic / Johnson & Johnson eet Address 0 / 1001 Route 202 y (5) iitan, NJ unty (6) merset me of Monitoring Firm Hired by Building Owner (ava Environmental, Inc. eet Address Kilmer Drive y, State, Zip Code sborough, NJ 08844-3830 oject Manager for Monitoring Firm vard J. Bulava mt Date (10) 2/2/12 cupancy Status During Abatement (Check Only of Abatement Performed Outside of Normal Facil Other - Describe: Depe of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Yes OCD Boiler Room -"- F Building Basement					c / Johnson	1 & Jo	ohnson 2	MIZOCT IS	Au .			
Agencies Notified	October 12, 2012 Incies Notified EPA DEP DOL DOL DOH DOL DOH DOCA Type Notification Initial Amended Amendment #9 Emergency (including justification) Cancellation The of Facility Where Abatement is Taking Place to Diagnostic / Johnson & Johnson et Address Dolet / 1001 Route 202 (5) tan, NJ Inty (6) Interset The of Monitoring Firm Hired by Building Owner (8			Street Ac					15	AM S	3: Q		
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DOH	justification)			Name of	Contact				TelephoneNun	nber			
DCA	October 12, 2012 cies Notified Type Notification EPA DDEP DOL DOH DOCA DOH DCA DOH DCA Diagnostic / Johnson & Johnson t Address // 1001 Route 202 5) an, NJ ty (6) erset of Monitoring Firm Hired by Building Owner (8) a Environmental, Inc. t Address Imer Drive State, Zip Code Borough, NJ 08844-3830 ct Manager for Monitoring Firm and J. Bulava Date (10) 2/2/12 pancy Status During Abatement (Check Only Office) Facility Closed/Vacated During Entire Period office Abatement Performed Outside of Normal Facility Other - Describe: e of Work (Check All That Apply) ≥3 sf or ≥3 If ≥160 sf or ≥260 If Location of sbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Yes OCD Boiler Room ""- F Building Basement Tenant House e of Registered Waste Hauler mold Cartage State		F	Project I									
Name of English Whore	Abatament in Takin	a Place (2	1	FACIL	ITY INFO	ORMATION	Tv	pe of Facility (4	A				-
		70 30)				,,,	20 To 10					
	onnson & Jonns	on					\dashv \vdash	School (K-12	2) 8 (Other than K-12	2)			
	NA CONTRACTOR								rivate & commercia		lings.	home	es,
The second secon	.02							etc.)	T., ZE,	- 1 - 5	11- /		
City (5)							Sq	uare Feet	# of Floors	В	iag. F	\ge	
Raritan, NJ									3				
County (6)				County C		ř	Cu	rrent Use (Prio	r if being demolish	ned)			
Somerset				(BIAIL O					Facility				
Name of Monitoring Firm	n Hired by Building	Owner (8)		ASCM	No.	Nar	ne of A	batement Con	tractor (9)				
Bulava Environment	al, Inc.					The	MAC	K Group, LI	_C.				
Street Address		ation ed			Stre	et Add	ress						
12 Kilmer Drive		Title Na Ort Str 100 Cit Ral Na			150	0 King	gs HWY N,	STE 209					
City, State, Zip Code			Renovation Demolition Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12) Is No Project PAGE (12) Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12) Is No N/A			City	, State	, Zip Code					
Hillsborough, NJ 088	Type Notification Initial				Che	rry H	II, NJ 08034	l,					
Project Manager for Mor	Type Notification Initial		Telephor	ne No.	Tele	phone	No.	License N	0.				
Edward J. Bulava	Initial Amended Amendment #9 Emergency (including justification) Cancellation Abatement is Taking Place (3) Abatement is Taking Place (3) Annson & Johnson D2 Hired by Building Owner (8) Al, Inc. A44-3830 Aitoring Firm Scheduled G Abatement (Check Only One) Added Outside of Normal Facility Hold of Material (ACM) ATED ATED ATED ATED ATED ATED ATED ATED	9	908-874	-6207	(973	759	- 5000	00781					
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2/2/12	2			12/31/1	2	The	MAC	K Group, LI	_C.				
Occupancy Status Durin	Initial Amended Amendment #9 Emergency (including justification) Cancellation Abatement is Taking Place (3) ohnson & Johnson 202 In Hired by Building Owner (8) al, Inc. 8444-3830 Initoring Firm Scheduled 2	ne)			Stre	et Add	ress						
Facility Closed/Vac	cated During Entire	Period of	Abater	nent		150	0 King	gs HWY N,	STE 209				
Abatement Perform						City	, State	, Zip Code		70			
Other - Describe:						— Che	rry H	ill, NJ 08034	1				
Scope of Work (Check A	All That Apply)								S				
>3 sf or ≥3 lf			Renova	ation			\times	Full Containme	nt with Negative F	ressu	re		
≥160 sf or ≥260 lf							X	Mini-Enclosure					
		2.073						Glovebag Proc	edure (*) and Non-Friable	Proce	dure		
	33%	T	10.					TKOIT EXCITATION	() and Hom made	T	7.	e atement Type	t
01.007.007.00	95	(2.32)		CORP. (1997)							Т	ype	
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	Amended Amendment #9 Emergency (including justification) Cancellation Facility Where Abatement is Taking Place (3) agnostic / Johnson & Johnson dress 201 Route 202 NJ Other Monitoring Firm Hired by Building Owner (8) nvironmental, Inc. dress In Drive In Drive In Justification Inc. dress In Drive In Justification In Schedule In Sc				. thermal syste	ems ins	sulation,	(Specify	R	Z)	nca	En	
	Amended Amendment #9 Emergency (including justification) Cancellation				surfacing,			SF or LF)	Remova	ер	squ	Enclosure	
(13)			Country (STAT) Telegore (STAT) Telegor			other misce	naneou	15)		\va	a.	late	ure
		Yes	No	N/A								L.	
OCD Boile	r Room	X				pip	е		45 l/f	X			
"		X	1			Tan	k	-	350 s/f	X	re Abatemer Type Repair		
F Building P	lasement	#9 Cir Ra Na Pro			fittin	as		51	X				
	OCD Boiler Room _"- F Building Basement		X			Vat/Ma			150 s/f	X			
				NJ DEP W	aste	Cubic Yard	-	Name of I	Registered Landfill		-1	1	-
	are sets successfull STEES			Hauler ID		of Waste							
Freehold Cartage				222	53	6			erial Landfill				
City, State						Disposal D		City, State		13			
Freehold, NJ		7				12/31		Imperial,	PA 15126				
Completed by	18	Title			202	Signal	we	17/		ate			
Michael Cooper		Presid	dent	27	107			//	10,	/12/1:	2		

		Location Normall		Discourse				ement /pe	t
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	ed Sole intenar todial S (12)	ly by nce/	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A			_		6	L
Tenant House		X		pipe insulation	33 If	X		f	
OCD Boiler Control Room	X			VAT/Mastic	250 s/f	X		1	
OMP B 242 - fume hoods		X		transite	600 s/f	X			
OCD BR	X			pipe insulation	7 s/f	X			
OCD CAMA Corridor		X		ACM insulation	1100 s/f	X			
OCD G Basement	X			fittings	38	X			
OCD Mens Locker Room		X		Fittings	67	X			
OCD Gamma A-60		X		flooring	155 sf	X			T
COD Carrina // CO				nooring	100 01				T
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State of New Jersey NOT

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

	May 22, 2012 Notified Type Notification Initial Amended Amendment #8 Emergency (including justification) Cancellation Cancell		(Pu	rsuant to	NJAC 8:	:60 and 1	12.120)			R	ECE	111			
Date of Notification (1)			County (STATE:) County (STATE:) County (STATE:) County (STATE:) ASCI ASCI ASCI ASCI ASCI ASCI ASCI ASCI ASCI Telepho 908-87 Iled Completion 12/31/ One) ASCI ASCI ASCI Tolepho 908-87 Iled Completion 12/31/ One) ASCI Name of B	uilding O	wner/Op	erator (2	2)								
Ma	ay 22, 2012	Initial Amended Amendment #8 Emergency (including justification) Cancellation tement is Taking Place (3) son & Johnson red by Building Owner (8) Inc. Scheduled batement (Check Only One) d During Entire Period of Ab Outside of Normal Facility Herbatenia (ACM) That Apply) Red Custo Room Sement Use	0	rtho Dia	gnostic	/ John	son &	Johnso	on -	20120	CT IS	- A A.C	^		
Agencies Notified	May 22, 2012 otified		1 2	Street Add						-012 0	0113	AIT	9:	05	
⊠ EPA	Type Notification Initial	10	000 / 10	01 Rou	ıte 202,	PO B	ox 300		ASAF	STOC	004	J 799			
DEP	May 22, 2012 Type Notification Initial Amended Amendment #8 Emergency (including justification) Cancellation Where Abatement is Taking Place (3 Stic / Johnson & Johnson Route 202 Dring Firm Hired by Building Owner (8 Johnson & Johnson Route 202 Dring Firm Hired by Building Owner (8 Johnson & Johns	0		City, State	, Zip Coc	de				2	1100	LUM	IIR	OL.	
DOL	May 22, 2012 fied	±8 ncluding	- R	aritan, N	1J 0886	69					LIUCH	1214	G		
DOH	May 22, 2012 otified	ncidanig		Name of C	Contact					Telepho	oneNumb	er			- 1
DCA	May 22, 2012 Initial		P	roject M								-			- 2000
		Disea (2)		FACILI	TY INFO	RMATIO	N	Type of	Facility (4)	-	-,				
Ortho Diagnostic / .	Johnson & Johnson	on						Sul	nool (K-12) ochapter 8	(Other th	an K-12)				
Street Address								Oth	er (i.e. priv	rate & co	mmercial	buildi	ngs,	home	s,
1000 / 1001 Route	202							etc Square		# of Flo	ors	Blo	da A	ne	
City (5)								Square	reet	# 01 1 10	3		.9		
Raritan, NJ				0	ndo (7)			Current	Use (Prior	if heing (d)	-		
County (6)				(STATE US			_	Current	036 (11101		cility	-/			
Somerset				ACCMI	Na		Name (of Abater	nent Contra		Cility			-	-
		Owner (8)		ASCM	NO.	-								ROL. home Age	
	ntal, Inc.			<u> </u>				Address	roup, LL(J					
Street Address									WY N, S	TE 200	a			ROL s, home Age	
12 Kilmer Drive								tate, Zip		1 L 203				Note the mentage	
City, State, Zip Code									J 08034						
			1	Tolophon	o No			one No.	3 00004	Li	cense No			ROL. Age re batemer Type	
	lonitoring Firm							759 - 50	າດດ	80000	781				
Edward J. Bulava		Sahadula							Monitor						
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									WY N, S	TE 209	9				
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Other - Describe		iai i dointy	Tiour						J 08034						
Corne of Work (Check	All That Apply)							,							
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(13)					otner	niscellar	ieous)				val	¥:	home	- F
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		\rightarrow		+	01-1107-E		Tank			350	s/f	X			
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F Building	Basement	\perp X	17				fittings	S		5	1	$\langle \cdot \rangle$	-	home: ge	-
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				Hauler ID		of Wa	iste 6	l,	BFI Impe	rial I ar	ndfill				
Freehold Cartage				222	33	Disno	sal Date		City, State						
City, State							2/31/1		mperial,		126		7 TROL		
Freehold, NJ		Title				- 1	Signatur		- P	1		buildings, hon Bidg. Age ed) ressure Procedure Abatem Type Removal			
Completed by			4					1	//		5/2	2/12			
Michael Cooper		Presi	aent			M-					0/2				

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Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	d Solel intenan todial S (12)	y by ce/	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Liciosaio
	Yes	No	N/A			Ĺ,		0	
Tenant House		X		pipe insulation	33 If	X			1
OCD Boiler Control Room	X			VAT/Mastic	250 s/f	X			
OMP B 242 - fume hoods		X		transite	600 s/f	X			
OCD BR	X			pipe insulation	7 s/f	X			
OCD CAMA Corridor		X		ACM insulation	1100 s/f	X			
OCD G Basement	X			fittings	38	X			
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Date of Notification (1)					.	Owner/Operato			F & Bearing	CE	IVE	D			
	I 30, 2012					c / Johnson	& Johr	nson 201	9 00=						
Agencies Notified	Type Notification		1.0	Street Ad				601	CUCI	15	AM O		-		1
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DEP	Amended	.7	١.		te, Zip Co			7,00	551	OS C	DAIT	20			
⊠ . DOF	Amendment #				NJ 088	69			E LI	ENS	INC	tU	L_		
DOH	justification)			Name of	Contact				Tele	ephone	Numbe	r			
DCA	Cancellation		F		Manage					-					
Name of Facility Where	Abatement is Taking	Place (3	1	FACIL	LITY INFO	DRMATION	Type	of Facility (4	1)			-			
		3 373	,												
Ortho Diagnostic / Jo Street Address	DITISOTI & JOHNS	110						School (K-12 Subchapter		er than I	K-12)				
1	00							Other (i.e. p				uild	ings,	home	s,
1000 / 1001 Route 2 City (5)	02							etc.) re Feet	# of	Floors		Bl	dg. A	ae	_
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Raritan, NJ County (6)				County C	ode (7)		Curre	nt Use (Pric	r if hei		olished)	_			_
					SE ONLY)		Curre	iii 030 (1 110		Facilit					
Somerset Name of Monitoring Firm	Hirod by Building C	Junor (8)		ASCM	No	Nam	ne of Aha	tement Con			у	-			
		wher (o)		AGCIVI	NO.	1000000				(0)					8
Bulava Environmenta Street Address	ai, inc.						et Addres	Group, LI	_0.			-			-
									OTE 1	200					
12 Kilmer Drive		****	<u> </u>			and the second second	State, Z	HWY N,	OIL	.03					
City, State, Zip Code	44.2020					1		NJ 08034							
Hillsborough, NJ 088 Project Manager for Mon				Telephor	ne No		phone No		<u> </u>	Licens	se No.				
Edward J. Bulava	itomig i iiii		1	08-874) 759 -			00781					
Start Date (10)		Schedule	100					A Monitor		00701					-
2/2/12	1	Concaun		12/31/1		15 15050000		Group, LI	C						
Occupancy Status Durin		CONIV Or		12/01/1			et Addres		-0.						
				aant		1500) Kinas	HWY N,	STE 2	209					
Facility Closed/Vac Abatement Perform							State, Z								
Other - Describe:						4		NJ 08034	1		12				
Scope of Work (Check A	II That Apply)					18.1.5	, , , , , ,							525	
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≥160 sf or ≥260 lf		-	Demolit				Mir	ni-Enclosure							
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In Facil	lity	Cus	todial ((12)	otan?		surfacing, other miscel			SF	or LF)		Remova	Repair	Encapsulate	Enclosure
(13)		-	1000			Other miscer	ianeous)				1	2	¥.	ilate	лге
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OCD Boiler	Room	\times				pipe	9		4	45 l/f		$\langle $			
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Name of Registered Was	(40) 200 (40)		1	J DEP W	aste	Cubic Yards	Delta com to a	Name of I	7.0		ndfill				I
			H	lauler ID	No.	of Waste			59 39 34	57200					
Freehold Cartage				222	53	6		BFI Impe		andfill					
City, State						Disposal Da		City, State		F466	(4)				
Freehold, NJ		T part of				12/31		Imperial,	PA 1	5126	Dot-		_		
Completed by		Title	SE 1000		200	Signat	re	1//_	0	e consider	Date				100 P
Michael Cooper		Presid	lent			2					4/30/	12			

Date of Notification (1)	1000		Name of	State, Zip C an, NJ 08 e of Contac ect Manag ACILITY INI THE USE ONL SCM No. Phone No. 874-6207 on Date (11 1/12 Asbe (i.d.	Owner/Op	erator (2)	115	GEI	VE	f"		7
April 18, 2012			Ortho D	iagnost	tic / Johr	nson &	Johnson 20	1200-	2	-	. F		
Agencies Notified Type Notification			Street A	ddress				Z UC	15	lle a			-
⊠ EPA	1		1000 / 1	001 Rd	oute 202	, PO E	Box 300	5	- 4	n 9:	70		
DEP Amended	_	ı					70	251	OS co	13.1.2	•		
	Amended Amendment #6 Emergency (including justification) Cancellation acility Where Abatement is Taking Place (3) gnostic / Johnson & Johnson ress 01 Route 202 JJ Cognotioning Firm Hired by Building Owner (8) Invironmental, Inc. ress Drive Zip Code Igh, NJ 08844-3830 Inager for Monitoring Firm Bulava (10) Scheduled Complete (12) In Status During Abatement (Check Only One) Ity Closed/Vacated During Entire Period of Abatement (Performed Outside of Normal Facility Hours repeated by Closed (13) In Facility In Facility In Facility (13) Cocnocity In Facility In Fa	Raritan,	NJ 088	869		8	Œ LIL	FNSI	MIRE	1			
		1					7.	Tel	ephoneN	umber	٠.		
			Telephone N 908-874-62 ompletion Date 12/31/12 ement urs vation olition ation ally olely by nance/ ul Staff? 2) N/A NJ DEP Waste Hauler ID No. 22253	Manage	er			1					
				TWO TO STATE OF		N							~~~~
Name of Facility Where Abatement is Takin	g Place (3	3)	County Code (STATE USE ASCM No Telephone N 908-874-62 Completion Date 12/31/12 Internent burs Ovation nolition Cation mally Solely by enance/ ial Staff? I2) No N/A NJ DEP Waste Hauler ID No. 22253				Type of Facility (4)	253				
Ortho Diagnostic / Johnson & Johns	Amended Amendment #6 Emergency (including justification) Cancellation Internet is Taking Place (3) Inson & Johnson Tred by Building Owner (8) Inc.						School (K-1	2)					
Street Address							Subchapter						
1000 / 1001 Route 202							Other (i.e.) etc.)	orivate &	k commer	cial buil	aings	gs, hom g. Age	es,
City (5)							Square Feet	# of	Floors	E	Bldg.	Age	C-0-1500
Raritan, NJ									3				
County (6)			County C	Code (7)			Current Use (Pri	or if bei	ng demol	ished)	900 =	temen	
Somerset		1	(STATE U	ISE ONLY	ν				Facility			s, hom Age	
	Owner (8)		ASCM	l No.		Name o	of Abatement Cor						
Bulava Environmental, Inc.					-	The M	ACK Group, L	I.C.	2.22				
Street Address		_					Address				-	-	-
12 Kilmer Drive						1500 K	ings HWY N,	STE	209				
City, State, Zip Code							ate, Zip Code	OIL	-03				
CONTRACTOR AND A STATE OF THE S							Hill, NJ 0803	1					
Project Manager for Monitoring Firm			Telephor	ne No		Telepho	The state of the s	-	License	No			-
Edward J. Bulava							59 - 5000		00781				
Start Date (10)	Schedul						of OSHA Monitor		00701		_	Age	
CHROSPOSCOCOS	Concaan						ACK Group, L	ıc					
The state of the s	k Only Or		12/31/1				Address	LU.					
123							ings HWY N,	STE 2	na				
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Scope of Work (Check All That Apply)						Juerry	Hill, NJ 0803	4			-		
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≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Consumer Co.					5	Full Containm Mini-Enclosure		Negative	Pressu	re	Age	
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	Yes	No	N/A							-	-		_
OCD Boiler Room	\rightarrow		-			pipe			15 l/f	$-\langle \triangle \rangle$		-	-
"	X				= 22	Tank		35	50 s/f	X			
F Building Basement	X				fi	ttings			51	\times			
Tenant House		X			Vat	/Masti	С	15	50 s/f	X			
Name of Registered Waste Hauler				Asbesto (i.e. t	Cubic Y		Name of	Registe	red Landf	ill		1	
		1			of Wast			25 212					
Freehold Cartage			222	53		6	BFI Impe	decimal and the second	andfill				
City, State					Disposa		City, Stat						
Freehold, NJ	1		00 00 00 00 00 00 00 00 00 00 00 00 00 0			/31/12		PA 1					
Completed by	1 22	•			Sji	gnature	17/1	1		Date			
Michael Cooper	Presid	lent				North Contraction of the Contrac			4	18/12			

	Is	Locatio	on V	Description of				ement rpe	T-
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	ed Solely intenan todial S (12)	y by ce/	Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	
	Yes	No	N/A	-1	//		ļ 	Ф	ļ
Tenant House		X		pipe insulation	33 If	X			
OCD Boiler Control Room	X			VAT/Mastic	250 s/f	X			
OMP B 242 - fume hoods		X		transite	600 s/f	X			
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Date of Notification (1)		0.14000		004000-00	er/Operator			VEI	VEI)					
March 30, 2012		Name of Building Owner/Operator (2) Ortho Diagnostic / Johnson & Johnson													
Agencies Notified Type Notification	11/1/200	treet Add			8 Johnson 2812 OCT 15 AM 9: 67										
⊠ FPA □ Initial	1				202, PO	Box 30	00		117 9: 8	77		-			
DEP X Amended	_	C	ity, State	, Zip Code		ASBESTOS CONTROL									
DOL Amendment :		- Ra	aritan, N	NJ 08869		& LICENCUNTROI									
Emergency (i	N	lame of C	Contact				Telephone	Manger .	~.						
DOH DCA Justification Cancellation	Pr	oject M	lanager												
			TY INFORM	MATION	Type of Facility (4)										
Name of Facility Where Abatement is Taking	Place (3)	4				Type o	of Facility (4)								
Ortho Diagnostic / Johnson & Johns	on					J□ s	chool (K-12)	12)						
Street Address			Subchapter & Other (i.e. pr	Other than K- ivate & commerce	iz) cial build	ings,	home	s,							
1000 / 1001 Route 202							etc.)								
City (5)		Square	e Feet	# of Floors	BI	dg. A	ge								
								3							
Raritan, NJ		1	County Co	ode (7)		Currer	nt Use (Prio	r if being demoli	shed)						
County (6)		(STATE US	RE ONLY)											
Somerset	Owner (8)	-4-	ASCM	No.	Nam	e of Abat	tement Cont	ractor (9)							
Name of Monitoring Firm Hired by Building	Owner (o)		/100111		The	The MACK Group, LLC.									
Bulava Environmental, Inc.			l			et Addres					-				
Street Address					- 301637-0167	The state of the s									
12 Kilmer Drive						1500 Kings HWY N, STE 209									
City, State, Zip Code						City, State, Zip Code									
Hillsborough, NJ 08844-3830				Cherry Hill, NJ 08034 Telephone No. License No.											
Project Manager for Monitoring Firm			Telephon		Commence	Telephone ivo.									
Edward J. Bulava	100	08-874	Control of the contro		(973) 759 - 5000 00781 Name of OSHA Monitor										
Start Date (10)	d Con	pletion D	ate (11)		Stockers of the Control of the Contr										
2/2/12		12/31/12	2		MACK Group, LLC.										
Occupancy Status During Abatement (Che	3	Street Address													
Facility Closed/Vacated During Entire		nent			1500 Kings HWY N, STE 209										
Abatement Performed Outside of North	mal Facility	Hours	3		City	City, State, Zip Code									
Other - Describe:		-	Cherry Hill, NJ 08034									_			
Scope of Work (Check All That Apply)						<u> </u>									
	X F	Renova	ition			Full Containment with Negative Pressure									
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Transport Co.	emoli					ni-Enclosure								
Z 2100 01 01 2200 11						A GI	ovebag Pro	(*) and Non-Fria							
		-							Aba			nt			
		Locat	2223							Туре					
Location of	Norma d Sole			Descript os Containin	ion of	al (ACM)	Amount			l m	1				
Asbestos-Containing Material (ACM)		intena		Aspesto	hermal syste	ems insul	lation,	(Specify	R	70	nca	Enclosure			
TO BE ABATED In Facility	Cus		Staff?	(surfacing,	VAT, or		SF or LF)	Remova	Repair	psu	los			
(13)		(12)		32	other misce	llaneous))	*	va	=	Encapsulate	Tre			
											(0)				
	Yes	No	N/A					45 l/f	X	1					
OCD Boiler Room	X				pip	е				-	-	+-			
n= = = = = = = = = = = = = = = = = = =	X	1 2 2	1		Tar	nk		350 s/f	X	>	4-	-			
					fittir	nas		51	\times			0.5			
F Building Basement	-	1	,			95									
Tenant House	X			Vat/M		150 s/f									
Name of Registered Waste Hauler		NJ DEP V		Cubic Yard of Waste											
		Hauler ID		or waste		BFI Imr	BFI Imperial Landfill								
Freehold Cartage		222	233	Disposal D		City, Sta			_		537055				
City, State		32			12/3			I, PA 15126							
Freehold, NJ				Ture	Impena	Date									
Completed by	Title				Signa	The state of the s	1///-		3/30/12)					
Michael Cooper	Presi	dent					المسلسن.		3/30/12	-					

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

				RECEIVED														
Date of Notification (1)				Name of Building Owner/Operator (2)														
March 28, 2012				Ortho Diagnostic / Johnson & Johnson														
Agencies Notified Type		Street Address 2012 OCT 15 AM 9: 08																
⊠ EPA	Initial	200					2, PO E	Зох		-3 F 75	00000	1 1 T' FX	~ 1					
I I DEP IXI	Amended	1	13	City, Stat	e, Zip Co	de		ASBESTOS CONTROL										
DOL □	Amendment a Emergency (i		- 4	Raritan,		69		& LICENSING										
⊠ DOH	justification)	nerdunig		Name of Contact TelephoneNumber														
DCA	F	Project Manager FACILITY INFORMATION																
	V 7 1/2	Diago (2)		FACIL	ITY INFO	DRMATI	ON	Typ	e of Facility (4	1)								
Name of Facility Where Abate)					Тур										
Ortho Diagnostic / Johns	on & Johnso	on						Н	School (K-12 Subchapter		r than K-1	2)						
Street Address								X	Other (i.e. p				ings,	home	es,			
1000 / 1001 Route 202		etc.) Square Feet							# of Floors Bldg. Age									
City (5)								Squ	are reet	# 01 F100FS		. D	Bldg. Age					
Raritan, NJ					-1- (7)			0	rent Use (Prio	r if boi	3	hod)			-			
County (6)				County C	ode (7) SE ONLY)			Cur	rent use (Pilo			neu)						
Somerset						-	Nama	of Al-	patement Con		Facility				20000000			
Name of Monitoring Firm Hire		Owner (8)		ASCM	No.						(9)							
Bulava Environmental, Ir	nc.						I he IVI		K Group, LI	LU.								
Street Address										OTE 6	200							
12 Kilmer Drive									s HWY N,	SIE	209	-						
City, State, Zip Code					25		Zip Code	4										
Hillsborough, NJ 08844-		7 1 1	- N-			rry Hill, NJ 03034												
Project Manager for Monitorin		136565420000000000000000000000000000000000				elephone No. License No. 00781												
Edward J. Bulava		The state of the s					- 5000 SHA Monitor		00781			-1						
Start Date (10)		Compication Date (1.1)																
2/2/12		12/31/12 The MACK Group, LLC. Street Address																
Occupancy Status During Ab										CTE 1	200							
Facility Closed/Vacated	Abater	ment				00 Kings HWY N, STE 209 by, State, Zip Code												
Abatement Performed O Other - Describe:	Houi	5		_		erry Hill, NJ 08034												
	at Anabil						Cheny	<i>y</i> Піі	ii, NJ 00032	+								
Scope of Work (Check All Th	at Apply)						Г	Ⅺ.			Manadha	D						
≥3 sf or ≥3 lf	Renova Demoli				ľ	Full Containment with Negative Pressure Mini-Enclosure												
≥160 sf or ≥260 lf				1011				☑ Glovebag Procedure										
								Non-Exempted (*) and Non-Friable Procedure Abatement										
		1 25		ocation							Type							
Location of	Norma	ely by			escription		Amount					T						
Asbestos-Containing Mat TO BE ABATE			intena					ning Material (ACM)			Amount (Specify			Encapsulate	m			
In Facility	ַ	Cus		Staff?	(1.0	surfa	acing, VA	AT, o	r	SF or LF)		Remova	2ep	aps	Enclosure			
(13)			(12)			other	miscella	neou	s)			ova	Repair	ulat	Sure			
		Voc	No	N/A				2				_		œ.				
				IN/A	nine			ne			45 l/f							
OCD Boiler Ro	OOM	$+ \leftrightarrow$		pip								\rightarrow	-	1	-			
_"-		X				Tank			ank		350 s/f			-	-			
F Building Base	ment	X				fittings			ngs		51							
Tenant House	X			V	at/Mas	estic 150 s/f												
Name of Registered Waste H	100	NJ DEP W		Cubic	Yards													
				Hauler ID		of Wa					16.11							
Freehold Cartage				222	253		6		BFI Imperial Landfill									
City, State		Disposal Date City, State																
Freehold, NJ					12/31/12 Imperial, PA 15126 Date													
Completed by									Date									
Michael Cooper President									-		3/	28/12						

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

Date of Notification (1)			11	Name of Building Owner/Operator (2) RECEIVED												
March 12, 2012 Agencies Notified Type Notification			C	Ortho Diagnostic / Johnson & Johnson												
Agencies Notified		Street Address 1000 / 1001 Route 202, PO Box 300														
EPA .	Initial						O Box 3									
DEP	Amended	., 3	100		e, Zip Cod			ASBESTOS CONTROL								
DOL	Amendment :				NJ 0886	9		& LIETENGINGMEE								
DOH	justification) Cancellation		- 10	Name of	Contact / lanager			- reletibition								
DCA					200			-								
Name of Facility Where		FACILITY INFORMATION Type of Facility (4)									-					
						School (K-12	en-									
Ortho Diagnostic / Johnson & Johnson Street Address							\dashv H	Subchapter 8	(Other than K-12	2)						
								Other (i.e. private & commercial buildings, homes,								
1000 / 1001 Route 2	202	-					etc.) Square Feet # of Floors Bldg. Age									
City (5)				3							•					
Raritan, NJ			_	County C	ode (7)		Curr	ent Use (Prio	r if being demolish	ned)						
County (6)				(STATE U			Jun	011, 000 (1 110	Facility							
Somerset	- Lizad by Building (Dupor (8)		ASCM	No	Na	me of Ab	atement Cont								
Name of Monitoring Fire		Jwilei (6)		AGOM	140.	1000000		Group, LL								
Bulava Environment	tai, inc.			1			eet Addre		-0.							
Street Address						1000000		s HWY N, S	STE 209							
12 Kilmer Drive			-					Zip Code	312 200	65						
City, State, Zip Code	044 0000					0.00000										
Hillsborough, NJ 08			- 1	Telephon	e No			rry Hill, NJ 08034 phone No. License No.								
Project Manager for Mo	milloring Firm		- 1	08-874				759 - 5000 00781								
Edward J. Bulava Start Date (10)	_	mpletion D		1 1	,	e of OSHA Monitor										
		12/31/1		The	MACK	MACK Group, LLC.										
2/2/1 Occupancy Status Duri		Street Address							i.							
		4500 Kinna LIMOV NI CTE 200														
Facility Closed/Va	Hour	ment s				Zip Code				-	-55000					
Other - Describe:		,	(A. 0) (A. 0)	Cherry Hill, NJ 08034												
Scope of Work (Check	All That Apply)				47.70		511 y 1 1111	, , , , , ,								
E-3	All That Apply)	\square		ovation Full Containment with Negative Pressure												
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Terroritation (enova emoli		mi with riogativo .	::::::::::::::::::::::::::::::::::::::										
		Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure														
			_					ion-Exempled	Abatement							
			Loca	A STATE OF THE STA							Туре					
Locati			Norma d Sol	ely by	Ashani	Descrip tos Containir		ial (ACM)	Amount							
Asbestos-Containin		Ma	intena	ance/		thermal sys			(Specify	R	ת	l nc	E			
In Fa		Cust	odial (12)	Staff?		surfacing			SF or LF)	Remova	Repair	sde	Enclosure			
(13	3)		(,_,	other miscel			enaneous	5)		Va	ai-	Encapsulate	ure			
h		Yes	No	N/A												
OCD Boil	er Room	X				pip	oe .		45 l/f	X		20				
		$+ \Diamond$	-			Ta	-		350 s/f	X						
	-	\rightarrow								$\langle \rangle$		-	-			
F Building	Basement	\perp X		,	fitting			gs 51			-	-	+			
Tenant	House		X	Vat/Ma					150 s/f	X						
Name of Registered W	13.4	NJ DEP W		Cubic Yar	ds											
ve also produces translations and productive. NYO 18-40		Hauler ID		of Waste		DEI Imp	arial Landfill									
Freehold Cartage				222	.53	Disposal [City, Stat	erial Landfill							
City, State						A SECURITY SHOWS A SECURITY OF			PA 15126							
Freehold, NJ				12/3		imperial,		ate	_							
Completed by		Title	11			Sight	ature	19/-		12/12						
Michael Cooper		Presid	ent						31	12/12						

	Is	Locatio	n					ement ype	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	Normally d Solely intenan todial S (12)	by ce/	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
1	Yes	No	N/A	F		\vee	-		
Tenant House		X		pipe insulation	33 If	X	-	-	_
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Date of Notification (1)			1	Vame	e of Buil	lding Ow	ner/Op	perator (2)	RECE	EIVI	50				
	ry 21, 2012		0	rtho	o Diag	nostic /	/ Johr	nson &				~-				
	Type Notification				et Addre					2 OCT 15	i am	0.00				
	laika.		1	000	/ 100	1 Route	e 202	, PO B	ox 30	00	Pull	3.02				
EPA DEP	Initial Amended	_	-	City,	State, 2	Zip Code			55	BESTOS	i con	TDOL				
DOL	Amendment #	2	- R	arit	an, NJ	08869	9		-,0	\$ 1 ICE	MEIN (IKUL				
	Emergency (in	cluding	1	400 mm mm.	e of Co					& LICE	L SIPP	haneNumb	er			
DOH DCA	justification) Cancellation		P	roie	ect Ma	nager										
		-				Y INFOR	MATIC	NC								
Name of Facility Where A	batement is Taking	Place (3)							Туре о	of Facility (4)				•		
Ortho Diagnostic / Jo								. [s	chool (K-12)		n 100 020				
Street Address									S	Subchapter 8 Other (i.e. pri	(Other	than K-12)	huildir	nas	nomes	
1000 / 1001 Route 20	12							1		tc.)	vale u c	Johnnerdia				
City (5)										e Feet	# of F	loors	Blo	g. A	ge	
- SALE-SALE AND -												3				
Raritan, NJ County (6)				Cou	nty Cod	e (7)			Currer	nt Use (Prior	if being	demolishe	d)			
10 2 S000V6				(STA	ATE USE	ONLY)					F	acility				
Somerset Name of Monitoring Firm	Hired by Building C	wner (8)		TA	SCM No	o.		Name o	f Abat	ement Contr	actor (9	1)				
		(0)						The M	ACK	Group, LL	C.					
Bulava Environmenta	II, INC.			_				Street A	-							
Street Address				2				1500 K	inas	HWY N, S	STE 20)9				
12 Kilmer Drive								City, St	- Contractions							
City, State, Zip Code								11.000-00# HEV DOLLO		NJ 08034						
Hillsborough, NJ 088				Tolo	ephone	No	-	Telepho				License No				
Project Manager for Mon	itoring Firm		- 1		5149111001111100110			(973) 7			0	0781				
Edward J. Bulava		Schedule	113		-874-6					A Monitor		0/01				
Start Date (10)		Schedule		(120)		(11)		CO COSTO DO COM		Group, LL	C					
2/2/12		0.1.0		12/	31/12			Street			. .					
Occupancy Status Durin								37/10/10/20		HWY N, S	STE 20	na				
Facility Closed/Vac	ated During Entire F	Period of A	bater	ment	t			-			316 20		-	N.		
Abatement Perform Other - Describe:	ed Outside of Norm	al Facility	Hour	S				260000000000000000000000000000000000000		ip Code				31		
							20,01	Cherry	HIII,	NJ 08034					-	
Scope of Work (Check A	II That Apply)							F	7							
≥3 sf or ≥3 lf		Section 1	enov					K		II Containme ni-Enclosure	nt with	Negative Pr	essur	е		
≥160 sf or ≥260 lf			emol	ition					K Glo	ovebag Proc	edure					
			*						No	n-Exempted	(*) and N	Ion-Friable I				
		le	Loca	tion											ement rpe	.
	•		Norma				De	escription	of				_	.,	T -	
Locatio Asbestos-Containing	n of Material (ACM)	100000000000000000000000000000000000000	d Sol			Asbesto	os Con	taining N	lateria	I (ACM)		nount	_		m	ш
TO BE AB	ATED	0.000	inten: todial		250-40	(i.e. 1		al systems acing, VA		ation,	3.000	pecify or LF)	Ren	Re	cap	nclo
In Fac			(12)					miscellar			OI.	01 21 /	Remova	Repair	Encapsulate	Enclosure
(13)	<u>.</u>	-		·T									8	7	ite	o
		Yes	No		N/A								V		-	
OCD Boile	r Room	\times						pipe			4	5 l/f	\triangle			
"		X						Tank			35	60 s/f	X			
		\rightarrow		+	-			fittings	8 .			51	X			
F Building E	Basement	-		+	-+			illings						<u> </u>		1
50			<u></u>							T. 11	Dinto	ad Landfill				
Name of Registered Wa	aste Hauler				DEP Was		of Wa	c Yards		Name of	Register	ed Landfill				
				паи	2225	March and a second	01 ***	4.5		BFI Impe	erial La	andfill				
Freehold Cartage							Dispo	osal Date		City, Stat			14	1000		
City, State							1000000000	12/31/1		Imperial,		5126		20		12
Freehold, NJ		Title	-					Signatur		1/2/	1	Da	te			
Completed by		Charles a	4054					1/2	-/	1/-		2/2	1/12			
Michael Cooper		Presid	uent													

RECEIVED

Date of Notification (1)				Name of	Building C	Owner/Operat	or (2)						
Febru	ary 10, 2012		105			c / Johnson	1 & Joh	nnson 🥍	H2 OCT 15	AM O	69	,	
Agencies Notified	Type Notification			Street Ad	ddress			-	12 001 13	יכ ווא	UZ		
⊠ EPA	Initial		1	000 / 1	001 Rou	ute 202, PC	Box	300 A	Caterne r	· (1.5 T.)	3231		
DEP	Amended	4		City, Stat	te, Zip Coo	de		pr.	& LICEN	ONIC	KUL		
⊠ DOL	Amendment		— F	Raritan,	NJ 0886	69			area con service agreement				
DOH DOH	Emergency justification)			Name of	Contact				TelephoneNu	mber			
DCA	Cancellation		F	Project I	Manage	r							
						RMATION							
Name of Facility Where	Abatement is Takin	g Place (3)					Тур	e of Facility (4	1)				
Ortho Diagnostic / Jo	ohnson & Johns	son						School (K-12					
Street Address					10 k				8 (Other than K-1 rivate & commerce		inas	home	25
1000 / 1001 Route 2	202						\boxtimes	etc.)	rivate & commerc	iai baiic	migo,		
City (5)			-				Squ	are Feet	# of Floors	В	dg. A	ge	
Raritan, NJ									3				
County (6)	1700		Т	County C	Code (7)		Curr	ent Use (Pric	or if being demolis	shed)			
Somerset				(STATE U	JSE ONLY)				Facility				
Name of Monitoring Firm	n Hired by Building	Owner (8)		ASCM	l No.	Nan	ne of Ab	atement Con					
Bulava Environment						The	MACK	Group, LI	LC.				
Street Address	ai, iiio.						et Addr						
12 Kilmer Drive						1500) King	s HWY N,	STF 209				
City, State, Zip Code								Zip Code	0.2.200		_	180)	
	044 2020		5		\$88	Same S		, NJ 08034	1				
Hillsborough, NJ 08				Telephor	ne No		ephone		License	No.	-		
	mitoring r min			908-874				- 5000	00781				
Edward J. Bulava Start Date (10)		Schedule			-			SHA Monitor	00701				
Beautiful State of the Control of th	2	Concadio		12/31/1				C Group, LI	I C	3.			
2/2/12 Occupancy Status Durin		ck Only On		12/3 // 1	2		et Addr		LO.				100000
								s HWY N,	STE 200				
	cated During Entire ned Outside of Norr					200		Zip Code	31L 209		-		
Other - Describe:	ned Outside of Nort	nai raciiity	riour	3					4				
	All That A and A					Che	пу пп	I, NJ 08034	<u> </u>				
Scope of Work (Check /	All That Apply)								1		33		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Contraction of the last of the	enova emoli				10.71	ull Containme Iini-Enclosure	ent with Negative	Pressur	е		
2100 \$1 01 2200 11			emon	uon				Slovebag Prod					
							N	lon-Exempted	(*) and Non-Friable	e Proce			
		ls	Locat	tion								emen /pe	t
Locatio	on of		lorma	to the same of the		Descript	ion of				· · · ·	T Pe	1
Asbestos-Containin		7000	d Sole ntena	ely by		tos Containin			Amount			ш	т
TO BE A	Market Committee	101010000		Staff?	(i.e.	thermal syste			(Specify SF or LF)	Rem	Re	cap	nclo
(13	· · · · · · · · · · · · · · · · · · ·		(12)			other misce			8-72-3875, 1900. 1	Remova	Repair	Encapsulate	Enclosure
			50.5							9	7	te	Ф
		Yes	No	N/A							-	-	-
OCD Boile	er Room	X		•		pip	е		45 l/f				
"		\times				Tan	ık		350 s/f	X			
		-		-						-	-	-	
		4										<u></u>	ļ.,,,
Name of Registered Wa	aste Hauler		100	NJ DEP V Hauler ID		Cubic Yard of Waste	S	Name of	Registered Landf	Ш			
Freehold Cortoss			- 1 '	222		4		BEI Impe	erial Landfill				
Freehold Cartage City, State				222		Disposal D	ate	City, Stat					1.100
The state of the s						12/31			PA 15126				
Freehold, NJ		Title				Signat		imperial,		Date			
Completed by		0.0000000000000000000000000000000000000	004			Signa		9/		10/12			
Michael Cooper		Presid	ent			n			= 21	10/12			

Date of Notification (1)				Name o	of Buildin	g Owner/Op	perato	r (2)	- 1	4F CE	IVI	-		- 20
Febru	ary 01, 2012			Ortho [Diagnos	stic / Johr	nson	& Johnson						
Agencies Notified	Type Notification	-			Address				2012	OCT 15	AM	0. (-	
EPA	Initial			1000 /	1001 R	Route 202	, PO	Box 300						
DEP	Amended			City, St	ate, Zip (Code			653	ESTOS	CON	TO		
X DOL	Amendmen Emergency		,	Raritan	, NJ 08	3869			8	LICEN	COM	IME	JL.	
DOH	justification)		,	Name o	of Contac	ct			T	LICEA elephoneN	umber	9		
☐ DCA	Cancellation	1			Manag									
Name of Facility Where	Abatament is Takir	na Diago	20)	FAC	ILITY IN	FORMATIC	N							
Terescotation symptom for Colora and Co.			3)					Type of Facility	(4)					
Ortho Diagnostic / Jo Street Address	onnson & Johns	son				22.00		School (K						
49.55.45.6										her than K- & commer		ldina	s hom	291
1000 / 1001 Route 2	02							etc.)	P		olal ola		, 11011	
Contract of the contract of th								Square Feet	#	of Floors		Bldg.	Age	
Raritan, NJ County (6)				6 .						. 3				
					Code (7) USE ONL			Current Use (P	rior if b	eing.demoli	shed)			
Somerset	Hisad b. D. Hall	0 /0				Alexander of the				Facility	Ų.			
Name of Monitoring Firm		Owner (8)	ASC	√l No.		Name	of Abatement Co	ntracto	r (9)				
Bulava Environmenta Street Address	al, Inc.				-			IACK Group,	LLC.		-			
							Street	Address						
12 Kilmer Drive								Kings HWY N	, STE	209				
City, State, Zip Code							City, S	State, Zip Code						
Hillsborough, NJ 088								y Hill, NJ 0803	34					
Project Manager for Mon	itoring Firm		Telepho				none No.		License	No.				
Edward J. Bulava Start Date (10)		Cabadal		908-874				759 - 5000		00781				
		Schedul	led Col		Date (11)			of OSHA Monitor						
2/2/12 Occupancy Status Durin		k Oaly O	201	2/10/1	2		Anthone and the Control of the Contr	IACK Group, I	LC.					
53		2014 CO. 100 CO.	21/20080					Address	Ngmano.co	02000000	100			
Facility Closed/Vac	ated During Entire	Period of	Abater	ment		-		Kings HWY N	STE	209				
Other - Describe:	Ca Outside of North	iai raciiit	y Hour	5		- 1	10-200-0	tate, Zip Code	20-2					
Scope of Work (Check A	II That Apply)				5715		herry	/ Hill, NJ 0803	4					
≥3 sf or ≥3 lf	······································						F	abla						
≥160 sf or ≥260 lf		-	Renova Demoli				ŀ	Full Containm Mini-Enclosur		h Negative	Pressu	re		
		ш.	Joinon					Glovebag Pro						
			- 3 -					Non-Exempted			Proce	dure		
		100	Locat							10			emen	t
Location			Normal ed Sole		85.00		ription						ype	1
Asbestos-Containing TO BE ABA		Ma	intena	nce/	Asbes	stos Contai	ning N	laterial (ACM) insulation,		Mount	_		m	m
In Facili		Cus	todial 3 (12)	Staff?	(1.6	surfacir	ng, VA	T, or		Specify F or LF)	Remova	Repair	Encapsulate	Enclosure
(13)			(12)			other mis	scellan	eous)			lova	pai	sula	Sur
		Yes	No	N/A							<u>m</u>	-	te	æ
OCD Boiler	Room	X	110	147	-		ino			AF 145		-	-	
"	TOOM	\leftrightarrow					pipe			45 l/f	$+ \Diamond$	-		
						T	ank		3	50 s/f	X			
Name of Registered Was	Name of Registered Waste Hauler				aste	Cubic Ya	ards	Name of	Registe	red Landfill	-			
rochold Cartage				auler ID		of Waste	•		D 100					
Freehold Cartage					53	-	4	BFI Impe		andfill	*			
City, State						Disposal		City, Stat						
Freehold, NJ Completed by							0/12	Imperial,	PA 1					
		Title				Sigr	nature	17/	1.	50,00	ate			
Michael Cooper		Presid	ent			100	100			2/1	/12			



1300		ħ		CATION	OF ASBE to NJAC 8	STOS	ABATE		т		POLZ OL	PE(CE	71	<i>!</i> ~	
Date of Notification (1) Oct. 10, 2012					f Building (e Dream		-	(2)		(201201	CT I	6	- 1 54	E)
	Type Notification		- 1	Street A 537 Ke	ddress earny Av	e.				A	SBES	The	0	AM	O: 4	3
EPA DEP DOL	Amended Amendment #				te, Zip Co y New		0703	2			& Li	CEA	131	NG	ROL	
DOH DCA	justification) Cancellation	loidding	1.33	Viti Co						Tel	ephone l	Numb	er	•		
Name of Facility Where Ab Serene Dreams, LLC		Place (3)	FACI	LITY INFO	RMATI	ON	Тур	e of Facility (
Street Address 537 Kearny Ave.								×	Subchapter Other (i.e. p etc.)	8 (Oth			build	lings,	home	es,
City (5) Kearny								Squ 300	are Feet 00	# o	f Floors		Bi 60	ldg. A O	ge	
County (6) Hudson	ts to				Code (7) USE ONLY)		_	Cur	rent Use (Pri	or if bei	ng demo	olished	d)			
Name of Monitoring Firm H J&S Env. Labs	lired by Building C	wner (8)		ASCN *****					patement Cor y Construc							
Street Address 2333 Rt 22 West								Rt 4	6 West, S	uite 1	4					
City, State, Zip Code Union, NJ									Zip Code New Jerse	ey 07	512					
	***				06-0073		Teleph 973-		No. -4244		Licens 01155					
Start Date (10) Oct 24, 2012		Nov. 3	2012		Date (11)		Name none		SHA Monitor			*				
Occupancy Status During A Facility Closed/Vacate Abatement Performed Other – Describe:	ed During Entire P	eriod of A	batem				Street City, S		Zip Code							
Scope of Work (Check All ⊃ ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Γhat Apply)	production .	lenova emoliti		¥.		E	N G	ull Containmo lini-Enclosure Glovebag Prod lon-Exempted	e cedure					e	
Location o	f		Locati Iormali			Do	scription	of						Abate Ty	ment pe	
Asbestos-Containing M TO BE ABAT In Facility (13)	aterial (ACM) ED	Ma	d Solei intenar odial S (12)	ice/		tos Cont thermal surfa		Materi s insu T, or		(5	mount Specify or LF)		Removal	Repair	Encapsulate	Enclosure
Hallway into Bat	th Room	Yes	No	N/A X		GI	ue Dal	ns		11	30 SF	-			Ф	
Throughout inter				x		20000	& Ma			374	,110	>				
Name of Registered Waste Academy Construction	Н	JDEP Wauler ID 034422	No.	of Wa			Name of G.R.O.	W.S (nage	eme	nt)			
City, State Totowa, New Jersey						100000000000000000000000000000000000000	sal Date 3, 201		City, Stat Morrisv		Α					
Completed by Frank Marino		Title VP C	perat	ions		S	Signature				_	Date Oct.		, 20°	12	

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

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

								7.1		مر		
Date of Notification (1)	October 11, 201	2			Name of Building		erator (2) Mark Contracting	, Inc. 2012 00	20	178	(E)	
Agencies Notified [x] EPA [] DEP		tion Notifica ded Not			Street Address		ox 124	, Inc. 2012 06	75	AMI	D: 43	
[x] DOL [x] DOH	Amer [x] Emer	idment #			City, State, ZipCo		River, NJ 08754	LICE	KSI	WIR	01	
[] DCA	U 53 52 Sept.	ication) ellation			Name of Contact Mark	Tucker		Telephone Number		-		
				FAC	ILITY INFORM	IATION						
0.000,000	batement is Taking idence	g Place (3	3)				Type of Facility (4	School (k-12) Subchapter 8 (ot	herthan	k-12)		
Street Address	Harvard Stree	t					[x]	Other (i.e., priva	te & co	mmerc	ial buil	dings,
City		County	y (6)		County Code (7) (STATE USE ONL	Y)	Square feet 1000 sf	# of Floors	50000000	, Age	0	
Lakewood		Ocea	n				Current Use (Prior Reside	ifbeing demolished)			
Name of Monitoring Firm		Owner ((8)		ASCM No.	Name of	Abatement Contracto		Inc.	- 7/-		
Street Address	1					Street A	idress	Route 9, Unit 61				
City, State, Zip Code						City, Sta	te, Zip Code	River, New Jers	5000000	755-12	271	
Project Manager for Monit		Telephone	Number	· ·	Telephor 732-34	ne Number	License N 00624					
Scheduled Start Date (10) 10/12/12			10/12/		on Date (11)	Name of	OSHA Monitor E.M.S	.L. Analytical				
Occupancy Status During . [X] Faci	Abatement (Check lity Closed/Vacate			iod of Ab	atement	Street A		Stelton Road				
	tement Performed er – Describe	Outside (of Normal	Facility H	ours	City, Sta	te, Zip Code Piscat	away, New Jerse	y 088	54		
Scope of Work (Check all	that apply)				****	[]	Full Containme	nt with Negative Pre	ssure			
" "	for≥3 lf 0 sfor≥260 lf		[] [x]	Renova: Demolit		[] [x]	Glovebag Proce	dure (*) and Non-Friable	Procedu	ire		*
		9							Abat	ement	Туре	
			Is Location	on		Description	n of		В	R	Е	Е
Location of	of		lormally u			bestos-Cor		Amount	R E	E	N	N
Asbestos-Containing N			Solely by	y		Material (A		(Specify SF	M	P	C	C
TO BE ABA		Maint	tenance/C	ustodial		., thermal		or LF)	0	A	A	L
in facility	y		Staff		ins	ulation, su VAT, o			V	I R	PS	O S
(13)			(12)		oth	er miscell			A	4553	U	U
		YES	NO	N/A					L		L E	R E
Exterior			X		Asbestos sidir	ng		800 sf	Х			
									_			
								1,				
	Hauler entracting, Inc.	N	NJDEP Was 2	20223	3	ards of Was	T.R.R.F.	tered Landfill				
City, State Toms River,	New Jersev			Dispos 10/15	al Date /12_	City, St Tullyt	ate own, Pennsylvan	ia _				
Completed by (Print or Ty Nicholas Ferr	pe)	Title Proje	ct Manag		Signature	idas	11e	1	Date 10/1	1/20	12	
						11/1	V		-	-		

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

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

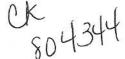
(Pursuant to NJAC 8:60 and 12:120)

70.					0-				
Date of Notification (1) October 11, 20		Name of Buildin		erator (2) view Homes	REC 2012 OCT 15	EH	E	רת	
	cation al Notification ended Notification	Street Address		nion Avenue	′ ∪	BM	10 .		
[] Emc	endment #ergency (including iffication)	City, State, Zipo	Mana	squan, NJ 08736	& LICEN	ONT	ROL	,	
I A DOIL	cellation		ert Wojew	odzki	Telephone Number	1116			
	F	ACILITY INFOR	MATION						U.S.
Name of Facility Where Abatement is Takir Residence	ng Place (3)			Type of Facility (4	School (k-12)				
Street Address 20 East Muriel Av	venue			[x]	Subchapter 8 (c Other (i.e., priv homes, etc.)		and an annual services		ıildings
City	County (6)	County Code (7) (STATE USE ON	ILY)	Square feet 2500 sf	# of Floors		g. Age	60	
Long Beach	Ocean			Current Use (Prior		d)			
Name of Monitoring Firm Hired by Building N/A	g Owner (8)	ASCM No.	Name of	Reside Abatement Contracto Guardi		Inc			
Street Address			Street Ad		un contracting	, me.			
C': 0: 7' 0 1					oute 9, Unit 61				
City, State, Zip Code			City, Sta	te, Zip Code		120/20			
Project Manager for Monitoring Firm	Telephone Numl	ber	Telephor 732-34	ne Number	License 1 00624			271	
Scheduled Start Date (10) 10/24/12	Scheduled Comp	oletion Date (11)	_	OSHA Monitor				•	
Occupancy Status During Abatement (Check	10/26/12 conty one)		Street Ad		L. Analytical				
	ed During Entire Period of	Abatement	Succino		telton Road				
	Outside of Normal Facility		City Stat	te, Zip Code				_	
Other – Describe			City, Stat		way, New Jerse	ev 088	54		
Scope of Work (Check all that apply)			[]		with Negative Pre	Š.,	_		
			ii	Mini-Enclosure	. with Negative Pie	essure			
[] >3 sf or ≥3 lf	[] Reno	ovation	į į	Glovebag Proced	ure				
[X] ≥160 sf or ≥260 lf	[X] Dem	olition	[x]	Non-Exempted (*) and Non-Friable	Procedu	ire		
					T	Ahat	ement	Type	
	Is Location		Description	n of				T	Т
Location of	Normally used		bestos-Con		Amount	R E	R E	E N	E N
Asbestos-Containing Material (ACM) TO BE ABATED	Solely by Maintenance/Custodia		Material (A		(Specify SF	M	P	C	c
in facility	Staff	No.	e., thermal s sulation, sur		or LF)	0	A I	A P	L
(13)	(12)		VAT, or			v	R	S	S
			ner miscella	neous)		A		U	U
	YES NO N/A					L		L E	R E
Exterior	X	Asbestos sidii	ng		2150 sf	Х			
Name of Registered Waste Hauler	NJDEP Waste Haul	er ID No Cubic Y	ards of Waste	Name of Register	ed Landfill				
Guardian Contracting, Inc.	20223	5	35 01 11 4500	T.R.R.F.	va Lanuilli				
City, State Toms River, New Jersey		osal Date	City, Stat	te					\neg
Completed by (Print or Type)	Title 10/2	Signature A	- I ullyto	wn, Pennsylvania		Date			
Nicholas Fernicola	Project Manager) (i	Chol	ten	1		1/201	2	
	*Do not use this for	rm for asbestos licer	sure exemp	ted activities.				_	

RECEIVED

2812 OCT 15 AM 10: 48

Date of Notification 10 9 12 Agencies Notified USEPA X DEP X DCA/DOL X DOH Name of Facility Where Abatement is Taking I MERCK - Building S 5 Street Address	Street 556 M City, S Summ Name Todd	of Building Sharp & Do Address IORRIS AVE State, Zip Conit, NJ 0790 of Contact	Owner of the control	N Type of Facility () School (K-12) () Sub-Chapter 8 (Other that (X) Other (I.e. private & Conbuildings, homes, etc.)	nmercial	er			
556 MORRIS AVENUE	10: 10	2-4-	SF o	f Bldg. 10000	# Floor 3			of Bldg. 50+	8
City	County C State use		Curre	ent Use (prior if being demolish				30+	
SUMMIT, NJ UNION	Otate us	Comy	Journ	one dod (prior it doing domination					
Name of Monitoring Firm Hired by Building Ov AERO ENVIRONMENTAL Street Address	vner	ASCM No.	ACM	e of Abatment Contractor CONSULTING CORP. et Address					
275 ROUTE 10 E. SUITE 220-306			2150	STANLEY TERRACE					
City, State, Zip Code				State, Zip Code					
Oily, State, 219 See									
SUCCASUNNA, NJ 07876	Talaahaaa	Ma		ohone Number	License Number		- 10.0		-
Project Manager for Monitoring Firm	Telephone	NO.	Tele	onone Number	License Humber				
TO BE DETERMINED TO	BE DETER	RMINED	908-	687-1008	00575				
Scheduled Start Date Scheduled Con	mpletion Dat	te	Nam	e of OSHA Monitor					
10 23 2012 10	26 2012		EMS	L ANALYTICAL					
10 23 2012 10 Month Day Year Month Da				et Address					
Occupancy Status During Abatement (Check	Ónly One)		1						
Facility Closed/Vacated During Entire P		tement		WEST 38TH STREET State, Zip Code					
Abatement Outside Normal Facility Hou X Describe: 4:00PM TO 1:30AM Other - Describe:	rs			V YORK, NY 10118					
Scope of Work (Checl Only One)		Abatement							
Demolition				Containment with Negative Pre- Enclosure	essure				
X >3sf or >3lf ≥ 160sf or ≥ 260lf		Х		ebag Procedure					
Renovation	18.8	NAME OF THE OWNER OWNER OF THE OWNER	110000000000000000000000000000000000000	Friable Procedure		TA bak		Tuno	
		on Normally		Describtion of ACM to be	Amount to be Removed	Abate	ment	rype	
Location of ACM Facility	Yes	Custodial S NO	N/A	Removed	(Specify SF/LF)	Rem.	Rep.	Enc.	Encl.
1ST FLOOR - STORAGE AREA	X		I	PIPE FITTING INSULATION	6 FITTINGS	Х			
									-
			-			-			
			-			+			
	_		+-						
Name of Registered Waste Hauler		P Waste ID	No.	Cubic Yds waste	Name of Register			110	
Clean Harbors Env. Services, Inc.	A 100 PM 100 PM 100 PM	PE 16666			Clean Harbors Lo	ne Mo	untair	, LLC	
City, State	TBD	sal Date		City, State of Registered Land Waynoka, Oklahoma	um				
Norwell, MA Completed By (Print or Type)	Title			Signature			Date		
TIMOTHY RYAN	GENE	ERAL MANA	GER	10)				10/9/2	012



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

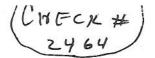
00							Section 1	~ ~	E 11	100		
Date of Notification (1) 10/10/2012			18		Name of Buildi Paulsboro Refi Street Address 800 Billingspor	ng Owner/O	Operatos (2) any	20-	-, ,	CD		
Agencies Notified	T	Notification 7	Type		Street Address	3		4/1	5			
the statement of					800 Billingspor	t Rd	\$58F5		AM	10: 60		
() EPA		(X) Initial No			0'1 0'1-1- 7'-	0-1-		The	**	78		
() DEP		() Amended		n	City, State, Zip		& 1	100	COM	70		
(X) DOL		() Cancelle	a		Paulsboro, NJ	08066	_	MITTI	SIM	ROL		
(X) DOH								T.I.N.	CIME			
() DCA					Name of Conta	act	I	Tel. Nu	ımber	100		1
					Ravi Jarecha					-		
				FACILITY IN								
Name of Facility Where Abater	nent is Ta	king Place (3	3)		Type of Facility							
Paulsboro Refining Company					() School (K-1							
					() Subchapter	r 8 (other th	an K-12)					
Street Address					(X) Other (i.e.	private & c	ommercial bld	gs., hon	nes, etc	: .		
800 Billingsport Rd					0.03246							
					Sq. Feet N/A		# of Floor:	sN/A	١	_		
City (5) Cou	unty (6)		County C	ode (7)	lessees at the same							
	ucester		(State Us		Bldg. Age N/	Α						
					Current Use (p	rior if being	demolished)_	Oil Re	finery			
Name of Monitoring Firm Hired	by Blda	Owner (8)	ASCM No	1			Name of Cor	ntractor	(9)			
Name of Monitoring 1 intri lines	by Diag.	OWNER (O)	Zioomiti	<u> </u>			Kenny Atlant			rvices LL	С	- 1
Street Address					Street Address		reality / talant			111000		
Sileet Address					800 Billingspor							
					City State, Zipo			-		-		
					Paulsboro, NJ							
	r=- T	T-1	the section is		Telephone Nur			Licono	e Numb	or		
Project Manager for Monitoring	Firm	Telephone N	Number			noer			e munic	<u>Jei</u>		
				*	856-224-4392			00857				
Scheduled Start Date (10)		Scheduled (Completion	Date (11)	Name of OSHA							
10/10/12		10/10/12			Kenny Atlantic		Services, LLC					
Occupancy Status During Abar	tement (C	heck only on	<u>e)</u>		Street Address							
() Facility Closed/Vacated Du	ring Entire	e Period of Al	batement		800 Billingspor	t Rd						- 1
() Abatement Performed Outs	side of No	rmal Facility I	Hours -									
					City, State, Zip	Code						
Other - Describe - Removal w	ithin restr	icted work ar	ea in outsid	de areas	Paulsboro NJ (08066						
Source of Work (Check all that	apply)		100.72									
												1
() Demolition (X) Renovatio	n											- 3
() Large Proj. (>160 SF or >2	60 LF AC	M) (X) SM Pr	roj. (>25<16	60 SF or >10 <26	O LF ACM) (Minor Pro	j. (<25 SF or <	10 LF A	CM)			- 1
() Full Containment with Nega	tive Press	ure () Mi	ni-Enclosur	e (X) Glove	bag Procedure							0.000
Location of Asbestos-		tion Normally		Description of		Amount (Specify SF or	LF)	Abate	ment Typ	oe ·	
Containing Material (ACM) in		y Maint./Cus		thermal system				A 10	5-3-1-5			
Facility (13)	Staff? (surfacing, VAT				1				- 1
. do	YES	NO	NA	misc.)	A-50				Rem.	Rep.	Encap I	Enclose
Reliability Building		X		TSI - Pipe Ins	ulation	~15 LF			Х	T		
remaining building												
		-										
	-	+							-	1		
	-	+		-								
	L	NUDER	4-11-1	I	Cubi- Veste	F\\/losts		Norse	of Dor	Landfill		
Name of Reg. Waste Hauler		NJDEP Was	ste Hauler I	<u>D#</u>	Cubic Yards of	vvaste					JEII	
Waste Management, Inc.		17273			< 1 CY			Glouce	ester Co	ounty Lar	Idilli	1
							Dian Date	-		City Ct-1		
City, State							Disp. Date			City, Stat		
South Harrison, NJ							Various			South Ha	irison, r	NJ
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Mail to: NJDEP-DSHW-BRRTP 401 E. State St., PO 414 Trenton, NJ 08625-0414 Telephone 609-984-6620

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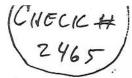
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□ 00n □ 004	justification Cancellation			Name of Conta		00 NO.	Telephone Num	Der		_
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same of Facility Where.	Abatement is Tak	ung Plac	e (3)			Type of Facility	y (4)			
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oject Manager for Mon	itoring Firm		Teleph	none No	Telephone No.	•	License No			
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art Date (10)	Sch			on Date (11)	Name of OSHA	Monitor				
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	L					ORMATION						7
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<u> </u>				Nam	e of Building Ow CK SHARP & DO	mer/Operator (2) HME CORP. / BR	ANDENBURG IN	NDUST	RIAL	SERV	ICES	& ED		
ate of Notification (1)				1					_					
gencies Notified Type Not	ial Notifica	tion	ш Э		Street Address 126 E. LINCOLN AVENUE, P.O. BOX 2000, RY28-414 / 2015 PLAMAN DRIVE City, State, Zip Code RAHWAY, NEW JERSEY 07065 / BETHLEHEM, PA 18015									
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ERCK SHARP & DOHME CORPO	RATION					X Other (ie. p	# of Floors	. bldgs	., hon	nes, e	tc.) g. Age			
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- 0	ounty (6)	-		Cou	nty Code (7)	Current Use (Pri	or if being demol	lished)						
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me of Monitoring Firm Hired by	Building	Owne	er (8)		ASCM No.	PAR ENVIRONM	MENTAL CORPO	RATIC	NC					
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SPAR	TA, NEW J	ERSE	Y 07871			Telephone Num		nse Nu	ımbeı	-				
roject Manager for Monitoring Firm Telephone						845-369-7500	460							
VILLIAM S. KERBEL, CIH		9	73-729-5	549	(44)	Name of OSHA		VIII TO						
xpected State Date (10)		ched	. Comple 10 /	tion Date 1	7 /12	AMERISCI LABORATORIES INC #11480								
Month Day Year	r	Mon	th	Day	Year	Street Address					_			
Ctatus During Abatemet	nt (Check o	only or	ne) wind of At	atement		117 EAST 30Th	STREET							
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825 HIGHWAY 33			15939	Dienos	sal Date	City, State				-				
City, State				10/10-	10/17/12	MONTGOME	RY PA 17752	ato	- 19 J	-1	- 1	/		
FREEHOLD, NEW JERSEY Completed by (Print or Type)	Title				Signature	15		ate	60	1/1	0/	12		
BENJAMIN SANCHEZ	DIR	ECTC	R OF OF	ERATION	is III	-) 			1				

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) MERCK SHARP & DOHME CORP. / BRANDENBURGINDUSTRIAL SERVICE Date of Notification (1) /12 126 E. LINCOLN AVENUE, P.O. BOX 2000, RY28-414 / 2217 SPILLMAN DRIVE Type Notification Agencies Notified RAHWAY, NEW JERSEY 07065 / BETHLEHEM. PA 8015 15 AM 9: 28 Initial Notification EPA Amended Notification DEP Cancellation DOL Telephone Number STOS CONTROL Name of Contact On Hold DOH **EMERGENCY NOTIFICATION** MARY BETH BAKER DCA & LICENSING FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Subchapter 8 (Other than K-12) MERCK SHARP & DOHME CORPORATION Other (ie. private & commcl. bldgs., homes, etc.) Square Feet # of Floors Bldg. Age Street Address 1,500 N/A 126 EAST LINCOLN AVENUE - BUILDING 47 Current Use (Prior if being demolished) County (6) County Code (7) City (5) (STATE USE ONLY) VACANT UNION RAHWAY Name of Abatement Contractor (9) ASCM No. Name of Monitoring Firm Hired by Building Owner (8) PAR ENVIRONMENTAL CORPORATION ENVIRONMETAL HEALTH INVESTIGATIONS, INC. 17 Street Address Street Address 313 SPOOK ROCK ROAD 655 WEST SHORE TRAIL City, State, Zip Code City, State, Zip Code SUFFERN, NEW YORK 10901 SPARTA, NEW JERSEY 07871 License Number Telephone Number Telephone Number Project Manager for Monitoring Firm 973-729-5649 460 845-369-7500 WILLIAM S. KERBEL, CIH Name of OSHA Monitor Expected State Date (10) Sched. Completion Date (11) AMERISCI LABORATORIES INC #11480 10 / /12 /12 10 / 10 Year Month Day Month Day Year Street Address Occupancy Status During Abatement (Check only one) 117 EAST 30TH STREET Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe: City, State, Zip Code MONDAY - FRIDAY 7AM-3:30 PM Other - Describe: NEW YORK, NEW YORK 10016 Full Containment with Negative Pressure Scope of Work (Check all that apply) Mini-Enclor Renovation Demolition Glovebag Procedure >3SF OR LF Non-Friable Procedure 260 LF >160 SF OR Description of Asbestos Abatement Type Is Location Location of REPAIR Containing Material (ACM) Amount Asbestos-containing normally used ENCAPSU ENCLOSUR REMOVAL (Specify solely by (ie. Thermal systems Material (ACM) insulation, surfacing, VAT, SF or LF) Maint/Custodial TO BE ABATED or other miscelfaneous) Staff (12) in Facility (13) Yes No INA 1,500 sf Roof -T100 Tank Surface area of Roof-Square Feet Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Waste Name of Registered Landfill LYCOMING COUNTY RESOURCE MANAGEMENT SERVICES Hauler ID No. 100 FREEHOLD CARTAGE, INC. 447 ALEXANDER DRIVE/ROUTE 15 825 HIGHWAY 33 15939 City, State City, State Disposal Date FREEHOLD, NEW JERSEY MONTGOMERY, PA 17752 10/10-10/17/12

Signature

Completed by (Print or Type) BENJAMIN SANCHEZ

Title

DIRECTOR OF OPERATIONS

Date

No wed

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				Name of Building Ow MERCK SHARP & DOI	HME CORP. I BRA	NDENBUREN	USTRI	ALS	PVIC	CES C	Ю.		
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\				Name of Contact Defendant Number CONTROL									
A DOTT	Y NOT	IFICAT	ION	MARY BETH BAKER			NSI	NG	-				
DCA EMERGENC				FACILITY INFORMATI	ON		-1101	140		-			
At toward in Takin	n Place	(3)	-		Type of Facility	4)							
Name of Facility Where Abatement is Takin	grade	- (-)			School (K-1	2)	12)						
COUNT CORROBATION					Subchapter	8 (Other than K-1 ivate & commol.	hidas i	home	es. etc	:.)			
MERCK SHARP & DOHME CORPORATION				5,000,000	X Other (le. p	# of Floors	biagon		Bldg.	Age			
at t Address	100000				Square Feet 1,500	N/A			5	9			
Street Address 126 EAST LINCOLN AVENUE - BUILDING 4	7				Current Use (Price		shed)				9		
County (6)				County Code (7)	VACANT	il il bellig dollies				-			
UNION				(STATE USE ONLY)	Name of Abaton	ent Contractor	(9)						
- 6 Manitoring Firm Hired by Bullding	Owne	r (8)		ASCM No.	PAR ENVIRONN	ENTAL CORPOR	RATION	1					
ENVIRONMETAL HEALTH INVESTIGATION	S, INC.			17	Street Address								
Street Address					313 SPOOK RO	CK ROAD							
655 WEST SHORE TRAIL				· · · · · · · · · · · · · · · · · · ·	City State Zip C	ode							
Si I 3: Ondo		N 0707	74		SUFFERN, NEV	/ YORK 10901							
SPARIA, NEW	JERSE	elephor	no Nie	mher	Telephone Num	per Licen	se Num	nber					
Project Manager for Monitoring Firm					845-369-7500	460							
WILLIAM S. KERBEL, CIH	9	73-729	-5649	Data (11)	Name of OSHA	Monitor			400				
Expected State Date (10)	Sched		oletion	Date (11) 17 /12	AMERISCI LABO	PRATORIES INC		#11	480				
10 / 10 /12	Mon	10 /		Day Year				-	_	-			
Month Day Year			-		Street Address	OTDEET							
Occupancy Status During Abatement (Check X Facility Closed/Vacated During E			Abate	ment	117 EAST 30TH	STREET					_		
- A Desformed Outside Of	Norma	n raciii	TA I IOR	13 DOGG1111		Codo		_					
					City, State, Zip	NEW YORK,	NEW Y	ORK	10016	ò			
Other - Describe: MONDA1 Monday	Octobe	er 10, 20	012 H		 tainment with Neg	tive Pressure							
Scope of Work (Check all that apply)				Mini-End		20101700							
Demolition	Renov	vation		Claveb:	ag Procedure								
× >3SF OR LF				Non-Frie	able Procedure								
>160 SF OR 260 LF			-	Description of A					bater		ype		
Location of		Location		Containing Mate	erial (ACM)	Amount	REMOVAL	REPAIR	ENCAPSUL	ENCLOSUR			
Asbestos-containing		nally us		(ie. Thermal	systems	(Specify	I S	PA	8	5			
Material (ACM)		olely by		insulation, surfa	cing, VAT,	SF or LF)		70	PS	SS			
TO BE ABATED		t/Custon		or other misce	llaneous)	1	1= 1	- 3	F	동			
in Facility (13)	Yes		V/A		April 1991		+-		-	1			
	ies	IVO				40 SF	X			_			
Builiding 47	X		F	Roof Flashing							200		
Building 47				1 S			+	-	+	\top			
	+							-	+-	+-			
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					Nome of Por	istered Landfill		CF(C)					
Name of Registered Waste Hauler		DEP Wa		Cubic Yards of Waste	I VCOMING	COLINTY RESOL	IRCE M	IANA	GEME	ENT S	ERVICES		
FREEHOLD CARTAGE, INC.	Hau	uler ID N		100	447 AI FX	DER DRIVE/ROL	JTE 15						
825 HIGHWAY 33		15939	9	D' 1 D-40	effy. State				- 52				
City, State				Disposal Date 10/10-10/17/12	MONTGOME	RY , PA 17752		- 1 "	1	-1	12		
EREFHOLD, NEW JERSEY			-	Signature	11/1/	D	ate	11)//	01	11		
Completed by (Print or Type)	itle	OR OF	OPE	PATIONS	7) 1/1			10	11	4	10		
	IRECT	OR OF	OPER	RATIONS SIGNAL	700				1	7	-		

		NO	TIFICA	State of No ATION OF ASI ant to NJAC 8	RESTOS A	BATEMENT						
			(Pursu			ner/Operator (2)	NDENERIC IN	DUST	RIAL	SER	CES	co.
ate of Notification (1)				Circuit Addre						115 V		
gencies Notified Type Notificat						IUE, P.O. BOX 20	2012 OCT	15	A	19:	19	
DEP Amende	tification d Notificat	ion#2	2	City, State, 2 RAHWAY, N	VEW JERS	EY 07065 / BET						
X DOL Cancella X DOH On Hold				Name of Co		15	elephobe Numb	45	CU	NII	30F	1.6
DCA EMERG	ENCY NO	TIFICA	TION	MARY BETT		NC.		لتاء	371	NG		
lame of Facility Where Abatement is Ta	aking Plac	e (3)		PACIFITY III	CICIO	Type of Facility (School (K-1	2)					
MERCK SHARP & DOHME CORPORATION	NC					Subchapter X Other (ie. p	8 (Other than K- rivate & commcl.	12) bldgs	., hor	nes, e	c.)	
Street Address						Square Feet 1,500	# of Floors N/A			Bldg	. Age 59	
126 EAST LINCOLN AVENUE - BUILDING				County Cor	de (7)	Current Use (Price	r if being demol	ished)				
DAHWAY		(0)		(STATE USE		VACANT Name of Abatem	ent Contractor	(9)				
Name of Monitoring Firm Hired by Buil ENVIRONMETAL HEALTH INVESTIGAT	ding Own IONS, INC	er (8)			17	PAR ENVIRONM	ENTAL CORPO	RATIO	ON			
Street Address						Street Address 313 SPOOK RO	CK ROAD					
655 WEST SHORE TRAIL City, State, Zip Code			74			City, State, Zip C SUFFERN, NEW	ode YORK 10901					
SPARTA, N Project Manager for Monitoring Firm		EY 078 Telepho		mber		Telephone Numb	per Licer	nse Ni	ımbei	Г		
WILLIAM S. KERBEL, CIH		973-72				845-369-7500 Name of OSHA	460		-			
Expected State Date (10) 10 / 10 /12	Sche	d. Com 10 /	pletio	n Date (11) 17	/12	AMERISCI LABO	RATORIES INC	:	#1	1480		
Month Day Year	Mon			Day	Year	Street Address						
Occupancy Status During Abatement (Cl X Facility Closed/Vacated Durin	o Entire P	enoa a	f Abate	ment		117 EAST 30TH	STREET					
Abstament Performed Outsid	e of Norma AY - FRID	al Facti	ity Hou	rs - Describe.		City, State, Zip C	ode NEW YORK,	NIEVA/	VOR	(1001	6	
<u> </u>	•••				Trull Conta	ainment with Nega		MEAA	IOK	(1001	•	
Scope of Work (Check all that apply) Demolition	Reno	vation			Mini-Encl							
× >3SF OR LF >160 SF OR 260 LF				×	Non-Frial	ole Procedure		_				
Location of		Locatio		Descr	ription of A ning Mater	sbestos-	Amount	Z		Abate III	_	уре
Asbestos-containing Material (ACM)	100	nally us olely by		(ie.	Thermal s	stems	(Specify	REMOVAL	REPAIR	Š	Ş	
TO BE ABATED		nt/Custo			tion, surfac her miscell		SF or LF)	\\	77	ENCAPSUL	ENCLOSUR	l
in Facility (13)		No I	N/A					+	╀	+	100	
Builiding 47	x		R	oof Flashing			40 SF	X	+	+	+-	
			_			40-10-27	-	+	+	+	-	
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				Cubic Yards of	f Waste	Name of Regis	tered Landfill					EDV/ICES
Name of Registered Waste Hauler		DEP Water ID I		10		LYCOMING C	DUNTY RESOU	RCE N	MANA	GEME	NIS	ERVICES
FREEHOLD CARTAGE, INC. 825 HIGHWAY 33			No.	10	10	LYCOMING CO	DUNTY RESOU ER DRIVE/ROU	RCE N TE 15	VIANA	GEME	NI S	ERVICES
FREEHOLD CARTAGE, INC.		iler ID I	No.	10 Disposal Date 10/10-10/17/1	0	LYCOMING C	OUNTY RESOU ER DRIVE/ROU RY , PA 17752	RCE N TE 15	VIANA	GEME	NI S	-/10

		NOT	TIFICATION	tate of New Jerse I OF ASBESTOS NJAC 8:60-7 an	ABATEMENT								
Date of Notification (1)					wner/Operator (2 OHME CORP. / Bi) RANDENBL	JRG INDU	STRAE	ERVIC	5 0.			
10 / 9 /12			Char	-1 0 4 4									
Agencies Notified Type Noti	fication		126	E. LINCOLN AVI	ENUE, P.O. BOX	2000, RY28	2012'OF	217 SPH	MAN	RIVE			
	al Notificatio	135 July	City,	, State, Zip Code					7111	2.13			
	ended Notific cellation	cation	RAH	IWAY, NEW JEF	RSEY 07065 / BE	THLEHEN	PA 18018	S CTAA					
E 1202	Hold		Nam	ne of Contact		Telephone	A S.R.F.	1102	CUN	ITROL			
DCA X EME	RGENCY N	IOTIFICAT	ION MAR	RY BETH BAKER		•	_	' ICE	4314	IG			
			FACI	LITY INFORMAT									
Name of Facility Where Abatement i	s Taking Pl	ace (3)			Type of Facility								
MERCK SHARP & DOHME CORPOR	ATION					r 8 (Other t			4_ \				
Street Address					Square Feet	private & co			S, etc.) Bldg. A				
126 EAST LINCOLN AVENUE - BUILL	DING 47				1,500	NA			59				
11-77.73 (1-7) (1-7)	inty (6)			nty Code (7)	Current Use (Pri	or if being	demolished	d)					
Name of Monitoring Firm Hired by E		ner (8)	(STAT	E USE ONLY) ASCM No.	Name of Abate	ment Conti	ractor (9)						
ENVIRONMETAL HEALTH INVESTIG				17	PAR ENVIRONM			ION					
Street Address					Street Address								
655 WEST SHORE TRAIL City, State, Zip Code					City, State, Zip C								
	, NEW JER	SEY 07871			SUFFERN, NEV		901						
Project Manager for Monitoring Firm		Telephone			Telephone Num	COLUMN TO THE COLUMN TO THE	License N	lumber					
WILLIAM S. KERBEL, CIH		973-729-5	649	700 HONO CO.	845-369-7500		460						
Expected State Date (10)	Sch		etion Date		Name of OSHA Monitor AMERISCI LABORATORIES INC #11480								
10 / 10 /12 Month Day Year	M	10 /	Dav 17	7 /12 Year	AWIERISCI LABO	DRATORIE:	SINC	#1148	so				
Occupancy Status During Abatement					Street Address								
X Facility Closed/Vacated Du Abatement Performed Out:					117 EAST 30TH	STREET							
	NDAY - FRII			scribe.	City, State, Zip C	Code							
				7-100 mm 200 V	1		RK, NEW	YORK 10	016				
Scope of Work (Check all that apply)					ainment with Nega	tive Pressu	re						
Demolition >3SF OR LF	Rend	ovation		Mini-Enck	Procedure								
X >160 SF OR 260 LF					le Procedure								
Location of	1000000	Location		Description of As				Aba	tement	Туре			
Asbestos-containing		mally used		Containing Materi	200	Amou	nt R	R 2	回				
Material (ACM) TO BE ABATED	100	olely by nt/Custodia		(ie. Thermal sy nsulation, surfaci		(Speci	Y S	REPAIR	5				
in Facility (13)	0.77	incusional Italii (12)	'} '	or other miscells		SPULL	REMOVAL	REPAIR	ENCLOSUR				
		No NA	1		,		_ '		Ä	_			
Surface area of Roof-Square Feet	x		Roof -T10	0 Tank		1,500 sf	x						
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									_				
													
Name of Registered Waste Hauler	N.ID	EP Waste	Cubic Yan	ds of Waste	Name of Registe	red Landfill			+-				
FREEHOLD CARTAGE, INC.		er ID No.	Junio I and	100	LYCOMING COL			ANAGEM	ENT SE	RVICES			
825 HIGHWAY 33		15939			447 ALEXANDE					CANADA CANADA (CANADA)			
City, State FREEHOLD, NEW JERSEY			Disposal D 10/10-10/1		City, State	DA 43355							
Completed by (Print or Type)	Title		1 10 10-10/1	Signature /	MONTGOMERY	, PA 1//52	Date		1	1.			
BENJAMIN SANCHEZ		R OF OPE	RATIONS	1/12	Date 18/9/12								

MO# 20142496552

Date of Notification (1)				Name	of Buildin	g Owner/Operator	r (2)	ECEIVEL	2			
10/	11 /	12						- OF I A E !	J			
Agencies Notified	Type Notification		_	****	e Trinh		2012 no	P 18				
□ EPA	☑ Initial							CT 15 AM 10:	45			
☑ DOLWD	Amended				hard Stre State, Zip							
☑ DHSS	Amendment	#		1000	200 01200		~ JBC	TOS CUNTR	Al			
DCA (NUAC 5:33 8)	☐ Emergency		3		stown, N		Ot 1	Telephone Nur	· .			
(NJAC 5:23-8)	justification) Cancellation			Second second				i elephone Nur	nber			
				-	e Trinh			1				
No. of E. Ill. 180				FA	CILITY I	NFORMATION						
Name of Facility Where A	Abatement is Tak	ing Place	(3)				Type of Facilit					
Private home							School (K-	12) r 8 (Other than K-1	0)			
Street Address							Other (i.e.,	private and comme	∠) ercial h	uildin	as	
6 Orchard Street							homes, etc		. 0,0,0	unun	95.	
City (5)							Square Feet	# cf Floors	В	ldg. /	Age	
Morristown, NJ 07960												
County (6)				Cour	ity Code (7)	(STATE USE ONLY	Current Use (I	Prior if being demol	ished)	22.0	-87	
Morris	115 11 B-31-7-					4-20						
Name of Monitoring Firm	Hirea by Building	g Owner i	(8)	ASCM	No.	Name of Abater	ment Contractor (9)				
						Gr Tech LLC						
Street Address						Street Address						
						576 Valley Rd	#283					
City, State, Zip Code						City, State, Zip	Code					
			_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Wayne, NJ 074	470					
Project Manager for Moni	itoring Firm		Tele	ephone	No.	Telephone No.		License No.				
				2021-00-00-0		973-638-1777		01127				
Start Date (10)		eduled C				Name of OSHA	Monitor					
		10 /		<u> </u>	12_	Envirovision C	Consultants,Inc					
Occupancy Status During						Street Address	onountaines, into			-		
Facility Closed/Vacate	ed During Entire I	Period of	Abate	ment		20-21 Wagaray	w Road, Bldg .#	± 34 Δ				
Abatement Performed Time of Abatement:	Outside of Norm		Hou	rs - Des	cribe	City, State, Zip		- J4A				
		PM/	FIVI_		AM	Fair Lawn, NJ	07410					
Scope of Work (Check all	that apply)											
		M Ra	novati	OB		Full Co	ntainment with N	egative Pressure				
>3 sf or >3 If = 160 sf or >260 If			molitic				nclosure ag Procedure					- 1
								lon-Friable Procedu	ire			-
1		7.0	Locat						Ab	atem	ent T	ype
Location Asbestos-Containing N			lorma d Sole		0-6-	Description	of	80		T	_	
TO BE ABA		Ma	intena	nce/	ASDE:	stos Containing M ., thermal systems	laterial (ACM)	Amount	err	Repair	nca	ncl
IN Facilit	у	Cust	odial	Staff?		surfacing, VA		Specify SIF or LF)	Remova	a:	squ	Enclosure
(13)			(12)	1	1	other miscellan	eous)	32.3 2.32.7	<u> </u>		Encapsulate	6
		Yes	No	N/A							(U	
Basement				\boxtimes	Pipe insu	ılation		100 LF	X	П	П	П
												\exists
									분			
				12					\perp \sqcup	Ш	Ш	
Name of Design	- 11- 1		Ц									\Box
Name of Registered Wast	e Hauler		NJE	EP Waste	Hauler ID No.	Cubic Yards of Was	ste Name of Regi	stered _andfill				
Gr Tech LLC			0	03378	5	TBD	T.R.R.F. Inc				20	1
City, State	33					Disposal Date	City, State			T 2000		
Wayne, NJ 07470						TBD	Tullytown, P	PA .				
Completed By (Print or Ty	pe) Ti	tle				Signature/	A		ate			
N.Jevtic	O	vner			75.0	1.1	he Ner		·	10		
SB-41						1		10/	/11/20	12		

4 CANCELLATION

No check	- 1				- 10		0)				P	27	1 100			
Date of Notification (1)				Building O Propert		erator (2)				* 4 :	·- (E	V	En	
Agencies Notified Type Notification		-	Street Ad							201	Z OC	71	5	AM II	2.	
EPA Initial DEP Amended DOL Amendment#				e, Zip Cod NJ 071				1 86		458	ES	105	CO	Mr	0	
Emergency (inc justification) DCA Emergency (inc justification) Cancellation	luding	1 1	Name of O		-				Telephone Number NSING						TUL	
			FACIL	ITY INFO	RMATIO	N								,		
Name of Facility Where Abatement is Taking F Deltech Resin Co. Street Address	Place (3)						☐ s	f Facility (4 chool (K-12 ubchapter 8	2)	er than k	(-12)			9		
49 Rutherford Street							× o	ther (i.e. pr c.)	ivate 8	k comme	ercial I				5,	
City (5) Newark		96		(1)	***		Square 13400		# of	Floors		60 60	dg. Aq)+	ge		
County (6) Essex			County C	ode (7) SE ONLY)		_	Curren	t Use (Prio	r if bei	ng demo	olished	i)				
Name of Monitoring Firm Hired by Building Ow Envirovision Consultants Inc.	mer (8)		ASCM 0079	No.				ement Cont truction &			n Inc).				
Street Address 20-21 Wagaraw Rd. Bldg. 34 A	Street Address						Address	46 Suite	3D							
City, State, Zip Code Fair Lawn NJ 07410				, 52		City, S	tate, Zip					-				
Project Manager for Monitoring Firm			Telephon			Teleph	phone No. License No. 3 256 7010 00666								-	
Fred Larson	shadula		pletion D		No. of the last			A Monitor		00000						
10/12/12	0/14/1	2	ipietion c	vale (11)		Bako	Cons	truction &	& Res	Restoration Inc.						
Occupancy Status During Abatement (Check	W es estent						Address Route	s 46 Suite	3D							
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Normal Other – Describe: Fri 4pm-11pm Sat 8am	Facility	Hours					tate, Zip	Code 07512		~	-227					
Scope of Work (Check All That Apply)						1010	140	07012			7					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova emolit				×	Mini	Containme i-Enclosure vebag Prod i-Exempted	e edure	_						
	le	Locati	ion										Abate	ment		
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	Normal d Sole intena (dial S (12)	ly ly by nce/		tos Conta thermal s	systems ing, VA	faterial s insula T, or		(Amount Specify F or LF)		Removal	Repair	e Encapsulate	Enclosure	
1st Fl. Tank Room Tank AR1&AR2	103	X	18/7		Tank	Insula	ation		2	50 SF		X				
2nd Fl. Tank Room Tank AR1&AR2		х		7	Tank	Insula	ation		2	50 SF		X				
2nd Fl. Tank Room Tank 58&59					Tank	Insula	ation		(60 SF		X				
3rd Fl. Tank Room Tank 58&59	Х			Tank	Insula	ation		6	80 SF		X					
Name of Registered Waste Hauler						Yards		Name of			ndfill					
Bako Construction & Restoration Inc.		lauler ID 0889	140.	of Was		G.R.O.W.S. Inc.										
City, State Totowa NJ	e e	VI		Dispos 10/15/	/12		City, Stat Morrisv		A							
Completed by Goran Kojic	Title Vice	Pres	ident		Si	gnatur	4	Con	There lolichiz							

Date of Notification (1) 09/27/2012		Name of Building Owner/Operator (2) Deltech Properties Street Address 49 Rutherford Street City, State, Zip Code Newark NJ 07105 Name of Contact Asit Dutta													
Agencies Notified Type Notification X EPA X Initial		4 '	Street Add 49 Ruth	dress nerford S	Street				a e e e	UCT 1	5 AM	n:			
DEP Amended Amendment #_	-hdi			e, Zíp Cod NJ 071					<u>े द</u>	STOS	CONI	Da.	6		
Emergency (in justification) DCA Emergency (in justification) Cancellation	cidaling		Name of O Asit Dur			4			l Tele	ephone N	wilder?	· · · · ·	-		
			FACIL	ITY INFO	RMATIC		_	7 - 11 - 7	4)				-9-		
Name of Facility Where Abatement is Taking Deltech Resin Co.	Place (3)						s	of Facility (4 chool (K-1) ubchapter	2)	er than K-	12)		Street, and a		
Street Address 49 Rutherford Street			Other (i.e. private & commercial build etc.)								cial build				
City (5) Newark		E	Square Feet # of Floors Bldg. 7 13400 3 60+								ge				
County (6) Essex		County C	ode (7) SE ONLY)			Curren	nt Use (Prid	or if bei	ng demoli	shed)					
Name of Monitoring Firm Hired by Building Ov Envirovision Consultants Inc.		ASCM 0079	No.				ement Con			Inc.	3.0.0.0				
Street Address		0013			Street								\dashv		
20-21 Wagaraw Rd. Bldg. 34 A					265 F	Route	46 Suite	3D							
City, State, Zip Code Fair Lawn NJ 07410				0 .		City, State, Zip Code Totowa NJ 07512									
Project Manager for Monitoring Firm Fred Larson			Telephone No. Telephone No. License No. 973 636 9145 973 256 7010 00666												
	Schedule 10/14/1		npletion D	Date (11)				A Monitor struction	& Res	storation	Inc.				
Occupancy Status During Abatement (Check	Only On	e)					Addres								
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma	eriod of A	baten	nent					46 Suite	3D						
Other – Describe: Fri 4pm-11pm Sat 8ar	n-5pm St	ın 8an	n - 1pm		_			07512							
Scope of Work (Check All That Apply)							1								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	December 1	enova emolit				Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure									
	r :						1 1401	Lxemple	u () ai	u Non-i ii	abicito		ement		
	1 1000	Locat Iorma	000000		n-	!		ia .				Ту	ре		
Location of Asbestos-Containing Material (ACM)	Use	d Sole	ly by		tos Conf	scription taining N	laterial		10	mount			g.	ш	
TO BE ABATED In Facility	1,000,000	odial S	1010 MISSISSES	(i.e.		systems cing, VA		tion,		Specify F or LF)	Remova	Repair	cap	nclo	
(13)		(12)				niscellar		5			oval	air T	Encapsulate	Enclosure	
	Yes	No	N/A)	- ·					50 SF	-	<u></u>	Ö	- 1	
1st Fl. Tank Room Tank AR1&AR2		Х				(Insula					X	_			
2nd Fl. Tank Room Tank AR1&AR2		X				(Insula				50 SF	Х	_	_		
2nd Fl. Tank Room Tank 58&59	2nd Fl. Tank Room Tank 58&59 x						ation			30 SF	X	<u> </u>			
3rd Fl. Tank Room Tank 58&59	Х				c Insula	ation		S. S. S.	30 SF	X		<u> </u>			
Name of Registered Waste Hauler	1355	JDEP W lauler ID		of Wa	Yards			1	ered Land	ITIII					
Bako Construction & Restoration Inc		0889	-	10	sal Date		G.R.O.		inc.						
City, State Totowa NJ					10/15	5/12		City, State Morrisville PA							
Completed by Goran Kojic							4	Cont	the		Date 09/27/	12			



DOVID-FAIL	MATRI
COURTERY.	AND DEDTY
FEDGICAL	FRED FILL

Date of Notification (1)				Name	e of Buildin	g Owner/Operato	r (2)	41/2000	- 1	E	n				
	0/12/12				Dullulli	5on opolato	US EPA	15	4		***				
Agencies Notified	Type Notification	on		Name of Building Owner/Operator (2) US EPA Street Address 2890 Woodbridge & ye, OS City, State, Zip Code Edison, NJ 08837											
DEP DOL	Amended Amendmen	+ #		City,	State, Zip (Code Edison NI 09927									
		(includin	g [Edison, NJ 08837								
M DOH □ DCA	justification Cancellation				e of Contac	t ery (Chenega	Telephone Number								
						ORMATION	- Ciccui,		-	4.1	/=				
Name of Facility Where	e Abatement is Tal	king Place	e (3)				Type of Facility	(4)				_			
	US EPA -	Build	ling #	#209			School (K-1	2)	21						
Street Address	2890 Wo	odbrid	lge A	Subchapter 8 (Other than K-12) Other (i.e., private & commercial buildings homes, etc.)							i,				
City (5)	Ed	lison, N	JJ				Square Feet 50,000SF	# of Floors	В	ldg. A	Age 70				
County (6)						7) (STATE	process and the same of the sa	rior if being demoli							
	liddlesex			- ACCIONA	ONLY)		l	offices/labs	:						
Name of Monitoring Fir (8)	m Hired by Buildin MECS	g Owner		ASCM	No.	And the second s	nent Contractor (9)) mental Service	es Tr	nc					
Street Address	WIECS					Street Address	vens Environi	mental Service	23, 11	ic.					
	PO Box 3	41					PO I	PO Box 322							
City, State, Zip Code		T 0051	_		- 1	City, State, Zip 0		Illentown, NJ 08501							
Project Manager for M	Crosswicks, N	1 0031		ephone	No	Telephone No.	Alleniow	License No.				_			
	Veisgarber Jr.				8-4070	17.50	59-9688		049	3					
Start Date (10)		neduled C	A	or complete to the	the second secon	Name of OSHA	Monitor	_1							
10/15/12			0/17	/12			M	ECS							
Occupancy Status Du						Street Address	PO F	30x 341							
☐ Facility Closed/Vac ☐ Abatement Perform						City, State, Zip Code									
Other - Describe:						Crosswicks, NJ 08515									
Scope of Work (Check	all that apply)		enovat emolitic		4	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure									
			Locatio			Abatem									
Location		Used	Solei	y by		Description o	f		-	Ту	Je T				
Asbestos-Containing TO BE AB		С	ntenan ustodia		Asbesi (i.e.,	tos Containing Ma thermal systems	terial (ACM) insulation,	Amount (Specify	Rer	Repair	Enc	Enc			
IN Facil (13)			Staff? (12)			surfacing, VAT other miscellane	, or	SF or LF)	Remova	air	Encapsulate	Enclosure			
(10)		Yes	No	N/A			,				ulate	ଜ			
Microbiolo	ogy Lab			×		floor tile/ma	stic	70 SF	×						
Microbiolo	ogy Lab	_		×	Pip	e Insulation V	Vrap/Cut	170 LF	×						
		-							-						
Name of Registered W	aste Hauler			JDEP \		Cubic Yards	Name of Regis	tered Landfill	1						
Stevens Enviror	nmental Servi	ces Inc	. +	lauler ID 182	290. 292	of Waste 2 CU		T.R.R.F., Ir	ıc.						
City, State		20 20 20	-1			Disposal Date	City State	7	25 70						
0	Allentown,					10/17/12		Tullytown,	PA_						
Completed By Mahlon E. S		itle Pı	oiec	t Mar	nager	Signaryte/	1//	Date	10/1	2/12)				
Triumon D. S			OJOU	· IVIAI	iug CI	-1 /1 /			_ 0/ 1	auri A.A		_			