2h1876		NOTH	CATIO	tate of Ne N OF ASE L TO NJAC	BESTOS	ABATE	MENT 0)	A Company of the Comp) 造	<u> </u>	<u>E</u>		W	
Date of Notification (1) 10/08/2018				of Building ne Olsor		Operator	(2)	1 4		OCT	1	5 21	018	
Agencies Notified Type Notification EPA Initial			Street	Address					ACC		*1,5			_
X DEP Amended Amendment Emergency (Millbu	ate, Zip C	7041				HARMAN TO SHAPE OF	700 100	MIGNESS TO			
DOH justification) DCA Cancellation			Joann	of Contact ne Olson	1	ION.		ļ T ———	elenhon	e Nur	nher			
Name of Facility Where Abatement is Taking House	Place ((3)	FAC	ILIT INF	ORIVIAT	ION	Type of Fac	ility (4)		-				
Street Address							School Subcha Other (etc.)	(K-12) apter 8 (Ot i.e. private	her than	n K-12 mercia	2) al buil	dings	, hom	es,
City (5) Mllburn							Square Feet N/A	1.000	of Floor: /A	S		Bldg. /	Age	
County (6) Essex				Code (7) USE ONLY)		Current Use House	(Prior if b	eing den	nolish	ied)			
Name of Monitoring Firm Hired by Building C N/A	wner (8)	ASCI	M No.			of Abatement Abatemen		or (9)					
Street Address						V 55 0 0 0 5 5 5	Address osengren A	venue						
City, State, Zip Code						City, S Toto	tate, Zip Code wa, NJ 075	12						
Project Manager for Monitoring Firm			Telepho	ne No.			one No. 345-8685		Licen 0131		D.			
Start Date (10) 10/25/2018	Schedu 10/26/		npletion	Date (11)			of OSHA Mon Abatement							
Occupancy Status During Abatement (Check			12				Address Osengren A	Venue			No. 12 Comp			
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other – Describe: Occupied	al Facilit	y Hours	nent			City, S	tate, Zip Code wa, NJ 075							
Scope of Work (Check All That Apply)						1000	, NO 075	12						
≥3 sf or ≥3 lf ≥ 160 sf or ≥260 lf		Renova Demolit				×	Full Conta Mini-Enclo Glovebag Non-Exem	sure Procedure						
		Locati					THE LACT	pied () ai	10 14011-1	Habi		Abate	ement	[
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	Normal ed Sole intenar todial S (12)	ly by nce/	Asbesi (i.e.	tos Conta thermal surfac	scription aining M systems sing, VA niscellan	aterial (ACM) insulation, T, or		Amount Specify F or LF)	ß	Remova	Repair	e Encapsulate	Enclosure
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Basement		X				VAT		3	00 SF		Х			
Name of Registered Waste Hauler		l ht	IDEDIA											
D&S Abatement, Inc.		Н	JDEP W auler ID)996		of Was		Thomas o	of Regist te Mana			PA			
City, State Totowa, NJ					Dispos TBD	al Date	City, S Morr	State isville, F	'A	1				
Completed by Oliver Hegedis	Title Proje	ct Ma	nager		Si	gnature				Date 10/	e 08/2	018		

Do not use this form for asbestos licensure exempted activities.

Print Form

Ch 1845	1	NOTIF	CATION	ate of New NOE ASB TO NJAC	ESTOS	ABATE	MENT				<u> </u>	<u>_</u>		$\underline{\mathbb{V}}$	
Date of Notification (1) 10/08/2018				f Building Chanley		Operator	(2)		17		00	1	5 8	2018	
Agencies Notified Type Notification			Street A						-	1	DCC.	200	/- /- t	20.00	_
X EPA X Initial Amended Amendment #		1	City Str	ate, Zip Co	do					P	90.0 TWO	and the firm			
X DEP Amended Amendment # Emergency (i	t	_		all Park,		324									
■ DOH justification Cancellation	riciuuirig			f Contact Chanley					Tel	ephone	e Num	ber			
Cancellation				LITY INFO	ORMATI	ON					_	_			
Name of Facility Where Abatement is Taking House	Place (3	3)					Type	of Facility (4)							
Street Address							×	School (K-12) Subchapter 8 Other (i.e. pri	(Oth				dings,	home	es,
City (5) Kendall Park								etc.) re Feet	# of N/A	f Floors	3	1 320	ldg. A	ge	
County (6) Middlesex				Code (7) USE ONLY)	5. 		Curre	nt Use (Prior se	if bei	ng dem	nolish	ed)			
Name of Monitoring Firm Hired by Building O N/A	wner (8)		ASCN	ИNo.				ement Contr ement, Inc		(9)					
Street Address							Addres oseng	s Iren Avent	ıe						
City, State, Zip Code								p Code J 07512							
Project Manager for Monitoring Firm			Telepho	ne No.			one No 345-86			Licen 0131).			
10/24/2018	10/25/2	2018	npletion	Date (11)				A Monitor ement, Inc.							
Occupancy Status During Abatement (Check							Addres	s ren Avenu	10						
Facility Closed/Vacated During Entire Per Abatement Performed Outside of Normal Other – Describe: Occupied	eriod of A	Abatem Hours	ent			City, S	tate, Zi	p Code J 07512	-						
Scope of Work (Check All That Apply)						1010	wa, in	0 0 / 5 / 2							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit				×	Min Glo	Containmen i-Enclosure vebag Proce n-Exempted (dure					2	
	1	Locati				·		2.011.00	7 411	. 11011	· · · · · · · · · · · · · · · · · · ·		Abate	ement	
Location of Asbestos-Containing Material (ACM)	Use	lormali d Sole	ly by	Asbest		scription aining M		(ACM)	A	mount			1 9	ре	
TO BE ABATED In Facility (13)	10000000000	intenar odial S (12)			thermal surfac	systems sing, VA	s insula T, or			pecify or LF)	ı	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A									a	-	ate	Ге
Kitchen		Х				VAT			10	00 SF		Х			
Name of Registered Waste Hauler		IN	JDEP W	/aste	Cubic	Yards		Name of Re	eniste	red I a	ndfill				
D&S Abatement, Inc.		Н	auler ID 0996		of Was			Waste Ma	,ē			PA			
City, State Totowa, NJ					Dispos	al Date	,	City, State Morrisville	e P	Δ	71.7				
Completed by Oliver Hegedis	Title Proje	ct Ma	nager		M1520011M10	ignature	gy				Date 10/		2018		

Print Form

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Date of Notification (1) 10/08/2018				of Building f Abuhar		/Operator	(2)		13.3	(CT	1	5 2	018	-
Agencies Notified Type Notification I limital I Amended Amendment				Address tate, Zip C	odo					ACRI	ENTO		X10.		
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DOH justification) Cancellation				of Contact f Abuhar	nud				Tele	phone	Numh	er			
Name of Facility Where Abatement is Takin	n Place (3)	FAC	ILITY INF	ORMA	TION	Т	5 5 92 /							
House	g i lace (3)					Т	e of Facility (School (K-1							
Street Address							×	Subchapter Other (i.e. p etc.)	8 (Othe	r than comm	K-12) nercial	buil	dings	, hom	ies,
City (5) Elizabeth							Squ N/A	iare Feet	# of N/A	Floors		1	ldg. A	Age	
County (6) Union			County (STATE	Code (7) USE ONLY)			rent Use (Priduse	or if bein	g dem	olished	j)		100000	
Name of Monitoring Firm Hired by Building N/A	Owner (8)	ASCI	M No.		Name D&S	of Ab	atement Cor atement, In	tractor (9)					
Street Address					-,5	Street 11 P		ess ngren Aver							
City, State, Zip Code						City, S	tate,	Zip Code NJ 07512	iue						
Project Manager for Monitoring Firm			Telepho	one No.		Teleph 973-3	one	No.	1.4	Licens					
Start Date (10) 10/22/2018	Schedul 10/24/2		npletion	Date (11)		THE RESERVE OF THE PARTY OF THE		SHA Monitor Itement, In					-		
Occupancy Status During Abatement (Chec	k Only Or	ne)				Street									
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe: Occupied	Period of all Facility	Abatem / Hours	ent			City, S	tate,	ngren Aven Zip Code	iue						
Scope of Work (Check All That Apply)						I otov	wa,	NJ 07512							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	Renova Demoliti				×	M	ull Containme ini-Enclosure lovebag Proc on-Exempted	edure					9	
Location of		Locati							() and	1101111	, iddic i		Abate	ement pe	t
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	d Solel intenar todia! S (12)	y by ice/		tos Con therma surfa	escription taining M I systems icing, VA miscellan	ateria insu T, or	lation,	(Sp	ount ecify or LF)		Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A								1	<u>a</u>		ate	re
Basement		Χ			Pipe	Insulat	tion		90	LF	2	ζ			
Basement		X				VAT			750) SF	2	ζ			
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Name of Registered Waste Hauler D&S Abatement, Inc.		Ha	IDEP Wauler ID 1996	777	Cubic of Wa TBD	Yards ste		Name of R Waste M				A			
City, State Fotowa, NJ					1	sal Date	1,	City, State							1.77
Completed by Dliver Hegedis	Title	ct Ma	nager			Signature	HO)	7			Date 10/08	2/2	040	75	

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Date of Notification (1) 10/08/2018					f Building O Maldona		perator	(2)		: 4	OCT	15	201	8	1
Agencies Notified	Type Notification			Street A	ddress						ACREST;	2.71	-	-	
EPA DEP DOL	Initial Amended Amendmen				ite, Zip Cod k, NJ 071				age to a						
DOH DCA	Emergency justification) Cancellation	,		Esther	f Contact Maldona					Те	lenhone M	·····- èr			
Name of Facility Where	Abatement is Takir	ng Place (3	3)	FACI	LITY INFOR	RMATI	ON	Туре	of Facility	(4)					
House Street Address								S S X	chool (K- ubchapte	12) r 8 (Oth	ner than K- & commer		ldings	, hom	es,
City (5) Newark								Square N/A		# c	of Floors A	100	Bldg	Age	
County (6) Essex	=			County (Code (7) USE ONLY)			Curren		ior if be	ing demoli	shed)			
Name of Monitoring Firm N/A	n Hired by Building	Owner (8)		ASCM	l No.				ement Co ment, I		r (9)				
Street Address							1 12 111	Address	ren Ave	nue					
City, State, Zip Code		W						tate, Zip wa, NJ	Code 07512						
Project Manager for Mor	nitoring Firm			Telephor	ne No.		U.S. Charles	one No. 345-86			License 01311	No.			
Start Date (10) 10/18/2018		Schedule 10/19/2		mpletion (Date (11)				A Monitor ment, Ir		distribution of the second				
Occupancy Status Durin Facility Closed/Vac			20	ment				Address	en Ave	nue					
Abatement Perform Other – Describe:	ed Outside of Norr	nal Facility	/ Hour	S		_		tate, Zip	Code 07512		anasan sərilin				
Scope of Work (Check A	II That Apply)	12000													
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		Yes	No	N/A								1 20		ate	9
Furnace I	Room		X			Pipe	Insula	tion			9 LF	X			
	3.00														
Name of Registered Was D&S Abatement, Inc			H	NJDEP W Hauler ID 0996	No.	Cubic of Was				- 15 Teles	ered Landf gement (
City, State Totowa, NJ					1119	Dispos TBD	al Date		City, Sta Morris		A				
Completed by Oliver Hegedis		Title Proje	ct Ma	anager	l_	S	ignature	/_			36	ate 0/08/	2018		

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Date of Notification (1)					N	ame	of Buildin	g Ów	ner/Operator (2)		11.64	00	1	5 7	2018	
10/10	/	18	<u></u>			Bria	an Macke	еу .					2	51	7 6	13	_
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(NJAC 5:23-8)	justification		Juding		N	ame	of Contac	t				Telephone	Numbe	er			
	Cancellat	ion				Bria	an Macke	Э у									
						FAC	CILITY IN	IFOF	RMATION								
Name of Facility Where Abate	ement is T	aking	Place	(3)						Type of	Facility (4	4)		2008			
Residence											ol (K-12)						
Street Address										Subc	hapter 8	(Other than vate and co	K-12)	al bui	Idina	•	
											es, etc.)	vate and co	minero	ai bu	iuirig	5,	
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Island Heights										1800	sf	1		6	5		
County (6)						Coun	ty Code (7)(STA	TE USE ONLY)	Current	Use (Pric	or if being de	emolish	ed)			
Ocean										Resid	lence						
Name of Monitoring Firm Hire	ed by Build	ling C	wner (8)	AS	CM I	No.	Na	me of Abateme	ent Contra	actor (9)						
N/A								G	Guardian Co	ntracting	g, Inc.						
Street Address								Stre	eet Address						_		
								1	889 Route 9	, Unit 61							
City, State, Zip Code		100						City	y, State, Zip Co	ode							
								Т	oms River,	New Jer	sey 087	55					
Project Manager for Monitorin	ng Firm			Te	elepho	one I	No.	Tel	ephone No.			License N	No.				
								7	32-349-9932			00624					
Start Date (10)	S	ched	uled C	omp	oletion	Dat	te (11)	Nar	me of OSHA N	lonitor			- 200			_	
10 /23 /1	8	1	0_/		25	/_	18	E	.M.S.L. Ana	lytical							
Occupancy Status During Aba	atement (0	Check	only o	ne)					eet Address								
☐ Facility Closed/Vacated Di						nt		1	056 Stelton								
☐ Abatement Performed Out	tside of No	rmal	Facility	/ Ho	ours -	Des	cribe	City	y, State, Zip Co	ode		2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0					
Time of Abatement:	AM	PN	1/	_P	M	/	AM	-	iscataway, I		sev 088	54					
Scope of Work (Check all that	t apply)								•••						7 T		
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			□ Re ⊠ De	10000					☐ Full Cont ☐ Mini-Enc ☐ Gloveba ☐ Non-Exe	losure Procedu	ıre						
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Toms River, New Jerse	y								0/25/18	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Pennsylva	ania				
Completed By (Print or Type)		Title							Signature			8	Date	9	,	,	
Nicholas Fernicola		Pr	oject	Ma	anag	er				1		1	/	01	101	18	

(h 95)	MO			(Pi	ursua	nt to/NJ	AC	8 60 and 5:1	6)					Andrew Control
Date of Notification (1)					Name	e of Buildin	ig Ov	wner/Operator	(2)	1 1 01	OT 1	5 2	018	
	10 /	18			Dis	santis Co	ntra	acting, LLC	3 50	135	09	3		İ
Agencies Notified	Type Notific	cation	- 221		Stree	t Address				ASSE	SIEG (F()[. G.
⊠ EPA	☐ Initial				313	3 Halyard	Ro	ad			LICEN		-15.789_5	i i sa amir a
☑ DOH	Amende Amendr	070			City,	State, Zip	Code	е				•		
□ DCA	☐ Emerger	_		1	Ort	ley Beac	h, N	J 08751						
(NJAC 5:23-8)	justificat	ion)			Name	of Contac	ct			Telephone Nu	mber			
	☐ Cancella	ation			Fra	ınk Disar	ntis			732-749-60	009			
					FA	CILITY IN	NFO	RMATION		-North-				
Name of Facility Where	Abatement is	Taking	Place	(3)					Type of Facility	(4)				
Residence									School (K-12					
Street Address									Other (i.e., pr		12) iercial bi	uilding	gs,	
City (5)							_		Square Feet	# of Floors	B	dg. A	ge.	
Lavallette									800 sf	1		65	90	
County (6)					Cou	nty Code (7)(ST	ATE USE ONLY)	Current Use (Pri	or if being demo	lished)			
Ocean									Residence		o.my			
Name of Monitoring Firm	Hired by Buil	ding O	wner ((8)	ASCM	No.	Na	ame of Abatem	ent Contractor (9)					
N/A							(Guardian Co	ntracting, Inc.					
Street Address							Sti	reet Address						
							1	1889 Route 9), Unit 61					
City, State, Zip Code							Cit	ty, State, Zip C	ode					
							1	Toms River,	New Jersey 087	755				
Project Manager for Mon	itoring Firm			Tele	phone	No.	Te	lephone No.		License No.				
								732-349-9932		00624				
Start Date (10)						te (11)		me of OSHA N						
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Occupancy Status During							Str	reet Address						
☐ Facility Closed/Vacate	ed During Enti	re Peri	od of	Abate	ment	88	1	1056 Stelton						
Abatement Performed Time of Abatement: _	Outside of N	ormal l	Facility //	Hour -NA	s - Des	cribe AM	Cit	y, State, Zip Co	ode					
						/AIVI	F	Piscataway, I	New Jersey 088	354				
Scope of Work (Check all	that apply)							□ F O						
≥3 sf or ≥3 lf			☐ Re					☐ Mini-End	tainment with Neg	ative Pressure				
≥160 sf or ≥260 if		9	⊠ De	molitic	n			Gloveba	g Procedure					
			Is	Locat	ion			⊠ INO∏-Exe	mpted (*) and Nor	1-Friable Proced				
Location	77.5		١	lorma	lly			Description of	ıf			atem		
Asbestos-Containing I TO BE ABA		1)	Use	d Sole	ely by	Asbe	stos	Containing Ma	terial (ACM)	Amount	Removal	Repair	Enc	Enclosure
IN Facilit				odial 3	Staff?	(I.e		ermal systems surfacing, VAT,		(Specify SF or LF)	SVOL	air	apsi	losu
(13)		-		(12)		_		ther miscellane		31 01 21)	=		Encapsulate	Гe
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Name of Registered Wast	e Hauler			_	JDEP \	Masta	Cui	hio Varda of	N(D			Ш	Ш	
Guardian Contractin					auler II	No.	1000000	bic Yards of iste	Name of Regist T.R.R.F.	ered Landfill				
City, State	3,				20223		3 Dia		. X10820015180508					
Toms River, New Je	ersev						CO-CON	posal Date 0/25/18	City, State	Donnaul				
Completed By (Print or Ty		Title					-		Tullytown,	Pennsylvania		100715		
Nicholas Fernicola	PC)	AVES	nient	Mana	200=			Signature	11 /		Date /	1		
CO. 44		FIG	oject	walla	ger				·hel		10/1	110	8	

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Date of Notification (1)			- 1	Name	of Brilding	g Owner/Operator ((2)	HE I OCT	1.5	-20	18	-111
	18		la			Demolition	-)	3	50	90)	
Agencies Notified Type Notifi	cation			Street	Address			Activities	111		A. Say	C.
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☑ DOLVVD ☐ Amenda				City, S	state, Zip C	Code						
□ DCA □ Emerge		ludina	ı	Avo	on by the	Sea, NJ 07717						
(NJAC 5:23-8) justifica				Name	of Contac	t		Telephone Numb	er			
☐ Cancell	ation			Fra	nk Lurch	I		732-740-981	4			
				FAC	CILITY IN	IFORMATION						
Name of Facility Where Abatement is	Taking	Place	(3)				Type of Facility	(4)				
Residence							School (K-12					
Street Address				- 311.				3 (Other than K-12) rivate and commer		ilding	s,	
City (5)							Square Feet	# of Floors	Ble	dg. A	зе	_
Eatontown							2500 sf	2		65		
County (6)				Cour	ty Code (7)(STATE USE ONLY)		ior if being demolis			-	
Monmouth					,, oodo (,	((01/11/2 002 01/21)		: /	ricu)			- 1
Name of Monitoring Firm Hired by Bu	Idina O	wner ((8)	ASCM	No	Name of Abateme		esiden u		7		
Guardian Contracting, Inc.	iding O	wilei (.0)	AOOM	140.		ntracting, Inc.					
Street Address		-				Street Address	ntracting, inc.					
1889 Route 9, 9 Unit 61							11-14-04					
						1889 Route 9						
City, State, Zip Code Toms River, New Jersey 0875	5					City, State, Zip Co Toms River,	^{ode} New Jersey 08	755				
Project Manager for Monitoring Firm			Tele	phone	No.	Telephone No.		License No.				
Nicholas Fernicola			7:	32-349	-9932	732-349-9932	2	00624				
Start Date (10)	Schedu	ıled C	omple	tion Da	te (11)	Name of OSHA N	Monitor				-	_
	-	7.0		_ / _	18	E.M.S.L. Ana	lytical					
Occupancy Status During Abatement						Street Address						
 ☐ Facility Closed/Vacated During En ☐ Abatement Performed Outside of I 						1056 Stelton						
Time of Abatement:AM						City, State, Zip Co						
						Piscataway,	New Jersey 08	854				
Scope of Work (Check all that apply)							tainment with Neg	gative Pressure				
☐ ≥3 sf or ≥3 lf ☑ >160 sf or >260 lf		∐ Re ⊠ De	novati			☐ Mini-End	closure a Procedure					
		<u> </u>	mones					n-Friable Procedur	e			
		ls	Local	ion					Ab	atem	ent Ty	vpe
Location of			Norma			Description of				-		
Asbestos-Containing Material (AC TO BE ABATED	M)		d Sole			stos Containing Ma		Amount	em	Repair	nca	nclo
IN Facility		Cust		Staff?	(1.6	., thermal systems surfacing, VAT		(Specify SF or LF)	Remova	=	psu	Enclosure
(13)	-		(12)		1	other miscellane		,			Encapsulate	e)
exterior		Yes	No	N/A				2000 - 5	57			
Constitution of the Consti						os siding		3000 sf	\boxtimes	Ш	Ш	Ш
interior					asbesto	os floor		50 sf				
				Ш	L							
Name of Registered Waste Hauler			100	JDEP \		Cubic Yards of	Name of Regis	stered Landfill				
Guardian Contracting, Inc.			٦	20223		Waste 5	T.R.R.F.					
City, State Toms River, New Jersey						Disposal Date 10/24/18	City, State Tullytown,	Pennsylvania				
Completed By (Print or Type)	Title					Signature	1	-9	to			
Nicholas Fernicola	1 2535	oject	Man	ager		Signature	Fact	Da	te 10	(c/	18	

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Date of Notification (1)				-	Т	Name	e of Buildi	ng O	wner/Operator	(2)		1				W100	111
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	pe Notific	cation	**************	-		Stree	t Address							Val 41 Till Server			+
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Name of Facility Where Abar	tomont is	Taking	Disa	- /0		FA	CILITY	NFC	DRMATION	·							
Hossain Residence	tement is	raking	Place	e (3,)					Type of Facility	307						
Street Address										School (K-1	2) 8 (Oth	er than	K-12)				
										Other (i.e., p	orivate	and cor	nmer	cial bu	uilding	js,	
City (5)			-02201020			×				homes, etc.		£ []		- [-	.1 . 0		
Blackwood										Square Feet 2,400	1000	of Floors 3	5	1	dg. A 80	ge	
County (6)						Cour	nty Code	(7)(\$1	TATE USE ONLY)	Current Use (P			molici		00		
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Name of Monitoring Firm Hire	ed by Buil	lding C	wner	(8)	A	SCM	No.	N	ame of Abatem	ent Contractor (9)						
Management & Enviro					;					onmental, LLC							
Street Address						11/1-11/19			treet Address						-		
PO Box 341									623 Cutler Av	venue							
City, State, Zip Code								Ci	ity, State, Zip Co	ode							
Chesterfield, NJ 08515									Maple Shade	, NJ 08052							
Project Manager for Monitorin	ng Firm			T	elepi	hone	No.	Te	elephone No.		Lic	ense N	0.				
Bill Weisgarber							-4070		856-755-0099	li .	(00842					
Start Date (10)10							te (11) 18	1	ame of OSHA N EMSL Analyt				***************************************				
Occupancy Status During Ab								St	reet Address								
□ Facility Closed/Vacated D	uring Enti	re Per	iod of	Aba	teme	ent			200 Route 13	0 North							
Abatement Performed Out								Ci	ty, State, Zip Co	ode					-100		
Time of Abatement:		PIV	1/		IVI		AM	1	Cinnaminson	, NJ 08077							
Scope of Work (Check all tha	t apply)											_		-			
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			⊠ Re □ De		atior ition	1			☐ Mini-Enc ☐ Glovebag					9			
					catio					21				Ab	ateme	ent T	уре
Location of Asbestos-Containing Mate	erial (ACM	1)			nally olely		Ashe	etne	Description o Containing Ma	f		Amount		Re	Re	Ш	Ш
TO BE ABATED		.,			nanc			e., th	ermal systems i	nsulation,		Specify		Remova	Repair	cap	Enclosure
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(10)			Yes	N	0	N/A		0	thei miscenanet	ous)						te	
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Name of Registered Waste Ha	auler					EP V		100570000	bic Yards of	Name of Regis				L J			
Freehold Cartage						5939		3	aste 3	Fairless La	ndfill						
City, State								M. San	posal Date	City, State							
Freehold, NJ	<u> </u>							1	0/26/2018	Morrisville	, PA						
Completed By (Print or Type)		Title						-	Signature		1080 Hotel		Date				
Christina Lynch		Vic	e Pr	esic	dent	of C	peratio	ns	(make				10	10	AV		

Emery Line	fication Il Inded Idment #_ gency (including Cation)	Notification of ASB (Pursuant to AJAC) Name of Building O Street Address City, State, Zip Code Name of Contact	when Operator (2)	City 08	OCT 15 2018 SPESTOS CONTROLE LICANTAGE 243 phone Number
Name of Facility Where Abatement is Ta	Ising Diagram	FACILITY INFOR	MATION	6	c4-213-149
L 311-	lace (3)			pe of Facility (4)	
City (5)				School (K-12) Subchapter 8 (Other th Other (i.e. private & co	an K-12) mmercial buildings, homes, etc.)
County (6)	City		Squa	are Feet # of FI	oors Bidg Age
Cape May	1	County Code (7)	- Cum	ant Hay (D.)	1
Name of Monitoring Firm Hired by Buildin	IS Ourse (8)	(STATE USE ONLY)		ent Use (Prior if being de	molished)
	E Owner (8)	ASCM No.	Name of Abat	ement Contractor (9)	
Street Address		1	1 All 1	is thetone	1) 11 1101
Ciny Sense 7: 6			Street Address	7 1	1 LEWINITRY: / (1)
City, State, Zip Code			1/212 1	NELLINE TON	Au
Project Manager for Monitoring Firm			City, State, Zip		
solution of the second of the		Telephone No.	Telephone No.	ico NJ	Esto)5
Start Date (10)				// Lice	ense No.
110/7.0/18	Scheduled Compl	letion Date (11)	Name of OSHA	4-6-716	EV070
Occupancy Status During Abatement (Check (1 11/60	118	- Since of OSHA	Monitor	
Facility Closed Managed D.		1 . /	Street Address		
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Normal Other – Describe:	eriod of Abatement		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	r acmy Hours		City, State, Zip C	ode	
Scope of Work (Check All That Apply)			•		
☐ ≥3 sfor≥3 If .☐ ≥160 sfor≥260 If	Renovation Demolition	1	☐ Gloveba	ntainment with Negative nclosure ng Procedure	1
	Is Location	1	Non-Ex	empted (*) and Non-Fria	ble Procedure
Lecation of Asbestos-Containing Material (ACM)	Normally				Abatement
TO BE ABATED	Used Solely by Maintenance/	Asbestos Contain	ription of ing Material (ACM	n	Туре
In Facility (13)	Custodial Staff?	(dictinal system	s insulation, surfaci	ng (Specify	
	(12)	other mis	cellaneous)	SF or LF)	Enclosur Encapsula Repair
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Name of Registered Waste Hauler					+
Au. 1 - 11 a	NJDEP 1 Hauler II		Name	05P	
City, State	2054	U No. of Waste	, vanc	of Registered Landfill	
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Completed by		Disposal Dat		tate	0
JEAN TILL	Vi Ritzident				ند
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ASB-41 (R-06-08)			J.,	1 (110/10

DState of New Jersey	Print-
(Pursuant to NJAC 8:60 and 12:120)	
Date of Notification (1) Name of Building Owner/Operator (2) Nick Fano Private Home	18
Agencies Notified Type Notification Street Address	
EPA DEP Initial City, State, Zip Code	
DOL Amendment # Harvey Cedars N.I 08008	
Emergency (including justification) DCA DOH	
FACILITY INFORMATION	
Name of Facility Where Abatement is Taking Place (3) Nick Fano Private Home Type of Facility (4)	
Street Address School (K-12) Subchapter 8 (Other than K-12)	
Other (i.e. private & commercial buildings, etc.)	homes,
City (5) Square Feet # of Floors Bldg. A	ge
2 001	
Ocean County (6) County Code (7) (STATE USE ONLY) Current Use (Prior if being demolished) House	
Name of Monitoring Firm Hired by Building Owner (8) N/A ASCM No. Name of Abatement Contractor (9) Porpose Inc.	
N/A Pernaco Inc. Street Address Street Address	
PO Box 329	
City, State, Zip Code City, State, Zip Code	
Project Manager for Monitoring Firm Telephone No. Telephone No. License No.	
Telephone No. Telephone No. License No. 856-753-9800 00727	
Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 10/19/18 10/26/18 Same	
Occupancy Status During Abatement (Check Only One) Street Address	
X Facility Closed/Vacated During Entire Period of Abatement	
Abatement Performed Outside of Normal Facility Hours Other – Describe: City, State, Zip Code	
Scope of Work (Check All That Apply)	
≥3 sf or ≥3 lf	
≥160 sf or ≥260 lf Demolition Pull Containment with Negative Pressure Mini-Enclosure Glovebag Procedure	
Non-Exempted (*) and Non-Friable Procedure	
Is Location Abate Location of Normally Description of Tyr	
Asbestos-Containing Material (ACM) Asbestos-Containing Material (ACM) Maintenance/ Maintenance/ Asbestos Containing Material (ACM) Amount	
In Facility Custodial Staff? Enclo	
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Exterior break away board x Transite 600 SF x	W
hottom of house	-
X X	_
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Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill	
United Roll Off Hauler ID No. of Waste 22459 G.R.O.W.S.	
City, State Disposal Date City, State	
Elm NJ 10/26/18 Morrisville PA 19067	
Completed by Title Signature Date Anthony T Perna President 10/10/18	

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Date of Notification (1)		NOT		State of a ON DE A Int 19 NO				et.		E C			V [
10-8-2019			Name	of Buildin			n (2)	_		OCT	1 5	20)18	100
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Emergency	(includin	g	LC	ollin.		L)OC	9	Nei	u Je	rse	u C	8	08	2
DCA justification Cancellation			Mame C/C	of Contac	1 0 t	Cie	(m)		i Tolo	nhone M	mher			
Name of Facility Where Abatement is Takin	n Diana	(0)	FA	CILITY IN	FORMAT	ION								-1
Residential D	() \e		777				Typ	e of Facility						No. 12.2 April 12.2 Ap
Street Address	we	111	10				H	School (K Subchapi	(-12) er 8 (Othe	r than IC.	121			100
City (5)					28 28 WOOT 18 S			Other (i.e.	. private &	commen	ial bui	ldings	s, hom	es,
Lallingswo	od						Squ	are Feet	# of 1	laors		Bldg.	Age	
County (6)			County	Code (7)			Cun	rent Use (P	nor if being	i D	herh	90) yr	5
Name of Monitoring Firm Hired by Building	Junor /2	1		USE ONL	Y)	- Date of the second		Resi	den	4in1				ALTHOUGH A MARIE
Quality Environmental Concepts	Jenses (C	2	Non			Name Qual	of Ab	atement Co nvironme	ontractor (S	3)				500
Street Address 1053 North Tuckahoe Road						Street	Addn	ess						
City, State, Zip Code								th Tucka	hoe Roa	d				essionel majorgi
Williamstown, New Jersey 08094								Zip Code own, Nev	v Jersev	08094				Activities production
Project Manager for Monitoring Firm Edward Knorr		9000	Telepho	ле No. 29-1166		Teleph	опе Р	Vo.		icense N	lo.			- Townson
Start Date (10)	Schedul	ed Cor		Date (11)		856-6		1166 HA Monitor	2	1086				- Eventual
10-18-2018	10	7 - 9		2018				nvironme		cepts				and the state of t
Occupancy Status During Abatement (Check					- I	Street /								aran aran
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Scope of Work (Check All That Apply)	ealt	CSto	are T	ransh	CLion	Willia		own, Nev	/ Jersey	08094				Name of the last
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Location of Asbestos-Containing Material (ACM)	Use	iormali d Sole	ly by	- Anha-	Des	cription (of .				-	Ty	pe	
TO BE ABATED In Facility		intenar Iodial S		(i.e.	tos Conta thermai s	systems	กรแล	i (ACM) ation,	Amo (Spe	cify	Re	7	Enc	9
(13)		(12)			other m	ing, VAT iscellane	, OF 30US)		SFo	(LF)	Remova	Repair	Encapsulate	Enclosure
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Name of Registered Waste Hauler	1		DEP W		Cubic Y	ards		Name of	Registered	f andau	-	1	- devices	
Quality Environmental Concepts			auler ID 710	No.	of Wast	е		Sale	m Cal	enty	So	lid'	Mas	ite
City, State Williamstown, New Jersey		ī			Disposa	l Date		City, State	e LSC	<u>rnd</u>				Section and the section of the secti
Completed by	Title					3D nature		All	OUO.		-			
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Date of Notification (1) 10/01/2018				Building Ov HUBER	vner/Operato	r (2)			OCT	1	5 2	018	
Agencies Notified Type Notification		Str	reet Ad	ldress				A	GREST	00.0	CONT	TONI	2
EPA Initial Amended Amendment		Cit	tv. Stat	e, Zip Code							Cit.		, 60
DOL Amendment Emergency		1			AKE NJ. 07	7677	•						
DOH justification) Cancellation	, ,	100000		Contact HUBER				Teleph	one Num	ber		22017.0	
Name of Facility Where Abatement is Taking	a Place (3)	\	FACIL	ITY INFOR	MATION	T =							
PRIVATE	y Flace (5))				Тур	e of Facility (4 School (K-12	37					
Street Address							Subchapter 8 Other (i.e. pr	(Other th	nan K-12)	l buile	dinge	home	90
City (5)						× Sau	etc.)	# of Flo			_		35,
WOODCLIFF LAKE NJ						30		2	1015	- 7.55	ldg. A	age	
County (6) BERGEN				ode (7) SE ONLY)		Cur N/	rent Use (Prio	r if being d	lemolishe	ed)			
Name of Monitoring Firm Hired by Building (N/A	Owner (8)	,	ASCM	No.			eatement Cont EAST ENV		ENTAL	LLC).		
Street Address					Street		ess st. STREE	г					
City, State, Zip Code							Zip Code	U.					
Drainat Managas for Marita in 5		1 = 1				2500000	BERGEN I	300.00					
Project Manager for Monitoring Firm			lephone		Teleph 201-		No. -0642		ense No. 300				
Start Date (10) 10/02/2018	Scheduled 10/03/2		etion D	ate (11)	1		SHA Monitor PROBE IN	C					
Occupancy Status During Abatement (Check					Street								-
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe:	Period of Al al Facility	batement Hours	t			10000000	RTY STRE	ET					
Scope of Work (Check All That Apply)					MET	UCI	HEN NJ088	40					_
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Charles and the Control of the Contr	enovation emolition			×	M G	ull Containmer lini-Enclosure lovebag Proce on-Exempted	dure				9	
10	7,576,000	ocation					J. Exempled	() and No	II-I Habie		Abate	ement	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Mair Custo	ormally I Solely b ntenance/ odial Staff (12)	i	(i.e. the	Description Containing Mermal systems surfacing, VA her miscellar	fateria s insu T, or	lation,	Amou (Speci SF or L	ify	Remova	Repair	e Encapsulate	Enclosure
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Name of Registered Waste Hauler FRI STATE		10 COSTS 10 COSTS	EP Was er ID N	o. of	ubic Yards f Waste TBD		Name of Re			E IN	IC.		
City, State BRONX				D	isposal Date		City, State	SBURG	OHIO				
Completed by CARLOS ESQUIVEL	Title MANA	GER			Signature	PE		-PC	Date		018		

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Date of Notification (1) 10/05/2018					of Building T ENER			r (2)			00	CT 1	5 2	018	
Agencies Notified	Type Notification	1			Address CENTRA	AL AVE			V		ACRES	stron i	7	15 / 17 17 / 17	<u></u>
DEP DOL	Initial Amended Amendmen Emergency justification	(including	_	BOG Name	of Contact	603					ephone		The Top	**	
☐ DCA	Cancellation	n			EL CRE					64	6-223-	-0042			
Name of Facility Where	Abatement is Takir	na Place (3	11	FAC	ILITY INF	ORMAT	ION	Tun	e of Facility	74)					
PRIVATE Street Address			,					l lyb	School (K-	12)					
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City (5) BOGOTA NJ.			200), P. L.					Squ 3,0	are Feet 00	# of	Floors		Bldg 10	Age 7	
County (6) BERGEN					Code (7) USE ONLY	0		Curr	rent Use (Pri	ior if bei	ng demo	olished)			
Name of Monitoring Firm N/A	Hired by Building	Owner (8)		ASCI	M No.				atement Co			ΓAL LI	.C.		
Street Address							Street 1126		ess st. STREE	Т					
City, State, Zip Code								Zip Code BERGEN	N.I						
Project Manager for Mon	itoring Firm		Telepho	ne No.		Teleph	one N	14.1		License 01300					
Start Date (10) 10/06/2018		Schedule			Date (11)		Name	of OS	HA Monitor						
Occupancy Status During	Abatement (Ched						Street	Addre	ess)				
Facility Closed/Vaca Abatement Performe Other – Describe: _	ted During Entire ed Outside of Norm	Period of A nal Facility	bate: Hour	ment s			City, S	tate, Z	STREET Zip Code						
Scope of Work (Check Al	I That Apply)						NY.N	IY.							
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City, State BRONX NY.	* 100 miles **					10000000	al Date		City, State	9					
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CARLOS ESQUIVEL		MANA	AGE	R		. 3	12	Em	resfirm T	nitt	-	Date 10/05	201	3	
						/	/		/	7					

Print Form

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Date of Notification (1)	•			N	20000		Owner/Operator (2	\$ S	11.4	makedone	- Annual Person		-	7
10)10/18	{	07			MS.	. EL	HTBRAS	MENS	- HA					4
Agency Notified /	Type No	otification		8	Street A	ddress			00	CT 1	5	201	18	1
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Name of Facility Where	Abatemer	t is Taking Plac	œ (3)				1	Type of Facility	(4)					
MS	FLI Z	AGETH	Ma	ENS	HA		1	☐ School (K-12	3)					
Street Address	-	.0_ ,,						☐ Subchapter 8	(Other than K-12)					
Cuoti i dai oco		ÇC.	8			, .	-		ivate & commercial	building	js,			
						N 0		homes, etc.) Square Feet	# of Floors	Bldg.	Δσο			-
City (5)		155				100					S	0		
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County (6)						Code (7)	(STATE USE		rior if being demolis	hed)				
1) 21	NO			(ONLY)		dr.	Ke	SIDENCE					
Name of Monitoring Firm		Building Owne	r /	SCM	No.		Name of Abateme	ent Contractor (9	9)					
(8)	3.5.57.7-37.57 .	-				- 1	Best Rem	oval In	c					
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		*					Hackensa	ck, N.J	. 07601					
Project Manager for Mor	nitoring Fi	m	Te	ephon	e No.		Telephone No.		License No.					
							201-329-	7444 -	00388					
Start Date (10)		Scheduled Co	moleti	on Dat	e (11)		Name of OSHA N	lonitor						
10/23/18		10/26					Omega E	nvironm	ental					
Occupancy Status Durin	a Abatem						Street Address							_
Occupancy olders built	g / water	-	, 0,			i i	280 1111	yler St	35					
☐ Facility Closed/Vacati						i i	City, State, Zip Co				-	-	-	_
☐ Abatement Performed ☐ Other – Describe: 6	d Outside	of Normal Faci	lity Hou	ITS M	-				N T O 7	606				
				• •			S. nac	Kellsack	, N.J. 07	000			_	_
Scope of Work (Check a □ ≥ 3 sf or ≥ 3 lf □ ≥ 160 sf or ≥ 260 lf	ill that app	oly)			Reno		☐ Mini-E	nclosure bag Procedure	Negative Pressure	20.				
							- noil-	() 41			Al	pate		it
			27.5	Locati	77.72						L_	Typ	e	
Locati	on of		The Secretarian	d Sole	- 1		Description o	٤						
Asbestos-Containi		al (ACM)	Ma	intenar	nce/	Asbe	stos Containing Ma	terial (ACM)	Amount (Specify		70	_	Encapsulate	m
TO BE A			ç	ustodi	374	(i.e	., thermal systems surfacing, VAT,		SF or LF)		Removal	Repair	apa	Enclosure
(1				Staff?		*	other miscellane		·		OVA	alr	ula	sur
				(12)				-0.000000			-		te	0
			Yes	No	N/A			1000						
BASEMENT	-				1		VAT		A50 9	SP	×			
0,.00					-									
			-		-							1		
					-							-	-	-
Name of Registered Wa			0.00		Vaste H	lauler	Cubic Yards of	Name of Reg	stered Landfill					
Best Remo			ID	No. 17	109		Waste 3 2/207		a Enterpr	ises	,	LI	ı C	
City, State							Disposal Date	City, State						
Hackensa	ck,	N.J. 07	601				10/24/18	Wayne	sburg, Oh		88	}		_
Completed by		Title					Signature /			Date	1	1	0	
J.Maiorand)	Est	ima	tor			1 1/10	سمم	2	10	10	11	Ď	
ASB-41					n for as	hastns li	icensure exempted			- /			_	

Ch K	5# 3435			8	-comp	^ n -		and the second s		rings for the second		
\bigcirc	3435,	NOT	TEIC	ATIO	ate of N	ew Jersey		MEGE		\mathbb{V}		In
	4	/NO I	(P	ursua	nt to Nul	BESTOS ABAT AC 8.60 and 5:4	BINENI	1-3Pg. 1	ar Tashus	TOWNS		Parties of
Date of Notification (1)			-	Name	e of Buildin	g Owner/Operator (2)	OCT 1	5	2018		
9 /	12 / 1	8		Ve	rizon We	stwood C.O.						9
Agencies Notified EPA	Type Notification	l .		100000000	t Address			ASPESTOS	CCI	13	1.7.	
⊠ DOLWD					5 Broadw		l.	1			e (A)	18
⊠ DOH	Amendment #	±1-10/9	9/18	1 1000	State, Zip (¥.			
DCA	☐ Emergency (i	ncludin	g		Isdale, No							
(NJAC 5:23-8)	justification) Cancellation				nzo Contac			Telephone Numb				
			-	1				973-951-0542				
Name of Facility Where A	hatement is Takir	a Place	2 (3)	FA	CILITYIN	IFORMATION	T (F					
Verizon Westwood		ig Flace	3 (3)				Type of Facility School (K-1	/S S				
Street Address								8 (Other than K-12)				
175 Broadway							Other (i.e., phomes, etc.	private and commerc	cial bu	uilding	js,	
City (5)							Square Feet	# of Floors	BI	ldg. A	ge	
Hillsdale							32,775	3	1	+-50		
County (6) Hillsdale				Cou	nty Code (7	()(STATE USE ONLY)		rior if being demolis	ned)	3 - 3 - 3 - 3 - 3		
Name of Monitoring Firm	Llies d b. D. ildi-	0	(0)	10011			The same district from the contract	mmunications	9555500			
TTI Environmental,	Figure and state of the state o	Owner	(8)	ASCM	No.	Name of Abateme	5.0	9				
Street Address	inc						VIRONMENTA	AL, INC.				
1253 North Church	Street					Street Address 1123 BEAVE	PETPET					
City, State, Zip Code	0.1.001			-		City, State, Zip Co						
Moorestown, NJ 08	057					BRISTOL, PA						
Project Manager for Moni			Tele	phone	No.	Telephone No.	10007	License No.	-			
Kris Smith	decide (C. Stade) Could be decided from the			09-313		215-788-6040		00509				
Start Date (10)	Sche	duled C	omple	tion Da	te (11)	Name of OSHA M	lonitor					
				<u>3</u> / .	18	BRISTOL EN	VIRONMENTA	L, INC				
Occupancy Status During						Street Address						
☐ Facility Closed/Vacate ☐ Abatement Performed					cribo	1123 BEAVER						
Time of Abatement:	AMP	M/ <u>5:00</u>	PM- <u>2</u>	:00AM	cribe	City, State, Zip Co BRISTOL, PA						
Scope of Work (Check all	that apply)											_
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			novat			☐ Mini-Encl	Procedure					
		Is	Loca	ion	T	☐ Non-Exe	inpled (*) and No	on-Friable Procedure	-	-1		in and
Location		1	Vorma	lly		Description of	f			atem		-
Asbestos-Containing N TO BE ABA	Material (ACM)	1	d Sol		Asbe	stos Containing Mat	terial (ACM)	Amount	Removal	Repair	Encapsulate	Enclosure
IN Facility		1	todial	Staff?	(i.e	., thermal systems i surfacing, VAT,		(Specify SF or LF)	ova	air	nsde	osui
(13)			(12)	T	-	other miscellaned		,	-		ilate	e e
Basement Boiler Roo		Yes	No	N/A						_		
Basement Boiler Roo						Boiler Insulatio	n	90 SF				
Basement Boiler Room					Duct Ins			90 SF				
Basement Boiler Rooi					Pipe Fit			60 LF				
Name of Registered Wast			Ц.	IDEB !	Pipe Ins		IN	315 LF				
SERVICE TRANSPO		C	1000	JDEP \ auler IE		Cubic Yards of Waste	Name of Regis					
	OROUF, IN	٠.		20000	1		MINERVA	LANUFILL				

Dillan DeCaro ASB-41 DD18079

NEW CASTLE, DE

Completed By (Print or Type)

City, State

Disposal Date

Signature

TBD

City, State

WAYNESBURG, OH

Date

20990

Title

Estimator

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

	. #																	
(C)	3447)	NOT		ours	ION	t to No	BAS	STOS AB :60 and 5	16	5)		E G	E			State and the second	1
Date of Notification (1)					V			2	vner/Operato	or (2	2)		OCT	15	20	18	111	-//
9 /	12 /	18				Ver	izon Wes	stwo	ood C.O.								- Calaboration	-
Agencies Notified	Type Notific	ation			S	Street	Address						ASSESTO	0.00	No.	WI I	-	
☑ EPA ☑ DOLWD						175	Broadw	ay			L		:10		-1-7.	9 348	iko	
☑ DOLWD	Amendm	Ti	- 10/	9/18	В		state, Zip C											
□ DCA	☐ Emergen	ncy (in					sdale, N		642									
(NJAC 5:23-8)	justificati	9000			N		of Contac	5					Telephone N					
	Cancella	tion					zo Cont					\perp	973-951-	0542				
Name of Facility When A	h - 4 4 ! - =	T-1-1	<u> </u>	(0)		FAC	CILITY IN	IFOI	RMATION									
Name of Facility Where A Verizon Westwood		Iakıng	Place	(3)							Type of Fac)					
Street Address	C.O.									4	School (Other than h	<-12)				
175 Broadway											Other (i.e	e., priv	ate and con		ial bu	ilding	s,	
City (5)				_						-	homes, Square Fee	- Control -	# of Floors		TDI	lg. Ag		
Hillsdale											32,775	·	3			ig. Ag i-50	ic.	
County (6)					T	Coun	ty Code (7)(STA	ATE USE ONLY	Y)	Current Use	(Prior		nolish				
Hillsdale												A CONTRACTOR OF THE PARTY OF TH	munication					
Name of Monitoring Firm I	Hired by Build	ding C)wner	(8)	AS	SCM	No.	Na	me of Abate	me	nt Contracto	r (9)			-			
TTI Environmental,	Inc							E	BRISTOL E	EN۱	VIRONMEN	ITAL,	INC.					
Street Address								Str	eet Address	ŝ								
1253 North Church	Street							1	1123 BEAV	EF.	RSTREET							
City, State, Zip Code									y, State, Zip									
Moorestown, NJ 080				1 ==					BRISTOL, I	PA	19007		4444					
Project Manager for Monit	oring Firm				S 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	none I		1 2	lephone No.				License No).				
Kris Smith Start Date (10)		0 - 1 1	1.10	1			-8218		215-788-60				00509					
10 / 1 /			1 /				te (11)		me of OSHA		onitor ∕IRONMEN	TAI	INC					
Occupancy Status During		00-23-13/1	10.00		-	- '	10		eet Address		VIKONIVIEN	IIAL,	INC					
☐ Facility Closed/Vacated					teme	ent		100	123 BEAV		STDEET							
Abatement Performed	Outside of No	ormal	Facility	у Но	urs -	- Des	cribe		y, State, Zip									
Time of Abatement:	AM	PN	1/ <u>5:00</u>	PM-	2:00	MAC			BRISTOL, I									
Scope of Work (Check all	that apply)					-			•									
≥3 sf or ≥3 lf≥160 sf or ≥260 lf			⊠ Re □ De	nova					☐ Mini-E	ncl	ainment with osure Procedure npted (*) and	ā			ı			
	142				ation										Aba	ateme	nt Ty	уре
Location of Asbestos-Containing N		4)			nally olely		Acho	ctoc	Description Containing I				A		Re	Re	m	ш
TO BE ABAT	TED	.,			nanc			., the	ermal system	ns ii	nsulation,		Amount (Specify		Removal	Repair	cap	Enclosure
IN Facility (13)	y		Cus	todia (12	al Sta 2)	ап?		ot.	surfacing, VA her miscella	AT,	or		SF or LF)	/al	,	Encapsulate	ure
(10)			Yes	No		N/A		Ot	nei miscena	nec	ous)						ਵਿੱ	
Basement Power Roo	m				1	\boxtimes	VAT/Ma	stic	:				2,200 SF	-		П	П	П
HSB Area							VAT/ma					+	288 SF					
Pad Area					-		VAT/ma		()			-						
Meter Room		-	_	П	-	<u>a</u>	VAT/Ma		×			-	1760 SF					
Name of Registered Waste	e Hauler		Ш	닉			VATINIA		bic Yards of		Name of P	ogisto	135 SF red Landfill					ш
SERVICE TRANSPO		P, INC			Hau	ler ID	No.	Wa			1		ANDFILL					
City, State						0990		Dis	posal Date		City, State							
NEW CASTLE, DE									BD				RG, OH					
Completed By (Print or Ty	pe)	Title							Signature	7			in	Date	9			
Dillan DeCaro		Es	stimat	tor					Dill	a	u Dic	aro	1 m	10) - (9-1	8	8
CP 41 0										4	100	-	I V	1.	Lugar			

ASB-41 DD 18079

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

CWL# 3447

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NIAC 8:60 and 5:16)

				(Pu	rsuan	t to Nul	C 8:60 and 5:10	3)	P.	4.5	o,,quantitati	THE PERSON NAMED IN	TOWN STREET SPACE		
Date of Notification (1)					Name	of Building	g Owner/Operator (2)		1	× 4	r	2040		
9 /	12 / _	18	_		Ver	izon Wes	stwood C.O.		1.3	U 00	T 1	ל	2010		
Agencies Notified	Type Notifica	ition	V (3000, 1100)		Street	Address			-			-	100		1
⊠ EPA					175	Broadw	ay			ASPES		()	1.76	1. 6	
☑ DOH	Amended Amendme		10/9	112	City, S	State, Zip C	Code	i	-			addis Name	-2" UT	P. 1	en.or
□ DCA	Emergend	-		110	Hills	sdale, N.	J 07642								
(NJAC 5:23-8)	justification		aug		Name	of Contac	t		Te	elephone N	lumbe	r			
	☐ Cancellat	ion			Rer	zo Cont	reras			973-951-	0542				
					FAC	CILITY IN	FORMATION								
Name of Facility Where A		aking F	Place ((3)			50,000	Type of Facility							
Verizon Westwood	C.O.							School (K-1) Subchapter		ther than k	(12)				
Street Address								Other (i.e., p				al bui	ilding	S,	
175 Broadway								homes, etc.							
City (5) Hillsdale								Square Feet	#	# of Floors		11	lg. Ag	e	
County (6)					Coun	ty Code (7)(STATE USE ONLY)	32,775 Current Use (Pr	rior if	3 f being den	nolich	1.000	50		
Hillsdale					Oour	ity Code (/	MOTATE OOL ONET	Verizon Co				ou)			
Name of Monitoring Firm I	Hired by Build	lina Ow	mer (8) [ASCM	No.	Name of Abateme			dilloadioi					_
TTI Environmental,				'		10.50		VIRONMENTA	40	NC.					
Street Address				- 1			Street Address								
1253 North Church	Street						1123 BEAVE	R STREET							
City, State, Zip Code							City, State, Zip Co	ode							
Moorestown, NJ 080)57						BRISTOL, PA	19007							
Project Manager for Monit	oring Firm			Tele	phone	No.	Telephone No.		1	License No).				
Kris Smith				60	9-313	-8218	215-788-6040			00509					
Start Date (10)	20200			COLUMN TO SERVICE	tion Da	10.000	Name of OSHA M	Ionitor							
	18	11	_ / .	16	<u> </u>	18	BRISTOL EN	VIRONMENTA	L, II	NC					
Occupancy Status During	en en rockours-ben en mineral mit van sød						Street Address								
☐ Facility Closed/Vacated	and the second of the second of the second of						1123 BEAVER	R STREET							
Abatement Performed Time of Abatement:						cribe	City, State, Zip Co		1115						
							BRISTOL, PA	19007							
Scope of Work (Check all	that apply)						⊠ Full Cont	ainment with Ne	nativ	e Pressure	9				
≥3 sf or ≥3 lf			Ren				☐ Mini-Enc	losure	guiiv	o i roodan	_				
≥160 sf or ≥260 lf		L] Dem	olitio	on		☐ Gloveba	g Procedure mpted (*) and No	n-Fr	riable Proc	edure				
		T	Is L	ocat	ion	l		inploca () and the	T	1001011100		Aha	ateme	ent T	vne
Location of				orma			Description o								-
Asbestos-Containing N TO BE ABA)			ely by ince/		stos Containing Ma			Amount	: 1	Removal	Repair	nca	nclo
IN Facility				dial	Staff?	(1.6	., thermal systems surfacing, VAT,			(Specify SF or LF)		oval	Ŧ	Encapsulate	Enclosure
(13)		-	. 1	(12)	T		other miscellane	ous)		1 100 100 100				ate	CD
Basement Sprinkler R	loom		Yes	No	N/A	VAT/Ma			-	CO OF				_	
Basement Diesel Roo						VAT/ma				60 SF 720 SF					
Hallway Power Room		- -				VAT/ma				200 SF		\boxtimes			
Stairwell Landing		-				VAT/Ma									
Name of Registered Wast	o Haular				IJDEP V		F2.002000	Name of Deci		81 SF				П	Ц
SERVICE TRANSPO		, INC.		100	lauler ID	No.	Cubic Yards of Waste	Name of Regi							
City, State					20990		Disposal Date	City, State							
NEW CASTLE, DE							TBD	WAYNESE	3UR	G, OH					
Completed By (Print or Ty	pe)	Title					Signature			- 18	Date				-
Dillan DeCaro		12000000	imato	or				n DeCa	10	1 Du			-/	P	
A O.D. 44				-			1 0 0 00	",/		11	1 1				

JUL# 3447

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

				1.1		Second &			100					111
Date of Notification (1)		222		Samp.			g Owner/Operator (2)		007 /	-	004		
9 / 12	/	18	_		Ver	izon We	stwood C.O.			OCT 1	5	201	8	1
Agencies Notified Ty	pe Notifica	tion			Street	Address		l						1
PALCO	Initial				175	Broadw	<i>r</i> ay		ACE	ERTOS	(1)		1 8	er" i tr
	Amended		10/	0/40	City, S	State, Zip (Code	L			and the same			
A CONTRACTOR OF STATE	Amendme Emergend		50 70	_	Hill	sdale, N	J 07642							
(NJAC 5:23-8)	justification		iuuiiig		Name	of Contac	et		Telephone	Numbe	er			
	Cancellati	ion			Rer	nzo Cont	reras		973-95	1-0542				
					FA	CILITY IN	NFORMATION							
Name of Facility Where Abate	ement is T	aking	Place	(3)	185001181			Type of Facility	(4)					
Verizon Westwood C.C	D.							School (K-12	2)					
Street Address								Subchapter 8	3 (Other than	n K-12)				
175 Broadway								Other (i.e., p		ommerc	al bu	ilaing	js,	
City (5)								Square Feet	# of Floo	rs	Bk	dg. A	qe	
Hillsdale								32,775	3		1 3	+-50	7	
County (6)					Cour	ty Code (7	7)(STATE USE ONLY)	Current Use (Pr	ior if being d	emolish	ed)			
Hillsdale								Verizon Cor						
Name of Monitoring Firm Hire	ed by Build	ling Ov	wner (8)	ASCM	No.	Name of Abateme	ent Contractor (9)						
TTI Environmental, Inc	:						BRISTOL EN	VIRONMENTA	L, INC.					
Street Address							Street Address							
1253 North Church Str	eet						1123 BEAVE	RSTREET						
City, State, Zip Code							City, State, Zip Co	ode			-			
Moorestown, NJ 08057	7						BRISTOL, PA							
Project Manager for Monitorin	ng Firm			Tele	phone	No.	Telephone No.		License I	No.				
Kris Smith				60	9-313	-8218	215-788-6040		00509)				
Start Date (10)	S	chedu	led C	omple	tion Da	te (11)	Name of OSHA M	Ionitor					-	
10 /1 /1	18	_ 11	/	16	_ /	18	BRISTOL EN	VIRONMENTA	L, INC					
Occupancy Status During Aba	atement (C	Check	only o	ne)			Street Address					_		
☐ Facility Closed/Vacated D				**********	nent		1123 BEAVE	R STREET						
Abatement Performed Out						cribe	City, State, Zip Co				_	-		
Time of Abatement:	AM	PM/	<u>5:00</u>	PM- <u>2:</u>	00AM		BRISTOL, PA							
Scope of Work (Check all that	t apply)													-
	, , , ,							ainment with Neg	gative Pressi	ure				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 				novati molitic			☐ Mini-Enc	losure g Procedure						
								mpted (*) and No	n-Friable Pro	ocedure				
				Locat							Ab	atem	ent T	уре
Location of				lorma d Sole			Description o				Z,	R	Ш	ш
Asbestos-Containing Mate TO BE ABATED)	Mai	intena	nce/		stos Containing Ma		Amour (Speci	3355	Remova	Repair	ncal	nclo
IN Facility	E .		Cust	odial	Staff?	(1.0	surfacing, VAT,	or	SF or L		oval	=	Encapsulate	Enclosure
(13)		H	V	(12)	1 21/0		other miscellane	ous)					ate	CD
		-	Yes	No	N/A									
Basement Meter Storage	Room					VAT/Ma	astic		75 SI	=	\boxtimes			
Basement AC Room 2					\boxtimes	VAT/Ma	astic		420 S	F	\boxtimes			
Name of Registered Waste H	auler			1,680	JDEP V		Cubic Yards of	Name of Regis	tered Landfi	II				-
SERVICE TRANSPORT	GROUP	, INC.		Н	auler IE 20990		Waste	MINERVA	LANDFILL					
City, State							Disposal Date	City, State		1311311		-		
NEW CASTLE, DE							TBD	WAYNESB	URG, OH					
Completed By (Print or Type)	T	Title					Signature			Date)			-
Dillan DeCaro		Est	timat	or				1 NiCano	1 me	1/	-6	7-1	8	

Pg.1

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

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lil	1#	= 3	435	Š		
	(JCT	15	2018		

5									THE UC	,	15	201	Ö
Date of Notification (1) 9 /	13 /	18					ng Owner/Operator (estwood Co	(2)					
			_	Sers Sel III.	Ve	rizori vve	stwood Co		ASSES	TO	00	.17 12	6 2
Agencies Notified	Type Notific	cation				t Address				To a	64.9	1.7	
⊠ EPA ⊠ DOLWD	☐ Amende	ď				5 Broadv					marker (2)		***
⊠ DOH	Amendm				City,	State, Zip	Code						
DCA	☐ Emerger			a a	Hil	Isdale, N	J 07642						
(NJAC 5:23-8)	justificat	ion)			Name	e of Contac	zł		Telephone Numb	er			
	☐ Cancella	ition			Re	nzo Conf	treras		973-951-0542	2			
					FA	CILITY IN	NFORMATION		-				
Name of Facility Where A	Abatement is	Taking	Place	e (3)				Type of Facility	(4)				
Verizon Westwood	C.O.							School (K-12)				
Street Address								Subchapter 8	(Other than K-12)	-1-1-	.77 .17		
175 Broadway								homes, etc.)	ivate and commen	ciai D	ullain	js,	
City (5)								Square Feet	# of Floors	В	ldg. A	ge	
Hillsdale								32,775	3		+-50		
County (6)					Cou	nty Code (7	()(STATE USE ONLY)	Current Use (Pri	or if being demolis	hed)			
Bergen							,	Verizon Con	nmunications				
Name of Monitoring Firm		ding O	wner	(8)	ASCM	No.	Name of Abateme						
TTI Environmental,	Inc						BRISTOL EN	VIRONMENTAL	., INC.				
Street Address							Street Address						
1253 North Church	Street						1123 BEAVER	RSTREET					
City, State, Zip Code							City, State, Zip Co	ode			-	-13	30110100
Moorestown, NJ 08							BRISTOL, PA	19007					
Project Manager for Moni	itoring Firm			2000	phone		Telephone No.		License No.				
Kris Smith				(50)		-8218	215-788-6040		00509				
Start Date (10)						te (11) 18	Name of OSHA M BRISTOL ENV	onitor VIRONMENTAL	. INC				
Occupancy Status During	Abatement (Street Address		,				_
☐ Facility Closed/Vacate	d During Entir	re Peri	od of	Abate	ment		1123 BEAVER	STREET					
	Outside of No	ormal F	acility	y Hour	s - Des	cribe	City, State, Zip Co						
Time of Abatement:	AM	PM	<u>/5:00</u>	PM-2:	MA <u>00</u>		BRISTOL, PA						
Scope of Work (Check all	that apply)						I	ainment with Neg	-#: - D				
≥3 sf or ≥3 lf		-		novati	The State of the S		☐ Mini-Encl	osure	ative Pressure				
≥160 sf or ≥260 if		L	_] De	molitic	ın		☐ Glovebag	Procedure	File.				
			is	Locat	ion	1	□ (voii-exei	ripted () and Nor	-Friable Procedure	_			
Location of	of		N	lorma	ly		Description of	. 1		Ab	atem	ent T	_
Asbestos-Containing N)	Use	d Sole intena	ly by	Asbes	stos Containing Mat	erial (ACM)	Amount	Rer	Repair	Enc	Enc
TO BE ABAT				odial S		(i.e.	 thermal systems in surfacing, VAT, 		(Specify	Removal	bair	aps	Enclosure
(13)	5).		Yes	(12) No	N/A		other miscellaneo		SF or LF)	1 2		Encapsulate	J.G
Basement Boiler Room	m				×	Exterior	Boiler Insulation	n	90 SF				
Basement Boiler Roor	m	1				Duct Ins			90 SF				
Basement Boiler Roor	m	I			×	Pipe Fit	tings	-	60 LF				
Basement Boiler Roor	m				×	Pipe Ins	ulation		315 LF				
Name of Registered Waste	e Hauler				JDEP V		Cubic Yards of	Name of Registe					
SERVICE TRANSPO		, INC.		H	auler ID	No.	Waste	MINERVA L					
City, State					20990		Disposal Date	City, State					
NEW CASTLE, DE							TBD		IBC OF				
Completed By (Print or Typ	ne)	Title					Signature	WAYNESBU					
Dillan DeCaro	/		imat	or			O . A /	0.0	Date O	5.	7	0	
SB-41 00. 24.20				-			pulan	Di Caro/	7~ 19	-13	3-1	8	

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

Date of Notification (1)					85	CD . 11 11	0 10	7.2.	11			
9 /	13 /	1	8				ng Owner/Operator	(2)				
Agencies Notified	Type Noti								1 00	T_1	5 2	018
⊠ EPA	Initial	ncation	ı			et Address						
⊠ DOLWD	☐ Amend	led				5 Broad				1.00 at 1.00	and the same of	
⊠ DOH	Amend	iment i	#	-	- 1	State, Zip			P. COL		1 1,1	-
☐ DCA	☐ Emerg		ncludi	ng		ilsdale, N			Lancon and the same of the sam	T-104400	uder de l'	100
(NJAC 5:23-8)	justification Cancel					e of Conta	mes.		Telephone Nur	mber		
	L Cancer	liation				enzo Con			973-951-05	42		
N 55 W 100					F	ACILITY I	NFORMATION	-				
Name of Facility Where A		s Takir	ng Plac	æ (3)				Type of Facility	(4)			
Verizon Westwood	C.O.							School (K-1;	2)			
Street Address								Other (i.e. r	8 (Other than K-1 rivate and comm	2)	uildine	
175 Broadway								homes, etc.)	erciai D	anang	5,
City (5)								Square Feet	# of Floors	В	ldg. A	ge
Hillsdale								32,775	3		+-50	
County (6)					Cou	inty Code (7)(STATE USE ONLY)	Current Use (Pr	for if being demo	lished)		
Bergen									mmunications			
Name of Monitoring Firm		ilding	Owner	(8)	ASCN	No.	Name of Abateme					
TTI Environmental,	Inc							VIRONMENTA				
Street Address							Street Address			-		
1253 North Church	Street						1123 BEAVE	RSTREET				
City, State, Zip Code							City, State, Zip Co					
Moorestown, NJ 086	057						BRISTOL, PA					
Project Manager for Monit	toring Firm			Tel	ephone	No.	Telephone No.		License No.			
Kris Smith				1		3-8218	215-788-6040		00509			
Start Date (10)		Sched	duled (ate (11)	Name of OSHA M		00509			
_10 / _1 /	18					18		/IRONMENTAI	INC			
Occupancy Status During	Abatement						Street Address					
☐ Facility Closed/Vacate					ement		1123 BEAVER	CTDEET				
Abatement Performed					21110111		1123 DEMVE	SIKEEL				
	Outside of h	Vormal	Facili	ty Hou	rs - De	scribe	City State Zin Co	do				
Time of Abatement:	Outside of N	Normal Pl	Facili VI/ <u>5:0</u> (ty Hou DPM-2	rs - De 2:00AM	scribe	City, State, Zip Co					
Time of Abatement:	AM	Normal Pl	Facili VI/ <u>5:00</u>	PM-2	rs - De 2:00 AM	scribe	City, State, Zip Co BRISTOL, PA					
Time of Abatement: Scope of Work (Check all	AM	Normal PI	Facili VI/ <u>5:00</u>	ty Hou DPM-2	irs - De: 2:00AM	scribe	BRISTOL, PA	19007	ative Pressure			
Time of Abatement: Scope of Work (Check all ☐ ≥3 sf or ≥3 If	AM	Normal PI	VI/ <u>5:00</u> ⊠ Re	PM-2	2:00AM	scribe	BRISTOL, PA	19007 ainment with Neg	ative Pressure			
Time of Abatement: Scope of Work (Check all ≥3 sf or ≥3 If	AM	Normal	VI/ <u>5:00</u> ⊠ Re)PM-2	2:00AM	scribe	BRISTOL, PA	ainment with Neg				
Time of Abatement: Scope of Work (Check all ≥3 sf or ≥3 If	AM	Normal	W/ <u>5:0(</u>	PM-2	2:00AM tion on	scribe	BRISTOL, PA	ainment with Neg	ative Pressure	-		
Time of Abatement: Scope of Work (Check all	AM that apply)	PI	M/ <u>5:0(</u> □ Re	PM-2 enoval emoliti s Loca Noma	tion on tion	scribe	BRISTOL, PA Full Cont. Mini-Encl Glovebag Non-Exer	ainment with Negosure Procedure npted (*) and Nor		Ab	ateme	
Time of Abatement: Scope of Work (Check all ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing N	AM that apply) of	PI	M/5:00	PM-2 enoval emoliti s Loca Norma ed Sol	tion on tion ally ely by	Asbe	BRISTOL, PA Full Contain Mini-Encl Glovebage Non-Exer	ainment with Negosure Procedure npted (*) and Nor		Ab	1	
Time of Abatement: Scope of Work (Check all ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing N TO BE ABAT	AM that apply) of flaterial (ACI	PI	M/5:00	PM-2 enoval emoliti s Loca Norma ed Sol aintena	tion on tion ally ely by	Asbe	BRISTOL, PA Full Cont. Mini-Encl Glovebag Non-Exer Description of stos Containing Mat., thermal systems is	ainment with Negosure Procedure npted (*) and Nor erial (ACM) sulation.	n-Friable Procedu Amount (Specify	Ab	1	
Time of Abatement: Scope of Work (Check all ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing N	AM that apply) of flaterial (ACI	PI	M/5:00	PM-2 enoval emoliti s Loca Norma ed Sol aintena	tion on tion silly ely by ance/ Staff?	Asbe	BRISTOL, PA Full Cont. Mini-Encl Glovebag Non-Exer	ainment with Negosure Procedure Inpled (*) and Nor erial (ACM) Insulation, or	n-Friable Procedu	-	1	
Time of Abatement: Scope of Work (Check all ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing M TO BE ABAT IN Facility	AM that apply) of flaterial (ACI	PI	M/5:00	PM-2 enoval emoliti s Loca Norma ed Sol aintena todial	tion on tion silly ely by ance/ Staff?	Asbe	BRISTOL, PA Full Cont. Mini-Encl Glovebag Non-Exer Description of stos Containing Mat., thermal systems is	ainment with Negosure Procedure Inpled (*) and Nor erial (ACM) Insulation, or	n-Friable Procedu Amount (Specify	Ab	1	
Time of Abatement: Scope of Work (Check all ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing M TO BE ABAT IN Facility (13)	AM	PI	M/5:00	enoval emoliti s Loca Norma ed Sol sintena todial (12)	tion on tion ally ely by ance/ Staff?	Asbe (i.e	BRISTOL, PA Full Conta Mini-Encl Glovebag Non-Exer Description of stos Containing Mat thermal systems is surfacing, VAT, other miscellaneous	ainment with Negosure Procedure Inpled (*) and Nor erial (ACM) Insulation, or	Amount (Specify SF or LF)	A Removal	Repair	Encapsulate
Time of Abatement: Scope of Work (Check all ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing M IO BE ABAT	AM	PI	M/5:00	enoval emoliti s Loca Norma ed Sol aintena todial (12)	tion on tion ally ely by ance/ Staff?	Asbe	BRISTOL, PA Full Conta Mini-Encl Glovebag Non-Exer Description of stos Containing Mat thermal systems is surfacing, VAT, other miscellaneous	ainment with Negosure Procedure Inpled (*) and Nor erial (ACM) Insulation, or	n-Friable Procedu Amount (Specify	Ab	1	
Time of Abatement: Scope of Work (Check all ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing M IO BE ABAT	AM	PI	M/5:00	enoval emoliti s Loca Norma ed Sol aintena todial (12)	tion on tion allly ely by ance/ Staff?	Asbe (i.e	BRISTOL, PA Full Conta Mini-Encl Glovebag Non-Exer Description of stos Containing Mat thermal systems is surfacing, VAT, other miscellaneous	ainment with Negosure Procedure Inpled (*) and Nor erial (ACM) Insulation, or	Amount (Specify SF or LF)	A Removal	Repair	Encapsulate
Time of Abatement: Scope of Work (Check all ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing M IO BE ABAT	AMthat apply) of Material (ACI	PI	M/5:00	enoval emoliti s Loca Norma ed Sol aintena todial (12)	tion on tion ally ely by ance/ Staff?	Asbe (i.e	BRISTOL, PA Full Conta Mini-Encl Glovebag Non-Exer Description of stos Containing Mat thermal systems is surfacing, VAT, other miscellaneous	ainment with Negosure Procedure Inpled (*) and Nor erial (ACM) Insulation, or	Amount (Specify SF or LF)	A Removal	Repair	Encapsulate
Time of Abatement: Scope of Work (Check all ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing M IO BE ABAT	AMthat apply) of Material (ACI	PI	M/5:00 □ Re □ De is Use Ma Cus Yes	enoval emoliti s Loca Norma ed Sol aintena todial (12)	tion on tion allly ely by ance/ Staff?	Asbe (i.e	BRISTOL, PA Full Conta Mini-Encl Glovebag Non-Exer Description of stos Containing Mat thermal systems is surfacing, VAT, other miscellaneous	ainment with Negosure Procedure Inpled (*) and Nor erial (ACM) Insulation, or	Amount (Specify SF or LF)	A Removal	Repair	Encapsulate
Time of Abatement: Scope of Work (Check all ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing M TO BE ABAT	AM that apply) of flaterial (ACI	PI	Ise MacCus	enoval en	tion on tion ally ely by ance/ Staff?	Asbe (i.e VAT/Ma	BRISTOL, PA Full Conta Mini-Encl Glovebag Non-Exer Description of stos Containing Mat thermal systems is surfacing, VAT, other miscellaneous	ainment with Negosure Procedure Inpled (*) and Nore Perial (ACM) Insulation, Insulation, Insulation	Amount (Specify SF or LF)	A Removal	Repair	Encapsulate
Time of Abatement: Scope of Work (Check all ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing M TO BE ABAT	AMthat apply) of flaterial (ACI FED /	P!	Vse Ma Cus	enoval en	tion on tion ally ely by ance/ Staff?	Asbe (i.e VAT/Ma	BRISTOL, PA Full Conta Mini-Encl Glovebag Non-Exer Description of stos Containing Mat thermal systems is surfacing, VAT, other miscellaned	ainment with Negosure Procedure Inpled (*) and Normaliation, or Insulation, or Insulation,	Amount (Specify SF or LF) 2,200 SF	A Removal	Repair	Encapsulate
Time of Abatement: Scope of Work (Check all ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing N IN Facility (13) Basement Power Room ame of Registered Waster SERVICE TRANSPORT	AMthat apply) of flaterial (ACI FED /	P!	Vse Ma Cus	enoval en	tion on tion ally ely by ance/ Staff?	Asbe (i.e VAT/Ma	BRISTOL, PA Full Contain Mini-Encl Glovebage Non-Exer Description of stos Containing Mate Non-Exer Description of stos Containing Mate Non-Exer Description of stos Containing Mate Non-Exer Cubic Yards of Waste	ainment with Negosure Procedure Inpled (*) and Normalization, or or us) Name of Regist MINERVA L	Amount (Specify SF or LF) 2,200 SF	A Removal	Repair	Encapsulate
Time of Abatement: Scope of Work (Check all ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing N IN Facility (13) Basement Power Room ame of Registered Waster SERVICE TRANSPORT	AMthat apply) of flaterial (ACI FED /	P!	Vse Ma Cus	enoval en	tion on tion ally ely by ance/ Staff?	Asbe (i.e VAT/Ma	BRISTOL, PA Full Contain Mini-Encled Glovebage Non-Exerement	ainment with Negosure Procedure Inpled (*) and Normalization, or Insulation, Or I	Amount (Specify SF or LF) 2,200 SF	A Removal	Repair	Encapsulate
Time of Abatement: Scope of Work (Check all ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing M IN Facility (13) Basement Power Room lame of Registered Waster SERVICE TRANSPORT	AM- that apply) of flaterial (ACI FED /	M)	Vse Ves	enoval en	tion on tion ally ely by ance/ Staff?	Asbe (i.e VAT/Ma	BRISTOL, PA Full Conta Mini-Encl Glovebag Non-Exer Description of stos Containing Mat , thermal systems in surfacing, VAT other miscellaned Stic Cubic Yards of Waste Disposal Date TBD	ainment with Negosure Procedure Inpled (*) and Normalization, or or us) Name of Regist MINERVA L	Amount (Specify SF or LF) 2,200 SF	A Removal	Repair	Encapsulate
Time of Abatement: Scope of Work (Check all ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	AM- that apply) of flaterial (ACI FED /	M) P, INC	Vse Ves	DPM-2 enoval s Loca Normaled Sol sintenatodial (12) No	tion on tion ally ely by ance/ Staff?	Asbe (i.e VAT/Ma	BRISTOL, PA Full Conta Mini-Encl Glovebag Non-Exer Description of stos Containing Mat , thermal systems in surfacing, VAT other miscellaned Stic Cubic Yards of Waste Disposal Date TBD Signature	ainment with Negosure Procedure Inpled (*) and Normalization, or Insulation, Or I	Amount (Specify SF or LF) 2,200 SF ered Landfill ANDFILL JRG, OH	A Removal	Repair	Encapsulate

147/173	Ą		S S CATION	ate of New OF ASE	y Jersey STOS AB	ATE:	MENT			E (J [Pri	nt Fo
Date of Notification (1) 10/10/18			Name of		Owner/Ope					00	CT 1	5	201	8	-
Agencies Notified Type Notification X EPA X Initial				emberto	n _Browr	ns IV	lills R	d.		ASBE	STOC	CC		čit, 8	J
DEP Amended Amendment:		_	and the second second	ite, Zip Co erton NJ				L			MATERIAL PROPERTY.	naizhe ru			p+1113 1 8
☐ Emergency (i justification) ☐ DCA ☐ Cancellation	ncluding		Name of	f Contact ager						ephone 9-894					
			FACI	LITY INFO	RMATION	1									
Name of Facility Where Abatement is Taking Former Acme	Place (3)						of Facility (School (K-1	50						
Street Address								Subchapter	8 (Oth						
100 Pemberton- Browns Mills Road	d							Other (i.e. petc.)	rivate 8	& comm	nercial	build	dings,	home	es,
City (5) Pemberton NJ 08068							100		1	f Floors		3	ldg. A	ge	
County (6) Burlington			(STATE I	Code (7) USE ONLY)		-	Acm	ent Use (Pri ne Store		276	olishe	d)			
Name of Monitoring Firm Hired by Building C N/A	wner (8)		ASCN	No.			of Aba naco I	tement Cor	tractor	(9)					
Street Address				***************************************			Addres								
City, State, Zip Code							1345 15 - 7.	ip Code							
1 889 X					3.0			lin NJ 080)91						
Project Manager for Monitoring Firm			Telepho	ne No.			one N 753-9			Licens 0072	se No. 27	8			
Start Date (10) 10/22/18	Schedule 11/9/18		npletion l	Date (11)	1	lame Sam		HA Monitor							
Occupancy Status During Abatement (Check	Only On	e)			S	treet	Addre	ss	-			n-Lla			
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other – Describe:	eriod of A al Facility	Hours	nent		С	ity, S	state, Z	ip Code							
Scope of Work (Check All That Apply)														-	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova emolit				X	Min	Il Containm ni-Enclosure ovebag Pro- n-Exempte	e cedure					0	
	le	Locati	on			Ľ	21 110	II-Exemple	J () all	u 14011-1	Habie		Abate		
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	lormali d Soie intenar odial S (12)	ly ly by nce/		Descritos Contain thermal sys surfacing other miso	ing N stems g, VA	fateria s insula T, or	ation,	(8	mount Specify or LF)		Remova	Ty Repair	e Encapsulate	Enclosure
	Yes	No	N/A									_		ite	Ф
Expansion Joint Ext. Work Area (C)			х			aulk				18 LF	-	X			
Door Caulk Exterior Work Area (C)			x			aulk				50 LF	-	Х			
Roof Flashing Ext. Work Area (C)			Х		Flas					00 SF		X			
Roof panels Ext Work Area (C)			X		Trar					00 SF		Х			
Name of Registered Waste Hauler United Roll Off		Н	IJDEP W lauler ID 2459		of Waste TBD			Name of G.R.O		ered La	natill				
City, State Elm NJ				*	Disposal TBD	Date		City, Stat		A 190	67				
Completed by Anthony T Perna	Title Pres	ident				atore	e				Date	10/	18	illeo - 580.	

B & G proj. #:

2018-209

State of NJ
Actification of Asbestos Abatement
(Pursuahito NJAC 8:60-7 and 12:120-7)

Check # 9246

	¥.		£.	A LI	TI II	1 4		CHECK	# 9240	-			
Date of Notification (1)	IIN	ame of Bu	ildina Own	er/Operator (2)		F	0 57		D. F.		
11 10 1/11 12 1	/ 1 8				Colbertson			I A E	GE	d Linguis	W		
Agencies Notified	Type Notificati	ion S	treet Addre		00100113011								
☐ EPA	X Initial		a cet Addit	233								-	
☐ DEP	initial		ity, State,	Zin Codo					OCT 1	5_2	2019	-	1 /
X DOL	Amendr		ES.		nip (Morristo	(מעום	N.I.07960					-Citamon,	
₩ DOH	 2	N/	ame of Co		iip (Morriote	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	140 07 000		e Number		-		7 -
	Cancella							releption	e Mullipet		1	e gee	
☐ DCA			Jessica	a Bown				3870		4 -			
				FAC	ILITY INFORM	MOITAN	ı			00000			
Name of facility whe	re abatement is	s taking pla	ce (3)					Type of Facility ((4) I (K - 12)				
Estate of Grace	e Colbertsor	1							apter 8 (Othe	ar th	an K	12)	
Street Address								100000	Private/Com			12)	
								Bldgs./	Homes, etc.				
O:h- /5\		I Cour	h. (6)			T o	1 0 1 (7)	Square Feet	# of Floors		Blo	dg. Ag	je
City (5)		Cour	ity (6)			1	nty Code (7) te use only)	Current Use (P	rior if heing r	l	oliehe	ad)	
Harding Towns	ship	Mo	rris				,,,,,	Residential	ior ir being c	261110	Justic)	
Name of Monitoring	Firm Hired by I	Bldg. Owne	er (8)		ASCM No.	1	Name of Abatement						
					n/a		B & G Restorat	ion, Inc.					
Street Address							Street Address				-		
							105 Ryerson R	load					
City, State, Zip Code							City, State, Zip Code	N.I. 07025					
Device t Management	A it i Ci		To	N		_	Lincoln Park,	NJ 07035	I License Nu				
Project Manager for N	vionitoring Firm		P	none Numb	per		(973)696-686	9	0037		er		
	(10)	10.1		D.1. (4	4	_	Name of OSHA Mon		1				
Scheduled Start Date	(10)			on Date (1	1)		B & G Restorat	ion, Inc.					
10/25/2018			26/2018				Street Address		7.2				77 - 7
Occupancy Status Du				Yan			105 Ryerson R	oad					
Facility closed/							City, State, Zip Code						
Describe:						_	Lincoln Park, N	LL 07035					
Other-Describe		4										- 13	
Scope of Work (che	ck all that apply	() Renovatio				П	ull Containment w/neg	antina nennanen	ਦੀ ਨਾਲ ਾ ਲ				
							Mini-enclosure	gative pressure [200			
>3 sf or >3 lf		≥160 sf or				[w] (/	mili-eliciosule		Non-friab	R	R	-	1
Location of asbestos-conta	aining	by mainte	nance/cus	used solel stodial		on of o	aboutes containing	Amount		e	е	E n	E
material to be	· ·	staff(12)		Т	material		sbestos-containing	(Specify S	F or	m o	p a	c a	n c
abated in facilit	ty (13)	Yes	No	N/A				LF)	4	v e	i	p	L
furnace room				X	expansion	n joint		1 sf		X	亡		
crawl space				×	pipe insu	lation		35 lf		X			
]								
							1						
Registered Waste Ha B & G Restoration			P Hauler 19563	ID#	Cubic Yards of 1	vvaste	Name of Registered Grand Ce	Landfill ntral Landfill					
City, State Lincoln Park, N.	J	do		Disposal I	Date 26/2018		City, State Pen Argyle	e, PA					
Completed by (Print of	or Type)	Title		1	Signature				Date				
Gordana Luna	978-11 PV	Secreta	ry/Treas	urer			Gordana Luna		10/12/2	201	88		

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

Check # 924

		(i			u L	LI		Cneck	# 9245				_
Date of Notification (1)	- 11	Name of	Building Own	ner/Operator (2))							
1 10 / 1 12	/[1 8			O'Neill	. 1	,		FAE	C E		7.7	-	
Agencies Notified	Type Notifica	tion	Street Ad	dress				1 1/15	(U) IL	- 11	1/		- 11
∐ EPA	X Initial											- []	11
☐ DEP	_		City, Stat	e, Zip Code				1 . 45	OCT 1	5 2	Oiô	-	
X DOL	Amend	ment	Pomp	oton Plains	s, NJ 07444							The state of the s	4000
₩ DOH		11	Name of (Contact				Telephor	e Number	r			
☐ DCA	Cancel	ation	John	O'Neill									
				FAC	ILITY INFORM	IATIO	N				39/10-1		-
Name of facility whe	re abatement	is taking pl	ace (3)					Type of Facility	(4)		.1110		
John O'Neill								School	l (K - 12)				
Street Address								Control of the contro	apter 8 (O (Private/C			-12)	
								Bldgs./	Homes, e	tc.			
City (5)		Cou	nty (6)			Col	unty Code (7)	Square Feet	# of Floor	S	В	dg. Ag	ge
	- NI 0744		35 (0.02)				ate use only)	Current Use (P	rior if bein	a den	nolish	ed)	
Pompton Plain			orris					Residential					
Name of Monitoring	Firm Hired by	Bldg. Own	er (8)		ASCM No.		Name of Abatement C	Contractor (9)					
01-10-11					n/a 	_	B & G Restoration	on, Inc.					- Tables
Street Address							Street Address 105 Ryerson Ro	nad					
City, State, Zip Code							City, State, Zip Code		-	AMELINA.	-		
							Lincoln Park, N	NJ 07035					
Project Manager for M	fonitoring Firn	1		Phone Numb	per	-	Telephone Number		License	Numb	er		-
			1				(973)696-6869		00	378			
Scheduled Start Date	(10)	Sched	d. Comple	etion Date (1	1)		Name of OSHA Monit B & G Restoration						
10/24/2018		10/	25/2018	3			Street Address	ori, iric.					
Occupancy Status Du					TO		105 Ryerson Ro	pad					
Facility closed/v Abatement perfe	racated during	entire peri	od of aba	atement.			City, State, Zip Code	†2					_
Describe:		ornoma	racinty ric	Jul 3-	A MANAGEMENT AND AND ADDRESS OF THE PARTY OF	_	Lincoln Park, N.	1.07025					
Other-Describe: Scope of Work (chec						_	Lincoll Falk, No	07033				- 3	
Demolition	k ali tilat appi	() Renovation	vn -			П,	Tull Cantainne at/	E					
>3 sf or >3 lf		≥160 sf or					Full Containment w/nega Mini-enclosure	ative pressure	Gloveb	9788			
	— Ц			y used solely	,l	<u></u>	viiii-ericiosure	L	Non-fri	R			
Location of asbestos-contai	ining	by mainte				n of a	asbestos-containing	Amount		е	R e	E n	E
material to be abated in facility	(13)	staff(12)	l	Т-	material (/			(Specify S LF)	F or	m o	p a	c a	n c
	,	Yes	No	N/A						v e	i	р	L
basement				×	pipe insula	ation		12 If		X			
crawl space				×	pipe insula	ation	YANG BANKASAN TANDA T	18 lf		X			
					1	-							
Registered Waste Hau		NJDI	EP Haule	rID# I C	ubic Yards of W	Vaste	Name of Registered L	andfill		Ш	Ш	Ц.	Ш
B & G Restoration			19563		1		Grand Cen	tral Landfill					
City, State Lincoln Park, NJ				Disposal D 10/2	ate 25/2018		City, State Pen Argyle,	PA			-93 A.V.A.		
Completed by (Print or	Type)	Title			Signature		1		Date			3.	
Gordana Luna		Secreta	ry/Treas	surer			Gordana Luna		10/12	/201	8		

State of NJ

2018-206 B & G proj. #:

Notification of Asbestos Abatement ursuant to NJAC 8:60-7 and 12:120-7)

Check # 9244 Date of Notification (1) Name of Building Owner/Operator (2) 1 0 / 1 2 / 1 8 Andrew Hunton Agencies Notified Type Notification Street Address ☐ EPA Initial 15 2018 ☐ DEP City, State, Zip Code X DOL Amendment Nutley, NJ 07110 X DOH Name of Contact Telephone Number Cancellation ☐ DCA Andrew Hunton FACILITY INFORMATION Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) Andrew Hunton Subchapter 8 (Other than K-12) Street Address Other (Private/Commercial Bldgs./Homes, etc. Bldg. Age Square Feet # of Floors City (5) County (6) County Code (7) (State use only) Current Use (Prior if being demolished) Nutley, NJ 07110 Essex Residential Name of Monitoring Firm Hired by Bldg. Owner (8) Name of Abatement Contractor (9) ASCM No. n/a B & G Restoration, Inc. Street Address Street Address 105 Ryerson Road City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035 Project Manager for Monitoring Firm Phone Number Telephone Number License Number (973)696-6869 00378 Name of OSHA Monitor Sched. Completion Date (11) Scheduled Start Date (10) B & G Restoration, Inc. 10/23/2018 10/24/2018 Street Address Occupancy Status During Abatement (Check only one) 105 Ryerson Road Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Lincoln Park, NJ 07035 Other-Describe: Scope of Work (check all that apply) Demolition Full Containment w/negative pressure Non-friable procedure × >3 sf or >3 lf Mini-enclosure 2160 sf or ≥260 lf Is location normally used solely Location of e by maintenance/custodial n Amount asbestos-containing Description of asbestos-containing n m p staff(12) C (Specify SF or material to be material (ACM) C 0 a a LF) abated in facility (13) L Yes No N/A V p pipe insulation basement 50 If X X basement boiler room/laundr X 10 If pipe Cubic Yards of Waste Registered Waste Hauler NJDEP Hauler ID# Name of Registered Landfill B & G Restoration, Inc. 19563 Grand Central Landfill Disposal Date City, State City, State Pen Argyle, PA Lincoln Park, NJ 10/24/2018 Signature Completed by (Print or Type) Date Gordana Luna Gordana Luna Secretary/Treasurer 10/12/2018

Notification of Asbestos Abatement (Pursuant to NOAC 8 60-7 and 12:120-7) 2018-208 B & G proj. #: Check # 9243 Date of Notification (1) Name of Building Owner/Operator (2) 1 10 1/1 12 1/11 18 1 Anton Pamer Agencies Notified Type Notification Street Address ☐ EPA OCT 15 2018 Initial ☐ DEP City, State, Zip Code X DOL Amendment Verona, NJ 07044 X DOH Name of Contact Telephone Number Cancellation ☐ DCA Anton Pamer **FACILITY INFORMATION** Name of facility where abatement is taking place (3) Type of Facility (4) School (K - 12) Anton Pamer Subchapter 8 (Other than K-12) Street Address Other (Private/Commercial Bldgs./Homes, etc. Square Feet # of Floors Bldg. Age City (5) County (6) County Code (7) (State use only) Current Use (Prior if being demolished) Verona, NJ 07044 Essex Residential Name of Monitoring Firm Hired by Bldg. Owner (8) Name of Abatement Contractor (9) ASCM No. n/a B & G Restoration, Inc. Street Address Street Address 105 Ryerson Road City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035 Project Manager for Monitoring Firm Telephone Number Phone Number License Number (973)696-6869 00378 Name of OSHA Monitor Scheduled Start Date (10) Sched. Completion Date (11) B & G Restoration, Inc. 10/22/2018 10/23/2018 Street Address Occupancy Status During Abatement (Check only one) 105 Ryerson Road Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Lincoln Park, NJ 07035 Other-Describe: Scope of Work (check all that apply) Demolition Renovation Full Containment w/negative pressure >3 sf or >3 If Mini-enclosure ≥160 sf or ≥260 lf Non-friable procedure Is location normally used solely Location of E by maintenance/custodial e e asbestos-containing n Amount Description of asbestos-containing n staff(12) m p C material to be (Specify SF or material (ACM) C 0 a abated in facility (13) Yes No N/A V p basement X pipe insulation X 90 If Registered Waste Hauler Cubic Yards of Waste NJDEP Hauler ID# Name of Registered Landfill B & G Restoration, Inc 19563 1 1/2 Grand Central Landfill City, State Disposal Date Lincoln Park, NJ 10/23/2018 Pen Argyle, PA Completed by (Print or Type) Signature Date Gordana Luna Gordana Luna Secretary/Treasurer 10/12/2018

State of NJ

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Date of Notification (1)				Nam	e of Buildin	g Owner/©	perator (2)		-0C		15	-20	18
	12 /	18				east Real								
Agencies Notified	Type Notifica	ation	lii.	Stree	et Address				1 -					- 1
□ EPA				15	0 N. Bartl	ett Street			Landers	MADE TOTAL	wanto	wat.		
☑ DOLWD	☐ Amended			City,	State, Zip	Code					-			
☑ DHSS □ DCA	Amendme		na na	100000000000000000000000000000000000000	dford, O									
(NJAC 5:23-8)	justification		iig	Nam	e of Contac	t			Telephone N	lumber	_			
	☐ Cancellat	ion		Ja	mes Weir	ngartner			732-675-					
						FORMAT	ION		102-010-	1441		_		
Name of Facility Where A	batement is T	aking Pla	ce (3)					Type of Facility	(4)					
DCH Auto Group								School (K-1)	2)					
Street Address								Subchapter						
440 Franklin Turnpi	ke							Other (i.e., phomes, etc.		imercial	bu	ilding	js,	
City (5)								Square Feet	# of Floors	1	Blo	lg. A	ge	
Mahwah, NJ								108,000	1			8		
County (6)				Cou	nty Code (7)(STATE USE	E ONLY)	Current Use (Pr	rior if being den	nolished	d)			
Bergen			(2)					Vacant						
Name of Monitoring Firm I Environmental Heal			r (8)	ASCN	wester			ent Contractor (9)						
Street Address	ui ilivesuga	ations		297	31	220000000000000000000000000000000000000	0.0000000000000000000000000000000000000	nental Service	s LLC					
655 West Shore Trai	il					Street Ad	10:15(E) E) E)	Road, Suite 10	22					
City, State, Zip Code						City, State		31 10 11 11 11	JZ		_			
Sparta, NJ 07871							ld, NJ (
Project Manager for Monit	100 C C C C C C C C C C C C C C C C C C		Te	elephone	No.	Telephone	e No.		License No					- 500
Jean Paul Von Doeh				973-729		(973) 8	52-344	4	01349					
Start Date (10)	23.702	cheduled				Name of 0	OSHA M	onitor						
				30_ /	18	SAI En	vironm	nental Service	s LLc					
Occupancy Status During						Street Add	dress							
 ☑ Facility Closed/Vacated ☐ Abatement Performed 					C000*********	277 Fa	irfield F	Road, Suite 10)2					
Time of Abatement:	AM-	PM/	ity Ho	ours - De: M-	AM	City, State								1
Scope of Work (Check all t					• 20%	Fairfie	ld, NJ 0	7004						
	arat apply)					⊠ F	ull Conta	ainment with Neg	aative Pressure					
≥3 sf or ≥3 lf≥160 sf or ≥260 lf			Renova			□ N	/lini-Encl	osure	,	•				
△ ≥100 St 01 ≥200 II		Ц	emoli	tion			∂lovebag lon-Exer	Procedure npted (*) and No	n-Friable Proce	edure				
			is Loc					.,,			Aba	tem	ent T	vne
Location o		. 1	Norm	nally olely by			ription of					_		
Asbestos-Containing M TO BE ABAT				nance/	Asbe	stos Contaii ., thermal s	ning Mat	erial (ACM)	Amount		Removal	Repair	nca	Enclosure
IN Facility		Cu		I Staff?	(1.0		ig, VAT,		(Specify SF or LF)		2	air.	sde	nso
(13)		Yes	(12 No		1	other mis	cellaneo	ous)	/	-	-		Encapsulate	Гe
1 st Floor				o N/A	VAT/Ma	stic & Ca	rnet Til	es/Mastic	22,670 SF	=	3			
Exterior Windows/Doo	ors					/Caulk		oo/iiidodo	69 Ea./11 E	_	3			
Building Facade Seam	/Joints				Caulk				150 LF		3			
Roof					Flashin	n			1,000 SF		3			
Name of Registered Waste	Hauler		17	NJDEP 1		Cubic Yard	de of	Name of Regis	Dieache and Children	L	И	Ц	Ц	ш
Service Transport Gr				Hauler II	D No.	Waste	us UI	Minerva La						
City, State	Transfer to the later of			SW21	117	220 Disposal D)ate	City, State						
New Castle, DE						11/30/1		Waynesbu	rah. OH					
Completed By (Print or Typ	e) I	Title				Signa		0.	7 1	Data				
Mary Petrovski	25	Presid	ent			Jigila	-///	WIND tin	11 1	Date	01	10/	10	
ASB-41							1/14	yun	USIV	7	U/	12/	ΙŎ	

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Date of Notification (1) 10/10/2018			Name of Pete	of Building Crampto	Owner/0	Operator	(2)		0	CT 15	2018			-
Agencies Notified Type Notification			Street A	Address					l	61 13	2010			
EPA Initial Amended Amendment #				ate, Zip Co	ode				ACDE					-
X Emergency (i				of Contact				Latestar derive-hi	Management of	Continues (Continues of the Continues of	******			
DOH justification) Cancellation				Stanko			/lana	ger						
Name of Facility Where Abatement is Taking Residence	Place (3)	FAC	ILITY INF	URIVIATI	ION	Тур	e of Facility	(4)					
Street Address							×	School (K- Subchapte Other (i.e. etc.)	r 8 (Oth			dings	, hom	es,
City (5) Madison	9						Squ 108	are Feet	# 0	f Floors		8ldg. /		
County (6) Morris				Code (7) USE ONLY)		Curr	ent Use (Prisidence	or if bei	ng demolis	hed)			
Name of Monitoring Firm Hired by Building O	wner (8)		ASC	И No.		Name Chec	of Ab	atement Co ark Indust	ntractor rial	(9)				
Street Address						Street 54 N		ess an Dr						
City, State, Zip Code								Zip Code J 07871					7387	38-3-3-
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph 973-		No. 2645		License N 01334	lo.			
	Schedule 10/17/		npletion	Date (11)				HA Monitor ark Indust	rial			<u> </u>		
Occupancy Status During Abatement (Check	70	10				Street / 54 M						11-11		
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe:	eriod of A	Abaten / Hours	nent			City, St	tate, 2	Zip Code J 07871						
Scope of Work (Check All That Apply)	5-15													
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Chartered	Renova Demolit				×	Mi Gi	III Containm ini-Enclosure ovebag Pro on-Exempte	edure				e.	
	100	Locati	7.70									Abate		
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	d Sole intenar todial S (12)	ly by nce/		tos Cont thermal surfac	scription aining M systems cing, VAT niscellan	ateria insul r, or	ation,	(S	mount pecify or LF)	Remova	Repair	Encapsulate	Enclosure
D	Yes	No	N/A										ate	G)
Basement		X			9" x 9	" floor	tiles		80	00 SF	Х			
											-			
Name of Registered Waste Hauler Newark Carting		1	JDEP W auler ID		Cubic of Was			M. Santanana and S.		red Landfill gement				
City, State Hillside NJ					Dispos	al Date		City, Stat					<u> </u>	
Completed by Corey Stankovic	Title CEO				S	ignature	(\	Freko	· n	Da 10	te 0/10/2	2018	ĺ	

7/	hnn Bi	(XX)		NOTIF	ICATION	ate of New	/ Jersey	BATE	MENT			C			₽ri ∭	nt Fo	ron
	ate of Notification (1) 0/11/2018	1000		(P	Name o	to NAC 8	0 and 0 owner/Op	12 120 erator	(2)		00 000	OCT	1 !	5 2	2018	1	; I
	gencies Notified	Type Notification	1		Street A		ority of N	vew '	York	& New Jers	1	ronin r	ri (· · · · ·	THERE	
×	EPA DEP	Initial Amended				ewster Ro					- The state of the	No. of the last	- Comment	- Ada	-		
×	DOL	Amendmen Emergency			Newa	rk, NJ 07					>			599			
×	DOH DCA	justification Cancellation)	'		f Contact el DaCos	sta				Telephon 973-96		r				
Na	ame of Facility Where	Abatement is Taki	ng Place (3)	FAC	ILITY INFO	RMATIO	N	Type	e of Facility (4)							
N	ewark Airport - Bu									School (K-12)							
3	reet Address 50 Scargo Earhart	t Drive							×	Subchapter 8 Other (i.e. privetc.)	vate & com	mercial b	uildi	ngs,	home	s,	
	ty (5) ewark								Squa 48,5	are Feet 500	# of Floor 2	s	32	ig. A	ge		
U	ounty (6) nion					Code (7) USE ONLY)		_	Curre	ent Use (Prior S Maintenar	if being der nce/Load	nolished) ing Fac	ility	,			
М	ame of Monitoring Firm Latrix New World E		Owner (8))	ASC	M No.				atement Contri ourg Industri		e Comp	oan	у			
	reet Address 3 Columbia Turnpi	ike					1 1		Addre Spill	ess Iman Drive							
	ty, State, Zip Code orham Park, NJ 0	7932								Zip Code m, PA 1801	5						
Pro	oject Manager for Mon	itoring Firm	111111111111111111111111111111111111111		Telepho 973-24	ne No. 40-1800	1		none N 691-1		Licer 0072	nse No. 21					
Sta	art Date (10) 10/17/2018		Schedul 10/18/		npletion	Date (11)	100		of OS denb	HA Monitor ourg							
_	ccupancy Status During		C 1 C 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	00000		-31111-35-4	1.8		Addre	ess Iman Drive							
×	Facility Closed/Vaca Abatement Performe Other – Describe:	ed Outside of Norr	mal Facility	y Hours	nent			City, S	tate, Z	Zip Code m PA 18015							
Sc	ope of Work (Check Al	II That Apply)						Dour	101101	117 / 100 10	,		-				
×	≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demolit					Mi Gle	III Containmen ini-Enclosure ovebag Proces	dure						
			1	Locati				×	. No	on-Exempted (*) and Non-	Friable F			ment		
	Location Asbestos-Containing TO BE ABA In Facili (13)	Material (ACM) ATED	Use Ma	Normal ed Sole aintena stodial S (12)	ly by nce/	(i.e. tl	Desci os Contain hermal sy surfacin other mis	stems	fateria s insula T, or	ation,	Amount (Specify SF or LF	2	Domonia	Repair	Encapsulate	Enclosure	
			Yes	No	N/A				324						ate	Э	
	1st Floor - Th	roughout			X		Fire	Door	rs		300 SF	X					
													+				
No	me of Registered Was	te Hauler		L	IDED M	lasta	Cubia V	and c		Now of D		- JEII					
	andenburg Industr			Н	JDEP W lauler ID 1838	No.	Cubic Ya of Waste 30			Name of Re	0.54						
	y, State thlehem, PA						Disposal 10/18/2			City, State Bethleher	m, PA						
	mpleted by ephen Carne		Title Envir	ronme	ental M	anager	Sign	naturé	4	12		Date 10/11	1/18	3			

o Day wai	ver												Pr	int F
h Begoves+*		NOTIF (F	Pursuant	tale of Ne NOE ASB TOTNUAC	8/60 al	d 12:12	0)				C		\mathbb{W}	
Date of Notification (1) 10/11/2018				of Building rn Hosp						4 (CT '	15	2018	
Agencies Notified Type Notification			Street A		itality /	1011301			-					
☐ EPA ☐ Initial				elaware						ACD			177	N. E.
DEP X Amended Amendmen Emergency		_	Buffal	ate, Zip Co o, NY 14					Lander	No. of Street, or other Landson	Commercial and Alberta	White You		H# 22
DOH justification)	9 9	' [f Contact Vheeler						phone N				
DCA Cancellation	1		er eesselbevoore	ILITY INFO	ORMAT	ION	_		/10	-362-1	230			
Name of Facility Where Abatement is Takin	ng Place (3)			<u> </u>	1011	Тур	e of Facility	(4)					-
Former Bally's Fitness Street Address								School (K-	12)					
350 Route 46							×	Subchapte Other (i.e. etc.)	r 8 (Other private &	than K- commer	·12) cial bui	ldings	, hom	es,
City (5) Wayne								are Feet 000	# of F	Floors	E	3ldg. <i>A</i>	Age	
County (6) Passaic			County (STATE	Code (7) USE ONLY			Aba	rent Use (Pr andoned			shed)			
Name of Monitoring Firm Hired by Building N/A	Owner (8))	ASC	I No.				atement Co i Environn			s, Inc			
Street Address						Street 135 I		ess elon Road	d Suite	102				
City, State, Zip Code								Zip Code , NJ 0740	5					
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph 908-2				License	No.			
Start Date (10) 10/8/2018	Schedule 10/22/2		mpletion	Date (11)				SHA Monitor Environn			s. Inc.			
Occupancy Status During Abatement (Chec	k Only Or	ne)		-		Street					0, 1110.			- 2
Facility Closed/Vacated During Entire	Period of	Abater	nent					elon Road	Suite 1	102				
Abatement Performed Outside of Norm Other – Describe:	nal Facility	y Hour	S					Zip Code , NJ 0740	5					
Scope of Work (Check All That Apply)						13000	01011	, 140 07 40						-
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demoli				×	M G	ull Containm ini-Enclosur lovebag Pro on-Exempte	e cedure				•	
	Is	Locat	ion					on Exemple	a () and	NOTI-I TIE	I I I I	200000000	ement	
Location of	1	Norma ed Sole	lly			scription		P. P. Santana				Ту	ре Г	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	intena todial ((12)	nce/ Staff?	Asbesi (i.e.	thermal surfa	taining M systems cing, VA niscellan	insu T, or		(Sp	ount ecify or LF)	Removal	Repair	Encapsulate	Enclosure
D (5	Yes	No	N/A										e	-
Roof Parapet			X			anel Be			250	0 SF	X			
					Perime	eter Fla	shin	g						
Name of Registered Waste Hauler		1.	LIDES :											
Yannuzzi Group, Inc.		1000	IJDEP W lauler ID 17467		of Wa	Yards ste		1	Registere Fairles		ıll			
City, State Kinnelon, NJ			2000 (ANSON)		Dispo	sal Date 2/2018		City, Stat	e s Hills, F	PA			7/2	
Completed by John Mucha	Title AHEI	RA Pi	roject D	esigner	8	ignature	4		, ,		ate 0/11/2	2018		
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Uh 209			NOTI	FICATIO	OF ASE	ESTOS	ABATE	MEN 0)	т					<u></u>		
Date of Notification (1) 10/8/2018				Name Eric	of Building Daly	Owner/	Operato	r (2)			00	CT 1	5	20.	18	
Agencies Notified	Type Notification			Street	Address											+
× EPA	Initial										ASPE		00	6.15 E	715 3	ـــل
DEP DOL	Amended Amendmen			City, S Fanv	tate, Zip Co vood NJ	ode 07023				L masses and	droberezo, 150	S underland	erni	Ţ.,		
DOH DCA	Emergency justification) Cancellation		g		of Contact to Stanko	vic, P	roject N	Mana	ıger	<u>T</u> e	lephone	Numb	er			
Name of Facility Where	Abatement is Takir	ng Place	(3)	FAC	CILITY INF	ORMAT	ION	Typ	o of Fooility	(4)						
Residence		•	(-)					Printers.	e of Facility							
Street Address									School (K-Subchapter Other (i.e. petc.)	8 (Oth	er than I & comm	K-12) ercial l	ouila	ings	, hom	ies,
City (5) Fanwood								Squ 193	are Feet	# 0	f Floors			dg. /	Age	
County (6) Union					Code (7) USE ONLY)		Curr	ent Use (Pri sidence	or if be	ing demo	olished)			
Name of Monitoring Firm	Hired by Building	Owner (8	3)	ASC	M No.		Name Che	of Ab ckma	atement Cor ark Industr	ntractor rial	(9)					
Street Address							Street 54 N		ess an Dr							
City, State, Zip Code									Zip Code J 07871							
Project Manager for Moni	t Manager for Monitoring Firm				one No.		Teleph 973-		lo. 2645		License 01334					
Start Date (10) 10/9/2018					Date (11)		Name Chec	of OS	HA Monitor Irk Industr	ial						
Occupancy Status During		2020 In 1940 Table Com					Street									
Facility Closed/Vaca Abatement Performe Other – Describe:	ted During Entire F ed Outside of Norm	Period of nal Facilit	Abater y Hour	nent s				tate, Z	ip Code							
Scope of Work (Check All	That Apply)						Spar	ta N	J 07871			Aug -				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	· • • • • • • • • • • • • • • • • • • •	(Control of the Control of the Contr	Renova Demoli				×	Mi	ll Containme	edure						
		Is	s Locat	ion		227		1 110	n-Exempted	() and	I NON-Fr	iable F		0.00	ment	
			Norma ed Sole			Des	scription	of					_	Ту	ре	
TO BE ABA	TO BE ABATED In Facility					thermal surfac	aining M systems cing, VAT niscelland	insula F, or	I (ACM) ation,	(S	mount pecify or LF)	Kelliova		Repair	Encapsulate	Enclosure
Kitchen/Hallway	Kitchen/Hallway/Bathroom			N/A		011 01									te	е
Tallway/	Datiliooni		X			9"x 9	' floor t	iles		35	0 SF	Х	1			
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Name of Registered Waste Newark Carting LLC	e Hauler		1000	JDEP W auler ID	TT TT TT	Cubic \ of Was 4			Name of R Waste N							
City, State Hillside NJ						Dispos	al Date		City, State Tulleyto		Ą					
Completed by Corey Stankovic)			Si	gnature/	$\cap \in$	-,		1	Date	20-					
		CEO						2	Farkon	~		10/8/	2 07	Ø		

Date of Notification (1)		NOT	FICATIO Pursuan	NOF AS	lew Jerse BESTOS 0 8:60 at	ABATE d 2:12	0)		GE		7			T) Washington Chicago and the
10/11/2018					g Owner. on Pequ				OCT 1	5 20	18.		000	100
Agencies Notified Type Notification				Address	ni oqu	armoor	N LLO				me	CK#	000	100
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DEP Amended DOL Amendment	##			tate, Zip (.=			-		454			t t
Emergency		g		ing Riag	ge, NJ	0/920)							
DCA justification) Cancellation					ı ndersor	1			Telephon 973-74					
None of Casilla IVIII					FORMAT				373-74	7-3370				
Name of Facility Where Abatement is Takin Former Jones Hardware	g Place	(3)			. 1000,1-210 - 0		Type of	Facility (4)						
Street Address							Sci	nool (K-12)	/Other the	16.40)				
600 Newark Pompton Turnpike							x Oth	ner (i.e. priv	(Other than ate & com	n K-12) mercial t	ouilo	lings	, hom	nes,
City (5)							Square f		# of Floor	S	В	ldg. A	Age	
Pompton Plains / Pequannock Tws County (6)	sp.						2,500		2		6	0+	igo	
Morris			County (STATE	Code (7) USE ONL	y)		Current	Use (Prior Hardwar	if being der	nolished)			
Name of Monitoring Firm Hired by Building (Owner (8	3)	ASC	M No.		Name		nent Contra						
Whitestone Associates Inc. Street Address								gnostic L	LC					
35 Technology Drive South							Address Ienwild	Δνο						
City State Zip Code							tate, Zip (
Warren, NJ 07059								e, NJ 07	403					
Project Manager for Monitoring Firm Jerremy Hasset			Telepho		_	173	ione No.			se No.				
	Schedu	led Cor		96-7955 Date (11)			928-399		011	81				
10-22-2018	11-5-2		npietion	Date (11)			of OSHA I nat Diac	Monitor Inostic Ll	C					
Occupancy Status During Abatement (Check	Only O	ne)					Address						-	
Facility Closed/Vacated During Entire P	eriod of	Abater	nent			100000000000000000000000000000000000000	lenwild /							
Abatement Performed Outside of Normal Other – Describe:	al Facilit	y Hour	S				tate, Zip C					1700 720		-
Scope of Work (Check All That Apply)						Bloom	mingdal	e, NJ 074	403					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	(married)	Renova Demoli				×××	Mini-Er Gloveb	nclosure ag Proced	with Negat ure) and Non-I				9	
		Locat	550500									bate	ment	
Location of Aspestos-Containing Material (ACM)	Use	Normal ed Sole	ly by	Achae		cription					T	Ту	pe	
TO BE ABATED In Facility		intena todial 8		(i.e.	thermal s	systems	aterial (AC insulation	J(I)	Amount (Specify	7		71	Enc	En
(*3)		(12)				ing, VAT iscellane		ĺ	SF or LF)	Kemova		Repair	Encapsulate	Enclosure
	Yes	No	N/A							<u>a</u>	-	7	late	ıre
Exterior			X		Trans	ite Sid	ing		6,100 SF	- X	1			
Exterior			X		Windo	w Glaz	zing		400 LF	X	Ť			
Basement			X		Ε	lbows			7 EA	X	T			
Basement			X	Ther	mal Sys	stems !	Insulatio	n	46 LF	X				
Name of Registered Waste Hauler		1 1	JDEP Wa	aste	Cubic Y	'ards		1	istered Lar	1 532				
Hazmat Diagnostic LLC / Newark Ca	rting Ir	20	35440		of Wast	e	F	airless La	andfill					
City, State Bloomingdale, NJ / Newark, NJ					Disposa	al Date	- 4	ty, State	D.4					
Completed by	Title				TBD	gnatuge,	M	orrisville	, PA	D.,				
Tatiana Rotaru				SIE	Ki	1211			Date 10/11	/20	18			

Ch 208			NOTE	LOATION	Tate of Ne WOF ASE TO NJAC	ESTOS	ABATE	MEN 0)	Т		EC	E	\mathbb{V}	ij	
Date of Notification (1) 10/3/2018				Name o Rory	of Building Phillips	Owner/0	Operator	r (2)			OCT	15	201	8	
Agencies Notified Typ	e Notification			Street A	Address					135					
EPA DEP	Initial Amended			City, Sta	ate, Zip C	ode					VUSE ST	en cr	eria Nu	11, 4,	+1
X DOL	Amendment Emergency (_	Monto	clair NJ	07043			1		Minimako, mpovija	todiki ineriler V	vogen.	***	0.15
DOH DCA	justification) Cancellation	_			of Contact o Stanko	ovic, Pr	oject N	Vlana	ager	Te	enhone N	lumher			
Name of Facility Where Abate	ment is Takin	g Place (3	3)	FAC	ILITY INF	ORMAT	ION	Tvp	e of Facility	(4)	50100 T-01-0				
Residence			300				1		School (K-	1980					
Street Address								×	Subchapte Other (i.e. etc.)	er 8 (Oth			ldings	, hom	es,
City (5) Montclair		A114							are Feet 241	# 0	f Floors		3ldg. / 1951		
County (6) Essex					Code (7) USE ONLY)			rent Use (Pr sidence	ior if be	ng demol	ished)			
Name of Monitoring Firm Hire	d by Building (Owner (8)		ASC	И No.				atement Co ark Indust		(9)				
Street Address							Street 54 N		ess an Dr						
City, State, Zip Code									Zip Code IJ 07871						
Project Manager for Monitoring	g Firm			Telepho	ne No.		Teleph 973-		No. -2645		License 01334				
Start Date (10) 10/4/2018		Schedule 10/10/			Date (11)				SHA Monitor ark Indust						
Occupancy Status During Aba				7			Street		ess an Dr			Har			
Facility Closed/Vacated E Abatement Performed Ou Other – Describe:	Ouring Entire Putside of Norm	eriod of A al Facility	Abaten Hours	nent s			City, S	state,	Zip Code						
Scope of Work (Check All Tha	t Apply)						Ора	rta i	0 07071						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Company	Renova Demolii				×××	M G	ull Containm lini-Enclosur lovebag Pro on-Exempte	e cedure					
		ls	Locat	ion				23 IN	on-Exemple	d () and	u Non-Fin	able Pro	Abate	ement	t
Location of Asbestos-Containing Mate	rial (A CNA)		Normal d Sole		A - b		scription				K-18 65	-	Ty	ре	
TO BE ABATED In Facility		5 S S S S S S S S S S S S S S S S S S S	intena todial s			thermal		s insu	al (ACM) lation,	(5	mount specify	Rer	Re	Encapsulate	Enc
(13)			(12)				niscellan)	51	or LF)	Removal	Repair	psula	Enclosure
Basement		Yes	No	N/A										ਰਿ	
Basment		-	X				insula oor tile				5 LF	X			
Dasmont		1		-		110	JOI LIIE	8		47	75 SF	X			
	-			-									-		
Name of Registered Waste Ha Newark Carting	uler		1000	J IJDEP W lauler ID		Cubic of Was					red Land				
City, State Hillside NJ						4 Dispos	sal Date	i i	City, Star	te					
Completed by		Title					ignature		Tullyto	wii PA		Date			
Corey Stankovic		CEO					.g.,u.u.c	1	Janko	M		10/3/2	018		

shoolero1		NOTI	FICATION Pursuant	ate of Nev	w Jersey ESTOS / 8:00 and	BATEMI 12:120)	ENT	EG	E	\mathbb{V}		Ñ	
Date of Notification (1) 10/11/2018				f Building Jackson		And the second s	100	003	152	048		1064	0.4
Agencies Notified Type Notification			Street A		requa	ITITIOCK L	-LU 13 GA	001		-WHE	CKH	ו סטנ	UI
				iduress It. Airy R	oad			A 0 5 6			_ _	}	
EPA Initial DEP Amended				ate, Zip Co				As and the	ran aan		***		
DOL Amendmen				ng Ridge		07920	L	Minimage, "Pro-	statistic on a fact that	j. i i i i i i i i i i i i i i i i i i i			
Emergency justification				f Contact				Tele	phone Nu	mber			
DCA Cancellation			Suzar	ne Hend	derson			1 1	3-747-95				
			FACI	ILITY INFO	DRMATIC							1 27 3 2	
Name of Facility Where Abatement is Takin	ng Place (3	3)					Type of Facility	(4)					
Apartment Building			media.				School (K-						
Street Address						aus) Nai	Subchapte Other (i.e.				dinas	hom	29
602 Newark Pompton Turnpike							etc.)	92.		- 2500.007	3.53		
City (5) Pompton Plains / Pequannock Tw	en					100	Square Feet		Floors		lldg. A	\ge	
County (6)	-Sμ.		Country	Code (7)			2,500	2	1 1 1	1 3	60÷		
Morris				USE ONLY)			Current Use (Pr Jones Hardy		-	nea)			
Name of Monitoring Firm Hired by Building	Owner (8))	ASCN	A No			Abatement Co						
Whitestone Associates Inc.	, , ,	1					at Diagnosti		0)				
Street Address						Street A							
35 Technology Drive South						16 Gle	nwild Ave						
City, State, Zip Code						City, Sta	te, Zip Code						
Warren, NJ 07059						Bloom	ingdale, NJ	07403					
Project Manager for Monitoring Firm			Telepho			Telepho			License N	0.			
Jerremy Hasset				96-7955			28-3995		01181				
Start Date (10) 10-22-2018	11-5-2		ompletion l	Date (11)			OSHA Monitor						
Occupancy Status During Abatement (Che						Street A	at Diagnosti	CLLC					
		-1010					nwild Ave						
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr	Period of A	Abate / Hou	ement irs		ŀ	333,000,000	te, Zip Code						_
Other - Describe:		8			_		ingdale, NJ	07403					
Scope of Work (Check All That Apply)							3						
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf			vation lition			×	Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	e cedure				·e	
	Is	Loca	ation									emen	t
Location of		Norm	ally lely by		Des	cription of	f			-	1 1	/ре	Т-
Aspestos-Containing Material (ACM) TO BE ABATED			ance/				erial (ACM) nsulation,		nount	70		E	m
In Facility	Cus	todial (12	Staff?	(1.0.	surfac	ing, VAT,	or		oecify or LF)	Remova	Repair	Encapsulate	Enclosure
(13)		(12	,		other m	iscellane	ous)			oval	air	sula	surc
	Yes	No	N/A									ਰ	
Exterior			X		Trans	site Sidir	ng	3,70	00 SF	Х			
Exterior			×		Windo	w Glazi	ng	34	0 LF	X			
Basement			X		HVAC	Duct Pa	aper	10) LF	Х			
Name of Pagistared Wests Have			NIDED		0.1.		T						
Name of Registered Waste Hauler	North-	- 1	NJDEP W Hauler ID		Cubic of Was		1 402 40 20	107 608	ed Landfill				
Hazmat Diagnostic LLC / Newark 0	arting Ir	10	0035440)/4509	TBD		Fairles	s Landi	111				
City, State Bloomingdale, NJ / Newark, N	J				Dispos	al Date	City, Sta Morris	te ville, PA			7,500		
Completed by	Title					gnature	10101113		Da	te			
Tatiana Rotaru	COC)				1	:-/		1	0/11/2	2018		
						70	21111						

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Ch 090876		NO II	FICATION	OF ASE	HISTOR	APANTE	MENT 0)			E C			\mathbb{V}		
Date of Notification (1) 10/11/2018			Name o	of Building ESS Sc	Owner/O olutions	Derator US In	r (2) C.		. 4	OCT	15	2	018	and the state of t	10 m
Agencies Notified Type Notification EPA Initial Amended	1		Street A	Address King Ge	eorge P	ost Ro	ad		AS	PEST	00.0	187	Shi		4. *
X DOL Amendmen				ate, Zip C				Longo			and the section of				
➤ DOH justification DCA Cancellation)	3		of Contact					100	ephone 2-306					
Name of the Name o			FAC	ILITY INF	ORMATI	ON									-
Name of Facility Where Abatement is Takin LANXESS Solutions US Inc.	ng Place ((3)						of Facility	776757878	189, 100 - 170 00	200 - 100 H 100 P				
Street Address 1020 King George Post Road								School (K- Subchapte Other (i.e.	er 8 (Othe			wild	linas	hom	99
City (5)								etc.)	11						,
Fords							oqua	ire Feet	# 01	Floors		R	dg. A	ge	
County (6) Middlesex				Code (7) USE ONLY	0			ent Use (Pr rage tank							20.10
Name of Monitoring Firm Hired by Building Emilcott Associates, Inc.	Owner (8)	ASCA	И No.			of Aba	atement Co emolition	ntractor	(9)				s, L	LC
Street Address 190 Park Avenue							Addre Old E	ss agle Sch	nool Ro	ad, S	TE 91	0			
City, State, Zip Code Morristown, NJ 07960				77 - 10 - 10 - 10 - 10 - 10 - 10 - 10 - 				ip Code A 19087							
Project Manager for Monitoring Firm Jason Busacco			Telepho 973-53	ne No. 38-1110)	Teleph	none N 581-7			Licens					
Start Date (10) 7/16/2018	Schedul 12/28/		mpletion	Date (11)				HA Monitor emolition		ironm	ental S	Ser	vice	s, Ll	
Occupancy Status During Abatement (Chec	ck Only O	ne)				Street									
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Cother – Describe: Isolated Tank Farm	Period of mal Facilit	Abater y Hour	nent s			City, S	tate, Z	agle Sch ip Code A 19087	iool Ro	ad, S	TE 91	0		-	
Scope of Work (Check All That Apply)							,						11.251		
≥3 sf or ≥3 if ≥160 sf or ≥260 if	governments.	Renova Demoli				×	Mir Glo	Il Containm ni-Enclosur ovebag Pro n-Exempte	e cedure					2	
Location of		Locat Norma	lly		Des	cription								ment	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	ed Sole aintena todial ((12)	nce/		stos Conta thermal	aining M systems ing, VA	laterial s insula T, or		(S	nount pecify or LF)	10000	Ramoval	Repair	Encapsulate	Enclosure
	Yes	No	N/A								2			ate	e
Pipe Insulation		X			Pipe Ins				13	50 LF	X				
Oil/Ester Tanks Insulation		X			Pipe Ins				60) LF	X				
Oil Tank Surfacing Insulation		X		Е	Black Fe	elt (sur	facin	g)	116	31 SF	X				
Oil Tank Insulation		X				ation (TSI)			6 SF	X				
lame of Registered Waste Hauler lorwith Trucks, Inc.		+	IJDEP W lauler ID W-199 8	No.	of Was			Name of Cumbe				fill			A. e. e.
City, State Iorthampton, PA					Dispos 10/26/	al Date 2018		City, Stat Shippe		, PA				-	
Completed by Mark Klotzbach	Title Vice	Presi	dent		Si	gnature					Date 10/1	1/2	018		

D&S Proj. #: 18-215 Date of Notification (1)	54) Name of B	(Purs	idation of As	1 8:6	ds Abatement D and 12 120)	R	C E	1 5 20	<u>V</u> E	
1 0 / 0 5 / 1 8	1	sherlyn		mer/Operator (2	2)		AS	PBERTOR	17:5565	Pagar 16	J
Agencies Notified Type Notifica	ation	Street Add	STATE OF THE STATE					110	mother space of		
DEP Amended	,	City Ctoto	Zip Code				.4				
DOL Amendment			, zip Code , nj 0706	55							
DOH (including justification	l tr	lame of Co		,,,			Telepho	ne Numbe	r		
DCA Cancellation	* 11	sherlyn	dorsett								
9			FAC	CILITY INFORM	MATIO	N	1				
Name of facility where abatement	is taking pl	ace (3)					Type of Facility				
sherlyn dorsett							1 =	ol (K - 12) hapter 8 (O		n K-12\	
Street Address							○ Other	(Private/Co	ommerc		â
07.75							Square Feet	./Homes, e # of Floor		Bldg. A	Age
City (5)	Cou	nty (6)			10000000	unty Code (7) ate use only)	Current Head	21161-1-	<u> </u>	· 1 B	
rahway	uni						Current Use (F	rior it being	g demoi	ished)	
Name of Monitoring Firm Hired by	Blag. Own	er (8)		ASCM No.		Name of Abatement	14552 (B.550)				
Street Address					\dashv	D & S RESTORA Street Address	ATTON, INC.				
City, State, Zip Code						_20 California Av	re.				
oity, state, zip code						City, State, Zip Code	502				
Project Manager for Monitoring Firm	า	Ph	none Numb	er	-	Paterson, NJ 07: Telephone Number	503	License	Number		
						973-345-8020		0	1169		
Start Date (10)	2000000		on Date (1	1)		Name of OSHA Monit D & S Restoration	17.1				
10/18/18 Occupancy Status During Abatement	10/31					Street Address					
Facility closed/vacated during	entire perio	od of abate	ement.			20 California Avo City, State, Zip Code	enue				
Abatement performed outside Describe:		acility hou	rs-		_	, , , , , , , , , , , , , , , , , , ,					
Other-Describe: NORMAL F					-	Paterson, NJ 075					
	Renovatio	n				-	ull Containment v Ini-enclosure	//negative	pressure)	
≥160 sf or ≥260 lf	Demolition						Slovebag procedu		-i-bl		
Location of	Is location		used solely	/			Non-Exempted (*)	and Non-II	RF	8 E	E
asbestos-containing material (acm) to be	staff(12)	11007003	T	Description material (/		sbestos-containing	Amount (Specify S	For	e e	C	n
abated in facility (13)	Yes	No	N/A		30		LF)		0 a V i	a p	Ľ
BASEMENT		X		PIPE INSU	LATI	ON	75 L FT		X C		
									밀닏		무
									片늗	뉘片	+
Registered Waste Hauler											古
D & S RESTORATION, INC.	NJDE 1350	P Hauler II)6	- 100 T	ubic Yards of W yd	aste	Name of Registered L TULLYTOWN, R		COVER	Y		
City, State PATERSON, NJ 07503	•		Disposal D	ate		City, State					
Completed by (Print or Type)	Title		10/10/10	Signature		TULLYTOWN, I	A	Date			
BOGDAN JOLDZIC	PRESIDE	ENT						10/05/2	.018		

D & S RESTORATION, INC. 13506 2 yds. TULLYTOWN, RESOURCE RECOVERY Ity, State Disposal Date City, State PATERSON, NJ 07503 10/18/18 TULLYTOWN, PA Ity ompleted by (Print or Type) Title Signature														
Display Type Notification Street Address Street Address Telephone Number Tele	Ch 730	Á)	(Purs	fication of Assuant to NUA	besto C 8:6	s Abatement			this are of the passes and	-			The second secon
Separate Notification Sepa			i		vner/Operator (2	2)				701	U Z	010		
□ DPD		ation										T-17-2-2-		- É
DOL Characteristics City, State, Zip Code County (6) County (7) County (7) County (8) County	☐ EPA ☐ Initial		Street Ad	dress					7			14 = 11 	. 22	1
DOL Energency (including) justification) Name of Contact gillian fawcett FACILITY INFORMATION Name of facility where abatement is taking place (3) School (K-12) S	U DEP I										erigaari 🖵	* ***		
Store Address Street Address Stree	M DOL I—			2/3										
DCA Cancellation Sillian fawcett Staking place (3) School (K, 12) Subchapter 8 (Other than K-12) Subchapter 8 (Other t		у			nj 07675									
Canonisation Statistic County (a) State County (b) County (code (7) County	justification	n)	iname or	Contact					Telephone	e Numbe	Γ			
Name of facility where abatement is taking place (3) gillian fawcett Street Address City (5) County (6) Wood cliff lake	Cancellation	on	gillia	n fawcett					·					
gillian favcett Street Address School (K-12) Subchapter 3 (Other than K-12) Square Feet # of Floors Bidg, Age				FA	CILITY INFORM	OITAN	N							
gillian favcett Street Address City (5) County (6) County (7) (State use only) Wood cliff lake Dergen Word Part Address City (5) Street Address City (5) Street Address City (6) Street Address City (7) Street Address City (8) Dergen ASCM No. Name of Montoring Firm Hired by Bidg. Owner (8) Street Address City (8) Dergen ASCM No. Street Address City State, Zip Code Paterson, Ni 07503 Start Date (10) Start Date (10) In 10/11/18 Coupanoy Status During Abatement (Check only one) □ Sched. Completion Date (11) □ Did 11/18 Coupanoy Status During Abatement (Check only one) □ Start Date (10) □ Sched. Completion Date (11) □ Start Date (10) □ Sched. Completion Date (11) □ Start Date (10) □ Sched. Completion Date (11) □ Start Date (10) □ Sched. Completion Date (11) □ Coalifornia Avenue City, State, Zip Code Paterson, Ni 07503 Cope of Work (check all that apply) □ Start Date (10) □ Coalifornia Avenue City, State, Zip Code Paterson, Ni 07503 Full Containment w/negative pressure Infinite nichosure Non-Exempted (1) and Non-finiable procedure Value of Coalifornia Avenue City, State, Zip Code Paterson, Ni 07503 Paterson, Ni 07503 Description of asbestos-containing material (ACM) Paterson, Ni 07503 Pa	Name of facility where abatement	t is taking	place (3)					TT						
Street Address City (5)	aillian farreatt													
City (5)								- 1						
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Wood cliff lake Name of Monitoring Firm Hired by Bidg. Owner (8) ASCM No. Name of Monitoring Firm Hired by Bidg. Owner (8) Name of Monitoring Firm Hired by Bidg. Owner (8) Name of Monitoring Firm Hired by Bidg. Owner (8) Name of Abatement Contractor (9) D & S RESTORATION, INC. Street Address 20 California Ave. City, State, Zip Code Paterson, NJ 07503 Telephone Number 973-345-8020 01169 Name of OSHA Monitor D & S Restoration, Inc. Street Address 20 California Ave. City, State, Zip Code Paterson, NJ 07503 Telephone Number 973-345-8020 01169 Name of OSHA Monitor D & S Restoration, Inc. Street Address 20 California Ave. City, State, Zip Code Paterson, NJ 07503 Start Date (10) D & S Restoration, Inc. Street Address 20 California Ave. City, State, Zip Code Paterson, NJ 07503 Paterson, NJ 07503 Scope of Work (check all that apply) Description of asbestos-containing material (aCM) D & S RESTORATION, INC. Street Address 20 California Ave. City, State, Zip Code Paterson, NJ 07503 Description of asbestos-containing material (aCM) Description of asbestos-containing material (aCM) Description of asbestos-containing material (aCM) D & S RESTORATION, INC. Street Address 20 California Ave. City, State, Zip Code Paterson, NJ 07503 Description of asbestos-containing material (aCM) D & S RESTORATION, INC. State Use Address 20 California Ave. City, State, Zip Code Paterson, NJ 07503 Description of asbestos-containing material (aCM) Description of asbestos-containing material (aCM) Description of asbestos-containing material (aCM) D & S RESTORATION, INC. State Use Address 20 California Avenue City, State, Zip Code Paterson, NJ 07503 Description of asbestos-containing material (aCM) D & S RESTORATION, INC. D & S RESTO								.				Е	ldg. A	ge
Name of Monitoring Firm Hired by Bldg. Owner (8) Name of Monitoring Firm Hired by Bldg. Owner (8) Name of Abatement Contractor (9) D & S RESTORATION, INC. Street Address 20 California Ave.	City (5)	Co	ounty (6)				77 - Table 1	1				_		
Name of Monitoring Firm Hired by Bidg. Owner (8) ASCM No. Name of Abatement Contractor (9)	wood alife 1-1					(Sta	ite use only)		Current Use (Pr	ior if bein	g der	nolish	ed)	
D & S RESTORATION, INC.	The state of the s				T 400MM	ــــــــــــــــــــــــــــــــــــــ	I Name of Obstant							
Street Address Street Address Street Address Street Address 20 California Ave.	realize of Monitoring 1 mm med by	y blug. Ow	mei (o)		ASCIVI No.		1							
20 California Ave. City, State, Zip Code Paterson, NJ 07503 Sceupancy Status During Abatemat (Check only one) Describe: De	Street Address					_)RA	TION, INC.					
Troject Manager for Monitoring Firm Phone Number Phone	Street Address													
Paterson, NJ 07503 Telephone Number Paterson, NJ 07503 Telephone Number Paters	City, State, Zip Code					_	- Harrison - Anna Control - Anna Con	-					-	
Telephone Number Telephone Number Telephone Number Telephone Number Telephone Number Telephone Number 973-345-8020 01169 Name of OSHA Monitor D & S Restoration, Inc. Street Address 20 California Avenue City, State, Zip Code Paterson, NJ 07503 Description of asbestos-containing material (acm) to be abated in facility (13) Amount facility (14) Amount facility (15) Amount facility (16) Amount facility (17) Amount facility (18) Amount facilit									22					
Start Date (10) 10/17/18	Project Manager for Monitoring Fire	m	Т	Phone Num	ber	-			J3	License	Num	her		
D. & S Restoration, Inc. O/17/18														
D & S Restoration, Inc.	Start Date (10)	ISch	ed Compl	etion Date (11)		Name of OSHA M	lonito	г					
Coupancy Status During Abatement (Check only one) Facility closed/vacated during entire period of abatement. Abatement performed outside of normal facility hours-Describe: Other-Describe: NORMAL HOURS Paterson, NJ 07503	# 0#0			otton Bato (D & S Restor	ation	n, Inc.					
Facility closed/vacated during entire period of abatement. Abatement performed outside of normal facility hours- Describe: Other-Describe: NORMAL HOURS Scope of Work (check all that apply) >3 sf or >3 lf Renovation Demolition Location of asbestos-containing material (acm) to be abated in facility (13) ASSEMENT Si location normally used solely by maintenance/custodial staff(12) Yes No N/A PIPE INSULATION PIPE INSULATION 140 l ft Description of asbestos-covery							Street Address							
Abatement performed outside of normal facility hours—Describes: NORMAL HOURS Scope of Work (check all that apply)									nue					
Other-Describe: NORMAL HOURS Paterson, NJ 07503							City, State, Zip Co	de						
Scope of Work (check all that apply) Say of or >3 if Non-Exempted (*) and Non-friable procedure Location of asbestos-containing material (acm) to be abated in facility (13) BASEMENT Description of asbestos-containing material (acm) to be abated with the procedure of the p	Describe: NORMAL NORMAL	HOURS				_	Dataman MI	0750	12					
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□ ≥160 sf or ≥260 lf □ Demolition □ Description of asbestos-containing material (acm) to be abated in facility (13) □ Description of asbestos-containing material (ACM) □ Description of asbestos-conta	N - 2 - 5 2 / 5		tion				Į.			negative	press	sure		
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egistered Waste Hauler Description of State PATERSON, NJ 07503 Disposal Date 10/18/18 Disposal Date 10/18/18 Disposal Date 10/18/18 Signature Disposal Date 10/18/18 Date	BASEMENT		1		DIDE INCL	ΙΔΤΙ	ON		140 1 ft		-	1	-	
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D&S Proj. #: 18-219 Date of Notification (1) 1 0 / 0 9 / 1 1 8 Agencies Notified Type Notification EPA Initial Amended Amendment # DDD Emergency (including justification) DCA Cancellation	ration Street #: City, Name Name	ne of Building Over the Address State, Zip Code IAPLEWOOD of Contact andy donatelli	fication of Assumption NUA	2)	os Abatement io and 12:120)	A.	OCT 1 5 2018 SBESTOS GONTROLS one Number
Name of facility where abatement	is taking place	(3)				Type of Facility	
randy donatelli							ol (K - 12) hapter 8 (Other than K-12)
Street Address						○ Other	(Private/Commercial
						Square Feet	./Homes, etc. # of Floors Bldg. Age
City (5)	County (6)			unty Code (7)		
MAPLEWOOD	essex			(Sta	ate use only)	Current Use (F	Prior if being demolished)
Name of Monitoring Firm Hired by	Bldg. Owner (8)	ASCM No.	1	Name of Abatement C	Contractor (9)	
Street Address					D & S RESTORA	TION, INC.	
0.10017.10.10.33					Street Address 20 California Av		
City, State, Zip Code				-	City, State, Zip Code	е.	
Project Manager for Monitoring Firm					Paterson, NJ 075	03	
1 10 Cot Manager for Worldoning Film	<u>lý</u>	Phone Numb	per		Telephone Number 973-345-8020		License Number 01169
Start Date (10)	Sched. Co	mpletion Date (1	1)	_	Name of OSHA Monito	or	01109
10/26/1818	11/16/18	•	.,		D & S Restoratio	n, Inc.	
Occupancy Status During Abatemen	it (Check only o	ne)		-	Street Address 20 California Ave	nue	
Facility closed/vacated during Abatement performed outside	entire period of	abatement.			City, State, Zip Code	nac	
Describe: NORMAL H		, mound		-11	Paterson, NJ 075	0.2	
Scope of Work (check all that apply)			-			//negative pressure
≥160 sf or ≥260 lf	Renovation Demolition				<u></u> м ⊠	ini-enclosure lovebag procedur	
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BASEMENT		X	PIPE INSUL	ATIO	ON	95 1 ft	
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Registered Waste Hauler	NJDEP Ha	wies ID# Co	ubic Yards of Wa				
D & S RESTORATION, INC.	13506		yd	asie	Name of Registered La TULLYTOWN, R	andfill ESOURCE RE	COVERY
City, State PATERSON, NJ 07503		Disposal Da 10/29/18			City, State		
Completed by (Print or Type)	Title	10/29/10	Signature		TULLYTOWN, P.	A	Date
	PRESIDENT						10/09/2018
	ou not use this	form for asbesto	s licensure exen	npted	activities.		

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the second secon			ARCMNA	-11	Name of Absterr	int Con	(ractor (9)					-
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Agencies Notified Type Notification				Address	OL LL						<u></u>	ne	CK#U	1001	02	
EPA Initial		887	7th Ave)			ASBESTOS COMTROL							-		
DEP Amended Amendmen				tate, Zip (accepted USA		water.	Janes III	<u> </u>	
_ Fmergency	(includin	g		York, N		6										
DOH justification Cancellation				of Contac Maday						lephone						
				CILITY IN	and the second	ION			20)1-571	-344.	5				
Name of Facility Where Abatement is Takir	ng Place	(3)		-			Type of Fa	acility (4))				-			
The Plaza at Woodbridge (Spirit Street Address	Hallow	een)						ol (K-12)								
675 RT1 South							Subc	hapter 8 r (i.e. pri	(Oth	er than	K-12)	huil	dinas	hon		
City (5)							etc.)						- N		162,	
Woodbridge							Square Fe 7,500	et	1 1	f Floors			3ldg. 30+	Age		
County (6) Middlesex			County (STATE	Code (7) USE ONL	Y)		Current Us Comme	se (Prior	if bei	ng dem	olished	(1)				
Name of Monitoring Firm Hired by Building	Owner (8	3)	ASC	M No.		Name	of Abateme									
Whitestone Associates Inc. Street Address							nat Diagn									
35 Technology Drive South							Address			-						
City, State, Zip Code						100000000000000000000000000000000000000	lenwild A									
Warren, NJ 07059							ate, Zip Co ningdale,		403							
Project Manager for Monitoring Firm			Telepho				one No.			Licens	e No.					
Jeremy Hassett Start Date (10)				69-795			73-928-3995 011									
10/25/2018	10/31/		npletion	Date (11))		e of OSHA Monitor zmat Diagnostic LLC									
Occupancy Status During Apatement (Chec							ddress	ostic Li	LC							
Facility Closed Vacated During Entire P	Period of	Abaten	nent				enwild Av	/e								
Apatement Performed Outside of Norm Ciner - Describe: Daily 7am-7pm (Vac	al Facility	v Hours	3				ate, Zip Coo					Observe to				
Scope of Work (Check All That Apply)						D10011	ningdale,	NJ U/	403							
≥3 sf or ≥3 if ≥160 sf or ≥260 if	Established .	Renova Demolit				×	Full Cont Mini-Enc Glovebas Non-Exe	losure Proced	ure	-1070112161				е		
	1200	Locati												ment		
Location of Asbestos-Containing Material (ACM)	Use	Normal ed Sole	ly by	Achae		cription o			12		-	1	1 y	ре		
TO BE ABATED In Facility		intenar todial S		(i.e.	thermal	systems i	iterial (ACM insulation,	1)		nount pecify	1	0	71	Enc	Ē	
(13)		(12)				ing, VAT iscellane			SF	or LF)	Chilore	2000	Repair	Encapsulate	Enclosure	
	Yes	No	N/A								ì	3	Ξ.	ılate	ure	
Basement Storage Space			X	Ther	mal Sy	stems I	nsulation		13	7 LF	X					
Name of Registered Waste Hauler																
Hazmat Diagnostic LLC		57.000	JDEP Wa Buler ID I		Cubic Y of Wast		1	e of Reg			fill					
959 32.505		100	35440		TBD	NG)	Fair	less La	andf	ill						
City, State Bloomingdale, NJ					Disposa TBD	al Date	*	State risville	ΡΔ							
Completed by	Title					nature	17	المستست	, , ,		Date	-				
Tatiana Rotaru	coo					7	ake	1			10/12	2/2	018			

A / /	-			200	100 100 100									-					
CK# 11.	35	1	NOTII I)	St ICATION Pursuant	ate of Ne LOF ASE to NJAC	BESTOS	ABATE	MENT	·		E	G	222		7 [
Date of Notification (1) 10/10/2018				Name o Andy	f Building	Owner/	Operato	(2)					v 60			1			
Agencies Notified	Type Notification			Street A						11:1	1 0	CI	1.5	20	18	-			
☐ EPA	× Initial																		
DEP × DOL	Amended				ate, Zip C						PERM		1 (7	444		1			
	Amendment Emergency	(including			am Park		7932			L	PARTITION OF THE	TOTAL MAN	Sanget o	150 - 5	* \$7 L	ee 2 5			
DOH DCA	justification) Cancellation			Andy	f Contact					Telephone Number									
					LITY INF	ORMAT	ION						_						
Name of Facility Where A	batement is Takir	ng Place (3	3)					Тур	e of Facility (4)									
Private Home Street Address									School (K-1	(2)									
Street Address								×	Subchapter Other (i.e. p	8 (Oth	er than I & comm	K-12) ercial	build	linas	home	25			
City (5)								_	etc.)			010101							
Florham Park								Squ	are Feet	# 0	f Floors		B	ldg. A	ige				
County (6)				County (Curr	ent Use (Pri	or if bei	ing demo	olished	<u> </u>						
Morris					USE ONLY)													
Name of Monitoring Firm I	Hired by Building	Owner (8)		ASCM	No.				atement Cor		(9)								
Street Address								noval	Safety LL	.C									
								rosby											
City, State, Zip Code									Zip Code										
							Pate	erson	, NJ 0750	2									
Project Manager for Monitor	oring Firm			Telephor	ne No.		N 24 3 5 5 5 5	hone N			Licens								
Start Date (10)		Schedule	od Co	mpletien [Data (11)			-400-	35.0		0133	2							
10/24/2018		10/27/2			Jale (11)				HA Monitor Safety LL	С									
Occupancy Status During	Abatement (Chec	k Only On	ie)					t Addre											
Facility Closed/Vacat	ed During Entire	Period of A	Abater	ment			8 Cı	rosby	Ave										
Abatement Performed Other – Describe: 7:	d Outside of Norn 00am - 4:00pm	nal Facility	Hour	S					Zip Code										
Scope of Work (Check All							Pate	erson	, NJ 0750	2									
_	ттак Арріу)	По		-41			F	٦ _											
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		-	lenova emoli				3		ill Containme		Negativ	/e Pre	ssur	е					
							H		ovebag Proc on-Exempted		d Non-F	riahla	Droc	odur	2				
		Is	Locat	ion					ZXOTIPAGE	/ / 411	u 14011-1	Table			ment				
Location of			lorma d Sole			De	scription	n of				-		Ту	ре				
Asbestos-Containing N TO BE ABAT	laterial (ACM) <u>FED</u>	Mai	intena	nce/		tos Cont thermal			al (ACM)		mount Specify		70		Ē	ш			
In Facility (13)		Cust	odial : (12)	Staff?	(0.000)	surfa	cing, VA	AT, or			or LF)		Remova	Repair	caps	Enclosure			
(10)		Vac	NI-	I NUA		other n	niscella	neous,	1				val	air	Encapsulate	sure			
First floo		Yes	No	N/A											U				
FIISUIOC) i	-		X		Floor	l iles, l	Masti		25	50 SF		Х		X				
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Nome of Devices	11. 1																		
Name of Registered Waste	Hauler		1000	IJDEP War		Cubic of Was			Name of I	Registe	red Lan	dfill							
Removal Safety LLC			1000	037007		3			GROW	S Nor	th								
City, State Paterson, NJ						1 50	sal Date		City, State			- /							
Completed by		Title				TBD	i	-	Morrisv	ille, P	A								
Lasko Veskov		Presi	dent)(0	ignature	-/	bolon			Date	10/2	2110					

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) 1 5 2018 Date of Notification (1) Name of Building Owner/Operator (2) 10 10 / 18 Seaview Resorts Acquisition Job#1809-5384Check #10604 10605 10606 10607 Agencies Notified Type Notification Street Address X EPA ☐ Initial 5600 Mariner Street, SUite 200 **⊠** DOLWD City, State, Zip Code **⊠** DHSS Amendment #1 Tampa, FL 33609 □ DCA ☐ Emergency (including Name of Contact (NJAC 5:23-8) justification) Telephone Number ☐ Cancellation Chris Walsh 609-517-5741 **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Stockton Seaview Hotel & Golf Club School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, 401 South New York Road homes, etc.) City (5) Square Feet # of Floors Bldg. Age Galloway, NJ 08205 County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Atlantic Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Heath & Safety Services AbateTech, Inc. Street Address Street Address PO Box 365 30 Maple Ave. PO Box 25 City, State, Zip Code City, State, Zip Code Berlin, NJ 08009 Lumberton, NJ 08048 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Jim Proctor 609-704-8850 609-265-2107 00529 Scheduled Completion Date (11) Start Date (10) Name of OSHA Monitor __10__ / __15__ / __18__ <u>11</u> / 16 / 18 **EMSL** Analytical Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 200 Route 130 North Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: ____AM-___PM/__ Cinnaminson, NJ 08077 Scope of Work (Check all that apply) ≥3 sf or ≥3 lf □ Renovation Mini-Enclosure ≥160 sf or ≥260 lf ☐ Demolition Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Repair Used Solely by Encapsulate Enclosure Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED (i.e., thermal systems insulation, (Specify Custodial Staff? IN Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A Regency Wing 1st FI. П \boxtimes Accoustical Fire proofing 2,500 SF \boxtimes Regency Wing 2nd Fl. \boxtimes Accoustical Fire proofing 2,500 SF Regency Wing 3rd Fl. X Accoustical Fire proofing 2,500 SF X Bay Wing 3rd Fl. П X Accoustical Fire proofing 2,500 SF M П Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. Waste AbateTech, Inc. G.R.O.W.S. Landfill 18750 40 City, State Disposal Date City. State Lumberton, NJ 11/16/18 Tullytown, PA Completed By (Print or Type) Title Signature' Gwendolyn Trumbetti Operations Coordinator

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Date of Notification (1)	1	18		1	ne of Buildi epartmer)CT 1 0-5393	5 Ch	201 eck	8 #106	10						
57	ype Notif	ficatio	n		Stre	et Address				ASBESTED COMPANY A							
	Amend	led			-	412.1874		rossing Road	i					eran			
☑ DHSS	Amend		#			, State, Zip							1.5				
□ DCA □] Emerge	ency (includi	ng	La	awrencev	ille	, NJ 08648									
(NJAC 5:23-8)	justifica	ation)		8	Nam	ne of Conta	ct			Telephone	Numbe	r					
	Cancell	lation			Al	i Malik				718-447	7-7787						
N		-			FA	ACILITY I	NFC	DRMATION		46.							
Name of Facility Where Aba		Takir	ng Plac	ce (3)					Type of Facility	(4)							
National Guard Armor	ry								School (K-1	2)							
Street Address									Subchapter Other (i.e., p	8 (Other than	K-12)	al bu	ildina				
1008 Absecon Blvd.									homes, etc.		minercia	ai Du	nung:	٥,			
City (5)									Square Feet	# of Floor	S	Blo	lg. Ag	е	-		
Atlantic City, NJ																	
County (6)					Cou	inty Code (7)(S	TATE USE ONLY)	Current Use (Pr	ior if being de	molishe	d)					
Atlantic									Armory								
Name of Monitoring Firm Hire	ed by Bui	ilding	Owner	(8)	ASCN	l No.	N	ame of Abateme	ent Contractor (9)			-		-	_		
TTI Environmental								AbateTech, I	nc.								
Street Address		erom orland					Si	treet Address							_		
1253 North Church Str	reet																
City, State, Zip Code							_	30 Maple Ave	at the east of the water of the								
Moorestown, NJ 08057							1	Lumberton, N									
Project Manager for Monitorin	ng Firm			Tele	ephone	No.	Te	elephone No.		License No.							
Mike Stocku				6	09-304	1-3969		609-265-2107	00529								
Start Date (10)		Sched	duled (Comple	etion Da	ate (11)	Na	ame of OSHA M	onitor								
10 /22 /1	8	_	11_	16	5_ /	18_		EMSL Analyti									
Occupancy Status During Aba	atement (Chec	k only	one)			St	reet Address									
☐ Facility Closed/Vacated Di	uring Enti	ire Pe	riod of	Abate	ment		1	200 Route 130	North								
Abatement Performed Out	tside of N	ormal	Facilit	y Hou	rs - Des	scribe		ty, State, Zip Co	Solidar and the same of the sa			- 7122					
Time of Abatement:	_AM	PI	W/	PM-		AM.	D 8	Cinnaminson									
Scope of Work (Check all that	t apply)						_										
☐ ≥3 sf or ≥3 lf			M Pe	enovati	on			☐ Full Conta	ainment with Neg	ative Pressur	e						
≥160 sf or ≥260 lf				molitic				☐ Glovebag									
									npted (*) and Nor	n-Friable Prod	edure						
				Locat Vorma								Aba	temer	it Typ	e		
Location of Asbestos-Containing Mate	rial (ACM	1)		ed Sole		Ashar	otoo	Description of				0	Z [n i	Ţ,		
TO BE ABATED)	.,	Ma	intena	nce/			Containing Maternal systems in		Amount (Specify		g .	Repair		3		
IN Facility			Cus	todial ((12)	Staff?	,	5	surfacing, VAT,	or	SF or LF) 2	5	F 6	Encansulate	212		
(13)			Yes	No.	N/A	1	ot	her miscellaneo	us)				2	oto a	D		
Exterior					N/A ⊠	Perimet	er V	Vindow Caul	ina	396 LF	[5	A		7/г	\exists		
Exterior								er Caulking	-						=		
Exterior								Caulking		52 LF 520 LF				7 [爿		
Exterior			П				_	III Flashing		650 SF				= -	뤼		
Name of Registered Waste Ha	uler			100	JDEP V			oic Yards of	Name of Regist		L		ЦΙ	_ _	긔		
AbateTech, Inc.				H	auler ID	No.	Wa	ste	G.R.O.W.S.								
City, State					18750			0 posal Date	City, State						_		
Lumberton, NJ								1/16/18	Tullytown, I	ΡΔ							
Completed By (Print or Type)		Title						S. SONAL	I dilytowii, i		Deta				_		
Gwendolyn Trumbetti		51,330,50	perati	one C	oordi	nator		Signature	15		Date	1.	1	18			
ACD 44		0	-orau	J.13 C	Joorul	iatoi		L (/V			10	11	v	10			

n CV	\				ASBE	ESTOS A	BATEMENT	The second secon) E C		V				
Date of Notification (1) 10-9-18	1	(P	ursua	Name of	Build	ing Own	er/Operator (2) pany and Chemo	urs Company	4 0C	15	201	8			
Agencies Notified	Notification	Туре		Street A Rt 130 S	ddress		pany and onemo	ASPESTON CONTROL							
⊠ EPA ⊠ DEP ⊠ DOL	☐ Initial ☐ Amende	d	ŀ	City, Sta	te, Zip		LICENSIAS								
⊠ DOH □ DCA	☐ Emerger Justifica ☐ Cancella	ition)	ng -	Name of Joe Mu	Conta	act				one Nur 305-776					
				FACI	LITY I	NFORM	ATION				115-6-4				
Name of Facility Where A Chamber Works Plant	batement is 1	aking Place	e (3)					Type of Fac	ility (4)			3-1-6			
Street Address Rt 130 South								School (Subchap Other (i.e. homes,	iter 8 (other t e. private & c	han K-12 ommerc	2) ial bui	lding	gs,		
City (5) Deepwater								Square Fee		oors	Blo	g. A	ge		
County (6) Salem						ounty Co SE ONL	de (7) (STATE	Current Use	(prior if bein	g demol	shed)				
Name of Monitoring Firm Harvard Environmen Street Address		. Owner (8)		ASCM N	0.	Name of Contractor (9) County Environmental Street Address									
761 Pulaski Hwy City, State, Zip Code		-0			-	461 New Churchmans Rd. City State, Zip Code									
Bear, De Project Manager for Monit	oring Firm	1-	Telepho	one No.		New Castle, DE 19720 Telephone Number License Number									
Wesly Morrison Scheduled Start Date (10)	Sche	eduled Com		26-2333 Date (11		(302) 322-8946 00578 Name of OSHA Monitor									
1-2-18		31-18				Coun	ty Environmer	ntal	(1822003))					
Occupancy Status During						100000000000000000000000000000000000000	Address New Churchma	ans Road							
 ☑ Facility Closed/Vacated ☑ Abatement Performed ☑ Other – Describe: Uno 	Outside of No ocupied area.	rmal Facilit	Abater y Hour	ment 's -			tate, Zip Code Castle, DE 19	720							
Scope of Work (Check all		ovation nolition	☐ Mini-Enclo ☑ Glovebag)								
			1	s Locatio				•				aten Type	nent e		
Locatic Asbestos-Containin <u>TO BE AB</u> IN Facilit	Normally sed Solely aintenand Custodial Staff? (12)	by e/	Asbe: (i.e	Description stos Containing N . thermal systems surfacing, VA other miscellan	Material (ACM) s insulation, T, or	Amor (Spec SF or	cify	Removal	Encansulate	Enclosure					
Thermal Systems	Yes No N/A								40,00015		V	_	\perp		
Thermal Systems				X			nal coverings thro		10,000LF 3.000SF		X	X :	x		
Floor Tile /Mastic				x		Floor	ile and mastic thr	oughout area	2,300SF		Х				
Name of Reg. Waste Haul S&J Transport.	er		ID	IDEP Was No. 217	ste Ha	uler	Cubic Yards of Waste >30	Constoga	Reg. Landfill						
City, State Woodstown, NJ							Disposal Date TBD	City, State Morganto							
Completed by Evelyn Walsh	Title Office M	lanager					Signature			Date 10-9	-18				