State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT

	No CK.	N	OTIFIC (Pur	ATION suant t	OF ASBESTOS to NJAC 8:60 and	ABATEMENT d 12:120)		RECEI				
	Date of Notification (1)	3	N	ame of	Building Owner/C	perator (2)	Appl		15	<u> </u>		
Ì	Agencies Notified Type Notificatio		S	treet Ac	idress		T I ICE	12/15/1 55 V	110	01		
	☐ EPA Initial Amended Amendmei	1	C	ity, Star	te, Zip Code		vate	PARIO 32	NII	<u> </u>		
1	☐ Emergence	y (including	- N	lame of	Contact	100	NJ	CERCICA	NG	.01.		
.	DOH justification Cancellation		9.1	Pra	ia Mac	Arthun		-Leienbara IIII-	- 14 - 4			9
	Name of Facility Where Abatement is Tak	ing Place (3)		FACIL	INFORMATI		of Facility (<u> </u>	-			
<i>J</i>	Single family		selli	'nS			School (K-1					
7	Street Address 2 212 Laming	1	Roo	7		200	Subchapter	r 8 (Other than K-12 private & commercia	!) al build	lings, l	nome	s,
-	Branchburg	10.	7	0	8876		e Feet	# of Floors		ldg. Ag		
1	County (6))	10	ounty C	Code (7)	Curre	nt Use (Pri	or if being demolish	ied)	45	1-	
1	Name of Monitoring Firm Hired by Building	Owner (8)		ASCM	INC. A	Name of Abo	lamant Ca	-1	-			
2	EPC Technol		33	ASCIVI	NA	Name of Abar	ST .	chnolog	ies		Cn	
	Street Address P.O. Box 3	37				Street Addres	Box	339)			
	City, State, Zip Code	NZ	7 (80	533	City, State, Zi	dispession	ZIA + A	0	35	3	3
8	Project Manager for Monitori of Firm	A	4.33	elephor	ne No. 758-33 65	Telephone No	o. J1	License N	9. 7	19	4	
Canal	Start Date (10)	Schedule	ed Comp	oletion [Date (11)	Name of OSH	A Monitor	1			-	-
3	Occupancy Status During Abatement (Ch		21	113	***************************************	Street Address	- Tec	hnologies	I.	25		
	Facility Closed/Vacated During Entire			nt		The control of the state of the state of		337				
,	☐ Abatement Performed Outside of No	rmal Facility	Hours	ent		City, State, Zi	p Code		e Validadores			
2	Other - Describe:		<u> </u>			New &	SYPT	UJ	280	33	3_	
3	Scope of Work (Check All That Apply)			202					22			
	DC ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enovati emolitic			☐ Mir ♣ Glo	i-Enclosur vebag Pro				•	
o l		Is	Locatio	n				()	T	Abate	ment	3
8	Location of		Normally d Solely			scription of			-	Typ	e	
ζ,	Asbestos-Containing Material (ACM) TO BE ABATED	Ma	intenan	ce/	(i.e. therma	taining Material I systems insula		Amount (Specify	R	73	Enc	E
2	In Facility (13)	003	(12)	an:		cing, VAT, or miscellaneous)		SF or LF)	Remova	Repair	Encapsulate	Enclosure
Lhanged	36	Yes	No	N/A		•			<u>a</u>		late	Ге
	Basement	X			Pipe I	nsulatio	٠٨.	20 LF	×			
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			15:	DED 14	/anta I O. t.	Varda	Nom	Denistased Lands				
	Name of Registered Waste Hauler EPC Technologi	es		IDEP Waller ID	No. of Wa	Yards		Registered Landfill te Manage		4 ی	P	Ą
	City State	NJ			Dispo	sal Date	City, Sta	te	PA			
	New Egypt Completed by Schen Ker	Title	cicle	+		Signature	Sall	Da	to	16	12	

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

RECEIVED

Date of Notification (1)		T	Name o	of Building Owner/C	Decator (2)		<u> </u>	Skits- g	ed ⁱ		
10 111	13			CRa	M	acar	PRCIAZ M	V 10.	r.		
Agencies Notified Type Notification			Street A		~ ,			1163	31	-	
□ EPA Initial □ Amended		-	City St	ate, Zip Code	X Lo	Min	glows Re	ack)AL		
DOL Amendment			Oity, Oil		anchb	· ioc	* HICENSON	6	101.		
DOH justification)	nciuaing			or Contact		.)	Telephone Ni	mher	6		
□ DCA □ Cancellation				aig Mac	ARth	un.					
Name of Eacility Where Abatement is Taking	Place (3)	FAC	ILITY UNFORMATI		e of Facility	(4)				
Single family	_D	wel	Uli'no	<u> </u>							
Street Address			-	J		Subchante	r 8 (Other than K 1	2)			
City (5)	<u> </u>					CIU.)	private & commerc	Market Res			es,
1 1 1	TU	-	08	833	Squ	are Feet	# of Floors		Bldg. /	100	
County (6)	•			Code (7)	Cur	rent Use (Pr	for if being demolis	hed)	6) t	
Hunterdon			-	USE ONLY)							
Name of Monitoring Firm Hired by Building O	wner (8)	Sam.	ASC	M No.	Name of Al	patement Co		•		-	
Street Address	3.6	3		14/14	Street Addr	AME & 400	chnolog	sie	\$	Ir	21
P.O. Box 3.	57	****			100 m	Box	337	w/			
City, State, Zip Code	NI	5	08	5.33	City, State,	Zip Code	714 40.	^	04	72	2
Project Manager for Monitori guirim			Telepho	ne No.	Telephone	1 4	License N	10.	0	73	2
Steve Schenken Start Date (10)	Colored d	(609	758-3365	609 75		5 0	5.	39	4	
10/21/13	schedul (1	1791	pletion 2	Date (11)	_	SHA Monitor				- 8	
Occupancy Status During Abatement (Check	Only Or	ne)	1	/	Street Addr	ess lec	hnologies	L	nc		
Facility Closed/Vacated During Entire Po	eriod of	Abatem	ent		P-0		337				
☐ Abatement Performed Outside of Norma ☐ Other – Describe:	I Facility	y Hours			City, State,	Zip Code					
Scope of Work (Check All That Apply)					New	Egypt	J TU	<u> 98</u>	53	3	
≥3 sf or ≥3 lf		Renovat	tion		□ F	ull Containm	ent with Negative I	3			
□ ≥160 sf or ≥260 lf		Demoliti			U M	lini-Enclosur	e	ressu	ire		
						lovebag Pro on-Exempte	cedure d (*) and Non-Friat	ole Pro	cedur	e	
	1 223	Location						T	Abate	ement	
Location of Asbestos-Containing Material (ACM)		Normall ed Solel		Des	cription of		88 1 2	-	Ty	pe	-
TO BE ABATED		intenan todial S		Asbestos Cont (i.e. thermal	systems insu	lation,	Amount (Specify	D	_	Enc	m .
In Facility (13)		(12)		surfact other m	cing, VAT, or niscellaneous	3	SF or LF)	Remova	Repair	Encapsulate	Enclosure
01-4 (VA VA)	Yes	No	N/A					/ <u>a</u>	=	ilate	ure
Basement	x			Pipe I	251/01	<i>i</i> - a	DOLE	X	-		
1 30 10.1				the a	1 1 Julian	407	au cr	1	-		
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Name of Registered Waste Hauler		N.	JDEP W			Name of	Registered Landfill				
EPC Technologies		Ha	auler ID 1700		te <		te Munage		ν,	~ D	Δ_{i}
City, State			1/00		al Date	City, Stat	te		0	1	1.
	77				12/13	Morn	usville f	PA			
Steve Schenker	Title	side	.+	Si	gnature	250	Da	te	111	117	
OTTO SCHOLLING	LIKE	Side	nI		June	1 - Oke	ok	10	111	11.)

B & G proj. #: 2013-210

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

PEAC.	
RECEIVE Check#6196E	27
Check#6196	J

Lincoln Park, NJ 07035	Date of Notification	1 (1)	11	Name of Bu	ildina Own	er/Onerator (2)		*	2013 807 00					
DOL						ion operator (2)				AM 12:	29			
DOL	☐ EPA	J 187	on			et`			MODESTOS & LICEN	CONTR	OL.	238		
ValidWilkR, Nat J 97465 Name of Contact Joan Lundy Shool (K-12) School (K-12) Scho	_								751	C. VIELS				
Dan Lundy FACILITY INFORMATION		Amenor				7463								
School (K-12) Substance (S) Substance (S		☐ Cancella	- 11						Telephone	Number				I-overallistic
Name of facility where abatement is taking place (3) Joan Lundy Street Address 49 Cortland Street City (5) Waldwick, NJ 07463 Bergen County (6) Bergen County (6) Bergen County Code (7) State use only) Street Address City, State, Zip Code Lincoln Park, NJ 07035 Coupancy Status During Abatement (Check only one) City, State, Zip Code Lincoln Park, NJ 07035 Coupancy Status During Abatement (Check only one) City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035 Coupancy Status During Abatement (Check only one) City, State, Zip Code Lincoln Park, NJ 07035 Coupancy Status During Abatement (Check only one) City, State, Zip Code Lincoln Park, NJ 07035 Coupancy Status During Abatement (Check only one) City, State, Zip Code Lincoln Park, NJ 07035 Coupand Vorte (check all that apply) Demolition Coupand Vorte (check all that apply) Coupand Vorte (check and Vorte (check and Vorte (check a	☐ DCA			Joan Lu	ındy									_
School (K. 12) Subschaper 8 (Other than K.12) Check (Private/Commercial Bidga-Noraes, etc. Square Feet # of Floors Bidga-Noraes, etc. Squares, etc.					FAC	ILITY INFORM	ATIO	N						
Subchapter 8 (Other than K-12) Subchapter 8 (Other than K-12) Street Address		nere abatement is	s taking p	place (3)									35)	
County (S) County (S) County (S) County (S) County (S) Bergen Cities (Private/Commercial Blags-Mones, etc.) Square Feet # of Floors Blg. Age Current Use (Prior if being demolished) residential residen	Joan Lundy								1 =	- 10 TO	er tha	n K-1:	2)	
County Code (7) County Code (7) County Use (Prior if being demolished) Regen County Code (7) County Code (7) County Code (7) County Use (Prior if being demolished) Residential Re	Street Address								Other (I	Private/Com				
City (5) Walchwick, NJ 07463 Bergen County Code (7) (State use only) Current Use (Prior if being demolished) residential Name of Monitoring Firm Hired by Bidg. Owner (8) N/A Street Address City, State, Zip Code City, State,	49 Cortland S	Street	20				*					Bldg	. Aq	e
Name of Monitoring Firm Hired by Big. Owner (8) N/A Street Address City, State, Zip Code Lincoln Park, NJ 07035 Telephone Number 973-696-6869 10378 Name of Abatement Contractor (9) B & G Restoration, Inc. Street Address 105 Ryerson Road City, State, Zip Code Lincoln Park, NJ 07035 Telephone Number 973-696-6869 10378 Name of OSHA Monitor B & G Restoration, Inc. Street Address 105 Ryerson Road City, State, Zip Code Lincoln Park, NJ 07035 Cocupancy Status During Abatement (Check only one) Pacility closed/wacated during entire period of abatement. Abatement performed outside of normal facility hours- Describe: Scope of Work (check all that apply) Demoition P Renovation P Saf or >3 if	City (5)		Co	unty (6)			Cou	unty Code (7)					·	
Street Address B & G Restoration, Inc.	Waldwick, NJ	07463		Bergen	161	-	(Sta	ate use only)		ior if being o	iemol	ished	1	
Street Address City, State, Zip Code City, State	Name of Monitoring		Bldg. Ow	ner (8)		ASCM No.		Name of Abatement	Contractor (9)		Service III.			
105 Ryerson Road City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035 Telephone Number 973-696-6869 D378 Name of Cost Administration Public Procedure		N/A	***						on, Inc.					
City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035	Street Address			11					V22-1					
Lincoln Park, NJ 07035 Coccupancy Status During Abatement (Check only one) Sched. Completion Date (11) 10/29/2013 10/30/2013 10/30/2013 State Date (10) Sched. Completion Date (11) 10/29/2013 10/30/2013 State Date (10) Sched. Completion Date (11) 10/30/2013 Sched. Completion Date (11) 10/30/2013 Sched. Completion Date (11) Sched. Completed by (Print or Type) Title Signature	City State Zin Cod	Α					=	- Philadelphia - Control -		_			-	
Project Manager for Monitoring Firm Phone Number 973-69-6869 Name of OSHA Monitor B & G Restoration, Inc. Street Address 105 Ryerson Road City, State Lincoln Park, NJ 07035 Describer of asbestos-containing material to be abated in facility (13) basement Project Manager for Monitoring Firm Phone Number 973-69-6889 Name of OSHA Monitor B & G Restoration, Inc. Street Address 105 Ryerson Road City, State, Zip Code Lincoln Park, NJ 07035 Lincoln Park, NJ 07035 Elephone Number 973-69-6889 Name of OSHA Monitor B & G Restoration, Inc. Street Address 105 Ryerson Road City, State, Zip Code Lincoln Park, NJ 07035 Lincoln Park, NJ 07035 Wrap & cut Glovebag procedure Moni-enclosure Non-friable procedure Park R R E E E E E E E E E E E E E E E E E	Oity, Clate, Zip Coo							1 17 17 17 17						
Name of OSHA Monitor B & G Restoration, Inc.	Project Manager for	Monitoring Firm		Ph	one Numb	per	-		3 07033	License N	ımbe	r		
Sched. Completed Date (11) 10/29/2013 10/30/2013 Decupancy Status During Abatement (Check only one) Facility closed/vacated during entire period of abatement. Abatement performed outside of normal facility hours- Describe:		5 N			er.			973-696-6869		0378	-			
Street Address 105 Ryerson Road City, State, Zip Code	Scheduled Start Da	te (10)	Sche	ed. Completion	on Date (1	1)	_							
Occupancy Status During Abatement (Check only one) Facility closed/vacated during entire period of abatement. Abatement performed outside of normal facility hours- Describe: Lincoln Park, NJ 07035 Scope of Work (check all that apply) Mini-enclosure	10/29/2013		1	0/30/2013				The second secon	on, Inc.					
Facility closed/vacated during entire period of abatement. Abatement performed outside of normal facility hours- Describe: Other-Describe:	Occupancy Status I	During Abatemen	t (Check	only one)			\neg		ad					
Cother-Describe: Lincoln Park, NJ 07035	Facility closed Abatement pe	d/vacated during	entire pe	riod of abate										-
Scope of Work (check all that apply) Demolition Renovation Full Containment w/negative pressure Glovebag procedure Non-friable procedure Location of asbestos-containing material to be abated in facility (13) Description of asbestos-containing material with the procedure of the procedure		be:					-1	Lincoln Park, N	IJ 07035					
Location of asbestos-containing material to be abated in facility (13) basement Solution normally used solely by maintenance/custodial staff(12) Yes No N/A N/A Description of asbestos-containing material (ACM) Amount (Specify SF or LF) Color of a specify SF or	Scope of Work (ch	eck all that apply	')			***************************************				wrap &	cut		5183 Ze	
Location of asbestos-containing material to be abated in facility (13) basement Si location normally used solely by maintenance/custodial staff(12) Yes No N/A	Demolition		Renova	tion				Full Containment w/ne	gative pressure	Gloveba	proc	edure		
by maintenance/custodial staff(12) Yes No N/A Description of asbestos-containing material (ACM) Descripti	≥ 3 sf or >3 If		≥160 sf c	or <u>≥</u> 260 If				Mini-enclosure	. [Non-friat	ole pro	ocedu	re	
asbestos-containing material to be abated in facility (13) basement Description of asbestos-containing material (ACM)	Location of					у						- 1	- 1	E
abated in facility (13) Yes No N/A Pipe insulation 10 If Pip L Pi					lodiai					F or	n	р	92	n
basement X pipe insulation 10 if			Yes .	. No	N/A	material (ACIVI)				/		2 I	Ĺ
B & G Restoration, Inc. 19563 ½ Tullytown Resource & Recovery Center City, State Lincoln Park, NJ 07035 Disposal Date 10/30/2013 Tullytown, PA Completed by (Print or Type) Title Signature City, State Tullytown, PA Date	basement				X	pipe insulat	tion		10 lf		_			
B & G Restoration, Inc. 19563 ½ Tullytown Resource & Recovery Center City, State Lincoln Park, NJ 07035 Disposal Date 10/30/2013 Tullytown, PA Completed by (Print or Type) Title Signature City, State Tullytown, PA Date]]	
B & G Restoration, Inc. 19563 ½ Tullytown Resource & Recovery Center City, State Lincoln Park, NJ 07035 Disposal Date 10/30/2013 Tullytown, PA Completed by (Print or Type) Title Signature City, State Tullytown, PA Date											710	7 [4	ᆜ
B & G Restoration, Inc. 19563 ½ Tullytown Resource & Recovery Center City, State Lincoln Park, NJ 07035 Disposal Date 10/30/2013 Tullytown, PA Completed by (Print or Type) Title Signature City, State Tullytown, PA Date	*										ᆛ├	ᆛ├	4	무
B & G Restoration, Inc. 19563 ½ Tullytown Resource & Recovery Center City, State Lincoln Park, NJ 07035 Disposal Date 10/30/2013 Tullytown, PA Completed by (Print or Type) Title Signature City, State Tullytown, PA Date	Declaration of Wester 11	aulor	L. Tarr	DED Variation	D# 12	Subjec Vards of V	Vaeto	Name of Posistores	1 Landfill			<u> </u>		<u>Ц</u>
City, State Lincoln Park, NJ 07035 Completed by (Print or Type) Disposal Date 10/30/2013 Tullytown, PA Date					D#		143lC			Center				
Completed by (Print or Type) Title Signature C , C Date	City, State							City, State						
Schiplated by (1 miles 1769)		1000		and age	10/30/			Tullytown, PA	-	I Dat				
	Completed by (Print Gordana Luna	completed by (1 mile of 1) prof									013			

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

NOTIF			ASBES	TOS ABATER	MENT)	•0		RE	CL	IAF	<u>- IJ</u>			
C#2334 "	T 11	of Bui	ilding O	wner/Operator	(2)		7	913 96]	22	PH	9:5	4		
e of Notification (1)	TEA	M Ch	narter	Schools					4.0 7.6 5555					
tober 19, 2013 Procies Notified Type Notification	Stree	et Addr Park I	ess Place,	Suite 802				SBES	TOS ICE	COL	HTRO	L	1	
Initial	Cibi	State	Zip Co	de							10		4	
EPA Amended	Ne	wark,	MJU	102				T-1 1	Minh	or				
DOL Emergency (including	Nan	ne of C	Contact					200					+	
iustification)	Jos	se Pa	acheco)									7	
DCA Candoman		FACIL	ITY INF	ORMATION	1		acility (4)							
ame of Facility Where Abatement is Taking Place (3)					E		ool (K-12)	(Other tha	n K-12)				
ame of Facility Where Abdominion					7	Sub Oth	chapter o er (i.e. pri	(Other that vate & con	nmercia	al buildi	ings, no	mes,		
					44.0	etc.)	# of Floo		BI	dg. Age			
Street Address 229 18th Avenue					1	Square I	eet en non	5		80	0+		-	
							60,000	r if being d	emolis	hed)			1	
City (5) Newark	-10	ounty	Code (7	7)		Const	ruction	Rehab S	ite				\dashv	
County (6)	10	STATE	USE ON	IL1)		CAbata	ment Cor	tractor (9)					1	
		ASC	M No.	-	lose	on Abate	ironme	ntal LLC				-	-	
- Lired by Building Owner (5)	50	001	21			t Address								
Matrix New World Engine					80 \	/arsity	Road							1
Street Address		100000			City	State Zi	o Code							1
26 Columbia Tpk					Nev	vark, N	J 07106	·	License	No.				7
City, State, Zip Code Florham Park, NJ 07932			NI		Tele	phone N	0.		00761) 		5.52430		1
Project Manager for Monitoring Firm		Telep	hone N -585-9	0041	973	3-373-2	221							1
Project Manager for Worldown Eric Gratson, CHMM			ion Date		Nar	ne of OS	HA Monito	nental LL	С					4
Start Date (10) Sched	Iuled Co	Ollibien	101.		Jo	sepn =	1101101111							
					Str	eet Addre	y Road						-	_
- Abstement (Clieck City)	C A had	oment			Cit	State	Zip Code							
Occupancy Status During Abatement Facility Closed/Vacated During Entire Period Facility Performed Outside of Normal Fa	cility Ho	urs	I No (Children	N	lewark,	NJ 071	06						
Abatement Ferror Occupied with Construction	n only. I	No SCH	001, 140		نسل					_				
Other - Describe.						×	Full Conta	ainment wit	th Nega	ative Pr	ressure			
Scope of Work (Check All That Apply)	Rer	novatio	n			1X1	Mini-FnCl	osure				dure		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf] Der	nolition	n			×	Non-Exe	Procedure mpted (*) a	and Nor	n-Friab	T A	bater	nent	
≥160 st or 2200 ii												Тур		_
	Is L	ocation	n \		D	ription of			Amou	nt			ш	١,
	No	ormally Solely	y by	0	2 2		Prial (AC)	M)	(Spec	ify	Removal	Re	Encapsulate	Lings
Location of Asbestos-Containing Material (ACM)	Mair	ntenan	ce/	(i.e. ther	mais	ng VAT.	or		SF or	LF)	nova	Repair	sula	
	Custo	odial S (12)	tan?	oti	ner m	iscellane	ous)				ш.		te	1
In Facility (13)			T	1			2000			101	x	1	1	1
V-7	Yes	No	N/A	-	Si	urfacing	1		40,3			+-	+	+
Floors 1-5		X	1		10.00		m Pipe		15	21	X	+	+	+
Floors 1-5		X		The	iiiia	Custom	Fittings	S	13	30	X	+	+	-
Basement, Floors 1-4	X			Ther	mai	System	Fittings	- 1		98	х		1	_
Basement & Basement Crawl Space	+	X	1	VAT	, Ca	ulk, Fir	e Doors		egistere	ed Lan	dfill			
Floors 1-5		1	NIDEP	vvasio	Cubi of W	c Yards		Minerva	Enter	prises	s, Inc.			
Name of Registered Waste Hauler		1	Hauler	ID No.	appl	ox 300	6 1	** Parking						
Jimmy Byrne Trucking	90		19551		Dien	osal Dat	е	City, State Waynes	bura.	Ohio				
				88	11/	5/13-2/2	28/14	vvayrios			Date		00-000	
City, State Propy New York						Signatu	re /	7-11	in		10/1	9/13		_
Ormoleted by	Title	e oiect	Manao	ger		(1	me	-			140,15000		
George Dillon	1					- S	J	his form fo	r asbes	stos lice	ensure e	exem	pted a	aC
City, State Bronx, New York Completed by George Dillon	Title	e oject	Manag	ger	11/3	Signatu	re /	Dill o	in		10/1			- i :

RECEIVED

V # WES	NOTIF	FICATIO Pursua	on OF A	New Jersey ASBESTOS A IAC 8:60 and	12:120)	2013 00	1 22		B: 39				1
ate of Notification (1) 0/16/13		Sue	Santo		erator (ACRE	STOS	COM	TROL				-
gencies Notified Type Notification		841		on Ave		&	LICEN	1214	u				+
DEP Amended Amendment #_	duding	Eliz	abeth	ip Code NJ07201				Teleph	nc== k1 - 1 -				+
DOH Emergency (indigenous justification) DCA Cancellation	adding	Sue	e of Cor Santo	os			19						-
lame of Facility Where Abatement is Taking I	Place (3)	F	ACILITY	INFORMATI	ON	Type of Fa							
Residential		-					ool (K-12) chapter 8 (or (i.e. priva	Other	than K-12) commercial b	uilding	s, ho	nes,	
Street Address B41 Madison Ave						etc.)	75757 37	# of F		Bldg	otto octo		-
City (5) Elizabeth						1000	Ise (Prior i	3 if being	demolished	50	-		
County (6) Union		(ST	anty Coc ATE USE	le (7) : ONLY)		e of Abatem							
Name of Monitoring Firm Hired by Building O DVD Environmental	wner (8)	F	ASCM N	0.	EMI	LO Corp	nent Contra	actor (
Street Address Po Box 2152		Size i			50 I	et Address Barnes S	Charles and Labor.				-		
City, State, Zip Code Cliffside Park, NJ 07010					Pat	State, Zip (erson NJ	07501		License No				
Project Manager for Monitoring Firm Tim Donohoe			lephone 12 260		973	phone No. 3 523 665			01117				
Start Date (10) 10/26/13	Scheduled 10/27/13		letion Da	ate (11)	EM	ne of OSHA ILO Corp							_
Occupancy Status During Abatement (Chec	k Only One)	W75-			et Address Barnes S					N/I		- 20
Facility Closed/Vacated During Entire Abatement Performed Outside of Norm Other – Describe:	Period of Al nal Facility	oateme Hours	nt 		City	, State, Zip aterson N	Code J 07501						
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enovati emolitio				Mini-	-Enclosure	e odure	n Negative P			à	
	ls.	Locatio	n l			LI NOI	-Exemple	1 () ().			Abate	ment pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	lormally d Solely intenant todial S (12)	y y by ice/	Asbestos C (i.e. then	mai syst	otion of ng Material tems insula , VAT, or ellaneous)	(ACM) tion,	(Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Eliciosolic
	Yes	No X	N/A	P	ipe Ins	sulation			30 LF	x			
Basement		^								-	-	-	-
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Name of Registered Waste Hauler L&C Europa Co Inc.		H	NJDEP V Hauler III 3125) No. 0	ubic Ya f Waste		Miner	va En	stered Landf terprise Ir			1	
City, State 9000 Minerva Rd,					oisposal 0/28/1	3	City, St.	esbul	,	Date			_
Completed by Marjan Kasapinov	Title Pre	sident	i		Sign	nature /C	rag	16		10/16	/13		_

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

Name of Building Owner/Operator (2)

Name of Building Owner/Operator (2)

Ted Savaplar

1 GR 000011	LLM	- a of Duildi	na Ownork	Operator (2)		Carried Color	22	Eldia .					
Date of Notification (1) 1 0 / 1 5 / 1 3				Operator (2)		& LI	Cos	AH 12: 4	3				
Agencies Notified Type Notification	-	ed Sayanla			_	- A 18501	Ū5 I	DUTES					
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DEP Amended	1 1 2	7 SHELL		D			_	-1000			_		_
Amendment #:_	- '	y, State, Zip											
Emergency	11 -	SPRINGF		07081				Telephon	e Numbe	er			
DOH (including justification)	Nar	ne of Conta	iCi										
☐ DCA ☐ Cancellation		Ted Sayan	ılar								_	_	=
			FACILI	ITY INFORM	ATION			, e	(4)				
Name of facility where abatement is	aking plac	e (3)					Тур	e of Facility	(4) ol (K - 12	!)			
m 18l								_	apter 8 (an K-	2)	
Ted Sayanlar Street Address								Other	(Private/	Commerc			
Street Address							-		/Homes, # of Flo		Bld	g. Age	e
27 SHELLEY ROAD		(8)			Oswah	(Codo (7)	30	uare Feet	# 01110		(2)(3)	3. 3	
City (5)	Count	y (6)			100	y Code (7) use only)	-C	urrent Use (F	rior if be	ing demo	lishe	d)	
SPRINGFIELD	UNI	ON							2000-00-00-00-00-00-00-00-00-00-00-00-00				_
Name of Monitoring Firm Hired by B				ASCM No.	110	lame of Abatemen	t Cont	ractor (9)					
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Street Address					= 5	treet Address					-1,5:		
Oli oot / Ida. oo						20 California A							
City, State, Zip Code					_ 0	ity, State, Zip Cod	е						
						Paterson, NJ (
Project Manager for Monitoring Firm		Pho	ne Numbe	er	T	elephone Number			Licens	se Numb 01169	er		
					1	973-345-802				01107			
Start Date (10)	Sched	. Completion	n Date (11))		Name of OSHA Mo		Inc.					
10/25/13	11/14	1/13			1 5	Street Address	etion, .						
Occupancy Status During Abatemen						20 California	Avenu	e					
☐ Facility closed/vacated during	entire perio	od of abater	nent.			City, State, Zip Coo	de						
Abatement performed outside	of normal f	facility hours	S-										
Describe: NORMAL H	OURS				_	Paterson, NJ		The second secon					_
Scope of Work (check all that apply							_	Containment	w/negat	ive press	ure		
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≥160 sf or ≥260 if	Demolition	n				Ī	Non	-Exempted (*) and No				
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material (acm) to be abated in facility (13)				materia	(ACM)			LF)		o v	a	a	L
abated in facility (13)	Yes	No	N/A						non	e	-	H-	₩
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Registered Waste Hauler		EP Hauler 506		cubic Yards o 1 YD	r vvaste	Name of Registe TULLYTOW	N, RE	SOURCE	RECOV	ERY			
D & S RESTORATION, INC.		500	Disposal D			City, State					3477 25		
City, State PATERSON, NJ 07503	10/26/1			TULLYTOW	VN, P	Α							
Completed by (Print or Type)	Signature					Dat		2					
BOGDAN JOLDZIC	PRESII	DENT				d activities			10/	15/ 201	3		_
				the second reserve	avamata	THE PROPERTY OF THE PARTY OF TH							

Date of Notification (1)	Name of Building Owner/Operation		1	APPRIORED APPRIORED	or Services o: [=486]M	
Agencies Notified Type Notification . EPA Initial Amended Amendment #: DEP Emergency (Including justification)	Street Address 6 5 T 0 5 (397 Wyoming Averlus N City, State, Zip Code Millburn, NJ 07041 Name of Contact Natalie Hiott-Levine	CONTRUL.		Telephone Numb	ier	-
Name of facility where abatement is taking Natalie Hiott-Levine	FACILITY I	INFORMATION		Other (Prive	8 (Other than K-12)	
Street Address 397 Wyoming Avenue City (5) Millburn Name of Monitoring Firm Hired by Bld	County (6) ESSEX g. Owner (8)	SCM No.	Gode (7) see only) ame of Abatement C D & S RESTOR	Current Use (Prior	if being demolished)	
Street Address City, State, Zip Code Project Manager for Monitoring Firm	Phone Number	37	20 California A. Dity, State, Zp Code Paterson, NJ O' Telephone Number 973-345-802/	7503 Donitor	License Number 01169	
Start Date (10) 10/16/13 Occupancy Status During Abateme Facility closed/vacated during Abatement performed outside Describe: NORMAL	e of normal facility hours-		D & S Restore Street Address 20 California City, State, Zip Co	Avenuc de	t w/negative prossure	_
Scope of Work (check all that application of asbestos-containing abated in facility (13)	Renovation Demolition le location normally used so by maintenance/custodial staff(12)	Description material (AC	1 1	S Glovebag proce	(*) Allo Its.	dure Encap
BASEMENT	NUDEP Hauler ID#	Cubic Yards of V	Waste Name of Re	glatered Landfill TOWN, RESOUR	CE RECOVERY	一
Pegistered Waste Hauler D & S RESTORATION, City, State PATERSON, NJ 0750: Completed by (Print or Type BOGDAN JOLDZIC	Title PRESIDENT * Do not use this form for	posal Date 0/17/13 Signature	City, State TULLY	TOWN, PA	Date 10/16/2013	

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

D&S Proj. #: 2013-380

□ 125.2444 .		17													
	516	II Name o	Building Ov	vner/O	perator (2)		AS PET	22 1	月12:4	2					
Date of Notification	(1) / 1 <u> 3</u>		e Hiott-Le												_
Agencies Notified	Type Notification	Street A					REGIOTO LI			II.					
☐ EPA	☐ Initial ☐ Amended	397 \	Vyoming A	venu	е		CC L 1	ULITA	2116.0			_	_		_
☐ DEP	Amendment #:		te, Zip Code												
DOL	Emergency		ourn, NJ 07	7041					LTelephor	ne Numbe	r				_
☑ DOH	(including justification)	Name o	Contact) releption	10 110	700				
☐ DCA	Cancellation	Nata	lie Hiott-L	evine					1		-	_		_	=
			F	ACILIT	Y INFORMA	TION						_			
Name of facility w	here abatement is ta	king place (3)						Туре	of Facility	(4) ol (K - 12))				
			₽				1		_	hapter 8 (ian	K-12	2)	
Natalie Hiott-I	Levine								Other	(Private/0	Comme	rcia	1		
Street Address								Sau	are Feet	./Homes, # of Floo		-	Bldg.	Age	
397 Wyoming	Avenue	1.0 -1./0		_		County	Code (7)	Joqu	410 1 001			_			_
City (5)		County (6)				Description of the second	use only)	Cui	rent Use (Prior if bei	ng dem	olis	hed)		
Millburn		ESSEX	7,01					Contro	otor (Q)			_			-
Name of Monitori	ing Firm Hired by Bld	g. Owner (8)	22	1	ASCM No.	- 11	ame of Abatement								
							D & S RESTOR treet Address	AHO	N, INC.						
Street Address							20 California A	ve.							
				_		- ci	ty, State, Zip Code			0.000					
City, State, Zip Co	ode						Paterson, NJ 0					_			_
Project Manager 1	for Monitoring Firm		Phone N	umbe	r	T	elephone Number			100000000000000000000000000000000000000	se Num 01169				
r roject manager						_ -	973-345-8020 lame of OSHA Mor				01102	_	_		_
Start Date (10)		Sched. Co	mpletion Da	te (11)			D & S Restoral		nc.						
		10/30/13				S	Street Address								
10/16/13	s During Abatement		one)				20 California A					_	_	_	_
☐ Facility clos	sed/vacated during e	ntire period o	f abatement.	66			City, State, Zip Cod	e							
Abatement	performed outside o	f normal facil	ty nours-			-11	Paterson, NJ 0	7503							
Other-Des	cribe: NORMAL HO	URS		_		-11	T atcison, 143 c		ontainmer	nt w/negat	ive pres	ssur	re		
	(check all that apply)							dini-	enclosure						
$\ge 3 \text{ sf or } >3$		Renovation					₽	Glove	ebag proce Exempted	edure (*) and N	on-friab	le p	roce	dure	
≥160 sf or		Demolition Is location no	rmally used	solely				114011	LXOINPIEC	()	R		R e	E	E
Location of asbestos-	of [by maintenar	nce/custodia	l		tion of as	bestos-containing		Amour	nt fy SF or	m		р	n C	n
material (a	acm) to be	staff(12)			materia	(ACM)		- 1	LF)	19 01 01	o v		a i	a p	L
abated in	facility (13)	Yes	No	N/A				_	11016		e X	+	$\overline{\Box}$		
BASEMENT			X		PIPE INS	ULATIO	ON		112 l ft		ᆉ	††	H	Ħ	恄
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				15 (4)	1							1			
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City, State				osal [0/17/1			City, State TULLYTOW	N, PA	Λ						
PATERSON		Title			Signature		1			Da		212			
Completed by (BOGDAN J		PRESIDE	NTT				1 20 00 30 - 20			10	/16/ 20	113			_

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

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D&S Proj. #: 2013-383		(Pursua	nt to NJAC	8:60	and 12:120)		85	الم الما الما الما الما الما	- 1 4)	
CV #005313					×		294	10CT 2	2 66	4 to.		
Date of Notification (1)	Name of	Building Owne	r/Operator (2)									
1 0 /1 6 /1 3	Richar	d Baumann					A57	& LICE	200			
Agencies Notified Type Notificat EPA Initial	ion Street Ad	dress			32			& LICE	MSI	HC HC	W.	
_ Amonded	21 Ora	ange Avenue							-11011	140		
Amendment #:	City, Stat	e, Zip Code										
DOL Emergency		NFORD, NJ	07016									
DOH (including	Name of 0	Contact					Telepho	ne Numbe	-			
justification)	p. 1	rd Baumann)_					
Cancellation	Kicha		ITY INFORMA	ATION			-13		_ =			
N	a taldas plans (2)					Тту	pe of Facility	(4)	_			
Name of facility where abatement i	s taking place (3)					',		ol (K - 12)				
Richard Baumann						_	Subcl	napter 8 (C	other th	an K-	12)	
Street Address						7		(Private/C		rcial		
21 0					9			./Homes, e		Ric	ig. Ag	16
21 Orange Avenue	County (6)			Cour	nty Code (7)	<u>- </u>	quare Feet	# 01 F100	3	D 10	9. 715	, -
City (5)	County (6)				e use only)	-	Current Use (F	Prior if bein	a dem	olishe	ed)	
CRANFORD	UNION			,	,,			0011	3 2311			102.052.00
Name of Monitoring Firm Hired by			ASCM No.	П	Name of Abateme	ent Con	tractor (9)					
				- 11	D & S RESTO	DRATI	ON, INC.					
Street Address				-11	Street Address				-			
				- 11	20 California	Ave.						
City, State, Zip Code				-	City, State, Zip Co	ode						
		•			Paterson, NJ	07503						
Project Manager for Monitoring Firm	1	Phone Number	er	-	Telephone Number			License		er		
					973-345-80	20			1169			
Start Date (10)	Sched. Comp	letion Date (11)		Name of OSHA N							
		i i	5 4	- 11	D & S Restor	ration,	Inc.					
10/29/1313 Occupancy Status During Abateme	11/20/13	1			Street Address	A	72 S					
Facility closed/vacated during					20 California City, State, Zip Co		le					
Abatement performed outside				- 11	City, State, Zip Co	oue						
Describe:				-11	Paterson, NJ	07503						
				$ \square$	1 41015011, 115		Containment	w/negative	nress	ure		
Scope of Work (check all that appl							-enclosure	Willogauv	, p. 000	u. u		
	Renovation						ebag proced		20202-17		2 8 1.0	
≥160 sf or ≥260 lf	Demolition	الماما المامال				☐ Non	-Exempted () and Non	-friable	proc	edure	
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asbestos-containing material (acm) to be	staff(12)		Description material (sbestos-containing	y	(Specify	SF or	m	p a	c a	C
abated in facility (13)	Yes No	N/A					LF)		V	i	p	L
D A CENTENTE			PIPE INSU	П АТТ	ON		86 l ft	-	e	m		
BASEMENT			THEHASC	1111			5011		Ħ	౼	Ħ	Ħ
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Registered Waste Hauler	NJDEP Hau	ıler ID# I C	ubic Yards of	Waste	Name of Registe	ered Lar	ndfill		-1			
D & S RESTORATION, INC.		101 101	YD		TULLYTOW			RECOVE	RY			
City, State		Disposal D			City, State							
PATERSON, NJ 07503		10/30/1			TULLYTOV	VN, PA	1	-1-				
Completed by (Print or Type)	Title		Signature					Date	6/2013	2		
BOGDAN JOLDZIC	* Do not use this for	arm for ach ach	na linenaura a	omete	d activities		-	1.10/1	0/2013	,		
	- I In not lied this f	orm for achaeto	ie iiraneiira Ay	PIULITE	C ALTIVITIES							

D&S Proj. #: 2013-381

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

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Date of Notification (1)			me of B		er/Operator (2)			2017 OCT 2	2 AM 12	?: 40)		
	ype Notification		eet Addr					ASRECTO	CONT				
	Initial				er e Visa e			ASBESTO:	O LUNI	ROL	te		
	Amended	11 -		ander ave	nue			es LIU	- KOIKP				
	mendment #:_	- 11	3.0	Zip Code									
	Emergency (including			Montclair,	NJ 07043	_		Talasha	a Niumbar		-		
DOH ■	justification)	Na	me of Co	ontact				relephor	e Number				
D DCA	Cancellation		alfred i	versen			(2)						
				FACI	ILITY INFORM	ATION	N .						
Name of facility where	abatement is	taking plac	ce (3)					Type of Facility School	(4) ol (K - 12)				
alfred iversen								☐ Subch	apter 8 (O	ther th	an K	-12)	
Street Address						Market Francisco		☑ Other	(Private/Co /Homes, e	omme	rcial		
205 alexander ave	nue							Square Feet	# of Floor		BI	dg. A	ge
City (5)		Count	y (6)			Cou	inty Code (7)						
						(Sta	ite use only)	Current Use (F	rior if bein	g dem	olish	ed)	
Upper Montclair		ESS						<u> </u>					
Name of Monitoring F	irm Hired by B	ldg. Owner	(8)		ASCM No.		Name of Abatement	Contractor (9)					
						_	D & S RESTOR	ATION, INC.					
Street Address							Street Address						
							20 California A						
City, State, Zip Code							City, State, Zip Code						
		4.5.4.5.4.0		Alberta Carre			Paterson, NJ 07	7503					
Project Manager for Mo	onitoring Firm		F	hone Numb	er		Telephone Number		License	Numb 1169	er		
							973-345-8020 Name of OSHA Mor			1109			
Start Date (10)		Sched.	Comple	tion Date (1	1)		D & S Restorat						
10/28/1313		11/14	/13			- 1	Street Address	ion, mc.					<u> </u>
Occupancy Status Duri	ing Abatement						20 California A	venue					
Facility closed/va							City, State, Zip Code						
Describe:	NORMAL HO	OURS				_	Paterson, NJ 0'	7503			- 372		
Scope of Work (check					_			Full Containment	w/negative	press	ure		
>3 sf or >3 lf		Renovation	1				×						
≥160 sf or ≥260		Demolition					×	Glovebag procedu Non-Exempted (*		م ا ما ماند		a di 186	2
			normally	used solely	/	-		Non-Exempled (and Non-	R	R	E	1 200
Location of asbestos-contain	1	by mainter				on of a	asbestos-containing	Amount		e m	е	n	E n
material (acm) to	o be	staff(12)			material ((Specify	SF or	0	a	a	c
abated in facility	(13)	Yes	No	N/A				LF)		v e	i	р	-
BASEMENT	-		X		PIPE INSU	LAT	ION	60 L FT		Ň	亡		
BASEMENT BOIL	ER		X		-		ATION (bricks)	80 SQ FT					
												口	TO
					i	NAME OF STREET							
												厅	
Registered Waste Hau		NJDE	P Haule	rID# C	Cubic Yards of	Waste							
D & S RESTORAT	TION, INC.	135	06		3 yds		TULLYTOWN	, RESOURCE R	ECOVER	RY			
City, State PATERSON, NJ	07503			Disposal I 10/29/1			City, State TULLYTOWN	I PA					
Completed by (Print or		Title			Signature		TOLLITOWN	1,44	Date	-	103404		
BOGDAN JOLDZ		PRESIDI	ENT		Service Servic				10/15	/2013	}		

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

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

RECEIVED

D&S Proj. #: 2013-367			(Pursua	int to NJAC	8:60	and 12:120)		VECE	YE				
UN #WEUS	<						-						
Date of Notification (1)	Na Na	me of Build	ding Owne	r/Operator (2)	West -		20	13 00T 22	AM 12	: 39			
1 0 / 0 3 / 1 3		wight Fa	ne										
Agencies Notified Type Notification		eet Addres						EDF051	1MO	NUL			
EPA Initial Amended	6	06 W. Cı	urtis Stree	et				GE LICEN	SIMU				
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☑ DOL ☐ Emergency	—	Linden, N	IJ									-,371	
DOH (including justification)	Nar	ne of Cont	tact					Telephone	Number	r -			
DCA Cancellation		Dwight F	ane										
			FACII	LITY INFORM	ATION								
Name of facility where abatement is	taking plac	e (3)					Ту	pe of Facility (4					
Ivame of lability whole abatement is	, taking place	- (- <i>)</i>						School			120	77207	
Dwight Fane							11	Subcha				12)	
Street Address							П	Other (F Bldgs./H			Ciai		
606 W. Curtis Street							S	Square Feet #	of Floo	rs	Blo	lg. Ag	ge
City (5)	Count	y (6)				ity Code (7)	-	Current Use (Pri		- 45.00	مطمئله	۹/	
Y	UNI	ON			(Stat	e use only)	11'	Surrent Use (Pri	or it beir	ig dem	olishe	u)	
Linden Name of Monitoring Firm Hired by B				ASCM No.		Name of Abateme	nt Con	tractor (9)					
rame of monitoring , in the party of		,				D & S RESTO	RAT	ION, INC.					-
Street Address						Street Address	102						
						20 California							
City, State, Zip Code						City, State, Zip Coo	de						
						Paterson, NJ		3	License	Numb	or		
Project Manager for Monitoring Firm		Ph	one Numb	er		Telephone Numbe 973-345-802)1169	CI.		
						Name of OSHA M							
Start Date (10)	Sched.	Completic	on Date (11	1)		D & S Restor		Inc.					
10/14/13	10/30/	20/10/2				Street Address							
Occupancy Status During Abatemer						20 California		ue					
Facility closed/vacated during Abatement performed outside						City, State, Zip Co	de						
Describe:		2011119 11041			11	Paterson, NJ	0750	3					
Other-Describe: NORMAL H	And the second second					Taterson, 113	0 = 0 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Containment w	/negativ	e press	ure		
Scope of Work (check all that apply >3 sf or >3 lf	y) Renovation	,				Ì	=	i-enclosure	ogua.	× P			
	Demolition					ļ		vebag procedur n-Exempted (*)		friable	nroo	oduro	2
≥160 sf or ≥260 lf			used solely	/			NO	n-Exempled ()	and Non	R	R	E	0.55
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material (acm) to be	staff(12)		T	material			•	(Specify S LF)	For	0	a	a	C
abated in facility (13)	Yes	No	N/A							v e	r	р	
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attic		X		vermiculit	e			50 sq ft			닏	븯	ዙ
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Barrier Waste Health	LAUST	D U	ID# 1.0	Cubic Yards of	Waste	Name of Registe	red La	ndfill			Ш	Ш	
Registered Waste Hauler D & S RESTORATION, INC.		P Hauler 06		2 yds	rrasid	TULLYTOW	N, RI	ESOURCE RE	COVE	RY			
City, State	 l- 		Disposal [Date		City, State							
PATERSON, NJ 07503	-		10/15/1			TULLYTOW	VN, P.	A	Date				
Completed by (Print or Type) BOGDAN JOLDZIC	Title PRESID	FNT		Signature						3/ 201	3		
POODULI JOEDITIC	I ILLOID.	T-1 1 T					_			_			

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

D&S Proj. #: 2013-366

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(X#0050°	MO														
Date of Notification (1)	-	Na	ame of Bui	lding Own	er/Operator (2)			THE OUT 22	M 12: 5	≥ o					
1 0 / 0 3 / 1 3			Alexa Sal	nadi				·~i-	11 1 1 C . (
Agencies Notified Type No	otification	Str	eet Addre	ss				& LICENS	ONTRI)1					
DEP Amend	ded		19 Barnet	tt Street				E LICENS	ING	16.					
Amendm	ent #:	Ci	ty, State, Z	ip Code							-				
DOL		11	BLOOM	FIELD, 1	NJ 07003										
DOH (includ		Na	me of Con	tact			-	Telephone Number							
	ellation		Alexa Sa	hadi				<u>R/</u>							
t q				FACI	LITY INFORM	IOITA	N								
Name of facility where abate	ment is takir	ng plac	ce (3)					Type of Facility (
Alexa Sahadi							1		(K - 12))thar th	on K	10\			
Street Address								Other (apter 8 (C Private/C			-12)			
							1	Bldgs./	Homes, e	tc.					
19 Barnett Street			(0)					Square Feet	# of Floor	s	Bl	dg. A	ge		
City (5)		Count	y (6)			1000000	unty Code (7) ate use only)	ior if boin	a dom	aliah	24/				
BLOOMFIELD		ESS	EX			(516	ate use orny)	Current Use (Pr	ior ii bein	g aem	onsne	3 (1)			
Name of Monitoring Firm Hir	ed by Bldg.	Owner	r (8)		ASCM No.		Name of Abatement	Contractor (9)							
							D & S RESTOR	ATION, INC.							
Street Address				1	3		Street Address								
			Ann. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			_	20 California A	ve.							
City, State, Zip Code							City, State, Zip Code								
					-		Paterson, NJ 07	503	Trississi	None	w-100				
Project Manager for Monitorin	g Firm		Ph	one Numb	er		Telephone Number 973-345-8020		License	1169	er				
						_	Name of OSHA Mon	itor		1107					
Start Date (10)	18	sched.	Completio	on Date (1	1)		D & S Restorati								
10/14/13		10/28					Street Address								
Occupancy Status During Aba			- 150				20 California Av								
Facility closed/vacated Abatement performed of							City, State, Zip Code								
Describe:			acility flour	<u> </u>		_	D . NI 07	1502							
Other-Describe: NORM		S		-			Paterson, NJ 07								
Scope of Work (check all that >3 sf or >3 If							The state of the s	Full Containment w Mini-enclosure	/negative	press	ure				
		ovation	1					Glovebag procedu	re						
≥160 sf or ≥260 lf		olition			,			Non-Exempted (*)	and Non-		_)		
Location of			normally in nance/cus	used solely todial	1			Amount		R e	R e	E n	E		
asbestos-containing material (acm) to be	100000000000000000000000000000000000000	f(12)			Description material (asbestos-containing	(Specify S	F or	m o	p a	С	n		
abated in facility (13)	Ye	es	No	N/A				LF)		٧	i	a p	L		
BASEMENT		-	~		PIPE INSU	TAT	ION	140 SQ FT		e	ń	П	\vdash		
BASEMENT BOILER			$\hat{\mathbf{x}}$		BOILER IN	-		45 SQ FT			$\overline{\Box}$	Ħ	盲		
									The last view	計	靣	F			
TO AN AMERICAN STREET			-	ir											
			I STEP HE				The state of the s								
Registered Waste Hauler			P Hauler I	(5-89)	ubic Yards of \	Waste									
D & S RESTORATION,	INC.	1350	06		2 yds			RESOURCE RE	ECOVER	ξΥ					
City, State PATERSON, NJ 07503				Disposal D 10/16/1			City, State TULLYTOWN	, PA							
Completed by (Print or Type)	Title			-	Signature		1		Date						
BOGDAN JOLDZIC		ESIDI	ENT						2013						

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

(· K# 10000 10000	Name of Building Owner/Operator (2) RECEIVED
Date of Notification (1)	1 I PNIEU
Agencies Notified Type Notification	Street Address So- Wood ASSESTING CONTROL
MIEPA (MInitial	7in Code
Notification	Inden, NJ 0103 CENSING
DOL []Amended Notification	Contact
[]Cancellation	Mark Kaminsky
	FACILITY INFORMATION Type of Facility (4)
Name of Facility Where Abatement is Ta	[]School (K-12) []Subchapter 8 (Other than K-12) []Subchapter 8 (other
Street Address	Nother (i.e., pilvater (i.e., pilvater) cial buildings, homes, etc.) Square Feet # of Floors Bldg. Age
11/11 (1. 10000	Gode (7) 4300 / Prior if being demolished)
City (5)	(STATE OFF
Name of Monitoring Firm Hired by Buil	ding ASCM No. Name of Abatement Contractor (9) A DOLL States Contracting
Name of Monitoring 122m Owner (8)	TO ENDINGS
Street Address	11-19110 1-10-
City, State, Zip Code	City. State. Zip Code Sayle VIIIe, NJ 08872 License Number
Project Manager for Monitoring Firm	Name of OSHA Monitor
	Name of OSHA Monitor Name of OSHA Monitor Name of OSHA Monitor Name of OSHA Monitor
Day Year Month	Day / Year Street Address
[]Abatement Performed Outside of	Barck, NJ 00121
[]Other - Describe:	[]Full Containment with Negative Pressure []Mini-Enclosure
. In-molition	b was prighte procedure
[]>3 sf or >3 lf []>160 sf or >260 lf	Abacems E E E N N N
	Location Description of Amount E R C C
Location of Asbestos-Containing Material (ACM)	Solely (i.e., thermal systems LF) V A S S
TO BE ABATED in Facility	Custodial of Other
(13)	Staff(12) Yes No N/A V A 3900SP 2900SP
Main Flour	
	NJDEP Waste Hauler ID No. of Waste Of Waste Of Waste
Name of Registered Waste Hauler	Hauler ID No. of Waste City, State
City, State	Dispose 12 Minisulle, PR
ON HUN 33 HE	Signature / An / 10-18-1
Completed By (Print or Type) Ti	120 President
KICK BUDGET	G4667
JUN 95	

STATE OF NEW JERSEY NOTIFICATION OF ASBESTOS ABATEMENT (PURSUANT TO NJAC 8:60-7 AND 12:120-7 N#1545

UCHIO	CP				(PURSUANT	TO NJA	AC 8	ding Owner / Opera	tor42)~ =	MIC	7				
ate of Notification (1),					vame of First Ene	rav	Iding Owner / Opera	REUE	1 1 h	10			_	
$\frac{10}{21} / \frac{21}{21} / \frac{1}{21}$	13					Street Address									
gencies Notified	Type of No	tificatio	n			76 South			B OCT 2 2	AM!	2: \$2				
☐ EPA	V	Initial				City, State, Zip Code Akron, Ohio 44308 Name of Contact Iim Halsey A 58EST Telephone Wimbon									
☐ DEP		Amende				Name of	F Cot	ntact 4	~reTil	plankin	a affinha				
☑ DOH		Amendr	men	#		Jim Hals		μ.	30531	TC 1115	TG				
□ DOL		Cancell				& LIPERSING									
					FA	CILITY	INFC	RMATION							
ame of Facility Whe	re Ahatem	ent is T	akin	a Pla	ce (3)	-	T	ype of Facility (4)							
ame of Facility valid	ie Abatoiii	one io						□ Sahaal/K	12\						
				500.0			-	☐ School (K-	er 8 (Other t	han K-12	2)				
treet Address	. D4							Other (I.e.,	private & c	ommerc	ial				
tiver Road & Old Brid	ge Road				2			bldgs., ho	mes, etc.)		Building	Ane		_	
ity (5)	County (6)			C	ounty Code	7)	S	Square Feet	# Of Floors	•	Building	Age			
rielle	Ocean			-			10	Current Use (Prior if	being demo	olished)	1				
			_					elephone Pole						_	
lame of Monitoring	Firm Hired	by Bldg	g. Ov	wner	(8)	ASCM	NO								
			33					VI Demolition Service	es Inc.						
nvironmental Health	Investigation	ons	_					Street Address							
Street Address							-								
555 West Shore Trail City, State, Zip Code						546		32 Williams Parkway							
Sparta, NJ 07871					1		_[City, State, Zip Code)						
Project Mngr. For M	onitoring F	irm		Ţ	elephone Nu	mber	,	East Hanover, NJ 070	036						
Dino Nappi		locked			12-682-9271 tetion Date (11)		Telephone Number		License	Number	<u> </u>			
Sheduled Start Date	(10)		1. CO 10	mpie	31	13						0860			
	/—			/	/			973-884-8682	14-1			0000			
Occupancy Status D	uring Aba	tement	(Che	ck O	nly 1)			Name of OSHA Mon LVI Demolition Service	es Inc.						
Facility C	losed/Vaca	ated Dui	ring	Entir	e Period of			Street Address							
Abateme	nt nt Perform	ed Outs	ide	of No	rmal Facility		- 1								
Hours - D	escribe: _	_ Monda	ay 8:	00 an	n to 5;00 pm			32 Williams Parkway							
	escribe: _							City, State, Zip Code East Hanover, NJ 07	e 036						
Scope of Work (Che	ok All Tha	t Apply	_					Last Hallovo., 115							
Scope of work (Cite	CK All IIIa	r Whhill	,			_		Full Containment w	ith Mogative	Pressii	re				
☐ Demolition		J	✓		Renovation	님		Mini - Enclosure	IIII Negativ	. 1 10000					
	3lf					占	Glovebag Procedure								
☐ ≥160 sf o	1 <u>2</u> 200 II					V		Non-Exempted (*) a	nd Non-Fri	able Pro	cedure				
						Dese	-inti	ion of		Abaten	nent Type		1000		
Location		1.0	ls catio			shesto	s - C	ontaining		R	lan.	E	E		
Asbestos Con	taining	A 100 STORY	rmal	033576	~	Mate	rial ((ACM)	Amount	70 10 285 625	R	N C	N C		
TO BE ABA	TED	537555	Jsed	20070		(I.e., the	rmal	systems	(Specify SF or LF		P	A	L	Ç.,	
in Facilit			olely	10.0	ins	ulation,	suri	facing, VAT, ellaneous)	35 01 11	Ίv	A	P	0		
(13)		100	Mai nanc		°	romeri	msc	elialieous		A	1	S	S		
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		YES	_	N/A	Tit- Di				25 LF	V					
Exterior Telephone	Pole	- - 		H	Transite Pipe									무	
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		十十		D					11 - 150					Ц	
Deviatore	d Waste Ha	auler			NJDEP Was	te Cubi	С	Name of Registere	a Landiiii						
Name of Redistere	3				Hauler ID N	o. Yard		I.E.S.I.							
Name of Registere NEWARK CARTING					45	Disp	-	City. State							
NEWARK CARTING						Date		BETHLEHEM, PA 1	18105						
NEWARK CARTING						Date		DETTILLET ILIVI, T. C.							
NEWARK CARTING						Juce				^		Dat	е		
NEWARK CARTING	nt or Type)	1			Title	June		Signatu		D.,	6 0	Dat		200	
City, State NEWARK, NJ	nt or Type)				Title Operation M	1				Barr	kon O	Dat	e 10/21/	13	

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

1310-4703 Check #4946 RECEIVED

Date of Notification (1)					Name of Building Owner / Operator (2) PSE&G Street Address															
1.000	10/18/13				1						JET 22	AM 12	: 30							
Agencies Notified	Type Notif	ication	- 1	Street Address 80 Park Plaza																
	and the state of	2002					17.000000000000000000000000000000000000			Att	FSIne	COLI	3.7		4					
☐ DEP ☐ DOL	│	ial iended #					& Zip C		F 1 1(7-1-1-1-											
Distriction Visiting Control of the		nergency	-				NJ 071 ontact	U I			7	Telephone Number								
□ DOH □ DCA		ncellation					uda				L.	o.opiio		~						
					XX1010	7000000	2010/01/02/0	ODMATION	-		1									
N			l=== /		AC	ILI'	I Y INF	ORMATION	ity (A)											
Name of Facility WI PSE&G Pennsau			ace (3)				Type of Facili												
Street Address	Kell Subs	itation				-				Other than K-	12)									
7272 N. Crescen	t Blvd									te & commer		gs, hom	es, e	tc.)						
TETE IN OTCOOL	it Divu.							Square Feet		# of Floors		ldg. Ag								
City (5)		County (6)	Co	ount	y C	ode	(7)													
Pennsauken		Camden						Current Use	(Prior if	being demol	ished)	0-0-0-0-								
		20000000000000000000000000000000000000						Substation		-0.00										
Name of Monitoring	Firm Hired	by Building Owr	ner (8)		AS	CM No	가는 그 그 아이지 않는데 아이를 사용하는데 가느라 있다니?		Contractor (9)									
Health & Safety	Services	**						AbateTech,												
Street Address 318 12 th Street								Street Addres PO Box 25	SS											
City, State & Zip Co						0000000		City, State &												
Hammonton, NJ			I= :					Lumberton		8048	II :a	icense Number								
Project Manager for Jim Proctor	Tele 609				nber I	Telephone N 609-265-21			License N	00529										
Scheduled Start Da 10/28/1	npleti			e (1	1)	Name of OSI EMSL Anal		nitor												
Occupancy Status	During Aba	tement (Check o	nly or	ne)				Street Address												
		d During Entire P				tem	ent	108 Haddor												
	Performed	Outside of Norm	al Ho	ours				City, State &												
Describe:	unical D	na Abotomant						Westmont,	NJ 08	308										
Scope of Work (Ch		ng Abatement																		
Scope of Work (Cit	CON All lildl	αρριγ)								Full Contains	ment with N	legative	Pres	sure)					
≥3 sf or ≥3	lf		\bowtie	F	Rend	ovat	tion		\boxtimes	Mini-Enclosu										
≥160 sf ≥26	60 If			Е	Dem	oliti	on			Glove Bag P										
				1173					Non-Exempted						_					
100	ocation of	±22,74.00		Lo			,	Description	Amount (Specify	Ab	Abatement Type									
	tos-Contaii terial (ACM			mal Sole			1		Asbestos-Containing (S) Material (ACM) SF					ш	-					
	BE ABATE		Mai				r	(i.e., thermal s	(i.e., thermal systems					nca	encl					
	n Facility		Cus			Staff	?	insulation, surface				Removal	Repair	Encapsulate	Enclosure					
	(13)		Yes		2) lo	N/A	Δ	or other miscell	ianeou	5)		al		ate	9					
Cusita haraaa Daas			l es			14//	1	Asbestos W	Viring		4 SF									
Switchgear Roo	Ш		H	F	7	-	1	ASDESIOS VI	ming		4 01		H	H	H					
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Name of Registered Waste Hauler							Waste	The state of the s	Nam	e of Register	ed Landfill		CHO-1700	A						
Waste Management					Hai		ID No. I 25	of Waste	GRO	WS North	Landfill									
City, State								Disposal Date		State			-120							
Camden, NJ								11/1/13	Mor	risville, PA										
Completed By (Prin					Title			Signature	$\overline{}$. 1		Date		_						
Gwen Trumbetti					Off	ice	Coord.		(\(\sum_{\mathcal{N}}\) \(\sum_{\mathcal{N}}\)						B/13					

B & G proj. #: 2013-206

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

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Date of Notification (1)		I I Nam	e of Bui	Idina Oum	or/Operator /5	4 美	OCT 22 AM 12: 3	 								
110/118/11:	3	Δli	ce Hui	zing Own	enOperator (2	7		01				20				
	_' otification	\neg	t Addre			A CO	ESTAS CONTR	UL.								
☐ EPA ☐	nitial	13	-25 11	th Stree	et `		& LICENSING									
DOL A	mendmen			ip Code vn, NJ 0	7410	7.000		•								
DOH			of Con	tact				Telephor	ne Number	r						
□ DCA □ Ca	ancellation	<u> </u>	lice Hu	uizinga												
	,	*		FAC	ILITY INFORM	OITA	I ,									
Name of facility where abater	ment is tal	king place	(3)	,				Type of Facility								
Alice Huizinga								=	ol (K - 12)	thor t	han k	(12)				
Street Address	****							Other	apter 8 (O (Private/C			(-12)				
13-25 11th Street								Bldgs.	/Homes, e	tc.		ldg. A				
City (5)		County (6)			Cou	County Code (7) Square Feet # of Floors									
Fair Lawn							te use only)	Current Use (P	rior if being	a den	nolish	ed)				
		Berg				L.	residential									
Name of Monitoring Firm Hire	(35)	. Owner (8)		ASCM No.		Name of Abatement C	-Englishmen								
	/A						B & G Restoration	, Inc.								
Street Address						Street Address										
City, State, Zip Code				=		_	105 Ryerson Road						_			
City, State, Zip Code							City, State, Zip Code	05005								
Project Manager for Monitoring	a Firm		I Dh	one Numb	or	_	Lincoln Park, NJ Telephone Number	07035	License	Niumb	205					
roject manager for monitoring	9 1 11111		1	one Manno	CI		973-696-6869 0378									
Scheduled Start Date (10)		Sched. Co	maletie	n Data /1:	\		Name of OSHA Monitor									
10/28/2013			2	n Date (1)		B & G Restoration, Inc.									
The Secretary of the Secretary of Secretary		10/29					Street Address									
Occupancy Status During Aba			15				105 Ryerson Road	i								
Facility closed/vacated of Abatement performed of Describe:							City, State, Zip Code									
Other-Describe:							Lincoln Park, NJ	07035								
Scope of Work (check all that	t apply)								yrap .	& cu	t		-			
Demolition	₩ Rei	novation				F	ull Containment w/nega	tive pressure	Gloveb	ag pr	oced	ıre				
>3 sf or >3 lf	□ ≥16	0 sf or ≥26	O If			₩ N	Mini-enclosure		Non-fri	iable į	oroce	dure				
Location of		ocation no			1					R	R	Е	E			
asbestos-containing		maintenan ff(12)	ce/custo	odial			sbestos-containing	Amount		e m	e p	n	n			
material to be abated in facility (13)	_	es	NI-	1	material ((ACM)		(Specify S	ir or	0	a	a	C			
	'	62	No	N/A						v e	r	р	-			
basement				X	pipe insula	tion		123 If								
			7													
													Ш			
Registered Naste Hauler B & G Restoration, Inc.		NJDEP H 19563	lauler II	O# C	ubic Yards of \ 1 ½	/Vaste	Name of Registered L Tullytown Resour		Center							
City, State		17505	I	Disposal D			City, State	to the receivery	Conto	-						
Lincoln Park, NJ 07035				10/29/2			Tullytown, PA									
Completed by (Print or Type)	Titl	е			Signature		Gordana Luna		Date	20018000						
Gordana Luna	Se	cretary/Ti	easure	r			Gordana Luna		10/18/	201:	3					

B & G proj. #: 2013-205

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

					-			10197				_	
Date of Notification		Name	of Building Ow	ner/Operator (2	2)	2013 OCT 22 A	M 12: 29						
110/118			tchen Allin										
Agencies Notified EPA	Type Notificat	Oneer	Address	`		#30-5703 C	ONTROL						
☐ DEP	Initial		Mill Street			& LICENS	ING						
DOL.	☐ Amendr		tate, Zip Code		1/7 5								
₩ DOH		BIO	omfield, NJ	07003									
_	☐ Cancella	stion	of Contact				Telepho	ne Number					
☐ DCA		Gre	etchen Allin				<u> </u>						
			FAC	CILITY INFORM	IATIO	N							
Name of facility whe	ere abatement is	s taking place (3)				Type of Facility	(4)	-	_		7.00	
Gretchen Allin						1	1 =	ol (K - 12)					
Street Address								napter 8 (Oth (Private/Con			-12)		
113 Mill Street								/Homes, etc.			25		
City (5)		County (6)				1015	Square Feet	# of Floors	T	Bl	dg. A	ge	
Bloomfield, NJ	07003				1 555	unty Code (7) ate use only)	Current Hee /F	rios if bains		liaba	11		
-		Essex	*	8		State use only) Current Use (Prior if being demolished) residential							
Name of Monitoring	(1940 1471) B. H.	3ldg. Owner (8)		ASCM No.		Name of Abatement	Contractor (9)						
	N/A					B & G Restoration	on, Inc.						
Street Address						Street Address	70						
City, State, Zip Code					_	105 Ryerson Roa City, State, Zip Code	ad .						
,,, <u></u> ,						February 17 2007 15 88007	1.07025						
Project Manager for M	Monitoring Firm		Phone Numi	ber	-	Lincoln Park, N. Telephone Number	3 0 7033	License No	ımbe	r			
			4			973-696-6869		0378					
Scheduled Start Date	(10)	Sched. Com	pletion Date (1	1)	-	Name of OSHA Moni							
10/30/2013	8.	10/31/2	013			B & G Restoration	on, Inc.						
Occupancy Status Du	ring Abatemen	t (Check only on	e)		-		a.d						
Facility closed/\						105 Ryerson Roa City, State, Zip Code	au		2	-		_	
Abatement perf Describe:	formed outside	of normal facility	hours-			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
Other-Describe					_	Lincoln Park, NJ	07035						
Scope of Work (chec	ck all that apply						1	wrap &	cut				
Demolition		Renovation			☐ F	ull Containment w/neg	gative pressure	Glovebag	pro	cedu	re		
>3 sf or >3 lf	<u> </u>	160 sf or ≥260			N	/lini-enclosure	[Non-friab	le pr	oceo	lure		
Location of		Is location norm by maintenance		у				I	3	R e	Е	Е	
asbestos-conta material to be	iining	staff(12)		Description material (sbestos-containing	Amount (Specify S	For r	n	Р	n C	n	
abated in facility	y (13)	Yes N	o N/A	material (- Civi)		LF)			a	a p	L	
main room, boiler roo	om craft room			pipe insulat	ion		81 If		_	-		_	
main room, boiler roo	on, crait room] pipe irisdiai	1011		0111		-	ᅱ	+	H	
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									1	5			
Registered Waste Hau		NJDEP Ha	uler ID#	ubic Yards of V	Vaste	Name of Registered							
B & G Restoration City, State	, IIIC.	19563	Disposal D)ate		Tullytown Resour	rce & Recovery	Center	-				
Lincoln Park, NJ	07035		10/30/2			Tullytown, PA							
Completed by (Print o	r Type)	Title	=1	Signature				Date					
Gordana Luna		Secretary/Trea	surer		,	Gordana Luna	na 10/18/2013						

State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 an RE 307) VED

B & G proj. #: 2013-211

Check #6205

						-									
Date of Notification (1)				ilding Owne Fowlkes	er/Operator (2)	2	13 OCT 22	AM 12	: 30						
₽ EPA	Notification Initial	on S	treet Addre 27 Clen	ess denny Av	enue	ندو	LICEN &	CONT	ROL						
☐ DEP ☐	Amendm		ity, State, i	Zip Code City, NJ 0	7304										
₩ DOH		I N	ame of Cor		77004				Telepho	ne Num	her				
□ DCA □	Cancellat	11		Fowlkes	3				. Tolopin	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
				FACI	LITY INFORM	ATION			-11						
Name of facility where aba	atement is	taking pla	ice (3)		79			Ту	pe of Facility		-		0.10		
Dorothy Fowlkes									=	ool (K - 1 chapter 8	(Other ti	nan K	(-12)		
Street Address									Othe	r (Private	/Comme		=		
27 Clendenny Aven	iue							S	Bldgs quare Feet	# of FI		В	dg. A	ge	
City (5)		Cour	ity (6)			Cour	nty Code (7)	- -				7)			
Jersey City, NJ 073	804	Н	udson	**	ж	(Stat	State use only) Current Use (Prior if being demolished) residential								
Name of Monitoring Firm		ldg. Owne	er (8)		ASCM No.	П	Name of Abatement Contractor (9)								
	N/A					_	B & G Restor	ation, I	nc.						
Street Address	(4)			*			Street Address	D d							
City, State, Zip Code							105 Ryerson City, State, Zip Co					_			
only, otato, alp oddo							Lincoln Park		035						
Project Manager for Monito	ring Firm		Ph	one Numb	er		Telephone Numb			Licen	se Numb	er			
				7.		- 11	973-696-686			037	8				
Scheduled Start Date (10)		Sched	. Completi	on Date (11)	-	Name of OSHA N		0.7700						
10/31/2013		11	/1/2013				B & G Restor	ration, I	nc.						
Occupancy Status During A	Abatement	t (Check o	nly one)				105 Ryerson	Road							
Facility closed/vacate Abatement performed Describe:							City, State, Zip Co								
Other-Describe:						-11	Lincoln Park	, NJ 07	035						
Scope of Work (check all t	that apply)								□ wr	ap & cu	t		8:	
☐ Demolition		Renovation	n			F	ull Containment w	/negativ	e pressure	Glo	vebag pr	oced	ure		
$\square > \underline{3} \text{ sf or } > \underline{3} \text{ lf}$		160 sf or	≥260 lf				lini-enclosure			☐ No	n-friable	proce	dure	02222	
Location of				used solely							R	R	E	E	
asbestos-containing material to be		staff(12)	enance/cus	itodiai	Description material (sbestos-containing	g	Amount (Specify		m	р	c	n	
abated in facility (13)) .	Yes	No	N/A	materiai (ACIVI)			LF)		v e	i	a p	Ľ	
basement main room	1			X	pipe insula				235 lf						
basement laundry ro	om		- 3	X	pipe insula				51 lf			片	빆	뷰	
basement				X	boiler insu	lation			53 sf			片	井	14	
											᠆	片	ዙ	11	
		700			ubic Yards of V	Maste	Name of Registe	ared Lan	dfill				Ш	الا	
Registered Waste Hauler B & G Restoration, Inc	;.	NJD 195	EP Hauler 663	ID# C	41/2	vasie	Tullytown Re			ry Cente	er				
City, State				Disposal D	ate		City, State								
Lincoln Park, NJ 0703	35			11/04/2			Tullytown, F	PA							
Completed by (Print or Typ	pe)	Title Secretar	v/Treasur	er	Signature	(Gordana Luna Date 10/21/2013								