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CK (1519			ursuant	ate of New J I OF ASBES to NJAC 8:6	TOS AL	12:120	0)	And the second persons of the second	DR		C	E [,
Date of Notification (1)					f Building Ow						(CT	2 4	2014	:	ΠI
10/19/2016	1 = 1,000			- 75	nne Housir	ng Aut	hority	У	- -	الما الم		701	- 4	2010)	ريا
Agencies Notified	Type Notification			Street A 549 A					į		Manager J. J. Co.	77.11				
X EPA X DEP X DOL	Initial		-		ate, Zip Code						ASR		900) <u>a</u>	
X DEP X DOL	Amended Amendment	#			nne, NJ 07				1	morts with	N STARTON LINE	LIC	ENSI	iG_		
in at	Emergency (-		f Contact	002					Tolonk	nono N	lumber	100000000000000000000000000000000000000		
DOH DCA	justification) Cancellation				Bandur						relebi	IOTH: IV	ar ar racec			
				ELEVATOR (COLD)	ILITY INFOR	MATIO	N					100				
Name of Facility Where	Abatement is Taking	Place (3)	17.01	LITT INTOIN	MATIO	T	Type of	f Facilit	y (4)						
19 E 19th Street								П за	chool (F	(-12)						
Street Address								St	ubchap	er 8						
19 East 19th Street	et								ther (i.e c.)	. priv	ate & c	omme	rcial bu	ildings	, hom	es,
City (5)								Square		T	# of FI	oors		Bldg.	Age	
Bayonne								32,00	0		3			25+		
County (6)					Code (7)			Current	t Use (F	Prior i	being	demol	ished)			
Hudson				(STATE	USE ONLY)		-	n/a								
Name of Monitoring Fire		Owner (8)	ASCN	Л No.	1 1		of Abate			ctor (9))				
Health and Safety	Services						Site	Enterp	rises,	Inc.						
Street Address								Address							11	
PO Box 365								3 Delila		ıd						
City, State, Zip Code						(tate, Zip		. 1. 1	NT L	0000				
Berlin, NJ 08009						Town	nsnip			24						
Project Manager for Mo James Proctor	nitoring Firm			Telepho	ne No. 52-1311			one No. 567-12			1000	icense				
		Cabadal	- 1 0	100000000000000000000000000000000000000			200000000000000000000000000000000000000			W20	0	1172				_
Start Date (10) 10/31/2016		11/11/		npietion	Date (11)			of OSHA Ith & Sa			cos I	no				
Occupancy Status Durin	ng Ahatement (Chec	01-0-02-1-01-02-2						Address		Jei v	ces, i	110.				
				e e e e e e				36x 36								
	cated During Entire P ned Outside of Norm							tate, Zip								-
Other - Describe:						-	3,732	in, NJ (
Scope of Work (Check /	All That Apply)						More Borne				_					
≥3 sf or ≥3 lf		П	Renova	tion			X	Full C	Contain	ment	with Ne	egative	Press	ure		
≥160 sf or ≥260 lf			Demolit					Mini-	Enclosi	ıre		9941111				
							×		ebag Pi Exemp			lon-Fri	ahle Pr	ncedi	re	
		10	Locati					14011	LXCITIP	1	dila i	1011 1 11	abic i i		tement	
Locatio	n of		Normal			Doss	ription	of						Т	уре	
Asbestos-Containing			ed Sole		Asbestos				ACM)		Amo	unt			m	
TO BE AB			todial S			ermal sy surfacin		s insulati	on,		(Spe		Rer	R	nca	Enc
(13)			(12)			ther mis					SF or	LF)	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A									<u>a</u>		ate	6
Floo	or	1	1.1.5	X		7	Tile			+	13,74	13 sf	X	+-		
Throug	hout			X			ndows	S		+	92 to		x	+	-	
				-						+				+		
							- 20 - 20 - 20 - 20 - 20 - 20 - 20 - 20			+		===150	-	+		
Name of Registered Wa	ste Hauler		100	JDEP W		Cubic Ya			Name o	of Re	gistered	d Land	fill			Н
Site Enterprises Inc	.		1 200	auler ID		of Waste	Э				Land					
City, State			10	035220		20 cy Disposal	I Data		City, St	0,=1	772					
6626 Delilah Road	Egg Harbor Tow	nshin I	N.I			11/11 <u>/</u>			Bristo		Α					
Completed by		Title					nature	17		., . ,			Date			-
Eric Keys		OM				7	J A	Ih	1-	_			10/19	/201	6	
75,000 (55 V.77 105 ₹5)		1 2000					1	11/	10					1200000		

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

				•				' (MECH	#	10	9	00
Date of Notification (1)					Name	of Building	g Owner/Operator (2	2)					- 1
10 /	19 /	16			Fed	eral Avia	ation Administra	tion 📄	E G E I	1 W 1		-	
Agencies Notified	Type Notifica	tion		-	Street	Address					ha 1		
⊠ EPA	☐ Initial	uon					land Executive F	20-16			- 11		
☑ DOLWD	☐ Amended						·	dik	OCT 2 4	2016	-11		
⊠ DOH	Amendme	nt#				tate, Zip C			001 2 4	2010	14	1	
□ DCA	☐ Emergend		uding		Bur	lington,	MA 01803	- Contraction					
(NJAC 5:23-8)	justificatio				Name	of Contac	t	- Luca	Telephone Nu	mber	Carried Carried		
	☐ Cancellati	on			Ron	Heist					- 5		
					FAC	CILITY IN	FORMATION				_		
Name of Facility Where	Abatement is T	aking F	Place	(3)				Type of Facility (4)				
William J. Hughes	Federal Avia	tion A	dmir	nistr	ation T	echnica	l Center	☐ School (K-12))				
Street Address								☐ Subchapter 8					
101 Atlantic City In	ternational A	Airnor	ŧ					Other (i.e., pr homes, etc.)	ivate and comm	nercial bu	lding	S,	
	tornationar	ui poi						Square Feet	# of Floors	Blo	lg. Ac	10	
City (5) Atlantic City								5,000	1	10000	ig. As 50	10	
County (6)		71			Coun	tv Code (7)(STATE USE ONLY)	Current Use (Pri	or if being demo	olished)			
Atlantic						,		, , ,	3	/			
Name of Monitoring Firm	Hired by Build	ing Ou	mer / c	8)	ASCM I	No	Name of Abateme	ent Contractor (0)					-
		ing Ow	niei (c	"	MOCIVII	NO.		vironmental Co	lna				
EHS Environmenta	ii Co., inc.							vironmentai Co)., IIIC.				
Street Address							Street Address						
411 Southgate Ct S	Ste E,						923 Haws Av	e,					
City, State, Zip Code							City, State, Zip Co	ode					
Mickleton, NJ 0805	6						Norristown, F	PA 19401					
Project Manager for Mon	itoring Firm			Tele	phone I	No.	Telephone No.		License No.				
Jack Carney				85	6-224	-0080	610-239-9920	N.	00398				
Start Date (10)	S	chedul	ed Co	mole	tion Dat	te (11)	Name of OSHA M	lonitor					
11 / 3 /		11			/		SECTION OF STREET	mental Co., Inc					
								meritar oo., me	•				
Occupancy Status During							Street Address	2 2 2					
☐ Facility Closed/Vacate						22	411 Southgat	te Ct Ste E,					
Abatement Performed						cribe	City, State, Zip Co	ode					
Time of Abatement: 7	.00AM-3.30P	IVI/	—P1V	1	—AIVI		Mickleton, N.	J 08056					
Scope of Work (Check a	ll that apply)								20 2322 71 55				
T-2-6216		_	7 D		2.2			tainment with Neg	ative Pressure				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 		r F	Rer	nolitic			☐ Mini-End	g Procedure					
			_ 50.	11011111	,,,,			mpted (*) and No	n-Friable Proce	dure			
			ls	Local	ion					Ab	ateme	ent Ty	уре
Location	of .			orma			Description of	of		70	D	Ш	П
Asbestos-Containing)		d Sole ntena	ely by		stos Containing Ma		Amount	em	Repair	nca	ncl
TO BE ABA					Staff?	(1.6	e., thermal systems surfacing, VAT		(Specify SF or LF)	Remova	#	psu	Enclosure
(13)	ity			(12)			other miscellane		01 01 L1)	_		Encapsulate	6
X 3. TZ			Yes	No	N/A							(i)	
AAQ-2 Area		1		\boxtimes	П	floor til	e and mastic		2,383SF		П	П	П
AAQ-2 AICa				20.00	1	11001 111	o ana maodo		2,000.				
			Ш								Ш		Ш
		[
		1											
Name of Registered Was	ste Hauler			N	JDEP \	Waste	Cubic Yards of	Name of Regis	tered Landfill				
Waste Managemen				H	lauler II		Waste	Grows Lar					
City, State					17273	5	15 Disposal Date	City, State					
Trenton, NJ							11/18/16	Morrisville	ΡΔ				
								MOTITSVIIIE	,				
Completed By (Print or T	ype)	Title					Signature			Date /	9/	1	
James Kelly		Vic	e Pr	eside	ent		///			10/1	1/1	b	
The same of the sa												-	

NV 24	ואו	NOTIF	ICAT	TION C	e of New F ASBE O NJAC	STOS ABAT 8:60 and 5:16	EMENT	DEGE				ì
UN 37	71					Owner/Operator (2		1			111	
Date of Notification (1)	20 / 16	3			an Doles			OCT 2	4 201	6	1	4
Agencies Notified	Type Notification			Street A	ddress							
⊠ EPA								ASBESTOS	- 1 1 2 4 4	01.8		- Contraction
⊠ DOLWD	Amended Amendment #	£			te, Zip Co		September 19	LICEN	SING	e Baching a	andrea 41	4
☑ DOH □ DCA	☐ Emergency (i			_11/2017/1/21		NJ 08078		Telephone Num	ner			
(NJAC 5:23-8)	justification)			100,7000,000000000000000000000000000000	Contact	D.Mess		relephone raum	501			
	☐ Cancellation					la - ReMax		1		<u> </u>		
				FACI	LITY INF	ORMATION	Type of Facility (4)				
Name of Facility Where	Abatement is Takir	ng Place ((3)				☐ School (K-12)				
Residence							Subchapter 8	Other than K-12 ivate and comme) roial build	dinas		
Street Address							homes, etc.)	ivate and comme	ICIAI DUIN	anigo.		
							Square Feet	# of Floors	Bldg	J. Age	3	
City (5)							1,200	2	80)		
Runnemede				Count	v Code (7)	(STATE USE ONLY)	Current Use (Pri	ior if being demoli	shed)			
County (6) Camden							Residence		0.00			
Name of Monitoring Fire	m Hired by Building	Owner (3)	ASCM N	lo.	Name of Abatem	ent Contractor (9)					
Mgmt. & Environn	mental Consultin	g Servi	es			Shade Envir	onmental, LLC					
Street Address						Street Address						
PO Box 341						623 Cutler A	venue					
City, State, Zip Code						City, State, Zip C						
Chesterfield, NJ (08515					Maple Shade	e, NJ 08052	Tr. Na				
Project Manager for Mo			Tele	phone N	10.	Telephone No.		License No. 00842				
Bill Weisgarber			1 3	09-298-		856-755-009	200	00842				
Start Date (10)	Sch	neduled C				Name of OSHA						
11 / _7	/ _16	_11 /	_1	1_ / _	16	EMSL Analy	rtical, Inc.					
Occupancy Status Dur	ring Abatement (Ch	eck only o	ne)			Street Address						
☑ Facility Closed/Vac	ated During Entire	Period of	Abate	ment		200 Route 1						200
☐ Abatement Perform	ned Outside of Norn	nal Facilit	y Hou PM	rs - Desi	cribe AM	City, State, Zip (
Time of Abatement	t:AM	_FIVI/				Cinnaminso	on, NJ 08077					2005
Scope of Work (Check	(all that apply)					⊠ Full Co	ntainment with Ne	egative Pressure				
≥3 sf or ≥3 lf		⊠ Re	2011/2012/2012			☐ Mini-Er	nclosure					
≥160 sf or ≥260 lf		☐ De	emolit	ion		☐ Gloveb	ag Procedure kempted (*) and N	on-Friable Proced	lure			
		19	Loca	ation						ateme	ent T	уре
Locat	ion of		Norm	ally		Description	of	Amount	Re	Re	E	F
Asbestos-Containi	ing Material (ACM)	N 155345		lely by ance/	Asbe	estos Containing N e., thermal system	Material (ACIVI)	(Specify	Removal	Repair	cap	Enclosure
	ABATED acility	L		Staff?	(1.6	surfacing, VA	AT, or	SF or LF)	/al		Encapsulate	ure
	3)		(12	1	-	other miscellar	neous)				te	
		Yes	-	-				625 SF			П	1
Crawlspace						nsulation						1
1st Floor					Vermi	culite		300 SF		-	1	+
											닏	1-
		П				E 24	15.					
Name of Registered \	Waste Hauler			NJDEP		Cubic Yards of Waste		gistered Landfill and County La	ndfill			
Freehold Cartag				Hauler I 1593		10		and Oddiny La				
City, State Freehold, NJ						Disposal Date 11/11/2016	City, State Newburg	j, PA				
Completed By (Print	or Type)	Title				Signature			Date			
Christina Lynch			tions	s Mana	ger	ONDA	de		10/2	101	16	

State of New Jersey

10 2405129	83018		(Pur	ATION O suant to	of New Je F ASBEST NJAC 8:60	OS ABA	2:120)	!	ID		C		W			
Date of Notification (1) 10/18/16	0		1 200	ame of B incent	uilding Owr Ienaro	ner/Oper	rator ((2)			OCT	2 4	2016	j		
	e Notification		St	treet Add	iress				with the second	The state of the s						Part See Toke
× EPA × DEP × DOL	Initial Amended Amendment #_				, Zip Code eld , NJ 0	7003			a strate	January States	وبمارسون أيهار تأريان	ENS	NG_	JL &	d emoused	Sec. principles and last
ĭ DOH ☐	Emergency (inc justification) Cancellation	luding	N	ame of C	Contact					Tele	phone	Numb	er			
				FACILI	TY INFOR	MATION	1	T	f Facility	(4)						
Name of Facility Where Abate Vincent lenaro	ement is Taking F	Place (3)						П so	chool (K- ubchapte	12)	er than	K-12)				
Street Address								∑ Ot et	ther (i.e.	private 8	comm	ercial	buildin	gs, h	omes	
City (5)								Square		# of	Floors		Bld	g. Age	9	
Bloomfield								0	t Han (De	ion if hoi	na dom	olisher	4)			\dashv
County (6) Essex County				County Co STATE US	ode (7) SE ONLY)		_		t Use (Pr			IOIISHE	<i>1)</i>	016-3-25-		
Name of Monitoring Firm Hir	ed by Building Ov	vner (8)		ASCM	No.			of Abate Abaten	ement Co nent	ntractor	(9)					
Street Address							1009		Street S	Suite A	4					
City, State, Zip Code						(City, S Nort	State, Zip h Berg	Code en, NJ	07047						
Project Manager for Monitor	ing Firm			Telephon	e No.			hone No -293-63			Licer 012	ise No. 23				
Start Date (10) 10/28/16		Schedule 11/11/1		pletion [Date (11)	1	Name HILI	of OSH	A Monito CONS	r ULTIN	G LL	0				
Occupancy Status During A	batement (Check	Only One	e)				Street	Addres	s TE EAS	ST SU	TE 10	07				
Facility Closed/Vacated Abatement Performed Other – Describe:	d During Entire Pe Outside of Norma	eriod of A Il Facility	batem Hours	ent			City, S	State, Zij								
Scope of Work (Check All T	hat Apply)															
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf	Control on Bullion # 1	× R	enova emolit					Min	l Contain ii-Enclosi vebag Pi	ure rocedure						
								× Nor	n-Exemp	ted (*) a	nd Non	-Friabl			ment	
Location of Asbestos-Containing M TO BE ABAT In Facility (13)	aterial (ACM)	Use Ma	Locati lormal d Sole intena todial ((12)	lly ely by nce/ Staff?	Asbesto (i.e. t	os Conta thermal s	syster ing, V	Material ns insula 'AT, or	I (ACM) ation,		Amour (Specif SF or L	ý	Removal	Ty Repair	e Encapsulate	Enclosure
		Yes	No	N/A							50.15	_				
Basemer	nt						TSI				50 LF		X			
										1			+			
Name of Registered Waste	: Hauler			NJDEP V Hauler ID		Cubic of Was		3		of Regis				RO	NS N	١.
NEWARK CARTING City, State			0)4509		Dispos	sal Da	ate	City, S	State						344
HILLSIDE, NJ		Title				S	Signat	ure Vi I	MOF	RRISVI	LLE	D	ate			
Completed by Bryan Parra		100000000000000000000000000000000000000	ect N	lanage	r		(174	UIK	HttV		1	0/18/	16		

MO 240	51291	63C	OTIFIC	CATION	te of New J OF ASBES o NJAC 8:6	TOS AE	BATEN 12:120	/IEN	IT II))追	C		N			7
Date of Notification (1) 10/19/16		•	1		Building Ov Hansford		erator	(2)			OCT	2 4	201	6	-	
Agencies Notified	Type Notification		5	Street Ad	dress				3	lands of the lands			-01	•	-	1
⊠ EPA	× Initial			01.	7:- 0-4-					A C C	ESTO:	0.00	A total		1	- Part
× DEP	Amended Amendment	±			e, Zip Code k , NJ 07					Made	LION	S VU ENSH	AG MAR	나도 않		Dr. Live
	Emergency (i			Name of						Tele	ephone I	Numb	er		0.7	-
➤ DOH ➤ DCA	justification) Cancellation		,	vario oi	Comacc											
				FACIL	ITY INFOR	RMATIO	N									
Name of Facility Where	Abatement is Taking	Place (3)						Ту	pe of Facility							
Johnny Hansford								H	School (K- Subchapte	r 8 (Othe	er than k	<-12)				
Street Address								×	Other (i.e.	private 8	& comme	ercial	buildir	ngs, h	ome	s,
O:t- (5)				-				Sc	etc.) quare Feet	# 01	Floors		Bld	g. Ag	e	
City (5) Teaneck																
County (6)				County C				Cı	urrent Use (Pi	ior if bei	ng demo	olished	d)			
Bergen County				(STATE U	ISE ONLY)		_								-1150	
Name of Monitoring Firm	n Hired by Building (Owner (8)		ASCM	1 No.				Abatement Co atement	ontractor	(9)					
Street Address							Street 1009		dress 7th Street	Suite A	4					
City, State, Zip Code									e, Zip Code Bergen, NJ	07047						
Project Manager for Mor	nitoring Firm			Telephor	ne No.	-	Telep				Licens	se No.				
***************************************	mioning i iiii							Contract	3-6305 OSHA Monito	r	0122	3		-		
Start Date (10) 10/29/16		11/12/1	6	npletion	Date (11)		HILI	MA	MM CONS		G LLC	;				
Occupancy Status Durin	ng Abatement (Ched	k Only On	e)						Idress ROUTE EA	ST SU	TF 10	7				
Abatement Perform	cated During Entire ned Outside of Norr	Period of A nal Facility	baten Hours	nent s			City, S	Stat	e, Zip Code							
Other – Describe:						_	UNI	101	NJ 07083	}						
Scope of Work (Check /	All That Apply)						F	_						10		
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf			Renova Demoli	ation tion				×	Full Contain Mini-Enclose Glovebag Pe Non-Exemp	ure rocedure	Ē				9	
					1		E		Mon-Exemp	leu () ai	10 14011-1	Habit		Abate	meni	t
			Locat			Dec	scriptio	n 0	f					Ту	ре	
Location Asbestos-Containing		Use	d Sole	ely by	Asbest	os Cont	aining	Mat	terial (ACM)		Amount		-		Ш	ш
TO BE A	BATED	1000000	intena todial	Staff?	(i.e.		systen cing, V		nsulation, or		(Specify SF or LF)		Remova	Repair	Encapsulate	Enclosure
In Fac (13			(12)			other n							oval	air	sulat	sure
		Yes	No	N/A	1										Ф	
Baser	nent						TSI				10 LF		х			
																-
						1300 July 200										-
Name of Registered W	aste Hauler		1	NJDEP V		A 200 A	Yards			of Regis				1		
NEWARK CARTIN	G			Hauler II 04509	J NO.	of Wa		ė.		STE MA	NAGE	MEN	VI G	KO/	VSI	ν.
City, State HILLSIDE, NJ							sal Da		City, S MOF	RISVI	LLE PA		to			
Completed by Bryan Parra		Title Proj	ect N	Manage	r		Signate	are	49UM	MA		10	te)/19/	16		

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

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Date of Notification (1)			,	Des suscionation and a service of the service of th							0		0 (111
10-17-1	n// cha	2CK-00	100		of Building Yudelsor		Operato	r (2)								
Agencies Notified	Type Notification	CK U	120		Address					1	OCT	2 4	_21	116_		1
	river/			Od GGL /	Addi 633				-							į.
EPA DEP	Initial Amended		ł	City St	tate, Zip C	ode				100	BESTO	25.0	ON	TRO	-8-	-
☑ DOL	Amendmen	t #			eck ,NJ					ASI	LI(DEN!	SINC	à		
П рон	Emergency justification		1		of Contact			-		I Te	lephone					
DCA	Cancellation		l	eve y	udelson					1 .0	юрнон	o inqui	ibci			
				FAC	ILITY INF	ORMAT	ION				-					
Name of Facility Where	Abatement is Takir	g Place (3)					Тур	e of Facility	y (4)						17.9-37/0
			55995						School (K	(-12)						
Street Address	- April 200					_		X	Subchapt Other (i.e	er 8 (Oth	ner than	K-12)	dinas	hom	
Oib (E)								M	etc.)	. private	or Conn	ilei Cia	ıı Duli	umys	, nom	es,
City (5) Teaneck									uare Feet	1	f Floors		E	Bldg. A	Age	
County (6)								30			seme	1975		n/a		
Bergen				County (STATE	Code (7) USE ONLY	2		Cur	rent Use (P	rior if be	ing den	nolish	ed)			
Name of Monitoring Firm	Hired by Building	Owner (8	1		M No.		Nama	of Al	batement C	t t	(0)					
		owner (o	,	ASCI	WI IVO.				ions Con							
Street Address							Street			a dotti ig	, 1110		55575			
									ch Street							
City, State, Zip Code						- Andrews	City, S	State,	Zip Code							
							Elmv	NOO	d Park NJ	07407	7					
Project Manager for Mon	itoring Firm			Telepho	ne No.		Teleph	none	No.		Licen	se No				
							201	873-	-9418		0130)1				
Start Date (10)					Date (11)				SHA Monito					50180000		
october 30 -2016		novem		5-2016	5		All so	oluti	ons Cont	racting	INC					
Occupancy Status During			0.00				Street									
Facility Closed/Vaca Abatement Perform	ated During Entire I	Period of	Abaten	nent				6.5	ch Street							
Other - Describe: f	amily home	iai Facility	Hours	5					Zip Code							
Scope of Work (Check Al	That Apply)						EIMV	NOO(d Park NJ	0/40/						
23 sf or ≥3 lf		X F					-	7								
≥160 sf or ≥260 lf		-	Renova Demolit				Ŀ	1 1/4	ull Containn Iini-Enclosu	nent with	Negati	ve Pr	essu	re		
		_					×	G	lovebag Pro	ocedure						
					I			1 N	on-Exempte	ed (*) and	d Non-F	riable				
			Locati Iormal											Abate Ty	DESCRIPTION OF	
Location Asbestos-Containing		Use	d Sole	ly by	Achee		scription		al (ACM)			ľ				
TO BE ABA	TED	10 500	intenar odial S				systems			1 22	mount Specify		Z,		Enc	m
In Facilii (13)	ty	Juga	(12)	nan:			cing, VA		`		or LF)		Remova	Repair	aps	Enclosure
N 527 /		Yes	N1-	N1/A		Outer 11	nscenari	eous	,				val	ir i	Encapsulate	ure
-		Yes	No	N/A											0	
Baseme	ent					Pipe	Insula	tion		3	0 LF		Х			
												-				
Name of Registered Wast	e Hauler		N	JDEP W	aste	Cubic '	Yards		Name of	Registe	red I an	dfill				
Atlantic Carting			0.00	auler ID		of Was			1	Centra						
City, State						TDB					ıı Odili	иагу				
Pen Argyl PA18072						Dispos TDB	al Date		City, Sta		40070	,		quote to		
Completed by		Title							Pen Al	rgyl PA	180/2					
Luis Arcila		Presi	dent			S	ignature		. 1	1	1	Date		040		
		1 ,001				1			on	w		10/	1//2	016		



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

10 CC			(Pu	rsuant	to NJA	C 8:60	and 5:16)						
Date of Notification (1)	21 /	16	1				Operator (2			2 4	201	ĵ.	
				Street A		27.0			and been			_	T
3	Type Notificatio ☐ Initial	וונ			Main St.				ASBEST	OS CC	NTE	OL	&
	☐ Initial ☐ Amended				ate, Zip C				LI	CENSI	NG		
□ DCA (NJAC 5:16)	Amendmen			000000000000000000000000000000000000000	dbridge		095						
□ DHSS	Emergency justification				f Contact				Telephone Num	ber			
	☐ Cancellation			Robe	ert Wow	ensdo	rf			_			
				FAC	ILITY IN	FORM	ATION						
Name of Facility Where Al	patement is Tal	king Place	(3)					Type of Facility (4)				
Existing Bldg								School (K-12)	2)			
Street Address								Subchapter 8	(Other than K-12 ivate & commerce	2) ial buildi:	ngs,		
MP E111.5								homes, etc.)					
City (5)								Square Feet	# of Floors		g. Ag	Э	
Secaucus					1.00			6900	1		960		
County (6)				Count	y Code (7))(STATE	USE ONLY)	Prosecutor's	or if being demol	snea)			
Hudson						LAI	C A L - 1						-
Name of Monitoring Firm			B) A	ASCM N 06-15			S Contrac	ent Contractor (9)					
Bio Terra Environm	ental Solutio	ns LLC		00-10	1990	1000	Address	ung, mo.				-	
Street Address						35-100-100-100-10		nsylvania Aven	ue				
PO Box 1224							State, Zip C		7				
City, State, Zip Code Union , NJ 07083						2000 See 100	erson, NJ						
Project Manager for Monit	toring Firm		Teler	phone N	No.		hone No.		License No.				
Rick Eustaquio	coming i min		200000000000000000000000000000000000000	3-494-		973	3-754-1908	3	01-287				
Start Date (10)	Sc	cheduled Co	omplet	tion Dat	e (11)	Name	of OSHA N	Monitor					
10 / _31_ /	16	11 /	15	_ / _	16	AP	S Contrac	ting, Inc.					
Occupancy Status During							t Address						
□ Facility Closed/Vacate	d During Entire	Period of	Abater	ment				nsylvania Aver	nue				
☐ Abatement Performed Time of Abatement: _	Outside of Nor AM	mal Facility PM/	/ Hour _PM-	s - Desc	AM		State, Zip C t erson, N .						
Scope of Work (Check all									activo Proceure				
≥3 sf or ≥3 lf		ПRe	novati	on			Mini-En	ntainment with Ne closure	gative Flessule				
≥3 \$1 60 ≥5 11 ≥160 sf or ≥260 lf		⊠ De					⊠ Gloveba	ag Procedure empted (*) and No	on Friable Proces	lure			
		ls	Locat	tion			⊠ Non-Exe	empled () and No	TIADIE 1 10000		atem	ent Ty	уре
Location	of		Norma			1	Description	of	1000	TI	П	Ш	Ш
Asbestos-Containing	ENGL (MATERIAL III)	100000	ed Sole intena		Asbe	estos Co	ontaining M	aterial (ACM) lation, surfacing,	Amount (Specify	Remova	Repair	Encapsulate	Enclosure
TO BE ABA		Cus		Staff?	(1.0., 110		VAT, or		SF or LF)	oval	=	psul	sure
(13)	2571	Yes	(12) No	N/A		othe	er miscellan	eous)				ate	l l
Thruout Bldg					VAT				8,448 sf.	\boxtimes			
Thruout Bldg								Cement Brd	324sf				
EC Rm1038				1	Panals		Floor Tile		7,940sf				
EC Rms 1040							ng/Pipe In		22 If				
Name of Registered Was	ste Hauler		1	NJDEP '			c Yards of		istered Landfill				
APS Contractors, I			ŀ	Hauler II 2125			Yards	Grows La	ndfill				
City, State Paterson, New Jers	sev						osal Date /16/16	City, State Morrisvill	e, PA 19067				
Completed By (Print or T		Title				-	Signature		1	Date	,	1	
Svetozar Savreski	100)	Presid	ent				de	the sale	hm	m	121	110	6

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to N. I.A.C. 8:50 and 42:430)

('h) 1114	(Pı	ırsu	an	t t	0 <u>N</u>	J.A.	<u>C.</u> 8:	60 and	12:1	20)	FR 1	7 3/	尼	W	E	F
Date of Notification (1) 10/21/16								/ Operato	or (2)	,						
Agencies Notified Type Notific	ation				Add		ile Coi	mpany		-		OCT-	24	2016		1
EPA	ation	4.0				Road				1	hed hed					-
☐ DEP 🛛 Initia	al	-				& Zip (Code									
	ended					J 070					ASE	BESTO	S COI	VTRO	JL 8	×
	ergency					ontact	01					446	lephon	Alu	mhe	r
	cellation					rvey						110	COHOL	G H N lot	THE S	en en en en
	condition		ı y:	501	ı Ga	ivey						1				
				AC	ILIT	Y INF	ORM	ATION								
Name of Facility Where Abatem	ent is Taking Pl	ace (3	3)				Typ	e of Facil	ity (4)			0				
Colonial Pipeline Linden Ju	ınction							School (K-12)							
Street Address							$\neg \vdash \Box$	Subchap	oter 8 (Other than	K-12)					
400 Blair Road										ate & comn	Contract of the Contract of th	uildinas	home	s. etc	:.)	
								uare Feet		# of Floor:			g. Age		/	
City (5)	County (6)	ICO	unt	v.C	ode	(7)	—	aaro r cct		# 01 1 1001.	3	Did	y. Age			
		100	uni	y C	oue	(1)			/D :							
Avenel	Middlesex						Cur	rent Use	(Prior if	f being der	nolished))				
Name of Monitoring Firm Hired I	by Building Own	er (8)			AS	CM No	. Nar	ne of Aba	tement	t Contracto	or (9)					
Apex Companies	P 900	24 74					Bri	stol Env	ironm	ental, Inc) .					
Street Address							Stre	et Addres	ss							
8854 Rixview Lane							1112	23 Beave	r Stre	et						
City, State & Zip Code							City	, State &	Zip Co	de						
Manassas, VA 20109								stol, PA								
Project Manager for Monitoring I	Firm	Telep	hoi	ne N	Num	ber		ephone N			Licer	nse Nun	nber			
Will Thomas		856-						5)788-60			0050					
Scheduled Start Date (10)	Scheduled Com	pletic	n [ate	(11)		ne of OSH		nitor						
11/7/16		11/7				,				ental Inc.	2					
Occupancy Status During Abate	ment (Check on							et Addres			-					
Facility Closed/Vacated	During Entire Pe	eriod	of A	bat	eme	ent		23 Beave		et						
Abatement Performed O						11.12		, State &								
Describe:	diside of Norma	1 1100	ui S					stol, PA								
Facility Occupied During	Abatament						Pil	Stoi, FA	19007							
Scope of Work (Check all that a			-0-35													
Scope of Work (Check all that a	ppiy)									Full Conta	inmont u	ith Noa	otivo E)rocc	uro	
≥3 sf or ≥3 If			D	000	vatio					Mini-Enclo		nui iveg	aliver	1622	uie	
≥160 sf ≥260 lf		\bowtie														
		Ш	U	eme	olitio	11				Glove Bag						
									W	Non-Exem	•					_
Location of	_			atio				escription			Amou	7.55	Abate	emen	it Ty	ре
Asbestos-Containin	ig	Norn						stos-Con			(Spec				_	
Material (ACM) TO BE ABATED		Main		y by				aterial (A)			SF or I	LF)	70	-	J.	E
in Facility		Custo						on, surfac					em	Repair	ap	co
(13)		Ousid	(12		an:			er miscella					Remova	<u>=</u>	Encapsulate	Enclosure
()	1	Yes	No		N/A		0. 0	01 1111000111	arroode	"			-		te	Ф
Futurian Dinalina				1		-		0 1			00.5		NA I		-	\neg
Exterior Pipeline			F	+	⊢	-	۲۱	pe Gask	ets		30 E	d		41-	4	4
		Щ		4	\sqsubseteq									_		
		Ш	L													
			Г	1									ПП			
		T	T	it	Ħ				-52-15All-				Fili	TIT	FI	T
Name of Registered Waste Haul	er		IN	7.10	FP 1	Waste	Cubic	Yards	Name	of Registe	ered I an	dfill				-
			100			O No.	of Wa		, varie	. J. Mogisti	J. J.J. EGIT					
Disposal by Owner			1				NEXT SYSTEM	Cu Yd								
City, State	-3/	11.10-0411		1 / 1 = 1	-			sal Date	City, S	State			272-21			-
J.,, J. C. C. C.								17/16	Oity,	Jaco						
Completed Dr. (Driet Trees)			1~	TIAL .								T-	2-4-		-312	
Completed By (Print or Type)			1.03	Title			Signat	ure		1		L	Date	1		
Gino Pizzigoni					ject		H.	Pin	i arm	i/jl			10/21	110		
			1	viar	nage	er	100	m 1 mgg	you a	-17			1	100		

CK141	+			N OF ASE to NJAC		ABATE			EC	E		\mathbb{W}	
Date of Notification (1) 10/21/16				of Building Quality			(2)		00	F 2	4 6	016	and Commercial
	Notification		Street A	Address Ionial D	rive			1561			-+ (.010	
DEP X DOL	Initial Amended Amendment #			ate, Zip Co taway N					ASBEST L		CON)L &
DOH	Emergency (including justification) Cancellation		Name o	of Contact 3.				Tele	phone Nu	nber			
			FAC	ILITY INF	ORMATI	ION			.55.75				
Name of Facility Where Abatem N/A	nent is Taking Place (3)					Type of Facility (School (K-1	2)					
Street Address 351 Campus Drive							Subchapter Other (i.e. p				dings	, home	es,
City (5) Somerset							Square Feet 22,400	# of 1	Floors	11500	Bldg. A	Age	
County (6) Somerset County			County (STATE	Code (7) <i>USE ONL</i> Y)		Current Use (Prio Warehouse	or if bein	ng demolish	ned)			
Name of Monitoring Firm Hired CPC Environmental	by Building Owner (8)		ASC	И No.			of Abatement Cor ingpoint Contra			ion			
Street Address 142 North 13th Street							Address erkeley Terrac	e 1st F	loor				l l
City, State, Zip Code Newark NJ 07107							tate, Zip Code gton NJ 07111		5-50-11-11-11-11				
Project Manager for Monitoring Chika Onwukaife	Firm		Telepho 973-68	ne No. 38-8056		21 12 00 12 12 12 12 12 12	one No. 372-2177		License N 01238	0.			
Start Date (10) 10/31/16	Schedule 11/22/		pletion	Date (11)			of OSHA Monitor Environmental	Inc					
Occupancy Status During Abate	ment (Check Only Or	ne)					Address						
Facility Closed/Vacated Du Abatement Performed Outs Other – Describe:	ring Entire Period of A side of Normal Facility	Abatem Hours	ent			City, S	est 25th Stree						
Scope of Work (Check All That /	Apply)					New	York 10007						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renovat Demoliti				×	Full Containme Mini-Enclosure Glovebag Prod Non-Exempted	edure				е	
		Locatio									Abate	ement pe	
Location of Asbestos-Containing Materia TO BE ABATED In Facility (13)	ul (ACM) Use Ma Cusi	Normall d Solel intenan odial S (12)	y by ice/ taff?		tos Cont thermal surfac		aterial (ACM) insulation, T, or	(Sp	nount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
M. 145-1	Yes	No	N/A										
Multiple rooms			X		Floor	tile/ma	astic	203	35 SF	X			
Name of Registered Waste Haul	er	60000	JDEP W		Cubic '		Name of F	Register	ed Landfill				
Newark Carting Inc.			06	140.	of Was	ile.	Tullytow	n Refa	acility				
City, State Newark NJ 07102					Dispos	al Date	City, State Tully To						
Completed by Emeka Okeke	Title Presi	dent			Si	ignaturé	Engliste	29	Da 10	e /21/1	6		

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1 10	4

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

			(, ,		arre to	110/10	0.00 4114 12	0)	115	1					
Date of Notification (1)					Name	of Buildir	ng Owner/Operator	(2)	The second	00	T 24	2	016		IL
October 19, 2016					Self R	eliance l	Federal Credit Un	ion / Malibo Cor	struct	ion LLC. (I	Represe	enta	tive)		
Agency Notified	Type I	Notification			Street	Address						011	TDO	71	9
□ EPA	☐ Initi	al			701 \	Nilson	Point Road, S	Suite 605, Box	x 28	ASBEST	FOS C ICENS	ON	3	بار	OL.
Not equired per State Peg. 10-2004	⊠ Am	ended			City, S	tate, Zip	Code				CHINC	2014	<u></u>		
⊠ DOL		endment # 1 ergency (including					MD 21220								
⊠ DOH		tification)				of Contac			Tele	phone Nun	ber				
□ DCA	☐ Car	ncellation			Chris	s Minni	ich								
					FACI	LITY INF	ORMATION								
Name of Facility Where A	bateme	ent is Taking Place	(3)		1000			Type of Facility	(4)						
								☐ School (K-12	2)						
Street Address								☐ Subchapter 8	(Othe						
851 Allwood Road								Other (i.e. pr homes, etc.)		commercia	l buildin	igs,			
City (5)								Square Feet	-	Floors	Bldg.	Age			
Clifton								1,800	1		197				
County (6)				-	County	Code (7) (STATE USE	Current Use (Pr		oina domoli		U T			
Passaic					ONLY)) (STATE 03E	8					•••		
	I Basal Is	D. IIdia - O.		2014	Ma		Name of Abote	Residential		se Slated	for D	em	Olit	ior	1
Name of Monitoring Firm		TO 1.1. TATA	A	SCM	NO.		The state of the s	nent Contractor (9	3						
Saban Engineering	Grou	ıp, Inc.			- 74			toration Co.	Inc.						
Street Address							Street Address	527 (21)							
201 Stuyvesant Av	neu						223 Randolp	March December 1950 Section 2							
City, State, Zip Code							City, State, Zip C								
Lyndhurst, NJ 0707					Cinit .		Clifton, NJ 0	7011							
Project Manager for Monit	oring F	irm			ne No.		Telephone No.		1270125731	rse No.					
Stephen Pharai					73-006	64	973-478-468		001	20					
Start Date (10)		Scheduled Com					Name of OSHA								
October 29, 2016		November 1		016				vironmental S	Servic	es, L.L.()				
Occupancy Status During	Abaten	nent (Check only o	ne)				Street Address								
☑ Facility Closed/Vacated	During	Entire Period of A	bater	nent			The state of the s	Brook Avenue	•						
☐ Abatement Performed C							City, State, Zip C								
☐ Other - Describe:							Lyndhurst, I	NJ 07071							
Scope of Work (Check all	that ap	ply)						Containment with	Negati	ve Pressur	9				
≥ 3 sf or ≥ 3 If					☐ Reno			Enclosure	ivegati	ve r 1633ui					
≥ 160 sf or ≥ 260 lf					□ Dem	olition	☐ Glov	ebag Procedure Exempted (*) and	Non-F	riable Proc	adura				
				-				Exempted () and	NOII-I	nable Floc	cuuic	Α	bate	mer	it
				ocati rmal	370,74								Тур	oe .	
Location		-1./4.084	Used				Description			74					
Asbestos-Containing TO BE AB		ai (ACM)	Main	tena stodi	transfer and the second		stos Containing Ma ., thermal systems			Amount (Specify		R	-	Enc	E
IN Facil				taff?		(surfacing, VAT	, or		SF or LF)		me	Repair	aps	Enclosure
(13)				(12)			other miscellane	eous)				Removal	air	Encapsulate	ure
												-		e	
At foundation wall		Y	es	No	N/A	Coull	dina				0 In ft		-		- 4
At loundation wall			\wedge	Caull	kiiig				O III II		+	+	-		
			_									Н	-	-	_
										VI 100 100 100 100 100 100 100 100 100 10					
Name of Registered Wast	e Haule	er	NJD ID N		aste H	auler	Cubic Yards of Waste	Name of Regis	tered L	andfill					
B&N&K Restoration	n Co.	Inc.	126				< 1	Minerva Er	nterpr	ises, Inc					
City, State							Disposal Date	City, State							
Clifton, NJ 07011				10/31/2016 to 11/05/2016	Waynesbu	rg, Oi	-1								
Completed by		Title					Signature	1/			Date				
G. Roger Woodman	1	Project Man	agei	•			1/1/				10/20	/20	16		



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

Check	No.			
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Date of Notification (1)				Nam	e of Build	ding Owner/Operate	or (2)						
October 19, 2016				Self	Relianc	e Federal Credit U	lnion / Malibo Co	Tending 16	PAR	Л	ΠI	C	-
Agency Notified	Type Notification			Stree	et Addres	ss	mon / Manbo Co	I I I I I I I I I I I I I I I I I I I	O'Left.	esen	tagiv	e	-11
□ EPA	. Initial			10000000		n Point Road,	Suite 605 Bo	128					111
Not equies per Saler Peg. 10-2004	☐ Amended				State, Zi		111111111111111111111111111111111111111	^T 2	1 0	016		11	
⊠ DOL	Amendment #			100000000000000000000000000000000000000		, MD 21220	II Li O	OI L	4 (010		-	
⊠ DOH	☐ Emergency (incli justification)	uding			e of Cont			Talanhana	Lumbar				+
DCA	☐ Cancellation			A second of	is Min			Telephone A	اطباساتها ك	JUV.	TRO	OL	&
					Here by exitings	FORMATION		-			<u> </u>		
Name of Facility Where	Abatement is Taking I	Place (3)):	1.40	J. L. I. I.	NOTIVATION	Type of Facility	. (4)	,				- 1
	3	(-/											
Street Address							School (K-1)	2) 8 (Other than K-	10)				
851 Allwood Road							Other (i.e. p	rivate & commer	cial build	dinas			
City (5)							homes, etc.)			<i>V.</i>		
Clifton							Square Feet	# of Floors	Blo	dg. Ag	ge		
County (6)				_			1,800	1	1	970	+/-		
Passaic				Count		(7) (STATE USE	Current Use (P	rlor if being dem	olished)				
THE RESIDENCE OF THE PARTY OF T	11: 11 B 11 B				,		Residential	House Slat	ed for	Der	noli	itio	n
Name of Monitoring Firm	CONTRACTOR OF STATE OF THE STAT	ner	ASCN	ΛNo.		I and the second second second second second	nent Contractor (
Saban Engineering	Group, Inc.					B&N&K Res	storation Co.	Inc.					
Street Address						Street Address							
201 Stuyvesant Av	neu					223 Randol							
City, State, Zip Code						City, State, Zip (
Lyndhurst, NJ 0707 Project Manager for Monit						Clifton, NJ (07011						
Stephen Pharai	toring Firm	1		ne No.		Telephone No.		License No.					
Start Date (10)	Cobodulad			73-00		973-478-468	77	00120					
October 29, 2016	Scheduled (98 88		Name of OSHA							
Occupancy Status During	Novemb	er 13, 2	2016				vironmental S	Services, L.L	.C.				
						Street Address							
☐ Abstament Berformed	During Entire Period	of Abate	ement	:			rook Avenue	1					
☐ Abatement Performed (☐ Other - Describe:	Jutside of Normal Fac	ility Hou	ırs			City, State, Zip C							
Scope of Work (Check all	that apply)					Lyndhurst, I	NJ 07071						
☐ ≥ 3 sf or ≥ 3 lf						☐ Full (Containment with	Negative Pressu	ire				
☐ ≥ 160 sf or ≥ 260 lf				☐ Ren	ovation	☐ Mini-	Enclosure	J					
	5					□ Non-	ebag Procedure Exempted (*) and	Non-Friable Pro	cedure				
		Is	Locati	on						A	bate	mer	nt
Location	of		ormal			Dii					Ту	ре	
Asbestos-Containing		1 5227.53500	Sole		Asbe	Description of stos Containing Ma		Amount				_	
TO BE ABA		Cu	ustodi	al		., thermal systems	insulation,	(Specify		Re	D D	Encapsulate	Enc
(13)	• 9		Staff? (12)			surfacing, VAT other miscellane	, or ous)	SF or LF		Removal	Repair	nsd	Enclosure
			(/							/al	₹	late	lre
		Yes	No	N/A									
Basement				X	Caull	king			60 In ft				
												1	
Name of Registered Waste	Hauler	100000000000000000000000000000000000000		aste H	auler	Cubic Yards of	Name of Registe	ered Landfill					
B&N&K Restoration	Co. Inc.	1D N	10. 695			Waste < 1	Minoryo Ent	taumuiaaa lu					
City, State		1 500				97.1.7		terprises, Inc	J.				
Clifton, NJ 07011				Disposal Date 10/31/2016 to	City, State	011							
Completed by				11/05/2016	Waynesburg, OH								
G. Roger Woodman	r			Signature	1		Date						
ACD 44	Project M	unaye				200	10/19/2016						

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) 24 October 17, 2016 General Aviation Aircraft Services Inc (dba Meridian Teterboro) 2016 Agencies Notified Type Notification Street Address 125 Industrial Avenue FPA Initial ASBESTOS CONTROL & City, State, Zip Code DEP Amended LICENSING * DOL Amendment # Teterboro, NJ Emergency (including Name of Contact Telephone Number * DOH justification) David Pires DCA Cancellation FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Hanger #12 Exterior (Building Demolished) School (K-12) Street Address Subchapter 8 (Other than K-12) * Other (i.e. private & commercial buildings, homes, 125 Industrial Drive City (5) Square Feet Bldg. Age # of Floors Teterboro 0 0 0 County (6) County Code (7) Current Use (Prior if being demolished) (STATE USE ONLY) Bergen Aircraft Hangar Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) GZA GeoEnviromental SCE Environmental Group Street Address Street Address 55 Lane Road 1380 Mount Cobb Road City, State, Zip Code City, State, Zip Code Fairfield, NJ Lake Ariel, PA 18436 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Benjamin Sallem 9737743311 5703834151 01216 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 10/25/16 Dale Nat Occupancy Status During Abatement (Check Only One) Street Address 1380 Mount Cobb Road Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: Lake Ariel, PA 18436 Scope of Work (Check All That Apply) ≥3 sf or ≥3 If Renovation Full Containment with Negative Pressure ≥160 sf or ≥260 If Demolition Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Туре Normally Location of Description of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ Encapsulate TO BE ABATED Enclosure (i.e. thermal systems insulation, (Specify Remova Custodial Staff? In Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A Exterior Pipe Trenches X Thermal System Insulation 100 X

Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste Cardella Trucking Company IESI Bethlehem SW9047 City, State Disposal Date City, State North Bergen, NJ TRD Morrisville, PA Completed by Title Signature Date Troy Butler Sr. PM 10/17/16

State of New Jersey
NOTIFICATION OF ASSESTOS ABATEMENT

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Facility	(4)						
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Date of Notification (1) 10-19-2016				f Building Resou			(2) gies, Inc		OCT 2	4	2016	Janes Property		
Agencies Notified Type Notification EPA Initial			Street A	ddress ouse Ro	oad			AS	BESTOS	CON	ITRO)L &		
EPA X Initial Amended Amendment Emergency		_	Newfo	ate, Zip C oundlan	d, NJ 0	7435			LICE	VSIN	G			
DOH justification) DCA Cancellation	7.000			f Contact d Eglent				Te	lephone Nu	mber				
Name of Facility Where Abatement is Takin Residential	g Place (3	3)	FACI	LITY INF	ORMAT	ION	Type of Facilit	y (4)						
Street Address								ter 8 (Oth	ner than K-1 & commerc		ldings	, hom	ies,	
City (5) Neptune, NJ 07753					5)		Square Feet 1642	2	of Floors		3ldg. /			
County (6) Monmouth			County (Code (7) USE ONLY	0		Current Use (F	Prior if be	ing demolis	hed)				
Name of Monitoring Firm Hired by Building (Owner (8)		ASCN	/ No.			of Abatement C n Environme			LC				
Street Address							^{Address} /irginia Aver	iue						
City, State, Zip Code							tate, Zip Code by City, NJ 0	7304						
Project Manager for Monitoring Firm			Telepho	ne No.			one No. 333-8855		License N 01174	10.				
Start Date (10) 10-29-2016	11-5-20	016	mpletion I	Date (11)			of OSHA Monitor e as above	or	1					
Occupancy Status During Abatement (Chec Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe:	Period of A	Abater	ment s				Address tate, Zip Code							
Scope of Work (Check All That Apply) ≥3 sf or ≥3 If ≥160 sf or ≥260 If	and the same of th	Renova Demoli				×	Full Contain Mini-Enclosi Glovebag P Non-Exemp	ure rocedure				e		
Location of	N	Locat Vorma	lly		Dos	scription	of				Abatement Type			
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma Cust	d Sole intena todial ((12)	nce/ Staff?	Asbes (i.e.	tos Cont thermal surfac	aining M	aterial (ACM) insulation, T, or	(Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure	
Throughout the property	Yes	No X	N/A		F	Plaster		56	500 SF	x		(0	-	
Exterior	200 A CARLO DE COMO DE CONTROL TODO CONTROL DE CONTROL							+	00 SF	х				
			-											
Name of Registered Waste Hauler Green Environmental Service, LLC		H	IJDEP W lauler ID 034889	No.	Cubic of Was		G.r.o.	w.s No	ered Landfil rth Landfi		1			
City, State Jersey City, NJ					Dispos 11-5-2	al Date 2016	City, St Morris	ate sville, P	А					
Completed by Liliana Serrano	e Mar	nager		S	ignature 1911	()	ekka	~	ate 0-19-	2016				

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

Date of Notification (1) 10/17/2016				of Building		Operato	(2)		nct	2 4	20	116	1				
Agencies Notified EPA DEP DOL	Type Notification Initial	t #		City, St	Address ate, Zip C					ASBESTOS CONTROL & LICENSING							
X DOH DCA	Emergency justification Cancellatio)		1800	of Contact rd Osbo				Te	Telephone Number							
Name of Facility Where	Abatement is Taki	ng Place (3)	FAC	ILITY INF	ORMAT	ION	lity (4)									
House Street Address						***************************************		School Subcha	(K-12) pter 8 (Ot	K-12) oter 8 (Other than K-12) e. private & commercial buildings, home							
City (5) Hillside								Square Feet N/A	Square Feet # of F			Bldg. N/A	Age				
County (6) Union					Code (7) USE ONLY	n		Current Use House	(Prior if be	eing demoli	shed)						
Name of Monitoring Firm N/A	Hired by Building		ASC	Л No.			of Abatement Abatement		r (9)								
Street Address						Address osengren A	venue										
City, State, Zip Code	City, State, Zip Code						City, S	tate, Zip Code									
Project Manager for Moni	toring Firm			Telepho	ne No.		Teleph	none No. 345-8685		License 01311	No.						
Start Date (10) 10/27/2016		Schedule 10/28/2			Date (11)			of OSHA Moni Abatement									
Occupancy Status During Facility Closed/Vaca Abatement Performe Other – Describe: 0	ted During Entire	Period of A	bater	Street Address 11 Rosengren Av City, State, Zip Code Totowa, NJ 0751													
Scope of Work (Check All ≥3 sf or ≥3 If ≥160 sf or ≥260 If	That Apply)	American .	enova				×	Full Contain Mini-Enclos Glovebag F Non-Exemp	sure Procedure	1 25%			re				
Location		N	_ocat	lly				cription of			Abate Typ		emen ype	t			
Asbestos-Containing I TO BE ABA In Facilit (13)	TED	Mair	ntena	ely by nce/ Staff?	Asbes (i.e.	thermal surface	aining M systems cing, VA niscellan	laterial (ACM) s insulation, T, or eous)	(Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure			
baseme	nt	165	X	IN/A		pipe	insula	ion		5 LF	x						
Name of Registered Wast	H	JDEP W lauler ID 0996		Cubic of Was		Maria 1900 a maria		ered Landfi gement c									
City, State Totowa, NJ							al Date	City, S Tullyt	tate town, PA	4							
Completed by Ned Joksimovic				7 1111000000000000000000000000000000000	ignature			D	ate 0/17/2	2016							

State of New Jersey APPROVED: TOM VOORHEES, NJPOL

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

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Date of Notification						Owner / Operator	r (2)			5 1 1		-11				
	10/18/16					ne Company										
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⊠ DOL	☐ Amer		-		NJ 0700)1	ASBESTOS CONTROL Number									
□ DOH		gency	1000000		Contact				LIC	Telebuo	ne W	ımbe	it			
☐ DCA	☐ Canc	ellation	Tys	son (Garvey											
		2-11-77		ACIL	ITY INF	ORMATION										
Name of Facility Wh			ace (3)			Type of Facility (4)										
Colonial Pipeline	Linden Ju	nction				School (K-12)										
Street Address								Other than I		ma 2000 - 2 000-2000						
400 Blair Road						Other (i.e						(C.)				
0:4 (5)		1 (0)		_	1 (7)	Square Feet		# of Floors		Bldg. Age	9					
City (5)		County (6)	Count	y Coc	ie (7)	0 (11)	·		P. I. IV		-					
Avenel		Middlesex				Current Use ((Prior ii	f being dem	olished)							
Name of Monitoring	Firm Hired b	l v Buildina Own	er (8)	IA	SCM No.	Name of Abat	tement	t Contractor	(9)			_				
Apex Companies		,	(-/			Bristol Envi										
Street Address						Street Addres										
8854 Rixview Lan	ne					1123 Beave	r Stre	et								
City, State & Zip Coo	de					City, State & 2	Zip Co	de								
Manassas, VA 20	109					Bristol, PA	19007	,								
Project Manager for	Monitoring F	irm	Telephor	ne Nu	ımber	Telephone Nu	umber		License I	Number						
Will Thomas			856-656	6-287	' 5	(215)788-6040 00509										
Scheduled Start Dat	e (10)	Scheduled Con	npletion [Date (11)	Name of OSH	HA Mor	nitor								
10/19/16			10/19/1	6		Bristol Envi		ental Inc.								
Occupancy Status D						Street Addres										
		During Entire P			ment	1123 Beave										
	Performed Ou	utside of Norma	al Hours	-		City, State & 2										
Describe:						Bristol, PA	19007									
	upied During															
Scope of Work (Che	ck all that ap	ply)						Full Cantai	nnant with I	Magativa	Droo	21150				
N 20-62016					_4:				nment with I	vegative	ries	suie				
≥3 sf or ≥3 lf ≥160 sf ≥260			Name of the last o	lenova emoli				Mini-Enclos	Procedures							
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	antion of		la Laa	otion		Description			Amount				17.7			
	cation of os-Containin	~	Is Loc Normall		200	Description Asbestos-Conf			(Specify	Aud	terrie	111 1 1	he			
	erial (ACM)	9	Solel		, ,	Material (AC			SF or LF)	92.20		ш	m			
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in	Facility		Custodia		ff? i	insulation, surfacing, VAT						nsc	uso			
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Name of Registered	vvaste Haule	ег	1.2		P Waste	Cubic Yards of Waste	ivame	e oi Kegiste	red Landfill							
Service Transpor	t Inc		1		0990	1 Cu Yd	Mine	erva Landi	fill							
City, State						Disposal Date		State					-			
New Castle, Dela	ware					10/19/16		nesburg,	ОН							
Completed By (Print			1-	Title		Signature		J,		Date	_	i i				
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					STOS ABATEMENT								
Date of Notification	n (1)	(Furs			-7 and 12:120-7 Owner/Operator		IN E	G		W	E		
10/14/2016	5				bara Aires			(b) E	<u> </u>	<u>U</u>			
Agencies Notified	Type Noti	fication	Street Addre	ess									
[]EPA	[X]Init:	ial					14 4	OCT	2 4	201	6		
[]DEP	Not	ification	City, State	, Zip	Code				-354		-11-2-0		
[X]DOL	[]Ameno			100	y,NJ,07304	ASBESTOS CONTROL							
[X]DOH	Noti	ification	Name of Cont			LICENSING							
[]DCA	[X] EMERO	GENCY			bara Aires		ne Number						
	[]Cance	ellation						=	-				
None of Marilia en			FACI	LITY	INFORMATION								
Name of Facility Who Sister Barbar	ere Abatem	ent is Tak:	ing Place (3)			Type of Facil	ity (4)						
orpoor parmar	a Alles	•				[]School							
Street Addres						[]Subchap	ter 8 (Other i.e., priva	er than	K-1	2)			
						cial b	uildings, 1	homes,	etc.))			
City (5		G	(6) =			Square Feet	# of Flo	ors B	ldg.	Age			
Jersey City		Country	(6)Essex		Inty Code (7) TATE USE ONLY)	2700	3		86				
						Current Use (Prior if be	eing de	molis	shed	1)		
Name of Monitoring F	irm hired	by Buildir	ng ASCM No.		Name of Abates	ment Contracto	r (9)						
Owner (8) N/A						ANAGEMENT							
Street Address					Street Address		,						
						topher St							
City, State, Zip Cod	le	-1.00			City, State, 2								
						r, NJ 070	42						
Project Manager for	Monitoring	Firm Te	lephone Numbe	r	Telephone Numb			License	Numb	202			
		N,	/A		(973) 744			0037		JET			
Scheduled Start Date	(10) s	ched. Comp	letion Date (11)	Name of OSHA M	Onitor		10000000					
10/15/16		10/17/	16		N/A								
Occupancy Status Dur	ear ing Abatem	ent (Check	Day Year										
[X]Facility Clos	ed/Vacated	During Er	ntire Period		Street Address								
of Abatement []Abatement Per	formed Out	side of No	ormal Facility	,	City Otale 7								
Hours - Descr	ibe: «OffHo	urs Descri	pt»		City, State, Z	ip Code							
[]other - Descr		Attended to the second second	Descript»										
Scope of Work (Check	all that a	apply)			ם ווניקו ז	ontoinment	2 2						
[X]>3 sf or			X]Renovation		[]Mini-E	ontainment wit nclosure	n Negative	Pressi	ıre				
[] <u>></u> 160 sf or	E >200 II	1]Demolition			ag Procedure iable Procedur	~						
Location	-6	Т.	Is ocation		[]1.011 11	11000011	.e	Aba	temer	nt T	'vpe		
Asbestos-Cont			ormally Used		Description Asbestos-Conta		Amount	R		E N	E		
Material (A			Solely y Main-		Material (A	CM)	(Specify	F.	R E P	CA	C		
In Facili		t	enance/	ins	(i.e., thermal sulation, surface	systems	SF or	0	A	PS	0 8		
(13)		St	aff (12)		or other miscell		LF)	A L	I R	U	U		
Basement		Yes	No N/A	0 - 1	om in		00 =			L .	R E		
-				011	er insulat	TOU	20 sf	X			4		
ame of Registered Wa	ste Hauler	7.78	DEP Waste	Cub	ic Yards	Name of T	L						
AZTECH MANAGE		NC Ha	uler ID No.		Waste 2.0	Name of Regis Minerva			TATO				
ity, State		1	7040	Dir	nogal Pate		- rectbr	56	THC	7			
Montclair, NJ	07042			and the same	posal Date 0/18/16	City, State	ra Obi	o AA	600				
				-	0/10/10	Waynesbu	rg, Oni	.0 44	880				
completed By (Print o	50	itle			Signature	1 1		Date					
Constantine Vi	vian I	Preside	nt		Brastant	and was		10/14	/2016	5			

Check # 15702 NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Date of Notification (1) Name of Building Owner/Operator (2) Vanessa Rosenberg 10/19/2016 Agencies Notified Type Notification Street Address 24 2016 []EPA [X] Initial Notification []DEP City, State, Zip Code []Amended Newark, NJ, 07104 [X] DOL ASBESTOS CONTROL & Notification Telephone Number LICENSING [X] DOH Name of Contact [] EMERGENCY Vanessa Rosenberg []DCA []Cancellation FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Vanessa Rosenberg []School (K-12) []Subchapter 8 (Other than K-12) Street Addres [X]Other (i.e., private & commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Age City (5 County (6) Essex County Code (7) 3200 3 (STATE USE ONLY) Newark Current Use (Prior if being demolished) Name of Monitoring Firm hired by Building ASCM No. Name of Abatement Contractor (9) AZTECH MANAGEMENT, Inc. N/A Street Address Street Address 86 Christopher St. City, State, Zip Code City, State, Zip Code Montclair, NJ 07042 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number N/A (973) 744-8800 00371 Scheduled Start Date (10) Sched. Completion Date (11) Name of OSHA Monitor 10/28/16 10/29/16 N/A Month Day Dav Year Month Year Occupancy Status During Abatement (Check only one) Street Address [X] Facility Closed/Vacated During Entire Period of Abatement []Abatement Performed Outside of Normal Facility City, State, Zip Code Hours - Describe: «OffHours Descript» []other - Describe: «Other Occupancy Descript» Scope of Work (Check all that apply) []Full Containment with Negative Pressure [X] > 3 sf or > 3 lf [X] Renovation []Mini-Enclosure []>160 sf or >260 lf []Demolition [X] Glovebag Procedure []Non-Friable Procedure Abatement Type Location Location of Description of Normally Asbestos-Containing NOHOND REMOV NCAPSU Asbestos-Containing Used Amount Material (ACM) Solely Material (ACM) (Specify E By Main-TO BE ABATED SF or (i.e., thermal systems tenance/ A In Facility insulation, surfacing, VAT, LF) Custodial (13)Staff (12) Yes No N/A or other miscellaneous) R F Basement Pipe insulation 110 lf Name of Registered Waste Hauler NJDEP Waste Name of Registered Landfill Cubic Yards Hauler ID No. 17040 of Waste 1.5 AZTECH MANAGEMENT, INC. Minerva Enterprise INC City, State Disposal Date City, State

Montclair, NJ 07042 10/31/16 Waynesburg, Ohio 44688 Completed By (Print or Type) Title Signature Date Constantine Vivian President 10/19/2016

Lecusion of Contracting National (ACM) TO BILL ARATED OF PROBIN . Description of catronics Containing Material (ACA), S.a., Secretal synthesis inclinions, emilystes, 4/7. vr. uther somostureness) (73) (12) YES NO NA IOLF AFFITC THEMOS SYSTEM INSULATION Perso of Registered Land Mamo of Registered Velusia Hunter N.DEP YES ® No. Best Removal Inc Minerva Enterprises , LLC 1 cm 17109 Disposed Distr Chy. State Waynesburg, Qh.44688 Hackensack , N.J. 07601 10/20/16 Completed by Maisian 10/17/16 J.Maiorano Estimator

" Do not use the form for only

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2) Date of Notification (1) 10/17/2016 Riva Yegudin Street Address Type Notification Agencies Notified Initial FPA ASBESTOS CONTROL & City, State, Zip Code × DEP Amended LICENSING Teaneck, NJ 07666 × Amendment # DOL Emergency (including Telephone Number Name of Contact justification) DOH Cancellation Gene Geiler DCA FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Private Dwelling Subchapter 8 (Other than K-12) Street Address Other (i.e. private & commercial buildings, homes, × etc.) # of Floors Bldg. Age Square Feet City (5) n/a n/a n/a Teaneck Current Use (Prior if being demolished) County Code (7) County (6) (STATE USE ONLY) Bergen Name of Abatement Contractor (9) ASCM No. Name of Monitoring Firm Hired by Building Owner (8) Amax Contracting LLC Biottera Solutions Street Address Street Address PO Box 734 1130 W Chestnut Street City, State, Zip Code City, State, Zip Code Woodland Park, NJ 07424 Union, NJ 07083 License No. Telephone No. Telephone No. Project Manager for Monitoring Firm 01266 973-692-6298 973494-3762 Rick Eustaguio Name of OSHA Monitor Scheduled Completion Date (11) Start Date (10) Amax Contracting LLC 10/26/2016 Street Address Occupancy Status During Abatement (Check Only One) Po Box 734 Facility Closed/Vacated During Entire Period of Abatement City, State, Zip Code Abatement Performed Outside of Normal Facility Hours Other - Describe: Woodland Park, NJ 07424 Scope of Work (Check All That Apply) Full Containment with Negative Pressure Renovation ≥3 sf or ≥3 If Mini-Enclosure Demolition ≥160 sf or ≥260 lf × Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Туре Nomally Description of Location of Used Solely by Amount Asbestos Containing Material (ACM) Asbestos-Containing Material (ACM) Encapsula Enclosure Maintenance/ (i.e. thermal systems insulation, (Specify Remova TO BE ABATED Custodial Staff? SF or LF surfacing, VAT, or In Facility (12)other miscellaneous) (13)N/A Yes x Pipe Insulation 30LF Basement X Name of Registered Landfill Cubic Yards NJDEP Waste Name of Registered Waste Hauler Hauler ID No. of Waste Tullytown Facility Amax Contracting LLC 36184 City, State Disposal Date City, State Tullytown,PA 10/31/2016 Woodland Park, NJ Date Signature Title Completed by 10/17/2016 Project Manager Tome Maslarkov

State of New Jersey

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

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Date of Notification (1)								ner/Operator (2)		00	T 24	20	16			
		16	-		799	Emerso	n Re	alty, LLC		IU L	i UU	1 24	21	10			
Agencies Notified	Type Notifica	ition			Street	Address											
					199	Sprain F	Road				ASBES	TOS C	TNO	ROL	. & .		
□ DOLWD	☐ Amended			Ì	City, S	tate, Zip C	ode				L	ICENS	ING				
⊠ DOH	Amendme	-115000000			Sca	rsdale, N	IY 10										
DCA (NJAC 5:23-8)	☐ Emergeno justificatio		laing	1		Name of Contact Telephone Number											
(110/10/03/20-0)	☐ Cancellati	09500			Gla	dys Duer	nas				•						
							harring of	RMATION		-							
Name of Facility Where	Abatement is T	aking P	Place	(3)	171	ZIEII I III		WINTION .	Type of Facility	(4)							
Vacant Commerci			1400	(0)					☐ School (K-12								
Street Address	ar i roporty								Subchapter 8	(Othe							
799 Emerson Aver	nue								Other (i.e., property) homes, etc.)		and comm	nercial bi	ildin	gs,			
City (5)									Square Feet	# 0	f Floors	В	dg. A	ge			
Lindenwold									8,350	1	I		50				
County (6)					Coun	ty Code (7)(STA	TE USE ONLY)	Current Use (Pri	ior if b	eing demo	olished)					
Camden									Vacant Com	nmer	cial Prop	erty					
Name of Monitoring Fire	m Hired by Build	ling Ow	ner (8)	ASCM	No.	Nar	me of Abateme	ent Contractor (9)				17/45				
Mgmt. & Enviro. C	onsulting Se	rvices					S	hade Enviro	onmental, LLC								
Street Address							Stre	eet Address									
PO Box 341							6	23 Cutler Av	/enue								
City, State, Zip Code	-			City	, State, Zip Co	ode											
Chesterfield, NJ 0	8515						1 2	laple Shade									
Project Manager for Mo				Tale	phone	No		ephone No.	,	Lic	ense No.	11.2111					
Bill Weisgarber	intorning i irrii				9-298		200	56-755-0099	1	1000000	00842						
Start Date (10)		Schedule	ad C	78.5				me of OSHA M	8 0								
11 / 7		11					returnsec:	MSL Analyt									
									ioai, iiio.								
Occupancy Status Durin							177.0	eet Address	0 N //								
☐ Facility Closed/Vaca						ariba		00 Route 13									
Abatement Performer Time of Abatement:								, State, Zip Co									
							С	innaminsor	n, NJ 08077								
Scope of Work (Check a	all that apply)							M Eull Con	tainment with Neg	antive	Draceura						
≥3 sf or ≥3 lf			Rei	novati	on			☐ Mini-End		gative	riessuic						
≥160 sf or ≥260 lf] Der	molitic	n				g Procedure								
								⊠ Non-Exe	mpted (*) and No	n-Fria	ble Proced						
**************************************				Locat Iorma				ъ.				At	1	ent T	1		
Locatio Asbestos-Containing		n		d Sole		Ashe	stos	Description of Containing Ma	4355		Amount	Rer	Repair	Encapsulate	Enclosure		
TO BE AB				intena			., the	rmal systems	insulation,		(Specify	Remova	pair	aps	los		
IN Fac			Cust	odial ((12)	stan?			surfacing, VAT her miscellane			SF or LF)	<u>ai</u>		sula	ure		
(13)			Yes	No	N/A		Oti	ner miscellane	ous)					te			
Throughout			7	\boxtimes		Joint C	omp	ound		4	,100 SF						
Storage Area #2/Res	stroom #2							nd Mastic			120 SF						
			=	П								П	Ìп	\Box			
			=											Ī			
Name of Degistered Mr.	ata Haulas				JDEP \	Masta	C	oic Yards of	Name of Regis	stered	Landfill		٦				
Name of Registered Wa	iste Hauler			1000	auler II		Wa		377			ndfill					
Freehold Cartage					15939		1	0	Cumberlar	10 00	Julity Lai	iuiii					
City, State								posal Date	City, State								
Freehold, NJ							1	1/18/2016	Newburg,	PA							
Completed By (Print or	Туре)	Title						Signature	1			Date		N			
Christina Lynch		Ope	erati	ons I	Manag	er		() Mador				INF	1/1	6			