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

D&S Proj. #: 2013-400

RECEIVED

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Date of Notification (1)	J 3			uilding Ow	ner/Opera	ator (2)			2013 OCT 28	AM 3	: 45			
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□ DEP □ Am	ended		101 LO	UISE STI	REET				e LICE	YSING	TOI.			
Amen	dment #:	<u> </u>	City, State	Zip Code)		
☑ DOL ☑ Em	ergency		LITTL	E FALLS.	, NJ									
	cluding	In	ame of Co	ontact					Telepho	one Numb	er			
	tification)	- 11	COTT	T 3 6 4 TTZ 4					s. - -					
Car	ncellation	וו יו	3001	Г МАЈКА										9
				FAC	CILITY IN	FORMAT	ION							
Name of facility where aba	atement i	s taking pla	ace (3)						Type of Facility		2)			
LEWIS PERRY										ool (K - 12 chapter 8	55	han K	-12)	
Street Address									95 35	r (Private/			,	
101 7 077700 000000	_							İ	Bldg	s./Homes,	etc.			
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City (5)		Cour	nty (6)					nty Code (7)						
						(Stat	e use only)	Current Use (Prior if be	ing dem	olish	ed)	
LITTLE FALLS			SSAIC											
Name of Monitoring Firm I	Hired by I	Bldg. Owne	er (8)		ASCM	No.		Name of Abatement	Contractor (9)					
							_11	D & S RESTOR	ATION, INC.					
Street Address							٦ŀ	Street Address						
							П	20 California A	ve.					
City, State, Zip Code					7/20		=	City, State, Zip Code						
							Ш	Paterson, NJ 07	503					
Project Manager for Monito	ring Firm		F	hone Num	ber		╗	Telephone Number		Licens	e Numb	er	_	
	2						Ш	973-345-8020			01169			
Otest Deta (40)		I O ab a a		D-1- (2			╛┟	Name of OSHA Mon	itor					
Start Date (10)		Sched	i. Comple	tion Date (1	1)		Ш	D & S Restorati						
10/26/13		10/3	1/13				11	Street Address	***************************************				-	
Occupancy Status During A	batemer	nt (Check o	nly one)				71	20 California Av	reniie					
Facility closed/vacate	ed during	entire perio	od of abat	ement.			11	City, State, Zip Code						
Abatement performed	d outside	of normal	facility ho	urs-			П							
Describe: NO	RMAL H	OURS					Ш	Paterson, NJ 07	503					
Scope of Work (check all t							Ш							
>3 sf or >3 lf			-						Full Containment Mini-enclosure	w/negativ	e press	ure		
	\boxtimes	Renovatio							Glovebag proced	ure				
≥160 sf or ≥260 lf	Ш	Demolition	1		- 14				Non-Exempted (n-friable	proc	edure	9
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asbestos-containing		by mainte staff(12)	enance/cu	stodiai				bestos-containing	Amount		m	e	n	n
material (acm) to be abated in facility (13)		(D. 612000)	N-		ma	terial (AC	M)		(Specify LF)	SF OF	0	a	a	C
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Registered Waste Hauler		INLIDE	P Hauler	JD# 17	Jubic Var	ds of Was	ete	Name of Pasistand	Londfill		_		Ш	
D & S RESTORATION	N, INC.	135			1 YD	us of Was	510	Name of Registered TULLYTOWN,		ECOVE	RY			
City, State				Disposal I		-		City, State					-	
PATERSON, NJ 0750	03			10/27/1		15 St	- 50	TULLYTOWN,	PA					
Completed by (Print or Type	e) T	Title			Signat	ure				Date				
BOGDAN JOLDZIC		PRESID	ENT							10/23	3/13			
ASR-41		Do not use	e this form	for asbest	os licensu	ure exemp	pted	activities.		Lance				

Notification of Asbestos Abatement (Pursuant to NJAC 8:60 and 12:120) D&S Proj. #: 2013-400 RECEIVED APPROVED Health & Senior Services Name of Building Owner/Operator (2) Date of Notification (1) Morner 海到 00 28 AM 3: 46 1 10 1/12 13 1/11 13 1 (signature) LEWIS PERRY Agencies Notified Type Notification Date: 16 32113 Time: 2:18 PM Street Address 101 LOUISE STREET BESTOS CONTROL Initial EPA Amended DEP City, State, Zip Code Amendment #: DOL LITTLE FALLS, NJ **Emergency** (including justification) Telephone Number DOH Name of Contact DCA SCOTT MAJKA Cancellation FACILITY INFORMATION Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) Subchapter 8 (Other than K-12) LEWIS PERRY Other (Private/Commercial Street Address Bidgs./Homes, etc. Bidg. Age # of Floors Square Feet 101 LOUISE STREET City (6) County (6) County Code (7) (State use only) Current Use (Prior If being demolished) LITTLE FALLS PASSAIC Name of Abstement Contractor (9) ASCM No. Name of Monitoring Firm Hired by Bidg: Owner (8) D & S RESTORATION, INC Street Address Street Address 20 California Ave. City, State, Zip Code City, State, Zip Code Paterson, NJ 07503 License Number Telephone Number Project Manager for Monitoring Firm Phone Number 01169 973-345-8020 Name of OSHA Monitor Start Date (10) Sched, Completion Date (11) D & S Restoration, Inc. 10/26/13 10/31/13 Street Address Occupancy Status During Abatement (Check only one) 20 California Avenue Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Other-Describe: NORMAL HOURS Paterson, NJ 07503 Scope of Work (check all that apply) Full Containment w/negative pressure >3 sf or >3 if Mini-enclosure **Renovation** Glovebag procedure 2160 sf or ≥260 lf Demolition Non-Exampted (*) and Non-friable procedure is location normally used solely E Location of E e by maintenance/custodial n asbestos-containing Amount Description of aspestos-containing n m etaff(12) p C material (acm) to be (Specify SF or material (ACM) C 0 a a abated in facility (13) Yes No N/A 11 P BASEMENT PIPE INSULATION 20 LF T X BASEMENT PIPE INSULATION 110 LFT Registered Waste Hauler NJDEP Hauler ID# Cubic Yards of Waste Name of Registered Landfill D & S RESTORATION, INC. 13506 1 YD TULLYTOWN, RESOURCE RECOVERY Disposal Date City, State City, State PATERSON, NJ 07503 10/27/13 TULLYTOWN, PA Completed by (Print or Type) Signature Title Date

PRESIDENT

BOGDAN JOLDZIC

AAR-41

10/23/13

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

D&S Proj. #: 2013-398

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Date of Notification				10 TO		er/Operator (2)			eet 2	B AM	3: 45				
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☑ DOL	Amendment #:	— II'		e, Zip Code											
	Emergency	IL		EY CITY,	N.	J 07306									
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☐ DÇA	Cancellation	,	anders	on & rash	ned	la mitchell									
				FA	CII	LITY INFORMA	NOITA				25.0				
Name of facility wh	ere abatement i	is taking pl	ace (3)						Type of	Facility					
anderson & rash	neda mitchell									=	ool (K - 12) hapter 8 (0		nan K	-12)	
Street Address									×		r (Private/C s./Homes, c		rcial		
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City (5)		Cou	nty (6)					nty Code (7)		1					
			269				(Stat	te use only)	Curre	nt Use (Prior if beir	ng dem	olishe	ed)	
JERSEY CITY			ison	****	_					(0)					
Name of Monitoring	g Firm Hired by	Bldg. Own	er (8)			ASCM No.	- 11	Name of Abatement (
							_	D & S RESTORA	ATION,	INC.					
Street Address								Street Address							
							_	20 California Av	e.						
City, State, Zip Code	е							City, State, Zip Code							
Designat Manager for	Manita de a Fiere			DIN	- 1-			Paterson, NJ 07:	503		Hisana	Nivest	-		
Project Manager for	Monitoring Firm	1		Phone Nun	nbe	er	- 11	Telephone Number 973-345-8020			License)1169	er		
								Name of OSHA Monit	tor			71107			_
Start Date (10)		Sche	d. Comple	etion Date ((11)		D & S Restoration			32				
11/07/13		11/2	2/13					Street Address	,						
Occupancy Status D	During Abatemer	nt (Check	only one)					20 California Av	enue						
	l/vacated during							City, State, Zip Code							
Describe:	erformed outside		facility ho	ours-											
Other-Describ	e: NORMAL H	IOURS					_	Paterson, NJ 07:	503						
Scope of Work (che	eck all that apply	y)						F	ull Conta	ainment	w/negative	press	ure		
≥ 3 sf or >3 If	\boxtimes	Renovati	on						Mini-encl						
≥160 sf or ≥26	60 lf	Demolitio	n						Glovebag		ure ') and Non	-friable	proc	edure	4
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abated iii laoi	iity (10)	Yes	No	N/A					- 1 .	- ' /		v e	i	р	-
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D & S RESTOR	ATION, INC.	13.	506		_	YD		TULLYTOWN,		RCE R	ECOVE	RY			
City, State				Disposal				City, State	1			· · · · · · · · · · · · · · · · · · ·			
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Completed by (Print		Title	NEW TOP			Signature	1100				Date	10010			
BOGDAN JOLI	JZIC	PRESIL		m fo	_	a liganaura	·m=+-	d activities			10/22	12013			-
ASR-41		DO NOT US	e inis for	III for aspes	sto	s licensure exe	empted	activities.							

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

D&S Proj. #: 2013-396

Notification of Asbestos Ab (Pursuant to NJAC 8:60 and

RECEIVED

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Date of Notification (1) 1 0 / 2 2 / 1 3				er/Operator (2)									
Agencies Notified Type Notification		SUSAN T					45	ESTAS	1132 6	471	-	_	
EPA Initial	110	reet Addres					Ta .	& LICEN	SING	WUL			
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Amendment #:	— °	ity, State, Zi	p Code										
Emergency		TEANEC		7666				TT-Jb	Nombre				
DOH (including justification)	Na	ame of Cont	act					Telephone	Number				
DCA Cancellation		SUSAN	TUCK	5.00				_]*					_
			FACI	LITY INFORM	ATION								
Name of facility where abatement is	taking pla	ce (3)				***************************************	Ту	pe of Facility (4) (K - 12)				
SUSAN TUCK							11	=	pter 8 (Ot	her th	an K-	12)	
Street Address			_				1	The state of the s	Private/Co			12)	
Street Address									lomes, et				
699 LINDEN AVENUE							_ S	quare Feet #	f of Floors	3	Blo	lg. Ag	je
City (5)	Cour	ity (6)			11	nty Code (7)	_						
	l per	CEN			(Sta	te use only)		Current Use (Pri	or if being	dem	olishe	d)	
TEANECK Name of Monitoring Firm Hired by B		RGEN		ASCM No.	Ц_	Name of Abatem	ent Con	tractor (9)		_	_		
Name of Monitoring Firm Fired by b	iug. Owne	ii (0)	- 1	ASCIVI NO.									
					_	D & S RESTO	UKAII	ON, INC.					
Street Address						20 California	. A 1/0						
O'h Olata Zia Cada					_	City, State, Zip Co						_	
City, State, Zip Code						25.80 57.50 52							
Decinet Manager for Manitoring Firm	-	I Ph	ne Numb	or	-	Paterson, NJ Telephone Numb			License	Numb	er		
Project Manager for Monitoring Firm		PIR	ne Numb	ei		973-345-80				169			
					_	Name of OSHA							
Start Date (10)	Sched	. Completio	n Date (1	1)		D & S Resto	ration,	Inc.					
11/02/1313	11/22	2/13				Street Address							
Occupancy Status During Abatemen	(Check o	nly one)				20 California	Avenu	ie					
Facility closed/vacated during	entire peri	od of abater	nent.			City, State, Zip C	ode			==877			
Abatement performed outside Describe:		facility hour	S-										
Other-Describe: NORMAL H	OURS				=	Paterson, N.	J 07503	}					
Scope of Work (check all that apply)		vii—b——— Co				=	Containment w	negative/	press	ure		
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≥160 sf or ≥260 lf	Demolition	า						rebag procedur n-Exempted (*)		riable	proce	edure	Ĺ
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abated in facility (13)	Yes	No	N/A	1						v e	i r	р	-
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B. LOZI. L. T. C. C. L. T. C.													
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Registered Waste Hauler	INJD	EP Hauler I	D# C	Cubic Yards of	Waste	Name of Regist	ered Lar	ndfill					1
D & S RESTORATION, INC.		506		2 YDS		TULLYTOW	VN, RE	SOURCE RE	COVER	Y			
City, State			Disposal [City, State							
PATERSON, NJ 07503			11/03/1	The state of the s		TULLYTO	WN, PA	1					
Completed by (Print or Type)	Title			Signature					Date	/1220	112		
BOGDAN JOLDZIC	PRESID	ENT							10/22	1320	115	-	

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D&S Proj. #: 2013-399

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

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Date of Notification (1)	Name of Build	ding Owner/O	perator (2)									
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Agencies Notified Type Notification	Street Addres	S				& LICE	CONTR	OL.				
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DEP Amendment #:	City, State, Z	ip Code										
DOL Emergency	BLOOM	FIELD, NJ	07003				T. been N	umbor		-	-	_
DOH (including	Name of Cont					11	elephone N	umber				
justification)	J. b. sanh	vioces				6 - 10 1						_
☐ DCA ☐ Cancellation	deborah											
		FACILIT	Y INFORMAT	TION		True of	Facility (4)			-		_
Name of facility where abatement is ta	king place (3)				1	Type of	School (K - 12)				
Name of Izemy						1 7	Subchapt		er than	K-12)	
deborah viaces							Other (Pr	ivate/Com	nmercia	al		
Street Address							Bldgs./Ho			Bldg.	Ane	_
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	County (6)				Code (7)			if hains	domoli	chad)	_	_
City (5)				(State u	se only)	Curre	nt Use (Prio	r if being	demon	Sileu,		
BLOOMFIELD	ESSEX				ime of Abatemen	t Contracto	or (9)			_		_
Name of Monitoring Firm Hired by Bld	g. Owner (8)	, , ,	ASCM No.	1.1								
					& S RESTOR	RATION,	, INC.			_		_
Street Address					reet Address	•						
Street Address					20 California A							_
City, State, Zip Code				Cit	y, State, Zip Cod							
				_ _	Paterson, NJ (License N	Numbe	r		
Project Manager for Monitoring Firm	P	hone Number		Te	973-345-802				169			
,	1			11	ame of OSHA Mo							
Start Date (10)	Sched. Complet	tion Date (11)			D & S Restora							
Start Date (10)				1 5	treet Address	ation, and						
10/23/13	10/30/13			-11	20 California	Avenue						
Occupancy Status During Abatement	(Check only one)	tement		l c	ity, State, Zip Coo							
Facility closed/vacated during e Abatement performed outside o	of normal facility ho	urs-		11	.,,							
-				-11	Paterson, NJ	07503						
Other-Describe: NORMAL HO	UKS					Full Cor	ntainment w	/negative	pressu	ıre		
Scope of Work (check all that apply)						Mini-en	closure					
	Renovation				ļ	Gloveb	ag procedur cempted (*)	e and Non-	friable	proce	dure	
≥160 sf or ≥260 lf	Demolition					Non-E	(empled ()	and Non	R	R	E	E
Location of	Is location normal by maintenance/c	ly used solely				.	Amount		e m	e p	n c	n
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material (acm) to be abated in facility (13)	Yes No	N/A	l linato i i i	V			LF)		v e	ľ	р	_
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Registered Waste Hauler	NJDEP Haul		Cubic Yards of	vvasie	TULLYTOW	VN, RES	OURCE R	ECOVE	RY			
D & S RESTORATION, INC.	13506	Disposal [City, State							
City, State		10/24/1			TULLYTO	WN, PA					_	
PATERSON, NJ 07503	Title		Signature					Date	10010			
Completed by (Print or Type) BOGDAN JOLDZIC	PRESIDENT							10/2	2/2013)	_	
ROGDAN JOEDSTG	11COLDEN,1				d nativitiae							

22 2012 (TITE) 10.54

1310-4698 Check #5658

Date of Notification	(1) 10/22/	13						Owner / Operator	(2)				2.00			
Agencies Notified		tification				dres										
	5.2.							Ave.								
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Name of Facility Wh		tement is Taking Pl	ace (3)				Type of Facility								
Verizon- Waverly	/ CO							School (K	12	O4141	17.40					
Street Address										Other than	50	huildinge	hom	00 0	to)	
224-240 Lyons A	ve.							Other (i.e Square Feet	. prive	# of Floor			dg. Ag		ic.)	
City (5)		County (6)	TCc	unty	Coc	de (7)		- Square Feet		# 01 11001	5	Bic	ıy. Ay	C		
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Newark		Essex						Offices	1101 1	i being dei	110113116	u)				
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USA Environmer		ed by building Owi	iei (0)	No.		NOCIV	i ivo.	AbateTech,		Contracto	JI (3)					
Street Address	itui				-			Street Address								
8436 Enterprise	Ave.							PO Box 25								
City, State & Zip Co				_				City, State & Z	ip Co	de				55)		
Philadelphia, PA				1				Lumberton,		8048						
Project Manager for	Monitori	ng Firm		ohone		umbe	r	Telephone Nu			Lic	ense Nu				
Mark Jenkins	ark Jenkins							609-265-210	-				0052	29		
Scheduled Start Da	2.00	Scheduled Cor	npleti 11/2		ate ((1,1)		Name of OSH		nitor						
10/28/13 Occupancy Status I	Lary.	atament (Check or		T. C.				Street Address				-				_
		ted During Entire P			ate	ment		108 Haddon	-							
		d Outside of Norma						City, State & Z				-			-	
Describe:	5 PM s							Westmont, i								
Facility Occ		ring Abatement														1
Scope of Work (Che									<u></u>		69		036	1860		1
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	erial (AC			olely				Material (AC				or LÉ)	Rer		四	m
	BE ABAT	ED		tena		132223		(i.e., thermal sylinsulation, surfact					Remova	Repair	Encapsula	Enclosure
11	n Facility (13)		Cust	odial (12)		π?		or other miscella					<u>a</u>	pair	sula	Sur
	(13)		Yes	No		I/A									te	0
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Name of Registered	d Waste I	Hauler		13570		PW		Cubic Yards	Nam	e of Regis	tered L	andfill			VIII. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
AbateTech, Inc				Н		er ID 875 0		of Waste 4	TRR	F Landfil	II					
City, State								Disposal Date	City,	State	=					
Lumberton, NJ								10/25/13	ıully	ytown, P	A		In :		1950	
Completed By (Prin	t or Type)			tle		J	Signatute	n. 1				Date	2142		
Gwen Trumbetti				٥	pps	. Co	ora.	X					10/2	2113		

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT Check #5656 RECEIVED

Name of Monitoring Firm Hired by Building Owner (8)	Date of Notification	10/21/13		N	/lidd	lles	ex C	ount	wner / Operator y College	(2)		2013	00 7 ;	28 /	M 3		•
DCA				2	600	Wo	oodb	ridge				458	ESTO	S cr	nu r	90	3
DCA											12	6	LIC	ENSI	Nr.	WL	
Same of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) School (K-12) School (K-12) Subchapter 8 (Other than K-12) Subchapter 9 (Other than K-12) Street Address Street Addre		The state of the s							-5050				Ta	1		_	-
Name of Facility Where Abatement is Taking Place (3) School (K-12) School (K-12) School (K-12) School (K-12) School (K-12) School (K-12) Subchapter 8 (Other than K-12) Subchapter 9	DCA			139									•				
Name of Facility Where Abatement is Taking Place (3) School (K-12) School (K-12) School (K-12) School (K-12) School (K-12) School (K-12) Subchapter 8 (Other than K-12) Subchapter 9				6	ΕA	CII	ITV	INFO	DMATION				- 1				
School (K-12) School (K-12) School (K-12) School (K-12) School (K-12) Subchapter 8 (Other than K-12) Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, etc.) Square Feet # of Floors Bidg. Age Square Feet # of Floors Square Feet Square Feet Square Feet Square Feet Square Feet Squa	Name of Facility Wh	nere Ahatem	ent is Taking Pl	ace (3		CIL	.111	INFO		tv (4)							
Subchaplet 8 (Other ftan K-12) Subchaplet 8 (Other ftan K-12) Other (i.e. private & commercial buildings, homes, etc.)			ioni io raking r i	٥) ٥٥٥	,												
Square Feet		,									Other than	K-12)					
Square Feet	2600 Woodbridge	e Ave.							Other (i.e	e. priva	ite & comm	ercial bu	ildings	, hom	es, et	c.)	
Name of Monitoring Firm Hired by Building Owner (8)	_								Square Feet		# of Floors	i.	Blo	lg. Age	9		
Name of Monitoring Firm Hired by Building Owner (8)	City (5)		County (6)	Cou	unty	Cod	le (7)	6									
Name of Monitoring Firm Hired by Building Owner (8) Environmental Connection Abate Tech, Inc. Street Address 120 North Warren Street City, State & Zip Code City, State & Zip Code Lumberton, NJ 08048 Project Manager for Monitoring Firm Rick Beach Scheduled Start Date (10) Scheduled Completion Date (31) 10/21/13 Cocupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Hours Describe: Facility Cocupied During Abatement Scope of Work (Check all that apply) End Containing Material (ACM) TO BE ABATED T	Edison		Middlesex						Current Use (Prior it	f being dem	nolished)					
Environmental Connection Street Address									College								
120 North Warren Street				er (8)		Α	SCM	l No.			t Contracto	r (9)					
City, State & Zip Code Trenton, NJ 08808 Project Manager for Monitoring Firm Foliate (19)		68% 9								ss							
Trenton, NJ 08608 Project Manager for Monitoring Firm Telephone Number G09-392-4200 G92-265-2107 Cense Number G09-265-2107 Cense Number G09-									THE RESERVE OF THE PARTY OF THE								
Project Manager for Monitoring Firm Telephone Number 609-392-4200 609-392-4200 609-392-4200 609-392-4200 609-392-4200 609-265-2107 00529																	
Rick Beach Scheduled Start Date (10) Scheduled Completion Date (11) 10/21/13 Occupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Hours Describe: Facility Occupied During Abatement Scope of Work (Check all that apply) ≥ 3 sf or ≥3 if Patility Cocupied During Abatement Scope of Work (Check all that apply) Pull Containment with Negative Pressure Mini-Enclosure Glove Bag Procedures Non-Exempted and Non-Friable Procedure Normally Used Solely by Maintenance or Custodial Staff? (12) TO BE ABATED Maintenance or Custodial Staff? (12) Yes No N/A Millgate Staff Bathroom Normal Staff Normal			Firm	Telen	hone	Mu	mhei	r				Licer	se Nu	mher			
Scheduled Start Date (10)		Worldoning						•				12,001	100 110		9		
10/21/13		te (10)	Scheduled Con							- ANN -	nitor			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Hours Describe: Facility Occupied During Abatement			/			1	′		EMSL Analy	ytical							
Abatement Performed Outside of Normal Hours Describe: Facility Occupied During Abatement						/	68										
Describe:			_			ater	ment										
Scope of Work (Check all that apply) Full Containment with Negative Pressure Mini-Enclosure Glove Bag Procedures Non-Exempted and Non-Friable Procedure Non-Exempted and Non-Friable Procedure Asbestos-Containing Non-Exempted and Non-Friable Procedure Non-Exempted and Non-Friable Proce		Performed C	outside of N orma	al Hou	ırs				5000	0.5							
Scope of Work (Check all that apply) Scope of Work (Check all that apply) Scope of Work (Check all that apply) Scope of Work (Check all that apply) Scope of Work (Check all that apply) Scope of Work (Check all that apply) Scope of Work (Check all that apply) Scope of Work (Check all that apply) Scope of Work (Check all that apply) Scope of Work (Check all that apply) Scope of Work (Check all that apply) Scope of Work (Check all that apply) Scope of Work (Check all that apply) Mini-Enclosure Mini-Enclosure Glove Bag Procedures Non-Exempted and Non-Friable Procedure Amount Abatement Type Asbestos-Containing (Specify Material (ACM) SF or LF) One of the Mainteniance or Custodial Staff? (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous) One of the miscellaneous One of the		unied Durine	A hatamant						westmont,	NJ U8	1108						
Full Containment with Negative Pressure Mini-Enclosure Glove Bag Procedures Non-Exempted and Non-Friable Procedure Normally Used Solely by Material (ACM) Secondary (13) Yes No N/A Normally Used (13) Description of Asbestos-Containing Material (ACM) Secondary (12) Yes No N/A Normally Used Solely by Maintenance or Custodial Staff? (12) Yes No N/A N/	Brown			S											-	2222	
≥3 sf or ≥3 lf	Scope of Work (Office	con all triat a	ppiy)							П	Full Conta	inment w	ith Ne	gative	Pres	sure	
Non-Exempted and Non-Friable Procedure	≥3 sf or ≥3 I	f		\boxtimes	Re	nova	ation							34			
Location of Asbestos-Containing Material (ACM) Normally Used Solely by Maintenance or Custodial Staff? (12) Yes No N/A Millgate Staff Bathroom Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous) Millgate Staff Bathroom Double Layer VAT & Mastic 30 SF Name of Registered Waste Hauler NADEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste	≥160 sf ≥26	0 If			De	moli	tion				Glove Bag	Procedu	ıres				
Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13) Millgate Staff Bathroom Millgate Staff Bathroom Millgate Staff Bathroom Normally Used Solely by Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous) Millgate Staff Bathroom Double Layer VAT & Mastic Outline Layer VAT & Mastic Normally Used Solely by Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous) Millgate Staff Bathroom Millgate Staff Bathroom Normally Used Solely by Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous) Double Layer VAT & Mastic Normally Used Solely by Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous) Millgate Staff Bathroom Normally Used Solely by Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous) Double Layer VAT & Mastic Normally Used Solely by Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous) Double Layer VAT & Mastic Normally Used Solely by Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous) Double Layer VAT & Mastic Normally Used Staff Service																	
Material (ACM) TO BE ABATED in Facility (13) Maintenance or Custodial Staff? (12) Yes No N/A Millgate Staff Bathroom Double Layer VAT & Mastic SF or LF) Maintenance or Custodial Staff? (12) Yes No N/A Millgate Staff Bathroom Millgate Staff									Description	of				Aba	teme	nt Ty	ype
Maintenance or Custodial Staff? (12) Yes No N/A Millgate Staff Bathroom Double Layer VAT & Mastic Cubic Yards Cubic Yard			ng				ea				1					ш	
Yes No N/A							or				s	01 01	,	Rer	چ	nca	Enc
Yes No N/A	i			Custo			ff?							Von	pai	nsd	losu
Millgate Staff Bathroom Double Layer VAT & Mastic STATE OF THE PROPERTY OF T		(13)		Voo			//	C	or other miscella	aneou	s)			a	-	ate	6
Name of Registered Waste Hauler D	BRILL A - CA-FF D-Al-			162		18/	7	D	bla Lavau VA	T O RA	landia	20.0	_		\neg		\neg
Hauler ID No. of Waste	Willigate Staff Batri	room		H	씜	+	╬	Dou	bie Layer vA	I Ct IV	iastic	30 3	г	+121	H	H	퓜
Hauler ID No. of Waste				H	+		+							卄	ㅐ	H	Ħ
Hauler ID No. of Waste				H	十	+	=							TH	H	Ħ	Ħ
Hauler ID No. of Waste				Ħ	Ħ	Ħ	1							TĦ	Ħ	Ħ	Ħ
Hauler ID No. of Waste			101.04	Ħ	Ħ	T	Ħ										
	Name of Registered	d Waste Hau	iler		100000					Nam	e of Registe	ered Lan	dfill				
	AbateTech, Inc.				7.55				2								
City, State Lumberton, NJ Disposal Date 10/22/13 City, State Tullytown, PA												Vi					
Completed By (Print or Type) Gwendolyn Trumbetti Title Opps. Coord. Signature 10/21/13					0.0000		. Cod		Signature	M	4			ALC: HE MANUAGE.	1/1:	3	

1310-4706 Check #5721

RECEIVED

Date of Notification							Owner / Operator	(2)	Sing			-		
	10/23/13			***	*************		ınications		CH.	3 867 28	AM 2			
Agencies Notified EPA	Type Notifica	ition	1.7		t Add		Ave				MIT J	93	1	
[nwood & Zip C			457	ESTOS (& LICEN	2011-			
☐ DEP ☐ DOL		ded #					19046			21105	UNTE	101	31	
		gency				ontact	13040	7.44		- LIUCH	SINC		•	-
□ DOH □ DCA		ellation			Bay									
	L Cano	eliation		12.000										174
					CILI	TY INF	ORMATION							
Name of Facility Wh		ent is Taking Pla	ace (3)			Type of Facility							
Verizon- Woodbi	ridge CO						School (P	in manager	Other then I	40)				
Street Address		¥:							Other than K		ac hom	ac (to)	
138 Main Street							Other (i.e Square Feet		te & comme		Bldg. Age		10.)	
O'' (5)		0 (0)	10		0 - 1-	(7)	Square Feet		# 01 F10015		nag. Age	;		
City (5)		County (6)	Col	unty	Code	(7)	0 111 /	D	[ti-tN				_
Woodbridge		Middlesex					Current Use (Prior i	t being aemo	olisnea)				
					-		Offices			(0)				
Name of Monitoring	Firm Hired b	y Building Own	er (8)		AS	CM No.			t Contractor	(9)				
ESIS							AbateTech,							
Street Address	4oth Fig.	2/2					Street Addres PO Box 25	S						
10 Exchange Pla		or			-		City, State & 2	Zin Co	, de			_		-
City, State & Zip Co Jersey City, NJ 0							Lumberton,							
Project Manager for		irm	Telep	hone	Nun	nher	Telephone Nu			License N	lumber			
Brian Kingsbury	Worldoning i		201-3			iboi	609-265-210			2.0000	0052	9		
Scheduled Start Da	te (10)	Scheduled Con		-		1)	Name of OSH		nitor					
11/5/13		301,000.00	11/7		(.	.,	EMSL Analy							
Occupancy Status I		nent (Check or	ly one	9)	100		Street Addres							
		During Entire Po			atem	ent	108 Haddon	Ave.	•				112301A	
Abatement	Performed Ou	utside of Norma	al Hou	ırs			City, State & 2	Zip Co	de					
Describe:							Westmont,	NJ 08	3108					
Facility Occ	upied During	Abatement												
Scope of Work (Che	eck all that ap	ply)						_				_		
<u></u>					2			Ц	Full Contain		legative	Pres	ssure	,
≥3 sf or ≥3 l			\bowtie		novat			님	Mini-Enclos					
≥160 sf ≥26	O If		\Box	De	moliti	on		Ц	Glove Bag F		. Crickle	Dro	00411	
lana - a - a - a - a - a - a - a - a - a							Description	<u> </u>	Non-Exemp					_
	ocation of tos-Containin	_		oca	tion Used		Description Asbestos-Cont			Amount (Specify	Aba	tem	ent T	ype
	erial (ACM)	9		olely		'	Material (AC	_		SF or LF)	Re		Щ	m
	BE ABATED		Maint			г	(i.e., thermal sy				Removal	Re	car	ncl
iı	n Facility	1	Custo			?	insulation, surfactor or other miscella				Va	Repair	Encapsulate	Enclosure
	(13)	-	Van	(12)		-	or other misoem	211004	-"			•	ate	6
			Yes	No	N/A					00.05		\neg		
Roof			붜	井			Roof Seal			20 SF		Η	H	H
Roof			뭐	님			Coping Stone		IK	120 LF		Η	H	믬
Roof			님	닏			Vent Caulk	ang		26 LF		님	H	님
			님	무	14				-		ᆜ냄	뉘	H	님
			님	님	$+$ \vdash			- 00-01			니님	Η	H	H
		1	Ш	 		10/	Out in Vanda	NI	a of Dogistor	ad Landfill		Ш		
Name of Registered	l Waste Haule	er		100,000			Cubic Yards of Waste	Nam	e of Register	ed Landilli				
AbateTech, Inc				178		ID No. 7 50	6	TRR	F Landfill					
Contract to the second of the			-		.0		Disposal Date		State					
City, State Lumberton, NJ							11/7/13	1000	ytown, PA					
Completed By (Prin	t or Type)			Ti	tle		Signature				Date			
Gwen Trumbetti	, , , ,					Coord.	Chil	1			10/23	/13		

State of New Jersey 1310-4699 NOTIFICATION OF ASBESTOS ABATEMENT Check #5720 (Pursuant to N.J.A.C. 8:60 and 12:120) RECEIVED

Date of Notification	Shirt Control of the Control							Owner / Operato	r (2)	2012				-				
A N:C . I	10/22/13	wa. 4.5.505						inications		LEIJ	OCT :	28	AM :					_
Agencies Notified EPA	Type Notifica	ation		Stree				Ave			1000	,		43				
□ DEP	☐ Initia	1		City,				Ave.		253	ESTO	SC	OHT	B.o.				_
⊠ DOL		nded #						19046		8	E LIC	FNS	INI	RUL				
☑ DOH		rgency		Name				10040				-140	Te	lenk	A A	umh	her	-
DCA		ellation	- 1	Alex						ASB			1.0	ТОРТИВ	INFO L	GIIII		•
						:5 -5 0		ORMATION					_					
Name of Facility Wh	nere Abateme	ent is Taking P	lace (CIL	LIII	ШАГ	Type of Facili	ity (4)			-						_
Verizon- Rutherfo		one to Taking 1	,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	٠,				School (I										
Street Address			V 10 10 10 10 10 10 10 10 10 10 10 10 10					Subchap		Other tha	an K-12	2)						
30-40 Orient Way	e e							Other (i.e					ldings	, hom	es, e	etc.)		
9.53								Square Feet		# of Flo	ors		Bld	g. Ag	e			_
City (5)		County (6)	Co	unty	Cod	de (7)											
Rutherford		Bergen						Current Use ((Prior if	being d	lemolis	hed)	v = \$10000	en contra	20			_
								Offices	20									
Name of Monitoring		y Building Owr	ner (8)	(P	ASCN	ΛNo.			Contrac	ctor (9)							
USA Environmen	ital							AbateTech,										
Street Address								Street Addres	SS									
8436 Enterprise A								PO Box 25	7:- 0-									
City, State & Zip Co Philadelphia, PA								City, State & Lumberton	*.									
Project Manager for		irm	Teler	ohone	e Nu	ımbe	er	Telephone No		30-10	Ti	icens	e Nu	mber				-
Mark Jenkins	ark Jenkins							609-265-210					,0 110	0052	9			
Scheduled Start Dat	cheduled Start Date (10) Scheduled Con							Name of OSF	A Mon	itor								_
11/4/13			11/1					EMSL Analy	ytical					251				
Occupancy Status D					501117 4 50000			Street Addres										
		During Entire P			ate	ment	Į.	108 Haddor				_						_
Abatement F Describe:	Performed Of	utside of Norm	аі но	urs				City, State & 2										
Facility Occu	inied During	Ahatement						Westmont,	NJ US	108								
Scope of Work (Che							115		-							-		-
		F-37							П	Full Cor	ntainme	ent wit	h Neg	gative	Pres	sure	е	
≥3 sf or ≥3 lf			\boxtimes	Re	nova	ation				Mini-En	closure	1						
≥160 sf ≥260) If			De	moli	ition				Glove B	ag Pro	cedur	es					
										Non-Exe	empted	and	Non-F					
	cation of os-Containin			Loca				Description Asbestos-Cont			5.00	mour		Aba	tem	ent 7	Гуре	
	erial (ACM)	g		nally olely		eu		Material (AC				Specif or LI		R		ш		
<u>TO B</u>	E ABATED			tenar		or		(i.e., thermal sy			0.	OI L	,	Removal	Z,	nca		1
in	Facility		Cust			ff?		insulation, surfact or other miscella						val	Repair	Encapsulate	Eliciosure	-
	(13)		Yes	(12) No		/A		or other miscent	ancous						_	late	- ā	1
Small Roof			163		1.0.00	3		Roof flash	ina			100 0	-				-	1
Large Roof			H	H		<u> </u>		Roof Caul				100 S 20 SI			H	ዙ	늗	1
Large Roor			H	H	15	7		Rooi Cauir	Mily		3.	20 31	5	H	H	뉘	누	1
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			П	Ħ	ΤĒ	٦t		1					-	H	Ħ	Ħ		1
Name of Registered	Waste Haule	er		N.	JDE	PW		Cubic Yards	Name	of Regi	istered	Land	fill		_			-
				Ha		r ID I		of Waste										
AbateTech, Inc					18	8750)	6		Land	fill							_
City, State Lumberton, NJ	0			10				Disposal Date 11/11/13	City, S	State <mark>town,</mark> F	PA							
Completed By (Print Gwen Trumbetti	or Type)	a I			tle	. Cod		Signature	n	1				Date	142			
Caron Humbern				101	pps.	. 000	Jiu.	\	11/1	SI				10/22	113			

1310-4698 Check #5719

RECEIVED

Date of Notification (1) 10/22/13		me of Building O			67 aa	9 tour 1, 2			
Agencies Notified Type Notification	on St	reet Address 0 Greenwood	70	4013	CT 28	AM 3: 6	3		
□ DEP □ Initial □ Amende	Cit	ty, State & Zip Co	ode	46BE	STOS C LICEN	ONTRO)[
☑ DOH ☐ Emerge ☐ DCA ☐ Cancell	,	me of Contact ex Baylor			54 85	Helenhor			r,
		FACILITY INFO							
Name of Facility Where Abatement Verizon- Waverly CO	t is Taking Place (3)		Type of Facility School (K						
Street Address			Subchapt	er 8 (Other than K-					
224-240 Lyons Ave.				private & commer				ic.)	
(0)1(5)	Saunty (6) Cour	atu Codo (7)	Square Feet	# of Floors		Bldg. Age	3		
		nty Code (7)	Current Use (F	Prior if being demo	ished)				-
Newark	ssex		Offices	nor il bollig donie					
Name of Monitoring Firm Hired by	Building Owner (8)	ASCM No.		ement Contractor (9)				
USA Environmental			AbateTech,						_
Street Address 8436 Enterprise Ave.			Street Address PO Box 25	5					
City, State & Zip Code			City, State & Z	ip Code					
Philadelphia, PA 19153			Lumberton,		(c.				
Project Manager for Monitoring Fire Mark Jenkins		one Number 5-5810	Telephone Nu 609-265-210		License	Number 0052	9		
Scheduled Start Date (10) Scheduled Start Date (10) Scheduled Start Date (10)	cheduled Completion 11/25/		Name of OSH. EMSL Analy						
Occupancy Status During Abateme	ent (Check only one) uring Entire Period of	Abatement	Street Address 108 Haddon						
Abatement Performed Outs			City, State & Z						
Describe:			Westmont, N	NJ 08108					
Facility Occupied During A									\dashv
Scope of Work (Check all that app	iy)	1.0	Ī	Full Contain	ment with	Negative	Pres	sure	
≥3 sf or ≥3 lf		Renovation		Mini-Enclosu					8.
≥160 sf ≥260 lf		Demolition		Glove Bag P			Dro	oodur.	_
l anotion of	le la	ecation	Description	Non-Exempt	Amount				
Location of Asbestos-Containing		ally Used	Asbestos-Conta	aining	(Specify				-
Material (ACM)		ely by	Material (AC (i.e., thermal sy		SF or LF)	Remova	ח	Encapsulate	ᄪ
TO BE ABATED in Facility			nsulation, surfaci	ing, VAT		oval	Repair	apsı	Enclosure
(13)	(12)	or other miscella	neous)			₹.	ılate	ure
	Yes	No N/A			4015			-	$\overline{}$
1 st Floor Frame Area		the same of the sa	ipe Fitting Ins		12 LF		뉘	ዙ	님
2 nd Floor-Women's Room		□	ipe Fitting Ins Roof Flash		3,300 SF		ዘ	ㅐ	ዘ
Roof		 	NOUI FIASII	9	-,000 01	一 芦	Ħ	計	計
		HHH							
Name of Registered Waste Hauler		NJDEP Waste Hauler ID No.	Cubic Yards of Waste	Name of Register	ed Landfill				
AbateTech, Inc		18750	6	TRRF Landfill					
City, State Lumberton, NJ		::	Disposal Date 11/25/13	City, State Tullytown, PA				230	
Completed By (Print or Type) Gwen Trumbetti	7	Title Opps. Coord.	Signature			Date 10/22	2/13		

1310-4704 Check #5660 RECEIVED

Date of Notification								wner / Operato	or ((2)	9 8 6 3			6			
Agencies Notified	10/24/13 Type Notifica	ation		Stree			B.O.I	=•		r gol;		28	AM	3: 4	3—		
EPA	Type Notifica	20011					Terr	ace									
DEP	☐ Initial						Zip Co			201	des	103	CON	TRO	L		
⊠ DOL		nded#						8034		y 7	& L	ICE	LIVIL	G			
□ DOH	☐ Emei	gency	Ī	Name	e of	Con	tact			-A			T	lanha		lh	or
□ DCA	☐ Cano	ellation		Tom	Ca	arter	•			20			4				
				FA	CII	LITY	INFO	ORMATION							_		
Name of Facility W	here Abateme	ent is Taking P	lace (3					Type of Faci	ility	(4)				-			-
Rosa Internation				953				School ((K-	12)							
Street Address										r 8 (Other tha							
485 Browning La	ane									private & com		ial bu			_	etc.)	
								Square Feet	t	# of Floo	ors		Blo	lg. Ag	е		
City (5)		County (6)	Co	unty	Cod	de (7	")									4	
Cherry Hill		Camden							(Pi	rior if being de	emoli	shed)					
					_			School									
Name of Monitoring		y Building Owr	ner (8)		F	ASCI	M No.			ment Contrac	tor (9)					
TTI Environmen	tal				_			AbateTech Street Addre									
Street Address 1253 North Chur	ch Street							PO Box 25									
City, State & Zip Co								City, State &									
Moorestown, NJ			Telep					Lumberton									
	oject Manager for Monitoring Firm m Guilardi							Telephone N				Licen	ise Nu				
	m Guilardi heduled Start Date (10) Scheduled Con							609-265-21	_			_		0052	9		
11/6/13		Scheduled Cor	11/9		ate	(11)		Name of OS EMSL Ana						S-01			
Occupancy Status								Street Addre									
		During Entire P			ate	men	it	200 Route									
		utside of Norm	al Ho	urs				City, State &									
The second secon	4PM start							Cinnamins	son	i, NJ 08077							
	cupied During																
Scope of Work (Ch	eck all that ap	opiy)							Г	Full Con	tainm	ent w	rith Ne	aative	Pre	SSUITE	۵
≥3 sf or ≥3	lf		\boxtimes	Rei	nov	atior	า		Z					94			
☐ ≥160 sf ≥26			Ħ			lition			Ž				ıres				
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	tos-Containin	g	1 - 2 - 2 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	nally		ed		Asbestos-Cor				Spec				120	T
	terial (ACM)			olely itenar		05		Material (A (i.e., thermal s			5	F or l	LF)	70		l inc	m m
	BE ABATED in Facility			odial			i	nsulation, surfa						Remova	Repair	aps	Enclosure
	(13)		0000	(12)				or other miscel						val	¥.	Encapsulate	sure
	V4207000444.00		Yes	No	N	I/A										O	
Boiler Room			\boxtimes					Pipe Fitti	ing	ıs	1	00 to	tal	\boxtimes			
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N	and of Paristand Wests Haulan							O. bi- Vda	-	Jama of Dani	-4	41.00	4EII		Ш	Ш	
Name of Registere	ame of Registered Waste Hauler							Cubic Yards of Waste	F	Name of Regi	stered	ı Lan	ати				
AbateTech, Inc.				100000	B75	er ID 60	110.	10	1	TRRF Landi	fill				5		
City, State	28 19 5 19 5 19 5 19 5 19 5 19 5 19 5 19							Disposal Date		City, State	3.55 H/s	-101011-001	-				
Lumberton, NJ								11/9/13		Γullytown, F	PA						
Completed By (Prin	nt or Type)			Ti	tle			Signature		501				Date			
Gwen Trumbetti				926	ffic			(1					10/2	4/1	3	
				C	00	rd.		\	7	WI							

1310-4704 Check # 5717 RECEIVED

Date of Notification	(1) 10/24/13						B.O.E	wner / Operator	(2)	2	DI3 OC	T 22	BM	2. !	. 2	
Agencies Notified	Type Notifica	etion		Street				-			#13 GC	1 20		J. (1)_	
EPA	Type Notifice	20011					Terr	ace			ுறாற	roc	000	-	٠.	
☐ DEP							Zip Co		-0		SBES	103	LUF	HIT	UL.	
DOL		nded#		(- 0.00			, NJ 0				ě. l	ICE.	KOIN	G	4	
□ DOH	_	gency		Vame								Te	lenho	ne Ni	ımbe	er
DCA		ellation		Γom												
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Name of Facility Wh	nore Abatama	ent is Taking DI	200 (3		CIL	-111	INF	Type of Facility	v (A)							
Horace Mann Sc		one is raking in	ace (c	"				School (K								
Street Address									A STATE OF THE STA	Other than K	(-12)					
150 Walt Whitma	n Rlvd									ate & comme		ldinas	. home	es. e	tc.)	
150 wait willting	iii Diva.							Square Feet		# of Floors			g. Age			
City (5)		County (6)	Co	unty (Coc	de (7	7)					- 8				
Cherry Hill		Camden				•	,	Current Use (F	Prior i	f being demo	olished)					
Onerry run		Jamach	1					school								
Name of Monitoring	Firm Hired b	v Building Own	ner (8)		A	SC	M No.	Name of Abate	emen	t Contractor	(9)					
TTI Environment		, 3	(-/					AbateTech,			X-7.					
Street Address								Street Address								
9 East Stow Rd.								PO Box 25								
City, State & Zip Co	de							City, State & Z	ip Co	de						
Marlton, NJ 0805								Lumberton,								
Project Manager for	Monitoring F	irm	Telep				er	Telephone Nu			Licen	se Nur		_		
Jim Guilardi	. (40) T	01.11.10	856-					609-265-210		-11			0052	9		
Scheduled Start Da 11/6/13		Scheduled Cor	11/9		te ((11)		Name of OSH EMSL Analy		nitor						
Occupancy Status I								Street Address								
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		utside of Norma	al Ho	urs				City, State & Z								
	4PM start							Cinnaminso	n, N.	J 08077						
	upied During														- 22	
Scope of Work (Ch	eck all that ap	opiy)						1	\boxtimes	Full Contain	nment w	ith Ne	ative	Pres	sure	
≥3 sf or ≥3 l	lf		M	Rer	nov	atio	n	i		Mini-Enclos						
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L	ocation of		ls	Locat	tion			Description	of		Amou	nt	Aba	tem	ent T	уре
Asbes	tos-Containin	g		nally		ed		Asbestos-Conta]	(Speci					
	terial (ACM)			olely				Material (AC			SF or L	-F)	R	_	Enc	m_
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	n Facility (13)		Cusi	(12)		111 ?		or other miscella					Remova	a.	Encapsulate	Enclosure
	(10)		Yes	No		I/A		or other micronia		٠,			-		te	(D
Boiler Room			П		T			Pipe Fittin	gs		23 tot	al				
Boiler Room					T			Boiler Breec			250 S	F	\boxtimes			
												branch -				Ш
Name of Registered	d Waste Haul	ler		0.00000000				Cubic Yards	Nam	e of Registe	red Land	llift				9
AbeteTech Inc					auie 3 75		No.	of Waste	TDD	F Landfill						
AbateTech, Inc.				10	113			Disposal Date		State						-
City, State Lumberton, NJ								11/9/13		ytown, PA						
Completed By (Prin	t or Type)			Tit	tle			Signature					Date			
Gwen Trumbetti					ffic	e		(1			10/2	4/1	3	
				C	001	rd.			M	1					7/2	

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Date of Notification (1)					Building (Owner/C	perator	(2)			^ A	м 2	. E()		
10/23/	13			P.S.E.	G.				711	OCT 2	8 4	n e	. 7:	7		
Agencies Notified	Type Notification		1 2	Street A			_					~ T	the C	1	8	
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DEP	Amended				ite, Zip Co					& LIC	CEN	ZIM	3)	
X DOL	Amendment # Emergency (ii				H PLAIN	IFIELL), NJ. (J7080)	F32					(e) 	
▼ DOH	justification)	lolddilig	1	vame of	f Contact	A . A	~ .	۱ , , ۱	- 1	Tele	hone	Numb	er_			
DCA	Cancellation			HO;				11.	EN							
None of Facility 145		DI (0)		FACI	LITY INFO	RMATI	ŎN	-	(F. 19)	-				_		
Name of Facility Where	Apatement is Taking	Place (3)						Type	of Facility (4)						
	<u> </u>								School (K-1			(40)				
Street Address	VI -	,	1.1						Subchapter Other (i.e. p				build	inas.	home	es.
176 K	LEMA	1 /4	YE	20				•	etc.)					N.T. (100)		::
City (5)	ESTE	0	157					Squa	re Feet	# of	Floors	A	BI	dg. A	ge	
GLDUC	ES/E/	<						A	UM	1.	N/	4	1	U/	<u> </u>	
County (0)		2000 00-00			Code (7) USE ONLY)	6		Curre	nf Use (Pri		g demo	olished	1)	T.	-	
	CESTE		_L'						<u>Swi</u>		4	51	A	16	W	
Name of Monitoring Firm		wner (8)		ASCN					tement Cor			104				
ENVIRONMENTAL	TACTICS			004	45		A SECTION AND		SYSTEMS	S OF A	IVIER	ICA				
Street Address	_					×		Addres	7/7	A \ /⊏						
64 BROAD STREE	1	:•				8			EHEAD A	AVE.						
City, State, Zip Code	7.4.7								ip Code							
MATAWAN, NJ 077									IVER, NJ	08882	<u>'</u>					
Project Manager for Mon	nitoring Firm			elepho				none N			Licens					
TOM GEIGER					92-2217		700,000,000	432-8			01	111	30000			
Start Date (10)		Schedule	d Com	pletion	Date (11)	1284			HA Monitor							
114/13		"	13	11	3				SYSTEMS	S OF A	MER	ICA				
Occupancy Status Durin	g Abatement (Check	Only One	e)	•				Addres								
Facility Closed/Vac	ated During Entire P	eriod of A	batem	ent				Yes a com	EHEAD A	AVE.						
Abatement Perform Other – Describe:	ed Outside of Norma	al Facility	Hours						ip Code							
		-3	- 2 - 2				SOU	THR	IVER, NJ	08882	2					
Scope of Work (Check A	II That Apply)							<u></u>								
≥3 sf or ≥3 lf			enovat				-		I Containme		Negativ	ve Pre	ssur	е		1
2160 sf or ≥260 lf			emoliti	on			-	VIII.	ni-Enclosure ovebag Prod	Control of the control						
									n-Exempted		Non-F	riable	Proc	edure	9	
		Is	Locatio	าก									- 1		ment	
Location	n of	N	ormally	4		De	scription	of						Ту	oe	
Asbestos-Containing	Material (ACM)		i Solel			tos Cont	aining M	Naterial		An	nount			- 1	m	_
TO BE ABA			odial S		(i.e.	thermal			ation,		ecify		Rer	교	nca	Enc
In Facil	ity		(12)				cing, VA niscellar			SF	or LF)		Remova	Repair	Encapsulate	Enclosure
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		Yes	No	N/A			/					-1		_	_	
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Name of Registered Was			19.7357.05	JDEP Wauler ID	100000000000000000000000000000000000000	of Was	Yards		Name of			dfill				
WASTE MANAGEN	MENT		10.000	125		AAR			GROW	S NOR	TH					
City, State					-		sal Date		City, State	e					-	\dashv
ELIZABETH, NJ						Contraction No.	BS		MORRI		E, PA					
Completed by		Title						3	1			Date	. /		,	
CAROL RAIMO		OFFI	CE M	GR.			/1/	71	o La	im	7	Date	12	3/	,	0
		1					-JU	100	/ 6-6	-080	2		-	1.	1 4	5

Date of Notification (1) 10/22/2	2013				Nam	e of Buildii nwood A	ng Owner/Oper partment &	rator Cou	(2) HT Get 2	R MM 2:	58				
Agencies Notified EPA	Initial				Stree	et Address 5 US H			ASSESTO						
DEP DOL	Amendn		Ī		State, Zip	Code NJ 08857		& LIC	ENSING	(13		•		
⊠ рон	justifica	ition)	ding	H		e of Conta				y					
☐ DCA	Notified Type Notification Amended Amended Amended Emergency (including justification) Cancellation				Bern	adette Po	ppel		>						
					FA	CILITY IN	FORMATION				27				
Name of Facility Where Apartments Bldg.	Abatement is	Taking Pl	ace (3)					Type of Facilit	Territoria.					
Street Address								\dashv	Subchapter	8 (Other tha					
18-20 Cherry Hill La	ne							_	Other (i.e., homes, etc		nmercia	al buil	dings		
City (5) Old Bridge,	Address Cherry Hill Lane Cherry Hill Lan								Square Feet 2000 SF	# of Floo	ors	01/23	ldg. / 0+	Age	
County (6)	Incies Notified Type Notification Amendment # Emergency (initial Amended Amendment # Emergency (initial Em						(7) (STATE	=	Current Use (F	rior if being o	demolis			_	_
Middlesex	cies Notified Cancellation Cancellatio					ONLY)	Maria W		Apartment B					_	_
Name of Monitoring Firm (8) N/A	s Notified Type Notification Initial Amended Amendment #				ASCM	No.			ent Contractor (Constructio						
Street Address				=1=			Street Addre		O O HOLI GOLIO	11, 1110.					
-									Avenue, PM	B Suite 21	8				_
City, State, Zip Code							City, State, Z Clifton, N								
Project Manager for Mon	fied Type Notification Initial Amended Amendment # Emergency (inclusive justification) Cancellation Cancellation				ohone	No.	Telephone N 973-389-		39	License 0069					
Start Date (10)		Schedule	d Con	nplet	ion Da	ite (11)	Name of OSI								=-
11/07/2013	Notified Type Notification Initial Amended Amendment # Emergency (inclusion Justification) Cancellation Cancella						, amount to an included the		Construction	n, Inc.					
	dg. Hill Lane The property of the property o				nent		Street Addre	0000000	Avenue, PM	IB Suite 2	18				
	e Monitoring Firm Scheduled (11/11/20) During Abatement (Check only acated During Entire Period ormed Outside of Normal Facilities and Main (ACM) ABATED (Check only Main (ACM) (Ch						City, State, Z			D Guito E					_
Other - Describe:		Abatement (Check only of During Entire Period of A					Clifton, N.	J 07	'012				11280		_]
Scope of Work (Check al	I that apply)	\boxtimes	Reno	vatio			☐ Mini ☑ Gov	i-Encl	tainment with Ne losure g Procedure empted (*) and			dura			
	Amended Amendment # Emergency (inc justification) Cancellation Cancella				1		1 1 100	II-LA	empted () and	NON-I Hable	rioce	Contraction of		ment	
Location o	f	Us	Norm sed S		by		Descriptio	n of					Ту	e -	
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IN Facility	<u> </u>		sta	ff?		(1.0	surfacing, V other miscella	AT,	or	SF or LF)	Remova	Repair	Encapsulate	Enclosure
(13)			(1:	T	VISCOSO		Other miscens	aneou	15)			oval	air	ulate	sure
# 18 Cherry Hill Lane - Cra	iwl Space	Ye	s N	No T	N/A X	Pipe/El	bow Insulati	on		180 LF	-	X			
(13) Ye 18 Cherry Hill Lane - Crawl Space				_	X	_	bow Insulati		7	200 LF		X			
	18 Cherry Hill Lane - Crawl Space 20 Cherry Hill Lane - Crawl Space							-0-1-01		-					
				NJDEP Waste Cubic Yards Hauler ID No. of Waste					Name of Regi		II			- 51	
	oup			20	Hauler ID No. 20970 of Waste 5				Minerva La	andfill					_
City, State New Castle, DE							11/11/2013		Waynesbur	g, OH 446	88				
Completed By		1.0000000000000000000000000000000000000					Signature	_	1	Di	ate				
Krutarth Jagad		Preside	ent					$ _ $	And	1 10	0/22/2	013			

Date of Notification (1) 10/22/	2013			Name	e of Buildin	ng Ow part	vner/Operator ment & Cou	(2) Intry 11 OCT	28 AM	2: 5	3			
Agencies Notified	N	ation			t Address 5 US HV		9	ASBES	TOS CO	HTRO)L			
DEP DOL	pencies Notified Separation Type Notification Amended Amended Amendment # Emergency (incligion DCA			State, Zip Bridge,			هُد ا	HCENS!	Nu	4		_		
DOH DCA	Agencies Notified EPA DEP DOL DOL DOH DCA Type Notification Initial Amended Amendment # Emergency (including sustification) Cancellation Name of Facility Where Abatement is Taking PApartments Bldg. Street Address 19 - 25 Cyprus Lane City (5) Cold Bridge, County (6) Middlesex Name of Monitoring Firm Hired by Building Ow N/A Street Address City, State, Zip Code Project Manager for Monitoring Firm Start Date (10) 11/12/2013 Cocupancy Status During Abatement (Check of Facility Closed/Vacated During Entire Perion Abatement Performed Outside of Normal Facility Closed (Check all that apply) >3 sf or >3 lf >160 sf or >260 lf Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) 19 Cyprus Lane - Crawl Space 21 Cyprus Lane - Crawl Space 22 Cyprus Lane - Crawl Space Cancellation City (5) County (6) Count				of Contac		l		Telephor	ne kliimh				
				FA	CILITY IN	FORM	MATION		7	-	_		_	-
Name of Facility Where	EPA DEP Amended Amended Amended Amended Amended Emergency (inc justification) Cancellation							Type of Facility	y (4)		_			
Apartments Bldg.		-						School (K-1	2)					
Street Address								Other (i.e.,	8 (Other that			lings		
	Agencies Notified Agencies Notified Apartments Bldg. Street Address 19 - 25 Cyprus Lane City (5) County (6) Middlesex Name of Monitoring Firm Hired by Building Ov Note: Address City, State, Zip Code Project Manager for Monitoring Firm Start Date (10) 11/12/2013 Cocupancy Status During Abatement (Check Facility Closed/Vacated During Entire Perion Abatement Performed Outside of Normal Firm Cocupancy Status During Abatement (Check Facility Closed/Vacated During Entire Perion Abatement Performed Outside of Normal Firm Cocupancy Status During Abatement (Check Facility Closed/Vacated During Entire Perion Abatement Performed Outside of Normal Firm Cocupancy Status During Abatement (Check Facility Closed/Vacated During Entire Perion Abatement Performed Outside of Normal Firm Cocupancy Status During Abatement (Check Facility Closed/Vacated During Entire Perion Abatement Performed Outside of Normal Firm Cocupancy Status During Abatement (Check Facility Closed/Vacated During Entire Perion Abatement Performed Outside of Normal Firm Cocupancy Status During Abatement (Check Facility Closed/Vacated During Entire Perion Abatement Performed Outside of Normal Firm Cocupancy Status During Abatement (Check Facility Closed/Vacated During Entire Perion Abatement Performed Outside of Normal Firm Cocupancy Status During Abatement (Check Facility Closed/Vacated During Entire Perion Abatement Performed Outside of Normal Firm Cocupancy Status During Abatement (Check Facility Closed/Vacated During Entire Perion Abatement Performed Outside of Normal Firm Cocupancy Status During Abatement (Check Facility Closed/Vacated During Entire Perion Abatement Performed Outside of Normal Firm Cocupancy Status During Abatement (Check Facility Closed/Vacated During Entire Perion Abatement Performed Outside of Normal Firm Cocupancy Status During Abatement (Check Facility Closed/Vacated During Entire Perion Abatement Performed Outside of Normal Firm Cocupancy Status During Abatement (Check During Entire Perion During Abatement Perfor							homes, etc	.)					
Old Bridge							Square Feet 2000 SF	# of Flo	ors	100,000	dg. A)+	ge		
County (6)					nty Code	(7) (8	STATE	Current Use (P		demolish	ned)			
	. Hired by Ruil	ding Owner		ASCM	× .	I Na	me of Abatem	ent Contractor (
	i Tilled by Bull	uning Owner		AOOW	110.			Constructio	70					
Street Address		<u>—</u> I				reet Address							-	
					13	60 Clifton,	Avenue, PM	B Suite 2	18					
City, State, Zip Code			ii e			y, State, Zip C Clifton, NJ 0			-					
Project Manager for Mor	nitoring Firm		Tel	ephone	No.	100	lephone No. 73-389 - 008	39	License 0069					
Start Date (10)		Scheduled	Compl	etion Da	ate (11)	Na	me of OSHA N	Monitor						
11/12/2013		11/18/20	13			D	IA General	Construction	n, Inc.					_
Occupancy Status Durin	ng Abatement	(Check onl	y one)			10000	reet Address	A DI	ID 0	240				A CONTRACT
								Avenue, PM	IB Suite 2	218			_	
	ormai Facii	ity Hot	ırs		3.5575.35	y, State, Zip C lifton, NJ 0							_	
Scope of Work (Check a	all that apply)						□ Full Cor	ntainment with N	enative Pres	SUITE				
>3 sf or >3 lf >160 sf or >260 lf			enova Demo				Mini-End	closure g Procedure	-					
		ls ls	Locati	on	1		Non-Ex	rempted (*) and	Non-Friable	e Proced		bate	ment	
			Normal	y			11 150 15 15					Ту	oe .	
Location Asbestos-Containing N	of Naterial (ACM)		d Sole intena		Asbes	stos C	Description of Containing Mate		Amou	nt			ш	
TO BE ABA		Custodi	al		, ther	rmal systems in	nsulation,	(Speci		Re	Z.	nca	Enc	
	У		staff?				irfacing, VAT, er miscellaned		SFUIL)	Remova	Repair	Encapsulate	Enciosure
1		Yes	No	N/A					āt.		'al	7	ate	-G
# 19 Cyprus Lane - 0	Crawl Space			X	Pipe/El	lbow	Insulation		180 LF		X			
# 21 Cyprus Lane - 0	Crawl Space	,		X	Pipe/El	lbow	Insulation		200 LF		X			
				X	Pipe/E	lbow	v Insulation		160 LF		X			
# 25 Cyprus Lane -	Crawl Space	e		X	Pipe/E	lbov	v Insulation	34	180 LF		X			
		100-100		NJDEP		Cu	ibic Yards	Name of Reg	istered Land	dfill				
Service Transport G	roup			Hauler II 20970	D No.	9	Waste	Minerva L	andfill					
Amendment #							sposal Date	City, State	017.44	600				
New Castle, DE	EPA DEP Amended Amende					11	1/18/2013	Waynesbu	1					_
Completed By	DEP DOL Amende Amende DOL Emerger justificat Cancella DOA Cancella DOA Cancella DOA Cancella Cancella DOA Cancella Emerger justificat Cancella Canc						Signature	1	1 1	Date 10/22/2	013			
Krutarın Jagad		Presiden	11					1	.لــــــ	10/22/2	.013			



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

Date of Notification (1) October 24, 2013				Name of Buildi	16 16 16 16 16 16 16 16 16 16 16 16 16 1					
Agencies Notified	Notification	Туре		Street Address						i
(X) EPA () DEP (X) DOL	(X) Initial N () Amende () Cancelle	lotification	ion	12018 Sunrise City, State, Zip			<u> </u>	879 22813	2013	
() DOH				Reston, VA 20						.3 -
() DCA				Name of Conta	ict					
	L		FACILITY IN	Charles Flack FORMATION						
Name of Facility Where Abatement is	Taking Place (3	3)	TACILITII	Type of Facility	(4)	-	AND THE PERSON NAMED IN COLUMN 1			
Lafarge Mill Building – Port Authority Street Address				() School (K-1 () Subchapter (X) Other (i.e. p	8 (other th		gs., homes,	etc.		
POSTA DESCRIPTION OF THE POST						_				
Distribution Street		County	ada (7)	Sq. Feet_4,50	00 # of	Floors_2	-			
City (5) County (6)		County C (State Us		Dide Age	10					
Newark Essex		101010 00	<u> </u>	Bldg. Age Current Use (p		demolished):	Refinery			
Name of Monitoring Firm Hired by Bldg	. Owner (8)	ASCM No	l 0.	Current Coo (p		Name of Cor		-11-2-2-39-1-1		
		0	=7/							
McCabe Environmental Services LLC				Ctt Add		Brandenburg	Industrial S	Service Com	pany	
Street Address				Street Address	e.					
464 Valley Brook Avenue				2217 Spillman	Drive					
City, State, Zip Code				City State, Zip	Code					
				Dathlaham Da		4904E				
Lyndhurst, New Jersey 07071 Project Manager for Monitoring Firm	Telephone N	lumber		Bethlehem, Pe Telephone Nur		18015	License No	ımher	1177.7.5007.500	2000
Project Manager for Monitoring Firm	Telephone I	<u>vuilibei</u>		relephone run	<u>IIDCI</u>		LICCHSC 140	aniboi		
	(201)438-48			(610) 691-1800			00721			
Scheduled Start Date (10)	Scheduled C		Date (11)	Name of OSHA	<u>Monitor</u>					
August 13, 2013	November 3	0, 2013		NA						
Occupancy Status During Abatement (Check only on	e)		Street Address						
(X) Facility Closed/Vacated During Ent () Abatement Performed Outside of N				City State Zie	Cada					
Describe				City, State, Zip	Code					
Other – Buildings are being turned bac	k over to the P	ort Authori	ty							
Source of Work (Check all that apply)							-			
(X) Demolition () Renovation () Large Proj. (>160 SF or >260 LF A () Full Containment with Negative Pr	CM) (X) SM Pr	oj. (>25<16 Mini-Enclos	60 SF or >10 <26	60 LF ACM) (vebag Procedure) Minor Pr	oj. (<25 SF or	<10 LF ACM	M)		
	ation Normally		Description of	ACM (i.e.	Amount (Specify SF or	LF) Ab	atement Ty	pe	
	by Maint./Cus	todial	thermal system							
Facility (13) Staff? YES	(12) NO	NA	surfacing, VAT miscell.)	, or other			Re	m, Rep.	Encap E	Enclose
Roof of Mill Building	X	INA	Caulking on ro	of	30 LF			(
			3 0 10							
				O. I. Vanda af	10/4-		Name of D	an Landfill		
Name of Reg. Waste Hauler	NJDEP Was	te Hauler I	<u>U#</u>	Cubic Yards of	vvaste		name of R	eg. Landfill		
Tri-State Transfer Association	NJ 19551			Less than 1			IESI Bethle	ehem Landfi	II	
City, State						Disp. Date		City, Sta		
D. W. L. France, D.						10/20/2012				
Bethlehem, Pa Completed by (Print or Type)	Title			Signature		10/29/2013	Date			
Completed by (Fillit of Type)	THE		1	Signature	10.		200			
Joshua Pickens	Project Man	ager		The K	KM		October 24	1, 2013		

Mail to:

Department of Labor

Division of Public Safety & Occupational Safety & Health

Asbestos Control & Licensing Section

P.O. Box 949

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

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Date of Notification (1)				uilding O	wner / Oper	ator (2)						- 1
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			Street Add				+ 1		+ -		- 1	
Agencies Notified Type of No	tification		6000 HADI	LEY ROAD)					197T	:	
	Initial		City, State								;	
	Amended	1	SOUTH PL	AINFIELD	, NJ 07080							
□ оон □	Amendment #	1	Name of C	ontact		1	Tologe	21 -				1
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	Co Tables F	N (2)		Type of E	acility (4)							
Name of Facility Where Abatem	ent is Taking F	race (3)		Type of F	actifity (4)							- 1
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					School (K-	**************************************	L V 4	21				- 1
Street Address						er 8 (Other t						- 1
6000 HADLEY ROAD				V		private & c	mmercia	aı				- 1
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SOUTH PLAINFIELD MIDDLESS	EX				,000	3		1		40+		- 1
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		-		Telephone	Э							
Name of Monitoring Firm Hired	by Bldg. Owne	er (8)	ASCM NO	Name of	Abatement	Contractor	(9)					
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ESIS				I VI DEMO	DLITION SE	RVICES INC)					
				Street Ad								
Street Address				Street Au	uress							- 1
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City, State, Zip Code					AMS PARKV							-
JERSEY CITY, NJ 07302				City, Stat	e, Zip Code							
Project Mngr. For Monitoring F	irm	Telephone Nu	mber									
BRIAN KINGSBURY		201-356-5166		EAST HA	NOVER, NJ	07936						
Sheduled Start Date (10)	Sched, Compl	etetion Date (1	1)	Telephon	e Number		License	Numb	er			i
11 / 06 / 13	12	/ 16 /	13			1	860)				
	/			973-7	72-3660				- 12			
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· · · · · · · · · · · · · · · · · · ·	ted During Ent	ire Period of		LVI DEMO	DLITION SE	RVICES INC						- 1
	ted Danning Line	iic i ciioa oi		Street Ac								
Abatement	-1 O. 4-1-15 N	armal Capility		Oli eel Au	idiess							- 1
☐ Abatement Performe	d Outside of N	ormal Facility		32 ///// 1 //	AMS PARKV	VAV						
Hours - Describe:				The second secon	STATISTICS OF A STATE OF THE ST	THOUGH A PARTY					_	_
☑ Other - Describe:	7:00AM -3:30 I	PM MON-FRI			e, Zip Code							- 1
				EASTHA	NOVER, NJ	0/936						
Scope of Work (Check All That	Apply)											1
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≥160 sf or ≥260 lf					g Procedure							
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Material (ACM)	Used	n.	e., therma	**************************************		(Specify	M	E	C		С	1
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(13)	by Main-	or or	other misc	enaneous	'/		Ă	lî	s		s	
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	<u>Staff (12)</u>							+-			••	
	YES NO N/A					20.05		-	-		_	
ROOF		TAR/MASTIC				80 SF	V	4				4
ROOF		FLASHING SE	ALANT			2600 LF	V				L	
ROOF		CAULK				250 SF	7					
				100								
Name of Registered Waste Hau	iler	NJDEP Waste	Cubic	Name of	Registered	Landfill						
		Hauler ID No.		GROWS	3,515,50	er-Wayner-Total file						
NEWARK CARTING		" AE00	of Waste	1								
211 21 1		4503		City. Sta	te							
City, State			Disposal		VILLE, PA							
NEWARK, NJ			Date	INIOKKIS	VILLE, PA							
		Y=			lor			-	TD-	ite		
Completed by (Print or Type)		Title			Signature	in S	1	1	De	166		
STEVEN STILES		PROJECT MA	NAGER		DIN	1 1	1,1				10/2	25/13
					N MUN	/ NU V					10/2	UI 10

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

g 120 o	NOI	(Pursi	uant t	o NJAC 8:60 a	and 12:12	(0)		CKH	20	187	36	
Date of Notification (1) 10/23/2013			N	lame of Building	Owner/Ope Semin	rator (ole C	2) Construction		387	9	>	
[] DEP [] Amend [x] DOL [] Emerg	Notifica ded Noti dment #_ ency (in	fication	C	City, State, Zip Co Vame of Contact Joyce	de		t Avenue c, NJ 08092	UC ephone Number	ī 28	201		
Name of Facility Where Abatement is Taking Residence Street Address 16 Clarence Dr.	Place (3		ACIL	ITY INFORM	IATION	Тур	[] [x]	School (k-12) Subchapter 8 (o Other (i.e., privations, etc.)			al build	lings,
City Beach Haven West	County	12		ounty Code (7) STATE USE ONL	.Y)		850 sf rrent Use (Prior if b Residence		Bldg	Age 4:	5	
Name of Monitoring Firm Hired by Building N/A	Owner ((8)	A	SCM No.	Name of		ement Contractor (Guardiar		, Inc.			
Street Address City, State, Zip Code					City, Sta	ate, Zi	p Code Toms Ri	ver, New Jer	sey 087	55-12	.71	
Project Manager for Monitoring Firm Scheduled Start Date (10) 11/05/2013	Project Manager for Monitoring Firm Telephon Scheduled Start Date (10) Schedule						932 IA Monitor E.M.S.L	00624 . Analytical				
Occupancy Status During Abatement (Check [x] Facility Closed/Vacate [] Abatement Performed [] Other – Describe	d During Outside	g Entire Period o	of Abat ity Ho	ement	Street A		1056 Ste	elton Road vay, New Jers	sey 088	54		
Scope of Work (Check all that apply) $ \begin{bmatrix}] >3 \text{ sf or } \ge 3 \text{ lf} \\ [x] \ge 160 \text{ sf or } \ge 260 \text{ lf} $		[] Re [x] De	enovati emoliti		[[[x]]	Full Containment Mini-Enclosure Glovebag Procedu Non-Exempted (*)	re		ıre		
Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility (13)		Is Location Normally used Solely by Intenance/Custo Staff (12)		(i.	Descripti sbestos-Co Material (e., therma sulation, s VAT, ther misce	ACM ACM I syst surfac or	ing f) ems ing,	Amount (Specify SF or LF)	R E M O V A L	R E P A I R	E N C A P S U L E	E N C L O S U R E
Exterior		X		Asbestos sid	ing			750 sf	X			
Name of Registered Waste Hauler Guardian Contracting, Inc.		NJDEP Waste F	23	ID No. Cubic 2	Yards of W		Name of Registe T.R.R.F.	red Landfill				
City, State Toms River, New Jersey Completed by (Print or Type) Nicholas Fernicola	Title Proj			/2013 Signature	Tully	ytow	n, Pennsylvania	/	Dat 10/	e '23/20	13	

Or 98

Date of Notification (1)	***************************************		Name	of Building Own	er/Operator (2)			-			
10-02-20	0/3		20	77 LINI	COIN AVE	2 .	LLC.				
Agencies Notified	Type Notification	TO SECTION OF STREET	Street	Address	NEOLN.		UUI	2.8	213		British and Coloring
EPA DEP	Initial Amended		City S	itale. Zip Code							
DOL	Amendment		_ U 1	ange	N.J.	709	06				
DOH	[Emergency (Name	of Contact		T - W - W	Telenhone A	Jumbar	925 (Jan 98)	awro.co	- 1
DCA	Cancellation		- 31	renda]	caada						*
Name of Facility Where	Shatamara in Falini	- 05 /0	FAG	CILITY INFORM		ortotagement or	- 1				4
Private		g Mace (3	1		Type	of Facility	y (4)				
Street Address						chool (K					
297 - L	incola	Au	,		N	oubcnapi Other (i e	ter 8 (Other than K private & comme	-12) rcial bui	ldınas	hom	es
City (5)	WEO IN				ë	tc) e Feet					200-11
(1) ray as	N. 3	0	7050	>	22,0			į	3ldg /	0.003	
County (6)				Code (7)			rior if being demo	lichod)	9:	<u></u>	
				USE ONLY)	- Curier	NA		isneo)			
Name of Monitoring Firm	Hired by Building	Owner (8)	ASC	M No	Name of Abate				n Karapitanan		
NA							Quality	(000	to	chi	.
Street Address			***************************************		Street Address	S	,		,,,,	CIL	001
			Yes.	2000	22-00	m	Orolen P	L. '		7.40	
City, State Zip Code					City, State, Zir	Code	<u>, , , , , , , , , , , , , , , , , , , </u>				
	oth transmit from half samps; supportments a larger, and purpose and		and the same of th				ick No	7. (276	,61	į
Project Manager for Mon	itoring Firm		Teleph	one No	Telephone No	~ ~	License	No			
Start Date (10)		Crhadula	d Complete	D. (40)	201-7	08-	4270 011	35			200
10-11-20	1923		d Completion	(C)	Name of OSH						
Occupancy Status Dunne		k Only On	15-20	2!5	Ctract Address		MALYT	DEPTH HOR THE	ا ج	-11	
Facility Closed/Vac					307 u	10x+	· 38th.	. ۾			ţ
Abatement Perform	ed Outside of Norm	al Facility	Hours		City State, Zip		, 20	3/1.			
Other – Describe							K. N. Y.	inc	18		the state of the s
Scope of Work (Check A	I That Apply)										
23 st or ≥3 lt		₹ R	enovation	5.57	D Full	Conteenr	nent with Negative	Proces	10		
≥160 sf or ≥260 lf			emolition		Mini-	-Enclosu	re with was	व्यापर,	9 72	inse	2
Manager western track to the foregreen page of the page.	I was transfer as a second				Non-	ebag Pr Exempt	ocedure ed (*) and Non-Fri	able Pro	codur	0	4
		ls	Location		The state of the s	Anthroperation	the property of the comment of the contract of	1	and a second	ement	-
l ocation		N	omally	i	Description of		i			рө	
Asbestos-Containing TO BE ABA			Solely by ntenance/	Asbestos C	ontaining Material (Amount			т	_
in Facili		Custo	odial Staff?	tre men	nal systems insulati rfacing. VAT, or	ion,	(Specify SF or LF)	Ren	Re	ucat	nc.
(13)			(12)	othe	er miscellaneous)			Remova	Repair	Encapsulate	Enclosure
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Name of Department Man		1 .90	- Wines	1			<u>:</u>			į	
Name of Registered Was			NJDEP V		oic Yards	Name o	f Registered Landi	ill			
Sharon Qu	olity Con	structu	on 003	3967		Min	ierva In	ter p	2150	7	MC
City, State		THE RESERVE AND ADDRESS AND	WEST TO A STREET OF	Dis	After a rest of the contract of the second property of the	City, Sta	Charles of the Contract of the	1	3.13.	·	
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Completed by	. 0	Title	A_ A.		Signature			Date			
Carlos Esq	uvel	201	ety H	anager	(Egin	mof	4000	0-0	22.	-13	3
100 M / P 00 00			(0	//	10			- A Production	name and	
ASB-41 (R-08-08)					* Do not use the	s form fo	or esbestos licensu	пе ехеп	pted	activit	es



Date of Notification (1)	Name (of Building Owner/	Operator (2)				
09-17-2013	Jo	on Y	. Back				
Agencies Notified Type Notification		Address	The second section of the second section of the second section of the second section s	100	1 28	2015	-
☐ EPA ☐ Initial	17	- Brink	reshopp. Te	rrace			
DEP Amended	City, St	ate, Zip Code		4		Ž.	-
DOL Amendment a Emergency (i DOH justification)	ncluding Name of	illsade	Park. N.	7.07650) mhar		
DCA Cancellation	Joa	on Y.	300 K				
With a result of the fact that the state of	FAC	ILITY INFORMAT	NOF		- 8	- 1	
Name of Facility Where Abatement is Taking	Place (3)	and the second second second second second	Type of Facility	(4)	in 100 10 10 10 10 10 10	· · · · · · · · · · · · · · · · · · ·	
Private			School (K-				
Street Address			Subchapte	or 8 (Other than K-1	2)	27	
17 - Brinkerhof	terra	ce	etc)	private & commerc	ial buildir	igs, hon	nes,
			Square Feet	7	Bid	g Age	
Palisade Park	. L.N	650	2,600		_ 4	76	
Gounny (o)		Code (7) USE ONLY)	Current Use (Pr	ior if being demolis	hed)		
Name of Monitoring Firm Hired by Building O	wner (B) ASC	M No	Name of Abatement Co	intractor (9)			
			Sharon (Quality	Conc	1-12	120
Street Address		-	Street Address	- cocit	00.70	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	- 1104
	Th)		22-Van 1	Orden	PL	-	
City, State Zip Code			City, State, Zip Code				
Drough Manager for Billion		and a 1985 and a supplier to the trade of Market and the supplier	Hackens	ack. N	.7.0	760	1
Project Manager for Monitoring Firm	Telepho	one No	Telephone No.	License N	VO.		
	Scheduled Completion	Date (44)	201-708-42	L70 0113	55		
1	09 - 20 - 2		Name of OSHA Monitor			_	100
Occupancy Status During Abatement (Check	Only One)	2/3	EMSL - All Street Address				
Facility Closed/Vacated During Entire Po			307-west	a oth Nin	× 1	A 1	, [
Abatement Performed Outside of Norma	I Facility Hours		City State, Zip Code	23 . 146	w y	081	
Other – Describe	· · · · · · · · · · · · · · · · · · ·		New Ye	KNY	LOOL	Ö	
Scope of Work (Check All That Apply)		3			100/1	4	
≥3 st or ≥3 If ≥160 sf or ≥260 If	Renovation Demolition		Mini-Enclosur Glovebag Pro	75 V		4	e de la companya de l
termine and termine and the contract of the co	le Lacotion	andre and the state of the stat	140th-Exempte	d () and Non-Filat		- A	4
Location of	Normally	Do.	escention of		1	Type	
Asbestos-Containing Material (ACM)	Used Solely by Maintenance/	Asbestos Conf	scription of taining Material (ACM)	Amount		-	
<u>TO BE ABATED</u> In Facility	Custodial Staff?		systems insulation cing. VAT or	(Specify	R	Encapsulate	Enc
(13)	(12)		niscellaneous)	SF or LF)	Romova	nsd nsd	Enclosure
*	Yes No N/A				=	late	Te :
Kitchen	X	walls	Plaster	400 st	X	+	
First Floor	¥	Ceiling		800 st	X		
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n 1 .				Jo L#	×		
Name of Registered Waste Hauler	NJDEP W	Veste Cubic	ACM, Debris s	Registered Landfill	30		
Sharin Quality Cors	trution 203	No. of Was	3D Minusal Date City, Stat	erva Ent	richi	ise_	Irve.
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Carlos Esquivel.	Title Sofety &	lanager s	CEfun fun	Def Do		-20	/3
ASB-41 (R-06-08)		0	* Do not use this form for	asbestos licensure	exemple		warm and

Date of Notification (1) Name of Maidres Lucurity (2) Renovation Name of National Front (2)				.,	(Pui	rsuant to	NJAC 8:	:60 and	12:120	0)	CK +	#3	058	3				7
Agencies Notified Type Notification Street Address Satisfied Type Notification Satisfied Amendment # Satisfied Amendment # Satisfied Amendment # Satisfied Amendment # Satisfied Satis	Date of Notifica	ation (1)								(2)		1						1
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Name of Facility Where Abatement is Taking Place (3) FACILITY INFORMATION School (K-12) Subchapter 8 (Other than K-12) Subchapter 9 (Other than K-12) Sub	☐ EPA		Initial		1			0.000000000										- 1
Name of Facility Where Abatement is Taking Place (3) FACILITY INFORMATION School (K-12) Subchapter 8 (Other than K-12) Subchapter 9 (Other than K-12) Sub	DEP			#	10.00												J	į
Name of Facility Where Abatement Is Taking Place (3) Former Dry Cleaner Street Address 466-474 Sprinfield Ave City (5) Summit County (6) Union Street Address Vain Monitoring Firm Hired by Building Owner (8) In/a Name of Monitoring Firm In Selection Date (11) In Call Street Address Vain Monitoring Firm Hired by Building Owner (8) In/a Street Address Street Address Street Address Vain Monitoring Firm Hired by Building Owner (8) In/a Street Address Vain Monitoring Firm Hired by Building Owner (8) In/a Street Address Vain Monitoring Firm In Selection Date (11) In Call Street Address Vain Monitoring Firm In Selection Date (11) In Call Street Address Vain Monitoring Firm In Selection Date (11) In Call Street Address Vain Monitoring Firm In Selection Date (11) In Call Street Address Vain Monitoring Firm In Selection Date (11) In Call Street Address Vain Monitoring Firm In Selection Date (11) In Call Street Address Vain Monitoring Firm In Selection Date (11) In Call Street Address Vain Monitoring Firm In Selection Date (11) In Call Street Address Vain Monitoring Firm In Selection Date (11) In Call Street Address Vain Monitoring Firm In Selection Date (11) In Call Street Address Vain Monitoring Firm In Selection Date (11) In Call Street Address Vain Monitoring Firm Monitoring Firm Period of Abatement Abatement Periode Outsides of Normal Facility Hours Scope of Work (Check All That Apply) Vain Monitoring Firm Period of Abatement Abatement Periode Outsides of Normal Facility Hours Scope of Work (Check All That Apply) Vain Monitore Selection Firm Period of Abatement Monitore Selection Firm Firm Period of Abatement Monitore Selection Firm Firm Period of Abatement Monitore Selection Firm Firm Per					1			901				Tolo	nhono N	lumbe	\r			-
Same of Facility (Where Abatement is Taking Place (3) Special State of Place (4) Street Address Street Address Subschiption of County Code (7) Subschiption of	DOH				1000		Contact					liele	DHOHE I	AUITUS	de de	-		
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School (K-12) School (K-12) School (K-12) Stock Address Street A	Name of Facili	tv Where A	batement is Takin	g Place (3)	FACIL	III INFO	NINA	ON	Тур	e of Facility (4))						
Subclaspler 8 (Other than K-12)		11 - 12 - 12 - 12 - 12 - 12 - 12 - 12 -								П	School (K-12)						
ABS-4/4 Sprintleid AVe											Subchapter 8	(Othe	r than K	(-12)				
County (6) County (7) County (7) County (8) Cou	466-474 St	prinfield A	Ave							×		vate &	comme	ercial t	uildi	ngs,	nome	s,
Summit S	City (5)									Squ		# of	Floors		Blo	dg. Ag	je	
Name of Monitoring Firm Hired by Building Owner (8)										95	00	2			50) +		
Name of Monitoring Firm Hired by Building Owner (8)	County (6)									1			(T)	lished)			
N/2	Union				(STATE U	ISE ONLY)			0.82.33	하다가 하시다 하다 때문에 보다.							
Street Address Addres	Name of Monit	toring Firm	Hired by Building	Owner (8)		and the second	No.		10000000									
22 Troy Ln	n/a					n/a						nt Co	rp					
City, State, Zip Code	Street Address	S																
Project Manager for Monitoring Firm	n/a																	
Project Manager for Monitoring Firm		Code										005						
Start Date (10) 10-24-13 Start Date (10) 10-24-13 Start Date (10) 10-24-13 Start Date (10) 10-30-13 Scheduled Completion Date (11) 10-30-13 Street Address In/a City, State, Zip Code In/a Scope of Work (Check All That Apply) 23 sf or 23 if 2160 sf or 2260 if Asbestos-Containing Material (ACM) In Bealtity In Bealtity In Bealtity In Bealtity In Second Material In									1			035		- NI-				
Start Date (10) 10-24-13 Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other – Describe: Scheduled for Demo Scope of Work (Check All That Apply) 23 sf or ≥3 if 210 sf or ≥260 if Asbestos-Containing Material (ACM) To BE ABATED In Facility (13) Exterior In Section		Notified Type Notification			- 1	madilion a masse	ne No.		9995555									
10-24-13 10-30		Type Notification PA		10111			2-1- (44)		7.000				0113	<u> </u>				_
Street Address City, State, Zip Code City, State Ci)		100		ipietion L	Jate (11)		100000000000000000000000000000000000000	01 0	SHA MONITOR							
Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other – Describe: Scheduled for Demo Scope of Work (Check All That Apply) ≥3 sf or ≥3 if ≥160 sf or ≥260 if Renovation Demolition		atus Durina							t Addı	2291								
Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours						52				· / laa								1
Scope of Work (Check All That Apply) ≥ 3 sf or ≥3 lf ≥ 160 sf or ≥260 lf ≥ 160										State.	Zip Code		-					
≥3 sf or ≥3 if								_			**************************************							
Section Sect	Scope of World	k (Check Al	That Apply)		7-7-1													
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Location of Asbestos-Containing Material (ACM) Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A					Laggi											Abate	ment	1
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Date of Notification (1)	The same and the s				wner/Opera		1					
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78- 101110	w Ave						etc)					٦,
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Name of Monitoring Firm Hir	ed by Building O	wner (8)	ASCM	l No.			batement Co		Marie Sanjara Stan			
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City, State Zip Code					Cit	y, State,	Zip Code					
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Project Manager for Monitors	ng Firm	:	Telephor	ne No.	Tel	ephone	No.	License N	Vo			
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Start Date (10)		Scheduled Co	mpletion [Date (11)			SHA Monitor					
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Occupancy Status During Ab	atement (Check	Only One)		**************************************	Str	eet Add	ress 12					
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		ls Loca Norma							į		ement rpe	
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In Facility	-	Custodial (12)			surfacing.	VAT, or	Γ	SF or LF)	Romova	Ropair	Encapsulate	Enclosure
(13)		(12)			other misce	ellaneou	s)) Val	a	sula :	SUI
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Name of Registered Waste H	-tauler		NJDEP W	aste	Cubic Yard	is	Name of	Registered Landfi	 II	1	L	MN- W-15
	L .		Hauler ID	No ·	of Waste					*		
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ASB-41 (R-06-08)					.0	o not us	e this form fo	r asbestos licensu	re exer	npted	activit	ues

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

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

Date of Notification (1)	October 18 2011	3			Name of Building	Owner/Ope DeFor	rator (2) est Demolition	ch#	;)	151	,	
Agencies Notified	October 18, 2013				Street Address	New West and the			- 0	7. D. (1	1
[x] EPA	[] Initial	Notifica ded Noti					Herbertsville Road					1
[x] DOL	Amen	dment #_ gency (in			City, State, Zip Co		Pleasant, NJ 08742	. OCT 2 8	3 2013		, P.	
[x] DOH [] DCA	justifi	cation)	oraug	I	Name of Contact Dane		Т	elenhone Number				1
	I I cance			EAC	LITY INFORM	TATION			8			_
Name of Facility Where A	batement is Taking	Place (3	3)	FACI	LITT IN ORG	IATION	Type of Facility (4)					
Sto	rage shed							School (k-12) Subchapter 8 (otl	ner than	k12)		
Street Address	Haddonfield A	venue					[x]	Other (i.e., privat homes, etc.)	e & con	nmerci	al build	dings,
City		Count	y (6)		County Code (7) (STATE USE GNI	Y)	Square feet 200 sf	# of Floors	Bldg.	Age 5	0 .	
Lavallette		Ocea	n.		(01111100000011		Current Use (Prior i					
Name of Monitoring Firm	Hired by Building	Owner ((8)	+	ASCM No.	Name of	Abatement Contractor	(9)	Ψ			
N/A Street Address	A					Street A		an Contracting,	Inc.			
						City Str	1889 R ate, Zip Code	oute 9, Unit 61				
City, State, Zip Code	82 - 72 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -			_	0.		Toms I	River, New Jers		55-12	271	
Project Manager for Moni	itoring Firm		Telephone N	lumber		100 CO	ne Number 19-9932	License N 00624	lumber			
Scheduled Start Date (10) 10/18/20			Scheduled C 10/21/20		on Date (11)	Name of	f OSHA Monitor E.M.S.	L. Analytical				
Occupancy Status During	Abatement (Check	only on	e)		atamont	Street A		telton Road				
	ility Closed/Vacate atement Performed					City, St.	ate, Zip Code			-		-
[] Oth	er – Describe					City, St		way, New Jerse	y 0885	54		
Scope of Work (Check all	l that apply)					[Full Containmen Mini-Enclosure	t with Negative Pre	essure			
[x] >3	sfor≥3 lf		[]	Renova	tion	[Glovebag Proced					
[] ≥16	60 sf or ≥260 lf		[x]	Demoli	tion	[x] Non-Exempted (*) and Non-Friable				
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Name of Registered Wast			NJDEP Wast		100	ards of Wa		tered Landfill	1			1
	ontracting, Inc.		2(Dispo	sal Date	City, S						
Toms River	, New Jersey	T mist			2/2013		town Pennsylvan	a	Date			
Completed by (Print or T		Title Proje	ect Manage	er	Signature	-hal	- Ind		100000000000000000000000000000000000000	8/20	13	

Date of Notification (1)											
09-06-2013			Name of Building 6	Mars / Oners	for (2)						
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Name of Facility Where Abatement	is Taking Place	2 (2)	FACILITY INFOR	MATRON	to be for for	1					
		= (3)		T. Delich	Type of F						
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• 3			County Code (7) STATE USE ONLY)	1	Cumpage	91	_2			39	
Name of Monitoring Firm Hired by Bu	fletin- O		-		Current Us	e aptior is	being de	molish	ed)		_
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Street Address		¥		CHAP	Abatemen	it Contrac	ior (9)				
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City, State, Zip Code				OFFER A	Coress						
Julia, Zip Code				22-VA	AN ORDE	EN PL					
				Cay, Sta	te Zin Code						
roject Manager for Monitoring Firm				HACK	ENSACK	Al s				-	
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fart Date (10)				201-70	8-4270	38		se No.			
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occipancy Status During Abstement ((There's Control	7-2	013	Name of C	OSHA MONI	nedu					
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Facility Closure (Check Only One	<u>7 - 2</u> ₃)	013	Street Add	SLA dress	naly	tica		I N	(C	
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Facility Closed/Vacated During En Abatement Performed Outside of N Other - Describe: ope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility	Check Only One lire Period of Ak lormal Facility I Rer Den ls Lo. Norr Used S Mainte Custodia (1)	7 - 2 a) batement fours hovelion mally botely by mancer of Staff?	Asbestos Conta (Le. thermal s surfacio	Street Add	SLA Andress LACAT	Merce	A.Y. Alegative	Press	Aba	ire terment	2
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Facility Closed/Vacated During En Abatement Performed Outside of N Other - Describe: ope of Work (Check All That Apply) ≥3 sf or ≥3 if ≥160 sf or ≥260 if Location of Asbesius-Containing Material (ACM) TO BE ABATED In Facility (13)	Check Only One lire Period of Ak lormal Facility I Rer Den ls Lo. Norr Used S Mainte Custodia (1)	7 - 2 a) batement cation maily cation many ma	Asbestos Conta (Le. thermal s surfacio	Street Add 307- Cay, State No. State No. State No. State No. State No. State No. No. State No.	dress LACA † LAC	Merch with ment with me possible per part of (7) and (8) SF	Non-Friedry or LP	Press Removal	Aba	ire terment	2
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CK#3057

Date of Notification (1) 10-23-13			1000	lame of I		wner/C	Operator (2	2)								
Agencies Notified	Type Notification		- s	treet Ad	dress									-	•	-
			10.0	Cente												
DEP DOL	Initial Amended		C	ity, State	e, Zip Coo	ie										\neg
X DOL	Amendment				own, N.					20	00		_			
	Emergency (including	N	larne of	Contact					Tek	ephone.	-	£			9
DOH DCA	Cancellation		P	Marc					1	3		9				
Fixed	<u> </u>			FACIL	JTY INFO	RMAT	ION									
Name of Facility Where Residential Propert					5		1.	_	f Facility (4 chool (K-1)		-			V.		
Street Address									ubchapter	8 (Oth	er than K	(-12)	. 10 .41	202		
3 Center Ave									ther (i.e. p	nvate a	s comme	arciai p	UHOI	ngs,	nome	s,
City (5)								Square		# 0	Floors		Bio	ig. A	ge	
Middletown							1	2,000		2			50	+		
County (6)	****			County C					t Use (Pric			dished)			
Monmouth			16	STATE U	SE ONLY)				lential Pr							
Name of Monitoring Firm	n Hired by Building (Owner (8)		ASCM n/a	No.				ement Con							
n/a									nageme	nt Co	orp					
Street Address	7						Street A									
n/a							22.Tn									
City, State, Zip Code n/a	ty, State, Zip Code /a						City, St Linco		code k, NJ 07	035						
Project Manager for Mo	nitoring Firm		1	elephor	ne No.		Telepho				Licens					
n/a				n/a			973-7	06-79	950		01193	3				
Start Date (10) 10-25-13		Schedule 10-26-1		pletion [Date (11)		Name o	of OSH	A Monitor							14.25.40.11
Occupancy Status Durin	ng Abatement (Chec	k Only On	e)				Street /	Addres	s		******	-				
Facility Closed/Var	cated During Entire I	Period of A	batem	ent			n/a									
Abatement Perform	ned Outside of Norn	nal Facility					City, St	tate, Zip	Code							
X Other - Describe:	Scheduled for Demo			-			n/a									
Scope of Work (Check /	All That Apply)							~								
23 sf or ≥3 lf		☐ R	enovat	ion					Containme		n Negativ	ve Pre	ssur	e		
≥160 sf or ≥260 lf		× D	emoliti	on			F		i-Enclosure vebag Prod							
							×		-Exempted			riable	Proc	edur	9	
		· le	Location	nn										100.00	ment	t
Locatio	n of		lormall	у		D	escription	of	- 1			-		- 13	pe	
Asbestos-Containin	g Material (ACM)		d Solel intenar			tos Cor	ntaining M	laterial			Amount		_		Enca	m
TO BE AS			odial S		(i.e.		al systems acing, VA		tion,		Specify F or LF)		Rem	Rep	cap	정
(13			(12)				miscellan				A 07589/3879A		moval	epair	psulate	Enclosure
		Yes	No	N/A									_		6	
Exter	rior			x		Trans	site Shir	ngles		4	10 SF	2				
Interior North	West Room			х			Floor Tile				10 SF	>	٢			
Interior North Ea	st Utility Room			x		F	loor Tile	9			50 SF	>	2			
Interior North Ea	st Utility Room			x	F	Fiber (Cement	Board	d		6 SF	>	2			
Name of Registered Wa	aste Hauler			JDEP W			c Yards		Name of	Regist	ered Lan	ndfill				
Loznica Management Corp 0033				auler ID 333113		of Wa)		GROW		rth Lan	dfill				
City, State Lincoln Park, NJ 07035						Dispa TBD	osal Date		City, Stat Morrisv		A 190	87				
Completed by Title						Signature	;				Date		72			
E. Cirovic	c Secretary \succeq						E. C	vico	ni			10-2	23-	13		

-	W 500			
11	11.1	•	10 -	-
1	KTT		1 La	. /
_	K#	- U) _) /

Date of Noviscation (1) 10-23-13			\neg	Name of Henry		OwnerA	Operator	(2)	Manton	APPRO	VED			7	
Agencies Notified	Type Notification		-	Street A			-		N Dept of	display	Senior	Ser	dce	8	
CI EPA	☐ Initial			3 Cent	ter Ave				1	(8jgnatu	re)	0/	_		
DEP DOL	Amended Amendment				rte, Zip C rtown, N		001	2.8	Date: 0	7/12	Time:	जे	of	m	
DOH DCA	Emergency justification) Cancellation			Name of	Contact						.	-			
				FACI	LITY INF	ORMAT	NON								- P
Name of Facility Where Residential Proper	Abatement to Take ty Scheduled for	g Place (3 r Demo	9)			UNIC 1700-150-150			Facility (4)						
Street Address								Sut	nool (IK-12) ochapter 8 (C)	free shown	K-121				
3 Center Ave								回 ou	er (i.e. private	& comm	nerolal b	ηlợp	193,	hom	es,
City (5) Middletown			•					Square	The state of the s	of Floors		Bid 50	g. A	ge	
County (6) Monmouth				County (STATE	Code (7) USE ONLY)		Current Reside	Use (Prior If b	eing dear artv	rolished)		_		
Name of Monitoring Firm	n Histord by Building	Owner (8)		ASCA	A No.		Name		ment Contract			_		_	
n/a		2 0.35004-5		n/a			Lozni	ica Man	agement C	OID					
Street Address n/a								Address by Ln			*0			-1010	
City, State, Zip Code N/a							City, St	late, Zip (In Park	Code , NJ 07035						
Project Manager for Mo n/s	\sqcap	Telepho rVa	ne No.		Teleph	one No.		Licen 0115	se No.						
Start Date (10) 10-25-13		Scheduli 10-26-	Juled Completion Date (11) Name of OSI							10.10					
Occupancy Status Durin	g Abatement (Che	1967 - 1967	222					Address				_			
Facility Closed/Van	ated During Enfire	Period of a	Member	netri [†]			nla	defilerati							
Abstement Perform Other - Describe:	ned Outside of Norm Schedulad for Domo	nal Facility	Hour				City, St	nde, Zip C	lode		<u> </u>	•			
Scope of Work (Check A	Vi That Apply)						<u> </u>					_			-
조 최하 3 개 로 2160 명 대 2260 N			lennoil Lennoil					Mini-E	onbilmment wi nclosure pag Procedum pempted (*) a	•			.		
	30-	1 1	Locati	00			Batel	HUIPL	ACHIENCE () E	INI INDITY	THEIDIC P	-	100	neni	-
Lacation		1	lonnal	ly .		Πe	scription :	of			L		Ту		
Asbecker-Containing 10 BE AB In Facil (13)	ATER Ry	Mai	d Sole Intena odial s (12)	nce/	Asbes (i.s.	los Con lhermal surfa	taining Mi I systams Ichg, VAT Internation	aberial (Ad insulation i, or	n,	Amount Specify IF or LF)	RECUREN	,	Repair	Encepsulate	Enclosure
	199	Yes	No	N/A				<u>.</u>			=	1	7	date	9
Exteri	OF			х		Trans	Ite Shin	gles		10 SF	35.	+	+	-	-
Interior North V	Vest Room	1		×		F	loor Tile			10 SF	x	+	\dashv	_	
Interior North Eas	t Utility Room	1		х		F	loor Tile	1		50 SF	×	+	+		
Interior North East Utility Room				×	F	iber C	ement	Board		6 SF	x	+	1		
				JDEP W	aste	Cubic	Yands		ame of Regist						
Loznica Management Corp Hauter II 003311						of Wa	ste	1000	ROWS No						
City, State Lincoln Park, NJ 070	35					Dispo TBD	sal Date	2.77	ity. Slate Iorrisville, i	PA 190	 8 7				
Completed by Title E. Clrovic Secretary						1	Signature C.				Date 10-23	-13			
		1					_, _,	work	4		10-23	-10	1		- 1

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

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

3. 1					0 10	(2)			1300	200		
Date of Notification (1) October 2	October 22, 2013			Name of Buildi	ng Owner/Ope Miz C	rator (2) onstruction		Ch#	20	183	5	
[x] EPA [x]	Notification Initial Notif Amended N			Street Address		2 nd Street						
[] DEP [] []	Amendmen Emergency	t #		City, State, Zip	Code Lakew	ood .		OCT 28 20	13	ř.	4	
[x] DOH [] DCA	justification Cancellatio			Name of Conta Sau	et l Miz	1	Tel	enhone Number		•		
			FACI	LITY INFO	RMATION							
Name of Facility Where Abatement The Chateau		e (3)				Type of Fac	[]	School (k-12) Subchapter 8 (oth	ner than	k-12)		
Street Address 945 River A	venue							Other (i.e., privat homes, etc.)			al build	iings,
City	Cou	inty (6)		County Code (7 (STATE USE O		Square feet 1000	sf	# of Floors		. Age 6	0	
Lakewood	Oc	ean						eing demolished anquet hall)			
Name of Monitoring Firm Hired by N/A	Building Own	er (8)	4	ASCM No.	Name of	f Abatement C		9) n Contracting,	Inc.			
Street Address					Street A		1889 Ro	ute 9, Unit 61			_	
City, State, Zip Code					City, St	ate, Zip Code	Toms Ri	ver, New Jers		755-12	271	
Project Manager for Monitoring Fire	n	Telephone N			732-34	ne Number 19-9932		License N 00624	Jumber			
Scheduled Start Date (10) 11/07/2013		Scheduled Co 11/08/201		on Date (11)				. Analytical				
	d/Vacated Du	ring Entire Period			Street A		1056 Ste	elton Road				
[] Abatement Pe		de of Normal Fac	cility Ho	ours	City, St	ate, Zip Code	Piscatav	vay, New Jerse	ey 088	54	5	
Scope of Work (Check all that apply	<i>i</i>)				[Full Cor		with Negative Pro	essure			
[] >3 sf or ≥3 lf [x] ≥160 sf or ≥2	50 lf	r 3	Renovat Demolit		[[x	-	ag Procedu empted (*)	re and Non-Friable	Proced	ure		71
[A] and	T								Abat	tement	Туре	
Location of Asbestos-Containing Material (ACM)	Is Location Normally use Solely by	ed		Descripti Asbestos-Co Material ((i.e., therma	ntaining ACM)		Amount (Specify SF or LF)	R E M	R E P A	E N C	E N C L
TO BE ABATED in facility (13)	M	aintenance/Cus Staff (12)	stodial		insulation, s VAT,	urfacing, or		O Dry	O V	I R	P S U	O S U
	Y	ES NO	N/A		other miscel	laneous)			A L		L E	R E
Exterior		X		Asbestos s	iding and ro	oof flashing		200 sf	X			
									-	-		
				-					-			
Name of Registered Waste Hauler		NJDEP Waste	Hauler	ID No. Cub	ic Yards of Wa			red Landfill			1	-
Guardian Contracting	ig, Inc.		223		City,		R.R.F.					
City, State Toms River, New Jo	ersev			sal Date L/2013	Tully	state town, Penn	sylvania					
Completed by (Print or Type) Nicholas Fernicola	Tit	tle oject Manage	r	Signature	chol	1/1	سر	/	Date 10/	e 22/20	13	

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

for the si		Name of Building	Owner/Oper	ator (2)	5975		1 #	11	22.2	
Pate of Notification (1) October 22, 2013			Ocean	Beach	Property Ma	anagement C		45	873	>
	Notification	Street Address	- P O B o	o x 47 4	3250	Rt 35	noi	th.		
DEP [] Amend	led Notification Iment # ency (including	City, State, ZipC	ode Lavall	ette, NJ	08735	ST 28 2010				
x] DOH [] Cancel	ation)	Name of Contact Tom	Costello							
] DCA		CILITY INFOR	MATION							
Name of Facility Where Abatement is Taking Residence				Туре	of Facility (4) [] []	School (k-12) Subchapter 8 (other	r than k	12)		1 8
Street Address 116 West Sandpipe	er Way				[x]	Other (i.e., private homes, etc.)			buildin	igs,
City	County (6)	County Code (7) (STATE USE O	NLY)	1	e feet 500 sf	# of Floors	Bldg.	61		_
Ocean Beach III	Ocean				Reside					
Name of Monitoring Firm Hired by Building	Owner (8)	ASCM No.			nent Contracto Guardi	an Contracting, I	nc.			_
N/A Street Address			Street A			Loute 9, Unit 61				_
City, State, Zip Code				tate, Zip	Toms	River, New Jerse	y 087	55-12	71	_
Project Manager for Monitoring Firm	Telephone Num		732-3	one Num 49-993	2	00624				_
Scheduled Start Date (10) 11/06/2013	Scheduled Com 11/08/2013	pletion Date (11)	52		Monitor E.M.S	.L. Analytical				
Occupancy Status During Abatement (Check	ed During Entire Period o	of Abatement	Street	Address	1056	Stelton Road				_
Abatement Performed Other – Describe	Outside of Normal Facili	ity Hours	City, S	State, Zip	Piscat	away, New Jerse		54		
Scope of Work (Check all that apply)]		ull Containme	nt with Negative Pre	ssure			
[] >3 sf or ≥3 lf	L A	enovation	į (x		Hovebag Proce Non-Exempted	edure (*) and Non-Friable	Procedu	ıre		
[x] ≥160 sf or ≥260 lf	[X] De	EINORLION					Abat	ement	Гуре	
	Is Location Normally used		Descrip Asbestos-C	tion of Containi	ng	Amount	R E	R E	EN	EN
Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility	Solely by Maintenance/Custo Staff		Material (i.e., therm insulation,	al syste	ms	(Specify SF or LF)	M O V	P A I R	C A P S U	C L O S U
(13)	YES NO 1	N/A	other miso		us)		A L		L E	R E
Pottorior	X X	Asbestos	siding			400 sf	X		_	-
Exterior						-	+			\perp
	+					14 - 47 - 4611				
Name of Registered Waste Hauler Guardian Contracting, In	c. NJDEP Waste 202	223	bic Yards of	Waste y, State	Name of Reg T.R.R.F	ristered Landfill				
City, State Toms River, New Jersey	Disposal Date 11/11/2013 Signature	Tu	llytown	n, Pennsylva	ania	Da	te /22/20	012		
Completed by (Print or Type) Nicholas Fernicola	Title Project Manager	1	Nich	51	d activities.	(10	122121	/13	

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

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

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

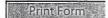
ate of Notification (1) 10/22/2013	<u> </u>	Name of Build	ing Owner/Op Messe	erator (2) ercola Enterprises	Ch.#	20	782	4	
] DEP [] A	itial Notification mended Notification mendment #	Street Address City, State, Zig	PO B	ox 790 Matawan, NJ	07747		10		
v l DOH	mergency (including stification) ancellation		rnando			St. /	115		1
		FACILITY INFO	RMATION	II = 0D III (4)		'N			_
Name of Facility Where Abatement is Ta Residence Street Address	king Place (3)			Type of Facility (4) [] []	School (k-12) Subchapter 8 (oth Other (i.e., private			ıl buildi	inos
1555 Millcreek	Rd.			[x]	homes, etc.)	ac con	mioroit	u ouna	1180,
Beach Haven West	County (6) Ocean	County Code ((STATE USE		Square feet 900 sf Current Use (Prior if Residen		Bldg.	Age 4().	
Name of Monitoring Firm Hired by Build	ding Owner (8)	ASCM No.		of Abatement Contractor Guardia		Inc.			
Street Address		- W. W W W W W W W	Street A	Address 1889 R	oute 9, Unit 61				
City, State, Zip Code			City, S	tate, Zip Code	Liver, New Jerse		55-12	71	
Project Manager for Monitoring Firm	Telephone 1		732-3	one Number 49-9932	License N 00624	umber			
Scheduled Start Date (10) 11/05/2013	11/06/20	Completion Date (11)		of OSHA Monitor E.M.S. Address	L. Analytical				
Occupancy Status During Abatement (Cl	neck only one) acated During Entire Perion med Outside of Normal F	od of Abatement acility Hours		1056 State, Zip Code	telton Road way, New Jerse	y 088	54	-	
Scope of Work (Check all that apply) $ \begin{bmatrix} $	[] [x]	Renovation Demolition	[x	Mini-Enclosure Glovebag Proced	t with Negative Predure *) and Non-Friable		ıre		
						Abat	ement '	Гуре	
Location of Asbestos-Containing Material (AC <u>TO BE ABATED</u> in facility (13)	n sed astodial	Descrip Asbestos-C Material (i.e., therminsulation, VAT other misce	ontaining (ACM) al systems surfacing, c, or	Amount (Specify SF or LF)	R E M O V A L	R E P A I R	E N C A P S U L E	E N C L O S U R E	
Exterior	X	Asbestos	siding		600sf	X			
						-			-
Name of Registered Waste Hauler Guardian Contracting,		0223	bic Yards of W	T.R.R.F.	tered Landfill				
City, State Toms River, New Jerse	у	Disposal Date 11/07/2013		State lytown, Pennsylvan	ia	Date			
Completed by (Print or Type) Nicholas Fernicola	Title Project Manag		lighol	tel		100000	: 22/20 ———	13	
	*Do not us	e this form for asbes	os licensure	exempted activities.					

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

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

Date of Notification (1)	October 22, 2013			1	Name of Build	ding O	wner/Oper Ocean	rator (2 Beacl) n Property Ma	nagement	Ch-3	ŧ J.	789	7
Agencies Notified [x] EPA	Type of Notificati	on Notifica			Street Addres			ox 474	+ 3250 1	24.35 N		7.2	-51	
[] DEP [x] DOL	Amend	iment #_ ency (in	fication		City, State, Zi	22		ette, N	NJ 08735	anhono Niverkan	-12		1 1	
[x] DOH [] DCA	justific				880	om C	ostello			Anna		-	<u> </u>	
				FACII	LITY INFO)RM	ATION	Type	of Facility (4)		-	Alan		
	Abatement is Taking sidence	Place (3	3)					Турс	[] []	School (k-12) Subchapter 8 (oth	er than			
Street Address	East Sandpiper	Way								Other (i.e., privat homes, etc.) # of Floors	Bldg.	Chit	al build	ings,
City		County	y (6)		County Code STATE USE		n		feet 500 sf	1	Diug.	6.	3	
Ocean Bead	ch III	Ocea	n						Residence					
Name of Monitoring Firm		Owner ((8)	1	ASCM No.		Name of	f Abate	ment Contractor (Guardiat	9) a Contracting,	Inc.			
Street Address	Street Address						Street A	ddress	1889 Ro	ute 9, Unit 61				
City, State, Zip Code							City, Sta	ate, Zip	Code Toms Ri	iver, New Jerse	ey 087	55-12	271	
Project Manager for Monitoring Firm Telephone N				umber			Telepho 732-34			License N 00624	umber			
	Scheduled Start Date (10) Scheduled Co				on Date (11)	2/11/0-			Monitor	Analytical				
11/06/20 Occupancy Status Durin	g Abatement (Check	only on	ie)	91 6 50 85			Street A	ddress						
[x] Fa	cility Closed/Vacate	d Durin	g Entire Period	of Aba	tement				60/00000014 = 40000	elton Road				
	patement Performed ther – Describe	Outside	of Normal Fac	ility ric	Juis	_	City, St	ate, Zip	Code Piscatav	vay, New Jerse	y 088	54		
Scope of Work (Check a	all that apply)						[full Containment Mini-Enclosure	with Negative Pre	ssure			
[] S	3 sf or ≥3 lf		[]	Renovat	ion		Ĺ	j	Glovebag Procedu					
r ,	160 sf or ≥260 lf		[x]	Demolit	ion		[x] 1	Non-Exempted (*)	and Non-Friable	Procedi	ıre		
											Abat	ement	Туре	
			Is Location				Descripti bestos-Co			Amount	R	R	Е	E
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		-				-								
Name of Registered Wa		1	NJDEP Waste		ID No. C		ards of Wa	aste	Name of Registe T.R.R.F.	ered Landfill				
Guardian City, State	Contracting, Inc.		20		sal Date	2	City,							
Toms Rive	er, New Jersey	T = -			1/2013		Tully	ytown	, Pennsylvania	1	Dat	e		
Completed by (Print or		Title Proi	ect Manage	r	Signature	\ <u>/</u> \.	chi	11	11	/	1.7	22/20	13	

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



X#3677ency X * Emergency X

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

REVEIBLETT?

Date of Notification (1) 10/24/13	\$			Building (1000	1200000			
Agencies Notified Type Notification		1 5	Street A	ddress			415/50	2013-00	T 28	3 P	111:	52			
EPA Initial DEP Amended DOL Amendment	#		City, Sta	te, Zip Co				ASBE:	STO:	S CC	NT	101	18		
DOH justification) Cancellation	ncluding	1000	Name of Eugen	Contact e					_						
			FACI	LITY INFO	RMAT	ION									
Name of Facility Where Abatement is Taking Eugene O'Neill Private Home	Place (3)						_	of Facility (4	500						
Street Address 120 Magee						,	x C	chool (K-12 ubchapter of ther (i.e. prote.)	g (Othe				lings,	home	es,
City (5) Lavallette NJ 08735	****				5-		Square 1000	Feet	# of 1+	Floors	i		ldg. A 5 +	ge	
County (6) Ocean				Code (7) JSE ONLY)			Currer	nt Use (Prio	r if bei	ng dem	nolishe	ed)			
Name of Monitoring Firm Hired by Building C N/A	Owner (8)		ASCM	l No.			of Abate	ement Cont	tractor	(9)					
Street Address						0.000,000,000,000	Address 3ox 32								
City, State, Zip Code							state, Zip t Berlir	Code NJ 0809	 91						
Project Manager for Monitoring Firm	7	Telepho	ne No.		1 15 5 5 5 5 5 5	none No 753-98			Licen 0072	se No					
Start Date (10) 10/28/13	Scheduled	Com	pletion l	Date (11)			of OSH	A Monitor							
Occupancy Status During Abatement (Check	2 2	1		-			Address	s				100,000			
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe:				****	_	City, S	State, Zip	Code							
Scope of Work (Check All That Apply)											-				
≥3 sf or ≥3 if ≥160 sf or ≥260 if	- Company	novat moliti	2000				Mini Glov	Containme -Enclosure /ebag Proc -Exempted	edure	Ū				•	
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Location of		rmally	y			escription							Ту	pe	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Main! Custo	tenan	ce/		therma surfa	ntaining Nataining Nataing, VA acing, VA miscella	s insulat T, or		(8	mount specify or LF)		Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A											Ф	
Exterior Siding	-		х		Exte	erior Si	ding		12	00 SF	-	x			
	++							-			×				
Name of Registered Waste Hauler		Al	IDED 14	lasta	CE*	Verd-		Nome of F	Docist-	rod I c	ndell				
United Containers		Ha	JDEP W auler ID 2459		of Wa	c Yards aste		Name of F		ieu La	i i u i i i i				
City, State Elm NJ	70000			(C.	Dispo 11/1	osal Date /13		City, State Morrisvi		1900	67				
Completed by Anthony T Perna						Signatur	e L				Dat 10	e /24/1	3		

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2) Date of Notification (1 10/24/13 Charles Termini Private Home **加和 00T 28 PM II: 53** Agencies Notified Type Notification Street Address 123 north Burgee **EPA** Initial City, State, Zip Code × DEP Amended ASBESTOS CONTROL DOL Little Egg Harbor NJ 08070 Amendment # ICENSING **Emergency (including** Name of Contact DOH justification) DCA Cancellation Charles FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Charles Termini Private Home School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e. private & commercial buildings, homes, 123 north Burgee etc.) City (5) # of Floors Bldg. Age Square Feet Little Egg Harbor NJ 08070 1000 +35 +1+ County Code (7) (STATE USE ONLY) County (6) Current Use (Prior if being demolished) Ocean Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Pernaco Inc. Street Address Street Address PO Box 329 City, State, Zip Code City, State, Zip Code West Berlin NJ 08091 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 856-753-9800 00727 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 10/28/13 11/1/13 Same Occupancy Status During Abatement (Check Only One) Street Address Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf 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 Type Normally Location of Description of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ Encapsulate TO BE ABATED (i.e. thermal systems insulation, (Specify Remova Repair Custodial Staff? In Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A Exterior Siding Х Exterior Siding 1200 SF Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste United Containers G.R.O.W.S 22459 3 City, State Disposal Date City, State Elm NJ

11/1/13

Signature

Title

President

State of New Jersey

Completed by

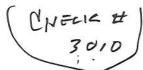
Anthony T Perna

Date

10/24/13

Morrisville PA 19067

Date of Notification (1) 10/24/13				uilding Ow Manisa F				141-7				n			
Agencies Notified Type Notified	cation	1 333	reet Add					113 OCT							
	dment #			, Zip Code wkin NJ		50	1	SBES	LICE	M2IN	ig Ig	<u>):</u>	•		
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Name of Facility Where Abatement is	Taking Place (3)		FACILI	TY INFOR	MATI	ON	Type of	Facility (4)	-			-		
William Manisa Private Home								hool (K-12 bchapter	2) 8 (Othe	r than k	(₋ 12)				
Street Address 65 Albert					-		≥ Ot etc	her (i.e. pr :.)	rivate 8	comme	ercial				6
City (5) Manahawkin NJ 08050							Square 1000+		1	Floors		35	lg. Ag +	e 	25-711
County (6) Cocean	50 .6 0	C (S	ounty Co	ode (7) SE ONLY)			Current Home	Use (Prio	r if bei	ng demo	olished	i)			
Name of Monitoring Firm Hired by Bu N/A	uilding Owner (8)	1	ÀSCM	No.		100	of Abate aco Inc	ment Con	tractor	(9)	3			7	
Street Address				-			Address Box 329								
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Project Manager for Monitoring Firm		Т	elephon	e No.		Teleph	none No. 753-98	1		Licens					
Start Date (10)	Scheduled	l Com	pletion D	Date (11)		100000000000000000000000000000000000000	of OSHA	A Monitor					-		
10/28/13 Occupancy Status During Abatemer)					Address	1			100		525.55	_	
Facility Closed/Vacated During Abatement Performed Outside Other – Describe:	Entire Period of Ab	ateme	ent		_	City, S	State, Zip	Code		3					
Scope of Work (Check All That Appl ≥3 sf or ≥3 if ≥160 sf or ≥260 if	☐ Re	enovat emoliti					Mini Glov	Containm -Enclosure rebag Pro -Exempte	e cedure						
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Name of Registered Waste Hauler		237	JDEP V		1500000	ic Yards /aste		Name of		tered La	andfill				
United Containers	100.250	2459	110.	3			G.R.O								
City, State Elm NJ						osal Dat 1/13	е	City, Sta Morris		A 190	67				
Completed by Anthony T Perna	Title Presi	Title President				Signatu	re /				- 10	te /24/	13		



SING OF NOW JOISON HOTHICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)

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	(Pursuant to NJAC	8:60 and 12:120)	<u>12 - 140</u> 7
	Name of Building	Owner/Oberstor	(2)	ET. 28, PM11: 49
Date of Nouncation (1) /24/13	- Enn	FKTEC	N CONTR	27/Cap Dan 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Agencies Nouthed Type Notification	Sveel Address	- RT. 5	- A53	ESTOS CONTROL
	City, State, Zip C			ELICENSING
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DON justification) Cancellation	Bruce	BREUN	16	
□ Carcasto.	FACILITY INF			
			Type of Facility (4)	
Name of Faching Where Abatement is Taking F	2/ace (2)		School (K-12)	Other than K-12)
RESIDENCE			One (I.e., phy	are & commercial resource.
Succe Address 7 15 7 0714 STREE	EET		Square Feet	# of Floors Bldg Age
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	Count Code (VAC	0 N T
County (6) CANT MAY		T Name of Abate	meni Contrado (9)	
Name of Marylonny Firm Hired by Building On	mer ASCH No.	KLER	100 INC	
Name of Marioning 7		Sveet Addres	S. SPRUC	= Ave.
Siree: Acoress	7.2	369)C /
Ziteer voorers		City. State, Zip	COS. CHAD	EIN J. 08:52
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	T. Yelephone No	Telephone No	79-047.2	00444
Project Manager la Montana Firm	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Harra of OSH	A HONO	
I Sche	sued Completion-Date (11)	Jin S &	= PILALEM	M
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1 4 /13	ck only one)	369	3, Spruc	E/1 00.1
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Scope of work (Check all that apply)		711.0	ENCIDENTE	
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SLITE OF NEW JETSEY HOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)

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Date of Mountation (1) /24/13		Sveel Address							
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Proper Manager Ic	A MOUIDULA LIIII	21	Name of OSI	HA MONROY / E AL	M				
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Sian Date (10)		/11/13	SUBBL ADDI		1 =				
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State of New Jersey HOTHICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)

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	Name	of Building Owner/	perator (2) ·	ANT ACT	28 PHII:	42		
Date of Nouhcation (1)		Name of Building Owner Operator (2)						
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EN Silves		Suie. Zip Code		20	TOLIGOTION	CA		
Amendment	1	CAY, Suie. Up Come.						
Emergency) Name	Hame of Contact						
Carcella pou		Druce Br	FURIC					
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NOTIFICATION OF ASBESTOS ABATEIRE CEIVED (Pursuant to NJAC 8:60 and 12:120)

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