JW1927100

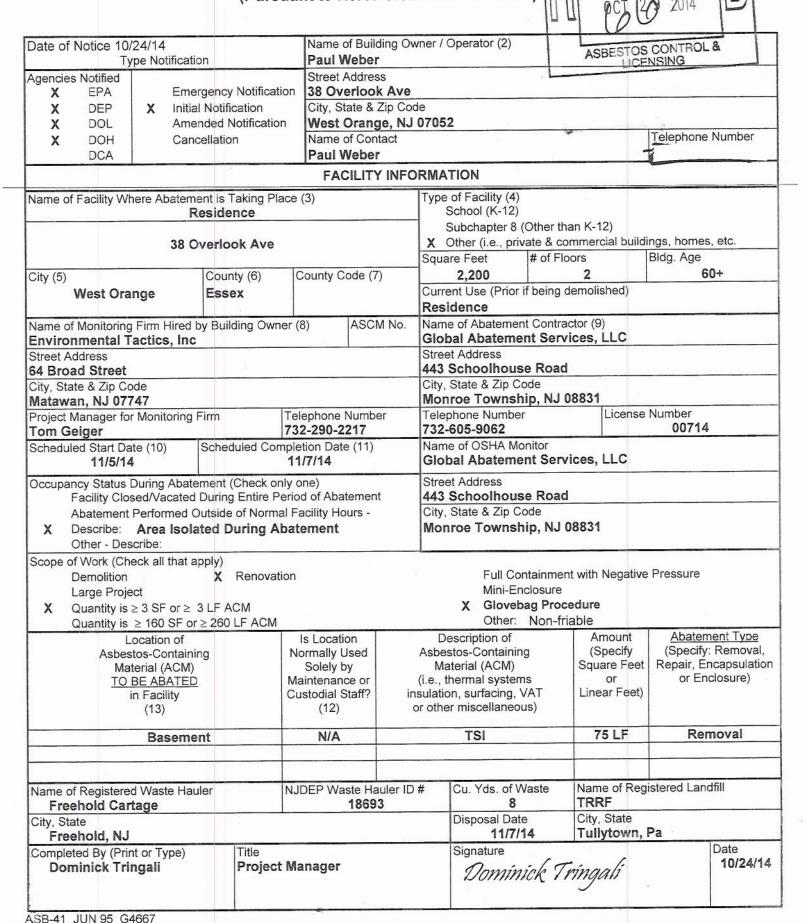
	N					d 12:120)	EN I	D		, <u>L</u>	Ш	$\mathbb{V}$	E	In	N
Date of Notification (1) 10/27/14				Building (Bonear		Operator (2	2)		00	T 2	9 1	2014	-		
Agencies Notified Type Notification		100	Street Ac 137 Bla	ddress anchard	Stree	et						-0-1-		-	
EPA Initial Amended Amendment	#			te, Zip Co k, NJ 07					ASBES	TOS C			L &		T
Emergency ( justification)	including		Name of						Telep	hone N	umb	er			
▼ DCA			FACIL	LITY INFO	RMAT	ION									
Name of Facility Where Abatement is Takin Randy Bonean	g Place (3)	)						f Facility ( chool (K-1	W.5		Π				
Street Address		_				į	S	ubchapter ther (i.e. p	8 (Other			koild	nac	homo	ve.
137 Blanchard Street							et et	c.)			IGAI				,
City (5) Newark							Square	e Feet	# of F	loors		BI	dg. A	ge	
County (6) Essex County	11		County C	Code (7) JSE ONLY			Curren	t Use (Pri	or if being	demol	ishe	d)			
Name of Monitoring Firm Hired by Building	Owner (8)		ASCM	No.		Name o		ement Cor nent	ntractor (9	9)	de(6)				
Street Address						Street A					Т				
	1							Street S	uite A4						
City, State, Zip Code						City, Sta		en, NJ (	07047						
Project Manager for Monitoring Firm			Telephor	ne No.		Telepho				License	No.	2			
						201-2				01223	3				
Start Date (10) 11/08/14	Schedule 11/22/1		mpletion [	Date (11)				A Monitor CONSU		HC					
Occupancy Status During Abatement (Chec						Street A	-		2011110	LLO	<del></del>				
▼ Facility Closed/Vacated During Entire	Period of A	Abaten				1600	ROU	TE EAS	TSUIT	E 107					
Abatement Performed Outside of Norm Other – Describe:	nal Facility	Hour	S			City, St.		Code 07083							
Scope of Work (Check All That Apply)												85			
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		Renova Demoli				×	Mini	Containm -Enclosur /ebag Pro	е	Negative	e Pre	essur	e		
							Non	-Exempte	d (*) and	Non-Fri	iable			A 1 1 1 1 1	
		Locat			_	0 12 32	7/20							ement pe	l.
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility	Use Ma	d Sole intena todial	ely by ince/ Staff?		tos Cor	escription ntaining Mal al systems acing, VAT	aterial insulat		(Sp	nount pecify or LF)		Remova	Repair	Encapsulate	Enclosure
(13)		(12)		-	other	miscellane	eous)					oval	ai.	sulate	sure
	Yes	No	N/A											.u	
Warehouse room						VAT				) SF	-	x			
Exterior of Warehouse						nsite Pa				2 SF		x			
Roof			-		1000	estos As			2 - 2 - 2	00 SF	-	х			
Main building		4		<u> </u>		ugated F	anel			00 SF		x			
Name of Registered Waste Hauler SAN TON SERVICES		H	NJDEP W Hauler ID 2430		of W	c Yards aste			Register WLAN			MM	ISIC	N	
City, State KENILWORTH, NJ					Disp	osal Date		City, Sta	te NY, NJ		П				
Completed by	Title				Т	Signature		5			Date	30			
Bryan Parra	Proje	ect M	anager			45					10/	27/1	4		

State of New Jersey

Tom: Credit from Check

Print Form

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Date of Notification (1) 10/26/2014						Building CACOBS	Owner/Op	erator	(2)		BI	<u>L</u>	Ш_	U	<u> </u>	
Agencies Notified	Type Not				Street Ad 47 BAN	ldress NK STR	EET					00	T 2	9 2	014	
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➤ DOH DCA	justi	rgency (i fication) cellation	ncluding			Contact ACOBS		10			Telep	hone Nu	niseEN	SING	i	
					FACIL	ITY INFO	RMATIO	N								
Name of Facility Where A RESIDENTIAL	Abatement	is Taking	Place (3)							of Facility (4 School (K-12	2)					
Street Address 47 BANK STREET			3	=					×	Subchapter 8 Other (i.e. pr etc.)	Other ivate &	than K-12 commerci	2) al build	ings,	home	S,
City (5) MEDFORD						¥8	į.			e Feet	# of F	loors	283333	dg. Ag )0+	ge	
County (6) BURLINGTON			1100000		County C	ode (7) ISE ONLY)		_		nt Use (Prio IDENTIAL		g demolish	ned)	2/		
Name of Monitoring Firm		Building C	Owner (8)		ASCM	No.				tement Cont			ERVIC	ES	NC.	
Street Address 904 KINGS ARM D	RIVE								Addres	ss IS RUN						
City, State, Zip Code DOWNINGTOWN,	PA 1933	5								p Code HILL, NJ	08062					
Project Manager for Mor RICK PELLISSIER		n		- 1	Telephor 484-43	ne No. 32-9363			none No 304-4			License N 01145	lo.			
Start Date (10) 11/06/2014			Schedule 11/07/2		pletion [	Date (11)		Name EMS		A Monitor	-					
Occupancy Status Durin	g Abateme	nt (Chec	k Only On	e)				Street	Addres	SS					-	
Facility Closed/Vac Abatement Perform Other – Describe:	ned Outside	of Norm				3	_	City, S	state, Zi	30 NORTI ip Code NSON, N.		7				
Scope of Work (Check A	All That App	oly)				72-110								77		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			-	enova emoliti				2	Mir Glo	l Containme ni-Enclosure ovebag Proc n-Exempted	edure				a	
			le.	Locati	on			- No.	140	II Exempled	( ) and	140111110			ement	
Location Asbestos-Containing <u>TO BE AB</u> In Faci	g Material ( <u>ATED</u> ility	ACM)	Use Mai	lormali d Sole ntenar odial S (12)	ly ly by nce/		tos Conta thermal s surfac	system ing, VA	Material s insula \T, or		(Sp	nount pecify or LF)	Removal	Ty Repair	e Encapsulate	Enclosure
(13)			Yes	No	N/A		other m	iscella	neous)				\\ \text{\ti}\text{\ti}}\\ \tittt{\texi}\text{\text{\texi}\text{\text{\text{\texi}\tex{\text{\text{\texi}\text{\text{\texi}\text{\text{\texi}\ti	<del> </del>	ulate	ure
BASEM	ENT				Х		PIPE IN	ISUL	OITA	١	3	LF	Х			
Name of Registered Wa	ste Hauler			94 698	JDEP W		Cubic \			Name of I	Register	ed Landfi	II			
ASSURED ENVIRO	NMENT	AL SEF	RVICES		auler ID 034895		of Was		)	MINER'		NDFILL				
City, State MULLICA HILL, NJ			TW				11/07	2014		City, State			nte		*	
Completed by RON SWANSON			Title GEN	ERAL	_ MAN	AGER	100	igrlatur \/\/	al	LS	Lu		ate 0/26/2	2014		
ASB-41 (R-06-08)								* Do n	ot use	this form for	asbesto	os licensu	re exen	npted	activi	ties.



to Emergency to

· ·				(Pur	suant to	NJAC 8:	60 and 1	12:120	)	r=(	115	446	26	275105557				
Date of Notification (1) 10/27/14						Building O Monteiro					)[[	G	5		[5	Ţ	M	
Agencies Notified	Type No	otification		1100	treet Ad					111	nii					Ш	Ш	
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☑ DOH		nergency (including stification)	uding	N	ame of	Contact				1	ASE	Tele	ohone	Muni	ger &		+	
DCA DCA		ncellation		F	rank					<u> </u>	_				200			
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City (5) Manahawkin NJ 08	050								A C. L. C. L	uare F	eet	# of i	Floors	S	13366	dg. A	ge	
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Ocean						SE ONLY)		_		ome	,		3		7			
Name of Monitoring Firm	n Hired by	Building Ow	ner (8)		ASCM	No.		Name Pern				ntractor (	9)					
Street Address								Street	Add	iress				Silver State		-		
-1		35						PO E	Зох	329	-				1			
City, State, Zip Code								City, S Wes			Code NJ 080	91						
Project Manager for Mor	Zip Code nager for Monitoring Firm					ie No.		Teleph			820	T		nse No	).			
	er for Monitoring Firm							856-	A 1707017	00,000			007	27				
Start Date (10) .10/28/14			cheduled 0/31/14		pletion [	ate (11)		Name Sam		DSHA	Monitor							
Occupancy Status Durin	ng Abaten	nent (Check C	Only One	)				Street	Add	dress					*	0		
Facility Closed/Vac Abatement Perform Other – Describe:	ned Outsi	ing Entire Per de of Normal	iod of Al Facility	bateme Hours	ent		_	City, S	State	e, Zip (	Code							
Scope of Work (Check A	All That A	pply)											+		od III waa	-		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf				enovati emolitio						Mini-E	nclosur bag Pro						e	
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In Fac	ility		Custo	odial S (12)	taff?	(1.0.	surfac	ing, V	AT, o	or			or Li		Removal	Repair	Encapsulate	Enclosure
(13)	)		,, T		I		other m	iisceiia	neo	us)					val	=	ılate	ure
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Name of Registered Wa United Containers	aste Haule	er		H	JDEP W auler ID 2459		of Was			- 1	G.R.O	f Registe .W.S.	ieu L	anuilli.				
City, State							Dispos 10/31		е		City, Sta Morris	ite ville Nu	080	091			Serville	
Completed by			Title					ignatu	re					Da	te			
Anthony T Perna			Preis	dent					L	, 	~			P 1525	)/27:/	14		

\*Emergency\*

#### State of New Jersey NOTIFICATION OF ASSESTOS ABATEMENT

\ @		NOTE	CATION	ne of Ne I CF ASB	W Jarrey ESTOS ABATEM 8:68 and 12:120		NECE		E	1
Date of Notification (1)		(La	Name	of Buildin	g Owner/Operator	(2)				#
_10	127/14		1/2	NUSK	ino Imas	sawa II	1 521	<u> 3                                   </u>	1	#
Agencies Notified	Type Notificatio	n	Street	Address 1416	Palisade	Aven	ie			71
DEP DEP DEP	Amended Amendment	<b>4</b> .	City, S	tate Zip C	ode . i	UT H	- ACDES III	S'CON'S	IUE	X
☐ DOH	Emergency justification	<b>finchiding</b>	Name	NO.		04 0	Telephone Numb			
DCA	Cancellation		_		<b><u><u>å</u>Uhis</u></b>					
			FAC	LITE	ORMATION	Type of Facility	(A)			_
Name of Facility Whats	Abatement is Tak	ing Place (3)				☐ School (K-1)	2)			Cong Brown
Street Address	Palicad	a Mi	0 011	0		Other (Le., p	8 (Other than K-12 rivate & commercia	) il buildings		
1414 + 1416 City (5) . C (1	Yal: Sad	R AU	eau	ال	-	homes, etc. Square Feat	# of Floors	Bldg.		-
Mylon CH	-4 FL	12		SPORAL C	N FOTATE:	2463	for if being demolis		011	9
County (6) Huds	SOA		USE	ONEY)	r) (STATE	Home				
Name of Monitoring Flor		g Owner	ASCA	No.	Name of Abelian	rent Contractor (9	CIOL			entire setter
(8) Street Address	·	لنـــــــــــــــــــــــــــــــــــــ			Street Address		2			
					P.O. Go	ماتم				$\dashv$
City, State, Zip Code		Mark.			Brick	NT C	28223			_
Project Manager for Mo	milgring Firm	Te	lephone	No.	Telephone No.	-7499	Oll 96			i paralli di paralli d
Start Date (10)	4 IIU Sch	reduled Comp		te (11)	Name of OSHA	Vionitor				egadosti p
Occupancy Status Duri	pp Abatement (C	1013			Street Address					
IXI Facility Closed/Vaca	ated During Entire	Period of Abai	ment		City, State, Zip C	lando.			-	
Abatement Performe  Other - Describe:	ed Outside of North	nai radiliy No	uis 		City, State, Zip C					
Scope of Work (Check	all that apply)				☐Ful Con	ntainment with Ne	gative Pressure			
≥3 sfor≥3 lf ≥160 sfor≥260 lf		Remove			Mini-En	an Finnanium	m	22		
		ls Local		1	Non-Ex	empted (") and N	on-Friable Procedu	Abai	ment	
Location	of	Norma Used Sol	By	-	Description of			-	pe I	-
Ashestos-Containing TO BE ASA	Material (ACM)	Maintena Cuștod	liai i	Asbes (i.e.	dos Containing Ma , thermal systems i	initiation,	Amount (Specify	20 20	Errospeulate	E C
IN Facility (13)	ly	Staff (12)			surfacing, VAT, other miscellane	, of ous) ·	.SForLF)	Removal	peule	Enclosure
		Yes No	N/A						5	
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		+ +-	1X	ashes	No. of the last of	Mulatien.	300 St.	X	$\dagger$	
Name of Registered Wa	este Hader		NDEP	Waste	Cubic Yards	Name of Reg		C	, i promo	-
BILLY IND	ustries l	NC.	216C	12 m	Disposal Date	City, State	1. K.U.W	٠.১٠		_
City, States IN UV	NJ				11/3/19	City, delic	Y.A	_		
Eric Plau	KO I	Prest	105	1+	Signature	Nel	10/	27/1	1	
ELIC INTO	NO 1	PICAL	all	17		1/2.				

Date of Notification (1)	*			Name of B	Building (	Owner/Oper	ator (2)	O	The street					
Octo	ber 27, 2014					y Walk L	.L.C.	. 1 5	ECEIVE	<u> </u>				
Agencies Notified	Type Notification			Street Ad	dress			904						
EPA EPA	Initial		9	30 Kind	erkama	ack Rd.		2014	CT 29 PM	in: :	9			
DEP	Amended			City, State	e, Zip Co	de					J			
DOL	Amendment #		- F	River Ed	ge, NJ	07661		450	٠. آن	· bo	1			
□ DOH	Emergency (i	nciuaing		Name of	Contact			å	/ Telephone N	lumber	ĺ.			
DCA	Cancellation		K	Cevin Ma	artin			-	. معل					
				and the state of t		RMATION			_8	-		2		
Name of Facility Where	Abatement is Taking	Place (3)					Туре	of Facility (	4)					
100-104 Hudson Str	reet							School (K-1	2)					
Street Address						######################################			8 (Other than K	60				
100,102,104 Hudso	n St							Other (i.e. ; etc.)	orivate & comme	rcial bu	ıildi	ngs,	home	ıs,
City (5)	11 0t.		-					re Feet	# of Floors		Blo	ig. A	ae	
	201						oqua						9 -	
Hackensack, NJ 076 County (6)	001			County C	ode (7)		Curro	nt Use /Pri	or if being demol	lished)	_			
Service and the service of the servi				(STATE U			- Cuire	iii 036 (i ii						
Bergen	- Hind by Building C	VIII 10V		ASCM	Na	TN	ame of Aba	tomost Co	unknow	11				
Name of Monitoring Fire	m Hirea by Bullaing C	wher (8)			NO.									
AET				0021		1001	e MACK		.LC.					
Street Address			8				treet Addre							
222 Church Road						15	00 Kings	HWY N,	STE 209			-	_	
City, State, Zip Code						С	ity, State, Z	ip Code						
Bridgewater, NJ 088	307					Ch	nerry Hill,	NJ 0803	4	3				
Project Manager for Mo	nitoring Firm			Telephon	e No.	T	elephone N	0.	License	e No.				
Eric Houseknecht						(8	77) 759 -	MACK	00781					
Start Date (10)		Schedule	d Cor	npletion D	Date (11)	N	ame of OSI	HA Monitor				- 52		
11/8/1	14			12/31/14	4	Th	ne MACK	Group L	LC.					
Occupancy Status Duri		Only One		12.01.1			treet Addre							
53	3-73					15	00 Kinas	HWY N	STE 209					
	cated During Entire F med Outside of Norm						ity, State, Z				- 175			
Other - Describe:							nerry Hill,		1					
Scope of Work (Check	All That Apply)					Į CI	ierry riiii,	143 0003	7					
	All (Hat Apply)	N .		557			$\square$			_				
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· Asbestos-Containin		100	d Sole ntena	ely by		tos Contain	ing Materia		Amount	3	1		m	_
TO BE A		1000		Staff?	(i.e	. thermal sy		ation,	(Specify SF or LF)	2	0	Σ,	Encapsulate	Enclosure
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Name of Registered W			$\leftarrow$	NJ DEP W	acto	Cubic Ya			Registered Land					Ь.
Name of Registered W	asic naulei		- 14	Hauler ID		of Waste		14ame 0	registered call	-1111				
Newark Carting			450	)9		55	Cumber	land Co./ BFI	/ GR	OV	VS /	TRI	RF	
City, State						Disposal		City, Sta				Ð		
Newark, NJ	8					0.0000000000000000000000000000000000000	31/14 .		g / Imperial /	Morri	svi	le l	PΑ	
Completed by		Title				3303932	Pature//	10	3 /	Date		-1		
NEW CHILD AND CONTRACTOR STATE		Presid	ont.			5/2	1//		/  .	10/27	111			
Mike Cooper		riesiu	CIII					/		10121	1.7	20	- 10	

 $<sup>\</sup>mbox{\ensuremath{}^{\star}}$  Do not use this form for asbestos licensure exempted activities.

Date of Notification (1)		567863		Name of E	Building O	wner/C	Operator (2)	F (	I()(		/ =				
Octob	per 27, 2014	a Marena	N	igito Re	ealty/City	/ Wal	k L.L.C.								
Agencies Notified	Type Notification	n		Street Add	dress			<b>2814</b> G	CT 20	P	M IO.				
⊠ EPA	Initial		-	20.000	erkama		d				11 10	18			_
DEP	Amended			City, State	e, Zip Cod	le		450 E				~			
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□ DOH	justification			Name of	Contact			-	Pele	phot	hellign	nber			
DCA	Cancellation	on	K	evin Ma	artin										
N	At a second Tab	: Dia (2)		FACIL	ITY INFO	RMAT		ype of Facility (4	1)	DHE CO.	-				
Name of Facility Where		ing Place (3)					1,4								
100 & Garage E. Ka	nsas St.					_	-	School (K-1) Subchapter		r tha	n K-12	ά			
Street Address													ings,	home	з,
100 & Garage E. Ka	nsas St.						-	etc.)					100000		
City (5)							S	iquare Feet	# of	Floo	rs	BI	dg. A	ge	
Hackensack, NJ 076	301										12.1				
County (6)				County C	ode (7) SE ONLY)		C	Current Use (Prid		ā.		iea)			
Bergen										Gara	age				_
Name of Monitoring Firm	n Hired by Buildin	g Owner (8)		ASCM	No.		ACCOUNT ADDRESS	Abatement Con		(9)					
AET				0021				CK Group, L	LC.						
Street Address							Street Ad								
222 Church Road	State, Zip Code							ngs HWY N,	STE 2	209					
City, State, Zip Code	State, Zip Code gewater, NJ 08807						A STATE OF THE PARTY OF THE PAR	te, Zip Code							
Bridgewater, NJ 088	gewater, NJ 08807 ect Manager for Monitoring Firm							Hill, NJ 0803	4						
Project Manager for Mo	ect Manager for Monitoring Firm				e No.		Telephor				ense N	Ю.			
Eric Houseknecht					-1132	-	1 /	59 - MACK		007	81				
Start Date (10)		Schedule	ed Con	npletion D	ate (11)		Name of	OSHA Monitor							1
11/8/1	4			12/31/1	4			CK Group, L	LC.						
Occupancy Status Durin	ng Abatement (Ch	eck Only Or	e)				Street A								
Facility Closed/Vac								ngs HWY N,	STE 2	209			-terrene		
Abatement Perform		rmal Facility	Hours	5			City, Sta	te, Zip Code							
Other - Describe:						_	Cherry I	Hill, NJ 0803	4						
Scope of Work (Check /	All That Apply)														
≥3 sf or ≥3 lf			Renova				$\succeq$	Full Containm		Neg	ative f	Pressur	е		
≥160 sf or ≥260 lf			emoli	tion			-	Mini-Enclosure Glovebag Pro							
							$\times$	Non-Exempted		Non-	Friable	Proce	dure		
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Accepted Page 1 B			dont				Man!		/			)/27/1	4		
Mike Cooper		Presid	Jent			1		-/-			10	11 - 11	T		

<sup>\*</sup> Do not use this form for asbestos licensure exempted activities.

Date of Notification (1)				Name of	Building	Owner/O	perator (2	P) RE	CE.	IVE	T)		0.01		
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L DCA	Cancellation	1		Project	The second second	THE RESERVE THE PERSON NAMED IN					8,1		-		
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	merset ame of Monitoring Firm Hired by Building Owner (8 lava Environmental, Inc. reet Address Kilmer Drive ty, State, Zip Code lsborough, NJ 08844-3830 oject Manager for Monitoring Firm ward J. Bulava						Nama a	f Abatement Co	atrooto	Facilit	У				
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Scope of Work (Check	( All That Apply)	-					Cherry	Hill, NJ 0803	4						
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(1	3)		( /	1		other m	niscellane	ous)				Remova	Repair	Encapsulate	Enclosure
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Eroobold Cortogo	cohold Cortogo					of Was		DELL		15.11					
				222	33	Disper	10.3	BFI Imp	-	andfill					
	ounty (6)  merset lame of Monitoring Firm Hired by Building Owner (8)  Alava Environmental, Inc.  Itreet Address  Kilmer Drive ity, State, Zip Code Illsborough, NJ 08844-3830  roject Manager for Monitoring Firm Itward J. Bulava  tart Date (10)  Schedu  5/17/14  ccupancy Status During Abatement (Check Only Context)  Abatement Performed Outside of Normal Facility Other - Describe:  cope of Work (Check All That Apply)  ≥3 sf or ≥3 If ≥160 sf or ≥260 If  Location of  Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)  Yes  Bld 1003 Mechanical Room  Bld 1003 1st Fl. Bathroom  OCD Tunnel #1  OCD Basement A Building						sal Date	City, Stat		15400					
	DOH DCA    DOH DCA     Emergency (including justification)						/17/15	Imperial	, PA	15126	D-/-				
	reet Address 0/1001 Rt. 202 ty (5) ritan, NJ punty (6) merset ame of Monitoring Firm Hired by Building Owner lava Environmental, Inc. reet Address Kilmer Drive ty, State, Zip Code lsborough, NJ 08844-3830 oject Manager for Monitoring Firm ward J. Bulava art Date (10) Sche 5/17/14 ccupancy Status During Abatement (Check Only Abatement Performed Outside of Normal Fac Other - Describe: cope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf  Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)  Plant 1003 Mechanical Room Bld 1003 1st Fl. Bathroom OCD Tunnel #1 OCD Basement A Building Ime of Registered Waste Hauler ehold Cartage by, State ehold, NJ mpleted by Titl  Titl					5	ignature	19/-	1	-	Date				
wiichael Cooper		Presid	ent								10/2	4/14			

ASB-41 (R-06-08)

<sup>\*</sup> Do not use this form for asbestos licensure exempted activities.

Date of No	tification (1)				Name of	Building	Owner/	Operator (2)		1	01	EIV	- 1	)		
	Septer	mber 26, 2014		C	CD/PF	RD/J&J										
Agencies 1	Notified	Type Notification			Street Ad	ddress				2014 CC	700	Md C	in.	~		
⊠ EPA		Initial		9	20/100	1 Rt. 20	)2		well 1876 B	TE // 10	-	111	ıu-	< 1		
DEP		Amended			City, Sta	te, Zip Co	de			ASBES	Tr	( nn.	TO	0		
DOL		Amendment Emergency		—  F	Raritan,	NJ 088	69			81	ICE	NSIN	17	(UL		
□ DOH		justification)	incruding		Name of	Contact			15	Telep	ione	Numbel	<u>u</u>			
DCA		Cancellation		F		Manage										
Name of F	anilib. M/b ava	Abatamantia Talia	- Di (0		FACII	LITY INFO	DRMAT			(4)			_			
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OCD/PRI								-	School (K-		han I	V 12\				
Street Add									Subchapte Other (i.e.				ildin	igs,	home	es.
920/1001	Rt. 202				QQ.	М			etc.)							
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County (6)				4	County C	Code (7) (SE ONLY)	r	C	urrent Use (Pri							
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Street Add								Street Ad		075.00	•					
12 Kilmer									ngs HWY N,	STE 20	9					
City, State	Action - Management and								e, Zip Code	7.22						
	igh, NJ 08				T-1	- N-		_	lill, NJ 0803			- 11		_		
C1000000000000000000000000000000000000	nager for Mor	nitoring Firm			Telephor			Telephon				se No.				
Edward J Start Date			Schodule	-	08-874				9 - 5000 OSHA Monitor		781					
Start Date	500000000000000000000000000000000000000	4	Schedule					B0000 00 00000								
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	or≥3 If sf or≥260 If		Translation (	Renova Demolit				$\boxtimes$	Full Containm Mini-Enclosur		egativ	ve Press	ure			
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Completed			Title					Signature Signature	ייייייייייייייייייייייייייייייייייייייי	, FA 13	20	Date	-			
Michael C			Presid	ton+				Jan Jan	15/-			9/26/1	1			
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<sup>\*</sup> Do not use this form for asbestos licensure exempted activities.

Date of Notification (1)	) (4.200)			Name of	Building	Owner/Opera	tor (2)	5 1	DED12	ANA JIII				
Septe	EPA DEP DOL Amended Amendment #3 Emergency (including justification) Cancellation  e of Facility Where Abatement is Taking Place Diagnostic / Johnson & Johnson			Ortho D	iagnost	tic / Johnso	n & Jo	hnson						
Agencies Notified	September 03, 2014    cies Notified				ddress			A MANUFACTURE OF THE PARTY OF T						
⊠ EPA	Initial			920 / 10	001 Rou	ute 202, PC	Box 3	300						
DEP DEP	Amended	2	141	City, Sta	te, Zip C	ode		X	534 119					
⊠ DOF			_	Raritan,	NJ 088	869								
□ DOH		(including		Name of	Contact				Telepho	neNum	ber			
DCA	Cancellation			Project	Manage	er		9		_				
	WEEL LE			FACI	LITY INF	ORMATION				74 0	JU			
			)				Тур	e of Facility (4	1)					
The state of the s	Johnson & Johns	son	100000					School (K-1		14.40				
								Subchapter Other (i.e. p				linas	homo	es.
	202							etc.)						Section 1
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Raritan, NJ									3					
County (6)				County (	Code (7) USE ONLY	<b>'</b> )	Cur	rent Use (Pric	or if being de	emolishe	ed)			
Somerset									Fac	ility				
		Owner (8)		ASCN	1 No.	- Section		batement Con						
	ntal, Inc.							K Group, LI	LC.					
	eet Address Kilmer Drive y, State, Zip Code sborough, NJ 08844-3830					1	eet Addi							
12 Kilmer Drive	reet Address  0 / 1001 Route 202  by (5)  ritan, NJ  punty (6)  merset  are of Monitoring Firm Hired by Building Owner  ava Environmental, Inc.  reet Address  Kilmer Drive  by, State, Zip Code  sborough, NJ 08844-3830  oject Manager for Monitoring Firm  ward J. Bulava  art Date (10)  Scheen  5/17/14  ccupancy Status During Abatement (Check Only  Facility Closed/Vacated During Entire Period  Abatement Performed Outside of Normal Fac  Other - Describe:							s HWY N,	STE 209					
City, State, Zip Code	September 03, 2014  Jencies Notified Type Notification    EPA					4		Zip Code						
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Edward J. Bulava	oject Manager for Monitoring Firm ward J. Bulava				1-6207			- 5000	007	81				
The second secon	****	Schedule	ed Co	mpletion I				SHA Monitor						
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		nai Facility	Hou	rs		Library S		Zip Code						
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5-3	K All That Apply)													
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		Yes	No	N/A							=		6	(0
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				,	- 11	ttings & ast		pipe					-	+
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						asbesto	s nine		200	/f	X			
THE PARTY OF THE P	Name of Registered Waste Hauler				/aste	Cubic Yard			Registered I			_	4	4
	Translat Cortors				No.	of Waste			<del>.</del>					
Freehold Cartage				222	2.53	10.			erial Land	fill				
City, State						Disposal D		City, State						
Freehold, NJ						5/17		Imperial,	PA 1512					
Completed by	ritan, NJ punty (6) merset ame of Monitoring Firm Hired by Building Owner lava Environmental, Inc. reet Address Kilmer Drive ty, State, Zip Code lsborough, NJ 08844-3830 roject Manager for Monitoring Firm ward J. Bulava art Date (10) Scheen S/17/14 ccupancy Status During Abatement (Check Only Abatement Performed Outside of Normal Facility Closed/Vacated During Entire Period Abatement Performed Outside of Normal Facility Check All That Apply)  ≥3 sf or ≥3 If ≥160 sf or ≥260 If  Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)  Ye  Bld 1003 Mechanical Room Bld 1003 1st Fl. Bathroom OCD Tunnel #1  OCD Basement A Building ame of Registered Waste Hauler eehold Cartage ty, State eehold, NJ completed by Tittle Title Ti					Signa	ture	17/	0	Dat				
Michael Cooper		Presid	dent					/		9/3/	14			

<sup>\*</sup> Do not use this form for asbestos licensure exempted activities.

Date of Notification (1)				Name of	Building	Owner/Opera	ator (2)	NAME OF THE OWNER OWNE					-	
May 08, 2	2014		C	ortho Di	agnost	ic / Johnso	on & J	ohnson						
Agencies Notified . Type	Notification			Street Ad	Idress									
⊠ EPA ⊠	nitial		9	20 / 10	01 Rou	te 202, PC	Box	300						
DEP DEP	Amended			City, Stat	e, Zip Co	ode								
The state of the s	Amendment Emergency (	Remarks and the second state of	100	Raritan,	CONTRACT CONTRACTOR	369								
☑ DOH ☐ j	ustification)			Name of	Contact				Telephone	Number				
DCA L	Cancellation		F	roject l	No construction to the second									
Name of Facility Where Abatem	ent is Taking	Place /3	1	FACIL	ITY INF	ORMATION	T TV	pe of Facility (4						
			,				1 9	1						:0
Ortho Diagnostic / Johnson Street Address	1 & Johns	on						School (K-1)		K-12\				
											ıildin	gs, I	nome	es,
920 / 1001 Route 202							-	etc.)	T., (5)		511			21)
City (5)							So	quare Feet			Rid	ι. Ας	ge	4
Raritan, NJ			~	0	(7)					F 1 B		-		-3
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Somerset	his Distribution (	200000000000000000000000000000000000000		LACCIA	NI-			<u> </u>	THE RESERVE OF THE PARTY OF THE	З				
Name of Monitoring Firm Hired	222	Jwner (8)		ASCM	NO.			Abatement Con						JE:
Bulava Environmental, Inc	·			1				CK Group, LI	_C.			_		
Annual Marcola						145355	reet Add		OTE 000					nΑl
12 Kilmer Drive								gs HWY N,	STE 209					
City, State, Zip Code	120					V	50	e, Zip Code						
Hillsborough, NJ 08844-38 Project Manager for Monitoring	10100000			Telephon	o No		erry H lephone	lill, NJ 08034	Chicago de Constitución de Con	aa Na				
Edward J. Bulava				TO DOSE DE LA COLONIA		1,000			100000000000000000000000000000000000000					
Start Date (10)		Schedule		08-874	-			9 - 5000 OSHA Monitor	0078	l .				
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Facility Closed/Vacated Du Abatement Performed Out								gs rivvi iv, e, Zip Code	31L 209				-	
Other - Describe:								iill, NJ 08034	1					
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10		T		T				Non-Exempted	(*) and Non-Fri	a eing demolished) Facility  pr (9)  209  License No. 00781  209  tith Negative Pressure e ed Non-Friable Procedure Ab. Amount (Specify SF or LF)  35 If 26 773 I/f  tered Landfill  Landfill			mont	
		0.33	Locati Normal	555.00							12) cial buildings, ho Bldg. Age shed)  Pressure Pressure Abatem Type Removal Abatem Type Removal			
Location of Asbestos-Containing Materi	al (ACM)		d Sole	*	Achar	Descrip stos Containir		orial (ACM)	A mount			T	850	
TO BE ABATED	ai (AONI)		intena			thermal syst	-		(Specify	1 2	, .		Enc	Ē
In Facility		Cus	(12)	starr?		surfacing	, VAT,	or	SF or LF)	1	É		aps	Enclosure
(13)		-	-			other misce	ellaneo	us)		o Va	2	2	ulat	ure
		Yes	No	N/A									Ф	
Bld 1003 Mechanical	Room	$\times$			fit	tings & as	bestos	s pipe	35 If					
Bld 1003 1st Fl. Bath	room	sent #				fittir			26	5	2			
			/\		E:1	and the same of th				-	$\rightarrow$	+	83	
OCD Tunnel #1		$+ \wedge$		-	TIT	tings & as	bestos	s pipe	1/3 1/1	/		4		
Name of Registered Waste Hau	ler		1993	IJ DEP W lauler ID I		Cubic Yard	ds	Name of I	Registered Lar	ndfill				
Freehold Cartage				222:		8.	3	BFI Imne	erial Landfill					
City, State			-1	500 had bed .		Disposal D		City, State		5.25				$\dashv$
Freehold, NJ						5/17		CALCADA ALL CONTROL	PA 15126					
Completed by		Title					iture	1/7/	0	Date	- 17			
Michael Cooper		Presid	lent				12-1			5/8/14				

ASB-41 (R-06-08) \* Do not use this form for asbestos licensure exempted activities.

Date of Notification (1)				Name of	Building	Owner/0	Operator (2	2)	160	8					
	e 06, 2014			Ortho D	iagnosti	ic / Joh	nnson &	Johns	on						
Agencies Notified	Type Notification			Street Ad	ddress										
EPA	Initial		8				, PO Bo	x 300							
DEP DOL	Amended Amendment	<b>"</b> 1			te, Zip Co					111					
	Emergency (	including	— [F	Raritan,		369									
DOH	justification)			Name of						Telephone	Numbe	r			
☐ DCA	Cancellation		F	Project I		-					<b>-0</b>	0.05			
Name of Facility Where	Abatement is Takin	n Place (3	1	FACIL	LITY INF	ORMAT		Type of	Facility (4)				-		
200 Ann America		100	,				-		5 100						
Ortho Diagnostic / J Street Address	onnson & Johns	on							hool (K-12) behanter 8 (	Other than I	K-12)				
										ate & comm		uild	ings,	home	es,
920 / 1001 Route 20 City (5)	)2			+				etc		# af Elassa		Di	d - 0		
and the second s							1	Square	reet	# of Floors		ы	dg. A	(ge	
Raritan, NJ County (6)				County C	ada (7)			Current	Llee (Dries i	S haine dam	مانمامما				
					ISE ONLY,	,		Current	Use (Prior i	f being demo					
Somerset Name of Monitoring Fire	m Hirad by Building	Owner (9)		ASCM	No		Nome	f Abatan	mant Cantra	Facilit	У			-	
Elizabeth de la	A SAMPLE CAMPLE ASSOCIATION OF THE COMME	Owner (6)		ASCM	NO.		0.0000000000000000000000000000000000000		ment Contra	Sea. ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (					
Bulava Environment	al, Inc.							100000000000000000000000000000000000000	roup, LLC	<i>;</i> .		- 15:17	SSERVE		
The second Till the sales							Street A								
12 Kilmer Drive							the same of the same of the same of	The second second	WY N, S	E 209					
City, State, Zip Code	044 0000						City, Sta								
Hillsborough, NJ 08				Talaabaa	NI-			-	J 08034		. Ne				
Lancata and the same and the sa	mitoring Firm			Telephor			Telepho		200	Licens					
		Sahadula	-	908-874 mpletion [			(973) 7		Monitor	00781					
12 12		Schedule	eu Coi				0/2000/0816450								
		k Only Or	20)	5/17/15	)		Street A		roup, LLC	,					
KZ									MVN C	r= 200					
							City, Sta		WY N, S	E 209		-	_		
Other - Describe:		idi i domity	rioui				- 10 may								
Scope of Work (Check )	All That Apply)						Cherry	mill, IN	J 08034			_			
			•	10*****			1×	7							
		The state of the s	Renova Demoli					/	Containment Enclosure	with Negativ	ve Pres	sur	е		
							$\boxtimes$	Glove	bag Proced						
				-				Non-E	exempted (*)	and Non-Fria	able Pro			40-1000 (CO	_
		1.0	Locat	7.5										emen /pe	ī
			Norma ed Sole	0.05			escription of				-				
		Ma	intena	ince/			itaining Ma il systems			Amount (Specify		מ	S223	En	m
In Fac	ility	Cus	todial (12)	2007000000000	(,,,	surfa	acing, VAT	, or	,,	SF or LF)		Remova	Repair	Encapsulate	Enclosure
(13)	)		(1.2)	,		other	miscellane	eous)				evo	air	ulai	sure
		Yes	No	N/A										æ	
Bld 1003 Mech	anical Room	X			fit	tinas 8	& asbest	os pipe	a	35 lf		X			
		1/	V					00 p.p.		26		$\geq$			
		1	$\triangle$	4			fittings	8 72		200000	-	$\geq$		-	-
OCD Tur	nnel #1	$\rightarrow$			fit	tings 8	& asbest	os pipe	е	773 l/f	_ (	Ş			
OCD Basemer	nt A Building	X				asb	estos pi	ре		200 l/f		$\times$			
Name of Registered Wa	aste Hauler		1000	NJ DEP W Hauler ID			Yards		Name of Re	gistered Lan	dfill				
Eroobold Cortons	5/17/14  ccupancy Status During Abatement (Check Only Facility Closed/Vacated During Entire Period Abatement Performed Outside of Normal Fac Other - Describe:  ope of Work (Check All That Apply)  ≥3 sf or ≥3 If ≥160 sf or ≥260 If   Location of Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)  Bld 1003 Mechanical Room  Bld 1003 1st Fl. Bathroom  OCD Tunnel #1  OCD Basement A Building ame of Registered Waste Hauler  sehold Cartage by, State eehold, NJ completed by  Tit					of Wa		Б	Ellmas	ol Londell					
				222	55	Dieno	10.3 osal Date		City, State	al Landfill	-				
CC-0.1. • 10 CC-0.1.00							5/17/15			Δ 15106					
		Title				- 1	Signature	<u> </u>	nperial, P	7 10120	Date				
		1000000	tont				- Andrew	19	/		100000000000000000000000000000000000000	1			
iviiciaei Coopei		Presid	relif								6/6/14	+			

<sup>\*</sup> Do not use this form for asbestos licensure exempted activities.

Date of Notification (1)				Name of	Building	Owner/Op	perator	(2)	1	-EI	VE	`			
August 01, 2	2014			Ortho Di	iagnost	ic / Johr	nson a	(2) & Johnson ox 300	,	1	" L_ L	J			
	otification			Street Ad	ddress			2014	CCT	70 h					
⊠ EPA ☐ Init	tial		ç	920 / 10	01 Rou	ite 202,	РО В	ox 300		L 3 P	M 10:	21			
DEP An	nended	•		City, Stat	te, Zip Co	ode		ASB	5870				10.11		
DOL An	nendment #			Raritan,	NJ 088	369		å	I in	Elina	OTR	01			
	nergency (in stification)	nciuaing		Name of	Contact			53077	Te	ephone	Numbe	ır			
	ncellation		I	Project I	Manage	er			. 4	4	-				
				FACIL	ITY INF	ORMATIC	N		1738						
Name of Facility Where Abatemer			3)					Type of Facility	(4)						
Ortho Diagnostic / Johnson	& Johnson	on		147 140				School (K-							
Street Address					4			Subchapter Other (i.e.				uild	inac	home	20
920 / 1001 Route 202								etc.)	Dilvate	a commi	erciai b	ullu	iliys,	HOITIE	55,
City (5)			v					Square Feet	# 0	f Floors		В	dg. A	ge	
Raritan, NJ										3					
County (6)				County C				Current Use (Pri	or if be	ing dem	olished	)	- 1	17.15	
Somerset				(STATE U	ISE ONLY	,				Facilit	:y				
Name of Monitoring Firm Hired by	Building C	wner (8)		ASCM	No.	nam	Name	of Abatement Co	ntractor	(9)			96	id	118
Bulava Environmental, Inc.							The M	ACK Group, L	LC.						
Street Address		()X					Street	Address							
12 Kilmer Drive							1500	Kings HWY N,	STE	209					
City, State, Zip Code							City, S	State, Zip Code							
Hillsborough, NJ 08844-383							Cherr	y Hill, NJ 0803	4						
Project Manager for Monitoring Fi	oject Manager for Monitoring Firm						Telepl	none No.		Licens	se No.				
Edward J. Bulava							(973)	759 - 5000		00781	1				
Start Date (10)		Schedul	ed Cor	mpletion [	Date (11)		Name	of OSHA Monitor	S .						
5/17/14				5/17/15	5	-	The N	IACK Group, L	LC.						
Occupancy Status During Abatem	ent (Check	Only Or	ne)	311-731			Street	Address							
Facility Closed/Vacated Duri	ng Entire P	eriod of	Abate	ment		-	1500	Kings HWY N,	STE	209					
Abatement Performed Outsid	de of Norma	al Facility	/ Hour	s			City, S	State, Zip Code					200-10		
Other - Describe:		Walkington (1971)				(	Cherr	y Hill, NJ 0803	4						
Scope of Work (Check All That Ap	oply)														
≥3 sf or ≥3 lf			Renova	ation				Full Containm	ent witl	n Negati	ve Pres	sur	е		
≥160 sf or ≥260 lf			Demoli	ition				Mini-Enclosur							
								X Glovebag Pro X Non-Exempted		Non-Fri	able Pro	oceo	lure		
		10		tion										emen	t
l continue of		1.00	Locat Norma	2004									Ty	ре	
Location of Asbestos-Containing Material	(ACM)	100000000000000000000000000000000000000	ed Sole	2000	Asbes		scription ainina N	n of Material (ACM)	A	mount				m	
TO BE ABATED		100000	intena todial	ance/ Staff?		e. thermal	system	s insulation,	(	Specify		R	מ	nca	E
In Facility (13)		Ous	(12)			surfac other m	cing, VA		S	F or LF)		Remova	Repair	squ	Enclosure
(10)						other in	nocena	neous)				va l	air	Encapsulate	Пе
		Yes	No	N/A										30	
Bld 1003 Mechanical R	toom	X			fit	ttings &	asbes	stos pipe		35 If		$\times$			
Bld 1003 1st Fl. Bathro	X			f	ittings			26		$\times$					
OCD Tunnel #1		X			fit	ttings &	asbes	stos pipe	7	773 l/f		<			
OCD Basement A Buil	ding	X				asbe	estos	pipe	2	200 I/f		X			1575
Name of Registered Waste Haule			100	NJ DEP W		Cubic '	Yards	Name of		50/24/24/20 10/24/BILL	ndfill				
F			1	Hauler ID		of Was									
Freehold Cartage				222	53	F;	10.3	BFI Imp		.andfill	-				
City, State						- S	al Date	an 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1							
Freehold, NJ		-					/17/15	A CONTRACTOR OF THE PARTY OF TH	, PA ′	15126					
Completed by		Title	y			Sį	ignatur	17/	1		Date	20			
Michael Cooper	dent				- Aller				8/1/14	4					

NO CK

Date of Notification (1)					Name of Building O MERCK SHARP & D	wner/O	perator (2) CORP.	NECL	1 94 5	L			
10 / 28 /14	Street Address	_				-	-		-				
Agencies Notified Type No		-		-	126 E. LINCOLN AV	ENUE.	P.O. BOX	2000, RY28-4	14 8	4	22		
EPA Ini	tial Notifica nended No ncellation		tion	#1	City, State, Zip Code RAHWAY, NEW JEI		- 2000	SBEST	žuč.		R0!		
	Hold ERGENC	Y NO	TIFI	CATI	Name of Contact ON MARY BETH BAKER	₹		Telenimne'i	tuhibe	FIELD			
	ILITOLIVO	71 140			FACILITY INFORMATION	`		<u> </u>					
Name of Facility Where Abatement	is Taking	Plac	e (3)		ACIETY IN CHIMATION	Туре	of Facility	(4)					$\neg$
-							School (K-						
MERCK SHARP & DOHME CORPO	RATION					V		r 8 (Other tha			homo	o oto	
Street Address	-					X Sa	uare Feet	rivate & com		lugs.,		. Age	-
126 EAST LINCOLN AVENUE - BUIL	DING 82E	3					1,250	1				0+	
	ounty (6)				County Code (7)	1		or if being der	nolish	ed)			
Name of Monitoring Firm Hired by	NON Building (	Jume	or (2)		(STATE USE ONLY) ASCM No.	VAC	V-333500	nent Contrac	rtor (9	3)			
ENVIRONMETAL HEALTH INVESTI					17			MENTAL CO			N		
Street Address						100000000	et Address						
655 WEST SHORE TRAIL						_	SPOOK RC				-		
City, State, Zip Code SPART	A, NEW J	ERS	EY 0	7871			State, Zip C FERN, NEV	V YORK 1090	01				
Project Manager for Monitoring Firm	,		ATTENDED TO STATE OF		Number		ohone Numi			se Nu	ımber		
WILLIAM S. KERBEL, CIH			973-7	29-56	649	845-3	369-7500		1101				
Expected State Date (10)		che			tion Date (11)	100000000000000000000000000000000000000	e of OSHA		ikio		444	400	
10 / 13 /14 Month Day Year	1	Mor	10 nth	1	28 /14 Day Year	AME	RISCI LAB	ORATORIES	INC		#11	460	
Occupancy Status During Abatement	(Check on	ly on	e)			Stres	et Address						
X Facility Closed/Vacated D						117	EAST 30TH	STREET					
Abatement Performed Out  X Other - Describe: Monday					urs - Describe:	City.	State, Zip C	ode					
per disconsistential,	, ilaa, i		0.00					W YORK, NE	W YC	RK1	0016		
Scope of Work (Check all that apply)	[∇] le						t with Negat	ive Pressure					
Demolition >3SF OR LF	X_F	kenov	/ation		Mini-Enc Gloveba		edure						
X >160 SF OR 260 LF					X Non-Frial	-							
Location of			Locat		Description of A						batem	ent T	
Asbestos-containing			nally u		Containing Mater	AND THE PERSON	M)	Amoun		REMOVAL	REPAIR	ENCAPS	ENCLOS
Material (ACM) TO BE ABATED	1,		olely t		(ie. Thermal si		т	(Specifi SF or LF	5	Ò	AIF	AP	10
in Facility (13)			aff (1		or other miscell	77700			1	AL.	1~	SULE	SUI
	Y	'es	No	N/A			December 1				_	m	URE
ROOF				Х	PIPE INSULATION			75 LF		Х	_	_	
ROOF				Х	BUILT UP ROOF/FLASHI	NG		1,250 SF		Х			
											-	-	_
		-						-	-	-	-	-	
		-								-	-	<del>                                     </del>	
Name of Pagistore J Maste Harts		1100	P Wa	L	Cubic Varde of Masta	Non	e of Posiete	rod Landfill					$\vdash$
Name of Registered Waste Hauler FREEHOLD CARTAGE, INC.			r ID N		Cubic Yards of Waste 40			red Landfill UNTY RESO	URCE	MAI	NAGE	MENT	SER
825 HIGHWAY 33			15939			447	ALEXANDE	R DRIVE/RO					
City, State					Disposal Date	City,	Staffe	, PA 17752					,
FREEHOLD, NEW JERSEY Completed by (Print or Type)	Title			-	10/13-11/13/2014  Signature	VIVION	( Spivier)	, FA 17/52	Date		15	cl	ul
BENJAMIN SANCHEZ		TOR	OF	OPER	RATIONS /	1	0/)		_/	()	10	<u> </u>	

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) MERCK SHARP & DOHME CORP. Date of Notification (1) Street Address /14 126 E. LINCOLN AVENUE, P.O. BOX 2000, RY28-414 Agencies Notified Type Notification Initial Notification City, State, Zip Code FPA RAHWAY, NEW JERSEY 07065 DEP Amended Notification DOL Cancellation Name of Contact Telephone Number On Hold DOH **EMERGENCY NOTIFICATION** MARY BETH BAKER DCA FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Subchapter 8 (Other than K-12) MERCK SHARP & DOHME CORPORATION Other (ie. private & commcl. bldgs., homes, etc.) Bldg. Age # of Floors Square Feet Street Address 40+ 1,250 126 EAST LINCOLN AVENUE - BUILDING 82B County Code (7) Current Use (Prior if being demolished) County (6) City (5) UNION (STATE USE ONLY) VACANT RAHWAY Name of Monitoring Firm Hired by Building Owner (8) Name of Abatement Contractor (9) ASCM No. PAR ENVIRONMENTAL CORPORATION ENVIRONMETAL HEALTH INVESTIGATIONS, INC. 17 Street Address Street Address 313 SPOOK ROCK ROAD 655 WEST SHORE TRAIL City, State, Zip Code City, State, Zip Code SUFFERN, NEW YORK 10901 SPARTA, NEW JERSEY 07871 Telephone Number License Number Telephone Number Project Manager for Monitoring Firm 845-369-7500 1101 973-729-5649 WILLIAM S. KERBEL, CIH Name of OSHA Monitor Sched. Completion Date (11) Expected State Date (10) #11480 AMERISCI LABORATORIES INC 114 13 10 / 13 /14 11 / Year Month Year Day Day Street Address Occupancy Status During Abatement (Check only one) 117 EAST 30TH STREET X . Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe: City, State, Zip Code Other - Describe: Monday - Friday 7 AM - 3:30 PM NEW YORK, NEW YORK 10016 Scope of Work (Check all that apply) Full Containment with Negative Pressure Mini-Enclos, Demolition Renovation Glovebag Procedure >3SF OR LF Non-Friable Procedure >160 SF OR 260 LF Is Location Description of Asbestos-Abatement Type Location of ENCLOSURE Containing Material (ACM) Amount REPAIR ENCAPSULE Asbestos-containing normally used REMOVAL (Specify (ie. Thermal systems solely by Material (ACM) Maint/Custodial insulation, surfacing, VAT, SF or LF) TO BE ABATED or other miscellaneous) in Facility (13) Staff (12) Yes No N/A 75 LF X PIPE INSULATION ROOF 1,250 SF BUILT UP ROOF/FLASHING ROOF NJDEP Waste Name of Registered Landfill Cubic Yards of Waste Name of Registered Waste Hauler LYCOMING COUNTY RESOURCE MANAGEMENT SER Hauler ID No. FREEHOLD CARTAGE, INC. 447 ALEXANDER DRIVE/ROUTE 15 15939 825 HIGHWAY 33 City, State City, State Disposal Date 10/13-11/13/2014 MONTGOMERY, PA 17752 FREEHOLD, NEW JERSEY Date Completed by (Print or Type) Signature DIRECTOR OF OPERATIONS BENJAMIN SANCHEZ

State of New Jersey

NO CK

		Name of Building O			412		11/
Date of Notification (1)		MERCK SHARP & I	JOHNE CORP.	n.			- 4
10 / 28 /14		Street Address		€.ia	14 CO;	20	
Agencies Notified Type Notif	ication	126 E. LINCOLN AV	/ENUE, P.O. BOX 2000, R	Y28-414		٠٦,	AH A
DEP x Ame	I Notification  anded Notification #63  cellation	City, State, Zip Code RAHWAY, NEW JE		<b>শ</b> ১,	EST & LIC	Fun	A
X: DOH On H		Name of Contact ON MARY BETH BAKE		none Numbe		<u> </u>	NG
		ACILITY INFORMATION					
Name of Facility Where Abatement is	Taking Place (3)		Type of Facility (4)				l
MERCK SHARP & DOHME CORPORA	ATION		School (K-12) Subchapter 8 (Oth X Other (ie. private 8			nes etc	,
Street Address				of Floors		dg. Age	
126 EAST LINCOLN AVENUE - EXTE	RIOR PIPE RACK		n/a	n/a	C-84	n/a	
City (5) Cou	nty (6)	County Code (7) (STATE USE ONLY)	Current Use (Prior if beil VACANT	ng demolish	ed)		
Name of Monitoring Firm Hired by Bi		ASCM No.	Name of Abatement Co	ontractor (9	))		
ENVIRONMETAL HEALTH INVESTIG		17	PAR ENVIRONMENTA				
Street Address			Street Address				
655 WEST SHORE TRAIL			313 SPOOK ROCK RO	AD			
City, State, Zip Code	, NEW JERSEY 07871		City, State, Zip Code SUFFERN, NEW YORK	K 10901			
Project Manager for Monitoring Firm	Telephone	Number	Telephone Number		se Numb	er	
WILLIAM S. KERBEL, CIH	973-729-56	549	845-369-7500	1101			
Expected State Date (10)	Sched, Complet	tion Date (11)	Name of OSHA Monitor				
9/ 2 /14	10 /	28 /14	AMERISCI LABORATO	ORIES INC	#1	11480	
Month Day Year Occupancy Status During Abatement (Control of the Control of the C	Month	Day Year	Street Address				-
X Facility Closed/Vacated Dur		ement	117 EAST 30TH STRE	ET			
Abatement Performed Outsi	de of Normal Facility Hou						
X Other - Describe: Monday -	Friday 7 AM - 3:30 PM		City, State, Zip Code	K, NEW YO	DV 1001	6	
Scope of Work (Check all that apply)		Full Cor	itainment with Negative Pres		1111 1001	U	- 1
Demolition	Renovation	Mini-En		T.T. 21/1.24			
>3SF OR LF × >160 SF OR 260 LF			ag Procedure able Procedure				
	Is Location	Description of			Δhate	ement T	vne
Location of Asbestos-containing	normally used	Containing Mate		Amount			-
Material (ACM)	solely by	(ie. Thermal	1821 17	Specify	REMOVAL	ENCAPS	ENCLOS
TO BE ABATED	Maint/Custodial	insulation, surfa	cing, VAT, SI	F or LF)	OX R	PS	SO
in Facility (13)	Staff (12)	or other misce	llaneous)		-	ULE	URE
	Yes No N/A				$\vdash$	1111	<del>                                      </del>
Exterior Pipe Rack System	X	Pipe Insulation	2,300	Ln. Ft.	X	+	-
						+-	$\vdash$
						1	
						+-	+
					$\vdash$	-	+
						+	$\dagger$
		74					
Name of Registered Waste Hauler	NJDEP Waste	Cubic Yards of Waste	Name of Registered Lar LYCOMING COUNTY	ndfill DESOUDOR	= MANAC	ZEVVEVI.	TSEP
FREEHOLD CARTAGE, INC. 825 HIGHWAY 33	Hauler ID No. 15939	120	447 ALEXANDER DRIV			>LIVICIN	JER
City, State	1 10505	Disposal Date	Leity State				
FREEHOLD, NEW JERSEY		9/02/2014-11/15/2014	MONTO MERY, PA 1		1/2	_/.	,
Completed by (Print or Type) BENJAMIN SANCHEZ	Title DIRECTOR OF OPER	Signature Signature	M	Date	1/2	8//	41

# State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Name of Building Owner/Operator (2)

Date of Notification (1)		1			OHME CORP.	1						
8 /	28 /14		1	Street Add	iress				-			
Agencies Notified	Type Notificati	on		126 E. LIN	ICOLN AVE	ENUE, P.O. BOX	2000, RY28-4	414				
EPA DEP X DOL		tification d Notification #	2002		, Zip Code , NEW JER	SEY 07065						
X DOH	On Hold			Name of C	Contact		Telephone	Numbe	er			
DCA	EMERG	ENCY NOTIFIC	CATION	MARY BE	TH BAKER		1	<del>0</del> 1				
11 5 112 100	41 1 7	DI (8)	FACILI	TY INFOR	MATION	T						
Name of Facility Where	Abatement is 1a	king Place (3)				Type of Facility School (K	501.0000					
MERCK SHARP & DOH	ME CORPORATION	N					er 8 (Other th	an K-1	2)			
WENOROHANI & BOTH	VIE GOIN ONATIO	J. (*)					private & com		25 (50)	home	s, etc	.)
Street Address 126 EAST LINCOLN AV	ENUE - EXTERIO	R PIPE RACK				Square Feet n/a	# of Flo	ors		1000	j. Age n/a	
City (5)	County	(6)	1	County C	ode (7)	Current Use (Pr	rior if being de	molish	ned)			
RAHWAY	иоіип		(S:	TATE US		VACANT						
Name of Monitoring Fir ENVIRONMETAL HEAL				) A	SCM No. 17	Name of Abate			SP TO SERVICE	NI.		
Street Address	III III VESTIGATI	0140, 1140.				Street Address	IVILIVIAL CC	MI-OF	AIIC	/1 N		
655 WEST SHORE TRA	IL					313 SPOOK RO						
City, State, Zip Code	CDASTA LI	\A\  ED0E\\ 07	074			City, State, Zip		04				
Project Manager for Moni	HER SELECTION OF THE S	W JERSEY 07	8/1 none Numbe	er .		SUFFERN, NET			nse Nu	ımber		
WILLIAM S. KERBEL, C		Land of the land	29-5649	200		845-369-7500		1101				
Expected State Date (10		Sched. Con	Charles and Charles	ite (11)		Name of OSHA	Monitor	1.101	-			
9 /	2 /14	11 /		15	/14	AMERISCI LAE		SINC		#11	480	
Month Day Occupancy Status During		Month	Da	У	Year	Street Address						
X Facility Close Abatement Pe X Other - Descr	d/Vacated During I erformed Outside o ibe: Monday - Frida	Entire Period of of Normal Facility	y Hours - De	escribe:	K.	City, State, Zip	Code W YORK, NE		ORK 1	0016		2
Scope of Work (Check al Demolition >3SF OR LF x >160 SF OR	that apply)	Renovation	-	X	Mini-Enclo	ninment with Nega os, g Procedure le Procedure	tive Pressure					60
Location Asbestos-co Material (A TO BE AB in Facility	ntaining ACM) ATED	Is Location normally used solely by Maint/Custon Staff (12)	sed / odial	Conta (ie. insula	ription of As ining Materi Thermal sy tion, surfaci her miscella	al (ACM) stems ng, VAT,	Amour (Speci SF or L	fy	REMOVAL	REPAIR	ent ENCAPSULE	e ENCLOSURE
Exterior Pipe Rack System	m	Х	Pipe Ir	sulation			2,300 Ln. F	t.	Х			F
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Name of Registered Was FREEHOLD CARTAGE, 825 HIGHWAY 33		NJDEP Was Hauler ID No 15939	o.	Yards of \		Name of Regist LYCOMING CO 447 ALEXANDE	DUNTY RESC			NAGE	MENT	SE
City, State FREEHOLD, NEW JERS Completed by (Print or Ty		le		sal Date 014-11/15 ISign	5/2014 nature	City, State	Y , PA 17752	Date		1	_/	<u>,                                    </u>
BENJAMIN SANCHEZ		RECTOR OF O	PERATION		1	788			8	12	8/	1

			- (1	ui Suui		o of Duilding (	Owner/Operator (2)					S	
Date of Notification (1)					1	_	DOHME CORP.						l
8 / 8	/14				Stree	t Address							$\neg$
	oe Notification		5 9 1 000				/ENUE, P.O. BOX 2	2000. RY28-4	14				
EPA DEP	Initial Notifi Amended		ation			State, Zip Code WAY, NEW JE							1
X DOL	Cancellation		ation		liva.	*****							
X DOH x	On Hold 7	7411790			Nam	e of Contact		Telephone N	lumbe	г			
DCA	EMERGE	NCY N	OTIFI	CATIC	ON MAR	Y BETH BAKE	R	A	_				
				F	ACILITY IN	NFORMATION							
Name of Facility Where Abate	ment is Takir	ng Pla	ce (3)				Type of Facility						
	9						School (K-						1
MERCK SHARP & DOHME CO	RPORATION	l						er 8 (Other tha		07,500			, [
Charles Address of							X Other (ie.   Square Feet	orivate & com		iags.,		Age	
Street Address 126 EAST LINCOLN AVENUE	EYTERIOR	DIDE	PACK				n/a	n/a	JIS			/a	
City (5)	County (6		CACIC		Cour	nty Code (7)	Current Use (Pr		molish	ed)			$\dashv$
RAHWAY	UNION	,				E USE ONLY)	VACANT	or it being de	TTO IOT	cuj			
Name of Monitoring Firm Hire	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	a Own	er (8)		(0.77)	ASCM No.		ment Contra	ctor (S	9)			
ENVIRONMETAL HEALTH INV		-				17	PAR ENVIRON				N		1
Street Address							Street Address				0.00	RAI ROSSON	
655 WEST SHORE TRAIL							313 SPOOK RO						
City, State, Zip Code							City, State, Zip (						
	PARTA, NEV	/ JERS			N		SUFFERN, NEV			se Nu	mhor		-
Project Manager for Monitoring f	-irm		1 '		Number		Telephone Num	per		ise ivu	irribei		
WILLIAM S. KERBEL, CIH		10.1		729-56		441	845-369-7500	Manitas	1101				
Expected State Date (10)	14.4	Sche	ed. Co		ion Date (1		Name of OSHA AMERISCI LAB		SINC		#11	180	
8 / 11 Month Day	/14 Year	Mo	onth	1	Day	Year		ONATONIES	) IIVO		n i i	100	
Occupancy Status During Abate							Street Address						
X Facility Closed/Vaca	ted During Er	itire Pe	riod o	f Abate	ement		117 EAST 30TH	H STREET				2	
Abatement Performe					ırs - Descri	ibe: "							
X Other - Describe: Mo	onday - Friday	7 AM	- 3:30	PM			City, State, Zip	Code W YORK, NE	=W VC	DIZ 1	0016		
Same of Work (Chook all that a	nnly)					Full Cor	ntainment with Nega			ואאנ	0010		
Scope of Work (Check all that a Demolition	ppiy)	Reno	vation			Mini-En		iive i ressure					
>3SF OR LF	L	1,,6,,6	, union				ag Procedure						
x >160 SF OR 26	0 LF				223	Non-Fri	able Procedure						
Location of		Is	Locat	ion		Description of	Asbestos-			A	batem		
Asbestos-containing	ng e	nor	mally	used		Containing Mate	erial (ACM)	Amou	nt	RE	RE	ENCAP	ENCLO:
Material (ACM)		1	solely I	(20)		(ie. Thermal	C. C.	(Speci		REMOV	REPAIR	CA	5
TO BE ABATED		1	nt/Cus		j	insulation, surfa	0.	SF or L	.F)	VAL	R	PS	SC
in Facility (13)		Yes	staff (1	2) N/A		or other misce	ellaneous)			-		SULE	SURE
		ies	INO	IN/A				+				1.7	1111
Exterior Pipe Rack System		X			Pipe Insul	ation		2,300 Ln. F	t.	X	-		
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Name of Registered Waste Hau	ıler	NJD	EP W	aste	Cubic Yar	ds of Waste	Name of Regist	ered Landfill		-			
FREEHOLD CARTAGE, INC.		_	er ID			120	LYCOMING CO	DUNTY RESC			NAGE	MEN.	SER
825 HIGHWAY 33			1593	9			447 ALEXAND			15			
City, State					Disposal [		City, State	· D. 1			126		
FREEHOLD, NEW JERSEY	1 menu				18/11/2014	-11/15/2014	INCH GOMER	Y , PA 17/52	Date		1	-/-	,/
Completed by (Print or Type) BENJAMIN SANCHEZ	Title		ROF	OPER	RATIONS	Signature	711		Date	X	18	-//	4
DENOAMIN SANCHEZ	JUIN	LOTO	I OF	OLE	ATIONS		100			-		/	

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) MERCK SHARP & DOHME CORP. Date of Notification (1) Street Address 114 7 25 126 E. LINCOLN AVENUE, P.O. BOX 2000, RY28-414 Agencies Notified Type Notification Initial Notification City, State, Zip Code EPA RAHWAY, NEW JERSEY 07065 DEP Amended Notification Cancellation DOL Telenhone Nu-DOH On Hold Name of Contact **EMERGENCY NOTIFICATION** DCA MARY BETH BAKER FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) MERCK SHARP & DOHME CORPORATION Other (ie. private & commcl. bldgs., homes, etc.) # of Floors Bldg. Age Street Address Square Feet 126 EAST LINCOLN AVENUE - EXTERIOR PIPE RACK n/a n/a n/a City (5) County (6) County Code (7) Current Use (Prior if being demolished) UNION RAHWAY (STATE USE ONLY) VACANT Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) ENVIRONMETAL HEALTH INVESTIGATIONS, INC. PAR ENVIRONMENTAL CORPORATION 17 Street Address Street Address 313 SPOOK ROCK ROAD 655 WEST SHORE TRAIL City, State, Zip Code City, State, Zip Code SPARTA NEW JERSEY 07871 SUFFERN, NEW YORK 10901 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number WILLIAM S. KERBEL, CIH 973-729-5649 845-369-7500 1101 Expected State Date (10) Name of OSHA Monitor Sched. Completion Date (11) 11 114 11 / 15 /14 AMERISCI LABORATORIES INC #11480 Month Day Year Month Day Year Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 117 EAST 30TH STREET Abatement Performed Outside of Normal Facility Hours - Describe: Other - Describe: Monday - Friday 7 AM - 3:30 PM City, State, Zip Code NEW YORK, NEW YORK 10016 Scope of Work (Check all that apply) Full Containment with Negative Pressure Demolition ⋉ Renovation Mini-Enclos, >3SF OR LF Glovebag Procedure >160 SF OR Non-Friable Procedure 260 LF Is Location Abatement Type Location of Description of Asbestos-Asbestos-containing normally used Containing Material (ACM) Amount ENCAPSULE ENCLOSURE REPAIR REMOVAL Material (ACM) solely by (ie. Thermal systems (Specify TO BE ABATED Maint/Custodial insulation, surfacing, VAT, SF or LF) in Facility (13) Staff (12) or other miscellaneous) Yes No N/A Pipe Insulation 2,300 Ln. Ft. Exterior Pipe Rack System Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Waste Name of Registered Landfill LYCOMING COUNTY RESOURCE MANAGEMENT SER FREEHOLD CARTAGE, INC. Hauler ID No. 120 447 ALEXANDER DRIVE/ROUTE 15 825 HIGHWAY 33 15939 City, State Disposal Date City, State MONTGOMERY , PA 17752 FREEHOLD, NEW JERSEY 8/11/2014-11/15/2014 Completed by (Print or Type) Date

DIRECTOR OF OPERATIONS

BENJAMIN SANCHEZ

State of New Jersey

(1/2617)

	(1 0.50	Name of Building O		<del>-</del>	-11	1 6	15 8	702
Date of Notification (1)		Name of Building O MERCK SHARP & D				A free	1	ED
10 / 28 /14		Street Address		6	14 100	20	227	
Agencies Notified Type Not	fication	126 E. LINCOLN AV	ENUE, P.O. BOX 200	00, RY28-4	14	29	AH	1: 3
DEP X Ame	al Notification ended Notification #2 ncellation	City, State, Zip Code RAHWAY, NEW JEI			& LIC	EN.	SIR	[RO
The second secon	Hold ERGENCY NOTIFICAT	Name of Contact TION MIKE LATRONICA	11	elo-	, , , , , , , , , , , , , , , , , , ,			
		FACILITY INFORMATION						
Name of Facility Where Abatement i	s Taking Place (3)		Type of Facility (4	200				
MERCK SHARP & DOHME CORPOR	ATION		School (K-12 Subchapter 8 X Other (ie. priv	Other tha		hom	es etc	2)
Street Address	·		Square Feet	# of Floor			. Age	
126 EAST LINCOLN AVENUE - BUILD	DING 97 COMPLEX, B		44,622	3		4	16	
City (5) Cot RAHWAY UNI	unty (6) ION	County Code (7) (STATE USE ONLY)	Current Use (Prior VACANT	if being der	nolished)			
Name of Monitoring Firm Hired by B	uilding Owner (8)	ASCM No.	Name of Abateme	ent Contrac	ctor (9)			
ENVIRONMETAL HEALTH INVESTIG	SATIONS, INC.	17	PAR ENVIRONME	ENTAL COF	RPORATI	ON	f	
Street Address 655 WEST SHORE TRAIL			Street Address	KDOAD				
City, State, Zip Code		*	313 SPOOK ROCI	The state of the s			-	
	A, NEW JERSEY 07871		SUFFERN, NEW		)1			1
Project Manager for Monitoring Firm	Telephon	e Number	Telephone Number	r L	icense N	umber		
WILLIAM S. KERBEL, CIH	973-729-	5649	845-369-7500	1	1101			
Expected State Date (10)	Sched. Compl		Name of OSHA Mo		Na over	2000		
5 / 19 /14 Month Day Year	Month	30 /15 Day Year	AMERISCI LABOR	RATORIES	INC	#1	1480	
Occupancy Status During Abatement (  X Facility Closed/Vacated During Abatement Performed Outside Scope of Work (Check all that apply)  X Demolition  >3SF OR LF  X >160 SF OR 260 LF	ring Entire Period of Aba	ours - Describe: 30 PM  X Full Cont X Mini-Encl X Glovebag	ainment with Negative	de YORK, NEV	W YORK	10016		
	1-1-6-			···	1 .	h = h = ===	T	
Location of Asbestos-containing Material (ACM) TO BE ABATED in Facility (13)	Is Location normally used solely by Maint/Custodia Staff (12) Yes No N/A	(ie. Thermal sy insulation, surfactor or other miscell	ial (ACM) /stems ing, VAT,	Amount (Specify SF or LF	REMO	REPAIR	encapsule	e ENCLOSURE
BLDG. 97	x	PIPE INSULATION	1	,080 LF	X			
BLDG 97 B 1ST FLOOR	x	PIPE INSULATION	1	2 LF	х			
BLDG. 97 A-THROUGHOUT	x	PIPE INSULATION	2	,950 LF	×			
BLDG 97-3RD FLOOR	x	VAT & MASTIC	1	,015 SF	X			
BLDG 97 -FIRST FLOOR	X	MASTIC ON TANK INSUL	ATION SEAMS 3	45 SF				
COMPLEX 97A-THROUGHOUT	X	MASTIC ON TANK INSUL	ATION SEAMS 1	,030 SF	Х			
COMPLEX 97-ROOF	x	DUCT INSULATION	2	70 SF	X			
COMPLEX 97-ROOF	X	BUILT UP ROOF FLASHII	NG 7	,500 SF	×			
BLDG 97 B ROOF	x	ROOF FLASHING	1	,450 SF	Х			
BLDG 97 SOUTH STAIRS	l x	FIRE DOORS (6)	1	20 SF	X			
BLDG. 97 A -3RD FLOOR	x	DUCT FLANGE CAULK	7	SF	X			
Name of Registered Waste Hauler FREEHOLD CARTAGE, INC. 825 HIGHWAY 33	NJDEP Waste Hauler ID No. 15939	Cubic Yards of Waste 120	Name of Registered LYCOMING COUNTY 447 ALEXANDER	d Landfill NTY RESOL	URCE MA	NAGI	EMEN	TSEF
City, State		Disposal Date	City, State					
FREEHOLD, NEW JERSEY		5/27/14-6/15/14	MONTOOMERY,				1.	$\mathcal{L}$
Completed by (Print or Type) BENJAMIN SANCHEZ	Title DIRECTOR OF OPE	RATIONS Signature	<del>/</del> //		Pate /	28	//	1

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) MERCK SHARP & DOHME CORP. RECEIVED Date of Notification (1) Street Address 30 /14 Type Notification 126 E. LINCOLN AVENUE, P.O. BOX 2000; RY28-414 Agencies Notified Initial Notification City, State, Zip Code **EPA** RAHWAY, NEW JERSEY 07065 ASBEST DEP Amended Notification #1 Cancellation DOL a Telephone Number Name of Contact DOH On Hold DCA **EMERGENCY NOTIFICATION** MIKE LATRONICA FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) MERCK SHARP & DOHME CORPORATION Subchapter 8 (Other than K-12) Other (ie. private & commol. bldgs., homes, etc.) Square Feet # of Floors Bldg. Age Street Address 126 EAST LINCOLN AVENUE - BUILDING 97 COMPLEX, BLDG 97, 97A,97B 44,622 46 County Code (7) Current Use (Prior if being demolished) City (5) County (6) RAHWAY UNION (STATE USE ONLY) VACANT Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) PAR ENVIRONMENTAL CORPORATION ENVIRONMETAL HEALTH INVESTIGATIONS, INC. 17 Street Address Street Address 655 WEST SHORE TRAIL 313 SPOOK ROCK ROAD City, State, Zip Code City, State, Zip Code SUFFERN, NEW YORK 10901 SPARTA, NEW JERSEY 07871 License Number Project Manager for Monitoring Firm Telephone Number Telephone Number WILLIAM S. KERBEL, CIH 973-729-5649 845-369-7500 1101 Name of OSHA Monitor Expected State Date (10) Sched, Completion Date (11) #11480 /14 AMERISCI LABORATORIES INC 5 / 114 10 / Year Month Day Year Month Day Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 117 EAST 30TH STREET Abatement Performed Outside of Normal Facility Hours - Describe: MONDAY-FRIDAY 7AM-3:30 PM City, State, Zip Code Other - Describe: NEW YORK, NEW YORK 10016 Scope of Work (Check all that apply) Full Containment with Negative Pressure Demolition Renovation Mini-Enclos. >3SF OR LF X Glovebag Procedure Non-Friable Procedure >160 SF OR 260 LF Abatement Type Location of Is Location Description of Asbestos-ENCAPSULE ENCLOSURE Containing Material (ACM) Amount normally used Asbestos-containing REPAIR REMOVAL (ie. Thermal systems (Specify solely by Material (ACM) SF or LF) Maint/Custodial insulation, surfacing, VAT, TO BE ABATED Staff (12) or other miscellaneous) in Facility (13) Yes No N/A **BLDG. 97** PIPE INSULATION 1.080 LF X PIPE INSULATION 12 LF X BLDG 97 B 1ST FLOOR X BLDG. 97 A-THROUGHOUT X PIPE INSULATION 2,950 LF X 1,015 SF BLDG 97-3RD FLOOR VAT & MASTIC Χ BLDG 97 -FIRST FLOOR MASTIC ON TANK INSULATION SEAMS 345 X X 1,030 SF MASTIC ON TANK INSULATION SEAMS COMPLEX 97A-THROUGHOUT X X DUCT INSULATION 270 COMPLEX 97-ROOF X 7.500 SF X BUILT UP ROOF FLASHING COMPLEX 97-ROOF X BLDG 97 B ROOF ROOF FLASHING 1,450 SF **BLDG 97 SOUTH STAIRS** X FIRE DOORS (6) 120 SF X BLDG, 97 A -3RD FLOOR X DUCT FLANGE CAULK SF X Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Waste Name of Registered Landfill LYCOMING COUNTY RESOURCE MANAGEMENT SEL 120 FREEHOLD CARTAGE, INC. Hauler ID No. 447 ALEXANDER DRIVE/ROUTE 15 825 HIGHWAY 33 15939 City, State Disposal Date City State NAGOMERY, PA 17752

5/27/14-6/15/14

DIRECTOR OF OPERATIONS

Signature

Date/

FREEHOLD, NEW JERSEY

Completed by (Print or Type) BENJAMIN SANCHEZ

Date of Notification (1)			- AUTO 08500	e of Building Ov CK SHARP & DO		tor (2) P. RE		11/		)	
5 / 2 /14				et Address						-	
Agencies Notified Type Noti	fication		126	E. LINCOLN AVE	NUE, P.O.	BOX 2000, RY28	4140	fi t	٠.	27	
DEP Ame	al Notification ended Notification acellation		City,	State, Zip Code WAY, NEW JER					n i F	÷ (-	
X DOH On	Hold ERGENCY NOTIF	FICATI	100000000000000000000000000000000000000	e of Contact E LATRONICA		Telephon	. , .,	ars 1	NG	, [ F f	All San
		F	ACILITY IN	IFORMATION				+			
Name of Facility Where Abatement i	s Taking Place (3	5)			Type of F					A	College
MERCK SHARP & DOHME CORPOR	ATION				Subo	ool (K-12) chapter 8 (Other l er (ie. private & co			hom	nes et	tc )
Street Address 126 EAST LINCOLN AVENUE - BUILE	DING 97 COMPL	EX, BL	.DG 97, 97 <i>A</i>	97B	Square 44,62	Feet # of Fl			Bldg	g. Age 46	
	inty (6)		1	nty Code (7)	Current Us	se (Prior if being	demolish	ned)			
	ION		(STAT	E USE ONLY)	VACANT						
Name of Monitoring Firm Hired by B ENVIRONMETAL HEALTH INVESTIG		)		ASCM No.		Abatement Cont IRONMENTAL C			ON		
Street Address	, (1701to, 11to)			L	Street Add		OIN OI	VALI	OIV		
655 WEST SHORE TRAIL						OK ROCK ROAD			- 1		
City, State, Zip Code	NEW JERSEY	17871				, Zip Code I, NEW YORK 10	0001				
Project Manager for Monitoring Firm			Number		Telephone		Licens	se No	ımber		
WILLIAM S. KERBEL, CIH		729-5			845-369-7	500	1101				
Expected State Date (10)			tion Date (			SHA Monitor			7502		
5 / 19 /14 Month Day Year	Month	) /	30 Day	/14 Year	AMERISC	I LABORATORIE	S INC		#1	1480	
Occupancy Status During Abatement (IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	ring Entire Period	lity Ho	urs - Descri	be:		ress 30TH STREET , Zip Code			2023		
Scope of Work (Check all that apply)    X	Renovation	n		X Mini-Enclo	٤,	NEW YORK, N Negative Pressur		RK 1	10016		
Location of	Is Loca			Description of As				Α	batem	ent T	
Asbestos-containing	normally			Containing Materia		Amou	unt	RE	RE	EN	ENCLOS
Material (ACM) TO BE ABATED	solely Maint/Cus		l i	ie. Thermal sys nsulation, surfacion		(Spec	IF)	REMOVAL	REPAIR	ENCAPS	16
in Facility (13)	Staff (	12)		or other miscella	. 51	100	- /	AL.	~	SULE	SURE
	Yes No	N/A							_	m	m
BLDG. 97		X	PIPE INSL	JLATION		1,080 LF		X			
BLDG 97 B 1ST FLOOR		х	PIPE INSU	JLATION		12 LF		X			
BLDG. 97 A-THROUGHOUT		x	PIPE INSU	JLATION		2,950 LF		X			
BLDG 97-3RD FLOOR		X	VAT & MA	STIC		1,015 SF		X			
BLDG 97 -FIRST FLOOR		x	MASTIC O	N TANK INSULA	TION SEA	MS 345 SF				Π	
COMPLEX 97A-THROUGHOUT		X	MASTIC O	N TANK INSULA	TION SEA	VIS 1,030 SF		X			
COMPLEX 97-ROOF		X	DUCT INS	ULATION		270 SF		X			
COMPLEX 97-ROOF		X	BUILT UP	ROOF FLASHIN	G	7,500 SF		X			
BLDG 97 B ROOF		X	ROOF FLA	SHING		1,450 SF		X			
BLDG 97 SOUTH STAIRS		X	FIRE DOO	RS (6)		120 SF	);	X			
BLDG. 97 A -3RD FLOOR		x	DUCT FLA	NGE CAULK		7 SF		X			
Name of Registered Waste Hauler	NJDEP W			s of Waste		egistered Landfill		7			
FREEHOLD CARTAGE, INC. 825 HIGHWAY 33	Hauler ID 1593			120		G COUNTY RES ANDER DRIVE/F			NAG	EMEN	T SE
City, State	1 1393		Disposal D	ate	City, State		OUTE	10			
FREEHOLD, NEW JERSEY Completed by (Print or Type)	Title		5/27/14-6/1		MONTGO	MERY , PA 1775			/		
BENJAMIN SANCHEZ	DIRECTOR OF	OPER	ATIONS	Signature De	1		Date	5	12	11	4

CK 23006

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

RECEIVED

te of Notification (1)				Ra	mapo Ir	ndian Hil	r/Operator ( Is Reg BC	)E			207.29	AM	1:	€6	4
0/28/14 jencies Notified	Type Notific	ation			eet Addres				Δ	SBE	STal .	<del></del>	- D	<u> </u>	
EPA DEP		Initial     Amended     Amendment # Emergency (Including justification)     Cancellation				ip Code NJ 0743	6				ST. LICEN		G	ŒĘ	
DOL	Emerg	gency (inc ation)	duding	Na	me of Cor	ntact urvels , E	BA/BS			Teleph	one Number		7		
DOH DCA						INFORM		Type of F	acility (4)			—	_		7
ame of Facility Where Ramapo High Sch	Abatement is ool 200 Wi	Taking F ng Phas	Place (3) se II					⊠ Scho	ool (K-12)	(Other !	han K-12) ommercial b	uilding	ıs, ho	mes,	
treet Address 331 George Street	t	and the second						Square F	eel	# of FI			. Age		
ity (5) Franklin Lakes								120,000		2 if being	demolished				_
County (6) Bergen					ounty Cod			High S	chool			_		_	
Name of Monitoring Fir RK Occupational	rm Hired by B	uitding O	wner (8)		ASCM N	0.	Pan		Vindow &	& Dooi	r Systems	Inc.			
Street Address							Stree 215	t Address Fleming	Street						
403 Saint, James City, State, Zip Code	Ave.			_			City,	State, Zip (	Code NJ 088	54					
Phillipsburg, NJ 0		n		Ti	elephone	No.	Telep	phone No.			License No. 01237				
Project Manager for Monitoring Firm John Gilbert			Scheduler	- 1	B56-625		Nam	Name of OSHA Monitor							
Start Date (10) Schedule				14				Mark Jovic Consulting LLC. Street Address							
10/31/2014													EIR P		
10/31/2014 Occupancy Status Du	tended Durin	a Entire F	Conly One	e) batem	ent		Stree 87	et Address Main Stre	eet						
10/31/2014 Occupancy Status Du Facility ClosedA	acated Durin	g Entire F	eriod of Al	e) batem	ent -16:00		Stree 87	et Address	eet Code						
10/31/2014 Occupancy Status Du Facility Closed/N Abatement Perfo Other – Describe Scope of Work (Chec	Vacated Durin ormed Outsid e: Friday 15:0 ck All That Ap	g Entire F e of Norm 10 - 23:00	Period of Allial Facility   Sat & Sun	e) batem	-16:00 Hion		Stree 87	Main Street Address Main Street State, Zip coln Parl	code k NJ 07	2035	Negative Pr				
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Occupancy Status Du Abatement Performent Cother - Describe Scope of Work (Chec ≥ 3 sf or ≥3 lf ≥ 160 sf or ≥260  Loc Asbestos-Contai TO BE	/acated Durin primed Outsid e: Friday 15:0 kk All That Ap  If  ation of ning Material ABATED Facility	g Entire F e of Norm 10 - 23:00 ply)	Period of All Facility Sat & Sun	enova enova emolil Local dorma do sola do sola (12)	dion ion lly say by incel Staff?	(i.e. l	Description Containing thermal system surfacing, other misce	State, Zip Coln Pari  Full Mini Glov Non-  ion of g Material ems insulat VAT, or ellaneous)	code k NJ 07 Containm Enclosure ebag Proc Exemple (ACM)	r035 ent with eccedure d (*) and	Negative Pr 3 Non-Friabl mount Specify 5 or LF)	e Prod Removal	ædur Abate Ty	meni pe Enca	1
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#### State of NJ Notification of Asbestos Abatement

B & G proj. #:

2014-189

(Pursuant to NJAC 8:60-7 and 12:120-7)

Check # 6872

								the total	TVED			
Date of Notification	1 (1)	Na	ame of Building	Owne	r/Operator (2)				- 2007			
1 10 1/12 17	1/1141		Constance N	/larch	i			2214 COT 20	Att to			
Agencies Notified	Type Notification	on Str	reet Address						40.1.5	<b>J</b>		
∐ EPA .	✗ Initial		55 Dyer Ave	enue				ASBEST:	I I I I DO		-	
☐ DEP		Ci	ty, State, Zip Ci	ode			y	& LICEI	ASING		17	
X DOL	Amendr	nent	Clifton, NJ (	07014					- iii Q			nemonatio
X DOH	П о		me of Contact					Telephone	Number	i s		
☐ DCA	Cancella	ition	Connie Mar	rchi								
				FACIL	LITY INFORM	ATION						
Name of facility w	here abatement is	s taking pla	ce (3)					Type of Facility (4	ł) (K - 12)			
Constance M	larchi								pter 8 (Other	han K	-12)	
Street Address				_				X Other (F	Private/Comm			
55 Dyer Ave	nue								Homes, etc. # of Floors	Bir	dg. Ag	je
City (5)		Coun	ty (6)			Cou	nty Code (7)	Oqualo i ool	, , , , , , , , , , , , , , , , , , , ,			
00-1790m Perma 99	223						te use only)	Current Use (Pri	ior if being der	nolishe	ed)	
Clifton, NJ 0		200000	saic					residential			-	
Name of Monitorin	ng Firm Hired by I	Bldg. Owne	er (8)		ASCM No.		Name of Abatement					
n/a							B & G Restorat Street Address	ion, Inc.			_	
Street Address							105 Ryerson R	Road				
City, State, Zip Co	de						City, State, Zip Code				-	
							Lincoln Park,	NJ 07035	, a			
Project Manager fo	or Monitoring Firm		Phone	Numb	er		Telephone Number (973)696-686	9	License Num 00378			5.
_	( (10)	1Cabad	. Completion D	ato /11	\		Name of OSHA Mon	itor				
Scheduled Start D	ate (10)			ale (11	,		B & G Restorat	ion, Inc.				
11/06/2014			06/2014				Street Address					
Occupancy Status							105 Ryerson R					
Facility close	ed/vacated during performed outside	entire perion of normal f	od of abatemen facility hours-	it.			City, State, Zip Code					
Describe:							LincolnPark, N	J 07035				
Other-Descri	3/2					$=$ $\perp$						-
Demolition	песк ан шат аррг	Renovatio	in.			П	full Containment w/ne	gative pressure	Glovebag p	roced	ure	
( <del>-11</del> )	-						Mini-enclosure	Γ	Non-friable			
>3 sf or >3 l		≥160 sf or	n normally used	l solely		<u> </u>			R	R	E	T_
Location of asbestos-co	ontaining	by mainte	enance/custodia	al		ion of a	sbestos-containing	Amount	e m	e	n	E n
material to b	oe .	staff(12)	г		material		obcolor comaning	(Specify S LF)	For	a	a	C
abated in fa	cility (13)	Yes	No	N/A				2.7	v e	l r	р	1.
basement				×	pipe insul	ation		54 If	X			
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						VAT :	Tu	1146"				
Registered Waste B & G Restora			EP Hauler ID# 19563	0	ubic Yards of 1	vvaste		Resource & Re	ecovery Cer	nter		
City, State				oosal D	ate 07/2014		City, State Tullytown,					
Lincoln Park,		1		1 1/	Signature		1 <del></del>	.,,	T Date		- Y	
Completed by (Print or Type)  Gordana Luna  Title  Secretary/Treas					J.g.iaiaia		Gordana Luna		10/27/20	14		