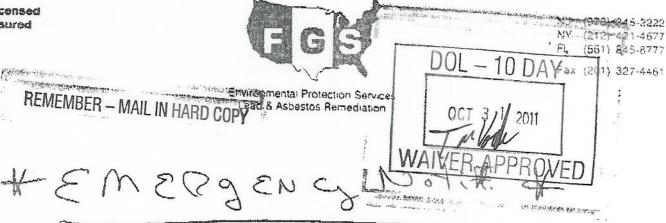
Fully Licensed Fully Insured



FAX TRANSMITTAL SHEET
FAX NO. (201) 327-4461
To: lon Voorhees
FROM: trans
RE: St Cocilie Energy Notice
DATE: 10 31 (1
NO OF PAGES INCLUDING THIS TRANSMITTAL 23 4
FAX NO.: 609-633-0664
ADDITIONAL COMMENTS: Place Find Attach
Emergy Notif, Start Ote Request,
& Noveman 3, 2011
The School Had been closed for
Some time. They had a pino Brown
+ Water danged the flooring
If you have any questions please
give me a call.
Thanks for your help ?
and the same of th

F.G.S. INC. 513 East 32nd Street • Paterson, NJ 07504-2118

P.2/4

Oct 27 11 02:09p

St Ceoili Parish

2019984437

W - 2

REMEMBER - MAIL IN HARD COPY



St. Cecilia Church
120 Kearny Avenue & Kearny, New Jersey 07032

(201) 991-1116

DOL - 10 DAY --
OCT 3 1 29/1

TOULSHIP

WAIVER APPROVED

October 27, 2011

To whom it may concern,

I respectfully request a waiver of the 10 day waiting period for the removal of Vinyl Asbestos tile at St.Cecilia School Bldg.

The tile is damaged and must be removed on Emergency basis.

Sincerely,

Rev. Michael G. Ward

Pastor

GI 11296

# State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

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## ENVIRONMENTAL CONNECTION INC

A Vertical Technologies Corporation

Via Telefax: (215) 788-6141

October 31, 2011

Mr. Gino Pizzigoni Bristol Environmental, Inc. 1123 Beaver Street Bristol, PA 19007

Re:

Emergency Notification
Trenton Public Schools
Maintenance Complex, Main Building
Truancy/H&S Grant Area

Dear Mr. Pizzigoni:

A leak in the hot water system above the plaster ceiling requires the removal of up to nine (9) linear feet of ACM Thermal System Insulation above the Truancy/H&S Grant Area at the Maintenance Building located at 1490 Prospect Street, Trenton, New Jersey.

Due to the immediate need for heating at the site and required repair to the mechanical system, this project is being declared an emergency by the Owner. Please proceed with all required notifications so that this project can commence on October 31, 2011.

If you have any questions regarding this project, please contact the undersigned at your convenience.

Respectfully,

ENVIRONMENTAL CONNECTION, INC.

James Frisbee, CIRA Operations Manager STATE OF NEW JERSEY
NOTIFICATION OF ASSESTOS ABATEMENT
(PURSUANT TO NJAC 5:86-7 AND 12:120-7

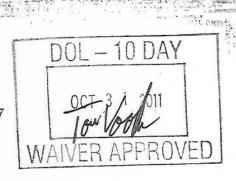
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Moorestown, NJ 08057			City, State, Zip Code									
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A Service Disabled Veteran Owned Small Business TTI Environmental Incorporated 1253 N. Church Street Moorestown, New Jersey 08057

Tel: 856-840-8800 Fax: 856-840-8815



10/27/11

SLAVCO CONSTRUCTION, INC 164 Getty Avenue Clifton, NJ

Attention:

Robert Maviglia

Reference:

Emergency Asbestos Abatement

The replacement of a Air Handling Unit(AHU) at the Verizon New Brunswick CO located at 18 Paterson Street Mew Brunswick, NJ, have been delayed due to the discovery of 9" X 9" Vinyl Asbestos Floor Tiles(VAT) located under the old AHU \in the basement Power Room. Approximately 72 square feet of VAT/Mastic needs to be removed in order to facilitate placing a concrete for the new AHU to be mounted upon.

Accordingly, this condition requires the removal asbestos containing materials. These delays may in turn, cause an interruption in telecommunication service. Removal of the regulated materials is urgently required to provide a safe access for telecommunication equipment.

Sincerely Yours,

Harold E. Baldwin

TTI Environmental, Inc.

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Michael B Solakov	DM				Oignaidi	~	State - Shirter			1/201	÷	

range group me recently gency (100a0000004)

To whom it may concern,

Due to the enticipated cold weather, I respectively request to have the 10 day waiting period to be waived for the permit so PSE&G can precede with the installation of my new furnace. As it stands now we do not have heat in the house and see this as a top priority.

Thank you.

Regards,

Jetfrey Agderian

Mr. Voorhees,

Attached Emergency notification with justification for a 10 day waiver from the owner of the property.

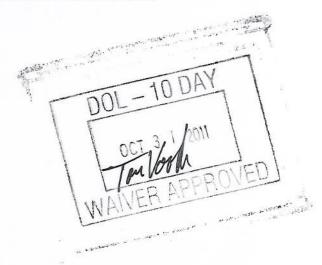
At this current time he has no heat and would like to perform abatement on 11-01-2011

Thank you,

Michael B Solakov 140 Hamburg Tpke Bloomingdale, N.J. 07403 Tel: (201) 710-9725

Fax: (201) 844-6084 www.glgroupinc.com

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## 60361

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

Check # 8026

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County (6) Somerset				JSE ONLY)		Current Use (Pr	ior ii being demi	olisnea)			
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EPC TECHNOLOGIES, INC			N/A			TECHNOLOG	GIES, INC				
Street Address P.O. BOX 337						Address BOX 337					
City, State, Zip Code						ate, Zip Code					
NEW EGYPT, NJ 08533						EGYPT, NJ	08533	١.			520
Project Manager for Monitoring Firm STEVE SCHENKER			Telephoi 609-75	ne No. 58-3365	Telepho 609-7	one No. 58-3365	Licens 0039				
Start Date (10)	Schedul	ed Co	mpletion I	Date (11)		of OSHA Monitor					
Occupancy Status During Abatement (Check	k Only Or	ne)		•	Street A						
Facility Closed/Vacated During Entire P					100 TOTAL 30	3OX 337					
Abatement Performed Outside of Norm Other – Describe:	ai Facility	y Hour	S		15000	ate, Zip Code EGYPT, NJ	08533				
Scope of Work (Check All That Apply)											
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demoli			H	Mini-Enclosur Glovebag Pro	cedure				
	T 10	Local	tion			, Non-Exemple	d (*) and Non-F	nable P		ateme	nt
Location of	1	Norma	illy	D	escription of	of		_	_	Туре	
Asbestos-Containing Material (ACM) TO BE ABATED		ed Sole aintena		Asbestos Co	ntaining Ma	aterial (ACM) insulation,	Amount (Specify			En	·   m
In Facility	Cus	todial (12)	Staff?	surf	facing, VAT	, or	SF or LF)	Remova	Tebal.	Encapsulate	Enclosure
(13)				otner	miscellane	eous)		¥a.		ulate	ure
	Yes	No	N/A	7			1		-	+"	+
Basement	X		-	Pipe	Insc	<i>alation</i>	1301		4		
Kitchen		x	-	Floor	Tiles	<u> </u>	2503	FX	-	-	+-
									1	_	
	1	L	VIDED !!		a Ve-d	T Nie	Dogistare	4611			
Name of Registered Waste Hauler EPC TECHNOLOGIES, INC		1	NJDEP W Hauler ID 17000	TO CO. 1	ic Yards <sup>raste</sup> 3	a III aasaa waxaa aa	Registered Lan E MANAGEN		OF I	PA	
City, State NEW EGYPT, NJ 08533			2010-20-0-2		osal Date	City, Stat					
				111	-10-1	MOKK	ISVILLE, PA				

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

Date of Notification (1)		Name o	f Building Owner/Op			· · · · · · · · · · · · · · · · · · ·	orte.Alany	· • • • • • • • • • • • • • • • • • • •	- 7.6		
October 26, 20			Willi	am Heine		G-	1-G	73	30		
[ ] DEP [ ] Am [x ] DOL Am	ial Notification ended Notification endment #	Street A	1124 ate, Zip Code	Woolley Avenue	007.0	110	011		Appropriate to the second		
[ ]	ergency (including ification)	N.		n, New Jersey 070	44		Uil	-	4		
I I DCA	cellation	Name of	f Contact William Heine		Telephone Number	er 16 1–80		· ·	And a filter of Assessed		
Name of Facility Where Abatement is Takin	DI (2)	FACILITY I	NFORMATION				April traces	Maria de Antonio de Su	زيد		
Residence	ng Place (3)			Type of Facility (4	School (k-12)	Papar I			,		
Street Address 214 6 <sup>th</sup> Avenue				[x]	Subchapter 8 (c Other (i.e., priv homes, etc.)				iildings		
City	County (6)	County C	Code (7) USE ONLY)	Square feet 1500 sf	# of Floors	Bld	g. Age	60			
Ortley Beach	Ocean		,	Current Use (Prior		d)		00			
Name of Monitoring Firm Hired by Building	g Owner (8)	ASCM N	o. Name of	Reside f Abatement Contracto Guard		. Inc.		- 1000			
Street Address			Street A	ddress							
City, State, Zip Code		-	City, Sta	te, Zip Code	Route 9, Unit 6	1000		1 200 220 200 11			
Project Manager for Monitoring Firm	Telephone Nu	ımber		ne Number 9-9932	River, New Jers			271			
Scheduled Start Date (10) 11/09/11	Scheduled Co	ompletion Date (1	1) Name of	OSHA Monitor	L. Analytical						
			Street Ad	ddress	telton Road						
Other – Describe			City, Sia	6이의 경기 중인생님 <mark></mark> 경기 (2011년 120년 - 120년 - 120년 120년 - 120년 120년 120년 120년 120년 120년 120년 120년	way, New Jerso	ey 088	54				
Scope of Work (Check all that apply) $ \begin{bmatrix}                                   $	: :	enovation emolition	[ ] [ ] [ x ]	Mini-Enclosure Glovebag Proced	t with Negative Pro lure *) and Non-Friable		ıre				
					T T	Abat	ement	Type			
Location of Asbestos-Containing Material (ACM)  TO BE ABATED in facility (13)	Is Location Normally used Solely by Maintenance/Custo Staff (12) YES NO N		Description Asbestos-Con Material (A (i.e., thermal s insulation, sur VAT, o other miscella	taining CM) systems facing, r	Amount (Specify SF or LF)	R E M O V A	R E P A I R	E N C A P S U L	E N C L O S U R		
Exterior	X		os siding		1280sf	L X		Е	Е		
		7130030	- Jidilig		120051	^					
Name of Registered Waste Hauler	NJDEP Waste H		Cubic Yards of Waste		red Landfill						
Guardian Contracting, Inc. City, State Toms River, New Jersey	0.000	isposal Date	City, Stat								
Toms River, New Jersey Completed by (Print or Type) Nicholas Fernicola	Title Project Manager	1/14/11 Signature		wn/Pennsylvania		Date 10/2	6/201	1			
	*Do not use this	form for asbest	os licensure exemp	ted activities.							

60360

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

OCT 3 1 2011

Do not use this form for asbestos licensure exempted activities.

Date of Notification (1)		N		of Building Owner/					- 1	/	
10/27/11		4		15. LOEL	4 wie	16	ASSESTABLE FOR YES		1		
Agencies Notified Type Notification		S	treet A	Address 74 Ac	ج ا		131X N51NO				
□ EPA		c	-	ate, Zip Code		-,		. ,			٠.,
P DOL Amendment		-		WTHORN	<b>3</b> €	NJ . 07	506	•			
DOH Emergency justification)			lame o	f Contact			Telephone Nun	nber			
□ DCA □ Cancellation		$\perp L^{t}$		LO EHIN			173 63	61.	53	15	
Name of Facility Where Abatement is Takin	n Place (3)		FAC	ILITY INFORMAT	ION	Type of Facility (	4)				
MS. LOEHWIN						574 575	•				
Street Address						<ul> <li>□ School (K-1</li> <li>□ Subchapter</li> </ul>	8 (Other than K-12	2)			
73 - 774 NE					ŀ	Other (i.e. p	rivate & commercia	al build	dings,	home	es,
City (5)						Square Feet	# of Floors	В	ldg. A		
HAWTHORNE	21					1800	2.		19	30	
County (6)				Code (7) . USE ONLY)	_		or if being demolish	ed)			18 (30)
Name of Monitoring Firm Hired by Building	Owner (8)	<u> </u>	ASC	/I No.	Name	of Abatement Cor	tractor (9)				
				-	Bes	t Removal	Inc			4255-X	
Street Address						Address					
						South F	River St				
City, State, Zip Code					3.000 to -	tate, Zip Code	N T O	760	1	IL:	
Project Manager for Monitoring Firm		TT	elenho	ne No.		ckensack one No.	, N.J. 0		1	-	
			9.		201	-329-7444		70.70			
Start Date (10)	Scheduled		letion	1		of OSHA Monitor ga Enviro	onmental S	Ser	vic	es	
Occupancy Status During Abatement (Chec	k Only One)		-			Address	a.				
☐ Facility Closed/Vacated During Entire F	Period of Aba	ateme	nt		1	Huyler	St .				
Abatement Performed Outside of Norm Other – Describe:	al Facility H	ours				ate, Zip Code	1 N		076	06	
Scope of Work (Check All That Apply)		_			Sou	th Hacker	sack ,N.	١.	0/6	06	
≥3 sf or ≥3 if	₽ Don	ovatio	<b>.</b> .		. п	Full Containme	ent with Negative P	112291	na .		
≥ 160 sf or ≥260 lf	10 mm 1 m	nolitio	2212		₽.	<ul> <li>Mini-Enclosure</li> </ul>		,0000		40	
		•	5379777 - 11172				edure I (*) and Non-Friabl	e Pro	cedur	е	
	Isla	cation	1						7	ement	
Location of	Nor	mally		De	scription	of	8	-	1)	pe	_
Asbestos-Containing Material (ACM)	Used S Mainte			Asbestos Con (i.e. thermal			Amount (Specify	20		m	m
TO BE ABATED In Facility	Custod		aff?		cing, VA		SF or LF)	Removal	Repair	caps	Enclosure
(13)	(	12)		other r	niscellan	eous)		18	air	Encapsulate	enus
i a	Yes I	No ·	N/A								
BASELLENT			p	THERMAL	(250	ATION	SSLF	X			
				1.			-				
* *											- 138
	+ +	_								П	
Name of Registered Waste Hauler		NJE	DEP W	/aste Cubic	Yards	Name of	Registered Landfill				
DJM Transport ,Inc		Hau	uler ID 393	No. of Wa	ste ィ/っ		rland Cou	ınt	y L	and	lf:
City, State South Kearny N.J.	07032		į.		sal Date	City, State	ourgh PA,	17	242		4
Completed by	Title			- Commence of the Commence of	4	7	10-	te			
J. MAIORANO	Esti	mat	or		VÀ	Paioron	2	0)	27	/10	
						177701 7/00					

### NUTIFICATION OF ASDESTOS ADATEMIENT

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

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Date of Notification (1)	1			Name of Buildin			ontroot@	ar Iva	- (	1		i. Navys		
October 26, 201					A to 2	Z Site Co	ontractor	s, inc.	F 11	0.0 F	7 (mess)			
15 3	l Notifi	cation otification		Street Address		ark Ave	enue	7		1/ 1		The same		
[ ] Emer		including		City, State, Zip C		vood, N	ew Jerse	y 08701 OCT	3 1	2011		10.5		
IXIIDDE	ication) ellation			Name of Contact Irvin	g Perlsteir	1	and the same of th	Telephone Nun	nber	600	-,.2	The same		
		I	FACII	LITY INFORI	MATION						11- md (c) man	1		
Name of Facility Where Abatement is Taking Residence	g Place					Туре о	of Facility (	School (k-12		Lan 1-12	***************************************			
Street Address 612 Appolo Road							[x]	Subchapter 8 Other (i.e., p homes, etc.)	rivate &			ldings,		
City	Cour	ity (6)		County Code (7) STATE USE ON	LY)	Square 12	feet 200 sf	# of Floors	В	ldg. Age	60			
Lakewood	Oce	an				Curren	t Use (Prio Resid	r if being demolis lence	shed)					
Name of Monitoring Firm Hired by Building $N/A$	Owner	(8)	Α	ASCM No.	Name of Street A		ent Contrac Guar	tor (9) dian Contracti	racting, Inc.					
Street Address								Route 9, Unit	61					
City, State, Zip Code					12000000 00.2	ite, Zip Co	Toms	River, New J			271			
Project Manager for Monitoring Firm	nber			ne Numbe 9-9932	er	Licen 0062	se Numl 24	er						
Scheduled Start Date (10) 11/08/11		Scheduled Con 11/10/11	npletion	n Date (11)	Name of	OSHA M		S.L. Analytica	ıl		2,002			
Occupancy Status During Abatement (Check  [ X ] Facility Closed/Vacated			of Abat	ement	Street A	ddress	1056	Stelton Road						
Abatement Performed (					City, Sta	ite, Zip Co								
								taway, New Je						
Scope of Work (Check all that apply)					[ ]		Containme i-Enclosure	ent with Negative	Pressur	•				
[ ] >3 sf or ≥3 lf		[ ] Re	novatio	on	( )		vebag Proc							
[ X ] ≥160 sf or ≥260 lf		[ x ] De	molitio	on	[x]	Non-	-Exempted	(*) and Non-Fria	ble Proc	edure				
									A	atemen	Туре			
Location of Asbestos-Containing Material (ACM)  TO BE ABATED in facility (13)	dial //A	(i.c	Description bestos-Cor Material (A e., thermal sulation, sur VAT, oner miscella	ntaining ACM) systems rfacing, or		Amount (Specify S or LF)		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		Asbestos sidi	nσ			1000sf	+		-					
LACTION .		, 100 05105 51d1	-5		710		1	1						
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Name of Registered Waste Hauler Guardian Contracting, Inc.		NJDEP Waste Ha	3	3	ards of Wast	_ r	ne of Regis Γ.R.R.F.	stered Landfill						
City, State Toms River, New Jersey	isposal 1/11/1		City, Sta		nnsylvan	ia								
Completed by (Print or Type) Nicholas Fernicola		Signature	bil	1	ار ه	1	1 00000	ite 0/26/11						

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

(Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) October 26, 2011 Ron Doran Agencies Notified Type of Notification Street Address [x] EPA [x]Initial Notification 229 Hawthorne Avenue ] DEP Amended Notification City, State, Zip Code Amendment # [x] DOL Point Pleasant Beach, NJ 08742 Emergency (including justification) Name of Contact Telephone Number [x] DOH Cancellation Ron Doran ] DCA FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Residence School (k-12) Subchapter 8 (other than k12) Street Address [ x ] Other (i.e., private & commercial buildings, 229 Hawthorne Avenue homes, etc.) City County (6) County Code (7) Square feet # of Floors Bldg. Age (STATE USE ONLY) 2000 sf 80 2 Current Use (Prior if being demolshed) Point Pleasant Beach Ocean Residence Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) N/A Guardian Contracting, Inc. Street Address Street Address 1889 Route 9, Unit 61 City, State, Zip Code City, State, Zip Code Toms River, New Jersey 08755-1271 Telephone Number Project Manager for Monitoring Firm Telephone Number License Number 732-349-9932 00624 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 11/10/11 11/14/11 E.M.S.L. Analytical Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 1056 Stelton Road Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe Piscataway, New Jersey 08854 Scope of Work (Check all that apply) Full Containment with Negative Pressure ] Mini-Enclosure 1 Glovebag Procedure >3 sf or ≥3 lf Renovation ≥160 sf or ≥260 lf [x] Demolition [x]Non-Exempted (\*) and Non-Friable Procedure [x]Abatement Type Is Location Description of R Е Е R Normally used Asbestos-Containing Location of Amount N E E N Material (ACM) (Specify SF Asbestos-Containing Material (ACM) Solely by P C C M (i.e., thermal systems Maintenance/Custodial or LF) TO BE ABATED A A L 0 P insulation, surfacing, 0 Staff in facility ٧ S R S VAT, or (13)(12)U U other miscellaneous) A L R YES NO N/A L X Asbestos siding 2400 sf X Exterior Name of Registered Landfill Name of Registered Waste Hauler NJDEP Waste Hauler ID No. Cubic Yards of Waste T.R.R.F. Guardian Contracting, Inc. 20223 Disposal Date City, State City, State 11/15/11 Tullytown, Pennsylvania Toms River, New Jersey Completed by (Print or Type) Title Date

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

10/26/2011

Signature

Project Manager

Nicholas Fernicola

Date of Notification (1)				Name o	f Building Owner								_
10/25/	11.				MRT.	0	ATTS		W. 1		n ke na		
gencies Notified	Type Notification		T	Street A	Address		4	200.000.000.000					
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DEP DOL	☐ Amended Amendment	4		City, St	ate, Zip Code	2011	ALT	0.76	08				
	☐ Emergency		-		f Contact	Mell	. 140.		phone Num	hor			
DOH .	justification)  Cancellation				ColeTIA	_		Tele	phone Num	Del	25	10	
1 DCA	Li Caricellation				ILITY INFORMA			15					
lame of Facility Where	Abatement is Takin	g Place (3)	)				Type of Facility	y (4)					
HR.	77=J0	A					☐ School (K	(-12)					
Street Address				0,970.0			☐ Subchapt						
248 117	H ST						Other (i.e etc.)	. private &	commercia	Dulk	ungs,	, nom	es,
City (5)	0						Square Feet	# of	Floors		ldg. A		
PROSPE	CC VA	HRIC					2000		2	- 1	19	90	)
County (6)	• / / / / / / / / / / / / / / / / / / /				Code (7) USE ONLY)		Current Use (F			ed)			
	ASSAIC			•				55106					
ame of Monitoring Firm	Hired by Building	Owner (8)		ASC	VI No.	Section of the second section of the section of the second section of the s	of Abatement C	all the second of the second					
4		11997					t Remova	IT INC	2				
treet Address							Address 0 South	Direct	- C+				
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ity, State, Zip Code								- NT	T 07	60	1	674	
roject Manager for Mon	Horing Eirm			Telepho	ne No		ckensack none No.		License No		Τ		-
roject manager for mon	itoring rimi			Cicpiic	ine ivo.		-329-744		0038				
tart Date (10)		Schedule	d Con	npletion	Date (11)	Name	of OSHA Monito	or		-			
11/3/11			11)		1/	Ome	ga Envir	conmer	ntal S	er	vic	es	
occupancy Status During	Abatement (Chec					Street	Address				150 W.		20000
Facility Closed/Vac	2			nent		280	Huyler	St					
Abatement Perform Other – Describe:	ed Outside of Norm	al Facility	Hours	3			state, Zip Code		86				
Other - Describe: _	Hour yo	7801				Sou	th Hacke	nsack	N.J		076	06	
cope of Work (Check A	II That Apply)												
23 sf or ≥3 lf		200	enova				Full Contain		Negative Pr	essu	e	2	
1 ≥160 sf or ≥260 lf		D	emolit ·	JOII		1	Glovebag Pr	100					
					<b>-</b>		Non-Exempt	ed (*) and	Non-Friable	50 To W			_
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Location	of	14	United	3		المالاالم	Vį	1					Г
Asbestos-Containing	Material (ACM)		Soleintenar				laterial (ACM)	100000	ount ecify	77	_	E	ū
TO BE ABA			dial S	A TORONTO LOCALIST		acing, VA	s insulation, T. or	SF	or LF)	em	Repair	caps	1010
(13)	<b>,</b>		(12)			miscellar				Removal	air	Encapsulate	Enclosure
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ame of Registered Was				JDEP V		c Yards		of Register			_		3 0
	te Hauler oort , Inc	-	Н	JDEP V auler ID 2393	No. of W				ed Landfill rd Cou	nt	y L	ano	df

Title Estimator

Do not use this form for asbestos licensure exempted activities.

J. MAIORANO

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Date of Notification	(1) 9/21/11		V	erizo	on (	Commu	Owner / Operator nications	- 1	ECE				1			
Agencies Notified  EPA  DEP	Type Notifica		1 C	ity, S	ree tate	nwood & Zip C	ode		OCT	31	<u>19</u> 13			-		
□ DOL □ DCA	Amen  Emerg		N	lame lex l	of C Bay			14.7	ASSES.	Tele	phon	e Nu	imbe	r		
	15.4				CILI	TY INF	ORMATION	(4)								
Name of Facility W	here Abateme	nt is Taking Pla	ace (3)	)			Type of Facility School (K		an K-12)							
Street Address 144 Route 10 & I	Hunter Stree	et					Other (i.e. Square Feet	private & con # of Flo	nmercial bu		home . Age		tc.)			
City (5)		County (6) Morris	Соц	inty C	Code	€ (7)	Current Use (F	Prior if being d	emolished)							
Succasunna		INIOILIZ					Offices									
Name of Monitoring	Firm Hired by	y Building Own	er (8)		AS	SCM No.	AbateTech, Inc.									
Street Address 1253 North Chui							Street Address PO Box 25									
City, State & Zip Co Moorestown, NJ	ode						City, State & Zip Code  Lumberton, NJ 08048									
Project Manager for Harold Baldwin			Telep				Telephone Nu	Telephone Number License Number 009-265-2107 00529								
Scheduled Start Da		Scheduled Com		n Da	_		Name of OSH. EMSL Analy									
Occupancy Status	During Abater	ment (Check on	ly one	2)	oton	nont	Street Address									
Facility Clo	Sed/Vacated (	During Entire Poutside of Norma	al Hou	ils Di Vo	alcii	Herit	City, State & Z									
Describe:	cupied During						Westmont, I	NJ 08108								
Scope of Work (Ch									ntainment v	with Neg	ative	Pres	sure	•		
≥3 sf or ≥3	If		$\boxtimes$	Rer	nova	ation			nclosure	uroc						
≥160 sf ≥2	60 If			Der	moli	tion	Glove Bag Procedures  Non-Exempted and Non-Friable P						cedu	ıre		
1	ocation of			Locat	700000000000000000000000000000000000000		Description Asbestos-Cont		Amo (Spe		Aba	tem	ent T	Гуре		
	stos-Containin aterial (ACM)	ıg		nally olely		a	Material (AC	M)	SF or		Ren		E	m m		
TO	BE ABATED			tenar			(i.e., thermal sy insulation, surfac	ing, VAT			Remova	Repair	Encapsulate	Enclosure		
	in Facility (13)			(12)			or other miscella	aneous)				=	ilate	ıre		
			Yes	No	N.	/A	Floor tile & N	Acetic	100	SF		П	П	П		
Boiler Room			X	H	+	┽	Boiler Insula		60 5			H	H	甘		
Boiler Room Boiler Room	X	H	+		Pipe Fittin		8 to									
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Name of Registere	d Waste Hau	ler		I L	JDE	P Waste	Cubic Yards	Name of Reg	gistered La	ndfill						
AbateTech, Inc	ou vvadio i laa				aule	er ID No. <b>8750</b>	of Waste	TRRF Land	dfill							
City, State Lumberton, NJ							Disposal Date 11/15/11	City, State Tullytown,	PA		Or Line	F3				
Completed By (Pri Gwen Trumbetti	nt or Type)			Title Signature Date 10/26/1						/11	1					

NOTIFICATION OF ASBESTOS ABATEMENT

Check #3442

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

Date of Notification (1) 8/26/11					of Building ulic REH		Operato (	r (2)		3 6	15	VIII	15	en \	
- 1	ype Notification	ı.			Address Kesslers	sville F	Road	-		00	3 1	2011	į.	IJ.	
EPA DEP DOL	Amended Amendmen				ate, Zip C		0031			\$00T6	TOS CO	NTDAY 0			
	justification	)			of Contact Hume			i de la composition della comp			ephone l		p==		)
Name of Facility Where Aba Victaulic REH, LLC	atement is Taki	ng Place (	3)	FAC	ILITY INF	ORMAT	ION	Marcon	of Facility (						
Street Address 119 Edison Road			- CARLO						School (K-1 Subchapter Other (i.e. p	8 (Oth	er than K & comme	(-12) ercial bu	ildings	, hom	es,
City (5) Stewartsville, NJ									etc.) re Feet 00	# o	Floors		Bldg. 100	Age	
County (6) Warren		#850 <u> 1</u>			Code (7) USE ONLY	·			nt Use (Price arch & D						
Name of Monitoring Firm His PSC Industrial Outsou		Owner (8)		ASCN N/A	M No.				tement Con strial Outs						
Street Address 2337 North Penn Road	d						2337		Penn R	oad					
City, State, Zip Code Hatfield, PA 19440							Hatfi	eld, P	p Code A 19440						
Project Manager for Monitor Karl Heebner	ing Firm				97-7550		215-	none No 997-7	550		01149				
Start Date (10) 9/12/11		12/31/	11	npletion	Date (11)		PSC	Indus	A Monitor trial Outs	ourci	ng, LP				
Occupancy Status During Ab Facility Closed/Vacated Abatement Performed 0	During Entire	Period of A	Abaten				2337		Penn R	oad					
★ Other – Describe: Mon	day-Friday, 7 ar	nal Facility n to 3 pm	Hours			_	3.773	tate, Zip eld, P	A 19440						
Scope of Work (Check All The ≥3 sf or ≥3 if ≥160 sf or ≥260 if	aat Apply)	-	tenova emolit		70.		×	Mini	Containme i-Enclosure vebag Prod i-Exempted	edure				e	
		2	Locati			_							Abat	ement /pe	í
Location of Asbestos-Containing Mat TO BE ABATE In Facility (13)		Use Ma Cust	d Sole intenar odial S (12)	ly by nce/ Staff?		tos Cont thermal surfa	scription taining N systems cing, VA niscellar	faterial s insulat T, or		(8	mount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
Building No. 2, ba	sement	Yes	No X	N/A	TSI	& misc	. mixe	d with	soil	35	0 CY	х			
												+			
Name of Registered Waste H Republic Environmental		Group)	Н	JDEP W auler ID 0223		of Was 350	~~~~		Name of F	S Lan		Jfill			
City, State 21 Church Road, Hatfie	ld, PA 1944	0				Dispos	sal Date		City, State Morrisvi		1906	57			
Completed by Gene Rane		Title Envir	onme	ental Sp	pecialist		ignature		Rue			Date 8/26/1	1		Lake

NOTIFICATION OF ASBESTOS ABATEMENT

Check #3441 (Pursuant to N.J.A.C. 8:60 and 12:120) Name of Building Owner / Operator (2) Date of Notification (1) Rider University 10/27/11 Street Address Agencies Notified Type Notification 2083 Lawrenceville Road **EPA** Initial City, State & Zip Code DEP Amended #  $\overline{\boxtimes}$ DOL Lawrenceville, NJ 08648 Name of Contact Telephone Number DOH Emergency DCA Cancellation Fred Porter **FACILITY INFORMATION** Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Rider University - Conover Dorm Subchapter 8 (Other than K-12) (Unoccupied) Street Address Other (i.e. private & commercial buildings, homes, etc.) Blda. Age Square Feet # of Floors 2083 Lawrenceville Road County Code (7) County (6) City (5) Current Use (Prior if being demolished) Dormatory Mercer Lawrenceville Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. AbateTech, Inc. Pennoni Associates, Inc. Street Address Street Address 30 Maple Ave 515 Grove Street Suite 1B City, State & Zip Code City, State & Zip Code Lumberton, NJ 08048 Haddon Heights, NJ 08035 License Number Telephone Number Project Manager for Monitoring Firm Telephone Number 00529 856-547-0505 609-265-2107 Alan Lloyd Name of OSHA Monitor Scheduled Completion Date (11) Scheduled Start Date (10) **EMSL** Analytical 11/26/11 11/23/11 Street Address Occupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement 107 Haddon Ave. City, State & Zip Code Abatement Performed Outside of Normal Hours M Describe: Wed 11/23 2<sup>nd</sup> shift, Fri 11/25 double shift, Sat 11/26 B/D Westmont, NJ 08108 Facility Occupied During Abatement Scope of Work (Check all that apply) Full Containment with Negative Pressure Mini-Enclosure Renovation ≥3 sf or ≥3 lf Glove Bag Procedures Demolition ≥160 sf ≥260 lf Non-Exempted and Non-Friable Procedure Amount Abatement Type Description of Is Location Location of Asbestos-Containing (Specify Normally Used Asbestos-Containing Material (ACM) SF or LF) Material (ACM) Solely by Encapsulate Enclosure Remova Maintenance or (i.e., thermal systems TO BE ABATED insulation, surfacing, VAT Custodial Staff? in Facility or other miscellaneous) (12)(13)Yes No N/A Tank Insulation 200 SF M Boiler Room Name of Registered Landfill NJDEP Waste Cubic Yards Name of Registered Waste Hauler Hauler ID No. of Waste TRRF Landfill 18750 12 AbateTech, Inc. Disposal Date City, State

11/26/11

Signature

Title

Off. Coord.

Tullytown, PA

Date

10/27/11

City, State

Lumberton, NJ

Completed By (Print or Type)

Gwen Trumbetti

State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60 and 12:120) D&S Proj. #: MS 11-428 Name of Building Owner/Operator (2) Date of Notification (1) 1 0 / 2 6 / 1 1 JOE D'URSO Agencies Notified Type Notification ASBESTAS COMPROL & Street Address Initial EPA LIGHTESTAL 100 PASCACK ROAD Amended DEP City, State, Zip Code Amendment #: The state of the s DOL PARK RIDGE, NJ (including Telephone Number Name of Contact **⋈** DOH justification) DCA JOE D'URSO 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) JOE D'URSO Other (Private/Commercial Street Address Bldgs./Homes, etc. Bldg. Age # of Floors Square Feet 100 PASCACK ROAD County (6) County Code (7) City (5) (State use only) Current Use (Prior if being demolished) BERGEN PARK RIDGE Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. 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 00159 973-345-8020 Name of OSHA Monitor Sched. Completion Date (11) Start Date (10) D & S Restoration, Inc. 11/11/11 Street Address 10/27/11 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 Full Containment w/negative pressure Scope of Work (check all that apply) Mini-enclosure >3 sf or >3 If Renovation Glovebag procedure Non-Exempted (\*) and Non-friable procedure Demolition >160 sf or >260 lf R E Is location normally used solely E e Location of by maintenance/custodial n Amount Description of asbestos-containing m p asbestos-containing C (Specify SF or staff(12) C material (ACM) 0 a material (acm) to be a LF) V abated in facility (13) No N/A p Yes 130 L FT M PIPE INSULATION BASEMENT Cubic Yards of Waste Name of Registered Landfill NJDEP Hauler ID# TULLYTOWN, RESOURCE RECOVERY Registered Waste Hauler 2 YDS 13506 D & S RESTORATION, INC. Disposal Date City, State TULLYTOWN, PA 10/28/11 PATERSON, NJ 07503 Date Signature Completed by (Print or Type) Title 10/26/11 PRESIDENT BOGDAN JOLDZIC

State of Notification of Asbestos Abatement

(Pursuant to NJAC 8:60 and 12:120) D&S Proj. #: MS 11-429 Name of Building Owner/Operator (2) Date of Notification (1) 1 |0 |/|2 |6 |/|1 |1 TADHG KELLY Type Notification Agencies Notified Street Address OCT 3 1 000 Initial ☐ EPA 217 PARKER AVENUE Amended DEP City, State, Zip Code Amendment #: DOL. Emergency CLIFTON, NJ 07012 (including Name of Contact Telephone Number DOH DO justification) DCA JIM DALLAS Cancellation **FACILITY INFORMATION** Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) TADHG KELL Subchapter 8 (Other than K-12) Other (Private/Commercial Street Address Bldgs./Homes, etc. Square Feet Bldg. Age # of Floors 217 PARKER AVENUE County (6) County Code (7) City (5) (State use only) Current Use (Prior if being demolished) PASSAIC CLIFTON Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. D & S RESTORATION, INC. Street Address Street Address 20 California Ave. City, State, Zip Code City, State, Zip Code Paterson, NJ 07503 License Number Project Manager for Monitoring Firm Telephone Number Phone Number 973-345-8020 00159 Name of OSHA Monitor Sched. Completion Date (11) Start Date (10) D & S Restoration, Inc. Street Address 11/07/11 11/18/11 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 Full Containment w/negative pressure Scope of Work (check all that apply) Mini-enclosure  $\boxtimes$  >3 sf or >3 lf □ Renovation Glovebag procedure >160 sf or >260 lf Demolition Non-Exempted (\*) and Non-friable procedure R Is location normally used solely Е Ε Location of е e n by maintenance/custodial Amount n Description of asbestos-containing asbestos-containing m p staff(12) C (Specify SF or C material (acm) to be material (ACM) 0 a a abated in facility (13) N/A ٧ No Yes 20 L FT PIPE INSULATION  $\boxtimes$ BASEMENT 30 SQ FT X **BOILER INSULATION** BASEMENT BOILER Cubic Yards of Waste Name of Registered Landfill NJDEP Hauler ID# Registered Waste Hauler TULLYTOWN, RESOURCE RECOVERY D & S RESTORATION, INC. 13506 1 YD Disposal Date City, State City, State 11/08/11 TULLYTOWN, PA PATERSON, NJ 07503 Date Signature Completed by (Print or Type) Title 10/26/11 **BOGDAN JOLDZIC** PRESIDENT

Do not use this form for ashestos licensure exempted activities.

(Pursuant to NJAC 8:60-7 and 12:120-7) Check # 4837 2011-215 B & G proj. #: Sub Chapter 8 Name of Building Owner/Operator (2) Date of Notification (1) 1 10 /12 18 1/11 1 Perth Amboy Board of Education Type Notification Street Address Agencies Notified ☐ EPA 178 Barracks Street Initial X ☐ DEP City, State, Zip Code Amendment DOL Perth Amboy, NJ 08861 Telephone Number Name of Contact DOH Cancellation Derek Jess ☐ 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) Other (Private/Commercial Maintenance Shop Bldgs./Homes, etc. Street Address Bldg. Age # of Floors Square Feet 178 Barracks Street County Code (7) County (6) Current Use (Prior if being demolished) (State use only) Board of Education Middlesex Perth Amboy, NJ 08861 Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. B & G Restoration, Inc. 0057 AHERA Consultants Street Address Street Address 105 Ryerson Road P.O. Box 385 City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035 License Number Oceanville, NJ 08231 Telephone Number Phone Number Project Manager for Monitoring Firm 0378 973-696-6869 609-652-1833 Name of OSHA Monitor Eric Clarkson Sched. Completion Date (11) B & G Restoration, Inc. Scheduled Start Date (10) Street Address 11/11/2011 11/7/11 Occupancy Status During Abatement (Check only one) 105 Ryerson Road City, State, Zip Code Facility closed/vacated during entire period of abatement. Abatement performed outside of normal facility hours-Lincoln Park, NJ 07035 Describe: Other-Describe: Unoccupied Scope of Work (check all that apply) Glovebag procedure Full Containment w/negative pressure Renovation ☐ Demolition Non-friable procedure Mini-enclosure ≥160 sf or ≥260 lf  $\times$  >3 sf or >3 lf E E Is location normally used solely n Amount n m by maintenance/custodial Location of p Description of asbestos-containing C (Specify SF or asbestos-containing 0 a a staff(12) material (ACM) LF) material to be abated in facility (13) N/A No Yes X 120 lf pipe insulation basement (hallway, shop area storage room & back room) Name of Registered Landfill Cubic Yards of Waste NJDEP Hauler ID# Tullytown Resource & Recovery Center Registered Waste Hauler 3 yards 19563 B & G Restoration, Inc. City, State Disposal Date Tullytown, PA 11/7/2011 - 11/11/11 Lincoln Park, NJ 07035 Date Signature Gordana Luna Completed by (Print or Type) Title 10/28/2011 Treasurer Gordana Luna

Notification of Asbestos Abatement

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B & G proj. #:	2011-214	_	(Pu	ırsuant	to NJAC 8	:60-7 a	nd 12:120-7)	Check	# 4835	.)=			
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9 Parkway Eas	t							Square Feet	# of Floors	S	Bld	g. Age	<b>}</b>
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n/a							Street Address	on, me.					
Street Address							105 Ryerson Ro	ad					
							City, State, Zip Code						
City, State, Zip Coo	de						Lincoln Park, N						
Project Manager fo	Monitoring Firm		Pho	ne Numb	er		Telephone Number		License	Numb	er		17. A-40
Project Manager 10	or Monitoring 1 min		1				973-696-6869		0378		_		
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11/8/11		11/8/20					Street Address 105 Ryerson Ro	and					
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Registered Waste	Hauler		P Hauler II		Cubic Yards o	t Waste	Name of Registere Tullytown Res	ource & Recov	ery Center				
B & G Restora	ition, Inc.	1950		Disposal	2 yards Date		City, State						
City, State Lincoln Park,	N1.07035		ľ	11/9/20			Tullytown, PA	١					
Completed by (P		Title			Signature		Gordana Luna		Date	20011			
Gordana Luna		Treasurer					Gordana Zuna		10/28	3/2011		-	

				100000000000000000000000000000000000000			s Abatement						
B & G proj. #:	2011-213			(Pursuar	nt to NJAC 8	:60-7	7 and 12:120-7)	Charle	# 1926	)			
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Date of Notification		111	Name of Bu	ilding Own	er/Operator (2)			) EYE	1 10				
1 0 /12 8	Self St.		Mary &	Ronald Re	eilly			1					
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∐ EPA	✓ Initial		236 Vail	Road			14 6	OCT 31	On.		Ш		
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			Mary &	Ronald R				!		<u> </u>			
				FAC	ILITY INFORM	ATION	١		V.	4	16.		
Name of facility who	ere abatement i	s taking pla	ace (3)					Type of Facility	(4) of (K - 12)				
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n/a Street Address		_0,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				=	B & G Restoration	on, me.					
Street Address							105 Ryerson Ro	ad					
City, State, Zip Code						=	City, State, Zip Code	THE RESERVE TO BE A STREET TO SERVE TO					_
Oity, Otato, Esp 3000							Lincoln Park, N						
Project Manager for	Monitoring Firm		P	none Numb	er	-	Telephone Number	3 0 7 0 3 3	License	Numb	er		
, 10,000							973-696-6869		0378				
Scheduled Start Dat	n (10)	TSchoo	1 Completi	on Date (1	1	_	Name of OSHA Mon	itor					
Scrieduled Start Dat	e (10)			on Date (1	'/		B & G Restorati	on, Inc.					
11/9/11			/2011				Street Address						
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Facility closed	/vacated during rformed outside						City, State, Zip Code						
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Other-Describ							Lincoln Park, N	J 0 / 035					
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Registered Waste Har B & G Restoration			EP Hauler 563		ubic Yards of V 1/2 yards	vaste	Name of Registered Tullytown Resou		Center				
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Gordana Luna	- 00% - 10	Treasure	er				Gordana Luna		10/28/	2011			

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Date of Notification	(1)	Name o	f Building	Owner/O	perator (2)			10-1						
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Agencies Notified	Type Notification	Street A	ddress					OCT	3 1 2011					
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Ridgewood, ?	NJ 07450	Bergen		17	SCM No.	-11	Name of Abatement						277	
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Droiget Manager	for Monitoring Firm	1	Phon	e Number			Telephone Number			0378	<b>4</b> UITIDE			
Project Manager	10,						973-696-6869 Name of OSHA Mo	nitor					-50.0	
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	Date (1-)	11/7/201	1				Street Address		+					
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Registered Wa	ste Hauler	NJDEF	Hauler II	J.,	ubic Yards o	of Waste	Name of Register Tullytown Re	red La	ndfill & Recover	ry Center				
B & G Resto	oration, Inc.	1956	3		2 yards		City, State	Source						
City, State				Disposal [ 11/8/11			Tullytown, P	Α						
	k, NJ 07035	Tale			Signature		Gordana Lun			Date	/2011			
Completed by Gordana Lu	(Print or Type)	Title Treasurer					Gordana Zun	ra 		10/28	3/2011		-	

			Notificatio	on of Asbe	stos At	oatement d.12:120-7)	1						
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Agencies Notified	Type Notification	Street Add					7 3 1	000					
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DOH		Name of 0	Contact			Leanning Control		NE CONT	15500				
☐ DCA	Cancellation	Mario	n Cowan					UTRAUG:			_		
			FACILIT	Y INFORMA	NOITA							-	
Name of facility whe	ere abatement is ta	king place (3)					Type of F	School	) (K - 12)				
Name of facility with	ere abatement								pter 8 (Oth	er tha	n K-1	2)	
Marion Cowan								Other (F	rivate/Con	nmerc	ial		
Street Address							Square	and the second	lomes, etc		Bldg	. Age	_
122 Highland A	venue				Count	y Code (7)	Oquaro			_ _			
City (5)		County (6)				use only)			or if being	demol	ished	)	
City NI	107306	Hudson					resider				_	_	
Jersey City, NJ Name of Monitoring	g Firm Hired by Bld			ASCM No.		lame of Abatement		(9)					
n/a					_  -	B & G Restoration	on, Inc.						
Street Address						105 Ryerson Ro	ad						
					- 6	ity, State, Zip Code							
City, State, Zip Cod	le					Lincoln Park, N							
	- Manitoring Firm		Phone Number	r		Telephone Number			License I	Numbe	er		
Project Manager fo	I Wormoning I am					973-696-6869	- ita-s		0378		_		
Scheduled Start Da	oto (10)	TSched, Com	pletion Date (11)			Name of OSHA Mor B & G Restorat							
	ate (10)				1	Street Address	ion, me						
0ccupancy Status	During Absternant	11/7/2011 (Check only or	ne)			105 Ryerson Ro	oad						
N ===ility close	d/vacated during e	ntire period of	abatement.		1	City, State, Zip Code	е						
Abatement p	performed outside of	f normal facility	/ hours-			1 In Doule N	11.07035						
Describe: Other-Descri	ribe:					Lincoln Park, N	(1 0 10 3 3						
	check all that apply)				Пс	ull Containment w/n	enative pre	essure	Glove	oag pro	ocedu	ire	
Demolition	هـــــــــــــــــــــــــــــــــــــ	Renovation			170000000000000000000000000000000000000	lini-enclosure			☐ Non-fr	iable p	roce	dure	
$\boxtimes$ >3 sf or >3	lf □≥	160 sf or ≥260				illii Gildida				R	R	Е	E
Location of		Is location nor by maintenant	mally used solely ce/custodial	Descrir	ation of a	sbestos-containing		Amount	SE or	m	e p	n C	n
asbestos-co material to		staff(12)		materia	I (ACM)			(Specify LF)	SF 01	O V	a i	a p	L
abated in fa		Yes	No N/A							e NZ	-		-
				pipe insu	lation		90	f		M	片	片	ዙ
basement										#	H	片	計
							-			卄	H	古	盲
							_			恄			
			laulas ID# 1 C	ubic Yards	of Waste	Name of Register	ed Landfill					•	
Registered Waste B & G Restora	e Hauler ation, Inc.	19563	laulet le.	1 yards		Tullytown Res	source &	Recover	y Center		-		
City, State			Disposal I			City, State Tullytown, Pa	Д						
Lincoln Park,			11/8/11	Signature					Date				
Completed by (P Gordana Lun		Title Treasurer				Gordana Luni	2		10/28	3/201			

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

2011-209 Check # 4834. B & G proj. #: Name of Building Owner/Operator (2) Date of Notification (1) Kathy Cahayla & Karen Semko 1 10 1/12 18 1/11 OCT 3 1 2011 Type Notification Street Address Agencies Notified ☐ EPA 28 Barrington Avenue Initial ☐ DEP City, State, Zip Code ASSESTO. Amendment DOL Clifton, NJ 07011 Telephone Number Name of Contact **⊠** DOH Cancellation Kathy Cahayla & Karen Semko ☐ 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) Kathy Cahayla & Karen Semko Other (Private/Commercial Bldgs./Homes, etc. Street Address Bldg. Age # of Floors Square Feet 28 Barrington Avenue County Code (7) County (6) Current Use (Prior if being demolished) City (5) (State use only) residential Passaic Clifton, NJ 07011 Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. B & G Restoration, Inc. Street Address Street Address 105 Ryerson Road City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035 License Number Telephone Number Phone Number Project Manager for Monitoring Firm 0378 973-696-6869 Name of OSHA Monitor Sched. Completion Date (11) B & G Restoration, Inc. Scheduled Start Date (10) Street Address 11/8/2011 11/8/11 105 Ryerson Road Occupancy Status During Abatement (Check only one) ☑ Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Lincoln Park, NJ 07035 Describe: Other-Describe: Scope of Work (check all that apply) Glovebag procedure Full Containment w/negative pressure □ Renovation Demolition Non-friable procedure Mini-enclosure ≥160 sf or ≥260 lf  $\boxtimes$  >3 sf or >3 lf Is location normally used solely е е n Location of Amount by maintenance/custodial m p C Description of asbestos-containing (Specify SF or asbestos-containing 0 staff(12) a a material (ACM) LF) material to be V abated in facility (13) N/A No Yes M 27 lf pipe/elbow insulation basement 6 lf pipe insulation laundry room Name of Registered Landfill Cubic Yards of Waste NJDÉP Hauler ID# Tullytown Resource & Recovery Center Registered Waste Hauler 1 yard 19563 B & G Restoration, Inc. City, State Disposal Date City, State Tullytown, PA 11/9/2011 Lincoln Park, NJ 07035 Date Signature Gordana Luna Completed by (Print or Type) 10/28/2011 Treasurer Gordana Luna

DIALC OF THEW

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

Date of Notification (1)		NO	IIFICA	Name of Building	Owner/Operator (2)	MENT)E		177		1	
10/3/2011	- ·			WOODBRIDGE	PROPERTY LLC						
Agency Notified   ☑ EPA	Type No		1	Street Address 1548 S 13 <sup>TH</sup> STR	REET	00	OT 3	20	< 9	1	
☐ DEP	⊠ Ame			City, State, Zip C	ode					liant.	1
☑ DOL ☑ DOH	☐ Emer	rgency		PHILADELPHIA,	PA 19147	45.1	reads	1.5.			
□ DCA	(inclu		tification)	Name of Contact WILLIAM JULIAN		Telephone	Numbe	rug .	-)10-1	pa, en como	
				FACILITY IN	FORMATION	1. S. Angul S. May South S. M.	ay - 1975 - Paristy A.	Work #	-	-	
Name of Facility Where a FORMER ADAMS DOD	Abatemer GE	nt is Tak	ing Place (3	))	Type of Facility	(4)					
Street Address 450 KING GEORGES R	D	R			School (K-12 Subchapter 8 ( X Other (i.e. pri	2) Other than K-12) vate & commercia	al building	gs, ho	mes,	etc.)	
City (5) Woodbridge					Square Feet 20,000	# of Floors	<u> </u>	Bldg 30+	. Age	ě	
County (6) MIDDLESEX	County (	Code (7)	(STATE U	SE ONLY)		rior if being demo	lished)	30+			
Name of Monitoring Firm (8) AET, INC.	Hired by	Building	Owner	ASCM No. 0021	Name of Abater Alliance Enviror	ment Contractor ( nmental Systems,	9) Inc.				
Street Address 28 PENNELL RD	And the second s				Street Address 550 East Union	Street					
City, State, Zip Code 28 PENNELL RD, MEDI	IA, PA 190	063			City, State, Zip West Chester, F			*			
Project Manager for Mon ERIC HOUSEKNECHT	itoring Fir	m	Telephone 61089101		<u>Telephone No.</u> 610-701-9000	<u>Licens</u> 00508	e No.				
Start Date (10) 10/17/2011	Schedule 11/11/20		letion Date	(11)	Name of OSHA AET, INC.	Monitor					
Occupancy Status During				7.	Street Address 28 PENNELL R	D				-	
☐ Abatement Performed ☐ Other – Describe:	ed During d Outside	Entire P of Norm	eriod of Aba al Facility H	atement ours	City, State, Zip of MEDIA, PA 1902				-		
Scope of Work (Check al	II that app	ly)						V	-		
					☐ Full Containme ☑ Mini-Enclosure	ent with Negative	Pressure				
$\square \ge 3$ sf or $\ge 3$ lf $\square \ge 160$ sf or $\ge 260$ lf		Renova Demolitio			X Glovebag Pro Non-Exempted	cedure	le Proce	dure			
								A	baten	nent T	уре
Location of Asbestos- Containing Material (ACM) TO BE ABATED IN Facility (13)	Solely		mally Used atenance/ aff? (12)	Material (ACN insulation, s	of Asbestos Containing  M) (i.e., thermal systems urfacing, VAT, or other scellaneous)	Amou (Specify Si		Removal	Repair	Encapsulate	Enclosure
OFFICES AND	Yes	No	N/A	VAT& MASTIC		6420 SF					
WAREHOUSE, REPAIR SHOP, USED CAR			^	ROOFING		15900SF		х			
WAREHOUSE USED CAR				VIBRATION CL		4LF		X			
WAREHOUSE				TRANSITE EXH		125 SF 32 LF		X			
REPAIR SHOP ROOF AND USED			-	PANEL GLUE TRANSITE		50 SF 1420SF		X	-		
CAR					T. and the same of						
Name of Registered Was Freehold Cartage	ne Hauler		7011/06489	te Hauler ID No.	Cubic Yards of Waste 300	2	Name BFI Im	perial		ed Lar	ndfill
City, State Hazelton, PA	7.				Disposal Date TBD		City, S Imperia	<u>tate</u> al, PA			
Completed by Devin Blom	<u>Title</u> Project M	Manager			Signature BL	$\wedge$		<u>Date</u> 10/26			

NOTIFICATION OF ASBESTOS ABATEMENT): Name of Building Owner/Operator (2) Date of Notification (1) 10/3/2011 WOODBRIDGE PROPERTY LLC Street Address 1548 S 13<sup>TH</sup> STREET Type Notification Agency Notified ☑ EPA Initial □ DEP
☑ DOL City, State, Zip Code PHILADELPHIA, PA 19147 **⊠** DOH ☐ Emergency (including justification) ☐ DCA Name of Contact Telephone Number WILLIAM JULIANO ☐ Cancellation **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) FORMER ADAMS DODGE School (K-12) Subchapter 8 (Other than K-12) Street Address X Other (i.e. private & commercial buildings, homes, etc.) 450 KING GEORGES RD Square Feet # of Floors City (5) Bldg. Age woodbridge 20,000 30 +County (6) County Code (7) (STATE USE ONLY) Current Use (Prior if being demolished) **MIDDLESEX** VACANT Name of Monitoring Firm Hired by Building Owner ASCM No. Name of Abatement Contractor (9) AET, INC. Alliance Environmental Systems, Inc. 0021 Street Address Street Address 28 PENNELL RD 550 East Union Street City, State, Zip Code City, State, Zip Code 28 PENNELL RD, MEDIA, PA 19063 West Chester, PA 19382 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. **ERIC HOUSEKNECHT** 6108910114 610-701-9000 00508 Scheduled Completion Date (11) Name of OSHA Monitor Start Date (10) 11/11/2011 AET, INC. 10/17/2011 Occupancy Status During Abatement (Check only one) Street Address 28 PENNELL RD ☑ Facility Closed/Vacated During Entire Period of Abatement City, State, Zip Code ☐ Abatement Performed Outside of Normal Facility Hours Other - Describe: MEDIA, PA 19026 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure Mini-Enclosure ☐ Renovation Glovebag Procedure □≥ 3 sf or ≥ 3 lf X Demolition ☑ Non-Exempted (\*) and Non-Friable Procedure ⊠≥ 160 sf or ≥ 260 lf Abatement Type Location of Asbestos-Description of Asbestos Containing Repair Containing Material Remova Is Location Normally Used Material (ACM) (i.e., thermal systems Amount capsulate (ACM) TO BE Solely by Maintenance/ insulation, surfacing, VAT, or other (Specify SF or LF) ABATED IN Facility Custodial Staff? (12) miscellaneous) (13)Yes No N/A X VAT& MASTIC 6180 SF OFFICES AND 11720SF ROOFING WAREHOUSE X VIBRATION CLOTH 4LF WAREHOUSE X TRANSITE EXHAUST 32 LF WAREHOUSE X TRANSITE ROOF 580 SF X Name of Registered Waste Hauler NJDEP Waste Hauler ID No. Cubic Yards of Waste Name of Registered Landfill 07011/06489 Freehold Cartage BFI Imperial City, State Disposal Date City, State Hazelton, PA TBD Imperial, PA Signature Completed by Date Devin Blom Project Manager 10/19/2011

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

SAPA--

#### State of New

(r ursuant to NJAC 8:60 and 12:120 Jersey
NOTIFICATION OF ASBESTOS ABATEMENT)

Date of Notification (1)	110	11110111	Name of Building C	Owner/Operator (2)		(n) to	-		2	
10/3/2011			WOODBRIDGE PF	ROPERTY LLC		NE T		lg —	5	
Agency Notified	Type Notification	<u>n</u>	Street Address 1548 S 13 <sup>TH</sup> STRE	EET ,	111 11 0	CT 3	1 :	011		
⊠ EPA □ DEP	Initial ☐ Amended		City, State, Zip Coo	de ,					1	i
☑ DOL	☐ Emergency		PHILADELPHIA, P.	A 19147	157			di v		17.7 Mar American
DCA	(including jus	stification)	Name of Contact		LL_Telechone	Number	Jane C			1
	☐ Cancellation	100	WILLIAM JULIANO	)		تامير	- 5-4			
			FACILITY INFO	ORMATION					***	21=4
Name of Facility Where FORMER ADAMS DOD	Abatement is Tak	ing Place (3	1	Type of Facility (4)						
FORWER ADAMS DOD	GL			School (K-12)						
Street Address 450 KING GEORGES R	RD			Subchapter 8 (Othe X Other (i.e. private		buildings	s, hom	nes, e	etc.)	
City (5)				Square Feet	# of Floors		Blda.	Age		
WILLINGBORO				20,000	1		30+			
County (6)	County Code (7	) (STATE US	SE ONLY)	Current Use (Prior	if being demolis	shed)			-	
BURLINGTON				VACANT		54-				
Name of Monitoring Firm (8) AET, INC.	n Hired by Buildin	g Owner	ASCM No. 0021	Name of Abatemen Alliance Environme						
			0021			11.1.552				
Street Address 28 PENNELL RD				Street Address 550 East Union Str	eet					
City, State, Zip Code				City, State, Zip Coo						
28 PENNELL RD, MED	DIA, PA 19063			West Chester, PA	19382					
Project Manager for Mo ERIC HOUSEKNECHT		Telephone 610,89101		Telephone No. 610-701-9000	License 00508	No.				
Start Date (10) 10/17/2011	Scheduled Con 11/11/2011	pletion Date	(11)	Name of OSHA Mo AET, INC.	nitor					
Occupancy Status Durin	l ng Abatement (Ch	eck only one	<u>e)</u>	Street Address 28 PENNELL RD						
☐ Facility Closed/Vaca	ted During Entire	Period of Ab	atement	City, State, Zip Coo	le .					
☐ Abatement Performs ☐ Other – Describe:	ed Outside of Norr	nai Facility F	iours	MEDIA, PA 1	1000 A					
Scope of Work (Check a	all that apply)			0405						
				☐ Full Containment ☐ Mini-Enclosure	with Negative F	Pressure				
≥ 3 sf or ≥ 3 lf	☐ Renov			X Glovebag Proce	dure					
⊠≥ 160 sf or ≥ 260 lf	X Demolit	ion		⊠ Non-Exempted (*)	and Non-Friable	le Proced	dure			
							Al	baten	nent T	ype
Location of Asbestos-			Description o	f Asbestos Containing			R	R	ш	
Containing Material (ACM) TO BE	Is Location No Solely by Ma		Material (ACM	l) (i.e., thermal systems	Amou		Removal	Repair	Encapsulate	Enclosure
ABATED IN Facility	Custodial S			urfacing, VAT, or other scellaneous)	(Specify SF	or LF)	val	_	sula	osur
(13)				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					ē	Ф
CERTAGES AND	Yes No		XIATO MA	CTIC	6180 SF					-
OFFICES AND		X	VAT& MA	ASTIC	11720SF		X			
WAREHOUSE			ROOFING		1		Λ			
WAREHOUSE			VIBRATION		4LF		X			
WAREHOUSE			TRANSITE I	EXHAUST	32 LF		X			
ROOF			TRANSITE		580 SF		X			
Name of Registered War Freehold Cartage	aste Hauler	NJDEP Was 07011/0648	ste Hauler ID No.	Cubic Yards of Waste 300		Name BFI Im			ed Lar	<u>nafill</u>
City, State		3, 51 1, 60-10		Disposal Date		City, S	tate			
Hazelton, PA				TBD	,	Imperia	al, PA	y.		
Completed by Devin Blom	Title Project Manage	er		Signature /g			<u>Date</u> 10/3/2	011		

D&S Proj. #: MS 11-	419						Abatement and 12:120)	and the little of	00	) Supraga of the state of	71.	7	V	7
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Date of Notification (1)		Na	me of Buil	ding Owne	r/Operator (2)			1	可信息	15. 1			++	1.6
1 10 1/12 15 1/11 11	_1	ll F	RANK E	BARTLET	Т				W		200		ij	
	otification	Str	eet Addres	ss			1		111 111 00	T 3 1	(Ú)	1		
EPA Initial	ded	11 7	-23 CAN	MPBELL	ROAD			3	111111					-
DEP Amendn		Cit	y, State, Z	ip Code				- 1		T8105 D	WHO	į &		1
DOL ☐ Emer		-    :	FAIR LA	WN, NJ	07410				AS	ALS (IS D	HG.		and the second of	
DOH (inclu	ding		me of Con						Telephone	Number		100		
TI DCA	cation) ellation		FRANK	BARTLE	TT				201214	4.82				
				FACIL	ITY INFORM	ATION					2000	5-1		
Name of facility where abate	ment is ta	king plac	e (3)					Тт	ype of Facility (4	·)				
			-						School	(K - 12)				
FRANK BARTLETT								4		pter 8 (O			-12)	
Street Address										Private/Co Homes, e		rcial		
34-01 SOUTHERN DR	IVE									# of Floor	-	Bl	dg. A	ge
City (5)	No.	Count	y (6)			Cour	nty Code (7)	1  _						
		0.000.000				(Stat	e use only)		Current Use (Pri	or if being	g dem	olishe	ed)	
FAIR LAWN	511	BER	Property (Section 19)			- 1 7	Name of Abotema	<u> </u>	teneter (0)					
Name of Monitoring Firm Hi	red by Bldg	g. Owner	(8)		ASCM No.		Name of Abateme							
						_	D & S RESTO Street Address	)RAT	ION, INC.					
Street Address							20 California	A 110						
City State Vin Code					-		City, State, Zip Co							
City, State, Zip Code							Paterson, NJ		2					
Project Manager for Monitori	na Firm		l Ph	one Numbe	er	-	Telephone Number		-	License	Numb	er		
Project Manager for Monitori	g		1	ono mamb		- 11	973-345-80				0159	400	MILTON.	
Otat Data (10)		TSchool	Completic	on Date (11			Name of OSHA M	onitor						
Start Date (10)				ni Date (11	,		D & S Restor	ration,	Inc.					
11/04/11		11/11/				_	Street Address							
Occupancy Status During Ab				mant			20 California		ue					- To E
Facility closed/vacated Abatement performed	outside of	normal fa	d of abate	rnent. 'S-			City, State, Zip Co	de						
— December						-	Paterson, NJ	0750	3					
Other-Describe: NOR		71.5				_	Taterson, 13		Containment w	/nogotivo	proce	uro		
Scope of Work (check all the same same same same same same same sam	_								i-enclosure	negative	press	uie		
Andread State		enovation	1					🛛 Glo	vebag procedur					
≥160 sf or ≥260 lf		emolition						No	n-Exempted (*)	and Non-	riable I R			
Location of	ls	location y mainter	normally nance/cus	used solely todial	1				Amount		е	R	E n	E
asbestos-containing material (acm) to be		taff(12)			material (		sbestos-containing	)	(Specify S	F or	m	p a	c a	n
abated in facility (13)		Yes	No	N/A					LF)		V	i	p	L
	I DIG				PIPE INSU	ILATI	ON	-	30 L FT		e	$\Box$	П	tr
BASEMENT ABOVE DROP CELL	LING		$\overline{}$								ī	$\overline{\Box}$	Ħ	厅
-				╬							盲	一	Ħ	恄
Registered Waste Hauler	- NIC		P Hauler		ubic Yards of	Waste	Name of Registe			COMED	v			
D & S RESTORATION	, INC.	135		Disposal D	YD		City, State	IN, KE	SOURCE RE	COVER	1			
City, State PATERSON, NJ 0750	03			11/07/1			TULLYTOW	N, PA	A					
Completed by (Print or Type		itle		-	Signature					Date				
BOGDAN JOLDZIC		RESID	ENT							10/25/	11			
ASP 41	* D	o not use	this form	for asbesto	s licensure ex	empted	activities.							

D&S Proj. #: MS 11-423						s Abatement 0 and 12:120)		) E C E			1		
Date of Notification (1)	111	lame of Bu	ilding Own	er/Operator (2)			I kee	1			1		
1 0 / 2 5 / 1 1		JOSEPH	& ROSE	BROCIOUS		7		∬ 0CT 3	1 20	1			
Agencies Notified Type Notificat	ion S	treet Addre		Dittocioob			1 23 1	1		: 1	_		
☐ EPA ☐ Initial ☐ Amended		241 LIN	DEN AVI	ENUE		Ď,	i i	L. ASSESSION	PACE				
Amendment #:		City, State, 2					L	GAVEARAS LICES		-		Ť	
DOL Emergency		BELLE	VILLE, N	J 07109			4,5,	4cq				er er d	
DOH (including justification)	N	ame of Cor					Married Land	Telephone	Number				1
DCA Cancellation		JOSEPH	I & ROSI	E BROIOUS				4	- 18	•	MILLIONS STATE		
			FACI	LITY INFORMA	OITA	N							
Name of facility where abatement is	s taking pla	ace (3)					T	ype of Facility (4					
JOSEPH & ROSE BROCIOU	21							=	(K - 12)				
Street Address					_		41		pter 8 (C Private/C			-12)	
								Bldgs./l	Homes, e	tc.		d = 0	
241 LINDEN AVENUE City (5)	I Cour	nty (6)			Col	unty Code (7)	-  `	Square Feet	# of Floor	'S	В	dg. A	ge
Oity (O)		, (-)				ate use only)	-	Current Use (Pri	ior if bein	g dem	olish	ed)	
BELLEVILLE		SEX											
Name of Monitoring Firm Hired by	Bldg. Owne	er (8)		ASCM No.		Name of Abateme	ent Cor	tractor (9)					
					_	D & S RESTO	RAT	ION, INC.					
Street Address						Street Address							
City, State, Zip Code					_	20 California City, State, Zip Coo							
City, State, Zip Code						Paterson, NJ		2					
Project Manager for Monitoring Firm	1	I Pi	none Numb	er	-	Telephone Numbe	The street of the street of	-	License	Numb	er		
, , , , , , , , , , , , , , , , , , , ,						973-345-802			0	0159			
Start Date (10)	Sched	J. Completi	on Date (11	1)	_	Name of OSHA M					1/4.		
Not some and descriptions of						D & S Restor	ation,	Inc.					
11/07/11 Occupancy Status During Abatemer	11/18				_	Street Address							
Facility closed/vacated during			ment.			20 California . City, State, Zip Co		1e					
Abatement performed outside						City, State, Zip Co	uc						
Describe: NORMAL H.	IOURS				-	Paterson, NJ	07503	3					
Scope of Work (check all that apply						Т Т	Full	Containment w/	negative	press	ure		
$\boxtimes > \underline{3} \text{ sf or } > \underline{3} \text{ If}$	Renovation	on					Min	i-enclosure					
>160 sf or ≥260 lf	Demolition	n						vebag procedure n-Exempted (*) a		friahle	nroce	dura	r:
Location of			used solely	1		-		- Exempled ( ) e	and Hon	R	R	E	
asbestos-containing	by mainte staff(12)	enance/cus	todial			asbestos-containing		Amount		e m	e p	n c	E n
material (acm) to be abated in facility (13)	Yes	No	N/A	material (	ACM)			(Specify SF LF)	- or	o v	a	а	C
> \$1000000000000000000000000000000000000	163	INO	IN/A			A State of the last				е	ŗ	р	L
BASEMENT				PIPE INSU	A STATE OF THE STATE OF			28 L FT		X			111
BASEMENT BOILER		LX		BOILER IN	ISUL	ATION		45 SQ FT		X			쓔
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Registered Waste Hauler	IN.ID	EP Hauler	ID# I C	ubic Yards of V	Vaste	Name of Register	red Lar	ndfill		Ш	Ш	Ш	
D & S RESTORATION, INC.		506		YD		TULLYTOW			COVER	Y			
City, State			Disposal D		Schronich	City, State							
PATERSON, NJ 07503			11/08/1			TULLYTOW	N, PA		Data				
Completed by (Print or Type) BOGDAN JOLDZIC	Title PRESID	ENT		Signature					Date 10/25/	11			
ASB-41		6372565V/10W	for asbesto	s licensure exe	empte	d activities.			1				

Olale ULIYU Notification of Asbestos Abatement (Pursuant to NJAC 8:60 and 12:120) D&S Proj. #: MS 11-424 Name of Building Owner/Operator (2) Date of Notification (1)  $\frac{1}{1} \frac{0}{1} \frac{1}{1} \frac{2}{1} \frac{5}{1} \frac{1}{1} \frac{1}{1} \frac{1}{1}$ JOHN LEAHY Type Notification 3 Agencies Notified Street Address Initial 168 MAIN STREET Amended City, State, Zip Code A.t. Amendment #: WOODBRIDGE, NJ M Emergency Telephone Number (including Name of Contact justification) JOHN LEAHY 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) JOHN LEAHY Other (Private/Commercial Bldgs./Homes, etc. Bldg. Age Square Feet # of Floors 168 MAIN STREET County Code (7) County (6) Current Use (Prior if being demolished) (State use only) **MIDDLESEX** WOODBRIDGE Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. D & S RESTORATION, INC. Street Address 20 California Ave. City, State, Zip Code City, State, Zip Code Paterson, NJ 07503 License Number Telephone Number Phone Number Project Manager for Monitoring Firm 00159 973-345-8020 Name of OSHA Monitor Sched. Completion Date (11) Start Date (10) D & S Restoration, Inc. Street Address 11/07/11 20 California Avenue Occupancy Status During Abatement (Check only one) City, State, Zip Code Facility closed/vacated during entire period of abatement. Abatement performed outside of normal facility hours-Describe: Paterson, NJ 07503 Other-Describe: NORMAL HOURS Full Containment w/negative pressure Scope of Work (check all that apply) Mini-enclosure Renovation  $\boxtimes$  >3 sf or >3 lf Glovebag procedure Non-Exempted (\*) and Non-friable procedure Demolition E Is location normally used solely Ε е e Amount by maintenance/custodial n Description of asbestos-containing m p C (Specify SF or C staff(12) 0 material (ACM) a a LF) V N/A Yes No 35 L FT PIPE INSULATION

 >160 sf or ≥260 lf Location of asbestos-containing material (acm) to be abated in facility (13) BASEMENT Name of Registered Landfill Cubic Yards of Waste NJDEP Hauler ID# Registered Waste Hauler TULLYTOWN, RESOURCE RECOVERY 1 YD 13506 D & S RESTORATION, INC.

Disposal Date City, State

☐ EPA

DOL.

DOH.

Street Address

Street Address

10/26/11

City (5)

DCA

DEP

City, State

TULLYTOWN, PA 10/27/11

PATERSON, NJ 07503 Signature Completed by (Print or Type) Title BOGDAN JOLDZIC PRESIDENT

Date 10/25/11 Date: 1 1 1 104

D & S Restoration, Inc. 20 California Avenue Paterson, NJ 07503

Worksite Address:

168 Main st

Worlder de

To Whom It May Concern:

I am the owner of the above referenced Worksite address. The furnace located in my basement is inoperative and needs to be replaced ASAP in order to heat the house.

The furnace is insulated with asbestos material. The asbestos needs to be removed prior to installation of the new furnace.

I understand that various Federal and State Agencies require written 10-day notification prior to starting any asbestos abatement work, and that it may be possible to start the asbestos abatement work sooner than the 10 day period in the event of an emergency.

Since I currently do not have heat in my house, I feel that the asbestos abatement work should be given immediate attention.

Please accept this letter as a request to commence with asbestos abatement acitivities as soon as possible and upon receiving approval to do so by the applicable l'ederal and State Agencies having jurisdiction.

If you have any questions or comments, please do not hesitate to contact me at the tollowing telephone number:

Very truly yours,

Printed Name of owne

gignature of bwner

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

Check# 1690

Date of Notification (1)				Name	of Building (	Owner/Ope	erator (2)	) 1				1111	H.	
10-24-11	,			Rutg	ers-The	State	Univ	ersity c	of Nev	Jerse	ev.			
Agencies Notified	Type Notification	1		Street	Address						~ :			
₩ EPA	XI Initial				oad 1,		ng 40	186		OCT	3.1			
DEP DOL	☐ Amended Amendmen	t #			tate, Zip Co ataway ,		0054							
	☐ Emergency	(including	g		of Contact	- U	8854							
DOH DCA	justification  Cancellation	)			Smith				Tel	ephone Nu	ımber			
D DCA .	L Cancellatio	1	1			DMATION		· ·	1		- 25			
Name of Facility Where	Abatement is Takin	ng Place	(3)	FAC	ILITY INFO	KWATION		ype of Facility	(4)					
Blake Hall														
Street Address					V		- 6			er than K-1	2)			
93 Lipman Driv	ve						郑	Other (i.e.	private 8	& commerc	ial bui	ldings	, hom	es,
City (5)							So	etc.) quare Feet	# 01	Floors		Bldg.	Age	
New Brunswick							2 - 3,000	20,000	2		- 1	45y		
County (6)				County	Code (7)		700000000000000000000000000000000000000	urrent Use (Pr		na demolis	hed)	101		
Middlesex				(STATE	USE ONLY)			lassrooms			,			
Name of Monitoring Firm		Owner (8	)	ASC	M No.	Na	ame of A	Abatement Co	ntractor	(9)				
ATC Associate	eş,Inc.					P	lvmoi	uth Envi	ronme	ntal C	n - 1	Inc.		
Street Address						St	treet Add	dress			0.7.			
Three Terri I	Lane					9	23 Ha	aws Aveni	ue					
City, State, Zip Code								e, Zip Code	and the same					
Burlington, N.						N	orris	stown, Pi	A 194	01				
Project Manager for Mon				Telepho		Te	elephone			License N	10.	-		
Brian Kearney	<i>!</i>	Epilinea America		609-3	386–8800	6	10-23	39-9920		0039	8			
Start Date (10)				npletion	Date (11)			SHA Monitor						
11-2-11		12-2				P.	lymou	th Envir	conmer	ntal Co	).,I	nc.		
Occupancy Status During	Abatement (Chec	k Only O	ne)		***************************************		reet Add							
☑ Facility Closed/Vaca	ated During Entire	Period of	Abaten	nent				ws Avenu	ie					
☐ Abatement Perform ☐ Other – Describe: _	ed Outside of Norn	nal Facilit	y Hours	\$				, Zip Code						
						_ No	orris	town, PA	19401					
Scope of Work (Check A	I That Apply)													
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≥160 sf or ≥260 lf			Demolit	ion				Mini-Enclosur Glovebag Pro						
		-						Non-Exempte		Non-Friat	ole Pro	cedur	е	
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Asbestos-Containing TO BE ABA			ed Sole			s Containir				nount	_		ш	
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Name of Registered Wast	e Hauler	-		JDEP W		Cubic Yard	is	Name of	Register	ed Landfill	.1			
Newark Carting				auler ID 509	No.	of Waste		CDOL	ic The					
City, State			4:	509		10 Disposal D		City, State	S,Inc	•				
Newark, NJ						12-2-1		Morr	isvil	le,PA				
Completed by		Title	de			Signal		7	77	Da	te	-		
Timothy E. Bry	an	4.50050050	e-Pre	eside	nt	1	1	1 1	121		)_24·	-11		

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

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Date of Notification (1)	20/11		Name of	Building	Owner/Operator	ER INC.			
Agencies Notified	Type Notification		Street A			ERON DA	007	3 1 :	011
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□ 00H	justification)  Cancellation		Name of		DME		Telephone Number	MY	
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Name of Facility Where		Place (3)				Type of Facility (4			
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	EMAY	0-	County USE O	Code (7 VLY)	) (STATE		ANT		
Name of Monitoring Firm		- Dwner	ASCM NO	o T	Name of Abatem	co LN			
(8) N	/A						, ,		
Street Address 7.	.,				369 5	S. SPRUC	E AVE.		
City, State, Zip Code					Ciry. State. Zip C	COO. CLI SHAD	E, NJ.08	105	
I. C	eliagos Firm	I. Yel	ephone No	D.	Yelenmone No.		License No.		
Project Manager for Mo					TOCUL	79-0472			
Stan Date (10)	Scho	duled Compl	l l Date	(11)	JOSE	WKALEN	M		
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En commenced Naca	ted During Entire Pr	enod of Abai	errican					•	
Abatement Performe	d Outside of North	a racally rio			MAP	CE SHADE	=, N, J, 0	805	2
Scope of Work (Check	all that apply)		,		Full Co	ontainment with Ne	gative Pressure		
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2160 st or ≥260 H		Is Loca			Non-E	Xell place ( ) c. i.e.		20	aterrien. Type
		Norma Used Sol	lely by		Description	of	Amount	T	5,
Asbesios Containing	Material (ACM)	Mainten	ance/	Asbe (i.e	sios Containing M thermal system surfacing. VA	s insulation.	(Specity SF & LF)	Removal	Enc. aprid
TO BE AB	MY	Stat (12	72	74 M	other miscellan	neous)		200	M (J. II)
(13)		Yes N	o NIA				30.04	+-	-+
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SIDING		-	-					+-	
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			NOEP	Mage .	Cubic Yards	Name of Re	gistered Landfill	1	,
Name of Registered	Vasie Hauler		Hauler II	O No.	of Waste	_	1, C, M, U		
City State					Disposal Date	e City. State	DBINE, M	J,J	
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	NO		CATION	ate of New OF ASBES to NJAC 8:	STOS	ABATE			E G 161	UE	4/	69	13
Date of Notification (1) 10/25/2011				f Building O and Eilee			(2)				-105-2-2-2		
Agencies Notified Type Notification		1000	Street A	ddress azel Stree	et				0CT 3 1	M)			
EPA Initial  DEP Amended  DOL Amendment				te, Zip Cod , NJ 070				L	ASSESTOR OF		·	3	
□ Emergency     institution     □ DCA     □ Cancellation				Contact Fierro			*	J-S-Seg	Telephone Nu		,		
			FACI	LITY INFOR	RMATIC	ON		1000					
Name of Facility Where Abatement is Takir Private Residence	ng Place (3)						☐ s	of Facility (4	2)	12)			
Street Address 385 Hazel Street							×		8 (Other than K-1 rivate & commerce		dings	, hom	es,
City (5) Clifton							Square 2500		# of Floors 2		3ldg. A	\ge	
County (6) Passaic County	8			Code (7) USE ONLY)		_	Currer	t Use (Prid	or if being demolis	shed)			
Name of Monitoring Firm Hired by Building	Owner (8)		ASCM	1 No.				ement Con ontracting					
Street Address	40-40						Address enner						
City, State, Zip Code				<del></del>			tate, Zip	Code 07013					
Project Manager for Monitoring Firm		T	elephor	ne No.			one No 389-62		License i 01099	No.			
Start Date (10) 11/07/2011	Scheduled 11/08/20		pletion [	Date (11)		Name	of OSH	A Monitor					
Occupancy Status During Abatement (Che						Street	Address	3					
Facility Closed/Vacated During Entire Abatement Performed Outside of Non Other – Describe: 8:00am - 4:00pm	Period of Ab mal Facility F	oateme Hours	ent		_	City, S	tate, Zip	Code	dist 17				
Scope of Work (Check All That Apply)		100000		0.307									
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Asbestos-Containing Material (ACM)  TO BE ABATED  In Facility  (13)	Main Custo	tenan	ce/		hermal surfac	aining N systems ing, VA niscellan	insulat T, or		Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
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Basement	-	х		Pipe I	Insula	tion ar	nd Fitti	ngs	145 LF	×			
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Name of Registered Waste Hauler Pyramid Contracting Corp		Ha	auler ID 1613	No.	of Was 2			GROWS					
City, State Clifton, NJ 07013					Dispos	al Date		City, State Morrisvi					
Completed by Dimo Golcev	Title V. Pre	sider	nt		Si	gpature	1	15		ate 0/25/2	2011		
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Date of Notification (1)		N			ner/Operator		DOT 3	4 . 7	n in		
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lame of Facility Where Abatement is Taking P	lace (3)					Type of Facility (	4)				
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treet Address						Other (i.e.	private & commercial	buildi	ngs, h	omes	š,
133 SUSSEX ST						etc.)	# of Floors		lg. Ag		
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Project Manager for Monitoring Firm			relephon	e No.	Telep	hone No.	License No.			25.00	8100.0
roject Manager for Monitoring Firm		1	, c.c.p		201	-329-744	4 0038	8			
tart Date (10)	chedule	d Com	pletion D	ate (11)	Name	of OSHA Monitor	. 1 0				
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Other - Describe: 7 Am To	26	7-1			Sou	ith Hacke	nsack ,N.J	. (	1/0	00	
Scope of Work (Check All That Apply)			54								
2 ≥3 sf or ≥3 lf	Committee to continue	enova				Full Containn Mini-Enclosu	nent with Negative Pr	essun	3	8.00	
≥160 sf or ≥260 lf	D	emoliti	ion .			☐ Glovebag Pro	ocedure	D			
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Location of	N	Normal	ly		Description	on of				_	
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6D-vistorial Menta Haviler		IN	NUDEP W	aste	Cubic Yards		of Registered Landfill		N. A. Section		
Name of Registered Waste Hauler			lauler ID	No.	of Waste	-   Cumb	erland Cou	ınt	y I	an	df
DJM Transport ,Inc		2	2393		Zc					-	:
City, State	=				Disposal Da	ite/ City, St	als . -burnah DA	17	243	,	•
South Kearny N.J. 0	7032	۷	+ 1			net Net	vourgn PA,	ite .	2-72		
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J. MAIORANO	Es	T1Ma	acor		1	المارينين إلى		٠٠	-	+-	
South Kearny N.J. C	Title		ator		Signat	ure doison	vburgh PA,	ite		5/1	1

Date of Notification (1)		T	Name c	4 SulkPru (	XVIII 17 Operator	(2)	FRIEN.	tions of the same	Signatu	100	A . /	100
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O-25-2011 gencles Notified Type Notification			Street A		- KIN U		111-5			-		
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some of Facility Where Abatement is Taldin 195. SCOLAUO freet Address 45 ST. JOSEPH BL	70	)) 	•			11 11 11	of Facility ( School (K-1 Subchapter Other (Le. ; etc.)		2) 131 budi	ldings,	horre	78,
hy (5) .						- Sqtm	ere Feet	# of Floors	3.5	A. BINE		-1
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tert Date (10) 0 - 2.7 - 20 U	Schedul			Date (11)	Name Ome	of OS	HA Monitor Envir	onmental	Ser	vic	es	-
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My State South Kearny N.J.	07032						1	ourgh PA,	17	247		. !
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Date of Notification (1)				f Building Owner/			OCT 3	1 2	011		37
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Agencies Notified Type Notification			Street A			-	Ĺ			4.1	
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D DEP D Amended		Ī	City, Sta	ate, Zip Code		L	Eller I				
DOL Amendment			5	SOMERSE	7	NJ OF	8873				
☐ Emergency	including	1		f Contact			-Telephone Nur			-,4	
☑ DOH justification) □ DCA □ Cancellation		- 1		s. Norris				2	9	L	
L DOA L Cancellation			, ,	ILITY INFORMAT	ION		_ C			,	_
Name of Facility Where Abatement is Takin	g Place (3	3)	1,70	ETT NO GIGINA		Type of Facility	(4)				
Ms. Norri		,	95							22	
Street Address					-	☐ School (K-	-12) er 8 (Other than K-12	2)			
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307 ELIZABE	TH	Ac	13			etc.)					
City (5)						Square Feet	# of Floors	.   В	ldg. A		_
Somerset	#h					2300			15	330	-
County (6)				Code (7)			rior if being demolish	ned)		,	
SOHERSET			(STATE	USE ONLY)		RE	SIDEN CE				- 1
Name of Monitoring Firm Hired by Building	Owner (8)		ASC	/I No.	Name	of Abatement Co		87			$\neg$
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Street Address		-	٠			Address					$\dashv$
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City, State, Zip Code						5	0:		,		. 1
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Occupancy Status During Abatement (Chec	k Only Or	)e)			Street	Address					
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ASB-41 (R-06-08)

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

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October 25, 2011

Re: EMERGENCY REQUEST LETTER

8 Pearl Street Summit, NJ 07901

To whom it may concern:

Our boiler needs to be replaced and we were informed by Air Group (the company doing the replacement) that we must have the asbestos insulation on the boiler removed before the boiler can be removed. Please consider this an emergency and waive the 10 day waiting period as we are without heat and freezing in the evening.

Thank you for your assistance with this matter.

Sincerely,

Mr. and Miss Reed



ראל אחי · בום קום האדה

CK # 10/64 200.2

S. Panetamars

State of New Jorsey

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Street Address					Street Address	topher St					
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Project Manager for	Monitoring Fi	rm Tel	ephone Numb A	er	Telephone Numb (973)744		I	icense		ber	
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Date of Notification (1) 10/21/2011					f Building e Mana			(2)	m) E	GE	1 17	F	Part of the last o		
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Date of Notification (1) 10/25/11 Chk:1594 \$200				of Buildir umasa C	ng Owner/C Ochaia	Operato	r (2)	M	007	0.4	T-1		Total Contract	
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County (6) Bergen			County (STATE	Code (7)	n	_	Curre	nt Use (Pr	rior if be	ing demol				
Name of Monitoring Firm Hired by Build Detail Associates	ing Owner (8	3)	ASC	M No.		Name Lilich	of Abat Corp	ement Co oration	ntractor	(9)	**********			
Street Address 300 Grandview Avenue							Addres McBrid	s de Aven	ue					
City, State, Zip Code Englewood, New Jersey 08631								Code Park, N	ew Jer	sey 074	24			******
Project Manager for Monitoring Firm Stephen Jaraczewski				69-6708	3	Teleph 973-2				License 01104	No.			
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#### State of New Jersey

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Name of Monitoring Firm Environmental Desi	Hired by Building gn Inc.	Owner (8)		ASCN	No.				ement Cor oration	itractor (9)				
Street Address 5434 Kings Avenue	Suite 101					314 (22)	Street Address 606 McBride Avenue							
City. State, Zip Code Pennsauken, New	lersey 08109	of Permi		m, NO. Hali D					o Code Park, Ne	w Jersey 07	124	III		
Project Manager for Mon Tom Pruno	toring Firm		100	Telephone No. 609-744-7462				225-84		License 01104	No.			
Start Date (10) 10/26/11	fines down for	Scheduled 10/27/11		Completion Date (11)					A Monitor Inmental	Labs	tear fe			
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City, State Woodland Park, New	Jersey 07424	Disposal Date City, State 10/2711 Woodland Park, New Jers						Jerse	y 074	124				

Completed by

Tatiana Kalenikova

Title

Vice President

Date

10/25/11

Signature

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Date of Notification (1) 10-25-11		1000		Building Owner nergy Corp.	/Operator	(2)						
Agencies Notified Type Notification			Street Ac 265 Ma	ldress ain Street			OCT :	3 1 2011		LI)		
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			FACIL	ITY INFORMA	TION &		Transia.		STRVC			
Name of Facility Where Abatement is Taking Street Address Hibernia/Green Pond Road, Morris	v.=		ord Roa	nd		Other (i.e	(-12) ter 8 (Oth	er than K-12 & commercia	) al build	dings,	home	es,
City (5) Rockaway Township						etc.) Square Feet N/A	# o	f Floors A	1000	ldg. A	ge	
County (6) Morris			County C	Code (7) ISE ONLY)		Current Use (F Manhole	Prior if be	ing demolish	ed)			
Name of Monitoring Firm Hired by Building Cone Source Safety & Health Inc.	Owner (8)		ASCM	No.		of Abatement C acle Environ						
Street Address 140 South Village Avenue, Suite 13	30			1)	1000000	Address Broad Street						
City, State, Zip Code Exton, PA 19341						r, State, Zip Code arlstadt, NJ 07072						
Project Manager for Monitoring Firm Brian Hoverdon		Telephor 908-30	ne No. 9-1021	100000000000000000000000000000000000000	hone No. 939-6565		License N 00756	0.				
Start Date (10) 10-27-11	Schedule 11-04-1		pletion [	Date (11)		of OSHA Monit n-Air Inc.	or					
Occupancy Status During Abatement (Chec	k Only One	e)				Address			2///1/22			
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe:	Period of A al Facility	batem Hours	ent		City, S	9 Jackson Av State, Zip Code	ANT CONTRACT - 420	101				
Scope of Work (Check All That Apply)					Long Island City, NY 11101							
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Hadaman Conduit Floor Coblo			X		able W	ran	1	500LF	x			
Underground Conduit: Elect. Cable			^		able VVI		,					
Name of Registered Waste Hauler		IN	JDEP W	aste Cub	ic Yards	Name	of Regist	ered Landfill				
ATC, Inc. / TriState Transfer (50071				/aste	Mine	erva Enterprises						
City, State Shirley, NY / Bronx, NY				Disp TBD	osal Date	City, S	tate resburg	, OH 4468				
Completed by Joe Patrick	ct Manager				3 th		Da 10	te )-25-	11			

No not use this form for asbestos licensure exempted activities.

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7)

2099				8:60 and 12:12	2.4	NE PE		1, 1	7-
10 /2 5 / 11		Name .		O M GC		Harvier L		-	1
gencies Notified Type Notification		Street	Address	305 La	wois A	€- 007 ·3	00	1	
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1 1 1		FAC	ILTY IMP	ORMATION					
ame of Facility Where Abatement is Takin	g Place (3)				Type of Facility    School (K-12)	<u>:</u> )			
1 ES IDENCE reel Address 620 SIMAS	on d.	,F			Subchapter	8 (Other than K-12) rivate & commercial	bulan	Qs.	
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me of Maritaning Firm Hired by Building					ico In				===
eet Address				369	S. SPRU			_	
y, State, Zip Code				Ciry. State, Zip	PLO SHA	DE, NJO	805	۲	_
ged Manager for Monitoring Firm	\.\ <sup>!</sup>	elephone i	No.	856-7	79-047		14		
an Date 1101	duled Com	pletion Da	le (11)	Name of OSHA	PKALEN	M			
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Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm	eriod of Ab	atement			2	É, N, 5,	08 D.	 5 7	
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Name of Registered Waste Hauler  KLEMCO INC.		Hauler	0 %.	Ol Masie		1, C, M, C			

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

Signature

Date

Ciry State MAPLE SHADE

EMM

Completed By

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Name of Monitoring Firm Hired by Bul (8) MECS	Iding Owne	11	ASG	M No.		meni Contractor				- 44	
Street Address					Stroot Address	vens Environ	ımontal Serv	ices,	inc.		
PO Box	x 341						Box 322				
City, State. Zip Code Crosswicks,	NIORS	15	-		City. State, Zip (		ATT CORAL				
Project Manager for Monitoring Firm	143 083		gphon	100	Telephone No	Allentov	vn, NJ 08501	_		_	
William Weisgarber J	lr.	11		98-4070		59-9688	LILBINA INC	0049	23		
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City, Stele Allentown	, NJ		<u> </u>		Disposal Mate	Cby. State	Fullytown,			<u> </u>	
Completed By	Title			<u></u>	Mahaura	1	Date			==	=
Mahlon F. Stevens	Pro	vject	Мап	ager	MI			10/25	/11		_

NJOSEPI OF Hea	th & Senior Services	
Date: 10/25	nature)  Time: 0446	1

Date of Notification (1)	/25/11			Nan	ne of Buildi	ng Owner/Operato Boro	or (2) rugh of Moun	t Ephriam					
Agencies Notified	Type Notif			Stre	el Address		1 S. Blackhor	se Pike				_	
IZ DOL		ed menl #_ ency (includi	ng	City.	State, Zlp		Ephraim, N	J 08059					
DOH DOA	Cancell			Nen	e of Conta T	crry Shannon		Telephone Num	ber				
				F	ACILITY IN	FORMATION							
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(8)	MECS					Stevens Environmental Services, Inc.							
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City, State, Zip Code	o mayula ka	, NJ 0851	5			City, State, Zio Code							
Project Manager for Mon		, נכסט נאו		phone	Nia	Telephone No.	Allentow	n, NJ 08501		_		=	
William We		Jr.	1		98-4070		259-9688 Ucense No. 00493						
Slart Date (10)	T	Scheduled			ale (11)	Name of OSHA Monitor							
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City, State						Dispose Date	Chy, State				-	_	
Allentown, NJ Completed By Title					l	10/3/11/2/   sight/file/	1/	Tullytowa, I	M		_	_	
Mahlon E. Stevens Projec					ager	11111	X		10/2	5/11			
\$B-41		1				1000						_	

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\* Do not use this form for esbestos licensure exempted activities.

#### environmental services inc.

P.O. BOX 322 ALLENTOWN, NJ 08501

(609) 259-9688 fax (609) 259-1176

State of New Jersey
Dept. of Labor
Asbestos Control and Licensing
1 John Fitch Plaza 3rd Floor
Trenton, NJ 08625-0949

October 25, 2011

Attn: Mr. Tom Voorhees

RE: Mt. Ephraim Police Station 121 S. Blackhorse Pike Mt. Ephraim, NJ

Dear Mr. Tom Voorhees:

Borough of Mount Ephraim is requesting a waiver of the required 10 Day Notice to perform an asbestos abatement project at the Mt Ephraim Police Station 121 S. Blackhorse Pike Mt. Ephraim, NJ.

Attached is the 10 Day Notification showing the work to be starting and completing on Friday 10/28/2011.

If you have any questions you may contact Terry Shannon (856) 931-1546 or myself at any time.

Pending approval of wavier request the \$200.00 fee will be forwarded with original copies of said request.

Mahlon E. Stevens STEVENS ENVIRONMENTAL SERVICES INC.	#		
[] 10 Day Waiver Granted	Approved By	<del></del>	Date
cc: NJDEPE NJDOL NJDOH			

			(Pursua	nt to NJAC 8:60	and 12:1	20)	The same of the sa	CK	19	71	4	
Date of Notification (1) October 24, 201	1			Name of Building		erator (2) Krieger		), E. C.			1 1	
[ ] DEP [ ] Amer	l Notifi	otification		Street Address  City, State, Zip C	ode	orth 6 <sup>th</sup> A		U OCT				
[ X ] DOH [ ] Emer	gency ( ication) ellation			Name of Contact Mark		and Park	, NJ 0890	elephone Number				
			FAC	LILITY INFORM	MATION		Eraning.	an more a first of				
Name of Facility Where Abatement is Taking	g Place	(3)				Type of	Facility (4)					
Residence Street Address 19 North 6 <sup>th</sup> Aven	ue						[ ] [ x ]	School (k-12) Subchapter 8 (of Other (i.e., priva				ldings,
City	10.000	ity (6)		County Code (7) (STATE USE ONI	_Y)	Square 20	feet 100 sf	homes, etc.)  # of Floors 2	Bld	g. Age	80	
Highland Park		dlesex				Current	Use (Prior in Resider	being demolished	1)			
Name of Monitoring Firm Hired by Building Guardian Contract				ASCM No.	Name of	Abatemer	ntContractor	(9) an Contracting,	Inc			
Street Address 1889 Rte. 9, Unit 6		ic.			Street Address 1889 Route 9, Unit 61							
City, State, Zip Code					City, Sta	ite, Zip Co	de	liver, New Jers		755 1	271	
Toms River, NJ 08 Project Manager for Monitoring Firm Nicholas Fernicola	133	Telephor	ne Number 9-9932	3		ne Number		License N 00624			2/1	
Scheduled Start Date (10) 11/14/11		Schedule 11/10	d Complet	ion Date (11)		OSHA M		L. Analytical				
Occupancy Status During Abatement (Check  [ X ] Facility Closed/Vacate			eriod of Ab	atement	Street A	ddress	1056 St	elton Road				
Abatement Performed Other – Describe	Outside	of Norma	l Facility H	ours	City, Sta	te, Zip Co		way, New Jerse	y 088	354		
Scope of Work (Check all that apply) $\begin{bmatrix} x \end{bmatrix} > 3 \text{ sf or } \ge 3 \text{ lf}$ $\begin{bmatrix} & & \\ & & \\ & & \end{bmatrix} \ge 160 \text{ sf or } \ge 260 \text{ lf}$		[x]	Renova Demoli		[ ] [ x] [ 1]	Mini- Glove	-Enclosure ebag Procedi	with Negative Proure  and Non-Friable		ure		
				T				Ī	_	tement	Type	
Location of Asbestos-Containing Material (ACM)  TO BE ABATED in facility (13)	ion used by Custodial N/A	(i.e	Description bestos-Cor Material (A c., thermal ulation, su VAT, of her miscella	ntaining ACM) systems rfacing, 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		
Basement		Asbestos pipe	insulatio	n		50 lf	X					
		-	-	-					-			
		-	-									
Name of Registered Waste Hauler Guardian Contracting, Inc.			aste Hauler 20223	ID No. Cubic Y	ards of Was	T	e of Register. R.R.F.	red Landfill				
City, State Toms River, New Jersey				al Date	City, Sta		nsylvania					
Completed by (Print or Type) Nicholas Fernicola	Title Proje	ect Mana		Signature	int	1/2	1	/	Date 10/2	24/20	11	
	*	Do not us	e this form	for asbestos licer	isure exem	pted activ	vities.					

D&S Proj. #: MS 11-425			(Purs	uant to NJA	pest C 8:6	os Abatement 30 and 12:120)		****			e i			
						- amount of the second	September 1985 Committee C		- January	7	1			
Date of Notification (1)	П	Name of	Building Ow	ner/Operator (2	)			ME	11	1				
1 10 1/12 15 1/11 11		BEN P		(Z	,	1 1101.								
Agencies Notified Type Notific	ation	Street Ad						4033	11					
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DCA Cancellation	on	BEN	PENA			\$ <b>.</b>			ì ·		ž.			
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Name of facility where abatement	is taking pl	ace (3)					Type of Facility							
BEN PENA							1 =	ol (K - 12	100					
Street Address								napter 8 (						
23 RIDGELAND ROAD							Bldgs	(Private/ ./Homes,	etc.	ercia	l			
City (5)	LCou	nty (6)					Square Feet	# of Flo	ors	E	3ldg. A	Age		
o.i, (c)	000					unty Code (7) ate use only)								
PARAMUS	BE	RGEN			(00	ate use only)	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by	Bldg. Own	er (8)		ASCM No.		Name of Abatement	Contractor (9)							
						D & S RESTOR								
Street Address					-	Street Address	ATION, INC.		-					
						20 California Av	<i>ie</i>							
City, State, Zip Code					-	City, State, Zip Code								
						Paterson, NJ 07	503							
Project Manager for Monitoring Firm	n		Phone Numb	er	-	Telephone Number		License	e Num	ber				
					- 1	973-345-8020		The second second	00159					
Start Date (10)	Sched	. Comple	etion Date (1	1)	-	Name of OSHA Moni								
10/26/11	11/0	7/11				D & S Restoration	on, Inc.							
Occupancy Status During Abateme	nt (Check o	nly one)				20 California Av	enne							
Facility closed/vacated during Abatement performed outside	entire peri	od of aba	tement.			City, State, Zip Code	Citac							
Describe: NORMAL I		lacility 110	urs-		_	D								
Scope of Work (check all that app						Paterson, NJ 07:								
N7 - 0 - 1 0 11	7.5.						ul! Containment w	/negative	press	ure				
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≥160 sf or ≥260 lf	Demolition	1	- Nove				Non-Exempted (*)		friable	proc	edure			
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asbestos-containing material (acm) to be	staff(12)	mance/cc	isibulai			sbestos-containing	Amount	_	e m	e p	n	E n		
abated in facility (13)	Yes	No	N/A	material (A	ACM)		(Specify S	F or	0	a	a	C		
			11,77						v e	r	p	-		
BASEMENT		LX		BOILER IN	SUL	ATION	30 SQ FT		X					
						-								
Pagistared Waster Use 1														
Registered Waste Hauler D & S RESTORATION, INC.	NJDE 135	P Hauler 06		Cubic Yards of Waste Name of Registered Landfill 1 YD TULLYTOWN, RESOURCE RECOVERY										
City, State		Disposal Da			City, State	L300RCE RE	COVER	1						
PATERSON, NJ 07503		10/27/11			TULLYTOWN, I	PA								
Completed by (Print or Type)			Signature		1		Date							
BOGDAN JOLDZIC	PRESID							10/25/	11					
ASB-41	Do not use	this form	for asbesto	s licensure exer	mpted	activities.								

Date of Notification (1)						ing Owner/Operato			11	4			
10/26/	/2011			KS	M Livin	gston (NJ) QRS	16-76, Inc.	11				H	
Agencies Notified  EPA	Type Notifica	ation			et Addres: Rockefel	s ler Plaza, 2nd F	loor	OCT 3	1 20	)11	11	IJ	
DOL DEP	Amended				State, Zip w York,	Code NY 10020	Z	ASSESTACE					
DCA DCA	justificati  Cancellati	on)	ıy	10000000	e of Conta	4777	7 L	Telephone Nu					
	L			FA	CILITY IN	FORMATION	Whet						
Name of Facility Where	Abatement is T	aking Plac	e (3)				Type of Facilit	v (4)					
Vacant Commercial	Space						School (K-	12)					
Street Address								r 8 (Other than K-1 2)					
255 S. Livingston A	ve.						Other (i.e., private & commercial buildings, homes, etc.)						
City (5)							Square Feet	# of Floors		Bldg.	Age		
Livingston							4,500	1	_   4	15+	2000		
County (6) Essex					inty Code ONLY)	de (7) (STATE Current Use (Prior if being demolished) Vacant Commercial Space							
Name of Monitoring Firm	n Hired by Build	ing Owner		ASCM	No.	Name of Abatem	nent Contractor (	9)					
(8) <u>N/A</u>						Valiant Associates, LLC							
Street Address						Street Address 145 Mill Stre							
City, State, Zip Code							City, State, Zip Code Paterson, NJ 07501						
Project Manager for Mor	nitoring Firm		Tel	ephone	No.	Telephone No. License No. 973-553-5374 01108							
Start Date (10)	S	cheduled C	Comple	etion Da	ate (11)	Name of OSHA Monitor						_	
11/05/2011		11/07/20			20 20 20 20 20 20 E	Valiant Asso	ciates, LLC						
Occupancy Status Durin	g Abatement (C	Check only	one)			Street Address							
X Facility Closed/Vacate	ed During Entire	e Period of	Abate	ment		145 Mill Stre	et						
Abatement Performed	d Outside of Nor	rmal Facilit	ty Hou	rs		City, State, Zip C	ode					7	
Other - Describe:						Paterson, No	J 07501						
Scope of Work (Check a	II that apply)			10//04/2014									
>3 sf or >3 lf >160 sf or >260 lf		4	enovat emol			Mini-End	ntainment with Ne closure ig Procedure	egative Pressure					
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		3.00	Location or mally						1 '	Abate Ty			
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(13)			(12)		1	other miscellaneo	ous)		ova	air	ulat	sure	
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Main Area		- 1		X	12" x 12"	over 9" x 9" Floor	Tiles/Mastic	1,025 SF	X				
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Name of Registered Was Service Transport Gr			H	IJDEP 1 lauler ID 20990	No.	Cubic Yards of Waste 10	Name of Registered Landfill Minerva Landfill						
City, State					Disposal Date	City, State							
New Castle, DE						11/07/2011	Waynesbur	gh, OH					
Completed By		Title				Signature	1	Date.					
Miodrag Stamenovic		President				- 7/21	00107 6	Jamen to	19014				

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

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Date of Notification (1) 10/24/11				of Building ( MIDDLES			(2)			16 IS	1 N			
Agencies Notified Type No	otification		Street A					1 11	NI -			A11		- 15
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□ DEP □ Am	nended			ate, Zip Coo			29-11-01-01-01	1 177	No.					
	nendment # nergency (including	-	TARR	YTOWN	, NY 10	591						3.0		
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			FACI	ILITY INFO	RMATIO	N	_		\$ 30		-			8
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Street Address				Status.				Subchapter						
6801 HADLEY RD.								Other (i.e. p etc.)	rivate 8	& comme	rcial bu	ldings	, hom	es,
City (5) SOUTH PLAINFIELD								re Feet	# of	Floors		Bldg.	Age	
County (6) UNION				Code (7)			Curre	ent Use (Prid	or if bei	ng demol	ished)			
Name of Monitoring Firm Hired by	Building Owner (8)		ASCN	A No.		Vlamo	of Aba	tement Con	tractor	(0)				
ENVIROVISION	Building Owner (8)	N.	0007			TWO	) BR	OTHERS		31000	ING			
Street Address 20-21 WAGARAW RD.			3.50		100	Street Address 250 RUTHERFORD BLVD.								
City, State, Zip Code				-		City, S	tate, Z	ip Code						
FAIR LAWN, NJ 07410				1000		CLIFTON, NJ 07014								
Project Manager for Monitoring Fir WILLIE MORALES		Telepho 973-63	ne No. 36-9145		Telephone No. License No. 973-956-8700 00494									
Start Date (10) 11/2/11	Schedul 12/2/1		npletion	Date (11)	100			HA Monitor (9) ABO	VE					
Occupancy Status During Abatem	ent (Check Only O	ne)	38 1480				Addres			- 22				
Facility Closed/Vacated Durin Abatement Performed Outsid	g Entire Period of e of Normal Facility	Abaten			C	City, S	tate, Z	ip Code		· rosmina				
Scope of Work (Check All That Ap	ply)					_	-							
23 sf or ≥3 lf		Renova				-		I Containme		Negative	Pressu	ıre		
× ≥160 sf or ≥260 lf		Demolit	ion			-	1000000	ni-Enclosure ovebag Proc						
*						×		n-Exempted		Non-Fri	able Pro	cedu	е	
	Is	Locati	on										ement	t
Location of		Vormal			Descr	ription	of				-	1	/pe	
Asbestos-Containing Material (		d Sole			os Contair					mount			m	m
TO BE ABATED In Facility		todial S		(i.e. t	hermal sy surfacin			ition,		pecify or LF)	Rem	Repair	сар	nclo
(13)		(12)			other mis					50	Remova	pair	Encapsulate	Enclosure
	Yes	No	N/A							14			ite	Ф
OPEN STORE AREA	١	X			VAT &	MAS	STIC		89,2	252 SF	Х			
W/SOME OFFICES														
		1.70												
Name of Registered Waste Hauler		1,000	JDEP W auler ID	(E)	Cubic Ya of Waste	500,000,000,00		Name of F						_
TWO BROTHERS CONTRA	1,175.23	18743			WASTE MANAGEMENT G.R.C				).W.S	S.				
City, State CLIFTON, NJ		Disp 12/3			Date		City, State MORRI		E, PA					
Completed by	Signature					1/			Date					
NENA ROSIC	SEC	RETA	ARY		1	4	4	7			10/24/	11		

U.S. HAIL

Date of Notification (1)	1/26/11		Marme	of Building Owner/Operator	LUNITIO	es /LICI/			
Agency Notified	Type Notification		Street	Aridress		11.19/	10		1
-dan-	Initial		City S	35 Weach	RIGILE	ADE/40/		13	7
DDEP DOL	Amended Amendment #		117	ighland t	ARK N	10/00x400	<u> </u>	6	3/
DOH .	<ul> <li>Emergency (included justification)</li> </ul>	ing	Mame	of Contact	No. of Section 1989	Telephone Number	201		1
D DCA	☐ Cancellation		177	LITY INFORMATION	- f / /		19	/	-
Name of Facility Where	Abatement is Taking P	lace (3)	(FACI	LITT INFORMATION	Type of Facility	(4)	1		7
1424 FAS	T BOOAD	SI			☐ School (K-12	) The state of the	10	,	
Street Address	1 13/13/1				Subchapter 8 Other (i.e. pri	(Other than K-12) vate & commercial building	js,	, i	
					/ homes, etc.) Square Feet	# of Floors Bldg.	Age	-	$\dashv$
City (5)	CU P		*		2,500		0		
County (6)			County	Code (7) (STATE USE	Current Use (Pr	iox if being demolished)	Clas	Fi	
ONIG	300	140			nent Contractor (9	1.000			4
Name of Monitoring Firm (8)	Hired by Building Own	er AS	SCM No.	N)OUAV	ai a=	Ć.			
Street Address				Street Address	OW	*	70.00		
	···········			City, State, Zig	Code				٦.
City, State, Zip Code				CID B	PIDEE	NO 0885	<u> </u>		$\perp$
Project Manager for Mon	itoring Firm	Tele	phone No.	Telephone No.	20,7500	License No.			
	Scheduled (	`ompletion	Date (11)	Name of OSHA	Monitor (	CC 600 .			$\dashv$
Start Date (10)	Scrieduled	611	Date (11)	NOVALE	SON 100				4
Occupancy Status During	Abatement (Check or	nly one)		Street Address	x 214	(a)			
Facility Closed/Vacate	d During Entire Period	of Abaten	nent .	City, State, Zip	Code	. 0 0000			7
☐ Other – Describe:	Officials of Morriso Law	Anty Frodre		1010 BE	SPOE V	J.O. 08857			$\dashv$
Scope of Work (Check a	I that apply)			9 Full	Containment with	Negative Pressure			
≥ 3 sf or ≥ 3 lf □ ≥ 160 sf or ≥ 260 lf				notition To Clar	-Enclosure rebag Procedure				1
1 ≥ 160 st or 2 260 ii		1		/ Non	-Exempted (*) and	d Non-Friable Procedure	Abate		nt
		54 LA	ncation mally	Description	of		1	pe	$\dashv$
Location Asbestos-Containing	g Material (ACM)		Solely by enance/	Ashestos Containing M	laterial (ACM)	Amount (Specify	R R	Encu	En
, TO BE AL	BATED	100000000000000000000000000000000000000	itodial	(i.e., thermal systems surfacing, VA	T, or	SF or LF)	Removal	Encapsulate	Enclosure
(13		(	12)	other miscellan	eous)			ate	6
		Yes	No N/A				$\vdash$	$\vdash$	Н
-Ancesta VI		$\vdash$	$\overline{}$	P.DE INV	SUATION	290 UF	X		
BHEMEUI		$\vdash$		1111	3-0.111010	<u> </u>			
									Ц
Name of Registered Was	te Hauler	NJDE ID No	P Waste F	lauler Cubic Yards of Waste	Name of Regi	Stered Landini			1
MOVATECH	1100		1850	1   4	10 16.1	J.W.J.)	:		$\dashv$
City, State		NA	252	Disposal Date	City, State	Qe Y.A.			
010 1710 DO	E NO.	<u> </u>	COT	Signature	7 42	Date	201	1	$\neg$
Completed by AVE	NAI 100	SIDE	NI	1 Win	JANU.		OK	11	
ASB-411	* Do no	t use this	form for as	bestos licensure exempte	activities.		ł		

Pate of Notification (1)		(F	oursuant	to NJA	C 8:60 ar	id 12:120	0)		carl man ar-		CHI	#1	6	
Date of Notification (1) 10/26/2011	Name of Building Owner/Operator (2) Kim Vanarthos													
Agencies Notified Type Notification									oc:	r 3 ; '	ni i			
EPA Initial  X DEP Amended  X DOL Amendment		_		ate, Zip C a, NJ (		4	1 12		W.	1 1 1	Mil.		_	
				f Contac	20	1	4			Telephone	Number	,		
Name of Facility Where Abatement is Takin	g Place (	3)	FAC	ILITY INI	FORMAT	ION E		of Facility	(4)	V-101				
Private Residence						1	T s	School (K	-12)		25 360000			
Street Address 344 Orchard Terrace							×	Subchapte Other (i.e. etc.)	er 8 ( priva	Other than ate & comm	K-12) ercial bu	ilding	s,	
City (5) Bogota		****	25.					e Feet		# of Floors 2		Bldg. 70	A	
County (6) Bergen County				Code (7) USE ONL			Curre	nt Use (P	rior it	f being dem	olished)			
Name of Monitoring Firm Hired by Building	Owner (8)	)	ASC	Л No.		Name of Abatement Contractor (9) Pyramid Contracting Corp.								
Street Address		1			Street	rreet Address 8 Fenner Ave								
City, State, Zip Code			¥17			City, S	y, State, Zip Code ifton, NJ 07013							
Project Manager for Monitoring Firm		Telepho	ne No.		Teleph		).	W-12-	Licens 01099					
Start Date (10) 11/03/2011	Schedul 11/04/		mpletion	Date (11)	Name	of OSH	A Monito	r						
Occupancy Status During Abatement (Chec Facility Closed/Vacated During Entire I Abatement Performed Outside of Norm Other – Describe: 8:00am - 4:00pm	Period of	Abater				Street /		**						
Scope of Work (Check All That Apply)							_				100000000000000000000000000000000000000		-	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demoli				×	Min Glo	-Enclosu ebag Pro	re ocedi	with Negativ ure and Non-Fi			ıro	
	Is	Locat	tion				1 14011	-Lxemple		and Non-	lable F1	Aba	itei	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Norma ed Sole intena todial (12)	ely by ince/ Staff?		stos Con thermal surfa	Description of containing Material (Admal systems insulation or actions, VAT, or er miscellaneous)					Removal	Repair	yr 		
Document	Yes	No	N/A	Dia	- 1	41						_	1	
Basement	X		Pip	e insula	ation and Fittings				85 LF	х		+		
													+	
Name of Registered Waste Hauler Pyramid Contracting Corp		1	NDEP W Hauler ID 2613		Cubic of Was			Name of GROW		istered Land	ifill '			
City, State Clifton, NJ 07013					Dispos	sal Date		City, Sta Morris	te /ille,	PA				
Completed by Dimo Golcev	Title V. Pr	eside	ent		S	ignature		0	5	//	Date 10/26/	2011		

#### To Whom It May Concern:

Please consider our request for the 10 day notice waiver, as our furnace is broken and we are without heat for couple days now. PSE&G came to change the furnace, but they said they won't be able to do anything until we take care of the Asbestos around the pipes. We have hire Pyramid Contracting to do the removal.

Thanks for your consideration.

Kim Vanarthos

Date of Notification (1)	nelu	4			g Owner/Operator		ALLAN UCI	, )			
Agency Notified	Type Notification		Street A	Address			Valla C			, n	1
ZEPA	Minitial		4	HID		40LLOI	n Janual		2 X 10		4
DEP.	Amended Amendment #			ate, Zip (		0. 07	039	-	- a -		
DE BOL	☐ Emergency (includi	ng	Mame o	of Contac		1->	Telephone Number		_		7
DE DOH	justification)  Cl Cancellation		NO FET	4AUS	JON HO	dR190ES		(0)			
- BOCA					ORMATION	- 3	*				
Name of Facility Where	Abatement is Taking Pla	ice (3)				Type of Facility	(4)				
2-4 KIN	195 LAND	AUE_				School (K-12	2) 8 (Other than K-12)				1
Street Address	J					Other (i.e. p	rivate & commercial buik	dings,			
						Nomes, etc.		g. Age			$\dashv$
City (5) HARRIS	CIN NO				107475 UCS	5,000	rior if being demolished)	80			4
County (6)	500	•	ONLY)	Code (/	) (STATE USE		elosed_				4
Name of Monitoring Firm		er AS	CM No.		Name of Abatem		9)	- 6			
(8)					Street Address	(1). INC					$\dashv$
Street Address	:				1P.O. 130x	. 814					$\dashv$
City, State, Zip Code	:				City, State, Zip C	ODGE 1	12880:00				
Project Manager for Mor	nitoring Firm	Telep	hone No.		Telephone No.	20800	License No.				1
			5		Name of OSHA	Monitor -	100,000	<u> </u>		-	$\dashv$
Start Date (10)	Scheduled C	Ompletion	Date (11)		NOVATEC	100	_				
Occupancy Status Durin	ig Abatement (Check on	ly one)			Street Address	OW					
No min diametriant	ad During Entire Period	of Abatem	ent ·		City, State, Zip (	X 814			-		
Abatement Performed     Other – Describe:	Outside of Normal Fac	ility Hours			0112 Be	DGE N	0.08757				_
Scope of Work (Check a	ill that apply)				Q Full	Containment wit	h Negative Pressure			٠	
□.≥3 sf or ≥3 lf	•		☐ Rend ☐ Dem	ovation	□ Glov	Enclosure ebag Procedure					
12 ≥ 160 sf or ≥ 260 lf					Q Non-	Exempted (*) as	nd Non-Friable Procedur	e.	bate	eme	nt
		1750000	cation		/		·		T	pe	_
Locali	on of	Used S	nally lolely by	Anha	Description stos Containing M		Amount	_		m	·m
Asbestos-Containir TO BE A	ng Material (ACM)		nance/ lodial	ASDE (i.e	., thermal systems	s insulation,	(Specify SF or LF)	Removal	Repair	cap	nclo
IN Fa	cility	Sta	aff? ·		surfacing, VA other miscellan	eous)	Sr G L )	ova	) air	Encapsulate	Enclosure
(1:	3)		2)							0	
		Yes N	lo N/A							Г	
TOP			X	Pri	OF HATE	PiAl	4500 SE	X			
'Rock_			- 1/	1.4	CI PICIS				L	_	_
<del></del>									_	L	L
Name of Registered Wa	ste Hauler	NJDE	P Waste H	lauler	Cubic Yards of Waste	Name of Reg	pistered Landfill				
NOVATECH	100	ID No	2501		120	(O.K	0.005				
City, State	N)0	1986	<u>;</u>		Disposal Date	City, State	HE KA				
Completed by	Title .	<u>: 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0</u>			Signature		Dat	26	1	11	
CADIOS AME	INA MEGI	DEN			1 Cours	Afond	<u></u>	X	4	- 1	
11 111111111111111111111111111111111111	* Do. po	t use this	form for as	bestos li	censure exempted	I ACHAMIES.		•			

2388/

Date of Notification (1)						Owner/Operator		SCAL					
10/26/11					SOAN	JUUL	- MIEI	<u> </u>		3	<del>)</del> ;		1
Agency Notified	Type Notification		1	124	ddress	ERNING	S AUF		/ ,	· ,			-
****	Initial Amended		1	City, St	ate, Zip C	ode .		18 100 1	20				1.
DEP DOL	Amendment #			GB	ANF	orb N	$\Omega$ $M$	N. for	3	•			1
( )	☐ Emergency (includi iustification)	ng			f Contac	1		Telephone Numb	oei~	-			
DOH DCA	☐ Cancellation		1,	5		ISEN	1/2	THE WILL		_	7_	21	$\dashv$
				FACIL	ITY INFO	RMATION						_	4
Name of Facility Where	batement is Taking Pla	ice (3)					Type of Facility	(4)	\	10			
124 HER	NING A	10E					School (K-12	) 3 (Other than K-12)					
Street Address	7						Other (i.e. pri	ivate & commercial	buildings	3,			
							homes, etc.) Square Feet	# of Floors	Bldg. A	ge			1
City (5)	tord n	CC		47	016		3,200	1 2	1:20	OY	R		
	CICO II			County	Code (7)	(STATE USE	Current Use (P)	ior if being demolis	hed)	7			7
County (6)	1	1		ONLY)			13	ESIDEN	ĺ				
Name of Monitoring Firm		er I A	SCM	No.		Name of Abatem	ent Contractor (9						1
(8)	rined by banding own					NOVALE	ch. INC						1
Street Address						Street Address	QUI	1.					
	*						214						۲.
City, State, Zip Code	•					City, State, Zip C	NGE NI	52880 C					
	·	Tol	ephon	e No		Telephone No.	SCC 150						7
Project Manager for Mon	itonng Firm	16	БЫЮП	C 110.		732 23	52×7500	License No.	· .				
Start Date (10)	Scheduled G	ompleti	on Dat	e (11)		Name of OSHA		4					
Start Date (10)	1117	11				NOVALEC	D) 110C	-					$\dashv$
Occupancy Status During	Abatement (Check or	ly one)				Street Address	214	8					
V- m cineadatacata	d During Entire Period	of Abate	ement	•		City, State, Zip	Code						$\dashv$
☐ Abatement Performed	Outside of Normal Faci	ility Hou	Irs			000 320	SEE IN!	02257	-				
☐ Other - Describe:	II the temphy)											•	٦
Scope of Work (Check a	ingrappy)	#05%		Ren	nyation	O Full (	Containment with Enclosure	Negative Pressur	e.				
10 ≥ 3 sf or ≥ 3 lf 10 ≥ 160 sf or ≥ 260 lf				Dem		THE GIAV	ehan Procedure	d Non-Friable Proc	cedure.				
1 2 100 St Ot 2 200 ti		Γ				'U Non-	-Exempled ( ) air	i (4017) Habis I 15		Ab	aten		
			Location Location Location				•		ł	Т	Тур	T	ヿ
Locatio	on of	Use	d Solel	y by	Asbe	Description stos Containing M	aterial (ACM)	Amount		20	_ !	g	ш
Asbestos-Containin TO BE Al	g Material (ACM) BATED		ntenar ustodi:		(i.e	, thermal systems surfacing, VA	s insulation,	(Specify SF or LF)		Removal	Repair	Encapsulate	등
IN Fac	cility		Staff? (12)			other miscellan	eous)			Val	목	LI B	e l
(13	,										- 1	۱ "	
		Yes	No	NA			<i></i>				$\neg$	7	
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						Notice							
CD - i to and Miles	to Varier	NJ	DEP W	laste H	auler	Cubic Yards of	Name of Reg	istered Landfill					
Name of Registered Was	Sie Hadio	ID	No.	61		Waste	1600	7675			¥8		-
MUOVALECIO	(NL		8	<u>IU</u>		Disposed Date	City State	- ha	<del></del>	-	-	-	
City, State	( 1) )	388	(			Disposal Date	City. State	E Yth.	- 62				
CID BUDO	$\frac{C}{C}$	000	>>7			Signature	THE WAY	7 111	Date	\ <u>'</u>	11		
Completed by	Title HOES	CYL	II				A Axil	Li	105	علا	111	_	
TAIM HE	*Do no	t use th	is form	for as	bestos lic	ensure exempted	d activities.		1		1		
ASB-41	¥0						1						

Date of Notification (1) 10/25/11	7	-			Building O		erator (2	2)											
Agencies Notified	Type Notification		Street Address 44 North 16St  OCT 3 1 2011																
EPA DEP DOL	Amended Amendment				e, Zip Cod y NJ 080							1	1						
DOH DCA	Emergency ( justification) Cancellation	including	100	Name of 0	Contact		п		Aobics	Tele	phone Nun	ber							
A	Ab at a set in Tokin	a Diago (2)		FACIL	ITY INFO	RMATIO		Type of	Facility (4	)			è		-				
Name of Facility Where Conway/ Residence		g Place (3)						□ Sc	chool (K-12	2)		**							
Street Address								T St	ibchapter 8	B (Othe	er than K-12 commercia	) al build	ings, l	nome	s,				
44 North 16St City (5)								Square	c.) Feet	# of	Floors	BI	dg. Ag	ge					
Surf City NJ 08008								1000+		2			35+						
County (6) Ocean			(	County C STATE U	ode (7) SE ONLY)		-	Resid	lence		ng demolish	ed)							
Name of Monitoring Firm	m Hired by Building	Owner (8)	_	ASCM	No.			lame of Abatement Contractor (9) Pernaco Inc.											
Street Address	//						Street /												
City, State, Zip Code							City, State, Zip Code West Berlin NJ 08091												
Project Manager for Mo		Telephon	e No.		Telephone No. License No. 856-753-9800 00727														
Start Date (10)	<u> </u>	npletion D	) Date (11)			of OSH	A Monitor		L		-								
11/7/11 Occupancy Status Duri	ng Abatement (Che	11/11/1 ck Only One					Street Address												
X Facility Closed/Va	cated During Entire	Period of Al	baten	nent				ox 32											
Abatement Performance Other – Describe:	med Outside of Nor	mai Facility	Hours	•		-	City, State, Zip Code West Berlin NJ 08091												
Scope of Work (Check	All That Apply)						-	1											
≥3 sf or ≥3 if ≥160 sf or ≥260 if			enova emolit					Mini	i-Enclosure	e cedure	n Negative I			_					
		-T		- 1			×	Nor	-Exempted	d (*) ar	d Non-Frial	DIE Pro		ement	t				
Locati	on of	N	Locat orma	lly ,		Des	cription	cription of				Ту		ре	Г				
Asbestos-Containin TO BE A	ng Material (ACM)	Mai	ntena	ely by nce/ Staff?		tos Conta thermal	system	s insula		(	Amount Specify	Rer	Re	Encapsulate	End				
In Fa (13	(12)	A CONTRACTOR OF THE PARTY OF TH			cing, VA			S	F or LF)	Removal	Repair	psula	Enclosure						
	,	Yes	No	N/A								L		fe					
Exterior	Exterior Siding					Exte	rior Si	ding		3	200 Sf	x			-				
										alie-ser soo		+			-				
		-		-		<u> </u>						+			-				
Name of Registered W	Vaste Hauler		1000	NJDEP W		Cubic			Name of	Regis	tered Landfi	11							
United Containers			10.00	Hauler ID 2459	N0.	of Was	20020		G.R.O.										
City, State Elm NJ	- 190					Dispos 11/11	sal Date		City, Star Morris		A 19067								
Completed by		Title					Signatur	é	7-7		100	ate	11						
Anthony T Perna	picted by							7	16	10/25/11									

Ch#2012

Date of Notification (1) 10/24/2011		Name of Mark L	Building	Owner/O	perator	(2)	eg - Frederica Refgrages		<i>C</i> /		v=p.**.	- · ·	9				
EPA Initial	EPA X Initial						Street Address 97 Addison Drive  City, State, Zip Code										
DOL Amendme Emergence justification	y (including n)	-	Short I	Hills, NJ Contact					Telep	one Nu	mber						
DCA Cancellati	on		100000000000000000000000000000000000000	LITY INFO	DMATIC	)N	1	- l					-				
Name of Facility Where Abatement is Ta Residential Street Address	king Place (3)		1 701		J. W. A. I.	л <b>ч</b>	Sc Su	Facility (4) hool (K-12) bchapter 8	(Other								
97 Addison Drive																	
City (5) Short Hills, NJ 07078				63			Square 4,000		# of Floors			Bldg. Age 60+					
County (6) Essex			County C	Code (7) ISE ONLY)		_	Current Reside	Use (Prior ential	if being	demolis	hed)						
Name of Monitoring Firm Hired by Buildin n/a	g Owner (8)		ASCM	No.			ne of Abatement Contractor (9) A Services Corporation										
Street Address							et Address S-69th Street										
City, State, Zip Code							, State, Zip Code ttenberg, NJ 07093										
Project Manager for Monitoring Firm		1	Telephor	e No.		Telephone No. License No. 201-295-1700 01074											
Start Date (10) 11/5/2011	Scheduled 11/06/11		pletion [	Date (11)			of OSHA L Analy			•							
Occupancy Status During Abatement (Ch Facility Closed/Vacated During Entir	atem	ent			307 \	Street Address 307 West 28th Street Sity, State, Zip Code											
Abatement Performed Outside of No Other – Describe:	mai Facility H	lours			_		New York, NY 10018										
Scope of Work (Check All That Apply)  ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	≥3 sf or ≥3 lf     Renovation							Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure									
	Is Lo	ocatio	on								Abatement Type						
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility  Norm Used So Mainter Custodia				os Conta thermal s surfaci	scription of taining Material (ACM) I systems insulation, cing, VAT, or miscellaneous)			Amount (Specify SF or LF)			Repair	Encapsulate	Enclosure			
Garage Area			X		Duct I	nsula	tion		60	SF	х						
Name of Registered Waste Hauler	10000	DEP Wa		Cubic Y		N	lame of Re	gistered	d Landfill								
Newark Carting			Hauler ID No. of Waste TBD					Cumberla	nd								
City, State Newark, NJ					Disposa tbd	I Date	Oate City, State Newburgh, NJ										
Completed by Luz Guzman	Title Office N	Title Office Manager					ature Ausmin Date 10/24/						/2011				