

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

Date of Notification	(1)			Min		D. 11.11	_				,					Table of Balls	1000
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Agencies Notified	Type Notific	27.00		Stre	nocc	ddress	ners	Mar	keting	& Terr	ninals	, LPI	Eagle Po	oint Fa	cility	- [
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DEP	X Initia	75 mm - 19-19		City	, Stat	te & Zip	Co	de					40.810.617 1.77	en da. Englis	7	15	
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DOH DCA		rgency				Contac		B/17-4-7						Teleph	one l	Numi	ber
□ DCA	☐ Cano	cellation		Roi	n Ro	sendo	rn							856-8			001
N CE W				F	ACIL	ITY IN	IFO	RMA	TION				2002 - 5000				
Name of Facility Whe Eagle Point Facili	ere Abatem	ent is Taking	Place	(3)					e of Fac					-			
Street Address	ty							$ \square $	School								
1250 Crown Point	Pood								Subcha	apter 8 (Other t	han K-	12)				
1200 Olowii i Ollii	Noau							\boxtimes	Other (i.e. priva	ate & co	ommer	cial buildi			etc.)	
City (5)		County (6)	Ic	ounty	Cod	lo (7)		Squ	are Fee		# of FI	oors		Bldg. A	ge		
Westville		Gloucester		ourity	Cou	le (7)		Curr	7500			3			60-	+	
		Gloucester								(Prior i	being	demoli	shed)				
Name of Monitoring F	Firm Hired b	v Building Ov	mer (8	3)	IA	SCM N	_	_	nmerci								
N/A		, sanding on		"		OCIVI IV	0.	Alni	e of Ab	atemen	Contra	actor (9	9)				
Street Address									et Addre		iiiai						
21:									Box 82								
City, State & Zip Cod	е							_		Zip Co	de						
Project Manager for I	4-11-1-		-							J 0865							
Project Manager for M	vionitoring F	irm	Tele	phon	e Nur	mber				Number			License I	Number			
Scheduled Start Date	(10)	Scheduled Co	malati	D	-4- /4	14)	_		847-29					012	22		
10/31/2018	The second secon	01/31/2019	inhier	וטוו טו	ate (1	11)				HA Mor							
Occupancy Status Du	uring Abaten	nent (Check o	only or	ne)			_		t Addre		ciitai						
Facility Close	d/Vacated D	uring Entire F	Period	of Ab	atem	nent	- 1		3ox 82								
Abatement Pe	erformed Ou	tside of Norm	nal Ho	ours –	7am	to 3pm	n [City,	State &	Zip Cod	de						
Facility Occup	aied During	Abatamant					- 1	Tren	ton N.	J 08650)						
Scope of Work (Chec	k all that an	nly)					\perp								-07-		
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≥3 sf or ≥3 lf			\boxtimes	Rei	novat	tion					Mini-En	closur	ent with N	vegative	Pres	sure	Ġ.
≥160 sf ≥260	lf		Ħ		moliti								cedures				
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	-Containing			mally		i	Α	sbes	tos-Con	taining		1	Specify	Aba	ateme	ent i	ype
	ial (ACM) ABATED			olely				Mat	erial (A	CM)			F or LF)	_		Ш	_
	acility	1		tenar		2-040	(I.	e., th	ermal s	ystems	_			Ren	Re	cal	ncl
	(13)		Oust	(12)	otali :	•	or	nther	miscell	cing, VA				Removal	Repair	Encapsulate	Enclsoure
			Yes	No	N/A			011101	mocen	ancous				<u>m</u>		ate	ře
Powerhouse								Т	ransit	e		5,000	ef			\Box	П
Name of Registered W	loote Heyle											5800-500					
vario di Negisterea V	vaste nautei	P				Waste ID No.		bic Ya Naste		Name	of Regi	istered	Landfill				
Service Transport	Group				990	ID NO.	100		3	Grow	s Land	16:11					
City, State	•			1			-		Date	City, S	-10000000000000000000000000000000000000	41111					
New Castle DE																	
Completed By (Print or	r Tyne)			Tin	•			rious	<u> </u>	Tullyt	own P	Α					
Celly Sisk	. 300)			Titl	e oject	ŧ	Sig	natur	e	1 ,	<	-1		Date		-	
					ojeci			5	J. J.	- Ja-		ment !		10/2	1/20	18	

PAID	•		NO	(Pursua	TION C	OF AS	New Jerse SBESTOS 8:60-7 ar	ABA	120-7)			()	1	ر کار	98	36	
Date of Notification (4)					Name	of B	uilding O	wner/	Operato				/ 1	21211257204		80	
Date of Notification (1)					MERC	K SI	HARP & D	OHM	E CORP.					-110	E	P P	17
10 / 22 /18					Street	Addr	ess		10000000				111	1	15	U E	11
Agencies Notified Type Notification	n				126 E.	LIN	COLN AV	ENUE	, P.O. B	OX 2	000, RY28-414	1	114	47	(person in person		
EPA X Initial Not Amended Cancellat	Notifi		r				Zip Code NEW JEF		07065				17 many many 100 m	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0	ICT 3 1	2
X DOH On Hold DCA EMERGE	NCY	NOTIF	ICAT	ION I	Name PATRI		ontact JOHNSOI	N			Telephone Nur 732-594-7746	mber					
				F	ACILI	TYIN	IFORMAT	ION				_	1	£.,1.	(P)	Tellis time compared to	11100
Name of Facility Where Abatement is Tak	ing Pl	ace (3	3)						e of Faci	ility	(4)	-	1	- 1	330 811 84	THE FAR	-11
MERCK CHARRA ROUNE CORRESPONDE									School	(K-1	2)			4.7-1	10,744	to a market services	
MERCK SHARP & DOHME CORPORATION	N								Subcha	apter	8 (Other than	K-12)					
Street Address		-			_			X	Other (ie. p	rivate & commo	d. bldg	s., h				
126 EAST LINCOLN AVENUE - BUILDING	33							30	uare Fe 98,230	et	# of Floors 7			В	ldg. Aq 71	ge	
City (5) County (6	5)				County	Coc	le (7)	Curr		(Prio	r if being demo	liched	1		7.1		
RAHWAY UNION						USE	ONLY)	COV	MERCIA	AL			,				
Name of Monitoring Firm Hired by Buildin ENVIRONMETAL HEALTH INVESTIGATION	g Ow	ner (8)			AS	CM No.	Nam	e of Aba	atem	ent Contracto	r (9)					\neg
Street Address	NO, IN	IC.				_	17				ENTAL CORP	ORAT	ION				
655 WEST SHORE TRAIL									et Addres		K ROAD						
City, State, Zip Code								City.	State, Z	in Co	ode			5X215			-
SPARTA, NEV	V JER							SUF	FERN, N	IEW	YORK 10901						
Project Manager for Monitoring Firm		18 - 5 - 5		Numbe	er				phone N			nse N	umbe	er			\neg
WILLIAM S. KERBEL, CIH Expected State Date (10)	To 1		729-56						369-7500	7.0	460						
11 / 1 /18	Sch		omple /	tion Da	te (11) 30		40		e of OSF				997	275755			\neg
Month Day Year	Mo	onth		Day		1	19 Year	AIVIE	RISCIL	ABO	RATORIES IN	3	#	11480			
Occupancy Status During Abatement (Check	only	one)						Stree	et Addres	SS						-	\dashv
X Facility Closed/Vacated During E Abatement Performed Outside of	ntire P	eriod	of Aba	tement				117 8	EAST 30	TH S	STREET						
X Other - Describe: MONDAY	- FRII	DAY 6	PM-1	DURS - D 30 AM	escribe	e:		City	State, Zi	n C -	4-						
A-2-0-3			10000 16	007.1111				City,	State, Zi	p Co	NEW YORK,	NEW	YORK	< 1nn-	16		
Scope of Work (Check all that apply)	-	N N 51 452-555				F	ull Conta	inmen	t with Ne	gativ	e Pressure	X				PA VACUU	м
Demolition X >3SF OR LF	Reno	ovation	1				/lini-Enclo	٤,					_				
>160 SF OR 260 LF					-		Blovebag Ion-Friabl										
Location of	Is	Locat	ion		Des		tion of As			T		Т	_	A b o to		F	\dashv
Asbestos-containing		mally			Con	tainir	ng Materia	I (ACI	VI)	-	Amount	00	Z)		ment Tm	i ype I	- 1
Material (ACM)	s	olely b	ру		(ie	e. Th	ermal sys	tems			(Specify	CONTROL	P	ENCAPSULE	ENCLOSUR		
TO BE ABATED	10 000	t/Cus	200		insu	lation	n, surfacir	g, VA	Τ,		SF or LF)	큐크	A F	AP	5		
in Facility (13)	Yes	taff (1	/		or	other	miscella	neous)		- 1		은	1.0	IUS	US		
3RD FLOOR ROOM 305	165	_	N/A X	CIDE D	DOOF	INIO	DUCT			-		-	_	m	70		
3RD FLOOR ROOM 303				FIRE P	- 48-34-48-5					_	0 SF	X		-	_		_
3RD FLOOR ROOM 304				FIRE P		_				_	0 SF	X	-	-	-		_
3RD FLOOR ROOM 319				FIRE PI		_				_	0 SF	X	_	-	-		_
3RD FLOOR ROOM 320				FIRE PI						_	0 SF	X	-	-	-		\dashv
3RD FLOOR ROOM 321								-		_	0 SF 0 SF	X	-	-	-		\dashv
3RD FLOOR ROOM 323		_			RE PROOFING DUST RE PROOFING DUST					_	0 SF	X	-	-	-		-
3RD FLOOR ROOM 325		_	_	FIRE PI						\neg	0 SF	X	-		-		\dashv
3RD FLOOR ROOM 326	FIRE PROOFING DUST 10 SF						X					\dashv					

FIRE PROOFING DUST

FIRE PROOFING DUST

FIRE PROOFING DUST

50

Signature

Cubic Yards of Waste

Disposal Date

11/01-6/30/19

X

Х

NJDEP Waste

15939

DIRECTOR OF OPERATIONS

Hauler ID No.

10 SF

10 SF

10 SF

PA 17752

Name of Registered Landfill

City, State/ MONTGOMER X

X

LYCOMING COUNTY RESOURCE MANAGEMENT SERVICES
447 ALEXANDER DRIVE/ROUTE 15

Date

3RD FLOOR ROOM 327

3RD FLOOR ROO, 332

6TH FLOOR ROOM 614

FREEHOLD, NEW JERSEY

Completed by (Print or Type) BENJAMIN SANCHEZ

825 HIGHWAY 33

City, State

Name of Registered Waste Hauler FREEHOLD CARTAGE, INC.

NO CIC

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

1000							COUR	TES	Y NO	TIF	C	AT	IOP
Date of Notification (1) 10/30/2018			Name Newa	of Buildir ark Mai	ng Owner n Post (Operato Office	or (2)	I line C	1 110		101		101
Agencies Notified Type Notification EPA Initial				Address deral Sc	quare		 		1, 1,7 1				
DEP Initial Amended Amendment	#			tate, Zip					OCT	3 1	2018	1	
Emergency justification) DCA Cancellation			Name	of Contac		d		100000	elephone Nu 73-693-50	ımber			
					FORMAT	ION				320		1.4	
Name of Facility Where Abatement is Takin Newark Main Post Office	g Place (3	3)					Type of Facility		- Company of the second of	ne give Projekt	eri e	t er de e	-10/20/00/01
Street Address 2 Federal Square							X Other (i.e	er 8 (Ot	ther than K-1	I2) cial bu	ildings	, hon	nes,
City (5) Newark, NJ 07102							etc.) Square Feet 500,000+	#	of Floors	100	Bldg.	Age	
County (6) Essex			County (STATE	Code (7)	Y)		Current Use (P	rior if be	eing demolis	hed)			
Name of Monitoring Firm Hired by Building (Hillmann Consulting	Owner (8)		ASC	M No.			of Abatement Con n Response,	ontracto					
Street Address 1600 Route 22 East, Suite #107						Street	Address Technology L	-					
City, State, Zip Code Union, NJ 07083						City, S	State, Zip Code	ane					
Project Manager for Monitoring Firm Mark Perlmutter			Telepho	one No. 88-7800	n	Teleph	ort, PA 15632		License N	10.			
Start Date (10) 11/1/2018	Schedule					Name	325-3330 of OSHA Monito	r	01121				
Occupancy Status During Abatement (Check		. 33					n Response Address						
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm	eriod of A	bater	ment			70 H	illside Dr., Su tate, Zip Code	ite 200) (branch	office	e)		
Other - Describe: work area will be con	ained and	cord	oned off)								
Scope of Work (Check All That Apply) ≥3 sf or ≥3 if ≥160 sf or ≥260 if	-	enova				×	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure						
	ls l	ocat	ion	1,000,000,000			Tren Enompte	74 () 41	id Holl-I flab	T	Abate		t
Location of		ormal	lly		Des	cription	of			-	Ту	pe	_
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)		itena	nce/ Staff?	Asbes (i.e	. thermal surfac	aining M systems sing, VA niscellan	aterial (ACM) insulation, Γ, or eous)	(5	Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
5th Flr - U.S. Marshals Service Area	162	NO	N/A X		10/6	allboard	4		40	_		(D	
order marchine corvide Area					VVC	iliboard	J		48	SF		_	
								V					
Name of Registered Waste Hauler		N	JDEP W	aste	Cubic	/ards	Name of	Registe	ered Landfill				
N.E.T.S., Inc.	Hauler ID No. of Waste 1 YD				Alliance Landfill								
City, State Hazleton, PA					Disposa 11/30/		City, Stat Taylor,						
Completed by essica Wolfe	Title Admin	istra	tive Su	pport	Si	grature	sica/	41	/g Dat	te /30/1	18		
						-pee	nu (MC/V	, we	M			-	

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) Name of Building Owner/Operator (2) Date of Notification (1 10 18 Levco Associates OCT 3 1 2018 Agencies Notified Type Notification Street Address ☐ Initial 1 Wayne Hills Mall **⊠** DOLWD City, State, Zip Code Amendment #2 □ DHSS Wayne, NJ 07470 ☐ DCA ☐ Emergency (including Name of Contact Telephone Number justification) (NJAC 5:23-8) ☐ Cancellation Michael Feehan 973-471-2394 **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) Vacant Former Wayne Hills Mall Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, 1 Wayne Hills Mall homes, etc.) # of Floors Square Feet City (5) Bldg. Age Wayne 103.000 1 34 County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Passaic Vacant Retail Mall Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Health and Safety Services, Inc. 00117 SAI Environmental Services LLC Street Address Street Address PO Box 365 277 Fairfield Road, Suite 102 City, State, Zip Code City, State, Zip Code Berlin, NJ 08009 Fairfield, NJ 07004 Telephone No. Project Manager for Monitoring Firm Telephone No. License No. 01349 Jim Proctor 856-452-1311 (973) 852-3444 Scheduled Completion Date (11) Name of OSHA Monitor Start Date (10) 9 / 05 / 18 11 / 30 / 18 SAI Environmental Services LLc Occupancy Status During Abatement (Check only one) Street Address ☑ Facility Closed/Vacated During Entire Period of Abatement 277 Fairfield Road, Suite 102 ☐ Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: _____AM-___PM/____PM-__ Fairfield, NJ 07004 Scope of Work (Check all that apply) ≥3 sf or ≥3 lf □ Renovation Mini-Enclosure □ Demolition ≥160 sf or ≥260 lf ☐ Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Used Solely by Encapsulate Enclosure Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED (i.e., thermal systems insulation, (Specify Custodial Staff? IN Facility surfacing, VAT, or SF or LF) (12)other miscellaneous) (13)N/A Yes No Exterior 350 SF M Stucco 103,800 SF \boxtimes Exterior Roofing materials Interior Floor Tile/Mastic 6,806 SF \boxtimes П П Name of Registered Landfill Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Hauler ID No. Waste

ASB-41 MAY 11

City, State

New Castle, DE
Completed By (Print or Type)

Mary Petrovski

Service Transport Group, Inc

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

1800 Disposal Date

11/30/18

Signature

SW2117

Title

President

Minerva Landfill

Waynesburgh, OH

Date

10/27/2018

City, State

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

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Date of Notification (1)	7000	- 115-M				Owner/Operator	(2)	OCT 3	1 2	018	1	1-1			
	/	18		Lev	co Asso	ciates	¥				77-10-				
Agencies Notified	Type Notification	on		Street	Address		*	163.3	- 2	F 1					
⊠ EPA	☐ Initial			1 W	ayne Hill	s Mall		A state of the sta			. C1				
⊠ DOLWD	Amended Amendmen	.+ #4		City, S	tate, Zip C	ode				15 - 4 : 14:	al consta	Mark Company			
☑ DHSS ☐ DCA	Emergency	-	,	Way	ne, NJ 0	7470									
(NJAC 5:23-8)	justification		,	Name	of Contact			Telephone Numb	er						
	☐ Cancellatio	n		Mic	hael Fee	han		973-471-2394	ŀ						
				FAC	ILITY IN	FORMATION									
Name of Facility Where	Abatement is Tal	king Place	(3)				Type of Facility (4)							
Vacant Former Wa	yne Hills Mall						School (K-12								
Street Address							Other (i.e., pr	(Other than K-12) ivate and commerce	cial bu	ildings	š.				
1 Wayne Hills Mall							homes, etc.)								
City (5)							Square Feet	# of Floors	Blo	dg. Ag	е				
Wayne							103,000	1		34					
County (6)				Coun	ty Code (7)(STATE USE ONLY)	Current Use (Pri	Use (Prior if being demolished)							
Passaic							Vacant Reta	il Mall							
Name of Monitoring Firm		ng Owner	(8)	ASCM			ent Contractor (9)	OTHER STREET							
Health and Safety S	Services, Inc.			0011	7		mental Services	Services LLC							
Street Address						Street Address									
CPO Box 365						000000000000000000000000000000000000000	Road, Suite 10	2							
City, State, Zip Code						City, State, Zip C									
Berlin, NJ 08009			1= .			Fairfield, NJ	07004	111							
Project Manager for Mon	itoring Firm		100000000	phone		Telephone No.	44	License No.							
Jim Proctor	Ico	heduled (6-452		(973) 852-34 Name of OSHA	2235	01349							
Start Date (10) 9 / 05 /				lion Da			mental Services	: II c							
					10_		mental ocivices	, LLC							
Occupancy Status During Facility Closed/Vacate			23	mont		Street Address	Dood Suite 10	2							
☐ Abatement Performed					cribe		Road, Suite 10	2							
Time of Abatement:						City, State, Zip C Fairfield, NJ									
Scope of Work (Check a	II that apply)					rairiieiu, No	07004					_			
Coope of Work (Officer a	ii tilat appiy)						ntainment with Neg	ative Pressure							
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or >260 lf			enovati emolitic				closure ag Procedure								
△ ≥ 100 SI OI ≥200 II		D 0	emonuc	J11				n-Friable Procedur	е						
			s Locat						Ab	ateme	nt T	уре			
Location		111-	Norma ed Sole		Anha	Description		Amount	R	Re	Щ	щ			
Asbestos-Containing TO BE ABA		M	aintena	ince/		stos Containing M ., thermal systems		Amount (Specify	Removal	Repair	ncap	Enclosure			
IN Facil	ity	Cu	stodial (12)		23,023	surfacing, VA		SF or LF)	val	-	Encapsulate	sure			
(13)		Yes	1000	N/A	1	other miscellan	eous)				ate				
Exterior			Stucco			350 SF									
Exterior			Roofing	g materials		103,800 SF									
Interior				\Box	Floor T	ile/Mastic		6,806 SF							
N-									10	П	П				
Name of Registered Was	ste Hauler		1	JDEP V	Vaste	Cubic Yards of	Name of Regis	tered Landfill	1=						
Service Transport			F	lauler II		Waste 1800	Minerva La	andfill							
City, State						Disposal Date	City, State								
New Castle, DE						10/31/18	Waynesbu	rgh, OH							
Completed By (Print or T	ype)	Title				Signature	, A	/ Da	te			-			
Mary Petrovski		Presid	ent			1/10	Ill Weller	The last	9/5	/18					

ASB-41 MAY 11

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

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

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		0.0-	0	7		Ē	1 111

Date of Notification (1)			A -		Name	of Building	Own	er/Operator (2	2)	OCT 3	3 7 20	18	-	4			
	24 /	18	_			co Assoc			,	ĺ			1-				
Agencies Notified	Type Notificat	ion			Street	Address				15-31-31-3	1,77,100	171.5					
⊠ EPA					1 W	ayne Hills	s Ma	III		Ler	ALC: NO.	die	2.2	- 1			
□ DOLWD	☐ Amended			ŀ		tate, Zip Co		21.10		The second second	man a high said	1.5					
□ DHSS	Amendmer	7.333			1000	ne, NJ 0		ì									
□ DCA	Emergency		uding	}		of Contact		<u>'</u>		Telephone Nu	mher						
(NJAC 5:23-8)	justification Cancellation	,				hael Feel				973-471-2							
	☐ Caricellatio)/ I					0.00000			373-471-2	334			_			
					FAC	ILITY IN	FOR	MATION									
Name of Facility Where	Abatement is Ta	iking F	Place	(3)					Type of Facility								
Vacant Former Wa	yne Hills Mall	I							☐ School (K-12 ☐ Subchapter 8		12)						
Street Address									Other (i.e., pr			ilding	s,				
1 Wayne Hills Mall									homes, etc.)			(10)					
City (5)									Square Feet	# of Floors	BI	dg. Aç	je				
Wayne									100,000	1		34					
County (6)		- 12			Coun	ty Code (7)	(STAT	E USE ONLY)	Current Use (Pri	or if being demo	olished)						
Passaic									Vacant Reta	il Mall							
Name of Monitoring Firm	Hired by Buildi	na Ov	vner (8)	ASCM I	No.	Nan	ne of Abateme	ent Contractor (9)								
Health and Safety				7	0011	0000000	7.000		nental Service								
Street Address		· 					Stre	et Address									
CPO Box 365									Road, Suite 10	12							
	City, State, Zip Code							, State, Zip Co		-							
							2.000	airfield, NJ									
Berlin, NJ 08009				1 = 1				NAME OF THE PERSON OF THE PARTY.	07004	License No.							
Project Manager for Mor	nitoring Firm				phone I			phone No.									
Jim Proctor					6-452			73) 852-344		01349							
Start Date (10)	E SECTION CONTRACTOR				tion Dat		(1)	ne of OSHA M									
9 / 05 /		_10	_ /	31	_ / -	18_	S	Al Environn	nental Service	s LLC							
Occupancy Status Durin	g Abatement (C	heck	only o	ne)			Stre	et Address									
□ Facility Closed/Vacat	생일이 있었다. 아이는 내가 있는 그리고 있는 것이 없는 것이 없다.																
☐ Abatement Performe					AM Only, Clark, Elp Code												
Time of Abatement:	AM	_PM		_PM-		AM	F	airfield, NJ	07004								
Scope of Work (Check a	Il that apply)							W-200000000	20 / O. WAS 202	100 VSS							
			П n.		22			□ Full Con □ Mini-Enc □ Mini-Enc	tainment with Neg	gative Pressure							
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			☐ Re 図 De						g Procedure								
2 - 100 Si Gi - 200 ii		,							mpted (*) and No	n-Friable Proce	dure						
				Locat							At	atem	ent T	ype			
Location				Norma				Description of			R	R	Ш	ш			
Asbestos-Containing TO BE AB)		intena				Containing Ma rmal systems		Amount (Specify	Removal	Repair	Encapsulate	Enclosure			
IN Faci			Cust		Staff?	(1.0		urfacing, VAT		SF or LF)	oval	=	lusc	sur			
(13)	920 4 0	+		(12)	T	-	oth	ner miscellane	eous)	7/3			ate	Ф			
		_	Yes	No	N/A				2		1 200000	-					
Exterior	Exterior									350 SF							
Exterior						Roofing	g ma	terials		6,806 SF							
Interior						Floor T	ile/M	lastic		103,800							
	,																
Name of Registered Wa				1000	JDEP I		Cub	oic Yards of	Name of Regi								
Service Transport Group, Inc					SW21		1	800	Minerva L	andfill							
City, State							Disposal Date City, State										
New Castle, DE							10/31/18 Waynesburgh, OH										
Completed By (Print or Type) Title								Signature	AL.	/ .	Date	40					
Mary Petrovski President								May	WILLIE	At \	8/24/	18					

ASB-41 MAY 11

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

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ASB-41

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

10000	_		(Pu	irsuant	to NJA	C 8:60 and 5:16	5)	007	· ງ '	20	110	
Date of Notification (1)				Name o	of Building	11111 061	OCT 3 1 2018					
	15 /	18				tion Administra		to the state of the state of		. 1	: **	40.70
Agencies Notified	Type Notificati	ion	-	Street A	Address			/	1.579	CHS.		, to
⊠ EPA	☐ Initial			Envi	ronment	tal & Safety Sec	tion ANG-# 332	ACY Intl Apt NJ	0840	5		es r
□ DOLWD □ □ □ □ □ □ □ □ □				City, St	ate, Zip C	ode						
☑ DHSS	Amendmer			Atlar	ntic City,	, NJ						
DCA (NUAC 5:22 8)	☐ Emergency justification		1		of Contact			Telephone Number	r			
(NJAC 5:23-8)	☐ Cancellation			Chri	s Jensoi	n, MB Markland		609-287-7144				
				FAC	ILITY IN	FORMATION						
Name of Facility Where	Abatement is Ta	king Place	(3)				Type of Facility (
William J. Hughes	Tech Center	Building	#302				School (K-12)	(Other than K-12)				
Street Address							Other (i.e., pr	ivate and commercia	al build	dings	,	
Building 302 - WJF	I TC						homes, etc.)			333		
City (5)							Square Feet	# of Floors	Bldg	J. Age	9	
Atlantic City							10,500	2	50)		
County (6)		-		Count	ty Code (7)(STATE USE ONLY)	Current Use (Pri	or if being demolished	ed)			
Atlantic							Other	7				
Name of Monitoring Firm	Hired by Build	ing Owner	(8)	ASCM N	No.	The parties and a property of a wood of the property	ent Contractor (9)					
Horizon Environm						Asbestos an	d Mold Service	s, Corp.				
Street Address												
PO Box 316						3859 Sylon E	Boulevard					
City, State, Zip Code						City, State, Zip C	ode					
Thorofare, NJ 0808	36					Hainesport,	NJ 08036					
Project Manager for Mor		Territoria de la constantina della constantina d	Tel	lephone I	No.	Telephone No.		License No.				
Dave or Steve Flan			8	356-848	-0800	609-702-040	0	00862				
Start Date (10)	S	cheduled (Compl	etion Da	te (11)	Name of OSHA	Vlonitor					
10 /24 /	18	_11_	/	7_ / _	18_	EMSL Analy	tical, Inc.					
Occupancy Status Durin	ng Abatement (C	Check only	one)			Street Address						
☐ Facility Closed/Vaca	ted During Entir	e Period o	f Abat	ement		200 U.S. Rot	ute 130 North					
☐ Abatement Performe	d Outside of No	rmal Facil	ity Ho	urs - Des	cribe	City, State, Zip C	ode					
Time of Abatement:	AM	PM/	PI	/	AIVI	Cinnaminso	n, NJ 08077					
Scope of Work (Check	all that apply)					☐ Full Cor	gative Pressure					
≥3 sf or ≥3 lf		⊠ F	enova	ation		☐ Mini-En	closure					
≥160 sf or ≥260 lf			emoli	tion		☐ Gloveba	ag Procedure remoted (*) and No	on-Friable Procedure	е			
			Is Loc	ation	Т	Z Non Ex	omptod () dira ()			ateme	ent T	ype
Locatio	n of		Norn			Description	of					-
Asbestos-Containing		1)		olely by nance/	Asb	estos Containing M	laterial (ACM)	Amount (Specify	Removal	Repair	Encapsulate	Enclosure
TO BE AS		1.00		al Staff?	(1.	e., thermal systems surfacing, VA		SF or LF)	oval	=	lusc	sure
(13			(1)	2)		other miscellan					ate	
,		Ye	s N	o N/A					-			+
2 nd Fl. & Stairwell L						tile & Mastic	27,27,00	3600				F
Throughout (uncov	ered during				Miscel	llaneous Materia	al - If found**	up to 200 LF/				
Interior Doors					Doors			35 each	\boxtimes			
												E
Name of Registered W	aste Hauler			NJDEP		Cubic Yards of	Name of Reg	istered Landfill				
Waste Manageme				Hauler		Waste 5	ACUA					
City, State				1727	3	Disposal Date	City, State					
Lafayette, NJ						11/7/18		or Township, NJ	į.			
	Tuno	Title				Signature			ate			
Completed By (Print or		Discourse and	e Co	ordinato	or				111-	22	-18	1

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

CK5171

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

1 40 1	15	W L	7 1	11.77	1:2
11111	15		5 L	17	13
111111	Property of				
11					

Data (Marie III				_					1	111					- 5	11:
Date of Notification (1) 10 /	29 /	18	-					er/Operator (2 al Reg'l Hig	1.4	of many	OCT #1810-23	3 1 366 C		018 #517	71	
Agencies Notified	Type Notifica	ation			Street	Address			1	- 1	I commence	*	(Yali			-
□ EPA					84	Route 31					ACHEUT	r(LEP18		196	Ċ1	
□ DOLWD	☐ Amended			ŀ	City, S	State, Zip C	Code				74 11 14 14 14 14 14 14 14 14 14 14 14 14				50.	132.00
☑ DHSS	Amendme	- 100	_			nington,		8822								
DCA	☐ Emergen		ding	ŀ		of Contac		OOLL		Тто	lephone Nu	ımhar				
(NJAC 5:23-8)	☐ Cancellat							gr of Bldg 8	2 Grounds		908-284-7					
							990		x Grounus	1 :	300-204-7	1/2			-	
					FAG	CILITY IN	IFOR	MATION								
Name of Facility Where A)					Type of Facility	1114 1515						
Hunterdon Central	Reg'l High S	School							School (K-1		المصطفيهما	12)				
Street Address									☐ Subchapter ☐ Other (i.e., p				bui	dinas	55	
84 Route 31									homes, etc.					9		
City (5)									Square Feet	#	of Floors		Bld	g. Age	9	
Flemington									100,000		2		1	962		
County (6)					Coun	ty Code (7)(STAT	E USE ONLY)	Current Use (P	rior if	being demo	olished	d)			
Hunterdon									School							
Name of Monitoring Firm	Hired by Build	ding Ow	ner (8)	1	ASCM	No.	Nam	ne of Abateme	ent Contractor (9)						-
PARS Environment	tal	73							d Mold Servic	**	Corp.					
Street Address		Curl Element						et Address		,						-
500 Horizon Drive<	Suite 540						6000000	359 Sylon B	oulevard							
City, State, Zip Code								State, Zip Co	**************************************							-
	691					ainesport, N										
	Robbinsville, NJ 08691 roject Manager for Monitoring Firm							phone No.	13 00036	- 11	inner Ne					
Julian Fernandez	itoring r iirii				9-468		N-0950435				icense No.					
Start Date (10)	10	ا براہ م مام د	4 0					9-702-0400			00862					
		Schedule 11		97		18	-	ne of OSHA M VISL Analyt i								
Occupancy Status During	Abatement (0	Check o	nly one)			Stre	et Address								
□ Facility Closed/Vacate	집단점 경기에 살아내려면 가득하다 내내가 있다.						20	0 U.S. Rout	te 130 North							
Abatement Performed			3.00 × 0.00 × 1/3		Oity, State, 219 Gode								- 7.11.7			
Time of Abatement: _	AM	PM/_	F	PM	Cinnaminson, NJ 08077											
Scope of Work (Check all	I that apply)															
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			Reno Demo					☐ Mini-Encl	ainment with Ne losure g Procedure mpted (*) and N	A T 02402300€						
			Is Lo	cati	on					T	14510 1 1000		Λha	temer	at Tu	/DO
Location	of		Nor	mal	ly			Description o	f				1			
Asbestos-Containing		1)	Used S Maint			Asbe	stos C	Containing Ma	terial (ACM)		Amount		Removal	Repair	Encapsulate	Enclosure
TO BE ABA			Custod			(i.e		mal systems i urfacing, VAT,			(Specify SF or LF)		3701	ai-	sqe	uso
(13)	cy		(12)				er miscellane			SF ULLE)		=		ulat	Ге
374 XX		1	'es l	No	N/A				5.555 .5						Ф	
Custodial Closet		D	аГ		П	Flbow/	Joint	Insulation			7.5 LF			П	П	П
								ouiddoir			7.0 21					
										-						
												- 1				
N (D							T							ш	Ц	Ш
Name of Registered Was Waste Management				H	JDEP \ auler I[No.	Was	ic Yards of te	Name of Reg							
City, State					17273		5 Disp	osal Date	City, State			_				
Lafayette, NJ							1 50.0	/9/18	Penn Arg	yle, I	PA					
Completed By (Print or Ty	vpe)	Title						Signature	/1		12.0-07%	Date				
Kimberly A. Trumbetti Office Coordinator					•	ŀ	Signature	10-29-18								
		5111	00	Jiu	matol	51		X	V /			10	0	1	0	

CK 5410



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

							1	F	(2)	-	-	-		
Date of Notification (1)	10 / 2	20				Owner/Operator (2 sociates Inc	2)	心心	061	5	o l			
Agencies Notified EPA	Type Notificatio	n			Address North Fl	agler Drive			OCT 3	1	10L 201	Ei		
DOLWD	Amended	м		City, S	state, Zip C	ode			-		-016			
□ DOH □ DCA	Amendment Emergency			Wes	st Palm B	Beach Florida 3	3401	ASD	FSTOO	-	Transport.			
(NJAC 5:23-8)	justification)		1	Name	of Contact			Telephone N	umber	CON	THO	11 &		
	☐ Cancellation			Ric	hard Brue	der		917-733-3	872	OIN	J.	-		
				FAC	CILITY IN	FORMATION								
Name of Facility Where	Abatement is Tak	ing Place	(3)				Type of Facility	(4)						
100 South Washing		9	/				School (K-12)						
Street Address	9						Subchapter 8	Other than K	-12)					
100 South Washing	gton Ave						Other (i.e., pontion homes, etc.)		mercial bu	ııldıng	IS,			
City (5)							Square Feet	# of Floors	BI	dg. A	ge			
Dunellen							650,000	1	3	90				
County (6)				Coun	nty Code (7)	(STATE USE ONLY)	Current Use (Pr	Prior if being demolished)						
Middlesex							Warehouse	ise						
Name of Monitoring Firm	Hired by Building	g Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)	9)						
Health & Safety Se	rvices Inc					Highground I	ndustrial LLC							
Street Address						Street Address								
Po Box 365						12 Industrial	Drive							
City, State, Zip Code						City, State, Zip Co	ode							
Berlin NJ 08009						Florida NY 10	0921							
Project Manager for Mon	nitoring Firm		Tele	phone	No.	Telephone No.		License No.	•					
			8	6-452	-1311	201-252-8600	1	01370						
Start Date (10) 10 / 23 /		eduled C				Name of OSHA N Highground I	lonitor Industrial LLC							
Occupancy Status Durin						Street Address					-			
☑ Facility Closed/Vacate	5			ment		12 Industrial	Drive							
☐ Abatement Performed	77				cribe	City, State, Zip Co		-						
Time of Abatement: _	AM	PM/	PM-		AM	Florida NY 10								
Scope of Work (Check a	Il that apply)					□ Full Cont	toinment with No.	egative Pressure						
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 		100	enovati emolitio			☐ Mini-Enc ☐ Glovebag		5						
		15	Locat	ion	T		mptou () and the			atem	ent T	vne		
Location	n of		Norma	lly		Description of	ıf		7.0	1	T .	7,50		
Asbestos-Containing			ed Sole			stos Containing Ma		Amount	em	Repair	nca	ncle		
TO BE ABA			todial		(i.e	., thermal systems surfacing, VAT	10000 000 000 0000 000 000 000 000 000	(Specify SF or LF)	Removal	i iii	Encapsulate	Enclosure		
(13)	ii.	2	(12)	_	1	other miscellane		0. 0. 2. /	_		late	e.		
		Yes	No	N/A				reversion is		_		_		
roofing, floor, tile					vat			6000 sf			Ш			
					roofing			450,000s						
					window	calk		4000 If						
Name of Registered Was	ste Hauler		223	JDEP \		Cubic Yards of	Name of Regis	stered Landfill						
Sparten Environme	ental Inc		F	lauler II PA58		Waste	Minerva E	nterprises						
City, State				1 A00	7	Disposal Date	City, State							
Donora PA						Waynesburg								
Completed By (Print or T	уре) Т	itle				Signature Date								
Faith Hauss	2006 25	Admin	Mana	ager	150									
ACD 41			2100											

ASBESTOS NESHAP NOTIFICATION OF DEMOLITION AND RENOVATION

OPERATOR PROJECT # POSTMARK		DATE REC	EIVED			NOTIF	ICATION#	
I. TYPE OF NOTIFICATION (O - ORIGINAL C- CAN	CELLE	D) (R	- REVISIO	ON V	VRITE R	EVISIC	N #?)	-0
OWNER NAME: Dunellen Associates Inc							- W	
ADDRESS: 622 North Flagler Drive								
CITY: West Palm Beach		County:		State	:	ZII 334	27.0	
CONTACT: Richard Bruder				FL		Tel	ephone:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
ASBESTOS REMOVAL CONTRACTOR: Highground Industrial LLC						917	-733-3872	
ADDRESS: 12 Industrial Drive								
CITY: Florida				State	: NY	Zip	: 10921	
CONTACT: Faith Hauss		Telephone:	201-252-8	600		Titl	le: min Manager	3
DEMOLITION CONTRACTOR: Highground Industrial LLC							_	
ADDRESS: 12 Industrial Drive								
CITY: Florida				State	: NY	ZII	10921	
CONTACT: Faith Hauss		Telephone:	201-252-8	600		Titl	e: Admin Ma	ınager
1								
III. TYPE OF OPERATION: (D-DEMO O-ORDERED DEMO			377			OVAT	ION): D	
IV. IS ASBESTOS PRESENT? yes List Type of Roofing Vat		os Material (ulking	s) to be Rer	noved:				
V. FACILITY DESCRIPTION (INCLUDE BUILDING NAME	, NUMB	ER AND FI	OOR OR	ROOM	NUMBE	R)		
BLDG NAME: 100 South Washington Ave								
ADDRESS: 100 South Washington Ave								
CITY: Dunellen		County: n	niddlesex		State: N	J	ZIP: 08812	
SITE LOCATION:							00012	
BUILDING SIZE: 650,000	Nu	mber of floo	rs: 1			Age in :	years: 90	
PRESENT USE: vacant		IOR USE:						
VI. PROCEDURE, INCLUDING ANALYTICAL METHOD, I MATERIAL: Bulk samples were obtained by Owner's re to detect the presence of asbestos material.	resenta							ESTOS
VII. APPROXIMATE AMOUNT OF ASBESTOS, INCLUDING: 1. REGULATED ACM TO BE REMOVED	RAC	CM TO MOVED	M.	ATERI	ASBEST AL OVED	os		
2. CATEGORY I ACM NOT REMOVED 3. CATEGORY II ACM NOT REMOVED			CAT I		CAT II	I		
PIPES:(Linear Feet)								
3								
SURFACE AREA (Square Feet) 460,000			x					
VOL. RACM OFF FACILITY COMPONENT (Cubic Yards)	10,800							
VIII. SCHEDULED DATES DEMO/RENOVATION (MM/DD	/YY) S	Start:	10/22/2018	3		Comp	lete: 3/10/	19
IX. SCHEDULED DATES ASBESTOS REMOVAL (MM/DD	/YY) S	Start:	10/23/20	18		Con	iplete: 3/1	0/2019