

13-057-NJ

Date of Notification (1) 09/03/2013				Building O th Hybl	wner/Op	erator	(2)	G		VEI				
Agencies Notified Type Notificatio Type Notificatio Initial Amended Amendme		15 Cit	ty, State	dress lwin Pla e, Zip Cod ield, NJ	le			SEP	5 2	013	4			
□ Emergence justification □ DCA □ Cancellation	(including	Na El	ame of 0 lizabe	Contact th Hybl			A S	DES DS LICE:	Tele	phone Nun	nber			
Name of Facility Where Abatement is Tak Bloomfield Residence	ing Place (3)		FACIL	ITY INFO	RMATIC	ON		of Facility (2)	er than K-12)\			
Street Address 15 Baldwin Place City (5)							X C		rivate 8	commercia	al build	lings,		es,
Bloomfield, NJ 07003 County (6)			ounty Co	ode (7) SE ONLY)			Currer	nt Use (Prid	or if bei	ng demolish	ned)			
Essex Name of Monitoring Firm Hired by Buildin CA Environmental	g Owner (8)	100	ASCM				of Abater, LL0	ement Cor	ntractor	(9)				
Street Address 2200 Paterson Plank Rd # 7	***************************************					168	Addres Arund	el Rd					4	
City, State, Zip Code North Bergen, NJ 07047 Project Manager for Monitoring Firm		Te	elephon	e No.		Para		p Code NJ 0765	2	License N	0.			
Carmelo Almonte Start Date (10)	Scheduled 09/23/20	Compl		64-6583 Pate (11)		Name)336-0 of OSH or Tec	IA Monitor		01195				
09/13/2013 Occupancy Status During Abatement (Ch Facility Closed/Vacated During Entire	eck Only One)		nt			Street	Addres		•					
Abatement Performed Outside of No Other – Describe:	rmal Facility H	ours				- 3	tate, Zi NY 1	p Code 1101						
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		novatio nolitior				×	Min Glo	i-Enclosure vebag Pro	e cedure	Negative F			·e	
		ocation			- 9.000								emeni /pe	t
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used 3 Maint Custoo (enanc	by e/		os Conta thermal	system sing, VA	/laterial s insula tT, or		(\$	mount Specify For LF)	Removal	Repair	Encapsulate	Enclosure
Basement		7	Х		Pipe	Insula	ation		5	0 LF	х			
,											-			
Name of Registered Waste Hauler		NIII	DEP Wa	asto	Cubic	Vards		Name of	Registe	ered Landfil		L		
SUPER, LLC		Hau	uler ID I 4893		of Was	ste		GROW	/S Lar					
City, State Paramus, NJ					Dispos	al Date	1	City, Stat		A				
Completed by Tailor Dominguez	Title Projec	t Man	nager			ignatur	10%	1/a	4/	Di	ate 9/03/	2013	3	

0,128

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to N IAC 8:50 and 12:120)

1 10	(1)	ursuant	to NJAC 8:60 and	1 12:120			7/7 [5	3	7	
Date of Notification (1)		Nameo	SEY	perator	(2)	<u> </u>	W L			
Agencies Notified Type Notification		Street A	ddress	JAI	1/2	SEP 5 3	013		卯	
EPA Initial Amended Amendment		City, Sta	ate, Zip Code	010	1 E 148	EZSAS CAJ	₩L8	ار	no	80
Emergency (injustification)	ncluding	Name o	f Contact	~ //	10116	Telephone No				
DCA Cancellation			LITY INFORMATI	Qui	IIEN				felia. A	This is
Name of Facility Where Abatement is Taking	Place (3)	FACI	LITY INFORMATI	ON	Type of Facility	(4)		*4		
PSEXG					School (K-					
Street Address 108 HAMPTO	NE	20.			Other (i.e. etc.)	r 8 (Other than K- private & commerc		dings,	home	es,
City (5)-	11	•			Square Feet	# of Floors		Bldg. A	ge A	
County (6)			Code (7) USE ONLY)			ior if being demolis	경기 이 시시 이 라이지	77		. 1
Name of Monitoring Firm Hired by Building C	Owner (8)	ASCN	/I No.	Name	of Abatement Co		<i>S</i> 7	17)	101	<u> </u>
ENVIRONMENTAL TACTICS	98 - 50 	004	5	UNIC	UE SYSTEM	S OF AMERIC	A INC).		
Street Address 64 BROAD STREET		3:			Address VHITEHEAD	AVE.			**	
City, State, Zip Code MATAWAN, NJ 07747					tate, Zip Code TH RIVER, N	J 08882				
Project Manager for Monitoring Firm TOM GEIGER		Telepho 732-29	ne No. 90-2217		one No. 132-8350	License 01111	No.			
Start Date (10) 9/17/13	Scheduled Co	mpletion	Date (11)		of OSHA Monitor	S OF AMERIC	A INC).		
Occupancy Status During Abatement (Check	Only One)	9/			Address	A. /=				
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe:	al Facility Hou			City, St	VHITEHEAD					•
Scope of Work (Check All That Apply)				SOU	TH RIVER, N	J 08882				
≥3 sf or ≥3 if ≥160 sf or ≥260 if	Renov Demo				Mini-Enclosur Glovebag Pro		egi es		re	
	Is Loca	ition					T	Abate	ement	
Location of	Norma Used Sol			scription		Amount	-	'	ре	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility	Maintena Custodial (12)	Staff?		systems cing, VA	insulation, Γ, or	(Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure
(13)			other n	niscellan	eous)		oval	ai-	ulate	sure
	Yes No	N/A	C th	. Б.		9				
OUTSIDE	$\parallel \parallel^{\times}$		Somest:	2 1.	E CONTING	300 LF				
Name of Registered Waste Hauler		NJDEP W	/aste Cubic	Yards	Name of	Registered Landfi	in	l		
WASTE MANAGEMENT		Hauler ID 1125	Appe	12/	GROW	S				
City, State ELIZABETH, NJ		- conestion	Dispos	al Date 26/1	City, Stat MORR	ISVILLE, PA				
Completed by LALAL RAIMO	Title	' Ma	S	ignature	-00	. 0	ateg	3	13	,
CARON LAINIO	office	~ ~	10. 6	-4	14	21100		_/	10	

Date of Notification (1)				Na	me of	Building	Owner/Operator (2	2)					
9 / _	3 / 1	13		1	100 P	ark Plaz	za Drive, LLC	2 @ E Joh	# 1308-1799: 0	hk. #	3322		
Agencies Notified	Type Notificatio	n		Str	reet A	ddress			W E IN				-
⊠ EPA				F	РО В	ox 1515							
□ DOLWD □ □ □ □ □ □ □ □ □	Amended			Cit	ty, Sta	ite, Zip Co	ode	CLD E	2012				
□ DHSS	Amendment		-	1	Seca	ucus, N	J 07096-1515	SEP 5	2013				
DCA (NJAC 5:23-8)	☐ Emergency justification)		ig	Na	ame of	f Contact			Telephone Numb	er			
(,	☐ Cancellation			I	Mr. R	obert M	ertrud A	SBESTES DO			_		
				1	FACI	LITY INF	FORMATION	1. C. 11975-14	13				
Name of Facility Where	Abatement is Tak	ing Plac	ce (3)					Type of Facility					
100 Park Plaza Driv	ve							School (K-12					
Street Address								Subchapter 8	3 (Other than K-12) rivate and commer	cial bui	ldina	S.	
100 Park Plaza Driv	ve							homes, etc.)		T. T. T. T. T.	3	5.6 	
City (5)	-	***************************************	-	3100				Square Feet	# of Floors	Blo	lg. Ag	je	
Secaucus								160,000	2	2	25+		
County (6)				C	County	/ Code (7)	(STATE USE ONLY)	Current Use (Pr	ior if being demolis	hed)			
Hudson								Vacant Buil	ding				
Name of Monitoring Firm	Hired by Buildin	g Owne	r (8)	AS	CM N	0.	Name of Abateme	ent Contractor (9)					
Horizon Environme							Asbestos an	d Mold Service	es, Corp.				
Street Address				_			Street Address						
PO Box 336							3859 Sylon B	Boulevard					
City, State, Zip Code							City, State, Zip C	ode					
Thorofare, NJ 0808	36						Hainesport, I	NJ 08036					
Project Manager for Mor	nitoring Firm		Te	lepho	one N	0.	Telephone No.		License No.				
Steve Flanigan				856-	848-0	0800	609-702-0400)	00862				
Start Date (10)	Sch	heduled	Comp	letior	n Date	(11)	Name of OSHA N	Monitor					
9 / _18_ /	13	10	/ _	03	/ _	13	EMSL Analyt	ical, Inc.					
Occupancy Status Durin	ng Abatement (Ch	eck onl	y one)	1			Street Address		120				
□ Facility Closed/Vacat							200 U.S. Rou	te 130 North					
Abatement Performer Time of Abatement:							City, State, Zip C Cinnaminsor					8	
Scope of Work (Check a	all that apply)												
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf			Renov Demol				☐ Mini-End ☐ Gloveba	closure g Procedure	gative Pressure E on-Friable Procedu		sur	E	
			Is Loc	ation	1					1	atem	ent T	ype
Location Asbestos-Containing <u>TO BE AB</u> IN Faci (13)	Material (ACM) ATED	C	sed S Mainte ustodia (1	nance al Sta 2)	by e/ aff?	Asbe (i.e	Description of stos Containing Ma , thermal systems surfacing, VAT other miscelland	aterial (ACM) insulation, , or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
		Ye		-	N/A	FI =	U - 0 B0 - 4"		9 500 05	N .			
Throughout			L	-		Floor T	ile & Mastic		8,500 SF			닏	
				[I I				Ш	
				1 1									
			T			-							
Name of Registered Wa	ste Hauler				DEP W	/aste	Cubic Yards of	Name of Regi	stered Landfill				
Freehold Cartage,				111111111111111111111111111111111111111	iler ID		Waste	GROWS L					
City, State				U	2265		5 Disposal Date	City, State		- 7			
Freehold, NJ							10/4/13		e, PA 19067				
Completed By (Print or	Type)	Title					Signature	٥	D	ate			
Kimberly A. Trumb	ANTE: 18		e Cod	ordin	nator		Pau			1) -	-13	}	

Date of Notification (1)		3000		1	Name o	f Building	Owner/Operator (2	E C E	MEIU				
9 /	03 /1	13	_		Mr. J	oshua &	Mrs. Robin Sci	wartz	/ Job # 1308	1780: 0	hk.	#331	4
Agencies Notified	Type Notificatio	n		1	Street A	ddress		1220	1				
□ EPA					8 Edi	nburgh (Court	SEP 5	2013	/			
□ DOLWD	☐ Amended			1	City. Sta	ate, Zip Co	ode I					-	
☑ DHSS	Amendment	#			-		, NJ 08054			1			
☐ DCA	☐ Emergency		ıding	-		f Contact	1 -	ASSESTOS CO	Telephone Num	ber			
(NJAC 5:23-8)	justification) Cancellation			- '	ocare unauna	Schwar	- L	CICENO	•				
	☐ Cancellation						ORMATION	•	- Indian				\neg
Name of Facility Where A	Abatament is Tak	ing D	lace (3)	FACI	CITT IN	OKWATION	Type of Facility (4)			-	
		ing F	lace ()				☐ School (K-12)					
Residential Proper	Ly							☐ Subchapter 8	(Other than K-12	2)			
Street Address 114 North Gladstor	ne Avenue							Other (i.e., pr homes, etc.)	ivate and comme	rcial bui	dings	,	
City (5)		7.00						Square Feet	# of Floors	Bld	g. Ag	е	
Margate City	×							2000	2	4	4		
County (6)					Count	v Code (7)	(STATE USE ONLY)	Current Use (Pri	or if being demoli	shed)			
Atlantic							• • • • • • • • • • • • • • • • • • • •	Residential	Property				
Name of Monitoring Firm	Hired by Ruildin	a Ow	mer (8	1 4	SCM N	lo T	Name of Abateme						
NA	Timed by building	g Ow	mei (o	, I,	iooiii i			d Mold Service	s. Corp.				- 4
1. J. 1884							Street Address		-,	-	-		\neg
Street Address							3859 Sylon B	oulevard					
							City, State, Zip Co					-	-
City, State, Zip Code													
Hainesport, NJ 08036 Project Manager for Monitoring Firm Telephone No. Telephone No. License No.													
Project Manager for Mor	nitoring Firm			reiel	onone i	10.	609-702-0400	1	00862				
0 5	Cal	L _ J I	lad Ca	malet	ion Dat	o (11)	Name of OSHA N		00002				-
Start Date (10) 9 / 30 /					//		EMSL Analyt						
Occupancy Status Durin							Street Address			- 1		0.00	
☐ Facility Closed/Vacat					nent		200 U.S. Rou	ite 130 North					
☐ Abatement Performe						cribe	City, State, Zip C						
Time of Abatement:	AM	_PM/		_PM-	/	AM	Cinnaminson						
Scope of Work (Check a	all that apply)						Π5.110	taineant with No.	native Proceure				
☐ ≥3 sf or ≥3 lf		ŗ	⊠ Rer	ovati	on		☐ Mini-End	tainment with Neg	gative Pressure				
≥3 \$1 61 ≥3 11 ≥160 \$f or ≥260 If			Der				☐ Gloveba	g Procedure					
							⊠ Non-Exe	empted (*) and No	n-Friable Proced			0.0000.00	
				Locat						Ab	ateme	ent Ty	/pe
Locatio				orma d Sole			Description		Amount	₽ Re	Repair	Ē	E
Asbestos-Containing TO BE AB				ntena			stos Containing Man, thermal systems		(Specify	Remova	pai	cap	clos
IN Fac			Cust		Staff?	(1.6	surfacing, VAT		SF or LF)	Val	"	Encapsulate	Enclosure
(13)		-		(12)	T		other miscelland	eous)				ate	
			Yes	No	N/A				4000.05		П		
Exterior						Asbest	os Shingles		1600 SF	-	ᆜ	1	무
											Ш	Ш	Ш
		_		П	П			_					
Name of Registered Wa	aste Hauler				JDEP \		Cubic Yards of	Name of Regi	stered Landfill				
Freehold Cartage,				111	lauler II	O No.	Waste	GROWS L					
			4		02265)	5 Disposal Date	City, State			Albano		Tale Control
City, State Freehold, NJ							10/3/13		e, PA 19067				
	Time	Tial			-20		Signature /	^		Date_	-		-
Completed By (Print or		Title		`^~	dinato	-	Wal I	1			3-	3	
Kimberly A. Trum	Detti	U	ince (JUUN	unialo		- An	<i>y</i>			J	4	

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT

\0			(Pu	rsuant	to NJA	C 8:60 and 5:16	"IEN FO		FF	2		
Date of Notification (1)	11-00-01			Name o	of Building	Owner/Operator (2			ᆜ║	$\parallel \parallel$		
09/	3 /	13		Tuck	ner Deve	Ioment Corp						
Agencies Notified	Type Notificat	ion	-	Street /	Address		SE	P 5 2013		力ト		
□ EPA				799	Central A	Ave						
□ DOLWD	Amended			City, St	tate, Zip C	ode	100.00	STOS CONTRO	11 0			
⊠ DOH	Amendme			High	nland Par	rk NJ	, A8555	UCENSING	Lat			
DCA (NJAC 5:23-8)	justificatio			Name	of Contact		- Commence Commence	Telephone Nun	nber			
	☐ Cancellation	on		John	n Donoh	ue		L				
				FAC	ILITY IN	FORMATION			5			
Name of Facility Where A	batement is Ta	aking Place	(3)	W.V.			Type of Facility (4)				
Retail Store							School (K-12) I (Other than K-1)	2)			
Street Address							Other (i.e., pr	ivate and comme	z) ercial bui	ldings	5,	
175 Main Street		*					homes, etc.)					
City (5)		150				3	Square Feet	# of Floors	Bld	g. Ag	e	
Fort Lee	×		27	,		8.		1				_
County (6)				Coun	ty Code (7)(STATE USE ONLY)	Current Use (Pri	or if being demol	ished)			
Bergen							10-1-4			210102		
Name of Monitoring Firm			(8)	ASCM I	No.	Name of Abateme	NAGEMENT L					
J & S Environment	al Laborator	ies LLC				3 (400) (100) (100)	MAGENIENT					
Street Address	4					Street Address 27 Outwater	l ano					
2333 Route 22 Wes	τ					City, State, Zip Co					-	-
City, State, Zip Code Union NJ						Garfield NJ 0						
Project Manager for Mon	itorina Firm		Tele	phone I	No	Telephone No.	7020	License No.				
Sherill	itoring r iiiii		100000000	08 206		973 928 4888		1188				
Start Date (10)	S	cheduled C	omple	tion Dat	te (11)	Name of OSHA N	lonitor				2.00	
09 /13 /	1000	09 /			원이 있었습니다 하다	ALL PRO MA	NAGEMENT L	LC				
Occupancy Status During	Abatement (C	Check only	one)			Street Address						
☐ Facility Closed/Vacate	ed During Entir	e Period of	Abate	ment		27 Outwater	Lane suite B					
Abatement Performed						City, State, Zip C	ode					
Time of Abatement: _	AM	PIVI/	PIVI		Alvi	Garfield NJ 0	7026					
Scope of Work (Check a	I that apply)		70.110			□ Eull Con	tainment with Neg	native Pressure				
≥3 sf or ≥3 lf		☐ Re	enovat	ion		☐ Mini-End		gative i lessure				
≥160 sf or ≥260 lf			emoliti				g Procedure empted (*) and No	n Friable Bresse	turo			
		la la	Loca	tion	Γ	⊠ Non-Exe	empled () and No	III-FIIADIE FIOCEC		ateme	ant Ty	vne
Location	of		Norma	ally		Description (of		73-0-10			
Asbestos-Containing	Material (ACM		ed Sol	ely by		stos Containing Ma	aterial (ACM)	Amount	Removal	Repair	Encapsulate	Enclosure
TO BE ABA				Staff?	(1.6	e., thermal systems surfacing, VAT		(Specify SF or LF)	oval	≒	psu	Sur
(13)	ıty		(12)			other miscellane		1992			late	Ф
		Yes	No	N/A								
Roof					Entire	roof		12,900 SF				
			10									
			П							П	П	П
Name of Registered Was	te Hauler			NJDEP	Waste	Cubic Yards of	Name of Regi	stered Landfill				
ALL PRO MANAGE			0.83	Hauler II	D No.	Waste	IESI Landi					
City, State				00348	360	As Needed Disposal Date	City, State			(interest		-
Garfield NJ						TBD	Bethlehen	n, PA				
Completed By (Print or T	ivne)	Title				Signature			Date		i	
Ted Veskov) PC)	PM				Joignaturo J.	Trant.		Ē.	1 7		

ASB-41 JAN 13

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

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Date of Notification (1) 9/4/13					f Building on Ashla			(2)	edients						
Agencies Notified	Type Notification			Street A		A			SEP	5	2013	10			
EPA	× Initial				Minisink		ie	W 1275			*				
DEP × DOL	Amended Amendment	#			ate, Zip Co NJ 088		1	L.	ASCEST		NT HOLD	2			
	Emergency		-	(8) (8) (8) (8) (8)		009			Maria	* 7 16			_	5155	
⊠ DOH DCA	justification) Cancellation				f Contact Hoffman					املت	enbone N	umbor-			
<u> Бол</u>	Caricellation	10			LITY INF		ON			<u>'</u>			3		
Name of Facility Where A		ng Place (3)	1 70	Litt inet	OKWATI	ON	Туре	of Facility	(4)			34		
Ashland (remote pa	rt of property)							П	School (K-	12)					
Street Address			-111111						Subchapte	r 8 (Oth			Jr	h	
50 S. Minimsink Ave	enue				aju:			200000	Other (i.e. etc.)	private	x commer	ciai buli	uings	nome	es,
City (5) Parlin							V.		re Feet	1 2000	Floors	0.57	Ildg. A	ge	
A - 700000 A								N/A	-	N/A			1/A		
County (6) Middlesex					Code (7) USE ONLY)			ent Use (Pri used	or if bei	ng demoli	shed)			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCN	ΛNo.				tement Co	ntractor	(9)				
URS									es, LLC						
Street Address 335 Commerce Driv	e, Suite 300						Street 407 \		ss Lincoln H	Highwa	ay, Suite	500			
City, State, Zip Code									ip Code	10000					
Fort Washington, PA	10, 00000000000000000000000000000000000							1708024 5110	19341						
Project Manager for Moni David Whelihan	toring Firm			Telepho 215-28	ne No. 35-1860		Teleph 484-8				License 01161	No.			
Start Date (10)	7		pletion	Date (11)				HA Monitor	3						
9/16/13		9/20/13					EMS								
Occupancy Status During							Street		ss : 130 Nor	th					
Facility Closed/Vaca Abatement Performe							0.0000000000000000000000000000000000000		ip Code	uı					
Other – Describe: _		nai i aointy	riours			_			son, NJ	08077					
Scope of Work (Check Al	That Apply)		-						,						
≥3 sf or ≥3 lf		× R	enova	tion				Ful	l Containm	ent with	Negative	Pressu	re		
2160 sf or ≥260 lf		_	emolit	(T) (T) (A) (A)			-	Mir	ni-Enclosur	е	rioganie	1 10000			
							×	1 010	vebag Pro n-Exempte		d Non-Fria	ble Pro	cedur	e	
1		ls	Locati	on									Abate	ement	t
Location	of	. N	ormal	ly		Des	scription	of					Ту	ре	
Asbestos-Containing			d Sole ntenar			tos Cont	aining M	laterial			mount			ш	_
TO BE ABA		100000000000000000000000000000000000000	odial S		(i.e.	thermal	systems cing, VA		ition,		pecify or LF)	Ren	Re	ncap	nd
(13)	ž.		(12)				niscellan				,	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A								_		ite	e
field / hedg	e row			Х		pipe	insulat	tion		20	00 LF	Х			
			72770		===							1			
		1			- HEELEN							_			
		+ +										-			\vdash
Name of Registered Wast	e Hauler		ΤN	JDEP W	/aste	Cubic	Yards		Name of	Registe	red Landf	ill			\vdash
Waste Management	Н	auler ID	No.	of Was			GROW								
City, State						100	al Date		City, Stat						
Trenton, NJ						TBD			Morrisv	ille, P	4				
Completed by		Title	12.0			S	ignature		1 11	_	0 0.5	ate			
Jack Bally		Sr. Pr	oject	Mana	ger		ad	Ll:	Salles	all	9	/4/13		<u> </u>	
ASB-41 (R-06-08)							Do no	t use t	his form for	asbest	os licensu	re exem	pted	activit	ties.



Date of Notification (1)	2.000	1122700			Name	of Building	Owr	ner/Operator (2)						
8 /	30 1	13	-		K7	R NJ	1/	11	The state of the s	DEC	厚	11 1	W I	- F	
Agencies Notified	Type Notifica	tion			Street	Address		., 1	_		- =			2	
☑ EPA	Initial				30	o Bar	ri	Harbor	Dr.					11	
☑ DOLWD	☐ Amended			1	City S	tate Zin C	aho'			J L SEP	5	20	10	-11	111
DOH	Amendme		.dina		Cor	shoho	cke	en Pa.	19428	L CLI	J	20	13	-	21
☐ DCA (NJAC 5:23-8)	☐ Emergend		unig	ŀ	Name	of Contact				Felephone N	lumbe	г		7	\dashv
(110/10/0.25-0)	☐ Cancellati		32		Fra	ink Ry	an		- [-	-9	7	4	*
	<u></u>							MATION						* *	- 1
Name of Facility Where	Abatement is T	aking P	lace	(3)					Type of Facili	ity (4)					
275 Omar A	ave								School (K-		2000				
Street Address				A. 300-100	274-75-3517					er 8 (Other than k , private and com		al bui	ldings		
Avenel									homes, et		mierci	ai bu	lulliga	۰,	
City (5) Middlesex									Square Feet 380,760				lg. Ag		
County (6)					Coun	ty Code (7	VSTA	TE USE ONLY)		(Prior if being der	nolishe	S-10			
County (o)					000.	ty oodo (r	ДОЛЛ	TE OOL ONE IT		varehouse/4			sac.	,	
Name of Monitoring Fire	m Hired by Build	ling Ow	ner (8	3)	ASCMI	No.	Nar	ne of Abatem	ent Contractor		554	310	٠ د ٢	_	_
Bioterra Env										iental Serv	100	Th	10		
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DO BOX 12	24								River St.						
City, State, Zip Code	- /							, State, Zip C		•			est let le con		
	Union NJ 07083									07601					
Project Manager for Mo	ect Manager for Monitoring Firm						Tele	ephone No.	, K 100	License No).			7	
RICK EVSTag					phone I		20	1-931-0	313	011					
Start Date (10)		chedule	ed Co	mplet	ion Dat	te (11)	- 11111	ne of OSHA N			10		- 9-21/0		
9 1 12		12							ENVIronm	ental					
Occupancy Status Durin								et Address	1 0						
X Facility Closed/Vaca						24	1		yler ST.						
☐ Abatement Performs Time of Abatement:							1 72	, State, Zip C							
3.						1010-100-11-0-0	Ü). Hacken	sack	076	06				
Scope of Work (Check	all that apply)							⊠ Full Con	tainment with N	Negative Pressure	e				
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≥160 sf or ≥260 lf		×	Der	nolitio	n		*	☐ Gloveba	g Procedure	Non-Friable Proc	edure.	1500	44	sch	11
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Asbestos-Containing)		d Sole				Containing Ma	aterial (ACM)	Amount		Rem	Repair	in C	nc
TO BE AB				ntena odial S		(i.e		rmal systems		(Specify SF or LF		Remova	쁰.	aps	Enclosure
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Name of Registered Wa	aste Hauler			IN	JDEP V	Vaste	Cut	oic Yards of	Name of Re	egistered Landfill					
Express was		LLC		100	auler II	No.		ste 6500		Enterprises	INC	١.			
City, State					0 (557		posal Date	City, State	•		-			
Newarl	K NJ						9	113-10/13	The state of the s	oura OH					
Completed By (Print or		Title			100		L .				Date)			_
Robert Dombrosk		VP	oPe	ratio	n/sa	Toc) Alad	Donibul.			30/	13		
. SPOIL DOM.	909		-10		1 34	162		114/100	INDI LICORAL		1				

Check 8700

Date of Notification (1) Q 2 - 1	2	Name o	f Building Owner/	Operator (2)	* *		2 6	_[_	Ψ	E
Agencies Notified Type Notification	2	Street A	V.F.V	· P	Roper	-ties	I	15		7
□ EPA ★ Initial	· 1 1 1 1 1.	100 CONTRACTOR (1)	P.o.	Box	508	SE	P	5 20	013	
DEP Amended Amendment		City, Sta	ate, Zip Code		att.	VT-A	2,0 '	21	79	7
DOH Emergency (i	ncluding	Name o	f Contact	hinsui	112 1	Telephone N	umbor	<u>ي</u> (3UL (<u>- i</u>
□ DCA □ Cancellation			LITY INFORMAT	Rano						
Name of Facility Where Abatement is Taking		1	1		e of Facility	(4)i			,	
Street Address	welling	(Vo	ucant)		School (K-			7		
114 Oak S	Street	_		吳	Other (i.e.)	8 (Other than K- private & commer	12) cial bui	ldings,	home	es,
City (5)		_	2000	Squ	etc.) uare Feet	# of Floors		Bldg. A	ge	
Bridgewater County (6)	. N.		08807 Code (7)	Cur	rent Llee (Dri	or if being demoli	-6 - 43			
Somerse +			USE ONLY)				Du	c11.	٠.	
Name of Monitoring Firm Hired by Building C		ASC	No.	Name of Al	patement Cor	ntractor (9)			_	
Street Address	4163		4/14	Street Addr	ess	thnole	gie	5,	In	16
P.O. SOX 3.	3 †			P.O.	Box	337				
New Equat	NJ	08	533	City State,	Zip Code	AL LA	70	96	13	3
Project Manager for Monitoria g Firm		Telepho		Telephone	No.	License	No.	30		
Steve Schenken Start Date (10)	Scheduled Co	mpletion	758-3365 Date (11)		8 - 336 SHA Monitor	5 0	0,	24	7	
9-13-13	9-1	3-1		10 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		hnologie	s I	ac		891
Occupancy Status During Abatement (Check				Street Addr	ess	~				
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norma	al Facility Hour	ment rs		P ₋ O City, State,	Zip Code	337				_
Other - Describe:				New	Egypt	TLY	08	53	3	-
Scope of Work (Check All That Apply) Sc≥3 sf or ≥3 lf	☐ Renov	ation			- (,					
△ ≥160 sf or ≥260 lf	Demoli				lini-Enclosure		Pressu	re		
					lovebag Prod on-Exempted	cedure d (*) and Non-Fria	ble Pro	cedure		
Leaster of	Is Local Norma							Abate Typ		
Location of Asbestos-Containing Material (ACM)	Used Sole Maintena	ely by	Asbestos Cont	scription of aining Materi	al (ACM)	Amount			m	
TO BE ABATED In Facility	Custodial (12)	Staff?	surfa	systems insucing, VAT, or		(Specify SF or LF)	Remova	Repair	псар	Enclosure
(13)	Yes No	N/A	other n	niscellaneous)		oval	air	Encapsulate	sure
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nitchen	X	1	Flooring) 		150 SF	X			\dashv
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		1					1-		1	\neg
Name of Registered Waste Hauler	1	NJDEP W Hauler ID			F 7000 No.	Registered Landf			-	
EPC Technologies		1700		1	Wast	e Manage	men	406	: P	M
City. State	VJ			ial Date	Moran	isville	PA			
Completed by Schen Kerr	Title	۱ . ۱		ignature	CI	-	ate	·		
steve schenner	Presid	enT		Sleep	D-Oke	h	9-	3-1	3	

2037

Print Form

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

			CATION	ate of Ne I OF ASB to NJAC	ESTOS A	ABATEN][CE		Ŋ		
Date of Notification (1)	. ,	Т	Name o	f Building			(2)	117						
9-1	1-13				54	16		re h.	11 3	SEP 5	20	113	, (4/
Agencies Notified Type Notification	n		Street A	ddress	903	10	40	1.0	Longe	,			-	-1
EPA Initial		-	City Cto	ite, Zip Co	182	141	18	BUCI	150	CTOS A			الم	1
DEP Amended Amendmen	nt#/		City, Sta	ite, zip Ct	0 12	RK	•	1.		STOS S.	W ₃		×	l
DOH Emergency justification)		Name o	Cantant				,,,,,	Tolo	nhana N-7	ber			#
DCA Cancellation	n 				130		4		_	٦				
Name of Facility Where Abatement is Tak	ing Place (3)	FACI	LITY INF	ORMATIC	ON	Type	of Facility (4)			TO SERVICE AND ADDRESS OF THE PERSON NAMED IN COLUMN 1		
Stila		83						School (K-1	S5.5					
Street Address	-							Subchapter	8 (Othe	er than K-12				
982 IAKE	AU	ENE	20					Other (i.e. p etc.)	rivate 8	commercia	al build	dings	hom	es,
City (5)								re Feet	# of	Floors	В	ldg. A	ge	
								000		ng demolish		3	3	
County (6)				Code (7) USE ONLY	3		Curre	ent Use (Pric	or if beir	ng demolish	ed)			
Name of Monitoring Firm Hired by Building	Owner (9)		ASCN		,	Nama	of Abo			ho es	E			
realise of Monitoring Fifth Filled by Building	owner (o	,	ASCI	A INO.				tement Cor ation Co.,		(9)				
Street Address						Street								-
City State Zin Code								se Road						
City, State, Zip Code						750.00		ip Code k, N.J. 07	722					
Project Manager for Monitoring Firm		I	Telepho	ne No.		Teleph		. 35080		License No).	-		
					1	732-2				00029	150			
Start Date (10)				Date (11)		Name	of OSI	HA Monitor						
8 - 24 - 13 Occupancy Status During Abatement (Che	(9-		13			01 1		- 14	1.					
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe:	Period of mal Facility	Abatem	nent			Street .		ip Code			-			
Scope of Work (Check All That Apply)														
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Location of	1	Locati Normali			Don								ре	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	ed Sole aintenar stodial S (12)	nce/	Asbes (i.e.	tos Conta thermal: surfac	cription aining M systems sing, VA aiscellan	aterial insula T, or	(ACM) ation,	(S	mount pecify or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A										te	(U
BUFDOORS			2	P	PE	cou	ER	ins	1	81F	v			
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3							-							
Name of Registered Waste Hauler		N	JDEP W	/aste	Cubic \	Yards		Name of I	Register	red Landfill			- seed	
Ace Insulation Co., Inc.		5.0	auler ID 2086		of Was	te /		IESE'						
City, State Colts Neck, New Jersey					Dispos	al Date	3	City, State Bethleh		a				
Completed by	Title					gnature			, /	, Dat				
George Wuest	Pres	ident				G	104	ng-lek	people	9-	3-	13	3	
ASB-41 (R-06-08)						·Bo no	0	0		os licensure	exem	pted	activit	ties.

(CHECK #)

State of New Jersey HOTHICATION OF ASSESTOS ABATEMENT

Date of Nouncation	1 1.2		Nan		ding Owner/Operato		0	SET, 50	713		M
Date of Noufication	2/19		L'==		KENTES	/4	OK FIL	2	710		4
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□ & □ œ	⊠ Jnvaa				<u> </u>			The Manager age	ن د د	-	+
	Amendment #		CRY.	State. 2	0 Cool 1-64 1-15	(A	W. J. O	8230			
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□ 00H	justification)		Han	re of Con			10			. 1	
<u> </u>	Cancellation	¥.			CE BREUM	110					-
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Name of Facility Where	Abatement is Taking	Place (3)					com (K-12)				1
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County (6)			US	E ONLY			VACA	NT			=-i
CAR	MAY		ASP	W No.	Name of Abati	emeni C	oursaar (a).				į
Name of Maryloning Fin	n Hired by Building Or	wner	~~		KLEI	400	INC				=
(8)	/A		L=		Sveet Addres	\$	C 1	- 1			1
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City State Zp C∞e					MA	PLZ	SHADE	INJO		==	=
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Project Manager for M	onitoring Firm		919Q2D	120	856	779	-0472	_0044			
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S:an Date (10)	1 .2	UND COM	13	Oate (Jose	5 PIK	HICKL			==	==-
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One Describe											
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S (D	Waste Hauler	78	Z X X		ste Cubic Yav	ds	Name of Re	, C, M,			
SIT	Wasie Hauler			JOEP Wa	ste Cubic Yav	ds	Name of Re	DBINE,	とご	: 	
Name of Registers L. &M	Wasie Hauler	T, 0		JOEP Wa	ste Cubic Yas b. of Waste Deposal	ds Date	Name of Re	DBINE,	とご		3
Name of Regarder	Wasie Hauler	5,0	803	JOEP Was	ste Cubic Yav	ds Date	Name of Re	, C, M,	とご	: 	3
Name of Registers K C & M	Wasie Hauler CO INC.	J. 0	803	10EP Washer D.N. 790	ste Cubic Yas b. of Waste Deposal	os Date	Name of Re C, M City, State Woo	DBINE,	とご	: 	3

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Date of Notification (1) 9/2/13				Building O mor Priv			(2)			_				
Agencies Notified Type Notification EPA Initial		0.00	treet Ad 11 5th			w1111 × 10200000		4 2-1	SE	5	2013	,	الا	
DEP Amended Amendment #_	dudina			e, Zip Cod Haven N)8					Fig.	- 3		
Emergency (inc justification) DCA Emergency (inc justification) Cancellation	auding	1 1 1 1 1 1 1	ame of	Contact	1				Tele	phone Nun	ber	_		
			FACIL	ITY INFO	RMATIO	N	_	c= .99 (4)						
Name of Facility Where Abatement is Taking F Ron Armor Private Home	riace (3)						☐ S	f Facility (4) chool (K-12 ubchapter 8)	or than K 13	^			
Street Address 211 5th st							⊠ O et	ther (i.e. pri	vate &	commercia	al build			š,
City (5) Beach Haven NJ 08008			25-11-11-12-12-12-12-12-12-12-12-12-12-12-				Square 1000	+	1	Floors	3	dg. A 5+	ge 	
County (6) ocean			ounty C	ode (7) SE ONLY)			Curren	t Use (Prior	if beir	ng demolish	ed)			
Name of Monitoring Firm Hired by Building Ow N/A	mer (8)		ASCM	No.			of Abate aco In	ement Cont	ractor	(9)				
Street Address			-				Address Box 32	Say.	No. No. o					
City, State, Zip Code							state, Zip t Berlir	Code NJ 0809	91					
Project Manager for Monitoring Firm		T	elephor	e No.			none No 753-98			License N 00727	0.			
	cheduled	Com	oletion [Date (11)		Name Sam		A Monitor						
Occupancy Status During Abatement (Check	Only One)				Street	Address	S	-		-	-		-
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Normal Other – Describe:	riod of Ab	ateme	ent		_		State, Zip	2						
Scope of Work (Check All That Apply)														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		novati molitic					Mini	Containme i-Enclosure vebag Proci i-Exempted	edure				e	
	la l	ocatio	_					T					ment	
Location of	No	ormali	,		Des	cription	n of				_	Ту	ре	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Main Custo	Solely tenan dial Si (12)	ce/		tos Conta	aining I system ing, V	Material is insula AT, or		(5	mount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
exterior Siding			х		Exter	rior Si	ding		16	600 Sf	x			
Name of Registered Waste Hauler		N.	JDEP W	/aste	Cubic '	Yards		Name of F	Registe	ered Landfil	1			_
United Containers		Ha	auler ID 2459		of Was			G.R.O.V						
City, State Elm NJ					Dispos 9/18/1		9	City, State Morrisvi		A 19067				
Completed by Anthony T Perna	Title Presio	lent			S	ignațur	e				ate /2/13			

			1.51		Building Ov	war/Oper	ator (2)	1150/1						
Date of Notification (1) 08/30/13 CK#	3000000		L	inden	Dept of F				SEP	5	2013			
Agencies Notified	Type Notification		256	treet Ad	_{dress} ver Road	4 -		1 1				10.35		1
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EPA DEP DOL	Amended Amendment #	1	_ L	inden,	New Je	sey 070	36	L	<u> </u>	FNO				
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☑ DOH ☑ DCA	Cancellation		5	Scott H	-									-
Name of Facility Where	Abatement is Taking	Place (3)	it It	FACIL	ITY INFOR	RMATION	Type o	Facility (4))					
Linden DPW		, ,						chool (K-12						
Street Address							X S	ubchapter 8 ther (i.e. pr	Other	than K-	12) cial buildi	ngs, l	nomes	s,
700 Lower Road								c.)	# of F			lg. Ag		
City (5) Linden, New Jersey	07036						10,00	0	2		55			
County (6) Union				County C	ode (7) SE ONLY)			t Use (Prior C Works I			shed)			
Name of Monitoring Firm Detail Associates	Hired by Building C	owner (8)		ASCM	No.		ame of Abate		ractor (9)				
Street Address			-			1	reet Address		- 100				-	
300 Grand Avenue						"	06 McBrid		e 					
City, State, Zip Code Englewood, New Je	ersey 07631						ity, State, Zip Voodland		07424					
Project Manager for Mor			ne No.	100	elephone No		1	License	No.					
Stephen J					9-6708		73-225-84 ame of OSH)1104				
Start Date (10) 08/29/13		Schedule 09/02/1	3	pletion L	Date (11)	J	&S Enviro	nmental	Labs					
Occupancy Status Durin							treet Address		t					
Facility Closed/Vac	ated During Entire F ned Outside of Norm	Period of A	Abatem	ent		10.00	ity, State, Zip					-		
Other - Describe:	7AM-11PM		110010				Jnion, Nev		07083					
Scope of Work (Check A	All That Apply)						F							
23 sf or ≥3 lf			Renovat Demoliti					Containme i-Enclosure		Negative	Pressur	е		
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Locker Room	- California (1997)		X	-			T&Mastic(40	X			
Foreman'			X	JDEP V		Cubic Ya	T&Mastic	Name of			1,000			
Name of Registered Wa	aste Hauler		H	lauler ID		of Waste		G.R.O.	SERVICE ATMOSPHER					
Lilich Corporation			11	8724		3 Disposal	Date	City, Stat						
City, State Woodland Park, Ne	ew Jersey 07424					Disposal 09/06/1	3	Morrisy		nnsyl				
Completed by Tatiana Kalenikova		Title	Presi	dent	3	1 7	Plum	ales	2/		Date 08/30/	13		
							1-00	,						

		and the second second		٧.		i to mono				1 mg	E	12		/ E		-	
Date of Notification (1) 08/15/13 CK# 2773 \$200 Agencies Notified Type Notification					Name of Building Owner/Operator (2) Linden DPW								100		7 :		
Agencies Notified			Address		****			SEP	5	20	13	i lean					
X EPA		Initial		-		ower Ro	CONTENT			542					i	-	
EPA DEP DOL		Amended Amendmen			n, New		07036		L	ASSEST	75 D.	, N. I	10L	&			
		Emergency justification)		1		of Contact	<u>_</u>				-Telephor	200			-	_	
	John	Venditto	9			· ·											
Name of Facility	Where Ahat	ement is Takir	ng Place (3)	FAC	ILITY INF	ORMAT	ION	Type of	Eacility (4)							
Name of Facility Where Abatement is Taking Place (3) Linden DPW									Type of Facility (4)								
Street Address									School (K-12) Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes,								
700 Lower Road										Other (I.e. private & commercial buildings, homes, etc.)							
City (5) Linden, New	Jersey 07	036							Square Feet # of Floor 10,000 2			s	Bldg. Age 5.5+				
County (6) Union						Code (7) USE ONLY	,		Current Use (Prior if being demolished) Public Works Building					•			
Name of Monitoring Firm Hired by Bullding Owner (8) Detail Associates						M No.		Name of Abatement Contractor (9) Lilich Corporation									
Street Address 300 Grand Avenue										eet Address 6 McBride Avenue							
City, State, Zlp Code Englewood, New Jersey 07631								City, State, Zip Code Woodland Park, New Jersey 07424									
Project Manager for Monitoring Firm						ne No.		Telephone No. License No.									
Stephen J						201-569-6708			973-225-8400 01104								
Start Date (10) Scheduled Co 08/29/13 09/02/13						Date (11)		Name of OSHA Monitor J&S Environmental Labs									
Occupancy Status During Abatement (Check Only One)								Street Address									
Facility Closed/Vacated During Entire Period of Abater Abatement Performed Outside of Normal Facility Hour Other – Describe: 7AM - 11PM						rs Ci			33 Route 22 West 7, State, Zip Code nion, New Jersey 07083								
	Uni				n, New	Jersey 0	7083										
Scope of Work (Check All That Apply) ≥3 sf or ≥3 If ≥160 sf or ≥260 If Renovation Demolition								Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure									
Is Local													Abatement Type				
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)				Norma ed Sole aintena todial (12)	ely by nce/ Asbestos Cont (i.e. thermal surface			scription of taining Material (ACM) I systems insulation, cing, VAT, or miscellaneous)			Amount (Specify SF or LF)		Remova	Repair	Encapsulate	Enclosure	
			Yes	No X	N/A								_		ite	TD.	
Mech	Mechanic's Office				DoubleLayer			VAT&Mastic(NonFri			160 SF		Х				
Cafeteria				Х	DoubleLaye			rVAT&Mastic(NonFri			800 SF		Х				
Locker Room & Hallway X					VAT & Mastic				NonFri 240 SF				Х				
Foreman's Office X						V	1 & TA	Mastic((NonFri 240 SF x								
Lilioh Corporation					JDEP Waste Cubic Yards lauler ID No. of Waste 2				Name of Registered Landfill G.R.O.W.S Landfill								
City, State Woodland Park, New Jersey 07424					Disposal Date 09/06/13				City, State Morrisville, Pennsyvania								
Completed by Title Tatiana Kalenikova Vice Pres									Date 08/15/13								

UK 3443

Date of Notification (1)					Name of Building Owner/Operator (2) Buckeye Perth Amboy Terminal, LLSEP 5 201201											
8-27-13					Street Address											
Agency Notified	Type Notification	on		1 Greenway Plaza Suite 600 ASASSESTOS CONTRO												
DXEPA CADEP EDOL	☐ Initial ☑ Amended Amendmen	ı#2		City, State, Zip Code Houston, TX 77046												
DKDOH DKDCA	☐ Emergency justification) ☐ Cancellation		of Contac Leeh		Telephone Number											
				FACIL	ITY INFO	ORMATION										
Name of Facility Where	Abatement is Tal	ding Place (3	3)				Type of Facility	(4)			_		\neg			
Buckeye Pert					99											
Street Address 380 Maurer 1					□ School (K-12) □ Subchapter 8 (Other than K-12) □ Other (I.e. private & commercial buildings, homes, etc.)											
City (5)							Square Feet # of Floors Bldg. A					Age				
Perth Amboy							7500	1	+/-100							
County (6)				County	Code (7)	(STATE USE	Current Use (P	shed))							
Middlesex				ONLY)			pipe rack									
Name of Monitoring Firm	Hired by Buildin	o Owner	ASC	1 No		Name of Abaten	_			-	\dashv					
(8) Finog Envi			7,00,	. 140.			r Environmental Services, Inc.									
Street Address 617 Stokes Road, Suite 4-318							raley Street									
City, State, Zip Code Medford, NJ 08055						City, State, Zip C Philadel	Code Lphia, PA	A 19137								
Project Manager for Monitoring Firm Telepho Mark Rubinetz 888-					e No. Telephone No. License No. 715-2211 215-533-5155 01166											
Start Date (10) Scheduled Completion D 9-3-13 9-23-13					Name of OSHA Monitor Finog Environmental											
Occupancy Status Durin	g Abatement (Ch	neck only on	e)			Street Address										
☐ Facility Closed/Vacated During Entire Period of Abatemen ☐ Abatement Performed Outside of Normal Facility Hours						617 Stol		, Suite 4	-318				_			
☑ Other – Describe: OU	itside re	emoval	iours			Medford,	2080 LN	55								
Scope of Work (Check a	Il that apply)					D.FIII	Cantainment	Alegative Bressur		-200	(PX)-25					
□ ≥ 3 sf or ≥ 3 lf ᡚ≥ 160 sf or ≥ 260 lf					ovation nolition	☐ Mini- ŒGlov	Containment with Negative Pressure il-Enclosure vebag Procedure n-Exempted (*) and Non-Friable Procedure									
1.1					T	- Noil	-Exempled () all	d North Habie / Too	caure	Abatement						
Is Loca Norm										Туре			-			
Location Containing			sed Sol		Achor	Description stos Containing M		Amount			1	m				
Asbestos-Containing Material (ACM) TO BE ABATED			/aintena Custor			, thermal systems		(Specify		Re	20	Encapsulate	Enclosure			
IN Facility			Staff?			surfacing, VA	r, or SF or			Removal	Repair	psu	losi			
(13)			(12)			other miscellan	eous)	12		2	7	late	ē			
		Yes	s No	N/A	1		-200									
pipe pack west yard				x	ACP:	Т		800 lf		x	7					
pipe pack west yard			+	-			-			x	1					
			+	-		<u> </u>					+		\dashv			
			-	-	-					-	-	\dashv	\vdash			
Name of Decisions & Marie	sta Hautor		LIDER	Waste H	lauler	Cubic Yards of	Name of Pegi	stered Landfill		لـــا			Щ			
Name of Registered Waste Hauler Service Transport NJDEP ID No.				vvasic i	iauici	Waste	A & L S									
City, State		77 - 3				Disposal Date	City, State				_		\dashv			
Morrisville, PA							Libson, OH									
Completed by Title						Signature	1		Date				\dashv			
Jennifer Niven Dir. of Oper						1h	1		8-2	7-	13					
ASB-41	and the state of t	Do not use	this for	m for as	bestos lic	ensure exempted	activities.									