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

Date of Notification (1)							Owner/Operator (2		, t <u> </u>	+ +	البراء			
9 / _	4 /	14		1 - 1	Plast	tics Cons	ulting& Manufa	acturing Comp	any JK SEP -9	DM	1 .	: 7		
Agencies Notified	Type Notificat	ion		St	reet A	Address			HOLF 73	-1-1-	**			
⊠ EPA	☐ Initial				1431	Ferry Av	e.			. 3 /5		$\cap$ 1		- 1
☑ DOLWD	☐ Amended	-1 40		Cit	ty, Sta	ate, Zip Co	de	1-3	å Lice		C	100		
☑ DHSS □ DCA	Amendme		na		Cam	den , NJ	08104		a Livi	49061	U			
(NJAC 5:23-8)	justification		iig	Na	ame o	of Contact			Telephone Nu	mber				
	□ Cancellation     □				Bill H	Harris								
					FAC	ILITY INF	ORMATION	A STATE OF THE STA						
Name of Facility Where A	batement is Ta	aking Pla	ce (3)					Type of Facility (	4)					
Plastics Consulting								School (K-12						
Street Address			•				-	Subchapter 8				•		
1431 Ferry Ave								Other (i.e., pr homes, etc.)	ivate and comm	nercial E	una	ings		
City (5)								Square Feet	# of Fioors	Ē	ldg	. Ag	ê	
Camden								4000	2		50	+		
County (6)				(	Count	y Code (7)(	STATE USE ONLY)	Current Use (Pri	or if being demo	olished)				
Camden								Manufacturi	ng					
Name of Monitoring Firm	Hired by Build	ing Owne	er (8)	AS	CM N	lo.	Name of Abateme	ent Contractor (9)						
AET				1	NΑ		Alliance Envi	ironmental Sys	tems					
Street Address							Street Address			***************************************	-			
28 N. Pennell Rd							550 East Uni	on St.						
City, State, Zip Code							City, State, Zip Co	ode					S	
Media, PA 19063							West Cheste	r, PA 19382						
Project Manager for Mon	itoring Firm		T	eleph	one N	lo.	Telephone No.		License No.					
Dave Turotsy				610-	891-	0114	610-701-9000	)	00508					
Start Date (10)	S	cheduled	Com	pletio	n Date	e (11)	Name of OSHA N	Monitor						
9 / 2 /	_14	9	1_	9	/ _	14	AET							
Occupancy Status During	Abatement (C	Check on	lv one	)			Street Address							
☐ Facility Closed/Vacate					nt		28 N. Pennel	Road						
☐ Abatement Performed	d Outside of No	rmal Fac	cility H	ours -	Desc	cribe	City, State, Zip C	ode						
Time of Abatement: 7	AMPM	√ <u>3:30</u> PM	Λ	AM			Media, PA 19							
Scope of Work (Check al	I that apply)							-27.27						_
			_					tainment with Neg	gative Pressure					
<ul> <li> ≥3 sf or ≥3 lf</li> <li> ≥160 sf or ≥260 lf</li> </ul>			Renov				☐ Mini-End ☐ Gloveba	g Procedure						
					-			empted (*) and No	n-Friable Proce	edure				
				cation	87			000		F	bat	eme	ent Ty	/pe
Location			Nor Jsed S	mally Solely		A-b	Description of		Amount	2		Re	Ш	Ш
Asbestos-Containing TO BE ABA			Mainte				tos Containing Ma , thermal systems		Amount (Specify	Nellova		Repair	cap	clos
IN Facil		C	ustod		aff?	(	surfacing, VAT	, or	SF or LF)	ā		٦	Encapsulate	Enclosure
(13)		Y		12) No	N/A		other miscellane	eous)					ate	
1 <sup>st</sup> Floor				-	$\boxtimes$	Floor Ma	astic		3000	D	1		П	
1 11001			7.1		ESSENION I	11001 101					-		$\overline{\Box}$	
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				] [							]   [			
Name of Registered Was	ste Hauler			0.000.0000		Vaste	Cubic Yards of	Name of Regis	stered Landfill					
N.E.T.S.				1000	iler ID 8947		Waste 30	Allied BFI	Imperial					
City, State				1 1	034/		Disposal Date	City, State						
Hazelton, PA							TBD	Imperial, F	PA					
Completed By (Print or T	'vpe)	Title	-51.5				Signature	1/4		Date				
Mark Griffin	,,,	1000	mator	•			3,3,3,5,0	All		9-	1	9	1	4
ACD 44								////		1	7	1	/	1

ASB-41 MAY 11

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

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

								100 000000000	140-	9	UF	
Date of Notification (1) 09/05/14				2-118-	Name of Building Ow	vner/O		09# CEC		D		
33/03/14					DuPont Chamber Wo	orks (B	8lda 145)	014 SEF	-9	rii l		
Agencies Notified		Notification	Type		Street Address							
							۵	W		0.00	$\circ$ :	
(X) EPA		(X) Initial No			Rt 130 & Canal Road			û L	<u>; ~~.</u>	- A	1102	
( ) DEP		( ) Amended		on	City, State, Zip Code	2		CE L	IUL.	4-11-6		
(X) DOL		() Cancelle	d									1
(X) DOH					Deepwater, NJ 0802	23		T 1 M				
( ) DCA					Name of Contact		Ti.	Tel. Nun	nher			1
					Dave Cambell				_		-Walles	
				FACILITY IN								
Name of Facility Where A	batement is Ta	aking Place (3	<u>5)</u>		Type of Facility (4)							
					( ) School (K-12) ( ) Subchapter 8 (oth	hor tha	n K 12\					
Ott A dd					(X) Other (i.e. private			s home	s etc			
Street Address					(X) Other (i.e. private	E & COI	rimerciai bidg	3., 1101110.	3, 010.			- 4
					Sq. Feet 3,000 # o	f Floor	s 1					
City (5)	County (6)		County C	ode (7)			<u>-</u>					l
City (5)	County (o)		(State Us		Bldg. Age 58							
			Totale 05	C CITIY	Current Use (prior if	being	demolished)	commerc	cial/offic	e		1
Name of Monitoring Firm	Hired by Bldg	Owner (8)	ASCM No	)		T	Name of Cor	tractor (9	9)	Part Part I		
reality of Worksoning 1 min	mod by bidg.	011101 107		_		- 1			_			
						- 1	Brandenburg	Industria	al Servi	ce Comp	any	
Street Address					Street Address		7					
					2217 Spillman Dr							
City, State, Zip Code					City State, Zip Code							
						20 W	57230000A2-1					
					Bethlehem Pennsylv	lvania	18015					
Project Manager for Monit	toring Firm	Telephone 1	<u>Number</u>		Telephone Number			License	Numbe	<u>er</u>		
					040 004 4000			00704				
					610-691-1800			00721				
Scheduled Start Date (10)	Σ	Scheduled (	Completion	Date (11)	Name of OSHA Mon	nitor						
09/22/14		10/10/14			Brandenburg Industr	rial Sei	rvice Compan	ıy				
Occupancy Status During	Abatement (0	Check only on	e)		Street Address							
( ) Facility Closed/Vacate	d During Entir	re Period of A	batement									
( ) Abatement Performed	Outside of No	ormal Facility	Hours -		2217 Spillman Drive	•			-			
					City, State, Zip Code	<u>e</u>						
Describe	2400											
(x) Other - Demolition Or	nly											
					Bethlehem, PA 1801	15						
Source of Work (Check a	Il that apply)											
( ) D195 ( ) D												
(x) Demolition () Rer () Large Proj. (>160 SF o	ovation	M) / \ CM Dre	i />25/16	0 SE or >10 <26	OLEACM) / Min	or Proi	(<25 SE or s	10 LF A	CNA)			
( ) Full Containment with	Negative Pre	SEUTA ()	Mini-Enclos	0 3F 01 > 10 < 201	vebag Procedure	01 1 10	. ( -20 01 01	10 LI 710	3.0.7			
Location of Asbestos-		ation Normally		Description of		ount (S	Specify SF or	LF)	Abaten	nent Typ	9	
Containing Material (ACM		by Maint./Cus		thermal system			, , , , , ,				57.	
Facility (13)	Staff?			surfacing, VAT								
realist No.	YES	NO	NA	miscell.)	30				Rem.	Rep. B	ncap E	nclose
	_									00		///////
									1			
						SWING						
Name of Reg. Waste Hau	ıler	NJDEP Was	ste Hauler	ID#	Cubic Yards of Was	te		Name o	f Reg.	Landfill		
City, State							Disp. Date		<u> </u>	ity, State	1	
					l o:			Dete				
Completed by (Print or Ty	rpe)	Title			Signature			Date				
lamaifee Otes 5 - 1		Contract A	miniotrot		1 / 1	7		09/05/1	4			
Jennifer Strobel		Contract Ad	ministrator		VI	1	4	09/03/14	544			
	Secretary 111				THE STATE OF THE S	<del>/</del>				**	-	

Mail to: NJDEP-DSHW-BRRTP 401 E. State St., PO 414 Trenton, NJ 08625-0414

Telephone 609-984-6620

C:\WORD\MYDOCS\ASBESTOS 9/18/00

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

Date of Notification (1) 9/5/14		Name of PSEG	Building Ov	ner/Operator		P 9 [H]				
Agencies Notified Type Notification		Street Ad 4000 H	dress ladley Ro	ad	ZUP, CL					
EPA Initial Amended Amendment			te, Zip Code Plainfield,	NJ 07068	A	LICENTING	i <del>nct</del>			
DOH justification)  DCA Cancellation	nciuaing	Name of Gregor	Contact y Player			Telephone Nu	mber			
		FACIL	LITY INFOR	MATION						
Name of Facility Where Abatement is Taking PSEG Belleville Substation	Place (3)			0.50	Type of Facility (4	2)				
Street Address 747 Main Street					Subchapter Other (i.e. p	8 (Other than K-1 rivate & commerc	2) ial build	ings,	home	s,
City (5) Belleville NJ 07109					Square Feet n/a	# of Floors n/a	. Bi	dg. A ′a	ge	
County (6) Essex		County C	Code (7) JSE ONLY)		Current Use (Prior Substation	or if being demolis	hed)			
Name of Monitoring Firm Hired by Building C	wner (8)	ASCN n/a	l No.		of Abatement Cor Environmenta					
Street Address					Address Old Dock Rd					
City, State, Zip Code					State, Zip Code hank NY 11980	)				
Project Manager for Monitoring Firm		Telephon	ne No.	Telep	hone No. 924-8111	License 1	No.			
Start Date (10) 9/4/14	Scheduled C		Date (11)	Name	of OSHA Monitor e as above					
Occupancy Status During Abatement (Chec	- <del></del>			8580470701	Address					
- 12 Ann 1-4 Sept 14 Sept 1				n/a	Address					
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe:	al Facility Ho	urs		City, S	State, Zip Code					
Scope of Work (Check All That Apply)										
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		ovation olition			Mini-Enclosur Glovebag Pro	cedure				
	1			Ŀ	Non-Exempte	d (*) and Non-Fria	ible Pro	Abate		t
D. 1000	Is Loc Norm								ре	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used S Mainte Custodia (1	olely by nance/ al Staff? 2)	(i.e. ti	Descriptions Containing thermal system surfacing, Voother miscella	Material (ACM) ns insulation, AT, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes N	o N/A					_			
Exterior ductbank		n/a		Transite F	Pipe	60 LF	X			
3					1	5				
Name of Registered Waste Hauler ETGI		NJDEP V Hauler ID S7107	No.	Cubic Yards of Waste 20	18595554000000000000000000000000000000000	Registered Landf toga Landfill	111			
City, State Flanders NJ				Disposal Dat 9/8/14		te ntown PA			10.500	
Completed by Michael J DiMaria	Title Proj Mg	r/Site Su	pervisor ,	Signatu		1	Date 9/5/14			

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

Date of Notifica	tion (1)	1				Building Owner / Ope	rator (2)				
14/X	_ /301	1			Street Add	Babo Pierce			1 5 1	والهال	well and
Agencies Notific	ed Type of No	tificat	tion		272 Marlbo				y V 2-2	11	- second of the control of the contr
□ EP	[[[전기 - ] ]] [[[전기 [[] [[] [] ] ] [] [[] [] []	Initial				e, Zip Code		201			
DE DE	94	Amen				ge NJ 07075	<u> </u>	2	JI4 SEF	-91	His
e de	Н		dment #		Name of C	Contact		Telephon			
DC DC			gency w	/ justification	Jackie Pie	erce				1,000	C THEL
		Janice	Jiauon	F	ACILITY IN	FORMATION			21	-ICL.V	omG
				750		1 2/101					
Name of Facility Pierce	Where Abaten	nent is	Taking	Place (3)		Type of Facility (4)					
						☐ School (K		. 45 1/ 41	٥١		
Street Address 272 Marlboro Ro	ad					☐ Subchapte ☐ Other (i.e.					
2/2 Mariboro Ro	au						mes, etc.)		aı		
City (5)	County (6)			County Code	(7)	The second secon	# Of Floor		Building	g Age	
Wood-Ridge	Bergen				Tandi	15 SF		3		1945	
				<u> </u>		Current Use (Prior if	being der	nolished)			
Name of Monito	oring Firm Hiros	by Bi	Ida Owr	ner (8)	IASCM NO	residential Name of Abatement	Contracto	r (9)	l		
Steve Rich Env					/ COM NO	Steve Rich Env. Cor			S Abatem	nent	
Street Address						Street Address		<del>2-2-2-11011-1-1</del>			
222 Delawanna						222 Delawanna Aver	nue				
City, State, Zip		T)		A-500 11 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		City State 7:- Call					
Clifton, NJ 0701 Project Mngr. F		irm		Telephone Nu	ımher	City, State, Zip Code Clifton, NJ 07014					
Warren Clenden		11111		862-686-8212	mibel	Omton, No 07014					
Sheduled Start		Sched	d. Comp	letetion Date (	11)	Telephone Number		License I	Number		
$\frac{9}{-9} / \frac{1}{-1}$	8 / 2014	-	9 /	/	2014	973-458-1188		1219	!		
Occupancy Sta	tus During Abat	emen	t (Check	Only 1)		Name of OSHA Mon					
0.5556	ity Closed/Vaca	ted Du	uring En	tire Period of		Steve Rich Env. Cont Street Address	ractors d/b	la OPUS A	Abatemer	nt	
	ement ement Performe	d Out	side of I	Normal Facility		222 Delawanna Aven	ue				
	s - Describe:					LLL Dolawamia / Work					
	r - Describe:					City, State, Zip Code	)				
						Clifton, NJ 07014		- I			
Scope of Work	(Check All That	Apply	/)								
☐ Demo	olition	[		Renovation		Full Containment wi	th Negativ	e Pressur	re		
	or <u>&gt;</u> 3lf					Mini - Enclosure					
□ ≥160	sf or ≥260 If				Ø	Glovebag Procedure		-hi- D			
						Non-Exempted (*) ar	ia Non-Fri	able Proc	eaure		
Locati	on of		ls	Γ	Descript	ion of		Abateme	nt Type		8
Asbestos (	Manager of Manager A	0.000	cation	As	sbestos - C	ontaining		R		E	E
	D.4.755	1000	rmally		Material		Amount	E	R	N	N
TO BE A		1	Jsed olely	The state of the s	e., thermal	systems facing, VAT,	(Specify SF or LF)	M	E	C A	C
in Fa (1	10.5	88 10	olely Main-		nation, sun other misc	•	OF UT LF)	V	A	P	0
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			stodial					Ĺ	R	ū	U
			aff (12)							L	R
basement			NO N/A	Pipe insulation	1		15 <b>s</b> f		-	1	1
		-								+-	
<b></b>									+	+	+
				<del> </del>					1 5	1 5	1 5
Name of Regist Newark Carting	tered Waste Ha			NJDEP Waste Hauler ID No.		Name of Registered	Landfill			-	
City, State					Disposal	City. State					
Newark, NJ					Date 9/19/2014	Bethlehem, PA					
Completed by (	Print or Type			Title	3/13/2014	Signature		6		Date	
Tracey O'Conne				Office manage	er		10.11	101	1	/	
				3		1/1/	lley	11.	1/1/		09/08/14
ACD 44	And the local division in the last of the	Company of the Compan	the state of the s			7 7 7	7		7		

					NEW JERSEY SBESTOS ABATEME	ENT o	1-				
					C 8:60-7 AND 12:120	/ 1 L	CR:		22	27	
Date of Notification (					Building Owner / Op	erator (2)			27 19		
$\frac{09}{0} / \frac{08}{0}$	14			First Ener				νί	ويعيا محد	المول من ا	
Agencies Notified	Type of N	otification		Street Ad 76 South							
EPA	Type of N	Initial			e, Zip Code		- 6	1148	<del>FP -9</del>	Ed 1:	
DEP	l Η	Amended		Akron, Oh					_, _		
☑ DOH	_	Amendment #	f	Name of	THE RESERVE AND ADDRESS OF THE PARTY OF THE		Telepho	ne Nu	mber	K. C. S.	C1
☑ DOL		Emergency w	/ justification	Jim Halse	ey			51,	LICE	- Lu	<b>L</b> L
		Cancellation						Œ	LIUL.	UrlsU	
			F.	ACILITY IN	FORMATION						
Name of Facility Whe	ere Abatem	ent is Taking	Place (3)		Type of Facility (4)						
,		ionic io Tanting i	1000 (0)		Type of Lability (4)						
					School (	K-12)					
Street Address				9,		oter 8 (Other					
109 BALTIMORE BLV	D .					e., private &	commerc	cial			
City (5)	County (6	·	County Code	(7)	Square Feet	momes, etc.)		Puit	ding Age		
SEA GIRT	County (o	,	County Code	(1)	Square reet	# 01 F1001	5	Buil	ung Age		
	моммои	TH			Current Use (Prior	if being dem	olished)	†			
		*****			Telephone Pole	•					
Name of Monitoring	Firm Hired	by Bldg. Own	er (8)	ASCM NO							
F	1			1							
Environmental Health Street Address	investigatio	ons			NORTHSTAR CON-	TRACTING G	ROUP, IN	1C			
655 West Shore Trail					Street Address						
City, State, Zip Code					32 Williams Parkway	/					
Sparta, NJ 07871					City, State, Zip Cod	0		7			
Project Mngr. For Mo	nitoring F	irm	Telephone Nu	mber	1						
Dino Nappi			212-682-9271		East Hanover, NJ 07						
Sheduled Start Date	/		letetion Date (1		Telephone Number		License	Numb	er		
$\left  \frac{-09}{} \right  = \frac{19}{}$	/14		/	14	973-884-8682				00860		
Occupancy Status D	uring Abat	ement (Check	Only 1)		Name of OSHA Mo	nitor			- 00000		
		ted During Ent			NORTHSTAR CONT		ROUP, IN	IC.			
Abatemen	550				Street Address			****		III. MIBIOSO COLOR	
		d Outside of N			22 14515						
		Friday 8:00 ar			32 Williams Parkway City, State, Zip Cod			-			
Ouler - De	scribe				East Hanover, NJ 07						
Scope of Work (Chec	k All That	Apply)						-			
		,									
Demolition		7	Renovation		Full Containment w	vith Negative	Pressure	Э			
≥3sf or ≥3l					Mini - Enclosure	200					
	≥260 IT				Glovebag Procedur Non-Exempted (*) a		hle Proce	dure			
Location of	lan market	ls		Descript			Abateme	nt Ty		4.000	
Asbestos Conta	ining	Location	As	sbestos - C			R		E	E	
TO BE ABAT	ED	Normally	,,	Material (		Amount	E	R	N	N	
in Facility	ED	Used Solely	N. 10.00	e., thermal	acing, VAT,	(Specify SF or LF)	M	E	C	C	
(13)		by Main-			ellaneous)	JSF OI LF)	v	A	P	0	
	1	tenance/				1 1	A	lil	s	s	
		Custodial					L	R	U	U	
		Staff (12)							L	R	
Exterior Talantana D	lo.	YES NO N/A	Tenesite Const	.:4		20.15		<u> </u>		<del></del>	-
Exterior Telephone Po	ie		Transite Condu	ıπ		20 LF				1 -	-
						+		-	4++	+++	1
						+		+	<del>-   -  -</del>	++	
Name of Registered \	Waste Hau	ler	NJDEP Waste	Cubic	Name of Registered	Landfill					_
NEWARK CARTING		5000	Hauler ID No.		I.E.S.I.						
City, State				Disposal	City. State						
NEWARK, NJ				Date	BETHLEHEM, PA 18	3105					

Date

09/08/14

Completed by (Print or Type)

Title

Project Manager

STATE OF NEW JERSEY
NOTIFICATION OF ASBESTOS ABATEMENT

(PURSUANT TO NJAC 8:60-7 AND 12:120-7 Date of Notification (1) Name of Building Owner / Operator (2 14 08 First Energy Street Address Agencies Notified Type of Notification 76 South Street **EPA** 1 Initial City, State, Zip Code DEP Amended Akron, Ohio 44308 1 DOH Amendment # Name of Contact Telephone Number 4 DOL Emergency w/ justification Jim Halsey Cancellation FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) Street Address Subchapter 8 (Other than K-12) GORDEN CORNER ROAD & WILSON AVE 7 Other (I.e., private & commercial bldgs., homes, etc.) City (5) County (6) County Code (7) Square Feet # Of Floors **Building Age** MANALAPAN MONMOUTH Current Use (Prior if being demolished) Telephone Pole Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM NO Environmental Health Investigations NORTHSTAR CONTRACTING GROUP, INC. Street Address Street Address 655 West Shore Trail City, State, Zip Code 32 Williams Parkway Sparta, NJ 07871 City, State, Zip Code Project Mngr. For Monitoring Firm Telephone Number Dino Nappi 212-682-9271 East Hanover, NJ 07036 Sheduled Start Date (10) Sched. Completetion Date (11) Telephone Number License Number 18 09 14 973-884-8682 00860 Occupancy Status During Abatement (Check Only 1) Name of OSHA Monitor Facility Closed/Vacated During Entire Period of NORTHSTAR CONTRACTING GROUP, INC. Abatement Street Address Abatement Performed Outside of Normal Facility Hours - Describe: \_\_ Friday 8:00 am to 5;00 pm 32 Williams Parkway 4 Other - Describe: City, State, Zip Code East Hanover, NJ 07036 Scope of Work (Check All That Apply) \ \ \ Demolition 1 Renovation Full Containment with Negative Pressure >3sf or >3lf Mini - Enclosure ≥160 sf or ≥260 If Glovebag Procedure 1 Non-Exempted (\*) and Non-Friable Procedure Location of Is Description of Abatement Type Asbestos Containing Location Asbestos - Containing R Normally Material (ACM) Amount E R N TO BE ABATED С C Used (l.e., thermal systems M E (Specify in Facility Solely insulation, surfacing, VAT, SF or LF) 0 P A L (13)by Mainor other miscellaneous) V Α P 0 s tenance/ S A 1 Custodial R U U Staff (12) YES NO N/A Exterior Telephone Pole Transite Conduit 20 LF Name of Registered Waste Hauler NJDEP Waste Cubic Name of Registered Landfill NEWARK CARTING Hauler ID No. Yards I.E.S.I. 4509 of Waste City, State Disposal City. State NEWARK, NJ Date BETHLEHEM, PA 18105 Completed by (Print or Type) Title Date Signature Steven Stiles Project Manager 09/08/14

ASB-41

CK 3739

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

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

Date of Notification (1) 09/05/2	09/05/2014 encies Notified Type Notification					ing Owner/Operator	r (2)	1.42.5	ال من	لمدا .		
Agencies Notified	Type Notifi	cation		)	et Address River R	57	20	114 SEP -9	FH	5 6	.6	
DEP DOL	Amende Amendr		ng .		State, Zip gewater,	Code NJ 07020	A		JC.	Īn	<u> </u>	
DOH DCA	justifica Cancella	ation)	3		e of Conta el Sahad			Telephone Nur	1			
				FA	CILITY IN	IFORMATION						
Name of Facility Where Residence	Abatement is	Taking Plac	e (3)				Type of Facility  School (K-1:	77	21			
Street Address 523 River Road		- 11					Other (i.e., phomes, etc.	rivate & commerc		lding	s,	
City (5) Edgewater, NJ 0702	0						Square Feet 2500 SF	# of Floors		ildg.	Age	
County (6) Bergen county					inty Code EONLY)	(7) (STATE	Current Use (Pr Residence	ior if being demo	lished)			
Name of Monitoring Firm				ASCM	No.	and the second s	nent Contractor (9					
(8) Bio-Terra Environ	mental Solut	tions LLC.		N/A			l Construction	ı, Inc.		C - 7		
Street Address P.O. Box 1224						Street Address 1360 Clifton,	Avenue, PME	3 Suite 218				_
City, State, Zip Code Union, NJ 07083						City, State, Zip C Clifton, NJ (						
Project Manager for Mon Rick Eustaquio	itoring Firm		0.0233	ephone 3-494		Telephone No. 973-389-00	89	License No. 00693				
Start Date (10)		Scheduled (	Comple	etion Da	ate (11)	Name of OSHA	Monitor	1.				
09/17/2014		09/18/20				DIA General	I Construction	, Inc.				
Occupancy Status During    X   Facility Closed/Vacate		경우하였다. 그렇게 하겠어요!		ement		Street Address 1360 Clifton	, Avenue, PMI	B Suite 218				
Abatement Performed Other - Describe:	: [12] : [12] : [14] : [15] : [15] : [15] : [15] : [15] : [15] : [15] : [15] : [15] : [15] : [15] : [15] : [15]					City, State, Zip C	ode					
Scope of Work (Check al	I that apply)											
>3 sf or >3 lf >160 sf or >260 lf			enovat emol			Mini-En Goveba	ntainment with Neg closure ag Procedure xempted (*) and N		adura			
		0.000	Locati			IV Non-Ex	kempted ( / and i	VOIL-1 Hable 1 Too			ment	
Location	nf	10 to	ormali d Sole	Same and the same of the same		Description of				Ту	pe	
Asbestos-Containing M TO BE ABAT IN Facility (13)	aterial (ACM)	) Mai	ntenar ustodia staff? (12)	ice/		stos Containing Mat , thermal systems i surfacing, VAT, other miscellaned	erial (ACM) nsulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A				104 95				
Roof				X	Roof fl	ashing		185 SF	X		-	
				X					+	_		
Name of Registered Was	ame of Registered Waste Hauler					Cubic Yards	Name of Regis	tered Landfill				
L	ervice Transport Group					of Waste	Minerva La					
City, State New Castle, DE	·······································		-1-	lauler II 20990		Disposal Date 09/18/2014	City, State Waynesburg					
Completed By Krutarth Jagad		Title Project N	Nana	rer		Signature	Waynesoung	Date 09/05	/2014			
Later in Jugar		I Toject N	iand	301				09/03	2014			

CK 00451734

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

Date of Notification (1) 09/05/2014		Name of Union	Building O Carbide	wner/Operator Corporation	(2) , A Sul	bsidiary p		Dow (				mpa	ıny
Agencies Notified Type Notification		Street A	adress				<del>-11. O</del>	-1	<i>-</i> 1 :	1		<b>-</b>	
EPA Initial DEP X DOL Amended Amendment #	1	City, Sta	ver Rd te, Zip Cod Brook, N	le 1J 08805		<u>A</u>	<u> </u>	Lick		ŧ v (	] n.[	i.	
Emergency (in justification)  DCA  Emergency (in justification)  Cancellation	cluding	Name of	Contact Pasqua			Đ	-	phone N					
Name of Facility Where Abatement is Taking	Diago (2)	FACI	LITY INFO	RMATION	Type	of Facility (4)							
The Dow Chemical Company  Street Address	Flace (3)		-			School (K-12) Subchapter 8	)	r than K	(-12)				
171 River Rd					X C	Other (i.e. pri				uild	ings,	home	s,
City (5) Bound Brook						e Feet	# of 4	Floors			dg. A		
County (6) Middlesex County			Code (7) USE ONLY)			nt Use (Prior nical Plan		ig demo	olished	)			
Name of Monitoring Firm Hired by Building On Horizon Environmental Group, Inc.	wner (8)	ASCN 0007		Brar	ndenbu	ement Contr Irg Industr			Со				
Street Address P. O. Box 316					t Addres 7 Spillr	s nan Dr							
City, State, Zip Code Thorofare, NJ 08086					State, Zi nlehem	p Code , PA, 180	15						
Project Manager for Monitoring Firm Steve Flanigan		Telepho 856-84	ne No. 18-0800	1	hone No -691-18			License 00721					
	Scheduled Co 6/19/2015	ompletion	Date (11)	Name	of OSH	IA Monitor							
Occupancy Status During Abatement (Check	Only One)	1 11-		Street	t Addres	S							
Facility Closed/Vacated During Entire Per Abatement Performed Outside of Normal Other – Describe:	eriod of Abate Il Facility Hou	ement irs		City, S	State, Zi	p Code						. 1.200.12	
Scope of Work (Check All That Apply)					-			<u> </u>					$\neg$
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Renor			5	Min Glo	Containmer i-Enclosure vebag Proce n-Exempted	edure					a.	
	Is Loc	ation			1401	PEXCHIPICU	( ) aric	THOIT	i dolo i			ment	
Location of	Norm	ally		Description	n of					_	Ту	ре	
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Used So Mainter Custodia (12	ance/ I Staff?	Asbesto (i.e. f	os Containing I thermal system surfacing, V/ other miscella	Material ns insula AT, or	(ACM) tion,	(S	nount pecify or LF)		Removal	Repair	Encapsulate	Enclosure
See Attached	Yes No	N/A		See Attac	hed							Ф	
OGE ALLACHEU				Joo Allao								- (	
			-										
Name of Registered Waste Hauler		NJDEP V	200224 (65)	Cubic Yards		Name of R	egiste	red Lan	dfill				
Brandenburg Industrial Service Co		Hauler ID 21838	No.	of Waste 1,500		IESI Bet	hlehe	m Lar	ndfill				
City, State Bethlehem, PA				Disposal Date TBD	е	City, State Bethlehe		A					
Completed by Jennifer Strobel	Title Contract	Manage	er	Signatur	re (	M		_	Date 09/0	5/2	014		

# State of NJ

B & G proj. #: 2014-159

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

B & G proj. #:	2014-159	- 68 	(Put	rsuant to	NJAC 0.0	U-7 all	u 12.120 1)		Check #	6739 .				_
									507 L280 F	i have land				
Date of Notification		11	e of Building		perator (2)		,	5046 OF	0 0	DM t. 1				
10 19 1/10 15	1/114	Mi	chael Tho	ompson				2014 SE	<u>P-9</u>	PM 1: i	11	_		-
Agencies Notified	Type Notification	11	t Address					Λ : [*:		-0 T (	1			
☐ EPA	X Initial	11	10 5th A					4.0000	11000 1100	.0 T.d UNG	<u> </u>			-
☐ DEP			State, Zip (		77047			α	LIOUN	CHYC				
X DOL	Amendmen		orth Berg		37047				Telephone	Number				
X DOH	C	_	e of Contac											
☐ DCA	Cancellatio	,,     <u>v</u>	/lichael T	hompso	n									_
				FACILIT	TY INFORMA	TION								_
Name of facility wh	nere abatement is to	aking place	(3)					Type of	Facility (4	4) (K - 12)				
			atrasus					F	_	apter 8 (Oth	er thai	n K-12	?)	
Michael Thon	npson							I X	Other (	Private/Con	nmerc			
Street Address	17.									Homes, etc # of Floors		Blda	Age	
8010 5th Ave	enue							Squar	e Feet	# 01 110015		Bidg		
City (5)		County	(6)				y Code (7) use only)	Curre	nt Use (P	rior if being	demol	ished		
North Berge	n	Huds	son			,		resid	dential_					
	ng Firm Hired by Bl	dg. Owner	(8)	- T	ASCM No.	-11	lame of Abatement	Contract	or (9)					
n/a	ng Film Filled by D.	ag. a	3-3				B & G Restora	tion, Inc	<u>.                                    </u>			_		
Street Address							Street Address 105 Ryerson	Poad						
Street Address						_  -						_	_	-
City, State, Zip Co	de				19		ity, State, Zip Code Lincoln Park,	NJ 070	35					
							Telephone Number			License 1		г		
Project Manager f	or Monitoring Firm		Pho	ne Numbe	er.		(973)696-68	69	54	003	378	_		
				D-t- (44)			Name of OSHA Mo							
Scheduled Start D	Date (10)	CASISSES.	Completion	Date (11)	)		B & G Restora	ation, In	C					_
09/16/2014			7/2014			[	Street Address 105 Ryerson	Road						
Occupancy Status	s During Abatemen	t (Check or	ily one)				City, State, Zip Cod							
Facility clos	sed/vacated during operformed outside	entire perio	d of abaten acility hours	nent. 5-		11	City, State, Zip Ood							
Describe:		Of the thinks				-11	LincolnPark,	NJ 0703	35					
Other-Desc														
Scope of Work ( Demolition	check all that apply	Renovation	n			□F	ull Containment w/r	negative p	ressure	<b>✗</b> Gloveb				
		≥160 sf or				X	lini-enclosure			☐ Non-fr			ure	
>3  sf or  >3	<u> </u>		normally u	sed solely	/						e R	R	E '	E
Location of asbestos-		by mainte	nance/cust	odial	Descript	ion of a	sbestos-containing		Amount (Specify		m o	p a	С	C
material to	be	staff(12)		1	material	(ACM)			LF)		v	i	a P	L
abated in t	facility (13)	Yes	No	N/A					30 If		e X			
basement boi	ler room			X	pipe insu	lation			30 11					
					1									
_		-	_			_								
	Hauler	INID	EP Hauler I	D#	Cubic Yards of	f Waste	Name of Registe	red Landf	fill	Pecovery	Cen	ter		
Registered Wast B & G Resto	ration, Inc.		19563		1/2		City, State	wn Kesc	Juice &	Recovery	0011	.01		
City, State				Disposal I	Date /17/2014		Tullytow	n, PA						
Lincoln Parl		T == a			Signature					Date	VE 100	11	5/250	
Completed by (F		Title Secreta	ary/Treas	urer	=		Gordana Lun	na 		09/0	5/20	14		-

## State of NJ

B & G proj. #:

2014-158

Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7) Check # 6737

Date of Notification	(1)	Na	me of Buildi	ng Owner	/Operator (2)			2014 SE	P -	q p	M I	. 10	)	
10 19 1/10 15			Maria Ferr	ara				E017 OL	<u>'</u>	را ر 	11 1			
Agencies Notified EPA	Type Notificatio	1	eet Address					ALLE	 . i .	SU	01.7	1.0		
□ DEP	X Initial	11 -	88 Pershi		1 ————				Ш		الس			
X DOL	Amendm	CONTRACTOR OF THE PROPERTY.	ty, State, Zip Clifton, N				9							
<b>X</b> DOH		200	me of Conta	ct				Telephor	ne Ni	umber				
☐ DCA	Cancellat	ion	Maria Fe	rrara						_				
				FACIL	ITY INFORMA	TION			(4)					
Name of facility wh	ere abatement is	taking pla	ce (3)					Type of Facility School	(4) ol (K	( - 12)				
Maria Ferrara								Subch	napte	er 8 (Ot	her th	an K-	12)	
Street Address										rate/Co		cial		
88 Pershing F	Road							Square Feet	_	f Floors		Bld	g. Ag	e
City (5)		Coun	ty (6)				ty Code (7)		_				D.	
Clifton, NJ 07	7013	Pas	saic			(State	e use only)	Current Use (F	rior	if being	demo	olishe	d)	
Name of Monitorin					ASCM No.	П	Name of Abatement C		-	-				
n/a	91 11111111100 29 2	nag. o m	. (-)	-			B & G Restoration	on, Inc.						
Street Address						<b>-</b>	Street Address							
							105 Ryerson Ro	oad		-	•			
City, State, Zip Cod	е						City, State, Zip Code Lincoln Park, N	J 07035						
Project Manager fo	r Monitoring Firm		Pho	ne Numbe	er	- -	Telephone Number		TL	icense	Numb	er		
Project Manager to	i Montoning i iini						(973)696-6869			00	378			
Scheduled Start Da	ate (10)	Sched	. Completion	Date (11	)		Name of OSHA Monitor B & G Restoration							
09/15/2014	•	09/	5/2014			11	Street Address	JH, 1110.				-	_	
Occupancy Status	During Abatemen	t (Check o	nly one)				105 Ryerson Ro	ad		Secretary Co	V .			
Facility close	d/vacated during	entire peri	od of abaten	nent.		15	City, State, Zip Code	19				-		
Abatement p Describe:	erformed outside	of normal	facility hours	-		_11	LincolnPark, NJ	07035						
Other-Descri						- 11	Elifcolli dik, 110		-			==	- 2	_
Scope of Work (ch						Пы	ull Containment w/neg	ative pressure	Y	Gloveb	ag pr	ocedu	re	
	×	Renovatio					lini-enclosure			Non-fr	5500			
>3 sf or >3 lf	·_LJ.	≥160 sf or	n normally u	sed solely	,			1	Ŧ		R	R	E	E
Location of asbestos-co	ntaining	by mainte	enance/custo			on of as	sbestos-containing	Amount (Specify	CE,	or	e m	e p	n	n
material to b abated in fac		staff(12)	No	N/A	material (	ACM)		LF)	SF I	OI.	O V	a	a	L
		Yes	No		<u> </u>			0.15			e	<u></u>		H
small closet in t	the basement			X	pipe insula			8 lf 3 lf	_		X	H	片	片
crawl space				×	pipe insula	tion		· · · ·	-		盲	古		后
		==				-								
		-												
Registered Waste I B & G Restora	Hauler tion, Inc.		EP Hauler II 19563		ubic Yards of \ ½	Waste	Name of Registered Tullytown I	Landfill Resource & F	Rec	overy	Cen	er		
City, State Lincoln Park,				Disposal D 09/	ate 16/2014		City, State Tullytown, I	PA				6		
Completed by (Prin		Title Secreta	ry/Treasu	rer	Signature	(	Gordana Luna			Date 09/0	5/201	4		

#### State of NJ Notification of Asbestos Abatement

B & G proj. #:

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

Check # 6743

Date of Notification (1)		l i Nan	ne of Building	Owne	er/Operator (2)			804/ 00					
10 19 1/1 <sup>0</sup> 15 1/1	1  4	11	izabeth G	F				2014 SE	P-9 Pi	1	: 0	ني	
Agencies Notified Ty	/pe Notificatio	n Stre	et Address					Δ;, 11,	Trans	111	1	1	
DEP E	Initial		6 Monroe		t			6.1	TES CE	(	,110	٤	
M DOL	7 Amendme		State, Zip C ittle Ferry		7643						200		
▼ DOH		11	e of Contact		7043			Telephone	Number			-	
D DCA	Cancellati	ion	Elizabeth (		olfo								
			IIZADETT			ATION			0-0-00	_			
			(2)	FACI	LITY INFORM	ATION		Type of Facility (4	1)			_	
Name of facility where		taking place	(3)						(K - 12)		4		
Elizabeth Gandol	lto								pter 8 (Othe			12)	
Street Address									Private/Com Homes, etc.	mer	cial		
56 Monroe Stree	·L							Square Feet	# of Floors	T	Bld	g. Ag	је
City (5)		County	(6)				nty Code (7) te use only)	Current Use (Pri	ior if heing d		liche	4/	
Little Ferry		Berge	en			,	,,	residential	or in being a	Cirio	1131100	-,	
Name of Monitoring Fin	rm Hired by Bl	dg. Owner (	8)	1	ASCM No.		Name of Abatement C	Contractor (9)				V	
n/a							B & G Restoration	on, Inc.		_			
Street Address							Street Address 105 Ryerson Ro	oad					
City, State, Zip Code						-	City, State, Zip Code						
			esi-oro	Nin ingenien i			Lincoln Park, N	IJ 07035					
Project Manager for Mo	nitoring Firm		Phone	Numb	er		Telephone Number (973)696-6869	9 3	License Nu 0037		÷Γ		
Scheduled Start Date (1	(0)	Sched. C	completion D	ate (11	7	-	Name of OSHA Monit	50					
09/17/2014	,	09/19			3		B & G Restoration	on, Inc.					
Occupancy Status Durin	ng Abatement	_				_	105 Ryerson Ro	ad					
Facility closed/vac	cated during e	ntire period	of abatemer	nt.			City, State, Zip Code						
Abatement perfor Describe:	med outside o	of normal fac	ility hours-			_	LincolnPark, NJ	07035					
Other-Describe:						<u>- 1</u>	LINCOINFAIK, NJ	07035				- 15	_
Scope of Work (check		Renovation				X F	ull Containment w/neg	ative pressure	Glovebag	nro	cedu	- Δ	
>3 sf or >3 lf	6 <u>-</u>	160 sf or >2	60 If				fini-enclosure	T	☐ Non-friab	518 (B.550)			
Location of			ormally used	solely	1	_			TF	- 1	R	E	E
asbestos-contain		by maintena staff(12)	ince/custodia	al			sbestos-containing	Amount (Specify SI	F or		e p	n c	n
material to be abated in facility (		Yes	No	N/A	material (	ACM)		LF)	V		a i	a p	L
Lower Level				X	Vinyl Comp	osite	Tile, VAT & masti	c 600 sf	<u> </u>	_			
										]			
										1	井		H
					-					<u> </u>	╬		ዙ
Registered Waste Haule	er L	INJDEP	Hauler ID#	C	ubic Yards of V	Vaste	Name of Registered I			7 1		Ш,	Ш.
B & G Restoration			563	oosal D	10			Resource & Re	covery Ce	ente	er	, i	
City, State Lincoln Park, NJ	ity, State Lincoln Park, NJ						City, State Tullytown, F	PA				*	
Completed by (Print or		Title			19/2014 Signature		Gordana Luna		Date				
Gordana Luna	1	Secretary.	Treasurer				Yordana Luna		09/05/2	014	ļ		

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

B & G proj. #:

2014-153

				90V-0704-074-01800				Chec	CK # 6738	·	7/ -uat	200	
Date of Notification (	1)	11	Name of F	Building Own	er/Operator (2)	)		90	14 SEP	_0	DM.	1.0	
0 19 1/10 15	/1141		Vera N	lugent				50	IN OLI	ا ر-	n	. 0	Ų.
Agencies Notified	Type Notificat	ion	Street Add	iress				Δ.	·	.S.	n i	T . f	`1
☐ EPA ☐ DEP	✗ Initial			ee Avenue	<u> </u>				â Li	CE:V.	1111	3	
X DOL	Amenda			e, Zip Code on, NJ 07	508								
X DOH	P	- Total	Name of C	ontact				Teleph	one Numb	er			
☐ DCA	Cancell	ation	Vera	Nugent			2			9			
***************************************				FAC	ILITY INFORM	IATIO	N						×
Name of facility whe	re abatement i	s taking p	ace (3)					Type of Facilit		.,			
Vera Nugent									ool (K - 12	(\$)	han K	12)	
Street Address	<del></del>				——————————————————————————————————————				chapter 8 ( er (Private/			-12)	
106 Lee Avenu	ue							Bldg	s./Homes,	etc.		dg. A	70
City (5)		T Cou	inty (6)			Co	unty Code (7)	Square Feet	# of Flo	ors	ы	ug. A	ige
	7500					100000	ate use only)	Current Use	(Prior if bei	ng den	nolish	ed)	
Haledon, NJ 0			assaic			<u> </u>		residential					
Name of Monitoring n/a	Firm Hired by	Blag. Owr	er (8)		ASCM No.	,	Name of Abatement						(9)
Street Address				لصصنعه		-	B & G Restorat	ion, Inc.					-
Street Address							105 Ryerson R	Road		20*			
City, State, Zip Code						-	City, State, Zip Code						ATT OF THE
							Lincoln Park,	NJ 07035			82		69
Project Manager for N	Monitoring Firm	i		Phone Numb	per		Telephone Number (973)696-686	9	Licens	e Num 0378	per		
Scheduled Start Date	(10)	Sche	d. Comple	etion Date (1	1)	-	Name of OSHA Mon						
09/15/2014		09/	16/2014	Ĭ			B & G Restorat	ion, inc.					-
Occupancy Status Du	uring Abatemer	nt (Check	only one)				105 Ryerson R	oad					
Facility closed/	일반 경영 아니는 마이지를 하는 것은 말이 되었다. 얼마를						City, State, Zip Code						
Abatement perf		or norma	racility no	ours-		_	LincolnPark, N.	1.07035					
Other-Describe		A				-	Elifcolli ark, 14	07000				- 5	<u> </u>
Scope of Work (chec	ck all that apply	/) Renovati	on			П	Full Containment w/neg	native pressure	<b>✗</b> Glove	shaa n	ocodi	ıro	
>3 sf or >3 lf		>160 sf or					Mini-enclosure	gative pressure	28-18 January	friable			
Location of				y used solely	vI					TR	R	E	1_
asbestos-conta	ining	by maint staff(12)	enance/co	ustodial	Description	on of a	asbestos-containing	Amoun	N 55000	e m	e p	n	E n
material to be abated in facilit	y (13)	Yes	No	N/A	material (	(ACM)	50 SARS	(Specify	SF or	0	a	а	C
		103	140							е	1	р	_
basement				×	pipe insula	ation		110 lf		X	片		뷰
				4-				_		井	H		H
				+				-		+	H	H	H
										百	o	d	
Registered Waste Hau		NJD	EP Haule	rID# C	ubic Yards of V	Vaste							
B & G Restoratio	on, Inc.		19563	Disposal	1 Date		City, State	Resource & I	Recovery	Cen	ter		
City, State Lincoln Park, NJ	J				16/2014		Tullytown,	PA				÷	
Completed by (Print o	or Type)	Title			Signature		Gordana Luna		Date		100		
Gordana Luna		Secreta	ary/Treas	surer	1		Jordana Luna		09/0	5/201	4		

(K 006342

PRESIDENT

Do not use this form for asbestos licensure exempted activities.

# State of NJ

D&S Proj. #: 2014-357						s Abatement and 12:120)		è	11 W	Value of	V -ue	المرا		
Date of Notification (1)	П	lame of B	uilding Owne	er/Operator (2)				2014	SEP -	0 1	DM I			
0 9 /0 3 /1 4		DORIS	KRUEGEF	}				2011	OL!	ז כ	n I	: ن	ي	
Agencies Notified Type Notificati	on S	treet Addr	ess					A	1 - 1	·	0 7		,	
☐ EPA ☐ Initial ☐ Amended		36 MAF	RTIN TERI	RACE					à Lic			176	L	
Amendment #:		City, State,	Zip Code						A 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			14773		-
DOL Emergency	- 11	Hacken	sack, NJ 0	7601							- 692			
DOH (including justification)	IN	ame of Co	ontact		_			Telephone	Number				-1.000	
DCA Cancellation		DORIS	KRUEGE	ER				2.	55					_
(1)			FACI	LITY INFORM	ATION	I			-11/					•
Name of facility where abatement is	s taking pla	ace (3)		- deliberation			Туре	of Facility (4						
DORIS KRUEGER		(8.5)						_	(K - 12) pter 8 (O	ther th	nan K	12)		
Street Address								Other (F	rivate/Co	mme		15		
36 MARTIN TERRACE							Cau		lomes, et		Ric	ig. A	ne ne	-
City (5)	I Cou	nty (6)			Cou	inty Code (7)	Squ	are reet   #	0111001	1	Di	·9. / ·	ge	
City (5)	1 000	<b>y</b> (0)				te use only)	Cur	rent Use (Pri	or if being	dem	olishe	d)	- winds	
Hackensack	BE	RGEN				6.40		,	•					
Name of Monitoring Firm Hired by I	3ldg. Own	er (8)		ASCM No.		Name of Abatemer	it Contra	ctor (9)						
						D & S RESTO	RATIO	N, INC.						
Street Address						Street Address			0.203			1002		
						20 California A								=
City, State, Zip Code						City, State, Zip Cod								
						Paterson, NJ ( Telephone Number			License	Numb	or			=
Project Manager for Monitoring Firm			hone Numb	er		973-345-802				1169	ei			
					_	Name of OSHA Mo							_	=
Start Date (10)	Sched	d. Complet	tion Date (11	1)		D & S Restora	tion, In	c.						
09/17/14	09/3	0/14				Street Address								
Occupancy Status During Abatemer						20 California A								
Facility closed/vacated during Abatement performed outside	65 15					City, State, Zip Cod	le							
Describe:		radility from				D-t NIL (	7502							
Other-Describe: NORMAL H			William Control			Paterson, NJ (								
Scope of Work (check all that apply $3 \le 3 \le 7 \le 1$						-	=	ntainment w/ closure	negative	press	ure			
	Renovation							ag procedure	e					
≥160 sf or ≥260 lf	Demolitio						Non-E	xempted (*) a	ind Non-f	riable R			<del> </del>	-
Location of		n normally enance/cu	used solely stodial		ž.			Amount		е	R	E n	E	
asbestos-containing material (acm) to be	staff(12)			material (		sbestos-containing		(Specify Sf	or	m	p a	C	n c	
abated in facility (13)	Yes	No	N/A					LF)		v	i	a p	L	
BASEMENT/CRAWL SPACE			-	PIPE INSU	ТАТ	ION	95	LFT		e	<u> </u>	П	$\vdash$	
DASEMENT/CRAWL SPACE			+	Indiano	<u> </u>					Ħ	Ħ	片	In	
	-									Ħ	ī	百	盲	-
Registered Waste Hauler		EP Hauler	111,000	ubic Yards of V	Naste	Name of Registere								
D & S RESTORATION, INC.	133	506		YD		TULLYTOWN	N, RESC	URCE RE	COVER	Y				
Dity, State PATERSON, NJ 07503			Disposal D 09/18/1			City, State TULLYTOW	N DA							
Completed by (Print or Type)	Title		-   -	Signature		TOLLITOW	1,17		Date					
BOGDAN JOLDZIC	PRESID	ENT							09/03/	/2014	1			

CK 3398

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

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Date of Notification (1)					Building C								889		
09/05/2014			P	Market	Halsey	Urban	Rene	wal LL	C 911	16 SF	P-9 P	M	: 65		
Agencies Notified	Type Notification			Street Ad 112 W.	dress 34th Str	eet Ste	e. 210	6					0.000		
EPA DEP	X Initial   Amended		10	City, State	e, Zip Coo	ie				المراجعة	108.40		nC.		
× DOL	Amendment #				ork, NY					al	-101-4	1146	1		}
▼ DOH	Emergency (in	ncluding	IN	lame of	Contact					Teler	phone Num	ber			
I DON	justification) Cancellation			3ob Klu							A07.40				
		-	.		ITY INFO	RMATIC	ON			1					
Name of Facility Where Market Halsey Buil		Place (3)						-	of Facility (4 chool (K-12		termina vida in ing ni separa				
Street Address 165 Halsey Street							in the same of the	S	ubchapter ( ther (i.e. pr	8 (Other			dings,	home	es,
City (5) Newark						20		Square 30,00		# of 1	Floors	4	lldg. A	ge	
County (6) Essex				County C	ode (7) SE ONLY)			Сиптел	t Use (Prio building		g demolish	ed)			
Name of Monitoring Firm	n Hired by Building O	wper (8)		ASCM	No		Name		ement Cont		0)	-			
RK Environmental		wher (o)		0090	140.	`	Bako	Cons	truction 8			nc			
								Address A Rout	s te 46 Suit	te 3D					
City, State, Zip Code Phillipsburg, NJ 08	ity, State, Zip Code Phillipsburg, NJ 08865 roject Manager for Monitoring Firm							itate, Zip wa, NJ	Code I 07512						
Project Manager for Mo Jon Gilbert	nitoring Firm		1	elephon	ne No. 4-6316			none No 256-70		The same of the sa	License No 0666	).			
Start Date (10) 09/15/2014	Jon Gilbert Start Date (10) Schedul				Name of OSHA Monitor Bako Construction & Restoration, Inc						nc				
Occupancy Status Duris	ng Abatement (Check	Only One)				-		Address				50000			
	8 1 8	53 .5							te 46 Suit	te 3D					
Abatement Perform	cated During Entire P ned Outside of Norma 4pm-12am	al Facility H	ours	ent				state, Zip	Code J 07512						
Scope of Work (Check	All That Apply)						, 0.0	., .,							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		***************************************	novat noliti					Mini Glov	Containme i-Enclosure vebag Proc i-Exempted	edure				'e	
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Asbestos-Containin TO BE AB In Fac	Asbestos-Containing Material (ACM)  TO BE ABATED In Facility  Used Mair Custo			Asbestos Conta odial Staff?				ion of					Encapsulate	Enclosure	
	In Facility (13)		No	N/A										ate	ė
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		-	,					-1-7				-	-		
Name of Registered Wa		8	1100000	JDEP W auler ID		Cubic of Was					ed Landfill				
Bako Construction	& Restoration, In-	С		889		10			G.R.O.V	N.S					
City, State Totowa, NJ							al Date /2014		City, State Morrisvi		4				
Completed by		Title				S	ignatur	factor father 09/05/2014							
Damir Valjevac				nager			1900	ller	paye		09	/05/	2014	8	

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

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Date of Notification (1)			N		Building Owne									
9/4/1	4			J+	S MAL	AGEM	BAT C	OMPAKI	CFP -9	PH	1:	0	<b>.</b>	
Agencies Notified	Type Notification  EPA DEP DOL Amended Amendment # Emergency (including justification)  DCA  Emergency (including justification)  Cancellation  Emergency (including justification)  Entry (including justification)  Emergency (including justification)  Em	S	Street Ac	ideress  Re, Zip Code  OLEY  Contact	2 AVE			<del>-0</del> -1						
EPA .			-	J U (	o Zio Codo	//-	5)		C	-60	-1	11	1	
				ROA	e, Zip Code	BEACH	1 115	0773	LICE	Hul	NG			
		ncluding	-	lame of	Contact		/	T T	elephone Nu	mhar				
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							Type of F	acility (4)	240					
	ember 17 mm	CINARI					The second secon	ool (K-12)						
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108 7	1702						etc.					2000		,
City (5)	ACH						Square F	1	of Floors		Bldg		je	
			-10	Savenby C	\ada (7)						G	C1		
MONMOUTH									eing aemolis	snea)				
Name of Monitoring Firm	Hired by Building O	wner (8)	_	ASCM	No.	Name	of Abatem	ent Contract	or (9)					
	SULTING, LUC					A. N	lac Cont	racting Inc						
	F. A.S.					100000000000000000000000000000000000000		2nad						
Street Address    1600 RT 32 F.437   Street Road														
County (6)  Minimal County (7)  Name of Monitoring Firm Hired by Building Owner (8)  HILLIAN CONSULTING LUC  Street Address  105 Lowell Road  City, State, Zip Code  City, State, Zip C														
Project Manager for Mor	nitoring Firm							.1	License 00156	No.				
	Type Notification  EPA DEP DOL Amended Amendment is Emergency (injustification) Cancellation  The properties of Facility Where Abatement is Taking The properties of Facility Consumption of Monitoring Firm Hired by Building (injustification)  The properties of Monitoring Firm Hired by Building (injustification)  The properties of Monitoring Firm  The properties of Monitoring Firm  The properties of Monitoring Firm  The properties of Monitoring Monitoring Entire Formed Outside of Norm Other - Describe:  The properties of Work (Check All That Apply)  The properties of Monitoring Material (ACM)  To BE ABATED In Facility (13)  To BE ABATED In Facility (13)  To BE ABATED In Facility (13)			pletion (	Date (11)				Services	lnc.				
	g Abatement (Check													-
	S).	8 0		ant	*		Huyler S	Street						
				SI IL		City, S	State, Zip C	ode						
Other - Describe:						Had	kensack	, NJ 07606	6					
Scope of Work (Check A	II That Apply)	-												
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≥160 sf or ≥260 lf		Der	nolitio	on		-	70 C (2000) C (2000)	nclosure pag Procedur	٥					
								xempted (*) a		ible Pi	oce	dure		
		Isla	ocatio	on									ment	
Location	n of	No	rmally	4		Description	n of					Тур	oe	
Asbestos-Containing	Used Solely by Maintenance/ EABATED Custodial Staff? (12) Asbestos Containing Material (ACM)  Secription of Description of Asbestos Containing Material (ACM)  (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Yes No N/A  SF or t		Amount				ш							
		Custo	dial S	2021					(Specify	Ren	1	D	ıcar	ncl
	10.40	(	(12)						o. o. c. ,	Remova	1	Renair	Encapsulate	Enclosure
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Name of Registered Was	ste Hauler		N.	JDEP W	laste Cul	bic Yards	TN	lame of Regis	tered Landf	ill	L			
Rovic Transport	ole i idalei		Ha	auler ID 0785	No. of V	bic Yards <sup>Naste</sup> Q	1	ESI PA Be			ill C	or	٥.	
City, State Riverdale, New Jers	sey 07457		1	18.19	Dis	posal Date	• C	ity, State Bethlehem	PA 1801	5				
Completed by	Identify (6)  MONOCITH  Identify Consecting Firm Hired by Building (1)  Identify Consecting Consec	Title				Signatur		17 1	[	ate	1	1	.,	
R. McDonald		Presid	ent			1/2	1117	Sell!		91	4	/ /	4	

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Yannuzzi 808-218-0884

CK 008765 212

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2014 SEP -9 1214 10:43 Museum State of New Jersey HOTIFICATION OF ASSESSION ASATEMENT (Pursuant to MJAC 6:86 and 12:120) DOL - 10 DAY Coin of Notification (1) 08/14/14 a L Name of Building Owner/Operator (2) Orange Housing and Development Corporation Agencine Netther Type Notingation Birest Address 340 Thomas Blvd Initial DEP Amended Oity, State, Zip Code DOL Amendment # Orange, NJ Emergency (including FR DOH APPROVED welffice(lon) Name of Contact Canosiation Mourice Brown P.E. FACILITY INFORMATION Name of Facility Where Abelement is Yelling Piece (3) Abandoned Residential Property Type of Facility (4) Street Address School (K-12) Bubchapter & (Other than K-12) Citier (I.e. private & pommercial buildings, homes, 80 Parrow St 置 Chy (8) Bouars Foo Princeton d of Plagra Bidg. Age County (d) 2500 County Code (7) 70+ Mercer Current Liss (Prior F being demolished) Name of Manitoring Rim Hired by Building Owner (6) ABANONED ARCM No. Sio Terra Name of Abatement Contractor (8) Yannuzzi Environmental Services, Inc. Street Address T PO box 1224 Street Address 162 Route 206 South City, State, Zip Code U Union, NJ City, State, Zip Code Project Manager for Monitoring Firm Hillaborough, NJ 08844 retephone No. Ricardo Eustaquio Telephone Ne. License No. 973-494-3762 808-218-0880 Start Date (10) Schoduled Completion Date (11) 01228 Name of Od HA Monitor 8/15/14 8/15/14 Yennuzzi Environmental Services, Inc Occupancy Status During Abelament (Check Only One) Erest Address Pscility Closed/Jecated During Entire Period of Abatement Abatement Periomed Outside of Normal Facility Hours Other — Describe: 152 Route 206 South 0 City, State, Zip Code Scope of Work (Check All That Apply) Hillaborough, NJ 08844 2160 of or 2380 N Renovation Full Containment with Negative Pressure Mini-Englosure Demolition Glavebag Procedure Non-Brampted (\*) and Non-Frieble Procedure /a Lagger Location of Normally Used Solely by Mintenance Asbesios-Containing Material (ACM) **Abalament** Description of Ambestos Containing Material (ACM) (i.e. thermal systems insulation, auffacing, VAT, or other miscolisheaus) Type ATTOURS in Facility local Bust? (13) (12) Yes No MA Sasament × Pipe inculation 10 LF Name of Registered Waste Hauler NUDEP Waste Hauter ID No. Cubic Yards Yannuzzi Group Inc. Name of Registered Landill of Weste 17487 Grand Central Sanifetion City, State Hillsborough, NJ Disposal Date City Stare ALIBINE T Completed by Penn Angyle, PA John Mucha Project Manager Onto 0/14/14 A60-41 (P-06-09) Do right use (his form for subcates desneute exempted activities,

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Yannuzzi 908-218-0884

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08/14/14	TIME!	J. NG		Nome	noe Lie	ing Owner	/Operator	(2)			ע ע	1	7	
Agencies Notified	Typo Natificat	on		Real	Address	HANDE BY	IG LIBYE	opment Co	poration		1	1		
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Verne of Monitoring Firm Bio Terra	Hirmd by Bulldla	g Owner (	1)	ASC	M No.		Name of	Abistement Co	ALD DE L	5.4			57	
Bireet Address							Yonnu	zi Environ	mental Sa	rvioe	a. Inc	•	£ *	
PO box 1224							Street A	ddress			- 0100			-
My, Sints, Zip Code								oute 208 Sc	outh			F		
Union, NJ				ā d	Artendo-La co		City, Sia	in, zip Code			-		7	
raject Manager for Mon	torino Film			Tukephi	ma Mr		Hillabo	orough, NJ (	1722			ŗ		
cerdo Eustequio			1		ina 140. 194-378	19	Tolopho	ns Na. 15-0880		ansa P	Vo.			-,
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8/16/14 Coupency Status During	Abatament (Che	8/16/4	4	mpiglion	Date (11	1)	Yannu	zzi Environ		rvias;	i, Inc		111	
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Pedility Clesed/Vace Abstement Performs Other - Describe;  Pedility Clesed/Vace Abstement Performs Other - Describe;  Pedility Clesed/Vace Abstement Performs  Localism In Pedility (13)	let During Entire of Outside of Nor That Apply)  Alternal (AOM)	8/15// ack Only O Period of Period of Mail Facilit  Ling Mail Gue	Abeter y Hour Renevi Demoli Lecet Normal id Sele lintena todial 8 (12)	ment in the state of the state	Aaha	Denicae Conte a transal a aufaci other mi	Yennu Street At 152 Rd CRy, Stat Hillebo	ZZI Environe ddreas outs 206 So se, Zp Cade prough, NJ C  Pull Containm Mini-Enelegat Glovebag Pro Non-Example edal (ACM) sevietion, or us)	mental Ser Uth 18844 ment with Neg cadure d (*) and Non (\$peom SF or L	n-Print	Pro one	Abat	e amen	C. C.
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Pedility Gleeck/Vege Abstement Performe Abstement Performe Other - Oesorbe;  Cope of Work (Check All 20 at or 23 if 2180 of or 2200 if  Abbestes-Donieling in Fedility (13)  BESOMO	let During Entire of Outside of Nor That Apply)  of Asierini (AOM)  The Communication (AOM)	8/15// ack Only O Period of Period of Mail Facilit  Ling Mail Gue	A Abetes A Peter A Hour Renown Renown I Legat Normali Internation I (12) No	Ment with the state of the stat	Aaba	Desides Contents of the miles o	Yennu Street At 152 Rd 152 Rd CRy, Stat Hillebo estiption of circles Materials Materials and the circles and t	ZZI Environe dress curte 206 90 te, Zip Cede te, Zip Cede trough, NJ C  Pull Conteine Mini-Enelosur Glorebag Pro Non-Example erial (ACM) mulation, pull Conteine R	Mental Ser  Uth  8844  Ment with Neg  Cadure  d (*) and No	n-Frint	Pro sau	Abat	e amin	- Const
Pedity Clesed/Vaca Abatement Performe Other - Occarbe;  25 of press if Asbatica-Containing in Ferdity (13)  Besome	let During Entire of Outside of Nor That Apply)  of Asierini (AOM)  The Communication (AOM)	8/15// ack Only O Period of Period of Mail Facilit  Ling Mail Gue	A Abetes A Peter A Hour Renown Renown I Legat Normali Internation I (12) No	ment linn linn linn linn linn linn linn li	Aaba	Desirate Control of Author Miles Charles Control of	Yennu Street Ac 152 Rc 152 Rc Chy, Status of Hilleba exiption of Hilleba exiption of Hilleba Matching, VAT, incellance incellance area	ZZI Environe dress	Mental Ser  Uth  8844  Innt with Neg  Cadure  d (*) and Na  Amoun (Special  SF or L  10 LF  Registered U  Contral Se	n-Frint	Pro sau	Abat	e amin	C. C.
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Pedity Ciseed/Vees Abstement Performs Other - Oesorbe; Cope of Work (Check All 28 of pr 28 if 2180 of or 2200 if Abbentos-Containing in Fegulia	let During Entire of Outside of Nor That Apply)  of Asierini (AOM)  The Communication (AOM)	8/15/4 sck Only 0 Period of Period o	A Abetes A Peter A Hour Renown Renown I Legat Normali Internation I (12) No	Ment with the state of the stat	Aaba	Disposis B/18/1/	Yennu Street Ac 152 Rd	ZZI Environe dress	Mental Ser  Uth  8844  Innt with Neg  Cadure  d (*) and Na  Amoun (Special  SF or L  10 LF  Registered U  Contral Se	ne-Frint	Reambert X.	Abat	e amin	C. C.
Pedity Clesed/Vaca Abatement Performs Other - Oceanibe: Cope of Work (Check All 28 of pr 23 if 2180 of or 2200 if  Asbantos-Containing in Ferdity (13)  Besome	let During Entire of Outside of Nor That Apply)  of Asierini (AOM)  The Communication (AOM)	8/15// sck Only 0 Period of Period o	Apeters Renewin Renewin Renewin Lecen Normalia da Sele interna	Ment with the state of the stat	Aaba	Disposis B/18/1/	Yennu Street At 152 Rd 152 Rd CRy, Stat Hilleba aription of sining Materials in ma, VAT, I be illented in the state of the	ZZI Environe dress	Mental Ser  Uth  8844  Innt with Neg  Cadure  d (*) and Na  Amoun (Special  SF or L  10 LF  Registered U  Contral Se	endell philatic	Reambert X.	About T)	e amin	C. C.



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

Check # 0817

Date of Notification (1)						ner/Operator	(2)						
9-5-2014	-2014				Managen	nent		- 91	TH SEP -9	air to	-	C)	$\dashv$
Agencies Notified Type	e Notification		-	reet Add		- A		-	21, 041 )	milli	J. 4	and a	- 1
□ EPA 🗵	Initial				ivingsto			A	7 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	13617	7 :0	1	$\dashv$
DEP X DOL	Amended			-	, Zip Code			<b>p-</b> :	0-19100		Link	i,	
X DOL	Amendment #_ Emergency (in				on, NJ 0	7039			€ LICE		3		-
DOH DCA	justification) Cancellation	Cidding	Na	ame of C	Contact				Telephone No	moei			
				FACILI	TY INFOR	MATION							
Name of Facility Where Abate	ement is Taking	Place (3)			2		Type of	Facility (4)	)				
Chilton Towers								chool (K-12	!)	2)			
Street Address								ubchapter & ther (i.e. pr	(Other than K-1 ivate & commerc	ial buildi	ngs,	nomes	5,
220 W. Jersey Street							et	c.)			0-1-1-1		6210
City (5)			cettrs (1980				Square		# of Floors		dg. A	ge	34
Elizabeth							100,0		15		0+		
County (6)			To	ounty C	ode (7)				r if being demoli:	shed)			
Union	-		(5	STATÉ U	SE ONLY)		Apar	tment Bu	iilding				
Name of Monitoring Firm Hire	od by Building O	wner (8)	1	ASCM	No.	Nam	e of Abate	ement Con	tractor (9)	T			
	ed by building O	Mile! (0)		n/a					ent Corporation	n			
n/a				100			et Address		•	1			
Street Address							Troy La						
n/a							State, Zij						
City, State, Zip Code	a							rk, NJ 07	7035				
. n/a	a						phone No	48	License	No			
Project Manager for Monitori	ect Manager for Monitoring Firm			elephon	ie No.	1.00	3-706 <b>-</b> 7		01193				
n/a		1 Oakadulad Od		n/a					01.00		-		
Start Date (10)			ed Completion Date (11) Name of C						ent Corporation	าท			
9-18-2014		10/18/20							ent Corporati		_		
Occupancy Status During Al	patement (Checi	k Only One)					et Addres		58				
Facility Closed/Vacated	During Entire P	Period of Ab	atem	ent <sup>.</sup>			Troy La				_		_
Abatement Performed	Outside of Norm	al Facility H	ours			1,000,000,000	, State, Zi		7005				20
Other - Describe:						_ LII	ncoin Pa	ark, NJ 0	/035		-1775		
Scope of Work (Check All T	hat Apply)							*					
≥3 sf or ≥3 if		X Rei	novat	tion			Ful	l Containm	ent with Negative	e Pressu	re		
≥160 sf or ≥260 lf		☐ Dei	moliti	on				ni-Enclosum vebag Pro					
							No	n-Exempte	d (*) and Non-Fr	iable Pro	cedu	re	
		1			Γ							emen	t
			ocati			100					Т	уре	_
Location of		Used			Achort	Descript	Description of ontaining Material (ACM) Amount (Specify facing, VAT, or rmiscellaneous)					m	
Asbestos-Containing Ma TO BE ABATI	aterial (ACM)	Main			(i.e.	thermal syste	ems insula	ation,	(Specify	₽	20	nca	l E
In Facility		Custo	dial S (12)	Staff?	,				. SF or LF)	Remova	Repair	Encapsulate	Enclosure
(13)			(12)			other misce	lianeous)		10	) à	=	late	l le
		Yes	No	N/A						1	_		_
Apartments K	(&J			х	Piper F	ittings Tot	al 26 or	enings	6 elbows	x	_		1
Floors 3 thru						on floors	s 3-14		per openin	g			1
				54							_		_
				100						MEN!		·	
Name of Registered Waste	Hauler		100	IJDEP V lauler ID		Cubic Yard of Waste	is .		Registered Lan	ann			
. Loznica Management	Corporation		1	03313		TBD			NS Landfill				
City, State						Disposal D	ate	City, Sta					
Lincoln Park, NJ 0703	35	-				TBD	Morrisville PA 19067						
Completed by		Title				Signa			1)	Date			
E.Cirovic		Secre	etan	1		8	arou	Me-		9-5-2	014		
2.0110110	.Cirovic Sec			78		160	0,000						

#### MO#22302806275

#### State of New Jersey NOTIFIC (P

CATION OF ASBESTOS ABATEMENT	
Pursuant to NJAC 8:60 and 5:16)	
1000 C	

Date of Notification (1)  09 / 05 / 14						Name of Building Owner/Operator (2)								
	-		Sherry	B Shok	rieh			2014 SEP	<b>-</b> 9 3	H IO	্			
Agencies Notified	Type Notific	ation			Street	Address					-	110		27070
☐ EPA					12.Re	eve Circl	e			A		-,	01	
▼ DOLWD	Amended					State, Zip (				AULTOI Q Li	Carrier Con		+6-	_
☑ DHSS	Amendm									C LI	ب السابة ب	1166		
DCA (NUAC E-22 8)	Emergen justificati	icy (inclu	ıding		N	urn, NJ 0	100000000000000000000000000000000000000			Telephone N	umbor			
(NJAC 5:23-8)	Cancella				10 10 10		100			Telephone N	umber			
	Cancella				-	y B Shok			- 1					
					FA	CILITY IN	NFORMA	TION						
Name of Facility Where	Abatement is	Taking F	Place	(3)					Type of Facility					
Private home									School (K-1					
Street Address										8 (Other than K- private and com		suildie	<b>~</b>	
12 Reeve Circle									homes, etc.		mercial	Juliali	95,	
City (5)	- Committee								Square Feet	# of Floors	. 1	Bldg.	Age .	
Millburn, NJ 07041														
County (6)				7.	Cour	ty Code (7)	(STATE U	SE ONLY)	Current Use (P	rior if being dem	nolished			
Essex						,	••	/		The IT Donning Con	iononea			
Name of Monitoring Fire	n Hired by Buil	dina Ow	ner (	8)	ASCM	No	Name	of Ahatama	ent Contractor (9	iv .				_
			(	-/	AGOIN	NO.			ent Contractor (9	)				
Street Address							Gr Tecl							
Street Address								Address						
								lley Rd#						
City, State, Zip Code							City, St	ate, Zip Co	ode				98	
							Wayne,	NJ 0747	70					
Project Manager for Mo	nitoring Firm		10%	Tele	ephone	No.	Telepho	ne No.		License No				
							973-63	8-1777		01127				
Start Date (10)		Schedul	ed C	omple	tion Da	ite (11)	Name o	of OSHA N	lonitor	01127				_
09 /16 /	14	09	1	11	7 /	14	Farrings							
Occupancy Status Durin	a Abatement (						Street A	_	nsultants,Inc					
□ Facility Closed/Vaca					ment			800		1212				
Abatement Performe	d Outside of N	ormal F	acility	/ Нои	rs - Des	scribe	20-21 V	Vagaraw	Road, Bldg .#	35 E				
Time of Abatement:	AM	PM/		PM		AM	1480 St. 580	ate, Zip Co						
Scope of Work (Check a	II that a sale S						Fair La	wn, NJ 0						
Scope of Work (Check a	iii that apply)						Н		and decontami			ssure		
≥ 3 sf or > 3 If     ≥ 160 sf or ≥ 260 If		5	₹ Re	novat	ion		Н	Mini-Enc	tainment with Ne Iosure	gative Pressure	<b>:</b>			
		Ē		moliti					g Procedure	Tent with Nega	tive Pre	ssure		
						-		Non-Exe	mpted (*) and No	on-Friable Proce	edure			
1		8		Loca Iorma				•			1	baten	nent T	ype
Location Asbestos-Containing		(1)			ely by	A-6-		scription o		new account and the district	2	מו	m	П
TO BE AB		9		intena					terial (ACM) insulation,	Amount (Specify	Kemova	Repair	nca	Enclosure
IN Faci	lity		Cust		Staff?	(	surfa	cing, VAT,	or	SIF or LF)	Q.	air.	psu	Sui
(13)		<b> </b>	_	(12)	_	-	other r	niscellane	ous)		1 =	•	Encapsulate	e.
		,	Yes	No	N/A									
Basement					X	Pipe ins	ulation			100 LF	X			
		Г	7			1 - 2.0		-		100 151				]
		L		<u></u>	1							لــال		
y		Г	7			11						ılm		П
Name of Registered Wa	ste Hauler			N.I	DEP Waste	l Hauler ID No.	Cubic Yo	rds of Wast	e Name of Regi	stered Landfil		لاللا		
P. C.									1	oresen raumili				
Gr Tech LLC					003378	35	TBI		T.R.R.F. Inc					
City, State							Disposa	I Date	City, State					
Wayne, NJ 07470							TBI	)	Tullytown, P	A				
Completed By (Print or 1	ype)	Title					Sig	nature /	70	A	Date			
N.Jevtic Owner								A	to ile	dead	00/05/	0014		
ASB-41	-	TO WITE						1/2	we were	, 0	09/05/2	014		
MAY 11 * Do not use is					his forn	ı for asbes	tos licensi	ure exemp	ted activities.					

(K 2411

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

Date of Notification (1) 9/5/2014				of Building (	wner/Opera		2.75	0 1110.0	, .				
Agencies Notified	Type Notification			Address		2	ON SEL -	9 1110:9					
P(4====================================	× Initial		319 S	TATE ST	•		·		Cl				
EPA  DEP  DOL	Amended Amendment #			ate, Zip Co ITON, NJ		ţ	& Lic	DEJUING.					
□ DOH	Emergency (in justification)	ncluding		of Contact CARRO	11			Telephone Nu	mber				
☐ DCA	Cancellation			ILITY INFO		- 1		-		-			
Name of Facility Where		Place (3)	17.0			Тур	e of Facility (4)	)					
DEMOLITION SITE	=						School (K-12	) 3 (Other than K-1	12)				
Street Address 133 WAYNE AVE.						×	Other (i.e. prietc.)	ivate & commerc	cial buil	dings,	home	es,	
City (5) TRENTON, NJ						Squ	are Feet K	# of Floors UNK	100	Bldg. A JNKI	ige		
County (6) MERCER				Code (7) USE ONLY)		Cur		r if being demolis	shed)				
	ame of Monitoring Firm Hired by Building Owner (8) T.I. ENVIRONMENTAL reet Address 253 NO. CHURCH ST.		ASC	M No.	10000	me of Ab	atement Cont	ractor (9)					
Street Address	T.I. ENVIRONMENTAL reet Address 253 NO. CHURCH ST. ty, State, Zip Code IOORESTOWN, NJ 08057				W 8553	eet Addr	ess KUS AVE.						
City, State, Zip Code	253 NO. CHURCH ST. ty, State, Zip Code IOORESTOWN, NJ 08057 oject Manager for Monitoring Firm				Cit	y, State,	State, Zip Code DODBRIDGE, NJ 07095						
Project Manager for Mo	253 NO. CHURCH ST. ty, State, Zip Code 10ORESTOWN, NJ 08057 roject Manager for Monitoring Firm IM GIULIARDI art Date (10) Schedu		100000000000000000000000000000000000000	one No.	Te	lephone	No.	License	No.				
		C-1-4-1-4 C		340-8800		32-726-	SHA Monitor	00615					
SEPT. 9, 2014	JIM GIULIARDI Start Date (10) Scheduled			Date (11)	T.	T.I. EN	IVIRONMEI	NTAL					
Occupancy Status Durin	ng Abatement (Check	Only One)			1700		et Address 53 NO. CHURCH AVE.						
	cated During Entire P ned Outside of Norm						Zip Code	/ (V L.			0776563		
	VACANT DEMO. SIT					T. C	STOWN, N	J 08057					
Scope of Work (Check /	All That Apply)				***************************************								
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf			ovation olition			I N	Mini-Enclosure		Pressu	ıre			
									able Pro				
		Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12)  Demolition  Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable  Amount (Specify SF or LF)					410000000000000000000000000000000000000	Account to the					
Locatio Asbestos-Containing		Used S	Normally Ised Solely by Maintenance/ ustodial Staff? (12)  Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Amount (Specify SF or LF)  The pair of										
TO BE AE	BATED				thermal sys	tems insi	ulation,		Ren	Re	incap	End	
(13)	507.60	(1	2)					O, 0, 1, ,	lova	pair	sula	osure	
		Yes N	o N/A								te	w.	
EXTERIOR	R WALL		X	AC	M-SIDING	SHING	GLES	1,000 SF	X				
									4	<u> </u>			
Name of Bogistarad Wa	este Hauder		NJDEP	Waste	Cubic Yar	de	Name of F	Registered Landf	511				
Name of Registered Wa			Hauler I 4509		of Waste	43	The state of the control of	V.S. INC.					
City, State NEWARK, NJ					Disposal 0 9/11/14	Date	City, State	SVILLE, PA					
Completed by	Completed by Title			-100-000	Signa	ature _	LT.To	00-	Date 9/5/20	11			
DAVID 1. TOLCHIN	PAVID T. TOLCHIN PRES					TUI!	0 1.10	-ch	0/3/20	14			



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

Check# 0818

Date of Notification (1)				Name of	Building (	Owner/C	Operator	(2)								
9/6/14				HDC						201/	CFP -	.a	EM	in.	Cr.	
Agencies Notified	Type Notification			Street Ad						6611	<del>OL!</del>	2		10.	00	
□ EPA			L		en Cou	100	aza			1.	F-1	, n	1.7	* *	~ r	
DEP DOL	Amended			City, Stat						14 W	a Lic			C	16.	
	Amendment # Emergency (ii		-		nsack, I	NJ 0/6	501							vC:		
DOH	justification)			Name of John B						Tele	ephone N	łumbe	er			
□ DCA	Cancellation				ITY INFO	SDM AT	ION					_	152-711-			
Name of Facility Where	Abatement is Taking	Place (3	)	FACIL	III IMPC	JRMAI	ION	Туре	of Facility (4	4)		+				
West Wing, Forme	X65 X X X X X X X X X X X X X X X X X X							-	School (K-1	000						
Street Address								8	Subchapter	8 (Othe						
187 Walnut St							0		Other (i.e. p etc.)	rivate 8	comme	rcial t	ouild	ings,	home	es,
City (5)								Squa	are Feet	# of	Floors		BI	dg. A	ge	
Northvale																
County (6)				County C	ode (7)				ent Use (Prid		-		)			7.
Bergen				•					nool Sche			mo				
Name of Monitoring Fin	m Hired by Building C	wner (8)		ASCM	No.		1		Acres							
n/a Street Address				n/a			Street		Managem	ent G	)rp					
n/a								roy L	(B)							
City, State, Zip Code							A STATE OF THE STA	-	Zip Code				_			_
n/a									ark, NJ 0	7035						
Project Manager for Mo	nitoring Firm	$\neg \tau$	Telephor	ne No.	#55-7- <del>-</del>	Telepi	hone N	No.		License	e No.				-	
n/a	***			n/a			973-	-706-	7950		01193	3				
Start Date (10)				npletion D	Date (11)				HA Monitor				THE REAL		- Conference	
9/22/14		10/31/	888						Managem	ent Co	orp					
Occupancy Status Duri	ng Abatement (Check	Only Or	ne)				Street		1000							
	cated During Entire P med Outside of Norm							roy l	Zip Code							
	Scheduled for Demoliti		riour	<b></b>			153		Park, NJ 0	7035						
Scope of Work (Check	All That Apply)						Line	201111	ant, NO O	7000						-
23 sf or ≥3 lf		п	Renova	ation				] F	ull Containm	ont with	Negativ	o Pro	eerii	φ.		
≥3 si or ≥3 ii			)emoli				5	M	ini-Enclosure	е	rvegauv	0110	JJui	Ŭ.,		
							0		lovebag Proc on-Exempted		d Non-Fr	riable	Pro	edur	e	
		le le	Locat	ion											emen	t
Location	on of	1	Norma	lly		De	escription	n of					4	Ту	ре	_
Asbestos-Containin	g Material (ACM)		d Sole			tos Cor	ntaining I	Materia	al (ACM)		mount		_		щ	m
TO BE A		50000	todial	Staff?	(i.e.		al system acing, VA		lation,		Specify For LF)		Remova	Repair	cap	ndc
(13	)		(12)			other	miscella	neous	)		5000000000 <del>0</del> 00		oval	air	Encapsulate	Enclosure
		Yes	No	N/A											9	
SEE ATTACHED	DOCUMENT				FOR	ALL A	CM Q	UAN	TITIES					2		
SEE ATTACHED	DOCUMENT				FOR	ALL A	ACM Q	UAN	TITIES							
SEE ATTACHED	DOCUMENT				FOR	ALL A	ACM Q	UAN	TITIES			1				
SEE ATTACHEL									TITIES			1				
Name of Registered Wa				JDEP W	aste	Cubic	Yards		Name of	Registe	ered Lan	dfill				
Rovic Transport			110	tauler ID 0033137		of Wa			GROW	/S Lai	ndfill					
City, State		-				Dispo	osal Date	3	City, Stat	te						_
Riverdale, NJ						TBD	)		Morris	ville, F	PA					
Completed by		Title					Signatur		-			Date				
E. Cirovic		Secr	retary	1			F.C	nen	min.			9/6	/14			

CK# 2432

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

British v Lil

Date of Notification (1)			Building Owner/							
9/6/14			J084	13,	ORNA TA	1209 h	H ID: 35	)		
Agencies Notified Type Notification										18
EPA Continitial			55	Nex	r ns	208	عمليك	1		
Amended Amended		City, State	e, Zip Code	,		LICENT	h,G			
DOL Amendment #	ncluding		Allent	URS.	TNI	07/	Number			
DOH justification)		Name of	Contact	2.0		relephone	Mumber			
DCA Cancellation			Nick					-	100	
Name of Facility Where Abatement is Taking	Diane (3)	FACIL	ITY INFORMAT	ION	Type of Facility (4	1)			0.00	101
Name of Facility Where Abatement is raking	177	Ro	1-6921/4		School (K-1.	509				
Street Address	MARI	0)20	rocare	_	Subchapter	8 (Other than	K-12)		*	
The North	/	000	·		Other (i.e. p	rivate & comm	ercial build	ings, I	nome	S,
City (5)  Street Address  55 NoRus  Allenhus	000	1700			etc.) Square Feet	# of Floors	BI	dg. Ag	je	
Allenhu	es F				2000	15	-   .	53	-,-	2
County (6) MON mouth	,	County C	ode (7)		Current Use (Price	or if being dem	olished)			22.000
Men mouth		(STATE U	SE ONLY)				OCAC	2		
Name of Monitoring Firm Hired by Building O	wner (8)	ASCM	No.	Name	of Abatement Cor		T			
Traine of mornioning	. ,			Ace	Insulation Co.,	Inc.				
Street Address		4		Street	Address					
				95 N	Nontrose Road					
City, State, Zip Code				1	State, Zip Code					
				Colt	s Neck, N.J. 07	722				
Project Manager for Monitoring Firm		Telephor	ne No.	100000000000000000000000000000000000000	hone No.		se No.			
			(0)		-294-1757	0002	9			
	Scheduled Co			1	of OSHA Monitor	_				
9-16-14	9-19	3-14			MARK S	oure				
Occupancy Status During Abatement (Check	(Only One)			A	Address					
Facility Closed/Vacated During Entire P	eriod of Abate	ment		1	State, Zip Code					
Abatement Performed Outside of Norm Other – Describe: 7 AM	al Facility Hou	rs		City,	ncoln for	- 11-	12735	-		
				10	neuri per	1,1000	1000		-	
Scope of Work (Check All That Apply)	П.			Г	7 5.11 0-4-1-1-	and with Nonet	ive Pressu	-0		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Renov Demo			t	Full Containm Mini-Enclosure		ive Flessu	E		
2160 \$1 01 2260 11		ndon			Glovebag Pro		Friable Dro	andur		
				F	Non-Exempte	d (") and Non-	Friable Fro	Abate		
	Is Loca	100						Ту		
Location of	Norm Used So	T25535 (V2)	Ashastas Co	escriptio	n of Material (ACM)	Amount			m	
Asbestos-Containing Material (ACM) TO BE ABATED	Mainten		(i.e. therm	al systen	ns insulation,	(Specify		70	nc	En
In Facility	Custodia (12	222	sur	facing, V	AT, or	SF or LF	Removal	Repair	apsi	Enclosure
(13)	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	,	othe	miscella	ineous)		l á	=	Encapsulate	ure
	Yes No						1	_		
ATTIC			TRANSI	18	Piec	1245	- 0			
a loce T		V	L	-le 1	1/9	2551	6 /			
610361	+	+	,	,,-/						
		-						-		
			10:	in Vond	Alama	Begintered ! :	ndfill	1		1
Name of Registered Waste Hauler		NJDEP W Hauler ID		ic Yards /aste		Registered La	пилп			
Ace Insulation Co., Inc.		12086		/	Chrins					
City, State			Disp	osal Dat	e City, Sta	te			387	
Colts Neck, New Jersey			'	7-19	Eastor	ı, Pa			<u> 15</u> E	
Completed by	Title	-25		Signatu		,	Date	1. 1	11	,
George Wuest	Presider	nt		Cito	w Ghlas	1	1 9/	61	10	1
				110	10			9 12		
ASB-41 (R-06-08)				* Do r	not use this form fo	r asbestos lice	nsure exer	npted	activ	ties.

## CK# 2432

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

NH 24 )— te of Notification (1)		Nam		ding Owner/O	100	1 1		NILLE	p +0 -	المحادة		
encies Notified Type Notification			et Addre	r Con	Vor	1 Rd		2014 SEP -9				
EPA DEP DOL DOL DOH DOH DOH DOH DOH DOH DITION Initial Amended Amendment #_ Emergency (including) justification)	iding		State, Z Se me of Co	c Si do	o Heigh	ints	, New	Telephone Number	€ 60 gr. 401	11 15G	101	1
ame of Facility Where Abatement is Taking Pi			FACILIT	Y INFORMAT		Sch Sub Oth	er (i.e. privi )	Other than K-12) ate & commercial	building	is, ho	mes,	
30 f Conyard  Sea 5 de Heign	+)					Square F	$\cup$	# of Floors	100	25	7	_
Sea J. C. Mer J.		Cc	TATE US	de (7) E ONLY)		76	sider	f being demolishe				
tame of Monitoring Firm Hired by Building Ow	ner (8)	1	ASCM N	₹0.	Name Ace	of Abater	nent Contr on Co., I	actor (9)				
treet Address					95 N	Address iontrose						_
City, State, Zip Code					City, S Colts	tate, Zip s Neck,	Code N.J. 077					
Project Manager for Monitoring Firm		Te	elephone	No.		none No. 294-17	57	License No 00029	),			
Start Date (10)	cheduled	Comp	oletion Da	ate (11)		of OSHA						
Oncupancy Status During Abatement (Check	Only One	)				t Address						
Facility Closed/Vacated During Entire Per Abatement Performed Cutside of Norma Other – Describe:	LFacility F	Hours			City,	State, Zip	Code					
Scope of Work (Check All That Apply) ≥3 sf or ≥3 if ≥160 sf or ≥260 if	☐ Re	novat	ion			- Mini	Enclosure	nt with Negative F edure (*) and Non-Friab				
(	! .,	0	-			ZI IKUII	-Exampled	() diam real			ment	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Mair	ocationali I Sole Internationali Odial S (12)	ly by nce/	SI	Description Containing mal system urfacing, \ \ \text{per miscell}	Material ms insula /AT, or	(ACM) tion,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	
	Yes	No	N/A	51	100			1000	V			t
W+5.6e			X		CCE							
			-	-					+			-
Name of Registered Waste Hauler	11		NJDEP W Hauler ID		ubic Yards f Waste	2	Name of	Registered Landfi	H			80.5
Ace Insulation Co., Inc.			2086		isposal Da	ote /	City, Sta	te				
City, State Colts Neck, New Jersey						47/14	Tullyto	wn, PA	Date /	17	. (/	
Completed by Bree McGuire	Secr	etary	Treas	urer	Jigital	Bu	Υ		9/6	2//0	7_	

CK# 2432

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

ate of Notification (1)		Name	$\overline{}$	back M	C HUG	n J	6				-
Igencies Notified Type Notification		Street	Addre	1800tic	n Ct		2014 SEP -9	AM	(O: :	S	
EPA Initial Amended Amendment #_ Emergency (inc	luding		State, Co	Zip Code  COS RIVE	, New	JRCS	Tephone Num	pper it	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<u> </u>	)
DOH Justification) Cancellation			M.	Y INFORMATION			1,,,,,,				
Name of Facility Where Abatement is Taking F 1CHUG TES CENC Street Address	<u> </u>		401011	The Committee	Type of Sci	her (i.e. pr		2) al buildir	ngs, ho	onies,	
23 Venetica 23 Venetica City (5) Tom) River					Square	Feet	# of Floors	6	g. Age 001		
Name of Monitoring Firm Hired by Building O	vner (8)	(STA	nty Co ITE US	O. N		ment Con	(Q tractor (9)				
Street Address				-   5	Street Address 95 Montros	e Road					
City, State, Zip Code  Project Manager for Monitoring Firm		Tele	phone	No. T	City, State, Zip Colts Neck elephone No	, N.J. 07	License i	√o.			
Start Date (10)	Scheduled G		tion Da	ate (11)	732-294-17 Name of OSH	A Monitor	00029				
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire P Abatement Performed Cutside of Norm Other - Describe:	erion of Aba	atement ours			Street Addres						
Scope of Work (Check All That Apply)  ≥3 sf or ≥3 if ≥160 sf or ≥260 if		ovation nolition			f. film	i-Enclosure				)	
	l Is Lo	cation			7 100.	Lacripio	(7,53,43)		Abate Ty	ment	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used S Gaint Custod	maliy Solely b enance lial Stat (12)	1	Ashestos Conta (i.e. thermal s surfaci			Amount (Specify SF or LF)	Removal	Repair	Encapsulate	1100000
	Yes	No	NIA	Cid.			18014	10	b	+	
atsice		-	2	21017	·		10001	1			
								_			_
Name of Registered Waste Hauler Ace Insulation Co., Inc.			EP Wiler ID 186			G.R.O		fill .			
City, State Colts Neck, New Jersey				Dispos	125/14	City, Sta	wn, PA				
Completed by Bree McGuire	Title Secret	ary Tr	easu	- 1	gnature PA U	M		Date 1	6	14	_

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

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

			(Fu	i Suaiit i	io NJAC	2 0.00 an	u 12.120)			Ch-	# 6	2511	06	V 10
Date of Notification (1) S	eptember 5, 20	14			Name of	Building C	John D			rul , III			-	
Agencies Notified  [ x ] EPA  [ ] DEP	Amer	tion   Notifica   nded Noti   ndment #	fication		Street A	ddress			n Avenue SEP					
[x] DOL [x] DOH	AND SERVICE CONTRACTOR	gency (in	Prince States				Union l	Bea	ch, NJ 07735	ICENLING	10.3			
DCA	justifi	ication) ellation		İ	Name of	f Contact			Te	lephone Number			-1.0	- 6
	[ ] Cano						iGregorio	)			()			
Name of Facility Where A	Abatement is Takins	Place (3		FACIL	ITY IN	FORMA	TION	Ту	pe of Facility (4)		97			
	sidence		,						[ ]	School (k-12)	41	L 12\		
Street Address	1 <sup>th</sup> Avenue								[ x ]	Subchapter 8 (off Other (i.e., private buildings, homes	e & co			
City		County	(6)		County C	Code (7) USE ONL	v)	Sq	uare feet 1638 sf	# of Floors	Bldg	g. Age	54	
Beach Have	en, NJ	Ocea	n		(SIAIL	OSE ONE	,	Cu	rrent Use (Prior if Residen	being demolished	)		/-	
Name of Monitoring Firm		Owner (	3)		ASCM N	lo.	Name of	Abat	tement Contractor	(9) in Contracting,	Inc			
Street Address	A				-		Street Ad	dres	S	oute 9, Unit 61	me.			
City, State, Zip Code						•	City, Stat	e, Zi	ip Code		00	755 1	271	
Project Manager for Mon	itoring Firm		Telephone	Number			Telephon	e Nu		iver, New Jers License N			2/1	
					Doto (	11)	732-349		932 IA Monitor	00624				
Scheduled Start Date (10) 09/05/20			Scheduled 09/08/20		on Date (	11)	Name of	OSE		. Analytical				
[ ] Ab	Abatement (Check cility Closed/Vacate atement Performed her – Describe	ed During	Entire Perio				Street Ad		1056 St ip Code	elton Road way, New Jerse	ey 088	354		
Scope of Work (Check al	l that apply)]								[ ] Full Contain	ment with Negativ	-			
[ ] <u>&gt;</u> 3 sf or ≥ [X ] ≥160 sf or				Renovati Demoli					Mini-Enclose Glovebag Pr X Non-Exemp		riable P	rocedu	re	
					T						Aba	tement	Туре	
Location Asbestos-Containing TO BE ABo in facili (13)	Material (ACM) ATED	N	Is Locatio formally us Solely by tenance/Cu Staff (12)	sed ,		Ash N (i.e. inst	Description Destos-Con Material (A L, thermal sullation, sur VAT, o Ler miscella	tain CM syste rfaci or	ing c) ems ing,	Amount (Specify SF or LF)	R E M O V A L	R E P A I R	E N C A P S U L E	E N C L O S U R E
Exterior			X		Asbe	stos sidir	ng			1000 sf	X			
														-
				-							-	-		-
Name of Registered Was		100	JDEP Wast		ID No.	1	ards of Wast	te	Name of Registe	red Landfill				
Guardian C City, State	ontracting, Inc.		2		sal Date	3	City, Sta		T.R.R.F.					
	, New Jersey	Title		09/09	9/2014 Signat	ture - /	Tullyto	own	, Pennsylvania		Date	;		
Nicholas Fe		Proje	ct Manag	211		/	Un	<u>_</u>	Jean		9/5			
		*Do	not use th	is form f	for asbes	tos licensi	ıre exempt	ed a	ctivities.					

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

Check # 9126

Date of Notification (1)						Owner / Operator	(2)	( عود محملة الأسامة الأ	v L			1
	ptember 5, 2014			_	ongmore					211		
Agencies Notified	Type Notification	n		Street A	Address			2014 SEP -9	åМ	i0: '	3	
□EPA				66 Jost	nua Drive			10 00 00 00 00 00 00 00 00 00 00 00 00 0				1
DEP								At the tree	e or	7 -	C1	
DOL	Initial			City, St	ate & Zip	Code		<u>A: Lice:</u> & Lice:		Ć.,	U	
<u> </u>	Amende	ed		Beach	Haven We	est, NJ 08050		G LIGE.	i – i i v	C		
DOH	Amendr	0.000								Nim	- l	
□DCA	Cancell	ation		Name o	of Contact			l i ele	phone	Nur	nber	
1				FAC	ILITY II	NFORMATION						
Name of Facility When Residence	re Abatement is	Taking Pla	ace (3)			Type of Faci						
Street Address							pter 8 (Other than	K-12)				
66 Joshua Drive							*	ommercial buildings	hom	e, et	c.)	
oo oosiida biivo						Square Feet			Age	•		
City (5)						1,15		2	60	yea	rs	
Beach Haven West						Current Use Residence	(Prior if being der	nolished)				
County (6) Ocean			inty Code	(7)								-
Name of Monitoring F	irm Hired by Buil				ASCM N	하면 보고 1000mm (1000mm) (1000mm) (1000mm) (1000mm)	atement Contracto	or (9)				
N/A Street Address		-			J	Synatech, Ir Street Addre						
Street Address						829 Radio R				135		
City, State & Zip Code	9		6.			City, State &	Zip Code arbor, NJ 08087			700		
Project Manager for N	Monitoring Firm		Tel	ephone N	lumber	Telephone N 609-296-691	lumber	License Numb	er 00817	7		
Scheduled Start Date	(10)	cheduled	Completic	n Date (1	(1)	Name of OS			0001			
September 15		crieduled		er 15, 201		Synatech, Ir						
Occupancy Status Du	cupancy Status During Abatement (Check only					Street Addre						
		70.1			2.EX	City, State &	RANDIAN					
	Other - Describe:						arbor, NJ 08087					
	Facility Occupied During Abatement						7					
Scope of Work (Chec												
						[-	Full Containmer	nt with Negative Pressu	ıre			
≥3 sf or ≥ 50 lf				Renovatio	on	Ē	Mini-Enclosure					
≥160 sf or ≥26	O If			Demolitio	n	Ē	Glovebag Proce	edure				
			91—35 20			$\overline{\triangleright}$	프로 - [경기기는 기능하는 것 등 기급기기	(*) and Non-Friable Pro	cedu	re		
Loc	ation of		Is Location	on Norma	lly Used	Descrip			Ab	atem	ent T	уре
Asbestos-Contai		CM)		y Mainten		Asbestos-0		Amount (Specify SF or LF)				
	E ABATED Facility		Custo	dial Staff	? (12)	Material (i.e., therma		SF OI LF)	$\vdash$			·
	(13)					insulation, su			ام	_	Encapsulate	Щ
						or other mis	cellaneous)		em	Repair	aps	IClo
									Remova	air	sula	Enclosure
			Yes	No	N/A				-		te	O O
Exterior		_		х		Asbestos-con	taining sidina	1,000 SF	X			T
LALEITOI		-					0 0					
								1				
Name of Registered \	Waste Hauler		NJDEP \		Cubic Y	ards of Waste	Name of Regis	stered Landfill				
Sunatoch Inc			Hauler ID	No. 429	9		Grows Landfi	11				
City, State	satech, Inc.					I Date	City, State					
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							Manda du -					
Little Egg Harbor, N		Titlo			Octobe Signatu	r 16, 2014	Morrisville, P.	Date				
Completed By		Title			Signatu ( )	0.11	5	Date				
Diane Aloia		Executiv	e Assista	nt	100	ani abr-		September 5, 2014				

(K1616

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

income si

Date of Notification (1)	9-4-14	,		Name S	of Buildin	g Owner/Operator	ALKIE!	JJ 2014 SEP -	-9	AM	10:	33
Agencies Notified	Type Notification		十	Street	Address	7	- C					
☐ EPA	1 Initial		L			WESTER	-/4 //	ALUIUI a Lit				=
□ DEP IM DOL	Amended Amendment #		Γ	City, S	State, Zip (	Code /	1 07	73.1	12	C.F.	· C:	1
	Emergency (in					EZC N	0.0/	Telephone Numb	=	==		_
☐ DOH	justification).  Cancellation				of Contac	PLACE	215	1 ejeptione Nutrix		· · ·		
				FAC	ENY N	ORMATION		7	/			
Name of Facility Where	Abatement is Taking	Place	(3)				Type of Facility	224.75				
							School (K-1	2)				Î
Street Address	TERN ]	0					Other (Le., )	8 (Other than K-12) private & commercia ) SHE	bulk	lings,		ĺ
City (5) //	NI	/					Square Feet	# of Floors	B	dg. A	ge	$\neg$
HOWE	ZL ONV	<u>.</u>			7.0.3.4	207475	80 ST	vior if being demolish	1 -	5		=
County (6) MONN	DUTH	,		USE	ity Code ( ONLY)	7) (STATE	SH	ED				
Name of Monitoring Firm	Hired by Building C	Wher	7	SCM	No.	Name of Abaten	nent Contractor (	)) 			00000 ml s	Chesting
(8)			ــــــــــــــــــــــــــــــــــــــ				INDUSI	RIES INC	===		===	_
Street Address				,		Street Address	ATICK -	TRAIL		0		
City, State, Zip Code		17.7				City, State, Zip C RRICK	ode //	08/24				
Project Manager for Mor	pitoring Firm	-	Teler	ohone	No.	Telephone No.	. /	License No.		/		$\neg$
r tojact manager to men	12(0.19)						9-1499	0116	16			
Start Date (10)		uled Co			të (11)	Name of OSHA	Monitor					
Occupancy Status Durin					-	Street Address						
Facility Closed/Vacat	ed During Entire Pe	riod of A	Abaten	nent								
☐ Abatement Performer	d Outside of Normal	Facility	Hours	S		City, State, Zip C	lode					
Other - Describe:	VACAN	17_	27	61	>				_		==	=
Scope of Work (Check a	all that apply)			•		TFull Co	ntainment with No	egative Pressure				-
∏≥3 sf or ≥3 lf			novatio			☐ Mini-En	closure					2000
≥160 sf or ≥260 lf		Der	molitics	ľ		☐ Gloveb	ag Procedure empted (*) and N	on-Friable Procedur	9			
			ocatio	n					. A	bate: Typ		
	_		mally Solely	hv	-	Description o	f		_	٠,٠		-
Location ( Asbestos-Containing N		Main	tenand	æ/	Asbes	tos Containing Ma	terial (ACM)	Amount			9	m
TO BE ABAT	DED .		stodial taff?		(i.e.	thermal systems surfacing, VAT	msulation, or	(Specify SF or LF)	en	Repair	cap	nc lo
IN Facility (13)			(12)			other miscellane			Removal	<b>P</b>	Encapsulate	Enclosure
		Yes	No	N/A							6	
SIDING				1	TR	ANSITE	- 1	300 SF	V			
												_
												_
Name of Registered Was	ste Hauler DUS 1721/23	/NO		77 2	No.	Oubic Yards of Waste /2		istered Landfill ROWS				
City, State ISRICK.		- ///	<u>۽ ل</u>	40	02	Disposal Date	City, State	P.A.				
Completed By_	// V .	- /3				Signature	11	Date		_	, ,	-
ERIC PLACE		TR	ES			- But	lack.	9-	4-	/	4	_

(K 1618

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

8	,	(Pu	rsuant to	NJAC	8:60 and 12:12	0)	5 3	1	J laga	ř V	-
Date of Notification (1)	9-4-1	1	7	AN		EDGE	WOODANIA (		-0		
Agencies Notified  EPA  OBP  DOL	Type Notification  Type Notification  Amended  Amendment if		Tity Sta	da Zin i	MILLHOU Dodle RRY HIL		NE 1	Li	OE:	10 101	- G
DOH DOA	Emergency (in justification) Cancellation	nduding	Name o	Conta			Telaphone Numb		7-/	7	=
Name of Facility Where	Abatement is Takir	g Place (3)	FACE	Lity IN	FORMATION	Type of Facility					$\dashv$
	louse L	r/				Other (Le., )	8 (Other than K-12) private & commercia ) KES 1 D E A   8 of Floors	build / C	lings, ≥ dg. A		$\downarrow$
City SHERRY	HILL 1	YJ,	I Comb	i Code (	7) (STATE				40		4
County (6) AM	DEN n Hired by Building	Owner (	USE O	MLY)	Name of Abater	RESI	DENCE				_
(8) Street Address			-		Street Address		SIES / NC		-		-
City, State, Zip Code						ATICK Code V. I	08724				-
Project Manager for Mo	nitoring Firm	Те	lephone No	0.	Telephone No.	9-7-199	License No.	16		*,	-
Start Date (10) 9-10	6-14 Sche	duled Complete	etion Date	(11)	Name of OSHA						
Occupancy Status Duris					Street Address	- in the second					
Facility Closed/Vacal Abatement Performe Other - Describe:	ed During Entire Pe	i Facility Ho	urs s	_	City, State, Zip C	Code					
Scope of Work (Check	all that apply)	Renova	fina		Full Co	ntainment with Ne	gative Pressure				
☐ ≥3 sf or ≥3 if ☐ ≥160 sf or ≥260 if		Demoit	ion'		Gloveb	ag Procedure	on-Friable Procedur	9	hate	ment	_
Location		is Locat Normal Used Sole	y	•	Description o	d.			Тур		$\dashv$
Asbestos-Containing I TO BE ABA IN Facility (13)	Material (ACM) TED	Maintena Cuștod Staff (12)	nce/ ial	Asbes (i.e.	ins Containing Ma thermal systems surfacing, VAT other miscellane	iterial (ACM) insulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes No	+-+	7)	C M	1.	500 ST	1/	_		$\dashv$
T-LOOR T	ILE		Y   -		<u> </u>		300				
											$\dashv$
Name of Registered Wa	ste Hauler DUSTRIES	INC	NUDEP WE Hauter D.N. 2 / 6 /	iste	Cubic Yards of Waste	3-	istered Landill R. O. W.	<u>S</u>	ابــا ,		
City, State BRICK					Disposal Date	City, State	PA				
Completed By Public Pub		PRES	. ,		Signalure	Mark	Date	-4		19	4

Salina a Lili

State of New Jersey NOTIFICATION OF ASSESTOS ABATEMENT (Pursuant to NJAC 8:50 and 12:120)

Check # 0805

9634 CED 9 8M IO: 32 Description (1)		1.00	ame of B	uliding Ow	/ner/Op	erator (2	2)	NJERG	nt of F	VPPROV Jealth &	Sen	ior S	ervic	es	
Agencies Notified UType Notification		00 TO 100	46 Pa				- SALHISKO	Yo	w.	(signatu	事	200		4	
DEP Amended Amendment		C	ity. State	, Zip Code eld Park,		Jersey		Date	90	3 14			36	PI	M
Emergency (justification)  Cancellation	Including	1000		Ciminno					Tels	ihone Ni	unbe	र्गे -	41-		
Name of Facility Where Abatement is Takin Residential Property	g Place (3)		FACIL	TY INFOR	CHATIC	)FI		Pacility (4 thool (K-1)	2)	n than K	121				
Street Address 2081 Marguerite St							et et	her (i.e. p c.)	rivate &	comme	cial 1				s,
City (5)				1			Square 2000		1	Floors		50	) +  g, A(	B	
County (6) Bergen	-		County C	ode (7) SE ONLY)				t Use (Pri dential h		ig demol	ishe	d)			
Name of Monitoring Firm Hired by Building n/a	Owner (8)		ASCM n/a	No.		Lozr	ica Ma	ement Con Enagem							
Street Address n/a						22 T	roy Ln					_ :			
City, State, Zip Code n/a						Line		rk, NJ Q	7035		N		r		
Project Manager for Monitoring Firm			Tolophot n/a			973-	706-7	950		License 01198					
Start Date (10) 9/9/14	Schedule 9/11/14	ŀ	npistion (	Date (11)		Lozr	rica M	A Monitor anagem		orp					
Occupancy Status During Abatement (Che Facility Closed/Vacated During Entire Abatement Performed Culside of Nor Coher - Describe: Abandoned	Period of A	beten	nent			22 T City, S	roy Ln tate, Zn	1	7035		r				
Scope of Work (Check All That Apply)	<del></del>						<b>3</b>								
23 af or ≥3 lf ≥160 af or ≥260 lf	Total Control	emoke					Min	Containm l-Enclosus veltag Pro l-Exemple	e ocedure		•			·. e	
		Locati				20.20							1/2/2	pe pe	t
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Usor Mai	d Sold Nucha	in ph	Asbast (j.e,	therme	sacription training f I system schop, V/ miscella	daterial s insula VT, or	(ACM)	15	anount Specify or LF)		Removal	Repair	Encapsulate	Englorure
Exterior			×		Tran	site Si	ding		/ppro	x 1500	SI	Κ.			
														-	
			-									_	-		$\vdash$
Name of Registered Waste Hauler			NJDEP V		Cubic	c Yards		Tara military		ered Len	dill			J	1
Loznica Management Corp			003313		TBD	)			NS La	ndfill			,	,,	
City, State Lincoln Park, NJ 07035			•		TBC		!	City, 5th	ste sville F	A			,		
Completed by E. Cirovic	Titte Secr	etan	1			Signatur E. Co					Del 9/	bs 3/14			

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

Date of Notification (1) 9/4/2014					Owner/Operato Nemours &			20	14 SEI	9-9	ÂM	10:	5!
Agencies Notified	Type Notification Initial		Lanca de la companya	130 & 0	anal Road				ر _ر ط ک				
☑ EPA ☑ DEP ☑ DOL	Amended Amendment #			ate, Zip Co water, Ne	de ew Jersey 0	8023			ce L	ICE!	i-ii	G	
DOH DCA	justification)  Cancellation	icidaling	John	of Contact Kyritsis				Teleph	none Nu	mber			
N	batana at in Tabia	Di (2)	FAC	ILITY INFO	ORMATION	Tues	s of Facility /4	1					
Name of Facility Where A Canal Bridge Area	batement is Taking	Place (3)					e of Facility (4 School (K-12	2)		6)			
Street Address Route 130 & Canal	Road					×	Subchapter 8 Other (i.e. pr etc.)	rivate & c	ommerc	ial build			es,
City (5) Deepwater						Squ 0	are Feet	# of FI	oors	5 S	idg. A	ge	
County (6) Salem			County (STATE	Code (7) USE ONLY	)		rent Use (Prio e Lines & S				ng		
Name of Monitoring Firm Harvard Environmen		wner (8)	ASC	M No.			atement Cont Environmen			nc.			
Street Address 760 Pulaski Highwa	у				7.77	et Addr Ridge	ess Road						
City, State, Zip Code Bear, DE 19701		<del>2001</del>	194913.1944				Zip Code ville, PA 194	460		Terror.			
Project Manager for Moni Wesly Morrison	toring Firm			one No. 26-2333		phone -933-	No. -4332	1.00	icense N	No.			
Start Date (10) 06/11/2014		Scheduled (		Date (11)	755577		SHA Monitor Env., Inc.						
Occupancy Status During		80 88 88 88				et Addr ) Pula	ess ski Hwy						
Facility Closed/Vaca Abatement Performe Other – Describe: _	ed Outside of Norm	al Facility Ho	ours		0.100		Zip Code 19701	1944	_				
Scope of Work (Check Al	I That Apply)								-	- William			-
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		0.0393.03	ovation nolition			× N	ull Containme Ini-Enclosure Glovebag Proc	edure					
				T			lon-Exempted	(^) and N	von-Fria		Abate	est in territories de	-
Location		Nor	cation mally Solely by		Description			111			Ту		
Asbestos-Containing <u>TO BE ABA</u> In Facili (13)	ATED	Mainte Custod	enance/ ial Staff? 12)		tos Containing thermal system surfacing, \ other miscell	ms insu /AT, or	ulation,	Amo (Spe SF o	ecify	Remova	Repair	Encapsulate	Enclosure
		C. C	No N/A									ate	e e
canal/bridg	e area	X		galb	estos on str	uctura	al steel	527	2 sf	X			
canal/bridg	e area	X			tsi pip	e		940	O If	X			
canal/bridg	e area	X			galbestos	on pip	e		0 If	X			
canal/bridg		X			mastic or				O If	X			
Name of Registered Was SJ Transportation	te Hauler		NJDEP \ Hauler II 03217		Cubic Yards of Waste 40		Name of F		d Landfi	II			
City, State Woodstown, NJ	1000				Disposal Da 7-8-9/2014		City, State Morgani		'A				
Completed by Jeff LaRiviere		Title V.P.			Signatu	ire			100	ate /4/201	4		
ASB-41 (R-06-08)					C.Do	not use	e this form for	asbestos	licensu	re exen	npted	activi	ties.

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

Date of Notification (1)			Name o	of Building	g Owner/Operator	(2)						
September 04, 2014	4		Newa	ırk Boa	rd of Educati	2014 SFP - 9	an in ca					
Agency Notified	Type Notification		Street A	Address			VII 10. 30					
□ EPA	☑ Initial			dar Stre		AT PAPER	CO-THOL					
Misquieder Sale Ray 102004	☐ Amended		2000200 0000	ate, Zip (		& LICE	AL THIS					
⊠ DOL	Amendment #			irk, NJ								
☑ DOH	justification)			of Contac			Telephone Nu	mber				
□ DCA	☐ Cancellation		Benja	amin O	lagadeya			-			_	
			FACIL	LITY INF	ORMATION							
Name of Facility Where A	batement is Taking Place	(3)			×	Type of Facility	(4)					
Camden Street Sch	nool					School (K-12	·)					
Street Address		-0)					Other than K-1					
281 Camden Street	t					homes, etc.)	ivate & commerci	iai bullding	gs,			
City (5)						Square Feet	# of Floors	Bldg.	Age			
Newark, NJ 07103						45,000	3	1968	3			
County (6)			County	Code (7	) (STATE USE		rlor if being demo	olished)				
Essex			ONLY)		, ,	Education						
Name of Monitoring Firm	Hired by Building Owner	ASCI	M No		Name of Abaten	nent Contractor (	9)		-	-		
(0)		000			Commission of the second secon	storation Co.,						
TTI Environmental	, incorporateu	000	03		Street Address	storation co.,	1110.		_			-
Street Address	Chanak				223 Randol	nh Avenue						
1253 North Church	Street				City, State, Zip				-92		-	_
City, State, Zip Code	DOE7 442C				Clifton, NJ							
Moorestown, NJ 08 Project Manager for Moni		Telenh	one No.		Telephone No.	07011	License No.					
Jim Guilardi	normy r min		340-880	20	973-478-468	21	00120					
Start Date (10)	Scheduled Com	100000000000000000000000000000000000000			Name of OSHA	1000	1 00.20		722			
September 05, 201	and the second second	55			1.5.77171.700.701.071.701.000	vironmental :	Services, L.L	.C.				
	Abatement (Check only		-		Street Address	***************************************	301111000,					
					464 Valley I	Brook Avenu	е					
☑ Facility Closed/Vacate	d During Entire Period of Outside of Normal Facility	Abateme	nt		City, State, Zip							
Other - Describe:	Outside of Normal Facility	nouis				NJ 07071-199	98					
Scope of Work (Check all	I that apply)											
			₩ Don	ovation		Containment with Enclosure	n Negative Pressi	ure				
<ul> <li>         □ ≥ 3 sf or ≥ 3 lf     </li> <li>         □ ≥ 160 sf or ≥ 260 lf     </li> </ul>			10-10-10-10-10-10-10-10-10-10-10-10-10-1	nolition	□ Glo	vebag Procedure						
					⊠ Nor	-Exempted (*) an	d Non-Friable Pro	ocedure	Ι .	bate	mo	nt.
7.993		Is Loca							^	Ty		16
Locatio	on of	Norm Used So	Mary Commence		Description	of						
Asbestos-Containin	g Material (ACM)	Mainter			stos Containing N		Amoun		70		Enc	ш
TO BE AS		Custo		(1.€	., thermal systems surfacing, VA		(Specify SF or LF		em	Rep	aps	iclo
(13)		Staf (12			other miscellar			•	Removal	Repair	Encapsulate	Enclosure
	-			-					-		е	1.00
		Yes No	N/A		-: 0 M .:		40	00 sq ft		-		
Room 112				F100	r Tile & Masti	С	12	.00 Sq 11		-		
									-			-
									-			
Name of Registered Was			Waste I	Hauler	Cubic Yards of	Name of Regi	stered Landfill					
B&N&K Restoration		ID No.	5 / 2A	456	Waste 5	Minerva E	nterprises, li	nc.				
Tri-State Transfer	Associates, Inc.	1203	0 1 EA			City, State	,					-
City, State	(D ) (N)				Disposal Date 09/08/2014 -	Waynesbi	ura OH					
Clifton, NJ 07011					09/14/2014 Signature	vvaynesbi	arg, On	Date			_	-
Completed by	Title Safety Offic				Signature	110		9/4/2	012	1		

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

Date of Notification (1)				Name o	f Buildin	g Owner/Operator	(2)	12 50	-11				
September 04, 201	4			Newa	rk Boa	ard of Educati	on						
Agency Notified	Type Notification			Street A	Address		2014	SEP-9 AR	10. A				
T = 5.4	R lawal			2 Cec	lar Str	eet		OLI J RI	الها الله	•			
	☐ Amended			City, St	ate, Zip (	Code	A:	tra in a					
⊠ DOL	Amendment #			Newa	rk, NJ	07112	· . •	L C	III NO				
₩ DOH		ng		Name c	of Contac	et .		Telephone Nu	mber			-	
□ DCA	☐ Cancellation			Benja	amin O	lagadeya	ř						
EPA   Amended Amended Amended   Emergency (including justification)   DCA			ORMATION						- 100				
Name of Facility Where	Abatement is Taking Pla	ne (3)		17,012			Type of Facility	(4)				-	
No. 10 Section Let 70 Section 100	170	00 (0)						A 58					
	001						Subchanter 8	) (Other than K-1	2)				
								ivate & commerc		gs,			
-							homes, etc.)	Two sec	1 500				
							Square Feet	# of Floors	Bldg.				
Newark, NJ 07104							45,000	2	196	5 +	/-		
County (6)					Code (7	) (STATE USE	Current Use (Pr	or if being demo	olished)				
Essex				ONLY)			Education						
Name of Monitoring Firm	Hired by Building Owne	er A	SCM	No.	-	Name of Abater	nent Contractor (9	)					
TTI Environmenta	I, Incorporated	(	0000	3		B&N&K Res	storation Co.,	Inc.					
					1: 1	Street Address		-					
1253 North Churc	h Street					223 Randol	ph Avenue						
					-	City, State, Zip							
	8057-1136					Clifton, NJ							
		Tel	ephor	ne No.		Telephone No.		License No.	-				$\dashv$
					10	973-478-468	81	00120					
	Scheduled Co	29	N 100 - 100 17 10			Name of OSHA				-			
	Anna and a second a						vironmental S	Services, L.L	.C.				
		and anyone				Street Address							
	was and the same of the same					464 Valley F	Brook Avenue	ì					
	Initial					City, State, Zip							-
	Outside of Normal Faci	ity nou	15				NJ 07071-199	8					
Scope of Work (Check a	Il that apply)												
				Ø Den	ovation	☐ Full	Containment with -Enclosure	Negative Pressi	ıre				
						_	ebag Procedure						
□ £ 100 31 01 £ 200 11							-Exempted (*) and	Non-Friable Pro	ocedure	,			
		ls l	Locati	ion						A	bate	eme pe	nt
Amended Amendment #   Emergency (including justification)   Cancellation					Description	of				, , <del>,</del>	pe		
					Asbe	stos Containing N		Amoun	t			ш	m
				(0.000 A.E.A.)	(i.e	., thermal systems		(Specify		Rer	Re	cal	ncl
	2010 0 <b>3</b> 0					surfacing, VA other miscellan		SF or LF	-)	Removal	Repair	Encapsulate	Enclosure
1	7		(12)				,			a	7	ate	9
		Yes	No	N/A				222					
Hall outside Roon	n 203		X		Ther	mal System I	nsulation		9 In f	$t \times$	1_		
10						d							
				1									
Name of Registered Wa	ste Hauler	NJI	DEP V	Vaste H	lauler	Cubic Yards of	Name of Regis	tered Landfill		1			
그리는 사람이 아이를 하면 하면 하면 하면 하면 하면 하면 보다 보다 보다 되었다.		ID I	No.				1						
		12	695	/ 2A4	56	2	Minerva E	nterprises, Ir	1C.				
City, State	Broadway  5)  Vark, NJ 07104  ty (6)  ex  e of Monitoring Firm Hired by Building Owner  Environmental, Incorporated  t Address  3 North Church Street  State, Zip Code  Prestown, NJ 08057-1136  ct Manager for Monitoring Firm  Te  Guilardi  Date (10)  Scheduled Completi  September 14, pancy Status During Abatement (Check only one)  cility Closed/Vacated During Entire Period of Abatatement Performed Outside of Normal Facility Hother - Describe:  e of Work (Check all that apply)  sf or ≥ 3 If  160 sf or ≥ 260 If  Location of  Asbestos-Containing Material (ACM)  TO BE ABATED  IN Facility  (13)  Yes  I outside Room 203  Pyes  of Registered Waste Hauler  NSK Restoration Co., Inc.,  State  ton, NJ 07011 / Bronx, NY  pleted by  Title					Disposal Date	City, State		Comment of the Commen				
Clifton, NJ 07011	Bronx, NY					09/08/2014 - 09/14/2014	Waynesbu	rg, OH					
Completed by		,				Signature	11-	×	Date				
G. Roger Woodma	an Safety Of	ficer				11			9/4/2	014	4		

CK 1068

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

CHECK # 1068

Date of Notification (1) 09/05/2014				Name o	f Building lecki	Owner/0	Operator	(2)	0	NAMES OF THE OWNERS OF THE OWN	- 14 1	1				
Agencies Notified	Type Notification			Street A						OM SE	<del>.P -9</del>	Pil	110	: 23	3	
X EPA	× Initial			340 T	urrell Av	е			f.	v (4- )						
EPA DEP DOL	Amended Amendment				ate, Zip Co Orange		7079		<i>F</i> .	e E	LICE	451	r.G	nŪ.	-	
DOH DCA	Emergency (i justification) Cancellation	ncluaing		Name o Bill Sc	f Contact Iecki					Tel	ephone	Num	oer			
Name of Facility NAME		DI (0)		FAC	LITY INFO	RMAT	ION	-	. F . 101			L				
Name of Facility Where Residential Propert		Place (3)							of Facility School (K-	12)						
Street Address 340 Turrell Ave								×	Subchapte Other (i.e. etc.)	r 8 (Oth private a	er than & comm	K-12) ercial	build	dings,	home	es,
City (5) South Orange									re Feet	# o	Floors	Г	1000	ldg. A 0+	ge	
County (6) Essex					Code (7) USE ONLY)			Curre	nt Use (Pr	ior if bei	ng dem	olishe	d)			
Name of Monitoring Firm	Hired by Building O	wner (8)		ASCN	No.				tement Co ontractin			T				
Street Address							7.75	Addres	sant Vall	ev Wa	ıv	_				
City, State, Zip Code							City, S	tate, Zi	p Code ige, NJ		•					
Project Manager for Mor	itoring Firm		1	Γelepho	ne No.		Teleph	one No 333-9	D.	07002	Licens		-			
Start Date (10) 9/18/2014		Scheduled		pletion	Date (11)		Name	of OSF	A Monitor			_				
Occupancy Status During			4					Addres		mants	inc.	-				
Facility Closed/Vac	ated During Entire Po	eriod of Aba		ent			20-2	1 Wag	garaw Ro	d Blo	lg.35E					
Abatement Perform Other – Describe:	ed Outside of Norma	al Facility Ho	ours			_	0.0000000000000000000000000000000000000		p Code NJ 074	10						
Scope of Work (Check A	Il That Apply)				With the last of the											
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			ovat noliti				×	Min Glo	Containm i-Enclosur vebag Pro n-Exempte	e cedure	<del>-</del>				<b>a</b>	
		Is Lo	catio	nn				1401	r-Exemple	u ( ) ain	11011-1	labic		Yes Silve	ement	
Location	of	Nor	mally	4		De	scription	of						Ту	ре	
Asbestos-Containing TO BE AB/ In Facil (13)	ATED		enan	ce/		thermal surfa	taining M systems cing, VA niscellan	s insula T, or		(8	mount specify or LF)		Removal	Repair	Encapsulate	Enclosure
Baseme	ent			х		Pipe	Insula	tion		12	20 LF		X			
						-		W				-	_			
	***************************************							001100000000000000000000000000000000000								
	,															
Name of Registered Was Freehold Cartage	te Hauler		Ha	IDEP W auler ID 939		Cubic of Was 2			Name of G.R.O.			dfill				
City, State Freehold, New Jerse	ey .		1			5-15-	sal Date		City, Stat Morrisv		ennsyl	vani	a			
Completed by	-	Title	-			Silvesterro	ignature		1			Date				
Blagica Nikolova		Preside	nt					50	) ( Kol	600		09/0	)5/2	014		

State of New Jorsey  NOTIFICATION OF ASSESSTOS ABATEMENT [Purusant to NAA6 5480 and 12120]  Date of Notificial Park   Notification   Name of Building Owner/Operator (2)   Name of Contact   Telephone Number   DoA	This address of the state of th								Che	ck#	8	57	46
Agamento Notified    Bissa	1 I I I I I I I I I I I I I I I I I I I	МО		ATION C	F ASBESTOS	ABATE		20					
Agencies Notified  DEA  DEA  DEA  DEA  DEA  DEA  DEA  DE	Date of Notifies (ignature)		N	ame of E	iuliding Owner/C	Operator	(2)		-17				
Initial DEP   Announced   An	Date: 40 Times 45			1/1	UE STRI	EET	HOLDIL	16-5, 60	6C 01	- (	ران	خنلٍ	$\Omega 1$
DCH   DOH	IN SEA			94. C	1.30X	10	1		CE Liu	Cit	181	G	
DOH	DEP Amended Amended Amendment	#	_   c	ity, State	E WOOD ,	NJ	0870	0/					
Name of Facility Where Abstement Is Taking Place (3)  UNDESTREAM FACE TO THE PLACE OF STREET FOR THE P	Emergency	(including	N	lame of (	Contact			Tele	phone Numb	per			
Name of Recility Where Absterment is Talking Place (3)  UILE STREAT HELD IN POST Streat Address  Streat Address  Streat Address  Streat Address  Suprant Feat Being Age  Suprantial Streat Being demonstrate buildings homes, as a suprantial standings homes, as a suprantial standing homes, as a suprantial standing homes, as a suprantial standing standings homes, as a suprantial standings homes, as a suprantial standing homes, as a suprantial standings homes, as a suprantial standing homes, as a suprantial sta		1				1011							_
Size Address  Si	Name of Facility Where Absternent is Takir	q Place (3)		FACIL	TY INFORMAT	IUN	Type of Fa	cility (4)	nex nex				
City (5)  City (5)  City (5)  City (5)  City (5)  City (6)  City (7)  City (7)  City (7)  City (8)  County (6)  City (7)  City	VINE STREET HOLDING	5					School	d (K-12)					
County (6)  County (6)  County (7)  County (8)  County (8)  County (9)  County (19)  Coun	Street Address					WATER OF THE	Suber Other	rapter 8 (Other	er (han K-12) Loggmerdal	buildi	nos. I	ome	S.
County (6)  County (6)  County (7)  County (7)  County (8)  County (8)  Name of Monitoring Firm Hirad by Building Owner (8)  Street Address  City, State, Zip Code  City, State  City, State, Zip Code  City, State	530 WINE STICKET				#1-		eic.)	W. Willey			88		
Name of Monitoring Firm Hirad by Bullding Owner (8)  ASCM No.  Name of Abatement Contractor (9)  A. Masc Contracting Inc.  Street Address  To E Lowell Road  City, State. Zip Code  City State. Zip Code  City, State. Zip Code  City, State. Zip Code  City	CILV (5) FE1 24-6876+						8 000	,	2		S C	je 1	
A. Mac Contracting Inc.  Street Address  Sireet Address  Street Address  City, State, Zip Code  State Cate Composed Manager for Monitoring Firm  Telephone No.  201-202-5841  City Code  Name of CSRA Monitor  Omega Environmental Services Inc.  Street Address  201-202-5841  Name of CSRA Monitor  Omega Environmental Services Inc.  Street Address  201-202-5841  Name of CSRA Monitor  Omega Environmental Services Inc.  Street Address  280 Huyler Street  City, State, Zip Code  Hackensack, NJ 07606  Scope of Work (Check All That Apply)  23 of or 23 if  24 of or 230 if  25 of or 2200 if  Code Code City State, Zip Code  Hackensack, NJ 07606  Scope of Work (Check All That Apply)  State City Code City, State, Zip Code  Hackensack, NJ 07606  Scope of Work (Check All That Apply)  State City Code City, State, Zip Code  Hackensack, NJ 07606  Scope of Work (Check All That Apply)  State City Code  Hackensack, NJ 07606  Scope of Work (Check All That Apply)  State City Code  Hackensack, NJ 07606  Scope of Work (Check All That Apply)  State City, State, Zip Code  Hackensack, NJ 07606  Scope of Work (Check All That Apply)  State City Code  Hackensack, NJ 07606  Scope of Work (Check All That Apply)  State City Code  Hackensack, NJ 07606  Scope of Work (Check All That Apply)  State City Code  Non-Enamided (1) and Non-Friable Procedure	County (6)						Current Us	e (Prior if bei L/wark	ng demolishe かいなり	(d)	5	223	
City, State, Zip Code	Name of Monitoring Firm Hired by Building	Owner (8)		ASCM	No.				(9)				
Project Manager for Monitoring Firm	Street Address			J				ad .					
Scheduled Completion Date (11)	City, State, Zlp Code					Olty, Gle	State, Zip Co n Rock, N.	de J. 07452	- <del>1</del> -777				
Occupancy Statute During Abatement (Check Only One)    Facility Closed/Vacated During Entire Period of Abatement     Abatement Performed Outside of Normal Facility Hours     Cher - Describe:   Easily Hours     Cher - Describe:   Description of     Cher - Description of     Cher - Describe:   Cher - Description of     Cher - Describe:   Cher - Description of     Cher - Desc	Project Manager for Monitoring Firm		T'T	Telephon	e No.							-	
Occupancy Status During Abatement (Check Only One)  Facility Closed/Aractad During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours  Citier - Describe:  Scope of Work (Check All That Apply)  ≥ 3 of or ≥ 3 if ≥ 160 of or ≥ 280 if:  Renovation Demolition  Renovation Demolition  Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Fria	Start Date (10)/	Schedules	Cons	pletion C	late (11)								
Scope of Work (Check All That Apply)   23 of or 23 if   2460 of or 2260 if   Personal Demolition   Personal				14				onmental S	services In	c.			
Abatement Performed Outside of Normal Facility Hours  City. State, Zip Code Hackensack, NJ 07606  Scope of Work (Check All That Apply)  23 sf or 23 if 2160 sf or ≥260 lf  Renovation Demolition  Renovation Demolition  Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Pr								reet					
≥3 sf or ≥3 if   ≥160 sf or ≥260 lf   Procedure   P	Abatement Performed Outside of Nov	mel Facility I	Hours	ent 					-				
≥3 sf or ≥3 if   ≥160 sf or ≥260 lf   Persolition   Per	Scope of Work (Check All That Apply)											-	
Location of Asbestos-Containing Material (ACM) Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)  Yes No N/A  Name of Registered Waste Hauler Rovic Transport  City, State Riverdale, New Jersey 07457  Is Location Normality Used Solely by Maintenance/ Custodial Staff? (12)  Asbestos Containing Material (ACM) Aspectory Asbestos Containing Material (ACM) Aspectory Asbestos Containing Material (ACM) Aspectory Aspector	≥3 sf or ≥3 if						Mini-En Glovebi	closure ag Procedure				a	
Location of Asbestos-Conteining Material (ACM) Asbestos-Conteining Material (ACM) TO BE ARATED In Facility (13)  Yes No N/A  Nomally Used Solely by Maintenance/ Custodial Staff? (12)  Yes No N/A  PIFE  Name of Registered Waste Hauter Rovic Transport  City, State Riverdale, New Jersey 07457  Nomally Used Solely by Maintenance/ Custodial Staff? (12)  Name of Registered (ACM) Asbestos Containing Material (ACM) Asbestos Containing Mater		ls l	ocatio	ph							Abete	ement	
Name of Registered Waste Hauter Rovic Transport  City, State Riverdale, New Jersey 07457  Yes No N/A  PIPE  ADC X  Name of Registered Landfill  Cubic Yards of Waste  Usbic Yards of Waste  Cubic Yards Of Waste  Usbic Yards Of Waste  Cubic Yards Of Waste  Usbic PA Bethlehem Landfill Corp.  Carpelled by  C	Asbestos-Conteining Material (ACM) TO BE ARATED In Facility	Used Mail	i Solei ntenar odial S	ly by	Asbestos Co (i.e. therm sur	ntaining al syster facing, v	Material (AC ns insulation 'AT, or	. (	Specify	Remore			Endostre
Name of Registered Waste Hauter Rovic Transport  City, State Riverdale, New Jersey 07457  Name of Registered Landfill Hauter ID No. 20785  Disposal Date Positive Bethlehem, PA 18015  Completed by  Date Positive Completed by  Disposal Date Positive Bethlehem, PA 18015		Yes	No	N/A						_	_	6	
Rovic Transport  Hauter ID No. 20785  IESI PA Bethlehem Landfill Corp.  City, State Riverdale, New Jersey 07457  Disposal Date Porter Page 10 No. 20785  Disposal Date Bethlehem, PA 18015	Bouse Room			<u>×</u>		PIPE			220	×			
Rovic Transport  Hauter ID No. 20785  IESI PA Bethlehem Landfill Corp.  City, State Riverdale, New Jersey 07457  Disposal Date Porter Page 10 No. 20785  Disposal Date Bethlehem, PA 18015				-						-	-		-
Rovic Transport  Hauter ID No. 20785  IESI PA Bethlehem Landfill Corp.  City, State Riverdale, New Jersey 07457  Disposal Date Poste Bethlehem, PA 18015					-				, <del>, _</del> ,	-		-	-
Rovic Transport  20785  City, State Riverdale, New Jersey 07457  Completed by  Signature  Signature  Signature  Pate  Pate	Name of Registered Waste Hauter						4 H 506				1		1
Riverdale, New Jersey 07457  Riverdale, New Jersey 07457  Signature  Signature  Signature						ز .			hlehem La	andfil	Co	p.	
	Riverdale, New Jersey 07457		Hir		Disp	15/14	¢ E				7-3		
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MO 17053775240

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

Date of Notification (1) 09/02/2014		*			Building C				tzic	V	1 4	En Not to	w e by		
Agencies Notified	Type Notification			Street Ad		1 1	Jori	ar	11210	, <b>L</b>	969£ C	SEP -S	1 21	W 10	, A-
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EPA DEP	Initial Amended		1	City, State	e, Zip Coo	de			-		Λ: 11			1 7	· ^ >
DEP X DOL	Amendment		-	NEW N	IILFORI	D. N.	1.0764	6			AU	. Tin		- 0	
▼ DOH	Emergency ( justification)	including	1	Name of	Contact					Tele	nhone N	impel		Tree.	
DOH DCA	Cancellation			MATT				20 3				•			9
None of Facility Manage	Abstonant in Takin	- Diago (2)		FACIL	ITY INFO	RMATI	ON	Type	of Facility (4	4)	-				
Name of Facility Where A PRIVATE	Abatement is Taking	g Place (3)						_		2010					
Street Address									School (K-1: Subchapter		er than K-	12)			
779 WALNUT ST.									Other (i.e. p etc.)	rivate 8	commer	cial build	ings,	home	s,
City (5)			-						re Feet	# of	Floors	В	dg. A	ge	
NEW MILFORD N	J.							2500	)	1 2	2		89		
County (6)				County C					ent Use (Prid	or if bei	ng demoli	ished)			
BERGEN				(STATE U	SE ONLY)			N/A							
Name of Monitoring Firm	Hired by Building (	Owner (8)		ASCM	No.				tement Cor						
N/A									QUALITY	- CO.	LLC.				
Street Address								Addre AN O	ss RDEN PL						
City, State, Zip Code		(C)					City, S	state, Z	ip Code		-				
ony, onato, 2.p 0000									SACK NJ	1.0760	11				
Project Manager for Mor	nitoring Firm		T	Telephon	ne No.		100000000000000000000000000000000000000	none N		1-00-10-10	License			W. F. S.	F- 100
	· 14							708-4			01135	P (4 11	1		
Start Date (10)		Scheduled		npletion D	Date (11)				HA Monitor	LING					a 15
09/4/2014		09/06/20							ALITYCA	LINC	•	100000000000000000000000000000000000000			_
Occupancy Status Durin	g Abatement (Chec	k Only One	)				100000000000000000000000000000000000000	Addre	ss T 38 STR	FET					
Facility Closed/Vac Abatement Perform	ated During Entire I	Period of Al	aten	nent					ip Code						
Other – Describe:	led Outside of North	iai i aciity i	10013	'.				VY. 1							
Scope of Work (Check A	All That Apply)						-							-	
23 sf or ≥3 lf	71.77	X Re	nova	tion			2	Fu	II Containm	ent with	Negative	e Pressu	re		
≥160 sf or ≥260 lf			molit					Mi	ni-Enclosure	9				15	
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Location	n of	No	ormal	ly 1		De	scription	n of					Ту	pe	т—
Asbestos-Containing	Material (ACM)	Used	Sole tena			tos Con	taining N	Materia	I (ACM)		mount Specify	77		m	т
TO BE AB		2000000000	dial S	Staff?	(I.e.		system		ation,		or LF)	Removal	Repair	caps	많
(13)			(12)			other	miscella	neous)				ova	2	Encapsulate	Enclosure
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Name of Desistered Mis	eta Llaulor		IN	JDEP W	lacto	Cubic	Yards		Name of	Registe	ered Land	1611		L	
Name of Registered Wa			F	lauler ID		of Wa	aste				NTERP		VC.		
TRI STATE ASSOC	. INC.		1	9551	- 11	TBI			1						
City, State						Dispo	sal Date	•	City, Stat		RG OH	IIO			
BRONX NY.	-	734-						n	14/11/1	7		Date			
Completed by CARLOS ESQUIVE	L ·	MANA	GF	R		1	Signatur	Pa	much	ny		09/02/2	2014		
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ASB-41 (R-06-08)						/	* Do n	ot use	this form fo	r asbes	tos licens	sure exer	npted	activi	ities.

# State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7)

CX-624

9814 SEP -9 BH 10: 27 Name of Building Owner / Operator (2) Date of Notice 08/27/14 Type Notification Miriam McCov & LICENCIKG Street Address Agencies Notified 13 Columbus Avenue **EPA Emergency Notification** X City, State & Zip Code X DEP Initial Notification X DOL Amended Notification Montclair, NJ 07042 Name of Contact Telephone Number X DOH Cancellation DCA Miriam Mccoy UTU. **FACILITY INFORMATION** Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) Residence School (K-12) Subchapter 8 (Other than K-12) X Other (i.e., private & commercial buildings, homes, etc. 13 Columbus Avenue Square Feet # of Floors Bldg. Age 60+ County (6) County Code (7) 2.200 City (5) Current Use (Prior if being demolished) Montclair Essex Residence Name of Abatement Contractor (9) ASCM No. Name of Monitoring Firm Hired by Building Owner (8) Global Abatement Services, LLC Environmental Tactics, Inc. Street Address Street Address 64 Broad Street 443 Schoolhouse Road City, State & Zip Code City, State & Zip Code Matawan, NJ 07747 Monroe Township, NJ 08831 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number 00714 732-290-2217 732-605-9062 Tom Geiger Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 8/28/14 Global Abatement Services, LLC Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 443 Schoolhouse Road City, State & Zip Code Abatement Performed Outside of Normal Facility Hours -Monroe Township, NJ 08831 Describe: Area Isolated During Abatement X Other - Describe: Scope of Work (Check all that apply) Full Containment with Negative Pressure Demolition X Renovation Large Project Mini-Enclosure Quantity is ≥ 3 SF or ≥ 3 LF ACM X Glovebag Procedure Quantity is ≥ 160 SF or ≥ 260 LF ACM Other: Non-friable Description of Amount Abatement Type Location of Is Location Asbestos-Containing Normally Used Asbestos-Containing (Specify (Specify: Removal, Repair, Encapsulation Square Feet Material (ACM) Solely by Material (ACM) or Enclosure) (i.e., thermal systems TO BE ABATED Maintenance or or Linear Feet) insulation, surfacing, VAT Custodial Staff? in Facility or other miscellaneous) (13)(12)Removal 30 LF TSI N/A Basement Removal 20 SF TSI Boiler N/A Basement Cu. Yds. of Waste Name of Registered Landfill NJDEP Waste Hauler ID # Name of Registered Waste Hauler TRRF Freehold Cartage 18693 5 City, State Disposal Date City, State Tullytown, Pa 8/29/14 Freehold, NJ Date Signature Completed By (Print or Type) Title 8/27/14 Dominick Tringali Dominick Tringali Project Manager

# State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) 2014 SEP -9 AM 10: 05 (60-7)

Agencies Notified  X EPA  X DEP				ergy, Inc.	AL				
X DEP		jency Notification	Street Address		å Li	CENTING	NUL		
	( E) 250-000-004	Notification	City, State &						
X DOL		ded Notification	Houston, T Name of Con					Telephon	e Number
DCA	Julio	, ilation	Neil MacInt					, , -,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-	
			FACILITY	INFORMA	ATION			X-5	
Name of Facility	Where Abatemer	nt is Taking Pla	ce (3)	Туре	e of Facility (4)				
-	Power Plant (1	former JCP&	L Power Plant)		School (K-12)		40)		
Street Address	Lower	Main Street			Subchapter 8 ( Other (i.e., priv			inas home	es etc
	Lower	Maili Street			are Feet	# of Floors	STOIGH DUNG	Bldg. Age	
City (5)		County (6)	County Code (7		250000	7			0 +/-
South Amb	ру	Middlesex			ent Use (Prior i	f being demo	olished)		
					ver Plant				
	ng Firm Hired by tal Tactics, In		er (8) ASCI 0045	Glo	ne of Abatemen bal Abateme				
Street Address 64 Broad St	root				et Address Schoolhous	e Poad			
City, State & Zip		<del> </del>			State & Zip Co				
Matawan, N.	J		Service a result	Moi	nroe Townsh	ip, NJ 0883			
Project Manager Tom Geiger	for Monitoring Fi		Telephone Numbe 732-290-2217		phone Number -605-9062		License	Number 0071	4
Scheduled Start 09/04			pletion Date (11) 09/04/14	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ne of OSHA Mo bal Abateme		, LLC		
Occupancy Statu  X Facility C			y one) riod of Abatemen		et Address Schoolhous	e Road			
	nt Performed Ou	1 (37)			, State & Zip Co				
Describe Other - D				Moi	nroe Townsh	ip, NJ 0883	31		
Scope of Work (0		plv)	v-u-u-u-u-u-u-u-u-u-u-u-u-u-u-u-u-u-u-u						
Demolitic		X Renovation	on		Full Cor	ntainment wit	h Negative	Pressure	
Large Pro					X Mini-En				
	is ≥ 3 SF or ≥ 3					ag Procedur		\ \/aa	_
	is ≥ 160 SF or ≥ Location of	260 LF ACM	Is Location		escription of	Wet Metho			
	estos-Containing		Normally Used		estos-Containing		(Specify		ify: Removal
N	faterial (ACM)		Solely by	M	aterial (ACM)	Sq	uare Feet	or	Repair,
I	O BE ABATED		Maintenance or		thermal system	100	inear Feet		psulation or
	in Facility (13)		Custodial Staff? (12)		on, surfacing, V er miscellaneou			=	nclosure)
Com	pany Vehicle	#1	Yes	TSI/S	urfacing/Mis	c.	300 SF	Deco	ntaminatio
	onal Vehicle		No		urfacing/Mis		300 SF	deco	ntaminatio
Name of Registe		er II	NJDEP Waste Ha		Cu. Yds. of W		me of Reg	istered Lar	ndfill
Freehold (	Carting		1869:	3	30		ROWS	and the second	
City, State Trenton, No.					Disposal Date 09/05/		y, State orrisville,	Pa	
Completed By (P	rint or Type)	Title Manage	r		Signature  Dominick				Date 09/3/14