(1/#2	932	N			OF ASBE						-,				
Date of Notification (1 September 19, 2				Name of Colgate	Building (e Palmo	Owner/O	perator ((2) [3 SEP 20	ħ.					
Agencies Notified	Type Notification			Street Ac 909 Riv	ddress ver Roa	d				1.77	ি: উত্ত				
DEP DOL	Initial Amended Amendment	#			te, Zip Co away, N		54		F LICEN	0 11	- 44				
▼ DOH	Emergency (including		Name of David E	Contact					Telei	nhone Nii	mhor			
DCA	Cancellation				LITY INFO	RMATI	ON								
Name of Facility Whe Colgate Palmoliv	re Abatement is Takin	g Place (3)	1 AOIL	-111 1141 0	ZKWATT			of Facility (4) School (K-12)		12				
Street Address				14					Subchapter 8	(Other					12023
909 River Road									Other (i.e. pri etc.)				(855)		es,
City (5) Piscataway									are Feet ,000	# of 1	Floors	11	3ldg. A 30 ye		
County (6) Middlesex	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			County C	Code (7) ISE ONLY)				ent Use (Prior ninistration		7				
Name of Monitoring F EMI	irm Hired by Building	Owner (8)		ASCM	l No.		2475-241 G-5-4000		atement Contr es, LLC	actor (9)				
Street Address 34 E. Germantov	vn Pike			1	-		Street 407 V		ess ncoln High	way,	Suite 50	00			
City, State, Zip Code E. Norriton, PA									Zip Code 19341						
Project Manager for M Ray Giordano	10.000	1 1 1	T	Telephor	ne No. 19-5369		Teleph	one N	lo.		License I	No.			
Start Date (10) 9/30/13		Schedule		mpletion [0.855.250.6	of OS	HA Monitor						
	uring Abatement (Chec				- 164		Street	Addre				-			
Facility Closed/\(\times\) Abatement Performance Other – Describe	/acated During Entire I prmed Outside of Norm e:	Period of Anal Facility	Abaten	nent s			City, S	tate, Z	e 130 North Zip Code Ison, NJ 08						
Scope of Work (Chec	k All That Apply)						0								
≥3 sf or ≥3 lf ≥160 sf or ≥260	If	-	Renova Demoli				×	Mi GI	ull Containmer ini-Enclosure ovebag Proce	dure	-				
		T -	40 392					J NO	on-Exempted	(*) and	Non-Fria	ble Pro		emen	ıt
	· Francisco Fran		Locat Vorma			D-						Ž.		уре	
Asbestos-Contain TO BE In F	tion of ing Material (ACM) <u>ABATED</u> acility 13)	Use Ma	d Sole intena todial ((12)	ely by nce/		tos Cont thermal surfa	scription taining M systems cing, VA niscellan	fateria s insul T, or		(S	nount pecify or LF)	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A						- 44	0.05		_	e	-
Labora	tory 201		Х			aborat	ory hoo	od IIr	ner	11	0 SF	x			
			-												
Name of Registered Veolia ES Technic			H	NJDEP W	No.	of Wa	Yards ste		Name of R CWM Ch						
City, State	our conduction		N	IJD0806	031369	1 Dispos	sal Date		City, State						
Flanders, NJ						TBD			Model Ci	ity, N`	Y				
Completed by		Title				5	Signature	A .	0 1	Λ		ate			
Jack Bally		Sr. P	rojec	t Manag	ger		ful	CK.	15el	ly (200 9	/19/1	3		
ASB-41 (R-06-08)							Do no	ot use	this form for a	() asbesto	s licensu	re exe	npted	activ	ities.

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

D&S Proj. #: 2013-340	-	£3.			8:60 a	nd 12:120)	M	Dept. of Heal		or Serv	ices		
Date of Notification (1) [0 9 /[1 16]/ 1 3	Ban	of Buildin m reside		Operator (2)		2113 SEP 2	0	19 16 L	gnature)]Time	10:3	74	M	
Agencies Notified Type Notification EPA Initial DEP Amended Amendment #:	Street 1 cr	Address estwood State, Zip	lane	100	ALINE TO S	a in	Palesy			- 1 - 1			
DOIL Emergency (including justification) DCA Cancellation	Name	ARIC, N of Contac um, Shir	t	5				Telephone	Number		-		
			FACIL	ITY INFORMA	MOITA								
Name of facility where abatement is Baum, Shirley	taking place ((3)	27.0	***************************************	i		Тур	of Facility (4) School Subchar) (K - 12) oter 8 (Ot	hor tha	ın K-1	2)	
Street Address	710				W.t	1		Other (F		mmerc			
1 crestwood lane							Śq		of Floor		Bldg	, Age	ð
City (5)	County (6)				ty Code (7) use only)	Cı	irrent Use (Pri	or if being	demo	lished)	<u>. </u>
CLARK Name of Monitoring Firm Hired by B	union	11		ASCM No.	- 11	Name of Abateme	ant Contr	actor (9)		*****		-	
Mache of Monthoffing Latter med by S	iog. Omini (c	;	1) (COIN 140.		D & S RESTO			<u>.</u>				
Street Address						Street Address 20 California	Ave.		101 - 101		.,		
City, State, Zip Code						Paterson, NJ	07503						
Project Manager for Monitoring Firm	,	Pho	ne Numbe) ,		973-345-80	20		License 0	Numbe 1169	er -		,
Start Date (10)	Sched. C	ompletion	Date (11)		Name of OSHA N D & S Resto		inc.					
09/18/13	09/30/1					Street Address	· .						
Occupancy Status During Abatemen Facility closed/vacated during Abatement performed outside Describe:	entire period of normal fac	of abatem			_	20 California City, State, Zip Co Paterson, NJ	ode	0		- to u			
Other-Describe: NORMAL If Scope of Work (check all that apply						raterson, 193		Containment w	Inecative	nraesi	ire		
Scope of votal (client all that apply >3 sf or >3 if □ ≥160 sf or ≥260 if	Renovation Demolition	•	6				☐ Minl- ☑ Glov	enclosure ebag procedu -Exempted (*)	ra	25		dure	
Location of asbestos-containing material (acm) to be abated in facility (13)	is location n by maintens staff(12)	ince/custo	odial			sbestos-containin	g	Amount (Specify S LF)	For	Remov	R e p e	Enos	Ecol
4	195	No	N/A	DIDE VAIO	CTY A FIN	· ·		126 l ft		8	<u>-</u>	p	-
BASEMENT		X		PIPE INST	ULA I	UN	divinity in	120-111				片	怡
,		ROSCO - ESC. T.	and the same			ere Filtre - Addison o		93/7					
						- Desirable			- CONT.			무	
Registered Waste Hauler	NJDEF	l-Iguler II	D# C	ublo Yards o	Waste	Name of Regist	ered Lar	ndfill	W	-11-		Ц	
D & S RESTORATION, INC.	1350	6	Disposal I	2 yds Date	:	City, State	VN, RE	SOURCE RI	ECOVE	RY		*****	
PATERSON, NJ 07503 Completed by (Print or Type)	Title		09/19/1	Signature	<u></u>	TULLYTO	WN, PA		Date		1187, , 1818	nuulta	
BOGDAN JOLDZIC	PRESIDE * Do not use		for asbest	os.ficensure	akamale Mamaka	id activities.			09/16	/2013		and the same	

State of NJ

Notification of Asbestos Abatement (Pursuant to NJAC 8:60 and 12:120) D&S Proj. #: 2013-340

()(#N56	184				_ 2	[13 500		100			
Date of Notification (1)	Name of B	uilding Owner/C	Operator (2)		Par	13 SEP 20	AM In: 30				
0 9 /1 16/1 3	Baum re	esidence			ν.	F. 4	- 3.33				
Agencies Notified Type Notification	Street Add	ress				à LIGENS	11111				
DEP Amended		vood lane				7/36/	1.(3				
Amendment	#: City, State	, Zip Code									
DOL Emergenc		K, NJ 07066				Telephon	e Number			_	
DOH (including justification	Name of C	ontact				Telephon	- Turnber				
DCA Cancellati	on Baum,	Shirley									
		FACILIT	TY INFORMATI	ON		,					
Name of facility where abatemen	it is taking place (3)					Type of Facility	(4) ol (K - 12)				
					1		napter 8 (Oth	er tha	n K-1	2)	
Baum, Shirley						☑ Other	(Private/Cor	nmer		-/	
Street Address					1		/Homes, etc	_	DId	Λα.	
1 crestwood lane				= -	0 1 (7)	Square Feet	# of Floors		Diu	g. Age	7
City (5)	County (6)			0070	Code (7) use only)	Current Use (F	Prior if being	demo	lished	i)	_
CLARK	union				,	,					
Name of Monitoring Firm Hired to		1	ASCM No.	N	ame of Abatement	Contractor (9)					
					D & S RESTOR	ATION, INC.					
Street Address				S	treet Address						
				_	20 California A	ve.	_	_			
City, State, Zip Code	V			Ci	ty, State, Zip Code	1502					
		DI Namba		- -	Paterson, NJ 07	7503	License !	Numb	er		
Project Manager for Monitoring F	irm	Phone Number		- 11''	973-345-8020			169		- 1	
		lation Data (11)		- 1	lame of OSHA Mor	nitor					
Start Date (10)	Sched, Comp	letion Date (11)			D & S Restorat	ion, Inc.					
09/18/13	09/30/13			_ S	Street Address						
Occupancy Status During Abate					20 California A			-	_		
Facility closed/vacated du	side of normal facility l	nours-		_	60						
Other-Describe: NORMA	L HOURS			- 11	Paterson, NJ 0		···/pagativa	proce	ure		
Scope of Work (check all that a					H	Full Containment	willegative	press	uie		
	Renovation				☒	Glovebag proces	dure				
≥160 sf or ≥260 lf	Demolition					Non-Exempted	(*) and Non-	riable	Proc	E	2000
Location of	Is location norm by maintenance	ally used solely /custodial	1		bestos-containing	Amount		e m	e	n	E n
asbestos-containing material (acm) to be	staff(12)		material (A		Destos-containing	(Specify LF)	SF or	0	p a	a	C
abated in facility (13)	Yes No	o N/A	77 1 CO. 180 - 190 CO. 180 CO.			[[,		v e	i r_	р	
BASEMENT			PIPE INSUI	LATIC	N	126 l ft		\boxtimes			10
BASEMENT									닏	片	뷰
								뷰	片	H	#
1.0 1.00								ዙ	H	ዙ	卄
			1	1	Name of Registere	ad Landfill		.			1
Registered Waste Hauler	NJDEP Ha NC. 13506	uioi ibii	ubic Yards of V 2 yds	vaste	TULLYTOWN	, RESOURCE	RECOVE	RY_			
D & S RESTORATION, II	15500	Disposal D			City, State						
PATERSON, NJ 07503		09/19/1	3		TULLYTOW	N, PA	75				
Completed by (Print or Type)	Title		Signature				09/16	/201	3		
BOGDAN JOLDZIC	PRESIDENT		as licensure eve	emnter	d activities		1 09/10	201.	-		
ASB-41	* Do not use this	torm for aspest	us licensure exi	emple	a doubled.						

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

D&S Proj. #: 2013-341

in Chock							2000				-	
Date of Notification (1)	Name	of Building Ow	ner/Operator (2)			2813 SE	P 20 .	AH In:	: 30		
0 9 / 1 6 / 1 3 Agencies Notified Type Notification		RLENE TOD	D							×'.>		
EPA Initial	110000	Address					£1	ICEN!	4711	121		
DEP Amended	1	WESTOVER	RAVENUE					TOTAL	11:13			_
Amendment #:		EST CALDW	ELL NIO700	16			82					
☐ Emergency (including		of Contact	ELL, NJ 0700	J0			Telephon	e Number				
justification)	M	ARLENE TO	ממ					-				
Cancellation	IVI.		CILITY INFORM	MATION			_ -					
Name of facility where abatement is	s taking place (SILIT III OIG			Тур	e of Facility	(4)			-	
	taking place (.07					=	ol (K - 12)				
MARLENE TODD						-	100	apter 8 (C (Private/C			12)	
Street Address							Bldgs.	/Homes, e	etc.			
120 WESTOVER AVENUE		0)		T .	0 1 (7)	- So	quare Feet	# of Floo	rs	Bla	g. Ag	а
City (5)	County (6)		0.000	ty Code (7) use only)		urrent Use (P	rior if bein	a demo	olishe	d)	
WEST CALDWELL	ESSEX	ζ.		1								
Name of Monitoring Firm Hired by	Bldg. Owner (8	3)	ASCM No.	, II	Name of Abatem	ent Cont	ractor (9)					
= 14					D & S REST	ORATIO	ON, INC.					
Street Address					Street Address							
O'll Club The Code					20 California City, State, Zip Co				-			_
City, State, Zip Code					Paterson, N.							1
Project Manager for Monitoring Firm	1	Phone Nur	nber		Telephone Numb			License		er		
					973-345-80			()1169			
Start Date (10)	Sched. C	ompletion Date	(11)		Name of OSHA I D & S Resto		Inc					
09/26/13	10/10/1	3			Street Address	nation,	inc.					
Occupancy Status During Abateme	nt (Check only	one)			20 California	a Avenu	e e					
Facility closed/vacated during	entire period	of abatement.		11	City, State, Zip C	ode						Albeit Lang
Abatement performed outside Describe:		nity nours-			D-4 N	1 07502						
Other-Describe: NORMAL I					Paterson, N		Containment	w/nogativ	o press	ure		_
Scope of Work (check all that appl						=	-enclosure	winegativ	e piess	ure		
	Renovation						ebag proced		. falabla	nroo	oduro	
≥160 sf or ≥260 lf	Demolition	ormally used so	lelv			☐ Non	-Exempted (*) and Nor	R	R	E	E
Location of asbestos-containing	by maintena	nce/custodial		otion of as	sbestos-containir	ng	Amount	0.5	e m	e p	n c	E n
material (acm) to be abated in facility (13)	staff(12)		— materia	al (ACM)			(Specify LF)	SF or	0	a	а	C L
abated in facility (13)	Yes	No N/A							е	r	р	
BASEMENT		X	PIPE INS	SULATI	ON		105 L FT			님	H	H
			_						┽┼	H	H	H
			=						卅	H	H	旨
2.0			#						一一			
Registered Waste Hauler		Hauler ID#	Cubic Yards	of Waste	Name of Regis	tered Lar	ndfill	nco	D.7.	1	and a second	
D & S RESTORATION, INC		5	1 YD		TULLYTOV	WN, RE	SOURCE F	ECOVE	KY_			
City, State		Dispos 09/2			City, State TULLYTO	WN. PA						
PATERSON, NJ 07503 Completed by (Print or Type)	Title		Signature		1 -1000110	,	10	Date				e -
BOGDAN JOLDZIC	PRESIDE				E.			09/1	6/13			
ASB-41	* Do not use t	this form for asb	estos licensure	exempte	d activities.							

XXX158	NO		ATION	te of New Jersey OF ASBESTOS o NJAC 8:60 and	ABATEN								
Date of Notification (1)		100000	ame of	Building Owner/C 3.	Operator ((2)	SII SEP	, 50	EMIN.	50			
Agencies Notified Type Notification		100000	treet Ad 000 H	dress ADLEY ROA	D		J.,						
DEP Amended Amendment #_	1			e, Zip Code I PLAINFIEL[D, NJ. 0	7080	~ L	CEN					
Emergency (inc justification) DCA Emergency (inc justification) Cancellation	cluding	2	ame of	Contact An	IANO	25		Tele	ohone Nu	mber			
				ITY INFORMAT	ION		7 m. 7	¥.		•-			
Name of Facility Where Abatement is Taking F	Place (3)			T.		s	of Facility (4 chool (K-12	2)					
Street Address 1389 PTE 202	N	207	4			X O	ubchapter a other (i.e. pr tc.)	8 (Other	r than K-1 commerc	:ial build	ings, l	nome	s,
1389 RTE 202 City (5) NESHANIC SI	TAT	-, 1	, 1			Square		# of	Floors		dg. A		100
County (6)	7.77		County C	Code (7)		Currer	t Use (Prio	or if bein	g demolis	shed)			<u>F</u>
Name of Monitoring Firm Hired by Building Ov	vner (8)		ASCM			of Abat	ement Con	tractor (9)			_	
ENVIRONMENTAL TACTICS			004	15		QUE S	YSTEMS	S OF A	MERIC	A			
Street Address 64 BROAD STREET				5±0	396	WHITE	EHEAD A	VE.					
City, State, Zip Code MATAWAN, NJ 07747						tate, Zij TH RI	p Code VER, NJ	08882	2				
Project Manager for Monitoring Firm TOM GEIGER			elephor	ne No. 92-2217	110000000000000000000000000000000000000	none No 432-83			License 011				
	Schedule	/ .	pletion I	Date (11)			A Monitor	S OF A	MERIC	A			
Occupancy Status During Abatement (Check		e)				Addres WHITI	s EHEAD <i>A</i>	AVE.					
Facility Closed/Vacated During Entire Per Abatement Performed Outside of Normal Other – Describe:	I Facility		ent		City, S	State, Zi			2			42	
Scope of Work (Check All That Apply)					1 ====		•						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	R	enovat emoliti	ion on			Min Glo	Containme i-Enclosure vebag Prod -Exempted	e cedure				Э	
		Location									Abate	-	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	lormall d Solel intenar odial S (12)	y by nce/	Asbestos Cor (i.e. therma surf		Material s insula AT, or		(S	mount specify or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A			1.				1		Ö	L
outside		X		TRANS.	16	P. P.		50	LF	X			
							10.00						
Name of Pagistared Wasta Hauler		l N	JDEP V	Vaste Cubi	ic Yards		Name of	Registe	ered Land	fill			
Name of Registered Waste Hauler WASTE MANAGEMENT		H	auler ID 1125		/aste	-	GROW						
City, State ELIZABETH, NJ				Disp	osal Date	1/3	City, Stat MORR		E, PA	55			
Completed by CAROL RAIMO	Title OFF	ICE M	IGR.		Signatur	e	La	in	2	Date 9/	121	//3	3

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

NO CV			NOTIFIC (I	CATION OF ASB Pursuant to N.J./	ESTOS ABATEI A.C. 7:26-2.12) Name of Buildin Buckeye Partne Street Address				3 %			
Date of Notification (1)					Name of Buildin	g Owner/O	perator (2)	3 SED	20.	2		
September 17, 2013					Buckeye Partne	rs L.P.		021	CU A	Min.	i 9-	
Agencies Notified		Notification 7	Гуре		Street Address		40.00				. LC	
(X) EPA () DEP (X) DOL (X) DOH () DCA		(x) Initial Not () Amended () Cancelle	Certification		9999 Hamilton I City, State, Zip Breinigsville, PA Name of Contact	<u>Code</u> \ 18031	: [Tal Nur		tig.	÷ i	
() DCA					Joseph Votta							
				FACILITY INF	ORMATION	(4)						
Name of Facility Where Ab		aking Place (3	<u>))</u>		Type of Facility () School (K-12) () Subchapter	2)	an K-12)					
Buckeye - Perth Amboy To	erminal				(X) Other (i.e. p	rivate & co	mmercial bldg	s., home	es, etc.			
Street Address					10 1 50.1							
380 Maurer Road			County Co	rdo (7)	Sq. Feet 450	0 # of	Floors_I	- 93				1
<u>City (5)</u>	County (6)		(State Use		Bldg. Age5	0+ vears						1
Perth Amboy	Middlesex		•		Current Use (pr	ior if being						
Name of Monitoring Firm H	lired by Bldg.	Owner (8)	ASCM No				Name of Cor	ntractor (9)			-
							Brandenburg	Industri	al Servi	ce Com	oany	
NA Street Address					Street Address							
Oli Cot / Additions					2217 Spillman	Drive						
City Chata Zin Codo					City State, Zip							
City, State, Zip Code							10015					
					Bethlehem, Per Telephone Nun		18015	License	Numbe	er	-	
Project Manager for Monit	oring Firm	Telephone I	Number		relephone Num	ilbei		LIOUTION	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
					(610) 691-1800							
Scheduled Start Date (10) October 1, 2013 (Demo O	nly)	Scheduled October 11,	Completion 2013 (Dem	Date (11) o Only)	Name of OSHA	Monitor						
Occupancy Status During (X) Facility Closed/Vacate	d During Enti	re Period of A	batement		Street Address							
() Abatement Performed	Outside of No	offilal Facility	riouis -		City, State, Zip	Code						
Describe												
Other - Demo Notification												
Source of Work (Check all (X) Demolition () Rend () Large Proj. (>160 SF of	ovation or >260 LF A0	CM)()SMP	roj. (>25<16	0 SF or >10 <26			oj. (<25 SF or	<10 LF /	ACM)			
() Full Containment with Location of Asbestos-	Negative Pre	essure () ation Normall	Mini-Enclos	Description of	vebag Procedure ACM (i.e.	Amount ((Specify SF or	LF)	Abater	ment Ty	<u>oe</u>	
Containing Material (ACM) in Solely	by Maint./Cu	stodial	thermal system	ns insulation,							
Facility (13)	Staff?	(12) NO	NA	surfacing, VAT miscell.)	, or other				Rem.	Rep.	Encap E	<u>Enclose</u>
	YES	INO	T TWA	miscon.y								
Name of Reg. Waste Hau	ler	NJDEP Wa	ste Hauler I	D#	Cubic Yards of	f Waste		Name	of Reg.	Landfill		
Name of Neg. Waste Hau	IICI	1,000		-								
City, State							Disp. Date		2	City, Sta	<u>te</u>	
Completed by (Print or Ty	/pe)	Title			Signature	2	-	Date				
Eric Schreiner		Project Ma	nager		ENLI	Chier		Septer	mber 17	, 2013		
Mail to: NJDEP-DSHW 401 E. State St Trenton, NJ 08	t., PO 414	Telephone	609-984-66	20	1/1/			C:\WO		OCSA	SBESTO	os

Pept of Health & Senior Services	NO	TIFICA (Purs	TION OF	of New Jetsey ASBESTOS A IJAC 8:60 and	BATEME	ENT	50.		CHEC	K#:_	77	60	ラ
9/16/13 10:34/1/1		N	ame of Bu	ilding OwnedO	perator (2)	78136	DEF	20 AM	10: 3			Í
9/16/13				BERICK	Ma	NAGOW	on!		741	Ų.,.	<u>Q</u>		\dashv
Agencies Notified Type Notification		S	reet Addi	381 PA	ار عد	Ave So	SHTUS		5th (coor	. a.			-
D EPA D Initial D DEP. D Amended		C		Zip Code				 (.	11-11-1		t-communication in the communication in the communi		
Amendment Z Emergency	including	-	ame of C	New yo	uc ,	<u> </u>	10011		thona Mumb	wit "		7	-
IN OOH justification)		1 14	*	1)	ase		į	F		- 4			
□ DCA □ Cancellation	richia)		FACILI	Y INFORMATI		U		↑			-		-
Name of Facility Where Abaltament is Takin	g Place (3)					Type of Fac							ı
Boscon House				-		Subuhi	l (K-12) Poter 6 (C	Other	than K-12)				Ī
Street Address					1	12 Other	(i.e. priva	ate &	commercial	buildin	gs, hı	mes,	- September
	MERL .					etc.) Sougre Fee	4	# of	Floors	I Bld	a Ag	ě	_
Gity (S)						1 200	Ì		1	į	+5	Ò	45
County (6)	roma		County Co			Current Us	e (Prior i	i beln	demolishe	d)			
1705013		16	STATE US				OMM						
Name of Monitoring Firm Hired by Building	Owner (8)		ASCM	No.		of Abateme AC Contracti		ictor (∄)				
Street Address	Control Manager					Address Lowell Road			 		-J	A-0200	
City, State, Zip Code		-			City, 5	State, Zip Co Rock, NJ 07	de 7452	-			-		
Project Manager for Monitoring Firm				<u></u>	-	hone No.	404		Licenso No				
Project was layer for resolutioning 1 series			Teleph	one No.		1-262-5841			00156				_
Start Date (10) 9 / 17 / 13	Schedule		pletion D	ate (11)	Name On	of OSHA M rega Environ	onitor merkal S	Servic	as Inc.				_
Occupancy Status During Abatement (Ch El Facility Glosed/Vacated During Entire	Pariod of At	ateme	ent		280	t Address Huyer Stree	t						
Absternent Performed Cutside of Nor Other - Describe:	mal Facility h	lours			City.	State, Zip Cr kensack, NJ	ode 07606						
Scope of Work (Check All That Apply)					•					*			
☑ 23 sior 23 if □ ≥160 sior ≥260 if		movat moliti		6)		E Full Con E Mini-End E Gloveba D Non-Exe	dosure a Proces	dure	Negative Pr			200100	
	l le	Locat	110				Ī			1	Abak	meni Ips	
Location of	P	Vorma d Sole	lly		Description	on of	1	-14			<u>.,</u>		
Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13)	Me	Intena todial ((12)	nce/ Staff?	(j.e. then	containing mai syster macing, v or miscell		CM)	(Amount Specify For LF)	Rвпюуя!	Repeir	Encapadaba	Enchrane
	Yes	No	N/A						n .	+	1		-
Boncon House	14		<u> </u>			veapoù			80 LF	1	-	-	-
BOILDE HOUSE	1	-	+-	Ru.	eechi	U <u>K</u>			0 LF	+	-	-	
		-	+	!						Ì	İ		L
Name of Registered Waste Hauler		- 1	LIDEP W	aste Cu	bic Yards	N	ame of 8	tegist	ered Landfill	ani anan r			
Яшчіс тіальрої.		110	Hauler ID 20785	no. joit	Naste 3				hem Landfill	Com			
City, State, Zip Code Riverdate, NJ 07457				Dis	posal Da		ify, State Bothleher	n, PA	Code 16015				_1000-
Completed by Joseph Vocaluro	Tide Open	ations			Signat	ure .	rates			9//	6/13		
						7 . 00	- WILLIAM			-	. 4	- Onto	-

Check# 9821

Date of Notification (1)				Name o	f Building C	Owner/C	perator	(2)		11.					
9-17-13					in Mana	ageme	ent C	orp.	2913	SEP 2	O AMIC	: 3	9		
Agencies Notified	Type Notification				Address US Hi	ghway	7 22 1	West		* 4 7	7.1.1	- 1 1 to			
EPA DEP DOL	☐ Initial ☐ Amended Amendment #				ate, Zip Coo		.12 ,	N.T. 0	,		EHELLIC	-			
K DOL	☐ Emergency (ir		-		th Plan	Inile	era, i	NJ U	0.7060	Tele	phone Num	her			
DOH □ DCA -	justification) □ Cancellation				ry O'Bi	rien				(eac	torione ivuii	11./		•	
D DOA 1	- Cancellation				ILITY INFO		ON		X005-5				A 10 10 10 10 10 10 10 10 10 10 10 10 10		-
Name of Facility Where Capital Plaza									of Facility School (K-						1
Street Address 1500 N. Olden					,,			□ ⊠	Subchapte	er 8 (Othe	er than K-12 commercia		dings	, hom	es,
City (5) Ewing								Squa	are Feet	# of 1	Floors		3ldg. A	\ge rs.	
County (6)				County	Code (7)			Curre	ent Use (Pr	ior if beir	ng demolish				
Mercer				(STATÉ	USE ONLY)			vac	cant				2		
Name of Monitoring Firm	Hired by Building O	wner (8)		ASC	M No.		0.000		atement Co		Section 10	_	T		
Street Address							Street			TOIME	ental Co	J.,	THC	•	
411 Southgate	e Court, Sui	te E					923	Hav	ws Aven	nue					
City, State, Zip Code Mickleton, No.	J 08056						2-2-33		Zip Code	A 194	.01				
Project Manager for Mor Jack Carney	nitoring Firm			Telepho	one No.	20	Teleph		io. 9–9920		License No				
Start Date (10)		Schedule			Date (11)	50	content to the		HA Monitor		0037				
10/1/13		10/1	1/13							ronmei	ntal Co	.,]	nc.		
Occupancy Status Durin							Street 923	100000000000000000000000000000000000000	ss S Aveni	110					
X Facility Closed/Vac □ Abatement Perform	ated During Entire Pe led Outside of Norma	eriod of A al Facility	Abatem Hours	ent					Zip Code	ue					
☐ Other – Describe: _						_			own, P	A 1940	01				
Scope of Work (Check A	II That Apply)														
□ ≥3 sf or ≥3 lf 2□ ≥160 sf or ≥260 lf		DX R □ D	enova emoliti				[36]	≹ Min	ni-Enclosur ovebag Pro	re ocedure	Negative Pr			·0	
		Ι .			T			£ 140	ni-Exemple	a () and	NOIH HADI	- 10	TOTAL CONTRACT	emen	t
Location	o of		Locati Iormall			Des	scription	of					Ту	pe	
Asbestos-Containing	Material (ACM)		d Solel intenar			os Cont	aining M	//ateria	I (ACM)	117	nount	_		Щ	m
TO BE AB. In Facil		2503	odial S		(i.e. 1		systems cing, VA		ation,		pecify or LF)	Remova	Repair	cap	Enclosure
(13)		ļ	(12)			other n	niscellar	neous)	77			oval	air	Encapsulate	sure
		Yes	No	N/A										e	19907
space 13-break	room			X			18.781 8		e & mas	tic	156 SF	х			
space 13				X	pipe i						9 LF	х			
space 13-women				х	A 100 A				e & mas		25 SF	Х			
space 13-sales				х				tile	e & mas		16 SF	х			
Name of Registered Was Robinson Waste			H	JDEP V auler ID	No.	Cubic of Was			20.000	Register VS, Inc	ed Landfill				
City State				17304	<u> </u>	2 Dispos	sal Date		City, Sta		•				
City, State Bellmawr, NJ						10/1	1/13		A MARKET STATE OF THE STATE OF		le,PA				
Completed by		Title				S	ignature	1	1	IK	Dat	е			
Timothy E. Bry	an	Vice	-Pre	eside	ent (~	11	//	9-	17-	13		

Check# 9819

Date of Notification (1)				Name of	f Building (Owner/C	Operator		110			0	-		
9-17-13				Macy	's Inc	orpo	rated	7913	SEP	20 A	M 10:	5	9		
Agencies Notified	Type Notification			Street A											
₩ EPA	25 Initial				7th S		t ———	* F				1-1	1		
DEP DOL	☐ Amended Amendment #			City, Sta	ite, Zip Co innati	de , OH	452	02	& LI	CEMO	HMG				
M DOH	☐ Emergency (in justification) ☐ Cancellation	ncluding			f Contact Liddel	1			Tel	lephone	Numbe	er	-		
				FACI	LITY INFO	RMATI	ON							_	
Name of Facility Where Macy's - Livin		Place (3)						Type of Facility ☐ School (K-							
Street Address 112 Eisenhower	r Parkway							Subchapte Other (i.e. etc.)	r 8 (Oth private	er than I & comm	K-12) ercial t	ouilo	ings,	home	es,
City (5) Livingston, No.	J							Square Feet 298,900		f Floors 3			dg. A		
County (6) Essex		0.5 1/5			Code (7) USE ONLY)			Current Use (Pr Retail St		ing demo	olished)		8	
Name of Monitoring Firm Pennoni Assoc		wner (8)		ASCM	1 No.			of Abatement Co mouth Envi			. Co	.,	nc	•	
Street Address 515 Grove Str	eet, Suite 1	В						Address Haws Aver	nue						
City, State, Zip Code Haddon Height	s, NJ 08035						F8000 / 7000 / 7000	tate, Zip Code ristown, I	PA 19	401		seculii.			
Project Manager for Mor				Telephoi	ne No. 47–050	5	0.0	one No.		Licens 003					
Start Date (10) 10/1/13		Scheduled 10/2			Date (11)			of OSHA Monitor		ental	Co		[nc		
Occupancy Status Durin	g Abatement (Check							Address							
☐ Facility Closed/Vac	ated During Entire Pe	eriod of Al	batem	ent			923	Haws Aver	nue						
Abatement Perform Other – Describe: □	ed Outside of Norma	al Facility	Hours			_		tate, Zip Code	ο λ 1 Ω	401					
Scope of Work (Check A	II That Apply)						NOT	ristown, I	AIS	401			-	-	
□ ≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf			enovat emoliti				X	Mini-Enclosur Glovebag Pro	e cedure	A .				9	
			!!		(Non-Exemple	() an	u Non-i	Table			ment	t
Location	n of		_ocation			De	scription	of			-	_	Ту	pe	
Asbestos-Containing	Material (ACM)		l Solel ntenar			os Cont	taining M	laterial (ACM)	700	mount		_		Щ	m
TO BE AB			dial S		(i.e.		systems cing, VA	insulation, T. or		Specify or LF)		₹em	Repair	cap	nclo
(13)			(12)				niscellan				160	Removal	air	Encapsulate	Enclosure
		Yes	No	N/A										e	
1st floor text	ile stock ro	om	х		fire	proof	fing		1,2	70 SF		X			
Name of Registered Was	ste Hauler			JDEP W			Yards	Name of	(200)	ered Lan	dfill				
Newark Cartin	g		757.65	auler ID 509	NO.	of Was	SXX-9	IESI							
City, State Newark, NJ							sal Date 25/13	City, Sta Beth		n, PA	li e				
Completed by		Title				5	ignature	11/	3		Date	_			
Timothy E. Br	yan	Vice-	-Pre	sider	nt (1 ~	2/1/	<u></u>		9–1	/-	13		

Check# 9820

Date of Notification (1)				Name o	f Building	Owner/C	perator	(2)	- 11(-	! - ! - !	•	,		
9-17-13				Macy	's Ind	corpoi	rated		2813	SFP 20	E LE	10. 1		
Agencies Notified	Type Notification	,		Street A	ddress 7th	Street	t		1.00	20	Cit	10.	12	
EPA DEP DOL				City, Sta	ite, Zip C innat	ode i, OH	452	02	.2	LIČE			i,	
M DOH	☐ Emergency justification) ☐ Cancellation			Name of Tia	f Contact Lidde	11			Te	lephone Nu	mber	-		
	# # # # # # # # # # # # # # # # # # #			FACI	LITY INF	ORMATI	ON							
Name of Facility Where A)						ol (K-12)					
Street Address 100 Route 46									napter 8 (Oth (i.e. private			dings,	home	es,
City (5)								Square Fe		f Floors		ldg. A		
Wayne								380,40				FOAT	ъ.	
County (6) Passaic				(STATE	Code (7) USE ONLY	n			e (Prior if be Store	ing demolis	ned)			
Name of Monitoring Firm Pennoni Associ		Owner (8)		ASCN	No.				nt Contractor		70	Inc		
Street Address		******						Address	arvir Orac	Circui	.,.	1110		-
515 Grove Stre	eet, Suite	1B						Haws A						
Haddon Heights		5					Nor	ristown	, PA 19					
Project Manager for Mon Joe Anello, Jo				Telephore 856-5		05		one No. –239– 99	20	License N				
Start Date (10) 10/1/13		Schedule 11/1			Date (11)	,		of OSHA Mo	onitor Invironm	ental	Co.,	Inc		
Occupancy Status During	Abatement (Chec	k Only One	e)					Address						
☐ Facility Closed/Vaca	ated During Entire F	Period of A	bater	ment			923	Haws A	venue					
	ed Outside of Norm	al Facility	Hour	s				ate, Zip Coo		401				
Scope of Work (Check Al	I That Apply)						NOT	ristowi	, PA 19	401			-	
☐ ≥3 sf or ≥3 lf 1 ≥160 sf or ≥260 lf			enova emoli				X	Mini-Enc	ainment with losure Procedure	Negative I	Pressu	e		
									mpted (*) an	d Non-Frial				
		7 7157590	Locat orma	0.0000000000000000000000000000000000000			329897	2				Abate Ty		
Location Asbestos-Containing		Used	Sole	ely by	Asbes		scription aining M	of aterial (ACN	1) A	mount			Ш	
TO BE ABA In Facili				ince/ Staff?	(i.e.		systems	insulation,		Specify F or LF)	Remova	Repair	ncap	nde
(13)	, y		(12)				niscellan		-	o, <u>L</u> . ,	ioval	pair	Encapsulate	Enclosure
	/T - 1 11 -	Yes	No	N/A	fine	eproof			1 20	0 CD	x		Ф	
Loss Prevention	/Locker Mez	Z.	Х	+	TITE		.1119		1,35	00 SF				
				+										
Name of Registered Was Newark Carting			H	NJDEP W Hauler ID 4509		Cubic of Was		30 00000	ne of Registe	ered Landfil				
City, State Newark, NJ				-005		Dispos	al Date		State ethlehen	n, PA			-	
Completed by		Title				1	ignature		12		ite			
Timothy E. Bry	an	Vice-	-Pre	esider	nt		1_	11	1(2)	9	-17-	13		
ASB-41 (R-06-08)							* Do not	use this for	m for asbest	os licensur	e exem	pted	activit	ies.

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

Date of Notification	(1)	(Pursu	Name	of		ing O	wner/O	perator	(2)	# 411			70		
9-17-13					1 Ho		an			7916					
Agencies Notified	Type Notifica [X]Initial	tion			Addres: Bay		•			2813 SEF	20	AH	0:	39	
[]DEP	Notifica	ation			tate,			100/1992/2002		631.1/	Lile .			180.100	
[X]DOL	[]Amended		G.	len	Rid	lge ,	NJ,0	7028		å Li	CFH		5	- 1	
[X] DOH	Notific	ation	Name	e of	Conta	ct	0 10-1		Telephone	Number			÷		
[]DCA	[]EMERGENC		C	arc	ol Ho	nam	an		1			E.	æ		
	[]concerre		Ц —		FACILI	TY IN	FORMAI								
Name of Facility Whe	ere Abatement	is Tak	ing E	lace	(3)				Type of Facili	Lty (4)					
Same as above									[]School []Subchapt [X]Other (:	ter 8 (Oth	ate &	COM	mer-		
Street Addres									cial b	ildings,	homes	, et	c.)		
									Square Feet	# of Flo	ors	Bldg	S	ge	
City (5		County	(6) E	Essex	K	70000000	ty Cod		1800 Current Use ()	Prior if b	eing (80 demo	2	ed)	
Name of Monitoring	Firm hired by	Buildi	.ng	ASCM	No.	1			ent Contracto						
Owner (8) N/A									ANAGEMENT	, 1110.					_
Street Address							86		topher St	•					
City, State, Zip Co	de							State, Z	ip Code r, NJ 070	42					×
Project Manager for	Monitoring F	irm 1	elep N/A	hone	Numbe	r		one Numb 3)744			Licen 00	371		er	
Scheduled Start Dat	e (10) Sch	ed. Com			Date (11)	Name o	of OSHA N	Monitor						
Month Day		onth	Day		Year		21	- 3 ddwoe					1.000		
Occupancy Status Du [X]Facility Clo of Abatemen	osed/Vacated I	t (Chec	Enti:	re Po	eriod		Stree	t Address	•					- 23	
[]Abatement Po	erformed Outs:	ide of	Norm	al F	acilit	Y	City,	State, 2	Zip Code						
Hours - Des	cribe: «OffHou cribe: «Other (Occupan	cy D	<u>»</u> escr	ipt»					77.000					
Scope of Work (Chec [X]>3 sf o: []>160 sf		ply)	1.7000.700		vation lition			[]Mini- [X]Glove	Containment wi Enclosure bag Procedure riable Procedo		ve Pre	essu	re		
				Is								Abat	eme	nt I	E
Locatio			Nor	atio mall				stos-Con		Amoun	t	R	R	N	N
Asbestos-Co Material				sed lely	.		Ma	aterial	(ACM)	(Speci		E M	E	C A	F
TO BE A			By	Main	-	2	(i.e.	, thermal	systems	SF O		0	Ā	PS	D S D
In Fac:	9 77-9		Cust	todia	al				acing, VAT, llaneous)	ILE)		A L	R	T.	UR
(13	•)	Ye	Staf	No I	N/A		or our							-	E
Basement					X	Pig	e I	nsulat	ion	27 lf		X			
						Box	iler	(snow	man)	18 SF					-
Name of Registered AZTECH MANA			Hau		aste ID No.	1000000	bic Ya Waste		Name of Reg G.R.O.W		ndfil	1			
City, State				0 4 0		Di	sposal	Date	City, State				_		
Montclair, N	J 07042					1	10-1		Morrisv:	ille, P	A 19	906	7		
Completed By (Prin	t or Type) T	itle	1000					Signature	8	- 1/		ate	12		
Constantine		Presi	den	t				le	us form/u	n Vian	9	9-17- 	-13		

Date of Notification (1)					360 and 12				5 EL	410.	pe 194		
09-18-20/3				Planne of Building O	STEP OTER	for (2)	713	SEP 2	J Al	filU:	22		
Agencies Notified Type I	dodification			TCTIC	Shi	1-10						-	
IT EDA							A - 1		7 6 5	J. 1	11		1990
Ø DEP □	Miel Mended			SO MOU	ntro:		۸	a LIC					
A A	Negotienna.	æ		City, State, Zip Code	11141	V)	710						
	DATE OF PARTY A	San clause		CalDin	. 11								
DOH DCA	Micellon) Roslistion	a MANAGEMENT	ing.	Cal Duc	- () · ·	$N \cdot \mathcal{I}$.	070	06					
- ILI C	ncellation			-CC-	1 1			TTO	inne A				
Name of Facility When At a		•		Eric 5	りょそも	€.		1 contrasts	nne A	in section in	Mr.	-	
Name of Facility Where Abelemen	it is Taking	Place	(3)	FACILITY INFORM	DATION			0	L				
Street Address						Type of	Fecility (4)						-
- Address				-									
50 Mounta	5	A					100! (K-12)						
City (5)		N	<u>e</u> .			Căn Gito	schapter a	(Other In	100 K-1	(2)			
CALDWell County (6)	4.5					_ etc.) Cross fortage	ation of CO	MENE C	iel bu	adings	, hom	88
County (6)	N.7	0	70	06		odinas -		g of Flo	nrib.				,
	3-37		1 :	County Code Co		3,00	0 1	7			Bidg. /	lge	
Name of Blooming			1	STATE USE CALLY		Current U	BR /Pring H	<u></u>			1-03	L	
Name of Monitoring Firm Hired by B	uilding Ow	mar (e)		- 490mm		A	ILA	Dang de	molisi	red)			-
		(6)		ASCAR No.	Name	of Abatema	177				:		1
Stress Address					SHAF	SON ON	AL COMME	dor (9)					
					Simod	ddress	ATTIA C	O L	C				1
City, State, Zip Code					i -made								
1					1 25- VI	AN ORD	EN PL	= _y					1
Project Manager for Monitoring Firm					City, Sta	fie, Zip Coo	le e						- 1
ATT A recommend Firm			I To	elephone No.	HACK	ensach	LN 3	0780	,				\neg
Start Date (10)		0	1	solvinus MO	I CONTROLLED	Ma No.							- 1
OCC (10)	Sigh	arh dod			201-76	8-4270	26	Lionn	se No.				\dashv
09-18-2013	0	oumbii o	Compl	stion Date (11)		OSHA MOT		011	35				- 1
Occupancy Status During Abelement (Charles	7 1	9 3	20/3.	EAS	COUNT MIDI	Mor						_
		y Creej			E 17/5	L-AM	ALY.	TICAL		-			
Facility Closed/Vacated During Er Abatement Performed Outside of	lire Period	of Ahe	Magnani		Street Ad	L - Ar	-		•	TN	(C		_ [
Abatament Performed Outside of Officer – Describe:	Vonnai Fa	cally His	NES	•	307	- we	st N		.	2 100	2552		7
			-		Chy, State	- We		ecu	Yo)rk	- N	V·V	-
Scope of Work (Check All That Apply)					N.	V				1200		1	7
2 Se or 25 H		•				<u> </u>							1
☐ ≥160 ef or ≥260 lf	門	Meno	retion oftion										-
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						Denderson D.							1
		is Loca			LIN	on-Exemp	ed M and	bi					1
Location of	1	A SOUTH HOLD	STIFFE.				T C T GOD EST	recei-1-1	ble Pr	ocedi	are		1
Asbestos-Containing Meterial (ACM)) U	sed Sal	Take frae	Deer			1			Aba	lemen	t T	1
TO BE ABATED IN Facility	∮ #⊌	lands sittemen	anna!	Contains Contain	Dine Bank a	d /Acon			<u></u>	T	ypa		
(13)	F CU	Stocial				ation	Am	Dum!					
(1-5)		(12)	<u> </u>	THE CHARLES BOARD AND A	T WAT -		(Sp	edily rLF)	Removal	70	Encapaulate	m	9)
	Yes	No	LANG		collensous)		Oi U	(LI-)	130	Rapair	豊	Enclosure	
Basement.	+-	-	NA						I S	1	토	Ē	
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Marron of Decision	1			1		-			1	-	-	_	
Name of Registered Waste Hauter		D0	IDEP W		288 -338-3	1			-				
Shama charles a		Ha	Mer ID	THE PROPERTY LEGIC	8 1	Niema ac			-		T		
Sharon gurling C	D,	1	ハクジュ	of Waste	- 1	Name of R	espielered	Landin				-	
ile c V		10	<u> </u>	- 1 · ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ')	Mine	-11-	1	9	0		1	
Herckensack N. J	T. 07	CA		Diaposal Da	Ne .	Mines Cay, San	40	5 N T	rpr	150	IN	d	
Completed by		00		TBD.		M.C.	0	7	-			7	
ARLOS ESQUIVEL	Title	FW			5050	May	reste	ra	0	L .0	6 2	1	
	SAFET	YM	anac	ER /		11 1	91	Planta	\sim	11	0	1	
SB-41 (R-08-08)					Burn	tayle	1	100				1	
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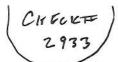
Print Form

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



Date of Notification (1) 9-/8-/3 Agencies Notified Type Notification			Name o			Operator (2)						
7-18-13				MI	1811	0							
Agencies Notified Type Notification			Street A	ddress			828			-200 - 000 - 00		2.00	
EPA Initial			1	9 5	Uni	PER	RO						
DEP Amended			City. Sta	ate, Zip C	ode			**************************************					
DOL Amendmen		_	w	25,76	POET,	CI	06	880					
DOH justification	, -		Name o	f Contact				Te	lenhone Nii	mher			
☐ DCA ☐ Cancellatio	า 			- PRE	R			1					
Name of Facility Where Abatement is Taking Melp Resident Street Address 4/7 Morres August City (5) Summit County (6)	Di /	01	FAC	ILITY INF	ORMAT								1835
Name of Facility Where Abatement is Taki	ng Place (3)			\$10°		Type of Facility	(4)					
Street Address	ENCE						School (K-						
Street Address	,		H			1	Other (i.e.	r 8 (Ott private	ner than K-1 & commerc	2) ial bui	ldinas	hom	nes
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Name of Monitoring Firm Hired by Building	Owner (8)	ASC	vi No.		4	f Abatement Co		r (9)				
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Project Manager for Monitoring Firm			Talanha	na Na			Neck, N.J. 07	122	T		3)		
1 Toject Manager for Monitoring Firm			Telepho	ne No.		Telepho	ne No. 94-1757		License N	lo.			
Start Date (10)	Cabadul	-4 000	nalation.	D-1- (44)					00029				
			Date (11)		Name of	f OSHA Monitor							
9-36-/3 Occupancy Status During Abatement (Che	5-	13_			Chront	44							
			75-54-5			Street A	aaress						
Facility Closed/Vacated During Entire Abatement Performed Outside of North	Period of a	Abaten / Hours											
Other - Describe: 74m-71	CAS	, i loure	City, State, Zip Code										
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Date of Notification (1)	18/13		Name o	Bullding	Owner/Operator	(2)	c= 5	:			
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Project Manager for Mo	Tele	phone	No,	Teleph	one No		License No.		• "-	-					
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09 / 17	, 12	\$chedul					Name	of OSHA N	donitor						
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Occupancy Status Durin	ig Abatement (Check o	nly o	ue)			Street	Address					_		
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Basement		ir	7 1		×					30 LF		***		4	
		i r		-	100	Boiler in	isulatior	1	- 1-107	30 SF		凶			
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		_ ;[П	П		
Name of Registered Wa	ste Hauler		13	NJ.	EP Waste	e Hauler ID No.	Cubic Y	ords of Wast	Name of Regi	stered Landfill				: بسا	i_ J
Gr Tech LLC					03378		TB		T.R.R.F. Inc						
City. State			T.	-1-		(1) 11	Dispose		City, State		-				
Wayne, NJ 07470							ТВІ			A					
Completed by (Print or T	ype)	Title						naty/9	Tullytown, P	Α	D				
N.Jevtic		Owner	F .					R.	L .C		Date				
A\$B-41			-					/ CON	-c vyes	19 07	09/16	5/20	13		
MAY 11		" La	1012	use il	ns form	for ashesi	tus Heens	tire exemp	led activities.						

Date of Notification (1)			l N	lame of	Building Owner/C	perator	(2)					
September 11,201	3				terworth	porator	28/3	SEP 21	0 644	~ ~		
Agencies Notified	Type Notification		358	Street Ad						5		
☐ EPA	Initial Amended		3	W- 24-50 W-50	ye Avenue			214				
DEP DOL	Amended Amendment				ie, Zip Code a , NJ 07512		હૈ	LICE	Nithig	1-0L		
DOH DCA	justification) Cancellation	iricularing		lame of da	Contact			Tele	nhone Nu	mher		
				FACIL	ITY INFORMATI	ON		743				
Name of Facility Where House	Abatement is Taking	g Place (3)					Type of Facility	1973				
Street Address							School (K- Subchapte		r than K-1	2)		
136 Boye Avenue							Other (i.e. etc.)	private &	commerci	ial build	dings	, h
City (5)							Square Feet	# of	Floors	В	ldg. A	\ge
Totowa							1600	2		5	5+	
County (6) Passaic					Code (7) ISE ONLY)		Current Use (Pr	ior if bein	g demolis	hed)		
Name of Monitoring Fire	m Hired by Building (Owner (8)		ASCM	No.	Name	of Abatement Co	ntractor ((9)			
Anthony Valantine				0077	5		AT Construction					
Street Address						7 - 3	Address					
80 Mill Rd							Box 603					
City, State, Zip Code Irvington, NJ							State, Zip Code odland Park, N	J 07424	4			
Project Manager for Mo	nitoring Firm		1.000	elephor			hone No.		License N	No.		
		11200			7.6082		893.7005		01097	1		
Start Date (10) 9/20/2013		Scheduled 9/23/20		pletion [Date (11)	100000000000000000000000000000000000000	of OSHA Monitor					
24		3/23/20	13		100	Ran	ko Vukadinovi	С				
Occupancy Status Duri	ng Abatement (Chec			300 5 Tool	Y	Street	Address					
➤ Facility Closed/Va	cated During Entire F	k Only One Period of Al	e) bateme	ent		Street 88 B	Address Santa Ave.		V			
➤ Facility Closed/Va	cated During Entire F med Outside of Norm	k Only One Period of Al	e) bateme	ent		Street 88 B	Address Banta Ave. State, Zip Code		V			
Facility Closed/Val Abatement Perform Other – Describe:	cated During Entire F med Outside of Norm	k Only One Period of Al	e) bateme	ent	v lete	Street 88 B	Address Santa Ave.		V			
Facility Closed/Val Abatement Perform	cated During Entire F med Outside of Norm	Period of Al nal Facility	e) bateme	ion		Street 88 B City, S Gart	Address Banta Ave. State, Zip Code	nent with				re
Facility Closed/Val Abatement Perform Other – Describe: Scope of Work (Check	cated During Entire F med Outside of Norm	Re Only One Period of Al hal Facility	e) bateme Hours enovation	ion on		Street 88 B City, S Gart	Address santa Ave. State, Zip Code field, NJ Full Containn Mini-Enclosu Glovebag Pro	nent with			cedu Abat	en
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Check# 1720

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

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Date of Notification (1)				Name	of Buildin	g Owner/	Operator (2	2)					
	16	3		Sally	Brenner			281	SFP 20 AM	110 -	e ¹⁰⁰ .		
Agencies Notified	Type Notification				t Address			LU1,	1011 ZU 118	10°¢	**		
☐ EPA				38 H	arbourton	Woodes	ille Dood						
⊠ DOLWD	☐ Amended				State, Zip		IIIC KOAU	I	& LICENT!!	1 1 2			
□ DHSS	Amendment #								& LICER TH		L.		
☐ DCA	Emergency (in	ncludin	g		ngton, N								
(NJAC 5:23-8)	justification)			Name	of Contac	ct			Telephone Nui	mber			
	☐ Cancellation			Sally	Brenner								
1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 To 1.00 T				FA	CILITY I	NEORMA	TION				-	_	-
Name of Facility Where	Abatement is Takin	o Place	(3)					Type of Facility	v (A)				
Private house		9	- (-)					1 10 10	5 (I)(S)				
Street Address								School (K-	r 8 (Other than K-1	21			
								Other (i.e.,	private and comm	ercial b	uildin	ns.	
38 Harbourton Woods	ville Road							homes, etc					
City (5)					1000			Square Feet	# of Floors	В	ldg. A	ge	
Pennington, NJ 08534	-												
County (6)				Cour	nty Code (7)	(STATE U	SE ONLY)	Current Use (F	Prior if being demo	liched)			
Mercer				- Marie Con			,		nor it being defile	iisiieu)			
Name of Monitoring Firm	Hired by Building	Owner	/8\ T	ASCM	No	Maria	7.61	L					
		OWIG	(0)	ASCIVI	NO.			ent Contractor (9)				
						Gr Tec	h LLC						
Street Address						Street /	Address						
						576 Va	lley Rd#	283					
City, State, Zip Code				-			ate, Zip Co						
						1000							
Project Manager for Mon	Itoring Firm	_	Tolo	phone	Na		NJ 0747	70					
jes manager ion mon	itoring ram		1016	phone	INO.	Telepho	me No.		License No.				
21 12 12						973-63	8-1777	-	01127				
Start Date (10)					ate (11)	Name o	of OSHA M	lonitor					
	13	09			13	Enviro	ision Co	nsultants,Inc					
Occupancy Status Durin	Abatement (Chec	k only	one)				Address	iisuitaiits,iiic			-		
ズ Facility Closed/Vacat	ed Durina Entire Pe	eriod of	Ahate	ment		18/18/81	11:50 B.J.M						
Abatement Performed	Outside of Norma	Facili	v Hain	s - Des	scribe	20-21	Vagaraw	Road, Bldg .#	\$34A				
Time of Abatement: _	AM- P	M	PM	3 - DC.	AM	City, St	ate, Zip Co	ode			0.00		
		-		-		Fair La	wn, NJ 0'	7410					
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NOTIFICATION OF ASBESTOS ABATEMENT

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

Date of Notification (1) 9/16/201	3			Name of	Building O	wner/Opera	ator (2)	onstruction	: 122	52	结		
[] DEP [] A	itial Notific mended No	tification		Street Ad	dress e, Zip Cod	e		Avenue	SEP 20	2013	1		
[x] DOH	mendment mergency (astification) ancellation	including		Name of	Contact Joyce (Creek	, NJ 08092	ephone Number		्रक्ष इ.		\dashv
[] DCA				~ *****						, (am am			
Name of Facility Where Abatement is Ta Residence	king Place (3)	FACI	ILITY II	NFORM	ATION	Тур		School (k-12) Subchapter 8 (oth	er than	k-12)	-	
Street Address 1319 Mill Cree	k Road							[x]	Other (i.e., private homes, etc.)	& com	mercia	l buildi	ngs,
City	Cour	ity (6)		County Co	ode (7) JSE ONLY	7)	Squ	are feet 1300 sf	# of Floors	Bldg.	Age 60)	
Beach Haven West	Oce	an					Cur	rent Use (Prior if b Residence	the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s	3 3,512.2			
Name of Monitoring Firm Hired by Build	ing Owner	(8)		ASCM N	0.	Name of	Abate	ment Contractor (9)	_			
N/A Street Address				-304		Street Ac	ldress	Guardiar	Contracting,	Inc.			\dashv
Succi Address									ute 9, Unit 61				_
City, State, Zip Code						City, Sta	te, Zıp		ver, New Jerse	y 087	55-12	71	
Project Manager for Monitoring Firm		Telephone 1				Telephor 732-34	9-99	32	License N 00624	umber			
Scheduled Start Date (10) 9/17/13		Scheduled 0 9/19/1	500 D	on Date (1	1)	Name of	OSH	A Monitor E.M.S.L	. Analytical				
Occupancy Status During Abatement (C				Street A	ddress		lton Road						
[X] Facility Closed/Vi		-		Hours City, State, Zip Code									
[] Other – Describe				Sales -		City, Sta	te, Zip		ay, New Jerse	y 088	54		
Scope of Work (Check all that apply)						[]	8	Full Containment v	vith Negative Pres	sure			
[] >3 sf or ≥3 lf		r 1	Renova	tion		Ι. Γ		Mini-Enclosure Glovebag Procedur	e				
[x] ≥160 sf or ≥260 l		[x]	Demoli	tion		[x]	1	Non-Exempted (*)	and Non-Friable l	Procedu	re		
	T			T						Abat	ement '	Гуре	
Location of Asbestos-Containing Material (AC TO BE ABATED in facility (13)	n sed / ustodial N/A	insulation, surfacing, VAT, or other miscellaneous)					E M O V A	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 sidi	ng			1200 sf	X			
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Name of Registered Waste Hauler		NIDED Was	te Hauler	ID No	Cubic V	ards of Wa	ste T	Name of Register	ed Landfill			_	
Name of Registered Waste Hauler Guardian Contracting,	Inc.		0223	Pe Hauler ID No. Cubic Yards of Waste Name of Registered Landfill T.R.R.F.									
City, State Toms River, New Jerse				Disposal Date City, State 9/20/13 Tullytown, Pennsylvania									
Completed by (Print or Type) Nicholas Fernicola	ger	Signal	ture	ch	P	Ter	l	Date 9/1	6/201	3			

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

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

Agencies Notified [x] EPA [] Initial Notification [x] DDEP [x] DOL [x] Emergency (including justification) [x] DOH [] DCA [] Cancellation [] Name of Building Owner/Operator (2) Seminole Construction Street Address 128 Bartlett Avenue City, State, Zip Code West Creek, NJ 08092 Name of Contact Joyce Corliss FACILITY INFORMATION	Management of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the con				
Type of Notification 128 Bartlett Avenue Andrew or was designed and property of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s					
[x] DOL Amendment # West Creek, NJ 08092 [x] DOH [] DCA West Creek, NJ 08092 Name of Contact Telephone Number Joyce Corliss	and the second				
[] DOH [] Cancellation Joyce Corliss	ì				
FACILITY INFORMATION					
Name of Facility Where Abatement is Taking Place (3) Residence Type of Facility (4) [] School (k-12) Subchapter 8 (other than k-12) [x] Other (i.e., private & commercial by	ildings.				
21 Jonathan Drive homes, etc.)					
City County (6) County Code (7) Square feet # of Floors Bldg. Age (STATE USE ONLY) 1200 sf 1 60					
Beach Haven West Ocean Current Use (Prior if being demolished) Residence					
Name of Monitoring Firm Hired by Building Owner (8) N/A ASCM No. Name of Abatement Contractor (9) Guardian Contracting, Inc.					
Street Address Street Address 1889 Route 9, Unit 61					
City, State, Zip Code City, State, Zip Code Toms River, New Jersey 08755-1271					
Project Manager for Monitoring Firm Telephone Number Telephone Number 732-349-9932 License Number 00624					
Scheduled Start Date (10) 9/17/13 Scheduled Completion Date (11) 9/19/13 Name of OSHA Monitor E.M.S.L. Analytical					
Occupancy Status During Abatement (Check only one) Street Address					
[x] Facility Closed/Vacated During Entire Period of Abatement [] Abatement Performed Outside of Normal Facility Hours [] Other – Describe City, State, Zip Code Piscataway, New Jersey 08854					
Scope of Work (Check all that apply) [] Full Containment with Negative Pressure [] Mini-Enclosure					
[] $>3 \text{ sf or } \ge 3 \text{ lf}$ [] Renovation [] Glovebag Procedure [x] $\ge 160 \text{ sf or } \ge 260 \text{ lf}$ [x] Demolition [x] Non-Exempted (*) and Non-Friable Procedure					
Abatement Typ	e				
YES NO N/A other miscellaneous)	N C L O S U				
Exterior X Asbestos siding 1000 sf X	\perp				
	+				
Name of Registered Waste Hauler NJDEP Waste Hauler ID No. Cubic Yards of Waste Name of Registered Landfill T.R.R.F.					
City, State Disposal Date City, State					
Toms River, New Jersey Signature Nicholas Fernicola Project Manager Project Manager Title Project Manager Project Manager Project Manager					

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

NOTIFICATION OF ASBESTOS ABATEMENT

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

Agencies Notified Type of Notification Sueci Address	Date of Notification (1)		Name of Building Owner/Operator (2)																
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Solution Competed by Part	[X] EPA [] Initial	Notifica				_	Cedar C	Creek Drive	TEB	Fil	10		3						
DAA	[x] DOL Amend	ency (in					on, TX		SEP 2	2 17	כוחל								
Name of Facility Where Abatement is Taking Place (3)	I I DCA I			Name o			2015												
School (6-12) School (6-12) Subchapter 8 (other than k-12) Subchapter 9 (other than k-12) Subchapter 9 (other than k-12) Subchapter 9 (other than k-12) Subchapter 9 (other than k-12) Subchapter 9 (other than k-12) Subchapter 9 (other than k-12) Subchapter 9 (other than k-12) Subchapter 9 (other than k-12) Subchapter 9 (other than k-12) Subchapter 9 (other than k-12) Subchapter 9 (other than k-12) Subchapter 9 (other than k-12) Subchapter 9 (other than k-12) Subchapter 9 (other than k-12) Subchapter 9 (other than k-12) Subchapter 9 (other than k-12) Subchapter 9 (other than k-12) Subchapter 9 (other than k-12) Subchapter 9 (other than k-12) Subchapter 9 (other than k-12) Subchapter 9 (other than k-12) Subchapter 9 (other than k-12) Subchapter 9 (other than k-12) Subchapter 9 (other than k-12) Subchapter 9 (other than k-12)		-	FA	CILITY	INFORM	ATION													
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Ocean			0					[x]	Other (i.e., private			l buildi	ngs,						
Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contracting, Inc.	City	Count	y (6)			n			# of Floors	Bldg.)							
Name of Monitoring Firm Hired by Building Owner (8) N/A	Ortley Beach	Ocea	an																
Street Address										Inc									
City, State, Zip Code Project Manager for Monitoring Firm Telephone Number Toms River, New Jersey 08755-1271 Toms River, New Jersey 08755-1271 Toms River, New Jersey 08755-1271 Toms River, New Jersey 08755-1271 Toms River, New Jersey 08755-1271 Toms River, New Jersey 08755-1271 Toms River, New Jersey 08755-1271 Toms River, New Jersey 08755-1271 Toms River, New Jersey 08755-1271 Toms River, New Jersey 08755-1271 Toms River, New Jersey 08755-1271 Toms River, New Jersey 08755-1271 Toms River, New Jersey 08755-1271 Toms River, New Jersey 08755-1271 Toms River, New Jersey 08755-1271 Toms River, New Jersey 08755-1271 Toms River, New Jersey 08755-1271 Toms River, New Jersey 08755-1271 Toms River, New Jersey 08755-1271 Tolephone Number 732-349-9932 Tolephone Number 100624 Tolephone Nu					Street Ac	ldress			IIIC.										
Toms River, New Jersey 08755-1271 Project Manager for Monitoring Firm					City Sta	to Zin C		oute 9, Unit 61											
Scheduled Start Date (10) Scheduled Completion Date (11) 9/16/13 Occupancy Status During Abatement (Check only one) [x] Facility Closed/Vacated During Entire Period of Abatement [] Abatement Performed Outside of Normal Facility Hours [] Other – Describe Scope of Work (Check all that apply) [] Full Containment with Negative Pressure [] Saf or ≥3 if [] Renovation [] J >3 s f or ≥260 if [x] Demolition Asbestos-Containing Material (ACM) TO BE ABATED in facility (13) TO BE ABATED in facility (13) Exterior garage X Asbestos siding Staff (12) YES NO N/A Exterior garage X Asbestos siding NUDEF Waste Hauler DNo. 20223 3 T.R.R.F. City, State City, State Location Amme of Registered Landfill T.R.R.F. City, State City, State E. M. N. Analytical Street Address St	City, State, Zip Code						Toms R			55-12	71								
9/16/13 9/17/13 Street Address Street Address Street Address	Project Manager for Monitoring Firm	er	732-349-9932 00624																
Street Address Street Address			etion Date	(11)	Name of	OSHA 1		. Analytical											
[] Abatement Performed Outside of Normal Facility Hours	Occupancy Status During Abatement (Check		h - 4 4		Street A	ddress	1056 St	elton Road											
Scope of Work (Check all that apply) Completed by Piscataway, New Jersey 08854						City Sta	to 7in C		Chon Road										
$ \begin{bmatrix}] & >3 \text{ sf or } \ge 3 \text{ lf } \\ [x] & \ge 160 \text{ sf or } \ge 260 \text{ lf } \end{bmatrix} \begin{bmatrix}] & \text{Renovation} \\ [x] & Demolition \end{bmatrix} \begin{bmatrix}] & \text{Glovebag Procedure} \end{bmatrix} $ $ \begin{bmatrix}] & \text{Mini-Enclosure} \\ [x] & \text{Slofo sf or } \ge 260 \text{ lf} \end{bmatrix} \begin{bmatrix}] & \text{Renovation} \\ [x] & Demolition \end{bmatrix} \begin{bmatrix}] & \text{Sloeped Procedure} \end{bmatrix} $ $ \begin{bmatrix}] & \text{Mini-Enclosure} \\ [x] & \text{Sloeped Procedure} \end{bmatrix} $ $ \begin{bmatrix}] & \text{Mini-Enclosure} \\ [x] & \text{Non-Exempted (*) and Non-Friable Procedure} \end{bmatrix} $ $ \begin{bmatrix}] & \text{Mini-Enclosure} \\ [x] & \text{Mon-Exempted (*) and Non-Friable Procedure} \end{bmatrix} $ $ \begin{bmatrix}] & \text{Mini-Enclosure} \\ [x] & \text{Non-Exempted (*) and Non-Friable Procedure} \end{bmatrix} $ $ \begin{bmatrix}] & \text{Mini-Enclosure} \\ [x] & \text{Non-Exempted (*) and Non-Friable Procedure} \end{bmatrix} $ $ \begin{bmatrix}] & \text{Mini-Enclosure} \\ [x] & \text{Non-Exempted (*) and Non-Friable Procedure} \end{bmatrix} $ $ \begin{bmatrix}] & \text{Mini-Enclosure} \\ [x] & \text{Non-Exempted (*) and Non-Friable Procedure} \end{bmatrix} $ $ \begin{bmatrix} & \text{Renovation} \\ & \text{Non-Exempted (*) and Non-Friable Procedure} \end{bmatrix} $ $ \begin{bmatrix} & \text{Mini-Enclosure} \\ & \text{Anount} \\ & \text{Specify SF} \\ & \text{Manount} \\ & \text{Manount} \\ & \text{Specify SF} \\ & \text{Manount} \\ & \text{Manount} \\ & \text{Specify SF} \\ & \text{Manount} \\ & \text{Manount} \\ & \text{Specify SF} \\ & \text{Manount} \\ & \text{Manount} \\ & \text{Specify SF} \\ & \text{Manount} \\ & \text{Manount} \\ & \text{Specify SF} \\ & \text{Manount} \\ & \text{Manount} \\ & \text{Specify SF} \\ & \text{Manount} \\ & \text{Manount} \\ & \text{Specify SF} \\ & \text{Manount} \\ $						City, Sta	ie, zip c		way, New Jerse	y 088	54								
[] >3 sf or ≥3 lf [] Renovation [] Glovebag Procedure [x] >160 sf or ≥260 lf [x] Demolition [x] Non-Exempted (*) and Non-Friable Procedure Location of Asbestos-Containing Material (ACM) Normally used Solely by Material (ACM) (Specify SF or LF) Non-Exempted (*) and Non-Friable Procedure Location of Asbestos-Containing Material (ACM) Normally used Solely by Material (ACM) (Specify SF or LF) Non-Exempted (*) and Non-Friable Procedure R R E E N N N N N N N N	Scope of Work (Check all that apply)					[]			with Negative Pres	sure									
Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility (13) YES NO N/A Name of Registered Waste Hauler Guardian Contracting, Inc. City, State Toms River, New Jersey Completed by (Print or Type) Is Location Normally used Asbestos-Containing Asbestos-Containing (i.e., thermal systems insulation, surfacing, (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Abatement Type R R R E E E N N N M P C C C O I P O A A A L O I P O A A A L U U U L R E E Exterior garage X Asbestos siding Name of Registered Landfill T.R.R.F. City, State Disposal Date 9/18/13 Tullytown, Pennsylvania Date	>3 sf or ≥3 lf		[] Reno	ovation		[]			ire										
Location of Asbestos-Containing Material (ACM) Asbestos-Containing Material (ACM) TO BE ABATED in facility (13) Maintenance/Custodial Staff (12) VAT, or other miscellaneous) Exterior garage X Asbestos siding Name of Registered Waste Hauler Guardian Contracting, Inc. Location Normally used Solely by Maintenance/Custodial Staff (12) VAT, or other miscellaneous) Amount (Specify SF or LF) NAM P C C O A A A L O I P O V R S S S VAT, or other miscellaneous) Name of Registered Waste Hauler Guardian Contracting, Inc. City, State Toms River, New Jersey Completed by (Print or Type) Title Signature Date	[x] ≥160 sf or ≥260 lf		[x] Dem	olition		[x]	No	on-Exempted (*) and Non-Friable I	Procedu	re								
Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility (13) Normally used Solely by Maintenance/Custodial Staff (12) YES NO N/A Name of Registered Waste Hauler Guardian Contracting, Inc. Normally used Solely by Maintenance/Custodial Staff (12) YAT, or other miscellaneous) Normally used Solely by Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) YES NO N/A A A L U U U U L R E E E E E Name of Registered Waste Hauler Guardian Contracting, Inc. City, State Toms River, New Jersey Completed by (Print or Type) Title Normally used Solely by Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) A A L U U U U T R E E T N N N N N N N N N N N N N N N N N					7	2 4 72				Abat	ement '	Гуре							
Asbestos-Containing Material (ACM) TO BE ABATED in facility (13) YES NO N/A Name of Registered Waste Hauler Guardian Contracting, Inc. City, State Toms River, New Jersey Completed by (Print or Type) Maintenance/Custodial Staff (12) Maintenance/Custodial Staff (12) Maintenance/Custodial Staff (12) VAT, or other miscellaneous) Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) VAT, or other miscellaneous) A L C C O I P O V R S S S U U U C C D I P O O NA A A L E E E E City, State Tullytown, Pennsylvania Date	Location of							g	Amount			1 -0.550	10000						
in facility (13) YES NO N/A Exterior garage X Asbestos siding Name of Registered Waste Hauler Guardian Contracting, Inc. City, State Toms River, New Jersey Completed by (Print or Type) Staff (12) VAT, or other miscellaneous) VAT, or other miscellaneous A L E E E Cubic Yards of Waste Name of Registered Landfill T.R.R.F. City, State Toms River, New Jersey Completed by (Print or Type) Title Signature Date	Asbestos-Containing Material (ACM)		Solely by		1	Material (A	ACM)	700			P	С	С						
(13) (12) VAT, or other miscellaneous) VAT, or other miscellaneous) VAT, or other miscellaneous) VAT, or other miscellaneous) VAT, or other miscellaneous L L L R E E E E E E Name of Registered Waste Hauler Guardian Contracting, Inc. City, State Toms River, New Jersey Completed by (Print or Type) Title VAT, or other miscellaneous VAT, or other miscellaneous A L L R E E Cubic Yards of Waste Name of Registered Landfill T.R.R.F. City, State Tullytown, Pennsylvania Date		Mair		al					or LF)	0	35000	3000	100000						
YES NO N/A Sterior garage X Asbestos siding A L E E E E E E E E E E E E						VAT,	or			1 2	R	283							
Exterior garage X Asbestos siding 350 sf X Name of Registered Waste Hauler Guardian Contracting, Inc. City, State Toms River, New Jersey Completed by (Print or Type) Title Toms River (New Jersey) Title		NO N/		oth	er miscel	laneous)				L	R							
Name of Registered Waste Hauler Guardian Contracting, Inc. City, State Toms River, New Jersey Completed by (Print or Type) NJDEP Waste Hauler ID No. 20223 Disposal Date 9/18/13 City, State Tullytown, Pennsylvania Date Date	P. de de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya	1 Ex			sector cidi				350 sf			Е	Е						
Guardian Contracting, Inc. City, State Toms River, New Jersey Completed by (Print or Type) Disposal Date 9/18/13 T.R.R.F. City, State Tullytown, Pennsylvania Date	Exterior garage	-	1^	Asc	estos siun	15			330 31	11									
Guardian Contracting, Inc. City, State Toms River, New Jersey Completed by (Print or Type) Disposal Date 9/18/13 T.R.R.F. City, State Tullytown, Pennsylvania Date					-														
Guardian Contracting, Inc. City, State Toms River, New Jersey Completed by (Print or Type) Disposal Date 9/18/13 T.R.R.F. City, State Tullytown, Pennsylvania Date							-												
City, State Toms River, New Jersey Disposal Date Toms River, New Jersey 9/18/13 Tullytown, Pennsylvania Date Date					//second-many	ards of Wa	ste N		ered Landfill										
Completed by (Print or Type) Title Signature Date	City, State		Dis	sposal Date				Anneylvani											
	Completed by (Print or Type)					1 1	WII, I	Pinisylvania	•	100000000000000000000000000000000000000		3							

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

NOTIFICATION OF ASBESTOS ABATEMENT

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

Date of Notification (1)			-		Name of B	uilding ()	wner/Opera	ator (2	2)								
Date of Profifedion (1)	9/16/2013				- mine of D				Construction	(22	5 2	22				
Agencies Notified [x] EPA [] DEP	L	on Notifica ded Noti			Street Add		11.900000000000000000000000000000000000	artlet	t Avenue		1						
[x] DOL	Amen [X] Emerg	dment #			City, State,			Creek	k, NJ 08092	SEP 2 0	2013						
[x] DOH [] DCA	Vil	cation) llation			Name of C	Contact Joyce (Corliss		Tel	ephone Number		-ad					
				FAC	ILITY IN	FORM	ATION			6 = -		يق					
Name of Facility Where Al	batement is Taking laidence	Place (3)			Type of Facility (4) [] School (k-12)												
Street Address	1 Charles Blvd.								[x]	Subchapter 8 (oth Other (i.e., private homes, etc.)			ıl buildi	ngs,			
City		Count	y (6)		County Coo (STATE U		7)	Squ	are feet 900 sf	# of Floors	Bldg.	Age 6	0				
Beach Have	n West	Ocea	n					Cur	rrent Use (Prior if b Residence								
Name of Monitoring Firm		Owner (8	3)		ASCM No.		Name of	Abate	ement Contractor (9		Inc.						
Street Address				Street Ad	ddress		ute 9, Unit 61										
City, State, Zip Code			City, Stat	te, Zip	p Code	ver, New Jerse	ev 087	08755-1271									
Project Manager for Monit	Number			Telephon 732-34		mber	License N 00624										
Scheduled Start Date (10) 9/17/13	Completion 3	on Date (11))		-	A Monitor	. Analytical										
Occupancy Status During		tement		Street Ac	ddress	3	elton Road										
[] Aba	atement Performed	Outside	of Normal Fa	acility Ho	ours		City, Sta	ite, Zip		N İ	000	<i>5 A</i>					
							r 1	1 ,	1000000000	vay, New Jerse		54					
Scope of Work (Check all	that apply)						[]	50 cc	Full Containment v Mini-Enclosure	vith Negative Pres	sure						
	sf or ≥3 lf 60 sf or ≥260 lf		[] [x]	Renova Demoli			[] [x]	•	Glovebag Procedur Non-Exempted (*)		Procedu	re					
					T						Abat	ement '	Гуре				
	W2021 #66		Is Location		9		Description				R	R	Е	Е			
Location Asbestos-Containing I	117/75	1	Normally u Solely by				bestos-Con Material (A			Amount (Specify SF	E M	E P	N C	N C			
TO BE ABA	ATED	Mair	ntenance/Ci				., thermal			or LF)	O	A	A P	L			
in facili	ty		Staff (12)			ins	ulation, su VAT,		ing,		v	I R	S	O S			
(13)			(12)		1	oth	er miscell		ous)		A		U L	U R			
		YES	NO	N/A							L		E	E			
Exterior			X		Asbes	tos sidii	ng		40.00	750 sf	X			_			
				-	-			-			-	-	-				
	4	-		-	-	-11%		_		-	-						
Name of Registered Wast		L	NJDEP Was		ID No.		ards of Was	ste	Name of Register	ed Landfill							
Guardian C City, State	ontracting, Inc.		2		sal Date	3	City, S		T.R.R.F.								
Completed by (Print or Ty		Title	a parada	9/20	/13 Signatu	ire	Tully	town	n Hennsylvania	-	Date		2				
Nicholas Fernicola Project Manager							120		te		9/1	6/201	3				

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

NOTIFICATION OF ASBESTOS ABATEMENT

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

Date of Notification (1)			II	Name of 1	Building O	wner/Oper	ator (2)						
9/16/2013								struction	7	25	2	3::-	
F 1	Notifica			Street Ad	dress	128 Ba	artlett A	venue			M	. 15.	
[x] DOL Amen	ded Noti dment # gency (in			City, State	e, Zip Cod		Creek, N	J 08092	SEP	2 0	2013	i	
IX I DON	cation) llation			Name of Contact Telephone Number Joyce Corliss									
L			FAC	LITY II	NFORM	ATION							J
Name of Facility Where Abatement is Taking Residence	Place (3))					Type of	Facility (4) []	School (k-12) Subchapter 8 (oth	o- than	ls 12)		
Street Address 9331 Mark Drive								[x]	Other (i.e., private homes, etc.)			l buildi	ngs,
City	Count	y (6)		County Co (STATE U	ode (7) JSE ONLY	7)		00 sf	# of Floors 1	Bldg	Age 6)	
Beach Haven	Ocea	n					Current	Use (Prior if Residen	being demolished) ce				
Name of Monitoring Firm Hired by Building O N/A	Owner (8	3)		ASCM No).	Name of	Abatemer	t Contractor (Guardia	9) n Contracting,	Inc.			
Street Address				Street Ac	idress	1889 Ro	oute 9, Unit 61						
City, State, Zip Code					City, Sta	te, Zip Co		iver, New Jerse	ey 087	55-12	71		
Project Manager for Monitoring Firm	ımber			License N 00624									
Scheduled Start Date (10) 9/17/13	mpletic	on Date (11	1)	Name of	OSHA M		. Analytical						
Occupancy Status During Abatement (Check of X Facility Closed/Vacated	W 250	ement		Street Ac	ddress		elton Road						
[] Abatement Performed	Outside o		lity Ho			City, Sta	te, Zip Co		vay, New Jerse	., 000	5.4		
Scope of Work (Check all that apply)						[]	Full		way, New Jerse with Negative Pres				
		r 1 ,	-	• 2000			Min	-Enclosure					
[] >3 sf or ≥3 lf [x] ≥160 sf or ≥260 lf			Renovat Demolit	19-00 M-01/K		[x]	2001703300	ebag Procedu -Exempted (*)	and Non-Friable l	Procedu	re		
								-0%		Abat	ement 7	уре	
		Is Location				Description			A	R	R	Е	Е
Location of Asbestos-Containing Material (ACM)	1	Normally use Solely by	d			nestos-Con Material (A			Amount (Specify SF	Е	E P	N C	N C
TO BE ABATED	Main	tenance/Cus	todial		(i.e.	, thermal	systems		or LF)	M O	A	Α	L
in facility		Staff			inst	ulation, su VAT, o				v	I R	P S	O S
(13)		(12)			oth	er miscell				A		U	U
	YES	NO	N/A							L		L E	R E
Exterior		X		Asbes	stos sidir	ıg	200		1750 sf	Х			
								-		_			
				<u></u>									
Name of Registered Waste Hauler Guardian Contracting, Inc.	1	NJDEP Waste 20	Hauler 223	ID No.	Cubic Ya	ards of Was		me of Register Γ.R.R.F.	red Landfill				
City, State		20.	Dispos	al Date		City, S	tate						
Toms River, New Jersey Completed by (Print or Type)	Title		9/20/	13 Signati	ire .	Tully	town/Pe	nnsylvania		Date			
Nicholas Fernicola		ect Manager	r	Signati	1.0	21	+,	1		. 23350333	5/2013	3	

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



CK 3578

Date of Notification (1) 9/16/13				Building O				ome								
Agencies Notified Type Notification			treet Ad East	dress 50th Stre	eet			E P	12- 12- 13-	l W	E		7			
EPA Initial Amended Amendment				e, Zip Cod each No		8			15.0		.52		1			
DOH justification) Cancellation	ncluding	1000	lame of o	Contact		ĺ	/ L	SEP)Tele	рьоре М	lumber		Í	130a.i		
			FACIL	ITY INFO	RMATIC	ON .					į.	1				
Name of Facility Where Abatement is Taking William & Paula Vinsko Private Ho							S	Facility (4 hool (K-1) ubchapter	2)	r than w		- Parameter				
9 East 50th Street						l	x O	ther (i.e. p c.)	rivate 8	comme	rcial bu	ildin	igs, h	ome	3,	
City (5) Brant Beach NJ 08008		<i>a</i>				1	Square 1000-		# of 1.5	Floors		Bldg 35	g. Ag +	е		
County (6) Ocean		0	County C	ode (7) SE ONLY)			Curren	t Use (Prid	or if bei	ng demol	lished)					
Name of Monitoring Firm Hired by Building (Owner (8)		ASCM	No.		Name o		ement Con	tractor	(9)						
Street Address						Street A										
City, State, Zip Code						ty, State, Zip Code Vest Berlin NJ 08091										
Project Manager for Monitoring Firm	7	Геlephor	ne No.		Telepho 856-7	one No			License							
Start Date (10)		pletion [Date (11)		Name o	of OSH	A Monitor		00727							
9/17/13 Occupancy Status During Abatement (Chec	9/20/13	CONTRACTOR NA				Same Street A										
Facility Closed/Vacated During Entire Abatement Performed Outside of Norm Other – Describe:	Period of A	batem	ent		_	City, St										
Scope of Work (Check All That Apply)										75						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		tenova emoliti	75970 900			Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure										
		Locati	on										bate	ment		
Location of	1	Vormal	İy		De	scription	of				-	_	Ту	pe		
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	d Sole intenar todial S (12)	nce/		thermal surfa	taining M I systems icing, VA miscellan	insula T, or		(Amount Specify F or LF)	Kellioval		Repair	Encapsulate	Enclosure	
Exterior Siding	+		X		Exte	erior Sic	dina		15	500 SF	x					
Exterior ording						9					1					
												4				
Name of Registered Waste Hauler		l N	JDEP W	/aste	Cubic	Yards		Name of	Regist	ered I an	ndfill					
United Containers		H	lauler ID 2459			Waste G.R.O.W.S.										
City, State Elm NJ					Dispo 9/20/	sal Date /13		City, Sta Morris		A 1906	57					
Completed by Anthony T Perna	Title Pres	ident			8	Signature					Date 9/16/13					



Print Form

CK 3577

Date of Notification (1) 9/16/13	,			Building O as Gruga					3 /	, (E	I. W		T	7			
Agencies Notified Type Notification			treet Ad 34 Oce	dress anview				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	C.F.	D 0 0	2242						
EPA Initial Amended Amendment				e, Zip Cod a Park N		08 (L	ong B	each Twp		P 2 0	2013		1				
Emergency (i justification) DCA Emergency (i justification) Cancellation	ncluding	1 58	lame of Thoma:	Contact S				4	Tele	nhone N	lumber			A STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STA			
			FACIL	ITY INFO	RMATIO	N						- Ully	THE PARTY OF				
Name of Facility Where Abatement is Taking Thomas Grugan Private Home	Place (3)						Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12)										
Street Address 34 Oceanview							o et	ther (i.e. pri c.)			rcial buil			es,			
City (5) Peahala Park NJ 08008 (Long Be	ach Twp.)					Square 1000-		Floors		81dg. / 85 +	Age					
County (6) Ocean			County C	ode (7) ISE ONLY)			Curren	t Use (Prior	if bei	ng demol	lished)						
Name of Monitoring Firm Hired by Building C	Owner (8)		ASCM	No.			of Abate	ement Cont	ractor	(9)		154.0					
Street Address							Address										
City, State, Zip Code			-			City, S	Box 329 State, Zip Code										
Project Manager for Monitoring Firm		15	Telephor	ne No.		Teleph	none No			License			-				
			856 Completion Date (11) Name							00727							
Start Date (10) 9/17/13	Scheduled 9/20/13	l Com	pletion [Date (11)		Name Sam		A Monitor									
Occupancy Status During Abatement (Chec	k Only One)				Street	Address	5									
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe:	Period of Abnal Facility I	atem Hours	ent	-	_	City, S	state, Zip	Code									
Scope of Work (Check All That Apply)																	
≥3 sf or ≥3 if ≥160 sf or ≥260 if	-	novat moliti					Mini	Containme -Enclosure rebag Proce	edure								
	T						1 Non	-Exempted	(*) an	d Non-Fr	Table Pr	0200	re temen	-			
720		ocation											ype				
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used	Solel itenar	y by ice/	Asbest (i.e.	os Conta thermal surfac	aining M system sing, VA	tion of ng Material (ACM) tems insulation, , VAT, or ellaneous)			mount Specify or LF)	Removal	Repair	Encapsulate	Enclosure			
Exterior Siding			х		Exte	rior Si	ding		18	00 SF	x						
												+	+				
Name of Registered Waste Hauler	1	IN	JDEP W	/aste	Cubic	Yards		Name of F	Regist	istered Landfill							
United Containers		Н	Hauler ID No. of Wa 22459				Monto			R.O.W.S.							
City, State Elm NJ					Dispos 9/20/	al Date)	City, State Morrisvi		A 1906	7						
Completed by Anthony T Perna	Title Presid	dent			S	Signature Date 9/16/13											

Marie C

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

(1)										_	-		1.17	15	7000		
Date of Notification (1) 9 - 11 - 2013			Name of P.S.E.	f Building (G.	Owner/O	perator ((2)		19						7 1		
Agencies Notified Type Notification EPA Initial			Street A 4000 H	ddress HADLEY	' ROAL)				S	EP .	2 0	2013		Ü		
DEP Amended Amendment #				ite, Zip Co H PLAIN), NJ. 0	7080						7		1		
Emergency (ir justification)	ncluding		Name of	f Contact		,	2		Teler	hnn	е Мил	nher			y		
DCA Cancellation				LITYINFO			Be	25	_						7		
Name of Facility Where Abatement is Taking	Place (3)				T	Type o	of Facility (4	4)								
PSE & G Street Address CORNER OF COLONIAL	17	_ 4	911	501		1,1,5		School (K-12 Subchapter Other (i.e. pr	g (Other				lings,	home	es,		
City (5)	C);	70,	4~/	SMDE	5/1	100,		tc.) e Feet	# of F	loor	s	В	ldg. A	-	-		
County (6)	-22		County	Code (7)				375 nt Use (Prio		/	l' - h	9	gg x	65	SYP:		
BERGEN				USE ONLY)	-	_	Currer	Sul		•			5 2				
Name of Monitoring Firm Hired by Building O ENVIRONMENTAL TACTICS	wner (8)		ASCN 004					ement Conf	ractor (9	9)		0711111					
Street Address 64 BROAD STREET						Street A		s EHEAD A	VE.	715				14 H12-5			
City, State, Zip Code MATAWAN, NJ 07747	City, State, Zip Code						state, Zip Code TH RIVER, NJ 08882										
Project Manager for Monitoring Firm TOM GEIGER		Telepho	ne No. 92-2217		Telepho 732-4	one No).		Lice	nse N							
Start Date (10)	Schedule			Date (11)		Name o	of OSH	A Monitor YSTEMS	OFA								
9/23//3 Occupancy Status During Abatement (Check	Only On	<u>/</u> <i>込</i> e)	9//	13_		Street A			OFA	IVIL	KICA)					
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma	eriod of A	batem	ent			396 V City, St		EHEAD A	VE.								
Other - Describe: Metastry after	erata	2)	only		_			VER, NJ	08882	2							
Scope of Work (Check All That Apply)	-						1			10221.774							
≥3 sf or ≥3 if ≥160 sf or ≥260 if	property.	enovat emoliti		nent with Negative Pressure re ocedure ed (*) and Non-Friable Procedure													
	Is	Location	on				S NOI	i-Exempled	() and	NOI	-rnap	le Procedure Abatement					
Location of	l N	lormall d Solel	у			scription						-	Ty	pe T			
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mai	ntenan odial S (12)	nce/		thermal surface	aining Ma systems cing, VAT niscelland	insulat T, or		(Sp	ecify or LF	,	Removal	Repair	Encapsulate	Enclosure		
CONTROL ROOM	163	V	INA	1000	10'+	· []	. 0 4	D. 1510	60	າ '	SF	V					
CONTROL ROOM		\triangle		AND				ANELS	60	<i>)</i> `	7						
				AKI	Dus	I RE	MCYA	4/									
Name of Decisions of Markettering		1 50	IDEE		16	· · ·											
Name of Registered Waste Hauler WASTE MANAGEMENT		H	JDEP W auler ID I 125		of Was				of Registered Landfill DWS NORTH								
City, State					Dispos	sal,Date	_	City, State									
ELIZABETH, NJ					9	125	/12	MORRIS		Ξ, Ρ	Α				1		