A feet and the second s			(i uisua	III LO NJA	4C 8:60 8	ind 12:12	(0)						
Date of Notification (1)			Name Prine	e of Buildi ceton U	ng Owner niversit	r/Operato y, Trust	ees of Prince	eton Un	E			The second second	
Agencies Notified Type Notifica Type Notifica Initial Amende Amende Amendr	d .		EA M	t Address McMillar State, Zip ceton, N	n Buildir Code	ng	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	SEF	2 20	16	The second state of the second	The second second second	
Emerger	ncy (includ	ing		of Conta		14	ASE	FSTOS	C (2) 1994	7/71			
DCA justificati			1	Ortega	CI		7100	- 4 Te	lephone N	imbe	Ž.		
Name of Eacility Whose Abote 112			FA	CILITY IN	FORMA	TION		_		-			_
Name of Facility Where Abatement is Ta Princeton	aking Place	e (3)					Type of Facilit	ty (4)					
Street Address							School (I						
11 Lake Lane									er than K- & commer		ilding	s, hon	nes.
City (5)							etc.) Square Feet		f Floors				
Princeton							3,900	3	1110015		Bldg. 40+	Age	
County (6) Mercer			County	Code (7))		Current Use (F	Prior if bei	ng demolis	shed)			
Name of Monitoring Firm Hired by Buildir				USE ONL	.Y)		Residential						
Hatch Mott MacDonald	ig Owner ((8)	ASC	M No			of Abatement C ervices, LLC		(9)				
Street Address							Address						
111 Wood Avenue South City, State, Zip Code						[T000035777777	Vest Lincoln	Highwa	y, Suite	500			
Iselin, NJ 08830	n, NJ 08830						ate, Zip Code 1, PA 19341						27.5
Project Manager for Monitoring Firm	ct Manager for Monitoring Firm						one No.		License 1	do			
	n MacPherson						72-8884		01161	•0.			
Start Date (10) 9/2/16	Schedu	uled Co		Date (11))	Name of EMSI	of OSHA Monito	Dr I			10-70		
Occupancy Status During Abatement (Che	eck Only C	One)					Address						
Facility Closed/Vacated During Entire Abatement Performed Outside of No.	Period of	Abata	ment			200 F	Route 130 No	orth					
Other - Describe:		,			_		ate, Zip Code iminson, NJ						
≥3 sf or ≥3 If ≥160 sf or ≥260 If	Laurent .	Renova Demoli				F	Full Containn Mini-Enclosu	re	Negative f	Pressi	ıre		
						×	Glovebag Pro Non-Exempte	ed (*) and	Non-Friat	ole Pro	ocedu	e	
9 8		s Locat									Abat	emen	t
Location of Asbestos-Containing Material (ACM)	Use	Normal ed Sole	ly by			cription o				-	T	/pe	Т
TO BE ABATED In Facility (13)	Ma Cus	todial S (12)	nce/ Staff?	(i.e.	thermal s	aining Ma systems i ing, VAT iscellane		(Sp	nount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A							<u>m</u>	1	ate	Ге
Exterior Windows		X			Car	ulkings		255	5 LF	X			
Exterior Windows	Exterior Windows						e Hung	12	EA	Х			
ame of Registered Waste Hauler													
aste Management of New Jersey		1178783	IDEP Wa Juler ID N	10000	Cubic Y of Waste				ed Landfill				
y, State					40		GROW	S Land	till				
enton, NJ					Disposa TBD	Date	City, Stat Morrisv			-			
mpleted by	Title					nature	IVIOITISV	ille, PA		to			
e White	Projec	ct Mar	nager		Jig /		pl V W	14 -to (ab 9	1 1	10		
	-				1 (1/3 2.10	18 18 14 VA	MILALS	1	1 1 1 1	1		

Date of Notification (1)			Manage	(0.11.0					I NA	E	E	
8/29/16 Blue acres exempt				of Building Own Jersey D.P.N		r (2)	ID E	<u> </u>	<u>U</u> <u>W</u>	_15	-	
Agencies Notified Type Notific	ation			Address est State st.			In	EP	2 20	16		丌
DEP X Amend Amend			City, St	ate, Zip Code)Li			1	
Emerge	ency (including		12.70.00.00	of Contact			A COLOR	Sphone I	THOO	ROL	&	_
DOH justifica				r Fernandez			Афре	iepnone i	Numner			
Name of Facility Where Abatement is	Taking Place (3)	FAC	ILITY INFORM	ATION	Type of	Equility (4)					
Blue Acres Flood Buy Out Pro	perty	3)					Facility (4)					
Street Address 6 Squire St.	1000					Sul	nool (K-12) bchapter 8 (Oth ner (i.e. private	er than k	(-12) ercial bui	Idinas	. hom	ies.
City (5)						etc Square I	.)	f Floors			D. S. S. S. S. S. D.	
East Brunswick						1500	2		;	Bldg. / 50+	age	
County (6) Middlesex				Code (7) USE ONLY)		Current Aband	Use (Prior if bei oned	ing demo	lished)			
Name of Monitoring Firm Hired by Build Bioterra Solutions	ding Owner (8)		ASC	√l No.	18366		nent Contractor viromental	(9)				
Street Address 1130 West Chestnut St. Suite	1224					Address Kinnelor	n RD					
City, State, Zip Code Union NJ 07083				G.		tate, Zip (
Project Manager for Monitoring Firm			Telepho		9393110103103	one No.		License	No.			
Richard Aguinera Start Date (10)	1 0 - 1 - 1			94-3762		218-088		01228				
8/29/16	9/7/16		npietion	Date (11)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	of OSHA Juzzi En	Monitor vironmental					
Occupancy Status During Abatement (Address Kinnelon	. Dd			74		
Facility Closed/Vacated During En Abatement Performed Outside of Other – Describe:	tire Period of A Normal Facility	Abaten Hours	nent 3		City, S	tate, Zip C	Code					
Scope of Work (Check All That Apply)					Killin	elon, NJ	07405					
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		Renova Pemolit			×	Mini-E Glovet	ontainment with nclosure pag Procedure xempted (*) and	(0.77)			e	
	Is	Locati	on					4 11011 1 11	T T	Abate	emen	t
Location of		lormali d Sole			Description					Ty	pe	
Asbestos-Containing Material (ACM TO BE ABATED In Facility (13)) Ma	intenar odial S (12)	nce/	sur	ontaining M nal systems rfacing, VA er miscellan	insulation T, or	n, (S	mount specify or LF)	Removal	Repair	Encapsulate	Enclosure
Basement/first floor	165	INO			tair traas	lo.	-	20 -6				
attic windows			X	gray exte	stair treac			2 sf	x			
roof			X	- 37/ 1	k tar flas			0 sf	X		-	
siding around house		-	X		ansite sid			84 sf	x			
Name of Registered Waste Hauler		N	JDEP W		oic Yards		ame of Registe		155		-	
Yannuzzi Group		Н	auler ID 7467		Vaste		rows/Tullyto					
City, State Kinnelon, NJ				Disp 9/2/	oosal Date /16	100000	ity, State Iorrisville					
Completed by John Mucha	Title projec	ct ma	nger		Signature	Much	'n		Date 8/29/16	3		

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

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

CU# 3085

Date of Notification (1)	T	Name of B	Buildina (Owner / Operat	tor (2)	Trans.				
8/30/16		VERIZON	COM	MUNICATION		IIN E C	EIL	W	5	1
Agencies Notified Type Notification EPA		Street Add		LAN/EAULE				<i>U</i>	7	
☐ DEP ☐ Initial		City, State		AVENUE		HH 51086	ا م	2010	- 111	
□ DOL □ Amended		LAKEWO				U LU SESEPI	5.5	BH6	H	4
DOH Emergency	1	Name of C				1	Telepho	one N	umb	er
☐ DCA ☐ Cancellation	1	ALEX BA	YLOR		i I	ASBEST!				
		FACILI	TY INFO	DRMATION	-	LIC	EDSIGN	<u>G</u>		
Name of Facility Where Abatement is Ta	aking Place (3	3)		Type of Fac						
Street Address				School	The second secon					
216 LEXINGTON AVE					pter 8 (Other t					
2 TO LEXINGTON AVE				Other (i		ommercial buildir			tc.)	
City (5) County	(6) Co	unty Code	(7)	2000	1 N 300 N	2	Bldg. Ag	е		
LAKEWOOD OCEA		,	(.)		(Prior if being	demolished)				
				COMMUNI		domonoriody				
Name of Monitoring Firm Hired by Buildi	ng Owner (8)	AS	CM No.		atement Contra	actor (9)				
USA ENVIRONMENTAL MANAGE	MENT, INC.				ENVIRONME	NTAL INC				
Street Address 8436 ENTERPRISE AVE				Street Addre		•				
City, State & Zip Code				City, State &	Zin Code					
PHILADELPHIA PA 19153				BRISTOL,						
Project Manager for Monitoring Firm		hone Num	ber	Telephone N		License N	Number			
MARK JENKINS		365-5810		215-788-60			0050	9		
	ed Completion			Name of OS	HA Monitor ENVIRONME	NITAL INC				
Occupancy Status During Abatement (CI			10	Street Addre		NTAL INC				
☐ Facility Closed/Vacated During E	ntire Period o	of Abateme			ER STREET					
Abatement Performed Outside of		ırs – 7am t	o 3pm	City, State &						
Describe: 5:00 PM - 1:30 AM				BRISTOL, I	PA 19007					
Facility Occupied During Abatem Scope of Work (Check all that apply)	ent			1						
ocope of work (check all that apply)					⊠ Full Co	ntainment with N	Jenative	Press	ure	
≥3 sf or ≥3 lf	\boxtimes	Renovation	on			nclosure	rogative	1 1000	uic	
≥160 sf ≥260 lf		Demolitio	n		Glove B	Bag Procedures				
1						empted and Nor				_
Location of Asbestos-Containing	1. 1	ocation ally Used		Description Asbestos-Con		Amount	Aba	temer	nt Ty	/pe
Material (ACM)		lely by	5	Material (A		(Specify SF or LF)			Е	
TO BE ABATED	The second at the second	enance or		(i.e., thermal s	ystems		Ren	Re	nca	Encl
in Facility (13)		dial Staff? (12)	10.7075	sulation, surfactor other miscell			Remova	Repair	Encapsulate	Enclsoure
, ,		No N/A	1 0	TOTAL TRIBUCIA	aricous)		=		ate	.e
BASEMENT BATTERY AREA				VAT/MAS	TIC	64 SF		П		П
									T	Ħ
									4	
Name of Registered Waste Hauler		NIDEBA	Nacto C	ubic Yards	Name of Doo	istered Landfill				
value of regional value riadici		Hauler ID		f Waste	ivallie of Reg	istered Landilli				
SERVICE TRANSPORT GROUP, INC) .	20990			MINERVA L	ANDFILL				
City, State		- W-5011.101.11.11.11.11.11.11.11.11.11.11.11		isposal Date	City, State					
NEW CASTLE, DE 19720				BD	WAYNESBU	JRG, OH 4468				
Completed By (Print or Type) PATRICK T. DeCARO		Title Estimate		ignature	A 01	1.1.	Date	c		
ATTAON T. DEGANO		∟Suilid[OI	fatrick	J. D.	ow/ye	8/30/1	o		

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		1	/ 	0)E	57	14)
2	C	E	-	\mathbb{V}		In		

Date of Notification (1)			(,		(D NJAC					1	~ 0	ر لم)	74	2	
8/29/16 Blue acres 6	exempt				of Building Jersey [r (2)								
Agencies Notified EPA	Type Notification Initial				Address est Stat	e st.) E C	E		E				
DEP X DOL	Amended Amendment Emergency		_	City, St Trent	ate, Zip C on	ode) SFI	p 2	2016	,	-	\parallel		
DOH DCA	justification) Cancellation				of Contact r Ferna			164	bul.		ephone		er	1		
Name of Facility Where A	hatament is Takin	a Diago /2	1	FAC	ILITY INF	ORMAT	ION	-	ASBEST	OS C	OMTRO	OL 8	ž			
Blue Acres Flood Bu	y Out Property	y Flace (3	")					Typ	e of Facility		ING_			_		
Street Address 7 Squire St.								×	School (K- Subchapte Other (i.e.	r 8 (Oth	er than h & comme	<-12) ercial	buil	dings	, hom	es,
City (5) East Brunswick								Squ 300	etc.) uare Feet)	# o	f Floors			ldg. /	Age	
County (6) Middlesex					Code (7) USE ONL	0			rent Use (Pr andoned	ior if bei	ng demo	olishe	d)			
Name of Monitoring Firm I Bioterra Solutions	Hired by Building (Owner (8)		ASCI	M No.				atement Co i Envirome		(9)					
Street Address 1130 West Chestnut	St. Suite 1224	1					Street 135 I		ess elon RD							
City, State, Zip Code Union NJ 07083							100000000000000000000000000000000000000		Zip Code NJ 07405	5						
Project Manager for Monite Richard Aguinera	oring Firm			Telepho	ne No. 94-3762		Teleph 908-2		No. :0880		License 01228					
Start Date (10) 8/29/16		d Con	npletion	Date (11)				SHA Monitor								
Occupancy Status During	Abatement (Chec	k Only On	e)	-			Street									_
Facility Closed/Vacate Abatement Performed Other – Describe:	ed During Entire F d Outside of Norm	Period of A al Facility	batem Hours	nent			City, S	tate,	elon Rd Zip Code							
Scope of Work (Check All	That Apply)						Kinne	elon	, NJ 0740	5						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-	enova emoliti				×	M G	ull Containm lini-Enclosure lovebag Pro- on-Exempte	e cedure					۵	
		Is	Locati	on					orr Exemple	4 / / 4116	21101111	Idolo	-	Abate	ement	
Location o			ormall Solel				scription					F		Ту	ре	
Asbestos-Containing M <u>TO BE ABAT</u> In Facility (13)	ED	Maii	ntenar odial S (12) No	ice/		thermal surfac		insu T, or		(S	nount pecify or LF)		Removal	Repair	Encapsulate	Enclosure
roof of garage	/shed	100	110	×		hlack	tar pa	nor		61	25 sf					_
1001 of garage	, strict		^		DIACK	стаг ра	ibei		02	25 SI)					
Name of S. J.																
Name of Registered Waste Yannuzzi Group	Hauler		20,000,00	JDEP W auler ID		Cubic `of Was			Name of			ifill				
			17	467		20			Grows/		wn					
City, State Kinnelon, NJ						Dispos 9/2/16	al Date		City, State Morrisv							
Completed by John Mucha		Title projec	t mai	nger		Si	gnaturé	V	Juch			Date 8/29	/16			

Date of Notification (1)				Mana	- (D // //		-		-)			
8/29/16 Blue acres	exempt				of Building Jersey [r (2)						
Agencies Notified	Type Notification	1			Address	-		MEC	E	1 11/7	PP			
□ EPA	☐ Initial			20 W	lest State	e st.	4	11)	5			111		
DEP X DOL	Amended Amendmer		_	City, S Trent	tate, Zip C ton	ode		III SEP	2	2016	\parallel			
□ DOH	Emergency justification	(including)			of Contact		-1	1		lephone N	Vumbe	#		
☐ DCA	Cancellatio				er Fernar			0.00						
Name of Facility Where	Abatament is Taki	na Diana /2		FAC	CILITY INF	ORMAT	ION	ASBESTO	S CO	MTROL	8			
Blue Acres Flood B	uv Out Proper	ng Place (3 tv)				h	Type of Facility	(4)NSII	VG				
Street Address	,	,						School (K-Subchapte	12)	or than V	10)			
5 Squire St.								Other (i.e.	private	& comme	rcial bu	ilding	s, hon	nes,
City (5)								etc.) Square Feet		f Floors				
East Brunswick								1800	2	1110015		Bldg. 50+	Age	
County (6)				County	Code (7)			Current Use (Pr	ior if bei	na demol	ished)			
Middlesex				(STATE	USE ONLY)		Abandoned		•				
Name of Monitoring Firm Bioterra Solutions	Hired by Building	Owner (8)		ASC	M No.		Name	of Abatement Co	ntractor	(9)	1/2			
De tre troch i executation de reconstruit execute de succession de la construit execute de succession de la construit execute							Yanr	nuzzi Envirome	ental					
Street Address 1130 West Chestnu	t St. Suite 122	И						Address						
City, State, Zip Code	t ot. oute 122	T						Kinnelon RD						
Union NJ 07083								tate, Zip Code elon NJ 07405	i					
Project Manager for Moni Richard Aguinera	toring Firm		Telepho 973-4	one No. 94-3762			one No. 218-0880	r-15.5	License 01228	No.				
Start Date (10)		Scheduled	Cor	npletion	Date (11)		Name	of OSHA Monitor	}					1000
8/25/16		9/7/16					Yann	uzzi Environm	ental					
Occupancy Status During								Address						
Facility Closed/Vacat Abatement Performe Other – Describe:	ted During Entire	Period of Al	aten	nent				(innelon Rd						
Other – Describe:	d Outside of Norn	iai Facility i	Hours	3				ate, Zip Code	_					
Scope of Work (Check All	That Apply)						KIIIIIE	elon, NJ 0740)					
☐ ≥3 sf or ≥3 lf		Пр	nova	tion							322000			
≥160 sf or ≥260 lf		The same of the sa	molit				×	Full Containme Mini-Enclosure	ent with	Negative	Pressi	ıre		
							×	Glovebag Prod		l Non Tair	-bl- D-		120	
		le l	ocati	on				Non-Exempted	ı () and	NON-FIE	able Pro	SVOMSON	re emen	t
Location of	of	No	rmall	ly		Don	cription	of					/ре	
Asbestos-Containing N TO BE ABA	Material (ACM)	Used Main				os Conta	aining Ma	aterial (ACM)	Ar	nount			Ш	
In Facility		Custo	dial S	141, 201, 177	(i.e.		systems ing, VAT	insulation,		pecify or LF)	Rer	Re	nca	Enc
(13)			(12)				iscellane		Oi.	OI LI)	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A							<u> =</u>	1	ate	ē
Basemer	nt			Х	aiı	r cell pi	pe insi	ulation	12	25 sf	x			
Basemer	nt			х			fitting			0 sf	X			
Baemen		X		flu	cemen	t	4	sf	x					
									+			-		
Name of Registered Waste	Hauler		N.	JDEP W	aste	Cubic Y	'ards	Name of F	Register	ed Landfi	11			_
annuzzi Group	nnuzzi Group						е	Grows/1						
City, State							I Data							
(innelon, NJ						Disposa	ıı Dale	City, State Morrisvi						
Completed by		Title	- 201 111			Sic	hature	00	-	In	ate			
ohn Mucha	- Action in Page 1	project	mar	nger			His	(1)	1. in	30.9	/29/16	ì		
			_				N. U.V	2 1011	1 1					

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

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

Date of Notification (1)			7217-201-2	1						~			22		
8/29/16 Blue acres e	exempt			Name	of Building Own Jersey D.P.N	er/Operato 1.C.	or (2)								
Agencies Notified	Type Notification			Street	Address								V []	r	· · · · · · · · · · · · · · · · · · ·
☐ EPA	Initial				est State st.) 厚	C	E		\mathbb{V}		
X DOL	Amended Amendmen			City, S Trent	tate, Zip Code on				沪	100					
□ DOH	Emergency justification)		g	Name	of Contact			- 11	$\frac{11}{7}$			0 (1016	- 1	1/1/
☐ DCA	Cancellation			Walte	er Fernandez			11	1			Ÿ.			
Name of Facility Where At	patement is Takir	ng Place	(3)	FAC	ILITY INFORM	ATION	LTu	no of Facility			-00	00	WTR	OL.	ζ,
Blue Acres Flood Bu	y Out Propert	у	(0)				l I y	pe of Facility School (K-	(4) AS	BES	ICE	1811	NG_		
Street Address							╁	Subchapte	r 8 (Oth	er than	1 K-12)			
Garage at 9 Squire S	it.						×	Other (i.e. petc.)	private	& com	mercia	al bui	Idings	, hon	nes,
City (5) East Brunswick							1000000	uare Feet	1 1 2	f Floor	s		Bldg.	Age	
County (6)				Carrati	0-1-(7)		25		_ 1				50+		
Middlesex				(STATE	Code (7) USE ONLY)		Ab	rrent Use (Pri andoned g	or if bei 1araae	ing der	nolish	ed)			
Name of Monitoring Firm H	ired by Building	Owner (8)	ASC	M No.	Name	1	batement Cor	W. Street						
Bioterra Solutions Street Address						Yan	nuzz	zi Envirome	ental						
1130 West Chestnut	St. Suite 1224	4				Street 135		ress nelon RD							
City, State, Zip Code								Zip Code							
Union NJ 07083								NJ 07405							
Project Manager for Monito Richard Aguinera	ring Firm			Telepho	one No. 94-3762	Telepi		No. -0880			se No				
Start Date (10)		Schedul	ed Co		Date (11)			SHA Monitor		0122	28				
8/31/16		9/7/16			,			i Environm	ental						
Occupancy Status During A		(5)	3/0			Street								-	
Facility Closed/Vacate Abatement Performed	d During Entire F Outside of Norm	Period of a	Abater	nent			S CONSTRUCTION OF THE SECOND	elon Rd							
Other - Describe:		ar r donit	rioui					Zip Code , NJ 07405	;						
Scope of Work (Check All T	hat Apply)							,	<u> </u>						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	Renova			×	7 11	ull Containme	ent with	Negat	ive Pre	essu	re		
2100 \$1 01 2200 11		×)emoli	tion			- M	lini-Enclosure lovebag Proc							
		1				×	N	on-Exempted	(*) and	Non-F	riable				
Location of			Locat Vormal											ement pe	:
Asbestos-Containing Ma	iterial (ACM)	Use	d Sole	ly by	Asbestos Co	escription ntainina M		al (ACM)	An	nount	t		,		
TO BE ABATE In Facility	<u>D</u>	11 (1.1.2011)	odial S		(i.e. therma	al systems acing, VA	s insu	lation,	(S	pecify		Re	_Z D	Enca	Enc
(13)			(12)			miscellan)	SF	or LF)		Remova	Repair	Encapsulate	Enclosure
	-10	Yes	No	N/A								<u>a</u>		ate	гe
Garage windo	ows			×	gray exteri	or wind	ow g	lazing	3	2 If					
Garage doo		х	white ga	rage do	or ca	aulk	5	0 If							
											1				
Name of Registered Waste F	lauler		100000	JDEP Wa	W. C.	Yards		Name of R	egister	ed Lar	dfill				
Yannuzzi Group				467	2	1316		Grows/T	ullyto	wn					
City, State Kinnelon, NJ					Dispo 9/2/1	sal Date	^	City, State							
Completed by		Title				Signature	4	Morrisvil	ie	- 1	Data				
lohn Mucha		projec	t ma	nger		1	_ /	ach			Date 8/29	/16			

 $\ensuremath{^{\star}}$ Do not use this form for asbestos licensure exempted activities.

Date of Notification (1)			7	Mama	of Duildin	~ 0	0	(0)		1/1/	-	1			
8/29/16 Blue acres	exempt			New	of Buildin Jersey	D.P.M.(Operato C.	r (2)							
Agencies Notified	Type Notification	1		523450.0000	Address										
EPA DEP	Initial Amended				lest Stat	00000000000									
× DOL	Amended Amendmen			Tren	State, Zip (ton	Jode		Tr		9 6	3 0	F			
□ DOH	Emergency justification			Name	of Contac	t			n.L	Telephon	e Numi	per	E,	F	1
□ DCA	Cancellation	n		The second	er Ferna	1011/90 FAREN		To the second se	31	609-57		-		-11	
Name of Facility Where	Abatement is Takir	ng Place (3	3)	FAC	CILITY IN	FORMAT	ION	Type of Ra	cility (4)	SEP	9-7	714		1	
Blue Acres Flood B	Buy Out Propert	у	7.0						ol (K-12)	ULI	4 6	U1	0	to and	<i>i</i> .
Street Address								Subor	anter 9-4	Other-than	+ K-12)			i	
9 Squire St.								Other etc.)	(i.e. priva	ate & com	mercial VSING	bui	lding	, hon	nes,
City (5) East Brunswick								Square Fee	et	# of Floor	S	E	3ldg.	Age	-
County (6)				County	Code (7)			Current Use		2 haina dar	nalisha	0.77	50+		
Middlesex					USE ONL			Abandon	ed ed	being der	nonsne	1)			
Name of Monitoring Firm Bioterra Solutions	Hired by Building	Owner (8)		ASC	M No.			of Abatemer							
Street Address								uzzi Envir	omenta	al 					
1130 West Chestnu	t St. Suite 122	4						Address Kinnelon F	RD						
City, State, Zip Code Union NJ 07083								tate, Zip Coo							
Project Manager for Moni	itorina Firm			Tolonk	N.			elon NJ 07	405						
Richard Aguinera	noring r intr			Telepho 973-4	one No. 94-3762)		one No. 218-0880		Licen 0122	ise No.				
Start Date (10)			d Cor	npletion	Date (11)			of OSHA Mo							
8/31/16 Occupancy Status During	Abatament (Chee	9/7/16	- \					uzzi Envir	onment	al					
Facility Closed/Vaca								Address (innelon R	Ч						
Abatement Performe	ed Outside of Norm	al Facility	Hours	nent S			100000000000000000000000000000000000000	ate, Zip Cod							
Other - Describe: _								elon, NJ 07							
Scope of Work (Check All	That Apply)						Sec.								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		_	enova emolit				×	Full Conta Mini-Enclo	ainment v	vith Negati	ive Pres	ssur	re		
							×	Glovebag	Procedu	re		-			
		ls l	Locati	on			120	Non-Exen	ipted (*)	and Non-F	-riable i			e emen	t
Location		N	ormal Sole	ly		Des	cription	of						ре	
Asbestos-Containing N TO BE ABA		Mair	ntenar	nce/	Asbes (i.e.	tos Conta	aining Ma	aterial (ACM) insulation,		Amount (Specify		71		g	Ш
In Facility (13)	у	Custo	dial S (12)	statt?		surfac	ing, VAT	, or		SF or LF)		Remova	Repair	caps	Enclosure
78 0 T C		Yes	No	N/A		outet III	iisceiiarie	eous)			1	2	air	Encapsulate	sure
1st floor kite	chen			X	sink c	oating a	and nai	neling glue		269 sf					
living roo	om			X	On ne o	NEW .	coverir		-	320 sf	X	-			
2nd floor bed				X		100000000	VAT	19			X	+			
exterior	atum seleben daru		×			050,0010	0.0		120 sf	X	-				
Name of Registered Waste			N.	JDEP W	'aste	Cubic Y	g ,roofii ′ards			2938 sf	dfill X				_
Yannuzzi Group		Ha	auler ID		of Wast			vs/Tully		iann					
City, State			1.7	107		Disposa	al Date	City, S		×					
Kinnelon, NJ						9/2/16	1		risville						
Completed by John Mucha		Title project	mar	nder		\$ig	nature		0		Date				
		project	illai	igei		1	41	1 ma	2_		8/29/	16			

#1945

Date of Notification (1)			Nam	e of Buildi	na C	wner/Operator	(2)	TEP	BIL	₩/	B	1
08 /2	20 120	216		0			Gode) 5 6	<u> </u>	W	5	
Agencies Notified	Type Notification	n	Stre	et Address		NO TOP	COH	31000	1-23	لــــــــــــــــــــــــــــــــــــــ	- 1	
□ EPA	Initial		L	17 1	1	. KA A	· · · ·	十 SEP	2 1	2016	1	U
DOLWD	Amended		City.	State, Zip	Cod	e MAI	7 - 11	Ц, о-,				
DOH DOH	Amendment							+ ~	000			
DCA (NJAC 5:23-8)	Emergency (including	Nam	e of Conta	01	SIOV	010	ASBESTE	YS CO'	TÀC	118	
(NOAC 5.25-6)	Cancellation		1			20 -		Telephone	Mumber			
						PUGAPUE	AF				-	
Name of Facility Where A	batement is Takir	ng Place (3)	FA	CILITY	NFC	PRMATION	T	///				
RESIDE		ig riace (5)					Type of Facilit					
Street Address	NUC						Subchante	12) r 8 (Other than I	(-12)			
Street Address							Other (i.e.,	private and con	nmercial I	ouildin	as.	
-							nomes, etc	:.)			3-1	
City (5)							Square Feet	# of Floors		Bldg. A		
MOCPES	TOWN						1125	3		9	8	
County (o)			Cou	nty Code (7)(57	TATE USE ONLY)	Current Use (F	Prior if being der	nolished)			
BURLING.		2 (2)) 						
Name of Monitoring Firm	Hired by Building	Owner (8)	ASCM	No.			ent Contractor (9					
Street Address					.1	DLPHAL	ENVIR	BINING	ATT	L	L	C
Street Address					St	Cochadioss		~				
City, State, Zip Code					1	0 4	30X E	5297				
Oity, State, Zip Code						ty, State, Zip Co			2002	2000		
Project Manager for Monit	oring Eirm	Tol	anhana	NI-	1	KENT	ON Y	License No	086	55	\bigcirc	
1 Tojeat Manager for Monte	oning Firm	1 61	ephone	NO.	16	elephone No.	1-6-6-1	License No	i.			
Start Date (10)	Caha	duled Comple	de D		16	0484	12956	2 O V	2.2.	2_	B	
08_BO_12	2016	aulea Compil	etion Da	te (11)	Na	me of OSHA M	onitor					
			= '	2016	-							
Occupancy Status During Facility Closed/Vacated					Str	reet Address						
Abatement Performed	Outside of Normal	Facility Hou	ment	cribo	L			0.				
Time of Abatement:	AMP	M/PM		AM	Cit	y, State, Zip Co	de		t			
Scope of Work (Check all t	that apply)											
☐ >3 sf or >3 lf		Renovat	ion			☐ Full Conta	ainment with Ne	gative Pressure				
≥160 sf or ≥260 lf	•	Demolitic				Glovebag						
	/							on-Friable Proce	edure			
Location o	£	Is Local Norma							Al	atem	ent T	уре
Asbestos-Containing M		Used Sole		Ashe	etne	Description of Containing Mat		A 222 1114	R	R	皿	ш
TO BE ABAT	ED	Maintena		(i.e	., the	ermal systems in	nsulation.	Amount (Specify	Remova	Repair	ıca	iclo
IN Facility		Custodial (12)	Staff?		5	surfacing, VAT,	or	SF or LF)	Val	7	Encapsulate	Enclosure
(13)		Yes No	N/A		ot	her miscellaneo	ous)				ate	0
BASELIN				0.0.	-		1 i	:0 ()	FØ			
BASDIADI				7116	- 0	INSULA	HOM	30 L	- (
DOSCOVIER	_31			TLUE	1	ACKINO	5	2 SF	M	Ш	Ш	
RVEDNE	111			M	عاسا	-BOAK	40	25F	×			
KCOF				FLA	15	stinks		100 LF				
Name of Registered Waste		1111	JDEP V auler ID		Cut	oic Yards of	Name of Regis	stered Landfill		-		
HCPAH L	nullar	1-10		3330	vva	3	6100	w s				
City, State	2 5			,	Disp	oosal Date	City, State	5 %	0			
Trenton,	100				11	unus	Mou	15-160	1.1	7		
Completed By (Print or Type	e) Title		1	/		Signature	1 1	1-	Date			
KarlKarlel		Pers	ikt			1/1	200	-2	0/0	11	22	
SB-41	/	-							111	0/	10	1

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

		1	(Pursua	nt to NJA	AC 8:60 a	nd 12:12	20)	- Passey	1 [G		W [7
Date of Notification (1) 08-29-16				of Buildi Thoma	ing Owner as	/Operato	or (2)		-		<u> </u>	<u> </u>	7,	
Agencies Notified Type Notificatio	n			Address Grove				and the same of th		BEP	2 2	016		4
DEP Amended Amendmen Emergency		na	Irving		J 07111			Section of the Sectio	ASB	ESTOS	NSIN		L &	
DOH justification Cancellation	1)	-5		of Conta Thoma					Te	lephone	Numbe	er		
Name of Facility Where Abatement is Taki	na Place	(2)	FAC	CILITY IN	NFORMAT	TION								_
Commercial Building	ily Flace	(3)					Туре	e of Facility	(4)			128		
Street Address 1108 Grove St.								School (K- Subchapte Other (i.e.	r 8 (Oth	er than	K-12) ercial h	uilding	is hoi	me
City (5) Irvington								etc.) are Feet		f Floors			Age	
County (6) Essex			County (STATE	Code (7) Ly)		Curre	ent Use (Pri	or if bei	ng dem	olished)			
Name of Monitoring Firm Hired by Building N/A	Owner (8	8)		M No.				atement Con		(9)		-		_
Street Address						Street		ess	LU.					
City, State, Zip Code						100000000000000000000000000000000000000		ip Code			-			_
Project Manager for Manager	lanager for Monitoring Firm						n City	/ NJ 0708	37					
			Telepho			Teleph 201 2				License 01206				
Start Date (10) 09-07-16	09-10-	-16	mpletion	Date (11)			HA Monitor tracting L	LC				******	
Occupancy Status During Abatement (Chec		120				Street		7.7						
Facility Closed/Vacated During Entire Abatement Performed Outside of Norn Other – Describe:	Period of nal Facilit	Abater y Hour	ment s				ate, Z	ip Code						
Scope of Work (Check All That Apply)						Unior	1 City	NJ 0708	7					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demoli				v v	Min Glo	I Containme i-Enclosure vebag Proc n-Exempted	edure					
	Is	s Locat	ion				1101	Lxcmpted	() and	NOII-F II	able FI		emen	nt
Location of Asbestos-Containing Material (ACM)		Normal ed Sole	-			scription						T	уре	_
TO BE ABATED In Facility (13)	Ma	intena todial 5 (12)	nce/	Asbes (i.e		aining Ma systems cing, VAT niscelland	insula , or	(ACM) tion,	(Sp	nount pecify or LF)	Remova	Repair	Encapsulate	
	Yes	No	N/A								=		ate	
1st Floor		X				VAT			200	SF	X			T
2nd Floor		Х				VAT			30	SF	X			T
Roof		X Roof Materials 7200 S							0 SF	Х				
ame of Registered Waste Hauler		IN	JDEP W	aste	Cubic	/arda		None	'- '					
elfa Contracting LLC		H	auler ID I		of Wasi	te		Name of R Tullytow				ery F	acili	ty
ity, State					Disposa			City, State	- 54					
nion City, NJ empleted by					09-12-	.10	1	Tullytown	n, PA					

CHECK #4957

Date of Notification (1)			Name	of Building	Owner/	Operato	r (2)	TOTAL PROPERTY.				D D	70 400	
08/29/2016				ES FORT	NEY				1 [C_	E		/ [5	: [
Agencies Notified EPA DEP DOL Initial Amende Amendr	d		City, St	Address tate, Zip Co IAN NJ(de				S	EP	- 2	20	16	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	ncy (including ion)			of Contact					\ <u></u>	יא ד	ENVS	UNG	JL	&
Name of Facility Where Abatement is T	aking Diago /2	\	FAC	ILITY INFO	ORMAT	ION		-		E.C.	C-140	1140		
RESIDENTIAL	aking Place (3))					Type of Facility School (K-							
Street Address							Subchapte Other (i.e. etc.)	r 8 (Ot	ther than e & comr	n K-12 merci	2) al bui	ldings	s, hon	nes,
City (5) PITMAN							Square Feet 1500	# 2	of Floors	S		Bldg. 40+	Age	
County (6) GLOUCESTER			County (STATE	Code (7) USE ONLY)	-		Current Use (Pr RESIDENTI	ior if b	eing den	nolish	ned)			
Name of Monitoring Firm Hired by Build ACER ASSOC.	ing Owner (8)		ASCI	M No.		Name ASS	of Abatement Co URED ENVIR	ntracto	or (9) IENTA	LSE	ERVI	CES	INC).
Street Address 1012 INDUSTRIAL DRIVE			-			**************************************	Address CLEMS RUN							
City, State, Zip Code WEST BERLIN NJ 08091	MOLEIOATTILL NO 00002													
Project Manager for Monitoring Firm MATT DEPALMA			Telepho 856-9	one No. 05-7703			one No. 304-4676		Licen 0114		0.			
Start Date (10) 08/30/2016	Scheduled 08/31/2	d Com	pletion	Date (11)		Name EMS	of OSHA Monitor							
Occupancy Status During Abatement (C	heck Only One	9)					Address							
Facility Closed/Vacated During Ent Abatement Performed Outside of N Other – Describe: RESIDENTIAL	re Period of Al ormal Facility I	batem Hours	ent			City, S	RT. 130 NORT tate, Zip Code NAMINSON N		177					
Scope of Work (Check All That Apply)						Olivi	VAIVIII VOON IV	000	77					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	parameter .	enovat emolitio				2	Full Containme Mini-Enclosure Glovebag Prod Non-Exempted	e cedure					-	
	Is L	ocatio	n				1 Hom-Exemples	u () ai	id NOII-I	Habi	e F10	Abate	emen	t
Location of Asbestos-Containing Material (ACM)	Used	ormally Solely	/ by	Ashasta		cription						Ту	pe	T
TO BE ABATED In Facility (13)	Custo	tenan dial St (12)		(i.e. t	nermal surfac	systems sing, VAT iscelland	aterial (ACM) insulation, Γ, or eous)	(Amount Specify F or LF)		Removal	Repair	Encapsulate	Enclosure
BASEMENT	Yes	No	N/A		DITIO	T D . D							te	(D
D/ (OEIVIETY)			Х		DUC	T PAP	EK	2	4 SF		Х			
Name of Registered Waste Hauler ASSURED ENVIRONMENTAL		Ha	DEP W	No.	Cubic \		Name of I							
City, State MULLICA HILL NJ		100	34895		6 Disposa	al Date	City, State	9						
Completed by	Title				Si	gnature	WAYNE	-2BU	ikg, 0					
RON SWANSON	GENE	RAL	MANA	AGER		9	Kuxel Du	ano	91	Date 08		2016		

State of New Jersey - Notification of Asbestos Abatement (Pursuant to N.J.A.C. 8:60.7 and 12:120.7) (Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

GAC Project # 060-16												
Date of Notification (1) August 29					Name of Building Owner RUTGERS, THE	er/Operator (2	(IVER	SITY (OF N.	J		
Agencies Notified □EPA □DCA	[Notificated No	tification#	Street Address ENVIRONMENTA 27 ROAD 1, BLD0	L HEALTH	1 & SA	FETY	DEF	T.	6	
☑ DOL ☑ DEP- No Longer REQUIRED	.	justific	cation)	(including	City, State, Zip Code PISCATAWAY, N.	J 08854						
☑ DOH		□ Cancel	led		MICHAEL SMITH, HEALTH & SAFE		Tele	ephone	Numh	er		
				FACILITY IN	IFORMATION	and the same of th						
Name of Facility Where Abatement 77 HAMILTON AVENUE,	BLDG:	g Place (3) # 3015			Type of Facility (4) School (K-12)							
Street Address COLLEGE AVENUE CAM	IPUS				□Subchapter 8 (other th ☑ Other (i.e. private & c Sq. Feet: N/A	an K-12) commercial but # of Floors:	ldings, h	nomes, e	etc.)	01.		
	inty (6)	ESEX		y Code (7) Use Only)	Current Use (prior if bei					u∓ y	ears)
Name of Monitoring Firm Hired by E	Bldg. Owr	ner (8)	ASCN	1 No.	Name of Contractor (9)	ng demonstre		ADLIVI				
ATC			009		GREENWOOD ABA	TEMENT (CONS	ULTAN	NTS	INC		
Street Address 3 TERRI LANE					Street Address			021711	110,			
City, State, Zip Code					268 MAIN STREET City State, ZipCode							
BURLINGTON, NJ 080 Project Manager for Monitoring Firm		elephone N	lumbar		BUTLER, NJ 07405			11100				
BRIAN KEARNY		609-386-			<u>Telephone Number</u> 973-492-0477			nse Num	<u>iber</u>			
Scheduled Start Date (10) 09/16/16	Si	cheduled C 9/19/16	ompletio	on Date (11)	Name of OSHA Monitor		008	40				
Occupancy Status During Abatem			201		ENVIROVISION, IN	c.						
▼Facility Closed/Vacated During	Entire F	Period of A	bateme	nt	Street Address 20-21 WARGARAW	BOAD						
□ Abatement Performed Outside Describe	of Norma	al Facility F	-dours		City, State, Zip Code	RUAD	MW			-		
⊠Other – Describe: Schedule: 4PM – 5AM (24 HO	URS &	WEEKEN	NDS AS	S NEEDED)	FAIRLAWN, NJ							
Scope of Work (Check all that apply))								1723	-		
$\square \ge 3 \text{ sf or } \ge 3 \text{ lf}$ $\boxtimes \ge 160 \text{ sf or } \ge 260 \text{ lf}$						Full Contai Mini-Enclose Glovebag Pre	ıre	87			sure	
						Non-Exemp					cedu	ire
		on Normally Maint./Cus		Description of Ast (ACM) (i.e. therm	bestos Containing Material nal systems insulation, surfac	Amou	nt		ment T			
	Staff? (1) YES	**************************************	NA	VAT, or other mis	cell.)	or LF)		Remov	e Rep	air En	cap E	Enclose
Rooms 100, 101B		X		VAT		300	SF	X		Т		
										1		
Name of Reg. Waste Hauler	LALI	IDED W		15."								
See Hauler Below #1 & 2	Se	DEP Waste			Cubic Yards of Waste:	5 CY		of Regi				II
Hauler #1) Greenwood Abatement (NJDEP # 12561	Consulta	nts, Inc. – I	Butler, N	NJ 07405		Disposal Da			City, S			
Hauler #2) Newark Carting, Inc., N NJ DEP # 4509	lewark, N	NJ 04509				09/19/20	16		100 N Rd. M 19067 215-7	orris	ville,	
Completed by (Print or Type) RAYMOND C. PEDALINO		NIOR PR	OJEC	т	Signature Programmed P	11.	Date	Augus	t 29.	201	6	
	MA	NAGER			Raymond C. Per	aacino						

State of New Jersey - Notification of Asbestos Abatement (Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

Chack # 2064

GAC Project # 060-16			(1 111	suant to N.J.A.	.C. 8:00-/ and 12:120-	7)		-	-			, -
Date of Notification (1)	t 29, 20	116			Name of Building Owr	ner/Op	erator (2)	7) [3 10	5 1	M E
Agencies Notified	1 23, 20	Notificatio	n Type		RUTGERS, THE Street Address	STA	TE UN	IIVER	SITY	OF NJ	5 1	V E
D 504		⊠Initial	Notific	ation	ENVIRONMENTA			111	1			
□EPA □DCA				tification#	27 ROAD 1, BLD	G 40	86 I IV	ING	TON	CAMPI	100	2016
☑ DOL				(including	City, State, Zip Code	0 70	JU, LI	/ II GC	PON	CANIF	13-	2010
☑ DEP- No Longer REQUI	DED		ication)		PISCATAWAY, N	J 088	354	- 1	<u></u>			
☑ DOH	KED	□ Cance	elled		Name of Contact			Tel	ephone	ANT has	(I()*	'TROL
2 5011					MICHAEL SMITH		<u>/.</u>	,				G
					HEALTH & SAFE	TY						
Name of Facility Where Abater	ment is Ta	king Place (3))	FACILITYII	NFORMATION							
DAVIDSON HALL A, E	BLDG#	3563			Type of Facility (4) School (K-12)							
Street Address					Subchapter 8 (other t	han K	12)					
BUSCH CAMPUS					Other (i.e. private &	comme	rcial hui	Idinas I	nomos	oto \		
					Sq. Feet: N/A	# of	Floors:	1 BI	da Aa	e: 80+	veare	
City (5) PISCATAWAY	County (6			ty Code (7)							years	
FISCATAWAT	MIDE	DLESEX	State	Use Only)	Current Use (prior if be	ing de	molishe	d): A0	ADEM	IC		
Name of Monitoring Firm Hired	hy Blda (Owner (8)	ASCN	1 No	IN 10		20					
ATC	by blug.	Owner (o)	009		Name of Contractor (9)							
1,70,000,540			000	0	GREENWOOD AB	ATEN	IFNT (CONS	III TAN	ITS IN	C	
Street Address					Street Address			30110	OLIA	413, IN	U	
3 TERRI LANE												
City, State, Zip Code					268 MAIN STREET							
	08016				City State, ZipCode			vens +				
Project Manager for Monitoring		Telephone I	lumber		BUTLER, NJ 07405	5						
BRIAN KEARNY		609-386			Telephone Number			Licer	nse Num	ber		
		0.3900.000 (8.870 (980			973-492-0477			008	40			
Scheduled Start Date (10) 09/09/16		Scheduled (on Date (11)	Name of OSHA Monitor			1000				
03/03/16		09/19/16			TANKIDOMICION II							
Occupancy Status During Aba	itement (0	Check only o	ne)		ENVIROVISION, IN Street Address	IC.						
▼Facility Closed/Vacated Du	ring Entir	re Period of A	batemer	nt								
■Abatement Performed Outs	ide of No	rmal Facility	Hours -		20-21 WARGARAW	ROA	AD					
Describe					City, State, Zip Code							
XOther – Describe:	HOUDE	0 WEEKE										
Schedule: 8AM - 5PM (24	HOURS	& WEEKE	NDS AS	S NEEDED)	FAIRLAWN, NJ							
Scope of Work (Check all that ap	oply)											
					_	l Eul	Contair	mont	rith No.	- t' - D		
$\square \ge 3 \text{ sf or } \ge 3 \text{ If}$				□ Renovation		Mini-	Enclosu	imeni v	vitin iveg	ative Pre	ssure	
$\boxtimes \ge 160 \text{ sf or } \ge 26$	60 If			■ Demolition				200	e / Wrap	2 Cut		
Lassies (A.L.)					X	Non-l	Exempt	ed (*) a	nd Non-	Friable F	rocedi	ire
Location of Asbestos-Containing Material (ACM) in Facility (13)		ation Normall by Maint./Cu	y Used	Description of Asl	bestos Containing Material		Amou	nt		ment Type		310
, , , , , , , , , , , , , , , , , , , ,	Staff?		Stodiai	VAT, or other mis	nal systems insulation, surfac	cing,	(Speci	fy SF	Remov	e Repair	Encan	Englace
	YES	NO	NA	, or ourse, imo	ocii.)		or LF)	2	Itemov	e Repail	Liicap	Eliciose
Throughout Building		X		MASTIC			45.70	005	100			
Throughout Building		X		TSI			15,70		X		-	
				101			10	0 LF	X			
Name of Reg. Waste Hauler		NJDEP Wast	e Hauler	ID#	Outin V	40.5		NI	-(5		16	
See Hauler Below #1 & 2		See Below			Cubic Yards of Waste:	40 C	, Υ			North I		
Hauler #1) Greenwood Abateme	nt Consu	Itants, Inc - 1	Butler N	11.07405		T D:		-0,2,00				
NJDEP # 12561			Janei, IV	0 0/403			osal Da 19/201			City, State 100 New		1311
Hauler #2) Newark Carting, Inc.	., Newark	k, NJ 04509				09/	13/201	0		Rd. Morr		
NJ DEP# 4509										19067		0 5
Completed by (Print or Type)	Tit	le			0.					215-736-	1700	
RAYMOND C. PEDALIN		ENIOR PR	O.IEC	т	Signature			Date				
		ANAGER	JULU	•	Raymand C. Pe.	dali	ro	A	lugus	t 29, 20	116	
	191	MACLI					5,000					

	THE RESERVE OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAME
[Print Form
10	V L

			(Pui	rsuant to	NJAC 8:	60 and	12:120)	brown .	E	r g	\mathbb{N}	F	_[1	1-
Date of Notification (1 08/31/16)		N	lame of E	Building Ov	wner/O	perator	(2)		15	<u> </u>	U U		F		and the supplemental in the
Agencies Notified	Type Notification		S	Street Add	dress					S	EP	2 201	6		ال	
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☐ DCA	Cancellation			DANIEL	TY INFOR	DRAATI	ON		1015-201-10	<u> </u>			_	-		
Name of Facility Whe	ere Abatement is Taking	Place (3)		FACIL	II T INFOR	XIVIA I IV	ON	Тур	e of Facility (4)						
									School (K-12)		2/				
Street Address			5-3-3-377					X	Subchapter 8 Other (i.e. pr	3 (Othe ivate &	commerc	:2) cial build	ings.	hor	nes.	
								-	etc.) uare Feet		Floors		dg. A			-
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City, State, Zip Code	^						10 10000		, Zip Code						-	
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Project Manager for	Monitoring Firm			Telephon	ne No.		Telepi		No. -9078		License 1200	No.				
Start Date (10)		Schedule	d Con	noletion D	Date (11)		Name	of C	SHA Monitor					-		
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	itle)WNER					Signatur	e				Dat	9			

Print Form

Date of Notification (1) 8/29/16 Name of Building Owner / Operator (2) Type Notification 7-Eleven Inc. Agencies Notified Street Address **Emergency Notification EPA** 1722 Routh Street, Suite 1000 DEP X Initial Notification City, State & Zip Code X DOL Amended Notification Dallas, TX 75201 X DOH Cancellation Name of Contact Telephone Number DCA Eric Roemer ACRECT INULX **FACILITY INFORMATION** LICENSING Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Vacant Building School (K-12) Street Address Subchapter 8 (Other than K-12) 609 Bear Tavern Road X Other (i.e., private & commercial buildings, homes, etc. Square Feet # of Floors Bldg. Age City (5) County (6) County Code (7) 5000 60 Ewing Mercer Current Use (Prior if being demolished) Commercial Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Environmental Tactics, Inc. Global Abatement Services, LLC 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 License Number Telephone Number Telephone Number Tom Geiger 732-290-2217 732-605-9062 00714 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 9/13/16 9/15/16 Global Abatement Services, LLC Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 443 Schoolhouse Road Abatement Performed Outside of Normal Facility Hours -City, State & Zip Code Describe: Area Isolated During Abatement Monroe Township, NJ 08831 Other - Describe: Scope of Work (Check all that apply) Demolition Renovation Full Containment with Negative Pressure Large Project Mini-Enclosure Quantity is ≥ 3 SF or ≥ 3 LF ACM X Glovebag Procedure Quantity is ≥ 160 SF or ≥ 260 LF ACM X Other: Non-friable Location of Is Location Description of Abatement Type Amount Asbestos-Containing Normally Used Asbestos-Containing (Specify: Removal. (Specify Material (ACM) Solely by Material (ACM) Square Feet Repair, Encapsulation TO BE ABATED Maintenance or (i.e., thermal systems or Enclosure) in Facility Custodial Staff? insulation, surfacing, VAT Linear Feet) (13)(12)or other miscellaneous) Basement N/A TSI pipe 232 LF Removal Basement N/A Flue packing 2 SF Removal N/A Basement Window glazing 12 SF Removal NJDEP Waste Hauler ID # Cu. Yds. of Waste Name of Registered Landfill Freehold Carting 18693 10 TRRF City, State Disposal Date City, State Trenton, NJ 9/16/16 Tullytown, Pa Completed By (Print or Type) Title Signature Date Dominick Tringali Pres. 8/29/16 Dominick Tringali

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Date of Notification (1) 08/26/2016					f Building C t Fairchild		perator	(2)	To annual to an an				\mathbb{W}	E	M
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Project Manager for Monit	toring Firm			Telepho				one N 345-8		Lice 013	nse No).			
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Project Manager for Mon		Telepho	ne No.		Teleph	one No. 345-868			ense No).					
Start Date (10) 09/09/2016								of OSHA N							
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Baseme	ent		X			Pipe	Insulat	tion		45 LF		X			
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City, State Totowa, NJ				Dispos TBD	al Date		y, State ullytown,	PA							
Completed by Oliver Hegedis		Title Projec	t Ma	nager		Si	gnature	Ol			Dat 708/		016		

Date of Notification (1) 08/26/2016				f Building rset Cou			(2)	Im	Ē ((E		//_	E	In		
Agencies Notified X EPA	Type Notification			Street A	ddress It. Airy R	load				0.1	 : р	0 01	116			
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				FACI	LITY INFO	ORMATI	ON		1		- W-10-10-					
Name of Facility Where A	Abatement is Takin	g Place (3)						Facility (4)							
Street Address 140 Mt. Airy Road									bchapter 8 her (i.e. pri				uild	ings,	home	es,
City (5) Basking Ridge								Square N/A		# of N/A	Floors			dg. A	ge	
County (6) Somerset					Code (7) USE ONLY,)		Current	Use (Prior	if beir	ng demo	olished)			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCN	/ No.				ment Contr		(9)					
Street Address				1				Address	en Avent	ue .						
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Project Manager for Mon		Telepho	ne No.		Teleph	none No. 345-868			Licens 0131							
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Project Manager for Monitoring Firm	Tel	ephone No.	Telephone No.		License No.			- Norman	
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KLEMCO INC		of Waste	_ C. M.	C. M.U.	A				
City, State MAPLE SHANE	N.J		Disposal Date	City, State	DBINE				
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MICHAEL KLEMM	SUP.		_ Mul	WILL		ال	_	10	

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Project Manager for Monitoring Firm		Tele	ephone	No.	Telephone No.		License No.				<u></u>
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Occupancy Status During Abatement (Ch	neck onl	y one)			Street Address			7-17-1			
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Abatement Performed Outside of Nom	nal Facil	ity Hou	rs	1	City, State, Zip C		11 ~	42.00			
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31											
Name of Registered Waste Hauler		1 225	IDEP V		Cubic Yards	Name of Reg	istered Landfill				
KLEMCO INC		_ H	uler ID	64	of Waste	C.	M.C.M.	U.	A		
City, State	14. (7			Disposal Date	City, State	DBINE	4.1	7		
MAPLE SHADE Completed By	14.	<u> </u>	_	$-\!\!-\!\!\!\perp$	Signature	1 400		W.			-
Completed By MiCHAEL KLEMM	\	D			Signature ,	any.	Date 8 -	-30	-1	6	
LILL HOLD INCHES		15									

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			(P	ursua	nt to NJA	C 8:60 and 12:12	o) [[[]]					111	
Date of Notification (1).	30-16			Nai	me of Build	ing Owner/Operator		MITE	ACTIVE	20 116-		1	
Agencies Notified	Type Notificati	on		Stre	eet Address	S	14	1001-0				1 &	_
□ ₽A	Initial Amended			_		155 RT	201	- Inst	STOS	COM	2	_	
DEP	Amendmen			City	, State, Zip	Code REEMFIEI	IN O	T _	OS Z	4000			
⊠ DOH	☐ Emergency justification		ing	Nar	ne of Conta		I) Me	I Tolon	hone Num		_	1.1	
□ DCA	Cancellation			I vai		UCE		1000	TIONE HUITI	00.			
				F	ACILITY IN	FORMATION							
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	ESIDENC	E					☐ School (K-		r than K-1:	2)			
Street Address							Other (i.e., homes, et	, private & c.)	commerci	al bui	× 51 1×50	200	
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	MAY	v			E ÓNLY)			CAM	and the state of t				_
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Project Manager for Moni	itoring Firm		Tel	ephone	No.	Telephone No. 856-))	G_0477		nse No.	IV			
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9-14-16		9			0.0 (11)		M	A					_
Occupancy Status During						Street Address							
Facility Closed/Vacate						01-01-1-7-0					_		=
Abatement Performed Other - Describe:	Outside of Norm	ai Facili	ty nou	rs .		City, State, Zip Co	xae						
Scope of Work (Check all	that apply)												
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TO BE ABATE IN Facility	<u>:D</u>		Staff?	"	(1.e.,	thermal systems in surfacing, VAT, o	or	SFor		Remova	Repair	caps	Enclosure
(13)			(12)			other miscellaneou	ıs)			oval	air	Encapsulate	Sure
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