Jnv 14135

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

SEP	- 3	2019

01 111 115 11			- 1							bul b	VL1	U	-010		Incom	1
Date of Notification	(1) 8/28/2019							r / Operator wood Url		nowat-O	mor I I C					
Agencies Notified	Type Notific	ation		Street			iiiigs	WOOU OII	Dall Ne	ilewai O	MODEOI	03 00	NTAC)L. &		1
☐ EPA	Type Notific	ation				ouse	Post	4				CENSI	NG			
☐ DEP		I				Zip (4								
□ DOL	Ame							19406								
☑ DOH	11 1 CO 10 10 10 10 10 10 10 10 10 10 10 10 10	rgency	-			ntact	, , , ,	13400				Tolor	ohone	Niun	nha	-
DCA		cellation	1.5	Jacki									854-5			1
						1-0000000000						000				
Name of Facility VAII	A la		10		CILIT	Y INF		ATION								
Name of Facility Wh					:1-1:	- D *	l y	pe of Facili								
Morgan Propertie Street Address	es/Parkviev	w at Collings	wood	- Bu	liaing	B.		School (F			(10)					
				/	٦.					ther than I						
700 Browning Ro	oad			177	811) [ercial build			etc.)	
O:h. /5\		10 1 (0)		0		<u></u>	Sq	uare Feet		of Floors		Bldg.		_		
City (5)		County (6)	Co	unty (code ((1)	_	220,000		9 + bas			7	0		
Collingswood		Camden						rrent Use (eing dem	olished)					
					1			artments							_	
Name of Monitoring		y Building Own	ier (8)		ASC	CM No		me of Abat								
Health & Safety S Street Address	services							source N		ment Gr	oup, LLC					
P.O. Box 365								eet Addres			4- 202					
City, State & Zip Co	do							15 Hamilt			ite 202				_	\dashv
Berlin, NJ 08009	ue							y, State & 2 enton, NJ								
Project Manager for	Monitoring F	irm	Telep	hone	Numl	or		lephone Nu		//	License	Nlumb	or			-
Jim Proctor	Widthtoffing i		856-			Jei		9-914-427			Licerise		1185			
Scheduled Start Dat	te (10)	Scheduled Cor			_			me of OSH	Marie Control of the last of t	or		- 0	1100			
9/12/201			9/19/2		e (11)	la constant	4 (4)	S Enviro			tories Ir	10				
Occupancy Status D								eet Addres		ai Labore	itorics, ii	10.				\neg
		During Entire P			teme	nt		33 Route		st						
		utside of Norma					-	y, State & 2								
Describe:				11.75.VI 00				ion, NJ 0								
Facility Occ	upied During	Abatement						,								
Scope of Work (Che																-
	•								□ F	ull Contain	nment with	Negat	ive Pr	essu	re	
≥3 sf or ≥3 land			\boxtimes	Ren	ovatio	n				lini-Enclos	sure					
≥160 sf ≥26	O If			Den	nolitio	n					Procedure					
										lon-Exemp	ted and N	lon-Fria	able P	roce	dure	е
	cation of		5,400	Locati				Description			Amount		Abate	ment	t Ty	pe
Asbest	os-Containin	g		nally l				estos-Cont			(Specify					
	erial (ACM) BE ABATED			olely t tenan				Material (A0 , thermal sy			SF or LF)	₪ .	_	E	m
	r Facility			odial S	7.7	8		tion, surfac		г 1			eme	Renair -	aps	Clo
	(13)		Ousid	(12)	main:			ner miscella					Remova	<u>≓</u> .	Encapsulate	Enclosure
	(/		Yes	No	N/A			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					-		कें	CD
Building B-Stora	ge Room			П			Pi	pe Insula	tion		1,200 SF	=	X C	1 1	7	П
	901100111		H	Ħ	H			po mouna	LIOII		1,200 01	1		11	#	Ħ
			H	Ħ	Ħ							-	=	11	#	H
			H	H	H							1	=	11	=	Ħ
			H	H	H							1	=	+++	\dagger	H
			H	H	Ħ							1	러누	+++	₩	H
Name of Registered	Waste Haule	er		NJ	DEP \	Naste	Cubic	c Yards	Name	of Registe	red Landfil	ll I				_
3				1 1000000	uler II		of Wa			or regions	ou Euroni					-
Resource Manag	ement Gro	up, LLC.		00	3521	8	TBD		Grows	s Landfil	I					
City, State								osal Date	City, St	tate						
Trenton, NJ 0861							TBD	_	Morris	ville, PA						
Completed By (Print	or Type)			Titl	е		Signa	ature		10.		Da	ate			
Brian Haney	551E 80			Pro	eside	nt	1	LAMA	///	11/11/		0.1127.70	28/2	019)	
							1	1///	1/1	111 16		1			×	

Inv 1400	de		NOTIF	ICATION	ate of Ne NOF ASE to NJAC	ESTOS	ABATE	MEN	T Property) <u>E</u>	GE			(alway)	INTE
Date of Notification (1) 08/26/19 C	Check # 3 4	138			f Building			(2)	1000		SEP -	3 20	19		#
Agencies Notified	Type Notification			Street A	ddress / Marke	t St				ASE	ESTOS	CONTE	OL 8	ļ	
DEP DOL	Initial Amended Amendmen	. 4		City, Sta	ate, Zip C	ode			- Louis	- Total	LICEN		rathwin.	Europe (1925)	
	Emergency justification	(including	-	Name o	rk, NJ 0 f Contact	0.000					elephone N				3 72 2
DCA [Cancellation	1		Sister		ODSSATI	011			97	73-622-	1613			
Name of Facility Where Ab		ng Place (3	3)	FACI	LITY INF	ORMATI	ON	Тур	e of Facility	y (4)					
St. Vincent Academy								×	School (K						
Street Address 228 W Market St											ner than K & comme		dings	, hom	es,
City (5) Newark								2000000	uare Feet ,000	4	of Floors	1.00	3ldg. <i>A</i> 50+	Age	
County (6) Essex					Code (7) USE ONLY)			rent Use (F hool	Prior if be	eing demo	lished)			
Name of Monitoring Firm F N/A	lired by Building	Owner (8)		ASCN N/A	I No.		Name EA S		patement C	ontracto	r (9)				
Street Address N/A							Street 426 6								
City, State, Zip Code N/A									Zip Code erg, NJ, 0	7022					-100 3
Project Manager for Monito	oring Firm			Telepho N/A	ne No.		Teleph	none			License 01074				
Start Date (10) 08//29/19		Schedule 08/31/		mpletion	Date (11)		Name N/A	of O	SHA Monito	or					
Occupancy Status During A	Abatement (Ched	ck Only Or	ne)				Street	Addr	ess						
Facility Closed/Vacate Abatement Performed Other – Describe: 9ar	Outside of Norr	Period of Annal Facility	Abater Hours	nent s			N/A City, S N/A	tate,	Zip Code	00					
Scope of Work (Check All	That Apply)				100000000000000000000000000000000000000										-
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		X F	Renova Demoli	ation tion			×	G	ull Contain Iini-Enclosu Blovebag Pr	ire ocedure					
		Is	Locat	ion		6-1111-2-111-2		1 1/	Ion-Exempt	ed () ai	id Non-Fi	able Pic	Abate	ement	:
Location o			lormal d Sole				cription						Ту	pe	
Asbestos-Containing M TO BE ABAT In Facility	ED	Ma	intena odial s (12)	nce/		thermal surface	systems sing, VA	s insu T, or		(Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
(13)		Yes	No	N/A		other m	niscellan	eous	5)			oval	air	ulate	sure
Boiler Roc	om		Χ			ACI	M Deb	ris		2	20 SF	X			
Name of David 1111	11-1-					10									
Name of Registered Waste EA Services Corporati			H	IJDEP W lauler ID 01278		of Was			550000000000000000000000000000000000000		ered Land nsfer As		es		
City, State Guttenberg, NJ						Dispos TBD	al Date		City, Sta						
Completed by Michael Fajardo		Title Office	e Cle	rk		Si	gnature	-	mx		100	Date 08/26/	19		

						20 200			[]-	E M	2 [2	ī	η P ri	ntFor
Inv 141	100	N	(Pı	CATION ursuant	to NUAG-816	TOS ABATE 0 and 12 12	0)			E (<i>p</i>		2019	
Date of Notification (1)	# 2442				100	vner/Operato			111	UL	.1	0	E 0 10	3
	(# 3442					uardian Ar	ngel						ITTO C	
Agencies Notified EPA	Type Notification Initial				ranklin Tur				lescoperation, p	ASBES		NSIN) <u>L</u> &
DEP DOL	Amended Amendment	#		-	ite, Zip Code ale, NJ 07					25.1				
		(including	- 8		Contact	701			Telepho	ne Num	nber			-
DOH DCA	justification) Cancellation				harles Pin	yan			201-3					
				FACI	LITY INFOR	MATION						-1002		
Name of Facility Where)				Ту	pe of Facility (4)						
Church of the Guar Street Address	dian Angel -Re	ectory						School (K-12)		on V 12	17			
320 Franklin Turnp	ike						×	Subchapter 8 Other (i.e. priv				dings,	home	s,
City (5)							Sc	etc.) quare Feet	# of Floo	ors	В	ldg. A	ge	
Allendale, NJ 0740	1						1193563533	000	2		100	0+		
County (6) BERGEN				County (Code (7) USE ONLY)			urrent Use (Prior ectory	if being d	emolish	ed)			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCN	I No.			Abatement Contra vices Corpora	The second section					
Street Address						Stree 426		dress th Street						
City, State, Zip Code						City,	State	e, Zip Code			7.5			
						Gut	tent	perg, NJ 0709	3					
Project Manager for Mon	itoring Firm			Telepho	ne No.	Telep 201		e No. 5-1700	0.000	ense No 074	0.			
Start Date (10) 8/28/19		Schedule 8/29/20		npletion	Date (11)			OSHA Monitor as above						
Occupancy Status Durin	g Abatement (Chec	ck Only On	e)			Stree	t Add	dress						
Facility Closed/Vac Abatement Perform Other – Describe:	ed Outside of Norr	Period of A mal Facility	batem Hours	nent	l l	City,	State	e, Zip Code						
Scope of Work (Check A	II That Apply)	0.0000000000000000000000000000000000000								(D) 11 12 1				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enova emolit					Full Containmen Mini-Enclosure Glovebag Proce	dure					
						Ľ		Non-Exempted (") and No	n-Friabi	le Pro	and the same	e ement	
Location	n of	100	Locati Iormal			Descriptio	n of						ре	
Asbestos-Containing TO BE AB. In Facil (13)	Material (ACM) ATED	Mai	d Sole ntenar odial S (12)	nce/	(i.e. the	containing ermal system surfacing, V	Mate ns in: AT, c	sulation, or	Amou (Spec SF or I	ify	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A							_		te	O
Rectory-Ch	nimney			Х	Fi	re Chinme	y Lo	ogs	5 LF		х			
							-							
Name of Registered Was EA Services Corpor			Н	IJDEP W lauler ID	No.	Cubic Yards of Waste bd		Name of Re Tri-State			ociat	es		
City, State			1	01278		Da Disposal Date	е	City, State			-0.0004025			
Guttenberg, NJ					t	bd		Bronx, N	Υ					
Completed by Gina Betances	1257 (4)	Title Office	e Mar	nager		Signatur	re	Eleca	es_	Da 8/	te 27/2	019		

		,00	idestority.	CN.	ins in	Tables,		E.						Pri	nt Fo
Inv14041	N		CATION	ate of New OF ASBE to NJAC 8	STOS	ABATE		Total Control of the	0,-	E C	E		\mathbb{V}		
Date of Notification (1) 08/27/19 Check # 3440				f Building (Raichilsc						SEF) - ;	3 8	2019	Control Control	
Agencies Notified Type Notification			Street A	ddress				-		0000				1 0	menone
EPA X Initial Amended		ļ	City Sta	ite, Zip Co	de			and a second	μ	SBEST	IOS C			La	
DOL Amendment		_		field, NJ		1		100			and the second				
☐ DOH justification) ☐ DCA ☐ Cancellation	414 CHARLES CONT.		Property of the second	f Contact Raichilsc	on				Tel	ephone	Numb	er			
Non- of Facility Valleges Abstracts in Table	- Di (2		FACI	LITY INFO	RMATI	ON	T	-6 = -316	4)						
Name of Facility Where Abatement is Takin Ryan Raichilson	ng Place (3)					I ype	of Facility (School (K-1							
Street Address								Subchapter Other (i.e.	8 (Oth			build	ings,	home	es,
City (5)								etc.) are Feet	# 0	f Floors		BI	dg. A	ge	_
Springfield							1.6	000		1		10000)+		
County (6) Union			County (Code (7) USE ONLY)				ent Use (Pri		ng demo	olished	1)			
Name of Monitoring Firm Hired by Building N/A	Owner (8)		ASCN N/A	I No.			of Ab	atement Cor ces	ntractor	(9)					
Street Address N/A			9				Addre 69th								
City, State, Zip Code N/A								Zip Code rg, NJ, 07	022						
Project Manager for Monitoring Firm N/A			Telepho N/A	ne No.		77436000	hone N 295-			Licens 0107					
Start Date (10) 09/07/19	Schedule 09/10/1		mpletion I	Date (11)	. 1 (82) 11	Name N/A	of OS	SHA Monitor							
Occupancy Status During Abatement (Che	ck Only Or	ne)					Addre	ess							
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe: 9am						N/A City, S N/A	State, 2	Zip Code							
Scope of Work (Check All That Apply)							5.44								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	Renova Demoli					M GI	ull Containm ini-Enclosur lovebag Pro	e cedure						
				97		[2	N N	on-Exempte	d (*) an	d Non-F	riable		edure Abate	C. 1500 S. 1977	9
Location of		Locat Norma			Dec	scriptio	n of							ре	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	ed Sole intena todial (12)	nce/		tos Cont thermal surfa	aining I	Materia ns insu AT, or		(Amount Specify F or LF)		Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A											ite	· O
Basement Boiler Room		X		A	ACM P	ipe Ins	sulati	on		15 LF	2	ζ			
Name of Davidson J Wests Haves			UDED '	Vonto	Cubic	Vorda		Name of	Degist	arad I ar	ndfill				
Name of Registered Waste Hauler EA Services Corporation		H	NJDEP W Hauler ID 01278		of Wa	Yards ste		Tri-Sta				ciate	es		
City, State Guttenberg, NJ					Dispos	sal Date	e .	City, Sta Bronx,							
Completed by Michael Fajardo	Title Offic	e Cle	erk		S	Signatur	e M	of			Date 08/2		19		

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

		forman .	1	ed E	7 7	Section 200							Pr	int F
11610102		A ALL A		ate of Ne							-	7.4		
(Y) (MM)	1	OTIF (F	TCATION	TOF ASE	8:60 an	ABATE d 12:12	MENT 0)	1	NA	- A.	aa	70	-	-
Date of Notification (1)				13.977 4-71					1/4	到公里	C t	=(C	TIM.	E
8/28/19 TW//// 113L	L			f Building i Builde		Operato	r (2)			7/				
Agencies Notified Type Notification	1		Street A		15				-11]	W O SUNT			
			Street	adress					Ш	LI S	EP -	- 3	2019)
EPA X Initial Amended		-	City, Sta	ate, Zip C	ode				-	-				
X DOL Amendmen				NJ 07					-	ASBE	STOS	001	ITDO	11 0.
Emergency justification)				f Contact				711	Te	lephone N				/L CK
DCA Cancellation			Tony	Ginesi								Sistratina	CONTRACTOR AND ADDRESS OF THE PARTY OF THE P	Konton-A
			FACI	LITY INF	ORMAT	ION			- do-					
Name of Facility Where Abatement is Takir	ng Place (3)					Туре	of Facility (4	1)					
home								School (K-1:						
Street Address							×	Subchapter Other (i.e. p	8 (Oth rivate	ner than K- & commer	12) cial buil	Idinas	hom	es
01. (5)								etc.)	33/11/2004					03,
City (5) Scotch Plains				197	07/	0	Squa 160	re Feet		of Floors	15	Bldg. /	Age	
County (6)			County	Codo (7)	270	1			2	·		70		
Union				USE ONLY)		hom	ent Use (Prio	r if be	ing aemoli	snea)			
Name of Monitoring Firm Hired by Building	Owner (8)		ASCN	1 No.		Name		tement Con	tractor	r (9)				
3	· · · · · · · (0)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			3 (2.02), (2.02)		ronmental			.C			
Street Address			-				Addre	A STATE OF THE PARTY OF THE PAR						
						PO	Box 4	83, 4 E G	ate D	rive				
City, State, Zip Code						City, S	State, Z	ip Code						
						Glen	wood	, NJ 074	18					
Project Manager for Monitoring Firm			Telepho	ne No.		500000000000000000000000000000000000000	none N			License	No.			
						2500000	764-2	250010000		703				
Start Date (10) 9/18/19	Schedule 9/27/19		npletion l	Date (11)		Name	of OSH	HA Monitor						
Occupancy Status During Abatement (Chec						Ctt	A -1 -1							
						Street	Addres	SS						
Facility Closed/Vacated During Entire Abatement Performed Outside of Norn	Period of A nal Facility	baten. Hours	nent			City S	tata 7	ip Code				_	-	_
Other - Describe:						Oity, o	itate, Z	p code						
Scope of Work (Check All That Apply)														
≥3 sf or ≥3 lf	X R	enova	ition] Ful	l Containme	nt with	Negative	Dracci	ıro.		
≥160 sf or ≥260 If		emolit					Mir	i-Enclosure			1 10330	110		
						×		vebag Procen- exempted			hle Pro	cedur	9	
	Is	Locati	ion						() =				ement	1
Location of	N	ormal	ly		De	scription	of					Ty	ре	
Asbestos-Containing Material (ACM)		d Sole			tos Cont	taining M	/laterial			mount			m	_
TO BE ABATED In Facility	2000	odial S		(i.e.	thermal surface	systems cing, VA	s insula T. or	ition,		Specify F or LF)	Remova	Repair	Encapsulate	Enclosure
(13)		(12)				niscellar			٥,	01 21)	SVOL	pair	sula	osur
	Yes	No	N/A								_		ate	e
exterior			X			siding			1.0	200 SF	×	-		
	+					olullig			٠,٠	200 01	-	-		
											-			
Name of Registered Waste Hauler		0.555	JDEP W auler ID		Cubic			Name of R	egiste	ered Landfi	111			
Newark Carting		112323	4509	110.	of Was	ole.		Grand C	entra	al Sanita	ry Lar	ndfill		
City, State					1000000	sal Date		City, State				-		
Newark, NJ					TBD			Pen Arg		A				
Completed by	Title	100			S	ignature)	1		D	ate			
A. Scott Higgins	Presid	dent						11		8	3/28/1	9		

8/28/19

Ch1919	9		NOTIFI (P	CATION	ate of Ne LØF ASB to NJAC	ESTOS	ABATE	MENT		A	a le	h	9	P	D	I
Date of Notification (1) 8/28/19	11413!	2			f Building Salway	Owner/	Operator	(2)			7-15	<u> </u>	<u>Ľ</u>	H	U	
Agencies Notified	Type Notification			Street A	ddress						To the state of th	SFF	-	3 2	2019	All property of
EPA DEP	X Initial Amended		-	City, Sta	ate, Zip Co	ode	-			facel	Tanah	<u> </u>				- 1
× DOL	Amendment	#			ord, NJ		3			-	ASE	3EST	OS	CON	TRO	L &
Ĭ DOH	Emergency justification)				f Contact					Tal		1	7.5	TETRI	j 	political de la constantina della constantina de
☐ DCA	Cancellation				Salway	ODMAT	ION				Approximately and the					
Name of Facility Where A	Abatement is Takin	g Place (3)	PACI	LITINE	URWAI	ION	Туре	of Facility (4)					V-7-2-10	-
home									School (K-12							
Street Address									Subchapter 8 Other (i.e. pr					lings,	home	es,
City (5)									etc.) ire Feet		Floors			ldg. A		
Cranford								190		2	1 10010		1.00	5	90	
County (6)					Code (7)	3			ent Use (Prior	if bei	ng demo	olishe	d)			
Union Name of Monitoring Firm	Hired by Building	Dwnor (8		ASCN			Nome	hon	W.T.		(0)					
Name of Monitoring Firm	rilled by Building	Jwner (o	,	ASCI	A INO.		1		itement Cont ronmental		(B) (B)	LC				
Street Address							Street	Addre	ss							
07. 01.1. 7. 0.1								2000	83, 4 E Ga	te D	rive				14.7914	
City, State, Zip Code									ip Code I, NJ 0741	8						
Project Manager for Moni	toring Firm			Telepho	ne No.		Teleph	30.00 S S S S S S S S S S S S S S S S S S	A TOTAL CONTRACTOR OF THE PARTY		Licens	e No				
							973-	764-2	2276		703					
Start Date (10) 9/16/19		Schedul 9/27/1		pletion	Date (11)		Name	of OSI	HA Monitor							
Occupancy Status During	Abatement (Chec		-	 			Street	Addre	SS				_			
Facility Closed/Vaca	ted During Entire F	Period of	Abatem													
Abatement Performe Other – Describe: b		nal Facilit	y Hours				City, S	tate, Z	ip Code							
Scope of Work (Check Al	That Apply)	7 4 4 A 4 T 1		- 100				_					ji F			
≥3 sf or ≥3 if × ≥160 sf or ≥260 lf		COTTON TO SERVICE STATE OF THE PERSON STATE OF	Renova Demoliti				×	Min	II Containmer ni-Enclosure ovebag Proce n-Exempted	dure					9	
		Is	Location	on											ment	
Location			Normall ed Solel		0-1		scription				7. 32	+		Ту	pe	
Asbestos-Containing TO BE ABA	TED	Ma	intenar todial S	ice/		therma	taining N I systems	insula		(S	mount specify		Re	R	Encapsulate	Enc
In Facilit (13)	.y		(12)				icing, VA miscellan			SF	or LF)		Removal	Repair	lpsul	Enclosure
		Yes	No	N/A								-	<u>a</u>		ate	ē
baseme	nt			×		pipe	insula	tion		9	0 LF		x			
garage	Э			Х		pipe	insula	tion		3	0 LF		х			
											22.75					
Name of Registered Wast	e Hauler		100	JDEP Wauler ID		Cubic of Wa	Yards ste		Name of R					10.00000		
Newark Carting			7 1 5339	1509		TBD			Grand C	entra	al Sani	tary	Lar	dfill		
City, State Newark, NJ						Dispo TBD	sal Date		City, State Pen Argy	/I, P/	4					
Completed by		Title	ا مام			5	Signature		1			Date		`		
A. Scott Higgins		Pres	ident						1	_		8/2	8/19	1		

Chlara	5		NOTIF (P	ICATIO	tate of Ne N OF ASB I to NJAC	ESTOS	ABATE	MENT 0)	\bigcap	A	屋	PO	ER	11 11/1	E	7
Date of Notification (1) 8/26/19	14021	0			of Building Dev, LL		Operator	r (2)	-			W 7	<u> </u>	1) \VI		
Agencies Notified	Type Notification	4		Street A	Address						S	EP	- 3	201	9	
EPA DEP	X Initial Amended		-		Skokie Bo ate, Zip Co		rd, Sui	te 301	1	VIII.		77.0				lector)
X DOL	Amendment Emergency (_	Wilme	ette, IL 6					- Commission (C	ASBE	STO	SCC	NTR	OL 8	ž.
DOH DCA	justification) Cancellation				f Contact Coninx				Low	Tel 84	lephone	e Nun 9-076	iber 36	NG	(POS)(HISTORY	Levisonalis
				FAC	ILITY INF	ORMAT	ION				11 000	011	-			
Name of Facility Where building	Abatement is Taking	g Place (3)						of Facility (
Street Address									School (K-1 Subchapter		er than	K-12)			
450 Belleville Turn	pike								Other (i.e. p etc.)	rivate	& comn	nercia	al build	dings,	home	es,
City (5) North Arlington								Squa 3000	re Feet	# o	f Floors	S	1 2 2 2	ldg. A	ge	
County (6)			T		Code (7)			10000000	ent Use (Prid		ing den	nolish		-		
Bergen					USE ONLY			build	ding		5		500			
Name of Monitoring Firm	n Hired by Building (Owner (8))	ASCN	M No.				tement Cor ronmenta			LLC				
Street Address								Addres	ss 83, 4 E G	ate D	rive					
City, State, Zip Code									ip Code	40						
Project Manager for Mo	nitoring Firm			Telepho	ne No.			none No	I, NJ 074	18	Licen	ise No).			
St-+ D-+- (10)	557.						A. 1481 19	764-2			703					
Start Date (10) 9/5/19		9/16/1		npletion	Date (11)		Name	of OSF	HA Monitor							
Occupancy Status Durin	3 - 0 20 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0						Street	Addres	SS							
Facility Closed/Vac Abatement Perform Other – Describe:	cated During Entire F ned Outside of Norm	eriod of all Facility	Abatem / Hours	nent	77		City, S	state, Zi	ip Code							
Scope of Work (Check A	All That Apply)	W 10					4000	37-								
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		promong	Renova Demolit				×	Min Glo	I Containme ni-Enclosure ovebag Proc n-Exempted	edure						
			Locati											Abate Typ		
Location Asbestos-Containing		Use	Normal ed Sole	ly by	Asbes		scription taining M	20.00	(ACM)	А	mount			1 71		
TO BE AB In Faci (13)	lity	0.000000	intenar todial S (12)			thermal surfa	systems	s insula T, or		(8	Specify or LF)		Remova	Repair	Encapsulate	Enclosure
(13)		Yes	No	N/A		otner r	niscellan	neous)					val	air	ulate	sure
first & secon	nd floors			х		wind	dow ca	ıulk		10	00 LF		х			
Name of Registered Wa	sta Haular		LN	JDEP W	lanta	Cubic	Varda		N	3 1 -1 -		1611				
Newark Carting	ote Hauler		Н	auler ID 4509		of Was			Name of F				Lan	dfill		
City, State Newark, NJ						Dispos TBD	sal Date		City, State		Α					
Completed by A. Scott Higgins		Title	ا ما م				Signature)	1/2			Dat				
A. Ocott Higgins		Pres	ident					1	//	\		8/2	26/19	ŧ		

IAN# 1415	7											Pr	int Fo
JANA 1913		NOTIF	St	tate of New Jer	rsey	TEMEN	ит						
(, K M02A	PALL			to NJAC 8:60				m	HECK (F	尼4			5 17
Date of Notification (1)				f Building Owne	er/Operat	tor (2)							A COLUMN TO A COLU
08-28-19 Agencies Notified Type Notifi	cation		Street A	KKF Group					CED		200	10	
EPA Initial	Cation			Box 70, 40 M	1onmou	ith Pa	ark Highwa	ļu u	SEP		20	13	L
DEP Amen		Ī		ate, Zip Code	NI 1 07	7704			ASBEST	78 C	ONT	BOL	2
☐ Emer	dment # gency (including	-		Long Branch	1, NJ 07	//64		Lita		FNS	ING	1000	O.
	cation) ellation			Wersinger II	I, Esq.			Telephone 1	32) 222-20		(220	7	
Name of Facility Where Abatement is	Taking Place (3)	FACI	ILITY INFORMA	ATION	I Tu	no of Facility	(4)					
Fort Monmouth	raking Flace (3)				l ly	pe of Facility School (K-	20.0700 20.0000					
Street Address						٦ğ	Subchapte	r 8 (Oth	er than K-12		diana	b	
288 Sherrell Road						×	etc.)	<u> </u>	& commercia				25,
City (5) Oceanport, NJ				Code (7)		00000	uare Feet 5,000	1 1	f Floors	100	980 980	ge	
County (6) Monmouth	rrent Use (Pri ommercial	or if be	ing demolish	ed)									
Name of Monitoring Firm Hired by Bu Langan Engineering & Enviro			ASCN	M No.			batement Co Environm				*****		
Langan Engineering & Environmental Services Pinnacle Environmental Corp. Street Address 300 Kimball Drive 200 Broad Street City, State, Zip Code City, State, Zip Code													
City, State, Zip Code Parsippany, NJ 07054					City	, State		2					
Project Manager for Monitoring Firm			Telepho		Tele	phone	No.		License No	o.			
Vijay Patel	10111	10		60-4983	1000		-6565		00756				
Start Date (10) 09-16-19	03-31-		npietion	Date (11)	7000000	ne of C en-Ai	SHA Monitor r Inc.						
Occupancy Status During Abatement	(Check Only Or	ne)				et Add							
Facility Closed/Vacated During B Abatement Performed Outside of							zckson Ave	enue					
Other – Describe:	, reofficient doing	riouic			0.00000000		and City, N	IY 111	101				
Scope of Work (Check All That Apply)												
≥3 sf or ≥3 lf x ≥160 sf or ≥260 lf		Renova Demolit				H	Full Containm Mini-Enclosur Glovebag Pro	e cedure	5				
	le	Locati	ion				Non-Exempte	d (*) an	d Non-Friabi	e Pro		e ement	t
Location of	1	Normal	ly		Descripti	on of					Ту	ре	
Asbestos-Containing Material (AC <u>TO BE ABATED</u>	Ma Ma	ed Sole	nce/	Asbestos C (i.e. them	nal syste	ms ins	ulation,		mount Specify	R	71	Enc	E
In Facility (13)	Cus	todial S (12)	stair?		irfacing, \er miscell			SF	or LF)	Remova	Repair	Encapsulate	Enclosure
1503	Yes	No	N/A							a		late	Ге
Ground Floor			х	Floo	or Tile 8	Mas	tic	1,4	400SF	х			
Ground Floor			х	Boil	ler Rib	Gask	et		60SF	x			
Ground Floor			х	Mastic o	n Roof	Vent	Pipes		15SF	х			
10 11 11 11			105011			Pro-steel							
Name of Registered Waste Hauler ATC, Inc. / Newark Carting, Inc.	c. (04509)	Н	IJDEP W lauler ID 4310		bic Yards Naste D		The same		ered Landfill erprises				
City, State		2	1010	l sidnes	posal Da	te	City, Stat	ie.,					
Shirley, NY / Newark, NJ 0710				ТВ			Wayne	sburg,	OH 4468				
Completed by Richard Doran	Title Proje	ect Ma	anager		Signati	ıre	1 At	()	Dar 08	e -28-	19		
			3-1		147		A 17	<u>~</u>					

0				_				
P	П	n	T	r	O	r	m	1

V 20502	PAI	D	NOTII (i	FICATIO	State of N ON OF AS It to NJA	BESTOS	ABATE	MENT 0)	F post	TUN.	#	14	05	子
Date of Notification (1) 08-27-19	5				of Buildin		Operator	(2)	District Control			1	V	E
Agencies Notified	Type Notification				Address	• *************************************			Man included	1	-n	2	2010	
EPA DEP	Initial				Tonnel		ue			III SE	.r	3 ;	2019	
X DOL	Amended Amendment				Berger		7047						rior en esta	The Date of the Land
X DOH	Emergency justification)				of Contac	t				ASBES Telephone N	s ros umber	VSIN	<u>ITRO</u> G	18
☐ DCA	Cancellation	1		Lyle ((315) 447-	4555		~ ~~	ARIESTO ATTA
Name of Facility Where A	batement is Takir	g Place (3)	FAC	CILITY IN	FORMAT	ION	Type of Fa	cility (4)			_		
Street Address 6001 Tonnelle Aven	ue							School Subcl Other etc.)	ol (K-12) napter 8 (C (i.e. privat	Other than K- te & commer	12) cial bu	ildings	s, hom	ies,
City (5) North Bergen, NJ 07	047							Square Fe 2,150SF	et #	of Floors		Bldg.	Age	
County (6) Hudson					Code (7) USE ONL			Current Us Commer		peing demoli	shed)			
Name of Monitoring Firm I ATC Group Services		Owner (8))	0012	M No. 20		Name Pinna	of Abatement acle Envir	nt Contract	tor (9) al Corp.				
Street Address 104 E. 25th Street, 8	th Floor						Street	Address Broad Stre		5.008				
City, State, Zip Code New York, NY 10010)							tate, Zip Coo tadt, NJ 0						
Project Manager for Monit Fred Burkhardt				Telepho	one No. 353-828	RN	Teleph	one No. 939-6565	1012	License I	No.			
Start Date (10) (3)08-30-19		Schedule (3)09-3		npletion	Date (11)		Name	of OSHA Mo	nitor	00756				
Occupancy Status During	Abatement (Chec						Street	Address						
Facility Closed/Vacate Abatement Performed Other – Describe:	ed During Entire F d Outside of Norm	Period of A al Facility	Abaten Hours	nent s			City, St	Jackson ate, Zip Coo	le	1404				
Scope of Work (Check All	That Apply)						Long	Island Cit		1101				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	• • • • • • • • • • • • • • • • • • • •	Management	Renova Demolit				×	Mini-Encl Glovebag	ainment w osure Procedur	ith Negative e and Non-Frial			·e	
		Is	Locati	ion				11011 12101	1,51,00 () 0	ind Holl I flat	1		ement	
Location of Asbestos-Containing N TO BE ABAT In Facility (13)	faterial (ACM)	Use Ma	Normal d Sole intenar odial S (12)	ly by nce/		stos Cont thermal surfac		aterial (ACM insulation, , or		Amount (Specify SF or LF)	Remova	Repair	e Encapsulate	Enclosure
		Yes	No	N/A							a		late	ıге
Roof: Shed	Roof			X		R	loofing		2	2,150SF	х			
Name of Registered Waste Newark Carting, Inc.	Hauler		Н	JDEP W auler ID		Cubic of Was				tered Landfill				
City, State			04	1509	1711	Anna Charles Com	al Date) Çity.	State	agement				
Newark, NJ 07105 Completed by John A. Tancredi	-	Title	ot Ma	nager		TBD ,	gnature	Pen	Argyl F	PA 18072		10		
- Tancieur		Projec	UL IVIA	nager		1	1	XXII	#	30	3-27-	19		
ASB-41 (R-06-08)						8	* Do not	use this forr	n for asbes	stos licensure	e exem	npted	activit	es.

TWA	14150		NOTIFI		ate of Nev			CNIT	į	Control of the contro	Tal (5)		-		-	
CK3008	A GUT	TI			OF ASB				T-1-T-INFOLDER		EG	E		\mathbb{V}		
Date of Notification (1)	TA		T		Building				an and an		,				-	
08/26/19	Tuna Natification			Street A	olph Tov	vnsnip	Public 8	School	IS	ЦЩ	SEF	3	20	119	-	μ
Agencies Notified	Type Notification		1		aaress Iillbrook	Ave.			To the second second	ĺ					-	interrepto
EPA DEP	X Initial Amended		H		te, Zip Co	ALIENDESIN.				A	SBEST	OS C	TNC	ROL	8	
X DOL	Amendment #				olph, NJ		6		<u>_</u>	-	Ll	CENS	NG	-	· ·	
DOH DCA	Emergency (i	ncluding	Ī		Contact						phone N					
☐ DCA	Cancellation			Andy I						97	3-361-	8080				
Name of Facility Where	Abatement is Taking	Place (3	3)	FACI	LITY INFO	ORMATI		Type of	Facility (4)						
Randolph High Scl			0				I	_	hool (K-1							
Street Address			-27.					Su	bchapter her (i.e. p	8 (Othe	r than K	-12)	ilding	re ho	me	•
511 Millbrook Ave.							- 1	etc	:.)							21
City (5)								Square	Feet	# of	Floors		Bldg	. Age		
Randolph County (6)				County (Code (7)			Current	Use (Prid	or if beir	na demo	lished)				-115-1
Morris					JSE ONLY,)		Carroni	000 (1 1.1		.5	,				
Name of Monitoring Firm	n Hired by Building C	wner (8)		ASCN	1 No.		Name o	f Abater	ment Cor	tractor	(9)		:			
AHERA Consultan	ts Inc.			0057	,		Acade	emy C	onstruc	tion In	IC .					
Street Address P.O. Box 385							Street A 205 P		16 Suite	14						
City, State, Zip Code	201				110 100		City, Sta	ate, Zip va NJ (
Oceanville, NJ 082 Project Manager for Mor				Telephor	ne No		Telepho	200000000000000000000000000000000000000	01012		License	No.	-		-	-
Eric Clarkson	mioning i min				52-1833			32 424	44		01379					
Start Date (10)		Scheduie	ed Con	npletion (Date (11)		Name o	f OSHA	Monitor					200//100		
09/06/19		10/06/						as ab	ove							
Occupancy Status Durin							Street A	ddress								
X Facility Closed/Vac Abatement Perform Other – Describe:	cated During Entire P ned Outside of Norm	eriod of A al Facility	Abatem / Hours	nent ;			City, Sta	ate, Zip	Code	-						
	All That Apply)															
Scope of Work (Check A	на тнасмрру	X F	Renova	tion			X	Full C	Containme	ent with	Negative	e Press	ure			
≥3 sf or ≥3 lf x ≥160 sf or ≥260 lf		-	Demolit				H	Mini-E	Enclosure	9	, rogani					
								Non-E	bag Prod Exempted	cedure d (*) and	Non-Fri	iable P	ocec	lure		
		ls	Locati	on									Ab	atem Type		
Location	n of	ı	Normal ed Sole	ly			scription o					-	\top	Type	Т	
Asbestos-Containing TO BE AB		- īvla	intenar	nce/			aining Ma systems				mount pecify	1 6	١,	1 0	T C	En
In Faci	ility	Cus	todial S (12)	Staff?	100	surfac	cing, VAT niscellane	, or		SF	or LF)	Kemova	Nepall	D D D D D D D D D D D D D D D D D D D	ans I	Enclosure
(13))	-	100	T		othern	Illscellarie	,ous)				<u>a</u>	- ا	1 2	9 0	Гe
2 30	1 1 1 1111	Yes	No	N/A	Che	otrook	joint co	mnou	nd	2 '	260sf	X	+	X	+	
Ceiling areas thro		-		X				_		ASSIST	49If	x	+	X	\dashv	-
Attic a		-		X			fitting in						+	×	-	-
All restroom and	shower areas	-		X	Ceran	nic tile	cove ba	ase & (grout	4	40sf	X	H	^	+	
Name of Registered Wa	ete Hauler			JDEP W	/aste	Cubic	Yards		Name of	Registe	red Land	dfill				
Academy Construc			į F	lauler ID	No.	of Wa			Fairles	20						
			10	34422		5 Disnos	sal Date		City, Stat							
City, State Totowa NJ						TBD	Jai Dale	3.1	Morris		А					
Completed by		Title				1 8	Signature	11	4/1	1		Date				
John Geleski		PM					Mile	n 1	held			08/2	5/19			
							1									

Date of Notification (1) Name of Stulding Owner/Operator (2) Rathy Macdonald	TYN#140	DATPAI	D			to NJAC				Ch	IC=	牛	11	36			
EPA DOL Amended Amende								/Operator	(2)		In	-		_	= 5	<i>I</i>	
DOP Amended Amended # Emergency (including Dot	Agencies Notified	Type Notification			Street A	Address					12	-	-		-		
DOH	DEP I	Amended Amendment		_ [Rosell	le Park,		7204			The second secon	Marine arterior	OLI		. Ci	113	A CONTRACTOR OF THE PERSON NAMED IN COLUMN NAM
Name of Facility (Where Abstement is Taking Pièce (3) Type of Facility (4) Street Address Type of Facility (4)		justification)					nald				Tel	ephone	Nun	ber c			. &
Residential Property Sched (K-12) Subchapter 8 (Other than K-12) Subchapter 8 (Other than K-	Name of Facility Where A	Abatement is Taking	Place (3)	FAC	ILITY INFO	ORMA	TION	Tyn	e of Facility (4)						
Subchapter & Goffer tank R-12 Subchapter & Gomerical buildings, homes, etc.) Suprar Feet # of Floors Bidg. Age 1925	Residential Property		,						П								
1,984 2									×	Subchapter Other (i.e. p	8 (Oth				lings,	home	es,
Union Strate use oil Ly Street Address Street Address 240 South 5th St.	Elizabeth										The State of	f Floors	5	992	200	ge	
Street Address Street Address Street Address Street Address 240 South 5th St. City, State, Zip Code City, State, Zip Code City, State, Zip Code Froject Manager for Monitoring Firm Telephone No. Telephone No. 1elephone Vacuation of Ostale of Ostale of Ostale of Ostale of Ostale of) <u> </u>		Cur	rent Use (Prid	or if bei	ng den	nolish	ed)			
City, State, Zip Code	Name of Monitoring Firm	Hired by Building O	wner (8))	ASCN	/ No.						(9)					
Froject Manager for Monitoring Firm	Street Address																
Project Manager for Monitoring Firm	City, State, Zip Code										 3						
Og/109/2019	Project Manager for Moni	toring Firm			Telepho	ne No.),			
Street Address 2333 Route 22 West					pletion	Date (11)					abora	atorie	s. Inc	 D.			
Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Union, NJ 07803	Occupancy Status During	Abatement (Check	Only Or	ne)				Street	Addr	ess							
Scope of Work (Check All That Apply) Sope of Work (Check All That Apply) Sope of Work (Check All That Apply) Sope of Work (Check All That Apply) Sope of Work (Check All That Apply) Sope of Work (Check All That Apply) Sope of Work (Check All That Apply) Sope of Work (Check All That Apply) Sope of Work (Check All That Apply) Sope of Work (Check All That Apply) Sope of Work (Check All That Apply) Sope of Work (Check All That Apply) Sope of Work (Check All That Apply) Sop of Work (Check All That Appl	Abatement Performe	ed Outside of Norma	eriod of all Facility	Abatem Hours	ent			City, S	tate,	Zip Code	st 						-
≥160 sf or ≥260 lf Demolition Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Type Non-Exempted (*) and Non-Friable Procedure Abatement Type Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Type Abatement Type Non-Exempted (*) and Non-Friable Procedure Abatement Type Abatement Type Non-Exempted (*) and Non-Friable Procedure Abatement Type Abatement Type Non-Exempted (*) and Non-Friable Procedure Abatement Type Abatement Type Non-Exempted (*) and Non-Friable Procedure Abatement Type Abatement Type Non-Exempted (*) and Non-Friable Procedure Abatement Type Abatement	Scope of Work (Check Al	That Apply)						01110	11, 14	0 07000							
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Basement Nomally Used Solely by Maintenance/Custodial Staff? (12) Yes No N/A Nome of Registered Waste Hauler Danvic Contracting LLC City, State Elizabeth, New Jersey Is Location Normally Used Solely by Maintenance/Custodial Staff? (12) Name of Registered Waste Hauler Date NJDEP Waste Hauler ID No. 37574 Disposal Date Elizabeth, New Jersey Disposal Date Title Signature Date								×	M G	lini-Enclosure lovebag Prod	edure					2	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Yes No N/A Name of Registered Waste Hauler Danvic Contracting LLC City, State Elizabeth, New Jersey Lused Solely by Maintenance/ Custodial Staff? (12) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e. thermal systems insulation (i.e. thermal systems insulation (i.e. thermal systems insulation (i.e. thermal systems insulation (i.e. t			1					- 450,0000	/500						Abate	ment	
Basement Yes No N/A	Asbestos-Containing TO BE ABA In Facilit	Material (ACM)	Use Ma Cus	ed Solel intenar todial S (12)	y by nce/ staff?		tos Cor therma surf	ntaining M al systems acing, VA	fateria s insu T, or	lation,	(S	pecify)	Removal	Repair	Encapsulate	Enclosure
Name of Registered Waste Hauler Danvic Contracting LLC City, State Elizabeth, New Jersey Name of Registered Landfill Cubic Yards of Waste 2 Fairless Landfill City, State Disposal Date TBD Completed by Title Signature Date	Pagama	ant .	Yes	No			Din	a Inquila	4:		A	015		75			
Danvic Contracting LLC Hauler ID No. 37574 of Waste 2 Fairless Landfill	baseme	2111			^		Pip	e insula	tion		4	U LF		X			
Danvic Contracting LLC Hauler ID No. 37574 of Waste 2 Fairless Landfill																	
Danvic Contracting LLC Hauler ID No. 37574 of Waste 2 Fairless Landfill	N(D				la contraction of the contractio		0.11						100				
City, State Elizabeth, New Jersey Completed by Title Disposal Date TBD City, State Morrisville, PA Date	SHARRY II AREA SHORES SHOW AND AND			H	auler ID		of W			Commence of			natıll				
Completed by Title Signature Date		у					Dispo					Α					
I TENNI MEMBER P. BOLDAND F. A.				er						1			12 Oct 12 Co.		019		

Check # 3274

Thy# 14149 State of New Jersey - Notification of Asbestos Abatement (Pursuant to N.J.A.C. 8:60-7 and 12:120-7) GAC Project # 060-19 Date of Notification (1) Name of Building Owner/Operator (2) August 29, 2019 RUTGERS, THE STATE UNIVERSITY OF NJ Agencies Notified Notification Type Street Address U U ☑ Initial Notification **ENVIRONMENTAL HEALTH & SAFETY DEPT. (REHS)** ☐ EPA ☐ Amended Notification # 74 STREET 1603, BLDG 4116, LIVINGSTON CAMPUS ☐ DCA ■ Emergency (including City, State, Zip Code LICENSING X DOL PISCATAWAY, NJ 08854 justification) ☑ DEP- No Longer REQUIRED Name of Contact Telephone Number □Cancelled X DOH MICHAEL F. SMITH, ENV. 848-445-2550 **HEALTH & SAFETY** FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) NEWARK POWER PLANT, BLDG# 7261 School (K-12) Subchapter 8 (other than K-12) Street Address Other (i.e. private & commercial buildings, homes, etc.) RBHS NEWARK CAMPUS # of Floors: 2 Bldg. Age: 60+ years Sq. Feet: N/A City (5) County (6) County Code (7) Current Use (prior if being demolished): HEATING PLANT (State Use Only) NEWARK ESSEX Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Contractor (9) ATC 00098 GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address Street Address 3 TERRI LANE 511 MAIN STREET City, State, Zip Code City State, ZipCode BURLINGTON, NJ 08016 **BUTLER, NJ 07405** Project Manager for Monitoring Firm Telephone Number Telephone Number License Number 609-386-8800 BRIAN R. KEARNEY 973-492-0477 00840 Scheduled Completion Date (11) Scheduled Start Date (10) Name of OSHA Monitor 09/07/2019 09/16/2019 ENVIROVISION, INC. Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 20-21 WARGARAW ROAD, BLDG# 35E Abatement Performed Outside of Normal Facility Hours - 7am -3pm City, State, Zip Code Describe: Schedule: SAT 12:01 AM - MON 5AM (WEEKENDS 24 FAIRLAWN, NJ 07410 HRS AS NEEDED) ☑Facility Occupied During Abatement Other- Describe: Scope of Work (Check all that apply) ☐Full Containment with Negative Pressure X ≥ 3 sf or >3 lf **X**Renovation Mini-Enclosure ■ Demolition $\square \ge 160 \text{ sf or } \ge 260 \text{ lf}$ ☐ Glove bag Procedure / Wrap & Cut ■Non-Exempted (*) and Non-Friable Procedure Location of Asbestos-Containing Is Location Normally Used Description of Asbestos Containing Material Amount Abatement Type (ACM) (i.e. thermal systems insulation, surfacing, (Specify SF Material (ACM) in Facility (13) Solely by Maint./Custodial Remove Repair Encap Staff? (12) VAT, or other miscell.) or LF) YES NA B2-MER X TSI <9 LF X Name of Reg. Waste Hauler NJDEP Waste Hauler ID# Name of Registered Landfill 15 CY Cubic Yards of Waste: G.R.O.W.S. North Landfill See Hauler Below #1 & 2 See Below Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 Disposal Date City, State 100 New Ford Mill NJDEP # 12561 Rd. Morrisville, Pa Hauler #2) Newark Carting, Inc., Newark, NJ 04509 09/16/2019 19067 NJ DEP # 4509 215-736-1700 Completed by (Print or Type) RAYMOND C. PEDALINO SENIOR PROJECT August 29, 2019 Raymond C. Pedalino MANAGER

28 2019 03:42PM NJ Asbe	stos Contr	01 60	09,633,0	0664	F	page 1		·IM E	C	E	A STATE OF THE PARTY OF THE PAR	\mathbb{W}
IN#140 CK1518	59 PAT	NOTI	FICATIO	State of New Jer N OF ASBESTO t to NJAC 8:80	S ABATE	MENT		and but	SEP		_1	2019
Date of Notification (1)	A KIN	H N	Name	of Building Owne	r/Operator	(2)		100F - 70	100	Y	2011	THOL
August 27, 201	9		1	ee Constructi		[6]		DOL AGE	3 3 1	CEN	NON	THOL
Agencies Notified Type Notific				Address	ŲII .				11	VI-1	401141	<u> </u>
EPA Initial			20 Edi	son Drive	-			117 2	1 17	7		
DEP Amend	ied			tata, Zip Code				Fall Comments	1/		-	
Amend			CONTRACTOR OF THE PARTY OF THE	A CONTRACTOR OF THE PROPERTY OF THE		•			V		ز	
		g	Name	of Contact			. 1	A LIA Entino Home Ale	minhat	-	5	
			Project	t Manager				WINTER TO	eneme		1	
None of Falls. 19th			FAC	LLITY INFORMA	TION			(Aro) 234-11	U20			****
	Taking Place	(3)			11. 02.	Type of	Facility ((4)				_
ullding					•	Пво	hard /K.s	151				1
Street Address	Mayne, NJ 07470 Name of Contact Mayne, NJ 07470 Name of Facility (4) Sohool (K-12) Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, atc.) Square Faet # of Floors Bidg. Age											
-15 Legal Street						X O	ter (i e. j	private & commerc	lal bui	ding	s, hom	189,
City (5)								# of Flance		Gida	Acr	
ewark							100000	- 21, 00014	1	widg.	WAB	į
County (6)			County	Code (7)		Current	Use (Pri	or it baing damption	had			
ssex			(STATE	USE UNLY)					, reput			ļ
	ding Owner (8)	ASCI	M No.	Name	of Abater	nanî Cor	dractor (9)		-		
E.S.L.												İ
Street Address											****	
200 Paterson Plank rd # 7	The same of the sa	1941	•		1500 H	(ings H	MYN	STE 209				
City, State, Zip Code				a (1989 Telling delegated resident and a second	City, S	tate, Zip	ode				manus and I man	
orth Bergen, NJ 07047								4				
Project Manager for Monitoring Firm		-	Telepho	ine No.					do.			
armalo Altomonte					(973) 7	759 - 50	00		31/7/			
Start Date (10)	Schedul	ed Co	mpletion	Dete (11)				100,01				
			9/30/1	9	The M	ACK Gr	oup. Li	LC.				
¬	50					Address				-		
Facility Closed/Vacated During En Abatement Performed Outside of Other - Describe:	ntire Parlod of Normal Facility	Abatei y Hour	ment s		1500 K	Gngs H	NY N.	STE 209				
			-		7 - 23	Hill, N.		\$				
cope of Work (Check All That Apply)					1	.,,,,						
≥3 of or ≥3 if ≥160 of or ≥260 if		Renavi Demoli				Mini-E	nciosure tan Proc	nt with Negative F edure (*) and Non-Friable				
	ls	Locat	ion	and a second					T		temen	i .
Location of		Norma od Sole	lly		seciption					T	уре	
Asbestos-Conteining Material (ACN TO BE ABATED	Ma Ma	intena	ncs/	Asbastos Col	M prining M	eterial (A	(M)	Amount			m	m
In Facility	Cus	todial ((12)	Staff?	Gurf	acing, VA7	10		(Specify SF or LF)	Remova	Re	Encapsulate	Enclosure
(13)		(14)		other	miccellan	eous)		71.71.71.71.71.71.71.71.71.71.71.71.71.7	TOV	Repair	EL SE	DS I
	Yes	No	N/A				100		100	=4.	a e	8
Exterior	X			ж.	flashing		-	Militaryong group	10		-	\vdash
window	\rightarrow		-					TBD	(_	ļ	
AMIGOA	$-\Delta$			wir	dow car	1K		_"_	X		L	
		1				******	-+		+	-		
ame of Registered Waste Hauler		IN	J DEP W	laste Cubic	Yards	- As	eme of h	egistered Landfill	لــــــــــــــــــــــــــــــــــــــ			
			auler ID			14	ane of K	AAIRIDIAO CAUDIN				
wark Carting			450)9	TBD	IE	I Beth	lehem landfill				
ty, State				Diapo	essi Date		ty, Stale					
wark, NJ					9/30/19		thleher	n, PA				
ompleted by	Title				Signature		The way	Do	đa .	-	~	
ke Cooper	Presid	ent		Ja	- Land State Control	-		8/2	7/19			

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT Check#3420 (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 08 29 / 19 3 2019 SEP Andrei Seminski Agencies Notified Type Notification Street Address ✓ Initial X EPA ASBESTOS CONTROL & ☑ DOLWD Amended City, State, Zip Code LICENSING Amendment # X DHSS Union City, NJ 07087 □ DCA Emergency (including Name of Contact Telephone Number (NJAC 5:23-8) justification) Cancellation Andrei Seminski FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) Private house Subchapter 8 (Other than K-1 2) Street Address Other (i.e., private and commercial buildings, homes, etc.) City (5) Square Feet # of Floors Bldg. Age Union City, NJ 07087 County (6) County Code (7) (STATE USE ONLY) | Current Use (Prior if being demolished) Hudson Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Gr Tech LLC Street Address Street Address 576 Valley Rd #283 City, State, Zip Code City, State, Zip Code Wayne, NJ 07470 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 973-638-1777 01127 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 09 / 09 / 19 09 / 14 / 19 Envirovision Consultants, Inc Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 20-21 Wagaraw Road, Bldg .# 35E Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: _____AM-___PM/ PM_ Fair Lawn, NJ 07410 Scope of Work (Check all that apply) Clean up and decontamination with negative pressure Full Containment with Negative Pressure >3 sf or >3 lf > 160 sf or >260 lf Mini-Enclosure Renovation Demolition Glovebag Procedure Tent with Negative Pressure Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Repair Used Solely by Removal Encapsulate Enclosure Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ (i.e., thermal systems insulation, TO BE ABATED (Specify Custodial Staff? IN Facility surfacing, VAT, or SIF or LF) (12)(13)other miscellaneous) No Yes N/A \times 10 LF Basement Pipe insulation X Floor tiles 500 SF X 1st floor \boxtimes 800 SF 2nd floor Floor tiles 2400 SF Exterior siding Transite siding Name of Registered Waste Hauler NJDEP Waste Hauler ID No. | Cubic Yards of Waste | Name of Registered Landfill TBD T.R.R.F. Inc Gr Tech LLC 0033785 City, State Disposal Date City, State Wayne, NJ 07470 TBD Tullytown, PA Completed By (Print or Type) Title Signature Date evic wenad 08/29/19 Owner N.Jevtic ASB-41

100m3	25.200	4.900		
- 17	rin	4	1	-
صودن		100	10	

TW# 1	HILL			127.71												10000000
	7197	N	OTIFIC		te of New COF ASBES			WENT	1	F	(A) [6	= 1	пп		Production of the last of the	
K 1500	- PAT	The same	(Pu	rsuant to	NJAC 8:6	60 an	d 12:120))		1,6	C [W	Ŀ	1	
Date of Notification (1)	2 / 1	JU			Building Ov											- College - Coll
8/29/19	- N 25 2		1	Mike Lo	onstyn F	riva	te Horr	ne			SEP	3	2019	}	HU	Ш
Agencies Notified	Type Notification		1	Street Ad	aress										l-com	1
EPA DEP	Initial Amended		(City, State	e, Zip Code)				ASB	ESTOS	COL	VTBO	31 &	1-	\forall
DOL	Amendment		_	North V	Vildwood	NJ	08260			-	LICE	NSIN	IG			- Paris
□ DOH	Emergency (i	ncluding	10.00	Name of	Contact					Tele	ephone l	Numb	er			
☐ DCA	Cancellation			Mike	ITY INFOR	BRAT	IOM		-			-				-
Name of Facility Where	Abatement is Taking	Place (3))	FACIL	ITT INFOR	CIVIPCI	1014	Туре о	f Facility (4)						
Mike Loonstyn Priv	ate Home								chool (K-1							
Street Address									ubchapter ther (i.e. p				buildi	ngs, h	omes	s,
									tc.)		Floors			ig. Ag		
City (5) North Wildwood N	1 08260							1000		1	1 10013		35			
County (6)				County C				Curren	t Use (Pri	or if bei	ng demo	olishe	d)			
Cape May			1	STATE U	SE ONLY)		-	Hous	e							
Name of Monitoring Firm	n Hired by Building (Owner (8)		ASCM	No.		All the Children of the Control		ement Cor	ntractor	(9)					
N/A								naco In						-		-
Street Address								Box 32				,				
City, State, Zip Code							City, S	State, Zip	Code							
							10000000	ZODE CASES	n NJ 08	091						
Project Manager for Mo	nitoring Firm			Telephon	e No.			hone No -753-9			Licens 0072					
Start Date (10)		Schedule	ed Con	noletion [Date (11)				A Monitor		0012					-
9/9/19		9/20/19		ipiouoii 2	2010 (1.1)		San								3.8	
Occupancy Status Durin	ng Abatement (Chec	k Only On	ie)				Stree	t Addres	s						7	
X Facility Closed/Va	cated During Entire I	Period of A	Abaten	nent			011	01-1-7	0.4.							
Abatement Perform Other – Describe:	med Outside of Norn	nal Facility	Hours) 			City,	State, Zi	p Code							
Scope of Work (Check				<u> </u>		- 170										
≥3 sf or ≥3 lf	,		Renova	ition			F	Full	Containm	ent with	n Negati	ive Pr	essur	е		
≥160 sf or ≥260 lf		\times)emolit	tion			ŀ	☐ Min	i-Enclosur vebag Pro	re cedure						
								X Nor	n-Exempte	ed (*) ar	d Non-F	riable				
			Locat										,	Ty	ment ce	
Location Containing			Normal ed Sole		Ashesto		escriptio ntaining		(ACM)	1	Amount	Ì			ш	
Asbestos-Containin TO BE A	BATED		intena todial			herm	al systen	ns insula			Specify F or LF)		Ren	Re	ncar	Encl
In Fac		Jus	(12)		5		facing, V miscella			3	r or Lr,		Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A									-		ite	O
Exterior	Sidina			х		Ext	erior S	iding		10	000 SF		х			
	<u> </u>															
		-														
Name of Registered W	aste Hauler		170 197	NJDEP W	17.00 (1.00 m)	100000000000000000000000000000000000000	ic Yards		Name o	f Regist	tered La	ndfill				
United Roll Off			1 2	Hauler ID 2459	No.	of W	/aste		G.R.O	.W.S.						
City, State						Disp	osal Dai	te	City, Sta		Λ 400	67				
Elm NJ		771				9/1	3/19 Signation	ro.	Morris	ville F	A 190	Dat	e			
Completed by Anthony T Perna		Title Pres	siden	t			Signatu	L					.e 29/19	9		
, manding it i dilita							-					_				-

IM# 14	133		IOTI			ate of Ne				- E- N/	#ENT				and the second second	Market State of State	-1
CK (1000)	- PA	II				t to NJA					in in	ECE		\mathbb{V}	E		A STATE OF THE PARTY OF THE PAR
Date of Notification (1)						of Building		ner/C	Operator (2)	1131					-	Townson
08 /	28 / _	19	_		Kris	stin Stine						SEP	3	2019		lead	
Agencies Notified	Type Notifica	ition			Street	Address					17 77					-	- Annabas
⊠ EPA	☐ Initial									201153		Linear	-06	LITTO.	OL 8	ì	ar plant
☑ DOLWD	Amended Amendme					tate, Zip C						ASBESTOS	ENSI	VG	O C	`	
□ DCA	☐ Emergend		uding			vell, NJ 0		1				(-) (-)			and the same		
(NJAC 5:23-8)	justificatio	88	J		(1) (APERICAL SECTION)	of Contact stin Stine						Telephone N	umbe	er			
					FAC	CILITY IN	FOR	AMS	TION								
Name of Facility Where A	batement is T	aking I	Place	(3)						Ту	pe of Facility (4)					
Stine Residence											School (K-12)				100		
Street Address											Subchapter 8 Other (i.e., pri			al hu	ildina	S	
											homes, etc.)	ivate and com	mere	ai bu	ilanig	٥,	
City (5)										Sq	uare Feet	# of Floors	2 100 122	Blo	lg. Ag	ge	
Howell										1	1,952	2		5	51		
County (6)					Coun	ty Code (7)(STA	TE U	SE ONLY)	Cu	irrent Use (Pric	or if being den	nolish	ed)			
Monmouth										F	Residence						
Name of Monitoring Firm	Hired by Build	ling Ov	vner (8)	ASCM	No.	Nar	ne o	f Abateme	ent (Contractor (9)						
Management & Env	iro. Consult	ting S	ervio	es			S	had	le Enviro	onm	nental, LLC						
Street Address							Stre	eet A	ddress								
PO Box 341							6	23 (Cutler A	ven	ue	277					
City, State, Zip Code							City	, Sta	ate, Zip C	ode							
Chesterfield, NJ 085	515						M	lapl	e Shade	, N.	J 08052						
Project Manager for Monit	toring Firm			Tele	phone	No.	Tele	epho	ne No.			License No					
Bill Weisgarber				60	9-298	-4070	8	56-7	755-0099)		00842					
Start Date (10)	S	chedu	led C	omple	tion Da	te (11)	Nan	ne o	f OSHA N	/lonit	tor						
09 / 07 /	19	09	/	11	_ / _	19	E	MSI	L Analyt	ical	I, Inc.						
Occupancy Status During	Abatement (0	Check	only o	ne)			Stre	eet A	ddress								
□ Facility Closed/Vacate	d During Entir	e Perio	od of	Abater	ment		2	00 F	Route 13	0 N	lorth						
☐ Abatement Performed			50 mm m m m m m m m m m m m m m m m m m				City	, Sta	ate, Zip C	ode							
Time of Abatement:	AM	PM/		_PM-		AM	С	inna	aminsor	n, N	J 08077						
Scope of Work (Check all	that apply)									Je Oesa	¥			-			
≥3 sf or ≥3 lf		r	VI RA	novati	on				Full Con Mini-End		ment with Nega	ative Pressure	9				
≥160 sf or ≥260 lf		[molitic					Gloveba	g Pr	rocedure						
			1250			T			Non-Exe	mpt	ted (*) and Nor	n-Friable Proc	edure				
	.			Locat Vorma				_		,				Aba	ateme	ent T	уре
Location Asbestos-Containing		0		d Sole		Asbe	stos (scription of aining Ma		al (ACM)	· Amount		Rei	Repair	Enc	Enc
TO BE ABA	TED			intena todial :			., the	rmal	systems	insu	ulation,	(Specify		Remova	air	aps	Enclosure
IN Facilit (13)	У		Cusi	(12)	olan:				cing, VAT niscellane			SF or LF)		<u>a</u>		Encapsulate	ure
(13)			Yes	No	N/A		Oti	101 11	moodilaric	.000	"					6	
Dining Room				\boxtimes		Floor Ti	ile a	nd N	Mastic			125 SF					
Kitchen				\boxtimes		Mastic						150 SF		\boxtimes			
Family Room				\boxtimes		Mastic						220 SF		\boxtimes			
			П	П													
Name of Registered Wast	te Hauler			N	JDEP \	Naste	Cub	oic Y	ards of	N	Name of Regist	tered Landfill			-		
Freehold Cartage				Н	auler II 15939		Was				Fairless La	ndfill					
City, State					.0000				I Date	C	City, State						
Freehold, NJ							0	9/11	/2019		Morrisville,	PA					
Completed By (Print or Ty	rpe)	Title		70.200.00				Sig	hature	_	· /		Date	9			
Christina Fay	9500080	Vic	ce Pr	eside	ent of (Operation	ns	(mel	ra	Hay		8	12	81	9	

CK0013	588 TD A TO	N		CATION	ate of New Jerse I OF ASBESTOS to NJAC 8:60 an	ABATEME	NT J	Inu#1	412	19		
Date of Notification (1) 08/27/2019	PAU	U	Ť	Name of	f Building Owner/C Lindholm, III			heck(No. 001	and the same of the same of	W-marginess.	Notice	1
Agencies Notified	Type Notification			Street A 147 F	ddress alstrom Ct		THIS IN	S do not obtained the second second	0.000		A COLUMN TO THE PARTY OF THE PA	
☐ EPA ☑ DEP ☑ DOL	☑ Initial☐ AmendedAmendment #	T. at			ate, Zip Code c, New Jersey 0	7055	The state of the s	SEP	3 201	9	Los	7
☑ DOH □ DCA	☐ Emergency (incomplete justification)☐ Cancellation	luding			f Contact abriskie		9	elephone Num 73-777-0013	SELVE SELVE	OL	8	
				FACI	LITY INFORMAT	ON						
Name of Facility When Falstrom Company	e Abatement is Taking Warehouse	Place (3)					Facility (4)					
Street Address 147 Falstrom Ct						☐ Subo	chapter 8 (Other that er (i.e. private & com		gs, hom	es, e	tc.)	
City (5) Passaic, New Jerse	ey 07055					Square F 30000	Feet #	of Floors	Bidg 50+	. Age	9	
County (6) Passaic					Code (7) USE ONLY)		Use (Prior if being de g - Warehouse	emolished)				
Name of Monitoring F Lis Consulting Serv	irm Hired by Building Cices, LLC	wner (8)		ASC	Л No.		Abatement Contract orporation	or (9)				
Street Address 134 Bennington Pk	wy					Street Ad 246 Unio	dress on Boulevard					
City, State, Zip Code Franklin Park, New	Jersey 08823					City, State Totowa,	e, Zip Code New Jersey 0751	2				
Project Manager for M Krysztof Lis	Nonitoring Firm			Telepho 732-94	ne No 40-6207	Telephon 973-225		License No 01104	,			
Start Date (10) 09/07/2019		Schedule 09/10/20		npletion	Date (11)		OSHA Monitor ronmental Labora	tories, LLC			:8	
	ring Abatement (Check					Street Ad 2333 Ro	dress oute 22 West					
	acated During Entire Permed Outside of Norma			ent			e, Zip Code IJ 07083				- 10-	0.00
Coope of Work (Chap	Is All That Apply											
Scope of Work (Check ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enova emolit				Full Containment w Mini-Enclosure Glove Bag Procedo	ure / Limited Co	ontainm		Ten	t
							Non-Exempted (*) a	Amount		77		
			Locat		8			(Specify	A	oater Typ		
Asbestos-Contain TO BE	tion of ing Material (ACM) <u>ABATED</u> acility 13)	Used Mai	orma d Sole ntena odial ((12)	ly by	thermal sys		aterial (ACM) (i.e. ation, surfacing,	SF of LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A							е	
Warehouse (1st Floor)			Х		Pipe Insulation			90 LF	Х			
Warehouse (1st Floor)	10		X		Pipe (wrap & cui	re)		23 LF		Х		
		-		-								-
							<u> </u>			-		
Name of Registered \	Vaste Hauler		17.00	NJDEP V	No. of Wa			istered Landfill		-		-
Lilich Corporation City, State				18724	Dispo	10 osal Date	City, State Morrisville, F			70		
Totowa, New Jerse Completed by	у	Title				0/2019 Signature	Morrisville, F	Da	to.			
Adriana Olejarova			sider	nt		MIL	Ulla		8/27/20)19		

IN# 14056PA			NOTI (P	FICA [*] ursua	State of TION OF A Int to NJAC	SBES7 8:60-7	OS ABA7 and 12:1	20-7)		CK	#	3	44	60	
Date of Notification (1)							uilding O HARP & D		/Operator E CORP.	(2)	M.	E (\mathbb{V}
8 / 28 /201					Stre	et Addi	ress			8 9 9 9 9	1				
Agencies Notified Type Noti	fication	1			126	E. LIN	COLN AV	ENUE		de colonia		0.5	TD	0 /	2010
DEP Ame	al Notifi ended N cellatio	Votific		1			Zip Code NEW JEF		07065	e legit		\	- F		:019
	Hold ERGEN	ICY N	IOTII	FICAT	100000000	ne of Co NARI P				Telephor 732-594	ne Nui -6352	nbert	STOS		
				F	ACILITY II	VFORM	/ATION								
Name of Facility Where Abatement	is Tak	ing P	lace	(3)				Туре	e of Facilit						
MERCK SHARP & DOHME CORPOR	RATION	1						X	School (K Subchapt Other (ie	-12) er 8 (Othe private &	r than	K-12)	is ho	mes e	etc.)
Street Address 126 EAST LINCOLN AVENUE - BUIL	DING	80 N							uare Feet 40,000	# of F	loors		Bldg	g. Age 57	
	nty (6)					nty Coo			ent Use (P						\neg
RAHWAY UNIC	2010/01/01				(STATI		ONLY)		EARCH L				FICE F	ACILI	
Name of Monitoring Firm Hired by I ENVIRONMETAL HEALTH INVESTIG				(8)		AS	CM No. 104		ne of Abate ENVIRON				ION		
Street Address	JATIO	NO, 11	VC.				104	_	et Address		CORF	ORAT	ION		
655 WEST SHORE TRAIL								100000000000000000000000000000000000000	SPOOK R		D				
City, State, Zip Code		-							State, Zip		TAL SECURITY				
SPARTA, Project Manager for Monitoring Firm	NEW	JERS			Number				FERN, NE phone Nur			cense N	li ima la a		
WILLIAM S. KERBEL, CIH		-		729-5					369-7500	nber		cense r 01	numbe	er.	
Expected State Date (10)			100000000000000000000000000000000000000		etion Date	(11)		100000000000000000000000000000000000000	e of OSHA	Monitor	111	UI			-
9 / 9 /19 Month Day Year		Мо	12 nth	/	31 Day		/19 Year	100000000000000000000000000000000000000	RISCI LA		RIES IN	NC	#	11480	
Occupancy Status During Abatement X Facility Closed/Vacated During					batement			200	et Address EAST 30T		г				
Abatement Performed Out	side of	Norn	nal F	acility		escribe			State, Zip		:				_
A Care Describe. Mer	10/11	7 1 110	~ ,	ruvi o	.00 1 101			Oity,		N YORK,	NEW	YORK	10016		
Scope of Work (Check all that apply)									nt with Neg	ative Pres	sure]		
Demolition x >3SF OR LF	X	Reno	vatio	n			Mini Enclo Glovebag		dura						
>160 SF OR 260 LF							Non-Friab			(EXTERI	OR)				
Location of		ls l	ocat	ion			tion of As			T		T A	batem	ent Tv	/pe
Asbestos-containing			7.0	used		ontaini	ng Materia	al (AC	M)	Amo	ount				
Material (ACM)	- 1		olely	NAME OF THE OWNER.		A CONTRACTOR	nermal sys				ecify	REMO	REPAIR	ENCAPSUL	ENCL
TO BE ABATED in Facility (13)			aff (1	todial	1000		n, surfacir r miscella			SF o	r LF)	DVAL	B	PS	OSUR
in racinty (10)	-	Yes		N/A	1	or othe	i illiscella	neous	?)			1		-	ㅠ
EXTERIOR SOUTH SIDE				х	WINDOW	GLAZ	NG CAUL	K		63 SF		х			
EXTERIOR NORTH SIDE				Х	WINDOW	GLAZI	NG CAUL	K		62 SF		Х			
		_									V		_		
												+	-		-
												+	+		
Name of Designation 1997				Ļ	0.11.11			Th.	(5	<u> </u>	16.11				
Name of Registered Waste Hauler FREEHOLD CARTAGE, INC.		NJDE Haule			Cubic Yard	ds of W 40	/aste		e of Regist OMING CO			RCE M	ΔΝΔΩ	EMEN	TSF
825 HIGHWAY 33			15939			+0			ALEXANDI				HINAG	CIVICI)	1 32
City, State					Disposal D			City	State						
FREEHOLD, NEW JERSEY Completed by (Print or Type)	Title				9/9/19-12/		- /	IMOV	TGOMER	Y , PA 177		to	1-0	/	
BENJAMIN SANCHEZ	Title DIRE	CTOF	ROF	OPE	RATIONS	Signa	ture /	XX			Da	X	28	11	7

Inv#14130														Pr	int Fo
(X7550PAII			FICATIOI Pursuani	t to NJA	C 8	STO 3:60 a	S ABATE and 12:12	0)	IT TO THE PARTY OF		C C		W		
Date of Notification (1)						1 0 0 0 m	r/Operator	r (2)	And the same of th	1000	0.00	2	anes		
8/27/19				rban P	riv	ate I	lome				SEP	3	2019		السا
Agencies Notified Type Notification	1		Street A	Address						Anthrope					
X EPA X Initial										- A.C	BESTOS	PERM	trem/		
X EPA				ate, Zip		The second second				7.0	LICE			/L CX	
I I Emergency		_				od N.	J 08260		- Income	ter i e anna in ny a				*****	
DOH justification)			of Conta	ct					Tel	ephone Nu	mber			
DCA Cancellatio	n		Ed												
Name of Facility Where Abatement is Taki	na Place /	2)	FAC	ILITY IN	IFC	RMA	TION	Т	F 1114 . /	41					
Ed Urban Private Home	ng Place (3)						Typ	oe of Facility (4)					
Street Address		career, and						H	School (K-1			0)			
Street Address								岗	Subchapter Other (i.e. p				dinas	hom	25
									etc.)					33	
City (5)								1 2000	uare Feet	3332	f Floors		Bldg. A	lge	
North Wildwood NJ 08260							1500000000000	116.5	000+	2			50+		
County (6)			County (STATE					10000	rrent Use (Pric	or if bei	ng demolis	hed)			
Cape May					-//				ouse						
Name of Monitoring Firm Hired by Building	Owner (8))	ASCI	M No.					batement Con	tractor	(9)	100			
N/A						10000	Perr								
Street Address							Street								
							PO				note)				
City, State, Zip Code									Zip Code						
							Wes	st Be	erlin NJ 080	91					
Project Manager for Monitoring Firm			Telepho	ne No.			Teleph	none	No.		License N	lo.			
	***************************************						856-	753	3-9800		00727				
Start Date (10)			mpletion	Date (1	1)		10000000		SHA Monitor						
9/9/19	9/20/1	·					Sam	ne							
Occupancy Status During Abatement (Che	ck Only Or	ne)			П		Street	Addr	ress						7
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor	Period of a	Abater y Hour	ment s				City, S	state,	Zip Code						
Other - Describe:					+										
Scope of Work (Check All That Apply)						The same				= 13/4/-23		100	1.036		
≥3 sf or ≥3 lf		Renova	ation					F	full Containme	nt with	Negative F	Pressu	re		
≥160 sf or ≥260 lf		Demoli	tion				-	- 1	/lini-Enclosure		8				
							×	1 N	Slovebag Proc Non-Exempted	edure (*) and	1 Non-Frish	le Pro	cedur	e	
		. 1	ion	T			line.	- 1	.on Exchipted	/ Jan	- HOITH HOL	T		ement	
Location of	100	Locat Norma				_								ре	
Location of Asbestos-Containing Material (ACM)	Use	ed Sole	ely by	Ash	este		escription ntaining N		ial (ACM)	Δι	mount				
TO BE ABATED		intena todial				herm	al systems	s inst	ulation,	(S	pecify	Re	Z	nce	Enc
In Facility (13)	Cus	(12)					facing, VA miscellar			SF	or LF)	Remova	Repair	Encapsulate	Enclosure
(15)	650	25%		-		outel	mocenal	ieous	2)			val	F	ulate	ure
	Yes	No	N/A											Ф	
Exterior Siding			x			Ext	erior Sid	ding		24	00 sf	x			
												1			
			-		-							-			
															1
lame of Registered Waste Hauler			JDEP W		1	1010	c Yards		Name of F	Registe	red Landfill				
Jnited Roll Off		1 3 3 2	Hauler ID	No.		of W	aste		G.R.O.\						
		2	22459		Ц	4				23/15/03/15/15/					
City, State						11/1/2005	osal Date		City, State		1000=				
Im NJ							0/19			ille PA	19067				
Completed by	Title						Signature	1			Da	te			

Anthony T Perna

President

8/27/19

INV#1	2250			102												Pı	rint F
UN 0010				ICATIO		SBE	STOS	ABATE		- Fr	- may		F	п	71.77	F	harrange .
000	o FA		(P					nd 12:12		-Liferacompa		E C	E	1	\mathbb{V}	L,	
Date of Notification (1) 08/02/19 check 026	62				of Buildi C KAT		Owner/	Operator	(2)	Birth of British	M					and the same of th	Tomoral and a second se
Agencies Notified	Type Notification			Street	Address						111	SE	Ρ	3 /	2019	048	U
× EPA DEP	Initial Amended			City St	tate, Zip	Co	do						Mark 51770-10.00	a harmonia de la como			
× DOL	Amended Amendment Emergency				IECK I			6		ng make management and	1	ASBES L	TOS			L &	
DOH DCA	Emergency justification) Cancellation		7		of Conta						T	elephon	e Nur	nber			in terrolatur i a
					ILITY IN		RMAT	TON									
Name of Facility Where	Abatement is Takin	g Place ((3)							of Facility	V 2.85 / 18.				-		
Street Address										School (K Subchapte		ther thar	n K-12	2)			
									×	Other (i.e. etc.)					dings	hom	es,
City (5) TEANECK NJ 0766	66									are Feet	10,233	of Floor	S		3ldg. <i>A</i> 50+	\ge	
County (6) BERGEN					Code (7 USE ON					ent Use (P		eing der	nolish	ned)			
Name of Monitoring Firm	Hired by Building	Owner (8)	ASCI	M No.			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		atement Co			TING	SINC			
Street Address								Street	Addre								
City, State, Zip Code								City, S	tate, Z	ip Code	7407	-11-01-0				Consumo R	
Project Manager for Mon	itoring Firm			Telepho	one No.			Teleph	one N	0.	407		ise N	0.			
Start Date (10)		Schedu	led Con	noletion	Date (1	1)		201 8		HA Monito	r	0130	01				
08/03/19		08/04/	19	ipicuon	Dute (1			ALL:	SOLU	JTIONS		TRAC	TING	INC	;		
Occupancy Status During Facility Closed/Vaca				ont				Street 24 C		ss CH ST							
Abatement Perform Other – Describe: 7	ed Outside of Norm	al Facilit	y Hours	iem				The state of the s		ip Code	407						
Scope of Work (Check A	ll That Apply)												Y				
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		_	Renova Demolit					×	Mir	II Containn ni-Enclosu ovebag Pro	re		tive P	ressu	re		
		T				200			No	n-Exempte	ed (*) a	nd Non-	Friabl	1	VOID ENVE	SALES SEE	
Location	of		Locati Normali	ly			Do	scription	of							ement pe	
Asbestos-Containing TO BE ABA	Material (ACM)	Use Ma	ed Sole aintenar	ly by nce/	Asb	esto	s Con	taining M systems	laterial	(ACM)		Amount				m m	т
In Facili (13)		Cus	todial S (12)	Staff?	, ,,	C. 1	surfa	cing, VA	T, or	ation,		(Specify SF or LF)		Removal	Repair	Encapsulate	Enclosure
(10)		Yes	No	N/A	1		outer t	Illocellati	eousj					val	=	ulate	ure
ATTIC)			X			VER	MICUL	ITE		1	850SF		X			
						Ī							-01.C/16				
Name of Day's to 112																	
Name of Registered Was ATLANTIC CARTING			1	JDEP W auler ID			of Wa	Yards ste		Name of GRAN							
City, State							TDB Dispos	sal Date		City, Sta			-				
PEN ARGYL PA 180	72						TDB	1		PEN A		L PA 1	8072	2			
Completed by LUIS ARCILA		Title PRE	SIDEN	ΝΤ			S	Signature	<u> </u>	×	1	<u></u>	Dat 08	e /02/2	2019		
							19			-	/						

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

TW#	14131		NOT	ILIO	S	tate of N	ew	Jersey	of pred 11 12 peep 5, 5 mays					
CK 8832	2 I	PA	TON					STOS ABAT 8:60 and 5:10		MEC	E		7 [
Date of Notification (1)			A JUL DI	B	Name	of Building	0 0	wner/Operator (2)	11-1/1				
8/	26 /	19						ty Improveme		IIIIIII se	:p '	3 20	10	
Agencies Notified	Type Notific	ation	110722		Street	Address	+			<u> </u>	1 '	20	13	Land
⊠ EPA						Market	St.							
□ DOLWD	☐ Amended	d				State, Zip C		0		ASBES	STOS C	ONT	ROL	8
☑ DHSS	Amendm	ent#_				nden NJ.		A service of the serv			LICEN	SING	or the same of	-
☑ DCA	☐ Emergen		cluding	7				102		1=:::::::::::::::::::::::::::::::::::::				
(NJAC 5:23-8)	Justificati					of Contac				Telephone N				
	☐ Cancella	tion				na Marie				856-8255	543			
Name of Facility Wilsons A	\h_sta	T-1/	Disease	(0)	FA	CILITY IN	FC	RMATION						
Name of Facility Where A	Abatement is	акіпд	Place	(3)					Type of Facility	(f., . f.				
Masonic Building									School (K-12		10)			
Street Address									Other (i.e., p	8 (Other than Karivate and com		uildin	as.	
1201 Haddonfield B	Berlin Road								homes, etc.)			8	5-1	
City (5)		UIII COLOR							Square Feet	# of Floors	E	Bldg. A	ge	
Cherry Hill									20,500	2		+/- 7	0	
County (6)					Cour	ty Code (7)(S1	ATE USE ONLY)	Current Use (Pr	ior if being dem	olished)	774		
Camden								•	Vacant					
Name of Monitoring Firm	Hired by Build	ding O	wner ((8)	ASCM	No.	N	ame of Abateme	ent Contractor (9))				
Environmental Con	sulting Ass	ociat	esLL	С				Andrews Anne De Company	mental Manag					10
Street Address								treet Address	orrear mariag					
P.O. Box 217			**					8436 Enterpr	ica Avanua					
City, State, Zip Code					-			ity, State, Zip Co						
Schwenksville Pa. 1	10/73													
	Marie Control of the			Tale	nhana	NI=		Philadelphia,	PA 19103	711				
Project Manager for Moni Andrew Melinchuk	toning rinni				phone 5-439			elephone No. 215-365-5810		License No.				
Start Date (10)	Та	Cabadi	ulad C							1156				
9 / 9 /					tion Da	19		ame of OSHA M USA Environ	ionitor mental Manag	ement, Inc				
Occupancy Status During							St	reet Address						
□ Facility Closed/Vacate								8436 Enterpri	ise Avenue					
Abatement Performed					s - Des	cribe	Ci	ty, State, Zip Co	ode					
Time of Abatement: _A	AMPM	I/ <u>:</u> PM-		_AM				Philadelphia,	PA 19153					
Scope of Work (Check all	that apply)						Ī	□ Eull Cont	ainment with Neg	antivo Drossura				
≥3 sf or ≥3 lf			☐ Re	novati	on			☑ Mini-Enc	losure	gauve riessuie				
≥160 sf or ≥260 lf			☑ De	molitic	n			⊠ Glovebag	g Procedure		is a			1
			- 1-						mpted (*) and No	on-Friable Proce	edure			
Location	of.	1	7073	Locat Vorma	100000			D			A	baten	ent T	уре
Location Asbestos-Containing N		1)	Use	d Sole	ly by	Ashe	stos	Description of Containing Ma		Amount	78	Repair	四四	En
TO BE ABA	TED	,		intena				ermal systems		(Specify	Kemoval	pai	Encapsulate	Enclosure
IN Facilit	ty	1	Cus	todial (12)	Staff?			surfacing, VAT,		SF or LF)	vai	. ~	lus	sure
(13)		Ì	Yes	No	N/A		C	ther miscellane	ous)	•			ate	1
Upper Level					N/A	Black N	las	tic Wall Stud	s .	141 SF		1 0		П
Lower level								or Mastic						
			 				10			2025 SF		-	1	
Lower Roof								Flashing		2820 SF		-	브	
Upper Level	la Haudau							ile Mastic	10 (5)	725SF				Ш
Name of Registered Wast Service Transport	te nauler			223	JDEP \ auler ID	No.	W	ubic Yards of aste	Name of Regis					
City, State					20990		_	5 sposal Date						
New Castle De.								sposal Date 7/16/19	City, State Waynesbu	ırg Pa.				
Completed By (Print or Ty	rpe)	Title	28.025.0					Signature/	111	1	Date			-
Kevin Meldrum		Pr	oject	Man	ager			Lo.	- Mill		8-	-26	1	9

m.	E	C	E		\mathbb{V}	E	n
M		SEP		3	2019	TO THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TO THE PERSON NAMED IN COLUM	

Location of Asbestos-	Is Loca	tion Normally	Jsed	Description of	ACM (i.e.	Amount (Specify SF or LF)	Abateme		
Containing Material (ACM) in Facility (13)	Solely i	oy Maint./Cust Staff? (12) NO	odial NA	Description of A thermal systems surfacing, VAT miscell	Insulation, or other	ASBESTOS	CONTR		nclose
Exterior Doors			х	Door Caulk		80 SF	Х	1.000	
Mechanical Room			х	Pipe Insulation		30 LF	х		
Stage Area			Х	Vermiculite		165 SF	х		
Stage Area			X	Fire Doors		200 SF	х		
			-						
					,				
•									

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) 08-28-19 PRC KKF Group Agencies Notified Type Notification Street Address P.O. Box 70, 40 Monmouth Park Highway 2019 SEP **EPA** Initial DEP City, State, Zip Code Amended × DOL Amendment # West Long Branch, NJ 07764 ASBESTOS CONTROL & Telephone Number SING Emergency (including Name of Contact DOH justification) DCA Cancellation Peter Wersinger III, Esq. (732) 222-2000 x2207 FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Fort Monmouth School (K-12) Street Address Subchapter 8 (Other than K-12) 155 Sherrell Road Other (i.e. private & commercial buildings, homes, X City (5) Square Feet # of Floors Bldg. Age Oceanport, NJ 1,000 1980 County (6) County Code (7) Current Use (Prior if being demolished) (STATE USE ONLY) Monmouth Commercial Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Langan Engineering & Environmental Services Pinnacle Environmental Corp. Street Address Street Address 300 Kimball Drive 200 Broad Street City, State, Zip Code City, State, Zip Code Parsippany, NJ 07054 Carlstadt, NJ 07072 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Vijay Patel (973)560-4983 201-939-6565 00756 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 09-10-19 03-31-20 Even-Air Inc. Occupancy Status During Abatement (Check Only One) Street Address 10-59 Jackson Avenue Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: Long Island City, NY 11101 Scope of Work (Check All That Apply) >3 sf or >3 If Renovation Full Containment with Negative Pressure ≥160 sf or ≥260 If Demolition Mini-Enclosure Glovebag Procedure × Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Туре Normally Location of Description of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ Encapsulate TO BE ABATED (i.e. thermal systems insulation, Enclosure (Specify Custodial Staff? Remova In Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous)

Yes No N/A Ground Floor Floor Tile & Mastic X 900SF X Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste ATC, Inc. / Newark Carting, Inc. (04509) Minerva Enterprises 24310 TBD City, State Disposal Date City, State Shirley, NY / Newark, NJ 07105 TBD Waynesburg, OH 44688 Completed by Title Signature Date Richard Doran Project Manager 08-28-19

- 11115-													Pr	int Fo
IAV# 14157	H		CATIO	N OF A	SE	ew Jersey BESTOS ABATE 8:60 and 12:120			D.	E C	E		\mathbb{V}	
Date of Notification (1) 08/29/19			Name o Respi		ling	Owner/Operator	(2)			SEF)	3	2019	
Agencies Notified Type Notification EPA Initial			Street A			nt Road NE, E	Buildi	ng 7 Suite	70 A	SBEST	OS	CON	ITRO	L&
DEP Initial Amended DOL Amendmen Emergency			City, St Atlant							L	CEN	VSIN	G	
DOH justification) Cancellation			Name o Respi		act				Telepho 844-5					
None of Facility Advantage of Facility Advan			FAC	ILITY	NF	ORMATION								
Name of Facility Where Abatement is Takir 325 Milburn Avenue	ng Place (3	3)					Туре	of Facility (4) School (K-12)						
Street Address 325 Milburn Avenue					Ī		×	Subchapter 8 Other (i.e. privetc.)	(Other tha			dings,	home	es,
City (5) Lyndhurst		- SI BC10 X1074-0		· VOIDAL IOS			Squa	are Feet	# of Floo	ors	В	lldg. A	Age	
County (6) Bergen			County (STATE				Curre	ent Use (Prior	if being de	emolishe	ed)			
Name of Monitoring Firm Hired by Building	Owner (8)		ASC	M No.				atement Contr D PROFES		.S				
Street Address						Street 6 WH		ess DOVE COU	JRT					
City, State, Zip Code					ı			Zip Code OD, NJ 087	701					
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph 732-6			120	ense No 00				
Start Date (10) 09/09/2019	Schedule 09/12/2		npletion	Date (11)			HA Monitor D PROFES	SIONAL	.S				
Occupancy Status During Abatement (Chec	ck Only Or	ne)			П	Street								
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe:	Period of Amal Facility	Abatem Hours	ient			City, S	tate, Z	DOVE COL Zip Code OD, NJ 087						
Scope of Work (Check All That Apply)					Н					7			-	
≥3 sf or ≥3 lf≥160 sf or ≥260 lf	-	Renovat Demoliti				×	Mi	III Containmen ni-Enclosure ovebag Proceon-Exempted (dure				e	
Location of	1	Locatio	у			Description						Abate	ement	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	d Solel intenar todial S (12)	nce/	As	bes (i.e	stos Containing M thermal systems surfacing, VA other miscellan	fateria s insula T, or	ation,	Amour (Specif SF or Li	y	Removal	Repair	Encapsulate	Enclosure
INTERIOR	Yes	No	N/A			ACM Pipe Ins	ulatio	nn l	150 LI	F	×		te	(0
							aidiic		100 E					
Name of Registered Waste Hauler		H	I JDEP W auler ID 1509			Cubic Yards of Waste 3		Name of Re	egistered L	andfill				
City, State NEWARK, NJ						Disposal Date 09/12/2019		City, State BETHLE	HEM PA					
Completed by JOSEPH PERLSTEIN	Title OWN	IER				Signature	!	1		Date		9		

11/14/14/14/14/14/14/14/14/14/14/14/14/1						Jersey	which summarisation on the world	C	heck 2	2540			
	ICA	LION	OF	AS	B	ESTOS AE	BATEMEN	F	PA		D 0	and the supplement of the supp	
CKOSYU PALDIPU	rsua	int to	0 <u>N.</u>	J.A.	C	8:60 and	12:120)	D)r	EC		\mathbb{V}		M
Date of Notification (1)	N	lame o	of Bui	ilding	O	wner / Operato	or (2)	mit				-11	
8/26/2019		ureK		_				Ш	SEP	3 2	010		UIII
Agencies Notified Type Notification EPA		treet /					Gwessyy				710	16	
DEP Initial		809 E						L	CUCOTA	0.05			
DOL Amended		Villian					-	71	SBESTO	s cont Ensing	ROL	હૈ	
☐ DOH ☐ Emergency		ame c			. 40				OTHORN STATEMENT	Telepho	*	lumh	er
☐ DCA ☐ Cancellation	J	oe Dr	udin	ıg						609 80			
		FAC	ILITY	Y INF	0	RMATION							
Name of Facility Where Abatement is Taking Place Residence	ce (3)				I	Type of Facil			JAC-N-A				
Street Address	-	-			H	School (K-12) oter 8 (Other ti	han 1/ di	0)				
							e. private & co			age hom	100 0	oto)	
						Square Feet				Bldg. Ag			
City (5) County (6)	Cou	nty Co	ode (7	7)	Ť	1200		1			80+		
Runnemead Camden						Current Use	(Prior if being	demolis	hed)				
		-											
Name of Monitoring Firm Hired by Building Owner	r (8)		ASC	M No			tement Contra						
Street Address			1		+	Street Address	ronmental S	ervice	S				
ou ou number						PO Box 829							
City, State & Zip Code				XXIII	T	City, State &			-				$\overline{}$
						Trenton, NJ							
Project Manager for Monitoring Firm	eleph	one N	lumbe	er		Telephone No. 609-847-295		Į.	icense l	Number 0122	22		
Scheduled Start Date (10) Scheduled Comp	letion	Date	(11)	-	T	Name of OSF	A Monitor			0122		-	_
9/9/2019 9/15/10`9					Ц	EMSL Analy					_		
Occupancy Status During Abatement (Check only Facility Closed/Vacated During Entire Per	one)	Ahate	men	÷		Street Addres 107 Haddor							
Abatement Performed Outside of Normal						City, State & 2							
Describe:		3000				Westmont,							
Facility Occupied During Abatement						,							
Scope of Work (Check all that apply)							N 5.110-				_		
☐ ≥3 sf or ≥3 lf	\boxtimes	Renov	ation	,				ntainme nclosure	ent with N	vegative	Pres	sure	
≥160 sf ≥260 if		Demo		`					cedures				
_								•	and No	n_Friable	Pro	redu	re
Location of	Is Lo	cation	1		Ì	Description			mount		ateme		
		lly Us			1	Asbestos-Cont			Specify				<u>,, </u>
Material (ACM) TO BE ABATED		ely by nance			1	Material (AC i.e., thermal sy		SF	or LF)	20	77	Enc	E
in Facility C		ial Sta	00162883	i		ulation, surfac				Remova	Repair	aps	Enclsoure
(13)		12)	1/0			other miscella				Va.	¥.	Encapsulate	ure
A441		No N	N/A		H	Vermiculi	ito	1200	•				
								12009			Ш		
Name of Registered Waste Hauler		NJDE				ubic Yards Waste	Name of Reg	gistered	Landfill				
ALPHA ENVIRONMENTAL		0000	3330	STORY IN	30		Grows						
City, State		l			Di	sposal Date	City, State						
Hamilton, NJ					Vá	arious	Tullytown I	PA					
Completed By (Print or Type)	11-17-11-11	Title	723			gnature				Date			
Rod Richardson		Proje Mana			P.r.	el Richardson				8/26	/201	19	

Tnv# 135001			0	tota af N							No original and the				Pri	nt Fo
Inv#13561 OK 0265 PA	M		CATIO	N OF AS	BE	Jersey STOS A :60 and			Delivery (Constitute		EC			\mathbb{V}		M
Date of Notification (1) 08/08/2019 check #0265				of Buildin		wner/Op	perator	(2)	and the second		SE	Р	3	2019		H)
Agencies Notified Type Notification			Street A	Address	Ī											
EPA Initial Amended Amendment				ate, Zip SEY N			-		Table 1		ASBES		COI NSIN)L &	
DOH justification) DCA Cancellation		· [2	Name o	of Contac	ct					Te	elephone	Nun	nber			
Name of Facility Where Abatement is Takin	g Place (3)	FAC	ILITY IN	FO	RMATIO	N	Tyne	of Facility	(4)						
	911400 (0,							School (K-							
Street Address								×	Subchapte Other (i.e. etc.)	private	& comn	nercia	al build			es,
City (5) RAMSEY NJ,07446								Squar 50X1	re Feet 100		of Floors FL	3		ldg. A	ge	
County (6) BERGEN				Code (7 USE ON			_	Curre	nt Use (Pr TY	ior if be	eing den	nolish	ed)			
Name of Monitoring Firm Hired by Building	Owner (8))	ASCI	VI No.	I				tement Co			ING	INC	:		
Street Address					Ī		Street /		s CH ST							
City, State, Zip Code					Ì		City, St	ate, Zi	p Code D NJ 07	407						
Project Manager for Monitoring Firm			Telepho	ne No.	T	1	Telepho				Licen 0130).			
Start Date (10) 08/09/2019	Schedul 08/10/		pletion	Date (1	1)				IA Monitor		TRACT	ING	INC			
Occupancy Status During Abatement (Chec	k Only O	ne)			T	- ;	Street A	Addres	S							
Facility Closed/Vacated During Entire I Abatement Performed Outside of Norm Other – Describe: START 3:30 PM TO	nal Facility	v Hours	ent				City, St	ate, Zi	CH ST p Code D NJ 07	407						
Scope of Work (Check All That Apply)							LLIVIV	7000	D INJ UT	401						-
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demoliti					×	Min Glo	Containm i-Enclosur vebag Pro	re ocedure	:					
	ls	Location	nn					Nor	n-Exempte	ed (*) ai	nd Non-l	-nabl	T	Abate		\dashv
Location of		Normall ed Solei	у				ription				200000000000000000000000000000000000000			Тур	oe	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	aintenar todial S (12)	ice/		e. t	s Contai hermal sy surfacir other mis	ystems ng, VAT	insula Г, or		(Amount (Specify SF or LF)		Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A										=		ate	Ġ.
BASEMENT			Х		P	IPE IN	SULA	TION			45LF		X			
																\dashv
Name of Registered Waste Hauler		I N	JDEP W	Jacto		Cubic Ya	arde		Name of	Paris	lorod I -	ndfii				
ATLANTIC CARTING			auler ID			of Waste			Name of GRAN							
City, State PEN ARGYL PA 18072						Disposa TDB	I Date		City, Sta		PA 1	8072	2			
Completed by LUIS ARCILA	Title PRE	SIDEN	NT T			Sig	nature		- Z	1	<u> </u>	Dat	e	/2019	9	
						1		-		1					-	

21 2019 03:26PM NJ Asbestos	Con	trol 6	09,633	3.0664			page 1	Frank P	<u></u>	F	11	W E
1.13.2019 07:06 AM A	a Ma	n (4	7N+~:	acting				10년	6	<u>E</u> -	·	<u>V.</u> 医
TOV#12002			-261 kp <u>J.</u> (secing			2012620	DOL - 1	G-E		CF 3 2	019
CK 1880 PA		NPTH ()	STACE NEW PIU	itale of New . N OF ASSES t to NJAC 8:	Jen OTI 10 a	ley B ABATE Ind 12:12	IMENT 6)	AUG ASB		-	-	36 30.8
Date of Notification (1) 8/2-1/19			Name	of Building Ov	vrie Tê	Operate O na	AUASEM	EUT A	1	CEN	SING	+
Agencies Notified Type Notification			Street	Address :		VING		WAIVER AF	ZF,	QV		\dashv
DEP Amended Amendment			City. 8	ate. Zin Cade			5070	19		A Continue		
EN DOH Sentification Cancellation	inceydin		Nama	of Control Y SHAT		_		Telephone Nu 973-3	mber 2 m-	26	מם'	
Name of Facility Where Absternent is Takin	n Blace	791	_	Private,		The second second			94 94	-		
GARFIELD PARK AN	HETM	EN	75				Type of Fed		20.00			
Street Address						. "	Fisheria	ter A Chine then Ker	2) -'			_,
BOUNDBROOK		***************************************			-	,	Square Feet	# of Floors	T	Sidg.	Age	
County (B) SOMERSET		T	County	Gode (7)				Prof If being demole	hed)		lor.	
Name of Manitoring Firm Filters by Building (Avner (8	ij ·	ASC	M No.		Name	of Abstement ac Contracti	Contractor (9)				
Sirel Address		111				area	Accrese Vresland Av					
City, State. Zip Code	,		-			City, B	Heto, Zip Gode and Park, N.		-			_
Project Manager for Monitoring Pinn		T	Talegh	na No.		Teleph	1002 No. 262-5841	Licenes N	ls.	-		_
Start Date (10)	Bahadu	led Soil	npletion 6 / / 9	Date (14)		Name	of OSHA Mark					
Cosupancy Status During Abatement (Cites)	Only O	ne)		***		Bireal	Address	rental Gervicer in	C.		-	
Facility Glosed/Vecated During Entire F Abstament Performed Quietle of Norm	enod of PI Fadili	Abeter Y Helin	nont I			City A	duyler Stree late 7th Cods		-	-contact		_
Goope of Work (Check All That Apply)	- Administration					HEON	eneack, NJ	07806				_
29 at or 23 if 2160 at or 2250 if		Renova Demoki					Mini-Engles Glovebac P	PODRAL PA		51 		And the second second
I cantilate as		Local Normal					A A DAY - MI CAMPA A I P	ted (") and Non-Friab	le Pro	Abet	omen	-
Asbastos-Centaining Material (ACM) TO SE ASATED	Use	ed Sole	ly by	Asbestos	Cor	ecristion taining M	Stanal (ACM)	Amount		18	/pa	
in Facility (19)	Yea	tedial (12)	Neft?	i (i.e. the	Fifth	i dystems ising, VA misoslina	Insulation.	(Specify SF or LP)	Rossoni	Rogair	Encapsulate	Condesses
CRAWLSPACE	1.00	140	×		and deba	PIPE		Q-35°2E	1		R	
							2	9-33 22	X		_	-
	- Anna Anna Anna Anna Anna Anna Anna Ann											
Name of Registered Weste Hayler		N	DEP W			Yarda		of Registered Landfill				
Sity, State			509			210		i Central Sanitary	Lan	dfill		
Newark. NJ 07105				D	100 P	21/19	Pen A	neyl, PA 9897?	-			,
E. McConaccas same	10 02 20 20	A PARTY NAMED IN	A STATE OF THE PARTY OF THE PAR					11				

H37DLe	458		NOT		ursi	ON	LTO NJA	C 8	TOS ABAT	6)	MENT	Di		************		V	E	Annual Control of the
Date of Notification (1)				Open					ner/Operator	. 33		L L	5	EP	- 3	201	9	Tener
	28 /	19				All A	America	n En	vironmenta	ıl	and the same of th		3	7	26	4/		-
Agencies Notified EPA	Type Notifica						Address Edison	Roa	d		Ĺ	N de la Contraction de la Cont	ASSE		S CO ENSII		OL &	-
☑ DOLWD ☑ DOH	☐ Amended Amendme				Ci	ty, S	tate, Zip C	Code					1.70					
□ DCA	☐ Emergend		cluding	1		Lak	e Hopato	cong	g, NJ 07849									
(NJAC 5:23-8)	justification	on)			Na	ame	of Contac	t				Teleph	none N	Numbe	er			
	☐ Cancellat	ion				And	Irew Smi	th				973	-663-	1680				
						FAC	CILITY IN	FOF	RMATION									
Name of Facility Where A	batement is T	aking	Place	(3)						T	ype of Facility (4	4)						
Bank of America											☐ School (K-12) ☐ Subchapter 8		than k	(12)				
Street Address							_		0/1/0		Other (i.e., pri				ial bui	lding	S,	
161 Maplewood Ave	enue							1	HO		homes, etc.)			15			88	
City (5)										S	quare Feet	Elements and	Floors			g. Ag	е	
Maplewood											10,000 sf	2				5		
County (6)					C	coun	ty Code (7)(STA	TE USE ONLY)	C	urrent Use (Pric	or if bei	ng der	nolish	ed)			
Essex											Bank					7-00		
Name of Monitoring Firm		ling O	wner ((8)	AS	CM I	No.	1			Contractor (9)							
Guardian Contraction	ng, Inc.								All the second of the second of the second of	nti	racting, Inc.							
Street Address									eet Address									
1889 Rte. 9, Unit 61									889 Route 9	- 1.5	-1000 200 III							
City, State, Zip Code								1	y, State, Zip C									
Toms River, New Je Project Manager for Moni				T-	la a la a		VI-			Ne	w Jersey 087							
Nicholas Fernicola	toring Firm			188	lepho		-9932	1	ephone No.	2			nse No	ο.				
Start Date (10)		chod	ulad C	1	20150013010	7	te (11)		'32-349-9932 me of OSHA N		itar	00	624					
09 / 07 /			9 /	100			32		.M.S.L. Ana		0.00							
						<i>i</i> -				uyı	ucai							
Occupancy Status During Facility Closed/Vacate					omor	a f		The same	eet Address 056 Stelton									
☐ Abatement Performed							cribe		y, State, Zip C									-
Time of Abatement:								1 20			e w Jersey 088	EA						
Scope of Work (Check all	that anniv)							-	iscalaway,	ME	w Jersey 000	134					- 1 1/2	
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 	тат арруу		⊠ Re □ De						☐ Mini-End	clos ig F					9			
					ation										Aba	ateme	nt Ty	/ре
Location Asbestos-Containing I		n			nally olely b	ov	Asha		Description of		sial (A CRA)				Re	Re	ш	m
TO BE ABA)	Ma	inter	nance	e/			Containing Ma ermal systems			100	nount pecify		Remova	Repair	Encapsulate	Enclosure
IN Facilit	У		Cus	todia (12	al Star	ff?	13	5	surfacing, VAT	, 01	r		or LF		val	7	sula	sure
(13)			Yes	No		N/A		Ot	her miscellane	eou	s)						te	
2 nd floor cooling roon	n						asbesto	os p	ipe fittings	de e			50					
			П		Г										П	П	П	П
			_	-]
			Ш		L										Ш	Ш	Ш	Ш
Name of Registered Wast Guardian Contraction					Haul		Vaste D No.	50000	bic Yards of ste		Name of Regist T.R.R.F.	tered La	andfill					
City, State									posal Date		City, State							
Toms River, New Je	ersey							0	9/09/19		Tullytown,	Penns	ylvar	nia				
Completed By (Print or Ty	rpe)	Title						1	Signature	/	\cap			Dat	e /	j		
Nicholas Fernicola		Pr	oject	Ma	nage	er					1			5	1)	5/1	4	

J/W 141:	NO				. 6	(De 6 (II)		T		n n	// Tr	=	_
147701		N	OTIF		MOIT	OF ASE	SESTOS ABAT		D), <u>5 6 5</u>	1 /	<u>// [c</u>		
U12120	00								n i			distriction of the second	
Date of Notification (1)	-6				Name	of Building	Owner/Operator (2	2)	SEP -	20	19	1111	#
	28 /	19	2		Tra	dewinds	Builders, LLC			5-	1)		3
Agencies Notified Tradewinds Builders, LLC													
Date of Notification (1)													
					City, S	State, Zip C	ode		7)				
		_	— dina		Lon	g Beach	, NJ 08008						
	justification	on)	unig		Name	of Contact			Telephone Numb	er			41-11
	☐ Cancellati	ion			Tra	vis Leply	10		609-290-4081				
					FAC	CILITY IN	FORMATION				146	-0	
The state of the s	batement is T	aking P	lace ((3)									
Street Address								Other (i.e.,	private and commerc	ial bu	ilding	S,	
City (E)									<u> </u>	l Di	I		
									N. 2500 020202	1		je	
					Coun	ty Code (7	VSTATE LISE ONLY)	100000000000000000000000000000000000000			-		
					000	ity 0000 (/	Norme ode one in			(Cu)			
Name of Monitoring Firm	Hired by Build	ling Owr	ner (8	3)	ASCM	No.	Name of Abateme	ent Contractor (9	9)				
N/A							Guardian Co	ntracting, Inc	•				
Street Address							Street Address						
							1889 Route 9	, Unit 61					
City, State, Zip Code							City, State, Zip Co	ode			74.11		
								New Jersey 0	8755		n.e.		
Project Manager for Moni	toring Firm			Tele	phone	No.							
Chart Date (40)			10-		D.	t - (4.4)			00624				
								iyudai					
Date of Notification (1)													
						cribe		ode					
Time of Abatement: _	AM	PM/_		_PM-		AM			8854				
Scope of Work (Check all	that apply)							•					
□ >3 sf or >3 lf		Г	Ren	ovati	on				egative Pressure				
							☐ Glovebag	g Procedure					
			la I		ion			mpted (*) and N	on-Friable Procedur	_			CONTRACTOR OF THE PARTY OF THE
Location	of						Description of	ıf		-		32 - 5	
Asbestos-Containing	Material (ACM)					stos Containing Ma	terial (ACM)		Rem	Rep	Enca	Enclosure
				odial		(i.e				lova	air	nsde	osur
	-2	_			_	-			0. 0. 2. /	-		ilate	e e
		Y		AL-AN	S STEEL STORY					-			
exterior-house				\boxtimes		asbesto	os siding		1900 sf				
exterior-garage]	\boxtimes		asbesto	os siding		700 sf				
		T	7	П	T					П	П	П	П
Name of Registered Was	te Hauler				1000		Cubic Yards of	Name of Red	istered Landfill				
				Н									
City, State					20223)		City, State					
Toms River, New Je	ersey						The second second second		n, Pennsylvania				
Completed By (Print or Ty	ype)	Title					Signature	7	Da	e/	1		
Nicholas Fernicola		Pro	ect	Man	ager				5	1	0/1	9	

INVIU	los		NOTIF	ur su ani	towJA0	ESTOS 8:60 ar	ABATE	MEN		F	2K#	¥ 17	80			
Date of Notification (1) 08/27/2019				Name o	of Building AND N	Owner/	Operator WHEEI	(2) _ER		PARTIES STATE		G	E		V/ E	
Agencies Notified	Type Notification	Ī		Street A	Address					Par	1					-111
EPA DEP DOL	Initial Amended Amendmen	: 11		City, Sta	ate, Zip C	ode	2027			No. of the last of		SEP	-	3 20)19	The state of the s
DOH DCA	Emergency justification	(including		Name o	f Contact CY WHF			***************************************	allie, y monormy, mai salma y diallicana dal sa ca	Te	As	BEST ne Num	OS C	ZONI	ROL	8
<u> </u>	LJ Odriociiadoi		1		LITY INF			-	-			·			alasiasia see	
Name of Facility Where A RESIDENTIAL Street Address	Abatement is Takir	ng Place (3)					103000	School (K-1) Subchapter	2) 8 (Ot				dia	h	
City (5) GIBBSTOWN	and the construction of th	and the second second			and the partnership to the same of			Squ 160	Other (i.e. p etc.) are Feet		of Floo		Ē	ldg. A	5.1001.000.00	:S,
County (6) GLOUCESTER	other terminals state year or the state of t			County (STATE)	Code (7) US≣ OHLY	·		Curr	ent Use (Pric SIDENTIA	or if be	aing de	emolish		50+		and the second of the second
Name of Monitoring Firm ACER ASSOC.	Hired by Building	Owner (8)	,	ASCN		~,~~	Name	of Ab	atement Con	tracto	r (9) ENT/	AL SE	RVI	CES	INC.	••••••
Street Address 1012 INDUSTRIAL	DRIVE	e chiebles (med per min propaga					Street 570		ess MS RUN						-	
City, State, Zip Code WEST BERLIN NJ	08091				\	-	City, S MUL	tate, i	Zip Code A HILL NJ (0806	2				-	
Project Manager for Moni MATT DEPALMA	toring Firm		T	Telepho 856-8	ne No. 09-1202	2	Teleph 610-		√o. 4678			nse No 145).	nent et au en au	diales per migraci y decre	
Start Date (10) 08/29/2019		Schedul 08/29/			Date (11)		Name EMS		HA Menitor				******	THE PERSON LAND		
Occupancy Status During	Abatement (Ched	k Only Or	າຍ)		***************************************		Street									
Facility Closed/Vaca Abatement Performs Other - Describe:	ted During Entire d Outside of Norn ESIDENTIAL-WO	Period of A nal Facility ORK AREA	Abaten Hours VACA	nent S NT DUR	IING ABA	TEI	City, S	tate, 2	I30 NORTI Zip Code INSON NJ		77				andre militie	
Scope of Work (Check All	That Apply)					ورمياه منيا مسرحة بمنسيات										
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	n.	AND SHOWS	Renova Jemolit					Mi Gi	ill Containme ni-Enclosure ovebag Proce on-Exempted	edure					a	
		ls.	Locati	on	***************************************		The second second							Abate	ment	
Location			dormal d Sole				scription							Ty)ė	
Asbestos-Containing I TO BE ABA In Facilit (13)	TED	Ma Cusi	intenar rodial S (12)	nce/ Staff?		tinermal surfac	aining M systems cing, VA niscellan	i insul 1, or	ation,	(3	Amoun Specify F or Li	y	Removal	Repair	Encapsulate	Enclosure
FAMILY RO	DOM	Yes	No	N/A X		NF1 F	LOOR	TILE		1	52 SI	= -	X		(U	
Name of Registered Wast ASSURED ENVIROR		RVICES	1	JDEP W auler ID 034895	No.	Cubic of Was			Name of R MINER\				er (manuser)			
City, State MULLICA HILL NJ					*	Dispos	sal Date 0/2019		City, State WAYNE		IRG,	 ОН	·			

Title GENERAL MANAGER

Signature

Completed by RON SWANSON

Date 08/27/2019

Ch3439 Invi	10	NOTIFI	Station CATION Ursuant	of New OF ASBI TO NJAC	v Jers ESTO 8:60 a	ey S ABATE nd 12:120	MENT			S	EP.	- 3	20	119	And the second s
Date of Notification (1) 08/27/19 Check # 3439				Building			(2)		tool to		C. Lan.				
Agencies Notified Type Notification			Street A	ady of th	e vai	ley				ASBI	-ST	OS C	ONT	ROL	2
		- 1		alley Str	eet					, (00	LI(CENS	SING	Manager Park	in descriptions
EPA Initial Amended		-	City, Sta	te, Zip Co	de										
DOL Amendment #		— L	Orang	e, NJ 07	050										
DOH justification)	oraamig			Contact Miguel						ephone 3-674-					
DCA Cancellation				LITY INFO)RMA	TION			31	3-074-	730	0			
Name of Facility Where Abatement is Taking	Place (3	3)	.,				Type	of Facility (4)						
Our Lady of the Valley								School (K-12							
Street Address 510 Valley Street								Subchapter 8 Other (i.e. pr					lings,	home	es,
City (5)	-99571134							etc.) re Feet	T # of	Floors		BI	dg. A	ge	
Orange							10,0		4	1 10010		1.00/2003)+	90	
County (6)				Code (7)	3			nt Use (Prior	r if bei	ng dem	olishe	ed)			
Essex	(0)			JSE ONLY)	_		Scho								
Name of Monitoring Firm Hired by Building Ov N/A	vner (8)		ASCN N/A	l No.			of Aba	tement Cont es	ractor	(9)					
Street Address N/A							Addres			5					
City, State, Zip Code			7627			City, S	tate, Zi	p Code							
N/A								g, NJ, 070)22						
Project Manager for Monitoring Firm N/A			Telephoi N/A	ne No.		0.0000000000000000000000000000000000000	none No 295-1			Licens 0107		.			
	Schedule 08/30/1		pletion (Date (11)		Name N/A	of OSH	A Monitor							
Occupancy Status During Abatement (Check				(1		Street N/A	Addres	S							
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe: 9am							tate, Zi	p Code				C110			
Scope of Work (Check All That Apply)						IN/A	-						-		-
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renovat Demoliti				×	Mir Glo	Containmenti-Enclosure vebag Procented	edure					Э	
	Is	Location	on											ment	
Location of		Normalled Solel		0.00		escription							ıy	ре	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	intenar todial S (12)	ice/	Asbest (i.e.	therm: surf	ntaining Nal systems acing, VA miscellar	s insula T, or	(ACM)	(8	mount Specify or LF)		Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A											ю	2753
Basement Boiler Room		Х			A	CM Deb	ris		8	3 SF		X			
												701			
							- 17								
Name of Registered Waste Hauler		N	JDEP W	laste	Cubi	c Yards		Name of R	Peniete	red I an	ndfill			/	
EA Services Corporation		Н	auler ID 01278		of W	aste a		Tri-State				ciate	es		
City, State Guttenberg, NJ					Disp TBD	osal Date)		City, State Bronx, N							
Completed by Michael Fajardo	Title Office	e Cler	k			Signature	γ.	nA			Dat 08	e /27/1	9		

										F	<u></u>	E	ПП	Pri	nt-Fe
Ch 1266	N	IOTIFI (P	ursuant	ate of Nev I OF ASBI to NJAC	ESTOS A 8:60 and	ABATE 112:120	ģ)	г		E				y [Annual Control Control
Date of Notification (1) 08.29.19	154			f Building (OF TRE				HOUSING	ПП	8	SEP	Ċ	3 20	119	l law
Agencies Notified Type Notification	on		Street A	ddress AST STA	ATE S	TREE	Г			ASB	ESTO	S C ENS	ONT	ROL	&
X DEP Amended Amended Amendment	ent #1	_		ate, Zip Co TON, No		8				110		oblind			
DOH justificatio				f Contact ROACH					1 200	phone 9-989-					
			FACI	LITY INFO	ORMATI	ON								1.7.10000	
Name of Facility Where Abatement is Tal	king Place (3)					Тур	e of Facility (4	1)						
Street Address							×	School (K-12 Subchapter 8 Other (i.e. pr	8 (Othe			build	lings.	home	es,
City (5)							Squ	etc.) are Feet	# of	Floors		В	dg. A		
County (6)				Code (7)				rent Use (Prio			olishe		19		
MERCER Name of Monitoring Firm Hired by Buildir			ASCN	M No.		Name	of Ab	IVATE RES	tractor	(9)					
A SEINE LIGHTHOUSE SOLUT Street Address	IONS, LLC	; 				Street	Addr	55421		:S					
PO BOX 354 City, State, Zip Code			<u> </u>			25.00	3 11/2/11/25	ERTY AVE							
SOUTH ORANGE, NJ 07079 Project Manager for Monitoring Firm			Telepho	ne No		HILL		E, NJ 0720	5	Licens	no No				
SARAH CALANDRA			201-34	19-2666		844-	462-	7465		0131					
Start Date (10) 09.16.19	09.23.1		npletion I	Date (11)				SHA Monitor E LIGHTHO	USE	SOLU	JTIO	NS,	LLC		
Occupancy Status During Abatement (Ch	eck Only On	e)				Street							12/-15		
Facility Closed/Vacated During Entir Abatement Performed Outside of No Other – Describe:	re Period of A ormal Facility	Abaten Hours	nent S				state,	Zip Code ORANGE,	N I O7	070					
Scope of Work (Check All That Apply)						- 000	,,,,,	OIVAINGE,	145 07	013		SHESW			
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf	Characterist .	enova emolit				×	M G	ull Containme lini-Enclosure ilovebag Proci on-Exempted	edure	_				a	
Location of	1000	Locati	3505000		Dog	scription	ATTACHES OF		(/ ====					ment	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mai	d Sole intena odial s (12)	nce/		tos Cont thermal surfac	aining N	/lateri s insu T, or		(S	nount pecify or LF)		Remova	Repair	Encapsulate	Enclosure
2005	Yes	No	N/A		00511	0.144	T	141		0.05				te	Ф
ROOF			X		OOFIN					0 SF	-	X			
ROOF			X		ROOF	FLAS	HIN	G	6	0 LF	-	X			
Name of Registered Waste Hauler NEWARK CARTING		H	IJDEP W lauler ID 4509		Cubic of Was			Name of F	valle e			T L/	NDI	FILL	TO THE STATE OF
City, State EAST ORANGE, NJ					Dispos	al Date		City, State		E, PA	8				
Completed by ALISON LAMERS	Title OFFI	CE N	IANAG	ER	S	ignature		MOK		1%	Date	9			

1h 10/05	1		ICATION	ate of Ne OF/ASB to NJAC	ESTOS A	BATE) <u>[</u>	C E		V	Pri	nt.E
Date of Notification (1) 08.29.19	152			f Building OF TRE				HOUSING	L S	EP-	-3	2019		
Agencies Notified Type Notification EPA Initial			Street A	ddress AST ST	ATE ST	REE	Г		ASBE	STOS	CON	ITRO G)L &	THE COL
X DEP Amended Amendment		_[ate, Zip Co TON, N		3						4 4 4 1000		
DOH Emergency justification) Cancellatior	-			f Contact ROACH					Telephoi 609-98					
			FACI	LITY INFO	ORMATIC	N								
Name of Facility Where Abatement is Takin	ig Place (3)					Тур	e of Facility (4)						
Street Address							H	School (K-12) Subchapter 8	(Other tha			•		
							×	Other (i.e. privetc.)	vate & con	nmercia	al buile	dings,	home	es,
City (5) TRENTON							Squ 185	are Feet 51	# of Floo 2	rs		ildg. A	lge	
County (6) MERCER			County (Code (7) USE ONLY)	_		ent Use (Prior IVATE RES			ed)			
Name of Monitoring Firm Hired by Building A SEINE LIGHTHOUSE SOLUTIC			ASCN	/ No.				atement Contr						
Street Address PO BOX 354						Street 1256		ess ERTY AVE						
City, State, Zip Code SOUTH ORANGE, NJ 07079								Zip Code E, NJ 07205						
Project Manager for Monitoring Firm SARAH CALANDRA			Telephor	ne No. 19-2666		Teleph	none i			ense No).			
Start Date (10) 09.23.19	Schedule	ed Con		Date (11)		Name	of OS	SHA Monitor	100000		NIC	11.0		
Occupancy Status During Abatement (Chec						Street		LIGHTHOU	JSE 301	LUTIC	JNO,	LLC		
Facility Closed/Vacated During Entire Abatement Performed Outside of Norm	Period of A	baten				PO E	BOX							
Other – Describe:					_	200		ORANGE, N	J 07079)				
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova emolit				×	M G	ull Containmen ini-Enclosure lovebag Proceon-Exempted (dure				e	
Location of	1000	Locati	2000 A									Abate	ement	t
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Mai	d Sole intenar odial S (12)	ly by nce/		tos Conta thermal s surfaci other mi	ystem ing, VA	Materia s insu T, or	lation,	Amour (Specif SF or L	ý	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A										ate	œ'
ROOF			X		795	OOF			600SI	-	X			
ROOF			X		ROOF I	FLAS	HING	3	6LF		X			
lame of Decision - J.W to 11-		1	UDED !	/	0.1.	/a1:		I No.	-1-4					
lame of Registered Waste Hauler IEWARK CARTING		Н	JDEP W lauler ID 4509		Cubic Y of Wast			Name of Re			NT L	ANDI	FILL	
City, State EAST ORANGE, NJ					Disposa	al Date	. 1	City, State PEN ARC	GYLE, P.	A				1111000
Completed by ALISON LAMERS	Title OFFI	CE N	IANAG	ER	Sig	gnature	ia	MON		Dat	te			

Ch 1967	N	IOTIF (F	ICATION	ate of Ne OF ASB to NJAC	ESTOS	ABATE	MENT		E	C [51	\mathbb{V}	E	
Date of Notification (1) 08.29.19	51		Name of	f Building OF TRE	Owner/C	perator , DEP	(2) T OF HOU	SING		SEP	- 3 2	019	The second second second	
Agencies Notified Type Notification			Street A	ddress	ATE S	TREE	Γ	Intel State					1	
X EPA X Initial Amended Amendment	⊬ 1	ŀ		te, Zip Co TON, N		ρ			ASD	ESTO: LICE	OON ENSIN	TRO	- 8	
Emergency (i justification)			Name of	f Contact	0000				Tele	phone N	lumber	DCXIVO-MINUS		VIII IN THE
DCA Cancellation				ROACH	ORMATI	ON			609	989-3	3518			
Name of Facility Where Abatement is Taking	Place (3))	1701	LIII IIVI	JI WILLIAM	OIL	Type of Fac	ility (4)						
Street Address				-	-		Subcha			r than K comme		ldings	, hom	es,
City (5) TRENTON		A					Square Fee 1892	t	# of 3	Floors	100	3ldg. 132	Age	
County (6) MERCER			County (Code (7) USE ONLY			Current Use PRIVATE				ished)			
Name of Monitoring Firm Hired by Building C A SEINE LIGHTHOUSE SOLUTION			ASCN	1 No.			of Abatemen					. 022		
Street Address PO BOX 354							Address LIBERTY	AVE						
City, State, Zip Code SOUTH ORANGE, NJ 07079							tate, Zip Cod SIDE, NJ (
Project Manager for Monitoring Firm SARAH CALANDRA			Telephor 201-34	ne No. 19-2666		1,000,000,000	none No. 462-7465			License 01316				
	Scheduled 10.07.1		mpletion [Date (11)			of OSHA Mor EINE LIGH		JSE :	SOLUT	TIONS	, LL(
Occupancy Status During Abatement (Check	11772			F5(15)			Address BOX 354							
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norma Other – Describe:						City, S	tate, Zip Cod		.1 07	n79	111 99 1			
Scope of Work (Check All That Apply)						-	111 010 111	OL, 14	0 01		- 5×11			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova				×	Glovebag	osure Proced	lure				re	
		_ocat							7			Abat	emen ype	t
Location of Asbestos-Containing Material (ACM)	Used		ly by	Asbest		scription	of laterial (ACM		An	nount	-	Γ,	T	
TO BE ABATED In Facility (13)	Custo	ntena odial ((12)	**************************************		thermal surfac		s insulation, T, or		(Sp	ecify or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A								=		ate	e
ROOF			X	R	OOFIN	G MA	TERIAL		120	0 SF	Х			
HALL/BEDROOM			X	INT	ERIOR	DOO	R CAULK		10	0 LF	X			
HALLWAY/LIVING RM			Х	FLO	OOR T	ILE &	MASTIC		400) SF	X			
Name of Registered Waste Hauler NEWARK CARTING		H	JDEP Walauler ID 4509		Cubic of Was	ste	WA	STE N		ed Land		AND	FILL	
City, State EAST ORANGE, NJ					Dispos	al Date		State I ARG	YLE	, PA				
Completed by ALISON LAMERS	Title OFFIC	E N	IANAGI	ER	S	ignature	anu	M		1	Date			

Ir	VIL	10	1	+		State of N	lew Jer	sev				= []	חח	
hi	168			NO (Pu	TIFIC.	ATION OF AS	BEST	OS ABATE	MENT 5-2.12)	D)_[_	G		\mathbb{V}	
	otification (1):					wner/Operator (2)					SEP	- 3	2019	ati bushi
08/26/2019 Agencies	Type Notification	on		ark Put	olic Scho	100			-	1				
Notified	☑ Initial				100	Avenue Room 209)		-	ACR	ESTO	2 000	JTRO	1.8
□ EPA	☐ Amended				Zip Cod	e:				nos.		ENSIN		
□ DEP	Amendment#: ☐Emergency	H		ark, NJ e of Co				Tal	lephone Nu	mhar	and a pro-			
□ DOH	(including justification)				in Olaga	deyo			3-733-7200	moer.				
□ DCA	- Cancenation					FACILITY IN	FORM	ATION						
Name of Fa	acility: Fourtee	n Aver	nue El	ementa	ry Schoo	ol	Тур	e of Facility (4):						
186 14 th A								chool (K-12)						
					_	18	□ St	ibchapter 8 (Other						
City/ (5) Newark		County Essex	(6):		07103	ty Code (7):		ther (i.e., private &	& commercia	l buildings, h	iomes, e	etc.)		
Newark	1	ESSEX			0/103		Squ	are Feet:		# of Floo	ors:			
							Bld	g. Age						
							Cur	rent Use: Schoo						
	Ionitoring Firm			uilding	Owner:	ASCM No.:	Nar	ne of Abatement	t Contracto	r (9):				
THENVI	RONMENTAL	L, INC.				0003	Ap	ex Developme	nt, Inc.					
Street Addi							Stre	et Address:						
1253 Nort	th Church Stre	eet												
O': O: .	7: 0 1							8 Broadway						
City, State,	Zip Code:							, State, Zip Cod						
	wn, NJ 08057							wark, NJ 0710						
Project Ma James A.	nager for Moni Guilardi	toring	Firm:			Telephone No.: 609-314-1683		ephone No.: 3) 350-0101	1	cense No.:				
Start Date (8/26/19	(10):		hedul 27/19		pletion	Date (11):	Nan	ne of OSHA Mo	nitor:	210				
Occupancy S	Status During Aba	1/			one)		Stre	et Address:						
	osed/vacated Dur t Performed Outs					t	City	West 36th Street, State, Zip Cod	e:	3				
□ Other							Nev	York, New Yo	ork, 10018					
Describe:	rk (Check all tha	t apply)												
□ ≥ 3 sf or : □ ≥ 160 sf o	> 3 If	к арріу)	(*)		□-Renor □ Demo				Mini-Enclosed Glovebag	inment with osure Procedure ted (*) and l				
				Locati			20-21-0-14-0-220				T	Aba	temer	
	ocation of		N	Jormal	ly	A shestos Con	escript	on of Material (AC	M)			Т	ype	
	ontaining Mate (ACM)	erial		d Sole		(i.e., therm	al syste	Material (AC		7 2 01 20	72		臣	団
	E ABATED			ustodi	al/			VAT, or laneous)	1	Amount	Removal	Repair	Encapsulat	Enclosure
IN	V Facility			Staff?		omer	misce	ianeous)	10	(Specify (F or LF)	340	Dair	usc	ınsc
	(13)	-	Yes	No No	N/A					n or Erj	=		at	e.
CLOSET	201			X		FLOOR TILES	S			132 SF	*			*
CLOSET	204			X		FLOOR TILES	S			132 SF	*			*
CLOSET	205			X		FLOOR TILES	S			132 SF	*			*
CLOSET	105			X		FLOOR TILES	S			132 SF	*			*
	egistered Waste RNE TRUCKI		r:		NJDE 19551	P Waste Hauler ID	No.:	Cubic Yards of Waste: 30		me of Regi				SSOC,
City, State: Bronx, NY	10474			Dispo	sal Date	:	·	City, State: Waynesburg,		·-				
Completed	The second secon				Title:		Signa		O11 TTU00	Date:		200		
Chinyelu O						resident	6	Luc C		08/26/20	19			
					1									

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT & COMPANY N

Ch 3053	(Pursu	ant t	o N.J.A.	<u>C.</u> 8:6	o and	12:120)), 5	<u> </u>	W L	7 7		
Date of Notification (1)	T	Name	of Building	Owner /	Operator	(2)					111	
8/29/2019		Town	ship of To			`	L SI	EP -3 1	2019		and I	
Agencies Notified Type Notification	200		Address							The special of	1	
	-		Lakewood				ASBE	STOS CON	TROL	ee.		
☐ DEP ☐ Initial ☐ Amende			tate & Zip (River, NJ				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
□ DOH □ Emerge			of Contact	00755		44000000		T	alanho	no N	umh	or
DCA Cancell			e Mackle						32-67			21
		FΔC	ILITY INF	OPMA	TION					ann Hivin		
Name of Facility Where Abatement	is Taking Place (3		ZIEIT I IIII		of Facilit	tv (4)						
House					School (K							
Street Address						ter 8 (Other						
											tc.)	
City (5)	1 (0)			Squa	are Feet		Floors		dg. Age			
		unty C	ode (7)		2,260		+basen			119		
Toms River 0	cean					Prior if being	g demolis	shed)				
Name of Monitoring Firm Hired by E	Puilding Owner (9)		ASCM No.	-	idential							
Health & Safety Services	building Owner (6)		ASCIVI NO.	10 10 000000000000000000000000000000000		ement Cont						
Street Address		-			et Addres		ii Giou	p, LLG.		_	1100	
P.O. Box 365				100000000000000000000000000000000000000		on Avenu	e. Suite	202				
City, State & Zip Code					State & Z							
Berlin, NJ 08009					iton, NJ							
Project Manager for Monitoring Firm Jim Proctor			Number		ohone Nu			License Nu		-		
	heduled Completio	839-2			914-427	A Monitor			0118	5		-
9/16/2019	9/30/2	2019	J (11)			mental La	aborato	ries, Inc.				
Occupancy Status During Abateme	nt (Check only one	e)			t Address	-						
Facility Closed/Vacated Dur				-		22 West						
Abatement Performed: Duri Describe: 8am to 5pm	ng regular operatir	ng nou	rs –	City, State & Zip Code								
Facility Occupied During Ab	atement			Union, NJ 07083								
Scope of Work (Check all that apply												
						⊠ Full C	Containme	ent with Ne	gative	Pres	sure	
≥3 sf or ≥3 lf	\boxtimes		ovation				Enclosure					
≥160 sf ≥260 lf		Dem	olition									
Location of	lai	Locatio		D-								
Asbestos-Containing		Locationally U			escription stos-Cont		- 10		Aba	item	ent T	ype
Material (ACM)		olely b			terial (AC						m	_
TO BE ABATED	W. C.	tenanc	The state of the s		nermaÌ sy				Rer	Re	nca	Encl
in Facility	Custo	odial S	taff?		n, surfaci				Remova	Repair	Encapsulate	Enclosure
(13)	Yes	(12) No	N/A	or other	r miscella	ineous)			<u>m</u>	•	ate	Ге
Basement				Flue	Joint P	aste		2 SF				
Basement		H	X		Pipe Rur					님	H	H
Basement		T			pe Join		-			Ħ	H	H
1st Floor Kitchen & Closet, Fro	ont Bed, &		\boxtimes		inoleun					Ī		
Side Bed Hall												
Name of Registered Waste Hauler		INUE	DEP Waste	Cubic Y	/ords	Name of D	ngiatarad	Landfil		Ш		Ш
Name of Registered Waste Hauler		2555	iler ID No.	of Wast		Name of R	egisterea	Landilli				
Resource Management Group	, LLC	100000000000000000000000000000000000000	5218	TBD		Grows La	ndfill					
City, State				Disposa	al Date	City, State	-					
Trenton, NJ 08619		- I		TBD	7 / 1	Morrisvill	e, PA		-			
Completed By (Print or Type)		Title	sident	Signatu	re /	1/1	A		Date	100	40	
Mr. Brian Haney		FIE	SIUCIIL	1	TIM	/W//a	111	nent with Negare rocedures ed and Non-Fri Amount (Specify SF or LF) 2 SF 5LF 12 CT 573 SF	8/29	120	19	

nh 309	うう。	(Pu	rsua				3ES (05 AB Q. 8:60 and	1 Kindle) ECE	ILVE	
Date of Notification	(1) 8/29/2019	VI414	LIN				Owner - Operato	r (2)	CEP .	- 3 2019	
Agencies Notified EPA	Type Notific	ation	5	Street	Addres	ss	ms River		DEF DEF	3 2013	
□ DEP □ DOL	Initia		C	City, S	State &	Zip C			ASBESTOS LICE	CONTROL &	vanities in
□ DOH □ DCA		rgency cellation	100		of Con se Mad					Telephone Nun 732-676-4000	
				FAG	CILITY	INF	ORMATION				
Name of Facility Wh Center Coop Street Address	nere Abateme	ent is Taking Pla	ce (3))			Type of Facili		an K 12)		
1940 Lakewood F	Road								nmercial build	ings, homes, etc.)
City (5)		County (6)	Cou	unty (Code (7)	3000	<i>" 01 1 10</i>	1	64	
Toms River		Ocean					Current Use (Residential	Prior if being d	lemolished)		
Name of Monitoring Health & Safety S		y Building Owne	er (8)		ASCN	И No.		tement Contract			
Street Address							Street Addres	SS			
P.O. Box 365 City, State & Zip Co	do			-			City, State &	ton Avenue,	Suite 202		
Berlin, NJ 08009	servo	·· I-	Talas		Month		Trenton, N.	J 08619	Tr.		
Project Manager for Jim Proctor			856-8	39-2		er 	Telephone No 609-914-427	79	License	Number 01185	
Scheduled Start Dat 9/16/201	200000000000000000000000000000000000000	Scheduled Comp 9	pletio /30/2		e (11)		Name of OSI- J&S Enviro	lA Monitor nmental Lab	oratories, Ir	ıc.	
Occupancy Status D		ment (Check only During Entire Pe			atement		Street Addres 2333 Route				
	Performed: D	uring regular op	eratin	g hou	urs		City, State & Union, NJ 0	Zip Code		- <u>- , </u>	
Facility Occ	upied During	Abatement					Official, NO	11003			
Scope of Work (Che	eck all that ap	pply)						☐ Full Cor	ntainment with	Negative Pressu	ıre
≥3 sf or ≥3 lf	f		\boxtimes	Ren	ovation	1		Mini-En			
≥160 sf ≥260	0 If			Den	nolition				Bag Procedure empted and N	s on-Friable Proce	dure
Lo	ocation of		ls L	ocati	ion		Description		Amount		
	tos-Containin	g	Norm				Asbestos-Con		(Specify		
	erial (ACM) BE ABATED		اد Maint	olely benan			Material (At (i.e., thermal sy		SF or LF) R R	Enclosure Encapsulate
	n Facility		Custo		Staff?	i	insulation, surfac	ing, VAT		Repair	Enclosure
	(13)	,	Yes	(12) No	N/A		or other miscella	aneous)			ire
Exterior Walls							Transito		650 SF		
Egg Shop to Coo	р					F	Roof Flashing	Sealant	11 LF		
			H	H	H						
			H	H	HH						414
			Ħ	Ħ	H						##
Name of Registered	l Waste Haul	er		1000000	DEP W		Cubic Yards of Waste	Name of Reg	istered Landfil	1	
Resource Manag	ement Gro	up, LLC			35218		TBD	Grows Lan	dfill		
City, State	0						Disposal Date	City, State	DA		
Trenton, NJ 0861 Completed By (Print		CH - 1911 - 19 - 19 - 19 - 19 - 19 - 19 -		Titl	0		TBD	Morrisville,	PA	Deta	
Mr. Brian Hand	CT1.07			1	e esiden	ıt	Signature DM N	a Mar	111	Date 8/29/2019	9

Thys 43 Classification (1)	NOTIFIC (Purs	ATIO	N OF to N.	ASE J.A.C	BESTOS AE 8:60 and	12:1	MENT 20)) E G		<u></u>	The same and a second			
8/29/2019					ms River	or (2)	14	L ULI	0 2	010	1			
Agencies Notified Type Notification			t Addre		IIIS River									
⊠ EPA			Lakev		Poad			ASBEST	OS CON	TRO	_&_			
☐ DEP ☐ Initial			State &		September 1				CENSIN	3	og president.	OWN ACCOUNTS		
☑ DOL ☐ Amended			s Rive											
		-	e of Cor		00100				Telepho	ne N	umh	er		
☑ DOH ☐ Emergency ☐ DCA ☐ Cancellation		Pear	se Ma	ckle					732-67					
		FA	OII IT	/ IDIT						- 19				
Name of Facility Where Abatement is Ta	king Place		CILITY	INF	DRMATION	C4 . (4)								
Long	iking Place	(3)			Type of Facil School (
Street Address				-	_		Other than k	(10)						
otroct, iddiooo					Other (i.				ac hom	20 0	to 1			
					Square Feet		# of Floors		Bldg. Ag		iC.)			
City (5) County	(6)	County	Code (7	7)	4000		# 01 110015		Diag. Agi					
Toms River Ocea		odunty	oode (7	,	Current Use		f baina dam	الممان		64				
Toms Kiver					Residentia		being demi	olisnea)						
Name of Monitoring Firm Hired by Buildi	na Owner ('01	IASCI	M No.			Cambrastan	(0)						
Health & Safety Services	ilg Owner (0)	ASCI	VI INO.	Name of Aba Resource I									
Street Address					Street Addre		ement Gr	oup, LLG.						
P.O. Box 365					2115 Hamil		venue Sui	te 202						
City, State & Zip Code					City, State &			10 202						
Berlin, NJ 08009					Trenton, N.									
Project Manager for Monitoring Firm	Tel	lephone	Numbe	er	Telephone N			License I	Number					
Jim Proctor	85	6-839-	2432		609-914-42				0118	5				
	led Comple	etion Da	te (11)		Name of OSI	HA Mor	nitor							
9/16/2019		0/2019			J&S Enviro	nmen	tal Labora	tories, Ind	.					
Occupancy Status During Abatement (C	ntire Perio	d of Aba		t	Street Address 2333 Route City, State & Union, NJ (Zip Co				V				
Facility Occupied During Abatem	ent													
Scope of Work (Check all that apply)					•	60-100								
	0.22	_					Full Contain	ment with I	Vegative	Pres	sure			
≥3 sf or ≥3 lf	\boxtimes		novation	1			Mini-Enclos					1		
≥160 sf ≥260 lf	<u>L</u>] Der	molition				Glove Bag							
1							Non-Exemp							
Location of Asbestos-Containing		ls Locat ormally			Description			Amount	Aba	teme	ent T	ype		
Material (ACM)	INC	Solely			Asbestos-Con Material (A			(Specify SF or LF)			ш			
TO BE ABATED	Ma	intenan			(i.e., thermal s		:	Of Or Lif	Re	Z	nca	E		
in Facility	Cu	stodial 3	Staff?	ir	sulation, surfac				Remova	Repair	sde	Enclosure		
(13)		(12)			or other miscell	laneous	s)		<u>a</u>	=	Encapsulate	ure		
	Ye	s No	N/A								Œ			
Center of Coop				R	oof Flashing	Seala	nt	24 LF	\boxtimes					
			Ш											
Name of Registered Waste Hauler			DEP W		Cubic Yards	Name	e of Register	ed Landfill						
Resource Management Group III	_		uler ID		of Waste	C	un I amaleur							
Resource Management Group, LL	<u> </u>	00	35218		TBD		vs Landfill							
City, State Trenton, NJ 08619					Disposal Date	City,								
		l-mi-			TBD	INIOLL	isville, PA							
Completed By (Print or Type) Mr. Brian Haney		Tit Pr	le 'eside n		Signaturé Date 8/29/2019									

Thy4|44 063063 Date of Notification (1) 8/29/201

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT F C F V F F

(LOUN >	(P	ursua	pt t	ON	J.A.	<u>C.</u> 8:60 and	12:12			<u> </u>		A CONTRACTOR OF THE PARTY OF TH	
Date of Notification (1)						Owner / Operator	r (2)		SEP - 3	2019	1000	U	
8/29/20						ms River	25527	L L L	ULI J	LUID	-	eumenc ²	
Agencies Notified	tification	10000		Addre	100000000000000000000000000000000000000	Road			ez eronokezabetzak zitektoregia diri	Market State S	Lumum		-
The second secon	nitial				Zip C			- ASE	BESTOS CO LICENS		L&		1
	mended					08755		indiano managemento con	LROCHO	nietwonen HAZ	CONTRACTO	rugue de la composition della	12
	mergency			of Co		00.00			T	elepho	ne N	umbe	er
	ancellation	P	ears	se Ma	ckle				1.00	32-670			
			FAC	CILIT	Y INF	ORMATION							
Name of Facility Where Abate Bungalow	ement is Taking Pl	lace (3)				Type of Facili School (F							
Street Address								her than K-1	12)				
	1							& commerc		s, home	es, e	tc.)	
	-					Square Feet		of Floors		dg. Age			
City (5)	County (6)	Cou	nty C	ode (7)	800		1			64		
Toms River	Ocean					Current Use (eing demoli	shed)				
						Residential							
Name of Monitoring Firm Hire		ner (8)		ASC	M No.								
Health & Safety Services						Resource N		ment Grou	ıp, LLC.				
Street Address P.O. Box 365						Street Addres			000				
City, State & Zip Code						2115 Hamilt City, State & 2			202				
Berlin, NJ 08009						Trenton, NJ							
Project Manager for Monitorin	ng Firm	Teleph			er	Telephone Nu	umber		License No		_		
Jim Proctor Scheduled Start Date (10)	Cabadulad Car	856-8				609-914-427				0118	5		
9/16/2019	Scheduled Cor	9/30/20		e (11)		Name of OSH J&S Environ			ories. Inc.				
Occupancy Status During Ab						Street Addres							
					nt	2333 Route	22 Wes	st					
Abatement Performed		perating	g hou	ırs		City, State & 2	100	9					
Describe: 8am to						Union, NJ 0	7083						
Facility Occupied Dur Scope of Work (Check all tha													
Scope of Work (Check all tha	t appiy)						⊠ F	ull Containm	ent with Ne	native	Pres	SUITE	
≥3 sf or ≥3 lf		\square	Ren	ovatio	n		-	lini-Enclosur		galivo	1 100	Juic	
≥160 sf ≥260 lf		Ħ	Dem	olition	1		∏ G	love Bag Pr	ocedures				
							-	on-Exempte		Friable	Pro	cedur	re
Location of			ocati			Description			Amount	Aba	teme	ent Ty	уре
Asbestos-Conta		Norma				Asbestos-Cont			(Specify				
Material (ACI) TO BE ABATE		Mainte	lely b			Material (AC (i.e., thermal sy		3	SF or LF)	R	70	nc	ᄪ
in Facility		Custoo				insulation, surfac		-		Remova	Repair	apsi	Enclosure
(13)			(12)			or other miscella	aneous)			Va	=	Encapsulate	ure
late all a Well - 9 O - III		Yes	No	N/A									
Interior Walls & Ceilings	Doon Addition	H	뮈			Drywall			950 SF			H	H
Between Bungalow and Rear Addition	Rear Addition	H	H	\boxtimes		Roof Flashing			12 LF		H	H	H
iteal Addition		H	H	H		Roofing			785 SF		Η	H	H
		H	H	H						H	H	H	H
		H	Ħ	H						ᅢᆔ	Ħ	H	Ħ
Name of Registered Waste H	auler		NJI	DEP V	Vaste	Cubic Yards	Name o	of Registere	d Landfill				
Descurs Management	S 110		11000000	uler ID		of Waste	_	1					
Resource Management (roup, LLC		003	35218	5	TBD		Landfill					
City, State Trenton, NJ 08619						Disposal Date TBD	City, St Morris	ate ville, PA					
Completed By (Print or Type)			Title	е		Signature Date							
Mr. Brian Haney			100 May 201	side	nt						19		
						12111	111	11 1141	845-446				

		C. 8:60 and 12:120)	TECEIVEIN
Date of Notification (1)	Name of Building	Owner / Operator (2)	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
8/29/2019	Township of To		SEP - 3 2019 11
Agencies Notified Type Notification	Street Address 1940 Lakewood	d Dood	
☐ DEP ☐ Initial	City, State & Zip		ASBESTOS CONTROL &
□ Amended	Toms River, N.		LICENSING
☑ DOH ☐ Emergency ☐ DCA ☐ Cancellation	Name of Contact		Telephone Number
	Pearse Mackle		732-676-4000
Name of Facility Where Abatement is Taking	FACILITY INF	Type of Facility (4)	
Riverwood Front Coop	, 1 1000 (0)	School (K-12)	
Street Address		Subchapter 8 (Other	
1940 Lakewood Road			ommercial buildings, homes, etc.)
City (5) County (6)	County Code (7)	Square Feet # of F	loors Bldg. Age 72
Toms River Ocean	oranty sous (/)	Current Use (Prior if being	
		Residential	
Name of Monitoring Firm Hired by Building C	Owner (8) ASCM No		
Health & Safety Services Street Address		Resource Managemer Street Address	it Group, LLC.
P.O. Box 365		2115 Hamilton Avenue	e. Suite 202
City, State & Zip Code		City, State & Zip Code	,
Berlin, NJ 08009 Project Manager for Monitoring Firm	T-I N	Trenton, NJ 08619	To a second seco
Jim Proctor	Telephone Number 856-839-2432	Telephone Number 609-914-4279	License Number 01185
Scheduled Start Date (10) Scheduled (10) Scheduled (10)	Completion Date (11)	Name of OSHA Monitor	
Occupancy Status During Abatement (Check	9/30/2019	J&S Environmental La Street Address	boratories, Inc.
Facility Closed/Vacated During Entire	e Period of Abatement	2333 Route 22 West	
Abatement Performed: During regula	ar operating hours	City, State & Zip Code	
Describe: 8am to 5pm Facility Occupied During Abatement		Union, NJ 07083	
Scope of Work (Check all that apply)			
			ontainment with Negative Pressure
≥3 sf or ≥3 lf ≥160 sf ≥260 lf	Renovation Demolition		inclosure
2 100 SI 2200 II	Demolition		Bag Procedures exempted and Non-Friable Procedure
Location of	Is Location	Description of	Amount Abatement Type
Asbestos-Containing	Normally Used	Asbestos-Containing	(Specify
Material (ACM) TO BE ABATED	Solely by Maintenance or	Material (ACM) (i.e., thermal systems	SF or LF)
in Facility		insulation, surfacing, VAT	Enclosure incapsulat Repair Removal
(13)	Yes No N/A	or other miscellaneous)	Enclosure Encapsulate Repair Removal
Barn Floor	Tes No N/A	Floor Tile	240 SF 🛛 🗆 🗆
Roof		Roof Flashing Sealant	240 SF
Exterior Walls		Transite	325 SF 🛛 🗎 🗎
Name of Registered Waste Hauler	NJDEP Waste	Cubic Yards Name of Re	gistered Landfill
M.S.	Hauler ID No.	of Waste	gistered Landilli
Resource Management Group, LLC	0035218	TBD Grows La	ndfill
City, State Trenton, NJ 08619		Disposal Date City, State	DA
Completed By (Print or Type)	Title	TBD Morrisville	
Mr. Brian Haney	President	Signature /	Date 8/29/2019
		LIMM MI	1/1/1

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT

(K-0()))	(Pursua	int to N.	J.A.C	8:60 and	12:12	20)门)	<u> </u>	VE,		
Date of Notification (1)	LIN	ame of Buil	ding O	wner / Operator	r (2)	100				
8/29/2019	" "T	ownship o	of Ton	ns River			SEP - 3	2019		
Agencies Notified Type Notification	The second secon	treet Addres		Danel		host bank	, , , ,		because	
☐ DEP ☐ Initial		940 Lakev ity, State &		The state of the s		1000		A COLOR	-	
□ DOL □ Amended		oms Rive				ASBI	ESTOS COI LICENSIN			
□ DOH □ Emergency		ame of Con				L		elephone	Numb	er
☐ DCA ☐ Cancellation	ı P	earse Mad	ckle					32-676-4		
		FACILITY	INFO	RMATION					· · · · · · · · · · · · · · · · · · ·	
Name of Facility Where Abatement is T	aking Place (3)		1141 0	Type of Facili	ty (4)					
Riverwood Rear Coop				School (F		196				
Street Address						Other than K-1				
1940 Lakewood Road						te & commerc			etc.)	
City (5)	(0)	-1 0 1 (7	•	Square Feet		# of Floors	BI	dg. Age		
City (5) Count Toms River Ocea		nty Code (7)	5000	D-1 16	1	-11	72		
Toms River Ocea	an l			Current Use (Residential		being demoiis	snea)			
Name of Monitoring Firm Hired by Build	ing Owner (8)	IASCA	VI No.	Name of Abat		Contractor (9)			
Health & Safety Services	ing Owner (6)	1,001	vi ivo.	Resource M						
Street Address				Street Addres			p,			
P.O. Box 365				2115 Hamilt	ton Av	enue, Suite	202			
City, State & Zip Code				City, State & 2						
Berlin, NJ 08009	T-16	N		Trenton, NJ		9				
Project Manager for Monitoring Firm Jim Proctor		one Numbe 39-2432	er	Telephone Nu 609-914-427			License Nu	umber 01185		- 1
	uled Completion	NAME AND ADDRESS OF THE OWNER, WHEN PERSON WAS ADDRESS OF THE PERSON WHEN PERSON WAS ADDRESS OF THE PERSON WAS ADDRESS OF		Name of OSH		itor		01100		
9/16/2019	9/30/20			J&S Environ			ries, Inc.			
Occupancy Status During Abatement (C				Street Addres	ss					
Facility Closed/Vacated During			t	2333 Route						
Abatement Performed: During re	egular operating	g hours		City, State & Z		de				
Describe: 8am to 5pm Facility Occupied During Abater	mont			Union, NJ 0	7083					
Scope of Work (Check all that apply)	Herit									
coope of vierk (official all that apply)					П	Full Containm	ent with Ne	egative Pre	essure	
≥3 sf or ≥3 lf	\boxtimes	Renovation	1			Mini-Enclosur		•		
≥160 sf ≥260 lf		Demolition				Glove Bag Pr				
						Non-Exempte				
Location of Asbestos-Containing		ocation ally Used		Description Asbestos-Cont		1	Amount	Abater	nent T	ype
Material (ACM)		lely by		Material (AC			(Specify SF or LF)		Е	_
TO BE ABATED		enance or		(i.e., thermal sy	stems	7	,	Re	nca	Enc
in Facility		dial Staff?		sulation, surfac				Remova	Encapsulate	Enclosure
(13)		(12) No N/A	0	or other miscella	aneous)		<u>a</u> -	late	re
Exterior Wall	les			Transite			100.05			
Exterior wall		 		Transite	9		120 SF			H
		러님						러뉘는	HH	H
		HH						十十十一	H	H
									ПП	T
Name of Registered Waste Hauler		NJDEP W		Cubic Yards	Name	of Registered	d Landfill			
Parauras Manaurant Consul II	•	Hauler ID	Dec. 100 to 100	f Waste	_					
Resource Management Group, LL	.0	0035218		BD		s Landfill				
City, State Trenton, NJ 08619				isposal Date	City, S	State isville, PA				
Completed By (Print or Type)		Title		/ / /	INIOIL	Sville, PA		Dots		
Mr. Brian Haney		Presiden		Signature	Λ	01.1.		Date 8/29/20	010	
				INIM	1 //	1119		012312	010	

	Affication of Asbes				(to NJAC 8:60-7 and 12:120	E G SEP	<u>-3</u>	V E 2019					
Date of Notification 0 8 2 9] [1] 9	Macy's	of Building	Owne	er/Operator			TITO OI O					
Agencies Notified Type of USEPA X DEP X DCA/DOL	of Notification Initial Notification Amended	7 Wes	Address st Seventh S State, Zip Co			ASRESTO	DENSI		despainmenthy - se				
X DOH X	Cancellation Emergency		of Contact	202	***************************************	T-lb Nob							
		Ralph	Coppola			Telephone Number 973-265-9763							
			ITY INFORM	ATIC									
Name of Facility Where Abate	ment is Taking Plac	e			Type of Facility								
				1	() School (K-12)								
Bloomingdales Shops at River	side			1	() Sub-Chapter 8 (Other to								
Street Address					(X) Other (I.e. private & Co	ommercial							
200 Harlanda I. N. I. 07004				05	buildings, homes, etc.)	I# F1	IA	as of Dida					
390 Hackensack, NJ 07601	County	County	ada	SFC	of Bldg.	# Floor	I ^A	ge of Bldg. 50+					
City		County C State use		Curr	1 MILLION +SF ent Use (prior if being demoli	shed)		30+					
EDISON, NJ	UNION	otate use	Citiy	Cun	ent use (prior it being demoir	siled)							
Name of Monitoring Firm Hired		53	ASCM No.	Nam	Name of Abatment Contractor								
PENNONI ASSOICATES				ACN	CONSULTING CORP.								
Street Address				Stre	et Address								
24 COMMERCE ROAD				2150	STANLEY TERRACE								
City, State, Zip Code				City,	State, Zip Code								
Spanish property and a second spanish and a second													
NEWARK, NJ 07102					ON, NJ 07083								
Project Manager for Monitoring	g Firm T	elephone	No.	Tele	phone Number	License Number							
TO DE DETERMINED	TO DE	DETER	MINIED	000	607 4000	00575							
TO BE DETERMINED Scheduled Start Date				908-687-1008 00575									
Scrieduled Start Date	Scheduled Comple	cuon Date	5	Name of OSHA Monitor									
8 29 2019	9 6	2019		EMS	SL ANALYTICAL								
	Month Day	Year			et Address								
Occupancy Status During Aba				100									
Facility Closed/Vacated			ement	307	WEST 38TH STREET								
X Abatement Outside Norr				City,	State, Zip Code								
X Describe: 9:30PM TO 7													
Other - Describe:				NEV	V YORK, NY 10118								
C			Abataa										
Scope of Work (Checl Only Or Demolition	ie)		Abatement		od Containment with Negative P	receire							
>3sf or >3lf					Containment with Negative P -Enclosure	icasuic							
X ≥ 160sf or ≥ 260lf					ebag Procedure								
Renovation			Х		-Friable Procedure								
		Is Location	on Normally		Describtion of	Amount to be	Abatem	nent Type					
Location of ACM Facility			Custodial St	aff	ACM to be	Removed							
		Yes	NO	N/A	Removed			Rep. Enc.	Encl.				
Inside Freight Elevator						70SF	X						
								CII					
Name of Registered Waste Ha		NJDE	P Waste ID	No.	Cubic Yds waste	Name of Registered							
TRI-STATE TRANSFER ASSO	DC., INC.		SW1896		TBD	MINERVA ENTERF	KISES	S, INC					
City, State			sal Date		City, State of Registered La	nami							
BRONX, NY		TBD			WAYNESBURG, OHIO Signature	,	In	ate					
Completed By (Print or Type)					Signature /	~			010				
Denis Ramirez		Projec	t Manager	er 8/29/2019									

Check#3419	ALK	POTI	FICA (Pu	TION	of No.	BESTO	SABA	TE (6)	MENT	DEC) <u>E</u>] [7 [
Date of Notification (1)				Name	of Building	Owner/C	Operator	(2)		1111	D - 2	20	10	100	
08	29 /	19								IN The SE	r - J	20	IJ	L	
Agencies Notified	Type Notification	on			i Seminsl Address	KI		-			upna ukoko ko lubida M	enantrio	NA CONTRACTOR		
	Initial			011001	7.00.000								JOE	&	
The state of the s	☐ Amended	0.50		City. S	State, Zip C	Code				-	LICENS	ING			
DHSS	Amendmen			1,00	City, NJ										
DCA (NJAC 5:23-8)	Emergency justification				of Contac				•	Telephone Nur	mber			-	
,	Cancellation	n		Andre	i Seminsl	ci									
					CILITY IN		TION				-	-	100		
Name of Facility Where At	patement is Tal	king Place	(3)					T	ype of Facility	(4)					
Private house			0.700.40	82				1	School (K-12						
Street Address								- [Other than K-1		Idina			
								1	homes, etc.)		erciai bu	iuing.	5,		
City (5)								15	Square Feet	# of Floors	Blo	lg. Ag	je		
Union City, NJ 07087															
County (6)				Count	y Code (7)	(STATE US	SE ONLY)	(Current Use (Pr	ior if being demol	lished)				
Hudson															
Name of Monitoring Firm H	Hired by Buildin	ng Owner (8)	ASCM	No.	Name o	f Abatem	nen	t Contractor (9)						
					Gr Tecl										
Street Address					Street A										
City, State, Zip Code							lley Rd								
City, State, Zip Code						1	ate, Zip (
Project Manager for Monite	oring Firm		Tele	phone	No	Telepho	NJ 074	1/0		License No		-		-	
The spect manager for morning						973-63				01127	License No.				
Start Date (10)		heduled C					of OSHA vision C		nitor sultants,Inc						
Occupancy Status During				57		Street A	Address								
					ariba				load, Bldg .#	35E					
Time of Abatement:	AM-	_PM/		s - Des			ate, Zip (
Scope of Work (Check all						Fair La	wn, NJ			otion with pogoti	VO DECCE	uro			
	іпат арріу)					H				gative Pressure	ve press	uie		1	
>3 sf or >3 lf > 160 sf or >260 lf		☐ Re	novati			Ø	Mini-En	clo	sure	Tent with Negativ	ve Press	ure			
₩ 2 100 St 01 2200 II		N De	monuc	111			Non-Ex	ag em	pted (*) and No	n-Friable Proced	lure	uic			
		1000	Locat								Ab	atem	ent Ty	уре	
Location of		14 1 manage 25	Norma ed Sole				scription				R	IJ	ш	m	
Asbestos-Containing M TO BE ABAT		Ma	intena	nce/		stos Cont e., therma			rial (ACM) sulation,	(Specify	emo	epa	ıcap	clos	
IN Facility	Y	Cus	todial (12)	Staff?			cing, VA			SIF or LF)	oval	=	sula	sure	
(13)		Van		NUO	1	other t	niscellan	eou	18)				ite		
Basement		Yes	No	N/A	Pipe ins	ulation		7,745,7		120 LF	×	П	П		
Basement				×	Ceiling					450 SF		П	П	П	
Dascillett			-	-	Cennig	ilics				430 31					
								25.00			ᆜᆜ	1	Ц		
			Щ		1. 1. 10.11	1 2						Ш		Щ	
Name of Registered Wast	e Hauler				Hauler ID No			ste	Name of Regis	stered Landfill					
Gr Tech LLC			(003378	35	TB			T.R.R.F. Inc						
City, State						Disposa			City, State						
Wayne, NJ 07470						TB		/	Tullytown, P.						
Completed By (Print or Type) Title						Sig	gnature	4	Ic Wena	Date					
N.Jevtic					//	100	uic Wena	or 0	rithan K-1 2) and commercial buildings. Floors Bldg. Age sing demolished) ense No. 27 with negative pressure Pressure sith Negative Pressure sith Negative Pressure sith Procedure Abatement Type Amount Specify (F or LF) F						

				There's	Aug.	ATTAL STOP	Security.			process and the same of the sa	-	Andrews constitution in the second	-	n D	1	Prin	thor
ZY	17551		NO	(Pur	ATION C	e of New Je DF ASBEST NJAC 8:60	OS ABA and 12	:120)		B		GE	. 2	<u>W</u>	9		
	e of Notification (1)	111117	20			Building Own aletsky P				JUL	1	SEP -	J	.01	0	Suction	
	29/19	VICTIC	<i>7</i> 1		treet Add		iivate i	rioini					on Huterania	Magna City	matakasas	-	$-\parallel$
Age		ype Notification		3	lieel Au	uress					ASI	BESTOS LIGE	CON	ITP G	OL	4	ll.
×	EPA [2			C	in State	e, Zip Code			-	Impopulation	essectivists	LIUE	NOUS	UI .			- Company
$\overline{\times}$	DEP DOL	Amended Amendment	#		- 3	Haven NJ	กลกกล	3									
		Emergency (ame of (_			Tala	h 1					\dashv
×	DOH DCA	justification) Cancellation		1 10	- Fran	Jonadi											
	DOA L	_ Garioonadori				ITY INFORM	MATION	-									
Nan	ne of Facility Where Ab	atement is Takin	g Place (3)						Туре	of Facility (4)						
Fr	an Maletsky Privat	te Home				Ave. 11		1		chool (K-12							
Stre	et Address							County I County	₹ C	ubchapter 8 other (i.e. pri tc.)	(Othe ivate 8	er than K-1 commerc	12) cial bu	ildir	ngs, h	nomes	5,
City	(5)								Square		# of	Floors			g. Ag	je	
	each Haven NJ 080	800							1000	+	2			50)÷		
Cou	inty (6)				ounty C	ode (7) SE ONLY)	1			nt Use (Prior	if bein	ng demolis	shed)				
	cean			100			1.00		Hous			(0)					_
	ne of Monitoring Firm H	lired by Building	Owner (8)		ASCM	No.	100		or Abat aco Ir	ement Cont	ractor	(9)					
N/									Addres					-		-	
Stre	eet Address						1		ox 32								
City	, State, Zip Code						Ci	ity, St	ate, Zi	o Code	C			-86			
							V	/Vest	Berli	n NJ 080	91						
Pro	ject Manager for Monito	oring Firm		T	elephon	e No.	- 1	58	one No 753-9			License 00727					
Sta	rt Date (10)		Scheduled	Com	pletion D	ate (11)	N	ame o	of OSI-	A Monitor							
9/	11/19		9/20/19					Samo	8								
Occ	cupancy Status During	Abatement (Che	ck Only One)			S	treet A	Addres	S							
	Facility Closed/Vacate Abatement Performed Other – Describe:	ed During Entire d Outside of Norr	Period of Almal Facility I	atemo Hours	ent		С	ity, St	tate, Zi	p Code					W-940-		
Sco	ope of Work (Check All	That Apply)						88.56	_					37-11-5	MACOON		
	≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Contract of the Contract of th	enovat emolitic				×	Mir	Containme i-Enclosure vebag Proc	edure						
_									d NO	n-Exempted	() all	u Non-rn	able r		TOTAL CONTRACT	ment	
				_ocatio			102							-	Ту	pe	
	Location of Asbestos-Containing N		Used	Sole	y by	Asbestos	Descri Contain			(ACM)	P	mount				m	1222
	TO BE ABA			ntenan odial S		(i.e. the	ermal sy	stems	s insula			Specify	1	0	Re	ncal	ncl
	In Facility (13)	У	Ouou	(12)			surfacing				5	F or LF)		Remove	Repair	Encapsulate	Enclosure
	(13)		Yes	No	N/A				,				1	2		ate	Ø
	E Andre O	alia a	Yes	INO			Exterio	or Sic	dina		1	300 sf	2				
_	Exterior Si	ung			Х			J. 010	21119				+				
													+	\neg			
													+	_			
							0.11.15			News	Desis'	orod I or	HEIII				
Na	me of Registered Wast	e Hauler		1 5.10	JDEP W auler ID		Cubic Ya of Waste					ered Land	atiit				
U	nited Roll Off			1	2459		4			G.R.O.	VV.S.						
110000	ry, State						Disposal			City, Stat		A 4000	7			en ies de	
111111111111111111111111111111111111111	m NJ						9/20/19			IVIORIIS	/IIIE F	A 1906	Date				
	mpleted by hthony T Perna		Title Presi	ident			Sigi	pature	2				8/29	3/1	9		

Jh 370	89	NO		CATIO	N OF AS	lew Jersey BESTOS ABAT AC 8:60 and 5:10	EMENT	DEG		\mathbb{V}				
Date of Notification (1)	29	4	10	1 00	ne of Buildir	ng Owner/Operator (molition	2)	SEP 37	-3 28	201	9	Lange		
Agencies Notified	Type Notifica	ation		Stre	et Address			ASBESTO	os co	NTR	OL 8			
⊠ EPA				Р	O Box 9				ENSI		etherodytes	_means(Line)		
☑ DOLWD	Amended Amendme			City	State, Zip	Code								
□ DCA	☐ Emergen	Control of the Contro	na	M	anasquan	i, NJ 08736								
(NJAC 5:23-8)	justification	on)		Nan	e of Contac	ct		Telephone Numb	oer					
A5	☐ Cancellat	ion		Li	nda			732-528-380	0					
				F	ACILITY II	NFORMATION								
Name of Facility Where A	batement is T	aking Pla	ce (3)				Type of Facility	(4)						
Residence							School (K-12							
Street Address							Other (i.e., p	3 (Other than K-12) rivate and commer) rcial bu	ildina	S.			
							homes, etc.)							
City (5)	July 1/1/													
Bay Head					0'1	47	1500 sf	1						
County (6)				Co	unty Code (7)(STATE USE ONLY)								
Ocean							Residence							
Name of Monitoring Firm	Hired by Build	ding Owne	r (8)	ASCI	√l No.	Name of Abateme								
						Guardian Co	ntracting, Inc.							
Street Address						Street Address								
					1889 Route 9, Unit 61									
City, State, Zip Code						City, State, Zip Co	ode							
						Toms River,	New Jersey 08	755						
Project Manager for Mon	toring Firm		Te	elephon	e No.	Telephone No.		License No.						
						732-349-9932	2	00624						
Start Date (10)	Contract of the Contract of th	Scheduled				Name of OSHA N	Monitor	•						
09 /11 /		09	/ _	12 /	19	E.M.S.L. Ana	lytical							
Occupancy Status During	Abatement (Check only	y one)			Street Address								
□ Facility Closed/Vacate						1056 Stelton								
☐ Abatement Performed						City, State, Zip Co	ode							
Time of Abatement: _	AM	PM/	P	M	_AM	Piscataway,	New Jersey 08	854						
Scope of Work (Check al	I that apply)			-3-2-72										
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf			Renov Demol			☐ Mini-End ☐ Gloveba	g Procedure	gative Pressure n-Friable Procedu	re					
				cation					Ab	atem	ent Ty	уре		
Location		. 11		nally olely by		Description of		or a k onsonere dopperen all	R	R	ш	ш		
Asbestos-Containing TO BE ABA		, ,	/lainte	nance/	(i.	estos Containing Ma e., thermal systems		Amount (Specify	Remova	Repair	Encapsulate	Enclosure		
IN Facili	ty	C	ustodia 1)	al Staff	'	surfacing, VAT	, or	SF or LF)	<u>val</u>	_	sula	sure		
(13)		Ye		F 1 2702		other miscellane	ous)				ate	100		
exterior			2 12	- 100		ta a station or		4500 5						
exterior				-	aspesi	tos siding		1500 sf						
				S 30								Ш		
Name of Registered Was	te Hauler				Waste	Cubic Yards of	Name of Regis	stered Landfill						
Guardian Contracti	ng, Inc.			Hauler 202	ID No.	Waste 3	T.R.R.F.							
City, State				202		Disposal Date	City, State							
Toms River, New Je	ersey					09/12/19	Tullytown,	Pennsylvania						
Completed By (Print or T	ype)	Title				Signature	1		ate /	- 1				
Nicholas Fernicola	500 50	72762 77	ct Ma	nager			-		26	g h	9			

I	NV	14	13	7
NA	3	70	90)

JA370	8	NOT		Pursuant to NJAC 8:60 and 5:16)								n	
Date of Notification (1)				Name	of Building	g Owner/Operator (2)	LI LI SEP -	3 2	019	. !!		
	29 /	19		Ed	Smith			3	120	10			
Agencies Notified	Type Notifica	ation		Street	Address			ASBESTOS			- &		
⊠ EPA		2					į	LICE	VSINC) 		NO PERSONAL PROPERTY AND ADDRESS OF THE PERSONAL	
☑ DOH	Amended Amendm			City, S	State, Zip C	Code		1911					
DCA	Emergen		- IG	Tor	ns River,	NJ 08753							
(NJAC 5:23-8)	justificati		9	Name	of Contac	t		Telephone Numb	per				
	☐ Cancellat	tion		Ed	Smith								
				FA	CILITY IN	IFORMATION		***					
Name of Facility Where A	Abatement is 7	Faking Plac	e (3)				Type of Facilit	ty (4)					
Residence							School (K-						
Street Address			a - lile a-a				Other (i.e., homes, etc	er 8 (Other than K-12) private and commer c.)	cial bu	ilding	S,		
City (5)					Inc	31597	Square Feet	# of Floors	Blo	dg. Ag	ge		
Little Egg Harbor					()	000/	1000 sf	1	(65			
County (6)				Cour	ity Code (7)(STATE USE ONLY)	Current Use (ntractor (9)					
Ocean				Residence ASCM No. Name of Abatement Contractor (9) Guardian Contracting, Inc.									
Name of Monitoring Firm	Hired by Build	ding Owner	(8)	ASCM									
N/A													
Street Address						Street Address							
				1889 Route 9, Unit 61 City, State, Zip Code									
City, State, Zip Code						1889 Route 9, Unit 61 City, State, Zip Code							
Drainet Manager for Man	itarian Firm		T-1		City, State, Zip Code Toms River, New Jersey 08755 ne No. Telephone No. License No.								
Project Manager for Mon	itoring Firm		Tel	epnone									
Start Date (10)		Scheduled (Comple	ation Do	Land the state of								
09 / 10 /			17	1 /	6 6								
Occupancy Status During				<u> </u>		Street Address	iyucai						
☐ Facility Closed/Vacate	5			ment		1056 Stelton							
☐ Abatement Performed					cribe	City, State, Zip Co	nde						
Time of Abatement: _					AM	Piscataway,		18854					
Scope of Work (Check al	I that apply)					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
□ >2 of oc > 2 lf								legative Pressure					
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			enova emoliti			☐ Mini-End	osure g Procedure						
								Non-Friable Procedu	е				
10 10			s Loca Norma						Ab	ateme	ent T	уре	
Location Asbestos-Containing			ed So		Ashe	Description of stos Containing Ma		Amount	Re	Re	En	En	
TO BE ABA	ATED	M	ainten	ance/ Staff?		., thermal systems	insulation,	(Specify	Removal	Repair	caps	Enclosure	
IN Facili (13)	ty	Cu	(12			surfacing, VAT other miscellane	, or	SF or LF)	<u>a</u>		Encapsulate	иге	
(10)		Yes	No	N/A		other misochane	.003/				te		
exterior			\boxtimes		asbesto	os siding	700 sf						
									П	П	П	П	
Name of Registered Was	ste Hauler			NJDEP I	Naste	Cubic Yards of	Name of Pa	gistered Landfill			Ш		
Guardian Contracti				Hauler II	O No.	Waste	T.R.R.F.	3.0torou Landilli					
City, State	3 Disposal Date	City, State											
Toms River, New Je	ersev		9/11/19		n. Pennsylvania								
Completed By (Print or T	U-1.00-000- - 0.	Title				9/11/19 Tullytown, Pennsylvania Signature Date /							
		2000000000					V 1	00			4		

Nicholas Fernicola

Project Manager

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)									DEC		\mathbb{W}		Acceptable of the second control of the
Date of Notification (1)						e of Buildin		SEI	P - 3	201	9		
Agencies Notified Type Notification					Stree	t Address		co-splicit design of the	-marrisht grow	nativo stra			
⊠ EPA	☐ Initial				200000000000000000000000000000000000000		ans Street, Suite	300	ASBESTOS CONTROL & LICENSING				
□ DOLWD □ Amended						State, Zip (<u> </u>	TOET 40	140		Name to the Park of the Park o	
□ DOH						Chicago, IL 60654							
DCA Emergency (ir justification) Cancellation			1)			e of Contac			Tolophone M.				
									Telephone Number				
	LION	UII			seph Joh			973-237-2540					
			-		FA	CILITY IN	NFORMATION						
Name of Facility Where Abatement is Taking Place (3)								Type of Facility (4)					
Willowbrook Mall								School (K-12)					
Street Address									☐ Subchapter 8 (Other than K-12) ☑ Other (i.e., private and commercial buildings,				
1400 Willowbrook	Mall							homes, etc.		ierciai bi	anding	3,	
City (5)					0-7	70	-\	Square Feet	# of Floors	В	dg. A	ge	
Wayne						411)	1,514,000	2		50	5	
County (6)				Cou	nty Code (7	7)(STATE USE ONLY)	Current Use (Prior if being demolished)						
Passaic						nty oodo (Motivie age direty	Commercial					
					ASCN	l No	Name of Ahatem	nent Contractor (9)					
					AGGIV	I NO.	A CONTRACTOR OF MINISTER AND THE	ronmental, LLC					
Criterion Laboratories, Inc.								onnental, LLG					
Street Address							Street Address						
400 Street Road							623 Cutler Avenue						
City, State, Zip Code							City, State, Zip Code						
Bensalem, PA 19020							Maple Shade, NJ 08052						
					ephone	No.	Telephone No.	Security of the second security of the second secon					
				15-24	4-1300	856-755-0099	00842						
Start Date (10) Scheduled Comple					etion D	ate (11)	Name of OSHA N	Monitor					
09/18/1909/2				3 /	19	Criterion Lab	aboratories, Inc.						
Occupancy Status During Abatement (Check only one)						Street Address							
☐ Facility Closed/Vacated During Entire Period of Abatem					ement	The state of the s							
						The state of the s							
Time of Abatement:AMPM/ <u>9:00</u> PM- <u>8:</u>													
Scope of Work (Check a	II that apply)						Densaiem, 1	A 15020					
							☐ Mini-End ☐ Gloveba	g Procedure		1			
			le	Loca	ntion	T	⊠ Noii-Exe	empted (*) and No	on-Friable Proces				
Location	of.			Vorm			Description of	se.			atem	1	T
Asbestos-Containing Material (ACM) <u>TO BE ABATED</u>					lely by	Asbe	estos Containing Ma		Amount	Removal	Repair	Encapsulate	Enclosure
			Maintenance Custodial Staf			(i.e	e., thermal systems			Non	ar.	aps	losi
IN Facility (13)			(12)				surfacing, VAT other miscellane		SF or LF)	<u>n</u>		ula	Jre
(10)			Yes	No	N/A		other miscellane	.003)				6	
Space 1825 Rear Area				\boxtimes		Mastic			600 SF				
			П								П		П
						-					1		
			Ц_	Ш							1	Ш	Ш
								(4)					
[12] [13] [14] [14] [15] [15] [15] [15] [15] [15] [15] [15				NJDEP Hauler 1593	D No.	Cubic Yards of Waste	and the second s	Registered Landfill					
City, State				1093	J	Disposal Date	City, State						
Freehold, NJ					09/23/2019 Morrisvill			e, PA					
	Timol	Title					5832777477880,57557577			Doto			
Completed By (Print or Type) Title Christina Fay Vice Presiden					ent of	Operatio	ns Signature	2 Hay	*	Date 8/2	11	9	