Date of Notification (1) 8/30/12					Building C		perator	(2)		66	E	IW	E	In	1
Agencies Notified	Type Notification			treet Ad 000 M	dress lacArthu	ır Boul	evard			SEF		Desc		111	
EPA DEP DOL	Amended Amendment				e, Zip Coo h NJ 07									- marco	m rightly (Bibach)
DOH DCA	justification) Cancellation				Contact loehrke			ĺ	No. of Concession, Name of	Telep	phone N	lumber			
				FACIL	ITY INFO	RMATIC	ON			1			-	-	1
Name of Facility Where TD Bank Facility	Abatement is Takin	g Place (3)						☐ s	f Facility (4 chool (K-12	2)					
Street Address 1000 MacArthur Bo	oulevard							⊠ O et	ubchapter 8 ther (i.e. pr c.)	ivate &	comme		lding	, hon	nes,
City (5) Mahwah NJ 07430								Square 1000-		# of F	Floors		31dg. 35+	Age	
County (6) Bergen			(5	County C	ode (7) SE ONLY)			Curren	t Use (Prio	r if bein	g demol	lished)			
Name of Monitoring Firm N/A	Hired by Building	Owner (8)		ASCM	No.			of Abate	ement Cont	tractor (	9)	-41			
Street Address							11723333	Address Box 329							
City, State, Zip Code								State, Zip t Berlin	Code NJ 0809	91					
Project Manager for Mon	nitoring Firm		T	elephon	ie No.		2 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	hone No. 753-98			License				
Start Date (10) 9/14/12		Scheduled 9/17/12	Com	pletion D	Date (11)			of OSH	A Monitor						
Occupancy Status Durin								Address Box 32							
Facility Closed/Vac Abatement Perform Other – Describe:	ned Outside of Norr	nal Facility H	ours	ent			100 100 100 100 100 100 100 100 100 100	State, Zip	Code	91			100		
Scope of Work (Check A	All That Apply)			-							_		-		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Section 19	novati					Mini Glov	Containme -Enclosure /ebag Proc	edure				ure	Ð
		Is Lo	ocatio	מָנ						17			Ab	iteme	nt
Locatio Asbestos-Containing		Used		y by	Ashast		scription	n of Material	(ACM)	Δn	nount	.  -	T	Ť	
TO BE AB In Faci (13)	BATED lity					thermal surfa		ns insulat AT, or		(S	pecify or LF)	Removal	Kepaii	Encapsulate	Enclosure
first floor loa	ding dock	165	INO	X		Viny	/l Floo	ring		30	0 SF	x	+	+	+-
													-	-	
													1		
Name of Registered Wa	ste Hauler		1,474,533	JDEP W		Cubic of Wa	Yards ste		Name of I	-00300000000000000000000000000000000000	red Lan	dfill	Secretary.		
United Containers	1,550,500	459		4			G.R.O.								
City, State Elm NJ						Dispo 9/17/	sal Date	Э.	City, State Morrisvi		1906	7			
Completed by Anthony T Perna	STEEL OF THE STEEL	Title Presid	ent			1	Signatur	е				Date 8/30/	12		

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Date of Notification (1) 8/30/12	1 . Y'+ + +			of Building	g Owner/Op	erator	(2)	The same	[] 7	厚	n i	\17 (		Chicago and
Agencies Notified Type Notification			Street A	Address	e Street 9	) F			<u> </u>	IE	<u>U</u>	V		
EPA Initial Amended Amendmen		_	City, Sta	ate, Zip C	Code	en F	loor		OE.	i	4 .	012		IJ
DOH Emergency justification) Cancellation	-			f Contact Ceiders	7				Teleph	one Nu		JL 8	-	
			FAC	ILITY INF	FORMATIO	N			No.	CHOCH.	SING	JL O		
Name of Facility Where Abatement is Takir Bakers Basin Motor Vehicle Cente Street Address 3200 Brunswick Pike	ig Place (3)	)					Subch Subch	ol (K-12) napter 8		nan K-1	2) ial bui			nes,
City (5) Lawrenceville NJ 08648							Square Fee	et	# of Flo	ors		Bldg. /	Age	
County (6) Mercer			County (STATE	Code (7) USE ONL	Y)	_	Current Us Agency E	e (Prior Buildin	if being o	lemolis	hed)			
Name of Monitoring Firm Hired by Building N/A	Owner (8)		ASCN	Λ No.			of Abatemer aco Inc.	nt Contra	actor (9)		11			
Street Address		*					Address Box 329			-				-
City, State, Zip Code	Telever-		9			tate, Zip Coo Berlin NJ		1						
Project Manager for Monitoring Firm			Telepho	ne No.	1		none No. 753-9800		11 01 01 0100	ense N	lo.			
Start Date (10) 9/17/12	Schedule 9/28/12		mpletion	Date (11)			of OSHA Mo aco Inc.	nitor						
Occupancy Status During Abatement (Chec	k Only One	e)					Address			-				
Facility Closed/Vacated During Entire   Abatement Performed Outside of Norm Other – Describe:	Period of Alnal Facility	baten Hours	nent s		(	City, S	Sox 329 tate, Zip Coo			+	3			
Scope of Work (Check All That Apply)						vves	Berlin NJ	0809	ı	-	20000			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Promotes	enova	350000000000000000000000000000000000000			×	Full Cont Mini-Enc Glovebac Non-Exe	losure Proced	lure					
1	ls L	_ocati	ion iv					The transfer of the transfer o	) and ivo	iiri iiat	) IC FIL	Abate		t
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used	Sole otena	ly by nce/		stos Contair	stems	laterial (ACM insulation, T, or	1)	Amou (Spec SF or I	ify	Remova	Repair	Encapsulate	Enclosure
Agonov Building	Yes	No	N/A	me dan			· · · · · ·						te	(0
Agency Building			X		see a	ttach	ed	S	ee atta	ched	x			
					1									
Name of Registered Waste Hauler		IN	JDEP W	aste	Cubic Ya	rde	- I Nom	o of Do	gistered I	on dell	<u> </u>		e ne	
R&B Debris LLC	-	Н	auler ID 9439		of Waste		10000000	R.O.W.		LariQIIII				
City, State Hainesport NJ	- 4	21			Disposal 9/6/12	Date		State risville	PA 19	067	2.4	Lat		7 0
Completed by Anthony T Perna	Title Presid	ent			Sign	nature				Da 8/3	te 30/12			

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

Date of Notification					-7 and 12:120-7 Owner/Operator		- 1 (i)	-1'			
8/28/12			Beth D			- (2)		1		Angel Company	une offi
	m					- Parado	TE OF	1 37	fig.	-	1
Agencies Notified	Type Notificat	TOU	Street Add: 8 Koew		D1		I E W E	1	- L	-11	Particular Suppression
[ ]EPA	[X]Initial Notificat	ion				111-	3				1000
[ ]DEP		1011	City, State	_		111	W SEP .	- 12 /		1	IT
[X]DOL	[ ]Amended Notificat	ion	West O	rang	e, NJ 0705	52	THE OFF			3-2-peeks	*
[X]DOH	10022204		Name of Cor	ntact		Teleph	one Number			<u> </u>	1
[ ]DCA	[ ]EMERGENCY	on	Beth D	idom	enico	900		kirkli LisotNC	13	11 1	Total State of the
	T Tourselline		FAC	ILITY	INFORMATION		tion of the second military and a second community		- sagarbaga	AND STREET	
Name of Facility Wh	ere Abatement is	Takin				Type of Fac:	ility (4)				_
Private			e			[ ]School		or than	K-1	21	
Street Address	N = N						(i.e., priv				
8 Koewing Pl						cial	buildings,	homes,	etc.	)	
City (5)	r.	ounty (	6)	Cor	inty Code (7)	Square Feet			ldg.	Age	
West Orange		Esse			FATE USE ONLY)	2700 Current Use	2 1/12 (Prior if b	Sich a spening to the	83 moli	shed	.)
Name of Monitoring	Firm hired by Bu	ilding	ASCM No.		Name of Abate	ment Contract	tor (9)		<del>2</del>		<u> </u>
Owner (8) N/A					AZTECH M	IANAGEMEN	T, Inc.				
Street Address					Street Addres	s					-
					86 Chris	stopher S	t.				
City, State, Zip Co	ode				City, State, Montclai	Zip Code r, NJ 07	042				-7/2
Project Manager for	Monitoring Fire	Tel	ephone Numb	ner	Telephone Num	asa ilikuwa wa ma		License	Marm	her	
		N/			(973) 744		2.	0037			
Scheduled Start Dat	e (10) Sched.	Comple	etion Date	(11)	Name of OSHA	Monitor					
9/6/12	9/8	/12			N/A						
Month Day 3 Occupancy Status Du	Year Mont		ay Year	r							
[X]Facility Clo	osed/Vacated Dur	ing Ent	cire Period	ı	Street Addres	s					•
	erformed Outside			ty	City, State,	Zip Code			-		
	cribe: «OffHours cribe: «Other Occ							4			
Scope of Work (Chec					<u> </u>						_
[X]>3 sf or [ ]>160 sf	: ≥3 lf	[x	[]Renovation ]Demolition		[ ]Mini- [X]Glove	Containment of Enclosure obag Procedure	е	e Press	ure		
			Is	T	[ ]NOII-E	riable Proced	unte	Ab	atem	ent :	Type
Location Ashestos-Co.		No	cation ermally		Description			-		E	E
Asbestos-Co Material			Used Solely		Asbestos-Con Material (		Amount (Specif	E	R	C	C
TO BE A	BATED	Ву	Main- enance/		(i.e., thermal	. systems	SF or	O	PA	P	O
In Faci. (13)	1.T	Cu:	stodial aff (12) No N/A	ir	sulation, surfa or other misce		LF)	A L	R	n L	U R
Basement			X	Boi	ler insula	tion	40 sf	x		† ·	E
				Pipe	e insulati	on	90 lf	X			
					1 4	E.					
Name of Registered NATECH MANAG		Hau	DEP Waste		bic Yards Waste 1.5	Name of Red G.R.O.W	S	ifill		-	
City, State			7040	Di	sposal Date	City, State	9				37/21
Montclair, NJ	07042				9/10/12	-	ille, PA	/1906	57		
Completed By (Print	or Type) Title	)			Signature	1 / /-		Date			
Constantine V	vivian Pre	sider	nt		1 /	1	/ //	8/2		12	
						onton	pullita				

Date of Notification (1)

Date of Notification	on (1)	1	Name of Bui	lding O	wner/Operato	r (2)		7 3. 5		
8/28/12			Alexand	dra L	opez	-	eran material per menal and en-			
Agencies Notified	Type Notifica	ation	Street Addre	ess						-
[ ]EPA	[X]Initial		189 Jac	coby	St.		2 P2			
[ ]DEP	Notific	ation	ity, State	Zin C	ode					
[X]DOL	[]Amended		700 St	N 272	NJ 07040		타 -4		9	
[X] DOH	Notific									
[ ]DCA	[ ]EMERGENC	Y	Alexand		opez	Telepho	one Number			
	1 Jourcella	CIOII	FACT	T.TTY TN	FORMATION	No seem to the see		- Carrie Condensations	at the same of the same of	3
Name of Facility Wh	nere Abatement	is Takino			PORMITON	Type of Faci	lity (4)			
Private	24				المنابع منا	[ ]School		er than	. <b>K</b> −1	2)
Street Address							(i.e., priva			
189 Jacoby St.						cial	buildings, l	homes,	etc.	)
City (5)		County (6	5)	Count	ty Code '(7)	Square Feet	# of Flo		ldg.	Age
Maplewood		Essex			TE USE ONLY)	1600 Current Use	(Prior if be	1 -	moli	shed)
Name of Monitoring	Firm hired by	Building	ASCM No.		Jame of Abate	ment Contracto	or (0)			
N/A (8)	•	-				ANAGEMENT				
Street Address					Street Addres 86 Chris	s topher St				
City, State, Zip Co	ode			- ,  c	City, State,					
Project Manager for	Monitoring Fi	rm Tele	phone Numbe	er T	elephone Num (973)744	ber		License		ber
Scheduled Start Dat 9/7/12			tion Date		ame of OSHA			005		-
Month Day	Year Mon	nth Da	y Year	. 41	·/ A					
Occupancy Status Du [X]Facility Clo of Abatemer	osed/Vacated Du	(Check o	nly one) ire Period	S	treet Addres	s				Ta I
[ ]Abatement Pe Hours - Desc [ ]other - Desc	cribe: «OffHours	Descrip	t»	-y   с	ity, State,	Zip Code				
Scope of Work (Chec			<u> </u>							
[X]≥3 sf or [ ]≥160 sf	:>3 lf	[x]	Renovation Demolition		[ ]Mini- [X]Glove	Containment wi Enclosure bag Procedure riable Procedu		Press	ure	
Location		Tion	Is cation		*****************			Aba	ateme	ent Typ
Asbestos-Co Material TO BE AB In Faci (13)	ntaining (ACM) BATED lity	So By ter Cus	cmally Jsed Dlely Main- nance/ todial	(i	Description Asbestos-Continuous Material (e., thermal lation, surfactorial continuous miscellosses miscellosse	taining ACM) systems acing, VAT,	Amount (Specify SF or LF)	O V A	R E P A I R	E E E E N N N C C C C C C C C C C C C C
Danama		Yes	No N/A					L		L P
Basement		+-+	X	PIPES			110 LF	X		
									-	
Name of Registered N AZTECH MANAG		Hau!	EP Waste ler ID No.	0.4000000000000000000000000000000000000	Yards aste .1.5	Name of Regi		l fill		
City, State Montclair, NJ	07042	1-7	0-20	100	osal Date	City, State	lle, PA	1906	57	
Completed By (Print	or Type) Titl				loš m - t	11	-11	-		
Constantine V		e esiden	+		Signature	1	1/	Date		

Date of Notification (1) 08/28/2012				Name of CHAR		Owner/Operato ARI	r(2)) E	GE		3	-		yan v
Agencies Notified  EPA  DEP  DOL  DOH  DOA	Type Notification    X	t# (including		City, Sta TEANI Name of	ALMER ate, Zip Coo	de J. 07666		BESTOS CI		umber			175
Name of Facility Where PRIVATE HOUSE Street Address 491 PALMER AVI		ng Place (3	3)	FACI	LITY INFO	RMATION	Type of Faci School Subcha Other (i	(K-12) pter 8 (Otl	ner than K- & commerc	12) cial buil	dings	, home	es,
City (5) TEANEC NJ 0766 County (6)	66			County (	Codo (7)		Square Feet 1900		of Floors 2	9	ildg. A	\ge	
BERGEN					USE ONLY)		Current Use		-	snea)			157
Name of Monitoring Firm N/A	Hired by Building	Owner (8)		ASCM	I No.	SHA	of Abatement ARON QUA			CTIO	N LI	_C	
Street Address							t Address VAN ORDE	N PL					- 4
City, State, Zip Code							State, Zip Code CKENSACK		601				
Project Manager for Mor	itoring Firm	***		Telephor	ne No.	3,000,000	hone No. -708-4270		License 01135	No.			
Start Date (10) 08/06/12		Schedule 08/06/		mpletion (	Date (11)		of OSHA Mon ENVIRON		SERVI	CES			
Occupancy Status Durin    X   Facility Closed/Vac     Abatement Perform     Other – Describe:	ated During Entire	Period of A	Abaten	nent		2333 City, 5	t Address 3 RT 22 WE State, Zip Code ON NJ	Market I			to.		
Scope of Work (Check A	Il That Apply)												-
≥3 sf or ≥3 lf     ≥160 sf or ≥260 lf		Management	Renova Demolit				Mini-Enclo	sure Procedure	h Negative			e.	5
			Locat				Inc. Market				Abat	ement	t
Location Asbestos-Containing TO BE AB. In Facil (13)	Material (ACM) ATED ity	Use Ma	Normal d Sole intena todial ( (12)	ely by nce/ Staff?		Description os Containing I hermal system surfacing, V other miscella	Material (ACM) ns insulation, AT, or	(	Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
BASEM	No	N/A	P	IPE INSUL	ATION	1	28 LF	X		X			
							2111011		20 11	121	r.c	, A	
	+						10 == =	-		-			
Name of Registered Was	ste Hauler		1000	J JDEP W		Cubic Yards	Name	of Regist	ered Landf	l iii			
SHARON QUALITY	CO			lauler ID 033697		of Waste 1	TRI.	STATE	SREVI	CES			
City, State HACKENSACK NJ	07601					Disposal Date 09/10/12	10.500		Y 10474				
Completed by CARLOS ESQUIVE	L	Title MAN	AGE	R	ASSESSED IN	Signatur	e many	092	-	ate 08/28/	12	-	

NOTIFICATION OF ASBESTOS ABATEMENT Check# 1467 (Pursuant to NJAC 8:60 and 5:16) Name of Building Owner/Operator (2) Date of Notification (1) 08 30 / 12 Tekni-Plex Inc Type Notification Street Address Agencies Notified ✓ Initial X EPA 1150 First Avenue, Suite 500 ☐ Amended **⋈** DOLWD City, State, Zip Code Amendment # LICANSING X DHSS King of Prusia, PA 19406 Emergency (including DCA Name of Contact Telephone Numberjustification) (NJAC 5:23-8) Cancellation Frank Case **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) Tri-Seal Inc Subchapter 8 (Other than K-1 2) Street Address Other (i.e., private and commercial buildings, homes, etc.) 112 Church Street Square Feet # of Floors Bldg. Age City (5) Flemington, NJ 08822 County Code (7) (STATE USE ONLY) Current Use (Prior if being demolished) County (6) Hunterdon Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) 00079 Gr Tech LLC Envirovision Consultants, Inc Street Address Street Address 576 Valley Rd #283 20-21 Wagaraw Road, Bldg .# 34A City, State, Zip Code City, State, Zip Code Wayne, NJ 07470 Fair Lawn, NJ 07410 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Guillermo Morales 973-636-9145 973-638-1777 01127 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 09 / 08 12 09 / 12 / 12 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 .# 34A Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: \_\_\_\_\_AM-\_\_\_PM/ Fair Lawn, NJ 07410 Scope of Work (Check all that apply) Full Containment with Negative Pressure >3 sf or >3 lf Renovation Mini-Enclosure ≥ 160 sf or ≥260 lf Demolition Glovebag Procedure Non-Exempted (\*) and Non-Friable Procedure Is Location Abatement Type Normally Lucation of Description of Repair Used Solely by Asbestos-Containing Material (ACM) Removal Encapsulate Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED (i.e., thermal systems insulation, (Specify Custodial Staff? IN Facility surfacing, VAT, or SIF or LF) (12)(13)other miscellaneous) Yes No N/A X First floor-laminating room Pipe insulation 60 LF X X First floor-new press room Pipe insulation 90 LF X X First floor-new winber room Pipe insulation 120 LF Name of Registered Waste Hauler NUDEP Waste Hauler ID No. | Cubic Yards of Waste | Name of Registered Landfill Gr Tech LLC 0033785 TBD T.R.R.F. Inc City, State Disposal Date City, State Wayne, NJ 07470 TBD Tullytown, PA Completed By (Print or Type) Title Signatur Date N.Jevtic Owner 08/30/2012

State of New Jersey

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		1		CATION	nte of New Jers OF ASBESTO TO NJAC 8:60 a	SABATE		C		E			
Date of Notification (1) 8/31/12					Building Owner reeman / Re		・ 1000 日 日本の日本の日本の日本の日本日本日本	SEP	<del>-</del> 4 201	2.	L	1	
Agencies Notified	Type Notification	Const.		Street Ac 29 Wes	idress st Joshua Av	re		ASBEST	OS CONTROL	8	Ì	1	
EPA DEP DOL	Initial Amended Amendment	#			te, Zip Code e NJ 08008		and the state of t		CENSING		Mineralisas *	1	
DOH DCA	Emergency ( justification) Cancellation			Name of Brad					ephone Num		5 . 2 ×25	4 2	, # ·
L DOX	Cancellation			22.12.52.A.27.	ITY INFORMA	TION							
Name of Facility Where A	Abatement is Takin	g Place (3	3)	FACIL	ITT INFORMA	IION	Type of Facility	(4)					
Brad Freeman / Re			=		a w		School (K-	3.5					
Street Address	-		ur prise	40 - 20		-	Subchapte	r 8 (Oth	er than K-12	)			
29 West Joshua Av	е						Other (i.e.	private a	& commercia	l build	lings,	home	es,
City (5)							etc.) Square Feet	# 0	f Floors	В	ldg. A	ae	
Holgate NJ 08008							1000 +	1		100000	5+	3-	
County (6)				County C	Code (7)		Current Use (Pri	or if bei	ng demolishe	ed)			
Ocean				(STATE U	ISE ONLY)		Residence						
Name of Monitoring Firm	Hired by Building	Owner (8)	e 120 h	ASCM	No.	Name	of Abatement Co	ntractor	(9)			- 1997	
N/A							naco Inc.		(F) (F)				
Street Address				1		Street	t Address						
						POI	Box 329						
City, State, Zip Code			- 10 mm 1 mm				State, Zip Code st Berlin NJ 080	091		300000000			
Project Manager for Mon	itoring Firm			Telephor	ne No.	- 17 STREET, S	hone No. -753-9800		License No	).			
Start Date (10) 9/13/12		Schedul 9/17/1:		npletion [	Date (11)		of OSHA Monitor			Samuel Scot			
Occupancy Status During	Abatement (Chec						t Address			-			
Facility Closed/Vaca	ated During Entire	Period of	Abatem			PO	Box 329						
Abatement Perform Other – Describe:		nai Facility	/ Hours	- 25.44 -		1	State, Zip Code st Berlin NJ 08	091					
Scope of Work (Check A	ll That Apply)									=2,000			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		THE REAL PROPERTY.	Renova Demolit				Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	e cedure				e	
		, le	1.0004	on l						I .	Abate		t
Location	n of		Locati Normal	ly .		Description	n of				Ту	ре	
Asbestos-Containing	Material (ACM)		ed Sole		Asbestos Co	ntaining I	Material (ACM)	(1)	mount			ш	_
TO BE AB			todial S			al system facing, V	ns insulation,		Specify F or LF)	Ren	Re	Encapsulate	Enclosure
(13)			(12)	The Court		r miscella		3	Ji Li⁻)	Removal	Repair	lusc	uso
E	100	Yes	No	N/A				`		m	, ness	ate	9
				1									

TO BE ABATED In Facility (13)		intena todial \$ (12)		therm, sur	ontaining Mater lal systems insi facing, VAT, or r miscellaneous	ulation,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
8	Yes	No	N/A					-		ate	TO.
Exterior Siding			х	Ex	terior Siding		2000 SF	х			
	-							-			
	+							+	-		
Name of Registered Waste Hauler United Containers		H	J JDEP W lauler ID 2458	0.722300	ic Yards Vaste	Name of G.R.O.	Registered Landt	ill	1	1	
City, State Elm NJ				 100000000000000000000000000000000000000	oosal Date 7/12	City, Sta	te ville PA 19067				
Completed by Anthony T Perna	Title Presi	ident			Signature			ate 3/31/1:	2		

Date 8/31/12

2718

Date of Notification (1)					Owner/Opera				Lh U	1.7		100
8/31/12 Agencies Notified Type Notii	6 H			Carried Control Control	Residence			ll sep		Ξάγο		
		100	Street Ac 17 Eas	t 104 St				Tank			1	
DEP Ame	nded ndment #			te, Zip Coo Haven F	de Park NJ 08	3008	2004	ASBES	ids cont Kensing	ROL 8		
✓ DOH justifi	rgency (including ication) cellation	100	Name of Jeff	Contact			Peofe agreem	Telephone	ALCOHOL: THE	-		
				ITY INFO	RMATION						72	
Name of Facility Where Abatement in Jeff Seddon / Residence	is Taking Place (3)					T	ype of Facility (4	)				
Street Address 17 East 104 St	3	-					School (K-12 Subchapter 8 Other (i.e. pr	) 3 (Other than ivate & comm	K-12) ercial bui	ldinas	. hom	es
City (5)						-	etc.)	# of Floors				
Beach Haven Park NJ 08008	3					2012	000 +	2	1000	Bldg. / 35+	age	
County (6) Ocean			County C STATE U	ode (7) ISE ONLY)	MIN II		urrent Use (Prio Residence	r if being dem	olished)			
Name of Monitoring Firm Hired by B N/A	uilding Owner (8)		ASCM	No.			Abatement Cont o Inc.	ractor (9)				
Street Address						eet Ad D Box	dress k 329					
City, State, Zip Code							e, Zip Code erlin NJ 0809	91				
Project Manager for Monitoring Firm	1	T	elephor	ne No.		ephon	e No. 3-9800	Licens				
Start Date (10) 9/12/12	Scheduled 9/17/12	Com	pletion [	Date (11)	1000000		OSHA Monitor o Inc.					
Occupancy Status During Abatemer	nt (Check Only One)	)				eet Ad		- C) - SHEET	1			
Facility Closed/Vacated During Abatement Performed Outside Other – Describe:	Entire Period of Ab of Normal Facility F	ateme lours	ent		City	, State	k 329 e, Zip Code					
Scope of Work (Check All That Appl	W)				\ W	est B	Serlin NJ 0809	91				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	☐ Re	novat molitic				×	Full Containme Mini-Enclosure Glovebag Proce	edure		-		
	le l	ocatio	n I			123	Non-Exempted	(") and Non-F	nable Pri		re emen	t
Location of	No	rmally	y		Descript					T	уре	_
Asbestos-Containing Material (A <u>TO BE ABATED</u> In Facility (13)	Location of Separate							Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
Exterior Siding			х		Exterior	Sidin	g	2100 SF	x			
Name of Registered Waste Hauler		IN	JDEP W	aste	Cubic Yard	s	Name of E	legistered Lar	ndfill			
United Containers		Ha	auler ID    458		of Waste		G.R.O.V		nami			
City, State Elm NJ			_		Disposal Da 9/17/12	ate	City, State Morrisvil	le PA 1906	57			
Completed by Anthony T Perna	Title Presid	ent			Signat			100	Date 8/31/1	2		
	riesiu	GIII				-	Autority (California) Communication		0/31/1	2		

\* Emergency \*

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Date of Notification (1) 8/31/12	7 77 2 - 0			Building Ow NJ DMF	vner/Operator	(2)	10),	EGE	Ū W	F	Property of the same of the sa	7
Agencies Notified Type Notification  EPA Initial		3		t State S	treet 9th Fl	loor		SIP	11170	-		
DEP Amended Amendment #				, Zip Code NJ 0862				- tal	SUL			
Emergency (ir justification)  DCA  Emergency (ir justification)  Cancellation	icluding	1000	ame of C om Ze				*	Telephone Nu	mber &	1		
Name of Facility Where Abatement is Taking	Place (3)		FACILI	TY INFOR	RMATION	Type o	f Facility (4)	THE TREE FOR	of and years			
Bakers Basin Motor Vehicle Center	1 1000 (0)					□ s	chool (K-12)	**************************************	· ·			
Street Address 3200 Brunswick Pike						X O	ubchapter 8 ther (i.e. pri tc.)	(Other than K- vate & commerc	ial buildi			5,
City (5) Lawrenceville NJ 08648						Square 500		# of Floors	35	dg. Aç 5+	e	
County (6) Mercer			County Co	ode (7) SE ONLY)			nt Use (Prior House	if being demoli	shed)			
Name of Monitoring Firm Hired by Building O N/A	wner (8)		ASCM	No.		of Abate	ement Cont	ractor (9)				
Street Address						t Addres	7.00					
City, State, Zip Code				100		State, Zij	Code NJ 0809	91				
Project Manager for Monitoring Firm	**	T	elephon	e No.		hone No		License 00727	No.			
	Schedule 9/5/12	d Com	pletion D	ate (11)	7000000000	e of OSH naco In	A Monitor					
Occupancy Status During Abatement (Check	****	e)			Stree	et Addres	s		Ш,			
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other – Describe:	eriod of A al Facility	batem Hours	ent		City,	Box 32 State, Zi st Berli		<del></del> 91			v.	
Scope of Work (Check All That Apply)						-						
≥3 sf or ≥3 lf ≥ 160 sf or ≥260 lf	Bereitsen	tenovat emoliti		M.		Mir Glo	ni-Enclosure vebag Proc	edure				
	T		- 1	-		× No	n-Exempted	(*) and Non-Fri	able Pro		ement	t
	16356	Locati Normall	S2655 1		Description	on of				Ty	ре	т
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma Cus	intenar todial S (12)	nce/	Asbesto (i.e. t	os Containing thermal syste surfacing, \ other miscell	Material ms insula /AT, or	(ACM) ation,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
Field House	Yes	INO	X		floor tile/r	nastic	-	390 SF	x			
Field House			X		Window G			175 SF	x	1133	Ş	
			IJDEP W	laste	Cubic Yards		Name of	Registered Land	dfill	1_		
Name of Registered Waste Hauler R&B Debris LLC	H	lauler ID 9439		of Waste		G.R.O.						
City, State Hainesport NJ	v.i			Disposal Da 9/6/12	ite	City, Stat Morrisv	e ille PA 1906	7				
Completed by Anthony T Perna	Title Pres	ident			Signati	ure	Thatsis		Date 8/31/1	2		

31-1 ype Notification	2	Name	_		r/Operator	(2)	11-1		177			711	Townson or the
whe Notification	nd n		< A .		~ 4	1600	11 1/20	-	111				F A 5
	1000	Stree	et Addres	mn s _	117	VELL	410	3 /3	EP 4.	701	2 10	11	711
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Amended		City,	State, Z		mak	ې در سو	IN	J ASE	080	13	8	1	Cartestan State
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cestra	(0)			SEA 128 1281	Name		ent Cont	ractor (9)	) 0	0	-	>	
Hired by Building Own	ner (o)	1	N	/A	E	PC	Tec	ha	010	106	.5		
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337					City.	State, Zip	Code	•			A		9
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		Te	lephone	No.	Tele	phone No.	36	20	License No.	0	36	14	
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heaked	,	6	978	58.53	8560 Nam	e of OSHA	Monitor						
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hea ker	Sep only One	) patemer	29,	te (11) 2017	Stre	EPC'	Tec Box	hno 33	NJ		35	33	3
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Date of Notification (1)				Name	a of Ruildir	ng Owner/Operator (	2)			- W-1		
	22 / 1	2				Jniversity-Office		Construction	1 17	C	Ties.	7
Agencies Notified  EPA	Type Notification  ☑ Initial	1		100000000000000000000000000000000000000	t Address D Elm Dr				U 19	-,-	1	
⊠ DOLWD	⊠ Amended	u4 0100		City,	State, Zip	Code		600 14	700	7	11	H
☑ DHSS ☑ DCA	Amendment			Pri	nceton,	NJ 08544	1				Palitical	4
(NJAC 5:23-8)	justification)	ricidari	J	Name	of Conta	ct		Telephone Nun	nber			1
	☐ Cancellation			Ro	bert Orte	ega	L	- JOBENIA (D	THUL	2	i.	All reserves
				FA	CILITY II	NFORMATION		The state of the s	- IMage	THE PERSONS	- Total March	1
Name of Facility Where A	Abatement is Takir	ng Place	(3)			T. OKMATION	Type of Facility	(4)	16 dospieda	Service .		d
Princeton Universit			2.5				School (K-12					egg sei
Street Address	7						Subchapter 8	Other than K-1:				
Washington Rd.							homes, etc.)	rivate and comme	ercial b	uildin	gs,	
City (5)			_				Square Feet	# of Floors	В	ldg. A	ae	
Princeton							-			-3	3+	
County (6)			2777	Cou	nty Code (	7)(STATE USE ONLY)	Current Use (Pri	or if being demol	ished)			
MERCER						10 * 140 * 1	<ul> <li>Proposition (1983) (1983) (1983) (1983) (1983) (1983) (1983) (1983)</li> </ul>					
Name of Monitoring Firm	Hired by Building	Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
ATC Associates Inc	<b>:</b> .			000	98		VIRONMENTAI					
Street Address						Street Address		1				
3 Terri Lane						1123 BEAVE	R STREET					
City, State, Zip Code			-	74		City, State, Zip Co	ode					
Burlington,NJ 0801	6					BRISTOL, PA	19007					
Project Manager for Moni	toring Firm		Te	elephone	No.	Telephone No.		License No.			_	
Michael Keehn				609-386	-8800	215-788-6040		00509				
Start Date (10)		duled C	omp	letion Da	te (11)	Name of OSHA M	lonitor				-	
6 / 6 /	12	9 /		28_ /	12	BRISTOL EN	VIRONMENTAL	., INC.				
Occupancy Status During						Street Address			****			
☐ Facility Closed/Vacate	d During Entire Pe	eriod of	Abat	tement		1123 BEAVER	RSTREET					
Abatement Performed	Outside of Norma	I Facility	/ Ho	urs - Des	cribe	City, State, Zip Co	ode				-	
Time of Abatement: 7:	:00AW-3:30PW/_	PI	VI	AM		BRISTOL, PA	19007					
Scope of Work (Check all	that apply)	1000				·						
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf		⊠ Re □ De				☐ Mini-Encl ☐ Glovebag	ainment with Neg losure g Procedure mpted (*) and Nor	10 22 11	ıre			
State Company		100		ation					Ab	atem	ent T	уре
Location of Asbestos-Containing M				nally olely by		Description of			ZD.	Z	Ш	m
TO BE ABA	TED `	Ma	inter	nance/		stos Containing Mat e., thermal systems i		Amount (Specify	Remova	Repair	Encapsulate	Enclosure
IN Facility	у ,	Cust	odia (12	I Staff?		surfacing, VAT,	or	SF or LF)	<u>×a</u>	=	usc	Sure
(13)		Yes	No			other miscellaned	ous)				ate	
Throughout 1st Floor			$\boxtimes$		Floor ti	le and mastic		10,102 SF				
Throughout 1st Floor			$\boxtimes$		Pipe Sa	addles		224 LF				
Throughout 1st Floor			$\boxtimes$		Plaster			11,097 SF				
Room 111			$\boxtimes$		Windov	v caulk and glazi	ng	200 LF	$\boxtimes$			
Name of Registered Waste	e Hauler			NJDEP V		Cubic Yards of	Name of Regist	ered Landfill				
SERVICE TRANSPO	RT GROUP INC	:		Hauler II		Waste	G.R.O.W.S.	NORTH LAND	FILL			3
City, State				20990	Text in	Disposal Date	City, State					-
NEW CASTLE, DE								LE, PA 19067				
Completed By (Print or Type	pe) Title	9	-			Signature			ate ,	198		
Brian Scafiro		stimat	or				Scafire /		8/3	0/1	2	
ASB-41			5100 Company			Man /	scafer 1	16	1	1		

ASB-41 MAY 11 B 5/20 56

<sup>\*</sup> Do not use this form for asbestos licensure exempted activities.

5 / 22 /				ling Owner/Operator							
Agencies Notified Type Notific	12				University-Office	or Design an	id Constructio	n Daty)			1940
⊠ EPA 5582 N Initial	ation		7	eet Addres		in ni		CONTRACTOR OF THE PARTY OF THE		gr. 10.5	
☑ DOLWD 5612 ☐ Amende	d			00 Elm D					- 1		-
☑ DHSS.5599 Amendm			100000	, State, Zi		1	ASBESTOS USTA	NUL 5			1
□ DCA .5605 □ Emerger	cy (includ	ding			NJ 08544	-	LICESIA:		on-toral, ()	aristo advitato la	3
(NJAC 5:23-8) justificati	11.5			ne of Cont			Telephone N	umber		de For	
				obert Or			ENT DE				
Name of Equilibrité/hors & L. (			F	ACILITY	INFORMATION						
Name of Facility Where Abatement is		ace (3)	)		10.00	Type of Facilit	y (4)				_
Princeton University-Jadwin H Street Address	all					School (K-	12)				
					2	Other (i.e.	r 8 (Other than K- private and comr	12)	huildi	inaa	
Washington Rd.			3776 37			homes, etc	c.)	lercial	Dulla	ngs,	
City (5)						Square Feet	# of Floors		Bldg.	Age	_
Princeton	:										
County (6) MERCER			Co	unty Code	(7)(STATE USE ONLY)	Current Use (F	Prior if being demo	olished	)		
Name of Monitoring Firm Hired by Build	ling Owne	er (8)	ASCI	VI No.	Name of Abatem	ent Contractor (C	2)				
ATC Associates Inc.	145		1	098		VIRONMENTA					
Street Address		_			Street Address	A U.O.A.M.E.M.I.A	AL, INU.				
3 Terri Lane					1123 BEAVE	D CTDEET					
City, State, Zip Code											
Burlington,NJ 08016					City, State, Zip Co		= = 1 .				
Project Manager for Monitoring Firm		To	elephone	. Ma	BRISTOL, PA	19007		100			
Michael Keehn		1 9		6-8800	Telephone No.		License No.				
Start Date (10)	cheduled				215-788-6040		00509				
		Comp	ietion D	ate (11)	Name of OSHA M	onitor					
6 / 6 / 12  Occupancy Status During Abatement (C  Facility Closed/Vacated During Entire	heck only	one)	31_/		Street Address	VIRONMENTA	L, INC.				
Occupancy Status During Abatement (C	heck only Period o	one) of Abat	ement	scribe	Street Address 1123 BEAVER City, State, Zip Co	VIRONMENTA R STREET	L, INC.				
Occupancy Status During Abatement (C Facility Closed/Vacated During Entire Abatement Performed Outside of Not Time of Abatement: 7:00AM-3:30Pt	heck only Period o	one) of Abat	ement	scribe	Street Address 1123 BEAVER	VIRONMENTA R STREET	L, INC.				
Occupancy Status During Abatement (C)    Facility Closed/Vacated During Entire   Abatement Performed Outside of Not Time of Abatement: 7:00AM-3:30Pt   Scope of Work (Check all that apply)   ≥3 sf or >3 lf	heck only Period of mal Faci	one) of Abat	ement urs - De AM	scribe	Street Address  1123 BEAVER City, State, Zip Co BRISTOL, PA  Full Conta Mini-Encl	VIRONMENTA  R STREET  de  19007  pinment with Nerosure  Procedure	gative Pressure	Tro.			
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Name of Monitoring	Firm Hired by Building Owner	er /	ASCM	No.		Name of Abater	nent Contractor (S	9)					
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Project Manager for	Monitoring Firm	Te	lephor	ne No.		Telephone No.		License No.			- 40000		
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#### Carb of New Justoy NOTE TRACTION OF AGGISTROS AGAZISMENT (Pursuant to NAAC SECTION 12-120)

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Agencies Notified	Type Notification		18	Street Ac	Idress	OR POR	ATE	PLA	CE	,	- 21.11		hammer	+
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Name of Monitoring Firm	Hired by Building O	wner (8)		ASCM	No.		of Abate lac Cor		ntractor (9) Inc.					
Street Address			************				Address Lowell	Road				-		
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Other – Describe:						Had	kensac	k, NJ 0	7606	eros e suspisiones e				
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OUTSIDE W				R	-	2/WATE	-		15,00					
THROUGHOUT		<u></u>	1 11	X		Obales		(5)		5.5	X			
Name of Registered War ENVIIZon IN ENTA		w47" ,	WE H	JDEP W auler ID グターフ	No.	Subic Yards of Waste			Registered UERVA		0011	F1 L1	. 4	- C
City, State  FLANCERS, IL	J 07836				E	Sisposal Date	200		iesource	01	410	44	683	
Completed by R. McDonald		Title Pres	ident			Signatur	2 m	Yardel	/	Da	te /	1/2	_	

		1,		IO NJAC							5	W	E	In
Date of Notification (1) 8/9/12		Name o	f Building A	Owner/ ひ.しら7	Operator Ruc	(2) T10:	U- 111	£ 7	IME FI	Th	iEs_	S		
Agencies Notified Type Notification  IN EPA Initial	1							PLA			, 4			
DEP Amended Amendmen	nt #		City, Sta	ate, Zip Co	ode ISSE/	υ.,	MU	53	12	ASBESTO	5 004	Tavas	2	İ
Emergency justification Cancellatio	)		Name o	f Contact						ephone Nun				Antogram and
Cancellatio		1		ILITY INFO	OPSSAT	TON			-					
Name of Facility Where Abatement is Takin FORMER BMW HEAD	ng Place (	3) TERS	-	LETT HEF	ORWAI	ION	teastes	of Facility (	29 <b>6</b> ) 1163				-	-
Street Address  1 BMW PLAZA								School (K-1 Subchapter Other (i.e. p	8 (Oth	er than K-12 & commercia	i) al buil	dings	, hom	es,
City (5) MONTUALE							Squa	etc.) ire Feet O, OUJ	1	Floors	E	Bldg. /	17.0	
County (6) BERGEN		T		Code (7) USE ONLY	)		Curre	ent Use (Pric	or if bei	ng demolish	ed)			
Name of Monitoring Firm Hired by Building	Owner (8)		ASCN	A No.			of Aba	Itement Cor	tractor			- Henry		
Street Address			1			Street	Addre							
City, State, Zip Code								ip Code k, N.J. 07	452					
Project Manager for Monitoring Firm		Telephone No. Teleph		none No. License No. 00156										
Start Date (10) 8/22/12	Schedul	ed Con	pletion	Date (11)		Name	of OSI	HA Monitor	ntal S		<u></u>			
Occupancy Status During Abatement (Che	ck Only Or					Street			77601	0111000111				
Facility Closed/Vacated During Entire Abatement Performed Outside of Non	Period of	Abaten	ent					or Street						
Other – Describe:								ick, NJ 07	7606					
Scope of Work (Check All That Apply)											-			
≥3 sf or ≥3 if ≥160 sf or ≥260 if	armony.	Renova Demolit				X	Mir Glo	I Containme ni-Enclosure ovebag Prod n-Exempted	edure				0	
	ls	Locati	on						17200	THORT HELD	1		ement	$\neg \neg$
Location of		Normalled Sole	•			scription				34 F.		Ту	pe	
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Ma	intenar todial S (12)	ice/		thermal surfa	taining M I systems cing, VA niscellan	s insula T, or		(S	mount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A							-			Ö	
OFFICE AREA			X			+ M	AST	10		400 SF	X		grace (p.a.)	
Roof			X		451+1					350SF	X			
OUTSIDE WALL		<u> </u>	X			JA762	PROO			oeu SA	X			
THROUGHOUT			×			25.00		(5)		180 S.F	X			
Name of Registered Waste Hauler Rovic Transport		H	JDEP W auler ID 0785		of Wa	Yards ste		Name of F	and the same	red Landfill Iehem La	ndfill	Cor	p.	
City, State Riverdale, New Jersey 07457					Dispos	sal Date		City, State Bethleh		A 18015				
Completed by R. McDonald	Title Pres	ident			-	Signature		Fall	,	Date	9/9/	/)		
	1				100	V	1.	0		0	1 1	1	-	

								C	heck # 1	004		
Date of Notification (	(1) August 29, 20	112			of Building O	Owner / Operator (	(2)	HHE G	15/1	Βĝ		7
Agencies Notified  EPA  DEP	Type Notifica	THE RESERVE AND ADDRESS OF THE PERSON NAMED IN		Street A	Address k Place			IIII SEP	• 4	1./		
⊠por ⊠por		ended			tate & Zip Co wood, NJ 07		L,	A Juli Pri	N. Control			a manufacture of the second
DCA	200233	endment #_ cellation	= = = = = = = = = = = = = = = = = = = =	Name o	of Contact lappi			The same of the sa	Telephor	ne Nu	mber	
				FAC	CILITY IN	FORMATION	***************************************				-	
Name of Facility Wh Bank of America	ere Abatement	is Taking F	Place (3)			Type of Facil						
Street Address 21 Park Place		31		2		Other (		n K-12) commercial build			tc.)	
City (5)						Square Feet 50,00	00 2	+ basement	Bldg. Age	49	_	
Englewood						Current Use (	(Prior if being der	nolished)				
County (6) Bergen		US	ounty Code	(7)								
Name of Monitoring Environmental Tes Street Address			mer (8)		ASCM No.	Name of Aba Synatech, In Street Addres		or (9)	30 (2)			
One Mall Drive, Sui City, State & Zip Coo		2.10	70			829 Radio Re City, State &	load					
Cherry Hill, NJ 080	02					Little Egg Ha	arbor, NJ 08087					
Project Manager for Howard Zenobi			856	lephone N 6-482-131	11	Telephone No 609-296-6916	6	License N	Number 0081	7		
Scheduled Start Date September 8		Scheduled	d Completio Septemi	on Date (1 ber 24, 20		Name of OSI Synatech, In	(1) 1				Methodistasi	
Occupancy Status D Facility Clos	ouring Abateme sed/Vacated Du	uring Entire	only one) Period of A	Abatemen	nt	Street Addres 829 Radio Re	ss					
weekends -	Performed Out - Sept. 8/9; Se scribe: cupied During A	ept. 15/16 a			nsecutive	City, State &	Zip Code arbor, NJ 08087					
Scope of Work (Che	ck all that apply	y)					l Full Containmen	· · · · · · · · · · · · · · · · · · ·				
				Renovatio Demolition			Mini-Enclosure Glovebag Proce	nt with Negative P edure (*) and Non-Friabl		re		
Asbestos-Conta	cation of aining Material E ABATED	(ACM)	Solely by	on Normal y Mainten dial Staff?	ance or	Descript Asbestos-Co Material (	ontaining	Amount (Spec		ateme	ent T	уре
IN	I Facility (13)		Yes	No	N/A	(i.e., thermal insulation, surf or other misco	facing, VAT		Removal	Repair	Encapsulate	Enclosure
Fir	rst Floor				Х	Vinyl Tile an	nd Mastic	3,000 SF	X			
		8.18.50					-					
Name of Registered	Waste Hauler		NJDEP W Hauler ID		Cubic Yard	ds of Waste	Name of Regist	10				
City. State					Disposal D	ate	City, State					
Little Egg Harbor, N Completed By	IJ 08087	Title			Septembe Signature	er 25, 2012	Morrisville, PA	<b>A</b> Date				
Diane Aloia		Executiv	ve Adminis	strator	1/1/2	i All.		August 29, 2012				

#### NOTIFICATION OF ASBESTOS ABATEMENT

<u> </u>									DEC	G I	11/7	E I	West of Street
Date of Notification (1)	August 29, 2012	2			Name of	Building (	Owner/Ope Afford	ator (2) able Renovation	Na -	20.	57	77	
Agencies Notified [ x ] EPA	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Notifi			Street Ad	ldress	900 W	ellington Avenue	3 1 8 1	. 4			
[ ] DEP	Amer	ndment	otification # (including		City, Stat	te, Zip Coo	le Toms	River, New Jerse	ر y 08757 <sup>ASBES</sup> 10 Lk	S CONT ENSING	Hul &		Cheristic man
[x] DOH [ ] DCA	A 00 00 00	ication) ellation			Name of	Contact Nick C	Ortense		Telephone Number		- Andrews		central)
t 1 box				FAC	LILITY R	VFORM	ATION						
Name of Facility Where Re	Abatement is Taking esidence	g Place	(3)	1110		11 011.11		Type of Facility (4	School (k-12) Subchapter 8 (o	har tha	a l- 12\		
Street Address	East Shellway				Помучения			[x]	Other (i.e., privalent of the homes, etc.)	ate & co	mmer	cial bui	ldings,
City		Cour	nty (6)		County Co (STATE U	ode (7) JSE ONLY	0	Square feet 700 sf	# of Floors		g. Age	50	
Lavallette		Oce						Current Use (Prior Reside	ence	i)			
Name of Monitoring Firm	50	Owner	(8)		ASCM No	D.	Name of	Abatement Contracto Guard	or (9). ian Contracting	Inc.			
Street Address	<u> </u>						Street Ad	dress	Route 9, Unit 61				
City, State, Zip Code							City, Stat	e, Zip Code	River, New Jers		755-1	271	
Project Manager for Mon	itoring Firm		Telephone 1	Number			Telephon 732-349	e Number	License 1 00624				
Scheduled Start Date (10 9/12/12			Scheduled 9/14/1		tion Date (1	1)		OSHA Monitor	.L. Analytical				
Occupancy Status During				od of Al	patement		Street Ad	dress	Stelton Road				
[ ] Ab	atement Performed		E				City, Stat	e, Zip Code	N. T.	000	0.5.4		
[ ] 0"								- 14 - 14 - 14 - 14 - 14 - 14 - 14 - 14	away, New Jers				
Scope of Work (Check al	Il that apply)						[]	Full Containmer Mini-Enclosure	nt with Negative Pr	essure			
[ ] >3	sf or ≥3 lf		[ ]	Renova	ation			Glovebag Proce	dure				
[x] ≥1	60 sf or ≥260 lf	100	[x]	Demol	ition		[x]	Non-Exempted (	(*) and Non-Friable	Proced	ure		
					T				T	Aba	tement	Туре	
		S STORES	Is Location				Descriptio			R	R	E	E
Location Asbestos-Containing			Normally us Solely by				estos-Con laterial (A		Amount (Specify SF	E	E	N C	N C
TO BE AB	ATED	Mai	ntenance/Cu			(i.e.	, thermal s	ystems	or LF)	M O	A	A	L
in facili	ty		Staff		100	insu	lation, sur			v	I R	PS	OS
(13)			(12)			othe	VAT, o er miscella			A	l K	U	U
		YES	S NO	N/A					E	L		L E	R E
Exterior			X		Asbes	tos sidin	g		650 sf	X			
					1			-					-
					-					+-	-	-	-
Name of Registered Wast	te Hauler		NJDEP Wast		ID No.	Cubic Ya	rds of Wast		tered Landfill		1	L	1
Guardian C	ontracting, Inc.		20	0223	4	3	1 2	T.R.R.F.		10			
City, State Toms River	. New Jersev			Dispo 9/17/	sal Date /12		City, Sta	te wn, Pennsylvani	a /				
			Signatu	re	bol	1/2	1/	Date 8/29	9/201:	2			

#### NOTIFICATION OF ASBESTOS ABATEMENT

Date of Notification (1) August 29, 2012		Name of Building		rator (2) lable Renovations	NECE	A W	/据	i In	ন্ত্ৰ	
[ [ ]	tion Notification Ided Notification		Street Address	900 W	ellington Avenue	SHP ,	4 20	12		The state of the s
[x] DOL Amen	ded Notification dment # gency (including		City, State, Zip Co		River, New Jerse	y 08757			france i	And the publishment
[x ] DOH justifi	cation)		Name of Contact Nick	Ortense	- I	Telephone Number	odkikol Ruses	6	to transition of	re(reco
		FAC	ILITY INFORM	IATION		THE COUNTY OF THE PARTY				
Name of Facility Where Abatement is Taking Residence	Place (3)				Type of Facility (4)	School (k-12)				2.41
Street Address 113 West Cove Wa	ay				[x]	Subchapter 8 (of Other (i.e., priva homes, etc.)			l buil	dings,
City	County (6)		County Code (7) (STATE USE ONL	.Y)	Square feet 700 sf	# of Floors	Bldg,	Age 60		
Lavallette	Ocean				Current Use (Prior Reside		)			F
Name of Monitoring Firm Hired by Building N/A	Owner (8)		ASCM No.	Name of	Abatement Contracto Guard	or (9) ian Contracting,	Inc.	Vi		
Street Address				Street Ac		0 11 3 61				
City, State, Zip Code				City, Sta	te, Zip Code	Route 9, Unit 61				
Project Manager for Monitoring Firm	Telephone N	Jumber				River, New Jers		55-12	71	
Project Manager for Monitoring Pilm	reteptione	vannoer	10000	732-34		00624	···········			
Scheduled Start Date (10) 9/12/12	Scheduled 0 9/14/12		on Date (11)	Name of	OSHA Monitor E.M.S	L. Analytical				
Occupancy Status During Abatement (Check  [ x ] Facility Closed/Vacate  [ ] Abatement Performed (	d During Entire Perio			City, Sta	1056 S te, Zip Code	Stelton Road	ey 0885	4		
Scope of Work (Check all that apply)				[ ]	Full Containmer Mini-Enclosure	nt with Negative Pre	ssure			
[ ] >3 sf or ≥3 lf [ x ] ≥160 sf or ≥260 lf	[ x ]	Renovat Demolit		[x]	Glovebag Procee	dure *) and Non-Friable	Procedure	t		
							Abater	nent Ty	/pe	
Location of Asbestos-Containing Material (ACM)  TO BE ABATED in facility (13)	Is Location Normally use Solely by Maintenance/Cus Staff (12) YES NO	ed	As I (i.e ins	Description bestos-Con Material (A ., thermal sulution, sur VAT, oner miscella	taining CM) systems rfacing, r	Amount (Specify SF or LF)	E M O	E P A I R	E N C A P S U L	E N C L O S U R E
Exterior	X		Asbestos sidii	ng		650 sf	X			
								_		
							-	+		
Name of Registered Waste Hauler	NJDEP Waste			ards of Wast		ered Landfill				
Guardian Contracting, Inc.		Disposa		City, Sta						
Toms River, New Jersey Completed by (Print or Type) Nicholas Fernicola	Title Project Manage	9/17/1	Signature .	Tullyto	own, Pennsylvani	a	Date 8/29/2	2012		
INICHOIAS FEITICOIA			for asbestos licer	asure exem	pted activities.		3,2,71	-012		

#### NOTIFICATION OF ASBESTOS ABATEMENT

Date of Notification (1) August 29, 201	Name o	f Building (		rator (2) lable Renovations	MEG	EI	AV.	- 個/			
[ ] DEP [ ] Ame [x ] DOL Ame	al Notification nded Notification ndment #		Street A	ddress	e	ellington Avenue	953	<del>-</del> 4	2012		A CONTRACTOR OF THE PERSON OF
[x ] DOH justin	rgency (including fication) cellation		Name o	f Contact Nick C			Telephone Number	S CDN	THUL &	- 1	- 1
[ ] bex		EAC	II ITV I	NFORM.	ATION			Target		Advis de la constitución	1
Name of Facility Where Abatement is Takin Residence	g Place (3)	FAC	ILLI	INFORM	ATION	Type of Facility (4)	School (k-12)				
Street Address 222 Gull Lane						[ ] [x]	Subchapter 8 (of Other (i.e., priva homes, etc.)			cial bui	ldings,
City	County (6)		County C (STATE	Code (7) USE ONLY	)	Square feet 700 sf	# of Floors	Bldg	g. Age	50	
Lavallette	Ocean					Current Use (Prior i Reside	nce	)			
Name of Monitoring Firm Hired by Building N/A	Owner (8)		ASCM N	o.			r (9) an Contracting,	Inc.			
Street Address					Street Ad		oute 9, Unit 61				
City, State, Zip Code	in the second second				City, Stat	e, Zip Code	River, New Jers		755-1	271	
Project Manager for Monitoring Firm	Telepho	ne Number			Telephon 732-349	e Number	License N 00624			271	
Scheduled Start Date (10) 9/12/12	Schedule 9/14	ed Completi 1/12	on Date (	11)		OSHA Monitor	L. Analytical				
Occupancy Status During Abatement (Check  [ x ] Facility Closed/Vacate  [ ] Abatement Performed  [ ] Other – Describe	ed During Entire P				Street Ad City, Stat	1056 S e, Zip Code	telton Road way, New Jerse	ev 088	54		
Scope of Work (Check all that apply) $ \begin{bmatrix}         ] >3 \text{ sf or } \ge 3 \text{ lf} \\         [x] \ge 160 \text{ sf or } \ge 260 \text{ lf} $	[ ] [x]	Renova Demolit			[ ] [ ] [x]	Full Containmen Mini-Enclosure Glovebag Proced	t with Negative Pre	ssure			
								Abat	ement	Туре	
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> in facility  (13)	Is Locat Normally Solely Maintenance/ Staff (12) YES NO	by Custodial		Asbo M (i.e., insul	description estos-Contacterial (Acthermal station, sur VAT, or miscellar	taining CM) ystems facing,	Amount (Specify SF or LF)	R E M O V A L	R E P A I R	E N C A P S U L E	E N C L O S U R E
Exterior	X		Asbes	tos siding	,		650 sf	X			
	interest of the second						1				
	CAPE (COL)		2.1.7	er variet.	Tell of						
Name of Registered Waste Hauler Guardian Contracting, Inc.		aste Hauler 20223		Cubic Yar		T.R.R.F.	ered Landfill		11		
City, State Toms River, New Jersey Completed by (Print or Type)	Title	Dispos: 9/17/1	12	F0	City, Star Tullyto	te wn, Pennsylvania	1	Date	- 11		
Nicholas Fernicola	Project Mana		Signatu	1001	101	iled			/2012	2	

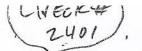
Chetellas

Date of Notification (1)  8-29-2012  Name of Building Owner/Operator (2)  Diane Driscoll  2012 or	1000 000 0000	-		May 1
Agencies Notified Type Notification Street Address	P-4 PH	1:5	**	
EPA Initial Initial City, State, Zip Code	TOS con	îgn	T	
DEP City, State, Zip Code Amendment # Parsippany, NJ 07054	TOS CON ICENSIN	C	Ĺ.	
Emergency (including	hone Number		~	
DOH justification) Name of Contact Telep	ione ivamber			
FACILITY INFORMATION	-			
Name of Facility Where Abatement is Taking Place (3)  Type of Facility (4)				
House School (K-12)				
Street Address Subchapter 8 (Other	than K-12)			- 68
228 Pleasant Hill Road	ommercial build	dings,	home	es,
City (5) Square Feet # of F	oors E	Bldg. A	ae	
Chester 1500 2	Section 1985	50+	J	
County (6) County Code (7) Current Use (Prior if being	demolished)	-		-
Morris (STATE USE ONLY) House				
Name of Monitoring Firm Hired by Building Owner (8)  ASCM No.  Name of Abatement Contractor (9	)		v	
n/a Jadar Contracting, LLC				
Street Address Street Address				
n/a 22 Troy Lane				
City, State, Zip Code City, State, Zip Code			-	
n/a Lincoln Park, NJ 07035				
Project Manager for Monitoring Firm Telephone No. Telephone No. L	icense No.	T		
n/a n/a 973-706-7950 (	1088			
Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor				
9-10-2012 9-11-2012 Jadar Contracting, LLC	- N			
Occupancy Status During Abatement (Check Only One) Street Address				
Facility Closed/Vacated During Entire Period of Abatement 22 Troy Lane				
Abatement Performed Outside of Normal Facility Hours				
Other – Describe: 9 am - 5 pm Lincoln Park, NJ 07035				
Scope of Work (Check All That Apply)				
≥3 sf or ≥3 lf	egative Pressu	re		
≥160 sf or ≥260 lf Demolition X Mini-Enclosure				
Glovebag Procedure Non-Exempted (*) and N	Ion-Friable Pro	cedure		
Is Location		Abate		t
Normally		Тур		
Ashestos-Containing Material (ACM)  Used Solely by  Ashestos Containing Material (ACM)	unt		m	
TO BE ABATED Maintenance/ (i.e. thermal systems insulation, (Spe		R	ince	E
In Facility (12) surfacing, VAT, or SF or other miscellaneous)	cify Remova	Repair	psu	Enclosure
	\alpha	7	Encapsulate	ure .
Yes No N/A				
Basement Asbestos Pipe Insulation 68	LF X	1		en e
				-
			$\dashv$	
Name of Registered Waste Hauler  NJDEP Waste  Cubic Yards  Name of Registered  Hauler ID No.  of Waste	i Landfill			
Jadar Contracting, LLC 0033137 TBD GROWS Land	ill			
City, State Disposal Date City, State	, m+1	in the second	1	
Lincoln Park, NJ 07035 TBD Morrisville PA	19067			
Lincoln Fair, No 01000   Wordsville PA				
Completed by Title Signature	Date			

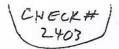
Check	NO	(Pur	suant to	NJAC 8:	60 and 12:12	0)	CHEC	46.	114	38			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Date of Notification (1) 8/15/12 & 8/3///3	To Service To			Building Ov w Lennor	wner/Operato n Trust	r (2)		Alexander	FETY	ED	l le i		
Agencies Notified Type Notification		70	Robe	dress rt Drive			2012	SEP.	-4 PM	1.5	~		
EPA Initial Amended Amendment #		C		e, Zip Cod	e		458	ESTO	S CON	Tua	-		
Emergency (ir justification)  DCA  Emergency (ir justification)  Cancellation	cluding		ame of Claude	Contact Bennett			6	Tele	phone Nu	mber	`		
	51 (8)		FACIL	ITY INFO	RMATION	ΤT	ype of Facility (	4)		-			
Name of Facility Where Abatement is Taking house	Place (3)						School (K-1	2)		2)			
Street Address 1 Robert Drive							Subchapter Other (i.e. p	orivate 8	commerc	z) ial build	ings,	home	s,
City (5) Chatham						221	Square Feet 000	# of 2	Floors	BI 50	dg. A	ge	
County (6) Morris		(S	ounty C	ode (7) SE ONLY)		0	Current Use (Pri	or if bei	ng demolis	hed)			
Name of Monitoring Firm Hired by Building O	wner (8)		ASCM	No.	Nam	e of	Abatement Con	ntractor I Serv	(9) ices, LL(	3			
Street Address					Stree	Street Address 4 E Gate Drive, PO Box 483							
City, State, Zip Code		City				ty, State, Zip Code lenwood, NJ 07418							
Project Manager for Monitoring Firm	Telephone No. Telep			pho	ne No. 33-8500		License I	No.					
Otali Bato (10)	Scheduled 9/17/12	Com	pletion [	Date (11)		Name of OSHA Monitor							
9/3/12 Occupancy Status During Abatement (Check		)		-	Stre	et A	ddress			1			
Facility Closed/Vacated During Entire P   Abatement Performed Outside of Norm   Other – Describe:	eriod of Ab	atem	ent		City	, Sta	ite, Zip Code						
Scope of Work (Check All That Apply)													
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	novat				×	Full Containm Mini-Enclosus Glovebag Pro	re ocedure					
	ls L	.ocatio	on				Non-Exempte	ed (*) an	d Non-File	DIE PIO	Abat	ement pe	
Location of	No Used	ormall Solel	*	Achart	Descripti				mount		T .	<u> </u>	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Custo	(12)	taff?		thermal syste surfacing,	ontaining Material (ACM) nal systems insulation, rfacing, VAT, or er miscellaneous)			Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
basement	Yes	No	N/A X	F2.00	RTILE	-		730	O SF	x			
pasement				FUN	ic I tec			10	<u> </u>				
							CONTRACTOR AND TO SE				-	-	
Name of Registered Waste Hauler			JDEP W		Cubic Yards	S	11/2/08/09/09/09/09	of the second	ered Land	fill .			L
Freehold Cartage			auler ID 5939	NO.	of Waste 10		GROV		andfill.				
City, State Freehold, NJ	7010	74		1. 42 %	Disposal Da TBD	ate	City, Sta Morris		PA	1			
Completed by Andrew Scott Higgins  Title President				H 2 1 700	Signat	ure	De		100	Date 3/15/1:	2	3/3	17/1

() m	524					
RE	1,4	D	4	1	June .	13

Date of Notification (1) 08/28/12 CK: 2229 \$200			Name of Helen		Owner/Operate	or	(2)	20.	12 SED			12	345	
Agencies Notified Type Notification		1/6	Street Ad 800 Lir		venue, Apt	10	3	<u> </u>	201	[4	f	11 1	: `	5
EPA Initial Amended Amendment				te, Zip Co rd, New	ode / Jersey 070	01	6	.,	12 SEP	CEI.	UU [3]	W.C.	RO	
☐ Emergency justification) ☐ DCA ☐ Cancellation		188	Name of Helen	Contact Doerr				Tele	ephone I	Numb	er	* 🔾	. (	
			FACII	LITY INFO	ORMATION									
Name of Facility Where Abatement is Takir Residence Street Address	g Place (3)	)				-	Type of Facility (4  School (K-12  Subchapter 8	:) 3 (Othe						
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Name of Monitoring Firm Hired by Building	Owner (8)		ASCM	1 No.			of Abatement Cont Corporation	ractor	(9)					
Street Address							Address McBride Avenue	e						
City, State, Zip Code		1					tate, Zip Code dland Park, Nev	v Jer	sey 07	424				
Project Manager for Monitoring Firm			Telephor	ne No.			one No. 225-8400		License 01104					
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Scope of Work (Check All That Apply)			***********		-   011	101	n, New Jersey	3708	<u>.                                    </u>					
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City, State Woodland Park, New Jersey 07424				Disposal Date 09/10/12			\$3000000000000000000000000000000000000			- 4				
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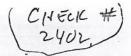


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Amended Amendment #  Emergency (including)		SING					
DOH justification) Name of Contact	Telephone Number	1					
FACILITY INFO	RMATION						
Name of Facility Where Abarement is Taking Place (3)  CESTDENCE  Street Address  3 5, HUNTINGTON XUE	Type of Facility (4)  School (K-12) Subchapter 8 (Other than K-12) Other (i.e., private & commercial build	ings,					
CII, (5) MANGATE	Square Feet # of Floors Bid	ig Age					
County (6) ATLANTIC County Code (7) USE ONLY)	(STATE Current Use (Prior if being demolished)						
Name of Monitoring Firm Hired by Building Owner ASCM No. No. (c)	lame of Abatement Contractor (9)  LEM CD INC.						
Street Address S	reel Address 3695, SPRULE DUE.	A THE PROPERTY AND ADDRESS OF THE PARTY OF T					
City: State, Zip Code	iry, State, Zip Code  Maple SHADE, N.J. Odo	2_5 ,					
Project Manager for Monitoring Firm T <sub>e</sub> lephone No T	856-779-0472   License No						
Start Date (10) Scheduled Completion Date (11) N 9 / 17 / 12 9 / 24 / 12	ame of OSHA Monitor  JOSEPH KLEHM						
Decupancy Status During Abatement (Check only one)  S Facility Closed Vacated During Entire Period of Abatement	369 S, Spruce Luc.						
	MAPLE SHODE, N. J. U	18052					
Scope of Work (Check all that apply)  ☐ 25 st or ≥3 !! ☐ Renovation ☐ Demolition	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure	Ball Manager of the cold of th					
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ima of Earling When	re Abatement is Taking I	Place (3)								
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Agencies Notified	Type Notification			Street Ad 630 Fra	<sub>dress</sub> anklin B	lvd				.v.or	STOS C	n LEY	'DO		
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□ DOH	Emergency (in justification)		T	Name of		0,1,1,1				Tele	phone Num	ber			
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Franklin Township			- 1	0 1 0	- d- (7)			The same of the same of		0200	ng demolish		0.		
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Project Manager for Mor	nitoring Firm			Telephon			Telepho				License No	).			
Clive Williams				732-27	6-9580		973-7	06-79	950		01088				
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Cheps # 1022 Cheps # 1022

				F. D. Taller Overall Operate	r (2)	4012 51	5 .
Date of Notification (1)	8/29/12		Name of	f Building Owner/Operato	4. Wall	- OLI	-4 PM 1:50
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□ EPA	Initial		10 U	7 Codal /	1 / UCI I Com		FENSTAL HOL
D.DEP	Amended		City, Sta	ate, Zip Code	AIV	18914	T. WING
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	☐ Emergency (included	ling	Name o	F Contact / /	/11	Telephone Num	iber
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DCA	☐ Cancellation		1130	CIPY II-LM	14	1 Marie Marie	
			FACIL	ITY INFÓRMATION			
Name of Facility Where	Abatement is Taking P	ace (3)		54	Type of Facility		
	1				☐ School (K-12 ☐ Subchapter	8 (Other than K-12	2)
Street Address	Il ist Diese	0.19			Other (i.e. pr	ivate & commercia	at buildings,
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Name of Monitoring Firm	n Hirea by building Owi	lei Ao	OWI INO.	NOVAT	inch in		
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Street Address	i			Street Address	1 1	CO Kx	814
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City, State, Zip Code				City, Otalic, Zip	(9) A		
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Project Manager for Mo	nitoring Firm	Telep	phone No.	Telephone No.	28-4K00	20806	
	Scheduled (	Completion	Date (11)	Name of OSH	10 / 10	•	
Start Date (10)	Sureduied		F	Nou	atech	INC	
Occupancy Status Durin	ng Abatement (Check o	nly one)		Street Address	20x DIV		
Facility Closed/Vacat	ted During Entire Period	of Abatem	ent ·	City, State, Zip	Code		207
Abatement Performe  Other – Describe:	d Outside of Normal Fa	cility Hours		0110 1	BRIDGE	NO. C	1885+
Scope of Work (Check	all that apply)			Q Fu	II Containment wit	h Negative Press	ure
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2 ≥ 3 sf or ≥ 3 lf			Dem Dem	olition D Gl	ovebag Procedure		
160 sf or ≥ 260 lf				√D No	n-Exempted (*) a	nd Non-Friable Pr	Abatement
		Inlo	cation				Type
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Name of Registered Wa	aste Hauler	-0319241009	P Waste H		Name of Reg	Jistereu Larionii	er care en
And the second s		ID No		Waste	G.R.C	1.(0.5	~
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City, State	01 110	00	857	11/0N	21102205	CUL	(11.
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Date of Notification (1) 8/29/2012		Name of Monta	Building omery S	Owner/O Senior I	perator (2) Living Ce	enter 0/2	OFfican R	enewal		ciat	es,	LP			
Agencies Notified	Type Notification			Street A	ddress Stow F			450	Corne	PM	: 20				
EPA DEP DOL	Amended Amendment Emergency		_		te, Zip Co n, NJ 0			Č.	LICEN Te	SING	90 <u>L</u>				
DOH DCA	justification) Cancellation			Name of Jack C	Curran	0 (6			Te	ephone l	Number				
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City (5) Jersey City							1000	quare Fee	et # c	f Floors		Bld 62	g. A	ge	
County (6) Hudson				County C	Code (7) JSE ONLY	)		urrent Use /acant	e (Prior if be	ing demo	olished)				
Name of Monitoring Firm PT Consultants, Inc		Owner (8)		ASCM	1 No.		Incinia	Contrac	nt Contractor cting, Inc.	(9)				11 2	5 15
Street Address 629 Creek Road								Clifton A	venue, Ur	nit 365					Nation B
City, State, Zip Code Bellmawr, NJ 08031				74	- g		Clifton	e, Zip Coo , NJ 070							
Project Manager for Monit Denis Cummings	toring Firm			Telephor 856-25	nė No. 51-9980	)	Telephon 973-45	e No. 50-9500		Licens 0103					
Start Date (10) 9/12/2012		Schedule 10/24/2		mpletion [	Date (11)	8		OSHA Mo Contrac	onitor cting, Inc.						
Occupancy Status During    X   Facility Closed/Vaca   Abatement Performe   Other – Describe:	ted During Entire	Period of A	Abate	ment rs			City, Stat	Clifton Av e, Zip Coo		nit 365					
Scope of Work (Check All	That Apply)						Clifton	, NJ 070	)12		877.				
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Name of Registered Waste Hauler Atlantic Carting, LLC							Yards	Nan	Name of Registered Lar			ill (	Cor	pora	tior
City, State Wayne, NJ				Disposal Date TBD			al Date	Date City, State Bethlehem, PA							
Completed by Title Sean Zoric Preside				t Sout	6155 N T	Signature Date 8/29/2012				12.17					

RECEIVEDS

#### Stato of New Jorsey NOTIFICATION OF ASDESTOS ABATEMENT (Pursuant to MJAC 8:68 and 12:120)

2012 SEP -4 PM\_1: &S

Date of Florification (1)	0/ 11/10		Namo	of Buildin	g Owner/Or trafer	131	74. \$ 12. 6 ±				
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### State of Now Jordoy MORRAGON OF ABARTOR STATEMENT

(Parsnaut to DEAC R:60 and 12:120)

Date of Notification (1)	24/12	Name of Duildin	ng Owner/Operator (	CCARRE	LICENSING	ROL	
· · · · · · · · · · · · · · · · · · ·	Modification	Street Address	VARSIT	y AVZ			
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Name of Eacility Where Abate	ment is Taking Place (3)		n company on the con-	School (K-12		)	
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marcial		L ASCM No.	T Name of Abater	L' Contractor (9		anger a	9
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City, State, Zin Code			Cours	MEEK N.	CONUL License No.		
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Start Date (10)	G - F	5+12	ACC I	M. SINDATTO	8' 642 EN	٠	
Occupancy Status During Al	etement (Check only o	ne)	Street Address				
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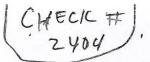
#### State of New Jerroy NOTIFICATION OF ASDESTOS ASATEMENT (Personne to NJAC 8:68 and 12:130)

Date of Floriscation (1)			Name of Building Owner/Op scaler (2)											
January San Boundary			ALL 3-BS CONSTRUCTION BEST OF ROLL STORY ROLL											
Agencies Notified	Type Notification La taitin		2.07	Homilton	N DR.	tone of the state	- 1 t ) j	156	* 1185** *g=, 1 =65*					
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County (6) MENMU	.711	98 July 2000 - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	County Code USE OMLY)	y Code (7) (STATE Current (lao (Char li heling de published)										
Name of Monttoning Flim	Hirad by Building	Owner	ASCM No.	Mame of Abaten	and Contencior	9)								
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Project Manager for Mon	lodpa Plan · ·	Tale	none No.   Telephone No.   Ticonse No.											
Start Date (10)	iduled Comple	elion Date (1)) I Name of CBHA Number												
9-11-12		-18-1	12 ACT ENSULATION CO JAM											
Occupancy Status During	Section Section	or northern Branch on Life and Art of the State	Sugal Address											
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Destament Performed Other - Describe:			Chy, Shate, Zip Cods  CDUTT NOCCO N.S. P. 22.2.2.											
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#### NOTIFICATION OF ASBESTOS ABATEMENT

Date of Notification (1) 8/29/2012					Name of Building Owner/Operator (2)  A to Z Site Contractors, Inc.											
Agencies Notified  [ x ] EPA	X ] EPA				Street Address 940 Park Avenue 2012 SEP -4 Pii 1:49											
[x] DOL					City, State, Zip Code  Lakewood, New Jersey 08701  City, State, Zip Code  Lakewood, New Jersey 08701  LICENSING										DL.	
[x] DOH [] DCA					Name of Contact Irving Perlstein					Telephone Number						
				FACI	LITY I	NFORM	ATION									
	dence	Place (3)						Ty	pe of Facility (4 [ ]	School (I Subchap	9 13	ner than	k-12)			
Street Address 363	Carasaljo Driv	e					* 12		[x]	Other (i. homes, e	etc.)			ial buil	dings,	
City					County C STATE	ode (7) USE ONLY	Current Use (Prior if being demolished)				Bldg Age 60					
Name of Monitoring Firm	Hired by Building				ASCM N	o.	Name of	Abat		Residence t Contractor (9)						
N/A					0		Ct	11		lian Contra	acting,	Inc.				
Street Address					0,,			reet Address 1889 Route 9, Unit 61								
City, State, Zip Code								City, State, Zip Code Toms River, New Jersey 08755-1271								
Project Manager for Monitoring Firm Telephone Numb				Number			Telephone Number         License Nu           732-349-9932         00624						umber			
Scheduled Start Date (10)         Scheduled Compl           9/11/12         9/12/12					E.M.S.L. Analytical											
[ ] Abat	Abatement (Check lity Closed/Vacate ement Performed ( er – Describe	d During	Entire Peri				Street A		1056 ip Code	Stelton Ro		y 088	54	-	***************************************	
L 1	that apply)  for $\geq 3$ If 0 sf or $\geq 260$ If		[ ] [ x]	Renovat Demoliti			[ ] [ ] [x]		Full Containmon Mini-Enclosure Glovebag Proc Non-Exempted	edure			ıre			
						Abatement							Туре			
Location of Asbestos-Containing Material (ACM)  TO BE ABATED in facility (13)  Is Location Normally used Solely by Maintenance/Custodia Staff (12)  YES NO N/A					insulation, s VAT other misce			ntain ACM syste irfaci or	ing ) ems ng,	Amount (Specify SF or LF)		R E M O V A L	R E P A I R	E N C A P S U L E	E N C L O S U R E	
Exterior	Exterior X				Asbe	Asbestos siding				1200	sf	X				
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				- in-							1 - 22		-		+	
Name of Registered Waste Hauler NJDEP Waste Hau					ID No.	Cubic Ya	rds of Was	ste	Name of Regi	stered Landf	fill .					
orty, orace				Disposa 9/13/1			City, S		, Pennsylva	nia	1		Part I			
Toms River, New Jersey 9/1 Completed by (Print or Type) Title Nicholas Fernicola Project Manager					Signature   Date   8/29/2012											
					for asb	estos licen	sure exer	npted	d activities.	,						

Date of Notification (1)			Name of Building Owner/Opera EXXON Mobile (a)(b)()			7	2012	St.	11					
8-18-10				00	17/11 c	KI VILLA	17019	LP.	·L	Du				
Agencies Notified Type Notification		Street Ac	7 / 1/2	2027 14	Am S	treet.	4320		U	17	lit	8		
D EPA Initial S Amended	i Gladi	20ity Stat	A Aurilian Chri	da - M	377-1 50	-	6	710	8 0	1017	**	-		
-X. DOL Amendment #	F1.27	att.	的产	- 03	149	2012 SEPTE PH 1:48  4 SHESTOS CONTROL  Telephone Number								
© Emergency (in justification)	cluding	Name of	Contact			akanakan I	Telephone Number							
CI DCA Cancellation	List of Contact  Fine of Contact  Exic W Errico  Contact  Cric W Errico  Contact  Cric W Errico													
			ITY INFO							1				
Name of Facility Where Abatement is Taking I	77	Dlan	1	ne of Facility (4										
FORMUR BOYERSE LABORATION Manufacturing Pla						School (K-12 Subchapter I		n K-12)						
A. C.			Other (i.e. pr				ings.	hom	25					
City (5)	calla i stransi i son	Sai	etc.) Jare Feet	# of Floor	s	13	ide A	cit.						
BAHINAL						1/19	N//1							
County (6)		County C	ode (7)		Cu	rrent Use (Prio	r if being de	molishe	ed)					
Hudson		(STATE L	ISE ONLY)		-   A)	Ahandinik								
Name of Monitoring Firm Hired by Building Qv		ASCM	No .		Name of A	Name of Abatement Contractor (9)								
OMEGA ENVIRONMENTAL		00	(20)			Apalment services, LLC								
Street Address					Street Add									
380 HM P1 ST					(27) /	7/4/2 (4/2) Tip Code	7 1/4 1/4							
City, State, Zip Code  HGC/PASOLL NT	7666					State Zip Code								
Project Manager for Monitoring Firm	Telephor	ne No		KALAMATON   MICHIGAN   TUDA										
Lotsef Faranda	201-4	77.5	700	269-3	7-375-9595 01080									
Stan Date (10) 15	Scheduled Co	l ompletion (	Date (11)		Name of O	SHA Monitor	nitor							
15-4-12	28-1	18-12 Andertices Testing Consulting Fine												
Occupancy Status During Abatement (Check					Street Add	Street Address								
☐ Facility Closed/Vacated During Entire Pe	riod of Abate	ement				14 6 25 04 5 to 2 12 d								
<ul> <li>☐ Abatement Performed Outside of Norma</li> <li>☐ Other – Describe;</li> </ul>	Facility Hou	ırş					10,000							
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Scope of Work (Check All That Apply)		1			[] [			tore Co						
☐ ≥3 st or ≥3 tt ▷CS , ≥160 st or ≥260 tt	C Reno			-un Comainme Vini-Enclosure	nent with Negative Fressure re .									
		☐ Glovebag Procedum ☐ Non-Exempled (*) and Non-Edable Procedu								e e e e e e e e e e e e e e e e e e e	T.			
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TO BE ABATED In Facility	Staff?	(i.e.		systems ins		(Specif SF or LE	1 - 1	70 ⊕	T)	1691	100			
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	NJDEP W	NIDEP Waste   Gubic Yards   Name of Registered Landfill												
Name of Registered Waste Hauler	Hauter ID		of Wa		ivalue of r	Chamen C	- 10							
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Completed by						Signature Date 39								
CAPALINE.	14			71 X 1 2 V 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1										



REGEVEN

Date of Notification (1)	31/12		На		ng Owner/Operator	(2)	MAGINA		
Agencies Notified	Type Notification		Sv	esi Address			2012 SEP -4	PH 1:	46
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ame of Facility Where	DENCE	g race (s	,	-		School (K-12)	(Other then V 12)		
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COUNTY 161 CAPE	Mar		Ŭ	SE ONLY	1.		DNT		
are of Monitoring Firm	Wired by Building	Owner	TASC	N No.	Name of Abater	ment Contrador (9)	c		
3) Nonlong Film	1/1	vectorealth 							
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in State Zp Code					MA	PLO SHAT	ie, NJ.0	803 -	
	Eign	1.1	Telepho	ne No.	Yelenhous No.		License No	4	
raeci Manager lor Mo		1.			836-1	79-0472	1 -00		
Sian Daie (10)		duled Com			Name of OSHA	PKALEM	M	7 =	
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Abatement Performs	ed Outside of Norma	a Facally I	Hoors		MAP	ILE SHAD	E, N, J, C	0805	<u></u>
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name of Registered W			- 11	1107	Deboral Dar	e City, State	7184 15-2-4	N.J.	
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KLÉMC		J, 08	305		Signatur	Woo	DBINE Date	6/31	112

(CHECK# 2404

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

			- 50				-			
Date of Notification (1) 8 /30/12			Name	of Buildin	ng Owner/Operator	CONTRE 20	12,SER-4 PM	a de	GE.	
Agencies Notified Type Notification	· .	_	Stree	t Address						
∑ BA ☑ Initial				155	R.T. 50		dESTOS roj	110	9!_	
☐ Amended Amendment			City, S	State, Zip	C∞de		& LICENSIA	G		
Amendment in Emergency (i		5	500	6-	REEN FIC	= LD, N1-	) ,			
		'	Name	of Conta	ci .		Telephone Numbe	t		
☐ DOH Justification) ☐ DCA Cancellation				BIL	ULE BREU	NIG	Leve			
			===							
			FAC	CILITY IN	ORMATION	75-16	(4)			
name of Facility Where Abatement is Takir		(3)				Type of Facility	T. 1			Ì
RESIDENCE.		***				School (K-13	2) 8 (Other than K+12)			
STEEL Address 8 5, KENNON	VLU	E-				Other (I.e., p	uvata g commercial	buildi		
- 156 / 163						Square Feet	# of Floors	Bid	g Ag	
MARGIGTE					E. 109.176	Current Lica (Dr	for it being gemolish			
County (6) ATLANTIC			USE	ONLY)	7) (STATE		or it being demolish			
*ame of Monitoring Firm Hired by Building	Owner	- 7	SCM	No.	Name of Abatem	ent Contractor (9	)			
ic) WA					V 1.1	EMCO IN	UC,		1	
					Curant Address					
Street Address				369	S, S PRUC	モ 人して・				
				7.0	and a					
Dr. State Zip Code				Mas Mas	PRESHODE, N.J. OBISZ					
					Telephone No.	I in a second				
Project Manager for Monitoring Firm		Telec	phone	No.		79-0477 00444				
	duled Co			te (11)	Name of OSHA!	JOH KI	EMM			
Occupancy Status During Abatement (Che	- /	-			Street Address	CCO	wet Luc.			
Practic Closed/Vacated Dunng Entire Pe	enod of	Abaten	nent				200,			
Abatement Performed Outside of Norma	I Facility	y Hours	5		Cry, State, Zip C	ode				
Other - Describe					MA	ADLE SI	10DE, N.	٠. ن	1 C	- د <i>-</i>
Scope of Work (Check all that apply)							Description			
Scope of Work (Check all that appear	0.000				Full Coi	ntainment with No	gative Pressure			
[]] 23 St Or 23 H		novation molition			Clauch	an Procedure				
<b>№</b> 2160 kt or 3260 tt	K) De	manua			Non-Ex	empted (*) and N	on-Friable Procedur	t ·		
	IsL	ocation	1					^	Later 171	
	No	omally			Description o				7.0	
Location of	Used	Solely	by	Achae	ios Containing Ma	terial (ACM)	Amount			ŗ: -:
Asbestos-Containing Material (ACM)		stodal		(1.6	thermal systems	insulation,	(Specify	\ \frac{1}{2}	D	Tra locule
TO BE ABATED. IN Facility	5	Staff?	1		surfacing, VAT	, 01	SF or LF)	Removal	Reput	P   6
(13)		(12)			other miscellane	ous)		1	•	
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						<del></del>	gistered Landfill	1	_	<del></del>
came of Registered Waste Hauler			JOEP !		Cubic Yards	Name of Red				
/		H	auler IC		of Waste	A .(	2, U, A.	AST I		
KLEMED INC.			11	<u> </u>	Disposal Date	City, State		-		-
Ciry State	- 1	7				PLE.	OSANTVILL	_ F	W.	<u>J.</u>
MARCE SHADE		1)			Signature	1===			1	
Completed 6, Title	3	111	0		Signature	a ICen	m Date	30	12	
JOSEPH KLEMM -		///			-1-A	7 7 30 1				

K 196		NOTIFICAT (PURSUAN ANNUA	ion of Abe it to NJAC al Notifica		2012.00		J Dept. of	COLUMN TOWNS THE PARTY OF THE P	enfor Servi
Date of Notification (1)  08  29  12			Name of B Poly C LLC Street Add	uilding Owner i ( and Seri Realty I reas	Operator (2)	P-A	CHP.	(signature)	ne:
	offication Initial Amended			Zip Code , NY 11030	2 2 ES / 2 2 ES /		13.5()	COLUMN TO THE REAL PROPERTY AND THE PERSON NAMED IN COLUMN TO THE	
DOH / DOL DO DCA	Amendment # Emergency w/ Cancellation	Incated and Inches	Name of C Ed Glecker	37,77		elepho	ne Numbe	) f	
Name of Pacility Where Absten	nant la Tablas B		CILITY INF	ORMATION  Type of Facility (	4	,		<u> </u>	errandski sameraki
Former Bank Street Address 184 East Broad Street	Pare to Lawring .			School	ol (K-12) hapter 8 (Other t (I.e., private & c homes, stc.)				
Gity (8) County (8) Westfield Union	)	County Code (	7)	Square Feet 12,316 Current Use (Pri	or if being dama		bullding over 50		
Name of Monitoring Firm Hired Airlek Environmental Corporation		r (8)	aścm nó	Vacent - Retail 3 Name of Abatem Slavco Construct	ent Contractor (	§)			
Street Address 38-37 29th Street				Street Address	в				
City, State, Zip Code Long Island City, NY 11101 Project Mings, For Monitoring I Mr Saad Zouak		Telephone Nu 718-937-3720	mber	City, State, Zip ( Clifton, NJ 0701	Code	n-Aestroeman			
Sheduled Start Date (10)08	Sched, Compl	otetion Date (1	1 400	Telephone Num 973-478-4848		Joseph 100724	Number		
Occupancy Status During Aba Facility Closed / Vac Abatament Abatament Perform	celed During En	tire Period of	,	Name of OSHA Slavoo Construct Street Address	tion Inc.		14 H-16000 (17 18 18 18 18 18 18 18 18 18 18 18 18 18	www.combineerac.urg	
Hours - Describe: _	_ 3:00 pm to 8:00			164 Getty Avenu Člty, State, Zip ( Clifton, NJ 0701	Code				
Scope of Work (Check All The    Pernolition   23sf or 23lf   2160 at or 2280 lf	t Apply)	Renovation		Mini - Enclosure				÷	
Location of Asbestos Conteining Meterial (ACM) TO BE ABATED In Facility (13)	Location of is Abbestos Conteining Location Meterial (ACM) Normally 10 BE ABATED Used in Facility Sofely				Amount (Specify SF or LF)	Abatam R E M O V A L	R E P A I R	m z c a a s s s s s	E N C L O S U R
First Floor	YES NO NA	Pipe insulation			120 LF	<u></u>		書	
Name of Registered Waste Ha	uler	NJDEP Woots	Cuble Yarda	Name of Ragist		耳		10	
Slavco Construction Inc.	A 7 (17 (17 A)	818508	of Waste	G.R.O.W.S Land	3(I)		2000	ason and a second	
Cility, Scate Ciliton, NJ	H		Disposal Data TBD	City. State Morrisville, PA					
Completed by (Print or Type) Vivian Jurcavio		Title Executive Adm	evbedeinin	Assistant 2	wan D	Aur	euic	Date August	29, 2012

#### STATE OF NEW JERSEY NOTIFICATION OF ASBESTOS ABATEMENT

(PURSUANT TO NJAC 8:60-7 AND 12:120-7 ANNUAL NOTIFICATION

				• • • • • • • • • • • • • • • • • • • •		C 8:60-7 AND 12:120-7		RE	inn.	Later page	#/019			
Date of Notification (1	)	unergar y		ANNU	Name of	EATION Building Owner / Op C and Serf Realty LLO dress hern Blvd	erator (2)				W1/			
08 / 29	/12				Poly C LL	C and Serf Realty LL	C c/o Colin Dig	velopme	nt					
Associate Natified 1	Time of No	10000000000000000000000000000000000000	one see as		Street Ad	dress		IL OLI	-4 p	H 1	4			
Agencies Notified  EPA	Type of No [☑]	otiricat Initial			City Stat	nern Blvd e, Zip Code	(A 5	1		11.0	L			
DEP		Amen	570			et, NY 11030	·	9531	108 do	MTDn.				
☑ DOH	A A		ndment #		Name of	Contact		Telepho	ne Numb	97: 1102	AND COMMENTS OF THE PARTY OF TH			
DOL DCA	<b>₩</b>		gency w ellation	/ justification	Ed Glacke	en				• 0				
DOA		Caric	enauon 	- ottometres	ACILITY IN	FORMATION								
								-	3					
Name of Facility Whe	re Abatem	ent is	Taking I	Place (3)		Type of Facility (4)				-	20.00			
Former Bank						School (	K-12)							
Street Address			CONSTRUCTION OF STREET	CONTRACTOR OF THE PROPERTY OF	NOTES SOME AND ADDRESS OF THE PARTY OF THE P		oter 8 (Other t	than K-1	2)					
154 East Broad Street							e., private & c	mmerci	ial					
City (5)	County (6)		-	County Code	(7)	Square Feet	nomes, etc.)		Buildin	a Age	A CONTRACTOR OF THE PARTY OF TH			
		li .		County code	(1)	12,316	2	•	Dandin	g Age	Œ			
Westfield	Union		The state of the s			Current Use (Prior	HOOM AND AND CHARLES THE DESIGNATION OF THE PERSON OF THE	olished)	over 50	years				
Manager of the same of the sam	Town I I I and	L. DI	1. 0	(0)	Troots are	Vacant - Retail Space	CONCENSION OF THE PROPERTY OF	ORDERO DE COMO						
Name of Monitoring F			ug. Own	er (8)	ASCM NO	Name of Abatemen		(a)						
Airtek Environmental C	orporation	MI ANGELES ANGELS				Slavco Construction Inc.								
Street Address						Street Address								
39-37 29th Street City, State, Zip Code				AND THE RESERVE OF THE PERSON NAMED IN		164 Getty Avenue								
Long Island City, NY 11101						City, State, Zip Code								
Project Mngr. For Monitoring Firm Telephone Number						Clifton, NJ 07011								
Mr Saad Zouak 718-937-3720					6.43		-		Newstra					
Sheduled Start Date (10)   Sched. Completetion Date (11)   08						Telephone Number	- 1		Number					
//			/	/		973-478-4848		00724						
Occupancy Status Du						Name of OSHA Mo		and book avenue						
Facility Clo		atea D	uring Er	ntire Period of		Slavco Construction Street Address	Inc.		Market Market	TOUR BURNETON	enostro en			
		d Outs	side of N	lormanl Facilit	У									
Hours - De	scribe:					164 Getty Avenue		WORTH CASE	TO THE PERSON NAMED IN					
Other - Des	scribe:	3:00 p	om to 8:0	0am		City, State, Zip Coc Clifton, NJ 07011	de							
Scope of Work (Chec	k All That	Apply	)			Ciliton, No 07011								
			57.		arried .									
☐ Demolition ☐ ≥3sf or ≥3ll			<b></b> ✓	Renovation		Full Containment v Mini - Enclosure	vith Negative	Pressur	re					
✓ ≥160 sf or					~	Glovebag Procedu	re		12.14					
						Non-Exempted (*)		ole Proc	edure					
Location of	man and the same of	PERSONAL PROPERTY.	İs	Y-	Descript	ion of		Abatam	ent Type	INPOTE CARRIED AND STREET	OAL METATE POSITION AND			
Asbestos Contai	ning	Lo	cation	A:	sbestos - C			R	1 1400	E	E			
Material (ACN			rmally		Material		Amount	E	R	N	N			
TO BE ABATE in Facility	:D		Jsed olely		.e., therma	I systems facing, VAT,	(Specify SF or LF)	M	E	C	C			
(13)		3880	Main-			ellaneous)	Of OILI	v	A	P	0			
	10000		nance/					Α	1	S	S			
		PAY 22.5	stodial aff (12)					L	R	U	U			
TOO TO THE TOTAL T		Name and Part of the Part of t	NO N/A			***************************************				-	R			
First Floor	***************************************	CONTRACTOR STREET, STR	V I	Pipe Insulation	1	Commence of the Property of the	120 LF	7						
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			HH	-										
Name of Registered V	Vaste Hauf	er		NJDEP Waste	Cubic	Name of Registere	d Landfill							
Slavco Construction Inc		The series		S18508	Yards		- mailwilli		STEER OF					
	•	Park Street Control		316508	of Waste	G.R.O.W.S Landill		MINISTER SERVICES						
City, State			PAPER ST		Disposal	City. State		H ST						
Clifton, NJ					Date TBD	Morrisville, PA								
Completed by (Print o	r Type)	COCCUS TO SCHOOL	TO SHARE WELL THE THE SHARE	Title	-	Signatur	**************************************			Date	anterna commence succ			
Vivian Jurcevic				Executive Adm	ninistrative /	Assistant 1//	12 Aves A	flo	Bereio	August	29, 2012			
Vivian Jurcevic Executive Administra  ASB-41					ninistrative /	Assistant ///	uan D	TLEN	<u>Cauc</u>	August	29, 2012			



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Date of Notification (1) AUGUST 29TH, 2012				wner/Oper ST/URBA		NEWAL ENT	TITY	4 p	M J	: 34		
Agencies Notified Type Notification		1112	Street Ad 39 Mari	dress ket Stree	et			BITOS	00	WT:	10	7
EPA Initial  DEP Amended Amendment				e, Zip Cod k, New J	le ersey 07	7102			N5/A	G'	<i>₩</i> .	
□ Emergency     □ justification)     □ DCA    □ Cancellation		200	Name of Adam [	Contact Dentinge	er			Telephone Nu	mber			
			FACIL	ITY INFO	RMATION							
Name of Facility Where Abatement is Takin Teacher Village Phase #2 Street Address	g Place (3)					F	ype of Facility (4  School (K-12 Subchapter	34	2)			
37-39 William Street						×	Other (i.e. pr etc.)	rivate & commerc	ial build	dings,	home	es,
City (5) Newark	=======================================					1300	quare Feet 0,000	# of Floors		ldg. <i>A</i> 0+	ge	11
County (6) Essex			County C STATE U	ode (7) SE ONLY)		110000	urrent Use (Prio Church	r if being demolis	hed)			
Name of Monitoring Firm Hired by Building CSA	Owner (8)		ASCM	No.			Abatement Cont					
Street Address 26 Lorenzo Court					100		eet Address 4 GETTY AVE.					
City, State, Zip Code Matawan, New Jersey 07747							y, State, Zip Code LIFTON, NEW JERSEY 07011-1802					
Project Manager for Monitoring Firm Michael Chain	[통하기 (1981년 1981년 1981년 1982년 1981년 1981년 1982년 1981년 1						elephone No. License No. 00724					
Start Date (10) September 5th, 2012							OSHA Monitor	UCTION INC.				
Occupancy Status During Abatement (Chec						treet Ac			-			_
Facility Closed/Vacated During Entire			ont		_   1	164 GE	ETTY AVE.					
Abatement Performed Outside of Norr  Other – Describe: 7:00am-3:30pm Mo	nal Facility H	Hours		8			te, Zip Code ON, NEW JE	RSEY 07011-	1802			
Scope of Work (Check All That Apply)									+			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		novat moliti				×	Mini-Enclosure Glovebag Proc	edure	-			
							Non-Exempted	(*) and Non-Fria	Die Pro		emen	t
i and	100000	ocation of the control of the contro	5393								/pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used	Sole! itenar	y by nce/			stems in g, VAT,	terial (ACM) nsulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A								e	
Basement			X	1	Boiler II	nsulati	ion	120SF	x			
Basement	B		×		Elbow I	nsulat	ion	15LF	x			
Second Floor in Center Room			x Floor Tiles and				Mastic	760SF	X			
Second Floor Bottom Layer		x Floor Tiles and					Mastic	1150SF	Х			
Name of Registered Waste Hauler		100000	JDEP W	CONTROL   1	Cubic Ya		Name of F	Registered Landfi	I		1000000	
Slavco Construction Inc.		1 11575	auler ID 3508	No.	of Waste			W.S LANDFIL	_			
City, State CLIFTON , NEW JERSEY 07011-1802					Disposal TBD		City, State MORRI	SVILLE, PA		di.		ile.
Completed by Title Vivian D. Jurcevic					156	nature (((((	nti li	illiaic D	ate S	159	/12	

CONTINUATION SHEET

2012 SEP -4 PM 1: 26

	Solely by Maintenance /Custodial Staff (12)				& LIC	NOTA	Abaten	ient Typ	е
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)				Description of Asbestos-Containing Material (ACM) (i.e. thermal systems, insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	R E M O V A	REPAI	ENCAPSU	ENCLOSUR
	Yes	No	N/A			L	R	L	E
Third Floor			x	Floor Tiles and Mastic	5,000SF	Х			
Fourth Floor			х	Floor Tiles and Mastic	5,000SF	X			
				-		W:25-1/24/50			
and the second s			-						
							-	<u> </u>	
A MARINE THE RESERVE TO THE RESERVE									
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2						,			
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10 ×			1 15						
									7

Completed By: (Print or Type)	Title	Signature	
Vivian D. Jurcevic	Gen. Mgr.	(/wan & kulling 8/29/2012	10.

### BATEMENT RECEIVE

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

Date of Notification (1) August 22, 2012			Name of Building Owner/Operator (2)  RBH-TRB WEST/URBAN RENEWAL ENTITY										
Agencies Notified	Type Notification			Street Ad				trans t V from V U J V Green States S V S E	Abota	US L CEM:	ON	Ro	-
EPA DEP DOL	Initial Amended Amendment				te, Zip Cod k, New J	le ersey 0701	02	2		VC.R.	MINE		
DOH DCA	justification) Cancellation			Name of	Contact Dentinge				Telephone N		Marie -	-2002	
				FACIL	LITY INFO	RMATION		All the second second				-	
Name of Facility Where TEACHER VILLAG	Abatement is Takin	g Place (3)						Type of Facility (4)				0.000	
Street Address 37-39 William Street		4.					COMMON CHICAGO CENTRAL	School (K-12) Subchapter 8 Other (i.e. prinetc.)	(Other than K	-12) rcial buil	dings	, hom	es,
City (5) Newark,								Square Feet 50000	# of Floors	1 7	3ldg. / 50+	\ge	22
County (6) Essex		2		County C (STATE U	Code (7) USE ONLY)	Marie Anni Anni Anni Anni Anni Anni Anni An		Current Use (Prior Church	if being demo	ished)	= 1		
Name of Monitoring Firm CSA	Hired by Building	Owner (8)		ASCM	No.			f Abatement Contri CO CONTRUC					
Street Address 26 LORENZO COU	JRT						treet Address 64 GETTY AVE.						
City, State, Zip Code MATAWAN, NEW	JERSEY 07747			0 10			City, State, Zip Code CLIFTON, NEW JERSEY 07011-1802						
Project Manager for Mor MICHAEL CHAIN								ne No. 78-4848	License 00724		-		
Start Date (10) September 5th, 20	12			er 28,2012 SLA				f OSHA Monitor CO CONSTRU	CTION INC				deli -
Occupancy Status Durin	g Abatement (Chec	k Only One	e)		***	Stree	ddress						
Facility Closed/Vac	ated During Entire	Period of A	batem	ent				ETTY AVE.					
Abatement Perform Other – Describe:	7:00am-3:30pm Mor	nal Facility iday - Frida	Hours					ate, Zip Code TON, NEW JER	SEY 07011	-1802			
Scope of Work (Check A	II That Apply)	granty.				r							
≥3 sf or ≥3 if ≥160 sf or ≥260 if		PERSONAL PROPERTY.	enova emoliti				×	Full Containmen Mini-Enclosure Glovebag Proces	dure				
		1 10	Locati			E		Non-Exempted (	") and Non-Fri	able Pro		e ement	
Location	n of	N	ormall	ly		Descriptio	n .					pe	
Asbestos-Containing TO BE AB In Faci (13)	Material (ACM) <u>ATED</u> lity	Mai	Soleintenar odial S (12)	nce/	(i.e. t	os Containing hermal system surfacing, V other miscella	Ma ns AT	nterial (ACM) insulation, , or	Amount (Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A								te	Ф
Basement			1	Х	The	rmal Boiler	In	sulation	120SF	x			
Basement		國		x	TI	nermal Pipe	e F	itting	15LF	X			
Throughout	the Bldg.			х		Vat & Ma	st	ic	19110SF	Х			
Name of Registered Was	ste Hauler	1	TN	JDEP W	acta T	Cubic Yards		Nome of De	gistered Land	En .			
Slavco Construction			H	auler ID I 3508		of Waste		Towns and the second	S LANDFIL				
CLIFTON , NEW JERSEY 07011-1802						Disposal Date TBD	ę	City, State MORRIS	VILLE, PA				
Completed by Vivian D. Jurcevic		Title Gene	eral Mgr. Signature							Date August	22,2	012	



120	7-	45	16			
Ch	e,c	k d	74	39	9	
Ch	Emp		4	13	1	pre

Date of Notification					Owner / Operate			- 20	12 SEP	~l.	<i>(</i> 3			
	8/30/12				The state of the s	white the Standard Standard Standard	artment of th	e Tre	easury DPMC		JESTO & LIC	4	PM.	3: :
Agencies Notified  EPA	Type Notific	ation			t Addr		treet Floor 9			113	BESTI	00	^	
□ DEP	☐ Initia	ı	-			R Zip C					& LIF	FAIS	UN!	Roi
Ø DOL		nded #1		-		4J 086					0	-110	ING	1
	5 <u>5</u>	rgency			e of Co		<i>a.</i> 0				Telepho			
□ DOH □ DCA		cellation			Johns					- 1				
				FΛ	CILIT	V INIE(	ORMATION	-			l'			
Name of Facility Wh	nere Abatem	ent is Taking F	Place (3		OILII	1 1141	Type of Faci	lity (4	)					
NJ State Auditori							School							
Street Address								William Control	(Other than K-		Children and Charles and Control			
205 West State S	treet						*		vate & commer	cial buildi			etc.)	
							Square Feet		# of Floors		Bldg. Ag	je		
City (5)		County (6)	Co	unty (	Code (	(7)								
Trenton		Mercer	i						r if being demol	ished)				
NI	F: 11: 11	D 1111 O	(0)		1400		Auditorium							
Name of Monitoring Brinkerhoff Envir		y Building Ow	ner (8)		ASC	M No.	AbateTech	, Inc	ent Contractor (9	d)				
Street Address 1805 Atlantic Ave	nue						Street Addre							
City, State & Zip Coo Manasquan, NJ 0							City, State & Lumberton							
Project Manager for		irm	Telep	hone	Numb	er	Telephone N			License	Number			
Jason Hooper			732-2				609-265-21				005	29		
Scheduled Start Dat 9/4/12	e (10)	Scheduled Co	mpletio		te (11)		Name of OSI EMSL Anal			6., 14. 14. 14. 14. 14. 14. 14. 14. 14. 14.	3.000.000			
Occupancy Status D	Ouring Abate	ment (Check o		-			Street Addre							
		During Entire F			ateme	nt	108 Haddo	n Av	e.					
☐ Abatement F	Performed O	utside of Norm	nal Hou	ırs			City, State &	Zip C	Code					
Describe:							Westmont,	NJ (	08108	Kara.				
Facility Occu														
Scope of Work (Che	ck all that ap	pply)							Full Containn	ant with	Magative	Dro		
≥3 sf or ≥3 lf			$\square$	Ron	novatio	n			Mini-Enclosur		ivegative	ries	suie	
☐ ≥160 sf ≥260			Ħ		nolition			H	Glove Bag Pr	1000				
				001				H	Non-Exempte			e Pro	cedu	re
	cation of		ls L	ocati	ion		Description	n of		Amount	Ab	atem	ent T	ype
	os-Containin	g	Norm				Asbestos-Con			(Specify	-			
	erial (ACM) E ABATED		So   Maint	lely b			Material (A (i.e., thermal s			SF or LF)	, D		Enc	g
	Facility		Custo			in	sulation, surface			<b>8</b> = 1	Remova	Repair	aps	Enclosure
	(13)		In recognized differences	(12)			or other miscell				val	₩.	Encapsulate	ure
			Yes	No	N/A								е	
Main Lobby	/			$\boxtimes$		Sp	rayed on Fire	epro	ofing	20 SF				
/	/											Ц		븨
\				Ц.								H	Щ	뷔
				H	H							井	님	뷔
				片	H							H	님	뉘
Name of Registered	Waste Haule	er		N.I	DEP W	Vaste (	Cubic Yards	Nan	ne of Registere	d Landfill				
1000 AND AND AND AND AND AND AND AND AND AND	- Lots Hadi			100	uler ID	0.000	of Waste		. <del></del>					
AbateTech, Inc.					1875		2		RF Landfill					
City, State Lumberton, NJ							Disposal Date 9/10/12		, State lytown, PA					
Completed By (Print	or Type)			Title	e	5	Signature		1		Date		77 77	
Gwen Trumbetti	wad Salatai			F 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	fice		/ 2/	110	2		8/30	/12		
				Co	ord.		4	VV	<i>A</i>					

## State of New Jersey 1208-4540 NOTIFICATION OF ASBESTOS ABATEMENT Check # 4429

(Pursuant to N.J.A.C. 8:60 and 12:120)

Date of Notification (1) 8/29/12		Name of Building Owner / Operator (2) Federal Aviation Administration  Street Address  2012 SEP -4, PM 3: 43										
Agencies Notified Type Notification		0	Addr		Aummstrati	OII		1 -4	P	13	ų,	}
EPA	122			nical C	enter			Toc				
☐ DEP ☐ Initial	(	City, S	State 8	& Zip Co	ode		21	105 (	U	NI	ROL	
☐ Amended #	1	Atlan	tic C	ity Inte	rnational Air	port, NJ 0840	5	ILEN:	21	<b>VG</b>		
			of Co					Teleph	or	e Nu	ımb	er.
DCA Cancellation	1	Dona	ld Br	own				0.000				
		FA	CILIT	Y INFO	ORMATION							
Name of Facility Where Abatement is Taking	Place (3	3)			Type of Facil							
William J. Hughes Tech Center					School (	5 - 6	16.40)					
Street Address						ter 8 (Other tha		inas bo	me	c of	to )	
Building 306 TSF Annex					Square Feet	e. private & com		Bldg. A			(6.)	
City (5) County (6)	ICo	unty (	Code	(7)	- Square reet	# 011100	115	blug. A	ige			
	00	unity (	Jouc 1	(,,	Current Use	Prior if being de	emolished)					_
Atlantic City Atlantic					Tech Cente		monoriou					
Name of Monitoring Firm Hired by Building C	wner (8)		ASC	CM No.		tement Contrac	tor (9)					
TTI Environmental					AbateTech,		8.5					
Street Address					Street Addres	SS						
1253 North Church Street					PO Box 25							
City, State & Zip Code					City, State & Lumberton		-5					
Moorestown, NJ 08057 Project Manager for Monitoring Firm	Teler	hone	Num	her	Telephone N		License	Numbe	r			
Jim Guilardi	856-				609-265-320			005		9		
Scheduled Start Date (10) Scheduled 0			te (11	)	Name of OSI							
9/17/12	9/21				EMSL Anal							
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire Abatement Performed Outside of No Describe:	e Period rmal Ho	of Aba	ateme	ent	Street Address 108 Haddon City, State & Westmont,	n <b>Ave.</b> Zip Code			_	33 - VO		
Facility Occupied During Abatement Scope of Work (Check all that apply)	<u>:</u>								-			
Scope of Work (Greek all that apply)						Full Con	tainment with	Negativ	/e	Pres	sure	É
≥3 sf or ≥3 lf	$\boxtimes$	Rer	novatio	on		Mini-Enc						
≥160 sf ≥260 lf		Der	nolitio	n .			ag Procedure				-50/00/40/40	
				7			mpted and N		-	-	_	
Location of		Locat nally l			Description Asbestos-Con	n of	Amount (Specify		ba	teme	ent I	ype
Asbestos-Containing Material (ACM)		olely			Material (A		SF or LF	1			Щ	
TO BE ABATED			ice or		(i.e., thermal s	ystems			Remova	Re	Encapsulate	Enclosure
in Facility	Custo		Staff?		nsulation, surfac			3	nov	Repair	nso	USO
(13)	Yes	(12) No	N/A		or other miscell	aneous)		2	20	,	ate	9
Did ond Figure Cofetenia	Tes			27	layer Floor til	o & Mactic	2,400 SF	=	1	П	П	
Bldg. 301 - 2 <sup>nd</sup> Floor Cafeteria			H	- 21	layer Floor til	e or invastic	2,400 31		+	님	H	H
	+H	H	H						╣	H	H	H
	$\dashv \forall$	H	H	-				— I	Ħ	H	Ħ	H
	一片	Ħ	H					一十	i	П	Ħ	
- AND FOR STATE OF ST		Ħ	Ħ		2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-				1			
Name of Registered Waste Hauler		На	IDEP auler II		Cubic Yards of Waste 20	Name of Regis		1				
AbateTech, Inc. City, State		10	7.00		Disposal Date	City, State	•••		_		-	
Lumberton, NJ				-	9/21/12	Tullytown, F	A					
Completed By (Print or Type)		Tit	le		Signature )	1		Dat	е			
Gwen Trumbetti		Of	ffice oord.		X	WK		8/2	9/1	2		

1208-4538

Date of Notification	(1)	U-3-4	N	lame	of Bui	lding (	Owner / Operator	r (2)		SEP -4 PI STOS COI LICENSIA	L4 -			
	8/28/12		A STATE OF THE PARTY OF THE PAR		ere en comme		nications			7   17	7 3: 4	1		
Agencies Notified	S/28/12   Type Notification   A					ess .			119 36	STOSO				
	N 1.111-	1.		100000000000000000000000000000000000000		wood Zip C			&	LICENSU	YIRO	-		
							19046			CINOIA	IG	-		
					of Co		13040				Геlephd	ne N	umb	er
			-		Baylo									
							ORMATION							
Name of Facility W	here Abatem	ent is Taking P	lace (3	Action to the second	JILII	1 1141	Type of Facili	tv (4)						-
Verizon	noro / todio	one 10 Taning 1	(-	,			School (F							
Street Address					2010	2.11			Other than					
80 Highway 46 E	ast						Karanaff	e. priva		ercial building			tc.)	
	- 1	W					Square Feet		# of Floors	s   B	Ildg. Ag	е		
City (5)	cof Facility Where Abatement is Taking Place and Address ighway 46 East  County (6) Essex  cof Monitoring Firm Hired by Building Owner (Environmental at Address North Church Street State & Zip Code restown, NJ 08057 ct Manager for Monitoring Firm did Baldwin  duled Start Date (10) 9/17/12  pancy Status During Abatement (Check only of Facility Closed/Vacated During Entire Perion Abatement Performed Outside of Normal Formal Describe: Facility Occupied During Abatement													
Fairfield		Essex				Current Use (	Prior i	f being den	nolished)					
							Offices	-						
		by Building Owr	ner (8)		ASC	M No.	Name of Abate Abate Tech,		t Contracto	r (9)				
Street Address	me of Monitoring Firm Hired by Building Owner I Environmental eet Address 53 North Church Street by, State & Zip Code corestown, NJ 08057 bject Manager for Monitoring Firm rold Baldwin heduled Start Date (10) 9/17/12  Essex  Essex  Essex  Scheduled Owner  Building Owner  Building Owner  Building Owner  Building Owner  Scheduled Com  Scheduled Com  9/17/12						Street Addres	ss						
	DEP						City, State & 2	Zip Co	ode					
							Lumberton,							
Project Manager fo Harold Baldwin	r Monitoring I	Firm	Telep 856-8		Numb 8 <b>00</b>	oer	Telephone No 609-265-210			License N	lumber 0052	29		
Scheduled Start Da		Scheduled Cor	mpletic		te (11)	)	Name of OSH EMSL Analy							
Occupancy Status	During Abate	ment (Check o	nly one	<del>)</del>	atomo	nt	Street Addres	SS						
					ateme	111	108 Haddor City, State & 2							
	Periornea C	utside of North	ai 1100	113			Westmont,							
- Victoria	cunied During	Abatement					westinont,	140 04	7100					
				-		-		- ''-					T MISS	
Goops of trom (or		11.77								inment with N	legative	Pres	ssure	3
- Incompany	If				novatio				Mini-Enclo					
≥160 sf ≥26	60 If			Der	nolitio	n				Procedures	. Faiable	. D	d.	
					• 212		Description		Non-Exem	pted and Nor	Aba			
		na		Locat	Used		Description Asbestos-Conf			Amount (Specify	Abo	T	ent i	ype
		19		olely			Material (A	CM)		SF or LF)	Re		ᄪ	m
<u>TO</u>	BE ABATED		Main	tenar	ice or		(i.e., thermal sy insulation, surface				Removal	Repair	cap	ncl
			Custo	(12)	Staff?		or other miscell				<u> </u>	pair	Encapsulate	Enclosure
	(13)		Yes	No.	N/A			25					i te	Ф
Main Doof				П		-	Roof Flash	hina		730 LF		П	П	П
	oof.		H	H		Ashe	stos Flashing R		upports	72 LF		H	H	H
	.001		H	H		71000	Roof Dra			5 total		Ħ	H	Ħ
Wall Root			H	Ħ			TOO! DIG				TH	П	П	T
			Ħ	Ħ	Ħ				-	-	П	П	П	T
			T	Ħ	T			1						
Name of Registere	ed Waste Hau	iler	1	N.	JDEP '	Waste	Cubic Yards	Nam	e of Regist	ered Landfill		10000		
					auler II 187		of Waste 8	TRF	RF Landfil					
City, State Lumberton, NJ							Disposal Date 10/5/12		State ytown, PA					
	ompleted By (Print or Type) Title							1	/	-	Date		2211	
Gwen Trumbetti	it or Type)			110		oord.	Signature M	1			8/28/	12		

PG1 HAD

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

Check #4427

Date of Notification (1) 8/27/12						Owner / Operato		7017 SE	P-4	PH '			
Agencies Notified Type Notification			Stree	t Addr	ess	ersity nceton University Code 8544		155000		.,,	4	<i>j</i>	
Ĭ EPA		-	Trus	tees o	of Prin	nceton Univers	sity E.A.	MacMillan B	IdgS (	Chur	on.		
☐ DEP ☐ Initial		(	City,	State 8	& Zip C	Code		a L	ICEN	SINO	MUL		
DOL Amended #15		1	Princ	eton	, NJ 0	8544				CHAR	1		
□ DOH     □ Emergency     □ Cancellation		Ī	Name	of Co	ntact				T	elepho	ne Ň	umb	er
☐ DCA ☐ Cancellation		1	Robe	ert Or	tego,	P.E.			16		-	_	
			FA	CILIT	YINF	ORMATION						_	PT 180-1
Name of Facility Where Abatement is Takin	ng Pla	ce (3	70.10.10.10.10.1	01211		Type of Facili	ity (4)						
Princeton University - Firestone Libr			,			School (							
Street Address						Subchap	ter 8 (Othe	er than K-12)					
One Washington Road						Other (i.e	e. private 8	commercial I	ouilding	s, hom	es, e	tc.)	
						Square Feet	# of	f Floors	B	ldg. Ag	е		
City (5) County (6	)	Co	unty	Code	(7)								
Princeton Merc	er		- 8			Current Use	(Prior if bei	ng demolishe	d)				
						University !							
Name of Monitoring Firm Hired by Building	Owne	r (8)	and the second	ASC	CM No.	ACCUMANTAL PROPERTY OF THE PARTY	ntractor (9)						
ATC Associates, Inc.		, ,				AbateTech,		. ,					
Street Address					-	Street Addres							
Bromley Corporate Center 3 Terri La	ne, S	uite	12			PO Box 25							
City, State & Zip Code						City, State &					-H: 5-1		
Burlington, NJ 08016						Lumberton							
Project Manager for Monitoring Firm				Numl	ber	Telephone N		Lice	ense Ni		_		
Mike Keehn			200000000000000000000000000000000000000	8800		609-265-210			-	0052	9		
Scheduled Start Date (10) Scheduled 10/17/11		9/28		ite (11	)	Name of OSI EMSL Anal							
Occupancy Status During Abatement (Chec					AND TOWNS PORTS	Street Addres	SS	Maria Maria					
Facility Closed/Vacated During Enti				ateme	nt	108 Haddor							
Abatement Performed Outside of N	ormal	Ho	urs			City, State &	Zip Code						
Describe:						Westmont,	NJ 08108						
Facility Occupied During Abatemen	t												
Scope of Work (Check all that apply)							N F	Containment	mitte NI.	o a o tivo	Dros		
☐ ≥3 sf or ≥3 lf			Poi	novatio	nn.			Containment i-Enclosure	WILL IN	eyalive	ries	sure	
≥160 sf ≥260 lf		H		nolitio	2015			ve Bag Proce	dures				
		Ш	Del	HOIILIO				i-Exempted a		-Friable	Pro	cedu	ire
Location of		Is	Loca	tion	1	Description	<u> </u>	Amo		Aba			
Asbestos-Containing				Used		Asbestos-Con		(Spe		-		2,11	1
Material (ACM)		S	olely	by		Material (A	CM)	SFo				Ē	m
TO BE ABATED				nce or		(i.e., thermal s				em	Repair	cap	nclo
in Facility (13)	- (	Justo	odiai (12)	Staff?		insulation, surfactor or other miscell				Removal	oair	Encapsulate	Enclosure
Work Area #1 Level A	`	Yes	No	N/A	Floo	r tile & Mastic (		(al) 400	SF	-		ate	(D)
Work Area #1 & #2 Level A		П	П			Floor tile & I		39,60	0 SF		П	П	П
Work Area #1 & #2 Level A		Ħ	币			Pipe/Fitting In:		4,50	Marine America de Company	X	Ħ	Ħ	Ħ
Work Area #1 & #2 Level A		Ħ	П			int Compound				X	Ħ	Ħ	Ħ
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	-	+ -	Ha	auler II		of Waste							
AbateTech, Inc.				187	50	14	TRRF La					-	
City, State						Disposal Date	City, State						
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Completed By (Print or Type)  Gwen Trumbetti			Tit		oord.	Signature `	et.			Date	140		
Owell Hullbetti				ips. C	Joiu.	M	U			8/27	112		

Date of Notification	(1) 8/27	/12		0.0000			ilding C Unive	owner / Operator	(2)	2012 5	SEP -	+ P	М 3	: 41	)
Agencies Notified  EPA  DEP  DOL  DOH  DCA	WINDS TO STORY	Initial Amended #15 Emergency Cancellation		T C P	rust lity, S rinc lame	eton of Co	ess of Prin & Zip Co , NJ 08 ontact tego, I	3544	ity E.A. MacN	lillań <sup>i</sup> Bido č	STOS LICE	:MS	ING		6
				2000	FA	CILIT	YINF	ORMATION							
	rsity –	patement is Taking F Firestone Librar		e (3)				Type of Facilit School (K Subchapt		mercial buil	dings, l			c.)	
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Name of Monitoring ATC Associates, Street Address		Hired by Building Ov	vner	(8)		AS	CM No.	AbateTech, Street Address		or (9)					
Bromley Corpor City, State & Zip Co	Bromley Corporate Center 3 Terri Lane City, State & Zip Code Burlington, NJ 08016							PO Box 25 City, State & 2 Lumberton,	Zip Code	n					
		oring Firm	ĪΤ	olon	hone	Num	her	Telephone Nu		Licens	se Num	ber			
Mike Keehn								609-265-210 Name of OSH	7			0529	9		
10/17/1	Scheduled Start Date (10) Scheduled Co							EMSL Analy	rtical						
Occupancy Status	Per	iod d	of Ab urs Rei	novati	on	Street Addres 108 Haddon City, State & Z Westmont,	Ave. Zip Code NJ 08108  Full Cont Mini-Enc			ative	Pres	sure			
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	ocation	n of ontaining	1		Loca nally	tion Used		Description Asbestos-Conf	of aining	Amour (Speci	nt fy				
Ma TO	terial (/ BE AB in Faci (13)	ACM) ATED lity	C	/lain		nce or Staff?		Material (AC (i.e., thermal sy insulation, surfact or other miscella	ystems ing, VAT	SF or L	.F)	Removal	Repair	Encapsulate	Enclosure
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Level A Elevator		by		X	H	-		e Insulation (Full (		150 L	in the second		Ħ	Ħ	Ħ
Mechanical Sha	-	8/8 #7\	+	믁	H			coustical Ceilir		800 S		X	Ħ	П	Ħ
	Level 1 - main Stair (WA #7) Level 1- Offices 1-14-D/1-12-D (WA#8)						+-~`	Radiator Li		120 S		Ø	Ħ	Ħ	П
Level 1- Unices Level 1- Trustees Read	-	=	H			Radiator L		40 SI	-	X	П	Ī	T		
Level 1- Trustees Reading Room (WA#9, 10 & 11)					H	T		Pipe Insula		50 L		Ti	Ħ		n
Name of Registered Waste Hauler					1000	JDEP auler	Waste	Cubic Yards of Waste	Name of Regis	stered Land					
AbateTech, Inc.						187	750	12	TRRF Landf	III					
City, State Lumberton, NJ								Disposal Date 9/28/12	City, State Tullytown, F	PA					
Completed By (Pri	/pe)			1,000	tle pps.	Coord.	Signature	V		A	ate 8/27	/12			

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Date of Notification				f Building Ov ton Univers	vner / Operator	(2)		2012	SEP .	-L	РН	<b>ک</b> .		
A	8/27/12	ation .		Ctro	~+ A	ddroop								
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⊠ EPA				City	ste	es of Princ	eton Univers	oity L	A. IVIACIVIIIIAII DI	49.55		<del>/ 3 -</del>	GCH	11
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□ DOH		rgency				f Contact	29 MMT 7			liei	epriori	ie ivi	imber	
☐ DCA	☐ Cano	ellation		Rok	ert	Ortego, P	.E.			г			-	
				F	ACI	LITY INFO								
Name of Facility W	here Abateme	ent is Taking Pl	ace (	(3)			Type of Facilit							
Princeton Unive	rsity - Fires	tone Library					School (k	<-12)						
Street Address			V-54	decentral					Other than K-12)					
One Washington	n Poad						Other (i.e	e. priva	te & commercial b	uildings,	home	es, e	c.)	
One washingto	ii itoau	8 4					Square Feet	•	# of Floors		g. Age			
City (5)		County (6)	IC	ounty	/ Co	ode (7)	1							
		Mercer		o carriej	,		Current Use (	Prior i	f being demolished	)				
Princeton		Mercei				2 2 11/24	University L		received A <u>e</u> rices in					
	Firm I Car d Is	Duilding Our	205/5	1		ASCM No.	The state of the s		Contractor (9)			-	-	
Name of Monitorin		by Building Owi	iei (o	) .		ASCIVI NO.	AbateTech,		Contractor (c)					
ATC Associates	i, inc.	-					Street Address	-						
Street Address		0.37	C:4	- 42			PO Box 25	55						
Bromley Corpor		3 Terri Lane,	Sun	e 12		-	City, State &	7in Co	do					-11-0-2-
City, State & Zip C							1							
Burlington, NJ			T= . t .		N	Lucker	Lumberton, Telephone No			nse Nur	mhar			
Project Manager for	or Monitoring I	-ırm		epnor -386		Number	609-265-210		Lice		00529	9		
Mike Keehn		0.1.1.1.0					Name of OSH		nitor					
Scheduled Start D		Scheduled Cor		8/12		(11)	EMSL Analy		iitoi					
10/17/		ment (Check o			-		Street Address			-				77.5
Occupancy Status	During Abate	During Entire F	Dario	ne)	hat	ement	108 Haddor							
		outside of Norm			ibai	Cirione	City, State &							_
	t Performed C	lutside of North	al n	ours										
Describe:							Westmont,	NJ U	100					
Manage Committee	cupied During		_			1000							-	
Scope of Work (C	heck all that a	pply)						$\boxtimes$	Full Containment	with Ner	rative	Pres	sure	
			NZ			untion		8	Mini-Enclosure		901.110			
≥3 sf or ≥3			$\bowtie$	3		vation		H	Glove Bag Proced	luros				
≥160 sf ≥2	260 If			ט ן	em	olition			Non-Exempted ar		riabla	Dro	andur	_
Est Service								M						
	Location of			s Loc			Description		Amo		Aba	teme	entry	pe
	stos-Containii	ng		rmal			Asbestos-Con Material (A		g (Spe SF or				m	
	aterial (ACM)			Sole inten			(i.e., thermal s			L1 )	Re	D	20	Enclosure
10	BE ABATED in Facility			stodia			sulation, surface				Removal	Repair	sde	Sos
7	(13)		Out	(1			or other miscell				val	Ħ.	Encapsulate	L.E
	(10)		Yes			N/A							(D)	
Level 1- Trustees Rea	ding Room (WA#	9, 10 & 11)	$\vdash$	ΤГ	7		Acoustical Ceilin	ng Plas	ter 300	SF				
Level B- West 0			TH	TT	11	X	Floor tile & N	/lastic	885					
Level 3- IAS Ro		The state of the s	T	T	71		Floor tile & I	Masti						
			11	T	7		oustical Ceili	Maria Maria - Transaction		_				
	Level 3- IAS Room 3-6-D (WA#13) Level 1- Main Lobby (platform area WA#14)					X	Pipe Insula		30	Marie Control of the		П	TI	
Level 3- IAS Ro	Level 1- Main Lobby (platform area WA#14)					H	i ipe iliadie				17	Ħ	Ħ	Ħ
Level 3- IAS Ro		1224 - 17 - 12			NIL	DEP Waste	Cubic Yards	Nam	e of Registered La	ndfill	1-1			_
Level 3- IAS Ro Level 1- Main Lobb	ed Wasta Har	ıler					of Waste			avecarifical T				
Level 3- IAS Ro	ed Waste Hau	ıler			пач	iler ID No. 1	oi vvasie							
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Level 3- IAS Ro Level 1- Main Lobb Name of Register AbateTech, Inc		ıler	-		пас	18750	12			- N= XI - 11X	7.00			
Level 3- IAS Ro Level 1- Main Lobb Name of Register AbateTech, Inc City, State	•	ıler			пас	18750	12 Disposal Date	City	State		200			
Level 3- IAS Ro Level 1- Main Lobb Name of Registers AbateTech, Inc City, State Lumberton, NJ		ıler				18750	12 Disposal Date 9/28/12	City			Date			1
Level 3- IAS Ro Level 1- Main Lobb  Name of Register  AbateTech, Inc City, State		aler			Title	18750	12 Disposal Date	City	State		Date <b>8/27</b>	/12	100	

Date of Notification	(1) 8/27/12					uilding n Univ	Owner / Operato	r (2)	2012 SEP -4	PM 3	: 41	)	
Agencies Notified EPA	Type Notific	ation	5	Stree F <b>rus</b>	et Add	ress of Pri	nceton Univers	sity E.A. Mad	LARF STOR	r. r.	). <i>1</i>		
□ DEP □ DOL □ DOH □ DCA	Eme	I nded #15 rgency cellation	F	City, Prin Nam	State ceto e of C	& Zip 0 n, NJ 0 contact ertego,	Code 18544		EMILIAN BIOG.	Telepho	6		per
				F/	ACILI	TY INF	ORMATION			.1			
Street Address	rsity – Fires						Type of Facili School (I Subchap Other (i.e	K-12) oter 8 (Other the e. private & co	mmercial buildi			etc.)	
							Square Feet	# of Flo	oors	Bldg. Ag	je		
City (5)	(5) County (6) nceton Merco  ne of Monitoring Firm Hired by Building C Associates, Inc. eet Address mley Corporate Center 3 Terri Land, State & Zip Code rlington, NJ 08016 ject Manager for Monitoring Firm the Keehn eduled Start Date (10) 10/17/11					(7)							
Princeton		Mercer					University I	A CONTRACTOR OF THE PARTY OF TH	Appropriate Control of the Control of Contro			men and	
		by Building Owi	ner (8)		AS	SCM No	<ul><li>Name of Aba</li><li>AbateTech,</li></ul>	tement Contra , Inc.	actor (9)				
Street Address Bromley Corpor	3 Terri Lane,	Suite	12			Street Addres PO Box 25	ss						
							City, State & Lumberton						
		Firm			e Nur -8800		Telephone N 609-265-210		License	Number 005			
		Scheduled Cor	mpletic			1)	Name of OSI EMSL Anal			de Anna all dell'a gardin da bane			
Occupancy Status Facility Clo	During Entire F	nly one Period	e) of A		nent	Street Addres	ss n Ave.						
Describe:			al Ho	urs			City, State & Westmont,						
Scope of Work (Ch ≥3 sf or ≥3	neck all that a				enova emolit			Mini-Er Glove I	ontainment with nclosure Bag Procedures kempted and No	5			
1	ocation of		Is	Loca	ation		Description		Amount				
Ma TO	terial (ACM) BE ABATED	ng	S Main	olely tena	ance of Staff	or ??	Asbestos-Con Material (A (i.e., thermal s insulation, surfac or other miscell	CM) ystems cing, VAT	(Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
Lovel 3 IAS Poor	ne 3 6 D/3-7	C (WA#13A)	П				Acoustical Ceilin	ng Plaster	34 SF		П		$d \Box$
			H				Pipe Insula		12 LF		H	H	H
			П	Ħ			Floor tile & I	Mastic	2,700 SF		H	Ħ	愩
The second secon			F				Floor tile & N	THE RESERVE AND THE PARTY OF THE PARTY.	1,454 SF	- promote			
						11						$ \Box$	
		Control of the Contro											
Name of Registere	d Waste Hau	ler	1	1000	lauler	Waste ID No.	of Waste		gistered Landfill				
AbateTech, Inc.					18	750	12	TRRF Land	dfill	1			
City, State Lumberton, NJ	**************************************						Disposal Date 9/28/12	City, State Tullytown,	PA				
	ame of Monitoring Firm Hired by Building TC Associates, Inc. treet Address romley Corporate Center 3 Terri La ity, State & Zip Code turlington, NJ 08016 roject Manager for Monitoring Firm like Keehn cheduled Start Date (10)					Coord.	Signature	d		Date <b>8/27</b>			

										2010				-
Date of Notificat								Owner / Operato	r (2)		EP -1	4 10	M a	
Agencies Notifie	8/27/12 d Type Notific	nation		Stro	ice	ddro	JUIA	ersity		ا کری۔ Millan Bldge			13	:41
EPA	a Type Notific	cation		Jue	et A	Addres	55 f D.:.	nceton University	Situ E A Bloc	Willen Bldg	STAC	Car	200	
DEP	☐ Initia	al		City	Ste	es o	Zin C	odo	Sity E.A. IVIAC	IVIIIIali Diugg	LICE	<u>Lil</u>	476	77.5
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LI DCA	L Can			83,630,000				LAND OF THE PARTY						
					AC	ILITY	INF	ORMATION						
Name of Facility				3)				Type of Facili						
Princeton Uni	versity – Fire	stone Library						School (I		1 100010000				
Street Address								- Account	oter 8 (Other th	- The state of the				
One Washing	ton Road									nmercial building	gs, hon	ies, e	etc.)	
							1	Square Feet	# of Flo	ors	ldg. Ag	е		
City (5)		County (6)	C	ount	у Сс	ode (7	7)							
Princeton		Mercer						Current Use	(Prior if being o	lemolished)			2.50	
		200						University I						
Name of Monito	ring Firm Hired	by Building Ow	ner (8	)	-	ASCI	M No.	PROPERTY AND PERSONS ASSESSMENT OF PERSONS ASSESSMENT ASSESSMENT ASSESSMENT ASSESSMENT ASSESSMENT ASSESSMENT ASSESSMENT ASSESSMENT A	tement Contra	ctor (9)			the management of	
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Street Address	00,01							Street Address						
Bromley Corp	orate Center	3 Terri Lane.	Suite	e 12				PO Box 25						
City, State & Zip		· · · · · · · · · · · · · · · · · · ·	-					City, State &	Zip Code					
Burlington, N								Lumberton						
Project Manage		Firm	Tele	phoi	ne N	lumbe	er	Telephone No		License N	umber			
Mike Keehn	.0		609					609-265-210			0052	29		
Scheduled Start	Date (10)	Scheduled Co	mpleti	on E	ate	(11)		Name of OSH	HA Monitor	and the second				
10/1	AND AND ADDRESS OF A SECOND PORCE.			8/12				EMSL Analy	ytical					
Occupancy Stat	us During Abate	ement (Check o	nly or	ne)				Street Address						
		During Entire F			bat	emen	it	108 Haddor	n Ave.					
Abateme	ent Performed (	Outside of Norm	al Ho	ours				City, State &	Zip Code					
Describe	:							Westmont,	NJ 08108					
☐ Facility (	Occupied Durin	g Abatement												
Scope of Work (	Check all that a	apply)							entre					
					1				Full Co	ntainment with N	egative	Pres	sure	}
≥3 sf or	≥3 If			R	eno	vatior	า		Mini-En	closure				
≥160 sf	≥260 If			D	emo	olition			Glove E	ag Procedures				
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	Material (ACM)			Solel				Material (A		SF or LF)	71		Ē	m
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9 7	in Facility		Cus			aff?		insulation, surfac		8	Remova	Repair	Encapsulate	Enclosure
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		***************************************	165	14	7				-	0.000.05				-
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Name of Registe	ered Waste Ha	uler		100		EP W		Cubic Yards	Name of Reg	istered Landfill				
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AbateTech, Inc.						1875	U	40	TRRF Land	1111		-		
City, State Lumberton, NJ								Disposal Date	City, State	DA		-		
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Completed By (F				1.0	Title		ond	Signature	14		Date	14.0		
Gwen Trumbet				(	hb	s. Co	ora.	1	$\mathcal{M}$		8/27	112		
				100				N 10			1			CONTRACTOR IN

D&S Proj. #: MS 12-303

### Fax: State of NJ

Aug	28	2012	03:06pm	P001/001
	-		The Assessed	-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

APPROVED Notification of Asbestos Abatement Na Dept of Health & Senior Services (Pursuant to NJAC 8:60 and 12:120) (signature) Date of Notification (1) Name of Building Owner/Operator (2) 2012 SEP 0 8 / 2 8 / 1 2 JACK FINN Agencies Notified Type Notification Street Address Initial ASBESTOS CONTROL EPA 533 PARK STREET & LICENSING Amended DEP City, State, Zip Code Amendment #: DOL. MONTCLAIR, NJ 07042 (including justification) ☑ DOH Telephone Number Name of Contact ☐ DCA JACK FINN Cancellation FACILITY INFORMATION Name of facility where abatement is taking place (3) Type of Facility (4) School (K-12) JACK FINN Subchapter 8 (Other than K-12) Street Address Other (Private/Commercial Bldgs./Homes, etc. 533 PARK STREET # of Floors Bldg, Age Square Feat City (5) County (6) County Code (7) (State use only) Current Use (Prior if being domolished) MONTCLAIR **ESSEX** Name of Monitoring Firm Hired by Bidg. Owner (8) ASCM No. Name of Abatement Contractor (9) D & S RESTORATION, INC. Street Address Street Address 20 California Ave. City, State, Zip Code City, State, Zip Code Paterson, NJ 07503 Project Manager for Monitoring Firm elephone Number Phone Number License Number 973-345-8020 00159 Name of OSHA Monitor Start Date (10) Sched, Completion Date (11) D & S Restoration, Inc. 08/29/12 09/16/12 Street Address Occupancy Status During Abatement (Check only one) 20 California Avenue Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Other-Describe: NORMAL HOURS Paterson, NJ 07503 Scope of Work (check all that apply) Full Containment w/negative pressure X >3 st or >3 it Renovation Mini-enclosure Glovebag procedure ≥160 sf or ≥260 lf Demolition Non-Exempled (\*) and Non-friable procedure is location normally used solely Location of E E by maintonanco/custodial 받 asbestos-containing n Amount Description of asbestos-containing staff(12) m n material (acm) to be C (Specify SF or material (ACM) 0 abated in facility (13) a a NO N/A D e 2ND FLOOR PIPE INSULATION 30 L FT X Registered Waste Heuler Name of Registered Landfill NJDEP Hauler ID# Cubic Yards of Waste D & S RESTORATION, INC. 13506 1 YD TULLYTOWN, RESOURCE RECOVERY City, State Disposal Date City, State PATERSON, NJ 07503 08/30/12 TULLYTOWN, PA

BOGDAN JOLDZIC PRESIDENT ASB-41 Do not use this form for asbestus licensure exempted activities,

Title

Completed by (Print or Type)

Signature

Date

08/28/12

D&S Proj. #: MS 12-303

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

		74					1712		PM 3: 3	)				
Date of Notification			Name of B	uilding Owr	ner/Operator (2	)	47.	SEP-1	Z Di.					
Agencies Notified			JACK F	INN			6320	~	" PM 3: 3	7			- 1	
EPA	Type Notificati	on S	Street Addr	ess		11	2	7/08	Con.	-				
☐ DEP	Amended		533 PA	RK STRE	ET		ζ.	LICEN	SINGRO					
_	Amendment #:	[	City, State,	Zip Code				1						
■ DOL	M Emergency		MONT	CLAIR, N	IJ 07042				()					
□ DOH	(including justification)	N	lame of Co	ontact					Telephone	Number		denote t		
DCA	Cancellation		JACK I	FINN					Those years	Rear !				
		19		FAC	ILITY INFORM	MOITA	I		1.20					
Name of facility wh	nere abatement is	s taking pla	ace (3)			Abra -		Туре	of Facility (4)		-			
JACK FINN									School		020 00	n 910	(*************************************	
Street Address									☐ Subchar ☐ Other (P				-12)	
533 PARK ST	DEET								Bldgs./H	omes, e	tc.			
City (5)	KCL1	T Cou	nty (6)			Cou	inty Code (7)	- Squ	are Feet #	of Floor	S	BI	dg. A	ge
0.13 (0)		Joan	11.3 (0)			1 2000	ite use only)	Cur	rent Use (Pric	r if hein	a den	olish	-d)	
MONTCLAIR			SEX			92			10111 000 (1 110	a ii belii	g don	10110111	,,,	
Name of Monitorin	g Firm Hired by E	3ldg. Owne	er (8)		ASCM No.		Name of Abateme	nt Contra	ctor (9)					
					-		D & S RESTO	RATIO	N, INC.					
Street Address			Charles Comment	-			Street Address							
							20 California				-			
City, State, Zip Cod	е						City, State, Zip Coo							
Project Manager for	Monitoring Firm		Lo	h N I			Paterson, NJ	1242						
Project Manager 10	i Monitoring Pinn		IP	hone Numb	per		Telephone Numbe 973-345-802			License 0	Numt 0159	oer		
St. 1 D. 1. (10)		10.1					Name of OSHA M				0137			
Start Date (10)		Sched	I. Complet	ion Date (1	1)		D & S Restora		c.					
08/29/12		09/1	0				Street Address		200					de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la
Occupancy Status I							20 California	Avenue						
	d/vacated during erformed outside						City, State, Zip Coo	de						
Other-Descri	be: NORMAL H	OURS					Paterson, NJ	07503						
Scope of Work (ch	eck all that apply	')						Full Co	ntainment w/r	egative	press	ure		
$\ge 3$ sf or $>3$ If	$\boxtimes$	Renovatio	n						nclosure					
≥160 sf or ≥2	60 If	Demolition	1				D L		ag procedure xempted (*) ar		riable	proce	edure	
Location of			n normally enance/cus	used solely	у	N					R	R	Ε	E
asbestos-con material (acm		staff(12)	, nance/cu:	stodiai .	Descripti material		sbestos-containing		Amount (Specify SF	or	m	e p	n c	n
abated in fac		Yes	No	N/A	material	(ACIVI)			LF)	O.	O V	a i	a	L
2ND FLOOR					PIPE INSU	ILATI	ON	- 30	LFT		e	r	$\overline{\Box}$	In
					1							H	片	卄
		7-7-2-14-24-				190, 1				3 77	Ħ	H	H	H
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				i							H	Ħ	Ħ	亓
Registered Waste H			EP Hauler	The state of the s	ubic Yards of \	Vaste	Name of Registere							
D & S RESTOR.	ATION, INC.	135	00		I YD		TULLYTOWN	N, RESO	URCE REC	OVER	Y			
City, State PATERSON, N.	J 07503			Disposal D 08/30/1			City, State TULLYTOW	N DA						
Completed by (Print		Title			Signature		I TOPPITOMI	II, IA		Date	-			
BOGDAN JOLI	5.51	PRESID.	ENT							08/28/	12			
ASB-41	*	Do not use	e this form	for asbesto	os licensure ex	empted	activities.							

004351

D&S Proj. #: MS 12-304

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

							¥ •	or less to	14	En		
Date of Notification (1)		Name of B	uilding Ow	ner/Operator (2)	)							
10  8  / 2  8  / 1  2		RESIDI	ENTIAL F	BUILDING			2012 SI	P-4	PM	3: 3	E	
Agencies Notified Type No	otification	Street Add	ress				<sup>3</sup> 57 E S & 1				()	
DEP Amend	ded	18 WIL	LOW ST	REET			2.1	105	.ON	TRO	1	
Amendm	ent #:	City, State,	Zip Code				<u>CE 1</u>	11 E.N.	MAG	1	Cite.	
DOL ☐ Emerg		ELMW	OOD PA	RK, NJ							( )	
DOH (including justification)		Name of Co	ontact				Telephoi	ne Numbe	er			
□ DCA □	ellation	JANE	FERLAN'	TI			18083	1000				
			FAC	CILITY INFORM	OITA	N						
Name of facility where abater	ment is taking	place (3)		are designation of the second		11	Type of Facility	(4)				
JANE FERLANTI								K - 12				
Street Address								apter 8 (				
10 WILLOW OTREET								(Private/0 /Homes,		ercial		
18 WILLOW STREET City (5)	10	ounty (6)					Square Feet	# of Floo	ors	E	lldg. A	∖ge
City (3)	"	bunty (6)				unty Code (7) ate use only)						
ELMWOOD PARK		BERGEN			(018	ate use only)	Current Use (P	rior if bei	ng den	nolish	ied)	
Name of Monitoring Firm Hire	ed by Bldg. Ov	vner (8)		ASCM No.		Name of Abatement C	ontractor (9)					
						D & S RESTORA	TION, INC.					
Street Address						Street Address						
						20 California Ave						
City, State, Zip Code						City, State, Zip Code						
Drainet Manager for Maritaria	F:				_	Paterson, NJ 075	03					
Project Manager for Monitoring	g Firm	P	hone Numb	per		Telephone Number		License				
						973-345-8020 Name of OSHA Monito		1(	0159			
Start Date (10)	Sch	ned. Complet	ion Date (1	1)		D & S Restoration						
09/08/12	1,175,000	/14/12				Street Address	., 1110.				-	
Occupancy Status During Aba		30 30				20 California Ave	nue					
Facility closed/vacated d	luring entire p	eriod of abate	ement.		11	City, State, Zip Code						
Describe:		ar racility nou	rs-									
Other-Describe: NORM	A CONTRACTOR OF THE STATE OF TH				_	Paterson, NJ 0750	03					
Scope of Work (check all that >3 sf or >3 If	100000000000000000000000000000000000000						Il Containment w	/negative	press	ure		
	Renova						ni-enclosure ovebag procedu	0				
≥160 sf or ≥260 lf	Demolit						on-Exempted (*)		friable	proc	edure	)
Location of	ls loca	tion normally ntenance/cus	used solely						R	R	E	E
asbestos-containing material (acm) to be	staff(12			Descriptio material (A		sbestos-containing	Amount (Specify S	F or	m	e p	n	n
abated in facility (13)	Yes	No	N/A	Thaterial (/	ACIVI)		LF)	. 01	o v	a i	a p	L
BASEMENT				BARE HEA	TINC	G PIPES	90 L FT		e	6		10
919												
Registered Waste Hauler		DEBUS	D# 1.0	ubio Varda - CII	lect	IN SECTION						
D & S RESTORATION, II	NC.	DEP Hauler I 3506	NO CONTRACTOR OF THE PROPERTY	ubic Yards of W YD	vaste	Name of Registered La TULLYTOWN, RI		COVER	Y			
City, State	A STATE OF THE STA		Disposal D			City, State						-
PATERSON, NJ 07503 Completed by (Print or Type)	Tip-		09/10/12	No.		TULLYTOWN, PA	A		N2			F2. (CI)
BOGDAN JOLDZIC	Title PRESI	DENT		Signature				Date	10			
ASR-41			for ashesto	s licensure ever	motod	a attivities		08/28/	12	_		

CK004330

	State of NJ	
Notification	of Asbestos Abatement	
(Pursuant to	NJAC 8:60 and 12:120)	1

D&S Proj. #: MS 12-302				tion of Asbe		Abatement and 12:120)	2012 St 45450 & L	ECE	14	E		
						100	20170	-0		(424)		
Date of Notification (1)	Nan	ne of Build	ling Owner/	Operator (2)			~ 0/	4	PM	<b>3</b> . ,		
$\frac{0}{8} \frac{8}{12} \frac{7}{7} \frac{1}{12}$		ARGAR	ET SIMO	N			5 34FC	- 164.		٠, ~	5	
Agencies Notified Type Notification	1 Stre	et Address	S				81	103 C	0N7	Da.		
EPA Initial Amended	1 -3:	37 KIRK	LAND					ILLENS	ING	NUL	n O	
DEP Amendment #:	1	, State, Zip								0	7	
DOL Emergency			MBŌY, 1	V.I						•		
DOH (including	95 1 - 1 - 2 - 2	ne of Conta					Telephone	Number				
justification)		MARCAI	DET CIM	ONI			Newpoint	Silvered .				
DCA Cancellation		MARGA	RET SIM					-				
			FACIL	ITY INFORMA	ATION		T=					
Name of facility where abatement is  MARGARET SIMON  Street Address	taking place	e (3)					Subcha Other (I	(K - 12) upter 8 (Ot Private/Co lomes, et	mmer c.	cial		
337 KIRKLAND PLACE							Square Feet	# of Floors	5	BIC	g. Ag	ge
City (5)	County	/ (6)				ty Code (7)		15 5 - 1-1		- Unba	d)	
DEPTH AMDOV	MID	DLESEX			(State	use only)	Current Use (Pr	or it being	g aemo	olisne	a)	
PERTH AMBOY  Name of Monitoring Firm Hired by B				ASCM No.	TI	Name of Abatemen	t Contractor (9)		-			
Name of Monitoring Firm Fines by D		(-/				D & S RESTOI	RATION INC.					
					=	Street Address						
Street Address						20 California A	Ave.					
City, State, Zip Code					-	City, State, Zip Code		-	-			and the second
City, State, Zip Code						Paterson, NJ (						
Project Manager for Monitoring Firm		Pho	one Numbe	r		Telephone Number		License	Numb	er		
Project Manager for Monitoring 1 mm		1.30				973-345-802	0	0(	0159			
	10.1.1	Olatio	n Date (11)		-	Name of OSHA Mo	onitor					
Start Date (10)	Sched.	Completio	in Date (11)			D & S Restora	ition, Inc.					
08/28/12	09/06/	12	7222			Street Address						
Occupancy Status During Abatemen						20 California A						
Facility closed/vacated during Abatement performed outside	entire period of normal fa	d of abater acility hours	ment. s-			City, State, Zip Cod	le					
Describe: NORMAL H	OURS					Paterson, NJ (	07503					
Scope of Work (check all that apply		1				Σ Σ Σ	Full Containment w Mini-enclosure Glovebag procedu Non-Exempted (*)	re	friable		edure	
Location of			used solely				200		R	R	E	E
asbestos-containing	by mainter staff(12)	nance/cus	todial			sbestos-containing	Amount (Specify S	E or	m	р	n c	n
material (acm) to be abated in facility (13)			T	material	(ACM)		LF)		O V	a	a p	L
abated in facility (10)	Yes	No	N/A	de la					e	r	P	<del> </del>
BASEMENT		X		PIPE INSU			30 L FT				닏	쓔
BASEMENT		X		PIPE INSU	JLATI	ON	30 SQ FT	-	X		ᆜ	님
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Registered Waste Hauler D & S RESTORATION, INC.	NJDE 135	100.000	1	ubic Yards of YD	Waste	The same of the sa	ed Landfill N, RESOURCE RE	COVER	Y			
City, State			Disposal D			City, State	N DA					
PATERSON, NJ 07503			08/29/1	Signature		TULLYTOW	IN, FA	Date	-	-		
Completed by (Print or Type) BOGDAN JOLDZIC	Title PRESIDI	ENT		Oignature				08/27/	12			
ACD 44	* Do not use	this form	for asbesto	s licensure ex	kempted	activities.						

D&S Proj. #: MS 12-305

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

									Age.	9 1			
Date of Notificatio	7 / 1 12			uilding Own ON KIPP	er/Operator (2)		i ja	2012 SE	P4	PH	3: 1	5	5.7
Agencies Notified EPA	Initial	ion	treet Add	ress ISON HEI	CUTC	A		458ES & 1	TOS (	: :OM:	r D O	1	
☐ DEP	Amended Amendment #:			Zip Code	GHIS			Če	ICEN	HIG	NU	L	
DOL												6	
□ DOH	Emergency (including	1 -	ame of Co	OFF, NJ			- transference	Telephon	o Numbe		-		-
100-00	justification)							releption		:1			
DCA	Cancellation	1 - 1	RYER	SON KIPP				( ) ( )	4				
				FAC	ILITY INFORM	ATION	1						
Name of facility w	vhere abatement i	s taking pla	ice (3)			- 22,000		Type of Facility (					
RYERSON K	IPP								(K - 12 apter 8 (		han K	(-12)	
Street Address					T <sub>a</sub>	7.0		Other (	Private/0	Comme		,	
4 MADISON	HEIGHTS								# of Floo		В	ldg. A	ge
City (5)		Cour	nty (6)			Cou	inty Code (7)						
WYCKOFF		BEI	RGEN		-	(Sta	te use only)	Current Use (P	rior if bei	ng den	nolish	ed)	
Name of Monitori	ng Firm Hired by				ASCM No.	<u> </u>	Name of Abatemen	t Contractor (9)		_		-	
		-				-	D & S RESTOR						
Street Address					-	_	Street Address	CATION, INC.	_				
							20 California A	Ave					
City, State, Zip Co	de					-	City, State, Zip Code			***		Contract of the same	
							Paterson, NJ 0						
Project Manager fo	or Monitoring Firm	1	F	hone Numb	er		Telephone Number	7,000	License	Numb	oer		
							973-345-8020	0	(	0159			
Start Date (10)		Sched	. Comple	tion Date (1	1)	-	Name of OSHA Mo						
09/06/12		09/14	1/12				D & S Restora	tion, Inc.	_				
Occupancy Status	During Abatemer					-		5021002					
Facility close	ed/vacated during performed outside	entire perio	od of abat				20 California A City, State, Zip Code		-				
Describe:	ribe: NORMAL H	IOURS		+.		-	Paterson, NJ 0	7503					
Scope of Work (c							Tutorbon, 1 to 0		loo tirr				
$\ge 3$ sf or $\ge 3$ li $\ge 160$ sf or $\ge 3$	f 🛛	Renovatio  Demolition						Full Containment w  Mini-enclosure  Glovebag procedur	e	10			
		NORTH CONTRACTOR		used solely	/			Non-Exempted (*)	and Non	-friable	Proc	1	
Location of asbestos-co	ntaining	by mainte				on of a	sbestos-containing	Amount		е	e	E n	E
material (ac	m) to be	staff(12)			material (		spesios-containing	(Specify S	For	m	p	C	n
abated in fac	cility (13)	Yes	No	N/A				LF)		V	i	a p	L
BASEMENT			X		PIPE INSU	LATI	ON	165 L FT	-	e	r	П	t
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100 100 100 200										#	H	H	H
Registered Waste I D & S RESTOR		NJDE 135	P Hauler 06		ubic Yards of V YDS	Vaste	Name of Registere	d Landfill , RESOURCE RE	COVE	v		LLI.	1
City, State	,			Disposal D			City, State	, RESOURCE RE	COVE	(1		-	
PATERSON, N	NJ 07503			09/07/1			TULLYTOWN	, PA					
Completed by (Prin BOGDAN JOL		Title PRESIDI	ENT		Signature	7.5			Date 08/27/	/12			
ASR-41				for asbesto	s licensure exe	mntec	activities		00/2//			_	

### State of NJ Notification of Asbestos Abatement

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

Date of Northcistion (1)   19   18   1/3   10   1/1   12   1   12   16   16   16   16   16	B & G proj. #:	2012-140		,					PF Check	$\frac{\# \cup I}{125}$	1	<u> </u>					
Description   Description	Date of Notification (1)		I I Na	me of Buil	ding Owne	er/Operator (2)			00.	¥ (c.f.)							
DPP   Series   Initial   County   Color								2012 SEP -4 B	) ld 2 m								
South River, NJ 08882  FACILITY INFORMATION  Name of facility where abatement is taking place (3)  Joseph Lombardo  FACILITY INFORMATION  Name of facility where abatement is taking place (3)  Joseph Lombardo  FACILITY INFORMATION  Name of facility where abatement is taking place (3)  Joseph Lombardo  Street Address  6 Northern Street  6 Northern Street  City (9)  South River, NJ 08882  Warren  Name of Monitoring Firm Hired by Bidg. Owner (9)  South River, NJ 08882  Warren  ASCM No.  Info Record	Agencies Notified   T							.5	A. modes	1. O. M.	j	-					
South River, NJ 08882  FACILITY INFORMATION  Name of facility where abatement is taking place (3)  Joseph Lombardo  FACILITY INFORMATION  Name of facility where abatement is taking place (3)  Joseph Lombardo  FACILITY INFORMATION  Name of facility where abatement is taking place (3)  Joseph Lombardo  Street Address  6 Northern Street  6 Northern Street  City (9)  South River, NJ 08882  Warren  Name of Monitoring Firm Hired by Bidg. Owner (9)  South River, NJ 08882  Warren  ASCM No.  Info Record		Initial	6	Norther	n Street			SOTOS CONTROL									
South River, NJ 08882  FACILITY INFORMATION  Name of facility where abatement is taking place (3)  Joseph Lombardo  FACILITY INFORMATION  Name of facility where abatement is taking place (3)  Joseph Lombardo  FACILITY INFORMATION  Name of facility where abatement is taking place (3)  Joseph Lombardo  Street Address  6 Northern Street  6 Northern Street  City (9)  South River, NJ 08882  Warren  Name of Monitoring Firm Hired by Bidg. Owner (9)  South River, NJ 08882  Warren  ASCM No.  Info Record	☐ DEP			y, State, Z	ip Code			- LICENSING									
Second   Cancellation   Second   Cancellation   Second   Completed   Second   Cancellation   Second   S	☑ DOL [	Amendm															
DCA   Joseph Lombardo   FACILITY INFORMATION	☑ DOH	<b>7</b>	0.000	ne of Con	tact				Telephon	e Number							
Name of facility where abatement is taking place (3)   Joseph Lombardo   Joseph Lo	☐ DCA L	Cancellat		7													
School (K-12)   School (K-12)   School (K-12)   Subchaipter 8 (Other than K-12)   Subchaipter 9 (Other than K-12)   Subchaipter 9 (Other than K-12)   Subchaipter 9 (Other than K-12)   Subchaipter 9 (Other than K-12)   Subchaipter 9 (Other than K-12)   Subchaipter 9 (Other than K-12)   Subchaipter 9 (Other than K-12)   Subchaipter 9 (Other than K-12)   Subchaipter 9 (Other than K-12)   Subchaipter 9 (Other than K-12)   Subchaipter 9 (Other than K-12)   Subchaipter 9 (Other than K-12)   Subchaipter 9 (Other than K-12)   Subchaipter 9 (Other than K-12)   Subchaipter 9 (Other than K-12)   Subchaipter 9 (Other than K-12)   Subchaipter 9 (Other than K-12)   Subchaipter 9 (Other than K-12)   Subchaipter 9 (Other tha					FACI	LITY INFORM	ATION										
Subchapler 8 (Other than K-12)   Street Address   Subchapler 8 (Other than K-12)   Other (Private/Commercial lighgs./Homes, etc.   Square Feet   # of Floors   Bidg. Ag (State use only)   Current Use (Prior if being demolished)   residential   Name of Abatement Hured by Bidg. Owner (8)   ASCM No.   Name of Abatement Contractor (9)   B & G Restoration, Inc.   Street Address   S	Name of facility where	e abatement is	taking place	e (3)													
Street Address 6 Northern Street City (5) South River, NJ 08882 Name of Monitoring Firm Hired by Bitg. Owner (8) Name of Monitoring Firm Hired by Bitg. Owner (8) Name of Monitoring Firm Hired by Bitg. Owner (8) Name of Monitoring Firm Hired by Bitg. Owner (8) Name of Monitoring Firm Hired by Bitg. Owner (8) Name of Monitoring Firm Hired by Bitg. Owner (8) Name of Monitoring Firm Phone Number Street Address 105 Ryerson Road City, State, Zip Code Lincoln Park, NJ 07035 Telephone Number 9713-095-6869 0378 Name of OSHA Monitor B & G Restoration, Inc. Street Address 105 Ryerson Road City, State, Zip Code Lincoln Park, NJ 07035 Telephone Number 973-696-6869 0378 Name of OSHA Monitor B & G Restoration, Inc. Street Address 105 Ryerson Road City, State, Zip Code Lincoln Park, NJ 07035 Telephone Number 973-696-6869 0378 Name of OSHA Monitor B & G Restoration, Inc. Street Address 105 Ryerson Road City, State, Zip Code Lincoln Park, NJ 07035 Telephone Number 973-696-6869 0378 Name of OSHA Monitor B & G Restoration, Inc. Street Address 105 Ryerson Road City, State, Zip Code Lincoln Park, NJ 07035 Telephone Number 973-696-6869 0378 Name of OSHA Monitor B & G Restoration, Inc. Street Address 105 Ryerson Road City, State, Zip Code Lincoln Park, NJ 07035 Telephone Number 973-696-6869 0378 Name of OSHA Monitor B & G Restoration, Inc. Street Address 105 Ryerson Road City, State, Zip Code Lincoln Park, NJ 07035 Telephone Number 973-696-6869 0378 Name of OSHA Monitor B & G Restoration, Inc. Street Address 105 Ryerson Road City, State, Zip Code Lincoln Park, NJ 07035 Telephone Number 973-696-6869 0378 Name of OSHA Monitor B & G Restoration, Inc. Street Address 105 Ryerson Road City, State, Zip Code Lincoln Park, NJ 07035 Telephone Number 973-696-6869 0378 Name of OSHA Monitor B & G Restoration, Inc. Street Address 105 Ryerson Road City, State, Zip Code Lincoln Park, NJ 07035 Telephone Number 973-696-6869 0378 Name of Abatement Contractor (8) B & G Restoration, Inc. Street Address 105 Ryerson Road City, State, Zip Code Lincoln Park,										e 183	ther th	an K-	12)				
6 Northern Street  City (6)   County (5)   County (2cde (7)	Market Street,						_			0.50			/				
South River, NJ 08882  Name of Monitoring Firm Hired by Bidg. Owner (8)  Name of Monitoring Firm Hired by Bidg. Owner (8)  Name of Monitoring Firm Hired by Bidg. Owner (8)  Name of Monitoring Firm Hired by Bidg. Owner (8)  Name of Monitoring Firm Hired by Bidg. Owner (8)  Name of Monitoring Firm Hired by Bidg. Owner (8)  Name of Monitoring Firm Contractor (9)  B & G Restoration, Inc.  Street Address  105 Ryerson Road  City, State, Zip Code  Lincoln Park, NJ 07035  Telephone Number  973-696-6869  0378  Name of OSHA Monitor  B & G Restoration, Inc.  Street Address  105 Ryerson Road  City, State, Zip Code  Lincoln Park, NJ 07035  Telephone Number  973-696-6869  0378  Name of OSHA Monitor  B & G Restoration, Inc.  Street Address  105 Ryerson Road  City, State, Zip Code  Lincoln Park, NJ 07035  Cocupancy Status During Abstement (Check only one)    Stally closed Address   105 Ryerson Road   City, State, Zip Code	Street Address											Bld	a Aa	A			
South River, NJ 08882   Warren   Warren   South River, NJ 08882   Warren   Warren   Redetatial   Name of Monitoring Firm Hired by Bidg. Owner (8)   ASCM No.   Name of Monitoring Firm Hired by Bidg. Owner (8)   ASCM No.   Name of Monitoring Firm   Phone Number   Street Address	6 Northern Street			(0)				1. 0 - 1 - (7)	Square Feet	# 01 F1001:	,	Dia	9. 7.9				
Name of Monitoring Firm Hired by Bildg. Owner (8)  Name of Monitoring Firm Hired by Bildg. Owner (8)  Name of Monitoring Firm Hired by Bildg. Owner (8)  Name of Monitoring Firm Hired by Bildg. Owner (8)  B & G Restoration, Inc.  Street Address  105 Ryerson Road  City, State, Zip Code  Lincoln Park, NJ 07035  Telephone Number  973-696-6869  Name of OSHA Monitor  B & G Restoration, Inc.  Street Address  105 Ryerson Road  City, State, Zip Code  Lincoln Park, NJ 07035  Telephone Number  973-696-6869  Name of OSHA Monitor  B & G Restoration, Inc.  Street Address  105 Ryerson Road  City, State, Zip Code  Lincoln Park, NJ 07035  Telephone Number  973-696-6869  Name of OSHA Monitor  B & G Restoration, Inc.  Street Address  105 Ryerson Road  City, State, Zip Code  Lincoln Park, NJ 07035  Telephone Number  973-696-6869  O378  Name of OSHA Monitor  B & G Restoration, Inc.  Street Address  105 Ryerson Road  City, State, Zip Code  Lincoln Park, NJ 07035  Telephone Number  973-696-6869  O378  Name of OSHA Monitor  B & G Restoration, Inc.  Street Address  105 Ryerson Road  City, State, Zip Code  Lincoln Park, NJ 07035  Telephone Number  973-696-69699  OSHA Monitor  B & G Restoration, Inc.  Street Address  105 Ryerson Road  City, State, Zip Code  Lincoln Park, NJ 07035  Telephone Number  973-696-69699  OSHA Monitor  B & G Restoration, Inc.  Street Address  105 Ryerson Road  City, State, Zip Code  Lincoln Park, NJ 07035  Telephone Number  973-696-69699  OSHA Monitor  B & G Restoration, Inc.  Street Address  105 Ryerson Road  City, State, Zip Code  Lincoln Park, NJ 07035  Telephone Number  973-696-69699  OSHA Monitor  B & G Restoration, Inc.  Street Address  105 Ryerson Road  City, State, Zip Code  Lincoln Park, NJ 07035  Telephone Number  973-696-69699  OSHA Monitor  B & G Restoration, Inc.  Street Address  105 Ryerson Road  City, State, Zip Code  Lincoln Park, NJ 07035  Telephone Number  105 Ryerson Road  City, State  Lincoln Park, NJ 07035  Description of asbestos-containing material (ACM)  Non-friable procedure  Non-friable	City (5)	Count	y (6)					Current Use (F	rior if being	g dem	olishe	d)					
Name of Monitoring Firm Hired by Bldg. Owner (8)  ASCM No.  ASCM No.  ASCM No.  ASCM No.  ASCM No.  B & G Restoration, Inc.  Street Address  105 Ryerson Road  City, State, Zip Code  Lincoln Park, NJ 07035  City, State  Location of asbestos-containing material to be absted in facility (13)  Passement  AscM No.  AscM No.  B & G Restoration, Inc.  Street Address  105 Ryerson Road  City, State, Zip Code  Lincoln Park, NJ 07035  City, State  Lincoln Park, NJ 07035	South River, NJ (	08882	Warn	en					residential								
Street Address  City, State, Zip Code  City, State  City,	Name of Monitoring F	irm Hired by E	Ildg. Owner	(8)	I	ASCM No.		Name of Abatemen	nt Contractor (9)								
105 Ryerson Road   City, State, Zip Code   Lincoln Park, NJ 07035	n/a		U-554W 2000 20						tion, Inc.								
City, State, Zip Code    City, State, Zip Code	Street Address																
Lincoln Park, NJ 07035   Telephona Number   973-696-6869   0378							_					and a super					
Project Manager for Monitoring Firm	City, State, Zip Code																
Scheduled Start Date (10)  9/10/2012  9/11/2012  Occupancy Status During Abatement (Check only one)    Facility closed/vacated during entire period of abatement.     Abatement performed outside of normal facility hours-   Describe:     Other-Describe:     Demolition   Renovation   Full Containment w/negative pressure   Glovebag procedure   Non-friable procedure	Distances for Monitoring Eirm			Ipi	one Numb	er	_										
Scheduled Start Date (10)  9/10/2012    9/11/2012   9/11/2012   9/11/2012   9/11/2012   9/11/2012   9/11/2012   9/11/2012   9/10/2012	Project Manager for Monitoring Firm			1	one rumb			1									
9/10/2012  9/11/2012  Occupancy Status During Abatement (Check only one)    Facility closed/vacated during entire period of abatement.     Abatement performed outside of normal facility hours-Describe:     Other-Describe:	2 11 101 10 10 10 10			Completi	on Date (1:	1)	_										
Occupancy Status During Abatement (Check only one)    Facility closed/vacated during entire period of abatement.     Abatement performed outside of normal facility hours-Describe:     Other-Describe:     Other-Describe:     Scope of Work (check all that apply)     Demolition   Renovation   Full Containment w/negative pressure   Glovebag procedure	Scheduled Start Date	(10)			on Date (1	.7											
Facility closed/vacated during entire period of abatement.   Describe:   City, State, Zip Code   Lincoln Park, NJ 07035		- Abstrace					_										
Abatement performed outside of normal facility hours—Describe:    Other-Describe:   Lincoln Park, NJ 07035					ment.												
Other-Describe:   Lincoln Park, NJ 07035	Abatement perfo							Oity, Otato, Zip Oot									
Scope of Work (check all that apply)  □ Demolition □ Renovation □ Full Containment w/negative pressure □ Glovebag procedure  □ Signature □ Signature □ Non-friable procedure								· Lincoln Park,	NJ 07035								
Demolition   Renovation   Full Containment w/negative pressure   Glovebag procedure   Square   Squa			')														
Location of asbestos-containing material to be abated in facility (13)  Basement    Solution normally used solely maintenance/custodial staff(12)   Description of asbestos-containing material (ACM)   Description of asbestos-containing material (ACM)   Completed by (Print or Type)   Title   Signature   Completed by (Print or Type)   Title   Completed by (Print or Type)   Ti		-		1			F	ull Containment w/r	negative pressure	Glove	oag pr	ocedu	ire				
Location of asbestos-containing material to be abated in facility (13)  Basement    Sociation normally used solely by maintenance/custodial staff(12)   Yes   No   N/A      Page    >3 sf or >3 If		≥160 sf or ≥	260 If			× I	fini-enclosure		Non-fr	iable p	proced	dure	200000000000000000000000000000000000000				
asbestos-containing material to be abated in facility (13)  Basement  Description of asbestos-containing material (ACM)  Description of asbestos-containing material (ACM)  N/A  Description of asbest	Location of	-				У					553			E			
Basement    Yes   No   N/A     N/A     N/A     N/A     N/A     N/A     N/A     N/A	asbestos-containing by maintenan			nance/cus	todial			sbestos-containing		SF or	m	р	10.100	n			
Basement    Dippe insulation   110 lf		y (13)		No	N/A	material	(ACIVI)				1	a	10000	L			
Registered Waste Hauler B & G Restoration, Inc.    NJDEP Hauler ID#   Cubic Yards of Waste   Name of Registered Landfill			, 00						11016	-	-	r					
B & G Restoration, Inc.  19563  1 1/2 yards  Tullytown Resource & Recovery Center  City, State Lincoln Park, NJ 07035  Completed by (Print or Type)  Title  Signature  Completed Disposal Date 9/11/2012  Tullytown, PA  Date 1 1/2 yards  City, State  Tullytown, PA  Completed by (Print or Type)  Date 1 1/2 yards  City, State  Signature  Completed by (Print or Type)	Basement				II X	pipe insula	ation		11011			片	片	片			
B & G Restoration, Inc.  19563  1 1/2 yards  Tullytown Resource & Recovery Center  City, State Lincoln Park, NJ 07035  Completed by (Print or Type)  Title  Signature  Completed Disposal Date 9/11/2012  Tullytown, PA  Date 1 1/2 yards  City, State  Tullytown, PA  Date 1 1/2 yards  City, State  Signature  Completed by (Print or Type)  Title					-	-				+	耑	H	H	片			
B & G Restoration, Inc.  19563  1 1/2 yards  Tullytown Resource & Recovery Center  City, State Lincoln Park, NJ 07035  Completed by (Print or Type)  Title  Signature  Completed Disposal Date 9/11/2012  Tullytown, PA  Date 1 1/2 yards  City, State  Tullytown, PA  Date 1 1/2 yards  City, State  Signature  Completed by (Print or Type)  Title					-		-			1	一	H	一	ā			
B & G Restoration, Inc.  19563  1 1/2 yards  Tullytown Resource & Recovery Center  City, State Lincoln Park, NJ 07035  Completed by (Print or Type)  Title  Signature  Completed Disposal Date 9/11/2012  Tullytown, PA  Date 1 1/2 yards  City, State  Tullytown, PA  Date 1 1/2 yards  City, State  Signature  Completed by (Print or Type)  Title						1				1 2 2 2 2 1 7							
City, State Lincoln Park, NJ 07035  Completed by (Print or Type)  Disposal Date 9/11/2012  Tullytown, PA  Date Production Park			7 TO THE RESERVE OF THE PERSON NAMED IN CO.				Waste			0				100			
Lincoln Park, NJ 07035  Signature  Park, NJ 07035  Park, NJ 07035  Signature  Park, NJ 07035  Date  Park, NJ 07035		n, Inc.		63	-				ource & Recover	Center		of selly	-				
Completed by (Print or Type) Title Signature Candana Puna Puna Puna Puna Puna Puna Puna P																	
$T_{lob}dama Tuma = 10/20/2012$										Date							
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Job #:1208-1672 Check #:2823

Date of Notification	(1)						Owner / Operat	or (2)		2010	m. see: 5 2		-					
8/31/12 Agencies Notified Type Notification				-		And the second second second	al Center	I Center ZUIZ SEP					<b>2</b> _4	- 4				
EPA			t Add		venue	(enile					٠, ١	35						
DEP		al	-	-	and the same of th	& Zip				- 429ES1	03 rn	ATT	D					
⊠ DOL		ended					NJ 08103	LI 08103 & 1					OS CONTROL CENSING					
□ DOH	☐ Eme	ergency				ontact					Telephone Number							
☐ DCA	188				y, Guild Build	lers, l	nc.		Гесрі	One	5 IV	un	CI					
				FA	CILIT	TY INI	ORMATION				1	_	_					
Name of Facility W			lace (3	3)			Type of Fac	ility (4)	1	and the second	***************************************		-					
Lourdes Medica	I Center-P	TSU					School	(K-12)										
Street Address										han K-12)								
218 Sunset Road	d		1277							ommercial build	dings, ho	nes	s, e	tc.)				
								Square Feet # of Floors						Bldg. Age				
City (5)		County (6)	1 .		Code (7)		23,000		1		45 +-							
Willingboro		Burlington					The second secon	(Prior	if being	demolished)								
N 684 16 1	'E' 18 1						Hospital											
Name of Monitoring Firm Hired by Building Owner (8)  Horizon Environmental						CM No												
Street Address	montai			Asbestos and Mold Ser Street Address					rvices, Corp	-	2.7	_						
PO Box 316							3859 Sylor		1.									
City, State & Zip Co				200		-		City, State & Zip Code										
Thorofare, NJ 08						Hainesport, NJ 08036												
Project Manager fo		Firm	Telep			ber	Telephone N		r	License	Number							
Dave or Steve F		Ta	856-8				609-702-04				008	62						
Scheduled Start Date (10) Scheduled Completion 9/17/12 9/21/12						)		Name of OSHA Monitor  EMSL Analytical										
Occupancy Status	During Abate	ement (Check o	nly one	e)			Street Addre	-					1	7				
		During Entire F			ateme	ent	107 Haddo											
Abatement Describe:	Performed (	Outside of Norm	al Hou	rs			City, State 8											
Isolated Are	22						Westmont	, NJ 0	8108									
Scope of Work (Ch		apply)		-								_						
	out all triat t	.66.37							Full Co	ontainment with	Negativ	e P	res	SIIFA				
≥3 sf or ≥3	lf		$\bowtie$	Rer	novati	on		$\boxtimes$	Negati	ve Pressure Er	closure			Juic				
≥160 sf ≥26		Der	molitic	n		П	Bag Procedure											
										xempted and N		e P	roc	edu	re			
	ocation of			ocat			Description			Amount		ate	me	nt T	ype			
	tos-Containi terial (ACM)	ng	Norm	nally blely			Asbestos-Con		g	(Specify		T	T					
					nce or		Material (A (i.e., thermal)			SF or LF)	1 1 7		_	ΞĽ	Щ			
i i	Custo	dial			insulation, surfa	cing.	/AT	_ a	emova	.	Repair	aps	icls					
	(13)			(12)	T		or other miscel	laneou	ıs)		Va		음	Encapsulate	Er iclsoure			
DTCII			Yes	No	N/A	-								e				
PTSU .			H		H	Floo	r Tile & Masti	C		2,450 SF		1						
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Name of Registered	d Waste Hau	iler		N.I	DEP I	Waste	Cubic Yards	Nam	e of Pas	istered Landfil		L						
					uler II	O No.	of Waste	ivaiii	e or Keg	nstered Landfil	ll.							
Horizon Disposa	1		11 1315		2261	12	8	GRO	ows									
City, State			all their				Disposal Date	City,			-							
Trenton, NJ							9/21/12		risville,	PA								
Completed By (Prin							Signature					Date						
Kimberly Trur	III9an			Ac	dmin	l. (	Ja V	Kul				8/31/12						