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Project Manager for Monitoring Ferm		Telep	hone No.	Teleph	ane No.		License	No.		_	
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Street Address						Street	Add	ress							
City, State, Zip Code								ngren Ave	enue						
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Project Manager for Monitoring Firm			Telepho	one No.		Teleph 973-		No. -8685		Lice 013	nse N	0.			
Start Date (10) 09/10/2018	Schedu 09/11/			Date (11)			SHA Monito							
Occupancy Status During Abatement (Che	The second of the second					Street		atement, I	nc.						
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Abatement Performed Outside of Non Other – Describe: Occupied	mal Facilit	y Hour	S					Zip Code		-					
Scope of Work (Check All That Apply)						Toto	wa,	NJ 07512	?						
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Asbestos-Containing Material (ACM) TO BE ABATED	Ma	intena	nce/	Asbe:	stos Conta . thermal	aining M	lateri	al (ACM)		mount				m m	ш
In Facility (13)	Cus	todial 8 (12)	Starr?		surfac	ing, VA7	T, or			or LF		Remova	Repair	caps	Enclosure
1.5/	Yes	No	NI/A		other m	iscellan	eous	5)				oval	air	Encapsulate	sure
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Name of Registered Waste Hauler			JDEP W		Cubic	/ards		Name of	Registe	red 1 s	ndfill				
0&S Abatement, Inc.			auler ID 0996	No.	of Was	te		Waste				PA			
City, State					Disposa	al Date		City, Stat							
otowa, NJ					TBD	f	4	Morrisv		A					
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Agencies Notified Type Notification EPA Initial	C)			Address					ASE	ESTOS LIGEN	CONT	RO!	ß.	418-7
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DOH justification) DCA Cancellation				Giannio								- ·		
Name of Facility Where Abatement is Takir	ng Place (3)	FAC	ILITY INF	ORMATI	ION	Type	e of Facility	(4)					
House								School (K	2007					
Street Address							×	Subchapte Other (i.e. etc.)	er 8 (Oth			ldings	, hom	es,
City (5) Monroe							Squa N/A	are Feet	# o	f Floors A		3ldg. A N/A	Age	
County (6) Middlesex			(STATE	Code (7) USE ONLY	0		Hou	70 10000			shed)			
Name of Monitoring Firm Hired by Building N/A	Owner (8)		ASCI	M No.		D&S	Aba	atement Co tement, I		(9)				
Street Address						Street 11 R		ess Igren Ave	enue					
City, State, Zip Code						City, S	tate, 2	Zip Code NJ 07512						
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph 973-				License 01311	No.			
Start Date (10) 09/07/2018	09/11/2	2018	npletion	Date (11)	Ĭ			HA Monito tement, I						
Occupancy Status During Abatement (Chec	88	9.5				Street		ess gren Ave	nuo					
Facility Closed/Vacated During Entire Abatement Performed Outside of Norm Other – Describe:	Period of a nal Facility	Abater / Hour	nent			City, S	tate, Z	Zip Code NJ 07512		<u> </u>				
Scope of Work (Check All That Apply)						1010	va, i	10 07 0 12	-					
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		Renova Demoli				×	Mi Gl	all Containn ni-Enclosu ovebag Pro on-Exempte	re ocedure				e.	
Location of	1	Locat Normal	ly		Des	scription						Abate	ement /pe	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	d Sole intena todial s (12)	nce/		tos Cont thermal surfac	aining M	lateria insul T, or	ation,	(8	mount Specify or LF)	Remova	Repair	Encapsulate	Enclosure
1st floor	Yes	No	N/A		1.7.4	0 -							ate	ró
lower level family room	-	×				Compo	bund			00 SF	X			
Laundry room		X				VAT				50 SF	X			
Ladridry 100III		^				VAT			6	SSF	X			
Name of Registered Waste Hauler 0&S Abatement, Inc.		H	JDEP W auler ID 0996		Cubic of Was					red Landfi gement o				
City, State Cotowa, NJ					Dispos TBD	al Date	1.	City, Sta Morris		Ą				
Completed by Dliver Hegedis	Title Proje	ct Ma	nager		Si	ignature	#i	/_	Name and the Parties of the Parties	100	ate 8/27/2	2018		

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Date of Notification (1) 08 /	29 /	18				e of Buildin		ner/Operator (2)		П	SEF	_	4	201	}	IIL
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Agencies Notified ⊠ EPA	Type Notifica	ation			1000010	t Address	220		l		-	SBEST	000	200	ITD	N 0	1
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⊠ DOH	Amendm		2			State, Zip			107		- Carriganting	-	equilibrium en a	- PROBLEM		MCVING.	PER
□ DCA	☐ Emergen		-	9	in the same of the	ntre, AL		0									
(NJAC 5:23-8)	justificati	on)			Name	e of Contac	ct			Т	Геleр	hone Nu	mber				
	☐ Cancellat	tion			Ja	y Machle	it				25	6-927-1	550				
					FA	CILITY I	NFO	RMATION									
Name of Facility Where A	batement is 1	Taking	Place	(3)					Type of Facility								
Red Eagle Tavern									School (K-1)		Otho	than V	10)				
Street Address	5								☐ Subchapter ☐ Other (i.e., p	o (C	otne ate a	r than K-	12) nercia	l bu	ilding	S.	
1503 West Chapel A	Avenue								homes, etc.							-,	
City (5)									Square Feet	T	# of	Floors		Blo	lg. A	ge	
Cherry Hill									10,000		2			7	70		
County (6)					Cou	nty Code (7)(STA	ATE USE ONLY)	Current Use (P	rior	if be	ing demo	olishe	d)		/11111	
Camden									Commercia	al		-					
Name of Monitoring Firm	Hired by Build	ding O	wner	(8)	ASCM	No.	Na	me of Abateme	ent Contractor (9)							
Atlas Environmenta	I Inspection	ns		30			5	Shade Enviro	onmental, LLC								
Street Address								eet Address	•							- 15	
PO Box 11645							6	23 Cutler Av	/enue								
City, State, Zip Code			7011-2-				Cit	y, State, Zip Co	ode								
Philadelphia, PA 19	116							/laple Shade									
Project Manager for Monit				Tel	ephone	No		ephone No.	,		Lice	nse No.				7.77	
Jason Dua	9			1 000		-4693	100000	56-755-0099	18.1			0842					
Start Date (10)	15	Schedi	uled C	1		ate (11)		me of OSHA M				70-12					
08/28/					1_/	4.6		MSL Analyt	10 120 120								
Occupancy Status During	Abatement (0	Check	only o	one)			Str	eet Address			-					11,455	
□ Facility Closed/Vacate							2	00 Route 13	0 North								
Abatement Performed							City	y, State, Zip Co	ode							20 50	
Time of Abatement:	AM	PIV	1/	PM		_AM	C	innaminson	, NJ 08077								
Scope of Work (Check all	that apply)						-			V ACTIONS							
			□Re	novat	ion			☐ Full Cont	tainment with Ne	gati	ive P	ressure					
≥160 sf or ≥260 lf			☑ De					☐ Glovebag	g Procedure								
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Location Asbestos-Containing N		.		Norma	ely by	A = h =		Description o		I I			- [25	æ	Щ	Щ
TO BE ABA		")		intena				containing ivia ermal systems	terial (ACM)			mount Specify		Removal	Repair	ıca	iclo
IN Facilit			Cus		Staff?	1,000	5	surfacing, VAT,	or			or LF)		val	_	Encapsulate	Enclosure
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Name of Registered Wast	e Hauler				IJDEP :		13 THE	oic Yards of	Name of Regis	stere	ed L	andfill					
Freehold Cartage					15939		Wa 1	o O	Fairless La	anc	llift						
City, State								posal Date	City, State								
Freehold, NJ							0	8/31/2018	Morrisville	, P	Α						
Completed By (Print or Ty	pe)	Title	S1007					Signature	10			1	Date			,	-
Christina Lynch		Vie	ce Pr	eside	ent of	Operatio	ns	(husta					81	29	1	Ý	

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80		28 /	-	-		D	ocase of	Camden			<u> </u>	10	Vin	CE	NSIN	T ROL
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M1 E- /8		-,				F.	ACILITY	NFORMATION		-			-			7
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Camden						Gái	mly Code (TYSTATE USE ONLY)			rior if baing der	molished)			1
Name of Monitor	ng Firm Hi	red by Bu	liding (DWner	(8)	ASCN	I No.	Name of Abstern	School Control		,					
MDG Environ	mental,	LLC	₹;		• •			Shade Enviro								
Street Address	200			-	-			Street Address		-			-			1
1000 Maplew City, State, Zip C	pod Driv	e, Suite	207		-			623 Cutler A								
Maple Shade		59						City, Stale, Zip Co							***************************************	1
Project Manager	1		-		Te	lephoni	No.	Maple Shade Telephona No.	, NJ DEC:	<u></u>	111			- Constitution		
Chris Macri		-			1,700		5-9300	256-755-0099	E		DOS42	2,				
Start Date (10)	_	45					ato (11)	Name of OSHA M		-	400-2					1
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	(13)			Yes	No	-	-	other miscellane	ous)					1	a	
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Freshold Car	æge		e e dille			Hauler I 1593		Waste 10			andfil					
City, State				AND AND THE PERSON	-			Disposal Date	OHy, Sta		 			_		
Freshold, NJ			Time:					09/01/2018	Mont	Wille	, PA					
Pampleton S								Min + Alice	-		The state of the s	_		-		
Completed By (Pri Christina Lyn)	Title		m=1-1	nné né	Operation	Signature	اسيلا		, 1	Date 8/2	•	1		

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Date of Notification (1)								wner/Operator	(2)	į.	And the second of the second o	SEP	_	4 2	018	
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☑ DOH	Amendm	20,000				State, Zip					Lo entrape anno de monto	MENON AND A SHARE	Medicine s			TOTAL CONTRACTOR
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(NJAC 5:23-8)	justificati				100000000000000000000000000000000000000	e of Conta					T-'-		-			
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					FA	CILITY	NFO	RMATION								
Name of Facility Where A		Taking	Place	(3)					T	ype of Facility	(4)					
Richards Residence	9									School (K-12		- K 10)				
Street Address										☐ Subchapter 8 ☑ Other (i.e., properties, properties)	rivate and co		al bu	ıilding	js,	
City (5)									S	Square Feet	# of Floo	rs	Ble	dg. A	ge	
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County (6)					Cou	nty Code (7)(ST	ATE USE ONLY)	C	Current Use (Pri	or if being d	emolish	ed)			
Mercer										Residence						
Name of Monitoring Firm	Hired by Build	ding C	wner	(8)	ASCM	No.	Na	me of Abatem	nent	Contractor (9)	0-15-70				-77	
Management & Env	iro. Consul	Iting S	Servi	ces			;	Shade Envir	on	mental, LLC						
Street Address							Sti	reet Address								
PO Box 341							(623 Cutler A	vei	nue						
City, State, Zip Code							Cit	ty, State, Zip C	Code	е						
Chesterfield, NJ 085							1	Maple Shade	e, N	J 08052						
Project Manager for Monit	oring Firm			Tele	phone	No.	Te	lephone No.			License I	No.				
Bill Weisgarber				6	09-298	3-4070	8	356-755-0099	9		00842					
Start Date (10)				332		ite (11)	Na	me of OSHA	Mon	nitor				5 (4)44-5	- 12	
09/07/	18	0	9 /	10	/	18	E	EMSL Analy	tica	al, Inc.						
Occupancy Status During	22						Str	eet Address				Q		500		
□ Facility Closed/Vacated							2	200 Route 13	30	North						
Abatement Performed							Cit	y, State, Zip C	ode	9						
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Scope of Work (Check all	that apply)							П		2 122112	77 12					
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Name of Facility Where Abatement is Taking Christopher Columbus School #15	Place (3	3)	FAC	CILITY IN	FORMATI	ON Type of Fa	cility (4)					-	
Street Address 511 Third Avenue				***************************************		School Subchi	l (K-12) apter 8 (Oth i.e. private 8	er than L comm	K-12) ercial buildi	ngs, h	omes	, etc.)	(
City (5) Elizabeth, New Jersey 07028						Square Fee 30,000	et	#0	f Floors		Bldg i0+	Age	
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Name of Monitoring Firm Hired by Building O Detail Associates, Inc	wner (8)		ASC	M No.		Name of Ab Lilich Corp	atement Col oration	ntractor	(9)				
Street Address 300 Grand Ave		X 11-10				Street Addre 606 McBrid	75 TO		***************************************				
City, State, Zip Code Englewood, NJ 07631	A					City, State, 2 Woodland	Zip Code Park, New	Jersey	1			***	
Project Manager for Monitoring Firm Anthony Valentine			Telepho 201-56	one No 89-6078		Telephone N 973-225-84			License N 01104	0.	288110		
08/31/2018 ON HOLD	9/4/20	18	npletion	Date (11)		Name of OS Iris Environ	HA Monitor Imental Lai	porator	ries, LLC				
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire Pe	eriod of A	Abaten	nent			Street Addre 2333 Route							***************************************
Abatement Performed Outside of Norma Other – Describe:	I Facility	/ Hour	s			City, State, Z Union, N.	Zip Code J 07083						
Scope of Work (Check All That Apply)	35403.4-1 V.V.						***************************************		***************************************				
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Basement Electrical Room (Near Girl's Room)			Pipe Ins	sulation			20	LF	Х				
Name of Registered Waste Hauler Lilich Corporation		H	JDEP W auler ID 18724		Cubic \ of Was			2 7 70 (* 19	red Landfill				
City, State Woodland Park, New Jersey		1	. 47 5.7		Disposi 09/04/2		Fairless L City, State Mogrisvill	}				***************************************	
Completed by Adriana Olejarova	Title Pres	sident				graftura 2	0	IS.	Dati		/201	18	ana company of the co

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) 08/15/2018 - 4 2016 heck# 1225 Elizabeth Board of Education Agencies Notified Type Notification Street Address 500 North Boulevard Street **EPA** Initial ASBESTOS CONTROL DEP X X Amended City, State, Zip Code LICENSING X DOL Elizabeth, New Jersey 07208 Amendment # Emergency (including Name of Contact X DOH justification) Telephone Number Gary Schmitt DCA X Cancellation 908-436-5000 FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Christopher Columbus School #15 X School (K-12) Street Address Subchapter 8 (Other than K-12) 511 Third Avenue Other (i.e. private & commercial buildings, homes, etc.) City (5) # of Floors Square Feet Bldg. Age Elizabeth, New Jersey 07028 30,000 2 50÷ County (6) County Code (7) Current Use (Prior if being demolished) Union (STATE USE ONLY) School Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Detail Associates, Inc Lilich Corporation Street Address Street Address 300 Grand Ave 606 McBride Ave City, State, Zip Code City, State, Zip Code Englewood, NJ 07631 Woodland Park, New Jersey Project Manager for Monitoring Firm Telephone No Telephone No. License No. Anthony Valentine 201-569-6078 973-225-8400 01104 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 08/31/2018 09/4/2018 Iris Environmental Laboratories, LLC Occupancy Status During Abatement (Check Only One) Street Address 2333 Route 22 West Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: Union, NJ 07083 Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf X Renovation Full Containment with Negative Pressure □ ≥160 sf or ≥260 lf П Demolition IXI Mini-Enclosure X Glovebag Procedure / Limited Containment&Tent Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Normally Type Location of Description of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ Encapsulate TO BE ABATED (i.e. thermal systems insulation, (Specify Remova Custodial Staff? Repair , In Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A Basement Electrical Room (Near Girl's Room) X Pipe Insulation 20 LF X Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste Lilich Corporation 18724 3 Fairless Landfill City, State Disposal Date City, State Woodland Park, New Jersey 09/04/2018 Morrisville, PA Completed by Title Signature Date Adriana Olejarova President 08/15/2018

State of New Jersey

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2) Date of Notification Check# 1226 Elizabeth Board of Education 08/30/2018 Agencies Notified Type Notification Street Address 500 North Boulevard Street Initial EPA City, State, Zip Code IXI Amended **ASBESTOS CONTROL &** DEP X Elizabeth, New Jersey 07208 LICENSING Amendment# X DOL Emergency (including Telephone Number Name of Contact DOH justification) X Gary Schmitt 908-436-5000 DCA Cancellation X **FACILITY INFORMATION** Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) The Thomas Edison Career & Tech Academy #87 X School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e. private & commercial buildings, home's, etc.) 625 Summer Street # of Floors Bldg. Age Square Feet City (5) 50+ 2 30,000 Elizabeth, New Jersey 07028 Current Use (Prior if being demolished) County Code (7) County (6) High School (STATE USE ONLY) Union Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Lilich Corporation Detail Associates, Inc. Street Address Street Address 606 McBride Ave 300 Grand Ave City, State, Zip Code City, State, Zip Code Woodland Park, New Jersey Englewood, NJ 07631 License No. Telephone No Telephone No. Project Manager for Monitoring Firm 973-225-8400 01104 201-569-6078 Anthony Valentine Name of OSHA Monitor Scheduled Completion Date (11) Start Date (10) Iris Environmental Laboratories, LLC 09/04/2018 09/01/2018 Street Address Occupancy Status During Abatement (Check Only One) 2333 Route 22 West Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Union, NJ 07083 Other - Describe: Scope of Work (Check All That Apply) Full Containment with Negative Pressure П Renovation ≥3 sf or ≥3 if Mini-Enclosure Demolition X ≥160 sf or ≥260 lf Glovebag Procedure / Limited Containment&Tent X Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Type Normally Description of Location of Used Solely by Asbestos Containing Material (ACM) Amount Asbestos-Containing Material (ACM) Encapsulate Enclosure Maintenance/ (Specify Remova (i.e. thermal systems insulation, TO BE ABATED **Custodial Staff?** SF or LF) surfacing, VAT, or .In Facility (12)other miscellaneous) (13)Yes No X 20 LF Pipe Insulation 2nd Floor Slop Sink Room X Name of Registered Landfill Cubic Yards NJDEP Waste Name of Registered Waste Hauler Hauler ID No. of Waste Fairless Landfill 18724 Lilich Corporation Disposal Date City, State City, State Morrisville, PA 09/04/2018 Woodland Park, New Jersey Date Signature Title Completed by President Adriana Olejarova 08/30/2018

Do hot use this form for asbestos licensure exempted activities.

		N			OF ASBES to NJAC 8:6		BATEMENT (12:120)	In	TE C	EI		E	In	7
Date of Notification (1) 08/15/2018)		I E	lame of	Building Ow th Board of	ner/O	perator (2) ation				heck		6	The statement of the st
Agencies Notified	Type Notification		- 11 - 27	Street Ad 500 No	ddress rth Bouleva	rd Str	reet		SE	P - 4	201	8	E	
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☑ DOH ☑ DCA	☐ Emergency (incluing justification)☐ Cancellation	iaing	1 2	Name of Gary So	Contact chmitt					one Num 6-5000	ber			
				FACI	LITY INFOR	MATIC	ON	-						
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Project Manager for M Anthony Valentine	Monitoring Firm			Telephor 201-569			Telephone No 973-225-840			cense No 1104).			
Start Date (10) 09/01/2018		Schedule 09/04/20		pletion	Date (11)		Name of OSH Iris Environr		oratories	s, LLC				
Occupancy Status Du	iring Abatement (Check	Only On	e)				Street Addres							
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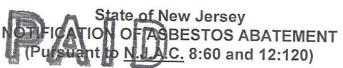
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Street Address							Street . 1385		ss y Road, S	Suite	K					
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Project Manager for Mor	nitoring Firm		Telepho	ne No.		Teleph			014	_	ense	No.				
						(973)				008	374					
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Service Transport G	roup, Inc.			auler ID 0990	No.	of Wa	ste		Minerva		erpris	ses,	LLC			
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Project Manager for Monitoring Flore John Smoyer		Yelepho	he No	Linco	in Park	NJC		Ma		•••	1
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Date of Notification	(1)		Name of Bu	ilding	Owner/Operator	(2)		6	SU	V	E
8/30/2018			James	Scal	la Sr.						
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City, State, Zip Code	9				City, State,						
					Montclai	r, NJ 070	142				
Project Manager for N	Monitoring Fi	100000	lephone Num	ber	Telephone Numb	oer		cense		oer	
		N	/A		(973) 744	-8800	(0037	1		
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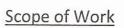
tom Joothees, DOL



Chr # 3428

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Date of Notification (1)		Name o	of Building	Owner / Operat	tor (2)	2000					
8/27/2018 Agencies Notified Type Notification		Old Br	idge To	wnship Board	of Edu	ıcation	DE	a F I	1 10	7 - 1-	7 -
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Name of Facility Where Abatement is Ta	aking Place (3	3)	LIIIII	Type of Fac	ility (A)			ICENSI	JG.	- 0n 640	ki.
Sandburg Middle School	9 (-,		School	(K-12)					Percenting	Bramble Street
Street Address						Other tha	n K-12)				
3439 County Route 516				Other (i	.e. priva	te & com	mercial buildi	nas, hom	ies. e	etc.)	
				Square Feet		# of Floo		Bldg. Ag		10.7	
City (5) County	(6) Co	unty Co	de (7)	150,00	00		1		60+		
Old Bridge Middl	esex			Current Use		being de	emolished)		00.		-
				School			,				
Name of Monitoring Firm Hired by Buildi	ng Owner (8)	1	ASCM No	. Name of Aba	atement	Contract	tor (9)				
Environmental Connection Inc. Street Address				Bristol Env	/ironm						
120 North Warren Street				Street Addre							
City, State & Zip Code				1123 Beav							
Trenton, NJ 08010				City, State &		de					
Project Manager for Monitoring Firm	Telen	hone N	umher	Bristol, PA Telephone N			11:				
Rollie Jones		392-420		(215) 788-6			License 00509	Number			
Scheduled Start Date (10) Schedul	ed Completio			Name of OS	-	itor	00309				
08/28/2018	08/28/2	2018	()	Bristol Env		200000000000000000000000000000000000000	•				
Occupancy Status During Abatement (CI	neck only one	;)		Street Addre			-				
Facility Closed/Vacated During E	ntire Period o	of Abate	ment	1123 Beave							
Abatement Performed Outside of	Normal Hou	ırs – 7aı	m to 3pm			le					
Describe: 4:30PM to 11:00P Facility Occupied During Abatem	M			Bristol, PA	19007						
Scope of Work (Check all that apply)	ent										
(eneok all that apply)						Full Cont	ainment with N	logotivo	Droo		
≥3 sf or ≥3 If		Renova	ation			Mini-Encl		vegative	Pres	sure	8
≥160 sf ≥260 lf	Ħ	Demoli					g Procedures				
							npted and No	n-Friable	Proc	edu	re
Location of		ocation		Description	n of	1	Amount		teme		
Asbestos-Containing Material (ACM)		ally Use	ed	Asbestos-Con			(Specify	1			7,50
TO BE ABATED		lely by enance	or	Material (A	CM)		SF or LF)	70		En	Ш
in Facility		dial Stat		(i.e., thermal s	ystems cina VA	т		Remova	Repair	cap	ncls
(13)		(12)		or other miscell	aneous)			ova	<u>a</u> .	Encapsulate	Enclsoure
		No N	/A							te	LD
Field House Boiler Room				Pipe Insula	ition		9 LF		\Box		П
										H	\Box
		片	-								
Name of Registered Waste Hauler		IN IDE	D \\\(\frac{1}{2}\)	0 11 17	1						
rame of registered waste fladier				Cubic Yards of Waste	Name	of Regist	ered Landfill				
Service Transport Inc.		20990	Company of the compan	<1 yd	Miner	va Land	IfiII				
City, State				Disposal Date	City, S						
New Castle, DE				08/29/2018		esburg,	ОН				
Completed By (Print or Type)		Title		Signature		3,		Date			
Gino Pizzigoni		Proje	2000	D: 0) -	20.3	1001	08/27	7/20	18	
		Mana	ger	Dino 1	nggo	John	14/1			1.510 T.O	

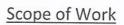
Chio	P16) 1	тои	IFIC	ATIQ	State of N OF AS	\$BE	Jersey STDS ABA 8:60 and 5:	TEMENT	DE C) <u>E</u>	4 2		
Date of Notification (1)		100020			1			wner/Operator		had law		4 -	010	1
8/	30 /	18	_		HI	MS Host /	Jol	b #1808-5372	Check #1049			2011		
Agencies Notified	Type Notif	cation			Stree	et Address				ASBES	ICEN			No.
⊠ EPA					69	05 Rockl	edg	e Drive		I THE RESERVE THE PARTY OF THE	PARTICIPATE LA		CONTRACTOR	MINICAPETY.
☑ DOLWD ☑ DHSS	Amend Amend	THE RESERVE AND LOSSES.			City,	State, Zip	Cod	е						
□ DCA	☐ Emerge		udina	7	Be	thesda, I	MD :	20817						
(NJAC 5:23-8)	justifica			,	Nam	e of Contac	ct			Telephone Nu	mber			
	☐ Cancell	lation			Bu	isiness o	ffice	9		240-694-43	69			
					FA	CILITY IN	NFO	RMATION						
Name of Facility Where A			Place	(3)					Type of Facility	(4)				
Thomas Edison Ser	vice Area								School (K-12		01			
Street Address										8 (Other than K-1 rivate and comm		nuildin	as	
NJ Turnpike South	Mile Mark	er 92.9							homes, etc.)		010/01	Janan	90,	
City (5)									Square Feet	# of Floors	E	Bldg. A	\ge	
Woodbridge, NJ														
County (6)					Cou	nty Code (7	7)(ST	ATE USE ONLY)		ior if being demo	lished)			
Middlesex									Service Pla					
Name of Monitoring Firm		ilding Ow	ner (8)	ASCM	No.			ent Contractor (9)					
AHERA Consultants Street Address	s, Inc.						-	AbateTech, I	nc.					
1600 Route 22 East								reet Address						
City, State, Zip Code			_				-		PO Box 25					
Union, NJ 07083							1	ty, State, Zip Co						
Project Manager for Monit	oring Firm			Tolo	phone	No	-	Lumberton, N	NJ 08048	I 1 : NI-				
Michael Nehlsen	oning Film					-5644	1	lephone No. 309-265-2107		License No.				
Start Date (10)		Schedule	d Co					me of OSHA M		00529				
9 / 13 /		9) /			EMSL Analyti						
Occupancy Status During		-	_					eet Address	icai					
☐ Facility Closed/Vacated					ment			200 Route 13	0 North					
Abatement Performed (cribe		y, State, Zip Co						
Time of Abatement:		PM/_		_PM-		AM	1	Cinnaminson						
Scope of Work (Check all t	that apply)								, 110 00077					-
≥3 sf or ≥3 lf≥160 sf or ≥260 lf				ovati nolitic				☐ Mini-Encl	ainment with Neg losure g Procedure W1 mpted (*) and No	rap & cu	A.			
				Locat			-0.50		1		A	batem	ent T	уре
Location o		.		ormal Sole			¥ 1	Description of			Z	Z.	Ш	Ш
Asbestos-Containing M TO BE ABAT	ateriai (ACI) ED	"'	Mair	ntena	nce/			Containing Matermal systems i		Amount (Specify	Removal	Repair	Encapsulate	Enclosure
IN Facility			Custo	dial 8 (12)	Staff?	(S	surfacing, VAT,	or	SF or LF)	val	7	Sul	sure
(13)		V	es	No	N/A		ot	her miscellaned	ous)				ate	,,,
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DEL ATTACHED		Ш	SEE AT	IAC	HED		ATTACHED	14	Ш	Ш	Ш			
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lame of Registered Waste	Hauler			N.	JDEP V	Vaste	Cub	oic Yards of	Name of Regist	ered Landfill		1-		_
AbateTech, Inc.				Ha	auler ID 18750	No.	Was	ste	G.R.O.W.S.					
City, State					10/50		_	o posal Date	City, State					
Lumberton, NJ								/20/18	Tullytown,	PA				
completed By (Print or Typ	e)	Title						Signature			ate 1			\dashv
Gwendolyn Trumbett	3.5	0.000	atio	ns C	oordi	nator		O	MIST		8	30	18	

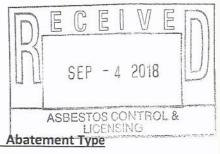




Location of ACM	Used for Maint.	Description of ACM	Amount	Abatement Type
1st Fl. Bathroom Ch	ase NO	Pipe Insulation	75 LF	Removal
1st Fl. Bathroom Ch	ase NO	Mudded Fittings	24 total	Removal
Main Dining Area	NO	Anchor Mastic Points	1,000 total	Removal
Basement Electrical	l RmYES	Foundation Caulk	20 LF	Removal
Exterior	NO	Wall Caulk	36 LF	Removal
Exterior	NO	Door Caulk	36 LF	Removal
Loading Dock	NO	Expansion joint caulk	40 LF	Removal

CKIO	491	1	NO	TIF	E A	HO	N OF AS	lew Jersey BESTOS AB AC 8:60 and 5	ATEMENT :16)		D.E	G	E		E
Date of Notification (1)		u			T	Nam	e of Buildir	ng Owner/Operato	r (2)			SEP		204	0
8/	30 /	1	8					Job #1808-537		10494		JET	- 4	201	ď
Agencies Notified ⊠ EPA	Type Notifi	ication	1				et Address	adaa Duissa			ASB	ESTO	S CC	NTR	OL &
☑ DOLWD	☐ Amende	ed			-			edge Drive				LIC	ENSI	NG	
☑ DHSS	Amend	ment #	<u> </u>	_			State, Zip								
☐ DCA	☐ Emerge		ncludi	ng			Commence of the commence of th	/ID 20817							
(NJAC 5:23-8)	justifica	1.5				Nam	e of Contac	at .			Telephone No	umber		e carriere	
	☐ Cancell	ation				Bu	siness of	ffice			240-694-4	369			
						FA	CILITY IN	FORMATION							
Name of Facility Where A	batement is	Takin	g Plac	ce (3)					Type of Fa	acility (4	4)				
Monmouth Service	Area								☐ School	(K-12)					
Street Address				- 07					☐ Subcha	apter 8	(Other than K-	-12)			
Garden State Parkw	ay Mile Po	ost 1	00 NE	3/SB				*2	M Other (ate and comm	nercial	buildir	igs,	
City (5)				576 / J		707			Square Fe	et	# of Floors		Bldg.	Age	
Wall Township															
County (6)						Cou	nty Code (7)(STATE USE ONLY	Current Us	se (Prio	r if being dem	olished)		
Monmouth									Service	Plaza	l				
Name of Monitoring Firm I	Hired by Bui	lding (Owner	(8)	A	SCM	No.	Name of Abater	nent Contract	or (9)					
Hillaman Consulting	g, Inc.							AbateTech,		, ,					
Street Address		- 100			1			Street Address					-		
PO Box 385								30 Maple Av	e PO Box	25					
City, State, Zip Code						-		City, State, Zip (20					
Oceanville, NJ 0823	1							Lumberton,							
Project Manager for Monito				TT	lonk	none	No	Telephone No.	140 00040		Lianna Na				
Donna D'Errico	ornig i min						-1833		7		License No.				
Start Date (10)		Cohoo	الممار			2000		609-265-210	2		00529				
9 / 13 /			9				te (11) 18	Name of OSHA EMSL Analy							
Occupancy Status During	Abatement (Check	c only	one)				Street Address							
☐ Facility Closed/Vacated						ent		200 Route 1	30 North						
☐ Abatement Performed (Outside of N	ormal	Facili	ty Ho	urs -	- Des	cribe	City, State, Zip C							-
Time of Abatement:	AM	PI	/I/	_PI	VI		AM	Cinnaminso		7					
Scope of Work (Check all t	hat apply)								,				_		
			_					☐ Full Cor	ntainment with	n Negat	ive Pressure				- 1
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			□ Re					☐ Mini-En	closure ag Procedure						
<u></u>			M	SI I I O II	uon						Friable Proced	dure			
			Is	Loc	atior	1						1 7	haten	nent T	vne
Location of				Norm	ally			Description	of				_	T	1
Asbestos-Containing M		1)		ed So ainter				tos Containing M			Amount	\en	Repair	nc	inc
TO BE ABAT IN Facility				todia			(I.e.	, thermal systems surfacing, VAT			(Specify SF or LF)	Remova	ai-	sde	Enclosure
(13)				(12	2)			other miscelland			SF OI LF)	=		Encapsulate	re
			Yes	No		N/A								0	
SEE ATTACHED		[SEE AT	TACHED			SEE							
					Ī					_	ATTACHED	,	П		
										-				12	-
													ЦЦ	Ш	
Name of Registered Waste	Hauler			100			Vaste	Cubic Yards of	Name of F	Register	red Landfill			177	
AbateTech, Inc.				er IL 3 750	0.0000000000000000000000000000000000000	Waste 40	G.R.O.	W.S. L	andfill.						
City, State								Disposal Date	City, State)					
Lumberton, NJ					9/20/18	Tullyto	wn, P	A							
Completed By (Print or Type	e)	Title	7					Signature	1	3/8	Tr	Date ,			\neg
Gwendolyn Trumbett		0	perat	ions	Со	ordi	nator	()	1			2	30	118	





Location of ACM Us	sed for Maint.	Description of ACM	Amount	Abatement 1
Bathroom Chase	NO	Pipe Insulation	80 LF	Removal
Bathroom Chase	NO	Mudded Fittings	23 total	Removal
Bathroom Chase	NO	Insulation Debris	20 SF	Removal
Former Walk In Cooler	YES	Cork Board Mastic	800 SF	Removal
Former Walk In Cooler	YES	Tar Paper	800 SF	Removal
Basement Storage Rm	NO	Ceiling Mastic	3 SF	Removal
Basement Storage Rm	NO	Blue Gasket	8 SF	Removal
Basement Training Rm	NO	Floor tile & Mastic	125 SF	Removal
Exterior	NO	Window Caulk	288 LF	Removal
Exterior	NO	Door Frame Caulk	18 LF	Removal
Roof	NO	Mech Unit Caulk	200 LF	Removal

0 80												P	rint E
age 1 of 2		NOTIF	ICATIO	tate of New Je N OF ASBEST t to NJAC 8:60	OS ABATE	EMENT	ti)	B) <u>E</u>	G		\mathbb{V}	E
Date of Notification (1) 08-27-18			Name (of Building Own	er/Operato	r (2)				SEP	- 4	201	8
Agencies Notified Type Notification				Address				-	ACD	ESTO	000	NITO	01.0
EPA Initial Amended				Hadley Rd				le-notorque	ASD		ENSI		JL 63
X DOL Amendment				Plainfield, N	1 J								
DOH Emergency (justification) Cancellation	includin	3	NO.	of Contact Pentek					hone N				
			FAC	ILITY INFORM	ATION				0.0				
Name of Facility Where Abatement is Taking PSEG New Milford Substation	g Place ((3)					of Facility (4) School (K-12						
Street Address 132 Henley Ave						×	Subchapter 8 Other (i.e. pri etc.)	(Other	than K	-12) rcial bu	ildings	s, hom	ies,
City (5) New Milford, NJ						-	re Feet	# of F N/A	loors	- 1	Bldg. N/A	Age	
County (6) Bergen			County (STATE	Code (7) USE ONLY)		Curre	ent Use (Prior	if being	demol	ished)			
Name of Monitoring Firm Hired by Building (N/A	Owner (8)	ASCI N/A	M No.			tement Contr ironmental			ıc.			
Street Address N/A						Addre	ss ck Rd						
City, State, Zip Code N/A	8						ip Code NY 11980						
Project Manager for Monitoring Firm N/A			Telepho	ne No.	T 10.00000000000000000000000000000000000	none N 924-8		1000	icense 11136	No.			
Start Date (10) 09-05-18	Schedul 10-05-		npletion	Date (11)	1		AA Monitor ronmental	Servic	es, In	C.			
Occupancy Status During Abatement (Check	Only O	ne)				Addres	50.000						
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other – Describe: Normal Hours	eriod of al Facilit	Abatem y Hours	ent		City, S	state, Z	ck Rd p Code						
Scope of Work (Check All That Apply)					Yapı	nank,	NY 11980						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demoliti			×	Mir	I Containmen i-Enclosure vebag Proced n-Exempted (dure				re	
		Locati										ement /pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	Normall ed Solel iintenar todial S (12)	y by ice/	Asbestos Co (i.e. therm	Description ontaining Manal systems rfacing, VA er miscellar	Material s insula T, or		Amo (Spe SF or	cify	Removal	Repair	Encapsulate	Enclosure
Control House 2001-	Yes	No	N/A									ate	ė
Control House 230kv		X		site floor		S	20		x				
Control House 230kv		х		Door cau			42	-	x				
Control House 230kv			Х		nsite cor			5		x			
Control House 230kv ame of Registered Waste Hauler		N.	JDEP W		site wall	panel		20		x			
nvironmental Transport Group INC	auler ID		vaste		Name of Re GROWS-	20 2000 - 2000							
ity, State old Mine Road, Flanders NJ 07836				Disp TBI	oosal Date		City, State 1000 New	Ford	Mill R	d, Mo	rrisv	ille, F	A,
ompleted by aymond Tutiven	Title Supe	rvisor			Signature / auli	- 1	Tai	(177	ate 8-27-	18		

			NOTI		ON OF AS			EMEN	ĮT.		14 To 10 To 10 To 10 To 10					
					nt to NJA				1.0	In	E	C	E	1	V [EI
Date of Notification (1) 08-27-18				Name PSE	of Buildin G	g Owner/	Operato	r (2)						u (./ L	-
Agencies Notified	Type Notification	n n			Address Hadley	. Dd				HL		BEP	bre .	4 20	18	
EPA DEP	Initial Amended				tate, Zip (-						
× DOL	Amendment				n Plainfi						ASBI	EST	28.0	ONT	ROL	&
X DOH	Emergency justification)		1		of Contac						lephon	e Nur	nber	OHACE		VIII II
DCA	Cancellation)			Pentel	200				73	32-540)-48	38			
Name of Facility Where A	batement is Takir	g Place (3)	FAC	CILITY IN	FORMAT	ION	Tvr	e of Facility	(4)						
PSEG New Milford	Substation							П	School (K-							
Street Address 132 Henley Ave								×	Subchapter Other (i.e. petc.)	8 (Oth	ner than & comr	n K-12 merci	2) al bui	ldings	hom	nes,
City (5) New Milford, NJ								Squ N/A	uare Feet	# c	of Floors	S	10.7.0	Bldg. A	ge	
County (6) Bergen					Code (7)			Cur	rent Use (Pri	or if be	ing den	nolish	ned)			
Name of Monitoring Firm N/A	Hired by Building	Owner (8))	ASC N/A	M No.				oatement Cor vironmenta			Inc.				
Street Address N/A			-				Street	Addr					0			
City, State, Zip Code N/A									Zip Code NY 11980)						
Project Manager for Monit N/A	oring Firm			Telepho	one No.		Teleph 631-9	none	No.		Licen:).			
Start Date (10) 09-05-18		Schedule 10-05-		mpletion	Date (11))			SHA Monitor vironmenta	al Ser		V3-V3				
Occupancy Status During		20	35)				Street	Addre				1110.				
Facility Closed/Vacat Abatement Performe Other – Describe: No.	d Outside of Norm	Period of A al Facility	Abaten Hours	nent S			City, St	tate,	Zip Code	10						
Scope of Work (Check All	That Apply)						тарп	Idilk	, NY 1198							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		- December 1	Renova Pemolit				×	M	ull Containme ini-Enclosure lovebag Proc on-Exempted	edure						
		ls	Locati	on				1 100	or-exempled	() and	J 14011-F	TIADIE		Abate		
Location of		N	lormal d Sole	ly		Des	scription	of						Тур	е	_
Asbestos-Containing N TO BE ABAT	TED	Mai	intenar odial S	nce/	Asbes (i.e	tos Conta	systems	insul	al (ACM) lation,		mount pecify		Re	ח	Enc	m
In Facility (13)	!	June	(12)	run:			ing, VAT			SF	or LF)		Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A				•					a	7	late	le .
Control House	230 kv		х		Du	ct Banl	k		1	20 If		x				
Name of Registered Waste	Haules		LAI	IDED W												
Environmental Transp			H	JDEP W auler ID JD0006		of Was 25			Name of R				fill			
City, State Gold Mine Road, Fland	ders NJ 07836					Disposa TBD	al Date		City, State 1000 Ne	w For	d Mill	Rd.	Mor	risvill	e. P	Α
Completed by Raymond Tutiven		Title Super	visor			P.	gnature		18	. 2		Date		7311-33-3		

Date of Notification (1)		OTIFI O	CATION ursuant Name of	ate of Nev OF ASB to NJAC	ESTOS 8 60 a Owner/	ABATEI 12:120	0)			C		V [
8/21/2018				/ Melloh					Ш	SEP -	- 4 2	718		11
Agencies Notified Type Notification			Street A	ddress									- Carrier Control	BEREION WAR
EPA Initial Amended Amendment #_		_		ite, Zip Co a NJ 078					ASI	BESTOS LICE	CONT NSING	HOL	Ř	-200
Emergency (in justification) DCA Cancellation	cluding			f Contact Stanko	vic, P	roject N	/lana	ger	Tale	nhana Ni	mhae	-		
			FACI	LITY INFO	ORMAT	ION								
Name of Facility Where Abatement is Taking I Melloh Residence	Place (3	5)					Туре	of Facility	E 22					
Street Address		-					×	School (K- Subchapte Other (i.e. etc.)	r 8 (Othe			dings,	home	es,
City (5) Sparta							Squa 211	are Feet	# of 2	Floors		ldg. A 1965	.ge	
County (6) Sussex	1105C-1100-		County (Code (7) USE ONLY			Curr	ent Use (Pr idence	ior if beir	ng demolis	shed)			
Name of Monitoring Firm Hired by Building Ov	vner (8)		ASCN	1 No.		Name	of Aba	atement Co ark Indust	ntractor rial	(9)				
Street Address						Street 54 N		ess an Dr						
City, State, Zip Code						City, S Spar	tate, z rta N	Zip Code J 07871						
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph 973-		lo. 2645		License 01334	No.			
	chedule 3/17/2		npletion l	Date (11)				HA Monitor ark Indust						
Occupancy Status During Abatement (Check			574.001 1 00			Street 54 N		ess an Dr						
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Normal Other – Describe:								Zip Code J 07871						
Scope of Work (Check All That Apply)														
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf	Towns or the last of the last	Renova Pemolit				×	Mi GI	ill Containm ini-Enclosur ovebag Pro on-Exempte	e cedure	J			۵	
	ls	Locati	on				1 140	on-Exemple	u () and	I NOII-FIIA	DIE FIC	Abate	ement	
Location of	N	Normal d Sole	ly			escription						Ty	ре	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	intenar codial S (12)	nce/		therma surfa	ntaining N Il systems acing, VA miscellar	s insul T, or	lation,	(S	nount pecify or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A								_		te	(D
basement		X			9"x 9	9" floor	tiles		100	00 SF	Х			
		<u> </u>												
											-			
Name of Registered Waste Hauler		N	JDEP W	/aste	Cubic	Yards		Name of	Registe	red Landf	ill			
Owner		Н	lauler ID	No.	of Wa			Susse	x Cour	ity Land				
City, State Sparta NJ					Dispo	sal Date		City, Star Lafaye						
Completed by Corey Stankovic	Title CEO	k.	-			Signature	(4	FRIKE	· ve		ate 3/21/2	018		

														Pr	int Fo
no Ch			ICATIO	tate of Ne N OF ASE t to NJAC	BESTOS	ABATE		т	R	E	C	E		77	
Date of Notification (1) 4/19/18				of Building omedia			r (2)			(SEP	- 1	1 2()18	
Agencies Notified Type Notification X EPA Initial	1		Street /	Address ox 75	17-47	÷				ASB	ESTO	SC	ONT	ROL	&
X DEP X Amended Amendmen			City, St Hacke	ate, Zip C ensack,	ode NJ 076	602			Elizabeth con tradem		LIU	CINE	SING	NUTRICINESS.	TERRESE S
 ✓ DOH justification ✓ DCA Cancellatio) `			of Contact fer Borg						ephone					
			FAC	ILITY INF	ORMATI	ON	-								
Name of Facility Where Abatement is Takin Bergen Record Bldg., Garage & V	ng Place (Varehou	(3) Ise					Тур	e of Facility (0050						
Street Address 150 River St.							×	School (K-1 Subchapter Other (i.e. p	8 (Othe			build	dings,	hom	es,
City (5) Hackensack								etc.) lare Feet 0,000	# of	Floors	3		ldg. <i>A</i> 0+	ge	
County (6) Bergen			County (STATE	Code (7) USE ONLY	o		Cur	rent Use (Pricandoned		ng dem	nolishe	100			
Name of Monitoring Firm Hired by Building	Owner (8)	ASCI	M No.			of Ab	atement Con			ces. I	nc			
Street Address						Street	Addr								
City, State, Zip Code						City, S	state,	Zip Code , NJ 07405							
Project Manager for Monitoring Firm		T	Telepho	ne No.		Teleph	none l	•		Licen:	se No.				
Start Date (10) 4/11/18	Schedu 9/21/1		npletion	Date (11)		Name	of OS	SHA Monitor	antal 6		341				
Occupancy Status During Abatement (Cher		-						i Environm	entar	servic	ces, i	nc.			
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe:	Period of	, Abaten	nent			City, S	Kinn tate,	elon Rd. Zip Code							
Scope of Work (Check All That Apply)						Kinn	elon	, NJ 07405	i						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	processor and	Renova Demolit				×		ull Containme ini-Enclosure lovebag Proc on-Exempted	edure					9	
	ls.	s Locati	on						() and	110111	Tidble		Abate	ment	
Location of		Normal ed Sole				cription					-		Ту	pe	-
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	cation of Section of Section of Section of Section of Section				tos Conta thermal surfac other m	systems ing, VA	s insu T, or	lation,	(S	nount pecify or LF)		Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A							8		<u>a</u>	-23	ate	Ге
See survey attached to initial															
notification															
Name of Registered Waste Hauler Yannuzzi Group, Inc.		Н	JDEP Wauler ID		Oubic of Was	te		Name of F							
City, State Kinnelon, NJ		11	7467		1,100 Dispos	al Date	,	City, State							
Completed by	TETAL				4/25-7	10.73 (0.73)	×	Morrisvi	ile, PA	/ Bir		ro, F	βA		
Anna Bastos	, NJ				Si	gnature	10	M			Date	/10			

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	ate of Notification (1) 08/31/2018			Name of La Ca	of Building Owner/ asa Don Pedro	Operato	(2)			nonement.	Tarak territori	No ettuene	
×	gencies Notified	Type Notification		Street A					ASBES		NSIN		OL.8
XIX	DEP DOL	Initial Amended Amendment		City, Sta Newa	ate, Zip Code rk ,NJ,07107								
×	DOH DCA	Emergency justification) Cancellation		Name o Chris	f Contact			Te	elephone Num	ber			
N.				FAC	ILITY INFORMAT	ION							
N	ame of Facility Where A PRIVATE HOUSE	Abatement is Takir	ig Place (3)				Type of Facility	(4)					
S	treet Address						School (K- Subchapte Other (i.e. etc.)	r 8 (Ot	her than K-12 & commercia) ıl buil	dings,	home	es,
1	ity (5) Newark						Square Feet N/A		of Floors I/A		Bldg. A N/A	ge	2000
E	ounty (6) Essex				Code (7) USE ONLY)		Current Use (Pr PRIVATE H	ior if be	eing demolish	ed)			
	ame of Monitoring Firm N/A	Hired by Building	Owner (8)	ASCN	Λ No.	Name	of Abatement Co V ABATEMEN	ntracto T LLC	or (9)				
S	reet Address				ROS SELECTION PROPERTY.		Address RANKLIN ST	REET	-				
C	ty, State, Zip Code						State, Zip Code ERSON,NJ,07	7524					
Pi	oject Manager for Mon	itoring Firm		Telepho	ne No.		none No. -333-5144		License No 01274).			
	art Date (10) 9/12/2018		Scheduled Co 9/12/2018	mpletion	Date (11)		of OSHA Monitor						
0	ccupancy Status During		8 8	11.00			Address RANKLIN ST	REET					
×	Facility Closed/Vaca Abatement Perform Other – Describe:	ated During Entire led Outside of Norm OCCUPIE	Period of Abate nal Facility Hou	ment rs		City, S	State, Zip Code ERSON,NJ,07						
S	cope of Work (Check A	Il That Apply)							-				
×		Пастърну)	Renov Demol			×		e cedure	1			e	
			Is Loca									ement	i
	Location Asbestos-Containing TO BE AB/ In Facili (13)	Material (ACM) ATED	Norma Used Sol Maintena Custodial (12)	ely by ance/ Staff?	Asbestos Con (i.e. thermal surfa	scription taining M l system: cing, VA niscellar	faterial (ACM) s insulation, T, or	(Amount Specify F or LF)	Remova	Repair	e Encapsula	Enclosur

							on-Exempte	d (*) and Non-F	riable Pr	ocedu	e	
Location of	137	S Locati Normal	100000			Description of				Abat	emen /pe	t
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	ed Sole aintenar stodial S (12)	nce/		stos Co thern	portaining Materi all systems insufacing, VAT, or miscellaneous	lation,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A						=		ate	6,
BASEMENT		Х			PIPE	INSULATIO	N	60 LF	К			
Name of Registered Waste Hauler		N	JDEP W	/aste	Cut	ic Yards	Name of	Registered Land	dfill			
EHW ABATEMENT LLC			auler ID 037095		of V TB	Vaste D	TRIST	ATE TRANS	FER			
City, State BRONX ,NY					Disp	oosal Date D	City, State BRON					
Completed by Victor Espíritu	Title Proje	ect Ma	anager			Signature //	· W	1	Date 8/31/2	018		

Ch43	39		NOTIF (P	i¢ATIOI ursuani	tate of New Jerse N OF ASSESTOS I TO NJAC 8:60 an	ABATE d 12:12		т			G [EP	退 - 4		nt Fo
Date of Notification (1) 08/31/2018					of Building Owner/o asa Don Pedro		(2)		-	ACDE	~~~~	2.00	NAME OF THE PARTY OF	~
Agencies Notified	Type Notification			Street A	Address			2011-010-010-010-010-010-010-010-010-010	- Longe	ASBE	LICE	ENSIN	iG	31 %
X EPA X DEP X DOL	Amended Amendmen		_	City, St. News	ate, Zip Code ark ,NJ,07107	600	>>===							
DOH DCA	justification Cancellation)	Ī	Name of Chris	of Contact				Tel	enhane Nu	mher			
Name of Facility Where	Abatement is Takir	ng Place (3	3)	FAC	ILITY INFORMAT	ION	Тур	e of Facility ((4)					
PRIVATE HOUSE Street Address							X	School (K-1 Subchapter Other (i.e. p	8 (Oth	er than K-1	2) ial bui	ldings,	, home	es,
City (5) Irvington								etc.) lare Feet A	# of N/.	f Floors A		Bldg. A	\ge	
County (6) Essex					Code (7) USE ONLY)		Cun	rent Use (Pri	or if bei OUSE	ng demolis	hed)			
Name of Monitoring Firm N/A	Hired by Building	Owner (8)		ASC	M No.	Name EHV	of Ab	atement Cor BATEMEN	ntractor T LLC	(9)				
Street Address				1		Street 89 F		ess VKLIN STF	REET					
City, State, Zip Code	***************************************	3.2						Zip Code ON,NJ,07	524					
Project Manager for Mon	Itoring Firm			Telepho	ne No.	Telepi 973-		No. -5144		License N 01274	lo.			
Start Date (10) 9/13/2018		Schedule 9/14/2	ed Con 018	npletion	Date (11)			SHA Monitor ATEMENT	LLC					
Occupancy Status During						Street 89 F		ess IKLIN STF	REET					\neg
Facility Closed/Vaca Abatement Perform Other – Describe:	ed Outside of Norr OCCUPIE	nal Facility	Abatem Hours	i		City, S	tate,	Zip Code ON,NJ,07	524					\dashv
Scope of Work (Check Al	That Apply)													\dashv
≥3 sf or ≥3 if ≥160 sf or ≥260 if		X R	Renova Demoliti	tion ion		×	M G	ull Containme ini-Enclosure lovebag Procon-Exempted	edure				Α.	
Location		1	Locati	у	De	scription	2.1					Abate	ement	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Used 1 Maint Custod				ice/	Asbestos Cont (i.e. thermal surfac	aining N	lateria s insu T, or	lation,	(S	nount pecify or LF)	Remova	Repair	Encapsulate	Enclosure
BASEME	NT	Yes	No X	N/A	PIPE IN	NSULA	TIOI	N	60) LF	X		ite	е
											-			-
Name of Registered Was	te Hauler		I N.	JDEP W	/aste Cubic	Yards		Name of I	Peniste	red I andfill	1			-

EHW ABATEMENT LLC

NJDEP Waste Hauler ID No. 0037095 Cubic Yards of Waste TBD Name of Registered Landfill
TRI STATE TRANSFER

City, State BRONX ,NY

Disposal Date City, St

City, State BRONX NY

Completed by Victor Espíritu

Title Project Manager Signature A

Date 8/31/2018 Ch438

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

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Date of Notification (1) 08/30/2018					of Building Owner/ it Batra	Operato	r (2)		SBEST	020	TIAOS	801
	Type Notification			Street A	Address			70			SING	
X DOL	Initial Amended Amendmen		_		ate, Zip Code n Plainfield ,NJ	,07080)		***		-	
DOH DCA	Emergency justification) Cancellation			JOSE	of Contact EPH SAN NICC			Telephone	Numbe			
Name of Facility Where Al	patement is Takir	ng Place (3)	FAC	ILITY INFORMAT	ION	Type of Facility (4	1				
Street Address		_					School (K-12 Subchapter	S	(-12) ercial bu	tilding	s, hom	1es,
City (5) West Orange							Square Feet N/A	# of Floors N/A		Bldg. N/A		
County (6) ESSEX					Code (7) USE ONLY)		Current Use (Prior PRIVATE HO	r if being demo JSE	lished)			
Name of Monitoring Firm H N/A	lired by Building	Owner (8)		ASCI	VI No.	Name EHV	of Abatement Cont V ABATEMENT	ractor (9) LLC				
Street Address							Address ranklin Street	100.7				
City, State, Zip Code							state, Zip Code erson,NJ,07524	-				
Project Manager for Monito	oring Firm			Telepho	ne No.		none No. 333-5144	License 01274				
Start Date (10) 09/10/2018		Schedule 09/11/2			Date (11)		of OSHA Monitor V ABATEMENT	LLC				
Occupancy Status During	ed Durina Entire I	Period of A	haten	nent			Address RANKLIN STRI	EET				
Abatement Performed Other – Describe:	COPIE	nal Facility	Houn	S			tate, Zip Code ERSON,NJ,075	24				
Scope of Work (Check All ≥ 23 sf or ≥3 if ≥160 sf or ≥260 if	That Apply)	processors.	enova emolit			XX	Full Containmer Mini-Enclosure Glovebag Proce Non-Exempted	dure			re	
Location o	f	0.000	Locati							Aba	temen ype	t
Asbestos-Containing M TO BE ABAT In Facility (13)	aterial (ACM) ED	Mair	d Sole ntena odial 8 (12)	nce/	Asbestos Cont (i.e. thermal surface	scription taining M systems cing, VA niscellan	laterial (ACM) s insulation, T, or	Amount (Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure
Basemen	t	Yes	No	N/A	pipe	insulat	ion	50lf	X	-	fe	8
Name of Registered Waste				JDEP W		Yards	Name of Re	egistered Land	กแ			
EHW ABATEMENT LL	.C			auler ID 037095		ste	Control of the Contro	Transfer				
City, State Paterson,NJ			Var		Dispos TBD	al Date	City, State Bronx,N	Y				
Completed by Victor Espíritu		Title Projec	ot Ma	anager	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	ignature	/1 1 M		Date 08/30	/201	3	

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Page 1 of 2		NOTI (FICATIO	N OF AS	lew Jerse BESTOS C 8:60 and	ABATE	MEN 0)	ΙΤ	B	G	E	7	
Date of Notification (1) 08-27-18			Name PSE		g Owner/C	perato	r (2)			SEP	- 4	20	18
Agencies Notified Type Notification			1 12 12 12 12 12 12 12 12 12 12 12 12 12	Address			-				Taring the same of	7777110773	
EPA Initial				Hadley					ASI	BESTO LIC	S CC	NTF	OL
DEP X Amended Amendment				tate, Zip (n Plainfi					and the second s		Marin Minin	T C	rames ere
Emergency justification) DCA Cancellation		ig	Name	of Contac	t				Telephone 1			CP/15/20	
			FAC	CILITY IN	FORMATI	ON	70000		1.020.0				
Name of Facility Where Abatement is Takin PSEG New Milford Substation	g Place	(3)					Тур	e of Facility (4)				
Street Address								School (K-12	t) B (Other than K	12)			
132 Henley Ave							×	Other (i.e. pretc.)	ivate & comme	ercial bu	ildings	s, horr	es,
City (5) New Milford, NJ							Squ N/A	are Feet	# of Floors N/A		Bldg.	Age	
County (6) Bergen				Code (7)		_	Cur	rent Use (Prior	if being demo	lished)			
Name of Monitoring Firm Hired by Building N/A	Owner (8	3)	ASC N/A	M No.				oatement Contr vironmental	ractor (9) Services, In	nc.			
Street Address N/A						Street 17 O		ess ock Rd					
City, State, Zip Code N/A	ct Manager for Monitoring Firm							Zip Code , NY 11980					
Project Manager for Monitoring Firm N/A	nager for Monitoring Firm Telephon (10) Scheduled Completion D					Teleph	one i	No.	License 01136				
Start Date (10) 09-05-18	Scheduled Completion 10-05-18							SHA Monitor	Services, Ir	nc			
Occupancy Status During Abatement (Check	k Only O	ne)				Street				-		- 12	
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe: Normal Hours	eriod of al Facilit	Abater ty Hour	nent S			City, St	ate, 2	ock Rd Zip Code					
Scope of Work (Check All That Apply)						Yaph	ank	, NY 11980					
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 	_	Renova Demolit				×	Mi GI	ni-Enclosure ovebag Proced	t with Negative dure *) and Non-Fria			°A	
	ls	s Locati	on								Abate	ement	
Location of		Normal ed Sole				ription				-	Ту	/ре П	
TO BE ABATED	Ma	aintena	nce/		tos Contai thermal s	ystems	insul		Amount (Specify	R	T	Enc	田田
In Facility (13)	Dis-Containing Material (ACM) TO BE ABATED In Facility Used Main Custo					ng, VAT scellane	or (eous)		SF or LF)	Removal	Repair	Encapsulate	Enclosure
	TO BE ABATED Cust (13)						/			<u>a</u>	=	ilate	ıre
Control House 13kv			х	-	Fransite 1	floor p	ane	ls	125 If	x			
Control House 13kv			x		pansion				30 If	x			
Control House 13kv			x		Roof		_		228 sf	x			_
Control House 13kv			х			ucco			1500 sf	×		.8	
ne of Registered Waste Hauler NJDEF					Cubic Ya	ards		Name of Re	gistered Landfi	188			
invironmental Transport Group INC	JD000	No. 6920 6 1	of Waste				Fairless La	ndfill					
City, State Gold Mine Road, Flanders NJ 07836					Disposal TBD			City, State 1000 New	Ford Mill R	ld, Mo	rrisvi	lle, P	Α
Completed by Raymond Tutiven	Title Supe	rvisor			Sigi	nature 10 Cu a	/	+		ate 8-27-1	18		

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Print Form

Date of Notification (1) 08-27-18			Name PSE	of Building G	g Owner/	Operator	r (2)			U		SE	P -	4	2018
Agencies Notified Type Notifi	cation			Address Hadley	Rd.				1		AS	BES	FOS I	CON	ITROL
DEP X Amen	ded dment #1			tate, Zip C					les	and the same	-	- Inches	TITLE OF	CHVI	garantanahan ga
DOH justific				of Contact							ne Nu 10-48	ımber			
Name of Facility Misses Abot	T. I		FAC	ILITY INF	ORMAT	ION									
Name of Facility Where Abatement is PSEG New Milford Substatio Street Address		•)					Тур	e of Facility (4) School (K-12 Subchapter 8)	er tha	an K-1	2)			
132 Henley Ave							×	Other (i.e. pri	ivate 8	con	nmero	ial bu	ildings	, hon	nes,
City (5) New Milford, NJ							Squ N/A	are Feet	# of N/A		ors	1000	Bldg. N/A	Age	
County (6) Bergen			County (STATE	Code (7) USE ONL	0		Curi	rent Use (Prior	if beir	ng de	emolis	hed)			
Name of Monitoring Firm Hired by Bu N/A	lding Owner (8)		ASC N/A	M No.		Name WRS	of Ab	ațement Contr vironmental	Serv	(9) rices	s, Ind).			
Street Address N/A		X-12-23				Street 17 O		ess ock Rd							
City, State, Zip Code N/A								Zip Code NY 11980							
Project Manager for Monitoring Firm N/A			Telepho	one No.		Teleph 631-9	one N	No.		Lice 011	nse N	lo.			
Start Date (10) 09-05-18	Schedule 10-05-1		npletion	Date (11)				HA Monitor vironmental			10,000				
Occupancy Status During Abatement Facility Closed/Vacated During E Abatement Performed Outside of Other – Describe: Normal Hours	ntire Period of A	baten	nent			Street / 17 OI City, St	Addre Id Do								-
Scope of Work (Check All That Apply)						rapii	- I	, 111 11300							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	enova emolit				×	Mi Gl	III Containment ni-Enclosure ovebag Proced on-Exempted (1	dure					Р	
		_ocati				2			7 4114		THOO	10110	Abate	emen	t
Location of Asbestos-Containing Material (ACI	(A) Used	ormali Sole	ly by	Ashes	Des tos Conta	scription		I (ACAA)	۸۰۰۰	ount	o		1)	pe	
TO BE ABATED In Facility (13)	Mair	ntenar odial S (12)			thermal surfac		insula , or			ecify	,	Removal	Repair	Encapsulate	Enclosure
0	Yes	No	N/A			12				11.10010				Ф	
Control House 13kv			Х		ransite					5 If		х			
Control House 13kv			Х	Ext	pansion			erior) If		х			
Control House 13kv			X			Flashi	ng			3 sf		х			
Control House 13kv Name of Registered Waste Hauler		N!	JDEP W	acto	S Cubic Y	tucco		Nome of D	150			х			
Environmental Transport Group	INC	Ha	auler ID	2000070	of Was			Name of Reg				dfill			
City, State Gold Mine Road, Flanders NJ 0	7836			25.00	Disposa TBD	al Date		City, State 1000 New	Ford	d Mi	II Rd	, Moi	risvi	lle, F	PA
Completed by Raymond Tutiven	Title Super	visor			Sign	gnature @4n	u)	Ta	T.	_	Dat				

Date of Notification (1)	N	(Pu	CATION irsuant f	of New OF ASBE to NJAC	ESTOS : 8:60 and	ABATE 1 12:120	0)				E G SEP	E - /	20	7 E	n n n
08/31/2018			BORO	UGH O	F WES	ST LOI	NG	BRA	NCH		The same of the sa				
Agencies Notified Type Notification EPA Initial		1 .	Street Ad 965 W	ddress EST BR	ROADV	۷Y					ASBEST L!	OS C		ROL	&
X DEP X Amended Amendment #				te, Zip Co LONG		CH NJ	10	7765		- International Control			mice hands		
□ Emergency (in justification) □ DCA □ Cancellation	ncluding		Name of	Contact		-					ephone Nur 2-229-17		100		
	1			LITY INFO	RMATI	ON									
Name of Facility Where Abatement is Taking WEST LONG BRANCH LIBRARY Street Address 95 POPLAR	Place (3)						T] Sc		2) 8 (Oth	er than K-12 & commerci		lings,	home	es,
City (5)			-100-102				S	etc	:.)		Floors		ldg. A		
WEST LONG BRANCH								1500		1			958		
County (6) MONMOUTH			County C STATE U	Code (7) ISE ONLY)		_	C	CLOS	ED NO	USE	ng demolish	ned)			
Name of Monitoring Firm Hired by Building On LIS CONSULTING SERVICES, LLC			ASCM	No.					ment Cor ON GR						
Street Address 134 BENNINGTON PARKWAY						Street 44 M			PITCHE	R DR	RIVE				
City, State, Zip Code FRANKLIN PARK, NEW JERSEY, 0	08823		MESSEL TO			100000000000000000000000000000000000000		te, Zip LAPA	Code N, NJ,	07726	3				
Project Manager for Monitoring Firm KRYZSTOF LIS			Telephor	ne No. -0-6207		Teleph	hon	1000			License N 01359	0.			
Contract of the contract of th	Schedule			Date (11)		Name	of	OSHA	Monitor	NITAI		TOD	IEC	ПС	
Occupancy Status During Abatement (Check	Only On	2)				Street			ONWE	NIAL	LABORA	TOR	iLS,	LLC	
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Normal Other – Describe:	eriod of A	batem	ent			2333 City, S	R Stat	ROUT te, Zip		2000					
Scope of Work (Check All That Apply)						UNIC	NC	1, NJ,	07083						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	enovat emoliti				×		Mini-l Glove	Enclosure bag Pro	e cedure	Negative F			e	
	1000000	Locatio	2			21.122						1	Abate	ement pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Mai	d Solel ntenan odial S (12)	y by nce/		tos Cont thermal surfa	scription taining N system cing, VA niscellar	Mate s in	terial (Ansulation or		(8	mount Specify or LF)	Removal	Repair	Encapsulate	Enclosure
ENTIRE BUILDING	Yes	No	N/A X	10/0	TEDD	ROOF	INI	IC TA	D	22	00 SF	X		le l	
LIVINE BOILDING			^	VVA	ILKE	NOOF	IIN	10 17	ur	32		_ ^			
Name of Registered Waste Hauler GONDUL TRUCKING, INC.		H	JDEP W auler ID I 5663		of Wa 850				Fairles	s Lan	ered Landfill dfill & Be		m La	andfi	II
City, State DELRAN, NEW JERSEY					Dispos	sal Pate	2		City, Stat Morrisv		A & Bet	ehen	n, P/	A	
Completed by Mitko Cyetkovski	Title				S	Signature	e Do		154	7	1 a Da	ate 3/31/2	2018		

te of Notification (1) 13/2018		Nam	ne of Buil ough of V	ding Owner Vest Long B	ranch	(Z)	Б	Check		11 T	\ <i>11</i>	7	-
encies Notified Type Notification		Stre 965	et Addre West Bro	ss padway				D)	Ŀ	IJ.	W L		
EPA Initial Amended Amendment #		City	, State, Z st Long B	ip Code Franch, New	v Jerse	y 07765		SE Telephone Nu	P - g	1 2	018	and the same of the	1
DOH	ading	Lori	ne of Cor i Cole					732-229-1756	x 100	ONT	rrot	8	-
		-	FACILITY	INFORMA	NOITA	Type of Facility	tv (4)	LONG MANAGEMENT STATES OF THE CO		14-14-5	, or market	de Carre	74
ame of Facility Where Abatement is Taking Plest Long Branch Library reet Address	ace (3)					☐ School (K-	·12)	r than K-12) commercial bu	uildings	, hom	nes, e	tc.)	
5 Poplar Avenue itv (5)						Square Feet 4500		# of Floors	E	_	Age		
/est Long Branch ounty (6)		Co	ounty Coo	ie (7) E ONLY)		Current Use	(Prior if be Librar	eing demolisher y (Closed Not	d) In Use)				
Nonmouth Jame of Monitoring Firm Hired by Building Ow	mer (8)		ASCM N			lame of Abatem ouis Simon Gro	nent Contr oup, Inc.	actor (9)					
is Consulting Services, LLC Street Address					5	Street Address 44 Molly Pitcher							
34 Bennington Parkway					-	City, State, Zip (Manalapan, Nev	Code	7726					
Franklin Park, New Jersey 08823 Project Manager for Monitoring Firm		T	elephone 32-940-6	No.		Telephone No. 973-405-9760		License 01359	No.				
Krzysztof Lis	Scheduled	Comp				Name of OSHA IRIS Environme	Monitor ental Labo	ratories LLC					
08/27/2018 Occupancy Status During Abatement (Check	09/30/2018 Only One)					Street Address 2333 Route 22							
 ✓ Facility Closed/Vacated During Entire Pe ☐ Abatement Performed Outside of Normal ☐ Other – Describe: 	riod of Abat	temer	nt			City, State, Zip Union, New Je	Code	3					
Scope of Work (Check All That Apply)							Containm	ent with Negati	ve Pres	sure			
☐ ≥3 sf or≥3 lf ☑ ≥160 sf or≥260 lf	□ Re 図 De	enova emolit	ition tion			☐ Mini	i-Enclosu	re					
	le l	Locati	ion			⊠ Nor	n-Exemple	ed () and Non-	T TIGOTO	A	bater Typ	Henr	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Mai	ormal Sole ntena	lly ely by nce/ Staff?	(i.e. th	s Cont hermal surfa	scription of laining Material systems insula cing, VAT, or niscellaneous)	(ACM) tion,	Amount (Specify SF or LF))	Removal	Repair	Encapsulate	Eliciosola
	Yes	No	N/A	Waterpro	oofing	Tar		3200	_	Χ			
Entire Building			X	vvalerpro	Johns	Tai							
													-
			NIDED!	Mosts	Cubi	c Yards	Name	of Registered L	andfill			1	-
Name of Registered Waste Hauler			NJDEP \ Hauler II 04509		of W		GROW	'S - Fairless La					_
Newark Carting					Disp	osal Date	City, S	tate ⁄ille∫Pennsylva	nia				
City, State Newark, New Jersey Completed by	Title					Signature		ahl	Dat	te 16/2	018		
Completed DV	PM					- 3700	N	-CM V 1				d acti	_

Chizur	IFIC (P	ATION ursuai	State of New Jersey TION OF ASBESTOS ABATEMENT resuant to NJAC 8:60 and 5:16)					G	<u>-</u>	1 2	V					
Date of Notification (1) 08 / 31 / 18					32/90/3/3/3/3/20	of Buildin		0.2.		7 -	0.0	,				
						mden Re	100	E070								
Agencies Notified Type Notification ☐ EPA ☐ Initial						Street Address 520 Market St, City Hall- Suite 1300					ASBESTOS CONTROL & LICENSING					
☑ DOLWD ☑ Amended						State, Zip (
☑ DOH Amendment #3					3000	mden, N.										
DCA Emergency (including justification)				1		of Contac		101-5120		Telephone Number						
Cancellation				James Harve				n	856-757-7600							
					FA	CILITY IN	IFOF	RMATION								
Name of Facility Where Abatement is Taking Place (3) Type of Facility											(4)					
Commercial								School (K-12)								
Street Address										ubchapter 8 (Other than K-12) ther (i.e., private and commercial buildings,						
1667 Davis Street										homes, etc.)						
City (5)								-	Square Feet	# of Floors		Blo	g. Ag	je		
Camden																
County (6)					Cou	nty Code (7)(STA	TE USE ONLY)	Current Use (Prior if being demolished)							
Camden Name of Monitoring Firm Uirad by Building Ourses (9)																
Name of Monitoring Firm Hired by Building Owner (8) ASCM No Bio Terra Solutions						No.			ent Contractor (9)							
Street Address						ALL PRO MANAGEMENT LL										
P.O. Box 1224							Street Address									
City, State, Zip Code							27 Outwater Lane City, State, Zip Code									
Union, NJ							Garfield, NJ 07026									
Project Manager for Monitoring Firm Telephone No.							Telephone No. License No.									
Rick Eustaquio					73-494			73-928-4888	200700000000000	1188						
			uled C	ompl	etion Da	ite (11)	Name of OSHA Monitor			1,100						
09 /05 /18				3	0_/	18	ALL PRO MANAGEMENT LLC									
Occupancy Status During Abatement (Check only one)						Street Address										
☐ Facility Closed/Vacated During Entire Period of Abater						nent 27 Outwater Lane										
Abatement Performed Outside of Normal Facility Hour					irs - Des	S - Describe City, State, Zip Code										
Time of Abatement:AMPM/PMAM Garfield, NJ 0702																
Scope of Work (Check all that apply)																
□ ≥3 sf or ≥3 lf □ Renovati □ ≥160 sf or ≥260 lf □ Demolition							pative Pressure									
Is Location of Normally								31565 Pet 60 31			Aba	teme	nt T	уре		
Location of Norm: Asbestos-Containing Material (ACM) Used So					Asho	etae	Description o Containing Ma		Amount		D.	R	Щ	щ		
TO BE ABATED					ance/ Staff?		., the	rmal systems i	nsulation, (Specify			Removal	Repair	Encapsulate	Enclosure	
IN Facility (13)			Cus	(12				surfacing, VAT, her miscellane		SF or LF)	1	12		sula	ure	
Ye				No	N/A		0	noi mocciano	13)					te		
Exterior					\boxtimes	Wet De	mo				0	3				
										Г	7	П	П	П		
											-	7	$\overline{\Box}$	$\overline{\Box}$		
											-+-	7		-		
					NJDEP '	Naste	Cut	oic Yards of	Name of Pegis	tered Landfill			П	Ц	П	
(1) (3)					Hauler I	D No.	Wa		Name of Registered Landfill GROWS North Landfill/Fairless Landfill							
City, State					32/9	32797 As N Disposa			City, State							
Elizabeth, NJ						1 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3			Morrisville	rille, PA						
Completed By (Print or Type) Title							Signature			Control of the Contro	Date					
Allen Monchik Project Manage					nager	r Allen Monc			Monchik	· 6 8/31/18						

								-	-	-		
2h130	5	NOT		Suan	OF ASI	ew dersey BESTOS ABAT IC 8:60 and 5:1	6)	DE C		4 2	V 2018	
Date of Notification (1) 08 /	24 / 46	0				g Owner/Operator (307	1				Control of the Control
	31 / 18	8		Stat	e of Nev	v Jersey Departi	ment of Enviro	nmental Protecti ASBEST	OS (CON	TRO	1 2
Agencies Notified	Type Notification	ı			Address			LI	CEN	SINC	3	
☑ EPA DOLWD				275	Freehol	d Englishtown F	Road			Dr 202-rongs	Personance	NOTICE AND
☑ DOLWD	Amendment #	#			tate, Zip C							
DCA	☐ Emergency (in		. [-	September Contraction	n, NJ 07726						
(NJAC 5:23-8)	justification)		· [Name	of Contac	t		Telephone Number	er			
	☐ Cancellation			AIP	ayne			609-351-1991				
				FAC	ILITY IN	IFORMATION						
Name of Facility Where	Abatement is Takin	ng Place	(3)				Type of Facility	(4)				
Residential							School (K-12					
Street Address	_							8 (Other than K-12) rivate and commerc	ial hu	ilding	10	
							homes, etc.)		iai bu	nung	ιο,	
City (5)							Square Feet	# of Floors	Blo	dg. Ag	ge	-
Union Township												
County (6)				Count	ty Code (7)(STATE USE ONLY)	Current Use (Pr	rior if being demolish	ied)			
Union												
Name of Monitoring Firn	Hired by Building	Owner (8)	ASCM N	No.	Name of Abateme	ent Contractor (9))				
Bio Terra Solution	s		-			ALL PRO MA	NAGEMENT L	.LC				
Street Address						Street Address						
P.O. Box 1224						27 Outwater	Lane					
City, State, Zip Code						City, State, Zip Co	ode	W				
Union, NJ						Garfield, NJ	07026					
Project Manager for Mor	nitoring Firm		Tele	phone N	No.	Telephone No.		License No.				
Rick Eustaquio			97	3-494-	3762	973-928-4888	1	1188				
Start Date (10)		duled C	omplet	ion Dat	e (11)	Name of OSHA N	1onitor					
09 /24 /	18	10 /	19	_ / _	18	ALL PRO MA	NAGEMENT L	LC				
Occupancy Status Durin	g Abatement (Chec	ck only c	ne)			Street Address						
□ Facility Closed/Vacat	ed During Entire Pe	eriod of	Abaten	nent		27 Outwater	Lane					
Abatement Performe		CHEST COLUMN			cribe	City, State, Zip Co	ode					_
Time of Abatement:	AMP	PM/	_PM-		MA	Garfield, NJ						
Scope of Work (Check a	ill that apply)						V. 10. 10. 10. 10. 10. 10. 10. 10. 10. 10					
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf		☐ Re 図 De	novatio molitio	on n		☐ Mini-End	g Procedure	gative Pressure on-Friable Procedure	e			
			Locati						1	ateme	ent T	ype
Locatior Asbestos-Containing <u>TO BE AB</u> IN Faci	Material (ACM) ATED	Use Ma	Normal d Sole intenar todial S	ly by nce/		Description of stos Containing Ma ., thermal systems surfacing, VAT	iterial (ACM) insulation,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
(13)		Yes	(12) No	N/A		other miscellane					late	OÚ.
Throughout				\square	Drywall	/Compound		3,068 SF	M	П	П	

Drywall/Compound

cork bulletin board

facade interface

Window Glazing

Black adhesive associated with

White sealant at wood to stone

Waste

TBD

Cubic Yards of

As Needed

Disposal Date

3,068 SF

16 SF

110 LF

72 LF

Name of Registered Landfill

Minerva Enterprises

Waynesburg, OH

City, State

Allen Monchik

 \boxtimes

Date

8/31/18

Project Manager

 \boxtimes

 \boxtimes

 \boxtimes

 \boxtimes

NJDEP Waste

SW-24310

Hauler ID No.

Room 102

ATC

City, State

Exterior Facade

Exterior of 108

Shirley, NY

Allen Monchik

Name of Registered Waste Hauler

Completed By (Print or Type)

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

SHEET



ASBESTOS CONTROL &

				24 State Route 173, Union Twp, NJ		Abatemer		art til e to rete to he	a concentration
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Faculty (13)	Main odi	al Staff	Used by e/Cust (12)	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 I	R e p a i r	E n c a p s u	E n c l o s u r e
	Yes	No	N/A	Black tar flashing at Chimney &				_	
Exterior Roof		X Vent		Vents	12 SF	Х			
Exterior Roof- Shed			Х	Black tar flashing at pitched roof seams	72 SF	х			
		_							
	_								
		-							
	_	_							
	-	\vdash							
	_	_							

Completed by: (Print or type)	Title:	Project Manager	Signature:	Date:
Allen Monchik		M 254	Allen Monchik	8/31/18

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

Chut 3431

- IE/A		/									0100 11	- 100			
Date of Notification (1)		12727			N				ner/Operator (1.06					
8 /	31 / _	18	-			Prir	iceton U	nive	rsity-Office	of Design and	Construction				
Agencies Notified	Type Notifica	ation		-	S	treet	Address				MEG	IS	11 1	\//	2 6
⊠ EPA						200	Elm Driv	ve			111)	E	U '	<u> </u>	5
□ DOLWD	☐ Amended				C	itv. S	tate, Zip C	Code			HIST				-H
□ DHSS	Amendme						ceton, N		3544		IIIIII CED	- 1	0.0	120	
DCA	☐ Emergen		luding		N		of Contac		70-1-1		Telephone Numb		21	118	lone
(NJAC 5:23-8)	justification Cancellat				18		ert Orte				609-258-1841				dissili
	Carreenat							_			ASBEST	0S C	ONT	201	E.
						FAC	CILITY IN	FOF	RMATION		LIC LIC	ENS	ING	.01	CC
Name of Facility Where A			Place	(3)						Type of Facility	X-100		me many service	Printer and the second	ESS MERCHANCE
Princeton Universit	ty- Nassau F	lall	20000-000							School (K-12	?) 8 (Other than K-12)				- 8
Street Address											rivate and commerc		ildino	IS.	
Nassau Street			wago me							homes, etc.)				eccessia.	
City (5)									53	Square Feet	# of Floors	Blo	dg. A	ge	
Princeton															
County (6)						Coun	ty Code (7)(STA	TE USE ONLY)	Current Use (Pr	ior if being demolish	ned)			
MERCER															
Name of Monitoring Firm	Hired by Build	ding O	wner (8)	AS	SCM	No.	Nar	me of Abateme	ent Contractor (9)					
TTI Environmental	Inc.							В	RISTOL EN	VIRONMENTA	L, INC.				
Street Address					_			Stre	eet Address						
1253 North Church	Street							1	123 BEAVE	R STREET					
City, State, Zip Code								City	, State, Zip Co	ode					
Moorestown, NJ 08	057							100	RISTOL, PA						
Project Manager for Moni				TTe	lenh	one l	No		ephone No.	. 10001	License No.				
Michael Keehn	ioning r iiiii						-8800		15-788-6040	Œ.	00509				
Start Date (10)		chedi	uled Co				te (11)		me of OSHA N		00303	-			
9 / 17 /	202000						18	2000		VIRONMENTA	INC				
						.000				VINONWENTA	L, INC.		011111111		
Occupancy Status During	en en la recommenda de la companya del companya de la companya del companya de la		200 10 1 W 10 10 C					0.000000	eet Address						8
☐ Facility Closed/Vacate☒ Abatement Performed							catter a		123 BEAVE						
Time of Abatement:							cribe		, State, Zip Co						
						2		В	RISTOL, PA	19007					
Scope of Work (Check all	that apply)								⊠ FII C	talaaraa tala Mara	D				
≥3 sf or ≥3 lf			⊠ Re	nova	ation				☐ Mini-Enc	tainment with Neg losure	gative Pressure				
≥160 sf or ≥260 lf				moli					☐ Gloveba	g Procedure					
									☐ Non-Exe	mpted (*) and No	n-Friable Procedure	9			
					ation							Ab	atem	ent T	уре
Location Asbestos-Containing I		,	Use		ally		Acho	ctoc	Description of Containing Ma		Amazint	Re	Re	Ш	ш
TO BE ABA		1	Mai	inter	nanc	e/			rmal systems		Amount (Specify	Removal	Repair	cap	clos
IN Facilit	ty		Cust	odia (12		aff?		S	urfacing, VAT	, or	SF or LF)	Val	7	Encapsulate	Enclosure
(13)		+	Voc	No		N/A		oti	her miscellane	ous)				ate	
			Yes		-								-		
Toilet Room 225					- 1		Cerami	c Til	e Wall Adhe	sive	726 SF				
Toilet Room 225					[Floor T	ar			175 SF	\boxtimes			
Toilet Room 315A	\boxtimes]		Cerami	c Til	e Wall Adhe	sive	726 SF	\boxtimes						
					[
Name of Registered Wast	te Hauler			T			Vaste	Cub	oic Yards of	Name of Regis	stered Landfill	-			
BRISTOL ENVIRON	MENTAL, IN	IC.				iler ID 8706		Wa	ste	FAIRLESS	LANDFILL				
City, State								Dis	posal Date	City, State	3.				
BRISTOL, PA 19007	<u> </u>									FAIRLESS	HILLS, PA 1904	7			
Completed By (Print or Ty	rpe)	Title						_	Signature		Dat	e			-
Brian Scafiro		Es	timat	or					Brian	Seefino	19R 8	7 _ 3	31-	18	

		granson		T)	7580				100	Tanana .	e	@ I	= [Pr	int Fe
CHILE 17		NOTE (P	CATIO	tate of Ne NOF ASB TO NJAC	ESTOS	ABATE	MEN 0)	т	Reministration for the second		E	<u>C</u> l	<u> </u>	W	
Date of Notification (1) 8/31/18			Name o	of Building u Kirtane	Owner/C	perator	(2)				S	EP	- 4	2018	3
Agencies Notified Type Notification EPA			Street A	Address					1	1	ASBE	STO	S CO	NTRO	DL &
DEP Amended Amendment		_		ate, Zip Co arest, NJ					L			LIU	ENSI	VG	DENOMINAL ES
□ DOH			Name o	of Contact u Kirtane					Tal	lanhai	ne Nij	mber			
				ILITY INF		ON			-				-		
Name of Facility Where Abatement is Takin Residential Home	g Place (3)				<u> </u>	Тур	e of Facility (races						
Street Address		-			9		×	School (K-1 Subchapter Other (i.e. p	8 (Oth				dings,	home	es,
City (5) Demarest							Squ 32	etc.) uare Feet 00	# of	f Floo	rs	100	3ldg. A		
County (6) Bergen				Code (7) USE ONLY)			rent Use (Pricesidential H		ing de	molis	hed)			
Name of Monitoring Firm Hired by Building Project Manager	Owner (8))	ASC	M No.				batement Con es Abateme		(9)	1				
Street Address						Street 280		ress /lidland Ave	·····					1000	
City, State, Zip Code								Zip Code Brook, NJ 0	7663						
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph	none		7000	Lice	ense N	No.			
Start Date (10) 9/5/18	Schedul 9/10/1		npletion	Date (11)		100000000000000000000000000000000000000		SHA Monitor		010					\exists
Occupancy Status During Abatement (Chec						Street	Addr	ess	-			-			
Facility Closed/Vacated During Entire I Abatement Performed Outside of Norm Other – Describe: 8 A.M to 4 P.M	Period of an all Facility	Abaten y Hours	nent			City, S	tate,	Zip Code							-
Scope of Work (Check All That Apply)												-			
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		Renova Demolit				×	N G	full Containme Mini-Enclosure Blovebag Prod Ion-Exempted	edure					•	
Location of		Locati Normal	ly		Des	cription			() () ()	4 1101	11100		Abate	ement pe	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	ed Sole aintenar stodial S (12)	nce/		tos Conta thermal	aining N system: ing, VA	Materi s insu T, or		(8	moun Specif or LI	У	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A									<u> </u>		ate	Ге
Basement	Basement								13	80 S	F	X			
Name of Registered Waste Hauler		l N	JDEP W	/aste	Cubic `	Yarde		Name of F	Panists	ared I	ander				
All Stages Abatement	Н	auler ID 036592	No.	of Was			Grand (ndfill			
City, State Saddle Brook, NJ	하게 하다 하다 사람							City, State		Α					
Completed by Richard Cristofol	Title Pres	ident			Si	gnature		11	1		2000	ate /31/1	8		

Ch 194	2		NOT	TFIC (P	ATION	itate of/NOF AS	BE	STOS	BAT d-5:16	EMENT (D,	E (B E		\mathbb{V}	E	
Date of Notification (1)					Name	of Buildi	ng Ov	wner/Ope	rator (2	2)		SF	P -	1:	กาล		IU,
	30 /	18			Ch	ristian F	łealt	h Care	Cente	r		0.2	1	- ·	.010	A STATE OF THE PARTY OF THE PAR	
Agencies Notified	Type Notific	ation			Stree	t Address				-		10000	700	001		- Comment	
□ EPA					301	Sicoma	ac A	ve		Table State		ASBES	LICE			L&	
☑ DOLWD	Amender Amendm				City,	State, Zip	Code	е		ion ion	***************************************	Maria Caracana de la				Australia April	attions, tell
□ DCA	☐ Emerger	_			Wy	ckoff, N	J 07	481									
(NJAC 5:23-8)	justificati		oluulii	9	Name	of Conta	ct				Tele	phone I	Numb	er			
	☐ Cancella	tion			Mil	ce Doss					20	01-848-	4492				
					FA	CILITY	NFO	RMATIC	ON			101				1	
Name of Facility Where A	batement is	Taking	Place	(3)						Type of Facility	(4)						
Abandoned Structu	ıre Residen	ice								☐ School (K-12							
Street Address										Subchapter	8 (Oth	er than I	K-12)				
287 Sicomac Ave										Other (i.e., p homes, etc.)	rivate	and con	nmerc	al bu	ilding	s,	
City (5)										Square Feet		of Floors		Blo	lg. Ag	ne .	
Wyckoff, NJ 07481										1500	2				50+		
County (6)					Cour	nty Code	(7)(ST	ATE USE O	ONLY)	Current Use (Pr	ior if b	eina der	molish	ed)			
Bergen										Abandoned				7.70			
Name of Monitoring Firm	Hired by Buile	ding C	wner	(8)	ASCM	No.	Na	ame of Ab	pateme	ent Contractor (9)				_			
				7 (0			100			rironmental Se		s					
Street Address							-	reet Addr	M. D. C. Derrich								
								135 Kin	nelon	Road, Suite 1	02						
City, State, Zip Code		115.5						ty, State,									
								Kinnelo									
Project Manager for Moni	toring Firm			Tele	ephone	No.	_	lephone	30700		Lic	ense No)				
	22-72-22 (ACCOS)							908-218				1228	- ·				
Start Date (10)		Sched	uled C	omple	etion Da	te (11)		me of OS		onitor		,,,,,,					_
9 / 11 /	1			- 50		18				ironmental Se	rvice	S					
Occupancy Status During	Abatement (reet Addr									
☐ Facility Closed/Vacate					ment		0.000	135 Kinr		Rand							
Abatement Performed	Outside of No	ormal				cribe		ty, State,		-,							
Time of Abatement: 7/	AM- <u>3:30</u> PM/		PM		AM		1 1	Kinnelo									
Scope of Work (Check all	that apply)							timicio	11, 110	07400							_
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf			□ Re 図 De	novat moliti				☐ Mir	ni-Enclo ovebag	ainment with Negosure Procedure pted (*) and No							
	140			Loca										V annual	ateme	ent Ty	уре
Location Containing		.		Norma	ılly ely by			Descrip					,	Ţ,	Z,	ш	ш
Asbestos-Containing N TO BE ABA		1)	Ma	intena	ince/					erial (ACM) nsulation,		Amount Specify		Removal	Repair	ncar	nclo
IN Facilit			Cust	todial (12)	Staff?			surfacing	, VAT,	or		F or LF		val	7	Encapsulate	Enclosure
(13)		ŀ	Vaa			1	ot	ther misc	ellaneo	ous)						ate	(b)
Familia Dania			Yes	No	N/A									_	_		
Family Room			Ш			VAT					- 1	200 sf			Ц		Ш
Name of Registered Wast	e Hauler			3 13000	IJDEP V		Cul	bic Yards	of	Name of Regis	tered	Landfill					
Yannuzzi Group Inc				F	17467		1000000	aste		Waste Mar			irles	s			
City, State					17467		Dis	posal Da	te	City, State							
Kinnelon, NJ 07405							100000	/12/201		Eairless Hi	lls. P	Α					
Completed By (Print or Ty	rpe)	Title						Signatu	0	M	, .	-	Date				
John Mucha	/	10000000	oject	Man	ager			Ciginate	Vi.	(and			Date				

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

ch1965		٨	TON	IFIC (P	ATIO	VØAAS	lem Jersey BBESTOS ABAT AC 8:60 and 5:1	TEMENT 6)	DE	GE		<u> </u>	
Date of Notification (1)	10						ng Owner/Operator (EP -	1 25	140	
8 / _	30 /	18	_		Ch	ristian H	ealth Care Cente	er	IN THE SE		4 20	10	1
Agencies Notified	Type Notific	ation			Stree	t Address			200,000				
☐ EPA		2			30	1 Sicoma	ac		ASBES	STOS C	CINO	ROL	&
□ DOH	☐ Amended Amendm				City,	State, Zip	Code		La segonida constitución de la c	LICEN	DIM C	- THE RESIDENCE	one were to the
DCA	☐ Emerger	_	udino	1	Wy	ckoff, N	J 07481						
(NJAC 5:23-8)	justificati	ion)			Name	e of Contac	ct		Telephone Nu	ımber			
	Cancella	tion			Mil	ke Doss			201-848-4	492			
					FA	CILITY II	NFORMATION						
Name of Facility Where A				(3)				Type of Facility	(4)				
Former Service Stat	ion & Resi	dence						School (K-12	?)				
Street Address								☐ Subchapter 8 ☐ Other (i.e., p	3 (Other than K-	12)	uildin	76	
291 Sicomac Ave								homes, etc.)	iivate and comi	ilei ciai b	ullulli	15,	
City (5)								Square Feet	# of Floors	В	Ildg. A	ge	
Wyckoff, NJ 07481								3,200	2		50+		
County (6)					Cou	nty Code (7)(STATE USE ONLY)	Current Use (Pri	or if being demo	olished)			144
Bergen								Abandoned					
Name of Monitoring Firm I	Hired by Build	ding Ow	vner ((8)	ASCM	No.	Name of Abateme						
C1							Yannuzzi Env	vironmental Se	rvices				
Street Address							Street Address						
City State 7in Code								Road, Suite 1	02				
City, State, Zip Code							City, State, Zip Co						
Project Manager for Monite	oring Firm		_	Tole	phone	No	Kinnelon, NJ	07405	T				
					*		Telephone No. 908-218-0800		License No. 01228				
Start Date (10)9 /11 / _		Schedule 9				ite (11) 18	Name of OSHA M Yannuzzi Env	onitor rironmental Se	rvices				
Occupancy Status During	Abatement (0	Check o	nly o	ne)		-5-2-2-5-5-5-6-5	Street Address						-
☐ Facility Closed/Vacated	During Entir	re Perio	d of A	Abate	ment		135 Kinnelon	Raod					
Abatement Performed	Outside of No	ormal Fa	acility	/ Hou	s - Des	cribe	City, State, Zip Co	de					
Time of Abatement: 7A	INI- <u>3:30</u> PINI/_	P	'M		ΑM		Kinnelon, NJ						
Scope of Work (Check all t	that apply)						☐ Full Cont	ainment with Neg	ati D				
≥3 sf or ≥3 lf		-		novat	77.55		☑ Mini-Encl	osure	alive Pressure				
☐ ≥160 sf or ≥260 lf		\boxtimes	Der	molitio	on			Procedure mpted (*) and Nor	Fiblio D.				
			ls	Locat	ion	1	□ IAOII-EXEI	ripled () and Nor	1-Friable Proced				POLICE OF THE PARTY OF THE PART
Location o			N	lorma	lly		Description of	f I			ateme		
Asbestos-Containing M TO BE ABAT		1)		d Sole ntena	ely by	Asbe	stos Containing Mat	erial (ACM)	Amount	Removal	Repair	Encapsulate	Enclosure
IN Facility				odial	Staff?	(I.e	., thermal systems in surfacing, VAT,		(Specify SF or LF)	3701	ai	aps	uso
(13)		_		(12)		-	other miscellaned	ous)	31 01 Li)	=		ulate	6
)	r'es	No	N/A							(b	
Heater Room					\boxtimes	Heater	Flu Packaging		2 sf				
												$\overline{\Box}$	\exists
		Г	7	\Box	П								긤
Name of Registered Waste	Hauler			$\frac{1}{N}$	JDEP \	Vaste	Cubic Yards of	Name of Regist	ered Landfill				믜
Yannuzzi Group Inc.				Н	auler II		Waste		agement Fair	less			
City, State					17467	0	1/10 Disposal Date	City, State	J				
Kinnelon, NJ 07405							9/12/2018	Fairless Hil	Is PA				
Completed By (Print or Typ	e)	Title					Signature /	777		Data			
John Mucha		403345	iect	Mana	ager		Signature	1 /		Date			
SB-41					3		John	2 / /40	ha				

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no ch		NOTI	FICATIO Pursuan	State of New Jer N OF ASBESTO It to NJAC 8:60	S ABATE and 12:12	0)	NT	RE	G			\mathbb{V}	
Date of Notification (1) 08/30/2018				of Building Owne of Atlantic City		r (2)			SEF	-	4	2018	
Agencies Notified Type Notification	1			Address Bachrach Blvo				ASI	BEST	OS	CON	ITRO)L &
DEP Initial Amended			City, St	tate, Zip Code	2			International Control of the Control	L	CEI	VSIN	G	and
X DOL Amendmen	(including	g	13	tic City, NJ 08	3401			Tract					
DOH justification Cancellatio) n		Kelly					Telephone 609-347					
Name of Facility Where Abatement is Takin	D.	(0)	FAC	ILITY INFORMA	ATION				4				
Abandoned Property	ng Place ((3)				Ту	pe of Facility (4) School (K-12						
Street Address 1516 Belfield Ave						×	Subchapter 8 Other (i.e. pri	(Other than	K-12) nercial	buil	dings	hom	es,
City (5) Atlantic CIty						1000000	etc.) uare Feet 00	# of Floors		- 1	Bldg. A	\ge	
County (6) Atlantic				Code (7) USE ONLY)			rrent Use (Prior pandoned	if being dem	olishe	d)			
Name of Monitoring Firm Hired by Building N/A	Owner (8)	ASCI	M No.	Name Yanr	of A	batement Contr zi Environme	actor (9) ntal Servic	ces, I	nc.	-	7,119	
Street Address					Street	Add							
City, State, Zip Code					City, S	tate,	Zip Code n, NJ 07405	102		-			
Project Manager for Monitoring Firm			Telepho	one No.	Teleph	one	W.	Licens 0122					
Start Date (10) 9/10/2018	Schedul 9/11/2		mpletion	Date (11)			SHA Monitor i Environme	ntal Servic	es I	nc			
Occupancy Status During Abatement (Chec	ck Only O	ne)			Street	Addı	ess						
Facility Closed/Vacated During Entire Abatement Performed Outside of Norn Other – Describe: 7 am - 5 pm	Period of and Period of a	Abate y Hour	ment s		City, S	tate,	Zip Code	te 102		A.M.			
Scope of Work (Check All That Apply)				T.	Kinne	elor	, NJ 07405		Dec 1 1 1 1 1 1 2 2 2 2 2				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renov Demoli			×	F N	ull Containmen dini-Enclosure Blovebag Proced lon-Exempted (dure					
80 See	335	Local						7 4114 11011 1			200 - TO 0000	ment	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	Norma ed Sole intena todial (12)	ely by ince/ Staff?	Asbestos Co (i.e. therm surf		ateri insu T, or	ulation,	Amount (Specify SF or LF)		Remova	Repair	Encapsulate	Enclosure
Understand	Yes	No	N/A	-						_		te	Ф
Under stucco on front &			X	1	ar pape	r		600 sf	X	2			
back wall													
Roof of rear room			X.		Roofing			150 sf	X				
Name of Registered Waste Hauler		N	JDEP W	laste Cub:	c Yards		Nema - FD	aiata	16"				
Yannuzzi Group, Inc.		F	lauler ID 7467	No. of W			ACUA	gistered Land	dtill				
City, State Kinnelon, NJ					osal Date		City, State Pleasanty	rille, NJ					
Completed by John Mucha	Sr. P	rojec	t Manaç		Signature	7	ink		Date 8/30	/20	18	3-416-5-	

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

					ghunesperg	date.			-					
1	4470				CATIO	tate of New Jerse N OF ASBESTOS to NJAC 8:60 an	ABATE		Departmental Communication of the Communication of		C	8		Wht f
	Date of Notification (1) 08/28/2018			, 	Name o	of Building Owner/ ens Institute OI	Operato	r (2)) [[_ 4	20)18
	Agencies Notified	Type Notification			Street A	Address stle Point Terra				ASBI		OS CO CENS		ROL
	EPA DEP DOL	Initial Amended Amendment				ate, Zip Code ken,NJ,07030			****					
	☑ DOH DCA	Emergency justification) Cancellation				of Contact I Fernandez				phone Nun 1-912-46				
					FAC	ILITY INFORMAT	ION							
	Name of Facility Where A	Abatement is Takir	ig Place ((3)				Type of Facility	(4)					
	Street Address River Street							School (K- Subchapte Other (i.e. etc.)	r 8 (Othe	r than K-12 commercia	?) al buil	dings,	hom	es,
	City (5) Hoboken							Square Feet N/A	# of N/A	Floors		Bldg. A N/A	ge	
	County (6) Hudson					Code (7) USE ONLY)		Current Use (Pr Institute			ed)			
	Name of Monitoring Firm N/A	Hired by Building	Owner (8)	ASCN	M No.	Name EHV	of Abatement Co V ABATEMEN	ntractor (T LLC	(9)				
	Street Address						89 F	Address RANKLIN ST	REET					
	City, State, Zip Code						City, S PAT	State, Zip Code ERSON,NJ,07	7524					
	Project Manager for Mon	itoring Firm			Telepho		973-	none No. -333-5144		License No 01274	ο.			
	Start Date (10) 09/07/2018		09/10	/2018		Date (11)		of OSHA Monitor V ABATEMEN					10.70.00	
	Occupancy Status During Facility Closed/Vaca Abatement Perform	ated During Entire	Period of	Abaten	nent		89 F	Address RANKLIN ST	REET					
	Other – Describe: _		nal Facilit	y Hours				tate, Zip Code ERSON,NJ,07	7524					
	Scope of Work (Check A	Il That Apply)					-							
	≥3 sf or ≥3 lf x ≥160 sf or ≥260 lf			Renova Demolit			×	Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	e cedure				3	
	Location	of		s Locati Normal	ly	De	scription	of				Abate Ty	ment pe	t
	Asbestos-Containing <u>TO BE AB/</u> In Facili (13)	Material (ACM) ATED	Ma Cus	ed Sole aintenar stodial S (12)	nce/ Staff?	Asbestos Con (i.e. thermal surfa	taining N	faterial (ACM) s insulation, T, or	(Sp	nount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
	ROOM 2	207	Yes	No X	N/A	VAT	/MAS	TIC:	20	OSF	X		Ø.	
- 1			1	(*)	1	V/\\1			20	001	U.	1		1 1

Name of Registered Waste Hauler EHW ABATEMENT LLC	NJDEP Waste Hauler ID No. 0037095	Cubic Yards of Waste TBD	Name of Registered Landfill Tri State Transfer
City, State		Disposal Date	City, State
Paterson,NJ		TBD	Bronx,NY

Paterson, NJ Completed by Victor Espíritu

Title Project Manager

Signature

Bronx, NY

Date 08/28/2018

					grant	-		data more			-			
CHILETO			NOT	ΓΙFΙC (F	ATIO	State of NOF AS	BES	TOS ABA 60 and 5	TEMENT 6)	REC	E			
Date of Notification (1)	31 /	18	3					ner/Operator ssociates, I		II II SEI	- 4	20	18	1
Agencies Notified	Type Notific	cation				et Address	675.0			400505			o desires	
⊠ EPA								ay, Suite18	30	ASBEST L	OS CO		OL 8	Si
☑ DOLWD ☑ DHSS	Amende		^			State, Zip		7,	La La		Audulevoiro	CO-Published		ATT TO SERVICE
□ DCA	Amendm Emerger				M	ount Laur	rel, NJ	J 08054						
(NJAC 5:23-8)	justificat	ion)	iciudiii	g	Nam	e of Conta	ct			Telephone Nu	mber			
	☐ Cancella	ation			CI	narlie Lev	vis			856-793-20				
					F/	CILITY II	NFOR	MATION						
Name of Facility Where Al	patement is	Taking	Place	e (3)					Type of Facility	(4)				
Cinnaminson Home							87		School (K-12	2)				
Street Address									Subchapter 8	3 (Other than K-1	2)	ildin		
1410 Riverton Road									homes, etc.)	ivate and commi	ercial Di	ununi	, 5,	
City (5)									Square Feet	# of Floors	BI	dg. A	ge	
Cinnaminson, NJ 08	077								12,000	3		45+		
County (6)					Cou	inty Code (7)(STAT	E USE ONLY)	Current Use (Pri	or if being demo	lished)			
Burlington									THE CASE OF A VANDA STREET OF THE	mer Rehab Re	esiden	ce		
Name of Monitoring Firm H	lired by Build	ding C)wner	(8)	ASCN	No.			ent Contractor (9)					
Vertex					NA	8			ironmental Sys	tems				
Street Address 700 Turner Way								et Address						
City, State, Zip Code							1	0 East Unio						
Aston, PA 19014							1 2000	State, Zip Co						
Project Manager for Monito	ring Firm			TTO		NI-			r, PA 19382	1				
Vertex	ning Film				ephone	No. 3-8902	1	phone No.		License No.				
Start Date (10)	15	Sched	uled C			ate (11)		0-701-9000 e of OSHA M		00508				
9/ / 17 /					6 /	Control Control	AE		ionitor					
Occupancy Status During A	Abatement (et Address						
☐ Facility Closed/Vacated					ment			N. Pennel	Road					
☐ Abatement Performed C	Outside of No	ormal	Facility	y Hou	rs - De	scribe		State, Zip Co	STANDARD STANDARD			1000		
Time of Abatement: 7A	MPN	Λ/ <u>3:3(</u>)PM	_	AM			edia, PA 19						
Scope of Work (Check all t	hat apply)							100)						-
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 	00000 0000		□ Re 図 De					✓ Mini-Encl✓ Glovebag			ure			
				Loca							Ab	atem	ent Ty	уре
Location of Asbestos-Containing M		n		Norma	ely by	Aaba		Description of			R	R	ū	ш
TO BE ABAT	ED (TOW	"		inten				ontaining Ma nal systems i		Amount (Specify	Removal	Repair	ıcap	Enclosure
IN Facility (13)			Cus	(12)	Staff?	32		rfacing, VAT,		SF or LF)	Va.	-	Encapsulate	sure
ud coverte			Yes	No	N/A		otne	er miscellane	ous)				ate	
Exterior						Transit	e Sidi	ng		6000 SF	\boxtimes			
Interior						VAT / L	.inoleı	um		6290 SF	\boxtimes			
Interior				Mastic				4195 SF						
Interior					\boxtimes	Pipe Ins	sulatio	on		430 LF				
Name of Registered Waste	Hauler			100	NJDEP Hauler I		Cubic	Yards of	Name of Regist					
AMA Resource, LLC					iaulei i	D No.	90		Western Be	erks Communi	ity Lan	dfill		
City, State	The same are a second						Dispo	osal Date	City, State					
Wilm., DE		Title					ТВ	D	Birdsboro,	PA				
Completed By (Print or Typ				1	Signature	- 4 11	D	ate	/	1				
Mark Griffin		Es	stima	tor				m	7 7 (1XIII)		81	31	114	2
SB-41 IAY 11		* [Do not	use t	his form	for ashes	tos lice	nsure exemp	ted activities	11	/		/ (
							1100	JUI O ON GIIIL	LOG GOUVILLES.					

						E G	E 11 /	EMI				
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility	YE	S NO	N/A			tion of FP ng Material (A		(Speciny-St b)	Removal	Repair	Encapsulate	Enclosure
Interior			IX	Plaster	1	ASBESTO:	S CONTE ENSING	OL & 390 SF	X			
Exterior			X	Roofing				890	X			
			X						X			
			X						X			
			X						X			
			X						X			
			X					8	X			
			X						X			
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Page 2 - Notification - 1/4/13

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Date of Notification (1)				Nar	me of Buildi	ng Owner/Operator	(2)		SEP	- 1	201	Q
8/3	_ /	18				Forge, LLC		ob #1808-2:		Chk.		U
	e Notification	n		Stre	et Address				-			
N DOLLING	Initial			10	624 Jacks	onville Road		AS	BESTO LIC	S CO Ensil	NTR(OL 8
	Amended Amendment	#A		City	, State, Zip	Code		Company of the Company	With a service of the	ENEDSHIP AND A		TABLE THE SE
□ DCA □ E	Emergency		ina	В	urlington,	NJ 08016						
(NJAC 5:23-8)	ustification)		9	Nan	ne of Conta	ct		Telephone	Number			
	Cancellation	i de la companya de		M	r. Victor J	. DiAnna, Mana	ging Member	609-239				
						NFORMATION	-	100 200	0-0000			
Name of Facility Where Abater	ment is Taki	ng Pla	ce (3)				Type of Facility	, (4)				
Commercial Property							School (K-1					
Street Address							☐ Subchapter	8 (Other than	K-12)			
5 Crosswick Chesterfiel	d Road						Other (i.e., phomes, etc.	private and co	mmercia	l buildi	ngs,	
City (5)							Square Feet	# of Floor	no 1	Dida	Λ	
Chesterfield							11431.6	2	S	Bldg.		
County (6)				Cou	unty Code (7	7)(STATE USE ONLY)	Current Use (P		I' - I	107	10	-
Burlington						N = 002 01121)	Vacant	nor ii being de	emolished	1)		
Name of Monitoring Firm Hired	by Building	Owner	(8)	ASCN	I No.	Name of Abatem		1				
Finog Environmental							d Mold Service					
Street Address	The second					Street Address	a Mola Service	es, corp.				
617 Stokes Rd., Suite 4-3	318					3859 Sylon B	Oulevard					
City, State, Zip Code						City, State, Zip Co						
Medford, NJ 08055						Hainesport, N						
Project Manager for Monitoring	Firm		Tel	ephone	No.	Telephone No.	10 00000	License M	-			
Rebecca Rubinitz					15-2211	609-702-0400		License N 00862	10.			
Start Date (10)	Sche	duled (ate (11)	Name of OSHA M		00862				
8 /6 /18				4 /		EMSL Analyti						
Occupancy Status During Abate	ement (Chec		one)									
□ Facility Closed/Vacated During	ng Entire Pe	k only	Abate	ment		Street Address						
	ng Entire Pe de of Norma	k only eriod of	Abate	rs - Das	scribe	Street Address 200 U.S. Rout	te 130 North					
□ Facility Closed/Vacated During	ng Entire Pe de of Norma	k only eriod of	Abate	rs - Das	scribe _AM	Street Address 200 U.S. Rout City, State, Zip Co	te 130 North					
☑ Facility Closed/Vacated Duris ☐ Abatement Performed Outsic	ng Entire Pe de of Norma MP	k only eriod of	Abate	rs - Das	scribe _AM	Street Address 200 U.S. Rout	te 130 North					
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 ☑ Facility Closed/Vacated During ☐ Abatement Performed Outsich ☐ Time of Abatement:A ☐ Scope of Work (Check all that applied to the property of the	ng Entire Pe de of Norma MP	k only eriod of I Facilit M/	Abate ty Hou PM	rs - Des	scribe AM	Street Address 200 U.S. Rout City, State, Zip Co Cinnaminson Full Conte	te 130 North de , NJ 08077 ainment with Neg	ative Pressur	e			
 ☐ Facility Closed/Vacated During ☐ Abatement Performed Outsich ☐ Time of Abatement:A ☐ Scope of Work (Check all that applicable) ☐ ≥3 sf or >3 lf 	ng Entire Pe de of Norma MP	k only eriod of I Facilit M/	Abate ty Hou PM	rs - Des	scribe _AM	Street Address 200 U.S. Rout City, State, Zip Co Cinnaminson Full Conta Mini-Encl Glovebag	te 130 North de , NJ 08077 ainment with Negosure Procedure					
 ☐ Facility Closed/Vacated During ☐ Abatement Performed Outsich ☐ Time of Abatement:A ☐ Scope of Work (Check all that applicable) ☐ ≥3 sf or >3 lf 	ng Entire Pe de of Norma MP	eriod of I Facilit M/ Re	Abate ty Hou PM	rs - Des	scribe AM	Street Address 200 U.S. Rout City, State, Zip Co Cinnaminson Full Conta Mini-Encl Glovebag	te 130 North de , NJ 08077 ainment with Neg		cedure			
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☐ Facility Closed/Vacated Duri ☐ Abatement Performed Outsic Time of Abatement:A Scope of Work (Check all that applications of Scope of Work) Location of Asbestos-Containing Materia	ng Entire Pe de of Norma MP pply)	ek only eriod of I Facilit M/ Re De	Abate ty HouPM enovati emolitio s Locat Norma ed Sole	ion ion tion lly ely by	AM	Street Address 200 U.S. Rout City, State, Zip Co Cinnaminson Full Conta Mini-Encl Glovebag Non-Exer Description of tos Containing Mate	te 130 North de , NJ 08077 ainment with Negosure Procedure npted (*) and Nor		cedure		_	7.7.
☐ Facility Closed/Vacated Duri ☐ Abatement Performed Outsic ☐ Time of Abatement:A Scope of Work (Check all that application of Asbestos-Containing Materia	ng Entire Pe de of Norma MP pply)	eriod of I Facilit M/ Re De	Abate ty Hou PM enovate condition Locat Norma ed Sole intena	ion ion illy ely by	AM	Street Address 200 U.S. Rout City, State, Zip Co Cinnaminson Full Conta Mini-Encl Glovebag Non-Exer Description of tos Containing Mat thermal systems in	te 130 North de , NJ 08077 ainment with Negosure Procedure npted (*) and Nor erial (ACM) sullation.	n-Friable Proc Amount (Specify	cedure		_	7.7.
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Facility Closed/Vacated Duri Abatement Performed Outsic Time of Abatement:A Scope of Work (Check all that application of Asbestos-Containing Materia TO BE ABATED IN Facility (13)	ng Entire Pe de of Norma MP pply)	eriod of I Facilit M/ Re De	Abate ty Hou PM enovate condition Locat Norma ed Sole intena	ion ion illy ely by	AM	Street Address 200 U.S. Rout City, State, Zip Co Cinnaminson Full Conta Mini-Encl Glovebag Non-Exer Description of tos Containing Mat thermal systems in surfacing, VAT.	te 130 North de , NJ 08077 ainment with Negosure Procedure npted (*) and Nor erial (ACM) nsulation, or	n-Friable Proc Amount (Specify	cedure		t T Encapsulate	be Enclosure
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Agencies Notified	Type Notif	ication	1	5-55-		et Address									
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(NJAC 5:23-8)	☐ Emerge justifica	ency (i	ncluair	ıg		e of Conta		-		Telephone N	lumbor				
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					F/	CILITY	NEC	DRMATION		010 110	2710	-			
Name of Facility Where A	batement is	Takir	ng Plac	e (3)		(OILITTI	141 C	NINATION	Type of Facility (4	1)		_			
Building #3716 & 37									School (K-12)	(f)					
Street Address	•						_		☐ Subchapter 8	(Other than h	(-12)				
581 Taylor Road									Other (i.e., pri homes, etc.)	vate and com	nmercial	buil	ding	S,	
City (5)									Square Feet	# of Floors		Bld	g. Ag	10	
Piscataway									1875	1		5	S 37	je	
County (6)					Cou	inty Code ((7)(S7	TATE USE ONLY)	Current Use (Prio		nolished				
Middlesex						3			Vacant	i ii beilig deli	ionsileo	9			
Name of Monitoring Firm	Hired by Bui	ilding	Owner	(8)	ASCN	1 No.	N	ame of Abateme	ent Contractor (9)						
Criterion Laboratori	ies						- 1		d Mold Services	. Corp.					
Street Address							_	treet Address		,p-					
400 Street Road								3859 Sylon B	oulevard						
City, State, Zip Code							Ci	ity, State, Zip Co	ode						
Bensalem, PA 1902								Hainesport, N	IJ 08036						
Project Manager for Monit	oring Firm			Tel	lephone	No.	Te	elephone No.		License No	i.				
Mike Panepresso				2	215-24	4-1300		609-702-0400		00862					
Start Date (10)						ate (11)	Na	ame of OSHA M	onitor						
7 / _13_ /					7 /	18		EMSL Analyti	cal, Inc.						
Occupancy Status During	Abatement	(Chec	k only	one)			St	reet Address							_
Facility Closed/Vacated	d During Ent	ire Pe	riod of	Abate	ement		:	200 U.S. Rout	e 130 North						
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				_' ''		_Alvi	(Cinnaminson	, NJ 08077						
Scope of Work (Check all	that apply)							П							
≥3 sf or ≥3 lf			⊠ R∈					☐ Mini-Encl	ainment with Nega osure	tive Pressure					
≥160 sf or ≥260 lf			☐ De	moliti	ion			Glovebag	Procedure						
			le	Loca	ation	T		⊠ Non-Exer	npted (*) and Non-	Friable Proce					
Location of				Norma				Description of			1		eme	nt Ty	ре
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(13)				(12))	1	of	ther miscellaned	ous)	SF or LF)	2	-		Encapsulate	лге
			Yes	No	N/A									е	
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Name of Paristand 1144	. He. I-			Ц] [
Name of Registered Waste Champion	Hauler			3.53	NJDEP I		(600,000,000)	bic Yards of	Name of Registe				-		
		-			3270		5	5	Grand Centr	al					
City, State								posal Date	City, State		72 TA E-741				
Hainesport, NJ							9	0/7/18	Penn Argyle	, PA					
Completed By (Print or Typ	oe)	Title						Signature	Λ		Date	_			
Kimberly Trumbetti		0	ffice (Coor	dinato	r		OK 1	11		0-	90	11	7	

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 8 18 Mr. Craig Balogh / Job #1808-2335 Chk. #NA Agencies Notified Type Notification Street Address ASBESTOS CONTROL & **⊠** EPA ☐ Initial LICENSING **⊠** DOLWD City, State, Zip Code **⊠** DHSS Amendment #1 Boonton, NJ 07005 ☐ DCA ☐ Emergency (including (NJAC 5:23-8) justification) Name of Contact Telephone Number ☐ Cancellation Craig **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Residential School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e., private and commercial buildings, homes, etc.) City (5) Square Feet # of Floors Bldg. Age Boonton 2300 2 63 County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Morris Residential Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Criterion Laboratories Asbestos and Mold Services, Corp. Street Address Street Address 400 Street Road 3859 Sylon Boulevard City, State, Zip Code City, State, Zip Code Bensalem, PA Hainesport, NJ 08036 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Mike Panepresso 215-244-1300 609-702-0400 00862 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor <u>8</u> / <u>20</u> / 18 8 / 24 / 18 EMSL Analytical, Inc. Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 200 U.S. Route 130 North Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: ____AM-___PM/___PM-___AM Cinnaminson, NJ 08077 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ≥3 sf or ≥3 lf ☑ Renovation☑ Demolition ≥160 sf or ≥260 lf Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Location of Normally Description of Asbestos-Containing Material (ACM) Used Solely by Repair Encapsulate Remova Asbestos Containing Material (ACM) Amount TO BE ABATED Maintenance/ (i.e., thermal systems insulation, (Specify Custodial Staff? IN Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A Basement \boxtimes Floor Tile & Mastic 930 SF X M П П П Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Waste Management Hauler ID No. Waste **Grand Central** 17273 5 City, State Disposal Date City, State Lafayette, NJ 8/24/18 Penn Argyle, PA Completed By (Print or Type) Title Signature Date Kimberly A. Trumbetti Office Coordinator

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) SEP = 4, 2018														
Date of Notification (1) 8 /	14 /	18	3			e of Buildin				Chk. #NA	SEP -	4	2018	WHIST-WHALES
⊠ EPA ⊠ DOLWD ⊠ DHSS	Type Notific ☐ Initial ☑ Amende Amendm	d nent #	_	40	1 City,	et Address Furnpike State, Zip				ASE	BESTOS LICE	CON	ITRO G	L&
□ DCA (NJAC 5:23-8)	☐ Emerger justificati		ncludin	g		e of Contac				Telephone I	Number			
	☐ Cancella	tion			Ro	bert Won	nelsdorf			732-442-	-8600			
	FACILITY INFORMATION ame of Facility Where Abatement is Taking Place (3)													
Name of Facility Where Abatement is Taking Place (3) NJTA MUB - F - Hightstown														
NJTA MUB - E - Hightstown Street Address Milepost 67 S - NJ Turnpike School (K-12) Subchapter 8 (Other than K-12) Other (i.e., private and commercial buildings, homes, etc.)														
City (5) Square Feet # of Floors Bldg. Age													Age	
East Windsor/Hightstown 20,000 1 unkown														
County (6)					Cou	nty Code (7)(STATE USE ONLY	0	Current Use (Pri	or if being der	nolished)			
Mercer									Office & She	ops				
Name of Monitoring Firm H		ding (Owner	(8)	ASCM	No.	1		nt Contractor (9)					
Horizon Environmen	tal							no	Mold Service	s, Corp.				
Street Address							Street Address							
PO Box 316							3859 Sylon							
City, State, Zip Code							City, State, Zip							
Thorofare, NJ 08086 Project Manager for Monito	ring Circo			T			Hainesport,	, N	J 08036					
Dave or Steve Flanig					ephone		Telephone No.			License No).			
Start Date (10)		Sabad			56-848		609-702-040	SX		00862				
9 / 4 /	0000000				etion Da B /	ate (11) 18	Name of OSHA EMSL Analy							
Occupancy Status During A	Abatement (0	13					Street Address	,						
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Abatement Performed C	outside of No	ormal	Facilit	y Hou	rs - Des		City, State, Zip (Co	de					
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≥3 sf or ≥3 If ≥160 sf or ≥260 If			⊠ Re			_	☐ Mini-Er ☐ Gloveb	ag						
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TO BE ABATE				intena	ance/ Staff?	(i.e.	, thermal systems	s ir	sulation,	(Specify	Removal	Repair	Encapsulate	Enclosure
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7.52			Yes	No	N/A	1	other miscellan	100	us)				te	
Garage Area Restroom						Breechi	ng			150 SF		\vdash		П
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Name of Registered Waste	Hauler		ш_		JDEP 1	Maste	Cubic Yards of		Name of Posiet	orod Landfill		Ш	ш	Ш
Waste Management				1.00	lauler II	No.	Waste		Name of Regist Grand Cent					
City, State					17273	3	5 Disposal Date		City, State					
Lafayette, NJ							9/28/18		Penn Argyl	e, PA				
Completed By (Print or Type	e)	Title					Šįgnąture/	\	3,		Date			
Joann Mullarkey		Of	fice C	oor	dinato		122	1			The second secon	30-1	18	

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Date Notification (1)				1	11213			City, State					
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Date of Notification (1)	Basement				\boxtimes	Floor Ti	le		525 SF	×		П	
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Pursuant of Nack 160 amod-16 Pursuant of Nack 160 amod-16 Pursuant of Nack 160 amod-16 Pursuant of Natification (1)	Asbestos-Containing Material (ACN TO BE ABATED IN Facility		Used Main Custo	orma Sole tena dial S	lly ely by nce/	Asbes (i.e.	stos Containing Mat , thermal systems in surfacing, VAT,	erial (ACM) nsulation, or	(Specify		1	1	ype Enclosure
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County (6) Cou							Cinnaminson	, NJ 08077					
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Date of Notification (1)	☐ Facility Closed/Vacated During Enti	ire Perio	d of A	bate	ment			te 130 North					
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Date of Notification (1)		lding Ov	vner (8	3)	ASCM	l No.							
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Date of Notification (1)	Cherry Hill											Age	
Concellation (1)	City (5)							homes, etc.)					
Control of Notification (1)	Street Address							☐ Subchapter 8	(Other than k		mildia	as	
Concellation Conc				ecolo)									
Date of Notification (1)	Name of Facility Where Abatement is	Taking	Place	(3)	FF	CILITY	NFORMATION	Type of Eacility /	4\				
Capacillation (1)	Cancolle	ation					•		469-208-	8106			
Color Colo		6.0			7750.800	an consent							
Comparison (Pursuant to NJAC 8J60 and 5:16)	☐ DCA ☐ Emerge	ncy (inc	luding										
(Pursuant to NJAC 8J60 and 5:16) Date of Notification (1) 8 /30 /18					City,	State, Zip	Code		- 100g 中央の日本の日本の日本の日本の日本の日本の日本の日本の日本の日本の日本の日本の日本の	this consumers and	THE WAY SHARE	-	
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(Pursuant to NJAC 8/60 and 6:16) Date of Notification (1) Name of Building Owner/Operator (2) SEP - 4 2018		cation		17 - TO	Stree	et Address		-	ACD	OTOO	~ A 1==		-
(Pursuant to NJAC 8 60 and 5:16)	8 /30 /	18						1 13 Lancier 1					100000
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Date of Notification (1)			_				ng Owner/Operator	(2)		SEP	- 4	201	8	
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☐ DHSS	Amendr	535/4	ŧ	_		, State, Zip						-	-	
□ DCA	☐ Emerge		ncludir	ng		ackson, N								
(NJAC 5:23-8)	justifica Cancella				C-Cresto	ne of Conta arl Quijan	TO 10		Telephone N 732-928-		20			
							NFORMATION		132-320-2	2! 22 X 2	.50			
Name of Facility Where Ab	atement is	Takin	g Plac	e (3)		CILITI	VI OKWATION	Type of Facility	(4)					
Manhattan Street Co				,				School (K-1						
Street Address	939							→ □ Subchapter	8 (Other than K	(-12)				
135 Manhattan Street Other (i.e., private and commercial buildings, homes, etc.)														
City (5) homes, etc.)														
Jackson Bidg. Age														
County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished)														
Ocean							,,	Commercia		iolistieu)				
Name of Monitoring Firm H	ired by Bui	lding (Owner	(8)	ASCI	/ No.	Name of Abatem							
Finog Environmental	l.						A CONTRACTOR OF THE PROPERTY O	d Mold Service						
Street Address							Street Address		ос, согр.			_		
617 Stokes Rd #4-318	В						3859 Sylon E	Boulevard						
City, State, Zip Code							City, State, Zip C							
Medford, NJ 08055							Hainesport,							
Project Manager for Monito	ring Firm			Te	lephone	No.	Telephone No.		License No.					
Rebecca R.					(856) 5	96-9994	609-702-0400)	00862					
Start Date (10)		Sched	luled C	Comp	letion D	ate (11)	Name of OSHA N	Monitor	70002					
9 / 17 / _	18		9_/		28_ /	18	EMSL Analyt	ical, Inc.						
Occupancy Status During A	batement (Check	only	one)			Street Address							
☐ Facility Closed/Vacated	During Enti	re Per	riod of	Abat	ement		200 U.S. Rou	te 130 North						
Abatement Performed O	utside of N	ormal	Facilit	у Но	urs - De	scribe	City, State, Zip Co							
Time of Abatement:		PN	///	PI	Л	_AM	Cinnaminsor							
Scope of Work (Check all the	at apply)													
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			⊠ Re				☐ Mini-End	tainment with Neg losure g Procedure mpted (*) and No		dure				
		14		Loc				,		1 5000	atem	ent T	vne	
Location of Asbestos-Containing Ma				Norm	ally lely by		Description of	f		-	_	1	T	
TO BE ABATE	ED	"	Ma	inter	ance/	Asbe	stos Containing Ma , thermal systems	terial (ACM)	Amount (Specify	Remova	Repair	Encapsulate	Enclosure	
IN Facility			Cus	todia (12	Staff?	(surfacing, VAT,	or	SF or LF)	oval	=	nsd	osur	
(13)		1	Yes	No		+	other miscellane	ous)	Carried Street, Street			late	œ.	
Roof					N/A	Roofing	Material		2000	N .				
		-		-	-	rtoomig	Material		2000		Ш	Ц	Ш	
											П	П	П	
Name of Registered Waste I	Hauler				NJDEP		Cubic Yards of	Name of Regis	tered Landfill			Ц	L	
Waste Management					Hauler I 1727:		Waste	Grand Cen						
City, State					1/2/	,	5 Disposal Date	City, State						
Lafayette, NJ							9/28/18	Penn Argyl	e PA					
Completed By (Print or Type)	Title					Signature	77.11991		Data				
Kimberly A. Trumbetti	3	9///	fice C	Coor	dinato	r	1	1		Date	0-18	7		
ASR-41			um 60600	100000 Teles						12	u Iâ	ž.		

										-					
CHOID	7	NOT	IFIC <i>A</i> (Pu	ITION	OF AS	ew Jersey BESTOS ABAT C 8:50 and 5:1	ΓEMENT 6)	DEG	E		\mathbb{V}				
Date of Notification (1)				Name	of Buildin	g Owner/Operator ((2)	TU LI SEP	- /	4 21	018	-			
8/	30 / 18	<u> </u>		Wil	liam Bro	oks	/ Job #1808-2	2341 Chk. #5	127	000 10000		and the same of			
Agencies Notified	Type Notification			Street	Address			ASBEST	os c	ONT	BOI	2.			
☐ EPA										SING					
□ DOLWD	Amended			City, S	State, Zip (Code		400 mm (400 mm) 1 mm)	TO 445-1-1-1	More plant to your	A STATE OF THE PERSON NAMED IN	Malte Toole			
☑ DHSS	Amendment #			- William (2)	ran, NJ 0										
☐ DCA (NJAC 5:23-8)	☐ Emergency (ir justification)	cluding	3		of Contac			Telephone Numb	or		_				
(145/10 3.23-0)	☐ Cancellation				Mullark			Telebrione Numb	E						
				55.00.5				8 		-					
Name of Facility and			/a>	FAC	CILITY IN	IFORMATION									
Name of Facility Where A	batement is Taking	g Place	(3)				Type of Facility	호 3a							
Residential							School (K-12								
Street Address								3 (Other than K-12) rivate and commerc		uilding	ns.				
							homes, etc.)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	a.i.ig	, ,				
City (5)							Square Feet	# of Floors	BI	dg. A	ge				
Delran								1		1959)				
County (6)				Coun	ty Code (7)(STATE USE ONLY)	Current Use (Pri	ior if being demolish	ned)						
Burlington							Residential								
Name of Monitoring Firm	Hired by Building (Owner ((8)	ASCM	No.	Name of Abateme	ement Contractor (9)								
Finog Environment	al					Asbestos an	d Mold Service	s, Corp.							
Street Address		73.00				Street Address									
617 Stokes Rd #4-3	18					3859 Sylon Boulevard									
City, State, Zip Code						City, State, Zip Code									
Medford, NJ 08055						Hainesport, I									
Project Manager for Moni	toring Firm		Tele	phone	No.	Telephone No.		License No.							
Rebecca R.	473		(8	56) 59	6-9994	609-702-0400	ĵ.	00862							
Start Date (10)	Sched	duled C	omplet	tion Da	te (11)	Name of OSHA M	lonitor								
9 / 12 /	545,550			1		EMSL Analyt	ical, Inc.								
Occupancy Status During	Abatement (Chec	k only c	ne)			Street Address									
☑ Facility Closed/Vacate				nent		200 U.S. Rou	te 130 North								
Abatement Performed					cribe	City, State, Zip Co									
Time of Abatement:					AM	Cinnaminsor									
Scope of Work (Check all	that apply)					Cilitatiiiisoi	i, NJ 00077								
ocope of work (offect all	шасарріу)					⊠ Full Cont	tainment with Neg	ative Pressure							
≥3 sf or ≥3 lf			novati			☐ Mini-Enc	losure	,							
☐ ≥160 sf or ≥260 lf		∐ De	molitio	n		☐ Gloveba	g Procedure	n-Friable Procedure							
		le	Locati	ion		□ Non-Exe	Impled () and No	n-Friable Procedure	_						
Location	of		Normal			Description of				atem	1 000	ype			
Asbestos-Containing I		10000	d Sole		Asbe	stos Containing Ma		Amount	Removal	Repair	E	Enclosure			
TO BE ABA		2892	intena todial S			., thermal systems	insulation,	(Specify	Nou	Dair	ap	Sols			
IN Facilit	У	Cus	(12)	olali :		surfacing, VAT other miscellane		SF or LF)	<u>a</u>		Encapsulate	ure			
(10)		Yes	No	N/A		other miscellane	ous)				te				
Ceiling					Popcor	n Ceiling		180 SF							
		-		-				100 01	-	1					
										Ш	Ш				

Name of Registered Waste Hauler
Waste Management

City, State

NJDEP Waste
Hauler ID No.
17273

Disposal Date

City, State

Cubic Yards of Waste Grand Central

Disposal Date

City, State

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

Lafayette, NJ

Completed By (Print or Type)

Title

9/14/18

Penn Argyle, PA

Signature

Kimberly A. Trumbetti

Office Coordinator

Date 8-30-18

AVEIN/	_		N	OTIF	ICAT	terto f	New Jersey SPESTOS AE	ATEMENT.	ME	C		W	
CRO124	2				(Purs	uant to N	AC 8 60 and	she)					
Date of Notification (1)							ding Owner/Operation	Mary Walley Co.	- 11111	F 12			
8/	30	_	18			Tyler Mull		/ Job #18		EP - k. #51		2018	1
Agencies Notified	Type Not		on		St	reet Address	S					NATIONAL PROPERTY.	To Table Wile
☐ EPA ☑ DOLWD									ASBE	STOS	CON	TRC	16
⊠ DHSS	☐ Amen	(100 To 100 to 1	+#		Ci	ty, State, Zip	Code		A compression of the Company of the	LIUCI	4011/11	J	
□ DCA	☐ Emerg			ling		Maple Sha	ide, NJ						
(NJAC 5:23-8)	justific	cation)	1	g	-	me of Conta			Telephone				
	☐ Cance	ellation	1			Jim Mullar	key		Leibuvon				
					I	ACILITY	INFORMATION		_1				
Name of Facility Where Ab	oatement i	is Tak	ing Pla	ice (3)				Type of Facili	tv (4)	315-33-15			
Residential								School (K-	TO 1 (3) (3)				
Street Address								── □ Subchapte	er 8 (Other than K	-12)			
014 (5)								homes, et	private and com	mercial	buildi	ngs,	
City (5)								Square Feet	# of Floors		Bldg.	Λ σ ο	_
Maple Shade								1300	1		195		
County (6)					Co	ounty Code ((7)(STATE USE ONLY	Current Use (Prior if being dem	olished		10	_
Burlington								Residentia	al	onsiicu	,		
Name of Monitoring Firm H	lired by Bu	uilding	Owne	r (8)	ASC	M No.	Name of Abate	ment Contractor (_
Finog Environmental								nd Mold Service					
Street Address					×		Street Address						
617 Stokes Rd #4-318	3						3859 Sylon	Boulevard					
City, State, Zip Code							City, State, Zip						
Medford, NJ 08055							Hainesport,	NJ 08036					
Project Manager for Monitor	ring Firm			100	lephon		Telephone No.		License No.				_
Rebecca R.						96-9994	609-702-040	00	00862				
Start Date (10)	40					ate (11)	Name of OSHA	Monitor	33302				_
9 / 10 / _		7	9	/ _1	3 /	18	EMSL Analy	tical, Inc.					
Occupancy Status During Al	batement	(Chec	k only	one)			Street Address						
Facility Closed/Vacated [During Ent	tire Pe	eriod of	Abate	ement		200 U.S. Ro	ute 130 North					
Abatement Performed Ou Time of Abatement:	Utside of N	Norma	l Facili	ty Hou	rs - De	scribe	City, State, Zip C						_
			IVI/	Piv		_AM	Cinnaminso						
cope of Work (Check all that	at apply)										- 10.1W		
≥3 sf or ≥3 lf			⊠ Re	enovat	ion		Full Cor Mini-En	ntainment with Ne	gative Pressure	INP	E		
] ≥160 sf or ≥260 lf			□ De	emoliti	on		☐ Gloveba	ag Procedure		1.,			
							☐ Non-Exe	empted (*) and No	on-Friable Proced	ure			
Location of				Loca Norma						Al	atem	ent T	'vp
Asbestos-Containing Mat	erial (ACN	A)	Use	ed Sol	ely by	Ashes	Description of stos Containing Ma	of			1	T	-
TO BE ABATED IN Facility	D			intena todial	ince/ Staff?	(i.e.	, thermal systems	insulation.	Amount (Specify	Removal	Repair	Encapsulate	1
(13)				(12)	Otan:		surfacing, VAT other miscellane	, or	SF or LF)	oval	=	nsd	
			Yes	No	N/A		other miscellane	eous)				late	1
eiling					\boxtimes	Popcorn	Ceiling		400.05	-	-		L
tchen							e & Mastic		120 SF		Ш	П	
						1.001 111	e a mastic		105 SF				
me of Registered Waste Ha	auler			_	IDED	1	_						
Vaste Management	-4101			H	JDEP I		Cubic Yards of Waste	Name of Regis					
/, State					17273	3	5	Grand Cen	tral				
afayette, NJ							Disposal Date 9/13/18	City, State					
mpleted By (Print or Type)		Title					^	Penn Argyl	e, PA				
Cimberly A. Trumbetti		120,000,000	fice C	00	inator		Signature	()	Da	ite			_
41		Oil	iice C	oord	mator		CAN I	1		9-3	10-1	8	

Chaloual3c Date of Notification (1)	12	NOT	IFICATIO (Pursuar	State of N ON OF As of to NJA	C 8:60 ai	ABATE nd 12:12		Т	D.E	SEP	<u>-</u>			B t		
August 30, 2018			IMTT	of Buildin - Bayo	ig Owner inne	Operato	r (2)				Otomorphi					
Agencies Notified Type Notification	n		Street	Address	0/3				ASE	ASBESTOS CONTROL & LICENSING						
EPA DEP Amended Amendme				East 22		et				-	Montana			ariana n		
	nt #			tate, Zip (nne, Ne		ev 070	02									
DOH Emergence justification Cancellation		ng	-	of Contac		cy or or	02		Telepho	no Nivo	obor	4, 100, 413				
X DCA Cancellation			Danie	el Walte		318-22										
Name of Facility Where Abatement is Tak	ing Place	(3)	FAC	CILITY IN	FORMAT	ION	Type of Facility (4)									
IMTT - Bayonne Street Address								School (K-1	2)							
250 East 22nd Street							×	Subchapter	8 (Other that private & con	an K-12 nmercia) al bui	ldings	, hom	ies,		
City (5) Bayonne							Squ 1,6	are Feet	# of Floo N/A	ors		Bldg.	Age			
County (6) Hudson			County (STATE	Code (7) USE ONL	y)		Cun	rent Use (Prior t of Service	or if being de e Storage	emolishe Tank	ed)					
Name of Monitoring Firm Hired by Building Ensolum, LLC	Owner (3)	ASC	M No.			of Ab	atement Con								
Street Address 545 E. John Carpenter Fwy, Suite	300				-	Street	Addre				27,0042			-		
City, State, Zip Code Irving, TX 75062						City, S	tate, 2	Zip Code La 70183								
Project Manager for Monitoring Firm Kevin Hunter			Telepho	one No. 26-079()	Telephone No. License No.						-				
Start Date (10)				Date (11)		Name of OSHA Monitor										
9/14/18	9/28/1	270				Kevin Hunter										
Occupancy Status During Abatement (Che Facility Closed/Vacated During Entire		100				Street 545 F		ess hn Carpen	tor Eway 9	Ct- 200						
Abatement Performed Outside of Non Other – Describe: Tank Out of Service	mal Facilit	y Hour	ment 's					Zip Code	iter r wy, c	31e 30	U					
Scope of Work (Check All That Apply)	,							75062								
] ≥3 sf or >3 lf	×	Renova					1									
≥160 sf or ≥260 lf	-	Demoli				×	Mi Gle	II Containme ni-Enclosure ovebag Proce	edure							
	Is	Locat	ion			10	I NO	n-Exempted	(*) and Non-	-Friable			e ement			
Location of Asbestos-Containing Material (ACM)		Norma ed Sole			Des	cription	of						ре			
TO BE ABATED	Ma	intena todial S	nce/	Asbes (i.e.	tos Conta	aining Ma systems	ateria insula	I (ACM) ation.	Amount (Specify		וג		En	Е		
In Facility (13)		(12)	otan :		surfact other m	ing, VAT	, or		SF or LF		Removal	Repair	Encapsulate	Enclosure		
	Yes	No	N/A			- Jonaire					val	Ť	ulate	ure		
Tank 8070	х			Mis	c. Othe	r (Tank	(Ма	stic)	1,600 S	of	ς					
														\dashv		
ame of Registered Waste Hauler			JDEP W		Cubic Y			Name of Re	egistered La	ndfill						
reehold Cartage			auler ID -2265	No.	of Wast	te		IESI								
ity, State unmore, PA					Disposa 10/1/1			City, State Bethlehe	m. PA							
ompleted by whn Daniel Walters	Signature					_										
THE VVAILERS	Area	Mana	iger			M/Se	Ē	5		8/30						

Ch 549			пот	超	State of New Jersey CATION OF ASBESTOS ABATEMENT Pursyanuto NJAC 8:60 and 5:16)								\mathbb{V}	<u>E</u>	n		
Date of Notification (1)	31 /	18		L		e of Buildin rizon	g Ow	ner/Operator (2)	III S	EP -	4	2018		U		
Agencies Notified	Type Notific	ation			Stree	t Address				ASBE	STOS	001	ITRO	3 1)		
⊠ EPA	☐ Initial	ar.			1 \	erizon W	/ay			rock	LIGEN			the ESE			
☑ DOLWD ☑ DHSS	Amended Amendm				1 200	State, Zip (
☐ DCA	☐ Emergen		cluding]	1/11/11			NJ 07920									
(NJAC 5:23-8)	justificati				100000000000000000000000000000000000000	e of Contac				Telephone							
	☐ Cancellat	tion				an Kings	200	<u> </u>		(201) 35	6-516	6					
					FA	CILITY IN	IFOF	RMATION									
Name of Facility Where A	Abatement is 1	Taking	Place	(3)					Type of Facility								
Verizon									School (K-1		K 12)						
Street Address									Other (i.e.,	private and cor	mmerci	al bu	ilding	S,			
1067 Stuyvesant Av	venue								homes, etc								
City (5) Union									Square Feet	# of Floors	S	Blo	dg. Ag	je			
County (6)					0	-1 0 -1 /	TVOTA	TE 1105 0411 10	10,000	3							
Union					Cou	nty Code (()(STA	ATE USE ONLY)	Current Use (P	rior if being de	molish	ed)					
Name of Monitoring Firm	Hirad by Build	dina O	WDer	(8)	ASCM	No	Mai	ma of Abatama	ant Contractor (6	N							
USA Enviornmenta		unig O	wilei	(0)	ASCIV	NO.		IVN Restorat	ent Contractor (9	1)							
Street Address								eet Address	uon inc								
8436 Enterprise Av	enue						1000	7 Foster Ro	ad								
City, State, Zip Code							-	y, State, Zip Co									
Philadelphia, PA 19	153							Staten Island									
Project Manager for Moni				Tele	phone	No.		ephone No.		License N	lo						
Mark Jenkins						5-5870		18-605-6256	i	00774	0.						
Start Date (10)	5	Schedu	uled C	omple	tion Da	ate (11)	Nar	me of OSHA N	lonitor								
09 /12 /	18	1	0_/	3	_ /	18	Т	estor Tech									
Occupancy Status During	Abatement (Check	only o	one)			Street Address								_		
☐ Facility Closed/Vacate							1	0 59 Jackso	n Avenue								
Abatement Performed Time of Abatement:						scribe	City	y, State, Zip Co	ode								
Time of Abatement: _A	AIVIPIVI	3.00	PIVI- <u>1:</u>	30AN	!		L	IC NY 11101	E								
Scope of Work (Check all	that apply)									No Control Control							
≥3 sf or ≥3 lf			⊠ Re	novat	ion				tainment with Ne losure	egative Pressu	re						
☐ ≥160 sf or ≥260 lf			De De	moliti	on			☐ Glovebag	g Procedure								
		-	le	Loca	ion	_	-	☐ Non-Exe	mpted (*) and N	on-Friable Pro	cedure	7-35		-	_		
Location	of			Norma				Description o	ıf				ateme	1			
Asbestos-Containing I	Material (ACM	1)		d Sol	ely by			Containing Ma	terial (ACM)	Amoun		Remova	Repair	Enc	Enclosure		
TO BE ABA IN Facilit					Staff?	(i.e		ermal systems surfacing, VAT,		(Specify SF or LF		Nova	ai-	aps	losu		
(13)	.,	-		(12)	T	-		her miscellane		SF OI LF	,	<u>a</u>		Encapsulate	re		
			Yes	No	N/A									Ф			
Basement Generator	Room		\boxtimes			Pipe In	sula	tion and Fitt	ings	158LF		\boxtimes					
			\boxtimes														
			П									П		П	П		
						-						$\frac{\Box}{\Box}$		긤			
Name of Registered Wast	te Hauler		ш		JDEP	Masta	Cuk	oic Yards of	Name of Boo	 istered Landfill		Ш	Ш	Ц	Щ		
Newark Carting	ie i laulei			W. C.S.	lauler I		Was		G.R.O.W.S								
City, State					NJ-5	66	1 Dia			o., 1116.							
Newark, NJ							100	posal Date 9/30/18	City, State Morrisville	o DA							
							U		IVIOTTISVIII	e,FA	1=						
Completed By (Print or Ty Ralph Barnhardt	(pe)	Title	roice	6 B/I				Signature	Date 08-3(-2					7			
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