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

GAC Project # 060-12

Client Project #								j.	1 Km		
Date of Notification (1) Augus	t 28, 20	12	141-141	euro e eta esta e	Name of Building Owner/ RUTGERS, THE ST	Operator (2)	VERSIT	V/OEJ	NJ	6/1	Mr.
Agencies Notified EPA DCA		☑ Initial ☐ Amende	Notificated Notificated	fication	Street Address ENVIRONMENTAL 27 ROAD 1, BLDG	HEALTH	& SAFE	TY DE	P PTS	AM	9: ĉie
⊠ DOL				o.uunig		08854		4/0	FALL	Byr.	*
☑ DEP- No Longer REQUI	RED						Telepho	ne Nun	nbér /	VG "	01. O2.
				FACILITY IN							V. 50
Name of Facility Where Abates PHARMACY, BLDG#		king Place (3)			Type of Facility (4) School (K-12)	an K-12)					
Street Address BUSCH CAMPUS					Other (i.e. private & com	mercial buildi			60+ ye	ears	
City (5) PISCATAWAY	County (6	LESEX					74				
Name of Monitoring Firm Hired ATC ASSOCIATES	d by Bldg. (Owner (8)			Name of Contractor (9)						
Charak Address						TEMENT C	ONSUL	IANTS	S, INC	•	
3 TERRI LANE					268 MAIN STREET						
City, State, Zip Code					City State, ZipCode				-1.00		
BURLINGTON, NJ 08	8016				BUTLER, NJ 07405						
Project Manager for Monitoring BRIAN KEARNY	g Firm	-			Telephone Number			Number	8		
Scheduled Start Date (10)		Cobodulad (Completic	n Data (11)			00840				
09/12/12		09/18/12		on Date (11)	11	5.					
Occupancy Status During Ab					Street Address						
□ Facility Closed/Vacated D				nt	20-21 WARGARAW	ROAD					
				8 Occupied	City, State, Zip Code			11-1-1-1-1-1			
Other – Describe:		- 0.00 Fill	Our	o Cocapica							
					FAIRLAWN, NJ			72			
Scope of Work (Check all that	annly)										
□ ≥ 3 sf or ≥ 3 lf				⊠Renovation				h Nega	tive Pre	essure	
≥ 160 sf or	≥ 260		Street Address								
Landing of Asharts Containing	T (-1-	antina Managar	0 11	I D							dure
Location of Asbestos-Containin Material (ACM) in Facility (13)	Sole			(ACM) (i.e. thern	nal systems insulation, surfac	ing, (Spec	ify SF				Enclose
2	YES		NA	V/VI, or other line	oon. j	0, 2,					
BASEMENT MER 020 A	X			TSI		400	LF [X		Landa No	
Name of Reg. Waste Hauler See Hauler Below #1 &	2			r ID#	Cubic Yards of Waste:	30 CY					ill
Hauler #1) Greenwood Abate NJDEP # 12561 Hauler #2) Newark Carting, I NJ DEP # 4509			Butler,	NJ 07405				10 Ro 19	0 New d. Morr 067	Ford N isville,	
Completed by (Print or Type)		Γitle			171777			-			
RAYMOND C. PEDAL		SENIOR P MANAGER		CT	Raymand C. Per	dalino	A	ugust	28, 2	012	

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

GAC Project # 060-12			(Purs	suant to N.J.A.C	C. 8:60-7 and 12:120-7)				F.	PEN	Elv
Client Project #										" Lat	CHY
Date of Notification (1)	i			Committee to the second of the second	Name of Building Owner RUTGERS, THE S	r/Operato	r (2)		2010		VIIIA
August 3	31, 201	12			RUTGERS, THE S	TATE	UNIVERS	SITY C	OF MJS	FP .	
Agencies Notified		Notification	Type		Street Address					-1 -5	AM
	1	IX Initial		ation	ENVIRONMENTAL	HEAL.	TH & SA	FETV	DEPT		717
□ EPA		□Amend									***
□ DCA					27 ROAD 1, BLDG	4000, 1	LIVING 5	TON	ANIPL	1300	COLL
☑ DOL		L Emer	gency (including	City, State, Zip Code				~	ILEN	SINIL
		iustifi	cation)		PISCATAWAY, NJ	08854					-11/1C
X DEP- No Longer REQUIRE	D	☐ Cance			Name of Contact		Tele	ephone	Number		
⊠ DOH	- 1	- Carlot	Silica		MIKE SMITH, ENV	HEAL	TU	Section 1			
							111	Daylor			
					& SAFETY						
6 T 10 100 AL (~ .	. 51 (6)		FACILITY IN	IFORMATION						
ame of Facility Where Abateme			!		Type of Facility (4)						
UBLICATIONS BLDG#	6021				School (K-12)						
t					Subchapter 8 (other th	nan K-12)					
Street Address					Other (i.e. private & co		buildings b		oto \		
COOK CAMPUS											
Sity (5)	ounty (0)	1	T C= -	Code (7)	Sq. Feet: N/A	# UI F100	ors: 3 Blo	ug. Age	<u> 5.</u> 00+	years	
	ounty (6)			y Code (7)		¥ 1920					
NEW BRUNSWICK	ממוואו	LESEX	Totale	Use Only)	Current Use (prior if beir	ng demolis	sned): S	IKUCT	JKE TO	RF	
			1		DEMOLISHED PRIOR	CUSE AC	CADEMIC	PUBLIS	HING		
lame of Monitoring Firm Hired by	Bldg. C	Owner (8)	ASCM	No.	Name of Contractor (9)						
ATC ASSOCIATES	-1-800		0098								
					GREENWOOD ABA	TEMEN	T CONS	ULTAR	NTS. IN	C.	
treet Address					Street Address				-,	-	
TERRI LANE					<u>Stroct Address</u>						
I - I I I I I I I I I I I I I I I I I I					268 MAIN STREET						
	0 000				200 WAIN STREET						
City, State, Zip Code		1			City State, ZipCode		ed with the control of				
BURLINGTON, NJ 080	16				BUTLER, NJ 07405						
Project Manager for Monitoring Fi		Telephone I	Number		Telephone Number	-	Lico	nse Nun	ober		
BRIAN KEARNY	1111	609-386			Telephone Number		Lice	ise ivun	ibei		
INIMIN NEMNINI		009-386	-0000		973-492-0477		008	40			
shedulad Stad Data (46)		0.1.1.1	0 1 11	5 . ((1))			1 008	40			
cheduled Start Date (10)				on Date (11)	Name of OSHA Monitor						
9/10/12		09/12/12			11	_					
					ENVIROVISION, IN	C.					
Occupancy Status During Abate					Street Address						
Facility Closed/Vacated Durin				nt	1212 12 13 13 13 13 13 13 13 13 13 13 13 13 13	1200					
Abatement Performed Outsid					20-21 WARGARAW	ROAD					
escribe	3.710				City, State, Zip Code						
Other - Describe: Shift Ho		2.00 ABA	E-00 6	RE DAILY							
Doner - Describe: Shift Ho	u15: 8	J.UU AIVI -	5.00 F	AN DAILY							
					FAIRLAWN, NJ						
2122 1 22					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						
cope of Work (Check all that app	y)										
						Full Co	ntainment	with Ne	gative Pr	essure	
\triangle \geq 3 sf or \geq 3 lf				Renovation			nclosure				
区 > 160 sf or > 26				☑ Demolition							
				ET Dellionicon			ag Proced	2.1-190		_	
postion of Ashartan Co. 1111	L			I 5	X	11011	empted (*)	_			dure
ocation of Asbestos-Containing		cation Norma			bestos Containing Material		mount	Abate	ement Typ	<u>e</u>	
laterial (ACM) in Facility (13)	ly by Maint./Ci		nal systems insulation, surfac	0.	pecify SF	Pama	ve Repair	Encon	Enclose		
	Staff?		NIA	VAT, or other mis	sceil.)	or	·LF)	Vellio	ve Repair	шисар	Littlose
id o old El	YES	NO	NA							-	
d & 3 rd Floor	X			VAT		10	00 SF	X			
			PINCHES SEE		1 2 2 3	. (-)					
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ame of Reg. Waste Hauler		NJDEP Was	te Hauler	ID#	Cubic Yards of Waste:	5 CY	Nam	e of Rec	gistered La	andfill	
ee Hauler Below #1 & 2		See Below	V				G.R	.O.W.S	6. North	Landf	ill
. #100											
lauler #1) Greenwood Abatemer	it Consu	iltants, Inc. –	Butler, l	NJ 07405		Disposa			City, Sta		
NJDEP # 12561						09/12/	12			w Ford N	DECEMBER 1
lauler #2) Newark Carting, Inc.,	Newar	k, NJ 04509				= 4		CC	Rd. Mor	risville,	, Pa
NJ DEP# 4509									19067	4700	
									215-736	-1/00	
ompleted by (Print or Type)	Ti	itle		1	Signature		Date			X	
AYMOND C. PEDALING		ENIOR PI	RO.IFC	T:	EXCUSE HOWEVER TO THE REST OF THE PARTY OF T	11	-	5 200	st 31, 2	2012	
	20 A 10 A	JANAGER			Raymand C. Per	dalino	-	Augu	3001, 1	-012	

Check # 1806

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

											V/2		33035-5	
Date of Notification (1) 8/31/2012				of Buildin odia Tec					1	UIZ SE	P -5	AF	9:	54
Agencies Notified Type Notification		-		Address Telcord	ia Drive)			1	SBIR	TUS	CO	NTF	ROL
EPA Initial Amended Amendment	#			tate, Zip o		54				<u> </u>	LIUE	Yo H	46	G.
Emergency justification) DCA Cancellation	9 8	9		of Contac	it				Te	elephone	Number	,		
DOA Carrocitation			FAC	CILITY IN	FORMAT	ION			1.		_	-		
Name of Facility Where Abatement is Takin Telcordia Technologies, Inc.	g Place	(3)		ZILIT III	Ordinal		Тур	e of Facility	8 33 Usaso					
Street Address One Telcordia Drive (Bldg. 3)					17.8		×	School (K- Subchapter Other (i.e. petc.)	8 (Otl			iilding	s, hor	nes,
City (5) Piscataway							Squi	are Feet		of Floors		Bldg. 50 Y		+
County (6) Somerset				Code (7)				ent Use (Pri mmunicati		ing demo	olished)			
Name of Monitoring Firm Hired by Building (Environmental Tactics, Inc.	Owner (8)	ASC N/A	M No.		100000000000000000000000000000000000000		atement Cor st Haz Ma		1000000	nc.			
Street Address			18//		-	Street A	Addre							
64 Broad Street City, State, Zip Code						City, St	ate, 2	Zip Code	_				-	
Matawan, NJ 07747								NJ 07504	1					
Project Manager for Monitoring Firm Mr. Tom Geiger			Telepho 732-2	one No. 90-2217	7	Telepho 973-3				License 00507				
Start Date (10) September 14, 2012			mpletion 30, 20	Date (11) 12				HA Monitor as above)					
Occupancy Status During Abatement (Check	Only Or	ne)				Street A	ddre	ss						
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm. Other – Describe: Unoccupied Area (Me	al Facility					City, Sta	ite, Z	ip Code				2		
Scope of Work (Check All That Apply)														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	Renova Demoli				×	Mir	Il Containme ni-Enclosure ovebag Proc	edure				-	
	T			1			No	n-Exempted	(°) and	NON-FI	able Pro		emen	t
		Locat			Dag	scription o	£					Ту	ре	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	d Sole intena todial S (12)	nce/		tos Conta thermal surfac	aining Ma systems i cing, VAT, niscellane	terial nsula or		(S	mount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
511 65 # M h i 15	Yes	No	N/A		Dina	lasylatio		-	65	0 LF	x		i io	
Bldg. 3 Penthouse Mechanical Rm.	X			*	Pipe	Insulation		-		U LF	^			
Name of Registered Waste Hauler			JDEP W		Cubic			Name of R	A INCOME.					-
Newark Carting, Inc.			auler ID 1222	IVO.	of Wasi 10			IESI - Be	thleh	em Lar	dfill			
City, State Newark, NJ 07105	11	10			Disposa 9/30/2		/	City, State Bethlehe	m/h	A18015				
Completed by James E. Unger	Title Proje	ct Ma	nager		Sig	gnature	7	5/	12		ate /31/20	12		
ASR-41 (R-06-08)	L				1	* Do not u	se th	is form for a	sbesto	s licensu	re exem	pted a	ctiviti	es.

State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7)

B & G proj. #: 2012-156

Check # 5451

Date of Notification	ı (1)	N	ame of Buil	ding Owne	er/Operator (2)	ĺ	4	2012 SEP -5	AM II				
0 8 / 3 1	1/112		Dorothy E	Broome				ZUIZ SLI "J	ADTI	. (1			
Agencies Notified	Type Notificat		reet Addre		COMMUNICATION OF THE PARTY OF T			\$5BESTOS	CONT	ROL			
☐ EPA			15 Lincol	n Street				& LICE			1		
☐ DEP			ity, State, Z	ip Code							10		
⊠ DOL	Amendr	ment	Morristo	wn, NJ 07	7960								
☑ DOH	_		ame of Con	tact			•	Telephone	Number				
☐ DCA	Cancella	ation	Dorothy	Broome				(0787)//8					
				FACI	LITY INFORM	IATION		A					
Name of facility w	here abatement i	s taking pla	ce (3)			X I		Type of Facility (4	(K - 12)				
									M 99	thor th	on K	12\	
same							And the second s	A STATE OF THE STA	pter 8 (O Private/Co			-12)	
Street Address									lomes, e				
15 Lincoln Str	eet							Square Feet #	of Floor	s	BI	dg. Ag	je
City (5)		Cour	ity (6)			100000000000000000000000000000000000000	nty Code (7)				r 1	. 0	
	11.070.60	Ma	t.			(Stat	te use only)	Current Use (Pri	or if bein	g aem	olisne	ea)	
Morristown, Name of Monitorin		Mor			ASCM No.	L 11	Name of Abatement (-				
	ig i iiii i iiica by	Diag. Owne	(0)		ACCIVITIO.		B & G Restoratio		2				
n/a Street Address						-	Street Address	ii, mc.			-		
Street Address							105 Ryerson Roa	d					
City, State, Zip Coo	ie						City, State, Zip Code						
Oity, Otato, Esp oot							Lincoln Park, NJ	07035					
Project Manager fo	r Monitoring Firm	1	Ph	one Numb	er		Telephone Number		License	Numb	er		
							973-696-6869		0378				
Scheduled Start Da	ate (10)	ISched	. Completic	n Date (11)		Name of OSHA Moni						
	,		3		•		· B & G Restoration	on, Inc.			-		
9/12/2012	D :- Al-1	9/13/	and the state of the				Street Address						
Occupancy Status	d/vacated during			ment			105 Ryerson Roa	ıd	-				
	erformed outside						City, State, Zip Code						
Other-Descr	ibe:					-	Lincoln Park, NJ	07035					
Scope of Work (cl	neck all that appl	y)											
Demolition	\boxtimes	Renovatio	n			□F	ull Containment w/neg	ative pressure	Glovel	oag pr	oced	ıre	
>3 sf or >3 If		≥160 sf or	≥260 If			⊠ N	fini-enclosure		Non-fr	iable	oroce	dure	
Location of			normally i		1					R	R	Е	Е
asbestos-co		by mainte staff(12)	nance/cust	odial			sbestos-containing	Amount (Specify SI	- or	m	e p	n	n
material to b abated in fac		Yes	No	N/A	material ((ACM)		LF)	- 01	0	a	a	L
		103	INO	IN/A						е	i	р	
basement					pipe insular	tion		55 lf		X	ᆜ		붜
										님	片		붜
										H	片	H	H
									*********	H	片	片	쓔
Desirt and Monte	Jaular	L	Dustant	0# 10	ubic Yards of \	Masta	Name of Registered	Londfill	-		Ш	Ш	Ш
Registered Waste I B & G Restorati		195	P Hauler I 63		yard	vasic	Tullytown Resou		Center				
City, State		L_		Disposal D	ate		City, State						0,00
Lincoln Park, N	J 07035			9/13/20			Tullytown, PA					() 	
Completed by (Prin	nt or Type)	Title			Signature	(Gordana Luna		Date	010			
Gordana Luna		Treasure	r				zouaina Luna		8/31/2	012			

State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7)

B & G proj. #:

2012-163

RE Check # 5452

Date of Notification	(1)	- 111	lame of Bu	ildina Own	er/Operator (2)		9	0010.00							
0 8 /13 1]/ <u> 1 2 </u>		Darene H		(-)		2	UIZ SE	P -5	AH	:	ju			
Agencies Notified	Type Notificat	tion	treet Addre	ess			• 6	SHES	They	5751	119-14		-		
☐ EPA			325 Fran	klin Roac	l			& 1	TOS (ICEN	5 U	ICKI	JL			
DEP	_		ity, State, 2	Zip Code					10:15		حلنا	CD			
⊠ DOL	☐ Amend	ment	Denville	, NJ 0783	34							Y DV			
☑ DOH		N	ame of Cor	THE RESERVE AND ADDRESS OF THE PERSON NAMED IN					Telephor	ne N	umbe	-			
☐ DCA	Cancell	ation	Darene l	Haddon						288	7				
				FAC	ILITY INFORM	ATIO	N				77.17.28				
Name of facility whe	ere abatement	is taking pla	ace (3)					Туре о	f Facility	(4)					
									School	ol (K	(- 12)				
Same Street Address								L	Subch	Section 1				(-12)	
Street Address								2	Other Bldgs.				rcial		
325 Franklin Ro	ad							Squar	e Feet		f Floor		В	ldg. A	ge
City (5)		Cour	nty (6)				unty Code (7)								
D '11 NI 07	00.4					(Sta	ate use only)	471	nt Use (F	rior	if bein	g den	olish	ed)	
Denville, NJ 07 Name of Monitoring		Mo Bldg Own			ASCM No.		Name of Abatement (reside							
	T IIII T III Cu by	Diag. Own	51 (0)		ASCIVI NO.				ภ (9)						
n/a Street Address						_	B & G Restoration	n, Inc.							
Street Address								4							
City, State, Zip Code						_	_105 Ryerson Roa City, State, Zip Code	<u>a</u>	THE REAL PROPERTY.	ultrane)	•				
							Lincoln Park, NJ	07025							
Project Manager for I	Monitoring Firm)	Ph	one Numb	er	-	Telephone Number	07033		Lic	cense	Numb	er		
,							973-696-6869				378				
Scheduled Start Date	2 (10)	ISched	. Completio	on Date (11	1	_	Name of OSHA Monit	or		-					
	J (10)			on Bate (1	,		B & G Restoratio	n, Inc.							
9/13/2012		9/14/	THE RESERVE THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLU				Street Address	- 1							-
Occupancy Status D							105 Ryerson Roa	d							
Abatement per							City, State, Zip Code								
Describe:						_	Time In Deals NII	07025							
Other-Describe		,				-1	Lincoln Park, NJ	07035							
Demolition			226												
	\boxtimes	Renovatio					Full Containment w/neg	ative pre	ssure		Gloveb				
>3 sf or >3 lf		≥160 sf or				M	Mini-enclosure				Non-fr	able p	roce	dure	
Location of			n normally unance/cust									R	R	E	E
asbestos-conta material to be	aining	staff(12)			Descriptio material (A		sbestos-containing	200	kmount Specify S	SF or		m	р	n	n
abated in facili	ty (13)	Yes	No	N/A	material (/	(Civi)			.F)			0 V	a	a p	L
basement					pipe insulati	ion		26.16				e	_		_
basement	-				transite boar			36 lf					片	片	片
busement					transite boar	u	·	12.5	1	-			屵	무	片
<u> </u>								-				님	片	屵	H
										-		님	井	屵	1
Registered Waste Ha	uler	NJDE	P Hauler II	D# C	ubic Yards of W	Vaste	Name of Registered L	andfill		-			Щ	Ш	Щ
B & G Restoration		195			yard		Tullytown Resour		ecovery	Cer	nter				
City, State				Disposal D			City, State							- Contraction of	
Lincoln Park, NJ				9/14/20			Tullytown, PA								1000
Completed by (Print of Gordana Luna	or Type)	Title	•		Signature	+17	Gordana Luna				ate	110			
Jordana Duna		Treasure					J' W Salvino			8/	31/20	112			

State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7)

2012-148

Gordana Luna

Treasurer

B & G proj. #: Check # 5450 Date of Notification (1) Name of Building Owner/Operator (2) 2012 SEP -5 AM 11: 17 0 8 / 3 1 / 1 12 Evelyn Washkau Agencies Notified Type Notification Street Address □ EPA Initial 44 Reynolds Avenue DEP City, State, Zip Code Amendment DOL Parsippany, NJ 07054 Telephone Number Name of Contact DOH. Cancellation ☐ DCA Evelyn Washkau FACILITY INFORMATION Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) Subchapter 8 (Other than K-12) same Other (Private/Commercial Street Address Bldgs./Homes, etc. Bldg. Age # of Floors Square Feet 44 Reynolds Avenue County (6) County Code (7) City (5) (State use only) Current Use (Prior if being demolished) residential Parsippany, NJ 07054 Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. B & G Restoration, Inc. n/a Street Address Street Address 105 Ryerson Road City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035 License Number Telephone Number Phone Number Project Manager for Monitoring Firm 0378 973-696-6869 Name of OSHA Monitor Sched. Completion Date (11) Scheduled Start Date (10) B & G Restoration, Inc. 9/11/2012 9/12/2012 Street Address Occupancy Status During Abatement (Check only one) . 105 Ryerson Road Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Lincoln Park, NJ 07035 Other-Describe: Scope of Work (check all that apply) Demolition Full Containment w/negative pressure Renovation Mini-enclosure Non-friable procedure >3 sf or >3 If >160 sf or >260 lf Is location normally used solely E Location of Ε е by maintenance/custodial n Amount asbestos-containing Description of asbestos-containing n m p staff(12) C (Specify SF or material to be material (ACM) C 0 a а abated in facility (13) L Yes No N/A e 57 lf X boiler room/main room pipe insulation X 25 lf pipe insulation gas meter room 24 lf X pipe insulation basement bottom of staies Cubic Yards of Waste Name of Registered Landfill Registered Waste Hauler NJDEP Hauler ID# B & G Restoration, Inc. 19563 Tullytown Resource & Recovery Center 1 1/2 yards Disposal Date City, State City, State 9/12/2012 Tullytown, PA Lincoln Park, NJ 07035 Signature Completed by (Print or Type) Title Date Gordana Luna

8/31/2012

CK_UU7-!! Aug 30 2012 10:23am P001/001 Fax: State of NJ Notification of Asbestos Abatement D&S Proj. #: MS 12-307 APPROVED (Pursuant to NJAC 8:60 and 12:120) Na Dapa of Health & Sanior Services 21/2 CM Date of Notification (1) (signature) Name of Building Owner/Operator (2) 0 18 1/13 10 1/11 12 NORTH JERSEY DEVELOPMENTAL CENTER Agencies Notified Type Notincation Street Address EPA Initia! T DEP Arriended 169 MINNISINK ROAD Amendment #: City, State, Zip Code DOI. M Emergency TOTOWA, NJ 97511 DOH DO (including Name of Contact lustification) Telephone Number ☐ DCA STEVE SLAUGHTER Cancellation FACILITY INFORMATION Name of facility where abatement is taking place (3) Type of Facility (4) NORTH JERSEY DEVELOPMENTAL CENTER School (K 12) Subchapter 8 (Other than K-12) Street Address Other (Private/Commercial 169 MINNISINK ROAD Blogs./Homes, etc. Square Feet # of Floors City (5) Bldg. Age County (6) County Code (7) (State use only) Current Use (Prior if being demolished) TOTOWA PASSAI Name of Monitoring Firm Hired by Bidg. Owner (B) ASCM No. Name of Abatement Contractor (9) D & S RESTORATION, INC. Street Address Street Address 20 California Ave. City, State, Zip Code City, State, Zip Code Paterson, NJ 07503 Project Manager for Monitoring Firm Phone Number Telephone Number License Number 973-345-8020 00159 Stert Date (10) Sched, Completion Date (11) Name of OSHA Monitor D & S Restoration, Inc. 08/30/12 09/06/12 Occupancy Status During Abatement (Check only one) Street Address Facility closed/vacated during entire period of abatement. 20 California Avenue Abatement performed outside of normal facility hours-City, State, Zip Cude Describe: Other-Describe NORMAL HOURS Paterson, NJ 07503 Scope of Work (chack all that apply) >3 af or >3 If Pull Containment w/negative pressure Renovation Mini-enclosure ___ ≥160 af or ≥260 ff Demolition Glovebag procedure Non-Exempted (*) and Non-friable procedure Location of is location normally used solely achestos containing hy maintenance/custodial material (acm) to be Description of asbestos-containing E 3位折(12) 0 8 Amount n abated in facility (13) material (ACM) m Π (Specify SF or LF) P C Yes NIA 0 3 G â L TRENCH IN-ROUTE TO STORE RM HEATING PIPES (WRAP & CUT) 8LFT X Registered Wasso Rauler NJDEP Hauler ID# Cubic Yards of Wasta D&S RESTORATION, INC. Name of Registered Landfill 13506 1 YD TULLYTOWN, RESOURCE RECOVERY City, State Disposal Date PATERSON, NJ 07503 City, State 08/30/12 Completed by (Print or Type) TULLYTOWN, PA TITO Signature BOODAN JOLDZIC PRESIDENT Date ASB-41 The not use this form for asbestos livensure exempted activities. 08/30/12

D&S Proj. #: MS 12-307

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

Date of Notification (1)		I Name of E	uildia - O	ner/Operator (2)	1 1 1	A selection of				1-11			
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DOH (include	ding	Name of Co	WA, NJ (7/511				Talanhan	. Nivesk				
DCA Justific			2003000					Telephone	e Numb	er			
Cance	ellation	STEVE	ESLAUG	HTER									
			FAC	CILITY INFORM	IOITAI	٧							
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Street Address	DEOT WIEN	TAD CENT.					-	Subcha				(-12)	
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169 MINNISINK ROAL							_		# of Flo		В	ldg. A	ge
City (5)	0	county (6)				unty Code (7)							
TOTOWA	,	PASSAI			(Sta	ate use only)		Current Use (Pri	or if bei	ng den	nolish	ed)	
Name of Monitoring Firm Hire				ASCM No.		Name of Abatem	ent C	ontractor (9)					
20	, ,	Y 1		ACCIVITIO.				865					
Street Address					-	D & S RESTO	JKA	HON, INC.					
						20 California	Ave						
City, State, Zip Code					_	City, State, Zip Co	THE RESERVE AND ADDRESS OF	· .			Directions	Section 1997	
						Paterson, NJ		03					
Project Manager for Monitoring	g Firm	IP	hone Numb	ber	-	Telephone Number			License	e Numb	oer		
						973-345-80	20			00159			
Start Date (10)	Sc	hed. Complet	ion Date (1	1)	-	Name of OSHA N	/lonito	or					
08/30/12	00	0/06/12		350		D & S Restor	ratio	n, Inc.					
Occupancy Status During Abat						Street Address							3
Facility closed/vacated d		and the state of the second second	ement			20 California		nue					
Abatement performed ou	itside of norm	al facility hou	ırs-			City, State, Zip Co	de						
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PATERSON, NJ 07503			08/30/1			TULLYTOW	N P	A					
Completed by (Print or Type)	Title		-	Signature		1	- 1, 1		Date		-		-
BOGDAN JOLDZIC	PRESI	DENT			ou I				08/30/	12			
ASR-41	* Do not	use this form	for ashesto	s licensure eye	mnted	activities							

0 4348 D D&S Proj. #: MS 12-306

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

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Date of Notification	1 (1)	Nan	ne of Build	ling Owner	/Operator (2)				2012 SEP -	5 AM	11:	65		
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□ DOL	Emergency				REEHOLD,	NJ			Terr			-	-	
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☐ DCA	Cancellation		IM DAL	LAS										
				FACIL	ITY INFORM	ATION	the control of the							
Name of facility w	vhere abatement is t	aking place	e (3)					Туре	of Facility (4) School (F	(- 12)				
PHIL NATILI	Ţ								Subchapte		ner tha	an K-'	12)	
Street Address									Other (Pri	vate/Co	mmer			
	TDEET							Sar	Bldgs./Ho	f Floors		Bld	g. Ag	je
28 COURT S'	I KEE I	County	v (6)			Coun	ty Code (7)	34.						
City (5)		Ocum	, (0)				e use only)	Cu	rrent Use (Prior	if being	demo	lishe	d)	
	OF FREEHOLD	The second second	ITUOMI	H									_	
Name of Monitor	ing Firm Hired by Bl	dg. Owner	(8)		ASCM No.		Name of Abatement				78			
					-		D & S RESTOR	ATIO	N, INC.					
Street Address							Street Address			0 -				
1		7.00		W			20 California A	_			-			
City, State, Zip Co	ode						City, State, Zip Code							
							Paterson, NJ 0' Telephone Number	/303	TI	icense l	Numbe	er	_	
Project Manager	for Monitoring Firm		Ph	one Numb	er		973-345-8020)			159			
							Name of OSHA Mor							
Start Date (10)		Sched.	Completio	on Date (11	1)		D & S Restorat		nc.				-	
09/10/12		09/21	/12				Street Address							
	s During Abatement	(Check or	nly one)				20 California A	venue						
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Describe:	cribe: NORMAL HO	OURS					Paterson, NJ 0							
	(check all that apply								ontainment w/n	egative	press	ure		
$\ge 3 \text{ sf or } >3$	g If	Renovation	n				L		enclosure ebag procedure	- 333				
≥160 sf or	≥260 If	Demolition						Non-	Exempted (*) ar	d Non-f				
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City, State				Disposal			City, State		I in a second					
PATERSON		2. FIE.		09/11/			TULLYTOW	N, PA		Data				
Completed by (F		Title PRESID	ENT		Signature					Date 08/31/	/12			
DOODILLO		====	- Main fa	forcebes	toe licensure e	vemnte	d activities						-C.PH P.S.	

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D&S Proj. #: MS 12-308

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

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Date of Notification	n (1)	Na	me of Buildi	ng Owne	r/Operator (2)			2012 SI #3115 S & L	ED L			-	
$ \frac{0}{8} / \frac{3}{1} $	1/12		ELIZABET	H BISL	ICK			,	-1 -5	AM	10: 5	-	
Agencies Notified EPA	Type Notification	110	eet Address					TOMES	103 0	nie	4		
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☑ DOL	Amendment #:_	11	y, State, Zip		NII 07050					- + Q	(Pa.	
☑ DOH	Emergency (including	1 1	me of Conta		S, NJ 07950			Telephone	Number			<u> </u>	
□ DCA	justification)		ELIABET		ICK			100000000	1				
	Cancellation		BLIADET			ATION			-				
			(0)	FACI	LITY INFORM	ATION		Type of Facility (4)					
Name of facility w	here abatement is	taking plac	ce (3)					School					ii.
ELIZABETH 1	BISLICK					-		1000000	oter 8 (Oth			12)	
Street Address								Bldgs./H	rivate/Cor lomes, etc	С.			
21 WEST HA	NOVER AVEN				7/ 1/ 84			Square Feet #	of Floors		Blo	lg. Aç	је
City (5)		Coun	ty (6)				ty Code (7) e use only)	Current Use (Price	or if being	demo	olishe	d)	
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	ng Firm Hired by E	Bldg. Owne	r (8)		ASCM No.		Name of Abatemen						
							D & S RESTOI	RATION, INC.					
Street Address							20 California	Ave					
City, State, Zip Co	ode						City, State, Zip Cod						
ony, outro, ap as							Paterson, NJ (
Project Manager f	or Monitoring Firm		Pho	ne Numb	per		Telephone Number 973-345-802		License 1	Numb)159	er		
							Name of OSHA Mo						
Start Date (10)		Sched	. Completion	Date (1	1)		D & S Restora	ition, Inc.					
09/11/12		09/21					Street Address						
Occupancy Status	s During Abatements ed/vacated during			nent.			20 California A						
Abatement	performed outside	of normal	facility hours	-			onji ototo,p						
Describe: Other-Describe:	cribe: NORMAL I	IOURS				- 1	Paterson, NJ	07503					
Scope of Work (check all that appl							Full Containment w/	negative	press	ure		
\boxtimes >3 sf or >3	If 🖂	Renovation					L D	Glovebag procedure					
≥160 sf or 3	>260 If	Demolition						Non-Exempted (*) a	and Non-f	riable R	Proce	E	1
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material (a	cm) to be	staff(12)	T	T	- material			(Specify SI	For	0	a	а	C L
abated in fa	acility (13)	Yes	No	N/A				100 1 575		e	F	р	-
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	With the second second												
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City, State	RATION, INC.			Disposal	Date		City, State				1		
PATERSON,		and the same		09/12/		1 12	TULLYTOW	N, PA	LDets				
Completed by (Pr		Title PRESID	ENT		Signature				Date 08/31/	12			
ASB-41				or asbes	_ l tos licensure e	xempted	activities.		L				

D&S Proj. #: MS 12-309

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

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Date of Notification (1))	Name of Bu	uilding Owne	r/Operator (2)		20	112 SEP -	-2 HI	(10				
0 8 / 3 1 /	Type Notification		EL GIORD	ANO			53E3T	157. 1	TITRO	La		_	
	I spe Notification	Street Addr	ess			. \$	58591	CEME	HG	00			
	Amended		BONS AVE	ENUE			اعت ا	OLIV.		V 23			
	mendment #:	City, State,	Zip Code										
⊠ DOL □	Emergency	MADIS	SON, NJ										
□ DOH	(including justification)	Name of Co	ontact				16	elephon	e Number				
□ DCA □	Cancellation	MICHA	AEL GIOR	DANO						-			
			FACII	LITY INFORMA	NOITA								
Name of facility when	e abatement is ta	king place (3)		X			Type of F	Facility (Schoo	4) I (K - 12)				
MICHAEL GIOR	RDANO							Subch	apter 8 (O	her th	an K-	12)	
Street Address	d) III (Other	(Private/Co	mmer			
						**			/Homes, et		Dia	g. Ag	10
33 GIBBONS PI	LACE						Square	reet	# of Floor	S	DIC	y. Ay	е
City (5)		County (6)				ity Code (7) e use only)	Current	t Use (P	rior if being	g demo	olishe	d)	
MADISON		MORRIS			A 7000 PERMANA								
Name of Monitoring	Firm Hired by Bld	g. Owner (8)		ASCM No.		Name of Abatement	t Contractor	(9)					
					esomes in	D & S RESTOR	RATION, I	INC.					
Street Address						Street Address							
						20 California A			-				
City, State, Zip Code						City, State, Zip Code)						
						Paterson, NJ 0							
Project Manager for I	Monitoring Firm		Phone Numb	er		Telephone Number			License	Numb 0159	er		
						973-345-8020			1	0139			
Start Date (10)		Sched. Comple	etion Date (1	1)		Name of OSHA Mo D & S Restora							
09/11/12		09/24/12				Street Address	tion, me.			-	_		
Occupancy Status Do	uring Abatement (_			_	20 California A	venue						
		ntire period of aba	atement.			City, State, Zip Code				-			
Abatement per	formed outside of	f normal facility ho	ours-										
Describe: Other-Describe	NORMAL HO	URS			-	Paterson, NJ 0	7503						Series.
Scope of Work (che							Full Conta	inment	w/negative	press	ure		
>3 sf or >3 If		Renovation				\boxtimes	Mini-enclo						
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PATERSON, NJ	07503		09/12/		. 19.	TULLYTOW	N, PA	642 ST					
Completed by (Print BOGDAN JOLI		Title PRESIDENT		Signature			1		Date 08/31	/12			
		Do not use this fo	rm for asbes	tos licensure ex	xempte	d activities.							

STATE OF NEW JERSEY NOTIFICATION OF ASBESTOS ABATEMENT (PURSUANT TO NJAC 8:60-7 AND 12:120-7

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all.	1 11	21	11/7
(Ill	UC #	d	142

Date of Notification 09 / 04	. ,				Name of	Building Owne	r / Operator (2) ALTY PRODUCTS	REC	F. 11	1800	
	/				Street A	ddress			100000	THE WAY	
Agencies Notified	tified Type of Notification EPA					S ROAD te, Zip Code	2012	SEP =	5 #1	4 IO: 5 ₁	
DEP	otified Type of Notification EPA					NJ 07470			U AI	1 IU: 5 į	
- Instant	12					Contact ANDRETH	, os	Telepho	ne Ni	mber	
	tified Type of Notification EPA				DAN BK	ANDREIN	ć	LILE	NSI	TROL	15
	×				ACILITY II	NFORMATION				60	
Name of Facility Wh	ere Abater	nent i	is Taking	Place (3)		Type of Facili	ty (4)				
							100l (K-12)		222		
Street Address 1361 ALPS ROAD							ochapter 8 (Other ner (I.e., private &				
						bld	gs., homes, etc.)				
City (5) WAYNE)		County Code	(7)	Square Feet 30,000	# Of Floo	rs 2	Buil	lding Age 50+	
	S Notified Type of Notification PPA Amended Amendment # Emergency w/ justification Emergen					Annual Control of the	Prior if being den		7	501	
	SNotified EPA					BUILDING 2 -	A STATE OF THE STA				
Name of Monitoring	D4			ner (8)	ASCM N	Name of Abat	ement Contracto	r (9)			
AET	S Notified Type of Notification EPA					LVI Environme	ntal Services Inc.				
Street Address	Notified EPA					Street Addres	s				
335 HIGH STREET	S Notified EPA DEP DOH DOL EPA DOH DOL Emergency w/ just Cancellation Facility Where Abatement is Taking Place Iddress S ROAD County (6) PASSAIC Monitoring Firm Hired by Bldg. Owner (8) Iddress I STREET IDE, Zip Code EN, NJ 08840 Ingr. For Monitoring Firm USEKNECHT I Start Date (10) 21 12 Cy Status During Abatement (Check Only Facility Closed/Vacated During Entire P Abatement Abatement Performed Outside of Normal Hours - Describe: Other - Describe: Other - Describe: Other - Describe: Other - Describe: Other - Describe: Other - Describe: Other - Describe: Solely Sol					LAGO COTTU AVO					
METUCHEN, NJ 088	PA DEP					462 Getty Aver					
	es Notified EPA DEP DOH DOL EPA DOH DOL EMERGENCY Wijus Cancellation Address LPS ROAD County (6) PASSAIC County (6) PASSAI			Telephone Nu	mber	10.1, 0	0000				
ERIC HOUSEKNECH	Type of Notification EPA DEP Amended DOH Amendment # DOL Emergency w/ ju Cancellation of Facility Where Abatement is Taking Pla Address ALPS ROAD To Monitoring Firm Hired by Bldg. Owner (Address GH STREET State, Zip Code CHEN, NJ 08840 at Mngr. For Monitoring Firm HOUSEKNECHT Describe: Describe: Other - Desc			732-321-0666		Clifton, NJ 070					
, , , , , , , , , , , , , , , , , , , ,	EPA DEP DOH DOH DOL Emergency w/ jus Cancellation Address LPS ROAD County (6) PASSAIC County (6) PASSAIC Address CHEN, NJ 08840 Mngr. For Monitoring Firm COUSEKNECHT ed Start Date (10) Pacility Closed/Vacated During Entire Fabatement Abatement Abatem			letetion Date (1	11) ′ 12	Telephone Nu	mber	License	Numl	er	
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	Address GH STREET tate, Zip Code CHEN, NJ 08840 t Mngr. For Monitoring Firm HOUSEKNECHT led Start Date (10)					Name of OSH					
tanan		ted D	uring En	tire Period of		LVI Environme Street Addres	ntal Services Inc.				
N. S.	7.70	ed Ou	tside of	Normanl Facilit	У	Street Addres	5				
		2200				462 GETTY AV					
Other - De	escribe:	FRID) - SAT - 4	4:00PM - 2:30AN	M	City, State, Zip CLIFTON, NJ (
Scope of Work (Che	ck All That	Appl	у) .			Total Total Inc.			-		
Demolitio	n		7	Renovation		Full Containm	ent with Negative	e Pressu	re		
			-			Mini - Enclosu	ire				
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The second					LJ	Non Exemples	a () and Hon-in-	1010 1 100	, caure		
			-500		Descrip			Abatem	ent Ty		le-
				As	Material	Containing (ACM)	Amount	R	R	E N	E N
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		1000000				facing, VAT,	SF or LF)		P	A	L
(13)				ord	other misc	ellaneous)		V A	A	P	o s
7								Ê	R	U	U
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1ST FLOOR		YES	NO N/A	PIPE & FITTIN	0		20 LF		-	_	1
2ND FLOOR			V	PIPE & FITTING			80 LF	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		MO04	-
N 75 T	146										
NEWARK CARTING	vvaste Hau	ier		NJDEP Waste Hauler ID No.	Yards	Name of Regis I.E.S.I.	tered Landfill		141		
City, State	1 12 / 12				of Waste Disposal	City. State				Aud fluit in 17 Eur	
NEWARK, NJ			errit		Date	BETHLEHEM, I	PA				
Completed by (Print	or Type)			Title		Sign	nature	7		Date	
STEVEN STILES	PREET				NAGER		ten St	TU			09/04/12

			State of New Jersey								
	١		ON OF ASBESTOS AF ant to NJAC 8:60-7 and 12		REC	Flyrch	a # 68	80			
Date of Notification (1)	Name	of Building	Owner/Operator (2)	and the second							
8/20/12		icia Merit		2	1112 CED						
Agencies Notified Type of Notificatio	Stree	t Address			VIL OF P	5 AM Q.	£.				
[] FPA	248	Knickerb	ocker Rd.	A	OI2 SEP - SBESTOS & LICE	1.7).	414				
[X] Initial Notification				Ç-n	3555100	· (: 11/17/10)	751				
[X] DOL [] Emergency		State, Zip Co			& LICE	NSIMOR	UL				
[X] DOH [] Amended Notification	Clos	ster, NJ 0	7624		> 2.75		08	ļ.			
40000 40000000000000000000000000000000	Name	of Contact		Te	ephone Numl	ber	10	-			
[] DCA [] Cancellation	Bria	n Starkey	,	200		4					
		F	ACILITY INFORMATION								
Name of Facility Where Abatement is Takin	g Place (3)		Type of Facility (4)						
Residence				Subchap	(-12) ter 8 (Other the private and	nan K-12)					
Street Address				Other (i.e	e. private and etc.)	commercial I	ouildir	igs,			
248 Knickerbocker Road											
City (5)	ounty (6)		County Code (7)	Square Feet 2000	# of Floors	Bld ~ 5	g. Agi 0	е			
	ergen		(STATE USE ONLY)	Current Use (Prio	r if being dem	olished)			-		
	era (Areana in	OfficeImaintenance /26=3:2000144									
Name of Monitoring Firm Hired by Building J & S Environmental Labor., L		ASCM No.		Jupiter Environi	mental Se	nvices In	^				
Street Address	LO		Street Address	Jupiter Livitorii	nemai oc	i vices, iii	U				
2333 Route 22W				3 Lynn Court							
City, State, Zip Code			City, State, Zip C		-				-		
Union, NJ 07083				Lincoln Park, N	IJ 07035						
Project Manager for Monitoring Firm	Telepho	ne Number	Telephone Num			License No					
			The second secon	973-709-0200			0	085	2		
Scheduled Start Date (10) Sched. 9/8/12	9/14/1	on Date (11) 12	Name of OSHA	^{Monitor} J & S Environn	nental Lab	oratories	, LLC	2			
Occupancy Status During Abatement (Che [] Facility Closed/Vacated During Er [] Abatement Performed Outside of N	tire Period	d of Abateme		2333 Route 22	W	7,4					
Abatement Performed Outside of N Describe: [X] Other – Describe: partially vacate		cility Flours –	City, State, Zip C	Code Union, NJ 0708	33				Al .		
Scope of Work (Check all that apply)							95				
[] Demolition [] ≥3 sf or ≥3 lf [x] ≥160 sf or ≥260 lf		[] F	Renovation	[] Mini – [] Glove	Containment w Enclosure bag Procedur - Friable Proc	e	Press	sure			
	Is Loc	cation	H-2-11-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	1			Ab	atem	nent		
Location of	Normal			ription of		Type					
Location of	Sole	nce/Cus		 Containing (ACM) 		33.5 F					
ASDESIOS — L'ONIZINION	Maintens					1 /- /- 1 1 1					
Asbestos – Containing Material (ACM)	todial S			mal systems		SF or LF)	M	Р	CC		
			insulation, s					A	C C A L P O		

Scope of Work (Check all that apply)					[] Full Containmo	ant with Negative	Droop			
[] Demolition [] ≥3 sf or ≥3 lf [x] ≥160 sf or ≥260 lf			[]	Renovation	[] Mini – Enclosur [] Glovebag Proce [x] Non – Friable F	edure	Press	ure	(Activity)	
Location of Asbestos – Containing Material (ACM) TO BE ABATED	No Mair	s Loca rmally Solely ntenan- ial Star	Used by ce/Cus	Asbesto Mate (i.e., the	scription of s – Containing erial (ACM) ermal systems , surfacing, VAT,	Amount (Specify SF or LF)	Ab Tyr R E M			t N C L
In Facility (13)	Yes	No	N/A		miscellaneous)		V A L	I R	P S U	0 S U
Basement		X		VAT		750 SF	X	-	-	_
								-		
Name of Registered Waste Hauler Jupiter Environmental Service			D No.	Cubic Yards Of Waste 2	Name of Registered Landf Minerva Landfill				100	
ity, State incoln Park, NJ				Disposal Date 9/14/12	City, State Waynesburg, OH					
Completed By (Print or Type) Pane Repic Title General Man				iger Signature	Cu	Date 8/20/12	2			
ASB-41										

CK 24005192

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

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Date of Notification (1)					· ~ · · · · · · · · · · · · · · · · ·	101		-			
8-31-2012	_		N.	PRC	fing Owner/Operat		(VAlero) C T	3 25		-
Agencies Notified Type Notific	ation		St	root Addres				110	- C	OU:	17
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☐ Cancellat	ion				GAROZZ	O	101001011011011				
					FORMATION		1		-		
Name of Facility Where Abatement is T	aking PL	ace (3)		ACIDIT III	a OldiAlloit	Type of Facilit	v (4)				
PRC REFINERY -						☐ School (K-					
Stroot Address	-				*******	Subchapte	r 8 (Other than K-1	10.00			
100 Billingspor	TK	OA	4			Other (I.c., homes, etc.	private & commerc	ial bui	lding	5,	
City (5) a						Square Foot	# of Floors	TE	ldg /	Age	_
PAULSBORG						500,000+	NIA		35-	-	
County (6)			Co	ounty Code	(7) (STATE		rior It being demoli	shed)			
GloucesTex				SE ÓNLY)		OIL RO	FINERY				
Name of Monitoring Firm Hired by Build	ng Owne	er .	ASC	M No.	Name of Abate	ment Contractor (9)	7			_
(8) AET, INC			00	121	Advance	ed Spec	1. ALTY (on	17.		
Street Address	2	,	-		Street Address		7				
28 N. PENNEL K	0,40	/			30	MCSON	JALD E	3/1	ce_		
City, State, Zip Code		- C			City, State, Zip	Code					7
Lima PA	190				ASTON	J PA	1901	4			
Project Manager for Monitoring Firm			lephon		Telephone No.	- 111-	Liconso No.				No.
DAVE TUROSTY		-		1.0114	610-49	7-0440	0070	0			
	heduled		S		Name of OSHA						
		- 3	3 /-	2012	AET, I	110.					
Occupancy Status During Abatement (C					Street Address	2.161	e.ad	-			
Facility Closed/Vacated During Entire	Period o	of Abate	ement		28 N	PENNEL	Load				
Facility Closed/Vacated During Entire Abatement Performed Outside of Non	Period o	of Abate lity Hou	ement .πş		28 N						_
Facility Closed/Vacated During Entire Abatement Performed Outside of North	Period o	of Abate lity Hou	ement .πş	د ۶	28 N						_
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Facility Closed/Vacated During Entire Abatement Performed Outside of Non Other - Describe During cope of Work (Check all that apply) ≥3 sf or ≥3 if	Period of mal Facil	of Abate	ement Hour	<u> </u>	28 N City, State, Zip C ∠ m A	PA. Intainment with Neclosure	19028				_
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Facility Closed/Vacated During Entire Abatement Performed Outside of Norm Other - Describe: During in cope of Work (Check all that apply) ≥3 st or ≥3 if ≥160 st or ≥260 if	Period of nal Facility O.E.	of Abatelity House democratic	ement Hour tion on	2.5	City State, Zip C Lim A Full Col Mint-En Glovebe Non-Ex	ntainment with Neclosure ag Procedure ompted (*) and No	19025		bate: Typ		
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Facility Closed/Vacated During Entire Abatement Performed Outside of Non Other - Describe During Cope of Work (Check all that apply) ≥3 st or ≥3 if ≥160 st or ≥260 if Location of Abbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) DA North/Scoth RACK	Period of mal Facility O Z RD D User Mal C Yes	enovation de la constitución de	tion on by by by hop/ail	Asbest (i.e.,	City, State, Zip C Lim A Full Col Mini-En Glovebe Non-Ex Description of thormal systems is surfacing, VAT, other miscellanes	ntalnment with Ne closure and Procedure ompted (*) and No certal (ACM) insulation, or or one of Regis	gative Pressure Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosing
Facility Closed/Vacated During Entire Abatement Performed Outside of Norm Other - Describe During Cope of Work (Check all that apply) 23 st or 23 if 2160 st or 2260 if Location of Abbastos-Containing Material (ACM) TO BE ABATED IN Facility (13) DA North/South Rack March South Rack Ale RO To chi Spo Se	Period of mal Facility O Z RD D User Mal C Yes	enovation de la constitución de	tion on by by by hop/	Asbesto Na.	City State, Zip of Lim A Full Col Mini-En Gloveber Non-Ex Description of the Containing Matthermal systems in surfacing, VAT, other miscellaneous containing Matthermal systems in surfacing, VAT, other miscellaneous containing Matthermal systems in surfacing, VAT, other miscellaneous containing with the containing of the containing miscellaneous containing miscellaneo	ntalnment with Neclosure and Procedure compted (*) and Notertal (ACM) insulation, or pus) Name of Register Course	gative Pressure Amount (Specify SF or LF)	Removal	Repair	Encapsulate	EXACSING
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Date of Notification (1) 08/30/2012					Building (Ston Boa					۷.	112 SE	P -	5	AH	9: :	-
Agencies Notified	Type Notification			Street A	ddress ccroft Dr	ive				73	SdES & L	105) (ON	[R)[
DEP X DOL	Amended Amendmen		_		ite, Zip Co ston NJ)				Page 1	And a Hade	12.	े दिश्	3	C)
DOH DCA	Emergency justification Cancellation			Name of Paul K	Contact				1.4	Tel	ephone	Numb	er			
				FACI	LITY INFO	DRMAT	ION									
Name of Facility Where Burnet Hill Elemen		ng Place (3)						× s	of Facility (School (K-1	2)		-				
Street Address 25 Byron Place								F	Subchapter Other (i.e. p etc.)				build	lings,	home	es,
City (5) Livingston				Y III				Squar	re Feet	# 0	f Floors		В	ldg. A	ige	
County (6) Essex				County (Code (7) USE ONLY				nt Use (Prid ic Schoo		ng demo	olished	i)			
Name of Monitoring Fir Horizon Environm		Owner (8)		ASCN 0007			Confidence of California		tement Cor struction		(9)			ŭ.		-
Street Address PO Box 316							Street 205 F		ss 46 Suite	15						
City, State, Zip Code Thorofare NJ 0808	86						100000		ip Code J 07512							
Project Manager for Mo Steve Flanigan	onitoring Firm	T	Telepho 856-84	ne No. 18-0800		Teleph 973-3	one No	0.		Licens 01034	8					
Start Date (10) 08/31/2012		Schedule 09/01/2		npletion	Date (11)				HA Monitor struction	Corp						
Occupancy Status Dur	ing Abatement (Che						Street						-			
							1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		46 Suite	15						
	acated During Entire med Outside of Nor								ip Code J 07512							
Scope of Work (Check	All That Apply)						1		- 10				114			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enova emoli				×	Min	I Containme ni-Enclosure ovebag Prod n-Exempted	e cedure					Α.	
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		100000	Locat orma												<i>р</i> е	
Locati Asbestos-Containir TO BE A In Fai	ng Material (ACM) <u>BATED</u> cility	Used Mai Custo	d Sole ntena odial ((12)	ely by nce/ Staff?		tos Con therma surfa	escription staining M il systems acing, VA miscellan	laterial s insula T, or		(5	mount Specify or LF)		Removal	Repair	Encapsulate	Enclosure
Classro	om 38	Yes	No X	N/A		Ch	alk Boa	ird		8	4 SF	>	ς		x	
Name of Registered W	aste Hauler		IN	IJDEP W	/aste	Cubic	: Yards		Name of	Registe	ered Lan	dfill			L	
Savic Construction			H	lauler ID 2253		of Wa 10 yr			GROW	AD/ED	* *					
City, State Totowa NJ	000000	H to a				Dispo	sal Date		City, State Morrise		PA					
Completed by		Title		1 124	1 3//18	5	Signature	1		100	7	Date				
Sava Savic	dent			110	John Son		7/			08/3	30/2	2012				

Clyff 1623,

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Date of Notification (1)	8 30 18)	1 / 1 4	Building Owner	Operator	lichael	ASBEST & LIC	5 A	M 9	: 61	
Agency Notified	Type Notification		Street Ad	EllioT	ST.		· · · · · · · · · · · · · · · · · · ·	PLOON	Tro	* .7	
EPA .	Initial Amended		City, State	- 71- Onda				" JAK	540	7[
DDEP DDOL	Amendment #		AVE	NEL 1	$\cdot C_i U_i$	07001			77	0.	
/	Emergency (inclu iustification)	ding	Name of				Telephone Nur	nber		V 10	1
D DCA	☐ Cancellation		HUS F	th SAN	SCILI-	nadi _			E/UP	POOR	
			FACILIT	Y INFORMATI	ON						_
Name of Facility Where	Abatement is Taking P	lace (3)	76			Type of Facility	(4)				
485 STATE						O School (K-1)		91			
Street Address						Other (i.e. p	8 (Other than K-1) rivate & commerci	al building:	s,		
		•				homes, etc.		Bldg. A			
City (5)	al Danie Ni	`				Square Feet 5.000	3)C		
HEIRTH H	HBOY NO	J .	I Combac	ode (7) (STATE	1196		rior if being demo				
County (6) Hibb	LESEX		ONLY)	*		- 1	ESIDERI				_
Name of Monitoring Firm	n Hired by Building Ow	ner ASC	CM No.		Marine.	ent Contractor (9)				
(8)				1990	Address	ch . 110C					_
Street Address	- :-			20	Rox	418	1.				
City, State, Zip Code		',-	551	City, S	tate, Zip C						
City, State, Zip Code	* ·	-		CID	BRI	DEE 1		8S7		10	
Project Manager for Mo	nitoring Firm	Telep	hone No.	Teleph	one No.		License No.				
,	1	. 11		1730		2x7560	COROK	<u> </u>			
Start Date (10)		Completion	Date (11)		of OSHA						
8/311	13 16	21/10			Address	CV) INC					
Occupancy Status Durin				PO.	Rox	214		i.e.			
D Facility Closed/Vacat D Abatement Performed Other – Describe:	ed During Entire Period d Outside of Normal Fa	of Abatema cility Hours	ent	City, S	tate, Zip C	1	0.088	57-			
Scope of Work (Check a	all that apply)	1.27					h Negative Press			٠	
D≥3 sf or ≥3 lf	8.03		□ Renov		☐ Mini-	Enclosure		*			
Q ≥ 160 sf or ≥ 260 lf			Demol	lition	, U Glov	ebag Procedure Exempted (*) a	nd Non-Friable Pr	ocedure.			
A		lelo	cation						0.00	atema Type	
		Non	nally	De	escription	of .			T	T	T
Locati Asbestos-Containi	ion of no Material (ACM)		olely by nance/	Ashestos Con	taining M	aterial (ACM)	Amoun (Specifi		ᅍ.	T O	1
TOBEA	BATED		lodial	(i.e., therma	al systems acing, VA7	insulation, Lor	SF or Li)	Removal	apsi	Enclosure
IN Fa			aff? 2)	other	miscellan	eous)			Va I	Encapsulate	- F
	•		lo N/A			,					
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100	MAJOR FIR	SE !	X	ROOF H	ALEDI	d	5,000 9	E I	X		L
COLSIDE	TUTION THE		1	FLOGIZ T	11= 3	,					L
DAMAGE											
Name of Registered Wa	ste Hauler	NJDE	P Waste Hau		Yards of		istered Landfill				
	11 1	ID No.	1603	9 Waste	1	J G.R.	0.00.5			.0.	
MANUAL CONTROLLED	FCI FREED	un.	1-1-1	-	al Date	Citý, State	-,	IA		-	
City, State	150			111	1717	Herry	OILLE F	A. 1	1	1	
FREEHOLD	CO			Signat	ure	100		Date	20	110)
Completed by		DENI		11	KIA	Ande	10	LXL	24	17	_
01100	*Don	ot use this f	orm for asbe	estos licensure	exempted	activities.	44	1	1		
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Date of Notification (1) 08/30/12			Name of Lee Ph	Building C	Owner/C	perator (2)	- 2012	SEP	-5 A	M	9:	38		
Agencies Notified Type Notification			Street Ad 329 Pa	ldress irk Stree	et			#3g 3	EST	OS CO JEMS,	H	TRI	11		
X EPA Initial Amended Amendment				te, Zip Coo air, NJ 0						rtivo).	M(3	CA	ř.	
		1 2	Name of Lee Ph	Contact illips					Tele	phone Ni	ımı		V.1		
			FACIL	ITY INFO	RMATI										
Name of Facility Where Abatement is Takir Private Residence	ng Place (3)							of Facility (4) School (K-12 Subchapter 8	2)	r than V	12\				
Street Address 329 Park Street			۲.		1880+		×	Other (i.e. pri etc.)	ivate &	commerc		build			s,
City (5) Montclair							Squa 2,30	re Feet O	# of 1	Floors		111955	dg. A)+	ge	
County (6) Essex			County C STATE U	Code (7) ISE ONLY)			Curre	ent Use (Prior	r if bein	g demolis	she	ed)			
Name of Monitoring Firm Hired by Building								tement Cont Contracting		0.40		-			
Street Address					Street A		ss eant Avenu	ıe							
City, State, Zip Code			-		T			ip Code J 07013							
Project Manager for Monitoring Firm		T	Telephor	ne No.		Telepho 973-6				License 01099	No				
Start Date (10) 09/24/12	Schedule 09/25/1		pletion [Date (11)				HA Monitor onmental	Labor	atories,	, LI	LC			4
Occupancy Status During Abatement (Che					-b-seco	Street A		ss te 22 Wes	t				1		
Facility Closed/Vacated During Entire Abatement Performed Outside of Non Other – Describe:						City, St	ate, Z	ip Code 07081							
Scope of Work (Check All That Apply)					-		-,	0.00.			_				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Supposed .	enova emoliti				×	Mir Glo	Il Containme ni-Enclosure ovebag Proco	edure						
	Is	Locati	on				INO	in-Exempled	() and	NOII-FII	abie		Abate	ement pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Mai	lormall d Solel ntenar odial S (12)	ly by nce/		tos Con therma surfa	escription taining M I systems acing, VA miscellan	ateria insuli r, or	ation,	(S	mount pecify or LF)		Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A						7/	2.05				e e	
Basement			X	Ther	mal S	ystems	insu	ation	70) SF		X			
Name of Registered Waste Hauler		l N	JDEP W	/aste	Cubic	Yards		Name of F	Register	red Land	fill	3,212	7.307		
Pyramid Contracting Corp.		Н	auler ID 2613		of Wa	iste		G.R.O.V	V.S., I		115				
City, State Clifton, New Jersey				Dispo 09/25	sal Date 5/12	")	City, State Morrisvi		ennsylv	ani	ia	202			
Completed by Dimo Golcev	Title General Manger					Signature	111	16	le		Date 08/	e /30/1	2		

Do not use this form for asbestos licensure exempted activities.

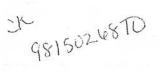
Date of Notification (1)

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

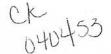
Name of Building Owner/Operator (2)

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Non-Friab	le Pro	cedur	e	
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ecify ir LF)	Removal	Repair	Encapsulate	Enclosure
0SF	-			
d Landfill			V-1	- 0

8/31/2012			Fulton	Bank					A	S. Ora		3	A
Agencies Notified Type Notification	ES		Street A 18 Elm	ddress ner Stree	et	-				d /	577	SA	~
EPA X Initial Amended Amendment #		_		ite, Zip Co on NJ 0						395 & Z	167	NS,	WG
DOH Emergency (i justification) DCA Cancellation	ncluding			f Contact a Johnso	on			Teleph	one Nur	nber	35 25		
			FACI	LITY INFO	ORMATION								
Name of Facility Where Abatement is Taking Private Property Street Address 18 Elmer Street	Place (3)					H	of Facility (4 School (K-12 Subchapter (Other (i.e. pr	2) 8 (Other t			lings,	home	es,
City (5) Madison NJ 07940		- 12		31 15		Squa 450	etc.) are Feet 0	# of Fle	oors	57.03	ldg. A 50	ge	
County (6) Morris				Code (7) USE ONLY)	Curr	ent Use (Prio	r if being	demolish	ned)	,		100
Name of Monitoring Firm Hired by Building C N/A	wner (8)		ASCN N/A	1 No.			atement Cont se Group I			-			
Street Address N/A			.1.	- T 10		t Addre -52nd	ess street suit	e#16					-
City, State, Zip Code N/A			ng h	- 19			Zip Code v York NJ (07093					
Project Manager for Monitoring Firm N/A		Telepho	ne No.		hone N -758-		11	icense N 01144	0.				
Start Date (10) 9/10/2012	Scheduled 9/18/20		npletion	Date (11)			HA Monitor ronmental	Corp			000000		
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire P			nent			t Addre 3 Rou	ess ite 22 Wes	t	-/-				
Abatement Performed Outside of Norm Other – Describe: 8 Hours							Zip Code 07083						
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	contraction .	enova				M G	ull Containme ini-Enclosure lovebag Proc on-Exempted	edure				e	- 00
	7,535,535	_ocat				1				-	Abate	ement pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used	l Sole	ly by nce/		Description tos Containing thermal system surfacing, Voother miscella	Materia ns insu AT, or	lation,	Amo (Spe SF or	cify	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A		pane.							Ф	
Basement		30	X		floor tile and	mast	ic	2050	SF	-			_
Name of Registered Waste Hauler	Name of Registered Waste Hauler						Name of F	Registered	d Landfill				3.0
Asbestos Transportation Company		H	IJDEP W lauler ID 4310		Cubic Yards of Waste	y* =	Minerva	Enterp					ŧ
City, State Shirley NJ 11967			tay 13	5-3.64	Disposal Date	e	City, State Waynes		H 4468	8	S.		
Completed by Edwin Precilla	Title Projec	et ma	anager		Signatur	re (c	- 111	//	1000	ite 31/20)12		



Date of Notification (1) 8/24/12				uilding Owr & David F			2)	2012 SE	P -5	i AM	٥.	<i>*</i>			
Agencies Notified Type Notification		1	Street Addr 383 Nort												
EPA Initial Amended Amendment #				Zip Code d, NJ 070	023			<u> </u>					h		
Emergency (in	cluding		lame of C			27.70			Tele	phone N	umb	er 01	j		
DOH justification) DCA Cancellation	- Date - Depth	ſ	•	& David I							-	•			-
Name of Facility Where Abatement is Taking House Street Address 383 North Ave	Place (3)		FACILI	TY INFORI	WATION		So	Facility (4) chool (K-12) bchapter 8 her (i.e. pr) 3 (Othe	er than K-	12) cial	buildi	ngs, t	nomes	5,
City (5) Fanwood							Square N/A		# of N/A	Floors		Blo N/	lg. Ag A	je	
County (6) Union			County Co			10.00	Current	t Use (Prio	r if beir	ng demol	ishe	d)			
Name of Monitoring Firm Hired by Building C	wner (8)		ASCM N	No.				ment Cont ment, Inc		(9)					
Street Address		i i			71.5		Address	ren Aven	ue						
City, State, Zip Code	-	111-2110	¥	7)			ate, Zip va, NJ	Code 07512							
Project Manager for Monitoring Firm		T	Telephone	e No.			one No 345-86			License #0067					in .
Start Date (10) 9/18/12	Scheduled 9/19/12	Con	npletion Da	ate (11)				A Monitor ment, In	c.						
Occupancy Status During Abatement (Chec		(St	treet /	Address	3							
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe: Occupied	Period of Ab	aten	nent s		Ci	ity, St	tate, Zip	ren Aver Code J 07512	nue						
Scope of Work (Check All That Apply)		_													
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		nova moli	ation tion			×	Min	Containmo i-Enclosure vebag Prod i-Exempted	e cedure					e	
	Γ.,						1 1101	Exemple	1/2				Abate	ement	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Main Custo	tena dial (12)	ely by ance/ Staff?	(i.e. tl	Descrips Contain hermal systems surfacing other miss	ning M stems g, VA	faterial s insula T, or	(ACM) tion,	(Amount Specify F or LF)		Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A		-1 la	a. da	tion		1	40 LF		X			
basement		X			pipe in					50 SF		X			
basement		X			floor tile	e & m	nastic		4	50 31	-	Α		-	
			NJDEP W	/asto T	Cubic Ya	arde		Name of	Regis	tered Lan	ndfill		1 7		
Name of Registered Waste Hauler D&S Abatement, Inc.			Hauler ID #20996		of Waste			Waste	Mana	- 1-14-1		PA		9 6	
City, State Totowa, NJ	2.01		1		Disposal TBD	Date		City, Sta Tullyto		'A			- ,		
Completed by Deanna Brkusanin	Title Projec	ct M	lanager		1 1	natur 122		Beller	tui		Da 8/:	te 24/1:	2		*

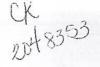


Date of Notification (1) 8/24/12		Total Control			Building a Perin		Operator (2		SEP	-5 A	1 9:	53		7.41
Agencies Notified	Type Notification			Street A	ddress	-		4,016	06.1	O 11	1 5	- 3		
EPA	⊠ Initial			4 Woo	dside R	Road		456	FS.	ros co	MTR	101		
DEP × DOL	Amended Amendment		_		te, Zip Co town, N		0		å L	ICENS	NG		D	
DOH DCA	Emergency justification) Cancellation				Contact a Perin				Те	lephone N	umber			
				FACI	LITY INF	ORMAT								
Name of Facility Where House	Abatement is Takir	ig Place (3))					Type of Facility (4	2)					
Street Address 4 Woodside Road	99020031100							Subchapter Other (i.e. p etc.)	rivate	& commer	cial bui	450	900 	es,
City (5) Morristown				ž) IB	1	Square Feet N/A	N/		1	Bldg. / N/A	Age	
County (6) Morris					Code (7) JSE ONLY	,		Current Use (Prio House	r if be	ing demoli	shed)			
Name of Monitoring Firm N/A	m Hired by Building	Owner (8)		ASCM	l No.	to the s		Abatement Con batement, In		r (9)				
Street Address	1,00,000		->				Street A	^{ddress} sengren Aver	iue		5-340-0a			
City, State, Zip Code								te, Zip Code a, NJ 07512						
Project Manager for Mo	Project Manager for Monitoring Firm						Telephor 973-34	ne No. 15-8685		License #00675				
Start Date (10) 9/14/12		Schedule 9/15/12		npletion [Date (11)			OSHA Monitor batement, Inc	 С.					
Occupancy Status Durir	ng Abatement (Che	ck Only On	e)				Street Ad	Value of the control	-2/57					
	cated During Entire							sengren Aven	ue					
Abatement Perform Other – Describe:	ned Outside of Norr Occupied	nal Facility	Hours	S				te, Zip Code a, NJ 07512						
Scope of Work (Check A	All That Apply)													
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	enova emoli				×	Full Containme Mini-Enclosure Glovebag Proc Non-Exempted	edure				re.	
•		le	Locat	ion				Non Exemples	() ui	id Holl i lie	DIC I IC	S. Autoria	emen	t
Locatio	n of	- N	orma	lly		De	scription o	f			_	T	уре	
Asbestos-Containing TO BE AB In Faci (13)	BATED	Mai	d Sole ntena odial ((12)		Asbes (i.e	tos Con therma surfa	taining Ma I systems in acing, VAT, miscellaned	terial (ACM) nsulation, or	(Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
basem	nent .		Х			duct	t insulatio	on	1	50 LF	Х			
Name of Registered Wa	H	JDEP W		of Wa	Yards	Name of F								
City, State	J.		#	20996		TBD Dispo	sal Date	City, State		gement	UI PA		- W	
Totowa, NJ						TBD		Tullytow		4				
Completed by Deanna Brkusanin	in Title Project Manager						Signature // LLU	MG R.	t wi	100	ate 3/24/1:	2		

CK 2048354

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

Date of Notification (1) 8/24/12)	121	-			Owner/Op		(2)	7/112 CE	.D =				
Agencies Notified	Type Notification		-	Street A	ddress				OLY SE	P-5/	IH 9:	30		
	<u>a</u>				x 0045			4	5000	100		٧.		
EPA DEP DOL	Initial Amended Amendmen				ite, Zip Co ord, NJ				& L	P -5 /	NIF	OL		
▼ DOH DCA	Emergency justification) Cancellation				Contact d Halpe				Те	lephone N	ımber)	
		HIII-SULE I			•	ORMATIC	N						100	
Name of Facility When	re Abatement is Takir	ng Place (3)					Type of Facilit	y (4)					-
House								School (H	(-12)					
Street Address 912 North Broad	Street						ī			er than K- & commerc		dings	hom	es,
City (5) Elizabeth							7	Square Feet N/A	# c	of Floors A		Bldg. /	\ge	
County (6) Union				County (Code (7) USE ONLY	0		Current Use (F House	Prior if be	ing demolis	shed)			
Name of Monitoring Fi	irm Hired by Building	Owner (8)		ASCN	No.	-		of Abatement C Abatement,		r (9)		-61		
Street Address								Address osengren Av	enue					- Irania
City, State, Zip Code							State, Zip Code wa, NJ 0751	2			•			
Project Manager for M	Ionitoring Firm		Telepho	ne No.		Telepl	none No. 345-8685		License #00675					
Start Date (10) 9/11/12		Schedule 9/13/12		mpletion I	Date (11)		Name	of OSHA Monite		1				
Occupancy Status Du	ring Abatement (Che					-		Address		-				
	acated During Entire			mont				osengren Av	enue					
	rmed Outside of Nori						City, S	State, Zip Code wa, NJ 0751						
Scope of Work (Check	(All That Apply)		-				1010	wa, 195 0751						
≥3 sf or ≥3 lf ≥160 sf or ≥260 li			tenov emol				>	Full Contain Mini-Enclos Glovebag P Non-Exemp	ure rocedure				°D.	
		1 2 2 2	Loca					- Non-Exemp	ied () ai	IG NOTE THE	Dierre	Abat	emen /pe	t
Locat Asbestos-Containi	ion of		lorma d Sol	ely by	Ashar		cription	of Material (ACM)		Amount		T		Π
TO BE A		10000000		ance/ Staff?			system ing, VA	s insulation, T, or	(Specify F or LF)	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A									e e	
	basement					pipe i				20 LF	X			
base	ment	X			boiler	insul	ation		90 SF	X				
											-	_		-
Name of Registered W	Vaste Hauler			NJDEP W	/aste	Cubic Y	/ards	Name	of Regist	ered Landf	in .			L
D&S Abatement, I		Hauler ID 20996		of Wast				gement						
City, State Totowa, NJ	7.50					Disposa TBD	al Date		tate own, P	A				
Completed by Deanna Brkusanin	ct M	anager		Sig	gnáture	Merria K.	Hou		ate /24/1	2				



Date of Notification (1) 8/24/12			Name of Building Owner/Operator (2) North Broad Associates Street Address PO Box 0045 City, State, Zip Code Cranford, NJ 07016 Name of Contact Howard Holpers											
Agencies Notified	Type Notification				Address ox 0045		-		T OLI	2	AM	9:	Ü	
EPA DEP DOL	Initial Amended Amendment			City, St	ate, Zip Cod ord, NJ 07				& L	OS (CEN	SIN	TRO	Jį	
DOH DCA	Emergency justification) Cancellation	Sector Alexander III III II			of Contact rd Halperr	1		Te	lephone N	lumber			-GD	
Name of Facility Where House	e Abatement is Takin	g Place (3)	FAC	ILITY INFOR	RMATION	Type of Fa	87 28450						
Street Address 914 North Broad S	Street					141	Subch	ol (K-12) napter 8 (Otl (i.e. private	ner than K & comme	-12) rcial bui	ldings	, hom	ies,	
City (5) Elizabeth							Square Fee	et # 0 N/	of Floors A		3ldg. /	Age		
County (6) Union				County (STATE	Code (7) USE ONLY)		Current Use House	e (Prior if be	eing demol	ished)				
Name of Monitoring Fir N/A	m Hired by Building	Owner (8)		ASC	M No.		of Abatemer Abatemer		r (9)		1			
Street Address	den silvis and social				Ti .		Address osengren							
City, State, Zip Code							state, Zip Coo wa, NJ 07							
Project Manager for Mo		Telepho	ine No.	13,500,000,000	one No. 345-8685		License #0067							
Start Date (10) 9/11/12		Schedule 9/13/12		mpletion	Date (11)		of OSHA Mo Abatemer							
Occupancy Status Duri	cated During Entire I	Period of A	Abater	nent			Address osengren	Avenue						
Abatement Perform Other – Describe:	med Outside of Norn Occupied	nal Facility	/ Hour	S		2000	tate, Zip Coo wa, NJ 07:						-	
Scope of Work (Check ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	All That Apply)	processed.	Renova Demoli		S _C ,	×	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedu					P		
Location	on of	1000	Locat			Description		, inpied () di	ia rion i ni		Abat	emen pe	t	
Asbestos-Containin <u>TO BE Al</u> In Fac (13	g Material (ACM) BATED cility	Ma Cust	d Sole intena odial ((12)	nce/ Staff?	(i.e. th	Description s Containing N ermal systems surfacing, VA ther miscellan	laterial (ACN insulation, T, or	(Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure	
basen	nent	Yes	No X	N/A		pipe insula	tion	1	20 LF	Х			1	
basen	nent		Х			ooiler insula		Transport of the	00 SF	X				
Name of Registered Wa D&S Abatement, In			H	JDEP W lauler ID 20996	No.	Cubic Yards of Waste	11	ne of Registe		1				
City, State Totowa, NJ						BD Disposal Date BD	City,	State ytown, PA			- Francisco	The same		
Completed by Deanna Brkusanin Title Project Manager				nager		Signature	7)	7 // N		ate 3/24/12	2			



		(Pt	ırsuant	to NJAC 8	:60 and 12:120	0)			PE	ne		1 1		
Date of Notification (1) 8/30/2012	15			Building C	Owner/Operator ER	(2)		20	RE		* 1	4,, 1		
Agencies Notified Type Notifi	cation		Street A		N LAKE ROA	۸D		20	12 SEF	-5	AF	9:		
EPA Initial Amen	ded dment #	_	City, Sta	ite, Zip Coo				45	おES /	0S	001	VIF		
□ Emerging □ justifice	gency (including cation) ellation			Contact	ER			Telephone I	Number	ULI	وتائت	16		
Name of Facility Where Abatement is RESIDENCE	Taking Place (3	3)	FACI	LITY INFO	RMATION	Тур	pe of Facility (4							
Street Address 17 HARRISON AVENUE	1.411				X 1	×	Subchapter 8	3 (Other than K ivate & comme		dings	, home	es,		
City (5) NORTH HALEDON				l a		Sqı	uare Feet	# of Floors	E	Bldg. A	\ge			
County (6) PASSAIC				Code (7) USE ONLY)		Cui	rrent Use (Prio	r if being demo	lished)					
Name of Monitoring Firm Hired by Bu N/A	ilding Owner (8)		ASCM	l No.	2011-2011-2011-2011-2011-2011-2011-2011		batement Cont	ractor (9) CONTRACT	ING	-				
Street Address			1	,11	Street	Add			1140					
City, State, Zip Code				5	City, S	State,	Zip Code N, NJ 0701							
Project Manager for Monitoring Firm		Telephor	ne No.	Teleph 973-		No. 3-8700	License 00494		-3					
Start Date (10) 9/10/2012	Schedul 9/14/2		npletion (Date (11)			SHA Monitor AS (9) ABO\	/E						
Occupancy Status During Abatement					Street			, L						
Facility Closed/Vacated During Abatement Performed Outside of Other – Describe:					City, S	State,	Zip Code	-						
Scope of Work (Check All That Apply ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Is	Renova Demolit	ion on		>	\ \ \ \	Mini-Enclosure Glovebag Proce	nt with Negativedure (*) and Non-Fr		cedur	re ement	t		
Location of Asbestos-Containing Material (AC <u>TO BE ABATED</u> In Facility (13)	CM) Use Ma Cus	Normal ed Sole iintenar todial S (12)	iy by nce/ Staff?	Asbesti (i.e. t	Description os Containing M thermal system surfacing, VA other miscellar	Mater s ins AT, or	ulation,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure		
BASEMENT	Yes	No X	N/A		PIPE	-		80 LF	X	-				
J. OLIVICIA														
Name of Registered Waste Hauler		N	JDEP W	/aste	Cubic Yards		Name of R	egistered Land	fill	<u> </u>				
TWO BROTHERS CONTRAC	CTING	No.	of Waste 2 WASTE MANAG					G.R.C).W.(3.				
City, State CLIFTON, NJ	301	Disposal Date 9/14/2012		City, State	SVILLE, PA		4							
Completed by VIVECA RAMOS	Title SEC	RETA	RETARY Signature						Date 8/30/2012					

CK 17209

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

Date of Notification (1) 8/30/2012				Name of Building Owner/Operator (2) ELEANORE MISKEWITZ C/O APRIL SHERE SERVING TO Street Address 67 OLD SMALLEYTOWN ROAD City, State, Zip Code WARREN, NJ 07059 Name of Contact Telephone										Ety	
Agencies Notified	Type Notification			Street Ad 67 OLI	ddress D SMAL	LEYTO	WN F	ROAD)	45.	aron	-5 4	M): ;	ဂှ
EPA DEP DOL	Amended Amendment #		_	City, Star WARR	te, Zip Co EN, NJ	ode 07059					& LICE	SCO	NŢļ	201	
N DOH DCA	Emergency (in justification) Cancellation	cluding	-	ivallie of	Contact	RINGTO				Tel	ephone Nu	mber	16	C)	
Name of Facility Where	Abatement is Taking	Place (3)		FACIL	LITY INFO	ORMATIO	N	Туре	of Facility (4	l)			120.02	- 43	<i>a</i>
RESIDENCE			7						School (K-12			-			
Street Address 67 OLD SMALLEY	TOWN ROAD							N (Subchapter (Other (i.e. pr etc.)				dings,	home	es,
City (5) WARREN								Squar	re Feet	# 0	f Floors	В	ldg. A	ge	
County (6) SOMERSET				County C	Code (7) ISE ONLY))		Curre	nt Use (Prio	r if bei	ng demolis	hed)	1-2-1-10		
Name of Monitoring Firm	Hired by Building Ov	vner (8)		ASCM	No.	4			tement Cont			NG			
Street Address								Addres		ORD BLVD.					
City, State, Zip Code			-						ip Code			- 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10			
Project Manager for Mon	itoring Firm		T	Telephor	ne No.	10 1		one No	, NJ 0701 o.	4	License 1	No.		-	
Start Date (10)	d Con	nnlation [Date (11)			956-8	3700 HA Monitor		00494						
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Scope of Work (Check A	II That Apply)									8300000			DIE S		
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City, State CLIFTON, NJ						Disposa 9/18/2			City, State MORRI		LE, PA				1
Completed by VIVECA RAMOS		Title SECF	RETA	ARY		Sig	inature VL	vec	ake	44	0	ate /30/20	12		

CK 2433

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

RECEIVED

20120

Date of Notification (1)		Na	me of B	uilding Owner/Or	perator (Inc.	2012	SEP	-5	A	4
gencies Notified Type Notification	- Ar	1 1	reet Add	ress EAST	Cir	1 news	vente	SL	US CFA	00	140
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☐ Emergency (inc	cluding	- 1 N	ame of C	ontact			Telephone Num	ber		_	
T DOH justification) □ DCA □ Cancellation		J		Petti			···				\dashv
ame of Facility Where Abatement is Taking F	Place (3)		FACILI	TY INFORMATIO	N	Type of Facility (4)					
March 4 Co. In	10					☐ School (K-12) ☐ Subchapter 8	(Other than K-12)	l build	lings	homes	
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County (6)	050	(A) C	ounty Co	ode (7)		Current Use (Prior of fice bl	if being demolishe	ed)	70		
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Lity, State, Zip Code	8 0	N	301		1/4	elenscek	. (40		-	フi 	
Project Manager for Monitoring Firm	g	q	elephone	09.5649	2015	one No. 73-03/3	License No	4	8		
Start Date (10)	Schedule			ate (11)	Name	of OSHA Monitor		-		- 53	70
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Occupancy Status During Abatement (Check					Olloon				15465		
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Scope of Work (Check All That Apply)						· · · · · ·					4
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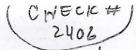
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Check# 1468

NO

State of New Jersey	
TIFICATION OF ASBESTOS ABATEMENT	No.
(Pursuant to NJAC 8:60 and 5:16)	RECEIVER

Date of Notification (1)	30 / 12	Table File			of Building n Osborn	Owner/Operator (2	2	012 SEP -5 SBESTUS C	AM o			
Agencies Notified EPA	Type Notification Initial Amended			310 4tl	Address n Street		14	SHESTOS C	'Our	· < :		
☑ DOLWD ☑ DHSS	Amended Amendment #			City, S	tate, Zip C	ode		a LICEN	ING	IUL		
DRSS	Emergency (in]	Dunell	en, NJ 08	8812			1110	_0	A	
(NJAC 5:23-8)	justification)			Name	of Contact			Telephone Nur	nber	V		*
	☐ Cancellation			Damoi	n Osborn							
				FAC	CILITY IN	FORMATION						
Name of Facility When	e Abatement is Taking	Place	(3)				Type of Facility	(4)				
Private home	,	5	80 50				School (K-12					
Street Address								8 (Other than K-1			_	
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City (5)							Square Feet	# of Floors	BI	dg. A	ge	
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Name of Monitoring Fi	rm Hired by Building (Owner (8)	ASCM	No.	Name of Abateme	ent Contractor (9)				
					*	Gr Tech LLC						
Street Address					20000	Street Address					W-1	
						576 Valley Rd #	283					
City, State, Zip Code						City, State, Zip Co	ode					
						Wayne, NJ 0747	70					
Project Manager for M	lonitoring Firm		Tele	phone	No.	Telephone No.		License No.			-	
						973-638-1777		01127				
Start Date-(10)	Schei	duled C	omple	tion Da	te (11)	Name of OSHA N	Ionitor					9 9
09 / 08	/ _12	09 /	09	1	12	Envirovision Co	ncultante Inc					
Occupancy Status Du		2/02/15/1004				Street Address	iisuitants,iiic					
☐ Facility Closed/Vac				ment			Dood Dido #	244				
Abatement Perform					cribe	20-21 Wagaraw City, State, Zip Co		34A	7.892			
Time of Abatemen	t:P	M/	PM_		AM	Here are the second second second second						
Scope of Work (Check	all that apply)					Fair Lawn, NJ 0	/410					
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Name of Registered V	Vasta Hauler	14	L L)FP Wast	Hauler ID No.	Cubic Yards of Wast	Name of Do-	stared Landfill	لبالب	IJIJ,	Ш	
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City, State						Disposal Date	City, State		1-1			
Wayne, NJ 07470						TBD	Tullytown, P	Α				
Completed By (Print o	r Type) Titl	e		*		Signature /	4		Date	-		
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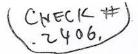


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State of New Jersey

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riame of Facility Where Abatement is Taking	7	1.					chool (K-12) subchapter 8 (other (I.e., priv	Other than K-12) ate &-commercial t	owiang:		
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Name of Monitoring Firm Hired by Building C				+				E Ave.			
Sireer Adoress				十				E N.J.O	805	<u>۔</u>	
Praeci Manager for Monitoring Firm	Ti	Teleph	one No.	=	L	io	-0472	License No			
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Ouner - Describe: Scope of Work (Check all that apply)				=_1	BE	ul Contain	ment with Ne	gative Pressure			
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supancy Status During Abatement (0110000 017	halam	sen!			7000					
- interest Dunner FAMI	6 Lellon or .			City. State, a	to Code		- 11	T .	5 . 5		
Abatement Performed Outside of No	omal Facility	Houn		Δ., Δ.	ت تناه	DUMC	E, N.	<u> </u>	003		_
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cope of Work (Check all that apply)					J. FACIOSUII		2				
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	1 186	ALL PARTY		Descript	ion of			-			_
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and Registered Waste Hauler			179		Onte	CIN STATE		THE STATE OF THE S		- 1	
name of Registered Waste Hauler				Deposal	Date	1,11	DBIN	F. 1	0,0		1.
Name of Registered Waste Haulor KLEMCO INC.		20	57.	A CONTRACTOR OF LABORS	1 2 3	woo	17/3/1	TOSIC	-		-
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KIÉMCO LNC	0,5,0	00		Sign	alure	110	And Girls	Date	0/3	1/1	6
Name of Registered Waste Haulor KIEMCO INC. Cin State MDPLE SINDE, I Competed By ()	U,J,0		ER	Sign	a osc	MIS	lum	- q	P/3	1/1	2

Date of Notification (1) 08/31/12		Name of Building Owner/Operator (2) Annette Digirolamo 1012 SEP -5 AH 9: 2										2		
Agencies Notified Type Notification		- 1 -	Street Add					FI.	58	ESTOS	CON	ITR	0L	
EPA Initial DEP Amended Amendment #			City, State Boontor						Č	LICE	M318	G	0	ļ.,
Emergency (ir justification) DCA Emergency (ir justification) Cancellation	ncluding		Name of C Anentte		amo				Tele	ephone Nun	ber			
			FACILI	TY INFO	RMATION							-		_
Name of Facility Where Abatement is Taking Private House Street Address 104 Taft Street	Place (3)		-				Sub	ool (K-12) 3 (Othe	er than K-12 & commercia	!) al build	ings,	nome	s,
City (5) Boonton						-	Square F 2,000		# 01	f Floors	10.0000	dg. A	ge	
County (6) Morris			County Co					2.	r if bei	ng demolish	ied)			
Name of Monitoring Firm Hired by Building O	wner (8)	1	ASCM	No.			of Abatem							
N/A Street Address						Street A	Address Isall Dri							
City, State, Zip Code		3.75m				City, St	ate, Zip (Code					-	
Project Manager for Monitoring Firm		1	Telephon	e No.		Telepho	one No. 864-202			License N	0.			
Start Date (10) 09/09/12		pletion D	ate (11)			of OSHA								
Occupancy Status During Abatement (Check	09/11/12 COnly One)					Street /	Address East 30t	h Stree	t	A Control of				
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe:	eriod of Ab al Facility F	atem lours	ent		71.5	City, St	tate, Zip (York, N	Code						
Scope of Work (Check All That Apply) ≥3 sf or ≥3 if ≥160 sf or ≥260 if	STATE OF THE PARTY	nova moliti				×	Mini-E Glove	Enclosure bag Proc	edure	h Negative I			0	
	1000000	ocati	2000									Abate	ement pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Main Custo	Sole tenar	rmally Solely by tenance/ dial Staff? Description Asbestos Contain (i.e. thermal sysurfacir				laterial (A s insulatio T, or	CM) on,	(Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A		nino i	insula	tion			0 L.F.	x		U	-
Basement	X				pipe i	nsuia	uon	2000		O L.I .	1			
		- 5			en e					1-1-1				
		1.	JDEP W	onto	Cubic Y	/orde		Name of	Renie	tered Landfi				
Name of Registered Waste Hauler Pro-Tech, LLC		H	lauler ID 90713		of Wast			Minerva	-					
City, State New Haven, CT				£7,67	Disposa on cor		1	City, Stat Wayne:		gh, OH				70000
Completed by Marko Stankovic Title President				Total Control	Si	gnature		Han	"		ate 8/31/	12		